

Quality & Patient Safety

FY 2020 Annual Report



Newton Medical Center

Family friendly. First class.

A Message from the CEO



We are pleased to share the Newton Medical Center Fiscal Year 2020 Quality and Patient Safety Annual Report with you.

Our medical staff and employees share an interest in providing safe, high-quality care and exceptional service for every patient, every time. We look for ways PROTECT and DEFEND our patients and we aim to provide a rich patient experience from beginning to end.

We use data to help us optimize outcomes of care. Our annual quality and performance program starts with clearly defining desired goals. From there, we work in teams to build the processes and structures to achieve those goals. Thereafter, we frequently measure and evaluate our outcomes. This allows us to rapidly adjust, to gain understanding and to continuously improve. We compare ourselves to performance of other hospitals, professional organizations, or quality watchdogs to demonstrate the validity and relevance of our activity.

This year's report highlights several essential projects that, through hard work and dedicated effort, produced outcomes that often met and sometimes exceeded our dreams.

I hope you enjoy reading about the things that we considered essential in earning your trust. We want to be your choice for healthcare – every time. We will continue our work in such a way that we truly earn the privilege of your respect and trust.

Thank you for allowing us to serve you.

Sincerely,

A handwritten signature in black ink that reads "Vallerie L. Gleason". The script is elegant and cursive.

Vallerie L. Gleason
President & CEO

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Who We Are

Newton Medical Center (NMC) is a 103-bed, not-for-profit facility dedicated to providing health care services to residents of Harvey and surrounding counties. Formed in 1988, NMC has evolved from an established tradition of excellence.

More than a century ago, Dr. John T. and Lucena Axtell founded Newton's first hospital, Axtell Hospital. For four decades, the Axtells served the community until they passed on the hospital to the Kansas Christian Missionary Society. At that time, the name was changed to Axtell Christian Hospital, a Christian Church/ Disciples of Christ organization.

At the turn of the century, Reverend David Goerz and Sister Frieda Kaufman founded Bethel Deaconess Hospital as a mission of the Mennonite Church. Mennonite deaconesses remained involved with the hospital's operations until 1983. On Jan. 1, 1988, the two hospitals merged to become Newton Medical Center.

Mission: To excel in providing healthcare by understanding and responding to the individual needs of those we serve.

Vision: To improve health.

Values: Respect. Excellence. Service. Trust. Transparency.

National Quality Awards

NMC received several distinct quality awards from outside entities this fiscal year.

Top 100 Great Community Hospital

For the fourth consecutive year, Newton Medical Center has been named one of America's 100 Great Community Hospitals by Becker's Hospital Review. Hospitals are selected based on rankings and awards from such organizations as iVantage Health Analytics, Truven Health Analytics, Healthgrades, CareChex, the American Nurses Credentialing Center and the Leapfrog Group. Our organization has earned recognition from one or more of these organizations.



Top 100 Rural & Community Hospital

Newton Medical Center is one of The Chartis Center for Rural Health's Top 100 Rural & Community Hospitals in the United States. This designation is based on iVantage's Hospital Strength INDEX®, the industry's most comprehensive rating of rural and Critical Access Hospitals.



Outstanding Patient Experience Award™

Since 2017, NMC has been recognized for outstanding patient experience by Healthgrades®. This distinction places NMC among the top 15% of hospitals nationwide for patient experience, according to Healthgrades, the leading online resource for information about physicians and hospitals.



Healthgrades determined hospital performance by applying a scoring methodology to nine patient experience measures, using data collected from a 32-question experience survey from the hospital's own patients.

5-Star Hospital

In 2020, the Centers for Medicare and Medicaid (CMS) ranked Newton Medical Center as a 5-star hospital. The overall hospital rating summarizes a variety of measures on Hospital Compare reflecting common conditions that hospitals treat, such as heart attacks or pneumonia. The overall hospital rating shows how well each hospital performed, on average, compared to other hospitals in the U.S. The overall hospital rating ranges from 1 to 5 stars. The more stars, the better a hospital performed on the available quality measures. The most common overall hospital rating is 3 stars.



