13-003

ORIGINAL

# LONG-TERM CARE APPLICATION FOR PERMIT

## SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

**This Section must be completed for all projects.**

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HEALTH FACILITIES & SERVICES REVIEW BOARD

### DESCRIPTION OF PROJECT

**Project Type**

| [Check one] | | [check one] | |
|---|---|---|---|
| ■ | General Long-term Care | ☐ | Establishment of a new LTC facility |
| ☐ | Specialized Long-term Care | ☐ | Establishment of new LTC services |
| | | ☐ | Expansion of an existing LTC facility or service |
| | | ■ | Modernization of an existing facility |

**Narrative Description**

Provide in the space below, a brief narrative description of the project. Explain **WHAT** is to be done, **NOT WHY** it is being done. If the project site does NOT have a street address, include a legal description of the site. Include the rationale regarding the project's classification as substantive or non-substantive.
**Include: the number and type of beds involved; the actions proposed (establishment, expansion and/or modernization); the ESTIMATED total project cost and the funding source(s) for the project.**

St. Paul's Home, Inc. ("St. Paul's" or the "Facility") is an existing long term care facility located in at 1021 West E Street, Belleville, Illinois and first opened on June 12, 1927. After a series of renovations and expansions in the 40's, 50's, 60's, 70's, and 80's, St. Paul's grew to its current capacity of 113 skilled care beds (licensed as 78 skilled nursing beds and 35 intermediate care beds) along with 62 shelter care beds.

The proposed project is for the modernization of the existing Facility by replacing the facility onsite, without any expansion of existing services but, rather, a modest reduction in the licensed bed capacity of the Facility designed to reflect the current and future needs of the community served by St. Paul's. The modernized Facility will result in 90 skilled care beds (all to be licensed as skilled nursing beds), 18 intermediate care beds structured as a dedicated memory care unit, and 26 shelter care beds (all of the sheltered care rooms will be built to skilled nursing standards). As the same site is being utilized, the Facility will remain located at 1021 West E Street, Belleville, Illinois. The fact that the address will be maintained has been verified with local zoning officials and written confirmation accompanies this application. While sheltered care is not reviewable by the Illinois Health Facilities and Services Review Board ("the "Board") it is worth pointing out that the project will reduce the facility's sheltered care capacity. The overall effect of the project will be a reduction in the number of skilled beds from 113 to 108 (90 skilled and 18 intermediate) and of sheltered care beds from 62 to 26.

The design of the modernized Facility will provide the only person centered mode of care available in the area, and will include four nursing care households: three containing 22 beds each and one containing 24 beds, along with a memory care household of 18 beds. Each household will include a combination of private and companion rooms. Each room will have its own bathroom, including a walk-in shower. Each household will include a kitchen, a dining area, a household laundry, and will have its own dedicated staff. Each household will have their own spa including a lift door tub, towel warmer, and supplemental heat. Moreover, the household kitchens and laundries will be supported by a new commercial kitchen and new commercial laundry. Features shared amongst the various households include a new rehabilitation center, new beauty/barber salon, and new community room and chapel. The modernized Facility will be replacing the aging structure which includes three-bed and four-bed "wards", common/group bathing facilities, and which lacks features which have become essential for residents, ranging from central air conditioning to Wi-Fi capabilities (features which will be included in the modernized Facility).

Once completed, the modernized Facility will have 90,433 gross square feet with 40 private rooms and 25 companion rooms in the skilled households and 10 private and 4 companion rooms in the intermediate, memory care household. This project is considered substantive in accordance with the Board's regulations, specifically 77 Ill. Admin. Code §1110.140(c) and constitutes a modernization in accordance with the Board's regulations, specifically 77 Ill. Admin. Code §1125.650.

## Facility/Project Identification

| |
|---|
| Facility Name: St. Paul's Home for the Aged |
| Street Address: 1021 W. E Street |
| City and Zip Code: Belleville, Illinois 62220 |
| County: St. Clair County Health Service Area: 11 Health Planning Area: |

## Applicant /Co-Applicant Identification

**[Provide for each co-applicant [refer to Part 1130.220].**

| |
|---|
| Exact Legal Name: St. Paul's Home, Inc. |
| Address: 1021 W. E Street, Belleville, Illinois 62220 |
| Name of Registered Agent: Susan Franklin |
| Name of Chief Executive Officer: Steven Seuss, Chairperson |
| CEO Address: 34 Kingston Drive, Belleville, IL 62223 |
| Telephone Number: (618) 397-1113 |

## Type of Ownership (Applicant/Co-Applicants)

| | | | | | |
|---|---|---|---|---|---|
| ■ | Non-profit Corporation | ☐ | Partnership | | |
| ☐ | For-profit Corporation | ☐ | Governmental | | |
| ☐ | Limited Liability Company | ☐ | Sole Proprietorship | ☐ | Other |

- Corporations and limited liability companies must provide an **Illinois certificate of good standing.**
- Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner.

**APPEND DOCUMENTATION AS ATTACHMENT-1 IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Primary Contact

**[Person to receive ALL correspondence or inquiries)**

| |
|---|
| Name: Susan Franklin |
| Title: Operations Director, Registered Agent |
| Company Name: St. Paul's Home |
| Address: 1021 W. E Street, Belleville, Illinois 62220 |
| Telephone Number: (618) 233-2095 |
| E-mail Address: susanf@standrews1.com |
| Fax Number: (618) 233-2109 |

## Additional Contact

[Person who is also authorized to discuss the application for permit]

| |
|---|
| Name: Mark J. Silberman |
| Title: Legal Counsel |
| Company Name: Duane Morris, LLP |
| Address: 190 S. LaSalle, Suite 3700 Chicago, Illinois 60603-3433 |
| Telephone Number: (312) 499-6713 |
| E-mail Address: MJSilberman@duanemorris.com |
| Fax Number: (312) 277-6957 |

## Post Permit Contact

[Person to receive all correspondence subsequent to permit issuance. **This person must be an employee of the applicant.**]

| |
|---|
| Name: Susan Franklin |
| Title: Registered Agent |
| Company Name: St. Paul's Home |
| Address: 1021 W. E Street, Belleville, Illinois 62220 |
| Telephone Number: (618) 233-2095 |
| E-mail Address: susanf@standrews1.com |
| Fax Number: (618) 233-2109 |

## Site Ownership

[Provide this information for each applicable site]

| |
|---|
| Exact Legal Name of Site Owner: St. Paul's Home for the Aged |
| Address of Site Owner: 1021 W. E Street, Belleville, Illinois 62220 |
| Street Address or Legal Description of Site: 1021 W. E Street, Belleville, Illinois 62220 |
| **Proof of ownership or control of the site is to be provided as . Examples of proof of ownership are property tax statement, tax assessor's documentation, deed, notarized statement of the corporation attesting to ownership, an option to lease, a letter of intent to lease or a lease.** |
| **APPEND DOCUMENTATION AS ATTACHMENT-2, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.** |

## Operating Identity/Licensee

[Provide this information for each applicable facility, and insert after this page.]

Exact Legal Name: St. Paul's Home, Inc.

Address: 1021 W. E Street, Belleville, Illinois 62220

| | | | | | |
|---|---|---|---|---|---|
| ■ | Non-profit Corporation | ☐ | Partnership | | |
| ☐ | For-profit Corporation | ☐ | Governmental | | |
| ☐ | Limited Liability Company | ☐ | Sole Proprietorship | ☐ | Other |

- Corporations and limited liability companies must provide an Illinois Certificate of Good Standing.
- Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner.
- **Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.**

**APPEND DOCUMENTATION AS ATTACHMENT-3, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Organizational Relationships

Provide (for each co-applicant) an organizational chart containing the name and relationship of any person or entity who is related (as defined in Part 1130.140). If the related person or entity is participating in the development or funding of the project, describe the interest and the amount and type of any financial contribution.

**APPEND DOCUMENTATION AS ATTACHMENT-4, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Flood Plain Requirements

[Refer to application instructions.]

Provide documentation that the project complies with the requirements of Illinois Executive Order #2005-5 pertaining to construction activities in special flood hazard areas. As part of the flood plain requirements please provide a map of the proposed project location showing any identified floodplain areas. Floodplain maps can be printed at **www.FEMA.gov** or **www.illinoisfloodmaps.org**. **This map must be in a readable format**. In addition please provide a statement attesting that the project complies with the requirements of Illinois Executive Order #2005-5 **(http://www.hfsrb.illinois.gov)**.

**APPEND DOCUMENTATION AS ATTACHMENT -5, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Historic Resources Preservation Act Requirements

[Refer to application instructions.]

Provide documentation regarding compliance with the requirements of the Historic Resources Preservation Act.

**APPEND DOCUMENTATION AS ATTACHMENT-6, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## State Agency Submittals

The following submittals are up- to- date, as applicable:

■ All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted (see below)

☐ All reports regarding outstanding permits (no outstanding permits or reporting)

**If the applicant fails to submit updated information for the requirements listed above, the application for permit will be deemed incomplete.**

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From: Roate, George [mailto:George.Roate@Illinois.gov]
Sent: Friday, October 12, 2012 9:10 AM
To: Christopher H. Wiltse
Subject: St. Paul's Home Belleville Compliance Check

Good morning, Mr. Wiltse:
Per our telephone conversation, St. Paul's Home, 1021 West E Street, Belleville, is compliant with its annual survey reporting requirements, and any past Certificate of Need (CON) applications. Please be advised that a review of individual applicants/owners has not been conducted, as they have not been identified as part of a pending CON application. Thank you.

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## CERTIFICATION

The application must be signed by the authorized representative(s) of the applicant entity. The authorized representative(s) are:

- in the case of a corporation, any two of its officers or members of its Board of Directors;
- in the case of a limited liability company, any two of its managers or members (or the sole manger or member when two or more managers or members do not exist);
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

**This Application for Permit is filed on the behalf of ST. PAUL'S HOME, INC. *** **in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this application for permit on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the permit application fee required for this application is sent herewith or will be paid upon request.**

Steven C. Suess
SIGNATURE

Steven C Suess
PRINTED NAME

Chairperson
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 2 day of January 2013

Signature of Notary

"OFFICIAL SEAL"
LISA SCHMIDT
NOTARY PUBLIC—STATE OF ILLINOIS
MY COMMISSION EXPIRES MAY 9, 2015

Seal

Dennis Spencer
SIGNATURE

Dennis Spencer
PRINTED NAME

Treasurer
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 2 day of January 2013

Signature of Notary

"OFFICIAL SEAL"
LISA SCHMIDT
NOTARY PUBLIC—STATE OF ILLINOIS
MY COMMISSION EXPIRES MAY 9, 2015

Seal

00006

*Insert EXACT legal name of the applicant

# SECTION II – PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS

This Section is applicable to ALL projects.

## Criterion 1125.320 – Purpose of the Project

**READ THE REVIEW CRITERION** and provide the following required information:

**PURPOSE OF PROJECT**

1. Document that the project will provide health services that improve the health care or well-being of the market area population to be served.
2. Define the planning area or market area, or other, per the applicant's definition.
3. Identify the existing problems or issues that need to be addressed, as applicable and appropriate for the project.
4. Cite the sources of the information provided as documentation.
5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.
6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals **as appropriate**.

For projects involving modernization, describe the conditions being upgraded if any. For facility projects, include statements of age and condition and regulatory citations if any. For equipment being replaced, include repair and maintenance records.

**NOTE: Information regarding the "Purpose of the Project" will be included in the State Board Report.**
**APPEND DOCUMENTATION AS ATTACHMENT-10, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. Each item (1-6) must be identified in Attachment 10.**

## Criterion 1125.330 – Alternatives

**READ THE REVIEW CRITERION** and provide the following required information:

**ALTERNATIVES**

1. Identify **ALL** of the alternatives to the proposed project:

   Alternative options **must** include:

   a. Proposing a project of greater or lesser scope and cost;

   b. Pursuing a joint venture or similar arrangement with one or more providers or entities to meet all or a portion of the project's intended purposes; developing alternative settings to meet all or a portion of the project's intended purposes;

   c. Utilizing other health care resources that are available to serve all or a portion of the population proposed to be served by the project; and

   d. Provide the reasons why the chosen alternative was selected.

2. Documentation shall consist of a comparison of the project to alternative options. The comparison shall address issues of total costs, patient access, quality and financial benefits in both the short term (within one to three years after project completion) and long

term. This may vary by project or situation. **FOR EVERY ALTERNATIVE IDENTIFIED THE TOTAL PROJECT COST AND THE REASONS WHY THE ALTERNATIVE WAS REJECTED MUST BE PROVIDED.**

3. The applicant shall provide empirical evidence, including quantified outcome data that verifies improved quality of care, as available.

**APPEND DOCUMENTATION AS ATTACHMENT-11, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

# SECTION III – BED CAPACITY, UTILIZATION AND APPLICABLE REVIEW CRITERIA

**This Section is applicable to all projects proposing establishment, expansion or modernization of LTC categories of service that are subject to CON review, as provided in the Illinois Health Facilities Planning Act [20 ILCS 3960]. It is comprised of information requirements for each LTC category of service, as well as charts for each service, indicating the review criteria that must be addressed for each action (establishment, expansion and modernization).** After identifying the applicable review criteria for each category of service involved , read the criteria and provide the required information, AS APPLICABLE TO THE CRITERIA THAT MUST BE ADDRESSED:

## Criterion 1125.510 – Introduction

## Bed Capacity

Applicants proposing to establish, expand and/or modernize General Long Term Care must submit the following information:

**Indicate bed capacity changes by Service:**

| Category of Service | Total # Existing Beds* | Total # Beds After Project Completion |
|---|---|---|
| ■ General Long-Term Care | 113 | 108<br>(90 skilled nursing beds)<br>(18 intermediate care beds) |
| ☐ Specialized Long-Term Care | N/A | N/A |
| ■ Shelter Care (non-reviewable) | 62 | 26 |

***Existing number of beds as authorized by IDPH and posted in the "LTC Bed Inventory" on the HFSRB website (www.hrfsb.illinois.gov). PLEASE NOTE:** ANY bed capacity discrepancy from the Inventory will result in the application being deemed **incomplete**.

## Utilization

**Utilization for the most current CALENDAR YEAR:**

| Category of Service | Year | Admissions | Patient Days |
|---|---|---|---|
| ■ General Long Term Care | 2011 | 248 | 36,765 |
| ☐ Specialized Long-Term Care | N/A | N/A | N/A |

## Applicable Review Criteria - Guide

**The review criteria listed below must be addressed, per the LTC rules contained in 77 Ill. Adm. Code 1125. See HFSRB's website to view the subject criteria for each project type -** (http://hfsrb.illinois.gov). To view LTC rules, click on "Board Administrative Rules" and then click on "77 Ill. Adm. Code 1125".

READ THE APPLICABLE REVIEW CRITERIA OUTLINED BELOW and **submit the required documentation for the criteria, as described in SECTIONS IV and V:**

## GENERAL LONG-TERM CARE

| PROJECT TYPE | REQUIRED REVIEW CRITERIA | |
|---|---|---|
| | **Section** | **Subject** |
| **Establishment of Services or Facility** | .520 | Background of the Applicant |
| | .530(a) | Bed Need Determination |
| | .530(b) | Service to Planning Area Residents |
| | .540(a) or (b) + (c) + (d) or (e) | Service Demand – Establishment of General Long Term Care |
| | .570(a) & (b) | Service Accessibility |
| | .580(a) & (b) | Unnecessary Duplication & Maldistribution |
| | .580(c) | Impact of Project on Other Area Providers |
| | .590 | Staffing Availability |
| | .600 | Bed Capacity |
| | .610 | Community Related Functions |
| | .620 | Project Size |
| | .630 | Zoning |
| | .640 | Assurances |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

| | | |
|---|---|---|
| **Expansion of Existing Services** | .520 | Background of the Applicant |
| | .530(b) | Service to Planning Area Residents |
| | .550(a) + (b) or (c) | Service Demand – Expansion of General Long-Term Care |
| | .590 | Staffing Availability |
| | .600 | Bed Capacity |
| | .620 | Project Size |
| | .640 | Assurances |
| | .560(a)(1) through (3) | Continuum of Care Components |
| | .590 | Staffing Availability |
| | .600 | Bed Capacity |
| | .610 | Community Related Functions |

| | | |
|---|---|---|
| | .630 | Zoning |
| | .640 | Assurances |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

| | | |
|---|---|---|
| **Continuum of Care – Establishment or Expansion** | .520 | Background of the Applicant |
| | .560(a)(1) through (3) | Continuum of Care Components |
| | .590 | Staffing Availability |
| | .600 | Bed Capacity |
| | .610 | Community Related Functions |
| | .630 | Zoning |
| | .640 | Assurances |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

| | | |
|---|---|---|
| **Defined Population – Establishment or Expansion** | .520 | Background of the Applicant |
| | .560(b)(1) & (2) | Defined Population to be Served |
| | .590 | Staffing Availability |
| | .600 | Bed Capacity |
| | .610 | Community Related Functions |
| | .630 | Zoning |
| | .640 | Assurances |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

| | | |
|---|---|---|
| **Modernization** | .650(a) | Deteriorated Facilities |
| | .650(b) & (c) | Documentation |
| | .650(d) | Utilization |
| | .600 | Bed Capacity |
| | .610 | Community Related Functions |
| | .620 | Project Size |
| | .630 | Zoning |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

# SPECIALIZED LONG-TERM CARE

| PROJECT TYPE | REQUIRED REVIEW CRITERIA | |
|---|---|---|
| | **Section** | **Subject** |
| **Establishment of LTC Developmentally Disabled – (Adult)** | .720(a) | Facility Size |
| | .720(b) | Community Related Functions |
| | .720(c) | Availability of Ancillary and Support Programs |
| | .720(d) | Recommendations from State Departments |
| | .720(f) | Zoning |
| | .720(g) | Establishment of Beds – Developmentally Disable -Adult |
| | .720(j) | State Board Consideration of Public Hearing Testimony |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

| | | |
|---|---|---|
| **Establishment of LTC Developmentally Disabled - Children** | .720(a) | Facility Size |
| | .720(b) | Community Related Functions |
| | .720(c) | Availability of Ancillary and Support Programs |
| | .720(d) | Recommendations from State Departments |
| | .720(f) | Zoning |
| | .720(j) | State Board Consideration of Public Hearing Testimony |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

| | | |
|---|---|---|
| **Establishment of Chronic Mental Illness** | .720(a) | Facility Size |
| | .720(b) | Community Related Functions |
| | .720(c) | Availability of Ancillary and Support Programs |
| | .720(f) | Zoning |
| | .720(g) | Establishment of Chronic Mental Illness |
| | .720(j) | State Board Consideration of Public Hearing Testimony |
| | .800 | Estimated Total Project Cost |

| | | |
|---|---|---|
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

| | | |
|---|---|---|
| **Establishment of Long Term Medical Care for Children** | .720(a) | Facility Size |
| | .720(b) | Community Related Functions |
| | .720(c) | Availability of Ancillary and Support Programs |
| | .720(e) | Long-Term Medical Care for Children-Category of Service |
| | .720(f) | Zoning |
| | .720(j) | State Board Consideration of Public Hearing Testimony |
| | .800 | Estimated Total Project Cost |
| | Appendix A | Project Costs and Sources of Funds |
| | Appendix B | Related Project Costs |
| | Appendix C | Project Status and Completion Schedule |
| | Appendix D | Project Status and Completion Schedule |

# SECTION IV - SERVICE SPECIFIC REVIEW CRITERIA

## GENERAL LONG-TERM CARE

### Criterion 1125.520 – Background of the Applicant (NOT APPLICABLE - MODERNIZATION)

**BACKGROUND OF APPLICANT**

The applicant shall provide:

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.

2. A certified listing of any adverse action taken against any facility owned and/or operated by the applicant during the three years prior to the filing of the application.

3. Authorization permitting HFSRB and DPH access to any documents necessary to verify the information submitted, including, but not limited to: official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. **Failure to provide such authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.**

4. If, during a given calendar year, an applicant submits more than one application for permit, the documentation provided with the prior applications may be utilized to fulfill the information requirements of this criterion. In such instances, the applicant shall attest the information has been previously provided, cite the project number of the prior application, and certify that no changes have occurred regarding the information that has been previously provided. The applicant is able to submit amendments to previously submitted information, as needed, to update and/or clarify data.

**APPEND DOCUMENTATION AS ATTACHMENT-12, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-4) MUST BE IDENTIFIED IN ATTACHMENT 11.**

### Criterion 1125.530 - Planning Area Need (NOT APPLICABLE - MODERNIZATION)

1. Identify the calculated number of beds needed (excess) in the planning area. See HFSRB website (http://hfsrb.illinois.gov) and click on "Health Facilities Inventories & Data".

2. Attest that the primary purpose of the project is to serve residents of the planning area and that at least 50% of the patients will come from within the planning area.

3. Provide letters from referral sources (hospitals, physicians, social services and others) that attest to total number of prospective residents (by zip code of residence) who have received care at existing LTC facilities located in the area during the 12-month period prior to submission of the application. Referral sources shall verify their projections and the methodology used, as described in Section 1125.540.

**APPEND DOCUMENTATION AS ATTACHMENT-13, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.540 - Service Demand – Establishment of General Long Term Care (NOT APPLICABLE – MODERNIZATION)

- **If the applicant is an existing facility wishing to establish this category of service or a new facility, #1 – 4 must be addressed. Requirements under #5 must also be addressed if applicable.**
- **If the applicant is not an existing facility and proposes to establish a new general LTC facility, the applicant shall submit the number of annual projected referrals.**

1. Document the number of referrals to other facilities, for each proposed category of service, for each of the latest two years. Documentation of the referrals shall include: resident/patient origin by zip code; name and specialty of referring physician or identification of another referral source; and name and location of the recipient LTC facility.

2. Provide letters from referral sources (hospitals, physicians, social services and others) that attest to total number of prospective residents (by zip code of residence) who have received care at existing LTC facilities located in the area during the 12-month period prior to submission of the application. Referral sources shall verify their projections and the methodology used.

3. Estimate the number of prospective residents whom the referral sources will refer annually to the applicant's facility within a 24-month period after project completion. Please note:

    - The anticipated number of referrals cannot exceed the referral sources' documented historical LTC caseload.

    - The percentage of project referrals used to justify the proposed expansion cannot exceed the historical percentage of applicant market share, within a 24-month period after project completion

    - Each referral letter shall contain the referral source's Chief Executive Officer's notarized signature, the typed or printed name of the referral source, and the referral source's address

4. Provide verification by the referral sources that the prospective resident referrals have not been used to support another pending or approved Certificate of Need (CON) application for the subject services.

5. **If a projected demand for service is based upon rapid population growth in the applicant facility's existing market area** (as experienced annually within the latest 24-month period), the projected service demand shall be determined as follows:

    a. The applicant shall define the facility's market area based upon historical resident/patient origin data by zip code or census tract;

    b. Population projections shall be produced, using, as a base, the population census or estimate for the most recent year, for county, incorporated place, township or community area, by the U.S. Bureau of the Census or IDPH;

    c. Projections shall be for a maximum period of 10 years from the date the application is submitted;

    d. Historical data used to calculate projections shall be for a number of years no less

than the number of years projected;

e. Projections shall contain documentation of population changes in terms of births, deaths and net migration for a period of time equal to or in excess of the projection horizon;

f. Projections shall be for total population and specified age groups for the applicant's market area, as defined by HFSRB, for each category of service in the application (see the HFSRB Inventory); and

g. Documentation on projection methodology, data sources, assumptions and special adjustments shall be submitted to HFSRB.

**APPEND DOCUMENTATION AS ATTACHMENT- 14, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.550 - Service Demand – Expansion of General Long-Term Care (NOT APPLICABLE – MODERNIZATION)

The applicant shall document #1 **and** either #2 or #3:

1. Historical Service Demand

   a. An average annual occupancy rate that has equaled or exceeded occupancy standards for general LTC, as specified in Section 1125.210(c), for each of the latest two years.

   b. If prospective residents have been referred to other facilities in order to receive the subject services, the applicant shall provide documentation of the referrals, including completed applications that could not be accepted due to lack of the subject service and documentation from referral sources, with identification of those patients by initials and date.

2. Projected Referrals
   The applicant shall provide documentation as described in Section 1125.540(d).

3. **If a projected demand for service is based upon rapid population growth in the applicant facility's existing market area** (as experienced annually within the latest 24-month period), the projected service demand shall be determined as described in Section 1125.540 (e).

**APPEND DOCUMENTATION AS ATTACHMENT- 15, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.560 - Variances to Computed Bed Need (NOT APPLICABLE – MODERNIZATION)

### Continuum of Care:

The applicant proposing a continuum of care project shall demonstrate the following:

1. The project will provide a continuum of care for a geriatric population that includes independent living and/or congregate housing (such as unlicensed apartments, high rises for the elderly and retirement villages) and related health and social services. The housing complex shall be on the

same site as the health facility component of the project.

2. The proposal shall be for the purposes of and serve only the residents of the housing complex and shall be developed either after the housing complex has been established or as a part of a total housing construction program, provided that the entire complex is one inseparable project, that there is a documented demand for the housing, and that the licensed beds will not be built first, but will be built concurrently with or after the residential units.

3. The applicant shall demonstrate that:

   a. The proposed number of beds is needed. Documentation shall consist of a list of available patients/residents needing the proposed project. The proposed number of beds shall not exceed one licensed LTC bed for every five apartments or independent living units;

   b. There is a provision in the facility's written operational policies assuring that a resident of the retirement community who is transferred to the LTC facility will not lose his/her apartment unit or be transferred to another LTC facility solely because of the resident's altered financial status or medical indigency; and

   c. Admissions to the LTC unit will be limited to current residents of the independent living units and/or congregate housing.

**Defined Population:**

The applicant proposing a project for a defined population shall provide the following:

1. The applicant shall document that the proposed project will serve a defined population group of a religious, fraternal or ethnic nature from throughout the entire health service area or from a larger geographic service area (GSA) proposed to be served and that includes, at a minimum, the entire health service area in which the facility is or will be physically located.

2. The applicant shall document each of the following:

   a. A description of the proposed religious, fraternal or ethnic group proposed to be served;

   b. The boundaries of the GSA;

   c. The number of individuals in the defined population who live within the proposed GSA, including the source of the figures;

   d. That the proposed services do not exist in the GSA where the facility is or will be located;

   e. That the services cannot be instituted at existing facilities within the GSA in sufficient numbers to accommodate the group's needs. The applicant shall specify each proposed service that is not available in the GSA's existing facilities and the basis for determining why that service could not be provided.

   f. That at least 85% of the residents of the facility will be members of the defined population group. Documentation shall consist of a written admission policy insuring that the requirements of this subsection (b)(2)(F) will be met.

   g. That the proposed project is either directly owned or sponsored by, or affiliated with, the religious, fraternal or ethnic group that has been defined as the population to be served by the project. The applicant shall provide legally binding documents that prove ownership, sponsorship or affiliation.

**APPEND DOCUMENTATION AS ATTACHMENT- 16, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.570 - Service Accessibility (NOT APPLICABLE – MODERNIZATION)

1. Service Restrictions

   The applicant shall document that **at least one** of the following factors exists in the planning area, as applicable:

   - The absence of the proposed service within the planning area;
   - Access limitations due to payor status of patients/residents, including, but not limited to, individuals with LTC coverage through Medicare, Medicaid, managed care or charity care;
   - Restrictive admission policies of existing providers; or
   - The area population and existing care system exhibit indicators of medical care problems, such as an average family income level below the State average poverty level, or designation by the Secretary of Health and Human Services as a Health Professional Shortage Area, a Medically Underserved Area, or a Medically Underserved Population.

2. Additional documentation required:

   The applicant shall provide the following documentation, as applicable, concerning existing restrictions to service access:

   a. The location and utilization of other planning area service providers;

   b. Patient/resident location information by zip code;

   c. Independent time-travel studies;

   d. Certification of a waiting list;

   e. Admission restrictions that exist in area providers;

   f. An assessment of area population characteristics that document that access problems exist;

   g. Most recently published IDPH Long Term Care Facilities Inventory and Data (see www.hfsrb.illinois.gov).

**APPEND DOCUMENTATION AS ATTACHMENT- 17, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

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## Criterion 1125.580 - Unnecessary Duplication/Maldistribution (NOT APPLICABLE – MODERNIZATION)

1. The applicant shall provide the following information:
   a. A list of all zip code areas that are located, in total or in part, within 30 minutes normal travel time of the project's site;
   b. The total population of the identified zip code areas (based upon the most recent population numbers available for the State of Illinois); and
   c. The names and locations of all existing or approved LTC facilities located within 30 minutes normal travel time from the project site that provide the categories of bed service that are proposed by the project.
2. The applicant shall document that the project will not result in maldistribution of services.
3. The applicant shall document that, within 24 months after project completion, the proposed project:
   a. Will not lower the utilization of other area providers below the occupancy standards specified in Section 1125.210(c); and
   b. Will not lower, to a further extent, the utilization of other area facilities that are currently (during the latest 12-month period) operating below the occupancy standards.

**APPEND DOCUMENTATION AS ATTACHMENT- 18, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.590 - Staffing Availability (NOT APPLICABLE – MODERNIZATION)

1. For each category of service, document that relevant clinical and professional staffing needs for the proposed project were considered and that licensure and JCAHO staffing requirements can be met.
2. Provide the following documentation:
   a. The name and qualification of the person currently filling the position, if applicable; and
   b. Letters of interest from potential employees; and
   c. Applications filed for each position; and
   d. Signed contracts with the required staff; or
   e. A narrative explanation of how the proposed staffing will be achieved.

**APPEND DOCUMENTATION AS ATTACHMENT- 19, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

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## Criterion 1125.600 Bed Capacity

The maximum bed capacity of a general LTC facility is 250 beds, unless the applicant documents that a larger facility would provide personalization of patient/resident care and documents provision of quality care based on the experience of the applicant and compliance with IDPH's licensure standards (77 Ill. Adm. Code: Chapter I, Subchapter c (Long-Term Care Facilities)) over a two-year period.

**APPEND DOCUMENTATION AS ATTACHMENT- 20, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.610 - Community Related Functions

The applicant shall document cooperation with and the receipt of the endorsement of community groups in the town or municipality where the facility is or is proposed to be located, such as, but not limited to, social, economic or governmental organizations or other concerned parties or groups. Documentation shall consist of copies of all letters of support from those organizations.

**APPEND DOCUMENTATION AS ATTACHMENT- 21, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.620 - Project Size

The applicant shall document that the amount of physical space proposed for the project is necessary and not excessive. The proposed gross square footage (GSF) cannot exceed the GSF standards as stated in Appendix A of 77 Ill. Adm. Code 1125 (LTC rules), unless the additional GSF can be justified by documenting one of the following:

1. Additional space is needed due to the scope of services provided, justified by clinical or operational needs, as supported by published data or studies;
2. The existing facility's physical configuration has constraints or impediments and requires an architectural design that results in a size exceeding the standards of Appendix A;
3. The project involves the conversion of existing bed space that results in excess square footage.

**APPEND DOCUMENTATION AS ATTACHMENT- 22, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.630 - Zoning

The applicant shall document **one** of the following:

1. The property to be utilized has been zoned for the type of facility to be developed;
2. Zoning approval has been received; or
3. A variance in zoning for the project is to be sought.

**APPEND DOCUMENTATION AS ATTACHMENT- 23, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.640 - Assurances

1. The applicant representative who signs the CON application shall submit a signed and dated statement attesting to the applicant's understanding that, by the second year of operation after the project completion, the applicant will achieve and maintain the occupancy standards specified in Section 1125.210(c) for each category of service involved in the proposal.

2. For beds that have been approved based upon representations for continuum of care (Section 1125.560(a)) or defined population (Section 1125.560(b)), the facility shall provide assurance that it will maintain admissions limitations as specified in those Sections for the life of the facility. To eliminate or modify the admissions limitations, prior approval of HFSRB will be required. **(NOT APPLICABLE – NO CONTINUUM OF CARE)**

**APPEND DOCUMENTATION AS ATTACHMENT- 24, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Criterion 1125.650 - Modernization

1. If the project involves modernization of a category of LTC bed service, the applicant shall document that the bed areas to be modernized are deteriorated or functionally obsolete and need to be replaced or modernized, due to such factors as, but not limited to:

   a. High cost of maintenance;

   b. non-compliance with licensing or life safety codes;

   c. Changes in standards of care (e.g., private versus multiple bed rooms); or

   d. Additional space for diagnostic or therapeutic purposes.

2. Documentation shall include the most recent:

   a. IDPH and CMMS inspection reports; and

   b. Accrediting agency reports.

3. Other documentation shall include the following, as applicable to the factors cited in the application:

   a. Copies of maintenance reports;

   b. Copies of citations for life safety code violations; and

   c. Other pertinent reports and data.

4. Projects involving the replacement or modernization of a category of service or facility shall meet or exceed the occupancy standards for the categories of service, as specified in Section 1125.210(c).

APPEND DOCUMENTATION AS ATTACHMENT- 25, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

## SPECIALIZED LONG-TERM CARE

### Criterion 1125.720 - Specialized Long-Term Care – Review Criteria (NOT APPLICABLE)

**This section is applicable to all projects proposing specialized long-term care services or beds.**

1. **Community Related Functions**

Read the criterion and submit the following information:

a. a description of the process used to inform and receive input from the public including those residents living in close proximity to the proposed facility's location;

b. letters of support from social, social service and economic groups in the community;

c. letters of support from municipal/elected officials who represent the area where the project is located.

2. **Availability of Ancillary and Support Services**

Read the criterion, which applies only to ICF/DD 16 beds and fewer facilities, and submit the following:

a. a copy of the letter, sent by certified mail return receipt requested, to each of the day programs in the area requesting their comments regarding the impact of the project upon their programs and any response letters;

b. a description of the public transportation services available to the proposed residents;

c. a description of the specialized services (other than day programming) available to the residents;

d. a description of the availability of community activities available to the facility's residents.

e. documentation of the availability of community workshops.

3. **Recommendation from State Departments**

Read the criterion and submit a copy of the letters sent, including the date when the letters were sent, to the Departments of Human Services and Healthcare and Family Services requesting these departments to indicate if the proposed project meets the department's planning objectives regarding the size, type, and number of beds proposed, whether the project conforms or does not conform to the department's plan, and how the project assists or hinders the department in achieving its planning objectives.

4. **Long-term Medical Care for Children Category of Service**

Read the criterion and submit the following information:

a. a map outlining the target area proposed to be served;

b. the number of individuals age 0-18 in the target area and the number of individuals in the target area that require the type of care proposed, include the source documents for this estimate;

c. any reports/studies that show the points of origin of past patients/residents admissions to the facility;

d. describe the special programs or services proposed and explain the relationship of these programs to the needs of the specialized population proposed to be served.

e. indicate why the services in the area are insufficient to meet the needs of the area population;

f. documentation that the 90% occupancy target will be achieved within the first full year of

5. **Zoning**

Read the criterion and provide a letter from an authorized zoning official that verifies appropriate zoning.

6. **Establishment of Chronic Mental Illness**

Read the criterion and provide the following:

a. documentation of how the resident population has changed making the proposed project necessary.

b. indicate which beds will be closed to accommodate these additional beds.

c. the number of admissions for this type of care for each of the last two years.

7. **Variance to Computed Bed Need for Establishment of Beds for Developmentally Disabled Placement of Residents from DHS State Operated Beds**

**Read this criterion and submit the following information:**

a. documentation that all of the residents proposed to be served are now residents of a DHS facility;

b. documentation that each of the proposed residents has at least one interested family member who resides in the planning area or at least one interested family member that lives out of state but within 15 miles of the planning area boundary where the facility is or will be located;

c. if the above is not the case then you must document that the proposed resident has lived in a DHS operated facility within the planning area in which the proposed facility is to be located for more than 2 years and that the consent of the legal guardian has been obtained;

d. a letter from DHS indicating which facilities in the planning area have refused to accept referrals from the department and the dates of any refusals and the reasons cited for each refusal;

e. a copy of the letter (sent certified--return receipt requested) to each of the underutilized facilities in the planning area asking if they accept referrals from DHS-operated facilities, listing the dates of each past refusal of a referral, and requesting an explanation of the basis for each refusal;

f. documentation that each of the proposed relocations will save the State money;

g. a statement that the facility will only accept future referrals from an area DHS facility if a bed is available;

h. an explanation of how the proposed facility conforms with or deviates from the DHS comprehensive long range development plan for developmental disabilities services.

**APPEND DOCUMENTATION AS ATTACHMENT-26, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

# SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW

## Criterion 1125.800 Estimated Total Project Cost

**The following Sections DO NOT need to be addressed by the applicants or co-applicants responsible for funding or guaranteeing the funding of the project if the applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's (the rating shall be affirmed within the latest 18 month period prior to the submittal of the application):**

- **Availability of Funds – Review Criteria**
- **Financial Viability – Review Criteria**
- **Economic Feasibility – Review Criteria, subsection (a)**

### Availability of Funds

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: **Indicate the dollar amount to be provided from the following sources:**

| | |
|---|---|
| $2,000,000 | a. Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to:<br>1) the amount of cash and securities available for the project, including the identification of any security, its value and availability of such funds; and<br>2) interest to be earned on depreciation account funds or to be earned on any asset from the date of applicant's submission through project completion; |
| $0 | b. Pledges – for anticipated pledges, a summary of the anticipated pledges showing anticipated receipts and discounted value, estimated time table of gross receipts and related fundraising expenses, and a discussion of past fundraising experience. |
| $1,000,000 | c. Gifts and Bequests – verification of the dollar amount, identification of any conditions of use, and the estimated time table of receipts; |
| $27,475,000 | d. Debt – a statement of the estimated terms and conditions (including the debt time period, variable or permanent interest rates over the debt time period, and the anticipated repayment schedule) for any interim and for the permanent financing proposed to fund the project, including:<br>1. For general obligation bonds, proof of passage of the required referendum or evidence that the governmental unit has the authority to issue the bonds and evidence of the dollar amount of the issue, including any discounting anticipated;<br>2. For revenue bonds, proof of the feasibility of securing the specified amount and interest rate;<br>3. For mortgages, a letter from the prospective lender attesting to the expectation of making the loan in the amount and time indicated, including the anticipated interest rate and any conditions associated with the mortgage, such as, but not limited to, adjustable interest rates, balloon payments, etc.;<br>4. For any lease, a copy of the lease, including all the terms and conditions, including any purchase options, any capital improvements to the property and provision of capital equipment;<br>5. For any option to lease, a copy of the option, including all terms and conditions. |

| | | |
|---|---|---|
| $0 | e. | Governmental Appropriations – a copy of the appropriation Act or ordinance accompanied by a statement of funding availability from an official of the governmental unit. If funds are to be made available from subsequent fiscal years, a copy of a resolution or other action of the governmental unit attesting to this intent; |
| $0 | f. | Grants – a letter from the granting agency as to the availability of funds in terms of the amount and time of receipt; |
| $1,137,496 | g. | All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project. |
| $31,612,496 | | **TOTAL FUNDS AVAILABLE** |

**APPEND DOCUMENTATION AS ATTACHMENT-27, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Financial Viability

**All the applicants and co-applicants shall be identified, specifying their roles in the project funding or guaranteeing the funding (sole responsibility or shared) and percentage of participation in that funding.**

**Financial Viability Waiver (NOT APPLICABLE)**

**The applicant is not required to submit financial viability ratios if:**

1. **"A" Bond rating or better**
2. **All of the projects capital expenditures are completely funded through internal sources**
3. **The applicant's current debt financing or projected debt financing is insured or anticipated to be insured by MBIA (Municipal Bond Insurance Association Inc.) or equivalent**
4. **The applicant provides a third party surety bond or performance bond letter of credit from an A rated guarantor.**

**See Section 1120.130 Financial Waiver for information to be provided**

**APPEND DOCUMENTATION AS ATTACHMENT-28, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

1. The applicant or co-applicant that is responsible for funding or guaranteeing funding of the project shall provide viability ratios for the latest three years for which **audited financial statements are available and for the first full fiscal year at target utilization, but no more than two years following project completion.** When the applicant's facility does not have facility specific financial statements and the facility is a member of a health care system that has combined or consolidated financial statements, the system's viability ratios shall be provided. If the health care system includes one or more hospitals, the system's viability ratios shall be evaluated for conformance with the applicable hospital standards.

| **Provide Data for Projects Classified as:** | **Category A or Category B (last three years)** | | | **Category B (Projected)** |
|---|---|---|---|---|
| **Enter Historical and/or Projected Years:** | 2010 | 2011 | 2012 | Projected |
| Current Ratio | 0.40 | 3.39 | 3.86 | 2.45 |
| Net Margin Percentage | 4.68% | 8.26% | 7.01% | 3.81% |
| Percent Debt to Total Capitalization | 44.18% | 44.32% | 43.68% | 49.05% |
| Projected Debt Service Coverage | 2.39 | 3.23 | 3.60 | 1.82 |
| Days Cash on Hand | 46 | 50 | 82 | 36 |
| Cushion Ratio | 2.16 | 2.57 | 6.09 | 0.67 |

Provide the methodology and worksheets utilized in determining the ratios detailing the calculation and applicable line item amounts from the financial statements. Complete a separate table for each co-applicant and provide worksheets for each.

2. Variance

Applicants not in compliance with any of the viability ratios shall document that another organization, public or private, shall assume the legal responsibility to meet the debt obligations should the applicant default.

**APPEND DOCUMENTATION AS ATTACHMENT 29, IN NUMERICAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

## Economic Feasibility

### This section is applicable to all projects

**A. Reasonableness of Financing Arrangements**

The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to one of the following:

1. That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation; or

2. That the total estimated project costs and related costs will be funded in total or in part by borrowing because:

   A. A portion or all of the cash and equivalents must be retained in the balance sheet asset accounts in order to maintain a current ratio of at least 1.5 times for LTC facilities; or

   B. Borrowing is less costly than the liquidation of existing investments, and the existing investments being retained may be converted to cash or used to retire debt within a 60-day period.

**B. Conditions of Debt Financing**

This criterion is applicable only to projects that involve debt financing. The applicant shall document that the conditions of debt financing are reasonable by submitting a notarized statement signed by an authorized representative that attests to the following, as applicable:

1. That the selected form of debt financing for the project will be at the lowest net cost available;

2. That the selected form of debt financing will not be at the lowest net cost available, but is more advantageous due to such terms as prepayment privileges, no required mortgage, access to additional indebtedness, term (years), financing costs and other factors;

3. That the project involves (in total or in part) the leasing of equipment or facilities and that the expenses incurred with leasing a facility or equipment are less costly than constructing a new facility or purchasing new equipment.

**C. Reasonableness of Project and Related Costs**

Read the criterion and provide the following:

Identify each area impacted by the proposed project and provide a cost and square footage allocation for new construction and/or modernization using the following format (insert after this page).

**COST AND GROSS SQUARE FEET BY SERVICE**

| Area (list below) | A | B | C | D | E | F | G | H | Total Cost (G + H) |
|---|---|---|---|---|---|---|---|---|---|
| | Cost/Square Foot New | Mod. | Gross Sq. Ft. New | Circ.* | Gross Sq. Ft. Mod. | Circ.* | Const. $ (A x C) | Mod. $ (B x E) | |
| Nursing | $198.80 | - | 65,249 | - | - | - | $12,971,556 | - | $12,971,556 |
| Contingency | $18.33 | - | 65,249 | - | - | - | $1,196,000 | - | $1,196,000 |
| TOTALS | $217.13 | - | 65,249 | - | - | - | $14,167,556 | | $14,167,556 |

* Include the percentage (%) of space for circulation

**D. Projected Operating Costs**

The applicant shall provide the projected direct annual operating costs (in current dollars per equivalent patient day or unit of service) for the first full fiscal year at target utilization but no more than two years following project completion. Direct cost means the fully allocated costs of salaries, benefits and supplies for the service.

**E. Total Effect of the Project on Capital Costs**

The applicant shall provide the total projected annual capital costs (in current dollars per equivalent patient day) for the first full fiscal year at target utilization but no more than two years following project completion.

**APPEND DOCUMENTATION AS ATTACHMENT - 30, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

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APPENDIX A

## Project Costs and Sources of Funds

Complete the following table listing all costs associated with the project. When a project or any component of a project is to be accomplished by lease, donation, gift, or other means, the fair market or dollar value (refer to Part 1130.140) of the component must be included in the estimated project cost. If the project contains non-reviewable components that are not related to the provision of health care, complete the second column of the table below. Note, the use and sources of funds must equal.

| Project Costs and Sources of Funds | | | |
|---|---|---|---|
| **USE OF FUNDS** | **CLINICAL** | **NONCLINICAL** | **TOTAL** |
| Preplanning Costs | $473,869 | $214,127 | $687,996 |
| Site Survey and Soil Investigation | $94,706 | $42,794 | $137,500 |
| Site Preparation | $482,137 | 217,683 | $700,000 |
| Off Site Work | $0 | $0 | $0 |
| New Construction Contracts | $0 | $0 | $0 |
| Modernization Contracts | $14,143,632 | $6,391,069 | $20,534,701 |
| Contingencies | $344,384 | $155,616 | $500,000 |
| Architectural/Engineering Fees | $631,266 | $285,250 | $916,516 |
| Consulting and Other Fees | $765,909* | $346,091* | $1,112,000[1] |
| Movable or Other Equipment (not in construction contracts) | $1,102,028 | $497,972 | $1,600,000 |
| Bond Issuance Expense (project related) | $979,024 | $442,391 | $1,421,415 |
| Net Interest Expense During Construction (project related) | $408,004 | $184,364 | $592,368 |
| Fair Market Value of Leased Space or Equipment | $0 | $0 | $0 |
| Other Costs To Be Capitalized | $351,271 | $158,729 | $510,000 |
| Acquisition of Building or Other Property (excluding land) | $0 | $2,900,000* | $2,900,000[2] |
| **TOTAL USES OF FUNDS** | $19,776,231 | $11,836,265 | $31,612,496 |
| **SOURCE OF FUNDS** | **CLINICAL** | **NONCLINICAL** | **TOTAL** |
| Cash and Securities | **$1,251,165** | **$748,835** | **$2,000,000** |
| Pledges | **$0** | **$0** | **$0** |
| Gifts and Bequests | **$625,583** | **$374,417** | **$1,000,000** |
| Bond Issues (project related) | **$0** | **$0** | **$0** |
| Mortgages | **$17,187,885** | **$10,287,115** | **$27,475,000** |
| Leases (fair market value) | **$0** | **$0** | **$0** |
| Governmental Appropriations | **$0** | **$0** | **$0** |
| Grants | **$0** | **$0** | **$0** |
| Other Funds and Sources | **$711,598*** | **$425,898*** | **$1,137,496[3]** |
| **TOTAL SOURCES OF FUNDS** | **$19,776,231** | **$11,836,265** | **$31,612,496** |

[1] Includes reserve for replacement, working capital, and consulting/other fees.
[2] Payoff of existing debt on independent living apartments.
[3] Line of Credit

**APPENDIX B**

## Related Project Costs

Provide the following information, as applicable, with respect to any land related to the project that will be or has been acquired during the last two calendar years:

Land acquisition is related to project ☐ Yes ■ No
Purchase Price: $ Land Donated as Gifts over last 86 years

**NOTE**: There are no land acquisition costs related to this project. The modernized facility will be built on the same land currently owned by St. Paul's Home, Inc. which has been donated to the community during the 86 year history of the facility.

Fair Market Value: $ 7,662,000

**NOTE**: St. Paul's Home, Inc. owns a total of 7.19 acres of land. As reflected in the attached documentation, an appraisal was conducted in September 2011 by Tellatin, Short & Hansen, Inc. which placed the real estate value of the property and existing buildings at $7,662,000. This figure excludes furniture, fixtures, equipment, business and intangible assets but includes the existing structures (skilled nursing facility, sheltered care facility, and independent living apartment buildings).

The modernized facility, along with the existing independent living apartment building, will occupy approximately one half of these 7.19 acres upon project completion.

A new appraisal will be conducted as part of the financing process of the modernized facility. St. Paul's home plans to provide the Board a more current appraised value as it is obtained so as to ensure this Board has the most accurate and relevant information available.

The project involves the establishment of a new facility or a new category of service

☐ Yes ■ No

If yes, provide the dollar amount of all **non-capitalized** operating start-up costs (including operating deficits through the first full fiscal year when the project achieves or exceeds the target utilization specified in Part 1100.

Estimated start-up costs and operating deficit cost is $ _____.

00029

APPENDIX C

## Project Status and Completion Schedules

Indicate the stage of the project's architectural drawings:

☐ None or not applicable ☐ Preliminary

■ Schematics ☐ Final Working

Anticipated project completion date (refer to Part 1130.140): January 1, 2015

Indicate the following with respect to project expenditures or to obligation (refer to Part 1130.140):

☐ Purchase orders, leases or contracts pertaining to the project have been executed.
☐ Project obligation is contingent upon permit issuance. Provide a copy of the contingent "certification of obligation" document, highlighting any language related to CON Contingencies

■ Project obligation will occur after permit issuance.

00030

APPENDIX D

## Cost/Space Requirements

Provide in the following format, the department/area **DGSF** or the building/area **BGSF** and cost. The type of gross square footage either **DGSF** or **BGSF** must be identified. The sum of the department costs **MUST** equal the total estimated project costs. Indicate if any space is being reallocated for a different purpose. Include outside wall measurements plus the department's or area's portion of the surrounding circulation space. **Explain the use of any vacated space.**

| | | Gross Square Feet | | Amount of Proposed Total Gross Square Feet That Is: | | | |
|---|---|---|---|---|---|---|---|
| **Dept. / Area** | **Cost** | **Existing** | **Proposed** | **New Const.** | **Modernized** | **As Is** | **Vacated Space** |
| **CLINICAL** | | | | | | - | |
| Resident Rooms | $6,151,450 | - | 32,041 | 32,041 | - | - | - |
| Nurse, Meds, O2 | $281,679 | - | 1,404 | 1,404 | - | - | - |
| Clean Utility, Soiled Utility, Clean Linen | $211,355 | - | 1,190 | 1,190 | - | - | - |
| Spa | $545,912 | - | 1,074 | 1,074 | - | - | - |
| Resident Laundry | $152,660 | | 626 | 626 | | | |
| Janitor, Misc. Storage | $43,191 | | 280 | 280 | | | |
| Dining, TV, Hearth, Parlor | $1,133,079 | | 6,259 | 6,259 | | | |
| Household Kitchen | $704,358 | | 2,185 | 2,185 | | | |
| Screened or Covered Porch | $250,023 | | 1,500 | 1,500 | | | |
| Corridors | $1,940,000 | | 11,990 | 11,990 | | | |
| Stairs | $313,863 | | 2,107 | 2,107 | | | |
| Restrooms | $230,704 | | 407 | 407 | | | |
| Salon | $74,494 | | 362 | 362 | | | |
| Exam Room | $31,498 | | 197 | 197 | | | |
| Physical Therapy | $235,881 | | 1,460 | 1,460 | | | |
| Elevators | $339,082 | | 596 | 596 | | | |
| Commercial Laundry | $101,979 | | 358 | 358 | | | |
| Housekeeping | $106,624 | | 489 | 489 | | | |
| Renovation | $123,726 | | 724 | 724 | | | |
| Total Review | $12,971,556 | | 65,249 | 65,249 | | | |
| | | | | | | | |
| **NON CLINICAL** | | | | | | | |
| Resident Rooms | $1,690,346 | - | 8,093 | 8,093 | - | - | - |
| Nurse, Meds, O2 | $45,723 | | 212 | 212 | | | |
| Clean Utility, Soiled Utility, Clean Linen | $33,706 | | 183 | 183 | | | |
| Spa | $28,133 | | 177 | 177 | | | |
| Resident Laundry | $35,173 | | 155 | 155 | | | |
| Janitor, Misc. Storage | $262,230 | | 1700 | 1700 | | | |
| Dining, TV, Hearth, Parlor | $207,665 | | 1,138 | 1,138 | | | |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Household Kitchen | $140,872 | | 437 | 437 | | | |
| Screened or Covered Porch | $50,000 | | 300 | 300 | | | |
| Corridors, Lobby, Vestibule | $1,267,768 | | 6,935 | 6,935 | | | |
| Public Restrooms | $223,826 | - | 1,095 | 1,095 | - | - | - |
| Community Room/Chapel, Catering Kitchen | $263,684 | - | 1,460 | 1,460 | - | - | - |
| Stairs | $41,946 | - | 278 | 278 | - | - | - |
| Offices, Conference | $354,245 | | 2,164 | 2,164 | | | |
| Employee Lounge, Lockers | $72,190 | | 468 | 468 | | | |
| Mechanical, Electrical, Plumbing | $88,729 | | 568 | 568 | | | |
| Elevators | $72,953 | | 143 | 143 | | | |
| Commercial Laundry | $80,556 | | 285 | 285 | | | |
| Housekeeping | $24,541 | | 117 | 117 | | | |
| Renovation | $611,110 | | 3,576 | 3,576 | | | |
| Total Non-clinical | $5,595,396 | | 29,484 | 29,484 | | | |
| **TOTAL** | **18,566,952** | | **94,733** | **94,733** | | | |

After paginating the entire, completed application, indicate in the chart below, the page numbers for the attachments included as part of the project's application for permit:

00032

## INDEX OF ATTACHMENTS


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| 2 | Site Ownership | 35-43 |
| 3 | Operating Identity/Licensee | 44 |
| 4 | Organizational Relationships | 45-67 |
| 5 | Flood Plain Requirements | 68-69 |
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| | **General Information Requirements** | |
| 10 | Purpose of the Project | 71-143 |
| 11 | Alternatives to the Project | 144-154 |
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| | **Service Specific - General Long-Term Care** | |
| 12 | Background of the Applicant | N/A |
| 13 | Planning Area Need | N/A |
| 14 | Establishment of General LTC Service or Facility | N/A |
| 15 | Expansion of General LTC Service or Facility | N/A |
| 16 | Variances | N/A |
| 17 | Accessibility | N/A |
| 18 | Unnecessary Duplication/Maldistribution | N/A |
| 19 | Staffing Availability | N/A |
| 20 | Bed Capacity | 155 |
| 21 | Community Relations | 156-169 |
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| 23 | Zoning | 171-173 |
| 24 | Assurances | 174-175 |
| 25 | Modernization | 176-421 |
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| | **Service Specific - Specialized Long-Term Care** | |
| 26 | Specialized Long-Term Care – Review Criteria | N/A |
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| | **Financial and Economic Feasibility:** | |
| 27 | Availability of Funds | 422-424 |
| 28 | Financial Waiver | N/A |
| 29 | Financial Viability | 425-525 |
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| A | Project Costs and Sources of Funds | 28 |
| B | Related Project Costs | 29 |
| C | Project Status and Completion Schedule | 30 |
| D | Cost/Space Requirements | 31-32 |


00033

*File Number* 4102-641-3

# STATE OF ILLINOIS

## OFFICE OF THE SECRETARY OF STATE

## *To all to whom these Presents Shall Come, Greeting:*

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

ST. PAUL'S HOME, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 09, 1961, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

***In Testimony Whereof,*** *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 3RD *day of* OCTOBER *A.D.* 2012 .

Jesse White

SECRETARY OF STATE

Authentication #: 1227702430

Authenticate at: http://www.cyberdriveillinois.com

Jennifer Gomric Minton - St. Clair County Assessor
Charles Suarez - St. Clair County Collector

| Ownership / Addresses | |
|---|---|
| **Parcel Number** | 08-21.0-119-006 |
| **Parcel Year** | 2012 |
| **Property Address** | 1021 W E ST BELLEVILLE, IL 62220 |
| **Property Owner** | ST PAULS HOME FOR THE AGED , |
| **Owner Address** | 1021 W E ST BELLEVILLE, IL 62220 |

| Assessment Level | Land Value | Building Value | Total Value |
|---|---|---|---|
| Assessor Value | 0 | 2995672 | 2995672 |
| Fair Market Value | 0 | 8987016 | 8987016 |

Legal

| | |
|---|---|
| **Township** | BELLEVILLE |
| **Legal Description Line 1** | HILGARDS SUB OF NW SEC 21-IN-8 |
| **Legal Description Line 2** | LOT/SEC-637-BLK/RG-C BK 2548-15 |
| **Legal Description Line 3** | |
| **Legal Description Line 4** | |

**Disclaimer**

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00035

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

# ST. CLAIR COUNTY
## 2011 REAL ESTATE TAXES
## BASED ON ASSESSED VALUE
## AS OF JANUARY 1, 2011

31788

**PARCEL NO.** 08-21.0-119-007

Pay on-line: www.co.st-clair.il.us/tax.htm

E-Mail: treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 18,516 |
| 1977 BASE | | 389 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 6,284 |
| BD OF REVIEW VALUE | | 6,284 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 6,172 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 6,172 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 6,172 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 6,172 |
| TOTAL TAX RATE | X | 8.4125 |
| **TOTAL TAX DUE =** | | **$519.22** |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

| | |
|---|---|
| TWP: | BELLEVILLE |
| TAX CODE: | 02099 |
| UNIT: | 0050 |

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $26.26 | 1.97120 | $26.28 | 0.02 | 5.06 |
| BELLEVILLE DIST #118 | 3.24350 | $43.24 | 3.25960 | $43.45 | 0.21 | 8.37 |
| SWIC DIST #522 | 0.36890 | $4.92 | 0.37860 | $5.05 | 0.13 | 0.97 |
| CITY OF BELLEVILLE | 1.45670 | $19.42 | 1.51070 | $20.14 | 0.72 | 3.88 |
| BELLEVILLE TIF #3 | 0.00000 | $411.96 | 0.00000 | $407.08 | -4.88 | 78.40 |
| ST CLAIR CO GEN | 0.11390 | $1.52 | 0.11330 | $1.51 | -0.01 | 0.29 |
| ST CLAIR CO OTHER | 0.80190 | $10.67 | 0.79990 | $10.65 | -0.02 | 2.05 |
| BELLEVILLE TWP | 0.10280 | $1.37 | 0.10640 | $1.42 | 0.05 | 0.27 |
| CITY OF BELLVLLE LIB | 0.26280 | $3.50 | 0.27280 | $3.64 | 0.14 | 0.70 |
| * TIF INCREMENT IS 4,839 | Totals | 8.3205 | $522.86 | 8.41250 | $519.22 | ($3.64) |

Cad
6/18/12

08-21.0-119-007

GL 50-2111-00

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-610 86 FT W PT EX AS IN BK 2471-1897

**ACRES**
0.00

**Location of Property**
811 W E ST
BELLEVILLE, IL 62220-0000

Dear Taxpayer:
Please read your bill carefully. On or before the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First installment due date:** | **07/18/2012** |
| **Second installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | **09/28/2012** |
| Notice of tax sale by certified mail: | **10/05/2012** |
| Publication of unpaid taxes: | **10/08 - 10/12/2012** |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE **RECEIVED** BEFORE 5 PM ON 11/09/2012

9:00 AM Tax Sale of all unpaid taxes: **11/13/2012**

**No payment will be taken during tax sale.**

I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS**

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

## DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT

Parcel No. 08-21.0-119-007

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 259.61 |
| 09/06 THRU 10/05 | 263.50 |
| 10/06 THRU 11/05* | 277.40 |
| 11/06 THRU 11/09* | 281.29 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

Collector Use Only

**2**

**2nd INSTALLMENT DUE: 09/05/2012**
**2nd INSTALLMENT AMOUNT: $259.61**

DO NOT MARK BELOW THIS LINE

08210119007 2 0000025961 090512 4

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

**ST. CLAIR COUNTY**
**2011 REAL ESTATE TAXES**
**BASED ON ASSESSED VALUE**
**AS OF JANUARY 1, 2011**

38144

**PARCEL NO.** 08-21.0-119-008
Pay on-line: www.co.st-clair.il.us/tax.htm
E-Mail: treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 18,801 |
| 1977 BASE | | 4,246 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 6,381 |
| BD OF REVIEW VALUE | | 6,381 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 6,267 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 6,267 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 6,267 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 6,267 |
| TOTAL TAX RATE | X | 8.4125 |
| **TOTAL TAX DUE** | = | **$527.22** |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

TWP: BELLEVILLE
TAX CODE: 02099
UNIT: 0030

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $125.71 | 1.97120 | $123.54 | -2.17 | 23.43 |
| BELLEVILLE DIST #118 | 3.24350 | $206.97 | 3.25960 | $204.28 | -2.69 | 38.75 |
| SWIC DIST #522 | 0.36890 | $23.54 | 0.37860 | $23.73 | 0.19 | 4.50 |
| CITY OF BELLEVILLE | 1.45670 | $92.95 | 1.51070 | $94.68 | 1.73 | 17.96 |
| BELLEVILLE TIF #3 | 0.00000 | $0.00 | 0.00000 | $0.00 | 0.00 | 0.00 |
| ST CLAIR CO GEN | 0.11390 | $7.27 | 0.11330 | $7.10 | -0.17 | 1.35 |
| ST CLAIR CO OTHER | 0.80190 | $51.17 | 0.79990 | $50.12 | -1.05 | 9.51 |
| BELLEVILLE TWP | 0.10280 | $6.56 | 0.10640 | $6.67 | 0.11 | 1.27 |
| CITY OF BELLVLLE LIB | 0.26280 | $16.77 | 0.27280 | $17.10 | 0.33 | 3.24 |
| Totals | 8.3205 | $530.94 | 8.41250 | $527.22 | ($3.72) | |

Aud
Gilbirt

08-21.0-119-008 GL50-2111-00-00
ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-610 PT AS IN BK 2567-1663

**Location of Property**
815 W E ST
BELLEVILLE, IL 62220-0000

**ACRES**
0.00

Dear Taxpayer:
*Please read your bill carefully. On or before* the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First installment due date:** | **07/18/2012** |
| **Second installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | 09/28/2012 |
| Notice of tax sale by certified mail: | 10/05/2012 |
| Publication of unpaid taxes: | 10/08 - 10/12/2012 |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE RECEIVED BEFORE 5 PM ON 11/09/2012

| | |
|---|---|
| 9:00 AM Tax Sale of all unpaid taxes: | 11/13/2012 |

**No payment will be taken during tax sale.**
I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

## DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT

Parcel No. 08-21.0-119-008

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 263.61 |
| 09/06 THRU 10/05 | 267.56 |
| 10/06 THRU 11/05* | 281.52 |
| 11/06 THRU 11/09* | 285.47 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

Collector Use Only

**2**

**2nd INSTALLMENT DUE: 09/05/2012**
**2nd INSTALLMENT AMOUNT: $263.61**

DO NOT MARK BELOW THIS LINE

08210119008 2 0000026361 090512 1

00037

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

# ST. CLAIR COUNTY
## 2011 REAL ESTATE TAXES
## BASED ON ASSESSED VALUE
## AS OF JANUARY 1, 2011

128917

**PARCEL NO.** 08-21.0-119-011

Pay on-line: www.co.st-clair.il.us/tax.htm
E-Mail: treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 7,845 |
| 1977 BASE | | 2,628 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 2,663 |
| BD OF REVIEW VALUE | | 2,663 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 2,615 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 2,615 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 2,615 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 2,615 |
| TOTAL TAX RATE | X | 8.4125 |
| **TOTAL TAX DUE** | = | **$220.00** |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

TWP: BELLEVILLE
TAX CODE: 02099
UNIT: 0030

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $39.64 | 1.97120 | $39.66 | 0.02 | 18.03 |
| BELLEVILLE DIST #118 | 3.24350 | $65.26 | 3.25960 | $65.58 | 0.32 | 29.81 |
| SWIC DIST #522 | 0.36890 | $7.42 | 0.37860 | $7.62 | 0.20 | 3.46 |
| CITY OF BELLEVILLE | 1.45670 | $29.31 | 1.51070 | $30.40 | 1.09 | 13.82 |
| BELLEVILLE TIF #3 | 0.00000 | $54.18 | 0.00000 | $50.74 | -3.44 | 23.06 |
| ST CLAIR CO GEN | 0.11390 | $2.29 | 0.11330 | $2.28 | -0.01 | 1.04 |
| ST CLAIR CO OTHER | 0.80190 | $16.12 | 0.79990 | $16.09 | -0.03 | 7.31 |
| BELLEVILLE TWP | 0.10280 | $2.07 | 0.10640 | $2.14 | 0.07 | 0.97 |
| CITY OF BELLVLLE LIB | 0.26280 | $5.29 | 0.27280 | $5.49 | 0.20 | 2.50 |
| | | | | | | |
| * TIF INCREMENT IS 603 | **Totals** | **8.3205** | **$221.58** | **8.41250** | **$220.00** | **($1.58)** |

GL 50-2111-00-00 Aud 6/18/12

08-21.0-119-011
ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 WEST E ST
BELLEVILLE IL 62220

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-610 E 50FT OF S 100FT Bk 2716-62

**Location of Property**
803 W E ST
BELLEVILLE, IL 62220-0000

**ACRES**
0.00

Dear Taxpayer:
Please read your bill carefully. On or before the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First Installment due date:** | **07/18/2012** |
| **Second Installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | **09/28/2012** |
| Notice of tax sale by certified mail: | **10/05/2012** |
| Publication of unpaid taxes: | **10/08 - 10/12/2012** |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE RECEIVED BEFORE 5 PM ON 11/09/2012

9:00 AM Tax Sale of all unpaid taxes: **11/13/2012**
**No payment will be taken during tax sale.**
I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS**

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

**DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT**

Parcel No. 08-21.0-119-011

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 110.00 |
| 09/06 THRU 10/05 | 111.65 |
| 10/06 THRU 11/05* | 123.30 |
| 11/06 THRU 11/09* | 124.95 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 WEST E ST
BELLEVILLE IL 62220

Collector Use Only

**2**

**2nd INSTALLMENT DUE: 09/05/2012**
**2nd INSTALLMENT AMOUNT: $110.00**

DO NOT MARK BELOW THIS LINE

08210119011 2 0000011000 090512 8



00038

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

# ST. CLAIR COUNTY
## 2011 REAL ESTATE TAXES
## BASED ON ASSESSED VALUE
## AS OF JANUARY 1, 2011

31876

**PARCEL NO.** 08-21.0-119-017

Pay on-line: www.co.st-clair.il.us/tax.htm

E-Mail: treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 24,492 |
| 1977 BASE | | 774 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 8,313 |
| BD OF REVIEW VALUE | | 8,313 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 8,164 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 8,164 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 8,164 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 8,164 |
| TOTAL TAX RATE | X | 8.4125 |
| TOTAL TAX DUE | = | $686.80 |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

TWP: BELLEVILLE
TAX CODE: 02099
UNIT: 0050

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $39.40 | 1.97120 | $39.42 | 0.02 | 5.74 |
| BELLEVILLE DIST #118 | 3.24350 | $64.87 | 3.25960 | $65.19 | 0.32 | 9.49 |
| SWIC DIST #522 | 0.36890 | $7.38 | 0.37860 | $7.57 | 0.19 | 1.10 |
| CITY OF BELLEVILLE | 1.45670 | $29.13 | 1.51070 | $30.21 | 1.08 | 4.40 |
| BELLEVILLE TIF #3 | 0.00000 | $525.28 | 0.00000 | $518.56 | -6.72 | 75.50 |
| ST CLAIR CO GEN | 0.11390 | $2.28 | 0.11330 | $2.27 | -0.01 | 0.33 |
| ST CLAIR CO OTHER | 0.80190 | $16.02 | 0.79990 | $15.99 | -0.03 | 2.33 |
| BELLEVILLE TWP | 0.10280 | $2.06 | 0.10640 | $2.13 | 0.07 | 0.31 |
| CITY OF BELLVLLE LIB | 0.26280 | $5.26 | 0.27280 | $5.46 | 0.20 | 0.79 |
| * TIF INCREMENT IS 6,164 | Totals | 8.3205 | $691.68 | 8.41250 | $686.80 | ($4.88) |

GL 50-2111-00-00 Ad 6/18/12

08-21.0-119-017
ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-610 N 250 FT EXC E 100 FT & EXC W 8(
AS IN BK2471-1897

**Location of Property**
811 W E ST
BELLEVILLE, IL 62220-0000

**ACRES**
0.00

Dear Taxpayer:
Please read your bill carefully. On or before the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First Installment due date:** | **07/18/2012** |
| **Second Installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | 09/28/2012 |
| Notice of tax sale by certified mail: | 10/05/2012 |
| Publication of unpaid taxes: | 10/08 - 10/12/2012 |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE **RECEIVED** BEFORE 5 PM ON 11/09/2012

9:00 AM Tax Sale of all unpaid taxes: **11/13/2012**
**No payment will be taken during tax sale.**
I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS**

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

## DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT

Parcel No. 08-21.0-119-017

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 343.40 |
| 09/06 THRU 10/05 | 348.55 |
| 10/06 THRU 11/05* | 363.70 |
| 11/06 THRU 11/09* | 368.85 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

Collector Use Only

**2**

**2nd INSTALLMENT DUE: 09/05/2012**
**2nd INSTALLMENT AMOUNT: $343.40**

DO NOT MARK BELOW THIS LINE

08210119017 2 0000034340 090512 1



00039

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

# ST. CLAIR COUNTY
## 2011 REAL ESTATE TAXES
## BASED ON ASSESSED VALUE
## AS OF JANUARY 1, 2011

31990

**PARCEL NO.** 08-21.0-119-018

Pay on-line: www.co.st-clair.il.us/tax.htm

E-Mail: treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 13,971 |
| 1977 BASE | | 3,791 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 4,742 |
| BD OF REVIEW VALUE | | 4,742 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 4,657 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 4,657 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 4,657 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 4,657 |
| TOTAL TAX RATE | X | 8.4125 |
| **TOTAL TAX DUE** | = | **$391.78** |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

TWP: BELLEVILLE

TAX CODE: 02099

UNIT: 0030

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $93.42 | 1.97120 | $91.80 | -1.62 | 23.43 |
| BELLEVILLE DIST #118 | 3.24350 | $153.81 | 3.25960 | $151.80 | -2.01 | 38.75 |
| SWIC DIST #522 | 0.36690 | $17.49 | 0.37860 | $17.63 | 0.14 | 4.50 |
| CITY OF BELLEVILLE | 1.45670 | $69.08 | 1.51070 | $70.35 | 1.27 | 17.96 |
| BELLEVILLE TIF #3 | 0.00000 | $0.00 | 0.00000 | $0.00 | 0.00 | 0.00 |
| ST CLAIR CO GEN | 0.11390 | $5.40 | 0.11330 | $5.28 | -0.12 | 1.35 |
| ST CLAIR CO OTHER | 0.80190 | $38.03 | 0.79990 | $37.26 | -0.77 | 9.51 |
| BELLEVILLE TWP | 0.10280 | $4.87 | 0.10640 | $4.96 | 0.09 | 1.27 |
| CITY OF BELLVLLE LIB | 0.26280 | $12.46 | 0.27280 | $12.70 | 0.24 | 3.24 |
| GL 50-2111-00-00 And Glebe | | | | | | |
| Totals | 8.3205 | $394.56 | 8.41250 | $391.78 | ($2.78) | |

08-21.0-119-018
ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-610 BK2471-1897 EX E 100 FT & EX W &
& EX N 250 FT

**ACRES**
0.00

**Location of Property**
811 W E ST
BELLEVILLE, IL 62220-0000

Dear Taxpayer:
Please read your bill carefully. On or before the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First installment due date:** | **07/18/2012** |
| **Second installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | 09/28/2012 |
| Notice of tax sale by certified mail: | 10/05/2012 |
| Publication of unpaid taxes: | 10/08 - 10/12/2012 |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE **RECEIVED** BEFORE 5 PM ON 11/09/2012

9:00 AM Tax Sale of all unpaid taxes: **11/13/2012**
**No payment will be taken during tax sale.**
I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS**

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

**DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT**

Parcel No. 08-21.0-119-018

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 195.89 |
| 09/06 THRU 10/05 | 198.83 |
| 10/06 THRU 11/05* | 211.77 |
| 11/06 THRU 11/09* | 214.71 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

Collector Use Only

**2**

**2nd INSTALLMENT DUE: 09/05/2012**
**2nd INSTALLMENT AMOUNT: $195.89**

DO NOT MARK BELOW THIS LINE

08210119018 2 0000019589 090512 8

00040

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

**ST. CLAIR COUNTY**
**2011 REAL ESTATE TAXES**
**BASED ON ASSESSED VALUE**
**AS OF JANUARY 1, 2011**

31789

**PARCEL NO.** 08-21.0-119-021
Pay on-line: www.co.st-clair.il.us/tax.htm
E-Mail: treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 19,386 |
| 1977 BASE | | 0 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 6,580 |
| BD OF REVIEW VALUE | | 6,580 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 6,462 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 6,462 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 6,462 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 6,462 |
| TOTAL TAX RATE | X | 8.4125 |
| **TOTAL TAX DUE** | = | **$543.62** |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

TWP: BELLEVILLE
TAX CODE: 02099
UNIT: 0030

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $26.26 | 1.97120 | $26.28 | 0.02 | 4.83 |
| BELLEVILLE DIST #118 | 3.24350 | $43.24 | 3.25960 | $43.45 | 0.21 | 7.99 |
| SWIC DIST #522 | 0.36890 | $4.92 | 0.37860 | $5.05 | 0.13 | 0.93 |
| CITY OF BELLEVILLE | 1.45670 | $19.42 | 1.51070 | $20.14 | 0.72 | 3.70 |
| BELLEVILLE TIF #3 | 0.00000 | $436.58 | 0.00000 | $431.48 | -5.10 | 79.37 |
| ST CLAIR CO GEN | 0.11390 | $1.52 | 0.11330 | $1.51 | -0.01 | 0.28 |
| ST CLAIR CO OTHER | 0.80190 | $10.69 | 0.79990 | $10.65 | -0.04 | 1.96 |
| BELLEVILLE TWP | 0.10280 | $1.37 | 0.10640 | $1.42 | 0.05 | 0.26 |
| CITY OF BELLVLLE LIB | 0.26280 | $3.50 | 0.27280 | $3.64 | 0.14 | 0.67 |
| * TIF INCREMENT IS 5,129 | Totals | 8.3205 | $547.50 | 8.41250 | $543.62 | ($3.88) |

GC 50-3111-00-00 Ad 6/18/12

08-21.0-119-021
ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-610 PT AS IN 2477-415

**ACRES**
0.00

**Location of Property**
811 W E ST
BELLEVILLE, IL 62220-0000

Dear Taxpayer:
Please read your bill carefully. On or before the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First Installment due date:** | **07/18/2012** |
| **Second Installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | 09/28/2012 |
| Notice of tax sale by certified mail: | 10/05/2012 |
| Publication of unpaid taxes: | 10/08 - 10/12/2012 |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE RECEIVED BEFORE 5 PM ON 11/09/2012

9:00 AM Tax Sale of all unpaid taxes: **11/13/2012**
**No payment will be taken during tax sale.**
I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS**

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

**DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT**

Parcel No. 08-21.0-119-021

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 271.81 |
| 09/06 THRU 10/05 | 275.89 |
| 10/06 THRU 11/05* | 289.96 |
| 11/06 THRU 11/09* | 294.04 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

Collector Use Only

**2nd INSTALLMENT DUE:** 09/05/2012
**2nd INSTALLMENT AMOUNT:** $271.81

**2**

DO NOT MARK BELOW THIS LINE

08210119021 2 0000027181 090512 8

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

**ST. CLAIR COUNTY**
**2011 REAL ESTATE TAXES**
**BASED ON ASSESSED VALUE**
**AS OF JANUARY 1, 2011**

128936

**PARCEL NO.** 08-21.0-119-022
**Pay on-line:** www.co.st-clair.il.us/tax.htm
**E-Mail:** treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 24,912 |
| 1977 BASE | | 0 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 8,455 |
| BD OF REVIEW VALUE | | 8,455 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 8,304 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 8,304 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 8,304 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 8,304 |
| TOTAL TAX RATE | X | 8.4125 |
| **TOTAL TAX DUE** | = | **$698.58** |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

TWP: BELLEVILLE
TAX CODE: 02099
UNIT: 0040

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $47.26 | 1.97120 | $47.29 | 0.03 | 6.77 |
| BELLEVILLE DIST #118 | 3.24350 | $77.81 | 3.25960 | $78.20 | 0.39 | 11.19 |
| SWIC DIST #522 | 0.36890 | $8.85 | 0.37860 | $9.08 | 0.23 | 1.30 |
| CITY OF BELLEVILLE | 1.45670 | $34.95 | 1.51070 | $36.24 | 1.29 | 5.19 |
| BELLEVILLE TIF #3 | 0.00000 | $503.90 | 0.00000 | $496.76 | -7.14 | 71.11 |
| ST CLAIR CO GEN | 0.11390 | $2.73 | 0.11330 | $2.72 | -0.01 | 0.39 |
| ST CLAIR CO OTHER | 0.80190 | $19.23 | 0.79990 | $19.20 | -0.03 | 2.75 |
| BELLEVILLE TWP | 0.10280 | $2.47 | 0.10640 | $2.55 | 0.08 | 0.37 |
| CITY OF BELLVLLE LIB | 0.26280 | $6.30 | 0.27280 | $6.54 | 0.24 | 0.94 |

GL 50-211-00-00 Cml 6/18/12

* TIF INCREMENT IS 5,905 | **Totals** | **8.3205** | **$703.50** | **8.41250** | **$698.58** | **($4.92)**

08-21.0-119-022
ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 WEST E ST
BELLEVILLE IL 62220

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-610 S 168FT OF E 100FT EXCEPT THE
100FT OF E 50FT THEREOF BK 2716-62

**ACRES**
0.00

**Location of Property**
803 W E ST
BELLEVILLE, IL 62220-0000

Dear Taxpayer:
Please read your bill carefully. On or before the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First installment due date:** | **07/18/2012** |
| **Second installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | **09/28/2012** |
| Notice of tax sale by certified mail: | **10/05/2012** |
| Publication of unpaid taxes: | **10/08 - 10/12/2012** |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE **RECEIVED** BEFORE 5 PM ON 11/09/2012

9:00 AM Tax Sale of all unpaid taxes: **11/13/2012**
**No payment will be taken during tax sale.**
I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS**

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

**DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT**

Parcel No. 08-21.0-119-022

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 349.29 |
| 09/06 THRU 10/05 | 354.53 |
| 10/06 THRU 11/05* | 369.77 |
| 11/06 THRU 11/09* | 375.01 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 WEST E ST
BELLEVILLE IL 62220

Collector Use Only

**2nd INSTALLMENT DUE:** **09/05/2012**
**2nd INSTALLMENT AMOUNT:** **$349.29**

**2**

DO NOT MARK BELOW THIS LINE

08210119022 2 0000034929 090512 5



00042

**CHARLES SUAREZ**
**COUNTY TREASURER**
**10 PUBLIC SQUARE**
**BELLEVILLE, IL 62220**
www.co.st-clair.il.us

**ST. CLAIR COUNTY**
**2011 REAL ESTATE TAXES**
**BASED ON ASSESSED VALUE**
**AS OF JANUARY 1, 2011**

31738

**PARCEL NO.** 08-21.0-119-025
Pay on-line: www.co.st-clair.il.us/tax.htm
E-Mail: treasurer@co.st-clair.il.us

## TAXING INFORMATION

| | | |
|---|---|---|
| FAIR PROPERTY VALUE | | 196,632 |
| 1977 BASE | | 0 |
| SENIOR FREEZE BASE | | 0 |
| ASSESSORS VALUE | | 66,738 |
| BD OF REVIEW VALUE | | 66,738 |
| TOWNSHIP MULTIPLIER | X | .9821 |
| LOCAL VALUE* | = | 65,544 |
| HIE/DAV VALUE | - | 0 |
| VALUE TO BE EQUALIZED | | 65,544 |
| STATE MULTIPLIER | X | 1.0000 |
| STATE EQUALIZED VALUE | = | 65,544 |
| OWNER OCCUPIED EXEMPTION | - | 0 |
| SENIOR FREEZE | - | 0 |
| SR. HOMESTEAD EXEMPTION | - | 0 |
| RETURNING VET EXEMPTION | - | 0 |
| VET/DISABILITY EXEMPTION | - | 0 |
| FARM ASSESSMENT | + | 0 |
| TAXABLE VALUE | = | 65,544 |
| TOTAL TAX RATE | X | 8.4125 |
| **TOTAL TAX DUE** | = | **$5,513.90** |

*ESTIMATED 1/3 OF FAIR PROPERTY VALUE

TWP: BELLEVILLE
TAX CODE: 02099
UNIT: 0060

## DISTRIBUTION OF 2011 TAXES

| Taxing Body | 2010 Rate | 2010 Tax | 2011 Rate | 2011 Tax | Difference | % of Total |
|---|---|---|---|---|---|---|
| BELLEVILLE HS #201 | 1.97000 | $62.39 | 1.97120 | $62.43 | 0.04 | 1.13 |
| BELLEVILLE DIST #118 | 3.24350 | $102.72 | 3.25960 | $103.23 | 0.51 | 1.87 |
| SWIC DIST #522 | 0.36890 | $11.68 | 0.37860 | $11.99 | 0.31 | 0.22 |
| CITY OF BELLEVILLE | 1.45670 | $46.13 | 1.51070 | $47.84 | 1.71 | 0.87 |
| BELLEVILLE TIF #3 | 0.00000 | $5,289.44 | 0.00000 | $5,247.48 | -41.96 | 95.17 |
| ST CLAIR CO GEN | 0.11390 | $3.61 | 0.11330 | $3.59 | -0.02 | 0.07 |
| ST CLAIR CO OTHER | 0.80190 | $25.39 | 0.79990 | $25.33 | -0.06 | 0.46 |
| BELLEVILLE TWP | 0.10280 | $3.26 | 0.10640 | $3.37 | 0.11 | 0.06 |
| CITY OF BELLVLLE LIB | 0.26280 | $8.32 | 0.27280 | $8.64 | 0.32 | 0.16 |
| * TIF INCREMENT IS 62,377 | Totals | 8.3205 | $5,552.94 | 8.41250 | $5,513.90 | ($39.04) |

GL 50-2111-00-00 AW 6/18/12

08-21.0-119-025
ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

Dear Taxpayer:
Please read your bill carefully. On or before the installment due date, pay the first amount shown on payment coupon. After the due date pay the amount that includes penalty. The dates below are important to you. Please read them carefully.

| | |
|---|---|
| **First installment due date:** | **07/18/2012** |
| **Second installment due date:** | **09/05/2012** |
| Last day to pay and avoid publication: | **09/28/2012** |
| Notice of tax sale by certified mail: | **10/05/2012** |
| Publication of unpaid taxes: | **10/08 - 10/12/2012** |
| **LAST DAY TO PAY TAXES:** | **11/09/2012** |

POSTMARK WILL NOT BE HONORED ON LAST DAY TO PAY PAYMENTS MUST BE **RECEIVED** BEFORE 5 PM ON 11/09/2012

9:00 AM Tax Sale of all unpaid taxes: **11/13/2012**
**No payment will be taken during tax sale.**
I remind you the County Treasurer only collects your taxes and is not responsible for your property assessment or the amount of tax you are paying.

**Legal Description**
HILGARDS SUB OF NW SEC 21-IN-8
HILGARDS SUB OF NW SEC 21-IN-8
LOT/SEC-638 PT LT 638 & ALL LT 608 & PT LT 6 /
2830-1583

ACRES
4.51

**Location of Property**
1201 W E ST
BELLEVILLE, IL 62220-0000

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT. PLEASE KEEP FOR YOUR RECORDS**

| 1st INST: | 2nd INST: |
|---|---|
| DATE PAID: | DATE PAID: |
| AMT. PAID: | AMT. PAID: |

## DETACH AND RETURN THIS COUPON WITH SECOND INSTALLMENT PAYMENT

Parcel No. 08-21.0-119-025

| IF PAID | AMOUNT DUE |
|---|---|
| on or before 09/05 | 2,756.95 |
| 09/06 THRU 10/05 | 2,798.30 |
| 10/06 THRU 11/05* | 2,849.66 |
| 11/06 THRU 11/09* | 2,891.01 |

*INCLUDES $10.00 COST

ST PAULS HOME FOR THE AGED
ST PAULS HOME FOR THE AGED

1021 W E ST
BELLEVILLE IL 62220-1055

Collector Use Only

**2**

**2nd INSTALLMENT DUE: 09/05/2012**
**2nd INSTALLMENT AMOUNT: $2,756.95**

DO NOT MARK BELOW THIS LINE

08210119025 2 0000275695 090512 9

00043

*File Number* 4102-641-3

# STATE OF ILLINOIS

## OFFICE OF THE SECRETARY OF STATE

## *To all to whom these Presents Shall Come, Greeting:*

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

ST. PAUL'S HOME, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 09, 1961, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

***In Testimony Whereof,*** *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 3RD *day of* OCTOBER *A.D.* 2012 .

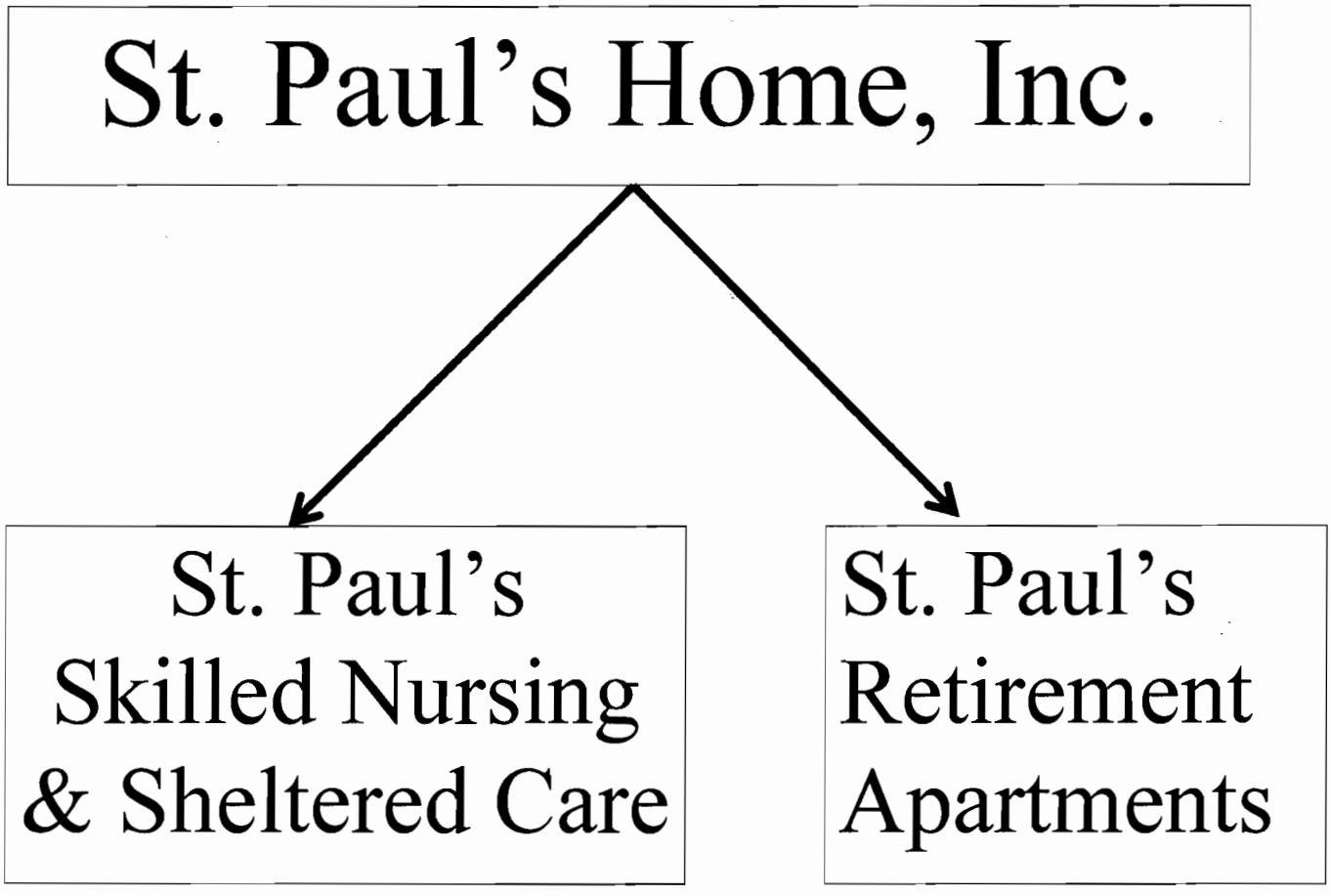
Jesse White

SECRETARY OF STATE

Authentication #: 1227702430

Authenticate at: http://www.cyberdriveillinois.com

00044


St. Paul's Home, Inc.
St. Paul's Skilled Nursing & Sheltered Care
St. Paul's Retirement Apartments

State of Illinois 2089105
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations, and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

| EXPIRATION DATE | CATEGORY | I.D. NUMBER |
|---|---|---|
| 03/21/2013 | DGBE | 0013920 |

LONG TERM CARE LICENSE
SKILLED 078
INTERMEDIATE 035
SHELTERED 082

UNRESTRICTED 175 TOTAL BEDS

BUSINESS ADDRESS
LICENSEE

ST. PAUL'S HOME FOR THE AGED
ST PAUL'S HOME
1021 WEST E STREET
BELLEVILLE IL 62220
EFFECTIVE DATE: 03/22/12

The face of this license has a colored background. Printed by Authority of the State of Illinois • 4/97 •

St. Andrew's
MANAGEMENT SERVICES

PRESIDENT & CEO
Mary Alice Ryan

ST. ANDREW'S MANAGEMENT SERVICES INC.

NOTICE OF INTENT TO RENEW MANAGEMENT AGREEMENT

WITH

ST. PAUL'S HOME

St. Andrew's Management Services, Inc., a Missouri Corporation ("St. Andrew's") hereby gives Notice to St. Paul's Home, an Illinois not-for-profit corporation ("St. Paul's") that St. Andrew's intends to renew the Management Agreement (the "Agreement") made and entered into as of January 18, 2005 by and between St. Andrew's and St. Paul's. This Notice is the "STAMS Notice" referred to in section 6.1 of the Agreement and is given more than ninety (90) days prior to the expiration of the term of the Agreement.

Please note that upon the giving of this "STAMS Notice", under the terms of section 6.1 of the Agreement, the Agreement will renew for a successive five (5) year term from January 18, 2010, unless St. Paul's notifies St. Andrew's at least sixty (60) days prior to January 18, 2010 that it does not intend to renew. If St. Paul's so notifies St. Andrew's that it does not intend to renew the Agreement, the Agreement will terminate at midnight, January 17, 2010.

ST. ANDREW'S MANAGEMENT
SERVICES, INC.

By: Dave Meatheany

Name: DAVE MEATHEANY

Title: Chief Operating Officer

Date: Sept 29, 2009

6633 Delmar Blvd. St. Louis, Missouri 63130 Phone: (314) 726-0111
A Subsidiary of St. Andrew's Resources for Seniors System

ST. PAUL'S HOME

CONFIRMATION OF INTENT TO RENEW MANAGEMENT AGREEMENT

WITH

ST. ANDREW'S MANAGEMENT SERVICES INC.

St. Paul's Home, an Illinois not-for-profit corporation ("St. Paul's") hereby confirms that it has received Notice from St. Andrew's Management Services, Inc., a Missouri Corporation ("St. Andrew's") that St. Andrew's intends to renew the Management Agreement (the "Agreement") made and entered into as of January 18, 2005 by and between St. Andrew's and St. Paul's.

St. Paul's further confirms that it will renew the Agreement for a term of five years beginning January 18, 2010 pursuant to section 6.1 of the Agreement.

ST. PAUL'S HOME

By:_____

Name:_____

Title:_____

Date:_____

## MANAGEMENT AGREEMENT

THIS MANAGEMENT AGREEMENT (the "Agreement") is made and entered into as of this 18th day of January, 2005 (the "Effective Date"), by and between St. Andrew's Management Services, Inc. a Missouri corporation ("St. Andrew's"), and St. Paul's Home, an Illinois not-for-profit corporation (the "Owner").

### RECITALS:

WHEREAS, Owner desires to engage St. Andrew's under the terms of this Agreement to provide its skills and experience to manage the operation of St. Paul's Home, owned by Owner and located at 1021 West E Street, Belleville, Illinois (the "Home"), with the full authority and ultimate control of Home remaining in Owner, acting by and through its Board of Directors (the "Board");

WHEREAS, St. Andrew's is willing to be engaged by Owner under the terms of this Agreement;

NOW, THEREFORE, for and in consideration of the foregoing Recitals, which are hereby made a part of this Agreement, and the mutual covenants and undertakings of the parties herein contained, it is agreed as follows:

### 1. RESPONSIBILITIES OF ST. ANDREW'S

1.1. General Responsibilities of St. Andrew's. St. Andrew's shall have the authority and responsibility to:

1.1.1. provide management services relating to the day-to-day operation of the Home; including, but not limited to assisting the Owner in applying for all licenses required for the Home;

1.1.2. recommend, prepare and develop the policies, budgets and goals for the Home to be adopted or amended by the Owner; and

1.1.3. provide the Owner with relevant information as to operations of the Home.

1.2. Specific Responsibilities of St. Andrew's.

1.2.1. Management. St. Andrew's shall, in accordance with annual budgets prepared by St. Andrew's and approved by Owner:

a. recommend policies and goals to the Owner, and periodically evaluate such policies and goals for regulatory compliance and other purposes;

b. provide management services in connection with the day-to-day operations of the Home, subject to and in accordance with annual budgets and policies established from time to time and approved by the Owner; and

c. develop, install and maintain specific operating procedures, systems and controls as agreed upon by Owner and St. Andrew's.

d. Identify and designate systems and software for payroll, accounting, clinical and other operations to be used by the Home.

1.2.2. Personnel. All staff of the Home shall be employees (or leased employees) of the Owner. In support of the Owner, St. Andrew's shall periodically:

a. recommend the number of employees needed in the various departments and services of Home in accordance with Home's policies and procedures;

b. recommend wage scales and rates of compensation and supervise the establishment and revision of approved wages adopted by the Owner;

c. oversee establishment of job descriptions, employee benefits programs and conditions of employment in accordance with Home's policies, procedures and budget;

d. recommend inservice training for Home staff;

e. recommend personnel policies, procedures, and forms to be adopted by the Owner;

f. recommend employee performance appraisal and goal setting programs;

g. perform on site visits by appropriate staff of St. Andrew's; and

h. as appropriate, from time to time, recruit and train Administrators on the basis of job related criteria. The Administrators shall have supervisory authority over all employees of the Home and shall make employment decisions with regard to such employees in accordance with the personnel policies of the Owner.

1.2.3. Financial Controls. St. Andrew's shall establish and maintain a system of financial procedures and controls for the Home and perform accounting and reporting in accordance with generally accepted accounting principles. As manager, St. Andrew's will have only the obligation to exercise reasonable care in the management and handling of the funds generated from the operation of Home. St. Andrew's shall, in accordance with its past practices, if applicable, establish and administer systems for the development, preparation, and safekeeping of records and books of account relating to the business and financial affairs of the Home, all subject to Board review and approval, as follows:

a. establish and maintain accounts at banks, savings and loan associations, and other financial institutions as are required by the Board;

b. prepare and deliver to the Board Balance Sheets and Statements of Revenues and Expenses with variances from budget for the current period and the year to date

based upon the fiscal year of the Owner, within a reasonable and agreed upon time after the end of each calendar month;

c. Provide basic financial statements (balance sheets, statements of revenues and expenses and statements of cash flow) to any trustees, bondholders, underwriters and other interested parties relating to bond indebtedness of the Owner;

d. Coordinate with the Owner's designated preparer the preparation and filing of such forms and reports as may be required by federal, state and local law;

e. Assist the independent accountants in the annual audit;

f. On an annual basis:

i. At least sixty (60) days prior to the beginning of the fiscal year of Owner, provide annual budgets for operating revenue and expense, capital expenditures and cash flow projections (if requested) for the Home for the succeeding fiscal year of the Owner for approval by the Owner;

ii. Recommend a schedule of resident monthly service fees and other charges in connection with the preparation of annual budgets for approval by the Owner.

1.2.4. Collection of Accounts. St. Andrew's shall oversee the production of the bills for services and materials furnished by Home and establish collection policies and procedures; provided, however, bills for services and materials issued in the name of Home shall be deemed monies owed to Owner; and provided, further, that nothing contained in this subparagraph shall be deemed to require St. Andrew's to undertake any legal proceedings in the collection of such accounts or monies or in the enforcement of the rights of Owner as creditor.

1.2.5. Payment of Accounts and Indebtedness. St. Andrew's shall establish and oversee internal controls through policies and procedures for the payment of payroll, trade accounts, amounts due on short and long-term indebtedness, taxes and all other obligations of Home; provided, that St. Andrew's responsibility under this paragraph shall be limited to the exercise of reasonable diligence and care to apply the funds collected in the operation of Home to its obligations in a timely and prudent manner, and St. Andrew's shall have no liability for any debt or obligation of Home or Owner; further provided that St. Andrew's shall not, in any case, have any obligation to supply, out of its own funds, working capital or other monies for payment of any expense or cost of the Home, including, but not limited to mortgage or bond payments for Home.

1.2.6. Purchases and Leases. Provide oversight management of Home staff in connection with purchases and leases of equipment, supplies and all materials and services that St. Andrew's shall deem to be necessary in the operation of Home and as shall be in accordance with budgets prepared by St. Andrew's and approved by Owner. Any purchase agreement which will obligate Home beyond the term of this Agreement, and any purchase or lease of capital equipment in an amount in excess of ten thousand dollars ($10,000.00), shall be subject to approval of the Board if such item was not included in the budget approved by the Owner. Notwithstanding the above, in the event of an emergency jeopardizing the health and welfare of residents, employees, or

the general public, St. Andrew's shall have the authority to immediately institute the required corrective action. The Board, or its representative, shall be notified as soon as possible of any action taken.

1.2.7. Public Relations/Marketing. St. Andrew's shall:

a. Advise in the planning and developing of a program of public relations and communications subject to approval of the Board including consulting on the development of materials and programs for presentation to its publics, representing Home to its various publics, and monitoring the over-all program.

b. Regularly monitor the occupancy level and make specific recommendations with regard to marketing procedures and promotions;

c. Prepare a comparative report on pricing competition with specific recommendations for the structure of resident rates to the Owner annually.

d. Oversee implementation of marketing procedures and promotions approved by the Owner.

1.2.8. Contracts for Services. Negotiate, enter into, terminate and administer--on behalf of Home--contracts for services including but not limited to medical, paramedical, and other persons and organizations. However, it is agreed that St. Andrew's shall not enter into any such contract not included in the budget approved by the Owner in excess of ten thousand dollars ($10,000.00) without first obtaining the approval of the Board. Notwithstanding the above, in the event of an emergency jeopardizing the health and welfare of residents, employees, or the general public, St. Andrew's shall have the authority to immediately institute the required corrective action. The Board, or its representative, shall be notified as soon as possible of any action taken.

1.2.9. Special Projects. From time to time, engage consultants to perform projects and studies, and to render advice in connection with the operations of Home, which consultants may or may not be employees of St. Andrew's. The fees and expenses for Special Projects shall be approved by the Board representative and shall be borne by the Home. Any special projects involving employees of St. Andrew's that are beyond the scope of the responsibilities outlined in this Agreement will be at additional cost to the Owner. All amounts of the reasonable expenses and fees of such consultants shall be paid directly by Home to St. Andrew's, or, if St. Andrew's shall so request, said amounts shall be paid directly to the consultant involved.

1.2.10. Advisors. From time to time, on Owner's behalf, as St. Andrew's deems necessary in the day-to-day operation of the Home, consult with and secure advice from Owner's attorney, accountant and other professional advisors. The fees and expenses of such advisors shall be borne by the Home. St. Andrew's agrees that it shall not engage the services of any such advisor, other than in connection with day-to-day questions that may arise in the operation of the Home, without first obtaining the approval of the Board.

1.2.11. Authority of St. Andrew's. St. Andrew's shall have no right or authority to commit or obligate the Owner in any manner whatsoever except to the extent specifically provided

herein or with the written consent of the Owner. Upon the approval of a budget by the Owner as provided in this Agreement, St. Andrew's shall be authorized to take all reasonable actions it deems necessary to accomplish the terms thereof and to enter into any contracts expressly provided therein. Such contracts as are approved by the Owner in the previous year may be renewed in a subsequent year if similar in form without additional approval of the Owner pursuant to the annual budget process.

1.2.12. Agreements. St. Andrew's shall recommend standard forms of admission, rental and other agreements for use at the Home for the Owner's approval. Such forms approved by Owner shall become the property of Owner and are not subject to the provisions of Section 6.2.5 herein. All such agreements shall be executed by St. Andrew's on behalf of the Owner utilizing such standard forms so approved by Owner with such charges therefore as the Owner shall have approved in advance in accordance with the budget process, or as otherwise approved in writing by the Owner. St. Andrew's shall use reasonable efforts to enforce all agreements entered into pursuant to the terms hereof but shall have no obligation to incur additional costs on St. Andrew's own account in connection with such efforts. Counsel may be engaged with consent of the Owner. Costs of counsel and other related third party expense shall be borne by Owner

1.2.13. General Assistance. St. Andrew's will provide supervision of the Administrator(s). The Administrator(s) will be employed by St. Andrew's and leased to Owner at Owner's cost and expense. In the event of a vacancy in the Administrator position, an interim Administrator will be sought at the Owner's cost and expense.

1.2.14. Support Systems. St. Andrew's will make available support systems for the Home.

a. A partial list of the support systems that are provided without additional cost to the Home is as follows:

i. Access to St. Andrew's contracts for certain services and supplies;

ii. Administrative support with respect to statutes, regulations and other licensing requirements relating to the operation of a skilled, assisted living and/or congregate care community.

iii. Sharing of certain St. Andrew's developed software, software templates and periodic updates, including any software relating to management information systems. Owner agrees that all St. Andrew's developed software, software templates and template designs shall at all times remain the property of St. Andrew's and that Owner shall have no right to use any such software for any purpose or in any manner following the termination of this Agreement.

iv. Notwithstanding the foregoing, any software developed by or in conjunction with St. Andrew's at Owner's expense for specific application to Owner will remain with Owner and may be used by Owner following termination of this Agreement.

v. Templates for procedure manuals for programs and services. Owner agrees that all St. Andrew's developed manuals shall, at all times, remain the property of St. Andrew's and Owner shall have no right to use any such manuals following the termination of this Agreement. Owner agrees not to utilize any of St. Andrew's developed manuals for any purpose or in any manner following the termination of this Agreement and to return all copies in whatever form (paper, electronic, digital, etc.) to St. Andrew's.

b. A partial list of services that are available to the Home at an additional cost on a fixed fee basis from St. Andrew's or from an unrelated third party if St. Andrew's engages an unrelated third party to provide such services include:

i. Functional specialists (for example, nursing; food service) for short term assignment during periods of staff shortages in critical service areas;

ii. Resident satisfaction surveys, if an outside service is used;

iii. Service as development consultant for expansions, additions and refurbishments and new programs or services;

iv. Temporary Administrators, in the case of vacancy;

v. Coordinate with the Owner's designated preparer the preparation and submission of cost reports, supporting data, and other materials required in connection with reimbursement under Medicare, Medicaid, and other third-party payment contracts and programs in which the Home may from time to time participate (the Home is not anticipated to have a Medicare or Medicaid program);

vi. St. Andrew's electronic mail system for more than four employees, and library of forms, documents and shared information;

vii. Design and development assistance and support in establishing and maintaining an internet site.

1.2.15. Administrators. During the term of this Agreement, Owner shall employ or lease from St. Andrew's, at Owner's expense (and in addition to compensation provided for St. Andrew's as contemplated by Section 7 herein), one or more qualified Administrators (individually, "Administrator", and collectively, the "Administrators") who shall be the chief administrative officer of the Home. St. Andrew's shall have the right to recommend for hire or for non-hire any candidate for employment as an Administrator. Owner shall convey to each person serving as Administrator that, pursuant to this Agreement, St. Andrew's has authority and responsibility for management in connection with the day-to-day operations of the Home, and that the Administrator has the obligation to report and be accountable to St. Andrew's in connection with the operation of the Home. An Administrator for whom either St. Andrew's or the Board has objection at any time will not be hired or retained at the Home.

1.2.16. Quality Initiatives. St. Andrew's shall review and oversee implementation of programs approved by Owner intended to promote quality of clinical and therapeutic services

performed at the Home. St. Andrew's shall also review and from time to time suggest revisions for approval by Owner of record retention guidelines.

## 2. RESPONSIBILITIES OF OWNER

2.1. General Responsibility of Owner. Owner shall retain the responsibility to establish and periodically review and change as necessary the policies, budgets, and short and long range goals of the Home. The Owner retains the right to review and evaluate the performance of St. Andrew's in carrying out the policies and in attaining the budgets and the goals adopted and agreed upon by the Owner and St. Andrew's. Owner is responsible for providing all patient care at the Home.

2.2. Specific Responsibilities of Owner.

2.2.1. Policy Determinations. St. Andrew's shall present to Owner, and, subject to Owner's right of approval, Owner shall:

a. adopt policies relating to the level of services provided in the Home, including intake criteria and policies for transferring residents to facilities which provide a higher level of care;

b. adopt annual budgets to establish guidelines for revenue and expense;

c. adopt the short range and long range goals of the Home;

d. periodically, as needed, review and confirm or change the policies, budgets and goals of the Home; and

e. adopt policies relating to financial assistance for residents.

2.2.2. Personnel. Owner will employ a sufficient number of employees having the qualifications necessary to operate the Home in accordance with the policies, budgets and goals adopted for the Home.

2.2.3. Financial and Operational Matters. The Owner shall:

a. Uniform Accounts. Use the uniform chart of accounts recommended by St. Andrew's.

b. Auditors. Retain the services of a certified public accounting firm, at the Owner's cost, to perform annual audits, to prepare tax returns, to prepare any other reports required for federal or state regulatory agencies which require licensure and/or certification, and to perform other necessary accounting services relating to the Home. St. Andrew's shall not perform or have the responsibility for the performance of accounting services in connection with the activities arising under this Agreement, except as otherwise provided in Section 1.2.3(a), (b) and (c).

c. Coordination. In order to assure proper coordination and to speak with one voice to residents, staff and the various publics, endeavor to communicate actions and decisions concerning the operation of the Home through St. Andrew's. Information, data and

policies affecting the operations management of the Home in the possession of the Owner will be made available to St. Andrew's to enable it to perform its services satisfactorily.

d. Operating Reports; Meetings. Share with St. Andrew's all historical information pertaining to the Home operation including but not limited to financial performance, projections, reports, operating statistics and other analytical information. In order to be a resource to the Owner, St. Andrew's shall have the right to have a representative attend all meetings of the Owner, except for executive sessions. The Owner shall provide St. Andrew's with the same notice of the Owner meetings as is required to be given to its directors and shall endeavor to indicate thereon any such meetings or portions of meetings which will be executive sessions.

e. Consultation Prior to Major Changes. Initiate certain changes in the ownership or management scope of the Home. Such changes may include, but are not limited to, material matters such as expansion, assignment or transfer of the Home, filing for bankruptcy or receivership, alteration of the residency agreement or announcement of a new skilled, assisted living and/or congregate care community. Before implementing a material change, Owner agrees to consult with St. Andrew's to permit St. Andrew's to inform the Owner of the effect of such changes on the operations of the Home.

f. Banking. Maintain one or more accounts in the Owner's name at a federally or state insured bank, and designate the Administrator and officers of St. Andrew's as signatories on such account or accounts, subject to such reasonable policies, terms, limitations and conditions as may be imposed by the Owner.

g. Legal Services. Retain the services of legal counsel, at the Owner's cost, to perform all legal services relating to the Home. St. Andrew's shall not perform or have the responsibility for the performance of legal services in connection with the activities arising hereunder.

h. Systems and Software. Acquire at Home's cost and expense (by purchase, license or other means) the right to use those systems and software designated pursuant to Section 1.2.1(d). St. Andrew's shall assist with negotiations in connection with the acquisition of such rights and shall take all appropriate actions to assure that Home receives the benefit of any favorable pricing arrangements available for St. Andrew's. The cost of acquisition, training, support and updates of systems and software will be borne by Owner.

i. Patient Care. Owner shall be responsible for providing all patient care at the Home.

**3. COMPUTER SYSTEMS.** St. Andrew's shall for the benefit of Home, enter into contracts for the purchase, license or lease of such computer equipment, including network systems and other hardware, as may be necessary to operate the management software and other information systems for the Home. The Owner shall pay the costs and expenses of obtaining and maintaining such computer equipment.

**4. COMMUNICATION AND REPORTS.** St. Andrew's shall from time to time, but not less frequent than quarterly, deliver to the Board a narrative report in form agreed by the Parties,

which may be in writing or an oral presentation by the Administrator or others, covering the operation of Home, and St. Andrew's shall also be available to consult with the Board on such matters and at such times as the Board shall reasonably request.

**5. LICENSING.** Owner and St. Andrew's each agree to abide by all laws, ordinances, rules and regulations of local, State or Federal governments pertaining to the Home and the operation of Home. St. Andrew's shall assist and advise Owner in preparing all documents and other materials necessary to obtain and maintain all licenses required by the Home.

**6. TERM AND TERMINATION.**

6.1. Term. This Agreement shall become effective as of the Effective Date and shall continue for an initial term of five (5) years from such date. At least ninety (90) days prior to the expiration of the initial term or any subsequent term, St. Andrew's shall provide notice ("STAMS Notice") to Owner stating whether St. Andrew's wants this Agreement to renew. If the STAMS Notice indicates that St. Andrew's does not want to renew, then this Agreement will terminate upon expiration of the term. If the STAMS Notice indicates that St. Andrew's wants to renew, then this Agreement will renew for a successive five (5) year term unless Owner notifies St. Andrew's at least sixty (60) days prior to expiration of the term of Owner's intention not to renew, in which event this Agreement will terminate upon expiration of the term.

6.2. Termination.

6.2.1. Termination for Cause. Notwithstanding the foregoing, this Agreement may be terminated by either party for cause if the other party ("defaulting party") defaults as provided in Section 8, files or has a petition or complaint in receivership or bankruptcy filed against it which has not been dismissed within thirty (30) days of such filing, or makes a general assignment for the benefit of its creditors. In the event that a party elects to terminate this Agreement as a result of the occurrence of any event specified in the preceding sentence relating to the conduct of the defaulting party other than matters involving receivership or bankruptcy, it shall (unless the termination for cause is failure by Owner to pay any amount due St. Andrew's in a timely manner in which case only ten (10) days written notice is required) give the defaulting party thirty (30) days written notice of the cause therefor, and such termination shall be effective thirty (30) days after the mailing thereof (ten (10) days after the mailing thereof if the cause is failure to pay any amount due St. Andrew's in a timely manner) or such later date specified in the notice, unless the stated grounds for termination have been remedied by the defaulting party prior to that date or the non-defaulting party determines not to terminate.

6.2.2. Termination without Cause. Anything in this Agreement to the contrary notwithstanding, St. Andrew's shall, in its sole discretion, have the right to terminate this Agreement, without cause, on one hundred eighty (180) days prior notice to Owner.

6.2.3. Casualty. If as much as thirty-three percent (33%) of Home's total capacity equipped and in operation, or if any material service of Home shall be rendered incapable of normal operation because of fire or other casualty, and shall not be repaired, restored, rebuilt or replaced within six (6) months after such fire or other casualty, St. Andrew's may cancel this Agreement upon notice to Owner.

6.2.4. Change of Owner Sponsorship or Control. In the event that Owner sells all or substantially all of the real estate and other assets constituting the Home or in the event of a transaction resulting in a change of control of sponsorship of the Owner and composition of the Board of Directors of Owner (as described below), then Owner has the right to terminate this Agreement upon at least ninety (90) days written notice to St. Andrew's stating the effective date of termination and payment of any special termination fee described below:

| Date of Termination Notice | Special Termination Fee |
|---|---|
| Within first 2 years of Term | 6 months of management fees |
| During 3rd year of Term | 3 months of management fees |

For purposes hereof, a change in the control of sponsorship of the Owner and composition of the Board shall mean a complete change of the member or other person(s) with authority to appoint the Board and a change in more than fifty percent of the persons comprising the Board. Management fees shall refer to the actual amount of management fees earned by St. Andrew's for the appropriate period immediately preceding the effective date of termination.

6.2.5. Return of Information, Materials and Documents. Upon any termination of this Agreement, St. Andrew's shall turn over to the Owner any and all information, materials and documents related to the Home in the possession of St. Andrew's and shall cooperate with the Owner to effectuate turn over of the Home without disruption to the Owner. All such information and documents relating to the Home shall be maintained at the Home, to the extent practicable. Upon any termination of this Agreement, subject to Section 1.2.12 and 1.2.14(a)(iv) hereof, Owner and Home shall turn over to St. Andrew's any and all information, materials and documents belonging to St. Andrew's in the possession of Owner or Home, such information, materials and documents to include, but not be limited to, any manuals, systems, software and other materials of any and every kind which St. Andrew's has permitted Owner and Home to use during the term of this Agreement and which, by the terms of this Agreement, remains the property of St. Andrew's and may not be used by Owner or Home upon any termination of this Agreement.

6.2.6. Consequences of Termination. If this Agreement is terminated pursuant to Section 6.2, St. Andrew's shall be entitled to an amount equal to its earned but unpaid compensation, its severance compensation, if any, and full reimbursement of all costs and expenses otherwise reimbursable hereunder, payable immediately, and neither party shall have any further obligations to the other, except as provided in Sections 13.10, 13.15 and 13.24.

## 7. COMPENSATION.

7.1. Management Fee. Commencing on the Effective Date, St. Andrew's shall receive from the Owner a management fee equal to five percent (5%) of the Gross Revenues from the Home. Such management fee shall be paid to St. Andrew's on a monthly basis within thirty (30) days following the end of the month. For purposes of this Agreement, "Gross Revenues" shall mean amounts billed by the Home to patients and/or private and governmental payors for items and services furnished. The monthly management fee shall in no event be less than a minimum of $20,000 per month. Gross Revenues shall also include any insurance proceeds related to income

replacement. In addition, St. Andrew's shall be entitled to a bonus payment for each year of the Agreement that the Home has a surplus from operations determined in accordance with generally accepted accounting principles with respect to operations for that year. The bonus shall be equal to the lesser of (i) twenty five thousand dollars ($25,000.00), or (ii) fifty percent (50%) of the amount of any such surplus. Said bonus shall be paid within thirty (30) days of completion of the financial statements for the Home by the independent accounting firm engaged by the Home.

7.2. Adjustments to Management Fee. The amounts paid to St. Andrew's hereunder shall be subject to adjustment for any amounts which are payable to St. Andrew's in addition to the compensation payable to St. Andrew's pursuant to the foregoing Section 7.1, such additional amounts including, without limitation, amounts which are subject to reimbursement by Owner and amounts which are to be billed to Owner directly under the terms and conditions hereof and any special termination fees.

7.3. Reimbursement. In addition to the foregoing, in the performance of its services to the Owner under this Agreement, St. Andrew's will incur certain expenses of a reimbursable nature which were identified on budgets prepared by St. Andrew's and approved by Owner. Owner agrees to reimburse St. Andrew's within twenty (20) business days from receipt of an invoice itemizing such expenses as: fifty percent (50%) the net cost of reasonable transportation and living expenses for employees, officers and agents of St. Andrew's or outside consultants of St. Andrew's when traveling in connection with the Home; any long distance telephone charges, express delivery, copying and all other Owner approved, Home related expenses incurred by St. Andrew's in connection with the performance of its services under this Agreement.

## 8. DEFAULT

8.1. Default by Owner.

8.1.1. If Owner shall fail to make or cause to be made any payment to St. Andrew's required to be made hereunder, or to make any payment pursuant to any other agreement between the parties;

8.1.2. If Owner materially breaches the Agreement by failing to keep, observe or perform any material agreement, term or provision of this Agreement to be kept, observed or performed by it;

8.1.3. If Owner shall fail to make payments, or keep any covenants, owing to any third party which would cause it to lose possession of Home's building, equipment, or property;

8.1.4. If, through no fault of St. Andrew's, the licenses required for the operation of Home are at any time suspended, terminated or revoked, and such suspension, termination or revocation shall continue unstayed for the thirty (30) day period described in Section 6.2.1.

8.2. Default by St. Andrew's. If St. Andrew's shall fail to keep, observe, or perform any material agreement, term, or provision hereof required to be kept, observed, or performed by it, but if such failure cannot be cured within the period described in Section 6.2.1., such failure shall not be

deemed a default hereunder if St. Andrew's shall, within such period commence the cure thereof and shall thereafter diligently pursue such cure to completion.

## 9. INSURANCE

9.1. Insurance of the Owner. Owner shall apply for and maintain, at the Owner's expense, with reputable and financially sound insurance firms, policies of insurance to insure itself against commercial general liability (including personal injury and contractual liability) insurance as applicable to the Owner's obligations under this Section, medical malpractice (professional) liability, automobile liability, workers' compensation, boiler and machinery, employee dishonesty insurance, all risk, property and such other policies in kind and amounts necessary and proper for the ownership and operation of the Home. The Owner may obtain any additional insurance coverage that it deems advisable. The Owner agrees to include St. Andrew's as an additional insured on all commercial general and medical malpractice (professional) liability policies, and to provide St. Andrew's with complete copies of policies and certificates of insurance, if requested. Such policies shall cover occurrences during the term of this Agreement and should be endorsed to provide that such insurance is primary to any insurance purchased directly by St. Andrew's, and is not excess or contributing insurance. If the Owner fails to obtain and maintain such insurance with amounts and coverages normally provided to St. Andrew's in similar facilities, St. Andrew's may obtain such insurance for its own benefit, but only after notice to the Owner and failure by the Owner to apply for insurance within ten (10) days of receipt of such notice, and the cost of such insurance shall be an expense reimbursable by Owner to St. Andrew's pursuant to Section 7.3 hereof. Without limiting the generality of the foregoing, Owner shall maintain the following insurance in the minimum amounts shown:

| | |
|---|---|
| Workers' Compensation | Statutory |
| Employer's Liability | $500,000 |
| Comprehensive General Liability | $1,000,000 per occurrence; |
| | $3,000,000 general aggregate |
| Automobile Liability | $1,000,000 per occurrence; |
| | $3,000,000 general aggregate |
| Medical Malpractice (Professional) Liability | $1,000,000 per occurrence; |
| | $3,000,000 general aggregate |
| Directors & Officers Liability | $1,000,000 per occurrence |
| | $1,000,000 general aggregate; |
| Employment Practices Liability | $1,000,000 per occurrence |
| | $1,000,000 general aggregate; |

In addition, at all times during the term of this Agreement, Owner shall maintain, or cause to be maintained, Property Insurance on Replacement Cost Basis, Special Form including Business Interruption, on Home buildings, furnishings, and equipment in the amount of their full insurable values.

9.2. St. Andrew's to Obtain Insurance at Request of Board. St. Andrew's shall, at the request of the Board, seek to obtain all such insurance on behalf of and at the expense of Home. St. Andrew's is not responsible for assuring the adequacy of insurance or assuming the risk of inadequate coverage.

9.3. St. Andrew's Insurance. St. Andrew's shall apply for and maintain, at St. Andrew's expense and to the extent commercially available and economically reasonable as determined by St. Andrew's in its reasonable business discretion, with reputable and financially sound insurance companies, policies of insurance (and/or self insurance) to insure itself and its employees for management errors and omissions liability, workers' compensation, employee dishonesty insurance, and automobile liability. St. Andrew's agrees to provide the Owner with a certificate giving evidence of such policies upon request. If St. Andrew's fails to obtain and maintain such insurance with amounts and coverages normally carried by St. Andrew's with respect to similar communities managed by St. Andrew's, the Owner may obtain such insurance for its own benefit, but only after notice to St. Andrew's and failure of St. Andrew's to apply for such insurance within sixty (60) days of receipt of such notice, and the cost thereof shall be a reimbursable expense to the Owner by St. Andrew's and may be offset against the management fee due to St. Andrew's. Notwithstanding the foregoing, St. Andrew's shall in all events maintain comprehensive general liability insurance in the amount of $1,000,000 per occurrence and $3,000,000 annual aggregate and shall maintain automobile insurance covering St. Andrew's employees if St. Andrew's expects its employees to use automobiles for business purposes.

**10. INDEMNIFICATION.** Notwithstanding the foregoing, Owner shall indemnify and hold harmless St. Andrew's from any and all liability, including personal injury and death, with respect to matters involving the Home, including but not limited to liability relating to matters involving patients or residents of the Home; provided, however, such indemnity shall not cover any acts of gross negligence or intentional acts or omissions of St. Andrew's or of any of St. Andrew's employees (unless such act or omission is the result of direction from the Owner). St. Andrew's shall indemnify and hold harmless Owner from any and all liability, including personal injury and death, caused by the gross negligence or intentional acts or omissions of St. Andrew's or any of St. Andrew's employees in the performance by St. Andrew's of its duties under this Agreement. In the event that a party to this Agreement (the "Indemnified Party") shall incur or sustain any loss, liability or damage, or in the event that any claim shall be asserted against the Indemnified Party, and such loss, liability, damage or claim shall, in the opinion of the Indemnified Party, be subject to indemnification hereunder, and in the further event that the party having the indemnification obligation hereunder (the "Indemnifying Party") shall not, within ten (10) days after the Indemnified Party shall notify the Indemnifying Party of the existence of such loss, liability, damage or claim: (i) reimburse to the Indemnified Party the amount of such loss, liability or damage; (ii) provide the Indemnified Party with assurance, to the Indemnified Party's sole satisfaction, that such claim will be paid directly by the Indemnifying Party, or (iii) notify the Indemnified Party that the Indemnifying Party believes there to be a meritorious defense to such claim and that the Indemnifying Party, at its

sole cost, shall undertake and diligently maintain the defense thereof, as the case may be, then the Indemnified Party may, but shall not be obligated to, undertake and maintain the defense of any such claim, with counsel of its selection, and all costs and expenses of such defense shall be reimbursed to the Indemnified Party by the Indemnifying Party, upon demand. The defense of any such claim shall not, in any manner, relieve the Indemnifying Party of or from any liability or obligation to indemnify the Indemnified Party against any judgment, cost, damage or other expense which Indemnified Party may incur or sustain as a consequence of such claim.

**11. NON-ASSUMPTION OF LIABILITIES.** By entering into and performing this Agreement St. Andrew's is not assuming and shall not become liable for, any existing or future obligations, liabilities or debts of Home or of Owner. Owner shall indemnify St. Andrew's against and shall hold St. Andrew's harmless from, any and all claims, demands, suits, liabilities, costs and expenses, including, but not limited to, reasonable attorneys fees, which St. Andrew's may incur or sustain or which may be asserted against St. Andrew's arising from, resulting from or growing out of any assertion against St. Andrew's of any obligation, liability or debt of Home or of Owner, other than obligations, liabilities or debts arising from St. Andrew's failure to perform any duty specifically undertaken by St. Andrew's hereunder.

**12. RESPONSIBILITY FOR MISCONDUCT OF EMPLOYEES AND OTHER PERSONS.** St. Andrew's shall not be liable for damages suffered on account of the dishonesty, willful misconduct or negligence of any employee of Home or Owner, or any member of the Board. Owner shall indemnify St. Andrew's and hold St. Andrew's harmless from any damage, cost, liability, loss or expense, including, but not limited to, reasonable attorneys fees, incurred or sustained by St. Andrew's by reason of the dishonesty, willful conduct or negligence of any employee of Home. St. Andrew's shall indemnify Owner and hold Owner harmless from any damage, cost, liability, loss or expense, including, but not limited to, reasonable attorneys fees, incurred or sustained by Owner by reason of the dishonesty, willful conduct or negligence of any employee of St. Andrew's.

**13. MISCELLANEOUS**

13.1. Access to Community; Confidentiality of Records. St. Andrew's shall, during the term hereof, be given complete access to Home, its records, offices, and facilities, in order that St. Andrew's may carry out its obligations hereunder. St. Andrew's shall use its best efforts to maintain the confidentiality of all files and records, including resident records, of Home, disclosing the same only as directed by law or by the Board in any particular instance.

13.2. Disclaimer of Intent to Become Partners. St. Andrew's and Owner shall not by virtue of this Agreement be deemed partners, joint venturers or to occupy any status with respect to each other, except as specifically stated herein, in the operation of Home. The parties expressly understand that St. Andrew's is hereby retained by Owner to manage Home on behalf of Owner and that St. Andrew's is constituted the agent of Owner and the Board for the purpose of carrying out its obligations under this Agreement.

13.3. Absence of Conflict of Interest and/or Identity of Interest. While this Agreement shall remain in effect, any person who serves as a member of the Board of Home and who shall have a "conflict and/or identity of interest", shall be required to disclose the same to St. Andrew's. For the purposes hereof, a "conflict and/or identity of interest" shall be defined as any financial

interest or investment, direct or indirect, in Home or in any competitor of Home or St. Andrew's, or in any department of service thereof, or directly or indirectly, whether as an individual or through any entity, being a party to any contract or contracts for the providing of any goods or services to Home.

13.4. Successors. The provisions herein contained shall be binding upon and inure to the benefit of the respective successors and permitted assigns of St. Andrew's and Owner, to the same extent as if each such successor and permitted assign were, in each case, named as a party to this Agreement.

13.5. Non-Exclusive. It is understood and agreed by Owner that the services to be provided by St. Andrew's hereunder are not exclusive to Owner and that St. Andrew's is now, and will in the future, continue to provide management, consulting and other services to, and may own, other nursing communities, retirement communities or facilities, long-term care, residential and other facilities/services for the elderly.

13.6. Arbitration. In the event any dispute which arises as a result of or relating to this Agreement or any claim of breach hereof cannot be resolved by the informal agreement of the parties, then such dispute shall be settled by binding arbitration conducted in accordance with the Commercial Arbitration Rules of the American Arbitration Association ("AAA") then in effect. Any arbitration shall take place in St. Louis City or County, Missouri. Any decision rendered in arbitration shall be final and binding and shall be controlled by the United States Federal Arbitration Act, 9 U.S.C. §§ 1, et seq., and any judgment awarded may be entered and recorded in any court of competent jurisdiction. The arbitrator shall have no authority to make any ruling, finding or award that does not conform to the laws of the State of Missouri or applicable federal law, nor shall the arbitrator have any authority to award punitive damages or any other damages not measured by the prevailing party's actual damages. The prevailing party in any arbitration award under this Agreement shall be entitled to recover from the other, as part of any arbitration award, that party's costs of arbitration, including, but not limited to, the administrative costs of the arbitration, any costs of discovery or the preparation of a transcript of the arbitration proceedings and a reasonable attorneys' fee. Nothing in this Agreement shall be deemed to deny either party of its right to seek and obtain injunctive or other equitable relief from any court of competent jurisdiction with respect to the terms of this Agreement or the rights between the parties. The parties consent to the jurisdiction of the Circuit Court of St. Louis City or County, Missouri and of the United States District Court for the Eastern District of Missouri for injunctive, specific performance or other relief in aid of the arbitration proceedings or to enforce judgment of the award in such arbitration proceeding, but not otherwise.

13.7. Public Notices. The parties agree that they may represent to the public that St. Andrew's manages the Home, and the Owner agrees that the Home's relations and occupancy development program materials will identify St. Andrew's as the manager of the Home.

13.8. Further Acts. Owner and St. Andrew's each agree to perform such further acts, including the execution of other agreements, documents or instruments as may be reasonably necessary or useful to carry out the intent and spirit of this Agreement.

13.9. Approvals. Whenever in this Agreement the consent, approval or agreement of the Owner or St. Andrew's is required, it is agreed that such consent will not be unreasonably withheld, delayed or conditioned. Without limiting the generality of the foregoing, measures of reasonableness shall include, but not be limited to, the degree to which the recommendations will result in a financially sound Home, and the degree to which the recommendations are consistent with earlier recommendations previously approved.

13.10. Confidentiality. No provision of this Agreement shall be disclosed by the Owner or St. Andrew's to any person, firm or corporation without the prior written approval of the other party, except that either party may disclose any provision hereof without the consent of the other party to the extent necessary to comply with any statute, governmental rule or regulation or court order to which such party may be subject.

13.11. Conditions beyond Control of Parties. Neither party shall be liable for any failure to comply with any of the terms of this Agreement when such failure has been caused solely by fire, labor dispute, strike, war, insurrection, government restrictions, force majeure, Act of God or other cause beyond the control and without fault on the part of the party involved.

13.12. Assignment. This Agreement shall be binding upon and shall inure to the benefit of the parties to this Agreement, their successors and assigns. Notwithstanding the foregoing, neither party shall, without prior written approval of the other party, assign any of its rights or obligations under this Agreement; provided, however, that St. Andrew's may assign this Agreement to an Affiliate without the approval of Owner. For purposes of this Section, "Affiliate" shall mean an entity that is owned by or under common control with St. Andrew's.

13.13. Entire Agreement. This Agreement sets forth the entire agreement between St. Andrew's and the Owner. Any change or modification of this Agreement shall be in writing and shall be signed by both parties.

13.14. Reservation of Property Rights. The name of the Home as set forth in the Preamble and documents, forms and occupancy development materials exclusively related to the Home shall be the property of the Owner. Trade names, trademarks, forms, manuals, systems, software, occupancy development material, lead management information and other materials created by St. Andrew's are proprietary in nature and will remain the property of St. Andrew's, and upon the termination or expiration of this Agreement, all rights of the Owner to the use thereof shall terminate.

13.15. St. Andrew's Employees. Without the prior written consent of St. Andrew's, the Owner will not interfere with the employment relationship between St. Andrew's and the Administrators. For a period of three (3) years following termination or expiration of this Agreement, the Owner will not employ or engage, or solicit or otherwise attempt to employ or engage, any person who was an employee of St Andrew's assigned to the Home at any time during the last twelve (12) months of the term of this Agreement.

13.16. Interest. Any sums due but unpaid hereunder shall bear interest at a rate equal to the lesser of eighteen percent (18%) per annum or the highest rate permitted by law, from the due date until paid.

13.17. Loyalty. St. Andrew's shall owe a duty of loyalty to the Owner hereunder and shall keep information related to the Owner and/or the Home in confidence to the extent reasonably practicable. In addition, St. Andrew's shall disclose any conflicts of interest which now or hereafter exist between St. Andrew's and the Owner by reason of St. Andrew's other interests in projects competitive with the Owner's interests and shall not allow the Home to enter into any contracts or financial arrangements with affiliates of St. Andrew's except with the prior written consent of the Owner.

13.18. Headings. The headings of the various sections of this Agreement have been inserted for reading convenience only and shall not be used to modify, define, limit or expand the express provisions of this Agreement.

13.19. Counterparts. This Agreement may be executed in any number of counterparts, each of which shall be an original, but all of which, together, shall constitute one and the same Agreement.

13.20. Notices. All notices, requests, demands, and other communications hereunder shall be in writing and shall be deemed to have been duly given, if hand-delivered, if delivered by commercial courier service, or if mailed by certified or registered mail, return receipt requested, all delivery or postage charges pre-paid, addressed as follows:

| | |
|---|---|
| If to St. Andrew's: | Mary Alice Ryan, President<br>St. Andrew's Management Services, Inc.<br>6633 Delmar Boulevard<br>St. Louis, MO 63130 |
| with copy to: | Mark H. Goran<br>c/o Bryan Cave LLP<br>211 N. Broadway<br>St. Louis, MO 63102 |
| If to Owner: | St. Paul's Home<br>1021 West E Street<br>Belleville IL |
| with copy to: | Greg Lepper<br>c/o Greensfelder Hemker & Gale, P.C.<br>10 S. Broadway<br>St. Louis, MO 63102 |

or to such other person or address as either party may notify the other party, by notice given in accordance with this Section 13.20. Notices given by hand delivery or delivered by commercial courier service shall be deemed delivered as of the date of actual delivery. Notice sent by certified or registered United States mail shall be deemed delivered on the third day on which mail is delivered following the day on which such notice is deposited in the United States mail.

13.21. Effect of Invalidity. Should any part of this Agreement, for any reason, be declared invalid, such decision shall not affect the validity of any remaining portion, which remaining portion shall remain in force and effect as if this Agreement had been executed with the invalid portion thereof eliminated.

13.22. Authorization for Agreement. The execution and performance of this Agreement by Owner and by St. Andrew's have been duly authorized by all necessary laws, resolutions and corporate action, and this Agreement constitutes the valid agreement of Owner and St. Andrew's and each party agrees that this Agreement is enforceable in accordance with its terms.

13.23. Governing Law. This Agreement shall be deemed to be a contract made and entered into under the laws of the State of Missouri and shall be construed and enforced under and pursuant to the laws of such State.

13.24. Survival of Covenants. Any agreement contained herein which is specifically stated to survive the termination of this Agreement and any agreement which, by its terms, cannot be performed prior to the termination of this Agreement or which, by its terms, continues beyond the term of this Agreement, shall be deemed to survive the termination of this Agreement, such provisions including, but not being limited to, the agreements of Owner contained in Sections 1.2.14(a)(iii), 1.2.14(a)(iv), 7.1, 7.2, 7.3, 9.1, 10, 13.10 and 13.15 hereof.

[Signatures appear on the next page]

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representatives as of the day and year first above written.

THIS AGREEMENT CONTAINS A BINDING ARBITRATION PROVISION WHICH MAY BE ENFORCED BY THE PARTIES.

**OWNER**

By: Richard Rinder

Name: Richard Binder

Title: Vice-Chairman

**ST. ANDREW'S MANAGEMENT SERVICES, INC.**

By: _____

Name: _____

Title: _____

MARLER
SURVEYING COMPANY, INC.

Michael S. Blansit ILPLS 3038
Michael S. Blansit MOPLS 2364
Marty L. Marler MOPLS 2501

David J. Naeger MOPLS 2002014104
James R. Bube MOPLS 2003013172

September 10, 2012

Re: Executive Order 5 (2006)
1021 West E Street
Belleville, IL 62220
Tax Parcel 08210119006

To: St. Paul's Home for the Aged
1021 West E Street
Belleville, IL 62220
Attn: Ms. Susan Franklin

Section 2. B (1) of State of Illinois Executive Order 5 (2006) states:

All new Critical Facilities shall be located outside of the floodplain. Where this is not practicable, Critical Facilities shall be developed with the lowest floor elevation equal to or greater than the 500-year frequency flood elevation or structurally dry floodproofed to at least the 500-year frequency flood elevation.

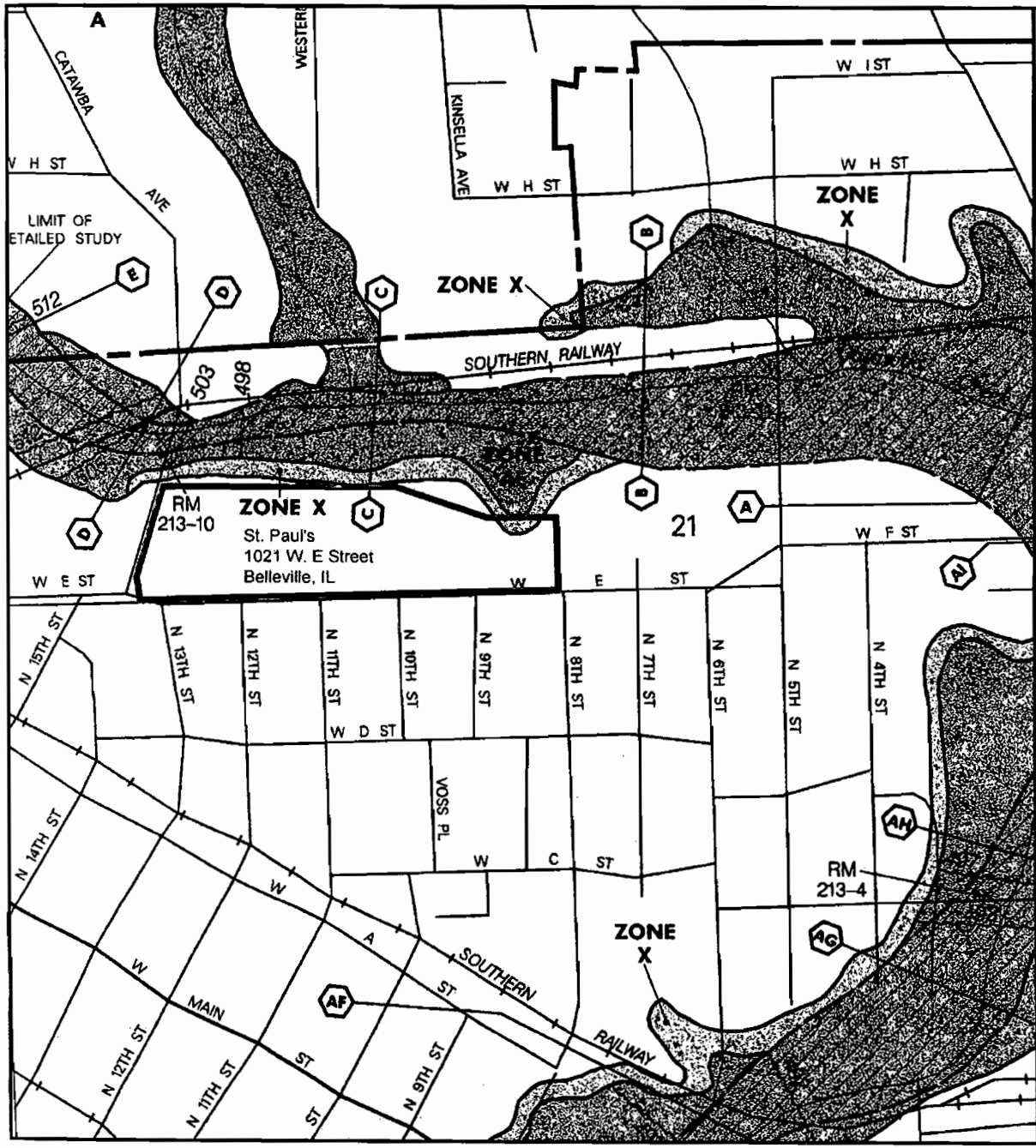
As per the FIS profile for Catawba Creek the 500-year flood elevation is 498.8 feet (NAVD 88), reference Flood Insurance Rate Map Community Panel 17163C0213D with an effective date of November 5, 2003.

The lowest finish floor of the multistory building is 524.9 feet (NAVD 88) and the lowest finish floor of the four story brick building is 503.96 feet (NAVD88) both of which are above said 500-year flood elevation.

Marler Surveying Company
IL Corporate No. 184-006332

Michael S. Blansit
IL PLS 3038

STATE OF ILLINOIS
MICHAEL
S. BLANSIT
NUMBER
PLS - 3038
PROFESSIONAL LAND SURVEYOR
10/4/2012




APPROXIMATE SCALE

500 0 500 FEET

NATIONAL FLOOD INSURANCE PROGRAM

# FIRM

## FLOOD INSURANCE RATE MAP

ST. CLAIR COUNTY, ILLINOIS AND INCORPORATED AREAS

**PANEL 213 OF 555**

(SEE MAP INDEX FOR PANELS NOT PRINTED)

CONTAINS:

| COMMUNITY | NUMBER | PANEL | SUFFIX |
|---|---|---|---|
| BELLEVILLE, CITY OF | 170618 | 0213 | D |
| ST. CLAIR COUNTY | 170616 | 0213 | D |
| SWANSEA, VILLAGE OF | 170637 | 0213 | D |

Notice to User: The MAP NUMBER shown below should be used when placing map orders; the COMMUNITY NUMBER shown above should be used on insurance applications for the subject community.

**MAP NUMBER**
**17163C0213D**

**EFFECTIVE DATE:**
**NOVEMBER 5, 2003**

Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

Illinois Historic
Preservation Agency

FAX (217) 782-8161

1 Old State Capitol Plaza • Springfield, Illinois 62701-1512 • www.illinois-history.gov

St. Clair County
Belleville
Demolition and New Construction of Skilled Nursing and Sheltered Care, St. Paul's Home
1021 West E St.
IHPA Log #004092012

October 3, 2012

Chris Wiltse
St. Andrew's Management Services
6633 Delmar Blvd.
St. Louis, MO 63130

Dear Mr. Wiltse:

This letter is to inform you that we have reviewed the information provided concerning the referenced project.

Our review of the records indicates that no historic, architectural or archaeological sites exist within the project area.

Please retain this letter in your files as evidence of compliance with Section 4 of the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420/1 et. seq.). This clearance remains in effect for two years from date of issuance. It does not pertain to any discovery during construction, nor is it a clearance for purposes of the Illinois Human Skeletal Remains Protection Act (20 ILCS 3440).

If you have any further questions, please contact me at 217/785-5027.

Sincerely,

Anne E. Haaker

Anne E. Haaker
Deputy State Historic
Preservation Officer

00070



*A teletypewriter for the speech/hearing impaired is available at 217-524-7128. It is not a voice or fax line.*

**Criterion 1125.320 – Purpose of the Project**

1. Document that the project will provide health services that improve the health care or well-being of the market area population to be served.

This project proposes the modernization of St. Paul's Home, a long term care facility that has been providing care to the Belleville community since the 1920's. It will be a modernization, rather than the establishment of a new facility, because the modernized facility is being built on the same parcel of land, directly adjacent to where the existing facility is located. Despite the exceptional efforts of St. Paul's staff and the dedication of its Board of Directors in ensuring that necessary maintenance and renovations have taken place as needed (maintenance is ongoing, but substantial projects have been undertaken every decade since the facility was first established) circumstances have finally reached a point where now is the time to prepare for the future. The need to bridge the gaps created by advancements in technology to ensure St. Paul's ability to continuing providing the highest standard of patient care has arrived.

St. Paul's has maintained a facility that was established in the 1920s well into the 21st century and has done so in a way that has kept residents safe and allowed for the continued provision of quality care. In looking ahead to the next hundred years, St. Paul's began the process of looking to the future several years ago so as to explore the options in a responsible manner and make a well-reasoned decision as to the proper course of action. These efforts have yielded the realization that the economically responsible decision is to say goodbye to St. Paul's past structure and to embrace its future home. It is with substantial thought and consideration that St. Paul's comes before the Board requesting to establish a modernized facility on the site of our existing facility. The conclusion that this was the right option to pursue was supported by

ATTACHMENT 10

the realization that the entire nursing portion of the facility could be rebuilt (modernized) by spending nearly the same amount it would take to continue repairing St. Paul's hundred-year-old facility. Moreover, it would be unfathomable to the St. Paul's community (and inconsistent with St. Paul's mission) to consider ceasing to provide care for this community.

With this in mind, St. Paul's further had to acknowledge that the time is right to undertake this project. There are multi-million dollar repairs that are looming and which cannot be put off too far into the future. Given the high cost of maintenance, the changes that have taken place in the standard of care, changes in patient expectations, the need for additional patient care services (including more therapy), and the preference for a more patient-centered model, a modernized facility is not only justified, it is necessary. Moreover, St. Paul's is unwilling to wait until non-compliance with life-safety codes *requires* the performance of emergency repairs or jeopardizes the safety of its residents. This would be economically irresponsible and could place St. Paul's residents at risk. To the contrary, St. Paul's is proactively looking ahead to ensure the uninterrupted provision of quality care to the community it has served for almost 100 years. It is with this foresight that St. Paul's comes before this Board, optimistically looking forward to the next 100 years.

The review process began several years ago when St. Paul's retained zumBrunnen, an independent building consulting firm, to identify what options were available to St. Paul's and to help St. Paul's assess which of the available options was the most appropriate for their future. A review of the zumBrunnen report (the entire report is several hundred pages, the relevant portions have been attached to this application) reveals that building a modernized facility is the

ATTACHMENT 10

most appropriate option, both from an economical perspective, but also to allow St. Paul to continue achieving its mission of providing care to the community. A review of St. Paul's maintenance reports reveals the lengths to which the dedicated St. Paul's community has gone to ensure the well-being of their residents with outdated facilities. The modernized facility will not only obviate the need for substantial maintenance and repairs of the existing structure, but it will include the substantial improvements to resident life, both from a clinical perspective and a quality of life perspective.

The total number of licensed beds will be reduced from the current compliment of 113 to 108, and the compliment of shelter care beds will be reduced from 62 to 26. As outlined in the project's narrative description, the proposed project is for the modernization of the existing facility by replacing the structure onsite, without any expansion of existing services but, rather, a modest reduction in the licensed bed capacity of the Facility. As the same site is being utilized, the Facility will remain located at 1021 West E Street, Belleville, Illinois. The overall effect of the project will be a reduction in the number of skilled beds from 113 to 108 (90 skilled and 18 intermediate) and a reduction in the number of sheltered care beds from 62 to 26. Moreover, the modernized Facility will include a unit specifically designed to provide care to individuals with memory care needs, an area of growing concern and needed in the community.

Additionally, the modernized Facility is designed to provide the only person-centered mode of care available in the area, and will include three nursing care households of 22 beds each, one household of 24 beds, and a memory care household of 18 beds. Each household will include a combination of private and companion rooms. Each room will have its own bathroom, including a walk-in shower.

ATTACHMENT 10

Each household will include a kitchen, a dining area, a household laundry, and will have its own dedicated staff. Each household will have its own spa, including a lift door tub, towel warmer, and supplemental heat. Moreover, the household kitchens and laundries will be supported by a new commercial kitchen and new commercial laundry. Features shared amongst the various households will include a new rehabilitation center, new beauty/barber salon, and new community room and chapel. The modernized Facility will be replacing the aging structure which includes three-bed and four-bed "wards", common/group bathing facilities, and which lacks central air conditioning and Wi-Fi capabilities (all features which will be included in the modernized Facility).

St. Paul's primary service area consists of the five-mile radius surrounding the Facility. In this area, all of the facilities have been designated by the Centers for Medicare and Medicaid Services ("CMS") as one-star facilities. Moreover, St. Paul's is the only not-for-profit facility in this small geographic area and remains committed to providing care to Medicare and Medicaid residents. The modernized Facility will assist St. Paul's in being able to continue to provide the highest quality care to its residents in a modernized structure that reflects the current needs and desires of a more sophisticated and patient population with more complex needs.

2. Define the planning area or market area, or other, per the applicant's definition.

St. Paul's understands that per the Board's regulations, the Planning Area consists of St. Clair County Planning Area and the defined boundaries of Health Service Area XI. Furthermore the Board considers the secondary market area to include a thirty-minute travel radius surrounding the facility. A 2011 market feasibility study performed by Brooks Adams Research

ATTACHMENT 10

defined St. Paul's primary market area (the area from which the majority of residents are expected to come) as the five-mile radius around the St. Paul's facility, which includes the Belleville area, as well as Swansea, Shiloh, Fairview Heights, Smithton and Millstadt. Allowing for variances that result from familial ties that bring non-residents to the Facility, St. Paul's admission data shows this to be an accurate description of its primary market area.

3. Identify the existing problems or issues that need to be addressed, as applicable and appropriate for the project.

The existing issues that this project seeks to address are: allowing for modernization of the overall facility to ensure St. Paul's meeting the standards of care, reflecting the technological advancements that have taken place since the development of this facility, and meeting resident's expectations. There is a need to improve the overall number of private rooms and to eliminate three and four-bed wards, an objective set forth in the Health Facilities Planning Act (20 ILCS 3960 §12). There is also a distinct need to provide a more home-centered care experience to reflect the trends in healthcare delivery to provide care in a more person centered manner. The project is designed to achieve these goals.

4. Cite the sources of the information provided as documentation.

Included as part of Attachment 10 are the past five years of Illinois Department of Public Health annual facility questionnaire forms documenting the facility's utilization rate. Also attached is a copy of an email received from Board Staff member Roate verifying that St. Paul's is up to date in all of its submissions to the government. Also appended is the Market Feasibility Study performed in 2011 and the summary letter provided by zumBrunnen outlining the conclusions of their analysis. Also attached is the Executive Summary prepared by St. Paul's outlining the entire project.

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5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.

The project is designed to replace St. Paul's outdated 'ward' rooms with an appropriate compliment of private and companion rooms. As there is an broad spectrum of care needed by the residents served by St. Paul's and the project allows for the continued provision of sheltered care, intermediate care, and skilled nursing care with an acknowledgement of the distinct issues facing individuals with memory issues. The entire facility is being built to skilled nursing standards to responsibly allow for any future expansion of services that may prove necessary without incurring unnecessary costs in the future.

A transformation is designed in the bathing and bathroom areas for residents. Group bathing areas are being replaced with individual bathrooms for each room, each with a walk-in shower. Each household has its own kitchen to allow residents or their families to prepare their own food, but is further supported by availability of commercial kitchens to provide food service to the residents. The same approach is taken to household laundry facilities supplemented by commercial facilities. The increased rehabilitation facilities will substantially benefit the residents of the home, as will the multitude of benefits accompanying the modernized facility (ranging from upgraded electrical systems, HVAC systems, and Wi-Fi capacity).

6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals **as appropriate**.

The project goals will be achieved as soon as the modernized facility is operational and the existing compliment of residents has been moved over into the modernized facility. The measure of the success will be the facility's ability to maintain a 90% utilization rate moving

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forward which should not be an issue as the single largest challenge to maintaining a 90% utilization rate has been the decision to forego utilizing group wards for patient care.

For projects involving modernization, describe the conditions being upgraded if any. For facility projects, include statements of age and condition and regulatory citations if any. For equipment being replaced, include repair and maintenance records.

While this project is classified under as a modernization under the Board's rules because the facility is being replaced onsite and will retain the same address, this undertaking is more akin to the construction of a new facility. Therefore, there is no single condition being upgraded but, rather, 86 years of facility that are being replaced and modernized. Attached as part of the Attachment 10 is the Executive Summary which outlines the entire background, purpose, and scope of the project.

**Charity care, Commitment to Service, and Commitment to Charity**

Although documentation of charity care and commitment to charity is not required among the submissions to obtain a certificate of need for the a modernization of a facility, charity and service is too integral a part of St. Paul's mission for it not to be addressed as part of the purpose of this project.

St. Paul's Home began its service to the community in 1926 and continues today with faith and enthusiasm. As far back as 1918, some of the caring people in the community and congregation of what is now St. Paul United Church of Christ in Belleville discussed the need for a home for older men and women. In 1926, one man in the congregation stepped forward and donated property and a building to the St. Paul Church to be used as a home for the aged of all faiths in the Belleville area. The leaders of the congregation decided to call it St. Paul's Home for the Aged and it was officially founded, under that name, on August 22, 1926.

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News of this generous gift spread and the community responded with moral support and substantial gifts to help convert the building into a home for the aged. This community-wide effort was consummated on June 12, 1927 when St. Paul's Home opened its doors to the first thirteen residents. Other generous community gifts and support have been received throughout the years allowing the campus to grow to its current capacity.

During these past 86 years, St. Paul's Home and Apartment Community has been a leader in the field of caring for the aged in Southern Illinois and one of the best nursing homes and apartment communities in the country. As a Christian based, not-for-profit community founded through the charity of others, St. Paul's Home affirms its commitment of service and charity to the residents it serves as well as those of the surrounding community through its Mission Statement, Statement of Philosophy and on-going acts.

*Mission Statement*

St. Paul's Senior Community is dedicated to excellence in care and a compassionate environment guided by our Christian love and concern that will enhance the quality of life for those we are called to serve.

*Statement of Our Philosophy*

We believe in the dignity and worth of each individual resident, regardless of race, color, creed, national origin or sex.

We believe that every resident has the right to retain and enhance his/her personal identity.

We believe that the medical, nursing, personal, social, physical, psychological, and spiritual needs of each resident should be fulfilled.

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We believe that each resident has the right to participate in the decision-making process regarding his/her care and embrace and pledge to implement the statement of Residents' Rights which are incorporated into the policies of St. Paul's Home.

St. Paul's Home is a not-for-profit organization established to provide nursing, sheltered care and retirement apartment living services to elderly individuals in a comfortable, cheerful Christian environment. Love of God and love of neighbor is the spirit that guides our work.

*Acts*

During the period October, 2009 through October 2012 St. Paul's Home provided $50,005.83 in charitable care. This $50,005.83 was for direct care and support of residents who did not have the financial means to cover the costs of their stay. During this same time period, St. Paul's Home provided an additional $201,039.99 of charitable care by paying Medicare coinsurance costs that residents were unable to pay and that were not otherwise covered. The total dollar figure of charity care provided by St. Paul's Home for the three year period ending October 2012 equaled $251,045.82. No individual has been turned away from St. Paul's Home because of inability to pay.

Other *acts* of giving to the community at large include gifts of time and talent from staff of St. Paul's Home. Over the past 18 months, time and talent commitment to the community has included: active participation with the Belleville Chamber of Commerce as members of both the Healthcare and Community Services Agency committees; a graduate member of Leadership Belleville (an economic development, healthcare, education, religion and community services mentoring program); participant at numerous health education fairs in Belleville, Shiloh,

ATTACHMENT 10

O'Fallon, Fairview Heights and St. Clair County; active member of the Pioneer Network (a not-for-profit association advocating for culture change in long-term-care); and participant as well as donor to the American Red Cross, Alzheimer's Association, American Cancer Society and Belleville Shriners. All told, a conservative estimate of the time committed back to the community over the past 18 months equates to 250 hours, or about $6,000 of St. Paul's Home staff time.

In addition to the gift of time and talent to the community, St. Paul's Home also offers opportunities for the public to provide community service. Volunteers provide a valuable service to St. Paul's Home; in turn, St. Paul's Home fulfills a role to the community allowing students, and others, to participate in and complete community service projects. Over the past 24 months, volunteers have provided approximately 2,480 hours of service to St. Paul's Home. Of these estimated 2,480 hours almost 45%, or 1,100 hours, have been provided by students fulfilling required community service projects. These hours do not include the volunteer time committed by community members who serve on the board of the St. Paul's Home and the St. Paul's Foundation.

ATTACHMENT 10

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**Administrator**
Charla Rebbe

**Contact Person and Telephone**
Susan Franklin
618-233-2095

**Registered Agent Information**
Laura Northway
1021 West 'E' Street
Belleville, IL 62220

**Date Completed**
3/7/2012

**FACILITY OWNERSHIP**
NON-PROF CORPORATION

**CONTINUING CARE COMMUNITY** Yes
**LIFE CARE FACILITY** No

**ADMISSION RESTRICTIONS**

| | |
|---|---|
| Aggressive/Anti-Social | 0 |
| Chronic Alcoholism | 0 |
| Developmentally Disabled | 0 |
| Drug Addiction | 1 |
| Medicaid Recipient | 0 |
| Medicare Recipient | 0 |
| Mental Illness | 0 |
| Non-Ambulatory | 0 |
| Non-Mobile | 0 |
| Public Aid Recipient | 0 |
| Under 65 Years Old | 0 |
| Unable to Self-Medicate | 0 |
| Ventilator Dependent | 1 |
| Infectious Disease w/ Isolation | 0 |
| Other Restrictions | 0 |
| No Restrictions | 0 |

*Note: Reported restictions denoted by '1'*

**RESIDENTS BY PRIMARY DIAGNOSIS**

| DIAGNOSIS | |
|---|---|
| Neoplasms | 5 |
| Endocrine/Metabolic | 7 |
| Blood Disorders | 5 |
| *Nervous System Non Alzheimer | 0 |
| Alzheimer Disease | 0 |
| Mental Illness | 0 |
| Developmental Disability | 0 |
| Circulatory System | 26 |
| Respiratory System | 28 |
| Digestive System | 12 |
| Genitourinary System Disorders | 3 |
| Skin Disorders | 1 |
| Musculo-skeletal Disorders | 0 |
| Injuries and Poisonings | 12 |
| Other Medical Conditions | 0 |
| Non-Medical Conditions | 16 |
| TOTALS | 115 |

**Total Residents Diagnosed as Mentally Ill** 0

**LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS**

| LEVEL OF CARE | LICENSED BEDS | PEAK BEDS SET-UP | PEAK BEDS USED | BEDS SET-UP | BEDS IN USE | AVAILABLE BEDS | MEDICARE CERTIFIED | MEDICAID CERTIFIED |
|---|---|---|---|---|---|---|---|---|
| Nursing Care | 113 | 113 | 108 | 110 | 98 | 15 | 0 | 113 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Intermediate DD | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Sheltered Care | 62 | 62 | 21 | 22 | 17 | 45 | | |
| TOTAL BEDS | 175 | 175 | 129 | 132 | 115 | 60 | 0 | 113 |

**ADMISSIONS AND DISCHARGES - 2011**

| | |
|---|---|
| Residents on 1/1/2011 | 109 |
| Total Admissions 2011 | 118 |
| Total Discharges 2011 | 112 |
| Residents on 12/31/2011 | 115 |
| **Identified Offenders** | 0 |

**FACILITY UTILIZATION - 2011**
**BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE**

| LEVEL OF CARE | Medicare Pat. days | Medicare Occ. Pct. | Medicaid Pat. days | Medicaid Occ. Pct. | Other Public Pat. days | Private Insurance Pat. days | Private Pay Pat. days | Charity Care Pat. days | TOTAL Pat. days | Licensed Beds Occ. Pct. | Peak Beds Set Up Occ. Pct. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Nursing Care | 3752 | 0.0% | 20620 | 50.0% | 0 | 0 | 11898 | 240 | 36510 | 88.5% | 88.5% |
| Skilled Under 22 | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Intermediate DD | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Sheltered Care | | | | | 261 | 0 | 6433 | 365 | 7059 | 31.2% | 31.2% |
| TOTALS | 3752 | 0.0% | 20620 | 50.0% | 261 | 0 | 18331 | 605 | 43569 | 68.2% | 68.2% |

**RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2011**

| AGE GROUPS | NURSING CARE Male | NURSING CARE Female | SKL UNDER 22 Male | SKL UNDER 22 Female | INTERMED. DD Male | INTERMED. DD Female | SHELTERED Male | SHELTERED Female | TOTAL Male | TOTAL Female | GRAND TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Under 18 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18 to 44 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 45 to 59 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 60 to 64 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 65 to 74 | 1 | 4 | 0 | 0 | 0 | 0 | 1 | 0 | 2 | 4 | 6 |
| 75 to 84 | 12 | 26 | 0 | 0 | 0 | 0 | 2 | 3 | 14 | 29 | 43 |
| 85+ | 8 | 47 | 0 | 0 | 0 | 0 | 2 | 9 | 10 | 56 | 66 |
| TOTALS | 21 | 77 | 0 | 0 | 0 | 0 | 5 | 12 | 26 | 89 | 115 |

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**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE**

| LEVEL OF CARE | Medicare | Medicaid | Other Public | Insurance | Private Pay | Charity Care | TOTALS |
|---|---|---|---|---|---|---|---|
| Nursing Care | 9 | 53 | 0 | 0 | 36 | 0 | 98 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ICF/DD | | 0 | 0 | 0 | 0 | 0 | 0 |
| Sheltered Care | | | 0 | 0 | 16 | 1 | 17 |
| TOTALS | 9 | 53 | 0 | 0 | 52 | 1 | 115 |

**AVERAGE DAILY PAYMENT RATES**

| LEVEL OF CARE | SINGLE | DOUBLE |
|---|---|---|
| Nursing Care | 160 | 140 |
| Skilled Under 22 | 0 | 0 |
| Intermediate DD | 0 | 0 |
| Shelter | 80 | 72 |

**RESIDENTS BY RACIAL/ETHNICITY GROUPING**

| RACE | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Asian | 0 | 0 | 0 | 0 | 0 |
| Amer. Indian | 0 | 0 | 0 | 0 | 0 |
| Black | 10 | 0 | 0 | 0 | 10 |
| Hawaiian/Pac. Isl. | 0 | 0 | 0 | 0 | 0 |
| White | 88 | 0 | 0 | 17 | 105 |
| Race Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 98 | 0 | 0 | 17 | 115 |

| ETHNICITY | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Hispanic | 1 | 0 | 0 | 0 | 1 |
| Non-Hispanic | 97 | 0 | 0 | 17 | 114 |
| Ethnicity Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 98 | 0 | 0 | 17 | 115 |

**STAFFING**

| EMPLOYMENT CATEGORY | FULL-TIME EQUIVALENT |
|---|---|
| Administrators | 1.00 |
| Physicians | 0.00 |
| Director of Nursing | 1.00 |
| Registered Nurses | 7.00 |
| LPN's | 16.00 |
| Certified Aides | 46.00 |
| Other Health Staff | 0.00 |
| Non-Health Staff | 68.00 |
| Totals | 139.00 |

**NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)**

| Medicare | Medicaid | Other Public | Private Insurance | Private Pay | TOTALS | Charity Care Expense* | Charity Care Expense as % of Total Net Revenue |
|---|---|---|---|---|---|---|---|
| 34.9% | 32.3% | 0.1% | 0.0% | 32.7% | 100.0% | | 1.9% |
| 2,347,819 | 2,173,740 | 10,085 | 0 | 2,198,670 | 6,730,314 | 129,370 | |

*Charity Expense does not include expenses which may be considered a community benefit.

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**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**Administrator**
Laura Northway

**Contact Person and Telephone**
LAURA NORTHWAY
618-233-2095

**Registered Agent Information**

**Date Completed**
3/1/2011

**FACILITY OWNERSHIP**
NON-PROF CORPORATION

**CONTINUING CARE COMMUNITY** Yes
**LIFE CARE FACILITY** No

**ADMISSION RESTRICTIONS**

| | |
|---|---|
| Aggressive/Anti-Social | 0 |
| Chronic Alcoholism | 0 |
| Developmentally Disabled | 0 |
| Drug Addiction | 1 |
| Medicaid Recipient | 0 |
| Medicare Recipient | 0 |
| Mental Illness | 0 |
| Non-Ambulatory | 0 |
| Non-Mobile | 0 |
| Public Aid Recipient | 0 |
| Under 65 Years Old | 0 |
| Unable to Self-Medicate | 0 |
| Ventilator Dependent | 1 |
| Infectious Disease w/ Isolation | 0 |
| Other Restrictions | 0 |
| No Restrictions | 0 |

*Note: Reported restictions denoted by '1'*

**RESIDENTS BY PRIMARY DIAGNOSIS**

| DIAGNOSIS | |
|---|---|
| Neoplasms | 4 |
| Endocrine/Metabolic | 8 |
| Blood Disorders | 4 |
| *Nervous System Non Alzheimer | 0 |
| Alzheimer Disease | 0 |
| Mental Illness | 0 |
| Developmental Disability | 0 |
| Circulatory System | 20 |
| Respiratory System | 32 |
| Digestive System | 16 |
| Genitourinary System Disorders | 4 |
| Skin Disorders | 2 |
| Musculo-skeletal Disorders | 0 |
| Injuries and Poisonings | 6 |
| Other Medical Conditions | 0 |
| Non-Medical Conditions | 13 |
| TOTALS | 109 |

**Total Residents Diagnosed as Mentally Ill** 0

**LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS**

| LEVEL OF CARE | LICENSED BEDS | PEAK BEDS SET-UP | PEAK BEDS USED | BEDS SET-UP | BEDS IN USE | AVAILABLE BEDS | MEDICARE CERTIFIED | MEDICAID CERTIFIED |
|---|---|---|---|---|---|---|---|---|
| Nursing Care | 113 | 113 | 105 | 110 | 94 | 19 | 0 | 113 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Intermediate DD | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Sheltered Care | 62 | 62 | 17 | 22 | 15 | 47 | | |
| TOTAL BEDS | 175 | 175 | 122 | 132 | 109 | 66 | 0 | 113 |

**ADMISSIONS AND DISCHARGES - 2010**

| | |
|---|---|
| Residents on 1/1/2010 | 111 |
| Total Admissions 2010 | 128 |
| Total Discharges 2010 | 130 |
| Residents on 12/31/2010 | 109 |
| **Identified Offenders** | 0 |

**FACILITY UTILIZATION - 2010**
**BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE**

| LEVEL OF CARE | Medicare Pat. days | Medicare Occ. Pct. | Medicaid Pat. days | Medicaid Occ. Pct. | Other Public Pat. days | Private Insurance Pat. days | Private Pay Pat. days | Charity Care Pat. days | TOTAL Pat. days | Licensed Beds Occ. Pct. | Peak Beds Set Up Occ. Pct. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Nursing Care | 3949 | 0.0% | 18177 | 44.1% | 0 | 0 | 13361 | 0 | 35487 | 86.0% | 86.0% |
| Skilled Under 22 | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Intermediate DD | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Sheltered Care | | | | | 0 | 0 | 4806 | 365 | 5171 | 22.9% | 22.9% |
| TOTALS | 3949 | 0.0% | 18177 | 44.1% | 0 | 0 | 18167 | 365 | 40658 | 63.7% | 63.7% |

**RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010**

| AGE GROUPS | NURSING CARE Male | NURSING CARE Female | SKL UNDER 22 Male | SKL UNDER 22 Female | INTERMED. DD Male | INTERMED. DD Female | SHELTERED Male | SHELTERED Female | TOTAL Male | TOTAL Female | GRAND TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Under 18 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18 to 44 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 45 to 59 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 60 to 64 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 65 to 74 | 2 | 2 | 0 | 0 | 0 | 0 | 1 | 0 | 3 | 2 | 5 |
| 75 to 84 | 10 | 28 | 0 | 0 | 0 | 0 | 0 | 3 | 10 | 31 | 41 |
| 85+ | 7 | 45 | 0 | 0 | 0 | 0 | 2 | 9 | 9 | 54 | 63 |
| TOTALS | 19 | 75 | 0 | 0 | 0 | 0 | 3 | 12 | 22 | 87 | 109 |

Source:Long-Term Care Facility Questionnaire for 2010, Illinois Department of Public Health, Health Systems Development

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE**

| LEVEL OF CARE | Medicare | Medicaid | Other Public | Insurance | Private Pay | Charity Care | TOTALS |
|---|---|---|---|---|---|---|---|
| Nursing Care | 10 | 47 | 0 | 0 | 37 | 0 | 94 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ICF/DD | | 0 | 0 | 0 | 0 | 0 | 0 |
| Sheltered Care | | | 1 | 0 | 13 | 1 | 15 |
| TOTALS | 10 | 47 | 1 | 0 | 50 | 1 | 109 |

**AVERAGE DAILY PAYMENT RATES**

| LEVEL OF CARE | SINGLE | DOUBLE |
|---|---|---|
| Nursing Care | 150 | 136 |
| Skilled Under 22 | 0 | 0 |
| Intermediate DD | 0 | 0 |
| Shelter | 75 | 70 |

**RESIDENTS BY RACIAL/ETHNICITY GROUPING**

| RACE | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Asian | 0 | 0 | 0 | 0 | 0 |
| Amer. Indian | 0 | 0 | 0 | 0 | 0 |
| Black | 9 | 0 | 0 | 0 | 9 |
| Hawaiian/Pac. Isl. | 0 | 0 | 0 | 0 | 0 |
| White | 85 | 0 | 0 | 15 | 100 |
| Race Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 94 | 0 | 0 | 15 | 109 |

| ETHNICITY | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Hispanic | 1 | 0 | 0 | 0 | 1 |
| Non-Hispanic | 93 | 0 | 0 | 15 | 108 |
| Ethnicity Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 94 | 0 | 0 | 15 | 109 |

**STAFFING**

| EMPLOYMENT CATEGORY | FULL-TIME EQUIVALENT |
|---|---|
| Administrators | 1.00 |
| Physicians | 0.00 |
| Director of Nursing | 1.00 |
| Registered Nurses | 3.00 |
| LPN's | 16.00 |
| Certified Aides | 45.00 |
| Other Health Staff | 0.00 |
| Non-Health Staff | 62.00 |
| Totals | 128.00 |

**NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)**

| Medicare | Medicaid | Other Public | Private Insurance | Private Pay | TOTALS | Charity Care Expense* | Charity Care Expense as % of Total Net Revenue |
|---|---|---|---|---|---|---|---|
| 33.2% | 28.6% | 6.4% | 0.0% | 31.9% | 100.0% | | 14.4% |
| 2,020,165 | 1,737,107 | 386,571 | 0 | 1,937,921 | 6,081,764 | 873,132 | |

*Charity Expense does not include expenses which may be considered a community benefit.

Source:Long-Term Care Facility Questionnaire for 2010, Illinois Department of Public Health, Health Systems Development

8/11/2011

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**Administrator**
Laura Northway

**Contact Person and Telephone**
Laura Northway
618-233-2095

**Registered Agent Information**

**Date Completed**
5/7/2010

**FACILITY OWNERSHIP**
NON-PROF CORPORATION

**CONTINUING CARE COMMUNITY** Yes
**LIFE CARE FACILITY** No

**ADMISSION RESTRICTIONS**

| | |
|---|---|
| Aggressive/Anti-Social | 0 |
| Chronic Alcoholism | 0 |
| Developmentally Disabled | 0 |
| Drug Addiction | 1 |
| Medicaid Recipient | 0 |
| Medicare Recipient | 0 |
| Mental Illness | 0 |
| Non-Ambulatory | 0 |
| Non-Mobile | 0 |
| Public Aid Recipient | 0 |
| Under 65 Years Old | 0 |
| Unable to Self-Medicate | 0 |
| Ventilator Dependent | 1 |
| Infectious Disease w/ Isolation | 0 |
| Other Restrictions | 0 |
| No Restrictions | 0 |

*Note: Reported restictions denoted by '1'*

**RESIDENTS BY PRIMARY DIAGNOSIS**

| DIAGNOSIS | |
|---|---|
| Neoplasms | 2 |
| Endocrine/Metabolic | 19 |
| Blood Disorders | 4 |
| *Nervous System Non Alzheimer | 9 |
| Alzheimer Disease | 2 |
| Mental Illness | 1 |
| Developmental Disability | 0 |
| Circulatory System | 18 |
| Respiratory System | 9 |
| Digestive System | 5 |
| Genitourinary System Disorders | 5 |
| Skin Disorders | 3 |
| Musculo-skeletal Disorders | 22 |
| Injuries and Poisonings | 4 |
| Other Medical Conditions | 18 |
| Non-Medical Conditions | 0 |
| TOTALS | 121 |

**Total Residents Diagnosed as Mentally Ill** 1

**LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS**

| LEVEL OF CARE | LICENSED BEDS | PEAK BEDS SET-UP | PEAK BEDS USED | BEDS SET-UP | BEDS IN USE | AVAILABLE BEDS | MEDICARE CERTIFIED | MEDICAID CERTIFIED |
|---|---|---|---|---|---|---|---|---|
| Nursing Care | 113 | 113 | 113 | 110 | 107 | 6 | 0 | 113 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Intermediate DD | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Sheltered Care | 62 | 62 | 22 | 23 | 14 | 48 | | |
| TOTAL BEDS | 175 | 175 | 135 | 133 | 121 | 54 | 0 | 113 |

**ADMISSIONS AND DISCHARGES - 2009**

| | |
|---|---|
| Residents on 1/1/2009 | 127 |
| Total Admissions 2009 | 166 |
| Total Discharges 2009 | 172 |
| Residents on 12/31/2009 | 121 |
| **Identified Offenders** | 0 |

**FACILITY UTILIZATION - 2009**
**BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE**

| LEVEL OF CARE | Medicare Pat. days | Medicare Occ. Pct. | Medicaid Pat. days | Medicaid Occ. Pct. | Other Public Pat. days | Private Insurance Pat. days | Private Pay Pat. days | Charity Care Pat. days | TOTAL Pat. days | Licensed Beds Occ. Pct. | Peak Beds Set Up Occ. Pct. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Nursing Care | 4020 | 0.0% | 14797 | 35.9% | 0 | 0 | 14908 | 0 | 33725 | 81.8% | 81.8% |
| Skilled Under 22 | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Intermediate DD | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Sheltered Care | | | | | 0 | 0 | 5215 | 365 | 5580 | 24.7% | 24.7% |
| TOTALS | 4020 | 0.0% | 14797 | 35.9% | 0 | 0 | 20123 | 365 | 39305 | 61.5% | 61.5% |

**RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2009**

| AGE GROUPS | NURSING CARE Male | NURSING CARE Female | SKL UNDER 22 Male | SKL UNDER 22 Female | INTERMED. DD Male | INTERMED. DD Female | SHELTERED Male | SHELTERED Female | TOTAL Male | TOTAL Female | GRAND TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Under 18 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18 to 44 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 45 to 59 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 60 to 64 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 65 to 74 | 5 | 10 | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 10 | 15 |
| 75 to 84 | 9 | 24 | 0 | 0 | 0 | 0 | 0 | 8 | 9 | 32 | 41 |
| 85+ | 7 | 52 | 0 | 0 | 0 | 0 | 2 | 4 | 9 | 56 | 65 |
| TOTALS | 21 | 86 | 0 | 0 | 0 | 0 | 2 | 12 | 23 | 98 | 121 |

Source:Long-Term Care Facility Questionnaire for 2009, Illinois Department of Public Health, Health Systems Development

10/8/2010

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE**

| LEVEL OF CARE | Medicare | Medicaid | Other Public | Insurance | Private Pay | Charity Care | TOTALS |
|---|---|---|---|---|---|---|---|
| Nursing Care | 13 | 51 | 0 | 0 | 43 | 0 | 107 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ICF/DD | | 0 | 0 | 0 | 0 | 0 | 0 |
| Sheltered Care | | | 1 | 0 | 12 | 1 | 14 |
| TOTALS | 13 | 51 | 1 | 0 | 55 | 1 | 121 |

**AVERAGE DAILY PAYMENT RATES**

| LEVEL OF CARE | SINGLE | DOUBLE |
|---|---|---|
| Nursing Care | 146 | 132 |
| Skilled Under 22 | 0 | 0 |
| Intermediate DD | 0 | 0 |
| Shelter | 0 | 70 |

**RESIDENTS BY RACIAL/ETHNICITY GROUPING**

| RACE | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Asian | 0 | 0 | 0 | 0 | 0 |
| Amer. Indian | 0 | 0 | 0 | 0 | 0 |
| Black | 4 | 0 | 0 | 0 | 4 |
| Hawaiian/Pac. Isl. | 0 | 0 | 0 | 0 | 0 |
| White | 102 | 0 | 0 | 14 | 116 |
| Race Unknown | 1 | 0 | 0 | 0 | 1 |
| Total | 107 | 0 | 0 | 14 | 121 |

| ETHNICITY | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Hispanic | 1 | 0 | 0 | 0 | 1 |
| Non-Hispanic | 106 | 0 | 0 | 14 | 120 |
| Ethnicity Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 107 | 0 | 0 | 14 | 121 |

**STAFFING**

| EMPLOYMENT CATEGORY | FULL-TIME EQUIVALENT |
|---|---|
| Administrators | 1.00 |
| Physicians | 0.00 |
| Director of Nursing | 1.00 |
| Registered Nurses | 5.00 |
| LPN's | 21.00 |
| Certified Aides | 52.00 |
| Other Health Staff | 0.00 |
| Non-Health Staff | 66.00 |
| Totals | 146.00 |

**NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)**

| Medicare | Medicaid | Other Public | Private Insurance | Private Pay | TOTALS | Charity Care Expense* | Charity Care Expense as % of Total Net Revenue |
|---|---|---|---|---|---|---|---|
| 28.7% | 30.3% | 0.0% | 0.0% | 41.1% | 100.0% | | 0.2% |
| 1,387,506 | 1,465,200 | 0 | 0 | 1,989,286 | 4,841,992 | 11,405 | |

*Charity Expense does not include expenses which may be considered a community benefit.

Source:Long-Term Care Facility Questionnaire for 2009, Illinois Department of Public Health, Health Systems Development

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**Administrator**
Len Rhine

**Contact Person and Telephone**
Len Rhine
618-233-2095

**Date Completed**
4/21/2009

**Registered Agent Information**
Kimberly Cornell
1021 West E Street
Belleville, IL 62220

**FACILITY OWNERSHIP**
NON-PROF CORPORATION

**ADMISSION RESTRICTIONS**

| | |
|---|---|
| Aggressive/Anti-Social | 0 |
| Chronic Alcoholism | 0 |
| Developmentally Disabled | 0 |
| Drug Addiction | 1 |
| Medicaid Recipient | 0 |
| Medicare Recipient | 0 |
| Mental Illness | 0 |
| Non-Ambulatory | 0 |
| Non-Mobile | 0 |
| Public Aid Recipient | 0 |
| Under 65 Years Old | 0 |
| Unable to Self-Medicate | 0 |
| Ventilator Dependent | 1 |
| Infectious Disease w/ Isolation | 0 |
| Other Restrictions | 0 |
| No Restrictions | 0 |

*Note: Reported restictions denoted by '1'*

**RESIDENTS BY PRIMARY DIAGNOSIS**

| DIAGNOSIS | |
|---|---|
| Neoplasms | 5 |
| Endocrine/Metabolic | 13 |
| Blood Disorders | 2 |
| *Nervous System Non Alzheimer | 6 |
| Alzheimer Disease | 1 |
| Mental Illness | 5 |
| Developmental Disability | 1 |
| Circulatory System | 15 |
| Respiratory System | 2 |
| Digestive System | 4 |
| Genitourinary System Disorders | 8 |
| Skin Disorders | 2 |
| Musculo-skeletal Disorders | 23 |
| Injuries and Poisonings | 8 |
| Other Medical Conditions | 18 |
| Non-Medical Conditions | 0 |
| TOTALS | 113 |

**LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS**

| LEVEL OF CARE | LICENSED BEDS | PEAK BEDS SET-UP | PEAK BEDS USED | BEDS SET-UP | BEDS IN USE | AVAILABLE BEDS | MEDICARE CERTIFIED | MEDICAID CERTIFIED |
|---|---|---|---|---|---|---|---|---|
| Nursing Care | 113 | 109 | 104 | 109 | 91 | 22 | 0 | 113 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Intermediate DD | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Sheltered Care | 62 | 38 | 22 | 38 | 22 | 40 | | |
| TOTAL BEDS | 175 | 147 | 126 | 147 | 113 | 62 | 0 | 113 |

**ADMISSIONS AND DISCHARGES - 2008**

| | |
|---|---|
| Residents on 1/1/2008 | 118 |
| Total Admissions 2008 | 104 |
| Total Discharges 2008 | 109 |
| Residents on 12/31/2008 | 113 |

**FACILITY UTILIZATION - 2008**
**BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE**

| | Medicare | | Medicaid | | Other Public | Private Insurance | Private Pay | Charity Care | TOTAL | Licensed Beds | Peak Beds Set Up |
|---|---|---|---|---|---|---|---|---|---|---|---|
| LEVEL OF CARE | Pat. days | Occ. Pct. | Pat. days | Occ. Pct. | Pat. days | Pat. days | Pat. days | Pat. days | Pat. days | Occ. Pct. | Occ. Pct. |
| Nursing Care | 1670 | 0.0% | 19425 | 47.0% | 0 | 0 | 19310 | 0 | 40405 | 97.7% | 101.3% |
| Skilled Under 22 | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Intermediate DD | | | 0 | 0.0% | 0 | 0 | 0 | 0 | 0 | 0.0% | 0.0% |
| Sheltered Care | | | | | 931 | 0 | 5196 | 365 | 6492 | 28.6% | 46.7% |
| TOTALS | 1670 | 0.0% | 19425 | 47.0% | 931 | 0 | 24506 | 365 | 46897 | 73.2% | 87.2% |

**RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2008**

| | NURSING CARE | | SKL UNDER 22 | | INTERMED. DD | | SHELTERED | | TOTAL | | GRAND |
|---|---|---|---|---|---|---|---|---|---|---|---|
| AGE GROUPS | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | TOTAL |
| Under 18 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18 to 44 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 45 to 59 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 60 to 64 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 65 to 74 | 3 | 6 | 0 | 0 | 0 | 0 | 1 | 0 | 4 | 6 | 10 |
| 75 to 84 | 0 | 25 | 0 | 0 | 0 | 0 | 2 | 5 | 2 | 30 | 32 |
| 85+ | 7 | 50 | 0 | 0 | 0 | 0 | 2 | 12 | 9 | 62 | 71 |
| TOTALS | 10 | 81 | 0 | 0 | 0 | 0 | 5 | 17 | 15 | 98 | 113 |

Source:Long-Term Care Facility Questionnaire for 2008, Illinois Department of Public Health, Health Systems Development

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE**

| LEVEL OF CARE | Medicare | Medicaid | Other Public | Insurance | Private Pay | Charity Care | TOTALS |
|---|---|---|---|---|---|---|---|
| Nursing Care | 11 | 42 | 0 | 0 | 38 | 0 | 91 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ICF/DD | | 0 | 0 | 0 | 0 | 0 | 0 |
| Sheltered Care | | | 3 | 0 | 19 | 0 | 22 |
| TOTALS | 11 | 42 | 3 | 0 | 57 | 0 | 113 |

**AVERAGE DAILY PAYMENT RATES**

| LEVEL OF CARE | SINGLE | DOUBLE |
|---|---|---|
| Nursing Care | 142 | 129 |
| Skilled Under 22 | 0 | 0 |
| Intermediate DD | 0 | 0 |
| Shelter | 70 | 0 |

**RESIDENTS BY RACIAL/ETHNICITY GROUPING**

| RACE | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Asian | 0 | 0 | 0 | 0 | 0 |
| Amer. Indian | 0 | 0 | 0 | 0 | 0 |
| Black | 4 | 0 | 0 | 0 | 4 |
| Hawaiian/Pac. Isl. | 0 | 0 | 0 | 0 | 0 |
| White | 87 | 0 | 0 | 22 | 109 |
| Race Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 91 | 0 | 0 | 22 | 113 |

| ETHNICITY | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Hispanic | 1 | 0 | 0 | 0 | 1 |
| Non-Hispanic | 90 | 0 | 0 | 22 | 112 |
| Ethnicity Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 91 | 0 | 0 | 22 | 113 |

**STAFFING**

| EMPLOYMENT CATEGORY | FULL-TIME EQUIVALENT |
|---|---|
| Administrators | 1.00 |
| Physicians | 0.00 |
| Director of Nursing | 1.00 |
| Registered Nurses | 4.80 |
| LPN's | 12.00 |
| Certified Aides | 45.00 |
| Other Health Staff | 0.00 |
| Non-Health Staff | 54.00 |
| Totals | 117.80 |

**NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)**

| Medicare | Medicaid | Other Public | Private Insurance | Private Pay | TOTALS | Charity Care Expense | Charity Care Expense as % of Total Net Revenue |
|---|---|---|---|---|---|---|---|
| 15.6% | 36.9% | 0.0% | 0.0% | 47.5% | 100.0% | | 0.2% |
| 737,999 | 1,745,109 | 0 | 0 | 2,243,679 | 4,726,787 | 11,316 | |

Source:Long-Term Care Facility Questionnaire for 2008, Illinois Department of Public Health, Health Systems Development

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**Administrator**
Lee Bohannon-Smith

**Contact Person and Telephone**
Lee Bohannon-Smith
618-233-2095

**Date Completed**
5/5/2008

**Registered Agent Information**

**FACILITY OWNERSHIP**
NON-PROF CORPORATION

**ADMISSION RESTRICTIONS**

| | |
|---|---|
| Aggressive/Anti-Social | 1 |
| Chronic Alcoholism | 1 |
| Developmentally Disabled | 1 |
| Drug Addiction | 1 |
| Medicaid Recipient | 0 |
| Medicare Recipient | 1 |
| Mental Illness | 1 |
| Non-Ambulatory | 0 |
| Non-Mobile | 0 |
| Public Aid Recipient | 0 |
| Under 65 Years Old | 0 |
| Unable to Self-Medicate | 0 |
| Ventilator Dependent | 1 |
| Infectious Disease w/ Isolation | 0 |
| Other Restrictions | 0 |
| No Restrictions | 0 |

*Note: Reported restictions denoted by '1'*

**RESIDENTS BY PRIMARY DIAGNOSIS**

| DIAGNOSIS | |
|---|---|
| Neoplasms | 2 |
| Endocrine/Metabolic | 12 |
| Blood Disorders | 2 |
| *Nervous System Non Alzheimer | 0 |
| Alzheimer Disease | 17 |
| Mental Illness | 12 |
| Developmental Disability | 1 |
| Circulatory System | 26 |
| Respiratory System | 22 |
| Digestive System | 7 |
| Genitourinary System Disorders | 0 |
| Skin Disorders | 0 |
| Musculo-skeletal Disorders | 2 |
| Injuries and Poisonings | 0 |
| Other Medical Conditions | 0 |
| Non-Medical Conditions | 13 |
| TOTALS | 116 |

**LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS**

| LEVEL OF CARE | LICENSED BEDS | PEAK BEDS SET-UP | PEAK BEDS USED | BEDS SET-UP | BEDS IN USE | AVAILABLE BEDS | MEDICARE CERTIFIED | MEDICAID CERTIFIED |
|---|---|---|---|---|---|---|---|---|
| Nursing Care | 113 | 109 | 103 | 109 | 103 | 10 | 0 | 113 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Intermediate DD | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| Sheltered Care | 62 | 38 | 20 | 38 | 13 | 49 | | |
| TOTAL BEDS | 175 | 147 | 123 | 147 | 116 | 59 | 0 | 113 |

**ADMISSIONS AND DISCHARGES - 2007**

| | |
|---|---|
| Residents on 1/1/2007 | 117 |
| Total Admissions 2007 | 80 |
| Total Discharges 2007 | 81 |
| Residents on 12/31/2007 | 116 |

**FACILITY UTILIZATION - 2007**
**BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE**

| LEVEL OF CARE | Medicare Pat. days | Medicare Occ. Pct. | Medicaid Pat. days | Medicaid Occ. Pct. | Other Pat. days | TOTAL Pat. days | Licensed Beds Occ. Pct. | Peak Beds Set Up Occ. Pct. |
|---|---|---|---|---|---|---|---|---|
| Nursing Care | 0 | 0.0% | 24051 | 58.3% | 13142 | 37193 | 90.2% | 93.5% |
| Skilled Under 22 | | | 0 | 0.0% | 0 | 0 | 0.0% | 0.0% |
| Intermediate DD | | | 0 | 0.0% | 0 | 0 | 0.0% | 0.0% |
| Sheltered Care | | | | | 5948 | 5948 | 26.3% | 42.9% |
| TOTALS | 0 | 0.0% | 24051 | 58.3% | 19090 | 43141 | 67.5% | 80.4% |

**RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2007**

| AGE GROUPS | NURSING CARE Male | NURSING CARE Female | SKL UNDER 22 Male | SKL UNDER 22 Female | INTERMED. DD Male | INTERMED. DD Female | SHELTERED Male | SHELTERED Female | TOTAL Male | TOTAL Female | GRAND TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Under 18 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18 to 44 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 45 to 59 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 60 to 64 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 2 |
| 65 to 74 | 2 | 4 | 0 | 0 | 0 | 0 | 1 | 0 | 3 | 4 | 7 |
| 75 to 84 | 4 | 24 | 0 | 0 | 0 | 0 | 0 | 3 | 4 | 27 | 31 |
| 85+ | 8 | 59 | 0 | 0 | 0 | 0 | 1 | 8 | 9 | 67 | 76 |
| TOTALS | 15 | 88 | 0 | 0 | 0 | 0 | 2 | 11 | 17 | 99 | 116 |

Source:Long-Term Care Facility Questionnaire for 2007, Illinois Department of Public Health, Health Systems Development

**ST. PAUL'S HOME**
1021 WEST E STREET
BELLEVILLE, IL. 62220

**Reference Numbers** Facility ID 6009120
Health Service Area 011 Planning Service Area 163

**RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE**

| LEVEL OF CARE | Medicare | Medicaid | Other Public | Insurance | Private Pay | Charity Care | TOTALS |
|---|---|---|---|---|---|---|---|
| Nursing Care | 0 | 60 | 0 | 0 | 43 | 0 | 103 |
| Skilled Under 22 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ICF/DD | | 0 | 0 | 0 | 0 | 0 | 0 |
| Sheltered Care | | | 2 | 0 | 11 | 0 | 13 |
| TOTALS | 0 | 60 | 2 | 0 | 54 | 0 | 116 |

**AVERAGE DAILY PAYMENT RATES**

| LEVEL OF CARE | SINGLE | DOUBLE |
|---|---|---|
| Nursing Care | 135 | 125 |
| Skilled Under 22 | 0 | 0 |
| Intermediate DD | 0 | 0 |
| Shelter | 70 | 0 |

**RESIDENTS BY RACIAL/ETHNICITY GROUPING**

| RACE | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Asian | 0 | 0 | 0 | 0 | 0 |
| Amer. Indian | 0 | 0 | 0 | 0 | 0 |
| Black | 7 | 0 | 0 | 0 | 7 |
| Hawaiian/Pac. Isl. | 0 | 0 | 0 | 0 | 0 |
| White | 96 | 0 | 0 | 13 | 109 |
| Race Unknown | 0 | 0 | 0 | 0 | 0 |
| Total | 103 | 0 | 0 | 13 | 116 |

| ETHNICITY | Nursing | SklUnd22 | ICF/DD | Shelter | Totals |
|---|---|---|---|---|---|
| Hispanic | 2 | 0 | 0 | 0 | 2 |
| Non-Hispanic | 0 | 0 | 0 | 0 | 0 |
| Ethnicity Unknown | 101 | 0 | 0 | 13 | 114 |
| Total | 103 | 0 | 0 | 13 | 116 |

**STAFFING**

| EMPLOYMENT CATEGORY | FULL-TIME EQUIVALENT |
|---|---|
| Administrators | 1.00 |
| Physicians | 0.00 |
| Director of Nursing | 1.00 |
| Registered Nurses | 2.00 |
| LPN's | 14.00 |
| Certified Aides | 40.00 |
| Other Health Staff | 0.00 |
| Non-Health Staff | 53.00 |
| Totals | 111.00 |

**NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)**

| Medicare | Medicaid | Other Public | Private Insurance | Private Pay | TOTALS | Charity Care Expense | Charity Care Expense as % of Total Net Revenue |
|---|---|---|---|---|---|---|---|
| 0.0% | 49.3% | 0.0% | 0.0% | 50.7% | 100.0% | | 0.0% |
| 0 | 2,026,642 | 0 | 0 | 2,086,572 | 4,113,214 | 0 | |

Source:Long-Term Care Facility Questionnaire for 2007, Illinois Department of Public Health, Health Systems Development

12/15/2008

Final

# Market Feasibility Study
# presented to
# St. Paul's Home and St. Andrew's Management Services
# for St. Paul's Home

## Belleville, Illinois

## 2011

BROOKS
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**St. Paul's Home**
**Market Feasibility Study**

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Appendix A: Pricing Tables

Appendix B: Demand Calculations

## 1. Project Overview

St. Paul's Home is located on West "E" Street in Belleville, Illinois. The surrounding streets are mostly residential, and St. Paul's Home is near Pleasant Hill City Park, full of baseball diamonds and tennis courts. St. Paul United Church of Christ, and Christ United Church of Christ are all located within a half mile of St. Paul's Home and Trinity United Church of Christ is nearby. Main Street, a major artery of Belleville, is home to several "mom and pop" stores and restaurants, along with a handful of corporate entities such as Bank of America and Firestone Auto Store. Belleville also has several retail outlets, specifically Target is south of the campus and Wal-Mart is east of the campus. Fairview Heights, north of Belleville, has more retail offerings.

St. Paul's Home is not far from the downtown area of Belleville, which offers various dining venues, theaters and a public library. Illinois Street is approximately one mile away, running longitudinally through half the state. Highway 15 offers easy access to St. Louis, and Interstate 64, 10 miles away, runs all the way to the Atlantic Ocean. A light rail line was built in 2001 and also provides easy access to St. Louis. St. Elizabeth's Hospital is the closest hospital and is located in the middle of town. Within five miles is Memorial Hospital.

There are a total of four high schools in Belleville, two are private and two are public. Belleville West and Belleville East, the two public schools, have a student population of nearly 5,000 combined. Belleville East has an outdoor campus as it was previously a community college and Belleville West has a newer building. Althoff High is a large private Catholic School and Governor French is the other private school.

## 2. About St. Paul's Home

St. Paul's Home (SPH), managed by St. Andrews Management Services, has provided services to the aged for more than eighty years. Located on one interconnected campus on the outskirts of Belleville's town center, St. Paul's Home has steadily grown since its inception. As a faith based, not-for-profit continuum of care community, St. Paul's Home offers living options from Independent Living apartments to Skilled Nursing Facilities.

SPH offers three levels of care:

1. IL apartments (53 apartments)
2. Shelter Care (AL) (22 units) (licensed for 62)
3. SNF (78 beds) and ICF (35) (licensed for 113 combined)

Independent Living

St. Paul's Home's apartments feature an open atrium as its centerpiece, although residents in wheelchairs and walkers cannot access it. The apartments feature one and two bedrooms and amenities include dining, utilities, housekeeping, maintenance, transportation, and activities and programs. In the past three years, St. Paul's Home has enjoyed strong demand for its Independent Living but is finding that older residents in Belleville still struggle to sell their homes. Retirement apartments are based on rental fees and start at $1,910 per month for one-bedroom apartments and $2,089 per month for two-bedroom apartments.

Assisted Living (Shelter Care)

St. Paul's Shelter Care (an older, but elevated Assisted Living license) also offers individual or companion rooms that include several amenities such as three daily meals, personal laundry services, assistance with personal care, housekeeping, maintenance, medication management, general health monitoring, and short term care and accommodations. Several activities such as games, outings, regular religious services, crafts, exercise classes, parties, live entertainment, talent shows and family events are available. Shelter Care at St. Paul's Home typically charges $72/day. Of all the levels of care at St. Paul's Home, Shelter Care's building is most in need of replacement and renovation.

Nursing Facility

St. Paul's Home's 1962 expansion included nursing home accommodations. Today, St. Paul's Home offers both SNF and ICF in one building. St. Paul's Home's nursing facilities provide semiprivate rooms to those who need personalized nursing care. Fees for a semiprivate room are $140/day and fees for a private room are $160/day. Around-the-clock nursing and individual assistance is provided. St. Paul's Home has 175 total beds (including

Shelter Care, SNF and ICF). The staff of RNs, LPNs, and CNAs are genuinely interested in the well-being of the residents under their care.

St. Paul's Home has offered Medicare-Certified Rehabilitation Services since June 2008. Treatment includes geriatric physical, occupational and speech therapies. St. Paul's Home offers long-term and short-term stays to both residents and the public. Most rehabilitation services are covered by traditional Medicare reimbursement and some private insurance.

Respite Care provides services for those seniors who need assistance on a short-term basis. Personal care is provided, including bathing and dressing, medication management and monitoring of overall health. Rates for respite care vary depending on the level of care provided.

Overall, St. Paul's Home and St. Andrew's are fully committed to providing all of those who enter a caring and peaceful place. Management and staff recognize the importance of their work and maintaining the well-respected brand that St. Paul's Home has earned through the years. The key obstacle that stands in the way is matching the physical plant to the services St. Paul's Home provides. As this is an older community, St. Paul's must undergo renovation to maintain its trusted reputation and provide a safe shelter for its residents.

## 3. Executive Summary and Recommendations

- **Key indicators suggest favorable market conditions in the proposed repositioning of St. Paul's Home.** These include:
  - An existing and growing population – both overall and senior age segments
  - A fairly educated marketplace in terms of senior living options
  - Two established CCRCs (St. Paul's Home and The Shrine), both with long histories of success and service, and healthy occupancy rates
  - A dedicated and exemplary staff and community culture
  - Strong connections with local government officials
  - Space available for on-campus growth and expansion
  - Positive demand for Independent Living and Assisted Living (Shelter Care) residences among age- and income-qualified prospects over the next five years
  - Community has been in favorable financial standing for the past three years, despite the economic downturn
  - St. Andrew's management and backing

- **Estimated demand for Independent Living and Assisted Living (Shelter Care) residences in the areas surrounding St. Paul's Home is positive through 2016.** The tables below highlight the increasing expected demand for senior living units among the age- and income-qualified (ages 65+ and income of $35,000+ for IL and ages 75+ for AL) population as it continues to grow in the market area over the next four years.
  - It is important to note that since the expected demand is calculated for ages 65+, that a more conservative read on this figure is recommended as capturing younger seniors is challenging.

INDEPENDENT LIVING

| Age segments | 65 to 74 | 65 to 74 | 75+ | 75+ |
|---|---|---|---|---|
| Year | 2010 | 2016 | 2010 | 2016 |
| Number of age- and income-qualified households | 3,425 | 4,344 | 2,151 | 2,317 |
| Expected IL Demand | 44 | 57 | 80 | 86 |
| Total Expected Demand for Ages 65+ with income of $35,00+ through 2016 | 143 | | | |

ASSISTED LIVING

| | | |
|---|---|---|
| Minimum age for occupancy | 75 | 75 |
| Year | 2011 | 2016 |
| Number of age-, income- and need-qualified households | 954 | 1,028 |
| **AL demand from PMA; adjusted for draw and sustainable occupancy** | **125** | **135** |

- **St. Paul's Home's culture is unmatched.** Interviews with staff members across multiple departments indicated a universal commitment to fulfilling St. Paul's Home's/St. Andrew's mission to serve and care for seniors. Staff members loved their jobs, were genuinely excited to come to work and proud to be part of the St. Paul's Home team. Staff members were resourceful and adapted to the constraints of the older buildings and limited space. Building and campus improvements would only enhance this already vibrant culture.

- **The market's opinion regarding St. Paul's Home is strong.** This is especially encouraging, given the current state of the buildings and recent crime near the location. St. Paul's Home has a fabulous reputation among competitors. All competitors we interviewed believe that St. Paul's Home excelled in providing great quality of care and a desirable lifestyle for IL residents.

