

Artesia Christian Home, Inc.
Board of Directors' Meeting – Agenda
Tuesday, January 27th, 2026
4:00 PM

In Person & Zoom

ZOOM ID CODE: 371-575-8625

PASSWORD-ACH

- I. Opening Prayer & Devotions- Ken Solomon
 - II. Roll Call –Steve Ornee
 - A. Official Welcome to New Board Member- Ken Solomon
 - III. Minutes of November 25th, 2025
 - IV. Committee Reports
 - A. Finance Report- Pat Henry
 - B. Promotions Report- Robin Brouwer
 - V. Executive Director Report
 - A. 2025 Goals & Initiatives Summary
 - VI. Old Business
 - VII. New Business
 - A. Committees:
 - 1. Finance: Tim Slegers-chair, Ken Solomon, Terry VanDyk, Rob Verhoeven Sandy Van Lant
 - 2. Promotions: Robin Brouwer -chair, Robin Brouwer, Rob Hultgrien, Barb Zondervan, Sharon Stephens
 - 3. Building & Grounds: Steve Ornee-chair, Bob Struiksma, Tim Slegers
 - 4. Audit: Rob Verhoeven-chair, Steve De Vries, Chris McGahey
 - 5. Technology: Ken Solomon-chair, Scott Van Essen, Logan Cramer, Roger Sprik,
 - 6. Board Officers & Executive Committee: Ken Solomon: President, Terry Van Dyk: Vice President, Tim Slegers: Treasurer, Steve Ornee: Secretary, Sandy Van Lant: Vice All
 - B. Conflict of Interest
 - C. Compliance and Ethics & Code of Conduct
 - D. Next MEETINGS
 - 1. February 10th, 2026; Promotions Committee-Noon**
 - 2. February 17th, 2026, Supporting Churches Prayer Breakfast; 7:00 am**
 - 3. February 25th, 2025; 3 pm Finance & 4 pm Board**
- VIII. Closing Prayer – Ken Solomon

Artesia Christian Home, Inc.
Minutes from the Board of Directors' Meeting

4:00 PM, November 25th, 2025 - ACH Conference Room, Artesia, California



I. Call to Order - by K. Solomon at 4:00 PM. R. VanEssen opened with a devotion and prayer.

II. Roll Call - 12 Board Members: 11 present (7 needed for quorum)

Staff

- | | | | |
|----------------------------|--------------------------------|--------------------------------|--------------|
| ✓ Robin Brouwer ('26) | ✓ Steven Ornee ('27-2) - Sect. | ✓ Randy Van Essen ('25-2) | ✓ M. Robison |
| ✓ T. Slegers ('25) | ✓ Ken Solomon ('27-2) - Pres. | ✓ S. Van Lant ('27-2) - Treas. | P. Henry |
| ✓ Bob Hultgrien ('26) | Bob Struiksmas ('27) | ✓ Rob Verhoeven ('26) | ✓ C. Levi |
| ✓ Sondi Oldenburger ('26)* | ✓ Terry Van Dyk ('25) - VP | ✓ Barbara Zondervan ('26) | ✓ A. Walsh |

Ⓢ = Informed absence * = Voting residential rep.

Non-Voting Res. Rep.

✓ = Present (##-2) = last year of term/2nd consecutive term

III. Minutes Approval - Motion to approve the October 28, 2025 meeting minutes.

Motion Passed

IV. Committee Reports

- A. Finance committee Oct. 28, 2025 meeting minutes submitted.
- B. Promotion committee November 12, 2025 meeting minutes submitted.

V. Executive Reports - oral summaries given, written reports submitted

- A. Financial Operations - M. Robison
- B. Executive Director - M. Robison
- C. Skilled Nursing - C. Levi
- D. Residential Services - A. Walsh
- E. Community Relations - M. Robison
- F. Facilities - M. Robison

VI. New Business - 2026 Board Officer Nominations

- A. Vice All - Sandi Van Lant
- B. Secretary - Steve Ornee
- C. Treasurer - Tim Slegers
- D. Vice President - Terry Van Dyk
- E. President - Ken Solomon

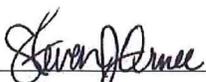
VII. Calendar

No Board Meeting in December.

