



TUBA CITY REGIONAL HEALTH CARE CORPORATION

Healthy Directions

Serving Our Local Communities



JULY 2008

New Housing Units Aid in Staff Recruiting

Sixteen new housing units have been purchased, placed on the Tuba City Regional Health Care Corporation campus, and are ready for occupancy. The units are brand new with modern amenities. There are 15 single units and one double unit that can house two families. The new units are a variety of one, two and three-bedroom units. The 16 units are the first new housing for TCRHCC staff in 32 years.

TCRHCC houses approximately 230 staff members and families. Housing is one of the major challenges in recruiting staff to TCRHCC.

Three primary aspects of making new housing available after funds are allocated are the purchasing process, site preparation and placement, and furnishing the units.

"We've had this project on a fast track," said Mack Wilbert, Chief Procurement Officer. "We started in January and we'll have the units occupied by mid-summer."



Work crew takes a break from the preparation of new housing units.

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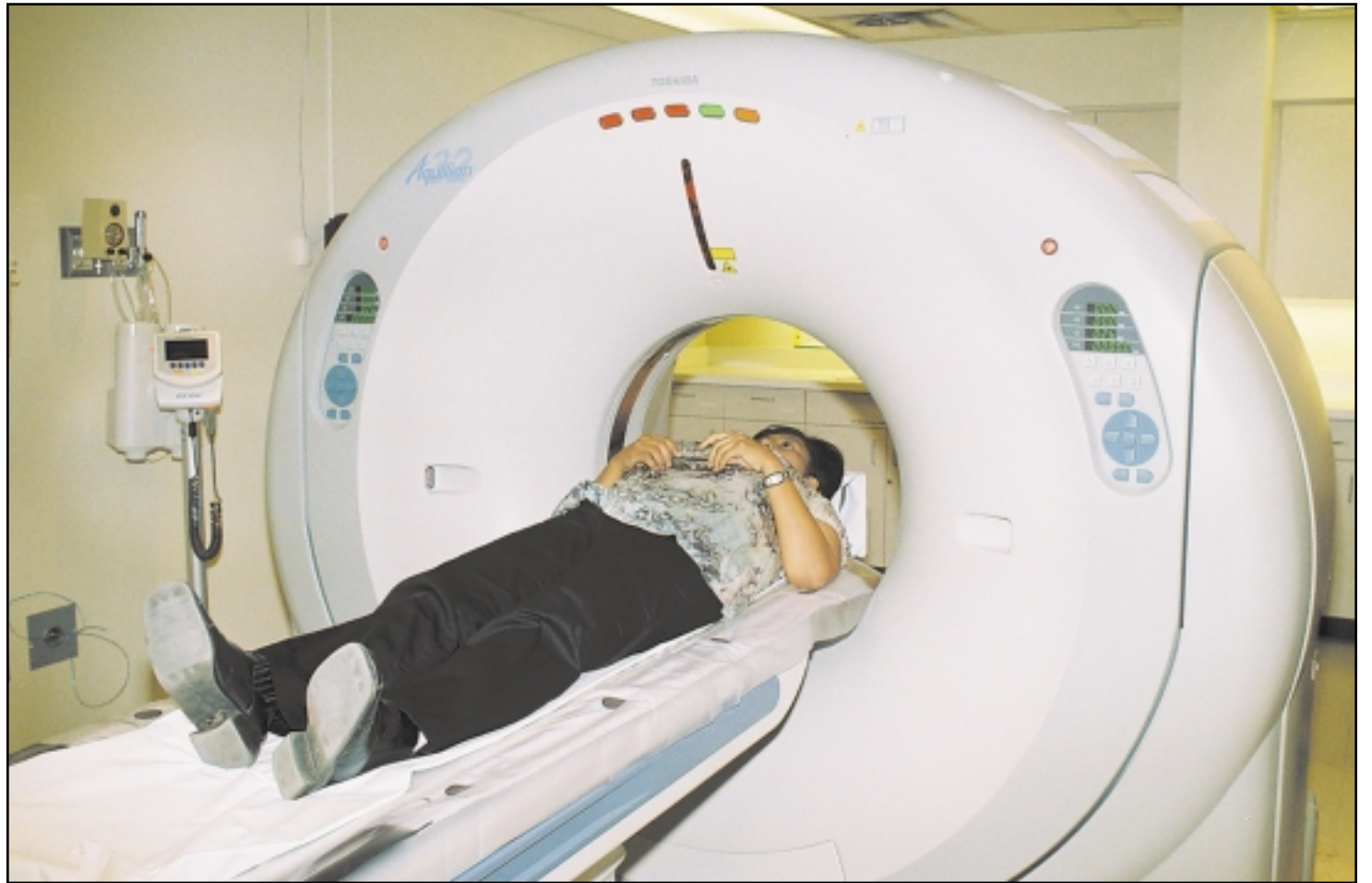
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Visit the Tuba City Regional Health Care Corporation website at:

