

AGENDA CCMC AUTHORITY BOARD OF DIRECTORS CCMC CONFERENCE ROOM January 31, 2019 at 6:00PM REGULAR MEETING

AT CCMC, WE BELIEVE THAT HEALTHY PEOPLE CREATE A HEALTHY COMMUNITY.

Board of Directors

Kristin Carpenter exp. 3/20 April Horton exp. 3/19 Greg Meyer exp. 3/19 Linnea Ronnegard exp. 3/21 Gary Graham exp. 3/21

OPENING: Call to Order

Roll Call – April Horton, Kristin Carpenter, Linnea Ronnegard, Gary Graham, and Greg Meyer. Establishment of a Quorum

- A. APPROVAL OF AGENDA
- **B. CONFLICT OF INTEREST**

CCMC CEO

Scot Mitchell

C. COMMUNICATIONS BY AND PETITIONS FROM VISITORS (Speaker must give name and agenda item to which they are addressing.)

- 1. Audience Comments (limited to 3 minutes per speaker).
- 2. Guest Speaker
- D. BOARD DEVELOPMENT
- E. APPROVAL OF MINUTES

1. January 7, 2019 Special Meeting Minutes Pages 1-3

F. REPORTS OF OFFICER and ADVISORS

- 1. 2017 Audit Report
- 2. Board Chair Report

3. CEO Report
4. Finance Report
5. Medical Directors Report
6. LTC Nursing Report
7. CAH Nursing Report
8. Quality Improvement/Infection Control Report
Page 4-7
Pages 8-11
Page 12
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Page 14
Pages 15-18

- G. CORRESPONDENCE
- H. ACTION ITEMS
- I. DISCUSSION ITEMS
- J. **AUDIENCE PARTICIPATION** (limited to 3 minutes per speaker)

Members of the public are given the opportunity to comment on matters which are within the subject matter jurisdiction of the Board and are appropriate for discussion in an open session.

- K. BOARD MEMBERS COMMENTS
- L. EXECUTIVE SESSION
 - 1. CEO Contract Renewal and Performance Compensation

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- 2. Review of CEO Evaluation Summary
- M. ADIOURNMENT

For a full packet, go to www.cityofcordova.net/government/boards-commissions/health-services-board

^{*}Executive Session: Subjects that may be considered in executive session are: 1) Matters, immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity; 2) Subjects that tend to prejudice the reputation and character of any person, provided that the person may request a public discussion; 3) Matters which by law, municipal charter, or ordinance are required to be confidential; 4) Matters involving consideration of governmental records that by law are not subject to public disclosure; 5) Direction to an attorney or labor negotiator regarding the handling of specific legal matters or labor negotiations.

Minutes

CCMC Authority – Board of Directors CCMC Admin Conference Room January 7, 2018 at 6:00pm Regular Meeting

CALL TO ORDER AND ROLL CALL -

Kristin Carpenter called the Board Meeting to order at 6:00pm.

Board members present: Kristin Carpenter, April Horton, Gary Graham, and Greg Meyer.

A quorum was established. 4 members present.

CCMC staff present: Scot Mitchell, CEO; Bill Storck, Interim CFO; Randall Draney, CFO; and Faith Wheeler-Jeppson, Executive Assistant.

A. APPROVAL OF AGENDA

M/ Graham S/ Meyer "move to approve the Agenda."

4 yeas, 0 nay

Motion passed.

B. CONFLICT OF INTEREST ~ None

C. COMMUNICATIONS BY AND PETITIONS FROM VISITORS

- 1. Audience Participation ~ None
- 2. Guest Speaker ~ None

D. BOARD DEVELOPMENT ~ None

E. APPROVAL OF MINUTES

M/ Horton S/ Graham "move to approve the November 29, 2018 Regular Meeting Minutes".