Promotions	Wednesday, Jan. 14 th	Noon via Zoom
Finance / Board	Tuesday, Jan. 27 th	3PM/4PM

VIII. A motion to adjourn passed and R.VanEssen closed with prayer.

Motion Passed.



 Steven Ornee, Secretary of the Board

 Date of Approval

Artesia Christian Home, Inc.
Finance Committee Meeting Minutes
Tuesday, November 25, 2025

- I. Sandy Van Lant opened the meeting in prayer at 3:00 PM
- II. **Board Members present:** Sandy Van Lant, Tim Slegers, Ken Solomon, Terry Van Dyk, Rob Verhoeven
Staff present: Executive Director – Michelle Robison
Absent: Controller – Patricia Henry with notice.
- III. The Minutes of October 25, 2025, Finance Committee meeting, were reviewed and approved.
- IV. NEW BUSINESS
 - A. Nationwide Insurance renewal at 12% increase which is above the budgeted 9% increase.
 - B. OPT IN rate increase received. Pat is making the required adjustments.
 - C. Reviewing options for major plumbing repair in Covenant Center.
- V. MONTHLY REPORTS for **September 2025** were distributed for review:
 - A. **Payroll Review:** Payroll reports for 9/12/2025 (5.35% OT & 12.05% Holiday OT), for 9/26/2025 (6.51% OT & 6.58% Holiday OT), and for 9/30/2025 (4.39% OT & 4.39% Holiday OT).
 - B. **Reviewed report on Extraordinary Expenses for the months of September 2025.**
 - C. **Reviewed Census by Month report through September 2025.**
 - D. **Operations Reports for September 2025 month-end were reviewed. Year to date totals are:**
 1. **Skilled Nursing September 2025 loss:** \$147,917; **FY 2025 loss:** \$1,209,169.
 2. **Assisted Living September 2025 income:** \$43,231; **FY 2025 gain:** \$14,319.
 3. **Independent Living September 2025 income:** \$27,234; **FY 2025 income:** \$234,260.
 4. **Memory Care September 2025 gain:** \$8,943; **FY 2025 loss:** \$64,075.
 5. **ACH Operations total: September 2025 loss:** \$24,387; **FY 2025 loss of:** \$495,190.
 6. **ACH Non-operating Summary:** For **September 2025** the total **Facility Non-Operating Income** (including interest, dividend income, donations, grant income and depreciation) was \$138,366 **FY 2025 Non-Operating Gain** of \$2,417,435.
 7. **ACH total: September 2025 reported gain** of \$113,979; **FY 2025 gain of:** \$1,922,245.

- E. Balance Sheet** for **9-30-2025** total assets (and liabilities and equity) of \$16,028,832.
- F. Accounts Receivable** – Balance due as of **9-30-2025** was \$826,423
- G. Accounts Receivable Aging Report** reviewed accounts over 30 days past due for September 2025.
- H. Summary of Cash & Investments** as of **9-30-2025** was \$5,159,881.
- I. Investment Summary** showed a return -24.65% through the third quarter of 2025.

VI. Adjournment – The meeting was adjourned at 3:55 PM. Next Meeting January 27, 2026 @3:00 PM.

Respectfully submitted by Ken Solomon

ACH Promotions Committee Meeting, November 12, 2025

In attendance: Kristin Cramer, Eden Escobedo, Robin Brouwer, Bob Hultgrien, and Sandy Van Lant. Michelle Robison - absent with notice. Barb Zondervan - absent (emergency).

Opening Prayer: Robin Brouwer

Approval of Minutes from October 8, 2025 – approved

Google/Online Ads: Google searches: 3,000 views, 234 clicks (click-through rate of 7.89%)

Side ads: 134,000 views, 87 clicks. 18 conversions and 64 calls.

Census: **Memory care - 23** (3 female shared, 1 male shared, & 1 private available); **Skilled Nursing – 50** (open for admissions again); **Independent Living – Full; Asst. Living – 56** (3 North studios, 4 South 1-bedrooms available).