www.TCHEALTH.org

Enhanced Medical Imaging



New CT Scanner in the TCRHCC Radiology Department

The ability for doctors and health care providers at Tuba City Regional Health Care Corporation (TCRHCC) to examine images from inside the body, and see and diagnose problems has been greatly enhanced with the delivery of a new CT scanner (computed tomography) in the Radiology Department. The Toshiba Aquilion 32 scanner (shown above) is one of the most advanced 32 slice CT scanners available. The unit is truly state-of-the-art. The manufacturer claims that the unit is the most flexible choice of speed and accuracy in CT scanning.

Unlike with x-rays where images inside the body are taken on film, typically held up to a light for viewing and interpretation, a CT image is viewed on a computer monitor and can be rotated and viewed from any angle in color and in 3-D.

"About 10 patients per day receive CT scans for various

parts of the body," according to Elizabeth Schneider, Radiology Director. "We have the capacity to do quite a few more. The image quality is much higher than what we had in the past and scans take much less time than before."

"We have begun doing virtual colonoscopies which are far superior and more comfortable for the patient than optical colonoscopies. We also intend to begin cardiac (heart) scanning soon," said Schneider.

The term "32 slice" means that the unit has 32 detectors (the older TCRHCC unit had 4) which enables the unit to scan much faster, and doses of radiation used in creating the images are significantly reduced. A traditional CT angiogram (image of the inside of a blood vessel) that usually take 60 seconds now take just 15 seconds with the new unit. The CT

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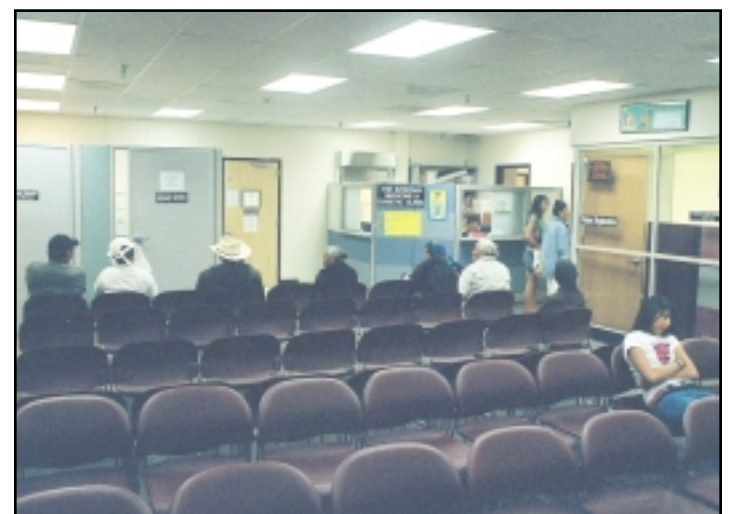
Adult Walk-In Clinic and Patient Registration Renovations Complete

If you haven't been to Tuba City Hospital in need of care recently, you'll notice big changes upon arrival. For the nearly 80,000 patients seen in the outpatient clinics per year, renovations have been made to make patients more comfortable on arrival, to speed registration, to see a health care provider more easily and to afford more privacy.

During the busiest times, patients often had to stand and wait in long lines as the floor plan was not designed with patients in mind, and the flow of people moving through the facility was inefficient. A plan long in the making began to unfold in the summer of 2007 and renovations continued through winter 2008.

