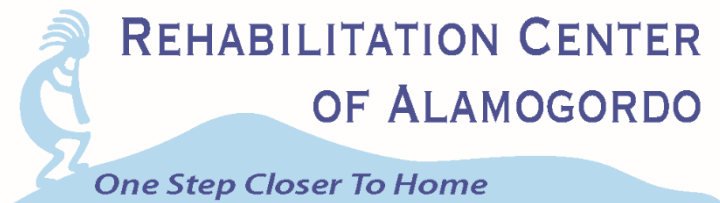


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# Strategic Plan 2017



# Executive Summary

The following is a summary of the information shared in this Operations Review and Plan. This plan highlights operational achievements and challenges, clinical outcomes and targets, market analysis and measurements of stakeholder expectations at Gerald Champion Regional Medical Center. The plan is shared and discussed with hospital administration and staff. The plan results in a specific focus and related strategies for the IRF. Data is from the 2016 cost report year to date.

Stakeholder input is gathered in several ways. Patients are given the opportunity to provide feedback, the SWOT analysis is based on information from the IRF staff, physicians and case management. One other important way of determining stakeholder needs is through analysis of data submitted to CMS and one-to-one probing for needs and wants. Overall patient discharge to home exceeds national average and expectation. A bed demand based on demographic data is also reviewed to help determine financial position and potential of the IRF.

Data from these reports help formulate goals for the upcoming year. Currently, the unit is admitting less than 75% (63.8%) of total referrals and exceeds 60% compliance requirement.

A zip code analysis illustrates the catchment area of the hospital. External marketing efforts must broaden the target area and increase the outlier referrals and admissions. GCRMC is a not-for-profit hospital that accepts all payor sources: Medicare, Medicaid and limited Managed Care, each of these must be maximized to exceed budgeted patient day numbers.

# Strengths

- Committed and dedicated IRF staff
- Physician and staff documentation supports the “reasonable and necessary” criteria for an Inpatient Rehab admission
- Transfer reductions YTD 4% of net revenue
- Stabilized hiring of permanent therapy staff increased to 75% in last 12 months
- Bedside Team Conference with the patient and family
- Experienced MD to provide coverage for Medical Director when off site coverage is needed
- 27 experienced RNs and therapists

# Challenges

- Difficulty in attracting fulltime nursing and therapy staff to rural area
- Inadequate nursing staff to care for >8 patients
- Staffing model not acuity based
- Community Works EMR is predicted to increase charting time and decreasing bedside availability
- Director continues to provide direct patient care to cover staffing needs and compensate for higher census decreasing time available for operational needs
- No weekend or incidental coverage for Medical Director

# Opportunities

- Increase referrals for Workers Compensation and commercial payor sources with CARF Accreditation
- Develop Brain Injury and Neuro programs
- Explore staffing models to better meet patient needs
- Provide state of the art/evidence based modalities that have current limited availability (i.e. dysphagia therapy)
- Increase number of nurses on unit with CRRN certification
- Explore & develop Outpatient Rehabilitation clinic
- Increase external marketing statewide
- Collaborate with hospital Cardiac and Stroke designation programs to facilitate better overall outcomes and increase internal referrals
- Collaborate with military bases in provision of services
- Increase conversion of transferred and those identified as “not ready for rehab” patients to IRF admissions.

# Threats

- Regulatory/Industry
  - Future 60/40% compliance changes
  - Continued Federal Regulatory changes
  - Post -Acute industry regulatory changes
- Increase competition for resources
  - Las Cruces, NM
  - El Paso, TX
- Continued shortages with rehab staff and the financial impact of ongoing need for travelers
- SNFs advertising as rehabilitation facilities



# Goals & Objectives

- Operational (All High Priority)
  - Ensure capturing accurate reimbursement of resource utilization
    - Continued audit of accuracy in documentation and coding
    - CMI 1.3 or higher
    - Accurate admission FIM scoring reflecting the burden of care
    - Increase admissions of more medically complex patients
  - Increase LOS efficiency
  - Improve discharge destination to community
  - Decrease discharge to SNF and acute care
  - Increase ADC to 8.0
  - Secure and maintain/retain permanent staff

# Goals & Objectives

- Clinical
  - Ongoing education for FIM scoring for licensed and unlicensed staff (High)
  - Formalize “Graduation Day” with successful/consistent processes in place (High)
  - Patient and Family education to truly begin on admission and throughout stay (High)
  - Training on Cerner Community Works for go-live August 2017 (High)
  - Ongoing education for staff for TBI/Stroke/Spinal Cord Injury/Medically Complex diagnosis specific (Med)
  - CRRN Certification for nurses when eligible (Med)
  - Certifications for Therapists in:
    - Dry Needling
    - Kinesio Taping
    - Vital Stim
    - Tai Chi

