

DPHHS Governing Body Meeting

Key Quarterly Updates for MMNHCC

May 14th, 2024 – 3:00 pm MT



DEPARTMENT OF
**PUBLIC HEALTH &
HUMAN SERVICES**



Attendees

Meeting Location: Virtual (Teams)

Member Name	Title / Role	Membership Type
Rebecca De Camara	Interim Executive Director, Medicaid and Health Services	Voting (Chair)
Jennifer Savage	Chief Administrative Officer, Healthcare Facilities Division	Voting
Dr. Douglas Harrington	Chief Medical Officer (CMO) and Interim Chief Healthcare Facilities Officer	Voting
Christy Kemp	Interim Administrator, Montana Mental Health Nursing Care Center	Voting
Meghan Peel	Interim Administrator, Behavioral Health and Developmental Disabilities Division	Voting
Chad Parker	Deputy Chief Legal Counsel, Department of Public Health and Human Services	Voting
Kim Aiken	Chief Financial Officer, Department of Public Health and Human Services	Non-Voting



Agenda

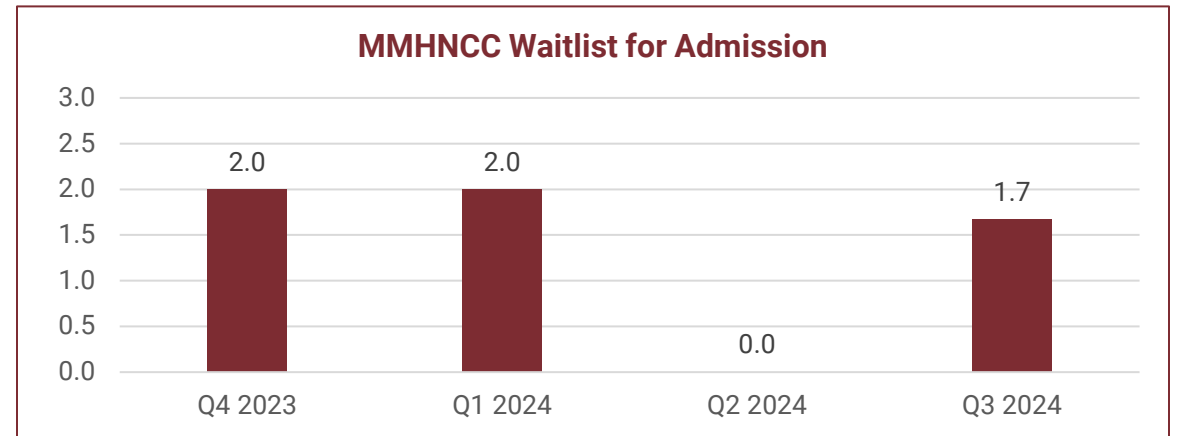
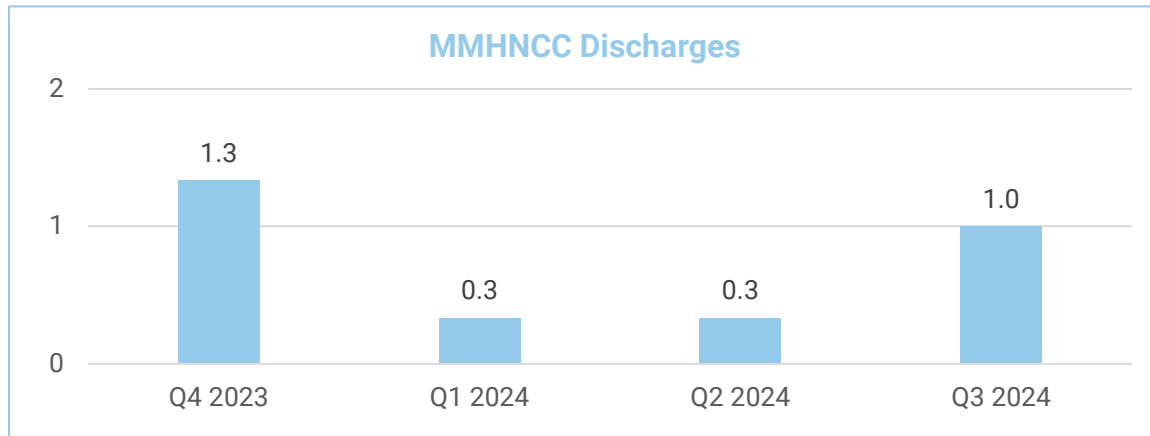
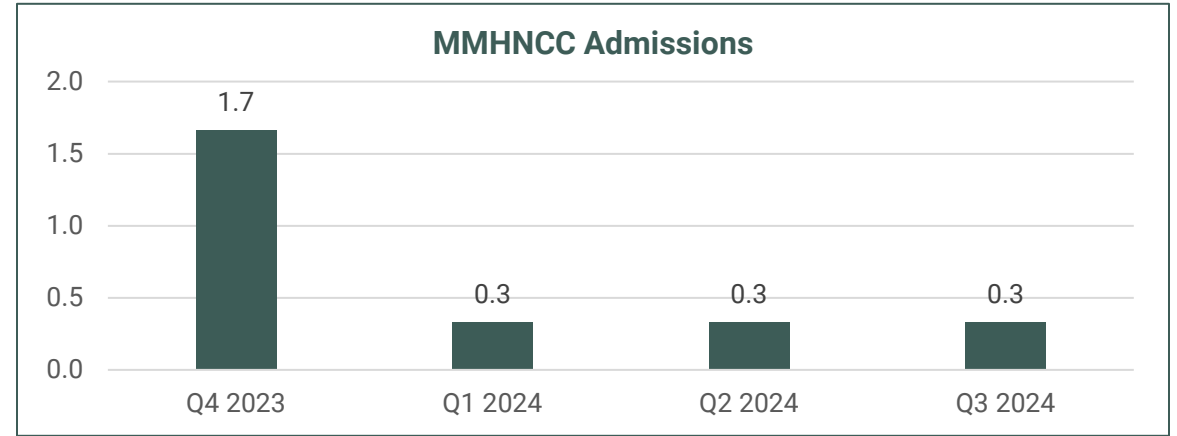
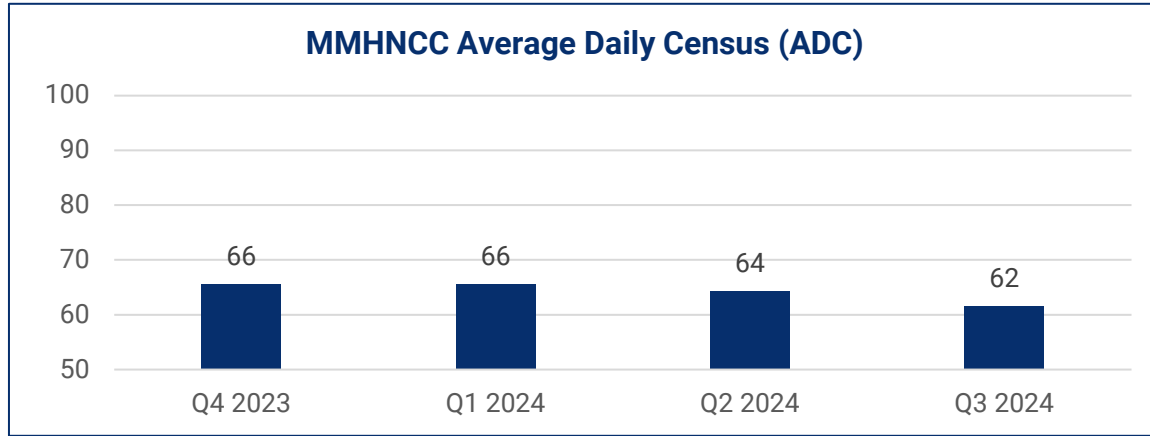
- I. Summary: Facility Update**
 - I. Data and Trends**
- II. New / Updated Medical Staff By-Laws and Policies**
- III. Key Quality Measures and Operating Metrics**
- IV. Human Resources (HR): Staffing / Hiring / Turnover**
- V. Financial / Budget Update**
 - I. Operating Budget**
 - II. Capital Expenditures**
 - III. Contracted Services**
- VI. Special / Noteworthy Events**
- VII. Appendix**