Structural changes were made, walls were removed, waiting areas were expanded, and patient registration has been decentralized to specific clinics that patients need to visit. The hospital staff continues to monitor the process to date, looking for ways to make even further improvements for the future.

Along with patient privacy, infection control and patient



Adult Walk-In Clinic and Patient Registration area renovations mean no more standing in long lines awaiting attention and care.

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Renovations, *Continued from page 1.*

safety were other issues that needed to be addressed, and enhancements have been made with the completion of the renovations.

A major aspect of making renovations also had to do with achieving more accurate patient registration information – the Patient Financial Services Plan, also known as 100% Registration, and the Patient Information Management System (PIMS) Implementation. This was initiated to enhance TCRHCC’s ability to collect revenues from third parties and to meet established productivity and revenue benchmarks in each area. More accurate and increased billing claims to third party revenue sources will allow TCRHCC to continually meet and support existing and future financial commitments, making ever-more improvements in the healthcare of the community.

As the renovations and changes were such a large undertaking, various medical clinics and staff collaborated with Patient Financial Services, Nursing, Facilities, Information Technology, Finance, General Services, Contract Health, Human Resources, Senior Leadership, Facilities Maintenance and outside contracted construction crews.



Patient privacy is enhanced when they approach one of the newly-renovated and modern registration windows in the Adult Outpatient Clinic.

New Patient Monitors Purchased for ICU

New state-of-the-art patient monitors have been purchased and installed in TCRHCC Intensive Care Unit (ICU), replacing outdated equipment. The new



Philips Intelliview MP 70 monitors represent a major capital expenditure which directly impacts the quality of patient care.

“We’re very happy and excited to get this new equipment,” said Yolanda

Burke, ICU Nurse Manager. “With many advances in technology the new monitors are much more accurate and stay calibrated for as long as a year. The touch screen technology is faster and very user friendly.”

All patient monitors are connected to a central monitoring station where nurses can provide constant attention and be alerted immediately to critical events.

Patient monitors provide a constant measure of heart rate, blood pressure, respiration, oxygen saturation, carbon dioxide levels and other cardiovascular measurements.

Matching monitors were also purchased for the operating rooms and endoscopy suite.



Podiatry Specialist Arrives at TCRHCC – to Provide Foot Care

A licensed and board qualified podiatrist has joined the staff at Tuba City Regional Health Care Corporation. Keith A. Goss, DPM, comes to TCRHCC from Northern Navajo Medical Center in Shiprock, New Mexico. He received his education and training at Georgetown University Hospital (Washington, D.C.), INOVA Fairfax Hospital (Virginia), and the Medical College of Virginia.

Podiatry is the medical specialty involved with preventing, diagnosing and treating conditions associated with the foot and ankle.

Podiatrists treat a variety of conditions and are employing innovative treatments to improve the well-being of their patients.

Dr. Goss will practice in the areas of surgery of the foot, ankle, and leg, including reconstruction, arthroscopy, trauma, and saving limbs. Clinics will include wound clinic, and a comprehensive diabetic foot clinic.



Dr. Goss

The Nature of Podiatry

The human foot is a complex structure. It contains 26 bones, plus muscles, nerves, ligaments, and blood vessels, and is designed for balance and mobility. The 52 bones in a person’s two feet make up about one-fourth of the bones in the entire body. Podiatrists treat injuries of all of the bones, muscles, nerves and blood vessels as well as corns, calluses, ingrown toenails, bunions, heel spurs, arch problems, deformities, infections, and foot complaints associated with diabetes. To treat these problems, podiatrists prescribe drugs and physical therapy, set fractures, and perform surgery. They also fit corrective shoe inserts called orthotics, design plaster casts and strappings to correct deformities, and design custom-made shoes.

To diagnose a foot problem, a podiatrist may order x-rays and laboratory tests.

The foot may be the first area to show signs of serious conditions such as arthritis, diabetes, and heart disease. For example, patients with diabetes are prone to foot ulcers and infections because of poor circulation.

