



AGENDA
CCMC AUTHORITY BOARD OF DIRECTORS
CCMC CONFERENCE ROOM
April 25th 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
Barbara Solomon exp. 3/22
Greg Meyer exp. 3/22
Linnea Ronnegard exp. 3/21
Gary Graham exp. 3/21

CCMC CEO

Scot Mitchell

OPENING: Call to Order

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

A. APPROVAL OF AGENDA

B. CONFLICT OF INTEREST

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

1. CCMC Financial Improvement Activities

E. APPROVAL OF MINUTES

F. REPORTS OF OFFICER and ADVISORS

1. Board Chair Report
2. CEO Report Pgs 1-3
3. Finance Report Pgs 4-6
4. LTC Nursing Report Pg 7
5. CAH Nursing Report Pg 8
6. Quality Improvement/Infection Control Report Pgs 9-13
7. Medical Directors Report Pg 14

G. CORRESPONDENCE

H. ACTION ITEMS

1. Delineation of Privileges for Frances Aledo, MD Pg 15
2. Delineation of Privileges for Laura Hennecker, FNP Pg 16
3. Approval of CEO Search Firm Pg 17
4. Appointment of CEO Search Committee Pg 18
5. Approval of Community Health Needs Assessment Project Pg 19-21
6. Election of Officers Pg 22

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

M. ADJOURNMENT

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.



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CEO Report to the CCMC Authority Board of Directors
April 25, 2019
Scot Mitchell, CEO

The Big Picture

The Alaska Legislature continues to work on the 2020 State budget. The House of Representatives recently passed its version of the operating budget, and sent it to the Senate for consideration. The House is proposing operating budget cuts of \$200 million, which is considerably less than the \$1.6 billion cuts proposed by the Governor. The House budget provides for \$73 million in cuts to the Department of Health and Social Services, with \$58 million of that coming from Medicaid. It should be noted that the administration can still implement the \$100 million in the Governor's proposed reductions regardless of the Legislature's level of appropriation.

The Alaska State Hospital and Nursing Home Association has been diligently working with the Legislature to educate them on the impact these budget cuts will have on hospitals and nursing homes. ASHNHA has been able to advocate for some changes from the Governor's proposed budget that have been accepted by the House's version of the budget. Below are some of these highlights:

- Reduce the Medicaid program by \$58 million instead of the Governor's \$100 million proposal.
- Hold skilled nursing facilities harmless from rate cuts and inflation adjustment suspensions.
- Honor the small facility agreements that have been in place for some time now.
- DHSS will work with ASHNHA on DRGs and acuity-based rates.

Another interesting issue to be aware of is the potential for the use of block grants for Medicaid. CMS Administrator Seema Verma has been talking with various Governors about block grants, but there does not appear to be complete alignment within the Trump administration on the use of block grants. Governor Dunleavy recently sent a letter to President Trump stating that he is eager to become the first state to receive Medicaid dollars as a block grant. Block grants are designed to save money, but without transforming the system. We will have to wait and see if this becomes a reality.

Status Updates

Service:

- CCMC is still experiencing operational issues with the Evident system. We now have some additional onsite training scheduled to help our staff become more adept at using the system. Evident will have staff in Cordova the week of May 6th to conduct training for our nursing staff and registration staff. The week of May 13th will have laboratory and physician training. We are trying to schedule additional training for business office, radiology and quality/core measures. 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.
- We continue to develop a strong base of quality healthcare services so CCMC can build upon its past successes and grow in the future. Over the past year we've added pediatrics and OB/GYN specialty clinics along with a

home sleep medicine program in addition to a durable medical equipment service. The retail pharmacy continues to exceed expectations among our customers, and has been one of the best additions that we've made. With the addition of Laura Henneker, FNP to the clinic, we will open up some time for the physicians to do more minor procedures. This will allow patients to have minor procedures here instead of traveling to Anchorage.

- We will be presenting the CEO recruitment firms to the Board at this meeting so you can select a firm to help you with finding my replacement. The Board will also select the members of the CEO Search Committee at this meeting.

