

MEMORANDUM

TO: Hon. Wanda F. Willingham, Chair
Audit and Finance Committee

FROM: Mark S. Olsen
Executive Director

DATE: October 15, 2025

SUBJECT: Proposed 2026 Budget

The following is in response to the Audit and Finance Committee information request for the 2026 Budget of Shaker Place Rehabilitation and Nursing Center.

#1. Identify department representative appearing before the Audit & Finance Committee for your agency budget presentation.

Mark S. Olsen, Executive Director

#2. Identify by line item all vacant positions in your department

Please see attached document for #2.

#3. Identify by line item any new position(s), how the position(s) will be funded and the reimbursement rate(s), if applicable.

Shaker Place will be opening a full-service café on or about January 1, 2026. The café will be operated and managed through our current food service department. These new positions are needed to operate the café 7 days/week, 12 hours per day and will be funded/offset by the revenue generated by café sales.

Please see attached spreadsheet for #3.

#4. Identify by line item any proposed salary increase(s) beyond union contract commitments. Include justification for those raise(s).

N/A

#5. *Identify by line item any position proposed to be eliminated or salary decreased.*

The previously approved nursing aide trainee individual positions have been transitioned to the Personnel Non-Individual - Temporary Help line.

Please see attached spreadsheet for #5.

#6. *Identify by line item all positions that are funded by grant money, the percentage of funding provided by the grant and indicate whether there is a commitment that the grant has been renewed for 2026.*

Shaker Place has no budgeted positions that are funded through grant programs.

#7 *Identify by line item all job titles proposed to be changed or moved to another line item. (e.g., reclassifications).*

N/A

#8. *Provide an itemized breakdown of specific expenditures regarding fees for service lines and miscellaneous contractual expense lines and indicate 2025 expenditures compared to 2026 proposed expenditures (Include a column for each expenditure year).*

Please see attached spreadsheet for #8.

#9. *Identify any new initiatives and/or eliminated programs, and reimbursements associated with those programs.*

There are two initiatives that will be new for 2026.

1. Café – Shaker Place will open and run a full service retail café for the staff of Shaker Place, with the option to also serve visitors at a future date. The café is currently under construction utilizing existing space within the staff dining area and we anticipate opening the café in January of 2026. The meal cost to the staff will be the actual food cost plus an overhead mark-up, which together will be designed to be a break even operation.
2. Ambulette Service – Shaker Place has submitted applications to the NYS-DOT as well as NYS Medicaid to operate/reimburse an ambulette service exclusively for the residents of Shaker Place.

#10. *Identify all County vehicles used by your department. Include the title of any employee(s) assigned each vehicle and the reason for the assignment of a County vehicle to that employee.*

Please see attached document for #10. All vehicles are utilized on or around our property and are not taken home or assigned to any staff member.

#11. *Provide a specific breakdown of the use for the proposed funding for all Conferences/Training/Tuition line items in your department budget.*

Key personnel and direct line staff attend education conferences to maintain their licenses as required by the New York State Department of Health and or the Department of Education, as well as to stay current with the latest standards of care and practices. We also plan to implement an LMS (Learning Management System) for use by all departments.

#12. *Provide a specific breakdown of overtime line items in your department budget including the actual overtime expenditures for the previous two years.*

Please see attached spreadsheet for #8.

#13. *Identify by line item any positions that were established/changed during the 2025 fiscal year.*

Please see attached spreadsheet for #13.

#14. *Please describe the biggest risk your department faces and the actions you have taken (or will take in 2026) to better understand that risk and mitigate it.*

Workforce issues continue to be the greatest risk to our sector of healthcare. There remains tremendous instability overall within the nursing profession as well as a shortage of educational opportunities for those wanting to enter or advance a nursing career. In 2025 we initiated our own facility based certified nurse aide training program and have graduated more than 50 CNA's. Shaker Place has also partnered with Maria College to provide staff with advanced education programs. In 2026, we will be using an electronic applicant tracking system to more effectively and efficiently recruit and onboard new staff to our facility. We also plan to further our programs geared to improve retention. The driving force behind these retention efforts is in elevating our workplace culture. In 2026 we plan to start a process to evaluate employee satisfaction through systematic satisfaction surveys conducted by a third party to help define opportunities for improvement.

#15. *Please list performance indicators and metrics used by your department and current statistics for those metrics.*

One of the top performance measures that we are currently using are customer satisfaction surveys, which were initiated in 2024 and conducted by Pinnacle Quality Insights. These surveys (12 customers/month) generate a tremendous amount of information and detail with regard to the level of satisfaction with the services we provide. Attached is a sample of our monthly scores from October 2025. However, this is only a fraction of the information provided each month. We also get the verbatim comments of those surveyed specific to their likes and dislikes. The results of these surveys are

discussed at the monthly facility department head meeting where we develop an action plan for select issues.

Shaker Place has been utilizing PointRight Analytics, an industry top rated quality measures and performance software. PointRight utilizes "real-time" Minimum Data Set (MDS) data, as well as Medicare claims-based data, to analyze the information and identify performance outliers and trends to focus quality assurance and performance improvement (QAPI). A sample report is attached.

We also utilize CMS 5-Star rating data, which is generally 6-month or older data. Attached please find our most current performance CMS 5-star indicators that we utilize for our QAPI program.

#16. *Note specifically all potential new unfunded mandates, regulations, risks to grant revenues, risks to reimbursement revenues, from any source.*

1. The 2025-2026 NYS budget provides for increased funding for nursing homes over the next two years. However, this new funding is tied to a technical tax on Medicare insurance providers (MCO Tax), which with the passage of the OBBBA (One Big Beautiful Bill Act), may be in jeopardy. At the moment, state and national lobbying efforts seem to be holding on a delay of the implementation of the change which would make this MCO Tax go away, as well as the increased state funding for 2025-2026.
2. The 2025-2026 NYS budget continues the capital component of Medicaid rates by an additional 10%. This will result in a cut in reimbursement of approximately \$500,000/yr.
3. New York State Legislation that mandates 3.5 hours of care per day, per resident. The breakdown requires 2.2 hours of Certified Nursing care; 1.1 hours of Nursing care and .2 hours of additional care that can come from either of the above categories. Not only is this a potential funding issue, but it is clear the supply of Nurses and Certified Nursing Assistants are not meeting the demand.
4. CMS continually revises their calculations for quality measures and staffing calculations which effect the 5-Star Rating. Monitoring these changes and making operational adjustments is imperative in ensuring the highest ratings possible.

Shaker Place Rehabilitation and Nursing Center

Response to Albany County Legislature re Proposed 2026 Budget - #2 - Vacancies as of 10/14/25

October 14, 2025

Position	Position Desc	State Pos	Org	Object	Project	Account Desc
640004	ASSISTANT ADMINISTRA	001	NH960205	11312	10000	Assistant Administrator
640027	HEAD NURSE	005	NH960251	12122	10000	Head Nurse
640031	HEAD NURSE	009	NH960251	12122	10000	Head Nurse
640032	HEAD NURSE	010	NH960251	12122	10000	Head Nurse
640036	HEAD NURSE	014	NH960251	12122	10000	Head Nurse
640047	SUPERVISING NURSE	009	NH960251	12125	10000	Supervising Nurse
640049	SUPERVISING NURSE	301	NH960251	12125	10000	Supervising Nurse
640051	SUPERVISING NURSE PT	001	NH960251	12126	10000	Supervising Nurse PT
640053	SUPERVISING NURSE PT	003	NH960251	12126	10000	Supervising Nurse PT
640054	SUPERVISING NURSE PT	004	NH960251	12126	10000	Supervising Nurse PT
640125	LPN PART TIME	004	NH960251	13134	10000	Licensed Practical Nurse PT
640162	LICENSED PRACTICAL NURSE	034	NH960251	13132	10000	Licensed Practical Nurse
640179	LPN PART TIME	006	NH960251	13134	10000	Licensed Practical Nurse PT
640184	LPN PART TIME	011	NH960251	13134	10000	Licensed Practical Nurse PT
640192	RESIDENT CARE COORD	002	NH960213	12165	10000	Resident Care Coordinator
640214	QUAL IMPROV COORD	001	NH960205	12166	10000	Quality Improvement Coor
640223	NURSING ASSISTANT	100	NH960251	15112	10000	Nursing Assistant
640258	NURSING ASSISTANT	010	NH960251	15112	10000	Nursing Assistant
640266	NURSING ASSISTANT	019	NH960251	15112	10000	Nursing Assistant
640288	NURSING ASSISTANT	046	NH960251	15112	10000	Nursing Assistant
640300	NURSING ASSISTANT	058	NH960251	15112	10000	Nursing Assistant
640301	NURSING ASSISTANT	059	NH960251	15112	10000	Nursing Assistant
640310	NURSING ASSISTANT	070	NH960251	15112	10000	Nursing Assistant
640317	NURSING ASSISTANT	079	NH960251	15112	10000	Nursing Assistant
640325	NURSING ASSISTANT	087	NH960251	15112	10000	Nursing Assistant
640339	NURSING ASSISTANT	143	NH960251	15112	10000	Nursing Assistant
640397	NURSING ASSISTANT	329	NH960251	15112	10000	Nursing Assistant
640418	NURSING ASSISTANT	352	NH960251	15112	10000	Nursing Assistant
640438	NURSING ASSISTANT PT	015	NH960251	15114	10000	Nursing Assistant PT
640447	SENIOR NURSING ASSISTANT	009	NH960251	15116	10000	Senior Nursing Assistants
640448	NURSING ASSISTANT PT	025	NH960251	15114	10000	Nursing Assistant PT
640449	NURSING ASSISTANT PT	026	NH960251	15114	10000	Nursing Assistant PT
640454	NURSING ASSISTANT PT	031	NH960251	15114	10000	Nursing Assistant PT
640472	OCCUPATIONAL THERAPY	001	NH960240	15151	10000	Occupational Therapy Assist
640504	LTA LEADER	007	NH960214	15291	10000	Activity Leader
640529	ACCOUNT CLERK II	001	NH960204	16104	10000	Account Clerk II
640533	APPLICATIONS ANALYST	001	NH960204	12717	10000	Applications Analyst
640556	CLERK TYPIST I	010	NH960213	16236	10000	Clerk Typist I
640573	PAINTER	001	NH960206	17125	10000	Painter
640624	FOOD SERVICE HELPER	018	NH960211	18016	10000	Food Service Helper
640626	FOOD SERVICE HELPER	020	NH960211	18016	10000	Food Service Helper
640640	FOOD SERVICE HELPER	312	NH960211	18016	10000	Food Service Helper
640646	FOOD SERVICE HELPER PART TIME	006	NH960211	18017	10000	Food Service Helper PT
640652	FOOD SERVICE HELPER	012	NH960211	18017	10000	Food Service Helper PT
640777	LPN PART TIME	008	NH960251	13134	10000	Licensed Practical Nurse PT
640779	LICENSED PRACTICAL N	331	NH960251	13132	10000	Licensed Practical Nurse

