

Kremmling Memorial Hospital District dba Middle Park Health Annual Review of Services

ABOUT

Located in the heart of the mountains, Kremmling Memorial Hospital District, dba, Middle Park Health, was established in 1933 and has been dedicated ever since to quality patient care. MPH is a 25-bed, Critical Access Hospital system serving patients in Grand, Jackson, and northern Summit Counties.

We have two hospitals: one in Kremmling and one in Granby. Hospital services provided range from outpatient intravenous therapies to extended care services. We offer state of the art diagnostic and laboratory testing. We have five family practice clinics: one located at the hospital in Kremmling, another at the hospital in Granby, one in Winter Park, one in Grand Lake which opened in June of 2019, and one in Walden—North Park Medical Center. Our doctors provide an array of outpatient services ranging from general surgery, podiatry, orthopedics, gastrointestinal, women's health services, wound care, and rehabilitation.

Our Granby campus expanded approximately 8,000 square feet during summer of 2021 to accommodate two new units. We have expanded our inpatient unit 6,000 square feet to care for medical and surgical patients. Our Granby Clinic added 2,000 square feet on the east side of the existing building. This space includes seven exam rooms and a treatment room. In addition, we have expanded our inpatient unit 6,000 square feet to care for medical and surgical patients.

Our Kremmling campus opened a brand new 14,500 square foot hospital in the summer of 2021. This includes two emergency exam rooms, two trauma bays, and three inpatient rooms. The new primary care clinic includes six exam rooms and a treatment room. Finally, the CT and X-ray suites were upgraded. The existing hospital still remains and will be used for swing, rehabilitation, and extended care patients.

PURPOSE

To document Middle Park Health's (MPH) compliance with Federal regulations and Critical Access Hospital (CAH) Conditions of Participations for CAH (CFR § 485.641): The CAH carries out or arranges for a periodic evaluation of its total program. The evaluation is performed at least once a year and includes a review of the utilization of CAH services, including at least the number of patients served and the volume of services; a representative sample of both active and closed clinical records; and an annual review of policy and procedures.

As a Critical Access Hospital (CAH), Middle Park Health performance review process touches on volume of service, type of service, improvements, trends, concerns and department specific accomplishments. The Leadership team develops action plans for commented areas of concern and then determines what, if any policies or processes should be revised or implement

DATA SOURCES

Information used for this Annual Report was obtained through the following mechanisms:

- 1. Utilization review
- 2. Committee and department minutes
- 3. Incident and variance reports
- 4. Patient satisfaction and complaint data
- 5. Statistical reports
- 6. Other reports as applicable

REVIEW PROCESS AND FOLLOW UP

The Quality and Patient Safety Committee, under direction of the Quality Director, coordinates information gathering and develops an annual review report. The report is reviewed and discussed at the Quality and Patient Safety Council meeting. The report, which includes findings and recommendations, is then presented to Senior Leadership Team for review and identification of areas for improvement that align with MPH strategic goals and objectives. The report is presented to the Hospital Board for review and input. The Quality and Patient Safety Council uses the Board of Directors and Leadership feedback to guide the subsequent year's Quality Improvement Plan.

CURRENT SCOPE OF SERVICES

Emergency Services

Trauma Level IV Designation 24/7 Emergency Department (ED)

Urgent Care

Medical Services

Inpatient

Outpatient

Swing Bed

Surgical Services

Wound Care

Diagnostic Services

Laboratory

General x-ray

Computerized Tomography (CT)

Ultrasound

Mammography

Magnetic Resonance Imaging (MRI)

Bone density screening

Echocardiography

Stress testing

Ambulatory Care

Granby Clinic

Kremmling Clinic

Grand Lake Clinic

North Park (Walden) Clinic

Winter Park Clinic

Annual exams and preventative care

Adult and pediatric immunization

Telemedicine

Physical therapy (PT)

Speech therapy

Occupational therapy (OT)