Foot Care and Diabetes

People with diabetes can develop many different foot problems, including infections and sores. Even ordinary problems can get worse and lead to loss of mobility, serious complications, or even loss of a leg. Foot problems most often happen when diabetic nerve and blood vessel diseases affect the legs and feet. The latest research is helping us know how to avoid these serious complications.

Foot problems most often happen when there is nerve damage, also called neuropathy, which results in loss of feeling in your feet. Poor blood flow or changes in the shape of your feet or toes may also cause problems.

Diabetic nerve damage (neuropathy) can lessen your ability to feel pain, heat, and cold. Loss of feeling often means you may not feel a foot injury. Diabetes can cause changes in the skin of your foot. At times your foot may become very dry. The skin may peel and crack. The problem is that the nerves that control the oil and moisture in your foot no longer work.

Calluses occur more often and build up faster on the feet of people with diabetes. This is because there are high-pressure areas under the foot. Too much callus may mean that you will need therapeutic shoes and inserts. Calluses, if not trimmed, get very thick, break down, and turn into ulcers.

Foot ulcers occur most often on the ball of the foot or on the bottom of the big toe. Ulcers on the sides of the foot are usually due to poorly fitting shoes. Remember, even though some ulcers do not hurt, every ulcer should be seen by your health care provider right away. Neglecting ulcers can result in infections, which in turn can lead to loss of a limb.

New Housing, Continued from page 1.

Preparing the housing units for occupancy requires many steps such as leveling the lots, routing and connecting utilities – electricity water and sewer lines. Other details include skirting, smoke alarms, entry steps and furnishings.

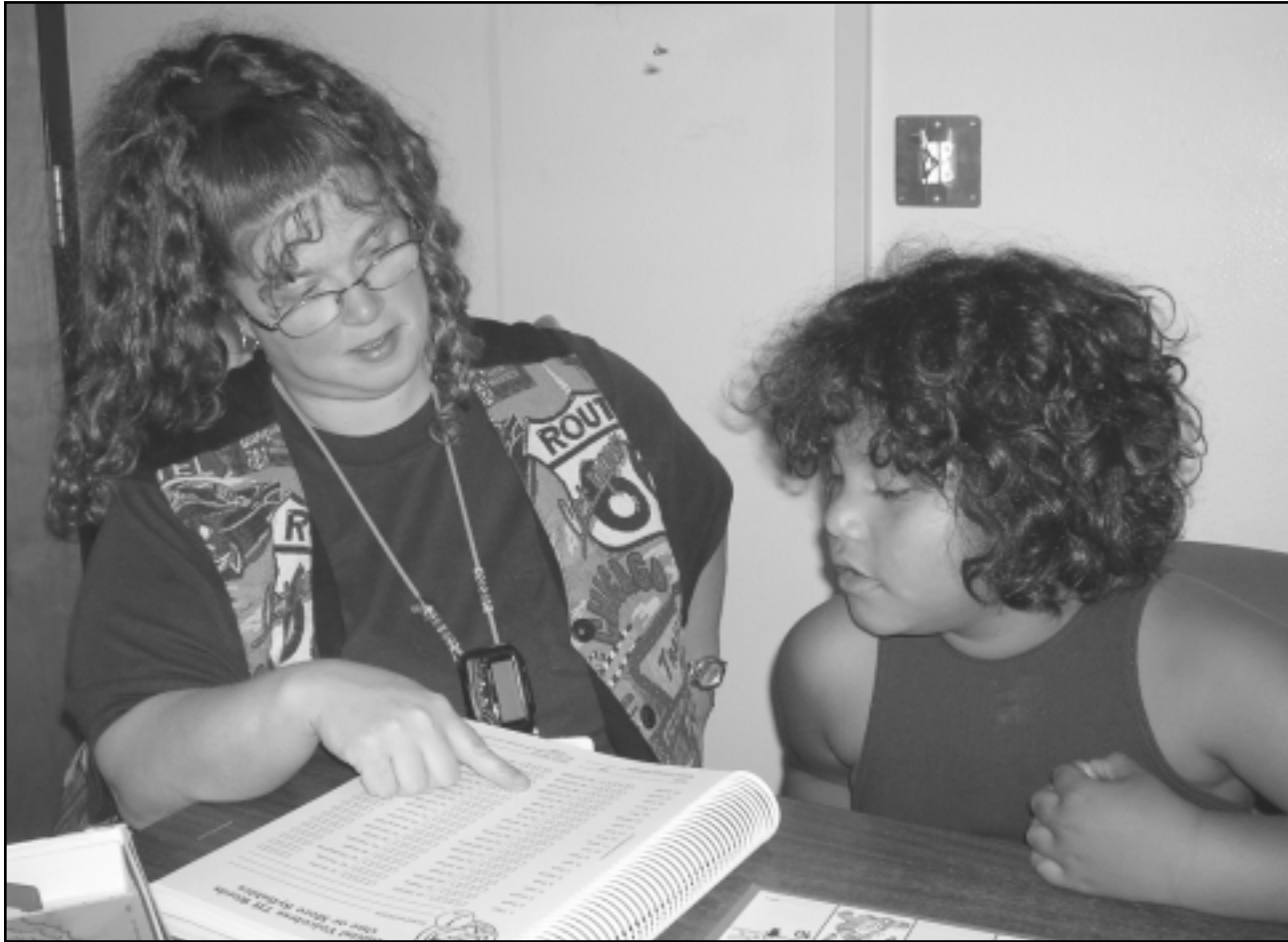
Housing units occupied by some TCRHCC staffers date back to the 1970s and 1950s.