4 veas, 0 nav

Motion passed

F. REPORTS OF OFFI CERS and ADVI SORS

- 1. Board Chair None
- 2. CEO None
- 3. Finance None
- 4. LTC Nursing None
- 5. CAH Nursing None
- 6. Quality Improvement/Infection Control None

G. CORRESPONDENCE ~ None

H. ACTION I TEMS

1. CCMC Authority Board of Directors Bylaws Approval

M/ **Horton S**/ **Graham** "I move that the CCMC Authority Board of Directors approve the Board of Directors Bylaws as presented".

4 yeas, 0 nay Motion passed

2. 2019 QAPI Plan Approval

M/ Graham S/ Meyer "I move that the CCMC Authority Board of Directors approve the 2019 QAPI Plan as presented."

4 yeas, 0 nay

Motion passed.

3. CAH Periodic Evaluation Approval

M/ Horton S/ Meyer "I move that the CCMC Authority Board of Directors approve the CAH Periodic Evaluation as presented."

4 yeas, 0 nay

Motion passed.

I. DISCUSSION ITEMS

 Scot Mitchell reported to the Board that Dingus Zarecor and Associates, PLLC would like the Board to consider whether it would be beneficial to review the audit via electronic communications rather than incur the additional expense of coming up to Cordova in person.

J. AUDI ENCE PARTI CI PATI ON ~ None

K. BOARD MEMBERS COMMENTS

Horton ~ No comment.

Ronnegard ~ No comment.

Carpenter ~ No comment.

Graham ~ No comment.

L. EXECUTI VE SESSI ON

1. CEO Annual Evaluation

M/ Meyer S/ Graham "I move that the CCMC Authority Board of Directors go into Executive Session for matters which by law, municipal charter, or ordinance are required to be confidential.

4 yeas, 0 nay

Motion passed.

Board went into Executive Session at 6:48pm

Board came out of Executive Session at 8:07pm

M/ Meyer S/ Horton "I move to approve the CEO salary as approved in the 2019 Budget after completing the performance review."

4 yeas, 0 nay Motion passed.

M. ADJOURNMENT

M/ Graham S/ Horton "I move to adjourn the meeting." Carpenter declared the meeting adjourned at 8:15pm.

Prepared by: Faith Wheeler-Jeppson



CEO Report to the CCMC Authority Board of Directors January 31, 2019 Scot Mitchell, CEO

The Big Picture

2019 is bringing in some interesting dynamics to the Alaska Legislature. The State Senate has started the business of appointing committees and scheduling hearings. As of my writing this report, the Alaska House of Representatives is still not organized. They have elected a Speaker Pro Tempore, which is a temporary position with limited authority. The Republicans hold a 23-17 majority in the House, but two Republicans (including Rep. Stutes) and one Independent who will align with the Democrats, resulting in an even split. Until the House comes up with a structure for the session, the House members do not have any committee appointments.

One of the biggest expectations for the new session is Governor Dunleavy's budget, which must be submitted by February 15th. From what we are hearing, his proposed budget will include staggering cuts. It appears the budget proposal will include cuts of \$1.6 billion, which will allow for "full" PFD dividend payments. While we don't yet know the scope of cuts, ASHNHA has been hearing that some of the possible cuts are:

- Facility rate cuts, likely for PPS hospitals, but possibly excluding CAHs and LTC
- Potentially moving PPS hospitals to DRGs
- Backfilling PPS cuts with a provider tax
- Cutting entire categories of optional services
- Reducing eligibility
- Adopting the Oregon prioritized list of services
- Eliminating the Medicaid expansion
- Medicaid work requirements

If these cuts do become a reality, it could have dire impacts on the entire healthcare industry in Alaska. Some of these cuts would require legislative changes to statutes, while others could be done via the budget process. If these become a reality, we would expect an all-out battle to try to prevent the negative effects on hospitals in Alaska. We may need to ask Board Members to help with communicating the need for a sustainable health care infrastructure in Cordova to our elected representatives. We'll keep you updated on these, and any other legislative issues throughout the current session.