Quality:

- The CCMC nursing home continues to be among the best in the State of Alaska with our quality scores. LTC DON, Kadee Goss and the rest of the staff continue to provide excellent care to our residents. In addition to our quality scores, the staff has made major strides in improving our compliance with federal conditions of participation. Cordova is very lucky to have such a quality nursing home!
- Kelly Kedzierski, CAH DON and Quality Improvement Coordinator has been doing an amazing job of improving the overall quality of the entire facility. The Quality program has grown leaps and bounds over the past year, and this is due in large part to the efforts of Kelly and all of the CCMC staff. The Antibiotic Stewardship program has also grown with the help of numerous staff members. All of the efforts the staff have been making lead to better quality care being provided.
- I've mentioned the marked improvements in the quality of healthcare services provided at CCMC, but it's important to know that there are many professionals working behind the scenes to make sure the facility operates smoothly. Without all the staff working together, we would not be able to provide the excellent care that we do.

Finance:

- The changing of our electronic clearinghouse from Trizetto to TruBridge is now in the works. The transition process will take a few months and should be complete by early summer. This implementation will require additional training for several of our staff, and we are working around various schedules to make this happen. TruBridge is integrated into the Evident system, and should improve our billing processes by allowing us to have more clean claims and reduce the number of denials. All of this will increase our cash flow and reduce the amount of outstanding accounts receivable.
- As noted, we are still dealing with significant issues with our EHR system. We continue to have several staff members meeting weekly with Evident to try to get the financial system issues corrected so we can get accurate financial statements to the Board.
- I have asked Randall Draney, Chief Financial Officer to provide the Board Development portion of this meeting. Randall will provide a more detailed overview of the activities and strategies that he and the revenue cycle management team at CCMC are taking to improve the revenue side of our organization.

People:

- We will be presenting Dr. Frances Aledo to the Board for delineation of privileges at this Board meeting. Dr. Aledo will provide Tele-Psychiatry services in Sound Alternatives. Dr. Aledo is Board Certified in both General Psychiatry as well as Child and Adolescent Psychiatry.
- Laura Henneker, Nurse Practitioner, joined CCMC earlier this month. Laura has more than 15 years of Nurse Practitioner experience. She will also help us explore establishing a wound care program. After consultation with our Medical Director, Dr. Sanders, I have granted Laura Emergency Privileges consistent with the Medical Staff Bylaws, and we will present her request for privileges to the Board for approval as soon as we have one more piece of information.
- Angela Kesler, has joined CCMC as our new Physical Therapist. Angela is coming from Indiana, but has spent some time in Alaska previously. She has her Doctorate of Physical Therapy degree and has moved to Cordova.

- We have made an offer of employment to a Licensed Clinical Social Worker, who has accepted the position. We are currently waiting on her Alaska license before she can start. We are still conducting a search for the second LCSW position in Sound Alternatives.
- Randall Draney and Kadee Goss have both started preparing to take the national certification exam for Nursing Home Administrators. This process can take some time, but we thought it would be good to have at least one other person on staff with a license in case the person who will replace me as CEO does not have a current Alaska license.

Growth:

- With Laura Henneker, FNP joining CCMC, we will be able to accept more patients in the clinic, and we are also planning on starting a wound care program with her assistance. We routinely receive referral requests for patients who need wound care services. Adding this service will help us increase our swing bed census, and provide another needed service. Additionally, having Laura seeing more clinic patients will free up some time for the physicians to perform more minor procedures. This will allow patients to not have to travel to Anchorage for some procedures, and increase utilization of our clinic.
- Dr. Gifford's next pediatrics clinic will be held on May 3rd.
- Recent conversations have taken place with a Board Certified Emergency Medicine physician who is interested in coming to CCMC. This physician lives in Alaska, but is not available until later this fall. We have sent him an application for Medical Staff privileges.

