

Wrangell Medical Center

Wrangell, Alaska



Our Mission: To Enhance The Quality Of Life For All We Serve!



Board of Trustees

October 16, 2013

AGENDA



**WRANGELL MEDICAL CENTER
BOARD OF DIRECTORS MEETING AGENDA
October 16, 2013 -- 5:30 p.m.
Location: Nolan Center**

MEMBERS: Judy Allen, Megan Clark, Barbara Conine, Terri Henson, Bernie Massin, Marlene Messmer, Cori Robinson, Dorothy Sweat, Woody Wilson, Ex-Officio member Marla Sanger, RN, Interim CEO

1. CALL TO ORDER (By CEO, Marla Sanger)
2. ROLL CALL (By CEO, Marla Sanger)
3. ORGANIZATION OF THE BOARD
 - a. Election of officers
 - i. President (presided over by CEO)
 - ii. Vice President (remainder of elections presided over by newly elected President)
 - iii. Secretary
 - iv. Treasurer
4. AMENDMENTS TO THE AGENDA
(Upon recommendation from former President Wilson, action item 12.c will be moved to follow the Executive Session)
5. CONFLICT OF INTEREST
6. CONSENT ITEMS
 - a. Minutes of the meeting held 9/18/2013
 - b. Financial statements: August 2013 & FY-13 Audited Financials
 - c. Statistics: August 2013
7. SPECIAL TELEPHONIC PRESENTATION:
 - a. FY-13 Audited Financial Statement by Eric Campbell of BDO Seidman
8. PERSONS TO BE HEARD
During this section of the agenda, the WMC Board will invite and listen to topics not on the agenda. The Board will note the topics, and will not take any official action on any of the topics presented but will refer items to the administration to be researched. A sign up sheet is available before the meeting to allow community members to sign up for an opportunity to speak before the board.
9. CORRESPONDENCE: None
10. REPORTS AND COMMUNICATIONS FROM WMC STAFF:
 - a. Letter from CFO Dana Strong re: combining Wells Fargo accounts.
 - b. CEO's report

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WRANGELL MEDICAL CENTER
BOARD OF DIRECTORS MEETING AGENDA
October 16, 2013 -- 5:30 p.m.

11. MEDICAL STAFF REPORT: Verbal

12. ACTION ITEMS:

- a. Approval of recommendation to combine Wells Fargo accounts.
- b. Approval of change to Hospital Auxiliary Bylaws.
- c. Discussion and possible approval of continuation of CEO's contract.

13. DISCUSSION ITEMS:

- a. Committee Appointments
 - i. Finance Committee (Board Chair & Treasurer, +1 Board member)
 - ii. Quality Committee (representatives of the Board)
 - iii. Strategic Planning Committee

14. INFORMATION ITEMS

- a. New Hospital Project update (standing agenda item).
- b. Status of WMC Board Bylaws and WMC Personnel Policy Manual

15. BOARD DEVELOPMENT

- a. Confidentiality Agreement
- b. 'Navigating the Boardroom', chapters 13-16, discussion.

16. BOARD COMMENTS

17. EXECUTIVE SESSION

An executive session to discuss matters:

- a. The immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity (AS 44.62.310), specifically the CEO contract with PeaceHealth.
- b. Which by law, municipal charter or ordinance are required to be confidential (AS 44.62.320), specifically to consult with an attorney regarding threatening litigation.

18. ADJOURN

3. ORGANIZATION OF THE BOARD

- a. Election of officers
 - i. President (presided over by CEO)
 - ii. Vice President (remainder of elections presided over by newly elected President)
 - iii. Secretary
 - iv. Treasurer

October Meeting – Officer Elections

Below is a reminder of the sequence of events for the October meeting, which is different from a regular meeting up to the point at which all the officers are elected.

The CEO holds the gavel and opens the meeting in absence of newly elected leadership. The CEO follows the agenda through roll call, then calls for nominations for president. The CEO conducts the election of the president. Open elections are generally used. In other words secret ballots are not required, however in the past history of WMC Board officer elections a secret ballot has been used when more than one person is nominated for a given office. The method of voting should be decided upon at the beginning of the process.

Voting Process:

- Voting method is determined
- Chair calls for nominations of president. (Nominations do not require seconds.)
- Persons nominated should be asked if they are willing to serve by the acting chair.
- If there is not another nomination or if there are several when the nominations stop coming from the body, the acting chair asks for a motion to close nominations. (This does require a second.)
- The acting chair declares: "Nominations are officially closed. We have one (two or three) nominations for the position of President of the WMC Board. In order of nomination I will ask for a vote of the body on each person. First nomination: _____" (this is not a pole vote but the people who vote for each candidate are recorded. Of course each person can only vote one time.)
- Next candidate and the vote.
- Next candidate and the vote and so on.
- When the president is duly elected the CEO passes the gavel to the new president and that person should move to the seat in the middle of the table next to the CEO.

The new president follows the above procedure to elect the remaining officers.

After the election of officers, work on the rest of the agenda can begin.

Also part of the October regular meeting is appointment of members to the following committees (found under 'Discussion Items' on the agenda):

- i. Finance Committee
- ii. Quality Committee
- iii. Strategic Planning Committee

6. CONSENT AGENDA

- a. Minutes of the meeting held 9/18/2013
- b. Financial statements: August 2013 & FY-13
Audited Financials
- c. Statistics: August 2013



**WRANGELL MEDICAL CENTER
BOARD OF DIRECTORS MEETING MINUTES
September 19, 2013 -- 5:30 p.m.
Location: Nolan Center**

CALL TO ORDER:

Meeting was called to order by Barb Conine at 5:30 p.m. Barb C was filling the seat of the Vice President of running the meeting since President Wilson was present but attending the meeting from a distance on the phone and vice president Bernie Massin was not present.

