Attendees

Meeting Location: *Virtual (Teams)*

Member Name	Title	Membership Type
Mike Randol	Executive Director, Medicaid & Health Services	Chair, Voting
Jennifer Savage	Chief Operating Officer	Voting
Dr. Doug Harrington	State Medical Officer	Voting
Christy Kemp	Interim Administrator, MMHNCC	Voting
Rebecca De Camara	Administrator, Behavioral Health & Developmental Disabilities Division	Voting
Chad Parker	Deputy Chief Legal Counsel	Voting
Kim Aiken	Chief Financial Officer	Non-Voting

DEPARTMENT OF **PUBLIC HEALTH & HUMAN SERVICES**

Agenda

I. **Summary: Facility Update**

    I. **Data & Trends**

II. **New / Updated Medical Staff By-Laws & Policies**

    I. **Approved Changes to Medical Staff Job Requirements / Credentialing**

III. **Key Quality Measures & Metrics**

IV. **HR: Staffing / Hiring / Turnover**

V. **Financial / Budget Update**

    I. **Operating Budget**

    II. **Capital Expenditures**

    III. **Contracted Services**

VI. **Special Events**

DEPARTMENT OF
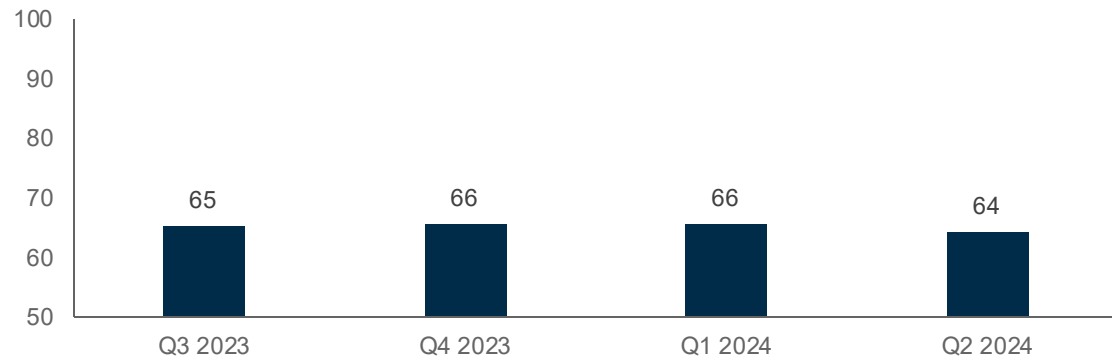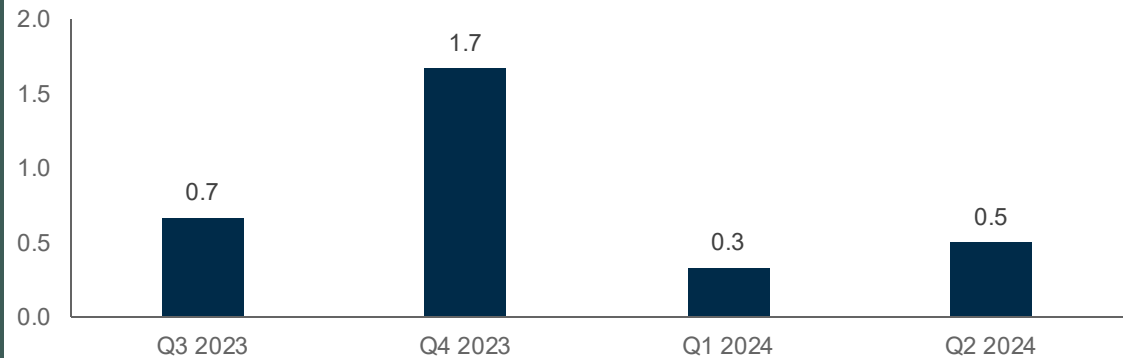**PUBLIC HEALTH &
HUMAN SERVICES**