- **The Shrine is St. Paul's Home's strongest competitor and St. Paul's Home's current building and campus make it difficult to compete with The Shrine.** The Shrine's campus is sprawling and beautiful, plus its newly renovated Shelter Care and SNF accommodations and dining room are top-notch, making it hard for St. Paul's Home to compete. Physical plant improvements will enable St. Paul's Home to compete more aggressively with The Shrine.

- **St. Paul's Home's continuum is lop-sided and too focused on SNF.** As a result, it is no surprise that consumer opinion of the community is that of a nursing home and not a CCRC (with multiple levels of care). The demand calculations (as well as Illinois Health Facilities and Services Review Board) indicate the market is over-saturated with SNF beds, but that demand exists for IL and AL (Shelter Care). As a result, we recommend that St. Paul's Home readjust its product assortment to reflect that of a

traditional CCRC by adding more IL and AL (Shelter Care) product and not expanding its SNF facility.

- **The current Shelter Care and SNF buildings are not salvageable and both products must be replaced.** In addition to replacing the existing buildings, the product within each level of care must be updated to today's market standards.
    - **SNF must include some private accommodations and we recommend a separate SNF wing dedicated to rehab.**
    - **AL (Shelter Care) must be wheel chair accessible and some suites must be able to accommodate couples who wish to live together.**

- **Further, the current IL apartments meet the market's needs today, but will likely need major renovation within five years.** The current floor plans and sizes (at 484 square feet and 572 square feet) are much smaller than what is selling nationwide for IL.

- **Currently, there is no product in the Belleville area that is particularly attractive to younger seniors (ages 65-75). This is important because the young senior cohort is especially attractive and a sizeable target consumer base.** It is particularly challenging to attract young seniors to a retirement community, but doing so greatly improves the brand perception as an active senior community. Young seniors want different types of products, such as cottage homes with garages and larger villas. There is an opportunity to have the most attractive product in the market for younger seniors, even if it is only a handful of homes. BAR recommends exploring the idea of building about 10 IL cottage homes as part of the renovation.

- **As a result, Brooks Adams Research (BAR) recommends exploring the following:**
    - Building new IL apartments and cottage homes on the open campus acreage.
    - Renovating the current IL apartments for AL (Shelter Care).
    - Including more common space for IL and AL (Shelter Care) activities and dining.
    - Rebuilding SNF, with some private rooms as well as a larger dining and gathering rooms. Additionally, include a dedicated private room rehab wing (with an expanded rehab therapy center).
        - We believe by creating an excellent rehab experience St. Paul's Home can market IL.
    - Increasing campus security with night security and a fenced campus, to address any safety concerns.

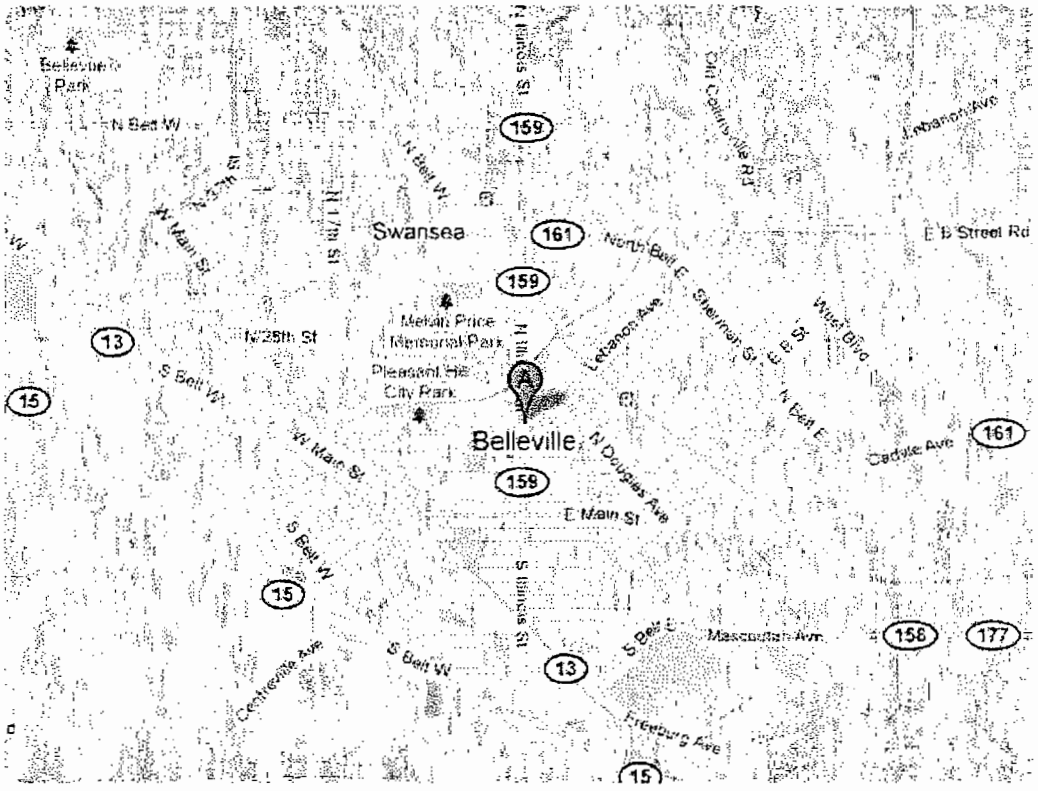
- Develop outdoor space for resident and community enjoyment.

- **BAR further recommends continuing the rental contract and exploring the addition of a revenue neutral entry fee option.** The rental contract option is the most popular in the area, and The Shrine admitted its rental option was preferred over its entry fee options. But, we also see the value in having options, as alternative contract options enable prospects to choose which plan works best for their individual financial situations. If St. Paul's Home were interested in offering more options, the time would be right for St. Paul's Home to introduce new options in conjunction with its newer and renovated product.

- **Although current efforts have gleaned *some* information about likely buyers, a critical next step will be to further refine this definition for targeted marketing efforts to market the updated community.** BAR recommends conducting in-depth consumer research and lifestyle segmentation to better define and locate the target market for the proposed development and renovation. Using data collected during the consumer research portion of this effort, we will hone in on the lifestyle and behavioral characteristics of this group and also identify where they are located in the market area; this will be essential to steer future marketing efforts. As the research clearly demonstrated, there is a *very specific buyer* for this community and location. And while some of the demographics of this buyer and his/her current location may differ, there are certain key behavioral and attitudinal characteristics that define this person. We expect that deeper research will uncover certain affinity groups locally. For example, one affinity group could potentially be consumers who are attracted to Belleville's historic areas who would resonate with St. Paul's Home's location in a historic neighborhood. While the research efforts to date have uncovered some of these early learnings, more work needs to be done in order to delve deeper into these key differentiating factors and provide a more complete consumer understanding.

- **Brooks Adams Research believes that there is potential to expand and reposition St. Paul's Home on its current campus in Belleville, but insists that the future success of the project relies heavily on accurately defining, locating and targeting the *very specific* buyer prospect and offering products for all levels of care that consumers find desirable; sufficient marketing budget must be allocated upfront for this effort.**

## 4. Location




Established in 1850 as a city, Belleville, Illinois was founded by George Blair, an American of Scottish descent. Today, the city's population is about 44,000. At approximately 18.9 square miles, the population density is rather low at 2,190 people per square mile. It is the largest metropolitan area on the near east side of St. Louis, Missouri, and is the most populated city south of Springfield within the state of Illinois. During the Civil War, Belleville became an industrial hub for items such as stoves, shoe manufacturing, and the community's campus includes part of Stag Brewery's former property. Belleville sits on more than 400,000 acres of coal mining land in St. Clair County, which also brought the steam train and coal mining business through town. Because of its coal hub and location adjacent to St. Louis, Belleville became increasingly more populated.

While the architecture in Belleville is diverse, the German influence is clear in its historic properties along main streets, many are German-style row and town houses. Many of the Germans that settled in Belleville were of a scholarly nature, thus influencing the value of education that the town currently has. There are three universities in Belleville: St. Louis

University, Lindenwood University and Southwestern Illinois College. An especially large portion of the Belleville population is of retirement age.

Currently, Belleville is at a tremendous turning point. The town is undergoing a balloon effect in which building projects are taking place outside of the town center, creating a declining Main Street that once was the focus of the town. The area is also crime-ridden and concerns about campus safety exist.

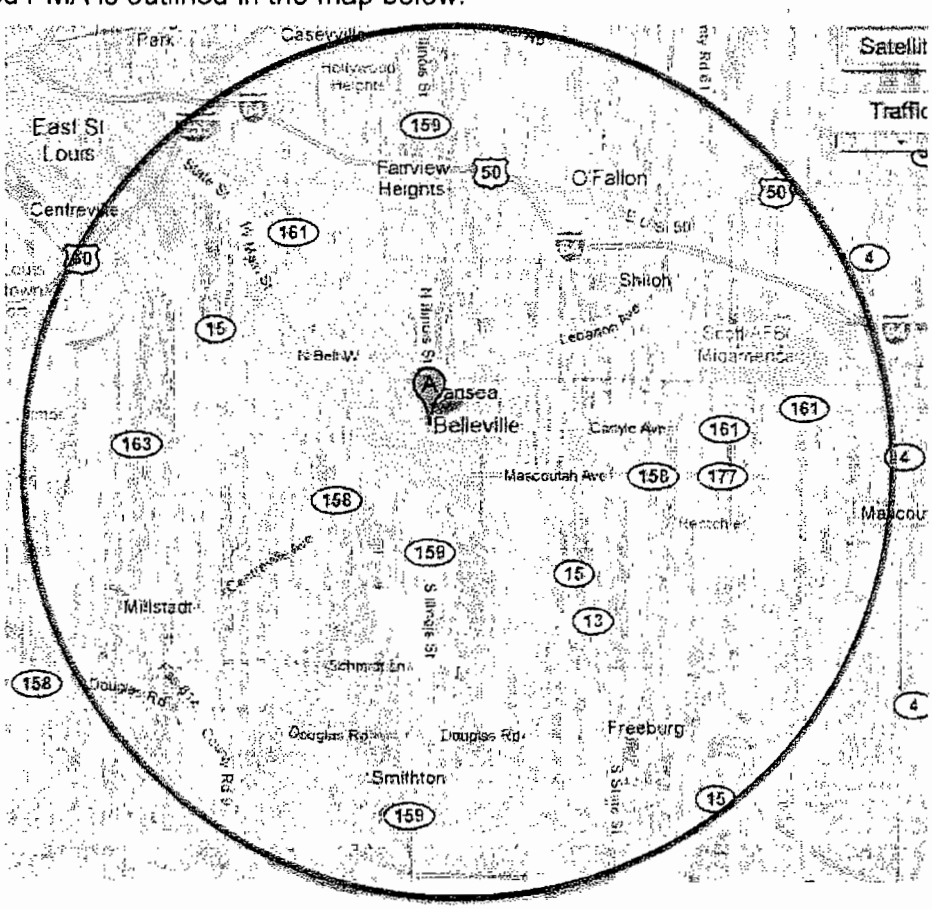
## 5. Market Area Definition and Key Data

### 5.1 Primary Market Area Definition

The Primary Market Area (PMA) is the area from which the majority of residents are expected to come. The PMA for this community has been defined as a five-mile radius around the St. Paul's Home community, which includes the Belleville area as well as Swansea, Shiloh, Fairview Heights, Smithton and Millstadt.

### 5.2 PMA Map

The defined PMA is outlined in the map below.



## 5.3 Market Area Demographics

The table below highlights the population figures for the St. Paul's Home PMA by age and income cohorts as provided by the U.S. Census Bureau based on the 2000 Census, updated annually and projected through 2016.

The overall population for the market area is expected to increase moderately by nearly 2.5 percent over the next five years. The senior population is also expected to grow significantly by more than 14 percent and 13 percent for the 55+ and 65+ age cohorts, respectively, while the 75+ age cohort will see moderate growth at nearly 4 percent. These figures represent approximately 37,000, 19,000 and 9,500 people for each age segment.

When moderate income qualifications are considered (as shown in the second half of the table), growth rates are even stronger, with around 17 percent and more than 19 percent increases projected for the two younger age cohorts in the market area and nearly eight percent for the 75+ age cohort. These figures represent approximately 13,000, 5,500 and nearly 2,000 people for each age segment. These growth rates indicate the expected presence of qualified target market populations in the PMA for the next five years at least.

*Demographic Data for Belleville PMA*

| *Population by Age* | 2011 Estimate | 2016 Projection | % change 2011-2016 |
|---|---|---|---|
| **Total Population All Ages** | **140,722** | **144,148** | **2.43%** |
| ***Young* Senior Population** | | | |
| Age 55 - 64 | 17,232 | 19,942 | **15.73%** |
| Age 65 - 74 | 9,615 | 11,869 | **23.44%** |
| **Senior Population** | | | |
| Age 75 to 84 | 6,464 | 6,454 | **-0.15%** |
| Age 85+ | 3,049 | 3,417 | **12.07%** |
| **Total Population Ages 55+** | **36,360** | **41,682** | **14.64%** |
| **Total Population Ages 65+** | **19,128** | **21,740** | **13.66%** |
| **Total Population Ages 75+** | **9,513** | **9,871** | **3.76%** |

| *Population by Age & Income* | 2011 Estimate | 2016 Projection | % change 2011-2016 |
|---|---|---|---|
| **Senior population with $35,000+ annual household income** | | | |
| ***Young* Senior Population** | | | |
| Age 55 to 64 | 7,509 | 8,686 | **15.67%** |
| Age 65 to 74 | 3,425 | 4,344 | **26.83%** |
| **Senior Population** | | | |
| Age 75 to 84 | 1,667 | 1,726 | **3.54%** |
| Age 85+ | 484 | 591 | **22.11%** |
| **Total Population Ages 55+ & $35K+** | **13,085** | **15,347** | **17.29%** |
| **Total Population Ages 65+ & $35K+** | **5,576** | **6,661** | **19.46%** |
| **Total Population Ages 75+ & $35K+** | **2,151** | **2,317** | **7.72%** |

**5.4 Real Estate Market Characteristics**

The median listing price for homes in Belleville, Illinois is $95,000, though the median sale price for those homes falls at about $88,500. The overall market value for most homes in this area is $84,500. Over the past year, the market value has declined 4.8 percent in Belleville. Home ownership is just over 60 percent, and about 47 percent of those individuals own single-family homes, while the rest are condo owners and renters. In the Belleville area 85.7 percent of properties are single-family homes, and the nominal residential real estate map is 8.19 percent and the effective residential real estate tax is 2.73 percent (according to St. Louis Regional Chamber and Growth Association).

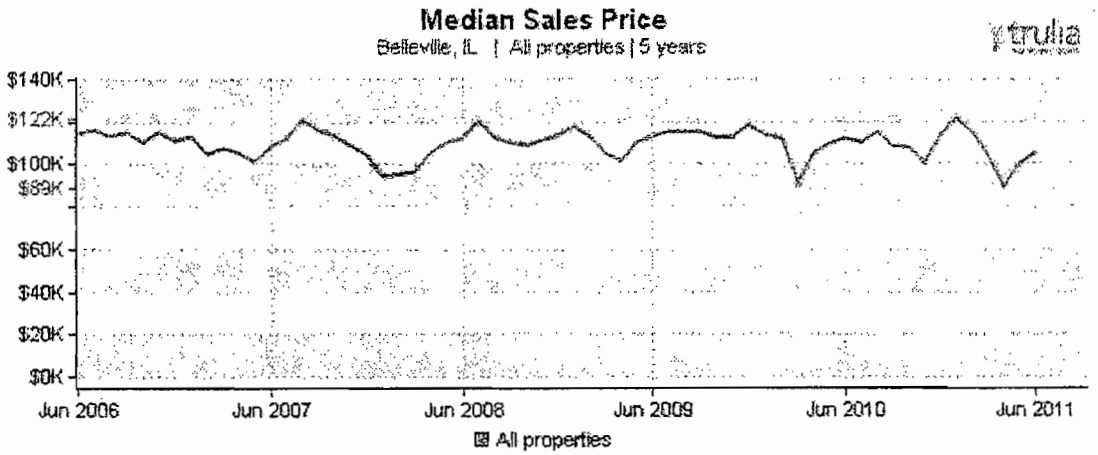
The neighboring towns of Fairview Heights, Swansea, and Shiloh have much higher market values, indicating (along with the sharp decline in home values over the past year) that Belleville is not as affluent a community. The home values in the aforementioned towns are as follows:

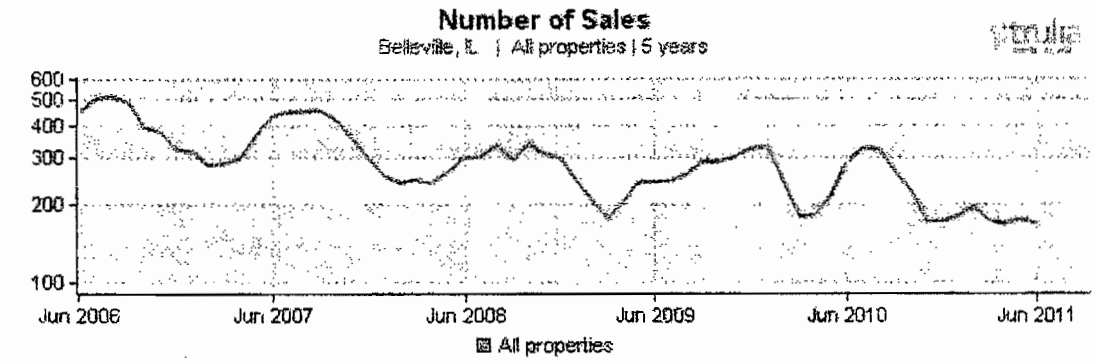
- $102,800 in Fairview Heights
- $144,500 in Swansea
- $171,800 in Shiloh

The average annual income for this area (Belleville) is about $42,000.

Confidence in the Belleville real estate market is low, with local Realtors reporting they are about 50 percent confident in the market's ability to recover. The Realtors we interviewed estimate that the housing market will eventually recover along with the national economy, in about five years. Credit requirements have been stiffer, people have been losing jobs and foreclosure has been a major issue as well. Realtors are making educated guesses that the approximate selling time for a home in the Belleville area is anywhere between seven and nine months, keeping the market value low. With some exceptions, the housing market for seniors has been surviving due to the fact that most seniors have more equity in their homes than the average homeowner; many of them have no mortgage remaining on their homes. Those who have mortgages and are trying to sell are taking the same hit as the rest of the market. Realtors also confidently suggest that Belleville is comparable to other cities its size throughout the U.S. About half of the Realtors interviewed commented that many people in the Belleville area who are trying to move are looking either to relocate back into the city (St. Louis, Missouri) area, or East of Belleville into more rural areas. Of the six Realtors interviewed, four were unable to specify areas in Belleville that are of particular interest to the senior community. It was found that the most popular style of single-family home in Belleville is one-story.

The following inset from *Trulia.com* illustrates the median sales price and compares it to the number of sales over the last five years in Belleville, Illinois. The graph represents all types of properties and demographics, although it was concluded through research that 44.3 percent of properties owned in Belleville are single-family homes.




Belleville, Illinois is a growing area outside of St. Louis, Missouri that has the potential to be an attractive relocation spot for many types of residents. Many senior residents in the community who grew up in the area stayed through the worst economic and social periods in Belleville, making it possible for young families and the elderly community that left to be attracted to Belleville again. While Belleville is suffering from the same housing market problems that many communities in the U.S. are, Realtors, investors and local residents see Belleville as a community that will be a popular place to live again.

### 5.5 St. Paul's Home's Current Campus Location

Given that major renovation and reconstruction of St. Paul's Shelter Care and Nursing Facility buildings are needed and the declining environment in Belleville, consideration must be paid to whether St. Paul's Home should rebuild and expand on its current campus or move its campus to a different location. This issue was examined in the study, in the demographic and real estate market analysis, and through interviews with staff members, Board of Directors members and staff members at the competition. Some people interviewed did recommend moving the community, namely because of the immediate area's growing crime rate and adult children moving to adjacent areas (such as O'Fallon, Shiloh, Smithton,

Freeburg, Mascoutah and Fairview Heights). Despite these reasons to move, the overall sentiment was that St. Paul's Home would be best suited to stay at its current location. Key reasons include:

- Current IL apartments are still viable products for senior living
- Location is close to hospitals and police station
- Location is close to supporting churches, and this is particularly important to church members
- Currently St. Paul's Home is centrally located
- Location is convenient for employees to access
- Current campus has land that can be utilized
- Belleville seniors feel comfortable in the centralized location

## 6. Competitor Review

BAR visited the main CCRCs and stand-alone communities that compete with St. Paul's Home. Overall, The Shrine is St. Paul's Home's primary competition in the market area. Other communities visited include Grand Court, Bradford Place, Rosewood and Calvin Johnson/ Midwest Rehab and Respiratory. All communities listed above except Midwest Rehab and Respiratory are also included in the demand analysis and penetration analysis.

A report of our site visit for each is detailed below. Current pricing can be found in Appendix A.

### 6.1 Competitor Site Visit Reports

#### 6.1.1 National Shrine of Our Lady of the Snows

Community Overview

National Shrine of Our Lady of the Snows, or The Shrine, is a Catholic-affiliated community located on 200 acres of land overlooking the Mississippi River Valley. The Shrine offers spiritual programming, devotional areas and Mass. The retirement community offers Independent Living, Assisted Living and Skilled Nursing on twenty acres of land. The Shrine offers daily Mass and Ecumenical services.

In operation since the 1950s, The Shrine serves as a spiritual retreat for many Midwesterners and has been in its current location since 1958. With one million visitors yearly, The Shrine has established itself as a place of peace and rest. The Shrine also has a conference center in Belleville and hosts events such as wedding receptions, business meetings and special celebrations.

The Shrine lies between St. Louis and Belleville, with close access to Interstates 255 and 64. The land is rather secluded, creating a sense of privacy and seclusion. There is evident signage for the community on both the highway and the campus. The property is beautiful with immaculate landscaping and two outdoor amphitheaters.

The Independent Living community offers an option for one to three meals daily, a beauty shop, a chapel, a fitness center and in-apartment walk-in showers. All residents are private pay. The Shrine's fitness center offers programs such as tai chi, zumba, and a walking club. A three-meal plan costs $100 per month additional. Residents have the choice of living in the high-rise or on the ground floor, with ground-floor living costing about $500 more per month. The Shrine offers an 80 percent refundable entry fee, a 90 percent refundable entry fee and straight rental without entrance fees. A typical one-bedroom with an 80 percent refund option

has an entrance fee of $40,000 and a monthly fee of $1,171. With straight rental, a monthly fee for a high-rise apartment is $1,858. The rental option used to be Life Care, but Belleville residents did not connect with the concept of Life Care.

The Shrine is the only other community that offers Shelter Care, or a higher-level Assisted Living. It offers Rehab on the premises as well as 24-hour nursing assistance. The Shrine offers studio, efficiency, and one bedroom apartments. Services include linen service, housekeeping, transportation and all utilities except for phone.

The Dammert Geriatric Center is fully licensed and offers private and semiprivate rooms, outdoor patios, a fireside dining room, hospice affiliation and podiatry services. All the rooms are currently semiprivate at a cost of $179 per day.

Key Selling Points versus Competition

- Affiliation with the Catholic community
- Large campus on beautiful land
- Rehab on premises
- Great fitness program

Unit Mix and Current Occupancy

There are 120 Independent Living apartments currently, reportedly at 90 percent occupancy. For Shelter Care/Assisted Living, there are 30 apartments and The Shrine reports 95 percent occupancy. Skilled Nursing has 57 available beds with occupancy at 100 percent, which changes weekly. The Shrine reports that it has a waiting list for its Independent Living apartments.

The Shrine offers five different floor plans for its Independent Living apartments. The efficiency floor plan is 300 square feet, the one-bedroom floor plan is 450 square feet, the deluxe one-bedroom floor plan is 600 square feet, the two-bedroom floor plan is 650 square feet, and the two-bedroom deluxe floor plan is 700 square feet.

Resident Profile

The Shrine reports that it attracts residents both nationally and locally. The age of its resident ranges from 62 years to 102 years old, but it is finding that the average age of a resident has increased. The Shrine finds that it is unable to have much draw from the Mississippi River Valley, and there are no residents from St. Louis, even though it is just ten minutes away. The Shrine also is noticing that a large growth is migrating to Madison County.

Physical Plant

The Shrine's entryway is gorgeous, and visitors feel as if they are pulling up to a retreat or spa due to the impeccable landscaping and greenery. The exterior of the retirement community is very nice and well maintained, with adequate parking for visitors. The reception area is welcoming and a receptionist greeted us immediately and was aware of our scheduled appointment.

During the tour, the community was very busy because a concert was playing in the dining room.

Models

Model apartments are sparsely decorated, but give a general impression of the home. Independent Living apartments are comparable to St. Paul's Home, both in perceived size and style. Shelter Care and SNF accommodations are lovely, both newly updated.

Comparing St. Paul's Home to The Shrine

- The Shrine's signage (highway and on campus)
- The Shrine's common grounds and parks for the community
- The Shrine's Shelter Care and SNF accommodations
- The Shrine's dining room
- St. Paul's Home's smaller feel and more local community of residents

### 6.1.2 Grand Court

Community Overview

Part of Brookdale Senior Living, Grand Court is just one of Brookdale's 560 communities nationwide. Grand Court has been in operation for more than 25 years and is located in south-downtown Belleville. It is just minutes from St. Clair Square Mall, churches, hospitals, banks, pharmacies, restaurants, shopping, major thoroughfares and highways, and fifteen minutes from St. Louis. Grand Court is located six miles from St. Paul's Home. According to Kim Carson, sales and marketing director, between Grand Court's location and Fairview Heights, there are 15 retirement communities serving the surrounding area. Located next to Grand Court is an SNF community (with which Grand Court reportedly has strained relations).

Grand Court is marketed as an IL apartment complex, with limited amenities (including laundry room, beauty shop, library/multipurpose room and dining room). One draw is the

community's three-story Open Air Atrium, which has an elevator, fountain, baby grand piano and gathering areas. The dining room was recently remodeled and serves three meals daily.

Grand Court does provide some in-apartment services (akin to AL, but without a formal medical component) through its Personalized Living program. Personalized Living residents receive a visit twice weekly from a home health nurse and Brookdale staff assists with a variety of paid services, including:

- Medication Reminders
  - 1 reminder/day, $4.00
  - 2/day, $5.00
  - 3/day, $6.00
  - 4/day, $7.00
- Personal Laundry
  - $8.00, up to two loads
  - $3.00 for each additional load
- Linen Change
  - $8.00 per week
  - $2.00 for each additional change
- Tidy Apartment Daily/as needed
  - $3.00 per 15 minutes
  - This is different than weekly Housekeeping
- Meal Escort Service
  - $2.00 per round trip
  - $5.00 for all three meals
- Bathing Assistance
  - $7.00 per 15 minutes
- Escort and Errands
  - $10.00 per hour
- "Get Well" Service
  - $3.00 per check-in
  - For when you return from the hospital or experienced an illness
- "Good Morning" Service
  - $3.00 per 15 minutes
  - Provides a review of the day's activities
- "Good Evening" Service
  - $3.00 per 15 minutes
- Miscellaneous Services
  - $3.00 per 15 minutes

Key Selling Points versus Competition

- Brookdale management
- IL community (no medical feel)
- Low entry fee ($1,500 deposit)

Unit Mix and Current Occupancy

There are 74 IL apartments that are currently at 87 percent occupancy, with four two-bedrooms available and nine one-bedrooms. Kim Carson was quick to point out that Grand Court's occupancy fluctuates, and the community received a large influx of residents (18 total) when Meredith's community closed (St. Paul's Home attracted the most independent residents from Meredith). She also noted how the economic downturn has significantly hurt marketing efforts. To increase occupancy, Kim Carson is working hard to advertise the community's acceptance of veteran's benefits. Currently, there is no wait list for move-ins.

Grand Court offers one-bedroom (one floor plan) and two-bedroom (two floor plans) apartments. The one-bedroom is 476 square feet and the two-bedrooms are 714 square feet (both floor plans).

Resident Profile

Grand Court's residents we encountered were very friendly. According to Kim Carson, most lived nearby and worked in a blue-collar industry prior to retirement. Currently, residents range from 53 years old to 101 years old (average age is mid to late 80s). The average resident stay is about four years.

Physical Plant

Grand Court's physical plant is adequate, but needs updating and renovation. The area appears to be a highway truck stop. Signage leading up to the community entrance is lacking. Signage on the building is good and prominently displays "rental community." There is little landscaping and the entry way looks dated. The atrium, the centerpiece of the community, is crowded and the decor ages the space. Residents were seen, however, spending time in the atrium socializing.

Models

Grand Court does not have model homes, but we did tour several empty apartments. Apartments were modestly furnished and the layout is small. The apartments do not have full-size kitchens, which is a drawback (Kim Carson noted that she loses residents to St. Paul's Home because of the kitchen). Bathrooms come with tubs and many residents request cut-outs (which is allowed).

Comparing St. Paul's Home to Grand Court

- St. Paul's offers full kitchens in IL apartments
- St. Paul's provides a full continuum of care
- St. Paul's is faith-based and has community connections
- Grand Court does not have a medical feel

### 6.1.3 Bradford Place

Community Overview

Bradford Place, located in Swansea, Illinois, has been in operation for 11 years and is currently undergoing an expansion and renovation, which will add 10 new units to the community. The renovated units will have a new kitchen and updated wallpaper. Bradford Place offers one bedroom and studio apartments and most of the residents are single. The community is licensed for IL and AL, but according to Nicole Berron, nearly all residents are AL.

There are no nurses on site, but Bradford Place offers home health care with RA's working around the clock. It is all private pay, and includes three meals a day plus snacks, utilities minus phone, and activities. There is no rehabilitation on site; residents must go to a skilled nursing facility.

Amenities include a beauty shop that is open twice a week, walk-in showers, large closets, wide doors, kitchenette with full-size refrigerator and microwave, daily light housekeeping, daily laundry, exercise and music. The owner of Bradford Place has two other for-profit communities, one in Nashville, IL, and the other in Kentucky.

Key Selling Points versus Competition

- Small community
- Friendly and engaged residents
- No medical feel

Unit Mix and Current Occupancy

Bradford Place has 29 units and currently has six vacant units. As mentioned, 10 new units have been approved for construction.

Resident Profile

This is a rental community and most of the residents come from Belleville, O'Fallon and Fairview Heights. The average age of the residents is 85. As mentioned, most all residents are receiving AL care. Upon arrival, we noticed several residents sitting on the porch. These residents were eager to speak with us and spent several minutes happily conversing about life at Bradford Place.

Physical Plant

The community is small, but nice and updated. Units have kitchenettes, which are nice for an AL apartment, but too small for a typical IL resident. There is little community space and amenities, but what does exist is very nice.

Models

There are no model apartments, but we were able to tour several vacant apartments. Generally, the apartments were nice, but efficiency apartments were extremely small and cramped. One efficiency apartment in particular had an extremely foul odor. When we asked Nicole about this odor, she dismissed it as of no concern.

Staff

We met with Nicole Berron, the new marketing team member at Bradford Place. Nicole was very welcoming and energetic about the community. Her grandfather was the St. Paul's Home's former Administrator and her grandmother lived at St. Paul's Home. She would like to see a more collaborative relationship with Bradford Place and St. Paul's Homes SNF. Given that Nicole was so new to the community, she was still learning about the resident profile and competitive landscape. Overall, however, she will likely do a very good job marketing the community.

Comparing St. Paul's Home to Bradford Place

- St. Paul's Home history and reputation
- St. Paul's Home continuum of care
- St. Paul's Home IL accommodations
- Bradford Place's newer construction

### 6.1.4 Rosewood Care Center

This community offers skilled nursing and a rehabilitation center with locations all across Illinois. We visited the Swansea location. There are 120 beds, which are currently 100 percent occupied. There are only four private rooms, and the rest are semiprivate.

Rosewood accepts both Medicare (48 beds) and Medicaid (only 10 beds), as well as private pay and insurance. A complete list of Rosewood's services include:

- Long-term care
- Respite care
- Hospice
- Wound care nurse on-site
- Physical, occupational and speech therapy
- Total knee/hip replacement rehab
- Stroke therapy
- Fracture care
- Neuromuscular disorders care
- Amputation care
- Post-operative wound care
- Pain management
- Safety training
- Home exercise programs
- Kitchen safety education
- Chronic disease management
- IV therapy
- Tracheostomy care
- Wound vac services
- Follow-up home health care

### 6.1.5 Calvin Johnson/Midwest Rehab and Respiratory

Calvin Johnson has been in operation for more than 40 years and was bought in March 2011 by Senior Health Care Management of Skokie, Illinois. Now Calvin Johnson is named Midwest Rehab and Respiratory. Calvin Johnson Care Center is a certified 180-bed Medicare/Medicaid nursing home. Currently, only 165 beds are in operation. All the rooms are semiprivate. A total of five residents pay privately. There is no limitation on length of stay.

Much of the clientele come from lower- to middle-income range. The community serves a large population of people with disabilities and has focused in on particular needs, such as mentally ill adults, ventilators, respiratory therapy, rehabilitation and wound care.

## 6.2 Pricing Analysis

When looking at the prices set by the various communities, we first scrutinized the cost of care of skilled nursing against two of St. Paul's Home's competitors. When looking at the table shown below, one can see that St. Paul's Home is the least expensive option. The amenities and services provided are similar in each community.

| Overall | Semiprivate/Day | Private/Day |
|---|---|---|
| St. Paul's | $140 | $160 |
| Shrine | $179 | $199 |
| Rosewood | $159 | $209 |

We then compared IL rental prices for St. Paul's Home to other IL rental communities. Overall, St. Paul's Home provides better value than the majority of compared monthly fees. Only Bradford Place offered greater value, as a one-bedroom is double the size of compared one-bedrooms.

| Overall | Square Feet | Monthly Fees | Monthly Fees/SF |
|---|---|---|---|
| Bradford Place | 950 | $2,385 | $2.51 |
| Grand Court | 476 | $2,190 | $4.60 |
| Shrine | 450 | $2,385 | $5.24 |
| St. Paul's | 484 | $1,910 | $3.95 |

## 7. Interview Insights

In addition to interviewing competitive communities, we also toured St. Paul's Home and conducted interviews with members of St. Paul's Home's and St. Andrew's management and St. Paul's Home's Board of Directors members.

Martha Holloway, St. Paul's Home's marketing director, led an extensive tour of the community and all levels of care. This tour was followed by in-depth interviews and discussion with St. Paul's Home's management team, with representation from administration, nursing, facilities, resident life, marketing and case management. Key insights from the interviews follow:

- Staff and Board are both very interested in growing St. Paul's Home and positioning it to provide for area seniors in the future.
    - Staff and Board are universally committed to St. Paul's Home, its mission and its residents. This dedication is a real strength for the community.
- Belleville's real estate market is struggling and seniors will need an incentive and moving support in order to make a move to St. Paul's Home feasible.
- The age of the campus and the buildings makes St. Paul's Home difficult to market, particularly to adult children who expect modern living accommodations for their parents.
    - This issue is compounded by the influx of stand-alone IL and AL product that has entered the market in the past two to three years.
- The location, while controversial, provides a distinct connection to the church and benefits the city of Belleville. There is opportunity to grow on the current campus and convert an aspect of the campus to common space that can be used by all Belleville residents.
- Some key players support buying adjacent property and homes for future growth, while others believe these homes are protected by the historic register. Regardless, this option must be evaluated to understand the feasibility of acquiring nearby property.
- The current shelter building is extremely old and compromised. According to the Board and maintenance staff, the cost of maintaining this building safely is very high. The Shelter is particularly outdated and we found drastic changes in temperature throughout the building because of its age and condition.
- St. Paul's Home's full continuum of care is a true benefit to residents. Knowing that St. Paul's Home can care for residents, regardless of health care needs, is motivation to move to Independent Living. Bringing the Shelter and SNF product in line with IL (in terms of quality of living space) is needed to maximize this benefit.

- St. Paul's Home has the opportunity to enhance its activity and living spaces (both indoor and outdoor) for residents in all levels of care. Suggestions for additional space include:
    - Expanded rehab
    - Health and wellness center
    - Greenhouse
    - Outdoor park, gazebos, walking trail and amphitheater
- NF's dining rooms are too small and confined.
- Need for some private accommodations in SNF.
- Need for wheelchair accessible rooms and bathrooms in Shelter.
- Some interest in IL cottage homes, mainly to accommodate younger couples (in addition to the apartments).
- St. Paul's Home provides everything today at a utilitarian level and there is a desire to "surprise and delight" residents and families with a vibrant and beautiful community.

BAR interviewed Belleville Mayor Mark Eckert to better understand Belleville's history and current economic issues, as well as the city's commitment to revitalizing the neighborhood in which St. Paul's Home is located. Mayor Eckert is an advocate for St. Paul's Home, as his first job at the age of 16 was on its maintenance staff. Mayor Eckert also is a member of St. Paul's Church, and his father and his aunt both lived at St. Paul's Home.

Mayor Eckert believes St. Paul's Home's proximity to St. Paul's Church and the community's affiliation with the church have been key to St. Paul's Home's success over the years. Mayor Eckert stated that he believed St. Paul's Home's long-standing reputation for "providing the best Christian-based senior care in the area" is well deserved and still exists today. Mayor Eckert was excited to hear St. Paul's Home is evaluating a renovation and expansion, as he believes the Shelter Care and Nursing Home buildings are the primary obstacles keeping new residents from moving to St. Paul's Home today.

Mayor Eckert explained that Belleville was once a brewery town, and many brew-masters lived near St. Paul's Home's campus. This area of Belleville is now considered historic, and many buildings adjacent to St. Paul's Home are eligible for renovation to preserve their value. The Mayor acknowledges that over the years Belleville has changed; it is his opinion that more recently much of the flux within the neighborhood has stabilized. He also noted that St. Paul's Home's neighborhood has experienced rising crime and several criminal incidents, but the reported crime around the area has been domestic and has not affected neighbors. As a result, Mayor Eckert believes that the St. Paul's Home neighborhood will continue to revitalize and the city is working diligently to accelerate the progress. Lastly, the Mayor

believes that given Belleville's aging population trends, seniors are an important focus for the city and he is interested in keeping Belleville senior-friendly.

Mayor Eckert has a strong interest in having St. Paul's Home remain in its current location, and he specifically stated that the city is eager to work with St. Andrew's to purchase and revitalize the land for St. Paul's Home. Mayor Eckert also stated that if St. Paul's Home were interested in any of the historic property, the city would be supportive of it and work with St. Paul's Home to ensure an attractive agreement, even if it meant tearing down some of the historic buildings.

Mayor Eckert has commissioned a Community Development Board charged with restoring Belleville to its previous value, with a special focus on St. Paul's Home's neighborhood. Belleville recently received a grant of $1.2 million to revive the area between 6th Street and 17th Street, which Mayor Belleville claims will improve the entry experience into the St. Paul's Home campus. The goal of this effort is for the streetscape in the area between 6th Street and 17th Street to reflect the style of the downtown square. According to Mayor Eckert, the committee's chairman, Jim Schneider, is willing to meet with St. Paul's Home to discuss the potential for working together on neighborhood restoration.

## 8. Analysis of Market Demand

BAR has calculated the demand for CCRC Independent Living, Assisted Living and Skilled Nursing units in the PMA.

**Independent Living**

BAR ran its demand estimation model for ages 65 to 74 and 75+ with a minimum income of $35,000+; both age cohorts indicate a positive demand currently, and in the future, for IL residences. St. Paul's Home's 53 existing Independent Living units are factored into the figure, as well as existing competitive units. Bradford Place's 10 expansion units are included in the 2016 estimate. Even with all existing and planned units included, there is an excess of positive demand.

| Age segments | 65 to 74 | 65 to 74 | 75+ | 75+ |
|---|---|---|---|---|
| Year | 2011 | 2016 | 2011 | 2016 |
| ***Minimum Income qualification*** | $35,000 | $35,000 | $35,000 | $35,000 |
| Number of age- and income-qualified households | 3,425 | 4,344 | 2,151 | 2,317 |
| *IL units (current)* | *262* | *262* | *262* | *262* |
| *IL units (planned)* | | *10* | | *10* |
| Total IL units | 262 | 272 | 262 | 272 |
| Remaining unsupplied demand | 3,163 | 4,072 | 1,889 | 2,045 |
| Capture rate | 1% | 1% | 3% | 3% |
| **Unadjusted Demand** | **32** | **41** | **57** | **61** |
| Percent draw from Primary Market Area | 75% | 75% | 75% | 75% |
| Demand adjusted for draw from PMA | 42 | 54 | 76 | 82 |
| Sustainable occupancy level | 95% | 95% | 95% | 95% |
| **Final IL demand from PMA; adjusted for draw and sustainable occupancy** | **44** | **57** | **80** | **86** |

Looking only at IL demand for the 75+ age cohort, demand is still positive, even with a conservative three percent capture rate.

| Age segments | 65 to 74 | 65 to 74 | 75+ | 75+ |
|---|---|---|---|---|
| Year | 2011 | 2016 | 2011 | 2016 |
| ***Minimum Income qualification*** | $35,000 | $35,000 | $35,000 | $35,000 |
| Number of age- and income-qualified households | 3,425 | 4,344 | 2,151 | 2,317 |
| *IL units (current)** | 262 | 262 | 262 | 262 |
| *IL units (planned)* | | 10 | | 10 |
| Total IL units | 262 | 272 | 262 | 272 |
| Remaining unsupplied demand | 3,163 | 4,072 | 1,889 | 2,045 |
| Capture rate | 0% | 0% | 3% | 3% |
| **Unadjusted Demand** | **0** | **0** | **57** | **61** |
| Percent draw from Primary Market Area | 75% | 75% | 75% | 75% |
| Demand adjusted for draw from PMA | 0 | 0 | 76 | 82 |
| Sustainable occupancy level | 95% | 95% | 95% | 95% |
| **Final IL demand from PMA; adjusted for draw and sustainable occupancy** | **0** | **0** | **80** | **86** |

**Note: The 262 current IL units include the total IL inventory at competitive communities [Grand Court (74), Bradford Place (15), and The Shrine (120)].*

## Assisted Living

AL demand is currently very strong, indicating an undersupply in the marketplace. BAR recommends expanding the AL (Shelter Care) area by about 30 units, based on this calculation and the market's needs.

| Minimum age for occupancy | 75 | 75 |
|---|---|---|
| Year | 2011 | 2016 |
| ***Minimum Income qualification*** | $ 35,000 | $ 35,000 |
| Number of age-and income-qualified households | 2,151 | 2,317 |
| **% disability in the market area among seniors** | 44.35% | 44.35% |
| Number of age-, income- and need-qualified households | 954 | 1,028 |
| *AL units (current)** | 66 | 66 |
| *AL units (planned)** | 0 | 0 |
| Total AL units | 66 | 66 |
| Remaining unsupplied demand | 888 | 962 |
| Capture rate | 10% | 10% |
| **Unadjusted Demand** | **89** | **96** |
| Percent draw from Primary Market Area | 75% | 75% |
| Demand adjusted for draw from PMA | 118 | 128 |
| Sustainable occupancy level | 95% | 95% |
| **Final AL demand from PMA; adjusted for draw and sustainable occupancy** | **125** | **135** |

**Note: The 66 current AL units include the total AL inventory at Bradford Place (14) and The Shrine (30).*

## Skilled Nursing

There is negative demand among the 75+ population for Skilled Nursing units in the PMA, however, even with a very small income qualification of $15,000. This is further supported by the Illinois Health Facilities and Services Review Board's April 2011 report which indicated that St. Clair County skilled nursing facilities have a surplus of 249 beds.

| | | |
|---|---|---|
| Minimum age for occupancy | 75 | 75 |
| Year | 2011 | 2016 |
| ***Minimum Income qualification*** | $ 15,000 | $ 15,000 |
| Number of age-and income-qualified households | 6,059 | 6,251 |
| **% nursing need in the market area among 75 and older population** | 3.34% | 3.34% |
| Number of age-, income- and need-qualified households | 203 | 209 |
| *SNF units (current)** | 277 | 277 |
| *SNF units (planned)** | 0 | 0 |
| Total SNF units | 277 | 277 |
| Remaining unsupplied demand | -74 | -68 |
| Capture rate | 15% | 15% |
| **Unadjusted Demand** | **-11** | **-10** |
| Percent draw from Primary Market Area | 75% | 75% |
| Demand adjusted for draw from PMA | -15 | -14 |
| Sustainable occupancy level | 95% | 95% |
| **Final SNF demand from PMA; adjusted for draw and sustainable occupancy** | **-16** | **-14** |

With that in mind, we also calculated demand with no income qualification and found slight demand to exist.

| | | |
|---|---|---|
| Minimum age for occupancy | 75 | 75 |
| Year | 2011 | 2016 |
| ***Minimum income qualification*** | n/a | n/a |
| Number of age-and income-qualified households | 9,513 | 9,871 |
| **% nursing need in the market area among 75 and older population** | 3.34% | 3.34% |
| Number of age-, income- and need-qualified households | 318 | 330 |
| *SNF units (current)** | 277 | 277 |
| *SNF units (planned)** | 0 | 0 |
| Total SNF units | 277 | 277 |
| Remaining unsupplied demand | 41 | 53 |
| Capture rate | 15% | 15% |
| **Unadjusted Demand** | **6** | **8** |
| Percent draw from Primary Market Area | 75% | 75% |
| Demand adjusted for draw from PMA | 8 | 11 |
| Sustainable occupancy level | 95% | 95% |
| **Final SNF demand from PMA; adjusted for draw and sustainable occupancy** | **9** | **11** |

Taking both calculations into consideration, we feel SNF is an essential component of the St. Paul's Home continuum. Resultantly, we recommend continuing with the 100 SNF beds to accommodate the residents primarily, but converting the product mix to include both private rooms and a dedicated rehab wing as part of the 100 beds

There are multiple other SNFs in the Belleville area not included in the inventory projections, and their inclusion would amplify the negative demand.

**Note: The 277 current SNF units include the total SNF inventory at Rosewood (120), and The Shrine (57).*

**Demand Model Assumptions**

The following assumptions have been made when estimating the demand for units in the PMA.

Age and income qualifications

The minimum age for IL occupancy is assumed as 65 years and 75 for AL and SNF. The models were run using an annual household income of $35,000+. The age and income qualifications used in the demand estimation are based on the target market definition for the project.

Number of units

The number of competitor units has been determined from the competitor analysis as follows.

| Market Summary - IL | Total Units | Filled Units | Empty Units |
|---|---|---|---|
| St. Paul's Home | 53 | 50 | 3 |
| Grand Court | 74 | 64 | 10 |
| Bradford Place | 15 | 12 | 3 |
| The Shrine | 120 | 108 | 12 |
| | | | |
| **Market Summary - AL** | **Total Units** | **Filled Units** | **Empty Units** |
| St. Paul's Home | 22 | 20 | 2 |
| Bradford Place | 14 | 11 | 3 |
| The Shrine | 30 | 28 | 2 |

| Market Summary - SNF | Total Units | Filled Units | Empty Units |
|---|---|---|---|
| St. Paul's Home | 100 | 100 | 0 |
| Rosewood | 120 | 120 | 0 |
| The Shrine | 57 | 57 | 0 |

Capture rate

The capture rate represents the percentage of qualified households in the PMA containing individuals who are likely to move into a residence and, hence, can be converted to sales. All existing units are deducted from the available market prior to calculating the capture rate. For this project, we assume standard moderate capture rates of:

- 1 percent for IL (ages 65–74)
- 3 percent for IL (ages 75+)
- 10 percent for AL
- 15 percent for SNF

Percentage draw from the PMA

Seventy-five percent of the prospective residents are expected to come from the PMA for all levels of care. This has been based on discussions with existing competitors and SB&A/BAR judgment and knowledge.

Sustainable occupancy level

Sustainable occupancy level is the occupancy that most investors consider to be "full occupancy" given that there is always some turnover of units. For this project, sustainable occupancy has been assumed at 95 percent.

## 9 Market Penetration

An important industry-standard criteria used to determine the strength of a market area in relation to senior living (IL) feasibility and its associated risk is market penetration rate.

Market penetration is the number of comparable existing and planned IL residences in the defined market area divided by the number of qualified households in that same area. Market penetration is unique for different locations; unlike a project penetration rate, there is no "acceptable" industry standard that can be applied universally. In some areas of the country that are historically "crowded" senior living markets heavily populated with retirement living options and qualified, educated and willing senior markets like Florida and Southeastern Pennsylvania, market saturation rates often exceed 30 percent. In another market with less educated consumers and fewer options, a market penetration of more than 10 percent may indicate a weak situation; specific project and area factors must be considered when evaluating this data.

The following table outlines the market penetration rates as calculated by BAR for the St. Paul's Home PMA in 2011 and 2016 for the age cohort of 65+ with an annual household income of $35,000+. Current market penetration is 3.3 percent and is expected to decrease to 2.9 percent in 2016.

| | | A | B | C | D | E | F |
|---|---|---|---|---|---|---|---|
| | Market Penetration Rate SPH PMA | SPH & Competitor units | PMA Market Draw | Units Filled from PMA | Units to be filled from PMA @ 95% Occ | No. of Age- and Income-qual HHs | Market Penetration Rate (D/E) |
| 2011 | Target Market Age 65+ Income $35,000+ | 262 | 75% | 197 | 187 | 5,576 | 3.3% |
| 2016 | Target Market Age 65+ Income $35,000+ | 272 | 75% | 204 | 194 | 6,661 | 2.9% |

BAR also calculated the market penetration rates for the St. Paul's Home PMA in 2011 and 2016 for the age cohort of 75+ with an annual household income of $35,000+, looking solely at the core consumer age group. For the 75+ cohort, current market penetration rises to 8.7 percent and is expected to decrease to 8.4 percent in 2016.

| | Market Penetration Rate SPH PMA | A SPH & Competitor units | B PMA Market Draw | C Units Filled from PMA | D Units to be filled from PMA @ 95% Occ | E No. of Age- and Income-qual HHs | F Market Penetration Rate (D/E) |
|---|---|---|---|---|---|---|---|
| 2011 | Target Market Age 75+ Income $35,000+ | 262 | 75% | 197 | 187 | 2,151 | 8.7% |
| 2016 | Target Market Age 75+ Income $35,000+ | 272 | 75% | 204 | 194 | 2,317 | 8.4% |

We believe that these market penetration rates are stable in comparison to other metropolitan areas with similar population figures. And, we feel these low penetration rates represent a sizeable opportunity for St. Paul's Home's growth. Even with the uncertainty regarding the current economic situation and real estate market in Belleville, it appears the supply will remain low for the aging population, and St. Paul's Home could increase the ILUs in the area, providing it a stronger competitive position.

BAR will also calculate a project penetration (included in this scope of work) once a master plan is in place for St. Paul's Home.

**Appendices**: *See attached Excel workbooks*

zumBrunnen
Construction Consulting and Facility Assessment

October 5, 2012

To: Illinois Health Facilities and Services Review Board:

Reference: zumBrunnen, Inc. Project 2010-002
Campus Wide Facility Condition and Capital Replacement Study

zumBrunnen, Inc., of Atlanta, GA, is one of the Nation's leading construction consulting and facility assessment firm having served over 1,500 clients since 1989. zumBrunnen utilizes a proprietary facility assessment, budgeting and forecasting system designed to manage life-term capital replacement and operating expenses, depreciation and required repairs.

zumBrunnen inspected St. Paul's Home in Belleville, IL, in the months of May through August, 2010, and prepared a facility assessment following our inspection.

Based on our assessment, the cost of required maintenance and upkeep of the existing skilled nursing facility and sheltered care facility for the period of 2010 to 2029 is approximately $9.8 million (skilled nursing $6.3 million and sheltered care $3.5 million). These figures average out to almost $0.5 million per year in maintenance costs (skilled nursing $315,000 and sheltered care $175,000). It is important to note that these costs do not include any facility or system enhancements, rather only upkeep and replacement to keep the facility operating at conditions current as of the time of the facility assessment.

As part of the assessment process, zumBrunnen utilizes a Facility Condition Index (FCI). The FCI is a mathematical index developed by the United States Navy designed to compare the cost of maintaining a structure to the estimated cost of replacement. This index rates the relative physical condition of a building, independent of construction type, or cost. The FCI is represented on a logarithmic scale from zero to one, where any value beyond this range exceeds the total cost of replacement; an index value of 1.0 is equivalent to 100% current replacement value.

CFI indices were calculated for each year for the period from 2010 to 2029. In this 20- year period, FCI indices were near or above a ratio of 0.75 for 17 of the 20 years and at or above a ratio of 1.0 for four of twenty years in the skilled nursing facility. In the sheltered care facility, CFI indices were near or above a ratio of 0.75 for all 20 years and at or above a ratio of 1.0 for 11 of the 20 years.

zumBrunnen understands the St. Paul's Home is considering replacement of the existing skilled and sheltered care buildings with new construction estimated around $19 million. Based on the estimated costs of maintaining the existing building and CFI indices, it is zumBrunnen's



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opinion that replacement of the existing building is more economically feasible than maintaining the existing structures.

We understand that sheltered care projects are not subject to review in the state of Illinois. While not reviewable, it is impractical to completely separate sheltered care and skilled costs as the St. Paul's Home is comprised of multiple inter-connected buildings built from the turn on the century up to the early 1980's.

zumBrunnen appreciates the opportunity to present this summary information and opinion to the Illinois Health Facilities and Services Review Board.

Respectfully,

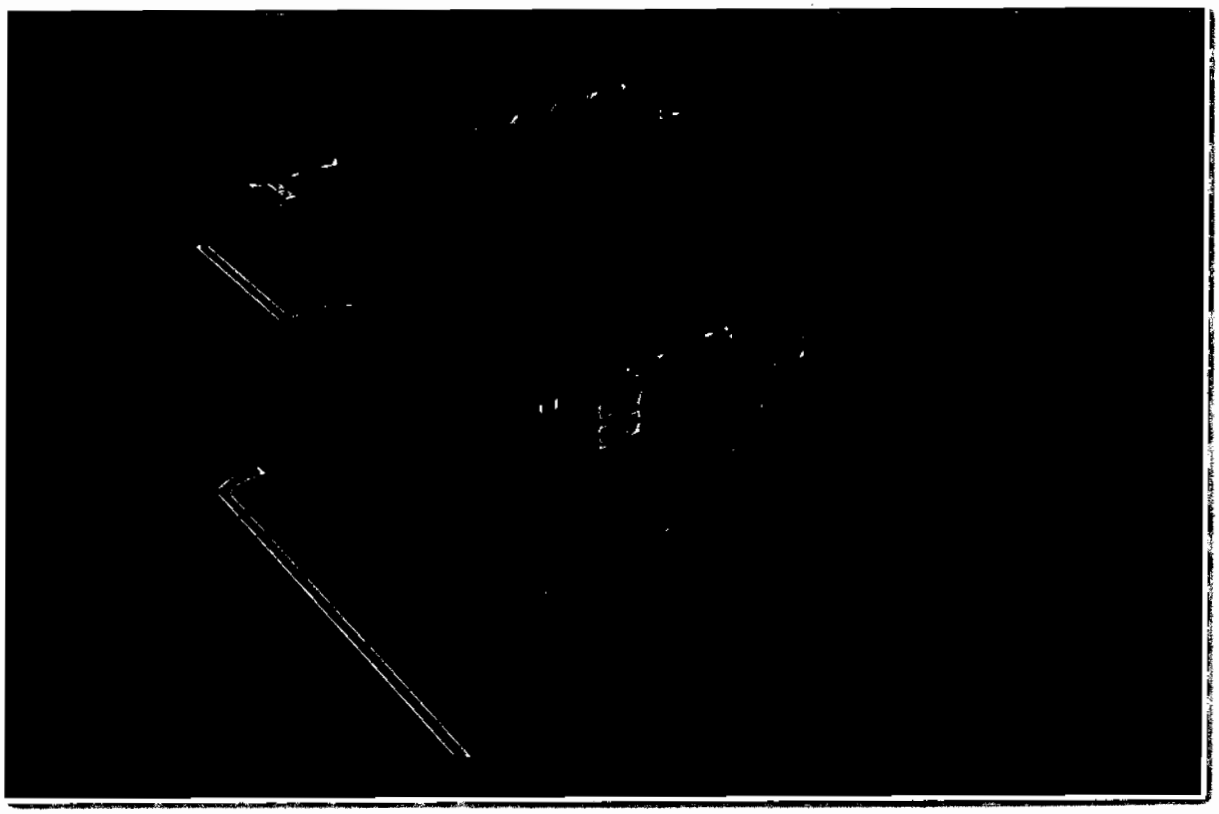
James R. Milan, P.E.
Senior Project Manager
zumBrunnen, Inc.

**From:** Roate, George [mailto:George.Roate@Illinois.gov]
**Sent:** Friday, October 12, 2012 9:10 AM
**To:** Christopher H. Wiltse
**Subject:** St. Paul's Home Belleville Compliance Check

Good morning, Mr. Wiltse:
Per our telephone conversation, St. Paul's Home, 1021 West E Street, Belleville, is compliant with its annual survey reporting requirements, and any past Certificate of Need (CON) applications. Please be advised that a review of individual applicants/owners has not been conducted, as they have not been identified as part of a pending CON application. Thank you.

# The New St. Paul's Home – Executive Summary

December, 2012



*The New St. Paul's Home*

**History and Mission**

St. Paul's Home for the Aged began its service to the community in 1926 and continues today as a faith based, not-for-profit community. St. Paul's Home is licensed by the state of Illinois and certified by the Centers for Medicare and Medicaid Services as a Title XVIII (Medicare) and Title XIX (Medicaid) provider. The community is sponsored by the United Church of Christ and governed by a Board of Directors comprised of individuals from the congregation of St. Paul's Church, Christ Church, Trinity Church, and the local community. St. Andrew's Management Services, an eldercare specialist organizations, manages this not-for-profit, faith-based community under the governance of the St. Paul's Home Board of Directors.

*Mission Statement*

*St. Paul's Senior Community is dedicated to excellence in care and a compassionate environment guided by our Christian love and concern that will enhance the quality of life for those we are called to serve.*

As far back as 1918, some of the caring people in the community and congregation of what is now St. Paul United Church of Christ in Belleville discussed the need for a home for older men and women. In 1926, one man in the congregation stepped forward and donated property and a building to the St. Paul Church to be used as a home for the aged of all faiths in the Belleville area. The leaders of the congregation decided to call it St. Paul's Home for the Aged and it was officially founded, under that name, on August 22, 1926.

News of this generous gift spread and the community responded with moral support and substantial gifts to help convert the building into a home for the aged. This community-wide effort was consummated on June 12, 1927 when St. Paul's Home opened its doors to the first thirteen residents.

Demand for St. Paul's services was immediate and continued to grow. Through generous community gifts and support, expansions were carried out in 1945, 1955, 1962, 1972, 1982 and 1988 allowing the campus to grow to its current capacity.

**Decision to Build**

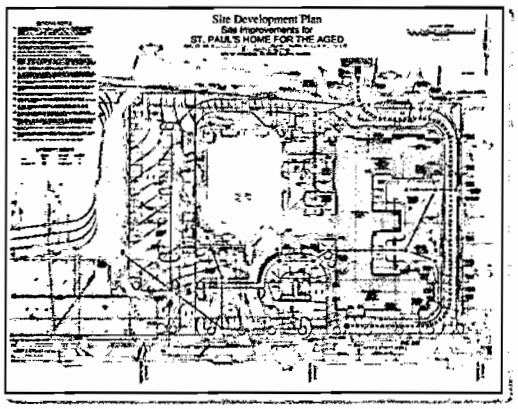
St. Paul's Home has maintained a facility that was established in the 1920's well into the 21st century and has done so in a way that has kept residents safe and allowed for the continued provision of quality of care. In early 2011, St. Paul's Home began the strategic process of looking to the future to explore options and chart the proper course of action for the future.

Based in part on a physical plant assessment conducted by zumBrunnen, Inc., one of the Nation's leading construction consulting and facility assessment firms, the economically responsible decision is to replace the existing nursing and sheltered care portions of the facility with new construction. The zumBrunnen study concluded that the cost of necessary maintenance to simply upkeep the existing nursing and sheltered care portions of the facility would approach $10 million. It is important to note that this prospective cost does not include any enhancements to the existing facility; rather, it only related to the upkeep necessary to maintain the facility operating under its current conditions. Nor did the $10 million include site work to the independent living apartment portion of the St. Paul's campus which would add an additional $5 million. zumBrunnen compared the $10 million cost to simply maintain the existing facility with an approximate $20 million cost to construct a brand new, modernized facility. zumBrunnen concluded that building new was the more economically feasible choice when compared to simply maintaining the existing, aging facility.

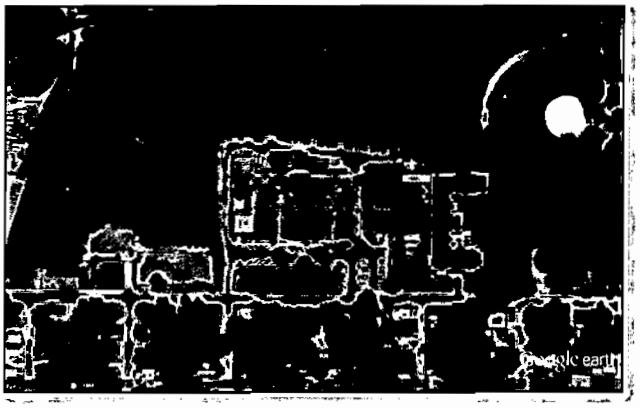
A market feasibility study conducted in 2011 and updated in November of 2012 by Brooks Adams Research, a firm utilizing pioneered research techniques aimed at consumers 55 years of age and up, concluded market demand exists for the replacement of the St. Paul's Home and a new payor mix.

**The New St. Paul's Home**

The new St. Paul's Home will connect to the east side of the existing independent living apartments. The existing nursing and sheltered care portions to the west of the existing independent living apartments will be demolished upon completion of the new construction. St. Paul's Home currently own just over 7 acres at its site. Upon completion of the new construction about two-thirds of the property, to the west, will be undeveloped and available for future expansion.




*Site plan: yellow existing independent living apartments, blue new nursing, memory and sheltered care*



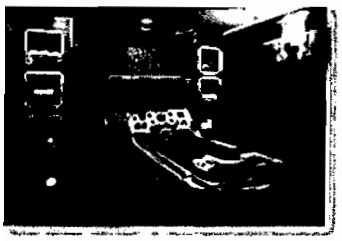

*Aerial overview of proposed new construction*

The new St. Paul's Home is planned as a person-centered model of care; the only such person centered model of care community within a 25 mile radius of St. Paul's Home. Person centered care is a "new" concept of care; not a typical institutional model of nursing home care but rather a more homelike environment where residents have a say in their day-to-day lives in a setting that closely resembles their home. The goal of the new St. Paul's Home is to transform the old institutional culture to a new, culture of caring designed to treat the whole person; their physical, intellectual, emotional, social, spiritual and occupational needs.

Person–centered care is not just about building design or a homelike environment. While there is no specific model or set of practices, the Board of Directors of St. Paul's Home believes that in a true person-centered environment residents are offered choices and encouraged to make their own decisions. Closer relations between staff and residents are fostered with the same staff consistently providing care to the same residents. Staff are trained and have the authority to respond on their own to resident needs increasing personal responsibility, reducing delays and flattening management hierarchy. Culture change is an ongoing process of overall performance improvement and research has demonstrated organizations with a person-centered model of care experience higher resident and family satisfaction, higher census, reduced staff turnover and related expenses, improved clinical outcomes, greater operating cost efficiencies and improved survey and inspection results.

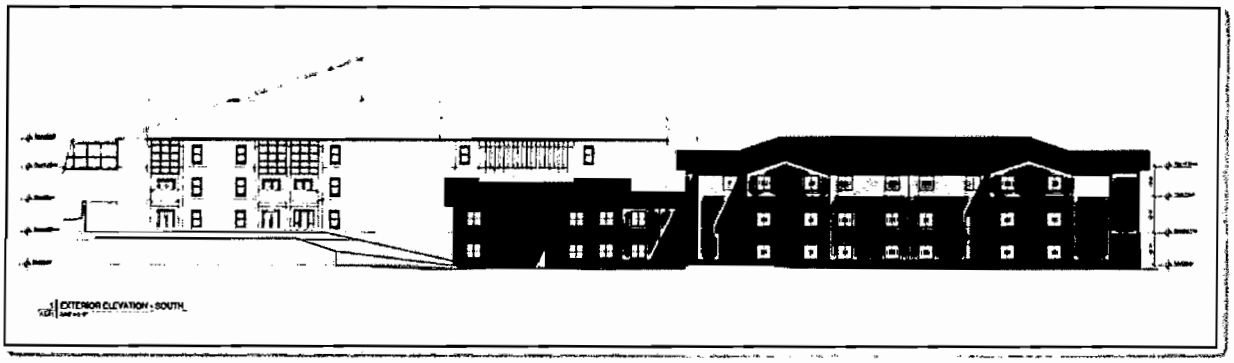
Building plans include four nursing care households of 22 beds each (one household of 24 beds) for a total of 90 skilled care beds. Entry into each household will be through a hearth room (*example picture at left*). The hearth rooms have a fire place and large screen television and are designed as the informal or den space you would fine in your own home. Adjacent to the hearth room is the household kitchen and dining space. This space is

designed to be the "heart" of the household. At home, so many activities are centered around food and the family kitchen and the St. Paul's Home households will be the same (*example picture below*). The design is intended to draw residents to the kitchen and dining spaces rather that a nursing station as is typical in a traditional, institutional model facility. Patios or balconies will be provided off each dining room to incorporate outdoor living into each household. Each household will include a combination of private and companion rooms. Companion rooms are designed as corned or toe-to-toe style rooms, each providing both occupants with their own private space, closet and window. Each resident room is provided with a private bathroom including walk-in shower. Each household will also include a spa (*example pictured below*) and household laundry. The household kitchens and laundries will be supported by a redesigned and renovated commercial kitchen and new commercial laundry. Other features, shared among the households, include a new rehab center, community room/chapel, beauty/barber salon and community/walking gardens. These facilities will replace the aging structure which currently includes three and four bed wards, common or gang bathing facilities, a lack of central air conditioning and extreme maintenance costs.



In addition to the four nursing households, there will be an 18 bed memory care and a 26 bed sheltered care household with similar amenities as the nursing households.

Plans also call for updates to the existing independent living apartments including a new two-story main entrance (*rendering at right*) serving the entire campus with porte cochere drop off point and remodeled dining and kitchen space.




*Front elevation; view from E Street, looking north with existing independent living apartments shown in background*

**Unit and Payor Mix**

Upon completion, the new St. Paul's campus will encompass 53 independent living apartments (existing), 90 skilled nursing beds (90 beds in the Medicare program and 30 beds in the Medicaid program), 18 memory care beds (intermediate care) and 26 sheltered care beds.

| 1st Floor South SNF/Medicare Unit – 22 beds | Beds |
|---|---|
| SNF Companion Room (Corner) – Medicare | 8 |
| SNF Private Room – Medicare | 14 |
| **Total** | **22** |

| 2nd Floor South – SNF/Medicaid – 22 beds | Beds |
|---|---|
| SNF Companion Room (Toe to Toe) – Medicaid | 6 |
| SNF Companion Room (Corner) – Private Pay | 8 |
| SNF Private Room – Private Pay | 8 |
| **Total** | **22** |

| 3rd Floor South – SNF/Medicaid – 22 Beds | Beds |
|---|---|
| SNF Companion Room (Toe to Toe) – Medicaid | 6 |
| SNF Companion Room (Corner) – Medicaid | 4 |
| SNF Companion Room (Corner – Private Pay | 4 |
| SNF Private Room – Private Pay | 8 |
| **Total** | **22** |

| 1st Floor North – Memory Care - 18 Beds | Beds |
|---|---|
| Memory Care Companion Room – Private Pay | 8 |
| Memory Care Studio – Private Pay | 10 |
| **Total** | **18** |

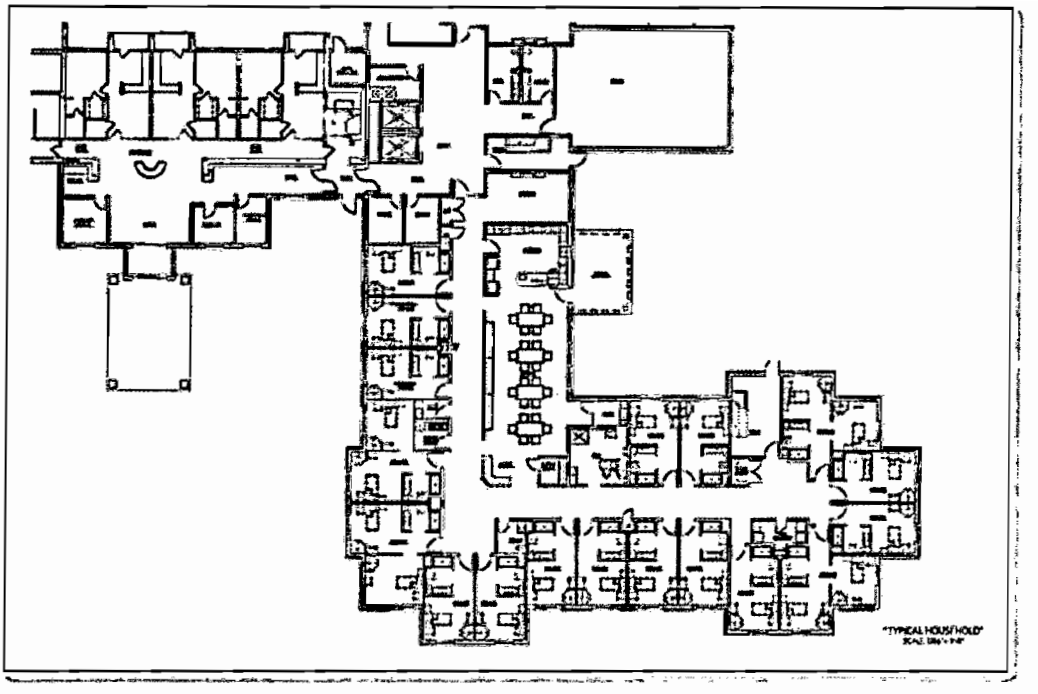
| 2nd Floor North – SNF/Medicaid – 24 Beds | Beds |
|---|---|
| SNF Companion Room (Toe to Toe) – Medicaid | 14 |
| SNF Private Room – Private Pay | 10 |
| **Total** | **24** |

| 3rd Floor North – Sheltered Care – 26 Beds | Beds |
|---|---|
| Sheltered One Bedroom – Private Pay | 8 |
| Sheltered Studio – Private Pay | 8 |
| Sheltered Companion Room – Private Pay | 10 |
| **Total** | **26** |

Stabilized occupancy is projected at:

| Unit | Occupancy |
|---|---|
| Independent Living Apartments (existing) | 94.3% |
| Sheltered Care | 73.1%* |
| Memory Care | 94.4% |
| Nursing Care | 91.1% |
| **Total Campus** | **89.8%** |

* 4 units in sheltered care licensed for 2 residents but not anticipated to be used at this occupancy level



*Typical Household Design*

**Project Team**

St. Paul's Home is governed by a dedicated Board of Directors comprised of individuals from the congregation of St. Paul's Church, Christ Church, Trinity Church, and the local community. Current Board members include:

- Steven Suess, Chairperson, St. Paul United Church of Christ
- Kristine Mueller, Vice Chairperson, St. Paul United Church of Christ
- Dennis Spencer, Treasurer, St. Paul United Church of Christ
- Beverly Brightwell, Secretary, St. Paul United Church of Christ
- Betty Leppard, St. Paul United Church of Christ
- Susan Relfe, St. Paul United Church of Christ
- Bob DeCamp, Trinity United Church of Christ
- Carol Petty, Christ United Church of Christ
- Jane Lee, Community Member
- Rev. Andrew Kramer, St. Paul United Church of Christ

Since 2005, St. Andrew's Management Services, an eldercare specialist organizations, has managed this not-for-profit, faith-based community under the governance of the St. Paul's Home Board of Directors. Key members of the St. Andrew's team include:

- Mary Alice Ryan, President
- Diane Meatheany, Chief Operating Officer
- Gregory Elliott, Chief Financial Officer
- Darlene Scaglione, Controller

For construction of the new St. Paul's Home, the St. Paul's Board of Directors has engaged the services of:

The Lawrence Group – Project Architect

- Susan Bruker, Principal-in-Charge
- Karen Shapiro, Project Manager
- Todd Bundren, Designer
- Galen Vassar, Interior Designer

BSI Constructors – General Contractor/Construction Manager

- Jim Shaughnessy, Project Executive
- Bob Jilke, Project Manager
- Haus Truelove, Project Superintendent
- Kevin Corzatt, Lead Estimator

Stifel Nicolaus - Financing

- Peter Czajkowski, Director of Public Finance
- Gina Martin, Assistant Vice President Public Finance
- Mary Kane, Senior Vice President Public finance

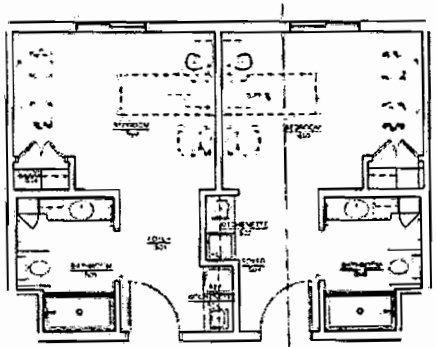
**Project Timeline**

| | |
|---|---|
| Strategic Planning & Assessment | January 2011 |
| Schematic Design | Underway |
| Regulatory Approval | March 2013 |
| Financing Completed | June 2013 |
| Construction Begins | June 2013 |
| Anticipated Opening | January 2015 |

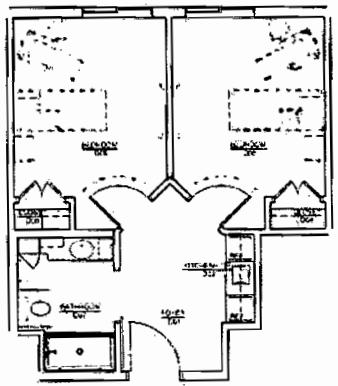
LAWRENCE GROUP

# ST. PAUL 'S HOME FOR THE AGED

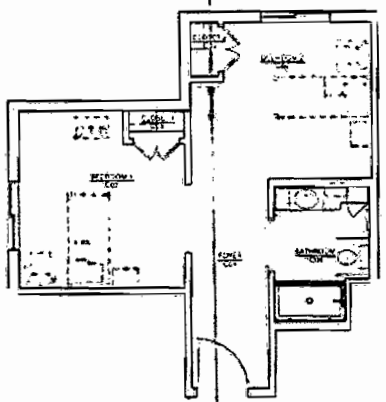
NOVEMBER 9, 2012



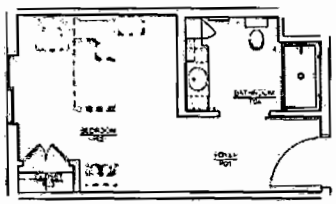
Enlarged Unit Plan - Typ. Studio Units



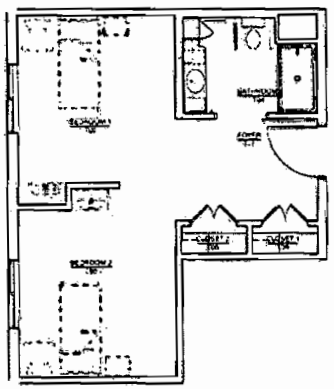
Enlarged Unit Plan - Typ. Companion Unit



Enlarged Unit Plan - Typ. Corner Unit



Enlarged Unit Plan - Typ. Private Unit

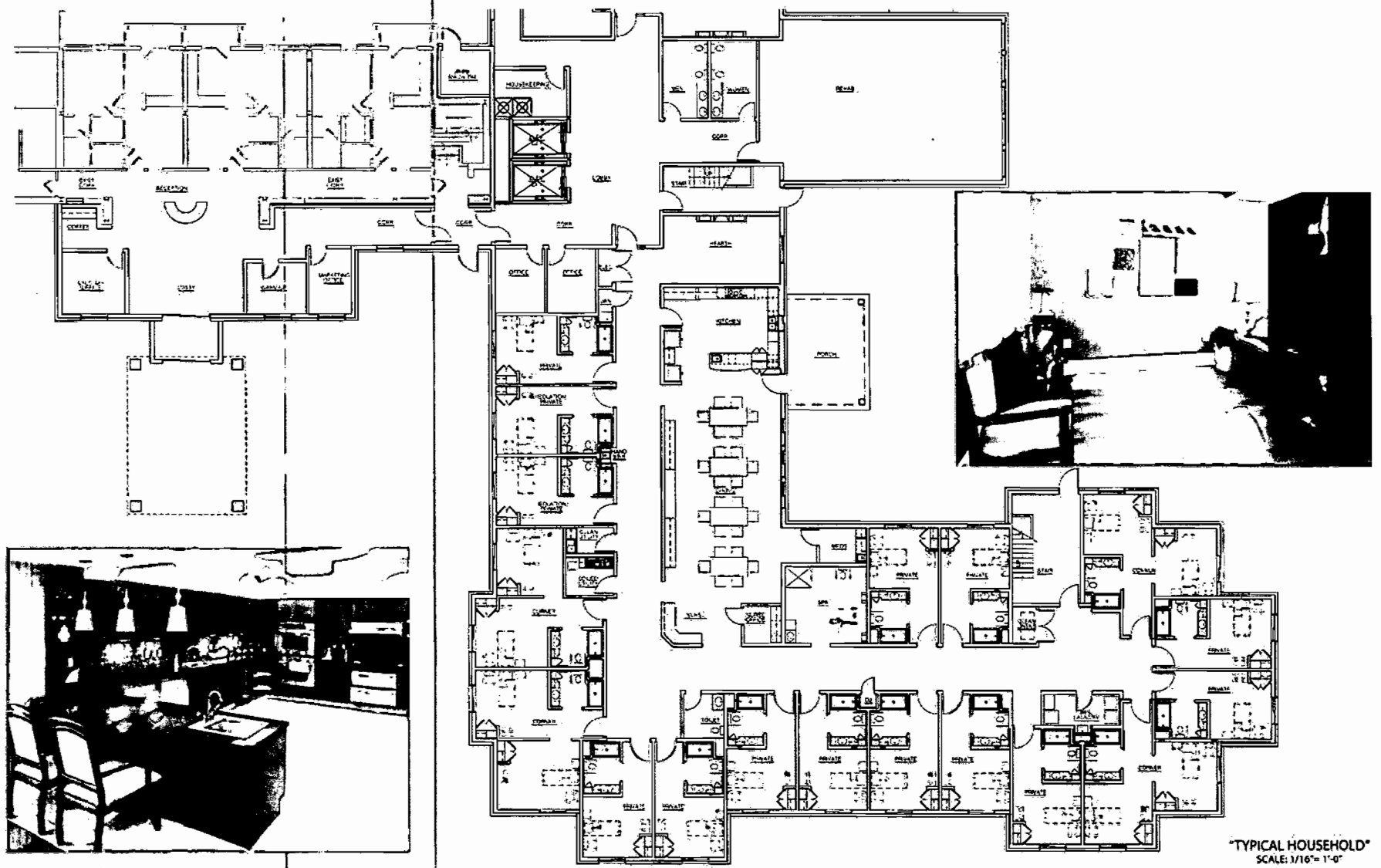


Enlarged Unit Plan - Typ. Toe to Toe Unit

LAWRENCE GROUP

# ST. PAUL 'S HOME FOR THE AGED

NOVEMBER 9, 2012



"TYPICAL HOUSEHOLD"
SCALE: 1/16"= 1'-0"

LAWRENCE GROUP

## ST. PAUL'S HOME FOR THE AGED

NOVEMBER 9, 2012

**Criterion 1125.330 – Alternatives**

1. Identify **ALL** of the alternatives to the proposed project:

Alternative options **must** include:

a. Proposing a project of greater or lesser scope and cost;

b. Pursuing a joint venture or similar arrangement with one or more providers or entities to meet all or a portion of the project's intended purposes; developing alternative settings to meet all or a portion of the project's intended purposes;

c. Utilizing other health care resources that are available to serve all or a portion of the population proposed to be served by the project; and

d. Provide the reasons why the chosen alternative was selected.

2. Documentation shall consist of a comparison of the project to alternative options. The comparison shall address issues of total costs, patient access, quality and financial benefits in both the short term (within one to three years after project completion) and long term. This may vary by project or situation. **FOR EVERY ALTERNATIVE IDENTIFIED THE TOTAL PROJECT COST AND THE REASONS WHY THE ALTERNATIVE WAS REJECTED MUST BE PROVIDED.**

3. The applicant shall provide empirical evidence, including quantified outcome data that verifies improved quality of care, as available.

**Alternatives Considered:**

1. Maintain the existing facility without any modernization;
2. Renovate the facility in phases (which would require utilizing other existing providers during extended periods of partial closure);
3. Establish a new facility;
4. Closure

ATTACHMENT 11

**Maintain The Existing Facility**

**Total Cost**: Approximately $10,000,000 (this cost only relates to maintaining the skilled nursing portion of the facility – additional costs would be involved in maintaining other aspects of the St. Paul's facility.

**Patient access / quality**:

The effect on patient access would be neutral, as the distinction in bed capacity between the existing facility and the modernized facility is comprised of group rooms that are not utilized by St. Paul's (unless necessary) as this is viewed as an outdated model of patient care. The proposed bed capacity of 108 licensed beds is believed by St. Paul's to reflect the most appropriate compliment of beds moving forward. The quality of care at the maintained facility would be as high as St. Paul's could achieve, but it is unquestionable that the quality would be improved in a modernized facility due to the availability of improved systems, additional services available to residents, and modern construction.

**Financial benefits (short term and long term):**

The financial costs to simply maintain the skilled nursing portion are almost the same as the expense to build a new modernized facility on the same site. Any short term financial benefits are minimal because all money needs to be set aside up front and require regularly invading the reserves of the facility to simply maintain the facility rather than spread the cost over a 30 year period via mortgage and result in a new facility. There are no long term benefits to this course of action which is why it was rejected.

**Reason alternative was rejected**:

The reason this alternative was rejected is that it achieves nothing more than delaying the

inevitable need to modernize the facility and would result in the expenditure of substantial costs in the coming years to simply maintain the facility. Moreover, for the cost that is involved, St. Paul's could achieve the creation of a newly modernized facility (the skilled nursing portion). Candidly, there were no long term financial or healthcare delivery benefits to this option.

**Renovate the Facility in Phases:**

**Total Cost**: + $20,000,000

**Patient access / quality**:

This option would have a detrimental effect on patient access to care because it would require closing portions of the facility thereby requiring removing residents from their home. Moreover, from a logistical perspective, closing portions of the facility would adversely impact the quality of life for the remaining residents. Moreover, this option would not yield any improvement in quality that could not be better achieved through the complete modernization of the facility on the existing site.

**Financial benefits (short term and long term):**

The costs involved in this option would exceed those associated with the modernization of the facility. Being constrained by the existing structure and having to work with various already outdated capacities (as identified in the zumBrunnen report) would result in increased costs beyond a newly designed structure to accommodate all of the necessary changes. Moreover, from a financial perspective, the interruption caused by having to relocate a substantial percentage of St. Paul's residents during periods of construction would create a substantial cash-flow issue affecting both the long term viability of such an alternative.

ATTACHMENT 11

**Reason alternative was rejected**:

Being limited by the existing structure and having to displace substantial portions of our resident population would substantially increase the costs and decrease the overall benefit to the residents we serve. While St. Paul's has strong relationships with other community facilities and would take any steps necessary to insure the welfare of its residents, any option which required St. Paul's to transfer and discharge of a substantial portion of its residents was not an option to be considered as it would be inconsistent with its religious mission. For these reasons, this alternative was rejected.

**Establish a new facility:**

**Total Cost**: Same as modernization + land acquisition costs

**Patient access / quality**: Same as modernization

**Financial benefits (short term and long term):**

The financial benefits (both short term and long term) would be diminished as compared to a modernized facility. There is no reason for St. Paul's to incur the additional costs of acquiring new land upon which to establish a new facility when the space is available on the existing property to create a modernized facility.

**Reason alternative was rejected**:

It would be financially irresponsible to pursue this alternative.

**Closure**:

**Total Cost**: There would be no capital cost to this alternative

**Patient access / quality**:

This alternative would detrimentally effect patient access to quality care.

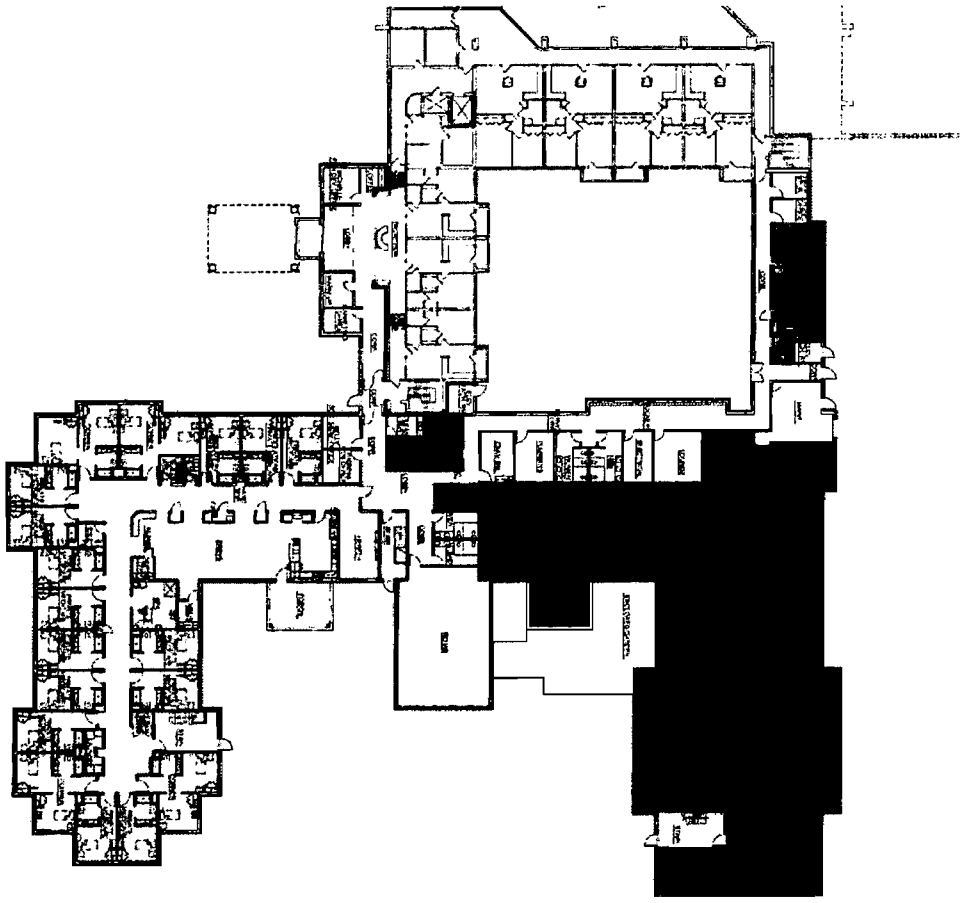
ATTACHMENT 11

**Financial benefits (short term and long term):** None

**Reason alternative was rejected**:

This would be in dereliction of the mission to which St. Paul's Home is dedicated and for which it was created.

ATTACHMENT 11



1 OVERALL FIRST FLOOR PLAN

Attachment 11 – p. 1

00149

NEW SKILLED NURSING AND SHELTERED CARE FOR

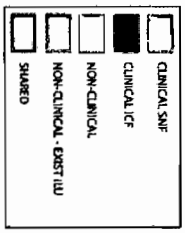
# ST. PAUL'S HOME

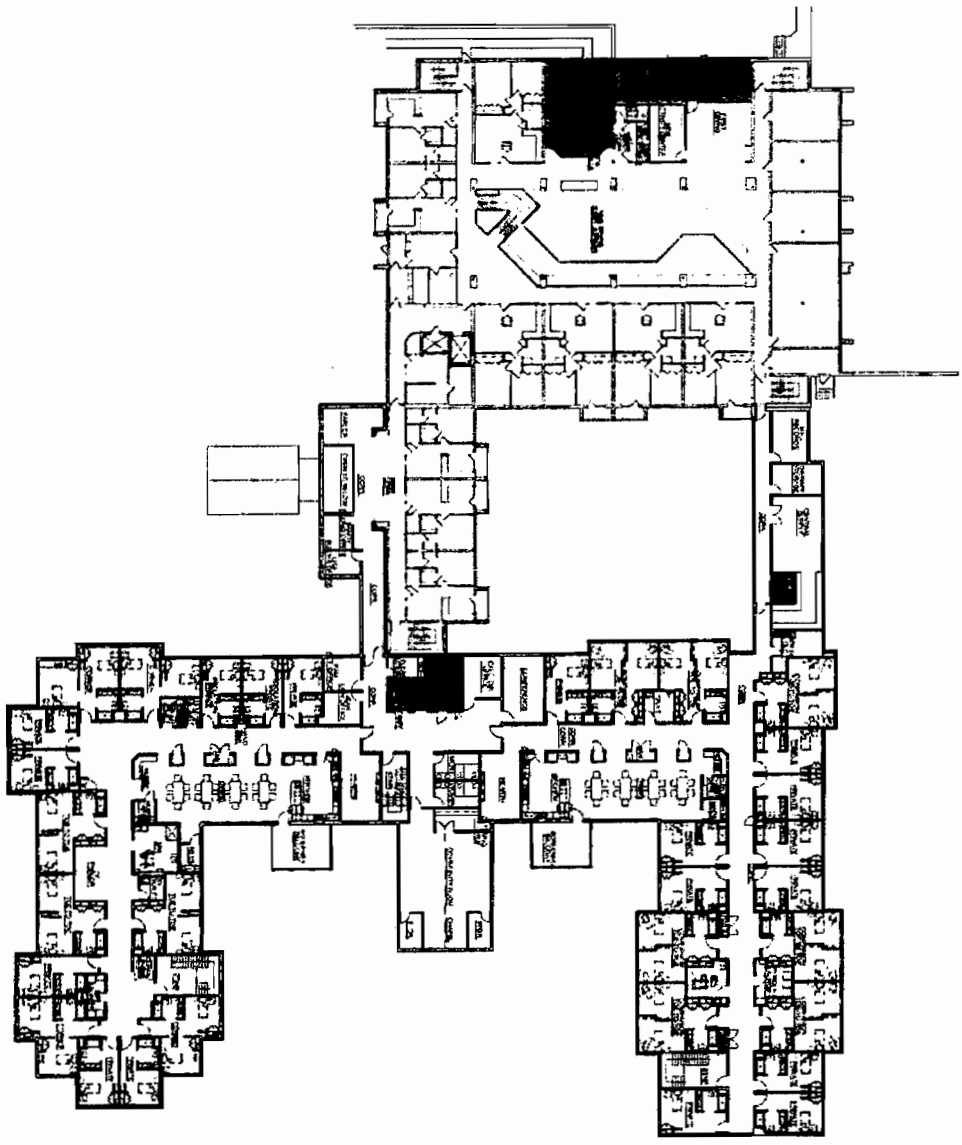
1021 West E Street Belleville, Illinois 62220

OVERALL FIRST FLOOR PLAN

A2.01

LAWRENCE GROUP



1 OVERALL SECOND FLOOR PLAN

Attachment 11 – p. 2

00150

NEW SKILLED NURSING AND SHELTERED CARE FOR

# ST. PAUL'S HOME

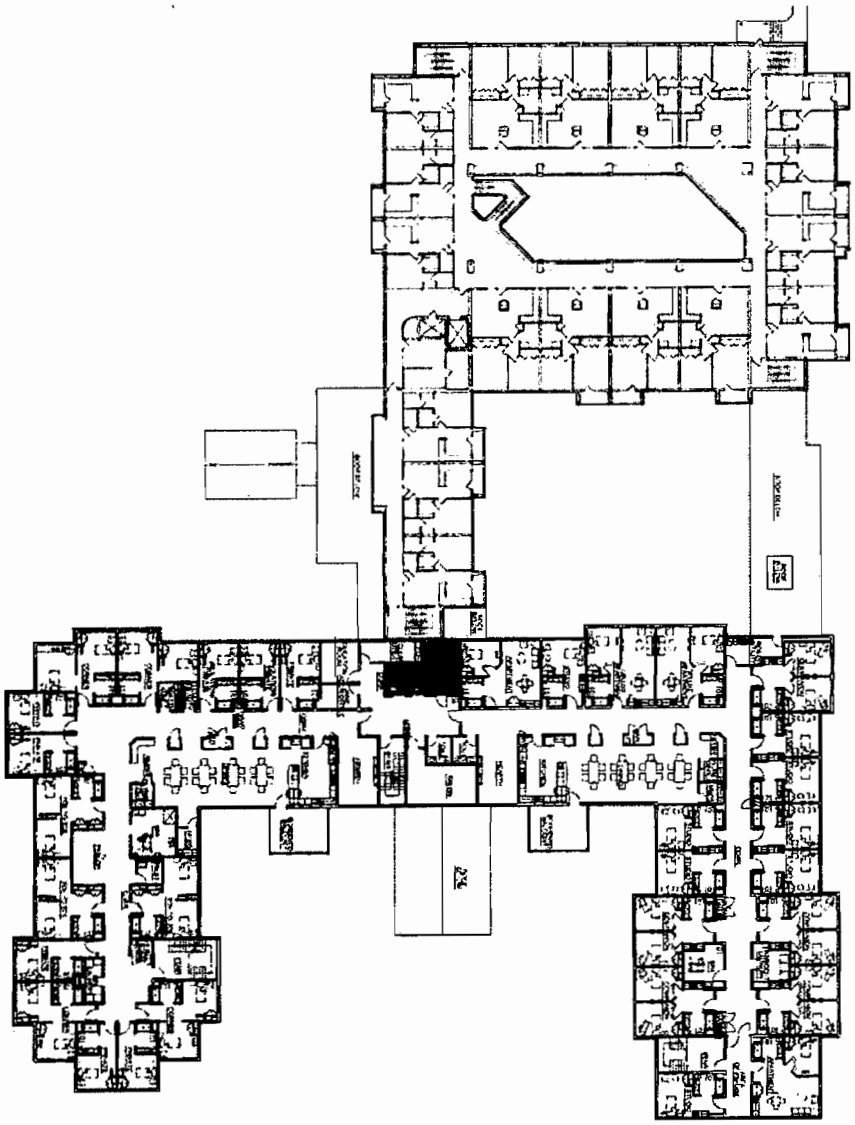
1021 West E Street Belleville, Illinois 62220

OVERALL SECOND FLOOR PLAN

A2.02

LAWRENCE GROUP

CLINICAL SNF
CLINICAL ICF
NON-CLINICAL
NON-CLINICAL - EXIST BLD
SHARED



1 OVERALL THIRD FLOOR PLAN

00151

Attachment 11 – p. 3

NEW SKILLED NURSING AND SHELTERED CARE FOR

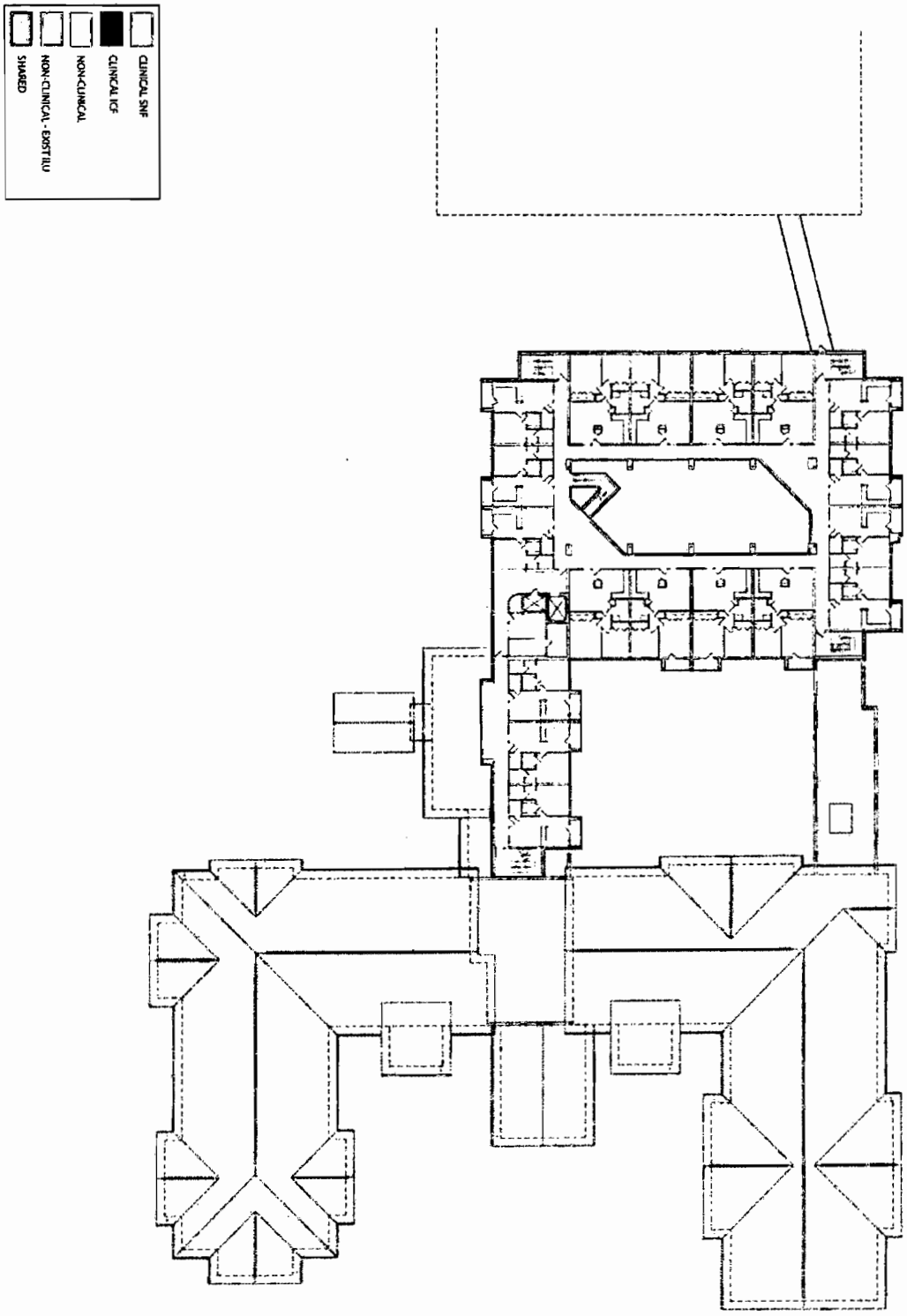
# ST. PAUL'S HOME

1021 West E Street Belleville, Illinois 62220

OVERALL THIRD FLOOR PLAN

A2.03

LAWRENCE GROUP




1 OVERALL FOURTH FLOOR PLAN

00152

Attachment 11 – p. 4

NEW SKILLED NURSING AND SHELTERED CARE FOR

# ST. PAUL'S HOME

1021 West E Street Belleville, Illinois 62220

OVERALL FOURTH FLOOR PLAN

A2.04

LAWRENCE GROUP

**St. Paul's Clinical/Non Clinical Area Summary - November 28, 2012 Revision**

| | 1st Floor Clinical | 2nd Floor Clinical | 3rd Floor Clinical | 1st Floor NonClinical | 2nd Floor NonClinical | 3rd Floor NonClinical |
|---|---|---|---|---|---|---|
| **Clinical** | | | | | | |
| Skilled Nursing and Iteremediate Care Memory Care | | | | | | |
| SNF Resident Rooms | 6503 | 13604 | 6233 | | | |
| ICF Resident Rooms | 5701 | 0 | 0 | | | |
| SNF Nurse, Meds, O2 | 260 | 572 | 360 | | | |
| ICF Nurse, Meds, O2 | 212 | 0 | 0 | | | |
| SNF Clean Utility, Soiled Utility, Clean Linen | 262 | 492 | 319 | | | |
| ICF Clean Utility, Soiled Utility, Clean Linen | 117 | 0 | 0 | | | |
| SNF Spa | 243 | 411 | 243 | | | |
| ICF Spa | 177 | 0 | 0 | | | |
| SNF Resident Laundry | 108 | 255 | 108 | | | |
| ICF Resident Laundry | 155 | 0 | 0 | | | |
| SNF Janitor | 31 | 62 | 31 | | | |
| ICF Janitor | 31 | 0 | 0 | | | |
| SNF Misc. Storage | 25 | 50 | 25 | | | |
| ICF Misc. Storage | 25 | 0 | 0 | | | |
| SNF Dining, TV, Hearth, TV Parlor | 1201 | 2529 | 1391 | | | |
| ICF Dining, TV, Hearth, TV Parlor | 1138 | 0 | 0 | | | |
| SNF Household Kitchen | 437 | 874 | 437 | | | |
| ICF Household Kitchen | 437 | 0 | 0 | | | |
| SNF Screened or Covered Porch | 300 | 600 | 300 | | | |
| ICF Screened or Covered Porch | 300 | 0 | 0 | | | |
| SNF Corridors | 2376 | 4910 | 2279 | | | |
| ICF Corridors | 2425 | 0 | 0 | | | |
| SNF Stairs | 795 | 795 | 517 | | | |
| SNF Restrooms | 73 | 188 | 78 | | | |
| ICF Restrooms | 68 | 0 | 0 | | | |
| Salon | 0 | 0 | 362 | | | |
| Exam Room | 197 | 0 | 0 | | | |
| Physical Therapy | 1460 | 0 | 0 | | | |
| ***Clinical Portion of Shared Areas*** | | | | | | |
| Elevators (108/134=81% SNF/ICF) | 222 | 222 | 152 | | | |
| Commercial Laundry (108/194=56% SNF/ICF) | 358 | 0 | 0 | | | |
| Housekeeping (108/134=81% SNF/ICF) | 159 | 159 | 171 | | | |
| TOTAL | 25796 | 25723 | 13006 | | | |

| | 1st Floor Clinical | 2nd Floor Clinical | 3rd Floor Clinical | 1st Floor NonClinical | 2nd Floor NonClinical | 3rd Floor NonClinical |
|---|---|---|---|---|---|---|
| **Non Clinical** | | | | | | |
| Sheltered Care and ILU Additions | | | | | | |
| Sheltered Care Resident Rooms | | | | 0 | 0 | 8093 |
| Nurse, Meds, O2 | | | | 0 | 0 | 212 |
| Clean Utility, Soiled Utility, Clean Linen | | | | 0 | 0 | 183 |
| Spa | | | | 0 | 0 | 177 |
| Resident Laundry | | | | 0 | 0 | 155 |
| Janitor | | | | 0 | 0 | 31 |
| Dining, TV, Hearth, Parlor | | | | 0 | 0 | 1138 |
| Household Kitchen | | | | 0 | 0 | 437 |
| Screened or Covered Porch | | | | 0 | 0 | 300 |
| Corridors, Lobby, Vestibule | | | | 2590 | 1772 | 2573 |
| Stairs | | | | 0 | 0 | 278 |
| Public Restrooms | | | | 658 | 276 | 161 |
| Community Room/Chapel, Catering Kitchen | | | | 0 | 1460 | 0 |
| Storage | | | | 542 | 1102 | 25 |
| Offices, Conference | | | | 812 | 1058 | 294 |
| Employee Lounge, Lockers | | | | 468 | 0 | 0 |
| Mechanical, Electrical, Plumbing, Elevator Machine Rooms | | | | 568 | 0 | 0 |
| ***Non Clinical Portion of Shared Areas*** | | | | | | |
| Elevators (26/134=19% Sheltered Care) | | | | 53 | 53 | 37 |
| Commercial Laundry (86/194=44% Sheltered Care and ILU) | | | | 285 | 0 | 0 |
| Houskeeping (26/134=19% SNF) | | | | 38 | 38 | 41 |
| TOTAL | | | | 6014 | 5759 | 14135 |

| | |
|---|---|
| Total Area per Floor - New Building | |
| First | 31810 |
| Second | 31482 |
| Third | 27141 |
| TOTAL | 90433 |

## Renovation at Existing Building

| | |
|---|---|
| ***Clinical Portion of Renovated Areas*** | |
| First - | 0 |
| Second - Kitchen (108/194=56% of 1300 sf) | 724 |
| Second - Dining/Activity (0%) | 0 |
| Third | 0 |
| TOTAL | 724 |
| ***Non Clinical Portion of Renovated Areas*** | |
| First - | 0 |
| Second - Kitchen (86/194=44% Of 1300 sf) | 576 |
| Second - Dining/Activity (100%) | 3000 |
| Third | 0 |
| TOTAL | 3576 |

**Criterion 1125.600 Bed Capacity**

The maximum bed capacity of a general LTC facility is 250 beds, unless the applicant documents that a larger facility would provide personalization of patient/resident care and documents provision of quality care based on the experience of the applicant and compliance with IDPH's licensure standards (77 Ill. Adm. Code: Chapter I, Subchapter c (Long-Term Care Facilities)) over a two-year period.

This project will reduce the overall bed capacity from 175 beds to 134 beds (from 113 licensed beds to 108 licensed beds and 62 sheltered care beds to 26 sheltered care beds). Upon project completion the licensed bed capacity will be 90 skilled nursing beds, 18 intermediate care beds, and 26 sheltered care beds. Therefore, this project should comply with this Part.

ATTACHMENT 20

**Criterion 1125.610 - Community Related Functions**

The applicant shall document cooperation with and the receipt of the endorsement of community groups in the town or municipality where the facility is or is proposed to be located, such as, but not limited to, social, economic or governmental organizations or other concerned parties or groups. Documentation shall consist of copies of all letters of support from those organizations.

Appended to this as part of ATTACHMENT 21 are eleven letters of community support for the modernization project at St. Paul's Home. These letters are from:

1. United States Senator Richard J. Durbin
2. Area Agency on Aging CEO Joy Paeth
3. Greater Bellville Chamber Executive Director John Lengerman
4. City of Belleville, Mayor Mark W. Eckert
5. Family Physicians of Southern Illinois, Brian A. O'Neil and David A. O'Neil
6. Harter, Larson, & Dodd, Nancy R. Larson
7. Our Lady of the Snows Chair Barbara Prosser & Executive Director D. Robert McCardle
8. Illinois State Representative Scott E. Penny
9. St. Clair County Board Chairman Mark A. Kern
10. St. Elizabeth's Hospital President and CEO Maryann L. Reese, RN
11. St. Paul United Church of Christ Senior Pastor Andrew J. Kramer
12. Trinity United Church of Christ Pastor Cory Hartz
13. Memorial Hospital President and CEO Mark J. Turner

ATTACHMENT 21

RICHARD J. DURBIN
ILLINOIS

COMMITTEE ON APPROPRIATIONS

COMMITTEE ON THE JUDICIARY

COMMITTEE ON RULES
AND ADMINISTRATION

ASSISTANT MAJORITY
LEADER

# United States Senate

Washington, DC 20510–1304

309 HART SENATE OFFICE BUILDING
WASHINGTON, DC 20510-1304
(202) 224-2152
TTY (202) 224-8180

230 SOUTH DEARBORN, 38TH FLOOR
CHICAGO, IL 60604
(312) 353-4952

525 SOUTH EIGHTH STREET
SPRINGFIELD, IL 62703
(217) 492-4062

701 NORTH COURT STREET
MARION, IL 62959
(618) 998-8812

durbin.senate.gov

October 18, 2012

Illinois Health Facilities and Services Review Board

To Whom It May Concern:

I am writing in support of St. Paul's Home of Belleville, Illinois and their proposal to replace their existing Skilled, Intermediate and Sheltered Care Facility with a new building that will include both Skilled Nursing and Sheltered Care.

Beginning in 1926, the St. Paul's Home for the Aged began serving the elderly citizens of the community. They have continued this service up to the present as a faith-based not-for-profit community under the auspices of the United Church of Christ.

Their proposal includes the construction of a new building on the campus that will attach to the existing residential apartments and will address aging physical plant conditions. This will enhance both the quality of life and quality of care for the residents of St. Paul's.

I urge the Illinois Health Facilities and Services Review Board to give St. Paul's Home's proposal the most serious consideration.

Sincerely,

Richard J. Durbin
United States Senator

RJD/amd



00157

Area Agency on Aging
of Southwestern Illinois

2365 Country Road • Belleville, IL 62221 • Tel: (618) 222-2561 • (800) 326-3221 • Fax (618) 222-2567 • E-mail ask@answersonaging.com
www.answersonaging.com

October 25, 2012

Illinois Health Facilities and Services

To Whom It May Concern:

It is a pleasure to submit a letter of support for St. Paul's Home & Retirement Apartments project. St. Paul's provides an outstanding level of care to those they serve. Their philosophy of care is such that supports the clients and their families.

The Area Agency on Aging has had the opportunity to collaborate with St. Paul's on other projects. Their focus is always on the client and how they can best serve that individual and the community at large.

We look forward to the Department on Aging making a positive decision on their application and to continue our working relationship with St. Paul's. Should you have any questions please do not hesitate to call.

Sincerely,

Joy Paeth
Chief Executive Officer

00158





The Area Agency on Aging of Southwestern Illinois does not discriminate in admission to programs or activities or treatment of employment in programs or activities in compliance with the Illinois Human Rights Act; the U.S. Civil Rights Act; Section 504 of the Rehabilitation Act; the Age Discrimination Act; the Age Discrimination in Employment Act; and the U.S. and Illinois Constitutions. If you feel you have been discriminated against, you have a right to file a complaint with the Illinois Department on Aging. For information, call 1-800-252-8966 (Voices & TDD), or contact the Agency at 1-618-222-2561.

The Greater BELLEVILLE Chamber

October 31, 2012

TO: Illinois Health Facilities and Services Review Board

RE: Support for St. Paul's Home Expansion

On behalf of the board of directors and the more than 550 members of the Greater Belleville Chamber of Commerce I'd like to express our support, through this letter, for the proposed new construction at St. Paul's Home and Retirement Apartments.

St. Paul's Home has a long and very successful history of serving the residents of Belleville and the surrounding communities through their wonderful care. The new building on the existing campus will not only enhance the care given to the residents but will create an even more beautiful area in that part of our community.

As Executive Director of the chamber I thank St. Paul's Home and its staff for their support of our great city and the business community and ask for your support of the expansion plans.

Sincerely,

John L. Lengerman
Executive Director

00159

216 East "A" Street • Belleville, Illinois 62220 • Phone: 618-233-2015 • Fax: 618-233-2077
www.bellevillechamber.org

# CITY OF BELLEVILLE, ILLINOIS

**MARK W. ECKERT,** MAYOR

101 South Illinois Street
Belleville, IL 62220-2105
Office: (618) 233-6810
Fax: (618) 233-6779

CITY FLAG
DESIGNED BY
FREDRICK L LANGE
JULY 6th 1964

October 25, 2012

Illinois Health Facilities and Services Review Board
2nd Floor
525 West Jefferson Street
Springfield, IL 62761

RE: St. Paul's Home, 1021 W. E Street, Belleville, IL

To Whom It May Concern:

As Mayor of the City of Belleville, I am writing in support of the application submitted for St. Paul's Home, a facility that serves the needs of Belleville's elderly population. Our unique City is a blend of young and old, wealthy and needy, historic urban downtown, and new housing construction. A project such as the proposed expansion of St. Paul's home will benefit our community greatly, as it serves the needs of our aging population.

I am sensitive to the limited funding and keen competition for IHDA funds. However, I am particularly encouraged by the efforts that St. Paul's Home has already made in meeting the needs of our senior residents. I am certain that the proposed project will have a positive impact on the neighborhood and will serve the city for decades into the future. I encourage you to favorably evaluate funding this very important and necessary project.

If you have any questions or concerns, please don't hesitate to contact me at (618) 233-6810 x239 or meckert@belleville.net. Thank you.

Sincerely,

Mark W. Eckert

Mark W. Eckert, Mayor
City of Belleville, Illinois

Cc: Chris Wiltse, Development Project Mgr, St. Paul's Home

# Family Physicians of Southern Illinois

Brian A. O'Neill, MD  David A. O'Neill, DO
4600 Memorial Dr. Suite #220
Belleville, IL 62226
Office # 618-235-6191
Fax # 618-235-6716


October 10, 2012

Illinois Health Facilities
And Services Review Board

Re: St. Paul's Home
1020 West E St
Belleville, IL 62220

To Whom It May Concern,

We are pleased to offer our sincere and earnest support of St. Paul's Home vision for constructing a new facility to accommodate skilled, intermediate and sheltered care patients.

St. Paul's has made it their mission to provide quality compassionate care to their residents. And, this mission extends to family members, physicians, outside medical personnel and staff. They have been influential in the community and are respected for their services provided. A new facility would enhance both the quality of life and quality of care for each individual.

Over the past thirty years, we have observed this facility and have recommended our patients consider placement there. We feel confident with their medical care provided and value their care.

It is with anticipation we await the arrival of this new facility.

Sincerely,

Brian A. O'Neill, MD

David A. O'Neill, DO

# Harter, Larson & Dodd

ESTATE PLANNING AND ELDER LAW

**Nancy R. Larson**
**Heidi E. Dodd**
Attorneys at Law

**Gary R. Harter**
1954-2006

October 17, 2012

Illinois Health Facilities
and Services Review Board

Re: Replacement facility for St. Paul's Home, Belleville, Illinois

Dear Board Members:

It has come to my attention that St. Paul's Home & Retirement Apartments is hoping to replace its very dated and worn existing nursing care facility. I agree that the time has come to provide the community with a modern comfortable facility that will enhance the quality of life and quality of care for existing and future residents of the St. Paul's Skilled Nursing and Sheltered Care.

St. Paul's has been home to many of my elderly clients who chose to live in either the apartment community or the nursing home section. My staff and I are frequent visitors to friends, family, and clients at the St. Paul's campus. It is our belief that a fresh new skilled nursing and sheltered care building would boost the morale of both the residents and their families, and the staff, and offer the apartment dwellers a pleasing place to consider should their time in a skilled facility become necessary. It is desirable and respectful to have comfortable and appropriate residential communities available to serve our growing elderly population.

The St. Paul's retirement facilities have been a stable and well-respected institution in the community for many, many years. The construction of a new and improved care facility on the campus would be a welcome change for all residents of the community.

Sincerely,

Nancy R. Larson

NRL:kn

**Main Office**
201 South Jackson Street
Belleville, IL 62220
618-235-6335 P
618-235-6342 F

NAELA
MEMBER

**Appointment Only**
219 East Main Street
Mascoutah, IL 62258
618-566-2911 P

# Apartment Community
## of Our Lady of the Snows

Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

October 8, 2012

To whom it may concern,

This letter is a letter of support of the proposed replacement of the current St. Paul's Home's skilled and sheltered care.

As a Continuing Care Community providing such care in the Belleville and Metro East community, The Apartment Community of Our Lady of the Snows recognizes the need for quality senior providers. The Apartment Community would welcome an enhanced and updated St. Paul's Home project, as it promises to offer continued, and much needed, services with mixed income options, especially Public Aid and Medicare beds.

Additionally, we respect the fact that St Paul's Home's board of directors, it's administration and St. Andrew's Management Services value a faith based, not for profit mission in its delivery of care.The modernization of the facility promises to improve service and enhance the lives of residents, their families, employees, and the broader community.
In this day in age, our seniors deserve no less.

Sincerely,

Barbara Prosser

Barbara Prosser
Chairperson, Board of the Directors

D. Robert McCardle
Executive Director

St. Francis Center for Assisted Living • Dammert Geriatric Center
726 Community Drive • Belleville, Illinois 62223
618-394-6400 • Fax: 618-394-9051

# SCOTT E. PENNY

STATE REPRESENTATIVE • 113TH DISTRICT

SPRINGFIELD OFFICE:
267-S STRATTON OFFICE BUILDING
SPRINGFIELD, ILLINOIS 62706
217-782-0104

DISTRICT OFFICE:
9200 W. MAIN - SUITE 4
BELLEVILLE, ILLINOIS 62223
618-394-2211

DISTRICT OFFICE:
1310 NIEDRINGHAUS
GRANITE CITY, ILLINOIS 62040
618-451-0200

COMMITTEES:

MEMBER
- APPROPRIATIONS: PUBLIC SAFETY
- CITIES & VILLAGES
- TRANSPORTATION: VEHICLES & SAFETY

ILLINOIS GENERAL ASSEMBLY


*October 31, 2012*

*Christopher H. Wiltse*
*Development Project Manager*
*Sr. Andrew's Management Services*
*6633 Delmar Boulevard*
*St. Louis, MO 63130*

*RE: St. Paul's Home and Retirement Apartments*

*Dear Illinois Health Facilities and Services Review Board:*

*I am pleased to extend my support for the proposed replacement of the existing Skilled, Intermediate and Sheltered Care Facility with a new building that will include both Skilled Nursing and Sheltered Care at St. Paul's Home and Retirements Apartments.*

*I hope the proposed project will move forward quickly. This new addition to St. Paul's Home and Retirement Apartments will address aging and physical plant conditions and enhance both the quality of life and quality of care for individuals who have chosen St. Paul's as their home.*

*Please let this letter serve as my letter of support for the project. Additionally, if I could assist in any way to assure that this much-needed project moves forward, please advise and I will be glad to assist, (618)394-2211.*

*Sincerely,*

Scott E. Penny

*SCOTT E. PENNY*
*State Representative*
*113th District*

*SEP/cmt*

RECYCLED PAPER - SOYBEAN INKS

# ST. CLAIR COUNTY BOARD

10 Public Square • Room B561 • Belleville, Illinois 62220-1623

MARK A. KERN
CHAIRMAN

(618) 277-6600
Fax (618) 825-2740

October 11, 2012

Illinois Health Facilities and Services Review Board

To whom it may concern:

As St. Clair County Board Chairman I am writing to convey my endorsement for St. Paul's Home to replace its existing Skilled, Intermediate Care Facility with a new building.

Since 1926 St. Paul's Home and Retirement Apartments has consistently maintained a strong presence in the Belleville community and I am confident that this renovation will enhance the delivery of eldercare services in St. Clair County.

I strongly encourage the Board to approve St. Paul's application.

Sincerely,

Mark A. Kern, Chairman
St. Clair County Board

MAK/dm

St. Elizabeth's
HOSPITAL
BELLEVILLE, ILLINOIS

October 26, 2012

Illinois Health Facilities and Services Review Board
525 W Jefferson Street
Springfield, IL 62761

To Whom It May Concern:

On behalf of St. Elizabeth's Hospital, I am pleased to extend this letter of support for St. Paul's Skilled, Intermediate and Sheltered Care replacement facility.

We understand and support St. Paul's need to address aging physical plant conditions and enhance both the quality of life and quality of care for individuals who have chosen St. Paul's as their home. St. Paul's Home for the Aged has been in our community since 1926 and their mission to provide a faith based, not-for-profit community is important to our area.

If you have any questions or I can be of further assistance, please do not hesitate to contact me.

Sincerely,

Maryann L Reese

Maryann L. Reese, RN
President and CEO

211 South Third Street
Belleville, IL 62220
618-234-2120
www.steliz.org

SAINT PAUL
UNITED CHURCH OF CHRIST

November 1, 2012

Dear Members of the Illinois Health Facilities and Services Review Board,

St. Paul United Church of Christ in Belleville, Illinois, has a longstanding relationship with the St. Paul's Home community, one which dates back to its very first years. Members and pastors at St. Paul Church have regularly participated in the life of St. Paul's Home, serving as members of the St. Paul's Home Board and Foundation and bringing to their efforts a shared concern for the welfare and care of our senior population.

Please know that our congregation enthusiastically endorses the proposed building plans of St. Paul's Home. We look forward to the new state-of-the-art living and caring facilities which will help St. Paul's Home carry out its fundamental mission and better serve our greater community. It is our intention to do whatever we can to help St. Paul's Home succeed with this new project.

Sincerely yours,

Andrew J. Kramer, Senior Pastor
St. Paul UCC – Belleville, IL

115 West 'B' Street - Belleville, Illinois 62220
(618) 233-3303 - www.stpaulucc.org

United Church of Christ

47 North Douglas Avenue

Belleville, IL 62220

To whom it may concern,

I am a new pastor in the area, serving Trinity United Church of Christ in Belleville. While I am new to the community, I can say that my ministry has already been impacted by St. Paul's Home and Retirement Apartments. I currently have two members of Trinity who are residents at St. Paul's, and I know of no one in this congregation who doesn't have a connection with St Paul's either through a family member or a dear friend. It is apparent that St. Paul's has touched so many in the community.

While visiting my parishioners, I am always impressed with the staff and the care they provide. Every staff member I have encountered is professional, caring, helpful and courteous. It is clear to me that the care-givers at St. Paul's view their job as a ministry. Comparing this to many other homes in the area, the caring attitude among the staff is refreshing, and is undoubtedly the main reason that they are at near capacity.

It is also apparent that they are in need of a new facility. The buildings are old and in need of updating. The layout is also old and feels very "institutional." It is my understanding that the upkeep, and necessary repairs and renovations will cost millions of dollars. These renovations are one option, however, in the end, they will still be left with an old, inefficient, institutional-styled building.

I recently attended an informational meeting showing and explaining the plan for the construction of a new facility. I am impressed with the layout, and the possibilities this new building would bring to enhance the quality of care and the quality of life of the residents. I also see this building becoming an important step in bringing about the renewal of the entire neighborhood.

Not only am I impressed with the plan, I am equally impressed with those who are working tirelessly to bring this about. They are exploring every possibility, looking for the best value and the most efficient areas to spend their capital, while always keeping the needs of the residents in the forefront. This project is in very capable hands.

For these reasons I wish to express my support for this project.

Respectfully,

Cory Hartz

Pastor Cory Hartz
Trinity United Church of Christ

00168

Attachment 21 – p. 12

Phones - Office: 618.233.2941 Fax: 618-233-3185 email: trinitybell@sbcglobal.net
Website: www.trinity-ucc.org

Adopted by Church Council 04-08-2010

4500 Memorial Drive
Belleville, Illinois 62226-5399
(618) 233-7750
FAX: (618) 257-5658
www.memhosp.com

Mark J. Turner, President

MEMORIAL

*Dedication. Compassion. Innovation.*

November 21, 2012

Ms. Courtney Avery
Administrator
Illinois Health Facilities
and Services Review Board
525 West Jefferson
Springfield, Illinois 62761

Dear Ms. Avery:

Please accept this letter in support of the Certificate of Need application submitted by St. Paul's Home in Belleville seeking to replace its aged skilled nursing and sheltered care facilities. As a member of the greater Belleville healthcare community, I recognize the need and importance of providing facilities that will enhance the quality of life and care for area residents.

St. Paul's Home has been an integral part of the Belleville community for over 85 years and was founded by some of the same churches who played a significant role in the development and growth of Memorial Hospital.

As the population ages so does the need for facilities like St. Paul's Home; I urge you to support their request to build new facilities to serve the residents of our community.

Sincerely,

Mark J. Turner
President and CEO



*An affiliate of Memorial Group, Inc.*

**Criterion 1125.620 - Project Size**

The applicant shall document that the amount of physical space proposed for the project is necessary and not excessive. The proposed gross square footage (GSF) cannot exceed the GSF standards as stated in Appendix A of 77 Ill. Adm. Code 1125 (LTC rules), unless the additional GSF can be justified by documenting one of the following:

It would appear that the proposed project is in compliance with this criterion as the total square footage for the project is 90,433 square feet and the facility will be comprised of 134 beds (108 licensed beds and 26 sheltered care beds) which yields an average of 674.9 square feet per bed, which is below the building gross square foot upper limit of 713 BGSF.

NOTE: The BGSF limit is referenced because while this project is classified as a modernization (since the facility is being rebuilt on the same site and maintain the same address) it is more akin to the establishment of a new facility and St. Paul's wanted to be transparent and include all building components in the information being provided to the Board.

1. Additional space is needed due to the scope of services provided, justified by clinical or operational needs, as supported by published data or studies;

   Not applicable

2. The existing facility's physical configuration has constraints or impediments and requires an architectural design that results in a size exceeding the standards of Appendix A;

   Not applicable

3. The project involves the conversion of existing bed space that results in excess square footage.

   Not applicable

ATTACHMENT 22

**Criterion 1125.630 - Zoning**

The applicant shall document **one** of the following:

1. The property to be utilized has been zoned for the type of facility to be developed;

   This property is properly zoned to allow for the operation of a long term care facility. As evidence by the attached letters, the property at 1021 West E Street is zoned B-1 Multi-Family Residential District allowing for both nursing homes and multi-family dwelling units. Additionally, the modernized facility will retain the address of 1021 West E Street.

2. Zoning approval has been received; or

   Not applicable

3. A variance in zoning for the project is to be sought.

   Not applicable

ATTACHMENT 23

# CITY OF BELLEVILLE, ILLINOIS

**Economic Development & Planning**

**101 South Illinois Street**
**Belleville, IL 62220-2105**
Office: (618) 233-6810 x250
Fax: (618) 355-4209

CITY FLAG
DESIGNED BY
FREDRICK L. LANGE
JULY 6th 1964

October 12, 2012

Ms. Susan Franklin, Operations Director
St. Paul's Home
1021 West E Street
Belleville, IL 62220

RE: St. Paul's Home Zoning

Dear Ms. Franklin:

I am writing you this letter to confirm that the property at 1021 West E Street is zoned B-1 Multi Family Residential District. In this district, both nursing homes and multi-family dwelling units are permitted. Please let me know if you have any other questions or if I can be of any further assistance. Thank you.

Sincerely,

Emily Fultz, AICP
Director of Economic Development & Planning

# CITY OF BELLEVILLE, ILLINOIS

**Economic Development & Planning**

101 South Illinois Street
Belleville, IL 62220-2105
Office: (618) 233-6810 x250
Fax: (618) 355-4209

CITY FLAG
DESIGNED BY
FREDRICK L. LANGE
JULY 6th 1964

October 12, 2012

Ms. Susan Franklin, Operations Director
St. Paul's Home
1021 West E Street
Belleville, IL 62220

RE: St. Paul's Home Proposed Modernization

Dear Ms. Franklin:

Thank you for your letter regarding the proposed modernization project ("the project") at 1021 West E Street. After reviewing the documentation that you have provided, the City of Belleville, in conjunction with the St. Clair County 911 District, has determined that modernized facility that is proposed to be located on the northeast corner of the project site will indeed retain an address of 1021 West E Street, as it is located on the same parcel of land. Please let me know if you have any other questions or if I can be of any further assistance. I look forward to working with you on this project. Thank you.

Sincerely,

Emily Fultz, AICP
Director of Economic Development & Planning

cc: Carolyn Ligon, Addressing Manager, St. Clair County 911 District

**Criterion 1125.640 - Assurances**

1. The applicant representative who signs the CON application shall submit a signed and dated statement attesting to the applicant's understanding that, by the second year of operation after the project completion, the applicant will achieve and maintain the occupancy standards specified in Section 1125.210(c) for each category of service involved in the proposal.

   Attached is a letter from Mr. Suess and Ms. Franklin attesting to the requirements of 77 Ill. Admin. Code Section 1125.210(c) that the facility will achieve and maintain a 90% occupancy average prior to the completion of the second year of operation.

2. For beds that have been approved based upon representations for continuum of care (Section 1125.560(a)) or defined population (Section 1125.560(b)), the facility shall provide assurance that it will maintain admissions limitations as specified in those Sections for the life of the facility. To eliminate or modify the admissions limitations, prior approval of HFSRB will be required.
   **(NOT APPLICABLE – NO CONTINUUM OF CARE)**

ATTACHMENT 24

*Nursing Facility*
*1021 West E. Street*
*Belleville, IL 62220*
*618-233-2095*
*618-233-2109 fax*

*Retirement Apartments*
*901 West E. Street*
*Belleville, IL 62220*
*618-233-2318*

St. Paul's Home & Retirement Apartments

80 Years of Caring

"A PLACE TO HAVE FAITH IN"

We are a non-profit, faith based organization.

November 5, 2012

RE: St. Paul's Home, Assurance for Criterion 1125.210(c)

Dear Ms. Avery or Mr. Galassie:

This letter is to attest to the fact that if this Project is approved by the Illinois Health Facilities and Services Review Board, St. Paul's Home, Inc. will achieve and maintain 90% occupancy by the second year of operation after project completion. We expect to be able to achieve this level of occupancy given our transitioning of our existing resident population from the current facility into the modernized facility. Admittedly, our ability to maintain this occupancy level could be affected by various factors outside of our control, such as natural disasters, regulatory changes in healthcare administration or reimbursement, interruption of necessary utilities, physical plant problems, or other unexpected issues outside of St. Paul's control which could have a direct or indirect effect upon our occupancy rate.

Steven Suess
St. Paul's Home Board Chair

Susan Franklin
St. Paul's Home Operations Director

**Criterion 1125.650 - Modernization**

1. If the project involves modernization of a category of LTC bed service, the applicant shall document that the bed areas to be modernized are deteriorated or functionally obsolete and need to be replaced or modernized, due to such factors as, but not limited to:

   a. High cost of maintenance;

   b. non-compliance with licensing or life safety codes;

   c. Changes in standards of care (e.g., private versus multiple bed rooms); or

   d. Additional space for diagnostic or therapeutic purposes.

2. Documentation shall include the most recent:

   a. IDPH and CMMS inspection reports; and

   b. Accrediting agency reports.

3. Other documentation shall include the following, as applicable to the factors cited in the application:

   a. Copies of maintenance reports;

   b. Copies of citations for life safety code violations; and

   c. Other pertinent reports and data.

4. Projects involving the replacement or modernization of a category of service or facility shall meet or exceed the occupancy standards for the categories of service, as specified in Section 1125.210(c).

St. Paul's retained zumBrunnen Consulting ("zumBrunnen") who inspected St. Paul's Home between May 2010 and August 2010. zumBrunnen concluded that the cost of ***necessary maintenance to simply upkeep the existing resident care facilities*** would approach nearly $10,000,000. It is important to note that this prospective **cost *did not include any enhancements to the existing facility***; rather, it only related to the upkeep necessary to maintain the facility

ATTACHMENT 25

operating under its current conditions. Nor did this $10 million include site work to the senior apartment portion of the St. Paul's campus which would add an additional $5 million.

zumBrunnen compared the $10,000,000 cost to simply maintain the existing facility with the $19 - $20 million cost to construct a brand new, modernized facility, and concluded that building a modernized facility was the more economically feasible choice when compared to simply maintaining the existing facility (of the roughly $20 million in construction costs, about $10 million is directly attributed to Clinical costs so the $10 million cost to maintain is essentially an even wash for new construction). zumBrunnen forecasted the type of expenses that St. Paul's Home would be expected to incur related to maintenance of the site and the facility. Those annual expenses ranged from a minimum that exceeded $250,000 per year to upwards of more than $2,000,000 per year looking forward over the next 20 years. The average expense per year for maintenance would be approximately $750,000.

Amongst the most substantial expenses would be the maintenance of the nursing unit providing long-term care to the residents at St. Paul's Home. The expected costs would require St. Paul's to invade their reserves almost every year over the next 20 years. Despite the substantial costs that would be incurred, care would still being provided in a facility that was first established in the 1920's and includes outdated modes of care including group bathrooms, three-bed and two, two-bed wards sharing a common bath. The funds would be expended but there would still be an inevitable need to modernize the facility. The costs that would result from simply maintaining the facility would not include the substantial maintenance costs associated with a building originally established in the 1920's. Creating a modernized facility will allow for

ATTACHMENT 25

increased space for therapeutic purposes to better serve the needs of the residents, including increased rehabilitation and a resident spa.

While the dedication and commitment of St. Paul's patient care staff, maintenance personnel, and Board of Directors have avoided major life safety code violations due to the commitment to place patient safety as the highest priority, the costs of maintaining and improving the existing facility would be overwhelming. Rather than wait until such problems arise, St. Paul's wants to be proactive in pursuing an appropriate means by which to deliver care to this community.

- Examples of how St. Paul's has made due despite operating with systems in varying states of repair or disrepair include:
  - a boiler that has been in place since 1979;
  - an electrical panel installed in 1978 along with other older panels; and
  - a fire-pump system continuing to be utilized with a replacement motor.

One fundamental advantage that supported selecting the option of constructing a modernized facility is that it allows for the cost to be spread out over the course of a 40-year mortgage, as compared to maintenance and repairs which must be paid for as they are performed and as they become necessary. A modernized facility will also allow St. Paul's to provide increased services that better reflect the needs of the community and the current standard of care. The Board needed to consider that the core of St. Paul's was built in the 1920's and renovated in the 1950's. St. Paul's currently has four full time employees plus part time employees dedicated individuals providing ongoing maintenance and repair to the facility.

Below is a summary of routine maintenance and repair costs that St. Paul's has experienced in recent years simply to keep the facility operating as is. These costs are in addition to the $10 million that would be needed to continue to maintain the facility. The "routine" maintenance and repair that has been performed over the recent years includes:

ATTACHMENT 25

| Item Repaired/Replaced | Location (Sheltered, Skilled, Apartments) | Approximate Cost |
|---|---|---|
| **Equipment:** | | |
| Replacement Ice Machine | Skilled | $3,875 |
| Compressor for Walk in Freezer | Skilled | $2,026 |
| Nursing Alarm System upgrade | Skilled | $1,333 |
| Juice Refrigerator Compressor | Skilled | $1,336 |
| 80 Dining room Chairs | Skilled | $28,891 |
| Bed Frames | Skilled | $70,659 |
| Upgrade to Wander Guard systems | Skilled | $1,464 |
| Dining Room Improvements | Skilled | $2,012 |
| Dishwasher motor | Skilled | $3,170 |
| Elevator repairs | Skilled | $3,115 |
| Refrigerator compressors, Evaporator Coil | Skilled | $9,882 |
| Washing machine timer, delay switch | Skilled | $1,107 |
| Fire Security Systems Repairs | Skilled | $1,520 |
| Juice Refrigerator repair | Skilled | $1,312 |
| Juice Refrigerator repair | Skilled | $365 |
| Control Valve | Skilled | $275 |
| Walk in freezer -repairs | Skilled | $728 |
| Kitchen Freezer repairs | Skilled | $1,313 |
| Ice Cream Freezer -repairs | Skilled | $550 |
| Walk in Refrigerator - repair | Skilled | $220 |
| Kitchen Equipment - repair | Skilled | $2,403 |
| Dishwasher commercial machines | Skilled | $4,745 |
| Generator Load Bank | Skilled | $4,200 |
| Phone system -replacement | Skilled | $17,000 |
| Fire Panel/Exit Seekers | Skilled | $4,185 |
| Accutek Exit Seekers | Skilled | $3,645 |
| Mechanical Lifts, scales | Skilled | $1,229 |
| Hospital Bed repairs | Skilled | $2,592 |
| | | |
| **Heat/AC:** | | |
| Compressor unit, heads, expansion valve | Skilled | $2,115 |
| Window A/C | Skilled | $676 |
| 25 ton air condensing unit in Chapel area | Skilled | $18,538 |
| Boiler / HVAC Repairs | Skilled | $4,542 |
| Air Conditioner Replacements | Skilled | $5,884 |

ATTACHMENT 25

| | | |
|---|---|---|
| 15,000 BTU HVAC Unit | Skilled | $1,197 |
| Compressor | Skilled | $495 |
| Blower Wheel for equipment | Skilled | $937 |
| 3 air conditioners 12000 BTU | Skilled | $1,197 |
| 12000 BTU air conditioner | Skilled | $1,199 |
| Compressors | Skilled | $816 |
| Kohl Hall AC compressor | Shelter | $1,785 |
| Bartel Compressor - replace | Skilled | $4,150 |
| Charge Roof AC | Skilled | $200 |
| Roediger Roof Compressors (2) - replace | Skilled | $12,235 |
| Roediger Roof Compressors (2) - replace | Skilled | $1,764 |
| Boilers | Skilled | $6,596 |
| Condenser Bartel AC | Skilled | $4,570 |
| Kitchen Roof Unit repair | Skilled | $900 |
| Kitchen Unit replace compressors | Skilled | $8,923 |
| Laundry Furnace repair | Skilled | $695 |
| Air Handler -Bartel | Skilled | $435 |
| Chiller Repair - Bartel | Skilled | $1,000 |
| | | |
| **Plumbing:** | | |
| Back Flow testing | Skilled | $1,040 |
| Sewer Pump | Skilled | $800 |
| Sewer Auger | Skilled | $225 |
| | | |
| **TOTAL** | | **$258,066** |

These are all expenses that have already been incurred to simply keep the facility operational and do not reflect the upcoming expenses identified in the zumBrunnen report. Major expenses that would be *necessary* to undertake to simply maintain the nursing portion of St. Paul's Home include:

- replacement of the HVAC system;
- replacement of the plumbing and plumbing fixtures;
- replacement of the roof;
- replacements of windows;
- upgrade elevators to comply with current code;
- upgrade the resident call system originally installed in the 1960's;

ATTACHMENT 25

- upgrade resident security and wander management systems
- upgrade of the fire sprinkler and Life Safety systems; and
- upgrade of the entire electrical system.

The expenses involved with such renovations ranged from $281,000 to address the plumbing issues, $751,000 to address the Life Safety issues, $1,350,000 to address the HVAC issues, and nearly $2,000,000 to address the electrical issues.

In addition to these major issues, literally hundreds of other "routine" maintenance points of repair were identified by zumBrunnen during the course of its analysis. These would all yield additional costs to the expected cost of simply "maintaining" the facility. These included:

- Multiple issues identified in the roof of the facility;
- The current electrical panel for the kitchen (which predates the era of circuit breakers) would absolutely require updating and would involve a substantial expense;
- The hot water pumps and various other portions of the original facility likely contain asbestos which, if substantial on-site repairs were undertaken, would require remediation (which could substantially increase the costs involved);
- Additional issues identified regarding the existing HVAC system;
- Issues identified regarding the parking surface;
- Structural issues with the exterior façade of the building which would need replacement;
- Various locations have been identified where mold was growing which would require further investigation and potential remediation;
- Areas of caulking and brickwork likely to lead to water infiltration will need to be investigated and addressed;
- Areas of already identified water infiltration;
- Settlement issues involving the foundation and walkway which have the potential to create falling and/or tripping hazards;
- Multiple masonry issues that require repair and/or replacement;
- Sections of the roof that are allowing water to pool and collect and which would require repair to avoid ongoing or future issues;
- Windows and sashing throughout the facility would need to be replaced and/or resealed;

ATTACHMENT 25

- Multiple points of water infiltration were identified that would require investigation and eventual repair;
- Multiple resident rooms remain dependent upon window air conditioning units;
- Commercial and resident laundry services would need to be updated and repaired.

The facility is currently operating with systems in varying states of repair or disrepair, including a boiler that has been in place since 1979, a fire-pump system with a replacement motor, and an electrical panel installed in 1978 along with other older panels. Multiple and substantial advancements in technology have taken place since these systems were put in place and the facility and its residents would benefit from modernized and updated systems.

**St. Paul's Utilization**

| Year | Patient Days | Utilization* | Note: | Utilization |
|---|---|---|---|---|
| 2011 | 36,510 | 89% | Only 108 beds in use | 93% |
| 2010 | 35,487 | 86% | Only 105 beds in use | 93% |
| 2009 | 33,725 | 82% | All 113 beds in use | 82% |
| 2008 | 40,405 | 98% | Only 104 beds in use | 106% |
| 2007 | 37,193 | 90% | Only 104 beds in use | 98% |
| Avg. | 36,664 | 89%* | Average of 107 beds in use | 94%** |

*183,320 total patient days averaged out utilizing 113 licensed beds regardless of beds in use.

**183,320 total patient days averaged out utilizing average of 107 beds in use over five years.

ATTACHMENT 25

zumBrunnen
Construction Consulting
and Facility Assessment

October 5, 2012

To: Illinois Health Facilities and Services Review Board:

Reference: zumBrunnen, Inc. Project 2010-002
Campus Wide Facility Condition and Capital Replacement Study

zumBrunnen, Inc., of Atlanta, GA, is one of the Nation's leading construction consulting and facility assessment firm having served over 1,500 clients since 1989. zumBrunnen utilizes a proprietary facility assessment, budgeting and forecasting system designed to manage life-term capital replacement and operating expenses, depreciation and required repairs.

zumBrunnen inspected St. Paul's Home in Belleville, IL, in the months of May through August, 2010, and prepared a facility assessment following our inspection.

Based on our assessment, the cost of required maintenance and upkeep of the existing skilled nursing facility and sheltered care facility for the period of 2010 to 2029 is approximately $9.8 million (skilled nursing $6.3 million and sheltered care $3.5 million). These figures average out to almost $0.5 million per year in maintenance costs (skilled nursing $315,000 and sheltered care $175,000). It is important to note that these costs do not include any facility or system enhancements, rather only upkeep and replacement to keep the facility operating at conditions current as of the time of the facility assessment.

As part of the assessment process, zumBrunnen utilizes a Facility Condition Index (FCI). The FCI is a mathematical index developed by the United States Navy designed to compare the cost of maintaining a structure to the estimated cost of replacement. This index rates the relative physical condition of a building, independent of construction type, or cost. The FCI is represented on a logarithmic scale from zero to one, where any value beyond this range exceeds the total cost of replacement; an index value of 1.0 is equivalent to 100% current replacement value.

CFI indices were calculated for each year for the period from 2010 to 2029. In this 20- year period, FCI indices were near or above a ratio of 0.75 for 17 of the 20 years and at or above a ratio of 1.0 for four of twenty years in the skilled nursing facility. In the sheltered care facility, CFI indices were near or above a ratio of 0.75 for all 20 years and at or above a ratio of 1.0 for 11 of the 20 years.

zumBrunnen understands the St. Paul's Home is considering replacement of the existing skilled and sheltered care buildings with new construction estimated around $19 million. Based on the estimated costs of maintaining the existing building and CFI indices, it is zumBrunnen's



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opinion that replacement of the existing building is more economically feasible than maintaining the existing structures.

We understand that sheltered care projects are not subject to review in the state of Illinois. While not reviewable, it is impractical to completely separate sheltered care and skilled costs as the St. Paul's Home is comprised of multiple inter-connected buildings built from the turn on the century up to the early 1980's.

zumBrunnen appreciates the opportunity to present this summary information and opinion to the Illinois Health Facilities and Services Review Board.

Respectfully,

James R. Milan, P.E.
Senior Project Manager
zumBrunnen, Inc.

## INDEX REPORT

This is the summary of the list of Budgets for which reports are provided. This report summarizes the descriptive information as entered on the Budget Wizard associated with the subject of each Budget Report; budget name, unit count, area, parking spaces, dates, original and replacement costs, and comments.

**Report Parameters**

| | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

**Report Parameters**

| | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Minimum unit cost:** | 0.00 |

**Client Name:** St. Paul's Home
**Client Location:** Bellville, IL

00186

| Budget | | Begin Year | Renovations | Area (sf) | Units | Unit Type | Parking per Unit | 2010 Replacement Value | Comments |
|---|---|---|---|---|---|---|---|---|---|
| Sitework | [redacted] | 2000 | | | | | | | |
| Shelter Care | | 1985 | 1995 & 1997 | 17,505 | 18 | ALUs | | 1,776,000 | Replacement cost $145/sf |
| ILU Apartments | [redacted] | 1987 | 2004 & 2008 | 70,200 | 53 | ILUs | | 35,720,000 | Replacement cost $145 /sf |
| Nursing | [redacted] | 1960 | 1980 | 44,672 | 109 | Beds | | 7,371,000 | Replacement cost $165/sf |
| **Total** | | | | **132,377** | **180** | | | **44,867,000** | |

**Currency: $: US dollar**

**Preparer** Jim Milam, zumBrunnen, 404-601-4052

**Preparer Comments**

IMMEDIATE REPAIR EXPENSE: Any item requiring repair or replacement within the next year or two. Minimum aggregate repair costs for any one item to be $100, unless otherwise specified by the client or demeaned necessary by the Preparer of the Report. Repair items related to life safety, code, ADA, citations, etc. to be included regardless of costs. CAPITAL REPLACEMENT EXPENSE: Capital items, as defined by accounting principles, require replacement with a frequency of more than one year. For this Report the minimum reserve costs for any one capital replacement expense item to be $1,000 per year, unless otherwise specified by the client or demeaned necessary by the Preparer of the Report. OPERATING EXPENSE: Operating expense are non-capital items requiring repair, replacement or major service in a frequency less often than once per year, as defined by accounting principles. For this Report the minimum aggregate reserve costs for any one operating expense item is $1,000 per year, unless otherwise specified by the client or demeaned necessary by the Preparer of the Report. Operating items related to life safety, code, ADA, citations, etc. to be included regardless of costs. IMPROVEMENT EXPENSE: A discretionary expense, as determined by the Preparer of the Report, to reduce operating and maintenance costs; improve life safety; and/or an added feature to assure preservation of occupancy levels; without upgrading the property to a new market place.

**Certification**

**By** Jim Milam
**Date** 23 Sep 2010

CERTIFICATION: Information contained in this Report was developed by a zumBrunnen, Inc. Project Manager based on field observations; published industry data; historical data; and interviews with and documents provided by the Client, employees of the Client, and Client vendors. All data has been reviewed with the Client for accuracy. It is recommended all data be reviewed and updated annually; as a minimum, data must be updated every three years from date of certification.



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## I. ANNUAL FORECASTING REPORTS

**Annual Budget Totals Table I:** A listing of annual totals of each Budget Report in each year with totals for each year and term averages.

**Annual Budget Totals – Total Property Chart I-A.1:** Total cost of all Budget Reports combined each year into a bar chart for each year. This provides a budget profile of the entire Property. The term average is displayed as a graph line; optional.

**Annual Budget Comparison Chart I-A.2:** This allows the User to immediately identify the year and the Budgets that have significant cost impact to the total budget. This displays the budget cost for each year for each Budget for the specified term of the report.

**Facility Condition Index (FCI) – Total Property Chart I-C.1:** This charts the relative physical condition of a building, independent of construction type or cost. The FCI is expressed as a ratio of the cost to remedy deficiencies plus the cost of capital replacement, divided by the current replacement value. The FCI is represented on a logarithmic scale from zero to one, where any value beyond this range exceeds the total cost of current replacement; an index value of 1.0 is equivalent to 100% current replacement cost. Data is displayed as a single bar chart per year, for the term of the report with an average graph line, optional.

**Facility Condition Index (FCI) - Comparison Chart I-C.2:** The charts the relative physical condition of a building, independent of construction type or cost. The FCI is expressed as a ratio of the cost to remedy existing deficiencies plus the cost of capital replacement, divided by the current replacement value. The FCI is represented on a logarithmic scale from zero to one, where any value beyond this range exceeds the total cost of current replacement; an index value of 1.0 is equivalent to 100% current replacement cost. This report displays the FCI for each year for each Budget for the specified term of the report.

**Reserve Budget Analysis Chart I-D**: The budget totals displayed by "Chart I-B- Annual Budget Totals – Total Property" are amortized to determine the varying reserve requirements over a term of years necessary to meet reserve fund requirements for the specified report term. The red bars are the funding reserves required in any given year beyond the reserves used as displayed in blue; the red reserves offset the total reserve usage displayed in gray.

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# Annual Budget Totals

All Budgets
Table I-A

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | |
|---|---|---|---|
| Begin Year: | 2010 | Budget Types: | Expense |
| Report Term: | 20 years | Divisions: | All |
| Inflation: | 3.00% | Certification: | See Index Report |
| Area Type: | Gross SF | Minimum unit cost: | 0.00 |
| Classifications: | CAP, REP, IMP | | |

| Budget | Color | Budget Type | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Sitework | | Expense | 57,920 | 2,575 | 84,872 | 67,292 | 3,939 | 37,520 | 45,971 | 133,488 | 98,325 | 1,305 | 55,537 | 3,461 | 59,547 | 76,364 | 135,848 | 15,891 | 8,890 | 40,825 | 63,722 | 4,848 |
| Shelter Care | | Expense | 389,436 | 176,281 | 122,620 | 33,262 | 78,940 | 620,554 | 88,209 | 179,736 | 85,105 | 62,665 | 342,058 | 42,472 | 122,639 | 97,149 | 91,914 | 364,760 | 174,817 | 183,378 | 61,935 | 155,137 |
| ILU Apartments | | Expense | 90,203 | 156,512 | 378,448 | 221,912 | 67,595 | 127,864 | 172,982 | 460,430 | 97,752 | 78,072 | 88,812 | 243,364 | 90,428 | 101,583 | 260,879 | 104,259 | 126,971 | 581,713 | 541,290 | 230,776 |
| Nursing | | Expense | 478,566 | 223,277 | 211,293 | 305,754 | 74,104 | 813,327 | 53,583 | 255,386 | 93,860 | 136,873 | 538,372 | 199,626 | 241,685 | 125,865 | 124,116 | 1,531,932 | 268,795 | 174,114 | 79,538 | 392,591 |
| | | Expense Total | 1,016,124 | 558,645 | 797,133 | 618,220 | 224,578 | 1,599,265 | 360,745 | 1,029,040 | 373,042 | 268,904 | 1,022,780 | 488,923 | 514,299 | 400,960 | 612,357 | 2,016,842 | 579,474 | 980,031 | 746,485 | 783,351 |

See Charts I-A and I-B



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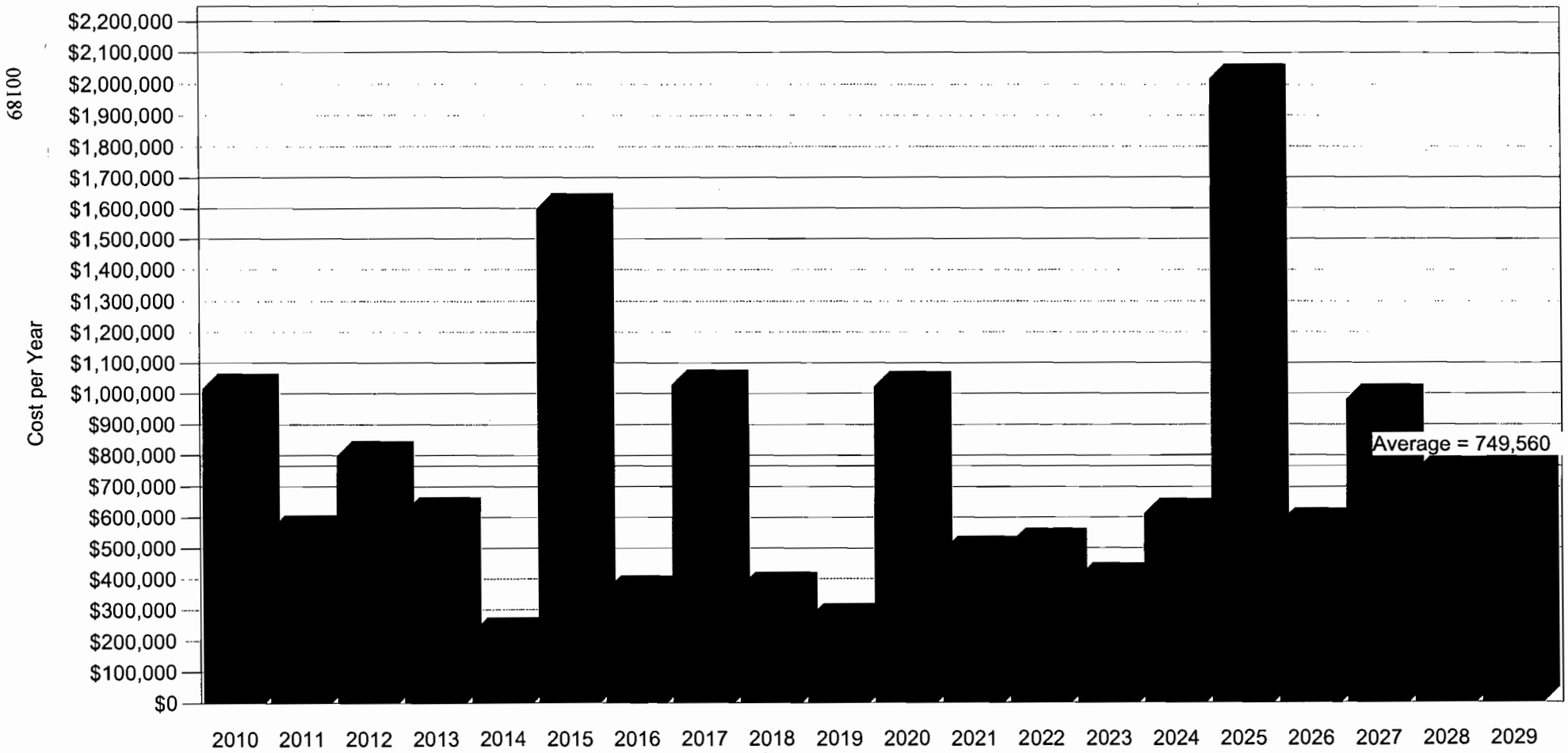
# Annual Budget Totals - Tc Property

**All Budgets**
**Chart I-A.1**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

| Report Parameters | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Minimum unit cost:** | 0.00 |



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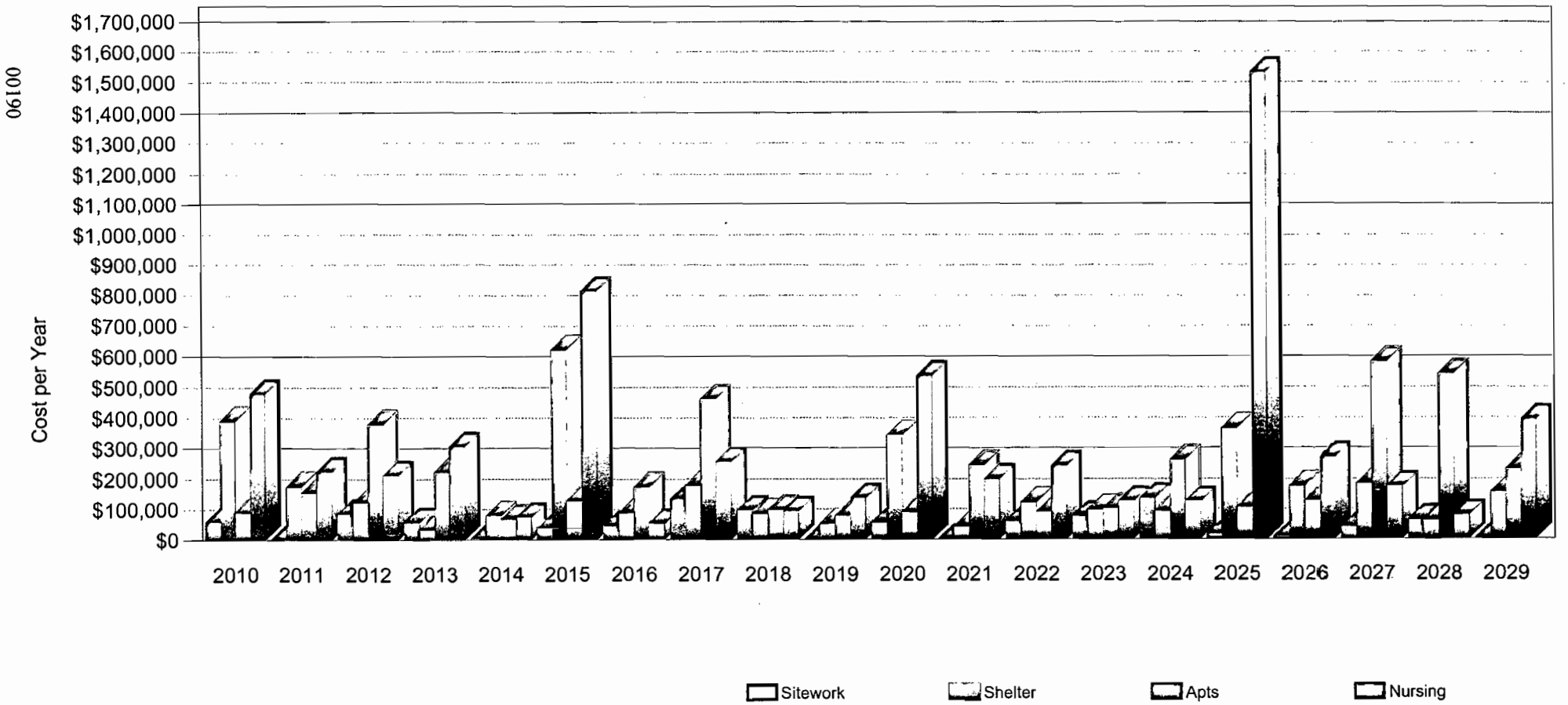
# Annual Budget Totals - Comparison

All Budgets
Chart I-A.2

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | |
|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense |
| **Report Term:** | 20 years | **Divisions:** | All |
| **Inflation:** | 3.00% | **Minimum unit cost:** | 0.00 |
| **Area Type:** | Gross SF | | |
| **Classifications:** | CAP, REP, IMP | | |




Attachment 25 - p.8

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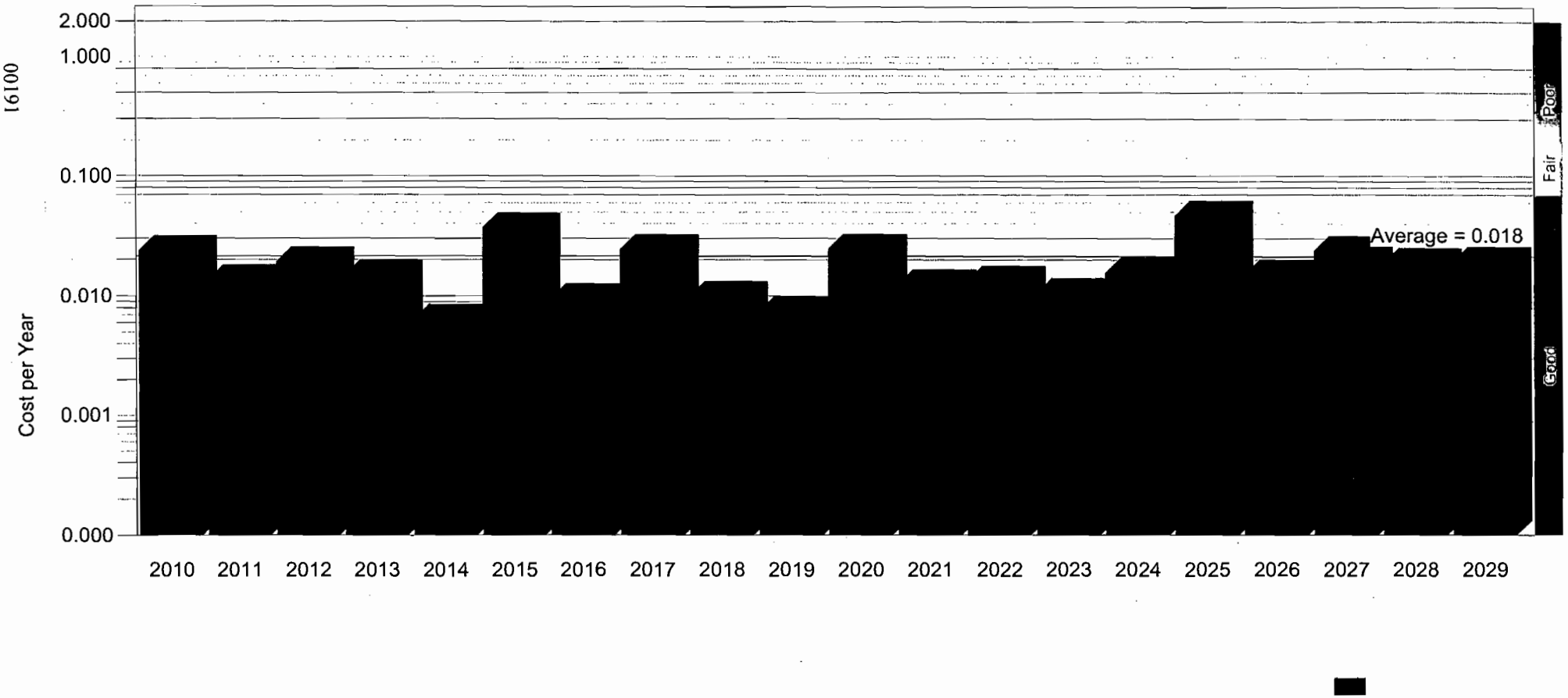
# Facility Condition Index - Tc Property

**All Budgets**
**Chart I-C.1**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | |
|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense |
| **Report Term:** | 20 years | **CRV Year:** | 2010 |
| **Inflation:** | 3.00% | **FCI:** | ( CAP + OPER ) / CRV |
| **Area Type:** | Gross SF | **Minimum unit cost:** | 0.00 |



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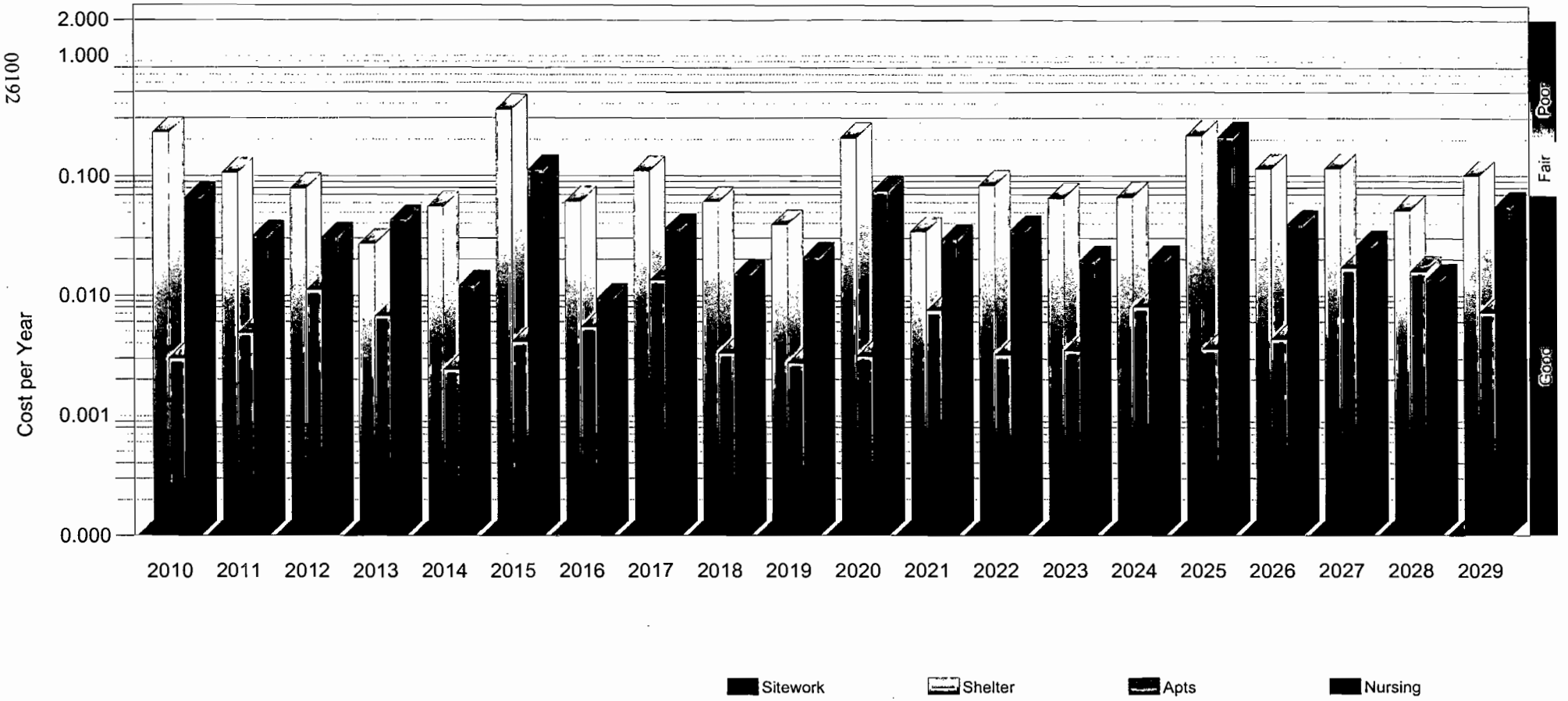
# Facility Condition Index - [redacted] mparison

All Budgets
Chart I-C.2

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | |
|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense |
| **Report Term:** | 20 years | **CRV Year:** | 2010 |
| **Inflation:** | 3.00% | **FCI:** | ( CAP + OPER ) / CRV |
| **Area Type:** | Gross SF | **Minimum unit cost:** | 0.00 |



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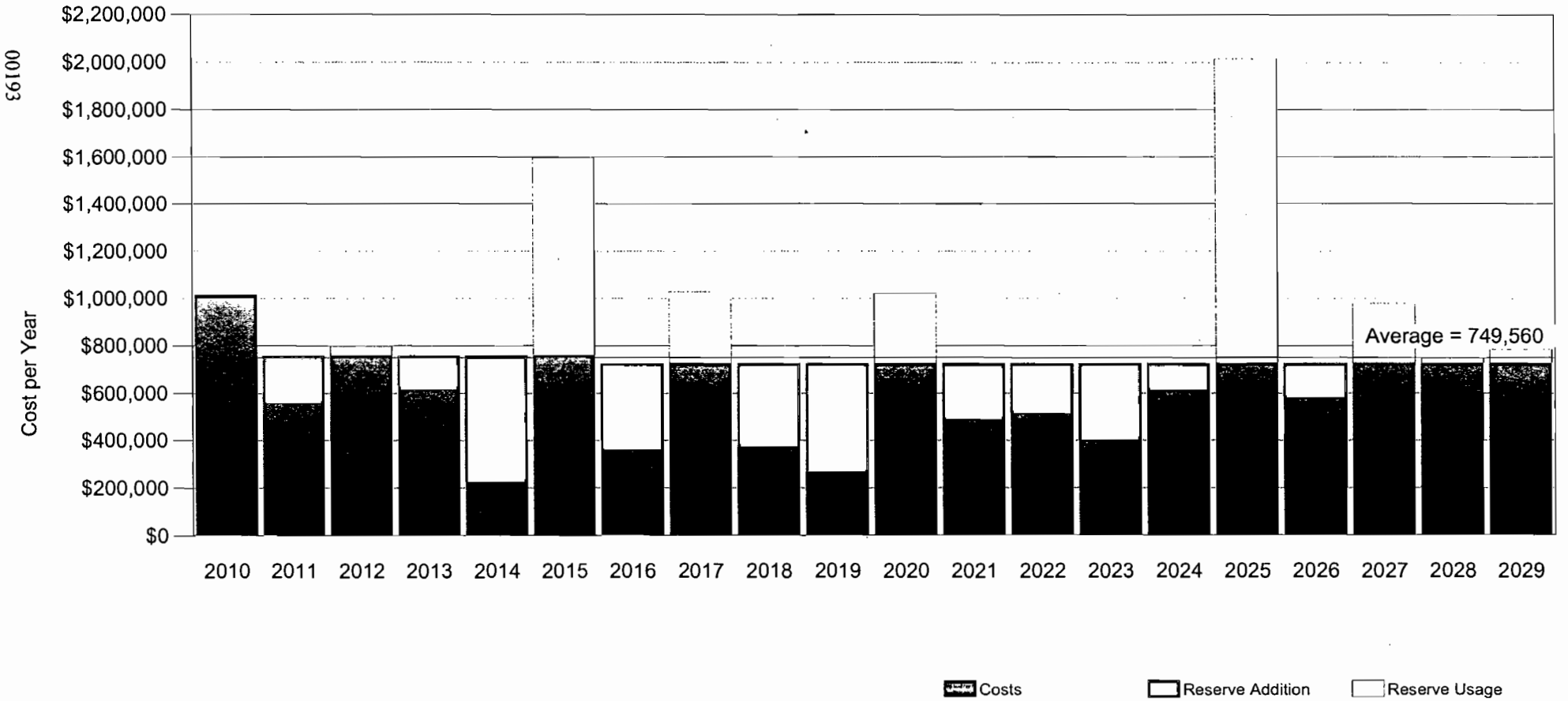
# Reserve Budget Analysis

**All Budgets**
**Chart I-D.1**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

| Report Parameters | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Minimum unit cost:** | 0.00 |



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## II. UNIT COST REPORTS

This series of unit cost reports may be viewed "with or without allocation." The allocation feature allows for any number of non-revenue Budget Reports (such as a site improvement budget or a central plant that supports multiple buildings) to be prorated over any number of revenue budgets (such as the budgets for various income-producing apartment buildings). This allows developing the total built-up unit costs for each revenue Budget when there are other non-revenue budgets to be shared. Allocation can be done on a per unit, per square foot, or equal percentages basis over any combination of Budgets.

**Annual Budget per Unit without Allocation Table II-A.1and with Allocation Table II-A.2:** A table report of each Budget Report listing the dollars per year per unit, the total term unit costs, and the average annual unit costs for a specified report term.

**Annual Reserve per Unit without Allocation Chart II-A.1 and with Allocation Chart II-A.2:** A bar chart report of the total average annual unit costs of each Budget Report over the specified report term.

**Annual Reserve per SF without Allocation Table II-B.1 and with Allocation Table II-B.2:** A table report of each Budget Report listing the dollars per year per SF, the total term SF costs, and the average annual SF costs for the specified report term.

**Annual Reserve per SF without Allocation Chart II-B.1 and with Allocation Chart II-B.2:** This bar chart report displays the total average annual SF costs of each Budget Report over the specified report term.

**Cost per Unit without Allocation Chart II-C.1 and with Allocation Chart II-C.2:** This bar chart report displays the total per unit costs over the specified report term of each Budget Report.

**Total Cost per SF without Allocation Chart II-D.1 and with Allocation Chart II-D.2:** This bar chart report displays the total per SF costs over the specified report term of each Budget Report.

# Total Cost Per Unit Per Year (with location)

All Budgets
Chart II-A

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | |
|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense |
| **Report Term:** | 20 years | **Divisions:** | All |
| **Inflation:** | 3.00% | **Minimum unit cost:** | 0.00 |
| **Area Type:** | Gross SF | | |
| **Classifications:** | CAP, REP, IMP | | |

Allocation Basis: Per Square Foot
The data for each allocated budget has been adjusted for its prorata share of the non-allocated budget per the above described Allocation Basis.



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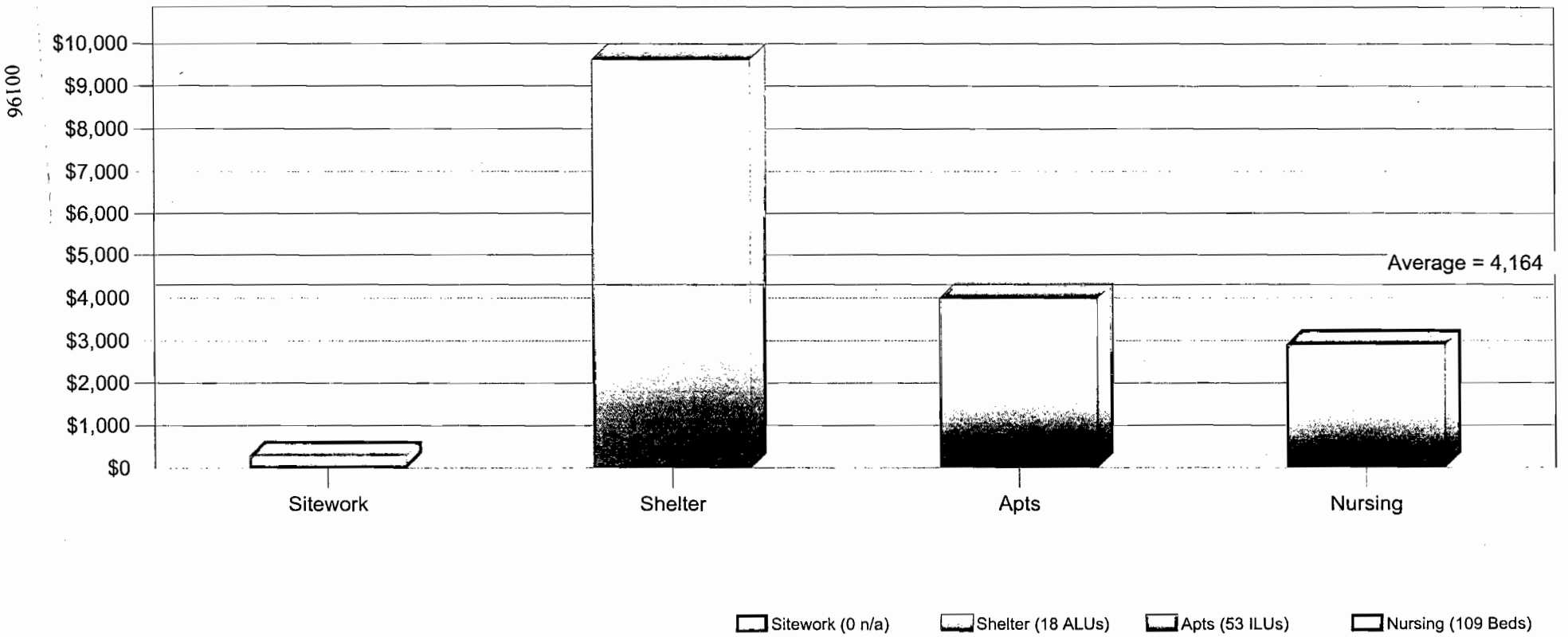
# Total Cost Per Unit Per Year (without location)

All Budgets
Chart II-A

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

| Report Parameters | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Minimum unit cost:** | 0.00 |



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# Total Cost Per SF Per Year (with Allocation)

**All Budgets**
**Chart II-B.2**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

| Report Parameters | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Minimum unit cost:** | 0.00 |

Allocation Basis: Per Square Foot
The data for each allocated budget has been adjusted for its prorata share of the non-allocated budget per the above described Allocation Basis.



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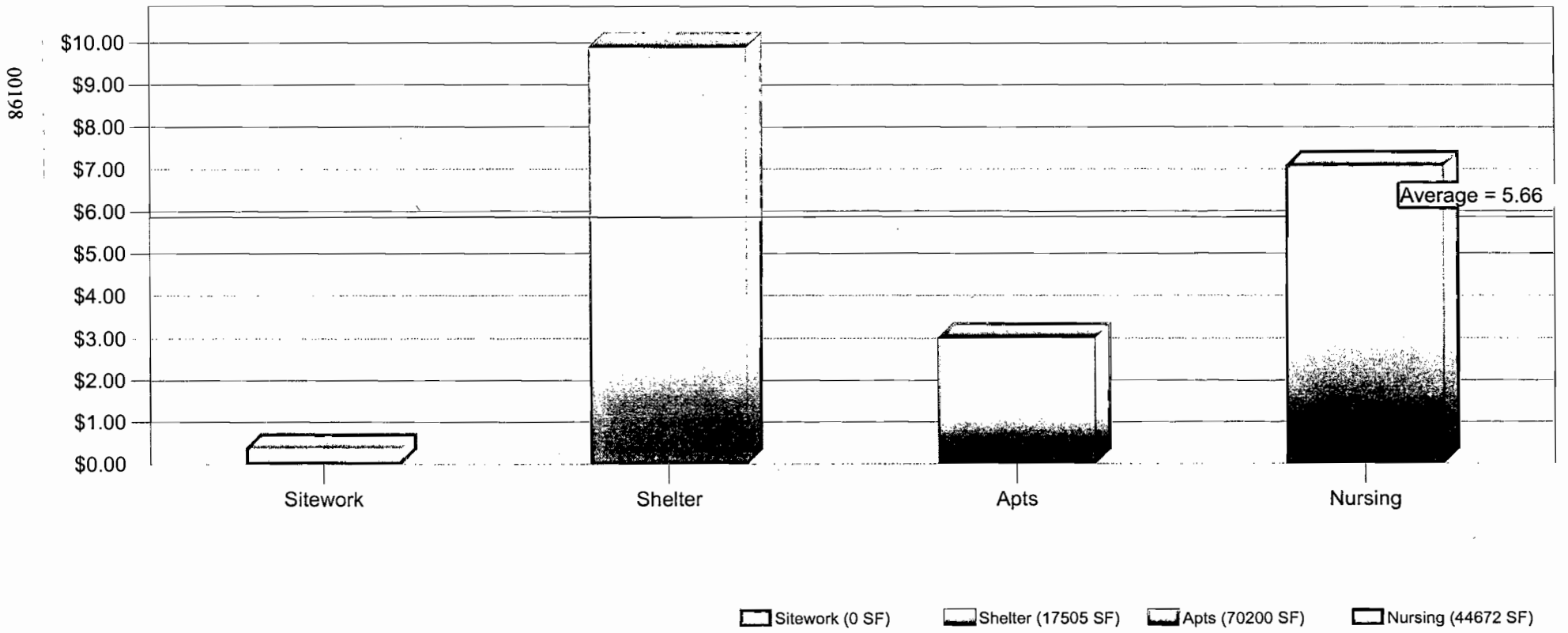
# Total Cost Per SF Per Year (without Relocation)

**All Budgets**
**Chart II-B.1**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

| Report Parameters | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Minimum unit cost:** | 0.00 |



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## III. CATEGORY REPORTS

This report series assists the user in capitalizing on collective purchasing opportunities. The reports present each individual Budget Report totals and subtotals by categories, and percentages of division totals.

**Budgets by Categories Table III:** This reports the total budget amounts over the specified report term broken out by Division and Cost Category under a column for each Budget Report. The percent of replacement cost is calculated for each Budget total. This report is a powerful tool to be used for collective purchasing analysis. The User can group any number of years and view collective purchasing opportunities for specific budget categories for the various buildings or properties.

**Division Totals Chart III-A:** This pie chart displays budget totals as percentages by Division.

**Total Budget for Each Budget Chart III-B:** A bar chart showing budget totals over a specified term of years for each Budget Report.

**rt Parameters**

| | |
|---|---|
| Begin Year: | 2010 |
| Report Term: | 20 years |
| Inflation: | 3.00% |
| Area Type: | Gross SF |
| Classifications: | CAP, REP, IMP |

**Report Parameters**

| | |
|---|---|
| Budget Types: | Expense |
| Divisions: | All |
| Minimum unit cost: | 0.00 |

Expense

| | | | Sitework | Shelter | Apts | Nursing | Division Total |
|---|---|---|---|---|---|---|---|
| | 02.01 | Landscape & Hardscape | 34,584 | | | | 34,584 |
| | 02.03 | Paving | 136,882 | | | | 136,882 |
| | 02.04 | Site Concrete | 22,719 | | | | 22,719 |
| | 02.05 | Retaining Walls | 1,199 | | | | 1,199 |
| | 02.06 | Site Rails, Fencing & Gates | 15,474 | | | | 15,474 |
| | 02.07 | Site Lighting | 27,625 | | | | 27,625 |
| | 02.08 | Storm Drainage | 3,957 | | | | 3,957 |
| | 02.09 | Site Utilities | 13,032 | | | | 13,032 |
| | 02.10 | Signage | 28,560 | | | | 28,560 |
| | 02.13 | Amenities | 36,571 | | | | 36,571 |
| | 03.04 | Thermal & Moisture Protection Systems | | 260,301 | 38,365 | 305,651 | 604,317 |
| | 03.05 | Exterior Wall & Finish Systems | | 450 | 73,349 | 3,031 | 76,829 |
| | 03.07 | Doors, Windows & Hardware | | 112,535 | 279,543 | 187,781 | 579,859 |
| | 03.08 | Vertical Circulation | | 123,696 | 275,970 | 242,607 | 642,273 |
| | 03.09 | Exterior Paint & Caulk | 5,190 | 79,736 | 19,771 | 16,581 | 121,278 |
| | 03.10 | Specials | 14,545 | 8,274 | 16,691 | 57,940 | 97,450 |
| | 03.11 | Balconies, Elevated Walkways & Rails | | | 14,054 | | 14,054 |
| | 03.12 | Appliances | | 3,332 | 66,189 | 6,140 | 75,661 |
| | 04.01 | HVAC | | 347,165 | 428,706 | 574,851 | 1,350,722 |
| | 04.02 | Plumbing & Plumbing Fixtures | | 161,350 | 87,665 | 32,739 | 281,754 |
| | 04.03 | Fire Sprinkler & Life Safety Systems | | 156,777 | 376,359 | 218,186 | 751,322 |
| | 04.04 | Electrical | | 321,728 | 552,739 | 1,093,023 | 1,967,490 |
| | 05.02 | Common Area Floor Finishes | | 19,630 | 243,598 | 120,937 | 384,165 |
| | 05.03 | Common Area Paint & Wall Finishes | | 38,547 | 78,285 | 69,585 | 186,416 |
| | 05.04 | Common Area Ceiling Systems | | 28,518 | 68,794 | 166,356 | 263,668 |
| | 05.05 | Common Area Cabinets, Tops & Millwork | | | | 132,343 | 132,343 |
| | 06.01 | Unit Refresh Allowance | | 32,244 | 698,830 | 197,066 | 927,940 |
| | 06.02 | Unit Floor Finishes | | 44,315 | 52,147 | 27,134 | 123,596 |
| | 06.03 | Unit Paint & Wall Finishes | | 16,127 | | 33,598 | 49,725 |
| | 06.04 | Unit Ceiling Systems | | 14,972 | | 166,356 | 181,328 |
| | 06.05 | Unit MEP | | 9,773 | 192,446 | 25,650 | 227,869 |
| | 06.06 | Unit Cabinets, Counter Tops & Millwork | | 33,752 | 65,726 | | 99,479 |
| | 06.07 | Unit Doors & Hardware | | | 22,491 | | 22,491 |
| | 06.08 | Unit Specials | | 34,831 | 45,114 | 112,555 | 192,501 |
| | 06.09 | Unit Appliances | | | 147,931 | | 147,931 |
| | 07.02 | Furnishings | | 121,856 | | 254,921 | 376,777 |
| | 07.03 | Interior Signage, Art & Accessories | | | 11,593 | | 11,593 |
| | 07.04 | Window Coverings | | 111,627 | 153,545 | 240,964 | 506,036 |
| | 07.06 | Entertainment, Communication & Security System | | 69,032 | 58,759 | 231,062 | 358,852 |
| | 07.07 | Office Systems | | 613,892 | 32,657 | 1,054,526 | 1,701,075 |
| | 07.08 | Vehicles | 645,602 | | | | 645,602 |
| | 07.10 | Kitchen Equipment | | 382,523 | 80,478 | 63,257 | 526,259 |
| | 07.11 | Laundry Equipment | | | | 89,369 | 89,369 |

00200



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| | | | [redacted] | | | [redacted] | |
|---|---|---|---|---|---|---|---|
| | | | Sitework | Shelter | Apts | Nursing | Division Total |
| | 07.12 | Health Care & Nursing Equipment | | 130,702 | | 548,669 | 679,372 |
| | 07.13 | Beauty Shop, Store, Bank, Library & Other | | 13,032 | | | 13,032 |
| | 07.14 | Housekeeping Equipment | | 118,544 | 20,301 | 47,780 | 186,626 |
| | 07.15 | Pool & Fitness Equipment | | 53,694 | 19,747 | | 73,440 |
| | | Expense Total | 985,940 | 3,462,956 | 4,221,643 | 6,320,657 | 14,991,196 |

See Charts III-A, III-B

00201



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# Division Totals

**All Budgets**
**Chart III-A**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

| Report Parameters | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Minimum unit cost:** | 0.00 |

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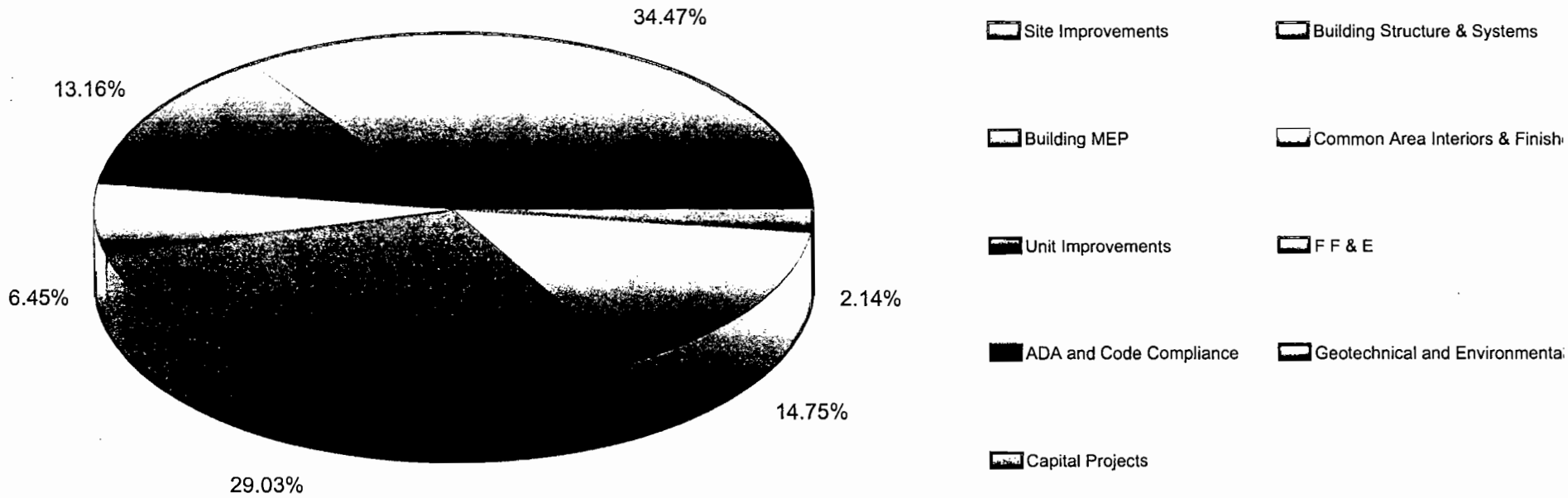




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## VII. BUDGET REPORTS

**Annual Budget Totals Table VII-A:** This reports each budget item in each applicable year over the specified term of years as calculated by one of the various pre-formulated forecasting methods. Cost totals and subtotals are provided for each Division Group, Division, and Cost Category as specified. Totals for all budget items in each year are displayed across the bottom and totals for each budget item in the last column.

**Annual Budget Totals Chart VII-A.1:** Chart VII-A.1 shows a total cost of all budget items combined each year into a single bar chart for each year, for the term of the report; a budget profile of the subject of the Budget Report. The term average is displayed as a graph line, optional.

**Annual Budget Totals – Comparison Chart VII-A.2:** This is a great benchmarking report that allows viewing a bar chart of each Budget Report in each year. The User can immediately identify the year and the specific Budget Reports that have the most impact to the total budget.

**Item Comments Report Table VII-B:** Table VII-B is a Budget Report listing just budget items with associated comments and photograph references from each; no cost or forecasting data is included. The User may call up any combination of Budget Reports combined into one report. When applicable, the recommended improvements associated with LEED-EBOM are included with this report.

**Facility Condition Index (FCI) Chart VII-C.1:** This charts the relative physical condition of a building, independent of construction type or cost. The FCI is expressed as a ratio of the cost to remedy existing deficiencies plus the cost of capital replacement, divided by the current replacement value. The FCI is represented on a logarithmic scale from zero to one, where any value beyond this range exceeds the total cost of current replacement; an index value of 1.0 is equivalent to 100% current replacement cost. Data is displayed as a single bar chart per year for the term of the report with an average graph line. The User may call up any combination of Budget Reports combined into one bar chart per year.

**Facility Condition Index (FCI) - Comparison Chart VII-C.2:** This is the same report as Chart VII-C.1 except this report displays the FCI for each year for each Budget Report for the specified term of the report vs. displaying one Budget Report only.

**Reserve Budget Analysis Chart VII-D:** This budget shows totals as displayed by "Chart I-B-Budget Totals", amortized to determine the varying reserve requirements over a term of years necessary to meet reserve fund requirements for the specified report term. The red bars are the funding reserves required in any given year beyond the reserves used as displayed in blue; the red reserves offset the reserve usage displayed in gray. The User may call up any combination of Budget Reports combined into one bar chart per year.