ROLL CALL:

Present: Treasurer Cori Robinson, Barb Conine, Marlene Messmer, Dorothy Sweat, and President Woody Wilson (via teleconference)

Absent, Excused: Vice President Bernie Massin, Secretary Terri Henson, Members Megan Clark and Judy Allen

Quorum established

Assembly Member James Stough was absent

AMENDMENTS TO THE AGENDA:

- Removed item 5.c. Statistics,
- Removed to October Agenda: Action Item 10c. Discussion and possible approval of continuation of CEO's contract,
- Added Executive Session.

Motion made by Treasurer Cori Robinson to accept changes to the agenda, seconded by Dorothy Sweat, motion passed unanimously

CONFLICT OF INTEREST: None

CONSENT ITEMS

Motion made by President Woody Wilson to approve consent item 5.a, minutes of the regular meeting held August 21, 2013, item 5.b, Financial Statements and interim CFO report for July 2013, seconded by Dorothy Sweat. Motion passed unanimously.

PERSONS TO BE HEARD: None

CORRESPONDENCE: None

CEO'S REPORT:

Attached. Marla Sanger, Interim CEO, pulled highlights from the weekly board updates and thanked Dana Strong, interim CFO, for his work over the course of a very busy month. She reviewed the annual survey, and the recent removal of the jetted tub in Long Term Care – due to the difficulties in getting it clean, and the finding that there is not much advantage to having the jets for the kinds of hydrotherapy that are done onsite. Staff are looking at non-jetted options. There has been a recent CNA class which has completed their coursework and are awaiting the state exam and another – the first High School class in years – which

WRANGELL MEDICAL CENTER
BOARD OF DIRECTORS MEETING AGENDA
September 18, 2013 -- 5:30 p.m.

CEO'S REPORT (continued):

has just started. An update was given on the current search for full time nursing staff, one of whom has already visited the facility and others will be in the near future.

MEDICAL STAFF REPORT: None this month (Dr. Salard was in the ER at time of meeting)

ACTION ITEMS:

- a. Motion was made to pass a resolution in support of achieving and sustaining a Level IV Trauma hospital designation, by Dorothy Sweat, seconded by Cori Robinson. With little discussion, the motion passed unanimously.
- b. Motion was made to open the discussion of and approval of updated WMC Personnel Policies, by Dorothy Sweat, seconded by Cori Robinson. With little discussion, the motion passed unanimously.

DISCUSSION ITEMS: None

INFORMATION ITEMS:

- a. New Building Update: Marla Sanger, Interim CEO, reported that the Borough Assembly passed the amendment to the PeaceHealth management contract - to include Gary Hall (for the purpose of looking over the new building plans) and Roshan Parikh (to study the agreement with Innovative Capitol) and that the studies should be happening at the time of the next Board meeting.
- b.

BOARD DEVELOPMENT:

Board members appreciated the reading and liked the quote "Managements job is to run the organization, the Board's job is to make sure it's being run well."

BOARD COMMENTS:

Woody W. – Much has been happening at the hospital and I appreciate all the work that has been done over the last month.

Marla S. – Thank you to Laura Salard for the work and energy that has gone into getting the Level IV trauma designation for the Medical Center.

EXECUTIVE SESSION:

Motion made by Dorothy Hunt-Sweat, pursuant to AS 44.62.320 to recess into executive session to discuss matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity, seconded by Cori Robinson.

Meeting recessed into executive session at 5:55 p.m.

Meeting reconvened into regular session at 6:20 p.m.

ADJOURN

With no further business, the regular meeting adjourned at 6:21 p.m.

Terri Henson

Kris Reed,

Date Certified:

OUR MISSION: To Enhance The Quality of Life For All We Serve!

DRAFT

Wrangell Medical Center

August 2013 Financial Statements

Dana Strong, Interim CFO

Executive Summary

- 2013 Audited Financial Statements should be available by the October 16 Board Meeting.
- August 2013 Financial Statements have been prepared utilizing comparative unaudited July 31 financials.
- August 2013 Net Patient Service Revenues increased by \$55,813 or 7% over July 2013 due to new C/A model.
- Total Patient Days decreased by (72) or (17%) from July 2013 to August 2013
- Gross Accounts Receivable decreased by (\$114,617) or (4%) from July 2013 to August 2013.

Executive Summary Cont'd

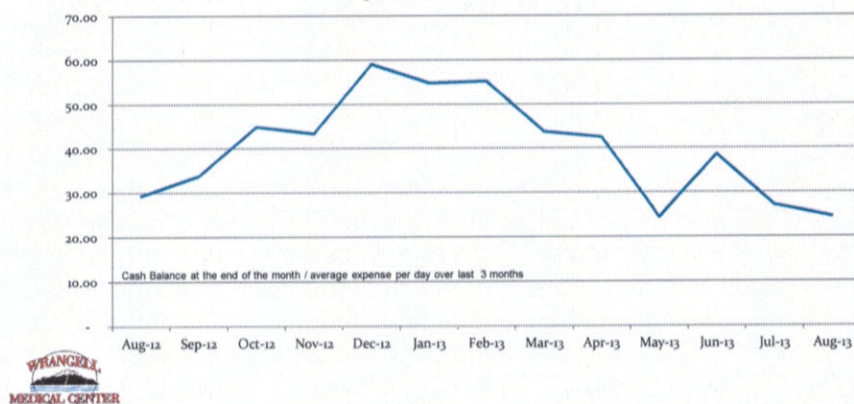
- Salaries & Benefits are consistent from July 2013 to August 2013.
- Supplies Expenses increased by \$37K or 54% from July 2013 to August 2013 primarily due to Pharmacy revenue increase of \$28K or 49% from July to August 2013.
- Other Expenses Increased by \$25K primarily due to the \$22K annual FY 13 audit fee from BDO Seidman.