# Goals & Objectives

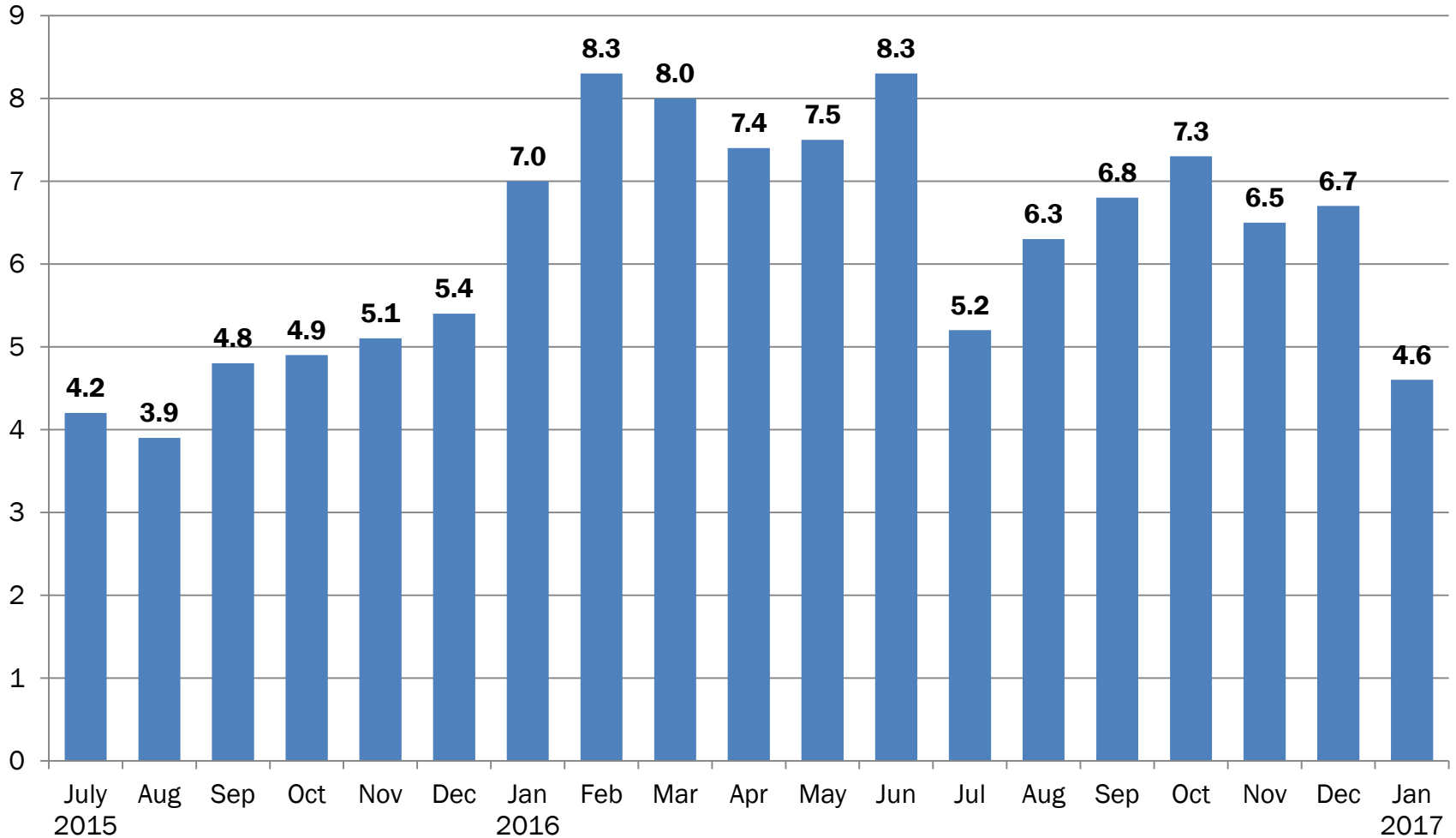
- Marketing
  - Increase external referrals (Q1 2017 -33%) through more formalized and strategic marketing effort (regional marketing program) (High)
  - Ensure capture of transferred patients (High)
  - Explore other potential populations (i.e. cancer patients) (Med)
  - Collaborate with HAFB/WSMR for TBI/Limb loss (Med)
  - Collaborate with Occupational Medicine program as referral source (Med)
  - Explore community/regional FEES program needs (Low)
  - MBSS Outpatient program (Low)

# Occupancy Trending

	Beds	Discharges	Patient Days	Occupancy	ADC	Medicare Utilization	CMI
FYE 2012	12	108	1,449	<b>33.1%</b>	4.0	83%	1.3009
FYE 2013	12	162	2,049	<b>46.8%</b>	5.6	77%	1.2826
FYE 2014	12	158	1,884	<b>43.0%</b>	5.2	75%	1.1772
FYE 2015	12	185	2,205	<b>50.3%</b>	6.0	82%	1.2147
FY 2016	12	192	2,272	<b>51.9%</b>	6.2	82%	1.1792
FYTD 2017	12	118	1,332	<b>52.1%</b>	6.2	86%	1.1500

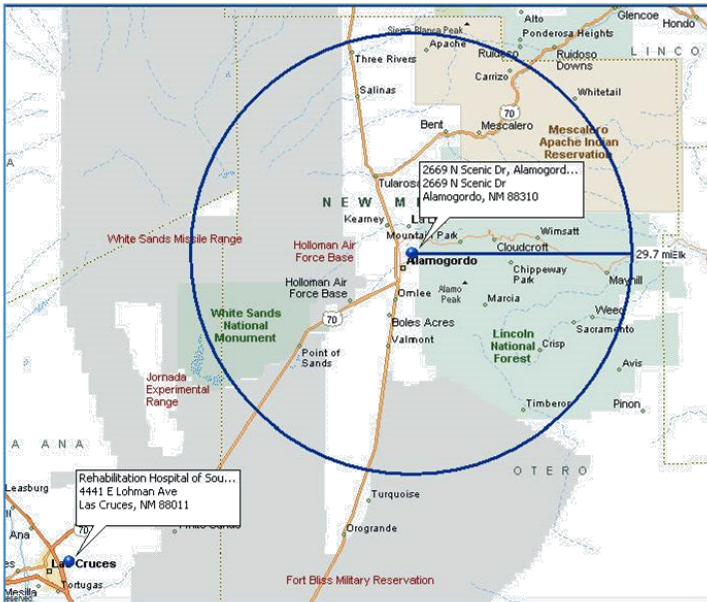
# Average Daily Census

FY 2016 Average: 6.2; FYTD 2017 Average: 6.2



# External Bed Demand

Area Map with Facility Locations



External Population Demand for Inpatient Rehabilitation Based on 30-Mile Radius

Zip	City	County	Distance in Miles from Zip Code 88310	Total Population
88310	Alamogordo	Otero	0.00	35,776
88330	Holloman Air Force Base	Otero	4.06	3,054
88311	Alamogordo	Otero	12.06	854
88325	High Rolls Mountain Park	Otero	15.47	899
88349	Sunspot	Otero	16.35	70
88337	La Luz	Otero	22.63	2,295
88352	Tularosa	Otero	25.22	5,188
88342	Orogrande	Otero	27.47	52
88350	Timberon	Otero	27.58	368
88347	Sacramento	Otero	27.60	100
88314	Bent	Otero	29.11	210
<b>Total Population:</b>				<b>48,866</b>
<b>Population X 13 / 100,000:</b>				<b>6.35</b>
<b>Net ADC:</b>				<b>6.35</b>