“I believe these new units are the best place to live in Tuba City,” said Wilbert.



Above: Three new housing units near-ready for occupancy adjacent to Tuba City Hospital. Upper right: Interior kitchen area of a new unit with modern amenities.

TCRHCC Speech Pathology



Speech-Language Pathologist Sheri Stein-Blum in a therapy session with Keith J. Sumner, Jr., age six, from Tuba City.

The Role of the Speech-Language Pathologist in the Healthcare Profession

By Sheri Stein-Blum, M.S., CCC-SLP, Licensed and ASHA Certified Speech-Language Pathologist

Medical conditions in children and adults can interfere with their ability to communicate and swallow. Speech-Language Pathologists (SLP) in healthcare can help these children and adults who have difficulty in these areas. The services of an SLP include prevention, identification, evaluation, and treatment of speech, language, cognitive-communication, voice, and swallowing disorders.

Speech disorders affect how people say sounds and words (articulation) and how smoothly they speak.

Language disorders can interfere with what individuals say and how well they understand what is said to them. Reading and writing can also be affected.

Cognitive-communication disorders affect a person's memory, attention, ability to identify time and place, problem-solving ability, reasoning, and social interactions.

Voice disorders change how a person's voice sounds, for example, the person's voice might sound hoarse, too quiet or too high-pitched.

Swallowing disorders make it difficult for a person to chew and swallow food and liquids safely and may cause them to lose weight or choke and cough while eating.

It is a unique opportunity to be a SLP in the healthcare profession. We work with doctors, nurses, and other professionals to improve the lives of the people they treat. We have the ability to use cutting-edge technology to evaluate and treat many types of speech, language, and swallowing disorders. We can provide services to a variety of clients, from newborns with breast feeding, to the oldest adults who may need comfort care, and as specialists, can advocate for our client's needs.

Working as a SLP in healthcare is exciting, challenging, and definitely full of variety. We are fortunate to have two state licensed and American Speech-Language Hearing Association (ASHA) certified Speech-Language Pathologists (SLPs) providing these important services at Tuba City Regional Health Care Corporation – Sheri Stein Blum, M.S., CCC-SLP, and Ann O'Connor, M.A., CCC-SLP.

For more information about Speech Pathology services call (928) 283-2593



Medical Imaging, Continued from page 1.

scanner is available 24 hours a day, seven days a week as there are four registered CT technicians on staff.

"The new scanner is especially good for trauma patients," said Schneider. A scan can be made from head to pelvis in as little as 30 seconds, then the images can be reviewed immediately in house, or sent out over the Internet for review by a specialist."