Other Items of Note

- We are still working on the FY 14 Budget. We anticipate having it ready for Board approval in November 2013.
- We are still actively working on revenue cycle improvement and collection activities. This process is ongoing and has resulted in a slight Cash Flow improvement (60K) and Days in A/R reduction (2 days) from July to August 2013.

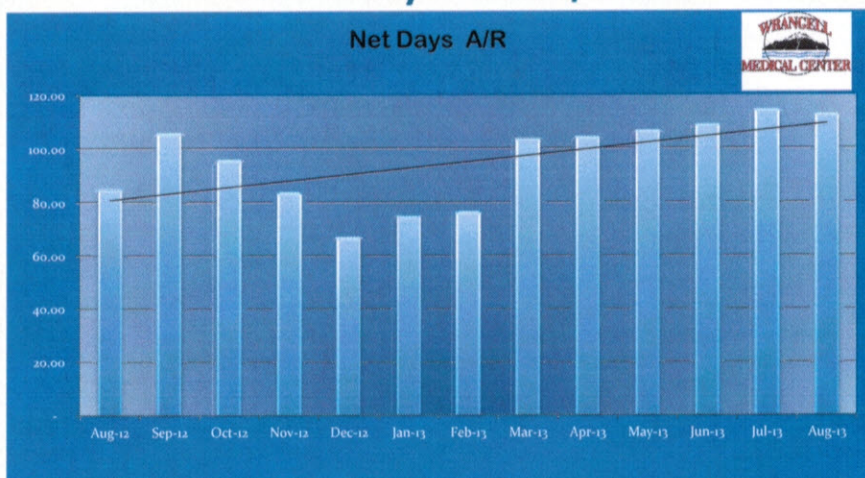
Days Cash on Hand

Days Cash on Hand

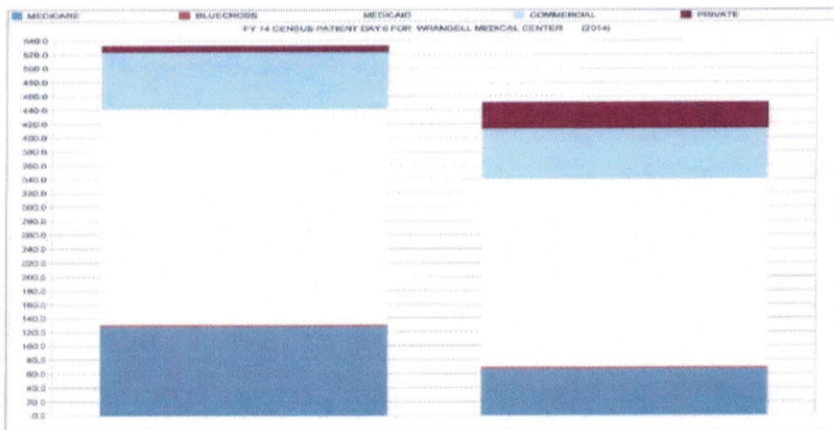


Net Days in A/R

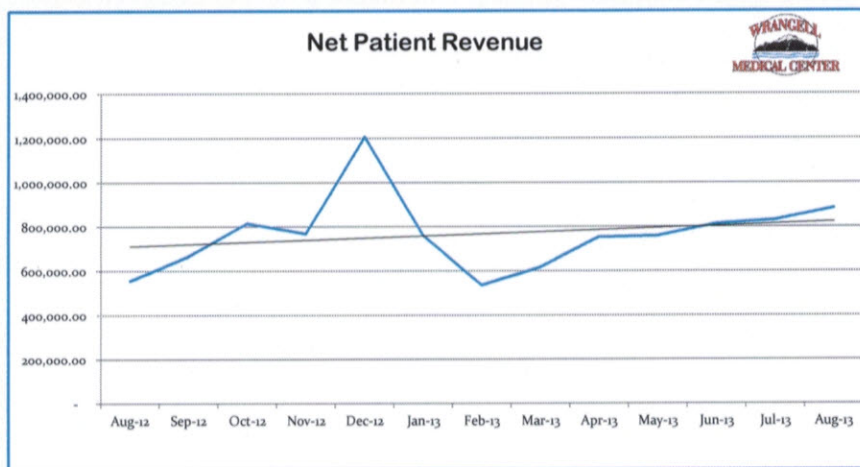
Net Days A/R

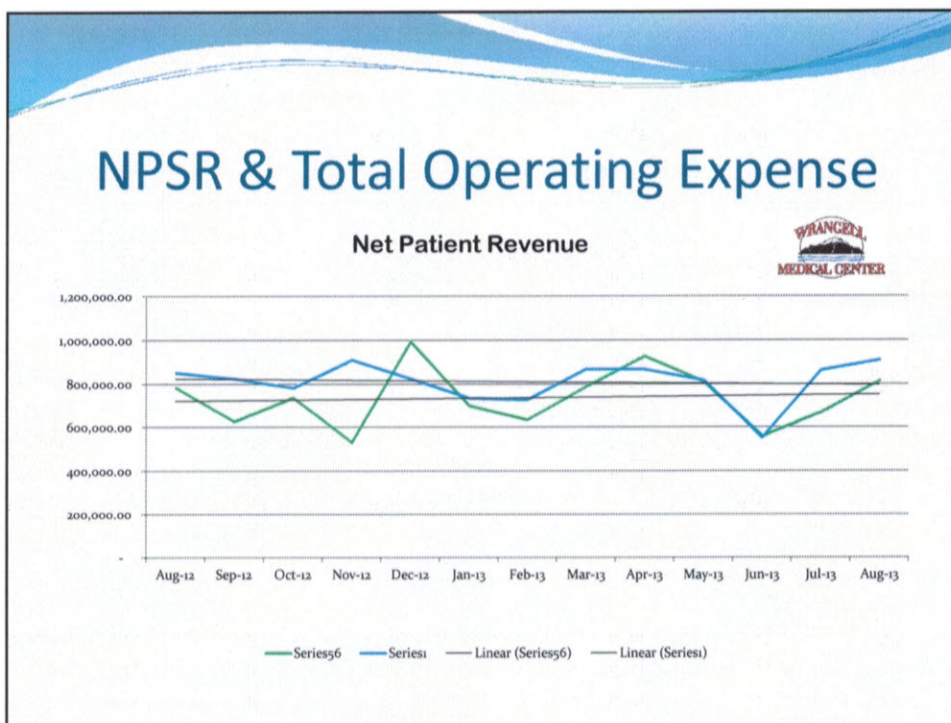
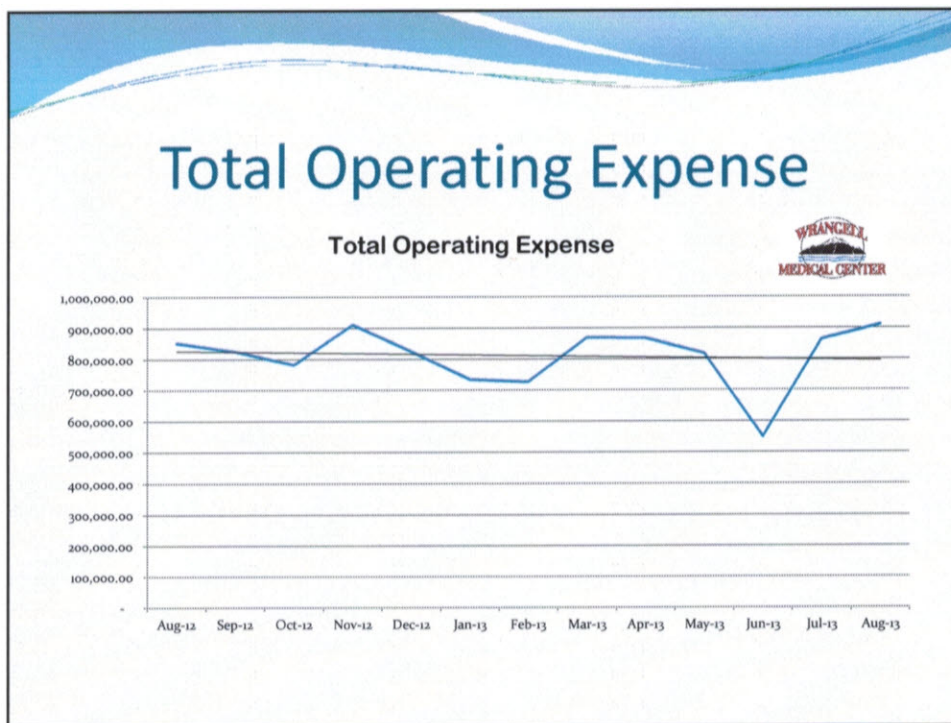


FY 2014 Patient Days by Payer



Net Patient Service Revenue





Wrangell Medical Center
Statement of Net Assets
August 31, 2013

<u>Assets</u>	<u>Aug-13</u>	<u>Jul-13</u>	<u>Net Change \$</u>	<u>Net Change %</u>	<u>Liabilities & Fund Equity</u>	<u>Aug-13</u>	<u>Jul-13</u>	<u>Net Change \$</u>	<u>Net Change %</u>
