



AGENDA
CCMC AUTHORITY BOARD OF DIRECTORS
CCMC CONFERENCE ROOM
September 26th 2019 at 6:00PM
REGULAR MEETING

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

Board of Directors

Greg Meyer exp. 3/22
Kristin Carpenter exp. 3/20
Linnea Ronnegard exp. 3/21
Gary Graham exp. 3/21
Chris Bolin exp. 3/20

CCMC CEO

Randall Draney

OPENING: Call to Order

Roll Call – Greg Meyer, Linnea Ronnegard, Kristin Carpenter, Gary Graham and Chris Bolin. 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).

D. BOARD DEVELOPMENT

1. Business Office Update

E. APPROVAL OF MINUTES

F. REPORTS OF OFFICER and ADVISORS

1. Board Chair Report
2. CEO & CFO Reports Pgs 1-3
3. Ancillary Services Report Pg 4
4. LTC Nursing Report Pg 5
5. CAH Nursing Report Pg 6
6. Quality Improvement/Infection Control Report Pgs 7-8

G. CORRESPONDENCE

H. ACTION ITEMS

I. DISCUSSION ITEMS

1. Community Health Needs Assessment (CHNA)
2. ADM 802 Board Interactions with Hospital Staff Policy Pg 9
3. NVE Integration

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.

FINANCIAL REPORT TO THE BOARD
 September 26, 2019
 Randall Draney, CEO

Financial Statements

The financial statements for August will be e-mailed.

Accounting

Improving the bank reconciliation process is still ongoing. The withdrawal part of the reconciliation is working well but the deposits reconciliation still needs improvement. We are still putting processes in place to match books to bank on a daily basis.

Billing and Collections

Mariesa Woods, Business Office Manager, will give an "educational" report on the changes put in place. Mariesa and Holly recently attended a coding training class. The plan is to bring this function back in-house.

Status of Revenue Cycle Processes

Beginning with the October board meeting, Mariesa will be reporting on this area.

		Perform %	
1	Functioning computer system (financial portion)		
	System reports all charges	80%	no change
	Resolution of numerous issues - working with Evident	50%	no change
	Integration of lab with Quest/CPSI	30%	no change
2	Staff understands how to use system		
	Unit clerk training on patient registration	90%	down 5%
	Patient registration functioning	90%	down 5%
3	Processes in place that affect revenue cycle		
	Provider enrollment with insurance companies	70%	down 5%
	Processes between BH, Medical Records, Business office	95%	up 5%
	Quality oversight (continuous process improvement)	80%	no change
	Chart review for quality and to catch all charges	100%	no change
4	Effective billing and collection function		
	AVEC (outsourced billing company) being phased out	70%	no change
	TruBridge being implemented	85%	up 5%
5	Effective collections on old receivables		
	Collector has been hired	50%	up 10%

Cordova Community Medical Center Statistics

AUGUST, 2019

31 Jan 31 Feb 31 Mar 31 Apr 31 May 31 Jun 31 Jul 31 Aug 31 Sep 31 Oct 31 Nov 31 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	1.4	1.2	1.1	2.4	3.3					15.7	2.0
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	4	2	1	3	6					24	3.0
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	12	7	4	13	10					85	10.6
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	0	0	0	3	0					7	0.9
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	30	31	30	61	93					395	49
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	0	0	0	0	0					4	0.5
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	300	310	300	280	310					2,385	298
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	10.0	10.0	10.0	9.0	10.0					78.5	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	54	60	55	68	81					437	55
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