Status Updates

Service:

As a result of the issues we've been encountering with our new EHR system, Thrive, an Implementation
Specialist from Evident is on-site this week conducting a review of all the problems we are having. This visit is
at no cost to CCMC. Some of the issues have already been addressed, but others are going to take a little longer
to get resolved. We will also be implanting a new training schedule for all the staff who use the Thrive system

- to make sure they are competent with the systems capabilities. We continue to experience billing issues, which do have a negative impact on our cash flow. This is the biggest priority that we're working on.
- Our new radiology provider, vRad, has started reading our imaging studies for us, replacing RAPC. This change will also see CCMC billing patients for the Radiologist professional fees, instead of them doing that billing. This should help increase our revenue.
- CCMC staff did an amazing job of responding to the earthquake of November 30, 2018. The residents and patients were prepared very quickly for a possible evacuation. Luckily, no tsunami warning was issued for our area, so we did not have to evacuate. There were no injuries to any residents, patients or staff from the temblor. We did have some very minor damage to a door leading to the exit from the LTC activities room. A new door has been received and is in the process of being installed. The experience we gained from the evacuation after the earthquake in January of 2018 was invaluable as the process went much smoother this time.

Quality:

- We had our CMS recertification survey for the nursing home the week of December 10th. All of the preparation the staff has been doing paid off nicely. The surveyors stated that this was the best survey that CCMC has ever had! During the 2017 survey, we had 13 deficiencies, and the latest one we only had two for the health portion. These deficiencies were not related to any quality of care issues, one was requiring more details in a policy and the other was asking for additional detail in the facility assessment. The Life Safety Code survey found three deficiencies, which is a reduction from nine at the last survey. For the first time, we were also surveyed on our Emergency Preparedness, where we had three deficiencies. We have completed the Plans of Correction (PoCs) for each of the deficiencies, and are now awaiting the resurvey to make sure we are in compliance with the approved PoCs. I want to thank our staff for the amazing work they have done to make these quality improvements! The people of Cordova are lucky to have such dedicated healthcare professionals ready to provide care in their time of need.
- I recently signed an affiliation agreement with the University of Washington School of Medicine to allow Physician Assistant students to spend some time at CCMC doing clinical rotations. We are tentatively looking at having the first student coming here for a few weeks this summer.

Finance:

- The 2017 audited financial statement was completed in late December. DZA, our auditors, will present the report to the Board at the January 31, 2019 meeting via video. The audit shows that we had an operating gain of \$144,415 in 2017, compared to a loss of \$3.7 million the previous year. This sizeable improvement was due in part to one time changes from the GASB accounting for the PERS liability. Despite that, we still made a significant enhancement to our financial bottom line over the previous year.
- We recently received our final settlement from the desk review of the 2016 cost report. As a result of this settlement, CMS overpaid CCMC just over \$9,000. This amount that we owed back to CMS was withheld from payments last month.
- Early last month we received notice from CMS that they were making an interim payment rate adjustment for Medicare services as a result of the 2017 cost report, effective December 19, 2018. Our new interim rate for Medicare Part A hospital services is now \$3,450 per day, an increase from \$2,712 per day. Our new rate for Medicare Part B, physician services jumped to 120%, from 115%. Our Medicare Swing Bed rate is now \$2,482 per day, compared to \$2,074. In addition to these payment rate adjustments, we also received an \$112,000 lump sum payment from the 2017 cost report. We should expect a final settlement on the 2017 cost report by the end of this year.
- Due to ongoing issues with the implementation of the Thrive EHR system, the financial statements are still not showing all the actual revenue generated during those months. As explained in the last regular meeting, we are still working to get this fixed. Evident is helping us track down the issues.
- As mentioned before, the arrangement that we had with PERS to not have to actually pay the 17% tax on gross payroll has now ended. We received a notice from PERS saying that they are no longer going to allow us to do this. Alan Lanning and I had a phone conversation with several of the key leadership members from the State

- about our issues with the PERS obligations. This call took place during the transition to the new administration and they asked us to give them some time for the new staff to come on board and be briefed on our concerns. They did let us know that there are several other entities in Alaska with the same issue, so we are not alone.
- A few new transparency laws recently went into effect, or will shortly. A new federal rule went into effect on January 1, 2019 that requires hospitals to post their "standard charges" on our website in a "machine readable" format. We had this completed in mid-December. The State of Alaska now requires hospitals to compile a list of the 10 health care services most commonly performed from each of six sections of the CT codes, including undiscounted prices. This info must also be posted on our website and submitted to the State Department of Health and Social Services. In addition, the State now requires that all hospitals must provide good faith estimates, within 10 days after receiving a request, of the reasonably anticipated charges for treating a patient's specific condition upon request. We have not yet finalized these requirements, and will probably have some difficulties due to the new EHR system issues. We will get this completed as soon as possible.