Community:

- CCMC is required to conduct another Community Health Needs Assessment (CHNA) in 2019. I will be presenting a proposal, from the National Rural Health Resource Center to perform the assessment, to the Board for approval. This is the same group that conducted the CHNA for us in 2016. This is a good opportunity for CCMC to take the pulse of the community regarding how we can continue to meet the needs of the people in Cordova.
- The Alaska Shield 2019 statewide disaster exercise took place the week of April 8th. This year's exercise was centered on multiple terrorism attacks across the state, with several happening here in Cordova. CCMC participated along with the City in this week-long exercise. We established a Point of Dispensing (POD) for medications to treat the pneumonic plague that was part of the drill. This is the same process we would use to dispense medications to the entire community in the event of a real terrorist attack.
- We were able to use our new Incident Management System as part of our response to the Alaska Shield "Ragin' Contagion" exercise. This allowed us to have one place to go for adding details and information about our response to the exercise. We have already started working on using the system to more easily draft our After Action Report/Improvement Plan as required by the Centers for Medicare and Medicaid Services. This system will also improve the planning processes for emergency preparedness activities here in Cordova.
- The Cordova Health Fair is scheduled for April 27, 2019. I encourage everyone to make plans to attend this year's health fair, it will be a great event for the community.

FINANCIAL REPORT TO THE BOARD

As of March 31, 2019

Randall Draney, CFO

Financial Statements

The income statement will be presented.

Balance sheet reconciliation project (preparing for audit)

Assets		% Complete	% Change from Prior Month
Cash		60%	up 40%
Accounts receivable		10%	up 10%
Other receivable		100%	up 5%
Prepaid insurance		100%	
Prepaid other		100%	
Inventory		100%	
Property, plant & equipment		100%	
Construction in process		100%	
Goodwill - pharmacy		100%	
PERS deferred outflow		0%	auditors will adjust
Liabilities			
Accounts payable		100%	up 100%
Payroll and related		50%	up 50%
Third party settlement		0%	auditors will adjust
Interest & other payables		50%	up 50%
Short-term debt - City		100%	up 25%
Other current liabilities		100%	
Net pension liability		0%	auditors will adjust
Pension deferred inflow		0%	auditors will adjust

Components of a successful revenue cycle system

		Perform %	
1	Functioning computer system (financial portion)		
	System reports all charges	80%	no change
	Resolution of numerous issues - working with Evident (On-site assistance scheduled)	50%	no change
2	Staff understands how to use system		
	Unit clerk training on patient registration	85%	up 5%
	Patient registration functioning	85%	up 5%
	Everyone who touches system	75%	up 5%
3	Processes in place that affect revenue cycle		
	Provider enrollment with insurance companies ("Symplr" will assist)	75%	up 10%
	Processes between BH, Medical Records, Business office (Business office manager started - Mariesa)	65%	up 10%
	Quality oversight (continuous process improvement) (new Process Improvement Committee) (Holly to be a process checkpoint for processed claims)	60%	up 20%
	Chart review for quality and to catch all charges (Kelly/Vivian-supplies, pharmacy, procedures) (Holly-overall review)	65%	up 15%
4	Effective billing and collection function		
	AVEC (outsourced billing company) performance (new communication methods started)	70%	down 10%
	TriZetto billing clearing house performance (New contract signed with TruBridge)	50%	down 10%
5	Effective collections on old receivables	35%	up 5%
	(1,875 accounts for \$768,000)		
	(3 alternatives being reviewed)		