Summary: Facility Update



Summary: Facility Update



Note: Data reflects *monthly averages per quarter*, and quarter periods are aligned with the State of Montana fiscal year (SFY) calendar.

New / Updated Privileging, Protocols, and Tools / Forms



Amendments to Medical Staff By-Laws

Review of amendments to medical staff by-laws

#	By-Law Topic	Description of Change	Approved Date
1	<i>N/A - No updates</i>		
2			
3			
4			

MMHNCC Policy (Protocol) Amendments

Review of new MMHNCC policies or updates to policies / protocols

#	MMHNCC Policy/Protocol Name / ID	Policy Topic	Description of Change	Approved Date
1	<i>N/A – No new or amended protocols for GB approval</i>			
2				
3				



Medical Staff Privileging

Review of Medical Exec Committee updates / changes to medical staff privileges

#	Name	Initial Appointment or Re-Appointment or Change to Privileges	Rationale	Approval Date
1	Dr. Augusto Amaral	Changes to Privileges	Departure / Attrition	TBD
2	Dr. Michael Sura	Initial Appointment	New Hire / Onboard	TBD



Other: Tools and Forms Updates

The following table outlines key tools or forms that were created to enhance or streamline operations at the facility, supporting improved workflows and efficiencies for staff and ensuring the delivery of high-quality patient care / services.

#	Document	Description / Purpose
1	Behavior Tracking Sheet	<ul style="list-style-type: none">• Updates to specific types of behaviors matching to the Minimum Data Set (MDS) requirements
2	Resident Transfer Checklist	<ul style="list-style-type: none">• Newly-created document to assist staff in what to do / send when a resident goes to a hospital emergency room (ER)
3	Abuse / Incident Reporting Form	<ul style="list-style-type: none">• Streamlined, simplified report to clarify first-hand reporting and information; minimizes confusion