*Some “waitlist” language changed on website to “call for availability”

NEW BUSINESS:

- Annual Society Meeting wrap-up discussion. Received ~\$31,000 from donations + \$1,700 through GiveButter
- AL to host Scam Seminar presented by Right at Home - November 17
- Lunch & Learn scheduled for Nov. 13 (13 RSVPs)
- Key Club Flower Project - Nov. 29 Students from 9 area high schools will plant seasonal flowers and socialize with residents during coffee hour
- Messenger and Annual Letter went out last week

OLD BUSINESS:

- Christmas Market: Currently have 20+ vendors signed up; \$1,296 raised to date. Entertainment is booked. Seeking more vendors, supporters, and volunteers - deadline Nov. 18. Please let Kristin or Eden know if you are available to help with setup or other needs at the event.

Calendar:

- **Lunch & Learn:** November 13
- **Giving Tuesday campaign:** December 2
- **Hanging of the Greens:** December 2
- **Board Christmas Dinner:** December 2 in Memory Care Activity Room
- **Auxiliary Christmas Tea:** December 9
- **Victor’s Tacos for Employee Spirit Week: 10 a.m. - 1 p.m. Board members welcome to attend!**
- **75th Anniversary Celebration: May 2027**

Closing Prayer: Sandy Van Lant

Meeting Adjourned

Artesia Christian Home, Inc.
Actual vs Budget Statement of Operations - Summary
October 31, 2025

	Current Actual	Current Budget	Variance	YTD Actual	YTD Budget	Variance
Operating Revenue						
Medicare A	52,742.13	126,905.08	(74,162.95)	52,742.13	126,905.08	(74,162.95)
Medicare B	4,667.38	0.00	4,667.38	4,667.38	0.00	4,667.38
MediCal	325,308.67	364,021.50	(38,712.83)	325,308.67	364,021.50	(38,712.83)
Commercial Insurance	65,254.93	83,845.33	(18,590.40)	65,254.93	83,845.33	(18,590.40)
Private	796,127.97	830,120.83	(33,992.86)	796,127.97	830,120.83	(33,992.86)
Other Ancillary Revenue	8,618.96	2,103.67	6,515.29	8,618.96	2,103.67	6,515.29
Total Operating Revenue	\$ 1,252,720.04	\$ 1,406,996.41	\$ (154,276.37)	\$ 1,252,720.04	\$ 1,406,996.41	\$ (154,276.37)
Operating Expense						
Nursing & Residential Services	630,487.01	647,963.63	17,476.62	630,487.01	647,963.63	17,476.62
Facilities	114,455.94	100,967.68	(13,488.26)	114,455.94	100,967.68	(13,488.26)
Housekeeping Services	51,138.86	44,913.09	(6,225.77)	51,138.86	44,913.09	(6,225.77)
Laundry Services	27,023.36	22,010.49	(5,012.87)	27,023.36	22,010.49	(5,012.87)
Dining Services	204,177.10	198,558.39	(5,618.71)	204,177.10	198,558.39	(5,618.71)
Social Services & Life Enrichment	79,273.70	81,664.08	2,390.38	79,273.70	81,664.08	2,390.38
Staff Development	10,275.48	11,921.11	1,645.63	10,275.48	11,921.11	1,645.63
General & Administrative	225,032.94	234,730.87	9,697.93	225,032.94	234,730.87	9,697.93
Property Expenses	8,940.65	9,608.94	668.29	8,940.65	9,608.94	668.29
Other Expenses	0.00	155.96	155.96	0.00	155.96	155.96
Ancillary Expenses	47,585.62	54,439.46	6,853.84	47,585.62	54,439.46	6,853.84
Total Operating Expense	\$ 1,398,390.66	\$ 1,406,933.70	\$ 8,543.04	\$ 1,398,390.66	\$ 1,406,933.70	\$ 8,543.04
Net Operating	\$ (145,670.62)	\$ 62.71	\$ (145,733.33)	\$ (145,670.62)	\$ 62.71	\$ (145,733.33)
Non-Operating						
Extraordinary Items	1,972.15	0.00	1,972.15	1,972.15	0.00	1,972.15
Interest & Dividends	3,529.64	0.00	3,529.64	3,529.64	0.00	3,529.64
Donations	32,434.50	0.00	32,434.50	32,434.50	0.00	32,434.50
Depreciation Expense	(44,706.00)	0.00	(44,706.00)	(44,706.00)	0.00	(44,706.00)
Total Non-Operating	\$ (6,769.71)	\$ 0.00	\$ (6,769.71)	\$ (6,769.71)	\$ 0.00	\$ (6,769.71)
Net Income (Loss)	\$ (152,440.33)	\$ 62.71	\$ (152,503.04)	\$ (152,440.33)	\$ 62.71	\$ (152,503.04)