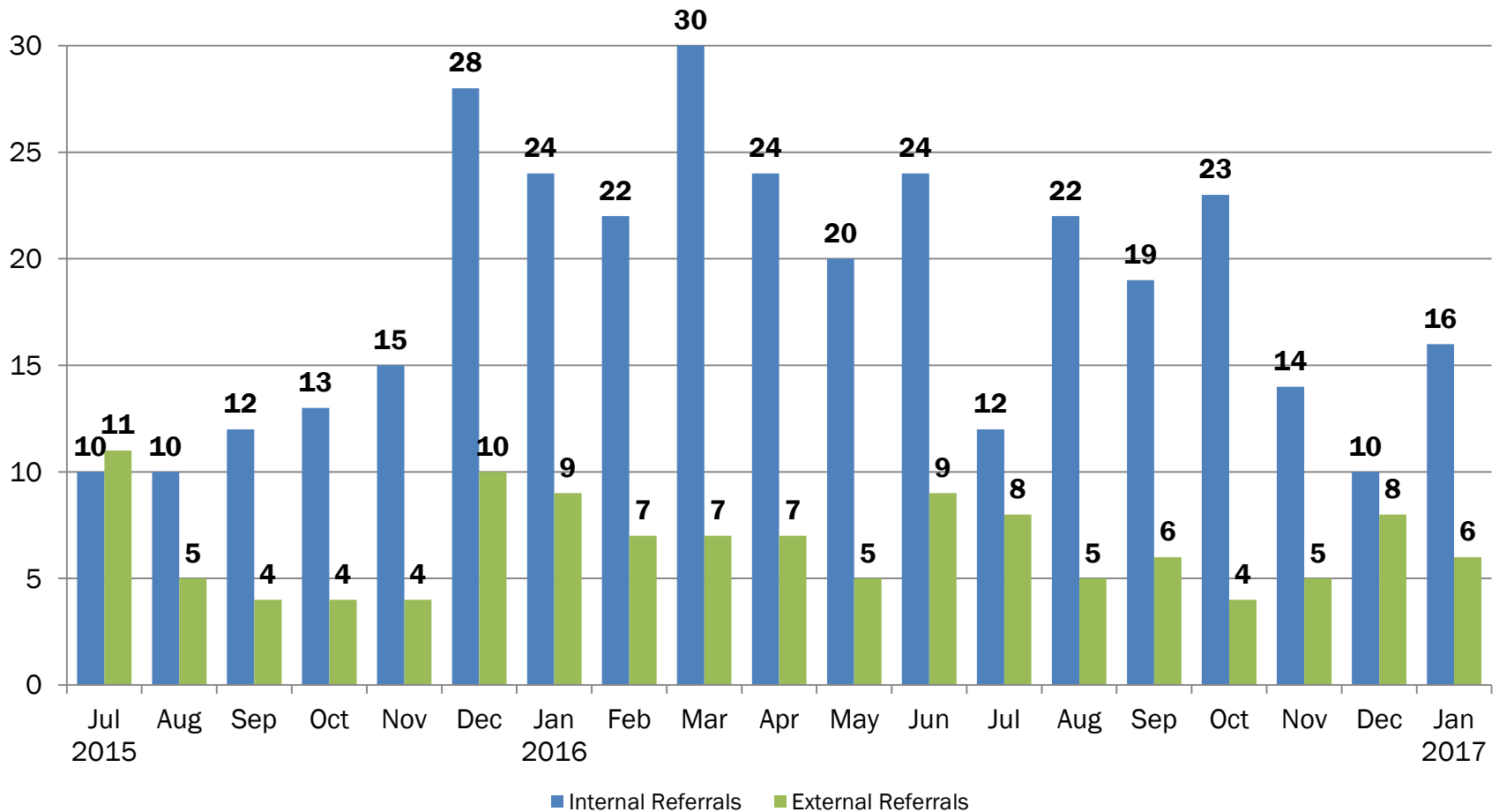
Facilities Within a 50-Mile Radius That Have Inpatient Rehabilitation Beds

Facility	Rehab Beds	2014 Total Patient Days	2014 ADC
Rehabilitation Hospital of Southern New Mexico Las Cruces, New Mexico	40	12,713	34.83

# Referrals

FY 2016 Average: 19.3 Internal, 6.8 External; Total: 232 Internal, 82 External

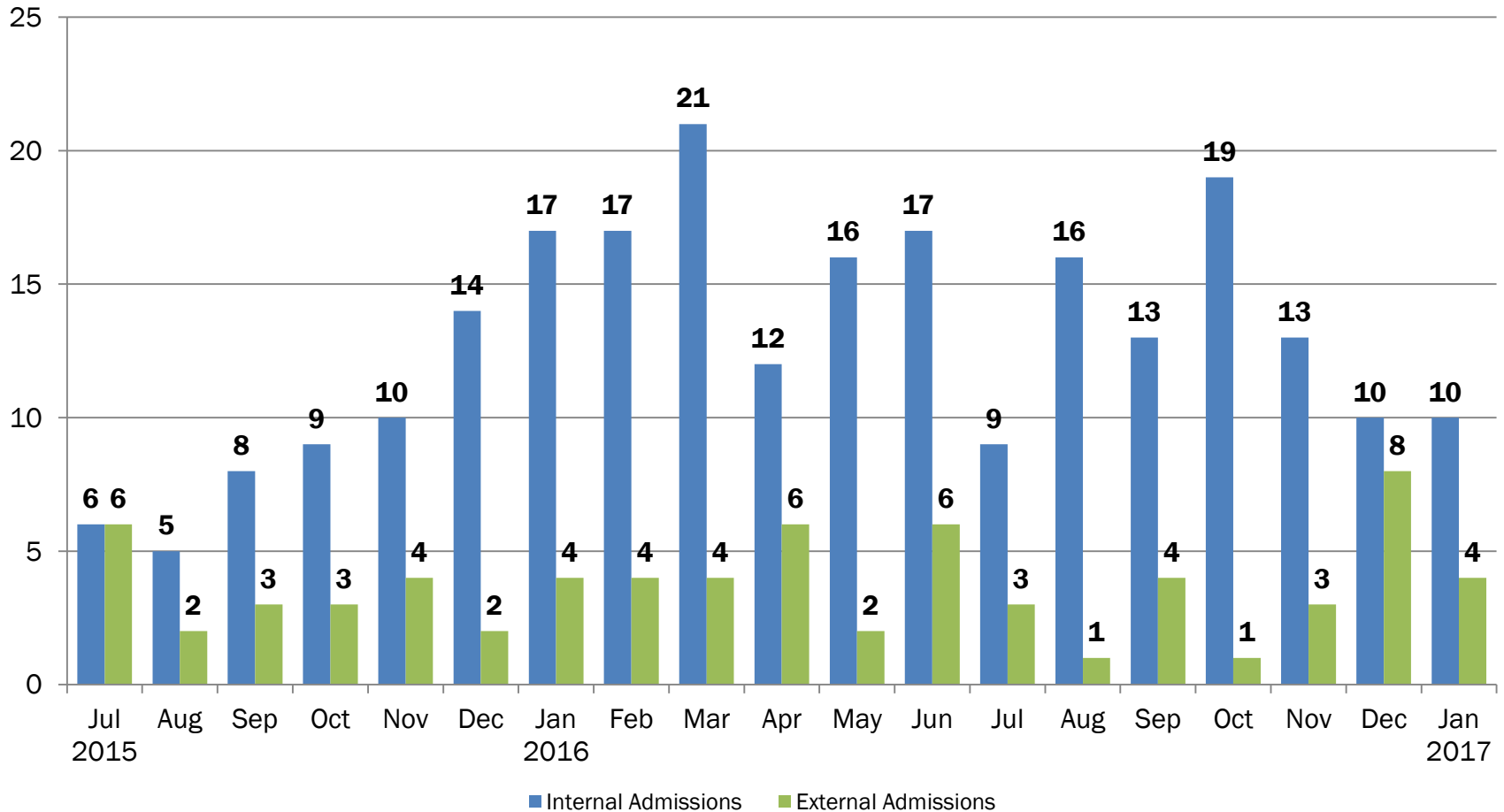
FYTD 2017 Average: 16.6 Internal, 6.0 External; Total: 116 Internal, 42 External