Summary: Facility Update

Summary: Facility Update

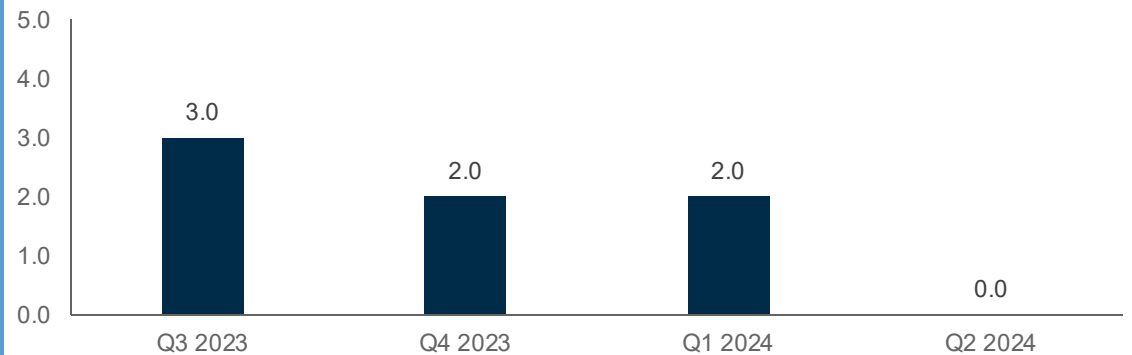## Average Daily Census – Monthly Average per SFY Quarter

	Q3 2023	Q4 2023	Q1 2024	Q2 2024
Value	65	66	66	64

Admissions – Monthly Average per SFY Quarter

	Q3 2023	Q4 2023	Q1 2024	Q2 2024
Value	0.7	1.7	0.3	0.5

Discharges – Monthly Average per SFY Quarter

	Q3 2023	Q4 2023	Q1 2024	Q2 2024
Value	0.3	1.3	0.3	0.3
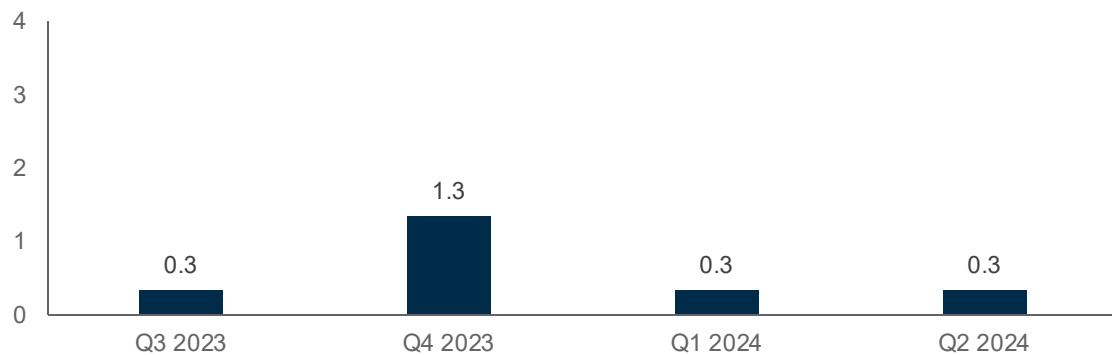
Waitlist for Admission – Monthly Average per SFY Quarter

	Q3 2023	Q4 2023	Q1 2024	Q2 2024
Value	3.0	2.0	2.0	0.0

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

Note: Data reflects monthly averages per quarter.

Quarter Period Aligned with MT State FY Calendar

Updates to Medical Staff By-Laws / Policies

Amendments to Medical Staff By-Laws

Review of amendments to medical staff by-laws

#	By-Law Topic	Description of Change	Approved Date
1	No updates		
2			
3			
4			

MMHNCC Policy Amendments

Review of new MMHNCC policies or updates to policies

#	MMHNCC Policy Name / ID	Policy Topic	Description of Change	Approved Date
1	Patient Care Related Electrical Equipment	Annual electrical testing of patient-related equipment	Added use of a Biomedical Safety Analyzer	12/15/2023
2	CPI/ 0580	Training	New policy for new CPI program	11/02/23
3	Courtyard Protocol/0559	Supervision of courtyard use	Included safety temperature for use of courtyard	01/25/2024
4	Resident Personal Belongings/ 1136	Safeguarding resident belongings	Added guidance for when the facility recognizes it will have difficulty safeguarding residents' belongings.	01/11/2024
5	Grievances/ 1105	Handling resident complaints	Clarified process in updating the form used to document the response	01/26/2024
6	Behavioral Tracking/ 1133	Recognition, documentation and response	Updated to capture new MDS requirements	01/15/2024
7	Feeding and Aspiration/ 0581	Recognition, assessment, response to aspiration risk	Update to include interventions and training	12/12/23
8	Denture Care and Replacement/ 0548	Safeguarding and replacing resident dentures	Updated to reflect facility responsibility and timeframe of replacements of missing/lost items	12/12/23
9	Oral Care/ 0572	Care of resident dentures	Updated denture care process and storage	12/12/23
10	Care Planning/ 0529	Creation and revision of resident care plans	Updated to include what needs updated and when	12/19/23