Clinical Excellence

Our goal is to provide safe, quality care for the patients who entrust their care to NMC. Through an interdisciplinary approach led by the hospital and medical staff leadership, and approved by the governing board, this annual quality report details internal and external quality assurance and process improvement initiatives for fiscal year (FY) 2019.

Every quarter, NMC submits data to Centers for Medicare and Medicaid Services (CMS) for identified illnesses and clinical conditions. The clinical quality indicators promote best practices associated with targeted clinical disorders, prevention and reduction in clinical variance and prevention of harm. The indicators below, adopted by the National Quality Forum, parallel those required by CMS.

Timely and Effective Care

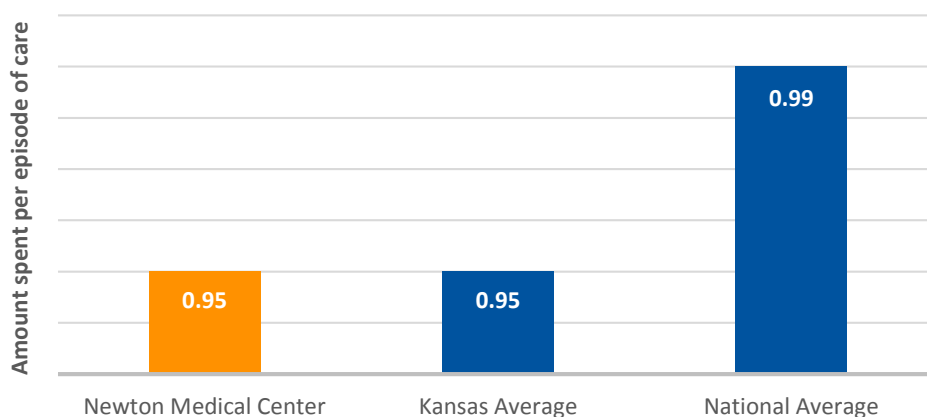
Clinical Quality Indicators	NMC	Kansas Average	National Average
Patients who received appropriate care for severe sepsis and/or septic shock <i>(Higher percentages are better)</i>	68%	61%	59%
Percentage of patients receiving appropriate recommendation for follow-up screening colonoscopy <i>(Higher percentages are better)</i>	97%	85%	89%
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room. <i>(A lower number of minutes is better)</i>	38 min	45 min	62 min
Outpatients with low-back pain who had an MRI without trying recommended treatments (like physical therapy) first. <i>(if a number is high, it may mean the facility is doing too many unnecessary MRIs for low-back pain)</i>	33.8%	38.3%	38.7%
Outpatients who had a follow-up mammogram, breast ultrasound, or breast MRI within the 45 days after a screening mammogram. <i>(a follow up rate of 0% may indicate missed cancer; a rate higher than 14% may mean there is unnecessary follow-up)</i>	4.2%	8.2%	8.9%
Healthcare workers given influenza vaccination	95%	95%	90%
Rate of readmission after discharge from hospital <i>(hospital-wide)</i>	Better than the National Rate	Not reported	15.3%
Patients who reported 'Yes, they would definitely recommend the hospital.'	73%	78%	72%
Patients who "Strongly Agree" they understand their care when they left the hospital	53%	59%	53%

Source: Hospital Compare

Efficient Care

NMC strives to deliver quality and efficient care. This is evidenced by the Medicare Spending Per Beneficiary quality metric. This metric illustrates that NMC manages Medicare reimbursement per beneficiary more efficiently than the state or national average. NMC provided quality care with positive outcomes at an efficient price per case for FY 2020.

Medical Spending Per Beneficiary



*Lower values indicate better performance.