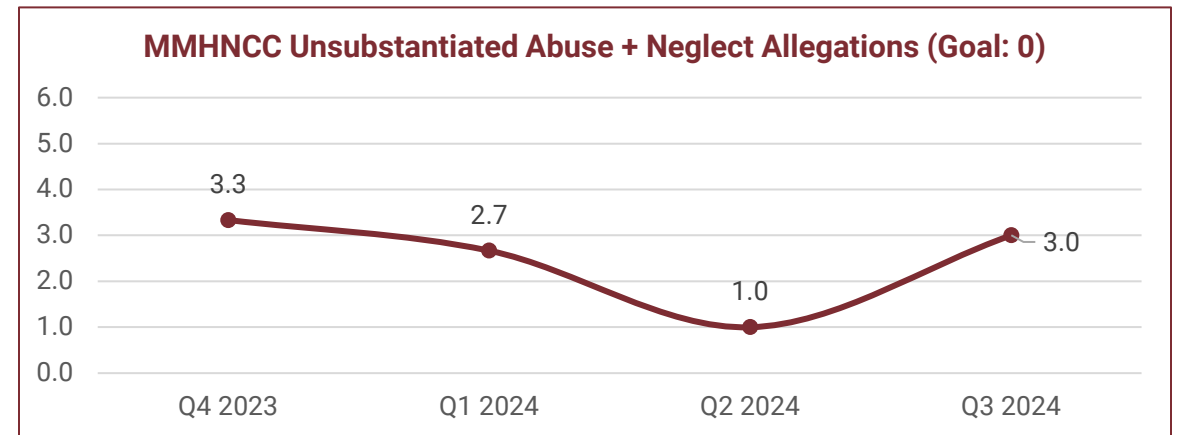
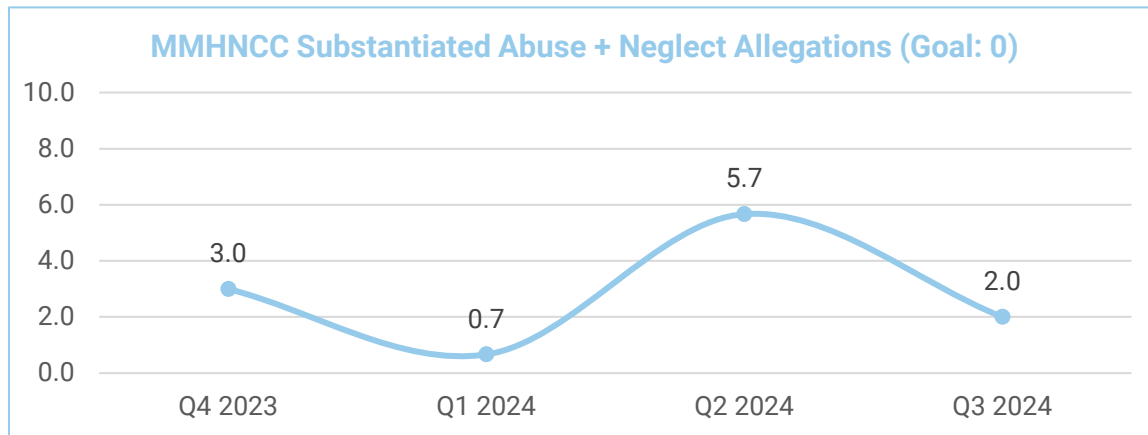
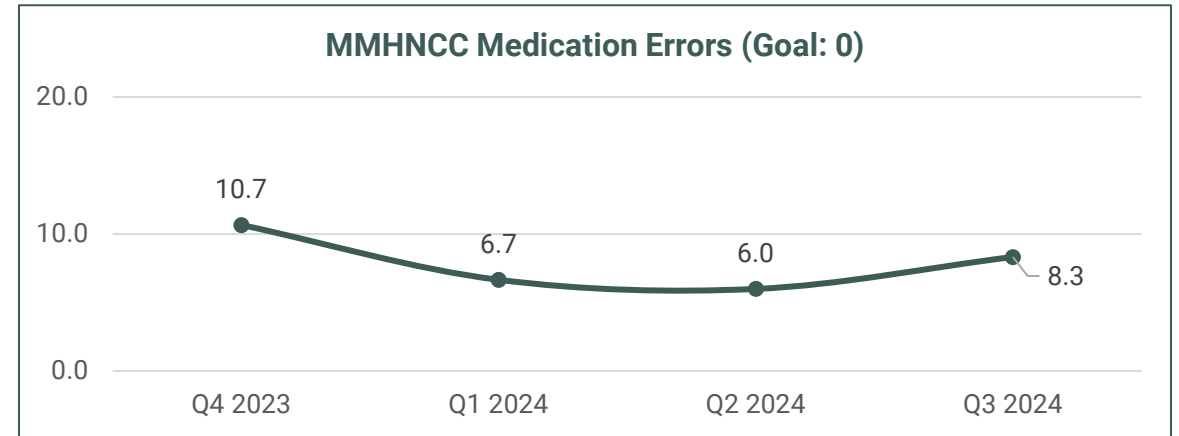
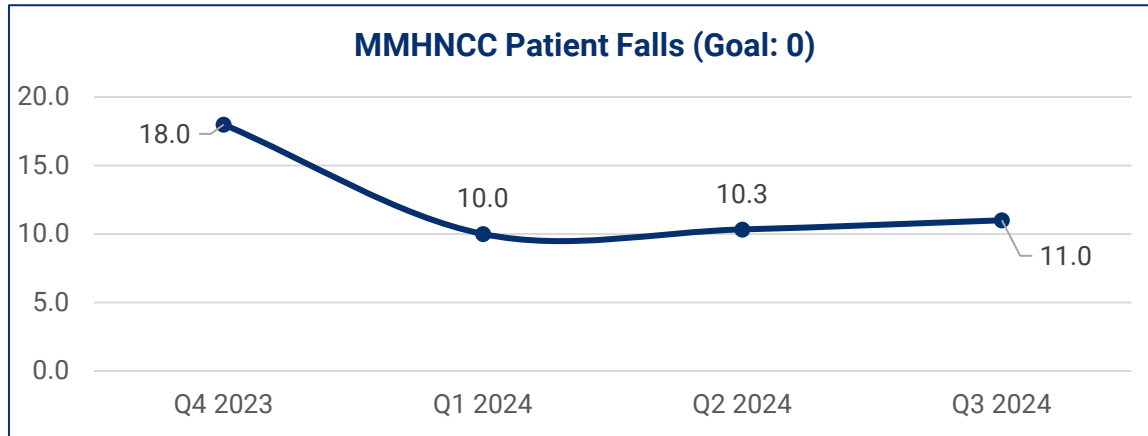