Artesia Christian Home, Inc.
Balance Sheet
October 31, 2025

Assets

Current Assets

Cash	2,254,667.03
Accounts Receivable	769,603.94
Other Accounts Receivable	1,120,065.77
Prepaid Expenses	206,123.37
	<hr/>
Total Current Assets	\$ 4,350,460.11

Fixed Assets

Land	1,216,888.94
Building & Improvements	14,799,051.14
Furniture Fixtures & Equipment	2,935,211.69
Accumulated Depreciation	(9,179,944.00)
	<hr/>
Total Fixed Assets	\$ 9,771,207.77

Other Assets

Investments	2,835,141.18
	<hr/>
Total Other Assets	\$ 2,835,141.18

Total Assets	<hr/> <hr/> \$ 16,956,809.06
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Liabilities and Equity

Current Liabilities

Accounts Payable	843,609.64
Accrued Salaries & Benefits	591,916.00
Other Liabilities	1,748.05
	<hr/>
Total Current Liabilities	\$ 1,437,273.69

Total Liabilities	<hr/> <hr/> \$ 1,437,273.69
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Equity

Equity	15,671,975.70
Net Income (Loss)	\$ (152,440.33)
	<hr/>
Total Equity	\$ 15,519,535.37

Total Liabilities and Equity	<hr/> <hr/> \$ 16,956,809.06
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Artesia Christian Home, Inc.
Cash & Investments Summary

Financial Institution	Account	As of 09/30/2025	As of 10/31/2025
Schwab	CCRC Liquid Reserve Requirement by Dept of Social Services as of 1/30/2025	\$ 348,600	\$ 348,600
Schwab	Unemployment Fund Reserve	150,000	150,000
Schwab	Operating / Building Repairs / Emergencies Funds	2,336,541	2,336,541
	Investments Total	2,835,141	2,835,141
		As of	As of
		09/30/2025	10/31/2025
Citizens Business Bank	General Account	288,875	357,686
Citizens Business Bank	Money Market Account- Reserves for Payroll & Operations	1,908,057	1,761,587
Citizens Business Bank	Business Savings - Reserve Required for Line of Credit	111,034	111,034
Bank of America	Pegboard Account	16,774	16,774
	Cash Total	2,324,740	2,247,081
Total		\$ 5,159,881	\$ 5,082,222
		YTD FYE 2025	YTD FYE 2026 @
		@ 09/30/2025	10/31/2026
Donation Information	C.A.R.E. Fund	\$ 478,385	\$ 28,913
	General Fund	43,417	3,372
	Special Fund	176,633	150
	Total Donations	\$ 698,435	\$ 32,435

**Artesia Christian Home, Inc.
Investment Account Balance**

<u>Date</u>	<u>Market Value</u>	<u>Month to Month Change</u>	<u>Cumulative Change from 1/1</u>	<u>Cummulative Return*</u>
1/31/2025	2,274,543			
3/31/2025	1,856,842	(417,701)	(417,701)	-0.78%
6/30/2025	3,484,838	1,627,996	1,210,295	-12.74%
9/30/2025	2,835,141	(649,696)	560,598	24.65%

