



**HOSPITAL SERVICES BOARD AGENDA
JANUARY 25th, 2024 REGULAR MEETING
12:00PM QUARTERLY IN-PERSON**

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

Board

Kelsey Hayden	exp. 3/26
Liz Senear	exp. 3/24
Ann Linville	exp. 3/25
Chris Iannazzone	exp. 3/26
Diane Ujioka	exp. 3/24

CEO

Hannah Sanders, M.D.

OPENING: Call to Order

Roll Call - Kelsey Hayden, Liz Senear, Chris Iannazzone, and Ann Linville.
Establishment of a Quorum

**A. COMMUNICATIONS BY AND PETITIONS FROM VISITORS
(Speaker must give name and agenda item)**

1. Audience Comments
2. Guest Speaker

B. BOARD DEVELOPMENT

1. Important Legislative Issues for the 2024 Session Pgs 1-2

C. CONFLICT OF INTEREST

D. APPROVAL OF AGENDA

E. APPROVAL OF MINUTES

1. December 19, 2023 Special Board Meeting #1 Minutes Pg 3
2. December 19, 2023 Special Board Meeting #2 Minutes Pgs 4-6

F. REPORTS OF OFFICERS OR ADVISORS

1. Board Chair Report
2. CEO Report Pgs 7-9
3. Director of Finance Report Pgs 10-12
4. Medical Director Quarterly Report Pg 13
5. Ancillary Services Quarterly Report Pg 14
6. Quality Quarterly Report Pg 15
7. Nursing Department Quarterly Report
8. Sound Alternatives Quarterly Report

G. DISCUSSION ITEMS

H. ACTION ITEMS

1. Amendment to the CCMC Leadership and Staff Compensation Philosophy Pg 16

I. 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 authority of the Board and are appropriate for discussion in an open session.

J. BOARD MEMBERS COMMENTS

K. EXECUTIVE SESSION

1. Cost of Living Adjustment (COLA), a subject the immediate knowledge of which would clearly have an adverse effect upon the finances of the entity.

L. ADJOURNMENT

This Hospital Services Board meeting will be In-Person, in the CCMC Conference Room

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.

2024 ISSUE BRIEF

Nurse Licensure Compact (NLC)

Aligning with the Rest of the Country: Best Practices for Licensing Nurses

The Nurse Licensure Compact (NLC) is one tool we can use now to help recruit nurses and get them to work faster. This reciprocity has been in use for over 20 years and makes it possible for qualified nurses to practice across state lines with a single license in 41 states and jurisdictions in the U.S. The NLC increases access to care while maintaining public protection at the state level - it does not lower standards or remove local control over practice.

- ✓ Get nurses to work faster
- ✓ Aid recruitment and retention
- ✓ Support Alaska military families

1 in 5 nonresident healthcare workers stay in Alaska.



In 2021, 1 in 5 workers from Outside became residents - nearly double the statewide average.

Alaska Nurses Support the NLC

The Alaska Board of Nursing and the National Council of State Boards of Nursing conducted a survey of all nurses actively licensed in Alaska (November 2023). Results show Alaska nurses are **STRONGLY** in favor of Alaska joining the nurse licensure compact - many respondents believe their work would be made easier and more effective through the implementation of the NLC.

- 4,593 nurses responded to the survey
- **92% of the respondents support Alaska joining the NLC**
- 85% of the respondents who identified as a union member support Alaska joining the NLC

Some argue that establishing license reciprocity with 41 other states and jurisdictions will lead to an exodus of Alaska nurses. This is false. 64% of the nurses who responded to the survey already hold an active nursing license in both Alaska and another state.

A Coalition of Support

Over 75 Alaska organizations - local governments, universities and colleges, and a broad coalition of healthcare businesses and organizations - support joining the NLC.

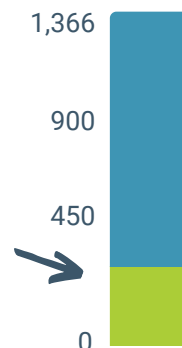
Our Workforce Problems Are Not Going Away

The combination of growth and turnover creates a need for about 8,000 new healthcare workers in Alaska each year, including nearly 1,400 registered nurses.

And it's predicted to get worse. By 2030, Alaska will have the highest nurse vacancies in the U.S. with over 5,000 openings and a 22% shortfall.

We can't meet the demand with "Alaska grown" nurses alone.

In 2022, Alaska produced just 324 statewide nursing graduates - less than a quarter of the 1,366 nurses needed to fill roles.



2024 ISSUE BRIEF

Healthcare Workforce

Alaska faces a debilitating healthcare workforce shortage

The Alaska Hospital & Healthcare Association (AHHA) commissioned Juneau-based Rain Coast Data to conduct a healthcare workforce statistical analysis which was published in December 2023. Key study findings are below.

Download the full report at alaskahha.org.

Alaska's Top Industry

Healthcare is a leading economic sector in Alaska, paying out over \$3 billion in direct wages in 2022 - more than any other sector.

- Healthcare was responsible for 13% of all workforce earnings, outpacing military and natural resource sectors.
- Healthcare employs 11% of Alaska's entire workforce with nearly 43,000 healthcare jobs in 2022.
- When including the multiplier effect, the total impact of Alaska's healthcare sector was 75,400 jobs across the state's economy with a total income impact of \$4.75 billion in 2022.