640828	NURSING ASSISTANT PT	004	NH960251	15114	10000	Nursing Assistant PT
640830	NURSING ASSISTANT PT	006	NH960251	15114	10000	Nursing Assistant PT
640853	CLERK I WARD CLERK	008	NH960213	16303	10000	Medical Clerk Typist PT
640922	ENVIRON SERVICE AIDE	003	NH960210	18120	10000	Environmental Services Aide
640933	ENVIRON SERVICE AIDE	014	NH960210	18120	10000	Environmental Services Aide
640943	ENVIRON SERVICE AIDE	024	NH960210	18120	10000	Environmental Services Aide
640948	ENVIRON SERVICE AIDE	029	NH960210	18120	10000	Environmental Services Aide
640965	ASSISTANT COOK PT	001	NH960211	18009	10000	Assistant Cook PT
640966	ASSISTANT COOK PT	002	NH960211	18009	10000	Assistant Cook PT
640967	FISCAL OFFICER II	001	NH960204	12540	10000	Fiscal Officer II
641014	RECEPTIONIST	001	NH960208	16412	10000	Receptionist
641015	OCCUP THERAPY ASST	006	NH960240	15151	10000	Occupational Therapy Assist
641018	ENVIRONMENTAL SERVICE AIDE PART TIME	001	NH960210	18121	10000	Enviornmental Svs Aide PT
641020	ENVIRONMENTAL SERVICE AIDE PART TIME	003	NH960210	18121	10000	Enviornmental Svs Aide PT
641021	ENVIRONMENTAL SERVICE AIDE PART TIME	004	NH960210	18121	10000	Enviornmental Svs Aide PT
650007	COOK PART TIME	002	NH960211	18007	10000	Cook PT
650008	ASSISTANT COOK PART TIME	003	NH960211	18009	10000	Assistant Cook PT
650012	NURSING AIDE TRAINEE F/T	001	NH960251	15118	10000	Nursing Aide Trainee FT
650013	NURSING AIDE TRAINEE F/T	002	NH960251	15118	10000	Nursing Aide Trainee FT
650014	NURSING AIDE TRAINEE F/T	003	NH960251	15118	10000	Nursing Aide Trainee FT
650015	NURSING AIDE TRAINEE F/T	004	NH960251	15118	10000	Nursing Aide Trainee FT
650016	NURSING AIDE TRAINEE F/T	005	NH960251	15118	10000	Nursing Aide Trainee FT
650017	NURSING AIDE TRAINEE F/T	006	NH960251	15118	10000	Nursing Aide Trainee FT
650018	NURSING AIDE TRAINEE F/T	007	NH960251	15118	10000	Nursing Aide Trainee FT
650019	NURSING AIDE TRAINEE F/T	008	NH960251	15118	10000	Nursing Aide Trainee FT

Shaker Place Rehabilitation & Nursing Center
Response to Albany County Legislature re: Proposed 2026 Budget - #3 New Positions
October 16, 2025

Expense			
<u>Fund</u>	<u>Object</u>	<u>Title</u>	<u>2026 Requested</u>
NH6020		18006 Cook	\$ 47,325.00
NH6020		18006 Cook	\$ 47,324.00
NH6020		18007 Cook, PT	\$ 18,967.00
NH6020		18013 Supervising Food Service Helper	\$ 40,198.00
NH6020		18013 Supervising Food Service Helper	\$ 40,198.00
NH6020		18013 Supervising Food Service Helper, PT	\$ 16,079.00
NH6020		18018 Assistant Cook	\$ 40,954.00
NH6020		18018 Assistant Cook	\$ 40,954.00
NH6020		18018 Assistant Cook	\$ 40,954.00
NH6020		18019 Assistant Cook, Part-Time	\$ 17,016.00
		Total	\$ 349,969.00
Revenue			
NH6020		2450 Commissions	\$ 349,969.00

Shaker Place Rehabilitation and Nursing Center
Response to Albany County Legislature re Proposed 2026 Budget - #5 - Eliminated Positions
October 14, 2025

Org	Object	State Pos	Position	Project	Position Desc	Salary
NH960251	15118	001	650012	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00
NH960251	15118	002	650013	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00
NH960251	15118	003	650014	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00
NH960251	15118	004	650015	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00
NH960251	15118	005	650016	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00
NH960251	15118	006	650017	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00
NH960251	15118	007	650018	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00
NH960251	15118	008	650019	10000	NURSING AIDE TRAINEE F/T	\$ 38,220.00

Shaker Place Rehabilitation and Nursing Center
Response to Albany County Legislature re Proposed 2026 Budget - #8 - Contractual Expenditures as of 10/14/25
October 14, 2025

Account	Description	2025 Expenses (through 10/14/2025)	2026 Proposed
44020	Office Supplies	\$ 20,158	\$ 20,000
44021	Computer Supplies	\$ -	\$ 5,000
44022	Maintenance Supplies	\$ 86,335	\$ 100,000
44023	Other Medical Services	\$ 434,781	\$ 460,000
44024	Housekeeping Uniforms	\$ 117,645	\$ 100,000
44028	Safety Supplies	\$ -	\$ 25,000
44032	Laundry and Linen	\$ 197,980	\$ 500,000
44033	Greater NYS Education Fund	\$ 33,712	\$ 40,000
44034	Child Care Benefit	\$ 33,712	\$ 40,000
44035	Postage	\$ 2,675	\$ 5,000
44036	Telephone	\$ 40,235	\$ 70,000
44037	Insurance	\$ 633,676	\$ 639,835
44038	Administrative - Travel, Mileage	\$ -	\$ 2,500
44039	Conferences, Training & Tuition	\$ 71,237	\$ 100,000
44040	Books & Periodicals	\$ 572	\$ 2,500
44042	Printing & Duplication	\$ 16,185	\$ 20,000
44043	Personnel - Advertising	\$ 509	\$ 100,000
44044	Auditing Fees	\$ 29,000	\$ 40,000
44046	Fees for Services	\$ 4,432	\$ 10,000
44047	Administrative	\$ 111,185	\$ 125,000
44049	Other Medical Services - Special Programs	\$ 33,223	\$ 50,000
44050	Refuse Charge	\$ -	\$ 55,000
44065	Photocopier Lease	\$ 8,212	\$ 15,000
44069	Other Medical Services	\$ 1,679,362	\$ 2,000,000
44070	Equipment Repair & Rental	\$ 46,235	\$ 75,000
44071	Property Repair & Rental	\$ 109,211	\$ 125,000
44091	Client Transportation	\$ 4,965	\$ 40,000
44101	Electric	\$ 245,527	\$ 330,000
44102	Gas & Oil	\$ 5,058	\$ 7,500
44104	Natural Gas	\$ 90,439	\$ 150,000
44105	Water	\$ 25,660	\$ 50,000
44106	Sewer Charges	\$ 59,580	\$ 40,000
44108	Testing	\$ -	\$ 3,000
44201	Uniforms and Clothing	\$ 15,042	\$ 25,000
44250	Drugs	\$ 303,906	\$ 300,000
44252	Clinical Medical Supplies	\$ 39,118	\$ 35,000
44253	Food & Concessions	\$ 948,358	\$ 1,350,000
44254	Dietary - Uniforms	\$ 55,952	\$ 75,000
44300	Association Dues	\$ 44,621	\$ 45,000
44699	Assessment	\$ 1,311,432	\$ 1,950,000
44903	Shared Services Charges	\$ 7,466	\$ 587,159

