

County: St. Croix  
 SIGNET HEALTH & REHAB-NEW RICHMOND  
 505 W 8TH ST  
 NEW RICHMOND 54017 Phone:(715) 246-6851

Facility ID: 5370

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Ownership: Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with Hospital? No  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 37

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	73.0	
Supp. Home Care-Personal Care	No	Developmental Disabilities	5.4	Under 65	0.0	1 - 4 Years	8.1	
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	37.8	65 - 74	8.1	More Than 4 Years	18.9	
Day Services	No	Mental Illness (Other)	5.4	75 - 84	37.8		100.0	
Respite Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.9	*****		
Adult Day Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.1	Full-Time Equivalent		
Adult Day Health Care	No	Cancer	0.0			Nursing Staff per 100 Residents		
Congregate Meals	No	Fractures	0.0		100.0	(12/31/04)		
Home Delivered Meals	No	Cardiovascular	8.1	65 & Over	100.0	-----		
Other Meals	No	Cerebrovascular	5.4			RNs	12.1	
Transportation	No	Diabetes	13.5	Gender	%	LPNs	21.7	
Referral Service	No	Respiratory	2.7			Nursing Assistants,		
Other Services	No	Other Medical Conditions	21.6	Male	29.7	Aides, & Orderlies		
Provide Day Programming for Mentally Ill	No		-----	Female	70.3	40.2		
Provide Day Programming for Developmentally Disabled	No		100.0		-----			
					100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care		Per Diem (\$)	Total Resi-dents	% Of All
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%			
Int. Skilled Care	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0
Skilled Care	1	100.0	288	29	100.0	126	0	0.0	0	7	100.0	161	0	0	0.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0
Total	1	100.0		29	100.0		0	0.0		7	100.0		0	0	0.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		% Needing Assistance of			Total	
Percent Admissions from:		Activities of	% Independent	One Or Two Staff	% Totally Dependent	Number of Residents
Private Home/No Home Health	9.2	Daily Living (ADL)		78.4	13.5	37
Private Home/With Home Health	2.6	Bathing	0.0	86.5	13.5	37
Other Nursing Homes	1.3	Dressing	8.1	78.4	13.5	37
Acute Care Hospitals	85.5	Transferring	29.7	51.4	18.9	37
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	29.7	48.6	21.6	37
Rehabilitation Hospitals	1.3	Eating	64.9	24.3	10.8	37
Other Locations	0.0	*****				
Total Number of Admissions		Continence		% Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter		Receiving Respiratory Care		8.1
Private Home/No Home Health	28.0	Occ/Freq. Incontinent of Bladder		Receiving Tracheostomy Care		0.0
Private Home/With Home Health	4.0	Occ/Freq. Incontinent of Bowel		Receiving Suctioning		0.0
Other Nursing Homes	6.7			Receiving Ostomy Care		2.7
Acute Care Hospitals	38.7	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained		Receiving Mechanically Altered Diets		32.4
Rehabilitation Hospitals	1.3					
Other Locations	1.3	Skin Care		Other Resident Characteristics		
Deaths	20.0	With Pressure Sores		Have Advance Directives		94.6
Total Number of Discharges (Including Deaths)	75	With Rashes		Medications		
				Receiving Psychoactive Drugs		56.8

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 Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities  
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	This Facility %	Ownership: Proprietary Peer Group		Bed Size: 50-99 Peer Group		Licensure: Skilled Peer Group		All Facilities	
		%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	60.7	88.5	0.69	89.0	0.68	90.5	0.67	88.8	0.68
Current Residents from In-County	81.1	80.0	1.01	81.8	0.99	82.4	0.98	77.4	1.05
Admissions from In-County, Still Residing	34.2	17.8	1.92	19.0	1.80	20.0	1.71	19.4	1.76
Admissions/Average Daily Census	205.4	184.7	1.11	161.4	1.27	156.2	1.32	146.5	1.40
Discharges/Average Daily Census	202.7	188.6	1.07	163.4	1.24	158.4	1.28	148.0	1.37
Discharges To Private Residence/Average Daily Census	64.9	86.2	0.75	78.6	0.82	72.4	0.90	66.9	0.97
Residents Receiving Skilled Care	100	95.3	1.05	95.5	1.05	94.7	1.06	89.9	1.11
Residents Aged 65 and Older	100	92.4	1.08	93.7	1.07	91.8	1.09	87.9	1.14
Title 19 (Medicaid) Funded Residents	78.4	62.9	1.25	60.6	1.29	62.7	1.25	66.1	1.19
Private Pay Funded Residents	18.9	20.3	0.93	26.1	0.72	23.3	0.81	20.6	0.92
Developmentally Disabled Residents	5.4	0.9	6.09	1.0	5.23	1.1	4.82	6.0	0.90
Mentally Ill Residents	43.2	31.7	1.37	34.4	1.26	37.3	1.16	33.6	1.29
General Medical Service Residents	21.6	21.2	1.02	22.5	0.96	20.4	1.06	21.1	1.03
Impaired ADL (Mean)	45.4	48.6	0.93	48.3	0.94	48.8	0.93	49.4	0.92
Psychological Problems	56.8	56.4	1.01	60.5	0.94	59.4	0.96	57.7	0.98
Nursing Care Required (Mean)	6.8	6.7	1.01	6.8	0.99	6.9	0.98	7.4	0.91