FacilityForecast
Forecasting the Future

# Annual Budget Totals

Sitework
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

**Report Parameters**

| | | | |
|---|---|---|---|
| Begin Year: | 2010 | Budget Types: | Expense |
| Report Term: | 20 years | Divisions: | All |
| Inflation: | 3.00% | Minimum unit cost: | 0.00 |
| Area Type: | Gross SF | | |
| Classifications: | CAP, REP, IMP | | |

**Report Parameters**

| | |
|---|---|
| Units: | |
| Area: | |
| Year: | 2000 |
| Modified: | 15 Sep 2010 |

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Rem Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 02.01 | Landscape & Hardscape | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 02.01 | Landscape rework & upgrades | 2010 | 5 | | 1 | Allowance | 5,000.00 | 5,000 | Contract | CAP | 5,000 | | | | | 5,799 | | | | | 6,720 | | | | | 7,790 | | | | 25,309 |
| 2 | 02.01 | Prune trees | 2010 | 3 | | 1 | Allowance | 1,100.00 | 1,100 | Contract | CAP | 1,000 | | | 1,093 | | | 1,184 | | | 1,305 | | | 1,426 | | | 1,555 | | | 1,702 | | 9,278 |
| | | | | | | | | | | | Expense Landscape & Hardscape Subtotal | 6,000 | | | 1,093 | | 5,799 | 1,184 | | | 1,305 | 6,720 | | 1,426 | | | 9,345 | | | 1,702 | | 34,584 |
| 3 | 02.03 | Paving | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 02.03 | Repair asphalt | 2010 | 5 | | 1 | ls | 2,000.00 | 2,000 | Contract | CAP | 2,000 | | | | | 2,319 | | | | | 2,688 | | | | | 3,116 | | | | 10,122 |
| 4 | 02.03 | Seal coat & re-stripe asphalt pavement | 2010 | 7 | | 9,155 | sy | 1.35 | 12,359 | Contract | CAP | 12,359 | | | | | | | | | | | | | | | | | | | | 12,359 |
| 5 | 02.03 | Permafilla overlay of drives and parking | 2017 | 23 | 7 | 9,155 | sy | 8.50 | 77,818 | Contract | CAP | | | | | | | | 85,708 | | | | | | | | | | | | | 85,708 |
| 6 | 02.03 | Seal coat & re-stripe asphalt pavement | 2024 | 7 | 14 | 9,155 | sy | 1.73 | 12,359 | Contract | CAP | | | | | | | | | | | | | | | 16,624 | | | | | | 16,694 |
| | | | | | | | | | | | Expense Paving Subtotal | 14,359 | | | | | 2,319 | | 85,708 | | | 2,688 | | | 16,694 | 3,116 | | | | | 133,882 |
| 7 | 02.04 | Site Concrete | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | 02.04 | Repair concrete walks to eliminate tripping hazards | 2010 | 10 | | 1 | ls | 700.00 | 700 | Contract | CAP | 700 | | | | | | | | | | 841 | | | | | | | | | | 1,541 |
| 8 | 02.04 | Miscellaneous site concrete repairs (incl wheel stops) | 2014 | 3 | 4 | 1 | ls | 2,000.00 | 2,000 | Contract | CAP | | | | | 2,251 | | | 2,460 | | | 2,688 | | | 2,937 | | | 3,209 | | 3,507 | 17,052 |
| 9 | 02.04 | Clean & re-caulk joints in sidewalks | 2010 | 5 | | 650 | lf | 1.60 | 1,040 | Contract | CAP | 1,040 | | | | | | | | 1,317 | | | | | | | | 1,608 | | | 4,026 |
| | | | | | | | | | | | Expense Site Concrete Subtotal | 1,740 | | | | 2,251 | | | 2,460 | 1,317 | | 3,529 | | | 2,937 | | | 4,816 | | 3,507 | 22,719 |
| 8 | 02.05 | Retaining Walls | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | 02.05 | Repair/caulk joints in concrete at retaining walls | 2010 | 7 | | 183 | lf | 1.75 | 320 | Contract | CAP | 320 | | | | | | | 394 | | | | | | | 484 | | | | | | 1,199 |
| | | | | | | | | | | | Expense Retaining Walls Subtotal | 320 | | | | | | | 394 | | | | | | | 484 | | | | | | 1,199 |
| 9 | 02.06 | Site Rails, Fencing & Gates | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 | 02.06 | Replace wood fence around cooling tower and dumpsters | 2013 | 15 | 3 | 65 | lf | 22.00 | 1,430 | Contract | CAP | | | | 1,583 | | | | | | | | | | | | | | | 2,434 | | 3,997 |
| 12 | 02.06 | Replace 5' chain link fence | 2015 | 25 | 5 | 650 | lf | 13.00 | 8,900 | Contract | CAP | | | | | | 11,477 | | | | | | | | | | | | | | | 11,477 |
| | | | | | | | | | | | Expense Site Rails, Fencing & Gates Subtotal | | | | 1,583 | | 11,477 | | | | | | | | | | | | 2,434 | | 15,474 |
| 10 | 02.07 | Site Lighting | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | 02.07 | Pole lights with spherical globes | 1995 | 25 | 10 | 2 | ea | 1,500.00 | 3,000 | Contract | CAP | | | | | | | | | | | 4,032 | | | | | | | | | | 4,032 |
| 14 | 02.07 | Cobra head pole lights | 1995 | 25 | 10 | 5 | ea | 425.00 | 2,125 | Contract | CAP | | | | | | | | | | | 2,856 | | | | | | | | | | 2,856 |
| 15 | 02.07 | Shoe box style pole lights | 1995 | 25 | 10 | 5 | ea | 900.00 | 4,500 | Contract | CAP | | | | | | | | | | | 6,048 | | | | | | | | | | 6,048 |
| 16 | 02.07 | Bollard lights | 1995 | 25 | 10 | 10 | ea | 900.00 | 9,000 | Contract | CAP | | | | | | | | | | | 12,095 | | | | | | | | | | 12,095 |
| 17 | 02.07 | Up light at monument sign | 1997 | 10 | 7 | 1 | ea | 900.00 | 900 | Contract | CAP | | | | | | | | 1,107 | | | | | | | | | | 1,488 | | | 2,594 |
| | | | | | | | | | | | Expense Site Lighting Subtotal | | | | | | | | 1,107 | | | 26,030 | | | | | | 1,488 | | | 27,535 |
| | 02.08 | Storm Drainage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | 02.08 | Clean out manholes & inlet structures | 2014 | 10 | 4 | 1 | ls | 1,500.00 | 1,500 | Contract | CAP | | | | | 1,688 | | | | | | | | | | 2,269 | | | | | | 3,957 |
| | | | | | | | | | | | Expense Storm Drainage Subtotal | | | | | 1,688 | | | | | | | | | 2,269 | | | | | | 3,957 |
| | 02.09 | Site Utilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19 | 02.09 | Maintenance site utility repairs | 2011 | 6 | 1 | 1 | Allowance | 2,500.00 | 2,500 | Contract | CAP | | 2,575 | | | | | 2,935 | | | | | | 3,461 | | | | 4,012 | | | | 13,032 |
| | | | | | | | | | | | Expense Site Utilities Subtotal | | 2,575 | | | | | 2,935 | | | | | 3,461 | | | | 4,012 | | | | 13,032 |
| | 02.10 | Signage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 | 02.10 | Replace traffic control/parking signage | 2012 | 10 | 2 | 1 | ls | 5,000.00 | 5,000 | Contract | CAP | | | | 5,305 | | | | | | | | | 7,129 | | | | | | | | 12,433 |
| 21 | 02.10 | Replace monument signage | 2020 | 23 | 10 | 3 | ea | 4,000.00 | 12,000 | Contract | CAP | | | | | | | | | | | 16,127 | | | | | | | | | | 16,127 |
| | | | | | | | | | | | Expense Signage Subtotal | | | | 5,305 | | | | | | 16,127 | | 7,129 | | | | | | | | 28,560 |
| | 02.13 | Amenities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | 02.13 | Bird habitat station | 1995 | 25 | 10 | 1 | ea | 1,500.00 | 1,000 | Contract | CAP | | | | | | | | | | | 1,344 | | | | | | | | | | 1,344 |
| 23 | 02.13 | Gazebo | 1999 | 15 | 5 | 1 | ea | 4,500.00 | 4,500 | Contract | CAP | | | | | | 5,217 | | | | | | | | | | | | | | | 5,217 |
| 24 | 02.13 | Benches | 2015 | 10 | 5 | 4 | ea | 650.00 | 2,250 | Contract | CAP | | | | | | 2,560 | | | | | | | | | | | 3,429 | | | | 5,976 |
| 25 | 02.13 | Replace out buildings used for storage | 1995 | 20 | 5 | 2 | ea | 4,000.00 | 8,000 | Contract | CAP | | | | | | 9,274 | | | | | | | | | | | | | | | 9,274 |
| 26 | 02.13 | Replace garage used for storage | 2017 | 20 | 7 | 1 | ea | 12,000.00 | 12,000 | Contract | CAP | | | | | | | | 14,758 | | | | | | | | | | | | | 14,758 |
| | | | | | | | | | | | Expense Amenities Subtotal | | | | | | 17,041 | | 14,758 | | | 1,344 | | | | | 3,429 | | | | 38,571 |
| | 03.09 | Exterior Paint & Caulk | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 27 | 03.09 | Paint light poles | 2010 | 7 | | 1 | lot | 500.00 | 500 | Contract | CAP | 500 | | | | | | | 615 | | | | | | | 756 | | | | | | 1,871 |



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# Annual Budget Totals

Sitework
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 28 | 03.09 | Paint handrails | 1997 | 7 | 5 | 450 | lf | 1.70 | 765 | Contract | CAP | | | | | | 637 | | | | | | | 1,091 | | | | | | | 1,341 | 3,319 |
| | | | | | | | | | | | Expense Exterior Paint & Caulk Subtotal | 800 | | | | | 887 | | 615 | | | | | 1,891 | | 758 | | | | | 1,341 | 6,190 |
| | 03.10 | Specials | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 29 | 03.10 | Flagpole | 1937 | 40 | 17 | 2 | ea | 4,400.00 | 8,800 | Contract | CAP | | | | | | | | | | | | | | | | | | 14,545 | | | 14,545 |
| | | | | | | | | | | | Expense Specials Subtotal | | | | | | | | | | | | | | | | | | 14,545 | | | 14,545 |
| | 07.05 | Vehicles | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30 | 07.05 | Ford E-350 bus | 2012 | 8 | 2 | 1 | ea | 75,000.00 | 75,000 | Contract | CAP | | | 79,568 | | | | | | 95,008 | | | | | | 113,444 | | | | | | 288,019 |
| 31 | 07.05 | Ford Econoline van | 2010 | 6 | | 1 | ea | 31,000.00 | 35,300 | Contract | CAP | 35,070 | | | | | | 41,782 | | | | | | 49,902 | | | | | | 59,565 | | 186,279 |
| 32 | 07.05 | Buick 2005 | 2015 | 10 | 3 | 1 | ea | 25,000.00 | 25,000 | Contract | CAP | | | | 27,318 | | | | | | | | | | 30,713 | | | | | | | 94,032 |
| 33 | 07.05 | Chevy 2005 | 2013 | 10 | 3 | 1 | ea | 25,000.00 | 25,000 | Contract | CAP | | | | 27,318 | | | | | | | | | | 30,713 | | | | | | | 94,032 |
| 34 | 07.05 | Lawn tractor John Deer #318 | 1997 | 10 | 7 | 1 | ea | 13,000.00 | 13,000 | Contract | CAP | | | | | | | | 16,448 | | | | | | | | | | 24,793 | | | 43,241 |
| | | | | | | | | | | | Expense Vehicles Subtotal | 35,000 | | 79,568 | 54,636 | | | 41,782 | 16,448 | 95,008 | | | | 49,902 | 73,431 | 113,444 | | | 24,793 | 59,565 | | 640,603 |
| | | | | | | | | | | | Expense Total | 57,820 | 2,575 | 84,873 | 57,292 | 3,939 | 37,820 | 45,971 | 133,496 | 96,325 | 1,305 | 55,537 | 3,461 | 69,547 | 76,284 | 135,548 | 15,881 | 8,890 | 40,836 | 63,722 | 4,848 | 885,840 |
| | | | | | | | | | | | Inflation | | 2.00% | 6.09% | 9.27% | 12.55% | 15.93% | 19.41% | 22.99% | 26.68% | 30.48% | 34.39% | 38.42% | 42.58% | 46.85% | 51.26% | 55.80% | 60.47% | 65.26% | 70.24% | 75.35% | |

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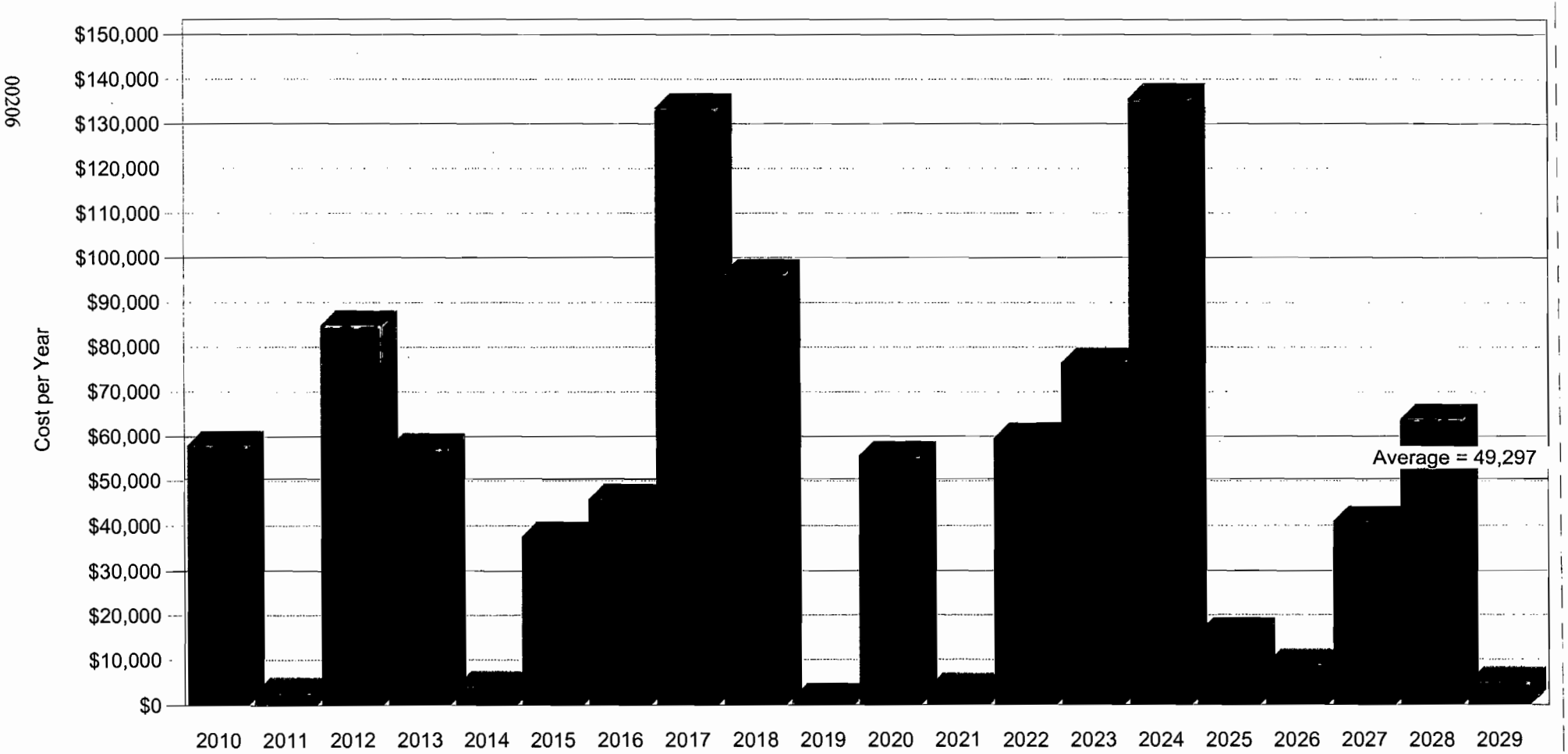
# Annual Budget Totals – Tc Property

**2010-002: St Paul's Home, Belleville, IL**

**Sitework**
**Chart VII-A.1**

| Report Parameters | | Report Parameters | | | |
|---|---|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense | **Units:** | |
| **Report Term:** | 20 years | **Divisions:** | All | **Area:** | |
| **Inflation:** | 3.00% | **Minimum unit cost:** | 0.00 | **Year:** | 2000 |
| **Area Type:** | Gross SF | | | **Modified:** | 15 Sep 2010 |
| **Classifications:** | CAP, REP, IMP | | | | |



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# Annual Budget Totals

Shelter Care
Table VII-A

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | | | |
|---|---|---|---|---|---|
| Begin Year: | 2010 | Budget Types: | Expense | Units: | 18 ALUs |
| Report Term: | 20 years | Divisions: | All | Area: | 17,505 SF |
| Inflation: | 3.00% | Minimum unit cost: | 0.00 | Year: | 1985 |
| Area Type: | Gross SF | | | Modified: | 23 Sep 2010 |
| Classifications: | CAP, REP, IMP | | | | |

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 03.04 | Thermal & Moisture Protection Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 03.04 | Supplement attic insulation | 1987 | 20 | 17 | 3,500 | sf | 0.38 | 1,330 | Contract | CAP | | | | | | | | | | | | | | | | | | 2,100 | | 2,100 |
| 2 | 03.04 | Roof tune-up and misc repairs | 2010 | 3 | | 22,196 | sf | 0.05 | 1,110 | Contract | CAP | 1,110 | | | 1,315 | | | 1,325 | | | 1,448 | | | 1,582 | | | 1,729 | | | 1,889 | | 10,298 |
| 3 | 03.04 | Replace rusty metal coping at dining room roof | 2010 | 20 | | 200 | lf | 10.50 | 2,100 | Contract | CAP | 2,100 | | | | | | | | | | | | | | | | | | | | 2,100 |
| 4 | 03.04 | EPDM membrane, fully adhered Goodyear Versegard | 2006 | 20 | 16 | 840 | sf | 9.50 | 7,980 | Contract | CAP | | | | | | | | | | | | | | | | | 12,608 | | | | 12,608 |
| 5 | 03.04 | EPDM membrane roof, Carlisle fully adhered, 60 mil | 2005 | 20 | 15 | 7,374 | sf | 9.50 | 70,033 | Contract | CAP | | | | | | | | | | | | | | | | 102,140 | | | | | 102,140 |
| 6 | 03.04 | EPDM membrane roof, 60 mil, fully adhered | 2000 | 20 | 10 | 1,980 | sf | 9.50 | 18,810 | Contract | CAP | | | | | | | | | | | 25,279 | | | | | | | | | | 25,279 |
| 7 | 03.04 | Downspouts | 2000 | 20 | 10 | 56 | lf | 8.00 | 448 | Contract | CAP | | | | | | | | | | | 591 | | | | | | | | | | 591 |
| 8 | 03.04 | Downspouts | 1985 | 20 | 15 | 75 | lf | 8.00 | 600 | Contract | CAP | | | | | | | | | | | | | | | | 935 | | | | | 935 |
| 9 | 03.04 | Downspouts | 1985 | 20 | 15 | 40 | lf | 8.00 | 320 | Contract | CAP | | | | | | | | | | | | | | | | 498 | | | | | 498 |
| 10 | 03.04 | Built-up roof | 1995 | 20 | 5 | 1,420 | sf | 9.50 | 13,490 | Contract | CAP | | | | | | 15,839 | | | | | | | | | | | | | | | 15,839 |
| 11 | 03.04 | Ballasted EPDM membrane roof | 2000 | 20 | 10 | 2,835 | sf | 9.50 | 26,933 | Contract | CAP | | | | | | | | | | | 36,195 | | | | | | | | | | 36,195 |
| 12 | 03.04 | Ballasted built-up roof | 2000 | 20 | 10 | 2,394 | sf | 9.50 | 22,743 | Contract | CAP | | | | | | | | | | | 30,565 | | | | | | | | | | 30,565 |
| 13 | 03.04 | Asphalt shingles | 2000 | 20 | 10 | 3,757 | sf | 2.10 | 7,890 | Contract | CAP | | | | | | | | | | | 10,603 | | | | | | | | | | 10,603 |
| 14 | 03.04 | Asphalt shingles | 2005 | 20 | 15 | 1,056 | sf | 2.10 | 2,218 | Contract | CAP | | | | | | | | | | | | | | | | 3,455 | | | | | 3,455 |
| | | | | | | | | | Expense Thermal & Moisture Protection Systems Subtotal | | | 3,210 | | | 1,315 | | 15,839 | 1,325 | | 1,448 | 103,233 | | 1,582 | | | 115,755 | 12,608 | 2,100 | 1,889 | | 260,301 |
| | 03.05 | Exterior Wall & Finish Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15 | 03.05 | Repair brick at Kiln Wing | 2010 | | | 1 | ls | 450.00 | 450 | Contract | CAP | 450 | | | | | | | | | | | | | | | | | | | | 450 |
| | | | | | | | | | Expense Exterior Wall & Finish Systems Subtotal | | | 450 | | | | | | | | | | | | | | | | | | | | 450 |
| | 03.07 | Doors, Windows & Hardware | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16 | 03.07 | Single hung alum windows 36 x 54 | 2010 | 25 | | 26 | ea | 525.00 | 13,650 | Contract | CAP | 13,650 | | | | | | | | | | | | | | | | | | | | 13,650 |
| 17 | 03.07 | Single hung alum windows 36 x 54 | 2010 | 25 | | 40 | ea | 525.00 | 21,000 | Contract | CAP | 21,000 | | | | | | | | | | | | | | | | | | | | 21,000 |
| 18 | 03.07 | Replace fixed sash wood windows (2'-8" x 6'-0") | 2011 | 25 | 1 | 12 | ea | 815.00 | 9,780 | Contract | CAP | | 10,073 | | | | | | | | | | | | | | | | | | | 10,073 |
| 19 | 03.07 | Replace wood windows & trim (2'-10" x 6'-0") | 2010 | 25 | | 30 | ea | 525.00 | 15,750 | Contract | CAP | 15,750 | | | | | | | | | | | | | | | | | | | | 15,750 |
| 20 | 03.07 | Windows, single hung, alum, w/ storm windows | 2010 | 25 | | 6 | ea | 525.00 | 3,150 | Contract | CAP | 3,150 | | | | | | | | | | | | | | | | | | | | 3,150 |
| 21 | 03.07 | Windows, fixed sash wood approx 4' x 6' | 2010 | 25 | | 13 | ea | 1,000.00 | 13,000 | Contract | CAP | 13,000 | | | | | | | | | | | | | | | | | | | | 13,000 |
| 22 | 03.07 | Windows, alum, Casement 6' x 4' | 2000 | 25 | 15 | 2 | ea | 1,450.00 | 2,900 | Contract | CAP | | | | | | | | | | | | | | | | 4,367 | | | | | 4,367 |
| 23 | 03.07 | Single hung alum windows 36 x 54 | 2010 | 25 | | 7 | ea | 525.00 | 3,675 | Contract | CAP | 3,675 | | | | | | | | | | | | | | | | | | | | 3,675 |
| 24 | 03.07 | Wood door set in HM frame | 2011 | 25 | 1 | 1 | ea | 125.00 | 125 | Contract | CAP | | 129 | | | | | | | | | | | | | | | | | | | 129 |
| 25 | 03.07 | Hollow core flush doors at baths | 1985 | 20 | 5 | 13 | ea | 140.00 | 1,820 | Contract | CAP | 85 | 82 | 86 | 105 | 108 | 107 | 107 | 106 | 103 | 96 | 93 | 88 | 84 | 78 | 71 | 67 | 64 | 63 | 65 | 65 | 1,736 |
| 26 | 03.07 | Hollow core flush doors at baths | 1985 | 20 | 5 | 18 | ea | 140.00 | 2,520 | Contract | CAP | 142 | 170 | 186 | 200 | 205 | 205 | 186 | 186 | 169 | 149 | 129 | 108 | 89 | 72 | 59 | 46 | 42 | 39 | 38 | 44 | 2,469 |
| 27 | 03.07 | HM door & locknet | 2000 | 25 | 10 | 1 | ea | 565.00 | 565 | Contract | CAP | | | | | | | | | | | | | | | | 811 | | | | | 811 |
| 28 | 03.07 | HM door & locknet | 1975 | 25 | 15 | 1 | ea | 565.00 | 565 | Contract | CAP | | | | | | | | | | | | | | | | 811 | | | | | 811 |
| 29 | 03.07 | HM door & locknet | 1985 | 25 | 5 | 9 | ea | 565.00 | 5,085 | Contract | CAP | 761 | 784 | 310 | 329 | 337 | 342 | 349 | 334 | 323 | 309 | 293 | 277 | 262 | 250 | 242 | 230 | 241 | 250 | 265 | 280 | 5,776 |
| 30 | 03.07 | Fire doors (interior wood) | 2000 | 25 | 15 | 1 | pair | 1,070.00 | 1,070 | Contract | CAP | | | | | | | | | | | | | | | | 1,667 | | | | | 1,667 |
| 31 | 03.07 | Fire doors (interior wood) | 1955 | 25 | 20 | 2 | pair | 1,070.00 | 2,140 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 32 | 03.07 | Fire doors (interior wood) | 1990 | 25 | | 1 | pair | 1,070.00 | 1,070 | Contract | CAP | 1,070 | | | | | | | | | | | | | | | | | | | | 1,070 |
| 33 | 03.07 | Exterior doors 3-0 x 7-0 | 1988 | 20 | | 5 | ea | 900.00 | 4,500 | Contract | CAP | 4,500 | | | | | | | | | | | | | | | | | | | | 4,500 |
| 34 | 03.07 | Wood exterior doors w/ HM frame | 1995 | 25 | 5 | 2 | ea | 125.00 | 250 | Contract | CAP | | | | | | 290 | | | | | | | | | | | | | | | 290 |
| 35 | 03.07 | HM door & locknet | 1985 | 25 | 5 | 6 | ea | 565.00 | 3,390 | Contract | CAP | | | | | | 3,391 | | | | | | | | | | | | | | | 3,391 |
| 36 | 03.07 | Fire doors (interior wood) | 1975 | 25 | 5 | 1 | ea | 515.00 | 535 | Contract | CAP | | | | | | 620 | | | | | | | | | | | | | | | 620 |
| 37 | 03.07 | Unit entry doors | 1995 | 25 | 5 | 16 | ea | 310.00 | 4,960 | Contract | CAP | | | | | | 4,382 | | | | | | | | | | | | | | | 4,382 |
| | | | | | | | | | Expense Doors, Windows & Hardware Subtotal | | | 79,291 | 10,782 | 896 | 629 | 649 | 9,337 | 949 | 826 | 588 | 557 | 618 | 473 | 433 | 399 | 372 | 6,206 | 547 | 352 | 387 | 385 | 112,835 |
| | 03.08 | Vertical Circulation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 38 | 03.08 | Upgrade elevator cab finishes | 1988 | 20 | 15 | 1 | ls | 12,000.00 | 12,000 | Contract | CAP | | | | | | | | | | | | | | | | 18,606 | | | | | 18,606 |
| 39 | 03.08 | Modernize 2 stop hydraulic elevator | 1985 | 25 | | 1 | ea | 105,000.00 | 105,000 | Contract | CAP | 105,000 | | | | | | | | | | | | | | | | | | | | 105,000 |
| | | | | | | | | | Expense Vertical Circulation Subtotal | | | 105,000 | | | | | | | | | | | | | | | 18,606 | | | | | 123,606 |
| | 03.09 | Exterior Paint & Caulk | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 40 | 03.09 | Paint gas pipe exposed on roof & gas trap at rear of bldg | 2010 | 5 | | 1 | ls | 200.00 | 200 | In-house | CAP | 200 | | | | | 232 | | | | | 269 | | | | | 312 | | | | | 1,012 |
| 41 | 03.09 | Clean and paint brick lintels | 2010 | 7 | | 1 | ls | 750.00 | 750 | In-house | CAP | 750 | | | | | | | 822 | | | | | | | | 1,134 | | | | | 2,807 |
| 42 | 03.09 | Clean and paint wood windows & trim | 2010 | 5 | | 1 | ls | 15,000.00 | 15,000 | Contract | CAP | 15,000 | | | | | 17,389 | | | | | 20,159 | | | | | 23,370 | | | | | 75,917 |
| | | | | | | | | | Expense Exterior Paint & Caulk Subtotal | | | 15,950 | | | | | 17,621 | | 822 | | | 20,428 | | | | 1,134 | 23,681 | | | | | 79,736 |
| | 03.10 | Specials | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

FacilityForecast
Forecasting the Future

# Annual Budget Totals

Shelter Care
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 43 | 03.10 | Common area toilet partitions | 1990 | 15 | 10 | 6 | ea | 750.00 | 4,500 | Contract | CAP | | | | | | | | | | | 6,048 | | | | | | | | | | 6,048 |
| 44 | 03.10 | Common area toilet accessories | 1990 | 10 | | 4 | sets | 100.00 | 400 | Contract | CAP | 400 | | | | | | | | | | 538 | | | | | | | | | | 938 |
| 45 | 03.10 | Awning over doors | 2000 | 10 | | 2 | ea | 275.00 | 550 | Contract | CAP | 550 | | | | | | | | | | 739 | | | | | | | | | | 1,289 |
| | | | | | | | | | | Expense Specials Subtotal | | 950 | | | | | | | | | | 7,324 | | | | | | | | | | 8,274 |
| | 03.12 | Appliances | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 46 | 03.12 | Refrig (residential) | 1995 | 15 | 5 | 6 | ea | 479.00 | 2,874 | Contract | CAP | | | | | | 3,332 | | | | | | | | | | | | | | | 3,332 |
| | | | | | | | | | | Expense Appliances Subtotal | | | | | | | 3,332 | | | | | | | | | | | | | | | 3,332 |
| | 04.01 | HVAC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.01 | Kitchen grease hood exhaust fan | 1997 | 20 | 7 | 1 | ea | 7,150.00 | 7,150 | Contract | CAP | | | | | | | | 8,794 | | | | | | | | | | | | | 8,794 |
| | 04.01 | Dishwasher exhaust fan (side wall) | 1997 | 20 | 7 | 1 | ea | 4,700.00 | 4,700 | Contract | CAP | | | | | | | | 5,780 | | | | | | | | | | | | | 5,780 |
| | 04.01 | Replace thermostats | 1997 | 20 | 7 | 25 | ea | 75.00 | 1,875 | Contract | CAP | | | | | | | | 2,306 | | | | | | | | | | | | | 2,306 |
| | 04.01 | Replace chilled/hot water piping | 1977 | 40 | 27 | 17,605 | lf | 2.25 | 39,389 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| | 04.01 | Comb fins on rooftop HVAC units | 1997 | 5 | 2 | 1 | ls | 50.00 | 50 | In-house | CAP | | | 63 | | | | | 61 | | | | | 71 | | | | | 83 | | | 263 |
| | 04.01 | Window AC unit | 1998 | 20 | 6 | 16 | ea | 441.00 | 7,056 | Contract | CAP | 191 | 272 | 387 | 498 | 603 | 691 | 749 | 773 | 759 | 714 | 645 | 563 | 480 | 405 | 346 | 310 | 299 | 313 | 351 | 410 | 9,768 |
| | 04.01 | Window AC unit | 1998 | 20 | 8 | 2 | ea | 441.00 | 882 | Contract | CAP | 24 | 35 | 40 | 62 | 75 | 86 | 94 | 97 | 95 | 89 | 81 | 70 | 60 | 51 | 43 | 39 | 37 | 39 | 44 | 51 | 1,221 |
| | 04.01 | Thru wall PTAC units | 1995 | 10 | 5 | 27 | ea | 1,050.00 | 28,350 | Contract | CAP | 2,781 | 2,884 | 2,984 | 3,079 | 3,194 | 3,305 | 3,411 | 3,510 | 3,608 | 3,702 | 3,804 | 3,912 | 4,029 | 4,153 | 4,282 | 4,416 | 4,552 | 4,690 | 4,831 | 4,974 | 70,061 |
| | 04.01 | Rooftop condenser HAUC 508 G Trane | 2000 | 15 | 6 | 1 | ea | 5,500.00 | 5,500 | Contract | CAP | | | | | | 6,378 | | | | | | | | | | | | | | | 6,378 |
| | 04.01 | Kitchen make up air unit Reznor | 2012 | 25 | 2 | 1 | ea | 9,600.00 | 9,600 | Contract | CAP | | | 10,079 | | | | | | | | | | | | | | | | | | 10,079 |
| | 04.01 | Hydronic heat cabinet 4' | 1955 | 25 | 20 | 16 | ea | 365.00 | 5,840 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| | 04.01 | Hydronic heat cabinet 2' | 1955 | 25 | 20 | 5 | ea | 220.00 | 1,100 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| | 04.01 | Hydronic cabinet heater | 1985 | 25 | | 8 | lf | 292.00 | 2,336 | Contract | CAP | 2,336 | | | | | | | | | | | | | | | | | | | | 2,336 |
| | 04.01 | Hydronic baseboard heat | 1955 | 25 | 20 | 80 | lf | 292.00 | 23,360 | Contract | CAP | 938 | 915 | 856 | 825 | 799 | 788 | 797 | 820 | 875 | 944 | 1,030 | 1,130 | 1,241 | 1,359 | 1,478 | 1,595 | 1,704 | 1,803 | 1,887 | 1,965 | 23,764 |
| | 04.01 | Heat/AC SFHA 1003 H Trane Shelter dining | 1990 | 20 | | 1 | ea | 15,000.00 | 15,000 | Contract | CAP | 15,000 | | | | | | | | | | | | | | | | | | | | 15,000 |
| | 04.01 | Heat/AC CUR110GN21 Trane (kitchen) | 1990 | 20 | | 1 | ea | 22,000.00 | 22,000 | Contract | CAP | 22,000 | | | | | | | | | | | | | | | | | | | | 22,000 |
| | 04.01 | Fan/evaporator unit for KoH corridors | 2000 | 25 | 15 | 1 | ea | 5,500.00 | 5,500 | Contract | CAP | | | | | | | | | | | | | | | | 8,569 | | | | | 8,569 |
| | 04.01 | Centrifugal hot water pumps (Phs. 2 yr) | 2010 | 25 | | 2 | ea | 10,400.00 | 20,800 | Contract | CAP | 10,400 | 10,712 | | | | | | | | | | | | | | | | | | | 21,112 |
| | 04.01 | Centrifugal chilled water pumps (Phs 2 yr) | 2010 | 25 | | 2 | ea | 12,600.00 | 25,200 | Contract | CAP | 12,600 | 12,978 | | | | | | | | | | | | | | | | | | | 25,578 |
| | 04.01 | Ceiling fans | 2000 | 5 | | 2 | ea | 200.00 | 400 | Contract | CAP | 400 | | | | | 461 | | | | | 538 | | | | | 623 | | | | | 2,024 |
| | 04.01 | Ceiling fans | 1955 | 5 | | 4 | ea | 200.00 | 800 | Contract | CAP | 800 | | | | | 927 | | | | | 1,075 | | | | | 1,246 | | | | | 4,049 |
| | 04.01 | Boilers 1.68 MBH Cleaver Brooks (Phs 3 yr) | 1990 | 25 | 5 | 3 | ea | 24,600.00 | 73,800 | Contract | CAP | | | | | | 28,515 | 29,374 | 30,255 | | | | | | | | | | | | | 88,147 |
| | 04.01 | Air handling unit | 1990 | 25 | 5 | 1 | ea | 12,000.00 | 12,000 | Contract | CAP | | | | | | 13,911 | | | | | | | | | | | | | | | 13,911 |
| | | | | | | | | | | Expense HVAC Subtotal | | 67,590 | 27,788 | 14,398 | 4,465 | 4,672 | 55,058 | 34,424 | 52,401 | 5,335 | 5,450 | 7,172 | 5,670 | 5,881 | 5,967 | 6,150 | 16,798 | 6,593 | 6,927 | 7,112 | 7,390 | 347,155 |
| | 04.02 | Plumbing & Plumbing Fixtures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.02 | Replace domestic water piping - cold, hot, and recirc | 1975 | 40 | 5 | 17,505 | sf | 4.00 | 70,020 | Contract | CAP | | | | | | 81,172 | | | | | | | | | | | | | | | 81,172 |
| | 04.02 | Misc plumbing valves, equipment, and accessories | 2010 | 1 | | 1 | Allowance | 1,000.00 | 1,000 | Contract | CAP | 1,000 | 1,030 | 1,061 | 1,093 | 1,126 | 1,159 | 1,194 | 1,230 | 1,267 | 1,305 | 1,344 | 1,384 | 1,426 | 1,469 | 1,513 | 1,558 | 1,605 | 1,653 | 1,702 | 1,754 | 26,870 |
| | 04.02 | Faucets and flush valves - public restrooms | 1995 | 20 | 15 | 2 | ea | 95.00 | 190 | Contract | CAP | 7 | 8 | 8 | 8 | 8 | 9 | 8 | 9 | 11 | 12 | 14 | 15 | 17 | 18 | 19 | 19 | 19 | 18 | 18 | 17 | 250 |
| | 04.02 | Faucets & valves in public restrooms | 1995 | 5 | | 8 | ea | 175.00 | 1,400 | In-house | CAP | 272 | 280 | 288 | 296 | 304 | 313 | 322 | 331 | 341 | 350 | 360 | 371 | 381 | 393 | 404 | 415 | 427 | 439 | 452 | 465 | 7,203 |
| | 04.02 | Water cooler | 1995 | 15 | | 5 | ea | 1,400.00 | 7,000 | Contract | CAP | 536 | 511 | 471 | 420 | 363 | 308 | 253 | 203 | 176 | 154 | 145 | 151 | 169 | 200 | 243 | 293 | 355 | 424 | 494 | 564 | 6,440 |
| | 04.02 | Kitchen water storage tank | 2002 | 20 | 12 | 1 | ea | 5,145.00 | 5,145 | Contract | CAP | | | | | | | | | | | | | 7,336 | | | | | | | | 7,336 |
| | 04.02 | Kitchen/Laundry boiler 645,000 BTU Lochinvar | 2009 | 20 | 19 | 1 | ea | 16,100.00 | 16,100 | Contract | CAP | | | | | | | | | | | | | | | | | | | | 25,231 | 25,231 |
| | 04.02 | Faucets & flush valves | 1995 | 20 | 15 | 26 | ea | 95.00 | 2,470 | Contract | CAP | | | | | | | | | | | | | | | | 3,848 | | | | | 3,848 |
| | | | | | | | | | | Expense Plumbing & Plumbing Fixtures Subtotal | | 1,815 | 1,827 | 1,825 | 1,814 | 1,799 | 82,957 | 1,777 | 1,778 | 1,793 | 1,821 | 1,864 | 1,921 | 9,329 | 2,079 | 2,177 | 6,138 | 2,407 | 2,334 | 2,666 | 31,031 | 181,330 |
| | 04.03 | Fire Sprinkler & Life Safety Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.03 | Fire alarm system inspection, maint & monitoring | 2010 | 1 | | 1 | ls | 2,353.00 | 2,353 | Contract | CAP | 2,353 | 2,423 | 2,495 | 2,571 | 2,648 | 2,727 | 2,809 | 2,893 | 2,980 | 3,069 | 3,162 | 3,253 | 3,354 | 3,455 | 3,558 | 3,665 | 3,775 | 3,888 | 4,005 | 4,125 | 63,213 |
| | 04.03 | Exit signs | 1955 | 12 | 5 | 3 | ea | 128.00 | 384 | Contract | CAP | | | | | | 445 | | | | | | | | | | | | 635 | | | 1,080 |
| | 04.03 | Upgrade fire alarm panel | 2010 | 20 | 6 | 1 | ls | 18,750.00 | 18,750 | Contract | CAP | | | | | | | 22,388 | | | | | | | | | | | | | | 22,388 |
| | 04.03 | Smoke detectors | 2000 | 10 | | 17 | ea | 277.00 | 4,709 | Contract | CAP | 560 | 548 | 561 | 470 | 483 | 481 | 518 | 563 | 606 | 641 | 665 | 679 | 687 | 694 | 704 | 720 | 741 | 766 | 787 | 827 | 12,654 |
| | 04.03 | Replace fire sprinkler system | 1985 | 40 | 15 | 17,505 | sf | 1.75 | 30,634 | Contract | CAP | | | | | | | | | | | | | | | | 47,726 | | | | | 47,726 |
| | 04.03 | PVI station | 1955 | 20 | 5 | 7 | ea | 131.00 | 917 | Contract | CAP | 48 | 49 | 52 | 55 | 57 | 60 | 60 | 61 | 61 | 62 | 62 | 62 | 63 | 63 | 65 | 67 | 69 | 72 | 76 | 79 | 1,239 |
| | 04.03 | Horn/strobe annunciator | 1955 | 18 | 17 | 10 | ea | 222.00 | 2,220 | Contract | CAP | 132 | 134 | 136 | 137 | 138 | 140 | 143 | 145 | 149 | 154 | 160 | 166 | 173 | 181 | 188 | 196 | 203 | 209 | 216 | 221 | 3,320 |
| | 04.03 | Exit signs | 1983 | 12 | 11 | 19 | ea | 128.00 | 2,432 | Contract | CAP | | | | | | | | | | | | 3,366 | | | | | | | | | 3,368 |
| | 04.03 | Door hold open device (magnetic) | 2000 | 25 | 15 | 1 | pair | 700.00 | 700 | Contract | CAP | | | | | | | | | | | | | | | | 1,091 | | | | | 1,091 |
| | 04.03 | Door hold open device (magnetic) | 1973 | 25 | | 1 | pair | 700.00 | 700 | Contract | CAP | 700 | | | | | | | | | | | | | | | | | | | | 700 |
| | | | | | | | | | | Expense Fire Sprinkler & Life Safety Systems Subtotal | | 3,817 | 3,153 | 3,148 | 3,233 | 3,306 | 3,882 | 26,918 | 3,662 | 3,796 | 3,926 | 4,047 | 7,550 | 4,277 | 4,393 | 4,515 | 53,464 | 4,788 | 5,572 | 5,092 | 5,252 | 156,777 |
| | 04.04 | Electrical | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.04 | Infrared electric panel study | 2012 | 5 | 2 | 17,500 | sf | 0.03 | 525 | Contract | CAP | | | 557 | | | | | 648 | | | | | 749 | | | | | 868 | | | 2,820 |
| | 04.04 | Wall pac | 1985 | 20 | 15 | 7 | ea | 275.00 | 1,925 | Contract | CAP | | | | | | | | | | | | | | | | 2,998 | | | | | 2,998 |
| | 04.04 | Surface mtd 1x4 & 2x4 fluor fixtures w/ wrap around lens | 1953 | 10 | 5 | 14 | sf | 277.00 | 3,878 | Contract | CAP | | | | | | 4,495 | | | | | | | | | | 6,042 | | | | | 10,537 |
| | 04.04 | Exterior wall sconce | 1975 | 20 | 5 | 2 | ea | 145.00 | 290 | Contract | CAP | | | | | | 336 | | | | | | | | | | | | | | | 336 |
| | 04.04 | 4' fluorescent fixture w/ wrap around lens | 2000 | 25 | 15 | 24 | ea | 155.00 | 3,720 | Contract | CAP | | | | | | | | | | | | | | | | 5,798 | | | | | 5,798 |
| | 04.04 | 2x4 lay in fluor fixtures | 1985 | 25 | 5 | 8 | ea | 166.00 | 1,328 | Contract | CAP | | | | | | 1,540 | | | | | | | | | | | | | | | 1,540 |
| | 04.04 | 1x4 surface mtd fluor fixtures | 1960 | 25 | 5 | 12 | ea | 155.00 | 1,860 | Contract | CAP | | | | | | 2,156 | | | | | | | | | | | | | | | 2,156 |
| | 04.04 | 1'x4' fluorescent light (vapor tight) | 2000 | 25 | 15 | 21 | ea | 175.00 | 3,675 | Contract | CAP | | | | | | | | | | | | | | | | 5,726 | | | | | 5,726 |
| | 04.04 | Replace electrical panels | 2015 | 40 | 5 | 1 | ls | 250,000.00 | 250,000 | Contract | CAP | | | | | | 289,819 | | | | | | | | | | | | | | | 289,819 |

FacilityForecast
Forecasting the Future

2010-002: St Paul's Home, Belleville, IL

# Annual Budget Totals

Shelter Care
Table VII-A

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | Expense Electrical Subtotal | | | | 557 | | 298,346 | | 646 | | | | | 749 | | | 20,562 | | 948 | | | 321,758 |
| | 05.02 | Common Area Floor Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 97 | 05.02 | Vinyl floor tile | 1985 | 20 | 10 | 6,000 | sf | 2.10 | 12,600 | Contract | CAP | | | | | | | | | | | | | | | | 19,890 | | | | | 19,890 |
| | | | | | | | | | | Expense Common Area Floor Finishes Subtotal | | | | | | | | | | | | | | | | | 19,890 | | | | | 19,890 |
| | 05.03 | Common Area Paint & Wall Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 98 | 05.03 | Paint interior common areas | 1997 | 7 | 1 | 1 | ls | 10,000.00 | 10,000 | Contract | CAP | | 10,300 | | | | | | | 12,668 | | | | | | | 15,580 | | | | | 38,547 |
| | | | | | | | | | | Expense Common Area Paint & Wall Finishes Subtotal | | | 10,300 | | | | | | | 12,668 | | | | | | | 15,580 | | | | | 38,547 |
| | 05.04 | Common Area Ceiling Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 99 | 05.04 | Acoustical ceiling tile | 1975 | 20 | 0 | 6,000 | sf | 4.10 | 24,600 | Contract | CAP | | | | | | 26,518 | | | | | | | | | | | | | | | 26,518 |
| | | | | | | | | | | Expense Common Area Ceiling Systems Subtotal | | | | | | 26,518 | | | | | | | | | | | | | | | 26,518 |
| | 06.01 | Unit Refresh Allowance | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 100 | 06.01 | Unit turns (painting, misc repairs and upgrades) | 2010 | 1 | | 3 | rooms | 400.20 | 1,200 | In-house | CAP | 1,200 | 1,236 | 1,273 | 1,311 | 1,351 | 1,391 | 1,433 | 1,476 | 1,520 | 1,566 | 1,613 | 1,661 | 1,711 | 1,762 | 1,815 | 1,870 | 1,926 | 1,983 | 2,043 | 2,104 | 32,344 |
| | | | | | | | | | | Expense Unit Refresh Allowance Subtotal | | 1,200 | 1,236 | 1,273 | 1,311 | 1,351 | 1,391 | 1,433 | 1,476 | 1,520 | 1,566 | 1,613 | 1,661 | 1,711 | 1,762 | 1,815 | 1,870 | 1,926 | 1,983 | 2,043 | 2,104 | 32,344 |
| | 06.02 | Unit Floor Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 101 | 06.02 | Vinyl floor tile | 1985 | 5 | 3 | 6,320 | sf | 2.10 | 13,230 | Contract | CAP | 1,650 | 1,699 | 1,750 | 1,802 | 1,857 | 1,912 | 1,970 | 2,029 | 2,089 | 2,152 | 2,216 | 2,283 | 2,351 | 2,422 | 2,494 | 2,569 | 2,646 | 2,725 | 2,807 | 2,891 | 44,315 |
| | | | | | | | | | | Expense Unit Floor Finishes Subtotal | | 1,650 | 1,699 | 1,750 | 1,802 | 1,857 | 1,912 | 1,970 | 2,029 | 2,089 | 2,152 | 2,216 | 2,283 | 2,351 | 2,422 | 2,494 | 2,569 | 2,646 | 2,725 | 2,807 | 2,891 | 44,315 |
| | 06.03 | Unit Paint & Wall Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102 | 06.03 | Ceramic tile at baths | 2020 | 40 | 10 | 10 | baths | 1,200.00 | 12,000 | Contract | CAP | | | | | | | | | | | 16,127 | | | | | | | | | | 16,127 |
| | | | | | | | | | | Expense Unit Paint & Wall Finishes Subtotal | | | | | | | | | | | | 16,127 | | | | | | | | | | 16,127 |
| | 06.04 | Unit Ceiling Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103 | 06.04 | Acoustical ceiling tile | 1975 | 20 | 5 | 3,150 | sf | 4.10 | 12,915 | Contract | CAP | | | | | | 14,972 | | | | | | | | | | | | | | | 14,972 |
| | | | | | | | | | | Expense Unit Ceiling Systems Subtotal | | | | | | | 14,972 | | | | | | | | | | | | | | | 14,972 |
| | 06.05 | Unit MEP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104 | 06.05 | Over bed light | 1985 | 25 | | 91 | ea | 125.00 | 8,000 | Contract | CAP | 612 | 574 | 539 | 480 | 415 | 350 | 290 | 219 | 200 | 178 | 166 | 172 | 193 | 220 | 277 | 336 | 407 | 494 | 564 | 643 | 7,359 |
| 105 | 06.05 | Faucets & valves | 1987 | 25 | 2 | 35 | ea | 65.00 | 2,470 | Contract | CAP | 106 | 232 | 201 | 191 | 176 | 157 | 136 | 118 | 98 | 78 | 65 | 67 | 54 | 56 | 63 | 75 | 81 | 111 | 135 | 158 | 2,413 |
| | | | | | | | | | | Expense Unit MEP Subtotal | | 309 | 787 | 739 | 671 | 591 | 507 | 426 | 333 | 298 | 264 | 232 | 239 | 248 | 285 | 340 | 412 | 488 | 598 | 693 | 803 | 9,773 |
| | 06.06 | Unit Cabinets, Counter Tops & Millwork | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 106 | 06.06 | Built in metal/wood wardrobe (replace with wood cabinets) | 1985 | 30 | 5 | 16 | ea | 1,817.50 | 29,115 | Contract | CAP | | | | | | 33,752 | | | | | | | | | | | | | | | 33,752 |
| | | | | | | | | | | Expense Unit Cabinets, Counter Tops & Millwork Subtotal | | | | | | | 33,752 | | | | | | | | | | | | | | | 33,752 |
| | 06.08 | Unit Specials | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 107 | 06.08 | Privacy curtains | 2010 | 12 | | 16 | rooms | 899.00 | 14,400 | Contract | CAP | 14,400 | | | | | | | | | | | | 20,531 | | | | | | | | 34,931 |
| | | | | | | | | | | Expense Unit Specials Subtotal | | 14,400 | | | | | | | | | | | | 20,531 | | | | | | | | 34,931 |
| | 07.02 | Furnishings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 108 | 07.02 | Dining room table & chairs | 2000 | 12 | | 11 | sets | 2,400.00 | 26,400 | Contract | CAP | 26,400 | | | | | | | | | | 35,479 | | | | | | | | | | 61,879 |
| 109 | 07.02 | Dining room chairs | 2000 | 15 | 14 | 25 | ea | 361.14 | 9,028 | Contract | CAP | | | | | | | | | | | | | | | 13,656 | | | | | | 13,656 |
| 110 | 07.02 | Bed, bed side table, chair & small chest (Pkg. 3 pr) | 2002 | 15 | 7 | 18 | sets | 960.00 | 17,280 | Contract | CAP | | | | | | | | 7,084 | 7,297 | 7,515 | | | | | | | | | | | 31,896 |
| 111 | 07.02 | Day room furnishings | 2012 | 15 | 2 | 2 | ea | 4,500.00 | 9,000 | Contract | CAP | | | 9,548 | | | | | | | | | | | | | | | 14,876 | | | 24,424 |
| | | | | | | | | | | Expense Furnishings Subtotal | | 26,400 | | 9,548 | | | | | 7,084 | 7,297 | 7,515 | 35,479 | | | 13,656 | | 14,876 | | | 121,856 |
| | 07.04 | Window Coverings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 112 | 07.04 | Blinds or other window treatments (resident rooms) | 2010 | 10 | | 16 | rooms | 1,200.00 | 21,600 | Contract | CAP | 21,600 | | | | | | | | | | 28,029 | | | | | | | | | | 49,629 |
| 113 | 07.04 | Blinds or other window treatments (common areas) | 2015 | 10 | | 1 | ls | 10,000.00 | 10,000 | Contract | CAP | 10,000 | | | | | | | | | | 13,439 | | | | | | | | | | 23,439 |
| 114 | 07.04 | Draperies & bedspreads | 1978 | 7 | 3 | 2 | lot | 4,580.00 | 9,160 | Contract | CAP | | | | 10,009 | | | | | | | 12,310 | | | | | | | 15,140 | | | 37,460 |
| | | | | | | | | | | Expense Window Coverings Subtotal | | 31,600 | | | 10,009 | | | | | | | 54,778 | | | | | | | 15,140 | | | 111,027 |
| | 07.06 | Entertainment, Communication & Security Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 115 | 07.06 | Exit seeker system | 2010 | 12 | | 1 | ls | 10,000.00 | 10,000 | Contract | CAP | 10,000 | | | | | | | | | | | | 14,258 | | | | | | | | 24,258 |
| 116 | 07.06 | Replace/upgrade telephone system | 2010 | 10 | | 1 | ls | 3,800.00 | 3,800 | Contract | CAP | 3,800 | | | | | | | | | | 5,107 | | | | | | | | | | 8,907 |
| 117 | 07.06 | Music/Paging Speakers | 1997 | 20 | 7 | 1 | ls | 5,000.00 | 6,700 | Contract | CAP | | | | | | | | 6,149 | | | | | | | | | | | | | 6,149 |
| 118 | 07.06 | TV | 1998 | 10 | 5 | 1 | ea | 1,729.98 | 1,730 | Contract | CAP | | | | | | 2,008 | | | | | | | | | | 2,695 | | | | | 4,701 |
| 119 | 07.06 | Public address system speaker | 1995 | 25 | 20 | 7 | ea | 75.00 | 525 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 120 | 07.06 | Public address system | 1995 | 20 | 5 | 1 | ls | 5,000.00 | 5,000 | Contract | CAP | | | | | | 5,795 | | | | | | | | | | | | | | | 5,795 |
| 121 | 07.06 | Paging system amplifier | 2004 | 5 | 3 | 1 | ls | 1,000.00 | 1,000 | Contract | CAP | | | | 1,093 | | | | | 1,297 | | | | | 1,480 | | | | 1,702 | | 5,630 |
| 122 | 07.06 | Piano | 1955 | 40 | 25 | 1 | ea | 5,000.00 | 5,000 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 123 | 07.06 | Nurse call system | 2000 | 20 | 10 | 1 | ea | 6,500.00 | 6,500 | Contract | CAP | | | | | | | | | | | 7,392 | | | | | | | | | | 7,392 |
| 124 | 07.06 | Nurse call light | 1985 | 25 | 20 | 15 | ea | 50.00 | 750 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 125 | 07.06 | Nurse call light | 1985 | 25 | | 20 | ea | 50.00 | 1,000 | Contract | CAP | 1,000 | | | | | | | | | | | | | | | | | | | | 1,000 |
| 126 | 07.06 | Key pad door lock | 1995 | 15 | 5 | 1 | ea | 650.00 | 650 | Contract | CAP | | | | | | 754 | | | | | | | | | | 1,013 | | | | | 1,766 |
| 127 | 07.06 | Key pad door lock | 1995 | 10 | 5 | 2 | ea | 650.00 | 1,300 | Contract | CAP | | | | | | 1,507 | | | | | | | | | | 2,025 | | | | | 3,532 |
| | | | | | | | | | | Expense Entertainment, Communication & Security Systems Subtotal | | 14,800 | | | 1,093 | | 10,262 | | 6,149 | 1,297 | | 12,498 | | 14,258 | 1,480 | | 8,733 | | 1,702 | | 69,032 |
| | 07.07 | Office Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 128 | 07.07 | Workstation Upgrade | 1998 | 5 | 3 | 1 | ls | 1,335.00 | 1,339 | Contract | CAP | | | | 1,483 | | | | | | 1,696 | | | | | 1,968 | | | | | 2,380 | | 7,405 |
| 129 | 07.07 | Workstation (Admin Nurse) | 2002 | 5 | 2 | 1 | ls | 404.50 | 405 | Contract | CAP | | | 429 | | | | | 487 | | | | | 577 | | | | | 669 | | | 2,172 |
| 130 | 07.07 | Workstation (Admin Clerk) | 2002 | 5 | 2 | 1 | ls | 389.50 | 390 | Contract | CAP | | | 413 | | | | | 470 | | | | | 555 | | | | | 644 | | | 2,081 |
| 131 | 07.07 | Workstation (5) | 2002 | 5 | 2 | 6 | ls | 389.50 | 2,337 | Contract | CAP | | | 2,479 | | | | | 2,874 | | | | | 3,332 | | | | | 3,863 | | | 12,548 |

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# Annual Budget Totals

Shelter Care
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 132 | 07.07 | Windows 2000-server and user licenses | 2002 | 5 | 2 | 1 | ls | 532.50 | 533 | Contract | CAP | | | 645 | | | | | 955 | | | | | 779 | | | | | 880 | | | 2,859 |
| 133 | 07.07 | Upgrade Workstations | 1999 | 5 | 4 | 1 | ls | 3,727.05 | 3,727 | Contract | CAP | | | | | 4,195 | | | | | | | | | | | | | | | 6,535 | 21,231 |
| 134 | 07.07 | Upgrade Accountant and Clerk's Workstation | 1998 | 6 | 3 | 1 | ls | 730.05 | 729 | Contract | CAP | | | | 808 | | | | | 938 | | | | | 1,065 | | | | | 1,258 | | 4,057 |
| 135 | 07.07 | Upgrade 10 Workstations | 1999 | 5 | 4 | 1 | ls | 2,850.29 | 2,850 | Contract | CAP | | | | | 3,219 | | | | | 3,732 | | | | | 4,326 | | | | | 5,015 | 16,293 |
| 136 | 07.07 | Support to install servers and workstations | 2002 | 5 | 2 | 1 | ls | 714.13 | 714 | Contract | CAP | | | 756 | | | | | 878 | | | | | 1 018 | | | | | 1,160 | | | 3,834 |
| 137 | 07.07 | Set-up Jodi's Computer and Shirley's Printer | 2002 | 5 | 2 | 1 | ls | 281.57 | 282 | Contract | CAP | | | 298 | | | | | 346 | | | | | 401 | | | | | 485 | | | 1,512 |
| 138 | 07.07 | Set up new computers | 2007 | 1 | | 1 | ls | 1,202.78 | 1,203 | Contract | CAP | 1,203 | 1,238 | 1,276 | 1,314 | 1,354 | 1,394 | 1,436 | 1,479 | 1,524 | 1,569 | 1,616 | 1,665 | 1,715 | 1,766 | 1,819 | 1,874 | 1,930 | 1,988 | 2,048 | 2,109 | 32,310 |
| 139 | 07.07 | Set up new computers | 2007 | 1 | | 1 | ls | 512.00 | 512 | Contract | CAP | 512 | 527 | 543 | 559 | 576 | 594 | 611 | 630 | 649 | 668 | 688 | 709 | 730 | 752 | 774 | 798 | 822 | 848 | 872 | 896 | 13,758 |
| 140 | 07.07 | Set up new computers | 2007 | 1 | | 1 | ls | 90.01 | 90 | Contract | CAP | 90 | 93 | 95 | 98 | 101 | 104 | 107 | 111 | 114 | 117 | 121 | 125 | 128 | 132 | 136 | 140 | 144 | 149 | 153 | 158 | 2,418 |
| 141 | 07.07 | Port switch/hub for new server system | 2002 | 5 | 2 | 1 | ls | 119.50 | 120 | Contract | CAP | | | 127 | | | | | 147 | | | | | 170 | | | | | 196 | | | 642 |
| 142 | 07.07 | Orbis Software and Hardware | 2008 | 2 | | 1 | ls | 150.00 | 150 | Contract | CAP | 150 | | 179 | | 169 | | 179 | | 190 | | 202 | | 214 | | 227 | | 241 | | 255 | | 1,965 |
| 143 | 07.07 | Novell Upgrade | 1998 | 5 | 3 | 1 | ls | 562.50 | 563 | Contract | CAP | | | | 637 | | | | | 738 | | | | | 853 | | | | | 992 | | 3,221 |
| 144 | 07.07 | Novell Software Upgrade | 1998 | 5 | 1 | 1 | ls | 875.00 | 875 | Contract | CAP | | 901 | | | | | 1,045 | | | | | 1,211 | | | | | 1,404 | | | | 4,161 |
| 145 | 07.07 | New Workstation for Admin Clerk | 1999 | 5 | 4 | 1 | ls | 591.70 | 592 | Contract | CAP | | | | | 666 | | | | | 772 | | | | | 895 | | | | | 1,038 | 3,371 |
| 146 | 07.07 | Network infrastructure planning | 2002 | 5 | 2 | 1 | ls | 40.78 | 41 | Contract | CAP | | | 43 | | | | | | | | | | 55 | | | | | 67 | | | 219 |
| 147 | 07.07 | Monitors and keyboards | 2002 | 5 | 2 | 1 | ls | 2,725.00 | 2,725 | Contract | CAP | | | 2,909 | | | | | 3,340 | | | | | 3,882 | | | | | 4,501 | | | 14,631 |
| 148 | 07.07 | Medical Software Conversion | 2004 | 5 | 4 | 1 | ls | 1,500.00 | 1,500 | Contract | CAP | | | | | 1,685 | | | | | 1,957 | | | | | 2,269 | | | | | 2,630 | 8,545 |
| 149 | 07.07 | Master Series, Conversion to Windows 2000, Replace bad cable | 2002 | 5 | 2 | 1 | ls | 448.14 | 448 | Contract | CAP | | | 475 | | | | | 561 | | | | | 639 | | | | | 741 | | | 2,405 |
| 150 | 07.07 | Marketing Director's Computer | 2006 | 3 | 2 | 1 | ls | 508.00 | 508 | Contract | CAP | | | 539 | | | 589 | | | 644 | | | 703 | | | 766 | | | 840 | | | 4,063 |
| 151 | 07.07 | Marketing Computer | 2007 | 3 | | 1 | ls | 877.50 | 878 | Contract | CAP | 878 | | | 958 | | | 1,048 | | | 1,145 | | | 1,251 | | | 1,367 | | | 1,494 | | 8,141 |
| 152 | 07.07 | Laser Printers HP1100N | 2000 | 5 | | 1 | ls | 267.60 | 268 | Contract | CAP | 268 | | | | | 310 | | | | | 358 | | | | | 417 | | | | | 1,354 |
| 153 | 07.07 | Laser Printers HP 4000 | 1999 | 5 | 4 | 1 | ls | 699.50 | 700 | Contract | CAP | | | | | 787 | | | | | 913 | | | | | 1,055 | | | | | 1,227 | 3,985 |
| 154 | 07.07 | Laser jet printer, firewall upgrade on server | 2008 | 5 | 3 | 1 | ls | 603.22 | 603 | Contract | CAP | | | | 650 | | | | | 784 | | | | | 888 | | | | | 1,027 | | 3,939 |
| 155 | 07.07 | Install tape drive, backup exec, Novell and rewired station 34 | 2002 | 5 | 2 | 1 | ls | 602.36 | 602 | Contract | CAP | | | 639 | | | | | 741 | | | | | 859 | | | | | 998 | | | 3,234 |
| 156 | 07.07 | Install Local Server | 2008 | 3 | 2 | 1 | ls | 813.60 | 814 | Contract | CAP | | | 864 | | | 966 | | | 1,056 | | | 1,154 | | | 1,261 | | | 1,378 | | | 5,699 |
| 157 | 07.07 | Revolv Case Mix Software | 2005 | 3 | 1 | 1 | ls | 525.00 | 525 | Contract | CAP | | 541 | | | 591 | | | 648 | | | 706 | | | 771 | | | 842 | | | 921 | 6,017 |
| 158 | 07.07 | Horizon Technical Assessment Worksheet | 2002 | 5 | 2 | 1 | ls | 37.50 | 38 | Contract | CAP | | | 40 | | | | | 46 | | | | | 53 | | | | | 62 | | | 201 |
| 159 | 07.07 | Hardware Additions | 1998 | 5 | 1 | 1 | ls | 1,281.50 | 1,282 | Contract | CAP | | 1,320 | | | | | 1,530 | | | | | 1,774 | | | 2,058 | | | | | | 6,880 |
| 160 | 07.07 | Hardware Additions | 1995 | 10 | 5 | 1 | ls | 421.33 | 421 | Contract | CAP | | | | | | 486 | | | | | | | | | | | 555 | | | | | 1,145 |
| 161 | 07.07 | Hardware Additions | 1995 | 5 | | 1 | ls | 5,698.70 | 5,699 | Contract | CAP | 5,699 | | | | | 6,838 | | | | | 7,527 | | | | | 9,100 | | | | | 29,654 |
| 162 | 07.07 | Hardware Additions | 1995 | 5 | | 1 | ls | 1,360.75 | 1,361 | Contract | CAP | 1,361 | | | | | 1,577 | | | | | 1,829 | | | | | 2,120 | | | | | 6,857 |
| 163 | 07.07 | Hardware Additions | 1995 | 5 | | 1 | ls | 1,656.00 | 1,656 | Contract | CAP | 1,656 | | | | | 1,920 | | | | | 2,226 | | | | | 2,580 | | | | | 8,381 |
| 164 | 07.07 | Document Layout-New NT servers | 2002 | 5 | 2 | 1 | ls | 26.00 | 26 | Contract | CAP | | | 27 | | | | | 31 | | | | | 36 | | | | | 41 | | | 134 |
| 165 | 07.07 | Computer Workstation-Dry | 2000 | 5 | | 1 | ls | 550.50 | 550 | Contract | CAP | 550 | | | | | 648 | | | | | 752 | | | | | 872 | | | | | 2,832 |
| 166 | 07.07 | Computer Upgrade and Server | 2005 | 3 | 1 | 1 | ls | 5,601.59 | 5,602 | Contract | CAP | | 5,770 | | | 6,305 | | | 6,969 | | | 7,525 | | | 8,226 | | | 8,989 | | 9,822 | 53,529 |
| 167 | 07.07 | Computer Upgrade and Server | 2005 | 3 | 1 | 1 | ls | 1,327.23 | 1,327 | Contract | CAP | | 1,367 | | | 1,494 | | | 1,632 | | | 1,784 | | | 1,949 | | | 2,130 | | | 2,327 | 12,683 |
| 168 | 07.07 | Computer Upgrade and Server | 2005 | 3 | 1 | 1 | ls | 3,592.11 | 3,592 | Contract | CAP | | 3,700 | | | 4,043 | | | 4,416 | | | 4,829 | | | 5,275 | | | 5,764 | | | 6,299 | 34,326 |
| 169 | 07.07 | Computer upgrade and ADD Licens | 2005 | 3 | 1 | 1 | ls | 11,340.93 | 11,350 | Contract | CAP | | 11,681 | | | 12,778 | | | 13,959 | | | 15,254 | | | 16,668 | | | 18,214 | | | 19,903 | 108,484 |
| 170 | 07.07 | Cimentor System | 1992 | 10 | 2 | 1 | ls | 11,092.58 | 11,093 | Contract | CAP | | | 11,768 | | | | | | | | | | 13,615 | | | | | | | | 27,583 |
| 171 | 07.07 | Computer for Accountant | 2004 | 6 | 4 | 1 | ls | 517.00 | 517 | Contract | CAP | | | | | 582 | | | | | | 675 | | | | 782 | | | | | 907 | 2,945 |
| 172 | 07.07 | Cabins | 2002 | 5 | 2 | 1 | ls | 54.84 | 55 | Contract | CAP | | | 58 | | | | | 67 | | | | | 78 | | | | | 91 | | | 294 |
| 173 | 07.07 | ADP Windows Upgrade | 1998 | 5 | 3 | 1 | ls | 264.50 | 265 | Contract | CAP | | | | 289 | | | | | 315 | | | | | 365 | | | | | 450 | | 1,469 |
| 174 | 07.07 | Accounting Clerk Workstation | 2003 | 5 | 3 | 1 | ls | 215.60 | 216 | Contract | CAP | | | | 236 | | | | | 273 | | | | | 317 | | | | | 397 | | 1,192 |
| 175 | 07.07 | 2 CPUs for Nursing and 1 monitor | 2008 | 3 | 2 | 2 | ls | 828.12 | 1,718 | Contract | CAP | | | 1,875 | | | | 1,993 | | 2,177 | | | 2,378 | | | 2,599 | | | 2,840 | | | 13,899 |
| 176 | 07.07 | 1997 Addition | 1997 | 6 | 2 | 1 | ls | 2,514.70 | 2,515 | Contract | CAP | | | 2,678 | | | | | 3,093 | | | | | 3,585 | | | | | 4,156 | | | 13,502 |
| 177 | 07.07 | 1993 Additions | 1993 | 6 | 1 | 1 | ls | 16,474.50 | 16,425 | Contract | CAP | | 16,917 | | | | | | 20,200 | | | | | | 24,170 | | | | | | 29,800 | 90,038 |
| | | | | | | | | | | | Expense Office Systems Subtotal | 12,875 | 44,095 | 28,957 | 7,022 | 38,545 | 17,422 | 5,557 | 63,770 | 11,095 | 18,411 | 45,819 | 9,719 | 35,858 | 65,158 | 22,553 | 20,014 | 42,537 | 26,594 | 11,195 | 88,589 | 513,892 |
| | 07.10 | Kitchen Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 178 | 07.10 | Vertical mixer 7 qt | 2012 | 15 | 2 | 1 | ea | 3,122.69 | 3,123 | Contract | CAP | | | 3,313 | | | | | | | | | | | | | | | 5,161 | | | 8,474 |
| 179 | 07.10 | Steam dishwasher | 2012 | 15 | 2 | 1 | ea | 22,000.00 | 22,000 | Contract | CAP | | | 23,340 | | | | | | | | | | | | | | | 36,363 | | | 59,702 |
| 180 | 07.10 | Replace refrigeration unit for walk in freezer Hamich | 1990 | 12 | 4 | 1 | ea | 6,700.00 | 6,700 | Contract | CAP | | | | | 7,041 | | | | | | | | | | | | 10,792 | | | | 18,292 |
| 181 | 07.10 | Replace refrigeration unit for walk in refrigerator Hamich | 1990 | 12 | 4 | 1 | ea | 6,100.00 | 6,100 | Contract | CAP | | | | | 6,840 | | | | | | | | | | | | 9 789 | | | | 16,654 |
| 182 | 07.10 | Ovens with vulcan reburners | 2002 | 20 | 12 | 2 | ea | 2,000.00 | 4,000 | Contract | CAP | | | | | | | | | | | | | 5,703 | | | | | | | | 5,703 |
| 183 | 07.10 | Kitchen Supplies | 2011 | 3 | 1 | 1 | ls | 5,000.00 | 5,000 | Contract | CAP | | 5,150 | | | 5,828 | | | 6,149 | | | 6,720 | | | 7,743 | | | 8,024 | | 8,768 | 47,780 |
| 184 | 07.10 | Kitchen Range Hood w/ Fan | 2000 | 15 | 5 | 1 | ea | 1,220.65 | 1,221 | Contract | CAP | | | | | | 1,415 | | | | | | | | | | | | | | | 1,415 |
| 185 | 07.10 | Hotplate reburners/grill Vulcan | 2002 | 10 | 2 | 1 | ea | 1,500.00 | 1,500 | Contract | CAP | | | 1,591 | | | | | | | | | | 2,138 | | | | | | | | 3,730 |
| 186 | 07.10 | GREASE HOOD - DOUBLE | 2011 | 30 | 1 | 1 | ea | 34,500.00 | 34,500 | Contract | CAP | | 35,535 | | | | | | | | | | | | | | | | | | | 35,535 |
| 187 | 07.10 | Electric can opener | 2000 | 10 | | 1 | ea | 708.33 | 708 | Contract | CAP | 708 | | | | | | | | | | 957 | | | | | | | | | | 1,650 |
| 188 | 07.10 | Deep fryer vulcan reburners | 2002 | 15 | 7 | 1 | ea | 2,500.00 | 2,500 | Contract | CAP | | | | | | | | 3,075 | | | | | | | | | | | | | 3,075 |
| 189 | 07.10 | Convection oven Hatsart | 2007 | 10 | 7 | 1 | ea | 4,140.00 | 4,140 | Contract | CAP | | | | | | | | 5,092 | | | | | | | | | | 6,843 | | | 11,934 |
| 190 | 07.10 | Convection Oven | 2007 | 10 | 7 | 1 | ea | 2,818.75 | 2,818 | Contract | CAP | | | | | | | | 3,468 | | | | | | | | | | 4,658 | | | 8,124 |
| 191 | 07.10 | Annual fire protection system | 1995 | 30 | 15 | 1 | ea | 1,200.00 | 1,200 | Contract | CAP | | | | | | | | | | | | | | | | | 1,870 | | | | 1,870 |
| 192 | 07.10 | Sugar bins | 1990 | 30 | 10 | 1 | ls | 500.00 | 500 | Contract | CAP | | | | | | | | | | | 672 | | | | | | | | | | 672 |
| 193 | 07.10 | Flour bins | 1990 | 30 | 10 | 1 | ls | 500.00 | 500 | Contract | CAP | | | | | | | | | | | 672 | | | | | | | | | | 672 |
| 194 | 07.10 | Replace walk in freezer | 1990 | 40 | 20 | 1 | ea | 30,000.00 | 30,000 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 195 | 07.10 | Replace walk in refrigerator | 1990 | 40 | 20 | 1 | ea | 30,000.00 | 30,000 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 196 | 07.10 | Ono Gallon Blender | 1994 | 5 | | 1 | ea | 681.91 | 681 | Contract | CAP | 681 | | | | | | | | 869 | | | | | | | | 1,093 | | | | 2,638 |
| 197 | 07.10 | Freezer, 1 door, upright | 2000 | 15 | 5 | 1 | ea | 2,000.00 | 2,000 | Contract | CAP | | | | | | 2,318 | | | | | | | | | | | | | | | 2,318 |
| 198 | 07.10 | Baker's table | 1997 | 30 | 17 | 1 | ea | 750.00 | 750 | Contract | CAP | | | | | | | | | | | | | | | | | | 1,240 | | | 1,240 |
| 199 | 07.10 | Clean dish table | 1997 | 30 | 17 | 1 | ea | 1,250.00 | 1,250 | Contract | CAP | | | | | | | | | | | | | | | | | | 2,068 | | | 2,068 |
| 200 | 07.10 | Cooling racks | 1997 | 30 | 17 | 2 | ea | 450.00 | 900 | Contract | CAP | | | | | | | | | | | | | | | | | | 1,488 | | | 1,488 |

FacilityForecast® Forecasting the Future

# Annual Budget Totals

Shelter Care

Table VII-A

2010-002: St Paul's Home, Belleville, IL

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 201 | 07.10 | Counter (back kitchen) | 1997 | 30 | 17 | 1 | ea | 750.00 | 750 | Contract | CAP | | | | | | | | | | | | | | | | | | 1,240 | | | 1,240 |
| 202 | 07.10 | Cup and glass racks | 1997 | 30 | 17 | 1 | ea | 100.00 | 100 | Contract | CAP | | | | | | | | | | | | | | | | | | 165 | | | 165 |
| 203 | 07.10 | Garbage disposer | 2007 | 10 | 7 | 1 | ea | 1,760.00 | 1,760 | Contract | CAP | | | | | | | | 2,189 | | | | | | | | | | 2,942 | | | 5,131 |
| 204 | 07.10 | FRIDGE, 3 DOOR, milk cooler | 2004 | 15 | 9 | 2 | ea | 4,000.00 | 8,000 | Contract | CAP | | | | | | | | | | 10,438 | | | | | | | | | | | 10,438 |
| 205 | 07.10 | STEAM WELL (3 WELLS), portable ELECTRIC | 2004 | 10 | 4 | 1 | ea | 1,750.00 | 1,750 | Contract | CAP | | | | | 1,970 | | | | | | | | | | 2,847 | | | | | | 4,817 |
| 206 | 07.10 | FOOD PROCESSOR | 2004 | 8 | 2 | 1 | ea | 2,676.99 | 2,677 | Contract | CAP | | | 2,540 | | | | | | | | 3,598 | | | | | | | | 4,557 | | 10,995 |
| 207 | 07.10 | Hand sinks | 1997 | 25 | 12 | 1 | ea | 255.00 | 255 | Contract | CAP | | | | | | | | | | | | | 384 | | | | | | | | 384 |
| 208 | 07.10 | Ice and water station | 1997 | 15 | 2 | 1 | ea | 675.00 | 675 | Contract | CAP | | | 716 | | | | | | | | | | | | | | | 1,116 | | | 1,832 |
| 209 | 07.10 | Microwave Oven | 1998 | 10 | 6 | 5 | ea | 750.00 | 3,750 | Contract | CAP | | | | | | | 4,478 | | | | | | | | | | 6,018 | | | | 10,495 |
| 210 | 07.10 | Portable hot cabinet (main kitchen) | 2008 | 10 | 8 | 3 | ea | 1,000.00 | 3,000 | Contract | CAP | | | | | | | | | 3,800 | | | | | | | | | | 5,107 | | 8,908 |
| 211 | 07.10 | Pot sink (3 compartment) | 1997 | 30 | 17 | 1 | ea | 2,000.00 | 2,000 | Contract | CAP | | | | | | | | | | | | | | | | | | 3,306 | | | 3,306 |
| 212 | 07.10 | Rack shelf | 1997 | 30 | 17 | 1 | ea | 275.00 | 275 | Contract | CAP | | | | | | | | | | | | | | | | | | 455 | | | 455 |
| 213 | 07.10 | Storage room shelving | 1997 | 30 | 17 | 1 | lot | 750.00 | 750 | Contract | CAP | | | | | | | | | | | | | | | | | | 1,240 | | | 1,240 |
| 214 | 07.10 | Work table | 1997 | 30 | 17 | 1 | ea | 450.00 | 450 | Contract | CAP | | | | | | | | | | | | | | | | | | 744 | | | 744 |
| 215 | 07.10 | Steamer | 1993 | 15 | 8 | 1 | ea | 16,000.00 | 16,000 | Contract | CAP | | | | | | | | | 20,268 | | | | | | | | | | | | 20,268 |
| 216 | 07.10 | SLICER | 2009 | 15 | 14 | 1 | ea | 3,932.99 | 3,933 | Contract | CAP | | | | | | | | | | | | | | | 5,949 | | | | | | 5,949 |
| 217 | 07.10 | 20 GAL TILT SKILLET | 1998 | 12 | 2 | 1 | ea | 13,153.00 | 13,153 | Contract | CAP | | | 13,954 | | | | | | | | | | | | 19,895 | | | | | | 33,849 |
| 218 | 07.10 | Ice machine (main kitchen) | 1997 | 15 | 2 | 1 | ea | 3,100.00 | 3,100 | Contract | CAP | | | 3,289 | | | | | | | | | | | | | | | 5,124 | | | 8,413 |
| 219 | 07.10 | FOOD LAMPS | 2010 | 5 | | 1 | lot | 2,000.00 | 2,000 | Contract | CAP | 2,000 | | | | | 2,319 | | | | | 2,688 | | | | | 3,116 | | | | | 10,122 |
| 221 | 07.10 | KITCHEN REFRIGERATOR 2 door/juice | 2010 | 15 | | 1 | ea | 3,500.00 | 3,500 | Contract | CAP | 3,500 | | | | | | | | | | | | | | | 5,453 | | | | | 8,953 |
| | | | | | | | | | Expense Kitchen Equipment Subtotal | | | 5,500 | 40,615 | 49,043 | | 22,004 | 5,032 | 4,478 | 19,971 | 24,031 | 10,438 | 15,301 | | 8,203 | 7,343 | 28,491 | 10,438 | 35,674 | 74,148 | 9,665 | 8,765 | 382,523 |
| | 07.12 | Health Care & Nursing Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 221 | 07.12 | Beds | 2002 | 25 | 17 | 18 | ea | 1,500.00 | 27,000 | Contract | CAP | | | | | | | | | 1,900 | | 2,016 | 2,078 | 2,139 | 2,203 | 4,538 | 2,337 | 2,407 | 4,959 | 2,554 | 2,630 | 29,758 |
| 222 | 07.12 | Walkers, wheelchairs & recliners | 1995 | 10 | 5 | 1 | ls | 10,000.00 | 10,000 | Contract | CAP | | | | | | 11,593 | | | | | | | | | | 15,580 | | | | | 27,172 |
| 223 | 07.12 | Privacy curtain | 2011 | 16 | 1 | 35 | ea | 800.00 | 28,000 | Contract | CAP | | 28,840 | | | | | | | | | | | | | | | 44,932 | | | | 73,772 |
| | | | | | | | | | Expense Health Care & Nursing Equipment Subtotal | | | | 28,840 | | | | 11,593 | | | 1,900 | | 2,016 | 2,078 | 2,139 | 2,203 | 4,538 | 17,917 | 47,339 | 4,959 | 2,554 | 2,630 | 130,702 |
| | 07.13 | Beauty Shop, Store, Bank, Library & Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 224 | 07.13 | Beauty shop equipment | 2011 | 5 | 1 | 1 | ls | 2,500.00 | 2,500 | Contract | CAP | | 2,575 | | | | | 2,935 | | | | | 3,461 | | | | | 4,012 | | | | 13,032 |
| | | | | | | | | | Expense Beauty Shop, Store, Bank, Library & Other Subtotal | | | | 2,575 | | | | | 2,986 | | | | | 3,461 | | | | | 4,012 | | | | 13,032 |
| | 07.14 | Housekeeping Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 225 | 07.14 | Renard- Carpetwin 18 upright vac & Powerone 12 upright vac | 2007 | 10 | 7 | 1 | lot | 975.10 | 975 | Contract | CAP | | | | | | | | 1,199 | | | | | | | | | | 1,612 | | | 2,811 |
| 6 | 07.14 | Renard Paper-vacuum cleaner CLK-03102A Combivac | 2006 | 15 | 11 | 1 | ea | 388.31 | 388 | Contract | CAP | | | | | | | | | | | | 538 | | | | | | | | | 538 |
| 227 | 07.14 | OK Vacuum | 1999 | 15 | 4 | 1 | ea | 513.60 | 514 | Contract | CAP | | | | | 578 | | | | | | | | | | | | | | | 901 | 1,479 |
| 228 | 07.14 | Hillyard- Vacuum | 1998 | 10 | 6 | 1 | ea | 4,713.37 | 4,713 | Contract | CAP | | | | | | | 5,628 | | | | | | | | | | 7,564 | | | | 13,192 |
| 229 | 07.14 | Direct Supply- Heavy Duty Vac | 1995 | 10 | 5 | 1 | ea | 552.64 | 553 | Contract | CAP | | | | | | 641 | | | | | | | | | | 861 | | | | | 1,502 |
| 230 | 07.14 | Renard- GLC prof. series upright vac | 2007 | 15 | 12 | 1 | ea | 279.89 | 280 | Contract | CAP | | | | | | | | | | | | | 413 | | | | | | | | 413 |
| 231 | 07.14 | Network Svcs- 2 Versamatic Plus vacuums | 2006 | 15 | 11 | 2 | ea | 462.40 | 965 | Contract | CAP | | | | | | | | | | | | 1,338 | | | | | | | | | 1,338 |
| 232 | 07.14 | Network Svcs- 3 -12" sensor upright vacuum | 2005 | 15 | 10 | 3 | ea | 299.55 | 900 | Contract | CAP | | | | | | | | | | | 1,209 | | | | | | | | | | 1,209 |
| 233 | 07.14 | O.K. Vacuums- Upright Vacuum | 1996 | 10 | 6 | 1 | ea | 1,041.20 | 1,041 | Contract | CAP | | | | | | | 1,243 | | | | | | | | | | 1,671 | | | | 2,914 |
| 234 | 07.14 | HP Products Mfg #SRS12 vacuum 12" (4@282.15) | 2003 | 12 | 5 | 4 | ea | 282.18 | 1,129 | Contract | CAP | | | | | | 1,308 | | | | | | | | | | | | 1,865 | | | 3,174 |
| 235 | 07.14 | Renard- GLC prof. series upright vac | 2007 | 15 | 12 | 1 | ea | 793.19 | 793 | Contract | CAP | | | | | | | | | | | | | 418 | | | | | | | | 418 |
| 236 | 07.14 | Renard- 14" commercial upright vacuum cleaner-3 | 2007 | 15 | 14 | 3 | ea | 348.21 | 1,046 | Contract | CAP | | | | | | | | | | | | | | | 1,580 | | | | | | 1,580 |
| 237 | 07.14 | Renard-vacuum cleaner | 2009 | 15 | 14 | 1 | ea | 352.00 | 352 | Contract | CAP | | | | | | | | | | | | | | | 532 | | | | | | 532 |
| 238 | 07.14 | Renard-vacuum cleaner | 2009 | 15 | 14 | 1 | ea | 345.00 | 345 | Contract | CAP | | | | | | | | | | | | | | | 622 | | | | | | 622 |
| 239 | 07.14 | HP Products Mfg #SRXP18 upright vac 18" | 2003 | 12 | 5 | 1 | ea | 494.39 | 494 | Contract | CAP | | | | | | 571 | | | | | | | | | | | | 817 | | | 1,390 |
| 240 | 07.14 | HP Products - "Voyager" Extractor | 2000 | 5 | | 1 | ea | 4,130.82 | 4,131 | Contract | CAP | 4,131 | | | | | 4,789 | | | | | 5,551 | | | | | 6,438 | | | | | 20,907 |
| 241 | 07.14 | RJ Kool-Unimac 30 lb. washer/extractor | 2008 | 10 | 8 | 1 | ea | 5,769.00 | 5,769 | Contract | CAP | | | | | | | | | 7,308 | | | | | | | | | | 9,821 | | 17,129 |
| 242 | 07.14 | Renard-Aquaclean extractor | 2008 | 10 | 8 | 1 | ea | 2,539.00 | 2,539 | Contract | CAP | | | | | | | | | 3,218 | | | | | | | | | | 4,322 | | 7,539 |
| 243 | 07.14 | Direct Supply Equip-9 racks for housekeeping | 2007 | 10 | 7 | 9 | ea | 207.39 | 1,867 | Contract | CAP | | | | | | | | 2,296 | | | | | | | | | | 3,055 | | | 5,381 |
| 244 | 07.14 | Network Svcs- Vacuum for new carpet Terra 1238 Select Sweep W/238AH batt, onboard chrg | 2006 | 15 | 11 | 1 | ea | 4,023.69 | 4,024 | Contract | CAP | | | | | | | | | | | | 4,670 | | | | | | | | | 5,570 |
| 245 | 07.14 | Renard - 20" burnisher SN 21118 | 2005 | 15 | 10 | 1 | ea | 949.00 | 949 | Contract | CAP | | | | | | | | | | | 1,275 | | | | | | | | | | 1,275 |
| 246 | 07.14 | Direct Supply Equip - Economy floor machine | 2004 | 10 | 4 | 1 | ea | 820.50 | 820 | Contract | CAP | | | | | 778 | | | | | | | | | | 1,043 | | | | | | 1,810 |
| 247 | 07.14 | Direct Supply - Janitor cart/cabinet | 2004 | 15 | 9 | 1 | ea | 180.27 | 180 | Contract | CAP | | | | | | | | | | 235 | | | | | | | | | | | 735 |
| 248 | 07.14 | HP Products - Floor Scrubber | 2000 | 15 | 5 | 1 | ea | 783.75 | 784 | Contract | CAP | | | | | | 909 | | | | | | | | | | | | | | | 909 |
| 249 | 07.14 | Direct Supply Equip - linen cart & 32 gal hamper | 2004 | 15 | 9 | 1 | lot | 875.99 | 876 | Contract | CAP | | | | | | | | | | 882 | | | | | | | | | | | 882 |
| 250 | 07.14 | Housekeeping equipment | 2011 | 3 | 1 | 1 | Allowance | 2,500.00 | 2,500 | Contract | CAP | | 2,575 | | | 2,814 | | | 3,075 | | | 3,360 | | | 3,671 | | | 4,012 | | | 4,384 | 23,890 |
| | | | | | | | | | Expense Housekeeping Equipment Subtotal | | | 4,131 | 2,575 | | | 4,184 | 8,219 | 8,871 | 6,570 | 10,524 | 1,117 | 11,396 | 7,443 | 831 | 3,671 | 3,877 | 7,297 | 13,248 | 7,379 | 14,144 | 5,284 | 118,544 |
| | 07.15 | Pool & Fitness Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 251 | 07.15 | Replace/upgrade fitness/therapy equipment | 1997 | 5 | 2 | 1 | Allowance | 10,000.00 | 10,000 | Contract | CAP | | | 10,609 | | | | | 12,299 | | | | | 14,258 | | | | | 16,528 | | | 53,694 |
| | | | | | | | | | Expense Pool & Fitness Equipment Subtotal | | | | | 10,609 | | | | | 12,299 | | | | | 14,258 | | | | | 16,528 | | | 53,694 |
| | | | | | | | | | Expense Total | | | 319,430 | 176,281 | 122,520 | 33,282 | 76,840 | 020,534 | 88,208 | 179,734 | 55,105 | 52,655 | 342,058 | 42,472 | 123,631 | 87,149 | 91,914 | 344,780 | 174,617 | 183,378 | 61,835 | 155,137 | 3,462,058 |
| | | | | | | | | | Inflation: | | | | 3.00% | 6.09% | 9.27% | 12.56% | 15.93% | 19.41% | 22.99% | 26.68% | 30.48% | 34.39% | 38.42% | 42.58% | 46.85% | 51.26% | 55.80% | 60.47% | 65.28% | 70.24% | 75.35% | |

# Annual Budget Totals – To Property

**Shelter Care**
**Chart VII-A.1**

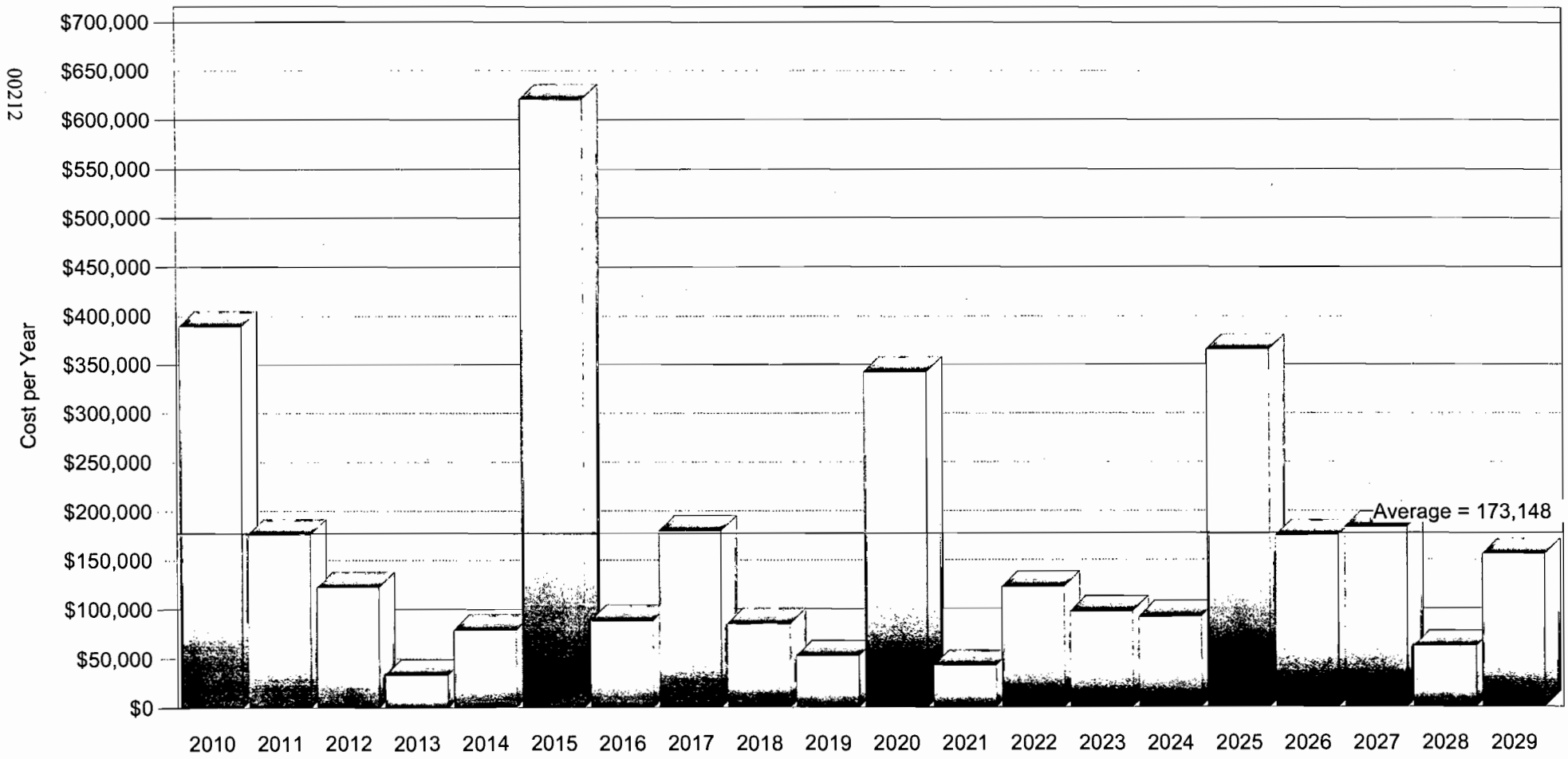
**2010-002: St Paul's Home, Belleville, IL**

**Report Parameters**

| | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

**Report Parameters**

| | | | |
|---|---|---|---|
| **Budget Types:** | Expense | **Units:** | 18 ALUs |
| **Divisions:** | All | **Area:** | 17,505 SF |
| **Minimum unit cost:** | 0.00 | **Year:** | 1985 |
| | | **Modified:** | 23 Sep 2010 |



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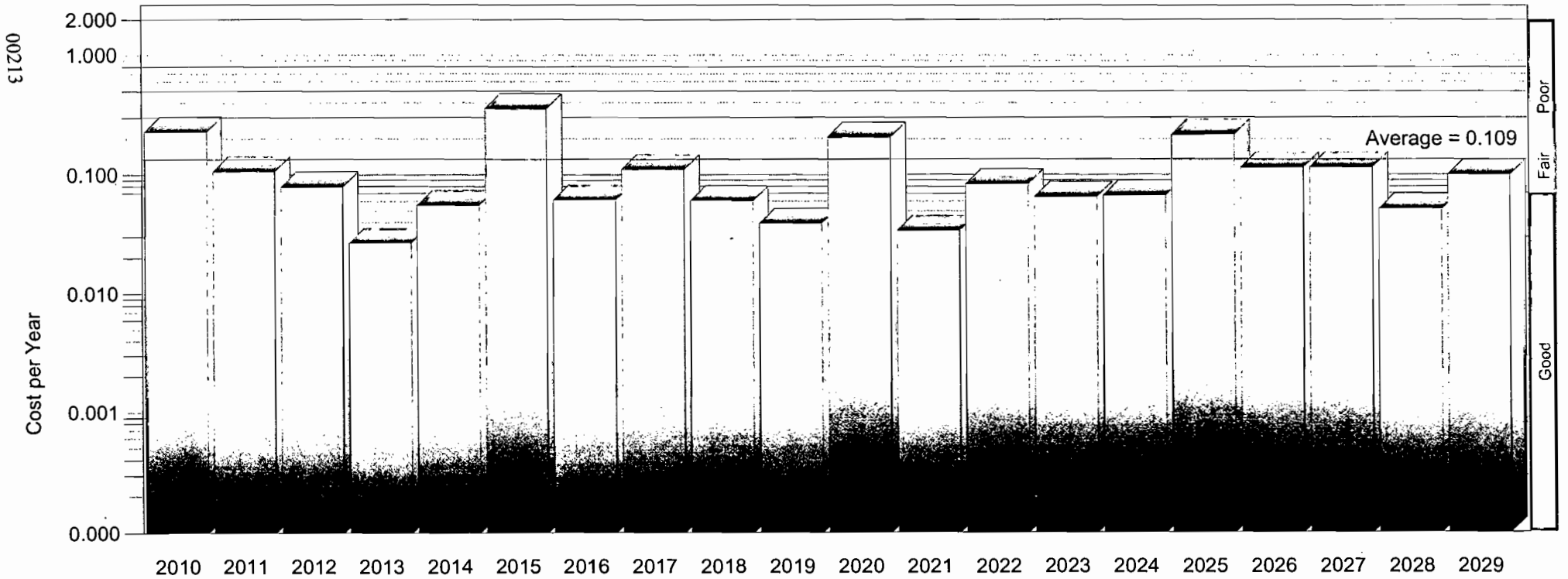
# Facility Condition Index – To Property

**2010-002: St Paul's Home, Belleville, IL**

**Shelter Care**
**Chart VII-C.1**

| Report Parameters | | Report Parameters | | | |
|---|---|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense | **Units:** | 18 ALUs |
| **Report Term:** | 20 years | **CRV Year:** | 2010 | **Area:** | 17,505 SF |
| **Inflation:** | 3.00% | **FCI:** | ( CAP + OPER ) / CRV | **Year:** | 1985 |
| **Area Type:** | Gross SF | **Minimum unit cost:** | 0.00 | **Modified:** | 23 Sep 2010 |



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# Annual Budget Totals

Nursing
Table VII-A

**2010-002: St Paul's Home, Belleville, IL**

**ort Parameters**

| | |
|---|---|
| Begin Year: | 2010 |
| Report Term: | 20 years |
| Inflation: | 3.00% |
| Area Type: | Gross SF |
| Classifications: | CAP, REP, IMP |

**Report Parameters**

| | | | |
|---|---|---|---|
| Budget Types: | Expense | Units: | 109 Beds |
| Divisions: | All | Area: | 44,672 SF |
| Minimum unit cost: | 0.00 | Year: | 1960 |
| | | Modified: | 24 Sep 2010 |

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 03.04 | Thermal & Moisture Protection Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 03.04 | Roof tune-up and misc repairs | 2010 | 3 | | 32,682 | sf | 0.05 | 1,634 | Contract | CAP | 1,634 | | | | 1,788 | | | | 1,951 | | | | | | | | | | | | |
| 2 | 03.04 | EPDM membrane roof, 60 mil, fully adhered | 2000 | 20 | 10 | 4,904 | sf | 9.50 | 46,588 | Contract | CAP | | | | | | | | | | | 62,810 | | | | | | | | | | |
| 3 | 03.04 | Reset 2 roof drains to facilitate drainage | 2010 | | | 2 | ea | 50.00 | 100 | Contract | CAP | 100 | | | | | | | | | | | | | | | | | | | | |
| 4 | 03.04 | Firestone EPDM membrane roof, fully adhered 60 mil | 1960 | 20 | 15 | 7,219 | sf | 9.50 | 68,771 | Contract | CAP | | | | | | | | | | | | | | | | | | | 120,549 | 120,549 |
| 5 | 03.04 | Ballasted coal tar roof | 2012 | 20 | 2 | 3,055 | sf | 4.75 | 14,511 | Contract | CAP | | | 15,395 | | | | | | | | | | | | | | | | | 15,395 |
| 6 | 03.04 | Ballasted coal tar roof | 2012 | 20 | 2 | 4,856 | sf | 4.75 | 22,829 | Contract | CAP | | | 24,219 | | | | | | | | | | | | | | | | | 24,219 |
| 7 | 03.04 | Ballasted built-up roof | 2012 | 20 | 2 | 12,435 | sf | 4.75 | 59,081 | Contract | CAP | | | 62,879 | | | | | | | | | | | | | | | | | 62,879 |
| 8 | 03.04 | EPDM membrane roof, fully adhere | 2011 | 20 | 1 | 240 | sf | 9.50 | 2,280 | Contract | CAP | | 2,345 | | | | | | | | | | | | | | | | | | 2,345 |
| 9 | 03.04 | Downspouts | 1975 | 20 | 5 | 48 | lf | 8.00 | 384 | Contract | CAP | | | | | | 445 | | | | | | | | | | | | | | 445 |
| 10 | 03.04 | Gutters & downspouts | 1995 | 20 | 5 | 115 | lf | 7.00 | 805 | Contract | CAP | | | | | | 933 | | | | | | | | | | | | | | 933 |
| 11 | 03.04 | Asphalt shingles | 1995 | 20 | 5 | 481 | sf | 2.13 | 1,010 | Contract | CAP | | | | | | 1,171 | | | | | | | | | | | | | | 1,171 |
| | | | | | | | | Expense Thermal & Moisture Protection Systems Subtotal | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 1,734 | 2,348 | 102,292 | 1,788 | | 2,549 | 1,951 | | | 2,132 | 62,810 | | 2,338 | | | 3,544 | | | 2,742 | 120,549 | 365,681 |
| | 03.05 | Exterior Wall & Finish Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 | 03.05 | Pressure wash & seal arch precast at rear of chapel | 2010 | 5 | | 1 | ls | 400.00 | 500 | In-house | CAP | 500 | | | | | 569 | | | | | 672 | | | | | 779 | | | | | 2,531 |
| 13 | 03.05 | Repair mosaic panel on south elevation of Burial Wing | 2010 | | | 1 | ls | 500.00 | 500 | Contract | CAP | 500 | | | | | | | | | | | | | | | | | | | | 500 |
| | | | | | | | | Expense Exterior Wall & Finish Systems Subtotal | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 1,000 | | | | | 569 | | | | | 672 | | | | | 779 | | | | | 3,031 |
| | 03.07 | Doors, Windows & Hardware | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 | 03.07 | Fixed sash HM windows (interior) 4 x 3 | 1985 | 25 | | 4 | ea | 335.00 | 1,340 | Contract | CAP | 1,340 | | | | | | | | | | | | | | | | | | | 1,340 |
| 15 | 03.07 | Single hung alum windows 30 x 54 | 1975 | 25 | 15 | 74 | ea | 525.00 | 38,850 | Contract | CAP | | | | | | | | | | | | | | | | 60,527 | | | | 60,527 |
| 16 | 03.07 | Single hung alum windows 36 x 54 | 1985 | 25 | 5 | 34 | ea | 525.00 | 17,850 | Contract | CAP | | | | | | 20,693 | | | | | | | | | | | | | | 20,693 |
| 17 | 03.07 | Single hung alum window 30 x 54 | 1975 | 25 | 15 | 26 | ea | 525.00 | 13,650 | Contract | CAP | | | | | | | | | | | | | | | | 21,268 | | | | 21,268 |
| 18 | 03.07 | Replace wood doors & frames exiting chapel on to roof | 2015 | 25 | 5 | 2 | ea | 900.00 | 1,800 | Contract | CAP | | | | | | 2,087 | | | | | | | | | | | | | | 2,087 |
| 19 | 03.07 | Hollow core flush doors at baths | 1975 | 30 | 25 | 19 | ea | 140.00 | 2,660 | Contract | CAP | | | | | | | | | | | | | | | | | | | | |
| 20 | 03.07 | Hollow core flush doors at baths | 1965 | 30 | 15 | 22 | ea | 140.00 | 3,080 | Contract | CAP | 25 | 43 | 54 | 67 | 81 | 98 | 110 | 130 | 165 | 174 | 192 | 209 | 222 | 233 | 240 | 244 | 244 | 240 | 233 | 224 | 3,242 |
| 21 | 03.07 | HM door & locket | 1965 | 25 | 5 | 5 | ea | 535.00 | 2,675 | Contract | CAP | | | | | | 3,391 | | | | | | | | | | | | | | 3,391 |
| 22 | 03.07 | HM door & locket | 1995 | 25 | 10 | 1 | ea | 585.00 | 585 | Contract | CAP | | | | | | | | | | | 766 | | | | | | | | | 766 |
| 23 | 03.07 | HM door & locket | 1975 | 25 | 15 | 1 | ea | 585.00 | 585 | Contract | CAP | | | | | | | | | | | | | | | | 911 | | | | 911 |
| 24 | 03.07 | Fire doors (interior wood) | 1975 | 25 | 15 | 2 | pair | 1,500.00 | 3,000 | Contract | CAP | | | | | | | | | | | | | | | | 4,674 | | | | 4,674 |
| 25 | 03.07 | Fire doors (exterior wood) | 1965 | 25 | | 1 | pair | 1,500.00 | 1,500 | Contract | CAP | 1,500 | | | | | | | | | | | | | | | | | | | 1,500 |
| 26 | 03.07 | Fire doors (exterior wood) | 1975 | 25 | 15 | 1 | ea | 1,500.00 | 1,500 | Contract | CAP | | | | | | | | | | | | | | | | 2,337 | | | | 2,337 |
| 27 | 03.07 | Fire doors (interior wood) | 1965 | 25 | 5 | 1 | ea | 1,500.00 | 1,500 | Contract | CAP | | | | | | 1,739 | | | | | | | | | | | | | | 1,739 |
| 28 | 03.07 | Fire doors (interior wood) | 1965 | 25 | 5 | 1 | ea | 1,500.00 | 1,500 | Contract | CAP | | | | | | 1,739 | | | | | | | | | | | | | | 1,739 |
| 29 | 03.07 | Alum storefront w/ pair of doors & closers | 1965 | 25 | | 144 | sf | 40.50 | 5,832 | Contract | CAP | 5,832 | | | | | | | | | | | | | | | | | | | 5,832 |
| 30 | 03.07 | Alum storefront w/ pair of doors & closers | 1985 | 25 | | 182 | sf | 40.50 | 7,371 | Contract | CAP | 7,371 | | | | | | | | | | | | | | | | | | | 7,371 |
| 31 | 03.07 | Alum storefront w/ pair of doors & closers | 1975 | 25 | 15 | 1 | ea | 5,210.00 | 5,210 | Contract | CAP | | | | | | | | | | | | | | | | 8,117 | | | | 8,117 |
| 32 | 03.07 | Alum storefront w/ pair of doors & closers | 1985 | 25 | 5 | 1 | ea | 5,210.00 | 5,210 | Contract | CAP | | | | | | 6,049 | | | | | | | | | | | | | | 6,049 |
| 33 | 03.07 | Wood exterior doors w/ HM frame | 1965 | 25 | 5 | 2 | ea | 1,125.00 | 2,250 | Contract | CAP | | | | | | 2,608 | | | | | | | | | | | | | | 2,608 |
| 34 | 03.07 | Wood framed storefront w/ pair of doors & closers | 1985 | 25 | | 111 | sf | 40.50 | 4,496 | Contract | CAP | 4,496 | | | | | | | | | | | | | | | | | | | 4,496 |
| 35 | 03.07 | Unit entry doors 42" solid core flush | 1975 | 25 | 15 | 23 | ea | 400.00 | 9,200 | Contract | CAP | | | | | | | | | | | | | | | | 14,333 | | | | 14,333 |
| 36 | 03.07 | Unit entry doors 42" solid core flush w 2 uneven leaves | 1965 | 25 | 5 | 22 | ea | 550.00 | 11,900 | Contract | CAP | | | | | | 12,752 | | | | | | | | | | | | | | 12,752 |
| | | | | | | | | Expense Doors, Windows & Hardware Subtotal | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 20,574 | 43 | 54 | 67 | 81 | 51,147 | 110 | 130 | 165 | 174 | 970 | 209 | 222 | 233 | 240 | 112,410 | 244 | 240 | 233 | 224 | 187,751 |
| | 03.08 | Vertical Circulation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 37 | 03.08 | Modernize 2 stop hydraulic elevator | 1985 | 25 | | 1 | ea | 105,000.00 | 105,000 | Contract | CAP | 105,000 | | | | | | | | | | | | | | | | | | | 105,000 |
| 38 | 03.08 | Modernize 2 stop hydraulic elevator | 1985 | 25 | | 1 | ea | 105,000.00 | 105,000 | Contract | CAP | 105,000 | | | | | | | | | | | | | | | | | | | 105,000 |
| 39 | 03.08 | Upgrade elevator cab finishes | 1975 | 20 | 5 | 1 | ls | 12,000.00 | 12,000 | Contract | CAP | | | | | | 13,911 | | | | | | | | | | | | | | 13,911 |
| 40 | 03.08 | Upgrade elevator cab finishes | 1985 | 20 | 15 | 1 | ls | 12,000.00 | 12,000 | Contract | CAP | | | | | | | | | | | | | | | | 16,896 | | | | 16,896 |
| | | | | | | | | Expense Vertical Circulation Subtotal | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 210,000 | | | | | 13,911 | | | | | | | | | | 16,896 | | | | | 240,807 |
| | 03.09 | Exterior Paint & Caulk | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 41 | 03.09 | Paint wood doors & frames exiting chapel on to roof | 2010 | 4 | | 2 | ea | 65.00 | 130 | In-house | CAP | 130 | | | | 146 | | | | 165 | | | | 183 | | | | 209 | | | | 833 |

Attachment 25 - p.32

FacilityForecast
Forecasting the Future

# Annual Budget Totals

Nursing
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| | Cat. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 43 | 03.09 | Paint CMU generator house | 2007 | 4 | 2 | 975 | sf | 2.00 | 1,950 | Contract | CAP | | | 1,963 | | | | 2,709 | | | | 2,488 | | | | 2,793 | | | | 3,150 | | 13,609 |
| 45 | 03.09 | Paint 6'2" fixed sash HM window frames | 2010 | 6 | | 5 | ea | 55.00 | 275 | Contract | CAP | 275 | | | | | | 325 | | | | | | 392 | | | | | | 465 | | 1,484 |
| 44 | 03.09 | Paint 2'8x5' fixed sash HM window frames (stained glass) | 2010 | 6 | | 6 | ea | 35.00 | 315 | Contract | CAP | 315 | | | | | | 378 | | | | | | 449 | | | | | | 536 | | 1,677 |
| 45 | 03.09 | Paint exterior CMU walls | 2012 | 7 | 2 | | ls | 450.00 | | In-house | CAP | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | Expense Exterior Paint & Caulk Subtotal | | 720 | | 1,963 | | 149 | | 2,813 | | 165 | | 2,488 | | 1,027 | | 2,793 | | 209 | | 4,154 | | 16,551 |
| | 03.10 | Specials | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 46 | 03.10 | Common area toilet accessories | 1990 | 20 | | 4 | sys | 100.00 | 400 | Contract | CAP | 400 | | | | | | | | | | 538 | | | | | | | | | | 938 |
| 47 | 03.10 | Stained glass | 1945 | 80 | 25 | 1 | lot | 5,000.00 | 5,000 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 48 | 03.10 | Folding panel partitions | 1975 | 25 | | 409 | sf | 90.50 | 36,653 | Contract | CAP | 36,653 | | | | | | | | | | | | | | | | | | | | 36,653 |
| 49 | 03.10 | Folding accordion wall panels | 1995 | 25 | | 120 | sf | 87.50 | 10,350 | Contract | CAP | 10,350 | | | | | | | | | | | | | | | | | | | | 10,350 |
| 50 | 03.10 | Ecclesiastical accessments | 1965 | 27 | | 1 | Allowance | 10,000.00 | 10,000 | Contract | CAP | 10,000 | | | | | | | | | | | | | | | | | | | | 10,000 |
| | | | | | | | | | | Expense Specials Subtotal | | 57,403 | | | | | | | | | | 538 | | | | | | | | | 57,940 |
| | 03.12 | Appliances | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 51 | 03.12 | Refrig (residential) | 1975 | 15 | 10 | 6 | ea | 479.00 | 2,874 | Contract | CAP | | | | | | | | | | | 3,862 | | | | | | | | | | 3,862 |
| 52 | 03.12 | Microwave (residential) | 1975 | 6 | | 1 | ea | 150.00 | 150 | Contract | CAP | 150 | | | | | 174 | | | | | 202 | | | | | 234 | | | | | 759 |
| 53 | 03.12 | Microwave (residential) | 1965 | 6 | | 1 | ea | 150.00 | 150 | Contract | CAP | 150 | | | | | 174 | | | | | 202 | | | | | 234 | | | | | 759 |
| 54 | 03.12 | Microwave (residential) | 1965 | 5 | | 1 | ea | 150.00 | 150 | Contract | CAP | 150 | | | | | 174 | | | | | 202 | | | | | 234 | | | | | 759 |
| | | | | | | | | | | Expense Appliances Subtotal | | 450 | | | | | 522 | | | | | 4,467 | | | | | 701 | | | | 6,140 |
| | 04.01 | HVAC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.01 | Cooling tower ICT4 54 Evapco | 2000 | 25 | 15 | 1 | ea | 5,940.00 | 5,940 | Contract | CAP | | | | | | | | | | | | | | | | 9,254 | | | | | 9,254 |
| | 04.01 | Exhaust fans | 1995 | 20 | | 6 | ea | 650.00 | 3,900 | Contract | CAP | 3,900 | | | | | | | | | | | | | | | | | | | | 3,900 |
| | 04.01 | Exhaust fans | 2000 | 20 | 10 | 3 | ea | 3,503.00 | 10,500 | Contract | CAP | | | | | | | | | | | 14,111 | | | | | | | | | | 14,111 |
| | 04.01 | Oscillating fans in corridors | 1975 | 4 | 1 | 6 | ea | 150.00 | 900 | Contract | CAP | | 927 | | | | 1,043 | | | | 1,174 | | | | 1,322 | | | | 1,488 | | 5,954 |
| | 04.01 | Window AC unit | 1998 | 20 | 8 | 5 | ea | 441.00 | 2,205 | Contract | CAP | | | | | | | | | 2,793 | | | | | | | | | | | | 2,793 |
| | 04.01 | Window AC unit | 1998 | 20 | 8 | 1 | ea | 441.00 | 441 | Contract | CAP | | | | | | | | | 559 | | | | | | | | | | | | 559 |
| | 04.01 | Window AC unit | 1993 | 20 | 8 | 2 | ea | 441.00 | 882 | Contract | CAP | | | | | | | | | 1,117 | | | | | | | | | | | | 1,117 |
| | 04.01 | Thru wall PTAC units | 1975 | 15 | 5 | 35 | ea | 1,050.00 | 36,750 | Contract | CAP | | | | | | 42,603 | | | | | | | | | | 57,255 | | | | | 99,859 |
| | 04.01 | Rooftop condensing unit for Roediger corridor HVAC | 1975 | 15 | 10 | 1 | ea | 15,400.00 | 15,400 | Contract | CAP | | | | | | | | | | | 20,696 | | | | | | | | | | 20,696 |
| | 04.01 | Fan/evaporator unit for Roediger corridor HVAC | 2012 | 25 | 2 | 1 | ea | 19,500.00 | 19,500 | Contract | CAP | | | 19,627 | | | | | | | | | | | | | | | | | | 19,627 |
| | 04.01 | Exhaust fans | 1990 | 20 | | 8 | ea | 375.00 | 3,000 | Contract | CAP | 3,000 | | | | | | | | | | | | | | | | | | | | 3,000 |
| | 04.01 | Ceiling fans | 1975 | 6 | | 1 | ea | 200.00 | 200 | Contract | CAP | 200 | | | | | 232 | | | | | 269 | | | | | 312 | | | | | 1,012 |
| | 04.01 | Ceiling fans | 1975 | 6 | | 2 | ea | 200.00 | 400 | Contract | CAP | 400 | | | | | 464 | | | | | 538 | | | | | 623 | | | | | 2,024 |
| | 04.01 | Ceiling fans | 1975 | 6 | | 3 | ea | 200.00 | 600 | Contract | CAP | 600 | | | | | 696 | | | | | 808 | | | | | 935 | | | | | 3,037 |
| | 04.01 | Sanyo fan coil unit | 1997 | 20 | 7 | 1 | ea | 3,500.00 | 3,500 | Contract | CAP | | | | | | | | 4,305 | | | | | | | | | | | | | 4,305 |
| | 04.01 | Sanyo condensing unit | 2009 | 15 | 14 | 1 | ea | 2,200.00 | 2,200 | Contract | CAP | | | | | | | | | | | | | | | 3,329 | | | | | | 3,329 |
| | 04.01 | cooling 24TC0080A7300A American Standard | 2007 | 15 | 12 | 1 | ea | 5,500.00 | 5,500 | Contract | CAP | | | | | | | | | | | | | 7,842 | | | | | | | | 7,842 |
| | 04.01 | Roof exhaust fan (residential) | 1996 | 9 | | 1 | ea | 200.00 | 200 | Contract | CAP | 200 | | | 219 | | | | 239 | | 261 | | | 285 | | | 312 | | | 340 | | 1,658 |
| | 04.01 | Intake air louvers w/ 4 motor operators 8' x 11' | 1995 | 25 | 10 | 1 | ea | 9,340.00 | 9,340 | Contract | CAP | | | | | | | | | | | 12,652 | | | | | | | | | | 12,652 |
| | 04.01 | Fan/evaporator unit for chapel | 1981 | 30 | 1 | 1 | ea | 11,000.00 | 11,000 | Contract | CAP | | 11,330 | | | | | | | | | | | | | | | | | | | 11,330 |
| | 04.01 | Rooftop condensing unit for chapel | 2009 | 20 | 19 | 1 | ea | 25,400.00 | 25,400 | Contract | CAP | | | | | | | | | | | | | | | | | | | 44,539 | | 44,539 |
| | 04.01 | Hydronic baseboard heat 2' | 1995 | 25 | | 4 | ea | 220.00 | 880 | Contract | CAP | 880 | | | | | | | | | | | | | | | | | | | | 880 |
| | 04.01 | Oscillating fans in corridors | 1965 | 4 | 3 | 4 | ea | 150.00 | 600 | Contract | CAP | | | | 656 | | | | 739 | | | | 831 | | | | 935 | | | 1,052 | | 4,211 |
| | 04.01 | Oscillating fans in corridors | 1963 | 4 | 3 | 4 | ea | 150.00 | 600 | Contract | CAP | | | | 656 | | | | 739 | | | | 831 | | | | 935 | | | 1,052 | | 4,211 |
| | 04.01 | Hydronic wall cabinet heater 3' | 1965 | 25 | 9 | 1 | ea | 292.00 | 292 | Contract | CAP | | | | | | 329 | | | | | | | | | | | | | | | 329 |
| | 04.01 | Carrier Gemini condenser serving chapel | 1995 | 20 | 15 | 1 | ea | 15,000.00 | 15,000 | Contract | CAP | | | | | | | | | | | | | | | | 23,370 | | | | | 23,370 |
| | 04.01 | Cabinet unit heater electric | 1995 | 25 | 5 | 1 | ea | 2,150.00 | 2,150 | Contract | CAP | | | | | | 2,492 | | | | | | | | | | | | | | | 2,492 |
| | 04.01 | Cabinet unit heater electric | 1995 | 25 | | 1 | ea | 2,150.00 | 2,150 | Contract | CAP | 2,150 | | | | | | | | | | | | | | | | | | | | 2,150 |
| | 04.01 | Cabinet unit heater | 1990 | 25 | 10 | 2 | ea | 955.00 | 1,910 | Contract | CAP | | | | | | | | | | | 2,648 | | | | | | | | | | 2,648 |
| | 04.01 | Replace circulating water pipe | 2020 | 40 | 10 | 18,950 | sf | 10.00 | 189,500 | Contract | CAP | | | | | | | | | | | 227,794 | | | | | | | | | | 227,794 |
| | 04.01 | Transom circulating fans | 1965 | 8 | 3 | 2 | ea | 100.00 | 200 | Contract | CAP | | | | 219 | | | | | | 261 | | | | | | 312 | | | | | 791 |
| | 04.01 | Chiller FWC 3011 3 Drains | 1993 | 30 | 9 | 1 | ea | 25,500.00 | 25,500 | Contract | CAP | | | | | | | | | | 33,272 | | | | | | | | | | | 33,272 |
| | | | | | | | | | | Expense HVAC Subtotal | | 11,330 | 12,257 | 19,627 | 1,748 | | 47,599 | 339 | 6,750 | 4,469 | 34,968 | 279,414 | 1,861 | 5,127 | 1,322 | 3,328 | 94,241 | | 1,488 | 340 | 48,643 | 574,851 |
| | 04.02 | Plumbing & Plumbing Fixtures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.02 | Faucets & valves in public restrooms | 1997 | 8 | 2 | 4 | ea | 175.00 | 700 | In-house | CAP | | | 742 | | | | | | 951 | | | | 998 | | | | | | 1,187 | | 3,759 |
| | 04.02 | Water cooler | 1975 | 25 | 15 | 2 | ea | 1,400.00 | 2,800 | Contract | CAP | | | | | | | | | | | 4,362 | | | | | | | | | | 4,362 |
| | 04.02 | Water cooler | 1985 | 25 | | 1 | ea | 1,400.00 | 1,400 | Contract | CAP | 1,400 | | | | | | | | | | | | | | | | | | | | 1,400 |
| | 04.02 | Water cooler | 1985 | 25 | | 1 | ea | 1,400.00 | 1,400 | Contract | CAP | 1,400 | | | | | | | | | | | | | | | | | | | | 1,400 |
| | 04.02 | Water cooler | 1985 | 25 | 8 | 1 | ea | 1,400.00 | 1,400 | Contract | CAP | | | | | | 1,573 | | | | | | | | | | | | | | | 1,573 |
| | 04.02 | Halo water chiller | 1995 | 25 | 5 | 1 | ea | 2,475.00 | 2,475 | Contract | CAP | | | | | | 2,869 | | | | | | | | | | | | | | | 2,869 |
| | 04.02 | Faucets & flush valves | 1973 | 20 | 8 | 39 | ea | 93.00 | 3,725 | Contract | CAP | 202 | 205 | 244 | 239 | 249 | 273 | 272 | 297 | 256 | 249 | 240 | 239 | 227 | 226 | 230 | 239 | 253 | 270 | 291 | 314 | 5,041 |
| | 04.02 | Faucets & flush valves | 1985 | 20 | 15 | 4 | ea | 95.00 | 380 | Contract | CAP | 15 | 13 | 11 | 11 | 11 | 13 | 15 | 18 | 21 | 24 | 28 | 31 | 34 | 36 | 37 | 38 | 37 | 37 | 35 | 34 | 500 |
| | 04.02 | Faucets & flush valves | 1965 | 20 | 15 | 41 | ea | 95.00 | 3,895 | Contract | CAP | 183 | 181 | 176 | 177 | 150 | 187 | 198 | 211 | 228 | 248 | 284 | 283 | 293 | 314 | 327 | 336 | 343 | 347 | 350 | 351 | 5,166 |
| | 04.02 | Eye wash station | 2000 | 25 | 15 | 1 | ea | 2,359.00 | 2,359 | Contract | CAP | | | | | | | | | | | | | | | | 3,675 | | | | | 3,675 |
| | 04.02 | Bed pan washer | 1965 | 20 | 15 | 1 | ea | 1,875.00 | 1,875 | Contract | CAP | | | | | | | | | | | | | | | | 2,921 | | | | | 2,921 |
| | | | | | | | | | | Expense Plumbing & Plumbing Fixtures Subtotal | | 3,205 | 418 | 1,176 | 447 | 460 | 4,965 | 485 | 1,357 | 504 | 520 | 632 | 545 | 1,556 | 576 | 594 | 11,572 | 633 | 1,612 | 677 | 700 | 33,739 |
| | 04.03 | Fire Sprinkler & Life Safety Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.03 | Fire alarm system inspection, maint & monitoring | 2019 | 1 | | 1 | ls | 2,152.50 | 2,153 | Contract | CAP | 2,353 | 2,423 | 2,496 | 2,571 | 2,648 | 2,727 | 2,809 | 2,893 | 2,980 | 3,069 | 3,162 | 3,256 | 3,354 | 3,455 | 3,559 | 3,665 | 3,775 | 3,888 | 4,005 | 4,125 | 63,213 |
| | 04.03 | Replace fire sprinkler system | 1975 | 40 | 5 | 44,672 | sf | 1.75 | 78,176 | Contract | CAP | | | | | | 90,627 | | | | | | | | | | | | | | | 90,627 |
| | 04.03 | Upgrade fire alarm panels | 1975 | 20 | 5 | 1 | ls | 16,750.00 | 16,750 | Contract | CAP | | | | | | 21,736 | | | | | | | | | | | | | | | 21,736 |

FacilityForecast®
Forecasting the Future

2010-002: St Paul's Home, Belleville, IL

# Annual Budget Totals

Nursing
Table VII-A

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 04.03 | Door hold open device (magnetic) | 1975 | 25 | 20 | 2 | pair | 700.00 | 1,400 | Contract | CAP | | | | | | | | | | | | | | | | | | | | |
| | 04.03 | Door hold open device (magnetic) | 1985 | 25 | | 1 | pair | 700.00 | 700 | Contract | CAP | 701 | | | | | | | | | | | | | | | | | | | |
| | 04.03 | Door hold open device (magnetic) | 1955 | 25 | 5 | 1 | pair | 700.00 | 700 | Contract | CAP | | | | | | 811 | | | | | | | | | | | | | | 700 |
| | 04.03 | Door hold open device (magnetic) | 1965 | 25 | 5 | 1 | pair | 700.00 | 700 | Contract | CAP | | | | | | 811 | | | | | | | | | | | | | | 811 |
| | 04.03 | Smoke detectors | 1975 | 10 | 5 | 12 | ea | 277.00 | 3,324 | Contract | CAP | | | | | | 3,853 | | | | | | | | | | 5,179 | | | | 9,032 |
| | 04.03 | Smoke detectors | 1995 | 10 | 5 | 1 | ea | 277.00 | 277 | Contract | CAP | | | | | | 321 | | | | | | | | | | 432 | | | | 753 |
| | 04.03 | Smoke detectors | 1985 | 10 | 5 | 7 | ea | 277.00 | 1,919 | Contract | CAP | | | | | | 2,248 | | | | | | | | | | 3,021 | | | | 5,269 |
| | 04.03 | Smoke detectors | 1965 | 10 | 5 | 5 | ea | 277.00 | 1,385 | Contract | CAP | | | | | | 1,606 | | | | | | | | | | 2,158 | | | | 3,763 |
| | 04.03 | Smoke detectors | 1985 | 10 | 5 | 11 | ea | 277.00 | 3,047 | Contract | CAP | | | | | | 3,532 | | | | | | | | | | 4,747 | | | | 8,279 |
| | 04.03 | Pull station | 1975 | 20 | 5 | 3 | ea | 131.00 | 393 | Contract | CAP | | | | | | 456 | | | | | | | | | | | | | | 456 |
| | 04.03 | Pull station | 1985 | 20 | 15 | 3 | ea | 131.00 | 393 | Contract | CAP | | | | | | | | | | | | | | | | 612 | | | | 612 |
| | 04.03 | Pull station | 1955 | 20 | 15 | 3 | ea | 131.00 | 393 | Contract | CAP | | | | | | | | | | | | | | | | 612 | | | | 612 |
| | 04.03 | Pull station | 1995 | 20 | 5 | 1 | ea | 131.00 | 131 | Contract | CAP | | | | | | 152 | | | | | | | | | | | | | | 152 |
| | 04.03 | Pull station | 1985 | 20 | 15 | 1 | ea | 131.00 | 131 | Contract | CAP | | | | | | | | | | | | | | | | 204 | | | | 204 |
| | 04.03 | Pull station | 1975 | 20 | 15 | 3 | ea | 131.00 | 393 | Contract | CAP | | | | | | | | | | | | | | | | 612 | | | | 612 |
| | 04.03 | Horn/strobe annunciator | 1975 | 15 | 1 | 2 | ea | 222.00 | 444 | Contract | CAP | | 457 | | | | | | | | | | | | | | | | | 779 | 1,236 |
| | 04.03 | Horn/strobe annunciator | 1955 | 15 | 9 | 1 | ea | 222.00 | 222 | Contract | CAP | | | | | | | | | | 290 | | | | | | | | | | 290 |
| | 04.03 | Horn/strobe annunciator | 1985 | 15 | 11 | 4 | ea | 222.00 | 888 | Contract | CAP | | | | | | | | | | | | 1,229 | | | | | | | | 1,229 |
| | 04.03 | Horn/strobe annunciator | 1995 | 15 | 3 | 1 | ea | 222.00 | 222 | Contract | CAP | | | | 743 | | | | | | | | | | | | | | | | 243 |
| | 04.03 | Horn/strobe annunciator | 1965 | 15 | 0 | 4 | ea | 222.00 | 888 | Contract | CAP | | | | | | | | | | 1,159 | | | | | | | | | | 1,159 |
| | 04.03 | Exit signs | 1965 | 12 | 11 | 9 | ea | 128.00 | 1,152 | Contract | CAP | | | | | | | | | | | | 1,595 | | | | | | | | 1,595 |
| | 04.03 | Exit signs | 1985 | 12 | 11 | 1 | ea | 128.00 | 128 | Contract | CAP | | | | | | | | | | | | 177 | | | | | | | | 177 |
| | 04.03 | Exit signs | 1965 | 12 | 3 | 2 | ea | 128.00 | 256 | Contract | CAP | | | | 280 | | | | | | | | | | | | 396 | | | | 676 |
| | 04.03 | Exit signs | 1965 | 12 | 3 | 5 | ea | 128.00 | 640 | Contract | CAP | | | | 609 | | | | | | | | | | | | 997 | | | | 1,606 |
| | 04.03 | Exit signs | 1975 | 12 | 1 | 4 | ea | 128.00 | 512 | Contract | CAP | | 537 | | | | | | | | | | | | 752 | | | | | | 1,289 |
| | 04.03 | Exit signs | 1975 | 12 | 1 | 3 | ea | 128.00 | 384 | Contract | CAP | | 390 | | | | | | | | | | | | 504 | | | | | | 959 |
| | | | | | | | | | Expense Fire Sprinkler & Life Safety Systems Subtotal | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 3,053 | 3,893 | 2,496 | 3,792 | 2,848 | 128,852 | 2,809 | 2,893 | 2,980 | 4,518 | 3,162 | 6,257 | 3,354 | 4,771 | 3,658 | 22,838 | 3,775 | 3,888 | 4,005 | 4,904 | 216,186 |
| | 04.04 | Electrical | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 04.04 | Infrared electric panel study | 2012 | 5 | 2 | 44,672 | sf | 0.03 | 1,340 | Contract | CAP | | | 1,422 | | | | | 1,848 | | | | | 1,911 | | | | | 2,215 | | | 7,196 |
| | 04.04 | Wall pac | 1995 | 20 | 5 | 5 | ea | 275.00 | 1,375 | Contract | CAP | | | | | | 1,594 | | | | | | | | | | | | | | | 1,594 |
| | 04.04 | Exterior wall sconce | 1975 | 20 | 5 | 2 | ea | 145.00 | 290 | Contract | CAP | | | | | | 336 | | | | | | | | | | | | | | | 336 |
| | 04.04 | 2x2 lay in fluor fixtures w/ parabolic lens | 1975 | 25 | 15 | 24 | ea | 225.00 | 5,400 | Contract | CAP | | | | | | | | | | | | | | | | 8,413 | | | | | 8,413 |
| | 04.04 | 2x2 lay in fluor fixtures | 1975 | 25 | 15 | 4 | ea | 155.00 | 620 | Contract | CAP | | | | | | | | | | | | | | | | 966 | | | | | 966 |
| | 04.04 | 1x4 fluor fixtures | 1995 | 25 | 10 | 8 | ea | 166.00 | 1,328 | Contract | CAP | | | | | | | | | | | 1,785 | | | | | | | | | | 1,785 |
| | 04.04 | 1x4 surface mtd fluor fixtures | 1975 | 25 | 15 | 8 | ea | 155.00 | 1,240 | Contract | CAP | | | | | | | | | | | | | | | | 1,932 | | | | | 1,932 |
| | 04.04 | 1x4 surface mtd fluor fixtures | 1975 | 25 | 15 | 7 | ea | 155.00 | 1,085 | Contract | CAP | | | | | | | | | | | | | | | | 1,690 | | | | | 1,690 |
| | 04.04 | 1x4 surface mtd fluor fixtures | 1965 | 25 | 5 | 35 | ea | 155.00 | 5,425 | Contract | CAP | | | | | | 6,219 | | | | | | | | | | | | | | | 6,219 |
| | 04.04 | 1x4 fluor fixture w/ wrap around lens | 1965 | 25 | 5 | 10 | ea | 150.00 | 2,550 | Contract | CAP | | | | | | 3,079 | | | | | | | | | | | | | | | 3,079 |
| | 04.04 | 1x4 fluor fixtures recessed in drywall | 1985 | 25 | | 9 | ea | 165.00 | 1,494 | Contract | CAP | 1,494 | | | | | | | | | | | | | | | | | | | | 1,494 |
| | 04.04 | Lay in fluor light fixtures | 1955 | 25 | | 58 | ea | 166.00 | 9,628 | Contract | CAP | 9,628 | | | | | | | | | | | | | | | | | | | | 9,628 |
| | 04.04 | 2x4 lay in fluor fixtures | 1965 | 25 | | 4 | ea | 166.00 | 664 | Contract | CAP | 664 | | | | | | | | | | | | | | | | | | | | 664 |
| | 04.04 | Recessed soffit lights | 1975 | 20 | 5 | 4 | ea | 131.00 | 524 | Contract | CAP | | | | | | 607 | | | | | | | | | | | | | | | 607 |
| | 04.04 | Replace 600 kw, dual fuel, ONAN generator | 1995 | 30 | 15 | 1 | ea | 400,000.00 | 400,000 | Contract | CAP | | | | | | | | | | | | | | | | 523,187 | | | | | 523,187 |
| | 04.04 | Rebuild 600 kw, dual fuel, ONAN generator | 1995 | 15 | 3 | 1 | ea | 240,000.00 | 240,000 | Contract | CAP | | | | 262,254 | | | | | | | | | | | | | | | | | 262,254 |
| | 04.04 | Track lights | 1985 | 15 | 5 | 6 | ea | 150.00 | 900 | Contract | CAP | | | | | | 1,043 | | | | | | | | | | | | | | | 1,043 |
| | 04.04 | Down lights | 1965 | 25 | | 31 | ea | 110.00 | 3,410 | Contract | CAP | 3,410 | | | | | | | | | | | | | | | | | | | | 3,410 |
| | 04.04 | Down lights | 1965 | 25 | 5 | 13 | ea | 110.00 | 1,430 | Contract | CAP | | | | | | 1,658 | | | | | | | | | | | | | | | 1,658 |
| | 04.04 | Replace electrical panels | 1965 | 40 | 15 | 1 | ls | 100,000.00 | 100,000 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | 135,797 |
| | | | | | | | | | Expense Electrical Subtotal | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 15,196 | | 1,422 | 262,254 | | 14,637 | | 1,848 | | | 1,785 | | 1,911 | | 781,985 | | 2,215 | | | 1,083,653 |
| | 05.02 | Common Area Floor Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 147 | 05.02 | Carpet | 1975 | 20 | 5 | 92 | sy | 30.00 | 2,760 | Contract | CAP | | | | | | 3,306 | | | | | | | | | | | | | | | 3,306 |
| 148 | 05.02 | Carpet | 1985 | 20 | 15 | 41 | sy | 30.00 | 1,230 | Contract | CAP | | | | | | | | | | | | | | | | 2,010 | | | | | 2,010 |
| 149 | 05.02 | Vinyl floor in locker room | 1965 | 20 | 15 | 125 | sf | 6.25 | 781 | Contract | CAP | | | | | | | | | | | | | | | | 1,217 | | | | | 1,217 |
| 150 | 05.02 | Vinyl floor tile | 1965 | 20 | 15 | 33,000 | sf | 2.10 | 73,500 | Contract | CAP | | | | | | | | | | | | | | | | 114,511 | | | | | 114,511 |
| | | | | | | | | | Expense Common Area Floor Finishes Subtotal | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | 3,306 | | | | | | | | | | 117,738 | | | | | 120,937 |
| | 05.03 | Common Area Paint & Wall Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 151 | 05.03 | Paint interior common areas | 1997 | 7 | 1 | 1 | ls | 18,000.00 | 18,000 | Contract | CAP | | 18,540 | | | | | | | 22,802 | | | | | | | 28,043 | | | | | 69,385 |
| 152 | 05.03 | Recaulk crack in stair well at NE corner of building | 2010 | 40 | | 1 | ls | 200.00 | 200 | In-house | CAP | 200 | | | | | | | | | | | | | | | | | | | | 200 |
| | | | | | | | | | Expense Common Area Paint & Wall Finishes Subtotal | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 200 | 18,540 | | | | | | | 22,802 | | | | | | | 28,043 | | | | | 69,585 |
| | 05.04 | Common Area Ceiling Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 153 | 05.04 | Acoustical ceilings | 1975 | 25 | 5 | 35,000 | sf | 4.10 | 143,500 | Contract | CAP | | | | | | 166,356 | | | | | | | | | | | | | | | 166,356 |
| | | | | | | | | | Expense Common Area Ceiling Systems Subtotal | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | 166,356 | | | | | | | | | | | | | | | 166,356 |
| | 05.05 | Common Area Cabinets, Tops & Millwork | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 154 | 05.05 | Casework (wall & base) at nurses station | 1975 | 20 | 5 | 30 | lf | 719.50 | 21,585 | Contract | CAP | | | | | | 25,023 | | | | | | | | | | | | | | | 25,023 |
| 155 | 05.05 | Casework (wall & base) | 1975 | 20 | 5 | 6 | lf | 719.50 | 4,317 | Contract | CAP | | | | | | 5,005 | | | | | | | | | | | | | | | 5,005 |
| 156 | 05.05 | Casework (base only) | 1975 | 20 | 5 | 12 | lf | 344.50 | 4,134 | Contract | CAP | | | | | | 4,792 | | | | | | | | | | | | | | | 4,792 |
| 157 | 05.05 | Casework (base & wall) | 1985 | 20 | 15 | 10 | lf | 719.50 | 7,195 | Contract | CAP | | | | | | | | | | | | | | | | 11,210 | | | | | 11,210 |
| 158 | 05.05 | Casework (wall & base) | 1965 | 20 | 15 | 14 | ea | 719.50 | 10,073 | Contract | CAP | | | | | | | | | | | | | | | | 15,693 | | | | | 15,693 |
| 159 | 05.05 | Casework (wall & base) at nurses station | 1965 | 20 | 15 | 15 | lf | 719.50 | 10,793 | Contract | CAP | | | | | | | | | | | | | | | | 16,814 | | | | | 16,814 |
| 160 | 05.05 | Casework (base & wall) | 1965 | 20 | 15 | 46 | lf | 719.50 | 34,536 | Contract | CAP | | | | | | | | | | | | | | | | 53,806 | | | | | 53,806 |

[redacted], FacilityForecast
Forecasting the Future

# Annual Budget Totals

Nursing
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Expense Common Area Cabinets, Tops & Millwork Subtotal | | | | | | | | | | | | | | | 34,820 | | | | | | | | | | 97,523 | | | | | 132,343 |
| | 06.01 | Unit Refresh Allowance | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 151 | 06.01 | Furniture | 2011 | 20 | 1 | 58 | rooms | 610.00 | 34,600 | Contract | CAP | | 35,844 | | | | | | | | | | | | | | | | | | | 35,844 |
| 152 | 06.01 | Unit turns (painting, misc repairs and upgrades) | 2012 | 1 | | 12 | rooms | 500.00 | 6,000 | In-house | CAP | 6,000 | 6,180 | 6,365 | 6,556 | 6,753 | 6,956 | 7,164 | 7,379 | 7,601 | 7,829 | 8,063 | 8,305 | 8,555 | 8,811 | 9,076 | 9,348 | 9,628 | 9,917 | 10,215 | 10,521 | 161,222 |
| | | Expense Unit Refresh Allowance Subtotal | | | | | | | | | | 6,000 | 42,024 | 6,365 | 6,556 | 6,753 | 6,956 | 7,164 | 7,379 | 7,601 | 7,829 | 8,063 | 8,305 | 8,555 | 8,811 | 9,076 | 9,348 | 9,628 | 9,917 | 10,215 | 10,521 | 197,066 |
| | 06.02 | Unit Floor Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 153 | 06.02 | Vinyl floor tile | 1985 | 20 | 15 | 9,700 | sf | 2.10 | 20,370 | Contract | CAP | 881 | 948 | 929 | 928 | 841 | 978 | 1,033 | 1,100 | 1,191 | 1,285 | 1,382 | 1,478 | 1,566 | 1,644 | 1,708 | 1,758 | 1,794 | 1,817 | 1,830 | 1,838 | 27,134 |
| | | Expense Unit Floor Finishes Subtotal | | | | | | | | | | 881 | 948 | 929 | 928 | 841 | 978 | 1,033 | 1,100 | 1,191 | 1,285 | 1,382 | 1,478 | 1,566 | 1,644 | 1,708 | 1,758 | 1,794 | 1,817 | 1,830 | 1,838 | 27,134 |
| | 06.03 | Unit Paint & Wall Finishes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 154 | 06.03 | Ceramic tile at baths | 2026 | 40 | 10 | 26 | baths | 1,000.00 | 26,000 | Contract | CAP | | | | | | | | | | | 33,598 | | | | | | | | | | 33,598 |
| | | Expense Unit Paint & Wall Finishes Subtotal | | | | | | | | | | | | | | | | | | | | 33,598 | | | | | | | | | | 33,598 |
| | 06.04 | Unit Ceiling Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 155 | 06.04 | Acoustical ceiling tile | 1975 | 20 | 5 | 33,000 | sf | 4.10 | 143,500 | Contract | CAP | | | | | | 166,356 | | | | | | | | | | | | | | | 166,356 |
| | | Expense Unit Ceiling Systems Subtotal | | | | | | | | | | | | | | | 166,356 | | | | | | | | | | | | | | | 166,356 |
| | 06.05 | Unit MEP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 156 | 06.05 | Over bed light | 1995 | 25 | 5 | 42 | ea | 125.00 | 5,250 | Contract | CAP | | | | | | 6,089 | | | | | | | | | | | | | | | 6,089 |
| 157 | 06.05 | Over bed light | 1975 | 25 | 15 | 70 | ea | 125.00 | 8,500 | Contract | CAP | | | | | | | | | | | | | | | | 14,801 | | | | | 14,801 |
| 158 | 06.05 | Faucets & valves | 1997 | 25 | 2 | 75 | ea | 65.00 | 4,875 | Contract | CAP | 358 | 369 | 381 | 376 | 348 | 310 | 266 | 228 | 187 | 154 | 129 | 113 | 107 | 111 | 125 | 148 | 170 | 216 | 263 | 313 | 4,763 |
| | | Expense Unit MEP Subtotal | | | | | | | | | | 358 | 369 | 381 | 376 | 348 | 6,399 | 266 | 228 | 187 | 154 | 129 | 113 | 107 | 111 | 125 | 14,949 | 170 | 216 | 263 | 313 | 25,653 |
| | 06.06 | Unit Cabinets, Counter Tops & Millwork | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 159 | 06.06 | Built in chestnut wardrobe (replace with wood cabinets) | 1975 | 30 | 25 | 42 | ea | 1,817.50 | 79,285 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| | | Expense Unit Cabinets, Counter Tops & Millwork Subtotal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 06.08 | Unit Specials | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 160 | 06.08 | Privacy curtains | 2010 | 12 | | 58 | rooms | 800.00 | 46,400 | Contract | CAP | 46,400 | | | | | | | | | | | | 65,155 | | | | | | | 112,555 |
| | | Expense Unit Specials Subtotal | | | | | | | | | | 46,400 | | | | | | | | | | | | 65,155 | | | | | | | 112,555 |
| | 07.02 | Furnishings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 161 | 07.02 | Bedside table, chair & small chest | 2002 | 15 | 7 | 109 | sets | 860.00 | 104,640 | Contract | CAP | | | | | | | | 128,094 | | | | | | | | | | | | | 128,094 |
| 162 | 07.02 | Dining room table & chairs | 1975 | 10 | 5 | 8 | sets | 2,400.00 | 19,200 | Contract | CAP | | | | | | 22,256 | | | | | | | | | | 29,913 | | | | | 22,171 |
| 163 | 07.02 | Dining room table & chairs | 1975 | 10 | 5 | 4 | sets | 2,400.00 | 9,600 | Contract | CAP | | | | | | 11,129 | | | | | | | | | | 14,054 | | | | | 28,098 |
| 164 | 07.02 | Table & 4 dining chairs | 1985 | 10 | 5 | 11 | sets | 377.00 | 2,047 | Contract | CAP | | | | | | 3,832 | | | | | | | | | | 4,747 | | | | | 8,279 |
| 165 | 07.02 | Table & 12 chairs (boardroom) | 1985 | 10 | 5 | 1 | lot | 12,000.00 | 12,000 | Contract | CAP | | | | | | 13,911 | | | | | | | | | | 18,696 | | | | | 32,607 |
| 166 | 07.02 | Bed, bed side table, chair & small chest | 2002 | 15 | 7 | 6 | sets | 880.00 | 5,280 | Contract | CAP | | | | | | | | 7,084 | | | | | | | | | | | | | 7,084 |
| | | Expense Furnishings Subtotal | | | | | | | | | | | | | | | 50,831 | | 135,778 | | | | | | | | 68,312 | | | | | 264,921 |
| | 07.04 | Window Coverings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 167 | 07.04 | Blinds or other window treatments (resident rooms) | 2011 | 10 | 1 | 58 | rooms | 1,000.00 | 58,000 | Contract | CAP | | 59,741 | | | | | | | | | | 69,206 | | | | | | | | | 140,026 |
| 168 | 07.04 | Blinds or other window treatments (common areas) | 2011 | 10 | 1 | 1 | ls | 10,000.00 | 10,000 | Contract | CAP | | 10,300 | | | | | | | | | | 13,842 | | | | | | | | | 24,142 |
| 169 | 07.04 | Draperies & bedspreads | 1978 | 7 | 3 | 1 | lot | 4,580.00 | 4,580 | Contract | CAP | | | | 6,015 | | | | | | | 6,155 | | | | | | 7,570 | | | 18,730 |
| 170 | 07.04 | Draperies & bedspreads | 1971 | 5 | 1 | 1 | ls | 7,548.77 | 7,548 | Contract | CAP | | 7,772 | | | | | | 9,010 | | | | 10,445 | | | | | 12,109 | | | | 39,336 |
| 171 | 07.04 | Draperies & bedspreads | 1978 | 7 | 3 | 1 | lot | 4,580.00 | 4,580 | Contract | CAP | | | | 6,006 | | | | | | | 6,185 | | | | | | 7,570 | | | 18,730 |
| | | Expense Window Coverings Subtotal | | | | | | | | | | | 77,612 | | 10,009 | | | | 9,010 | | | 12,910 | 104,573 | | | | | 12,109 | | 15,140 | | 240,864 |
| | 07.06 | Entertainment, Communication & Security Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 172 | 07.06 | Exit seeker system | 2010 | 12 | | 1 | ls | 40,000.00 | 40,000 | Contract | CAP | 40,000 | | | | | | | | | | | | 57,030 | | | | | | | 97,030 |
| 173 | 07.06 | Replace/upgrade telephone system | 2010 | 10 | | 1 | ls | 30,400.00 | 30,400 | Contract | CAP | 30,400 | | | | | | | | | | 40,855 | | | | | | | | | 71,255 |
| 174 | 07.06 | Public address system | 1995 | 20 | 15 | 1 | ls | 5,500.00 | 5,500 | Contract | CAP | | | | | | | | | | | | | | | | 7,700 | | | | | 7,700 |
| 175 | 07.06 | Nurse call system | 2000 | 20 | 10 | 1 | ea | 5,500.00 | 5,500 | Contract | CAP | | | | | | | | | | | 7,392 | | | | | | | | | | 7,392 |
| 176 | 07.06 | TV flat screen | 1975 | 10 | 5 | 1 | ea | 1,729.98 | 1,730 | Contract | CAP | | | | | | 2,006 | | | | | | | | | | 2,635 | | | | | 4,701 |
| 177 | 07.06 | TV flat screen | 1975 | 10 | 5 | 1 | ea | 1,729.98 | 1,730 | Contract | CAP | | | | | | 2,006 | | | | | | | | | | 2,695 | | | | | 4,701 |
| 178 | 07.06 | TV | 1975 | 10 | 5 | 1 | ea | 1,725.00 | 1,725 | Contract | CAP | | | | | | 2,000 | | | | | | | | | | 2,687 | | | | | 4,687 |
| 179 | 07.06 | Nurse call light | 1985 | 25 | 5 | 30 | ea | 50.00 | 1,500 | Contract | CAP | | | | | | 1,739 | | | | | | | | | | | | | | | 1,739 |
| 180 | 07.06 | Nurse call light | 1975 | 25 | 15 | 30 | ea | 50.01 | 1,500 | Contract | CAP | | | | | | | | | | | | | | | | 2,337 | | | | | 2,337 |
| 181 | 07.06 | Nurse call light | 1985 | 25 | | 2 | ea | 50.00 | 100 | Contract | CAP | 100 | | | | | | | | | | | | | | | | | | | | 100 |
| 182 | 07.06 | Nursing alarm system upgrade | 2009 | 20 | 19 | 1 | ls | 1,333.47 | 1,333 | Contract | CAP | | | | | | | | | | | | | | | | | | | | 2,338 | 2,338 |
| 183 | 07.06 | TV flat screen | 1985 | 10 | 5 | 1 | ea | 1,729.98 | 1,730 | Contract | CAP | | | | | | 2,005 | | | | | | | | | | 2,695 | | | | | 4,701 |
| 184 | 07.06 | Piano | 1995 | 40 | 15 | 1 | ea | 5,000.00 | 5,000 | Contract | CAP | | | | | | | | | | | | | | | | 7,790 | | | | | 7,790 |
| 185 | 07.06 | Organ | 1978 | 25 | 18 | 1 | ea | 1,425.00 | 1,425 | Contract | CAP | | | | | | | | | | | | | | | | | 2,287 | | | | 2,287 |
| 186 | 07.06 | Key pad door lock | 1975 | 10 | 5 | 1 | ea | 650.00 | 650 | Contract | CAP | | | | | | 754 | | | | | | | | | | 1,013 | | | | | 1,766 |
| 187 | 07.06 | Key pad door lock | 1985 | 10 | 5 | 1 | ea | 650.00 | 650 | Contract | CAP | | | | | | 754 | | | | | | | | | | 1,013 | | | | | 1,766 |
| 188 | 07.06 | Key pad door lock | 1985 | 10 | 5 | 1 | ea | 650.00 | 650 | Contract | CAP | | | | | | 754 | | | | | | | | | | 1,013 | | | | | 1,766 |
| 189 | 07.06 | Time clock | 1993 | 7 | 3 | 1 | ea | 1,396.00 | 1,396 | Contract | CAP | | | | 1,528 | | | | | | | 1,879 | | | | | | | 2,311 | | | 5,717 |
| 190 | 07.06 | Public address system speaker | 1995 | 25 | | 2 | ea | 75.00 | 150 | Contract | CAP | 150 | | | | | | | | | | | | | | | | | | | | 150 |
| 191 | 07.06 | Public address system speaker | 1985 | 25 | 5 | 2 | ea | 75.00 | 150 | Contract | CAP | | | | | | 174 | | | | | | | | | | | | | | | 174 |
| 192 | 07.06 | Public address system speaker | 1985 | 25 | 5 | 2 | ea | 75.00 | 150 | Contract | CAP | | | | | | 174 | | | | | | | | | | | | | | | 174 |
| 193 | 07.06 | Public address system speaker | 1975 | 25 | 15 | 6 | ea | 75.00 | 450 | Contract | CAP | | | | | | | | | | | | | | | | 701 | | | | | 701 |
| | | Expense Entertainment, Communication & Security Systems Subtotal | | | | | | | | | | 70,650 | | | 1,528 | | 12,564 | | | | | 50,129 | | 57,030 | | | 32,429 | 2,287 | 2,311 | | 2,338 | 231,862 |
| | 07.07 | Office Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 194 | 07.07 | Network server | 2009 | 5 | 4 | 1 | ea | 3,900.00 | 5,000 | Contract | CAP | | | | | 5,526 | | | | | 6,524 | | | | | 7,683 | | | | 6,755 | 26,492 |
| 195 | 07.07 | Network equipment | 2009 | 3 | 2 | 1 | ls | 10,000.00 | 10,000 | Contract | CAP | | | 10,609 | | | 11,593 | | | 12,868 | | | 13,842 | | | 15,179 | | | 18,578 | | 80,369 |

FacilityForecast
Forecasting the Future

# Annual Budget Totals

Nursing
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 206 | 07.07 | Ethernet switch upgrade | 2009 | 13 | 9 | 1 | ls | 12,000.00 | 12,000 | Contract | CAP | | | | | | | | | | 15,657 | | | | | | | | | | 21,042 | 36,699 |
| 207 | 07.07 | Continuous data protection system | 2009 | 3 | 2 | 1 | ls | 5,000.00 | 5,000 | Contract | CAP | | | 5,305 | | | 5,796 | | | 6,334 | | | 6,921 | | | 7,563 | | | 8,264 | | | 40,183 |
| 208 | 07.07 | Firewall | 2009 | 3 | 2 | 1 | ls | 2,500.00 | 2,500 | Contract | CAP | | | 2,852 | | | 2,896 | | | 3,167 | | | 3,461 | | | 3,781 | | | 4,132 | | | 20,092 |
| 209 | 07.07 | Apt Office Dell Optiplex 320 + HP 2605DN color | 2007 | 6 | 3 | 1 | ea | 3,000.00 | 3,000 | Contract | CAP | | | | 3,278 | | | | | | 3,914 | | | | | | 4,674 | | | | | 11,866 |
| 210 | 07.07 | Workstation Upgrade | 1998 | 6 | 3 | 1 | ls | 1,333.00 | 1,339 | Contract | CAP | | | | 1,461 | | | | | 1,596 | | | | | 1,968 | | | | | 2,280 | | 7,405 |
| 211 | 07.07 | Workstation (Admin Nurse) | 2002 | 5 | 2 | 1 | ls | 404.50 | 405 | Contract | CAP | | | 429 | | | | | 497 | | | | | 577 | | | | | 669 | | | 2,172 |
| 212 | 07.07 | Workstation (Admin Clerk) | 2002 | 5 | 2 | 1 | ls | 389.50 | 390 | Contract | CAP | | | 413 | | | | | 479 | | | | | 555 | | | | | 644 | | | 2,091 |
| 213 | 07.07 | Workstation (6) | 2002 | 5 | 2 | 6 | ls | 389.50 | 2,337 | Contract | CAP | | | 2,470 | | | | | 2,874 | | | | | 3,332 | | | | | 3,863 | | | 12,548 |
| 214 | 07.07 | Windows 2000-server and user licenses | 2002 | 5 | 2 | 1 | ls | 527.50 | 533 | Contract | CAP | | | 565 | | | | | 655 | | | | | 759 | | | | | 880 | | | 2,859 |
| 215 | 07.07 | Upgrade Workstations | 1998 | 5 | 4 | 1 | ls | 3,727.08 | 3,727 | Contract | CAP | | | | | 4,195 | | | | | 4,863 | | | | | 5,638 | | | | | 6,535 | 21,231 |
| 216 | 07.07 | Upgrade Accountant and Clerk's Workstation | 1998 | 5 | 3 | 1 | ls | 739.00 | 739 | Contract | CAP | | | | 808 | | | | | 936 | | | | | 1,085 | | | | | 1,258 | | 4,087 |
| 217 | 07.07 | Upgrade 10 Workstations | 1999 | 5 | 4 | 1 | ls | 2,860.25 | 2,860 | Contract | CAP | | | | | 3,210 | | | | | 3,732 | | | | | 4,326 | | | | | 5,015 | 16,283 |
| 218 | 07.07 | Support to install servers and workstations | 2002 | 5 | 2 | 1 | ls | 714.13 | 714 | Contract | CAP | | | 759 | | | | | 878 | | | | | 1,018 | | | | | 1,180 | | | 3,834 |
| 219 | 07.07 | Sharp AR 507 Copier | 2002 | 5 | 2 | 1 | ea | 9,895.00 | 9,895 | Contract | CAP | | | 10,498 | | | | | 12,170 | | | | | 14,108 | | | | | 16,355 | | | 53,130 |
| 220 | 07.07 | Set-up Joni's Computer and Shirley's Printer | 2002 | 5 | 2 | 1 | ls | 281.57 | 282 | Contract | CAP | | | 299 | | | | | 346 | | | | | 401 | | | | | 465 | | | 1,512 |
| 221 | 07.07 | Set up new computers | 2007 | 1 | | 1 | ls | 1,202.70 | 1,203 | Contract | CAP | 1,203 | 1,239 | 1,276 | 1,314 | 1,354 | 1,394 | 1,436 | 1,479 | 1,524 | 1,569 | 1,616 | 1,665 | 1,716 | 1,766 | 1,819 | 1,874 | 1,930 | 1,988 | 2,048 | 2,109 | 32,319 |
| 222 | 07.07 | Set up new computers | 2007 | 1 | | 1 | ls | 512.00 | 512 | Contract | CAP | 512 | 527 | 543 | 559 | 576 | 594 | 611 | 630 | 649 | 668 | 688 | 709 | 730 | 752 | 774 | 798 | 822 | 846 | 872 | 898 | 13,758 |
| 223 | 07.07 | Set up new computers | 2007 | 1 | | 1 | ls | 90.00 | 90 | Contract | CAP | 90 | 93 | 95 | 98 | 101 | 104 | 107 | 111 | 114 | 117 | 121 | 125 | 128 | 132 | 136 | 140 | 144 | 149 | 151 | 153 | 2,418 |
| 224 | 07.07 | Port switch/hub for new server system | 2002 | 5 | 2 | 1 | ls | 119.50 | 120 | Contract | CAP | | | 127 | | | | | 147 | | | | | 170 | | | | | 198 | | | 642 |
| 225 | 07.07 | Orbits Software and Hardware | 2008 | 2 | | 1 | ls | 150.00 | 150 | Contract | CAP | 150 | | 159 | | 169 | | 179 | | 190 | | 202 | | 214 | | 227 | | 241 | | 255 | | 1,985 |
| 226 | 07.07 | Novell Upgrade | 1998 | 3 | 3 | 1 | ls | 582.50 | 583 | Contract | CAP | | | | 637 | | | | | 738 | | | | | 855 | | | | | 992 | | 3,221 |
| 227 | 07.07 | Novell Software Upgrade | 1995 | 5 | 1 | 1 | ls | 875.00 | 875 | Contract | CAP | | 901 | | | | | 1,045 | | | | | 1,211 | | | | | 1,404 | | | | 4,561 |
| 228 | 07.07 | New Workstation for Admin Clerk | 1999 | 5 | 4 | 1 | ls | 591.70 | 592 | Contract | CAP | | | | | 666 | | | | | 772 | | | | | 895 | | | | | 1,038 | 3,371 |
| 229 | 07.07 | Network infrastructure planning | 2002 | 5 | 2 | 1 | ls | 40.78 | 41 | Contract | CAP | | | 43 | | | | | 50 | | | | | 58 | | | | | 67 | | | 219 |
| 230 | 07.07 | Monitors and keyboards | 2002 | 5 | 2 | 1 | ls | 2,723.00 | 2,723 | Contract | CAP | | | 2,889 | | | | | 3,349 | | | | | 3,882 | | | | | 4,501 | | | 14,621 |
| 231 | 07.07 | Medical Software Conversion | 2004 | 5 | 4 | 1 | ls | 1,500.00 | 1,503 | Contract | CAP | | | | | 1,689 | | | | | 1,957 | | | | | 2,269 | | | | | 2,630 | 8,545 |
| 232 | 07.07 | Master Series, Conversion to Windows 2000, Replace bad cable | 2002 | 5 | 2 | 1 | ls | 448.14 | 448 | Contract | CAP | | | 475 | | | | | 551 | | | | | 639 | | | | | 741 | | | 2,406 |
| 233 | 07.07 | Marketing Director's Computer | 2006 | 3 | 2 | 1 | ls | 508.00 | 508 | Contract | CAP | | | 539 | | | 589 | | | 644 | | | 703 | | | 768 | | | 840 | | | 4,083 |
| 234 | 07.07 | Marketing Computer | 2007 | 3 | | 1 | ls | 877.50 | 878 | Contract | CAP | 878 | | | 959 | | | 1,048 | | | 1,145 | | | 1,251 | | | 1,367 | | | 1,493 | | 8,141 |
| 235 | 07.07 | Laser Printers HP1100A | 2001 | 5 | | 1 | ls | 267.50 | 268 | Contract | CAP | 268 | | | | | 310 | | | | | 359 | | | | | 417 | | | | | 1,354 |
| 236 | 07.07 | Laser Printers HP 4000 | 1999 | 5 | 4 | 1 | ls | 659.50 | 700 | Contract | CAP | | | | | 787 | | | | | 913 | | | | | 1,058 | | | | | 1,227 | 3,985 |
| 237 | 07.07 | Laser jet printer, firewall upgrade on server | 1995 | 5 | | 1 | ls | 603.72 | 603 | Contract | CAP | 603 | | | | | 699 | | | | | 811 | | | | | 940 | | | | | 3,053 |
| 238 | 07.07 | Install Tape drive, Backup exec, Novell and rewired station 24 | 2002 | 5 | 2 | 1 | ls | 602.38 | 602 | Contract | CAP | | | 639 | | | | | 741 | | | | | 859 | | | | | 996 | | | 3,234 |
| 239 | 07.07 | Install Local Server | 2006 | 3 | 2 | 1 | ls | 833.00 | 833 | Contract | CAP | | | 884 | | | 966 | | | 1,056 | | | 1,153 | | | 1,260 | | | 1,377 | | | 6,695 |
| 240 | 07.07 | Install Local Server | 2005 | 3 | 2 | 1 | ls | 833.50 | 834 | Contract | CAP | | | 884 | | | 966 | | | 1,056 | | | 1,154 | | | 1,261 | | | 1,378 | | | 6,698 |
| 241 | 07.07 | Install Local Server | 2008 | 3 | 2 | 1 | ls | 833.50 | 834 | Contract | CAP | | | 884 | | | 966 | | | 1,056 | | | 1,154 | | | 1,261 | | | 1,378 | | | 6,699 |
| 242 | 07.07 | Sinclis Case Mix Software | 2005 | 3 | 1 | 1 | ls | 625.00 | 625 | Contract | CAP | | 541 | | | 591 | | | 646 | | | 706 | | | 771 | | | 842 | | | 921 | 5,017 |
| 243 | 07.07 | Horizon Technical Assessment Worksheet | 2002 | 5 | 2 | 1 | ls | 37.50 | 38 | Contract | CAP | | | 40 | | | | | 46 | | | | | 53 | | | | | 62 | | | 201 |
| 244 | 07.07 | Hardware Additions | 1996 | 5 | 1 | 1 | ls | 1,281.20 | 1,282 | Contract | CAP | | 1,320 | | | | | 1,530 | | | | | 1,774 | | | | | 2,056 | | | | 6,680 |
| 245 | 07.07 | Hardware Additions | 1995 | 10 | 5 | 1 | ls | 421.33 | 421 | Contract | CAP | | | | | | 488 | | | | | | | | | | 650 | | | | | 1,145 |
| 246 | 07.07 | Hardware Additions | 1975 | 5 | | 1 | ls | 5,898.70 | 5,899 | Contract | CAP | 5,899 | | | | | 6,838 | | | | | 7,927 | | | | | 9,190 | | | | | 29,854 |
| 247 | 07.07 | Hardware Additions | 1995 | 5 | | 1 | ls | 1,360.75 | 1,361 | Contract | CAP | 1,361 | | | | | 1,577 | | | | | 1,829 | | | | | 2,120 | | | | | 6,887 |
| 248 | 07.07 | Hardware Additions | 1995 | 5 | | 1 | ls | 1,656.20 | 1,656 | Contract | CAP | 1,656 | | | | | 1,920 | | | | | 2,226 | | | | | 2,580 | | | | | 8,381 |
| 249 | 07.07 | Fax Machine (Sharp) Nursing | 1998 | 5 | 4 | 1 | ea | 795.00 | 795 | Contract | CAP | | | | | 895 | | | | | 1,037 | | | | | 1,203 | | | | | 1,394 | 4,529 |
| 250 | 07.07 | Fax machine - clinical | 2009 | 6 | 4 | 1 | ea | 299.90 | 300 | Contract | CAP | | | | | 338 | | | | | 391 | | | | | 454 | | | | | 526 | 1,709 |
| 251 | 07.07 | Document Layout-New NT servers | 2002 | 5 | 2 | 1 | ls | 25.00 | 25 | Contract | CAP | | | 27 | | | | | 31 | | | | | 36 | | | | | 41 | | | 134 |
| 252 | 07.07 | Computer Workstation-Dly | 2000 | 5 | | 1 | ls | 559.60 | 560 | Contract | CAP | 560 | | | | | 649 | | | | | 752 | | | | | 872 | | | | | 2,832 |
| 253 | 07.07 | Computer Upgrade and Server | 2005 | 3 | 1 | 1 | ls | 5,801.59 | 5,802 | Contract | CAP | | 5,770 | | | 6,305 | | | 6,889 | | | 7,526 | | | 8,228 | | | 8,989 | | | 9,822 | 53,629 |
| 254 | 07.07 | Computer Upgrade and Server | 2005 | 3 | 1 | 1 | ls | 1,327.70 | 1,327 | Contract | CAP | | 1,367 | | | 1,494 | | | 1,632 | | | 1,784 | | | 1,949 | | | 2,130 | | | 2,327 | 12,683 |
| 255 | 07.07 | Computer Upgrade and Server | 2005 | 3 | 1 | 1 | ls | 3,592.11 | 3,592 | Contract | CAP | | 3,700 | | | 4,043 | | | 4,418 | | | 4,828 | | | 5,275 | | | 5,764 | | | 6,299 | 34,326 |
| 256 | 07.07 | Computer upgrade and ADD Licens | 2005 | 3 | 1 | 1 | ls | 11,350.31 | 11,350 | Contract | CAP | | 11,691 | | | 12,775 | | | 13,959 | | | 15,254 | | | 16,668 | | | 18,214 | | | 19,903 | 108,484 |
| 257 | 07.07 | Computer System | 1992 | 10 | 2 | 1 | ls | 11,092.50 | 11,093 | Contract | CAP | | | 11,768 | | | | | | | | | | 15,815 | | | | | | | | 27,583 |
| 258 | 07.07 | Computer for Accountant | 2004 | 5 | 4 | 1 | ls | 517.00 | 517 | Contract | CAP | | | | | 592 | | | | | 673 | | | | | 782 | | | | | 907 | 2,945 |
| 259 | 07.07 | Cables | 2002 | 5 | 2 | 1 | ls | 54.84 | 55 | Contract | CAP | | | 58 | | | | | 67 | | | | | 78 | | | | | 91 | | | 294 |
| 260 | 07.07 | ADP Windows Upgrade | 1998 | 5 | 3 | 1 | ls | 264.50 | 265 | Contract | CAP | | | | 289 | | | | | 335 | | | | | 388 | | | | | 450 | | 1,463 |
| 261 | 07.07 | Accounting Clerk Workstation | 2003 | 5 | 3 | 1 | ls | 215.60 | 216 | Contract | CAP | | | | 238 | | | | | 273 | | | | | 317 | | | | | 367 | | 1,192 |
| 262 | 07.07 | 2 CPUs for Nursing and 1 monitor | 2008 | 3 | 2 | 2 | ls | 859.12 | 1,718 | Contract | CAP | | | 1,823 | | | 1,992 | | | 2,177 | | | 2,378 | | | 2,599 | | | 2,840 | | | 13,809 |
| 263 | 07.07 | 1997 Additions | 1997 | 5 | 2 | 1 | ls | 2,514.70 | 2,515 | Contract | CAP | | | 2,688 | | | | | 3,093 | | | | | 3,543 | | | | | 4,156 | | | 13,502 |
| 264 | 07.07 | 1993 Additions | 1993 | 6 | 1 | 1 | ls | 18,424.50 | 18,425 | Contract | CAP | | 18,917 | | | | | | 20,200 | | | | | | 24,120 | | | | | | 26,800 | 90,036 |
| 265 | 07.07 | Bertel Wyse x1115305 | 2010 | 6 | | 1 | ea | 1,850.00 | 1,850 | Contract | CAP | 1,850 | | | | | | 2,209 | | | | | | 2,638 | | | | | | 3,150 | | 9,846 |
| 266 | 07.07 | Lower 2 computers Wyse x1115305 | 2010 | 6 | | 2 | ea | 1,850.00 | 3,700 | Contract | CAP | 3,700 | | | | | | 4,418 | | | | | | 5,275 | | | | | | 6,299 | | 19,692 |
| 267 | 07.07 | Upper 2 computers Wyse x111530 | 2010 | 6 | | 2 | ea | 1,850.00 | 3,700 | Contract | CAP | 3,700 | | | | | | 4,418 | | | | | | 5,275 | | | | | | 6,299 | | 19,692 |
| 268 | 07.07 | Closet Wyse x1115305 | 2010 | 6 | | 1 | ea | 1,850.00 | 1,850 | Contract | CAP | 1,850 | | | | | | 2,209 | | | | | | 2,638 | | | | | | 3,150 | | 9,846 |
| 269 | 07.07 | Director of Nurse Dell Optiplex gx520 + HP1000 | 2005 | 6 | 1 | 1 | ea | 2,100.00 | 2,100 | Contract | CAP | | 2,163 | | | | | | 2,583 | | | | | | 3,084 | | | | | | 3,682 | 11,512 |
| 270 | 07.07 | Front reception Dell Optiplex 755 + HP1505N + Brother 4100e + Konica Minolta | 2003 | 6 | 5 | 1 | ea | 8,350.00 | 8,350 | Contract | CAP | | | | | | 7,361 | | | | | | 6,790 | | | | | | 10,498 | | | 28,047 |
| 271 | 07.07 | Jean Harrell Dell Optiplex gx520 + Hp1505N | 2007 | 6 | 3 | 1 | ea | 2,100.00 | 2,100 | Contract | CAP | | | | 2,295 | | | | | | 2,740 | | | | | | 3,272 | | | | | 8,306 |
| 272 | 07.07 | Pam Barbarich Dell x10-60254 | 2005 | 6 | 1 | 1 | ea | 1,850.00 | 1,850 | Contract | CAP | | 1,906 | | | | | | 2,275 | | | | | | 2,717 | | | | | | 3,244 | 10,142 |
| 273 | 07.07 | Lisa Schmidt Dell Optiplex755 + HP1000 | 2009 | 6 | 5 | 1 | ea | 2,100.00 | 2,100 | Contract | CAP | | | | | | 2,434 | | | | | | 2,907 | | | | | | 3,471 | | | 8,812 |

[redacted] FacilityForecast®
Forecasting the Future

# Annual Budget Totals

Nursing
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

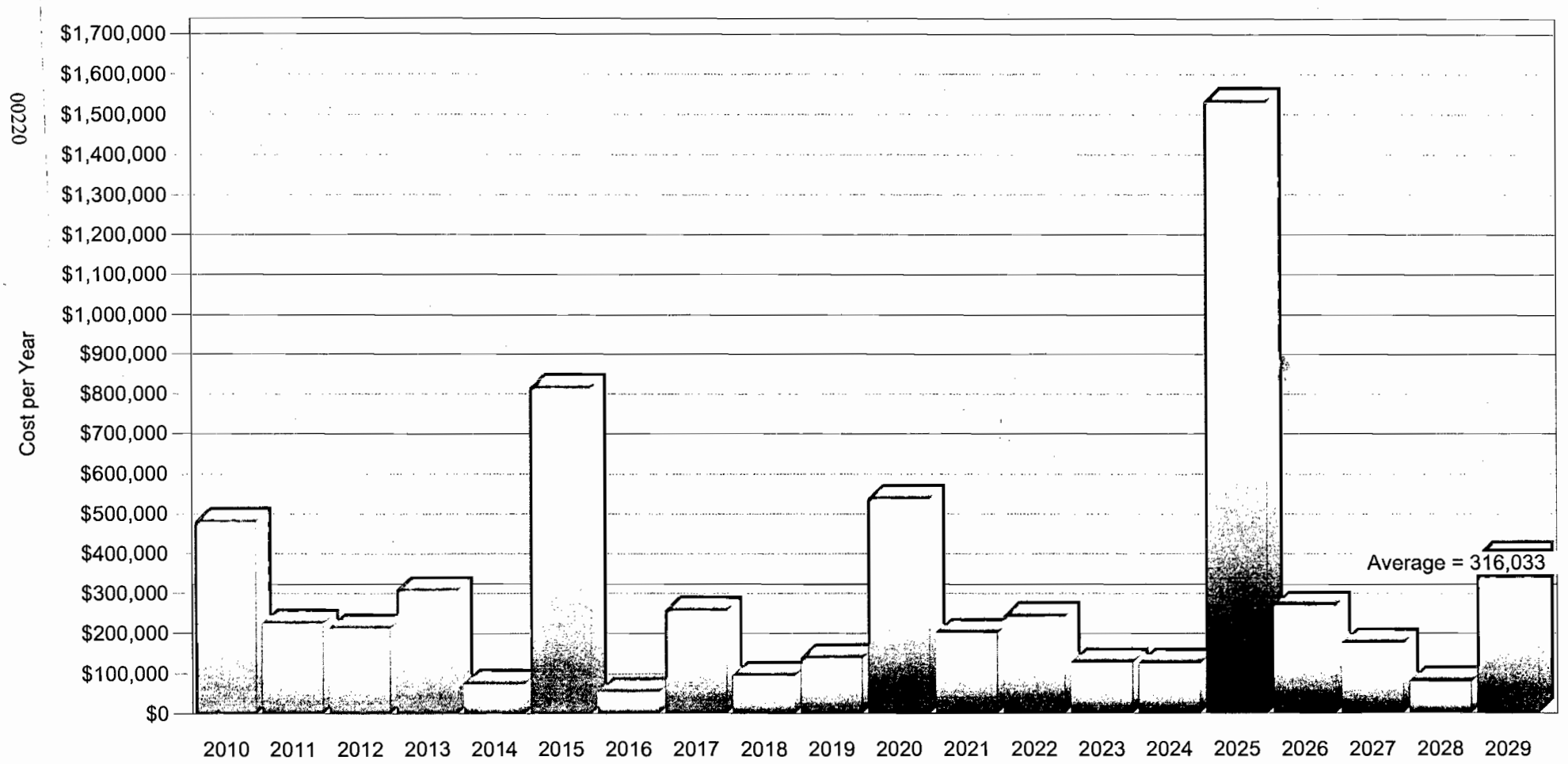
| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 274 | 07.07 | Laura Northway Dell x12-51822 + HP1000 | 2007 | 6 | 3 | 1 | ea | 2,100.00 | 2,100 | Contract | CAP | | | | 2,295 | | | | | | 2,740 | | | | | | 3,272 | | | | | 8,308 |
| 275 | 07.07 | Theresa McGee Dell x10-60258 + HP1100N | 2008 | 6 | 2 | 1 | ea | 2,100.00 | 2,100 | Contract | CAP | | | 2,278 | | | | | | 2,660 | | | | | | 3,178 | | | | | | 8,065 |
| 276 | 07.07 | Suzanne Bragg Dell Optiplex gx520 + Lexmark 7611 | 2005 | 6 | 2 | 1 | ea | 2,500.00 | 2,500 | Contract | CAP | | | 2,652 | | | | | | 3,187 | | | | | | 3,781 | | | | | | 9,601 |
| | | | | | | | | | | | Expense Office Systems Subtotal | 24,278 | 46,134 | 64,703 | 14,330 | 45,405 | 50,136 | 18,311 | 60,787 | 40,427 | 45,418 | 46,829 | 47,946 | 65,792 | 70,073 | 67,721 | 32,171 | 42,537 | 88,594 | 29,065 | 127,245 | 1,034,526 |
| | 07.10 | Kitchen Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 277 | 07.10 | Refrigerators 18 cb ft | 2008 | 12 | 8 | 8 | ea | 479.00 | 3,832 | Contract | CAP | | | | | | | | | 4,854 | | | | | | | | | | | | 4,854 |
| 278 | 07.10 | Freezer 1 door True | 1995 | 20 | 5 | 1 | ea | 2,800.00 | 2,800 | Contract | CAP | | | | | | | | | | | | | | | | 4,352 | | | | | 4,352 |
| 279 | 07.10 | Freezer 2 door upright McCalls | 2000 | 23 | 10 | 1 | ea | 4,450.00 | 4,450 | Contract | CAP | | | | | | | | | | | 5,980 | | | | | | | | | | 5,980 |
| 280 | 07.10 | Grease Trap | 2006 | 5 | 1 | 1 | ea | 3,390.00 | 3,390 | Contract | CAP | | 3,482 | | | | | 4,048 | | | | | 4,603 | | | | | 5,440 | | | | 17,672 |
| 281 | 07.10 | Ice Cube Machine (Bartel) | 1994 | 15 | 3 | 1 | ea | 1,600.00 | 1,600 | Contract | CAP | | | | 2,032 | | | | | | | | | | | | | | | 3,167 | | 5,199 |
| 282 | 07.10 | Scotsman condenser for ice machine | 2000 | 15 | 14 | 1 | ea | 850.00 | 850 | Contract | CAP | | | | | | | | | | | | | | | 1,286 | | | | | | 1,286 |
| 283 | 07.10 | Ice machine non-freezing line | 2009 | 15 | 14 | 1 | ea | 300.00 | 300 | Contract | CAP | | | | | | | | | | | | | | | 1,210 | | | | | | 1,210 |
| 284 | 07.10 | Ice machine | 2009 | 15 | 14 | 1 | ea | 2,500.00 | 2,500 | Contract | CAP | | | | | | | | | | | | | | | 3,781 | | | | | | 3,781 |
| 285 | 07.10 | Steam tables | 1965 | 10 | 5 | 4 | ea | 1,740.00 | 6,960 | Contract | CAP | | | | | | 8,069 | | | | | | | | | | 10,843 | | | | | 18,912 |
| | | | | | | | | | | | Expense Kitchen Equipment Subtotal | | 3,482 | | 2,032 | | 8,069 | 4,048 | | 4,854 | | 5,980 | 4,603 | | | 6,277 | 15,204 | 5,440 | | 3,167 | | 63,257 |
| | 07.11 | Laundry Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 286 | 07.11 | Allied Commercial-Continental Ironer (mangel) | 2003 | 20 | 13 | 1 | ea | 9,007.00 | 9,007 | Contract | CAP | | | | | | | | | | | | | | 13,350 | | | | | | | 13,350 |
| 287 | 07.11 | Direct Supply Equip-3 hanging racks for laundry | 2007 | 15 | 12 | 3 | ea | 385.00 | 1,155 | Contract | CAP | | | | | | | | | | | | | 1,647 | | | | | | | | 1,647 |
| 288 | 07.11 | Direct Supply-Jumbo Lndy Hamp | 1995 | 5 | | 1 | ea | 1,042.99 | 1,043 | Contract | CAP | 1,043 | | | | | 1,203 | | | | | 1,402 | | | | | 1,625 | | | | | 5,279 |
| 289 | 07.11 | Direct Supply-Laundry Carrier Bu | 1995 | 5 | | 1 | ea | 872.99 | 873 | Contract | CAP | 873 | | | | | 1,012 | | | | | 1,173 | | | | | 1,360 | | | | | 4,418 |
| 290 | 07.11 | Wascomat selects 28 | 1997 | 15 | 2 | 2 | ea | 4,200.00 | 8,400 | Contract | CAP | | | 8,912 | | | | | | | | | | | | | | | 13,884 | | | 22,795 |
| 291 | 07.11 | Wascomat JR W73 | 1994 | 15 | 14 | 1 | ea | 4,200.00 | 4,200 | Contract | CAP | | | | | | | | | | | | | | | 6,353 | | | | | | 6,353 |
| 292 | 07.11 | Wascomat FL 185 | 1999 | 15 | 4 | 1 | ea | 4,200.00 | 4,200 | Contract | CAP | | | | | 4,727 | | | | | | | | | | | | | | | 7,365 | 12,092 |
| 293 | 07.11 | Commercial Dryers unimat | 1999 | 15 | 4 | 1 | ea | 2,872.00 | 2,872 | Contract | CAP | | | | | 3,232 | | | | | | | | | | | | | | | 5,036 | 8,268 |
| 294 | 07.11 | Commercial Dryers unidries | 1992 | 15 | 12 | 2 | ea | 2,872.00 | 5,744 | Contract | CAP | | | | | | | | | | | | | 8,190 | | | | | | | | 8,190 |
| 295 | 07.11 | Commercial Dryers speed queen | 2000 | 15 | 5 | 1 | ea | 2,872.00 | 2,872 | Contract | CAP | | | | | | 3,729 | | | | | | | | | | | | | | | 3,329 |
| 296 | 07.11 | Commercial Dryers huebsch | 2003 | 15 | 8 | 1 | ea | 2,872.00 | 2,872 | Contract | CAP | | | | | | | | | 3,838 | | | | | | | | | | | | 3,838 |
| | | | | | | | | | | | Expense Laundry Equipment Subtotal | 1,916 | | 8,912 | | 7,960 | 5,551 | | | 3,838 | | 2,575 | | 9,837 | 13,359 | 6,353 | 2,985 | | 13,884 | | 12,401 | 69,348 |
| | 07.12 | Health Care & Nursing Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [illegible] | 07.12 | Walkers, wheelchairs & recliners | 1995 | 10 | 5 | 1 | ls | 10,000.00 | 10,000 | Contract | CAP | | | | | | 11,603 | | | | | | | | | | 15,560 | | | | | 27,172 |
| 298 | 07.12 | parallel bars | 2007 | 20 | 17 | 1 | ea | 850.00 | 850 | Contract | CAP | | | | | | | | | | | | | | | | | | 1,405 | | | 1,405 |
| 299 | 07.12 | Med mizer | 2009 | 10 | 9 | 11 | ea | 1,000.00 | 11,000 | Contract | CAP | | | | | | | | | | 14,353 | | | | | | | | | | 19,289 | 33,641 |
| 300 | 07.12 | Mat table | 2007 | 7 | 4 | 1 | ea | 550.00 | 550 | Contract | CAP | | | | | 619 | | | | | | | 751 | | | | | | | 900 | | 2,317 |
| 301 | 07.12 | Invacare | 2007 | 10 | 7 | 62 | ea | 100.00 | 6,200 | Contract | CAP | | | | | | | | 6,395 | | | | | | | | | | 8,505 | | | 14,900 |
| 302 | 07.12 | Hydrocollator | 2007 | 10 | 7 | 1 | ea | 983.00 | 983 | Contract | CAP | | | | | | | | 1,144 | | | | | | | | | | 1,592 | | | 2,778 |
| 303 | 07.12 | Beds | 2002 | 25 | 17 | 109 | ea | 1,500.00 | 163,500 | Contract | CAP | | | | | | 1,739 | 1,791 | 3,890 | 3,800 | 7,829 | 8,063 | 12,468 | 12,832 | 17,622 | 18,151 | 21,033 | 21,604 | 19,934 | 20,420 | 18,412 | 189,347 |
| 304 | 07.12 | Track for privacy curtain | 1975 | 30 | 25 | 15 | ea | 110.00 | 1,650 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 305 | 07.12 | Privacy curtain | 1975 | 20 | 5 | 15 | ea | 150.00 | 2,250 | Contract | CAP | | | | | | 2,608 | | | | | | | | | | | | | | | 2,608 |
| 306 | 07.12 | Patient lift | 2005 | 20 | 15 | 1 | ea | 843.33 | 843 | Contract | CAP | | | | | | | | | | | | | | | | 1,314 | | | | | 1,314 |
| 307 | 07.12 | Track for privacy curtain | 1975 | 30 | 25 | 17 | ea | 110.00 | 1,870 | Contract | CAP | | | | | | | | | | | | | | | | | | | | | |
| 308 | 07.12 | Privacy curtain | 1975 | 20 | 5 | 17 | ea | 150.00 | 2,550 | Contract | CAP | | | | | | 2,956 | | | | | | | | | | | | | | | 2,956 |
| 309 | 07.12 | Patient scale (wheelchair) | 2001 | 10 | 1 | 1 | ea | 2,131.00 | 2,131 | Contract | CAP | | 2,195 | | | | | | | | | | 2,950 | | | | | | | | | 5,145 |
| 310 | 07.12 | Wheelchairs w/removable parts | 2009 | 5 | 4 | 2 | ea | 336.26 | 673 | Contract | CAP | | | | | 757 | | | | | 877 | | | | | 1,017 | | | | | 1,179 | 3,831 |
| 311 | 07.12 | Wheelchair Scale | 2001 | 5 | 1 | 1 | ea | 2,130.52 | 2,131 | Contract | CAP | | 2,134 | | | | | 2,544 | | | | | 2,949 | | | | | 3,419 | | | | 11,106 |
| 312 | 07.12 | Walker, Wheelchair, Recliners | 2001 | 10 | 1 | 1 | ea | 1,827.74 | 1,828 | Contract | CAP | | 1,883 | | | | | | | | | | 2,530 | | | | | | | | | 4,413 |
| 313 | 07.12 | Vital signs machines - clinical | 2009 | 10 | 9 | 1 | lot | 3,068.20 | 3,068 | Contract | CAP | | | | | | | | | | 4,001 | | | | | | | | | | 5,377 | 9,377 |
| 314 | 07.12 | Recliners | 2000 | 10 | | 2 | ea | 780.00 | 1,560 | Contract | CAP | 1,560 | | | | | | | | | | 2,097 | | | | | | | | | | 3,657 |
| 315 | 07.12 | Oxygen Concentrator | 2009 | 5 | 4 | 2 | ea | 1,047.50 | 2,095 | Contract | CAP | | | | | 2,359 | | | | | 2,734 | | | | | 3,169 | | | | | 3,674 | 11,936 |
| 316 | 07.12 | Oxygen Concentrator | 2001 | 10 | 1 | 1 | ea | 1,586.91 | 1,587 | Contract | CAP | | 1,635 | | | | | | | | | | 2,197 | | | | | | | | | 3,831 |
| 317 | 07.12 | Oxygen Concentrator | 2000 | 10 | | 1 | ea | 1,629.42 | 1,629 | Contract | CAP | 1,329 | | | | | | | | | | 2,055 | | | | | | | | | | 3,385 |
| 318 | 07.12 | Oxygen Concentrator | 1999 | 10 | 9 | 1 | ea | 764.71 | 765 | Contract | CAP | | | | | | | | | | 998 | | | | | | | | | | 1,341 | 2,339 |
| 319 | 07.12 | Oxygen Concentrator | 1998 | 10 | 8 | 1 | ea | 849.15 | 849 | Contract | CAP | | | | | | | | | 1,072 | | | | | | | | | | 1,441 | | 2,512 |
| 320 | 07.12 | Nursing equipment | 2008 | 18 | 16 | 1 | ls | 97,747.00 | 97,747 | Contract | CAP | | | | | | | | | | | | | | | | | 159,855 | | | | 159,855 |
| 321 | 07.12 | Nursing Equip - Recliner w/ trav Blu | 2007 | 10 | 7 | 1 | ls | 704.50 | 705 | Contract | CAP | | | | | | | | 567 | | | | | | | | | | 1,166 | | | 7,031 |
| 322 | 07.12 | Hydraulic lift and full body sling | 2002 | 10 | 2 | 1 | ea | 899.42 | 899 | Contract | CAP | | | 954 | | | | | | | | | | 1,282 | | | | | | | | 2,237 |
| 323 | 07.12 | Broda chairs - clinical | 2009 | 10 | 9 | 2 | ea | 1,949.30 | 3,899 | Contract | CAP | | | | | | | | | | 5,087 | | | | | | | | | | 6,836 | 11,923 |
| 324 | 07.12 | Track for privacy curtain | 1995 | 20 | 15 | 24 | ea | 110.00 | 2,640 | Contract | CAP | | | | | | | | | | | | | | | | 4,113 | | | | | 4,113 |
| 325 | 07.12 | Privacy curtain | 1995 | 20 | 15 | 24 | ea | 150.00 | 3,600 | Contract | CAP | | | | | | | | | | | | | | | | 5,609 | | | | | 5,609 |
| 326 | 07.12 | Patient scale (wheelchair) | 1995 | 20 | 15 | 2 | ea | 2,200.00 | 4,400 | Contract | CAP | | | | | | | | | | | | | | | | 6,655 | | | | | 6,655 |
| 327 | 07.12 | Patient lift | 1995 | 20 | 15 | 1 | ea | 899.00 | 899 | Contract | CAP | | | | | | | | | | | | | | | | 1,401 | | | | | 1,401 |
| 328 | 07.12 | Bathor tub to replace cast iron bathtub | 2015 | 20 | 3 | 1 | ea | 15,000.00 | 15,000 | Contract | CAP | | | | | | 17,282 | | | | | | | | | | | | | | | 17,389 |
| | | | | | | | | | | | Expense Health Care & Nursing Equipment Subtotal | 3,089 | 7,806 | 934 | | 3,734 | 36,285 | 4,335 | 12,136 | 4,872 | 35,878 | 12,215 | 23,843 | 14,114 | 17,622 | 22,337 | 65,904 | 181,930 | 32,590 | 22,606 | 58,107 | 545,659 |
| | 07.14 | Housekeeping Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 329 | 07.14 | Housekeeping equipment | 2011 | 1 | 1 | 1 | Allowance | 5,000.00 | 5,000 | Contract | CAP | | 5,150 | | | 5,615 | | | 6,149 | | | 6,720 | | | 7,343 | | | 8,024 | | | 8,758 | 47,760 |
| | | | | | | | | | | | Expense Housekeeping Equipment Subtotal | | 5,150 | | | 5,615 | | | 6,149 | | | 6,720 | | | 7,343 | | | 8,024 | | | 8,758 | 47,760 |
| | | | | | | | | | | | Expense Total | 478,508 | 223,277 | 211,293 | 385,754 | 74,194 | 813,327 | 53,583 | 253,386 | 83,860 | 126,873 | 538,372 | 199,826 | 241,885 | 125,985 | 134,116 | 1,531,932 | 258,725 | 174,114 | 79,538 | 392,591 | 6,370,657 |
| | | | | | | | | | | | Inflation: | | 3.00% | 6.09% | 9.27% | 12.55% | 15.93% | 19.41% | 22.99% | 26.68% | 30.48% | 34.39% | 38.42% | 42.58% | 46.85% | 51.26% | 55.80% | 60.47% | 65.28% | 70.24% | 75.35% | |

# Annual Budget Totals – To Property

**Nursing**
**Chart VII-A.1**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | | | |
|---|---|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense | **Units:** | 109 Beds |
| **Report Term:** | 20 years | **Divisions:** | All | **Area:** | 44,672 SF |
| **Inflation:** | 3.00% | **Minimum unit cost:** | 0.00 | **Year:** | 1960 |
| **Area Type:** | Gross SF | | | **Modified:** | 24 Sep 2010 |
| **Classifications:** | CAP, REP, IMP | | | | |



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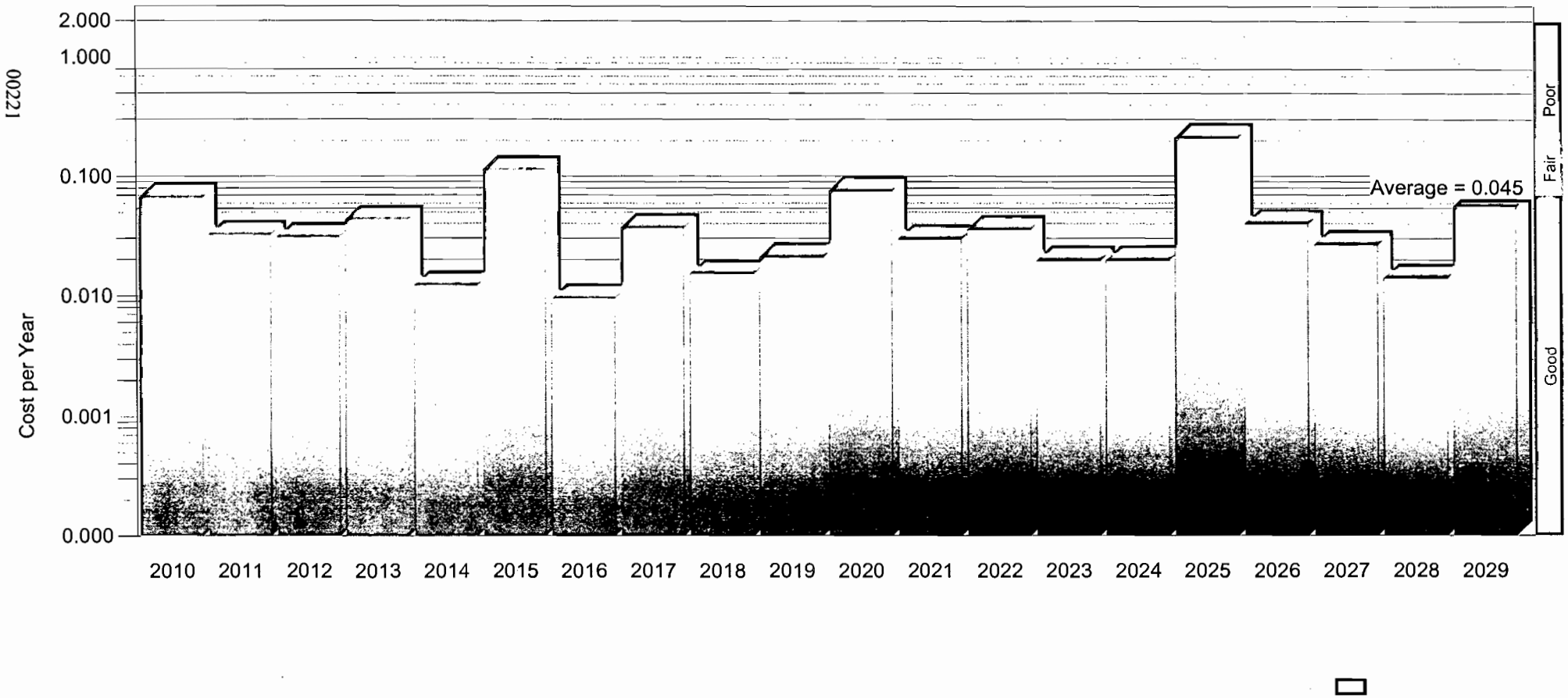
# Facility Condition Index – To Property

**2010-002: St Paul's Home, Belleville, IL**

Nursing
Chart VII-C.1

| Report Parameters | | Report Parameters | | | |
|---|---|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense | **Units:** | 109 Beds |
| **Report Term:** | 20 years | **CRV Year:** | 2010 | **Area:** | 44,672 SF |
| **Inflation:** | 3.00% | **FCI:** | ( CAP + OPER ) / CRV | **Year:** | 1960 |
| **Area Type:** | Gross SF | **Minimum unit cost:** | 0.00 | **Modified:** | 24 Sep 2010 |



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2010-002: St Paul's Home, Belleville, IL

# Annual Budget Totals

ILU Apartments
Table VII-A

**ort Parameters**
Begin Year: 2010
Report Term: 20 years
Inflation: 3.00%
Area Type: Gross SF
Classifications: CAP, REP, IMP

**Report Parameters**
Budget Types: Expense
Divisions: All
Minimum unit cost: 0.00
Units: 53 ILUs
Area: 70,200 SF
Year: 1987
Modified: 21 Sep 2010

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 03.04 | Thermal & Moisture Protection Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 03.04 | Replace asphalt shingle roof | 2005 | 30 | 25 | 214 | sq | 210.00 | 44,940 | Contract | CAP | | | | | | | | | | | | | | | | | | | | |
| 2 | 03.04 | Supplement attic insulation | 1987 | 20 | 17 | 21,350 | sf | 0.38 | 8,117 | Contract | CAP | | | | | | | | | | | | | | | | | | 13,416 | | | 13,416 |
| 3 | 03.04 | Roof tune-up and misc repairs | 2010 | 3 | | 21,350 | sf | 0.05 | 1,068 | Contract | CAP | 1,068 | | | 1,167 | | | 1,275 | | | 1,393 | | | 1,523 | | | 1,664 | | | 1,818 | | 9,909 |
| 4 | 03.04 | Gutters & downspouts | 1987 | 20 | 17 | 1,300 | lf | 7.00 | 9,100 | Contract | CAP | | | | | | | | | | | | | | | | | | 15,041 | | | 15,041 |
| | | | | | | | | | | Expense Thermal & Moisture Protection Systems Subtotal | | 1,068 | | | 1,167 | | | 1,275 | | | 1,393 | | | 1,523 | | | 1,664 | | | 28,457 | 1,818 | | 38,365 |
| | 03.05 | Exterior Wall & Finish Systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | 03.05 | Remove metal cladding from soffits & other wood trim | 2011 | | 1 | 1 | ls | 5,000.00 | 5,000 | Contract | CAP | | 5,150 | | | | | | | | | | | | | | | | | | | 5,150 |
| 6 | 03.05 | Recaulk EIFS/brick joints | 2010 | 7 | | 684 | lf | 2.75 | 2,706 | Contract | CAP | 2,706 | | | | | | | 3,326 | | | | | | | 4,093 | | | | | 10,127 |
| 7 | 03.05 | Recaulk around balcony doors/ EIFS | 1987 | 5 | 2 | 432 | lf | 5.00 | 2,160 | Contract | CAP | | | 2,292 | | | | | 2,697 | | | | | 3,080 | | | | | 3,570 | | 11,599 |
| 8 | 03.05 | Elastomeric coating on EIFS | 2010 | 8 | | 4,355 | sf | 2.25 | 9,868 | Contract | CAP | 9,566 | | | | | | | | 12,498 | | | | | | | | 15,832 | | | 38,197 |
| 9 | 03.05 | Trim bottom edge of EIFS 4" above grade | 2010 | | | 1 | ls | 200.00 | 200 | Contract | CAP | 200 | | | | | | | | | | | | | | | | | | | 200 |
| 10 | 03.05 | Clean & recaulk brick control joints, louvers | 2010 | 10 | | 269 | lf | 0.90 | 132 | Contract | CAP | 332 | | | | | | | | | | 446 | | | | | | | | | 778 |
| 11 | 03.05 | Wet glaze balcony green houses | 2014 | 15 | 4 | 328 | lf | 7.50 | 2,625 | Contract | CAP | | | | | 2,953 | | | | | | | | | | | | | | 4,445 | 7,398 |
| | | | | | | | | | | Expense Exterior Wall & Finish Systems Subtotal | | 13,104 | 5,150 | 2,292 | | 2,953 | | | 5,993 | 12,498 | | 3,080 | | 4,093 | | 15,832 | 3,570 | 4,445 | 73,349 |
| | 03.07 | Doors, Windows & Hardware | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 | 03.07 | Replace single hung alum. windows | 1987 | 20 | 7 | 77 | ea | 250.00 | 19,250 | Contract | CAP | | | | | | | | 23,675 | | | | | | | | | | | | 23,675 |
| 13 | 03.07 | Replace window screens | 2010 | | | 77 | ea | 13.00 | 1,001 | Contract | CAP | 1,001 | | | | | | | | | | | | | | | | | | | 1,001 |
| 14 | 03.07 | Fire doors with magnetic hold open device | 1987 | 25 | 2 | 20 | leaves | 950.00 | 19,000 | Contract | CAP | 1,900 | 1,957 | 1,006 | 2,070 | 1,069 | 1,101 | 1,134 | 1,168 | | 1,240 | | | 1,384 | | | 1,480 | | 1,570 | | 1,660 | 18,724 |
| 15 | 03.07 | HM exterior doors & hdws | 1987 | 25 | 2 | 7 | leaves | 600.00 | 4,200 | Contract | CAP | 600 | | 637 | | 675 | | 716 | | | | | | 855 | | | | | | 1,021 | | 4,505 |
| 16 | 03.07 | Replace balcony patio doors | 1987 | 25 | 2 | 64 | leaves | 950.00 | 79,800 | Contract | CAP | 5,700 | 6,650 | 6,847 | 6,229 | 5,415 | 4,405 | 4,537 | 3,505 | 3 010 | 2,479 | 2,553 | 1,315 | 1,354 | 2,790 | 1,437 | 2,960 | 3,049 | 3,140 | 4,032 | 4,997 | 76,227 |
| 17 | 03.07 | Key pad entry locks | 1987 | 15 | 7 | 3 | ea | 202.50 | 606 | Contract | CAP | | | | | | | | 746 | | | | | | | | | | | | | 746 |
| 18 | 03.07 | Alum storefront at atrium | 1987 | 30 | 7 | 600 | sf | 75.00 | 45,000 | Contract | CAP | | | | | | | | 55,713 | | | | | | | | | | | | | 55,713 |
| 19 | 03.07 | Metal roll up door at kitchen | 2001 | 30 | 21 | 1 | ea | 750.00 | 750 | Contract | CAP | | | | | | | | | | | | | | | | | | | | |
| 20 | 03.07 | Interior doors & hardware | 1987 | 40 | 17 | 53 | apts | 850.00 | 45,050 | Contract | CAP | | | | | | | | | | | | | | | | | | 74,451 | | | 74,451 |
| 21 | 03.07 | Unit entry doors & hardware | 1987 | 25 | 2 | 70 | apts | 400.00 | 28,000 | In-house | CAP | | | 27,431 | | | | | | | | | | | | | | | | | | 27,431 |
| | | | | | | | | | | Expense Doors, Windows & Hardware Subtotal | | 9,201 | 8,607 | 36,183 | 8,305 | 8,160 | 5,507 | 6,388 | 54,807 | 3,010 | 3,719 | 3,553 | 1,315 | 3,584 | 2,790 | 1,437 | 4,449 | 3,049 | 79,171 | 5,873 | 6,663 | 279,543 |
| | 03.08 | Vertical Circulation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | 03.08 | Elevator sump pump | 1987 | 15 | 7 | 2 | ea | 1,950.00 | 3,900 | Contract | CAP | | | | | | | | 4,429 | | | | | | | | | | | | 4,429 |
| 23 | 03.08 | Upgrade elevator cab finishes (Phs: 2 yr) | 1987 | 15 | 2 | 2 | ea | 5,250.00 | 10,500 | Contract | CAP | | | | | | | | 5,457 | 8,651 | | | | | | | | | | | 13,107 |
| 24 | 03.08 | Modernize elevator 4 stop (Phs: 2 yr) | 1987 | 25 | 2 | 2 | ea | 170,000.00 | 240,000 | Contract | CAP | | | 127,308 | 131,127 | | | | | | | | | | | | | | | | 258,435 |
| | | | | | | | | | | Expense Vertical Circulation Subtotal | | | | 127,308 | 131,127 | | | | 10,884 | 8,651 | | | | | | | | | 275,970 |
| | 03.09 | Exterior Paint & Caulk | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25 | 03.09 | Clean & paint columns & rail posts at bridge | 2010 | 1 | | 1 | ls | 50.00 | 50 | In-house | CAP | 50 | 52 | 53 | 55 | 56 | 58 | 60 | 61 | 63 | 65 | 67 | 69 | 71 | 73 | 76 | 78 | 80 | 83 | 85 | 88 | 1,344 |
| 26 | 03.09 | Clean & paint brick lintels at windows | 2010 | 7 | | 77 | ea | 12.00 | 924 | In-house | CAP | 924 | | | | | | | 1,135 | | | | | | | 1,398 | | | 6,050 | | | 3,459 |
| 27 | 03.09 | Clean & paint wood trim after removal of drum, plastic | 2010 | 7 | | 1 | ls | 4,000.00 | 4,000 | Contract | CAP | 4,000 | | | | | | | 4,919 | | | | | | | | | | | | | 14,970 |
| | | | | | | | | | | Expense Exterior Paint & Caulk Subtotal | | 4,974 | 52 | 53 | 55 | 56 | 58 | 60 | 6,117 | 63 | 65 | 67 | 69 | 71 | 73 | 7,524 | 78 | 80 | 83 | 85 | 88 | 19,771 |
| | 03.10 | Specials | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 28 | 03.10 | Replace awning at kitchen door | 1987 | 10 | 7 | 1 | ea | 375.00 | 371 | Contract | CAP | | | | | | | | 460 | | | | | | | | | | 537 | | | 997 |
| 29 | 03.10 | Common area toilet accessories | 1987 | 10 | 7 | 3 | sets | 100.00 | 300 | Contract | CAP | | | | | | | | 369 | | | | | | | | | | 486 | | | 855 |
| 30 | 03.10 | Accordion folding partition | 2003 | 25 | 18 | 150 | sf | 33.00 | 5,000 | Contract | CAP | | | | | | | | | | | | | | | | | | | 9,534 | | 9,534 |
| 31 | 03.10 | Mailboxes | 1987 | 40 | 17 | 60 | ea | 54.00 | 3,240 | Contract | CAP | | | | | | | | | | | | | | | | | | 5,555 | | | 5,355 |
| | | | | | | | | | | Expense Specials Subtotal | | | | | | | | | 759 | | | | | | | | 6,588 | 9,534 | | 19,691 |
| | 03.11 | Balconies, Elevated Walkways & Rails | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 32 | 03.11 | Clean & apply sealer to balconies | 1987 | 12 | 1 | 15 | ea | 375.00 | 5,625 | Contract | CAP | | 5,794 | | | | | | | | | | | | | 8,281 | | | | | | 14,054 |
| | | | | | | | | | | Expense Balconies, Elevated Walkways & Rails Subtotal | | | 5,794 | | | | | | | | | | | 8,281 | | | | | | 14,054 |
| | 03.12 | Appliances | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 33 | 03.12 | Clothes washer | 1987 | 5 | 2 | 7 | ea | 950.00 | 6,650 | Contract | CAP | 950 | 979 | 2,016 | 1,036 | 2,136 | 1,101 | 1,134 | 2,337 | 1,203 | 1,240 | 1,277 | 2,630 | 1,354 | 1,395 | 2,874 | 1,480 | 1,524 | 3,140 | 1,617 | 1,666 | 33,095 |
| 34 | 03.12 | Clothes dryer | 1987 | 5 | 2 | 7 | ea | 950.00 | 6,650 | Contract | CAP | 950 | 979 | 2,016 | 1,036 | 2,136 | 1,101 | 1,134 | 2,337 | 1,203 | 1,240 | 1,277 | 2,630 | 1,354 | 1,395 | 2,874 | 1,480 | 1,524 | 3,140 | 1,617 | 1,666 | 33,095 |
| | | | | | | | | | | Expense Appliances Subtotal | | 1,900 | 1,957 | 4,031 | 2,070 | 4,317 | 2,203 | 2,269 | 4,674 | 2,407 | 2,479 | 2,553 | 5,260 | 2,709 | 2,790 | 5,748 | 2,960 | 3,049 | 6,281 | 3,233 | 3,332 | 66,189 |
| | 04.01 | HVAC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Attachment 25 - p.40