#1

**Economic
sector in
Alaska:
43,000 jobs
\$3 billion wages**

Healthcare Worker Shortage

There are too few Alaska healthcare workers to fill current service demands and vacancies are increasing. Alaska is projected to have the most significant shortages of any state moving forward.

- In 2022, Alaska training programs graduated fewer than 900 healthcare workers, including 324 registered nurses, a fraction of what is needed.
- While travel nurses can be used to meet short-term staffing needs, it comes at a higher cost. Travel nurses earned an estimated 57% more on average than non-traveling RNs in Alaska.
- A survey of Alaska hospitals shows that nurse openings at our facilities have ballooned to 21% and, on average, it takes 118 days to fill a position.

21%

**Vacancy rate for
nurses in
Alaska's hospitals**

Thousands of New Workers Needed Annually

Workforce growth projections show the healthcare sector is expected to add 4,500 new jobs over the next 10 years, more jobs than any other sector in the state. Additionally, turnover means that replacement workers are continually needed.

- Approximately 8,000 new healthcare workers must be hired across Alaska every year to keep up with service needs.
- This includes a need for nearly 1,400 new registered nurses each year in Alaska.

8K

**New healthcare
workers needed
annually**

AHHA's Workforce Strategy



Pipeline: Forge strong partnerships between the healthcare industry, schools, and students (K-12+) to recruit, train, and graduate healthcare professionals to build a sustainable workforce pipeline in Alaska.



Pathways: Develop healthcare career pathways and professional development opportunities to provide training and advance skills that will improve patient care and employee retention.



Protection: Develop and implement practices that support wellness, increase resiliency, and address burnout, violence, and other treats to retention. Remove barriers that overburden the industry and workers.

Minutes
CCMC Authority – Board of Directors
In-Person Meeting
December 19, 2023 at 11:55am
Special Meeting

CALL TO ORDER AND ROLL CALL –

Kelsey Hayden called the Board Meeting to order at 12:00pm.

Board members present: **Kelsey Hayden, Liz Senear, Ann Linville, and Chris Iannazzone.**

Linnea Ronnegard was absent

Quorum was established. 4 members present.

CCMC staff present: Dr. Hannah Sanders, CEO; Tamara Russin, Director of Ancillary Services; Alexis Allen, CAH Director of Nursing; Denna Stavig, Director of Finance; Noelle Camarena, Director of Operations; Barb Jewell, Director of Community Services, and Faith Wheeler-Jeppson.

A. COMMUNICATIONS BY AND PETITIONS FROM VISITORS

1. Audience Comments ~ None

2. Guest Speaker ~ None

B. BOARD DEVELOPMENT ~ None

C. CONFLICT OF INTEREST ~ None

D. APPROVAL OF AGENDA

M/Senear S/Linville "I move to approve the Agenda."

Senear- yea, Linville – yea, Hayden – yea, and Iannazzone - yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.

E. APPROVAL OF MINUTES ~ None

F. REPORTS OF OFFICERS and ADVISORS ~ None

G. DISCUSSION ITEMS ~ None

H. ACTION ITEMS

1. Addition of Diane Ujioka proposed member of the Hospital Services Board

M/Senear S/Linville "I move that that Hospital Services Board appoint Diane Ujioka to fill the vacant seat on the board until the next election is finalized in March 2024".

Senear- yea, Hayden – yea, Iannazzone – yea, and Linville – yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.

I. AUDIENCE PARTICIPATION ~ None

J. BOARD MEMBERS COMMENTS ~ None

K. EXECUTIVE SESSION ~ None

L. ADJOURNMENT

M/Iannazzone S/Linville "I move to adjourn"

Kelsey Hayden declared the meeting adjourned at 12:10pm.

Minutes
CCMC Authority – Board of Directors
In-Person Meeting
December 19, 2023 at 12:00pm
Special Meeting

CALL TO ORDER AND ROLL CALL –

Kelsey Hayden called the Board Meeting to order at 12:11pm.

Board members present: **Kelsey Hayden, Liz Senear, Ann Linville, and Chris Iannazzone.**

Linnea Ronnegard was absent

Quorum was established. 4 members present.

CCMC staff present: Dr. Hannah Sanders, CEO; Tamara Russin, Director of Ancillary Services; Alexis Allen, CAH Director of Nursing; LTC Director of Nursing (in training), Olivia Moreno; Denna Stavig, Director of Finance; Noelle Camarena, Director of Operations; Barb Jewell, Director of Community Services, and Faith Wheeler-Jeppson.

A. COMMUNICATIONS BY AND PETITIONS FROM VISITORS

- 1. Audience Comments** ~ None
- 2. Guest Speaker** ~ None

B. BOARD DEVELOPMENT ~ None

C. CONFLICT OF INTEREST ~ None

D. APPROVAL OF AGENDA

M/Senear S/Linville "I move to approve the Agenda."

Iannazzone – yea, Senear- yea, Linville – yea, and Hayden – yea,
4 yeas, 0 nay, 0 absent; Motion passed 4-0.

