



To Improve the Health of our Community!



CRITICAL ACCESS HOSPITAL (CAH) Annual Program Review 2021

Our Mission

To improve the health of our community.

Our Vision

Become one of the top 100 Critical Access Hospitals in the country through the achievement of the six (6) Pillars of Excellence.

Our Values

- Accountability
- Services
- Promote Teamwork
- Integrity
- Respect
- Excellence

Pillars of Excellence

What are the 6 Pillars of Excellence?	Patient Loyalty Building lifelong relationships with the people in our community through exceptional care and outstanding customer service.
	Medical Staff Development Supporting our Medical Staff and helping them stay up to date on the latest in practice and technology through the pursuit of collaborative initiatives.
	Employee Development Empowering all staff members to make a difference and providing an atmosphere that promotes communication, competitive wages, benefits, continued education, and employee recognition.
	Quality Developing and maintaining a system of continuous improvement, which is incorporated into the daily work of every employee and medical staff member.
	Service Developing and maintaining appropriate facilities, technology, and services to meet the needs of those we serve.
	Financial Stewardship Strengthening our financial stewardship position to enhance the ability to develop new services, acquire new technology, modernize facilities, recruit physicians, and ensure long-term success.

Purpose:

This review is to document Prosser Memorial Health's (PMH) compliance with Federal regulations and Critical Access Hospital (CAH) Condition of Participation for CAH (CFR 485.641): *The CAH carries out or arranges for a periodic evaluation of its total program. The evaluation is done at least once a year and includes review of the following:*

1. The utilization of CAH services, including at least the number of patients served and the volume of services.
2. A representative sample of both active and closed clinical records.
3. The CAH's health care policies.

Data Sources:

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

1. Utilization review
2. Peer review
3. Committee, department, and/or team minutes
4. Incident reports
5. Patient satisfaction and complaint data
6. EPIC reports and other sources as applicable

Purpose of Review:

- To determine if utilization of services were appropriate to meet the community needs
- To determine compliance with established policies and procedures
- Identify changes, if needed, in the program services and/or policies

2021 Utilization of Hospital Services

PMH is licensed for 25 hospital beds. Ten of those beds are licensed as swing beds and six as nursery beds. During no time in 2021 did the number of patients exceed the limits the facility is licensed to serve.

A total of 1,397 inpatients were admitted into the acute care setting and 64 swing bed patients, which accounted for a combined total of 4,278 patient days in 2021. Outpatient surgical productivity increased by 11%. There was an increase of inpatient surgical procedures by 44%. There was a 27% increase in the number of patients seen by the Emergency Department. Outpatient Special Procedures (OSP) increased by approximately 23% during this reporting period. Finally, Inpatient Billed Lab Tests increased by 21% and Outpatient Billed Lab Tests increased by 17%.

Volume of Services

Inpatient/Outpatient Services	2020	2021	% Change 2020 to 2021
Average Length of Stay	2.35	2.48	5%
Hospital Admits	1,024	1,397	27%
Swing Bed Admits	110	64	-42%
Medicaid Admits	144	118	-18%
Medicaid HMO	263	414	36%
Medicare Admits	223	320	30%
Medicare HMO	43	111	61%
ED Visits	9,662	13,258	27%
Births	489	583	16%
Observation Admits	586	746	21%
OSP Procedures	2,966	3,883	24%
IP Surgery Procedures	281	331	15%
OP Surgery Procedures	915	1,817	50%
IP Billed Lab Tests	29,217	36,907	21%
OP Billed Lab Tests	111,999	135,011	17%
IP Diagnostic Imaging Exams	1,116	1,820	39%
OP Diagnostic Imaging Exams	26,242	34,087	23%
IP Physical Therapy Patients	122	219	44%
OP Physical Therapy Patients	7,818	7,007	-10%
Swing Bed Physical Therapy Patients	293	267	-9%
IP Speech Therapy Patients	44	54	19%
OP Speech Therapy Patients	1,762	1,456	-17%
Swing Bed Speech Patients	89	97	8%
IP Occupational Therapy Patients	91	163	44%
OP Occupational Therapy Patients	747	537	-28%
Swing Bed Occupational Therapy Patients	223	245	9%
Prosser Surgical Group Visits	11,604	15,819	27%
Benton City Clinic Visits	10,081	8,778	-13%
Prosser Clinic Visits	14,855	14,724	-1%
Grandview Clinic Visits	7,084	9,334	24%
Women's Health Center Visits	7,232	7,227	-0.07%

Average Length of Stay

The average length of stay for the inpatient unit was 2.48 days for 2021, compared to 2.35 days in 2020. This is a 5% increase. The average length of stay for the swing bed unit was 11.04 days for 2021, compared to 14.30 days in 2020. This is a 42% decrease.

Bed Limitation Compliance

PMH has been consistently compliant with the 25-bed limitation. Our capacity meets the community need. Our length of inpatient stay increased in 2021 to 2.48 days, but our swing bed stay decreased to 11.04 days. However, our mission to treat our local patients without a need for transfers is being fulfilled.

We monitor our total bed capacity and length of stay at each midnight, as well as at a daily interdisciplinary team meeting to assure we are meeting the needs of our patients in a timely and efficient manner.

Weekly interdepartmental team meetings are held, and comprehensive assessments are completed per regulations on all swing bed patients. PMH utilizes the InterQual Criteria set to monitor admissions and continued stays to meet Medicare guidelines on all admitted patients.

On-Call Staffing

The Emergency Department continues to be staffed with in-house providers 24 hours a day, seven days a week. A schedule for on call modalities is maintained by Medical Staff Services and made available online for easy access. The surgical staff services call schedule is up to date and available in the Emergency Department for after hour needs.

Appropriate Patient Transfers

Records of patient transfers are continuously reviewed by nurse auditors, the Emergency Department Medical Director, the Emergency Department Committee, and/or Hospitalist. Selected records are reviewed by the Medical Staff Quality Improvement Committee (MSQIC) and a physician consultant.

Inpatient & Emergency Department Record Review

Trauma, stroke, STEMI, rapid response, code blue, chest pain, sepsis, and pneumonia records are reviewed by the appropriate specialty committees. Audits of 10% of Emergency Department records are performed. Contracted providers are also included in the record reviews by the MSQIC. The Emergency Department Medical Director monitors quality of care to ensure that admission, diagnosis, and treatment meet the standard of care.

Nosocomial Infection Rate

The nosocomial incident/infection rate remains less than 2%. Infection rates are tracked and reported through the Medicine Committee. No trends or infection problems were noted in the past year (**Attachment A**). Emphasis continues to be finding an effective way to monitor hand washing compliance.

Appropriate Use of Medications

PMH's pharmacist reviews patient records receiving multiple medications and the administration process to prevent adverse drug reactions. The pharmacist also reviews patient care records for proper medication administration as well as the tracking and trending of medication errors for immediate process improvement (**Attachment B**). Any changes made to the drug formulary are reviewed and approved by the Pharmacy & Therapeutics Committee.

Provider Evaluation

The quality and appropriateness of the diagnosis and treatment furnished by all providers (MD, DO, ARNP, PA) is reviewed and evaluated by the Medical Staff Quality Improvement Committee (MSQIC), a physician consultant, and the standard quality of care reviews by the Medical Staff. All findings and/or recommendations of the evaluations are taken into consideration and appropriate remedial or corrective actions are taken to address any deficiencies if needed. Outcomes for all remedial or corrective actions are documented.