# Admissions

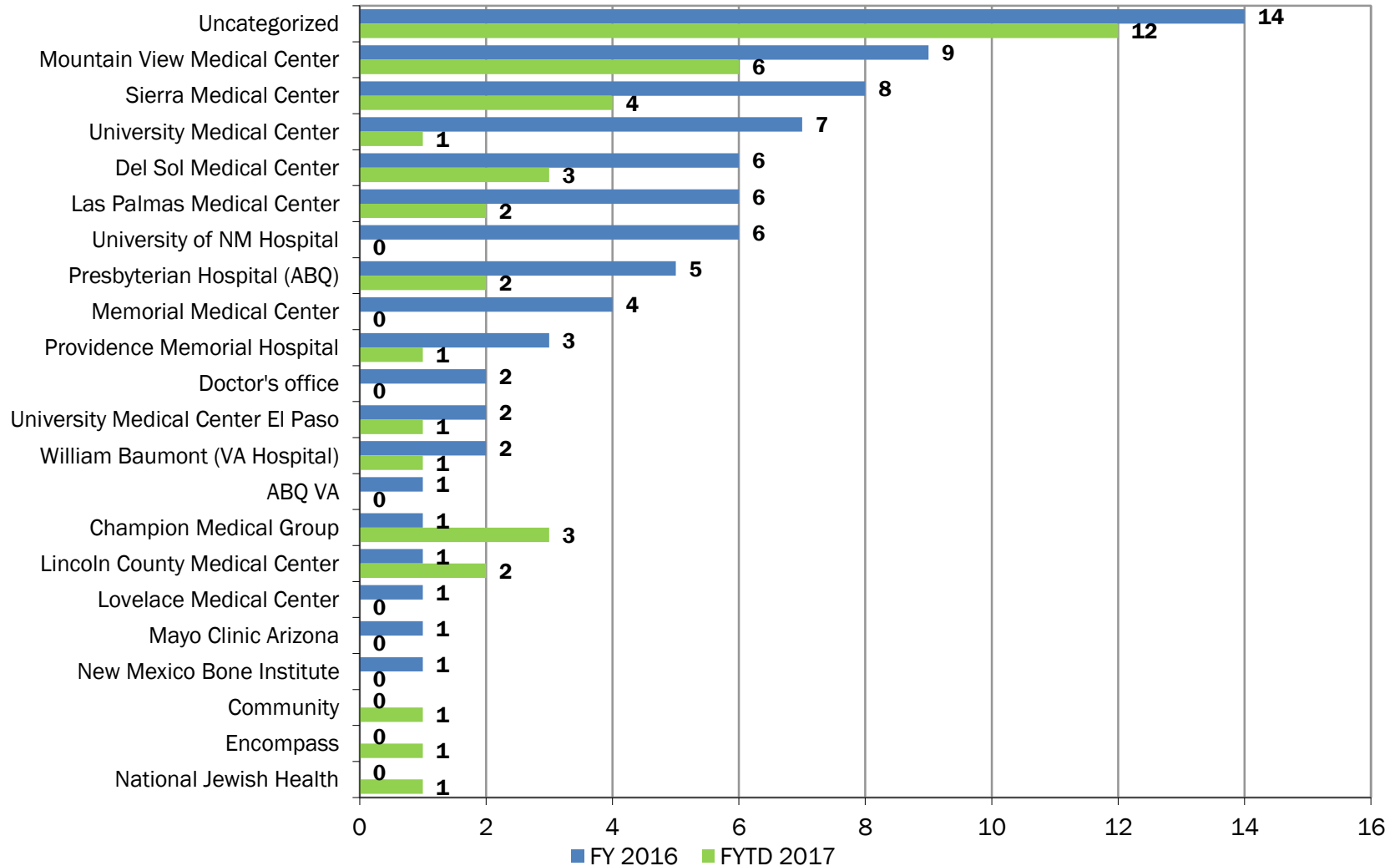
FY 2016 Average: 12.7 Internal, 3.8 External; Total: 152 Internal, 46 External