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Forecasting the Future

# Annual Budget Totals

ILU Apartments
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class |
|---|---|---|---|---|---|---|---|---|---|---|
| 04.01 | Electric cabinet heater (wall mounted) | 1987 | 30 | 7 | 2 | ea | 1,500.00 | 3,000 | Contract | CAP |
| 04.01 | Water boilers (Phs: 2 yr) | 1987 | 20 | 17 | 2 | ea | 13,000.00 | 26,000 | Contract | CAP |
| 04.01 | Metalbestos flue 10" & 16" | 1987 | 25 | 2 | 1 | ls | 5,000.00 | 5,000 | Contract | CAP |
| 04.01 | Water pumps HP-1 & HP-2 3 hp (Phs: 2 yr) | 1987 | 25 | 2 | 2 | ea | 8,800.00 | 17,600 | Contract | CAP |
| 04.01 | Water pumps CP-1 &CHP-2 7.5 hp (Phs: 2 yr) | 1987 | 25 | 2 | 2 | ea | 12,600.00 | 25,200 | Contract | CAP |
| 04.01 | Air separator 40 gal ASME | 1987 | 25 | 2 | 1 | ea | 840.00 | 840 | Contract | CAP |
| 04.01 | Air separator 60 gal ASME | 1987 | 25 | 2 | 1 | ea | 1,050.00 | 1,050 | Contract | CAP |
| 04.01 | Air handling Unit AHU-1 3 hp | 1987 | 25 | 2 | 1 | ea | 7,500.00 | 7,500 | Contract | CAP |
| 04.01 | Air handling Unit AHU-2 1.5 hp | 1987 | 25 | 2 | 1 | ea | 6,200.00 | 6,200 | Contract | CAP |
| 04.01 | Fan coil units FC-A, FC-B, & FC-C | 1987 | 20 | 17 | 58 | ea | 2,300.00 | 133,400 | Contract | CAP |
| 04.01 | Split system AC units at bridge (Phs: 2 yr) | 2010 | 15 | | 2 | ea | 2,300.00 | 4,600 | Contract | CAP |
| 04.01 | Air cooled chiller 4 stage | 2009 | 20 | 19 | 1 | ea | 69,388.00 | 69,388 | Contract | CAP |
| 04.01 | Thru-wall exhaust fan at dishwasher | 2003 | 15 | 8 | 1 | ea | 575.00 | 575 | Contract | CAP |
| 04.01 | Thru-wall exhaust fan at kitchen grease hood | 2003 | 15 | 8 | 1 | ea | 2,200.00 | 2,200 | Contract | CAP |
| 04.01 | Electric heat strip at stairs | 1987 | 25 | 2 | 14 | ea | 148.00 | 2,072 | Contract | CAP |
| 04.02 | Plumbing & Plumbing Fixtures | | | | | | | | | |
| 04.02 | Water softener | 2006 | 15 | 11 | 1 | ea | 4,438.00 | 4,438 | Contract | CAP |
| 04.02 | Faucets & valves in public restrooms | 1987 | 5 | 2 | 2 | ea | 175.00 | 350 | In-house | CAP |
| 04.02 | Water heater 40 gal electric | 1987 | 6 | 1 | 53 | ea | 425.00 | 22,525 | In-house | CAP |
| 04.02 | Water heater 40 gal electric | 2010 | 11 | 11 | 1 | ea | 2,200.00 | 2,200 | In-house | CAP |
| 04.02 | Drinking fountain | 1987 | 40 | 17 | 1 | ea | 650.00 | 650 | Contract | CAP |
| 04.03 | Fire Sprinkler & Life Safety Systems | | | | | | | | | |
| 04.03 | Replace fire sprinkler system | 1987 | 40 | 17 | 70,200 | sf | 1.75 | 122,850 | Contract | CAP |
| 04.03 | Upgrade fire alarm panel | 1995 | 20 | 5 | 1 | ea | 40,000.00 | 40,000 | Contract | CAP |
| 04.03 | Smoke/heat detectors | 1987 | 10 | 7 | 61 | ea | 277.00 | 16,897 | Contract | CAP |
| 04.03 | Pull stations | 1987 | 15 | 7 | 11 | ea | 131.00 | 1,441 | Contract | CAP |
| 04.03 | Exit signs | 1987 | 12 | 1 | 33 | ea | 128.00 | 4,224 | Contract | CAP |
| 04.03 | Annunciators | 1987 | 18 | 13 | 15 | ea | 222.00 | 3,330 | Contract | CAP |
| 04.03 | Jockey pump | 1987 | 12 | 1 | 1 | ea | 3,525.00 | 3,525 | Contract | CAP |
| 04.03 | Replace fire pump | 1987 | 40 | 17 | 1 | ea | 24,500.00 | 24,500 | Contract | CAP |
| 04.03 | Overhaul fire pump | 1987 | 25 | 2 | 1 | ea | 10,000.00 | 10,000 | Contract | CAP |
| 04.03 | Air compressor | 1987 | 20 | 17 | 1 | ea | 2,900.00 | 2,900 | Contract | CAP |
| 04.04 | Electrical | | | | | | | | | |
| 04.04 | Infrared electric panel study | 2012 | 5 | 2 | 70,200 | sf | 0.03 | 2,106 | Contract | CAP |
| 04.04 | Wall sconces | 1987 | 20 | 17 | 20 | ea | 145.00 | 2,900 | Contract | CAP |
| 04.04 | Wall sconce at balconies/porches | 1987 | 20 | 17 | 41 | ea | 115.00 | 4,715 | Contract | CAP |
| 04.04 | Wall pack | 1987 | 20 | 17 | 4 | ea | 275.00 | 1,100 | Contract | CAP |
| 04.04 | 4' strip lights at stairs | 1977 | 20 | 7 | 29 | ea | 139.00 | 4,031 | Contract | CAP |
| 04.04 | Globe style sconce lights at atrium | 1987 | 30 | 7 | 6 | ea | 550.00 | 3,300 | Contract | CAP |
| 04.04 | Globe style pole mtd lights at atrium | 1987 | 30 | 7 | 4 | ea | 950.00 | 3,800 | Contract | CAP |
| 04.04 | Cylindrical pendant lights at atrium | 1987 | 30 | 7 | 4 | ea | 5,000.00 | 20,000 | Contract | CAP |
| 04.04 | Dining room fixtures | 1987 | 20 | 17 | 6 | ea | 150.00 | 900 | Contract | CAP |
| 04.04 | Surface mounted fluorescent fixtures at kitchen | 2003 | 20 | 13 | 10 | ea | 165.00 | 1,650 | Contract | CAP |
| 04.04 | Recessed can lights | 1987 | 25 | 2 | 51 | ea | 110.00 | 5,610 | Contract | CAP |
| 04.04 | Foot lights at atrium stair | 1987 | 20 | 17 | 6 | ea | 90.00 | 540 | Contract | CAP |
| 04.04 | 2x2 lay-in fluorescent fixtures | 1987 | 20 | 17 | 145 | ea | 175.00 | 25,375 | Contract | CAP |
| 04.04 | Replace emergency generator 100kw | 1987 | 30 | 7 | 1 | ea | 60,000.00 | 60,000 | Contract | CAP |
| 04.04 | Rebuild emergency generator 100kw | 2025 | 15 | 25 | 1 | ea | 48,000.00 | 48,000 | Contract | CAP |
| 04.04 | Repair/upgrade automatic transfer switch | 1987 | 23 | 2 | 1 | ea | 8,500.00 | 8,500 | Contract | CAP |
| 04.04 | Replace electrical panels | 1968 | 40 | 18 | 1 | ls | 200,000.00 | 200,000 | Contract | CAP |
| 05.02 | Common Area Floor Finishes | | | | | | | | | |
| 05.02 | Replace common area carpet | 2004 | 8 | 6 | 3,000 | sy | 30.00 | 90,000 | Contract | CAP |
| 05.03 | Common Area Paint & Wall Finishes | | | | | | | | | |
| 05.03 | Paint common area walls & ceilings (Phs: 4 yr) | 2010 | 7 | | 1 | ls | 20,000.00 | 20,000 | Contract | CAP |
| 05.04 | Common Area Ceiling Systems | | | | | | | | | |
| 05.04 | Replace acoustical ceiling tiles and grid | 1987 | 25 | 2 | 14,410 | sf | 4.50 | 64,845 | Contract | CAP |
| 06.01 | Unit Refresh Allowance | | | | | | | | | |

| Item Description | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 |
|---|---|---|---|---|---|---|---|---|---|---|
| Electric cabinet heater (wall mounted) | | | | | | | | 3,690 | | |
| Water boilers (Phs: 2 yr) | | | | | | | | | | |
| Metalbestos flue 10" & 16" | | | 5,305 | | | | | | | |
| Water pumps HP-1 & HP-2 3 hp (Phs: 2 yr) | | | 8,336 | 8,616 | | | | | | |
| Water pumps CP-1 &CHP-2 7.5 hp (Phs: 2 yr) | | | 13,367 | 13,768 | | | | | | |
| Air separator 40 gal ASME | | | 912 | | | | | | | |
| Air separator 60 gal ASME | | | 1,114 | | | | | | | |
| Air handling Unit AHU-1 3 hp | | | 7,957 | | | | | | | |
| Air handling Unit AHU-2 1.5 hp | | | 6,578 | | | | | | | |
| Fan coil units FC-A, FC-B, & FC-C | 7,692 | 6,550 | 5,525 | 4,728 | 4,272 | 4,073 | 4,271 | 4,795 | 5,806 | 8,647 |
| Split system AC units at bridge (Phs: 2 yr) | 2,300 | 2,369 | | | | | | | | |
| Air cooled chiller 4 stage | | | | | | | | | | |
| Thru-wall exhaust fan at dishwasher | | | | | | | | | 728 | |
| Thru-wall exhaust fan at kitchen grease hood | | | | | | | | | 2,787 | |
| Electric heat strip at stairs | 148 | 152 | 157 | 162 | 167 | 172 | 177 | | 187 | |
| Expense HVAC Subtotal | 10,140 | 9,072 | 50,251 | 28,274 | 4,339 | 4,249 | 4,448 | 8,484 | 9,309 | 8,647 |
| Plumbing & Plumbing Fixtures | | | | | | | | | | |
| Water softener | | | | | | | | | | |
| Faucets & valves in public restrooms | | | 271 | | | | | 420 | | |
| Water heater 40 gal electric | 2,804 | 2,896 | 3,069 | 3,079 | 3,169 | 3,261 | 3,351 | 3,455 | 3,559 | 3,666 |
| Water heater 40 gal electric | | | | | | | | | | |
| Drinking fountain | | | | | | | | | | |
| Expense Plumbing & Plumbing Fixtures Subtotal | 2,804 | 2,896 | 3,340 | 3,079 | 3,169 | 3,261 | 3,354 | 3,885 | 3,558 | 3,666 |
| Fire Sprinkler & Life Safety Systems | | | | | | | | | | |
| Replace fire sprinkler system | | | | | | | | | | |
| Upgrade fire alarm panel | | | | | | 48,371 | | | | |
| Smoke/heat detectors | 1,665 | 1,720 | 1,758 | 1,811 | 1,876 | 1,947 | 2,070 | 2,090 | 2,157 | 2,219 |
| Pull stations | 74 | 84 | 90 | 107 | 118 | 127 | 133 | 136 | 136 | 136 |
| Exit signs | 302 | 394 | 399 | 401 | 400 | 401 | 406 | 416 | 430 | 448 |
| Annunciators | 137 | 123 | 117 | 121 | 134 | 155 | 181 | 210 | 241 | 292 |
| Jockey pump | | 3,631 | | | | | | | | |
| Replace fire pump | | | | | | | | | | |
| Overhaul fire pump | | | 10,609 | | | | | | | |
| Air compressor | | | | | | | | | | |
| Expense Fire Sprinkler & Life Safety Systems Subtotal | 2,288 | 5,931 | 17,379 | 2,439 | 2,527 | 49,000 | 2,739 | 2,852 | 2,864 | 3,071 |
| Electrical | | | | | | | | | | |
| Infrared electric panel study | | | 2,234 | | | | | 2,590 | | |
| Wall sconces | | | | | | | | | | |
| Wall sconce at balconies/porches | 272 | 232 | 195 | 167 | 150 | 144 | 151 | 189 | 198 | 235 |
| Wall pack | | | | | | 319 | | | | |
| 4' strip lights at stairs | | | | | | | | 4,958 | | |
| Globe style sconce lights at atrium | | | | | | | | 4,059 | | |
| Globe style pole mtd lights at atrium | | | | | | | | 4,674 | | |
| Cylindrical pendant lights at atrium | | | | | | | | 24,537 | | |
| Dining room fixtures | | | | | | | | | | |
| Surface mounted fluorescent fixtures at kitchen | | | | | | | 197 | | 209 | |
| Recessed can lights | 444 | 480 | 456 | 435 | 401 | 357 | 309 | 260 | 213 | 178 |
| Foot lights at atrium stair | | | | | | | | | | |
| 2x2 lay-in fluorescent fixtures | 1,453 | 1,248 | 1,051 | 839 | 805 | 779 | 813 | 912 | 1,066 | 1,204 |
| Replace emergency generator 100kw | | | | | | | | 98,390 | | |
| Rebuild emergency generator 100kw | | | | | | | | | | |
| Repair/upgrade automatic transfer switch | | | 9,018 | | | | | | | |
| Replace electrical panels | | | | | | | | | | |
| Expense Electrical Subtotal | 2,181 | 1,937 | 12,954 | 1,501 | 1,355 | 1,590 | 1,469 | 140,609 | 1,689 | 1,677 |
| Common Area Floor Finishes | | | | | | | | | | |
| Replace common area carpet | | | | | | | 107,485 | | | |
| Expense Common Area Floor Finishes Subtotal | | | | | | | 107,485 | | | |
| Common Area Paint & Wall Finishes | | | | | | | | | | |
| Paint common area walls & ceilings (Phs: 4 yr) | 5,000 | 5,150 | 5,305 | 5,464 | | | | 6,149 | 6,334 | 6,524 |
| Expense Common Area Paint & Wall Finishes Subtotal | 5,000 | 5,150 | 5,305 | 5,464 | | | | 6,149 | 6,334 | 6,524 |
| Common Area Ceiling Systems | | | | | | | | | | |
| Replace acoustical ceiling tiles and grid | | | 68,794 | | | | | | | |
| Expense Common Area Ceiling Systems Subtotal | | | 68,794 | | | | | | | |
| Unit Refresh Allowance | | | | | | | | | | |

| Item Description | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Electric cabinet heater (wall mounted) | | | | | | | | | | | 3,690 |
| Water boilers (Phs: 2 yr) | | | | | | | | 21,487 | 22,132 | | 43,619 |
| Metalbestos flue 10" & 16" | | | | | | | | | | | 5,305 |
| Water pumps HP-1 & HP-2 3 hp (Phs: 2 yr) | | | | | | | | | | | 16,952 |
| Water pumps CP-1 &CHP-2 7.5 hp (Phs: 2 yr) | | | | | | | | | | | 27,136 |
| Air separator 40 gal ASME | | | | | | | | | | | 912 |
| Air separator 60 gal ASME | | | | | | | | | | | 1,114 |
| Air handling Unit AHU-1 3 hp | | | | | | | | | | | 7,957 |
| Air handling Unit AHU-2 1.5 hp | | | | | | | | | | | 6,578 |
| Fan coil units FC-A, FC-B, & FC-C | 7,844 | 9,118 | 10,376 | 11,539 | 12,531 | 13,293 | 13,768 | 14,007 | 13,964 | 13,707 | 174,293 |
| Split system AC units at bridge (Phs: 2 yr) | | | | | | 3,583 | 3,691 | | | | 11,943 |
| Air cooled chiller 4 stage | | | | | | | | | | 121,672 | 121,672 |
| Thru-wall exhaust fan at dishwasher | | | | | | | | | | | 728 |
| Thru-wall exhaust fan at kitchen grease hood | | | | | | | | | | | 2,787 |
| Electric heat strip at stairs | | | 211 | | | | 237 | | 252 | | 2,072 |
| Expense HVAC Subtotal | 7,844 | 9,118 | 10,587 | 11,539 | 12,531 | 16,876 | 17,716 | 35,494 | 36,349 | 135,379 | 428,709 |
| Plumbing & Plumbing Fixtures | | | | | | | | | | | |
| Water softener | | 6,140 | | | | | | | | | 6,140 |
| Faucets & valves in public restrooms | | | 499 | | | | | 578 | | | 1,879 |
| Water heater 40 gal electric | 3,777 | 3,891 | 4,008 | 4,128 | 4,251 | 4,378 | 4,500 | 4,644 | 4,783 | 4,929 | 75,628 |
| Water heater 40 gal electric | | 3,045 | | | | | | | | | 3,045 |
| Drinking fountain | | | | | | | | 1,074 | | | 1,074 |
| Expense Plumbing & Plumbing Fixtures Subtotal | 3,777 | 13,077 | 4,507 | 4,128 | 4,251 | 4,376 | 4,509 | 6,297 | 4,783 | 4,926 | 87,665 |
| Fire Sprinkler & Life Safety Systems | | | | | | | | | | | |
| Replace fire sprinkler system | | | | | | | | 203,052 | | | 203,052 |
| Upgrade fire alarm panel | | | | | | | | | | | 48,371 |
| Smoke/heat detectors | 2,280 | 2,341 | 2,405 | 2,474 | 2,548 | 2,620 | 2,708 | 2,792 | 2,676 | 2,868 | 45,311 |
| Pull stations | 133 | 131 | 130 | 131 | 133 | 138 | 145 | 153 | 161 | 170 | 2,570 |
| Exit signs | 468 | 488 | 508 | 526 | 542 | 556 | 570 | 583 | 507 | 613 | 9,525 |
| Annunciators | 294 | 313 | 326 | 332 | 331 | 328 | 317 | 308 | 293 | 294 | 4,828 |
| Jockey pump | | | | 5,177 | | | | | | | 8,607 |
| Replace fire pump | | | | | | | | 40,495 | | | 40,495 |
| Overhaul fire pump | | | | | | | | | | | 10,609 |
| Air compressor | | | | | | | | 4,793 | | | 4,793 |
| Expense Fire Sprinkler & Life Safety Systems Subtotal | 3,175 | 3,273 | 3,369 | 8,638 | 3,554 | 3,646 | 3,739 | 252,178 | 3,938 | 4,042 | 376,359 |
| Electrical | | | | | | | | | | | |
| Infrared electric panel study | | | 3,303 | | | | | 3,481 | | | 11,308 |
| Wall sconces | | | | | | | | 4,793 | | | 4,793 |
| Wall sconce at balconies/porches | 277 | 322 | 387 | 408 | 443 | 470 | 487 | 495 | 434 | 484 | 6,160 |
| Wall pack | | | 392 | | | | 441 | | | | 1,152 |
| 4' strip lights at stairs | | | | | | | | | | | 4,958 |
| Globe style sconce lights at atrium | | | | | | | | | | | 4,059 |
| Globe style pole mtd lights at atrium | | | | | | | | | | | 4,674 |
| Cylindrical pendant lights at atrium | | | | | | | | | | | 24,537 |
| Dining room fixtures | | | | | | | | 1,488 | | | 1,488 |
| Surface mounted fluorescent fixtures at kitchen | 212 | 223 | 235 | 242 | 250 | | 265 | | 281 | | 2,129 |
| Recessed can lights | 149 | 131 | 124 | 128 | 144 | 170 | 206 | 251 | 333 | 360 | 5,481 |
| Foot lights at atrium stair | | | | | | | | 893 | | | 893 |
| 2x2 lay-in fluorescent fixtures | 1,492 | 1,734 | 1,974 | 2,195 | 2,384 | 2,629 | 2,923 | 2,684 | 2,650 | 2,607 | 33,154 |
| Replace emergency generator 100kw | | | | | | | | | | | 98,390 |
| Rebuild emergency generator 100kw | | | | | | | | | | | |
| Repair/upgrade automatic transfer switch | | | | | | | | | | | 9,018 |
| Replace electrical panels | | | | | | | | | 340,487 | | 340,487 |
| Expense Electrical Subtotal | 2,140 | 2,415 | 6,094 | 2,973 | 3,220 | 3,168 | 4,022 | 14,865 | 344,221 | 3,452 | 652,739 |
| Common Area Floor Finishes | | | | | | | | | | | |
| Replace common area carpet | | | | | 136,133 | | | | | | 243,608 |
| Expense Common Area Floor Finishes Subtotal | | | | | 136,133 | | | | | | 243,608 |
| Common Area Paint & Wall Finishes | | | | | | | | | | | |
| Paint common area walls & ceilings (Phs: 4 yr) | 6,720 | | | | 7,563 | 7,790 | 8,024 | 8,264 | | | 78,285 |
| Expense Common Area Paint & Wall Finishes Subtotal | 6,720 | | | | 7,563 | 7,790 | 8,024 | 8,264 | | | 78,285 |
| Common Area Ceiling Systems | | | | | | | | | | | |
| Replace acoustical ceiling tiles and grid | | | | | | | | | | | 68,794 |
| Expense Common Area Ceiling Systems Subtotal | | | | | | | | | | | 68,794 |
| Unit Refresh Allowance | | | | | | | | | | | |

Attachment 25 - p.42

[redacted], FacilityForecast
Forecasting the Future

# Annual Budget Totals

ILU Apartments
Table VII-A

## 2010-002: St Paul's Home, Belleville, IL

| # | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 85 | 08.01 | Unit turns (painting, carpet replace, misc repairs and upgrades) | 2010 | 1 | | 10 | acts | 2,000.00 | 20,000 | Contract | CAP |
| | | Expense Unit Refresh Allowance Subtotal | | | | | | | | | |
| | 06.02 | Unit Floor Finishes | | | | | | | | | |
| 86 | 06.02 | Sheet vinyl | 1987 | 15 | 7 | 53 | apts | 800.00 | 42,400 | Contract | CAP |
| | | Expense Unit Floor Finishes Subtotal | | | | | | | | | |
| | 06.05 | Unit MEP | | | | | | | | | |
| 87 | 06.05 | Smoke detectors | 1987 | 10 | 7 | 77 | ea | 277.00 | 21,329 | Contract | CAP |
| 88 | 06.05 | Hood/light/fan unit at bathrooms | 1987 | 10 | 7 | 52 | ea | 150.00 | 7,950 | Contract | CAP |
| 89 | 06.05 | Thermostats | 1987 | 15 | 7 | 53 | apts | 110.00 | 5,830 | In-house | CAP |
| 90 | 06.05 | Water closets | 1987 | 40 | 17 | 53 | units | 200.00 | 10,600 | Contract | CAP |
| 91 | 06.05 | Fiberglass tub/shower units | 1987 | 35 | 12 | 53 | apts | 750.00 | 39,750 | In-house | CAP |
| 92 | 06.05 | Light fixtures | 2003 | 25 | 18 | 53 | apts | 225.00 | 11,925 | In-house | CAP |
| 93 | 06.05 | Faucets & valves | 1987 | 25 | 2 | 212 | ea | 110.00 | 23,320 | Contract | CAP |
| | | Expense Unit MEP Subtotal | | | | | | | | | |
| | 06.06 | Unit Cabinets, Counter Tops & Millwork | | | | | | | | | |
| 94 | 06.06 | Replace kitchen & bath cabinets | 1987 | 40 | 17 | 53 | ea | 1,200.00 | 63,600 | Contract | CAP |
| | | Expense Unit Cabinets, Counter Tops & Millwork Subtotal | | | | | | | | | |
| | 06.07 | Unit Doors & Hardware | | | | | | | | | |
| 95 | 06.07 | Interior doors & hardware | 1987 | 25 | 2 | 53 | apts | 400.00 | 21,200 | Contract | CAP |
| | | Expense Unit Doors & Hardware Subtotal | | | | | | | | | |
| | 06.08 | Unit Specials | | | | | | | | | |
| 96 | 06.08 | Closet shelving | 2003 | 25 | 18 | 53 | units | 150.00 | 7,950 | In-house | CAP |
| 97 | 06.08 | Grab bars in baths | 2003 | 25 | 18 | 53 | apts | 350.00 | 18,550 | In-house | CAP |
| | | Expense Unit Specials Subtotal | | | | | | | | | |
| | 06.09 | Unit Appliances | | | | | | | | | |
| 98 | 06.09 | Refrigerator | 1987 | 15 | 7 | 53 | ea | 650.00 | 34,450 | Contract | CAP |
| 99 | 06.09 | Microwave | 1987 | 10 | 7 | 53 | ea | 125.00 | 6,625 | Contract | CAP |
| 100 | 06.09 | Range | 1987 | 20 | 17 | 53 | ea | 750.00 | 39,750 | Contract | CAP |
| 101 | 06.09 | Vent hood | 1987 | 20 | 17 | 53 | ea | 70.00 | 3,710 | Contract | CAP |
| 102 | 06.09 | Disposal | 1987 | 10 | 7 | 53 | ea | 85.00 | 4,505 | Contract | CAP |
| | | Expense Unit Appliances Subtotal | | | | | | | | | |
| | 07.03 | Interior Signage, Art & Accessories | | | | | | | | | |
| 103 | 07.03 | Replace interior signage | 2018 | 15 | 8 | 1 | ls | 10,000.00 | 10,000 | Contract | CAP |
| | | Expense Interior Signage, Art & Accessories Subtotal | | | | | | | | | |
| | 07.04 | Window Coverings | | | | | | | | | |
| 104 | 07.04 | Blinds or other window treatments | 2011 | 10 | 1 | 53 | apts | 1,200.00 | 63,600 | Contract | CAP |
| | | Expense Window Coverings Subtotal | | | | | | | | | |
| | 07.06 | Entertainment, Communication & Security Systems | | | | | | | | | |
| 105 | 07.06 | Baby grand piano | 1987 | 30 | 7 | 1 | ea | 25,000.00 | 25,000 | Contract | CAP |
| 106 | 07.06 | Upright piano | 1987 | 30 | 7 | 1 | ea | 10,000.00 | 10,000 | Contract | CAP |
| 107 | 07.06 | Port table and accessories | 2009 | 15 | 14 | 1 | ea | 4,500.00 | 4,500 | Contract | CAP |
| 108 | 07.06 | Replace/upgrade telephone system | 2010 | 10 | | 1 | ls | 3,800.00 | 3,800 | Contract | CAP |
| | | Expense Entertainment, Communication & Security Systems Subtotal | | | | | | | | | |
| | 07.07 | Office Systems | | | | | | | | | |
| [redacted] | 07.07 | Martha Holloway HP x1145371 + HP 2600N Color | 2003 | 6 | 5 | 1 | ea | 3,000.00 | 3,000 | Contract | CAP |
| [redacted] 110 | 07.07 | Sandy Koester Dell x19-60256 + HP2430 | 2005 | 6 | 1 | 1 | ea | 2,100.00 | 2,100 | Contract | CAP |
| [redacted] 111 | 07.07 | Sone Mazanec Dell Optiplex 755 + HP 1300 | 2008 | 6 | 4 | 1 | ea | 2,100.00 | 2,100 | Contract | CAP |
| | | Expense Office Systems Subtotal | | | | | | | | | |
| | 07.10 | Kitchen Equipment | | | | | | | | | |
| 112 | 07.10 | DISHMACHINE | 1991 | 15 | 11 | 1 | ea | 10,000.00 | 10,000 | Contract | CAP |
| 113 | 07.10 | GREASE HOOD - SINGLE | 1991 | 30 | 11 | 1 | ea | 12,000.00 | 12,000 | Contract | CAP |
| 114 | 07.10 | Ansul FIRE SUPRESSION SYSTE | 1991 | 12 | 5 | 1 | ea | 2,600.00 | 2,600 | Contract | CAP |
| 115 | 07.10 | Under sink food grinder | 1991 | 10 | 1 | 1 | ea | 1,200.00 | 1,200 | Contract | CAP |
| 116 | 07.10 | Under sink grease trap | 1991 | 15 | 11 | 1 | ea | 1,800.00 | 1,800 | Contract | CAP |
| 117 | 07.10 | Gas range | 1991 | 15 | 11 | 1 | ea | 4,400.00 | 4,400 | Contract | CAP |
| 118 | 07.10 | CONVECTION OVEN, SINGLE | 1991 | 10 | 1 | 1 | ea | 4,140.00 | 4,140 | Contract | CAP |
| 119 | 07.10 | Refrigerator/freezer (residential) | 1991 | 15 | 11 | 1 | ea | 860.00 | 860 | Contract | CAP |
| 120 | 07.10 | UNDER COUNTER FRIDGE | 1991 | 15 | 11 | 1 | ea | 2,051.09 | 2,052 | Contract | CAP |
| 121 | 07.10 | 2 door freezer | 1991 | 15 | 11 | 1 | ea | 3,000.00 | 3,000 | Contract | CAP |
| 122 | 07.10 | 2 door refrigerator | 1991 | 15 | 11 | 1 | ea | 3,000.00 | 3,000 | Contract | CAP |
| 123 | 07.10 | ICE MACHINE | 1991 | 15 | 11 | 1 | ea | 2,298.98 | 2,299 | Contract | CAP |
| | 07.10 | Smallware | 1991 | 5 | 1 | 1 | ls | 1,100.00 | 1,100 | Contract | CAP |
| | | Expense Kitchen Equipment Subtotal | | | | | | | | | |
| | 07.14 | Housekeeping Equipment | | | | | | | | | |
| 125 | 07.14 | Housekeeping equip | 2007 | 10 | 7 | 3 | ea | 220.00 | 660 | Contract | CAP |
| 126 | 07.14 | Vacuums | 2009 | 3 | 2 | 3 | ea | 600.00 | 1,800 | Contract | CAP |
| 127 | 07.14 | Carpet extractor | 2009 | 15 | 14 | 1 | ea | 2,600.00 | 2,600 | Contract | CAP |

| Item | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 |
|---|---|---|---|---|---|---|---|---|---|---|
| 85 Unit turns | 28,000 | 28,780 | 27,583 | 28,411 | 29,263 | 30,141 | 31,045 | 31,977 | 32,936 | 33,924 |
| Expense Unit Refresh Allowance Subtotal | 28,000 | 28,780 | 27,583 | 28,411 | 29,263 | 30,141 | 31,045 | 31,977 | 32,936 | 33,924 |
| 86 Sheet vinyl | | | | | | | | 52,147 | | |
| Expense Unit Floor Finishes Subtotal | | | | | | | | 52,147 | | |
| 87 Smoke detectors | | | | | | | | 28,232 | | |
| 88 Hood/light/fan unit at bathrooms | 406 | 463 | 527 | 593 | 632 | 700 | 732 | 749 | 782 | 745 |
| 89 Thermostats | | | | | | | | 7,170 | | |
| 90 Water closets | | | | | | | | | | |
| 91 Fiberglass tub/shower units | 481 | 645 | 922 | 1,231 | 1,585 | 1,971 | 2,383 | 2,764 | 3,103 | 3,353 |
| 92 Light fixtures | | | | | | | | | | |
| 93 Faucets & valves | 1,656 | 1,911 | 1,694 | 1,908 | 1,865 | 1,484 | 1,283 | 1,087 | 876 | 738 |
| Expense Unit MEP Subtotal | 2,723 | 3,019 | 3,343 | 3,632 | 3,973 | 4,155 | 4,384 | 37,187 | 4,750 | 4,873 |
| 94 Replace kitchen & bath cabinets | | | | 1,311 | | 1,391 | 1,433 | 1,476 | 3,040 | 3,131 |
| Expense Unit Cabinets, Counter Tops & Millwork Subtotal | | | | 1,311 | | 1,391 | 1,433 | 1,476 | 3,040 | 3,131 |
| 95 Interior doors & hardware | | | 22,491 | | | | | | | |
| Expense Unit Doors & Hardware Subtotal | | | 22,491 | | | | | | | |
| 96 Closet shelving | | | | | | | | | | |
| 97 Grab bars in baths | | | | | | | | | | |
| Expense Unit Specials Subtotal | | | | | | | | | | |
| 98 Refrigerator | 1,300 | 2,009 | 2,758 | 2,131 | 2,920 | 3,014 | 3,128 | 3,198 | 3,234 | 3,192 |
| 99 Microwave | 750 | 544 | 683 | 683 | 644 | 725 | 748 | 822 | 792 | 815 |
| 100 Range | 2,260 | 2,318 | 1,581 | 1,639 | 844 | 1,739 | 690 | 1,845 | 950 | 1,037 |
| 101 Vent hood | 210 | 216 | 149 | 153 | 79 | 182 | 84 | 172 | 89 | 183 |
| 102 Disposal | 510 | 438 | 451 | 484 | 574 | 493 | 507 | 627 | 538 | 848 |
| Expense Unit Appliances Subtotal | 5,020 | 5,624 | 5,612 | 5,070 | 5,287 | 6,153 | 5,337 | 6,754 | 5,662 | 5,902 |
| 103 Replace interior signage | | | | | | 11,593 | | | | |
| Expense Interior Signage, Art & Accessories Subtotal | | | | | | 11,593 | | | | |
| 104 Blinds or other window treatments | | 65,508 | | | | | | | | |
| Expense Window Coverings Subtotal | | 65,508 | | | | | | | | |
| 105 Baby grand piano | | | | | | | | 30,747 | | |
| 106 Upright piano | | | | | | | | 12,299 | | |
| 107 Port table and accessories | | | | | | | | | | |
| 108 Replace/upgrade telephone system | 3,800 | | | | | | | | | |
| Expense Entertainment, Communication & Security Systems Subtotal | 3,800 | | | | | | | 43,046 | | |
| Martha Holloway HP x1145371 + HP 2600N Color | | | | | | 3,478 | | | | |
| 110 Sandy Koester Dell x19-60256 + HP2430 | | 2,163 | | | | | | 2,587 | | |
| 111 Sone Mazanec Dell Optiplex 755 + HP 1300 | | | | | 2,364 | | | | | |
| Expense Office Systems Subtotal | | 2,163 | | | 2,364 | 3,478 | | 2,583 | | |
| 112 DISHMACHINE | | | | | | | | | | |
| 113 GREASE HOOD - SINGLE | | | | | | | | | | |
| 114 Ansul FIRE SUPRESSION SYSTE | | | | | | 3,014 | | | | |
| 115 Under sink food grinder | | 1,236 | | | | | | | | |
| 116 Under sink grease trap | | | | | | | | | | |
| 117 Gas range | | | | | | | | | | |
| 118 CONVECTION OVEN, SINGLE | | 4,264 | | | | | | | | |
| 119 Refrigerator/freezer (residential) | | | | | | | | | | |
| 120 UNDER COUNTER FRIDGE | | | | | | | | | | |
| 121 2 door freezer | | | | | | | | | | |
| 122 2 door refrigerator | | | | | | | | | | |
| 123 ICE MACHINE | | | | | | | | | | |
| Smallware | | 1,133 | | | | | 1,313 | | | |
| Expense Kitchen Equipment Subtotal | | 6,633 | | | | 3,014 | 1,313 | | | |
| 125 Housekeeping equip | | | | | | | | 612 | | |
| 126 Vacuums | | | 1,910 | | | 2,097 | | | 2,250 | |
| 127 Carpet extractor | | | | | | | | | | |

| Item | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 85 Unit turns | 34,942 | 35,990 | 37,070 | 38,182 | 39,327 | 40,507 | 41,722 | 42,974 | 44,263 | 45,591 | 688,630 |
| Expense Unit Refresh Allowance Subtotal | 34,942 | 35,990 | 37,070 | 38,182 | 39,327 | 40,507 | 41,722 | 42,974 | 44,263 | 45,591 | 693,630 |
| 86 Sheet vinyl | | | | | | | | | | | 52,147 |
| Expense Unit Floor Finishes Subtotal | | | | | | | | | | | 52,147 |
| 87 Smoke detectors | | | | | | | | 33,234 | | | 61,466 |
| 88 Hood/light/fan unit at bathrooms | 731 | 722 | 747 | 720 | 735 | 781 | 798 | 842 | 860 | 939 | 14,177 |
| 89 Thermostats | | | | | | | | | | | 7,173 |
| 90 Water closets | | | | | | | | 17,520 | | | 17,520 |
| 91 Fiberglass tub/shower units | 3,504 | 3,702 | 3,707 | 3,612 | 3,427 | 3,168 | 2,856 | 2,513 | 2,160 | 1,816 | 49,008 |
| 92 Light fixtures | | | | | | | | | 20,302 | | 20,302 |
| 93 Faucets & valves | 619 | 543 | 514 | 533 | 697 | 707 | 857 | 1,044 | 1,263 | 1,487 | 22,785 |
| Expense Unit MEP Subtotal | 4,948 | 4,987 | 4,937 | 4,864 | 4,759 | 4,636 | 4,512 | 57,173 | 24,812 | 4,262 | 192,446 |
| 94 Replace kitchen & bath cabinets | 3,225 | 3,322 | 5,133 | 5,287 | 7,260 | 5,609 | 5,777 | 5,950 | 6,172 | 4,208 | 65,720 |
| Expense Unit Cabinets, Counter Tops & Millwork Subtotal | 3,225 | 3,322 | 5,133 | 5,287 | 7,260 | 5,609 | 5,777 | 5,950 | 6,172 | 4,208 | 65,720 |
| 95 Interior doors & hardware | | | | | | | | | | | 22,491 |
| Expense Unit Doors & Hardware Subtotal | | | | | | | | | | | 22,491 |
| 96 Closet shelving | | | | | | | | | 13,534 | | 13,534 |
| 97 Grab bars in baths | | | | | | | | | 31,580 | | 31,580 |
| Expense Unit Specials Subtotal | | | | | | | | | 45,114 | | 45,114 |
| 98 Refrigerator | 3,494 | 2,699 | 2,780 | 3,616 | 2,050 | 3,036 | 4,172 | 1,223 | 3,320 | 4,559 | 61,160 |
| 99 Microwave | 1,008 | 885 | 801 | 918 | 1,134 | 974 | 1,003 | 1,340 | 1,064 | 1,096 | 17,777 |
| 100 Range | 3,024 | 2,078 | 3,208 | 3,304 | 4,536 | 3,605 | 3,611 | 4,959 | 3,830 | 3,945 | 52,029 |
| 101 Vent hood | 202 | 104 | 299 | 385 | 424 | 377 | 337 | 463 | 250 | 345 | 4,856 |
| 102 Disposal | 885 | 788 | 606 | 824 | 771 | 682 | 882 | 843 | 724 | 745 | 12,088 |
| Expense Unit Appliances Subtotal | 8,494 | 6,423 | 7,785 | 8,873 | 9,817 | 8,507 | 9,105 | 10,777 | 9,295 | 10,714 | 147,931 |
| 103 Replace interior signage | | | | | | | | | | | 11,593 |
| Expense Interior Signage, Art & Accessories Subtotal | | | | | | | | | | | 11,593 |
| 104 Blinds or other window treatments | | 88,037 | | | | | | | | | 153,545 |
| Expense Window Coverings Subtotal | | 88,037 | | | | | | | | | 153,545 |
| 105 Baby grand piano | | | | | | | | | | | 30,747 |
| 106 Upright piano | | | | | | | | | | | 12,299 |
| 107 Port table and accessories | | | | | 6,607 | | | | | | 6,607 |
| 108 Replace/upgrade telephone system | 5,107 | | | | | | | | | | 8,907 |
| Expense Entertainment, Communication & Security Systems Subtotal | 5,107 | | | | 6,807 | | | | | | 58,759 |
| Martha Holloway HP x1145371 + HP 2600N Color | | 4,153 | | | | | | 4,959 | | | 12,589 |
| 110 Sandy Koester Dell x19-60256 + HP2430 | | | | 3,084 | | | | | | 3,662 | 11,512 |
| 111 Sone Mazanec Dell Optiplex 755 + HP 1300 | 2,822 | | | | | | 3,370 | | | | 8,556 |
| Expense Office Systems Subtotal | 2,822 | 4,153 | | 3,084 | | | 3,370 | 4,959 | | 3,662 | 22,657 |
| 112 DISHMACHINE | | 13,842 | | | | | | | | | 13,842 |
| 113 GREASE HOOD - SINGLE | | 16,911 | | | | | | | | | 16,911 |
| 114 Ansul FIRE SUPRESSION SYSTE | | | | | | | | 4,297 | | | 7,312 |
| 115 Under sink food grinder | | 1,661 | | | | | | | | | 2,897 |
| 116 Under sink grease trap | | 2,497 | | | | | | | | | 2,497 |
| 117 Gas range | | 6,091 | | | | | | | | | 6,091 |
| 118 CONVECTION OVEN, SINGLE | | 5,731 | | | | | | | | | 9,995 |
| 119 Refrigerator/freezer (residential) | | 1,177 | | | | | | | | | 1,177 |
| 120 UNDER COUNTER FRIDGE | | 2,840 | | | | | | | | | 2,840 |
| 121 2 door freezer | | 4,153 | | | | | | | | | 4,153 |
| 122 2 door refrigerator | | 4,153 | | | | | | | | | 4,153 |
| 123 ICE MACHINE | | 3,182 | | | | | | | | | 3,182 |
| Smallware | | 1,523 | | | | | 1,766 | | | | 6,734 |
| Expense Kitchen Equipment Subtotal | | 83,455 | | | | | 1,765 | 4,297 | | | 89,478 |
| 125 Housekeeping equip | | | | | | | | 1,291 | | | 1,903 |
| 126 Vacuums | | 2,492 | | | 2,723 | | | 2,975 | | | 14,466 |
| 127 Carpet extractor | | | | | 3,933 | | | | | | 3,933 |

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2010-002: St Paul's Home, Belleville, IL

# Annual Budget Totals

ILU Apartments
Table VII-A

| | Catg. | Item Description | Begin Date | EUL | RUL (2010) | Quantity | Unit | Unit Cost | Estimated Cost | Pricing Method | Item Class | 2010 Year 1 | 2011 Year 2 | 2012 Year 3 | 2013 Year 4 | 2014 Year 5 | 2015 Year 6 | 2016 Year 7 | 2017 Year 8 | 2018 Year 9 | 2019 Year 10 | 2020 Year 11 | 2021 Year 12 | 2022 Year 13 | 2023 Year 14 | 2024 Year 15 | 2025 Year 16 | 2026 Year 17 | 2027 Year 18 | 2028 Year 19 | 2029 Year 20 | Totals |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Expense Housekeeping Equipment Subtotal | | | | | | | | | | | | 1,910 | | | 2,087 | | 812 | 2,230 | | | 2,492 | | | 8,855 | | | 4,096 | | | 20,301 |
| | 07.15 | Pool & Fitness Equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ⇗128 | 07.15 | Treadmill (not in use) | 2007 | 10 | 7 | 1 | ea | 4,150.00 | 4,150 | Contract | CAP | | | | | | | | 5,473 | | | | | | | | | | 7,255 | | | 17,628 |
| ⇗129 | 07.15 | Stationary bike | 2007 | 10 | 7 | 1 | ea | 1,600.00 | 1,600 | Contract | CAP | | | | | | | | 2,214 | | | | | | | | | | 2,975 | | | 5,189 |
| ⇗130 | 07.15 | Other fitness equipment | 2007 | 10 | 7 | 1 | ea | 600.00 | 600 | Contract | CAP | | | | | | | | 739 | | | | | | | | | | 993 | | | 1,732 |
| | | Expense Pool & Fitness Equipment Subtotal | | | | | | | | | | | | | | | | | 8,426 | | | | | | | | | | 11,212 | | | 19,747 |
| | | Expense Total | | | | | | | | | | 80,203 | 156,512 | 374,448 | 321,912 | 87,905 | 127,884 | 172,982 | 460,430 | 97,752 | 78,072 | 85,812 | 243,364 | 80,428 | 101,583 | 260,679 | 104,259 | 126,371 | 391,213 | 541,290 | 230,715 | 4,321,843 |
| | | Inflation: | | | | | | | | | | | 3.00% | 6.09% | 9.27% | 12.55% | 15.93% | 19.41% | 22.05% | 26.56% | 30.48% | 34.30% | 38.42% | 42.56% | 46.15% | 51.35% | 55.80% | 60.47% | 65.29% | 70.24% | 75.35% | |

00225

# Annual Budget Totals – To Property

**ILU Apartments**
**Chart VII-A.1**

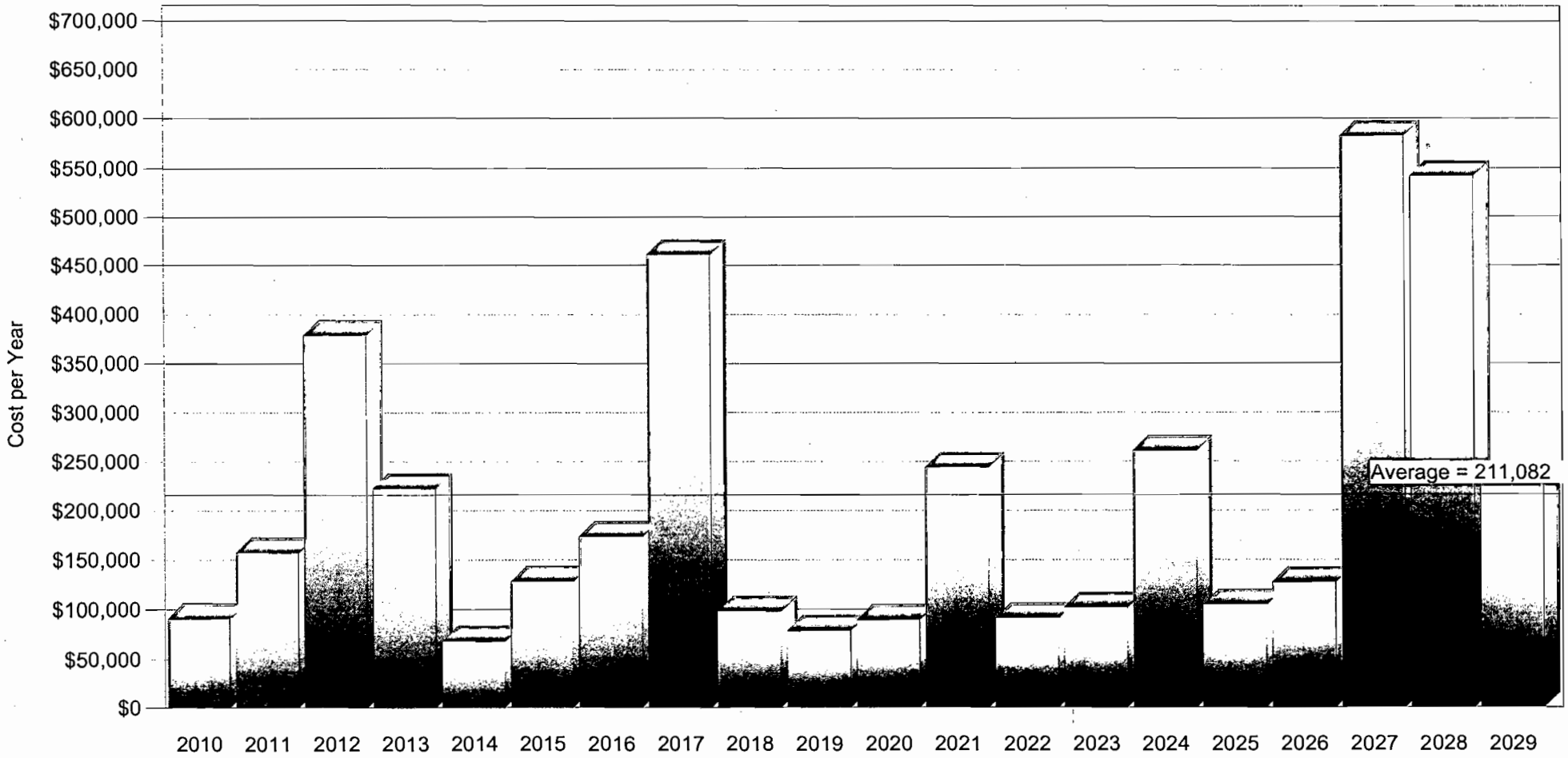
**2010-002: St Paul's Home, Belleville, IL**

**Report Parameters**

| | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, REP, IMP |

**Report Parameters**

| | | | |
|---|---|---|---|
| **Budget Types:** | Expense | **Units:** | 53 ILUs |
| **Divisions:** | All | **Area:** | 70,200 SF |
| **Minimum unit cost:** | 0.00 | **Year:** | 1987 |
| | | **Modified:** | 21 Sep 2010 |



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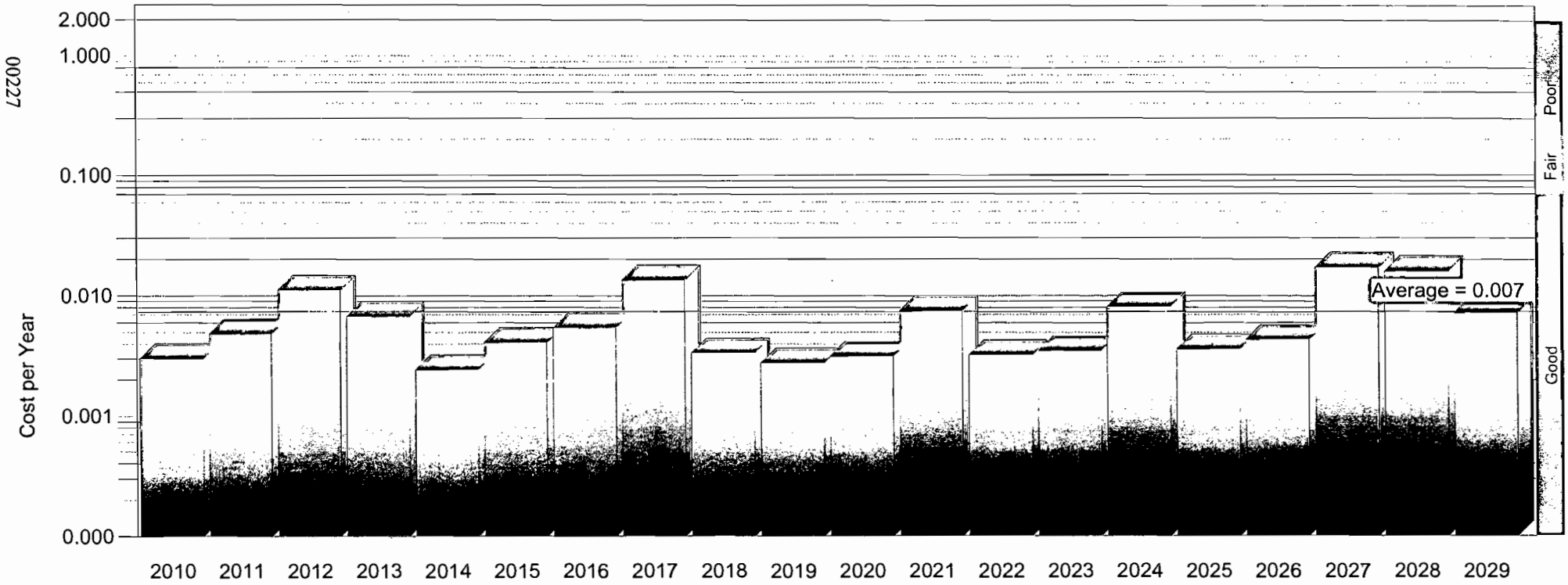
# Facility Condition Index – To Property

**ILU Apartments**
**Chart VII-C.1**

**2010-002: St Paul's Home, Belleville, IL**

| Report Parameters | | Report Parameters | | | |
|---|---|---|---|---|---|
| **Begin Year:** | 2010 | **Budget Types:** | Expense | **Units:** | 53 ILUs |
| **Report Term:** | 20 years | **CRV Year:** | 2010 | **Area:** | 70,200 SF |
| **Inflation:** | 3.00% | **FCI:** | ( CAP + OPER ) / CRV | **Year:** | 1987 |
| **Area Type:** | Gross SF | **Minimum unit cost:** | 0.00 | **Modified:** | 21 Sep 2010 |




Attachment 25 - p.45

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# Item Comments Report

**All Budgets**
**Table VII-B**

## 2010-002: St Paul's Home, Belleville, IL

**Report Parameters**

| | |
|---|---|
| **Begin Year:** | 2010 |
| **Report Term:** | 20 years |
| **Inflation:** | 3.00% |
| **Area Type:** | Gross SF |
| **Classifications:** | CAP, OPER |

**Report Parameters**

| | |
|---|---|
| **Budget Types:** | Expense |
| **Divisions:** | All |
| **Certification:** | See Index Report |
| **Minimum unit cost:** | 0.00 |

| | Catg. | Budget | Description | Forecast Method | Quantity | Unit Cost | Install | Files/Photos | Comments |
|---|---|---|---|---|---|---|---|---|---|
| **Expense** | | | | | | | | | |
| | **02.01** | | **Landscape & Hardscape** | | | | | | |
| 1 | 02.01 | Sitework | Landscape repair & upgrades | L-Cycle | 1 | 5,000 | 2010 | | Work not covered by landscape contract |
| 2 | 02.01 | Sitework | Prune trees | L-Cycle | 1 | 1,000 | 2010 | 85 | |
| | **02.04** | | **Site Concrete** | | | | | | |
| 3 | 02.04 | Sitework | Repair concrete walks to eliminate tripping hazards | L-Cycle | 1 | 700 | 2010 | 84, 86 | |
| 4 | 02.04 | Sitework | Clean & re-caulk joints in sidewalks | L-Cycle | 650 | 1.6 | 2010 | | Routine replacement |
| | **02.05** | | **Retaining Walls** | | | | | | |
| 5 | 02.05 | Sitework | Repair/caulk joints in capstone at retaining walls | L-Cycle | 183 | 1.75 | 2010 | 73 | |
| | **02.06** | | **Site Rails, Fencing & Gates** | | | | | | |
| 6 | 02.06 | Sitework | Replace wood fence around cooling tower and dumpsters | L-Cycle | 65 | 22 | 2013 | 62, 82 | Routine replacement |
| | **02.07** | | **Site Lighting** | | | | | | |
| 7 | 02.07 | Sitework | Pole lights with spherical globes | L-Cycle | 2 | 1,500 | 1995 | | Routine replacement |
| 8 | 02.07 | Sitework | Cobra head pole lights | L-Cycle | 5 | 425 | 1995 | | Routine replacement |
| 9 | 02.07 | Sitework | Shoe box style pole lights | L-Cycle | 5 | 900 | 1995 | | Routine replacement |
| 10 | 02.07 | Sitework | Bollard lights | L-Cycle | 10 | 900 | 1995 | | Routine replacement |
| 11 | 02.07 | Sitework | Up light at monument sign | L-Cycle | 1 | 900 | 1987 | | Routine replacement |
| | **02.09** | | **Site Utilities** | | | | | | |
| 12 | 02.09 | Sitework | Miscellaneous site utility repairs | L-Cycle | 1 | 2,500 | 2011 | | Routine repairs |
| | **02.10** | | **Signage** | | | | | | |
| 13 | 02.10 | Sitework | Replace monument signage | L-Cycle | 3 | 4,000 | 2020 | 8, 9, 74 | |
| | **02.13** | | **Amenities** | | | | | | |
| 14 | 02.13 | Sitework | Bird bath/fountain | L-Cycle | 1 | 1,000 | 1995 | | Routine replacement |
| | 02.13 | Sitework | Gazebo | L-Cycle | 1 | 4,500 | 2000 | 46 | |
| | 02.13 | Sitework | Benches | L-Cycle | 4 | 550 | 2015 | | Routine replacement |
| | 02.13 | Sitework | Replace out buildings used for storage | L-Cycle | 2 | 4,000 | 2015 | 83 | Routine replacement |
| 18 | 02.13 | Sitework | Replace garage used for storage | L-Cycle | 1 | 12,000 | 2017 | | Routine replacement |
| | **03.04** | | **Thermal & Moisture Protection Systems** | | | | | | |
| 19 | 03.04 | Apts | Replace asphalt shingle roof | L-Cycle | 214 | 210 | 2005 | 48, 49 | |
| 20 | 03.04 | Nursing | EPDM membrane roof, 60 mil, fully adhered | L-Cycle | 4,904 | 9.5 | 2000 | | Roof Area M |
| 21 | 03.04 | Nursing | Reset 2 roof drains to facilitate drainage | 1x | 2 | 50 | 2010 | 97 | Roof Area M |
| 22 | 03.04 | Nursing | Firestone EPDM membrane roof, fully adhered 60 mil | L-Cycle | 7,239 | 9.5 | 1989 | | Roof Area L |
| 23 | 03.04 | Nursing | Ballasted coal tar roof | L-Cycle | 3,055 | 4.75 | 2012 | | Roof Area N, moss actively growing on roof |
| 24 | 03.04 | Nursing | Ballasted coal tar roof | L-Cycle | 4,806 | 4.75 | 2012 | 56 | Roof Area K, numerous water blisters, needs repair incl. replacement of lead boots |
| 25 | 03.04 | Nursing | Ballasted built-up roof | L-Cycle | 12,438 | 4.75 | 2012 | 60, 61, 119 | Roof Area J |
| 26 | 03.04 | Nursing | EPDM membrane roof, fully adhered | L-Cycle | 240 | 9.5 | 2011 | 95 | Roof Area H, needs replacement |
| 27 | 03.04 | Nursing | Downspouts | L-Cycle | 48 | 8 | 1975 | | Rear of building |
| 28 | 03.04 | Nursing | Gutters & downspouts | L-Cycle | 115 | 7 | 1995 | | Generator out building |
| 29 | 03.04 | Nursing | Asphalt shingles | L-Cycle | 481 | 2.1 | 1995 | | Generator house roof |
| 30 | 03.04 | Shelter | Replace rusty metal coping at dining room roof | L-Cycle | 200 | 10.5 | 2010 | 67 | Roof Area B |
| 31 | 03.04 | Shelter | EPDM membrane, fully adhered Goodyear Versagard | L-Cycle | 840 | 9.5 | 2006 | | Roof Area C |
| 32 | 03.04 | Shelter | EPDM membrane roof, Carlisle fully adhered, 60 mil | L-Cycle | 7,374 | 9.5 | 2005 | | Roof Area G, estimated 5 years old |
| 33 | 03.04 | Shelter | EPDM membrane roof, 60 mil, fully adhered | L-Cycle | 1,980 | 9.5 | 2000 | | Roof Area D |
| 34 | 03.04 | Shelter | Downspouts | L-Cycle | 55 | 8 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| 35 | 03.04 | Shelter | Downspouts | L-Cycle | 75 | 8 | 1985 | | Ludwig & Kohl Wings |
| 36 | 03.04 | Shelter | Downspouts | L-Cycle | 40 | 8 | 1985 | | Kohl Wing |
| 37 | 03.04 | Shelter | Built-up roof | L-Cycle | 1,420 | 9.5 | 1995 | | Roof Area E |
| 38 | 03.04 | Shelter | Ballasted EPDM membrane roof | L-Cycle | 2,835 | 9.5 | 2000 | 65 | Roof Area B |
| 39 | 03.04 | Shelter | Ballasted built-up roof | L-Cycle | 2,394 | 9.5 | 2000 | 64, 87, 90 | Roof Area A |
| 40 | 03.04 | Shelter | Asphalt shingles | L-Cycle | 3,757 | 2.1 | 2000 | | Roof Area F |
| 41 | 03.04 | Shelter | Asphalt shingles | L-Cycle | 1,056 | 2.1 | 2005 | | Roof Area D |
| | **03.05** | | **Exterior Wall & Finish Systems** | | | | | | |
| 42 | 03.05 | Apts | Elastomeric coating on EIFS | L-Cycle | 4,385 | 2.25 | 2010 | 71, 76 | |
| 43 | 03.05 | Apts | Clean & recaulk brick control joints, louvers | L-Cycle | 369 | 0.9 | 2010 | 75 | |
| 44 | 03.05 | Apts | Wet glaze balcony green houses | L-Cycle | 338 | 7.5 | 2014 | 50, 52 | |
| 45 | 03.05 | Nursing | Pressure wash & seal arch precast at rear of chapel | L-Cycle | 1 | 500 | 2010 | | Rear of building |
| 46 | 03.05 | Nursing | Repair mosaic panel on south elevation of Bartel Wing | 1x | 1 | 500 | 2010 | 126 | |
| 47 | 03.05 | Shelter | Repair brick at Kohl Wing | 1x | 1 | 450 | 2010 | 94 | |
| | **03.07** | | **Doors, Windows & Hardware** | | | | | | |
| | 03.07 | Nursing | Fixed sash HM windows (interior) 4 x 3 | L-Cycle | 4 | 335 | 1985 | | Board room, therapy, offices, etc. |



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| | Catg. | Budget | Description | Forecast Method | Quantity | Unit Cost | Install | Files/Photos | Comments |
|---|---|---|---|---|---|---|---|---|---|
| | 03.07 | Apts | Alum storefront at atrium | L-Cycle | 600 | 75.5 | 1987 | 48, 49 | |
| | 03.07 | Shelter | Single hung alum windows 36 x 54 | L-Cycle | 26 | 525 | 2010 | | Rear of building<br>Long overdue for replacement |
| 51 | 03.07 | Shelter | Single hung alum windows 36 x 54 | L-Cycle | 40 | 525 | 2010 | | Ludwig Wing<br>Long overdue for replacement |
| 52 | 03.07 | Shelter | Replace fixed sash wood windows (2'-8" x 8'-0") | L-Cycle | 12 | 815 | 2011 | 100 | Kohl Wing |
| 53 | 03.07 | Shelter | Replace wood windows & trim (2'-10" x 6'-0") | L-Cycle | 30 | 525 | 2010 | | Kohl Wing<br>Long overdue for replacement |
| 54 | 03.07 | Shelter | Windows, single hung, alum. w/ storm windows | L-Cycle | 6 | 525 | 2010 | | Shelter kitchen, dining room & connecting corridor<br>Long overdue for replacement |
| 55 | 03.07 | Shelter | Windows, fixed sash wood approx 4' x 8' | L-Cycle | 13 | 1,000 | 2010 | | Kohl Wing<br>Long overdue for replacement |
| 56 | 03.07 | Shelter | Windows, alum. Casement 6' x 4' | L-Cycle | 2 | 1,400 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| 57 | 03.07 | Shelter | Single hung alum windows 36 x 54 | L-Cycle | 7 | 525 | 2010 | | Kohl Wing<br>Believed to be 1985 vintage and overdue for replacement |
| 58 | 03.07 | Shelter | Wood door set in HM frame | L-Cycle | 1 | 125 | 2011 | | Rear of building- deferred maintenance Originally installed 1975 or earlier |
| 59 | 03.07 | Shelter | Hollow core flush doors at baths | Pool | 13 | 140 | 1955 | | Ludwig Wing |
| 60 | 03.07 | Shelter | Hollow core flush doors at baths | Pool | 18 | 140 | 1985 | | Kohl Wing |
| 61 | 03.07 | Shelter | HM door & lockset | L-Cycle | 1 | 585 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| 62 | 03.07 | Shelter | HM door & lockset | L-Cycle | 1 | 585 | 1975 | | Rear of building |
| 63 | 03.07 | Shelter | HM door & lockset | Pool | 9 | 585 | 1965 | | Basement level |
| 64 | 03.07 | Shelter | Fire doors (interior wood) | L-Cycle | 1 | 1,070 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| 65 | 03.07 | Shelter | Fire doors (interior wood) | L-Cycle | 2 | 1,070 | 1955 | | Ludwig Wing |
| 66 | 03.07 | Shelter | Fire doors (interior wood) | L-Cycle | 1 | 1,070 | 1985 | | Kohl Wing |
| 67 | 03.07 | Shelter | Exterior doors 3-0 x 7-0 | L-Cycle | 5 | 900 | 1985 | | Kohl Wing |
| 68 | 03.07 | Nursing | Single hung alum windows 36 x 54 | L-Cycle | 74 | 525 | 1975 | | Roediger Wing |
| 69 | 03.07 | Nursing | Single hung alum windows 36 x 54 | L-Cycle | 34 | 525 | 1965 | | Bartel Wing |
| 70 | 03.07 | Nursing | Single hung alum windows 36 x 54 | L-Cycle | 26 | 525 | 1975 | | Rear of building |
| 71 | 03.07 | Nursing | Replace wood doors & frames exiting chapel on to roof | L-Cycle | 2 | 900 | 2015 | 118, 130 | |
| 72 | 03.07 | Nursing | Hollow core flush doors at baths | L-Cycle | 19 | 140 | 1975 | | Roediger wing |
| 73 | 03.07 | Nursing | Hollow core flush doors at baths | Pool | 22 | 140 | 1965 | | Bartel Wing |
| 74 | 03.07 | Nursing | HM door & lockset | L-Cycle | 5 | 585 | 1965 | | Basement level |
| 75 | 03.07 | Nursing | HM door & lockset | L-Cycle | 1 | 585 | 1995 | | Generator out building |
| 76 | 03.07 | Nursing | HM door & lockset | L-Cycle | 1 | 585 | 1975 | | Roediger Wing |
| 77 | 03.07 | Nursing | Fire doors (interior wood) | L-Cycle | 2 | 1,500 | 1975 | | Roediger Wing |
| 78 | 03.07 | Nursing | Fire doors (interior wood) | L-Cycle | 1 | 1,500 | 1985 | | Chapel, corridor, and foyer |
| 79 | 03.07 | Nursing | Fire doors (interior wood) | L-Cycle | 1 | 1,500 | 1975 | | Roediger (lower level) |
| 80 | 03.07 | Nursing | Fire doors (interior wood) | L-Cycle | 1 | 1,500 | 1965 | | Basement level |
| 81 | 03.07 | Nursing | Fire doors (interior wood) | L-Cycle | 1 | 1,500 | 1965 | | Bartel Wing |
| 82 | 03.07 | Nursing | Alum storefront w/ pair of doors & closers | L-Cycle | 144 | 40.5 | 1985 | | Chapel, corridor, and foyer |
| 83 | 03.07 | Nursing | Alum storefront w/ pair of doors & closers | L-Cycle | 182 | 40.5 | 1985 | | Chapel, corridor, and foyer |
| 84 | 03.07 | Nursing | Alum storefront w/ pair of doors & closers | L-Cycle | 1 | 5,210 | 1975 | | Roediger Wing |
| 85 | 03.07 | Nursing | Alum storefront w/ pair of doors & closers | L-Cycle | 1 | 5,210 | 1965 | | Bartel Wing |
| | 03.07 | Nursing | Wood exterior doors w/ HM frame | L-Cycle | 2 | 1,125 | 1965 | | Basement level |
| | 3.07 | Shelter | Wood exterior doors w/ HM frame | L-Cycle | 2 | 125 | 1965 | | Basement level |
| | 03.07 | Shelter | HM door & lockset | L-Cycle | 5 | 585 | 1965 | | Basement level |
| 89 | 03.07 | Shelter | Fire doors (interior wood) | L-Cycle | 1 | 535 | 1965 | | Basement level |
| 90 | 03.07 | Nursing | Wood framed storefront w/ pair of doors & closers | L-Cycle | 111 | 40.5 | 1985 | | Chapel, corridor, and foyer |
| 91 | 03.07 | Nursing | Unit entry doors 42" solid core flush | L-Cycle | 23 | 400 | 1975 | | Roediger (both levels) |
| 92 | 03.07 | Nursing | Unit entry doors 42" solid core flush w 2 uneven leaves | L-Cycle | 22 | 500 | 1965 | | Bartel |
| 93 | 03.07 | Shelter | Unit entry doors | L-Cycle | 18 | 210 | 1965 | | Ludwig & Kohl Wings |
| | **03.08** | | **Vertical Circulation** | | | | | | |
| 94 | 03.08 | Shelter | Upgrade elevator cab finishes | L-Cycle | 1 | 12,000 | 1985 | | Kohl Wing |
| 95 | 03.08 | Shelter | Modernize 2 stop hydraulic elevator | L-Cycle | 1 | 105,000 | 1985 | | Kohl Wing |
| 96 | 03.08 | Nursing | Modernize 2 stop hydraulic elevator | L-Cycle | 1 | 105,000 | 1985 | | Roediger Wing |
| 97 | 03.08 | Nursing | Modernize 2 stop hydraulic elevator | L-Cycle | 1 | 105,000 | 1985 | | Board room, therapy, offices, etc. |
| 98 | 03.08 | Nursing | Upgrade elevator cab finishes | L-Cycle | 1 | 12,000 | 1975 | | Roediger Wing |
| 99 | 03.08 | Nursing | Upgrade elevator cab finishes | L-Cycle | 1 | 12,000 | 1985 | | Board room, therapy, offices, etc. |
| | **03.09** | | **Exterior Paint & Caulk** | | | | | | |
| 100 | 03.09 | Apts | Clean & paint columns & rail posts at bridge | L-Cycle | 1 | 50 | 2010 | 72 | Rust damage will ultimately cause structural failure if not addressed |
| 101 | 03.09 | Nursing | Paint CMU generator house | L-Cycle | 925 | 2 | 2012 | 116 | |
| 102 | 03.09 | Nursing | Paint 6'x7' fixed sash HM window frames | L-Cycle | 5 | 55 | 2010 | | Rear of building |
| 103 | 03.09 | Nursing | Paint 32x84 fixed sash HM window frames (stained glass) | L-Cycle | 9 | 35 | 2010 | | Rear of building |
| 104 | 03.09 | Nursing | Paint exterior CMU walls | L-Cycle | | 450 | 2012 | | Generator out building |
| | **03.10** | | **Specials** | | | | | | |
| 105 | 03.10 | Shelter | Common area toilet partitions | L-Cycle | 6 | 750 | 1990 | | Routine replacement |
| 106 | 03.10 | Apts | Common area toilet accessories | L-Cycle | 3 | 100 | 1987 | | Routine replacement |
| 107 | 03.10 | Nursing | Common area toilet accessories | L-Cycle | 4 | 100 | 1990 | | Routine replacement |
| 108 | 03.10 | Shelter | Common area toilet accessories | L-Cycle | 4 | 100 | 1990 | | Routine replacement |
| 109 | 03.10 | Apts | Accordion folding partition | L-Cycle | 160 | 35 | 2003 | | Routine replacement |
| 110 | 03.10 | Nursing | Stained glass | L-Cycle | 1 | 5,000 | 1985 | | Chapel, corridor, and foyer |
| 111 | 03.10 | Nursing | Folding panel partitions | L-Cycle | 405 | 90.5 | 1985 | | Chapel, corridor, and foyer |
| 112 | 03.10 | Nursing | Folding accordion wall panels | L-Cycle | 180 | 57.5 | 1985 | | Chapel, corridor, and foyer |
| 113 | 03.10 | Nursing | Ecclestical accouterments | L-Cycle | 1 | 10,000 | 1985 | | Chapel, corridor, and foyer |
| | **03.11** | | **Balconies, Elevated Walkways & Rails** | | | | | | |
| 114 | 03.11 | Apts | Clean & apply sealer to balconies | L-Cycle | 15 | 375 | 1987 | | Excludes ground floor patios & enclosed balconies |
| | **03.12** | | **Appliances** | | | | | | |
| 115 | 03.12 | Nursing | Microwave (residential) | L-Cycle | 1 | 150 | 1975 | | Roediger dining room |
| 116 | 03.12 | Nursing | Microwave (residential) | L-Cycle | 1 | 150 | 1985 | | Board room, therapy, offices, etc. |
| 117 | 03.12 | Nursing | Microwave (residential) | L-Cycle | 1 | 150 | 1965 | | Basement level |
| | **4.01** | | **HVAC** | | | | | | |
| | 04.01 | Apts | Water boilers (Phs: 2 yr) | L-Cycle | 2 | 13,000 | 1987 | 31 | 500,000 BTU HH-0500-IN09k1 Teledyne |
| | 04.01 | Apts | Water pumps HP-1 & HP-2 3 hp (Phs: 2 yr) | L-Cycle | 2 | 8,800 | 1987 | 32 | |
| 120 | 04.01 | Apts | Water pumps CP-1 &CHP-2 7.5 hp (Phs: 2 yr) | L-Cycle | 2 | 12,600 | 1987 | 33 | |
| 121 | 04.01 | Apts | Air handling Unit AHU-1 3 hp | L-Cycle | 1 | 7,500 | 1987 | 36 | |

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| | Catg. | Budget | Description | Forecast Method | Quantity | Unit Cost | Install | Files/Photos | Comments |
|---|---|---|---|---|---|---|---|---|---|
| | 04.01 | Apts | Air handling Unit AHU-2 1.5 hp | L-Cycle | 1 | 6,200 | 1987 | 35 | |
| | 04.01 | Apts | Fan coil units FC-A, FC-B, & FC-C | Pool | 58 | 2,300 | 1987 | 30 | |
| | 04.01 | Apts | Split system AC units at bridge (Phs: 2 yr) | L-Cycle | 2 | 2,300 | 2010 | 54 | |
| 125 | 04.01 | Apts | Air cooled chiller 4 stage | L-Cycle | 1 | 69,388 | 2009 | 39 | |
| 126 | 04.01 | Apts | Thru-wall exhaust fan at kitchen grease hood | L-Cycle | 1 | 2,200 | 2003 | 16 | |
| 127 | 04.01 | Nursing | Cooling tower ICT4 54 Evapco | L-Cycle | 1 | 5,940 | 2000 | 115 | Single cell Evapco |
| 128 | 04.01 | Nursing | Exhaust fans | L-Cycle | 6 | 650 | 1990 | | Roof Area J |
| 129 | 04.01 | Nursing | Exhaust fans | L-Cycle | 3 | 3,500 | 2000 | | Roof Area J |
| 130 | 04.01 | Nursing | Oscillating fans in corridors | L-Cycle | 6 | 150 | 1975 | | Roediger Wing |
| 131 | 04.01 | Nursing | Window AC unit | L-Cycle | 5 | 441 | 1998 | | Roediger Wing |
| 132 | 04.01 | Nursing | Window AC unit | L-Cycle | 1 | 441 | 1998 | | Rear of building |
| 133 | 04.01 | Nursing | Window AC unit | L-Cycle | 2 | 441 | 1998 | | Bartel Wing |
| 134 | 04.01 | Nursing | Thru wall PTAC units | L-Cycle | 35 | 1,050 | 1975 | | Roediger Wing |
| 135 | 04.01 | Nursing | Rooftop condensing unit for Roediger corridor HVAC | L-Cycle | 1 | 15,400 | 1975 | | Roediger Wing |
| 136 | 04.01 | Nursing | Fan/evaporator unit for Roediger corridor HVAC | L-Cycle | 1 | 18,500 | 2012 | | Roediger Wing |
| 137 | 04.01 | Nursing | Exhaust fans | L-Cycle | 8 | 375 | 1990 | | Roediger roof |
| 138 | 04.01 | Nursing | Ceiling fans | L-Cycle | 1 | 200 | 1975 | | Roediger Wing |
| 139 | 04.01 | Nursing | Ceiling fans | L-Cycle | 2 | 200 | 1975 | | Roediger dining room |
| 140 | 04.01 | Nursing | Ceiling fans | L-Cycle | 3 | 200 | 1975 | | Roediger (lower level) |
| 141 | 04.01 | Nursing | Sanyo fan coil unit | L-Cycle | 1 | 3,500 | 1997 | | Reception area |
| 142 | 04.01 | Nursing | Sanyo condensing unit | L-Cycle | 1 | 2,200 | 2009 | | Reception area |
| 143 | 04.01 | Nursing | cooling 2ATC0060A3000A American Standard | L-Cycle | 1 | 5,500 | 2007 | | Laundry |
| 144 | 04.01 | Nursing | Roof exhaust fan (residential) | L-Cycle | 1 | 200 | 1995 | | Generator out building |
| 145 | 04.01 | Nursing | Intake air louvers w/ 4 motor operators 8' x 11' | L-Cycle | 1 | 9,340 | 1995 | | Generator out building |
| 146 | 04.01 | Nursing | Fan/evaporator unit for chapel | L-Cycle | 1 | 11,000 | 1981 | | Chapel |
| 147 | 04.01 | Nursing | Rooftop condensing unit for chapel | L-Cycle | 1 | 25,400 | 2009 | 98 | Chapel |
| 148 | 04.01 | Nursing | Hydronic baseboard heat 2' | L-Cycle | 4 | 220 | 1985 | | Board room, therapy, offices, etc. |
| 149 | 04.01 | Nursing | Oscillating fans in corridors | L-Cycle | 4 | 150 | 1965 | | Basement level |
| 150 | 04.01 | Nursing | Oscillating fans in corridors | L-Cycle | 4 | 150 | 1965 | | Bartel Wing |
| 151 | 04.01 | Nursing | Hydronic wall cabinet heater 3' | L-Cycle | 1 | 292 | 1965 | | Basement level |
| 152 | 04.01 | Nursing | Carrier Gemini condenser serving chapel | L-Cycle | 1 | 15,000 | 1965 | | Basement level |
| 153 | 04.01 | Nursing | Cabinet unit heater electric | L-Cycle | 1 | 2,150 | 1965 | | Basement level |
| 154 | 04.01 | Nursing | Cabinet unit heater electric | L-Cycle | 1 | 2,150 | 1985 | | Chapel, corridor, and foyer |
| 155 | 04.01 | Nursing | Cabinet unit heater | L-Cycle | 2 | 985 | 1995 | | Generator out building |
| 156 | 04.01 | Nursing | Replace circulating water pipe | L-Cycle | 16,950 | 10 | 2020 | | Bartel Wing ($7 piping + $3 access costs) |
| 157 | 04.01 | Nursing | Transom circulating fans | L-Cycle | 2 | 100 | 1965 | | Bartel Wing |
| 158 | 04.01 | Nursing | Chiller PWC 3011 3 Drake | L-Cycle | 1 | 25,500 | 1989 | | Bartel Wing |
| 159 | 04.01 | Shelter | Window AC unit | Pool | 16 | 441 | 1998 | | Ludwig Wing |
| 160 | 04.01 | Shelter | Window AC unit | Pool | 2 | 441 | 1998 | | Kohl Wing |
| 161 | 04.01 | Shelter | Thru wall PTAC units | Pool | 27 | 1,050 | 1985 | | Kohl Wing |
| 162 | 04.01 | Shelter | Rooftop condenser RAUC 506 C Trane | L-Cycle | 1 | 5,500 | 2000 | | Kohl corridors |
| 163 | 04.01 | Shelter | Kitchen make up air unit Reznor | L-Cycle | 1 | 9,500 | 2012 | 89 | Kitchen |
| 164 | 04.01 | Shelter | Hydronic heat cabinet 4' | L-Cycle | 16 | 365 | 1955 | | Ludwig Wing |
| | 04.01 | Shelter | Hydronic heat cabinet 2' | L-Cycle | 5 | 220 | 1955 | | Ludwig Wing |
| | 04.01 | Shelter | Hydronic cabinet heater | L-Cycle | 8 | 292 | 1985 | | Kohl Wing |
| | 04.01 | Shelter | Hydronic baseboard heat | Pool | 80 | 292 | 1955 | | Ludwig Wing & Shelter dining room |
| 168 | 04.01 | Shelter | Heat/AC SFHA 1003 H Trane Shelter dining | L-Cycle | 1 | 15,000 | 1990 | 91 | Shelter dining |
| 169 | 04.01 | Shelter | Heat/AC CUR110GN21 Trane (kitchen) | L-Cycle | 1 | 22,000 | 1990 | 88 | Kitchen |
| 170 | 04.01 | Shelter | Fan/evaporator unit for Kohl corridors | L-Cycle | 1 | 5,500 | 2000 | | Kohl corridors |
| 171 | 04.01 | Shelter | Centrifugal hot water pumps (Phs: 2 yr) | L-Cycle | 2 | 10,400 | 2010 | 141 | Kohl basement level<br>Believed to be 1965 vintage and long overdue for replacement |
| 172 | 04.01 | Shelter | Centrifugal chilled water pumps (Phs: 2 yr) | L-Cycle | 2 | 12,600 | 2010 | 143 | Kohl basement level<br>Believed to be 1970 vintage and long overdue for replacement |
| 173 | 04.01 | Shelter | Ceiling fans | L-Cycle | 2 | 200 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| 174 | 04.01 | Shelter | Ceiling fans | L-Cycle | 4 | 200 | 1955 | | Ludwig Wing |
| 175 | 04.01 | Shelter | Boilers 1.68 MBH Cleaver Brooks (Phs: 3 yr) | L-Cycle | 3 | 24,600 | 1990 | 140 | |
| 176 | 04.01 | Shelter | Air handling unit | L-Cycle | 1 | 12,000 | 1990 | 148 | |
| | 04.02 | | **Plumbing & Plumbing Fixtures** | | | | | | |
| 177 | 04.02 | Apts | Water softener | L-Cycle | 1 | 4,436 | 2006 | 37 | |
| 178 | 04.02 | Apts | Water heater 40 gal electric | Pool | 53 | 425 | 1987 | 29 | |
| 179 | 04.02 | Apts | Water heater 40 gal electric | L-Cycle | 1 | 2,200 | 2006 | 34 | |
| 180 | 04.02 | Nursing | Water cooler | L-Cycle | 2 | 1,400 | 1975 | | Roediger (both levels) |
| 181 | 04.02 | Nursing | Water cooler | L-Cycle | 1 | 1,400 | 1985 | | Chapel, corridor, and foyer |
| 182 | 04.02 | Nursing | Water cooler | L-Cycle | 1 | 1,400 | 1985 | | Board room, therapy, offices, etc. |
| 183 | 04.02 | Nursing | Water cooler | L-Cycle | 1 | 1,400 | 1965 | | Bartel Wing |
| 184 | 04.02 | Nursing | Hi-lo water cooler | L-Cycle | 1 | 2,475 | 1965 | | Bartel Wing |
| 185 | 04.02 | Nursing | Faucets & flush valves | Pool | 39 | 95 | 1975 | | Roediger (lower level) |
| 186 | 04.02 | Nursing | Faucets & flush valves | Pool | 4 | 95 | 1985 | | Board room, therapy, offices, etc. |
| 187 | 04.02 | Nursing | Faucets & flush valves | Pool | 41 | 95 | 1965 | | Bartel Wing |
| 188 | 04.02 | Nursing | Eye wash station | L-Cycle | 1 | 2,359 | 2000 | | Basement level |
| 189 | 04.02 | Nursing | Bed pan washer | L-Cycle | 1 | 1,875 | 1965 | | Bartel Wing |
| 190 | 04.02 | Shelter | Water cooler | Pool | 5 | 1,400 | 1985 | | Ludwig & Kohl Wings |
| 191 | 04.02 | Shelter | Kitchen water storage tank | L-Cycle | 1 | 5,145 | 2002 | 138 | |
| 192 | 04.02 | Shelter | Kitchen/Laundry boiler 645,000 BTU Lockenvar | L-Cycle | 1 | 16,100 | 2009 | 136 | |
| 193 | 04.02 | Shelter | Faucets & flush valves | L-Cycle | 26 | 95 | 1985 | | Ludwig & Kohl Wings |
| | 04.03 | | **Fire Sprinkler & Life Safety Systems** | | | | | | |
| 194 | 04.03 | Apts | Replace fire pump | L-Cycle | 1 | 24,500 | 1987 | 23 | |
| 195 | 04.03 | Nursing | Upgrade fire alarm panels | L-Cycle | 1 | 75,000 | 1995 | | $75,000 total 25% shelter 75% nursing |
| 196 | 04.03 | Nursing | Door hold open device (magnetic) | L-Cycle | 2 | 700 | 1955 | | Ludwig Wing |
| 197 | 04.03 | Nursing | Door hold open device (magnetic) | L-Cycle | 1 | 700 | 1985 | | Chapel, corridor, and foyer |
| 198 | 04.03 | Nursing | Door hold open device (magnetic) | L-Cycle | 1 | 700 | 1965 | | Basement level |
| 199 | 04.03 | Nursing | Door hold open device (magnetic) | L-Cycle | 1 | 700 | 1965 | | Bartel wing |
| 200 | 04.03 | Nursing | Smoke detectors | L-Cycle | 12 | 277 | 1975 | | Roediger dining room, upper & lower levels |
| 201 | 04.03 | Nursing | Smoke detectors | L-Cycle | 1 | 277 | 1995 | | Generator out building |
| | 04.03 | Nursing | Smoke detectors | L-Cycle | 7 | 277 | 1985 | | Chapel, corridor, and foyer |
| | 04.03 | Nursing | Smoke detectors | L-Cycle | 5 | 277 | 1965 | | Basement level |
| | 04.03 | Nursing | Smoke detectors | L-Cycle | 11 | 277 | 1965 | | Bartel Wing |
| | 04.03 | Nursing | Pull station | L-Cycle | 3 | 131 | 1975 | | Roediger (both levels) |
| 206 | 04.03 | Nursing | Pull station | L-Cycle | 3 | 131 | 1985 | | Chapel, corridor, and foyer |
| 207 | 04.03 | Nursing | Pull station | L-Cycle | 3 | 131 | 1965 | | Basement level |

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| | Catg. | Budget | Description | Forecast Method | Quantity | Unit Cost | Install | Files/Photos | Comments |
|---|---|---|---|---|---|---|---|---|---|
| | 4.03 | Nursing | Pull station | L-Cycle | 1 | 131 | 1995 | | Generator out building |
| | 4.03 | Nursing | Pull station | L-Cycle | 1 | 131 | 1985 | | Board room, therapy, offices, etc. |
| | 04.03 | Nursing | Pull station | L-Cycle | 3 | 131 | 1965 | | Bartel Wing |
| 211 | 04.03 | Nursing | Horn/strobe annunciator | L-Cycle | 2 | 222 | 1975 | | Roediger Wing |
| 212 | 04.03 | Nursing | Horn/strobe annunciator | L-Cycle | 1 | 222 | 1965 | | Basement level |
| 213 | 04.03 | Nursing | Horn/strobe annunciator | L-Cycle | 4 | 222 | 1985 | | Chapel, corridor, and foyer |
| 214 | 04.03 | Shelter | Exit signs | L-Cycle | 3 | 128 | 1955 | | Ludwig Wing |
| 215 | 04.03 | Nursing | Horn/strobe annunciator | L-Cycle | 1 | 222 | 1995 | | Generator out building |
| 216 | 04.03 | Nursing | Horn/strobe annunciator | L-Cycle | 4 | 222 | 1965 | | Bartel Wing |
| 217 | 04.03 | Nursing | Exit signs | L-Cycle | 9 | 128 | 1985 | | Chapel, corridor, and foyer |
| 218 | 04.03 | Nursing | Exit signs | L-Cycle | 1 | 128 | 1985 | | Board room, therapy, offices, etc. |
| 219 | 04.03 | Nursing | Exit signs | L-Cycle | 2 | 128 | 1965 | | Basement level |
| 220 | 04.03 | Nursing | Exit signs | L-Cycle | 5 | 128 | 1965 | | Bartel Wing |
| 221 | 04.03 | Shelter | Upgrade fire alarm panel | L-Cycle | 1 | 75,000 | 2016 | | $75,000 total 25% shelter 75% nursing |
| 222 | 04.03 | Nursing | Exit signs | L-Cycle | 4 | 128 | 1975 | | Roediger Wing |
| 223 | 04.03 | Shelter | Pull station | Pool | 7 | 131 | 1955 | | Ludwig & Kohl Wings |
| 224 | 04.03 | Shelter | Horn/strobe annunciator | Pool | 10 | 222 | 1955 | | Ludwig & Kohl Wings |
| 225 | 04.03 | Shelter | Exit signs | L-Cycle | 19 | 128 | 1985 | | Ludwig & Kohl Wings |
| 226 | 04.03 | Shelter | Door hold open device (magnetic) | L-Cycle | 1 | 700 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| 227 | 04.03 | Shelter | Door hold open device (magnetic) | L-Cycle | 1 | 700 | 1985 | | Kohl Wing |
| 228 | 04.03 | Nursing | Exit signs | L-Cycle | 3 | 128 | 1975 | | Roediger (lower level) |
| | | | | | | | | | |
| | 04.04 | | Electrical | | | | | | |
| 229 | 04.04 | Apts | Infrared electric panel study | L-Cycle | 70,200 | 0.03 | 2012 | | Routine study to find pending failures |
| 230 | 04.04 | Shelter | Infrared electric panel study | L-Cycle | 17,505 | 0.03 | 2012 | | Routine study to find pending failures |
| 231 | 04.04 | Nursing | Infrared electric panel study | L-Cycle | 44,672 | 0.03 | 2012 | | Routine study to find pending failures |
| 232 | 04.04 | Apts | Replace emergency generator 100kw | L-Cycle | 1 | 80,000 | 1987 | 38 | |
| 233 | 04.04 | Nursing | Exterior wall sconce | L-Cycle | 2 | 145 | 1975 | | Roediger Wing |
| 234 | 04.04 | Nursing | 2x2 lay in fluor fixtures w/ parabolic lens | L-Cycle | 24 | 225 | 1975 | | Roediger & Bartel Wings |
| 235 | 04.04 | Nursing | 2x2 lay in fluor fixtures | L-Cycle | 4 | 155 | 1975 | | Roediger dining room |
| 236 | 04.04 | Nursing | 1x4 fluor fixtures | L-Cycle | 8 | 166 | 1995 | | Generator out building |
| 237 | 04.04 | Nursing | 1x4 surface mtd fluor fixtures | L-Cycle | 8 | 155 | 1975 | | Roediger dining room |
| 238 | 04.04 | Nursing | 1x4 surface mtd fluor fixtures | L-Cycle | 7 | 155 | 1975 | | Roediger (lower level) |
| 239 | 04.04 | Nursing | 1x4 surface mtd fluor fixtures | L-Cycle | 35 | 155 | 1965 | | Basement level |
| 240 | 04.04 | Nursing | 1x4 fluor fixture w/ wrap around lens | L-Cycle | 16 | 166 | 1965 | | Bartel Wing |
| 241 | 04.04 | Nursing | 1x4 fluor fixtures recessed in drywall | L-Cycle | 9 | 166 | 1985 | | Chapel, corridor, and foyer |
| 242 | 04.04 | Nursing | Lay in fluor light fixtures | L-Cycle | 58 | 166 | 1985 | | Chapel, corridor, and foyer |
| 243 | 04.04 | Nursing | 2x4 lay in fluor fixtures | L-Cycle | 4 | 166 | 1985 | | Board room, therapy, offices, etc. |
| 244 | 04.04 | Nursing | Recessed soffit lights | L-Cycle | 4 | 131 | 1975 | | Rear of building |
| 245 | 04.04 | Nursing | Replace 660 kw, dual fuel, ONAN generator | L-Cycle | 1 | 400,000 | 1995 | 114 | Generator out building |
| 246 | 04.04 | Nursing | Rebuild 660 kw, dual fuel, ONAN generator | L-Cycle | 1 | 240,000 | 1995 | | Generator out building |
| 247 | 04.04 | Nursing | Track lights | L-Cycle | 6 | 150 | 1985 | | Chapel, corridor, and foyer |
| 248 | 04.04 | Nursing | Down lights | L-Cycle | 31 | 110 | 1985 | | Chapel, corridor, and foyer |
| | 04.04 | Nursing | Down lights | L-Cycle | 13 | 110 | 1965 | | Bartel Wing |
| | 4.04 | Shelter | Surface mtd 1x4 & 2x4 fluor fixtures w/ wrap around lens | L-Cycle | 14 | 277 | 1955 | | Ludwig Wing |
| | 04.04 | Shelter | Exterior wall sconce | L-Cycle | 2 | 145 | 1975 | | Rear of building |
| 252 | 04.04 | Shelter | 4' fluorescent fixture w/ wrap around lens | L-Cycle | 24 | 155 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| 253 | 04.04 | Shelter | 2x4 lay in fluor fixtures | L-Cycle | 8 | 166 | 1965 | | Basement level |
| 254 | 04.04 | Shelter | 1x4 surface mtd fluor fixtures | L-Cycle | 12 | 155 | 1965 | | Basement level |
| 255 | 04.04 | Shelter | 1'x4' fluorescent light (vapor tight) | L-Cycle | 21 | 175 | 2000 | | Shelter kitchen |
| 256 | 04.04 | Shelter | Replace electrical panels | L-Cycle | 1 | 250,000 | 2015 | 111 | |
| | | | | | | | | | |
| | 05.02 | | Common Area Floor Finishes | | | | | | |
| 257 | 05.02 | Nursing | Carpet | L-Cycle | 92 | 30 | 1975 | | Roediger dining room |
| 258 | 05.02 | Nursing | Carpet | L-Cycle | 43 | 30 | 1985 | | Board room, therapy, offices, etc. |
| 259 | 05.02 | Nursing | Vinyl floor in bather room | L-Cycle | 125 | 6.25 | 1965 | | Bartel Wing |
| 260 | 05.02 | Shelter | Vinyl floor tile | L-Cycle | 6,000 | 2.1 | 1985 | | Kohl & Ludwig Wings |
| | | | | | | | | | |
| | 05.03 | | Common Area Paint & Wall Finishes | | | | | | |
| 261 | 05.03 | Apts | Paint common area walls & ceilings (Phs: 4 yr) | L-Cycle | 1 | 20,000 | 2010 | | Routine painting |
| 262 | 05.03 | Nursing | Recaulk crack in stair well at NE corner of building | L-Cycle | 1 | 200 | 2010 | | Roediger (lower level) |
| | | | | | | | | | |
| | 05.04 | | Common Area Ceiling Systems | | | | | | |
| 263 | 05.04 | Apts | Replace acoustical ceiling tiles and grid | L-Cycle | 14,410 | 4.5 | 1987 | | Routine replacement |
| 264 | 05.04 | Nursing | Acoustical ceiling tile | L-Cycle | 35,000 | 4.1 | 1975 | | Bartel & Roediger Wings |
| 265 | 05.04 | Shelter | Acoustical ceiling tile | L-Cycle | 6,000 | 4.1 | 1975 | | Kohl & Ludwig Wings |
| | | | | | | | | | |
| | 05.05 | | Common Area Cabinets, Tops & Millwork | | | | | | |
| 266 | 05.05 | Nursing | Casework (wall & base) at nurses station | L-Cycle | 30 | 719.5 | 1975 | | Roediger wing (both levels) |
| 267 | 05.05 | Nursing | Casework (wall & base) | L-Cycle | 6 | 719.5 | 1975 | | Roediger Wing |
| 268 | 05.05 | Nursing | Casework (base only) | L-Cycle | 12 | 344.5 | 1975 | | Roediger dining room |
| 269 | 05.05 | Nursing | Casework (base & wall) | L-Cycle | 10 | 719.5 | 1985 | | Board room, therapy, offices, etc. |
| 270 | 05.05 | Nursing | Casework (wall & base) | L-Cycle | 14 | 719.5 | 1965 | | Basement level |
| 271 | 05.05 | Nursing | Casework (wall & base) at nurses station | L-Cycle | 15 | 719.5 | 1965 | | Bartel Wing |
| 272 | 05.05 | Nursing | Casework (base & wall) | L-Cycle | 48 | 719.5 | 1965 | | Bartel Wing |
| | | | | | | | | | |
| | 06.04 | | Unit Ceiling Systems | | | | | | |
| 273 | 06.04 | Nursing | Acoustical ceiling tile | L-Cycle | 35,000 | 4.1 | 1975 | | Bartel & Roediger Wings |
| 274 | 06.04 | Shelter | Acoustical ceiling tile | L-Cycle | 3,150 | 4.1 | 1975 | | Kohl only |
| | | | | | | | | | |
| | 06.05 | | Unit MEP | | | | | | |
| 275 | 06.05 | Shelter | Over bed light | Pool | 64 | 125 | 1985 | | Kohl & Ludwig Wings |
| 276 | 06.05 | Nursing | Over bed light | L-Cycle | 42 | 125 | 1965 | | Bartel Wing |
| 277 | 06.05 | Nursing | Over bed light | L-Cycle | 76 | 125 | 1975 | | Roediger (both levels) |
| | | | | | | | | | |
| | 06.06 | | Unit Cabinets, Counter Tops & Millwork | | | | | | |
| | 6.06 | Shelter | Built-in metal/wood wardrobe (replace with wood cabinets) | L-Cycle | 18 | 1,617.5 | 1985 | | Kohl Wing |
| | 06.06 | Nursing | Built-in metal/wood wardrobe (replace with wood cabinets) | L-Cycle | 49 | 1,617.5 | 1975 | | Roediger (both levels) |
| | | | | | | | | | |
| | 06.09 | | Unit Appliances | | | | | | |



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| | Catg. | Budget | Description | Forecast Method | Quantity | Unit Cost | Install | Files/Photos | Comments |
|---|---|---|---|---|---|---|---|---|---|
| | 06.09 | Apts | Refrigerator | Pool(W) | 53 | 650 | 1987 | 19 | |
| | 06.09 | Apts | Microwave | Pool(W) | 53 | 125 | 1987 | 19 | |
| | 06.09 | Apts | Range | Pool(W) | 53 | 750 | 1987 | 19 | |
| 283 | 06.09 | Apts | Vent hood | Pool(W) | 53 | 70 | 1987 | 19 | |
| | | | | | | | | | |
| | 07.02 | | **Furnishings** | | | | | | |
| 284 | 07.02 | Nursing | Dining room table & chairs | L-Cycle | 8 | 2,400 | 1975 | | Roediger dining room |
| 285 | 07.02 | Nursing | Dining room table & chairs | L-Cycle | 4 | 2,400 | 1975 | | Roediger (lower level) |
| 286 | 07.02 | Nursing | Table & 4 dining chairs | L-Cycle | 11 | 277 | 1985 | | Chapel, corridor, and foyer |
| 287 | 07.02 | Nursing | Table & 12 chairs (boardroom) | L-Cycle | 1 | 12,000 | 1985 | | Board room |
| 288 | 07.02 | Nursing | Bed, bed side table, chair & small chest | L-Cycle | 6 | 960 | 2002 | | Bartel Wing |
| 289 | 07.02 | Shelter | Dining room table & chairs | L-Cycle | 11 | 2,400 | 2000 | | Shelter kitchen, dining room & connecting corridor |
| | | | | | | | | | |
| | 07.03 | | **Interior Signage, Art & Accessories** | | | | | | |
| 290 | 07.03 | Apts | Replace interior signage | L-Cycle | 1 | 10,000 | 2015 | | Routine replacement |
| | | | | | | | | | |
| | 07.04 | | **Window Coverings** | | | | | | |
| 291 | 07.04 | Nursing | Draperies & bedspreads | L-Cycle | 1 | 4,580 | 1978 | | From asset list - Roediger |
| 292 | 07.04 | Nursing | Draperies & bedspreads | L-Cycle | 1 | 7,545.77 | 1971 | | From asset list |
| 293 | 07.04 | Nursing | Draperies & bedspreads | L-Cycle | 1 | 4,580 | 1978 | | Bartel |
| 294 | 07.04 | Shelter | Draperies & bedspreads | L-Cycle | 2 | 4,580 | 1978 | | Ludwig & Kohl Wings |
| | | | | | | | | | |
| | 07.06 | | **Entertainment, Communication & Security Systems** | | | | | | |
| 295 | 07.06 | Shelter | Exit seeker system | L-Cycle | 1 | 50,000 | 2010 | | $50,000 total 20% Shelter 80% Nursing |
| 296 | 07.06 | Nursing | Exit seeker system | L-Cycle | 1 | 50,000 | 2010 | | $50,000 total 20% Shelter 80% Nursing |
| 297 | 07.06 | Apts | Baby grand piano | L-Cycle | 1 | 25,000 | 1987 | | Routine replacement |
| 298 | 07.06 | Apts | Upright piano | L-Cycle | 1 | 10,000 | 1987 | | Routine replacement |
| 299 | 07.06 | Apts | Pool table and accessories | L-Cycle | 1 | 4,500 | 2009 | | Routine replacement |
| 300 | 07.06 | Shelter | Replace/upgrade telephone system | L-Cycle | 1 | 38,000 | 2010 | | $38,000 total 10% Shelter 10% Apts 80% Nursing |
| 301 | 07.06 | Apts | Replace/upgrade telephone system | L-Cycle | 1 | 38,000 | 2010 | | $38,000 total 10% Shelter 10% Apts 80% Nursing |
| 302 | 07.06 | Nursing | Replace/upgrade telephone system | L-Cycle | 1 | 38,000 | 2010 | | $38,000 total 10% Shelter 10% Apts 80% Nursing |
| 303 | 07.06 | Nursing | TV flat screen | L-Cycle | 1 | 1,729.98 | 1975 | | Roediger dining room |
| 304 | 07.06 | Nursing | TV flat screen | L-Cycle | 1 | 1,729.98 | 1975 | | Roediger (lower level) |
| 305 | 07.06 | Nursing | TV | L-Cycle | 1 | 1,725 | 1975 | | Roediger (lower level) |
| 306 | 07.06 | Nursing | Nurse call light | L-Cycle | 30 | 50 | 1965 | | Bartel Wing |
| 307 | 07.06 | Nursing | Nurse call light | L-Cycle | 30 | 50 | 1975 | | Roediger (both levels) |
| 308 | 07.06 | Nursing | Nurse call light | L-Cycle | 2 | 50 | 1985 | | Chapel, corridor, and foyer |
| 309 | 07.06 | Nursing | Nursing alarm system upgrade | L-Cycle | 1 | 1,333.47 | 2009 | | From asset list |
| 310 | 07.06 | Nursing | TV flat screen | L-Cycle | 1 | 1,729.98 | 1985 | | Chapel, corridor, and foyer |
| 311 | 07.06 | Nursing | Piano | L-Cycle | 1 | 5,000 | 1985 | | Chapel, corridor, and foyer |
| 312 | 07.06 | Nursing | Organ | L-Cycle | 1 | 1,425 | 1976 | | Chapel, corridor, and foyer |
| 313 | 07.06 | Nursing | Key pad door dock | L-Cycle | 1 | 650 | 1975 | | Roediger (lower level) |
| 314 | 07.06 | Nursing | Key pad door dock | L-Cycle | 1 | 650 | 1985 | | Chapel, corridor, and foyer |
| | 07.06 | Nursing | Key pad door dock | L-Cycle | 1 | 650 | 1965 | | Bartel Wing |
| | 7.06 | Nursing | Time clock | L-Cycle | 1 | 1,398 | 1999 | | Basement level |
| | 7.06 | Nursing | Public address system speaker | L-Cycle | 2 | 75 | 1985 | | Chapel, corridor and foyer |
| | 07.06 | Nursing | Public address system speaker | L-Cycle | 2 | 75 | 1965 | | Basement level |
| 319 | 07.06 | Nursing | Public address system speaker | L-Cycle | 2 | 75 | 1965 | | Bartel Wing |
| 320 | 07.06 | Nursing | Public address system speaker | L-Cycle | 6 | 75 | 1975 | | Roediger (both levels) |
| 321 | 07.06 | Shelter | TV | L-Cycle | 1 | 1,729.98 | 1955 | | Ludwig Wing |
| 322 | 07.06 | Shelter | Public address system speaker | L-Cycle | 7 | 75 | 1955 | | Ludwig & Kohl Wings |
| 323 | 07.06 | Shelter | Piano | L-Cycle | 1 | 5,000 | 1955 | | Ludwig Wing |
| 324 | 07.06 | Shelter | Nurse call light | L-Cycle | 15 | 50 | 1955 | | Ludwig Wing |
| 325 | 07.06 | Shelter | Nurse call light | L-Cycle | 20 | 50 | 1985 | | Kohl Wing |
| 326 | 07.06 | Shelter | Key pad door dock | L-Cycle | 1 | 650 | 1955 | | Ludwig Wing |
| 327 | 07.06 | Shelter | Key pad door dock | L-Cycle | 2 | 650 | 1985 | | Kohl Wing |
| | | | | | | | | | |
| | 07.07 | | **Office Systems** | | | | | | |
| 328 | 07.07 | Nursing | Network server | L-Cycle | 1 | 5,000 | 2009 | | Routine replacement |
| 329 | 07.07 | Nursing | Network equipment | L-Cycle | 1 | 10,000 | 2009 | | Routine replacement and upgrades |
| 330 | 07.07 | Nursing | Ethernet switch upgrade | L-Cycle | 1 | 12,000 | 2009 | | Routine replacement |
| 331 | 07.07 | Nursing | Continuous data protection system | L-Cycle | 1 | 5,000 | 2009 | | Back-up system |
| 332 | 07.07 | Nursing | Firewall | L-Cycle | 1 | 2,500 | 2009 | | Routine upgrade |
| 333 | 07.07 | Nursing | Workstation Upgrade | L-Cycle | 1 | 1,339 | 1998 | | From asset list |
| 334 | 07.07 | Nursing | Workstation (Admin Nurse) | L-Cycle | 1 | 404.5 | 2002 | | From asset list |
| 335 | 07.07 | Nursing | Workstation (Admin Clerk) | L-Cycle | 1 | 389.5 | 2002 | | From asset list |
| 336 | 07.07 | Nursing | Workstation (6) | L-Cycle | 6 | 389.5 | 2002 | | From asset list |
| 337 | 07.07 | Nursing | Windows 2000-server and user licenses | L-Cycle | 1 | 532.5 | 2002 | | From asset list |
| 338 | 07.07 | Nursing | Upgrade Workstations | L-Cycle | 1 | 3,727.08 | 1999 | | From asset list |
| 339 | 07.07 | Nursing | Upgrade Accountant and Clerk's Workstation | L-Cycle | 1 | 739 | 1998 | | From asset list |
| 340 | 07.07 | Nursing | Upgrade 10 Workstations | L-Cycle | 1 | 2,860.26 | 1999 | | From asset list |
| 341 | 07.07 | Nursing | Support to install servers and workstations | L-Cycle | 1 | 714.13 | 2002 | | From asset list |
| 342 | 07.07 | Nursing | Sharp AR-507 Copier | L-Cycle | 1 | 9,895 | 2002 | | From asset list |
| 343 | 07.07 | Nursing | Set-up Joni's Computer and Shirley's Printer | L-Cycle | 1 | 281.57 | 2002 | | From asset list |
| 344 | 07.07 | Nursing | Set up new computers | L-Cycle | 1 | 1,202.78 | 2007 | | From asset list |
| 345 | 07.07 | Nursing | Set up new computers | L-Cycle | 1 | 512 | 2007 | | From asset list |
| 346 | 07.07 | Nursing | Set up new computers | L-Cycle | 1 | 90 | 2007 | | From asset list |
| 347 | 07.07 | Nursing | Port switch/hub for new server system | L-Cycle | 1 | 119.5 | 2002 | | From asset list |
| 348 | 07.07 | Nursing | Orbits Software and Hardware | L-Cycle | 1 | 150 | 2008 | | From asset list |
| 349 | 07.07 | Nursing | Novell Upgrade | L-Cycle | 1 | 582.5 | 1998 | | From asset list |
| 350 | 07.07 | Nursing | Novell Software Upgrade | L-Cycle | 1 | 875 | 1996 | | From asset list |
| 351 | 07.07 | Nursing | New Workstation for Admin Clerk | L-Cycle | 1 | 591.7 | 1999 | | From asset list |
| 352 | 07.07 | Nursing | Network infrastructure planning | L-Cycle | 1 | 40.785 | 2002 | | From asset list |
| 353 | 07.07 | Nursing | Monitors and keyboards | L-Cycle | 1 | 2,723 | 2002 | | From asset list |
| 354 | 07.07 | Nursing | Medical Software Conversion | L-Cycle | 1 | 1,500 | 2004 | | From asset list |
| 355 | 07.07 | Nursing | Master Series, Conversion to Windows 2000, Replace bad cable | L-Cycle | 1 | 448.14 | 2002 | | From asset list |
| | 07.07 | Nursing | Marketing Director's Computer | L-Cycle | 1 | 508 | 2006 | | From asset list |
| | 7.07 | Nursing | Marketing Computer | L-Cycle | 1 | 877.5 | 2007 | | From asset list |
| | 07.07 | Nursing | Laser Printers HP1100Xi | L-Cycle | 1 | 267.5 | 2000 | | From asset list |
| | 07.07 | Nursing | Laser Printers HP 4000 | L-Cycle | 1 | 699.5 | 1999 | | From asset list |
| 360 | 07.07 | Nursing | Laser jet printer, firewall upgrade on server | L-Cycle | 1 | 603.215 | 1905 | | From asset list |

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| | Catg. | Budget | Description | Forecast Method | Quantity | Unit Cost | Install | Files/Photos | Comments |
|---|---|---|---|---|---|---|---|---|---|
| | 7.07 | Nursing | Install Tape drive, Backup exec, Novell and rewired station 34 | L-Cycle | 1 | 602.355 | 2002 | | From asset list |
| | 07.07 | Nursing | Install Local Server | L-Cycle | 1 | 833 | 2006 | | From asset list |
| 363 | 07.07 | Nursing | Install Local Server | L-Cycle | 1 | 833.5 | 2006 | | From asset list |
| 364 | 07.07 | Nursing | Install Local Server | L-Cycle | 1 | 833.5 | 2006 | | From asset list |
| 365 | 07.07 | Nursing | Illinois Case Mix Software | L-Cycle | 1 | 525 | 2005 | | From asset list |
| 366 | 07.07 | Nursing | Horizon Technical Assessment Worksheet | L-Cycle | 1 | 37.5 | 2002 | | From asset list |
| 367 | 07.07 | Nursing | Hardware Additions | L-Cycle | 1 | 1,281.5 | 1996 | | From asset list |
| 368 | 07.07 | Nursing | Hardware Additions | L-Cycle | 1 | 421.335 | 1995 | | From asset list |
| 369 | 07.07 | Nursing | Hardware Additions | L-Cycle | 1 | 5,898.7 | 1995 | | From asset list |
| 370 | 07.07 | Nursing | Hardware Additions | L-Cycle | 1 | 1,360.75 | 1995 | | From asset list |
| 371 | 07.07 | Nursing | Hardware Additions | L-Cycle | 1 | 1,656 | 1995 | | From asset list |
| 372 | 07.07 | Nursing | Fax Machine (Sharp)-Nursing | L-Cycle | 1 | 795 | 1999 | | From asset list |
| 373 | 07.07 | Nursing | Fax machine - clinical | L-Cycle | 1 | 299.99 | 2009 | | From asset list |
| 374 | 07.07 | Nursing | Document Layout-New NT servers | L-Cycle | 1 | 25 | 2002 | | From asset list |
| 375 | 07.07 | Nursing | Computer Workstation-Dty | L-Cycle | 1 | 559.5 | 2000 | | From asset list |
| 376 | 07.07 | Nursing | Computer Upgrade and Server | L-Cycle | 1 | 5,601.59 | 2005 | | From asset list |
| 377 | 07.07 | Nursing | Computer Upgrade and Server | L-Cycle | 1 | 1,327.2 | 2005 | | From asset list |
| 378 | 07.07 | Nursing | Computer Upgrade and Server | L-Cycle | 1 | 3,592.115 | 2005 | | From asset list |
| 379 | 07.07 | Nursing | Computer upgrade and AOD License | L-Cycle | 1 | 11,350.325 | 2005 | | From asset list |
| 380 | 07.07 | Nursing | Computer System | L-Cycle | 1 | 11,092.577 | 1992 | | From asset list |
| 381 | 07.07 | Nursing | Computer for Accountant | L-Cycle | 1 | 517 | 2004 | | From asset list |
| 382 | 07.07 | Nursing | Cables | L-Cycle | 1 | 54.84 | 2002 | | From asset list |
| 383 | 07.07 | Nursing | ADP Windows Upgrade | L-Cycle | 1 | 264.5 | 1998 | | From asset list |
| 384 | 07.07 | Nursing | Accounting Clerk Workstation | L-Cycle | 1 | 215.6 | 2003 | | From asset list |
| 385 | 07.07 | Nursing | 2 CPUs for Nursing and 1 monitor | L-Cycle | 2 | 859.117 | 2006 | | From asset list |
| 386 | 07.07 | Nursing | 1997 Additions | L-Cycle | 1 | 2,514.7 | 1997 | | From asset list |
| 387 | 07.07 | Nursing | 1993 Additions | L-Cycle | 1 | 16,424.5 | 1993 | | From asset list |
| 388 | 07.07 | Shelter | Workstation Upgrade | L-Cycle | 1 | 1,339 | 1998 | | From asset list |
| 389 | 07.07 | Shelter | Workstation (Admin Nurse) | L-Cycle | 1 | 404.5 | 2002 | | From asset list |
| 390 | 07.07 | Shelter | Workstation (Admin Clerk) | L-Cycle | 1 | 389.5 | 2002 | | From asset list |
| 391 | 07.07 | Shelter | Workstation (6) | L-Cycle | 6 | 389.5 | 2002 | | From asset list |
| 392 | 07.07 | Shelter | Windows 2000-server and user licenses | L-Cycle | 1 | 532.5 | 2002 | | From asset list |
| 393 | 07.07 | Shelter | Upgrade Workstations | L-Cycle | 1 | 3,727.08 | 1999 | | From asset list |
| 394 | 07.07 | Shelter | Upgrade Accountant and Clerk's Workstation | L-Cycle | 1 | 739 | 1998 | | From asset list |
| 395 | 07.07 | Shelter | Upgrade 10 Workstations | L-Cycle | 1 | 2,860.26 | 1999 | | From asset list |
| 396 | 07.07 | Shelter | Support to install servers and workstations | L-Cycle | 1 | 714.13 | 2002 | | From asset list |
| 397 | 07.07 | Shelter | Set-up Joni's Computer and Shirley's Printer | L-Cycle | 1 | 281.57 | 2002 | | From asset list |
| 398 | 07.07 | Shelter | Set up new computers | L-Cycle | 1 | 1,202.78 | 2007 | | From asset list |
| 399 | 07.07 | Shelter | Set up new computers | L-Cycle | 1 | 512 | 2007 | | From asset list |
| 400 | 07.07 | Shelter | Set up new computers | L-Cycle | 1 | 90 | 2007 | | From asset list |
| 401 | 07.07 | Shelter | Port switch/hub for new server system | L-Cycle | 1 | 119.5 | 2002 | | From asset list |
| 402 | 07.07 | Shelter | Orbits Software and Hardware | L-Cycle | 1 | 150 | 2008 | | From asset list |
| 403 | 07.07 | Shelter | Novell Upgrade | L-Cycle | 1 | 582.5 | 1998 | | From asset list |
| | 07.07 | Shelter | Novell Software Upgrade | L-Cycle | 1 | 875 | 1996 | | From asset list |
| | 07.07 | Shelter | New Workstation for Admin Clerk | L-Cycle | 1 | 591.7 | 1999 | | From asset list |
| | 07.07 | Shelter | Network infrastructure planning | L-Cycle | 1 | 40.785 | 2002 | | From asset list |
| 407 | 07.07 | Shelter | Monitors and keyboards | L-Cycle | 1 | 2,723 | 2002 | | From asset list |
| 408 | 07.07 | Shelter | Medical Software Conversion | L-Cycle | 1 | 1,500 | 2004 | | From asset list |
| 409 | 07.07 | Shelter | Master Series, Conversion to Windows 2000, Replace bad cable | L-Cycle | 1 | 448.14 | 2002 | | From asset list |
| 410 | 07.07 | Shelter | Marketing Director's Computer | L-Cycle | 1 | 508 | 2006 | | From asset list |
| 411 | 07.07 | Shelter | Marketing Computer | L-Cycle | 1 | 877.5 | 2007 | | From asset list |
| 412 | 07.07 | Shelter | Laser Printers HP1100Xi | L-Cycle | 1 | 267.5 | 2000 | | From asset list |
| 413 | 07.07 | Shelter | Laser Printers HP 4000 | L-Cycle | 1 | 699.5 | 1999 | | From asset list |
| 414 | 07.07 | Shelter | Laser jet printer, firewall upgrade on server | L-Cycle | 1 | 603.215 | 2008 | | From asset list |
| 415 | 07.07 | Shelter | Install tape drive, backup exec, Novell and rewired station 34 | L-Cycle | 1 | 602.355 | 2002 | | From asset list |
| 416 | 07.07 | Shelter | Install Local Server | L-Cycle | 1 | 833.5 | 2006 | | From asset list |
| 417 | 07.07 | Shelter | Illinois Case Mix Software | L-Cycle | 1 | 525 | 2005 | | From asset list |
| 418 | 07.07 | Shelter | Horizon Technical Assessment Worksheet | L-Cycle | 1 | 37.5 | 2002 | | From asset list |
| 419 | 07.07 | Shelter | Hardware Additions | L-Cycle | 1 | 1,281.5 | 1996 | | From asset list |
| 420 | 07.07 | Shelter | Hardware Additions | L-Cycle | 1 | 421.335 | 1995 | | From asset list |
| 421 | 07.07 | Shelter | Hardware Additions | L-Cycle | 1 | 5,898.7 | 1995 | | From asset list |
| 422 | 07.07 | Shelter | Hardware Additions | L-Cycle | 1 | 1,360.75 | 1995 | | From asset list |
| 423 | 07.07 | Shelter | Hardware Additions | L-Cycle | 1 | 1,656 | 1995 | | From asset list |
| 424 | 07.07 | Shelter | Document Layout-New NT servers | L-Cycle | 1 | 25 | 2002 | | From asset fist |
| 425 | 07.07 | Shelter | Computer Workstation-Dty | L-Cycle | 1 | 559.5 | 2000 | | From asset list |
| 426 | 07.07 | Shelter | Computer Upgrade and Server | L-Cycle | 1 | 5,601.59 | 2005 | | From asset list |
| 427 | 07.07 | Shelter | Computer Upgrade and Server | L-Cycle | 1 | 1,327.2 | 2005 | | From asset list |
| 428 | 07.07 | Shelter | Computer Upgrade and Server | L-Cycle | 1 | 3,592.115 | 2005 | | From asset list |
| 429 | 07.07 | Shelter | Computer upgrade and AOD License | L-Cycle | 1 | 11,350.325 | 2005 | | From asset list |
| 430 | 07.07 | Shelter | Computer System | L-Cycle | 1 | 11,092.577 | 1992 | | From asset list |
| 431 | 07.07 | Shelter | Computer for Accountant | L-Cycle | 1 | 517 | 2004 | | From asset list |
| 432 | 07.07 | Shelter | Cables | L-Cycle | 1 | 54.84 | 2002 | | From asset list |
| 433 | 07.07 | Shelter | ADP Windows Upgrade | L-Cycle | 1 | 264.5 | 1998 | | From asset list |
| 434 | 07.07 | Shelter | Accounting Clerk Workstation | L-Cycle | 1 | 215.6 | 2003 | | From asset list |
| 435 | 07.07 | Shelter | 2 CPUs for Nursing and 1 monitor | L-Cycle | 2 | 859.117 | 2008 | | From asset list |
| 436 | 07.07 | Shelter | 1997 Additions | L-Cycle | 1 | 2,514.7 | 1997 | | From asset list |
| 437 | 07.07 | Shelter | 1993 Additions | L-Cycle | 1 | 16,424.5 | 1993 | | From asset list |
| | 07.08 | | **Vehicles** | | | | | | |
| 438 | 07.08 | Sitework | Lawn tractor John Deer #318 | L-Cycle | 1 | 15,000 | 1987 | | Tractor complete with mowing attachments and snowplow - -all of which are not in use |
| | 07.10 | | **Kitchen Equipment** | | | | | | |
| 439 | 07.10 | Apts | DISHMACHINE | L-Cycle | 1 | 10,000 | 1991 | 16 | |
| 440 | 07.10 | Apts | Under sink grease trap | L-Cycle | 1 | 1,800 | 1991 | 14 | |
| | 07.10 | Apts | CONVECTION OVEN, SINGLE | L-Cycle | 1 | 4,140 | 1991 | 15 | |
| | 07.10 | Apts | ICE MACHINE | L-Cycle | 1 | 2,298.99 | 1991 | 17 | |
| | 07.10 | Nursing | Grease Trap | L-Cycle | 1 | 3,390 | 2006 | | From asset list Nursing Kitchen |
| | 07.10 | Nursing | Ice Cube Machine (Bartel) | L-Cycle | 1 | 1,860 | 1998 | | From asset list |
| 445 | 07.10 | Nursing | Scottsman condenser for ice machine | L-Cycle | 1 | 850 | 2009 | | Bartel Wing |
| 446 | 07.10 | Nursing | Ice machine condensing unit | L-Cycle | 1 | 800 | 2009 | | Bartel Wing |

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| | Catg. | Budget | Description | Forecast Method | Quantity | Unit Cost | Install | Files/Photos | Comments |
|---|---|---|---|---|---|---|---|---|---|
| | 07.10 | Nursing | Ice machine | L-Cycle | 1 | 2,500 | 2009 | | Bartel Scottsman 250 lb |
| | 07.10 | Nursing | Steam tables | L-Cycle | 4 | 1,740 | 1965 | | 3 wells |
| | 07.10 | Shelter | Vertical mixer 7 qt | L-Cycle | 1 | 3,122.69 | 2012 | | Existing unit needs replacement |
| 450 | 07.10 | Shelter | Stero dishwasher | L-Cycle | 1 | 22,000 | 2012 | 110 | Existing unit needs replacement |
| 451 | 07.10 | Shelter | Kitchen Range Hood ex. Fan | L-Cycle | 1 | 1,220.65 | 2000 | | From asset list |
| 452 | 07.10 | Shelter | GREASE HOOD - DOUBLE | L-Cycle | 1 | 34,500 | 2011 | | Existing hood is rusting - health hazard |
| 453 | 07.10 | Shelter | Electric can opener | L-Cycle | 1 | 708.03 | 2000 | | Not working, needs replacement |
| 454 | 07.10 | Shelter | Convection oven Hobart | L-Cycle | 1 | 4,140 | 2007 | 108 | |
| 455 | 07.10 | Shelter | Convection Oven | L-Cycle | 1 | 2,818.25 | 2007 | | From asset list |
| 456 | 07.10 | Shelter | Ansul fire protection system | L-Cycle | 1 | 1,200 | 1995 | 109 | |
| 457 | 07.10 | Shelter | 20 GAL TILT SKILLET | L-Cycle | 1 | 13,153 | 1988 | | New item requested by kitchen staff |
| 458 | 07.10 | Shelter | FOOD LAMPS | L-Cycle | 1 | 2,000 | 2010 | | New item requested by kitchen staff |
| 459 | 07.10 | Shelter | KITCHEN REFRIGERATOR 2 door/juice | L-Cycle | 1 | 3,500 | 2010 | | Existing unit needs to be replaced |
| | 07.11 | | **Laundry Equipment** | | | | | | |
| 460 | 07.11 | Nursing | Wascomat selecta 28 | L-Cycle | 2 | 4,200 | 1997 | 127 | |
| 461 | 07.11 | Nursing | Wascomat JR W75 | L-Cycle | 1 | 4,200 | 1994 | 127 | |
| 462 | 07.11 | Nursing | Wascomat FL 185 | L-Cycle | 1 | 4,200 | 1999 | 127 | |
| 463 | 07.11 | Nursing | Commercial Dryers unimal | L-Cycle | 1 | 2,872 | 1999 | 131 | |
| 464 | 07.11 | Nursing | Commercial Dryers unidryer | L-Cycle | 2 | 2,872 | 1992 | 131 | |
| 465 | 07.11 | Nursing | Commercial Dryers speed queen | L-Cycle | 1 | 2,872 | 2000 | 131 | |
| 466 | 07.11 | Nursing | Commercial Dryers huebsch | L-Cycle | 1 | 2,872 | 2003 | 131 | |
| | 07.12 | | **Health Care & Nursing Equipment** | | | | | | |
| 467 | 07.12 | Nursing | Track for privacy curtain | L-Cycle | 15 | 110 | 1975 | | Roediger Wing |
| 468 | 07.12 | Nursing | Privacy curtain | L-Cycle | 15 | 150 | 1975 | | Roediger Wing |
| 469 | 07.12 | Nursing | Patient lift | L-Cycle | 1 | 843.33 | 2005 | | Roediger Wing |
| 470 | 07.12 | Nursing | Track for privacy curtain | L-Cycle | 17 | 110 | 1975 | | Roediger (lower level) |
| 471 | 07.12 | Nursing | Privacy curtain | L-Cycle | 17 | 150 | 1975 | | Roediger (lower level) |
| 472 | 07.12 | Nursing | Patient scale (wheelchair) | L-Cycle | 1 | 2,131 | 2001 | | Roediger (lower level) |
| 473 | 07.12 | Nursing | Wheelchairs w/removable parts | L-Cycle | 2 | 336.26 | 2009 | | From asset list |
| 474 | 07.12 | Nursing | Wheelchair Scale | L-Cycle | 1 | 2,130.52 | 2001 | | From asset list |
| 475 | 07.12 | Nursing | Walker, Wheelchair, Recliners | L-Cycle | 1 | 1,827.74 | 2001 | | From asset list |
| 476 | 07.12 | Nursing | Vital signs machines - clinical | L-Cycle | 1 | 3,066.2 | 2009 | | From asset list |
| 477 | 07.12 | Nursing | Recliners | L-Cycle | 2 | 780 | 2000 | | From asset list |
| 478 | 07.12 | Nursing | Oxygen Concentrator | L-Cycle | 2 | 1,047.59 | 2009 | | From asset list |
| 479 | 07.12 | Nursing | Oxygen Concentrator | L-Cycle | 1 | 1,586.91 | 2001 | | From asset list |
| 480 | 07.12 | Nursing | Oxygen Concentrator | L-Cycle | 1 | 1,529.42 | 2000 | | From asset list |
| 481 | 07.12 | Nursing | Oxygen Concentrator | L-Cycle | 1 | 764.71 | 1999 | | From asset list |
| 482 | 07.12 | Nursing | Oxygen Concentrator | L-Cycle | 1 | 846.15 | 1998 | | From asset list |
| 483 | 07.12 | Nursing | Nursing equipment | L-Cycle | 1 | 97,747 | 2008 | | From asset list |
| 484 | 07.12 | Nursing | Nursing Equip - Recliner w/ tray Blue | L-Cycle | 1 | 704.56 | 2007 | | From asset list |
| 485 | 07.12 | Nursing | Hydraulic lift and full body sling | L-Cycle | 1 | 899.42 | 2002 | | From asset list |
| | 07.12 | Nursing | Broda chairs - clinical | L-Cycle | 2 | 1,949.3 | 2009 | | From asset list |
| | 07.12 | Nursing | Track for privacy curtain | L-Cycle | 24 | 110 | 1965 | | Bartel Wing |
| | 07.12 | Nursing | Privacy curtain | L-Cycle | 24 | 150 | 1965 | | Bartel Wing |
| | 07.12 | Nursing | Patient scale (wheelchair) | L-Cycle | 2 | 2,200 | 1965 | | Bartel Wing |
| 490 | 07.12 | Nursing | Patient lift | L-Cycle | 1 | 899 | 1965 | | Bartel Wing |
| 491 | 07.12 | Nursing | Bather tub to replace cast iron bathtub | L-Cycle | 1 | 15,000 | 2015 | | Bartel Wing |
| 492 | 07.12 | Shelter | Privacy curtain | L-Cycle | 35 | 800 | 2011 | | Ludwig & Kohl Wings |
| | 07.13 | | **Beauty Shop, Store, Bank, Library & Other** | | | | | | |
| 493 | 07.13 | Shelter | Beauty shop equipment | L-Cycle | 1 | 2,500 | 2011 | | Kohl Wing |



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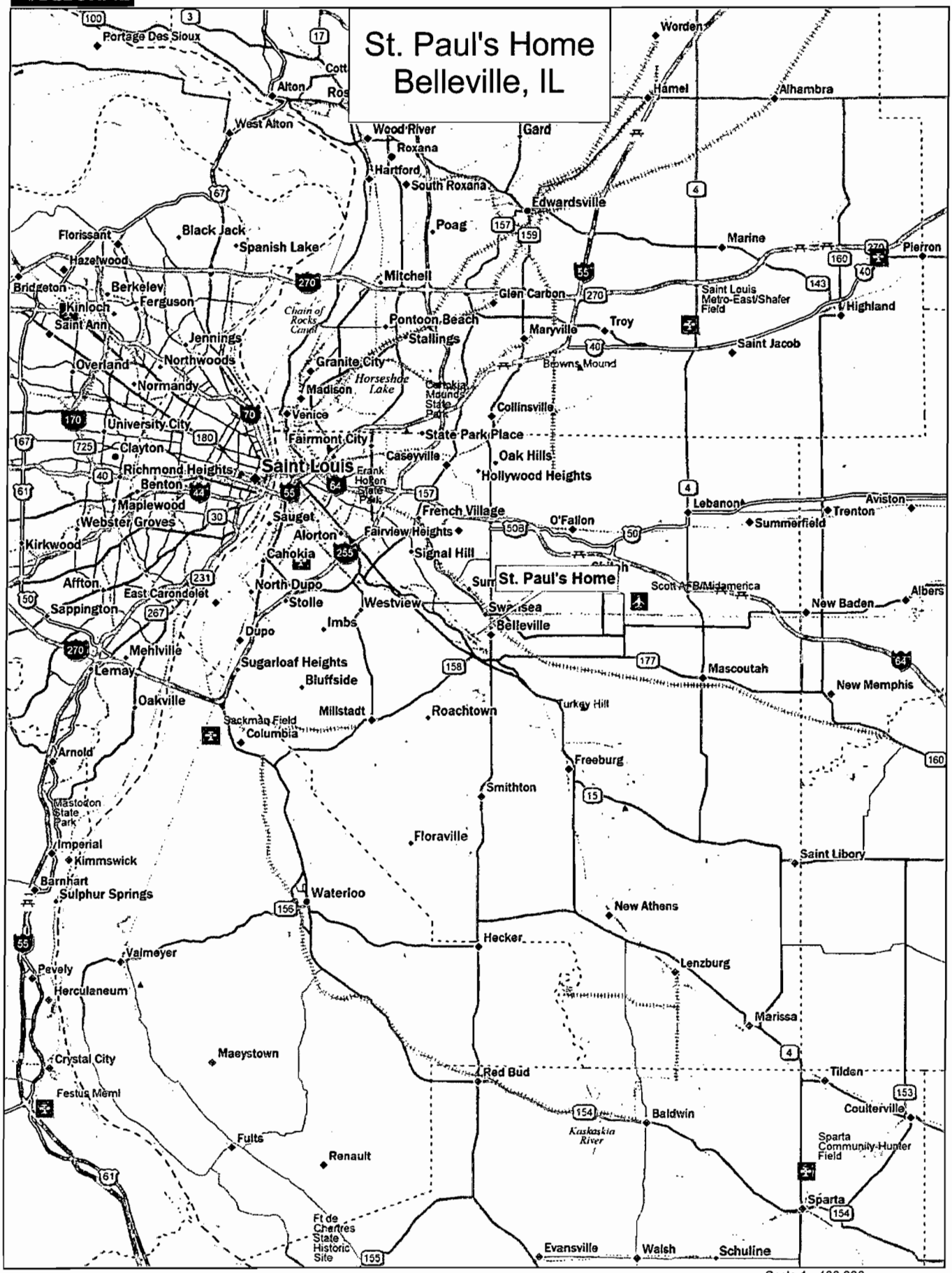


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TN
MN (1.0°W)

Scale 1 : 400,000

1" = 6.31 mi Data Zoom 9-0

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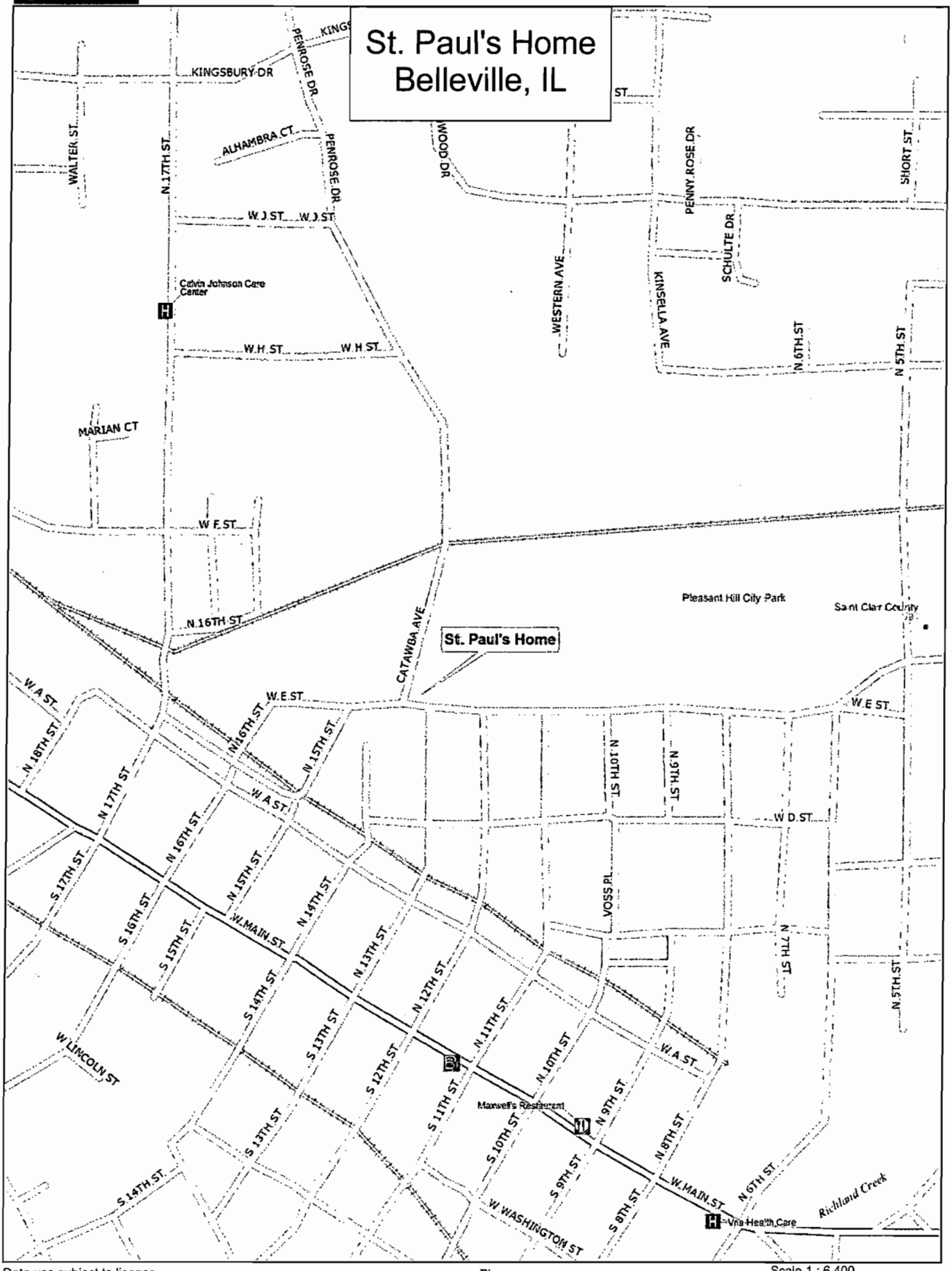
TN
MN (1.0°W)

Scale 1 : 50,000
1" = 4,166.7 ft
Data Zoom 12-0

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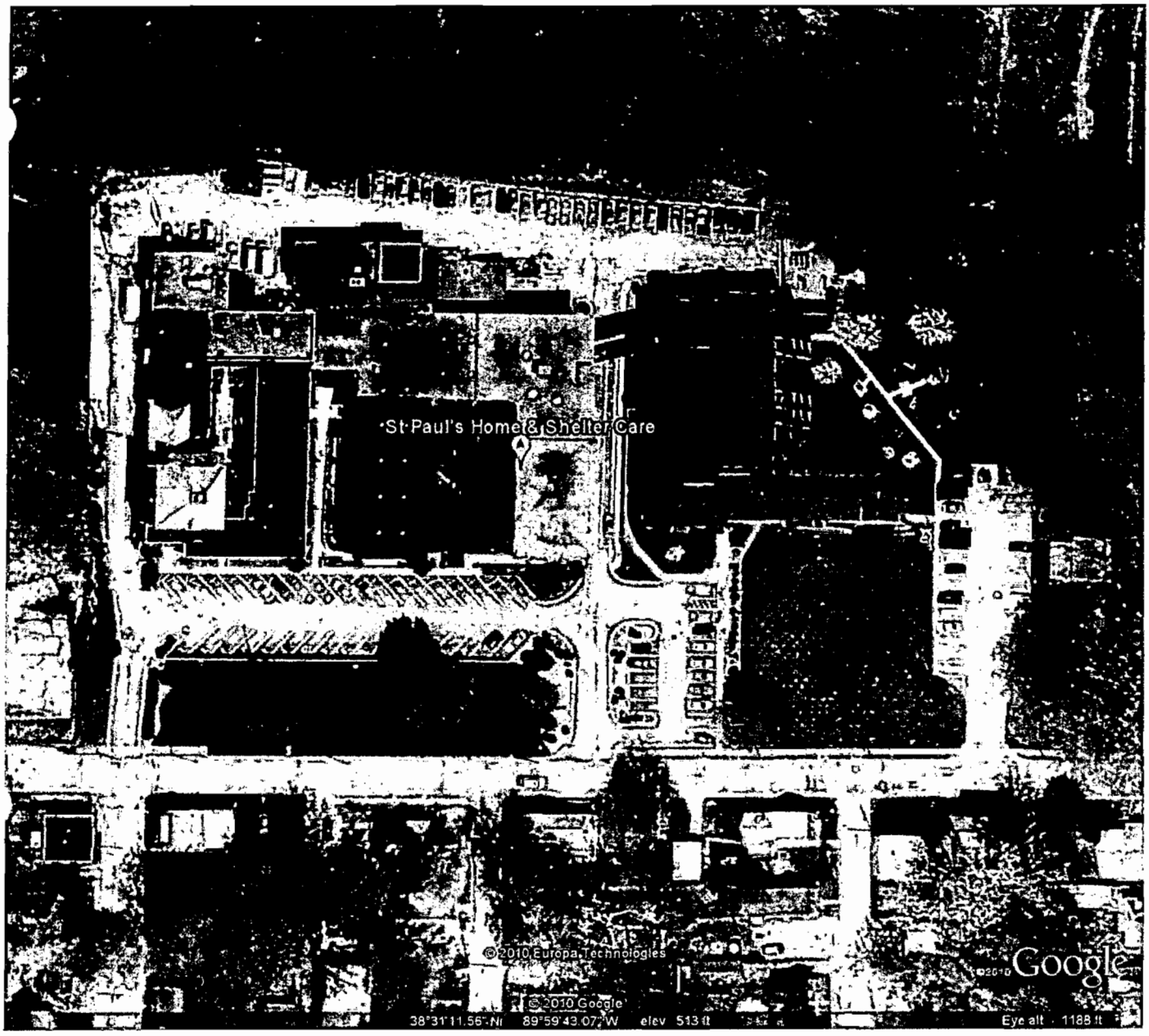
TN
MN (1.0°W)

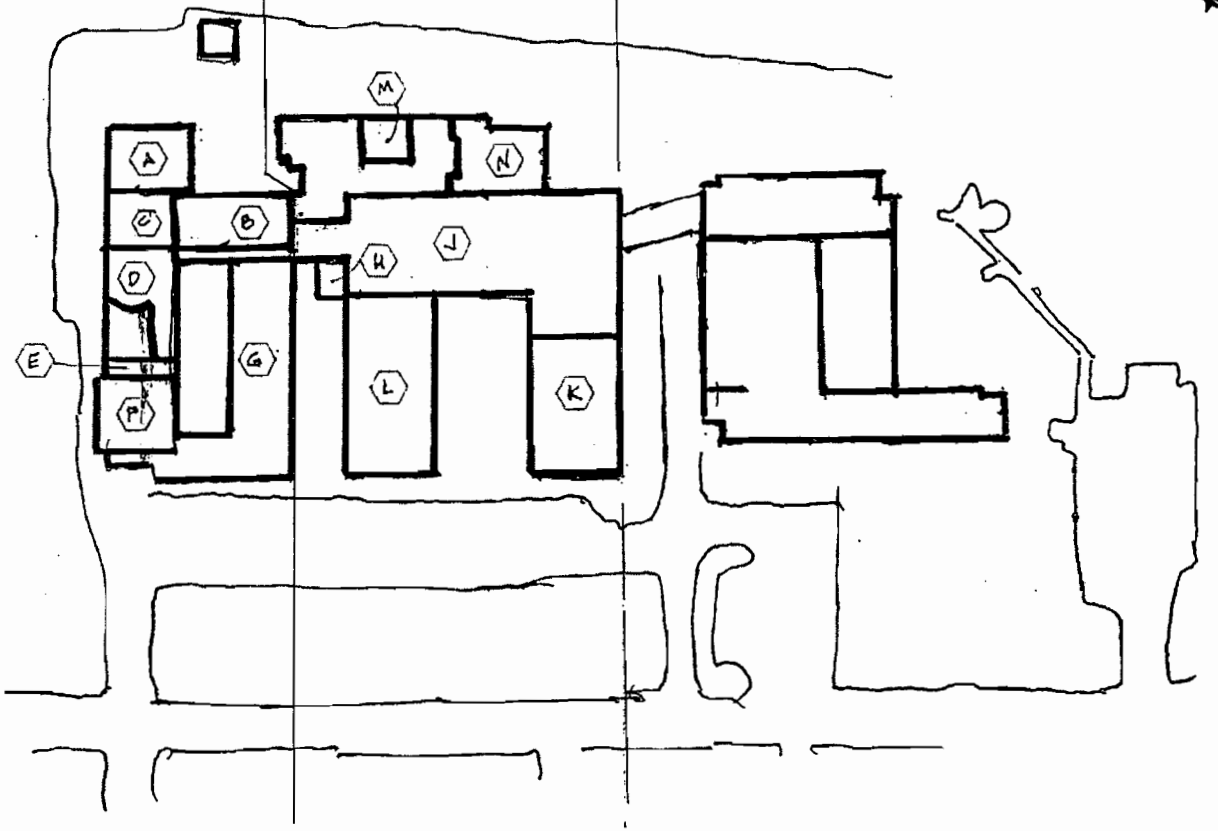
Scale 1 : 6,400
0 180 360 540 720 900 ft
0 40 80 120 160 200 m
1" = 533.3 ft Data Zoom 15-0


St Paul's Home & Shelter Care
©2010 Europa Technologies
©2010 Google
38°31'11.56" N 89°59'43.07" W elev 513 ft
Eye alt 1188 ft
Google

00239

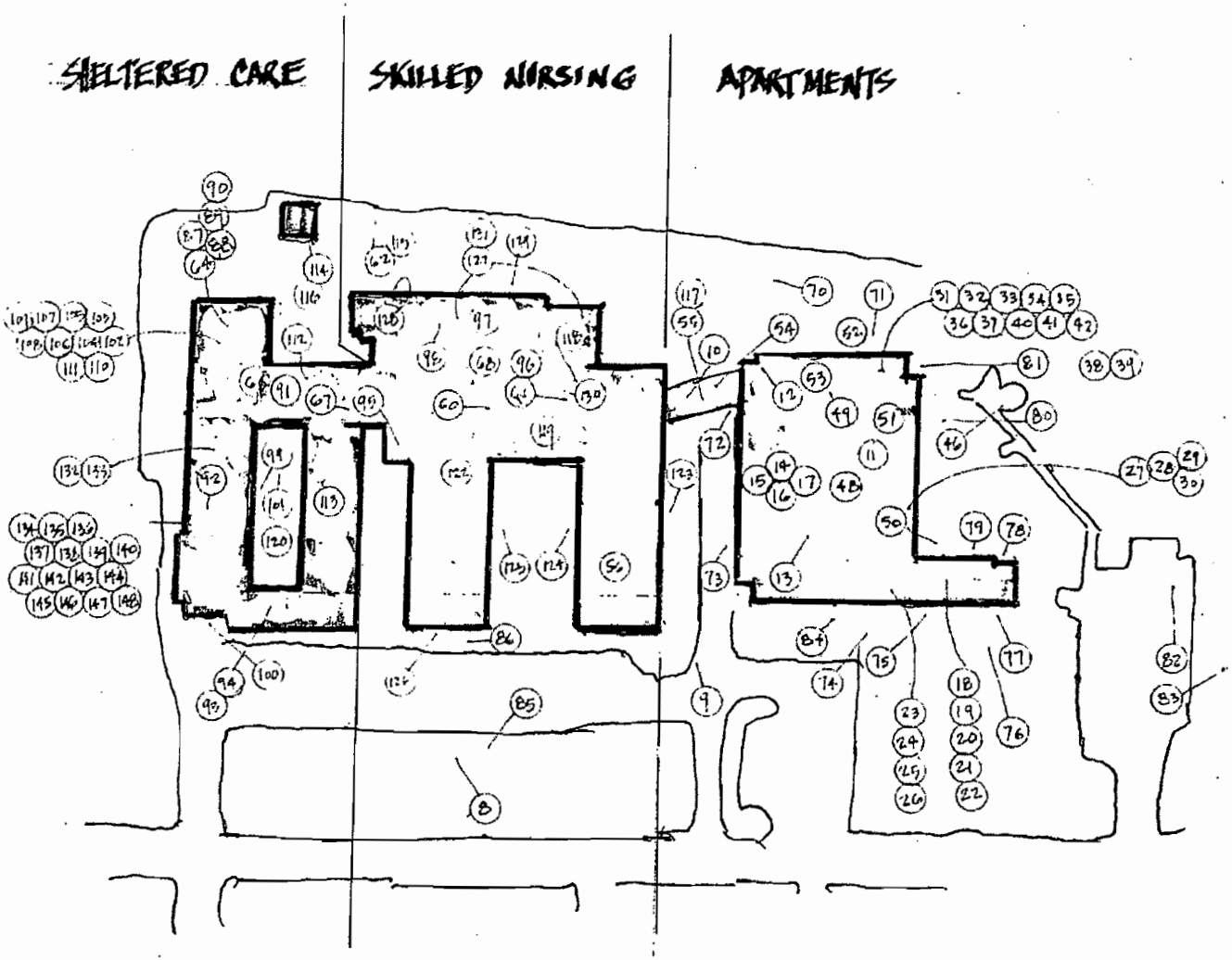
SHELTERED CARE | SKILLED NURSING | APARTMENTS

# ROOF AREAS

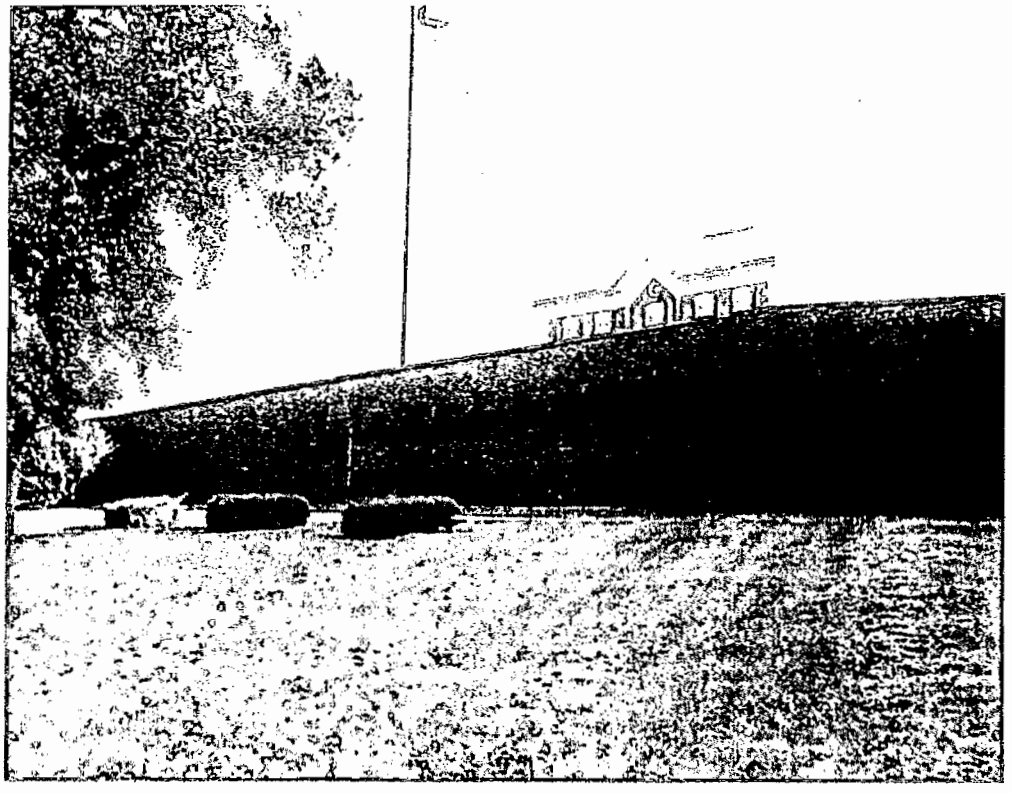



**St. Paul's Home**
Belleville, IL
zumBrunnen Project No. 2010-002

00240




**St. Paul's Home**
Belleville, IL
zumBrunnen Project No. 2010-002



8. Monument signage is featured on brick retaining wall at front of property

9. Signage for Nursing Facility is located at front of building



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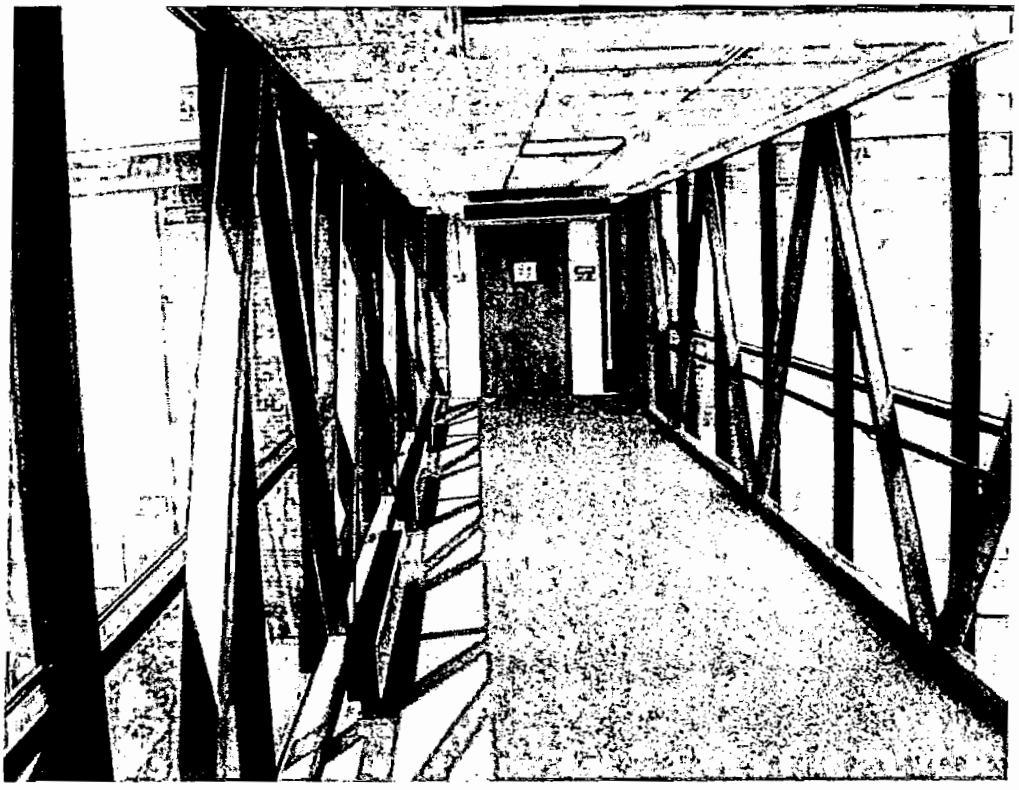
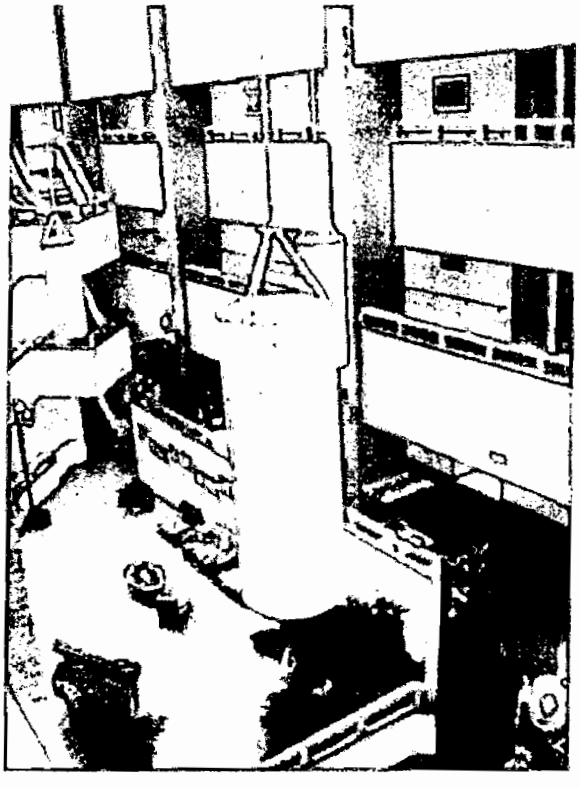


10. Two split DX systems and four heat strips provide heating and cooling for pedestrian bridge



11. Four cylindrical chandeliers are featured in the ILU Building atrium



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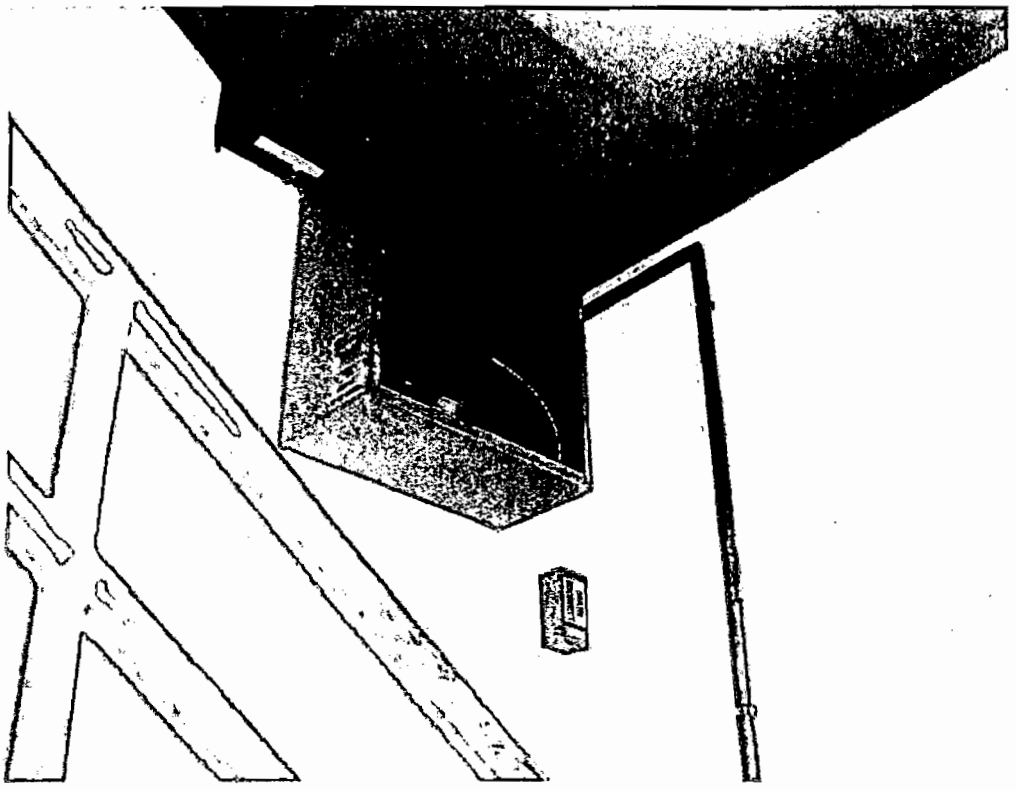
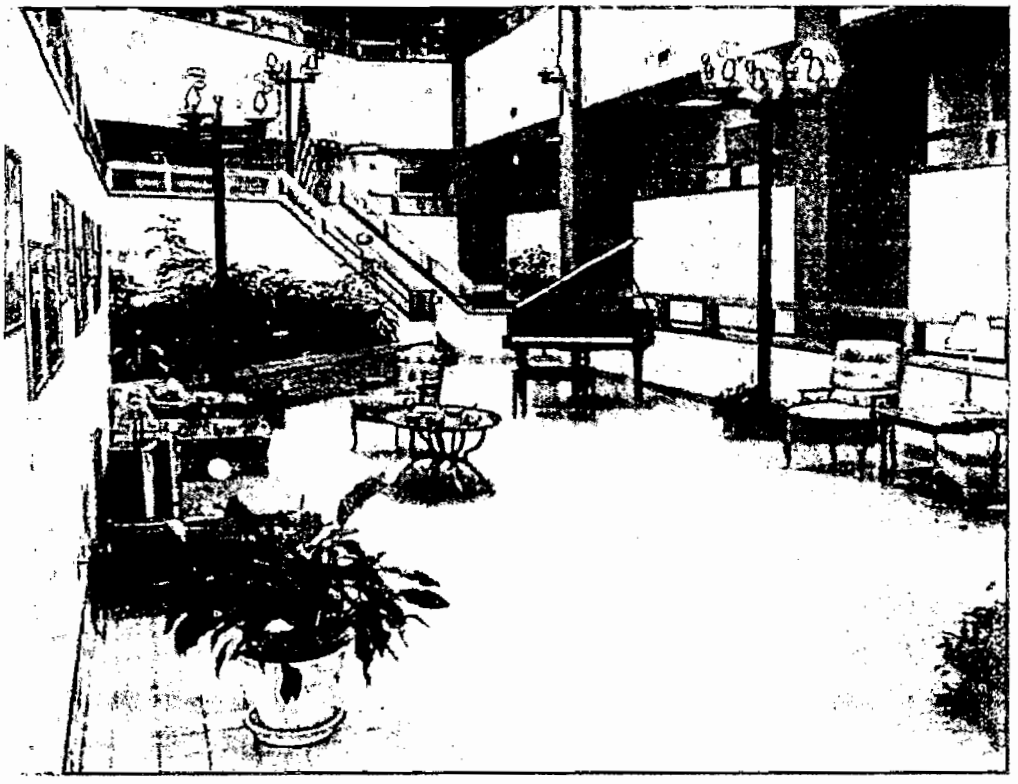


12. This is 1 of 3 exhaust fans in stairwells at ILU Building



00243

13. Clay tile is featured in congregate area between 1st and 2nd floor levels of ILU Building



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14. Above-floor grease trap and food grinder in kitchen at apartment building

15. Convection oven and dual oven/range are featured in kitchen of ILU Building

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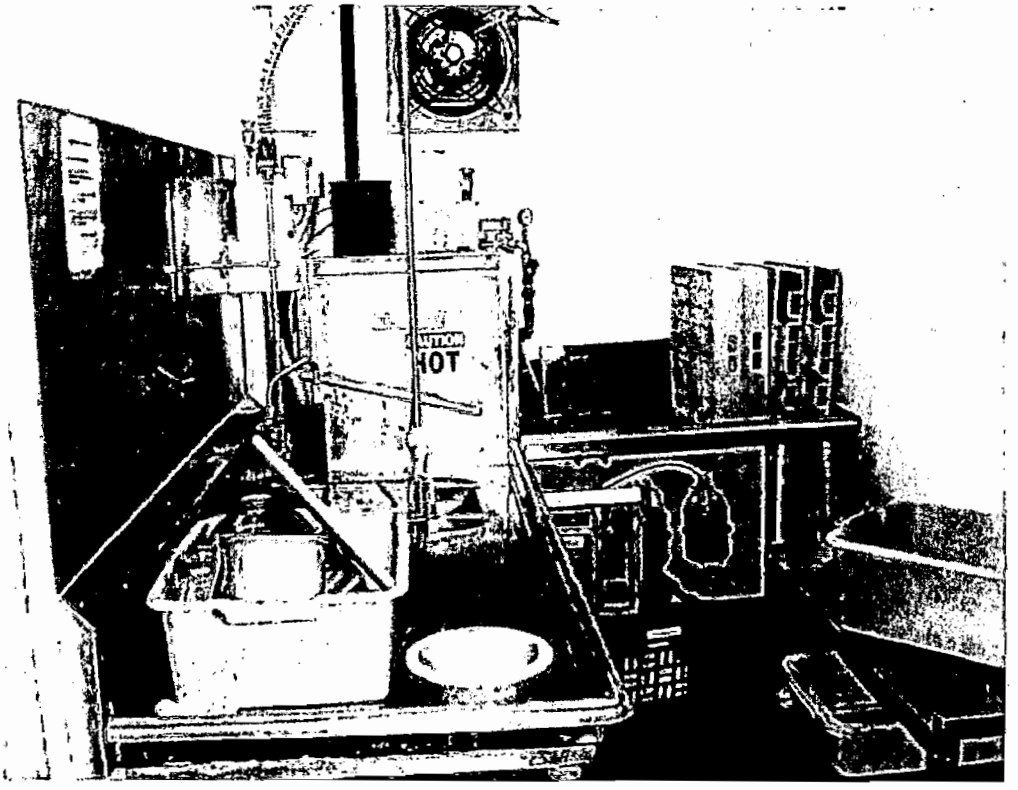
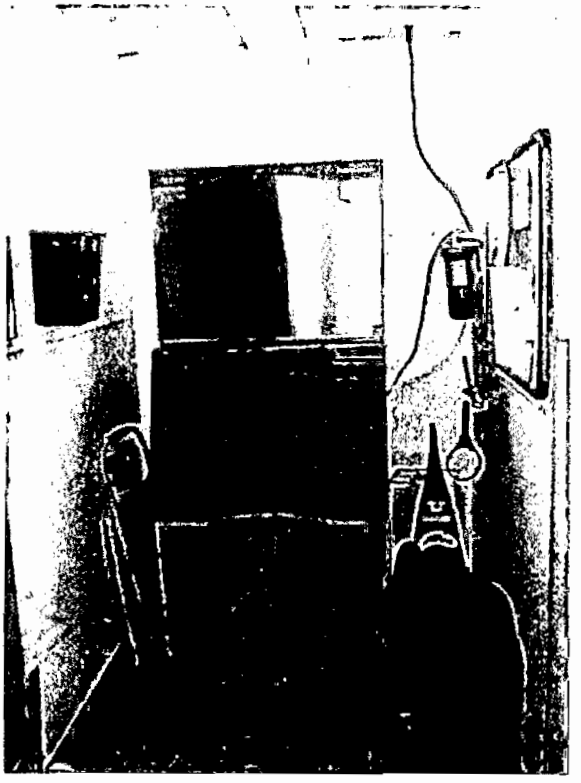



16. Steam and water vapor are exhausted from dishwasher room by a thru-wall fan (ILU Building)



17. Icemaker in kitchen of apartment building



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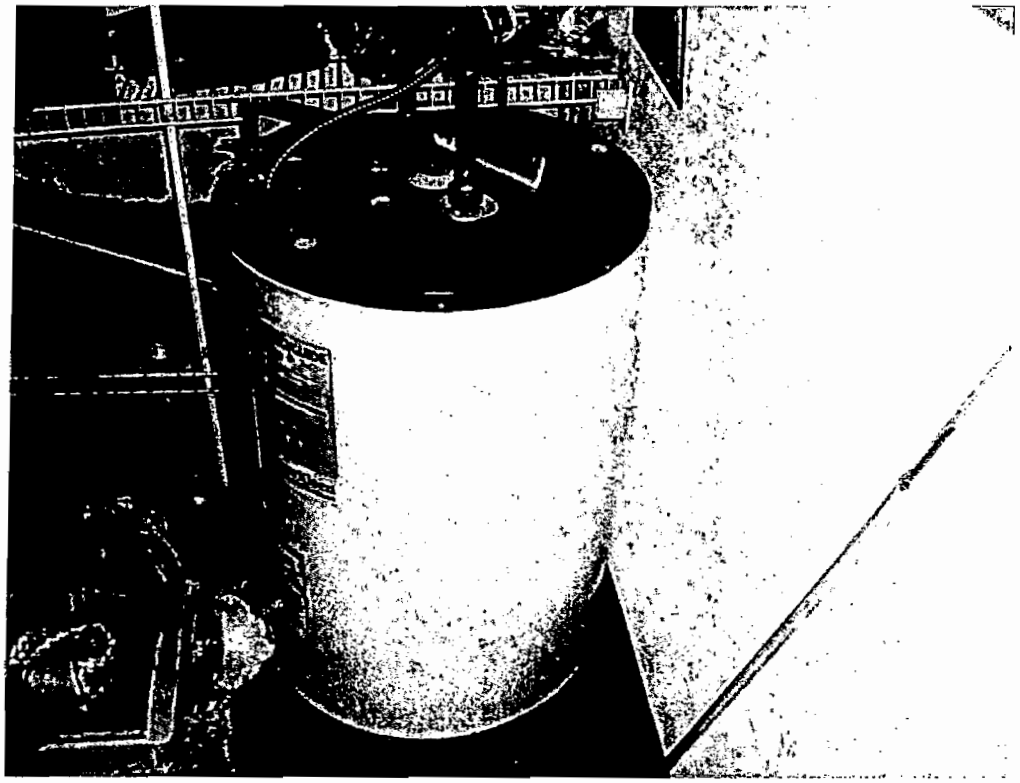
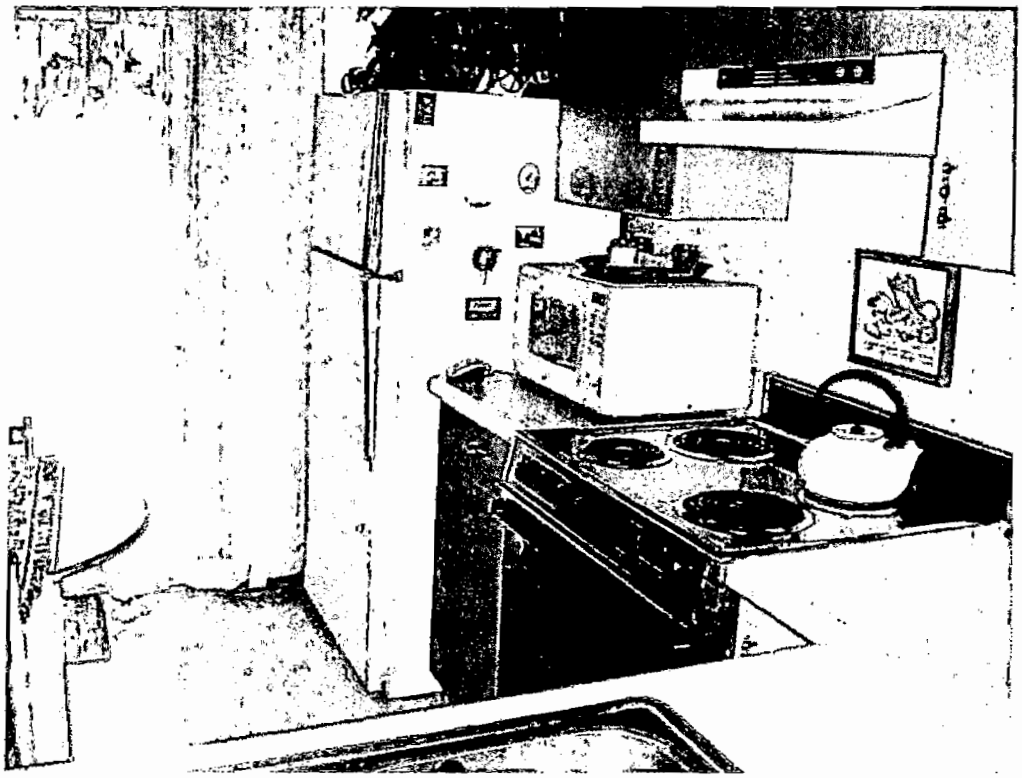


18. Electric low boy water heater in Apartment 117



00246

19. Electric range, refrigerator, and wood cabinets in Apartment 117



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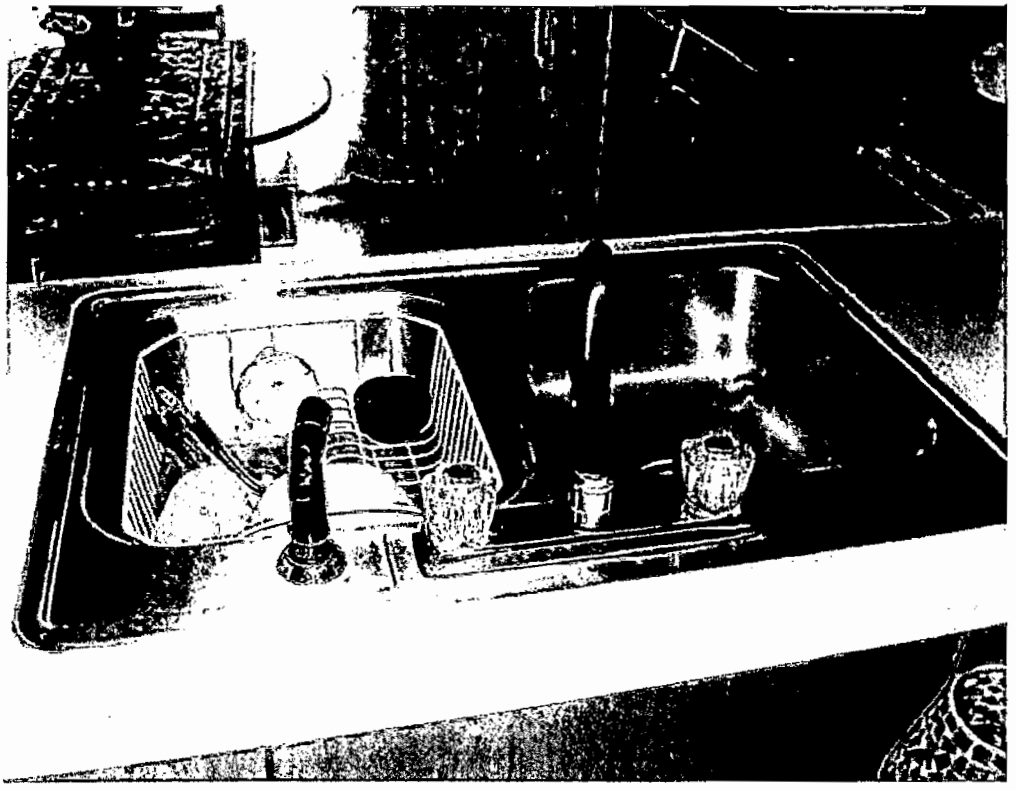

20. Double bowl stainless steel kitchen sink in Apartment 117

21. Fiberglass shower stall in Apartment 117



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22. Plastic laminate countertop in bathroom at Apartment 117

23. Fire pump on ground floor of apartment building



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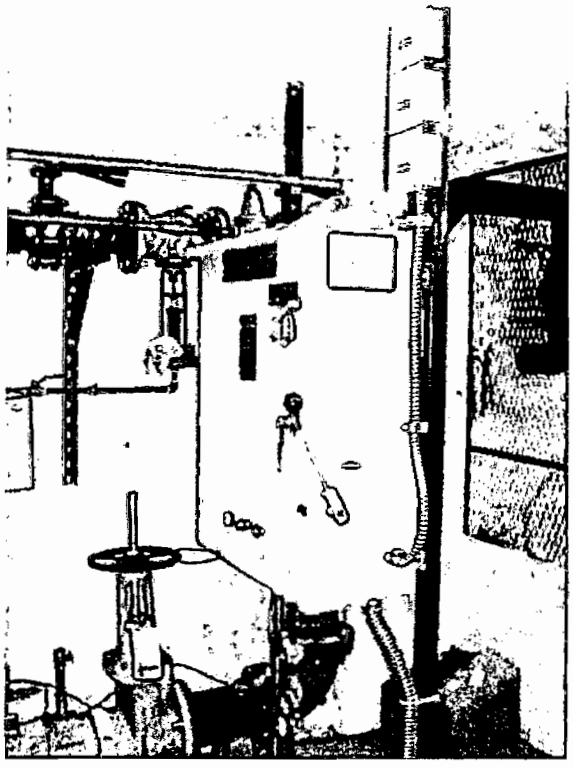
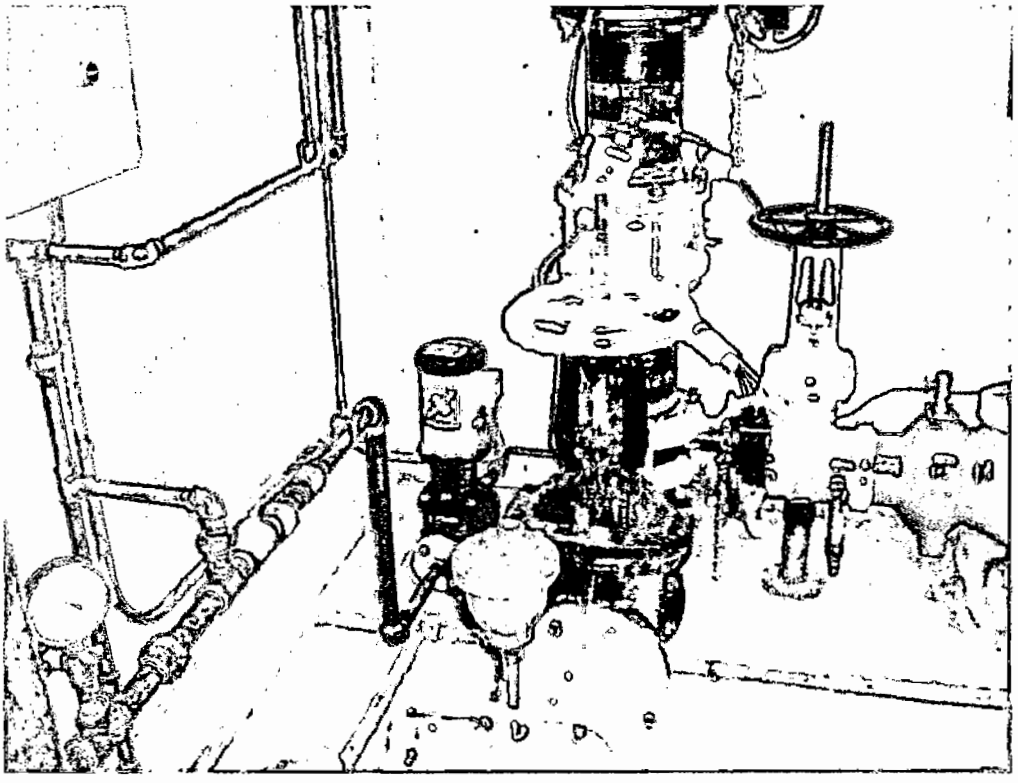


24. Fire pump controller (ILU Building)



25. Jockey pump in apartment building



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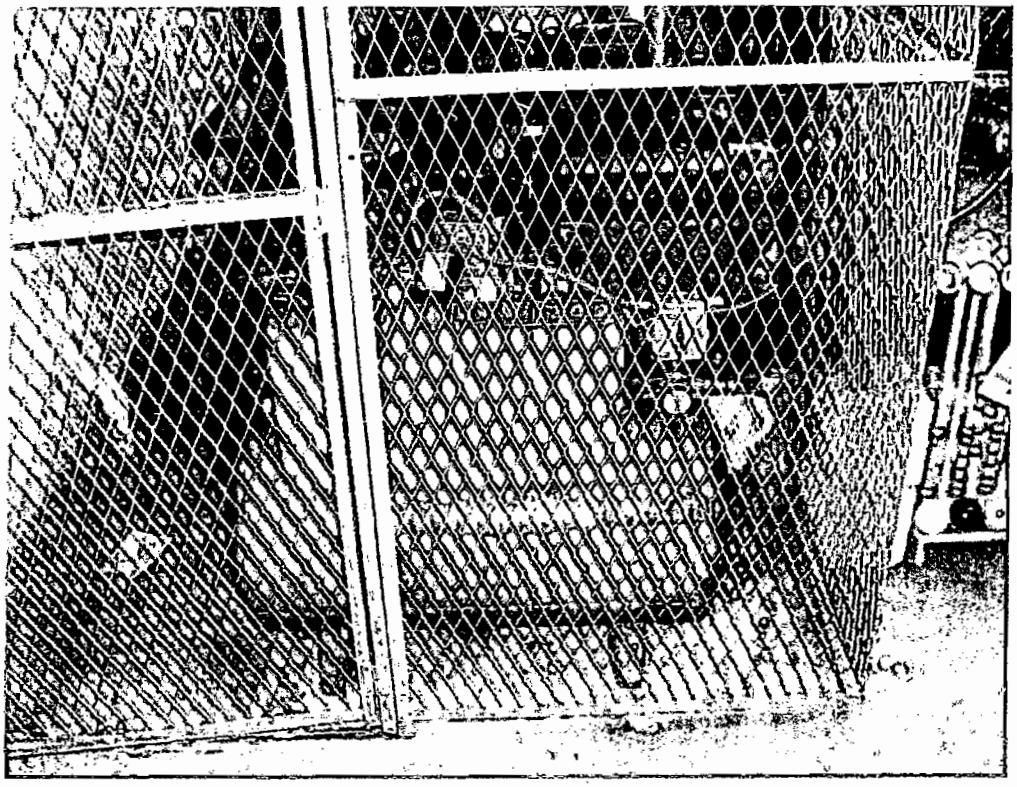
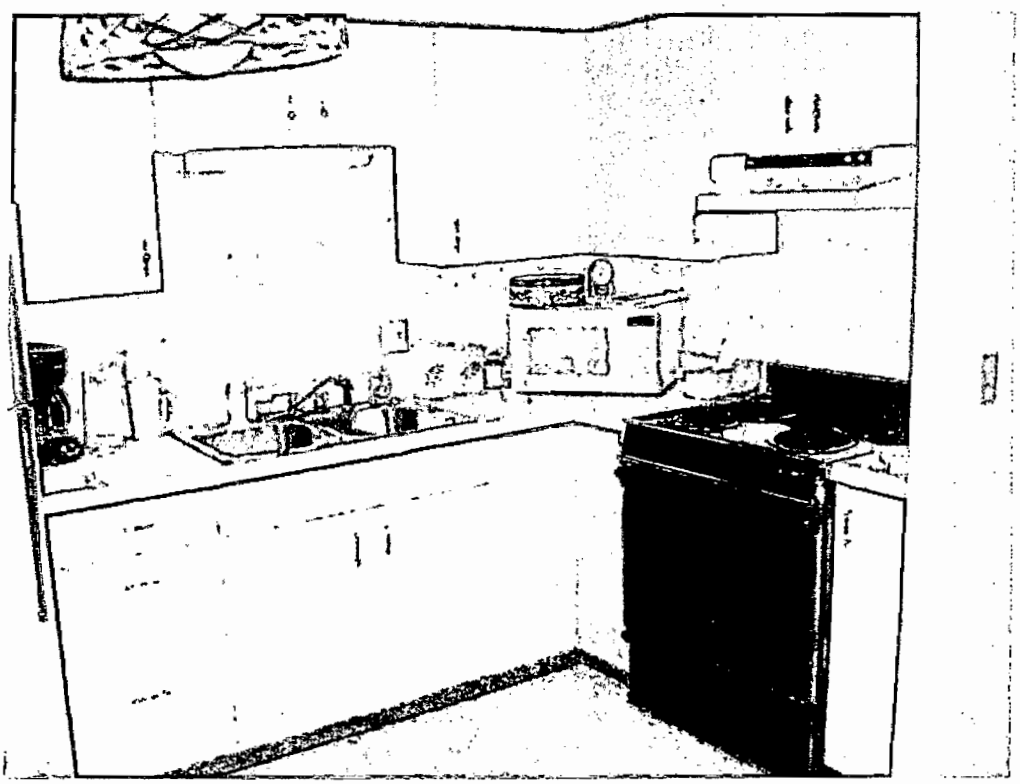


26. Dedicated air compressor is provided for the dry pipe fire sprinkler system in apartment building



27. Kitchen in 2-bedrom Apartment 101

00250



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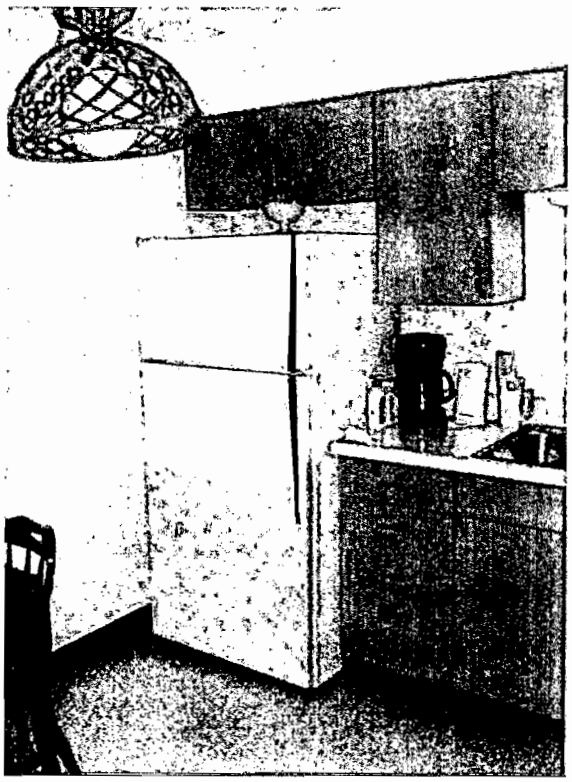
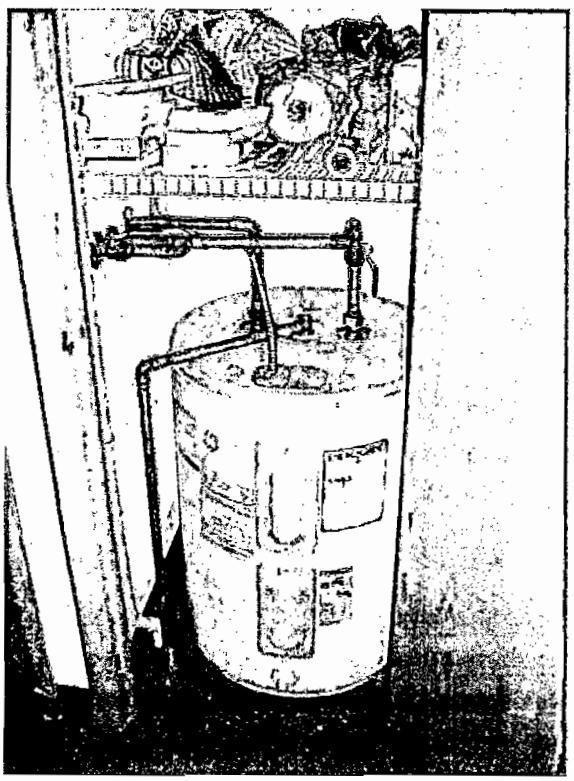


28. Kitchen in 2-bedroom Apartment 101



29. Low boy water heater in Apartment 101



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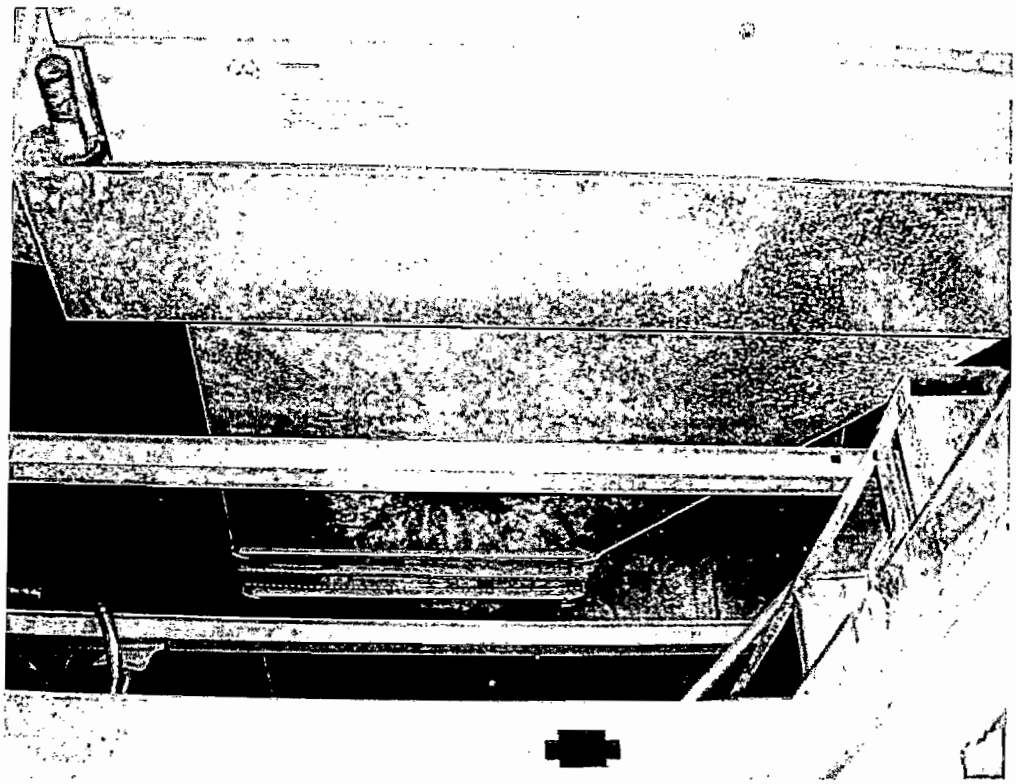
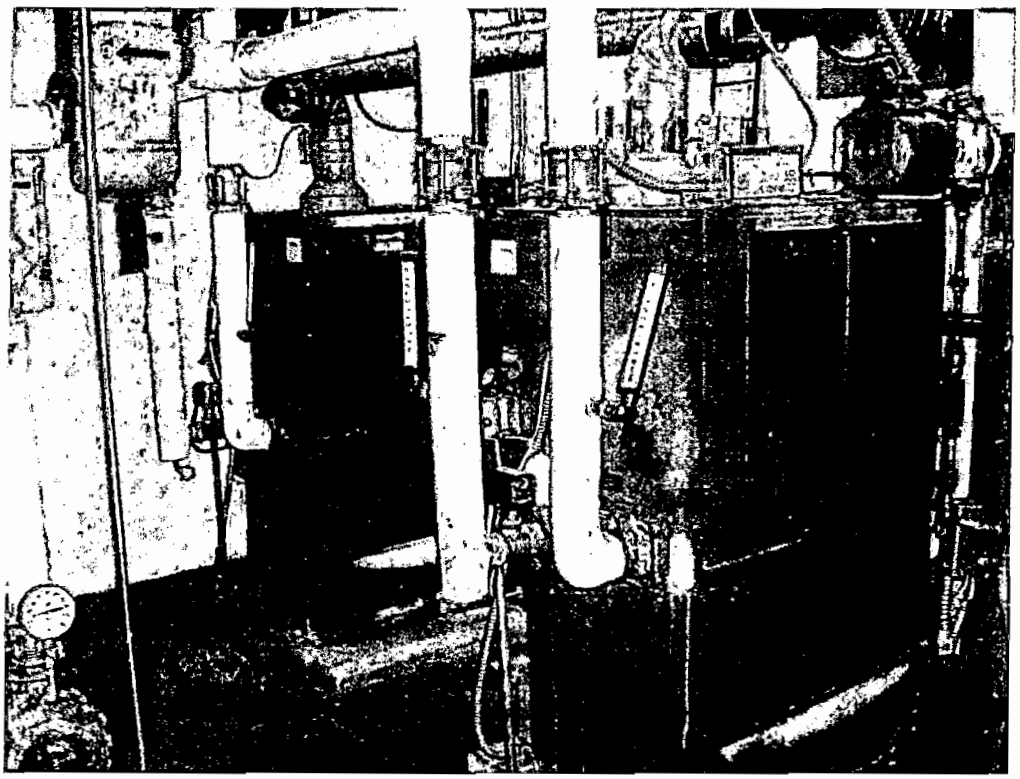


30. Fan coil unit in overhead space in Apartment 101



31. Two Lochinvar boilers generate hot water for heating the ILU Building

00252



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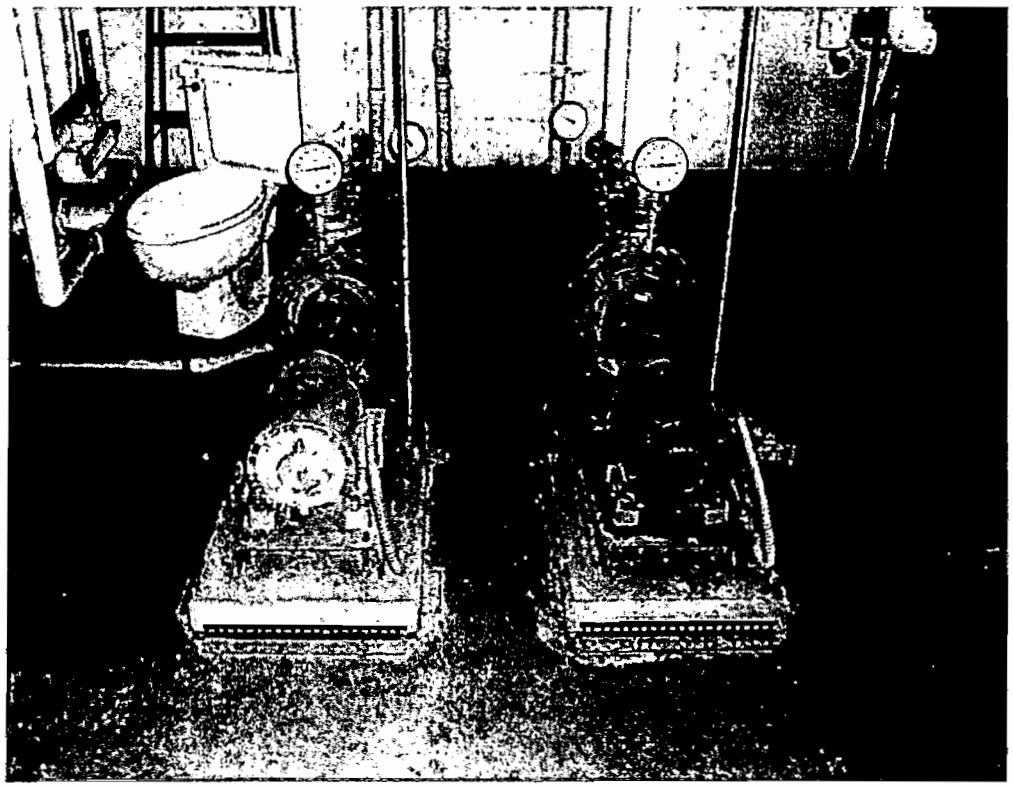
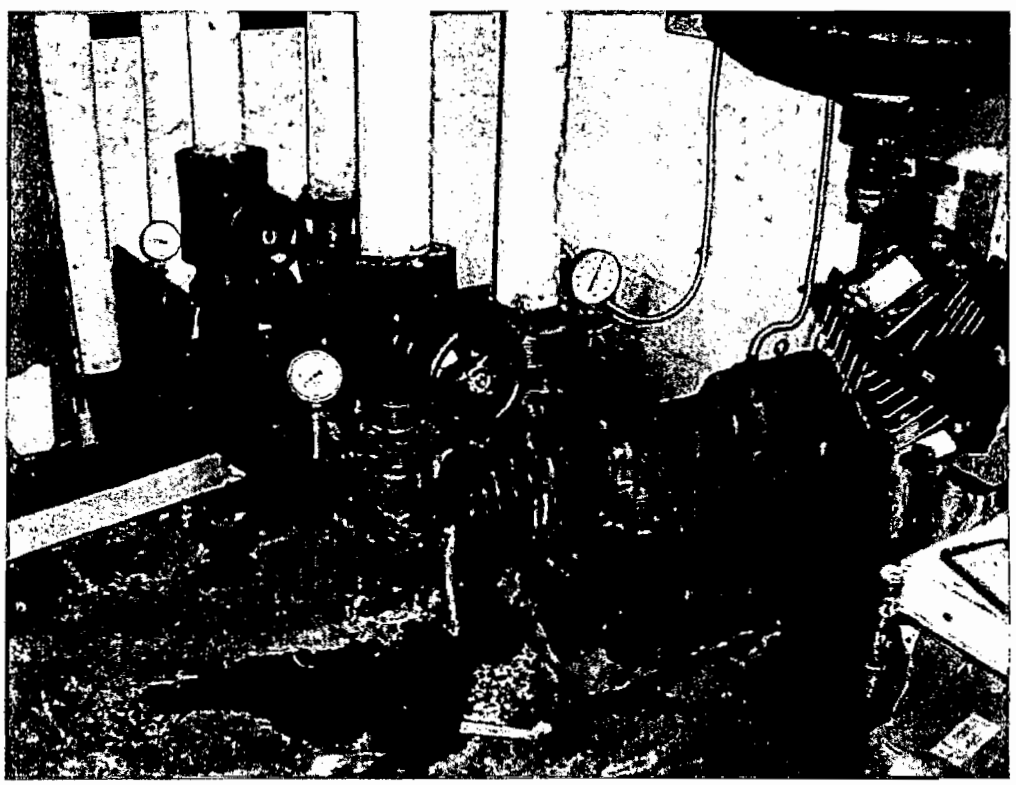


32. Two end-suction pumps circulate hot water for heating the ILU apartment building



33. Two end-suction pumps circulate cooling water in ILU apartments

00253



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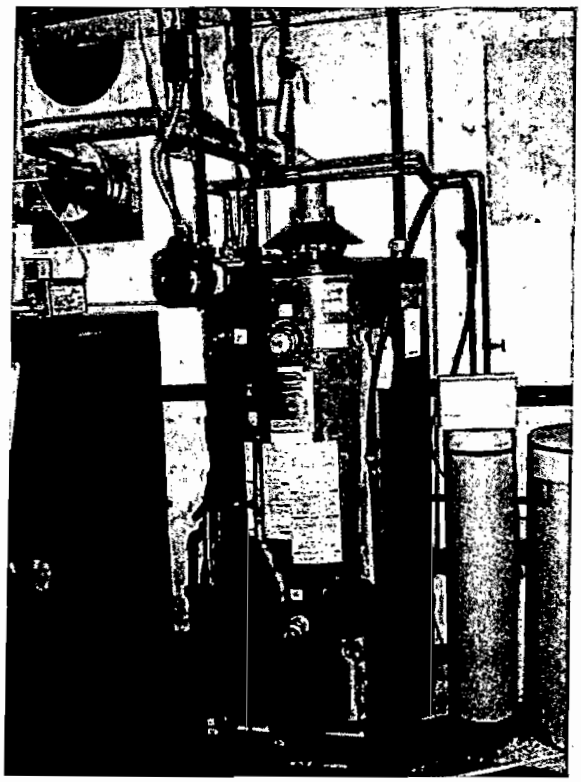
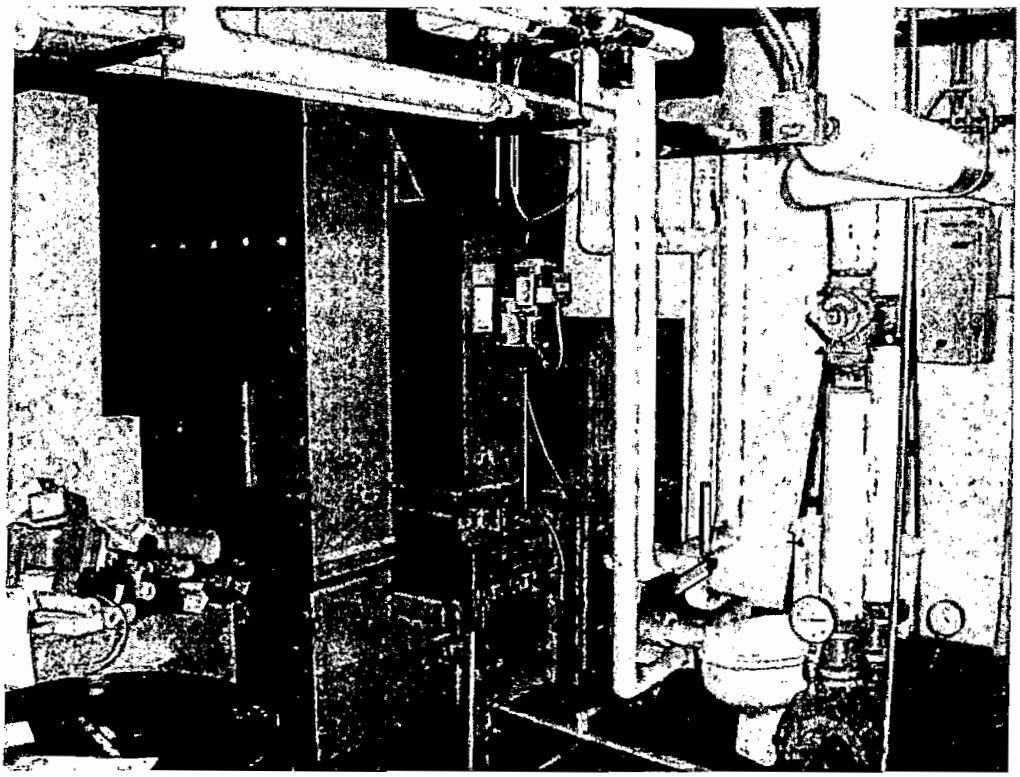