Year in Review – A Summary

CY-2021 was yet another eventful year for PMH and our world due to the COVID-19 pandemic, as reflected in the excerpts from the January 2022 CEO Report to the Board of Commissioners (BOC):

2021 Strategic Plan Annual Report

Last year I wrote that 2020 was the most challenging year I have ever experienced leading community hospitals for the past thirty plus years. I would have to say, however, that 2021 was a close second. Not only did we have all the challenges of the pandemic, but we also experienced the highest volumes this organization has ever seen, and most were not pandemic related. The great news is that PMH responded well to every challenge, met them head-on, and experienced much success. This is demonstrated in our Pillars of Excellence where we exceeded four of our Pillar Goals in 2021. We are disappointed that two of our key people Pillars (Employee and Medical Staff Development) were below expectations, but this inspires us to do better in 2022. It's easy to blame the pandemic for these lower results, but we need to rise above the challenges we face each year and perform better. We are already working on plans to address these opportunities and will not stop until we do. I would like to thank the entire PMH Team for achieving these challenging goals and look out for what we can and will do in 2022!

Employee Engagement Survey

A key area of focus at PMH has been our Employee Development Pillar which focuses on staff satisfaction and engagement. A key to achieving high patient satisfaction scores is to have engaged staff and Medical Staff providers. The best way to objectively measure engagement/satisfaction is to conduct a survey of our staff, which we do annually. You can also look at turnover rates as a proxy for satisfaction. While our turnover rate increased to 10.8% in 2021, it is still well below the industry average of 20+% (which is increasing every day).

Our engagement survey was once again conducted by People Element during the months of October/November. Our participation level was 82.0%, which was better than our participation level last year at 75.6%. The full results of the survey, including comments will be shared with everyone at PMH on January 25th. Quinton Barrett from People Element will share the results with our staff at several sessions scheduled for employees to attend. He will not only share the results, but also seek ideas from our staff about ways to improve in the areas with the greatest concerns.

One of the key metrics in the survey, and our Employee Development Pillar Goal, is an employee's satisfaction with PMH. Unfortunately, our performance dropped from our highest satisfaction level ever at 89.2% percent to 87.8% in 2021. While this was not a huge drop, we will work even harder in 2022 to increase our score to over 90% and we will never stop trying to improve regardless of what our score is.

We also learned from People Element that while our results did not meet our goals, we outperformed most healthcare organizations that work with them. In fact, our scores were only lower on one question in the entire survey! The results of the 2021 Employee Engagement Survey will also be presented to the Board by Quinton Barrett at the January Board Work Session.

Medical Staff Engagement Survey

The Medical Staff Engagement Survey was also conducted in October/November. The participation level in 2021 was 74.0% compared to 77.6% in 2020, but still represents strong Medical Staff participation. The results of the survey, including comments, will be distributed to the Medical Staff on January 25th. Quinton Barrett from People Element will review the results and lead a discussion about opportunities for improvement.

The key metric (Pillar Goal) in the survey used to measure Medical Staff Satisfaction with PMH showed a very small decline from 85.8% in 2020 to 85.2% in 2021. We are disappointed with the decline, but a satisfaction score of 85.2% is still very good. We will work even harder in 2022 and already have some ideas about how we can improve.

I would also like to thank all our CMO's (Drs. Sollers, Murphy, Hashmi, Rivero, and Wenger) for helping to make Medical Staff Engagement a priority at PMH. Quinton Barrett will also review the

results of the Medical Staff Engagement Survey with the Board at the January Board Work Session.

Review of Services

Emergency Medical Services

- Trauma Verified, Advanced Life Support (ALS) Ambulance that provides 24-hour service to the communities of Prosser, Grandview, Mabton, Patterson, Bickleton and Sunnyside and the surrounding areas.
- Provide pre-hospital care in accordance with Benton/Franklin and Yakima County's Pre-Hospital Care Protocols.
- Ensure that there is a smooth transition of continuum of patient care at receiving medical facility.
- Community Paramedic Program - this program offers a no-charge, post discharge visit to patients whose care was affiliated with PMH. This visit includes:
 - Discharge instruction reinforcement,
 - Medication reviews,
 - Physical evaluations, and
 - Referrals to appropriate facilities for further care.

Pharmacy

- Preparation and distribution of medications to Pyxis machines.
- Protocol prescribing of medications, laboratory studies, and nursing care.
- Storage, distribution, and control of medications.
- Clinical and drug utilization monitoring, general.
- Clinical and drug utilization monitoring, specific.
- Appropriateness of drug therapy.
- Drug information service.

Diagnostic Imaging Department

- 3D/4D Ultrasound
- Computerized Tomography (CT)
- 3D Mammography
- MRI
- Digital X-Ray
- Echocardiograms
- Bone Density
- Fluoroscopy
- Nuclear Medicine
- MILD Procedure

- Kyphoplasty
- Vascular Ultrasounds

Nuclear Medicine

- Bone
 - 3-Phase Bone
 - Bone SPECT
 - Whole Body Bone
- Cardiac
 - MUGA
 - Nuclear Stress Test (MPI)
 - Thallium Viability
- Central Nervous System
 - Brain Perfusion Study
- Endocrine
 - I 131 Thyroid Cancer Whole Body
 - I 131 Thyroid Therapy
 - Parathyroid
 - Thyroid Uptake and Scan
- Gastrointestinal
 - Gastric Empty
 - GI Bleed
 - H Pylori Breath Test
 - Hemangioma
 - HIDA
 - HIDA with EF
 - Liver/Spleen
- Lung
 - Lung Ventilation/Perfusion
 - Lung Quant
- Oncology
 - MIBG 123 (AdreView)
 - Octreotide
 - Sentinel Node Injection Only
 - Sentinel Node with Imaging
- Renal
 - Renal
 - Renal with Lasix

Laboratory

- Chemistry
- Hematology
- Blood Bank
- Urinalysis Coagulation
- Serology
- Microbiology
- Semen Analysis
- On-site CLIA waived laboratory services provided at Grandview, Prosser and Benton City clinics.

Accounting Office

- Plan and carry out policies relating to all phases of accounting.
- Maintain work practices in accordance with the established standards and criteria and with developing corrective plans, as needed.
- Assume the responsibility for all fiscal related tasks within the hospital. This includes all aspects of payroll preparation, accounts payable, and general ledger accounting.
- Work closely with management and staff to resolve hospital financial related problems, to ensure proper coding of expenses, and to correct any financial inconsistencies.
- Education of hospital personnel on payroll preparation, accounts payable submittal and tracking, budgeting and variance reporting, and how to read/use the reports distributed to management from the Accounting Department.
- Provide accurate preparation and timely distribution of payroll, accounts payable, and the month-end general ledger processing.
- Provide accurate and relevant reports to the CFO for presentation to the Board of Commissioners in advance of monthly Board meetings.
- Provide accurate accounting of all hospital financial data and assistance in correcting financial inconsistencies.
- Provide timely and accurate preparation and submission of all financial related reporting in accordance with hospital reporting requirements and state and federal requirements.

Health Information Management

- Collect, maintain, and make available to authorized users, timely, accurate, and complete patient health information.
- Manage, analyze, and utilize data vital for patient care.
- Ensure consumer health information is readily available only to those who need it, when they need it.
- Ensure the appropriate and rightful access to health information only to those legally authorized to do so.

- Ensure the quality, security, and availability of health information as it follows the patient through the health system.
- Monitor the quality of patient information, ensuring that the information is maintained and protected in accordance with federal, state, and local regulations.
- Manage records processing, monitoring of record completion, release of patient information, clinical coding of diagnoses and procedures, and birth registration completion.
- Protect the confidentiality of health records as mandated by law, HIPPA regulations, professional standards, and the employer's policies.
- Provide accurate and timely information to our PMH physician's, employees, medical clinics, internal and external customers.
- Ensure accurate coding for reimbursement and clinical care.
- Ensure accuracy of coded data by keeping abreast of coding guidelines and reimbursement reporting requirements.
- Ensure that providers have access to charts and answer any questions they may have when completing them.
- Track physicians' deficiencies to ensure that charts are being completed within the time period specified by the medical staff in their rules and regulations.