FYTD 2017 Average: 12.9 Internal, 3.4 External; Total: 90 Internal, 24 External



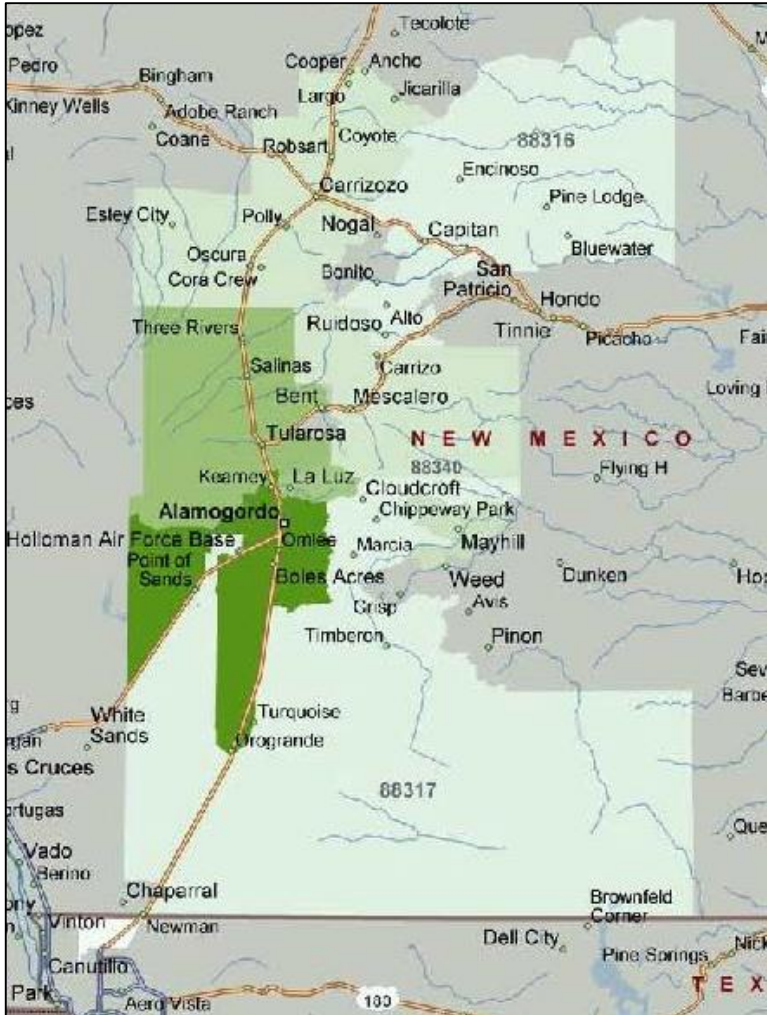


# Origin of External Referrals



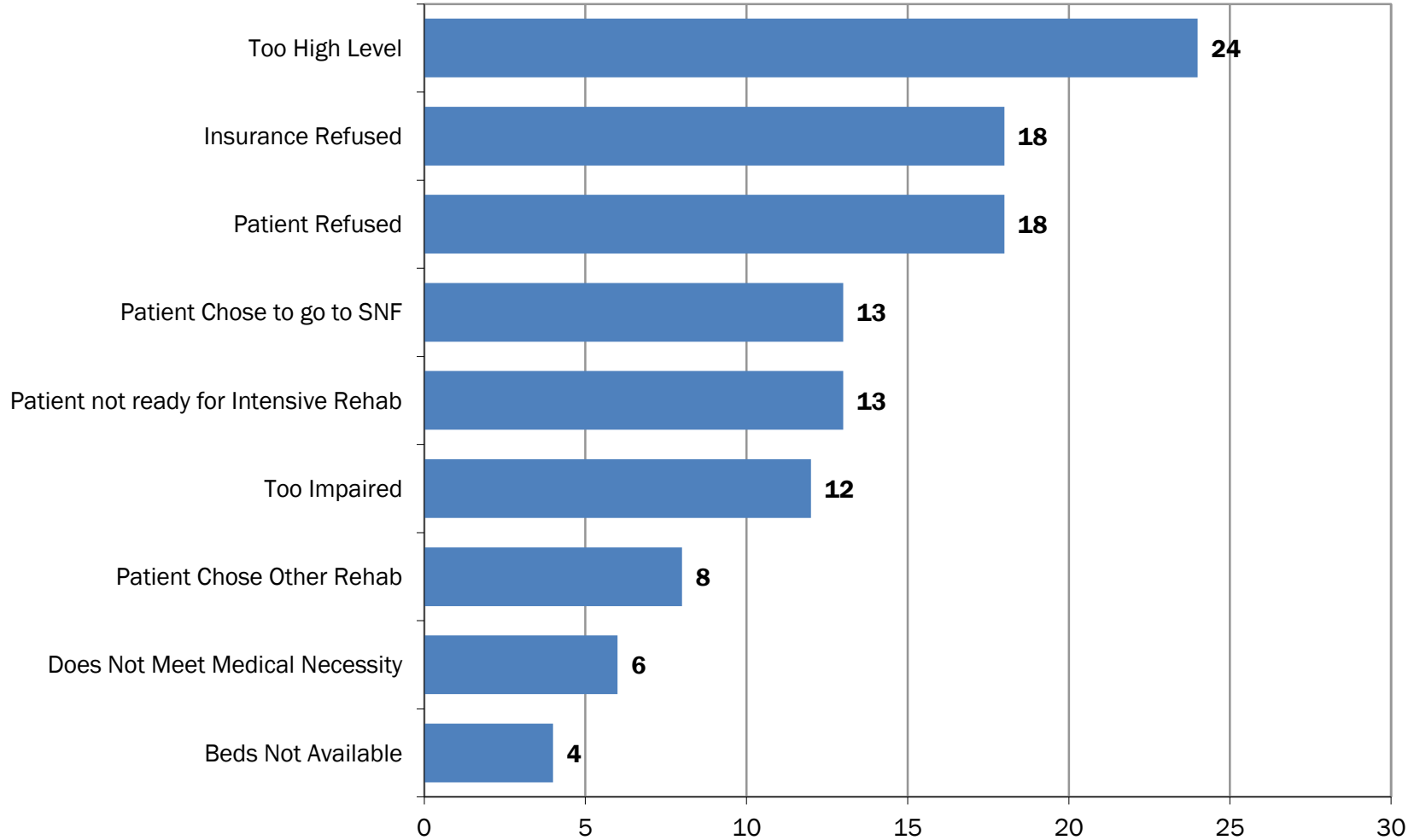
# Patient Demographics

## Zip Codes of Patient Admissions

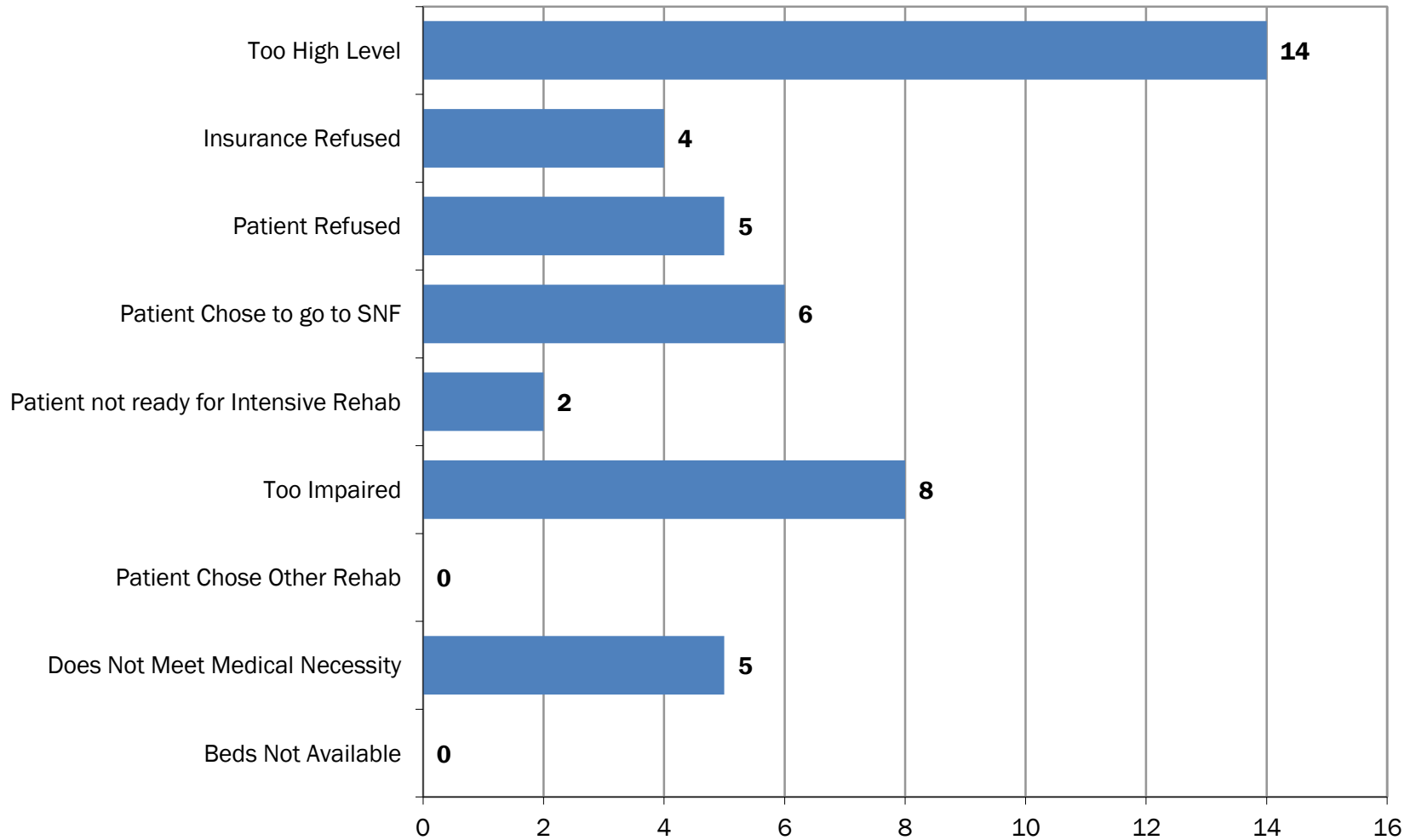


Zip	City	
88310	Alamogordo	102
88352	Tularosa	15
88337	La Luz	11
88339	Mayhill	4
88301	Carrizozo	3
88340	Mescalero	3
88311	Alamogordo	2
88312	Alto	2
88316	Capitan	2
88317	Cloudcroft	2
88325	High Rolls Mountain Park	2
88330	Holloman Air Force Base	2
88345	Ruidoso	2
88355	Ruidoso	2