*Data from Schwab/RAI Quarterly Statements

*03/10/2025 Moved (\$400,000) from investment account to general account

* 06 25/2025 Transferred \$1,500,000 from General Acct related to ERC Refund

Executive Director Report

January 27th, 2026

3:00 pm

Board Room/Zoom

Upcoming Events

- February 11th, 2026, Promotions Committee- Noon via Zoom
- February 17th, 2026, Supporting Churches Prayer Breakfast- 7 am in the ALF Lounge
- February 24th, 2026, Finance-3pm & Board-4 pm

Executive Director

- Submitted 2026 Auxiliary projects
- Review of 2025 Goals and Preparation of new 2026 Goals
- Christmas Events throughout the month of December.
- Family Market CARE Fundraiser on December 6th.
- Meeting with Ben @ NOTCOW regarding current status of generator project.
- Prepared for and held Board Orientation for new board members and resident representative.
- Met with team to finalize the Payroll Audit findings and close out the Compliance and Ethics Concern.
- Meetings with leaders regarding the review and development of the punctuality and attendance policy.
- Leadership & Supervisor Meeting- January 7th to roll out Punctuality and Attendance Policy and Procedures
- All Staff Meetings Jan 8-9th to roll out Punctuality and Attendance Policy and Procedure updates to all staff
- Approval of 2026 Employee Handbook updates.
- CEUs toward RCFE and NHA Licenses

HR, COMPLIANCE & TECHNOLOGY OPERATIONS

- Facilitated the review and development of Punctuality and Attendance Policy and Procedures with key leaders to be added to 2026 Handbook.
- Training on the Punctuality and Attendance policy was provided to key supervisors and all leadership members on January 7, 2026. This training was also repeated in the All staff meetings on January 8 & 9th, 2026.
- The new 2026 Employee Handbook rolled out on January 9, 2026. An acknowledgment form of receipt and adherence to policies was distributed to all staff on the same day.
- Partnering with an immigration compliance specialist to conduct an external I-9 Audit to ensure compliance and minimize risk. HR is contacting new immigration compliance firms to request service quotes due to delay with original firm.

Compliance & Ethics Highlights:

- Memory Care: Management promptly investigated a reported theft and loss concern and filed a report with the Lakewood Sheriff's Department. The Sheriff's Department accepted the report and indicated that no further action was warranted at this time. The incident was addressed in accordance with established policies. Management reviewed and reinforced its Theft and Loss Policy and Procedures, including staff responsibilities related to resident valuables and monies. Applicable staff received documentation in their employee file related to the incident. The matter is considered resolved and closed. Management continues to evaluate additional preventive measures as part of its ongoing commitment to compliance, ethics, and resident protection.
- Business Office: Management incorporated recommendations from the Payroll Audit into the 2026 Employee Handbook, allowing the payroll-related compliance concern initiated in May to be formally closed. To strengthen internal controls and ensure ongoing compliance, the Payroll Coordinator will receive continuing education support toward first-level Payroll Operations certification. In addition, the Payroll Department will implement an annual payroll audit to monitor compliance with applicable wage and hour laws and regulatory requirements.

FINANCIAL OPERATIONS

- FYE 2025 Financial Audit. Provided requested documents for all areas of finance. Audit now complete by Genske Mulder on 1/15/26
- In process of gathering dates to schedule our Audit Committee meeting to include Carly and/or Samantha from Genske Mulder
- In process of completing CCRC Report with attachments from Genske Mulder
- FYE 2025 Cost Report. Providing requested documents in process with Wipfli
- Paid out 2025 403(b) final match for half year on 12/23/2025 to Security Benefits for \$79,628
- CYE2025 1099s preparation in process
- CYE 2025 Workers Comp Audit. Providing requested documents in process
- Received additional ERC payment in December & paid out commission. Both payments booked to 2025.
- FYE2024 Medi-Cal Cost Report Audit Complete.
- Completed Auxiliary Sales Tax Return for 2025 4th quarter

2026 October '25- October'25 YTD Occupancy
Occupancy Goal/October '25- October '25 YTD- 89%/87%
SNF: 92%/79%
ALF: 83%/89. %
MCC: 93%/89. %
Cottages: 95%/101.7 %

2026 October '25-YTD Overtime/DT: 6.54% (Holiday OT 6.54%)

October Payroll: 5.58%, 7.80% & 6.23%

2025 Charity Care Year End Total October '24- September '25

\$691,688 was reported in November, however, the calculation was incorrect and should have included the daily rate increase of 10% (\$40 higher) for 2025.