Patient Registration Department

- Responsible for obtaining accurate and complete information on the patients we serve including, demographic, insurance, and payment information.
- Obtain appropriate signatures on all required paperwork at the time of registration.
- Direct incoming calls to the appropriate hospital department/representative.
- Monitor and evaluate the quality of the registration process, with a benchmark of 95% registration accuracy.
- Assessment of the registration data through auditing.
- Implement corrective measures to assure improvement/resolution of registration issues.
- Document quality assurance activities and report findings, actions, and results to the PMH Quality Committee.
- Annual review of the effectiveness of the Departmental Quality Improvement Plan.
- Collect all copays and or past due balances.
- Review and provide documents to patients regarding Rights & Responsibility, Consents to Treat and HIPPA.

Information Technology (IT) Services

- Provide network, hardware and software support including upgrades and installations.
- Troubleshoots computer related problems for users.

- Consults, recommends, engineers, and builds selections of new equipment and software packages.
- Ensure efficient functioning of the financial systems applications computer system, including updates of both the operating and application systems.
- Ensures HIS HIPAA Compliance.
- Ensures LAN/WAN is within industry standards.
- Reads and complies with hospital and departmental policies and procedures.
- Maintains confidentiality of all departmental and hospital information according to procedures.

Care Transitions

- Discharge Planning and Social Work intervention.
- Complete the IDT (Interdisciplinary Team) CM Portion of inter-disciplinary care plan.
- Complete discharge phone calls on swing bed patients.
- Complete quarterly Time Studies and submit to controller.
- Participate in the Total Joint Program for pre-op education and discharge planning needs.
- Medicare compliance with notices as needed: Medicare Important Messages, Notices of Medicare Non-Coverage, DSHS Appeal notifications for swing beds, Leave of Absence forms completion and policy compliance.
- Assist the CPP program when Care Management needs are identified in the community.
- EPIC support regarding Care Transitions workflows.
- EDIE (Emergency Department Information Exchange) program oversight and case management.
- Complete Swing Bed in person admission evaluations at Tri-City Hospitals PRN.
- Monitor the EPIC EMR for appropriate accommodation codes.
- Complete inpatient and observation insurance notifications and clinical submissions.
- Assist PMH in Medicare compliance with Medicare Outpatient Observation Notifications.
- Maintain UR and Swing Bed Policies.
- Swing Bed Admissions facilitator including completion of Comprehensive Assessments.
- Swing Bed authorizations and complete insurance clinical submissions.
- Medicare compliance with Swing Bed Certifications, and PASRR's.
- Handle any Medicare Discharge Appeals and the administering of HINN's.
- Insurance Appeals and Denials as needed.
- Maintain UR scorecard and refer charts to MSQI as needed.
- Utilization Review and completion of InterQual.

- Collaborate with nursing, physicians, registration, compliance, coding, and billing staff to answer clinical questions related to medical necessity and patient status.

Dietary

- Offers appetizing nutritious foods prepared and served under sanitary conditions and at appropriate temperatures. Patient likes and dislikes are considered along with special dietary concerns.
- Tele-dietician consults are available upon request.

Emergency Department Services

- Level IV Trauma Center, Level III Stroke Center and Cardiac Level II.
- Staffed 24 hours a day, 7 days a week, 365 days a year with a physician trained in Advanced Trauma Life Support (ATLS), Advanced Cardiac Life Support (ACLS), 2 registered nurses certified in Advanced Cardiac Life Support, Pediatric Advanced Life Support and/or Emergency Nurse Pediatric Course and Trauma Nursing Core Course as well as an ED Technician/Interpreter who is specially trained to assist with procedures in the department that work 24 hours a day, 7 days a week.
- Prepared to meet the medical needs of any patient that presents to the emergency room. The department sees patients through all phases of acuity from the clinic patient to the acutely ill and the patient with multiple traumas.
- Multiple transfer agreements are in place to assure that patients who present to PMH and need additional services are transferred to a tertiary center for appropriate care.

Perinatal Services

- Four LDRP suites, three post-partum beds, and nursery beds, staffed 24 hours a day within the Family Birthplace.
- High volume – Term vaginal births.
- High risk – cesarean sections, preterm labors who present in active labor.
- Births \geq 36 weeks gestation precipitous births, inductions, and augmentation of labor.
- Total care management of the woman in labor.
- Ante partum testing and screening for labor management.
- Monitoring and evaluation of the fetus during pregnancy.
- Evaluation and resuscitation of the newborn at birth and during the transitional period.
- Management of postpartum care to all delivered women.
- Management of care to well newborns.
- Emergency preparedness to handle obstetrical and neonatal emergencies.
- Credentialing and Competence Validation.
- Advocate for breastfeeding and lactation support.
- Childbirth education classes.

- Little Wings Program for pregnancy losses under 19.6/7 weeks.
- High risk- Cesarean Sections, GDM, PIH, Absent/Minimal Prenatal Care, Preterm Labors to unstable to transfer (Deliver and Stabilize).
- Gynecologic/Women Health Surgery.
- Total care Management of Antenatal and Laboring patients.
- Pain Medication Options- Nitrous Oxide, IV, Labor Epidurals.

Surgical Services

Pre-op

- Coordinate with physician/clinic to schedule cases
- Pre-op phone call
- Prepare for the case utilizing preference card and communication
- Patient assessment, teaching, discharge planning
- Sterilizing and preparing all necessary instrumentation and for surgical cases

Intra-op

- Surgical procedures
- Aseptic technique for infection prevention
- Safety – positioning, cautery, fire, sharps, etc.
- Availability of necessary instrumentation, equipment, and in good working condition
- Staff competence
- Good relationship with physicians
- Documentation

Post-op

- Airway management
- Patient assessment
- Pain management
- Discharge criteria
- Discharge instructions with a focus on infection prevention and prevention of re-admission
- Patient education
- Follow-up phone calls
- Accuracy in patient charges

Outpatient Special Procedures

- Blood Product Transfusions
- IV Medication Therapy
- Physician Driven Wound Care
- Antibiotics, Iron Infusion Therapy
- Infection Services
- Medication Injections
- IV Hydration Therapy
- PICC Line Placement
- NPWT Wound Vac Therapy
- Therapeutic Phlebotomy

Employee Health

- Meet with new hires to ensure immunization.
- Generate lab titers to assess immunity to TB, Hepatitis B, MMR, varicella.
- Administer vaccine(s) as indicated.
- Education and follow up with employees on exposures.
- Annual TB evaluation.
- Annual influenza vaccination.
- Annual respiratory protection training.
- Maintain employee health files.
- Provide education to staff as needed.
- Assist Cardiopulmonary and Safety Committee with the Respiratory Protection Plan.
- Monitor employees with COVID-19 and manage their release back to work.
- Provide COVID-19 vaccinations.

Environmental Services Department

- Provides clean, infection free, and visually pleasing patient care and work environments.
The department currently provides these services to the following facilities:
 - PMH Hospital
 - Edgar E. Whitehead Center (Annex Building)
 - Stephen Kenny Center (Annex Building)
 - ENT & Allergy Clinic
 - Emergency Medical Services Building
 - Specialty Clinic (Suite @ Valley Vista Medical Group)

Laundry Services Department

- Provide adequate supply of clean, infection and defect free linen, scrubs, towels and blankets.
- Gather soiled linen from hospital areas daily
- Weigh, sort, and launder soiled linen.
- Dry, fold and distribute processed laundry to appropriate departments.
- Inventory and maintain adequate supply levels.
- Provide laundry services to PMH Hospital eight (8) hours per day seven (7) days per week, including holidays.
- Provides laundry services within the hospital and to the Specialty Clinic, Benton City Clinic, EMS Services, Prosser Physical Therapy & Rehab, Women's Health Clinic, Prosser Clinic, ENT/Allergy Clinic, and Grandview Clinic.
- A total of 241,045 pounds of laundry was done in 2021. This indicates an increase of 13% from 2020, where a total of 208,596 pounds of laundry was done.

