**Fiscal Year 2008 Accomplishments**

A major infrastructure project at TCRHCC behind the scenes was the replacement of the medical gas system throughout the facility (lower right). The new medical gas system brings TCRHCC into compliance with Joint Commission requirements. (Above) New patient monitors were purchased and installed in the Intensive Care Unit. (Upper left) A state-of-the-art CT scanner was purchased and installed allowing TCRHCC to take great strides in imaging and diagnosing on location. (Upper right) New housing units were delivered and installed.

In 2008, TCRHCC successfully completed a total of more than 30 projects with an 80-85% completion rate on total projected and planned capital projects. TCRHCC has embarked on centralizing project management activities through the site Projects Coordinator.

The Projects Coordination Program started out small as a pilot program with Senior Leadership Council (SLC) oversight and has grown into a multi-faceted program to include hospital-wide projects that require high-level capital budget allocations along with current methodologies on project management principles. As projects are reported on a weekly basis from site project managers and owners, it is evident TCRHCC has made great strides in making project management and coordination a success.

Each year, SLC and department head managers strategically plan capital projects to improve and enhance hospital services ensuring return on investment (ROI) opportunities and as an opportunity to meet strict compliance standards of regulatory agencies.

"It was a great year. It is a continuous process for improvement on Project Management, as there is always room for improvement here at TCRHCC," said, Vince Shirley, site Projects Coordinator. "I commend all project managers, owners, facilities operations and staff members who’ve helped in making the projects coordination program a success in 2008. Capital project activities are highly visible endeavors and project management is looked upon as a guide to help orchestrate an outcome to improve TCRHCC services, which I’m also proud to be a part of to benefit TCRHCC."

Here is a listing of some of the projects completed on the TCRHCC campus to improve healthcare, both visible and behind the scenes:

- **Automatic Transfer Switch** - A facility-wide project to automatically switch from outside electric power to generator power if an outage occurs, as required by the Joint Commission accrediting body.
- **Fire & Smoke Dampers** - A joint Commission requirement to replace and install five fire and smoke dampers, dividing the facility’s ventilation system into zones.
- **CT Scanner** - Purchase and installation of state-of-the-art CAT scanner in the Radiology Department.
- **Patient Registration Renovation** - Phase 1 of renovation to make outpatient clinic patient registration area more efficient and comfortable.
- **Environmental Safety Assessment** - Improving the environmental safety and quality of care throughout the health care center.
- **Operating Room Humidity** - Upgrades to the HVAC system in the operating rooms to regulate and maintain the proper humidity.
- **Information Systems** - Implementation of an upgrade to ensure encryption security of information transmitted to other health care facilities.

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Healthy Directions

Additional Progress Reports

Twelve physicians, medical directors, and each of the Senior Leaders gave progress reports on their respective patient care departments. Chief Nursing Officer Alvinia Rosales gave the annual Nursing Services report. Information Systems personnel Shawn Charley and John Ruehlle updated the group on plans to replace the RPM-S computer system.

The last fiscal year saw a great deal of progress at TCRHCC in necessary improvements, equipment replacement and outlay for new, modern equipment for patient care and medical imaging. (See Accomplishments article on front page.)

The improved financial status of TCRHCC puts it in a position to move forward more rapidly in bringing more healthcare to Tuba City. When tests and services can be administered at TCRHCC, not only is it better for patient care, it decreases disruption and inconvenience for patient families in having to travel great distances. In some cases patients must travel and be alone with no family or loved ones present.

The Medical Directors and Senior Leaders all reported several common themes, including opportunities and barriers. These included lack of patient care space, an old information system, and the need for new clinical services to expand our patient care mission.

With its status as a 638 Self-Determination hospi-
tal, TCRHCC is allowed to make decisions and move forward much more rapidly in meeting these needs. A $10 million bond issue in Fiscal Year 2009 will allow TCRHCC to leap forward on some major and badly needed additional capital projects.

FY09 Capital Summary Bond Issue

A. New IT System - HMS
   - Modern and updated system to also accommodate electronic health records (EHR).

B. New Omni-Cell Prescription system
   - Modern prescription-filling system for greater accuracy, patient safety and cost control.

C. General Services Building
   - For badly needed additional floor space for hospital support services.

D. MRI with installation
   - Magnetic resonance imaging unit to further improve TCRHCC’s medical imaging and diagnostic capabilities.

E. Housing - Second Addition
   - Additional housing to provide for staff and to improve recruiting efforts.

F. Combination Outpatient Clinic Building
   - Outpatient Services would be moved into all new quarters.

Strategic Position Plan 2009

CEO Joe Engelken and Senior Leadership present-
ed the TCRHCC Strategic Plan for Fiscal Year 2009, which has seven strategic pillars. These are the master goals for continuing to increase the quality of care for all patients while further improving the financial strength of the corporation. There are some 235 specific effectiveness goals in the written plan.

I. Financial Management

These goals are the financial plan and budget that ensures short and long term financial viability while meeting the patient care needs and improvements of the medical center and health system.

A. Continually improve the annual budgeting process in support of providing the services identified as our strategic position.
B. Implemented processes in both revenue and expenses which will improve margin performance to fund operations, capital and reserve funds.

II. IS/Data Management

These goals encompass optimal integration of qual-
ity electronic data through effective utilization of information technology that meets both management and patient care needs.

A. Invest in both end user and IS staff education so as to leverage technology to enhance patient service and business procedures.

III. Quality/Process Improvement

These goals encompass the processes that lead to the highest quality organizational performance, patient care, customer services and community relations.

A. Exceed or meet national, regional and local standards of care.
B. Use technology to assist in meeting identified quality indicators.