People:

- Randall Draney joined our staff on December 30, 2018 as the new Chief Financial Officer. I want to thank the leadership team for their assistance in the recruitment process that led us to offer the position to Randall. Randall has jumped in and is evaluating our financial services departments and developing action plans to help us to continue the improvements that we have made over the past couple years. I want to recognize and thank Lee Bennett and Bill Storck for their help as serving as interim CFO during the past few months. They were able to help us with the installation of the new EHR, and get the budget together on a short time frame.
- Dr. Sanders' current contract expires in April of this year. She has agreed to stay and has already signed a new contract. I want to thank Dr. Sanders for all of the extra work she does for CCMC and our patients. The Cordova community is extremely fortunate to have such a dedicated physician of her caliber!
- We also renewed contracts with Dr. Harper and Dr. Bejes for periodic physician coverage.
- We will be having a new full time Radiologic Technologist join CCMC next month.
- We recently renewed contracts for our consulting Pharmacist and Dietitian.
- As I've advised the Board many times, the recruitment and retention of staff is one of the most important issues
 that we deal with every day. We currently have five vacant positions that we're recruiting for. We continue to
 recruit for two Licensed Clinical Social Workers for permanent positions.

Growth:

- Our new Occupational Therapist recently made her first visit to CCMC. She did consultations with our nursing home residents and also saw patients from the community on an outpatient basis. We will continue to have her coming, probably on a quarterly basis.
- We have completed, and signed, a contract for a new Pediatrician, Dr. Wesley Gifford, to come to Cordova. We are now working on setting up his first visit to provide a pediatric clinic in the next few months. Dr. Gifford has agreed to come over from Anchorage at least quarterly.
- We are looking at opportunities to increase the amount of time that our Speech Therapist is available to provide services to not only our nursing home residents, but outpatients as well.
- We are still negotiating a contract to bring Dr. Wesley Gifford to CCMC for a pediatrics clinic.
- We have recently started having discussions with a Podiatrist to come to CCMC and provide consults with our long term care residents, as well as conducting outpatient clinic services for patients from the community.

Community:

Earlier this month, Kadee Goss, Kelly Kedzierski and I participated in a week long FEMA disaster training program
with some City of Cordova staff to help us prepare to work together in the event of a community-wide or
regional disaster. The two courses we took were: ICS-300: Intermediate Incident Command System for
Expanding Incidents and ICS-400: Advanced Incident Command System, Command and General Staff – Complex
Incidents. It is due to preparedness activities such as this that Cordova is seen as one of the most well prepared

- communities in Alaska to respond to disasters. A big thank you is in order for the City Emergency Preparedness staff who conducted the training!
- You may have already heard, but there has been a local group of people working for quite some time now to establish a community foundation here in Cordova. Exciting news came last month when the Alaska Community Foundation (ACF) selected the Cordova Community Foundation to become an affiliate of ACF. This will help preserve the future of Cordova by allowing citizens to donate funds into an endowment with the purpose being to help Cordova non-profit organizations spend more time working on their mission and less time fundraising. Congratulations are in order to Kristin Carpenter, who was elected to serve as the first Chairperson of the Advisory Board for the Cordova Community Foundation. I was also elected to serve as the Treasurer of the Advisory Board, and I'm honored to help serve the Cordova community in this fashion.
- CCMC, along with the City of Cordova and the Native Village of Eyak have started a process of researching the
 potential for improving collaboration in the healthcare field between these entities. A facilitator has led
 separate meetings, and one joint meeting to discuss potential options. CCMC has provided data and
 information on current collaboration activities, along with data from our 2016 Community Health Needs
 Assessment. We have been asked to provide additional information about the services we provide, along with
 responded to some concerns/perceptions expressed by NVE. There are two additional joint meetings to be
 held in the near future.
- CCMC continues to prepare for the Alaska Shield 2019 statewide disaster exercise. We've had some preliminary discussions with our own staff and state and local emergency preparedness staff on how CCMC will participate. While there are still plenty of unknowns, the initial plan will include multiple terrorism attacks across the state. CCMC will participate along with the City in this multi-day exercise. One area that we are considering is to serve as a Point of Distribution for medications to treat the agent that will be involved in the drill. This will involve mass vaccinations and potentially helping the State as they use CCMC as a hub to distribute medications to outlying communities.