Maintenance Department

- Physical plant facilities, operating systems and equipment preventive maintenance and repairs.
- Hospital and clinic department specific equipment inspection, preventive maintenance, and repairs.
- Limited hospital and clinic biomedical equipment inspection, preventive maintenance, and repairs.
- Regulatory compliance activities such as inspection, testing, maintenance and repairs to life safety and critical systems and equipment.
- 24-7 availability for facility emergencies, emergency courier services; including transport for patients meeting specific criteria.
- Electrical safety testing and inspection of electrical systems and equipment.
- Internal communication systems and equipment troubleshooting, repairs and installations.
- Plumbing and water delivery systems maintenance and minor repairs.
- Light carpentry and wall repairs.
- Building interior and exterior painting and repairs.
- Grounds, roads and parking lot maintenance and repairs, including ice and snow control for PMH campus and other District facilities.
- General building maintenance and repairs.
- Other services as required.

Cardiopulmonary Department

- Electrocardiograms (ECG/EKG)
- 48 plus Holter Monitor
- Cardiac Stress Test with Echo
- Cardiac Stress Test without Echo
- Chemical Stress Test
- Nuclear Stress Test
- Cardioversion Assistance
- Arterial Blood Gases
- Pulmonary Function Test
- Pulmonary Function Test Pre and Post
- Pulmonary Function Test with DLCO Single Breath
- Overnight Pulse Oximetry Studies
- Home Oxygen Qualification Testing
- High Risk Newborn Delivery Assistance
- C-Section Assistance
- Bi-Level/CPAP Therapy and Trending
- High Flow Oxygen Therapy
- Respiratory Therapy Protocols
- Respiratory Protection N95 Mask Fitting
- Multiple Pulse Oximetry
- Spot Check Pulse Oximetry
- Aerosol Treatments
- Sputum Induction
- IPV Therapy
- MetaNeb Therapy
- Lung Expansion Therapy
- Chest Physiotherapy
- Out-of-Facility Transports
- Mechanical Ventilation
- Nitrous Oxide Therapy
- Respiratory Assessment
- Respiratory Education
- Intubation Assistance
- Newborn Hearing Screenings
- Oxygen Therapy and Trending
- Airway Maintenance Suctioning
- Smoking Cessation Education

Acute Care-Swing Bed Services

- Staffed 24 hours/day, 7 days a week, 365 days a year with a mix of Registered Nurses, Licensed Practical Nurse, and Certified Nursing Assistants according to the needs of the current patient type and the census. Cardiac arrhythmias with or without telemetry monitoring.
- Multi-system diseases such as respiratory disorders, gastrointestinal disorders, genitourinary disorders, gynecological disorders, neurological disorders, endocrine disorders, hematological disturbances, oncology complications, and infectious diseases.
- Management of the post-surgical patient.
- Extended care for those patients not well enough to be discharged to community, yet not ill enough to qualify for acute care services that may benefit from Swing Bed:
 - Rehabilitation Services (PT, OT, &/or ST)
 - Wound care that may be difficult to manage at home
 - IV antibiotics
 - Strengthening
 - Caregiver training
 - Respiratory Adjunct Therapy
 - Automated External Cardiac Defibrillators

Women's Health Center

- Gynecology Care & Surgery
- Contraception Management
- Pregnancy Management
- Infertility Treatment
- Preventative Medicine
- Prolapse & Incontinence Treatment
- Minimally Invasive Surgery
- Routine & High-Risk Pregnancy Management
- Management of Menstrual Irregularities, Abnormal Pap Smears, STD's, and Menopause
- Electronic Fetal Monitoring
- Newborn Assessments
- Labor & Delivery Management
- Prenatal & Postnatal Care
- IUD Insertion/Removal
- Annual Well Woman Exams
- Novasure Endometrial Ablation
- Family Planning

Specialty Clinics

The Specialty Clinics are comprised of the ENT & Allergy Center, General Surgery Center, Orthopedic Center, Cardiology and Urology Center. Services provided per Center are as follows:

- ENT & Allergy
 - Sinus Infections
 - Allergy Testing (Environmental & Food)
 - Allergy Immunotherapy
 - Snoring & Sleep Apnea
 - Dizziness
 - Speech Problems
 - Larynx Disorders
 - Recurrent Ear Infections
 - Hearing Diagnostics (adult and peds)
 - Tympanometry
 - Custom Sporting and Recreational Ear Protection
 - Occupational Hearing Protection
 - Tinnitus Evaluation
 - Hearing Device Evaluations
 - Hearing Devices
- General Surgery
 - Varicose Veins
 - Removal & Biopsy of Lumps
 - Thyroid Surgery
 - Breast Surgery
 - Hernia Repair
 - Gallbladder Removal

- Colonoscopies
- Laparoscopy Cholecystectomy
- Polyp removals
- Appendectomy
- Splenectomy
- Bowel Surgery (resection, and obstructions)
- Hemorrhoids, Fissures & Fistulas
- Endoscopy of the Colon, Esophagus & Lungs
- EMG diagnostics
- Wound Care
- Orthopedic Surgery
 - Arthroscopic surgery of the elbow, shoulder, knee and ankle
 - Arthroscopic rotator cuff and reconstructive shoulder stabilization
 - Ligament reconstruction and meniscus repair of the knee
 - General Fracture Care
 - Total Joint Replacement, including knee, hip
 - Fracture, tendon, nerve, and ligament treatment of the hand
 - Splinting
 - Casting
 - Joint Injections
- Podiatry/Foot & Ankle
 - Arthroscopic Ankle Surgery
 - Foot & Ankle Fractures
 - Bunions & Hammertoes
 - Amputations
 - Ankle Instability
 - Tendon and Ligament Repairs (Achilles)
 - Tendon Injections
 - Joint Injections
 - Implant removals
 - Planter Fautitis
 - Debridement
 - Adult & Pediatric Flatfoot
 - Non-Healing Wounds of the Foot & Ankle
 - Allograft Treatment (none healing dm ulcers)
 - Ingrown Toenail Procedures
 - Plantar Wart Excision
 - Custom-Molded Foot Orthotics

- Diabetic Foot and Nail Care
- Heel Pain
- Splints
- Casting
- Wound care
- Cardiology
 - ECG Diagnostic / Interpretations
 - Holter Monitor Diagnostic / Interpretations
 - Echo Stress Test
 - Dobutamine Stress Test
 - Management of Valvular Heart Disease
 - Heart Failure Tx and Management
 - Preventative Cardiology
 - Coronary Artery Disease
 - Cardiac Oncology
 - Venous Thromboembolic Disease
 - Echocardiography and Transesophageal Echo
 - Cardioversion
 - Pericardial Diseases
 - Hypertension Management
 - Hyperlipidemia Management
- Urology
 - Kidney Stone Removal
 - Prostate Surgery
 - Minimally Invasive Surgery
 - Vasectomy
 - Urethral Reconstruction
 - Bladder Botox
 - Circumcision
 - Endoscopy

Quality Assurance

- Engaged with iVantage Health Analytics which provides comprehensive advisory services and analytics to the healthcare industry. They use a methodology called the Hospital Strength INDEX which is the industry standard for assessing and benchmarking rural and Critical Access Hospital performance. iVantage publishes the annual Top 100 Critical Access Hospital list.