Dietary services

Cardiac rehabilitation

Community Health Services

Behavioral health navigation

Sports physicals

Nutritional counseling

Annual health fairs

Discharge planning

Certified application assistance

UTILIZATION OF SERVICES

NOTABLE SERVICE UTILIZATION TRENDS FOR 2021 COMPARED TO 2020

Inpatient days ↓ 33%	Kremmling Urgent Care Visits ↓ 31 %
Swing Care Days ↑ 5%	Rehabilitation procedures ↑ 22 %
Extended care days ↑ 50%	Winter Park Clinic ↑5%
Surgery cases ↓ 10 %	Granby Clinic ↑ 36 %
Gastrointestinal (GI) Cases ↑ 54 %	Kremmling Clinic ↑ 17 %
Emergency Room visits ↑ 13%	North Park (Walden) Clinic ↓ 3%
Lab procedures ↑ 22%	X Ray Procedures ↑ 26%
CT procedures ↑ 20%	MRI Procedures ↑43 %

Average length of stay for inpatients: 3.1 days (75 hours) in 2021 compared to 2.1 days (50.4 hours) in 2020. The length of stay by hours continues to meet the 96 hours annual average CMS regulatory requirement for CAH status. This increase in length of stay is attributable to the opening of the Granby Inpatient unit as well as our increased ability to keep patients diagnosed with COVID.

Emergency Department & Inpatient

- Opened new Emergency Department in Kremmling
- Opened new 7-bed inpatient unit in Granby
- Held annual skills & competency day for all clinical staff in ED/Inpatient/Clinic and more
- Implemented weekly physician touchpoint to discuss concerns and collaborate
- Purchased 2 new ventilators and 4 heated high flow nasal cannula systems
- Added additional 24-7 staffing to Granby inpatient unit and added 1 additional RN or CCT to Kremmling ED to help with 24-7 staffing
- Hired 6 season RNs and CCTs to supplement travelers in the ED/inpatient units during busy season

Surgical Services

- Over the past year, we have successfully maintained and increased our service line with specialties and options for the residents and visitors of Grand County. MPH added Vail Summit Orthopedic Group to the staff and also started performing Pain Injections with Nerve Root Ablations.
- Surgical Services and Procedures
 - Successful Total Joint program performing Total Knee Arthroplasty, Total Hip Arthroplasty, and Total Shoulder Arthroplasty with overnight accommodations.
 - Sports Medicine arthroscopic procedures including shoulder, knee, wrist and elbow
 - o ACL reconstructions, shoulder rotator cuff repairs, and other indicated procedures
 - Orthopedic Trauma tibia and femoral intramedullary nailing, ankle fractures, hip fractures, wrist fractures, clavicle fractures, and hand surgery
 - General surgery laparoscopic procedures including laparoscopic hernia repair, laparoscopic cholecystectomies, laparoscopic appendectomies, and other indicated procedures
 - o Endoscopy procedures including EGD, esophageal dilatation, and colonoscopy
 - o Epidural steroid injections, including nerve root ablations
- Equipment
 - Hana and Jackson table modular system for large bone cases
 - Harmonic scalpel system laparoscopic cases
 - o 75 inch monitors increase visualization of MRI and CT images during surgery
 - System 8 Drill and Saw combo (2) for large bone and orthopedic cases
 - Stryker Fulguration generator
 - o Stryker Spy video system
 - Arthrex ACP centrifuge ability to spin and inject cells back into surgery sites
 - Updated instrument sinks to Steris Smart Sinks for best practice
 - New patient monitors for pre-op and PACU

Labs

- GenMark Eplex PCR analyzer was introduced in the Kremmling lab to perform respiratory viral panels
- New lab in Kremmling more space which allows us to introduce new analyzers when demand is needed
- Approximately 5000 COVID tests performed between in-house testing and specimens sent to the state lab

Rehabilitation

- Rehab Services Success in 2021
 - Press Ganey Likelihood to Recommend 95%
 - Volumes up 22% from 2020 (1% over 2019), Fraser increased volume 25% two years in a row
 - Inpatient volumes increased over 40% in 2020
 - Saved \$175,000 in salary expenses (18% under budget)
 - Gross revenue 4.4 million (31% variance over budget)
 - Net operational income 53.8% better and projected budget
 - o Improved department efficiency within a visit: 2.85 units per visit (2.7 in 2020)
 - Voted 2nd place in "Best of Grand" for Fraser PT clinic
 - Launched restorative nursing program at Kremmling extended care
 - Hired full-time PT with previous Olympic representation
 - Hired Certified Hand Therapist full-time to support Surgical Services and Inpatient growth
 - 2 providers received Level 1 Certification in Functional Dry Needling and as Clinical Instructors
 - Staff serve on multiple hospital committees: Team Innovate, Zero Suicide Committee,
 Inpatient Optimization Committee, Outpatient Optimization Committee
- Community Involvement
 - Provided over 350 hours of athletic training and sports therapy services to Kremmling/Granby schools.
 - Hosted 2 pre-season sport physical days at area high schools, including baseline concussion screening
 - 5 community presentations
 - 1. Benefits of Physical Activity
 - 2. Concussion Education for Coaches
 - 3. Mountain Bike Related Injuries
 - 4. Chronic Pain
 - 5. Pelvic Floor
 - Sarah Tey selected to travel with US Paralympic Snowboard medical team for 2 competitions in Finland and Austria.
 - Hosted 2 physical therapy students from Regis University and University of Colorado
 - Athletic trainer was a guest lecturer at high school sports health class and lead therapeutic taping lab