Hospital Acquired Conditions

In FY 2020, NMC performed better than the national target for central line associated blood stream infections (CLABSI), catheter associated urinary tract infections (CAUTI), methicillin-resistant Staphylococcus aureus blood infections (MRSA) and ventilator associated events (VAE). Hospital acquired conditions (HAC) are reported in SIRs (Standardized Infection Ratio); a format established by the Center for Disease Control.

Opportunity exists to continue improvement efforts in reducing the hospital acquired condition, Clostridioides difficile (C. diff). See next page for more information.

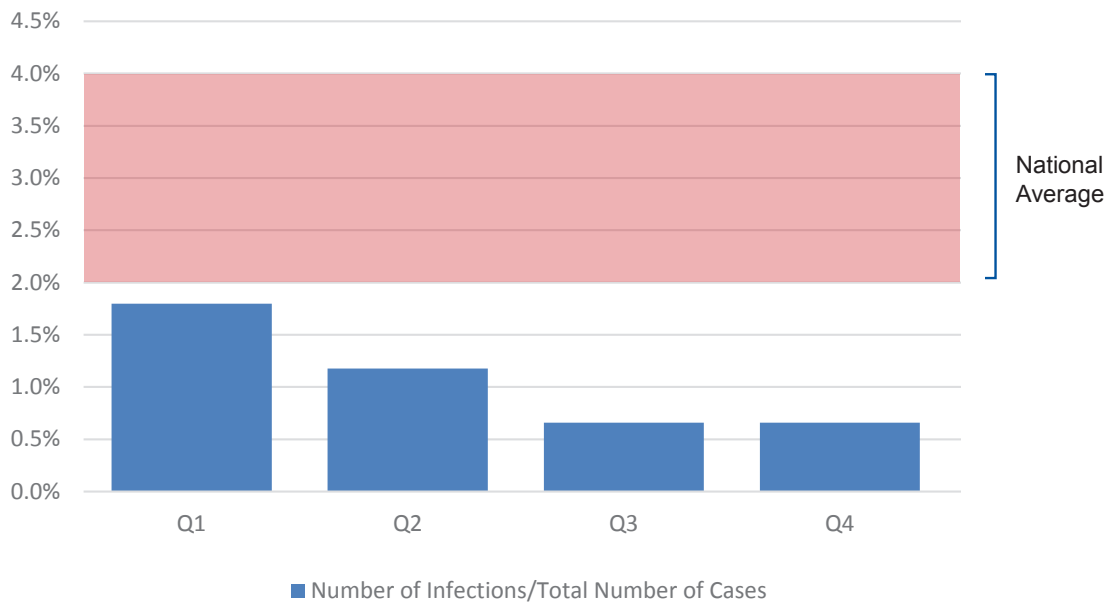
	Q1	Q2	Q3	Q4	Target
CLASBI	0	0	0	0	<1
CAUTI	0	0	2	0	<1
MRSA-Blood	0	0	0	0	<1
C-DIFF	0.8	0	0.6	3	<1
VAE	0	0	0	0	<1

Surgical Site Infections

Surgical Site Infections (SSI) are infections that develop after a patient has had a surgical procedure. Patients are monitored for 30-90 days following surgery for symptoms of infection. The Infection Control Officer collaborates with key stakeholders to ensure compliance with infection control practices that aide in prevention of a negative outcome for surgical patients. The percentages of surgical site infections for total joint, colon, hysterectomy and C-section procedures are listed below for FY 2020. NMC has a target of zero and any single occurrence triggers investigative actions.

Percentage of Surgical Site Infections for FY 2020

Includes total joint, colon, hysterectomy and C-section procedures



Medication Safety

NMC aligns with the National Patient Safety Goals established by the Joint Commission, a regulating body for hospital organizations. Our patient and medication scan rates are monitored for accuracy to ensure to the right patients receive the right medication. This past year there were a total of 840,203 doses of medications administered with a result of 99.98% being administered correctly. While NMC performs well with medication administration, the NMC Culture of Safety leads to ongoing audits to assure process compliance and early identification of opportunities for improvement.