- Continued collaboration with Washington State Hospital Association (WSHA) in MBQIP, which includes inpatient and outpatient reporting to CMS, Emergency Transfers, HCAHPS surveys and reporting of predefined data through the Quality Benchmarking System (QBS) which allows for comparison of like facilities in Alaska, Washington, and Oregon.
- Strategic Plan and Patient Care Scorecards are populated monthly with quality metric data and presented to the Board on a quarterly basis. The Strategic Plan Scorecard contains 47 metrics under six (6) pillars. The Patient Care Scorecard contains 15 metrics **(Attachment C)**.
- Quality boards are used as a tool to display metrics, highlight superior patient care, and generally standardize the cultural transformation of quality improvement at PMH.
 - Examples of content to display include:
 - HCAHPS scores (if applicable)
 - Quality/Process Improvement goal updates
 - Any interdepartmental quality measures that pertain to the department specifically
 - Inspirational messages or pictures
 - Completed and/or in progress quality or process improvement projects

Benton City Clinic

- | | |
|----------------------------|-------------------------------|
| • Routine Preventive Care | • Pain Management |
| • Pediatric Care | • DOT Physicals |
| • Women’s Health | • Cold & Flu |
| • L&I Care | • Cuts & Rashes |
| • Workers Compensation | • Sinus Infections & Earaches |
| • Lab Tests | • Bumps & Bruises |
| • Immunizations | • Urinary Tract Infection |
| • Return to Work | • Mental Health |
| • Vision Tests | • Internal Medicine |
| • Sport Physicals | • After Hours Care |
| • Adult Disease Management | • Chronic Care Management |

Grandview Clinic

- | | |
|---------------------------|-------------------------------|
| • Routine Preventive Care | • Pain Management |
| • Pediatric Care | • DOT Physicals |
| • Women’s Health | • Cold & Flu |
| • L&I Care | • Cuts & Rashes |
| • Workers Compensation | • Sinus Infections & Earaches |

- Lab Tests
- Immunizations
- Return to Work
- Vision Tests
- Sport Physicals
- Adult Disease Management
- Cancer Screenings (including colonoscopies)
- Cardiovascular Disease Prevention
- Bumps & Bruises
- Urinary Tract Infection
- Mental Health
- Internal Medicine
- After Hours Care
- Chronic Care Management

Prosser Clinic

- Occupational Health
- Pre-Employment Drug Screenings
- Post-Accident Drug Testing
- L&I Care
- Workers Compensation
- Lab Tests
- Immunizations
- Return to Work
- Vision Tests
- Nutritional Counseling- via our providers
- Mask Fitting- the machine is currently broken
- COVID-19 Testing
- Cuts & Rashes
- Sinus Infection & Earaches
- Bumps & Bruises
- Urinary Tract Infections
- Mental Health
- After Hours Care
- Pediatric Care
- Women’s Health
- Cold & Flu
- Pulmonary Tests

Prosser Physical Therapy and Rehab Center

- Women’s Health provides one-on-one, private sessions with a women’s health physical therapist to provide women’s health and pelvic rehab for women struggling with pelvic issues and concerns.
- Physical Therapy helps to relieve pain and dysfunction for people with:
 - Sports Injuries
 - Neurological Conditions
 - Muscle & Joint Pain
 - Surgery Recovery
 - Repetitive Motion Injuries
 - Lymphedema
 - General Weakness and Risk of Falling
 - Upper Lower Extremity
 - Facial Strain
 - Vestibular Rehab
 - Concussion
 - Orthopedic Therapy
- Speech Therapy helps patients achieve the highest possible functional levels when living with a chronic condition or following injury or illness, such as stroke, brain injury,

Parkinson's disease, dementia, or neurological disorders. Some services provided include:

- Video Swallow Function Test
- Speech Sound Production
- Augmentative and Alternative Communication Modalities
- Occupational Therapy is committed to help restore function and/or mitigate disability in an effort to maximize independence and ability to participate in the activities of daily living, leisure and social pursuits, job functions and school.
- Aquatic Therapy helps patients improve their strength and increase flexibility through resistance and cardio-based activities.

Community Relations Department

- Facilitation of marketing efforts for appropriate departments within the Prosser Public Hospital District.
- Communicates efficiently and effectively with CEO, Administrative Team, Leadership Team, Hospital employees, Board of Commissioners, community leaders, patients, and the public at large.
- Observes and conforms to hospital policies, programs, mission, and goals. Works through appropriate channels to update or change any of the above.
- Consistently strives to enhance PMH image in all dealings with employees, external customers, physicians, Board members and the public.
- Prioritizes work to produce high quality results in a timely, reliable manner about meeting deadlines, communicating effectively, assisting departmental communication, and enhancing PMH image.
- Practices and demonstrates good judgment, tact, and diplomacy in all written and interpersonal communication.
- Demonstrates enthusiasm, integrity, and loyalty in dealings with public, employees and patients as described in PMH's Expectations for Customer Service.
- Demonstrates an understanding of inter-departmental hospital organization and assists department managers in communication efforts.
- Manage a capital campaign to raise \$2 million for the new hospital project.
- Manage all PMH Foundation business, events, donations, board activity and day to day operations of the gift shop.

Human Resources Services

- Recruiting and Employment Services
- Policy creation and compliance
- Leave Administration: (FMLA, PFMLA, etc.)
- Labor Contract Negotiations
- Employee Relations Management
- Leadership Coaching and Development
- Compensation Design and Administration

- Benefits Design & Administration
- Risk Management
- Performance Management Administration
- Labor Relations Management
- New Employee Orientation and Onboarding
- Volunteer, Student and Contractor Processing and Onboarding
- Employee Support Services
- Employee Engagement Events Development and Implementation
- Employee Health Compliance
- Contract Compliance
- Dress code / Uniform administration & compliance
- Education Assistance Administration
- Federal, State and Regulatory Agency Compliance
- Cornhole Champions & Coaching Services – Competitive Division

Community Outreach/Benefit

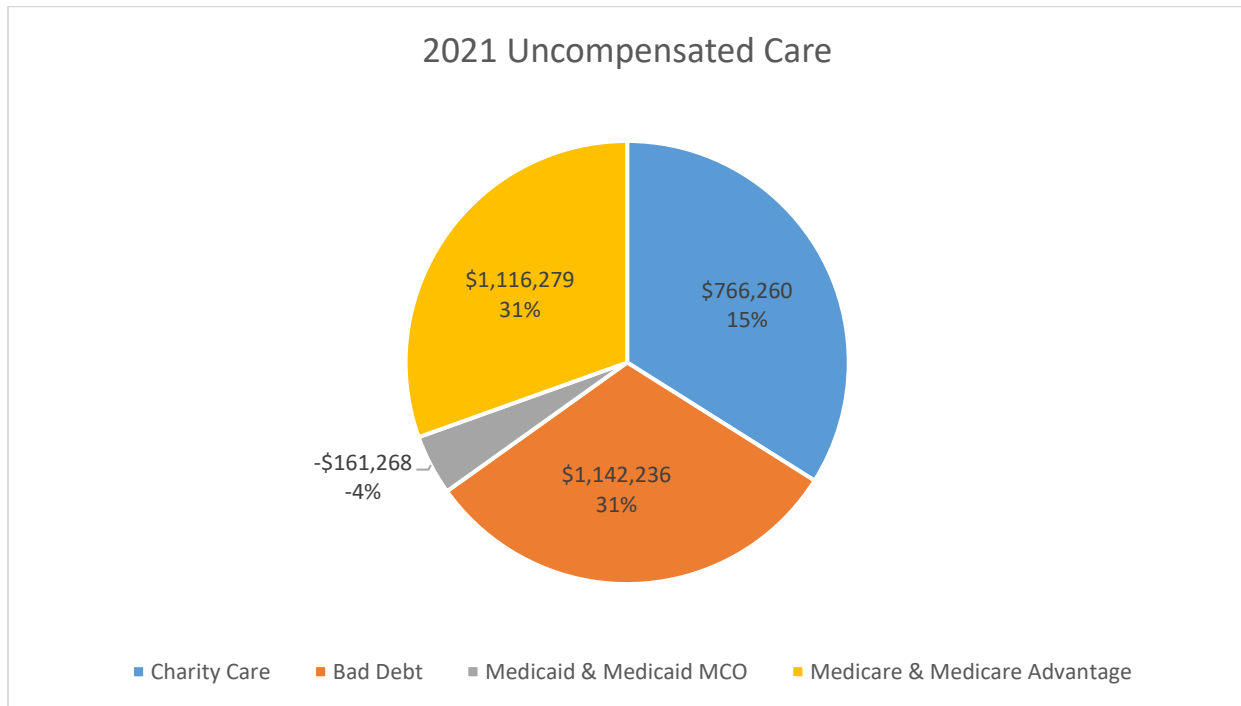
At Prosser Memorial Health (PMH), we believe that a healthy and safe community is a strong community. Our commitment to healthier families comes to life in the programs and activities that we provide to the community. The following events were conducted in 2021 as a benefit to our community:

- **Behavioral Health Challenges**
 - Provide psychiatric services including tele-psychiatric services
 - Partner with Prosser Thrive to focus on mental health for local youth
 - Stop the Stigma (Suicide) Presentation.
- **Access and Cost of all Health Care**
 - Heart Health Awareness Facebook Live – February 12th
 - Nuclear Medicine opened in January 2021
 - Access to Women’s Health in Benton City & Grandview Clinics
 - Full Lab Services in Primary Care Clinics – March 2021
 - Medicare Annual Wellness Visits available at Grandview Clinic - March 2021
 - Colorectal Cancer Screenings & Prevention Facebook Live - March 27th
 - Chronic Back Pain Relief Facebook Live – April 14th
 - Foot Pain Facebook Live – April 28th
 - Thyroid Nodules and Goiter, Symptoms and Treatment - May 26th
 - Mako Robotic Joint Replacement - May 21st
 - Welcomed new providers - General Surgeon Dr. Unger, Peter Park ARNP, Sarah Glover ARNP, Dermatologist Dr. Nicola Nylander, Mental Health Counselor Steve Peters, Zach Garland ARNP, Pediatrician Dr. Brian Proctor, Pediatrician Dr. Tammi Cooks
 - Emergency Department Marketing - Experts in Caring, Open 24/7 messaging,

- My Chart Patient Education
- Dr. Heidi Weaver specializing in infertility treatments
- Summer Safety Event - Prosser Clinic on June 17th. Free community event promoting water safety (free lifejackets)
- UV Safety Facebook Live event hosted by Dr. Santa-Cruz, July 14th. Done in English and in Spanish
- COVID-19 Vaccine FAQ Facebook Live hosted by Dr. Wenger, August 6th
- \$5 Sports Physicals, July – August
- Free Meet & Greet Visits for Expectant Parents with PMH Pediatricians
- **Social Determinants of Health**
 - Free community COVID Vaccine Events
 - Blood drive – March 12th and September 3rd
 - Virtual Childbirth Education Classes - March 24, May 18th, August 17th, October 19th, and November 17th

Community Benefit

In 2021, PMH provided the following patient financial assistance:



Charity Care Program	\$1,243,812
Bad Debt	\$1,142,236
Medicaid & Medicaid MCO	(\$161,268)
Medicare & Medicare Advantage	\$1,116,279
Total 2021 Uncompensated Care	\$3,341,059

Review of Closed/Active Records

The following summarizes the number of records reviewed in 2021. All charts, that triggered according to pre-defined criteria (IP & OP General Screening, Emergency Services, Obstetrical Screening, Surgical Screening, Other [new physician proctoring, focused review]), were reviewed by the Medical Staff Quality Improvement Committee (MSQIC).

- Acute Care – 34
- Emergency Department – 95
- Obstetrics – 26
- Surgical Cases – 4
- Diagnostic Imaging – 2
- PMH Clinic FPPEs – 7
- Other – 21

Health Care Policies – Reviewed and New in 2021

Per policy #860-0062 *Policy/Procedure/Pre-Printed Orders Development*, on an annual basis the author, department manager/supervisor, or committee chairperson will review policies, procedures and pre-printed orders. An electronic signature and date of review will be entered as per policy #860-0066 *Policies and Procedures Usage* on SharePoint.

Department	# of Policies Reviewed	Department	# of Policies Reviewed
Medical Staff Services	4	Acute Care Services	2
Family Birthplace	1	Anesthesia	1
Laboratory	66	Diagnostic Imaging	128
Pharmacy	1	Cardiopulmonary	6
Emergency Services	0	Grandview Clinic	3
Emergency Medical Services	0	Laundry Services	16
Social Services – UR	0	Materials Management	0
Environmental Services	71	Patient Registration	0
Administration & Compliance	16	Human Resources	5
HIM	3	Infection Control	0
Nursing Administration	3	Employee Health	3
Privacy	0		

Per policy #860-0062 *Policy/Procedure/Pre-Printed Orders Development*, when creating new policies, the author will review similar policies and/or procedures for duplication, contradictions or consolidations, content will contain pre-defined elements, and the author will present the new policy to the Policy & Procedure Committee for approval.

Department	# of New Policies	Department	# of New Policies
Medical Staff Services	2	Acute Care Services	0
Family Birthplace	2	Anesthesia	0
Laboratory	25	Diagnostic Imaging	44
Pharmacy	0	Cardiopulmonary	1
Emergency Services	0	Grandview Clinic	1
Emergency Medical Services	0	Laundry Services	0
Social Services – UR	0	Materials Management	0
Environmental Services	0	Administration & Compliance	9
Human Resources	1	HIM	0
Infection Control	0	Nursing Administration	1
Employee Health	2	Privacy	0



2021 - Infection Prevention & Control Score Card

Major Goal Areas & Indicators	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2021 YTD	2020	Goal
Catheter Associated Urinary Tract Infections - # of Events	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Central Line Associated Bloodstream Infections - # of Events	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MRSA Bacteremia - # of events	0	0	1	0	0	1	0	0	0	0	0	0	2	4	0
Hospital Onset C. Difficile - # of Events	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Community Onset Inpatient C. Difficile - # of Events	0	0	2	0	4	2	0	1	0	3	1	0	13	13	0
Community Onset-Healthcare Associated C. Difficile - # of Events	0	0	0	0	0	1	0	0	0	0	0	0	2	2	0
NHSN Reportable Surgical Site Infections - # of Events	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Overall Surgical Site Infection Rate	1.00%	0.00%	0.00%	0.56%	0.55%	0.00%	0.58%	0.00%	0.00%	0.00%	0.00%	0.46	0.23%	0.70%	<2%
Healthcare Associated Infection Rate per 100 Inpatient Days	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0	<1%
Hand Hygiene/PPE Participation, Compliance Rate	81.0%	93.0%	89.00%	86.00%	79.00%	81.00%	#####	82.00%	71.00%	66.00%	59.00%	65.00%	76%	84%	90.00%
Employee Exposures - # of Events	2	1	2	0	0	0	1	4	1	1	1	0	13	2	0
Employee Influenza Vaccination Rate			90%										90%	98%	>95%
Overall COVID-19 Testing Done	985	502	669	778	747	714	845	1293	1004	866	760	841	10071		
Total Negative Results	766	546	626	719	682	664	727	1048	875	788	726	782	8949		
Total Positive Results	219	56	43	59	32	50	118	245	129	78	34	59	1122		
Indeterminate/ONS/lost Test	0	0	0	0	0	0	0	0	0	0	0	0	0		
Employees that tested Positive	5	1	0	2	2	0	2	7	17	7	1	2	4		
Total Number of Employees Tested	47	12	13	14	3	14	7	52	46	40	18	25	291		
Employee COVID-19 exposures either to patient or coworker	0	0	0	0	0	0	0	0	0	0	0	0	0		