E. APPROVAL OF MINUTES

1. October 26, 2023 Regular Meeting minutes
2. November 27, 2023 Special Meeting minutes

M/Senear S/Linville "I move to approve the minutes from October 26th and November 27th, 2023 as presented."

Hayden – yea, Senear- yea, Iannazzone - yea, and Linville – yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.

F. REPORTS OF OFFICERS and ADVISORS

1. Board Chair Report ~ Kelsey welcomed Diane Ujioka to the Board and stated that she is very excited about the CT Project.
2. CEO Report ~ Dr. Sanders reported that this week we just had our LTC Recertification survey and Licensing survey. The surveyors left on Friday, overall, over the last three~~4~~

years we've done well with only a very small number of findings. There was nothing significant from this survey that they brought to our attention prior to their departure. We anticipate that there will be a small number of findings, we we'll get that report in a couple of weeks. The end of the year is approaching. 2023 is our rebasing year, for Long Term Care. This handout has been previous provided to the Board, it was done in 2015, I read through it last night and it had not been significantly updated so I think it would be worth while if you get a chance to look at it.

3. CFO Report ~ Denna reported that she does not have the Financials at this time due to the early date of the meeting, as she has been working on year end and the budget. And I will speak to the budget when we get to that part.

G. DISCUSSION ITEMS ~ None

H. ACTION ITEMS

1. Approval of the 2023 DZA Audit Engagement letter

M/Linville S/Iannazzone "I move that that Hospital Services Board authorizes Hannah Sanders, CEO to enter into an agreement with Dingus, Zarecor, & Associates, PLLC for the purpose of conducting the 2023 Financial Audit".

Hayden – yea, Iannazzone – yea, Senear- yea, and Linville – yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.

2. Delineation of Privileges for Murray Buttner, MD

M/Linville S/Iannazzone "I move that that Hospital Services Board approves the Delineation of Privileges for Murray Butner, MD, as presented".

Linville – yea, Iannazzone – yea, Senear- yea, and Hayden – yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.

3. Delineation of Privileges for Mary Horner, MD

M/Linville S/Senear "I move that that Hospital Services Board approves the Delineation of Privileges for Murray Butner, MD, as presented".

Linville – yea, Iannazzone – yea, Senear- yea, and Hayden – yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.

4. CCMC 2024 Budget Approval

M/Senear S/Linville "I move that that Hospital Services Board approve the CCMC 2024 Budget as presented".

Denna Stavig reported that budget is in the packet. The data we have is through the end of September with the exception of the contractual adjustments, we had some larger adjustments come through for past year that I added in to make sure those were captured just so you could see a more realistic end of year projection for this year. We had a couple of larger paybacks for Noridian for this year and past Cost Report years that I wanted to make sure were included so that you had a good idea of where we actually thought we were going to be this year. For next year we increased our revenues only slightly with just 2% and kept Long-Term Care the same, our Census for Long-Term Care has been fluctuating, and we didn't want to count on a full roster, so we just kept it the same as what we had for this year. For Swing Bed we actually had a decrease because we projected off of the number of days that we were trending per month for the year, versus the dollar value, so we ended up getting a little bit more. But we wanted to shoot low to be more conservative, Swing Bed may go up quite a bit for the rest of this year because we've been full this last month and those

numbers aren't reflected in there. But, we wanted to be conservative with our projections and not overstated and then be short of cash.

**Hayden – yea, Iannazzone – yea, Linville – yea, and Senear- yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.**

5. CCMC Salary Philosophy Approval

M/Linville S/Senear "I move that that Hospital Services Board approve the CCMC Leadership and Staff Salary Philosophy as presented".

M/Iannazzone S/Linville "I move to go into Executive Session to discuss the CCMC Leadership and Staff Salary Philosophy, a matter in which the immediate knowledge of which would clearly have an adverse effect upon the finances of the entity.

The Board came out of Executive Session at 1:01pm

Back into Regular Session at 1:02pm

Main motion failed

M/Iannazzone S/Senear "I move that that Hospital Services Board approve the CCMC Leadership and Staff Compensation Philosophy as amended".

**Hayden – yea, Iannazzone – yea, Linville – yea, and Senear- yea.
4 yeas, 0 nay, 0 absent; Motion passed 4-0.**

I. AUDIENCE PARTICIPATION ~ None

J. BOARD MEMBERS COMMENTS

Iannazzone ~ Great stuff to see and hear. The Staff Christmas Party was a lot of fun, thank you for extending the invitation.

Senear ~ I thought it was exciting that we had five members again. And I'm excited to see that Dr. Sanders is staying on.

Linville ~ I wanted to say that it was really inspiring to hear what Leadership had to say. And I hope we can keep our claws in you (Dr. Sanders) a little longer.

Hayden ~ Thanks to you all!

K. EXECUTIVE SESSION

1. CCMC Leadership and Staff Compensation Philosophy

L. ADJOURNMENT

M/Senear S/Linville "I move to adjourn"

Kelsey Hayden declared the meeting adjourned at 1:09pm.