MMHNCC Policy Amendments

Review of new MMHNCC policies or updates to policies

#	MMHNCC Policy Name / ID	Policy Topic	Description of Change	Approved Date
11	Immunization Policy/ 0603	Immunizations offered to residents	New policy with information from CDC	1/11/24
12	Respiratory Season/ 0619	Prevention of and controlling exposure to respiratory viruses	New policy with CMS and CDC language	10/04/24

Medical Staff Privileging

Review of Medical Exec Committee updates / changes to medical staff privileges
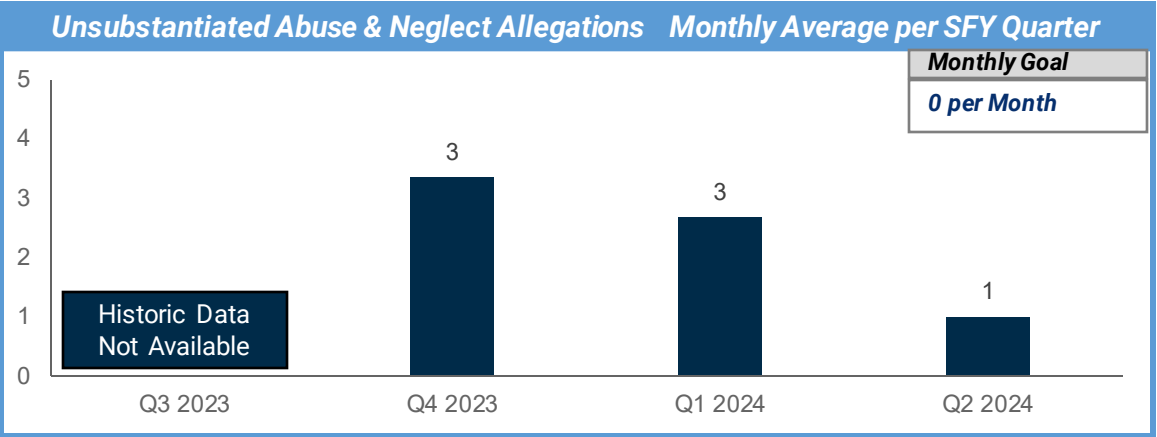
#	Name	Initial Appointment or Re-Appointment or Change to Privileges	Rationale	Medical Exec Committee Approval Date
1	No updates			
2				
3				
4				
5				

Key Quality Measures & Operating Metrics

Key Quality Measures & Metrics

- ## Patient Safety

Patient Falls – Monthly Average per SFY Quarter

Monthly Goal: 0 per Month

Quarter	Value
Q3 2023	Historic Data Not Available
Q4 2023	18
Q1 2024	10
Q2 2024	10

Medication Errors - Monthly Average per SFY Quarter

Monthly Goal: 0 per Month

Quarter	Value
Q3 2023	Historic Data Not Available
Q4 2023	16
Q1 2024	7
Q2 2024	9

Substantiated Abuse & Neglect Allegations - Monthly Average per SFY Quarter

Monthly Goal: 0 per Month

Quarter	Value
Q3 2023	Historic Data Not Available
Q4 2023	3
Q1 2024	1
Q2 2024	6

Unsubstantiated Abuse & Neglect Allegations Monthly Average per SFY Quarter

Monthly Goal: 0 per Month

Quarter	Value
Q3 2023	Historic Data Not Available
Q4 2023	3
Q1 2024	3
Q2 2024	1

Notes: *Due to improved reporting requirements and redefined methodologies, the metrics above for SFY24 Q2 exhibit increased accuracy and completeness compared to historic data. Data reflects monthly average for each quarter. Goals reflect monthly goals.*

Substantiated Abuse & Neglect indicates formal allegation submitted by patient / representative / other person that was investigated by MMHNCC Abuse & Neglect Committee (Case Managers, Director of Support Services, Facility Administrator, Nurse Supervisor, Director of Nursing, Quality Improvement Coordinator and Quality Manager) and determined based on MMHNCC Policy 1104 for Abuse, Misappropriations, and/or Neglect of Residents

Quarter Period Aligned with MT State FY Calendar

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES
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Key Quality Measures & Metrics