Cash in the Bank	686,012	629,304	56,708	9.01%	A/P and Accrued Expenses	267,941	153,152	114,789	74.95%
Patient A/R	3,135,552	3,250,169	-114,617	-3.53%	Employee Compensation	470,093	429,315	40,778	9.50%
Net Allowance A/R	-11,057	-236,761	225,704	-95.33%	Total Current Liabilities	738,034	582,467	155,567	26.71%
Grant Receivable	29,218	29,218	0	0.00%					
Inventory	0	0	0		Unreserved Equity	8,093,364	7,979,113	114,251	1.43%
Prepaid Expense	168,004	169,448	-1,444	-0.85%	Net Income / (Loss)	-19,295	114,251	-133,546	-116.89%
Total Current Assets	60,018	53,326	6,692	12.55%	Total Equity	8,074,069	8,093,364	-19,295	-0.24%
	4,067,747	3,894,704	173,043	4.44%					
Property, Plant & Equip	12,208,792	12,208,792	0	0.00%					
Accum Depreciation	-7,464,436	-7,427,666	-36,770	0.50%					
Net PP&E	4,744,356	4,781,126	-36,770	-0.77%					
Total Assets	8,812,103	8,675,830	136,273	1.57%	Total Liabilities / Equity	8,812,103	8,675,831	136,272	1.57%

Wrangell Medical Center
Statement of Revenues & Expenses
For The Month Ending August 31, 2013