Prepared by: Faith Wheeler-Jeppson

CEO January 2024 Monthly report

CMS LTC Survey Update: The recent CMS survey yielded positive overall results; however, it identified concerns with CMS regulation F880 which includes hand hygiene. Issues were identified throughout the facility. Addressing this, we are required to implement a CMS Directed Plan of Correction, informed by a comprehensive Root Cause Analysis (RCA) meeting that identified these actionable improvements.

- Training Enhancements:
 - We have begun utilizing Glo-Germ for realistic training scenarios and hands on training.
 - We are implementing direct observation protocols for handwashing.
 - Strengthening hand hygiene education during orientation through our infection control program.
- Online training Improvement:

In response to broader concerns, our administration is conducting a thorough review of our online training programs. This includes ensuring that online training is not overused, assessing its effectiveness of each course, adjusting course content to be directly applicable to job duties.
- Time Management and Staff Support:

Recognizing the importance of time management in staff productivity, we are working on optimizing the time allocated for training. Additionally, we are actively fostering a culture of teamwork, encouraging staff to support and correct each other when observing behaviors or issues that may compromise patient care or safety.

These improvements are being actively pursued, and we anticipate positive outcomes.

Collaboration with Canneries for Migrant Worker Travel Insurance: Each year CCMC has substantial number of unpaid claims and sliding scale applications from nonresidents that are temporarily in town for employment at canneries. We are encouraging with local canneries to ensure that migrant workers obtain travel insurance prior to arrival in Cordova. This proactive step aims to minimize unpaid bills, fostering a healthier community while supporting the economic contributors to our region. Please see the attached letter that is being sent to local canneries.

Expanding Early Health Education in Cordova: Continuing our commitment to community health, we are exploring avenues to increase early health education. This includes an examination of options to expand daycare offerings in Cordova, providing a platform for early health education initiatives. By engaging with the community in this manner, we aim to enhance overall health awareness and promote preventive healthcare measures. There has been a lot of talk in the community around this topic. At this time CCMC continues to participate in the conversations but we do not have any solid plans or vision for a path forward.

Hannah Sanders, MD
Chief Executive Officer
Cordova Community Medical Center

[Recipient's Name]
[Recipient's Title]
Fishing Industry Partner

To Fishing Industry Community Partners,

Every year, the fishing industry brings large numbers of migrant workers to support the seasonal demands of the industry. While we appreciate the contribution of these workers to our local economy, we are currently facing a significant challenge with unpaid medical bills.

Our critical access hospital operates on thin margins to provide essential healthcare services, particularly during the busy fishing season. Unfortunately, a substantial number of migrant workers are utilizing hospital resources without having adequate health insurance coverage. This has resulted in substantial losses from unpaid medical bills.

I am writing to bring to your attention the outstanding unpaid medical bills for non-resident temporary individuals in Cordova that have a local address indicating one of the canneries, totaled \$77,352 for just the month of August 2023. This places an undue strain on the hospital's resources and adversely affects the overall well-being of our community.

We kindly request that businesses that rely on temporary employees take proactive measures to address this issue. Specifically, we propose that businesses require all temporary workers that do not have adequate insurance obtain comprehensive travel health insurance prior to arriving in Cordova for work. Medicaid policies from states outside of Alaska do not cover care provided in Alaska. Individuals with out of state Medicaid will also need travel insurance. This measure would not only protect the well-being of the workers, but also ensure that the burden on the local hospital and community is significantly reduced.

By implementing this policy, businesses can demonstrate their commitment to the health and welfare of their workforce and Cordova. We appreciate your attention to this matter and look forward to working together to find a solution that benefits all stakeholders involved.

Thank you for your time and consideration. If you have any questions or would like to discuss this matter further, please do not hesitate to contact me.

Sincerely,

[Your Name]
[Your Title]
[Your Organization]