Measure Definitions

- Catheter Associated Urinary Tract Infections** - UTI occurring as a result of an indwelling urinary catheter in place for >2 calendar days prior to the UTI diagnosis. Does not include straight catheter consecutive calendar days. Eligible lines: Permanent central lines include tunneled catheters and implanted catheters, i.e. ports. Temporary central lines and umbilical catheters are also included. See **Central Line Associated Bloodstream Infections**
- Central Line Associated Bloodstream Infections** - A laboratory confirmed bloodstream infection in which an eligible BSI organism is identified and an eligible central line has been in place for >2 consecutive calendar days. Permanent central lines include tunneled catheters and implanted catheters, i.e. ports. Temporary central lines and umbilical catheters are also included. See **Catheter Associated Urinary Tract Infections**
- MRSA Bacteremia** - Positive blood culture growth of Methicillin-Resistant Staphylococcus Aureus. Monitored in inpatient areas and Emergency Department.
- Hospital Onset C. Difficile** - C. Difficile positive stool specimen collected greater than 3 days after admission to the hospital (on or after day 4).
- Community Onset Inpatient C. Difficile** - C. Difficile positive stool specimen collected as an outpatient (ED patient) or an inpatient less than or equal to 3 days after admission to the facility (days 1-3)
- Community Onset-Healthcare Associated C. Difficile** - C. Difficile positive stool specimen collected in a patient discharged from a facility < 4weeks prior to current date of stool specimen collection
- NHSN Reportable Surgical Site Infections** - Hip arthroplasty, knee arthroplasty, abdominal hysterectomy and colon surgeries with infection occurring 30 days after procedure date or up to 1 year for procedures in which an implant is used.
- Overall Surgical Site Infection Rate** - # of infections occurring within 30 days after procedure/total procedures.
- Healthcare Associated Infection Rate per 100 Inpatient Days** - Any infection occurring as a result of inpatient hospitalization (inpatient surgeries, CAUTI, CLABSI, C. Diff) calculated as a rate per 100 inpatient days.
- Hand Hygiene/PPE Compliance Rate** - 13 x 30 = 390 observations/month in which proper hand hygiene and PPE is used.
- Employee Exposures** - Any event in which an employee is exposed to a communicable disease, blood, bodily fluid or needlestick injury.
- Employee Flu Vaccination Rate** - Number of employees who provide documentation of or receive the current season Influenza vaccine/total number of employees. 380/404=94% 12 declinations

Attachment B

2021 Prosser Memorial Health Pharmacy and Therapeutics Dashboard

Ref.	Metric	Goal	2020	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD		
QUALITY/SAFETY																		
CMS	Medication Events by Type (Data Source: UHC Reports)																	
	Ordering	0	2						1									
	Transcription	0	1*									1						
	Dispensing	0	5	1				1			1		1					
	Administration	0	17*	2		1	2	1	1	1	2	4	3	1	4		22	
	Documentation	0	5*				1	1										2
	No Error/ADR		3*			1	2							2				5
	Narcotic Waste Documented	95%	95.41	94.44	93.28	96.69	95.07	94.16	93.33	95.14	92.73	97.65	93.75	93.84	97.42	94.70		
	Medication Events by Harm (Data Source: UHC Reports)																	
	Unsafe Condition	0	2	1	1	1		1			1	1	1	1	1	1	1	7
	Near Miss	0	8	1	1	1			1					2	2	1	1	7
No Harm	0	16	1		1	2	2			2	4	2	2	1	2	2	17	
Emotional Distress	0	2																
Additional Treatment	0	1							1					1		1	3	
Temporary Harm	0	0					1		1								2	
Permanent Harm	0	1																
Severe Permanent Harm	0	0																
Total # Med Errors	Raw#	30	3	1	3	3	3	2	2	1	3	5	6	1	5	36		
Medication Trend/RCA *	Raw#	2																
NPSG WSHA	Washington State Hospital Association Medication Safety Initiatives (Data Source: EPIC Reports)																	
	Inpatients receiving warfarin	Raw#	19	1	2	2	3	1	1	2	1	1	2	1	2	1	19	
	Patients with INR >5	Raw#	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Inpatients on hypoglycemic agents	Raw#	256	36	32	36	31	31	31	31	41	38	40	34	24	28	402	
	BG <50 after agent admin	Raw#	4	2	4	2	1	1	0	0	1	2	0	0	1	0	14	
	Inpatients receiving opioids	Raw#	783	85	59	71	87	91	95	104	105	93	79	77	84	1030		

This email may contain information related to performance improvement and peer review programs and is therefore confidential and protected under RCW4.24.250, RCW 70.41.200 and EHB1711.

2021 Prosser Memorial Health Pharmacy and Therapeutics Dashboard

Ref.	Metric	Goal	2020	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD
	Patients receiving naloxone due to over sedation		0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Anticoagulant Safety	Goal: To reduce the incidence of ADE related to anticoagulants ($\leq 0.56/100$ admissions). N= # of patients INR >5 after any warfarin administration. D = # of patients on warfarin														
	Hypoglycemic Agent Safety	Goal: To reduce the incidence of ADE related to hypoglycemic agents ($\leq 0.56/100$ admissions). N= # of patients with a BG level <50 after hypoglycemic agent. D = # of patients on hypoglycemic agents.														
	Opioid Safety	Goal: To reduce the incidence of ADE related to hypoglycemic agents ($\leq 0.56/100$ admissions). N= # of inpatients receiving naloxone <24 hrs after opioid administration related to over sedation. D= # patients receiving opioids.														
NPSG	Medication Reconciliation	(Data Source: Manual Chart Abstraction)														
	Meds reconciled in 24hr	Raw#	4498													
	# of meds reviewed	Raw#	9051													
	Hospital Roll Up	90%	49.70													
	Med Errors related to Med Reconciliation	0	1													
CMS	Infection Control/EOC Rounds															
C276	Remote Storage	90%	96.7%	88.89	100	100	100	100	100	100	100	100	100	98.21	100	98.95
C278	Proper Medication Storage	90%	96.7%	88.89	100	100	100	100	100	100	100	100	100	98.21	100	98.95
	Safe Medication Administration Scanning Compliance															
	Hospital Roll Up	90%	93.04	92.00	95.03	93.74	92.73	93.03	90.85	93.01	92.66	95.01	95.68	95.33	95.06	93.62
	Emergency Department	90%	85.37	88.78	91.90	90.30	83.52	84.15	82.24	86.07	91.41	87.96	90.08	89.99	88.45	87.70
	Labor and Delivery	90%	91.26	93.08	95.55	91.91	93.24	96.07	93.00	93.24	96.27	93.38	95.99	95.11	95.44	94.59
	Acute Care/Swing	90%	95.32	92.69	95.74	94.79	95.22	95.58	93.98	95.59	92.40	96.98	97.40	97.64	97.43	95.07
	Nursery	90%	91.39	92.59	95.24	97.39	91.91	96.69	92.81	95.92	96.08	97.01	99.23	96.30	97.66	95.74
	OSP	90%	95.28	93.15	98.29	95.51	95.77	95.98	93.01	91.52	95.38	98.45	93.91	93.55	97.11	95.04
	Intra-OP	90%	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Post-OP	90%	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
PATIENT LOYALTY (Data Source: PRC Dashboard for HCAHPS)																
HCAPS	Communication about Medications-ALL	>75	74.43													
	Medication Explanation	>75	83.33													