Cordova Community Medical Center Statistics

March, 2019

31 Jan 28 Feb 31 Mar 31 Apr 30 May 31 Jun 30 Jul 31 Aug 31 Sep 30 Oct 31 Nov 30 Dec 31

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Cumulative Total	Monthly Average
Hosp Acute+SWB Avg. Census														
FY 2019	3.5	1.6	1.2										6.2	2.1
FY 2018	6.4	4.4	4.6	2.8	1.1	1.8	2.1	1.5	2.1	2.0	2.3	2.6	33.6	2.8
FY 2017	3.1	3.8	4.5	4.5	4.5	3.1	5.3	4.4	4.5	5.6	5.6	5.8	54.6	4.6
Acute Admits														
FY 2019	6	0	2										8	2.7
FY 2018	12	4	5	4	1	4	5	3	2	0	4	3	47	3.9
FY 2017	9	7	7	5	4	1	10	6	6	8	2	4	69	5.8
Acute Patient Days														
FY 2019	33	0	6										39	13.0
FY 2018	32	8	18	9	2	10	16	6	5	0	8	11	125	10.4
FY 2017	34	23	29	17	10	2	27	13	16	18	6	10	205	17.1
SWB Admits														
FY 2019	2	2	0										4	1.3
FY 2018	2	1	0	0	0	3	1	1	1	0	0	1	10	0.8
FY 2017	5	3	2	1	2	0	1	0	0	3	1	1	19	1.6
SWB Patient Days														
FY 2019	75	44	31										150	50
FY 2018	166	116	124	75	31	43	50	41	57	62	60	70	895	75
FY 2017	64	84	109	111	111	90	114	124	120	157	163	171	1,418	118
CCMC LTC Admits														
FY 2019	2	1	1										4	1.3
FY 2018	2	0	0	2	0	0	1	0	0	0	0	1	6	0.5
FY 2017	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
CCMC LTD Resident Days														
FY 2019	299	278	308										885	295
FY 2018	303	278	310	295	310	286	309	310	300	310	300	304	3,615	301
FY 2017	310	280	310	300	310	300	310	310	300	310	300	310	3,650	304
CCMC LTC Avg. Census														
FY 2019	9.6	9.9	9.9										29.5	9.8
FY 2018	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	120.0	10.0
FY 2017	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	120.0	10.0
ER Visits														
FY 2019	31	41	47										119	40
FY 2018	46	43	60	46	54	57	78	54	52	33	38	30	591	49
FY 2017	49	35	47	49	53	55	75	68	53	43	42	35	604	50

Cordova Community Medical Center Statistics

March, 2019

31 Jan 28 Feb 31 Mar 30 Apr 31 May 30 Jun 30 Jul 31 Aug 31 Sep 30 Oct 31 Nov 30 Dec 31

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Cumulative Monthly
Outpatient Registrations w/ER													
FY 2019	144	168	170										482
FY 2018	162	158	213	301	235	176	204	198	152	159	147	128	2,233
FY 2017	120	111	138	293	136	146	177	168	145	106	110	94	1,744
PT Procedures													
FY 2019	443	386	438										1,267
FY 2018	370	221	184	215	295	281	271	408	334	400	424	333	3,736
FY 2017	416	322	497	399	327	296	343	136	206	373	270	178	3,763
Lab Tests													
FY 2019	330	356	198										884
FY 2018	352	290	339	208	269	244	358	269	215	236	285	267	3,332
FY 2017	298	322	284	304	318	283	435	410	337	280	278	305	3,854
X-Ray Procedures													
FY 2019	44	52	83										179
FY 2018	67	36	58	29	50	59	71	63	39	53	30	30	585
FY 2017	47	43	37	29	42	63	72	57	43	34	41	33	541
CT Procedures													
FY 2019	13	12	13										38
FY 2018	14	7	16	7	7	14	18	21	9	8	0	0	121
FY 2017	7	7	13	14	12	14	22	15	12	9	8	5	138
CCMC Clinic Visits													
FY 2019	162	161	144										467
FY 2018	206	183	203	176	219	190	170	236	241	270	201	152	2,447
FY 2017	212	175	197	188	248	239	217	284	356	283	199	177	2,775
Behavioral Hlth Visits													
FY 2019	62	98	69										229
FY 2018	111	98	127	114	112	99	126	111	35	84	95	64	1,176
FY 2017	70	98	71	90	88	100	85	109	72	85	84	97	1,049
Retail Pharmacy Scripts													
FY 2019	1,047	956	1,198										3,201
FY 2018	864	752	969	1,002	1,072	1,020	1,093	1,047	869	1,150	984	1,048	11,870
FY 2017													989