Key Quality Measures and Operating Metrics



Key Quality Measures & Metrics

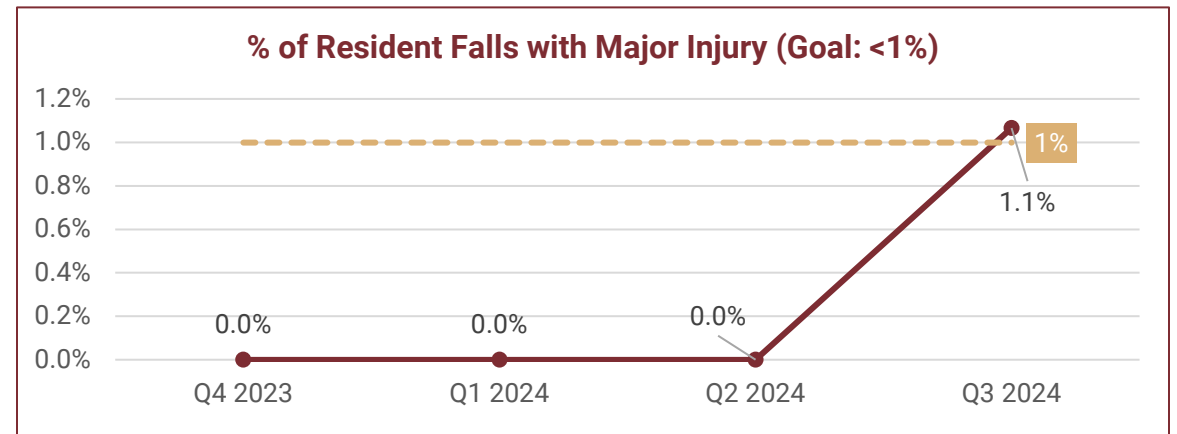
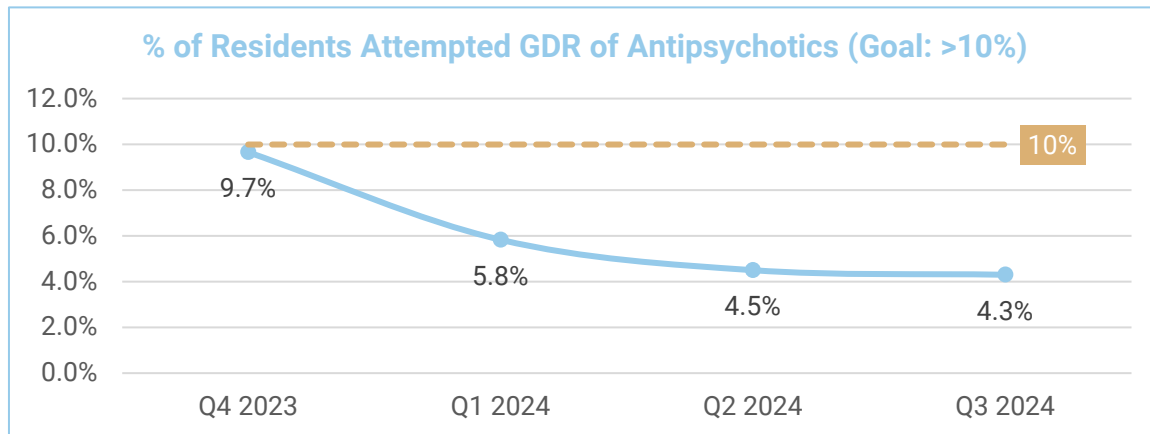
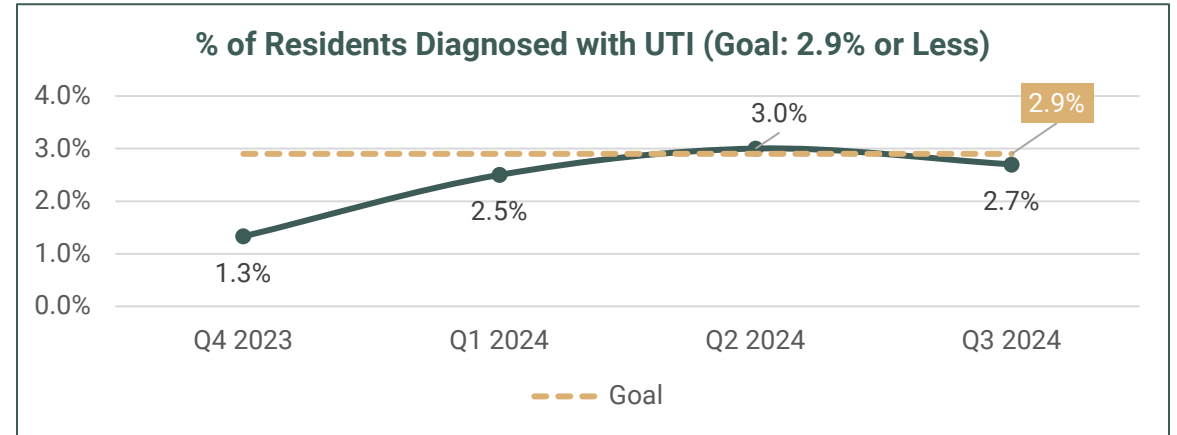
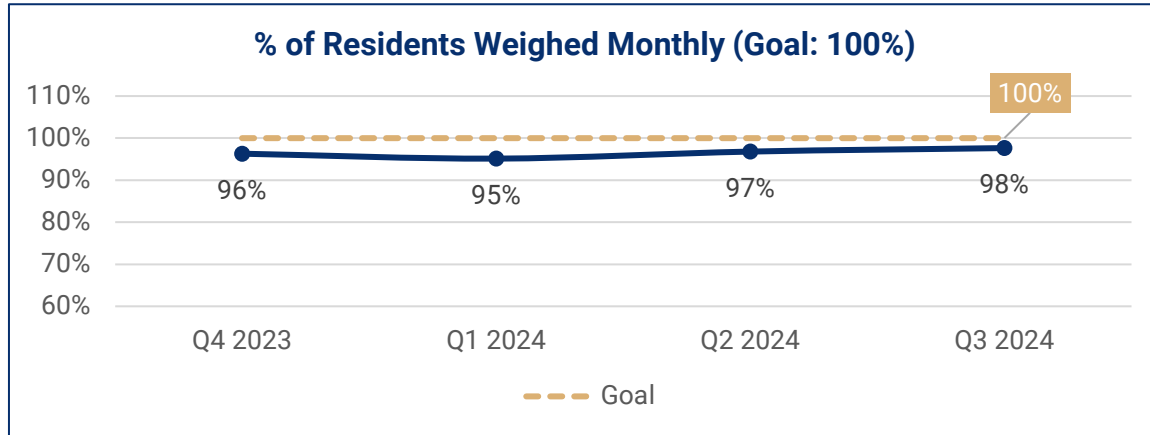
- Patient Safety



