For the past three months, employees at Melissa Memorial Hospital have been working tirelessly to put the new Electronic Medical Record (EMR) to use.

At the Jan. 22 monthly board meeting, MMH administrator John Ayoub hailed the switch from papers in folders to this new electronic version as “the biggest cultural change in this organization ever. Bigger than building the new building, bigger than moving from doctors to nurse practitioners, bigger than anything you can think of.”

Now that the attestation period has come to an end, the district is in the process of proving that they have met the government-set standards for meaningful usage of the technology. Upon approval, the government will partially compensate the district for the expenses related to buying the new equipment.

Incentives were set up by the government to persuade hospitals to adopt the available technology quickly. Down the road, the incentives will disappear, and in a few years there will be punishments doled out to those who have refused the new services.

“We’re still getting used to it,” Ayoub said. “I think we’re getting better, and we have gotten to the point where we meet the minimum standard that the government has set, but we’re not an organization that wants to just meet any minimum standard. We want to do what’s absolutely best for our patients and for our community.”

**Medication Reconciliation Program planned**

Throughout the month of February, MMH will be available from 8 a.m. until noon on Mondays to help residents with their medication needs.

A common problem faced by doctors is that patients may be taking a variety of medications provided by multiple doctors. This can be a dangerous scenario as many drugs should not be mixed.

The purpose of this program is to give patients a platform to have all of their prescriptions recorded by the staff, with the information saved onto the EMR for future usage, as well as to help explain what drugs should be taken and on what days.

Although only slated for February, the medication assistance may become more regular if it is widely used.

**Financial report**

November was an uncharacteristically slow month for MMH, CFO Greg Was reported during the January hospital board meeting.

During the month, there were only 35 patient days for an average of 1.2 a day, down from the three patients per day average. The hospital was 84 days below budget, and the clinic was 94 visits under budget for a loss of $180,000 during the month.

Although Ayoub described November as the worst month in four or five years, the hospital is still in good financial standing. December was much more profitable, and although the final numbers are not in, the hospital expects to see $200,000 in profits for the year.

Some of the inactivity for November could be attributed to the late start to the flu season. The flu usually hits in October, but Holyoke is just now starting to see the increase in cases.

## Other business

In other business Jan. 22, board members:

-—announced that Robert Killorin, the traveling occupational therapist, will be leaving the district. His replacement is Amy Kloess out of North Platte, Neb.

-—agreed to an incentive bonus of $500 for full-time employees and $250 for part-time employees for their work with the EMR.

-—approved credentialing of Richard Amesquita, D.O., general medicine; Chris Schults, P.A., cardiology; Gary Bauerle, P.A., radiology; Ahmad Shihabi, M.D., cardiology; Timo Quickert, M.D., radiology; Warren Tripp, M.D., ophthalmology; Dan Kreider, M.D., radiology; Laura Marinello, P.A., cardiology.

-—noted the next board meeting will be held Tuesday, Feb. 26 at 5:30 p.m.

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