				Shaker Place Rehabilitation and Nursing Center
				Attachment #10
				Vehicles - Shaker Place Rehabilitation and Nursing Center
Plate No.	Yr	Vin Number	Make & Model	
BD8631	2021	1FDEE3FN5MDC09563	FORD E350 BUS W/LIFT	
AJ9371	2000	JSDB4B144Y7001356	GMC BOX TRUCK	
BA9286	2018	NM0GE9F23K1392012	Ford Transit Con XLT	
BA6526	2018	1G1FW6S01J4130817	Chevy Bolt EV	
BD5600	2020	1GB3YSE79LF254433	Chevy Silverado 3500 CK31003	
BD5599	2020	1GC5YLE75LF231211	Chevy Silverado 2500 CK20753	
BB5601	2020	1GC5YLE72LF231036	Chevy Silverado 2500 CK20753	

Shaker Place Rehabilitation and Nursing Center
Response to Albany County Legislature re Proposed 2026 Budget - #11 Newly Created Positions
October 14, 2025

Position	Position Desc	Org	Object	Project	Department Name
640022	Asst.Dir.Leisure Time Activity	NH9602	11919	10000	Shaker Place Rehabilitation and Nursing Center
652035	Speech Pathologist	NH9602	12168	10000	Shaker Place Rehabilitation and Nursing Center
652036	Speech Pathologist	NH9602	12168	10000	Shaker Place Rehabilitation and Nursing Center
640519	Transportation Aide	NH9602	15296	10000	Shaker Place Rehabilitation and Nursing Center
640520	Transportation Aide	NH9602	15296	10000	Shaker Place Rehabilitation and Nursing Center
652037	ASST DIR OF DIETARY SERVICES	NH9602	11337	10000	Shaker Place Rehabilitation and Nursing Center

Shaker Place Rehabilitation and Nursing Center
Response to Albany County Legislature re Proposed 2024 Budget - #12 - Overtime Expenditures
October 14, 2025

	2023	2024	2025 (through 10/14/2025)
\$	2,152,718	\$ 3,536,361	\$ 2,833,443



PINNACLE™
QUALITY INSIGHT

SHAKER PLACE REHABILITATION AND NURSING CENTER
COVER PAGE



FAVORABILITY
RATING

98%

Percentage of respondents who were
willing to recommend your care over
the last 12 months.



AVERAGE
SCORE

4.81

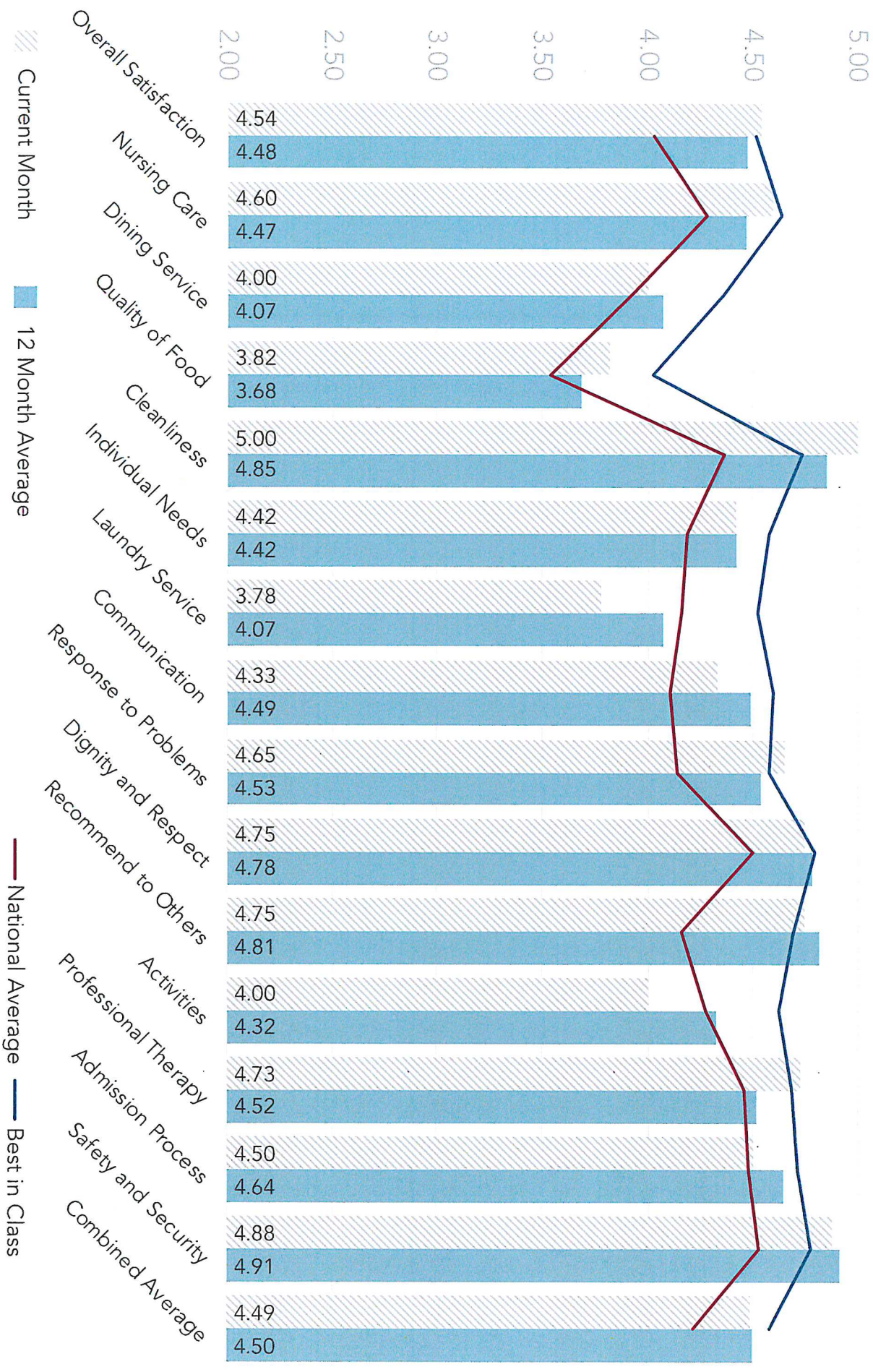
12-month average score for
'Recommend to Others'



FOCUS
AREA

Response to Problems

Pay special attention to your focus area,
it has the largest impact on your overall
satisfaction ratings.





DASHBOARD - SHAKER PLACE REHABILITATION AND NURSING CENTER

The following report displays the average score for the last month, last 3 months, and last 12 months. The variance shows the difference from the National Average. The National Average, Best in Class Level and Company Average (if applicable) are listed for comparative purposes. Quarterly averages are rolling quarters. The arrows indicate if the recent quarter is above or below the average of the previous three quarters. The report also shows the percentages of positive responses (4s and 5s) and negative