"The image quality of this new unit is superior, improving our diagnostic capabilities," said Dr. Alan Spacone, Chief Medical Officer. "In addition to virtual colonoscopies, we'll be able to greatly improve vascular (heart and blood vessel) studies. Because of the unit's speed, patients spend less time during the study, lessening any attendant discomfort."

Cost justification for the new unit was easy for Chief Financial Officer – Cliff Olsson. "The annual maintenance cost on the old unit was higher than the lease on the new unit," said Olsson. "The new CT scanner pays for itself on that element alone. Doing our own imaging here is obviously better for patient care and we save money by not sending patients to other medical centers."

Because the images from the new CT scanner are so precise, in cases such as cardiac studies more invasive procedures can be avoided.

Computed tomography is a medical imaging method that employs digital geometry processing to generate a three-dimensional image of the inside of an object from a large series of two-dimensional x-rays.



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.

Sign Up and Be . . . ResourceSmart

Historically, Native Americans have received health care from the Indian Health Service (IHS). In receiving services through a local IHS hospital or with local Contract Health Services paying for services elsewhere, there has been something of a myth that unlimited funds were available to take care of everyone's health care.



Through Self Determination, Tuba City Regional Health Care Corporation (TCRHCC) and several other Navajo Area IHS hospitals have become independent health care corporations in recent years. IHS now funds only a portion of the health care needs provided by these new corporations.

With a local population growing at approximately twice the growth rate of the overall U.S., TCRHCC expects to serve as many as 30,400 individuals by 2015. TCRHCC also serves as a referral medical center for a much larger population – presently 75,000 people – from across the Navajo Nation and adjacent communities.

In fiscal year 2007, IHS provided just 45 percent of the revenues of TCRHCC. All other funds to provide for the patient health care needs came from "third parties." Third parties include entities such as Medicare, Medicaid – AHCCCS coverage, the Veteran's Administration (VA), and private (employer) health insurance plans. Patient Financial Services, formerly the Business Office, at TCRHCC now works to recoup payment for services from sources such as these, and others. In order to provide effective healthcare to everyone in the community, it is important to recoup as many dollars from these third party sources as possible.

An initiative called "**ResourceSmart**" is designed to match community members with as many third party resources, additional benefits and services as possible. ResourceSmart is administered by the Patient Benefits Coordinators at TCRHCC.

The process of applying for some programs can be overwhelming. The Patient Benefits Coordinator is knowledgeable about federal and state programs and can help people determine which are right for them and their families. Assistance is readily available for applying for such programs and additional resources.

Many individuals qualify for direct payments and/or reimbursements for health care and related costs from one or more programs. Additional resources can provide a number of benefits for you or family members, such as supplementary health care coverage for children, transportation and living assistance for the elderly, medical equipment for sick and disabled persons, vocational and other services for military veterans, income for dependents of disabled persons, and more. Eligible individuals might receive supplemental income, food subsidies, housing assistance and more. A person may qualify for any number of federal and state programs, as well as benefits programs through their employer or their spouse's employer, such as:

- Medicare
- Medicare Part A
- Medicare Part B
- Medicare Part D
- Disability Insurance
- KidsCare – Arizona's State Children's Health Insurance Program (SCHIP)
- Social Security
- Supplemental Social Security (SSI),
- Veteran's Administration (VA)
- Medicaid, Medicare Savings Program,
- Private health plans

Being **ResourceSmart** means learning about and enrolling in programs and services that may be available to an individual or family.

The Patient Benefits Coordinators at TCRHCC can give you all the information needed to qualify; begin by calling (928) 283-2781.



TUBA CITY REGIONAL HEALTH CARE CORPORATION
Main Telephone Switchboard (928) 283-2501
Emergencies: Call Navajo Nation Police (928) 283-3111

- Adult Walk-In Clinic** 283-2669
 - Monday - Thursday: 8:00 a.m. - 8:30 p.m. (After 4:00 p.m., sign up in the Emergency Room)
 - Friday: 8:00 a.m. - 5:00 p.m.

- Family Medicine Clinic** 283-2458
 - Monday - Friday: 8:00 a.m. - 5:00 p.m. (Some evening hours available.)