Corrected Year End Total: \$1,216, 608. (\$81.88 difference between daily rate and Medi-Cal reimbursement rate)

2026 Charity Care YTD October '25-October '25

\$260, 960

2026 C.A.R.E. Fund YTD Total October '25- October '25

\$28,912.50

2026 YTD Donations (including CARE FUND) October '25-October '25

\$32,434.50

SNF:

- SNF Federal Recertification Licensing Survey began on 1/20/26-1/23/26. 7 surveyors. Life Safety Survey took place on 1/21/26 with an additional Surveyor. Results pending completion of Survey.
- Suspicious Rashes Outbreak opened by DPH on 10-17-25 was closed on 12-2-25.
- SNF received the 2567 with a Type B Deficiency for the 10-28-25 DPH Complaint Investigation for the outbreak. Received the Intent to Cite with fine for \$3,000 on 1/14/26. Submitted all required paperwork on 1/15/26.
- Staffing Efforts:
 - Open Positions:
 - 1 CNAs (evening), 2 CNAs (day), 4 CNA (NOC)
 - 2 LVN (LVN) FT 3-11
 - Using registry on 11-7 for CNA and 3-11 LVN
 - 3 CNA on medical leave
 - 2 licensed nurses on medical leave

Covid Updates:

- No current cases.

Quality Assurance Performance Improvement / (QAPI) Activity:

- Monthly QAPI Meetings Held on December 17th, 2025. & January 21, 2026
- Reviewed the QAPI plan on January 21, 2026 and we were able to Achieve 15 of the PIP put into action following last year's Annual Survey. See attached for review.
- Suspicious Rashes outbreak officially closed by DPH on December 2, 2025. Met as a team to follow up and ensure all action items addressed on 12-17-25. There are currently no residents with suspicious rashes.
- Additional Stand-up lift ordered and slings were received on December 18,2025. Labeling process has begun.

RESIDENTIAL:

- Addressed issue related to a reported Theft and Loss Concern in Memory Care. See Compliance and Ethics Update above.
- Met with representative from Leading Age and Libertana regarding options of financial assistance for Assisted Living and Memory Care residents. Will be working on application for Assisted Living Waiver program to start this extensive process.
- Applied and received authorization for exception on prospective Assisted Living resident with nephrostomy tube. Resident chose not to move in, however exception will be kept on file if she decides to in the future.
- Started reduced hours for Care Assist Float in Memory Care due to low census.
- Created in house transportation procedure for immediate family members of residents in Memory Care
- Arranged sharing of CNA and LVN staff from Assisted Living and Memory Care with SNF, to be able for staff to cross over departments.
- **Covid Updates:**
No current cases.

COMMUNITY RELATIONS:

- Transitioning from Patient Point to Idea Zone for web site host and Google search advertising
- Success full Christmas Market 25 + vendors and raised \$3152
- Spring Family Market set for 4/25/26
- Director of Community Relations hosted webinar on LinkedIN for Leading Age – Caring for our Elders-Careers with Purpose in Senior Living. Attendees were high school students from St. Joseph and students from a San Francisco High School.
- Messenger prep. Set to go out early February
- Prayer Breakfast – Feb. 17 @ 7a.m. Pastors from supporting churches and board members please RSVP to info@achome.org or call Eden/Kristin – GOAL – bring pastors back for Wed. Worship for residents and encourage our churches to view ACH as extension of their adult ministry
- Secured Artesia Community Grant - \$27,000 for the C.A.R.E. Fund

- Continuing working on plans for 75th Anniversary party/open house (tentative 11/5)
- Annual Board Meeting & Dinner 11/5/26 – 75th Celebration