34. This water heater in mechanical room of apartment building was installed on 11/30/06



35. Air handling unit #2 in apartment building

00254



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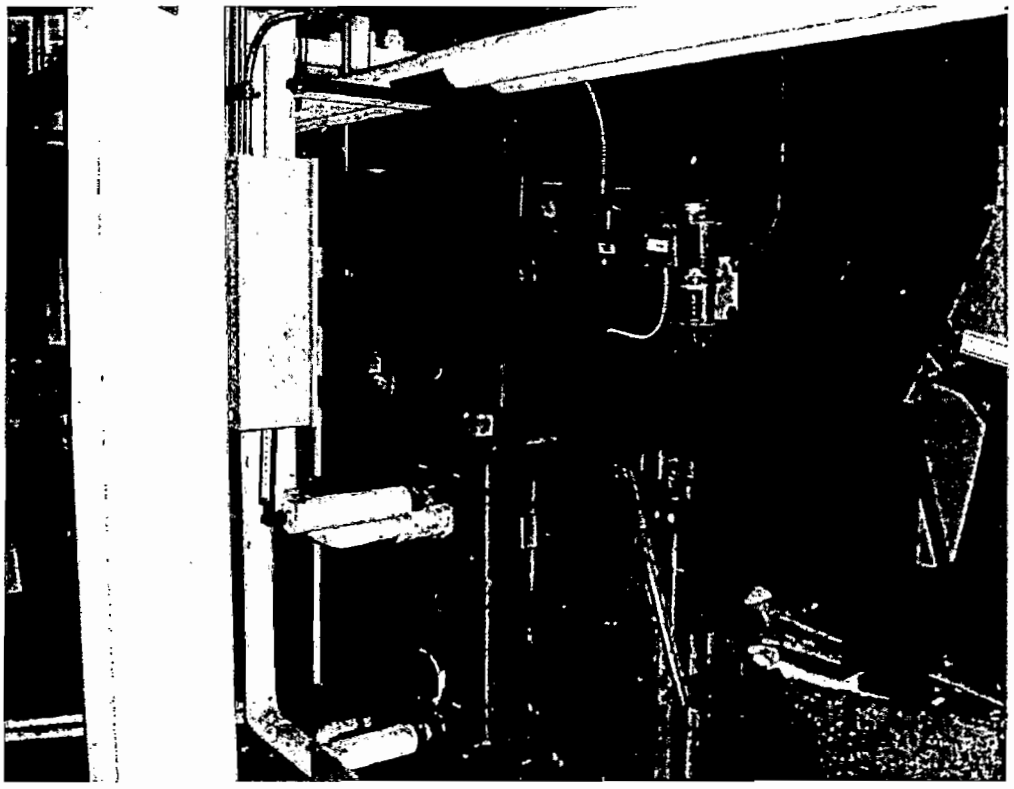
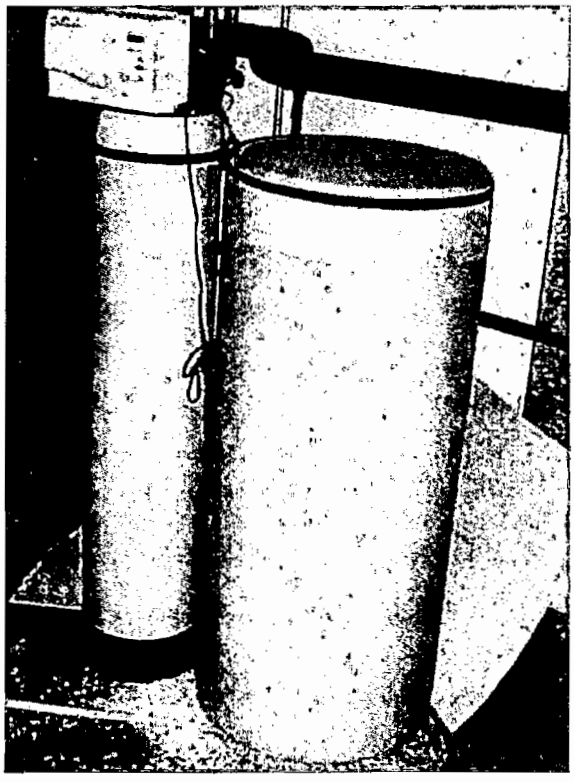


36. Air handling unit #1 in apartment building



37. Water softener is provided for domestic water treatment in the ILU apartment building

00255



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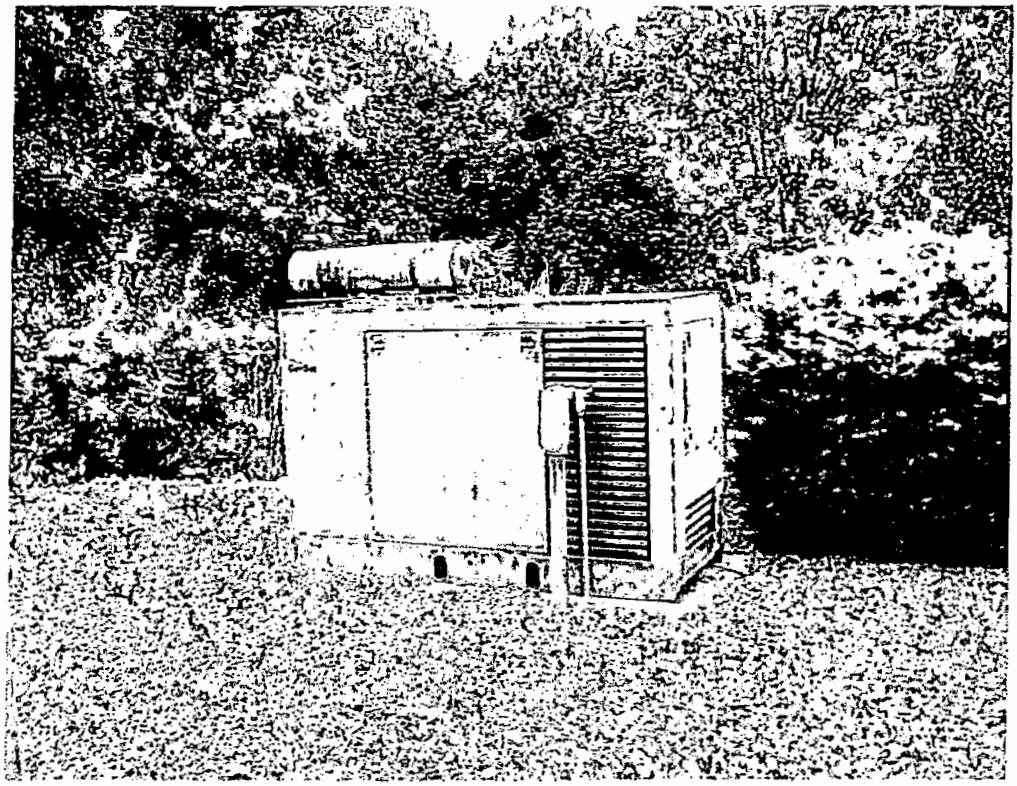
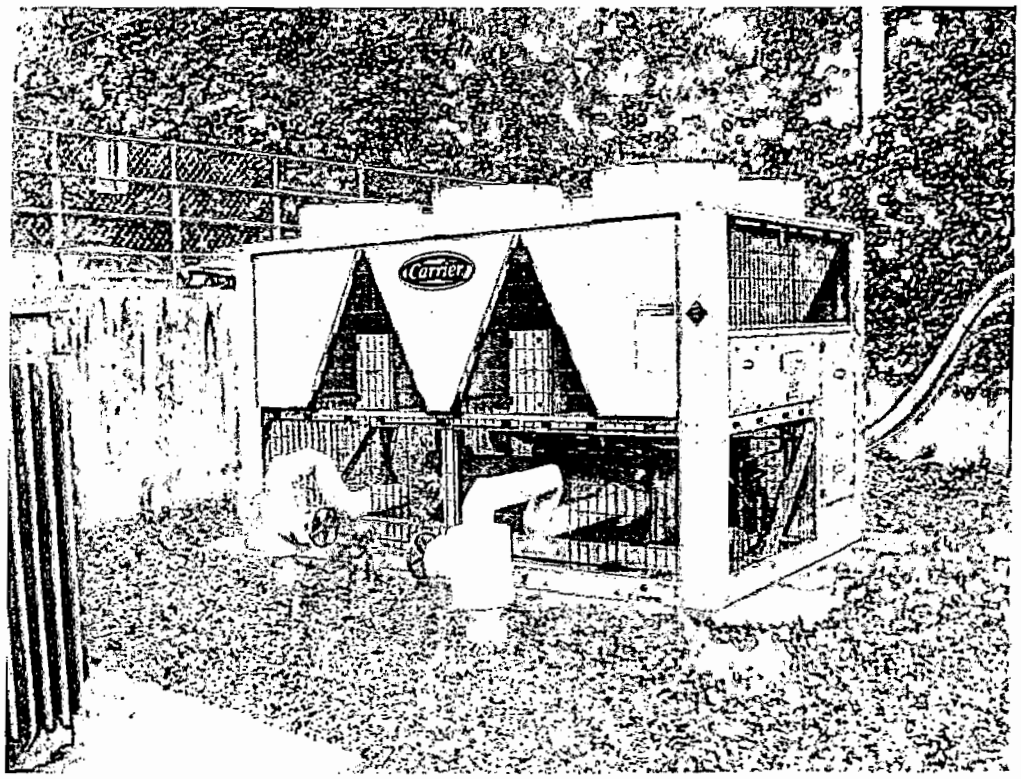


38. 100-KW generator serving the apartment building is original equipment




00256

39. Four-stage air-cooled chiller at apartment building was replaced in 2009



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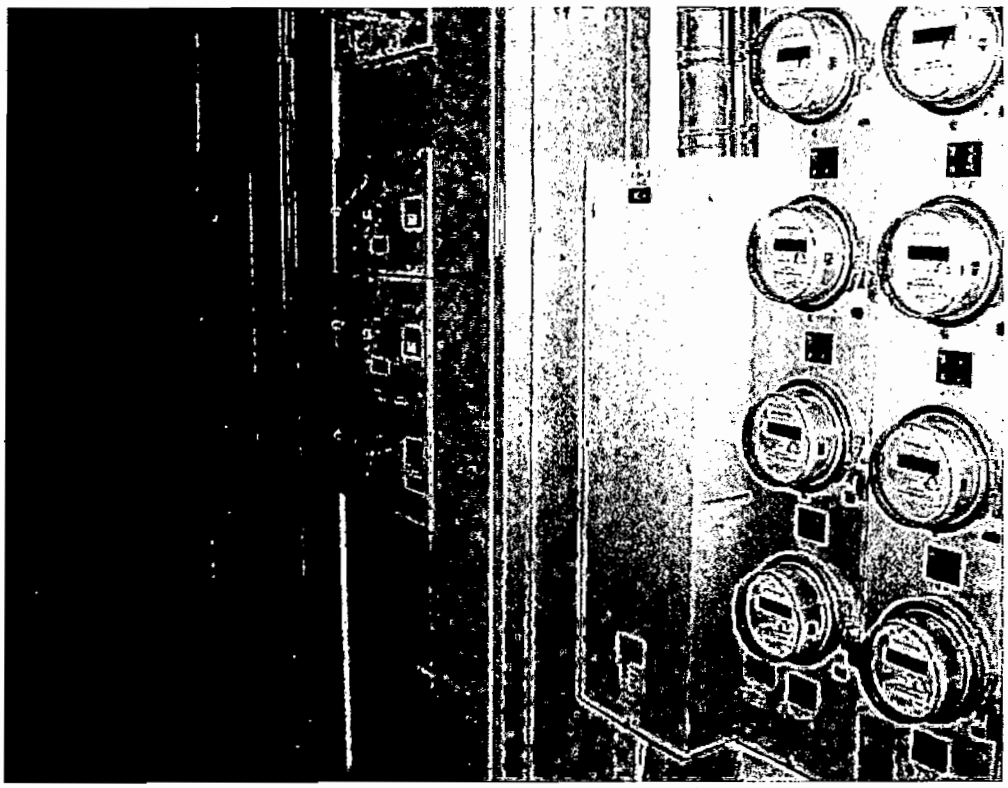
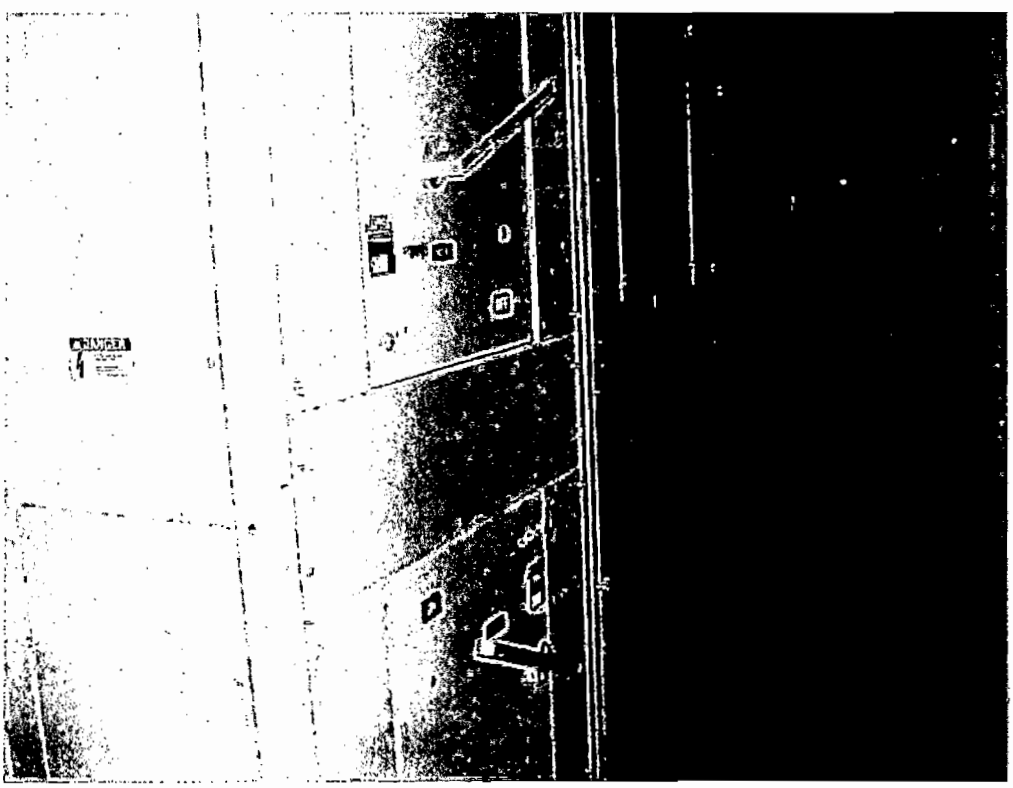


40. Main switchgear and meters are located in two electrical closets in apartment building



41. Main switchgear in electrical room in apartment building

00257



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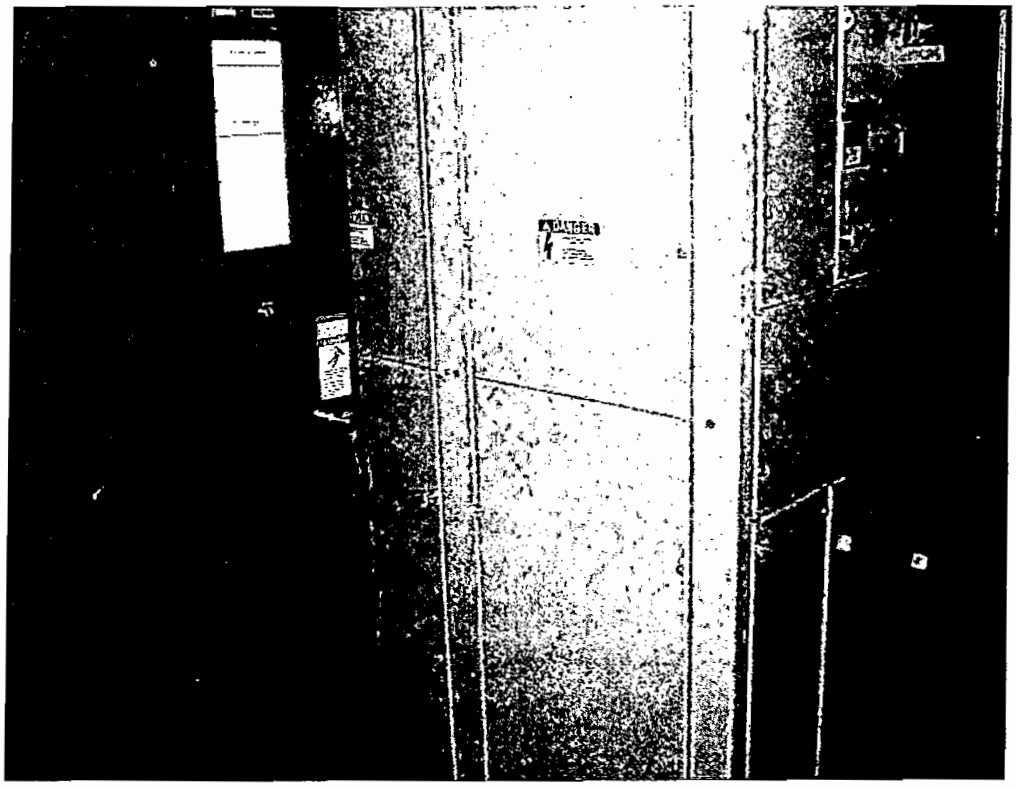
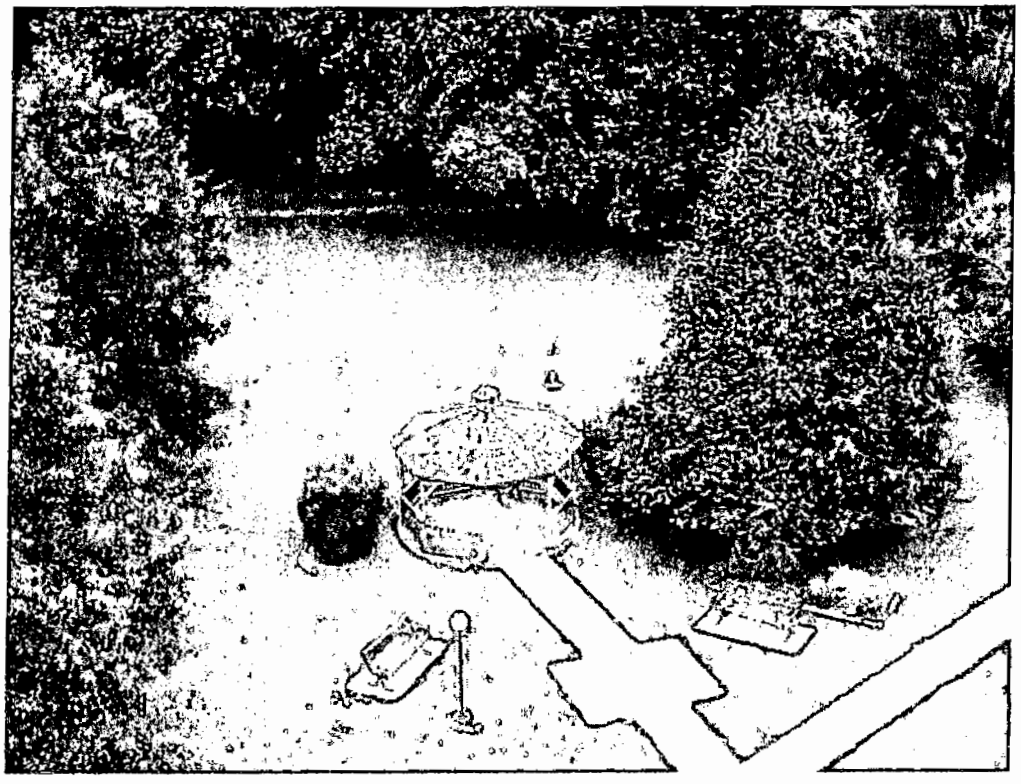


42. Automatic transfer switch for emergency power in apartment building



46. Gazebo and park benches are featured on lawn on east side of apartment building

00258

Attachment 25 - p.76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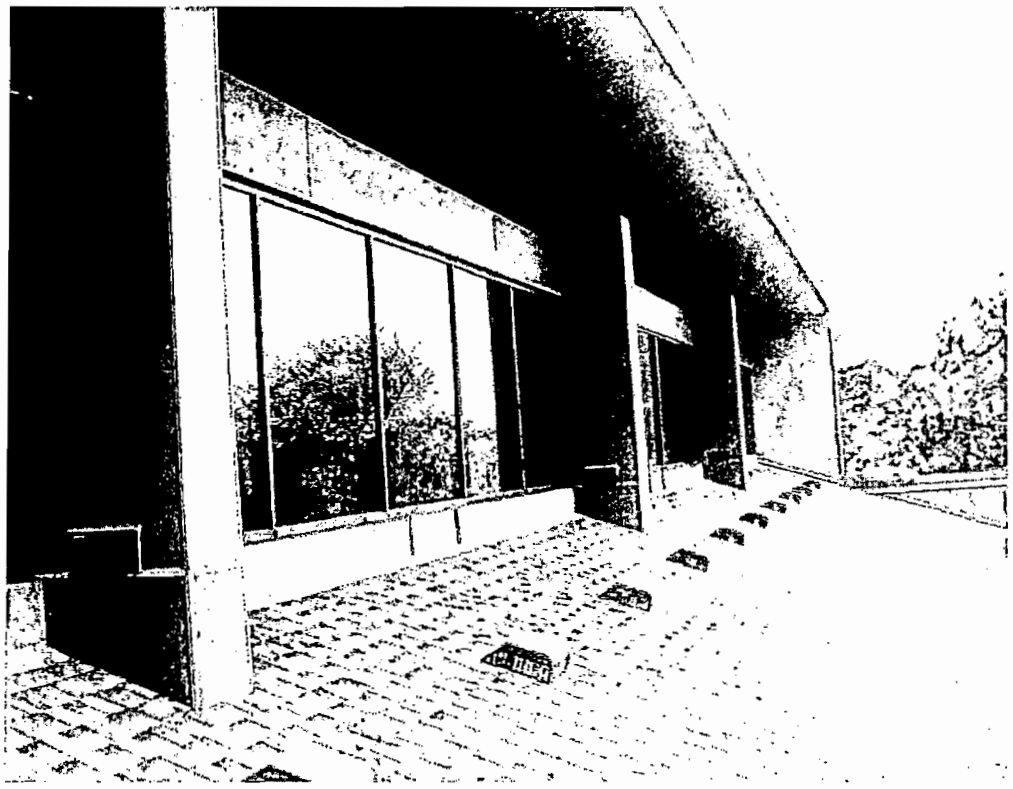
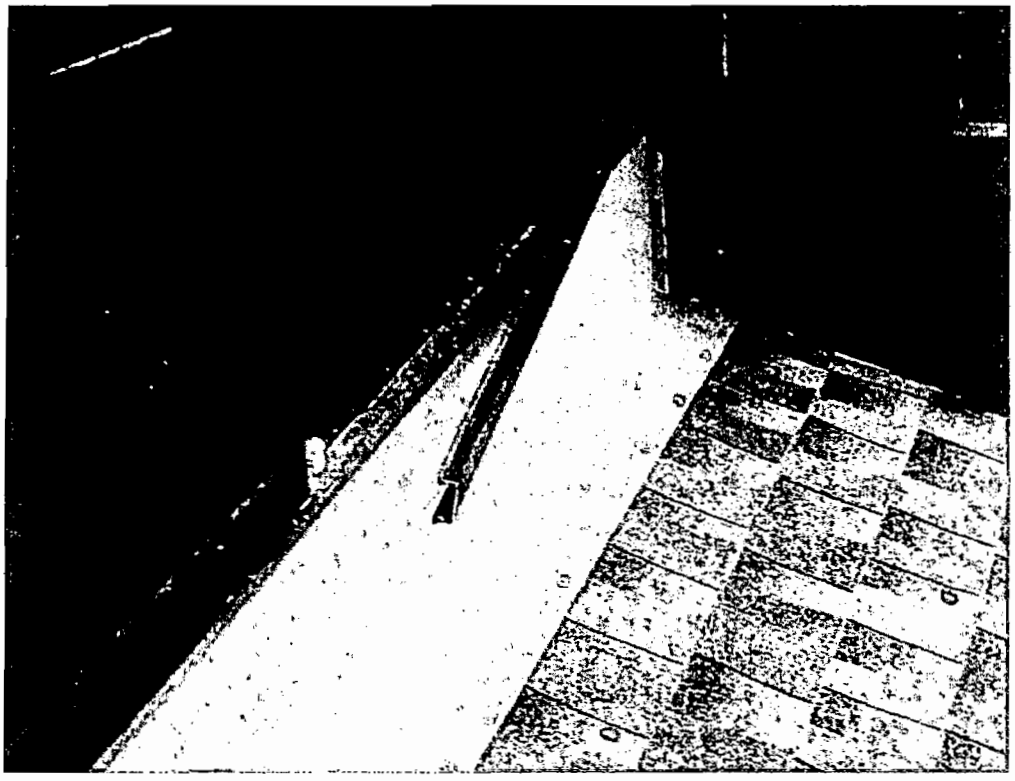


48. Storefront windows provide natural light in atrium of apartment building



49. Loose metal cap on storefront windows at ILU Building



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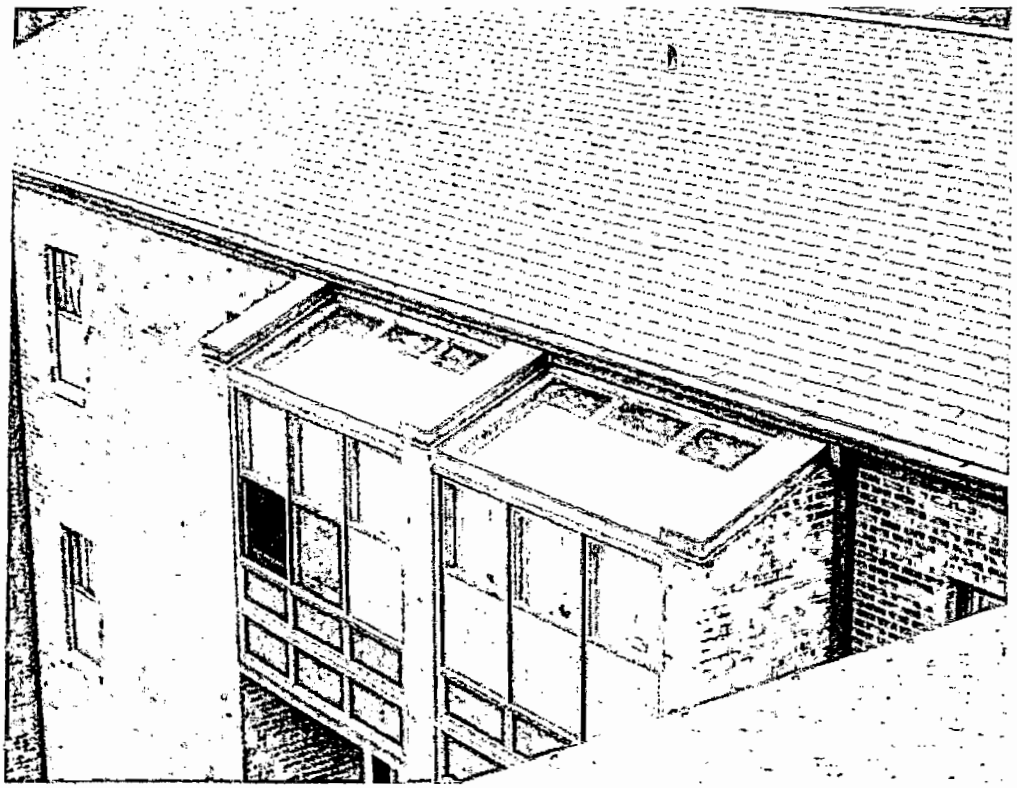
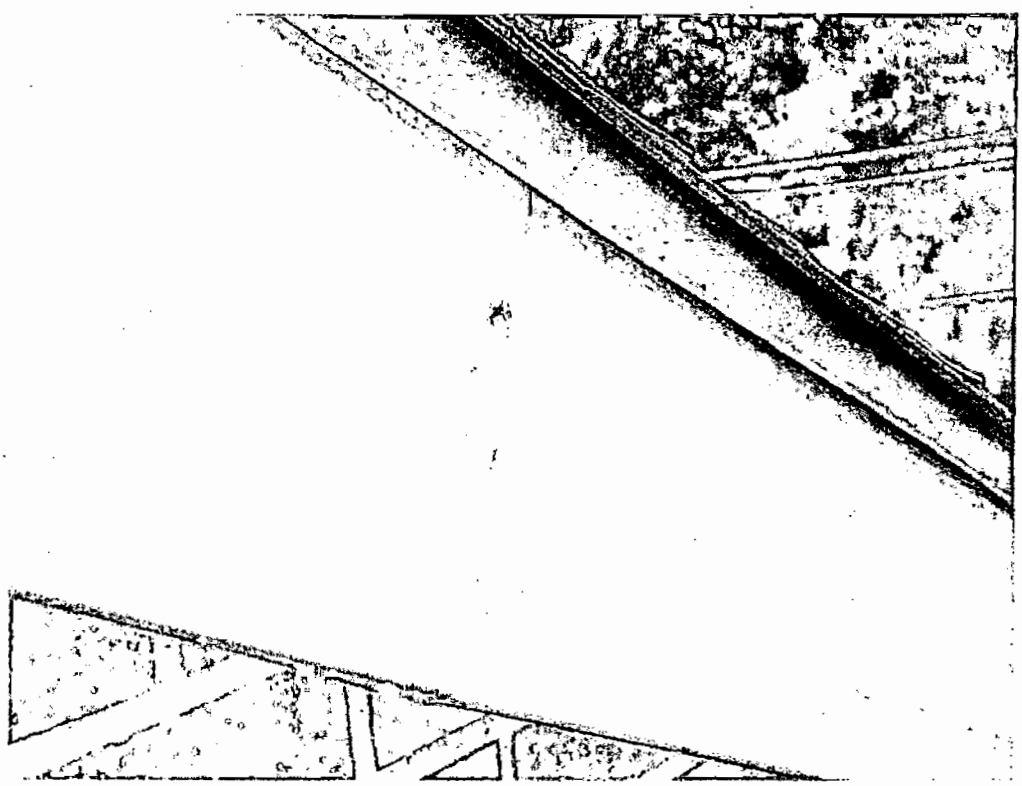


50. Greenhouse windows are provided at top floor balconies at apartment building



51. Screws holding metal cladding in place on rake boards at ILU Building need to be re-set

00260

Attachment 25 - p.78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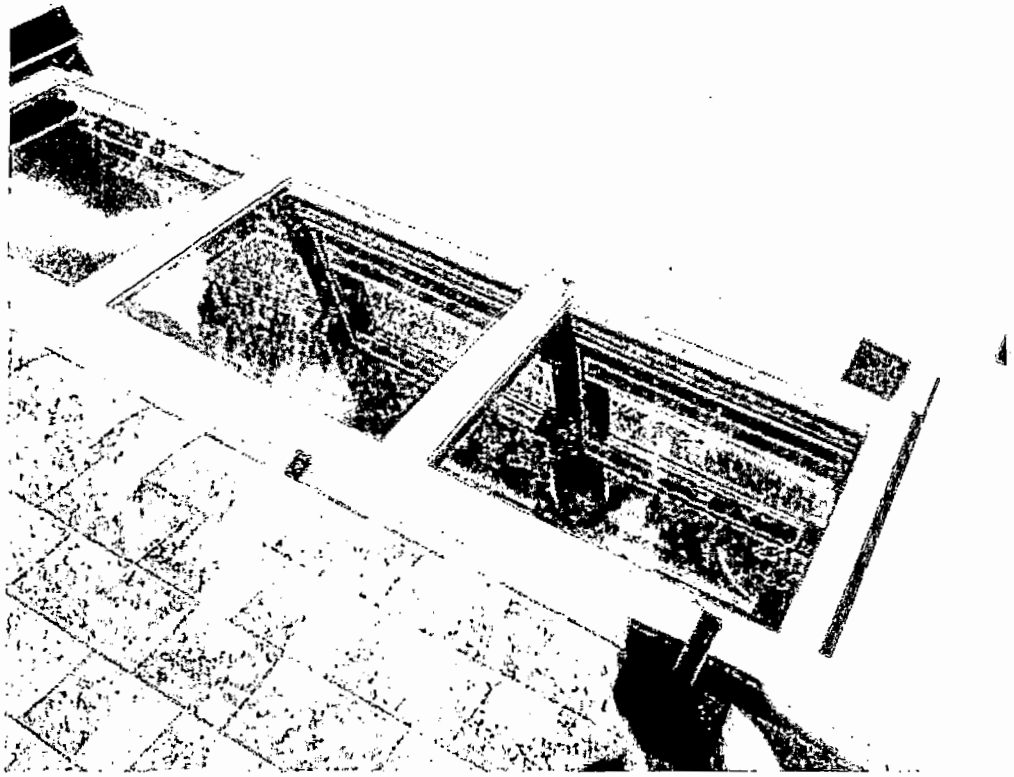
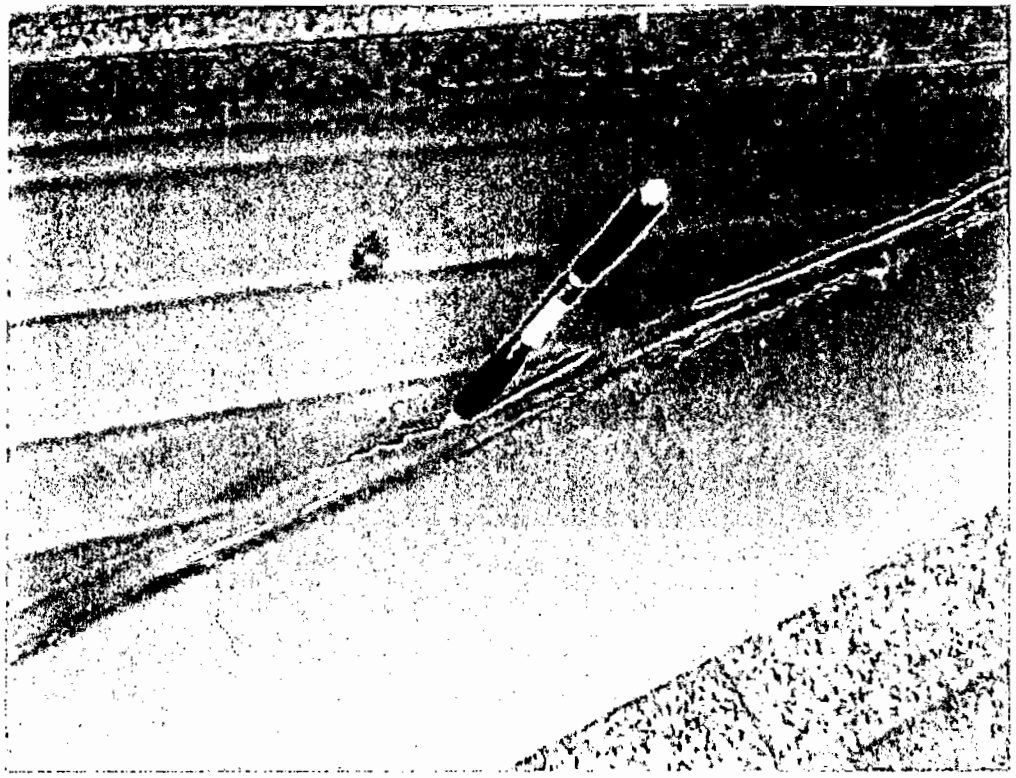


52. This greenhouse at apartment building has been wet-glazed to address a leak



53. Failed caulk joint at roof/wall intersection at apartment building

00261



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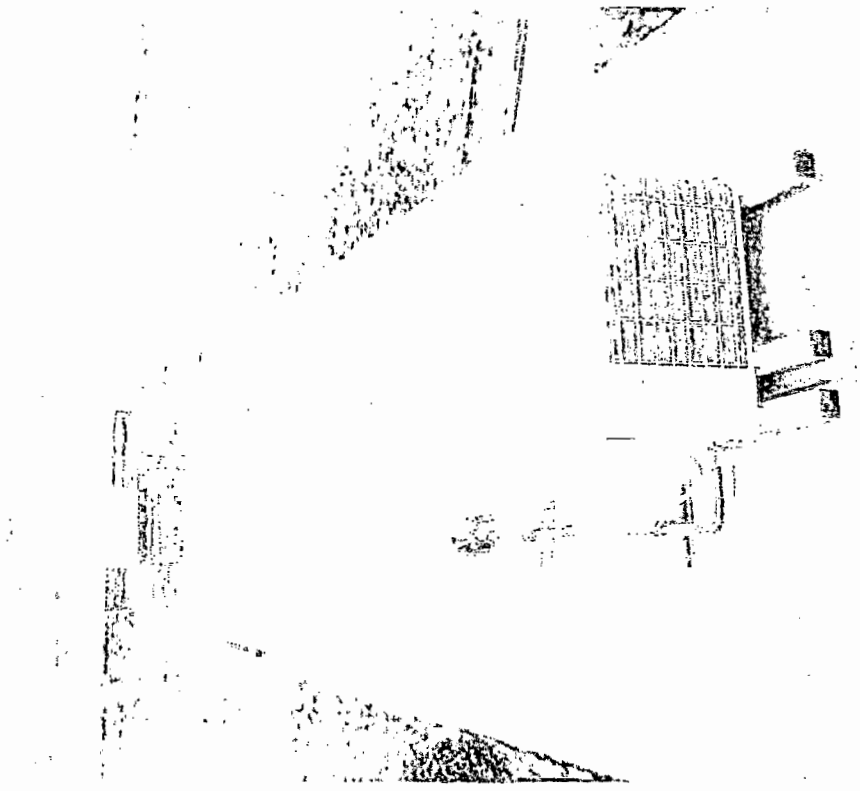
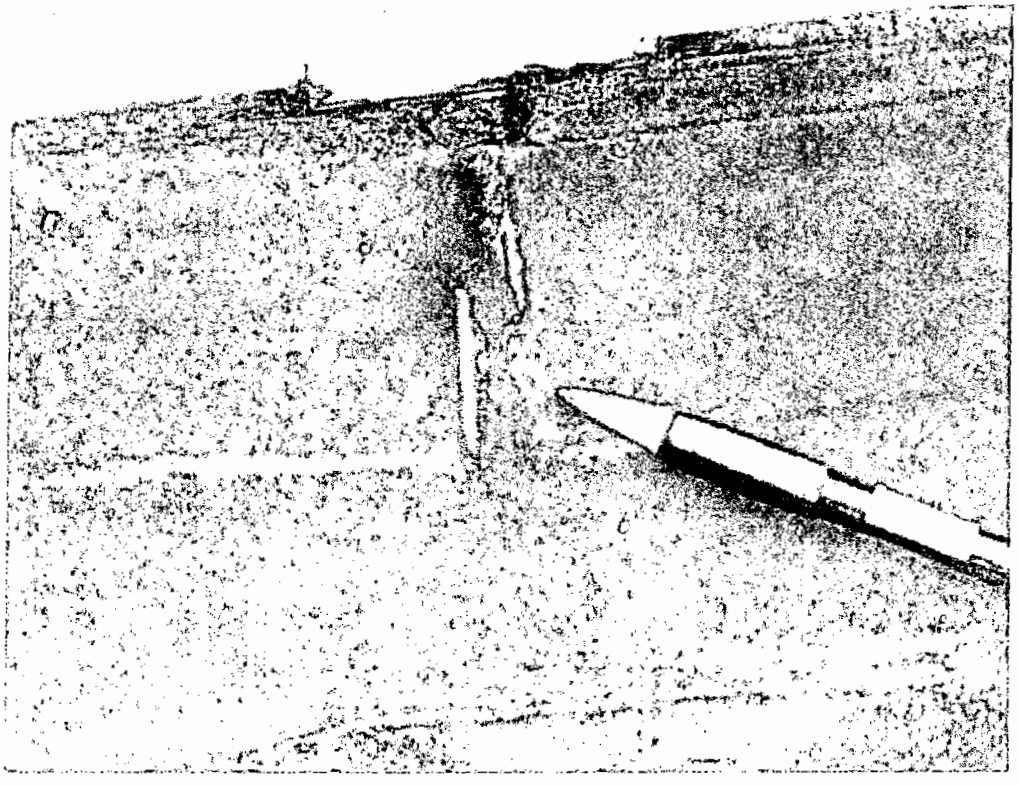


54. Two condensing units are located on roof of pedestrian bridge



55. Damaged EPDM membrane on roof of pedestrian bridge needs to be repaired

00262

Attachment 25 - p.80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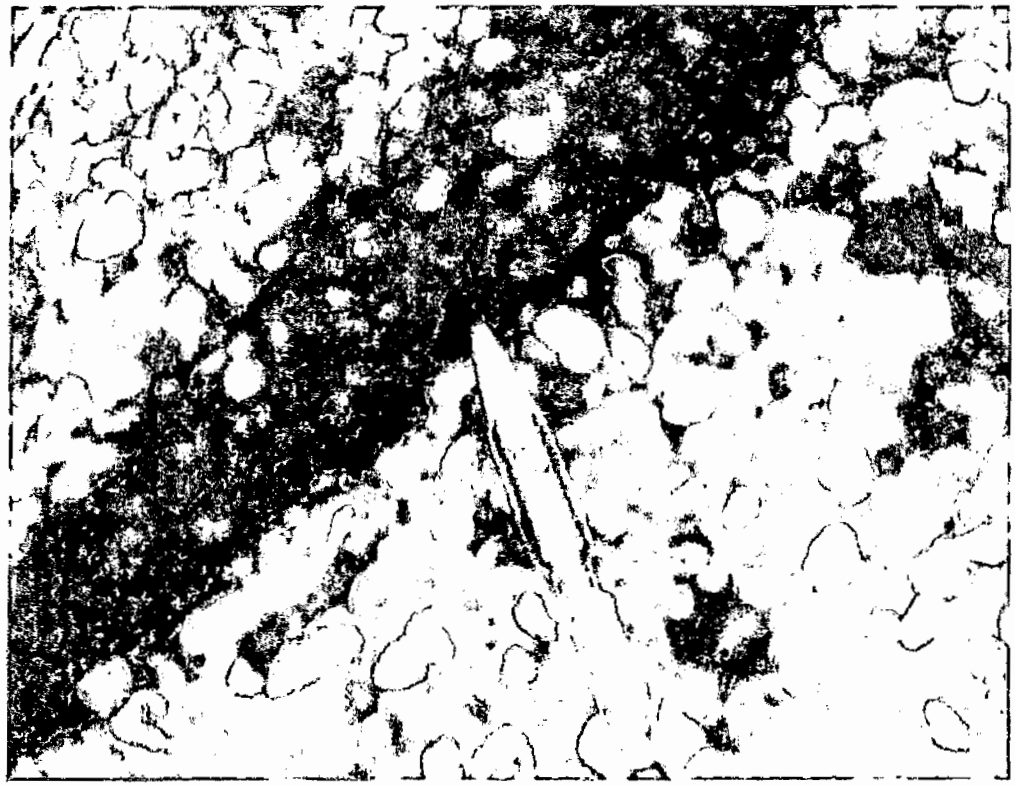
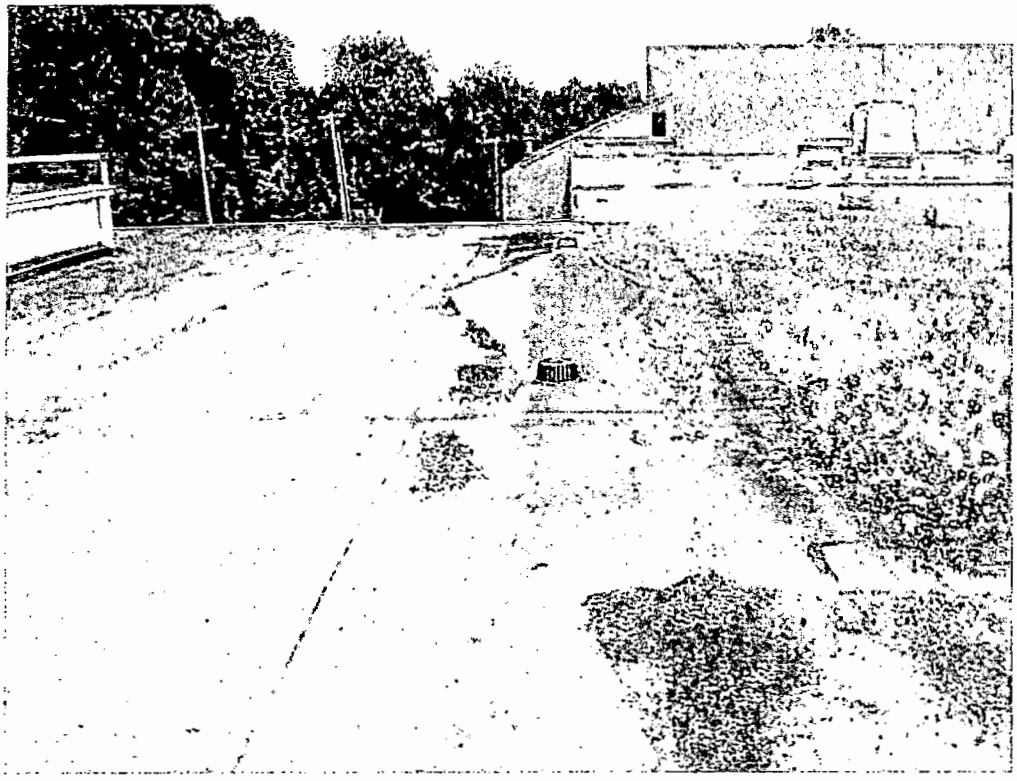


56. Coal tar roof on Roediger Wing has numerous areas in need of immediate attention



60. Lack of slope on this roof has resulted in ponding water and algae growth, which will ultimately lead to membrane deterioration

00263



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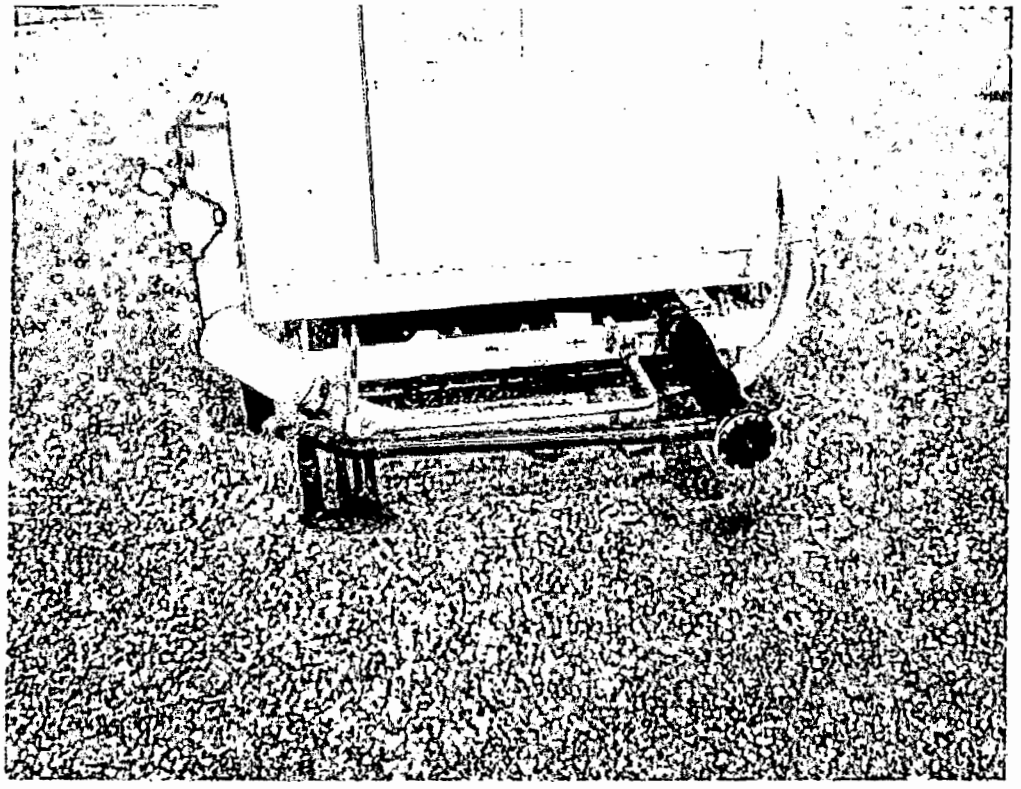

61. Insulation is missing on refrigerant tubing at this rooftop package unit

00264

62. Wood screen around cooling tower needs to be replaced



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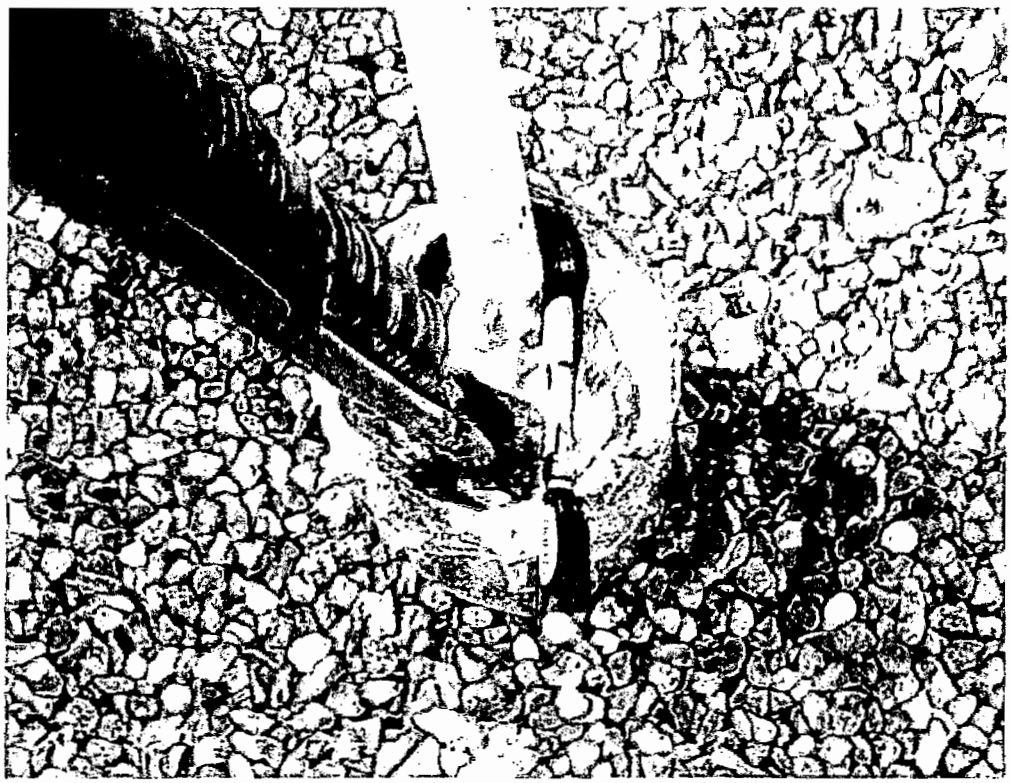

64. Pitch pocket on roof of Shelter kitchen has failed and is likely leaking water into building

. EPDM membrane at roof of Shelter dining has shrunk, pulling termination bar away from parapet wall and likely causing leak(s)

00265

Attachment 25 - p.83


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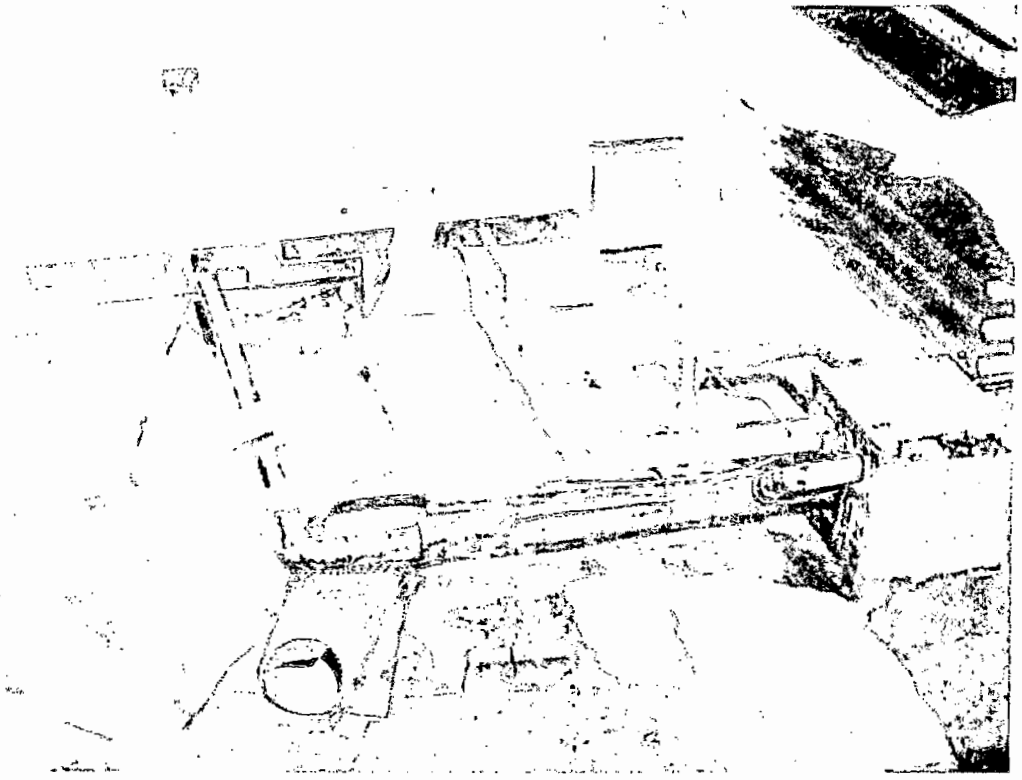
67. Rusty coping at Shelter dining room roof needs to be replaced



68. Insulation needs to be replaced on this refrigerant tubing to minimize condensation and increase the AC unit's efficiency

00266

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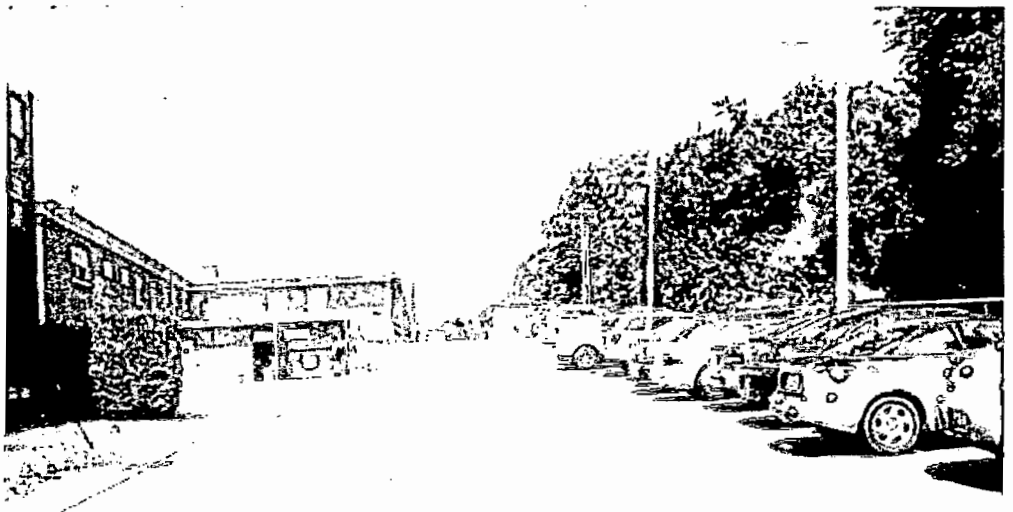

70. Asphalt parking at rear of building

71. EIFS at balconies at apartment building needs to be cleaned and elastomeric coating applied

00267

Attachment 25 - p.85


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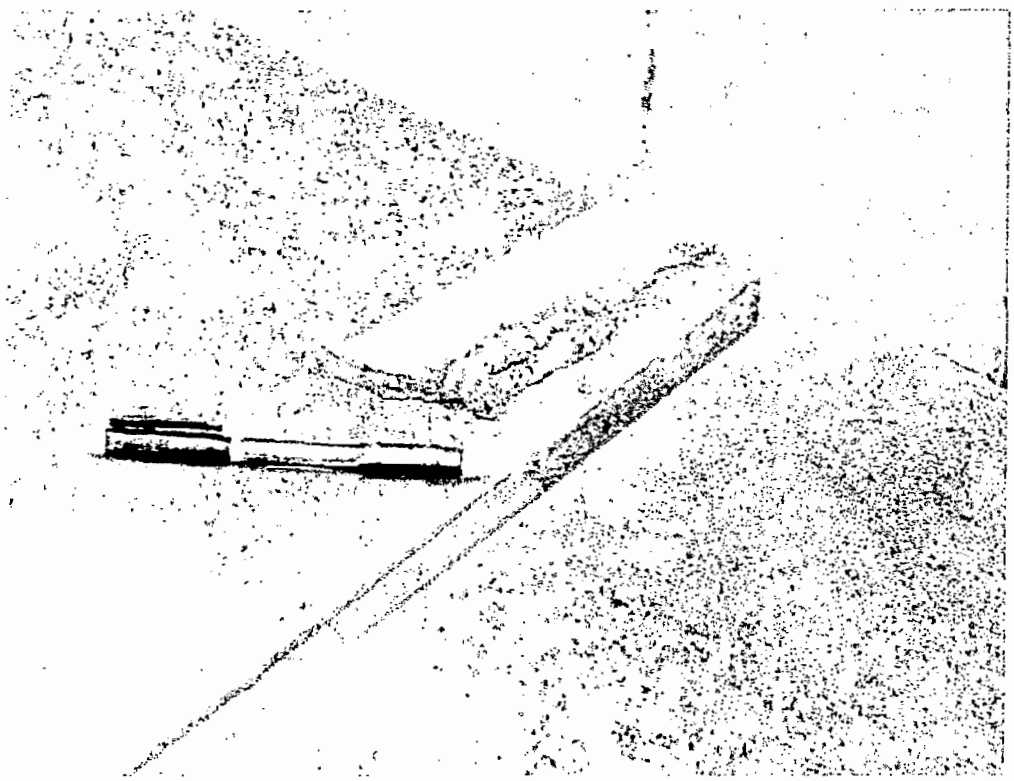
72. Spalling concrete and rusty column base at pedestrian bridge beg to be repaired



00268

73. Mortar needs to be removed from joints in capstone at retaining wall on west side of apartment building. Replacement with caulk is recommended

Attachment 25 - p.86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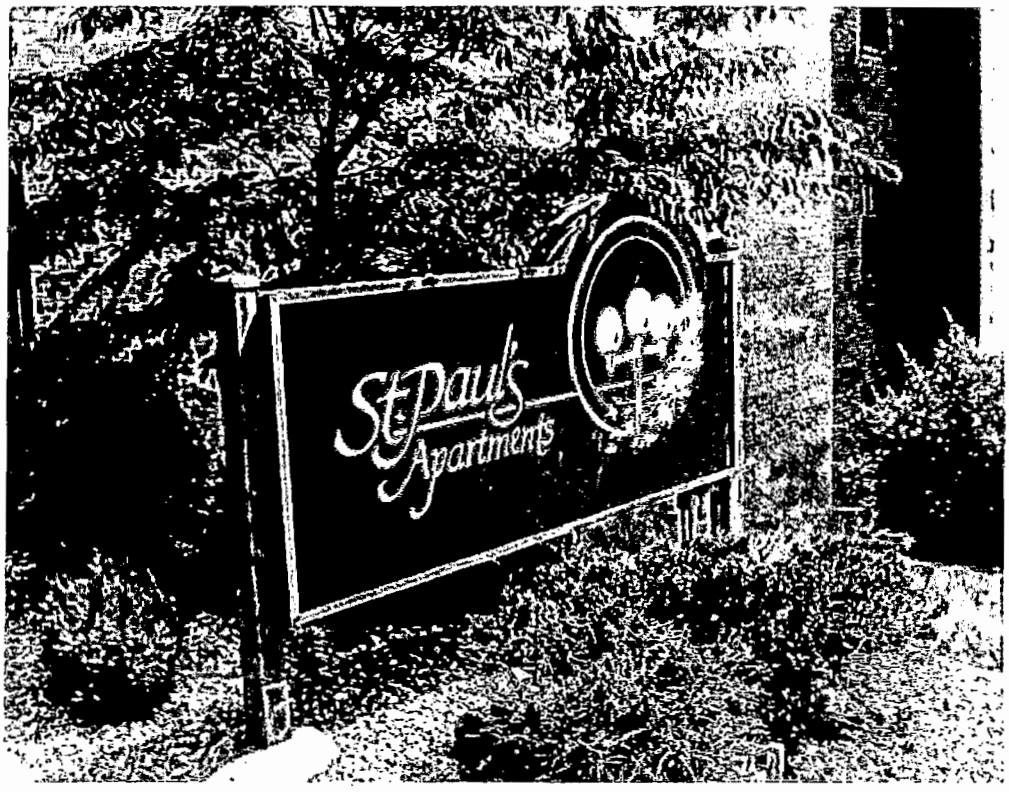


74. Monument sign at south entrance to apartment building

75. Brick control joints at apartment building need to be cleaned out and re-caulked

00269

Attachment 25 - p.87


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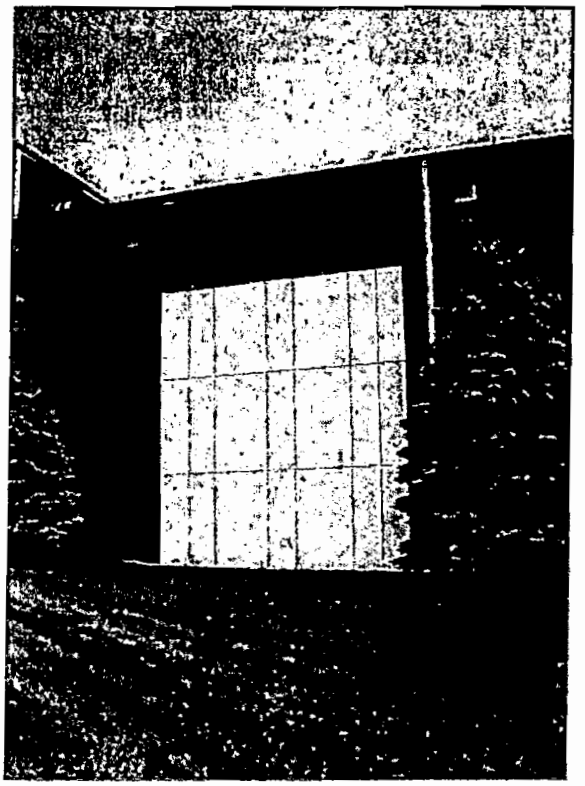

76. EIFS panel on south elevation of apartment building is intended to accommodate future expansion. In the short term, EIFS should be pressure-washed and an elastomeric coating applied

77. Rebar exposed in landscape on the south elevation of apartment building is assumed to be designed to accommodate future expansion

00270

Attachment 25 - p.88


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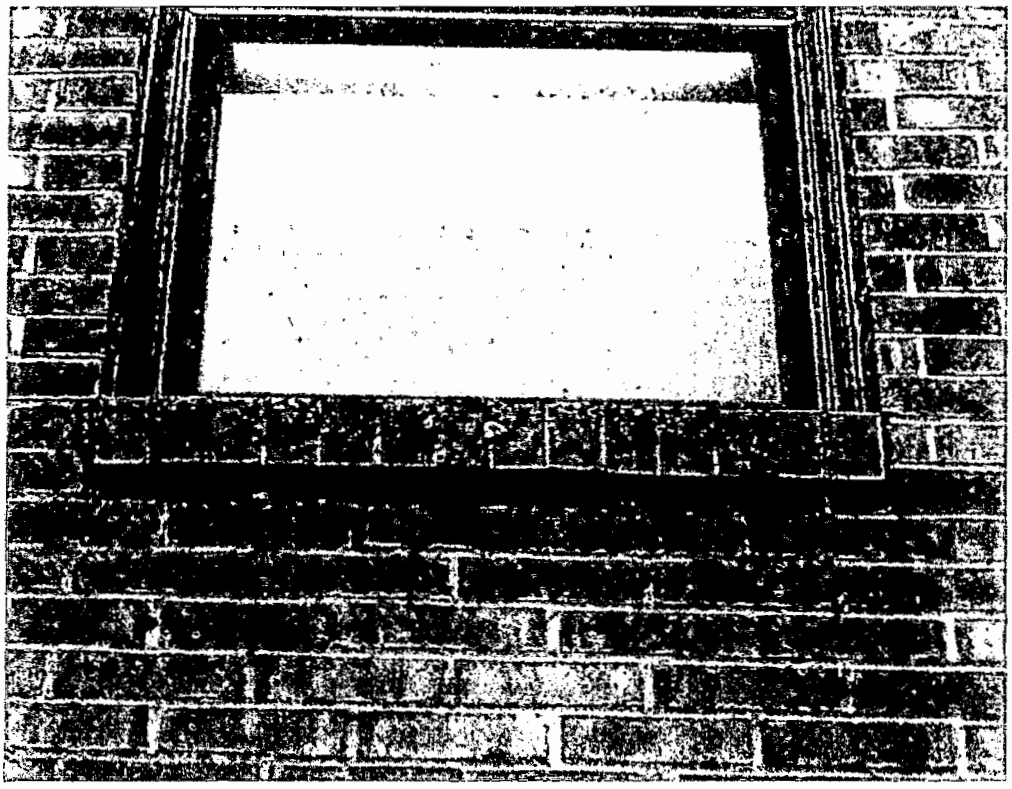

78. Mold is growing unabated on this north elevation of apartment building

79. Building settlement has likely caused this stair-step-shaped crack in brick on north elevation of apartment building



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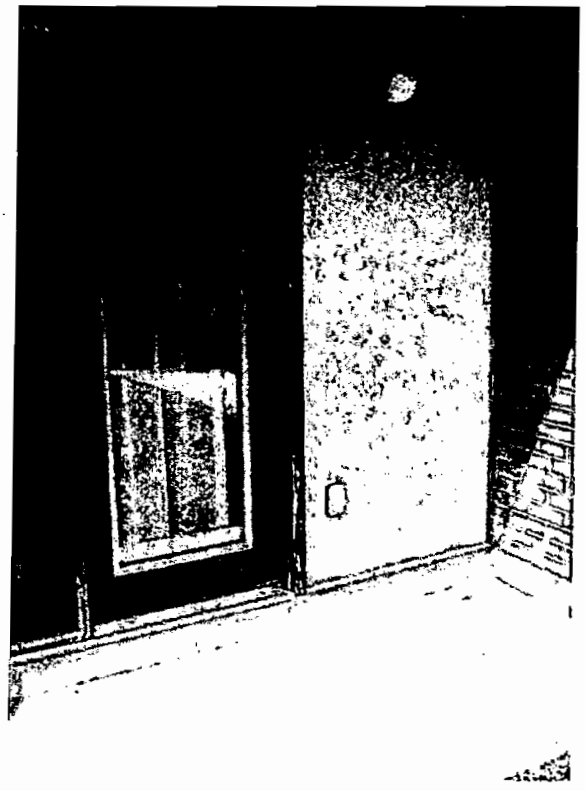

80. Brick mold trim on this patio door on east elevation of apartment building needs to be scraped and re-painted

81. Allowing vine-type plant life to grown on masonry walls, such as this on east elevation of apartment building, will severely damage wall and needs to be removed

00272



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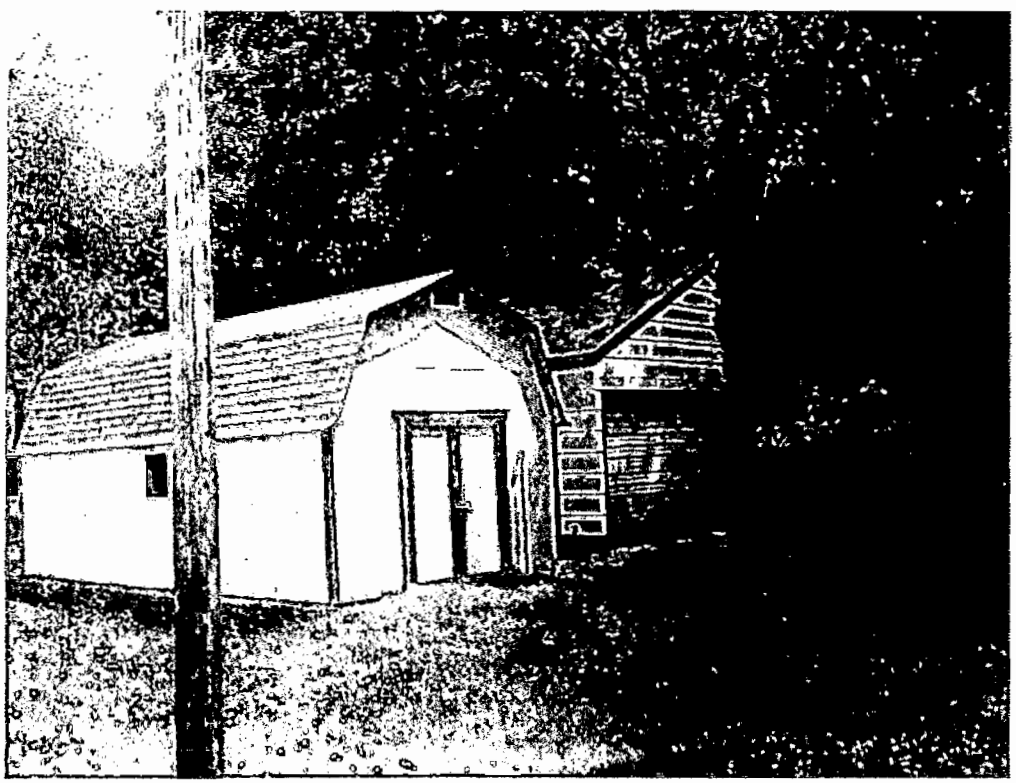
82. Trash dumpster on east side of apartment building is open to view from the street



83. Three out-buildings on east side of site are used for storage

00273



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84. Settlement in sidewalk at front entrance to apartment building has resulted in a tripping hazard an inch or more in height

85. The effectiveness of this parking lot light at front of building is severely hampered by tree foliage

00274

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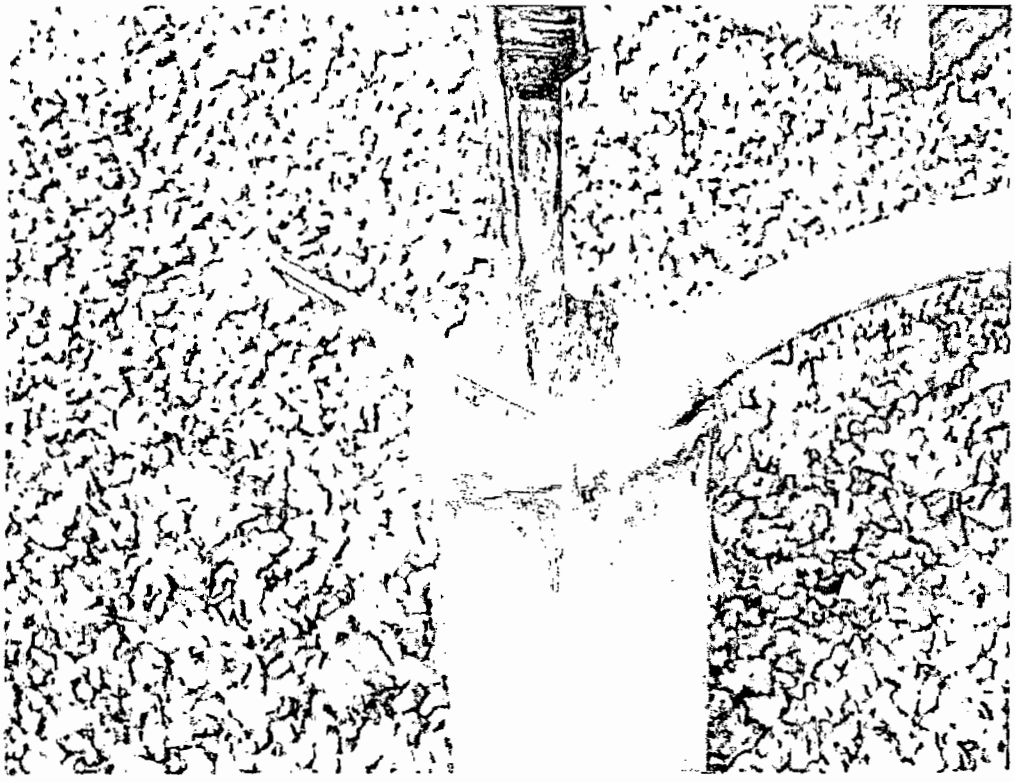
86. Sidewalk on south end of Bartel Wing has settled severely, creating a fall hazard



87. This is one of two pitch pockets on roof of Shelter kitchen that need immediate repair to prevent further water infiltration



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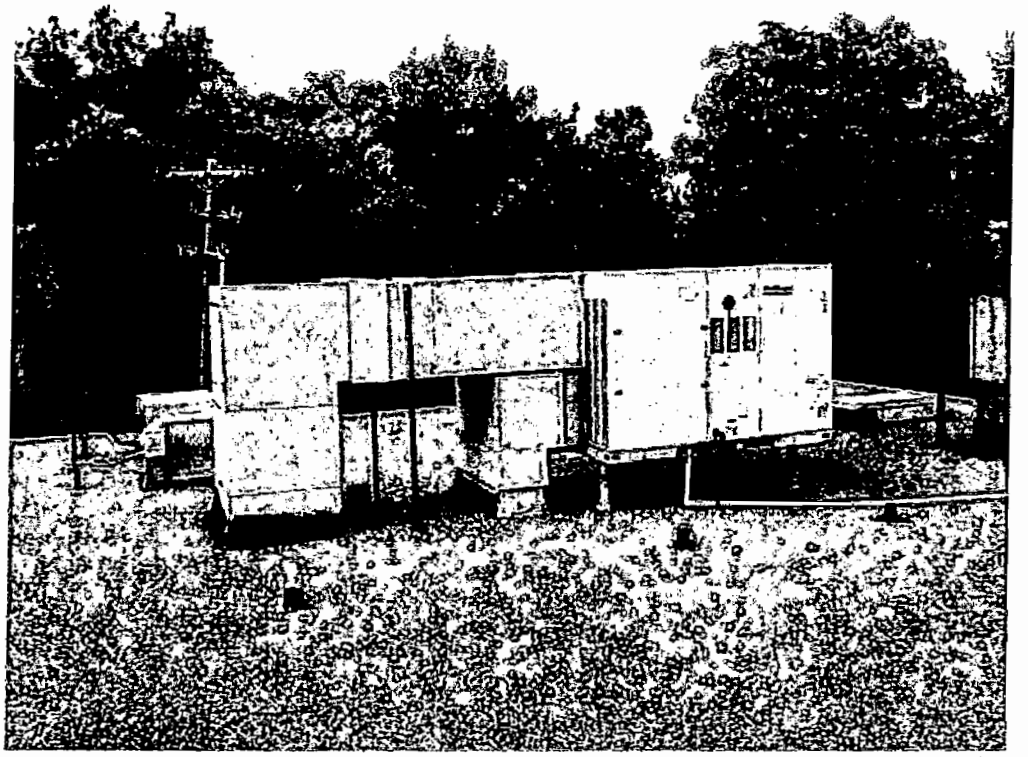
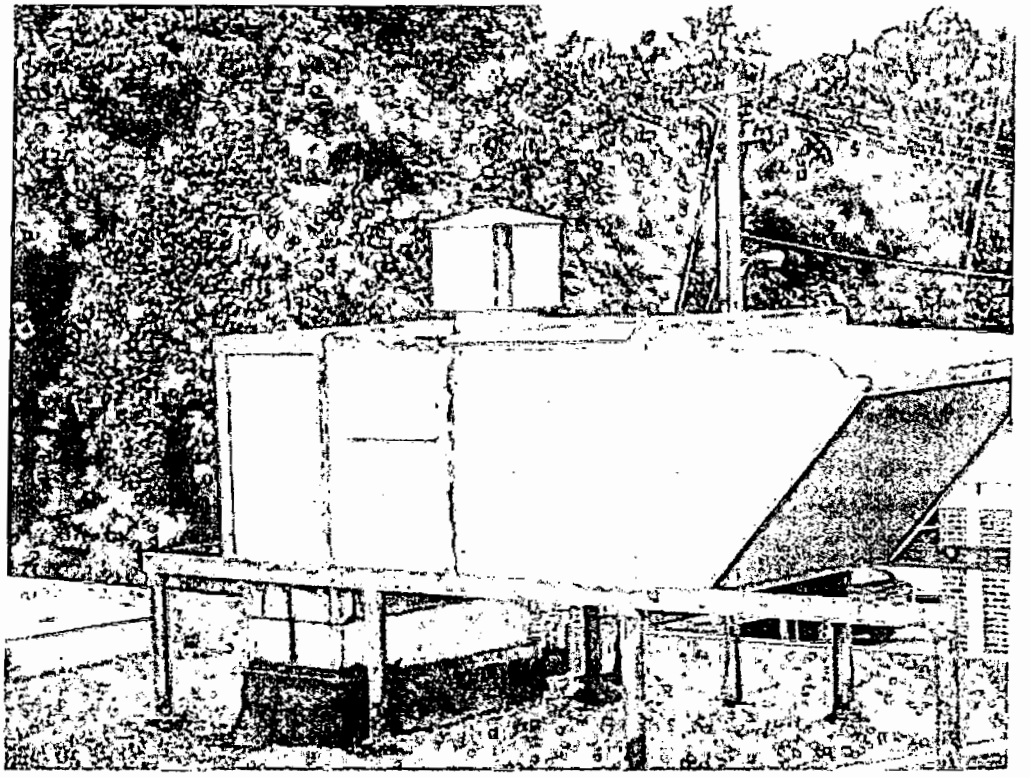


88. McQuay package HVAC unit on roof of Shelter kitchen



89. Reznor package unit on roof of Shelter kitchen

00276



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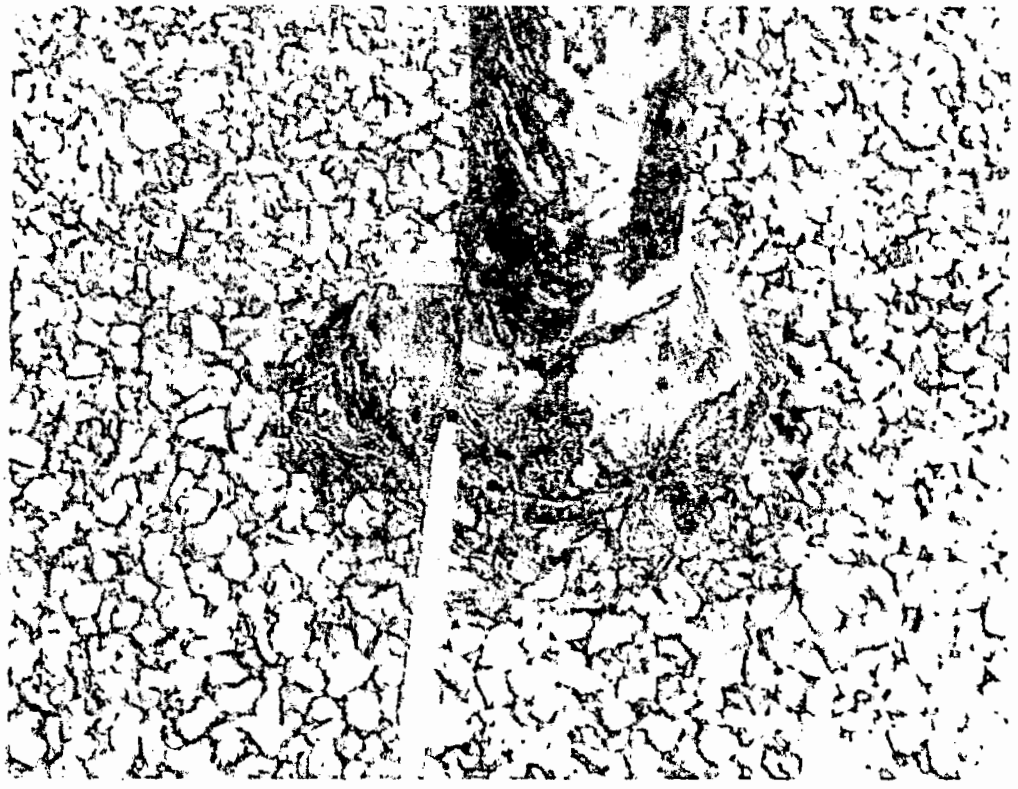
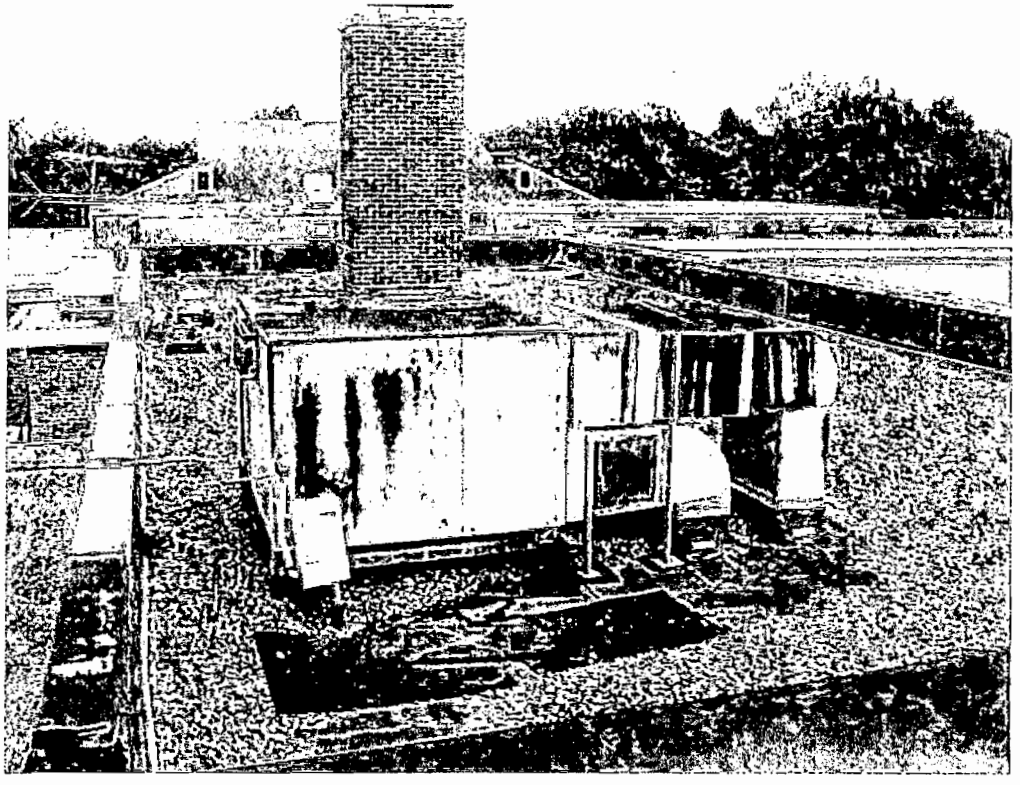


90. Pitch pockets at grillage steel supports on roof of Shelter kitchen need repair



91. Package HVAC unit on roof of Shelter dining room

00277



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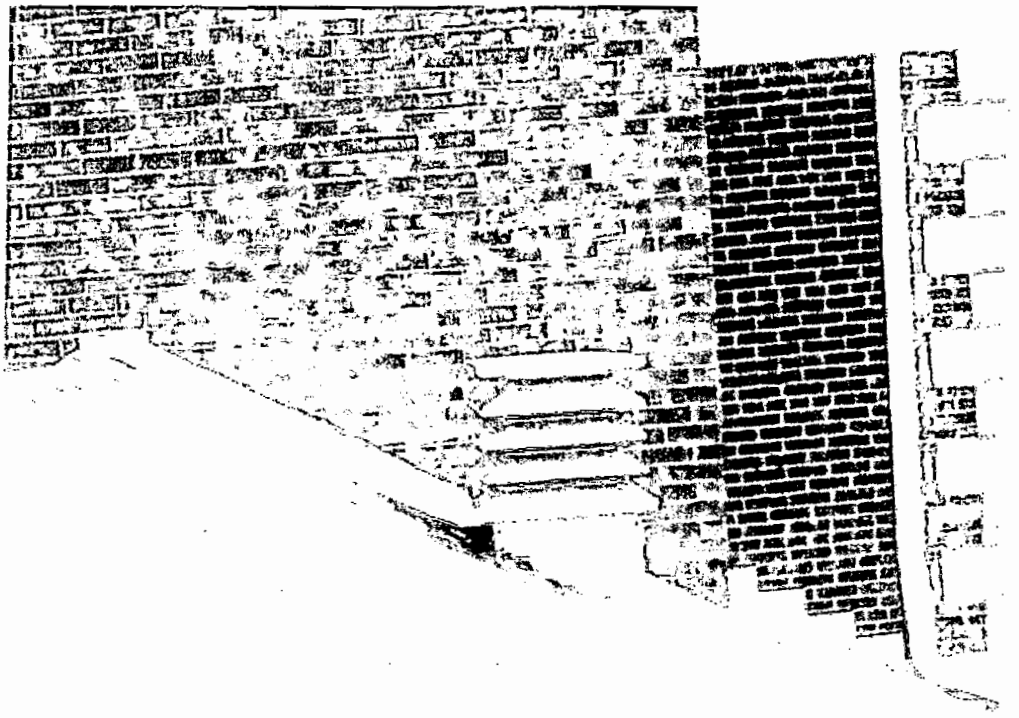
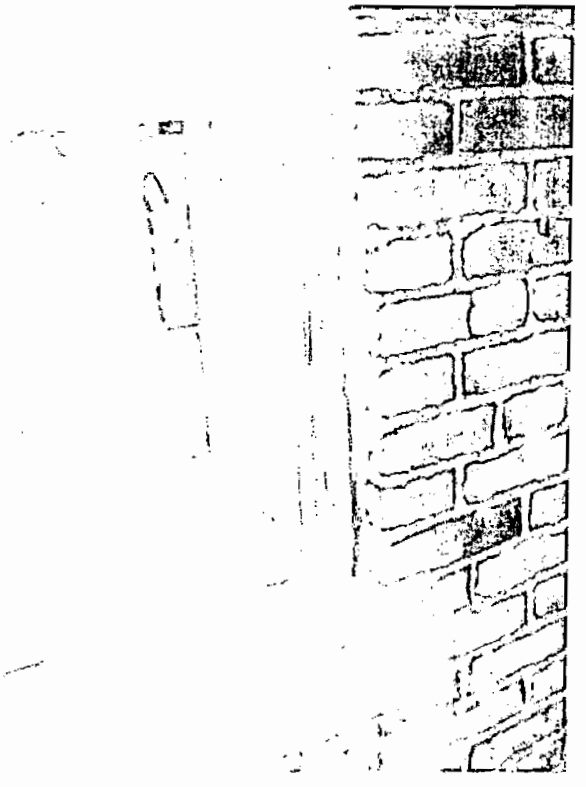


92. Curb for fan on roof of Kohl Wing needs a cricket installed



93. Brick molding at windows at Kohl Wing needs to be replaced

00278



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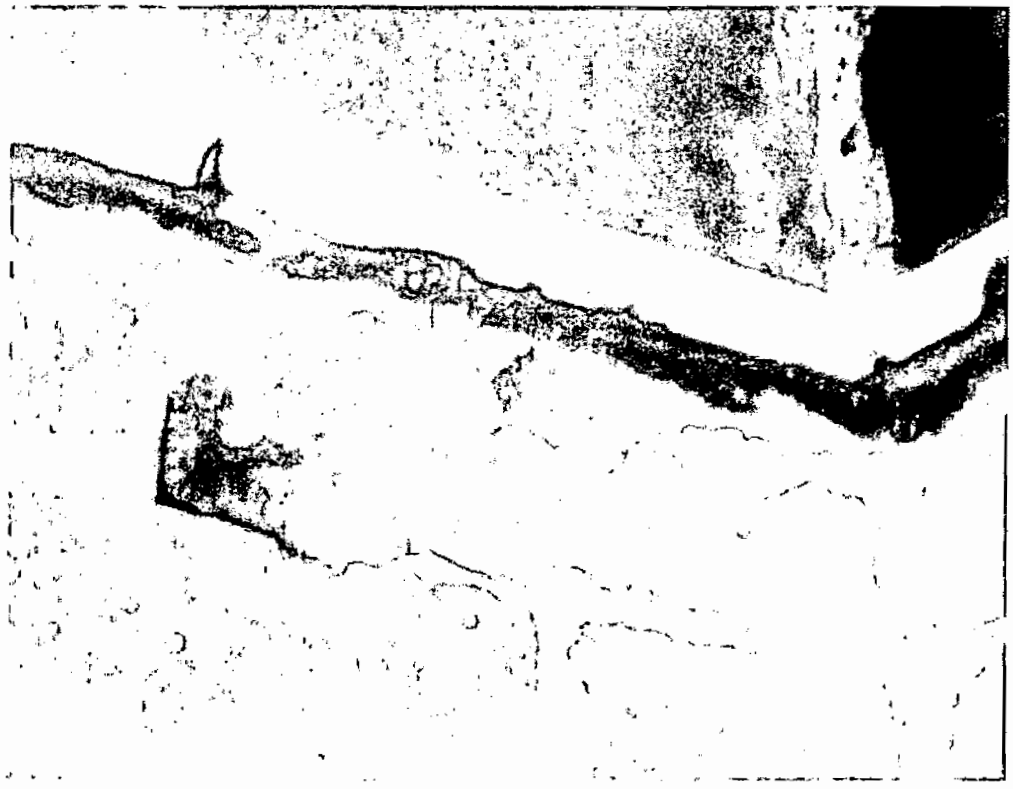
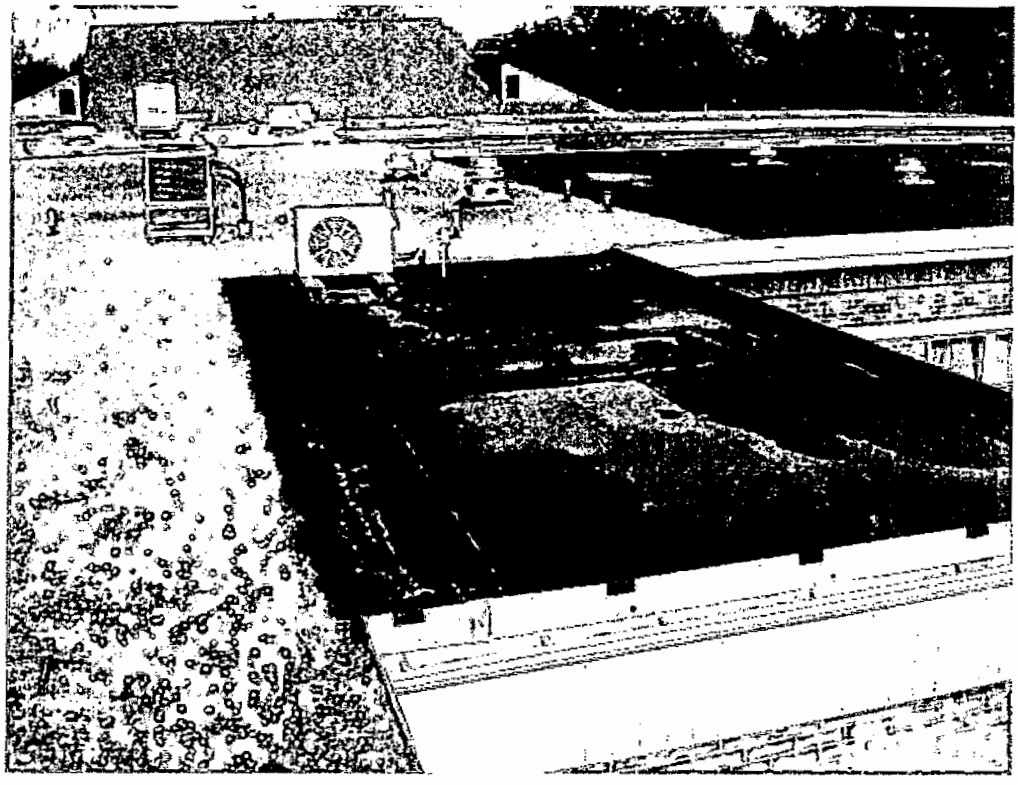


94. Damaged masonry on front elevation of Kohl Wing needs to be repaired



95. Roof over visitor entry between Ludwig and Bartel Wings needs to be replaced

00279



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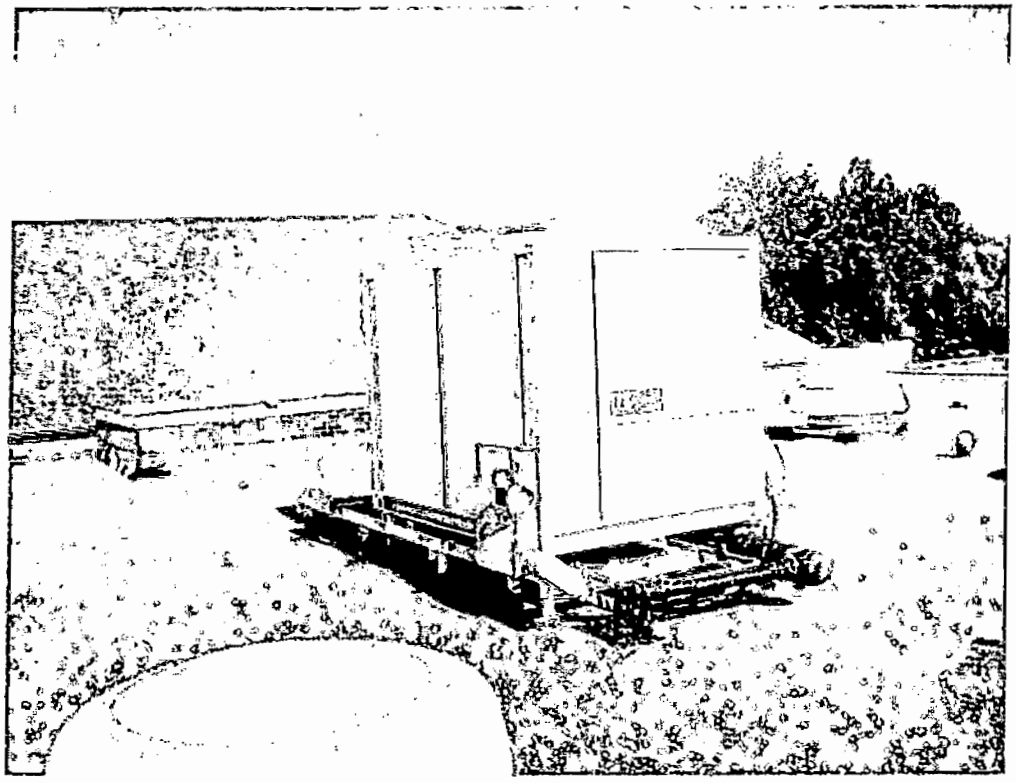
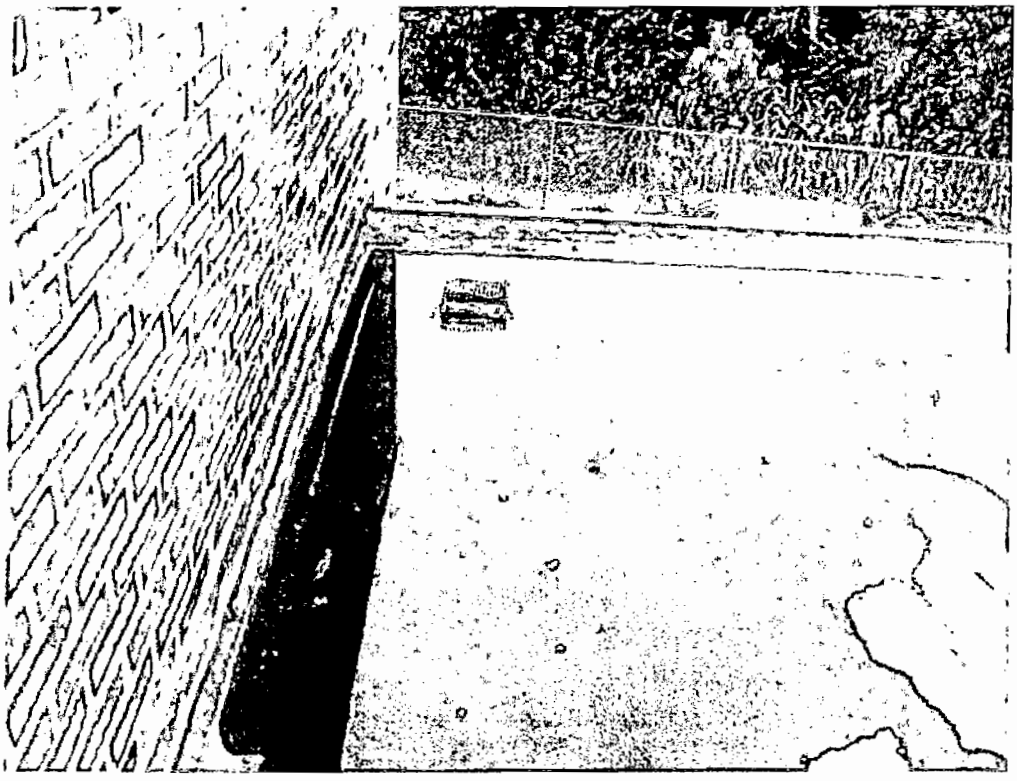


96. This Trane package HVAC unit provides conditioned air for common areas of Roediger Wing



97. This is one of two drains on roof at chapel set too high, causing water to pond an inch deep

00280



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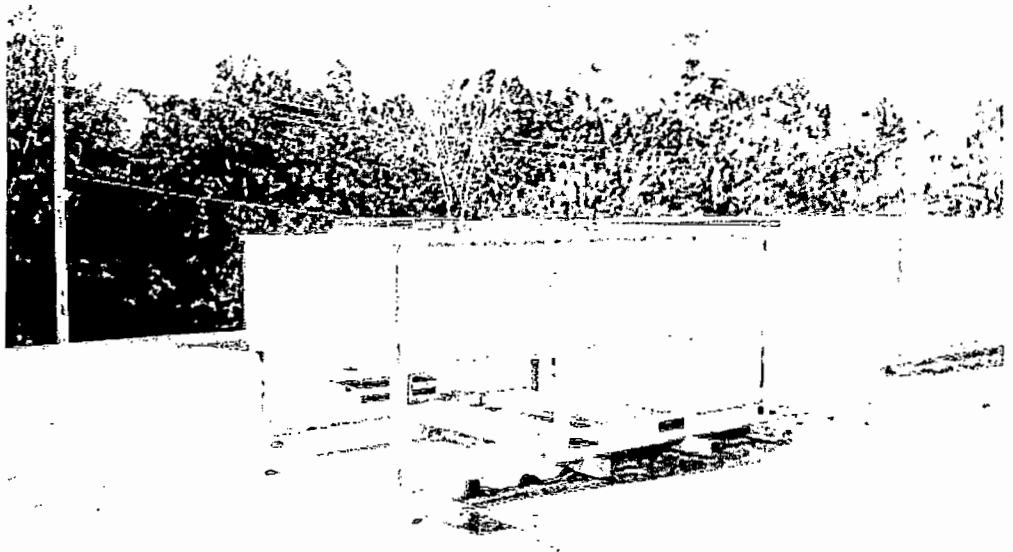
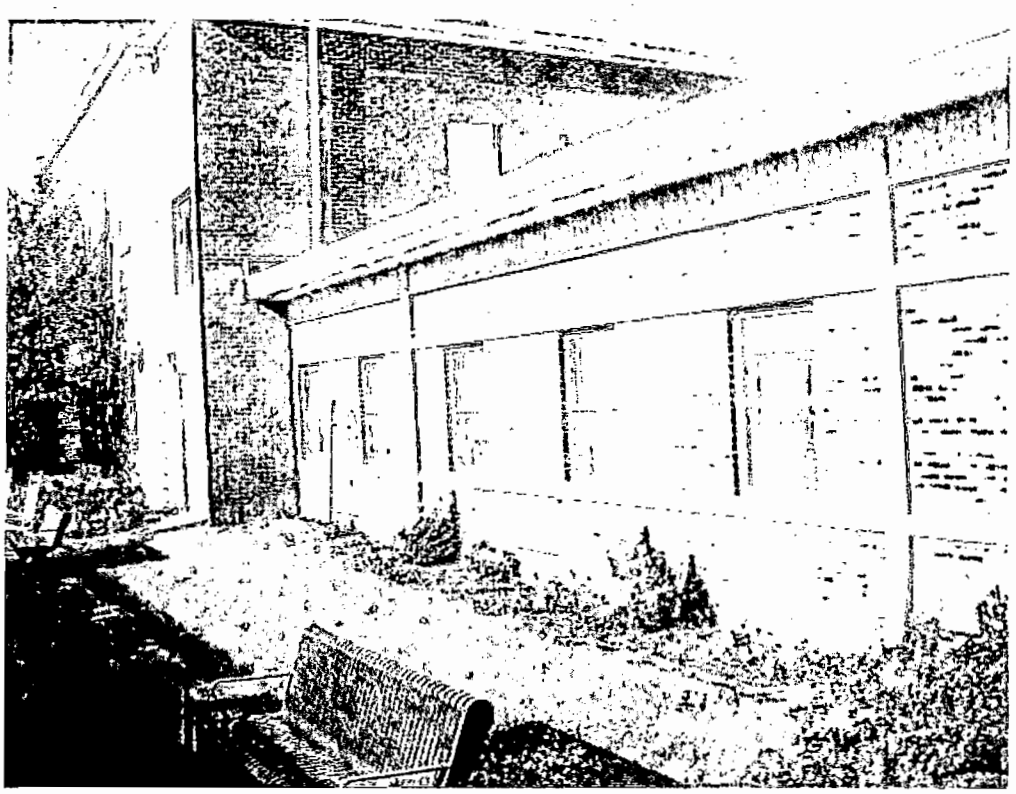


98. New 2-stage condensing unit installed on roof at chapel in 2009



99. Single-hung aluminum windows at Kohl Wing need to be replaced

00281



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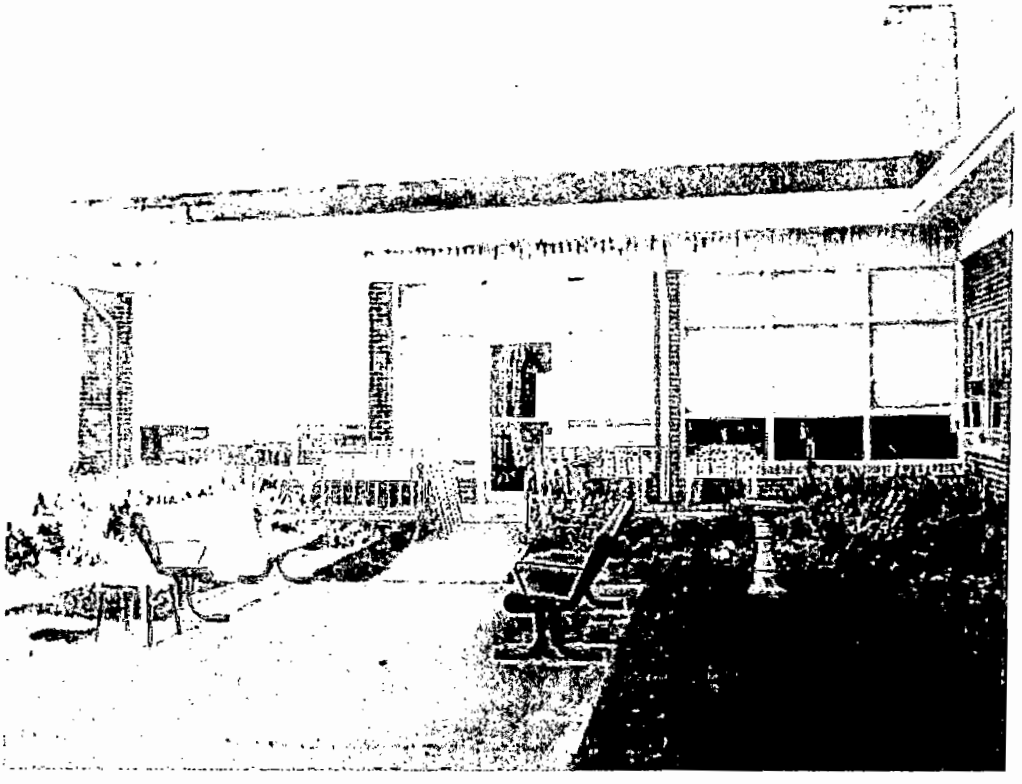
100. Fixed sash windows on south elevation of Kohl Wing need to be replaced



101. Fixed sash wood windows in Kohl/Ludwig courtyard need to be replaced

00282

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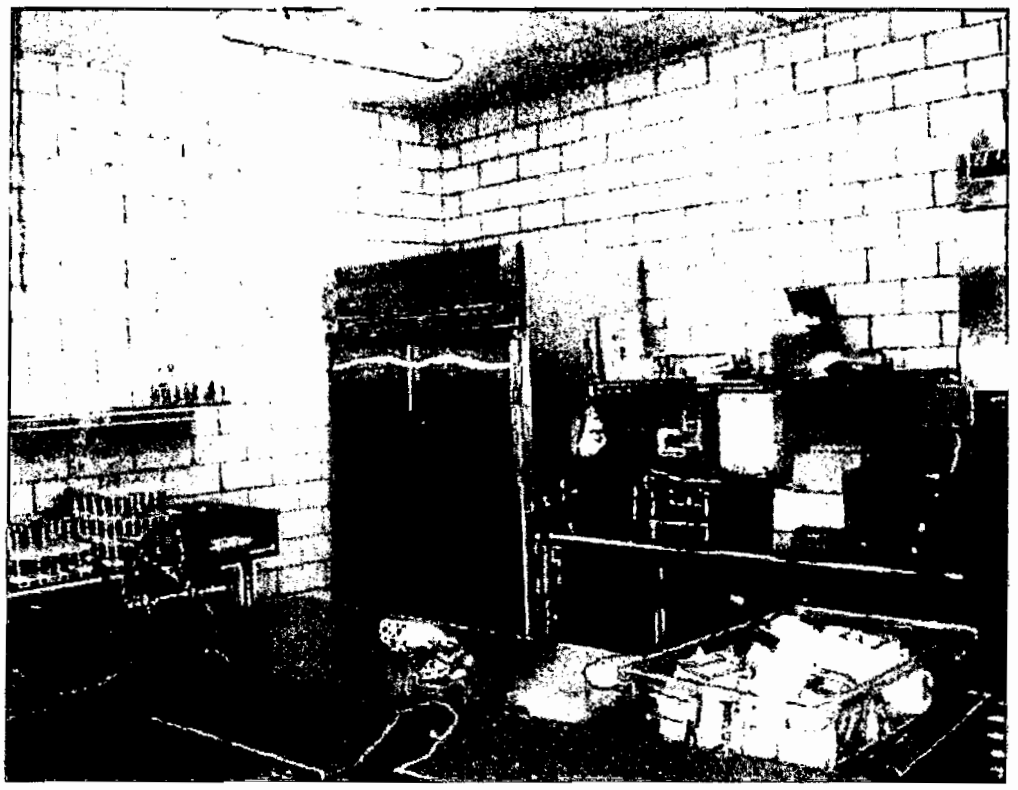
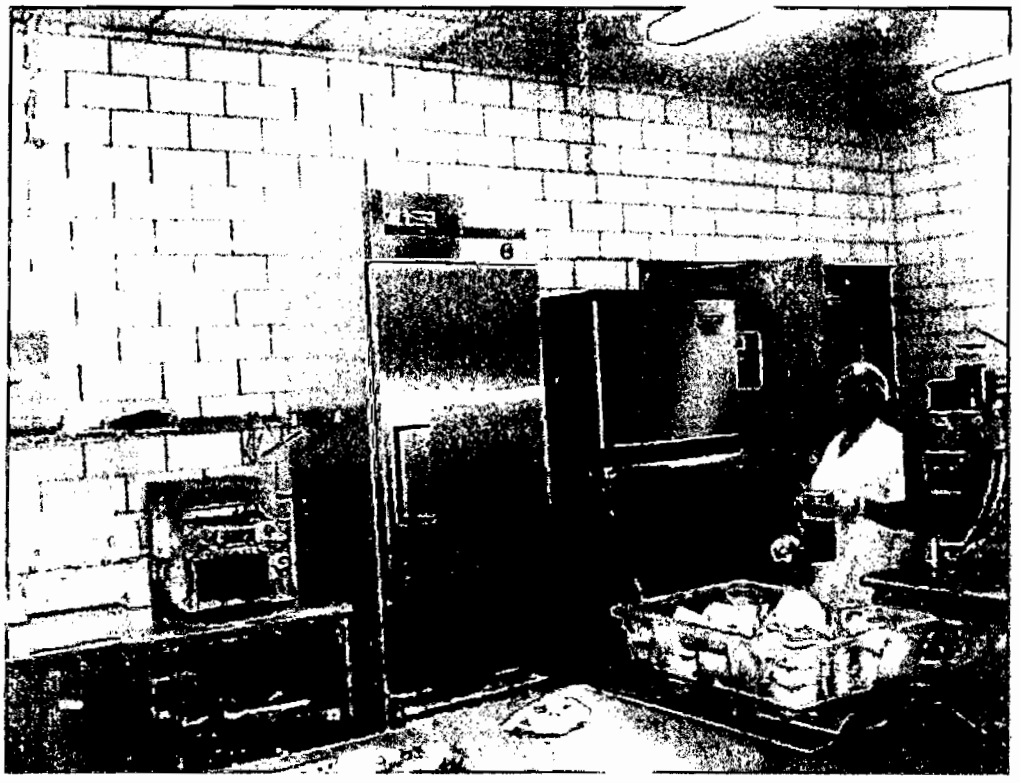


102. 2-door reach-in refrigerator in Shelter kitchen



103. Icemaker and single-door refrigerator in Shelter kitchen

00283



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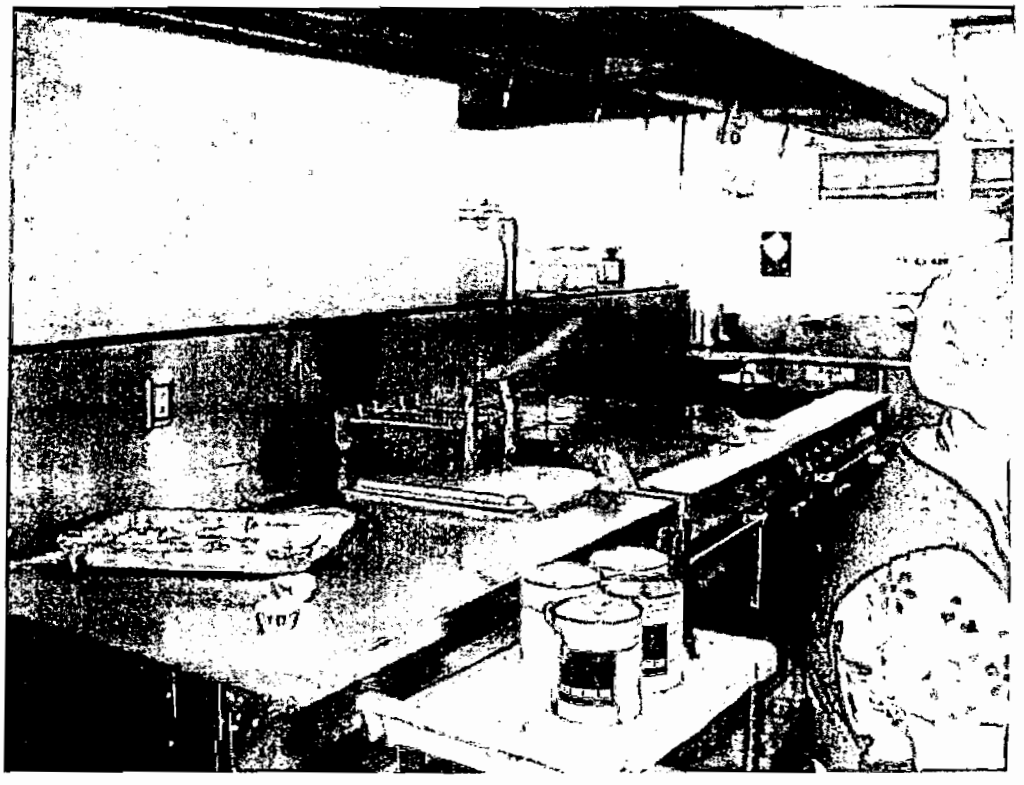
104. Coffeemaker in Shelter kitchen



105. Fryer and gas range in Shelter kitchen

00284



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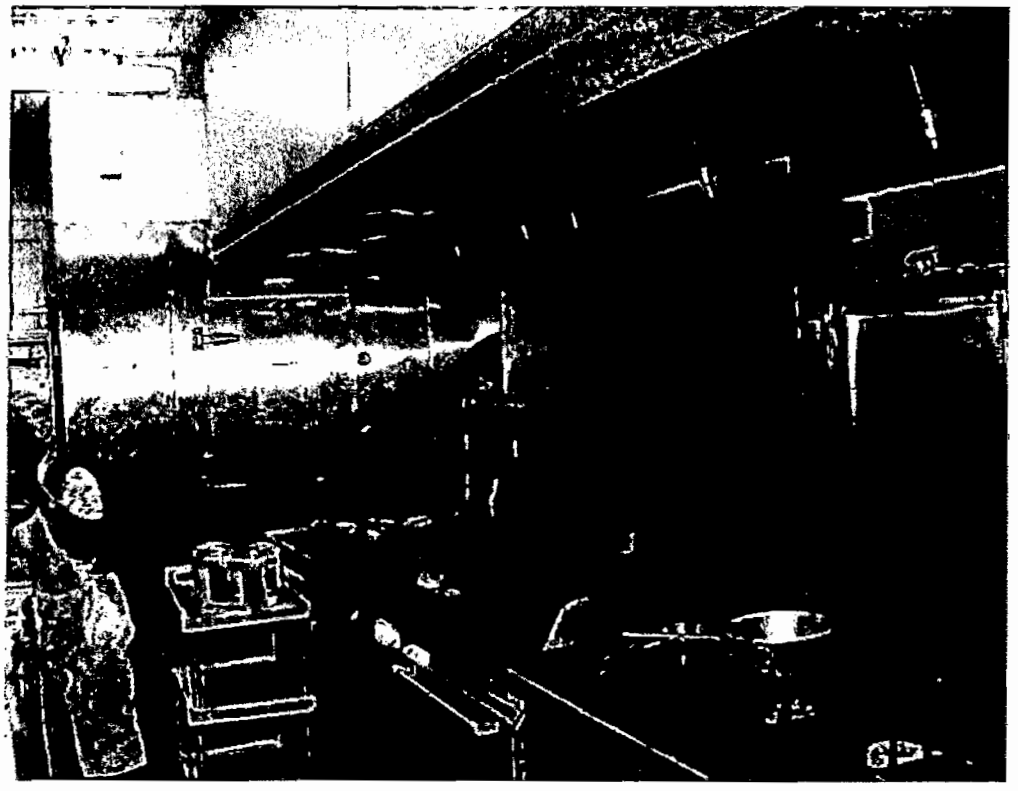
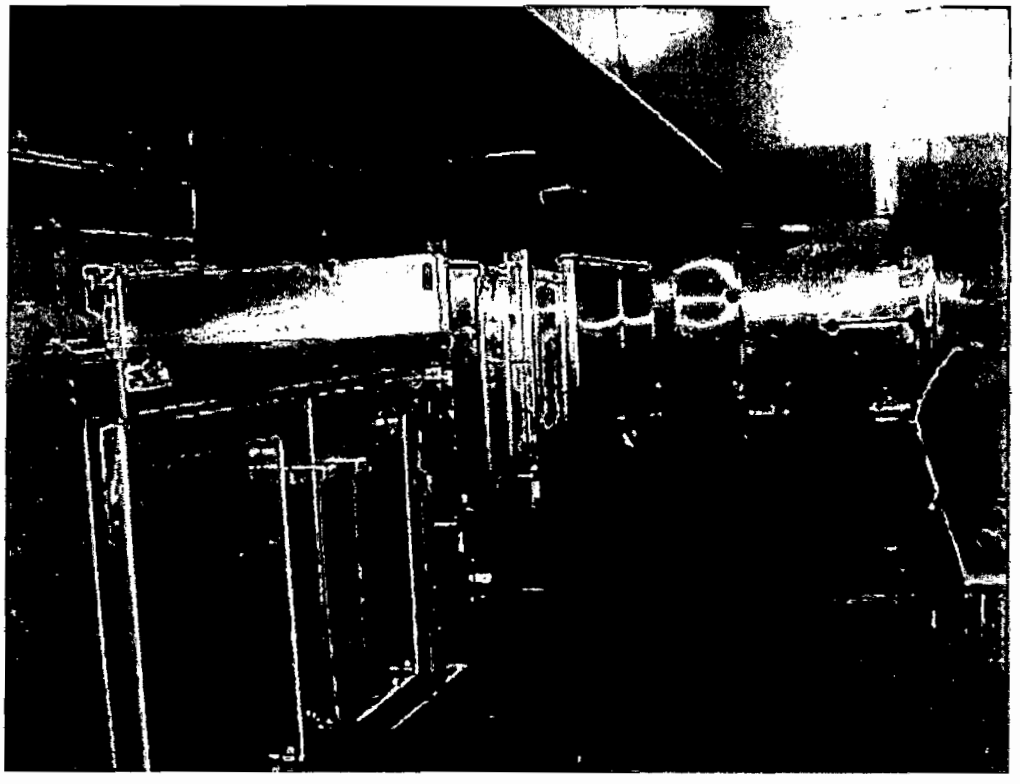


106. Range, fryer, and grease hood in Shelter kitchen



107. Convection oven and walk-in freezer in Shelter kitchen

00285



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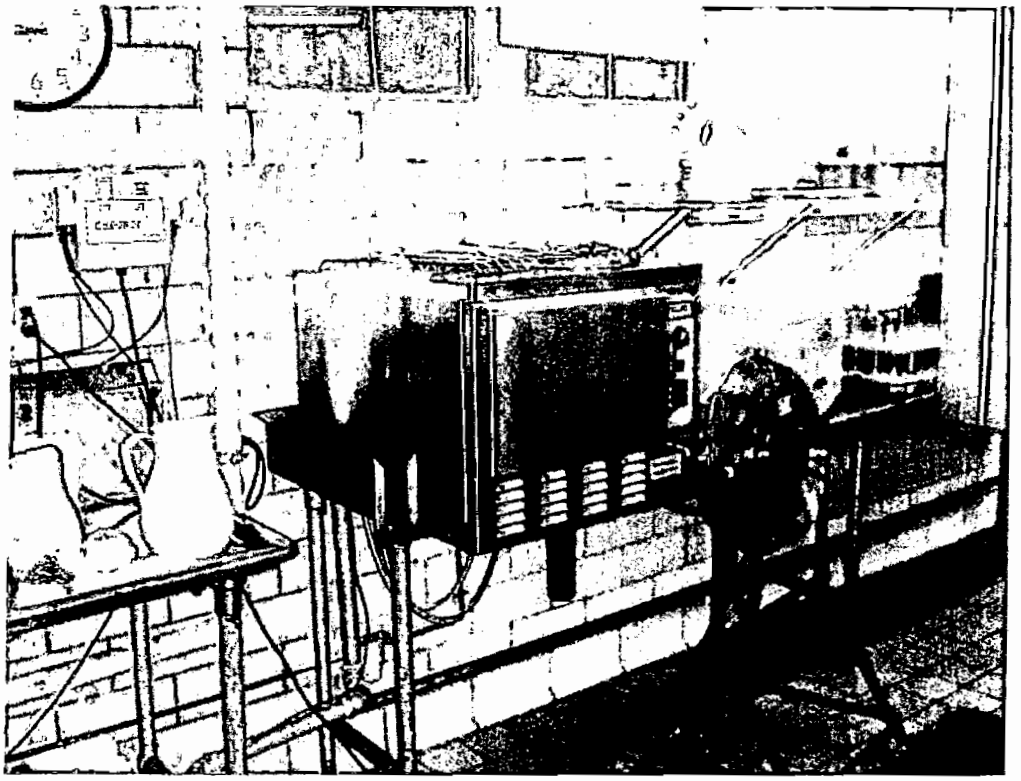
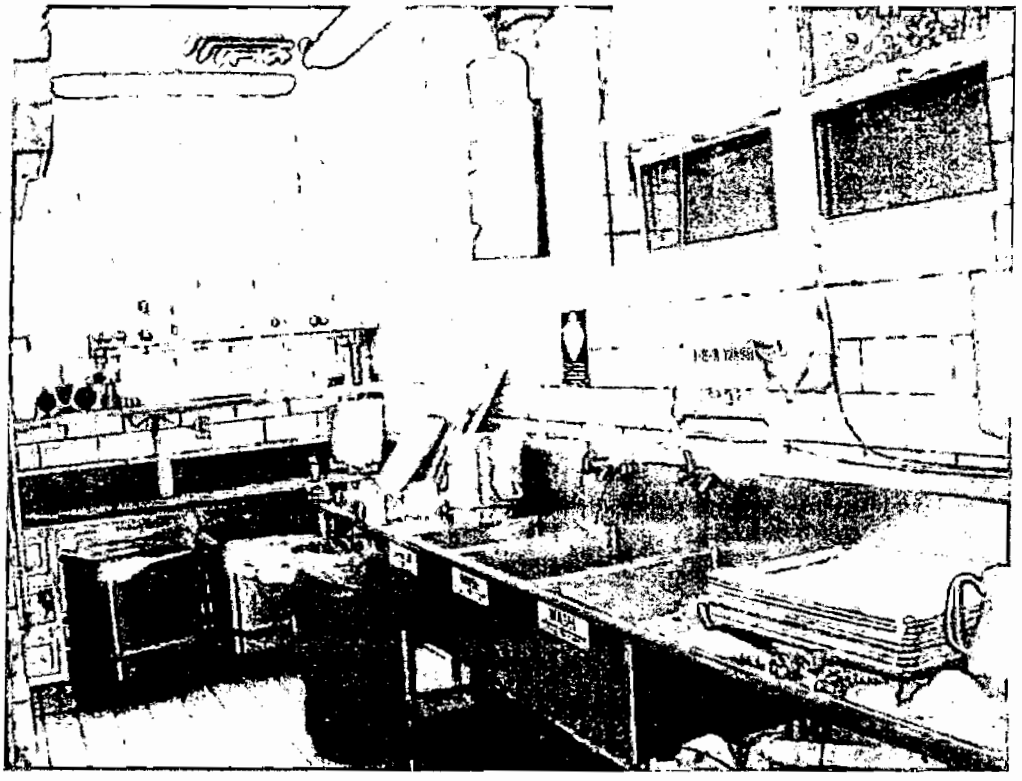


108. Convection oven in Shelter kitchen



109. Ansul fire protection system in Shelter kitchen

00286



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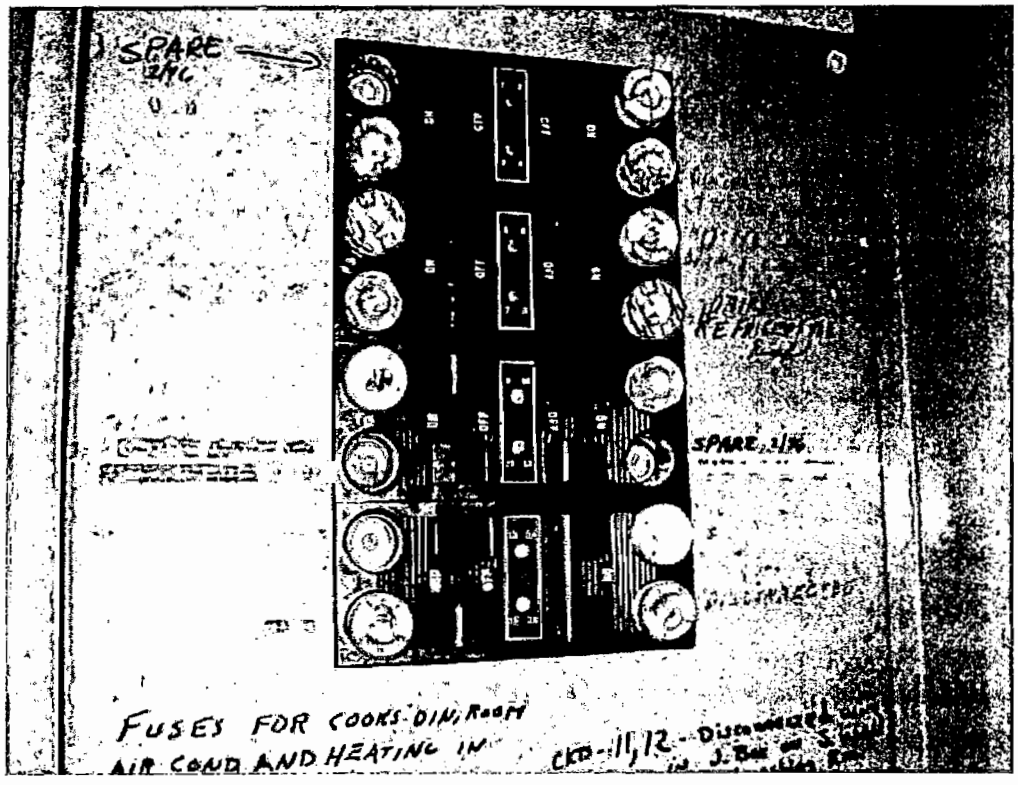
110. Thru-wall fan evacuates water vapor from Shelter kitchen dish room




111. Electrical panel for Kohl kitchen pre-dates the era of circuit breakers

00287



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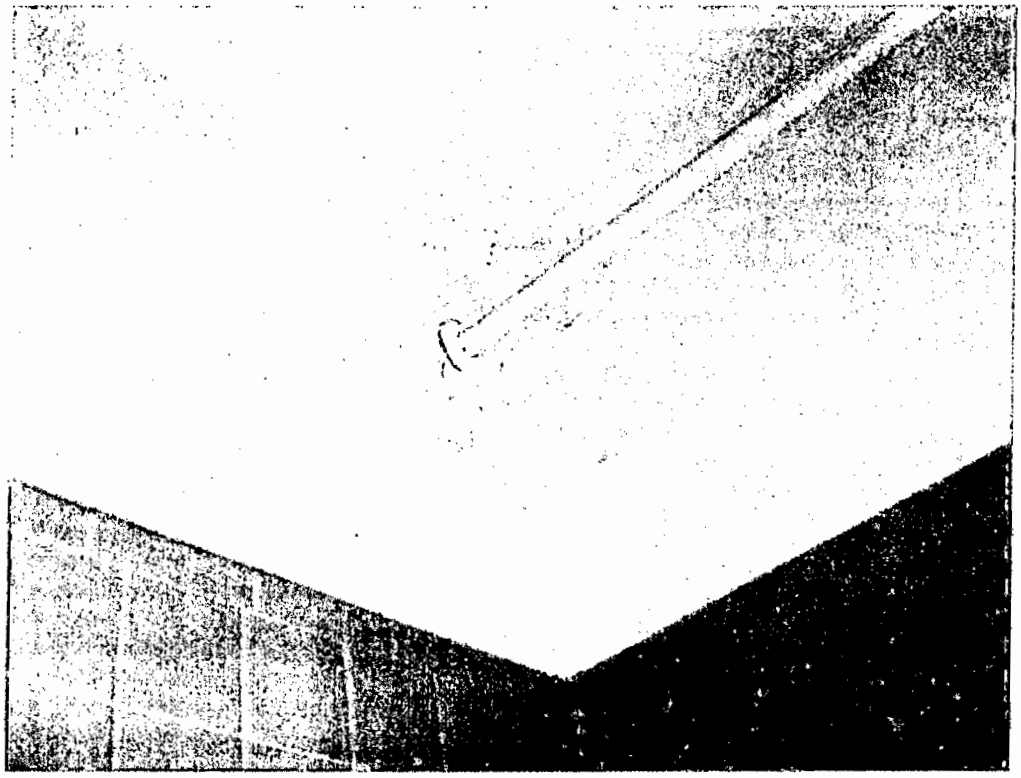
112. Shelter dining room contains seating for 44 residents



113. Roof leak is the likely cause of this peeling paint and efflorescence in shower in Ludwig Wing

00288

Attachment 25 - p.106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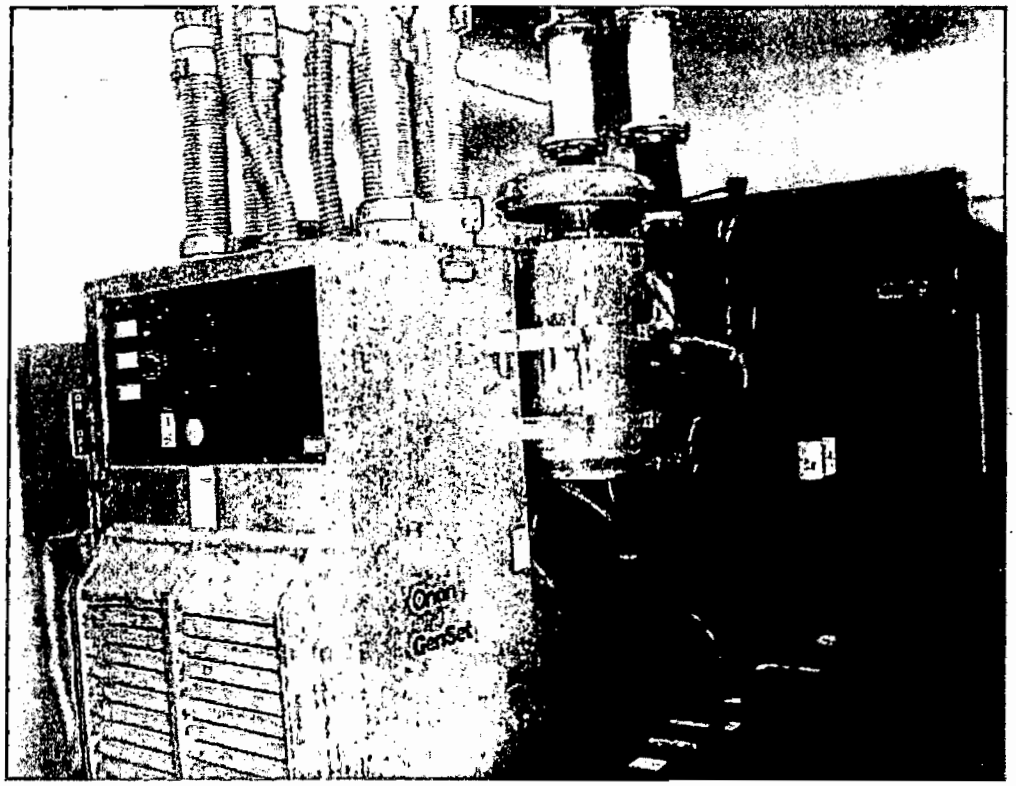
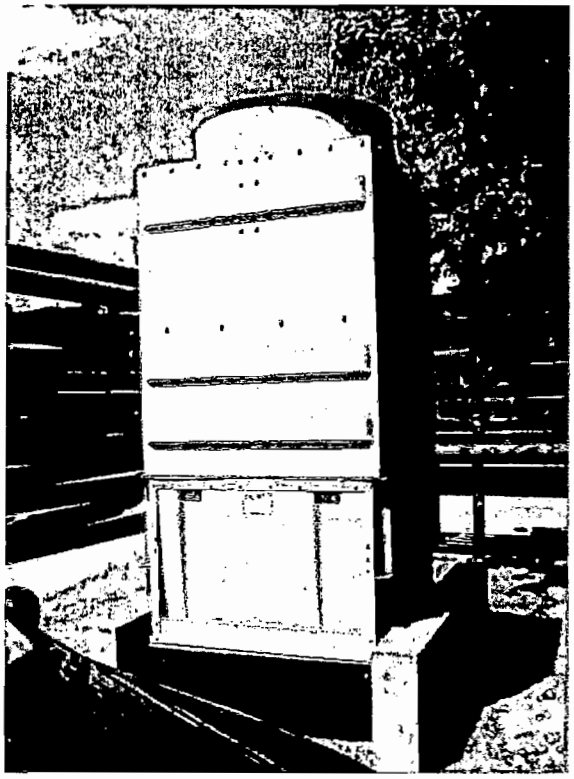



114. 600-KW emergency generator serves nursing facility



115. Single cell Evapco cooling tower serves Bartel Wing

00289



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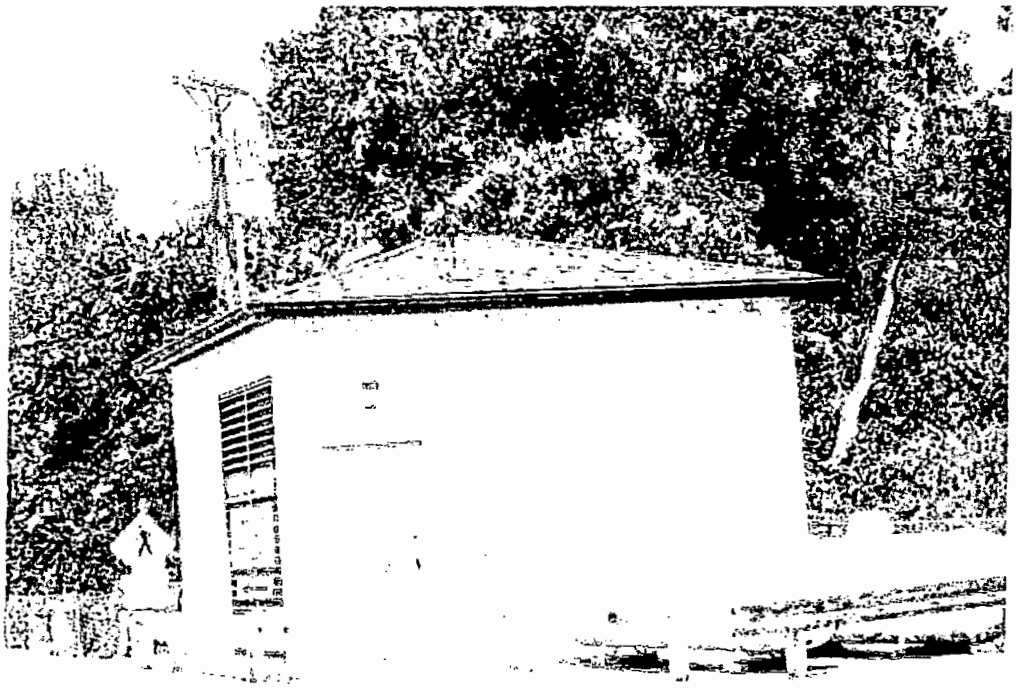
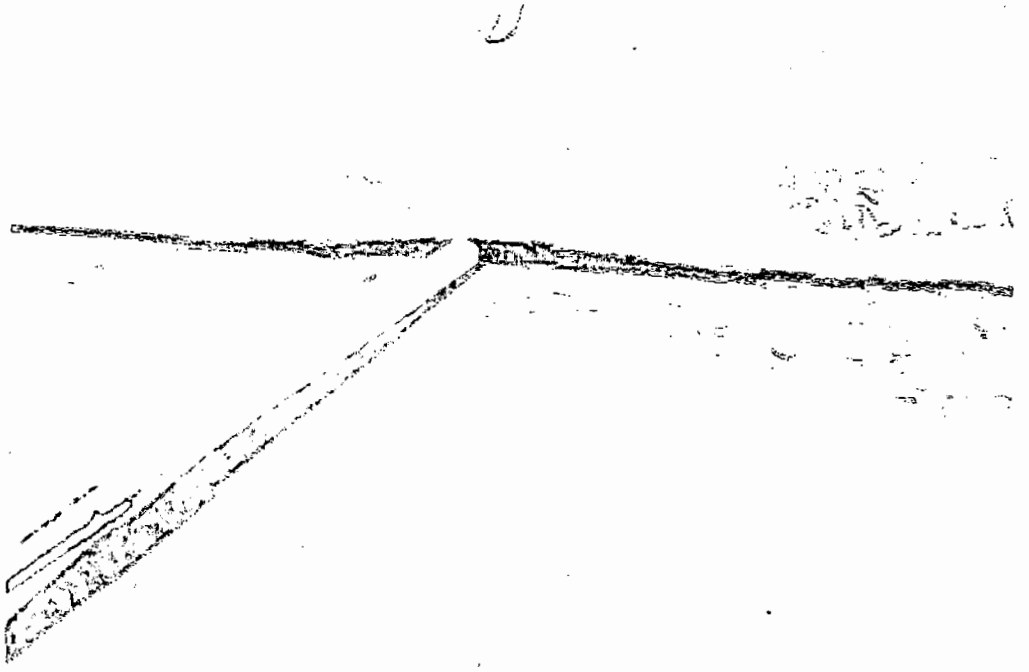


116. This concrete block structure houses generator for nursing building



117. Failed joint in EPDM membrane on roof of bridge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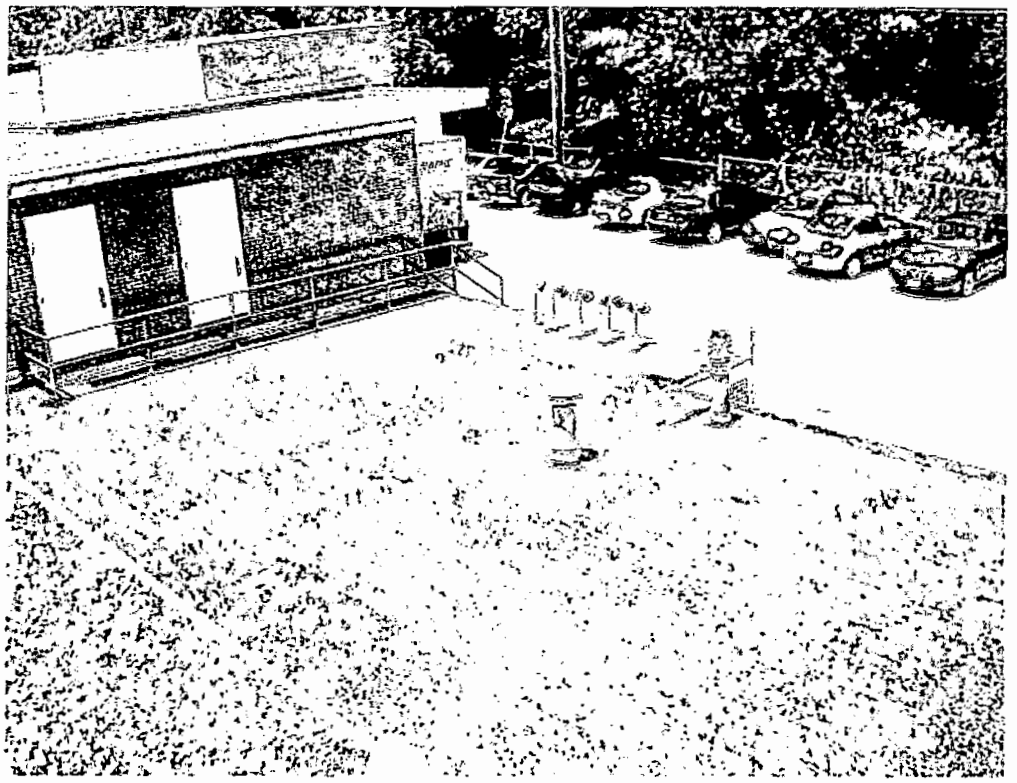
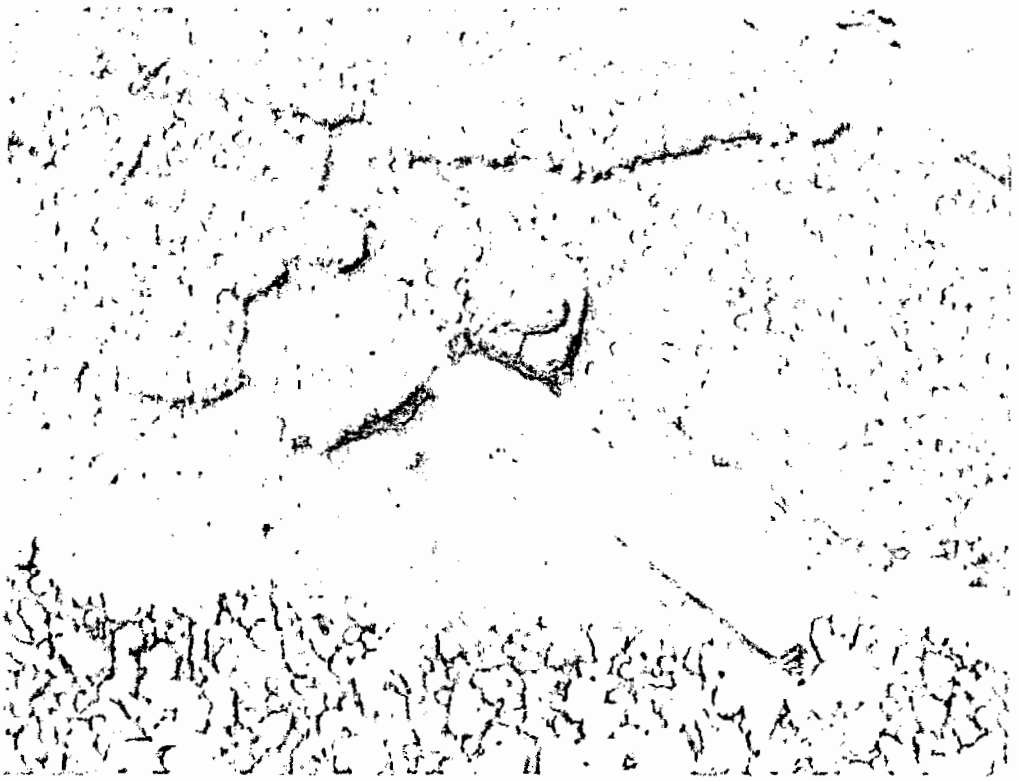


118. Dryer vents through roof of laundry room are rusting and need to be cleaned and painted



119. Expansion joint in roof between Bartel and Roediger has failed and needs to be repaired

00291

Attachment 25 - p.109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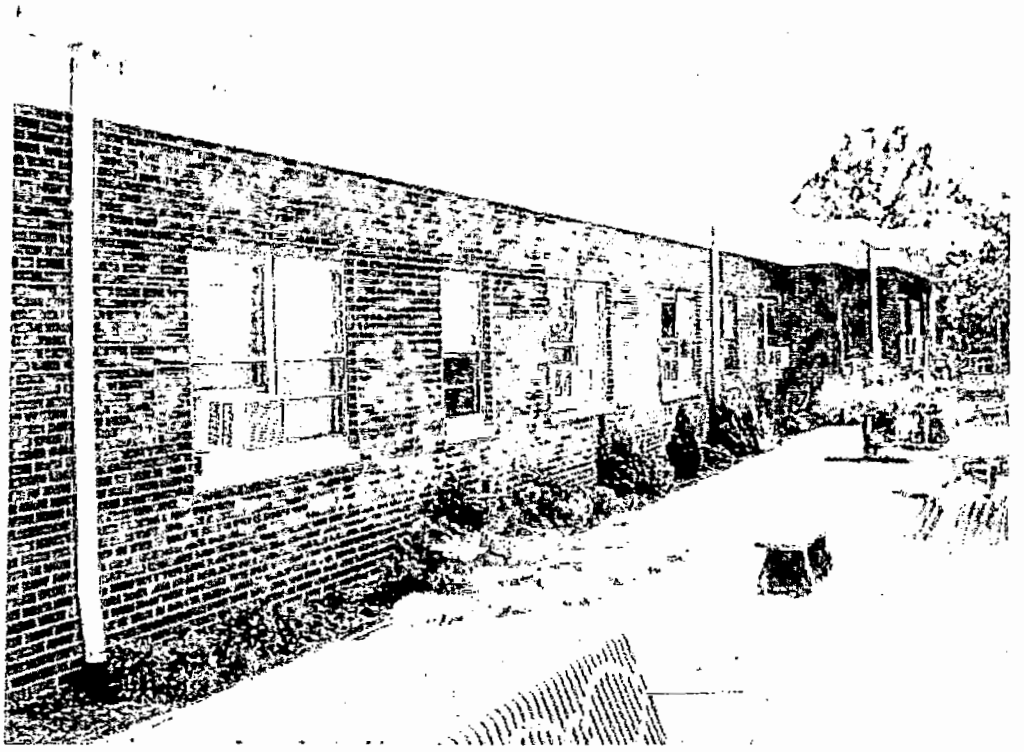

120. Window air conditioning units are utilized in Shelter Care at Ludwig Wing

122. Roof leak in Bartel Wing has damaged ceiling in clean work room

00292



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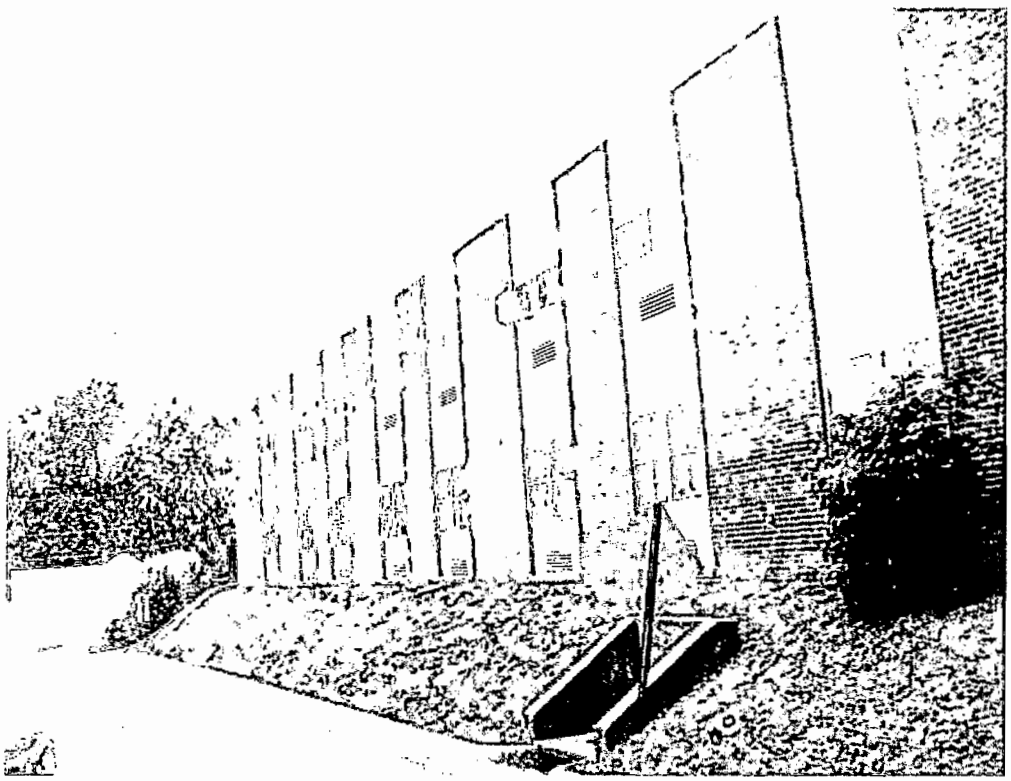

123. East wall of Roediger Wing

124. West elevation of Roediger

00293



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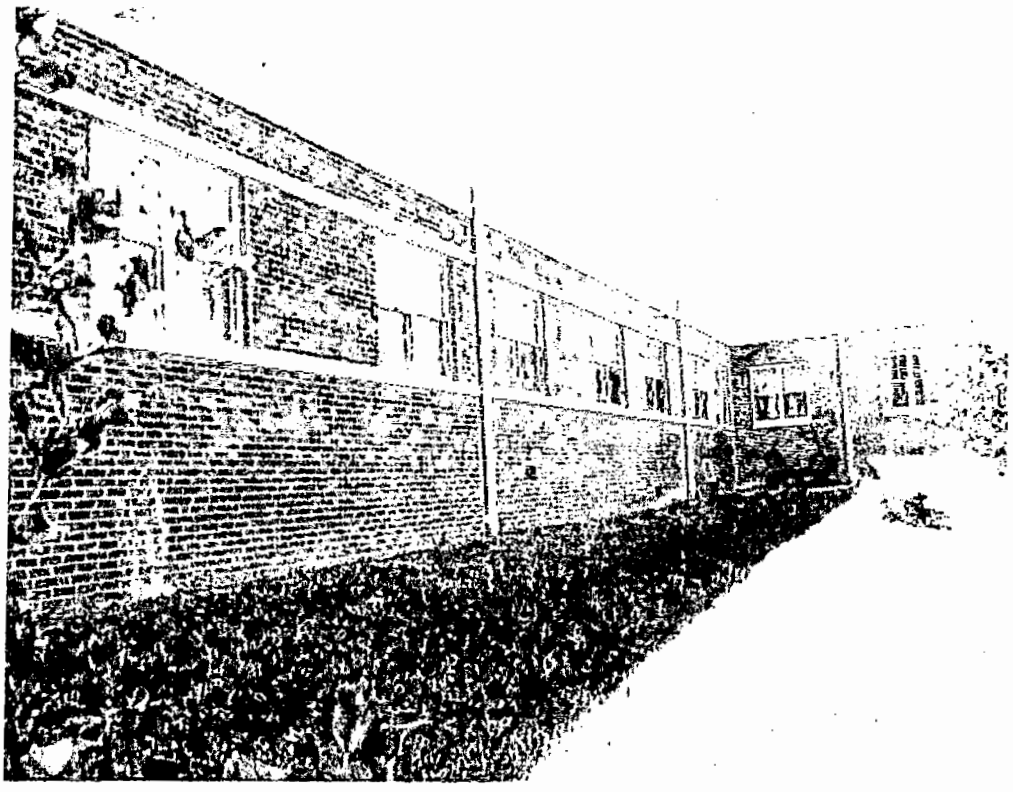
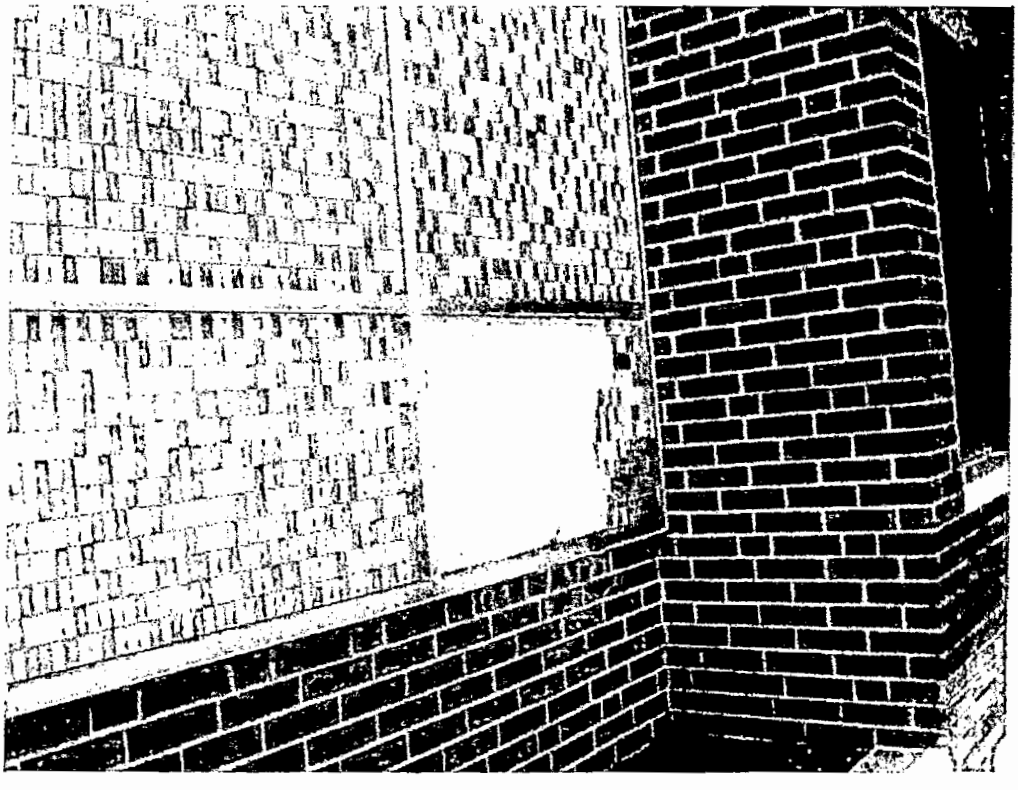


125. East elevation of Bartel Wing



126. Mosaic panels on south elevation of Bartel need to be repaired

00294



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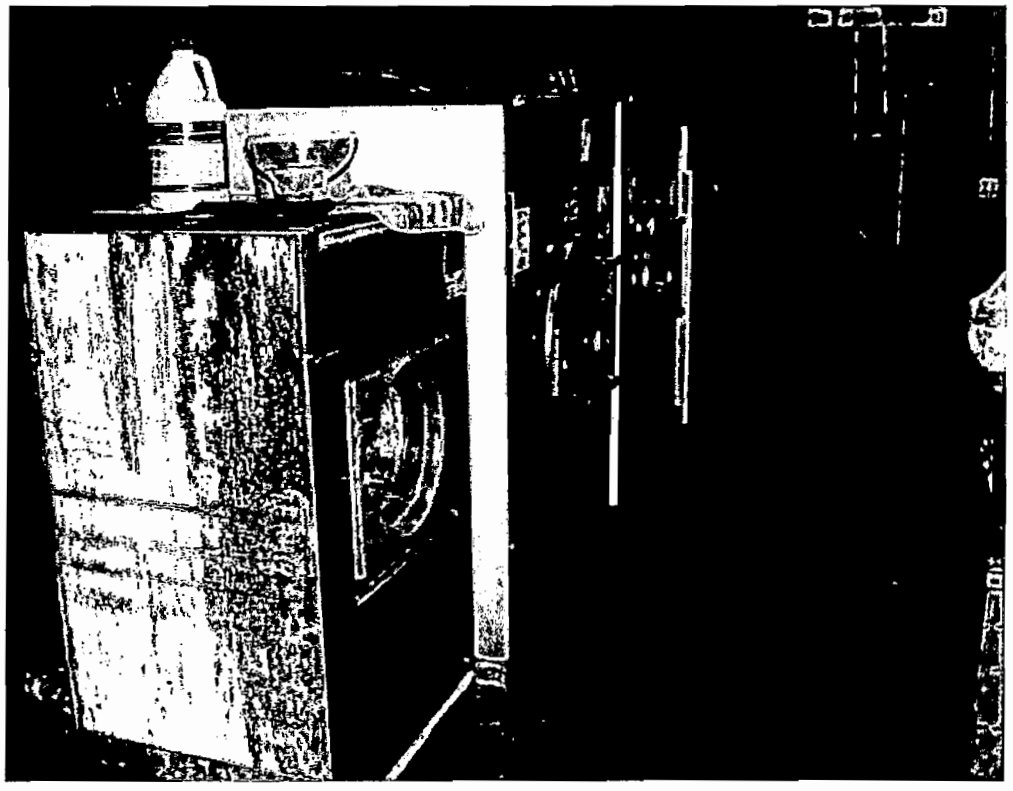
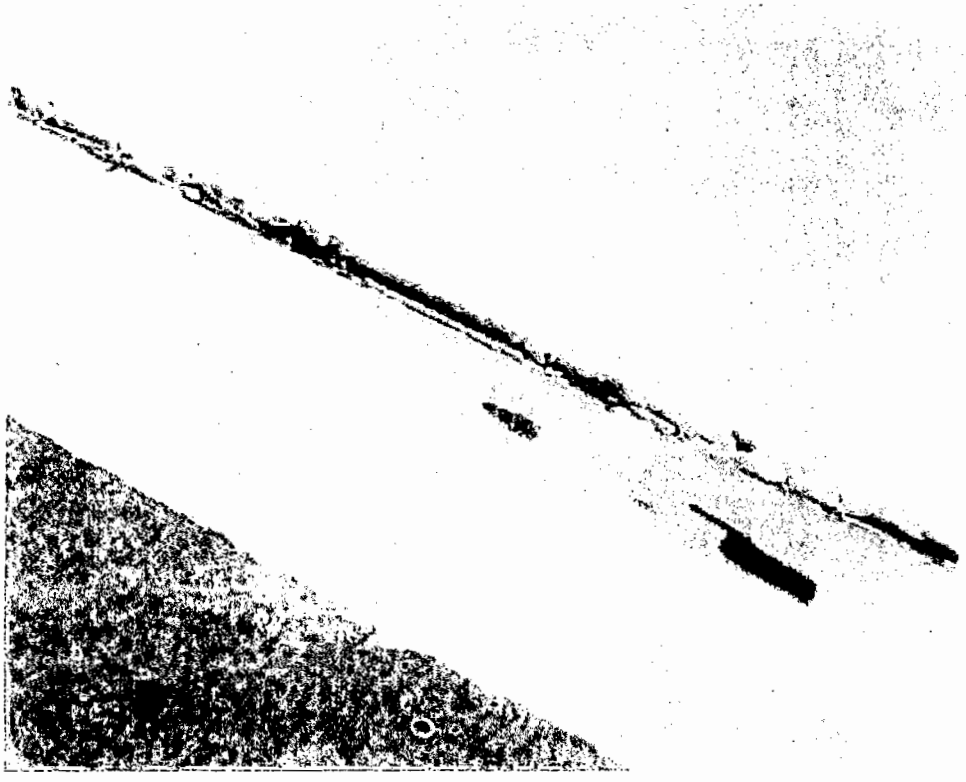


127. Four front-loading commercial washers are featured in basement level laundry



128. Hollow metal window frames and panels in exterior wall at physical therapy need to be cleaned free of rust and painted

00295

Attachment 25 - p.113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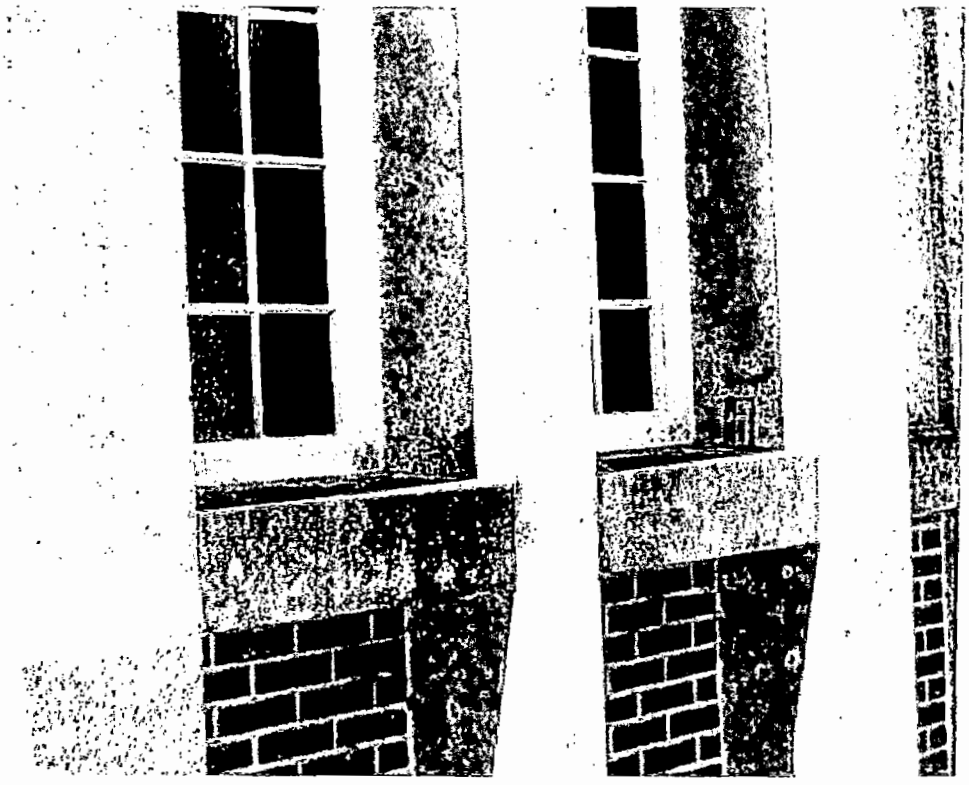
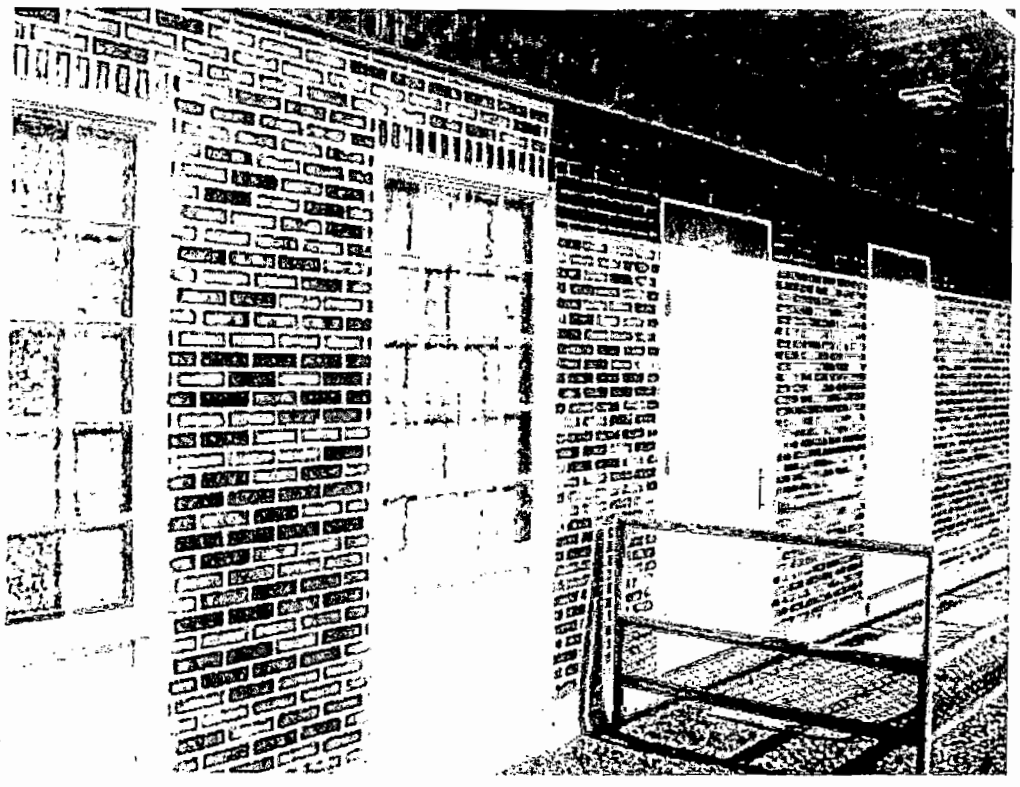


129. Architectural pre-cast stone at rear of chapel needs to be pressure-washed and sealed



130. Frames at stained glass windows and emergency exit doors at chapel need to be cleaned and painted

00296

Attachment 25 - p.114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131. Five commercial dryers are located in the basement laundry

132. Hot water pumps in Kohl basement. Pipe insulation likely contains asbestos

00297

Attachment 25 - p.115


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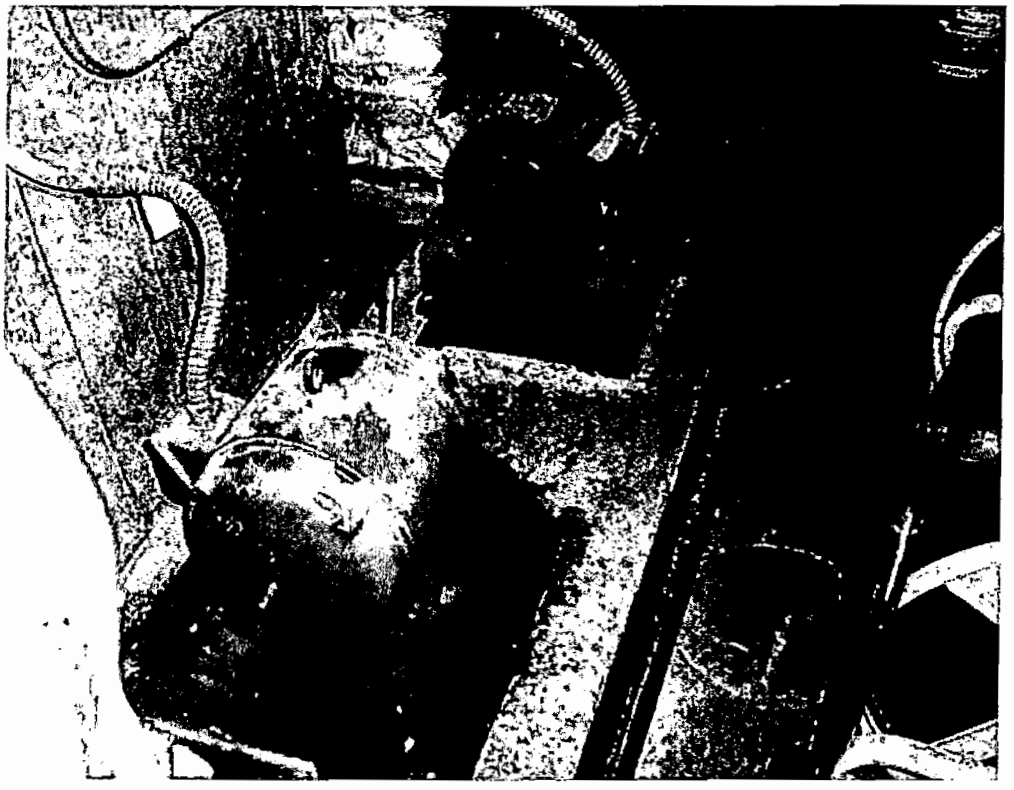
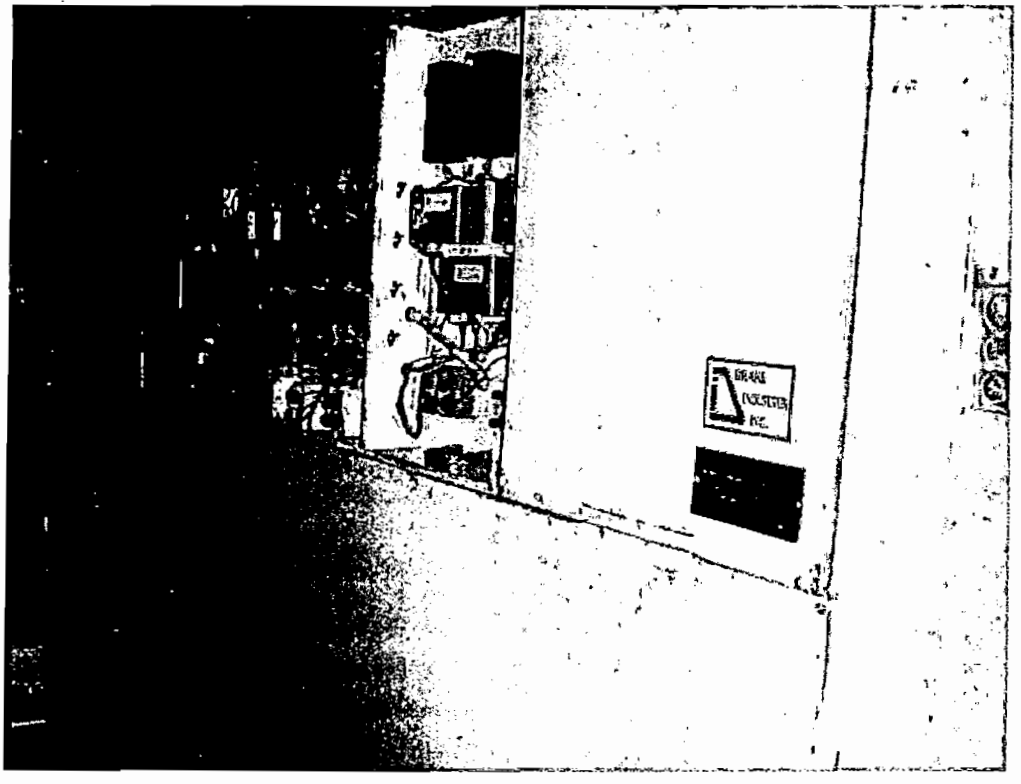


133. Chill water pumps in Kohl basement



134. Access panel needs to be re-installed on water-cooled chiller at Bartel Wing

00298

Attachment 25 - p.116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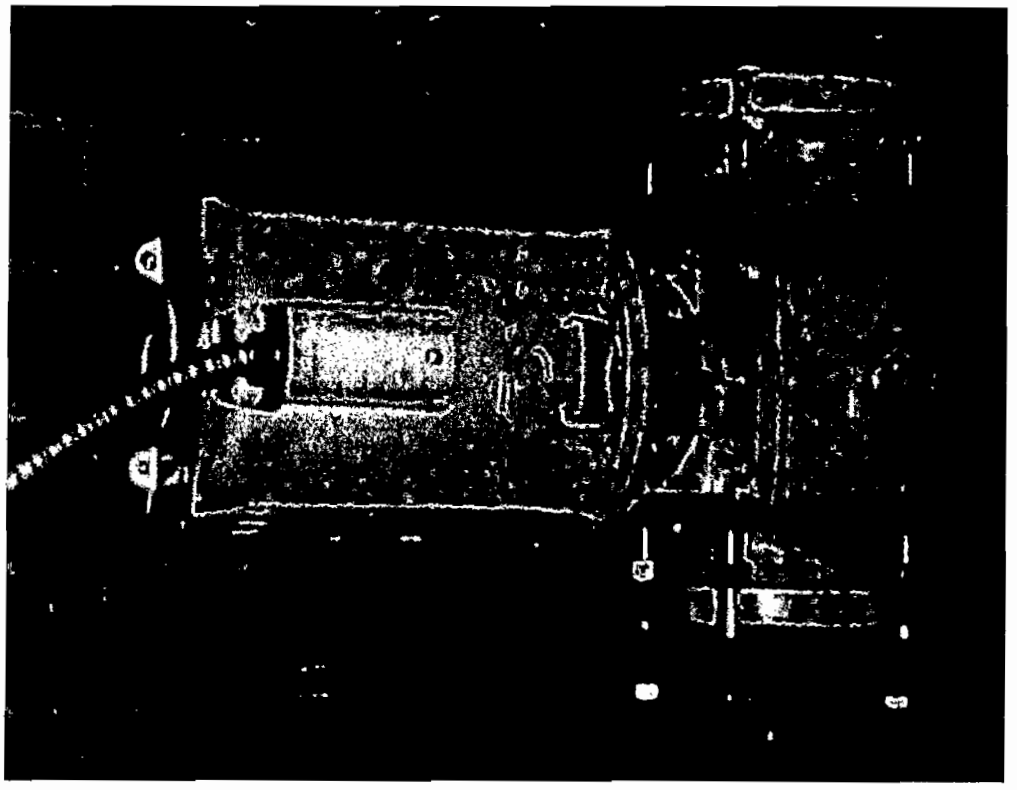
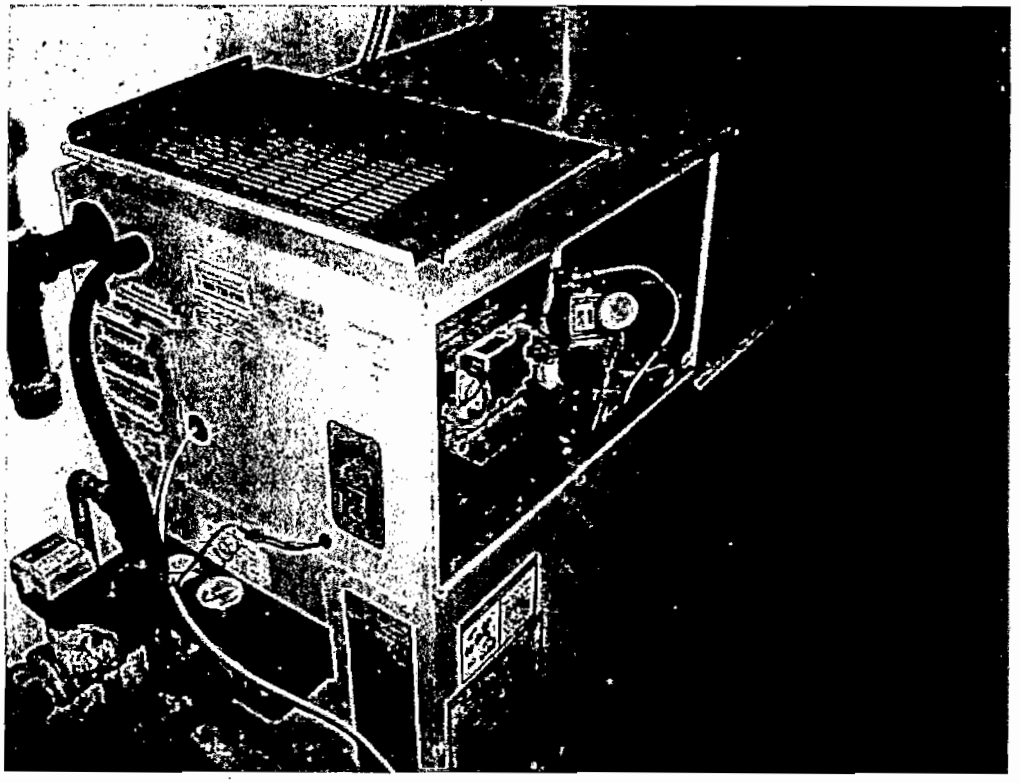


135. Domestic hot water circulating pump in basement of Shelter Care



136. New boiler for domestic hot water in basement of Shelter Care

00299



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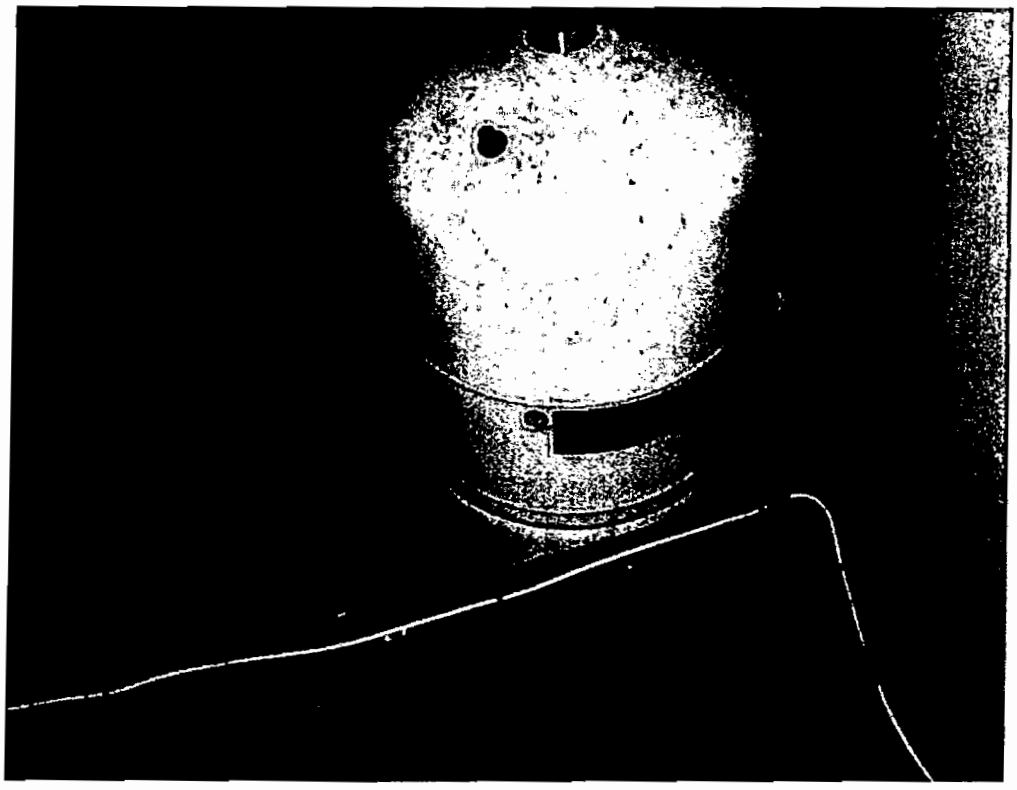

137. Domestic hot water expansion tank in basement of Shelter Care

138. Domestic hot water storage tank in basement of Shelter Care

00300



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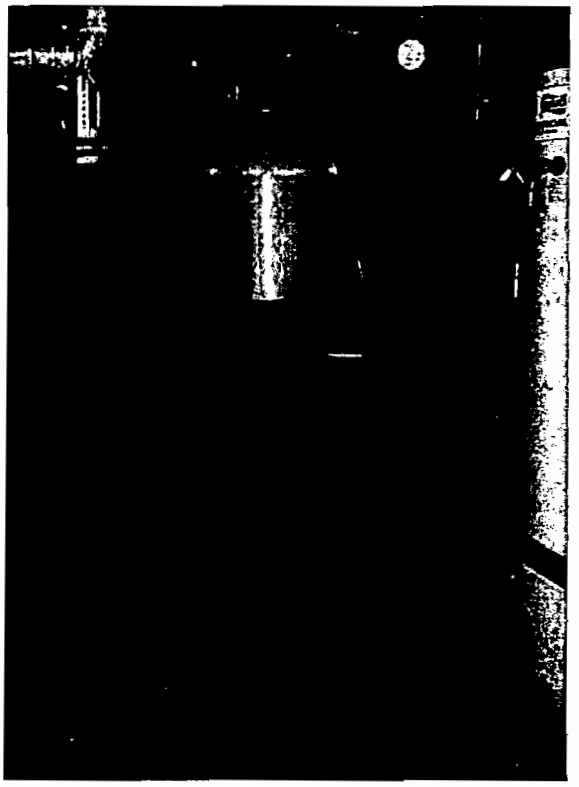
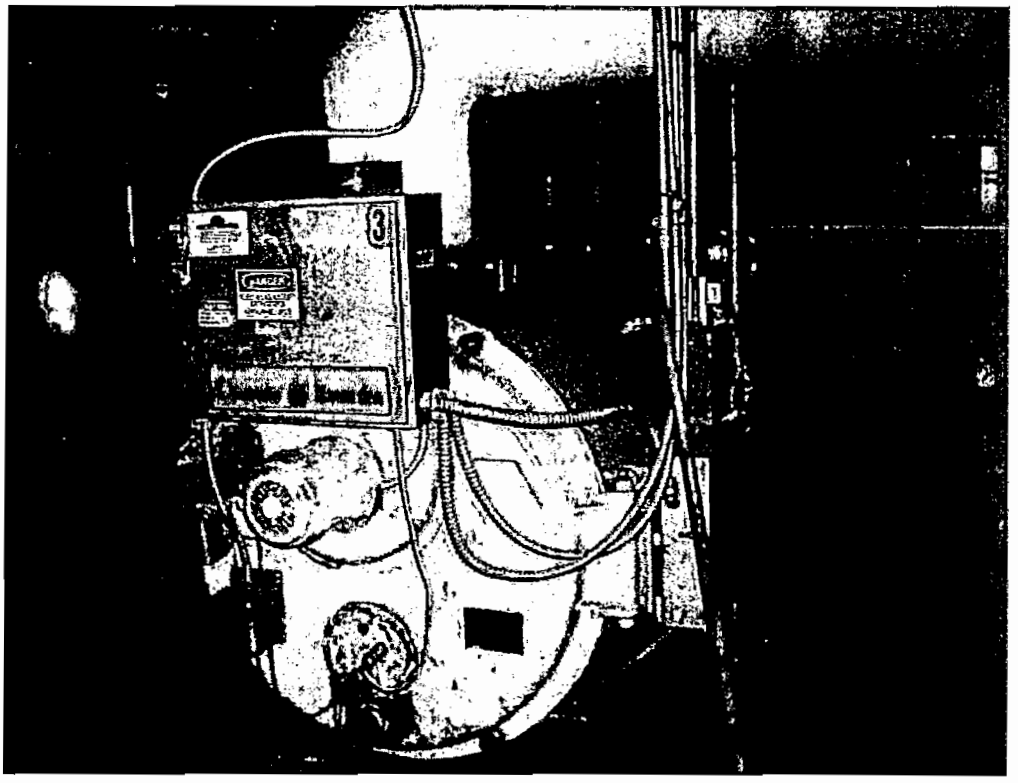


139. Domestic water softener in basement of Shelter Care



140. One of three dual fuel package boilers for wintertime water heating

00301



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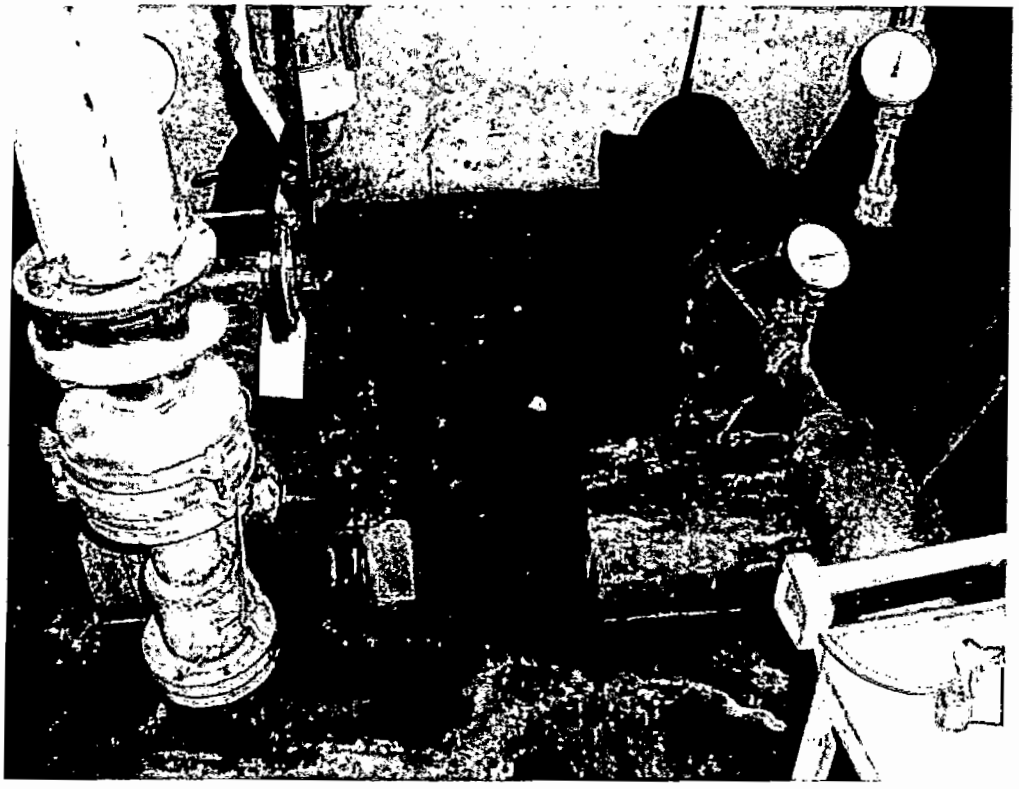
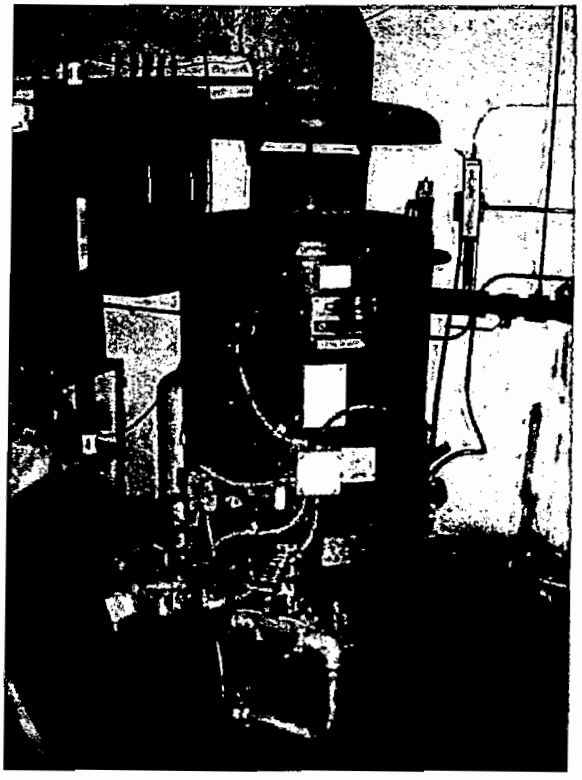


141. 1-1/2-hp hot water circulating pumps in basement of Shelter Care



142. This domestic water heater was installed in basement of Shelter Care in 1979

00302

Attachment 25 - p.120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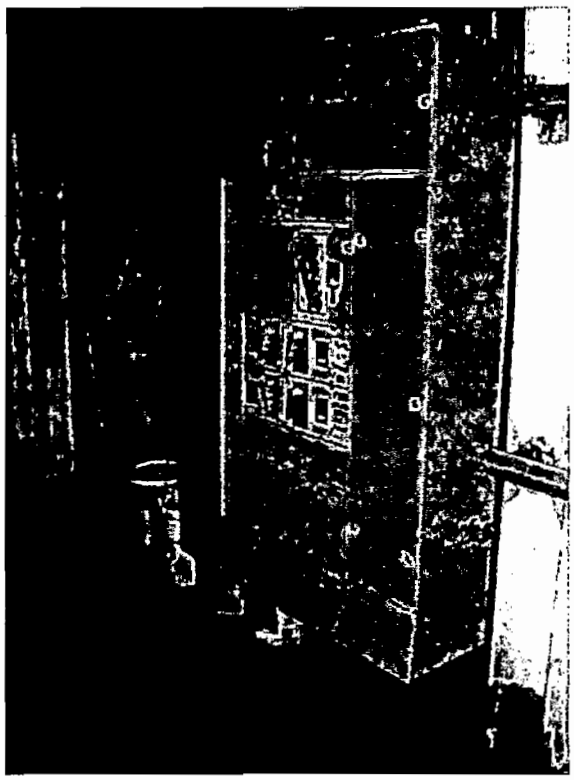
143. Pump on right has a replacement motor



144. This electrical panel was installed in basement of Shelter Care in 1978. It supplies power to boilers and fire alarm system

00303

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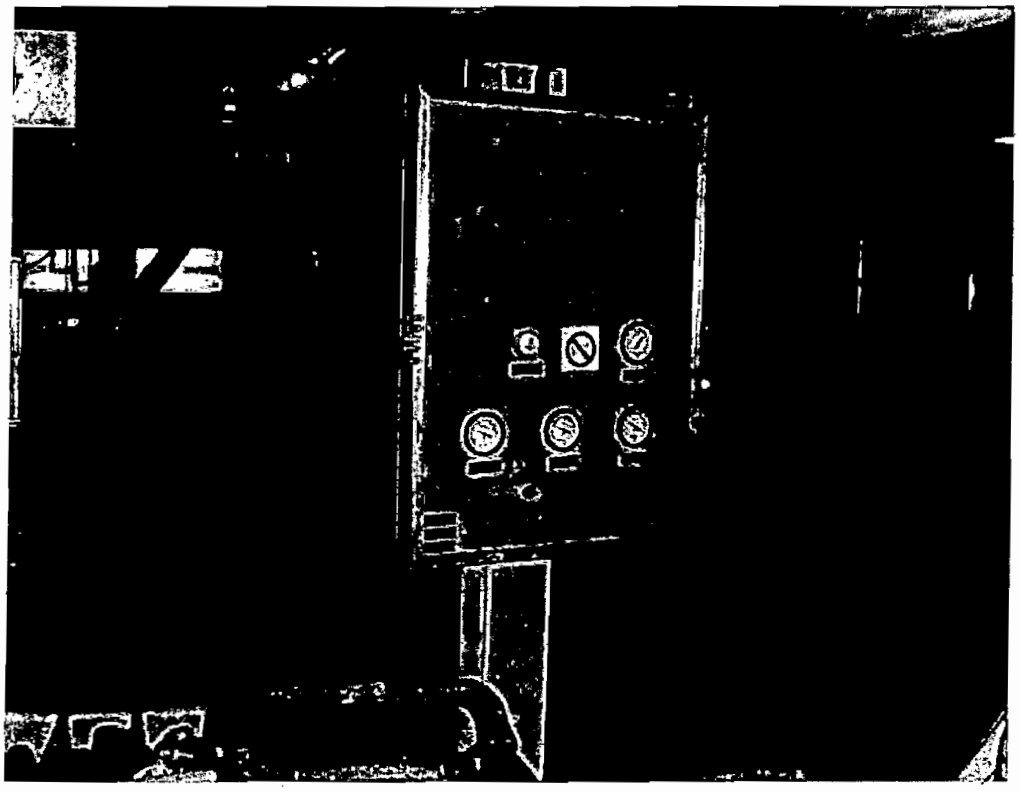

145. Technology has advanced several generations since these boiler and pump controls were installed in the basement of Shelter Care

146. 1600-amp 3-phase main switch in basement of Shelter Care

00304



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147. From left to right, packaged heating and cooling unit for Shelter Care dining room, makeup air unit (with electric heat) for Shelter kitchen, and packaged HVAC unit for kitchen

148. This air handling unit in basement of Shelter Wing supplies makeup air to mechanical room

00305

Attachment 25 - p.123


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Illinois Department of
PUBLIC
HEALTH

Pat Quinn, Governor
Damon T. Arnold, M.D., M.P.H., Director

525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.idph.state.il.us

February 7, 2011

OVERNIGHT MAIL
RETURN RECEIPT REQUESTED

Ms. Laura Northway, Administrator
St Paul's Home
1021 West E Street
Belleville, IL 62220

| | | |
|---|---|---|
| Reference: | Provider ID: | 146122 / 0013920 |
| | Cycle Date: | January 27, 2011 |
| | Survey Date: | January 27, 2011 |
| | Survey Type: | Health Annual Survey |
| | LSC Survey: | Under Separate Cover |

Dear Ms. Northway:

On January 27, 2011, an inspection was conducted at St Paul's Home by staff of the Illinois Department of Public Health to determine compliance with federal certification requirements for nursing homes participating in the Medicare/Medicaid programs. As a result of that inspection, the facility was determined to not be in "Substantial Compliance" with regulatory requirements as found in Title 42, Code of Federal Regulations. A *Statement of Deficiencies* is enclosed (See Enclosure #1). An explanation of the scope and severity assigned to each deficiency can be found on Enclosure #2.

The facility must submit a Plan of Correction (POC) for all deficiencies at the "B" level or higher. "A" deficiencies must be corrected, but do not require a written POC. All required POC's must be submitted to the Department within 10 days after receipt of the written "Statement of Deficiencies" (CMS Form 2567L). **The POC cannot be submitted on the CMS-2567. Only the first page of the CMS-2567 must be submitted with the signature of the facility's representative and the date. The POC itself should be on separate sheets of paper which are attached to the first page of the CMS-2567. Please do not use proper names or trademarks in the POC. The POC is not to be used to dispute a deficiency or to make comments about the survey process. Information disputing a deficiency may be provided through the IDR process on separate sheets of paper, and comments about the survey process may be provided on the Provider Feedback Survey.**

00306

Each POC ***must*** include:

- Corrective actions which will be accomplished for those residents found to have been affected by the deficient practice;
- How the facility will identify other residents having the potential to be affected by the same deficient practice;
- The measures the facility will take or systems the facility will alter to ensure that the problem will be corrected and will not recur. The facility must look at the existing system and determine if a change is necessary to correct the deficiency. If a system does not exist or if a revision to an existing system is necessary, then the facility must develop one.
- Quality Assurance Plans to monitor facility performance to ensure corrections are achieved and are permanent.
- Dates when corrective action will be completed. **(To avoid remedies for this survey cycle, all deficiencies must be corrected no later than February 26, 2011).**

***Failure to submit a POC which includes the above-listed components within 10 days following receipt of the written "Statement of Deficiencies" may result in imposition of remedies, effective as soon as notice requirements are met.***

Facilities with no deficiencies or deficiencies at the "A", "B" or "C" levels are considered to be in "Substantial Compliance" with the regulations and will continue to be certified. Facilities NOT in "Substantial Compliance", i.e., deficiencies at level "D" or above, may be subject to remedies, including:

- Denial of Payment for all ***new*** Medicare/Medicaid Admissions;
- Denial of Payment for ***all*** current Medicare/Medicaid Residents;
- Civil Money Penalties of up to $10,000.00 per day or per instance;
- Transfer of Residents;
- Transfer of Residents with facility closure;
- Termination of the provider agreement;
- Temporary Management of the facility
- State Monitoring of the facility;
- Directed Plan of Correction;
- Directed In-Service Training.

Those facilities that have not achieved "Substantial Compliance" within 3 months following the survey will be subject to mandatory denial of payment for all new program admissions and mandatory termination from the Medicare/Medicaid programs if "Substantial Compliance" is not achieved within six months following the survey.

As a result of the above-referenced survey, ***proposed*** remedies for this facility are the following:

- Directed Inservice Training

- Civil Money Penalty of $200.00 per day effective 01/27/2011.

00307

The facility will be allowed an "opportunity to correct" the cited deficiencies before remedies are actually imposed. If all deficiencies are found to be in "Substantial Compliance" at the first revisit after the opportunity to correct date, the Department will withdraw its proposal that remedies be imposed. If however upon revisit, "Substantial Compliance" with ALL regulations has not been achieved, the Department will impose or recommend to the federal Centers for Medicare and Medicaid Services (CMS) to impose the above-listed proposed remedies. The Department may also recommend or impose an increase or decrease in those proposed remedies based upon the results of the revisit. Generally, all imposed civil money penalties will be effective from the date of the original survey and will accrue until the date the facility achieves "Substantial Compliance" with the regulations or is terminated from the Medicare/Medicaid programs. Should CMS or the Department determine that termination or any other remedy is warranted (based on a subsequent survey), you will be provided with a separate formal notification of that determination.

Before a revisit will be scheduled, the facility must provide to the Department an acceptable POC for ALL deficiencies, except level "A" deficiencies. An acceptable POC will also serve as the facility's "Allegation of Compliance" thereby signifying that the facility attests that it will be in "Substantial Compliance" with all federal certification requirements by the date stated in the above paragraph. The Department will presume that the facility will be in "Substantial Compliance" based upon the acceptable POC and a revisit will be conducted to verify compliance.

The facility may request an "Informal Dispute Resolution" (See Enclosure #3) to challenge any deficiency that renders the facility not in substantial compliance ("D" or above). ***The Informal Dispute Resolution process will not delay the effective date of any enforcement action!*** If the facility requests an Informal Dispute Resolution without submitting an acceptable POC and the Department's decision, as a result of the dispute resolution process does not result in the deletion of the deficiency, please be advised that the Department will then proceed to impose or recommend imposition of the remedies.

Please submit all documents or other materials relating to this survey to:

Illinois Department of Public Health
Division of Long-Term Care Quality Assurance
525 West Jefferson Street, 5th Floor
Springfield, Illinois 62761-0001
ATTN: Ted Zelinski

If you have any questions concerning this notice, please contact my staff at the address above or telephone (217) 782-5180. You may also telephone the Department's TTY number for the hearing impaired at 1-800-547-0466.

Sincerely,

Richard L. Dees

Richard L. Dees, Chief
Bureau of Long-Term Care

Encls:

cc: Illinois Department of Healthcare & Family Services
Illinois Department on Aging
Guardianship & Advocacy Commission
Division of LTC-FO
File 2
a5/DA

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 146122 | A. BUILDING _____ B. WING _____ | 01/27/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE |
|---|---|---|---|---|
| F 000 | INITIAL COMMENTS<br><br>Annual Licensure and Certification Survey | F 000 | | |
| F 157 SS=D | 483.10(b)(11) NOTIFY OF CHANGES (INJURY/DECLINE/ROOM, ETC)<br><br>A facility must immediately inform the resident; consult with the resident's physician; and if known, notify the resident's legal representative or an interested family member when there is an accident involving the resident which results in injury and has the potential for requiring physician intervention; a significant change in the resident's physical, mental, or psychosocial status (i.e., a deterioration in health, mental, or psychosocial status in either life threatening conditions or clinical complications); a need to alter treatment significantly (i.e., a need to discontinue an existing form of treatment due to adverse consequences, or to commence a new form of treatment); or a decision to transfer or discharge the resident from the facility as specified in §483.12(a).<br><br>The facility must also promptly notify the resident and, if known, the resident's legal representative or interested family member when there is a change in room or roommate assignment as specified in §483.15(e)(2); or a change in resident rights under Federal or State law or regulations as specified in paragraph (b)(1) of this section.<br><br>The facility must record and periodically update the address and phone number of the resident's legal representative or interested family member.<br><br>This REQUIREMENT is not met as evidenced by: | F 157 | | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
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| | 146122 | A. BUILDING _____ B. WING _____ | 01/27/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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|---|---|---|---|---|
| F 157 | Continued From page 1<br>Based on observation, interview and record review, the facility failed to notify the physician of significant changes in condition for three (R2,R3, and R15) of 20 sampled residents.<br><br>Findings include:<br><br>1. R15's physician's order sheet, dated January 2011, noted she had a partial diagnosis of Congestive Heart Failure. Her physician's order, dated 12/16/10, noted she should receive Lasix (a diuretic), 40 milligrams (mg) daily.<br>R15's nurse's notes dated 1/13 through 1/16/11, noted she had edema in her lower extremities.<br>The facility's December 2010 Weekly Weight Record noted R15 weighed 146.8 pounds on 12/27/10.<br>The facility's January 2011 Weekly Weight Record noted she weighed 154.2 pounds on 1/3/11. This was a five pound weight increase in one week. There was no documentation in R15's medical record indicating R15's physician had been notified of her significant weight gain.<br>On 1/25/11, at 8:45 AM, E1, Administrator, confirmed R15's physician had not been notified of R15's significant weight gain.<br><br>2. R3 was admitted to the facility on 6/2/10 with diagnoses, in part, of dementia, urinary tract infection, history of falls, history of pressure sore and orthostatic hypotension. R3 has a physician order for no added salt diet with supercereal at breakfast and house supplement 60 milliliters 4 times per day. R3's weight was 119 pounds on admission in June, 2010. R3's weight decreased to 112 pounds in Sept., 2010; 107 in November, 2010-a 10% weight loss in less than 6 months; 101 pounds in December, 2010 and was 101.5 | F 157 | | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 146122 | A. BUILDING _____ B. WING _____ | 01/27/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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|---|---|---|---|---|
| F 157 | Continued From page 2 | F 157 | | |

pounds in January, 2011. From June until December this is a 15.2% significant weight loss in a 6 month period.