Cordova Community Medical Center Statistics

	31	28	31	30	31	30	31	31	30	31	30	31	Cumulative	Monthly
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Average
Hosp Acute+SWB Avg. Census		29												
FY 2019	3.5	1.6	1.2	1.4	1.2	1.1	2.4	3.3	3.3	3.2	4.0	4.3		2.5
FY 2020	3.3	2.1	2.4	2.7	1.7	1.1	1.0	0.3	0.7	1.0	1.8	1.0		1.6
FY 2021	1.3	3.2	2.2	1.7	2.2	1.6	2.1	2.4	3.3	5.6	4.3	1.4		2.6
FY 2022	1.6	3.3	2.8	2.1	1.5	1.9	3.5	3.5	3.9	0.5	1.0	2.1		2.3
FY 2023	2.5	1.3	2.3	3.6	2.0	0.5	1.1	0.5	2.3	2.7	2.9	0.0		1.8
Acute Admits														
FY 2019	6	0	2	4	2	1	3	6	4	2	3	3	36	3.0
FY 2020	2	0	1	3	0	2	7	5	4	1	6	2	33	2.8
FY 2021	2	6	4	1	8	7	4	4	4	3	1	2	46	3.8
FY 2022	6	1	2	3	5	7	8	4	3	4	3	5	51	4.3
FY 2023	1	3	6	2	5	4	5	4	2	2	3		37	3.4
Acute Patient Days														
FY 2019	33	0	6	12	7	4	13	10	12	3	10	11	121	10.1
FY 2020	4	0	4	14	4	4	17	9	8	3	36	6	109	9.1
FY 2021	4	13	8	2	17	11	9	14	15	18	13	2	126	10.5
FY 2022	15	11	7	10	8	10	21	9	12	7	5	14	129	10.8
FY 2023	3	9	16	15	15	11	18	4	12	4	9		116	10.5
SWB Admits														
FY 2019	2	0	0	0	0	0	3	0	0	2	1	1	9	0.8
FY 2020	1	1	1	1	0	0	0	0	1	1	0	1	7	0.6
FY 2021	2	2	0	1	1	0	2	2	4	3	1	0	18	1.5
FY 2022	1	3	0	1	2	2	3	2	4	2	2	1	23	1.9
FY 2023	2	1	3	2	1	1	1	0	3	2	3		19	1.7
SWB Patient Days														
FY 2019	75	44	31	30	31	30	61	93	86	95	109	121	806	67.2
FY 2020	99	61	70	67	49	30	14	0	13	29	19	24	475	39.6
FY 2021	37	77	60	49	50	36	55	60	85	155	117	40	821	68.4
FY 2022	34	81	79	54	37	48	89	101	104	7	24	52	710	59.2
FY 2023	73	28	55	94	48	5	15	13	57	80	79		547	49.7
CCMC LTC Admits														
FY 2019	2	0	1	0	0	0	0	0	0	0	1	0	4	0.3
FY 2020	0	1	0	0	1	0	2	0	0	0	3	0	7	0.6
FY 2021	0	0	0	0	0	0	2	0	0	0	1	1	4	0.3
FY 2022	0	0	0	0	0	1	0	0	0	0	0	0	1	0.1
FY 2023	0	0	0	1	1	0	1	2	0	1	0		6	0.5
CCMC LTC Resident Days														
FY 2019	299	278	308	300	310	300	280	310	300	310	300	303	3,598	299.8
FY 2020	310	289	310	293	296	300	301	310	300	309	277	310	3,605	300.4
FY 2021	300	300	298	300	310	299	298	310	300	310	298	309	3,632	302.7
FY 2022	310	280	310	300	310	299	310	310	300	310	290	310	3,639	303.3
FY 2023	310	280	310	309	296	270	257	268	252	271	270		3,093	281.2
CCMC LTC Avg. Census														
FY 2019	10	9	10	10	10	10	9	10	10	10	10	10		9.8
FY 2020	10	10	10	10	10	10	10	10	10	10	9	10		9.8
FY 2021	10	10	10	10	10	10	10	10	10	10	10	10		9.9
FY 2022	10	10	10	10	10	10	10	10	10	10	10	10		10.0
FY 2023	10	10	10	10	10	9	8	9	8	9	9			9.2
ER Visits														
FY 2019	31	41	47	54	60	55	68	81	64	43	22	28	594	49.5
FY 2020	35	38	34	23	52	51	49	47	35	35	29	38	466	38.8
FY 2021	38	42	35	44	77	61	74	78	67	34	32	40	622	51.8
FY 2022	38	38	42	50	75	85	76	97	64	63	38	46	712	59.3
FY 2023	62	39	67	39	56	84	109	100	69	40	48		713	64.8
PT Procedures														
FY 2019	443	423	438	440	381	358	305	352	294	295	321	311	4,361	363.4
FY 2020	404	409	314	218	285	279	201	242	322	363	320	338	3,695	307.9
FY 2021	327	494	646	372	352	444	471	337	413	602	493	310	5,261	438.4
FY 2022	275	459	551	394	307	352	396	384	360	201	274	442	4,395	366.3
FY 2023	364	322	458	405	345	209	304	325	479	550	436		4,197	381.5
OT Procedures														
FY 2019	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
FY 2020	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
FY 2021	25	223	183	49	36	115	174	118	161	350	309	120	1,863	155.3
FY 2022	122	190	251	134	120	229	243	200	197	53	87	164	1,990	165.8
FY 2023	94	51	152	115	75	94	70	106	167	163	144		1,231	111.9
Lab Tests														
FY 2019	330	356	255	361	423	244	404	473	378	310	392	406	4,332	361.0
FY 2020	277	295	233	355	657	1,441	2,229	1,895	1,319	1,084	1,263	1,165	12,213	1,017.8
FY 2021	885	1,010	1,004	805	682	637	1,261	1,115	853	605	614	549	10,020	835.0
FY 2022	825	576	671	902	958	699	610	822	594	585	499	553	8,294	691.2
FY 2023	545	546	575	578	801	655	766	649	512	501	478		6,606	600.5
X-Ray Procedures														
FY 2019	46	48	83	0	0	98	94	79	77	59	59	46	689	57.4
FY 2020	46	49	55	42	52	62	62	58	63	44	47	39	619	51.6
FY 2021	48	50	49	64	64	70	79	86	88	68	53	72	791	65.9
FY 2022	82	63	64	94	60	82	69	93	51	72	58	61	849	70.8
FY 2023	72	45	63	49	50	88	97	107	83	71	61		786	71.5
CT Procedures														
FY 2019	19	12	13	15	26	11	24	35	21	6	12	19	213	17.8
FY 2020	12	14	13	18	20	23	19	23	22	20	20	20	224	18.7
FY 2021	24	27	26	20	27	32	28	38	25	16	12	22	297	24.8
FY 2022	21	21	36	25	29	42	31	26	16	30	15	28	320	26.7
FY 2023	30	18	22	18	16	36	39	34	26	4	23		266	24.2
CCMC Clinic Visits														
FY 2019	162	161	144	178	250	205	247	252	207	360	183	173	2,522	210.1
FY 2020	184	193	141	112	121	151	150	150	152	138	128	127	1,747	145.6
FY 2021	125	134	161	157	188	224	265	277	296	452	303	275	2,857	238.1
FY 2022	288	196	199	237	260	241	221	212	304	359	219	182	2,918	243.2
FY 2023	221	158	151	176	214	188	230	289	242	371	216		2,456	223.3
Behavioral Hlth Visits														
FY 2019	62	98	69	60	89	86	82	94	101	148	112	108	1,109	92.4
FY 2020		138	138	124	113	126	98	104	102	115	123	116	1,297	117.9
FY 2021	85	62	65	74	90	96	60	97	50	35	63	76	853	71.1
FY 2022	84	74	83	79	82	67	74	99	126	125	108	94	1,095	91.3
FY 2023	150	68	86	98	122	86	94	97	94	106	136		1,137	103.4