Rented or Occupied Rooms: As of 1/21/26
SNF: 48 beds / 66 beds; Budgeted: 61
ALF: 55 rooms / 62 rooms; Budgeted: 52
MCC: 22 beds / 28 beds; Budgeted: 26
Cottages: 21 cottages / 21 cottages; Budgeted: 20

Admissions/Discharges: November & December 2025
SNF: 12 Admissions, 11 Discharges, 2 Passed Admissions closed 10-17-25 & reopened 11-7-25
ALF: 0 Admissions, 1 Discharges, 0 Passed,
MCC: 0 Admissions, 2 Discharges, 1 Passed
Cottages: 0 Admissions, 0 Discharge, 0 Passed;
Total: 12 Admissions, 14 Discharges, 3 Passed

FACILITIES:

- Met with Life Safety Surveyor on 1/21/26 to review EOP/Disaster and Life Safety walk through. Provided administrator with identified issues.
- Working on gathering recommendations and quotes for Covenant Center plumbing drain line repair
- Painting and Carpet Project in Assisted Living and Main Lobby completed by mid-December.
- Addressed several plumbing issues in Assisted Living resulting in adding clean outs, removal of tree roots and 3 broken snake pieces as well as replacing carpet in 2 closets.

Satisfaction Surveys

2 received. 1- 100% & 1- 90%. Reviewed by Program Director in ALF & MCC

Comments:

- Honestly, I'm sad that mom was only in her apartment for 1 ½ years. She loved living there and especially at mealtimes with her precious tablemates.
- Would have preferred more games & card games for activities for my dad.
- Strong accolades to individual staff members
- Satisfied with dining services but note that servers are late. implemented
- Consider the cost of memory care is worth the kind of care received.

- “Appreciate the comfortable atmosphere, the caring attitude.” “I am grateful that there is an atmosphere of grace in the memory care. The care staff are like family with the residents. I’m so glad that it can feel like home to my dad even though he is still grieving his wife’s death.”

Prayer requests

- Praise and thanksgiving for a blessed Christmas season
- Prayers as we anticipate our SNF survey
- Prayers for prospective residents as they consider ACH as a new home
- Ongoing health of our residents, employees and families

Respectfully Submitted,
Michelle Robison, MSW, LCSW, RCFE, LNHA Executive Director

Artesia Christian Home 2025 Year- End Goals & Initiatives Review Summary

1. Organizational Compliance & Risk Management

Strengthening compliance and reducing organizational risk remained a top priority.

Key accomplishments included:

- Near-completion of a wage and hour settlement with all funds distributed and corrective actions implemented.
- Payroll, timekeeping, and attendance systems have been reviewed and updated to ensure compliance with California and federal labor laws.
- Development of supervisory tools, reference guides, and checklists to reinforce payroll and timekeeping compliance.
- Rollout of updated Punctuality & Attendance and Meal & Rest Break policies, with full employee training and acknowledgment via Paycom.
- Annual supervisor training covers wage and hour laws, interviewing practices, and documentation standards.
- Completion of a third-party payroll audit confirming full regulatory compliance.
- A 93% reduction in meal premium costs during 2025, with continued improvement anticipated into FY 2026.
- Comprehensive Employee Handbook updates incorporating audit recommendations and clarifying PTO, sick time, unpaid time off, and holiday policies.
- Resolution of SNF survey deficiencies through the QAPI program, completing over 30 Performance Improvement Projects (PIPs).
 - Six PIPs will continue to be monitored through a KPI Dashboard reviewed quarterly by the QAPI Committee.
- Full update and implementation of ACH's Compliance & Ethics Program across staff, leadership, contractors, volunteers, and the Board.
- Review, legal update, and integration of admission contracts across all programs.
- Updates to Assisted Living and Memory Care Plans of Operation to align with 2025 DSS regulations.
- Residential Annual Survey: 0 deficiencies
- SNF Staffing Survey: 0 deficiencies
- 403b Audit: 0 deficiencies

Key Risk Area

The SNF experienced a decline to a 2-Star rating, associated fines, and a two-year temporary suspension of the CNA Training Program. This remains an active and ongoing focus for leadership.