Monthly Financial Statements

December, 2018

January 23, 2019

To the Board,

Re: December and Year 2018

Financial Statements

The transition of CFO's and staff vacations has delayed completing December. It is anticipated that December 2018 and YTD 2018 Financial statements will be handed out at the board meeting. In the event the financials are not finished in time, they will be sent out as soon as possible. When the financials are made available, they will be presented as "preliminary drafts subject to change." which acknowledges that the accounts have not been fully analyzed yet and it is anticipated that there may be significant changes. See comments under "Accounting Improvements" below.

Accounting Improvements

Over the next few months we will be analyzing each account in the balance sheet to insure that the supporting detail matches the balance in the balance sheet, e.g. do the bank reconciliations tie to the balance sheet. Once completed we will maintain this reconciliation process on a monthly basis. Financial statements will become more defendable as this process proceeds.

Priorities for Financial Improvements

The initial focus will be on 1) cash reconciliation and management and 2) billing and collections.

Cash reconciliation will consist of catching up the bank reconciliations and entering the results on the "books." Cash management will consist of analyzing our processes for accounting of cash with the goal of reconciling cash to the books on a daily basis.

Billing and collections is the other priority and consists of:

- 1) Software (Evident) that is set up and functioning properly and used by trained staff.

 This is not the case at present but Scot is addressing this issue.
- 2) Weekly chart review with nursing, medical records, and billing staff to review selected patients.

 This is being set up with Lucy of Evident.
- 3) Analyzing patient accounts before being sent to our outsourced processor, AVEC, to insure the capture of all charges.
- 4) Improved processes and accountability for working with AVEC to insure AVEC is performing efficiently.
- 5) Improved monitoring of the results of the entire billing and collection process and focus on continuous process improvement.