	AVERAGES				BENCHMARKS			QUARTERLY AVERAGES						RESPONSE PERCENTAGES				
	Oct 25	Last 3 Months	Last 12 Months		National AVG	Best in Class	Corp. AVG	Aug-Oct	May-Jul	Feb-Apr	Nov-Jan	Top 2 Satisfied	Bottom 2 Dissatisfied					
			AVG	Variance								Month	QTR	Year	Month	QTR	Year	
Overall Satisfaction	4.54	4.49	4.48	0.45	4.03	4.52	-	↑ 4.49	4.49	4.47	4.46	92%	92%	92%	0%	0%	1%	
Nursing Care	4.60	4.53	4.47	0.19	4.28	4.64	-	↑ 4.53	4.56	4.36	4.43	100%	97%	94%	0%	0%	3%	
Dining Service	4.00	4.00	4.07	0.15	3.92	4.36	-	↓ 4.00	3.90	4.23	4.14	67%	69%	74%	0%	0%	4%	
Quality of Food	3.82	3.73	3.68	0.14	3.54	4.03	-	↑ 3.73	3.52	3.84	3.62	64%	60%	59%	0%	10%	12%	
Cleanliness	5.00	4.83	4.85	0.49	4.36	4.74	-	↓ 4.83	4.78	4.92	4.86	100%	100%	99%	0%	0%	1%	
Individual Needs	4.42	4.46	4.42	0.24	4.18	4.58	-	↑ 4.46	4.37	4.50	4.36	92%	94%	91%	8%	3%	2%	
Laundry Service	3.78	3.75	4.07	-0.08	4.16	4.53	-	↓ 3.75	4.19	4.30	4.06	67%	65%	78%	33%	19%	8%	
Communication	4.33	4.31	4.49	0.38	4.11	4.60	-	↓ 4.31	4.54	4.63	4.47	67%	80%	88%	0%	6%	3%	
Response to Problems	4.65	4.41	4.53	0.39	4.14	4.58	-	↓ 4.41	4.42	4.72	4.56	80%	88%	90%	0%	3%	2%	
Dignity and Respect	4.75	4.82	4.78	0.28	4.50	4.80	-	↑ 4.82	4.71	4.80	4.79	92%	97%	98%	0%	0%	0%	
Recommend to Others	4.75	4.76	4.81	0.65	4.16	4.70	-	↓ 4.76	4.79	4.88	4.83	100%	100%	98%	0%	0%	1%	
Activities	4.00	4.21	4.32	0.05	4.27	4.63	-	↓ 4.21	4.40	4.06	4.60	80%	86%	86%	0%	5%	3%	
Professional Therapy	4.73	4.61	4.52	0.06	4.46	4.69	-	↑ 4.61	4.40	4.48	4.56	100%	97%	89%	0%	3%	4%	
Admission Process	4.50	4.61	4.64	0.16	4.48	4.72	-	↓ 4.61	4.73	4.53	4.70	83%	92%	94%	0%	0%	1%	
Safety and Security	4.88	4.84	4.91	0.38	4.53	4.78	-	↓ 4.84	4.90	4.94	4.96	100%	97%	99%	0%	0%	0%	
Combined Average	4.49	4.46	4.50	0.29	4.21	4.58	-	↓ 4.46	4.48	4.54	4.51	86%	89%	89%	2%	3%	3%	

Total Respondents: October: 12 Last 3 Months: 36 last 12 months: 148

Congratulations, the Key Indicators bolded blue have qualified as Best in Class.



KEY DRIVERS & IMPROVEMENT BENCHMARKS

The following Key Drivers are the areas that directly impact your Recommend to Others score. The drivers are listed in order of importance.

Reaching or surpassing the Improvement Benchmarks in each of the five areas will give you the best chance of achieving the targeted recommendation rate. **All numbers showing are percentages of respondents who gave a 4 or 5.**

For a full explanation, please visit: pinnacleqi.com/reports/keydrivers

90% RECOMMENDATION RATE

This target is based off a nationwide goal to reach a 90% recommendation rating

Key Driver	Actual	Benchmark
Individual Needs	90.6%	89.1%
Response to Problems	90.2%	88.6%
Dignity and Respect	97.9%	94.7%
Nursing Care	93.6%	90.1%
Communication	88.5%	86.6%
Recommend to Others	97.8%	90.0%

95% RECOMMENDATION RATE

This additional target is based off your current 'Recommend to Others' score

Key Driver	Actual	Benchmark
Individual Needs	90.6%	93.6%
Response to Problems	90.2%	93.1%
Dignity and Respect	97.9%	97.8%
Nursing Care	93.6%	94.4%
Communication	88.5%	91.4%
Recommend to Others	97.8%	95.0%

*Your facility has exceeded the highest target we can safely predict. That's impressive.