2. Financial Strategies to Support Operations

ACH exercised disciplined financial stewardship while adapting to external pressures.

Highlights included:

- Staffing adjustments aligned with census to manage labor costs.
- Transition of Dining Services staff to Morrison Living effective October 1, 2025.
- Suspension of discretionary 403(b) employer contributions to offset rising labor expenses.
- Successful participation in the Medi-Cal Workforce Standards Program (WSP), resulting in approximately \$360,000 in retroactive reimbursement.
- Sustained SNF rehab census contributing positively to financial performance.
- Receipt of Employee Retention Credit (ERC) funds, strengthening overall financial stability.
- Securing financing for a generator project, later paused due to the state's indefinite suspension of the mandate—avoiding unnecessary capital expense.
- Ongoing monitoring of RN staffing mandate changes (ultimately eliminated) and SB 525 healthcare minimum wage requirements anticipated in 2026.

3. Organizational Efficiency & Workforce Sustainability

ACH focused on process improvement, communication, and cultural alignment.

Key initiatives:

- Full Paycom platform integration, improving payroll, onboarding, and applicant tracking.
- Relias Training platform upgrades, increasing visibility and compliance tracking.
- Strengthened cross-departmental collaboration to reduce silos.
- Reinforcement of ACH's Non-Negotiable Behaviors through the Employee Handbook, Code of Conduct, staff meetings, peer accountability, and performance evaluations.

4. Staffing & Staff Development

Stabilizing staffing and preparing for leadership transitions were central priorities.

Accomplishments included:

- Digitization of recruitment through Paycom ATS and standardized systems training.

- Promotion of internal talent across HR, Social Services, Residential, and SNF departments.
- Completion of internal I-9 audits with no deficiencies; third-party audit initiated for additional assurance.
- Optimization of 403(b) and workers' compensation processes, including updated plan documentation.
- Planned retirements successfully managed (Cook, Payroll Coordinator, Residential Administrative Assistant).
- Implementation of recruitment and retention strategies resulting in a nearly 9% reduction in SNF nursing turnover.
- Introduction of a \$2 NOC shift differential for CNA and Nursing staff.
- Upgraded Point-of-Care documentation systems and expanded use of registry staffing.

Despite improvements, SNF night shift staffing remains a challenge and a continued strategic focus.

5. Leadership Development & Licensure

ACH invested in leadership readiness and professional development.

- Administrators, DON, and Residential leadership completed required CEUs and renewals.
 - Administrator achieved Preceptorship certification.
 - Progress toward Administrator-in-Training pathways for emerging leaders.
 - Leadership networking and education through conferences, surveyor training, PBJ webinars, and inter-facility engagement.
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6. Community Relations & Engagement

ACH expanded visibility and strengthened community connections.

- Launched Givebutter platform, raising nearly \$8,000 through monthly CARE Fund giving.
 - Hosted two Family Market events, raising approximately \$9,300 for the CARE Fund.
 - Implemented the "Welcome Home" CRM to improve lead and admissions tracking.
 - Increased community presence through 20+ onsite and offsite events.
 - Initiated the Historical Wall project using volunteers and auxiliary support.
 - Began planning for ACH's 75th Anniversary to be celebrated November 5, 2026.
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7. Technology & Infrastructure

- Initiated QLAN cybersecurity, testing, and compliance programs.
 - Implemented Data Exchange Framework (DxF) SNF requirements.
 - Transitioned to Matrix Care Assist and Matrix Meal Care platforms.
 - Repaired and replaced outdated technology to improve efficiency.
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8. Facilities & Campus Improvements

Multiple facility upgrades were completed, including auxiliary-funded projects, office remodels, safety upgrades, and ongoing maintenance across all programs. Regulatory compliance related to fire safety and generator requirements was monitored and appropriately adjusted following state guidance.

Conclusion

ACH's 2025 strategy reflects a balanced approach to mission-driven care, regulatory accountability, and operational sustainability. Through strengthened compliance, workforce investment, technology modernization, and community engagement, ACH remains well-positioned to address current challenges while preparing for future growth and leadership transitions.