Randall Draney, CPA CFO

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_	Cumulative Monthly	Total Avera	2.8	4.6	1.2		47 3.9	69 5.8	81		125 10.4	205 17.1	210 17.5		10 0.8	19 1.6	17 1.4		895 74.6	1,418 118.2	237 19.8		6 0.5		3 0.3			3,615 301.3	3,615	3,615 3,650 3,637	3,650 3,637	3,615	3,650	3,637	3,637	3,615	3,650 3 3,650 3 3,637 3 591 604
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3	Aug		1.5	4.4	0.3		3	9	5		9	13	10		1	0	0		41	124	0		0	0	0		310		310	310	310	310 10.0	310 310 10.0	310 310 10.0 10.0	310 310 10.0 10.0	310 310 10.0 10.0 54	310 310 10.0 10.0 10.0 54 68
31	Jul	•	2.1	5.3	1.2		2	10	7		16	27	11		1	-	-		20	114	25		1	0	2		309	010	2	292	292	292	292	292 292 10.0 10.0	292 292 10.0 10.0	292 292 10.0 10.0 10.0	292 292 10.0 10.0 10.0 78 78
30	Jun	•	1.8	3.1	2.2		4	-	5		10	2	20		3	0	က		43	06	46		0	0	0		286	300		298	298	298	298 9.5 10.0	298 9.5 10.0	298 9.5 10.0 10.0	298 9.5 10.0 10.0	298 9.5 10.0 10.0 57 57
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30	Apr	,	2.8	4.5	2.0		4	2	∞		6	17	22		0	-	2		75	111	37		2	0	0		295	300	202	3	102	9.8	9.8	9.8	9.8	9.8	9.8 10.0 10.0 46 49
31	Mar	•	4.6	4.5	1.3		2	7	က		18	29	18		0	2	0		124	109	23		0	0	0		310	310	310			10.0	10.0	10.0	10.0	10.0	10.0 10.0 10.0 60 67
28	Feb	•	4.4	3.8	1.9		4	7	8		8	23	15		-	က	2		116	84	40		0	0	0		278	280	290			9.6	9.9	10.01	9.9	9.9 10.0 10.0 43	9.9 10.0 10.0 35
31	Jan	•	6.4	3.1	8.0		12	6	9		35	34	16		7	2	2		166	64	6		2	0	l l		808	310	310			8.6	9.8	9.8	9.8	9.8	9.8 10.0 10.0 46
December-18		Hosp Acute+SWB Avg. Census	FY 2018 ADC	FY 2017	FY 2016	Acute Admits	FY 2018	FY 2017	FY 2016	Acute Patient Days	FY 2018	FY 2017	FY 2016	SWB Admits	FY 2018	FY 2017	FY 2016	SWB Patient Days	FY 2018	FY 2017	FY 2016	CCMC LTC Admits	FY 2018	FY 2017	FY 2016	CCMC LTD Resident Days	FY 2018	FY 2017	FY 2016	7 V	CCIMIC LIC Avg. Census	I C Avg.	I C Avg.	C Avg.	C Avg.	L Avg.	G Avg.

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December-18 31 28	31	28	3	8	33	30	3	3	30	31	30	31		
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Cumulative Monthly	Monthly
Outpatient Registrations w/ER														
FY 2018	162	158	213	301	235	176	204							
FY 2017	120	111	138	293	136	146	177	168	145	106	110	94	1,744	145
FY 2016	120	117	131	342	159	164	160	172	165	146	126	137	1,939	162
PT Procedures														
FY 2018	370	221	184	215	295	281	271	408	334	400	424	333	3,736	311
FY 2017	416	322	497	339	327	296	343	136	206	373	270	178	3,763	314
FY 2016	319	344	349	401	326	396	291	324	489	346	407	415	4,407	367
Lab Tests														
FY 2018	325	290	339	208	569	244	358	569	215	236	285	292	3,332	278
FY 2017	298	322	284	304	318	283	435	410	337	280	278	305	3,854	321
FY 2016	304	363	324	350	374	339	318	314	319	340	272	219	3,896	325
X-Ray Procedures														
FY 2018	29	36	28	29	20	29	71	63	39	53	30	30	282	49
FY 2017	47	43	37	29	42	63	72	22	43	34	41	33	541	45
FY 2016	09	52	64	99	92	71	63	74	52	44	42	37	691	58
CT Procedures	0		i											
FY 2018	14	7	16	7	7	14	18	21	6	8	0	0	121	10
FY 2017	2	2	13	14	12	14	22	15	12	6	8	9	138	12
FY 2016	0	2	16	14	15	24	20	14	15	22	17	13	180	15
CCMC Clinic Visits														
FY 2018	506	183	203	176	219	190	170	236	241	270	201	152	2,447	204
FY 2017	212	175	197	188	248	239	217	284	326	283	199	117	2,775	231
FY 2016	178	197	170	203	222	191	202	231	343	227	203	223	2,593	216
Behavioral HIth Visits														
FY 2018	111	86	127	114	112	66	126	111	32	84	96	64	1,176	86
FY 2017	02	86	71	06	88	100	82	109	72	82	84	26	1,049	87
FY 2016	94	100	103	104	88	22	28	33	26	47	80	122	296	81
Retail Pharmacy Scripts														
FY 2018	864	752	696	1,002	1,072	1,020	1,093	1,047	698	1,150	984	1,048	11,870	686

Medical Staff Report to the CCMC Board of Authority

The 4th quarter of 2018

This quarter we brought a new service to Cordova with the introduction of home sleep studies. We are partnering with Dr. Dodge of Peak Neurology to provide this service. This service is going smoothly and will hopefully continue to grow. We are glad to provide Cordova with sleep study capabilities without the need to travel to Anchorage.