The "Nutritional Progress Record" dated 11/4/10 by E23, Registered Dietitian, documented the weight for November at 107 pounds. The 10% significant weight loss is not identified. The note states "No new dietary prob (problem) noted, no SBD (skin breakdown). Noted wt (weight) stable past month." There were no further dietary recommendations.

On 12/20/10 E23 noted R3's weight at 101 pounds and a stage 2 pressure sore on the coccyx. The note states "Noted wt (weight) (decreased), slowed since Oct." R3's weight had decreased from 108 pounds in October to 101 pounds in December. R3's weight had decreased from 108 pounds in October to 101 pounds in December. There were no new recommendations by the dietitian. The significant weight loss was not identified.

E2, Director of Nursing, stated on 1/25/11 that they would have filled out a telephone order for the physician regarding the weight loss. E2 was unsure if the physician had been notified of the significant weight loss and could not provide any documentation. Review of the nurses notes, Medication Administration Record and telephone orders did not document any notification of the physician.

Surveyor: Jackson, Lynn

3. On 1/18/11, at 3:40 PM, a large purple and red bruise was noted to R2's upper chest. On 1/20/11, at 9:50 AM, two large red and purple bruises were noted to R2's upper chest. When asked, E12, Licensed Practical Nurse, (LPN), stated, "Actually that bruise has been there. It's

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| | 146122 | A. BUILDING _____ B. WING _____ | 01/27/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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|---|---|---|---|---|
| F 157 | Continued From page 3<br>not new."<br>On 1/18/11, at 10:35 AM, E15, CNA stated, "She (R2) bruises so easily. You have to be real careful with her. Her skin tears." A large dark purple, unstageable pressure ulcer, the size of a quarter, was noted to R2's left heel. E16 stated, "I knew the sore to R2's left heel was there."<br>On 1/18/11, 1/19/11 and 1/20/11, a review of the R2's Nurses Notes for January 2011 show the last documentation to be on 1/16/10. No documentation of the bruises to R2's upper chest, or the deep tissue, unstageable pressure ulcer to R2's left heel are noted in the clinical record or physician's orders.<br>On 1/21/11, at 9:10 AM, E3, Care Plan Nurse reported Z1, Hospice Physician, was informed of the bruising and area to R2's left heel the evening of 1/20/11, after these issues were brought to their attention.<br>The Nurses Notes, dated 1/21/11, at 6:29 PM, confirms Z4, R2's primary physician was notified of the area to her left heel and the bruising to her sternum. A new physician's order was received for skin prep to be applied to the left heel every shift. | F 157 | | |
| F 221 SS=D | 483.13(a) RIGHT TO BE FREE FROM PHYSICAL RESTRAINTS<br><br>The resident has the right to be free from any physical restraints imposed for purposes of discipline or convenience, and not required to treat the resident's medical symptoms.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, record review, and interview; the facility failed to remove lap cushion restraints during mealtimes for two sampled | F 221 | | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 146122 | A. BUILDING _____ B. WING _____ | 01/27/2011 |

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|---|---|
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|---|---|---|---|---|
| F 221 | Continued From page 4<br>residents (R11, R12) and one (R21) off-sample resident of the ten residents using lap cushion restraints in the building.<br><br>Findings include:<br><br>1. On 1/18/11 at 12:05 PM, R12 was seated in the Dining Room in her wheelchair and a lap cushion restraint. The wheelchair was pulled up to the table. R12's lap cushion restraint remained in place until 12:25 PM, when E13, Certified Nursing Assistant (CNA), removed the lap cushion stating, "That's not supposed to be on during the meal."<br>On 1/19/11 at 8:40 AM, R12 was seated in the Dining Room in her wheelchair. R12's lap cushion restraint remained in place on her wheelchair through out the breakfast meal.<br>On 1/19/11 from 12:05 PM, R12 was wheeled into the Dining Room for lunch, placed at the Dining Room table. Her lap cushion restraint remained in place during the lunch meal.<br>R12's Physician Order Sheet dated 12/31/10 stated, "Lap (cushion restraint) as needed in w/c (wheelchair).<br>R12's current chart had a blank Restraint/Adaptive Device Evaluation in the assessment section. On 1/19/11, E3, MDS/Care Plan Nurse, presented a copy of the completed restraint assessment, stating the form had been pulled and placed into R12's purged records. The Physical Restraint Informed Consent is not signed.<br>During a meeting with facility staff on 1/21/11 at 9:10 AM, E1, Administrator, verified that the lap cushion restraints were to be removed during meals. E1 stated staff was being inserviced to remove all restraints during the meal. | F 221 | | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
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| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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|---|---|---|---|---|
| F 221 | Continued From page 5<br>2. On 1/19/11 from 8:45 AM until 9:18 AM, R21 was seated in the Dining Room, being fed by E8, CNA. R21's lap cushion restraint remained on throughout the meal.<br>On 1/19/11 from 11:45 AM until 1:00 PM, R21 was seated in the Dining Room for lunch. R21's lap cushion restraint remained on through out the lunch meal.<br><br>3. On 1/18/11 from 12:05 PM until 1:15 PM, R11 was seated in the Dining Room, being fed by E14, CNA. R11's lap cushion restraint remained on through out the lunch meal. | F 221 | | |
| F 280 SS=E | 483.20(d)(3), 483.10(k)(2) RIGHT TO PARTICIPATE PLANNING CARE-REVISE CP<br><br>The resident has the right, unless adjudged incompetent or otherwise found to be incapacitated under the laws of the State, to participate in planning care and treatment or changes in care and treatment.<br><br>A comprehensive care plan must be developed within 7 days after the completion of the comprehensive assessment; prepared by an interdisciplinary team, that includes the attending physician, a registered nurse with responsibility for the resident, and other appropriate staff in disciplines as determined by the resident's needs, and, to the extent practicable, the participation of the resident, the resident's family or the resident's legal representative; and periodically reviewed and revised by a team of qualified persons after each assessment.<br><br>This REQUIREMENT is not met as evidenced | F 280 | | |

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| | 146122 | A. BUILDING _____ B. WING _____ | 01/27/2011 |

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| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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| F 280 | Continued From page 6<br>by:<br>Based on observation, record review, and interview; the facility failed to revise care plans to address changes in medical status and current needs for six (R2, R3, R6, R12, R16, R15) of twenty residents on sample.<br><br>Findings include:<br><br>1. On 1/18/11 at 10:55 AM, R12 was observed sitting in her wheelchair in the Dining Room. R12 had a lap cushion restraint on the wheelchair. Her feet and lower legs were very edematous, the right leg more than the left leg. Her feet were swollen.<br>At 11:25 AM, E13, Certified Nursing Assistant (CNA), rolled R12 in her wheelchair to her room. E13 assisted R12 to stand, placed her on the toilet. R12's feet and lower legs remained edematous. E13 stated, "They've been swollen for a long time."<br>On 1/19/11 at 1:05 PM, R12 was seated in her wheelchair next to the bed. Both lower extremeties and feet were swollen.<br>R12's chart contained a Doctor's Admission History and Physical (H&P) dated 1/5/11. The H&P stated R12 was being evaluated following an unwitnessed fall from bed. The physical included assessment of all systems. The physician documented both right and left extremeties with 1+ pitting edema, the right greater than the left.<br>R12 was readmitted to the facility on 1/8/11. The Admission Assessment and History listed R12's skin condition as red, dry, poor skin turgor. There is no notation or assessment for edema.<br>R12's care plan dated 3/7/10 and updated care plan dated 9/16/10 do not address R12's edema in both lower extremeties. There is an updated problem dated 1/8/11 after return from | F 280 | | |

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| F 280 | Continued From page 7<br>the hospital that mentions R12's diagnosis of pneumonia/UTI but not edema.<br><br>2. R3 was admitted to the facility on 6/2/10 with diagnoses, in part, of dementia, urinary tract infection, history of falls, history of pressure sore and orthostatic hypotension. R3 has a physician order for no added salt diet with supercereal at breakfast and house supplement 60 milliliters 4 times per day. From June 2010 until December 2011 R3's weight went from 119 to 101.t pounds, this is a 15.2% significant weight loss in a 6 month period.<br>The care plan dated 6/15/10 through 3/15/11 does not reflect the MDS and states for R3's eating skills to "Set up my tray and I can feed myself. My appetite is not always good. encourage me to eat my meals." There is no weight loss identified in the care plan. The care plan for "Pressure Ulcers" states to "Monitor my wt. (weight) and notify my doctor of any significant wt loss".<br><br>3. A review of R6's physician's order sheet dated 1/1/11 indicated a diagnoses in part of; Depression, Diabetes, Legally Blind, and Incontinence. A review of R6's most recent Minimum Data Set dated 12/3/10, indicated R3 was Moderately Cognatively impaired, and needed staff assistance for all activities of daily living, hygiene, and transfers. A Braden Pressure Ulcer assessment done on 12/15/10 indicated R6 was scored at 14, high risk to develop pressure ulcers.<br>A review of R6's nursing notes dated 12/1/10 indicated R6 had developed an open area to her coccyx 2.0cm X 0.5cm., Calmoseptine cream to be applied. An additional nursing note on 12/6/10, indicated "open area to bottom", and that | F 280 | | |

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| F 280 | Continued From page 8<br>Calmoseptine had been applied.<br>The most recent care plan dated 9/10/10 did not have Pressure Ulcers listed as a problem area for R6, although she was assessed as high risk. There was no information on the care plan regarding the development of R6's pressure ulcer on 12/1/10. On 12/1/10 under the "Incontinence" category an entry was added; Calmoseptine to coccyx area after each episode of incontinence, keep off buttocks.<br><br>4. A review of R16's physician's order sheet indicated a diagnoses in part of; cataracts, and COPD. The most recent Minimal Data Set dated 11/25/10 indicated R16 is alert, and an assist of 1 staff for transfers.<br>The most recent care plan dated 12/2010, indicated: Falls: Has a history of falls with a fracture. I fatigue easily. Potentially at risk for other falls. Requires one of two staff assist to transfer me with a gait belt. Monitor me frequently, Monitor for restlessness, Assess my meds and labs, remind me to use call light, ask for assistance. On 12/11/10 an addition to the care plan stated; Continue with same interventions, remind resident to ask for assistance opening doors or other needs.<br>An incident report dated 11/21/10 indicated R16 had a swollen ankle, and had possibly banged her ankle on the dining table when going to lunch. The intervention for R2 was to change her from an assist of one staff to two staff during transfers. This information was not on the care plan when reviewed on 1/21/11.<br>An incident report dated 12/11/10 indicated R16 fell trying to open the bedroom door, and sustained a bruise to her hip. The intervention cited was to place a bed alarm on R16's bed, and | F 280 | | |

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| F 280 | Continued From page 9 | F 280 | | |

have her ask for help to remind R16 not to get up without assistance. On 1/21/11 at 11:30 AM, R16 was noted to be laying in bed with the bed alarm under her. A review of the care plan failed to list either the fall of 12/11, or the new intervention of the alarm to her bed.
On 1/21/11, E3, Care Plan Nurse indicated the person assisting her to update care plans had missed the necessary updates to both R6 and R16's care plans.

5. R15's nurse's note, dated 1/13/11, at 12:00 PM, noted "(E4, Physician) called concerning 2+ edema to BLE (Bilateral Lower Extremities) extending from calf to foot. B (Both) feet cold to touch c (with) eschar noted on L (Left) 4th toe (and) scab noted on 2nd toe (L) foot." R15 was taken to the hospital but returned later that afternoon.

On 1/21/11, at 2:10 PM, R15 was sitting in her room with socks on her feet. E18, Certified Nurse's Aide removed the sock on R15's left foot. R15 2nd toe crossed over the top of her great toe. R15 had a scabbed area on the top of her great toe, a scabbed area on the top of her 2nd toe, a dark purple area to the bottom tip of her 2nd toe, and a dark purple area to the bottom tip of her 4th toe.

On 1/21/11, at 2:35 PM, E3, Care Plan/Minimum Data Set Coordinator, noted she was not aware R15 had any pressure ulcers. She indicated "I think there may be communications problems." She confirmed she had not updated R15's care plan regarding her newly acquired pressure ulcers.

6. R2's Physician's Order Sheet for January 2011 lists diagnoses, in part, of Pacemaker, Acute Pancreatitis, History of Deep Vein

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| F 280 | Continued From page 10<br>Thrombosis, Congestive Heart Failure, and Arthritis. The History and Physical dated 9/24/10, documents R2 is diagnosed with Hypercoagulable Status.<br>On 1/18/11 and 1/19/11 R2 was observed with red and purple bruising to her upper chest and a large unstageable pressure ulcer to the left heel. A review of the clinical record on 1/20/11, failed to show documentation of the bruising or the dark area on R2's left heel.<br>On 1/21/11, at 9:00 AM, Z1, Hospice Physician, reported Z1 has a diagnosis of Coagulopathy, (clotting disorder) resulting in bruising and the pooling of her blood in areas of her body. Z1 reported this was why R2 was admitted into hospice services. The Hospice Certification for R2, dated 9/28/10, documents services for the diagnosis of End Stage Cardiac Disease.<br>On 1/20/11, a review of R2's Care Plan, updated 1/11/11, fails to address R2's clotting disorder, resulting in the bruising and pooling of her blood. The Care Plan fails to address the unstageable pressure ulcer to her left heel. The Care Plan does not address R2's Arthritis, Cardiac Disease or Pancreatitis. The Care Plan does not address R2's pacemaker or the monitoring to ensure function.<br>On 1/21/11, at 9:10 AM, E3, Care Plan Coordinator, confirmed R2's Care Plan did not address these issues and the Care Plan would be updated. | F 280 | | |
| F 282 SS=D | 483.20(k)(3)(ii) SERVICES BY QUALIFIED PERSONS/PER CARE PLAN<br><br>The services provided or arranged by the facility must be provided by qualified persons in accordance with each resident's written plan of care. | F 282 | | |

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| F 282 | Continued From page 11<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation and record review, the facility failed to follow care plan interventions for three (R2, R12, R13) of ten sampled residents identified with risk for dehydration.<br><br>Findings include:<br><br>1. R12's current care plan dated 9/16/10 identified "Potential risk for dehydration r/t (related to) use of diuretic". Interventions included: "....Monitor for s/s of dehydration...Offer and encourage fluids....place water pitcher at bedside." R12's Nutritional Assessment dated 10/18/10 assessed her fluid needs as 1377 cc fluid daily.<br>R12 was observed for three meals during the survey; lunch on 1/18/11 and 1/19/11, breakfast on 1/19/11. R12 had very poor intake of fluids for all observed meals with no prompts or assistance of staff to encourage further fluid intake.<br>During the lunch meal on 1/18/11, at 12:15 PM, R12 spilled her 8 ounce glass of water as she attempted to take a drink. R12 reached for the empty glass, twirled it on the table. The water was cleaned up by staff but not replaced with another glass of water. At 12:30 PM, R12 was given her lunch tray. The only fluids served with the lunch tray was 4 ounces of juice. R12 received only 120 cc of fluid for lunch. She was not offered coffee or any other fluids.<br>During breakfast on 1/19/11 from 8:45 AM until 9:18 AM, R12 was given 4 ounces of apple juice (120 cc), 8 ounces of milk (240 cc), 8 ounces of water (240 cc). R12 was not assisted or prompted to drink more fluids during the | F 282 | | |

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| F 282 | Continued From page 12<br>breakfast meal. R12 drank a total of 440 cc of fluid for breakfast.<br>During lunch on 1/19/11 from 11:45 AM until 1 PM, R12 was offered 8 ounces of water (240 cc) and 4 ounces of orange juice (120 cc). R12 drank her orange juice and half of her water for a total of 240 cc of fluid for lunch. Staff did not assist or prompt R12 to drink more fluids. Staff did not offer additional or substitute fluids to R12.<br><br>2. R13's Care Plan is dated 1/17/10. Problems identified on R13's Care Plan include self-care deficit due to Alzheimers; history of urinary tract infections. Interventions include, "Offer and encourage fluids....Place water at bedside and offer me sips of water through the day."<br>During the breakfast meal served on 1/19/11, R13 was given 8 ounces (240cc) of water, 8 ounces (240 cc) of apple juice, 8 (240 cc) ounces of milk. E9, CNA, was seated next to R13, assisting another resident to eat. From 8:48 AM until 9:07 AM, R13 sat at the table, with her hands in her lap. R13 made no attempts to feed herself or drink any fluids. At 9:07 A.M. E9 offered R13 one bite of food and gave R13 the spoon. There were no prompts or offers to drink. E8, another CNA, offered R13 another bite of food at 9:18 AM. R13 began lifting the glasses of fluid and taking drinks. R13 consumed 460 cc of fluid for breakfast.<br>During the lunch meal served on 1/19/11, R13 was seated at the Dining Room table from 11:45 AM, until 12:50 PM. At 12:20 PM, R13 received her lunch tray. She was given 8 ounces (240 cc) of coffee, 8 ounces of apple juice, 8 ounces of water. R13 made no attempts to feed herself or drink fluids independently. There was a CNA seated next to R13, feeding another resident. At 12:30 PM, R13 ate her hot roll, placed her fingers | F 282 | | |

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| F 282 | Continued From page 13<br>into mashed potatoes, licked her fingers. The CNA had her back to R13, feeding another resident. At 12:50 PM, R13 was removed from the Dining Room. She had eaten less than 25% of her food. She drank only her glass of milk (240 cc). There were no prompts to eat or drink more fluids from staff in the Dining Room.<br>During the lunch meal served on 1/20/11, at 1:00 PM, R13 was leaving the Dining Room. She had very poor fluid intake - one glass of milk (240 cc). Her water, juice, and coffee were untouched.<br><br>R12 and R13 were observed during activies in the dining room on both 1/19/11 and 1/20/11. On 1/20/11, E22, Activites, was observed singing with the residents in the dining room. There were no fluids offered during the activities observed.<br>The facility's Hydration Policy dated 12/05 stated (in part), "Fluids will be provided with all meals and residents encouraged to drink and assisted as needed.....Nursing staff will evaluate resident's ability to access fluids independently. In the event that they are not able to, staff will: a.) determine if there are opportunities to providee aids/assistive devices that will enable risidents to obtain independently / or: b) offer and assist with in-take of fluids between meals and at bedtime based on resident reference....Water and juices are to be offered at resident activities as appropriate....."<br><br>3. a. On 1/19/11, at 3:40 PM, R2 was observed laying in bed on her left side.. R2's skin was very thin and fragile. An indwelling urinary catheter was draining cloudy urine with sediment. A water pitcher containing approximately 150 cc's (cubic centimeters)of warm water and a straw was on the bedside table.<br>On 1/20/11, at 9:50 AM, dried spittle was on | F 282 | | |

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| F 282 | Continued From page 14<br>her lips, with sticky mucous noted between the upper and lower lip. R2 reported she was thirsty. Approximately 150 cc's of warm water was noted in her water pitcher. The amount was marked with an ink pen on the pitcher. R2's urine remained dark yellow and cloudy with sediment. R2 reported water is not being offered to her.<br>On 1/20/11, at 10:35 AM, R2 was provided catheter care by E15 and E16, Certified Nurses Aides, (CNA). The catheter drainage bag was drained of 50 cc's of amber urine. After completion of care, R2 was repositioned. No fluids were offered to R2.<br>On 1/20/11, at 12:05 PM, R2 was laying on her left side. The water pitcher was still warm, containing 150 cc of water. At 1:02 PM, R2's heels remained directly on the pillow. At 1:10 PM, E15 left R2's room and reported, " I'm going to get you some fresh ice water." At 3:00 PM, 150 cc's of warm water remained in the marked pitcher.<br>On 1/20/11, R2's Care Plan, updated 1/11/11, documents R2 has a potential for dehydration and a history of urinary tract infections, and reads, in part, "Not always drinking enough fluids." An intervention reads, "Offer and encourage fluids throughout the day and night."<br><br>b. The Care Plan for R2 lists a problem of pain, with interventions as; Roxanol 10 mg (milligrams) every 2 hours, as needed; assess for effectiveness, encourage fluids, notify doctor if pain persists, monitor for gastrointestinal distress, administer Vicodin 5/325 mg every 6 hours and administer MS Contin 15 mg every 12 hours. A review of the Medication Administration Record (MAR) for December 2010 and January 2011 fails to show documentation of any pain medication given for break through pain since 12/25/10, at | F 282 | | |

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| F 282 | Continued From page 15<br>12:00 AM of Roxanol 10 mg for complaint of back pain. The Nurses Notes fail to show documentation for 1/20/11 of any PRN (as needed) pain medication given to R2. The MAR for 1/11 documents R2 is given Morphine Sulfate 15 mg by mouth every 12 hours, scheduled at 8:00 AM and 8:00 PM, as ordered by the physician. | F 282 | | |
| F 309 SS=E | 483.25 PROVIDE CARE/SERVICES FOR HIGHEST WELL BEING<br><br>Each resident must receive and the facility must provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with the comprehensive assessment and plan of care.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, interview and record review, the facility failed to provide an interim care plan; failed to assess for and provide adequate pain management; failed to coordinate services with the Hospice provider; failed to assess/monitor for potential complications for a blood clotting disorder; and and or failed to assess and monitor weight fluctuations related to edema for 4 (R5, R2, R12, R15) of 20 sampled residents.<br><br>Findings include:<br><br>1. R15's physician's order sheet, dated January 2011, noted she had a partial diagnosis of Congestive Heart Failure. Her physician's order, dated 12/16/10, noted she should receive Lasix (a | F 309 | | |

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| F 309 | Continued From page 16<br>diuretic), 40 milligrams (mg) daily.<br>R15's Weight Record indicated she weighed 146 pounds in October 2010. R15's Weight Record indicated she weighed 152.4 pounds in November 2010.<br>R15's nurse's noted, dated 11/27/10 indicated she was sent to the hospital and admitted with pneumonia. R15 was diuresed while in the hospital. She was readmitted to the facility on 11/30/10. Her weight on 12/1/10 was 132.8 pounds.<br>On 12/1/10, R15's care plan was updated and indicated she was at risk for dehydration related to the use of a diuretic and also had a diagnosis of Congestive Heart Failure. The care plan indicated "Monitor me for wt (weight) gain, weakness, fatigue, swelling of feet or hands, tightness or pain in my chest, (elevated) heart rate, dizziness or fainting."<br>On 12/6/10, E23, Registered Dietician, completed R15's nutritional assessment. She indicated R15's hospital laboratory results, dated 11/29/10, noted she had a low albumin level of 3.0 (normal was 3.2- 5.5) and a low total protein level of 5.3 ( normal was 5.5 - 8.3). These values indicated R15 had poor nutritional status.<br>R15's weekly weights for December 2010 were as follows:<br>12/1/10 - 132.8 pounds<br>12/10/10 - 134.2 pounds<br>12/17/10 - 140 pounds<br>12/22/10 - 143.2 pounds<br>12/27/10 - 146.8 pounds<br>1/2/11 - 154 pounds<br>Although R15 had a 14 pound weight gain from 12/1 to 12/27/10, R15's laboratory results, dated 12/29/10, indicated R15's albumin level was 2.9 and her total protein level was 4.3. Again, these results indicated poor nutritional | F 309 | | |

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| F 309 | Continued From page 17<br>status.<br>There was no documentation in R15's medical record from 12/24/10 through 1/2/11 indicating the facility staff were monitoring R15 for edema. Throughout out this period, R15 had a 10.8 pound weight gain. There was no documentation throughout this period indicating R15's physician was notified of this weight gain.<br>The facility's policy, Monthly Resident Weights, no date, indicated "5. If the resident has a significant weight gain or loss, Charge Nurse or designee will determine cause (if possible) and define any interventions that may be indicated to reverse undesirable trend. 9. Documentation of assessment of weight change, interventions initiated as well as physician notification if applicable will be made in the medical record. "<br><br>2. On 1/18/11 at 10:55 AM, R12 was observed sitting in her wheelchair in the Dining Room. R12 had a lap cushion restraint on the wheelchair. Her feet and lower legs were very edematous, the right leg more than the left leg. Her feet were swollen.<br>At 11:25 AM, E13, Certified Nursing Assistant (CNA), rolled R12 in her wheelchair to her room. E13 assisted R12 to stand, placed her on the toilet. R12's feet and lower legs remained edematous. E13 stated, "They've been swollen for a long time."<br>On 1/19/11 at 1:05 PM, R12 was seated in her wheelchair next to the bed. Both lower extremities and feet were swollen.<br>Nursing Notes from 12/30/10 through 1/15/11 have no assessment or notation regarding edema in R12's lower legs. R12's Care Plan updated on 1/8/11 does not address edema. The 1/8/11 update is for Pneumonia and UTI (Urinary Tract Infection). | F 309 | | |

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| F 309 | Continued From page 18<br>R12's chart contained a Doctor's Admission History and Physical dated 1/5/11. The history and physical stated R12 was being evaluated following an unwitnessed fall from bed. The physical included assessment of all systems. The physician documented both right and left extremities with 1+ pitting edema, the right greater than the left.<br>Nursing Notes dated 1/5/11 stated R12 was admitted to the hospital with left forehead laceration, UTI (urinary tract infection), and pneumonia.<br>R12 was readmitted to the facility on 1/8/11. The Admission Assessment and History listed R12's skin condition as red, dry, poor skin turgor. There is no notation or assessment for edema.<br>During a meeting with facility staff on 1/21/11 at 9:10 AM, E28, Corporate Nurse, Operations Director, stated that R12 had been previously hospitalized for diuresis in December. E28 stated she interviewed E8, Licensed Practical Nurse (LPN) working on the 500 Hall. E28 stated R12's edema was markedly improved when R12 was re-admitted to the facility. The facility was asked to provide hospital History and Physical and Discharge Summary for R12's hospitalization for diuresis. The facility did not provide the requested information.<br>R12's purged Nurse's Notes for November and December were reviewed. Nurse's Notes dated 12/30/10 at 6:30 PM documented (in part), "...Elder has occasional dry cough. Noted +3 edema to bilateral feet. Noted hoarseness. Wheezing to anterior lungs per auscultation....notified Dr....". Physician's Orders dated 12/20/10 stated, " Portable Chest x-ray, Lasix (diuretic) 40 mg for two days, then continue 20 mg. daily." Chest x-ray results were received on 12/31/10 - normal. | F 309 | | |

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| F 309 | Continued From page 19<br>There is no documentation of R12's hospitalization for diureses in R12's purged chart. There are no additional nursing note documentations regarding R12's edema, no assessments of amount of edema following the increased dose of Lasix. R12 was treated at the hospital in December on 12/23/10, for evaluation and treatment of a laceration to her right hand. R12 was hospitalized in January on 1/5/11 for laceration to forehead (sutured), UTI, pneumonia. The hospital History and Physical dated 1/5/11 does assess pitting edema in both lower legs - right greater than left.<br>R12's January weight is 104.6 pounds. There is no documentation in R12's Nursing Notes, Care Plan, or 10/18/10 Nutrition Assessment addressing R12's edema. There are no guidelines for assessing actual body mass, increase versus weight gain or loss due to fluid retention. There are no measurements of the amount of edema or daily weights to more closely monitor edema.<br><br>3. A review of R5's chart indicated she was admitted to the facility on 1/6/11. The physician's order sheet indicated a diagnoses in part of; Cancer with Liver Metastasis, Malignant Neoplasm of Bronchus, Rheumatoid Arthritis of Hands, Malaise, Fatigue, and Coronary Artery Disease. The Nursing Admission Assessment indicated R6 had a PICC Line / IV Catheter in her left arm, a Stage 2 Pressure Ulcer on her coccyx, and wounds to both her lower legs. The admission assessment failed to indicate an admission weight for R5.<br>An interim care plan dated 1/6/11, indicated R5 was a total assist for dressing, grooming, and bathing, and a partial staff assist for Transfers, Mobility, Bladder and Oral Care. The interim care | F 309 | | |

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| F 309 | Continued From page 20<br>plan indicated R5 was on a regular diet, had chewing / swallowing problems, and staff were to monitor eating habits and provide encouragement and assistance to R5.<br>The care plan also indicated R5 had a Pressure Ulcer but failed to say where, and had a Skin Tear, but failed to say where. The Interim Care plan failed to identify R5's PICC Line IV.<br>On 1/20/11 at 11:00 AM, E27, Treatment Nurse, was providing treatments to R5. E27 indicated R5 was an alert and oriented resident. A review of the treatment record orders included; Changing the dressing on the PICC line, and treatments to R5's coccyx ulcer and wounds to both lower shins. A review of the treatment record indicated:<br>PICC Line dressing change every 3 days. The record indicated no dressing changes done on 1/9/11, 1/12/11, or 1/19/11. A dressing change was recorded on 1/16/11. In an interview R5 stated, "those nurses don't change this every 3 days, I think they must forget."<br>The Treatment Record indicated: Cover Left and Right shin with telfa and kerlex after cleansing. E27 indicated R5's shins were cleansed with wound cleanser, and then wound gel was applied with the dressings. In was noted that R5's record indicated that no dressings were done on 1/9, 1/10, 1/11 and 1/16. When asked about her dressings, R5 stated "no, they don't do those every day either."<br>On 1/20/11 at 12:15, R5 was laying in her bed with a plate of sausage and noodles in front of her. She had a chopped salad and pink cake also on her tray. R5 did not eat any of the lunch. R5 stated that she really does not like the taste of the facility food and usually only will eat breakfast. R5 stated her friends and family brought in snacks for her to eat because of her dislike of the | F 309 | | |

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| F 309 | Continued From page 21<br>food. R5 stated that staff did not usually offer substitutes and she would probably not like them either.<br>On 1/21/11, at 10:00 AM, R5 was weighed and her weight was 85.5 lbs. A review of the facility January 2011, weight log for the 400 hall indicated R5's weight was not recorded as taken. At 11:30 AM, E1, Administrator, indicated R5's admission weight was found and it was 86.6 lbs.<br>On 1/21/11, at 12:00, R5 again was noted to pick at her lunch tray and not eat very much. A family friend who was visiting, voiced concern that R5 didn't seem to be eating much, and appeared to have lost some weight since admission. In an interview with R5, she stated that she was weighed before coming to the facility and thought she weighed between 94 - 98 lbs. R5 stated that this was a normal weight for her.<br>On 1/25/11, at 9:30 AM, E3, Care Plan Nurse, indicated that she did not know why the interim care plan did not adequately identify R5's care needs. During this meeting E2, Director of Nursing was also in attendance, but gave no further information as to why staff were not doing R5's treatments as order by the physician, or why R5's weight and appetite were not actively being monitored as directed in the care plan.<br><br>4. a. R2's Physician's Order Sheet for January 2011 lists diagnoses, in part, of History of Deep Venous Thrombosis, Blindness, Arthritis, Acute Pancreatitis, History of Dehydration and Cerebral Vascular Accident. The Minimum Data Set, dated 10/23/10, assesses R2 as requiring extensive assistance with bed mobility and transfers. The Hospice Certification, dated 9/28/10, documented hospice services will be provided for R2 for the diagnosis of End Stage | F 309 | | |

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| F 309 | Continued From page 22<br>Heart Disease.<br>On 1/18/11, at 3:40 PM, a large purple and red bruise was noted to R2's upper chest. On 1/20/11, at 9:50 AM, two large red and purple bruises were noted to R2's upper chest. When asked, E12, Licensed Practical Nurse, (LPN), stated, "Actually that bruise has been there. It's not new." E12 reported she did not know what caused the bruises to R2's upper chest. Then E12 stated, "No, I didn't know that (pointing to the bruises) was there. I worked yesterday. The CNA's (Certified Nurses Aides) didn't tell me about it. I don't know how she got it. She doesn't get out of bed." E12 asked R2 how her chest was bruised. R2 replied, "I don't know", and reported her chest hurt.<br>On 1/18/11, at 10:10 AM, E16, CNA reported she had given R2 a bed bath on 1/16/11. E16 reported R2's chest started to get red when they were drying her chest. E16 reported she also gave R2 a bed bath the morning of 1/18/11, and saw the bruises to R2's upper chest. E16 confirmed R2 is a bedfast resident who cannot turn or reposition herself in bed.<br>On 1/18/11, at 10:35 AM, E15, CNA stated, "She (R2) bruises so easily. You have to be real careful with her. Her skin tears. She complains of pain in her arms when moved and moans."<br>On 1/18/11, 1/19/11 and 1/20/11, a review of the R2's Nurses Notes for January 2011 show the last documentation to be on 1/16/10. No documentation of the bruises to R2's upper chest is noted in the clinical record, hospice record or physician's orders.<br>On 1/20/11, at 1:45 PM, Z3, Hospice Registered Nurse reported he had never seen the bruising to R2's chest, until it was brought to his attention by the surveyor. Z3 reported he does not know if R2's physician is aware of the | F 309 | | |

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bruising. Z3 reported he sees R2 twice weekly, on Monday and Thursday. Z3 confirmed he did not see the bruise to R2's upper chest on 1/17/11. Z3 reported, "It's hard to tell if her (R2) pain is under control. She has arthritis also. I think she has general pain."

The Skin/Wound Log, dated 1/19/11, fails to address R2's bruising to her chest. The Treatment Administration Record for January 2011 shows no treatment or monitoring of the chest bruises.

On 1/21/11, at 9:10 AM, E3, Care Plan Nurse reported Z1, Hospice Medical Director, was informed of the bruising the evening of 1/20/11, after this issue was brought to the facility's attention.

The Nurses Notes, dated 1/21/11, at 6:29 PM, confirms Z4, R2's primary physician was notified of the bruising to her sternum. In a telephone interview on 1/21/11, at 9:00 AM, Z1 reported Z4, R2's primary physician is also the attending physician for R2. Z1 reported the bruising to R2's chest is the result of coagulopathy, and has a history of blood pooling in areas of her body.

The History and Physical dated 9/24/10, documents R2 is diagnosed with Hypercoagulable Status.

On 1/21/11, at 9:00 AM, Z1, Hospice Physician, reported Z1 has a diagnosis of Coagulopathy, (clotting disorder) resulting in bruising and the pooling of her blood in areas of her body. Z1 reported this was why R2 was admitted into hospice services. The Hospice Certification for R2, dated 9/28/10, documents services for the diagnosis of End Stage Cardiac Disease.

On 1/20/11, a review of R2's Care Plan, updated 1/11/11, fails to address R2's clotting disorder, resulting in the bruising and pooling of

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her blood. The Care Plan does not address R2's Arthritis, Cardiac Disease or Pancreatitis. The Care Plan does not address R2's pacemaker or the monitoring to ensure function.

b. On 1/20/11, at 12:05 PM, R2 was laying on her left side. When asked if she was in pain, R2 replied, "Yes, I hurt all over really bad." At 1:10 PM, E15 left R2's room and reported, " I'm going to get you some fresh ice water."

On 1/20/11, R2's Care Plan, updated 1/11/11, lists a problem of pain, with interventions as; Roxanol 10 mg (milligrams) every 2 hours, as needed; assess for effectiveness, encourage fluids, notify doctor if pain persists, monitor for gastrointestinal distress, administer Vicodin 5/325 mg every 6 hours and administer MS Contin 15 mg every 12 hours.

On 1/20/11, a review of the Medication Administration Record (MAR) for December 2010 and January 2011 fails to show documentation of PRN (as needed) pain medication given to R2 for break through pain since 12/25/10, at 12:00 AM, of Roxanol 10 mg for complaint of back pain. No follow up of the effectiveness the analgesic given on 12/25/10 is documented. On 1/20/11, a review of the Nurses Notes fail to show documentation for 1/20/11 of any PRN pain medication given to R2. The MAR for 1/11 documents R2 is given Morphine Sulfate 15 mg by mouth every 12 hours, scheduled at 8:00 AM and 8:00 PM, as ordered by the physician.

The Pain Assessment for R2, dated 9/29/10, has not been completed. On 1/20/11, at 11:37 AM, LPN reported the facility has no forms for documenting daily pain assessments for each resident. E4 reported they do not document R2's level of pain. E4 stated, "I just write it on the PRN (as needed) medication record if I give a PRN for pain."

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| F 309 | Continued From page 25<br>The facility's policy and procedure, entitled, 'Pain Management Plan', reads, "Pain will be assessed on a regular basis with the goal of assessment to determine the cause of the pain and develop an appropriate individualized treatment plan. The elements of pain assessed are: frequency, intensity (measured using a pain scale), location, duration, and aggravating and alleviating factors. A comprehensive pain assessment will be done by nursing on admission , with change in condition, and PRN. A screening for pain will be completed monthly, and as indicated by the individual residents pain management plan. Goal of pain management is to provide relief to the resident so that pain intensity is no greater than 3. Education will be provided to staff, residents, and family on pain and pain management." | F 309 | | |
| F 312 SS=E | 483.25(a)(3) ADL CARE PROVIDED FOR DEPENDENT RESIDENTS<br><br>A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, interview and record review, the facility failed to provide adequate assistance with grooming and nutrition for 4 (R3, R7, R12, R15) of 20 sampled residents.<br><br>Findings include:<br><br>1. On 1/18/11, at 12:45 PM, R15 was sitting at her table in the dining room eating lunch. She | F 312 | | |

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| F 312 | Continued From page 26<br>was having difficulty getting her spagetti onto her fork. She attempted to slowly bring the fork to her mouth; however, the majority of the spaghetti fell onto her chest, lap and clothing protector. R15 began to pick the the spaghetti off of her shirt and place it into her mouth. Again she attempted to use her fork and eat her spaghetti; however, the spaghetti fell into her lap. At 12:53 PM, R15 stabbed lettuce with her fork. She was unable to get the lettuce onto her for so she picked the lettuce up with her hands. R15 continued to struggle with getting the food into her mouth. At 1:05 PM, E25, Assistant Administrator, encouraged her to eat but did not offer any assistance. At 1:10 PM, R15 attempted to use her fork but had difficulty getting it to her mouth. At 1:17 PM, E26, Certified Nurse's Aide, asked R15 if she was done and cleaned the front of R15's shirt. E26 pushed R15 back to her room. R15 consumed less than 50% of her meal.<br>R15's Minimum Data Set, dated 11/16/10, indicated she needed supervision while eating.<br><br>2. On 1/18/11, at 12:35 PM, R7 was sitting in her wheelchair in the dining room. R7 was extremely severely kyphotic and leaned to the left. Throughout the meal, R7 attempted to put spaghetti on her fork and bring the fork to her mouth. The spaghetti fell onto her lap and chest. R7 attempted to eat fruit jello from a bowl. Again, she was unable to get the food to her mouth and the food fell onto her lap. At no time did staff attempt to assist R7 with her meal.<br>On 1/19/11, at 12:09 PM, R7 was sitting in her wheelchair in the dining room. R7 received roast beef, mash potatoes, gravy, mixed vegetables, a roll, bread pudding and soup. At 12:29 PM, R7 was attempting to beef onto her fork. While pushing the beef across the plate, it fell onto the | F 312 | | |

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| F 312 | Continued From page 27<br>table. She began stabbing the meat in an attempt to place it on her fork. Finally, she stabbed the meat and attempted to get it to her mouth. The meat fell into her lap. At 12:52 PM, R7 was attempting to eat applesauce. While attempting to get the applesauce into her mouth, the applesauce fell onto R7's lap. Throughout this time, staff did not assist R7 with her meal.<br>On 1/21/11, at 10:10 AM, Z5, family member, indicated R7 attempts to feed herself. Z5 noted because of R7's positioning R7 did make a mess at meal times. Z5 noted R7 will accept help with eating when she becomes tired. Z5 indicated "Staff just need to ask."<br><br>3. R12's Minimum Data Set (MDS) dated 10/19/10 assessed her having both short- and long-term memory problems with moderately impaired decision making ability, cues/supervision required. She is assessed as needing extensive assistance with ADL (activities of daily living) such as bed mobility, transfer, dressing, toilet use; however, she is assessed as independent with set-up only for dining. R12's Care Plan dated 9/16/10 listed a problem of "I have had a decline in my ADLs. I require staff assist." Approaches listed include (in part):"...Set up my tray and I can feed myself. I may require staff assist with eating my meals on some days."...<br>R12 was observed for three meals during the survey; lunch on 1/18/11 and 1/19/11, breakfast on 1/19/11. R12 had very poor intake of food and fluids for all observed meals with limited prompts or assistance of staff to encourage further intake.<br>During the lunch meal on 1/18/11, at 12:15 PM, R12 spilled her 8 ounce glass of water as she attempted to take a drink. R12 reached for the empty glass, twirled it on the table. The water was cleaned up by staff but not replaced with | F 312 | | |

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| F 312 | Continued From page 28 | F 312 | | |

another glass of water. At 12:30 PM, R12 was given her lunch tray. She was served spaghetti and meat sauce, tossed salad, bread (no butter), small glass of fruit juice.

At 12:35 PM, R12 reached for her fork. E2, Director of Nursing, was seated next to R12 feeding a male resident at the same table. R12 attempted to grab her fork, was unable, and placed her fingers into the spaghetti. R12 reached for her juice but was unable to reach the juice. At 12:40 PM, E8, CNA, seated next to R12 offered her one bite of spaghetti, then turned away to continue feeding another resident. At 12:45 PM, E8 told R12 to "wake up". Dietary staff passed out the dessert, red jello with fruit, to residents in the Dining Room. At 12:50 PM, R12 had her fingers in the spaghetti. E8 continued to feed the male resident. At 12:55 PM, E8 offered R12 a bite of spaghetti, then turned back to feed male resident. At 1:05 PM, R12 had attempted to feed herself the jello with fruit, spilling the jello onto the table in front of her. R12 was eating the jello off the table with her fingers. R12 also lifted the empty spoon to her mouth. E8 left the table. R12 was removed from the table without further assistance or encouragement to eat or drink more. R12 consumed 50% of her spaghetti, 50% of green beans, 0 jello, 100% of apple juice - 120 cc. There were no additional food or fluids offered.

During breakfast on 1/19/11, R12 was offered a plate of biscuits and gravy, bowl of oatmeal, 4 ounces of apple juice (120 cc), 8 ounces of milk (240 cc), 8 ounces of water (240 cc). At 8:48 AM, R12 was reaching for bowls and dishes. She had scooped the biscuits and gravy onto the table. The oatmeal was out of reach. At 8:50, E10, Activities Director, asked R12, "Are you going to eat some of it?", prompting R12 one time. At

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| F 312 | Continued From page 29<br>9:00 AM, R12 remained seated at the table. Her eyes were closed, she was holding her napkin. R12 took one drink of apple juice. E8 finished feeding the male resident next to R12 and left the table. At 9:05 AM, E10 re-entered the room with another tray of food for R12, placed the scrambled eggs, bacon, toast, and cream of wheat in front of R12. At 9:08 AM, E10 remained at the table. R12 was unable to feed herself independently. She would take fluids when she could reach the glass. At 9:18 AM, R12 remained at the table. E10 had left the table pushing the plate of food to the center of the table. R12 was reaching for the plate. Her cereal was also out of reach. There was no spoon in the cereal. R12 grabbed the spoon and scraped on the table with the spoon. She ate 50% of scrambled eggs, 50% toast, 0 cereal, R12 drank 100% of the apple juice, 50% of water, 75% of milk.<br>During lunch on 1/19/11, R12 was served 8 ounces of water (240 cc) and 4 ounces of orange juice (120 cc), mashed potatoes and gravy, roast beef (ground), mixed vegetables. At 12:22 PM, R12 made no attempts to feed herself independently. E8, CNA, was seated across the table, feeding another resident. At 12:30 PM, R12 stall had made no attempts to feed herself or drink. E8 prompted R12 and moved next to her at the table, remained for several minutes before leaving the table. R12 drank her orange juice and half of her water for a total of 240 cc of fluid for lunch. R12 ate approximately 50% of her food. Staff did not assist or prompt R12 to drink more fluids. Staff did not offer additional or substitute fluids to R12.<br><br>4. R3 was observed on 1/20/11 at 4:15 PM with dirty fingernails with debris under her nails. On 1/21/11 the same dirty fingernails with debris | F 312 | | |

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| F 312 | Continued From page 30<br>were observed at 10:55 AM. R3 was assessed on the 11/20/10 Minimum Data Set as requiring extensive assistance with one person physical help to perform personal hygiene. | F 312 | | |
| F 314 SS=G | 483.25(c) TREATMENT/SVCS TO PREVENT/HEAL PRESSURE SORES<br><br>Based on the comprehensive assessment of a resident, the facility must ensure that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that they were unavoidable; and a resident having pressure sores receives necessary treatment and services to promote healing, prevent infection and prevent new sores from developing.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, interview and record review, the facility failed to provide pressure relieving devices and failed to prevent , identify, treat, assess and monitor in-house acquired pressure ulcers for 5 (R1, R2, R15, R4, R6) of 8 sampled residents with pressure ulcers. This failure resulted in R15 developing two unstageable areas with eschar on her left great and second toes, and two unstageable pressure ulcers on the bottom tip of her second and four left toes.<br><br>Findings include:<br><br>1. R15's nurse's note, dated 1/13/11, at 12:00 PM, noted "(E4, Physician) called concerning 2+ edema to BLE (Bilateral Lower Extremities) extending from calf to foot. B (Both) feet cold to touch c (with) eschar noted on L (Left) 4th toe | F 314 | | |

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| F 314 | Continued From page 31<br>(and) scab noted on 2nd toe (L) foot." R15 was taken to the hospital but returned later that afternoon.<br>The facility's Weekly Pressure Ulcer Log, dated 1/19/11, did not indicate R15 had any pressure ulcers on her feet.<br>On 1/21/11 at 2:00 PM, E5, Licensed Practical Nurse (LPN), indicated she had called E4 on 1/13/11 regarding R15. She indicated R15 returned from the hospital and E4 wanted the facility to monitor those areas on her feet.<br>On 1/21/11, at 2:10 PM, R15 was sitting in her room with socks on her feet. E18, Certified Nurse's Aide (CNA) removed the sock on R15's left foot. R15 2nd toe crossed over the top of her great toe. R15 had a scabbed area on the top of her great toe, a scabbed area on the top of her 2nd toe, a dark purple area to the bottom tip of her 2nd toe, and a dark purple area to the bottom tip of her 4th toe.<br>On 1/21/11, at 2:25 PM, E27, Treatment Nurse, stated she completed the weekly measurements on the pressure ulcers. E27 said the floor nurses were responsible for treating the pressure ulcers. E27 indicated she was not aware R15 had any pressure ulcers on her left foot.<br>On 1/21/11, at 2:35 PM, E3, Care Plan/Minimum Data Set Coordinator, stated she was not aware R15 had any pressure ulcers. She indicated "I think there may be communications problems." She confirmed she had not updated R15's care plan regarding her newly acquired pressure ulcers.<br>On 1/25/11, at 8:45 AM, E1, Administrator, noted R15's physician had not been in the facility to see R15; however, the facility staff believed the areas on R15 may have been caused by the shoes she had been wearing. | F 314 | | |

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| F 314 | Continued From page 32<br><br>2. On 1/19/11,at 9:30 AM, R4 was lying in her bed. R4's heels were lying directly on her mattress. R4 was lying in her bed at 10:15 AM, 12:00 PM, and 1:24 PM, with her heels directly on the mattress.<br>R4's Minimum Data Set (MDS), dated 12/23/10, indicated she required extensive assistance from two staff persons with bed mobility. R4's MDS indicated she was at risk for developing pressure ulcers.<br>R4's care plan, dated 12/31/10, noted she was at risk of skin breakdown related to requiring total assistance with bed mobility. The care plan noted "Provide pressure reducing devices to bed".<br><br>3. On 1/19/11, from 10:14 AM until 11:00 AM , R1 was lying in bed on her left side. Her heels were lying directly on the mattress.<br>On 1/19/11, at 1:25 PM, R1 was lying in bed with her heels lying directly on the mattress. Her heel protectors were lying next to the sink.<br>R1's Minimum Data Set (MDS), dated 11/19/10, indicated she required extensive assistance from staff with bed mobility. The MDS noted she was at risk for developing pressure ulcers.<br><br>4. R2's Physician's Order Sheet for January 2011 lists diagnoses, in part, of History of Deep Venous Thrombosis, Blindness, Congestive Heart Failure, Acute Pancreatitis, and Cerebral Vascular Accident. The Minimum Data Set, dated 10/23/10, assesses R2 as requiring extensive assistance with bed mobility and transfers and is incontinent of bowel, with an indwelling urinary catheter. The Braden Scale, dated 12/12/10 assesses R2 as a high risk for the | F 314 | | |

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| F 314 | Continued From page 33<br>development of pressure ulcers. The Hospice Certification, dated 9/28/10, documents hospice services will be provided for R2 for the diagnosis of End Stage Heart Disease.<br>On 1/18/11, at 10:35 AM, E15, CNA stated, "She (R2) bruises so easily. You have to be real careful with her. Her skin tears." A large dark purple, unstageable pressure ulcer, the size of a quarter, was noted to R2's left heel. No dressing was on the left heel. E16 stated, "I knew the sore to R2's left heel was there."<br>On 1/18/11, 1/19/11 and 1/20/11, a review of the R2's Nurses Notes for January 2011 show the last documentation to be on 1/16/10. No documentation of the bruises to R2's upper chest, or the deep tissue, unstageable pressure ulcer to R2's left heel are noted in the clinical record or physician's orders.<br>On 1/20/11, at 12:05 PM, R2 was on her left side. Both heels were laying directly on two stacked pillows. Pressure relieving boots were laying in her wheelchair. At 1:02 PM, R2's heels remained directly on the pillows. No dressing was on R2's left heel.<br>On 1/20/11, at 1:45 PM, Z3, Hospice Registered Nurse stated, "The dark area to her (R2) left heel has been there for several weeks. A CNA told me about it." Z3 reported he does not know if R2's physician is aware of the dark area to the left heel. Z3 reported he would recommend the treatment for R2's left heel to elevate her legs and float her heels.<br>On 1/25/10, at 10:00 AM, Z2, R2's family member, who visits daily, was interviewed related to her care. Z2 reported she was aware of the dark area to R2's left heel for at least three weeks. Z2 reported R2 is supposed to be wearing pressure relieving boots to her feet, or have her heels floated. | F 314 | | |

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| F 314 | Continued From page 34<br>The Weekly Pressure Log, dated 1/19/11, documents R2 only has a facility acquired on 12/09/10, Stage II pressure ulcer to the coccyx. The Weekly Pressure Ulcer Log fails to address R2's area to the left heel. The Treatment Administration Record (TAR) for January 2011 shows no treatment or monitoring of the unstageable deep tissue injury to R2's left heel. No measurements for the left heel are documented in R2's clinical record or on weekly skin assessments on the TAR. On 1/20/11, at 4:00 PM, review of the Physician's Order Sheets for 1/11 show no physician's order for treatment to the left heel. R2's Hospice Record shows no documentation of the area to the left heel.<br>On 1/21/11, at 9:10 AM, E3, Care Plan Nurse reported Z1, Hospice Physician, was informed of the bruising and area to R2's left heel the evening of 1/20/11, after these issues were brought to the facility's attention. R2's Care Plan updated, 1/11/11, documents a Stage II pressure ulcer to her coccyx, but fails to address the unstageable purple area to the left heel. The Care Plan lists an intervention of floating R2's heels, but does not address the use of the pressure relieving boots to her feet.<br>The Nurses Notes, dated 1/21/11, at 6:29 PM, confirms Z4, R2's primary physician was notified of the area to her left heel and the bruising to her sternum. A new physician's order was received for skin prep to be applied to the left heel every shift on 1/21/11 at 6:29 PM.<br>The facility's policy and procedure, reviewed 11/2010 and entitled 'Pressure Sore Care, reads, "PURPOSE: To prevent information of pressure sores and/or prevent deterioration of existing pressure sores." The policy further reads, "Direct care givers are to observe daily for the following signs of potential decubitus signs an report | F 314 | | |

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| F 314 | Continued From page 35<br>accordingly, and licensed nurse will do a comprehensive skin assessment weekly", and "observe reddened or pressure sore prone areas." The policy confirms treatment summaries for pressure ulcers are to be completed weekly and include location, size, the stage of the ulcer, signs of infection, appearance of the wound and continuation of current treatment or a new treatment order. The policy does not include the floating of heels to prevent pressure in a resident who is high risk for skin breakdown.<br><br>5. A review of R6's physician's order sheet dated 1/1/11 indicated a diagnoses in part of; Depression, Diabetes, Legally Blind, and Incontinence. A review of R6's most recent Minimum Data Set dated 12/3/10, indicated R3 was Moderately Cognitively impaired, and needed staff assistance for all activities of daily living, hygiene, and transfers. A Braden Pressure Ulcer assessment done on 12/15/10 indicated R6 was scored at 14, high risk to develop pressure ulcers.<br>A review of R6's nursing notes dated 12/1/10 indicated R6 had developed an open area to her coccyx 2.0cm X 0.5cm., Calmoseptine cream to be applied. An additional nursing note on 12/6/10, indicated "open area to bottom", and that Calmoseptine had been applied. There were no further nursing notes from 12/7 through 1/20/10 to indicate the status of R6's wound.<br>A review of R6's treatment record for the month 12/2010, indicated R6 was to have weekly skin checks. The record indicated on 12/6 and 12/13 checks were completed. R6's record failed to indicated skin checks had been done on 12/20 and 12/27.<br>A review of the January treatment record indicated a skin check had been done on 1/10/11. A note on the back of the treatment record | F 314 | | |

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| F 314 | Continued From page 36<br>indicated R6 had no open areas on 1/10/11. R6's record failed to show skin checks were done on 1/3/11 or 1/17/11 as required.<br>On 1/18/11 at 9:45 AM, E17 and E18, both Certified Nurses Aides, put R6 into bed and performed peri care on her. E17 stated that R6 had been incontinent. During peri care, it was noted that the area of R6's coccyx between her buttocks was bright red. No Calmoseptine was applied to R6 after this episode of care. No pressure relief to R6's feet or between her legs was given to R6 as she was left to lay on her right side.<br>On 1/20/11, at 10:45 AM, E19, Certified Nurses Aide, stated she had just completed peri care on R6, and R6 had no open areas on her buttocks. R6 was observed laying on her left side, in a semi fetal position, her knees drawn together and no pressure relief between her legs or on her feet.<br>On 1/20/11 at 12:00, E20, Licensed Practical Nurse, stated that she was not aware of R6 having any open areas on her coccyx. E20 then went to R6's room and inspected R6's buttocks and found R6 had an open area 2.0 x 1.0 cm on her coccyx. R6 had no Calmoseptine on her buttocks since last cleaned at 10:45AM. E20, stated the ulcer appeared a day or two old, and did not know why CNA staff had not reported this to her. At this time E19 came into the room and said she had cleaned R6 earlier that morning. E19 told E20, that R6 did not have any open areas to her buttocks. E19 indicated that R6's pressure ulcer from 12/1, had healed about a week ago.<br>On 1/20/10 at 12:10 PM, E19 cleansed R6 of feces. R6 failed to notice that R6 had an open pressure ulcer until the surveyor intervened and pointed to the area. E19 stated that she had missed seeing the area. | F 314 | | |

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| F 314 | Continued From page 37<br>A review of R6's care plan dated 12/11/10, failed to indicate R6 was a high risk to develop pressure ulcers. The care plan failed to identify the pressure ulcer that had developed on 12/1, or that it had healed. The care plan directed staff to keep skin clean and dry, apply pressure reducing devices to the bed and chair, and use Calmoseptine after each incontinent episode.<br>On 1/25/10 at 9:30 AM, in an interview with E1, Administrator, and E2, Director of Nursing, no further information was given regarding R6's newly developed pressure ulcer. No information was given as to why staff were not following the care plan to provide R6 with pressure relief and barrier cream after incontinent episodes. | F 314 | | |
| F 315 SS=D | 483.25(d) NO CATHETER, PREVENT UTI, RESTORE BLADDER<br><br>Based on the resident's comprehensive assessment, the facility must ensure that a resident who enters the facility without an indwelling catheter is not catheterized unless the resident's clinical condition demonstrates that catheterization was necessary; and a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections and to restore as much normal bladder function as possible.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, interview, and record review the facility failed on two occasions to do appropriate incontinent care on 1 (R6) of 5 residents observed for incontinent care.<br><br>Findings include: | F 315 | | |

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1. a. A review of R6's physician's order sheet dated 1/1/11 indicated a diagnoses in part of; Depression, Diabetes, Legally Blind, and Incontinence. A review of R6's most recent Minimum Data Set dated 12/3/10, indicated R3 was Moderately Cognitively impaired, and needed staff assistance for all activities of daily living, hygiene, and transfers. An update on R6's care plan dated 12/1/10, indicated R6 is to have Calmoseptine cream applied after each incontinent episode.

On 1/18/11 at 9:45 AM, E17 and E18, Certified Nurses Aides, put R6 to bed and began to do peri care on her. E17 stated that R6 was incontinent as the adult disposable diaper was wet when removed. E18 went to the sink in R6's room and wet two wash cloths. E18 carried the wash cloths to R6's bed side and used the first wash cloth and wiped up, down, and around several times in R6's groin, and over her labia. No soap or skin cleanser was used on the wash cloth. E18 then took the second cloth and wiped between R6's legs again and then dried the area with the end of a towel.

E17 and E18 turned R6 to her left side. E18 then wet two more face cloths with water but did not use soap or cleanser and then wiped between R6's buttocks going back and forth and then wiped forward into R6's peri vaginal area. E18 then took the 2nd wet face cloth and wiped between R6's buttocks, and again finished by wiping forward from anus to vaginal area.

When done, E17 and E18 put a clean disposable diaper on R6. No Calmoseptine cream was applied to her buttocks.

b. On 1/20/11, at 12:05 PM, E19 and E30, both Certified Nurses Aides, provided peri care to R6. R6 was incontinent with soft feces. E19, removed

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| F 315 | Continued From page 39<br>R6's soiled diaper. E19 then began to cleanse R6 buttocks and anal area of feces with wet wash cloths and skin cleanser. E19's gloves became soiled with feces smears as she worked, however she did not change them.<br>E19 then turned R6 onto her her back and continued to clean R6's vaginal area with the dirty gloves on. E19 wiped over R6's labia but failed to cleanse between the labia. E19 then turned R6 back onto her left side and wiped from the vaginal area back toward the anus, and then turned the cloth and wiped forward from the anus to the vaginal area. E19 then dried R6 and reapplied a disposable diaper. E19 did not change her soiled gloves at any time during this episode of care. No calmoseptine was applied to R6's skin.<br>On 1/21/11 at 3:00 PM, E2, Director of Nursing indicated she had no information regarding the R6's peri care, but, she would discuss the care of R6 with the staff involved. | F 315 | | |
| F 323 SS=E | 483.25(h) FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES<br><br>The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on record review and interview it was determined that the facility failed to supervise, provide new interventions, and provide monitoring devices per the plan of care for 6 (R18, R12, R11, R13, R17, R6) of 12 residents assessed as | F 323 | | |

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| F 323 | Continued From page 40<br>HIGH RISK for falls.<br><br>The findings include:<br><br>1. R18 fell on 11/25/10, while a resident at the shelter care portion of the facility and sustained a subdural hematoma according to the hospital history and physical dated 11/25/10. On 11/29/10, R18 was admitted to the skilled part of the facility with diagnoses, in part, of subdural hematoma and coronary heart disease. The "Preliminary Plan of Care" dated 11/29/10 noted R18 was an "extreme high fall risk at this time". The approaches for the concern of fall documented, in part, for a monitoring system of a bed and chair alarm. It also noted to move R18 to a room close to the nurses station.<br>The nurses notes dated 12/2/10 at 9:00 PM documented that R18 was found on the floor of her room. R18 was sent to the hospital and no further injuries were found. The "Resident Fall Report/Fall Investigation" dated 12/2/10 noted the fall was unwitnessed. Under the section "Fall preventative devices/Interventions in use or care planned to be in use at the time of the fall" noted "Bed Alarm". Crossed out was the statement "not followed as directed or was malfunctioning". E2, Director of Nursing, stated on 1/25/11 that the staff responsible for the incident report was no longer employed at the facility. E2 stated E24, Licensed Practical Nurse, made a mistake and the alarm was sounding. The report also stated "Need a functioning bed alarm" and "No alarm was heard".<br><br>2. R12 is assessed as HIGH RISK for falls, scoring 20 on Fall Risk Assessment dated 7/29/10. A score of 10 or greater is considered "HIGH RISK". The facility's Fall Log documented | F 323 | | |

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| F 323 | Continued From page 41<br>falls for R12 on 8/28/10, 12/19/10, 12/30/10, and 1/4/11.<br>Incident Report/Fall Investigation dated 8/28/10 stated R12 had been ambulating independently with a walker, had recently moved from another room, and was found on the floor in Room 504 without her walker. R12 did sustain a right hip fracture, was treated at the hospital.<br>On 12/19/10 at 5:40 AM, R12 was unsupervised in the Dining Room. The Incident Report/Fall Investigation stated the fall was "unwitnessed". The report indicated R12 was to have a chair pad alarm in place. The incident details stated, "Resident was up in w/c in dining room. Apparently leaned forward too far and slid out of w/c (wheelchair) to floor on knees." The immediate intervention to reduce risk is "personal alarm in chair." The investigation concluded, "Probably sitting too close to edge of chair, needed repositioned." Recommendation for Interventions: "Staff to make sure resident is properly positioned in chair."<br>Fall Report/Investigation dated 12/30/10 at 10:50 PM documented R12 was found in the hallway near Nurses Station. The report stated "unwitnessed fall", fell out of w/c. Fall preventative devices to be used at the time of the fall was "chair pad alarm.". The immediate intervention listed is "Lap cushion restraint placed in wheelchair, pt. to be at arms length of caregiver while up if lap restraint is not in place. When pt appears tired, place in bed." Probable cause is "pt. lean over and fell out of chair, nothing to break fall from occurring." There is no mention if R12's alarm was in place, no mention that staff heard or was responding to alarms when R12 was found on the floor. The investigation concluded: "Probably fell asleep while sitting in w/c. Leaned forward and fell on floor." The | F 323 | | |

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| F 323 | Continued From page 42<br>recommended intervention was lap cushion restraint as requested by family during late evening/night as needed.<br>Nursing Notes dated 1/4/11 at 23:10 (11:10 PM) stated, " nurse responded to bed alarm sounding. Upon entering room, found resident lying on right side on floor close to the bed, moaning. Laceration sustained to forehead was bleeding and a small laceration noted under right eye. Applied pressure and clean sponge to laceration....transfer to hospital..."<br>Doctor's Admission H & P (history and physical) dated 1/5/11 stated in part, "...resident fell striking Rt. forehead, unwitnessed. Pt received suture repair in E.D. Noted to have PNA w/temp (pneumonia)...RLL (right lower lobe)....UA (urinalysis) consistent with UTI (urinary tract infection). R12 remained hospitalized until 1/8/11 when she returned to the facility. There is no documentation of additional interventions to prevent future falls. All Nursing Notes, ER Reports, Transfer Sheets had been purged and placed into R12's inactive file. R12's active chart is dated 1/8/11, after her readmission to the facility.<br><br>3. R11's Care Plan dated 7/23/10 listed FALLS as a problem, stating, "I am a fall risk per assessment related to cognitive deficits, impaired balance, unsteady gait and poor safety awareness with attempts to rise from my w/c without assist. The goals/interventions include (in part): "Personal alarm in my bed and chair to alert staff if I attempt to get up without assist....., apply lap cushion restraint when I'm up in w/c...."<br>On 9/22/10 at 1:05 AM, R11 was found on the floor. The Incident/Investigation form stated, "Personal alarm not working". There was no | F 323 | | |

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| F 323 | Continued From page 43<br>documented injury. Interventions put into place, "will have personal bed alarm reapplied." Addition Recommendations on the Investigation state, "Staff is to see that resident is properly positioned in center of bed."<br>On 12/10/10 at 3:30 PM, R 11 was found on the floor. The Incident Report stated the fall was "unwitnessed". The details of fall stated, "Nursing assistant noticed resident missing after new shift report. On search for resident, she was found by the window by her bed, on the floor." There is no mention of the alarms, if the bed alarm was in place, if the alarm was checked to see if it was properly functioning.<br>The Investigation stated the probable cause was "Probably rolled OOB (out of bed) onto landing strip on right arm/wrist...." The Investigation stated R11 sustained right wrist skin tear, possible fracture of right wrist. The recommendation remained unchanged, "Staff to check to see that resident is properly positioned in bed."<br><br>4. R13's Nurse's Notes dated 12/23/10 at 1 PM stated, "Res out to see (Z7). N.O. (new order) rec'd....Notified D.O.N. (director of nursing) of need for air mattress." Physician's Order dated 12/23/10 at 11:15 AM stated (in part): "Need Air mattress for Stage III pressure sore." The air mattress was delivered and set up.<br>On 12/26/10 at 12:50 AM, R13 was found on the floor. Nurse's Notes stated, "Resident found lying on the floor by the side of her bed. No apparent injury noted....." The resident's physician and POA were notified of the incident. The Incident Report/Investigation stated R13 rolled off the side of her bed onto the floor. The recommendation intervention stated, "POA request (2) full side rails for resident. Staff to | F 323 | | |

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| F 323 | Continued From page 44<br>position resident properly in bed."<br>At 12/26/10 at 3:05 PM, Nursing Notes stated, "A new bed with side rails was delivered. Her (R13's) daughter requested this type of bed for her mother....". A Restraint Evaluation dated 12/31/10 stated "full siderails per family request."<br>Information from the air mattress manufacturer operator's manual stated on page 3, "(name brand) mattresses are not intended to be AND DO NOT FUNCTION AS a patient safety device. SIDE RAILS MUST BE USED WITH THE (name) MATTRESS TO PREVENT FALLS, unless determined unnecessary based on the facility protocol or the patient's medical needs as determined by the facility, IN WHICH CASE THE USE OF OTHER SUITABLE PATIENT SAFETY MEASURES ARE RECOMMENDED."<br>The Operating Instructions, page 5, "8. NEVER leave patient unattended on mattress system when side rails are in the DOWN position. DO NOT LEAVE SIDE RAILS DOWN WHEN MATTRESS IS IN USE."<br>During an interview with facility staff on 1/21/11, at 9:10 AM, E1, Administrator, stated she was unaware of the need for assessment and use of side rails with the pressure relieving mattress, as recommended by the manufacturer.<br><br>5. R17 is assessed as HIGH RISK for falls on her 11/18/10 Fall Assessment. R17 scored 19, with a total score of 10 or above represents HIGH RISK. R17's MDS dated 11/13/10 assessed her as needing extensive assistance of one staff for bed mobility, transfers, toilet use. Her balance for moving from seated to standing position is assessed as "Not Steady, only able to stabilize with human assistance"; Moving on/off the toilet - "Not steady, only able to stabilize with human | F 323 | | |

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| F 323 | Continued From page 45<br>assistance." R17's Care Plan dated 3/1/10 listed Potential for Falls as a problem. Interventions include, "Transfer me with assist of one staff using a gait belt...Please do visual checks on me often....Provide me with a pressure alarm to bed and chair to alert staff if I attempt to get up without assist...."<br>R17 had four falls from 11/8/10 through 12/24/10. On 11/8/10 at 2:30 PM, R17 transferred herself to the toilet. R17's daughter was in the room. R17 attempted to transfer herself back into the wheelchair and fell to the floor. The cause listed on the Incident Report stated the daughter failed to lock the wheelchair, wheelchair moved, and R17 fell to the floor. The recommended intervention is "teaching = speak to daughter about calling for help when her mom asks to use the toilet. Resident usually asks staff when she is not there..."<br>On 11/16/10 at 2:00 AM, R17 had an unwitnessed fall in her bedroom. The details of the fall (on Incident Report) stated, "Heard a sound and then heard resident yelling. Appeared to transfer self out of bed to wheelchair without calling for assistance as she usually does."<br>The Incident report stated that preventative devices to be in use included bed alarm, low bed. The report does not state the alarm was sounding, if the alarm was in place and functioning at the time of the fall. There were no new interventions recommended.<br>On 12/18/10 at 7:15 AM, R17 was found on the floor in her bedroom. The fall was unwitnessed. The incident report stated R17 was observed on the floor at the foot of wheelchair between the bed and chair. Although the report indicated bed alarm was a preventative device, the report does not indicate if the alarm was in place and functioning at the time of the fall. The | F 323 | | |

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| F 323 | Continued From page 46<br>report does not stated staff was responding to the alarm when R17 was found on the floor. The cause listed, "Probably attempting to transfer without assist from bed to w/c. There were no new interventions recommended.<br>On 12/24/10 at 9:20 PM, R17 had an unwitnessed fall in her bedroom. The Incident Report stated she fell out of the wheelchair. There is no mention of alarm on the incident report. Was the alarm in place, was it sounding? The probable cause listed is "fell asleep, slid out of wheelchair." The recommended intervention listed, "Staff will place resident in eye sight of staff if she refuses to go to bed at bedtime."<br>Despite R17's documented attempts to transfer herself without staff assistance, R17 was observed on two different occasions when she was left unsupervised on the toilet. On 1/19/11, at 10:21 AM, R17 was observed in the bathroom across from the 300 Nursing Station. R17 was seated in her wheelchair near the sink with her pants down around her thighs. R17 yelled, "Can you help me?" The bathroom door was closed, no staff were in the room. E6, CNA, was called to the bathroom and stated, "She goes by herself". E6 did assist R17, brought her out of the bathroom.<br>On 1/21/11 at 11:20 AM, R17 was seated on the toilet in the bathroom across from the Nurse's Station. She was alone in the bathroom, attempting to rise off the toilet without assistance. R17 was very unsteady, bent over at the waist. This surveyor called for assistance and E12, LPN, assisted R17 to pull up her pants and transfer from the toilet back to the wheelchair. E12 was asked if R17 was able to transfer herself independently and replied, "No." E6, CNA, stated, "We put her on the toilet. She usually puts on the light or yells out when she's done." | F 323 | | |

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| F 323 | Continued From page 47<br><br>6. A review of R6's physician's order sheet dated 1/1/11 indicated a diagnoses in part of; Depression, Diabetes, Legally Blind, and Incontinence. A review of R6's most recent Minimum Data Set dated 12/3/10, indicated R6 was Moderately Cognitively impaired, and needed staff assistance for all activities of daily living, hygiene, and transfers. The most recent care plan dated 12/2010 indicated; Potential for falls due to poor safety awareness. Interventions identified but not limited to; #3 - Transfer me to my w/c with the assist of 2 staff using a gait belt.<br>On 1/18/11 R6 was transferred from her wheel chair to her bed by E17 and E18, both Certified Nurses Aides (CNA). E17 applied a gait belt to R6. E17 and E18 both then attempted to stand and pivot R6, however, R6 did not straighten her legs or put weight on them. R6 remained with her legs slightly bent and feet brushing the floor as E17 and E18 lifted R6 by the gait belt and hoisted her onto the mattress. E17 and E18 both stated that R6 does not bear weight on her legs and is not alert enough to assist with the transfer.<br>On 1/20/11 at 12:20 PM, R6 was transferred from her bed to a geriatric recliner chair by E19 and E30, CNA's. R6 did not straighten her legs or put weight on them as she was moved. E19 and E30 continued the transfer and hoisting R6 with the gait belt and abruptly sitting R6 in the geriatric chair. At this time R6 yelled out "hey - hey" and then babbled incoherently. E19 and E30 then told R6 "we're just putting you in your chair" and R6 said "Yes, I'm in my chair". E19 and E30 both indicated R6 is not able to bear weight or assist during transfers.<br>On 1/22/11 at 9:15 AM, E1, Administrator, and E2, Director of Nursing, gave no further information as to why R6 was not being | F 323 | | |

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| F 323 | Continued From page 48<br>transferred in a safer and less abrupt manner.<br><br>B. Based on observation and interview, the facility failed store therapeutic creams in areas which are inaccessible to residents on two of three resident hallways for one day of observation.<br><br>Findings include:<br><br>1. On 1/19/11, from 10:06 AM until 10:06 AM until at least 2:00 PM, in the 300 hall unlocked clean utility room, there was an unlocked cabinet with the following creams:<br>1 tube of Calmoseptine<br>5 tubes of Extra Protective Cream<br>3 tubes of Antifungal Cream<br>The warning label on these creams indicated if accidental ingestion occurred contact Poison Control immediately.<br><br>2. On 1/19/11, from 10:21 AM until 2:10 PM, in the unlocked 300 shower room, there was the following in an unlocked drawer:<br>2 tubes of Calmoseptine<br>2 tubes of Extra Skin Barrier<br>the warning labels on these creams indicated if accidental ingestion occurred contact Poison Control immediately.<br><br>3. On 1/19/11, from 10:37 AM until 2:17 PM, in the unlocked 400 hall clean utility room, there were the following creams in an unlocked drawer:<br>3 tubes of Calmoseptine<br>6 tubes of Extra Skin Barrier<br>The warning labels on these creams indicated if accidental ingestion occurred contact Poison Control immediately;.<br>On 1/21/11, at 9:10 AM, E29, | F 323 | | |

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| F 323 | Continued From page 49<br>Consultant/Operational Director, confirmed there were locks on the doors of each aforementioned area; however, staff were not locking these areas. | F 323 | | |
| F 325 SS=G | 483.25(i) MAINTAIN NUTRITION STATUS UNLESS UNAVOIDABLE<br><br>Based on a resident's comprehensive assessment, the facility must ensure that a resident -<br>(1) Maintains acceptable parameters of nutritional status, such as body weight and protein levels, unless the resident's clinical condition demonstrates that this is not possible; and<br>(2) Receives a therapeutic diet when there is a nutritional problem.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on record review, interview and observation it was determined that the facility failed to accurately assess, monitor and ensure that 3 (R3, R14, R15) of residents reviewed with a significant weight loss maintained acceptable parameters of weight. This failure resulted in R3 losing 15.2% of her body weight within a 6 month period.<br><br>The findings include:<br><br>1. R3 was admitted to the facility on 6/2/10, with diagnoses, in part, of dementia, urinary tract infection, history of falls, history of pressure sore and orthostatic hypotension. R3 has a physician order for No added salt diet with supercereal at breakfast and house supplement 60 milliliters 4 times per day. R3's weight was 119 pounds on | F 325 | | |

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| F 325 | Continued From page 50<br>admission in June, 2010. R3's weight decreased to 112 pounds in Sept., 2010; 107 in November, 2010-a 10% weight loss in less than 6 months; 101 pounds in December, 2010 and was 101.5 pounds in January, 2011. From June until December this is a 15.2% significant weight loss in a 6 month period.<br>Observation of the noon meal on 1/19/11 noted that R3 sat at the table from 12:00 PM until 1:00 PM with no staff assistance or encouragement to eat. R3 attempted to feed herself but consumed less than 25% of the meal. At 1:00 PM staff attempted to feed R3 and she consumed approximately 50% of the meal. R3 stated on 1/19/11 that she just isn't hungry but does try to eat as much as she can. R3 stated that she had lost a lot of weight.<br>The most current Minimum Data Set (MDS) dated 11/20/10 assessed R3 as requiring extensive assistance with one person physical help for eating. The MDS noted R3's weight at 107 pounds but checked "no" for identifying the weight loss of 10% in 6 months. R3 developed a stage 2 pressure ulcer on her coccyx as identified on 12/11/10 on the Pressure Sore Log. There is no significant change MDS done for R3's weight loss and pressure sore.<br>The care plan dated 6/15/10 through 3/15/11 does not reflect the MDS and states for R3's eating skills to "Set up my tray and I can feed myself. My appetite is not always good. encourage me to eat my meals." There is no weight loss identified in the care plan. The care plan for "Pressure Ulcers" states to "Monitor my wt. (weight) and notify my doctor of any significant wt loss". There is no documentation the physician was notified of the significant weight loss.<br>E2, Director of Nursing, and E21, Food Service | F 325 | | |

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| F 325 | Continued From page 51<br>Supervisor, could not identify nor could they provide documentation regarding residents with a significant weight loss when questioned on 1/25/11. E2 stated that residents with a weight loss were discussed weekly in a meeting and the dietitian was notified of the weight loss. E2 could not provide any documentation for R3 regarding her weight loss nor could she confirm the physician was notified of the significant weight loss.<br>The "Nutritional Progress Record" dated 11/4/10 by E23, Registered Dietitian, documented the weight for November at 107 pounds. The 10% significant weight loss is not identified. The note states "No new dietary prob (problem) noted, no SBD (skin breakdown). Noted wt (weight) stable past month." There were no further dietary recommendations.<br>On 12/20/10 the Dietitian noted R3's weight at 101 pounds and a stage 2 pressure sore on the coccyx. The note states "Noted wt (weight) (decreased), slowed since Oct." R3's weight had decreased from 108 pounds in October and 107 pounds in November to 101 pounds in December. This is a significant weight loss of 5.6% in one month. There were no new recommendations. The significant weight loss was not identified. There had been no new recommendations for any diet changes since the addition of the house supplement on 10/25/10 and a multi-vitamin on 12/21/10.<br>The facility policy and procedure titled "Monthly Resident Weights" states "The Charge Nurse or designee is responsible for reviewing residents weights monthly and evaluating changes and trends related to weight loss or gain". The policy states "If the resident has a significant weight gain or loss, Charge Nurse or designee will determine cause (if possible) and define any interventions | F 325 | | |

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| F 325 | Continued From page 52<br>that may be indicated to reverse undesirable trend". The policy also states "Notify physician of weight loss and review potential negative outcome for resident".<br><br>2. R14 was admitted to the facility on 11/5/09 with diagnoses, in part, of chronic obstructive pulmonary disease, fracture of the ribs and vertebrae, and syncope. R14 has a physician order for regular diet with thickened liquids, supercereal at breakfast, whole milk each meal. R14 experienced a significant weight loss of 6.5%. In December, 2010 R14 weighed 150 pounds and the weight decreased to 140.2 pounds in January, 2011.<br>E23, Registered Dietitian, noted on 1/6/11 that R14 weighed 140 pounds. There is no mention of a significant weight loss. The note states "Recommend cont'd (continued) diet therapy, cont (continue) supp (supplement) enc (encourage) po (passing orally) intake." There is no further dietary interventions.<br><br>3. R15's physician's order sheet, dated January 2011, noted she had a partial diagnosis of Congestive Heart Failure. Her physician's order, dated 12/16/10, noted she should receive Lasix (a diuretic), 40 milligrams (mg) daily.<br>R15's Weight Record indicated she weighed 146 pounds in October 2010. R15's Weight Record indicated she weighed 152.4 pounds in November 2010.<br>R15's nurse's noted, dated 11/27/10 indicated she was sent to the hospital and admitted with pneumonia. R15 was diuresed while in the hospital. She was readmitted to the facility on 11/30/10. Her weight on 12/1/10 was 132.8 pounds.<br>On 12/6/10, E23, Registered Dietician, | F 325 | | |

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| F 325 | Continued From page 53<br>completed R15's nutritional assessment. She indicated R15's hospital laboratory results, dated 11/29/10, noted she had a low albumin level of 3.0 (normal was 3.2- 5.5) and a low total protein level of 5.3 ( normal was 5.5 - 8.3). These values indicated R15 had poor nutritional status. E23 indicated R15's weight loss may have been related to her being hospitalized with pneumonia and decreased appetite. E23 recommended Resource (a nutritional supplement), 2.0 calories, 60 cc (cubic centimeters) four times daily and encourage food intake. There was no documentation in R15's medical record indicating R15's physician had been notified of E23's recommendation for a nutritional supplement. There was no documentation in R15's medical record indicating R15 was receiving a nutritional supplement.<br>R15's weekly weights for December 2010 were as follows:<br>12/1/10 - 132.8 pounds<br>12/10/10 - 134.2 pounds<br>12/17/10 - 140 pounds<br>12/22/10 - 143.2 pounds<br>12/27/10 - 146.8 pounds<br>1/2/11 - 154 pounds<br>Although R15 had a 14 pound weight gain from 12/1 to 12/27/10, R15's laboratory results, dated 12/29/10, indicated R15's albumin level was 2.9 and her total protein level was 4.3. Again, these results indicated poor nutritional status.<br>There was no documentation in R15's medical record from 12/24/10 through 1/2/11 indicating the facility staff were monitoring R15 for edema. Throughout out this period, R15 had a 10.8 pound weight gain. There was no documentation throughout this period indicating R15's physician was notified of this weight gain. There was no | F 325 | | |

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| F 325 | Continued From page 54<br>documentation indicating the facility had contacted E23, Registered Dietician, regarding R15's weight gain.<br>On 1/21/11, at at 2:20 PM, E23 indicated she was not aware that her dietary recommendation regarding R15 had not been followed.<br>On 1/25/11, at 8:45 AM, E1, Administrator, confirmed R15's physician had not been notified of R15's significant weight gain. | F 325 | | |
| F 329 SS=D | 483.25(l) DRUG REGIMEN IS FREE FROM UNNECESSARY DRUGS<br><br>Each resident's drug regimen must be free from unnecessary drugs. An unnecessary drug is any drug when used in excessive dose (including duplicate therapy); or for excessive duration; or without adequate monitoring; or without adequate indications for its use; or in the presence of adverse consequences which indicate the dose should be reduced or discontinued; or any combinations of the reasons above.<br><br>Based on a comprehensive assessment of a resident, the facility must ensure that residents who have not used antipsychotic drugs are not given these drugs unless antipsychotic drug therapy is necessary to treat a specific condition as diagnosed and documented in the clinical record; and residents who use antipsychotic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs.<br><br>This REQUIREMENT is not met as evidenced | F 329 | | |

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| F 329 | Continued From page 55<br>by:<br>Based on record review and interview the facility failed to provide appropriate diagnoses, and failed to identify and monitor behaviors for one (R8) of two sampled residents identified taking anti-psychotic medications.<br><br>Findings include:<br><br>1. A review of R8's record indicated he was admitted to the facility on 9/24/10, after having an amputation to his right leg. R8's diagnoses include in part; Congestive Heart Failure, Atrial Fibrillation, Senile Dementia - uncomplicated, Anxiety unspecified, and Lower limb amputation above the knee. The most recent Minimum Data Set indicated R8 was scored as 14, alert, and 0 for mood and behaviors concerns. R8's record review indicated he was admitted to the facility on Risperdal 0.5mg, at bedtime.<br>A review of the most recent care plan dated 10/5/2010, indicated "I take psychotropic medication because I sometimes get agitated. I am on Risperdal 0.5mg @ hs". "I will take the least effective dose of the medication prescribed by my doctor to help control the behaviors thru the next 90 days." Interventions included but not limited to: 2. Monitor for episodes of increased agitation and notify my doctor as soon as possible. However, no description R8's agitated behaviors (ex: yelling, crying)was listed on the care plan.<br>On 1/21/11, a review of R8's chart for behavior tracking failed to indicate any behavior tracking was ongoing for R8. On 1/21/11, E31, Social Service Director, stated that no behavior tracking had been done for R8, from 10/2010 thru 12/2010. E31, indicated that a behavior tracking sheet had just been started on 1/16/11. A review | F 329 | | |

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| F 329 | Continued From page 56<br>of the behavior tracking sheet dated 1/16/11 indicated R8 was on Risperdal for Irritability / Anxiety, however, no episodes of behavior were indicated as the page was blank.<br>On 1/25/11, at 9:15 AM, E1, Administrator and E29, Corporate Nurse stated, that R8 had diagnoses of dementia with agitation, and was put on Risperdal after his amputation, due to a noted increase in agitated behavior, and phantom pain. E1 stated R8 would at times forget he had the amputation and attempt to get up and had several falls. E1 indicated that R8 was not currently displaying any behaviors, and according to regulation, R8 would not be considered for a medication reduction until March 2011.<br>E29, indicated that the facility only charts behaviors "to the exception" and therefore since R29 had no recent behaviors, no behavior tracking was available.<br>On 1/21/11, in an interview, R8 sat in his wheel chair, he was alert and stated he was sad to have lost his leg. R8 remembered he had fallen, and was aware he needed to ask for assistance. R8 stated he found it hard to wait for help, stating staff would tell him they were coming, and then not come back.<br>On 1/27/11 in a telephone interview with E1, she indicated that the hospital discharge coordinator had voiced concern that R8 was having difficulty adjusting to his amputation, had tried to get up alone, and this was the reason R8 had been started on Risperdal at the hospital. A review of the physician progress notes dated 9/24, 10/28, and 12/6, failed to indicate R5 was having agitation.<br>The facility failed to provide evidence of on going monitoring of R5 for either agitation, or to indicate his response to treatment. No behaviors were readily identifiable or being actively | F 329 | | |

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| F 329 | Continued From page 57<br>monitored to show progress or lack of progress toward a therapeutic goal for the use of Risperdal. The care plan and behavior tracking failed to identify non-pharmacological interventions for R5, when agitated, to help improve R5's mental and physical well being. | F 329 | | |
| F 334 SS=E | 483.25(n) INFLUENZA AND PNEUMOCOCCAL IMMUNIZATIONS<br><br>The facility must develop policies and procedures that ensure that –<br>(i) Before offering the influenza immunization, each resident, or the resident's legal representative receives education regarding the benefits and potential side effects of the immunization;<br>(ii) Each resident is offered an influenza immunization October 1 through March 31 annually, unless the immunization is medically contraindicated or the resident has already been immunized during this time period;<br>(iii) The resident or the resident's legal representative has the opportunity to refuse immunization; and<br>(iv) The resident's medical record includes documentation that indicates, at a minimum, the following:<br>(A) That the resident or resident's legal representative was provided education regarding the benefits and potential side effects of influenza immunization; and<br>(B) That the resident either received the influenza immunization or did not receive the influenza immunization due to medical contraindications or refusal.<br><br>The facility must develop policies and procedures that ensure that –<br>(i) Before offering the pneumococcal | F 334 | | |

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| F 334 | Continued From page 58<br>immunization, each resident, or the resident's legal representative receives education regarding the benefits and potential side effects of the immunization;<br>(ii) Each resident is offered a pneumococcal immunization, unless the immunization is medically contraindicated or the resident has already been immunized;<br>(iii) The resident or the resident's legal representative has the opportunity to refuse immunization; and<br>(iv) The resident's medical record includes documentation that indicated, at a minimum, the following:<br>(A) That the resident or resident's legal representative was provided education regarding the benefits and potential side effects of pneumococcal immunization; and<br>(B) That the resident either received the pneumococcal immunization or did not receive the pneumococcal immunization due to medical contraindication or refusal.<br>(v) As an alternative, based on an assessment and practitioner recommendation, a second pneumococcal immunization may be given after 5 years following the first pneumococcal immunization, unless medically contraindicated or the resident or the resident's legal representative refuses the second immunization.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on record review and interview, the facility failed to offer influenza and pneumococcal vaccinations to 6 (R10, R12, R13, R17, R3, R5) of seventeen sampled residents. | F 334 | | |

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| F 334 | Continued From page 59<br><br>Findings include:<br><br>The facility's Immunization Policy dated 2009 states (in part) that, "Each current resident will be offered the influenza vaccination between October 1 and November 30 or as soon as possible if vaccine is not available.. unless ....medically contraindicated or the resident refused the vaccine or received it at another location...Residents admitted after October 1 through March 31 shall....receive an influenza vaccination upon admission.....The resident's medical records will indicate: a. That the resident or resident's legal representative was provided education regarding the benefits and potential side effects of influenza immunization. b. That the resident either received the influenza immunization or did not ....due to medical contraindications or refusal."<br>"Before offering the pneumococcal immunization, each resident ...or representative will receive education regarding the benefits and potential side effects of pneumococcal immunization. Each resident shall be offered a one-time pneumococcal immunization unless...medically contraindicated or previously immunized...."<br>On entry to the facility on 1/18/11, E2, Director of Nursing, was requested to provide the influenza and pneumococcal immunization records for the residents. E2 stated the educational material had been sent to residents' families and given to residents who are independent. E2 was unable to provide a list of immunized residents, stated, "It should be in the individual records of the residents."<br><br>1. R10 was admitted to the facility on 7/13/10. | F 334 | | |

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| F 334 | Continued From page 60<br>R10 did have a resident immunization record form in his chart; however, the form was blank. There is no documentation that he received educational material or offered either influenza or pneumococcal vaccinations. There is no documentation that he received Mantoux testing. R10 is alert, interviewable. R10 did not recall being offered immunizations.<br><br>2. R13 was admitted to the facility in 2007. Her immunization record documented she received influenza vaccination on 10/29/08. There is no documentation she or her Power of Attorney, POA, received educational material or offered immunizations in 2009 or 2010.<br><br>3. R17 was admitted to the facility in 2009. R17 received influenza vaccination on 10/27/09. There is no documentation that R17 or her POA received the educational material or offered immunizations in 2010.<br><br>4. R12 was admitted to the facility on 2/15/10. R12's Immunization Record documented she received Mantoux test. There is no documentation that she or her POA received educational material or was offered immunizations for influenza or pneumococcal vaccine.<br><br>5. A review of R5's record indicated she was admitted 1/6/11. Further review could find no information that R6 had either been offered a flu shot or pneumonia vaccine, or if they had been refused by R5. On 1/20/10, E20, Licensed Practical Nurse, stated that the admission paper work was missing from the chart that would indicate an acceptance or refusal of these vaccines. E20, stated she did not know herself if | F 334 | | |

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| F 334 | Continued From page 61<br>R5 had been offered the vaccines.<br><br>6. R3 was admitted to the facility on 6/2/10. There is no documentation that R3 was given educational material or offered influenza or pneumonia vaccines since her admission. | F 334 | | |
| F 425 SS=B | 483.60(a),(b) PHARMACEUTICAL SVC - ACCURATE PROCEDURES, RPH<br><br>The facility must provide routine and emergency drugs and biologicals to its residents, or obtain them under an agreement described in §483.75(h) of this part. The facility may permit unlicensed personnel to administer drugs if State law permits, but only under the general supervision of a licensed nurse.<br><br>A facility must provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of each resident.<br><br>The facility must employ or obtain the services of a licensed pharmacist who provides consultation on all aspects of the provision of pharmacy services in the facility.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, record review, and interview the facility failed to ensure medications for 9, (R25, R27, R29, R30, R31, R32, R33, R34 , R35) of 11 off sample residents that were no longer residing in the facility, and medications that were discontinued for two (R26, R28) of 11 off | F 425 | | |

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| F 425 | Continued From page 62<br>sample residents were appropriately disposed of.<br><br>Findings include:<br><br>1. On 1/25/11, at 10:25 AM, the medication room for the 300 hall was reviewed with E4, Licensed Practical Nurse, (LPN). The medication refrigerator contained 5 Bisacodyl 10 mg (milligram) suppositories for R25. E4 reported R25 was deceased.<br>A premixed bottled suspension of Cephalexin 250mg/ml (milliliter), over half full, labeled for R26 was in the refrigerator. E4 reported R26 had completed this dose of medication, and it should have been disposed of in cat litter.<br>In a locked medication cabinet, Aranesp 25 micrograms (mcg)/5ml injectable vial, labeled for R27, was stored. E4 stated, "I can't remember when she died."<br>An Enoxaparin solution 40 mg/0.4ml, injectable single dose prefilled syringe, labeled for R28, was on a shelf in the locked cabinet. E4 reported this medication is no longer ordered for R28, and should have been returned to the pharmacy.<br>Five Fentanyl Transdermal 25 mcg patches in a sealed box were stored with two Fentanyl Transdermal 25 mcg patches in a zip lock plastic bag, on a shelf labeled for R29. A Controlled Substance Log labeled for R29, with the correct amount of patches was attached to the medications with a rubber band. E4 reported R29 was deceased, "But I don't know when."<br>A stock bottle of Calcium 600 mg with Vitamin D and a bottle of Omega Fish Oil capsules, 1200 mg, labeled for R30 was also on a shelf in the locked cabinet. E4 confirmed R30 had been discharged home and the medications should have been sent home with her or picked up by | F 425 | | |

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|---|---|---|---|
| | 146122 | A. BUILDING _____ B. WING _____ | 01/27/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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| F 425 | Continued From page 63<br>R30's family.<br>A nearly empty, uncapped tube containing Mupirocin 2 % (per cent)/22 grams ointment was on the shelf, labelled for R 31. E 4 reported R 31 was also deceased.<br>The facility's policy entitled, 'Storage and Expiration of Drugs, Biologicals, Syringes, and Needles', reads, in part, "The facility should ensure that drugs and biologicals for expired or discharged residents are stored separately, away from use, until destroyed or returned to the provider. The facility should destroy or return all discontinued, outdated/expired, or deteriorated drugs or biologicals in accordance with Pharmacy return/destruction guidelines. Facility personnel should inspect nursing station storage areas compliance on a regularly scheduled basis."<br><br>2. On 1/25/11 at 9:50 AM, E11, LPN, and this surveyor reviewed the 500 Hall Medication Room. The refrigerator contained medications for four residents who no longer reside on the unit.<br>R32 had a box of Acetaminophen Suppositories.<br>R33 had a box of Compro (Prochlororpenazine) Suppositories.<br>R34 had a box of Compro Suppositories.<br>R35 had a bottle of Novolin Insulin 70/30.<br>E11 verified that none of these residents were currently residing on the 500 unit. E11 stated the medication should have been returned to the pharmacy per the facility's policy. | F 425 | | |
| F 441 SS=F | 483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS<br><br>The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission | F 441 | | |

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| F 441 | Continued From page 64<br>of disease and infection.<br><br>(a) Infection Control Program<br>The facility must establish an Infection Control Program under which it -<br>(1) Investigates, controls, and prevents infections in the facility;<br>(2) Decides what procedures, such as isolation, should be applied to an individual resident; and<br>(3) Maintains a record of incidents and corrective actions related to infections.<br><br>(b) Preventing Spread of Infection<br>(1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident.<br>(2) The facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease.<br>(3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.<br><br>(c) Linens<br>Personnel must handle, store, process and transport linens so as to prevent the spread of infection.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, interview and record review the facility failed to adequately develop an ongoing infection control program that; collects data to calculate and analyze infection rates, look | F 441 | | |

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| F 441 | Continued From page 65<br>for patterns, trends, and identify unusual occurrences. This systems failure has the potential to affect all residents living in the facility. The facility failed on two occasions to provide proper infection control techniques during peri care for one (R6) of 5 sampled residents.<br><br>Findings include:<br><br>1. On 1/25/11, at 10:30 AM, E2, Director of Nursing stated that the facility infection control log is initiated when nursing staff identify a resident with an infection. Nursing staff are to write the information on a log sheet kept at each nurses station. E2 indicated the logs are reviewed weekly, and the information is added it into the computer program as a "line listing". E2 indicated the resident information is checked monthly against pharmacy data that shows which residents are taking antibiotics. E2, stated the information is tallied monthly to indicate types and locations of infections in the building, and the information is presented monthly and again quarterly to the QA committee for review.<br>On 1/25/11 at 10:30 AM, a request was made by the surveyor for the hand written infection logs for the months of October 2010 through January 2011. E2 stated she only had the information for October and January. E2 indicated that the former Assistant Director of Nursing, ADON, had filed the information, and after some looking, E2 did not know where the other logs had been placed. After reviewing the logs with E2, she verified that the information was incomplete for identifying Organisms, was incomplete for location of infected wounds, did not indicate any residents placed on isolation precautions, and failed to give information for follow up to infections when the course of antibiotics were completed. | F 441 | | |

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| F 441 | Continued From page 66<br>A review of the October 2010 Infection Control Line Listing (computer data) for numerous residents failed to indicate if a culture was done, for 7 identified residents with UTI's, no organism was listed. For 16 of 25 skin infections, the log failed to identify the location, type, or any culture results of the infection. Three residents listed with C-diff were listed as "community infection" but had no indication if they were on any type of isolation and the date of culture was not listed. For one resident with MRSA, the log also did not indicate if the resident had been put on isolation. The Control Line Log also failed to indicate any dates and cultures done on any of the 31 residents identified with infections. A review of the Control Line logs for the months of September, July and June also failed to have necessary information regarding infections of residents in the facility. E2 stated she was not able to locate the Control Log for November 2010.<br>On 1/25/11, E3, Care Plan Nurse, brought a hand written tally sheet indicating the resident infection totals for the months of Sept, Oct, Nov (no year identified). E3 stated that each month the "types" of infections are tallied for the QA committee. A review of the tally for October indicated; 31 Antibiotics, 10 Upper Respiratory, 2 C-diff, 6 skin, 13-Urinary Tract Infection. It was noted that the resident with MRSA in October 2010 was not identified in the tally. The sheet also had hand written information on cultures done in the month of November. The sheet failed to indicate any trends, residents on isolation, if the infection was facility acquired or not, or any other pertinent data to track / trend infections in the facility.<br>A review of the facility Infection Control Program Policy stated, "This facility shall have an | F 441 | | |

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| F 441 | Continued From page 67<br>active infection control program carried out by a nurse designated as the Infection Control Nurse, and overseen by an inter-disciplinary infection control committee. Program approaches included but not limited to; #1. Effective measures to prevent, identify, and control infections acquired in the facility or brought into this facility from the community. #3. A practical system for report, evaluating, and maintaining records of infections among residents. #12. The development and revision of all forms used for collection and collation of data that relate to the program."<br>On 1/25/11, after reviewing the above information E2 stated that the former Assistant Director had been responsible for collecting data and correlating it for the infection control program. E2 stated that the ADON had quit in November 2010, and some of the data could not be located. E2 stated she was attempting to train the current QA/Treatment nurse to take over the program. E2 indicated that the infection control program was also in process of being revised for how information was obtained and recorded.<br><br>2. A review of R6's physician's order sheet dated 1/1/11 indicated a diagnoses in part of; Depression, Diabetes, Legally Blind, and Incontinence. A review of R6's most recent Minimum Data Set dated 12/3/10, indicated R3 was Moderately Cognatively impaired, and needed staff assistance for all activities of daily living, hygiene, and transfers.<br>On 1/18/11 at 9:45 AM, E17 and E18, Certified Nurses Aides, put R6 to bed and began to do peri care on her. E18 went to the sink in R6's room and wet two wash cloths. No soap or skin cleanser was used on the wash cloths when cleansing R6. When peri care was completed E18 failed to remove her soiled gloves before | F 441 | | |

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| F 441 | Continued From page 68<br>continuing to provide care to R6.<br><br>b. On 1/20/11, at 12:05 PM, E19 and E , both Certified Nurses Aides, provided peri care to R6. R6 was incontinent with soft feces. E19, removed R6's soiled diaper. E19 then began to cleanse R6 buttocks and anal area of feces with wet wash cloths and skin cleanser. E19's gloves became soiled with feces smears as she worked, however she did not change them when moving from the anal area to the vaginal area. E19 failed to remove her gloves when done with care, and continued to redress and reposition R6 in bed with the same gloves used to give peri care.<br>On 1/21/11 at 3:00 PM, E2, Director of Nursing indicated she had no information regarding the R6's peri care, but, she would discuss the care of R6 with the staff involved. | F 441 | | |

Illinois Department of
PUBLIC HEALTH

Pat Quinn, Governor

525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.idph.state.il.us

December 14, 2011

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Ms. Laura Northway, Administrator
St Paul's Home
1021 West E Street
Belleville, IL 62220

REFERENCE: Provider #: 146122 / 0013920
Cycle Date: December 9, 2011
Survey Date: December 9, 2011
Survey Type: Health Annual Survey
LSC Survey: Under Separate Cover

Dear Ms. Northway:

On December 9, 2011, an inspection was conducted at St Paul's Home by staff of the Illinois Department of Public Health to determine compliance with federal certification requirements for nursing homes participating in the Medicare/Medicaid programs. As a result of that inspection, the facility was determined to not be in "Substantial Compliance" with regulatory requirements as found in Title 42, Code of Federal Regulations. A Statement of Deficiencies is enclosed (See Enclosure #1). An explanation of the scope and severity assigned to each deficiency can be found on Enclosure #2.

The facility must submit a Plan of Correction (POC) for all deficiencies at the "B" level or higher. "A" deficiencies must be corrected, but do not require a written POC. All required POCs must be submitted to the Department within 10 days after receipt of the written "Statement of Deficiencies" (CMS Form 2567L). **The POC cannot be submitted on the CMS-2567. Only the first page of the CMS-2567 must be submitted with the signature of the facility's representative and the date. The POC itself should be on separate sheets of paper which are attached to the first page of the CMS-2567. Please do not use proper names or trademarks in the POC. The POC is not to be used to dispute a deficiency or to make comments about the survey process. Information disputing a deficiency may be provided through the IDR process on separate sheets of paper, and comments about the survey process may be provided on the Provider Feedback Survey.**

Each POC ***must*** include:

- Corrective actions which will be accomplished for those residents found to have been affected by the deficient practice;
- How the facility will identify other residents having the potential to be affected by the same deficient practice;
- The measures the facility will take or systems the facility will alter to ensure that the problem will be corrected and will not recur. The facility must look at the existing system and determine if a change is necessary to correct the deficiency. If a system does not exist or if a revision to an existing system is necessary, then the facility must develop one.
- Quality Assurance Plans to monitor facility performance to make sure that corrections are achieved and are permanent.
- Dates when corrective action will be completed. **(To avoid remedies for this survey cycle, all deficiencies must be corrected no later than January 23, 2012).**

***Failure to submit a POC which includes the above-listed components within 10 days following receipt of the written "Statement of Deficiencies" may result in imposition of remedies, effective as soon as notice requirements are met.***

Facilities with no deficiencies or deficiencies at the "A", "B", or "C" levels are considered to be in "Substantial Compliance" with the regulations and will continue to be certified. Facilities NOT in "Substantial Compliance", i.e., deficiencies at level "D" or above, may be subject to remedies, including:

- Denial of Payment for all new Medicare/Medicaid admissions;
- Denial of Payment for all current Medicare/Medicaid residents;
- Civil Money Penalties of up to $10,000 per day per instance;
- Transfer of residents;
- Transfer of residents with facility closure;
- Termination of the provider agreement;
- Temporary management of the facility;
- State monitoring of the facility;
- Directed Plan of Correction;
- Directed In-Service training

Those facilities that have not achieved "Substantial Compliance" within 3 months following the survey will be subject to mandatory Denial of Payment for all New Program Admissions and Mandatory Termination from the Medicare/Medicaid programs if "Substantial Compliance" is not achieved within six months following the survey:

As a result of the above-referenced survey, ***proposed*** remedies for this facility are the following:

- Directed Inservice Training

The facility will be allowed an "Opportunity to Correct" the cited deficiencies before remedies are actually imposed. If all deficiencies are found to be in "Substantial Compliance" by the opportunity to correct date, the Department will withdraw its proposal that remedies be imposed. If, however, upon revisit, "Substantial Compliance" with ALL regulations has not been achieved, the Department will impose or recommend to the federal Centers for Medicare and Medicaid Services (CMS) to impose the above-listed proposed remedies. The Department may also recommend or impose an increase or decrease in those proposed remedies based upon the results of the revisit. Generally, all imposed Civil Money Penalties will be effective from the date of the original survey and will accrue until the date the facility achieves "Substantial Compliance" with the regulations or is terminated from the Medicare/Medicaid programs.

An acceptable POC will also serve as the facility's "Allegation of Compliance" thereby signifying that the facility attests that it will be in "Substantial Compliance" with all federal certification requirements by the date stated in the above paragraph. The Department will presume that the facility will be in "Substantial Compliance" based upon the acceptable POC.

**SUBMISSION OF EVIDENCE IN LIEU OF AN ONSITE FOLLOW-UP REVISIT**

Based upon the scope and severity level of the deficiencies cited, the facility is considered eligible to submit evidence in lieu of an on-site re-visit for any of the health deficiencies cited. This evidence must be submitted within thirty days of the survey exit date, should be clearly separated by tag number, and should show that the facility has:

- **Put into place systemic changes as identified in its Plan of Correction to ensure that the deficient practices will not recur, and;**
- **Initiated a program to monitor the continued effectiveness of its Plan of Correction.**

Evidence of correction should include documentation such as copies of written policies and procedures, **completed (i.e., filled out)** monitoring sheets, outline of in-service programs, in-service attendance sheets, quality assurance monitoring reports, committee minutes, licenses or other credentials, invoices, receipts, photographs or other credible evidence.

If the evidence that the facility submits is determined by the Department to show correction of the deficiencies, an on-site health revisit will not be conducted. If the evidence does not prove correction, or is not submitted in a timely manner, an on-site revisit will be scheduled. Please submit the above evidence as soon as possible after the receipt of this notice.

If the Life Safety Code portion of an Annual survey has deficiencies that are not in substantial compliance, the enforcement cycle may still continue after review of evidence for the health portion of the survey. Remedies may be imposed based upon the Life Safety Code survey if the facility remains not in substantial compliance after the Life Safety Code revisit.

The facility may request an 'Informal Dispute Resolution' (See Enclosure #3) to challenge any deficiency that renders the facility not in substantial compliance ("D" or above). ***The Informal Dispute Resolution process will not delay the effective date of any enforcement action!*** If the facility requests an Informal Dispute Resolution without submitting an acceptable POC and the Department's decision, as a result of the dispute resolution process does not result in the deletion of the deficiency, please be advised that the Department will then proceed to impose or recommend imposition of the remedies.

Please submit all documents or other material relating to this survey to:

Illinois Department of Public Health
Division of Long-Term Care, Quality Assurance
525 West Jefferson Street, 5th Floor
Springfield, IL 62761-0001
Attn: Ted Zelinski

If you have any questions concerning this notice, please contact my staff at the address above or telephone 217-782-5180. You may also telephone the Department's TTY number for the hearing impaired at 1-800-547-0466.

Sincerely,

Richard L. Dees

Richard L. Dees, Chief
Bureau of Long Term Care

Enclosures

cc: IL Department Health Care and Family Services
IL Department on Aging
Division of LTC-FO
File 2

A Evidence/DA

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 146122 | A. BUILDING _____ B. WING _____ | 12/09/2011 |

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| F 000 | INITIAL COMMENTS | F 000 | | |
| F 221 SS=D | Annual Certification and Licensure Survey<br>483.13(a) RIGHT TO BE FREE FROM PHYSICAL RESTRAINTS<br><br>The resident has the right to be free from any physical restraints imposed for purposes of discipline or convenience, and not required to treat the resident's medical symptoms.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, record review, and interview, the facility failed to accurately assess the use and safety risks of lap cushions for 3 of 3 residents (R8, R9, R7) reviewed for physical restraints in the sample of 21.<br><br>Findings include:<br><br>1. On 12/6/11 at 2 PM, R8 was observed seated in her wheelchair near the Nurse's Station. R8 wheelchair had a lap cushion attached to both sides of the wheelchair arms. R8 was asked if she could remove the cushion. R8 looked up and responded to her name, but was unable to remove the cushion.<br>R8's Restraint/Adaptive Device Evaluation dated 8/27/11 documented the device used by R8 could be considered a restraint. R8's diagnosis listed for use of the restraint is Dementia. The Evaluation was checked "After assessment the facility has determined no need for restraint, but has determined the need for adaptive device that can be removed independently by the resident and will increase functional ability or posture - for | F 221 | | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

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| F 221 | Continued From page 1<br>positioning."<br>The Evaluation does not identify any risk factors for restraint. The summary stated, "Lap (cushion) and bed alarm for assistance in reminding resident to call for help when needed."<br>The facility's Restraint Policy (undated), defined Physical Restrain: "Any manual method or physical device, material, equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body.....A chair may be considered a restraint IF IT PREVENTS RISING in a resident who would otherwise be capable of rising from a chair.....Risks include: incontinence, decreased range of motion, decreased ability to ambulate, symptoms of withdrawal or depression, reduced social contact, and potential for strangulation or entanglement."<br>According to an incident report dated 10/27/11, R8 was found on the floor in front of her wheelchair. The lap cushion remained on the wheelchair. The facility's incident report stated (in part), "slid down the w/c (wheelchair)....noted lap cushion still on w/c, probably ....slid down the w/c." There was no reassessment for the use of the lap cushion after R8 slid under the lap cushion.<br>On 12/8/11 at 9:35 AM, E1, Administrator, stated the facility has been working to reduce restraint use in the facility. E1 stated the Care Plans had been updated, and risks for restraints were addressed in the Care Plans.<br><br>2. On 12/6/11 at 1:30 PM, R7 was seated in her wheelchair in the hallway near her room. R7 wheelchair had a lap cushion attached to both sides of the wheelchair arms. R7 could not | F 221 | | |

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| F 221 | Continued From page 2<br>remove the lap cushion herself when asked.<br>R7's Care Plan dated 11/15/11 identified the problem , "018 - Physical Restraints.....I ambulate in my w/c (wheelchair) with my lap (cushion) intact to help promote an upright positioning while in my wheelchair....."<br>R7's Restraint/Adaptive Device evaluation dated 8/30/11 failed to assess for any potential risks related to the use of the restraint. The evaluation had a check mark for "After assessment the facility has determined no need for restraint, but has determined the need for adaptive device that can be removed independently by the resident and will increase functional ability or posture."<br><br>3. On 12/06/11 at 9:35 AM, R9 was laying in bed on a scoop mattress.. R9 had bilateral above the knee amputations of the lower extremities. A pommel cushion was in R9's tilt back wheelchair. A soft lap cushion was laying on the floor next to R9's bed side stand. A pressure pad alarm was on R9's bed.<br>On 12/06/11 at 1:30 PM, E5 and E7, Certified Nurses Aides, (CNA's) transferred R9 to the tilt back wheelchair with a mechanical lift. R9 was lifted onto the pommel cushion, with a soft lap cushion applied. E5, CNA, reported the pommel cushion, soft lap cushion and the tilt back wheelchair are used to help R9 with positioning due to his bilateral amputations and confusion.<br>The Treatment Administration Record, (TAR) for December 2011 documents, "May use (soft lap cushion) and bed alarm for safety awareness." The facility's Restraint/Adaptive Device Evaluation for R9, dated 9/23/11, | F 221 | | |

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| F 221 | Continued From page 3<br>addresses the bed alarm and the soft lap cushion as potential restraints. The evaluation determined both the soft lap cushion and bed alarm were not used as a restraint, but were "adaptive devices that can be removed independently by the resident (R9)". No evaluation for the use of the pommel cushion device was completed or found in R9's clinical record. No risks were identified for the use of the devices to prevent falls or to provide positioning aides for R9. For potential risks factors for restraint, R9 is incorrectly documented as having no loss of ambulatory ability. The consent for the use of the devices is unsigned and incomplete.<br>The facility's policy and procedure, entitled, 'Restraints/Devices' documents "Assessment of need for restraint use will be done on admission, at regularly scheduled Interdisciplinary Care Plan Conferences and as needed by the interdisciplinary team and/or the resident at Risk Team." | F 221 | | |
| F 272 SS=D | 483.20(b)(1) COMPREHENSIVE ASSESSMENTS<br><br>The facility must conduct initially and periodically a comprehensive, accurate, standardized reproducible assessment of each resident's functional capacity.<br><br>A facility must make a comprehensive assessment of a resident's needs, using the resident assessment instrument (RAI) specified by the State. The assessment must include at least the following: | F 272 | | |

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| F 272 | Continued From page 4<br>Identification and demographic information;<br>Customary routine;<br>Cognitive patterns;<br>Communication;<br>Vision;<br>Mood and behavior patterns;<br>Psychosocial well-being;<br>Physical functioning and structural problems;<br>Continence;<br>Disease diagnosis and health conditions;<br>Dental and nutritional status;<br>Skin conditions;<br>Activity pursuit;<br>Medications;<br>Special treatments and procedures;<br>Discharge potential;<br>Documentation of summary information regarding the additional assessment performed on the care areas triggered by the completion of the Minimum Data Set (MDS); and<br>Documentation of participation in assessment.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, record review, and interview, the facility failed to accurately assess the use and safety risks of lap cushions for 3 of 3 residents (R8, R9, R7) reviewed for physical restraints in the sample of 21.<br><br>Findings include: | F 272 | | |

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| F 272 | Continued From page 5<br>1. On 12/6/11 at 2 PM, R8 was observed seated in her wheelchair near the Nurses Station. R8's wheelchair had a lap cushion attached to both sides of the wheelchair arms. R8 was asked if she could remove the cushion. R8 looked up and responded to her name but was unable to remove the cushion.<br>R8's Restraint/Adaptive Device Evaluation dated 8/27/11 stated the device used by R8 could be considered a restraint. R8's diagnosis listed for use of the restraint is Dementia. The Evaluation was checked "After assessment the facility has determined no need for restraint, but has determined the need for adaptive device that can be removed independently by the resident and will increase functional ability or posture - for positioning."<br>The Evaluation does not identify any risk factors for restraint. The summary stated, "Lap (cushion) and bed alarm for assistance in reminding resident to call for help when needed."<br>The facility's Restraint Policy (undated), defined Physical Restrain: "Any manual method or physical device, material, equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body.....A chair may be considered a restraint IF IT PREVENTS RISING in a resident who would otherwise be capable of rising from a chair.....Risks include: incontinence, decreased range of motion, decreased ability to ambulate, symptoms of withdrawal or depression, reduced social contact, and potential for strangulation or entanglement."<br>According to an incident report dated 10/27/11, R8 was found on the floor in front of her wheelchair. The lap cushion remained on the | F 272 | | |

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| F 272 | Continued From page 6<br>wheelchair. The facility's incident report stated (in part), "slid down the w/c (wheelchair)....noted lap cushion still on w/c, probably ....slid down the w/c." There was no reassessment for the use of the lap cushion after R8 slid under the lap cushion.<br>On 12/8/11 at 9:35 AM, E1, Administrator, stated the facility has been working to reduce restraint use in the facility. E1 stated the Care Plans had been updated and risks for restraints were addressed in the Care Plans.<br><br>2. On 12/6/11 at 1:30 PM, R7 was seated in her wheelchair in the hallway near her room. R7 wheelchair had a lap cushion attached to both sides of the wheelchair arms. R7 could not remove the lap cushion herself when asked.<br>R7's Care Plan dated 11/15/11 identified the problem , "018 - Physical Restraints.....I ambulate in my w/c (wheelchair) with my lap (cushion) intact to help promote an upright positioning while in my wheelchair....."<br>R7's Restraint/Adaptive Device evaluation dated 8/30/11 failed to assess for any potential risks related to the use of the restraint. The evaluation had a check mark for "After assessment the facility has determined no need for restraint, but has determined the need for adaptive device that can be removed independently by the resident and will increase functional ability or posture."<br><br>3. On 12/06/11 at 9:35 AM, R9 was laying in bed on a scoop mattress.. R9 had bilateral above the knee amputations of the lower extremities. A pommel cushion was in R9's tilt back wheelchair. A soft lap cushion was laying on the floor next to | F 272 | | |

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| F 272 | Continued From page 7<br>R9's bed side stand. A pressure pad alarm was on R9's bed.<br>On 12/06/11 at 1:30 PM, E5 and E7, Certified Nurses Aides, (CNA's) transferred R9 to the tilt back wheelchair with a mechanical lift. R9 was lifted onto the pommel cushion, with a soft lap cushion applied. E5, CNA, reported the pommel cushion, soft lap cushion and the tilt back wheelchair are used to help R9 with positioning due to his bilateral amputations and confusion.<br>The Treatment Administration Record, (TAR) for December 2011 documents, "May use (soft lap cushion) and bed alarm for safety awareness." The facility's Restraint/Adaptive Device Evaluation for R9, dated 9/23/11, addresses the bed alarm and the soft lap cushion as potential restraints. The evaluation determined both the soft lap cushion and bed alarm were not used as a restraint, but were "adaptive devices that can be removed independently by the resident (R9)". No evaluation for the use of the pommel cushion device was completed or found in R9's clinical record. No risks were identified for the use of the devices to prevent falls or to provide positioning aides for R9. For potential risks factors for restraint, R9 is incorrectly documented as having no loss of ambulatory ability. The consent for the use of the devices is unsigned and incomplete.<br>The facility's policy and procedure, entitled, 'Restraints/Devices' documents "Assessment of need for restraint use will be done on admission, at regularly scheduled Interdisciplinary Care Plan Conferences and as needed by the interdisciplinary team and/or the resident at Risk Team." | F 272 | | |
| F 280 SS=D | 483.20(d)(3), 483.10(k)(2) RIGHT TO PARTICIPATE PLANNING CARE-REVISE CP | F 280 | | |

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| F 280 | Continued From page 8<br><br>The resident has the right, unless adjudged incompetent or otherwise found to be incapacitated under the laws of the State, to participate in planning care and treatment or changes in care and treatment.<br><br>A comprehensive care plan must be developed within 7 days after the completion of the comprehensive assessment; prepared by an interdisciplinary team, that includes the attending physician, a registered nurse with responsibility for the resident, and other appropriate staff in disciplines as determined by the resident's needs, and, to the extent practicable, the participation of the resident, the resident's family or the resident's legal representative; and periodically reviewed and revised by a team of qualified persons after each assessment.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on record review and observation the facility failed to timely update resident care plans for 2 of 21 residents (R1, R20) reviewed for care plans in the sample of 21.<br><br>Findings include:<br><br>1. A review of R1 ' s chart indicated she was readmitted on 10/24/11, with some areas of bruising to her Left side and mid chest. On 12/7/11 at 10:00 AM, R1 stated she takes daily Coumadin, and does bruise easily. A review of R1's laboratory reports on 11/23/11 indicated a | F 280 | | |

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| F 280 | Continued From page 9<br>Protime of 17.9 and INR of 1.7. Both of these levels are elevated, and indicate a increased risk for excessive bleeding and / or bruising for R1.<br>On 12/8/11 at 10:00 AM, observation of R1 found her to have a large fading bruise across her left hand, and a dark blue bruise to her left shin. Further observation found R1 had a large fading dark blue and greenish bruise to her upper torso, under her arms and breasts.<br>On 12/8/11, a Resident Incident Report dated 11/19/11, was presented by E2, Director of Nursing. It documented that R1 had a large bruise to her torso from left mid back, under the left arm, across R1's breasts and under the right arm. In the report R1 made a statement that " An aide picked me up under my arms and put me in the wheel chair. " The report documented that the bruising occurred when R1 was being transferred to her wheel chair.<br>The Care Plan dated 11/19/11 failed to address R1's history of Coumadin use and high lab results. The Care Plan failed to documents R1's risk for additional bruising due to her use of Coumadin. The Care Plan failed to address the bruises sustained during the transfer of 11/19/11, and failed to have interventions to prevent R1 from becoming bruised in the future during a transfer.<br><br>2. R20 was admitted to the facility on 11/2/11. The hospital History and Physical dated 10/19/11 documented treatment of cellulitis in her right lower leg with intravenous antibiotics and debridement of the open wound to her right lower leg.<br>R20's Care Plan dated 11/14/11 identified problems with a non-healing wound to her right | F 280 | | |

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| F 280 | Continued From page 10<br>ankle. R20 is identified as a potential risk for a fall.<br>R20's wound continued to deteriorate after admission to the facility and on 11/11/11, R20 returned to the hospital. On 11/11/11, the Consultation Report with Z4, Surgeon, stated the wound was infected, with osteomyelitis involving the fibula bone and infection extending to the ankle joint. Z4 recommended a right above-knee amputation.<br>R20 returned to the facility on 11/24/11. The 11/24/11 Hospital Discharge documented a fall in the hospital the day before she returned to the facility. R20's admission orders dated 11/24/11 documented an order for bed alarm and lap cushion restraint for safety.<br>R20's Care Plan has not been updated to address current treatment needs for the amputation of her right foot, to address the increased risk for falls following the amputation, and the history of a fall at the hospital. | F 280 | | |
| F 309 SS=D | 483.25 PROVIDE CARE/SERVICES FOR HIGHEST WELL BEING<br><br>Each resident must receive and the facility must provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with the comprehensive assessment and plan of care.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, interview and record review, the facility failed to timely treat a skin infection for one of 21 residents (R1) reviewed for | F 309 | | |

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| F 309 | Continued From page 11<br>skin infections in the sample of 21; and failed to coordinate care and services with the physician for one of 21 residents (R4) reviewed for physicians visits in the sample of 21.<br><br>Findings include:<br><br>1. R4's Nurse's Notes dated 11/29/11 documented she was out of the facility with family for a doctor's appointment. The Nurse's Note at 7:00 PM documented "Res. (Resident) returned c (with) N.O. (new order) for Macrobid (an antibiotic) 100 mg (milligrams) PO (by mouth) BID (twice daily)." Her Nurse's Note dated 11/30/11 documented she was on Macrobid for a UTI (Urinary Tract Infection).<br>R4's Physician's Orders, Telephone Orders and Physician's Progress Notes were reviewed. There was no information or Physician's Order regarding R4 receiving an antibiotic for a UTI. There was no laboratory results in R4's medical record documenting R4 had a UTI.<br>On 12/7/11 at 1:00 PM during an interview with E10, Licensed Practical Nurse, LPN, she stated R4 had returned from her doctor's appointment on 11/29/11 with the prescription for the antibiotic already filled. E10 stated the facility did not receive the physician's order for the antibiotic. E10 stated R4 had a history of not bringing any paperwork back when she visited her primary care physician or other physicians. E10 confirmed the facility had no written order for R4's antibiotic, no progress note from Z3, R4's physician , documenting the visit or laboratory results confirming R4 had a urinary tract infection.<br><br>2. On 12/8/11, a review of R1's physician's order sheets indicated an order written on 11/16/11, | F 309 | | |

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| F 309 | Continued From page 12<br>"Nystatin Powder to buttock and open areas twice daily." A review of R1's Medication Administration Record (MAR) for the month of November 2011, documented R1 was treated with the Nystatin Powder from 11/17/11 through 11/30/11. From 11/31/11 through 12/8/11, no nurse signed off that the Nystatin had been applied to R1 buttocks, and the MAR was blank for all of these days.<br>On 12/8/11, 9:40 AM, in an interview with E11, Registered Nurse, RN, she stated she was not R1's regular nurse, and was unaware that R1 had an order for Nystatin. At 9:50 AM, R1's buttocks was observed with E11. R1's buttocks was noted to have a bright pink area approximately 2-inches wide on both left and right inner buttocks. It extended from the perineum to above her sacral area and appeared as a bright pink stripe running down R1's backside. The outer edges on both sides of the area appeared excoriated and had several small open red areas that pimpled the mid third of each buttocks. E11 stated that she had not been informed of R1's skin condition. E11 stated she had finished her AM medications for R1, but had not seen the order for the Nystatin on the MAR.<br>On 12/8/11 at 9:45 AM, R1 stated "she felt the rash had gotten better and did not hurt anymore. R1 stated, "it used to be really red, and would sting." On 12/8/11 at 10:10 AM, E3, Assistant Director of Nursing, ADON, stated "I am responsible for monitoring and ensuring residents wound and skin treatments are being followed as ordered. R1 had developed a fungal infection of her buttocks and had been put on the Nystatin to clear it up." E3 stated," I had not been told that R1 was started on the Nystatin on 11/16/11, and have not seen her buttocks. If I (E3) had been told, I would have monitored the condition of R1's | F 309 | | |

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| F 309 | Continued From page 13<br>skin and response to treatment weekly."<br>On 12/8/11 at 11:30 AM, E2, Director of Nursing, DON, stated, "It seems that when R1 ran out of the powder, the nurses did not reorder it." E1 stated she did not know why no nursing staff had noticed that the orders on the MAR were not being signed off, or questioned if R1 still needed treatment.<br>On 12/8/11 at 11:30 AM, E11, stated she had reached Z5, R1's physician, and Z5 had ordered the Nystatin Powder to be resumed for 10 days. | F 309 | | |
| F 315 SS=D | 483.25(d) NO CATHETER, PREVENT UTI, RESTORE BLADDER<br><br>Based on the resident's comprehensive assessment, the facility must ensure that a resident who enters the facility without an indwelling catheter is not catheterized unless the resident's clinical condition demonstrates that catheterization was necessary; and a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections and to restore as much normal bladder function as possible.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on interview and record review the facility failed to timely assess and treat a urinary tract infection for 1of 4 residents (R15) reviewed for infections in a sample of 21.<br><br>Findings include:<br><br>1. R15's Physician's Order Sheet (POS) dated 11/17/11 documented the following order, "Obtain UA (urinalysis) and C+S (culture/sensitivity), may | F 315 | | |

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| F 315 | Continued From page 14<br>straight catheter." The nurses notes on 11/17/11 failed to identify or document that R15 had any symptoms or complaints of a urinary tract infection (UTI). From 11/17 to 11/25/11 the nurses notes failed to have any documentation of R15's condition, or if the urinalysis had been obtained.<br>On 11/26/11, the nures notes documented that R15 had been straight cathetered for the urine specimen. On 11/29/11, the preliminary laboratory report indicated R15 had Escherichia coli, E-coli, in her urine. The POS on 11/29/11 documented R15 was to start on Bactrim for her infection, with the final culture result pending.<br>On 12/8/11 at 10:30 AM, E2, Director of Nursing, DON, also reviewed the above information and stated she did not realize it had taken nursing staff 10 days to obtain R15's urine specimen. E2, later in the conversation stated she "thought that the specimen had been obtained, but the lab forgot to pick it up and it had to be redone." Further review of the nurses notes failed to show any documentation of the catheterization having been redone.<br>E2 stated she did not know why from 11/17 through 11/26/11, the nursing staff failed to document whether or not R15 was having symptoms or increased complaints related to her UTI. E2, stated "as part of monitoring R15, for a possible UTI, the nurses notes should have been written and included R15's condition and symptoms or lack of symptoms."<br>On 12/9/11 a review of the facility's Infection Control Guidelines For Long Term Care Facilities: Surveillance, 7/1/99, documented; a more thorough assessment and action plan for residents with UTI's would include: Call the physician for appropriately collected urinalysis, | F 315 | | |

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| F 315 | Continued From page 15<br>monitor hydration status, and observe for worsening condition. | F 315 | | |
| F 322 SS=D | 483.25(g)(2) NG TREATMENT/SERVICES - RESTORE EATING SKILLS<br><br>Based on the comprehensive assessment of a resident, the facility must ensure that a resident who is fed by a naso-gastric or gastrostomy tube receives the appropriate treatment and services to prevent aspiration pneumonia, diarrhea, vomiting, dehydration, metabolic abnormalities, and nasal-pharyngeal ulcers and to restore, if possible, normal eating skills.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, interview and record review, the facility failed to appropriately administer medications to one of two residents (R9) observed with a gastrotomy tube in the sample of 21.<br><br>Findings include:<br><br>The Care Plan for R9 dated 7/29/11 documents "I had a recent G-tube (gastrostomy tube) inserted and may potentially be at risk for complications." Interventions in the Care Plan document, in part, "Monitor and document my intake and output (I&O) every shift, and flush tube with 200 cc (cubic centimeters) with H2O (water) after each feeding." R9's physician's diet order for December 2011 documents, "Two Cal HN, one can every 4 hours times five feedings daily, with 200 cc water flush after each feeding."<br>On 12/06/11 at 10:43 AM, E8, Licensed Practical Nurse, (LPN) poured 7.4 ml (milliliter) of | F 322 | | |

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| F 322 | Continued From page 16<br>Ferrous Sulfate Elixir into a plastic medication cup. In another medication cup, E8 placed one tablet of Ocular Vitamin, one Simvastatin 40 mg (milligram) tablet, two tablets of 325 mg of Acetaminophen, one tablet of Metoprolol Tartrate 25 mg, and one tablet of Namenda 10 mg, then crushed the tablets together and returned them to the medication cup. After crushing the medication, E8 poured the crushed medications into the medication cup containing the Ferrous Sulfate, and lightly stirred them together, forming a thick chunky mixture.<br>On 12/06/11 at 10:48 AM, E8 checked R9's G-tube for correct placement by instilling air into the G-tube, listening to R9's abdomen with a stethoscope, and trying to withdraw any residual stomach contents. E8 then administered 60 cc of water into the syringe attached to the G-tube, followed by half of the thick medication solution. The chunky solution was too thick to go through the G-tube via gravity, so E8 poured 40 cc of water into the syringe, and moved the syringe in a circular motion in an attempt to mix the medication to allow movement through the tube. The medication mixture would not flow through the G-tube, so E8 placed the plunger into the syringe and forced the medication through the G-tube. E8 stated, "I shouldn't have dumped them in all at once." E8 poured the remaining medication mixture from the cup into the syringe, followed by 100 cc of water at 10:58 AM, on 12/06/11. E8 confirmed this completed R9's 200 cc flush as ordered by the physician.. E8 removed his gloves and cleaned the graduated cylinder and syringe. E8 reported R9's 8:00 AM, medication pass for 12/06/11 was completed.<br>The facility's policy and procedure entitled, 'Administering Medications via Enteral Tube' | F 322 | | |

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| F 322 | Continued From page 17<br>documents, in part, "Dilute medications according to pharmacy guidelines. Verify that tablets can be crushed. When in doubt, call the pharmacy. Crush tablets to a fine powder and mix with warm water. Do not force the medication into the tube if it appears blocked. Flush G-tube with 30 ml of water. Administer medications one at a time. Flush the tube well between medications."<br>R9's I&O record for December 2011 has incomplete documentation on the day shifts of 12/02, 12/03, 12/04, and 12/05/11. The policy entitled, 'Care and Management of Tube feedings' documents, in part, "Documentation: Date and time feeding is initiated, type of formula, amount given, method of administration, rate of administration, amount of flush."<br>During an interview on 12/08/11 at 9:45 AM, E2, Director of Nursing (DON) reported E 8 is a new nursing graduate and was very nervous, which may have caused the problems with the medication pass for R9. | F 322 | | |
| F 323 SS=D | 483.25(h) FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES<br><br>The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, record review and interview the facility failed to safely transfer residents and failed to prevent bruising and a fall | F 323 | | |

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| F 323 | Continued From page 18<br>for 2 of 10 residents (R1, R15) reviewed with a history of falls in the sample of 21.<br><br>Findings include:<br><br>1. On 12/8/11, a review of R1's nurses notes documented the following for R1: 11/19/11 at 7:00 PM, " CNA came to get nurse to examine res (resident). Res has extreme bruising under both breasts, Left breast on side, and down Left side, and middle of chest. Res stated, " the aide picked me up under my arms and put me I the wheel chair. " MD notified and no new orders received. Will monitor closely. "<br>On 12/8/11, at 2:00 PM, E2, Director of Nursing, DON, stated that " she had investigated R1 ' s bruises. " E2 provided a report, Investigation of Unknown Injury, dated 11/19/11, which identified R1 as alert and oriented x 3. The report documented "CNA did not use sit to stand. CNA did not use lift to transfer." The report documented no date or signature of E2, to indicate when the investigation had been completed.<br>On 12/8/11, at 10:20 AM, R1 was interviewed with E11, Licensed Practical Nurse, present. R1 stated "that aide transferred me with a belt. It was too tight. When she lifted me from my bed to my wheel chair that belt pinched me all under my arms and under my breasts. It hurt at the time but not now. She just had that belt on me too tight."<br>Observation of R1's skin indicated a wide linear dark blue and green fading bruise that extended from R1's mid left back to R1's left flank and around under her breasts. A smaller bruise extended under R1's right arm.<br>A review of R1's chart indicated she was | F 323 | | |

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| F 323 | Continued From page 19 | F 323 | | |

readmitted on 10/24/11, with similar but smaller areas of bruising to her Left side and mid chest. R1 takes daily Coumadin, and stated that she does bruise easily.

On 12/8/11 a second Resident Incident Report dated 11/19/11, was presented by E2. It also documented R1's statement that "An aide picked me up under my arms and put me in the wheel chair." The report documented that R1 was in bed at the time of the incident. The report indicated R1 had extreme bruising to her breasts, down her lefts side, and around to her back. The report documented "CNA told to use Sit to Stand lift for all transfers."

On 12/8/11 at 11:15 AM, E2, DON, stated, "When I investigated this event, I found that R1 got bruised because the staff had somehow transferred R1, in a mechanical sling lift, and somehow R1's arms were not in the right position or hanging out of the sling and the sling is what caused the bruising. R1 was confused when this happened, so I don't think she remembers what exactly happened. R1 was bruised by the sling, not a belt. The aides have been told to use the Sit to Stand lift with R1." When asked about the reports stating R1's claim of being lifted by a belt, E2 stated that the reports done by the nurse were incorrect, and R1 was again confused in her account. E2 stated she was not sure which of her CNA staff was involved in the incident or had lifted R1. E2 stated " some of R1's bruises happened from an inappropriate transfer on 11/19/11 " .

On 12/8/11, E13, Physical Therapist, stated R1 had returned from the hospital on 10/24/11 after having her right leg amputated. R1 was a mechanical lift transfer at that time. E13 stated R1 had progressed in physical therapy, and was

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changed to a Sit to Stand transfer on or about 11/17/11. E13 stated the sit to stand transfer should be done with two staff.

On 12/9/11 at 10:00 AM, E2, stated she had talked to E14, Certified Nurses Aide, CNA, who gave a written statement: " About the third week in November, R1, wanted to get out of bed into her wheelchair. She refused the mechanical lift and the Sit to Stand, so I (E14) used a gait belt to transfer her to her wheel chair. " E2 stated it now appeared that R1's statement regarding how she got bruised, was correct. E2 stated she was misinformed about it being a hoyer transfer.

A review of the Care Plan dated 10/24/11 to 11/19/11 documented R1 was a mechanical sling lift transfer with two staff. On 11/19/11, the Care Plan was changed to a Sit to Stand transfer with two staff for R1. The Care Plan failed to address R1's ongoing risk for additional bruising especially during transfers due to her use of Coumadin.

2. On 12/8/11 a review of R15's Minimum Data Set, MDS, dated 9/20/11, documented R15 was alert. The Care Plan, updated 11/29/11, documents that R15 is at risk for falls due to muscular weakness in her lower legs, and is a Sit to Stand / mechanical lift with the assistance of two CNA's, Certified Nurses Aides.

A review of the Resident Fall Report / Fall Investigation dated 11/12/11 at 5:15 PM, documented R15 was lowered to floor by staff during a Sit to Stand lift. R15 was alert and oriented x 3, and was being assisted by one staff.

The potential cause of fall was documented as "Proper safety protocol not being utilized by resident."

The immediate intervention was documented as "Transfer with 2 person assist."

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| F 323 | Continued From page 21<br>The details of fall were documented as "CNA transferring resident from wheel chair to bed using sit to stand, noticed grommet had come undone from lift, summoned assistance. Resident lowered to floor." "No injuries."<br>The follow up review notes documented "Resident is sometimes non-compliant when a procedure is being done. Probably lowered to floor during transfer for safety." "Staff to be assured that equipment is properly being used. Explain procedure to resident before proceeding."<br>On 12/8/11 at 3:30 PM, R15 stated "That aide ( E15) was transferring me from my wheel chair to my bed. She had me sitting on the side of my bed, and I told her I was too close to the edge and would slip off if she didn't move me further back up on the bed. I told her this at least twice, but she said she knew what she was doing. So when E15 released the belt, I slid off the side of the bed just like I told her. She (E15) shouldn't be transferring me by herself. If she had the other girl here, they could have gotten me up on the bed better and I wouldn't have slid down." When asked what happened next R15 stated "I started yelling for help and that made her (E15) mad. She had to go out to the hall and get help. I am not small, and it took 3 or 4 staff to get me off the floor. I wasn't hurt, I just slid off the side of the bed. R15 stated that she was not aware of any malfunction of the lift. R15 stated again, the belt did not malfunction, E15 loosened it, and I slid off the bed. R15 stated that this is not the first time that only one staff has transferred her when using the mechanical lift, but it is the first time I have fallen because of it."<br>A review of the Owners manual, page 10, Lifting Preparation, documents that the manufacturer "recommends that two assistants | F 323 | | |

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| F 323 | Continued From page 22<br>be used for ALL lifting preparation, transferring from and transferring to procedures."<br>On 12/9/11 at 10:00 AM, E2 stated she was not aware R15 was being transferred by one staff at the time of this fall. E2 stated the facility policy is for two staff to be present during all mechanical lift transfers. | F 323 | | |
| F 387 SS=E | 483.40(c)(1)-(2) FREQUENCY & TIMELINESS OF PHYSICIAN VISIT<br><br>The resident must be seen by a physician at least once every 30 days for the first 90 days after admission, and at least once every 60 days thereafter.<br><br>A physician visit is considered timely if it occurs not later than 10 days after the date the visit was required.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on interview and record review, the facility failed to provide physician's progress notes and ensure residents are seen every 60 days by their physician for six of 21 residents (R4, R5, R6, R7, R9 and R10) reviewed for physician's visits in the sample of 21.<br><br>Findings include:<br><br>1. Z3, Physician, had written a progress note on 4/18/11 and 11/3/11 for R4. There were no other Physician Progress notes in R4's medical record.<br>On 12/7/11 during an interview with E10, Licensed Practical Nurse (LPN), she stated R4 did not have an in-house physician. E10 stated R4 goes out to see Z3, Physician. E10 stated the | F 387 | | |

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| F 387 | Continued From page 23<br>facility had difficulty with R4 bring back paperwork when she goes out to the physician.<br><br>2. R7's chart contained Physician Progress Notes for 4/14/11 and 11/17/11. The facility could not provide any additional progress notes for R7.<br><br>3. R5's chart contained Physician Progress Notes for 3/1/11, and 12/8/11 written by Z1, Physician. Z2, Clinical Nurse Practitioner (CMP) for Z1, had notes dated 6/6/11, 8/22/11, and 10/21/11. Neither Z1 or Z2 visited R5 in May 2011.<br><br>4. R6's chart contained Physician's Progress notes written by Z1, Physician, on 1/5/11, 6/27/11, and 12/8/11. Z2, CNP, had notes dated 8/31/11, 10/28/11, and 11/29/11. Neither Z1 or Z2 visited R6 from 1/5/11 until 6/27/11.<br><br>The facility's Medical Records Policy and Procedure for Medical Evaluations stated (in part), "Periodic medical examinations of each resident shall be made as needed, but the resident shall have one (1) documented medical examination every 60 days for a resident in an SNF bed.....When a physician extender is utilized, the physician will examine the resident each alternating examination."<br>On 12/8/11, E1, Administrator, stated that Z1, physician, was in the building to see his residents.<br><br>5. On 12/07/11, at 3:00 PM, a review of R9's Physician Progress Notes and Physicians Order Sheets (POS), for 2011 was completed. No Physician Progress Notes from Z1, Physician, were documented in the clinical record since | F 387 | | |

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| F 387 | Continued From page 24<br>1/05/11. The remainder of the visits and examinations for R9 were documented by Z2, CNP, for Z1.<br>On 12/08/11 at 10:00 AM, E9, Clinical Services Director confirmed Z1 was at the facility 12/08/11 to see R9. E9 confirmed no other Physician's Progress Notes could be located from Z1 for R9.<br><br>6. Review of the Physician Progress Notes in the medical record for R10 documented a physician visit on 4/25/11. There were no other visits documented in the chart. R10 stated her physician does not come to the facility, and she has to go out for a visit. | F 387 | | |
| F 425 SS=E | 483.60(a),(b) PHARMACEUTICAL SVC - ACCURATE PROCEDURES, RPH<br><br>The facility must provide routine and emergency drugs and biologicals to its residents, or obtain them under an agreement described in §483.75(h) of this part. The facility may permit unlicensed personnel to administer drugs if State law permits, but only under the general supervision of a licensed nurse.<br><br>A facility must provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of each resident.<br><br>The facility must employ or obtain the services of a licensed pharmacist who provides consultation on all aspects of the provision of pharmacy services in the facility. | F 425 | | |

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| F 425 | Continued From page 25 | F 425 | | |

This REQUIREMENT is not met as evidenced by:
Based on observation, record review and interview, the facility failed to provide medications in a timely manner for 1 of 1 resident (R9) in the sample of 21, and seven residents (R22, R23, R24, R25, R26, R27, R28) in the supplemental sample.

Findings include:

During tour of the facility on 12/06/11 at 9:45 AM, R27 reported she has not received her 8:00 AM medications. E8, Licensed Practical Nurse (LPN) was observed in the 300 hall with the medication cart, continuing to pass medications. On 12/06/11, at 10:15 AM, R27 stated, "It's 10:15 AM. We are just now getting our 8:00 AM medications. I don't know what happened." R28 confirmed she just received her 8:00 AM medications after R27. E8 was still passing medication to other residents.

On 12/06/11 at 10:25 AM, E8 administered five oral medications to R22. The Physicians Order Sheet (POS) for 12/2011 document the five medications are scheduled for administration at 8:00 AM.

On 12/06/11 at 10:43 AM, E8 administered six medications via a gastrostomy tube to R9. The POS for 12/2011 documents the six medications were scheduled to be given at 8:00 AM.

On 12/06/11 at 11:00 AM, E8 was interviewed related to the lateness of the 8:00 AM medication pass for 300 hall residents. E8 reported he had four more residents to pass medications to before the 8:00 AM medication pass was complete. E8

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 146122 | A. BUILDING _____ B. WING _____ | 12/09/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE |
|---|---|---|---|---|
| F 425 | Continued From page 26<br>reported R23, R24, R25, and R26 still had not yet received their medication as of 11:00 AM. E8 stated, "I had to deal with a resident throwing up this morning. That's why I'm late, and I'm nervous."<br>During and interview on 12/08/11 at 1;30 PM, E2, Director of Nursing, (DON) confirmed she was aware the 8:00 AM medication pass for the 300 hall was completed very late by E8. E2 reported E8 is "new nursing graduate and was very nervous." E2 confirmed she was not aware of any emergency on the 300 hall the morning of 12/06/11 that could be a potential cause of the late administration of medication by E8<br>The facility's policy entitled, "General Dose Preparation and Medication Administration', documents, in part, "Facility staff should verify each time a medication is administered, that it is the correct drug, at the correct dose, the correct route, at the correct rate, at the correct time, for the correct resident", and "Administer medications within timeframes specified by Facility policy." The policy further documents to document "when medications are given". | F 425 | | |
| F 441 SS=F | 483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS<br><br>The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection.<br><br>(a) Infection Control Program<br>The facility must establish an Infection Control Program under which it -<br>(1) Investigates, controls, and prevents infections in the facility; | F 441 | | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
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|---|---|---|---|---|
| F 441 | Continued From page 27<br>(2) Decides what procedures, such as isolation, should be applied to an individual resident; and<br>(3) Maintains a record of incidents and corrective actions related to infections.<br><br>(b) Preventing Spread of Infection<br>(1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident.<br>(2) The facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease.<br>(3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.<br><br>(c) Linens<br>Personnel must handle, store, process and transport linens so as to prevent the spread of infection.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, record review and interview, the facility failed to provide an effective policy and procedure for contact isolation, and disinfection of resident rooms to prevent the potential transmission of Clostridium Difficile (C-Diff). This has the potential to affect all 101 residents in the facility.<br><br>Findings include: | F 441 | | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
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|---|---|---|---|---|
| F 441 | Continued From page 28<br>1. On 12/06/11 at 9:30 AM, during the initial tour of the facility, E11, Licensed Practical Nurse, LPN, stated that R2 was currently on contact isolation for C-Diff. R2 was in a room with two roommates that did not have C-Diff. No sign alerting visitors was observed on the door entering the room.<br>A review of a laboratory test dated 11/25/11 documented C-Difficile = Positive. A physicians order dated 11/25/11 documented R2 was put on the antibiotic Flagyl 500 mg, every 8 hours x 14 days.<br>On 12/7/11, E11 stated that R2 had only one episode of loose bowel movement, and has had no loose stools or other symptoms of C-Diff since 11/26/11. E11 stated that although R2 had no further symptoms of C-Diff since 11/26/11, staff continued to follow contact precautions for gloving and disposing of R2's waste.<br>On 12/07/11 at 1:00 PM, in an interview E16, Housekeeping Supervisor, provided the Material Safety and Data Sheets (MSDS) for the chemical solutions used to clean residents rooms, and stated all resident rooms were cleaned with the following:<br>a. Centraz Quat k-2, quaternary ammonium compound. E16 stated that this cleaner is used on the floors and walls and on heavy soiled areas.<br>b. Lysol disinfectant / deodorizing all purpose cleaner. E16 stated that this cleaner is used on bed and bedside surfaces, doors and light cleaning in resident rooms.<br>c. Comet Cleaner with Bleach: MSDS documents; is composed of C12 alkyl sulfate, Sodium Hypochlorite 1-5%, and Sodium Hydroxide. E16 stated is used on all sinks, showers and toilets. | F 441 | | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
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| | 146122 | A. BUILDING _____ B. WING _____ | 12/09/2011 |

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| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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|---|---|---|---|---|
| F 441 | Continued From page 29<br>E16 stated that all resident rooms were cleaned the same. E16 stated she was aware that R2 had C-Diff. E16 had no different or specialized cleaning procedures for rooms of residents with C-Diff. E16 stated staff did double bag all waste taken from the room and used a separate mop, bucket and cleaning cloths for R2's room.<br>E16 stated she had no written policy to advise staff on the cleaning of resident rooms on contact isolation or for C-Diff. E16 stated she was unaware of the CDC guidelines related to C-Diff.<br>The Center for Disease Control, CDC, guidelines states under 11.1 Environmental measures "Certain pathogens (e.g.,...C. difficile.) may be resistant to some routinely used hospital disinfectants...Also, since C. difficile may display increased level of spore production when exposed to non-chlorine based cleaning agents, and the spores are more resistant than vegetative cells to commonly used surface disinfectants, some investigators have recommended the use of a 1:10 dilution of 5.25%...hypochlorite (household bleach) and water for routine environmental disinfection of rooms with patients with C. difficile when there is continued transmission...In one study the use of (bleach) was associated with a decrease in rates of C. difficile infections".<br>On 12/8/11 at 4:00 PM, the facility policy for Infection Control was reviewed with E1, Administrator and E2, Director of Nursing. The policy dated 11/18/02 documents the following:<br>"In order to prevent the spread of infection, this facility will adhere to standards of practice related to isolation as developed by the Center for Disease Control ad the Department of Health. 1. Body Substance Precautions (BSP) will be utilized by all staff in the management of resident | F 441 | | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 146122 | A. BUILDING _____ B. WING _____ | 12/09/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| ST PAUL'S HOME | 1021 WEST E STREET BELLEVILLE, IL 62220 |

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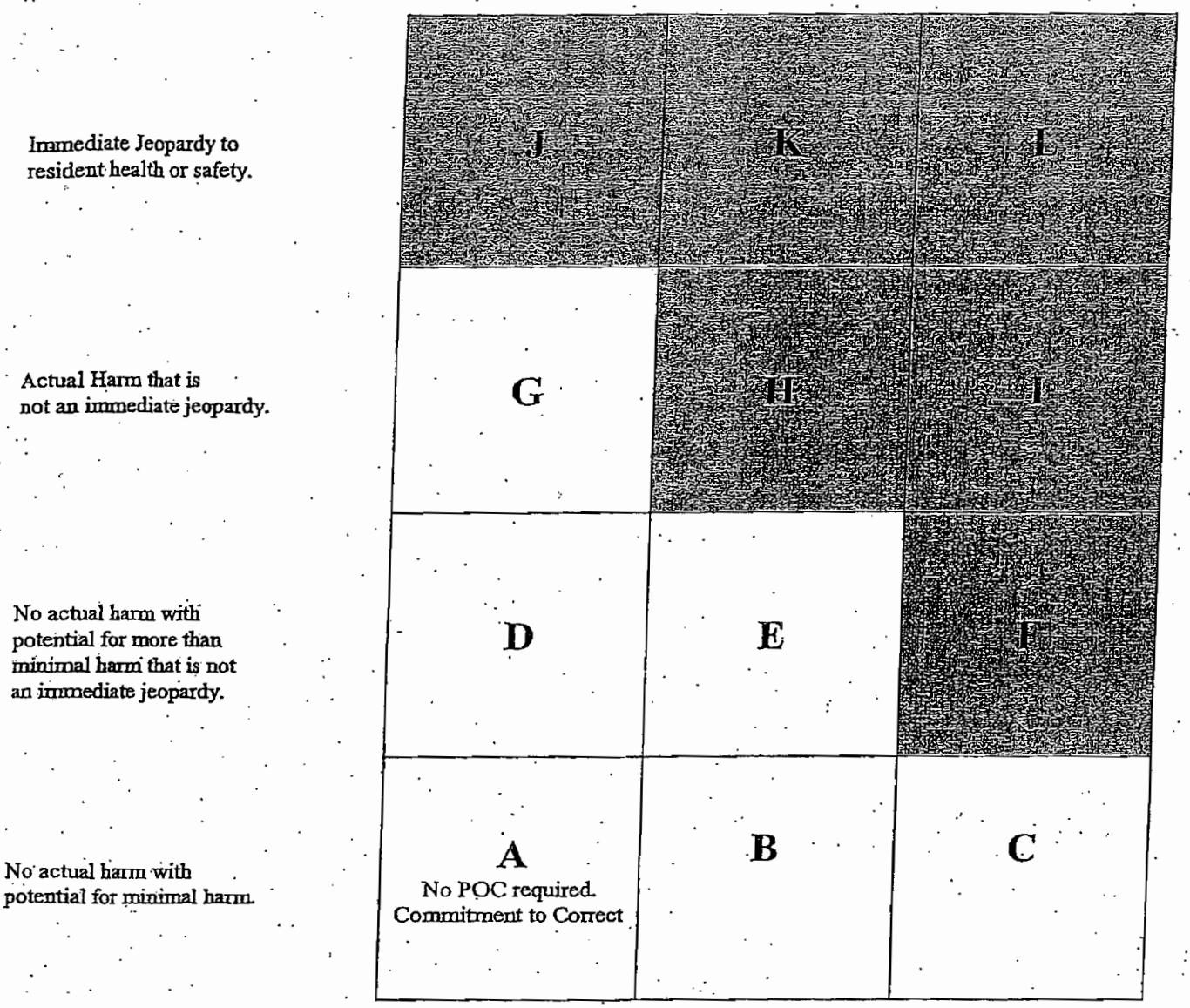
|---|---|---|---|---|
| F 441 | Continued From page 30<br>care and environment."<br>A review of the facilities "Body Substance Precautions" (7/1/99) documents "Although not identical with Standard Precautions, as recommended by the Centers for Disease Control and Prevention, or Universal Precautions as recommended by the American Hospital Association, and the Occupation Safety ad Health Administration. The policy direct staff to use Stop Sign Alert for diseases that are transmitted only by airborne access.<br><br>2. The facility's Resident Census and Condition of Residents, CMS 672, dated 12/06/11 documented a census of 101 residents. | F 441 | | |

# ENCLOSURE #2

## Severity




## SCOPE

* * * * * * Substandard quality of care is any deficiency in 42 CFR 483.13, Resident Behavior and Facility Practices; 42 CFR 483.15 Quality of Life; or 42 CFR 483.25 Quality of Care, that constitutes immediate jeopardy to resident health or safety, a pattern or widespread actual harm that is not immediate jeopardy, or widespread potential for more than minimal harm that is not immediate jeopardy with no actual harm.

00414

October, 2005

ENCLOSURE #3

# NOTICE OF AVAILABILITY OF INFORMAL DISPUTE RESOLUTION

## Regulatory Authority:

Pursuant to 42 CFR 488.331, a facility is allowed one opportunity to dispute cited deficiencies upon receipt of a formal Statement of Deficiencies (SOD) (Form CMS-2567L). This process is made available by the Department to ICF/MR facilities, as well as to skilled nursing facilities, nursing facilities and dually certified facilities. The Informal Dispute Resolution (IDR) is not an evidentiary hearing; it is an *informal* exchange of information between the facility and the Department or designated outside entity to determine whether or not a deficiency existed at the time of the survey. Additionally, facilities that have received a "Substandard Quality of Care" (SQOC) or an "Immediate Jeopardy" deficiency may also challenge the scope and severity of that deficiency.

## Exclusions from Informal Dispute Resolution:

Facilities may not challenge any other aspect of the certification survey process including:

- the *scope* and *severity* determinations of deficiencies other than SQOC and "Immediate Jeopardy" deficiencies
- *remedies* proposed or imposed by the survey and/or certification agency;
- *failure of the surveyors* to comply with survey procedures or process;
- *lack of standardization* in citing deficiencies among facilities; or
- *the outcome* of the IDR.

## Requests for Informal Dispute Resolution:

Facilities have a choice of having a **telephonic** or **written (desk)** IDR with the **Michigan Peer Review Organization (MPRO)** on a **fee-for-service** basis, or having a **written** IDR with the **Department** (limited to "D" level deficiencies or above) at no cost. Please note that all deficiencies that a facility wishes to refute from a single survey must be refuted with either MPRO or the Department. In other words, while a facility can choose to refute some deficiencies telephonically with MPRO while refuting other deficiencies from the same survey in writing with MPRO, it cannot choose to refute some deficiencies with MPRO and other deficiencies from the same survey with the Department.

To request an IDR, facilities must complete an "Informal Dispute Resolution Request Form" (attached) for all deficiencies for which an IDR is requested. All information on the form must be provided in order for the refutation to be considered, and the following deadlines must be met.

**For telephonic IDR's with MPRO**, the facility must submit its Request to the Department by the **sixth** calendar day after receipt of the Statement of Deficiencies (SOD) (or the next working day if the due date is on a weekend or holiday). In addition, the facility must submit an executed copy of the **Facility Service Agreement with MPRO for Illinois** (attached) and **two copies** of any supporting documentation the facility wishes to have considered at the IDR to the Department by the **tenth** calendar day after receipt of the SOD (or the next working day if the due date is on a weekend or holiday). The facility administrator will be contacted by an MPRO representative to schedule the telephonic IDR.

00415

For written IDR's the facility must submit its request by the tenth calendar day after receipt of the SOD (or the next working day if the due date is on a weekend or holiday). The request must be accompanied by all supporting documentation which the facility wishes to have considered with the IDR. If the request is for review by MPRO, then it must be accompanied by an executed copy of the Facility Service Agreement with MPRO for Illinois and two copies of the supporting documentation.

Supporting documentation cannot be submitted by facsimile, and must be submitted by the aforementioned time frames to be considered. The request for IDR may be submitted by facsimile,

Please Note:

The Informal Dispute Resolution process does not delay the imposition of remedies including Civil Money Penalties, Denial of Payment for New Admissions, or Terminations of Medicare/Medicaid program participation.

In accordance with federal requirements, the Department must retain final authority over all IDR decisions. Consequently, MPRO recommendations will be reviewed by the Department before a final decision is made.

Contact Information:

The Informal Dispute Resolution Request Form shall be addressed to Jon Siegel, Illinois Department of Public Health, Division of Long-Term Care Filed Operations, Quality Review Section, 525 West Jefferson Street, Fifth Floor, Springfield, Illinois, 62761. Telephone 217-524-9489 or the Department's TTY number at 1-800-547-0466.
Fax 217-785-4200.

Any questions specific to the MPRO process may be directed to the MPRO IDR Specialist at 248-465-7370 or to the Department.

# Informal Dispute Resolution Request Form

This form must be used to request an "Informal Dispute Resolution" for Federal Medicare/Medicaid certification deficiencies. **Requests for an "Informal Dispute Resolution" without a completed form will not be considered.** Mail this completed form to the address below within 6 days of receipt of the "Statement of Deficiencies" (Form CMS-2567) for telephonic IDR's, and within 10 days of receipt of Form CMS-2567 for desk reviews. Any supporting documentation the facility wants to have considered must also be submitted within 10 days after receipt of Form CMS-2567. For MPRO reviews, two copies of any evidence must be submitted along with the Facility Service Agreement with MPRO for Illinois.

Illinois Department of Public Health
Division of Long-Term Care, Field Operations
Quality Review Section – Attention: Jon Siegel
525 West Jefferson Street, 5th Floor
Springfield, IL 62761-0001

Date of Request: _____

IDR Requested With:

☐ MPRO

☐ IDPH

Date of Survey: _____

Facility Name & Address: _____

_____

_____

Provider #: _____

Please list all tag numbers of deficiencies to be refuted under the appropriate type of IDR request.

☐ Telephonic (MPRO only) _____

☐ Written (desk) _____

REASON FOR REQUEST (Circle One): Errors in Citation Details Incorrect Scope Incorrect Severity Wrong Tag Code New Information Available Code Interpretation Other _____

## FOR IDPH USE ONLY

IDR Conducted Date: _____ IDR Completion Date: _____

Tags Changed (What changed/Reason)

Telephonic _____

_____

Written (desk) _____

_____

_____

Tags Deleted _____

# Facility Service Agreement with MPRO for Illinois IDR

## Description of Work:

MPRO agrees to act as an impartial, third party reviewer for the second-level IDR appeal(s) based upon your request. Each IDR review will be completed by at least one qualified professional reviewer. A determination will be submitted to the Illinois Department of Public Health, Quality Review Section within 20 days of the receipt of both the case file from the IDPH and this signed service agreement. Citations of substandard quality of care or immediate jeopardy will be reviewed by two qualified professional reviewers for a consensus decision. Physician review of medical issues is available upon your request.

## Payment:

By your request, you agree to pay for each tag reviewed according to the following payment schedule:

- Base fee per tag — $210/ desk; $230/telephonic
- Professional reviewer hourly rate — $100 (1/2 hour minimum –all regular reviews)
- Physician review hourly rate — $250 (1/2 hour minimum –only by special request)

MPRO will mail an invoice upon completion of the requested review and payment is due within 30 days of the invoice. Please make your check payable to MPRO and mail to 22670 Haggerty Road, Suite 100, Farmington Hills, MI 48335-2611, Attention: Financial Services. MPRO reserves the right to request pre-payment.

## Indemnification:

You also agree to indemnify and hold MPRO, its directors, officers, employees, physicians, consultants and agents harmless from and against any claims, causes of action, liabilities, costs and /or expenses of any kind arising out of MPRO's performance of its responsibilities under this agreement associated with any lawsuit against said company, agents and physicians.

## Confidentiality:

MPRO agrees to treat all information received in the course of its review activities as confidential with respect to persons or entities, with the exception of designated administrators of your facility for communication purposes. MPRO further agrees that such confidential information may not be used for any purpose by MPRO except to fulfill its review obligations.

## Instructions:

Upon choosing an MPRO review, please complete your information below and sign this form. Mail the signed form along with your supporting documentation to: Jon Siegel, Illinois Department of Public Health, Division of Long-Term Care Field Operations, Quality Review Section, 525 West Jefferson Street, Fifth floor, Springfield, IL 62761.

MPRO will not initiate review of the IDR packet without the signed service agreement. Please note that IDPH will not delay enforcement actions pending an IDR review.

The parties have caused this Service Agreement to be signed by their duly authorized representatives and to be effective as of the date signed.

| | | | |
|---|---|---|---|
| Facility: | _____ | Facility: | MPRO |
| Signature: | _____ | Signature: | _____ |
| Print Name: | _____ | Print Name: | _____ |
| Title: | _____ | Title: | President and CEO |
| Date: | _____ | Date: | _____ |

Effective date 08-01-05

00418

Revised: 4/14/2008



MPRO 22670 Haggerty Road, Suite 100, Farmington Hills, MI 48335 ; (248) 465-7300 ; Fax (248) 465-7428

Illinois Department of
PUBLIC HEALTH

Pat Quinn, Governor

525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.idph.state.il.us

Dear Administrator:

In our continuing efforts to improve the quality of the Illinois Department of Public Health long-term care survey program, we have developed two questionnaires to solicit industry comments and resident/resident family comments about our survey process. We are seeking constructive feedback, positive and negative, that will be incorporated into our survey training program. This information gathering will be an adjunct to the on-going CMS oversight of the LTC survey process.

This information gathering process has two components. The first component will be a LTC or ICF/MR provider survey aimed at gathering industry comments relating to our surveyors' adherence to the prescribed survey protocol and communication with facility staff. The second component will be a survey form distributed to the Department on Aging Ombudsman for their use in soliciting comments from residents and resident families regarding the LTC or ICF/MR survey process and their interaction with our survey team.

The Department would greatly appreciate your completing the attached questionnaires and submitting it to the Illinois Department of Public Health, Bureau of Long-Term Care, 525 West Jefferson, Springfield, Illinois 62761 or faxing it to 217-524-6292. All information collected will be reviewed and collated by administrative staff in the Springfield Office and used to identify surveyor training needs. Individual provider feedback forms will not be shared with survey teams. **Completion of this form is optional.**

Sincerely,

Toni Colón

Toni Colón
Deputy Director
Office of Health Care Regulation

# PROVIDER FEEDBACK SURVEY

Please check the appropriate answer.

1. Type of Facility: Long-Term Care _____ ICF/DD _____

   Number of Deficiencies Cited: _____ Highest Scope/Severity (if applicable): ____

2. The first onsite survey task is the entrance conference. The survey procedure requires the team coordinator to inform the facility administrator about the survey protocol and to list the information/documents needed by the survey team. Was the survey protocol adequately explained to you during the entrance conference?

   _____
   _____
   _____
   _____

3. Effective communication between the survey team and facility staff is a vital part of our survey process. We direct our survey staff to maintain a professional demeanor when interacting with facility staff. Please share with us any positive or negative comments you have received regarding surveyor interactions with your staff.

   _____
   _____
   _____
   _____

4. Surveyors are directed to inform facility staff, during the course of the survey, of any aspects of facility operation that they believe will result in a significant finding of noncompliance. We believe that this "no surprises at the exit approach" allows the facility to quickly resolve serious problems or to be better prepared to discuss the issue at the exit conference. Did the surveyor(s) keep you informed of any serious findings during the course of the survey?

   _____
   _____
   _____
   _____

5. The objective of the exit conference is to inform the facility of the survey team's observations and preliminary findings. Surveyors are directed to allow facilities a reasonable amount of time to discuss the findings. If a facility chooses to present concise and pertinent information regarding the findings, surveyors are directed to review the information and determine whether it is sufficient to delete or modify their preliminary findings. Did the survey team adequately explain their findings and review any pertinent information provided to them?

_____

_____

_____

6. Do you have any suggestions as to how we can improve the survey process?

_____

_____

_____

_____

7. Do you have any other comments you would like to make regarding the survey process?

_____

_____

_____

_____

Facility Name: _____

Address _____

City/Zip. _____

Date of Survey: _____

Type of Survey: _____

Signature: _____

Position: _____

**Criterion 1125.800 Estimated Total Project Cost**

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: **Indicate the dollar amount to be provided from the following sources:**

**Cash and Securities:** Cash Contribution: $2 million

For the cash contribution, the necessary amount will be drawn from the reserves available to St. Paul's Home and its foundation which, collectively, provides access to over $2,500,000 million in cash on hand and redeemable investments. The is more than sufficient to satisfy this portion of the proposed financing.

**Gifts and Bequests:** Capitol Campaign: $1,000,000

In August 2012, St. Paul's Home contracted with The Rome Group to conduct a feasibility study that would assist St. Paul's Home evaluation of its ability to mount and successfully accomplish a capitol campaign to support the construction of the modernized facility. Historically, St. Paul's Home has benefitted from the generosity and charitable actions of its supporters.

The Rome Group, founded in 1991, has worked with hundreds of nonprofit and philanthropic organizations to help them operate more effectively and generate greater results in planning, fundraising and operations. An overview of the Rome group and its previous efforts is included.

Based on the results of the feasibility study, St. Paul's Home, in conjunction with its Foundation, initiated a capitol campaign in September 2012 with fundraising to begin in November 2012. The campaign goal is $2,000,000. At the time of loan closing the campaign expects to have raised $1,000,000 which will be used to support financing for the project.

**Debt:** HUD 232 loan: $27,475,000

The relevant details and framework of the loan are provided in the attached correspondence from Stifel Bank.

**All Other Funds and Sources:** Line of Credit: $1,137,496

St. Paul's Home will coordinate with local banks for a $1,200,00 Line of Credit with Accounts Receivable ("AR") collateral to support working capital needs until such time as it has accumulated adequate reserves to cover the issues associated with slow paying sources such as Medicaid. The current AR has five (5) months of Medicaid receivables so it proves a good gauge for AR collateral. This is a common practice in the industry. Additionally, even after St. Paul's Home has accumulated adequate reserves, St. Paul's Home will maintain access to this line of credit (or a portion thereof) to assist in having funds available to address any shortfall that might occur, thereby redressing any concerns regarding the Project's meeting all financial ratios.

ATTACHMENT 27

STIFEL
BANK & TRUST

*Relationship* Banking

December 26, 2012

Mrs. Susan Franklin, Operations Director
St. Paul's Home
1021 West E Street
Belleville, IL 62220

Re: St. Paul's Home
Belleville, Illinois, 62220
Modernized 108-Bed Skilled Nursing and 26-Unit Sheltered Care Facility

Dear Mrs. Franklin:

This is to advise that Stifel Bank & Trust will favorably entertain an application to provide construction and permanent first mortgage financing for the new construction of the above-referenced 108-bed skilled nursing facility (90 skilled beds and 18 intermediate beds designated for memory care) and the modernization of above-referenced 26-unit sheltered care facility in Bellville, Illinois.

Depending on market conditions at the time a commitment is issued to fund the loan assuming interest rates remain in the current market range, it is anticipated that the interest rate applicable to both the construction and permanent loan would be in the 3.50% to 4.00% range. The construction term is anticipated to be 16-18 months. The permanent loan term is anticipated to fully amortize over a 40 year period.

The total amount of the construction and permanent loan (together as one transaction) is anticipated to be $27,475,000. Both the construction and the permanent financing are anticipated to be provided utilizing mortgage insurance issued by the United States Department of Housing and Urban Development through Section 232 of the National Housing Act as amended.

We look forward to working with you on this transaction.

Very truly yours,

Richard K. Price
Senior Vice President

00423



955 EXECUTIVE PARKWAY. SUITE 216 | ST. LOUIS. MISSOURI 63141 | (314) 317-6900 | (877) STIFEL-1 | (314) 317-9680 FAX

MEMBER FDIC

therome group

14 north newstead | p: 314.533.0930
st. louis, mo 63108 | f: 314.533.2203

The Rome Group, founded in 1995, is in the business of strengthening nonprofits by providing insights, strategies and solutions through consulting relationships. Our work is guided by these beliefs and our values:

- Commitment to exceptional services.
- Customization and creativity to ensure results.
- Responsiveness to clients' needs and interests.

We have worked with over 100 nonprofit organizations of all sizes and from many different segments to help them assess their operations, raise more funds, set directions, and improve their effectiveness. Over 50% of our business is from repeat clients.

**SERVICES**

Development and Fundraising

The Rome Group works with nonprofit organizations to maximize their contributed income. We provide the following services: Capital Campaign Feasibility Studies and Plans; Capital Campaign Management and Implementation; Development Audits and Plans; Major Gifts Programs; Implementation of Fund Development Activities; and Fundraising Training for Staff and Board Members.

The following are among the organizations that The Rome Group has assisted with capital campaigns:

- Assistance League: $1.5 million to purchase and renovate a new facility.
- Cardinal Ritter College Prep High School: $25.5 million to build a new school
- Churchill Center and School: $10 million to build a new school.
- Family Care Health Centers: $1.5 million to match a federal grant for a new facility.
- Forest Park Forever: $100 million for park renovations.
- Meds and Foods for Kids: $2.9 million towards their $3.2 million campaign to date.
- The Sarah Community: $462,000 towards a $500,000 campaign to date.
- Tower Grove Park: $1.25 million to renovate a historic facility on the grounds.

Organizational Assessments

The Rome Group works with organizations to assess efficiency and effectiveness in delivery of mission, determine strengths and strategic advantages, identify new opportunities and enhance leadership.

Strategic Planning

The Rome Group's strategic planning process enables organizations to develop long-term vision, engage and educate constituents, build consensus, set clear direction and chart a path for growth. Our planning work also includes: building alliances, managing change and growth and facilitating mergers.

Leadership Development

The Rome Group provides counsel to staff and board leaders to increase their effectiveness in addressing leadership, fund development, management, and operating challenges.

# St. Paul's Home

## Accountants' Report and Consolidated Financial Statements

December 31, 2009 and 2008

# St. Paul's Home

## December 31, 2009 and 2008

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# Independent Accountants' Report on Financial Statements and Supplementary Information

Board of Directors
St. Paul's Home
Belleville, Illinois

We have audited the accompanying consolidated balance sheets of St. Paul's Home as of December 31, 2009 and 2008, and the related consolidated statements of operations, changes in net assets and cash flows for the years then ended. These financial statements are the responsibility of the Home's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of St. Paul's Home as of December 31, 2009 and 2008, and the results of its operations and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were made for the purpose of forming an opinion on the basic financial statements taken as a whole. The accompanying supplementary information is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has not been subjected to the procedures applied in the audits of the basic financial statements and accordingly, we express no opinion on it.

BKD, LLP

June 9, 2009

# St. Paul's Home
## Consolidated Balance Sheets
## December 31, 2009 and 2008

### Assets

| | 2009 | 2008 |
|---|---|---|
| **Current Assets** | | |
| Cash | $ 695,057 | $ 282,319 |
| Resident accounts receivable, net of allowance; 2009 - $44,500; 2008 - $98,000 | 559,969 | 1,039,948 |
| Supplies | 34,282 | 34,712 |
| Prepaid expenses | 134,118 | 50,086 |
| Total current assets | 1,423,426 | 1,407,065 |
| **Property and Equipment, At Cost** | | |
| Land and land improvements | 245,755 | 245,755 |
| Buildings | 9,705,853 | 9,584,035 |
| Equipment | 2,344,388 | 2,159,394 |
| | 12,295,996 | 11,989,184 |
| Less accumulated depreciation | 7,848,752 | 7,578,575 |
| | 4,447,244 | 4,410,609 |
| **Investments** | 870,649 | 710,102 |
| **Other Assets** | | |
| Loan issuance costs, net of amortization | 6,251 | 9,376 |
| Total assets | $ 6,747,570 | $ 6,537,152 |

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*See Notes to Consolidated Financial Statements*

## Liabilities and Net Assets

| | 2009 | 2008 |
|---|---|---|
| **Current Liabilities** | | |
| Accounts payable | $ 322,016 | $ 465,575 |
| Accrued expenses | 359,384 | 304,545 |
| Notes payable | 61,498 | 63,157 |
| Resident deposits | 4,974 | 4,377 |
| Total current liabilities | 747,872 | 837,654 |
| **Long-Term Debt** | 3,424,451 | 3,398,587 |
| **Deposits** | 14,990 | 14,490 |
| Total liabilities | 4,187,313 | 4,250,731 |
| **Unrestricted Net Assets** | 2,560,257 | 2,286,421 |
| Total liabilities and net assets | $ 6,747,570 | $ 6,537,152 |

# St. Paul's Home
## Consolidated Statements of Operations
## Years Ended December 31, 2009 and 2008

| | 2009 | 2008 |
|---|---|---|
| **Unrestricted Revenues, Gains and Other Support** | | |
| Net resident service revenue | $ 6,598,147 | $ 5,889,125 |
| Other | 91,092 | 1,177 |
| | 6,689,239 | 5,890,302 |
| **Expenses** | | |
| Salaries and wages | 3,127,183 | 2,979,957 |
| Employee benefits | 671,040 | 640,816 |
| Purchased services and professional fees | 806,310 | 603,039 |
| Supplies and other | 1,475,682 | 1,445,956 |
| Depreciation and amortization | 344,526 | 320,315 |
| Interest | 239,403 | 229,627 |
| Provision for uncollectible accounts | 10,418 | 54,937 |
| | 6,674,562 | 6,274,647 |
| **Operating Income (Loss)** | 14,677 | (384,345) |
| **Other Income (Expense)** | | |
| Investment return | (65,361) | (147,730) |
| Contributions | 127,503 | 103,277 |
| | 62,142 | (44,453) |
| **Excess (Deficiency) of Revenues Over Expenses** | 76,819 | (428,798) |
| Investment return - change in unrealized gains and losses | 197,017 | (56,703) |
| **Increase (Decrease) in Unrestricted Net Assets** | $ 273,836 | $ (485,501) |

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*See Notes to Consolidated Financial Statements*

# St. Paul's Home

## Consolidated Statements of Changes in Net Assets

## Years Ended December 31, 2009 and 2008

| | 2009 | 2008 |
|---|---|---|
| **Unrestricted Net Assets, Beginning of Year** | $ 2,286,421 | $ 2,771,922 |
| Excess (deficiency) of revenues over expenses | 76,819 | (428,798) |
| Investment return - change in unrealized gains and losses | 197,017 | (56,703) |
| **Unrestricted Net Assets, End of Year** | $ 2,560,257 | $ 2,286,421 |

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*See Notes to Consolidated Financial Statements*

# St. Paul's Home
## Consolidated Statements of Cash Flows
## Years Ended December 31, 2009 and 2008

| | 2009 | 2008 |
|---|---|---|
| **Operating Activities** | | |
| Changes in net assets | $ 273,836 | $ (485,501) |
| Items not requiring (providing) cash | | |
| Depreciation and amortization | 344,526 | 320,315 |
| Realized and unrealized (gains) and losses on investments | (106,441) | 241,562 |
| Changes in | | |
| Patient accounts receivable, net | 479,979 | (648,357) |
| Prepaid expenses | (84,032) | 30,639 |
| Deposits | 1,097 | (522) |
| Accounts payable and accrued expenses | (88,720) | 518,419 |
| Other current assets and liabilities | 430 | (7,156) |
| Net cash provided by (used in) operating activities | 820,675 | (30,601) |
| **Investing Activities** | | |
| Purchase of investments | (358,393) | (514,927) |
| Sales of investments | 304,287 | 492,830 |
| Purchase of property and equipment | (378,036) | (442,254) |
| Net cash used in investing activities | (432,142) | (464,351) |
| **Financing Activities** | | |
| Proceeds from issuance of long-term debt | 167,000 | 349,102 |
| Payments of long-term debt | (142,795) | (81,702) |
| Net cash provided by financing activities | 24,205 | 267,400 |
| **Increase (Decrease) in Cash** | 412,738 | (227,552) |
| **Cash, Beginning of Year** | 282,319 | 509,871 |
| **Cash, End of Year** | $ 695,057 | $ 282,319 |
| **Supplemental Cash Flows Information** | | |
| Interest paid | $ 239,403 | $ 229,037 |

*See Notes to Consolidated Financial Statements*

# St. Paul's Home
## Notes to Consolidated Financial Statements
## December 31, 2009 and 2008

## Note 1: Nature of Operations and Summary of Significant Accounting Policies

### *Nature of Operations*

St. Paul's Home (the "Home") is certified for Medicare and Medicaid residents. The facility consists of 175 skilled beds and 53 apartments in Belleville, Illinois.

### *Principles of Consolidation*

The St. Paul's Home Foundation (the "Foundation") was formed for the performance of charitable activities relating to the Home. The consolidated financial statements include the accounts of the Home and the Foundation. All significant intercompany accounts and transactions have been eliminated in the consolidation.

### *Use of Estimates*

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### *Cash and Cash Equivalents*

The Home considers all liquid investments with original maturities of three months or less to be cash equivalents. At December 31, 2009 and 2008, cash equivalents consisted primarily of money market accounts with brokers and certificates of deposit.

The financial institution holding the Hospital's cash accounts is participating in the FDIC's Transaction Account Guarantee Program. Under that program, through June 30, 2010, all noninterest-bearing transaction accounts are fully guaranteed by the FDIC for the entire amount in the account.

Effective October 3, 2008, the FDIC's insurance limits increased to $250,000. The increase in federally insured limits is currently set to expire December 31, 2013. At December 31, 2009, the Hospital's interest-bearing cash accounts did not exceeded federally insured limits.

### *Investments and Investment Return*

Investments in equity securities having a readily determinable fair value and in all debt securities are carried at fair value. Investments are valued at the lower of cost or fair value. Investment return includes dividend, interest and other investment income; realized and unrealized gains and losses on investments carried at fair value; and realized gains and losses on other investments.

### *Resident Accounts Receivable*

The Home reports patient resident receivable for services rendered at net realizable amounts from third-party payers, patients and others. The Home provides an allowance for doubtful accounts based upon a review of outstanding receivables, historical collection information and existing economic conditions. As a service to the resident, the Home bills third-party payers directly and bills the resident when the resident's liability is determined. Resident accounts receivable are due in full when billed. Accounts are considered delinquent and subsequently written off as bad debts based on individual credit evaluation and specific circumstances of the account.

### *Property and Equipment*

Property and equipment are depreciated on a straight-line basis over the estimated useful life of each asset.

### *Supplies*

The Home states supply inventories at the lower of cost, determined using the first-in, first-out method or market.

### *Deferred Financing Costs*

Deferred financing costs represent costs incurred in connection with the issuance of long-term debt. Such costs are being amortized over the term of the respective debt using the straight-line method.

### *Net Resident Service Revenue*

The Home has agreements with third-party payers that provide for payments to the Home at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered.

### *Contributions*

Unconditional promises to give cash and other assets are accrued at estimated fair value at the date each promise is received. Gifts received with donor stipulations are reported as either temporarily or permanently restricted support. When a donor restriction expires, that is, when a time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified and reported as an increase in unrestricted net assets. Donor-restricted contributions whose restrictions are met within the same year as received are reported as unrestricted contributions. Conditional contributions are reported as liabilities until the condition is eliminated or the contributed assets are returned to the donor.

### *Income Taxes*

The Home and Foundation have been recognized as exempt from income taxes under Section 501 of the Internal Revenue Code and a similar provision of state law. However, the Home and Foundation are subject to federal income tax on any unrelated business taxable income.

The Home and Foundation file tax returns in the U.S. federal and state jurisdictions. With few exceptions, the Home and Foundation are no longer subject to examinations by tax authorities for years before 2006.

### *Excess of Revenues Over Expenses*

The statement of operations included excess (deficiency) of revenue over expenses. Changes in unrestricted net assets which are excluded from excess of revenues over expenses, consistent with industry practice, include unrealized gains and losses on investments other than trading securities.

### *Reclassifications*

Certain reclassifications have been made to the 2008 financial statements to conform to the 2009 financial statement presentation. These reclassifications had no effect on the change in net assets.

### *Subsequent Events*

Subsequent events have been evaluated through June 9, 2010, which is the date the financial statements were available to be issued.

## Note 2: Net Resident Service Revenue

The Home has agreements with third-party payers that provide for payments to the Home at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined. Payment for services under the Medicaid program is based on defined prospective cost of service rather than on the basis of standard billing rates for such services. Services rendered to Part A Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient's classification within the "resource utilization grouping" system. Services rendered to Part B Medicare program beneficiaries are paid based on the Medicare allowable fee schedule.

Approximately 46% and 42% of net resident service revenue is from participation in the Medicare and state-sponsored Medicaid program for the years ended December 31, 2009 and 2008, respectively.

## Note 3: Concentration of Credit Risk

The Home grants credit without collateral to its residents, most of whom are area residents and are insured under third-party payer agreements. The mix of receivables from residents and third-party payers at December 31, 2009 and 2008, is:

| | 2009 | 2008 |
|---|---|---|
| Medicaid | 36% | 38% |
| Medicare | 35% | 44% |
| Private pay | 29% | 18% |
| | 100% | 100% |

## Note 4: Investments and Investment Return

### *Other Investments*

Short-term investments at December 31, 2009 and 2008, include:

| | 2009 | 2008 |
|---|---|---|
| Money market funds | $ 26,206 | $ 36,054 |
| Equity securities | 532,353 | 352,997 |
| Federal agency borrowings | 103,648 | 106,821 |
| Corporate bonds | 208,442 | 214,230 |
| | $ 870,649 | $ 710,102 |

Total investment return is comprised of the following:

| | 2009 | 2008 |
|---|---|---|
| Interest and dividend income | $ 25,215 | $ 37,129 |
| Change in unrealized gains (losses) on other than trading securities | 197,017 | (56,703) |
| Realized gains on other than trading securities | (90,576) | 23,191 |
| Other-than-temporary impairment of investments | - | (208,050) |
| | $ 131,656 | $ (204,433) |

Total investment return is reflected in the statements of operations and changes in net assets as follows:

| | 2009 | 2008 |
|---|---|---|
| Investment return | $ (65,361) | $ (147,730) |
| Change in unrealized gains (losses) on other than trading securities | 197,017 | (56,703) |
| | $ 131,656 | $ (204,433) |

Certain investments in debt and marketable equity securities are reported in the financial statements at an amount less than their historical cost. Total fair value of these investments at December 31, 2009 and 2008, was $139,661 and $171,218, which is approximately 16% and 62% of the Home's investment portfolio, respectively.

Management believes the declines in fair value for these securities are temporary. Should the impairment of any of these securities become other than temporary, the cost basis of the investment will be reduced and the resulting loss recognized in net income in the period the other-than-temporary impairment is identified.

The following table shows the Home's investments' gross unrealized losses and fair value, aggregated by investment category and length of time that individual securities have been in a continuous unrealized loss position at December 31, 2009 and 2008:

| | December 31, 2009 | | | | | |
|---|---|---|---|---|---|---|
| | Less than 12 Months | | 12 Months or More | | Total | |
| Description of Securities | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses |
| Equity securities | $ 11,941 | $ 482 | $ 127,720 | $ 9,377 | $ 139,661 | $ 9,859 |
| Total temporarily impaired securities | $ 11,941 | $ 482 | $ 127,720 | $ 9,377 | $ 139,661 | $ 9,859 |

| | December 31, 2008 | | | | | |
|---|---|---|---|---|---|---|
| | Less than 12 Months | | 12 Months or More | | Total | |
| Description of Securities | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses |
| Debt securities | $ 95,423 | $ 4,832 | $ - | $ - | $ 95,423 | $ 4,832 |
| Equity securities | 75,795 | 35,812 | - | - | 75,795 | 35,812 |
| Total temporarily impaired securities | $ 171,218 | $ 40,644 | $ - | $ - | $ 171,218 | $ 40,644 |

## Note 5: Disclosures About Fair Value of Assets and Liabilities

ASC Topic 820, *Fair Value Measurements*, defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Topic 820 also specifies a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The standard describes three levels of inputs that may be used to measure fair value:

**Level 1** Quoted prices in active markets for identical assets or liabilities

**Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities

**Level 3** Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities

### *Short-Term Investments*

Where quoted market prices are available in an active market, investments are classified within Level 1 of the valuation hierarchy. Level 1 investments include money market funds and equity securities. If quoted market prices are not available, then fair values are estimated by using pricing models, quoted prices of investments with similar characteristics or discounted cash flows. Level 2 investments include federal agency borrowings and corporate bonds. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy. The Home has no Level 3 investments.

The following table presents the fair value measurements of assets recognized in the accompanying consolidated balance sheet measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2009 and 2008:

| | December 31, 2009 | | | |
|---|---|---|---|---|
| | | Fair Value Measurements Using | | |
| Short-Term Investments | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) | Significant Unobservable Inputs (Level 3) |
| Cash equivalents | $ 26,206 | $ 26,206 | $ - | $ - |
| Equity securities | $ 532,440 | $ 532,440 | $ 312,003 | $ - |
| Federal agency borrowings | $ 103,648 | $ - | $ 103,648 | $ - |
| Corporate bonds | $ 208,442 | $ - | $ 208,442 | $ - |

| | December 31, 2008 | | | |
|---|---|---|---|---|
| | Fair Value Measurements Using | | | |
| Short-Term Investments | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) | Significant Unobservable Inputs (Level 3) |
| Cash equivalents | $ 36,054 | $ 36,054 | $ - | $ - |
| Equity securities | $ 352,997 | $ 352,997 | $ - | $ - |
| Federal agency borrowings | $ 106,821 | $ - | $ 106,821 | $ - |
| Corporate bonds | $ 214,230 | $ - | $ 214,230 | $ - |

## Note 6: Long-Term Debt

The Home's long-term debt consists of:

| | 2009 | 2008 |
|---|---|---|
| Due December 22, 2011; payable $24,280 monthly including interest at a rate of 6.647% per annum and one final principal payment on December 22, 2011 | $ 3,485,949 | $ 3,461,744 |
| Less current maturities | 61,498 | 63,157 |
| | $ 3,424,451 | $ 3,398,587 |

The long-term debt consists of a line of credit secured by real estate.

Aggregate annual maturities of long-term debt at December 31, 2009, are:

| | |
|---|---|
| 2010 | $ 61,498 |
| 2011 | 3,424,451 |
| | $ 3,485,949 |

## Note 7: Functional Expenses

The Home provides health care services primarily to residents within its geographic area. Expenses related to providing these services are as follows:

| | 2009 | 2008 |
|---|---|---|
| Health care services | $ 4,567,181 | $ 4,220,263 |
| General and administrative | 2,107,381 | 2,054,384 |
| | $ 6,674,562 | $ 6,274,647 |

## Note 8: Medical Malpractice Claims

The Home pays fixed premiums for annual medical malpractice liability coverage under a claims made policy. The Home accrues the expense of its share of asserted and unasserted claims occurring during the year by estimating the probable ultimate cost of any such claims in excess of applicable insurance coverage. Such estimates are based on the Home's own claims experience. The Home does not expect any claim to exceed the insurance coverage limits. Accordingly, no accrual for claims has been included in the financial statements. It is reasonably possible that the Home's estimates will change by a material amount in the near term.

## Note 9: Significant Estimates and Concentrations

Accounting principles generally accepted in the United States of America require disclosure of certain significant estimates. Those matters include the following:

### *Allowance for Net Resident Service Revenue Adjustments*

Estimates of allowances for adjustments included in net resident service revenue are described in Notes 1 and 2.

### *Malpractice Claims*

Estimates related to the accrual for medical malpractice claims are described in Note 8.

### *Current Economic Conditions*

The current protracted economic decline continues to present nursing homes with difficult circumstances and challenges, which in some cases have resulted in large and unanticipated declines in the fair value of investments and other assets, constraints on liquidity and difficulty obtaining financing. The financial statements have been prepared using values and information currently available to the Home.

Current economic conditions, including the rising unemployment rate, have made it difficult for certain patients to pay for services rendered. As employers make adjustments to health insurance plans or more patients become unemployed, services provided to self-pay and other payers may significantly impact net patient service revenue, which could have an adverse impact on the Home's future operating results. Further, the effect of economic conditions on the state may have an adverse effect on cash flows related to the Medicaid program.

Given the volatility of current economic conditions, the values of assets and liabilities recorded in the financial statements could change rapidly, resulting in material future adjustments in allowances for accounts receivable that could negatively impact the Home's ability to meet debt covenants or maintain sufficient liquidity.

### *Litigation*

In the normal course of business, the Home is from time to time subject to allegations that may result in litigation. Some of these allegations may not be covered or are only partially covered by insurance. Based upon advice of counsel, management records an estimate of the ultimate expected loss, if any, for these matters.

## Supplementary Information

# St. Paul's Home

## Consolidated Balance Sheet with Consolidating Information

## December 31, 2009

## "Unaudited"

### Assets

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Current Assets** | | | | |
| Cash | $ 466,404 | $ 224,179 | $ - | $ 690,583 |
| Cash - resident deposits | 4,474 | - | - | 4,474 |
| Resident accounts receivable, net of allowance; $44,500 | 680,028 | - | (120,059) | 559,969 |
| Supplies | 34,282 | - | - | 34,282 |
| Prepaid expenses | 134,118 | - | - | 134,118 |
| Total current assets | 1,319,306 | 224,179 | (120,059) | 1,423,426 |
| **Property and Equipment, At Cost** | | | | |
| Land and land improvements | 245,755 | - | - | 245,755 |
| Buildings and leasehold improvements | 9,705,853 | - | - | 9,705,853 |
| Equipment | 2,327,673 | 16,715 | - | 2,344,388 |
| | 12,279,281 | 16,715 | - | 12,295,996 |
| Less accumulated depreciation | 7,840,844 | 7,908 | - | 7,848,752 |
| | 4,438,437 | 8,807 | - | 4,447,244 |
| **Investments** | 10,655 | 859,994 | - | 870,649 |
| **Other Assets** | | | | |
| Loan issuance costs, net of amortization | 6,251 | - | - | 6,251 |
| Total assets | $ 5,774,649 | $ 1,092,980 | $ (120,059) | $ 6,747,570 |

# St. Paul's Home
## Consolidated Balance Sheet with Consolidating Information (Continued)
## December 31, 2009
## "Unaudited"

### Liabilities and Net Assets

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Current Liabilities** | | | | |
| Accounts payable | $ 322,016 | $ 120,059 | $ (120,059) | $ 322,016 |
| Accrued expenses | 359,384 | - | - | 359,384 |
| Notes payable | 61,498 | - | - | 61,498 |
| Resident deposits | 4,974 | - | - | 4,974 |
| Total current liabilities | 747,872 | 120,059 | (120,059) | 747,872 |
| **Long-Term Debt** | 3,424,451 | - | - | 3,424,451 |
| **Deposits** | 14,990 | - | - | 14,990 |
| Total liabilities | 4,187,313 | 120,059 | (120,059) | 4,187,313 |
| **Unrestricted Net Assets** | 1,587,336 | 972,921 | - | 2,560,257 |
| Total liabilities and net assets | $ 5,774,649 | $ 1,092,980 | $ (120,059) | $ 6,747,570 |

# St. Paul's Home

## Consolidated Statement of Operations with Consolidating Information

## Year Ended December 31, 2009

## "Unaudited"

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Unrestricted Revenues, Gains and Other Support** | | | | |
| Net resident service revenue | $ 6,646,147 | $ - | $ (48,000) | $ 6,598,147 |
| Other | 1,092 | 90,000 | - | 91,092 |
| | 6,647,239 | 90,000 | (48,000) | 6,689,239 |
| **Expenses** | | | | |
| Salaries and wages | 3,127,183 | - | - | 3,127,183 |
| Employee benefits | 671,040 | - | - | 671,040 |
| Purchased services and professional fees | 789,991 | 16,319 | - | 806,310 |
| Supplies and other | 1,460,200 | 200,978 | (185,496) | 1,475,682 |
| Depreciation and amortization | 343,690 | 836 | - | 344,526 |
| Interest | 239,403 | - | - | 239,403 |
| Provision for uncollectible accounts | 10,418 | - | - | 10,418 |
| | 6,641,925 | 218,133 | (185,496) | 6,674,562 |
| **Operating Income (Loss)** | 5,314 | (128,133) | - | 14,677 |
| **Other Income** | | | | |
| Investment return | 3,353 | (68,714) | - | (65,361) |
| Contributions | 137,496 | 127,503 | (137,496) | 127,503 |
| | 140,849 | 58,789 | (137,496) | 62,142 |
| **Excess (Deficiency) of Revenues Over Expenses** | 146,163 | (69,344) | - | 76,819 |
| Investment return - change in unrealized gains and losses | 2,430 | 194,587 | - | 197,017 |
| **Increase in Unrestricted Net Assets** | $ 148,593 | $ 125,243 | $ - | $ 273,836 |

# St. Paul's Home

Accountants' Report and Consolidated Financial Statements

December 31, 2010 and 2009

# St. Paul's Home

## December 31, 2010 and 2009

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# Independent Accountants' Report on Financial Statements and Supplementary Information

Board of Directors
St. Paul's Home
Belleville, Illinois

We have audited the accompanying consolidated balance sheets of St. Paul's Home as of December 31, 2010 and 2009, and the related consolidated statements of operations, changes in net assets and cash flows for the years then ended. These financial statements are the responsibility of the Home's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of St. Paul's Home as of December 31, 2010 and 2009, and the results of its operations, the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were made for the purpose of forming an opinion on the basic financial statements taken as a whole. The accompanying supplementary information is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has not been subjected to the procedures applied in the audits of the basic financial statements and accordingly, we express no opinion on it.

BKD, LLP

April 22, 2011



experience BKD

Praxity MEMBER GLOBAL ALLIANCE OF INDEPENDENT FIRMS

# St. Paul's Home
## Consolidated Balance Sheets
## December 31, 2010 and 2009

### Assets

| | 2010 | 2009 |
|---|---|---|
| **Current Assets** | | |
| Cash | $ 1,015,766 | $ 695,057 |
| Resident accounts receivable, net of allowance; 2010 - $44,500; 2009 - $44,500 | 425,266 | 559,969 |
| Supplies | 43,489 | 34,282 |
| Prepaid expenses | 165,052 | 134,118 |
| Total current assets | 1,649,573 | 1,423,426 |
| **Property and Equipment, At Cost** | | |
| Land and land improvements | 245,755 | 245,755 |
| Buildings | 9,751,574 | 9,705,853 |
| Equipment | 2,403,646 | 2,344,388 |
| | 12,400,975 | 12,295,996 |
| Less accumulated depreciation | 8,176,228 | 7,848,752 |
| | 4,224,747 | 4,447,244 |
| **Investments** | 966,250 | 870,649 |
| **Other Assets** | | |
| Loan issuance costs, net of amortization | 3,125 | 6,251 |
| Total assets | $ 6,843,695 | $ 6,747,570 |

*See Notes to Consolidated Financial Statements*

## Liabilities and Net Assets

| | 2010 | 2009 |
|---|---|---|
| **Current Liabilities** | | |
| Accounts payable | $ 116,556 | $ 322,016 |
| Accrued expenses | 330,062 | 359,384 |
| Current maturities of long-term debt | 3,337,435 | 61,498 |
| Resident deposits | 3,796 | 4,974 |
| Total current liabilities | 3,787,849 | 747,872 |
| **Long-term Debt** | - | 3,424,451 |
| **Deposits** | 14,590 | 14,990 |
| Total liabilities | 3,802,439 | 4,187,313 |
| **Unrestricted Net Assets** | 3,041,256 | 2,560,257 |
| Total liabilities and net assets | $ 6,843,695 | $ 6,747,570 |

# St. Paul's Home
## Consolidated Statements of Operations
## Years Ended December 31, 2010 and 2009

| | 2010 | 2009 |
|---|---|---|
| **Unrestricted Revenues, Gains and Other Support** | | |
| Net resident service revenue | $ 7,313,120 | $ 6,598,147 |
| Other | 1,814 | 91,092 |
| | 7,314,934 | 6,689,239 |
| **Expenses** | | |
| Salaries and wages | 3,273,160 | 3,127,183 |
| Employee benefits | 660,409 | 671,040 |
| Purchased services and professional fees | 991,600 | 806,310 |
| Supplies and other | 1,541,409 | 1,475,682 |
| Depreciation and amortization | 330,603 | 344,526 |
| Interest | 230,737 | 239,403 |
| Charity care | 11,143 | 10,418 |
| | 7,039,061 | 6,674,562 |
| **Operating Income** | 275,873 | 14,677 |
| **Other Income (Expense)** | | |
| Investment return | 47,947 | (65,361) |
| Contributions | 99,813 | 127,503 |
| | 147,760 | 62,142 |
| **Excess of Revenues Over Expenses** | 423,633 | 76,819 |
| Investment return - change in unrealized gains | 57,366 | 197,017 |
| **Increase in Unrestricted Net Assets** | $ 480,999 | $ 273,836 |

*See Notes to Consolidated Financial Statements*

# St. Paul's Home

## Consolidated Statements of Changes in Net Assets

## Years Ended December 31, 2010 and 2009

| | 2010 | 2009 |
|---|---|---|
| **Unrestricted Net Assets, Beginning of Year** | $ 2,560,257 | $ 2,286,421 |
| Excess of revenues over expenses | 423,633 | 76,819 |
| Investment return - change in unrealized gains | 57,366 | 197,017 |
| **Unrestricted Net Assets, End of Year** | $ 3,041,256 | $ 2,560,257 |

*See Notes to Consolidated Financial Statements*

# St. Paul's Home
## Consolidated Statements of Cash Flows
## Years Ended December 31, 2010 and 2009

| | 2010 | 2009 |
|---|---|---|
| **Operating Activities** | | |
| Changes in net assets | $ 480,999 | $ 273,836 |
| Items not requiring (providing) cash | | |
| Depreciation and amortization | 330,603 | 344,526 |
| Realized and unrealized gains on investments | (73,293) | (106,441) |
| Changes in | | |
| Patient accounts receivable, net | 134,703 | 479,979 |
| Prepaid expenses | (30,934) | (84,032) |
| Deposits | (1,578) | 1,097 |
| Accounts payable and accrued expenses | (234,782) | (88,720) |
| Supplies | (9,207) | 430 |
| Net cash provided by operating activities | 596,511 | 820,675 |
| **Investing Activities** | | |
| Purchase of investments | (512,358) | (358,393) |
| Sales of investments | 490,050 | 304,287 |
| Purchase of property and equipment | (104,980) | (378,036) |
| Net cash used in investing activities | (127,288) | (432,142) |
| **Financing Activities** | | |
| Proceeds from issuance of long-term debt | - | 167,000 |
| Payments of long-term debt | (148,514) | (142,795) |
| Net cash provided by (used in) financing activities | (148,514) | 24,205 |
| **Increase in Cash** | 320,709 | 412,738 |
| **Cash, Beginning of Year** | 695,057 | 282,319 |
| **Cash, End of Year** | $ 1,015,766 | $ 695,057 |
| **Supplemental Cash Flows Information** | | |
| Interest paid | $ 230,737 | $ 239,403 |

*See Notes to Consolidated Financial Statements*

# St. Paul's Home
## Notes to Consolidated Financial Statements
## December 31, 2010 and 2009

## Note 1: Nature of Operations and Summary of Significant Accounting Policies

### *Nature of Operations*

St. Paul's Home (the "Home") is certified for Medicare and Medicaid residents. The facility consists of 79 skilled beds, 34 intermediate beds, 62 shelter beds and 53 apartments in Belleville, Illinois.