- ## Quality Indicators
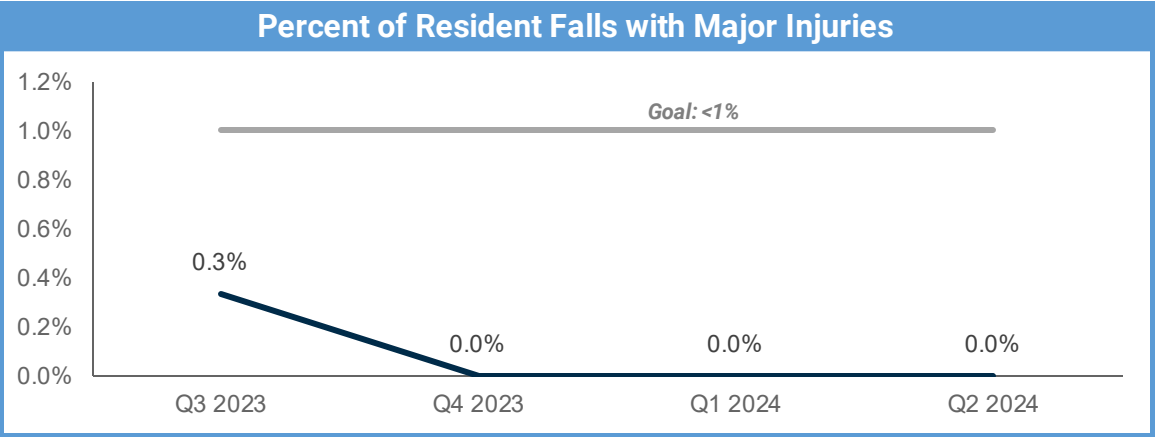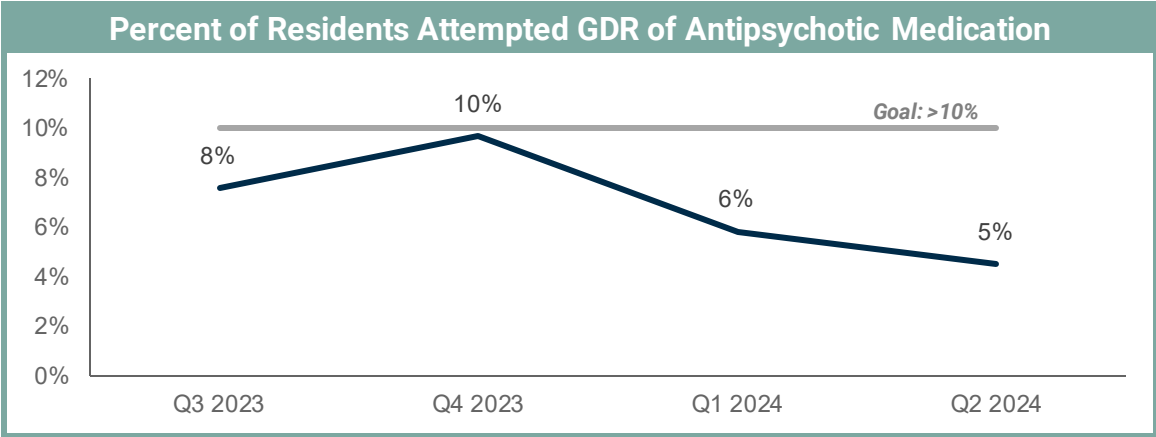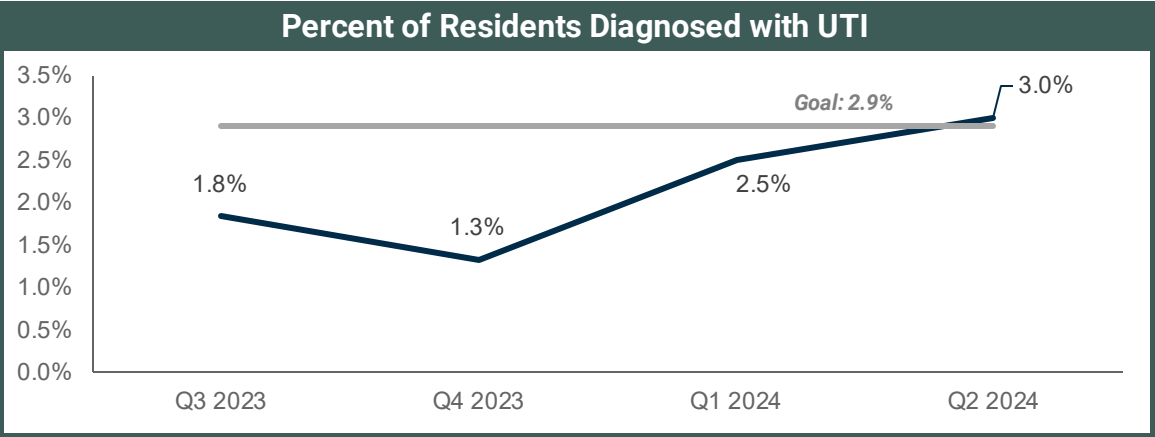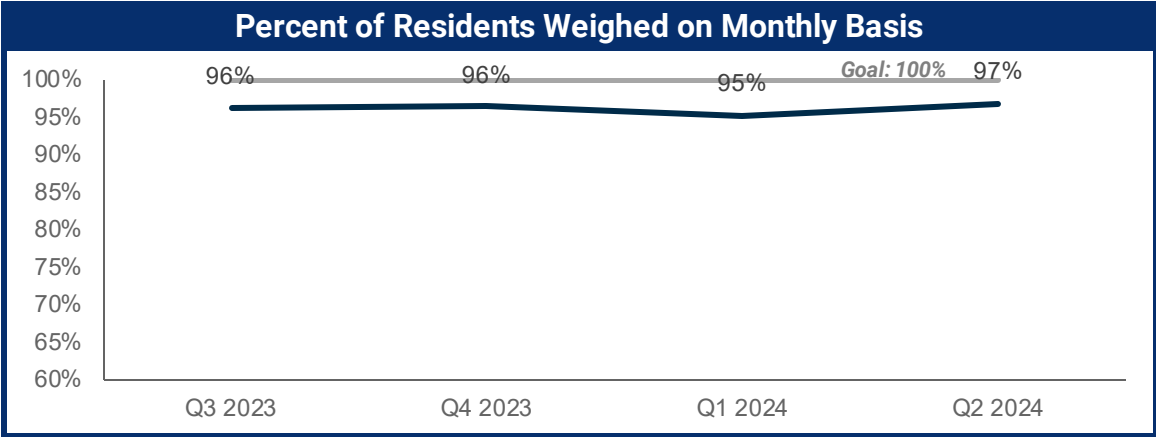
Percent of Residents Weighed on Monthly Basis