	31	28	31	30	31	30	31	30	31	30	31	30	31	30	31	Cumulative Monthly	
AUGUST, 2019																	
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec					
Outpatient Registrations w/ER																	
FY 2019	144	168	170	374	254	202	241	263								1,816	227.0
FY 2018	162	158	213	301	235	176	204	198	152	159	147	128				2,233	186
FY 2017	120	111	138	293	136	146	177	168	145	106	110	94				1,744	145
PT Procedures																	
FY 2019	443	386	438	440	381	358	305	352								3,103	388
FY 2018	370	221	184	215	295	281	271	408	334	400	424	333				3,736	311
FY 2017	416	322	497	399	327	296	343	136	206	373	270	178				3,763	314
Lab Tests																	
FY 2019	330	356	198	361	423	244	366	473								2,751	344
FY 2018	352	290	339	208	269	244	358	269	215	236	285	267				3,332	278
FY 2017	298	322	284	304	318	283	435	410	337	280	278	305				3,854	321
X-Ray Procedures																	
FY 2019	44	52	83	88	86	98	94	79								624	78
FY 2018	67	36	58	29	50	59	71	63	39	53	30	30				585	49
FY 2017	47	43	37	29	42	63	72	57	43	34	41	33				541	45
CT Procedures																	
FY 2019	13	12	13	15	26	11	24	35								149	19
FY 2018	14	7	16	7	7	14	18	21	9	8	0	0				121	10
FY 2017	7	7	13	14	12	14	22	15	12	9	8	5				138	12
CCMC Clinic Visits																	
FY 2019	162	161	144	178	250	205	247	252								1,599	200
FY 2018	206	183	203	176	219	190	170	236	241	270	201	152				2,447	204
FY 2017	212	175	197	188	248	239	217	284	356	283	199	177				2,775	231
Behavioral Hlth Visits																	
FY 2019	62	98	69	60	89	86	82	61								607	76
FY 2018	111	98	127	114	112	99	126	111	35	84	95	64				1,176	98
FY 2017	70	98	71	90	88	100	85	109	72	85	84	97				1,049	87
Retail Pharmacy Scripts																	
FY 2019	1,047	956	1,198	1,135	1,184	1,142	1,270	1,232								9,164	1,146
FY 2018	864	752	969	1,002	1,072	1,020	1,093	1,047	869	1,150	984	1,048				11,870	989

Clinic

The clinic is averaging about eleven patients a day these first few weeks of September, which is slightly higher than a year ago. With current staffing, that is a comfortable number to see each day. Why? On average, staff does two-three things for each patient on the day of service and an additional one-two things for each patient following up in the next several days. Those things include referrals, labs, radiology, prescriptions, well visit documentation, educational information, travel arrangements, records retrieval, etc. Additionally there is ongoing follow-up for preventative services and specialist patient plans. Add to the daily schedules phone calls for questions, refills, requests, etc. and it becomes clear how busy the clinic is daily.

Lab/Radiology/PT

The Alaska Imaging contract has been signed for radiology services. CCMC has hired a permanent, full-time radiology technician who is moving here from Haines. We hope to have his training and orientation completed by the spring and have him providing all CCMC radiology services. It has been over a year since we've had a permanent radiology technician and we are looking forward to returning to the stability that provides to the community.

Lab continues to be staffed by a dedicated traveling technician, Laura Paulik, and supported by Michelle Acoba, who is currently training as a nurse but worked in the lab for about nine months. They are keeping the lab working as smoothly as possible while the regular laboratory technician remains out on medical leave.

PT has ordered several new pieces of equipment which are enroute to Cordova. Both patients and therapist are excited for their arrival! A few smaller items such as plyometric jump boxes and suspension trainer are already here and in use. Angela continues to freshen up the PT space and work at providing her patients with a pleasant environment during their physical therapy appointments.



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Date: September 26th, 2019
To: CCMC Authority Board of Directors
From: Director of Long Term Care, Kadee Goss RN
RE: Nursing Report

- We are at 10 LTC patients.
- We are continuing to focus on safety for all residents.
- We added Safety Huddles every Monday through Friday. The nursing staff meets for a brief minute with activity director, and the restorative nurse to discuss any concerns or recent changes to care. We set a goal each month. Our goal starting September 12th was zero falls for 30 days.