New Technology

Imaging: Magnetic resonance imaging (MRI) is utilized as a diagnostic tool to aide in the detection of injury and disease process. The new MRI unit, installed in Q1 of FY 2020 has improved several factors that affect the quality and safety of NMC patients.

- New radio frequency shielding was installed along with new imaging software technology. Both factors improved the image quality by producing clearer images for interpretation.
- A detachable exam bed allows for a faster response to patients in need, such as a code blue event. The exam bed can simply be unlocked from MRI machine, allowing for a quick and efficient transfer directly to the emergency department.
- The new MRI improves patient care outcomes by increased turnaround times resulting in quicker results. This leads to increased patient and physician satisfaction.
- With new equipment comes new department safety assessments; MRI safety zoning has changed to meet the 2020 MRI safety guidelines improving the safety of our patients and staff with new badge



Clark Brubaker, MRI Coordinator, with NMC's new Siemens Eco-Aera 1.5T MRI with Advanced Coil Package

access and locked double doors.

- A new radio frequency metal detection system has been added to notify technologists of potential metal projectiles that were not identified by the initial written and verbal screening.

Laboratory: NMC's laboratory added new technology for increased testing capabilities. The new Vitros 7600 analyzers perform over 70% of the total laboratory testing volume or over 840,000 patient tests per year. Automation Solutions transport system together with the 7600 analyzers improve safety to our employees by automating the transportation of specimens to the analyzers. This system assists in reducing exposure by eliminating the large volume of uncapping and recapping of specimens.

Automation Solutions transport system and the 7600 analyzers improve lab quality in several ways:

- Increased testing menu by eighteen tests - these tests were previously sent to a reference lab
- Faster turnaround time for patients and providers to receive results than if the test was outsourced
- Turnaround times are standardized, producing results in a more predictable timeframe
- Potential risk for human error has been removed in the transferring of specimens
- Decreased testing times



Craig Baskins, Lab Tech, with NMC's new Vitros 7600 analyzers.

COVID-19 Dashboard

On February 3, 2020, NMC initiated the Incident Command Structure in response to the global pandemic SARS-COVID 19. The Hospital Incident Command System (HICS) provides structure during emergency management, planning response and recovery for events.

Objectives for the SARS-COVID-19 Incident Command were to maintain patient and employee safety and continuation of operations. The Center for Disease Control and Kansas Department of Health and Environment provide the framework for standards of care and guidelines in response to this pandemic. The guidelines changed frequently in the first several weeks of incident command.

"I appreciate the leadership's dedication to making the COVID19 policy and procedures easily accessible for any individual in the organization to locate. It makes finding the information we need quick and easy!"

- Morgan Simmons
Outpatient Therapy Supervisor

"It became challenging on how to have the most up-to-date policy or procedure available for staff when it changed on almost a daily basis," stated Heather Porter, Incident Commander and Chief Clinical Officer.

Policies, procedures and guidelines were built addressing the continuum of care. The continuum of care was 6

evident on the white board in the incident command center but were challenging to deploy in a uniform manner. Julie LaCombe, Informatics Specialist, was instrumental in transferring the white board to an electronic version staff could access with one or two clicks.

Deployed in March 2020, the COVID-19 dashboard displays easy-to-read icons. When staff click on an icon, they are directed to the most up-to-date policy or procedure on Qualtrax, NMC's document management system. Protocols could be changed without having to notify staff every time an edit was made. This allowed staff to have the most recent protocols to help guide their actions. The COVID-19 dashboard remains an essential guiding tool for staff.

Orthopedic Spine Services

In September 2019, NMC announced that orthopedic spine services would be available on the NMC campus. "Over the past two years, we've seen a growth in area patients needing orthopedic spine services," said Heather Porter, chief clinical officer at NMC. "By introducing this new service at NMC, we hope to improve health in our community by helping patients remain close to home when they need specialized care for neck and back pain."