Rural Health Clinics

- Surveys
 - We successfully passed four Rural Health Clinic (CMS) surveys in 2021 without deficiencies.
- Both Kremmling and Granby moved into the new clinic spaces
- Patient Satisfaction
 - Through meaningful interventions of, "Thanking our patients for allowing us to take care of them," and daily reminding ourselves of, "Every patient, every time." We have been able to increase our Press Ganey score on "Likelihood to Recommend Practice" from 91.3% in January of 2019 to 100% three times throughout 2020 and 2021! Since May of 2020 the Primary Care clinics have been in the top 5% of all clinics in the nation (that participate in the Press Ganey program).
- Specialty Clinic
 - In October of 2021 the specialty clinic provider's and billing (for those who bill through MPH) started out of the RHC. This allows for greater Medicare/Medicaid reimbursement. This also allows for cross training and support across both primary and specialty for greater patient outcomes and satisfaction.
- Participation in the Colorado Health Neighborhood
 - Med Adherence to Statins for Patients with Chronic Vascular Disease (CVD) (High Cholesterol)
 - Med Administration of Statins to Patients with CVD
 - Diabetic HbA1C testing
 - Medication Adherence for Comprehensive Diabetic Patients
- Quality Payment Programs (QPP)
 - o In collaboration with the Quality Director, the Primary Care Clinic's quality data was submitted to the QPP earning us 88.38/100 on the four categories (Quality, Promoting Interoperability, Improvement Activities, and Cost). This score equates to a 0.50% increase in Medicare Part B payment, payable across the entire organization!

Diagnostic Imaging

- In 2021, the Diagnostic Imaging department at Middle Park Health provided the following services and achieved the following successes
- Provided and performed over 13,000 imaging exams
- Completed upgrade of Magnetic Resonance Imaging (MRI) scanner, hardware, and software from 16x to 23x (improved image quality)
- Increase in imaging procedures from 2020 to 2021
 - MRI increase of 43%
 - o CT increase 20%
 - C-Arm Flouroscopy increase 345%
 - Overall increase across all modalities and all locations (hospitals and clinics) 20%

- Moved into a new x-ray room at Kremmling facility, upgraded floor-mount tube to overhead tube support, upgraded operating system and software. Improved versatility and ease of use.
- Passed annual FDA MQSA (Food and Drug Administration Mammography Quality Standards Act) inspection for Mammography services
- Replaced ultrasound machine with newer technology
- Provided C-Arm support for Pain Management procedures

Facilities/Plant Operations

- Completed new construction in Granby and Kremmling. Opened new inpatient wing and clinic in Granby. Opened new ED, Clinic, Lab, Imaging and inpatient wing in Kremmling.
- Worked with All the Trades involved with the new buildings to implement all the new equipment and to complete commissioning.
- Began improvements on the Wellness Center (windows, paint, landscape)
- Improved the old clinics in Kremmling and Granby with paint, exterior work, and chipping the grout. The old clinic in Granby will become specialty and the old clinic in Kremmling will become admin offices.
- Install emergency gate in Granby
- Installed new hot water heater at Cliffview
- Remodel several rooms at Cliffview
- New boiler in Wellness Center
- Hired three new staff to complete the maintenance team
- Promoted two new Maintenance leads
- Continue with the day-to-day maintenance for 7 sites

Medical Staff Changes Since the 2020 Annual Review

The following provider resigned:

- William Rose, MD
- Jennifer Merten, FNP
- Julie Knauf, PNP

CLINICAL RECORD REVIEW

In compliance with CAH regulations CFR 485.641(a) (1) (ii), a representative sample (at least 10%) of both active and closed clinical records were reviewed in the past year. Included in the review were inpatient, emergency room, and ambulatory records. Both concurrent and retrospective reviews were conducted for completeness, accuracy, consent and advance directives, medical necessity, and adherence to protocols and standards of care.