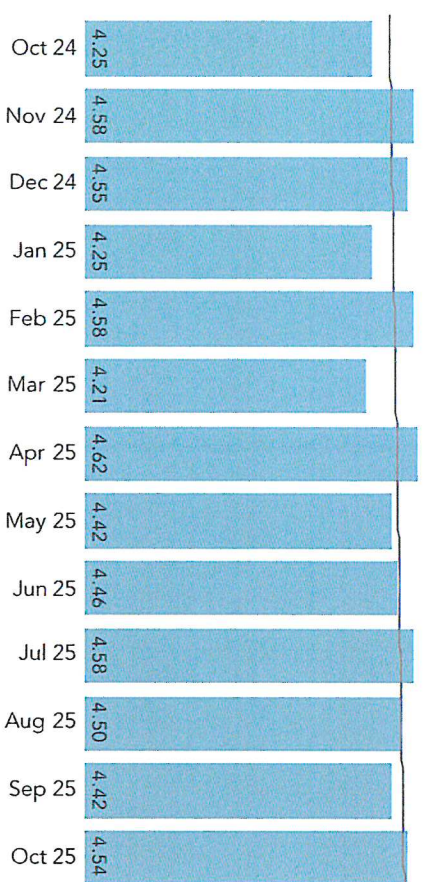


CUSTOMER SATISFACTION
MONTHLY TREND

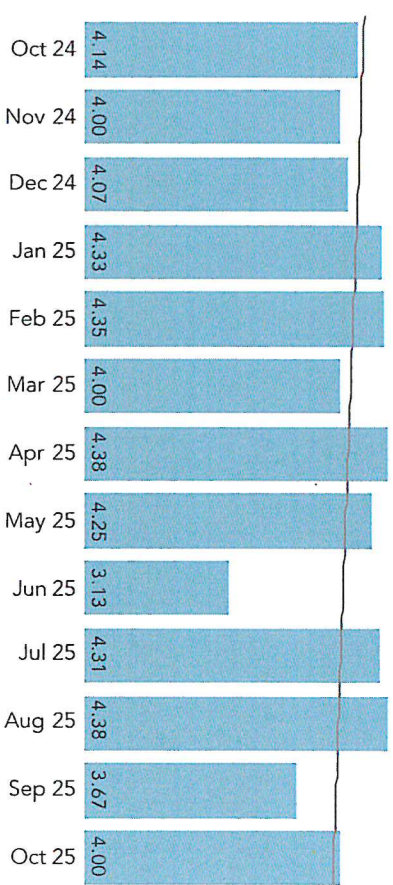
SHAKER PLACE REHABILITATION AND NURSING CENTER

October 2025

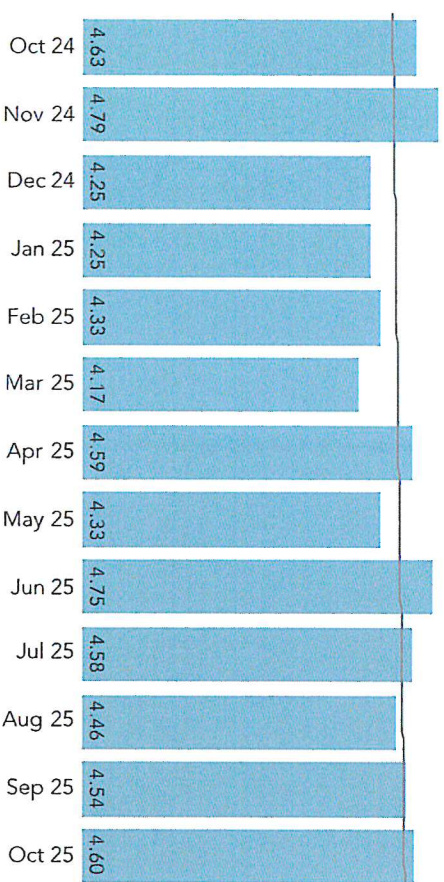
Overall Satisfaction



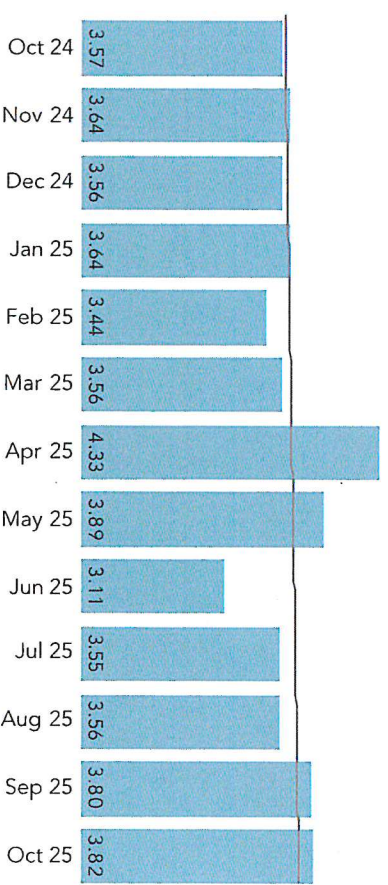
Dining Service



Nursing Care

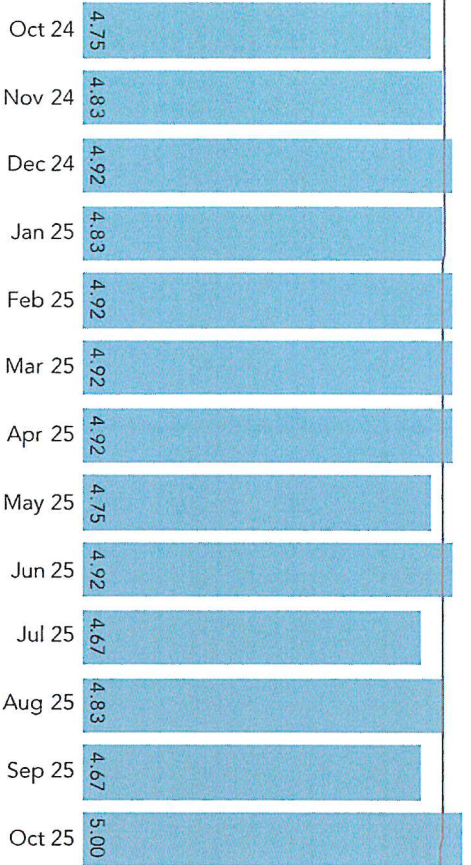


Quality of Food

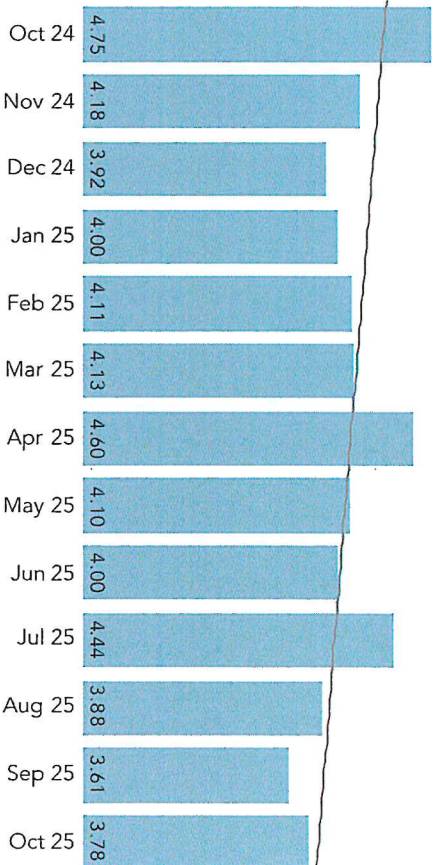




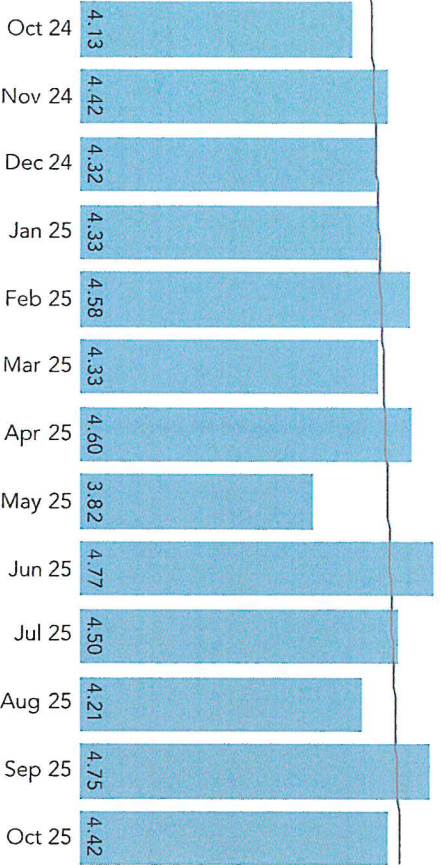
Cleanliness



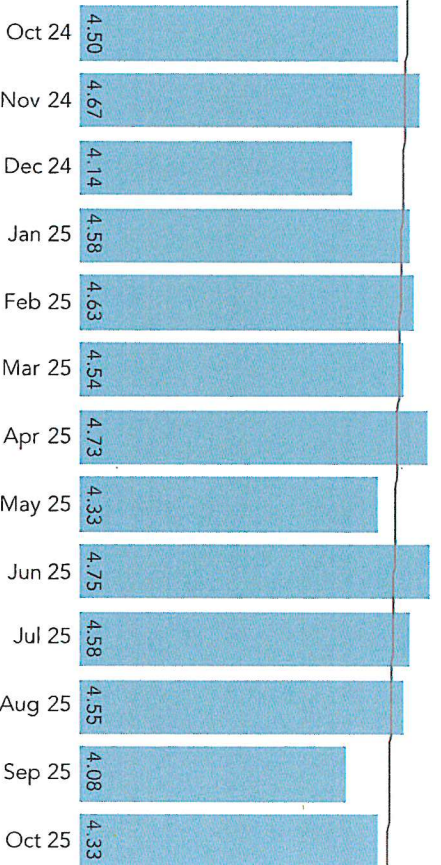
Laundry Service



Individual Needs



Communication





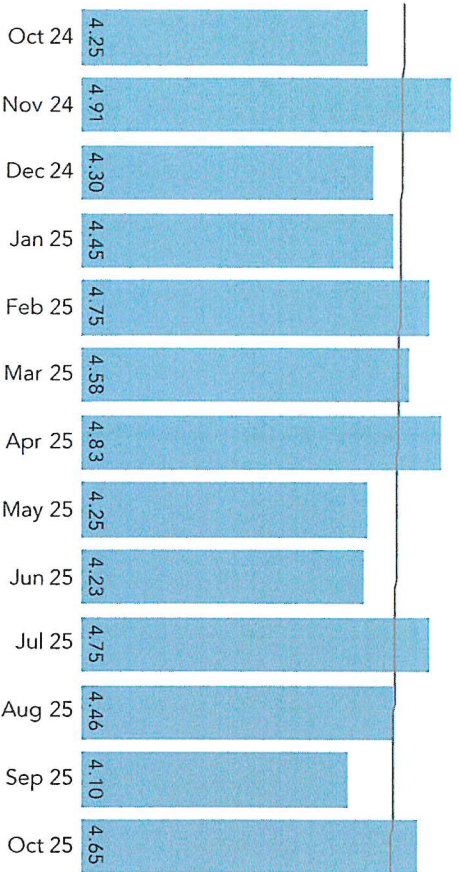
CUSTOMER SATISFACTION MONTHLY TREND