Orthopedic spine surgeon, Abhijeet Kadam, MD, joined NMC's orthopedic and sports medicine clinic. Dr. Kadam is well versed in state of the art techniques involving spinal navigation, robotics and the use of neuro-monitoring to enhance patient safety in spine surgery. He strongly believes in following a patient-centered approach, thus empowering patients to make the best decisions about their care. Spine services include surgical and non-surgical treatment options.

Readmissions

NMC continues to utilize the Right on Track Program (ROTP) to identify patients who are at a high risk for readmission. The ROTP contacts patients weekly for four weeks for early detection of symptoms and implementation of interventions to prevent readmissions. These contacts have been made with 129 patients this past year resulting in a reduction in sepsis readmissions from an average of 18% to 12.4%. NMC continues to have an overall lower readmission rate than our national peers.

Telehealth

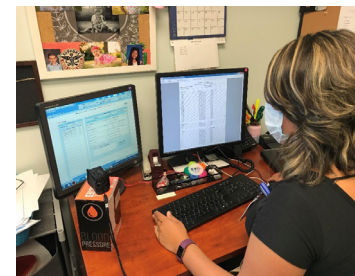
NMC primary and specialty clinics utilized telehealth to a great extent during the stay-at-home orders and it was a tremendous resource to evaluate and treat patients. The technology was used to provide care for different types of visits from ill acute to medication refills to chronic disease management. Patients were grateful for the option so they did not have to leave their homes and go to the clinic. However, a majority of visits still occurred in person during this time.

Telehealth appointments are still offered at all locations, although they are being utilized minimally as most

people are requesting in-person appointments. The greatest impact NMC's telehealth services still provides is to nursing home patients, as it alleviates the concerns for that population leaving their homes and potentially coming into contact with the virus.

NMC's home health service had 37 patients utilizing telehealth services in FY 2020. The telehealth modules included any of the following: blood pressure, weight, pulse oximetry, heart rate, blood pressure and blood sugars. Home health telehealth services are geared towards patients who have a high risk of re-hospitalization and/or a new diagnoses of congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD), diabetes and other disease processes.

Most insurance companies have extended coverage for telehealth use through the end of 2020 and NMC will continue to offer the service for as long as it is reasonable.



NMC's Home Health staff checking patient logs.

Patient Experience

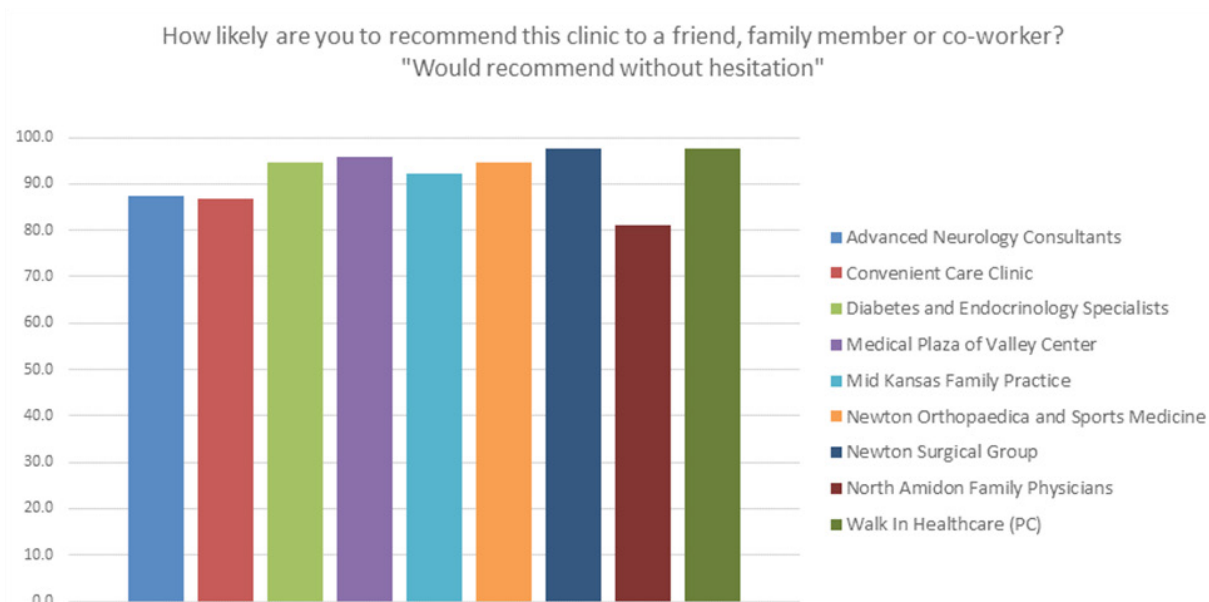
Providing safe, efficient, customer-oriented care is a top objective for hospitals. The Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) is one of the major survey tools utilized to measure the patient perception of care and experience. The intent of the assessment is to improve the quality of care through accountability and public disclosure.