	Aug-2013	Jul-2013	Net Change \$	Net Change %	YTD 2014
Routine Room and Board					
Inpatient Revenue					
Outpatient	64,531	123,746	(59,215)	-47.85%	188,278
Emergency Room	16,906	11,958	4,948	41.38%	28,865
Long Term Care	136,517	137,582	(1,065)	-0.77%	274,099
Total Routine	249,580	250,281	(701)	-0.28%	499,862
	467,534	523,567	(56,033)	-10.70%	991,104
Ancillary Charges					
Inpatient	42,003	98,216	(56,213)	-57.23%	140,220
Outpatient	397,950	297,530	100,420	33.75%	695,480
Long Term Care	20,450	19,045	1,405	7.38%	39,495
	460,403	414,791	45,612	11.00%	875,195
Total Charges	927,937	938,358	(10,421)	-1.11%	1,866,299
Fed Man Disc IP	14,226	(2,796)	17,022	-608.80%	11,430
State Man Disc IP	17,511	(7,501)	25,012	-333.45%	10,010
State Man Disc LTC	(17,259)	(38,025)	20,766	-54.61%	(55,285)
Bad Debts	(25,000)	(22,863)	(2,137)	9.35%	(47,863)
Charity	1,779	(18,847)	20,626	-109.44%	(17,068)
Other Discounts	(32,295)	(17,240)	(15,055)	87.33%	(49,536)
	(41,038)	(107,272)	66,234	-61.74%	(148,312)
Net Patient Revenue	886,899	831,086	55,813	6.72%	1,717,987
Operational Expenses					
Salaries	277,705	287,584	(9,879)	-3.44%	565,289
Benefits	157,806	163,623	(5,817)	-3.56%	321,429
Supplies	107,463	69,869	37,594	53.81%	177,333
Depreciation	36,769	36,769	0	0.00%	73,538
Other Expenses	331,602	305,711	25,891	8.47%	637,313
	911,345	863,556	47,789	5.53%	1,774,902
Operating Gain/(Loss)	(24,446)	(32,470)	8,024	-24.71%	(56,915)
Misc Revenue	261	2,648	(2,387)	-90.14%	2,910
Interest Earned	0	10	(10)	-100.00%	10
Grant Revenue	0	135,750	(135,750)	-100.00%	135,750
Non Oper Revenue	4,889	8,313	(3,424)	-41.19%	13,202
	5,150	146,721	(141,571)	-96.49%	151,872
Net Gain/ (Loss)	(19,296)	114,251	(133,547)	-116.89%	94,957

WRANGELL MEDICAL CENTER
Statement of Cash Flows

Month Ended	MTD Aug-13	YTD FY 2014
Cash Flows from Operating Activities		
Cash received from customers and third party payers	675,939	1,287,298
Cash payments to suppliers for services and goods	(439,259)	(1,156,308)
Cash payments to employees for services	(186,122)	(464,840)
Other operating receipts	6,150	26,352
Net cash flows from Non-Capital Financing Activities	56,708	(307,498)
Cash Flows from Non-Capital Financing Activities		
Grants Received	0	96,614
(Deposits to) withdrawals from escrow	0	0
Net cash flows from Non-Capital Financing Activities	0	96,614
Cash Flows from Capital and Related Financing Activities		
Additions to Property, Plant & Equipment	0	0
Capital Contributions Received	0	0
Net cash flows from capital and related financing activities	0	0
Cash Flows from Investing Activities		
Interest Income	0	10
Increase in Restricted Cash	0	0
Decrease in Board designated assets	0	0
Net cash flows from investing activities	0	10
Net Increase (decrease) in cash & cash equivalents	56,708	(210,874)
Cash and Cash Equivalents at beginning of period	629,304	896,886
Cash and Cash Equivalents at August 31, 2013	686,012	686,012

WRANGELL MEDICAL CENTER
Statement of Cash Flows Cont'd

Month Ended	MTD Aug-13	YTD FY 2014
Reconciliation of loss from operations to net cash flows from operating activities		
Loss from Operations	(24,444)	(56,915)
Adjustments to reconcile loss from operations to net cash flows from operating activities		
Depreciation	36,769	73,539
Other nonoperating revenues	5,150	151,872
Other nonoperating expenses	0	0
Decrease (increase) in assets:		
Patient Accounts Receivable	(111,087)	(351,282)
Other Accounts Receivable	0	3,217
Inventory	1,444	(2,558)
Prepays	(6,692)	(30,790)
Increase (decrease) in liabilities		
Accounts Payable & Accrued Liabilities	114,789	(61,927)
Employee Compensation & Related Items	40,778	63,970
Net Cash Flows from Operating Activities	56,707	(210,874)

7. SPECIAL PRESENTATION

- a. FY-13 Audited Financial Statement
(by Eric Campell of BDO Seidman)

8. PERSONS TO BE HEARD

During this section of the agenda, the WMC Board will invite and listen to topics not on the agenda. The Board will note the topics, and will not take any official action on any of the topics presented but will refer items to the administration to be researched. A sign up sheet is available before the meeting to allow community members to sign up for an opportunity to speak before the board.

9. CORRESPONDENCE

a. None

10. REPORTS AND COMMUNICATIONS FROM WMC STAFF:

- a. Letter from CFO Dana Strong re:
combining Wells Fargo accounts.
- b. CEO's report

Mission:

To enhance the quality of
life for all we serve

Vision:

Honor our heritage and be
the pride of the community

Values:

Integrity
Compassion and Caring
Trust
Transparency
Loyalty
Honoring our Heritage
Quality
Fiscal Responsibility

October 1, 2013

Wrangell Medical Center Board
Attn: President, Woody Wilson
PO Box 1081
Wrangell, Ak
99929

Dear Mr. Wilson and WMC Board Members,

When I arrived in Wrangell, it was brought to my attention that there are two Wrangell Medical Center Wells Fargo accounts which have existed for quite some time that could be combined with the General Checking account and reduce the paperwork and cost of tracking these small accounts.

The first is a 'Restricted Fund' (in the amount of \$5,543.87 as of September 18, 2013) which has existed for over two decades, but whose purpose is long since met. The second is a Call Care fund (in the amount of \$826.08 as of September 18), originally created to track income and expenses of the Call Care program, however it has ceased to be used as such, with income and expenses going directly into and out of General Checking.

Combining the above two accounts into the General Checking account will also reduce time spent by the auditors on our books each summer.

I am available to answer any questions you have about this request, please contact me at 874-7125, or feel free to stop by my office.