CORDOVA COMMUNITY MEDICAL CENTER
OPERATING/INCOME STATEMENT
FOR THE 11 MONTHS ENDING 11/30/23

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	----- S I N G L E -----				----- Y E A R T O -----			
	ACTUAL	BUDGET	\$ VARIANCE	% VAR	ACTUAL	BUDGET	\$ VARIANCE	% VAR
REVENUE								
ACUTE	68,714	77,000	(8,285)	(10)	1,311,795	1,147,000	164,795	14
SWING BED	575,276	348,000	227,276	65	3,777,816	3,798,000	(20,183)	(0)
LONG TERM CARE	429,551	505,000	(75,448)	(14)	5,164,076	5,541,000	(376,923)	(6)
CLINIC	95,773	65,000	30,773	47	1,211,413	796,000	415,413	52
ANCILLARY DEPTS	235,535	210,000	25,535	12	3,105,245	2,542,000	563,245	22
EMERGENCY DEPART	274,729	175,000	99,729	56	4,196,542	2,714,000	1,482,542	54
BEHAVIORAL HEALT	31,325	20,000	11,325	56	275,878	222,000	53,878	24
RETAIL PHARMACY	164,128	120,000	44,128	36	1,482,125	1,334,000	148,125	11
	-----	-----	-----		-----	-----	-----	
PATIENT SERVIC	1,875,035	1,520,000	355,035	23	20,524,894	18,094,000	2,430,894	13
DEDUCTIONS								
CHARITY	15,660	17,000	1,339	7	233,055	183,000	(50,055)	(27)
CONTRACTUAL ADJU	211,903	360,000	148,096	41	5,444,970	3,920,000	(1,524,970)	(38)
ADMINISTRATIVE A	17,540	37,500	19,959	53	43,036	412,500	369,463	89
BAD DEBT	564,073	21,000	(543,073)	(2586)	1,047,486	229,000	(818,486)	(357)
	-----	-----	-----		-----	-----	-----	
DEDUCTIONS TOT	809,177	435,500	(373,677)	(85)	6,768,548	4,744,500	(2,024,048)	(42)
COST RECOVERIES								
GRANTS	144,557	133,000	11,557	8	586,865	537,000	49,865	9
IN-KIND CONTRIBU	316,662	18,500	298,162	1611	483,288	201,500	281,788	139
OTHER REVENUE	10,644	19,000	(8,355)	(43)	130,310	206,000	(75,689)	(36)
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COST RECOVERIE	471,863	170,500	301,363	176	1,200,464	944,500	255,964	27
	-----	-----	-----		-----	-----	-----	
TOTAL REVENUES	1,537,721	1,255,000	282,721	22	14,956,810	14,294,000	662,810	4
EXPENSES								
WAGES	518,229	504,000	(14,229)	(2)	5,257,919	5,544,000	286,080	5
TAXES & BENEFITS	272,903	259,000	(13,903)	(5)	3,001,373	2,851,000	(150,373)	(5)
PROFESSIONAL SER	203,352	161,000	(42,352)	(26)	2,133,975	1,777,000	(356,975)	(20)
SUPPLIES	192,374	160,000	(32,374)	(20)	1,923,718	1,759,000	(164,718)	(9)
MINOR EQUIPMENT	5,253	4,000	(1,253)	(31)	50,188	45,000	(5,188)	(11)
REPAIRS & MAINT	12,535	17,000	4,464	26	158,149	186,000	27,850	14
RENTS & LEASES	51,089	11,000	(40,089)	(364)	176,157	121,000	(55,157)	(45)
UTILITIES	40,200	53,000	12,799	24	539,845	583,000	43,154	7
TRAVEL & TRAININ	9,060	10,000	939	9	83,590	112,000	28,409	25
INSURANCES	20,359	17,600	(2,759)	(15)	209,914	194,400	(15,514)	(7)
RECRUIT & RELOCA	354	3,300	2,945	89	7,540	36,700	29,159	79
DEPRECIATION	41,842	50,000	8,157	16	579,316	546,000	(33,316)	(6)
OTHER EXPENSES	10,861	30,000	19,138	63	170,307	323,000	152,692	47
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TOTAL EXPENSES	1,378,417	1,279,900	(98,517)	(7)	14,291,997	14,078,100	(213,897)	(1)
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OPERATING INCO	159,304	(24,900)	184,204	739	664,813	215,900	448,913	207
NET INCOME	159,304	(24,900)	184,204	739	664,813	215,900	448,913	207
	=====	=====	=====		=====	=====	=====	