Patients who...	NMC	KS AVG	NATL AVG
Reported YES, they would definitely recommend the hospital	73%	78%	72%
Reported that YES, they were given information about what to do during their recovery at home	91%	88%	87%
"Strongly Agree" they understood their care when they left the hospital	53%	59%	53%
Patients who reported that their doctors "Always" communicated well	81%	86%	82%

*Data comes from Hospital Compare.

NMC'S clinics conduct monthly patient satisfaction surveys utilizing questions from the Consumer Assessment of Healthcare Providers and Systems (CAHPS) standardized surveys along with individualized questions that are relevant to family practice, urgent care and specialty care clinics. These surveys identify areas for improvement opportunity in customer care and service recovery. NMC recognizes that a "net promotor score", which offers an overall impression of a patient's satisfaction with care, is important for the clinics to monitor diligently.

Analyzing hospital and clinic surveys for customer perceptions and trends allows NMC the opportunity to continue placing the patient at the center of care.



"Appreciated the care I received. It was excellent, nurses were always compassionate."

"Loved my experience! Thanks!"

"The nurse in the Maternal Care Unit are amazing and awesome! Keep up the good work!"

"It has been years since I was in a hospital. My family and I were amazed at the care and quality of care I received."

"I just love [the provider]. He genuinely cares about his patients."

"Thanks for the care I received, that's why I'm alive today. Thank you. Everyone was very nice."

"I appreciate interacting with the nurse, she was not rushed and she treated me like the intelligent person I am."

"Continue the excellent services that you provide. I sure makes life a lot less stressful."

"It was good to see the front desk staff in masks and the Plexiglas up at the front desk."

"Staff at the Family Practice office is pleasant and conscientious."

HCAHPS & CAHPS Patient Experience Comments

Source: NRC Health

Patient & Family Advisory Council

NMC is committed to improve quality and safety of care through the use of our Patient Family Advisory Council (PFAC). This council serves to provide a voice that represents patients and family. PFAC assists NMC staff to improve the quality of our hospitals care by identifying concerns, supporting staff and hospital leadership and educating staff about the patient and family perspective. PFAC, facilitated by the Patient Family Engagement Coordinator, consists of 10 members who volunteer their time and ideas to enhance patient care. During the COVID-19 pandemic, PFAC members continued their monthly meetings on a virtual platform, ensuring compliance with social distancing guidelines.