Goal: 100%

- Q3 2023: 96%
- Q4 2023: 96%
- Q1 2024: 95%
- Q2 2024: 97%

Percent of Residents Diagnosed with UTI

Goal: 2.9%

- Q3 2023: 1.8%
- Q4 2023: 1.3%
- Q1 2024: 2.5%
- Q2 2024: 3.0%

Percent of Residents Attempted GDR of Antipsychotic Medication

Goal: >10%

- Q3 2023: 8%
- Q4 2023: 10%
- Q1 2024: 6%
- Q2 2024: 5%

Percent of Resident Falls with Major Injuries

Goal: <1%

- Q3 2023: 0.3%
- Q4 2023: 0.0%
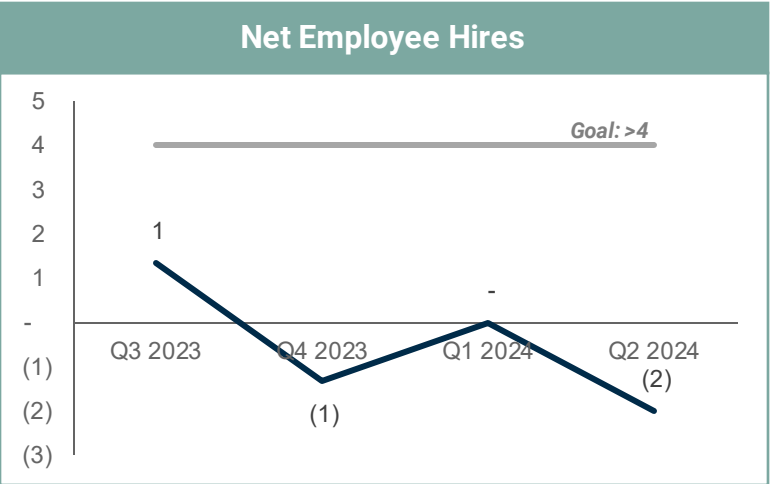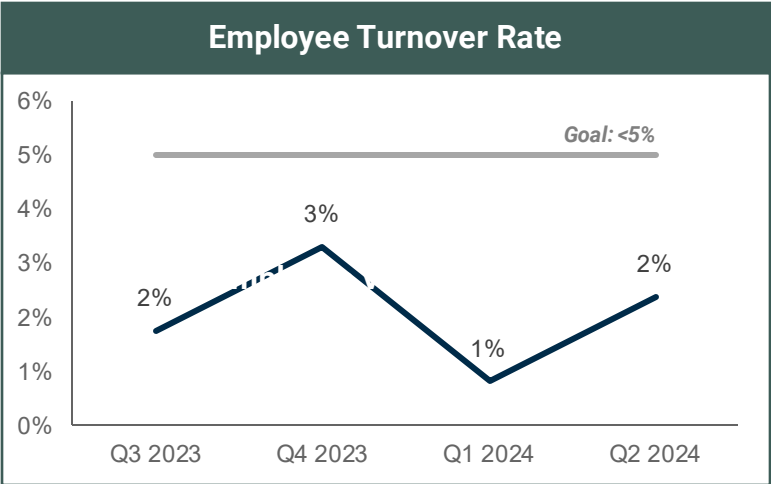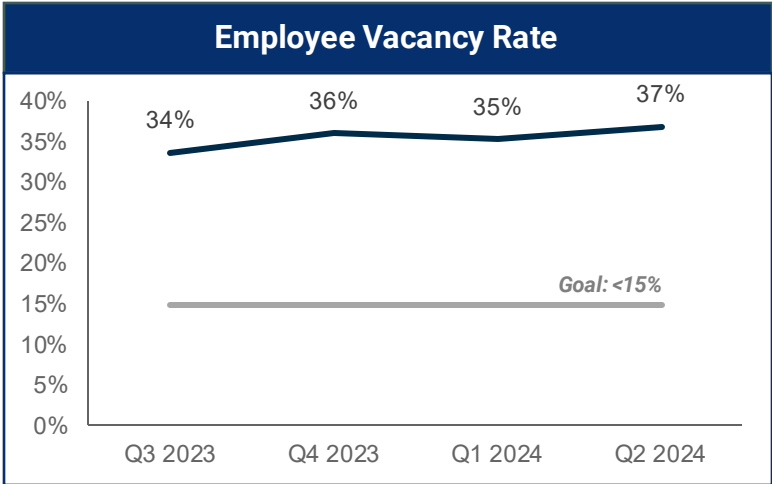- Q1 2024: 0.0%
- Q2 2024: 0.0%

Notes: *Due to improved reporting requirements and redefined methodologies, the metrics above for SFY24 Q2 exhibit increased accuracy and completeness compared to historic data. Data reflects monthly average for each quarter. Goals reflect monthly goals.*