### *Principles of Consolidation*

The St. Paul's Home Foundation (the "Foundation") was formed for the performance of charitable activities relating to the Home. The consolidated financial statements include the accounts of the Home and the Foundation. All significant intercompany accounts and transactions have been eliminated in the consolidation.

### *Use of Estimates*

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### *Cash and Cash Equivalents*

The Home considers all liquid investments with original maturities of three months or less to be cash equivalents. At December 31, 2010 and 2009, cash equivalents consisted primarily of money market accounts with brokers and certificates of deposit.

Pursuant to legislation enacted in 2010, the FDIC will fully insure all noninterest-bearing transaction accounts beginning December 31, 2010 through December 31, 2012, at all FDIC-insured institutions.

Effective July 21, 2010, the FDIC's insurance limits were permanently increased to $250,000. At December 31, 2010, the Home's cash accounts exceeded federally insured limits by approximately $631,000.

### *Investments and Investment Return*

Investments in equity securities having a readily determinable fair value and in all debt securities are carried at fair value. Investments are valued at the lower of cost or fair value. Investment return includes dividend, interest and other investment income; realized and unrealized gains and losses on investments carried at fair value; and realized gains and losses on other investments.

### *Resident Accounts Receivable*

The Home reports patient resident receivable for services rendered at net realizable amounts from third-party payers, patients and others. The Home provides an allowance for doubtful accounts based upon a review of outstanding receivables, historical collection information and existing economic conditions. As a service to the resident, the Home bills third-party payers directly and bills the resident when the resident's liability is determined. Resident accounts receivable are due in full when billed. Accounts are considered delinquent and subsequently written off as bad debts based on individual credit evaluation and specific circumstances of the account.

### *Property and Equipment*

Property and equipment are depreciated on a straight-line basis over the estimated useful life of each asset.

### *Supplies*

The Home states supply inventories at the lower of cost, determined using the first-in, first-out method or market.

### *Deferred Financing Costs*

Deferred financing costs represent costs incurred in connection with the issuance of long-term debt. Such costs are being amortized over the term of the respective debt using the straight-line method.

### *Net Resident Service Revenue*

The Home has agreements with third-party payers that provide for payments to the Home at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered.

### *Contributions*

Unconditional promises to give cash and other assets are accrued at estimated fair value at the date each promise is received. Gifts received with donor stipulations are reported as either temporarily or permanently restricted support. When a donor restriction expires, that is, when a time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified and reported as an increase in unrestricted net assets. Donor-restricted contributions whose restrictions are met within the same year as received are reported as unrestricted contributions. Conditional contributions are reported as liabilities until the condition is eliminated or the contributed assets are returned to the donor.

### *Charity Care*

The Home provides charity care to residents who are unable to pay for services. The amount of charity care is included as an operating expense in the consolidated statements of operations.

### *Income Taxes*

The Home and Foundation have been recognized as exempt from income taxes under Section 501 of the Internal Revenue Code and a similar provision of state law. However, the Home and Foundation are subject to federal income tax on any unrelated business taxable income.

The Home and Foundation file tax returns in the U.S. federal and Illinois jurisdictions. With few exceptions, the Home and Foundation are no longer subject to examinations by tax authorities for years before 2007.

### *Excess of Revenues Over Expenses*

The statement of operations included excess of revenue over expenses. Changes in unrestricted net assets which are excluded from excess of revenues over expenses, consistent with industry practice, include unrealized gains and losses on investments other than trading securities.

### *Subsequent Events*

Subsequent events have been evaluated through April 22, 2011, which is the date the consolidated financial statements were available to be issued.

## Note 2: Net Resident Service Revenue

The Home has agreements with third-party payers that provide for payments to the Home at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined. Payment for services under the Medicaid program is based on defined prospective cost of service rather than on the basis of standard billing rates for such services. Services rendered to Part A Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient's classification within the "resource utilization grouping" system. Services rendered to Part B Medicare program beneficiaries are paid based on the Medicare allowable fee schedule.

Approximately 50% and 46% of net resident service revenue is from participation in the Medicare and state-sponsored Medicaid program for the years ended December 31, 2010 and 2009, respectively.

Charges included in revenue under the Home's charity care policy were $11,143 and $10,418 for 2010 and 2009, respectively.

## Note 3: Concentration of Credit Risk

The Home grants credit without collateral to its residents, most of whom are area residents and are insured under third-party payer agreements. The mix of receivables from residents and third-party payers at December 31, 2010 and 2009, is:

| | 2010 | 2009 |
|---|---|---|
| Medicaid | 16% | 36% |
| Medicare | 47% | 35% |
| Private pay | 37% | 29% |
| | 100% | 100% |

## Note 4: Investments and Investment Return

### *Other Investments*

Investments at December 31, 2010 and 2009, include:

| | 2010 | 2009 |
|---|---|---|
| Money market funds | $ 25,241 | $ 26,206 |
| Equity securities | 608,209 | 532,353 |
| U.S. government agency borrowings | 51,541 | 103,648 |
| Corporate bonds | 281,259 | 208,442 |
| | $ 966,250 | $ 870,649 |

Total investment return is comprised of the following:

| | 2010 | 2009 |
|---|---|---|
| Interest and dividend income | $ 32,020 | $ 25,215 |
| Change in unrealized gains on other-than-trading securities | 57,366 | 197,017 |
| Realized gains (losses) on other than trading securities | 15,927 | (90,576) |
| | $ 105,313 | $ 131,656 |

Total investment return is reflected in the consolidated statements of operations and changes in net assets as follows:

| | 2010 | 2009 |
|---|---|---|
| Investment return | $ 47,947 | $ (65,361) |
| Change in unrealized gains on other than trading securities | 57,366 | 197,017 |
| | $ 105,313 | $ 131,656 |

Certain investments in marketable equity securities are reported in the consolidated financial statements at an amount less than their historical cost. Total fair value of these investments at December 31, 2010 and 2009, was $363,329 and $139,661, which is approximately 38% and 16% of the Home's investment portfolio, respectively.

Management believes the declines in fair value for these securities are temporary. Should the impairment of any of these securities become other than temporary, the cost basis of the investment will be reduced and the resulting loss recognized in net income in the period the other-than-temporary impairment is identified.

The following tables show the Home's investments' gross unrealized losses and fair value, aggregated by investment category and length of time that individual securities have been in a continuous unrealized loss position at December 31, 2010 and 2009:

| | December 31, 2010 | | | | | |
|---|---|---|---|---|---|---|
| | Less Than 12 Months | | 12 Months or More | | Total | |
| Description of Securities | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses |
| Equity securities | $ 253,079 | $ 48,215 | $ 110,250 | $ 4,750 | $ 363,329 | $ 52,965 |

| | December 31, 2009 | | | | | |
|---|---|---|---|---|---|---|
| | Less Than 12 Months | | 12 Months or More | | Total | |
| Description of Securities | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses |
| Equity securities | $ 11,941 | $ 482 | $ 127,720 | $ 9,377 | $ 139,661 | $ 9,859 |

## Note 5: Disclosures About Fair Value of Assets and Liabilities

Accounting Standards Codification (ASC) Topic 820, *Fair Value Measurements*, defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Topic 820 also specifies a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The standard describes three levels of inputs that may be used to measure fair value:

**Level 1** Quoted prices in active markets for identical assets or liabilities

**Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities

**Level 3** Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities

### *Short-term Investments*

Where quoted market prices are available in an active market, investments are classified within Level 1 of the valuation hierarchy. Level 1 investments include money market funds and equity securities. If quoted market prices are not available, then fair values are estimated by using pricing models, quoted prices of investments with similar characteristics or discounted cash flows. Level 2 investments include U.S. government agency borrowings and corporate bonds. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy. The Home has no Level 3 investments.

The following tables present the fair value measurements of assets recognized in the accompanying consolidated balance sheets measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2010 and 2009:

| | December 31, 2010 | | | |
|---|---|---|---|---|
| | | Fair Value Measurements Using | | |
| Short-term Investments | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) | Significant Unobservable Inputs (Level 3) |
| Money market funds | $ 25,241 | $ 25,241 | $ - | $ - |
| Equity securities | $ 608,209 | $ 608,209 | $ - | $ - |
| U.S. government agency borrowings | $ 51,541 | $ - | $ 51,541 | $ - |
| Corporate bonds | $ 281,259 | $ - | $ 281,259 | $ - |

| | December 31, 2009 | | | |
|---|---|---|---|---|
| | | Fair Value Measurements Using | | |
| Short-term Investments | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) | Significant Unobservable Inputs (Level 3) |
| Money market funds | $ 26,206 | $ 26,206 | $ - | $ - |
| Equity securities | $ 532,353 | $ 532,353 | $ - | $ - |
| U.S. government agency borrowings | $ 103,648 | $ - | $ 103,648 | $ - |
| Corporate bonds | $ 208,442 | $ - | $ 208,442 | $ - |

## Note 6: Long-term Debt

The Home's long-term debt consists of:

| | 2010 | 2009 |
|---|---|---|
| Due December 22, 2011; payable $24,280 monthly including interest at a rate of 6.647% per annum and one final principal payment on December 22, 2011 | $ 3,337,435 | $ 3,485,949 |
| Less current maturities | 3,337,435 | 61,498 |
| | $ - | $ 3,424,451 |

The long-term debt consists of a bank line of credit secured by real estate.

Managements intention is to renew the line of credit with the bank when it matures in December 2011.

## Note 7: Functional Expenses

The Home provides health care services primarily to residents within its geographic area. Expenses related to providing these services are as follows:

| | 2010 | 2009 |
|---|---|---|
| Health care services | $ 4,849,782 | $ 4,567,181 |
| General and administrative | 2,189,279 | 2,107,381 |
| | $ 7,039,061 | $ 6,674,562 |

## Note 8: Medical Malpractice Claims

The Home pays fixed premiums for annual medical malpractice liability coverage under a claims made policy. The Home accrues the expense of its share of asserted and unasserted claims occurring during the year by estimating the probable ultimate cost of any such claims in excess of applicable insurance coverage. Such estimates are based on the Home's own claims experience. The Home does not expect any claim to exceed the insurance coverage limits. Accordingly, no accrual for claims has been included in the financial statements. It is reasonably possible that the Home's estimates will change by a material amount in the near term.

## Note 9: Significant Estimates

Accounting principles generally accepted in the United States of America require disclosure of certain significant estimates. Those matters include the following:

### *Allowance for Net Resident Service Revenue Adjustments*

Estimates of allowances for adjustments included in net resident service revenue are described in Notes 1 and 2.

### *Malpractice Claims*

Estimates related to the accrual for medical malpractice claims are described in Note 8.

### *Current Economic Conditions*

The current protracted economic decline continues to present nursing homes with difficult circumstances and challenges, which in some cases have resulted in large and unanticipated declines in the fair value of investments and other assets, constraints on liquidity and difficulty obtaining financing. The consolidated financial statements have been prepared using values and information currently available to the Home.

Current economic conditions, including the rising unemployment rate, have made it difficult for certain patients to pay for services rendered. As employers make adjustments to health insurance plans or more patients become unemployed, services provided to self-pay and other payers may significantly impact net patient service revenue, which could have an adverse impact on the Home's future operating results. Further, the effect of economic conditions on the state may have an adverse effect on cash flows related to the Medicaid program.

Given the volatility of current economic conditions, the values of assets and liabilities recorded in the consolidated financial statements could change rapidly, resulting in material future adjustments in allowances for accounts receivable that could negatively impact the Home's ability to meet debt covenants or maintain sufficient liquidity.

### *Litigation*

In the normal course of business, the Home is from time to time subject to allegations that may result in litigation. Some of these allegations may not be covered or are only partially covered by insurance. It is the opinion of management that the disposition or ultimate resolution of such claims and lawsuits will not have a material adverse effect on the consolidated financial position, results of operations and cash flows of the Home.

## Supplementary Information

# St. Paul's Home
## Consolidated Balance Sheet with Consolidating Information
## December 31, 2010
## "Unaudited"

## Assets

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Current Assets** | | | | |
| Cash | $ 809,035 | $ 203,435 | $ - | $ 1,012,470 |
| Cash - resident deposits | 3,296 | - | - | 3,296 |
| Resident accounts receivable, net of allowance; $44,500 | 481,982 | - | (56,716) | 425,266 |
| Supplies | 43,489 | - | - | 43,489 |
| Prepaid expenses | 165,052 | - | - | 165,052 |
| Total current assets | 1,502,854 | 203,435 | (56,716) | 1,649,573 |
| **Property and Equipment, At Cost** | | | | |
| Land and land improvements | 245,755 | - | - | 245,755 |
| Buildings and leasehold improvements | 9,751,574 | - | - | 9,751,574 |
| Equipment | 2,386,931 | 16,715 | - | 2,403,646 |
| | 12,384,260 | 16,715 | - | 12,400,975 |
| Less accumulated depreciation | 8,167,484 | 8,744 | - | 8,176,228 |
| | 4,216,776 | 7,971 | - | 4,224,747 |
| **Investments** | 11,872 | 954,378 | - | 966,250 |
| **Other Assets** | | | | |
| Loan issuance costs, net of amortization | 3,125 | - | - | 3,125 |
| Total assets | $ 5,734,627 | $ 1,165,784 | $ (56,716) | $ 6,843,695 |

**(Continued)**

# St. Paul's Home

## Consolidated Balance Sheet with Consolidating Information (Continued)

## December 31, 2010

## "Unaudited"

### Liabilities and Net Assets

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Current Liabilities** | | | | |
| Accounts payable | $ 116,556 | $ 56,716 | $ (56,716) | $ 116,556 |
| Accrued expenses | 330,062 | - | - | 330,062 |
| Current maturity of long-term debt | 3,337,435 | - | - | 3,337,435 |
| Resident deposits | 3,796 | - | - | 3,796 |
| Total current liabilities | 3,787,849 | 56,716 | (56,716) | 3,787,849 |
| **Deposits** | 14,590 | - | - | 14,590 |
| Total liabilities | 3,802,439 | 56,716 | (56,716) | 3,802,439 |
| **Unrestricted Net Assets** | 1,932,188 | 1,109,068 | - | 3,041,256 |
| Total liabilities and net assets | $ 5,734,627 | $ 1,165,784 | $ (56,716) | $ 6,843,695 |

# St. Paul's Home

## Consolidated Statement of Operations with Consolidating Information

## Year Ended December 31, 2010

## "Unaudited"

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Unrestricted Revenues, Gains and Other Support** | | | | |
| Net resident service revenue | $ 7,361,120 | $ - | $ (48,000) | $ 7,313,120 |
| Other | 1,814 | - | - | 1,814 |
| | 7,362,934 | - | (48,000) | 7,314,934 |
| **Expenses** | | | | |
| Salaries and wages | 3,273,160 | - | - | 3,273,160 |
| Employee benefits | 660,409 | - | - | 660,409 |
| Purchased services and professional fees | 984,644 | 6,956 | - | 991,600 |
| Supplies and other | 1,532,610 | 56,799 | (48,000) | 1,541,409 |
| Depreciation and amortization | 329,767 | 836 | - | 330,603 |
| Interest | 230,737 | - | - | 230,737 |
| Charity care | 11,143 | - | - | 11,143 |
| | 7,022,470 | 64,591 | (48,000) | 7,039,061 |
| **Operating Income (Loss)** | 340,464 | (64,591) | - | 275,873 |
| **Other Income** | | | | |
| Investment return | 4,387 | 43,560 | - | 47,947 |
| Contributions | - | 99,813 | - | 99,813 |
| | 4,387 | 143,373 | - | 147,760 |
| **Excess of Revenues Over Expenses** | 344,851 | 78,782 | - | 423,633 |
| Investment return - change in unrealized gains | - | 57,366 | - | 57,366 |
| **Increase in Unrestricted Net Assets** | $ 344,851 | $ 136,148 | $ - | $ 480,999 |

# St. Paul's Home

Accountants' Report and Consolidated Financial Statements

December 31, 2011 and 2010

# St. Paul's Home

## December 31, 2011 and 2010

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# Independent Accountants' Report on Financial Statements and Supplementary Information

Board of Directors
St. Paul's Home
Belleville, Illinois

We have audited the accompanying consolidated balance sheets of St. Paul's Home (the "Home") as of December 31, 2011 and 2010, and the related consolidated statements of operations, changes in net assets and cash flows for the years then ended. These financial statements are the responsibility of the Home's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of St. Paul's Home as of December 31, 2011 and 2010, and the results of its operations, the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audit was performed for the purpose of forming an opinion on the basic financial statements as a whole. The 2011 Consolidated Balance Sheet with Consolidating Information and the 2011 Consolidating Statement of Operations with Consolidating Information listed in the table of contents is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has not been subjected to the auditing procedures applied in the audit of the basic financial statements, and accordingly, we do not express an opinion or provide any assurance on it.

BKD, LLP

June 15, 2012

00469

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# St. Paul's Home
## Consolidated Balance Sheets
## December 31, 2011 and 2010

### Assets

| | 2011 | 2010 |
|---|---|---|
| **Current Assets** | | |
| Cash | $ 1,076,478 | $ 1,015,766 |
| Resident accounts receivable, net of allowance; 2011 - $44,500, 2010 - $44,500 | 1,117,977 | 425,266 |
| Supplies | 43,525 | 43,489 |
| Prepaid expenses | 110,111 | 165,052 |
| Total current assets | 2,348,091 | 1,649,573 |
| **Property and Equipment, At Cost** | | |
| Land and land improvements | 245,755 | 245,755 |
| Buildings | 9,798,184 | 9,751,574 |
| Equipment | 2,450,539 | 2,403,646 |
| | 12,494,478 | 12,400,975 |
| Less accumulated depreciation | 8,480,053 | 8,176,228 |
| | 4,014,425 | 4,224,747 |
| **Investments** | 1,001,244 | 966,250 |
| **Other Assets** | - | 3,125 |
| Total assets | $ 7,363,760 | $ 6,843,695 |

*See Notes to Consolidated Financial Statements*

## Liabilities and Net Assets

| | 2011 | 2010 |
|---|---|---|
| **Current Liabilities** | | |
| Accounts payable | $ 218,633 | $ 116,556 |
| Accrued expenses | 257,156 | 330,062 |
| Current maturities of long-term debt | 188,569 | 3,337,435 |
| Resident deposits | 4,614 | 3,796 |
| Total current liabilities | 668,972 | 3,787,849 |
| **Long-term Debt** | 3,001,382 | - |
| **Deposits** | 16,689 | 14,590 |
| Total liabilities | 3,687,043 | 3,802,439 |
| **Unrestricted Net Assets** | 3,676,717 | 3,041,256 |
| Total liabilities and net assets | $ 7,363,760 | $ 6,843,695 |

# St. Paul's Home
## Consolidated Statements of Operations
## Years Ended December 31, 2011 and 2010

| | 2011 | 2010 |
|---|---|---|
| **Unrestricted Revenues, Gains and Other Support** | | |
| Net resident service revenue | $ 7,985,976 | $ 7,313,120 |
| Other | 3,411 | 1,814 |
| | 7,989,387 | 7,314,934 |
| **Expenses** | | |
| Salaries and wages | 3,306,743 | 3,273,160 |
| Employee benefits | 736,572 | 660,409 |
| Purchased services and professional fees | 1,288,684 | 991,600 |
| Supplies and other | 1,518,552 | 1,541,409 |
| Depreciation and amortization | 304,207 | 330,603 |
| Interest | 219,147 | 230,737 |
| Charity care | 18,937 | 11,143 |
| | 7,392,842 | 7,039,061 |
| **Operating Income** | 596,545 | 275,873 |
| **Other Income** | | |
| Investment return | 73,183 | 47,947 |
| Contributions | 46,075 | 99,813 |
| | 119,258 | 147,760 |
| **Excess of Revenues Over Expenses** | 715,803 | 423,633 |
| Investment return - change in unrealized gains | (80,342) | 57,366 |
| **Increase in Unrestricted Net Assets** | 635,461 | 480,999 |
| **Unrestricted Net Assets, Beginning of Year** | 3,041,256 | 2,560,257 |
| **Unrestricted Net Assets, End of Year** | $ 3,676,717 | $ 3,041,256 |

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*See Notes to Consolidated Financial Statements*

# St. Paul's Home
## Consolidated Statements of Cash Flows
## Years Ended December 31, 2011 and 2010

| | 2011 | 2010 |
|---|---|---|
| **Operating Activities** | | |
| Changes in net assets | $ 635,461 | $ 480,999 |
| Items not requiring (providing) cash | | |
| Depreciation and amortization | 304,207 | 330,603 |
| Realized and unrealized gains on investments | 35,598 | (73,293) |
| Changes in | | |
| Patient accounts receivable, net | (692,711) | 134,703 |
| Prepaid expenses | 54,941 | (30,934) |
| Deposits | 2,917 | (1,578) |
| Accounts payable and accrued expenses | 29,171 | (234,782) |
| Supplies | (36) | (9,207) |
| Net cash provided by operating activities | 369,548 | 596,511 |
| **Investing Activities** | | |
| Purchase of investments | (786,242) | (512,358) |
| Sales of investments | 715,650 | 490,050 |
| Purchase of property and equipment | (90,760) | (104,980) |
| Net cash used in investing activities | (161,352) | (127,288) |
| **Financing Activity** | | |
| Payments of long-term debt | (147,484) | (148,514) |
| Net cash used in financing activity | (147,484) | (148,514) |
| **Increase in Cash** | 60,712 | 320,709 |
| **Cash, Beginning of Year** | 1,015,766 | 695,057 |
| **Cash, End of Year** | $ 1,076,478 | $ 1,015,766 |
| **Supplemental Cash Flows Information** | | |
| Interest paid | $ 219,147 | $ 230,737 |

*See Notes to Consolidated Financial Statements*

# St. Paul's Home
## Notes to Consolidated Financial Statements
## December 31, 2011 and 2010

## Note 1: Nature of Operations and Summary of Significant Accounting Policies

### *Nature of Operations*

St. Paul's Home (the "Home") is certified for Medicare and Medicaid residents. The facility consists of 79 skilled beds, 34 intermediate beds, 62 shelter beds and 53 apartments in Belleville, Illinois.

### *Principles of Consolidation*

The St. Paul's Home Foundation (the "Foundation") was formed for the performance of charitable activities relating to the Home. The consolidated financial statements include the accounts of the Home and the Foundation. All significant intercompany accounts and transactions have been eliminated in the consolidation.

### *Use of Estimates*

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### *Cash*

Pursuant to legislation enacted in 2010, the FDIC will fully insure all noninterest-bearing transaction accounts beginning December 31, 2010 through December 31, 2012, at all FDIC-insured institutions.

Effective July 21, 2010, the FDIC's insurance limits were permanently increased to $250,000. At December 31, 2011, the Home's cash accounts exceeded federally insured limits by approximately $691,000.

### *Investments and Investment Return*

Investments in equity securities having a readily determinable fair value and in all debt securities are carried at fair value. Other investments are valued at the lower of cost or fair value. Investment return includes dividend, interest and other investment income; realized and unrealized gains and losses on investments carried at fair value; and realized gains and losses on other investments.

### *Resident Accounts Receivable*

The Home reports patient resident receivable for services rendered at net realizable amounts from third-party payers, patients and others. The Home provides an allowance for doubtful accounts based upon a review of outstanding receivables, historical collection information and existing economic conditions. As a service to the resident, the Home bills third-party payers directly and bills the resident when the resident's liability is determined. Resident accounts receivable are due in full when billed. Accounts are considered delinquent and subsequently written off as bad debts based on individual credit evaluation and specific circumstances of the account.

### *Property and Equipment*

Property and equipment are depreciated on a straight-line basis over the estimated useful life of each asset.

### *Supplies*

The Home states supply inventories at the lower of cost, determined using the first-in, first-out method or market.

### *Net Resident Service Revenue*

The Home has agreements with third-party payers that provide for payments to the Home at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from residents, third-party payers and others for services rendered.

### *Contributions*

Unconditional promises to give cash and other assets are accrued at estimated fair value at the date each promise is received. Gifts received with donor stipulations are reported as either temporarily or permanently restricted support. When a donor restriction expires, that is, when a time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified and reported as an increase in unrestricted net assets. Donor-restricted contributions whose restrictions are met within the same year as received are reported as unrestricted contributions. Conditional contributions are reported as liabilities until the condition is eliminated or the contributed assets are returned to the donor.

### *Charity Care*

The Home provides charity care to residents who are unable to pay for services. The amount of charity care is included as an operating expense in the consolidated statements of operations.

### *Income Taxes*

The Home and Foundation have been recognized as exempt from income taxes under Section 501 of the Internal Revenue Code and a similar provision of state law. However, the Home and Foundation are subject to federal income tax on any unrelated business taxable income.

The Home and Foundation file tax returns in the U.S. federal and Illinois jurisdictions. With few exceptions, the Home and Foundation are no longer subject to examinations by tax authorities for years before 2008.

### *Excess of Revenues Over Expenses*

The statement of operations included excess of revenue over expenses. Changes in unrestricted net assets which are excluded from excess of revenues over expenses, consistent with industry practice, include unrealized gains and losses on investments.

### *Subsequent Events*

Subsequent events have been evaluated through the date of the Independent Accountants' Report, which is the date the consolidated financial statements were available to be issued.

## Note 2: Net Resident Service Revenue

The Home has agreements with third-party payers that provide for payments to the Home at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined. Payment for services under the Medicaid program is based on defined prospective cost of service rather than on the basis of standard billing rates for such services. Services rendered to Part A Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient's classification within the "resource utilization grouping" system. Services rendered to Part B Medicare program beneficiaries are paid based on the Medicare allowable fee schedule.

Approximately 56% and 50% of net resident service revenue is from participation in the Medicare and state-sponsored Medicaid program for the years ended December 31, 2011 and 2010, respectively.

Charges included in revenue under the Home's charity care policy were $18,937 and $11,143 for 2011 and 2010, respectively.

In 2011, the Illinois Department of Human Services approved a rate increase in the Medicaid per diem for Illinois nursing homes along with a corresponding bed tax increase. The rate increase was tentative subject to the Centers for Medicare and Medicaid (CMS) approval. In February 2012, CMS approved the rate increase and bed tax plan. The approval by CMS is retroactive to July 1, 2011. As a result of the approval date, the additional revenues and expenses will be recognized during fiscal year 2012.

## Note 3: Concentration of Credit Risk

The Home grants credit without collateral to its residents, most of whom are area residents and are insured under third-party payer agreements. The mix of receivables from residents and third-party payers at December 31, 2011 and 2010, is:

| | 2011 | 2010 |
|---|---|---|
| Medicaid | 63% | 16% |
| Medicare | 24% | 47% |
| Private pay | 13% | 37% |
| | 100% | 100% |

## Note 4: Investments and Investment Return

Investments at December 31, 2011 and 2010, include:

| | 2011 | 2010 |
|---|---|---|
| Money market funds | $ 27,875 | $ 25,241 |
| Equity securities | 553,000 | 608,209 |
| Corporate bonds | 51,932 | 78,626 |
| Taxable bond funds | 75,849 | 45,133 |
| Mutual bond funds | 292,588 | 157,500 |
| U.S. government agency borrowings | - | 51,541 |
| | $ 1,001,244 | $ 966,250 |

Total investment return is comprised of the following:

| | 2011 | 2010 |
|---|---|---|
| Interest and dividend income | $ 28,439 | $ 32,020 |
| Change in unrealized gains (losses) | (80,342) | 57,366 |
| Realized gains | 44,744 | 15,927 |
| | $ (7,159) | $ 105,313 |

Total investment return is reflected in the consolidated statements of operations and changes in net assets as follows:

| | 2011 | 2010 |
|---|---|---|
| Investment return | $ 73,183 | $ 47,947 |
| Change in unrealized gains (losses) | (80,342) | 57,366 |
| | $ (7,159) | $ 105,313 |

Certain investments in marketable equity securities are reported in the consolidated financial statements at an amount less than their historical cost. Total fair value of these investments at December 31, 2011 and 2010, was $732,232 and $355,541, which is approximately 74% and 38% of the Home's investment portfolio, respectively.

Management believes the declines in fair value for these securities are temporary. Should the impairment of any of these securities become other than temporary, the cost basis of the investment will be reduced and the resulting loss recognized in net income in the period the other-than-temporary impairment is identified.

The following tables show the Home's investments' gross unrealized losses and fair value, aggregated by investment category and length of time that individual securities have been in a continuous unrealized loss position at December 31, 2011 and 2010:

| | December 31, 2011 | | | | | |
|---|---|---|---|---|---|---|
| | Less Than 12 Months | | 12 Months or More | | Total | |
| Description of Securities | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses |
| Equity securities | $ 202,239 | $ 8,761 | $ 207,181 | $ 50,305 | $ 409,420 | $ 59,066 |
| Taxable bond funds | 75,849 | 6,776 | - | - | 75,849 | 6,776 |
| Mutual bond funds | 121,496 | 3,504 | 125,467 | 4,257 | 246,963 | 7,761 |
| Total | $ 399,584 | $ 19,041 | $ 332,648 | $ 54,562 | $ 732,232 | $ 73,603 |

| | December 31, 2010 | | | | | |
|---|---|---|---|---|---|---|
| | Less Than 12 Months | | 12 Months or More | | Total | |
| Description of Securities | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses | Fair Value | Unrealized Losses |
| Equity securities | $ 255,291 | $ 48,279 | $ - | $ - | $ 255,291 | $ 48,279 |
| Mutual bond funds | - | - | 100,250 | 4,750 | 100,250 | 4,750 |
| Total | $ 255,291 | $ 48,279 | $ 100,250 | $ 4,750 | $ 355,541 | $ 53,029 |

## Note 5: Disclosures About Fair Value of Assets and Liabilities

Accounting Standards Codification Topic 820, *Fair Value Measurements*, defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Topic 820 also specifies a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The standard describes three levels of inputs that may be used to measure fair value:

**Level 1** Quoted prices in active markets for identical assets or liabilities

**Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities

**Level 3** Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities

### *Short-term Investments*

Where quoted market prices are available in an active market, investments are classified within Level 1 of the valuation hierarchy. Level 1 investments include money market funds and equity securities. If quoted market prices are not available, then fair values are estimated by using pricing models, quoted prices of investments with similar characteristics or discounted cash flows. Level 2 investments include taxable bond funds, mutual bond funds, corporate bonds and U.S. government agency borrowings. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy. The Home has no Level 3 investments.

The following tables present the fair value measurements of assets recognized in the accompanying consolidated balance sheets measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2011 and 2010:

| | December 31, 2011 | | | |
|---|---|---|---|---|
| | | Fair Value Measurements Using | | |
| Short-term Investments | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) | Significant Unobservable Inputs (Level 3) |
| Money market funds | $ 27,875 | $ 27,875 | $ - | $ - |
| Equity securities | $ 553,000 | $ 553,000 | $ - | $ - |
| Corporate bonds | $ 51,932 | $ - | $ 51,932 | $ - |
| Taxable bond funds | $ 75,849 | $ - | $ 75,849 | $ - |
| Mutual bond funds | $ 292,588 | $ - | $ 292,588 | $ - |

| | December 31, 2010 | | | |
|---|---|---|---|---|
| | | Fair Value Measurements Using | | |
| Short-term Investments | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) | Significant Unobservable Inputs (Level 3) |
| Money market funds | $ 25,241 | $ 25,241 | $ - | $ - |
| Equity securities | $ 608,209 | $ 608,209 | $ - | $ - |
| Corporate bonds | $ 78,626 | $ - | $ 78,626 | $ - |
| Taxable bond funds | $ 45,133 | $ - | $ 45,133 | $ - |
| Mutual bond funds | $ 157,500 | $ - | $ 157,500 | $ - |
| U.S. government agency borrowings | $ 51,541 | $ - | $ 51,541 | $ - |

## Note 6: Long-term Debt

The Home's long-term debt consists of:

| | 2011 | 2010 |
|---|---|---|
| Due November 22, 2014; payable monthly including interest at a rate of BBA LIBOR plus 2.25% (2.495% at December 31, 2011) and one balloon payment at maturity | $ 3,189,951 | $ 3,337,435 |
| Less current maturities | 188,569 | 3,337,435 |
| | $ 3,001,382 | $ - |

The long-term debt consists of a bank line of credit secured by real estate. Management renewed the line of credit with the bank in November 2011.

Aggregate annual maturities of long-term debt at December 31, 2011, are:

| | |
|---|---|
| 2012 | $ 188,569 |
| 2013 | 188,569 |
| 2014 | 2,812,813 |
| | $ 3,189,951 |

## Note 7: Functional Expenses

The Home provides health care services primarily to residents within its geographic area. Expenses related to providing these services are as follows:

| | 2011 | 2010 |
|---|---|---|
| Health care services | $ 5,016,968 | $ 4,849,782 |
| General and administrative | 2,375,874 | 2,189,279 |
| | $ 7,392,842 | $ 7,039,061 |

## Note 8: Medical Malpractice Claims

The Home pays fixed premiums for annual medical malpractice liability coverage under a claims made policy. The Home accrues the expense of its share of asserted and unasserted claims occurring during the year by estimating the probable ultimate cost of any such claims in excess of applicable insurance coverage. Such estimates are based on the Home's own claims experience. The Home does not expect any claim to exceed the insurance coverage limits. Accordingly, no accrual for claims has been included in the financial statements. It is reasonably possible that the Home's estimates will change by a material amount in the near term.

## Note 9: Significant Estimates

Accounting principles generally accepted in the United States of America require disclosure of certain significant estimates. Those matters include the following:

### *Allowance for Net Resident Service Revenue Adjustments*

Estimates of allowances for adjustments included in net resident service revenue are described in Notes 1 and 2.

### *Malpractice Claims*

Estimates related to the accrual for medical malpractice claims are described in Note 8.

### *Current Economic Conditions*

The current protracted economic decline continues to present nursing homes with difficult circumstances and challenges, which in some cases have resulted in large and unanticipated declines in the fair value of investments and other assets, constraints on liquidity and difficulty obtaining financing. The consolidated financial statements have been prepared using values and information currently available to the Home.

Current economic conditions, including the rising unemployment rate, have made it difficult for certain patients to pay for services rendered. As employers make adjustments to health insurance plans or more patients become unemployed, services provided to self-pay and other payers may significantly impact net patient service revenue, which could have an adverse impact on the Home's future operating results. Further, the effect of economic conditions on the state may have an adverse effect on cash flows related to the Medicaid program.

Given the volatility of current economic conditions, the values of assets and liabilities recorded in the consolidated financial statements could change rapidly, resulting in material future adjustments in allowances for accounts receivable that could negatively impact the Home's ability to meet debt covenants or maintain sufficient liquidity.

### *Litigation*

In the normal course of business, the Home is from time to time subject to allegations that may result in litigation. Some of these allegations may not be covered or are only partially covered by insurance. It is the opinion of management that the disposition or ultimate resolution of such claims and lawsuits will not have a material adverse effect on the consolidated financial position, results of operations and cash flows of the Home.

## Supplementary Information

# St. Paul's Home

## Consolidated Balance Sheet with Consolidating Information

## December 31, 2011

## "Unaudited"

### Assets

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Current Assets** | | | | |
| Cash | $ 931,302 | $ 141,062 | $ - | $ 1,072,364 |
| Cash - resident deposits | 4,114 | - | - | 4,114 |
| Resident accounts receivable, net of allowance; $44,500 | 1,176,720 | - | (58,743) | 1,117,977 |
| Supplies | 43,525 | - | - | 43,525 |
| Prepaid expenses | 110,111 | - | - | 110,111 |
| Total current assets | 2,265,772 | 141,062 | (58,743) | 2,348,091 |
| **Property and Equipment, At Cost** | | | | |
| Land and land improvements | 245,755 | - | - | 245,755 |
| Buildings and leasehold improvements | 9,798,184 | - | - | 9,798,184 |
| Equipment | 2,433,824 | 16,715 | - | 2,450,539 |
| | 12,477,763 | 16,715 | - | 12,494,478 |
| Less accumulated depreciation | 8,470,473 | 9,580 | - | 8,480,053 |
| | 4,007,290 | 7,135 | - | 4,014,425 |
| **Investments** | 9,665 | 991,579 | - | 1,001,244 |
| Total assets | $ 6,282,727 | $ 1,139,776 | $ (58,743) | $ 7,363,760 |

**(Continued)**

# St. Paul's Home

## Consolidated Balance Sheet with Consolidating Information (Continued)

## December 31, 2011

## "Unaudited"

### Liabilities and Net Assets

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Current Liabilities** | | | | |
| Accounts payable | $ 218,633 | $ 58,743 | $ (58,743) | $ 218,633 |
| Accrued expenses | 257,156 | - | - | 257,156 |
| Current maturity of long-term debt | 188,569 | - | - | 188,569 |
| Resident deposits | 4,614 | - | - | 4,614 |
| Total current liabilities | 668,972 | 58,743 | (58,743) | 668,972 |
| **Long-term Debt** | 3,001,382 | - | - | 3,001,382 |
| **Deposits** | 16,689 | - | - | 16,689 |
| Total liabilities | 3,687,043 | 58,743 | (58,743) | 3,687,043 |
| **Unrestricted Net Assets** | 2,595,684 | 1,081,033 | - | 3,676,717 |
| Total liabilities and net assets | $ 6,282,727 | $ 1,139,776 | $ (58,743) | $ 7,363,760 |

# St. Paul's Home

## Consolidated Statement of Operations with Consolidating Information

## Year Ended December 31, 2011

## "Unaudited"

| | Home | Foundation | Elimination | Consolidated |
|---|---|---|---|---|
| **Unrestricted Revenues, Gains and Other Support** | | | | |
| Net resident service revenue | $ 8,033,976 | $ - | $ (48,000) | $ 7,985,976 |
| Other | 3,411 | - | - | 3,411 |
| | 8,037,387 | - | (48,000) | 7,989,387 |
| **Expenses** | | | | |
| Salaries and wages | 3,306,743 | - | - | 3,306,743 |
| Employee benefits | 736,572 | - | - | 736,572 |
| Purchased services and professional fees | 1,281,464 | 7,220 | - | 1,288,684 |
| Supplies and other | 1,506,089 | 60,463 | (48,000) | 1,518,552 |
| Depreciation and amortization | 303,371 | 836 | - | 304,207 |
| Interest | 219,147 | - | - | 219,147 |
| Charity care | 18,937 | - | - | 18,937 |
| | 7,372,323 | 68,519 | (48,000) | 7,392,842 |
| **Operating Income (Loss)** | 665,064 | (68,519) | - | 596,545 |
| **Other Income** | | | | |
| Investment return | 627 | 72,556 | - | 73,183 |
| Contributions | 12 | 46,063 | - | 46,075 |
| | 639 | 118,619 | - | 119,258 |
| **Excess of Revenues Over Expenses** | 665,703 | 50,100 | - | 715,803 |
| Investment return - change in unrealized gains | (2,207) | (78,135) | - | (80,342) |
| **Increase in Unrestricted Net Assets** | $ 663,496 | $ (28,035) | $ - | $ 635,461 |

# St. Paul's Home
# CON - Project Structure
# Section V - Financial Viability Ratios

| | | 2009 | 2010 | 2011 | 2012 | (Projected) | *Notes* |
|---|---|---|---|---|---|---|---|
| Current Ratio | | | | | | | |
| A | Current Assets | 1,319,306 | 1,502,854 | 2,265,772 | 2,871,931 | 3,169,999 | |
| B | Current Liabilities | 747,872 | 3,787,849 | 668,972 | 740,311 | 830,537 | |
| A/B | Current Ratio | 1.76 | 0.40 | 3.39 | 3.88 | 3.82 | Meets 2.0 Min |
| | | | Debt Was Due for Refinancing | | | | |
| Net Margin Percentage | | | | | | | |
| A | Net Income | 148,593 | 344,851 | 663,496 | 602,854 | 689,505 | |
| B | Net Operating Revenues | 6,647,239 | 7,362,934 | 8,037,387 | 8,315,323 | 10,851,106 | |
| A/B | Net Margin Percentage | 2.24% | 4.68% | 8.26% | 7.25% | 6.35% | Meets 2.5 Min |
| Percent Debt to Total Cap | | | | | | | |
| A | Mortgage Term Debt | 3,485,949 | 3,337,435 | 3,189,951 | 3,001,382 | 25,900,000 | |
| B | Net Assets | 7,924,386 | 7,554,211 | 7,197,241 | 6,870,565 | 53,106,299 | |
| A/(A+B) | Percent Debt to Total Cap | 43.99% | 44.18% | 44.32% | 43.68% | 48.77% | Meets 80% Min |
| Projected DSCR | | | | | | | |
| A | NI+Depr+Amort+Int | 731,686 | 905,355 | 1,186,014 | 988,153 | 2,483,242 | |
| B | MADS | 382198 | 379,251 | 366,631 | 268,362 | 1,166,224 | |
| A/B | Projected DSCR | 1.91 | 2.39 | 3.23 | 3.68 | 2.13 | Meets 1.5 Min |
| | | | St Paul's Debt had a variable interest rate during this time period | | | | |
| Days Cash on Hand | | | | | | | |
| A | Cash and Investments | 477,059 | 820,907 | 940,967 | 1,635,113 | 1,869,233 | |
| B | Total Op Exp/365 | 16,600 | 17,704 | 18,767 | 20,074 | 22,926 | |
| A/B | Days Cash on Hand | 29 | 46 | 50 | 81 | 82 | Meets 45 Min |
| Cushion Ratio | | | | | | Min Cash Required To Meet 3.0 Min | |
| A | Cash and Investments | 477,059 | 820,907 | 940,967 | 1,635,113 | 1,869,233 | 3,498,671 |
| B | MADS | 382,198 | 379,251 | 366,631 | 268,362 | 1,166,224 | 1,166,224 |
| A/B | Cushion Ratio | 1.25 | 2.16 | 2.57 | 6.09 | 1.60 | 3.00 |

**St. Paul's Home**
**Project Structure**
**Appendix A**

| | BSI Numbers | | | Stifel Numbers | | Additions to BSI Numbers | | | Final Appendix A | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **USE OF FUNDS** | **CLINICAL** | **NONCLINICAL** | **TOTAL** | **TOTAL** | **DIFFERENCE** | **CLINICAL** | **NONCLINICAL** | **TOTAL** | **CLINICAL** | **NONCLINICAL** | **TOTAL** |
| Preplanning Costs | $8,850 | $3,650 | $12,500 | 100,000 | (87,500) | 61,950 | 25,550 | 87,500 | $70,800 | $29,200 | $100,000 |
| Site Survey and Soil Investigation | $69,384 | $28,616 | $98,000 | 125,000 | (27,000) | 19,116 | 7,884 | 27,000 | $88,500 | $36,500 | $125,000 |
| Site Prep | $0 | $2,160,625 | $2,160,625 | | 2,160,625 | - | - | - | $0 | $2,160,625 | $2,160,625 |
| Off Site Work | $0 | $0 | $0 | | - | | | - | $0 | $0 | $0 |
| New Construction Contracts | $0 | $0 | $0 | | - | | | - | $0 | $0 | $0 |
| Modernization Contracts | $11,902,376 | $4,908,820 | $16,811,196 | 22,115,000 | (5,303,804) | 1,444,453 | 595,726 | 2,040,179 | $13,346,829 | $5,504,546 | $18,851,375 |
| Contingencies | $780,927 | $322,073 | $1,103,000 | | 1,103,000 | | | - | $780,927 | $322,073 | $1,103,000 |
| Architectural / Engineering | $563,635 | $232,457 | $796,092 | 850,000 | (53,908) | 38,167 | 15,741 | 53,908 | $601,802 | $248,198 | $850,000 |
| Consulting and Other Fees | $7,080 | $2,920 | $10,000 | 500,000 | (490,000) | | | - | $7,080 | $2,920 | $10,000 |
| Movable or Other Equipment | | | $0 | | - | | | - | $0 | $0 | $0 |
| Bond Issuance Expense (project related) | $78,659 | $32,441 | $111,100 | | 111,100 | | | - | $78,659 | $32,441 | $111,100 |
| Net Interest Expense During Construction (project related) | | | $0 | 625,000 | (625,000) | 442,502 | 182,498 | 625,000 | $442,502 | $182,498 | $625,000 |
| Fair Market Value of Leased Space or Equipment | | | $0 | | - | | | - | $0 | $0 | $0 |
| Other Costs To Be Capitalized | $1,912,615 | $4,523,492 | $6,436,107 | 5,285,000 | 1,151,107 | (546,725) | (225,482) | (772,207) | $1,365,890 | $4,298,010 | $5,663,900 |
| Acquisition of Building or Other Property (excluding land) | | | | | - | | | - | $0 | $0 | $0 |
| **TOTAL USES OF FUNDS** | $15,323,527 | $12,215,093 | $27,538,620 | 29,600,000 | (2,061,380) | 1,459,463 | 601,917 | 2,061,380 | $16,782,990 | $12,817,010 | $29,600,000 |
| "Use" Percentages | | | | | | | | | 56.70% | 43.30% | 100.00% |
| **SOURCE OF FUNDS** | | | | | | | | | | | |
| Cash and Securities | | | | | | | | | 1,133,986 | 866,014 | 2,000,000 |
| Pledges | | | | | | | | | | | |
| Gifts and Bequests | | | | | | | | | 467,769 | 357,231 | 825,000 |
| Bond Issues (project related) | | | | | | | | | | | |
| Mortgages | | | | | | | | | 14,685,117 | 11,214,883 | 25,900,000 |
| Leases (fair market value) | | | | | | | | | | | |
| Governmental Appropriations | | | | | | | | | | | |
| Grants | | | | | | | | | | | |
| Other Funds and Sources | | | | | | | | | 496,119 | 378,881 | 875,000 |
| **TOTAL SOURCES OF FUNDS** | | | | | | | | | $ 16,782,990 | $ 12,817,010 | $ 29,600,000 |

# St. Paul's Home
# Project Structure

| | Stabilized Occupancy | Average Amortization Periods | | SNF | Sheltered | Apts | Total |
|---|---|---|---|---|---|---|---|
| **Development Project:** | | | | | | | |
| **Sources of Funds:** | | | | | | | |
| Mortgage Debt | 25,900,000 | | | | | | |
| STP Contributions: | | | | | | | |
| Cash & Investments | 2,000,000 | | | | | | |
| Capital Campaign | 825,000 | | | | | | |
| LOI | 875,000 | | | | | | |
| **Total Sources** | 29,600,000 | | | | | | |
| **Uses of Funds:** | | | | | | | |
| Building - Capitalized | 22,978,440 | 40 | | 16,268,803 | 6,709,637 | - | 22,978,440 |
| FF&E - Capitalized | 1,400,000 | 10 | | 991,204 | 408,796 | - | 1,400,000 |
| CON Licensing Fees | 200,000 | NA | | 141,601 | 58,399 | - | 200,000 |
| PreMarketing Costs | 100,000 | Expense or COI | | 70,800 | 29,200 | - | 100,000 |
| Resplacement Reserve (500 per ILU bed) | 26,500 | NA | Balance Sheet Only | | | 26,500 | 26,500 |
| Loan Origination Financing Costs | 1,320,060 | 40 | | 826,351 | 340,806 | 152,903 | 1,320,060 |
| Working Capital | 575,000 | NA | Balance Sheet | 359,947 | 148,451 | 66,602 | 575,000 |
| Current Debt Refunding | 3,000,000 | NA | Balance Sheet | - | - | 3,000,000 | 3,000,000 |
| **Total Uses** | 29,600,000 | | | 18,658,706 | 7,695,289 | 3,246,005 | 29,600,000 |
| | | | | 63.04% | 26.00% | 10.97% *Check* | 29,600,000 |

| **Statistics** | SNF | Sheltered | Apts | Total |
|---|---|---|---|---|
| Aggregate % Square Feet Applied to Debt | 62.60% | 25.82% | 11.58% | 100.00% |
| Developed Square Feet Applied to Debt | 70.80% | 29.20% | 0.00% | 100.00% |
| Debt % Distributed from Detail Schedule | **63.04%** | **26.00%** | **10.97%** | 100.00% |

To be applied to principal and interest allocated by payer type.

## ST PAUL'S HOME LOAN PAYABLE

| | Care Level | $$ | Square Footage | | % |
|---|---|---|---|---|---|
| Loan: | Apts | 3,000,000 | 69,827 | | 11.58% |
| | Clinical | 16,213,267 | 63,573 | | 62.60% |
| | Sheltered | 6,686,733 | 26,219 | 89,792 | 25.82% |
| | | 25,900,000 | 159,619 | | 100.00% |

| | | |
|---|---|---|
| Total Principal Amount | $25,900,000 | Current Balance |
| Interest Rate | 3.25% | |
| Amortization Period | 40 | |

| Princiap Due | Principal Amount | Interest Rate | Annual Interest Payment | Principal Payments | Annual Payments w/ 120K prin | Monthly Payments |
|---|---|---|---|---|---|---|
| | 25,900,000 | | | | | |
| Jan-13 | 25,900,000 | 3.2500% | 841,750.00 | 324,474 | 1,166,223.65 | 97,185.30 |
| Jan-14 | 25,575,526 | 3.2500% | 831,204.61 | 335,019 | 1,166,223.65 | 97,185.30 |
| Jan-15 | 25,240,507 | 3.2500% | 820,316.49 | 345,907 | 1,166,223.65 | 97,185.30 |
| Jan-16 | 24,894,600 | 3.2500% | 809,074.50 | 357,149 | 1,166,223.65 | 97,185.30 |
| Jan-17 | 24,537,451 | 3.2500% | 797,467.16 | 368,756 | 1,166,223.65 | 97,185.30 |
| Jan-18 | 24,168,695 | 3.2500% | 785,482.57 | 380,741 | 1,166,223.65 | 97,185.30 |
| Jan-19 | 23,787,953 | 3.2500% | 773,108.49 | 393,115 | 1,166,223.65 | 97,185.30 |
| Jan-20 | 23,394,838 | 3.2500% | 760,332.24 | 405,891 | 1,166,223.65 | 97,185.30 |
| Jan-21 | 22,988,947 | 3.2500% | 747,140.77 | 419,083 | 1,166,223.65 | 97,185.30 |
| Jan-22 | 22,569,864 | 3.2500% | 733,520.58 | 432,703 | 1,166,223.65 | 97,185.30 |
| Jan-23 | 22,137,161 | 3.2500% | 719,457.73 | 446,766 | 1,166,223.65 | 97,185.30 |
| Jan-24 | 21,690,395 | 3.2500% | 704,937.84 | 461,286 | 1,166,223.65 | 97,185.30 |
| Jan-25 | 21,229,109 | 3.2500% | 689,946.05 | 476,278 | 1,166,223.65 | 97,185.30 |
| Jan-26 | 20,752,832 | 3.2500% | 674,467.03 | 491,757 | 1,166,223.65 | 97,185.30 |
| Jan-27 | 20,261,075 | 3.2500% | 658,484.94 | 507,739 | 1,166,223.65 | 97,185.30 |
| Jan-28 | 19,753,336 | 3.2500% | 641,983.43 | | | |

| | | | |
|---|---|---|---|
| Jan-29 | 19,229,096 | 3.2500% | 624,945.62 |
| Jan-30 | 18,687,818 | 3.2500% | 607,354.09 |
| Jan-31 | 18,128,948 | 3.2500% | 589,190.83 |
| Jan-32 | 17,551,916 | 3.2500% | 570,437.26 |
| Jan-33 | 16,956,129 | 3.2500% | 551,074.20 |
| Jan-34 | 16,340,980 | 3.2500% | 531,081.84 |
| Jan-35 | 15,705,838 | 3.2500% | 510,439.74 |
| Jan-36 | 15,050,054 | 3.2500% | 489,126.76 |
| Jan-37 | 14,372,957 | 3.2500% | 467,121.11 |
| Jan-38 | 13,673,855 | 3.2500% | 444,400.28 |
| Jan-39 | 12,952,031 | 3.2500% | 420,941.02 |
| Jan-40 | 12,206,749 | 3.2500% | 396,719.33 |
| Jan-41 | 11,437,244 | 3.2500% | 371,710.44 |
| Jan-42 | 10,642,731 | 3.2500% | 345,888.76 |
| Jan-43 | 9,822,396 | 3.2500% | 319,227.88 |
| Jan-44 | 8,975,401 | 3.2500% | 291,700.52 |
| Jan-45 | 8,100,877 | 3.2500% | 263,278.52 |
| Jan-46 | 7,197,932 | 3.2500% | 233,932.80 |
| Jan-47 | 6,265,641 | 3.2500% | 203,633.35 |
| Jan-48 | 5,303,051 | 3.2500% | 172,349.16 |
| Jan-49 | 4,309,177 | 3.2500% | 140,048.24 |
| Jan-50 | 3,283,001 | 3.2500% | 106,697.54 |
| Jan-51 | 2,223,475 | 3.2500% | 72,262.94 |
| Jan-52 | 1,129,514 | 3.2500% | 36,709.22 |

| | | |
|---|---|---|
| 524,240 | 1,166,223.65 | 97,185.30 |
| 541,278 | 1,166,223.65 | 97,185.30 |
| 558,870 | 1,166,223.65 | 97,185.30 |
| 577,033 | 1,166,223.65 | 97,185.30 |
| 595,786 | 1,166,223.65 | 97,185.30 |
| 615,149 | 1,166,223.65 | 97,185.30 |
| 635,142 | 1,166,223.65 | 97,185.30 |
| 655,784 | 1,166,223.65 | 97,185.30 |
| 677,097 | 1,166,223.65 | 97,185.30 |
| 699,103 | 1,166,223.65 | 97,185.30 |
| 721,823 | 1,166,223.65 | 97,185.30 |
| 745,283 | 1,166,223.65 | 97,185.30 |
| 769,504 | 1,166,223.65 | 97,185.30 |
| 794,513 | 1,166,223.65 | 97,185.30 |
| 820,335 | 1,166,223.65 | 97,185.30 |
| 846,996 | 1,166,223.65 | 97,185.30 |
| 874,523 | 1,166,223.65 | 97,185.30 |
| 902,945 | 1,166,223.65 | 97,185.30 |
| 932,291 | 1,166,223.65 | 97,185.30 |
| 962,590 | 1,166,223.65 | 97,185.30 |
| 993,874 | 1,166,223.65 | 97,185.30 |
| 1,026,175 | 1,166,223.65 | 97,185.30 |
| 1,059,526 | 1,166,223.65 | 97,185.30 |
| 1,093,961 | 1,166,223.65 | 97,185.30 |
| 1,129,514 | 1,166,223.65 | 97,185.30 |

## St Paul Home in Belleville
## Consolidated Balance Sheet
## October 31, 2012

**Assets**

| | Consolidated | Eliminations | Nursing / Apartments | Foundation |
|---|---|---|---|---|
| **Current assets** | | | | |
| Cash | $ 1,306,871 | | $ 1,217,292 | $ 89,579 |
| Accounts receivable - Net | 1,343,287 | (40,017) | 1,383,304 | |
| Assets limited as to use - Resident Trust | 8,846 | - | 8,846 | |
| Inventory | 65,973 | - | 65,973 | |
| Accrued interest | - | - | - | |
| Prepaid expense | 66,670 | - | 66,670 | |
| Total current assets | 2,791,647 | (40,017) | 2,742,085 | 89,579 |
| **Non current assets** | | | | |
| Foundation Investments | 1,102,879 | | - | 1,102,879 |
| **Property and equipment** | | | | |
| Land | 105,793 | - | 105,793 | |
| Building | 9,805,996 | - | 9,805,996 | |
| Catawba Land | 139,962 | - | 139,962 | |
| Catawba/Krummrich | 99,817 | - | 99,817 | |
| Furniture & fixtures | 2,386,842 | - | 2,370,127 | 16,715 |
| Motor Vehicles | 85,041 | - | 85,041 | |
| | 12,623,451 | - | 12,606,736 | 16,715 |
| Accumulated depreciation | (8,739,141) | - | (8,728,934) | (10,207) |
| Total property & equipment, net | 3,884,310 | - | 3,877,802 | 6,508 |
| **Other Assets** | 9,665 | - | 9,665 | |
| **Total assets** | **$ 7,788,501** | **$ (40,017)** | **$ 6,629,552** | **$ 1,198,966** |

**Liabilities and Net Assets**

| | Consolidated | Eliminations | Nursing / Apartments | Foundation |
|---|---|---|---|---|
| **Current liabilities** | | | | |
| Accounts payable | 88,749 | - | 88,749 | |
| Wages and Tax Payable | 114,073 | - | 114,073 | |
| Accrued expenses | 325,688 | (40,017) | 325,688 | 40,017 |
| | - | - | | |
| Resident Trust & Priority Deposits | 8,846 | - | 8,846 | |
| | - | | | |
| Total current liabilities | 537,356 # | (40,017) | 537,356 | 40,017 |
| **Long-term debt** | | | | |
| Note Payable | 3,034,729 | - | 3,034,729 | |
| Total liabilities | 3,572,085 | (40,017) | 3,572,085 | 40,017 |
| **Net assets** | | | | |
| Retained Earnings | 3,593,550 | - | 2,512,517 | 1,081,033 |
| Net Income (Loss) for Current Year | 622,866 | - | 544,950 | 77,916 |
| | 4,216,416 | | 3,057,467 | 1,158,949 |
| **Total liabilities and net assets** | **$ 7,788,501** | **$ (40,017)** | **$ 6,629,552** | **$ 1,198,966** |

**St. Paul's Home**
**Balance Sheet_Home**
**HUD Loan Option**

| | 2009 | 2010 | 2011 | 2012 Forecast | Stabilized Occupancy |
|---|---|---|---|---|---|
| **Assets** | | | | | |
| Current Assets | | | | | |
| Cash | 466,404 | 809,035 | 931,302 | 1,625,448 | 919,058 |
| Cash - Resident Deposits | 4,474 | 3,296 | 4,114 | 6,202 | 6,300 |
| Resident Accounts Receivable, net Allowance | 680,028 | 481,982 | 1,176,720 | 1,081,681 | 1,114,131 |
| Supplies | 34,282 | 43,489 | 43,525 | 43,600 | 44,000 |
| Prepaid expenese and other | 134,118 | 165,052 | 110,111 | 115,000 | 146,000 |
| **TOTAL CURRENT ASSETS** | 1,319,306 | 1,502,854 | 2,265,772 | 2,871,931 | 2,229,489 |
| Assets Restricted as to Use | | | | | |
| Reserve Replacement | | | | | 90,500 |
| CON Licenses | | | | | 200,000 |
| Total Assets Limited for Use | | | | | 290,500 |
| Property and Equipment, At Cost | | | | | |
| Land | 245,755 | 245,755 | 245,755 | 245,755 | 245,755 |
| Buildings and lease improvements | 9,705,853 | 9,751,574 | 9,798,184 | 9,846,537 | 29,638,597 |
| Equipment | 2,327,673 | 2,386,931 | 2,433,824 | 2,453,368 | 3,927,779 |
| | 12,279,281 | 12,384,260 | 12,477,763 | 12,545,660 | 33,812,131 |
| Less accumulated depreciation | 7,840,844 | 8,167,484 | 8,470,473 | 8,676,477 | 5,270,803 |
| | 4,438,437 | 4,216,776 | 4,007,290 | 3,869,183 | 28,541,328 |
| Investments | 10,655 | 11,872 | 9,665 | 9,665 | 9,665 |
| Other Assets | | | | | |
| Loan issuance costs, net of amortization | 6,251 | 3,125 | - | | 1,421,415 |
| **TOTAL ASSETS** | **$ 5,774,649** | **$ 5,734,627** | **$ 6,282,727** | **$ 6,750,779** | **$ 32,492,397** |

**St. Paul's Home**
**Balance Sheet_Home**
**HUD Loan Option**

**Liability and Net Assets**

| | | | | | |
|---|---|---|---|---|---|
| Current Liabilities | | | | | |
| Accounts payable | 322,016 | 116,556 | 218,633 | 196,345 | 202,235 |
| Accrued expenses | 359,384 | 330,062 | 257,156 | 351,975 | 362,534 |
| Current maturity of long-term debt | 61,498 | 3,337,435 | 188,569 | 188,569 | 340,371 |
| Resident Deposits | 4,974 | 3,796 | 4,614 | 6,202 | 6,202 |
| **TOTAL CURRENT LIABILITIES** | 747,872 | 3,787,849 | 668,972 | 743,091 | 911,343 |
| Long Term Debt | 3,424,451 | | 3,001,382 | 2,812,813 | 28,272,125 |
| Deposits | 14,990 | 14,590 | 16,689 | 19,025 | 21,689 |
| Total Liabilities | 4,187,313 | 3,802,439 | 3,687,043 | 3,574,929 | 29,205,157 |
| Unrestricted Net Assets | 1,587,336 | 1,932,188 | 2,595,684 | 3,175,850 | 3,287,240 |
| **TOTAL LIABILITIES AND NET ASSETS** | **$ 5,774,649** | **$ 5,734,627** | **$ 6,282,727** | **$ 6,750,779** | **$ 32,492,397** |

# St. Paul's Home
## Home_Statements of Operations
## HUD Loan Option

| | 2009 | 2010 | 2011 | 2012 | Stabilized Occupancy |
|---|---|---|---|---|---|
| Unrestricted Revenues, Gains and Other Support | | | | | |
| Net resident service revenues | 6,598,147 | 7,313,120 | 7,985,976 | 8,222,722 | 10,527,556 |
| Foundation Support | 48,000 | 48,000 | 48,000 | 48,000 | 168,000 |
| Other | 1,092 | 1,814 | 3,411 | | |
| **Total unrestricted revenues, gains & other support** | **6,647,239** | **7,362,934** | **8,037,387** | **8,270,722** | **10,695,556** |
| Expenses | | | | | |
| Salaries and Wages | 3,127,183 | 3,273,160 | 3,306,743 | 3,468,158 | 4,084,942 |
| Employee benefits | 671,040 | 660,409 | 736,572 | 325,833 | 791,757 |
| Purchased services and professional fees | 789,991 | 984,644 | 1,281,464 | 1,565,902 | 1,324,624 |
| Supplies and other | 1,470,618 | 1,532,610 | 1,506,089 | 1,926,365 | 1,973,722 |
| Depreciation and amortization | 343,690 | 329,767 | 303,371 | 305,507 | 990,637 |
| Interest | 239,403 | 230,737 | 219,147 | 79,793 | 1,122,403 |
| Charity Care | - | 11,143 | 18,937 | 19,000 | - |
| **Total Expenses** | **6,641,925** | **7,022,470** | **7,372,323** | **7,690,557** | **10,288,085** |
| **Operating Income** | **5,314** | **340,464** | **665,064** | **580,166** | **407,470** |

# St. Paul's Home
## Home_Statements of Operations
## HUD Loan Option

| | 2009 | 2010 | 2011 | 2012 | Stabilized Occupancy |
|---|---|---|---|---|---|
| Other Income | | | | | |
| Investment Income | 3,353 | 4,387 | 627 | - | - |
| Contributions | 137,496 | | 12 | - | - |
| | 140,849 | 4,387 | 639 | - | - |
| **Excess of Revenues Over Expenses** | **146,163** | **344,851** | **665,703** | **580,166** | **407,470** |
| Investment Return-change in Unrealized | 2,430 | - | (2,207) | - | |
| **Increase in Unrestricted Net Assets** | **$ 148,593** | **$ 344,851** | **$ 663,496** | **$ 580,166** | **$ 407,470** |

For 2012, Includes Medicaid proivder tax and Stage 1 Devel Costs

| | | | | | |
|---|---|---|---|---|---|
| **DSCR:** | | | | | |
| NI | 148,593 | 344,851 | 663,496 | 580,166 | 407,470 |
| Depreciaion and Amortization | 343,690 | 329,767 | 303,371 | 305,507 | 990,637 |
| Interest | 239,403 | 230,737 | 219,147 | 79,793 | 1,122,403 |
| Funds Available for Debt Service | 731,686 | 905,355 | 1,186,014 | 965,465 | 2,520,511 |
| MADS (Maximum Annual Debt Service Requirement | 382,198 | 379,248 | 366,631 | 268,361 | 1,388,543 |
| **DSCR** | **1.91** | **2.39** | **3.23** | **3.60** | **1.82** |

## St. Paul's Home
## Statements of Cash Flows
## HUD Loan Option

| | 2009 | 2010 | 2011 | 2012 | Stabilized Occupancy |
|---|---|---|---|---|---|
| **Cash-Beginning Bal** | | | 809,035 | 931,302 | 300,000 |
| **Investments:** | | | | | |
| Inv - Beginning Bal | | | 11,872 | 9,665 | 9,665 |
| Contributions | | | 12 | - | |
| Realized Income (Loss) | | | 627 | - | |
| Unrealized Income (Loss) | | | (2,207) | - | |
| Inv - Ending Bal | | | (9,665) | (9,665) | (9,665) |
| Real Increase (Decrease) in Investments | | | 639 | - | - |
| **Cash Flow from Operations:** | | | | | |
| Net Income | | | 663,496 | 580,166 | 407,470 |
| Depreciation & Amortization | | | 303,371 | 305,507 | 990,637 |
| Unrecognized losses (gains) - Investments | | | (2,207) | - | - |
| **Cash Flow from Operations** | | | 964,660 | 885,672 | 1,398,108 |
| **Change in Accounts Receivable:** | | | | | |
| AR - Beginning Bal | | | (481,982) | (1,176,720) | (1,081,681) |
| AR - Ending Balance | | | 1,176,720 | 1,081,681 | 1,114,131 |
| **Change in AR** | | | (694,738) | 95,039 | (32,450) |
| **Change in Long Term Debt:** | | | | | |
| Debt Service Requirement (Includes LOC) | | | (3,337,435) | (3,189,951) | (1,519,003) |
| Interest Expensed in NI | | | 3,189,951 | 3,001,382 | 1,122,403 |
| **Change in Long Term Debt & LOC** | | | (147,484) | (188,569) | (396,600) |
| **Other Impacts:** | | | | | |
| Non-specified Changes in Net Assets | | | (810) | (97,996) | (350,000) |
| **Cash - Ending Balance** | | | 931,302 | 1,625,448 | 919,058 |
| *Check* | | | 931,302 | 1,625,448 | 919,058 |

# St. Paul's Home
# CON - Project Structure
# Section V - Financial Viability Ratios_HUD Loan Option

| | | 2009 | 2010 | 2011 | Projected 2012 | Category B (Projected) | Notes |
|---|---|---|---|---|---|---|---|
| Current Ratio | | | | | | | |
| A | Current Assets | 1,319,306 | 1,502,854 | 2,265,772 | 2,871,931 | 2,229,489 | |
| B | Current Liabilities | 747,872 | 3,787,849 | 668,972 | 743,091 | 911,343 | |
| A/B | Current Ratio | 1.76 | 0.40 | 3.39 | 3.86 | 2.45 | Meets 2.0 Min |
| | | | 2010-Debt Was Due for Refinancing | | | | |
| Net Margin Percentage | | | | | | | |
| A | Net Income | 148,593 | 344,851 | 663,496 | 580,166 | 407,470 | |
| B | Net Operating Revenues | 6,647,239 | 7,362,934 | 8,037,387 | 8,270,722 | 10,695,556 | |
| A/B | Net Margin Percentage | 2.24% | 4.68% | 8.26% | 7.01% | 3.81% | Meets 2.5 Min |
| Percent Debt to Total Cap | | | | | | | |
| A | Mortgage Term Debt | 3,485,949 | 3,337,435 | 3,189,951 | 3,001,382 | 27,475,000 | |
| B | Net Assets+Debt | 7,924,386 | 7,554,211 | 7,197,241 | 6,870,565 | 56,016,328 | |
| A/(A+B) | Percent Debt to Total Cap | | 44.18% | 44.32% | 43.68% | 49.05% | Meets 80% Max |
| Projected DSCR | | | | | | | |
| A | NI+Depr+Amort+Int | 731,686 | 905,355 | 1,186,014 | 965,465 | 2,520,511 | |
| B | MADS | 382198 | 379,251 | 366,631 | 268,362 | 1,388,543 | |
| A/B | Projected DSCR | 1.91 | 2.39 | 3.23 | 3.60 | 1.82 | Meets 1.5 Min |
| | | | St Paul's Debt had a variable interest rate during this time period | | | | |
| Days Cash on Hand | | | | | | | |
| A | Cash and Investments | 477,059 | 820,907 | 940,967 | 1,635,113 | 928,723 | |
| B | Total Op Exp/365 | 16,600 | 17,704 | 18,767 | 20,014 | 25,472 | |
| A/B | Days Cash on Hand | 29 | 46 | 50 | 82 | 36 | Min 450Not Met |
| Cushion Ratio | | | | | | Min Cash Required To Meet 3.0 Min | |
| A | Cash and Investments | 477,059 | 820,907 | 940,967 | 1,635,113 | 928,723 | 4,165,630 |
| B | MADS | 382,198 | 379,251 | 366,631 | 268,362 | 1,388,543 | 1,388,543 |
| A/B | Cushion Ratio | 1.25 | 2.16 | 2.57 | 6.09 | 0.67 | 3.00 |
| | | | | | | | Min Not Met |

# St. Paul's Home
## Project Structure
## HUD Loan Option

**Stabilized Occupancy**

**Development Project:**

| | | | | |
|---|---|---|---|---|
| **Sources of Funds:** | | | | |
| Mortgage Debt | 27,475,000 | | | |
| Sub Debt / LOI | 1,137,496 | | | |
| **STP Contributions:** | | | | |
| Cash & Investments | 2,000,000 | | | |
| Capital Campaign | 1,000,000 | | | |
| | - | | | |
| **Total Sources** | 31,612,496 | | | |
| | | Average Amortization Periods | | |
| **Uses of Funds:** | | | | |
| Building - Capitalized | 24,163,085 | 40 | Life of Loan | Per Danielle Soloman (BKD) |
| FF&E - Capitalized | 1,600,000 | 10 | *Guestimate* | |
| CON Licensing Fees | 200,000 | NA | Balance Sheet Only | Per Danielle Soloman (BKD) |
| PreMarketing/Startup Costs | 687,996 | *Expense or COI* | Life of Loan | Per Danielle Soloman (BKD) |
| Resplacement Reserve (500 per ILU bed) | 90,500 | NA | Balance Sheet Only | |
| Loan Origination Financing Costs | 1,421,415 | 40 | Life of Loan | Per Danielle Soloman (BKD) |
| Working Capital | 549,500 | NA | Balance Sheet Only | |
| Current Debt Refunding | 2,900,000 | NA | Balance Sheet Only | |
| **Total Uses** | 31,612,496 | | | |
| % Dif Check | 0% | | | |
| % Dif Check | 0% | | | |

**St. Paul's Home**
**Statements of Projected Capital**
**HUD Loan Option**

| | Stabilized Occupancy | AVG. Duration | Depreciation Expense |
|---|---|---|---|
| **Capitalized Building:** | | | |
| Catawba | 99,817 | NA | 3,600 |
| ILU - Existing | 5,375,695 | NA | 138,216 |
| Skilled - New | 14,131,013 | 40.00 | 353,275 |
| Sheltered - New | 10,032,072 | 40.00 | 250,802 |
| | 29,638,597 | | 742,293 |
| **Capitalized FF&E:** | | | |
| ILU - Existing | 277,000 | NA | 5,240 |
| Nursing - Existing | 2,000,000 | NA | 67,704 |
| Nursing - New | 1,600,000 | 10.00 | 160,000 |
| | 3,877,000 | | 232,944 |
| **Motor Vehicles:** | | | |
| ILU - Apts | 34,262 | | - |
| Nursing | 50,779 | | 4,548 |
| | 50,779 | | 4,548 |
| **COI:** | | | |
| New Loan | 1,421,415 | 40.00 | 35,535 |
| **Marketing:** | | | |
| New Loan | 687,996 | 40.00 | 17,200 |
| **CON License:** | | | |
| New Loan | 200,000 | - | NA |
| **Land:** | | | |
| Land | 105,793 | | NA |
| Catawba | 139,962 | | NA |
| **Total Capital / Depreciation:** | | | |
| ILU - Existing | 5,786,774 | | 147,056 |
| Nursing - Existing | 2,050,779 | | 210,468 |
| Nursing - New | 25,763,085 | | 764,077 |
| Total Depreciation | 33,600,638 | | 1,121,601 |

## ST. PAUL'S VILLAGE DRAFT PROFORMA BASED ON STABILIZED OCCUPANCY

### RETIREMENT, SHELTER CARE/MEMORYCARE AND SKILLED NURSING LEVELS OF CARE

### (ASSUMES HUD FINANCED)

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | TOTAL NEW CAMPUS | Retirement Apts. | General PPD | Shelter Care | General PPD | Skilled Nursing | General PPD | Expense : % of Rev | 2013 Oper. Budget |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Revenues | | | | | | | | | | | | | | | | | | | | | |
| Retirement Living | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 1,287,120 | 1,287,120 | | | | | | | 1,289,912 |
| Shelter Care | 73,160 | 66,080 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 | | | 861,400 | | | | | 433,584 |
| Private | 369,985 | 341,860 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 4,374,195 | | | | | 4,374,195 | | | 1,898,000 |
| Medicaid - SNF/ IC | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 1,314,000 | | | | | 1,314,000 | | | 2,118,941 |
| Medicare A | 202,049 | 182,496 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 2,378,961 | | | | | 2,378,961 | | | 1,629,490 |
| Medicare B | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 269,280 | | | | | 269,280 | | | 294,000 |
| Other operating income | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 42,600 | | | | | 42,600 | | | 41,400 |
| Foundation Support | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 168,000 | | | 12,000 | | 156,000 | | | 126,000 |
| Total operating income | 904,044 | 838,486 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 10,695,556 | 1,287,120 | 70.53 | 873,400 | 119.64 | 8,535,036 | 233.84 | 100.0% | 7,891,327 |
| | | | | | | | | | | | | | % of Tot. Rev. | 12% | | 8% | | 80% | | | |
| Expenses | | | | | | | | | | | | | | | | | | | | | |
| Salaries & benefits | | | | | | | | | | | | | | | | | | | | | |
| Clinical | 211,481 | 201,868 | 211,481 | 201,868 | 211,481 | 201,868 | 211,481 | 211,481 | 201,868 | 211,481 | 211,481 | 211,481 | 2,499,319 | - | - | | | 2,499,319 | 68.47 | 23.4% | 2,170,526 |
| Special Services | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,714 | 11,182 | 11,714 | 11,714 | 11,714 | 138,441 | 27,817 | 1.52 | | | 110,624 | 3.03 | 1.3% | 135,373 |
| Dietary | 45,972 | 43,882 | 45,972 | 43,952 | 45,972 | 43,842 | 45,972 | 45,972 | 43,882 | 45,972 | 45,972 | 45,972 | 543,300 | 137,542 | 7.54 | | | 405,758 | 11.12 | 5.1% | 499,817 |
| Env Service | 25,898 | 24,721 | 25,899 | 24,721 | 25,898 | 24,721 | 25,895 | 25,898 | 24,721 | 25,898 | 25,898 | 25,898 | 306,072 | 44,198 | 2.42 | | | 261,874 | 7.17 | 2.9% | 335,320 |
| Maintenance | 13,056 | 12,462 | 13,056 | 12,462 | 13,056 | 12,462 | 13,056 | 13,056 | 12,462 | 13,056 | 13,056 | 13,056 | 154,196 | 28,516 | 1.56 | | | 125,780 | 3.45 | 1.4% | 134,205 |
| Admin / Other | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 37,474 | 35,930 | 37,474 | 37,474 | 37,474 | 443,515 | 50,000 | 2.74 | | | 393,515 | 10.78 | 4.1% | 420,121 |
| Salaries | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 345,595 | 330,045 | 345,595 | 345,595 | 345,595 | 4,084,942 | 288,073 | 15.78 | 193,769 | 26.54 | 3,603,100 | 98.72 | 38.1% | 3,695,371 |
| | | | | | | | | | | | | | | | | | | | | | |
| Taxes and Benefits | 64,111 | 62,922 | 64,111 | 65,942 | 67,131 | 65,942 | 67,131 | 67,131 | 65,942 | 67,131 | 67,131 | 67,131 | 791,757 | 51,690 | 2.83 | 38,913 | 5.33 | 701,154 | 19.21 | 7.4% | 768,854 |
| Salaries & benefits | 409,706 | 392,967 | 409,706 | 395,987 | 412,726 | 395,987 | 412,726 | 412,726 | 395,987 | 412,726 | 412,726 | 412,726 | 4,876,699 | 339,763 | 18.61 | 232,682 | 31.87 | 4,304,254 | 117.92 | 45.6% | 4,464,225 |
| | | | | | | | | | | | | | | | | | | | | | |
| Clinical | 69,914 | 65,004 | 69,514 | 68,411 | 69,514 | 68,011 | 69,914 | 69,514 | 70,411 | 69,914 | 63,011 | 69,514 | 827,646 | - | - | 3,746 | 0.51 | 823,900 | 22.57 | 7.7% | 687,503 |
| Special Services | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 15,600 | 4,890 | 0.26 | 540 | 0.07 | 10,260 | 0.28 | 0.1% | 13,500 |
| Dietary | 36,972 | 34,389 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 437,638 | 103,800 | 5.69 | 52,438 | 7.18 | 281,400 | 7.71 | 4.1% | 420,773 |
| Environmental Services | 3,705 | 3,399 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 43,740 | 6,510 | 0.36 | 6,205 | 0.85 | 31,025 | 0.85 | 0.4% | 42,360 |
| Maintenance | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 578,790 | 200,800 | 11.00 | 55,820 | 7.65 | 322,170 | 8.83 | 5.4% | 518,643 |
| General & administrative | 113,035 | 111,935 | 118,363 | 115,554 | 117,363 | 115,554 | 117,363 | 117,363 | 115,554 | 117,363 | 117,337 | 118,147 | 1,394,932 | 169,296 | 9.28 | 100,085 | 13.71 | 1,125,548 | 30.84 | 13.0% | 1,085,429 |
| Non Salary Expense | 272,159 | 263,258 | 277,087 | 278,310 | 276,087 | 271,810 | 276,487 | 276,087 | 280,210 | 276,487 | 273,594 | 276,870 | 3,298,345 | 485,296 | 26.59 | 218,837 | 29.98 | 2,594,302 | 71.08 | 30.8% | 2,768,218 |
| | | | | | | | | | | | | | - | | | | | | | | |
| TOTAL OPERATING EXPENSE | 681,865 | 656,225 | 686,793 | 674,198 | 688,813 | 667,798 | 689,213 | 688,813 | 676,198 | 689,213 | 686,320 | 689,596 | 8,175,045 | 814,969 | 45.20 | 451,520 | 61.85 | 6,898,556 | 189.00 | 76.4% | 7,232,443 |
| | | | | | | | | | | | | | - | | | | | | | | |
| EBITDA - Earnings Before Interest Taxes Depreciation and Amortization | 222,179 | 182,260 | 217,251 | 207,993 | 215,231 | 214,393 | 214,831 | 215,231 | 205,993 | 214,831 | 195,871 | 214,447 | 2,520,511 | 462,151 | 25.32 | 421,880 | 57.79 | 1,636,479 | 44.84 | | 658,883 |
| | | | | | | | | | | | | | - | | | | | | | | |
| Interest Exp B/4 Supplemental Coupon | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 1,122,411 | 113,819 | 6 | 113,994 | 16 | 894,688 | 24.52 | 10.5% | 79,200 |
| Depreciation New and current | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 955,103 | 150,000 | 8.24 | 237,806 | 32.51 | 567,296 | 15.55 | 6.9% | 328,917 |
| Amortization of New Financing | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 35,534 | 3,880 | 0.21 | 9,852 | 1.35 | 21,802 | 0.60 | 0.3% | |
| Taxes, Interest, Amort / Depre | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 2,113,049 | 267,699 | 14.71 | 361,652 | 49.45 | 1,483,779 | 40.67 | 18.8% | 408,117 |
| | | | | | | | | | | | | | | | | | | | | | |
| Net Income | 46,092 | (6,174) | 41,164 | 31,907 | 39,144 | 38,307 | 38,744 | 39,144 | 29,907 | 38,744 | 19,784 | 38,361 | 407,478 | 194,482 | 10.68 | (139,682) | (19.09) | 352,700 | 9.66 | 3.8% | 250,767 |
| | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | Profit margin | 3.8% | | | | | | | |
| | | | | | | | | | | | | | NET INCOME | 407,478 | | | | | | | |
| | | | | | | | | | | | | | Net Income % | 3.8% | | | | | | | |
| | | | | | | | | | | | | | Income to Build the DSC | 2,578,511 | | | | | | | |
| | | | | | | | | | | | | | MADS (Excludes LOC) | 1,328,260 | | | | | | | |
| | | | | | | | | | | | | | DSCR | 1.94 | | | | | | | |
| | | | | | | | | | | | | | MADS (Includes LOC) | 1,489,581 | | | | | | | |
| | | | | | | | | | | | | | DSCR | 1.73 | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | |
| 2 | | RETIREMENT APARTMENTS ONLY | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | New Campus |
| 6 | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | Retirement Apt Rents | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 1,254,720 |
| 9 | 2nd person fees | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 32,400 |
| 10 | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | |
| 12 | Total operating income | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **1,287,120** |
| 13 | | | | | | | | | | | | | | |
| 14 | **Expenses - Salaries, Wages and Benefits** | | | | | | | | | | | | | |
| 15 | Clinical | | | | | | | | | | | | | - |
| 16 | Special Services | 2,354 | 2,247 | 2,354 | 2,247 | 2,354 | 2,247 | 2,354 | 2,354 | 2,247 | 2,354 | 2,354 | 2,354 | 27,817 |
| 17 | Dietary | 11,638 | 11,109 | 11,638 | 11,109 | 11,638 | 11,109 | 11,638 | 11,638 | 11,109 | 11,638 | 11,638 | 11,638 | 137,542 |
| 18 | Env Service | 3,740 | 3,570 | 3,740 | 3,570 | 3,740 | 3,570 | 3,740 | 3,740 | 3,570 | 3,740 | 3,740 | 3,740 | 44,198 |
| 19 | Maintenance | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 28,516 |
| 20 | Admin / Other | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 50,000 |
| 21 | Salaries | 24,275 | 23,469 | 24,275 | 23,469 | 24,275 | 23,469 | 24,275 | 24,275 | 23,469 | 24,275 | 24,275 | 24,275 | 288,073 |
| 22 | | | | | | | | | | | | | | |
| 23 | Taxes and Benefits | 4,215 | 4,153 | 4,215 | 4,304 | 4,366 | 4,304 | 4,366 | 4,366 | 4,304 | 4,366 | 4,366 | 4,366 | 51,690 |
| 24 | **Salaries & benefits** | **28,490** | **27,622** | **28,490** | **27,773** | **28,641** | **27,773** | **28,641** | **28,641** | **27,773** | **28,641** | **28,641** | **28,641** | **339,763** |
| 25 | | | | | | | | | | | | | | - |
| 26 | Clinical | | | | | | | | | | | | | - |
| 27 | Special Services | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 4,800 |
| 28 | Dietary | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 103,800 |
| 29 | Environmental Services | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 6,510 |
| 30 | Maintenance | 16,400 | 16,400 | 16,400 | 18,400 | 16,400 | 16,400 | 16,400 | 16,400 | 18,400 | 16,400 | 16,400 | 16,400 | 200,800 |
| 31 | General & administrative | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 169,296 |
| 32 | **Operating Expense** | **40,101** | **40,101** | **40,101** | **42,101** | **40,101** | **40,101** | **40,101** | **40,101** | **42,101** | **40,101** | **40,101** | **40,101** | **485,206** |
| 33 | | | | | | | | | | | | | | - |
| 34 | | | | | | | | | | | | | | - |
| 35 | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | **38,670** | **39,538** | **38,670** | **37,387** | **38,519** | **39,387** | **38,519** | **38,519** | **37,387** | **38,519** | **38,519** | **38,519** | **462,151** |
| 36 | | | | | | | | | | | | | | - |
| 37 | Interest Exp | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 113,819 |
| 38 | Depreciation | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 150,000 |
| 39 | Amortization | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 3,880 |
| 40 | **Taxes, Interest, Amort / Depre** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **267,699** |
| 41 | | | | | | | | | | | | | | |
| 42 | **Net income** | **16,362** | **17,229** | **16,362** | **15,078** | **16,211** | **17,078** | **16,211** | **16,211** | **15,078** | **16,211** | **16,211** | **16,211** | **194,452** |
| 43 | | | | | | | | | | | | | | |
| 45 | | | | | | | | | | | | | | |
| 46 | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | **194,452** |
| 47 | **Net Income %** | | | | | | | | | | | **Net Income %** | | **15.1%** |
| 48 | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | **458,271** |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | |
| 2 | | SHELTER CARE only | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | New Campus |
| 6 | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | Shelter Care | 73,160 | 66,080 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 |
| 9 | Charitable Care - Foundation w/ SNF | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 12,000 |
| 10 | Total operating income | **74,160** | **67,080** | **74,160** | **71,800** | **74,160** | **71,800** | **74,160** | **74,160** | **71,800** | **74,160** | **71,800** | **74,160** | **873,400** |
| 11 | | | | | | | | | | | | | | |
| 12 | **Expenses** | | | | | | | | | | | | | |
| 13 | Clinical | 10,574 | 10,093 | 10,574 | 10,093 | 10,574 | 10,093 | 10,574 | 10,574 | 10,093 | 10,574 | 10,574 | 10,574 | 124,966 |
| 14 | Special Services | 468 | 447 | 468 | 447 | 468 | 447 | 468 | 468 | 447 | 468 | 468 | 468 | 5,531 |
| 15 | Dietary | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,717 | 1,639 | 1,717 | 1,717 | 1,717 | 20,288 |
| 16 | Env Service | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,108 | 1,058 | 1,108 | 1,108 | 1,108 | 13,094 |
| 17 | Maintenance | 653 | 623 | 653 | 623 | 653 | 623 | 653 | 653 | 623 | 653 | 653 | 653 | 7,715 |
| 18 | Admin / Other | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,874 | 1,797 | 1,874 | 1,874 | 1,874 | 22,176 |
| 19 | Salaries | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 16,393 | 15,656 | 16,393 | 16,393 | 16,393 | 193,769 |
| 20 | | | | | | | | | | | | | | |
| 21 | Taxes and Benefits | 3,148 | 3,092 | 3,148 | 3,243 | 3,299 | 3,243 | 3,299 | 3,299 | 3,243 | 3,299 | 3,299 | 3,299 | 38,913 |
| 22 | **Salaries & benefits** | **19,541** | **18,748** | **19,541** | **18,899** | **19,692** | **18,899** | **19,692** | **19,692** | **18,899** | **19,692** | **19,692** | **19,692** | **232,682** |
| 23 | | | | | | | | | | | | | | - |
| 24 | Clinical | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 3,746 |
| 25 | Special Services | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 540 |
| 26 | Dietary | 4,452 | 4,029 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 52,438 |
| 27 | Environmental Services | 527 | 476 | 527 | 510 | 527 | 510 | 527 | 527 | 510 | 527 | 510 | 527 | 6,205 |
| 28 | Maintenance | 4,485 | 4,485 | 4,485 | 5,485 | 4,485 | 4,485 | 4,485 | 4,485 | 5,485 | 4,485 | 4,485 | 4,485 | 55,820 |
| 29 | General & administrative | 8,412 | 8,047 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 100,088 |
| 30 | **Operating Expense** | **18,233** | **17,394** | **18,233** | **18,953** | **18,233** | **17,953** | **18,233** | **18,233** | **18,953** | **18,233** | **17,953** | **18,233** | **218,837** |
| 31 | | | | | | | | | | | | | | - |
| 32 | | | | | | | | | | | | | | - |
| 33 | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | **36,386** | **30,938** | **36,386** | **33,948** | **36,235** | **34,948** | **36,235** | **36,235** | **33,948** | **36,235** | **34,154** | **36,235** | **421,880** |
| 34 | | | | | | | | | | | | | | - |
| 35 | Interest Exp | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 313,904 |
| 36 | Depreciation | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 237,806 |
| 37 | Amortization | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 9,852 |
| 38 | **Taxes, Interest, Amort / Depre** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **561,562** |
| 39 | | | | | | | | | | | | | | |
| 40 | **Net income** | **(10,411)** | **(15,858)** | **(10,411)** | **(12,849)** | **(10,562)** | **(11,849)** | **(10,562)** | **(10,562)** | **(12,849)** | **(10,562)** | **(12,643)** | **(10,562)** | **(139,682)** |
| 41 | | | | | | | | | | | | | | |
| 43 | | | | | | | | | | | | | | |
| 44 | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | **(139,682)** |
| 45 | **Net income %** | | | | | | | | | | | **Net income %** | | **-16.0%** |
| 46 | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | **412,028** |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | |
| 2 | | SKILLED NURSING / INTERMEDIATE with MEDICARE AND MEMORY CARE UNITS | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | New Campus |
| 6 | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | Private | 369,985 | 341,860 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 4,374,195 |
| 9 | Medicaid - SNF/ IC | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 1,314,000 |
| 10 | Medicare A | 202,049 | 182,496 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 2,378,961 |
| 11 | Medicare B | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 269,280 |
| 12 | Other operating income | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 42,600 |
| 13 | Charitable Care - Foundation w/Shelter | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 14 | Foundation Support | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 108,000 |
| 15 | Total operating income | 722,624 | 664,146 | 722,624 | 703,131 | 722,624 | 703,131 | 722,624 | 722,624 | 703,131 | 722,624 | 703,131 | 722,624 | 8,535,036 |
| 16 | | | | | | | | | | | | | | |
| 17 | **Expenses** | | | | | | | | | | | | | |
| 18 | Clinical | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 200,907 | 191,775 | 200,907 | 200,907 | 200,907 | 2,374,353 |
| 19 | Special Services | 8,892 | 8,488 | 8,892 | 8,488 | 8,892 | 8,488 | 8,892 | 8,892 | 8,488 | 8,892 | 8,892 | 8,892 | 105,092 |
| 20 | Dietary | 32,617 | 31,134 | 32,617 | 31,134 | 32,617 | 31,134 | 32,617 | 32,617 | 31,134 | 32,617 | 32,617 | 32,617 | 385,470 |
| 21 | Env Service | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 21,051 | 20,094 | 21,051 | 21,051 | 21,051 | 248,781 |
| 22 | Maintenance | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 10,027 | 9,463 | 10,027 | 10,027 | 10,027 | 118,065 |
| 23 | Admin / Other | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 31,434 | 29,967 | 31,434 | 31,434 | 31,434 | 371,339 |
| 24 | Salaries | 304,927 | 290,921 | 304,927 | 290,921 | 304,927 | 290,921 | 304,927 | 304,927 | 290,921 | 304,927 | 304,927 | 304,927 | 3,603,100 |
| 25 | | | | | | | | | | | | | | |
| 26 | Taxes and Benefits | 56,748 | 55,677 | 56,748 | 58,395 | 59,466 | 58,395 | 59,466 | 59,466 | 58,395 | 59,466 | 59,466 | 59,466 | 701,154 |
| 27 | **Salaries & benefits** | 361,675 | 346,597 | 361,675 | 349,315 | 364,393 | 349,315 | 364,393 | 364,393 | 349,315 | 364,393 | 364,393 | 364,393 | 4,304,254 |
| 28 | | | | | | | | | | | | | | - |
| 29 | Clinical | 69,602 | 64,692 | 69,202 | 68,099 | 69,202 | 67,699 | 69,602 | 69,202 | 70,099 | 69,602 | 67,699 | 69,202 | 823,900 |
| 30 | Special Services | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 10,260 |
| 31 | Dietary | 23,870 | 21,710 | 23,870 | 23,150 | 23,870 | 23,150 | 23,870 | 23,870 | 23,150 | 23,870 | 23,150 | 23,870 | 281,400 |
| 32 | Environmental Services | 2,635 | 2,380 | 2,635 | 2,550 | 2,635 | 2,550 | 2,635 | 2,635 | 2,550 | 2,635 | 2,550 | 2,635 | 31,025 |
| 33 | Maintenance | 26,348 | 26,348 | 26,348 | 29,348 | 26,348 | 26,348 | 26,348 | 26,348 | 29,348 | 26,348 | 26,348 | 26,348 | 322,170 |
| 34 | General & administrative | 90,516 | 89,780 | 95,844 | 93,156 | 94,844 | 93,156 | 94,844 | 94,844 | 93,156 | 94,844 | 94,939 | 95,627 | 1,125,548 |
| 35 | **Operating Expense** | 213,825 | 205,764 | 218,753 | 217,157 | 217,753 | 213,757 | 218,153 | 217,753 | 219,157 | 218,153 | 215,540 | 218,537 | 2,594,302 |
| 36 | | | | | | | | | | | | | | - |
| 37 | | | | | | | | | | | | | | - |
| 38 | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | 147,123 | 111,784 | 142,195 | 136,659 | 140,477 | 140,059 | 140,077 | 140,477 | 134,659 | 140,077 | 123,197 | 139,694 | 1,636,479 |
| 39 | | | | | | | | | | | | | | - |
| 40 | Interest Exp | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 694,680 |
| 41 | Depreciation | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 567,296 |
| 42 | Amortization | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 21,803 |
| 43 | **Taxes, Interest, Amort / Depre** | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 1,283,779 |
| 44 | | | | | | | | | | | | | | |
| 45 | **Net income** | 40,142 | 4,803 | 35,214 | 29,677 | 33,496 | 33,077 | 33,096 | 33,496 | 27,677 | 33,096 | 16,216 | 32,712 | 352,700 |
| 46 | | | | | | | | | | | | | | |
| 48 | | | | | | | | | | | | | | |
| 49 | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | 352,700 |
| 50 | **Net income %** | | | | | | | | | | | **Net income %** | | 4.1% |
| 51 | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | 1,069,183 |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | **St. Paul's Home in Belleville** | | | | | | | | | | | | | | | | | | |
| 2 | New Campus Projections | | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | | |
| 4 | Date of Run: | 12/26/12 | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | | |
| 6 | | # of | | | New Campus projection | | | | | | | | | | | | | | |
| 7 | Room Type | Beds | | | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | PRIV | CAID | MEDA |
| 8 | | | | | | | | | | | | | | | | | | | |
| 9 | Retirement apt. | | | | | | | | | | | | | | | | | | |
| 10 | EXISTING INDEPENDENT LIVING APARTMENTS | | 53 | | | | | | | | | | | | | | | | |
| 11 | ILU - One Bedroom | 28 | PRIV | $ 1,990 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | | | |
| 12 | ILU - Two Bedroom | 12 | PRIV | $ 2,195 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | | | |
| 13 | ILU - Two BR w Porch/patio | 13 | PRIV | $ 2,245 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | | | |
| 14 | | | | | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50.0 | | |
| 15 | | | | | | | | | | | | | | | | | | | |
| 16 | ILU - apartments | 53 | | 2% incr | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | | | |
| 17 | | | | | | | | | | | | | | | | | | | |
| 18 | 3rd FLOOR NORTH - SHELTERED CARE | | 26 | | | | | | | | | | | | | | | | |
| 19 | Shelter One Bedroom/companion | 8 | PRIV | $ 150 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | | |
| 20 | Shelter Studio | 8 | PRIV | $ 120 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | | | |
| 21 | Shelter Companion | 10 | PRIV | $ 100 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | | | |
| 22 | | | | | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20.0 | | |
| 23 | | | | | | | | | | | | | | | | | | | |
| 24 | Shelter Care | 26 | | | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | | | |
| 25 | | | | | | | | | | | | | | | | | | | |
| 26 | 1ST FLOOR NORTH - ICF/MEMORY CARE | | 18 | | | | | | | | | | | | | | | | |
| 27 | ICF Memory Care Companion | 8 | PRIV | $ 140 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8.0 | | |
| 28 | ICF Memory Care Studio | 10 | PRIV | $ 160 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9.0 | | |
| 29 | | | | | | | | | | | | | | | | | | | |
| 30 | | | | | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | | | |
| 31 | | | | | | | | | | | | | | | | | | | |
| 32 | 2ND FLOOR NORTH - SNF | | 24 | | | | | | | | | | | | | | | | |
| 33 | SNF Private room | 10 | PRIV | $ 250 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10.0 | | |
| 34 | | | | | | | | | | | | | | | | | | | |
| 35 | SNF Toe to Toe | 4 | CAID | $ 120 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | 4.0 | |
| 36 | SNF Toe to Toe | 10 | CAID | $ 120 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | | 10.0 | |
| 37 | | | | | | | | | | | | | | | | | | | |
| 38 | | | | | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | | | |
| 39 | 3RD FLOOR SOUTH - SNF | | 22 | | | | | | | | | | | | | | | | |
| 40 | SNF Private room | 8 | PRIV | $ 225 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7.0 | | |
| 42 | SNF Corner | 4 | PRIV | $ 205 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4.0 | | |
| 43 | SNF Toe to Toe | 6 | CAID | $ 120 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | | 6.0 | |
| 44 | SNF Corner | 4 | CAID | $ 120 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | 4.0 | |
| 45 | | | | | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | | | |
| 46 | 2ND FLOOR SOUTH - SNF | | 22 | | | | | | | | | | | | | | | | |
| 47 | SNFPrivate | 8 | PRIV | $ 225 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7.0 | | |
| 49 | SNF Corner | 8 | PRIV | $ 205 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8.0 | | |
| 50 | SNF Toe to Toe | 6 | CAID | $ 120 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | | 6.0 | |
| 51 | | | | | | | | | | | | | | | | | | | |
| 52 | | | | | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | | | |
| 53 | 1ST FLOOR SOUTH - SNF | | 22 | | | | | | | | | | | | | | | | |
| 54 | SNF Corner | 8 | PRIV | $ 205 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3.0 | | |
| 55 | SNF Medicare A | 14 | MEDA | $ 480 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | | | 14.0 |
| 56 | | | | | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | | | |
| 57 | ICF / SNF Beds | 108 | | | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 56.0 | 30.0 | 14.0 |
| 58 | | | | SNF ONLY | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | | | |
| 59 | | 187 | | | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 76.0 | 30.0 | 14.0 |
| 60 | | | | | | | | | | | | | | | | | | | |
| 61 | RETIREMENT | ILU | 53 | | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | | |
| 62 | SHELTERED CARE | SC | 26 | | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | | |
| 63 | SKILLED / INTERMEDIATE/ MEMORY | ICF/SNF | 108 | | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | | |
| 64 | | | TOTAL FACILITY | | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | | |
| 65 | | | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | **St. Paul's Home in Belleville** | | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | | | |
| 3 | INPUT FIELD | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 8 | Base Year: | 2014 | | | | | | | | | | | | | | | |
| 9 | | | | | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | | | | | | | | | | | | | | | | | |
| 11 | | Total Occup. | 2012 | 2013 | 2014 | | | | | | | | | | | | |
| 14 | INDEPENDENT LIVING | | | | 3.0% | | | | | | | | | | | | |
| 15 | ILU - One Bedroom | 28 | 1,910 | 1,950 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | |
| 16 | ILU - Two Bedroom | 12 | 2,089 | 2,150 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | |
| 17 | ILU - Two BR w Porch/patio | 13 | 2,149 | 2,200 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | |
| 18 | | 53 | | | | | | | | | | | | | | | |
| 19 | SHELTERED CARE | | | | | | | | | | | | | | | | |
| 20 | Shelter One Bedroom/companion | 8 | | | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | |
| 21 | Shelter Studio | 8 | | | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | |
| 22 | Shelter Companion | 10 | | | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | |
| 23 | | 26 | | | | | | | | | | | | | | | |
| 26 | INTERMEDIDATE & MEMORY CARE | | | | | | | | | | | | | | | | |
| 27 | ICF Memory Care Companion | 8 | | | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | |
| 28 | ICF Memory Care Studio | 10 | | | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | |
| 29 | | | | | | | | | | | | | | | | | |
| 30 | | 18 | | | | | | | | | | | | | | | |
| 32 | SKILLED NURSING FACILITY | | | | | | | | | | | | | | | | |
| 33 | SNF Private room | 26 | | | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | |
| 34 | SNF PRIVATE ROOMS | | | | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | |
| 35 | SNF Toe to Toe | | Cald T-T | 26 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | |
| 36 | SNF Corner | 20 | Cald Corner | 4 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | |
| 37 | | | | | | | | | | | | | | | | | |
| 38 | SNF Medicare A | 14 | | | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | |
| 39 | | 60 | | 30 | | | | | | | | | | | | | |
| 40 | TOTAL OCCUPANCY | 187 | | | | | | | | | | | | | | | |
| 41 | | | | | | | | | | | | | | | | | |
| 42 | CAID RATE FOR 2014 | $ 120.00 | | | | | | | | | | | | | | | |
| 44 | Physical Therapy | MEDA | | | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | |
| 45 | Occupational Therapy | MEDA | | | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | |
| 46 | Speech Therapy | MEDA | | | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | |
| 47 | Medicare Pharmacy | MEDA | $ 225 | | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | |
| 48 | Lab | MEDA | | | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | |
| 49 | Xrays | MEDA | | | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | |
| 50 | Med Supplies | MEDA | | | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | |
| 51 | | | | | | | | | | | | | | | | | |
| 52 | CAID Co Ins contractual | | 10% | | (6,250) | (5,645) | (6,250) | (6,048) | (6,250) | (6,048) | (6,250) | (6,250) | (6,048) | (6,250) | (6,048) | (6,250) | |
| 54 | MEDICARE PART B | | | | | | | | | | | | | | | | |
| 55 | Physical Therapy | | | | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 144,000 |
| 56 | Occupational Therapy | | | | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 114,000 |
| 57 | Speech Therapy | | | | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 58 | | | | | | | | | | | | | | | | | |
| 59 | Per Month Other Op. Rev: | | | | | | | | | | | | | | | | |
| 60 | Second Person - IL 50-4100-01-00 | 6 2nd persons budgeted | | $ 450 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 32,400 |
| 61 | | | | | | | | | | | | | | | | | |
| 62 | | | | | | | | | | | | | | | | | |
| 63 | Vending 4900 | | | | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 3,600 |
| 65 | Bd/Guest Meals 4604 | | | | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 3,000 |
| 66 | Med Sup/Srvc 4610,11,15 | | | | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 24,000 |
| 67 | Personal Services 4615 | | | | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 12,000 |
| 68 | Foundation - Support Fund Development | | | | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 60,000 |
| 69 | Charitable Care from Foundation - applied to Shelter care as Revenues | | | | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 60,000 |
| 70 | FOUNDATION ALLOC 4950-01 | | | | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 48,000 |
| 71 | | | | | | | | | | | | | | | | | |
| 72 | No. of beds available | | | | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | |
| 73 | No. of beds occupied | | | | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | |
| 75 | Total no. of Retirement residents | | | | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | |
| 76 | Total no. of Sheltered Care | | | | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | |
| 77 | Total no. of SNF residents with MEDA included | | | | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | |
| 78 | Total no. of patient days possible - Independent Apartments | | | | 1,550 | 1,400 | 1,550 | 1,500 | 1,550 | 1,500 | 1,550 | 1,550 | 1,500 | 1,550 | 1,500 | 1,550 | 18,350 |
| 79 | Total no. of patient days possible Shelter Care | | | | 620 | 560 | 620 | 600 | 620 | 600 | 620 | 620 | 600 | 620 | 600 | 620 | 7,300 |
| 80 | Total no. of SNF/ICF/Memory Care | | | | 3,100 | 2,800 | 3,100 | 3,000 | 3,100 | 3,000 | 3,100 | 3,100 | 3,000 | 3,100 | 3,000 | 3,100 | 36,500 |
| 81 | | | | | | | | | | | | | | | | | |
| 82 | Total no. of Medicaid Days | | | | 930 | 840 | 930 | 900 | 930 | 900 | 930 | 930 | 900 | 930 | 900 | 930 | 10,950 |
| 83 | Total no. of Private Days | | | | 1,209 | 1,092 | 1,209 | 1,170 | 1,209 | 1,170 | 1,209 | 1,209 | 1,170 | 1,209 | 1,170 | 1,209 | 14,235 |
| 84 | Total No. of Memory Care | | | | 527 | 476 | 527 | 510 | 527 | 510 | 527 | 527 | 510 | 527 | 510 | 527 | 6,205 |
| 85 | Total no. of Medicare A Days | | | | 434 | 392 | 434 | 420 | 434 | 420 | 434 | 434 | 420 | 434 | 420 | 434 | 5,110 |
| 87 | | | | | 3,100 | 2,800 | 3,100 | 3,000 | 3,100 | 3,000 | 3,100 | 3,100 | 3,000 | 3,100 | 3,000 | 3,100 | 36,500 |
| 88 | Total number of days in period | | | | 31 | 28 | 31 | 30 | 31 | 30 | 31 | 31 | 30 | 31 | 30 | 31 | 365 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | **ST PAUL'S HOME IN BELLEVILLE** | | | | | | | | | | | | | | | |
| 2 | Salary Budget for Operating Budget | | | | | | | | | | | | | | | |
| 3 | STAFFING & SALARIES & WAGES | | | | | | | | | | | | | | | |
| 4 | December 31 | | | | | | | | | | | | | | | |
| 5 | 2014 | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | |
| 8 | No. of hours per pay period | | 3% | | | Wage Inc. | | | | | PTO | 80 | | | 2080 | |
| 9 | No. of pay periods per month | | | | | 01/01/14 | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | |
| 11 | | | | | 2013 | 2013 | 2014 | | | | | | | # of FTEs | Salary $$ | Salary $$$ |
| 12 | | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014 | 2014 | 2013 |
| 13 | | Names and Positions | | Date | Wage | Inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 14 | Administration: | | | | | | | | | | | | | | | |
| 15 | Executive Director | New | 1/1/2012 | 1/1/2014 | 50.45 | 1.51 | 53.51 | 3% | 8 | 5 | 0 | 7,050 | | 1.00 | 108,150.00 | |
| 16 | | | | | | | | | | | | | | | | |
| 17 | Marketing / Apartment Manager | Martha Holloway | 9/29/2009 | 1/1/2015 | 24.04 | 0.72 | 31.25 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 65,000.00 | |
| 18 | FUND DEVELOPMENT | New | 1/1/2012 | 1/1/2014 | 25.00 | 0.75 | 26.50 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 53,560.00 | |
| 19 | Marketing Bonus | | | | | | | | | | | | | | 42,000.00 | |
| 20 | Billing | Sandi Koester | 5/16/1986 | 1/1/2014 | 15.00 | 0.45 | 15.90 | 3% | 8 | 5 | 0 | 2,040 | | 1.00 | 32,136.00 | |
| 21 | Business Office | Schmidt, Lisa | 2/18/2008 | 1/1/2014 | 23.97 | 0.72 | 25.41 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 51,353.33 | |
| 22 | Payroll / Apartment Adm Asst | Mertz, Wendy | 4/1/2012 | 1/1/2014 | 15.45 | 0.46 | 16.38 | 0% | 8 | 5 | 0 | 2,050 | | 1.00 | 32,136.00 | |
| 23 | Receptionist - 16 hrs day 7 days per week | | 1/1/2012 | 1/1/2014 | 9.50 | 0.29 | 10.07 | 3% | 16 | 7 | 1 | 6,045 | | 2.91 | 59,179.68 | |
| 24 | APARTMENT ALLOCATION ADMINISTRATION | HOLLOWAY/MERTZ | $3,000 | | | | | | | | | | | | 50,000.00 | |
| 25 | Administration: | | | | | Mkt - $ 3500 bonus per month | | | | | | 18,528 | | 8.91 | 443,515.01 | 420,120.84 |
| 26 | | | | | | | | | | | | | | | | 9.50 |
| 27 | Nursing Administration: | | | | | | | | | | | | | | | |
| 28 | DON - RN | Harrell, Imogene | 1/19/2009 | 1/1/2014 | 34.00 | 1.02 | 36.04 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 72,841.60 | |
| 29 | MDS Coordinator LPN | McGee, Theresa | 8/9/2008 | 1/1/2014 | 28.39 | 0.85 | 30.09 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 60,822.74 | |
| 30 | ADON | Strubbart, Jane | 2/17/2011 | 1/1/2014 | 31.11 | 0.93 | 32.98 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 66,650.06 | |
| 31 | Educator/PM Supervisor | Courtland, Marie | 1/13/2010 | 1/1/2014 | 23.00 | 0.69 | 23.00 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 49,275.20 | |
| 32 | Cen Supply / Staffing Coord | Goodman, Nichole | 10/15/2012 | 1/1/2014 | 10.30 | 0.31 | 10.92 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 22,066.72 | |
| 33 | Medical Records | Rethy Connors | 2/9/2002 | 1/1/2014 | 11.29 | 0.34 | 11.97 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 24,187.70 | |
| 34 | Nursing Admin | | | | | | | | | | | 12,480 | | 6.00 | 295,844.02 | 287,247.45 |
| 35 | | | | | | | | | | | | | | | | 6.00 |
| 36 | PROFESSIONAL STAFFING - ICF/SC | | | | | | | | | | | | | | | |
| 37 | 3 for SNF/ICF Nights - 1 FOR MEDICARE - 0 SHELTER NIGHTS = 4 STAFF | 4 for SNF/ICF Eve - 1 FOR MEDICARE - 1 SHELTER EVENINGS = 6 STAFF | 4 for SNF/ICF Days - 1 FOR MEDICARE - 1 SHELTER = 6 STAFF | | 22.40 | | | | | | | | | | | |
| 38 | RN PT | Cotter, Nancy | 11/10/2006 | 1/1/2014 | 24.90 | 0.75 | 26.39 | 3% | 8 | 3 | 0 | 1,248 | | 0.60 | 32,007.46 | |
| 39 | RN PM Supervisor | OPEN | 1/1/2013 | 1/1/2014 | 22.50 | 0.68 | 23.85 | 3% | 8 | 7 | 1 | 3,024 | | 1.45 | 70,081.20 | |
| 40 | RN | Oelin, Sherlyne | 4/22/2010 | 1/1/2014 | 20.50 | 0.62 | 21.73 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 45,608.40 | |
| 41 | RN PT | Pearce, Joyce | 9/29/2009 | 1/1/2014 | 24.19 | 0.73 | 25.64 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 20,729.46 | |
| 42 | RN PM Supervisor PT | OPEN | 1/1/2013 | 1/1/2014 | 20.50 | 0.62 | 20.50 | 3% | 8 | 7 | 1 | 3,024 | | 1.45 | 63,851.76 | |
| 43 | RN PT | Taylor, Tracy | 8/4/1997 | 1/1/2014 | 24.19 | 0.73 | 25.64 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 53,817.91 | |
| 44 | REGISTERED NURSE | | | | | | | | | | | 12,448 | | 5.93 | 286,096.59 | 200,846.48 |
| 45 | | | | | | | | | | | | | | | | 3.98 |
| 46 | | | | | | | | | | | | | | | | |
| 47 | LPN PT | Blake, Bridget | 7/21/2011 | 1/1/2014 | 18.03 | 0.54 | 19.11 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 40,113.14 | |
| 48 | LPN | Brown, Brenda | 7/21/2011 | 1/1/2014 | 18.57 | 0.56 | 19.68 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 41,314.54 | |
| 49 | LPN Evening | Cruzem, Lillia | 6/11/2007 | 1/1/2014 | 19.13 | 0.57 | 20.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 42,560.42 | |
| 50 | LPN | Howard, Kathleen | 3/17/2011 | 1/1/2014 | 18.00 | 0.54 | 19.08 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 40,046.40 | |
| 51 | LPN Night PT | Johnson, LaTina | 5/13/2011 | 1/1/2014 | 18.57 | 0.56 | 19.68 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 41,314.54 | |
| 52 | LPN PT | Kay, Lurlia | 11/19/2007 | 1/1/2014 | 19.13 | 0.57 | 20.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 42,560.42 | |
| 53 | LPN | Lane, Christine | 2/24/2009 | 1/1/2014 | 18.57 | 0.56 | 19.68 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 41,314.54 | |
| 54 | LPN | OPEN | 1/1/2013 | 1/1/2014 | 17.50 | 0.53 | 18.55 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 38,934.00 | |
| 55 | LPN PT | Sarkesian, Patricia | 3/12/2011 | 1/1/2014 | 17.50 | 0.53 | 18.55 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 38,934.00 | |
| 56 | LPN Evening | Shepherd, Jacqueline | 7/15/2008 | 1/1/2014 | 20.39 | 0.61 | 21.51 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 45,141.19 | |
| 57 | | Surber, Betty | 6/6/1983 | 1/1/2014 | 20.39 | 0.61 | 21.51 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 17,387.72 | |
| 58 | LPN PT | Toenjes, Darla | 9/26/2010 | 1/1/2014 | 19.13 | 0.57 | 20.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 42,560.42 | |
| 59 | LPN PT | Kerstin-Mattingly, David | 1/1/2012 | 1/1/2014 | 18.03 | 0.54 | 19.11 | 3% | 8 | 3 | 0 | 1,248 | | 0.60 | 23,176.48 | |
| 60 | LPN PT | OPEN | 1/1/2013 | 1/1/2014 | 17.50 | 0.53 | 18.55 | 3% | 8 | 10 | 1 | 4,320 | | 2.08 | 77,868.00 | |
| 61 | Shelter Care - LPN | Holtum, Martha - DAY | 9/26/1994 | 1/1/2014 | 20.39 | 0.61 | 21.51 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 45,141.19 | |
| 62 | Shelter Care PT | OPEN | 1/1/2013 | 1/1/2014 | 18.50 | 0.56 | 19.61 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 15,953.76 | |
| 63 | Nursing - Professional Staff | | | | | | | | | | | 33,152 | | 15.94 | 634,238.77 | 548,809.46 |
| 64 | | | | | | | | | | | | | | 21.92 | 920,317 | 14.03 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | | | | | 2012 | 2013 | [illegible] 2014 | | | | | | | # of FTEs | Salary $$ | Salary $$$ |
| 12 | | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014 | 2014 | 2013 |
| 13 | | Names and Positions | | Date | Wage | Inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 65 | 3 days, 3 even, 2 nights / SNF/ICF neighborhood CARE PARTNERS | 1 days, 1 evenings, 1 nights for Sheltered Care | | | | | | | | | | | | | | |
| 66 | CARE PARTNERS | OPEN | 1/1/2012 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 40,713.84 | |
| 67 | Neighborhood Care Partners | Bess, Kevin | 9/16/2010 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 40,713.84 | |
| 68 | 3 for days - 5 neighborhoods | Campbell, Cassandra | 7/30/2009 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 41,915.23 | |
| 69 | 3 for evenings - 5 neighborhoods | Coker, Woodsie | 6/23/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 41,915.23 | |
| 70 | 2 for nights - 5 neighborhoods | Coleman, Jamyra | 8/16/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 40,713.84 | |
| 71 | | Connors, Retha - Day | 2/5/2002 | 1/1/2014 | 10.64 | 0.31 | 11.28 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 47,343.74 | |
| 72 | 8 staff for 5 neighborhood 7 days/wk | Custer, Yvonne | 3/5/2008 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 73 | 56 | Dancy, Laverne PT | 10/2/2009 | 1/1/2014 | 9.99 | 0.30 | 10.59 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,225.75 | |
| 74 | Shelter Care | Dean, Jacques - Day | 1/13/2005 | 1/1/2014 | 10.19 | 0.31 | 10.80 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,670.71 | |
| 75 | 1 for days Shelter | Dozier, Marion | 8/19/2007 | 1/1/2014 | 9.99 | 0.30 | 10.59 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,225.75 | |
| 76 | 1 for evenings Shelter | Finch, Debra - Day | 9/21/1987 | 1/1/2014 | 12.83 | 0.38 | 13.60 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 28,544.18 | |
| 77 | 1 for evenings Shelter | Garvin, Carlos | 5/12/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 78 | | Gibbs, Juliana | 6/16/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 79 | | Gibson, Krissy | 10/13/2009 | 1/1/2014 | 10.19 | 0.31 | 10.80 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,670.71 | |
| 80 | 3 staff for all shelter | Glover, Carolyn - Evening | 5/22/2003 | 1/1/2014 | 10.41 | 0.31 | 11.03 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,160.17 | |
| 81 | 4.2 | Monroe, Nora | 11/3/1997 | 1/1/2014 | 10.00 | 0.30 | 10.60 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,248.00 | |
| 82 | 60.2 | Harding, Erma - Eve/Night | 7/14/1980 | 1/1/2014 | 10.55 | 0.32 | 11.18 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,471.64 | |
| 83 | | Horne, Viola - Day | 10/25/1996 | 1/1/2014 | 10.69 | 0.32 | 11.33 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,783.11 | |
| 84 | | Jackson, Sally | 7/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 85 | | Kaemmerer, Donna - Night | 8/15/1975 | 1/1/2014 | 12.69 | 0.38 | 13.45 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 28,232.71 | |
| 86 | | open | 1/1/2012 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 87 | | Killingsworth, Shirley | 3/4/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 88 | | Lewis, Karasha | 5/8/2007 | 1/1/2014 | 9.85 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.25 | |
| 89 | | OPEN | 10/16/2009 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 90 | | Love, Loretta - Day | 1/29/1991 | 1/1/2014 | 11.05 | 0.33 | 11.71 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 24,584.04 | |
| 91 | | Mayweather, Gloria - Day | 4/9/1996 | 1/1/2014 | 11.45 | 0.34 | 12.14 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 25,473.96 | |
| 92 | | Miller, Patricia - Day | 1/2/1996 | 1/1/2014 | 10.29 | 0.31 | 10.91 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,893.19 | |
| 93 | | Miller, Rochelle - Day PT | 11/21/2002 | 1/1/2014 | 10.29 | 0.31 | 10.91 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,893.19 | |
| 94 | | Muhammad, Nikke | 4/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 95 | | Odom, Ronni | 2/12/2009 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 96 | | Okorie, Lillan | 6/19/2008 | 1/1/2014 | 9.99 | 0.30 | 10.59 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,225.75 | |
| 97 | | Poe, Yolanda | 3/4/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 98 | | Posten, Lakeisha | 9/1/2010 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 99 | | Reed, Stephanie | 7/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 100 | | Rhodes, Jamie | 4/1/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 101 | | Robinson, Lisetta | 1/18/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 102 | | Ross, Alice - Night | 8/2/1993 | 1/1/2014 | 10.58 | 0.32 | 11.21 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,538.38 | |
| 103 | | Scrivner, Jamie | 1/31/2005 | 1/1/2014 | 9.97 | 0.30 | 10.57 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,181.26 | |
| 104 | | Streater, Erica | 3/27/2009 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 105 | | Suggs, Tamia | 3/13/2009 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 106 | | Towns Patton, Peggy Evening | 7/13/2007 | 1/1/2014 | 10.29 | 0.31 | 10.91 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,893.19 | |
| 107 | | Townsend, Barbar | 1/12/2009 | 1/1/2014 | 9.85 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.28 | |
| 108 | | Warr, Stephanie | 9/13/2009 | 1/1/2014 | 9.85 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.29 | |
| 109 | | Winkelman, Beth - Day | 5/19/1987 | 1/1/2014 | 10.69 | 0.32 | 11.33 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,783.11 | |
| 110 | | Gomiller, Sherrod | 4/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 111 | | Jarret, Caroline | 9/7/2011 | 1/1/2014 | 9.65 | 0.29 | 9.65 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,469.32 | |
| 112 | | Russell, Brittany | 2/10/2011 | 1/1/2014 | 9.65 | 0.29 | 9.65 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,469.32 | |
| 113 | | Trannon, Whitney | 9/1/2011 | 1/1/2014 | 9.65 | 0.29 | 9.65 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,469.32 | |
| 114 | | OPEN | | 1/1/2014 | 9.15 | 0.27 | 9.15 | 3% | 8 | 15 | 1 | 6,480 | | 3.12 | 61,070.76 | |
| 115 | Overtime Factor 2% | | | | | - | - | | | | | | | | 35,556.25 | |
| 116 | CNA NURSING STAFF | | | | | | | | | | | 123,320 | | 59.19 | 1,283,157.36 | 1,134,422.33 |
| 117 | | | | | - | | - | | | | | | | | | 50.18 |
| 118 | TOTAL NURSING DEPT | | | | | | | | | | | 181,200 | | 87.32 | 2,499,318.72 | 2,170,525.72 |
| 119 | | | | | | | | | | | | | | | | 74.20 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | | | | | 2014 | 2013 | 6 #2014 | | | | | | | # of FTEs | Salary $$ | Salary $$$ |
| 12 | | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014 | 2014 | 2013 |
| 13 | | Names and Positions | | Date | Wage | inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 123 | DIETARY DIVISON | | | | | | | | | | | | | | | |
| 124 | Dietary / Hospitality Supervisor | Sonia Mazanec | 9/18/2000 | 1/1/2014 | 25.85 | 0.78 | 27.41 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 55,402.46 | |
| 126 | 2 Cooks and 2.8 Cleanlog and Delivery | Blackmon, Easter | 8/25/1997 | 1/1/2014 | 10.44 | 0.31 | 11.07 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,226.91 | |
| 127 | | Durnett, Sonya | 10/5/2008 | 1/1/2014 | 10.72 | 0.32 | 11.36 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,849.86 | |
| 128 | 1+1+3.4+8.4+4.8+2.8+2.8 = 39.2 fte | Carman, Bonnie | 2/10/1976 | 1/1/2014 | 11.00 | 0.33 | 11.66 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 24,472.50 | |
| 129 | | Dear, Rodney | 5/20/2010 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,944.02 | |
| 130 | 2 supervisor 7 days per week = 1+1 | Gillespie, Lashanda | 5/7/2002 | 1/1/2014 | 10.46 | 0.31 | 11.09 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,291.43 | |
| 131 | 6 Neighborhoods * 2.8 fte = 8.4 +8.4 fte | Halin, Alvin | 7/23/2010 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,944.02 | |
| 132 | Day/Evening Cook (2) = 4.8 | Holmes, Carlette | 4/15/2002 | 1/1/2014 | 9.66 | 0.29 | 10.24 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,491.57 | |
| 133 | Cleaning and Delivery and Laundry = 2.8+2.8 | Johnson, Felicia | 10/23/2000 | 1/1/2014 | 9.36 | 0.28 | 9.93 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 8,021.15 | |
| 134 | 39.2 | Lacey, Keyenda | 6/24/2011 | 1/1/2014 | 8.76 | 0.26 | 9.29 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,506.97 | |
| 135 | HOSPITALITY STAFF | Long, Walter | 1/29/2009 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,623.90 | |
| 136 | | Molton, Erica PT | 7/16/2009 | 1/1/2014 | 9.02 | 0.27 | 9.56 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,729.78 | |
| 137 | Env Srv / Hospitality supervisor 1.0 | Nicherson, Angela | 2/4/2010 | 1/1/2014 | 9.02 | 0.27 | 9.56 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,067.70 | |
| 138 | common areas = 1.4 | Rhodes, Christopher | 12/9/2008 | 1/1/2014 | 13.51 | 0.41 | 14.32 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 30,057.05 | |
| 139 | laundry =2.8 | Smith, Samantha | 1/29/2009 | 1/1/2014 | 9.83 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.28 | |
| 140 | floor care =1.4 | OPEN | 1/1/2013 | 1/1/2014 | 8.75 | 0.26 | 9.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 19,467.00 | |
| 141 | | Venatta, Deborah | 1/21/2009 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,623.90 | |
| 142 | | Venatta, Nicci | 9/15/2009 | 1/1/2014 | 9.02 | 0.27 | 9.56 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,729.78 | |
| 143 | | Wocsms, Yolanda | 9/20/2000 | 1/1/2014 | 9.97 | 0.30 | 10.57 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,181.26 | |
| 144 | | Weidover, Cynthia | 10/31/1977 | 1/1/2014 | 11.40 | 0.34 | 12.08 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 25,362.72 | |
| 146 | Overtime Factor 2% | | | | | | | | | | | | | | 8,869.72 | |
| 147 | DIETARY NURSING FACILITY | | | | | | | | | | | 35,152 | | 16.98 | 405,758.23 | 385,427.08 |
| 148 | | | | | | | | | | | | | | | | 16.98 |
| 149 | TOTAL DIETARY SALARIES | | | | | | | | | | | | | 16.90 | 405,758.23 | |
| 151 | | | | | | | | | | | | | | | | |
| 152 | ENV. SRVC. - HOUSEKEEPING AND LAUNDRY | | | | | | | | | | | | | | | |
| 153 | ENVIRONMENTAL SUPERVISOR | Newton, Diane | 7/26/1976 | 1/1/2014 | 18.94 | | 19.51 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 40,577.06 | |
| 154 | | | | | | | | | | | | | | | | |
| 155 | KEEP LAUNDRY AT 2.8 | LAUNDRY EVENING | 2/22/1995 | 1/1/2014 | 9.71 | 0.29 | 10.29 | 3% | 8 | 7 | 0 | 2,912 | | 1.40 | 29,123.79 | |
| 156 | | LAUNDRY NIGHTS | 8/23/1994 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 7 | 0 | 2,912 | | 1.40 | 25,253.97 | |
| 157 | | | | | | | | | | | | | | | | |
| 158 | | Barnekin, Barbara Evening | 10/19/1994 | 1/1/2014 | 9.77 | 0.29 | 10.36 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,736.30 | |
| 159 | | OPEN | 1/1/2014 | 1/1/2014 | 8.50 | 0.26 | 9.01 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,284.16 | |
| 160 | | Joffray, Barbara | 5/14/1991 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,550.56 | |
| 161 | | OPEN | 11/14/2012 | 1/1/2014 | 8.50 | 0.26 | 9.01 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 18,910.10 | |
| 162 | | Povolish, Josephine | 5/2/1999 | 1/1/2014 | 9.61 | 0.29 | 10.19 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,380.33 | |
| 163 | | Schaefer, Dianna | 1/2/1985 | 1/1/2014 | 10.00 | 0.30 | 10.60 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,248.00 | |
| 164 | | Thomas, Mary | 6/12/1995 | 1/1/2014 | 9.52 | 0.29 | 10.09 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,180.10 | |
| 165 | | Tobin, Tammy | 3/12/1990 | 1/1/2014 | 9.93 | 0.30 | 10.53 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,092.26 | |
| 166 | | Wilson, Angela | 11/24/2010 | 1/1/2014 | 8.76 | 0.26 | 9.29 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,506.97 | |
| 167 | LAUNDRY AND HSPK - NURSING | | | | | | | | | | | 24,688 | | 11.87 | 261,874.29 | 291,694.43 |
| 168 | | | | | | | | | | | | | | | | 13.97 |
| 169 | Maintenance Supervisor | Quellmalz, Al | 2/16/1998 | 1/1/2014 | 20.69 | | 21.31 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 44,326.26 | |
| 170 | Maintenance Assistant | Timmons, Larry | 11/11/2007 | 1/1/2014 | 15.52 | | 15.99 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 33,250.05 | |
| 171 | Staff Maintenance | Surmier, James | 4/1/2010 | 1/1/2014 | 12.02 | | 12.38 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 25,751.65 | |
| 172 | APARTMENT MAINTENANCE ALLOCATION | .4 FTE = $ 28,416 | | | | | | | | | | | | NOT IN TOTALS | 28,416.00 | |
| 173 | MAINTENANCE - | | | | | | | | | | | 6,240 | | 3.00 | 103,327.95 | 100,328.59 |
| 174 | | | | | | | | | | | | | | | | 3.00 |
| 175 | 12 hr per day Security | | | | | | | | | | | | | | | |
| 176 | Security | Kramer, Dominic | 7/30/2008 | 1/1/2014 | 11.18 | 0.34 | 11.85 | 3% | 12 | 4 | 1 | 2,592 | | 1.25 | 29,843.78 | |
| 177 | Security | Sarkesian, Blaise | 7/2/2012 | 1/1/2014 | 10.55 | 0.32 | 11.18 | 3% | 12 | 3 | 1 | 1,944 | | 0.93 | 21,124.45 | |
| 178 | SECURITY | | | | | | | | | | | 4,536 | | 2.18 | 50,967.85 | 33,876.26 |
| 179 | | | | | | | | | | | | | | | | 1.48 |
| 180 | Social Services Director | Smith, Kelly Pannier | 11/23/2010 | 1/1/2014 | 16.03 | 0.48 | 16.99 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 34,342.67 | |
| 181 | | | | | | | | | | | | | | | | |
| 182 | SOCIAL SERVICE | | | | | | | | | | | 2,080 | | 1.00 | 34,342.67 | 33,335.74 |
| 183 | | | | | | | | | | | | | | | | 1.00 |
| 184 | Activity Director | BerberichPamela | 1/31/2008 | 1/1/2014 | 13.93 | 0.42 | 14.77 | 0.03 | 8 | 5 | 0 | 2,080 | | 1.00 | 29,151.64 | |
| 185 | | BraunJoanne | 10/6/2011 | 1/1/2014 | 8.76 | 0.26 | 9.28 | 3% | 7.5 | 5 | 0 | 1,950 | | 0.94 | 17,384.42 | |
| 186 | | NeumeyerDarlene | 10/13/2011 | 1/1/2014 | 8.76 | 0.26 | 9.28 | 3% | 7.5 | 5 | 0 | 1,950 | | 0.94 | 17,384.42 | |
| 187 | | RauMiriam Therese | 7/7/2006 | 1/1/2014 | 8.76 | 0.26 | 9.29 | 3% | 6 | 4 | 0 | 1,248 | | 0.60 | 11,260.45 | |
| 188 | | | | | | | | | | | | | | | | |
| 189 | Activities - Nursing Home | | | | | | | | | | | 7,228 | | 3.48 | 76,180.93 | 75,842.79 |
| 190 | | | | | | | | | | | | | | | | 3.48 |
| 191 | TOTALS | | | | | | | | | | | 298,788 | | 143.65 | 4,084,942 | 3,695,371 |
| 192 | | | | | | | | | | | | hppd | | 6.82 | | 132.00 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | | | | | 2012 | 2013 | 2014 | | | | | | | # of FTEs | Salary SS | Salary SSS |
| 12 | | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014 | 2014 | 2013 |
| 13 | | Names and Positions | | Date | Wage | Inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 193 | | | | | | | | | | | | | | | | |
| 194 | RETIREMENT APARTMENTS | | | | | | | | | | | | | | | |
| 195 | | | | | | | | | | | | | | | | |
| 196 | ADMINISTRATION | | | | | | | | | | | | | | | |
| 197 | Apt Manager | Allocation of $ 50,000 | | | | | | | | | | | | | | |
| 198 | | | | | | | | | | | | | | | | |
| 199 | ADMINISTRATION | | | | | | | | | | | | | | | |
| 200 | | | | | | | | | | | | | | | | |
| 201 | Dietary Cooks/Aides - APTS | COOK | 1/1/2012 | 1/1/2014 | 16.00 | 0.48 | 16.96 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 34,278.40 | |
| 202 | 2 cooks = 2.8 | COOK | 1/1/2012 | 1/1/2014 | 14.00 | 0.42 | 14.84 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 29,993.60 | |
| 203 | Dishwasher = 1.4 | DISHWASHER | 1/1/2012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 19,281.60 | |
| 204 | Server = 2.8 | SERVER | 1/1/2012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 7 | 0 | 2,912 | | 1.40 | 26,994.24 | |
| 205 | Manager = .2 | SERVER | 1/1/2012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 19,281.60 | |
| 206 | 7.2 | SWING worker | 1/1/2012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,712.64 | |
| 207 | | | | | | | | | | | | | | | | |
| 208 | | | | | | | | | | | | | | | | |
| 209 | DIETARY APARTMENTS | | | | | | | | | | | 12,864 | | 5.80 | 137,547.88 | 104,488.14 |
| 210 | | | | | | | | | | | | | | | | 5.00 |
| 211 | Hskp Apartments - light laundry | Ball, Doris | 4/24/1985 | 1/1/2014 | 11.36 | 0.34 | 12.04 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 24,337.66 | |
| 212 | 2 per day, W/E float with ICF | Holcumb, Marcia | 1/25/2010 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 19,250.05 | |
| 213 | | | | | | | | | | | | | | | | |
| 214 | | | | | | | | | | | | | | | | |
| 215 | HOUSEKEEPING APARTMENTS | | | | | | | | | | | 4,160 | | 2.00 | 44,197.71 | 43,638.69 |
| 216 | | | | | | | | | | | | | | | | 2.00 |
| 217 | Apt. Maintenance = .5 fte | $ 28,516 Allocation | | | | | | | | | | | | | | |
| 218 | | | | | | | | | | | | | | | | 2.00 |
| 219 | Activities - Apts | BrandkampPaula | 5/24/2012 | 1/1/2014 | 8.76 | 0.26 | 9.29 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,506.97 | |
| 220 | Activities - Apts OPEN TO 1 FTE | ClarkeMary Frances | 12/28/2011 | 1/1/2014 | 9.45 | 0.28 | 10.05 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 20,309.95 | |
| 221 | ACTIVITIES - APARTMENTS | | | | | | | | | | | 2,912 | | 1.40 | 27,816.92 | 24,994.23 |
| 222 | | | | | | | | | | | | | | | | 1.40 |
| 223 | TOTALS | | | | | | | | | | | 19,136.00 | | 9.201 | 288,072.71 | 175,019.47 |
| 224 | | | | | | | | | | | | hppd | | 1.85 | | 8.40 |
| 225 | | | | | | | | | | | | | | | | |

| | A | B | C | D | F | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | St. Paul's Home in Belleville | | | | | | | | | | | | | | | | |
| 2 | INDEPENDENT LIVING ONLY | | | | | | | | | | | | | | | | |
| 3 | SUPPORTING SCHEDULES | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | | Annual Data Statistic | | 2013 Info Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | | | | | | | | | | | | | | | | | |
| 11 | Special Resident Services - Social Service / Activities | | | | | | | | | | | | | | | | |
| 13 | Activities - Acct 50-8100-65-01 | | | 4,800 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 4,800.00 |
| 14 | SPECIAL SERVICES | | | 4,800 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 4,800.00 |
| 15 | | | | | | | | | | | | | | | | | |
| 16 | Marketing: | | | | | | | | | | | | | | | | |
| 18 | Marketing ILU 50-9710-01-01 | | | 12,000 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 36,000.00 |
| 19 | MARKETING | | | 12,000 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 36,000.00 |
| 20 | | | | | | | | | | | | | | | | | |
| 21 | Dietary: | | | | | | | | | | | | | | | | |
| 23 | Raw Food ILU 50-8200-70-01 | $ 4.36 | | 94,302 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 98,610.00 |
| 24 | Diet Sup. ILU 50-8100-70-01 | $ 0.25 | | 4,958 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 5,190.00 |
| 25 | | $ 3.80 | | 99,360 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 103,800.00 |
| 26 | | | | | | | | | | | | | | | | | |
| 27 | DIETARY | | | 99,360 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 103,800.00 |
| 28 | Laundry - Nursing only | | | | | | | | | | | | | | | | |
| 29 | Bldg Rep - ICF SC 50-8160-75-01 | 0.04 | | 6,451 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 6,510.00 |
| 32 | HSKP / LAUNDRY | 0.35 | | 6,451 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 6,510.00 |
| 33 | | | | | | | | | | | | | | | | | |
| 34 | Plant Operation & Maintenance: | | | | | | | | | | | | | | | | |
| 36 | Bldg Rep & Main 50-8400-80-01 | | | 24,000 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 24,000.00 |
| 37 | Grounds ICF SC 50-8610-85-01 | | | 3,600 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 38 | Supplies 50-8100-80-01 | | | 600 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 8,400.00 |
| 39 | Elevator ICF SC 50-8670-80-01 | | | 5,400 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 40 | Trash - ICF SC 50-8750-80-01 | | | 2,400 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 2,400.00 |
| 41 | Pest control - ICF/SC 50-8770-88-01 | | | 1,800 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 1,800.00 |
| 42 | Vehicle main- ICF SC 50-9430-81-01 | | | 6,000 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 43 | WINDOW WASHING | | | | | | | 2,000.00 | | | | | 2,000.00 | | | | 4,000.00 |
| 44 | CABLE 50-8720-01-01 | | | 12,000 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 7,200.00 |
| 46 | Electric / Gas ICF SC 50-8700-80-01 | 120,000.00 | $ 1.76 | 120,906 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 120,000.00 |
| 47 | Sewer / Water ICF SC 50-8710-80-01 | 12,000.00 | $ 0.18 | 11,941 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 12,000.00 |
| 48 | 68,000 sq. ft | 132,000.00 | $ 1.94 | | | | | | | | | | | | | | |
| 49 | MAINTENANCE | | | 188,647 | 16,400.00 | 16,400.00 | 16,400.00 | 18,400.00 | 16,400.00 | 16,400.00 | 16,400.00 | 16,400.00 | 18,400.00 | 16,400.00 | 16,400.00 | 16,400.00 | 201,800.00 |
| 50 | | | | | | | | | | | | | | | | | |
| 51 | Administration & General: | | | | | | | | | | | | | | | | |
| 52 | Consultant fee/purchased services | | | | | | | | | | | | | | | | |
| 53 | Legal Campus 50-9610-01-01 | | | | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 54 | Auditing - ALU 50-9620-01-01 | | | 6,000 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 58 | ADP - ICF/SC 50-9391-01-01 | | | 1,800 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 59 | | | | | | | | | | | | | | | | | |
| 57 | ICF Management Fee 50-9600-01-01 | | | 64,496 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 64,356.00 |
| 59 | Ins. Policies - All ICF/SC 50-9650-01-01 | | | 43,920 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 54,000.00 |
| 60 | | | | | | | | | | | | | | | | | |
| 61 | PROFESSIONAL FEES | | | 116,216 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 126,756.00 |
| 63 | | | | | | | | | | | | | | | | | |
| 63 | Bank fees 50-9510-01-01 | | | | | | | | | | | | | | | | |
| 64 | Telephone - ICF/SC 50-8750-01-01 | | | 1,800 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 1,800.00 |
| 65 | Dues & Sub ICF/SC 50-9550-01-01 | | | 1,620 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 1,560.00 |
| 66 | Office sup ICF SC 50-8150-01-01 | | | 300 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 67 | Comp support NH 50-8901-01-01 | | | 600 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 68 | Postage ICF 50-9830-01-01 | | | | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 180.00 |
| 69 | Mileage 50-9410-01-01 and 03 | | | | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 70 | Recruitment - ICF SC 50-9360-01-01 | Hep B, TB, Flu | | 600 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 72 | | | | 4,920 | 545.00 | 545.00 | 545.00 | 541.50 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 6,540.00 |
| 74 | ADMINISTRATIVE EXPENSE | | | 331,135.67 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 133,296.00 |
| 75 | | | | | | | | | | | | | | | | | |
| 76 | Payroll Taxes & Employee Benefits: | | | | | | | | | | | | | | | | |
| 72 | Payroll taxes ICF SC 50-9100-01-01 | 7.65% | | 19,714 | 1,857.02 | 1,795.36 | 1,857.02 | 1,795.36 | 1,857.02 | 1,795.36 | 1,857.02 | 1,857.02 | 1,795.36 | 1,857.02 | 1,857.02 | 1,857.02 | 22,037.56 |
| 79 | Workman's comp - ICF SC 50-9110-01-01 | | | 8,465 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 80 | Unemployment - ICF/SC 50-9130-01-01 | | | 4,800 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 4,800.00 |
| 81 | Ben Home 50-9200-81-01 | 5% | | 35,350 | 1,297.81 | 1,297.81 | 1,297.81 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 15,852.77 |
| 83 | PAYROLL TAXES AND BENEFITS | | | 67,330 | 4,214.83 | 4,153.17 | 4,214.83 | 4,304.17 | 4,365.83 | 4,304.17 | 4,365.83 | 4,365.83 | 4,304.17 | 4,365.83 | 4,365.83 | 4,365.83 | 51,690.33 |
| 86 | Fixed Expenses: | | | | | | | | | | | | | | | | |
| 87 | Existing Depreciation | | | 150,000 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 150,000.00 |
| 88 | | | | | | | | | | | | | | | | | |
| 89 | DEPRECIATION | | | 150,000 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 150,000.00 |
| 90 | | | | | | | | | | | | | | | | | |
| 91 | Cost of Issuance | 1,421,415.00 | 10.92% | | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 3,870.11 |
| 94 | Amortization | | | | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 3,880.13 |
| 95 | | | | | | | | | | | | | | | | | |
| 96 | Existing Debt with New Financing | 1,122,403.15 | 10.14% | 54,800 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 113,818.69 |
| 97 | | | | | | | | | | | | | | | | | |
| 98 | INTEREST | | | 54,800 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 113,818.69 |
| 99 | | | | | | | | | | | | | | | | | |
| 100 | TOTAL OPERATING EXPENSE | | | 499,744 | 44,315.33 | 44,253.67 | 44,715.33 | 46,404.67 | 44,466.33 | 44,404.67 | 44,466.33 | 44,466.33 | 46,404.67 | 44,466.33 | 44,466.33 | 44,466.33 | 536,896.33 |
| 101 | Fixed expense | | | 204,000 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 267,698.89 |
| 102 | TOTAL EXPENSES FOR INDEPENDENT APARTMENTS | | | 703,744 | 66,623.56 | 66,561.90 | 66,623.56 | 68,712.91 | 66,774.57 | 66,712.91 | 66,774.57 | 66,774.57 | 68,712.91 | 66,774.57 | 66,774.57 | 66,774.57 | 804,595.13 |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | **St. Paul's Home in Belleville** | | | | | | | | | | | | | | | | |
| 2 | **SHELTER CARE ONLY** | | | | | | | | | | | | | | | | |
| 3 | **SUPPORTING SCHEDULES** | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 8 | | | Annual Data | 2013 Info | | | | | | | | | | | | | |
| 9 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | INPUT FIELD | | | | | | | | | | | | | | | | |
| 11 | Clinical: | | PPD VALUES | | | | | | | | | | | | | | |
| 13 | Med Sup - non chargeable 50-7100-35-02 | | | | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 2,400.00 |
| 14 | Pharmacy Consult 50-7510-35-02 | | 5% | 422 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 386.10 |
| 15 | Medical Director 50-7300-35-02 | | 5% | 315 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 360.00 |
| 16 | Clinical Supplies 50-8100-35-02 | | 5% | 1,080 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 19 | SHELTER CARE ONLY AT 5% | | | 1,817 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 3,746.10 |
| 22 | | | | | | | | | | | | | | | | | |
| 23 | CLINICAL EXPENSES - SHELTER CARE & MEMORY CARE | | | 1,817 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 3,746.10 |
| 24 | | | | | | | | | | | | | | | | | |
| 25 | Special Resident Services - Social Service / Activities | | | - | | | | | | | | | | | | | - |
| 26 | Activities - Shelter & Memory Care 50-9100-65-02 | | 5% | 360 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 450.00 |
| 27 | Resident Background Check 50-9370-01-02 | | 5% | 75 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 90.00 |
| 28 | | | | | | | | | | | | | | | | | |
| 29 | SPECIAL SERVICES AT 5% | | | 435 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 540.00 |
| 30 | | | | | | | | | | | | | | | | | |
| 31 | Marketing: | | | | | | | | | | | | | | | | |
| 32 | Marketing -NRSG 50-9710-01-02 | | 25% | 7,500 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 33 | | | | | | | | | | | | | | | | | |
| 34 | MARKETING AT 25% | | | 7,500 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 35 | | | | | | | | | | | | | | | | | |
| 36 | Dietary: | | | | | | | | | | | | | | | | |
| 37 | | | | | | | | | | | | | | | | | - |
| 38 | Raw Food -ICF/SC 50-8200-70-02 | | 6.50 | 51,538 | 4,030.00 | 3,640.00 | 4,030.00 | 3,900.00 | 4,030.00 | 3,900.00 | 4,030.00 | 4,030.00 | 3,900.00 | 4,030.00 | 3,900.00 | 4,030.00 | 47,450.00 |
| 39 | EE meals Food 50-8200-70-02 | | | | | | | | | | | | | | | | |
| 40 | Diet Sup ICF/SC 50-8100-70-02 | | 0.11 | | 68.20 | 61.60 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 803.00 |
| 41 | Paper Products 50-8350-70-02 | | 0.25 | | 155.00 | 140.00 | 155.00 | 150.00 | 155.00 | 150.00 | 155.00 | 155.00 | 150.00 | 155.00 | 150.00 | 155.00 | 1,825.00 |
| 42 | Chemicals 50-8300-70-02 | | 0.20 | | 124.00 | 112.00 | 124.00 | 120.00 | 124.00 | 120.00 | 124.00 | 124.00 | 120.00 | 124.00 | 120.00 | 124.00 | 1,460.00 |
| 43 | Dietician 50-8910-70-02 | | 5% | 480 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 480.00 |
| 44 | Nutritional - 50-8250-70-02 | | 5% | 420 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 420.00 |
| 45 | | | | | | | | | | | | | | | | | |
| 46 | DIETARY - PPD values | | 7.06 | 52,438 | 4,452.20 | 4,028.60 | 4,452.20 | 4,311.00 | 4,452.20 | 4,311.00 | 4,452.20 | 4,452.20 | 4,311.00 | 4,452.20 | 4,311.00 | 4,452.20 | 52,438.00 |
| 47 | | | | | | | | | | | | | | | | | |
| 48 | Laundry & Housekeeping | | | - | | | | | | | | | | | | | - |
| 49 | | | | | | | | | | | | | | | | | |
| 50 | Linen 50-8400-72-02 | | 0.10 | 6,205 | 62.00 | 56.00 | 62.00 | 60.00 | 62.00 | 60.00 | 62.00 | 62.00 | 60.00 | 62.00 | 60.00 | 62.00 | 730.00 |
| 51 | Laun Sup ICF/SC 50-8100-72-02 | | 0.13 | | 80.60 | 72.80 | 80.60 | 78.00 | 80.60 | 78.00 | 80.60 | 80.60 | 78.00 | 80.60 | 78.00 | 80.60 | 949.00 |
| 52 | Hskp Sup - ICF SC 50-8100-75-02 | | 0.11 | | 68.20 | 61.60 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 803.00 |
| 53 | Paper Sup - Hskp 50-8350-75-02 | | 0.39 | | 241.80 | 218.40 | 241.80 | 234.00 | 241.80 | 234.00 | 241.80 | 241.80 | 234.00 | 241.80 | 234.00 | 241.80 | 2,847.00 |
| 54 | Chemicals 50-8300-75-02 | | 0.12 | | 74.40 | 67.20 | 74.40 | 72.00 | 74.40 | 72.00 | 74.40 | 74.40 | 72.00 | 74.40 | 72.00 | 74.40 | 876.00 |
| 55 | | | | | | | | | | | | | | | | | |
| 56 | HSKP / LAUNDRY - PPD values | | 0.85 | 6,205 | 527.00 | 476.00 | 527.00 | 510.00 | 527.00 | 510.00 | 527.00 | 527.00 | 510.00 | 527.00 | 510.00 | 527.00 | 6,205.00 |
| 57 | | | | | | | | | | | | | | | | | |
| 58 | Plant Operation & Maintenance: | | | | | | | | | | | | | | | | |
| 59 | | | | - | | | | | | | | | | | | | - |
| 60 | Bldg Rep & Main 50-8600-80-02 | | 5% | 3,100 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 61 | Grounds ICF /SC 50-8610-80-02 | | 5% | 300 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 360.00 |
| 62 | Supplies 50-8100-80-02 | | 5% | 30 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 45.00 |
| 63 | Elevator ICF/SC 50-8670-80-02 | | 5% | 420 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 64 | Trash - ICF/SC 50-8780-80-02 | | 5% | 600 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 750.00 |
| 65 | Pest control - ICF/SC 50-8770-80-02 | | 5% | 150 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 255.00 |
| 66 | Vehicle maint- ICF/SC 50-9420-01-02 | | 5% | 90 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 180.00 |
| 67 | WINDOW WASHING | | | - | | | | 1,000.00 | | | | | 1,000.00 | | | | 2,000.00 |
| 68 | CABLE 50-8720-01-02 | $ 12/unit | | 1,880 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 2,880.00 |
| 69 | | | | | | | | | | | | | | | | | |
| 70 | Utilities at 20% | | | - | | | | | | | | | | | | | - |
| 71 | Electric / Gas ICF/SC 50-8700-80-02 | 85500 | $2.50 | 42,750 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 42,750.00 |
| 72 | Sewer / Water ICF/SC 50-8710-80-02 | | | | | | | | | | | | | | | | - |
| 73 | | | | - | | | | | | | | | | | | | - |
| 74 | MAINTENANCE at 5% | | | 50,520.00 | 4,485.00 | 4,485.00 | 4,485.00 | 5,485.00 | 4,485.00 | 4,485.00 | 4,485.00 | 4,485.00 | 5,485.00 | 4,485.00 | 4,485.00 | 4,485.00 | 55,820.00 |
| 75 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 8 | | | Annual Data | 2013 info | | | | | | | | | | | | | |
| 9 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 76 | Administration & General: | | | - | | | | | | | | | | | | | - |
| 77 | Consultant fees/purchased services | | | - | | | | | | | | | | | | | - |
| 78 | Legal Campus 50-9610-01-02 | | 5% | 1,500 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 79 | Auditing - ALU 50-9620-01-02 | | 5% | 1,600 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 1,800.00 |
| 80 | ADP - ICF/SC 50-9291-01-02 | | 5% | 780 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 900.00 |
| 81 | | | | | | | | | | | | | | | | | |
| 82 | ICF Management Fee 50-9600-01-02 | 5% | | 43,070 | 3,658.00 | 3,304.00 | 3,658.00 | 3,540.00 | 3,658.00 | 3,540.00 | 3,658.00 | 3,658.00 | 3,540.00 | 3,658.00 | 3,540.00 | 3,658.00 | 43,070.00 |
| 83 | Gen 70,665 Prop 25,979 Auto 4,349+3115 Umbrella 7,061 D&O 4902.50 | 116,272 | 9,689.29 | | | | | | | | | | | | | | - |
| 84 | Ins. Policies - All ICF/SC 50-9650-01-02 | | 6,588.72 | 24,000 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 24,000.00 |
| 86 | PROFESSIONAL FEES | | | 70,950 | 5,983.00 | 5,629.00 | 5,983.00 | 5,865.00 | 5,983.00 | 5,865.00 | 5,983.00 | 5,983.00 | 5,865.00 | 5,983.00 | 5,865.00 | 5,983.00 | 70,970.00 |
| 87 | | | | | | | | | | | | | | | | | |
| 88 | Bank fees 50-9510-01-02 | | 5% | 180 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 300.00 |
| 89 | Telephone - ICF/SC 50-8750-01-02 | | 5% | 1,200 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 1,500.00 |
| 90 | Dues & Sub ICF/SC 50-9550-01-02 | | 5% | 360 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 660.00 |
| 91 | Copier -ICF/SC 50-9810-01-02 | | 5% | 315 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 92 | License fees 50-9500-01-02 | | 5% | 210 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 60.00 |
| 93 | Office sup ICF/SC 50-8150-01-02 | | 5% | 480 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 450.00 |
| 94 | Comp support NH 50-8901-01-02 | | | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 95 | Postage ICF 50-9830-01-02 | | 5% | 390 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 420.00 |
| 96 | Pagers/Cell Phones CAMPUS 50-8760-01-02 | | 5% | 45 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 540.00 |
| 97 | Travel CAMPUS 50-9400-01-02 | | 5% | 39 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 60.00 |
| 98 | Seminars CAMPUS 50-9380-01-02 | | 5% | 483 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 1,996.00 |
| 99 | Mileage 50-9410-01-01 and 03 | | 5% | 135 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 100 | Employee gifts/events 50-9300-01-02 | | 5% | 234 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 120.00 |
| 101 | Bad Debt 50-9690-01-02 | | 0.15% | 1,292 | 109.74 | 99.12 | 109.74 | 106.20 | 109.74 | 106.20 | 109.74 | 109.74 | 106.20 | 109.74 | 106.20 | 109.74 | 1,292.10 |
| 102 | Fin Assistance | | | 12,000 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 12,000.00 |
| 103 | Recruit 'ndS - ICF/SC 50-9360-01-02 | | Hep B, TB, Flu | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 104 | Background checks 50-9350-01-02 | | 5% | 96 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 120.00 |
| 105 | | | | | | | | | | | | | | | | | |
| 106 | ADMINISTRATIVE EXPENSE at 5% | | | 17,458 | 7,661.57 | 7,296.95 | 7,661.57 | 7,540.03 | 7,661.57 | 7,540.03 | 7,661.57 | 7,661.57 | 7,540.03 | 7,661.57 | 7,540.03 | 7,661.57 | 91,088.10 |
| 107 | | | | | | | | | | | | | | | | | |
| 108 | Payroll Taxes & Employee Benefits: | | | - | | | | | | | | | | | | | - |
| 110 | Payroll taxes ICF/SC 50-9100-01-02 | | 7.65% | 14,823 | 1,254.08 | 1,197.68 | 1,254.08 | 1,197.68 | 1,254.08 | 1,197.68 | 1,254.08 | 1,254.08 | 1,197.68 | 1,254.08 | 1,254.08 | 1,254.08 | 14,823.35 |
| 111 | Workman's comp - ICF/SC 50-9110-01-02 | | 5% | 3,809 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 5,400.00 |
| 112 | Unemployment - ICF/SC 50-9130-01-02 | | 5% | 2,100 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 2,700.00 |
| 113 | H Ins Home 50-9200-01-02 | | 5% | 15,800 | 1,207.81 | 1,207.81 | 1,207.81 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 15,852.77 |
| 114 | Life Ins SNF | | 5% | 168 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 137.03 |
| 115 | PAYROLL TAXES AND BENEFITS | | | 36,700 | 3,148.31 | 3,091.91 | 3,148.31 | 3,242.92 | 3,299.31 | 3,242.92 | 3,299.31 | 3,299.31 | 3,242.92 | 3,299.31 | 3,299.31 | 3,299.31 | 38,913.15 |
| 116 | | | | | | | | | | | | | | | | | |
| 117 | Fixed Expenses: | | | - | | | | | | | | | | | | | |
| 118 | Depreciation New Building | 31.12% | 24,163,045 | 188,009 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 188,008.51 |
| 119 | Depreciation - Current FFE | | | - | | | | | | | | | | | | | - |
| 120 | Depreciation - New FFE | 31.12% | 1,600,000 | 49,797 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 49,797.23 |
| 121 | DEPRECIATION | | | 237,806 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 237,805.73 |
| 122 | | | | | | | | | | | | | | | | | |
| 123 | Amortization NRSG 50-9985-01-02 - COI | 27.72% | 1,421,415 | 9,852 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 9,852.15 |
| 124 | Amortization | | Loan COI | 9,852 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 9,852.15 |
| 125 | | | | | | | | | | | | | | | | | |
| 126 | Interest ICF/SC 50-9991-01-02 | 27.97% | $ 1,122,403.15 | | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 313,904.39 |
| 127 | Addl Interest | | | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 128 | INTEREST | | | 313,904 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 313,904.39 |
| 129 | | | | | | | | | | | | | | | | | |
| 130 | TOTAL OPERATING EXPENSE | | | 244,024 | 21,381.26 | 20,485.64 | 21,381.26 | 22,196.13 | 21,532.26 | 21,196.13 | 21,532.26 | 21,532.26 | 22,196.13 | 21,532.26 | 21,252.52 | 21,532.26 | 257,750 |
| 131 | Fixed expense | | | 561,562 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 561,562 |
| 132 | | | | | | | | | | | | | | | | | |
| 133 | TOTAL SHELTER CARE ONLY EXPENSES | | | 805,586 | 68,178.11 | 67,282.50 | 68,178.11 | 68,992.98 | 68,329.12 | 67,992.98 | 68,329.12 | 68,329.12 | 68,992.98 | 68,329.12 | 68,049.38 | 68,329.12 | 819,313 |
| 134 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | St. Paul's Home in Belleville | | | | | | | | | | | | | | | | |
| 2 | SKILLED NURSING ONLY | | | | | | | | | | | | | | | | |
| 3 | SUPPORTING SCHEDULES | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | Month of Year End: | | December 31 | | | | | | | | | | | | | | |
| 6 | Base Year: | | 2013 | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | Annual Data | 2013 Info | | | | | | | | | | | | | |
| 9 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | INPUT FIELD | | | | | | | | | | | | | | | | |
| 11 | Clinical: | | ppd | | | | | | | | | | | | | | |
| 12 | Med Sup - chargeable 50-7200-35-03 | | $ 7.00 | 44,940 | 5,332.00 | 4,816.00 | 5,332.00 | 5,160.00 | 5,332.00 | 5,160.00 | 5,332.00 | 5,332.00 | 5,160.00 | 5,332.00 | 5,160.00 | 5,332.00 | 62,780.00 |
| 13 | Med Sup - non chargeable 50-7100-35-03 | | $ 0.75 | 21,170 | 1,999.50 | 1,806.00 | 1,999.50 | 1,935.00 | 1,999.50 | 1,935.00 | 1,999.50 | 1,999.50 | 1,935.00 | 1,999.50 | 1,935.00 | 1,999.50 | 23,842.50 |
| 14 | Equip Rent/ O2 50-7220-35-03 | Oxygen | 800.00 | 12,200 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 9,600.00 |
| 15 | Pharmacy Consult 50-7810-35-03 | 95% | $ 5.50 | 8,026 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 5,082.00 |
| 16 | Pharmacy Supplies 50-7800-35-03 | w/this vendor | $ 2,000 | 32,867 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 4,400.00 | 2,000.00 | 2,000.00 | 2,000.00 | 26,400.00 |
| 17 | Medical Director 50-7300-35-03 | 95% | 600.00 | 5,985 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 6,840.00 |
| 18 | Clinical Supplies 50-8100-35-03 | 95% | 1,000.00 | 20,520 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 11,400.00 |
| 19 | DART CHART 50-8910-35-03 | | 7.00 | 24,369 | 3,038.00 | 2,744.00 | 3,038.00 | 2,940.00 | 3,038.00 | 2,940.00 | 3,038.00 | 3,038.00 | 2,940.00 | 3,038.00 | 2,940.00 | 3,038.00 | 35,770.00 |
| 20 | Medical Record Consult 50-8910-63-03 | | 400.00 | 2,100 | 400.00 | - | - | 400.00 | - | - | - | - | - | 400.00 | - | - | 1,600.00 |
| 21 | | | | 173,376 | 15,513.00 | 14,199.50 | 15,113.00 | 15,178.50 | 15,113.00 | 14,778.50 | 15,513.00 | 15,113.00 | 17,178.50 | 15,513.00 | 14,778.50 | 15,113.00 | 183,014.50 |
| 22 | | | | | | | | | | | | | | | | | |
| 23 | MEDICARE ADDITIONAL EXPENSES | | ppd meds | | | | | | | | | | | | | | |
| 24 | PT MEDA 7010-35-05 | | $ 21.00 | 79,741 | 9,114.00 | 8,232.00 | 9,114.00 | 8,820.00 | 9,114.00 | 8,820.00 | 9,114.00 | 9,114.00 | 8,820.00 | 9,114.00 | 8,820.00 | 9,114.00 | 107,310.00 |
| 25 | OT MEDA 7020-35-05 | | $ 12.00 | 72,807 | 9,545.00 | 8,624.00 | 9,545.00 | 9,240.00 | 9,545.00 | 9,240.00 | 9,545.00 | 9,545.00 | 9,240.00 | 9,545.00 | 9,240.00 | 9,545.00 | 112,420.00 |
| 26 | ST MEDA 7030-35-05 | | $ 12.00 | 55,472 | 5,208.00 | 4,704.00 | 5,208.00 | 5,040.00 | 5,208.00 | 5,040.00 | 5,208.00 | 5,208.00 | 5,040.00 | 5,208.00 | 5,040.00 | 5,208.00 | 61,320.00 |
| 27 | TOTAL THERAPY MED A EXPENSE | | $ 55.00 | 208,020 | | | | | | | | | | | | | 281,050.00 |
| 28 | RX MEDA 7800-35-05 | | $ 22.00 | 76,274 | 9,548.00 | 8,624.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,240.00 | 9,548.00 | 112,420.00 |
| 29 | LAB 7240-35-05 | | $ 1.50 | 17,335 | 651.00 | 588.00 | 651.00 | 630.00 | 651.00 | 630.00 | 651.00 | 651.00 | 630.00 | 651.00 | 630.00 | 651.00 | 7,665.00 |
| 30 | XRAY 7230-35-05 | | $ 2.00 | 6,934 | 868.00 | 784.00 | 868.00 | 840.00 | 868.00 | 840.00 | 868.00 | 868.00 | 840.00 | 868.00 | 840.00 | 868.00 | 10,220.00 |
| 31 | EQUIP 7220-35-05 | | $ 2.00 | 3,467 | 868.00 | 784.00 | 868.00 | 840.00 | 868.00 | 840.00 | 868.00 | 868.00 | 840.00 | 868.00 | 840.00 | 868.00 | 10,220.00 |
| 32 | MEDICAL SUPPLY 7200-35-05 | | $ 1.00 | | 434.00 | 392.00 | 434.00 | 420.00 | 434.00 | 420.00 | 434.00 | 434.00 | 420.00 | 434.00 | 420.00 | 434.00 | 5,110.00 |
| 33 | TOTAL ANC. MED A EXPENSE | | $ 28.50 | | | | | | | | | | | | | | 145,635.00 |
| 34 | MEDA COST | | $ 83.50 | - | | | | | | | | | | | | | - |
| 35 | | | | | | | | | | | | | | | | | |
| 36 | PHYSICAL THERAPY - meth 50-7010-35-03 | | | 98,440 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 100,800.00 |
| 37 | OCCUP THERAPY - meth 50-7020-35-03 | | | 76,380 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 79,800.00 |
| 38 | SPEECH THERAPY - meth 50-7030-35-03 | | | 32,160 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 2,800.00 | 33,600.00 |
| 39 | TOTAL MEDICARE B EXPENSE | | | | | | | | | | | | | | | | 214,200.00 |
| 40 | | | | | | | | | | | | | | | | | |
| 41 | CLINICAL EXPENSES - SNF | | | 1,063,787 | 69,602.00 | 64,691.50 | 69,202.00 | 68,098.50 | 69,202.00 | 67,698.50 | 69,602.00 | 69,202.00 | 70,098.50 | 69,602.00 | 67,698.50 | 69,202.00 | 823,899.50 |
| 42 | | | | | | | | | | | | | | | | | |
| 43 | Special Resident Services - Social Service / Activities | | | | | | | | | | | | | | | | |
| 44 | Activities - NRSG 50-8100-65-03 | 95% | 750.00 | 6,840 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 8,550.00 |
| 45 | Resident Background Check 50-9370-01-03 | 95% | 150.00 | 1,425 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 1,710.00 |
| 46 | | | | | | | | | | | | | | | | | |
| 47 | SPECIAL SERVICES | | | 8,265 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 10,260.00 |
| 48 | | | | | | | | | | | | | | | | | |
| 49 | Marketing: | | | | | | | | | | | | | | | | |
| 50 | Marketing -NRSG 50-9710-01-03 | 75% | 3,000.00 | 27,500 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 27,000.00 |
| 51 | | | | | | | | | | | | | | | | | |
| 52 | MARKETING | | | 27,500 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 27,000.00 |
| 53 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | Annual Data | 2013 Info | | | | | | | | | | | | | |
| 9 | | | Stafferic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 54 | Dietary: | | | | | | | | | | | | | | | | |
| 56 | Raw Food -ICF/SC 50-6200-70-03 | | $ 6.50 | 271,552 | 20,150.00 | 18,200.00 | 20,150.00 | 19,500.00 | 20,150.00 | 19,500.00 | 20,150.00 | 20,150.00 | 19,500.00 | 20,150.00 | 19,500.00 | 20,150.00 | 237,250.00 |
| 57 | EE meals Food 50-8200-70-03 | 50% | 250.00 | | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 1,500.00 |
| 58 | Diet Sup ICF/SC 50-8100-70-03 | | $ 0.15 | | 465.00 | 420.00 | 465.00 | 450.00 | 465.00 | 450.00 | 465.00 | 465.00 | 450.00 | 465.00 | 450.00 | 465.00 | 5,475.00 |
| 59 | Paper Products 50-8350-70-03 | | $ 0.25 | | 775.00 | 700.00 | 775.00 | 750.00 | 775.00 | 750.00 | 775.00 | 775.00 | 750.00 | 775.00 | 750.00 | 775.00 | 9,125.00 |
| 60 | Chemicals 50-8700-70-03 | | $ 0.30 | | 930.00 | 840.00 | 930.00 | 900.00 | 930.00 | 900.00 | 930.00 | 930.00 | 900.00 | 930.00 | 900.00 | 930.00 | 10,950.00 |
| 61 | Dietetics 50-8910-70-03 | 95% | 800.00 | 9,120 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 760.00 | 9,120.00 |
| 62 | Nutritional - 50-8250-70-03 | 95% | 700.00 | 7,980 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 7,980.00 |
| 63 | | | $ 1,057.20 | 288,652 | 23,870.00 | 21,710.00 | 23,870.00 | 23,150.00 | 23,870.00 | 23,150.00 | 23,870.00 | 23,870.00 | 23,150.00 | 23,870.00 | 23,150.00 | 23,870.00 | 281,400.00 |
| 64 | | | | | | | | | | | | | | | | | |
| 65 | DIETARY | | | 288,652 | 23,870.00 | 21,710.00 | 23,870.00 | 23,150.00 | 23,870.00 | 23,150.00 | 23,870.00 | 23,870.00 | 23,150.00 | 23,870.00 | 23,150.00 | 23,870.00 | 281,400.00 |
| 66 | Laundry - Nursing only | | | | | | | | | | | | | | | | - |
| 67 | Linen 50-8400-72-03 | | $ 0.12 | | 372.00 | 336.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 4,380.00 |
| 68 | Laun Sup ICF/SC 50-8100-72-03 | | $ 0.11 | | 341.00 | 308.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 4,015.00 |
| 69 | Hskp Sup - ICF/SC 50-8100-75-03 | | $ 0.11 | | 341.00 | 308.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 4,015.00 |
| 70 | Paper Sup - Hskp 50-8350-75-03 | | $ 0.39 | | 1,209.00 | 1,092.00 | 1,209.00 | 1,170.00 | 1,209.00 | 1,170.00 | 1,209.00 | 1,209.00 | 1,170.00 | 1,209.00 | 1,170.00 | 1,209.00 | 14,235.00 |
| 71 | Chemicals 50-8100-75-03 | | $ 0.12 | | 372.00 | 336.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 4,380.00 |
| 74 | HSKP / LAUNDRY | | $ 0.85 | 39,703 | 2,635.00 | 2,380.00 | 2,635.00 | 2,550.00 | 2,635.00 | 2,550.00 | 2,635.00 | 2,635.00 | 2,550.00 | 2,635.00 | 2,550.00 | 2,635.00 | 31,025.00 |
| 75 | | | | | | | | | | | | | | | | | |
| 76 | Plant Operation & Maintenance: | | | | | | | | | | | | | | | | |
| 77 | | | | | | | | | | | | | | | | | - |
| 78 | Bldg Rep & Main 50-8600-80-03 | | 7,000.00 | 62,700 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 84,000.00 |
| 79 | Grounds ICF /SC 50-8610-80-03 | | 1,000.00 | 5,700 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 12,000.00 |
| 80 | Supplies 50-8100-80-03 | 95% | 75.00 | 570 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 855.00 |
| 81 | Elevator ICF SC 50-8670-80-03 | 95% | 1,000.00 | 1,980 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 11,400.00 |
| 82 | Trash - ICF /SC 50-8790-80-03 | 95% | 1,250.00 | 11,400 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 14,250.00 |
| 83 | Pest control - ICF /SC 50-5700-80-03 | 95% | 425.00 | 2,850 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 403.75 | 4,845.00 |
| 84 | Vehicle maint- ICF/SC 50-9420-01-03 | 95% | 300.00 | 1,710 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 3,420.00 |
| 85 | WINDOW WASHING | | | | | | | 3,000.00 | | | | | | 3,000.00 | | | 6,000.00 |
| 86 | CABLE 50-8720-01-03 | | 1,200.00 | 9,264 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 14,400.00 |
| 88 | Utilities at 80% | 80% | | | | | | | | | | | | | | | |
| 89 | Electric / Gas 50-8790-80-03 | 95,500 | 52.50 | 177,426 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 171,000.00 |
| 90 | Sewer / Water 50-8710-80-03 | sq footage | cost per year | | | | | | | | | | | | | | - |
| 91 | | | | | | | | | | | | | | | | | - |
| 92 | MAINTENANCE | | | 279,600 | 26,347.50 | 26,347.50 | 26,347.50 | 29,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 29,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 322,170.00 |
| 93 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | Annual Data | 2013 Info | | | | | | | | | | | | | |
| 9 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 94 | Administration & General: | | | | | | | | | | | | | | | | - |
| 95 | Consultant fees/purchased services | | | | | | | | | | | | | | | | - |
| 96 | Legal Campus 50-9610-01-03 | 95% | 2,000.00 | 28,500 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 22,800.00 |
| 97 | Auditing - ALU 50-9620-01-03 | 95% | 3,000.00 | 30,400 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 34,200.00 |
| 98 | ADP - ICF SC 50-9291-01-03 | 95% | 1,500.00 | 14,820 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 17,100.00 |
| 99 | | | | | | | | | | | | | | | | | |
| 100 | ICF Management Fee 50-9600-01-03 | 5% | | 281,362 | 35,481.19 | 32,557.26 | 35,481.19 | 34,506.55 | 35,481.19 | 34,506.55 | 35,481.19 | 35,481.19 | 34,506.55 | 35,481.19 | 34,506.55 | 35,481.19 | 418,951.78 |
| 101 | Gen 70,663 Prop 25,929 Auto 4,749 +2315 Umbrella 7,361 D&O 4952.50 | 116,372 | 9,689.29 | | | | | | | | | | | | | | |
| 102 | Ins. Policies - All ICF SC 50-9650-01-03 | | | 41,180 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 8,616.67 | 8,616.67 | 99,566.67 |
| 103 | | | | | | | | | | | | | | | | | |
| 104 | PROFESSIONAL FEES | | | 625,667 | 49,489.52 | 46,565.61 | 49,489.52 | 48,514.88 | 49,489.52 | 48,514.88 | 49,489.52 | 49,489.52 | 48,514.88 | 49,489.52 | 49,298.22 | 50,272.85 | 588,618.44 |
| 105 | | | | | | | | | | | | | | | | | |
| 106 | Bank fees 50-9510-01-03 | 95% | 500.00 | 5,620 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 5,700.00 |
| 107 | Telephone - ICF SC 50-8750-01-03 | 95% | 2,500.00 | 22,800 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 28,500.00 |
| 108 | Dues & Sub ICFSC 50-9550-01-03 | 95% | 1,100.00 | 6,840 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 12,540.00 |
| 109 | Copier - ICF SC 50-9810-01-03 | 95% | 1,000.00 | 5,985 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 11,400.00 |
| 110 | License fees 50-9500-01-03 | 95% | 100.00 | 3,581 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 1,140.00 |
| 111 | Office sup ICF SC 50-8150-01-03 | 95% | 750.00 | 9,120 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 8,550.00 |
| 112 | Comp support NH 50-8901-01-03 | | 100% SNF | 40,800 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 60,000.00 |
| 113 | Postage ICF 50-9830-01-03 | 95% | 700.00 | 7,410 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 7,980.00 |
| 114 | Pagers,Cell Phones CAMPUS 50-8760-01-03 | 95% | 900.00 | 855 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 855.00 |
| 115 | Travel CAMPUS 50-9400-01-03 | 95% | 100.00 | 736 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 1,140.00 |
| 116 | Seminars CAMPUS 50-9380-01-03 | 95% | | 9,177 | 3,160.33 | 3,160.33 | 4,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 4,160.33 | 3,160.33 | 39,924.00 |
| 117 | Mileage 50-9410-01-01 and 03 | | 250.00 | 2,700 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 4,200.00 |
| 118 | Employee gifts events 50-9100-01-03 | 95% | 200.00 | 6,641 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 2,280.00 |
| 119 | Bad Debt 50-9690-01-03 | | 0.15% | 15,990 | 1,025.45 | 937.73 | 1,025.45 | 996.21 | 1,025.45 | 996.21 | 1,025.45 | 1,025.45 | 996.21 | 1,025.45 | 996.21 | 1,025.45 | 12,100.73 |
| 120 | Fin Assistance | | 4,000 | 10,200 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 48,000.00 |
| 121 | Older provider tax on all beds 50-9900-01-03 | | 5,155.63 | 61,920 | 5,022.00 | 4,536.00 | 5,022.00 | 4,860.00 | 5,022.00 | 4,860.00 | 5,022.00 | 5,022.00 | 4,860.00 | 5,022.00 | 4,860.00 | 5,022.00 | 59,130.00 |
| 122 | New IL Cold Provider Tax 50-9900-01-03 | | 19,365.06 | 204,000 | 11,554.71 | 14,616.56 | 16,182.62 | 15,660.60 | 16,182.62 | 15,660.60 | 16,182.62 | 16,182.62 | 15,660.60 | 16,182.62 | 15,660.60 | 16,182.62 | 186,309.39 |
| 123 | Recruitmts - ICF/SC 50-9260-01-03 | Hep B, TB, Flu | 1,500.00 | 12,000 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 18,000.00 |
| 124 | Background checks 50-9350-01-03 | 95% | 200.00 | 1,824 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 2,280.00 |
| 125 | | | | | | | | | | | | | | | | | |
| 126 | | | | | | | | | | | | | | | | | |
| 127 | ADMINISTRATIVE EXPENSE | | | 1,049,866 | 88,265.76 | 87,539.99 | 93,593.67 | 90,905.78 | 92,593.67 | 90,905.78 | 92,593.67 | 92,593.67 | 90,905.78 | 92,593.67 | 92,689.11 | 93,377.61 | 1,099,547.56 |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | Annual Data | 2012 adv | | | | | | | | | | | | | |
| 9 | | | Inputs | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 129 | Payroll Taxes & Employee Benefits: | | | - | | | | | | | | | | | | | - |
| 131 | Payroll taxes - ICI "SC" 50-9100-01-03 | 7.65% | | 249,158 | 21,238.93 | 22,255.43 | 22,226.93 | 22,255.43 | 22,226.93 | 22,255.43 | 23,226.93 | 22,255.43 | 22,226.93 | 23,226.93 | 23,226.93 | 23,226.93 | 275,637.18 |
| 132 | Workmen's comp - ICI "SC" 50-9110-01-03 | 85% | | 64,760 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 91,800.00 |
| 133 | Unemployment - ICI "SC" 50-9130-01-03 | 85% | | 15,700 | 1,825.00 | 1,825.00 | 1,825.00 | 1,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 45,900.00 |
| 134 | 11 tax items 50-9200-01-03 | 90% | | 284,395 | 21,740.58 | 21,740.58 | 21,740.58 | 21,458.68 | 24,458.68 | 24,458.68 | 24,455.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 285,349.83 |
| 135 | | | | | | | | | | | | | | | | | - |
| 136 | Life Ins SNF | 90% | | 2,754 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 2,466.61 |
| 138 | PAYROLL TAXES AND BENEFITS | | | 815,857 | 56,348.04 | 55,676.54 | 56,348.04 | 58,394.66 | 59,466.16 | 58,394.66 | 59,466.16 | 58,394.66 | 59,466.16 | 59,466.16 | 59,466.16 | 59,466.16 | 701,193.65 |
| 139 | Fixed Expenses: | | | | | | | | | | | | | | | | - |
| 140 | Depreciation New Building | 49.00% | 24,193,3005 | | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 34,672.38 | 416,068.63 |
| 141 | Depreciation - Vehicles | | 4,700 | | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 4,800.00 |
| 142 | Depreciation - Current FFE | | 50,000 | | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 50,000.00 |
| 143 | Depreciation - New FFE | 44.89% | 400,000 | | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 1,147.95 | 13,775.35 |
| 144 | Depreciation - New FFE | 44.89% | 1,300,000 | | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 6,589.67 | 79,453.99 |
| 145 | DEPRECIATION | | 1,750,000 | | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 567,296.04 |
| 146 | | | | | | | | | | | | | | | | | - |
| 147 | Amortization ARTS 50-995-01-01 | | | | | | | | | | | | | | | | - |
| 148 | Amortization MRSO 50-995-01-01 - COI | 41.94% | 1,421,615 | | 1816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 21,803.11 |
| 149 | Amortization | | Less COI | | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 21,803.11 |
| 150 | | | | | | | | | | | | | | | | | - |
| 151 | Interest ICI "SC" 50-999-01-03 | 61.84% | 1,122,405 | 25,200 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 694,680.07 |
| 152 | Addl Interest | | | | | | | | | | | | | | | | - |
| 153 | INTEREST | | | 25,200 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 57,900.01 | 694,680.07 |
| 154 | | | | | | | | | | | | | | | | | - |
| 155 | TOTAL OPERATING EXPENSE | | | 3,379,406 | 270,579 | 261,411 | 275,591 | 275,551 | 277,619 | 272,151 | 277,619 | 277,551 | 277,619 | 275,096 | 275,096 | 278,003 | 3,295,456 |
| 156 | Fixed expense | | | 284,117 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 106,992 | 1,283,779 |
| 158 | TOTAL SKILLED NURSING ONLY EXPENSES | | | 3,663,523 | 377,555 | 368,403 | 382,583 | 382,543 | 384,611 | 379,143 | 384,611 | 384,543 | 384,611 | 382,088 | 382,088 | 384,994 | 4,579,235 |
| 159 | | | | | | | | | | | | | | | | | |

00518

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | | | |
| 2 | **St. Paul's Home in Belleville** | | | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | | | |
| 4 | STATEMENTS OF REVENUES & EXPENSES | | | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | | | | | |
| 11 | | | | | New Campus Projection | | | | | | | | | | | | | ILU | Shelter | SNF |
| 12 | | | | | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | Total | | Care | |
| 13 | | | | | | | | | | | | | | | | | | | | |
| 14 | ILU - apartments 4100 | One Bedroom | | | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 668,640.00 | 668,640.00 | | |
| 15 | ILU - apartments | Two Bedroom | | | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 289,740.00 | 289,740.00 | | |
| 16 | ILU - apartments | Two Bedroom | | | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 296,340.00 | 296,340.00 | | |
| 17 | ILU Apartment Revenues | | 1,225,164 | | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 1,254,720 | 1,254,720 | - | |
| 18 | | | | | | | | | | | | | | | | | | | | |
| 19 | Shelter Care 50-4200-01-00 | One bedroom with 2nd person | 450,432 | | 18,600 | 16,800 | 18,600 | 18,000 | 18,600 | 18,000 | 18,600 | 18,600 | 18,000 | 18,600 | 18,000 | 18,600 | 219,000 | | 219,000 | |
| 20 | Shelter Care 50-4200-01-00 | Studio | | | 29,760 | 26,880 | 29,760 | 28,800 | 29,760 | 28,800 | 29,760 | 29,760 | 28,800 | 29,760 | 28,800 | 29,760 | 350,400 | | 350,400 | |
| 21 | Shelter Care 50-4200-01-00 | Companion | | | 24,800 | 22,400 | 24,800 | 24,000 | 24,800 | 24,000 | 24,800 | 24,800 | 24,000 | 24,800 | 24,000 | 24,800 | 292,000 | | 292,000 | |
| 22 | | | | | - | - | - | - | - | - | - | - | - | - | - | - | - | | - | |
| 23 | Shelter Care Revenues | | 450,432 | | 73,160 | 66,080 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 | | 861,400 | - |
| 24 | | | | | | | | | | | | | | | | | | | | |
| 25 | Intermediate Care | ICF Memory Care Compenion | | | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 416,640 | | | 416,640 |
| 26 | Intermediate Care | ICF Memory Care Studio | | | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 535,680 | | | 535,680 |
| 27 | Intermediate Care | | | | - | - | - | - | - | - | - | - | - | - | - | - | - | | | - |
| 28 | | | | | | | | | | | | | | | | | | | | |
| 29 | SNF Priv | SNF Private room | $ 250.00 | | 77,500 | 70,000 | 77,500 | 75,000 | 77,500 | 75,000 | 77,500 | 77,500 | 75,000 | 77,500 | 75,000 | 77,500 | 912,500 | | | 912,500 |
| 30 | SNF Priv | SNF Private room | $ 250.00 | | 108,500 | 98,000 | 108,500 | 105,000 | 108,500 | 105,000 | 108,500 | 108,500 | 105,000 | 108,500 | 105,000 | 108,500 | 1,277,500 | | | 1,277,500 |
| 31 | SNF Priv | Corner Companion | $ 225.00 | | 104,625 | 94,500 | 104,625 | 101,250 | 104,625 | 101,250 | 104,625 | 104,625 | 101,250 | 104,625 | 101,250 | 104,625 | 1,231,875 | | | 1,231,875 |
| 32 | SNF CAID | Toe to Toe Companion | $ 200.00 | | 161,200 | 145,600 | 161,200 | 156,000 | 161,200 | 156,000 | 161,200 | 161,200 | 156,000 | 161,200 | 156,000 | 161,200 | 1,898,000 | | | 1,898,000 |
| 33 | SNF CAID | Corner Companion | $ 225.00 | | 27,900 | 25,200 | 27,900 | 27,000 | 27,900 | 27,000 | 27,900 | 27,900 | 27,000 | 27,900 | 27,000 | 27,900 | 328,500 | | | 328,500 |
| 34 | CAID CONTRACTUAL TO PER DIEM | $ 1,314,000 | $ 120.00 | | (77,500) | (70,000) | (77,500) | (75,000) | (77,500) | (75,000) | (77,500) | (77,500) | (75,000) | (77,500) | (75,000) | (77,500) | (912,500) | 1,314,000 | | (912,500) |
| 35 | Medicare A | $ 2,452,800 | $ 480.00 | | 208,320 | 188,160 | 208,320 | 201,600 | 208,320 | 201,600 | 208,320 | 208,320 | 201,600 | 208,320 | 201,600 | 208,320 | 2,452,800 | | | 2,452,800 |
| 36 | | | | | 689,905 | 630,820 | 689,905 | 670,210 | 689,905 | 670,210 | 689,905 | 689,905 | 670,210 | 689,905 | 670,210 | 689,905 | 8,140,995 | | - | 8,140,995 |
| 37 | | | | | | | | | | | | | | | | | | | | |
| 38 | MEDICARE PART A RUGS | | 1,839,883 | | | | | | | | | | | | | | - | | | |
| 39 | PT MEDA 4410 | | 301,950 | | 32,550 | 29,400 | 32,550 | 31,500 | 32,550 | 31,500 | 32,550 | 32,550 | 31,500 | 32,550 | 31,500 | 32,550 | 383,250 | | | 383,250 |
| 40 | OT MEDA 4420 | | 269,741 | | 29,078 | 26,264 | 29,078 | 28,140 | 29,078 | 28,140 | 29,078 | 29,078 | 28,140 | 29,078 | 28,140 | 29,078 | 342,370 | | | 342,370 |
| 41 | ST MEDA 4430 | | 124,806 | | 13,888 | 12,544 | 13,888 | 13,440 | 13,888 | 13,440 | 13,888 | 13,888 | 13,440 | 13,888 | 13,440 | 13,888 | 163,520 | | | 163,520 |
| 42 | PHARMACY 4470 | | 161,040 | | 17,360 | 15,680 | 17,360 | 16,800 | 17,360 | 16,800 | 17,360 | 17,360 | 16,800 | 17,360 | 16,800 | 17,360 | 204,400 | | | 204,400 |
| 43 | LAB 4440 | | 12,078 | | 2,170 | 1,960 | 2,170 | 2,100 | 2,170 | 2,100 | 2,170 | 2,170 | 2,100 | 2,170 | 2,100 | 2,170 | 25,550 | | | 25,550 |
| 44 | XRAY 4450 | | 8,052 | | 1,302 | 1,176 | 1,302 | 1,260 | 1,302 | 1,260 | 1,302 | 1,302 | 1,260 | 1,302 | 1,260 | 1,302 | 15,330 | | | 15,330 |
| 45 | MED SUP 4460 | | 16,104 | | 1,302 | 1,176 | 1,302 | 1,260 | 1,302 | 1,260 | 1,302 | 1,302 | 1,260 | 1,302 | 1,260 | 1,302 | 15,330 | | | 15,330 |
| 46 | | | | | | | | | | | | | | | | | | | | - |
| 47 | CONTRACTUAL MEDA 5800 , 5810 | | | | (97,650) | (88,200) | (97,650) | (94,500) | (97,650) | (94,500) | (97,650) | (97,650) | (94,500) | (97,650) | (94,500) | (97,650) | (1,149,750) | | | (1,149,750) |
| 48 | Med A CAID contractual for over 20 days | | | | (6,271) | (5,664) | (6,271) | (6,069) | (6,271) | (6,069) | (6,271) | (6,271) | (6,069) | (6,271) | (6,069) | (6,271) | (73,840) | | | (73,840) |
| 49 | MEDICARE PART B SERVICES - OUTPATIENT TO CAMPUS | | - | | | | | | | | | | | | | | | | | |
| 50 | PT - medb 4510 | | 216,000 | | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 144,000 | | | 144,000 |
| 51 | OT - medb 4520 | | 216,000 | | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 114,000 | | | 114,000 |
| 52 | ST- medb 4530 | | 48,000 | | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 | | | 48,000 |
| 53 | | | | | | | | | | | | | | | | | | | | - |
| 54 | CONTRACTUAL 5450 | 60% Caid with -0- 20% copay | - | | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (36,720) | | | (36,720) |
| 55 | | | 480,000.00 | | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 269,280.00 | | - | 269,280.00 |
| 56 | | | - | | - | | | | | | | | | | | | - | | | - |
| 57 | | | $ 7,766,930 | | 883,794 | 818,236 | 883,794 | 861,941 | 883,794 | 861,941 | 883,794 | 883,794 | 861,941 | 883,794 | 861,941 | 883,794 | 10,452,556 | 1,254,720 | 861,400 | 8,336,436 |
| 58 | | | | | | | | | | | | | | | | | | | | |
| 59 | Other Operating Revenues: | | | | | | | | | | | | | | | | | | | |
| 60 | 2nd person fees Apts. | 50-4100-01-00 | | | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 32,400 | 32,400 | | |
| 61 | Vending 4900 | | 3,600 | | 300 | 300 | 300 | 300 | 300 | 300 | 300 | 300 | 300 | 300 | 300 | 300 | 3,600 | | | 3,600 |
| 62 | Meal Delivery | | | | - | - | - | - | - | - | - | - | - | - | - | - | - | | | - |
| 63 | Bd/Guest Meals 4604 | (3,204) | 3,000 | | 250 | 250 | 250 | 250 | 250 | 250 | 250 | 250 | 250 | 250 | 250 | 250 | 3,000 | | | 3,000 |
| 64 | Med Sup/Srve 4610,11,15 | 59,009 | 10,800 | | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 24,000 | | | 24,000 |
| 65 | Personal Services 4615 | | 9,600 | | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 12,000 | | | 12,000 |
| 66 | | | | | | | | | | | | | | | | | | | | |
| 67 | | | | | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 75,000 | 32,400 | - | 42,600 |
| 68 | | | | | | | | | | | | | | | | | | | | |
| 69 | | | | | | | | | | | | | | | | | | | | |
| 70 | Foundation - Support Fund Development | | 11,580 | | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 | | | 60,000 |
| 71 | Charitable Care from Foundation - applied to Shelter care as Revenues | | - | | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 | | | 60,000 |
| 72 | FOUNDATION ALLOC 4950-01 | | 48,000 | | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 | | | 48,000 |
| 73 | Interest Income 4918 | | - | | | | | | | | | | | | | | - | | | - |
| 74 | | | 82,980 | | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 168,000 | $ - | $ - | $ 168,000 |
| 75 | | | | | | | | | | | | | | | | | | | | |
| 76 | Gross Operating Revenues | | 7,871,510 | | $ 904,044 | $ 838,486 | $ 904,044 | $ 882,191 | $ 904,044 | $ 882,191 | $ 904,044 | $ 904,044 | $ 882,191 | $ 904,044 | $ 882,191 | $ 904,044 | $ 10,695,556 | $ 1,287,120 | $ 861,400 | 8,547,036 |
| 77 | | | | | | | | | | | | | | | | | | | | 10,695,556 |

Attachment 29 – p. 94

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | |
| 5 | | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | TOTAL NEW CAMPUS |
| 6 | | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | |
| 8 | | Retirement Living | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 1,287,120 |
| 9 | | Shelter Care | 73,160 | 66,080 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 |
| 10 | | Private | 369,985 | 341,860 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 4,374,195 |
| 11 | | Medicaid - SNF/ IC | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 1,314,000 |
| 12 | | Medicare A | 202,049 | 182,496 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 2,378,961 |
| 13 | | Medicare B | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 269,280 |
| 14 | | Other operating income | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 42,600 |
| 15 | | Charitable Care - Foundation Shelter and SNF | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 16 | | Foundation - Fund Development staffing and benefits | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 17 | | Foundation Support | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 18 | | **Total operating income** | 904,044 | 838,486 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 10,695,556 |
| 19 | | | | | | | | | | | | | | | |
| 20 | | **Expenses** | | | | | | | | | | | | | |
| 21 | | Salaries & benefits | | | | | | | | | | | | | |
| 22 | | Clinical | 211,481 | 201,868 | 211,481 | 201,868 | 211,481 | 201,868 | 211,481 | 211,481 | 201,868 | 211,481 | 211,481 | 211,481 | 2,499,319 |
| 23 | | Special Services | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,714 | 11,182 | 11,714 | 11,714 | 11,714 | 138,441 |
| 24 | | Dietary | 45,972 | 43,882 | 45,972 | 43,882 | 45,972 | 43,882 | 45,972 | 45,972 | 43,882 | 45,972 | 45,972 | 45,972 | 543,300 |
| 25 | | Env Service | 25,898 | 24,721 | 25,898 | 24,721 | 25,898 | 24,721 | 25,898 | 25,898 | 24,721 | 25,898 | 25,898 | 25,898 | 306,072 |
| 26 | | Maintenance | 10,679 | 10,086 | 10,679 | 10,086 | 10,679 | 10,086 | 10,679 | 10,679 | 10,086 | 10,679 | 10,679 | 10,679 | 125,780 |
| 27 | | Admin / Other | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 37,474 | 35,930 | 37,474 | 37,474 | 37,474 | 443,515 |
| 28 | | Salaries | 343,219 | 327,669 | 343,219 | 327,669 | 343,219 | 327,669 | 343,219 | 343,219 | 327,669 | 343,219 | 343,219 | 343,219 | 4,056,426 |
| 29 | | | | | | | | | | | | | | | |
| 30 | | Taxes and Benefits | 64,111 | 62,922 | 64,111 | 65,942 | 67,131 | 65,942 | 67,131 | 67,131 | 65,942 | 67,131 | 67,131 | 67,131 | 791,757 |
| 31 | | **Salaries & benefits** | 407,330 | 390,591 | 407,330 | 393,611 | 410,350 | 393,611 | 410,350 | 410,350 | 393,611 | 410,350 | 410,350 | 410,350 | 4,848,183 |
| 32 | | | | | | | | | | | | | | | - |
| 33 | | Clinical | 69,914 | 65,004 | 69,514 | 68,411 | 69,514 | 68,011 | 69,914 | 69,514 | 70,411 | 69,914 | 68,011 | 69,514 | 827,646 |
| 34 | | Special Services | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 15,600 |
| 35 | | Dietary | 36,972 | 34,389 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 437,638 |
| 36 | | Environmental Services | 3,705 | 3,399 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 43,740 |
| 37 | | Maintenance | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 578,790 |
| 38 | | General & administrative | 113,035 | 111,935 | 118,363 | 115,554 | 117,363 | 115,554 | 117,363 | 117,363 | 115,554 | 117,363 | 117,337 | 118,147 | 1,394,932 |
| 39 | | **Operating Expense** | 272,159 | 263,258 | 277,087 | 278,210 | 276,087 | 271,810 | 276,487 | 276,087 | 280,210 | 276,487 | 273,594 | 276,870 | 3,298,345 |
| 40 | | | | | | | | | | | | | | | - |
| 41 | | | | | | | | | | | | | | | - |
| 42 | | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | 224,555 | 184,637 | 219,627 | 210,370 | 217,607 | 216,770 | 217,207 | 217,607 | 208,370 | 217,207 | 198,247 | 216,824 | 2,549,027 |
| 43 | | | | | | | | | | | | | | | - |
| 44 | | Interest Exp 70% / 15% 15% | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 1,122,403 |
| 45 | | Depreciation New and current | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 955,102 |
| 46 | | Amortization of New Financing | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 35,535 |
| 47 | | **Taxes, Interest, Amort / Depre** | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 2,113,040 |
| 48 | | | | | | | | | | | | | | | |
| 49 | | **Net income** | 48,468 | 8,550 | 43,540 | 34,283 | 41,520 | 40,683 | 41,120 | 41,520 | 32,283 | 41,120 | 22,160 | 40,737 | 435,986 |
| 50 | | | | | | | | | | | | | | | |
| 52 | | | | | | | | | | | | | | | |
| 53 | | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | 435,986 |
| 54 | | **Net Income %** | | | | | | | | | | | **Net Income %** | | 4.1% |
| 55 | | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | 2,549,027 |
| 56 | | **DSCR** | | | | | | | | | | | **DSCR** | | 1.6 |
| 57 | | | | | | | | | | | | | | | |
| 58 | | | | | | | | | | | | | | | |

# St. Paul's Home in Belleville

## STATEMENTS OF REVENUES AND EXPENSES

| | A | B | Jan | Feb | Mar | Apr | May | June | July | Aug | Sept | Oct | Nov | Dec | New Campus |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 6 | Net Operating Revenues | | | | | | | | | | | | | | |
| 8 | Retirement Living 50-4103-01-00 | | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 1,287,120 |
| 10 | Shelter Care 50-4200-01-00 | | 73,160 | 66,080 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 |
| 12 | Private Pay ICF Memory Care Unit | | 79,360 | 72,160 | 79,360 | 76,800 | 79,360 | 76,800 | 79,360 | 79,360 | 76,800 | 79,360 | 76,800 | 79,360 | 932,320 |
| 13 | Private Pay SNF | | 290,625 | 267,500 | 290,625 | 281,250 | 290,625 | 281,250 | 290,625 | 290,625 | 281,250 | 290,625 | 281,250 | 290,625 | 3,421,875 |
| 14 | Medicaid SNF | | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 1,314,000 |
| 15 | MEDICARE PART A RUGS | | 202,049 | 182,496 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 2,378,961 |
| 17 | Medicare Part B | | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 269,280 |
| 18 | Other Ancillary revenues | | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 42,600 |
| 19 | Foundation - Support Fund Development | | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 20 | Charitable Care from Foundation - applied to Shelter care or Revenues | | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 21 | FOUNDATION ALLOC 4[illegible]-01 | | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 22 | Net Operating Revenues | | 904,844 | 839,486 | 904,844 | 883,191 | 904,844 | 883,191 | 904,844 | 904,844 | 883,191 | 904,844 | 883,191 | 904,844 | 10,696,556 |
| 24 | RETIREMENT APTS - ILU | | | | | | | | | | | | | | |
| 25 | Special Services - SS, Act | | 2,334 | 2,247 | 2,334 | 2,247 | 2,334 | 2,247 | 2,334 | 2,334 | 2,247 | 2,334 | 2,334 | 2,334 | 27,817 |
| 26 | Dietary | | 11,633 | 11,109 | 11,633 | 11,109 | 11,633 | 11,109 | 11,633 | 11,633 | 11,109 | 11,633 | 11,533 | 11,633 | 137,542 |
| 27 | Environmental Services | | 3,740 | 3,570 | 3,740 | 3,570 | 3,740 | 3,570 | 3,740 | 3,740 | 3,570 | 3,740 | 3,740 | 3,740 | 44,198 |
| 28 | Maintenance | | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 28,516 |
| 29 | General and Administrative | | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 50,000 |
| 30 | | | 24,375 | 23,469 | 24,375 | 23,469 | 24,375 | 23,469 | 24,375 | 24,375 | 23,469 | 24,375 | 24,375 | 24,375 | 290,873 |
| 32 | SHELTER CARE - ALU | | | | | | | | | | | | | | |
| 33 | Clinical | 5% | 10,574 | 10,093 | 10,574 | 10,053 | 10,574 | 10,093 | 10,574 | 10,574 | 10,093 | 10,574 | 10,574 | 10,574 | 124,966 |
| 34 | Special Services - SS, Act | 5% | 468 | 447 | 468 | 447 | 468 | 447 | 468 | 468 | 447 | 468 | 468 | 468 | 5,531 |
| 35 | Dietary | 5% | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,717 | 1,639 | 1,717 | 1,717 | 1,717 | 20,288 |
| 36 | Environmental Services | 5% | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,108 | 1,058 | 1,108 | 1,108 | 1,108 | 13,094 |
| 37 | Plant Operations & Maintenance | 5% | 653 | 623 | 653 | 623 | 653 | 623 | 653 | 653 | 623 | 653 | 653 | 653 | 7,715 |
| 38 | General and Administrative | 5% | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,874 | 1,797 | 1,874 | 1,874 | 1,874 | 22,176 |
| 39 | | | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 16,393 | 15,656 | 16,393 | 16,393 | 16,393 | 193,769 |
| 40 | SKILLED NURSING CARE | | | | | | | | | | | | | | |
| 41 | Clinical | 95% | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 200,907 | 191,775 | 200,907 | 200,907 | 200,907 | 2,374,353 |
| 42 | Special Services - SS, Act | 95% | 8,892 | 8,488 | 8,892 | 8,488 | 8,892 | 8,488 | 8,892 | 8,892 | 8,488 | 8,892 | 8,892 | 8,892 | 105,092 |
| 43 | Dietary | 95% | 32,617 | 31,134 | 32,617 | 31,134 | 32,617 | 31,134 | 32,617 | 32,617 | 31,134 | 32,617 | 32,617 | 32,617 | 385,470 |
| 44 | Environmental Services | 95% | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 21,051 | 20,094 | 21,051 | 21,051 | 21,051 | 248,761 |
| 45 | Plant Operations & Maintenance | 95% | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 10,027 | 9,463 | 10,027 | 10,027 | 10,027 | 116,065 |
| 46 | General and Administrative | 95% | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 31,414 | 29,967 | 31,434 | 31,434 | 31,434 | 371,339 |
| 47 | | | 304,927 | 290,921 | 304,927 | 290,921 | 304,927 | 290,921 | 304,927 | 304,927 | 290,921 | 304,927 | 304,927 | 304,927 | 3,603,198 |
| 48 | TOTAL COMMUNITY WAGES | | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 345,595 | 330,045 | 345,595 | 345,595 | 345,595 | 4,084,941 |
| 51 | Payroll taxes and employee benefits Retirement | | 4,715 | 4,173 | 4,715 | 3,783 | 4,356 | 4,304 | 4,365 | 4,366 | 4,304 | 4,356 | 4,364 | 4,364 | 51,690 |
| 52 | Payroll taxes and employee benefits Shelter Care | | 3,148 | 3,092 | 3,114 | 3,243 | 3,299 | 3,242 | 3,299 | 3,302 | 3,247 | 3,299 | 3,298 | 3,299 | 38,913 |
| 53 | Payroll taxes and employee benefits Skilled Nursing | | 56,248 | 55,677 | 56,748 | 58,393 | 59,466 | 58,393 | 59,468 | 59,466 | 58,395 | 59,466 | 59,466 | 59,466 | 701,134 |
| 54 | TAX AND BENEFIT TOTALS | | 64,111 | 62,922 | 64,111 | 65,942 | 67,131 | 65,942 | 67,131 | 67,131 | 65,942 | 67,131 | 67,131 | 67,131 | 791,757 |
| 56 | TOTAL SALARIES, TAXES & BENEFITS | | 409,706 | 392,987 | 409,706 | 395,987 | 412,726 | 395,987 | 412,726 | 412,726 | 395,987 | 412,726 | 412,726 | 412,726 | 4,876,099 |
| 58 | Operating Expenses | | | | | | | | | | | | | | |
| 59 | Clinical Expense - Retirement | | | | | | | | | | | | | | |
| 60 | Shelter Care | | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 3,746 |
| 61 | Nursing | | 69,602 | 64,892 | 69,272 | 13,579 | 69,202 | 67,677 | 69,403 | 69,263 | 70,079 | 69,682 | 67,699 | 69,204 | 833,000 |
| 62 | Special Services - Retirement | | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 490 | 400 | 400 | 4,900 |
| 63 | Shelter Care | | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 540 |
| 64 | Nursing | | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 10,260 |
| 65 | Dietary - Retirement | | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 103,800 |
| 66 | Shelter Care | | 4,452 | 4,070 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 52,436 |
| 67 | Nursing | | 23,870 | 21,210 | 23,870 | 23,150 | 23,870 | 23,150 | 23,870 | 23,870 | 23,150 | 23,870 | 23,150 | 23,870 | 281,400 |
| 68 | Housekeeping - Retirement | | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 6,510 |
| 69 | Shelter Care | | 527 | 476 | 527 | 510 | 527 | 510 | 527 | 527 | 510 | 527 | 510 | 527 | 6,209 |
| 70 | Nursing | | 2,635 | 2,380 | 2,635 | 2,550 | 2,635 | 2,550 | 2,635 | 2,635 | 2,550 | 2,635 | 2,550 | 2,635 | 31,025 |
| 71 | Maintenance - Utilities - Retirement | | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 16,400 | 209,500 |
| 72 | Shelter Care | | 4,455 | 4,485 | 4,455 | 5,485 | 4,455 | 4,485 | 4,455 | 4,485 | 5,155 | 4,485 | 4,455 | 4,485 | 55,820 |
| 73 | Nursing | | 26,348 | 26,348 | 26,348 | 20,348 | 26,349 | 26,348 | 26,348 | 26,348 | 27,148 | 27,348 | 26,348 | 26,348 | 322,170 |
| 74 | General and Administrative - Retirement | | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 169,296 |
| 75 | Shelter Care | | 8,412 | 8,047 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 100,089 |
| 76 | Nursing | | 93,916 | 87,709 | 93,844 | 91,156 | 94,844 | 93,356 | 94,144 | 94,944 | 93,156 | 94,314 | 94,039 | 95,627 | 1,175,548 |
| 78 | Operating Expenses | | 272,159 | 263,158 | 277,087 | 278,318 | 276,087 | 271,810 | 276,487 | 276,087 | 290,210 | 276,487 | 273,524 | 276,870 | 3,299,348 |
| 80 | EBITDA - Earnings Before Interest Taxes Depreciation and Amortization | | 227,179 | 182,260 | 217,211 | 207,993 | 215,211 | 214,393 | 214,831 | 215,231 | 205,993 | 214,831 | 195,876 | 214,447 | 2,576,511 |
| 82 | Fixed Expenses | | | | | | | | | | | | | | |
| 83 | Depreciation - Retirement Existing | | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 150,000 |
| 84 | Shelter Care | | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 237,806 |
| 85 | Nursing | | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 567,296 |
| 86 | Amortization of COI - Retirement Lvg | | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 3,880 |
| 87 | Amortization of COI - Shelter Care | | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 9,852 |
| 88 | Amortization of COI - Nursing | | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 21,805 |
| 89 | Interest - Retirement Existing | | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 113,819 |
| 90 | Interest - Shelter Care | | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 313,904 |
| 91 | Interest - Skilled Nursing | | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 694,680 |
| 92 | FIXED EXPENSES | | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 2,113,049 |
| 96 | Earnings before Non Operating Revenues | | 46,092 | 6,174 | 41,164 | 31,907 | 39,144 | 38,307 | 38,744 | 39,144 | 29,907 | 38,744 | 19,789 | 38,361 | 467,430 |

00520

## ST PAUL'S HOME LOAN PAYABLE
### Private Placement

| | Care Level | $$ | Square Footage | | % |
|---|---|---|---|---|---|
| Loan: | Apts | 3,000,000 | 65,259 | | 0 |
| | Clinical | 16,857,582 | 65,249 | | 1 |
| | Sheltered | 7,617,418 | 29,484 | 94,733 | 0 |
| | | 27,475,000 | 159,992 | | 1 |

| | | | |
|---|---|---|---|
| Total Principal Amount | 27,475,000 | MADS | 1,228,269 |
| Interest Rate | 3.25% | | |
| Amortization Period | 40 | | |

| Princiap Due | Principal Amount | Interest Rate | Annual Interest Payment | Principal Payments | Annual Payments on Debt | Monthly Payments |
|---|---|---|---|---|---|---|
| | 27,475,000 | | | | | |
| 2013 | 27,475,000 | 3.2500% | 38,960 | - | 38,960 | 3,247 |
| 2014 | 27,475,000 | 3.2500% | 553,409 | - | 553,409 | 46,117 |
| 2015 | 27,475,000 | 3.2500% | 887,897 | 340,371 | 1,228,268 | 102,356 |
| 2016 | 27,134,629 | 3.2500% | 876,669 | 351,600 | 1,228,268 | 102,356 |
| 2017 | 26,783,029 | 3.2500% | 865,070 | 363,198 | 1,228,268 | 102,356 |
| 2018 | 26,419,831 | 3.2500% | 853,089 | 375,180 | 1,228,269 | 102,356 |
| 2019 | 26,044,651 | 3.2500% | 840,712 | 387,556 | 1,228,269 | 102,356 |
| 2020 | 25,657,094 | 3.2500% | 827,927 | 400,341 | 1,228,268 | 102,356 |
| 2021 | 25,256,753 | 3.2500% | 814,720 | 413,548 | 1,228,268 | 102,356 |
| 2022 | 24,843,205 | 3.2500% | 801,078 | 427,190 | 1,228,269 | 102,356 |
| 2023 | 24,416,014 | 3.2500% | 786,986 | 441,283 | 1,228,268 | 102,356 |
| 2024 | 23,974,732 | 3.2500% | 772,428 | 455,840 | 1,228,268 | 102,356 |

## ST PAUL'S HOME LOC LOAN PAYABLE

| Loan: | Care Level | $$ | Square Footage | | % |
|---|---|---|---|---|---|
| | Apts | - | 65,259 | | 0.00% |
| | Clinical | 783,470 | 65,249 | | 68.88% |
| | Sheltered | 354,026 | 29,484 | 94,733 | 31.12% |
| | | 1,137,496 | 159,992 | | 100.00% |

| | | | |
|---|---|---|---|
| Total Principal Amount | $1,137,496 | MADS | 160,274.88 |
| Interest Rate | 3.00% | | |
| Amortization Period | 1 | | |

| Princiap Due | Principal Amount | Interest Rate | Annual Interest Payment | Principal Payments | Annual Payments | Monthly Payments |
|---|---|---|---|---|---|---|
| | 1,137,496 | | | | | |
| Jun-13 | 1,137,496 | 3.0000% | 17,062.44 | - | 17,062.44 | 2,843.74 |
| Jan-14 | 1,137,496 | 3.0000% | 34,124.88 | - | 34,124.88 | 2,843.74 |
| Jan-15 | 1,137,496 | 3.0000% | 34,124.88 | - | 34,124.88 | 2,843.74 |
| Jan-16 | 1,137,496 | 3.0000% | 34,124.88 | 45,000 | 79,124.88 | 6,593.74 |
| Jan-17 | 1,092,496 | 3.0000% | 32,774.88 | 90,000 | 122,774.88 | 10,231.24 |
| Jan-18 | 1,002,496 | 3.0000% | 30,074.88 | 90,000 | 120,074.88 | 10,006.24 |
| Jan-19 | 912,496 | 3.0000% | 27,374.88 | 90,000 | 117,374.88 | 9,781.24 |
| Jan-20 | 822,496 | 3.0000% | 24,674.88 | 120,000 | 144,674.88 | 12,056.24 |
| Jan-21 | 702,496 | 3.0000% | 21,074.88 | 120,000 | 141,074.88 | 11,756.24 |
| Jan-22 | 582,496 | 3.0000% | 17,474.88 | 120,000 | 137,474.88 | 11,456.24 |
| Jan-23 | 462,496 | 3.0000% | 13,874.88 | 120,000 | 133,874.88 | 11,156.24 |
| Jan-24 | 342,496 | 3.0000% | 10,274.88 | 150,000 | 160,274.88 | 13,356.24 |
| Jan-25 | 192,496 | 3.0000% | 5,774.88 | 150,000 | 155,774.88 | 12,981.24 |
| Jan-26 | 42,496 | 3.0000% | 1,274.88 | 42,496 | 43,770.88 | 3,647.57 |
| Jan-27 | 0 | 3.0000% | 0.00 | | | |

00523

# St. Paul's Home
# Project Structure

| | Stabilized Occupancy | | | | | | |
|---|---|---|---|---|---|---|---|
| **Development Project:** | | | | | | | |
| **Sources of Funds:** | | | | | | | |
| Mortgage Debt | 27,475,000 | | Building | $24,163,085 | | | |
| Sub Debt | - | | | | | | |
| STP Contributions: | | | | - | | | |
| Cash & Investments | 2,000,000 | | | | | | |
| Capital Campaign | 1,000,000 | | | | | | |
| LOI | 1,137,496 | | | | | | |
| **Total Sources** | 31,612,496 | | | | | | |
| | | Average Amortization Periods | | | SNF | Sheltered | Apts | Total |
| **Uses of Funds:** | | | | | | | | |
| Building - Capitalized | 24,163,085 | 40 | | | 16,642,745 | 7,520,340 | - | 24,163,085 |
| FF&E - Capitalized | 1,600,000 | 10 | | | 1,102,028 | 497,972 | - | 1,600,000 |
| CON Licensing Fees | 200,000 | NA | | | 137,753 | 62,247 | - | 200,000 |
| PreMarketing Costs | 687,996 | Expense or COI | | | 473,869 | 214,127 | - | 687,996 |
| Resplacement Reserve (500 per ILU bed) | 90,500 | NA | Balance Sheet Only | | | | 90,500 | 90,500 |
| Loan Origination Financing Costs | 1,421,415 | 40 | | | 872,124 | 394,086 | 155,205 | 1,421,415 |
| Working Capital | 549,500 | NA | Balance Sheet | | 337,152 | 152,348 | 60,000 | 549,500 |
| Current Debt Refunding | 2,900,000 | NA | Balance Sheet | | - | - | 2,900,000 | 2,900,000 |
| **Total Uses** | 31,612,496 | | | | 19,565,671 | 8,841,120 | 3,205,705 | 31,612,496 |
| | | | | | 61.89% | 27.97% | 10.14% | Check 31,612,496 |

| **Statistics** | SNF | Sheltered | Apts | Total | |
|---|---|---|---|---|---|
| Aggregate % Square Feet Applied to Debt | 61.36% | 27.72% | 10.92% | 100.00% | |
| Developed Square Feet Applied to Debt | 68.88% | 31.12% | 0.00% | 100.00% | |
| Debt % Distributed from Detail Schedule | **61.89%** | **27.97%** | **10.14%** | 100.00% | To be applied to principal and interest allocated by payer type. |

**St. Paul's Home**
**Project Structure**
**Appendix A**

| | BSI Numbers | | | Stifel Numbers | | Additions to BSI Numbers | | | Final Appendix A | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **USE OF FUNDS** | **CLINICAL** | **NONCLINICAL** | **TOTAL** | **TOTAL** | **DIFFERENCE** | **CLINICAL** | **NONCLINICAL** | **TOTAL** | **CLINICAL** | **NONCLINICAL** | **TOTAL** |
| Preplanning Costs (Startup Mktg +Init | $99,871 | $45,129 | $145,000 | 687,996 | (542,996) | 373,998 | 168,998 | 542,996 | $473,869 | $214,127 | $687,996 |
| Site Survey and Soil Investigation | $27,551 | $12,449 | $40,000 | 137,500 | (97,500) | 67,155 | 30,345 | 97,500 | $94,706 | $42,794 | $137,500 |
| Site Prep | $482,137 | $217,863 | $700,000 | 700,000 | - | - | - | - | $482,137 | $217,863 | $700,000 |
| Off Site Work | $0 | $0 | $0 | | - | - | - | - | $0 | $0 | $0 |
| New Construction Contracts | $0 | $0 | $0 | | - | - | - | - | $0 | $0 | $0 |
| Modernization Contracts | $14,157,805 | $6,397,473 | $20,555,278 | 20,534,701 | 20,577 | (14,173) | (6,404) | (20,577) | $14,143,632 | $6,391,069 | $20,534,701 |
| Contingencies | $344,384 | $155,616 | $500,000 | 500,000 | - | - | - | - | $344,384 | $155,616 | $500,000 |
| Architectural / Engineering | $645,042 | $291,474 | $936,516 | 916,516 | 20,000 | (13,775) | (6,225) | (20,000) | $631,266 | $285,250 | $916,516 |
| Reserve for Replacement | | | $0 | 90,500 | (90,500) | 62,333 | 28,167 | 90,500 | $62,333 | $28,167 | $90,500 |
| Working Capital | | | $0 | 549,500 | (549,500) | 378,478 | 171,022 | 549,500 | $378,478 | $171,022 | $549,500 |
| Consulting and Other Fees | $325,098 | $146,902 | $472,000 | 472,000 | - | - | - | - | $325,098 | $146,902 | $472,000 |
| Movable or Other Equipment | $1,102,028 | $497,972 | $1,600,000 | 1,600,000 | - | - | - | - | $1,102,028 | $497,972 | $1,600,000 |
| Bond Issuance Expense (project related) | $103,315 | $46,685 | $150,000 | 1,421,415 | (1,271,415) | 875,709 | 395,706 | 1,271,415 | $979,024 | $442,391 | $1,421,415 |
| Net Interest Expense During Construction (project related) | $0 | $0 | $0 | 592,368 | (592,368) | 408,004 | 184,364 | 592,368 | $408,004 | $184,364 | $592,368 |
| Fair Market Value of Leased Space or Equipment | $0 | $0 | $0 | | - | - | - | - | $0 | $0 | $0 |
| Other Costs To Be Capitalized | $351,271 | $158,729 | $510,000 | 510,000 | - | - | - | - | $351,271 | $158,729 | $510,000 |
| Acquisition of Building or Other Property (excluding land) | | 2,900,000 | 2,900,000 | 2,900,000 | - | - | - | - | $0 | $2,900,000 | $2,900,000 |
| **TOTAL USES OF FUNDS** | $17,638,502 | $10,870,292 | $28,508,794 | 31,612,496 | (3,103,702) | 2,137,729 | 965,973 | 3,103,702 | **$19,776,231** | **$11,836,265** | **$31,612,496** |
| **"Use" Percentages** | | | | | | | | | 62.56% | 37.44% | 100.00% |
| **SOURCE OF FUNDS** | | | | | | | | | | | |
| Cash and Securities | | | | | | | | | 1,251,165 | 748,835 | 2,000,000 |
| Pledges | | | | | | | | | - | - | |
| Gifts and Bequests | | | | | | | | | 625,583 | 374,417 | 1,000,000 |
| Bond Issues (project related) | | | | | | | | | - | - | |
| Mortgage Proceeds | | | | | | | | | 17,187,885 | 10,287,115 | 27,475,000 |
| Subordinate Debt / LOI | | | | | | | | | 711,598 | 425,898 | 1,137,496 |
| Leases (fair market value) | | | | | | | | | | | |
| Governmental Appropriations | | | | | | | | | | | |
| Grants | | | | | | | | | | | |
| Other Funds and Sources | | | | | | | | | | | |
| **TOTAL SOURCES OF FUNDS** | | | | | | | | | **$ 19,776,231** | **$ 11,836,265** | **$ 31,612,496** |

*Nursing Facility*
*1021 West E. Street*
*Belleville, IL 62220*
*618-233-2095*
*618-233-2109 fax*

St. Paul's
*Home*
*&*
*Retirement*
*Apartments*

*Retirement Apartments*
*901 West E. Street*
*Belleville, IL 62220*
*618-233-2095*

# HOME FOUNDATION

December 31, 2012

To: Illinois Health Facilities and Services Review Board

Subject: Modernization of the Existing St. Paul's Home, Belleville, IL

The primary function of the St. Paul's Home Foundation is to raise, manage, and provide funds in support of the operation of St. Paul's Home, which includes its nursing facility as well as the retirement apartments. I have had the opportunity to review the Illinois Health Facilities and Services Review Board's (the "Board") definition of control. The foundation does not, in any way, have any control, as that term is defined by the Board, over the facility.