Note: Data reflects **monthly averages per quarter**, and quarter periods are aligned with the State of Montana fiscal year (SFY) calendar.

Key Quality Measures & Metrics

- Quality Indicators

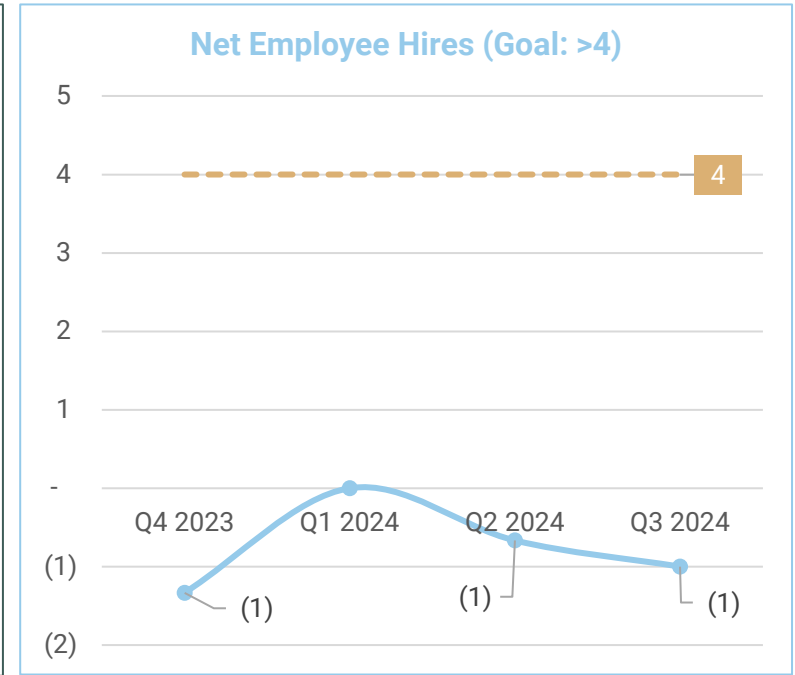
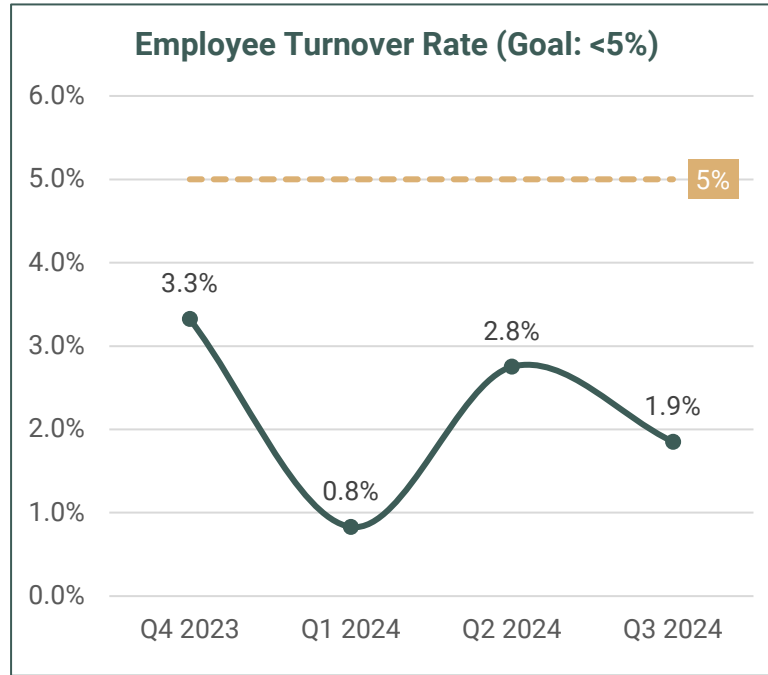
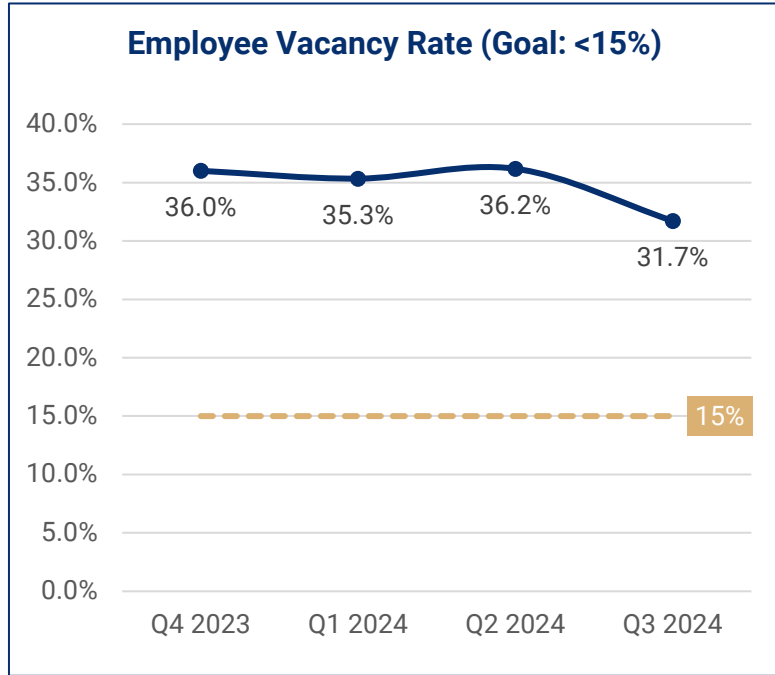