IV. Facilities/Building Material Management

These goals encompass the cost effective utilization, procurement and control of all facilities, equipment, properties, and materials of the corporation.

A. Invest in facility improvements which will support continued growth in patient care services.
B. Plan facilities which can be used as transitional structures in order to meet long term structures needed to provide patient services.
C. Manage supply chain so as to maximize margin improvement.

V. Staff Development

These goals encompass a response to human resources needs through enhancements in programs for employ-
ees, relations, development, recruitment, training, retention, and rewards for all the staff of Tuba City Regional Health Care system. Special emphasis shall be given to Native Americans in recruitment and career development.

A. Invest in all staff development to improve their performance in their respective functional capacity.
B. Invest in all levels of management development using multiple modalities.

VI. Enhancement & Development of Services

These goals encompass the enhancement and develop-
ment of services that improve the quality and safety of the services provided.

Accomplishments, Continued from page 1.

Nutrition - Industrial oven replaced in kitchen.
Operating Rooms - Replaced washer/dispenser for washing and sterilizing operating room instruments.
Cardiac Rehab - Purchase of exercise equipment for Cardiac Rehab. program.
ICU Cardiac Monitors - Upgraded to state-of-the-
art monitors for all patients in Intensive Care.
ER Overflow Plan - Extended hours with a walk-in clinic until midnight for non-life-threatening injuries and illnesses.

Cameron Dental Clinic - Installation of security lighting at Cameron Dental Clinic.

Emergency Lighting - Installation of additional emergency lighting as needed throughout hospital.

Incident Command Center - New work station as an Incident Command Center for disaster drills and events with improved multi-agency communications.

O B Unit Improvements - Upgrade to state-of-the-
art newborn hearing screening equipment, purchase of new beds and furniture.

Nurse Call System - A major upgrade of the current nurse call system for patient beds and rooms throughout the entire facility.

References to TCRHCC’s Strategic Plan for Fiscal Year 2009 (See Accomplishments article on front page.)

TCRHCC Annual Board Meeting

TCRHCC Chief Financial Officer Cliff Olson, CEO Joe Engelken, and the Board of Directors, with representatives of M & L Henry Yee (third from right) and Dennis Cesan (far right.)

B. Invest in hardware and software which will afford a stable platform and provide productive patient services and business processes.

C. Continually monitor and adjust needed services for the community.
D. Invest in a long term program to provide a comprehensive program employing evidence based modalities for the prevention and treatment of diabetes, both acutely and as a chronic disease process.
E. Invest in a long term program to provide a comprehensive program employing evidence based modalities for the prevention and treatment of cardiovascular disease both acutely and as a chronic disease process.
F. Maintain and enhance all levels of primary care services so as to sustain long term programs.
G. Identify surgical and medical subspecialties which meet the needs of the community and are sustainable within the organization.

VII. Advocacy

Activities related to promotion, education and advancement of TCRHCC programs, priorities and Mission.

A. Develop Community Information programs which will communicate the services available, accomplishments of TCRHCC and the education of the community promoting a healthy lifestyle.
B. Develop varied modalities for the use of spokes-
persons from TCRHCC to communicate our services and accomplishments.
C. Participate in organizations and take lead posi-
tions in organizations which support our strategic positions.

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Arizona Governor nominates TCRHCC for NIHB National Impact Award

By Joe Engelken, CEO

The photo at the lower left shows some of the talented TCRHCC Finance and Support employees Arizona Governor Janet Napolitano refers to when she nominated TCRHCC for the National Indian Health Board (NIHB) "National Impact Award" in September 2008 (letter at left).

These are a few of the leaders of this TCRHCC health system who work hard each day to monitor all our financial and patient support services to make sure they are correct. Through their vigilance our staff found a major error in Medicare’s reimbursement to TCRHCC caused by a national computer glitch that inadvertently reduced TCRHCC’s Medicare payments by $2 million. As Governor Napolitano notes, after Medicare alerted their networks nationally of this mistake, this could mean $50 million in payments to I.H.S. facilities across America. We can take great pride in the accomplishments of our staff.

National Indian Health Board

The NIHB advocates on behalf of all tribal governments and American Indian/Alaska Natives in their efforts to provide quality health care. It represents tribal governments operating their own health care delivery systems through contracting and compacting, as well as those receiving health care directly from the Indian Health Service (IHS).

A non-profit organization, the NIHB conducts research, policy analysis, program assessment and development, national and regional meeting planning, training and technical assistance programs, and project management. These services are provided to tribes, Area Health Boards, tribal organizations, federal agencies, and private foundations. The NIHB represents the tribal perspective while monitoring federal legislation and opens opportunities to network with other national health care organizations to engage their support on Indian health care issues.

National Impact Award

In 2007, TCRHCC received the Region IX Impact Award (for Arizona, California and Nevada) which honors an organization impacting American Indian/Alaska Native health care in the western United States.

Accomplishments

Chiller Replacement – Replacement of chiller for air conditioning system for the entire hospital.

Housing – Added 15 modular housing units for TCRHCC staff.

Bone Density Scanner – Purchase of state-of-the-art DEXA bone density scanner for diagnosing certain conditions, especially osteoporosis.

Audiology Booth – Replaced old soundproof booth used for hearing tests.

Medical Air System – Replaced entire medical air system, oxygen/nitrogen/air for constant and continuous flow through inpatient areas, in compliance with Joint Commission standards.


The Tuba City Regional Health Care Corporation consists of a 73-bed acute care referral hospital and integrated health system. It provides a broad range of outpatient specialized care services in addition to inpatient care. The patient population includes Navajo, Hopi and San Juan Southern Paiute.