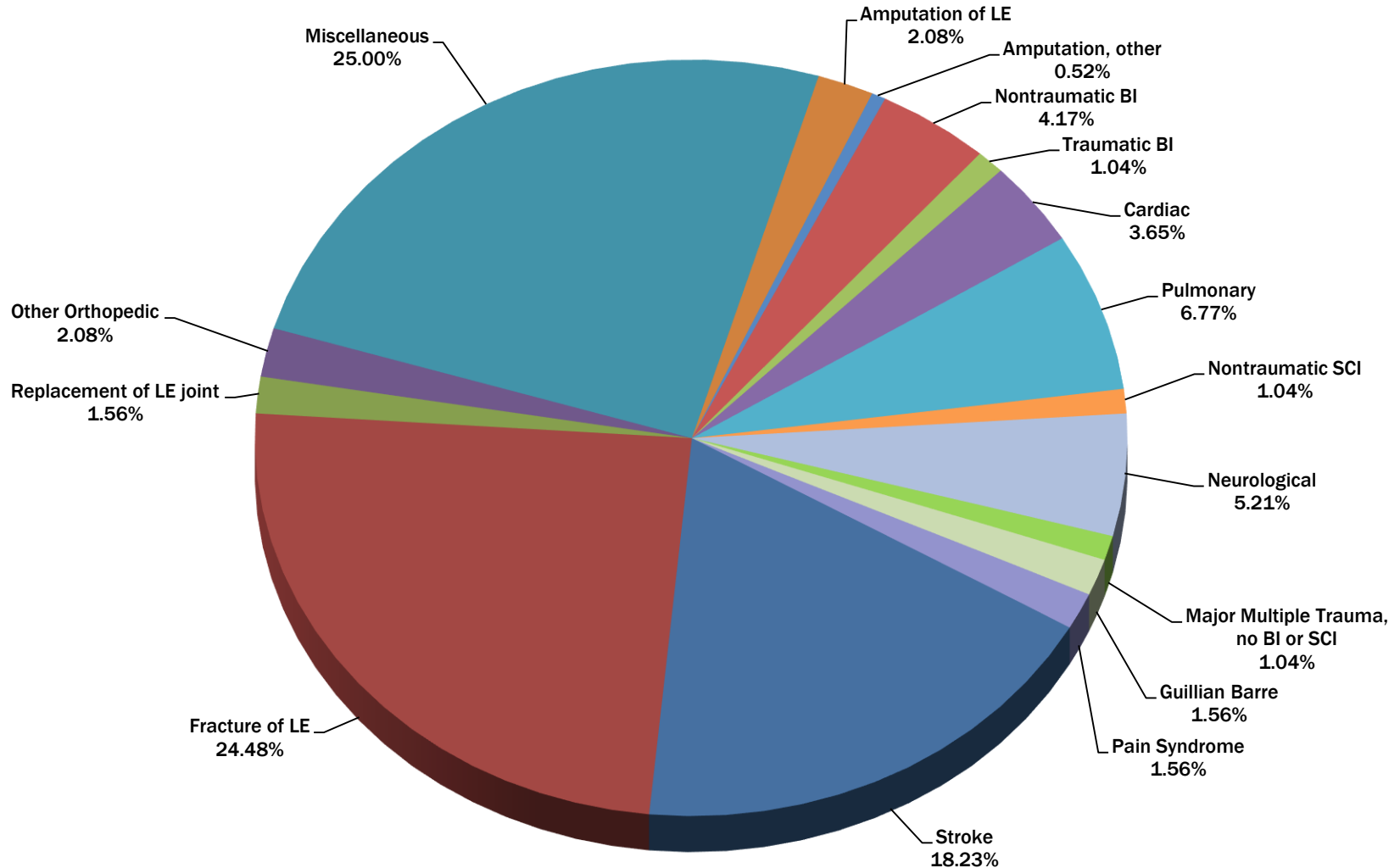
# FY 2016 Reasons for Non-Admissions



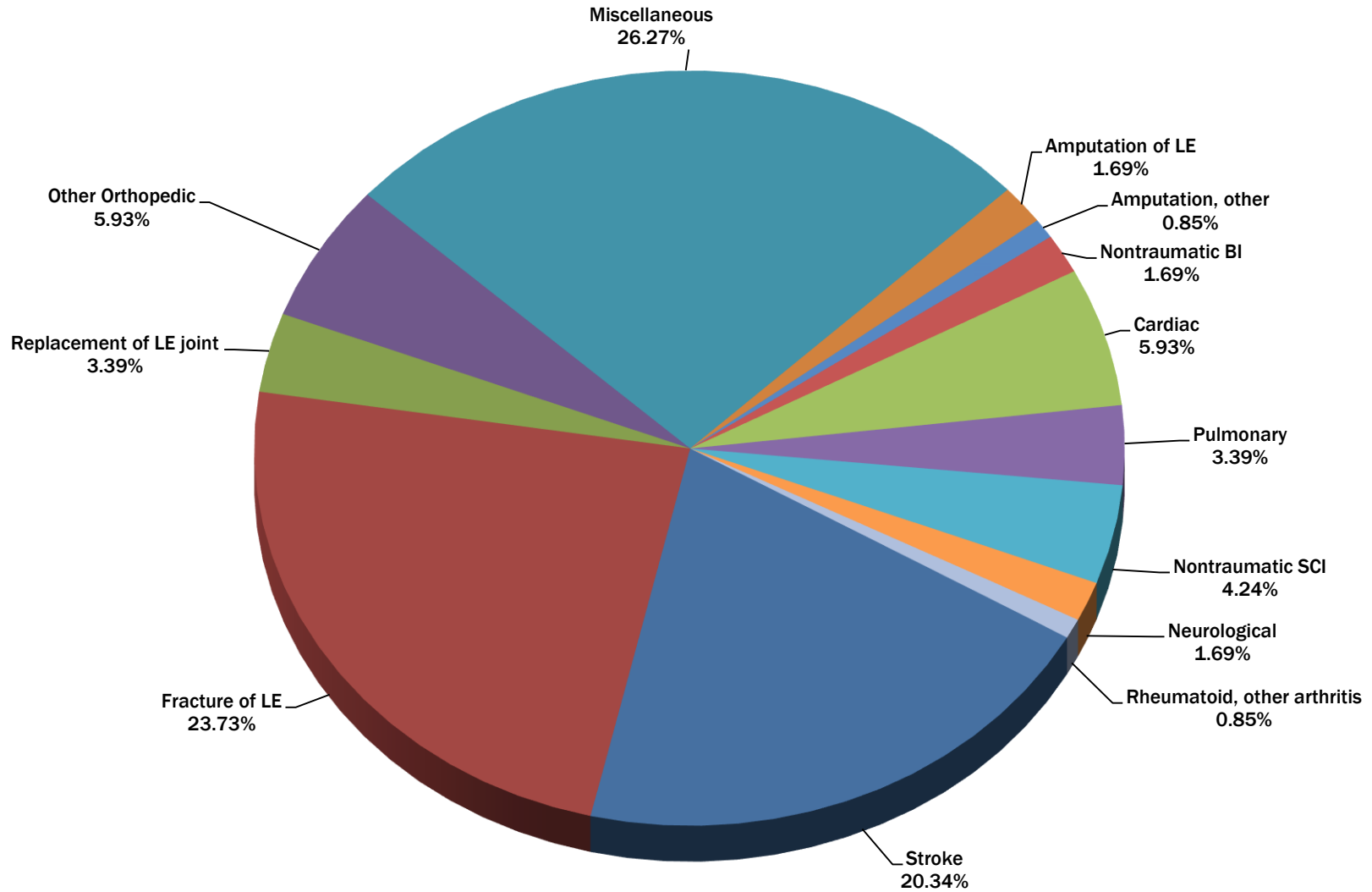
# FYTD 2017 Reasons for Non-Admissions



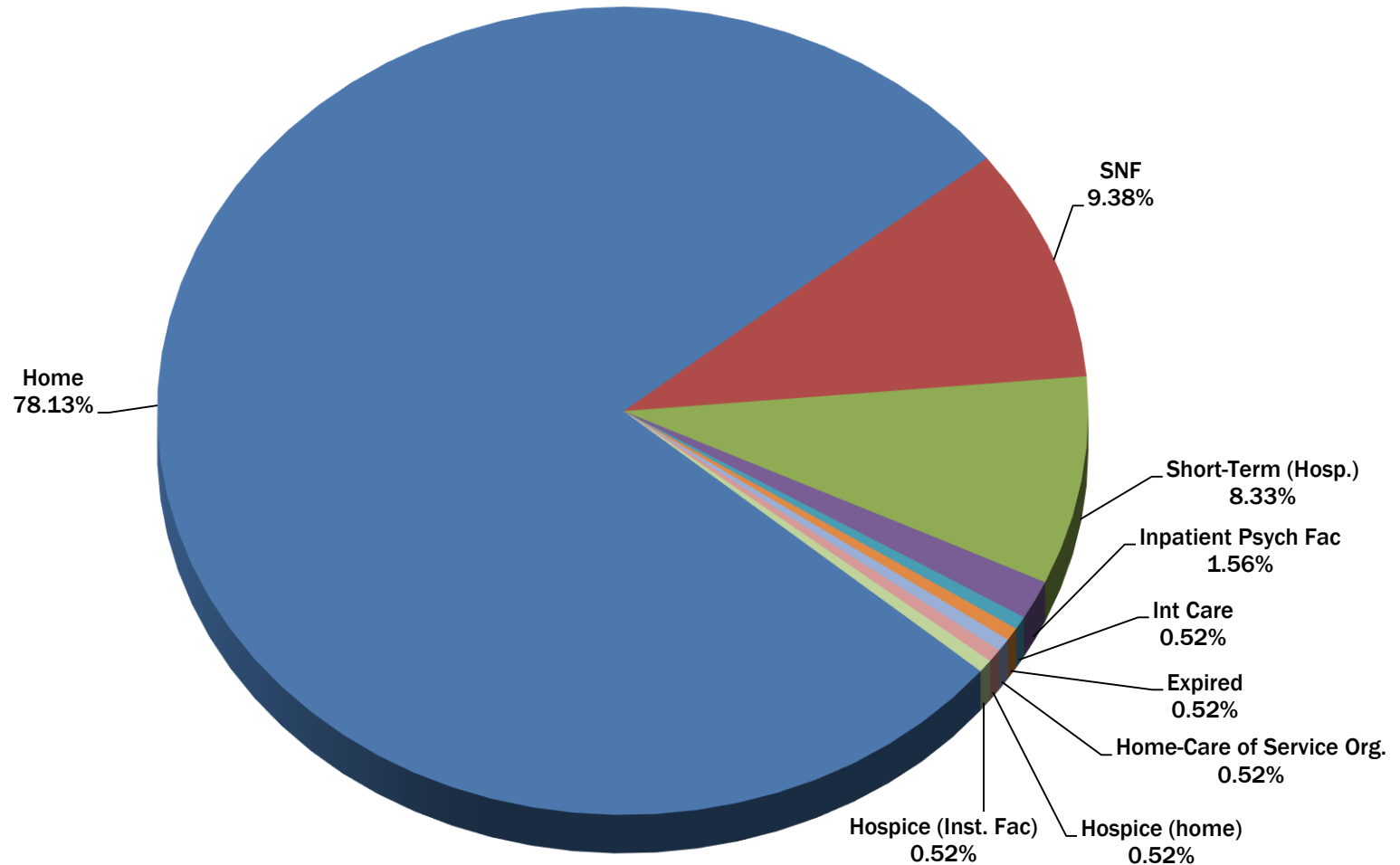