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Date: April 25th 2019
To: CCMC Authority Board of Directors
From: Director of Long Term Care, Kadee Goss RN
RE: Nursing Report

- We still have 10 residents in our Long Term Care Unit
- We have new CMS regulation that will be taking effect in November 2019, so we have been planning and preparing. We participated in a webinar this month and learned a lot about safety and security for our residents.
- The Directors of Nursing for CAH and LTC, along with our Admission and Discharge Coordinator have been participating in a case management study to effectively and efficiently manage care plans and communication among staff.

To: CCMC Authority Board of Directors
From: Kelly Kedzierski, RN
RE: April 2019 Nursing Update

- Staffing:
 - Nursing staffing continues to be adequate. We have brought on a few new nurses who all seem to be doing great and fitting in well with in the CCMC team.
- Census:
 - LTC census is 10. Currently, we have 1 swing bed occupied.
 - Acute/ED/OBS- we have had an increase in patients in these areas to match the increase in Cordova population this time of year.
- The ongoing challenges:
 - Surveys-Continue with the current plans and prepare for the CAH survey in the near future.

Training-

- POD- (Point Of distribution) took place on April 12. Which was an excellent emergency management learning experience for all involved.
- On April 18th we will be doing training with Nursing staff and the local EMS.
- CCMC has been having all nursing staff, registration and ancillary staff continue education and training in the Evident EHR.

Kelly Kedzierski, RN

CAH-DON

To: CCMC Authority Board of Directors
From: Kelly Kedzierski, RN
RE: April 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 February 26th, 2019 where we discussed:

- Evident plans to come here to do more hands on training for the employees of CCMC.
- CCMC participated in Alaska Shield 2019 doing table top exercises discussing what we would do in each event as it took place. We also added incidents to Knowledge Center as part of the exercise. Once we received the exercise news that there was pneumonic plague confirmed for *exercise purposes only* NOT A TRUE EVENT. CCMC requested to set up a Point of Dispensing at Mt. Eccles. The actual POD took place on April 12, 2019 in the gym of Mt Eccles. It went great. I was very pleased with all of the participation from CCMC/EMS/Ilanka/Public Health Nurses and our amazing community members. Thank you to all who participated.
- Kelly and Kadee will be attending Quality Learning Collaborative, Patient Safety Committee and CNO meetings April 17, 18, and 19th. All have been sponsored and funded by ASHNHA.
- Our next Quality meeting will be held on April 24th, 2019.

To: CCMC Authority Board of Directors
From: Kelly Kedzierski, RN
RE: April 2019 Infection Control

Infection Control

- The last meeting was held on March 20, 2019. Our next meeting will be on June 5th 2019.
At our last meeting we discussed the many improvements that are taking place at CCMC which include the Environment of care rounds with a focus on infection prevention, the cleaning that the staff from environmental services, dietary, and facilities/maintenance all have greatly contributed to.
- We also discussed the our preparedness for the Influenza outbreak and the staff involvement in keeping CCMC residents, visitors and staff aware of what steps to take to prevent illness as well as what steps to take in the event of having flu like symptoms.
- CCMC participated in Alaska Shield 2019 doing table top exercises discussing what we would do in each event. CCMC planned and lead the Point of distribution exercise to get our staff and the community prepared in the event of an infectious outbreak. The POD exercise went great.

Fun Facts:

For my fun facts each month I generally write about infectious diseases and outbreaks. This month I would like to discuss heart disease. Unfortunately unlike many infectious diseases heart disease doesn't just go away with a prescription of antibiotics.

Some Risk Factors for heart disease:

- High Blood Pressure
- High Cholesterol
- Diabetes
- Obesity
- Smoking

The National Heart Attack Alert Program notes these major signs of a heart attack:

Symptoms of a Heart Attack.