DEPARTMENT OF
**PUBLIC HEALTH &
HUMAN SERVICES**

Quarter Period Aligned with MT State FY Calendar

Human Resources Update

HR Update & Metrics

Employee Vacancy Rate

- Q3 2023: 34%
- Q4 2023: 36%
- Q1 2024: 35%
- Q2 2024: 37%
- Goal: <15%

Employee Turnover Rate

- Q3 2023: 2%
- Q4 2023: 3%
- Q1 2024: 1%
- Q2 2024: 2%
- Goal: <5%

Net Employee Hires

- Q3 2023: 1
- Q4 2023: (1)
- Q1 2024: -
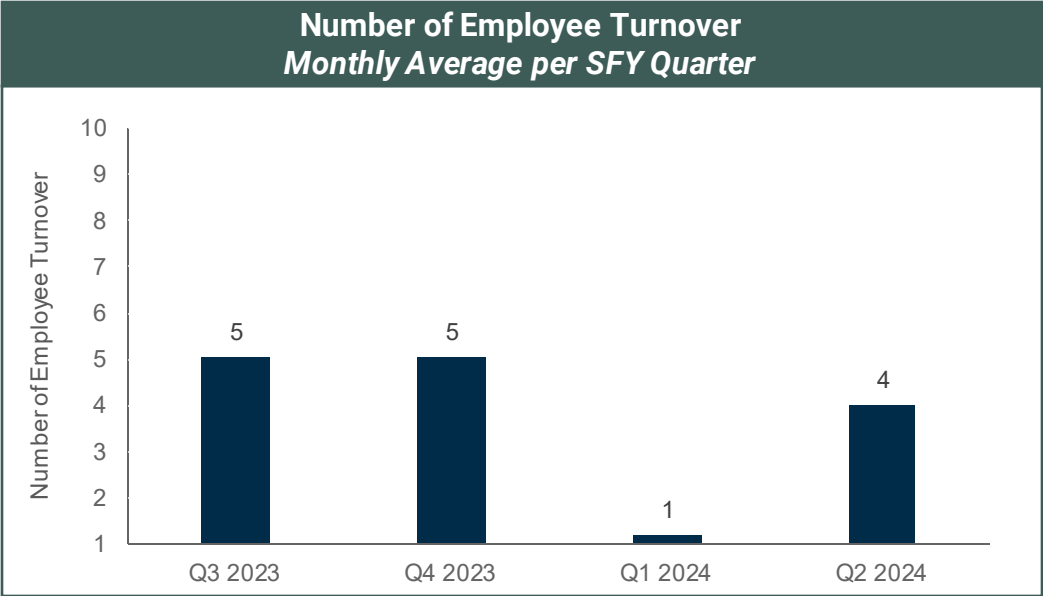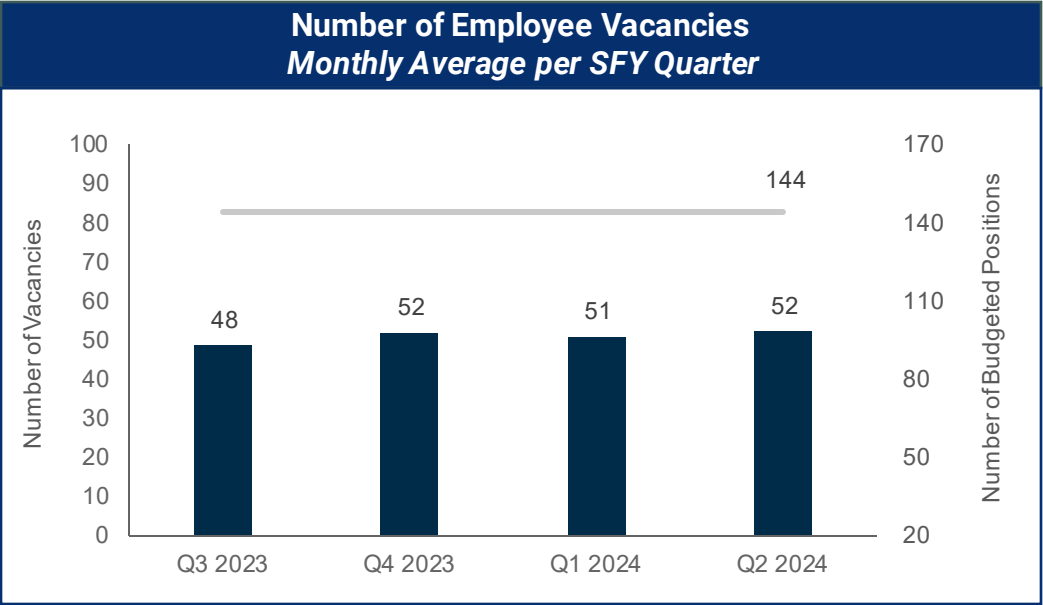- Q2 2024: (2)
- Goal: >4

Key Takeaways

- Several internal transfers have changed the percentage a little without resulting in a decreased vacancy rate.

- Otherwise, those leaving work have left for personal reasons such as retirement or family relocating.