St. Paul's Home has been providing care to residents of Belleville, Illinois and the surrounding communities in a fiscally responsible manner for the past 86 years. While the foundation exists to support the facility, it has never had to step in to meet any debt or fulfill any legal obligation that the facility was unable to address. That said, in the unlikely event that the St. Paul's Home would be unable to meet its' debt obligations as related to the proposed Certificate of Need project, as part of our mission, the St. Paul's Home Foundation would be available to help support the operation of the St. Paul's Home and assist in meeting its obligations to its residents and to the community. Our willingness to do so would be to fulfill our mission and under no circumstances would it result in the foundation obtaining control over the facility.

Sincerely,

Michael Pierce
St. Paul's Home Foundation Chairperson

**Economic Feasibility**

**A. Reasonableness of Financing Arrangements**

The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to one of the following:

1. That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation; or

2. That the total estimated project costs and related costs will be funded in total or in part by borrowing because:

   A. A portion or all of the cash and equivalents must be retained in the balance sheet asset accounts in order to maintain a current ratio of at least 1.5 times for LTC facilities; or

   B. Borrowing is less costly than the liquidation of existing investments, and the existing investments being retained may be converted to cash or used to retire debt within a 60-day period.

**B. Conditions of Debt Financing**

This criterion is applicable only to projects that involve debt financing. The applicant shall document that the conditions of debt financing are reasonable by submitting a notarized statement signed by an authorized representative that attests to the following, as applicable:

1. That the selected form of debt financing for the project will be at the lowest net cost available;

2. That the selected form of debt financing will not be at the lowest net cost available, but is more advantageous due to such terms as prepayment privileges, no required mortgage, access to additional indebtedness, term (years), financing costs and other factors;

3. That the project involves (in total or in part) the leasing of equipment or facilities and that the expenses incurred with leasing a facility or equipment are less costly than constructing a new facility or purchasing new equipment.

SEE ATTACHED CORRESPONDENCE

ATTACHMENT 30

St. Andrew's
MANAGEMENT SERVICES

Chair
Ronald E. Gribbins, PhD

Vice Chair
Bruce Gosser

Secretary
David Henley

Treasurer
Adrianne R. Williams

Director
Catherine A. Dulle
Susan French

President & CEO
Mary Alice Ryan

St. Paul's Home spent a substantial amount of time and effort assessing the available financing options. We have concluded that the plan outlined in this project application is the most reasonable option available. The cash necessary to complete this project on a cash basis is not available, thus requiring the use of debt financing. The level of borrowing sought integrates the use of cash-on-hand, the liquidation of existing investment, the use of short-term borrowing, and the use of long-term borrowing. This has been designed to structure the most reasonable financing option so as to ensure our fiscal responsibility.

Based upon our efforts and our research, we can certify that the debt financing being utilized is the lowest net cost available to St. Paul's for this project.

Respectfully submitted,

Gregory Elliott
Chief Financial Officer
St. Andrew's Management Services

Notarization:
Subscribed and sworn to before me
*this* 4th *day of* January, 2013

NOTARY PUBLIC NOTARY SEAL STATE OF MISSOURI

TONI M. ANDERSON
My Commission Expires
May 11, 2013
St. Louis County
Commission #09708951

Toni M. Anderson
Signature of Notary

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e-mail: info@standrews1.com

Worry Less. St. Andrew's Residences for Senior Living System Serving 50 Years

# St. Paul's Home - Belleville, IL

## Estimated Project Costs

| Department / Area | Cost ($) | Gross Sq Ft. | Cost/SF |
|---|---|---|---|
| **Site Preparation** | $ 1,996,653 | | |
| **Off-Site Work** | $ - | | |
| **CLINICAL** | | | |
| Resident Rooms | $ 6,151,450 | 32,041 | $ 191.99 |
| Nurse, Meds, O2 | $ 281,679 | 1,404 | $ 200.63 |
| Clean Utility, Soiled Utility, Clean Linen | $ 211,355 | 1,190 | $ 177.61 |
| Spa | $ 545,912 | 1,074 | $ 508.30 |
| Resident Laundry | $ 152,660 | 626 | $ 243.87 |
| Janitor, Misc Storage | $ 43,191 | 280 | $ 154.25 |
| Dining, TV, Hearth, Parlor | $ 1,133,079 | 6,259 | $ 181.03 |
| Household Kitchen | $ 704,358 | 2,185 | $ 322.36 |
| Screened or Covered Porch | $ 250,023 | 1,500 | $ 166.68 |
| Corridors | $ 1,940,000 | 11,990 | $ 161.80 |
| Stairs | $ 313,863 | 2,107 | $ 148.96 |
| Restrooms | $ 230,704 | 407 | $ 566.84 |
| Salon | $ 74,494 | 362 | $ 205.78 |
| Exam Room | $ 31,498 | 197 | $ 159.89 |
| Physical Therapy | $ 235,881 | 1,460 | $ 161.56 |
| Elevators | $ 339,082 | 596 | $ 568.93 |
| Commercial Laundry | $ 101,979 | 358 | $ 284.86 |
| Housekeeping | $ 106,624 | 489 | $ 218.05 |
| Renovation | $ 123,726.05 | 724 | $ 170.89 |
| **Total CLINICAL** | **$ 12,971,556** | **65,249** | **$ 198.80** |
| **NON-CLINICAL** | | | |
| Resident Rooms | $ 1,690,346 | 8,093 | $ 208.87 |
| Nurse, Meds, O2 | $ 45,723 | 212 | $ 215.68 |
| Clean Utility, Soiled Utility, Clean Linen | $ 33,706 | 183 | $ 184.18 |
| Spa | $ 28,133 | 177 | $ 158.94 |
| Resident Laundry | $ 35,173 | 155 | $ 226.92 |
| Janitor, Misc Storage | $ 262,230 | 1,700 | $ 154.25 |
| Dining, TV, Hearth, Parlor | $ 207,665 | 1,138 | $ 182.48 |
| Household Kitchen | $ 140,872 | 437 | $ 322.36 |
| Screened or Covered Porch | $ 50,000 | 300 | $ 166.67 |
| Corridors, Lobby, Vestibule | $ 1,267,768 | 6,935 | $ 182.81 |
| Public Restrooms | $ 223,826 | 1,095 | $ 204.41 |
| Community Room/Chapel, Catering Kitchen | $ 263,684 | 1,460 | $ 180.61 |
| Stairs | $ 41,946 | 278 | $ 150.88 |
| Offices, Conference | $ 354,245 | 2,164 | $ 163.70 |
| Employee Lounge, Lockers | $ 72,190 | 468 | $ 154.25 |
| Mechanical, Electrical, Plumbing | $ 88,729 | 568 | $ 156.21 |
| Elevators | $ 72,953 | 143 | $ 510.16 |
| Commercial Laundry | $ 80,556 | 285 | $ 282.65 |
| Housekeeping | $ 24,541 | 117 | $ 209.75 |
| Renovation | $ 611,110.97 | 3,576 | $ 170.89 |
| **Total NON-CLINICAL** | **$ 5,595,396** | **29,484** | **$ 189.78** |
| **Modernization Contracts** | **$ 18,566,952** | **94,733** | **$ 195.99** |
| **Construction Contingency** | $ 1,196,000 | | |
| **Other Fees** | $ 10,000 | | |
| **Bond** | $ 119,519 | | |
| **Total estimated CONSTRUCTION COSTS** | **$ 21,889,125** | **94,733** | **$ 231.06** |

## Estimated Project Costs Summary

| | | | |
|---|---|---|---|
| **Total CLINICAL** | **$ 13,807,696** | **65,249** | **$ 211.62** |
| **Total NON-CLINICAL** | **$ 8,081,428** | **29,484** | **$ 274.10** |
| **Total estimated CONSTRUCTION COSTS** | **$ 21,889,125** | **94,733** | **$ 231.06** |

**ASSUMPTIONS**

1. The only costs we have currently included with the "Other Fees" section is the cost certification.
2. We have pro-rated the building permit fees across the site work and modernization work.
3. Unless a portion could be specifically attributed to a department/area, the following items have been pro-rated on a cost/sf basis among the moderization contracts: general conditions, foundations, structural steel, building skin, drywall, roofing, HVAC, fire protection, and electrical
5. We have included all costs as being "on-site"

# St. Paul's Home - Belleville, IL

## Estimated Project Costs

| Department / Area | Cost ($) | Gross Sq Ft. | Cost/SF |
|---|---|---|---|
| **CLINICAL** | | | |
| Resident Rooms | $ 6,547,969 | 32,041 | $ 191.99 |
| Nurse, Meds, O2 | $ 299,836 | 1,404 | $ 200.63 |
| Clean Utility, Soiled Utility, Clean Linen | $ 224,979 | 1,190 | $ 177.61 |
| Spa | $ 581,101 | 1,074 | $ 508.30 |
| Resident Laundry | $ 162,500 | 626 | $ 243.87 |
| Janitor, Misc Storage | $ 45,975 | 280 | $ 154.25 |
| Dining, TV, Hearth, Parlor | $ 1,206,117 | 6,259 | $ 181.03 |
| Household Kitchen | $ 749,760 | 2,185 | $ 322.36 |
| Screened or Covered Porch | $ 266,139 | 1,500 | $ 166.68 |
| Corridors | $ 2,065,051 | 11,990 | $ 161.80 |
| Stairs | $ 334,094 | 2,107 | $ 148.96 |
| Restrooms | $ 245,575 | 407 | $ 566.84 |
| Salon | $ 79,295 | 362 | $ 205.78 |
| Exam Room | $ 33,528 | 197 | $ 159.89 |
| Physical Therapy | $ 251,085 | 1,460 | $ 161.56 |
| Elevators | $ 360,939 | 596 | $ 568.93 |
| Commercial Laundry | $ 108,553 | 358 | $ 284.86 |
| Housekeeping | $ 113,497 | 489 | $ 218.05 |
| Renovation | $ 131,701 | 724 | $ 170.89 |
| **Total CLINICAL** | **$ 13,807,696** | **65,249** | **$ 211.62** |
| **NON-CLINICAL** | | | |
| Resident Rooms | $ 1,799,305 | 8,093 | $ 208.87 |
| Nurse, Meds, O2 | $ 48,670 | 212 | $ 215.68 |
| Clean Utility, Soiled Utility, Clean Linen | $ 35,878 | 183 | $ 184.18 |
| Spa | $ 29,946 | 177 | $ 158.94 |
| Resident Laundry | $ 37,440 | 155 | $ 226.92 |
| Janitor, Misc Storage | $ 279,133 | 1,700 | $ 154.25 |
| Dining, TV, Hearth, Parlor | $ 221,051 | 1,138 | $ 182.48 |
| Household Kitchen | $ 149,952 | 437 | $ 322.36 |
| Screened or Covered Porch | $ 53,223 | 300 | $ 166.67 |
| Corridors, Lobby, Vestibule | $ 1,349,488 | 6,935 | $ 182.81 |
| Public Restrooms | $ 238,253 | 1,095 | $ 204.41 |
| Community Room/Chapel, Catering Kitchen | $ 280,681 | 1,460 | $ 180.61 |
| Stairs | $ 44,649 | 278 | $ 150.88 |
| Offices, Conference | $ 377,080 | 2,164 | $ 163.70 |
| Employee Lounge, Lockers | $ 76,844 | 468 | $ 154.25 |
| Mechanical, Electrical, Plumbing | $ 94,448 | 568 | $ 156.21 |
| Elevators | $ 77,655 | 143 | $ 510.16 |
| Commercial Laundry | $ 85,749 | 285 | $ 282.65 |
| Housekeeping | $ 26,123 | 117 | $ 209.75 |
| Renovation | $ 650,503 | 3,576 | $ 170.89 |
| Site Preparation | $ 2,125,356 | | |
| Off-Site Work | $ - | | |
| **Total NON-CLINICAL** | **$ 8,081,428** | **29,484** | **$ 274.10** |

## Estimated Project Costs Summary

| | | | |
|---|---|---|---|
| **Total CLINICAL** | **$ 13,807,696** | **65,249** | **$ 211.62** |
| **Total NON-CLINICAL** | **$ 8,081,428** | **29,484** | **$ 274.10** |
| **Total estimated CONSTRUCTION COSTS** | **$ 21,889,125** | **94,733** | **$ 231.06** |

**ASSUMPTIONS**

1. We have placed all construction costs in either the clinical or non-clinical areas based upon LGA's designation.
2. All site preparation has been included with non-clinical
3. We have pro-rated the permit, construction contingency, other fees and bond among the clinical and non-clinical line items.
4. Unless a portion could be specifically attributed to a department/area, the following items have been pro-rated on a cost/sf basis among the clinical/non-clinical areas: general conditions, foundations, structural steel, building skin, drywall, roofing, HVAC, fire protection, and electrical
5. We have included all costs as being "on-site"

## ST. PAUL'S VILLAGE DRAFT PROFORMA BASED ON STABILIZED OCCUPANCY

### RETIREMENT, SHELTER CARE/MEMORYCARE AND SKILLED NURSING LEVELS OF CARE

### (ASSUMES HUD FINANCED)

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | TOTAL NEW CAMPUS | Retirement Apts. | General PPD | Shelter Care | General PPD | Skilled Nursing | General PPD | Expense : % of Rev | 2013 Oper. Budget |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Revenues | | | | | | | | | | | | | | | | | | | | | |
| Retirement Living | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 1,287,120 | 1,287,120 | | | | | | | 1,289,912 |
| Shelter Care | 73,160 | 66,030 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 | | | 861,400 | | | | | 433,584 |
| Private | 369,985 | 341,560 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 4,374,195 | | | | | 4,374,195 | | | 1,898,000 |
| Medicaid - SNF/ IC | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 105,000 | 111,600 | 111,600 | 105,000 | 111,600 | 108,000 | 111,600 | 1,314,000 | | | | | 1,314,000 | | | 2,178,941 |
| Medicare A | 202,049 | 182,496 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 2,378,961 | | | | | 2,378,961 | | | 1,429,490 |
| Medicare B | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 269,280 | | | | | 269,280 | | | 294,000 |
| Other operating Income | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 42,600 | | | | | 42,600 | | | 41,400 |
| Foundation Support | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 14,000 | 168,000 | | | 12,000 | | 156,000 | | | 126,000 |
| Total operating Income | 904,044 | 838,486 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 10,695,536 | 1,287,120 | 70.53 | 873,400 | 119.64 | 8,535,036 | 233.84 | 100.0% | 7,891,327 |
| | | | | | | | | | | | | | % of Tot. Rev. | 12% | | 8% | | 80% | | | |
| Expenses | | | | | | | | | | | | | | | | | | | | | |
| Salaries & benefits | | | | | | | | | | | | | | | | | | | | | |
| Clinical | 211,481 | 201,568 | 211,481 | 201,868 | 211,481 | 201,868 | 211,481 | 211,481 | 201,868 | 211,481 | 211,481 | 211,481 | 2,499,319 | - | - | | | 2,499,319 | 68.47 | 23.4% | 2,170,516 |
| Special Services | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,714 | 11,182 | 11,714 | 11,714 | 11,714 | 138,441 | 27,817 | 1.51 | | | 110,624 | 3.03 | 1.3% | 135,373 |
| Dietary | 45,972 | 43,882 | 45,972 | 43,552 | 45,972 | 43,882 | 45,972 | 45,972 | 43,882 | 45,972 | 45,972 | 45,972 | 543,300 | 137,542 | 7.54 | | | 405,758 | 11.12 | 5.1% | 499,827 |
| Env Service | 25,598 | 24,721 | 25,598 | 24,721 | 25,598 | 24,721 | 25,598 | 25,898 | 24,721 | 25,598 | 25,898 | 25,898 | 306,072 | 44,198 | 2.42 | | | 261,874 | 7.17 | 2.9% | 335,320 |
| Maintenance | 13,056 | 12,462 | 13,056 | 12,462 | 13,056 | 12,462 | 13,056 | 13,056 | 12,462 | 13,056 | 13,056 | 13,056 | 154,396 | 28,516 | 1.56 | | | 125,880 | 3.45 | 1.4% | 134,205 |
| Admin / Other | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 37,474 | 35,930 | 37,474 | 37,474 | 37,474 | 443,515 | 50,000 | 2.74 | | | 393,515 | 10.78 | 4.1% | 420,121 |
| Salaries | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 345,595 | 330,045 | 345,595 | 345,595 | 345,595 | 4,084,943 | 288,073 | 15.78 | 193,769 | 26.54 | 3,603,100 | 98.72 | 38.3% | 3,695,371 |
| | | | | | | | | | | | | | | | | | | | | | |
| Taxes and Benefits | 64,111 | 62,922 | 64,111 | 65,942 | 67,131 | 65,942 | 67,131 | 67,131 | 65,942 | 67,131 | 67,131 | 67,131 | 791,757 | 51,690 | 2.83 | 35,913 | 5.33 | 701,154 | 19.21 | 7.4% | 768,854 |
| Salaries & benefits | 409,706 | 392,967 | 409,706 | 395,987 | 412,726 | 395,987 | 412,726 | 412,726 | 395,987 | 412,726 | 412,726 | 412,726 | 4,876,699 | 339,763 | 18.62 | 229,682 | 31.87 | 4,304,254 | 117.92 | 45.6% | 4,464,225 |
| | | | | | | | | | | | | | | | | | | | | | |
| Clinical | 69,914 | 65,004 | 69,514 | 68,411 | 69,514 | 65,011 | 69,914 | 69,514 | 70,411 | 69,914 | 68,011 | 69,514 | 827,646 | - | - | 3,746 | 0.51 | 823,900 | 22.57 | 7.7% | 687,503 |
| Special Services | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 15,600 | 4,800 | 0.26 | 540 | 0.07 | 10,260 | 0.28 | 0.1% | 13,500 |
| Dietary | 36,972 | 34,389 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 437,638 | 103,800 | 5.69 | 52,438 | 7.18 | 281,400 | 7.71 | 4.1% | 420,773 |
| Environmental Services | 3,705 | 3,399 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 43,748 | 6,510 | 0.36 | 6,205 | 0.85 | 31,025 | 0.85 | 0.4% | 42,360 |
| Maintenance | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 578,790 | 200,500 | 11.00 | 55,820 | 7.65 | 322,170 | 8.83 | 5.4% | 519,643 |
| General & administrative | 113,035 | 111,935 | 118,363 | 115,554 | 117,263 | 115,554 | 117,363 | 117,363 | 115,554 | 117,363 | 117,337 | 115,147 | 1,394,932 | 169,296 | 9.28 | 100,053 | 13.71 | 1,125,548 | 30.84 | 13.0% | 1,095,439 |
| Non Salary Expense | 272,159 | 263,258 | 277,087 | 278,210 | 276,087 | 271,810 | 276,487 | 276,087 | 280,210 | 276,487 | 273,594 | 276,870 | 3,298,345 | 485,206 | 26.59 | 218,837 | 29.98 | 2,594,302 | 71.08 | 30.8% | 2,768,218 |
| | | | | | | | | | | | | | - | | - | | | | | | |
| TOTAL OPERATING EXPENSE | 681,865 | 656,225 | 686,793 | 674,198 | 689,813 | 667,798 | 689,213 | 689,813 | 676,198 | 689,213 | 686,320 | 689,596 | 8,175,045 | 824,969 | 45.20 | 451,520 | 61.85 | 6,898,556 | 189.00 | 76.4% | 7,232,443 |
| | | | | | | | | | | | | | - | | | | | | | | - |
| EBITDA - Earnings Before Interest Taxes Depreciation and Amortization | 222,179 | 182,260 | 217,251 | 207,993 | 215,231 | 214,393 | 214,831 | 215,231 | 205,993 | 214,831 | 195,871 | 214,447 | 2,520,511 | 462,151 | 25.32 | 421,880 | 57.79 | 1,636,479 | 44.84 | | 658,883 |
| | | | | | | | | | | | | | - | | - | | | | | | |
| Interest Exp D/S Supplemental Coupon | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 91,514 | 1,152,405 | 111,819 | - | 113,944 | - | 694,660 | - | 10.5% | 1,207,000 |
| Depreciation New and current | 79,592 | 79,593 | 79,592 | 79,592 | 79,593 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 955,101 | 141,000 | - | 237,936 | - | 567,295 | - | 8.9% | 929,847 |
| Amortization of New Financing | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 3,961 | 47,534 | 3,880 | - | 9,952 | - | 21,903 | - | 0.3% | - |
| Taxes, Interest, Amort / Depre | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 2,111,040 | 267,699 | - | 361,563 | - | 1,283,779 | - | 19.8% | 2,136,847 |
| | | | | | | | | | | | | | | | | | | | | | |
| Net Income | 46,093 | 6,174 | 41,164 | 31,907 | 39,144 | 38,307 | 38,744 | 39,144 | 29,907 | 38,744 | 19,784 | 38,361 | 407,479 | 194,451 | - | (139,683) | - | 352,700 | - | 3.8% | (1,245,963) |
| | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | Profit margin | | | | | | | | |
| | | | | | | | | | | | | | NET INCOME | | | | | | | | |
| | | | | | | | | | | | | | Net income % | | | | | | | | |
| | | | | | | | | | | | | | Income to be used for DSC | | | | | | | | |
| | | | | | | | | | | | | | MADS (Excludes LOC) | | | | | | | | |
| | | | | | | | | | | | | | DSCR | | | | | | | | |
| | | | | | | | | | | | | | MADS (Includes LOC) | | | | | | | | |
| | | | | | | | | | | | | | DSCR | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | |
| 2 | | RETIREMENT APARTMENTS ONLY | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | New Campus |
| 6 | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | Retirement Apt Rents | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 1,254,720 |
| 9 | 2nd person fees | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 32,400 |
| 10 | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | |
| 12 | Total operating income | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **107,260** | **1,287,120** |
| 13 | | | | | | | | | | | | | | |
| 14 | **Expenses - Salaries, Wages and Benefits** | | | | | | | | | | | | | |
| 15 | Clinical | | | | | | | | | | | | | - |
| 16 | Special Services | 2,354 | 2,247 | 2,354 | 2,247 | 2,354 | 2,247 | 2,354 | 2,354 | 2,247 | 2,354 | 2,354 | 2,354 | 27,817 |
| 17 | Dietary | 11,638 | 11,109 | 11,638 | 11,109 | 11,638 | 11,109 | 11,638 | 11,638 | 11,109 | 11,638 | 11,638 | 11,638 | 137,542 |
| 18 | Env Service | 3,740 | 3,570 | 3,740 | 3,570 | 3,740 | 3,570 | 3,740 | 3,740 | 3,570 | 3,740 | 3,740 | 3,740 | 44,198 |
| 19 | Maintenance | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 28,516 |
| 20 | Admin / Other | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 50,000 |
| 21 | Salaries | 24,275 | 23,469 | 24,275 | 23,469 | 24,275 | 23,469 | 24,275 | 24,275 | 23,469 | 24,275 | 24,275 | 24,275 | 288,073 |
| 22 | | | | | | | | | | | | | | |
| 23 | Taxes and Benefits | 4,215 | 4,153 | 4,215 | 4,304 | 4,366 | 4,304 | 4,366 | 4,366 | 4,304 | 4,366 | 4,366 | 4,366 | 51,690 |
| 24 | **Salaries & benefits** | **28,490** | **27,622** | **28,490** | **27,773** | **28,641** | **27,773** | **28,641** | **28,641** | **27,773** | **28,641** | **28,641** | **28,641** | **339,763** |
| 25 | | | | | | | | | | | | | | - |
| 26 | Clinical | | | | | | | | | | | | | - |
| 27 | Special Services | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 4,800 |
| 28 | Dietary | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 8,650 | 103,800 |
| 29 | Environmental Services | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 6,510 |
| 30 | Maintenance | 16,400 | 16,400 | 16,400 | 18,400 | 16,400 | 16,400 | 16,400 | 16,400 | 18,400 | 16,400 | 16,400 | 16,400 | 200,800 |
| 31 | General & administrative | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 169,296 |
| 32 | **Operating Expense** | **40,101** | **40,101** | **40,101** | **42,101** | **40,101** | **40,101** | **40,101** | **40,101** | **42,101** | **40,101** | **40,101** | **40,101** | **485,206** |
| 33 | | | | | | | | | | | | | | - |
| 34 | | | | | | | | | | | | | | - |
| 35 | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | **38,670** | **39,538** | **38,670** | **37,387** | **38,519** | **39,387** | **38,519** | **38,519** | **37,387** | **38,519** | **38,519** | **38,519** | **462,151** |
| 36 | | | | | | | | | | | | | | - |
| 37 | Interest Exp | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 113,819 |
| 38 | Depreciation | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 150,000 |
| 39 | Amortization | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 323 | 3,880 |
| 40 | **Taxes, Interest, Amort / Depre** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **22,308** | **267,699** |
| 41 | | | | | | | | | | | | | | |
| 42 | **Net income** | **16,362** | **17,229** | **16,362** | **15,078** | **16,211** | **17,078** | **16,211** | **16,211** | **15,078** | **16,211** | **16,211** | **16,211** | **194,452** |
| 43 | | | | | | | | | | | | | | |
| 45 | | | | | | | | | | | | | | |
| 46 | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | **194,452** |
| 47 | **Net income %** | | | | | | | | | | | **Net income %** | | **15.1%** |
| 48 | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | **458,271** |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | |
| 2 | | SHELTER CARE only | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | New Campus |
| 6 | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | Shelter Care | 73,160 | 66,080 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 |
| 9 | Charitable Care - Foundation w/ SNF | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 12,000 |
| 10 | Total operating income | **74,160** | **67,080** | **74,160** | **71,800** | **74,160** | **71,800** | **74,160** | **74,160** | **71,800** | **74,160** | **71,800** | **74,160** | **873,400** |
| 11 | | | | | | | | | | | | | | |
| 12 | **Expenses** | | | | | | | | | | | | | |
| 13 | Clinical | 10,574 | 10,093 | 10,574 | 10,093 | 10,574 | 10,093 | 10,574 | 10,574 | 10,093 | 10,574 | 10,574 | 10,574 | 124,966 |
| 14 | Special Services | 468 | 447 | 468 | 447 | 468 | 447 | 468 | 468 | 447 | 468 | 468 | 468 | 5,531 |
| 15 | Dietary | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,717 | 1,639 | 1,717 | 1,717 | 1,717 | 20,288 |
| 16 | Env Service | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,108 | 1,058 | 1,108 | 1,108 | 1,108 | 13,094 |
| 17 | Maintenance | 653 | 623 | 653 | 623 | 653 | 623 | 653 | 653 | 623 | 653 | 653 | 653 | 7,715 |
| 18 | Admin / Other | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,874 | 1,797 | 1,874 | 1,874 | 1,874 | 22,176 |
| 19 | Salaries | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 16,393 | 15,656 | 16,393 | 16,393 | 16,393 | 193,769 |
| 20 | | | | | | | | | | | | | | |
| 21 | Taxes and Benefits | 3,148 | 3,092 | 3,148 | 3,243 | 3,299 | 3,243 | 3,299 | 3,299 | 3,243 | 3,299 | 3,299 | 3,299 | 38,913 |
| 22 | **Salaries & benefits** | **19,541** | **18,748** | **19,541** | **18,899** | **19,692** | **18,899** | **19,692** | **19,692** | **18,899** | **19,692** | **19,692** | **19,692** | **232,682** |
| 23 | | | | | | | | | | | | | | - |
| 24 | Clinical | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 3,746 |
| 25 | Special Services | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 540 |
| 26 | Dietary | 4,452 | 4,029 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 52,438 |
| 27 | Environmental Services | 527 | 476 | 527 | 510 | 527 | 510 | 527 | 527 | 510 | 527 | 510 | 527 | 6,205 |
| 28 | Maintenance | 4,485 | 4,485 | 4,485 | 5,485 | 4,485 | 4,485 | 4,485 | 4,485 | 5,485 | 4,485 | 4,485 | 4,485 | 55,820 |
| 29 | General & administrative | 8,412 | 8,047 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 100,088 |
| 30 | **Operating Expense** | **18,233** | **17,394** | **18,233** | **18,953** | **18,233** | **17,953** | **18,233** | **18,233** | **18,953** | **18,233** | **17,953** | **18,233** | **218,837** |
| 31 | | | | | | | | | | | | | | - |
| 32 | | | | | | | | | | | | | | - |
| 33 | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | **36,386** | **30,938** | **36,386** | **33,948** | **36,235** | **34,948** | **36,235** | **36,235** | **33,948** | **36,235** | **34,154** | **36,235** | **421,880** |
| 34 | | | | | | | | | | | | | | - |
| 35 | Interest Exp | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 313,904 |
| 36 | Depreciation | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 237,806 |
| 37 | Amortization | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 9,852 |
| 38 | **Taxes, Interest, Amort / Depre** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **46,797** | **561,562** |
| 39 | | | | | | | | | | | | | | |
| 40 | **Net Income** | **(10,411)** | **(15,858)** | **(10,411)** | **(12,849)** | **(10,562)** | **(11,849)** | **(10,562)** | **(10,562)** | **(12,849)** | **(10,562)** | **(12,643)** | **(10,562)** | **(139,682)** |
| 41 | | | | | | | | | | | | | | |
| 43 | | | | | | | | | | | | | | |
| 44 | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | **(139,682)** |
| 45 | **Net Income %** | | | | | | | | | | | **Net Income %** | | **-16.0%** |
| 46 | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | **412,028** |

00533

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | |
| 2 | | SKILLED NURSING / INTERMEDIATE with MEDICARE AND MEMORY CARE UNITS | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | New Campus |
| 6 | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | Private | 369,985 | 341,860 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 4,374,195 |
| 9 | Medicaid - SNF/ IC | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 1,314,000 |
| 10 | Medicare A | 202,049 | 182,496 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 2,378,961 |
| 11 | Medicare B | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 269,280 |
| 12 | Other operating income | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 42,600 |
| 13 | Charitable Care - Foundation w/Shelter | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 14 | Foundation Support | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 9,000 | 108,000 |
| 15 | Total operating income | **722,624** | **664,146** | **722,624** | **703,131** | **722,624** | **703,131** | **722,624** | **722,624** | **703,131** | **722,624** | **703,131** | **722,624** | **8,535,036** |
| 16 | | | | | | | | | | | | | | |
| 17 | **Expenses** | | | | | | | | | | | | | |
| 18 | Clinical | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 200,907 | 191,775 | 200,907 | 200,907 | 200,907 | 2,374,353 |
| 19 | Special Services | 8,892 | 8,488 | 8,892 | 8,488 | 8,892 | 8,488 | 8,892 | 8,892 | 8,488 | 8,892 | 8,892 | 8,892 | 105,092 |
| 20 | Dietary | 32,617 | 31,134 | 32,617 | 31,134 | 32,617 | 31,134 | 32,617 | 32,617 | 31,134 | 32,617 | 32,617 | 32,617 | 385,470 |
| 21 | Env Service | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 21,051 | 20,094 | 21,051 | 21,051 | 21,051 | 248,781 |
| 22 | Maintenance | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 10,027 | 9,463 | 10,027 | 10,027 | 10,027 | 118,065 |
| 23 | Admin / Other | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 31,434 | 29,967 | 31,434 | 31,434 | 31,434 | 371,339 |
| 24 | Salaries | 304,927 | 290,921 | 304,927 | 290,921 | 304,927 | 290,921 | 304,927 | 304,927 | 290,921 | 304,927 | 304,927 | 304,927 | 3,603,100 |
| 25 | | | | | | | | | | | | | | |
| 26 | Taxes and Benefits | 56,748 | 55,677 | 56,748 | 58,395 | 59,466 | 58,395 | 59,466 | 59,466 | 58,395 | 59,466 | 59,466 | 59,466 | 701,154 |
| 27 | **Salaries & benefits** | **361,675** | **346,597** | **361,675** | **349,315** | **364,393** | **349,315** | **364,393** | **364,393** | **349,315** | **364,393** | **364,393** | **364,393** | **4,304,254** |
| 28 | | | | | | | | | | | | | | - |
| 29 | Clinical | 69,602 | 64,692 | 69,202 | 68,099 | 69,202 | 67,699 | 69,602 | 69,202 | 70,099 | 69,602 | 67,699 | 69,202 | 823,900 |
| 30 | Special Services | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 10,260 |
| 31 | Dietary | 23,870 | 21,710 | 23,870 | 23,150 | 23,870 | 23,150 | 23,870 | 23,870 | 23,150 | 23,870 | 23,150 | 23,870 | 281,400 |
| 32 | Environmental Services | 2,635 | 2,380 | 2,635 | 2,550 | 2,635 | 2,550 | 2,635 | 2,635 | 2,550 | 2,635 | 2,550 | 2,635 | 31,025 |
| 33 | Maintenance | 26,348 | 26,348 | 26,348 | 29,348 | 26,348 | 26,348 | 26,348 | 26,348 | 29,348 | 26,348 | 26,348 | 26,348 | 322,170 |
| 34 | General & administrative | 90,516 | 89,780 | 95,844 | 93,156 | 94,844 | 93,156 | 94,844 | 94,844 | 93,156 | 94,844 | 94,939 | 95,627 | 1,125,548 |
| 35 | **Operating Expense** | **213,825** | **205,764** | **218,753** | **217,157** | **217,753** | **213,757** | **218,153** | **217,753** | **219,157** | **218,153** | **215,540** | **218,537** | **2,594,302** |
| 36 | | | | | | | | | | | | | | - |
| 37 | | | | | | | | | | | | | | - |
| 38 | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | **147,123** | **111,784** | **142,195** | **136,659** | **140,477** | **140,059** | **140,077** | **140,477** | **134,659** | **140,077** | **123,197** | **139,694** | **1,636,479** |
| 39 | | | | | | | | | | | | | | - |
| 40 | Interest Exp | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | **57,890** | 694,680 |
| 41 | Depreciation | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | **47,275** | 567,296 |
| 42 | Amortization | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | **1,817** | 21,803 |
| 43 | **Taxes, Interest, Amort / Depre** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **106,982** | **1,283,779** |
| 44 | | | | | | | | | | | | | | |
| 45 | **Net income** | **40,142** | **4,803** | **35,214** | **29,677** | **33,496** | **33,077** | **33,096** | **33,496** | **27,677** | **33,096** | **16,216** | **32,712** | **352,700** |
| 46 | | | | | | | | | | | | | | |
| 48 | | | | | | | | | | | | | | |
| 49 | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | **352,700** |
| 50 | **Net income %** | | | | | | | | | | | **Net income %** | | **4.1%** |
| 51 | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | **1,069,183** |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | **St. Paul's Home in Belleville** | | | | | | | | | | | | | | | | | | |
| 2 | New Campus Projections | | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | | |
| 4 | Date of Run: | 01/04/13 | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | | |
| 6 | | # of | | | New Campus projection | | | | | | | | | | | | | | |
| 7 | Room Type | Beds | | | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | PRIV | CAID | MEDA |
| 8 | | | | | | | | | | | | | | | | | | | |
| 9 | Retirement apt. | | | | | | | | | | | | | | | | | | |
| 10 | EXISTING INDEPENDENT LIVING APARTMENTS | | 53 | | | | | | | | | | | | | | | | |
| 11 | ILU - One Bedroom | 28 | PRIV | $ 1,990 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | | | |
| 12 | ILU - Two Bedroom | 12 | PRIV | $ 2,195 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | | | |
| 13 | ILU - Two BR w Porch/patio | 13 | PRIV | $ 2,245 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | | | |
| 14 | | | | | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50.0 | | |
| 15 | | | | | | | | | | | | | | | | | | | |
| 16 | ILU - apartments | 53 | | 2% iner | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | | | |
| 17 | | | | | | | | | | | | | | | | | | | |
| 18 | 3rd FLOOR NORTH - SHELTERED CARE | | 26 | | | | | | | | | | | | | | | | |
| 19 | Shelter One Bedroom/companion | 8 | PRIV | $ 150 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | | |
| 20 | Shelter Studio | 8 | PRIV | $ 120 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | | | |
| 21 | Shelter Companion | 10 | PRIV | $ 100 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | | | |
| 22 | | | | | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20.0 | | |
| 23 | | | | | | | | | | | | | | | | | | | |
| 24 | Shelter Care | 26 | | | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | | | |
| 25 | | | | | | | | | | | | | | | | | | | |
| 26 | 1ST FLOOR NORTH - ICF/MEMORY CARE | | 18 | | | | | | | | | | | | | | | | |
| 27 | ICF Memory Care Companion | 8 | PRIV | $ 140 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8.0 | | |
| 28 | ICF Memory Care Studio | 10 | PRIV | $ 160 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9.0 | | |
| 29 | | | | | | | | | | | | | | | | | | | |
| 30 | | | | | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | | | |
| 31 | | | | | | | | | | | | | | | | | | | |
| 32 | 2ND FLOOR NORTH - SNF | | 24 | | | | | | | | | | | | | | | | |
| 33 | SNF Private room | 10 | PRIV | $ 250 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10.0 | | |
| 34 | | | | | | | | | | | | | | | | | | | |
| 35 | SNF Toe to Toe | 4 | CAID | $ 120 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | 4.0 | |
| 36 | SNF Toe to Toe | 10 | CAID | $ 120 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | | 10.0 | |
| 37 | | | | | | | | | | | | | | | | | | | |
| 38 | | | | | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | | | |
| 39 | 3RD FLOOR SOUTH - SNF | | 22 | | | | | | | | | | | | | | | | |
| 40 | SNF Private room | 8 | PRIV | $ 225 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7.0 | | |
| 42 | SNF Corner | 4 | PRIV | $ 205 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4.0 | | |
| 43 | SNF Toe to Toe | 6 | CAID | $ 120 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | | 6.0 | |
| 44 | SNF Corner | 4 | CAID | $ 120 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | | 4.0 | |
| 45 | | | | | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | | | |
| 46 | 2ND FLOOR SOUTH - SNF | | 22 | | | | | | | | | | | | | | | | |
| 47 | SNFPrivate | 8 | PRIV | $ 225 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7.0 | | |
| 49 | SNF Corner | 8 | PRIV | $ 205 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8.0 | | |
| 50 | SNF Toe to Toe | 6 | CAID | $ 120 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | | 6.0 | |
| 51 | | | | | | | | | | | | | | | | | | | |
| 52 | | | | | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | | | |
| 53 | 1ST FLOOR SOUTH - SNF | | 22 | | | | | | | | | | | | | | | | |
| 54 | SNF Corner | 8 | PRIV | $ 205 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3.0 | | |
| 55 | SNF Medicare A | 14 | MEDA | $ 480 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | | | 14.0 |
| 56 | | | | | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | | | |
| 57 | ICF / SNF Beds | 108 | | | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 56.0 | 30.0 | 14.0 |
| 58 | | | | SNF ONLY | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | | | |
| 59 | | 187 | | | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 76.0 | 30.0 | 14.0 |
| 60 | | | | | | | | | | | | | | | | | | | |
| 61 | RETIREMENT | ILU | 53 | | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | 94.3% | | |
| 62 | SHELTERED CARE | SC | 26 | | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | 76.9% | | |
| 63 | SKILLED / INTERMEDIATE/ MEMORY | ICF/SNF | 108 | | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | 92.6% | | |
| 64 | | | TOTAL FACILITY | | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | 90.9% | | |
| 65 | | | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | **St. Paul's Home in Belleville** | | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | | | |
| 3 | INPUT FIELD | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 8 | Base Year: | 2014 | | | | | | | | | | | | | | | |
| 9 | | | | | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | | | | | | | | | | | | | | | | | |
| 11 | | Total Occup. | 2012 | 2013 | 2014 | | | | | | | | | | | | |
| 14 | INDEPENDENT LIVING | | | | 2.0% | | | | | | | | | | | | |
| 15 | ILU - One Bedroom | 28 | 1,910 | 1,950 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | 1,990.00 | |
| 16 | ILU - Two Bedroom | 12 | 2,089 | 2,150 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | 2,195.00 | |
| 17 | ILU - Two BR w Porch/patio | 13 | 2,149 | 2,200 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | 2,245.00 | |
| 18 | | 53 | | | | | | | | | | | | | | | |
| 19 | SHELTERED CARE | | | | | | | | | | | | | | | | |
| 20 | Shelter One Bedroom/companion | 8 | | | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | |
| 21 | Shelter Studio | 8 | | | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | |
| 22 | Shelter Companion | 10 | | | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | |
| 23 | | 26 | | | | | | | | | | | | | | | |
| 26 | INTERMEDIDATE & MEMORY CARE | | | | | | | | | | | | | | | | |
| 27 | ICF Memory Care Companion | 8 | | | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | |
| 28 | ICF Memory Care Studio | 10 | | | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | |
| 29 | | | | | | | | | | | | | | | | | |
| 30 | | 18 | | | | | | | | | | | | | | | |
| 32 | SKILLED NURSING FACILITY | | | | | | | | | | | | | | | | |
| 33 | SNF Private room | 26 | | | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | |
| 34 | SNF PRIVATE ROOMS | | | | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | |
| 35 | SNF Toe to Toe | | Cald T-T | 26 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | |
| 36 | SNF Corner | 20 | Cald Corner | 4 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | |
| 37 | | | | | | | | | | | | | | | | | |
| 38 | SNF Medicare A | 14 | | | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | 480.00 | |
| 39 | | 60 | | 30 | | | | | | | | | | | | | |
| 40 | TOTAL OCCUPANCY | 187 | | | | | | | | | | | | | | | |
| 41 | | | | | | | | | | | | | | | | | |
| 42 | CAID RATE FOR 2014 | $ 120.00 | | | | | | | | | | | | | | | |
| 44 | Physical Therapy | MEDA | | | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | |
| 45 | Occupational Therapy | MEDA | | | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | |
| 46 | Speech Therapy | MEDA | | | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | 32.00 | |
| 47 | Medicare Pharmacy | MEDA | $ 225 | { | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | |
| 48 | Lab | MEDA | | | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | |
| 49 | Xrays | MEDA | | | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | |
| 50 | Med Supplies | MEDA | | | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | |
| 51 | | | | | | | | | | | | | | | | | |
| 52 | CAID Co las contractual | | 10% | | (6,250) | (5,645) | (6,250) | (6,048) | (6,250) | (6,048) | (6,250) | (6,250) | (6,048) | (6,250) | (6,048) | (6,250) | |
| 54 | MEDICARE PART B | | | | | | | | | | | | | | | | |
| 55 | Physical Therapy | | | | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 144,000 |
| 56 | Occupational Therapy | | | | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 114,000 |
| 57 | Speech Therapy | | | | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 58 | | | | | | | | | | | | | | | | | |
| 59 | Per Month Other Op. Rev: | | | | | | | | | | | | | | | | |
| 60 | Second Person - IL 50-4100-01-00 | 6 2nd persons budgeted | | $ 450 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 2,700.00 | 32,400 |
| 61 | | | | | | | | | | | | | | | | | |
| 62 | | | | | | | | | | | | | | | | | |
| 63 | Vending 4900 | | | | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 3,600 |
| 65 | Bd/Guest Meals 4604 | | | | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 3,000 |
| 66 | Med Sup/Srvc 4610,11,15 | | | | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 24,000 |
| 67 | Personal Services 4615 | | | | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 12,000 |
| 68 | Foundation - Support Fund Development | | | | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 60,000 |
| 69 | Charitable Care from Foundation - applied to Shelter care as Revenues | | | | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 60,000 |
| 70 | FOUNDATION ALLOC 4950-01 | | | | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 48,000 |
| 71 | | | | | | | | | | | | | | | | | |
| 72 | No. of beds available | | | | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | 187 | |
| 73 | No. of beds occupied | | | | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | 170 | |
| 75 | Total no. of Retirement residents | | | | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | |
| 76 | Total no. of Sheltered Care | | | | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | |
| 77 | Total no. of SNF residents with MEDA included | | | | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | |
| 78 | Total no. of patient days possible - Independent Apartments | | | | 1,550 | 1,400 | 1,550 | 1,500 | 1,550 | 1,500 | 1,550 | 1,550 | 1,500 | 1,550 | 1,500 | 1,550 | 18,350 |
| 79 | Total no. of patient days possible Shelter Care | | | | 620 | 560 | 620 | 600 | 620 | 600 | 620 | 620 | 600 | 620 | 600 | 620 | 7,300 |
| 80 | Total no. of SNF/ICF/Memory Care | | | | 3,100 | 2,800 | 3,100 | 3,000 | 3,100 | 3,000 | 3,100 | 3,100 | 3,000 | 3,100 | 3,000 | 3,100 | 36,500 |
| 81 | | | | | | | | | | | | | | | | | |
| 82 | Total no. of Medicaid Days | | | | 930 | 840 | 930 | 900 | 930 | 900 | 930 | 930 | 900 | 930 | 900 | 930 | 10,950 |
| 83 | Total no. of Private Days | | | | 1,209 | 1,092 | 1,209 | 1,170 | 1,209 | 1,170 | 1,209 | 1,209 | 1,170 | 1,209 | 1,170 | 1,209 | 14,235 |
| 84 | Total No. of Memory Care | | | | 527 | 476 | 527 | 510 | 527 | 510 | 527 | 527 | 510 | 527 | 510 | 527 | 6,205 |
| 85 | Total no. of Medicare A Days | | | | 434 | 392 | 434 | 420 | 434 | 420 | 434 | 434 | 420 | 434 | 420 | 434 | 5,110 |
| 87 | | | | | 3,100 | 2,800 | 3,100 | 3,080 | 3,100 | 3,000 | 3,100 | 3,100 | 3,000 | 3,100 | 3,080 | 3,100 | 36,580 |
| 88 | Total number of days in period | | | | 31 | 28 | 31 | 30 | 31 | 30 | 31 | 31 | 30 | 31 | 30 | 31 | 365 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | **ST PAUL'S HOME IN BELLEVILLE** | | | | | | | | | | | | | | | |
| 2 | Salary Budget for Operating Budget | | | | | | | | | | | | | | | |
| 3 | STAFFING & SALARIES & WAGES | | | | | | | | | | | | | | | |
| 4 | December 31 | | | | | | | | | | | | | | | |
| 5 | 2014 | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | |
| 8 | No. of hours per pay period | | 3½ | | | Wage Inc. | | | | | PTO | 80 | | | 2080 | |
| 9 | No. of pay periods per month | | | | | 01/01/14 | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | |
| 11 | | | | | 2012 | 2013 | 2014 | | | | | | | # of FTEs | Salary $$ | Salary $$$ |
| 12 | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014 | 2014 | 2013 |
| 13 | Names and Positions | | Date | Wage | Inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 14 | Administration: | | | | | | | | | | | | | | | |
| 15 | Executive Director | New | 1/1/2012 | 1/1/2014 | 50.48 | 1.51 | 53.51 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 108,150.00 | |
| 16 | | | | | | | | | | | | | | | | |
| 17 | Marketing / Apartment Manager | Martha Holloway | 9/29/2009 | 1/1/2015 | 24.04 | 0.72 | 31.35 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 65,000.00 | |
| 18 | FUND DEVELOPMENT | New | 1/1/2012 | 1/1/2014 | 25.00 | 0.75 | 26.50 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 53,560.00 | |
| 19 | Marketing Bonus | | | | | | | | | | | | | | 42,000.00 | |
| 20 | Billing | Sandi Koester | 5/16/1998 | 1/1/2014 | 15.00 | 0.45 | 15.90 | 3½ | 8 | 5 | 0 | 2,080 | | 1.00 | 32,136.00 | |
| 21 | Business Office | Schmidt, Lisa | 2/18/2008 | 1/1/2014 | 23.97 | 0.72 | 25.41 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 51,353.33 | |
| 22 | Payroll / Apartment Adm Asst | Mertz, Wendy | 4/1/2012 | 1/1/2014 | 15.45 | 0.46 | 16.38 | 0% | 8 | 5 | 0 | 2,080 | | 1.00 | 32,136.00 | |
| 23 | Receptionist - 16 hrs day 7 days per week | | 1/1/2012 | 1/1/2014 | 9.50 | 0.29 | 10.07 | 3% | 16 | 7 | 1 | 6,048 | | 2.91 | 59,179.68 | |
| 24 | APARTMENT ALLOCATION ADMINISTRATION | HOLLOWAY/MERTZ | 50.000 | | | | | | | | | | | | 50,000.00 | |
| 25 | Administration: | | | Mkt - $ 3500 bonus per month | | | - | | | | | 18,528 | | 8.91 | 443,515.01 | 420,128.84 |
| 26 | | | | | | | | | | | | | | | | 9.50 |
| 27 | Nursing Administration: | | | | | | | | | | | | | | | |
| 28 | DON - RN | Harrell, Imogene | 1/19/2009 | 1/1/2014 | 34.00 | 1.02 | 36.04 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 72,841.60 | |
| 29 | MDS Coordinator LPN | McGee, Theresa | 8/9/2008 | 1/1/2014 | 28.39 | 0.85 | 30.09 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 60,822.74 | |
| 30 | ADON | Strubhart, Jane | 2/17/2011 | 1/1/2014 | 31.11 | 0.93 | 32.98 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 66,650.06 | |
| 31 | Educator/PM Supervisor | Courtland, Marie | 1/13/2010 | 1/1/2014 | 23.00 | 0.69 | 23.80 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 49,275.26 | |
| 32 | Cen Supply / Staffing Coord | Goodman, Nichole | 10/18/2017 | 1/1/2014 | 10.30 | 0.31 | 10.92 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 22,066.72 | |
| 33 | Medical Records | Retha Connors | 2/9/2002 | 1/1/2014 | 11.29 | 0.34 | 11.97 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 24,187.70 | |
| 34 | Nursing Admin | | | | | | | | | | | 12,480 | | 6.00 | 295,844.02 | 287,247.45 |
| 35 | | | | | | | | | | | | | | | | 6.00 |
| 36 | PROFESSIONAL STAFFING - ICF/SC | | | | | | | | | | | | | | | |
| 37 | 3 for SNF/ICF Nights - 1 FOR MEDICARE - 0 SHELTER NIGHTS = 4 STAFF | 4 for SNF/ICF Eve - 1 FOR MEDICARE - 1 SHELTER EVENINGS = 6 STAFF | 4 for SNF/ICF Days - 1 FOR MEDICARE - 1 SHELTER = 6 STAFF | | 23.40 | | | | | | | | | | | |
| 38 | RN PT | Cotter, Nancy | 11/10/2006 | 1/1/2014 | 24.50 | 0.75 | 26.39 | 3% | 5 | 3 | 0 | 1,248 | | 0.60 | 32,007.46 | |
| 39 | RN PM Supervisor | OPEN | 1/1/2013 | 1/1/2014 | 22.50 | 0.68 | 23.85 | 3% | 8 | 7 | 1 | 3,024 | | 1.45 | 70,081.20 | |
| 40 | RN | Gelin, Sherlyne | 4/22/2010 | 1/1/2014 | 20.50 | 0.62 | 21.73 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 45,605.40 | |
| 41 | RN PT | Pearce, Joyce | 9/29/2009 | 1/1/2014 | 24.19 | 0.73 | 25.64 | 3% | 5 | 2 | 0 | 832 | | 0.40 | 20,729.36 | |
| 42 | RN PM Supervisor PT | OPEN | 1/1/2013 | 1/1/2014 | 20.50 | 0.62 | 20.50 | 3% | 8 | 7 | 1 | 3,024 | | 1.45 | 63,851.76 | |
| 43 | RN FT | Taylor, Tracy | 8/4/1997 | 1/1/2014 | 24.19 | 0.73 | 25.64 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 53,817.91 | |
| 44 | REGISTERED NURSE | | | | | | | | | | | 12,448 | | 5.98 | 286,095.59 | 100,846.48 |
| 45 | | | | | | | | | | | | | | | | 3.99 |
| 46 | | | | | | | | | | | | | | | | |
| 47 | LPN PT | Blake, Bridget | 7/21/2011 | 1/1/2014 | 18.03 | 0.54 | 19.11 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 40,113.14 | |
| 48 | LPN | Brown, Brenda | 7/21/2011 | 1/1/2014 | 18.57 | 0.56 | 19.68 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 41,314.54 | |
| 49 | LPN Evening | Cozzens, Lillis | 6/11/2007 | 1/1/2014 | 19.13 | 0.57 | 20.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 42,560.42 | |
| 50 | LPN | Howard, Kathleen | 2/17/2011 | 1/1/2014 | 18.00 | 0.54 | 19.08 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 40,046.40 | |
| 51 | LPN Night PT | Johnson, LaTina | 5/13/2011 | 1/1/2014 | 18.57 | 0.56 | 19.68 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 41,314.54 | |
| 52 | LPN PT | Key, Lurlia | 11/19/2007 | 1/1/2014 | 19.13 | 0.57 | 20.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 42,560.42 | |
| 53 | LPN | Lane, Christine | 2/24/2009 | 1/1/2014 | 18.57 | 0.56 | 19.68 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 41,314.54 | |
| 54 | LPN | OPEN | 1/1/2013 | 1/1/2014 | 17.50 | 0.53 | 18.55 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 38,934.00 | |
| 55 | LPN PT | Sarkesian, Patricia | 3/17/2011 | 1/1/2014 | 17.50 | 0.53 | 18.55 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 38,934.00 | |
| 56 | LPN Evening | Shepherd, Jacqueline | 7/15/2008 | 1/1/2014 | 20.29 | 0.61 | 21.51 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 45,141.19 | |
| 57 | | Surber, Betty | 6/5/1983 | 1/1/2014 | 20.29 | 0.61 | 21.51 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 17,383.72 | |
| 58 | LPN PT | Tourjee, Darla | 8/26/2010 | 1/1/2014 | 19.13 | 0.57 | 20.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 42,560.42 | |
| 59 | LPN PT | Kersha-Mattingly, David | 1/1/2012 | 1/1/2014 | 18.03 | 0.54 | 19.11 | 3% | 8 | 3 | 0 | 1,248 | | 0.60 | 23,176.48 | |
| 60 | LPN PT | OPEN | 1/1/2013 | 1/1/2014 | 17.50 | 0.53 | 18.55 | 3% | 8 | 10 | 1 | 4,320 | | 2.08 | 77,868.00 | |
| 61 | Shelter Care - LPN | Holtum, Martha - DAY | 9/26/1994 | 1/1/2014 | 20.29 | 0.61 | 21.51 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 45,141.19 | |
| 62 | Shelter Care PT | OPEN | 1/1/2013 | 1/1/2014 | 18.50 | 0.56 | 19.61 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 15,853.76 | |
| 63 | Nursing - Professional Staff | | | | - | | - | | | | | 33,152 | | 15.94 | 634,270.77 | 548,869.46 |
| 64 | | | | | | | | | | | | | | 21.92 | 920,317 | 14.03 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | | | | | 2012 | 2013 | 2014 | | | | | | | # of FTEs | Salary $$ | Salary $$$ |
| 12 | | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014 | 2014 | 2013 |
| 13 | | Names and Positions | | Date | Wage | inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 65 | 3 days, 3 eves, 2 nights / SNFICF neighborhood CARE PARTNERS | 2 days, 1 evenings, 1 nights for Sheltered Care | | | | | | | | | | | | | | |
| 66 | CARE PARTNERS | OPEN | 1/1/2012 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 40,713.84 | |
| 67 | Neighborhood Care Partners | Bess, Kevin | 9/16/2010 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 40,713.84 | |
| 68 | 3 for days 5 neighborhoods | Campbell, Cassandra | 2/10/2009 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 41,915.23 | |
| 69 | 3 for evenings - 5 neighborhoods | Coker, Woodsie | 6/23/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 41,915.23 | |
| 70 | 2 for nights - 5 neighborhoods | Coleman, Jamyra | 6/16/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 40,713.84 | |
| 71 | | Conners, Retha - Day | 2/9/2002 | 1/1/2014 | 10.64 | 0.32 | 11.28 | 3% | 16 | 5 | 1 | 4,320 | | 2.08 | 47,343.74 | |
| 72 | 8 staff for 5 neighborhood 7 days/wk | Custer, Yvonne | 3/5/2008 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 73 | 56 | Dancy, Laverna PT | 10/2/2009 | 1/1/2014 | 9.99 | 0.30 | 10.59 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,225.75 | |
| 74 | Shelter Care | Dean, Jacques - Day | 1/13/2003 | 1/1/2014 | 10.19 | 0.31 | 10.80 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,670.71 | |
| 75 | 1 for days Shelter | Dozier, Marion | 8/10/2007 | 1/1/2014 | 9.99 | 0.30 | 10.59 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,225.75 | |
| 76 | 1 for evenings Shelter | Fiech, Debra - Day | 9/21/1987 | 1/1/2014 | 12.83 | 0.38 | 13.60 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 28,544.18 | |
| 77 | 1 for evenings Shelter | Garvin, Carlos | 5/12/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 78 | | Gibbs, juliana | 6/16/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 79 | | Gibson, Krissy | 10-15-2009 | 1/1/2014 | 10.19 | 0.31 | 10.80 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,670.71 | |
| 80 | 3 staff for all shelter | Glover, Carolyn - Evening | 5/22/2003 | 1/1/2014 | 10.41 | 0.31 | 11.03 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,160.17 | |
| 81 | 4.2 | Monroe, Nora | 11/3/1997 | 1/1/2014 | 10.00 | 0.30 | 10.60 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,248.00 | |
| 82 | 60.2 | Harding, Erma - Eve/Night | 2/14/1980 | 1/1/2014 | 10.55 | 0.32 | 11.18 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,471.64 | |
| 83 | | Horne, Viola - Day | 10/28/1996 | 1/1/2014 | 10.69 | 0.32 | 11.33 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,783.11 | |
| 84 | | Jackson, Sally | 7/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 85 | | Kaemmerer, Donna - Night | 8/15/1975 | 1/1/2014 | 12.69 | 0.38 | 13.45 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 28,232.71 | |
| 86 | | open | 1/1/2012 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 87 | | Killingsworth, Shirley | 3/8/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 88 | | Lewis, Kurashu | 2/9/2007 | 1/1/2014 | 9.85 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.25 | |
| 89 | | OPEN | 10/16/2009 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 90 | | Love, Loretta - Day | 1/29/1991 | 1/1/2014 | 11.05 | 0.33 | 11.71 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 24,584.04 | |
| 91 | | Mayweather, Gloria - Day | 4/9/1996 | 1/1/2014 | 11.45 | 0.34 | 12.14 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 25,473.96 | |
| 92 | | Miller, Patricia - Day | 1/2/1996 | 1/1/2014 | 10.29 | 0.31 | 10.91 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,893.19 | |
| 93 | | Miller, Rochelle - Day PT | 11/21/2002 | 1/1/2014 | 10.29 | 0.31 | 10.91 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,893.19 | |
| 94 | | Muhammad, Nikka | 4/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 95 | | Odom, Rossi | 2/12/2009 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 96 | | Okorie, Lilian | 9/19/2008 | 1/1/2014 | 9.99 | 0.30 | 10.59 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,225.75 | |
| 97 | | Poe, Yolanda | 3/4/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 98 | | Porter, Lakrisha | 9/1/2010 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 99 | | Reed, Stephanie | 7/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 100 | | Rhodes, Jamie | 4/1/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 101 | | Robinson, Lisette | 1/18/2010 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,957.62 | |
| 102 | | Ross, Alice - Night | 8/2/1993 | 1/1/2014 | 10.58 | 0.32 | 11.21 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,538.18 | |
| 103 | | Scrivner, Jamie | 1/31/2008 | 1/1/2014 | 9.97 | 0.30 | 10.57 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,181.26 | |
| 104 | | Streeter, Krica | 3/27/2009 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 105 | | Suggs, Tamia | 3/13/2009 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 106 | | Towns Patton, Peggy Evening | 7/13/2007 | 1/1/2014 | 10.29 | 0.31 | 10.91 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,893.19 | |
| 107 | | Townsend, Barbar | 1/12/2009 | 1/1/2014 | 9.85 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.28 | |
| 108 | | Warr, Stephanie | 9/13/2009 | 1/1/2014 | 9.85 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.28 | |
| 109 | | Winkelman, Beth - Day | 5/19/1987 | 1/1/2014 | 10.69 | 0.32 | 11.33 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,783.11 | |
| 110 | | Gouldier, Sherrod | 4/21/2011 | 1/1/2014 | 9.15 | 0.27 | 9.70 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,356.92 | |
| 111 | | Jarret, Caroline | 9/7/2011 | 1/1/2014 | 9.65 | 0.29 | 9.65 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,469.31 | |
| 112 | | Russell, Brittany | 2/10/2011 | 1/1/2014 | 9.65 | 0.29 | 9.65 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,469.31 | |
| 113 | | Trannon, Whitney | 5/1/2011 | 1/1/2014 | 9.65 | 0.29 | 9.65 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,469.31 | |
| 114 | | OPEN | | 1/1/2014 | 9.15 | 0.27 | 9.15 | 3% | 8 | 35 | 1 | 6,480 | | 3.12 | 61,070.74 | |
| 115 | Overtime Factor 2% | | | | - | | - | | | | | | | | 35,566.25 | |
| 116 | CNA NURSING STAFF | | | | | | | | | | | 123,120 | | 59.19 | 1,283,157.35 | 1,134,422.33 |
| 117 | | | | | - | | - | | | | | | | | | 50.18 |
| 118 | TOTAL NURSING DEPT | | | | | | | | | | | 181,200 | | 87.12 | 2,499,318.72 | 2,170,525.72 |
| 119 | | | | | | | | | | | | | | | | 74.20 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | | | | | 2013 | 2013 | 2014 | | | | | | | # of FTEs | Salary $$ | Salary $$$ |
| 12 | | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014 | 2014 | 2013 |
| 13 | | Names and Positions | | Date | Wage | inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 123 | DIETARY DIVISON | | | | | | | | | | | | | | | |
| 124 | Dietary / Hospitality Supervisor | Sonia Mazanec | 9/18/2000 | 1/1/2014 | 25.86 | 0.78 | 27.41 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 55,402.46 | |
| 126 | 3 Cooks and 2.8 Cleaning and Delivery | Blackmon, Foster | 8/25/1997 | 1/1/2014 | 10.44 | 0.31 | 11.07 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,226.91 | |
| 127 | | Burnett, Sonya | 10/3/2008 | 1/1/2014 | 10.72 | 0.32 | 11.36 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,849.86 | |
| 128 | 1+1+8.4+8.4+8.4+2.8+2.8 = 29.2 fte | Carmon, Bonnie | 2/10/1986 | 1/1/2014 | 11.00 | 0.33 | 11.66 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 24,472.80 | |
| 129 | | Dear, Rodney | 5/20/2010 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,944.02 | |
| 130 | 2 supervisor 7 days per week = 1+1 | Gillespie, Lashanda | 5/7/2002 | 1/1/2014 | 10.46 | 0.31 | 11.09 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 23,271.41 | |
| 131 | 6 Neighborhoods * 2.8 fte = 8.4 +2.4 fte | Hahn, Alvin | 7/23/2010 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,944.02 | |
| 132 | Day/Evening Cook (2) = 4.8 | Holmes, Carlette | 4/11/2002 | 1/1/2014 | 9.66 | 0.29 | 10.24 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,491.57 | |
| 133 | Cleaning and Delivery and Laundry = 2.8+2.8 | Johnson, Felicia | 10/23/2000 | 1/1/2014 | 9.36 | 0.28 | 9.92 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 8,021.15 | |
| 134 | 29.2 | Lacey, Keyonda | 6/24/2011 | 1/1/2014 | 8.76 | 0.26 | 9.29 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,506.97 | |
| 135 | HOSPITALITY STAFF | Long, Walter | 1/29/2009 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,623.90 | |
| 136 | | Melton, Erica PT | 7/16/2009 | 1/1/2014 | 9.02 | 0.27 | 9.56 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,729.73 | |
| 137 | Rov Srv / Hospitality supervisor 1.0 | Nicherson, Angela | 2/4/2010 | 1/1/2014 | 9.02 | 0.27 | 9.56 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 29,067.70 | |
| 138 | common areas = 3.4 | Rhodes, Christopher | 12/9/2008 | 1/1/2014 | 13.51 | 0.41 | 14.32 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 30,057.05 | |
| 139 | laundry =2.8 | Smith, Samantha | 1/29/2009 | 1/1/2014 | 9.85 | 0.30 | 10.44 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,914.28 | |
| 140 | floor care =1.4 | OPEN | 1/1/2013 | 1/1/2014 | 8.75 | 0.26 | 9.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 19,467.00 | |
| 141 | | Venetta, Deborah | 1/21/2009 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 20,623.90 | |
| 142 | | Venetta, Nicci | 9/15/2009 | 1/1/2014 | 9.02 | 0.27 | 9.56 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,729.73 | |
| 143 | | Weems, Yolanda | 3/20/2000 | 1/1/2014 | 9.97 | 0.30 | 10.57 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,181.26 | |
| 144 | | Weidaver, Cynthia | 10/31/1977 | 1/1/2014 | 11.40 | 0.34 | 12.08 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 25,362.72 | |
| 146 | Overtime Factor 2% | | | | | | | | | | | | | | 6,869.72 | |
| 147 | DIETARY NURSING FACILITY | | | | - | | - | | | | | 35,152 | | 16.90 | 405,758.23 | 395,427.08 |
| 148 | | | | | | | | | | | | | | | | 16.98 |
| 149 | TOTAL DIETARY SALARIES | | | | | | | | | | | | | 16.90 | 405,758.23 | |
| 151 | | | | | | | | | | | | | | | | |
| 152 | ENV. SRVC. - HOUSEKEEPING AND LAUNDRY | | | | | | | | | | | | | | | |
| 153 | ENVIRONMENTAL SUPERVISOR | Newton, Dishe | 7/26/1976 | 1/1/2014 | 18.94 | | 19.51 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 40,577.06 | |
| 154 | | | | | | | | | | | | | | | | |
| 155 | KEEP LAUNDRY AT 2.8 | LAUNDRY EVENING | 2/22/1995 | 1/1/2014 | 9.71 | 0.29 | 10.29 | 3% | 8 | 7 | 0 | 2,912 | | 1.40 | 29,123.79 | |
| 156 | | LAUNDRY NIGHTS | 8/23/1994 | 1/1/2014 | 9.42 | 0.28 | 9.99 | 3% | 8 | 7 | 0 | 2,912 | | 1.40 | 25,253.97 | |
| 157 | | | | | | | | | | | | | | | | |
| 158 | | Barneko, Barbara Evening | 10/19/1994 | 1/1/2014 | 9.77 | 0.29 | 10.36 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,736.70 | |
| 159 | | OPEN | 1/1/2014 | 1/1/2014 | 8.50 | 0.26 | 9.01 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,284.16 | |
| 160 | | Joffray, Barbara | 5/14/1991 | 1/1/2014 | 9.70 | 0.29 | 10.28 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,580.56 | |
| 161 | | OPEN | 11/14/2012 | 1/1/2014 | 8.50 | 0.26 | 9.01 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 18,910.80 | |
| 162 | | Povolish, Josephine | 8/7/1999 | 1/1/2014 | 9.61 | 0.29 | 10.19 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,380.33 | |
| 163 | | Schaefer, Dianna | 1/2/1985 | 1/1/2014 | 10.00 | 0.30 | 10.60 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,248.00 | |
| 164 | | Thomas, Mary | 6/12/1995 | 1/1/2014 | 9.52 | 0.29 | 10.09 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 21,180.10 | |
| 165 | | Tobin, Tammy | 3/12/1990 | 1/1/2014 | 9.93 | 0.30 | 10.53 | 3% | 8 | 5 | 1 | 2,160 | | 1.04 | 22,092.26 | |
| 166 | | Wilson, Angela | 11/24/2010 | 1/1/2014 | 8.76 | 0.26 | 9.29 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,506.97 | |
| 167 | LAUNDRY AND HSPK - NURSING | | | | - | | - | | | | | 24,688 | | 11.87 | 261,874.39 | 291,694.43 |
| 168 | | | | | | | | | | | | | | | | 13.97 |
| 169 | Maintenance Supervisor | Quellmalz, Al | 2/16/1998 | 1/1/2014 | 20.69 | | 21.31 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 44,326.25 | |
| 170 | Maintenance Assistant | Timmons, Larry | 11/1/2007 | 1/1/2014 | 15.52 | | 15.99 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 33,250.06 | |
| 171 | Staff Maintenance | Sumnler, James | 4/1/2010 | 1/1/2014 | 12.02 | | 12.38 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 25,751.65 | |
| 172 | APARTMENT MAINTENANCE ALLOCATION | .5 FTE = $ 28,416 | | | | | | | | | | | | NOT IN TOTALS | 28,416.00 | |
| 173 | MAINTENANCE - | | | | - | | - | | | | | 6,240 | | 3.00 | 103,327.95 | 100,328.59 |
| 174 | | | | | | | | | | | | | | | | 3.00 |
| 175 | 12 hr per day Security | | | | - | | - | | | | | | | | | |
| 176 | Security | Kramer, Dominic | 7/30/2008 | 1/1/2014 | 11.18 | 0.34 | 11.85 | 3% | 12 | 4 | 1 | 2,592 | | 1.25 | 29,843.39 | |
| 177 | Security | Sarkesian, Blaise | 7/2/2012 | 1/1/2014 | 10.55 | 0.33 | 11.18 | 3% | 12 | 3 | 1 | 1,944 | | 0.93 | 21,124.48 | |
| 178 | SECURITY | | | | - | | - | | | | | 4,536 | | 2.18 | 50,967.88 | 33,876.26 |
| 179 | | | | | | | | | | | | | | | | 1.48 |
| 180 | Social Services Director | Smith, Kelly Pannier | 11/23/2010 | 1/1/2014 | 16.03 | 0.48 | 16.99 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 34,342.67 | |
| 181 | | | | | | | | | | | | | | | | |
| 182 | SOCIAL SERVICE | | | | - | | - | | | | | 2,080 | | 1.00 | 34,342.67 | 33,335.74 |
| 183 | | | | | | | | | | | | | | | | 1.00 |
| 184 | Activity Director | BerberichPamela | 1/31/2008 | 1/1/2014 | 13.93 | 0.42 | 14.77 | 0.03 | 8 | 5 | 0 | 2,080 | | 1.00 | 29,851.64 | |
| 185 | | BraunJoanne | 10/6/2011 | 1/1/2014 | 8.76 | 0.26 | 9.28 | 3% | 7.5 | 5 | 0 | 1,950 | | 0.94 | 17,584.42 | |
| 186 | | NeumeyerDarlene | 10/13/2011 | 1/1/2014 | 8.76 | 0.26 | 9.28 | 3% | 7.5 | 5 | 0 | 1,950 | | 0.94 | 17,584.42 | |
| 187 | | RauMiriam Therese | 7/7/2006 | 1/1/2014 | 8.76 | 0.26 | 9.29 | 3% | 6 | 4 | 0 | 1,248 | | 0.60 | 11,260.45 | |
| 188 | | | | | - | | - | | | | | | | | - | |
| 189 | Activities - Nursing Home | | | | | | | | | | | 7,228 | | 3.48 | 76,288.93 | 75,043.70 |
| 190 | | | | | | | | | | | | | | | | 3.48 |
| 191 | TOTALS | | | | | | | | | | | 398,788 | | 143.66 | 4,084,943 | 3,695,371 |
| 192 | | | | | | | | | | | | kppd | | 6.82 | | 132.00 |

| | A | B | C | D | E | F | G | J | K | L | M | N | O | P | AN | AO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | | | | | 2012 | 2013 | 2014 | | | | | | | # of FTEs | Salary $$ | Salary $$$ |
| 12 | | | Hire Date | Raise | Base | | Hourly | Raise | Hrs | Days | Vac | Hours | | 2014- | 2014 | 2013 |
| 13 | | Names and Positions | | Date | Wage | Inc | Wage | 3% | per day | per wk | | per year | | Jan | BUDGET | |
| 193 | | | | | | | | | | | | | | | | |
| 194 | RESIDENT ASSISTANTS | | | | | | | | | | | | | | | |
| 195 | | | | | | | | | | | | | | | | |
| 196 | ADMINISTRATION | | | | | | | | | | | | | | | |
| 197 | Apt Manager | Allocation of $ 50,000 | | | | | | | | | | | | | | |
| 198 | | | | | | | | | | | | | | | | |
| 199 | ADMINISTRATION | | | | | | | | | | | | | | | |
| 200 | | | | | | | | | | | | | | | | |
| 201 | Dietary Cooks/Aides - APTS | COOK | 1/1/2012 | 1/1/2014 | 16.00 | 0.48 | 16.96 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 34,278.40 | |
| 202 | 2 cooks = 2.8 | COOK | 1/1/2012 | 1/1/2014 | 14.00 | 0.42 | 14.84 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 29,993.60 | |
| 203 | Dishwasher = 1.4 | DISHWASHER | 1/1-7012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 19,281.60 | |
| 204 | Server = 2.8 | SERVER | 1/1/2012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 7 | 0 | 2,912 | | 1.40 | 26,994.24 | |
| 205 | Manager = .2 | SERVER | 1/1/2012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 19,281.60 | |
| 206 | 7.2 | SWING worker | 1/1/2012 | 1/1/2014 | 9.00 | 0.27 | 9.54 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,712.64 | |
| 207 | | | | | | | | | | | | | | | | |
| 208 | | | | | | | | | | | | | | | | |
| 209 | DIETARY APARTMENTS | | | | | | | | | | | 12,064 | | 5.80 | 137,543.68 | 104,496.14 |
| 210 | | | | | | | | | | | | | | | | 5.00 |
| 211 | Rskp Apartments - light laundry | Ball, Doris | 4/24/1985 | 1/1/2014 | 11.36 | 0.34 | 12.04 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 24,337.66 | |
| 212 | 2 per day, WR float with ICF | Holcumb, Marcia | 1?8.2010 | 1/1/2014 | 9.27 | 0.28 | 9.83 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 19,860.05 | |
| 213 | | | | | | | | | | | | | | | | |
| 214 | | | | | | | | | | | | | | | | |
| 215 | HOUSEKEEPING APARTMENTS | | | | | | | | | | | 4,160 | | 2.00 | 44,197.71 | 41,438.09 |
| 216 | | | | | | | | | | | | | | | | 2.00 |
| 217 | Apt. Maintenance = .5 fte | $ 28,516 Allocation | | | | | | | | | | | | | | |
| 218 | | | | | | | | | | | | | | | | 2.00 |
| 219 | Activities - Apts | BrandkampPaula | 5/24/2012 | 1/1/2014 | 9.76 | 0.26 | 9.39 | 3% | 8 | 2 | 0 | 832 | | 0.40 | 7,506.97 | |
| 220 | Activities - Apts OPEN TO 1 FTE | ClarkeMary Frances | 12/28/2011 | 1/1/2014 | 9.48 | 0.28 | 10.05 | 3% | 8 | 5 | 0 | 2,080 | | 1.00 | 20,309.95 | |
| 221 | ACTIVITIES - APARTMENTS | | | | | | | | | | | 2,912 | | 1.40 | 27,816.92 | 26,942.34 |
| 222 | | | | | | | | | | | | | | | | 1.40 |
| 223 | TOTALS | | | | | | | | | | | 19,136.00 | | 9.20 | 288,072.71 | 175,019.47 |
| 224 | | | | | | | | | | | | hppd | | 1.05 | | 8.40 |
| 225 | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | St. Paul's Home in Belleville | | | | | | | | | | | | | | | | |
| 2 | INDEPENDENT LIVING ONLY | | | | | | | | | | | | | | | | |
| 3 | SUPPORTING SCHEDULES | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | | August, Data Statistic | | 2013 Info Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | | | | | | | | | | | | | | | | | |
| 11 | Special Resident Services - Social Service/ Activities | | | | | | | | | | | | | | | | |
| 13 | Activities - Apt 50-8100-65-01 | | | 4,800 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 4,800.00 |
| 14 | SPECIAL SERVICES | | | 4,800 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 4,800.00 |
| 15 | | | | | | | | | | | | | | | | | |
| 16 | Marketing: | | | | | | | | | | | | | | | | |
| 18 | Marketing ILU 50-9110-01-01 | | | 12,000 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 36,000.00 |
| 19 | MARKETING | | | 12,000 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 3,000.00 | 36,000.00 |
| 20 | | | | | | | | | | | | | | | | | |
| 21 | Dietary: | | | | | | | | | | | | | | | | |
| 23 | Raw Food ILU 50-8200-70-01 | $ 4.75 | | 94,393 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 8,217.50 | 98,610.00 |
| 24 | Diet Sup ILU 50-8100-70-01 | $ 0.25 | | 4,968 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 432.50 | 5,190.00 |
| 25 | | $ 5.00 | | 99,360 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 103,800.00 |
| 26 | | | | | | | | | | | | | | | | | |
| 27 | DIETARY | | | 99,360 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 8,650.00 | 103,800.00 |
| 28 | Laundry - Nursing only | | | | | | | | | | | | | | | | |
| 29 | Bldg Sup - ICF/SC 50-8100-75-01 | 0.08 | | 6,451 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 6,510.00 |
| 32 | HSKP / LAUNDRY | 0.35 | | 6,451 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 542.50 | 6,510.00 |
| 33 | | | | | | | | | | | | | | | | | |
| 34 | Plant Operation & Maintenance: | | | | | | | | | | | | | | | | |
| 36 | Bldg Rep & Main 50-8600-80-01 | | | 24,000 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 24,000.00 |
| 37 | Grounds ICF/SC 50-8610-80-01 | | | 3,600 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 38 | Supplies 50-8180-80-01 | | | 600 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 700.00 | 8,400.00 |
| 39 | Elevator ICF/SC 50-8670-80-01 | | | 5,400 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 40 | Trash - ICF /SC 50-8780-80-01 | | | 2,400 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 2,400.00 |
| 41 | Pest control - ICF/SC 50-8770-80-01 | | | 1,800 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 1,800.00 |
| 42 | Vehicle main- ICF/SC 50-9410-01-01 | | | 6,000 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 43 | WINDOW WASHING | | | | | | | | | | | | 2,000.00 | | | | 2,000.00 |
| 44 | CABLE 50-8720-01-01 | | | 12,000 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 600.00 | 7,200.00 |
| 45 | Electric / Gas ICF/SC 50-8700-80-01 | 120,000.00 | $ 1.76 | 210,906 | 10,000.00 | 10,000.00 | 10,000.00 | 18,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | 120,000.00 |
| 47 | Sewer / Water ICF/SC 50-8710-80-01 | 12,000.00 | $ 0.18 | 13,761 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 12,000.00 |
| 48 | 68 000 sq. ft | 132,000.00 | $ 1.94 | | | | | | | | | | | | | | |
| 49 | MAINTENANCE | | | 288,667 | 16,400.00 | 16,400.00 | 16,400.00 | 18,400.00 | 16,400.00 | 16,400.00 | 16,400.00 | 16,400.00 | 18,400.00 | 16,400.00 | 16,400.00 | 16,400.00 | 200,800.00 |
| 50 | | | | | | | | | | | | | | | | | |
| 51 | Administration & General: | | | | | | | | | | | | | | | | |
| 52 | Consultant fees/purchased services | | | | | | | | | | | | | | | | |
| 53 | Legal Campus 50-9410-01-01 | | | - | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 54 | Auditing - ALU 50-9630-01-01 | | | 6,060 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 55 | ADP - ICF/SC 50-9293-01-01 | | | 1,800 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 56 | | | | | | | | | | | | | | | | | |
| 57 | ICF Management Fee 50-9600-01-01 | | | 64,476 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 5,363.00 | 64,356.00 |
| 59 | Inc. Policies - All ICF/SC 50-9650-01-01 | | | 43,920 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 4,500.00 | 54,000.00 |
| 60 | | | | | | | | | | | | | | | | | |
| 61 | PROFESSIONAL FEES | | | 116,216 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 10,563.00 | 126,756.00 |
| 62 | | | | | | | | | | | | | | | | | |
| 63 | Bank fees 50-9510-01-01 | | | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 64 | Telephone - ICF/SC 50-8750-01-01 | | | 1,800 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 1,800.00 |
| 65 | Dues & Sub ICF/SC 50-9550-01-01 | | | 1,620 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 1,560.00 |
| 66 | Office sup ICF/SC 50-8150-01-01 | | | 300 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 67 | Comp support NH 50-8901-01-01 | | | 600 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 68 | Postage ICF 50-9330-01-01 | | | - | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 180.00 |
| 69 | Mileage 50-9410-01-01 and 02 | | | - | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 70 | Recruitment - ICF/SC 50-9360-01-01 | Hsp B, TB, Flu | | 600 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 73 | | | | 4,920 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 545.00 | 6,540.00 |
| 74 | ADMINISTRATIVE EXPENSE | | | 131,135.63 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 11,108.00 | 133,296.00 |
| 75 | | | | | | | | | | | | | | | | | |
| 76 | Payroll Taxes & Employee Benefits | | | | | | | | | | | | | | | | |
| 78 | Payroll taxes ICF/SC 50-9100-01-01 | 7.65% | | 18,714 | 1,857.02 | 1,795.36 | 1,857.02 | 1,795.36 | 1,857.02 | 1,795.36 | 1,857.02 | 1,857.02 | 1,795.36 | 1,857.02 | 1,857.02 | 1,857.02 | 22,037.56 |
| 79 | Workmen's comp - ICF/SC 50-9110-01-01 | | | 8,455 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 80 | Unemployment - ICF/SC 50-9130-01-01 | | | 4,800 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 4,800.00 |
| 81 | EI Inc Hours 50-9200-01-01 | 5% | | 35,350 | 1,207.81 | 1,207.81 | 1,207.81 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 15,852.79 |
| 83 | PAYROLL TAXES AND BENEFITS | | | 67,319 | 4,214.83 | 4,153.17 | 4,214.83 | 4,304.17 | 4,365.83 | 4,304.17 | 4,365.83 | 4,365.83 | 4,304.17 | 4,365.83 | 4,365.83 | 4,365.83 | 51,690.35 |
| 86 | Fixed Expenses: | | | | | | | | | | | | | | | | |
| 87 | Existing Depreciation | | | 150,000 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 150,000.00 |
| 88 | | | | | | | | | | | | | | | | | |
| 89 | DEPRECIATION | | | 150,000 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 12,500.00 | 150,000.00 |
| 90 | | | | | | | | | | | | | | | | | |
| 91 | Cost of Issuance | 1,421,415.00 | 10.92% | | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 3,880.11 |
| 94 | Amortization | | | - | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 323.34 | 3,880.11 |
| 95 | Existing Debt with New Financing | 1,122,483.15 | 10.14% | 54,000 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 113,818.69 |
| 97 | | | | | | | | | | | | | | | | | |
| 98 | INTEREST | | | 54,000 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 9,484.89 | 113,818.69 |
| 99 | | | | | | | | | | | | | | | | | |
| 100 | TOTAL OPERATING EXPENSE | | | 499,744 | 44,315.33 | 44,253.67 | 44,315.33 | 46,404.67 | 44,466.33 | 44,404.67 | 44,466.33 | 44,466.33 | 46,404.67 | 44,466.33 | 44,466.33 | 44,466.33 | 536,896.33 |
| 101 | Fixed expense | | | 204,000 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 22,308.23 | 267,698.80 |
| 102 | TOTAL EXPENSES FOR INDEPENDENT APARTMENTS | | | 703,744 | 66,623.56 | 66,561.90 | 66,623.56 | 68,712.91 | 66,774.57 | 66,712.91 | 66,774.57 | 66,774.57 | 68,712.91 | 66,774.57 | 66,774.57 | 66,774.57 | 804,595.13 |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | St. Paul's Home in Belleville | | | | | | | | | | | | | | | | |
| 2 | SHELTER CARE ONLY | | | | | | | | | | | | | | | | |
| 3 | SUPPORTING SCHEDULES | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | | | Annual Data Statistic | 2013 Info Budget | | | | | | | | | | | | | |
| 9 | | | | | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | INPUT FIELD | | | | | | | | | | | | | | | | |
| 11 | Clinical: | | PPD VALUES | | | | | | | | | | | | | | |
| 13 | Med Sup - non chargeable 50-7100-35-02 | | | | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 2,400.00 |
| 14 | Pharmacy Consult 50-7810-35-02 | | 5% | 422 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 32.18 | 386.10 |
| 15 | Medical Director 50-7300-35-02 | | 5% | 315 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 360.00 |
| 16 | Clinical Supplies 50-8100-35-02 | | 5% | 1,080 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 19 | SHELTER CARE ONLY AT 5% | | | 1,817 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 3,746.10 |
| 22 | | | | | | | | | | | | | | | | | |
| 23 | CLINICAL EXPENSES - SHELTER CARE & MEMORY CARE | | | 1,817 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 312.18 | 3,746.10 |
| 24 | | | | | | | | | | | | | | | | | |
| 25 | Special Resident Services - Social Service / Activities | | | | | | | | | | | | | | | | |
| 26 | Activities - Shelter & Memory Care 50-8100-65-02 | | 5% | 360 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 450.00 |
| 27 | Resident Background Check 50-9370-01-02 | | 5% | 75 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 90.00 |
| 28 | | | | | | | | | | | | | | | | | |
| 29 | SPECIAL SERVICES AT 5% | | | 435 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 540.00 |
| 30 | | | | | | | | | | | | | | | | | |
| 31 | Marketing: | | | | | | | | | | | | | | | | |
| 32 | Marketing -NRSG 50-9710-01-02 | | 25% | 7,500 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 33 | | | | | | | | | | | | | | | | | |
| 34 | MARKETING AT 25% | | | 7,500 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 750.00 | 9,000.00 |
| 35 | | | | | | | | | | | | | | | | | |
| 36 | Dietary: | | | | | | | | | | | | | | | | |
| 37 | | | | | | | | | | | | | | | | | |
| 38 | Raw Food -ICF/SC 50-8200-70-02 | | 6.50 | 51,538 | 4,030.00 | 3,640.00 | 4,030.00 | 3,900.00 | 4,030.00 | 3,900.00 | 4,030.00 | 4,030.00 | 3,900.00 | 4,030.00 | 3,900.00 | 4,030.00 | 47,450.00 |
| 39 | EE meals Food 50-8200-70-02 | | | | | | | | | | | | | | | | |
| 40 | Diet Sup ICF/SC 50-8100-70-02 | | 0.11 | | 68.20 | 61.60 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 803.80 |
| 41 | Paper Products 50-9350-70-02 | | 0.25 | | 155.00 | 140.00 | 155.00 | 150.00 | 155.00 | 150.00 | 155.00 | 155.00 | 150.00 | 155.00 | 150.00 | 155.00 | 1,825.00 |
| 42 | Chemicals 50-8300-70-02 | | 0.20 | | 124.00 | 112.00 | 124.00 | 120.00 | 124.00 | 120.00 | 124.00 | 124.00 | 120.00 | 124.00 | 120.00 | 124.00 | 1,460.00 |
| 43 | Dietician 50-8910-70-02 | | 5% | 480 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 480.00 |
| 44 | Nutritional - 50-8250-70-02 | | 5% | 420 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 420.00 |
| 45 | | | | | | | | | | | | | | | | | |
| 46 | DIETARY - PPD values | | 7.06 | 52,438 | 4,452.20 | 4,018.60 | 4,452.20 | 4,311.00 | 4,452.20 | 4,311.00 | 4,452.20 | 4,452.20 | 4,311.00 | 4,452.20 | 4,311.00 | 4,452.20 | 52,438.00 |
| 47 | | | | | | | | | | | | | | | | | |
| 48 | Laundry & Housekeeping | | | | | | | | | | | | | | | | |
| 49 | | | | | | | | | | | | | | | | | |
| 50 | Linen 50-8400-72-02 | | 0.10 | 6,205 | 62.00 | 56.00 | 62.00 | 60.00 | 62.00 | 60.00 | 62.00 | 62.00 | 60.00 | 62.00 | 60.00 | 62.00 | 730.00 |
| 51 | Laun Sup ICF/SC 50-8100-72-02 | | 0.13 | | 80.60 | 72.80 | 80.60 | 78.00 | 80.60 | 78.00 | 80.60 | 80.60 | 78.00 | 80.60 | 78.00 | 80.60 | 949.00 |
| 52 | Hskp Sup - ICF/SC 50-8100-75-02 | | 0.11 | | 68.20 | 61.60 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 68.20 | 66.00 | 68.20 | 66.00 | 68.20 | 803.80 |
| 53 | Paper Sup - Hskp 50-8350-75-02 | | 0.39 | | 241.80 | 218.40 | 241.80 | 234.00 | 241.80 | 234.00 | 241.80 | 241.80 | 234.00 | 241.80 | 234.00 | 241.80 | 2,847.00 |
| 54 | Chemicals 50-8300-75-02 | | 0.12 | | 74.40 | 67.20 | 74.40 | 72.00 | 74.40 | 72.00 | 74.40 | 74.40 | 72.00 | 74.40 | 72.00 | 74.40 | 876.00 |
| 55 | | | | | | | | | | | | | | | | | |
| 56 | HSKP / LAUNDRY - PPD values | | 0.85 | 6,205 | 527.00 | 476.00 | 527.00 | 510.00 | 527.00 | 510.00 | 527.00 | 527.00 | 510.00 | 527.00 | 510.00 | 527.00 | 6,205.00 |
| 57 | | | | | | | | | | | | | | | | | |
| 58 | Plant Operation & Maintenance: | | | | | | | | | | | | | | | | |
| 59 | | | | | | | | | | | | | | | | | |
| 60 | Bldg Rep & Main 50-8600-80-02 | | 5% | 3,300 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 6,000.00 |
| 61 | Grounds ICF /SC 50-8610-80-02 | | 5% | 300 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 360.00 |
| 62 | Supplies 50-8100-80-02 | | 5% | 30 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 3.75 | 45.00 |
| 63 | Elevator ICF/SC 50-8670-80-02 | | 5% | 420 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 64 | Trash - ICF /SC 50-8780-80-02 | | 5% | 600 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 62.50 | 750.00 |
| 65 | Pest control - ICF/SC 50-8770-80-02 | | 5% | 150 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 21.25 | 255.00 |
| 66 | Vehicle main- ICF/SC 50-9420-01-02 | | 5% | 90 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 180.00 |
| 67 | WINDOW WASHING | | | | | | | 1,000.00 | | | | | 1,000.00 | | | | 2,000.00 |
| 68 | CABLE 50-8720-01-02 | $ 12/month | | 2,880 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 240.00 | 2,880.00 |
| 69 | | | | | | | | | | | | | | | | | |
| 70 | Utilities at 20% | | | | | | | | | | | | | | | | |
| 71 | Electric / Gas ICF/SC 50-8700-80-02 | 85589 | $2.50 | 42,750 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 3,562.50 | 42,750.00 |
| 72 | Sewer / Water ICF/SC 50-8710-80-02 | | | | | | | | | | | | | | | | |
| 73 | | | | | | | | | | | | | | | | | |
| 74 | MAINTENANCE at 5% | | | 50,520.00 | 4,485.00 | 4,485.00 | 4,485.00 | 5,485.00 | 4,485.00 | 4,485.00 | 4,485.00 | 4,485.00 | 5,485.00 | 4,485.00 | 4,485.00 | 4,485.00 | 55,820.00 |
| 75 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 8 | | | Annual Data | 2013 Info | | | | | | | | | | | | | |
| 9 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 76 | Administration & General: | | | | | | | | | | | | | | | | - |
| 77 | Consultant fees/purchased services | | | | | | | | | | | | | | | | - |
| 78 | Legal Campus 50-9610-01-02 | | 5% | 1,500 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 1,200.00 |
| 79 | Auditing - ALU 50-9620-01-02 | | 5% | 1,600 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 1,500.00 |
| 80 | ADP - ICF/SC 50-9291-01-02 | | 5% | 780 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 900.00 |
| 81 | | | | | | | | | | | | | | | | | - |
| 82 | ICF Management Fee 50-9600-01-02 | 5% | | 43,070 | 3,658.00 | 3,304.00 | 3,658.00 | 3,540.00 | 3,658.00 | 3,540.00 | 3,658.00 | 3,658.00 | 3,540.00 | 3,658.00 | 3,540.00 | 3,658.00 | 43,070.00 |
| 83 | Gen 78,665 Prop 35,979 Auto 4,349+3315 Umbrella 7,661 D&O 4902.50 | 116,272 | 9,689.29 | | | | | | | | | | | | | | - |
| 84 | Ins. Policies - All ICF/SC 50-9650-01-02 | | 6,583.72 | 24,000 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 24,000.00 |
| 86 | PROFESSIONAL FEES | | | 70,950 | 5,983.00 | 5,629.00 | 5,983.00 | 5,865.00 | 5,983.00 | 5,865.00 | 5,983.00 | 5,983.00 | 5,865.00 | 5,983.00 | 5,865.00 | 5,983.00 | 70,970.00 |
| 87 | | | | | | | | | | | | | | | | | - |
| 88 | Bank fees 50-9510-01-02 | | 5% | 180 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 300.00 |
| 89 | Telephone - ICF/SC 50-8750-01-02 | | 5% | 1,200 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 1,500.00 |
| 90 | Dues & Sub ICF/SC 50-9550-01-02 | | 5% | 360 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 660.00 |
| 91 | Copier -ICF/SC 50-9810-01-02 | | 5% | 315 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 600.00 |
| 92 | License fees 50-9500-01-02 | | 5% | 210 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 60.00 |
| 93 | Office sup ICF/SC 50-8150-01-02 | | 5% | 480 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 450.00 |
| 94 | Comp support NH 50-8901-01-02 | | | | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 95 | Postage ICF 50-9830-01-02 | | 5% | 390 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 420.00 |
| 96 | Pagers/Cell Phones CAMPUS 50-8760-01-02 | | 5% | 45 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 540.00 |
| 97 | Travel CAMPUS 50-9400-01-02 | | 5% | 39 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 60.00 |
| 98 | Seminars CAMPUS 50-9380-01-02 | | 5% | 483 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 166.33 | 1,996.00 |
| 99 | Mileage 50-9410-01-01 and 03 | | 5% | 135 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 100 | Employee gifts/events 50-9300-01-02 | | 5% | 234 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 120.00 |
| 101 | Bad Debt 50-9690-01-02 | | 0.15% | 1,292 | 109.74 | 99.12 | 109.74 | 106.20 | 109.74 | 106.20 | 109.74 | 109.74 | 106.20 | 109.74 | 106.20 | 109.74 | 1,292.10 |
| 102 | Fin Assistance | | | 12,000 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 12,000.00 |
| 103 | Recruit'adS - ICF/SC 50-9360-01-02 | | Hep B, TB, Fla | | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 104 | Background checks 50-9350-01-02 | | 5% | 96 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 120.00 |
| 105 | | | | | | | | | | | | | | | | | |
| 106 | ADMINISTRATIVE EXPENSE at 5% | | | 17,458 | 7,661.57 | 7,296.95 | 7,661.57 | 7,540.03 | 7,661.57 | 7,540.03 | 7,661.57 | 7,661.57 | 7,540.03 | 7,661.57 | 7,540.03 | 7,661.57 | 91,088.10 |
| 107 | | | | | | | | | | | | | | | | | |
| 108 | Payroll Taxes & Employee Benefits: | | | - | | | | | | | | | | | | | - |
| 110 | Payroll taxes ICF/SC 50-9100-01-02 | | 7.65% | 14,823 | 1,254.08 | 1,197.68 | 1,254.08 | 1,197.68 | 1,254.08 | 1,197.68 | 1,254.08 | 1,254.08 | 1,197.68 | 1,254.08 | 1,254.08 | 1,254.08 | 14,823.35 |
| 111 | Workman's comp - ICF/SC 50-9110-01-02 | | 5% | 3,809 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 450.00 | 5,400.00 |
| 112 | Unemployment - ICF/SC 50-9130-01-02 | | 5% | 3,100 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 225.00 | 2,700.00 |
| 113 | H Ins Home 50-9200-01-02 | | 5% | 15,800 | 1,207.81 | 1,207.81 | 1,207.81 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 1,358.82 | 15,852.77 |
| 114 | Life Ins SNF | | 5% | 168 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 11.42 | 137.03 |
| 115 | PAYROLL TAXES AND BENEFITS | | | 36,700 | 3,148.31 | 3,091.91 | 3,148.31 | 3,242.92 | 3,299.31 | 3,242.92 | 3,299.31 | 3,299.31 | 3,242.92 | 3,299.31 | 3,299.31 | 3,299.31 | 38,913.15 |
| 116 | | | | | | | | | | | | | | | | | - |
| 117 | Fixed Expenses: | | | | | | | | | | | | | | | | - |
| 118 | Depreciation New Building | 31.33% | 24,163,085 | 188,009 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 15,667.38 | 188,008.51 |
| 119 | Depreciation - Current PPB | | | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 120 | Depreciation - New PPE | 31.12% | 1,600,000 | 49,797 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 4,149.77 | 49,797.22 |
| 121 | DEPRECIATION | | | 237,806 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 19,817.14 | 237,805.73 |
| 122 | | | | | | | | | | | | | | | | | |
| 123 | Amortization NRSG 50-9985-01-02 - COI | 27.71% | 1,421,415 | 9,852 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 9,852.15 |
| 124 | Amortization | | Loan COI | 9,852 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 821.01 | 9,852.15 |
| 125 | | | | | | | | | | | | | | | | | |
| 126 | Interest ICF/SC 50-9991-01-02 | 27.97% | $ 1,122,403.15 | | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 313,904.39 |
| 127 | Addl Interest | | | | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 128 | INTEREST | | | 313,904 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 26,158.70 | 313,904.39 |
| 129 | | | | | | | | | | | | | | | | | |
| 130 | TOTAL OPERATING EXPENSE | | | 244,624 | 21,381.26 | 20,485.64 | 21,381.26 | 22,196.13 | 21,532.26 | 21,196.13 | 21,532.26 | 21,532.26 | 22,196.13 | 21,532.26 | 21,252.52 | 21,532.26 | 257,750 |
| 131 | Fixed expense | | | 561,562 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 46,796.86 | 561,562 |
| 132 | | | | | | | | | | | | | | | | | |
| 133 | TOTAL SHELTER CARE ONLY EXPENSES | | | 805,586 | 68,178.11 | 67,282.50 | 68,178.11 | 68,992.98 | 68,329.12 | 67,992.98 | 68,329.12 | 68,329.12 | 68,992.98 | 68,329.12 | 68,049.38 | 68,329.12 | 819,313 |
| 134 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | St. Paul's Home in Belleville | | | | | | | | | | | | | | | | |
| 2 | SKILLED NURSING ONLY | | | | | | | | | | | | | | | | |
| 3 | SUPPORTING SCHEDULES | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | Month of Year End: | | December 31 | | | | | | | | | | | | | | |
| 6 | Base Year: | | 2012 | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | Annual Data | 2013 Info | | | | | | | | | | | | | |
| 9 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 10 | INPUT FIELD | | | | | | | | | | | | | | | | |
| 11 | Clients: | | | | | | | | | | | | | | | | |
| 12 | Med Sup - chargable 30-7200-35-02 | | ped | 44,940 | 5,332.00 | 4,816.00 | 5,332.00 | 5,160.00 | 5,332.00 | 5,160.00 | 5,332.00 | 5,160.00 | 5,332.00 | 5,160.00 | 5,332.00 | 5,332.00 | 62,780.00 |
| 13 | Med Sup - non charged 94-30-7100-35-01 | | $ 0.75 | 21,170 | 1,999.50 | 1,806.00 | 1,999.50 | 1,935.00 | 1,999.50 | 1,935.00 | 1,999.50 | 1,935.00 | 1,999.50 | 1,935.00 | 1,999.50 | 1,999.50 | 23,742.50 |
| 14 | Equip Rent/Oil 30-7220-35-03 | Oxygen | $ 800.00 | 11,200 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 800.00 | 9,600.00 |
| 15 | Pharmacy Consul 30-7810-35-03 | 95% | $ 5.50 | 8,018 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 423.50 | 5,082.00 |
| 16 | Pharmacy Supplies 30-7800-35-03 | with overlap | $ 2,000 | 33,867 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 2,000.00 | 24,000.00 |
| 17 | Medical Director 30-7700-35-03 | 85% | 606.40 | 5,995 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 570.00 | 6,840.00 |
| 18 | Clinical Supplies 30-7100-35-03 | 95% | 1000.00 | 10,310 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 11,400.00 |
| 19 | Dir. of Care 30-7100-35-03 | 75% | 1,000.00 | 24,600 | 1,000.00 | 2,400.00 | 1,000.00 | 2,400.00 | 3,038.00 | 2,940.00 | 3,038.00 | 2,940.00 | 3,038.00 | 2,940.00 | 3,015.00 | 3,015.00 | 35,170.00 |
| 20 | Medical Record Consul 30-8910-65-03 | | 400.00 | 2,191 | 400.00 | 1,601.00 | 400.00 | - | 400.00 | - | 400.00 | - | 400.00 | - | 400.00 | - | 1,400.00 |
| 21 | | | | 173,291 | 15,513.80 | 14,109.50 | 15,113.00 | 15,178.50 | 15,113.00 | 14,778.50 | 15,513.00 | 13,178.50 | 15,513.00 | 14,778.50 | 15,115.00 | 13,814.50 | 182,014.50 |
| 22 | | | | | | | | | | | | | | | | | |
| 23 | MEDICARE ADDITIONAL EXPENSES | | ped/ meds | | | | | | | | | | | | | | |
| 24 | PT MEDA 7010-35-03 | | $ 21.00 | 79,741 | 9,114.00 | 8,232.00 | 9,114.00 | 8,820.00 | 9,114.00 | 8,820.00 | 9,114.00 | 9,114.00 | 9,114.00 | 8,820.00 | 9,114.00 | 8,820.00 | 107,310.00 |
| 25 | OT MEDA 7010-35-05 | | $ 21.00 | 72,107 | 9,548.00 | 8,624.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,240.00 | 112,420.00 |
| 26 | ST MEDA 7010-35-05 | | $ 12.00 | 55,472 | 5,208.00 | 4,704.00 | 5,208.00 | 5,040.00 | 5,208.00 | 5,040.00 | 5,208.00 | 5,208.00 | 5,208.00 | 5,040.00 | 5,208.00 | 5,208.00 | 61,380.00 |
| 27 | TOTAL THERAPY MED A EXPENSE | | $ 55.00 | 208,038 | | | | | | | | | | | | | 281,050.00 |
| 28 | RX MEDA 7100-35-05 | | $ 12.00 | 76,374 | 9,548.00 | 8,624.00 | 9,540.00 | 9,240.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,548.00 | 9,240.00 | 9,548.00 | 9,548.00 | 9,548.00 | 112,128.00 |
| 29 | LAB 7240-35-05 | | $ 1.50 | 17,315 | 951.00 | 588.00 | 951.00 | 810.00 | 951.00 | 810.00 | 951.00 | 951.00 | 810.00 | 951.00 | 951.00 | 951.00 | 10,956.00 |
| 30 | XRAY 7210-35-05 | | $ 2.00 | 6,924 | 865.00 | 784.00 | 868.00 | 840.00 | 868.00 | 840.00 | 868.00 | 868.00 | 840.00 | 868.00 | 868.00 | 868.00 | 10,238.00 |
| 31 | OCCUP THERAPY - meds 30-7210-35-03 | | $ 2.00 | 3,467 | 868.00 | 784.00 | 868.00 | 840.00 | 868.00 | 840.00 | 868.00 | 868.00 | 840.00 | 868.00 | 868.00 | 868.00 | 10,238.00 |
| 32 | SPEECH THERAPY - meds 30-7210-35-03 | | $ 1.00 | 434 | 434.00 | 392.00 | 434.00 | 420.00 | 434.00 | 420.00 | 434.00 | 434.00 | 420.00 | 434.00 | 434.00 | 434.00 | 5,120.00 |
| 33 | MEDICAL SUPPLY 7300-35-05 | | | | | | | | | | | | | | | | |
| 34 | TOTAL ANC. MED A EXPENSE | | $ 28.50 | | | 372.00 | | 420.00 | | | | | | | | | 146,635.00 |
| 35 | MEDA COST | | $ 83.50 | | | | | | | | | | | | | | |
| 36 | | | | | | | | | | | | | | | | | |
| 37 | PHYSICAL THERAPY - meds 30-7010-35-01 | | | 88,440 | 8,400.00 | | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 8,400.00 | 100,800.00 |
| 38 | OCCUP THERAPY - meds 30-7010-35-02 | | | 76,310 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 6,650.00 | 79,800.00 |
| 39 | SPEECH THERAPY - meds 30-7010-35-03 | | | 31,160 | 2,800.00 | 2,520.00 | 2,800.00 | 2,700.00 | 2,800.00 | 2,700.00 | 2,800.00 | 2,800.00 | 2,700.00 | 2,800.00 | 2,800.00 | 2,800.00 | 33,600.00 |
| 40 | TOTAL MEDICARE B EXPENSE | | | | | | | | | | | | | | | | 114,300.00 |
| 41 | | | | | | | | | | | | | | | | | |
| 42 | CLINICAL EXPENSES - SNF | | | 1,063,783 | 69,601.00 | 64,691.50 | 69,207.00 | 68,098.50 | 69,207.00 | 67,098.50 | 69,607.00 | 69,207.00 | 70,098.50 | 69,601.04 | 67,098.50 | 69,207.00 | 823,897.50 |
| 43 | | | | | | | | | | | | | | | | | |
| 44 | Sperlni Resident Services - Social Service / Activities | | | | | | | | | | | | | | | | |
| 45 | Activities - NRSG 60-8700-65-03 | 95% | 750.00 | 6,840 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 8,550.00 |
| 46 | Resident Background Check 30-9370-01-03 | 95% | 150.00 | 1,425 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 142.50 | 1,710.00 |
| 47 | | | | | | | | | | | | | | | | | |
| 48 | SPECIAL SERVICES | | | 8,265 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 855.00 | 10,260.00 |
| 49 | | | | | | | | | | | | | | | | | |
| 50 | Marketing | | | | | | | | | | | | | | | | |
| 51 | Marketing - 4RSG 30-9710-01-03 | 95% | 3,000.00 | 12,900 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 3,250.00 | 2,250.00 | 3,250.00 | 2,250.00 | 3,250.00 | 3,250.00 | 27,000.00 |
| 52 | | | | | | | | | | | | | | | | | |
| 53 | MARKETING | | | 12,900 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 2,250.00 | 3,250.00 | 2,250.00 | 3,250.00 | 2,250.00 | 3,250.00 | 3,250.00 | 27,000.00 |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | | | |
| 3 | | | Annual Open Statistics | 2013 Info Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 54 | Dietary | | | | | | | | | | | | | | | | |
| 56 | Raw Food JCP&C 50-8100-70-03 | | $ 6.50 | 271,553 | 20,150.00 | 18,200.00 | 20,150.00 | 19,500.00 | 20,150.00 | 19,500.00 | 20,150.00 | 20,150.00 | 19,500.00 | 20,150.00 | 19,500.00 | 20,150.00 | 237,550.00 |
| 57 | EE meals Food 50-8100-70-03 | 94% | 250.00 | | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 1,500.00 |
| 58 | Diet Sup JCP&C 50-8100-70-03 | | $ 0.18 | | 465.00 | 420.00 | 465.00 | 450.00 | 465.00 | 450.00 | 465.00 | 465.00 | 450.00 | 465.00 | 450.00 | 465.00 | 5,475.00 |
| 59 | Paper Products 50-8100-70-03 | | $ 0.25 | | 775.00 | 700.00 | 775.00 | 750.00 | 775.00 | 750.00 | 775.00 | 775.00 | 750.00 | 775.00 | 750.00 | 775.00 | 9,125.00 |
| 60 | Chemicals 50-8100-70-03 | | $ 0.30 | | 930.00 | 840.00 | 930.00 | 900.00 | 930.00 | 900.00 | 930.00 | 930.00 | 900.00 | 930.00 | 900.00 | 930.00 | 10,950.00 |
| 61 | Groceries 50-8100-70-03 | 95% | $ 0.30 | 9,110 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 780.00 | 9,360.00 |
| 62 | Nonfood - 50-8100-70-03 | 95% | $ 0.25 | 7,598 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 7,980.00 |
| 63 | | | $ 1.07 | 288,651 | 23,270.00 | 21,710.00 | 23,270.00 | 22,520.00 | 23,270.00 | 22,520.00 | 23,270.00 | 23,270.00 | 22,520.00 | 23,270.00 | 22,520.00 | 23,270.00 | 281,400.00 |
| 64 | | | | | | | | | | | | | | | | | |
| 65 | DIETARY | | | 288,651 | 23,270.00 | 21,710.00 | 23,270.00 | 22,520.00 | 23,270.00 | 22,520.00 | 23,270.00 | 23,270.00 | 22,520.00 | 23,270.00 | 22,520.00 | 23,270.00 | 281,400.00 |
| 66 | Laundry - Nursing only | | | | | | | | | | | | | | | | |
| 67 | Linen 50-8400-72-03 | | $ 0.12 | | 372.00 | 336.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 4,380.00 |
| 68 | Linen Sup JCP&C 50-8100-72-03 | | $ 0.11 | | 341.00 | 308.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 4,015.00 |
| 69 | Hskp Sup - JCP&C 50-8100-72-03 | | $ 0.11 | | 341.00 | 308.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 341.00 | 330.00 | 341.00 | 330.00 | 341.00 | 4,015.00 |
| 70 | Paper Sup - Hskp 50-8150-72-03 | | $ 0.59 | | 1,829.00 | 1,652.00 | 1,829.00 | 1,770.00 | 1,829.00 | 1,770.00 | 1,829.00 | 1,829.00 | 1,770.00 | 1,829.00 | 1,770.00 | 1,829.00 | 21,545.00 |
| 71 | Chemicals 50-8100-72-03 | | $ 0.11 | | 372.00 | 336.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 372.00 | 360.00 | 372.00 | 360.00 | 372.00 | 4,380.00 |
| 74 | HSKP / LAUNDRY | | $ 0.85 | 39,783 | 2,855.00 | 2,580.00 | 2,855.00 | 2,760.00 | 2,855.00 | 2,760.00 | 2,855.00 | 2,855.00 | 2,760.00 | 2,855.00 | 2,760.00 | 2,855.00 | 33,615.00 |
| 75 | | | | | | | | | | | | | | | | | |
| 76 | Plant Operation & Maintenance: | | | | | | | | | | | | | | | | |
| 77 | | | | | | | | | | | | | | | | | |
| 78 | Bldg Insp & Main 50-8600-80-03 | | 7,000.00 | | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 7,000.00 | 84,000.00 |
| 79 | Grounds JCP&C 50-8150-80-03 | | 5,700.00 | 62,700 | 5,700.00 | 1,000.00 | 5,700.00 | 5,600.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | 1,075.00 | 12,000.00 |
| 80 | Supplies 50-8100-80-03 | | 570 | 570 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 855.00 |
| 81 | Elevator JCP&C 50-8870-80-09 | 95% | 75,600 | 7,980 | 950.00 | 855.00 | 950.00 | 900.00 | 950.00 | 900.00 | 950.00 | 950.00 | 900.00 | 950.00 | 900.00 | 950.00 | 11,030.00 |
| 82 | Trash - JCP&C 50-8700-75-03 | 95% | 1,200.00 | 11,400 | 1,187.50 | 1,187.50 | 950.00 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 1,187.50 | 14,250.00 |
| 83 | Pest Control - JCP&C 50-8770-80-03 | 95% | 420.00 | 2,340 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 402.75 | 4,833.00 |
| 84 | Water Treatment - JCP&C 50-8440-80-03 | 95% | 300.00 | 1,710 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 285.00 | 3,420.00 |
| 85 | WINDOW WASHING | | 300.00 | | 0.00 | 285.00 | 0.00 | 300.00 | 0.00 | 285.00 | 0.00 | 0.00 | 300.00 | 0.00 | 0.00 | 0.00 | 1,170.00 |
| 86 | CABLE 50-8710-80-03 | | 1,200.00 | 9,264 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | 14,400.00 |
| 87 | Utilities at 80%: | 80% | | | | | | | | | | | | | | | |
| 88 | Electric / Gas 50-8700-80-09 | 80% | 43,800 | 177,420 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 14,250.00 | 171,000.00 |
| 89 | Sewer / Water 50-8710-80-03 | | 51.00 | | | | | | | | | | | | | | |
| 90 | | In Storage | 0.054 per liter | | | | | | | | | | | | | | |
| 91 | MAINTENANCE | | | 270,400 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 26,347.50 | 316,170.00 |
| 92 | | | | | | | | | | | | | | | | | |
| 93 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | Annual Data | 2013 Info | | | | | | | | | | | | | |
| 9 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 94 | Administration & General: | | | | | | | | | | | | | | | | |
| 95 | Consultant fees/purchased services | | | | | | | | | | | | | | | | |
| 96 | Legal Campus 50-9610-01-03 | 95% | 2,000.00 | 78,500 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 1,900.00 | 22,800.00 |
| 97 | Auditing - ALU 50-9620-01-03 | 95% | 3,000.00 | 30,400 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 2,850.00 | 34,200.00 |
| 98 | ADP - ICF/SC 50-9291-01-03 | 95% | 1,500.00 | 14,820 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 1,425.00 | 17,100.00 |
| 99 | | | | | | | | | | | | | | | | | |
| 100 | ICF Management Fee 50-9600-01-03 | 5% | | 281,368 | 35,481.19 | 32,557.28 | 35,481.19 | 34,506.55 | 35,481.19 | 34,506.55 | 35,481.19 | 35,481.19 | 34,506.55 | 35,481.19 | 34,506.55 | 35,481.19 | 418,951.78 |
| 101 | Gen 7th 665 Pop 25,979 Auth 4,349-3135 Unbuilt 7,041 D&O 4902.50 | 146,272 | 9,695.39 | | | | | | | | | | | | | | |
| 102 | Ins. Policies - All ICF/SC 50-9650-01-03 | | | 41,880 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 7,833.33 | 8,616.67 | 8,616.67 | 95,666.67 |
| 103 | | | | | | | | | | | | | | | | | |
| 104 | PROFESSIONAL FEES | | | 525,667 | 49,489.52 | 46,565.61 | 49,489.52 | 48,514.88 | 49,489.52 | 48,514.88 | 49,489.52 | 49,489.52 | 48,514.88 | 49,489.52 | 49,298.22 | 50,272.85 | 588,618.44 |
| 105 | | | | | | | | | | | | | | | | | |
| 106 | Bank fees 50-9510-01-03 | 95% | 500.00 | 3,420 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 475.00 | 5,700.00 |
| 107 | Telephone - ICF/SC 50-8750-01-07 | 95% | 2,500.00 | 22,800 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 2,375.00 | 28,500.00 |
| 108 | Dues & Sub ICF/SC 50-9550-01-03 | 95% | 1,100.00 | 6,840 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 1,045.00 | 12,540.00 |
| 109 | Copier -ICF/SC 50-9910-01-03 | 95% | 1,000.00 | 5,585 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 950.00 | 11,400.00 |
| 110 | License fee 50-9500-01-03 | 95% | 100.00 | 3,981 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 1,140.00 |
| 111 | Office exp ICF/SC 50-8150-01-03 | 95% | 750.00 | 9,120 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 712.50 | 8,550.00 |
| 112 | Comp support NH 50-8901-01-03 | | 100% RNF | 40,800 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 5,000.00 | 60,000.00 |
| 113 | Postage ICF 50-9830-01-03 | 95% | 700.00 | 7,410 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 665.00 | 7,980.00 |
| 114 | Pagers/Cell Phones CAMPUS 50-8760-01-03 | 95% | 900.00 | 855 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 71.25 | 855.00 |
| 115 | Travel CAMPUS 50-9400-01-03 | 95% | 100.00 | 736 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 1,140.00 |
| 116 | Seminars CAMPUS 50-9380-01-03 | 95% | | 9,177 | 3,160.33 | 3,160.33 | 4,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 3,160.33 | 4,160.33 | 39,924.00 |
| 117 | Mileage 50-9410-01-01 and 03 | | 350.00 | 2,700 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 4,200.00 |
| 118 | Employee gifts/events 50-9300-01-03 | 95% | 200.00 | 4,641 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 2,280.00 |
| 119 | Bad Debt 50-9690-01-03 | | 0.15% | 15,990 | 1,025.45 | 927.73 | 1,025.45 | 996.21 | 1,025.45 | 996.21 | 1,025.45 | 1,025.45 | 996.21 | 1,025.45 | 996.21 | 1,025.45 | 12,100.73 |
| 120 | Fin Assistance | | 4,000 | 10,200 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 4,000.00 | 48,000.00 |
| 121 | Older provider tax on all beds 50-9900-01-03 | | 5,153.93 | 61,329 | 5,022.00 | 4,536.00 | 5,022.00 | 4,860.00 | 5,022.00 | 4,860.00 | 5,022.00 | 4,860.00 | 5,022.00 | 4,860.00 | 5,022.00 | 4,860.00 | 59,130.00 |
| 122 | New IL Caid Provider Tax 50-9900-01-03 | | 19,286.06 | 204,000 | 11,554.71 | 14,616.56 | 16,182.62 | 15,660.60 | 16,182.62 | 15,660.60 | 16,182.62 | 16,182.62 | 15,660.60 | 16,182.62 | 16,182.62 | 15,660.60 | 186,209.39 |
| 123 | Recruit/ads - ICF/SC 50-9360-01-03 | Hep B, TB, Flu | 1,500.00 | 12,000 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 1,500.00 | 18,000.00 |
| 124 | Background checks 50-9350-01-03 | 95% | 200.00 | 1,824 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 2,280.00 |
| 125 | | | | | | | | | | | | | | | | | |
| 126 | | | | | | | | | | | | | | | | | |
| 127 | ADMINISTRATIVE EXPENSE | | | 1,049,966 | 88,263.76 | 87,529.99 | 93,593.67 | 90,905.78 | 92,593.67 | 90,905.78 | 93,593.67 | 92,593.67 | 90,905.78 | 92,593.67 | 92,689.11 | 93,377.01 | 1,098,547.56 |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | |
| 2 | | | Annual Data | 2013 info | | | | | | | | | | | | | |
| 3 | | | Statistic | Budget | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | |
| 129 | Payroll Taxes & Employee Benefits | | | | | | | | | | | | | | | | - |
| 130 | Payroll taxes: EI: SC 30-9100-01-03 | | 7.685% | 249,188 | 23,326.93 | 23,215.43 | 23,326.93 | 23,215.43 | 23,326.93 | 23,215.43 | 23,326.93 | 23,326.93 | 23,215.43 | 23,326.93 | 23,326.93 | 23,326.93 | 279,637.18 |
| 131 | Workmen's comp - ICFSC 30-9110-01-03 | 85% | | 64,160 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 7,650.00 | 91,800.00 |
| 132 | Unemployment - ICFSC 30-9120-01-09 | 85% | | 15,700 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 3,825.00 | 45,900.00 |
| 134 | 18 fm Home 59-9200-01-03 | 90% | | 294,395 | 21,740.58 | 21,740.58 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 24,458.68 | 289,349.03 |
| 135 | | | | | | | | | | | | | | | | | - |
| 136 | Life Ins SNP | 90% | | 3,024 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 205.55 | 2,466.61 |
| 137 | PAYROLL TAXES AND BENEFITS | | | 617,827 | 56,748.06 | 56,670.64 | 58,394.44 | 58,394.44 | 59,466.16 | 58,394.44 | 59,466.16 | 58,394.44 | 59,466.16 | 58,394.44 | 59,466.16 | 59,466.16 | 701,353.63 |
| 138 | | | | | | | | | | | | | | | | | - |
| 139 | Plant Expenses: | | | | | | | | | | | | | | | | - |
| 140 | Depreciation/Sec. Building | 44.99% | 24,105,885 | | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 342,713.38 | 4,112,560.51 |
| 141 | Depreciation - Vehicles | | 4,500 | | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 409.09 | 4,909.09 |
| 142 | Depreciation - Current PBB | | 50,000 | | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 4,166.67 | 50,000.00 |
| 143 | Depreciation - New PBB | 43.81% | 400,000 | | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 33,333.33 | 400,000.00 |
| 144 | Depreciation - New PPB | 44.18% | 1,200,000 | | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 100,000.00 | 1,200,000.00 |
| 145 | DEPRECIATION | | 1,200,000 | 178,937 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 47,274.67 | 567,296.05 |
| 146 | | | | | | | | | | | | | | | | | - |
| 147 | Amortization APT-30-9981-01-01 | | | | | | | | | | | | | | | | - |
| 148 | Amortization NRSI 30-9983-01-01 - CO1 | 67.36% | 1,481,418 | | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 21,803.11 |
| 149 | Amortization | | | Loans CO1 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 1,816.93 | 21,803.11 |
| 150 | | | | | | | | | | | | | | | | | - |
| 151 | Instrst. JCI-SC 30-9991-01-01 | 41.99% | 1,122,405 | 25,200 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 694,680.07 |
| 152 | Add Interest | | | | | | | | | | | | | | | | - |
| 153 | INTEREST | | | 25,200 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 57,890.01 | 694,680.07 |
| 154 | | | | | | | | | | | | | | | | | - |
| 155 | TOTAL OPERATING EXPENSE | | | 3,179,406 | 270,573 | 261,441 | 275,591 | 275,591 | 277,219 | 272,131 | 277,519 | 277,519 | 277,591 | 277,619 | 275,095 | 278,095 | 3,355,486 |
| 156 | Head expense | | | 204,117 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 106,982 | 1,283,779 |
| 158 | TOTAL SKILLED NURSING ONLY EXPENSES | | | 3,383,523 | 377,555 | 368,423 | 382,573 | 382,573 | 384,201 | 379,113 | 384,501 | 384,501 | 384,573 | 384,601 | 382,078 | 385,078 | 4,639,265 |
| 159 | | | | | | | | | | | | | | | | | |

| | A | B | C | D | E | F | G |
|---|---|---|---|---|---|---|---|
| 1 | | | | | | | |
| 2 | **St. Paul's Home in Belleville** | | | | | | |
| 3 | | | | | | | |
| 4 | STATEMENTS OF REVENUES & EXPENSES | | | | | | |
| 5 | | | | | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | | | | | Jan. | Feb. | Mar. |
| 13 | | | | | | | |
| 14 | ILU - apartments 4100 | One Bedroom | | | 55,720.00 | 55,720.00 | 55,720.00 |
| 15 | ILU - apartments | Two Bedroom | | | 24,145.00 | 24,145.00 | 24,145.00 |
| 16 | ILU - apartments | Two Bedroom | | | 24,695.00 | 24,695.00 | 24,695.00 |
| 17 | ILU Apartment Revenues | | 1,225,164 | | 104,560 | 104,560 | 104,560 |
| 18 | | | | | | | |
| 19 | Shelter Care 50-4200-01-00 | One bedroom with 2nd person | 450,432 | | 18,600 | 16,800 | 19,600 |
| 20 | Shelter Care 50-4200-01-00 | Studio | | | 29,760 | 26,880 | 29,760 |
| 21 | Shelter Care 50-4200-01-00 | Companion | | | 24,800 | 22,400 | 24,800 |
| 22 | | | | | - | - | - |
| 23 | Shelter Care Revenues | | 450,432 | | 73,160 | 66,080 | 73,160 |
| 24 | | | | | | | |
| 25 | Intermediate Care | ICF Memory Care Companion | | | 34,720 | 34,720 | 34,720 |
| 26 | Intermediate Care | ICF Memory Care Studio | | | 44,640 | 44,640 | 44,640 |
| 27 | Intermediate Care | | | | - | - | - |
| 28 | | | | | | | |
| 29 | SNF Priv | SNF Private room | $ 250.00 | | 77,500 | 70,000 | 77,500 |
| 30 | SNF Priv | SNF Private room | $ 250.00 | | 108,500 | 98,000 | 108,500 |
| 31 | SNF Priv | Corner Companion | $ 225.00 | | 104,625 | 94,500 | 104,625 |
| 32 | SNF CAID | Toe to Toe Companion | $ 200.00 | | 161,200 | 145,600 | 161,200 |
| 33 | SNF CAID | Corner Companion | $ 225.00 | | 27,900 | 25,200 | 27,900 |
| 34 | CAID CONTRACTUAL TO PER DIEM | $ 1,314,000 | $ 120.00 | | (77,500) | (70,000) | (77,500) |
| 35 | Medicare A | $ 2,452,800 | $ 480.00 | | 208,320 | 188,160 | 208,320 |
| 36 | | | | | 689,905 | 630,820 | 689,905 |
| 37 | | | | | | | |
| 38 | MEDICARE PART A RUGS | | 1,839,881 | | | | |
| 39 | PT MEDA 4410 | | 301,950 | | 32,550 | 29,400 | 32,550 |
| 40 | OT MEDA 4420 | | 269,742 | | 29,078 | 26,264 | 29,078 |
| 41 | ST MEDA 4430 | | 124,506 | | 13,388 | 12,544 | 13,388 |
| 42 | PHARMACY 4470 | | 161,040 | | 17,360 | 15,680 | 17,360 |
| 43 | LAB 4440 | | 12,078 | | 2,170 | 1,960 | 2,170 |
| 44 | XRAY 4450 | | 8,052 | | 1,302 | 1,176 | 1,302 |
| 45 | MED SUP 4460 | | 16,104 | | 1,302 | 1,176 | 1,302 |
| 46 | | | | | | | |
| 47 | CONTRACTUAL MEDA 5800 , 5810 | | | | (97,650) | (88,200) | (97,650) |
| 48 | Med A CAID contractual for over 20 days | | | | (6,271) | (5,664) | (6,271) |
| 49 | MEDICARE PART B SERVICES - OUTPATIENT TO CAMPUS | | - | | - | | |
| 50 | PT - medb 4510 | | 216,000 | | 12,000 | 12,000 | 12,000 |
| 51 | OT -medb 4520 | | 216,000 | | 9,500 | 9,500 | 9,500 |
| 52 | ST- medb 4530 | | 48,000 | | 4,000 | 4,000 | 4,000 |
| 53 | | | | | | | |
| 54 | CONTRACTUAL 5450 | 60% Caid with -0- 20% copay | - | | (3,060) | (3,060) | (3,060) |
| 55 | | | 480,000.00 | | 22,440.00 | 22,440.00 | 22,440.00 |
| 56 | | | - | | - | - | |
| 57 | | | $ 7,766,930 | | 883,794 | 818,236 | 883,794 |
| 58 | | | | | | | |

| | A | B | C | D | E | F | G |
|---|---|---|---|---|---|---|---|
| 59 | Other Operating Revenues: | | | | | | |
| 60 | 2nd person fees Apts. | 59-4100-01-00 | | | 2,700 | 2,700 | 2,700 |
| 61 | Vending 4900 | | 3,600 | | 300 | 300 | 300 |
| 62 | Meal Delivery | | | | - | - | - |
| 63 | Ex Quest Meals 4604 | (3,264) | 3,000 | | 258 | 258 | 258 |
| 64 | Meal Sup Srvc 4610,11,15 | 59,009 | 10,500 | | 2,000 | 2,000 | 2,000 |
| 65 | Personal Services 4615 | | 9,600 | | 1,000 | 1,000 | 1,000 |
| 66 | | | | | | | |
| 67 | | | | | 6,258 | 6,258 | 6,258 |
| 68 | | | | | | | |
| 69 | | | | | | | |
| 70 | Promotion - Support Fund Development | | 11,580 | | 5,000 | 5,000 | 5,000 |
| 71 | Cherie Bat Cave Penn Foundation - applied to Shelter care as Revenues | | | | 5,000 | 5,000 | 5,000 |
| 72 | FOUNDATION ALLOC 4910-01 | | 48,000 | | 4,000 | 4,000 | 4,000 |
| 73 | Interest Income 4918 | | | | | | |
| 74 | | | 82,980 | | $ 14,000 | $ 14,000 | $ 14,000 |
| 75 | | | | | | | |
| 76 | Grant Operating Revenues | | 7,671,510 | | $ 904,044 | $ 854,686 | $ 904,044 |
| 77 | | | | | | | |

| | A | B | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | |
| 2 | **St. Paul's Home in Belleville** | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | STATEMENTS OF REVENUES & EXPENSES | | | | | | | | |
| 5 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | New Campus Projection | | | | | | |
| 12 | | | Apr. | May | June | July | Aug. | Sept. | Oct. |
| 13 | | | | | | | | | |
| 14 | ILU - apartments 4100 | One Bedroom | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 | 55,720.00 |
| 15 | ILU - apartments | Two Bedroom | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 | 24,145.00 |
| 16 | ILU - apartments | Two Bedroom | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 | 24,695.00 |
| 17 | ILU Apartment Revenues | | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 | 104,560 |
| 18 | | | | | | | | | |
| 19 | Shelter Care 50-4200-01-00 | One bedroom with 2nd person | 18,000 | 18,600 | 18,000 | 18,600 | 18,600 | 18,000 | 18,600 |
| 20 | Shelter Care 50-4200-01-00 | Studio | 28,800 | 29,760 | 28,800 | 29,760 | 29,760 | 28,800 | 29,760 |
| 21 | Shelter Care 50-4200-01-00 | Companion | 24,000 | 24,800 | 24,000 | 24,800 | 24,800 | 24,000 | 24,800 |
| 22 | | | | | | | | | |
| 23 | Shelter Care Revenues | | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 |
| 24 | | | | | | | | | |
| 25 | Intermediate Care | ICF Memory Care Companion | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 | 34,720 |
| 26 | Intermediate Care | ICF Memory Care Studio | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 | 44,640 |
| 27 | Intermediate Care | | - | - | - | - | - | - | - |
| 28 | | | | | | | | | |
| 29 | SNF Priv | SNF Private room | 75,000 | 77,500 | 75,000 | 77,500 | 77,500 | 75,000 | 77,500 |
| 30 | SNF Priv | SNF Private room | 105,000 | 108,500 | 105,000 | 108,500 | 108,500 | 105,000 | 108,500 |
| 31 | SNF Priv | Corner Companion | 101,250 | 104,625 | 101,250 | 104,625 | 104,625 | 101,250 | 104,625 |
| 32 | SNF CAID | Toe to Toe Companion | 156,000 | 161,200 | 156,000 | 161,200 | 161,200 | 156,000 | 161,200 |
| 33 | SNF CAID | Corner Companion | 27,000 | 27,900 | 27,000 | 27,900 | 27,900 | 27,000 | 27,900 |
| 34 | CAID CONTRACTUAL [illegible] TO PRIVATE | $ 1,314,000 | (75,000) | (77,500) | (75,000) | (77,500) | (77,500) | (75,000) | (77,500) |
| 35 | Medicare A | $ 2,452,800 | 201,600 | 208,320 | 201,600 | 208,320 | 208,320 | 201,600 | 208,320 |
| 36 | | | 670,210 | 689,905 | 670,210 | 689,905 | 689,905 | 670,210 | 689,905 |
| 37 | | | | | | | | | |
| 38 | MEDICARE PART A RUGS | | | | | | | | |
| 39 | PT MEDA 4410 | | 31,500 | 32,550 | 31,500 | 32,550 | 32,550 | 31,500 | 32,550 |
| 40 | OT MEDA 4420 | | 28,140 | 29,078 | 28,140 | 29,078 | 29,078 | 28,140 | 29,078 |
| 41 | ST MEDA 4430 | | 13,440 | 13,888 | 13,440 | 13,888 | 13,888 | 13,440 | 13,888 |
| 42 | PHARMACY 4470 | | 16,800 | 17,360 | 16,800 | 17,360 | 17,360 | 16,800 | 17,360 |
| 43 | LAB 4440 | | 2,100 | 2,170 | 2,100 | 2,170 | 2,170 | 2,100 | 2,170 |
| 44 | XRAY 4450 | | 1,260 | 1,302 | 1,260 | 1,302 | 1,302 | 1,260 | 1,302 |
| 45 | MED SUP 4460 | | 1,260 | 1,302 | 1,260 | 1,302 | 1,302 | 1,260 | 1,302 |
| 46 | | | | | | | | | |
| 47 | CONTRACTUAL MED A 5800 , 5810 | | (94,500) | (97,650) | (94,500) | (97,650) | (97,650) | (94,500) | (97,650) |
| 48 | Med A CAID contractual for over 20 days | | (6,069) | (6,271) | (6,069) | (6,271) | (6,271) | (6,069) | (6,271) |
| 49 | MEDICARE PART B SERVICES - OUTPATIENT TO CAMPUS | | | | | | | | |
| 50 | PT - medb 4510 | | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 |
| 51 | OT -medb 4520 | | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 | 9,500 |
| 52 | ST- medb 4530 | | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 |
| 53 | | | | | | | | | |
| 54 | CONTRACTUAL 5450 | 60% Caid with -0- 20% copay | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) | (3,060) |
| 55 | | | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 | 22,440.00 |
| 56 | | | | | | | | | |
| 57 | | | 861,941 | 883,794 | 861,941 | 883,794 | 883,794 | 861,941 | 883,794 |
| 58 | | | | | | | | | |

| | A | B | H | I | J | K | L | M | N |
|---|---|---|---|---|---|---|---|---|---|
| 59 | Other Operating Revenues: | | | | | | | | |
| 60 | 2nd person fee Apts. | 50-4100-01-00 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 | 2,700 |
| 61 | Vending 4900 | | 300 | 300 | 300 | 300 | 300 | 300 | 300 |
| 62 | Meal Delivery | | - | - | - | - | - | - | - |
| 63 | Bequest Meals 4604 | | (3,201) | 249 | 249 | 249 | 249 | 249 | 249 |
| 64 | Med Svc-4610,1,15 | | 59,009 | 2,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 |
| 65 | Personal Service 4615 | | | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 |
| 66 | | | | | | | | | |
| 67 | | | | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 | 6,250 |
| 68 | | | | | | | | | |
| 69 | | | | | | | | | |
| 70 | Foundation - Support Fund Development | | | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 |
| 71 | Charitable Care from Foundation - applied to Shelter cere us Revenues | | | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 |
| 72 | FOUNDATION ALLOC 4950-01 | | | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 |
| 73 | Interest Income 4918 | | | | | | | | |
| 74 | | | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 | $ 14,000 |
| 75 | | | | | | | | | |
| 76 | Gross Operating Revenues | | $ 882,191 | $ 904,044 | $ 882,191 | $ 904,044 | $ 904,044 | $ 882,191 | $ 904,044 |
| 77 | | | | | | | | | |

| | A | B | O | P | Q | R | S | T |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | **St. Paul's Home in Belleville** | | | | | | | |
| 3 | | | | | | | | |
| 4 | STATEMENTS OF REVENUES & EXPENSES | | | | | | | |
| 5 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | ILU | Shelter | SNF |
| 12 | | | Nov. | Dec. | Total | | Care | |
| 13 | | | | | | | | |
| 14 | ILU - apartments 4100 | One Bedroom | 55,720.00 | 55,720.00 | 668,640.00 | 668,640.00 | | |
| 15 | ILU - apartments | Two Bedroom | 24,145.00 | 24,145.00 | 289,740.00 | 289,740.00 | | |
| 16 | ILU - apartments | Two Bedroom | 24,695.00 | 24,695.00 | 296,340.00 | 296,340.00 | | |
| 17 | ILU Apartment Revenues | | 104,560 | 104,560 | 1,254,720 | 1,254,720 | - | |
| 18 | | | | | | | | |
| 19 | Shelter Care 50-4200-01-00 | One bedroom with 2nd person | 18,000 | 18,600 | 219,000 | | 219,000 | |
| 20 | Shelter Care 50-4200-01-00 | Studio | 28,800 | 29,760 | 350,400 | | 350,400 | |
| 21 | Shelter Care 50-4200-01-00 | Companion | 24,000 | 24,800 | 292,000 | | 292,000 | |
| 22 | | | | | - | | - | |
| 23 | Shelter Care Revenues | | 70,800 | 73,160 | 861,400 | | 861,400 | - |
| 24 | | | | | | | | |
| 25 | Intermediate Care | ICF Memory Care Companion | 34,720 | 34,720 | 416,640 | | | 416,640 |
| 26 | Intermediate Care | ICF Memory Care Studio | 44,640 | 44,640 | 535,680 | | | 535,680 |
| 27 | Intermediate Care | | - | - | - | | | - |
| 28 | | | | | | | | |
| 29 | SNF Priv | SNF Private room | 75,000 | 77,500 | 912,500 | | | 912,500 |
| 30 | SNF Priv | SNF Private room | 105,000 | 108,500 | 1,277,500 | | | 1,277,500 |
| 31 | SNF Priv | Corner Companion | 101,250 | 104,625 | 1,231,875 | | | 1,231,875 |
| 32 | SNF CAID | Toe to Toe Companion | 156,000 | 161,200 | 1,898,000 | | | 1,898,000 |
| 33 | SNF CAID | Corner Companion | 27,000 | 27,900 | 328,500 | | | 328,500 |
| 34 | CAID CONTRACTUAL TO PER DIEM | $ 1,314,000 | (75,900) | (77,400) | (912,500) | 1,314,000 | | (912,500) |
| 35 | Medicare A | $ 2,452,800 | 201,600 | 208,320 | 2,452,800 | | | 2,452,800 |
| 36 | | | 670,210 | 689,905 | 8,140,995 | | - | 8,140,995 |
| 37 | | | | | | | | |
| 38 | MEDICARE PART A RUGS | | | | - | | | |
| 39 | PT MEDA 4410 | | 31,500 | 32,550 | 383,250 | | | 383,250 |
| 40 | OT MEDA 4420 | | 28,140 | 29,078 | 342,370 | | | 342,370 |
| 41 | ST MEDA 4430 | | 13,440 | 13,538 | 163,520 | | | 163,520 |
| 42 | PHARMACY 4470 | | 16,800 | 17,360 | 204,400 | | | 204,400 |
| 43 | LAB 4440 | | 2,100 | 2,170 | 25,550 | | | 25,550 |
| 44 | XRAY 4450 | | 1,260 | 1,302 | 15,330 | | | 15,330 |
| 45 | MED SUP 4460 | | 1,260 | 1,302 | 15,330 | | | 15,330 |
| 46 | | | | | | | | - |
| 47 | CONTRACTUAL MEDA 5800 , 5810 | | (94,500) | (97,650) | (1,149,750) | | | (1,149,750) |
| 48 | Med A CAID contractual for over 20 days | | (6,069) | (6,271) | (73,840) | | | (73,840) |
| 49 | MEDICARE PART B SERVICES - OUTPATIENT TO CAMPUS | | | | | | | |
| 50 | PT - medb 4510 | | 12,000 | 12,000 | 144,000 | | | 144,000 |
| 51 | OT -medb 4520 | | 9,500 | 9,500 | 114,000 | | | 114,000 |
| 52 | ST- medb 4530 | | 4,000 | 4,000 | 48,000 | | | 48,000 |
| 53 | | | | | | | | - |
| 54 | CONTRACTUAL 5450 | 60% Caid with -0- 20% copay | (3,060) | (3,060) | (36,720) | | | (36,720) |
| 55 | | | 22,440.00 | 22,440.00 | 269,280.00 | | - | 269,280.00 |
| 56 | | | | | - | | - | - |
| 57 | | | 861,941 | 883,794 | 10,452,556 | 1,254,720 | 861,400 | 8,336,436 |
| 58 | | | | | | | | |

| | A | B | O | P | Q | R | S | T |
|---|---|---|---|---|---|---|---|---|
| 59 | Other Operating Revenues: | | | | | | | |
| 60 | 2nd person fees Apts. | 59-4100-01-00 | 2,700 | 2,700 | 32,400 | 32,400 | | |
| 61 | Vending 4900 | | 300 | 300 | 3,600 | | | 3,600 |
| 62 | Meal Delivery | | - | - | - | | | - |
| 63 | EatGreet Meals 4604 | (3,204) | 250 | 250 | 3,000 | | | 3,000 |
| 64 | Mel Ser Srvc 4610,11,15 | 59,079 | 2,000 | 2,000 | 24,000 | | | 24,000 |
| 65 | Personal Services 4615 | | 1,000 | 1,000 | 12,000 | | | 12,000 |
| 66 | | | | | | | | |
| 67 | | | 6,250 | 6,250 | 75,000 | 32,400 | - | 42,600 |
| 68 | | | | | | | | |
| 69 | | | | | | | | |
| 70 | Foundation - Support Fund Development | | 5,000 | 5,000 | 60,000 | | | 60,000 |
| 71 | Charitable Cont from Foundation - applied to Shelter costs as Revenues | | 5,000 | 5,000 | 60,000 | | | 60,000 |
| 72 | FOUNDATION ALLOC 4950-01 | | 4,000 | 4,000 | 48,000 | | | 48,000 |
| 73 | Interest Income 4918 | | | | - | | | - |
| 74 | | | $ 14,000 | $ 14,000 | $ 168,000 | $ - | $ - | $ 168,000 |
| 75 | | | | | | | | |
| 76 | Gross Operating Revenues | | $ 883,191 | $ 994,844 | $ 10,695,556 | $ 1,387,120 | $ 861,400 | 8,547,036 |
| 77 | | | | | | | | 10,695,556 |

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | ST. PAUL'S HOME FEASIBILITY STUDY FOR NEW CAMPUS | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | |
| 5 | | | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | TOTAL NEW CAMPUS |
| 6 | | **Revenues** | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | |
| 8 | | Retirement Living | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 1,287,120 |
| 9 | | Shelter Care | 73,160 | 66,080 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 |
| 10 | | Private | 369,985 | 341,860 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 369,985 | 360,610 | 369,985 | 360,610 | 369,985 | 4,374,195 |
| 11 | | Medicaid - SNF/ IC | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 1,314,000 |
| 12 | | Medicare A | 202,049 | 182,496 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,049 | 195,531 | 202,049 | 2,378,961 |
| 13 | | Medicare B | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 269,280 |
| 14 | | Other operating income | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 3,550 | 42,600 |
| 15 | | Charitable Care - Foundation Shelter and SNF | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 16 | | Foundation - Fund Development staffing and benefits | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 17 | | Foundation Support | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 18 | | **Total operating income** | 904,044 | 838,486 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 904,044 | 882,191 | 904,044 | 882,191 | 904,044 | 10,695,556 |
| 19 | | | | | | | | | | | | | | | |
| 20 | | **Expenses** | | | | | | | | | | | | | |
| 21 | | Salaries & benefits | | | | | | | | | | | | | |
| 22 | | Clinical | 211,481 | 201,868 | 211,481 | 201,868 | 211,481 | 201,868 | 211,481 | 211,481 | 201,868 | 211,481 | 211,481 | 211,481 | 2,499,319 |
| 23 | | Special Services | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,182 | 11,714 | 11,714 | 11,182 | 11,714 | 11,714 | 11,714 | 138,441 |
| 24 | | Dietary | 45,972 | 43,882 | 45,972 | 43,882 | 45,972 | 43,882 | 45,972 | 45,972 | 43,882 | 45,972 | 45,972 | 45,972 | 543,300 |
| 25 | | Env Service | 25,898 | 24,721 | 25,898 | 24,721 | 25,898 | 24,721 | 25,898 | 25,898 | 24,721 | 25,898 | 25,898 | 25,898 | 306,072 |
| 26 | | Maintenance | 10,679 | 10,086 | 10,679 | 10,086 | 10,679 | 10,086 | 10,679 | 10,679 | 10,086 | 10,679 | 10,679 | 10,679 | 125,780 |
| 27 | | Admin / Other | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 35,930 | 37,474 | 37,474 | 35,930 | 37,474 | 37,474 | 37,474 | 443,515 |
| 28 | | Salaries | 343,219 | 327,669 | 343,219 | 327,669 | 343,219 | 327,669 | 343,219 | 343,219 | 327,669 | 343,219 | 343,219 | 343,219 | 4,056,426 |
| 29 | | | | | | | | | | | | | | | |
| 30 | | Taxes and Benefits | 64,111 | 62,922 | 64,111 | 65,942 | 67,131 | 65,942 | 67,131 | 67,131 | 65,942 | 67,131 | 67,131 | 67,131 | 791,757 |
| 31 | | **Salaries & benefits** | 407,330 | 390,591 | 407,330 | 393,611 | 410,350 | 393,611 | 410,350 | 410,350 | 393,611 | 410,350 | 410,350 | 410,350 | 4,848,183 |
| 32 | | | | | | | | | | | | | | | - |
| 33 | | Clinical | 69,914 | 65,004 | 69,514 | 68,411 | 69,514 | 68,011 | 69,914 | 69,514 | 70,411 | 69,914 | 68,011 | 69,514 | 827,646 |
| 34 | | Special Services | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 1,300 | 15,600 |
| 35 | | Dietary | 36,972 | 34,389 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 36,972 | 36,111 | 36,972 | 36,111 | 36,972 | 437,638 |
| 36 | | Environmental Services | 3,705 | 3,399 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 3,705 | 3,603 | 3,705 | 3,603 | 3,705 | 43,740 |
| 37 | | Maintenance | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 47,233 | 53,233 | 47,233 | 47,233 | 47,233 | 578,790 |
| 38 | | General & administrative | 113,035 | 111,935 | 118,363 | 115,554 | 117,363 | 115,554 | 117,363 | 117,363 | 115,554 | 117,363 | 117,337 | 118,147 | 1,394,932 |
| 39 | | **Operating Expense** | 272,159 | 263,258 | 277,087 | 278,210 | 276,087 | 271,810 | 276,487 | 276,087 | 280,210 | 276,487 | 273,594 | 276,870 | 3,298,345 |
| 40 | | | | | | | | | | | | | | | - |
| 41 | | | | | | | | | | | | | | | - |
| 42 | | **EBITDA - Earnings Before Interest Taxes Depreciation and Amortization** | 224,555 | 184,637 | 219,627 | 210,370 | 217,607 | 216,770 | 217,207 | 217,607 | 208,370 | 217,207 | 198,247 | 216,824 | 2,549,027 |
| 43 | | | | | | | | | | | | | | | - |
| 44 | | Interest Exp 70% / 15% 15% | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 93,534 | 1,122,403 |
| 45 | | Depreciation New and current | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 79,592 | 955,102 |
| 46 | | Amortization of New Financing | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 2,961 | 35,535 |
| 47 | | **Taxes, Interest, Amort / Depre** | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 2,113,040 |
| 48 | | | | | | | | | | | | | | | |
| 49 | | **Net Income** | 48,468 | 8,550 | 43,540 | 34,283 | 41,520 | 40,683 | 41,120 | 41,520 | 32,283 | 41,120 | 22,160 | 40,737 | 435,986 |
| 50 | | | | | | | | | | | | | | | |
| 52 | | | | | | | | | | | | | | | |
| 53 | | **NET INCOME** | | | | | | | | | | | **NET INCOME** | | 435,986 |
| 54 | | **Net Income %** | | | | | | | | | | | **Net Income %** | | 4.1% |
| 55 | | **Income to be used for DSC** | | | | | | | | | | | **Income to be used for DSC** | | 2,549,027 |
| 56 | | **DSCR** | | | | | | | | | | | **DSCR** | | 1.6 |
| 57 | | | | | | | | | | | | | | | |
| 58 | | | | | | | | | | | | | | | |

# St. Paul's Home in Belleville

## STATEMENTS OF REVENUES AND EXPENSES

| | A | B | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | New Changes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 6 | Net Operating Revenues | | | | | | | | | | | | | | |
| 8 | Retirement Living 20-4100-01-00 | | 107,??? | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 107,260 | 1,237,120 |
| 10 | Shelter Care 23-4200-01-00 | | 73,161 | 66,??? | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 73,160 | 70,800 | 73,160 | 70,800 | 73,160 | 861,400 |
| 12 | Private Pay SCP Memory Care Unit | | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 79,360 | 952,320 |
| 13 | Private Pay SNF | | 291,651 | 261,508 | 291,651 | 282,250 | 291,651 | 282,250 | 291,651 | 291,651 | 282,250 | 291,651 | 282,250 | 291,651 | 3,431,875 |
| 14 | Medicaid SNF | | 111,600 | 100,800 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 111,600 | 108,000 | 111,600 | 108,000 | 111,600 | 1,314,000 |
| 15 | MEDICARE PART A RUGS | | 202,149 | 182,456 | 202,149 | 195,531 | 202,049 | 195,531 | 202,049 | 202,049 | 195,531 | 202,012 | 195,531 | 202,049 | 2,378,941 |
| 17 | Medicare Part B | | 22,440 | 22,448 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,440 | 22,462 | 269,258 |
| 18 | Other Ancillary revenues | | 3,533 | 3,118 | 3,510 | 3,517 | 3,555 | 3,550 | 3,550 | 3,510 | 3,550 | 2,550 | 3,550 | 3,550 | 42,400 |
| 19 | Foundation - Support Fund Development | | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 20 | Charitable Care from Foundation - applied in Shelter care as Revenues | | 5,000 | 5,000 | 5,003 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 60,000 |
| 21 | FOUNDATION ALLOC 495041 | | 4,000 | 4,000 | 4,003 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 4,000 | 48,000 |
| 22 | Net Operating Revenues | | 904,844 | 828,476 | 904,844 | 883,191 | 904,844 | 883,191 | 904,844 | 904,844 | 883,191 | 904,844 | 883,191 | 904,844 | 10,695,556 |
| 24 | RETIREMENT APTS - ILU | | | | | | | | | | | | | | |
| 25 | Special Services - SS, Act. | | 2,334 | 2,247 | 2,334 | 2,247 | 2,334 | 2,247 | 2,334 | 2,334 | 2,247 | 2,334 | 2,334 | 2,334 | 27,817 |
| 26 | Dietary | | 11,616 | 11,109 | 11,638 | 11,109 | 11,638 | 11,109 | 11,638 | 11,638 | 11,109 | 11,638 | 11,638 | 11,638 | 137,542 |
| 27 | Environmental Services | | 3,740 | 3,570 | 3,746 | 3,570 | 3,740 | 3,570 | 3,740 | 3,740 | 3,570 | 3,740 | 3,740 | 3,749 | 44,198 |
| 28 | Maintenance | | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,376 | 2,374 | 28,516 |
| 29 | General and Administrative | | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 4,167 | 50,000 |
| 30 | | | 24,275 | 23,469 | 24,275 | 23,469 | 24,275 | 23,469 | 24,275 | 24,275 | 23,469 | 24,275 | 24,275 | 24,275 | 288,073 |
| 32 | SHELTER CARE - ALU | | | | | | | | | | | | | | |
| 33 | Clinical | 5% | 10,574 | 10,093 | 10,574 | 10,093 | 10,574 | 10,093 | 10,574 | 10,574 | 10,093 | 10,574 | 10,578 | 10,574 | 124,966 |
| 34 | Special Services - SS, Act. | 5% | 468 | 447 | 468 | 447 | 468 | 447 | 468 | 465 | 447 | 468 | 468 | 468 | 5,531 |
| 35 | Dietary | 5% | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,639 | 1,717 | 1,717 | 1,639 | 1,717 | 1,717 | 1,717 | 20,298 |
| 36 | Environmental Services | 5% | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,058 | 1,108 | 1,108 | 1,058 | 1,108 | 1,128 | 1,108 | 13,094 |
| 37 | Plant Operations & Maintenance | 5% | 653 | 623 | 653 | 623 | 653 | 623 | 653 | 653 | 623 | 653 | 653 | 653 | 7,715 |
| 38 | General and Administrative | 5% | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,797 | 1,874 | 1,874 | 1,797 | 1,874 | 1,876 | 1,874 | 22,176 |
| 39 | | | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 15,656 | 16,393 | 16,393 | 15,656 | 16,393 | 16,395 | 16,393 | 193,769 |
| 40 | SKILLED NURSING CARE | | | | | | | | | | | | | | |
| 41 | Clinical | 95% | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 191,775 | 200,907 | 200,907 | 191,775 | 200,907 | 200,907 | 200,907 | 2,374,353 |
| 42 | Special Services - SS, Act. | 95% | 8,892 | 8,412 | 8,892 | 8,488 | 8,892 | 8,415 | 8,892 | 8,892 | 8,418 | 8,892 | 8,892 | 8,892 | 105,092 |
| 43 | Dietary | 95% | 32,612 | 31,134 | 32,612 | 31,134 | 32,612 | 31,134 | 32,612 | 32,612 | 31,134 | 32,612 | 32,612 | 32,612 | 385,470 |
| 44 | Environmental Services | 95% | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 20,094 | 21,051 | 21,051 | 20,094 | 21,051 | 21,016 | 21,051 | 248,781 |
| 45 | Plant Operations & Maintenance | 95% | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 9,463 | 10,027 | 10,027 | 9,463 | 10,027 | 10,027 | 10,027 | 118,065 |
| 46 | General and Administrative | 95% | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 29,967 | 31,434 | 31,474 | 27,567 | 31,434 | 31,416 | 31,456 | 371,350 |
| 47 | | | 304,927 | 290,921 | 304,927 | 290,911 | 304,927 | 290,911 | 304,927 | 304,927 | 290,911 | 304,927 | 304,937 | 304,837 | 3,603,100 |
| 48 | TOTAL COMMUNITY WAGES | | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 330,045 | 345,595 | 345,595 | 330,045 | 345,595 | 345,595 | 345,595 | 4,084,942 |
| 51 | Payroll taxes and employee benefits Retirement | | 4,315 | 4,153 | 4,315 | 4,304 | 4,366 | 4,304 | 4,366 | 4,366 | 4,326 | 4,366 | 4,366 | 4,366 | 51,699 |
| 52 | Payroll taxes and employee benefits Shelter Care | | 3,149 | 3,092 | 3,149 | 3,243 | 3,299 | 3,243 | 3,299 | 3,229 | 3,243 | 3,229 | 3,299 | 3,292 | 38,917 |
| 53 | Payroll taxes and employee benefits Skilled Nursing | | 56,748 | 55,677 | 56,748 | 58,395 | 59,466 | 58,395 | 59,466 | 59,465 | 58,395 | 59,466 | 57,466 | 57,466 | 701,154 |
| 54 | TAX AND BENEFIT TOTALS | | 64,111 | 62,922 | 64,131 | 65,942 | 67,131 | 65,942 | 67,131 | 67,131 | 65,942 | 67,131 | 67,132 | 67,131 | 791,757 |
| 56 | TOTAL SALARIES, TAXES & BENEFITS | | 409,706 | 392,967 | 409,706 | 395,987 | 412,726 | 395,987 | 412,726 | 412,726 | 395,987 | 412,726 | 412,726 | 412,726 | 4,876,609 |
| 58 | Operating Expenses | | | | | | | | | | | | | | |
| 59 | Clinical Expense - Retirement | | | | | | | | | | | | | | |
| 60 | Shelter Care | | 311 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 312 | 3,746 |
| 61 | Nursing | | 69,502 | 64,692 | 69,202 | 67,099 | 69,202 | 67,099 | 69,602 | 69,202 | 70,099 | 69,672 | 67,629 | 69,292 | 818,906 |
| 62 | Special Services - Retirement | | 400 | 400 | 430 | 400 | 400 | 400 | 400 | 402 | 400 | 400 | 400 | 400 | 4,800 |
| 63 | Shelter Care | | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 41 | 45 | 45 | 45 | 541 |
| 64 | Nursing | | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 855 | 10,260 |
| 65 | Dietary - Retirement | | 8,650 | 7,650 | 8,650 | 9,650 | 8,673 | 8,650 | 8,670 | 8,650 | 8,650 | 8,650 | 8,753 | 7,650 | 103,800 |
| 66 | Shelter Care | | 4,452 | 4,029 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 4,452 | 4,311 | 4,452 | 4,311 | 4,452 | 52,438 |
| 67 | Nursing | | 23,870 | 21,710 | 23,870 | 23,150 | 23,870 | 23,150 | 23,970 | 23,870 | 23,150 | 23,870 | 23,150 | 23,870 | 281,400 |
| 68 | Housekeeping - Retirement | | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 543 | 6,510 |
| 69 | Shelter Care | | 527 | 476 | 527 | 510 | 527 | 510 | 527 | 527 | 510 | 527 | 516 | 527 | 6,205 |
| 70 | Nursing | | 2,635 | 2,380 | 2,635 | 2,550 | 2,635 | 2,550 | 2,635 | 2,635 | 2,570 | 2,635 | 2,555 | 2,635 | 31,025 |
| 71 | Maintenance - Utilities - Retirement | | 16,400 | 16,400 | 16,400 | 18,400 | 16,400 | 16,400 | 16,400 | 16,400 | 18,400 | 16,400 | 16,400 | 16,400 | 200,800 |
| 72 | Shelter Care | | 4,485 | 4,485 | 4,485 | 5,485 | 4,485 | 4,485 | 4,485 | 4,485 | 5,485 | 4,485 | 4,485 | 4,485 | 55,820 |
| 73 | Nursing | | 28,348 | 26,348 | 26,348 | 29,348 | 26,348 | 26,348 | 26,348 | 26,348 | 29,348 | 26,348 | 26,348 | 26,348 | 323,172 |
| 74 | General and Administrative - Retirement | | 14,109 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 14,108 | 169,296 |
| 75 | Shelter Care | | 8,412 | 8,047 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 8,412 | 8,290 | 8,412 | 8,290 | 8,412 | 100,088 |
| 76 | Nursing | | 90,516 | 89,710 | 93,944 | 93,156 | 94,144 | 93,156 | 94,844 | 94,844 | 93,156 | 94,344 | 94,310 | 95,127 | 1,125,548 |
| 78 | Operating Expenses | | 272,159 | 263,258 | 277,987 | 278,310 | 276,187 | 273,818 | 276,187 | 276,087 | 278,310 | 276,187 | 279,594 | 276,870 | 3,298,345 |
| 80 | EBITDA - Earnings Before Interest Taxes Depreciation and Amortization | | 223,179 | 183,360 | 217,251 | 207,993 | 215,231 | 214,393 | 214,831 | 215,231 | 205,993 | 214,831 | 195,871 | 214,447 | 2,520,831 |
| 82 | Fixed Expenses | | | | | | | | | | | | | | |
| 83 | Depreciation - Retirement Existing | | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 12,500 | 150,000 |
| 84 | Shelter Care | | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 19,817 | 237,800 |
| 85 | Nursing | | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 47,275 | 567,300 |
| 86 | Amortization of COI - Retirement Leg | | 333 | 333 | 333 | 333 | 333 | 333 | 333 | 333 | 333 | 333 | 333 | 333 | [illegible] |
| 87 | Amortization of COI - Shelter Care | | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 821 | 9,852 |
| 88 | Amortization of COI - Nursing | | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 1,817 | 21,801 |
| 89 | Interest - Retirement Existing | | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 9,485 | 113,819 |
| 90 | Interest - Shelter Care | | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 26,159 | 313,904 |
| 91 | Interest - Skilled Nursing | | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 57,890 | 694,680 |
| 92 | FIXED EXPENSES | | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 176,087 | 2,113,040 |
| 96 | Earnings before Non Operating Revenues | | 46,892 | 6,174 | 41,164 | 31,907 | 39,144 | 38,307 | 38,744 | 39,144 | 29,907 | 38,744 | 19,784 | 38,361 | 407,478 |

## ST PAUL'S HOME LOAN PAYABLE

### Private Placement

| | Care Level | $$ | Square Footage | | % |
|---|---|---|---|---|---|
| Loan: | Apts | 3,000,000 | 65,259 | | 0 |
| | Clinical | 16,857,582 | 65,249 | | 1 |
| | Sheltered | 7,617,418 | 29,484 | 94,733 | 0 |
| | | 27,475,000 | 159,992 | | 1 |

| | | | |
|---|---|---|---|
| Total Principal Amount | 27,475,000 | MADS | 1,228,269 |
| Interest Rate | 3.25% | | |
| Amortization Period | 40 | | |

| Princiap Due | Principal Amount | Interest Rate | Annual Interest Payment | Principal Payments | Annual Payments on Debt | Monthly Payments |
|---|---|---|---|---|---|---|
| | 27,475,000 | | | | | |
| 2013 | 27,475,000 | 3.2500% | 38,960 | - | 38,960 | 3,247 |
| 2014 | 27,475,000 | 3.2500% | 553,409 | - | 553,409 | 46,117 |
| 2015 | 27,475,000 | 3.2500% | 887,897 | 340,371 | 1,228,268 | 102,356 |
| 2016 | 27,134,629 | 3.2500% | 876,669 | 351,600 | 1,228,268 | 102,356 |
| 2017 | 26,783,029 | 3.2500% | 865,070 | 363,198 | 1,228,268 | 102,356 |
| 2018 | 26,419,831 | 3.2500% | 853,089 | 375,180 | 1,228,269 | 102,356 |
| 2019 | 26,044,651 | 3.2500% | 840,712 | 387,556 | 1,228,269 | 102,356 |
| 2020 | 25,657,094 | 3.2500% | 827,927 | 400,341 | 1,228,268 | 102,356 |
| 2021 | 25,256,753 | 3.2500% | 814,720 | 413,548 | 1,228,268 | 102,356 |
| 2022 | 24,843,205 | 3.2500% | 801,078 | 427,190 | 1,228,269 | 102,356 |
| 2023 | 24,416,014 | 3.2500% | 786,986 | 441,283 | 1,228,268 | 102,356 |
| 2024 | 23,974,732 | 3.2500% | 772,428 | 455,840 | 1,228,268 | 102,356 |

[redacted]

## ST PAUL'S HOME LOC LOAN PAYABLE

| | Care Level | $$ | Square Footage | | % |
|---|---|---|---|---|---|
| Loan: | Apts | - | 65,259 | | 0.00% |
| | Clinical | 783,470 | 65,249 | | 68.88% |
| | Sheltered | 354,026 | 29,484 | 94,733 | 31.12% |
| | | 1,137,496 | 159,992 | | 100.00% |

| | | | |
|---|---|---|---|
| Total Principal Amount | $1,137,496 | MADS | 160,274.88 |
| Interest Rate | 3.00% | | |
| Amortization Period | 1 | | |

| Princiap Due | Principal Amount | Interest Rate | Annual Interest Payment | Principal Payments | Annual Payments | Monthly Payments |
|---|---|---|---|---|---|---|
| | 1,137,496 | | | | | |
| Jun-13 | 1,137,496 | 3.0000% | 17,062.44 | | | |
| | | | | - | 17,062.44 | 2,843.74 |
| Jan-14 | 1,137,496 | 3.0000% | 34,124.88 | | | |
| | | | | - | 34,124.88 | 2,843.74 |
| Jan-15 | 1,137,496 | 3.0000% | 34,124.88 | | | |
| | | | | - | 34,124.88 | 2,843.74 |
| Jan-16 | 1,137,496 | 3.0000% | 34,124.88 | | | |
| | | | | 45,000 | 79,124.88 | 6,593.74 |
| Jan-17 | 1,092,496 | 3.0000% | 32,774.88 | | | |
| | | | | 90,000 | 122,774.88 | 10,231.24 |
| Jan-18 | 1,002,496 | 3.0000% | 30,074.88 | | | |
| | | | | 90,000 | 120,074.88 | 10,006.24 |
| Jan-19 | 912,496 | 3.0000% | 27,374.88 | | | |
| | | | | 90,000 | 117,374.88 | 9,781.24 |
| Jan-20 | 822,496 | 3.0000% | 24,674.88 | | | |
| | | | | 120,000 | 144,674.88 | 12,056.24 |
| Jan-21 | 702,496 | 3.0000% | 21,074.88 | | | |
| | | | | 120,000 | 141,074.88 | 11,756.24 |
| Jan-22 | 582,496 | 3.0000% | 17,474.88 | | | |
| | | | | 120,000 | 137,474.88 | 11,456.24 |
| Jan-23 | 462,496 | 3.0000% | 13,874.88 | | | |
| | | | | 120,000 | 133,874.88 | 11,156.24 |
| Jan-24 | 342,496 | 3.0000% | 10,274.88 | | | |
| | | | | 150,000 | 160,274.88 | 13,356.24 |
| Jan-25 | 192,496 | 3.0000% | 5,774.88 | | | |
| | | | | 150,000 | 155,774.88 | 12,981.24 |
| Jan-26 | 42,496 | 3.0000% | 1,274.88 | | | |
| | | | | 42,496 | 43,770.88 | 3,647.57 |
| Jan-27 | 0 | 3.0000% | 0.00 | | | |

# St. Paul's Home
# Project Structure

| | Stabilized Occupancy | | | | | | |
|---|---|---|---|---|---|---|---|
| **Development Project:** | | | | | | | |
| **Sources of Funds:** | | | | | | | |
| Mortgage Debt | 27,475,000 | | Building | $24,163,085 | | | |
| Sub Debt | - | | | | | | |
| STP Contributions: | | | | - | | | |
| Cash & Investments | 2,000,000 | | | | | | |
| Capital Campaign | 1,000,000 | | | | | | |
| LOI | 1,137,496 | | | | | | |
| **Total Sources** | 31,612,496 | | | | | | |
| | | Average Amortization Periods | | SNF | Sheltered | Apts | Total |
| **Uses of Funds:** | | | | | | | |
| Building - Capitalized | 24,163,085 | 40 | | 16,642,745 | 7,520,340 | - | 24,163,085 |
| FF&E - Capitalized | 1,600,000 | 10 | | 1,102,028 | 497,972 | - | 1,600,000 |
| CON Licensing Fees | 200,000 | NA | | 137,753 | 62,247 | - | 200,000 |
| PreMarketing Costs | 687,996 | Expense or COI | | 473,869 | 214,127 | - | 687,996 |
| Resplacement Reserve (500 per ILU bed) | 90,500 | NA | Balance Sheet Only | | | 90,500 | 90,500 |
| Loan Origination Financing Costs | 1,421,415 | 40 | | 872,124 | 394,086 | 155,205 | 1,421,415 |
| Working Capital | 549,500 | NA | Balance Sheet | 337,152 | 152,348 | 60,000 | 549,500 |
| Current Debt Refunding | 2,900,000 | NA | Balance Sheet | - | - | 2,900,000 | 2,900,000 |
| **Total Uses** | 31,612,496 | | | 19,565,671 | 8,841,120 | 3,205,705 | 31,612,496 |
| | | | | 61.89% | 27.97% | 10.14% | Check 31,612,496 |

| **Statistics** | SNF | Sheltered | Apts | Total |
|---|---|---|---|---|
| Aggregate % Square Feet Applied to Debt | 61.36% | 27.72% | 10.92% | 100.00% |
| Developed Square Feet Applied to Debt | 68.88% | 31.12% | 0.00% | 100.00% |
| Debt % Distributed from Detail Schedule | **61.89%** | **27.97%** | **10.14%** | 100.00% |

To be applied to principal and interest allocated by payer type.

**St. Paul's Home**
**Project Structure**
**Appendix A**

| | BSI Numbers | | | Stifel Numbers | | Additions to BSI Numbers | | | Final Appendix A | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **USE OF FUNDS** | **CLINICAL** | **NONCLINICAL** | **TOTAL** | **TOTAL** | **DIFFERENCE** | **CLINICAL** | **NONCLINICAL** | **TOTAL** | **CLINICAL** | **NONCLINICAL** | **TOTAL** |
| Preplanning Costs (Startup Mktg +Init | $99,871 | $45,129 | $145,000 | 687,996 | (542,996) | 373,998 | 168,998 | 542,996 | $473,869 | $214,127 | $687,996 |
| Site Survey and Soil Investigation | $27,551 | $12,449 | $40,000 | 137,500 | (97,500) | 67,155 | 30,345 | 97,500 | $94,706 | $42,794 | $137,500 |
| Site Prep | $482,137 | $217,863 | $700,000 | 700,000 | - | - | - | - | $482,137 | $217,863 | $700,000 |
| Off Site Work | $0 | $0 | $0 | | - | - | - | - | $0 | $0 | $0 |
| New Construction Contracts | $0 | $0 | $0 | | - | - | - | - | $0 | $0 | $0 |
| Modernization Contracts | $14,157,805 | $6,397,473 | $20,555,278 | 20,534,701 | 20,577 | (14,173) | (6,404) | (20,577) | $14,143,632 | $6,391,069 | $20,534,701 |
| Contingencies | $344,384 | $155,616 | $500,000 | 500,000 | - | - | - | - | $344,384 | $155,616 | $500,000 |
| Architectural / Engineering | $645,042 | $291,474 | $936,516 | 916,516 | 20,000 | (13,775) | (6,225) | (20,000) | $631,266 | $285,250 | $916,516 |
| Reserve for Replacement | | | $0 | 90,500 | (90,500) | 62,333 | 28,167 | 90,500 | $62,333 | $28,167 | $90,500 |
| Working Capital | | | $0 | 549,500 | (549,500) | 378,478 | 171,022 | 549,500 | $378,478 | $171,022 | $549,500 |
| Consulting and Other Fees | $325,098 | $146,902 | $472,000 | 472,000 | - | - | - | - | $325,098 | $146,902 | $472,000 |
| Movable or Other Equipment | $1,102,028 | $497,972 | $1,600,000 | 1,600,000 | - | - | - | - | $1,102,028 | $497,972 | $1,600,000 |
| Bond Issuance Expense (project related) | $103,315 | $46,685 | $150,000 | 1,421,415 | (1,271,415) | 875,709 | 395,706 | 1,271,415 | $979,024 | $442,391 | $1,421,415 |
| Net Interest Expense During Construction (project related) | $0 | $0 | $0 | 592,368 | (592,368) | 408,004 | 184,364 | 592,368 | $408,004 | $184,364 | $592,368 |
| Fair Market Value of Leased Space or Equipment | $0 | $0 | $0 | | - | - | - | - | $0 | $0 | $0 |
| Other Costs To Be Capitalized | $351,271 | $158,729 | $510,000 | 510,000 | - | - | - | - | $351,271 | $158,729 | $510,000 |
| Acquisition of Building or Other Property (excluding land) | | 2,900,000 | 2,900,000 | 2,900,000 | - | - | - | - | $0 | $2,900,000 | $2,900,000 |
| **TOTAL USES OF FUNDS** | $17,638,502 | $10,870,292 | $28,508,794 | 31,612,496 | (3,103,702) | 2,137,729 | 965,973 | 3,103,702 | **$19,776,231** | **$11,836,265** | **$31,612,496** |
| **"Use" Percentages** | | | | | | | | | 62.56% | 37.44% | 100.00% |
| **SOURCE OF FUNDS** | | | | | | | | | | | |
| Cash and Securities | | | | | | | | | 1,251,165 | 748,835 | 2,000,000 |
| Pledges | | | | | | | | | - | - | |
| Gifts and Bequests | | | | | | | | | 625,583 | 374,417 | 1,000,000 |
| Bond Issues (project related) | | | | | | | | | - | - | |
| Mortgage Proceeds | | | | | | | | | 17,187,885 | 10,287,115 | 27,475,000 |
| Subordinate Debt / LOI | | | | | | | | | 711,598 | 425,898 | 1,137,496 |
| Leases (fair market value) | | | | | | | | | | | |
| Governmental Appropriations | | | | | | | | | | | |
| Grants | | | | | | | | | | | |
| Other Funds and Sources | | | | | | | | | | | |
| **TOTAL SOURCES OF FUNDS** | | | | | | | | | **$ 19,776,231** | **$ 11,836,265** | **$ 31,612,496** |

**Tellatin, Short & Hansen, Inc.**
St. Louis, Missouri
Salem, Oregon
Boston, Massachusetts
Edwardsville, Illinois
www.tellatin.com

**An Appraisal**
Presented in a
**Summary Report**

# St. Paul's Home for the Aged

1021 West E Street
Belleville, St. Clair County, Illinois
TS&H File Reference: 1118776

Prepared for
M&I Bank and BMO Harris Bank N.A.

Effective Date of the Appraisal
As Is Value September 14, 2011

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# Tellatin, Short & Hansen, Inc.

www.tellatin.com

| Western | Central | Eastern |
|---|---|---|
| C. Mark Hansen, CGA, Principal | James K. Tellatin, MAI, Principal<br>Sterling E. Short, MAI, Principal | Melanie J. Kosich |
| 130 Salem Heights Avenue, Suite 130<br>Salem, Oregon 97302<br>T 503.485.5118 F 503.485.5120 | 15455 Conway Road, Suite 355<br>Chesterfield, Missouri 63017<br>T 636.530.0009 F 636.530.0046 | 40 Sedgemeadow Road<br>Wayland, Massachusetts 01778<br>T 508.358.7387 F 508.358.2819 |


October 4, 2011

Ms. Claire Krueger
M&I Bank
13205 Manchester Road
St. Louis, Missouri 63131

RE: An Appraisal in a **Summary** Report
St. Paul's Home for the Aged
1021 West E Street
Belleville, St. Clair County, Illinois 62220
Tellatin, Short & Hansen, Inc. File Reference: 1118776

Dear Ms. Krueger:

In accordance with the signed engagement contract dated August 12, 2011 (shown as Exhibit A in this report), we have appraised St. Paul's Home for the Aged, an existing 113-bed skilled nursing and 22-bed sheltered care facility.

The purpose of the appraisal is to develop an opinion of the "as is" market value for the going concern, also known as the market value for the total assets of the business, including the fee simple interest in the real estate. A description of the property, together with information providing a basis for our opinions, is presented in the accompanying self-contained report.

It is our understanding that the intended use of this appraisal is to assist in documenting the value for loan underwriting, risk classification, and other bank purposes. This report and its contents are solely for the intended use, and it should not be relied upon for any other purpose. Otherwise, neither the whole nor any part of this appraisal or any reference thereto may be included in any document, statement, appraisal, or circular without our explicit, prior written approval of the form and context in which it appears.

Our analyses, opinions, and conclusions were developed, and this report has been prepared, in conformity with: the Uniform Standards of Professional Appraisal Practice of the Appraisal Foundation, and the requirements of the Code of Professional Ethics and Standards of Professional Practice of the Appraisal Institute; Title and the appraisal guidelines of M&I Bank and BMO Harris Bank N.A.

This appraisal is not based upon a requested minimum or maximum valuation, a specific valuation, the approval of a loan or any prearranged condition that warrants a bias. In the course of our fieldwork, we have determined that the appraised property has no natural, cultural, scientific or recreational value.

Based on the data, analyses and conclusions presented in the attached report, it is our opinion that the "as is" market value of the going concern, including the fee simple interest in the real property is:

**$5,250,000** as of **September 14, 2011**

The date of this report is October 4, 2011.

The accompanying prospective financial analysis is based on assumptions and opinions developed in connection with the appraisal. However, some assumptions inevitably will not materialize, and unanticipated events and circumstances will occur. The actual results achieved during the holding period will vary from our forecasts, and these variations may be material. We have not been engaged to evaluate the effectiveness of management, and we are not responsible for management's actions such as the quality of care or marketing efforts.

A copy of this report, together with the field data from which it was prepared, is retained in our files. These data are available for your inspection upon request.

Respectfully submitted,

**Tellatin, Short & Hansen, Inc.**

James K. Tellatin, MAI
Principal
Illinois Certified General Real Estate Appraiser
# 553.000730

Bradley J. Schopp
Senior Associate
Illinois Certified General Real Estate Appraiser
# 553.001696

**Tellatin, Short & Hansen, Inc.**
St. Louis, Missouri
Salem, Oregon
Boston, Massachusetts
Edwardsville, Illinois
www.tellatin.com

**An Appraisal**
Presented in a
**Summary Report**

# St. Paul's Home for the Aged

901 West E Street
Belleville, St. Clair County, Illinois

Prepared for
M&I Bank and BMO Harris Bank N.A.

Effective Date of the Appraisal
As Is September 14, 2011

Subject Property Latitude and Longitude Coordinates
38° 31' 07" North, 89° 59' 44" West

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# Tellatin, Short & Hansen, Inc.

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October 4, 2011

File Reference: 1118776

Ms. Claire Krueger
M&I Bank
13205 Manchester Road,
St. Louis, MO 63131

RE: An Appraisal Presented in a **Summary** Report
St. Paul's Home for the Aged
901 West E Street
Belleville, St. Clair County, Illinois 62220

Dear Ms. Krueger:

In accordance with the signed engagement contract dated August 12, 2011 (shown as Exhibit A in this report), we have appraised St. Paul's Home for the Aged, an existing 53-unit, 53-bed, month-to-month independent living facility consisting of: 53 month-to-month independent living units.

The purpose of the appraisal is to estimate the "as is" market value for the going concern including the fee simple interest in the real estate. A description of the property, together with information providing a basis for estimates, is presented in the accompanying report.

It is our understanding that the intended use of this appraisal is to assist in documenting the value for loan underwriting, risk classification, and other bank purposes. This report and its contents are solely for the intended use, and it should not be relied upon for any other purpose. Otherwise, neither the whole nor any part of this appraisal or any reference thereto may be included in any document, statement, appraisal, or circular without our explicit, prior written approval of the form and context in which it appears.

Our analyses, opinions, and conclusions were developed, and this report has been prepared, in conformity with: the Uniform Standards of Professional Appraisal Practice of the Appraisal Foundation, and the requirements of the Code of Professional Ethics and Standards of Professional Practice of the Appraisal Institute;Title XI of the Financial Institutions Reform, Recovery, and Enforcement Act of 1989 (FIRREA); and the appraisal guidelines of M&I Bank and BMO Harris Bank N.A.

This appraisal is not based upon a requested minimum or maximum valuation, a specific valuation, the approval of a loan or any prearranged condition that warrants a bias. In the course of our fieldwork, we have determined that the appraised property has no natural, cultural, scientific or recreational value.

Based on the data, analyses and conclusions presented in the attached report, it is our opinion that the "as is" market value of the going concern of the subject property is:

**$3,960,000 as of September 14, 2011**

The accompanying prospective financial analysis is based on assumptions and opinions developed in connection with the appraisal. However, some assumptions inevitably will not materialize, and unanticipated events and circumstances will occur. The actual results achieved during the holding period will vary from our forecasts, and these variations may be material. We have not been engaged to evaluate the effectiveness of management, and we are not responsible for management's actions such as the quality of care or marketing efforts.

A copy of this report, together with the field data from which it was prepared, is retained in our files. These data are available for your inspection upon request.

Respectfully submitted,

**Tellatin, Short & Hansen, Inc.**

By: James K. Tellatin, MAI
Principal
Illinois Certified General Real Estate Appraiser
# 553.000730

Bradley J. Schopp
Assistant
Illinois Certified General Real Estate Appraiser
# 553.001696