Indicators that Trigger Medical Record Review

- Hospital deaths
- Cases involving patient and/or staff complaints
- Readmissions
- Transfers
- Adverse drug events
- Trauma cases
- Hospital acquired conditions
- Codes

- Clinical quality measures
- Against Medical Advice (AMA)
- Left Without Being Seen (LWBS)
- Sepsis

Medical Case Review for Quality Improvement

Concurrent and retrospective record reviews are conducted by department Directors for the following clinical measures:

- 100% Heart Attack (AMI)
- 100% Stroke Patients
- Surgical Site Infections
- Antibiotic Selection and Timing
- 100% Inpatient Flu Vaccine Screening and Administration

100% Inpatient Pneumonia

- 100% Heart Failure
- 100% Venous Blood Clot (VTE)
 Prophylaxis for Applicable Patients
- Trauma Team Activations
- Trauma Admissions

Other cases reviewed include those not meeting Meaningful Use criteria and cases representing quality or risk management issues.

Quality Reporting

- MPH has attested for Stage 3 Meaningful Use for the hospital and clinics
- MPH has attested for MIPS for clinic providers
- MPH has submitted application and implementation plan documents for the ongoing 5-year Hospital Transformation Program (HTP)
- MPH reports data to the Medicare Beneficiary Quality Improvement Project (MBQIP)
- MPH reports data to Hospital Quality Incentive Payment (HQIP) Program
- MPH reports data to Colorado Department Public Health and Environment's (CDPHE) Clinic Quality Improvement for Population Health
- MPH reports data to the CDC's National Healthcare Safety Network (NHSN)

POLICY REVIEW

The Policy Committee reviews all policies submitted after Directors have created, reviewed, revised, and/or archived them. The Board has final approval of all policies. Policies are scheduled for review at least annually and whenever a need for modification is recognized.

* Revised 207 * Retired 27

* New 8

PERFORMANCE IMPROVEMENT AND QUALITY ASSURANCE

Clinical Quality Measures

MPH is compared to other reporting CAH/hospitals, and MPH is meeting the benchmark set for each measure.

Preventable Harm Rates: Hospital Acquired

- Blood Stream Infections: 0
- Catheter Associated Urinary Tract Infections: 0
- Falls: 44
- Adverse Drug Reactions: 0
- Pressure Ulcers: 0
- Central Venous Catheter-Related Infection: 0

Blood Utilization

Clinical research has shown that restrictive transfusion practices are generally associated with better patient outcomes as well as reduced health care resource utilization. This evidence has emerged as providers are increasingly being urged to implement evidence based clinical decision guidelines that improve the quality and efficiency of the care they deliver and measure patient outcomes. High CTR implies that crossmatches were performed unnecessarily when a Group-Screen and Hold (GSH) would have sufficed. Excessive cross matching, in addition to being wasteful of resources has adverse consequences on management of blood inventory and blood quality as blood is unduly held in reserve, oftentimes moved between fridges and may remain out of optimum storage temperatures while blood is crossmatched. The national blood quality indicator requires that CTR should be below 2.0

GRANBY BLOOD BANK	KREMMLING BLOOD BANK
# Patients transfused 18	# Patients transfused 6
# Crossmatched units 47	# Crossmatched units 7
Crossmatch-Transfusion Ratio (CTR) 0.5	Crossmatch-Transfusion Ratio (CTR) 1
# single unit transfusion 2	# single unit transfusion 7
Total # transfusions 21	Total # transfusions 7

SUMMARIES AND OTHER NOTABLE IMPROVEMENTS

Middle Park Health's leadership remains focused on providing safe, compassionate care to the communities of Grand, Jackson, and Northern Summit County by providing a broad range of health care services directed to their needs. The following milestones and goals have been achieved in 2021:

- Opening of both the Kremmling and Granby facilities new construction.
- Implemented COVID-19 PCR and antibody testing.
- Initiated COVID-19 vaccine program, administering over 10,000 COVID vaccines to the community.