Best regards,



Dana Strong,
Interim CFO
Wrangell Medical Center

*Caring for
Southeast*



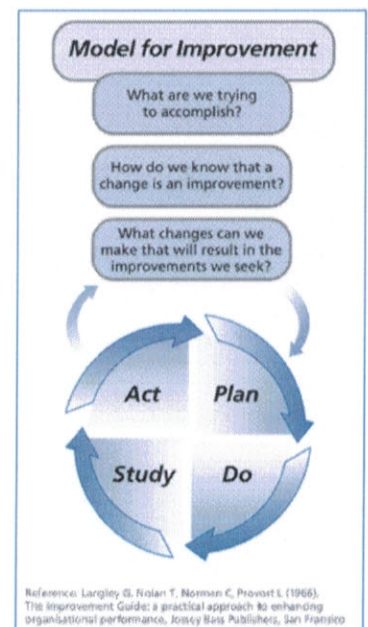
CEO Report to the Board of Directors,
Wrangell Medical Center
October 16th, 2013

Wrangell Medical Center has been very busy over the past couple of months with higher than normal patient activity at a time when we are also experiencing higher than normal interactions with financial auditors, regulatory surveyors, educators and trainers and our own internal improvement activities. Many of these are outlined in the weekly updates and as I reflect back I see a theme that centers on quality improvement so will provide some foundation for how we think about that.

Quality Improvement

Quality Improvement is not the work of individual or department, it is the responsibility everyone at WMC to be involved in this important aspect of our mission. There are many different ways we approach quality improvement. We achieve higher levels of quality through, for example, clinical education, development and use of our electronic medical record, thoughtful credentialing and peer review practices, process assessment and targeted action plans.

To continue the cycle of quality improvement we identify a need and plan an approach to correct or improve that service, product or experience. Next we do what our plan suggests, we implement our plan but that is not the end of it. Then we study what has happened, how the process is working and what the results are showing. Finally we must act to correct flaws in our plan or implementation, to address unintended consequences and to continue to improve. The diagram at right illustrates this model for improvement. It was designed years ago but continues to inform our never ending effort to provide the best possible outcomes and experience to every person we serve.



Quality Activities

Over the past month WMC has used these quality principles to formulate our Plan of Correction as follow up to our State Survey. We also participated in a nationally recognized Hospital Survey on Patient Safety Culture. WMC coordinated data collection and an initial meeting with other interested individuals and groups to begin a Community Health Needs Assessment. With guidance from Sandi Calvert, our Quality Improvement Coordinator, we are also collecting data about how our patients experience their care at WMC and we are expanding our use of our Quality Calendars, tools that leadership can use to audit regulatory compliance and various improvement projects. We've acquired new tools and techniques and we will honor our mission by using them ***"To enhance the quality of life for all we serve"***.



Weekly Update to the Governing Board

For the week of Monday, September 30th, 2013

From Marla Sanger, CEO

www.wrangellmedicalcenter.org

Wrangell Medical Center Building Project Meeting

A conference call was held 09/25 between WMC, the CBW and American Health Facilities Development (AHFD) to renew efforts to move the building project forward. Jeff Jabusch, Bob Shymanski, Steve Grode, Steve Rutland and Marla Sanger attended. The conversation centered on the following:

- AHFD's credentials, history and role in the project
- Independent review being provided by PeaceHealth
- Visual compatibility between the hospital design and the newly opened AICS clinic
- Due diligence behind existing design
- Budgeted dollars expended so far and limited potential for additional sources of funding

This team will continue to meet with next steps to include assessment of team composition, review of PeaceHealth assessment and further discussions about funding.

Update on State LTC Survey Plan of Correction

Sandi Calvert, RN, Quality Coordinator has been very busy providing follow up and support for WMC's Plan of Correction following our recent State Long Term Care survey. Sandi has developed tools to collect data and the Leadership Team is performing spot-checks to determine if improvements are being maintained. Some of the most visible changes will include new tile in the shower room and repairs and paint in the dishwashing room. A new non-jetted soaking tub is on order and should arrive in the next few weeks. To provide consistency in desired water temperature for our laundry facilities a new water heater has been installed.

WMC Governing Board

Woody Wilson, Chair

Bernie Massin, Vice Chair

Terri Henson, Secretary

Cori Robinson, Treasurer

Judy Allen

Megan Clark

Barb Conine

Marlene Messmer

Dorothy Hunt-Sweat

James Stough, CBW Liaison

Marla Sanger, Interim CEO

Ex-Officio Member

Medical Staff

Greg Salard, MD, Chief of Staff

Lynn Prysunka, MD

Laura Dooley, MD

Bob Urata, MD, Medical Director

Other Recipients

Bob Shymanski, ES Director

Sue Nelson, DON

Dana Strong, Interim CFO

Jeff Jabusch, Wrangell Interim
City/Borough Manager

Ken Tonjes, CAO, PH KM

Nancy Steiger, CEO PH NW
Network of Care

Wrangell Sentinel

WMC Continues to Struggle with Pipe Failures



Ruptured Pipes Oct 4th and 5th 2013

On Friday, October 4th a ¾ inch pipe burst at 8:20 pm in the downstairs mechanical closet. Unfortunately the thin copper piping that was used on the original building is very fragile. The water leak triggered the hospital fire alarm which in turn caused a response from the volunteer fire department.

One of the initial respondents was Bernie Massin, WMC Board Member, along with two other EMTs. Brian Smith, Sue Nelson Dana Strong and Chris Blackburn responded as well and everyone together pitched in to help Brian with the cleanup. Brian was able to fix the pipe and leak very quickly.

The following morning at 7:00 am there was another water leak by the exit door downstairs that soaked the rug. That leak was from a failed ¾ inch pipe in the visiting physician kitchenette and water leaked on a printer which was damaged. The water leaked through the wall and into the corridor. Brian had the leak fixed within three hours.