A few programs PFAC assisted with during FY 2020 include:

- Wording of surveys for family appropriateness
- Assisted marketing with being “eyes and ears” in the community
- Improving the discharge process for patients
- Providing feedback on how to improve HCAHPS scores
- Providing feedback on the emergency department and the wait time from a patient and family perspective



L to R, top to bottom: Sandra Banman, Aaron Johnson, Patient Family Engagement Coordinator/Director of Quality, Willis Heck - Board of Director designee, Amy Sherbenou, Hilda Conrade, Ruthe Spexarth, Casey Jacob, James Patterson. Not pictured: Karen Farrell, Betty Vega, Marge Roberson

Community Health Needs Assessment and Implementation Plan

Fitness Path: On October 3, 2019, NMC launched a new feature on the hospital campus, NMC's Fit Trail. This expansion of the walking path surrounding the pond on campus was enhanced to include a fully paved pathway, opportunities for fishing, benches, trees and 10 fitness stations. The expansion was made a reality through a Pathways Grant from Blue Cross and Blue Shield, while the fitness stations were financed through a grant from the American Medical Society of Sports Medicine via Dr. Jennifer Koontz and a donation from the Harvey County Medical Society.



Monica Turner, LSW, receiving a referral from Dustin Graves of Newton Fire/EMS.

Para-Medicine program: The team of care providers in the NMC Emergency Department has experienced the addition of a social worker dedicated to the department in FY 2020. The social worker coordinates referrals brought from our community partners in the Newton Fire/EMS and Newton Police Department. Examples of resources referrals are: long term care facilities, home health, skilled nursing and department of children and families. 96% of the Para-medicine referrals were addressed and services were provided based on need for FY 2020.

One Call Center

Admission processes and patient flow affect the overall quality and patient perception of hospitalizations according to national surveys. The Institute for Healthcare Improvement (IHI) and Agency for Healthcare Research and Quality (AHRQ) both have published guidance addressing the need for improvement in the patient flow domain. The key to improving patient flow lies in reducing process variation that affects flow (Institute for Healthcare Improvement, 2003). The goal for this performance improvement project was to reduce variation in the admission request process.



The design of this Performance Improvement Project was a Plan-Do-Study-Act (PDSA) cycle. The project is currently in the study phase. 281 calls have been fielded since the initiation of the one-call center in December. Physician concerns regarding admission request has been reduced by 50%. Transfers to tertiary center for FY 20 compared to FY 19 did increase by 5%. However, establishing the one-call center allows staff to analyze transfer patterns for further process improvement measures.

Improving patient flow and centralizing admission request processes was the objective of this performance improvement plan. Implementation of one point of contact has improved communication and the admission process by having a single point of contact.

References:

Institute for Healthcare Improvement. (2003). Optimizing patient flow, Moving patients smoothly through acute care settings. Cambridge: Institute for Healthcare Improvement.

National Quality Forum. (2019, November 3). All-Cause Admissions and Readmissions.

Retrieved from National Quality Forum: <http://www.qualityforum.org/ProjectDescription.aspx?projectID=86089>

Safety Focused

Safety Surveys

Hospital: In December 2019, NMC submitted a Leap Frog survey for a National Patient Safety Grade. One component of this process was to conduct an industry supported safety survey. NMC used the Agency for Healthcare Research and Quality (AHRQ) Culture of Safety Survey. Results of this survey were reported to NMC Leadership and to department leaders for utilization in staff meetings and process improvement projects. Abbreviated safety surveys were conducted in May and June of 2020 for follow-up data to evaluate

improvement interventions that were implemented in various clinical departments.

Clinics: NMC clinics conducted the AHRQ medical office safety survey in March of 2020. Completion of the survey and utilization of the results for improvement activities in patient care by clinic directors and providers will assist the NMC Clinics in reaching their goals with the Merit-based Incentive Payment System (MIPS). The MIPS program is administered by the Center for Medical Services (CMS) and rewards providers for achievement of scores on value and outcomes for quality measures.

Workplace Safety

BERT: On March 9, 2020, NMC launched the Behavioral Emergency Response Team, or BERT. This team is an additional resource to assist in de-escalating patients and visitors when staff start to sense aggression. The primary objective of the BERT is always to ensure the safety of the staff, patients and visitors. The team works in conjunction with other staff involved to help de-escalate aggressive or potentially aggressive situations. The team consists of the house supervisor, rapid response RN and social worker. Team members have gone through additional de-escalation and specific BERT team training. The BERT is not a replacement to calling 911 if needed but NMC's goal is to reduce the need for law enforcement with early intervention.