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

- Staffing:
 - Nursing staffing continues to be adequate. We have 6 permanent nursing staff as we recently hired 2 new permanent nurses. We also have 3 traveler nurses. The two that were going to sign on decided to extend for now.
- Census:
 - LTC census is 10. Currently, we have 3 swing bed occupied.
- The ongoing challenges:

Training-

- There have been bi-weekly meetings with Registration/Unit Clerks to collaborate our efforts in improving registration processes.
- We hold monthly Nursing staff meetings. We address many different topics in these meetings with patient safety being the key focus.
- 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: September 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 August 20th, 2019 where we discussed:

- Activities ongoing:
 - Environmental services are actively and aggressively cleaning floors, walls door handles, and all high touch surface areas throughout the entire building.
 - Environment of care rounds are ongoing.
 - Maintenance has been creating work orders from the Environment of care rounds and are current and up to date with completing all work orders.
 - Dietary department has been working on new menu and a faster more efficient food and supply ordering process.
 - Nursing daily chart audits have been successful in viewing proper charges and documentation.

- Our next Quality meeting will be held on October 1st, 2019.

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

Infection Control

- The last meeting was held on June 5th, 2019. Our next meeting will be on October 1st 2019.
- CCMC continues to work hard toward infection prevention with ongoing hand hygiene, standard precautions, and a great team of employees in each and every department working toward the common goal of optimal health and safety of our community.

Fun Facts: According to the CDC

When should I get vaccinated?

You should get a flu vaccine before flu begins spreading in your community. It takes about two weeks after vaccination for antibodies that protect against flu to develop in the body, so make plans to get vaccinated early in fall, before flu season begins. CDC recommends that people get a flu vaccine by the end of October. Getting vaccinated later, however, can still be beneficial and vaccination should continue to be offered throughout flu season, even into January or later.

Children who need two doses of vaccine to be protected should start the vaccination process sooner, because the two doses must be given at least four weeks apart.

Can I get a flu vaccine if I am allergic to eggs?

The recommendations for people with egg allergies are the same as last season.

- People who have experienced only hives after exposure to egg can get any licensed flu vaccine that is otherwise appropriate for their age and health.
- People who have symptoms other than hives after exposure to eggs, such as angioedema, respiratory distress, lightheadedness, or recurrent emesis; or who have needed epinephrine or another emergency medical intervention, can also get any licensed flu vaccine that is otherwise appropriate for their age and health, but the vaccine should be given in a medical setting and be supervised by a health care provider who is able to recognize and manage severe allergic conditions. (Settings include hospitals, clinics, health departments, and physician offices). People with egg allergies no longer have to wait 30 minutes after receiving their vaccine.

**Cordova Community Medical Center
Policy**

SUBJECT: Board Interactions with Hospital Staff

ADM 802

DEPARTMENT: Administration

New

Date:

Original Approval Date: October 13, 2016

Revised

3/27/2017

Approved by: Scot Mitchell, CEO

Page 1 of 2

Policy:

It shall be the responsibility of each member of the Cordova Community Medical Center Board of Directors to only meet with individual employees or staff members of the Cordova Community Medical Center with the presence of the Chief Executive Officer or a person designated by the Chief Executive Officer. It shall also be the responsibility of employees of the Cordova Community Medical Center to insure that when meeting with a member of the board that the Chief Executive Officer or his designee is present. Failure to include the Chief Executive Officer when meeting with a board member may result in disciplinary action up to dismissal from employment.

1. Exceptions to this policy are as follows;
 - a. Board member meeting with the Chief Financial Officer or their designee for the purpose of signing checks.
 - b. Board member meeting with the Executive Assistant for the purpose of planning and/or preparing for a board meeting or official board business.
 - c. Board member being admitted to the Cordova Community Medical Center for medical purposes where the interaction with medical staff is necessary for proper medical care.
 - d. Group social gatherings where Cordova Community Medical Center management and operations are not discussed.
2. In cases where a Cordova Community Medical Center employee suspects that the Chief Executive Officer is complicit in embezzlement or other wrong doing, the employee shall take those concerns to the City Manager.

Reference:

Cross – Reference:

Attachment:

QMC Approval Date:

HSB Approval Date: 10/13/2016

Review History:

03/27/2017 Minor Revisions

10/13/2016 Original Policy Approval