- Chest pain or discomfort. Most heart attacks involve discomfort in the center or left side of the chest that lasts for more than a few minutes, or that goes away and comes back. The discomfort can feel like uncomfortable pressure, squeezing, fullness, or pain.
- Discomfort in other areas of the upper body. Can include pain or discomfort in one or both arms, the back, neck, jaw, or stomach.
- Shortness of breath. Often comes along with chest discomfort. But it also can occur before chest discomfort.
- Other symptoms. May include breaking out in a cold sweat, nausea, or light-headedness.

If you think that you or someone you know is having a heart attack, you should call 911 immediately.

KNOW THE FACTS ABOUT

Heart Disease



What is heart disease?

Heart disease is the leading cause of death in the United States. More than 600,000 Americans die of heart disease each year. That's one in every four deaths in this country.¹

The term “heart disease” refers to several types of heart conditions. The most common type is coronary artery disease, which can cause heart attack. Other kinds of heart disease may involve the valves in the heart, or the heart may not pump well and cause heart failure. Some people are born with heart disease.

Are you at risk?

Anyone, including children, can develop heart disease. It occurs when a substance called plaque builds up in your arteries. When this happens, your arteries can narrow over time, reducing blood flow to the heart.

Smoking, eating an unhealthy diet, and not getting enough exercise all increase your risk for having heart disease.

Having high cholesterol, high blood pressure, or diabetes also can increase your risk for heart disease. Ask your doctor about preventing or treating these medical conditions.

What are the signs and symptoms?

The symptoms vary depending on the type of heart disease. For many people, chest discomfort or a heart attack is the first sign.

Someone having a heart attack may experience several symptoms, including:

- Chest pain or discomfort that doesn't go away after a few minutes.
- Pain or discomfort in the jaw, neck, or back.
- Weakness, light-headedness, nausea (feeling sick to your stomach), or a cold sweat.
- Pain or discomfort in the arms or shoulder.
- Shortness of breath.

If you think that you or someone you know is having a heart attack, call 9-1-1 immediately.



¹ CDC: Deaths: Final Data for 2009. www.cdc.gov/nchs/data/nvsr/nvsr60/nvsr60_03.pdf

KNOW THE FACTS ABOUT

Heart Disease

How is heart disease diagnosed?

Your doctor can perform several tests to diagnose heart disease, including chest X-rays, coronary angiograms, electrocardiograms (ECG or EKG), and exercise stress tests. Ask your doctor about what tests may be right for you.

Can it be prevented?

You can take several steps to reduce your risk for heart disease:

- Don't smoke. CDC's Office on Smoking and Health Web site has information on quitting smoking.

<http://www.cdc.gov/tobacco>

- Maintain a healthy weight. CDC's Healthy Weight Web site includes information and tools to help you lose weight.

<http://www.cdc.gov/healthyweight/index.html>

- Eat a healthy diet. Tips on reducing saturated fat in your diet are available on the Web site for CDC's Division for Nutrition, Physical Activity, and Obesity.

<http://www.cdc.gov/nutrition/everyone/basics/fat/saturatedfat.html>

- Exercise regularly. Visit CDC's Physical Activity Web site for more information on being active.

<http://www.cdc.gov/physicalactivity/index.html>

- Prevent or treat your other health conditions, especially high blood pressure, high cholesterol, and diabetes.

How is it treated?

If you have heart disease, lifestyle changes, like those just listed, can help lower your risk for complications. Your doctor also may prescribe medication to treat the disease. Talk with your doctor about the best ways to reduce your heart disease risk.

For More Information:

Learn more at the following Web sites.