- Pediatric Clinic** 283-2679
 - Walk-in Patients ~ Monday - Thursday: 8:00 a.m. - 5:00 p.m. Friday: 8:00 a.m. - 4:00 p.m.
 - Appointments ~ Monday - Wednesday & Friday: 8:00 a.m. - 5:00 p.m. Thursday: 8:00 a.m. - 12:00 p.m.

- Outpatient Pharmacy** 283-2754
 - Monday - Thursday: 8:00 a.m. - 9:00 p.m., Friday: 8:00 a.m. - 7:00 p.m.
 - 24-Hour Pharmacy refill line: 283-1350

- Dental Clinic** 283-2672
 - Monday - Friday: 7:00 a.m. - 5:00 p.m. (Thursday afternoons - urgent care only)

- Eye Clinic** 283-2748
 - Monday - Friday: 7:00 a.m. - 5:00 p.m.

- Environmental Health - Car Seat Day** 283-2844
 - Every Tuesday: 8:00 a.m. - 5:00 p.m.

- Diabetes/Internal Medicine Clinic** 283-2689
 - Monday - Friday: 8:00 a.m. - 5:00 p.m. (Some evening hours available.)

- Cardiac Rehabilitation** 283-2960
 - Monday, Wednesday, Friday: 8:00 a.m. - 12:00 p.m. (in Physical Therapy Dept.)

- Mental Health** 283-2831
 - Monday - Friday: 7:00 a.m. - 6:00 p.m.

- OB/Gyn (Women's Health) Clinic** 283-2460
 - Monday - Friday: 8:00 a.m. - 5:00 p.m., except Tuesday start at 9:30 a.m.

- Ear/Nose Throat (ENT) Clinic** 283-2679
 - Wednesdays: 8:00 a.m. - 5:00 p.m.

- Occupational Therapy** 283-2593/2594
 - Monday - Friday: 8:00 a.m. - 5:00 p.m.

- Orthopedic Clinic** 283-2660
 - Tuesday: 8:00 a.m. - 5:00 p.m. • Thursday: 8:00 a.m. - 12:00 noon

- Physical Therapy** 283-2659
 - Monday - Wednesday & Friday: 8:00 a.m. - 5:00 p.m.
 - Thursday: 8:00 a.m. - 12:00 noon

- Speech Pathology** 283-2593/2594
 - Monday - Friday: 8:00 a.m. - 5:00 p.m.

- Surgical Clinic** 283-2660
 - Monday, Wednesday & Friday: 8:00 a.m. - 5:00 p.m.

- Extended Hours (Evening) Clinics** (Selected Nights, Monday - Thursday)
 - Diabetes Prevention: 283-2689 • Diabetes/Internal Medicine: 283-2689
 - Family Medicine including physical exams: 283-2458

- Dinnebito Clinic** 725-3110
 - Tuesday: 10:00 a.m. - 2:00 p.m., (except holidays) • Diabetes Clinic: Quarterly

ALL CLINICS CLOSED ON HOLIDAYS

TCRHHC Employee Fiesta!

A day of games, balloons, prizes, music, family fun and great Mexican food was held for TCRHCC staffers on June 7, 2008. Approximately 300 employees and their families attended. The event, sponsored by the Awards Committee was held on the hospital grounds from 11:00 a.m. to 3:00 p.m. The event was held to build comradere and for families of employees to get to know each other and enjoy a day of fun. Length of service awards were given out for 10, 20, 30, 35 and 40 years of service. Dr. Gary Lake was honored as he is leaving after 17 years of service. The committee hopes to have a similar event on an annual basis.



Games for kids.



Dr. Lake honored.



Staff and families bust a move.



Awards Committee

Lynn Billy, Chairperson, Lisa Begay, Co-chair,
 Jennifer Treadway, Secretary, Jenna Navarro, Treasurer,
 Ferlin Begay, Bernadine Thompson, Judy Kewanyma,
 Julie Lindholm, Renee Mata, Ivy Multine, Steve Navarro,
 Shannon Newland, Earl Riggs, Travis Walters

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