SHAKER PLACE REHABILITATION AND NURSING CENTER

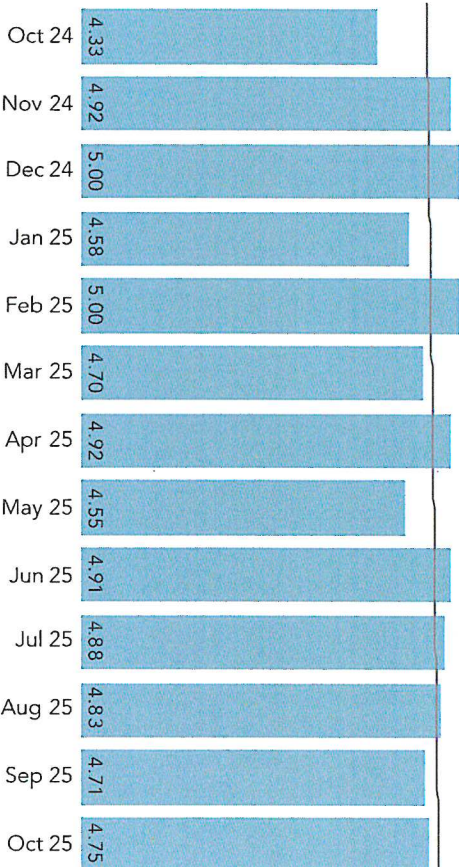
October 2025

PINNACLE®
QUALITY INSIGHT

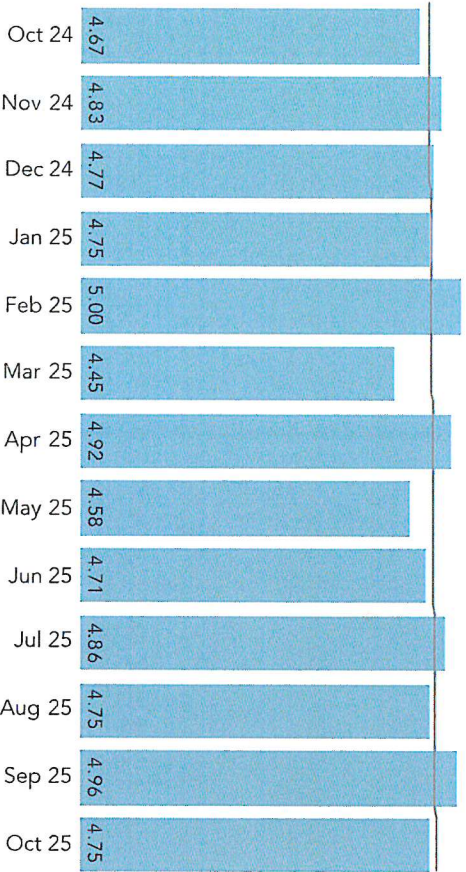
Response to Problems



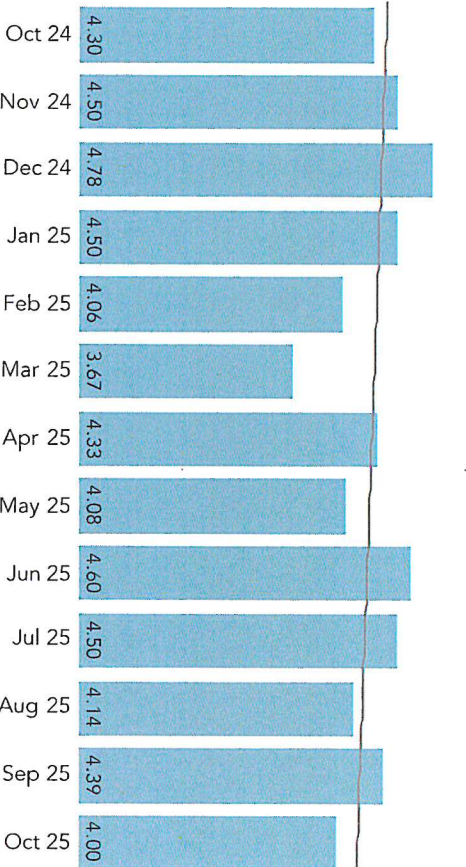
Recommend to Others



Dignity and Respect

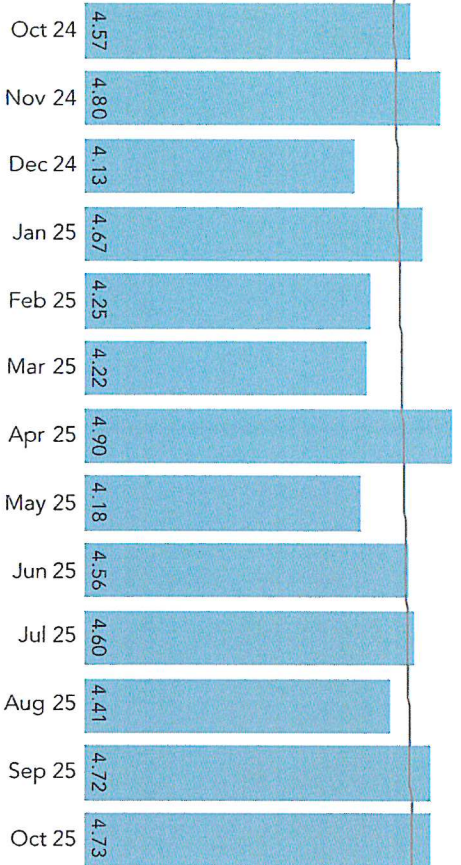


Activities

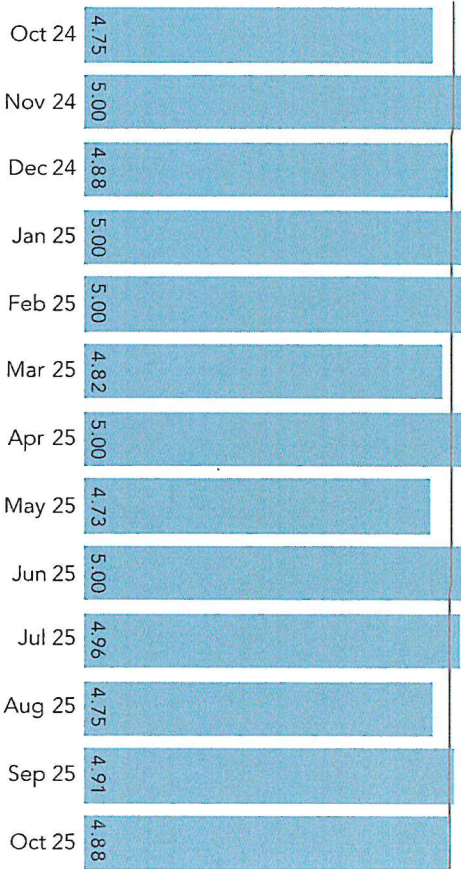




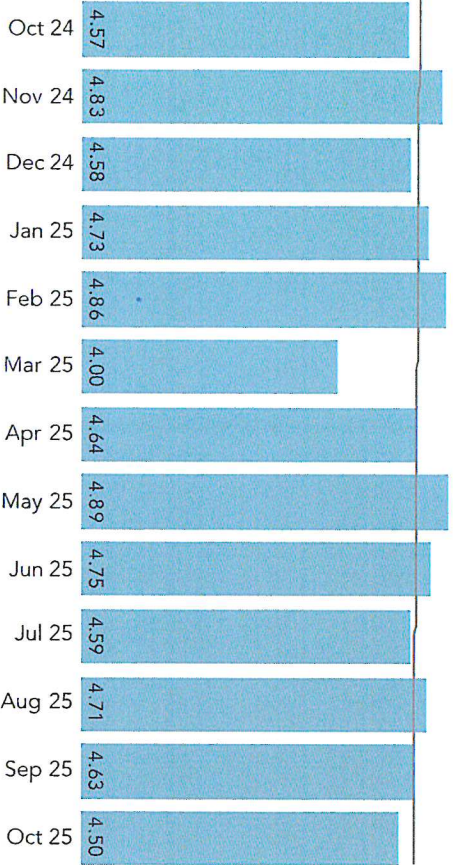
Professional Therapy



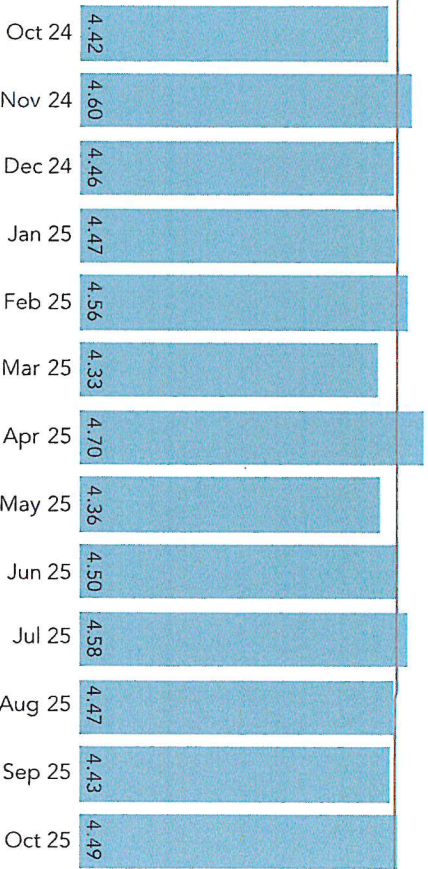
Safety and Security



Admission Process

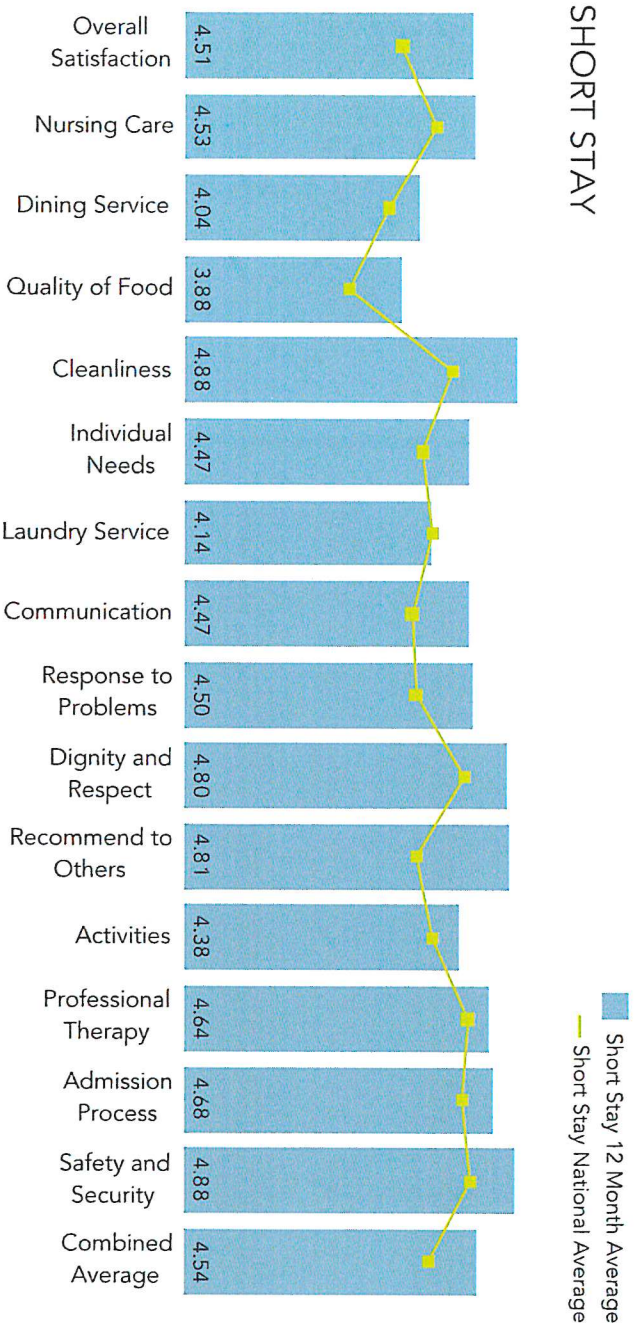


Combined Average





SHORT STAY



SHORT STAY SATISFACTION RATE
percentage that rated
Recommend to Others as a 4 or 5.