- Several key position openings have failed to produce qualified candidates (BOM, ADON, Mental Health Program Coordinator)

- C.N.A. applicants have been infrequent.

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

HR Update & Metrics

Number of Employee Vacancies
Monthly Average per SFY Quarter

Number of Employee Turnover
Monthly Average per SFY Quarter

Key Takeaways

- The highest percentage of vacancies remains C.N.A. and nurse positions

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

Note: Data reflects monthly average for each quarter. Goals reflect monthly goals.

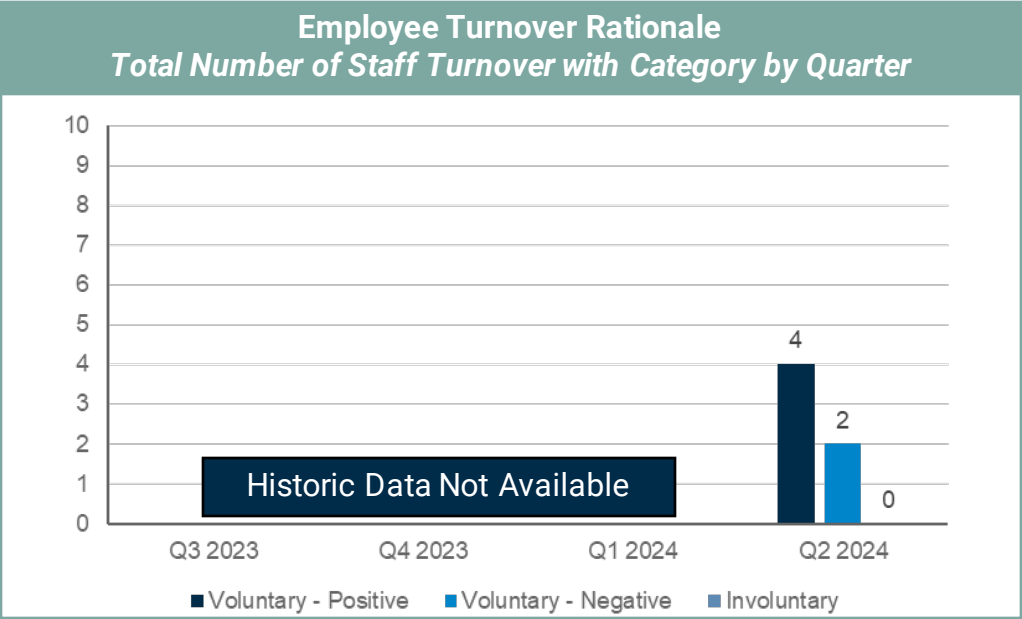*Quarter Period Aligned with MT State FY Calendar*