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CORDOVA COMMUNITY MEDICAL CENTER
BALANCE SHEET
FOR THE MONTH ENDING: 11/30/23

	Current Year	Prior Year	Net Change
ASSETS			
CURRENT ASSETS			
CASH	2,747,579	2,186,268	561,311
NET ACCOUNT RECEIVABLE	2,640,835	2,042,080	598,754
THIRD PARTY RECEIVABLE	682	5,093	(4,411)
CLEARING ACCOUNTS	51,026	90,254	(39,228)
PREPAID EXPENSES	206,082	203,025	3,057
INVENTORY	493,103	551,303	(58,199)
	-----	-----	-----
TOTAL CURRENT ASSETS	6,139,309	5,078,026	1,061,283
PROPERTY PLANT & EQUIPMENT			
LAND	122,010	122,010	
BUILDINGS	8,666,889	7,682,537	984,351
EQUIPMENT	9,625,416	9,625,416	
CONSTRUCTION IN PROGRESS		907,000	(907,000)
	-----	-----	-----
SUBTOTAL PP&E	18,414,316	18,336,965	77,350
LESS ACCUMULATED DEPRECIATION	(14,640,299)	(14,017,434)	(622,864)
	-----	-----	-----
TOTAL PROPERTY & EQUIPMENT	3,774,016	4,319,530	(545,513)
OTHER ASSETS			
GOODWILL - PHARMACY	150,000	150,000	
GOODWILL - PHARMACY	(88,750)	(73,750)	(15,000)
PERS DEFERRED OUTFLOW	1,037,998	1,178,466	(140,468)
TOTAL OTHER ASSETS	1,099,248	1,254,716	(155,468)
	-----	-----	-----
TOTAL ASSETS	11,012,574	10,652,273	360,301
	=====	=====	=====

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CORDOVA COMMUNITY MEDICAL CENTER
BALANCE SHEET
FOR THE MONTH ENDING: 11/30/23

	Current Year	Prior Year	Net Change
LIABILITIES AND FUND BALANCE			
CURRENT LIABILITIES			
ACCOUNTS PAYABLE	692,971	285,699	407,271
PAYROLL & RELATED LIABILITIES	850,646	837,041	13,604
INTEREST & OTHER PAYABLES	7,175	3,458	3,717
LONG TERM DEBT - CITY	5,466,458	5,466,458	
OTHER CURRENT LONG TERM DEBT	8,450	87,978	(79,528)
	-----	-----	-----
TOTAL CURRENT LIABILITIES	7,025,701	6,680,636	345,065
LONG TERM LIABILITIES			
NET PENSION LIABILITY	8,148,107	6,825,636	1,322,471
TOTAL LONG TERM LIABILITIES	8,148,107	6,825,636	1,322,471
DEFERRED INFLOWS OF RESOURCES			
PENSION DEFERRED INFLOW	(2,907,065)	601,203	(3,508,268)
TOTAL DEFERRED INFLOWS	(2,907,065)	601,203	(3,508,268)
TOTAL LIABILITIES	12,266,743	14,107,475	(1,840,731)
NET POSITION (EQUITY)			
UNRESTRICTED FUND BALANCE	(1,937,496)	(2,950,277)	1,012,781
TEMPORARY RESTRICTED FUND BALANCE	18,513	18,513	
CURRENT YEAR NET INCOME	664,813	(523,438)	1,188,251
	-----	-----	-----
TOTAL NET POSITION	(1,254,169)	(3,455,202)	2,201,033
TOTAL LIABILITIES & NET POSITION	11,012,574	10,652,273	360,301
	=====	=====	=====

November bad debt written off: \$404,073.03

CCMC Medical Director 4th Quarter Report 2023

January 18, 2024

Quarterly chart reviews are performed for all deaths and transfers along with random chart reviews for all physicians. This includes care in the emergency department. Second and third quarter chart reviews revealed no issues with clinical care and no unusual occurrences that needed to be addressed.

Our census in long term care has recently increased to ten. We hope that we can maintain this stable group of our residents. The swing bed program is currently without any residents. Our director of nursing and her team are continually reaching out to hospitals searching for appropriate rehabilitation patients.

Covid-19 and influenza numbers have fluctuated most of the winter so far. We continue to have the flu and covid vaccine available and encourage people to get vaccinated if they have not already done so. The flu season usually lasts well into March, and covid seems to be an ever-present illness. The adult RSV vaccine is available and is covered by Medicare. Coverage from other commercial insurance has been spotty. In addition to being vaccinated for vaccine preventable illnesses, we continue to remind people to wear a mask and limit your exposure to others when you have upper respiratory symptoms. These may include a runny nose, cough, sore throat, body aches or headache. We want to do everything possible to prevent and limit the spread of illnesses. Remember those at highest risk are the very old and very young, all people with chronic illnesses and those people on medication that may suppress their immune system.