- Centers for Disease Control and Prevention's Division for Heart Disease and Stroke Prevention:

<http://www.cdc.gov/dhdsdp/index.htm>

- Centers for Disease Control and Prevention's National Center on Birth Defects & Developmental Disabilities:

<http://www.cdc.gov/ncbddd/birthdefects/default.htm>

- American Heart Association:

<http://www.americanheart.org>

- National Heart, Lung, and Blood Institute:

<http://www.nhlbi.nih.gov>



Medical Director Report to the CCMC Authority Board of Director's

Quarter 1 2019

This quarter we continued to work to grow our services at CCMC. We are excited to welcome Laura Henneker to the Medical Staff. This brings the core medical staff to 2 physicians and 1 nurse practitioner. I believe this is the most lean our medical staff can be to provide the 24/7 services that we provide. CCMC has a physician immediately available to come into the hospital to treat emergency cases 24 hours a day 7 days a week. Physicians provide this 24 hour care in addition to treating all hospitalized patients, the long term care and provide outpatient clinic care.

Wound care services: Laura Henneker has an extensive wound care back ground and will help provide wound care services in the acute hospital rehabilitation and long term care setting as well as clinic. We are excited to have her expertise available in Cordova.

ER throughput: Our community continues to benefit from having rapid access to emergency services. Our door to physician evaluation is 8 minutes on average. This is significantly lower than national averages which range from 24 to 50 minutes over the last few years. Our emergency room length of stay time's average less than 90 minutes compared to the 2012-2016 national average of 304 minutes. It is difficult to directly compare these numbers to national averages, as there are certainly the times when a patient needs to be transferred to a higher level trauma center and weather prohibits medivac flights we may be working to stabilize a patient for long periods. Also, our small community benefits from the low volume of our facility which allows our time to treatment to be very rapid.

Hospital Based Care - We continue to provide excellent inpatient and rehabilitation care for our community. With our hospital size we are able to provide individualized care while meeting national quality care standards. Having worked as a hospitalist in numerous larger facilities throughout the country, I am continually impressed with the nursing staff and level of care we are able to provide in such a remote location.

Training: We continue to keep our staff filled with trauma trained nurses. We work with the community to keep emergency response readiness and ready to provide care to the community as emergencies arise. Our quarterly EMS/hospital training seems to be well received from all participants and is helping to maintain the skills and readiness for Cordova emergencies.

Please let me know if you have any questions

Hannah Sanders, MD



Memorandum

To: CCMC Authority Board of Directors

From: Scot Mitchell, FACHE, CCMC CEO

Subject: Delineation of Privileges for Dr. Frances Aledo

Date: 4/16/2019

Suggested Motion: “I move that the CCMC Authority Board of Directors approve the Medical Staff privileges for Frances Aledo, MD as requested.”



Memorandum

To: CCMC Authority Board of Directors
From: Scot Mitchell, FACHE, CCMC CEO
Subject: Approval of CEO Search Firm
Date: 4/17/2019

Suggested Motion: “I move that the CCMC Authority Board of Directors approve the Medical Staff privileges for Laura Hennecker, FNP as requested.”



Memorandum

To: CCMC Authority Board of Directors
From: Scot Mitchell, FACHE, CCMC CEO
Subject: CEO Recruitment Firm
Date: 4/17/2019

Suggested Motion: "I move that the CCMC Authority Board of Directors select _____ to assist CCMC in filling the permanent CEO position."



Memorandum

To: CCMC Authority Board of Directors
From: Scot Mitchell, FACHE, CCMC CEO
Subject: Appointment of CEO Search Committee
Date: 4/17/2019

Suggested Motion: “I move that the CCMC Authority Board of Directors appoint the following people to serve on the CEO Search Committee.”



Memorandum

To: CCMC Authority Board of Directors

From: Scot Mitchell, FACHE, CCMC CEO

Subject: Approval of Community Health Needs Assessment Project

Date: 4/17/2019

Suggested Motion: “I move that the CCMC Authority Board of Directors approve the selection of the National Rural Health Resource Center to conduct the 2019 Community Health Needs Assessment Project.”

Cordova Community Medical Center
Contract Review and Approval Form

Description of contract:
Performing Community Health Needs Assessment to include: develop, distribute, tabulate and summarize two-page CHNA survey; conduct telephone key informant interviews; facilitate the translation of the survey findings into an actionable work plan via on-site session with CCMC and community members.