WMC has struggled with four plumbing failures in less than six weeks. These ongoing incidents underscore the need for a new building and the updated, up to code, industry standard materials that go with it.

WMC is once again very grateful to the Wrangell Volunteer Fire Department first responders for arriving quickly and offering assistance!

Upcoming Meetings

Governing Board

Every 3rd Wednesday

Oct 16th 5:30pm

Nov 20th 5:30pm

**Location:
Nolan Center**

Quality Committee

Every 4th Thursday:

Oct 24th 3:00pm

Nov 28th 3:00pm

**Location:
Hospital Library**



Weekly Update to the Governing Board

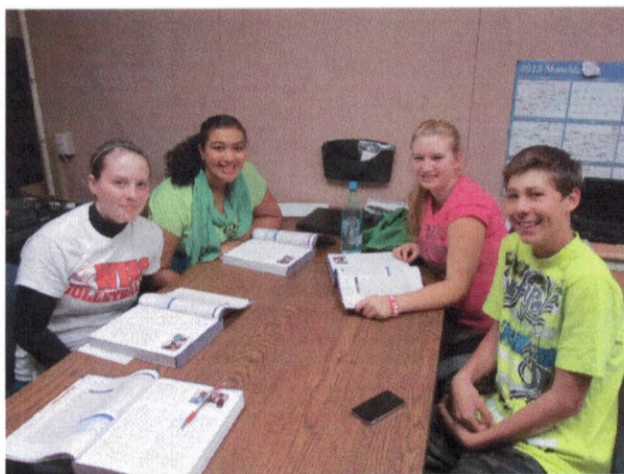
For the week of Monday, September 23rd, 2013

From Marla Sanger, CEO

www.wrangellmedicalcenter.org

Wrangell High School Students Study at WMC

Wrangell Medical Center is delighted to once again be sponsoring a class for Wrangell High School students who want to earn a Certified Nursing Assistant credential. The students attend class for one hour each morning and will continue to do so throughout the school year. The class is taught by Carin Rhodes, RN and the curriculum is that same as that taught in regular CNA training that is open to the general public.



Wrangell High School Certified Nursing Assistant Students

Left to Right: Darian Meissner, Kyla Teat,
Cassie Schilling and Corey Goicoechea

Community Health Needs Assessment

Representatives from **Health Facilities Planning and Development** met with the Healthy Wrangell Coalition on Tuesday, Sept 24th to facilitate a collaborative approach to our Community Health Needs Assessment. Stay tuned!

WMC Governing Board

Woody Wilson, Chair

Bernie Massin, Vice Chair

Terri Henson, Secretary

Cori Robinson, Treasurer

Judy Allen

Megan Clark

Barb Conine

Marlene Messmer

Dorothy Hunt-Sweat

James Stough, CBW Liaison

Marla Sanger, Interim CEO
Ex-Officio Member

Medical Staff

Greg Salard, MD, Chief of Staff

Lynn Prysunka, MD

Laura Dooley, MD

Bob Urata, MD, Medical Director

Other Recipients

Bob Shymanski, ES Director

Sue Nelson, DON

Dana Strong, Interim CFO

Jeff Jabusch, Wrangell Interim
City/Borough Manager

Ken Tonjes, CAO, PH KM

Nancy Steiger, CEO PH NW
Network of Care

Wrangell Sentinel



Weekly Update to the Governing Board

For the week of Monday, September 16th, 2013

From Marla Sanger, CEO

www.wrangellmedicalcenter.org

Response to State and Federal Long Term Surveys Completed

On Thursday, September 19th, WMC submitted its response to the Alaska State surveyors who assessed the Long Term Care Unit August 19th through the 23rd. Several WMC employees collaborated on action plans that will improve care and comply with regulations. Many elements of the plan are already implemented and we expect all improvements to be complete by October 7th. A follow up survey will take place soon.

CPSI EMR User's Conference September 17th through 20th

Bob Shymanski and Sue Nelson attended the CPSI EMR User's Conference in Mobile, Alabama where they networked with leaders from other hospitals who are using the same computer system. It also provided an opportunity for Sue and Bob to ask questions and seek solutions to software, program and process issues. Compliance with the HITECH Act and Meaningful Use will require increasing attention from hospitals now and in the future.

Hospital Survey on Patient Safety Culture

WMC is participating in the nationally recognized Hospital Survey on Patient Safety Culture (HSOPSC) through the University of Nebraska Medical Center (UNMC) at no cost to our organization. At the official close of the survey WMC had a return rate (number of surveys returned/number of surveys distributed) of **54% (28/52)**. A return rate greater than 50% indicates that survey results are likely to be representative of Wrangell Medical Center. We expect to receive results with accompanying analysis November 1, 2013.

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Weekly Update to the Governing Board

For the week of Monday, September 9th, 2013

From Marla Sanger, CEO

www.wrangellmedicalcenter.org

Focus on Quality

Quality improvement has been a strong theme over the past month going back to the assessment of our Long Term Care services conducted by State of Alaska Health Facilities Surveyors August 19th through August 23rd.

On day two of the survey we hosted a long awaited visit by Dr. Pat Quigley, an expert in preventing falls and minimizing the harm that can occur as a result. We had an excellent turn out for her presentation and she met with several individuals and groups during her stay.

Providence Health and Services in Anchorage provided an all-day training in Quality Improvement using "Lean" principles at WMC on Tuesday, September 3rd. Lean methodology reduces waste and improves processes so that employees can spend more time providing care that is effective and meaningful.