We are continuing to work with Evident and the new electronic medical record (EMR). Unfortunately we are using many work arounds to get the system to function for us. There are many parts of the EMR that slow our throughput. We are continuing to put in time and effort to improve the system and document where adjustments and fixes are needed for Evident to fix the issues. We all continue to look forward to a day with fewer electronic medical record issues.

Clinic volumes have been slightly down over the 4th quarter. On average this volume decrease has been equal to ~3.5 fewer patients per week. This is multifactorial. Clinic staff have identified several areas we feel we can improve. Volumes have certainly been impacted by rotational medical staff and our new EMR. We continue to strive to provide quality care for our community and feel that as we provide excellent patient centered care, we will continue to grow.

At the end of last quarter Dr. Sanders and Scot Mitchell provided a joint training session for the Cordova EMS, and CCMC clinical staff. The training session went very well and there have been many requests to provide similar training session in the future. We plan to continue this collaborative training quarterly.

Dr. Hannah Sanders Medical Director

January 31, 2019 Meeting



P: (907) 424-8000 | F: (907) 424-8116 P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

Date: January 31th 2019

To: CCMC Authority Board of Directors

From: Director of Long Term Care, Kadee Goss RN

RE: Nursing Report

- We are utilizing all 10 bed Long Term Care at this time. Over the month we have been down to 9 residents.
- We are always focused on safety for all of our residents, we continue with hourly rounds on each resident, making sure beds are in low position when occupied and needed items are in residents reach.
- We have been focused this month on getting all residents appointments for different resources they may need, including dental, vision, and urology.
- Each resident was offered time to work with our Occupational Therapist. She was able to work with the residents and educate the staff on ways to safely maintain and improve function.

To: CCMC Authority Board of Directors

From: Kelly Kedzierski, RN RE: January 2019 Nursing Update

• Staffing:

Nursing staffing continues to be adequate as both Kadee and I have worked the
floor a few times in the past couple of weeks. It gives us the opportunity to have
even more hands on interaction with both our staff and the residents/patients and
visitors of CCMC. We will be getting a few new faces in the next month as some
travel nurses are leaving and others will be coming to join our team here at
CCMC

Census:

• LTC census had decreased to 9 residents throughout the month but is now back up to 10. Currently, we have 3 Swing beds occupied.

• The ongoing challenges:

• Surveys-Continue with the current plans and prepare for the CAH survey in the near future.

Training-

- On December 20th, 2018 CCMC had an in-service with the EMS and Nursing staff for Cardiac and Trauma Training.
- On January 5th, 2019 The SART team came to CCMC to do a presentation for out nursing staff.
- On January 15th, 2019here was a Nursing staff in-service on Pediatric assessment and respiratory.

Kelly Kedzierski, RN

CAH-DON

To: CCMC Authority Board of Directors

From: Kelly Kedzierski, RN

RE: January 2019 Quality Improvement Report

Quality Improvement

The CCMC team is continuously and consistently working hard to build a healthcare system that focuses on keeping our community healthy, provides appropriate and timely access to excellent healthcare, and provides the right care, at the right time, in the right place, all the while promoting focused improvement.

Currently we are meeting on a monthly basis. The last Quality meeting was held on December 19, 2018 where we discussed:

- Environment of care rounds- our team has pulled together to ensure action items on our environment of care rounds are addressed quickly.
- QAPI PLAN 2019- which was to be approved by the Board on 01/07/2019
- QAPI Self-assessment- this is a tool that helps CCMC assess where we are in our QAPI program compared to where we would like to be. In comparison to last year's self-assessment we are doing well. Quality is a priority in our organization and our self-assessment reflects that.

Our next Quality meeting will be held on January 29th.