Zero Tolerance for Workplace Violence: According to the Occupational Health and Safety Administration (OSHA), workplace violence (WPV) incidents disproportionately occur in healthcare occupational settings. Incidents of serious violence are reported to be four times more common in healthcare than in private industry because of dealing with ill persons and their families in pressure-induced situations. NMC has established a zero-tolerance policy for WPV. This policy banished the so-called code of silence regarding physical or verbal assault or threats of assault against employees from patients, their visitors, other staff, or even employees' loved ones. No longer is WPV regarded as a "routine and expected part of a healthcare worker's job."

In an effort to protect and defend our employees who are on duty, NMC has undertaken a multi-year process to provide a safe and secure place of employment. Working closely with insurance carriers and the hospital association, NMC has made improvement to facilities with safety and security in mind and implemented an annual risk assessment that is reviewed and evaluated by a peer-led Safety Committee.

NMC was the first hospital in Kansas to implement the rigorous TEAM training for all staff and TEAM Advanced training for select staff working in high-risk areas such as Psychiatry and Emergency Department. First and foremost NMC wants staff to recognize potentially dangerous situations and work to appropriately de-escalate them or know when

"We expect our employees to work within a cloak of peace and safety at NMC and our efforts are steadfastly directed to keep our employees safe from harm at all times."

- Val Gleason
President & CEO

to get help. Creating awareness of potential danger is a critical first step in our staff's safety continuum.

This past year NMC has worked closely with local law enforcement and the District Attorney to implement improved reporting of all WPV, including acts or threats of violence by any person against NMC employees.

Quality Improvement

NMC developed, implemented and works to maintain an effective, ongoing, organizational wide, data driven quality assessment and performance improvement (QAPI) program. The goals of this hospital-wide program include identifying and reducing medical errors and improving and effectiveness and health outcomes. Quality indicators are measured, analyzed and tracked on an ongoing basis

In FY 2020, NMC's hospital-wide initiatives included improvement of the hospital patient admission process, hand hygiene performance, and influenza vaccine compliance for patients.

Hand Hygiene

NMC has identified hand hygiene compliance as an organizational goal with a target of 93% compliance. Hand hygiene is the practice of all employees washing their hands or utilizing sanitizing foam prior to entering and exiting a patient room. Upon admission, a care contract is offered to patients to encourage observation of hand hygiene practices of staff. Feedback is addressed at the point of concern. The Infection Control Committee meets quarterly to review any concerns related to hand hygiene compliance, best practices, and any opportunities for improvement.

Influenza Vaccine Compliance

NMC strives to ensure that patients are adequately immunized for Influenza annually. During the 2019-20 flu season, NMC assessed an average of 98% of the inpatients for appropriate seasonal immunizations and 95% of the NMC employees received the flu immunization.

Looking Forward to FY 2021

To strive for continuous improvement and safe patient outcomes, departments, medical staff, administration and the governing board have set the following as key QAPI initiatives for FY 2021. *(The following lists highlights of the FY 2021 QAPI plan and is not a complete list of projects and initiatives.)*

- Walkie-Talkie Education walks on the NMC Fit Trail
- Attain Quality Distinctions beyond certification
- Promotion of a Culture of Safety
- Collaborate with Harvey County Stakeholders to build and implement a new three-year Community Health Implementation Plan

- Just Culture application hospital wide
- Continue fiscal stewardship
- Documentation initiatives
- Facilities enhancements-HVAC project
- Earn maximum quality incentive payments
- Assess and address social determinates of health
- Offer opportunities for Employee Wellness involvement
- HIPAA risk assessment mitigation activities
- Increase PFAC involvement in the areas of NMC clinics and Safety
- Ever Ready for regulatory surveys