97.9%

75.6% National Average

LONG TERM



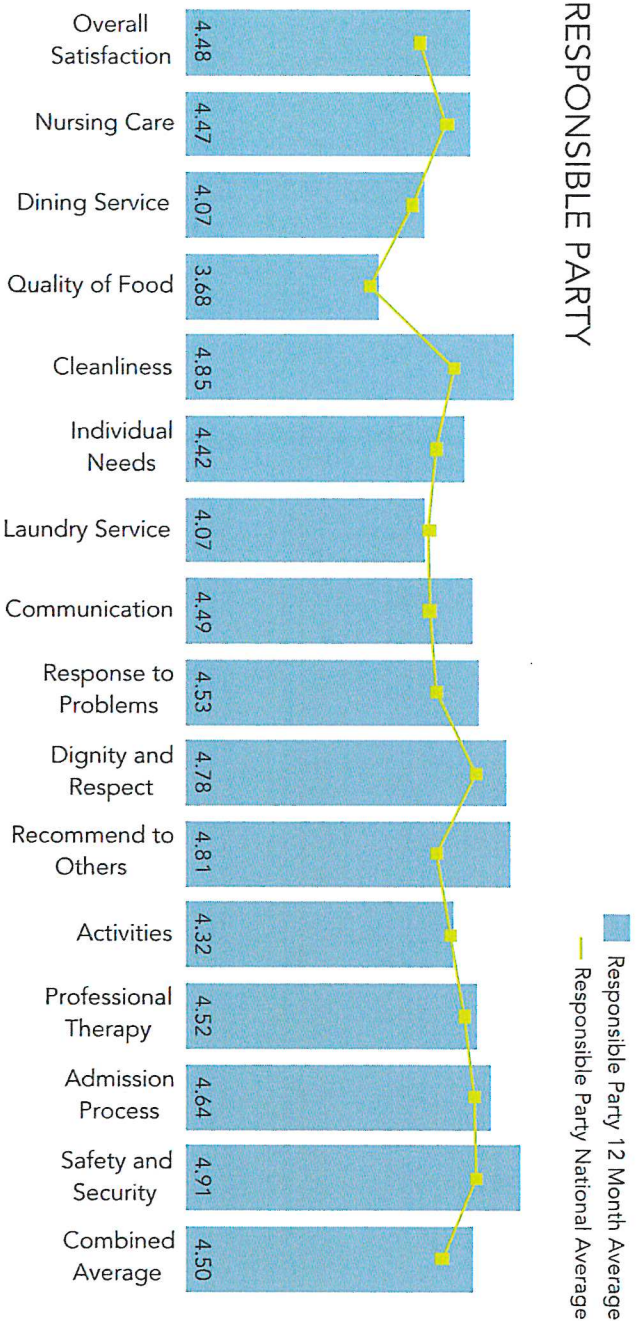
LONG TERM SATISFACTION RATE
percentage that rated
Recommend to Others as a 4 or 5.

97.8%

86.0% National Average



RESPONSIBLE PARTY



RESPONSIBLE PARTY
SATISFACTION RATE

percentage that rated
Recommend to Others as a 4 or 5.

97.8%

83.6% National Average



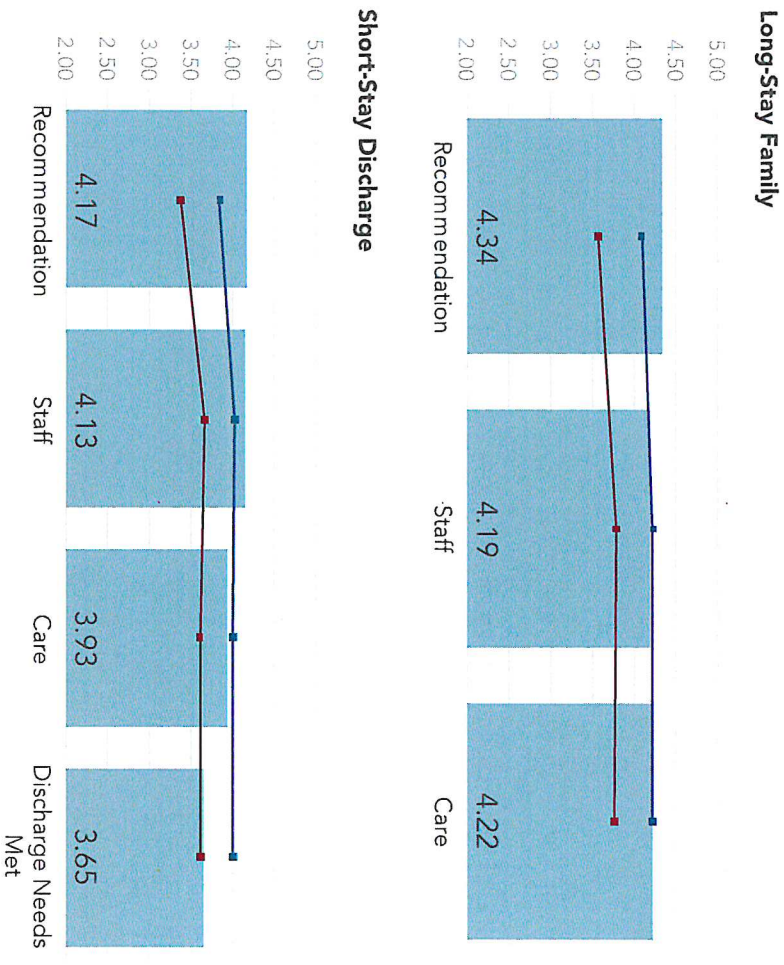
The following are your CoreQ Measures. The measure is calculated by dividing the number of positive responses by the total responses. A response is considered positive when the respondent's average response for each question equals 3 (Good) or better. In order for the results to be considered valid, there must be at least 20 total responses.

	COREQ MEASURE	TOTAL RESPONSES	POSITIVE RESPONSES
Long-Stay Family			
12 Month	97.6%	83	81
3 Month	100.0%	18	18
Current Month	100.0%	2	2
Corporate Average	97.6%		
National Average	82.8%		
Long-Stay Resident			
National Average	82.8%		
Short-Stay Discharge			
12 Month	93.3%	30	28
3 Month	100.0%	12	12
Current Month	100.0%	7	7
Corporate Average	93.3%		
National Average	70.6%		

The CoreQ questions are:

1. In recommending this facility to your friends and family, how would you rate it overall?
2. Overall, how would you rate the staff?
3. How would you rate the care you receive?
- *4. How would you rate how well your discharge needs were met?*

*Question 4 is only asked to Discharged Residents.