To: CCMC Authority Board of Directors

From: Kelly Kedzierski, RN

RE: January 2019 Infection Control

Infection Control

- The last meeting was held on November 14th, 2018. Our next meeting with be held on February 5th, 2019
- Antibiotic Stewardship-Tracking and Surveillance was main topic at this meeting.
- With it being flu season Respiratory Etiquette and Hand Hygiene are still top priorities.

Fun Facts:

Based on this methodology, CDC estimates that as of Jan. 5 2019:

- 6.2 to 7.3 million people have been sick with flu,
- 2.9 to 3.5 million people have been to the doctor because of flu, and
- 69,300 to 83,500 people have been hospitalized because of flu

These estimates are cumulative and will be updated over the course of the annual flu season on Fridays.

Germs can get into the body through our eyes, nose and mouth and make us sick, Handwashing with soap removes germs from hands and helps prevent sickness. Studies have shown that handwashing can prevent 1 in 3 diarrhea-related sicknesses and 1 in 5 respiratory infections such as a cold or the flu.

Handwashing at Home, at Play, and Out and About



Germs are everywhere! They can get onto your hands and items you touch throughout the day. Washing hands at key times with soap and water is one of the most important steps you can take to get rid of germs and avoid spreading germs to those around you.

How can washing your hands keep you healthy?

Germs can get into the body through our eyes, nose, and mouth and make us sick. Handwashing with soap removes germs from hands and helps prevent sickness. Studies have shown that handwashing can prevent 1 in 3 diarrhea-related sicknesses and 1 in 5 respiratory infections, such as a cold or the flu.

Handwashing helps prevent infections for these reasons:



People often touch their eyes, nose, and mouth without realizing it, introducing germs into their bodies.



Germs from unwashed hands may get into foods and drinks when people prepare or consume them. Germs can grow in some types of foods or drinks and make people sick.



Germs from unwashed hands can be transferred to other objects, such as door knobs, tables, or toys, and then transferred to another person's hands.

What is the right way to wash your hands?

- 1. Wet your hands with clean running water (warm or cold) and apply soap.
- 2. Lather your hands by rubbing them together with the soap.
- 3. Scrub all surfaces of your hands, including the palms, backs, fingers, between your fingers, and under your nails. Keep scrubbing for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song twice.
- 4. Rinse your hands under clean, running water.
- 5. Dry your hands using a clean towel or air dry them.

When should you wash your hands?

Handwashing at any time of the day can help get rid of germs, but there are key times when it's most important to wash your hands.

- Before, during, and after preparing food
- · Before eating food
- Before and after caring for someone who is sick
- · Before and after treating a cut or wound
- After using the bathroom, changing diapers, or cleaning up a child who has used the bathroom
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal food or treats, animal cages, or animal feces (poop)
- After touching garbage
- If your hands are visibly dirty or greasy

What type of soap should you use?





You can use bar soap or liquid soap to wash your hands. Many public places provide liquid soap because it's easier and cleaner to share with others. Studies have not found any added health benefit from using soaps containing antibacterial ingredients when compared with plain soap. Both are equally effective in getting rid of germs. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.

How does handwashing help fight antibiotic resistance?

Antibiotic resistance occurs when bacteria resist the effects of an antibiotic – that is, germs are not killed and they continue to grow. Sicknesses caused by antibiotic-resistant bacteria can be harder to treat. Simply using antibiotics creates resistance, so avoiding infections in the first place reduces the amount of antibiotics that have to be used and reduces the likelihood that resistance will develop during treatment. Handwashing helps prevent many sicknesses, meaning less use of antibiotics.

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1 in 3

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1 in 5

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For more information and a video demonstration of how to wash your hands, visit the CDC handwashing website:



Memorandum

To: CCMC Authority Board of Directors From: Scot Mitchell, FACHE, CCMC CEO

Subject: Executive Session – CEO Contract Renewal and Performance Compensation

Date: 12/31/2018

Suggested Motion: "I move that the CCMC Authority Board of Directors enter into Executive Session for matters which by law, municipal charter, or ordinance are required to be confidential."