WMC team members learning how to improve patient care using "lean" quality improvement principles and techniques

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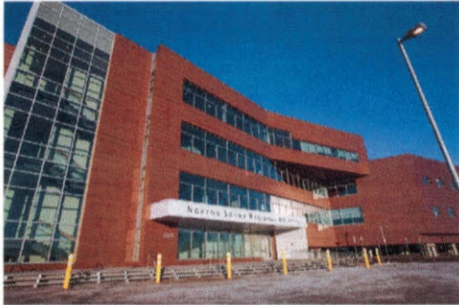
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Connecting Across the State of Alaska

Marla Sanger, CEO and Dana Strong, CFO attended the Alaska State Hospital and Nursing Home Association's Annual Meeting in Nome September 11th through the 13th. Marla is a board member for ASHNHA. A highlight of the trip was touring newly opened *Norton Sound Regional Hospital* (NSRH) in Nome, the only Alaskan hospital included in Soliant Health's 5th annual list of the ***Top 20 Beautiful Hospitals in America*** for 2013.



NSRH's interior is warm and appealing, a healing environment filled with stunning local and commissioned art unparalleled in hospitals of any size.

Norton Sound Regional Hospital

Infection Prevention and Control Plan

One of the benefits of having Federal and State Surveys is discovering ways we can bring our policies and practices up to date to improve our overall healthcare delivery. An example from this recent survey is the development of a WMC Infection Prevention and Control Plan created by Carin Rhodes, RN, WMC Infection Preventionist.

The purpose of the plan is to ensure that the organization has a functioning coordinated process to minimize the risks of endemic and epidemic Healthcare Associated Infections (HAI) in patients, residents and health care workers and to optimize use of resources through a strong preventive program.

The Infection Prevention and Control Plan is guided by regulations that come from organizations with nationally recognized authority such as the Centers for Medicare and Medicaid Services, the Centers for Disease Control and the Occupational Safety and Health Administration. A new Infection Prevention and Control Committee, which had its first meeting Wednesday, September 11th, will work with WMC's Quality Committee to monitor compliance and progress.

Upcoming Meetings

Governing Board

Every 3rd Wednesday

Sept 18th 5:30pm

Oct 16th 5:30pm

Nov 20th 5:30pm

**Location:
Nolan Center**

Quality

Every 4th Thursday:

Sept 26th 3:00pm

Oct 24th 3:00pm

**Location:
Hospital Library**

11. MEDICAL STAFF REPORT

Verbal

12. ACTION ITEMS

- a. Possible approval of recommendation to combine Wells Fargo accounts.
- b. Possible approval of change to Hospital Auxiliary bylaws.
- c. Discussion and possible approval of continuation of CEO's contract

Section 3. Dues and other payments made to the Auxiliary by members shall not be subject to refund and the members shall have no individual rights to such funds.

Section 4. Honorary Members and Life Members shall not be required to pay dues.

ARTICLE V MEETINGS OF THE AUXILIARY

Section 1. The Auxiliary membership shall meet in regular sessions at least eight (8) times each year.

Section 2. The time and place of the meetings will be determined by the President and/or Executive Board. Notice shall be given in advance of any special meeting of the Auxiliary.

Section 3. The annual meeting shall be held in September of each year for the installation of officers, receiving annual reports of the officers and for the conduct of such other business as may properly come before the membership. Notice of the annual meeting shall be mailed to all members on the records of the Auxiliary at least ten (10) days in advance of such meeting.

Section 4. A majority of the officers of the Auxiliary shall constitute a quorum at any meeting of the Auxiliary.

ARTICLE VI OFFICERS

Section 1. The officers of the Auxiliary shall be President, Vice President, Secretary and Treasurer. The Vice President shall serve in the absence of the President and shall assume the Presidency should that office become vacant.

Section 2. All officers shall be elected to serve for a term of one year and may be elected for additional terms in the same office.

Section 3. The election of officers shall be held at the annual meeting (in May). A slate of candidates shall be proposed by the nominating committee. Members in good standing may nominate candidates for office from the floor. Elections shall be held the last meeting in May.

Section 4. The newly elected officers shall be installed at the ~~first-regular~~annual meeting in ~~September~~May and assume office immediately.

Section 5. The unexpired term of any elected officer shall be filled by the Executive Board, with consideration of the recommendations of the nominating committee.

13. DISCUSSION ITEMS

a. Committee Appointments

I. Finance Committee

(Board Chair & Treasurer, +1 Board member)

II. Quality Committee

(representatives of the Board)

III. Strategic Planning Committee

14. INFORMATION ITEMS

- a. New Hospital Project update (standing agenda item).
- b. Status of WMC Board Bylaws and WMC Personnel Policy Manual

15. BOARD DEVELOPMENT

- a. Confidentiality Statement
- b. 'Navigating the Boardroom', chapters 13-16, discussion

WRANGELL MEDICAL CENTER GOVERNING BOARD CONFIDENTIALITY AGREEMENT

_____, a member of the Wrangell Medical Center Governing Board, hereby agree not to access, disclose or reproduce any confidential information outside my board duties or for any other purpose, except as specifically permitted pursuant to my board duties.

I acknowledge that I have reviewed Wrangell Medical Center's Disclosure Policy. I understand that unauthorized access, use, disclosure or reproduction of any information in violation of Wrangell Medical Center's Disclosure Policy may result removal from the WMC Governing Board. I further understand that certain unauthorized disclosure of information may be punishable by fines and penalties under Federal and State laws.

I further agree to notify Wrangell Medical Center's Privacy Officer of any violations of Wrangell Medical Center's Disclosure Policy or any use of or disclosure of confidential information not provided for by this agreement.

I HAVE READ AND FULLY UNDERSTAND THIS AGREEMENT

WMC Board Signature

Date

Privacy Officer Signature

Date

16. BOARD COMMENTS

17. EXECUTIVE SESSION

An executive session to discuss matters:

- a. The immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity (AS 44.62.310), specifically the CEO contract with PeaceHealth.
- b. Which by law, municipal charter or ordinance are required to be confidential (AS 44.62.320), specifically to consult with an attorney regarding threatening litigation.