Vendor Name: National Rural Resource Center
Vendor Contact person: Shannon Jorgenson
Vendor Address: 525 S. Lake Avenue, Suite 320 Duluth, MN 55802
Vendor Phone: 218-727-9390
Vendor Email: sjorgenson@ruralcenter.org
Vendor Website: www.ruralcenter.org

Effective Dates: Start: 04/01/2019 End: 10/31/2019
Fee Based: Volume/Contingency based:
Annual Cost to CCMC: \$ 10,100.00 Cumulative Cost to CCMC: \$ 14,000.00
Was this contract included in approved budget? Yes No
Termination options: N/A
Evergreen Clause: Yes No
CCMC Authority Board approval needed? No Yes, approval date: 04/25/2019
Review by Legal Counsel: Yes No
Date of OIG LEIE verification: 4/17/19
Date of Completion of ADM 301a Form: _____

Options to this contract:
CCMC is required to perform a CHNA in 2019, so the only option is to select a different vendor to help perform the CHNA.

Form completed by: Scot Mitchell Date: 04/17/2019

Certifications

Topic	Certification	Initials or N/A
Understanding of Parties	<ul style="list-style-type: none"> • I have read the contract and all attachments. • All documents incorporated by reference are attached. • All terms and conditions agreed to by CCMC are included, and no unacceptable term or condition is included. 	SM
Performance	<ul style="list-style-type: none"> • CCMC can perform all of its duties under the contract. • No conflict exists between this contract and other known CCMC obligations. 	SM
Completeness	<ul style="list-style-type: none"> • CCMC is the contracting party. • Beginning and end dates are included. • Payments and payment schedule are specific. 	SM
Conflicts of Interest	<ul style="list-style-type: none"> • Other party is not, and for the previous twelve months has not been, an employee of CCMC. • Other party is not, and for the previous twelve months has not been, a Board member of CCMC. • Other party is not, and for the previous twelve months has not been, an immediate family member (as defined in 42 CFR 1001.1001(a)(2)) of a CCMC employee or Board member. • Other party is not, and for the previous twelve months has not been, a member of the household of a CCMC employee or Board member. 	SM
Office of Inspector General's List of Excluded Individuals/Entities	<ul style="list-style-type: none"> • Other party is not an individual, or a managing employee of an entity that has been excluded from participation in Medicare, Medicaid or any Federal health care programs as listed on the United States Department of Health and Human Services, Office of Inspector General's List of Excluded Individuals/Entities. 	SM
Independent Contractor	<ul style="list-style-type: none"> • If CCMC is procuring personal services, the contractor is an independent contract, not an employee. 	SM
Limitation of Liability	<ul style="list-style-type: none"> • If the contract includes a limitation of the other party's liability (other party will not be responsible for indirect, consequential, or punitive damages; limitations of warranties; or limitation of liability to a set amount or repair or replacement); risk of liability and loss to CCMC have been considered and found acceptable. 	N/A
Access to books and records	<ul style="list-style-type: none"> • Contract contains language pursuant to Section 952 of the Omnibus Reconciliation Act of 1980, Public Law 96-499, as contained in Section 1861(v)(1) of the Social Security Act, and implementing regulations at 42 C.F.R. Part 420, upon written request any time within four (4) years after the rendering of services under this Agreement, the other party agrees to make available to the Secretary of Health and Human Services or to the Comptroller General, or to any of their duly authorized representatives, access to the Contract and to the books and records (including all writings, transcripts and tapes in any form) of the other party as may be necessary to verify the nature and extent of the services furnished pursuant to this Agreement and the costs of such services, in the event it carries out any of its duties under the contract, or through a subcontractor, with a value or cost of \$10,000 or more over a twelve month period. 	N/A



Memorandum

To: CCMC Authority Board of Directors
From: Scot Mitchell, FACHE, CCMC CEO
Subject: Election of Officers
Date: 4/17/2019

Suggested Motion: "I nominate the following board members to serve as Officers on the Board."

_____ as Chairperson
_____ as Vice-Chairperson
_____ as Secretary/Treasurer