HR Update & Metrics

Employee Turnover Rationale
Total Number of Staff Turnover with Category by Quarter

Historic Data Not Available

Chart values — Q2 2024: Voluntary - Positive = 4, Voluntary - Negative = 2, Involuntary = 0

Legend: ■ Voluntary - Positive ■ Voluntary - Negative ■ Involuntary

Category	OHR Action Reason	Definition
Voluntary – Positive 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 – Negative 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 - no prior notice or other explanation has been received by OHR
Involuntary	For Cause	Employee was involuntarily terminated from the position
	Probationary Period	Employee is on probation for a violation

Key Takeaways

With the implementation of the hiring incentive and retention bonus, the desire is to see fewer resignations. We will continue to track this trend in the coming quarters.

DEPARTMENT OF
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Finance & Budget Update

Operating Budget

Financial Position Q2 SFY24	SFY24 Budget	Expended 7/1–12/31/2023	Projected Expenditures As of 12/31/23
MT Mental Health Nursing Care Center	$ 14,607,954	$ 6,047,758	$ 15,051,259

Facility Position:
- General Fund Deficit is projected to be ($443,305)

Capital Expenditures (MMHNCC)

- CY2024 – CY2026

Planned Capital Expenditures	Description	Value ($)	Source of Funding (if value >$600k)	2024				2025				2026			
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Capex. #1	Master Mixing Valve	$2249.60		▓											
Capex. #2	Towel Warmer	$1,189.90		▓											
Capex. #3	Mechanical Lifts (2)	$7000			▓										
Capex. #4	Electrical Testing Unit	$1698.00			▓										
Capex. #5	Recliners	$3580.96			▓										
Capex. #6	Ice Machine	$5634.00			▓										
Capex. #7	IT Equipment Protection	TBD						▓							

▓ = Planned Expense Timing

Quarter Timing Aligned with MT State FY Calendar

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Contracted Services

#	Contracted Vendor	Service(s) Provided	Contract Effective Date	Contract Term Date
1	Cardinal Health	Prescriptions	MMCAP	MMCAP
2	Central Montana Medical Center Pharmacy	Pharmacy Staff	7/1/2022	6/30/2024
3	Kathryn Baldwin	CNA Trainer	2/1/2024	1/31/2025
4	Frontier Psychiatry	Phyciatric Services MMH, IBC	8/1/2023	7/31/2024
5	FICO	HVAC Maintenance Agreement	7/1/2023	1/31/2024
6	Peggy Albee	Professional Counselor Services	9/1/2021	6/30/2024

Special Events

Special Events

- **Updates on Other Programs & Initiatives**

- Residents visited the Prairie Reserve Traveling Exhibit and heard a speaker on the Indigenous History of Montana. (October 23)

- Started Resident Portrait Day to boost self esteem and ensure updated photos are available for patient safety. (November 23)

- Started an Indoor Walking Program for residents at the Civic Center (November 23)

- Initiated new Life Stye (Resident Satisfaction) Survey process to identify opportunities for improvement; results have been incorporated into Quality Program. (November 23)

DEPARTMENT OF
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HUMAN SERVICES**

Special Events

- **Updates on Other Programs & Initiatives**

- Fall Activity highlights were Tie Dye Craft group, Russian Tea Mix for socials, Sip and Paint Club. (November 23)

- Special Holiday Events included Frosty Friday, Virtual Sleigh rides, Holiday Parties on each wing, Gift Tree, and Candlelight Services. (December 23)

- Needlework Club started and residents will make their own quilts for their twin beds. (December 23)