Even though we have not seen as many people in the emergency department for substance use disorder (SUD) problems lately, we are still diligently working on refining our processes and policies regarding helping people with SUD. This may include medication assisted treatment (MAT), behavioral health care (evaluation, counseling, support, recommendations for medication), and other programs and resources in the community.

Respectfully,

Curtis M. Bejes, M.D.

Clinic

Nearly all insurances reset at the first of the year and deductibles need to be met before co-pays and co-insurances take effect. We are making an effort to let all patients know their deductible and their monetary responsibility at each visit. This sounds like an easy task, but it is more complicated than it sounds! However, our billing department is making sure insurances are reimbursing as they should and as we work our way into 2024, those efforts should take full effect.

Dr. Gray, Orthopedics, will be here January 27. Dr. Kaufman, Podiatry, will be here February 5-6. Dr. Gifford, Pediatrician, will be here February 16.

A new provider, Dr. Horner, Dermatology, will have her first clinic March 19. Like Dr. Gifford, patients should call the CCMC Clinic at 907-424-8200 to schedule.

Additionally, Dr. Sjostedt from Northland Audiology in Juneau is again using CCMC for her audiology clinics. Her next Cordova visit is February 26-27.

Lab/Radiology/Rehab Services

The new CT contract is in place and we are hopeful the timeline can be kept so that things are up and running before the start of the fishing season.

The Radiology department has added an ultrasound technician (traveler) to help cover any CT downtime with ultrasound capabilities. Jim has gotten the ultrasound machine up-to-date and is working with medical staff to train them in simple exams on the machine. Providers are taking advantage of the full-time ultrasound tech in Cordova and sending orders to CCMC as needed.

The other departments have maintained steady wintertime patients. Lab generally sees an upswing in USCG drug screens for captain licensing as the fishing season approaches as well as employer drug screens for the first quarter. These are done through Beacon. The service of providing drug screening capabilities in Cordova is a service that many Cordovans rely on.

Rehab Services continues to see a variety of patients for both chronic and acute issues. Speech therapy is expanding services and treating a variety of patients as well. In person speech services, especially for patients younger than 3 who aren't yet eligible for services through the school, is a valuable tool in addressing concerns early and we are fortunate to be able to provide that support to families.

CCMC continues to prioritize continuous quality improvement through staff education, process improvement projects, regular facility surveillance and chart reviews. The quality improvement, antibiotic stewardship and infection prevention committee's meet quarterly. The last quarterly meetings were held in November 2023.

Recent quality related events:

- LTC had a CMS state re-certification survey in mid-December 2023. Deficiencies related to quality patient care included: open (unlocked) medication cart, lack of complete documentation for pneumonia, flu and covid vaccines offered to 2 residents and hand hygiene practices in nursing and dietary staff.
- In response to these deficiencies, CCMC leadership developed plans of correction that have been reviewed and approved by the state. Our plans of correction include frequent monitoring of hand hygiene practices of nursing and dietary staff by nursing administration and infection preventionist. Online hand hygiene education has been provided for all staff, with more robust education for nursing and dietary. Nursing leadership is also connecting with staff one-on-one to provide education during times of hand hygiene monitoring. Additionally, we have revised our hand hygiene orientation process to provide more robust hand hygiene education and hands-on training at the time of on-boarding for all dietary and direct patient care staff.
- In November, CAH DON Alex attended an APIC (Association for Professionals in Infection Control) Infection Prevention training in Anchorage. Valuable take aways included foundational components of a strong infection prevention program and best practices on how to implement change in a healthcare system. Alex has been employing these tools in our survey plans of correction.
- CCMC employees have started their grant funded health care trainings. Some have already completed their trainings including an ACLS, BLS, PALS "train-the-trainer" class that will allow Alexis Allen to offer ACLS, BLS and PALS certifications to CCMC staff here in Cordova!

On-going quality related activities:

- 2024 will bring in new process improvement projects in every hospital department.
- Environment of care rounds performed regularly. All findings reported to appropriate departments and our facilities crew is very involved in this process.
- All emergency room and inpatient admission charts are reviewed and evaluated for appropriateness of care and complete documentation. Any findings are discussed with the appropriate staff and plan of action is created.
- Our Interdisciplinary Team meets weekly to discuss all swing bed and awaiting LTC care patients. This team includes DON, RN, Physician on-call, PT, OT, Pharmacist, Case Manager and Director of Operations. We focus on current and future care needs, as well discharge planning.



MEMORANDUM

To: Hospital Services Board

Subject: Administrator Salary Inclusion in COLA

Date: 1/19/2024

Suggested Motion: "I move that the Hospital Services Board approve the Administrator's salary inclusion in the annual cost-of-living adjustment (COLA), in alignment with the board-approved compensation philosophy. The board will review the recommended Administrator COLA in time for annual budget approval."

February 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29 Hospital Services Board Meeting 12PM		