Note: Data reflects **monthly averages per quarter**, and quarter periods are aligned with the State of Montana fiscal year (SFY) calendar.

Human Resources (HR) Update



HR Update & Metrics

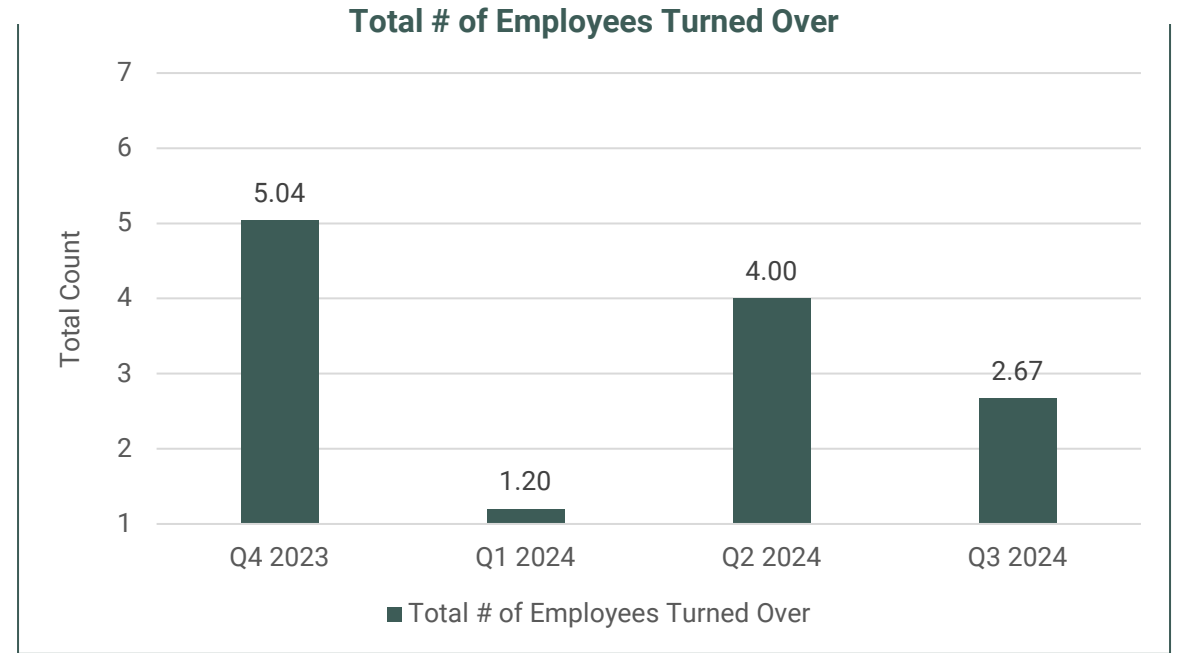
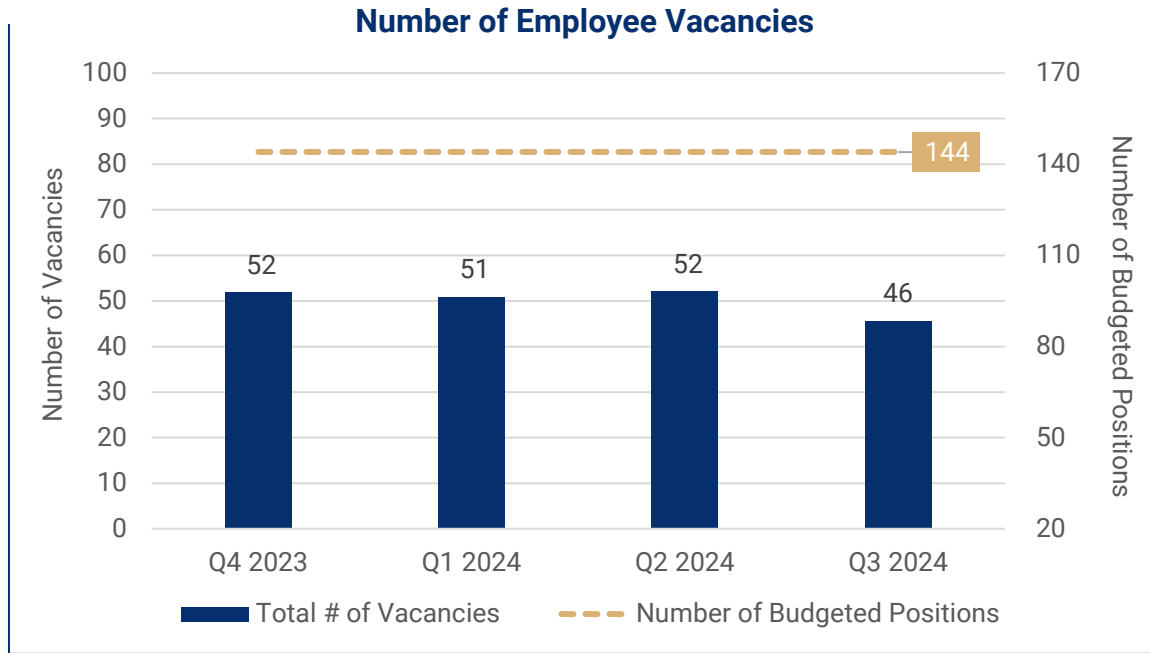