# FY 2016 Incidence of Diagnoses



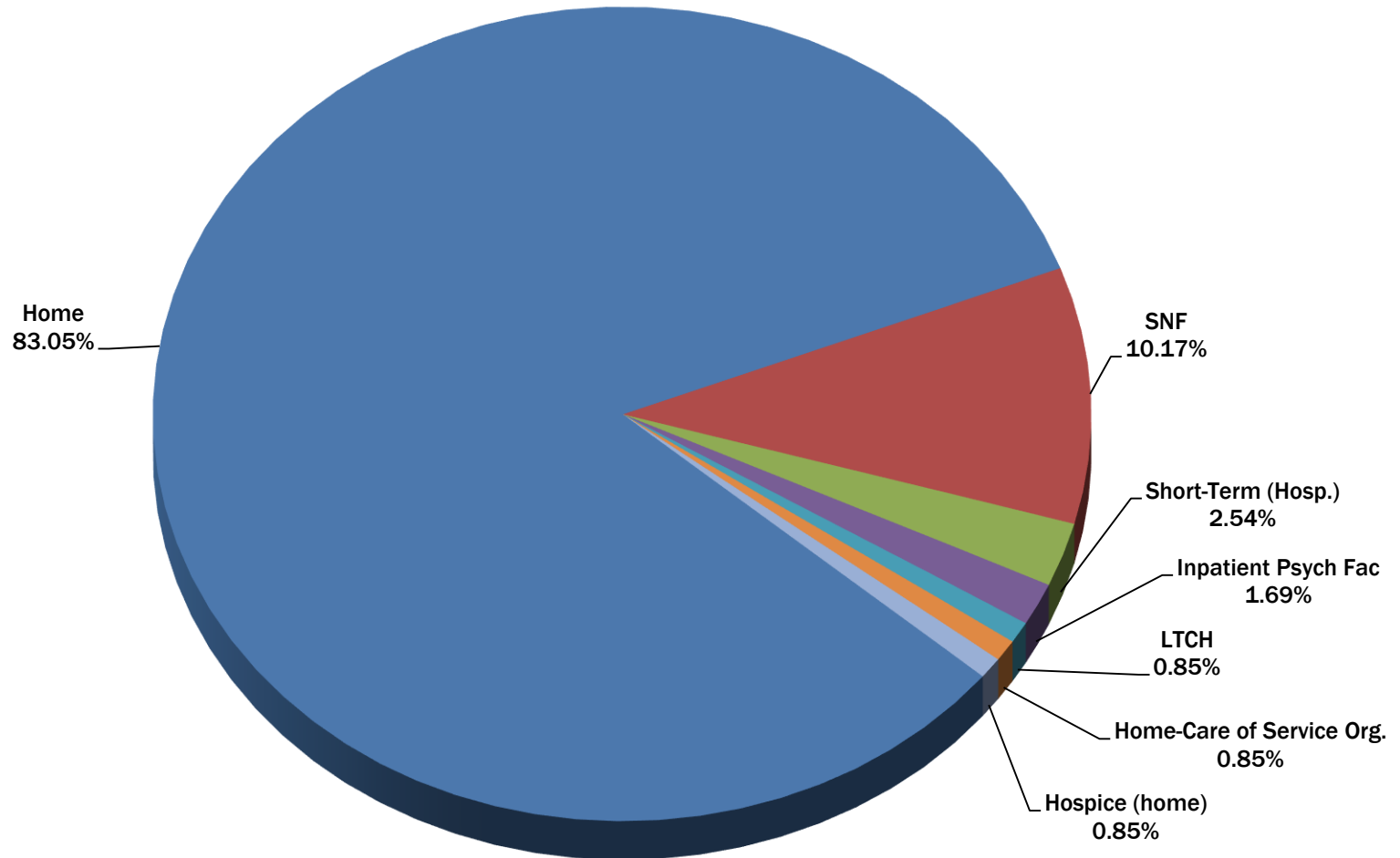
# FYTD 2017 Incidence of Diagnoses



# FY 2016 Discharge Destinations



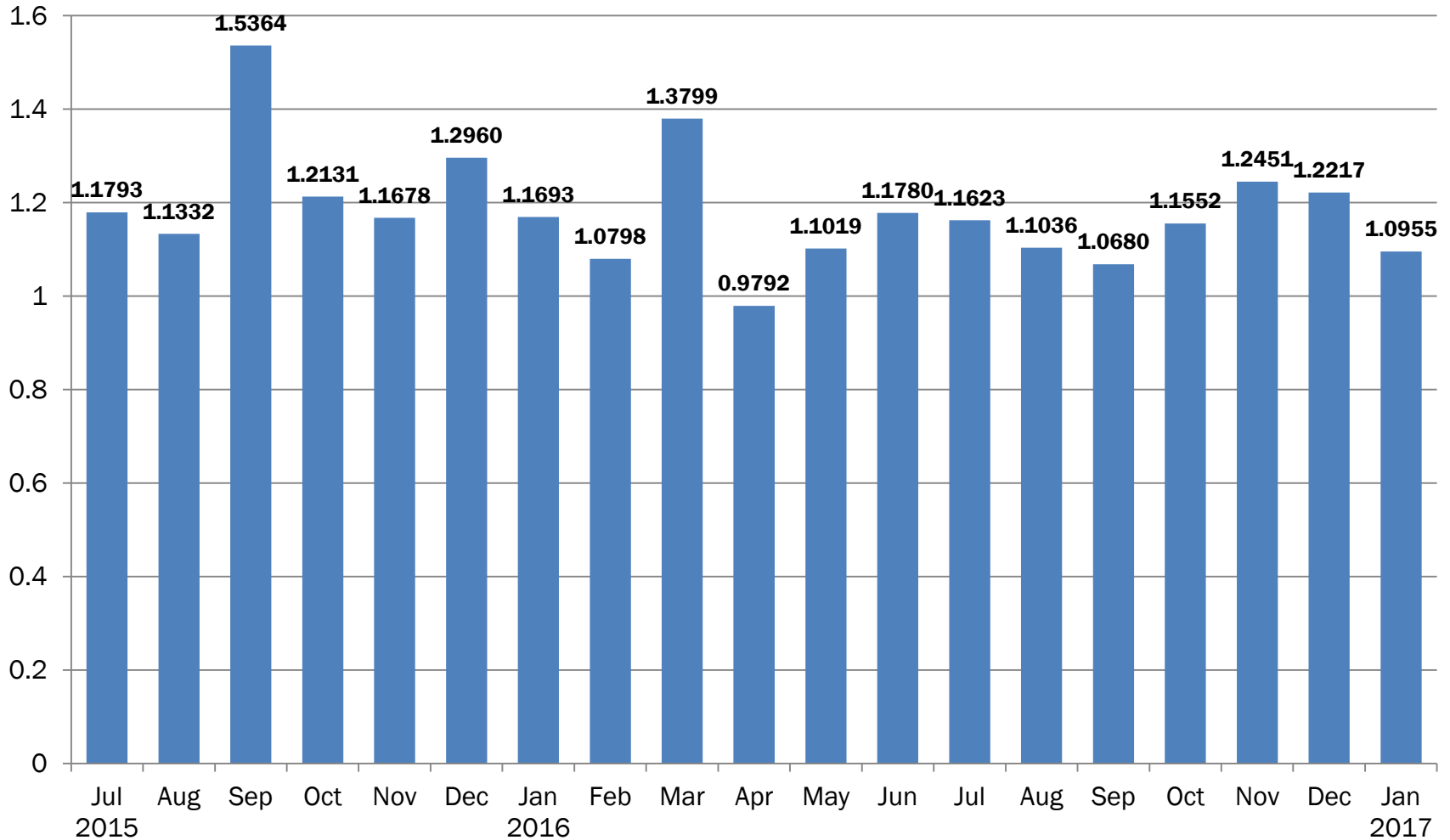
# FYTD 2017 Discharge Destinations





# Case Mix Index

FY 2016 Monthly Average: 1.1792; FYTD 2017 Monthly Average: 1.1500



# Medicare Reimbursement per Discharge

FY 2016 Monthly Average: \$17,743; FYTD 2017 Monthly Average: \$18,149