Quality Measures: Facility Summary

Print

Close

Date Range:

Oct 2025

To

Oct 2025

Assessments: ☒ Include All

☐ Exclude PPS That Are Not Medicare Part A

Short-Stay MDS-Based

+	Measure	Measure Type	Numerator ¹	Denominator ¹	Observed Rate ¹	Adjusted Rate ¹	Client Average ¹ Client Percentile ¹
+	Falls with Major Injury	SNF QRP	0	2	0%		0.7% 0
+	Pain	Net Health	2	33	6.1%		12.4% 43
+	Drug Regimen Review	SNF QRP	2	2	100%		96.0% 0
+	Skin Integrity: New or Worsened Pressure Ulcers/Injuries	Five-Star, SNF QRP	1	2	50.0%	56.2%	2.2% 100
+	Discharge Self-Care Score	SNF QRP	1	1	100%		53.5% 0
+	Discharge Mobility Score	SNF QRP	1	1	100%		49.4% 0
+	Discharge Function Score	Five-Star, SNF QRP	1	1	100%		59.6% 0
+	Transfer of Health Information - Provider	SNF QRP	0	0	NA		98.1% NA
+	Transfer of Health Information - Patient	SNF QRP	1	1	100%		93.0% 0
+	Influenza Vaccine ¹	Care Compare	22	28	78.6%		88.3% 79
+	Pneumococcal Vaccine	Care Compare	19	42	45.2%		85.9% 91
+	Antipsychotic	Five-Star	0	21	0%		1.7% 0

Long-Stay MDS-Based

+	Measure	Measure Type	Numerator ¹	Denominator ¹	Observed Rate ¹	Adjusted Rate ¹	Client Average ¹	Client Percentile ¹
+	Falls (Surveyor)	iQIES	<u>111</u>	<u>205</u>	54.1%		39.3%	87
+	Falls with Major Injury	Five-Star	<u>9</u>	<u>205</u>	4.4%		2.6%	81
+	Pain	Net Health	<u>3</u>	<u>159</u>	1.9%	2.1%	7.6%	42
+	Pressure Ulcers - New	Five-Star	<u>3</u>	<u>202</u>	1.5%	2.1%	5.8%	23
+	UTI	Five-Star	<u>1</u>	<u>202</u>	0.5%		1.6%	54
+	Worsened Incontinence - New	Care Compare	<u>66</u>	<u>193</u>	34.2%	33.5%	19.2%	91
+	Catheter	Five-Star	<u>0</u>	<u>182</u>	0%	0%	0.9%	0
+	Physically Restrained	Care Compare	<u>0</u>	<u>205</u>	0%		0.1%	0
+	Worsened ADL - New	Five-Star	<u>24</u>	<u>181</u>	13.3%		14.0%	58
+	Worsened Walking - New	Five-Star	<u>17</u>	<u>96</u>	17.7%	16.9%	14.2%	69
+	Weight Loss	Care Compare	<u>3</u>	<u>186</u>	1.6%		4.4%	30
+	Depression	Care Compare	<u>11</u>	<u>187</u>	5.9%		10.5%	65
+	Antianxiety/Hypnotic	Care Compare	<u>40</u>	<u>194</u>	20.6%		16.9%	71

+ Measure	Measure Type	Numerator 1	Denominator 1	Observed Rate 1	Adjusted Rate 1	Client Average 1	Client Percentile 1
+ Antianxiety/Hypnotic (Surveyor)	iQIES	0	<u>107</u>	0%		5.4%	0
+ Behavior (Surveyor)	iQIES	<u>11</u>	<u>202</u>	5.4%		14.8%	33
+ Influenza Vaccine 1	Care Compare	<u>200</u>	<u>201</u>	99.5%		96.0%	0
+ Pneumococcal Vaccine	Care Compare	<u>203</u>	<u>205</u>	99.0%		95.3%	53
+ Antipsychotic	Five-Star	<u>5</u>	<u>190</u>	2.6%		13.1%	13
+ PointRight® Pro Long Stay™ Hospitalization 1	Net Health	<u>Residents</u>	NA	13.0%	9.7%	11.5%	48

Indicates that the facility has a percentile of **75 or greater**.

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Shaker Place Rehabilitation and Nursing Center

Quality measures



Print

[Learn more about quality measures](#)

[Find out why these short-stay measures are important](#)

[Find out why these long-stay measures are important](#)

[Get current data collection period](#)

Quality measures rating



Much above average

Medicare assigns the star rating based on data from a select set of clinical data measures. More stars means better performance in certain areas of care.

Short-stay quality measures





Much above average

The short-stay quality measures rating reflects the average level of a nursing home's performance in certain areas of care for those who stayed in a nursing home for 100 days or less or are covered under the Medicare Part A Skilled Nursing Facility (SNF) benefit, and whose typical goal is to improve their health status so they can return to their previous setting, like their home.

Percentage of short-stay residents who
were re-hospitalized after a nursing
home admission

↓ Lower percentages are better

11.5%
National average:
23.4%
New York average:
20.5%

Percentage of short-stay residents who
have had an outpatient emergency
department visit

↓ Lower percentages are better

7.6%
National average:
12%
New York average:
9.7%

Percentage of short-stay residents who
got antipsychotic medication for the first
time

↓ Lower percentages are better

0%
National average:
1.6%
New York average:
1.3%
✓

Percentage of residents with pressure
ulcers/pressure injuries that are new or
worsened

↓ Lower percentages are better

2.2%
National average: 2.4% 

Percentage of residents who are at or
above an expected ability to care for
themselves and move around at
discharge

↑ Higher percentages are better

50.57%
National average: 54.90% 

Flu & pneumonia prevention measures - Short-stay residents

Percentage of short-stay residents who
needed and got a flu shot for the current
flu season

↑ Higher percentages are better

87.8%
National average: 79%
New York average: 79%

Percentage of healthcare personnel who
got a flu shot for the current season

↑ Higher percentages are better

66.7%
National average: 45% 

Percentage of short-stay residents who needed and got a vaccine to prevent pneumonia

↑ Higher percentages are better

50.8%
National average:
81.7%
New York average:
76.7%

Additional quality measures - Short-stay residents

These measures are part of the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) and report information on residents who get skilled nursing services under their Medicare Part A benefit.

Percentage of residents whose medications were reviewed and who received follow-up care when medication issues were identified

↑ Higher percentages are better

100%
National average:
95.1%

Percentage of SNF residents who experience one or more falls with major injury during their SNF stay

↓ Lower percentages are better

0%
National average:
0.8%

Percentage of residents who are at or above an expected ability to care for

42.5%

themselves at discharge

↑ Higher percentages are better

National average:

52.7%



Percentage of residents who are at or

above an expected ability to move

around at discharge

↑ Higher percentages are better

47.1%

National average:

50%



Percentage of SNF healthcare personnel

who are up to date with their COVID-19

vaccines

↑ Higher percentages are better

6.9%

National average:

10%



Rate of successful return to home or

community from a SNF

↑ Higher rates are better

42.7%

National average:

49.9%



Rate of potentially preventable hospital

readmissions 30 days after discharge

from a SNF

↓ Lower rates are better

8.7%

National average:

10.5%



Percentage of infections patients got

during their SNF stay that resulted in

7%



hospitalization

Lower rates are better

National average:

7.1%

Medicare Spending Per Beneficiary (MSPB) for residents in SNFs

Displayed as a ratio

1.00

National average: ✓

1.03

Long-stay quality measures



Much above average

The long-stay quality measures rating reflects the average level of a nursing home's performance in certain areas of care for those who stayed in a nursing home for 101 days or more, and whose typical goal is to maintain or attain their highest possible well-being while residing in the facility.

Number of hospitalizations per 1,000

long-stay resident days

Lower numbers are better

1.24

National average:

1.83

New York average:

1.65

Number of outpatient emergency department visits per 1,000 long-stay resident days

↓ *Lower numbers are better*

0.51
National average:
1.78
New York average:
1.34

Percentage of long-stay residents who got an antipsychotic medication

↓ *Lower percentages are better*

1.9%
National average:
14.5%
New York average:
12.7%

Percentage of long-stay residents experiencing one or more falls with major injury

↓ *Lower percentages are better*

4.7%
National average:
3.3%
New York average:
3%

Percentage of long-stay residents with pressure ulcers

↓ *Lower percentages are better*

5.4%
National average:
5.4%
New York average:
7.4%

Percentage of long-stay residents with a urinary tract infection

↓ Lower percentages are better

1.9%
National average:
1.8%
New York average:
1.5%

Percentage of long-stay residents who have or had a catheter inserted and left in their bladder

↓ Lower percentages are better

0.7%
National average:
1.2%
New York average:
0.7%

Percentage of long-stay residents whose ability to walk independently worsened

↓ Lower percentages are better

14.1%
National average:
19.4%
New York average:
18.4%

Percentage of long-stay residents whose need for help with daily activities has increased

↓ Lower percentages are better

15.6%
National average:
16.2%
New York average:
17.4%

Flu & pneumonia prevention measures - Long-stay residents

Percentage of long-stay residents who needed and got a flu shot for the current flu season

⬆️ *Higher percentages are better*

98.8%
National average:
95.3%
New York average:
95.7%

Percentage of long-stay residents who needed and got a vaccine to prevent pneumonia

⬆️ *Higher percentages are better*

95.8%
National average:
93.4%
New York average:
91.6%

Additional quality measures - Long-stay residents

Percentage of long-stay residents who were physically restrained

⬇️ *Lower percentages are better*

0%
National average:
0.1%
New York average:
0.2%

Percentage of long-stay residents with new or worsened bowel or bladder incontinence

↓ Lower percentages are better

21.3%
National average:
20.7%
New York average:
22%

Percentage of long-stay residents who lose too much weight

↓ Lower percentages are better

3.2%
National average:
5.5%
New York average:
6.1%

Percentage of long-stay residents who have symptoms of depression

↓ Lower percentages are better

2.7%
National average:
10.3%
New York average:
17.4%

Percentage of long-stay residents who got an antianxiety or hypnotic medication

↓ Lower percentages are better

17.2%
National average:
19.9%
New York average:
13.7%