Key Takeaways / Drivers / Talking Points

- Difficulty competing in the local market given compensation / benefits offered by other organizations (e.g., sign-on bonuses)
- Location of facility, availability of housing

Note: Data reflects **monthly averages per quarter**, and quarter periods are aligned with the State of Montana fiscal year (SFY) calendar.

HR Update & Metrics (Cont.)

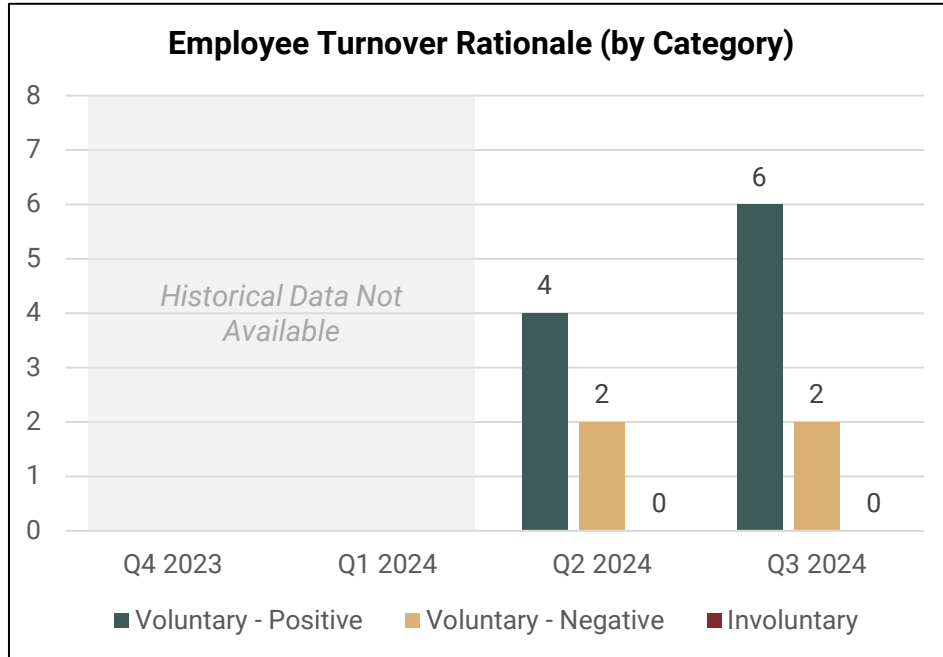


Key Takeaways / Drivers / Talking Points

- Difficulty competing in the local market given compensation / benefits offered by other organizations (e.g., sign-on bonuses)
- Career changes / pivots resulting in attrition

Note: Data reflects *monthly averages per quarter*, and quarter periods are aligned with the State of Montana fiscal year (SFY) calendar.

HR Update & Metrics (Cont.)



Category	OHR Action Reason	Definition
Voluntary (+Reason)	Career Choice	Employee quit the position for another career opportunity
	Relocation	Due to a change in location, the employee quit the position
	Family Reasons	Family circumstances caused employee to quit the position
	Retirement	Employee retired from the workforce
Voluntary (-Reason)	Leadership	Due to the leadership team, the employee quit
	Work Conditions	Due to the work environment / conditions, the employee quit
	Job Abandonment	Employee stopped arriving to work (i.e., no prior notice or other explanation received)
Involuntary	For Cause	Employee was involuntarily terminated from the position
	Probationary Period	Employee is on probation for a violation

Key Takeaways / Drivers / Talking Points

- Difficulty competing in the local market given compensation / benefits offered by other organizations (e.g., sign-on bonuses)
- Career changes / pivots resulting in attrition

Note: Data reflects **total number of staff turnover (with category) by quarter**, and quarter periods are aligned with the State of Montana fiscal year (FY) calendar.

Financial / Budget Update



Facility Operating Budget

SFY24 Budget	Expended (7/1/23 – 3/31/2024)	Projected Expenditures (as of 3/31/24)
\$14,607,954	\$9,738,444	\$15,426,125
General Fund Deficit Projection: (\$818,171)		



Facility Capital Expenditures (CY2024 – CY2026)

Planned CapEx / Project	Status	Value (\$)	Source of Funding <i>(if value >\$600k)</i>	2024				2025				2026				
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Supplemental Roof Replacement	• Awarded; Pending Weather	\$1,500,000	• HB5 (2023 Session)				●	●	●							
Heated Storage Unit	• A&E Preparing Bid	\$360,000	• HB5 (2023 Session)				●	●								
Key Card Entry System	• A&E Preparing Bid	\$125,000	• HB5 (2023 Session)				●	●								

● = Planned Expense Timing Estimation

Note: Quarter periods are aligned with the State of Montana fiscal year (SFY) calendar.



Contracted Services

#	Vendor Name	Purpose(s) / Service(s)	Effective Date	Term End Date
1	Peggy Albee	Counselor	July 1, 2021	June 30, 2023
2	Central Montana Medical Pharmacy Staff	Pharmacy Staff	January 1, 2022	June 30, 2023
3	Frontier Psychiatry Master	Psychiatric Services	August 1, 2023	July 31, 2024
4	FICO	HVAC Maintenance	September 1, 2023	August 31, 2024
5	Kathryn Baldwin ¹	CNA Training Services	May 1, 2024	April 30, 2025
6	Central Montana Medical Facilities	Medical Director and Primary Care	July 1, 2022	June 30, 2025

Note: (1) Currently out for signatures / approval.

Special / Noteworthy Events



Recreation / Activities

In addition to the regular recreation and enrichment offerings, residents also had the opportunity to participate in a variety of activities—including “armchair” travel, attending / watching sporting events, and other themed events / outings.



January 2024

- Conducted Several “Armchair Travel” Sessions
- Conducted Milkshake Medley (Popular Request)
- Musical Theme Week “Rock Through the Ages,” Featuring Different Decades of Music



February 2024

- Conducted *Jeopardy!* Game
- Conducted / Held Super Bowl Party
- Held Bowling and Basketball Game Outings
- Attended the Movie Theatre
- Conducted Sensory Cooking



March 2024

- Attended Book Station (Resident Request)
- Celebrated St. Patrick’s Day with Resident Party
- Celebrated Easter with Easter Cake Walk
- Began Seeding for the Garden
- Month-Long Theme: Conducted Various Educational Math and Science Activities, e.g., Museum Outing, March “Mathness” Movie Marathon, STEM Model Building, Star Trek Movies, and Other Interactive Videos



Other Programs, Initiatives, or Occurrences



Resident Case Management Survey

- Issuance of Resident Survey for Case Management Support with 44% Participation (i.e., 27 of 61 Residents); Slight Decrease in Participation (i.e., 46% in Prior Survey)
- 82% Overall Satisfaction with Case Management Support, Compared to 81% in Prior Survey
- Areas Requiring Improvement: Discussion of Resident Rights (56% Agreement); Resident Participation in Case Plan Meeting[s] (58% Agreement)
- Considerations / Context: 48% of Residents with Diagnosis of Dementia or Cognitive Impairment as Primary or Secondary Diagnosis to Mental Illness Diagnosis



Pipe Burst in Firefly Wing (F-Wing)

- In Mid-January, Sprinkler Pipe Burst in Firefly Wing (F-Wing) Due to Cold Temperatures (i.e., -35°F), Requiring Patient Relocation and Repairs
- Water Spread from East Wing Exit to Lounge Area
- Piping Repaired by 406 Fire Protections and System Tested
- Submitted Bid for Drywall Repairs (and Accepted by State); Drywall and Painting Completed by End of February
- ServePro Cleaned Affected Wing and Areas (i.e., Common Area Floor, Walls, Toilet Areas of Rooms); Housekeeping Completed Additional Cleaning
- Patients Relocated in Early April '24



Emergency Training for Night Shift

- All Night Shifts (10pm to 6am) Participated in Emergency Training; All Wings Participated
- Training Conducted on Use of Pull Stations with Fire Key, Alerting Emergency Responders, Accessing and Use of Fire Extinguishers, and to Ensure All Staff in Possession of Fire Key



Maintenance / Improvement Work

- Quarterly Air Filter Change-Out
- Quarterly Sprinklers Inspection and Flushing
- Annual Emergency Generator Testing
- Annual Fuel Analysis for Generator
- Monthly Inspection on Cooking Hood Fire Suppression System
- Semi-Annual Cleaning of Kitchen Exhaust System



Appendix: Supporting Information



Facility Quality Rating Improvement



Recently, the Centers for Medicare and Medicaid Services (CMS) awarded the MMHNCC with three (3) stars based on overall performance across three categories: health inspections, staffing, and quality measures. A breakdown across each category is noted below. The rating is an improvement from the prior year, where the facility was only awarded a single star (on a five-star scale).



Overall Rating

Average

The overall rating is based on a nursing home's performance on three (3) sources: health inspections, staffing, and quality measures.



Health Inspections

Below Average

The health inspection star rating is based on each nursing home's current health inspection and two (2) prior inspections, as well as findings from the most recent three (3) years of complaint inspections and three (3) years of infection control inspections.



Staffing

Above Average

Higher staffing levels and lower staffing turnover in a nursing home may mean higher quality of care for residents. Hours worked by different types of staff are reported by nursing homes and are used to calculate a ratio of staffing hours per resident per day and the staffing turnover rate. Hours per resident per day describe the average amount of time staff are available to spend with each resident each day. Staff turnover describes how many staff stop working at the facility within a given year.



Quality Measures

Much Above Average

Medicare assigns the star rating based on data from a select set of clinical data measures. More stars means better performance in certain areas of care. Areas include short stay measures; long stay quality measures; and flu and pneumonia prevention measures—with subcategories underneath each "parent" section.

Source: [Medicare.gov Care Compare](https://www.medicare.gov/care-compare) – Montana Mental Health Nursing Care Center



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