2021 Prosser Memorial Health Pharmacy and Therapeutics Dashboard

Ref.	Metric	Goal	2020	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD
------	--------	------	------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

	Side Effects Explained	>75	65.52													
EMPLOYEE DEVELOPMENT																
SP	# Evaluations Due		2	0	0	0	0	2	0	0	1	0	0	0	0	0
	Timely Evaluation		2	0	0	0	0	2	0	0	1	0	0	0	0	0
Studer	Employee Rounding															
	Aspire Board Updated															

CMS= Center for Medicare and Medicaid Condition of Participation; NPSG= National Patient Safety Goal; WSHA= Washington State Hospital Association Patient Safety Initiatives; HCAPS= Patient Satisfaction Survey results; SP=2018 Strategic Plan; Studer= PMH Cultural transformation initiative. * See Action log



2021 - Strategic Plan Scorecard

Major Goal Area & Indicator	2021 Goal	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2021 Total	2020 Actual	2019 Actual
Patient Loyalty																
IP - "Would Recommend"	>87.9%	90.0%	90.0%	90.0%	80.6%	74.9%	93.3%	94.4%	92.4%	93.7%	92.9%	88.8%	89.7%	93.1%	87.9%	85.1%
ED - "Would Recommend"	>81.4%	63.2%	63.2%	63.2%	70.6%	60.8%	85.4%	92.3%	62.9%	83.9%	81.3%	92.2%	87.5%	84.0%	81.4%	80.3%
Acute Care - "Would Recommend"	>84.1%	85.7%	85.7%	85.7%	72.5%	85.0%	93.8%	90.0%	80.0%	92.5%	91.7%	95.8%	89.2%	91.8%	84.1%	78.6%
OB - "Would Recommend"	>92.2%	91.7%	91.7%	91.7%	83.3%	95.2%	83.9%	100.0%	81.1%	93.8%	93.2%	91.7%	90.6%	93.6%	92.3%	92.0%
Outpatient Surgery - "Would Recommend"	>91.0%	71.3%	71.3%	71.3%	100.0%	93.8%	83.3%	100.0%	100.0%	94.8%	91.7%	100.0%	100.0%	96.8%	89.8%	91.0%
Clinic - "Would Recommend"	>87.3%	71.3%	71.3%	71.3%	74.7%	79.9%	92.9%	90.6%	88.0%	91.0%	92.5%	89.9%	78.6%	91.0%	87.1%	87.1%
Outpatient - "Would Recommend"	>88.4%	77.4%	77.4%	77.4%	74.7%	79.9%	93.0%	94.8%	98.0%	93.6%	94.8%	93.1%	96.7%	94.1%	88.1%	88.4%
Composite Score	>86.2%	75.7%	75.7%	75.7%	80.6%	79.7%	89.3%	88.3%	88.3%	92.4%	91.7%	92.9%	91.7%	92.9%	N/A	N/A
Medical Staff Development																
Medical Staff Turnover	<10%	0%	2%	2%	0%	0%	0%	0%	4%	2%	2%	0%	2%	12.0%	0.2%	0.2%
Prayer Specialty Clinic Visits	1,062	1,051	1,023	1,401	1,301	1,281	1,455	1,443	1,388	1,348	1,346	1,534	1,228	1,318	954	950
Benton City Clinic Visits	1,005	885	696	881	801	742	778	724	574	754	739	681	523	732	837	958
Prayer RHC Clinic Visits	1,052	1,406	1,449	1,503	1,357	1,398	1,297	1,236	1,239	1,150	1,092	938	959	1,227	1,226	960
Grandview Clinic Visits	742	592	522	621	644	670	789	729	960	875	972	952	1,008	778	589	568
Women's Health Center	629	604	626	727	627	653	647	520	563	565	489	610	576	602	601	469
% of Active Medical Staff	>51	49	49	49	51	51	51	51	51	52	52	52	52	50.3	45	41
Employee Development																
403(B) Participation Rate	>55%	99%	97%	97%	99%	99%	99%	99%	98%	98%	98%	99%	98%	98%	46%	N/A
Average Recruitment Time (days)	<28	24	18	26	23	17	32	21.8	14	18	20	14	24	21	32	28
# of Open Positions/Vacancies	<23	25	29	42	12	12	34	49	47	38	35	29	29	32	29.4	23
Hour of Overtime - Overtime/Total Hour Worked	<4.5%	7.3%	5.2%	5.3%	6.2%	5.5%	5.9%	6.7%	6.1%	7.4%	5.2%	5.0%	7.0%	6.1%	5.9%	5.7%
Agency - Care/Total Labor	<8.7%	5.9%	7.4%	6.8%	8.3%	8.9%	7.0%	8.3%	6.5%	4.1%	7.9%	7.7%	7.9%	7.7%	7.6%	14.5%
Turnover Rate	<0.6%	0.0%	2.4%	0.03%	0.7%	0.0%	1.0%	1.0%	0.9%	3.4%	0.6%	0.9%	0.0%	0.9%	0.6%	0.7%
Timely Evaluation	>79.8%	61.0%	67.0%	78.0%	85.3%	55.0%	67.8%	65.5%	72.9%	76.5%	80.0%	81.7%	70.4%	73.5%	70.2%	79.6%
Education Hour/FTE	>215	114	103	126	0.99	1.13	1.12	0.33	1.12	1.50	1.50	1.69	0.76	1.05	1.22	1.55
New Hire (Tenure) <1 year	<10%	0%	1%	0%	0%	0%	0%	0%	0%	30%	30%	30%	0%	10%	0%	0%
1st Workday due to On-the-Job Injurior	<10.25	0	7	9	4	3.5	45.28	31.12	35.75	43.25	29	14	12	19.49	10.25	16.7
Quality																
ED Encounter - Left Without Being Seen	<0.8%	0.2%	1.0%	0.7%	1.6%	0.4%	2.0%	1.8%	2.0%	2.1%	1.2%	2.1%	1.4%	1.4%	0.8%	1%
Fall with Injury	<2	0	0	1	0	0	0	1	0	0	0	0	0	3.0	2	3
Healthcare Associated Infection Rate per 100 Inpatient	<0.07%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.29%	0.07%
All-Course Unplanned Re-admission within 30 Day	<2.7%	5.9%	9.2%	11.1%	3.7%	6.3%	3.0%	5.7%	5.3%	4.1%	4.1%	4.1%	10.5%	6.1%	3.9%	5.4%
Diabetes Management - Outpatient A1C >9 or missing test	<27.6%	22.8%	21.9%	20.5%	19.0%	27.7%	21.7%	14.8%	20.9%	21.9%	25.5%	19.9%	25.7%	21.8%	27.6%	30.3%
Services																
ED Visits	916	820	712	874	1,035	1,133	1,227	1,317	1,276	1,268	1,134	1,167	1,195	1,105	805	1,016
Inpatient Admissions	86	112	89	93	117	118	117	145	151	119	119	97	120	116	83	83
OB Deliveries	45	42	47	39	46	52	48	69	53	45	48	37	57	49	41	37
Surgeries and Endoscopies	137	100	133	187	180	183	190	171	215	185	166	220	218	179	101	118
Diagnostic Imaging Procedures	2,087	2,628	2,439	3,112	3,336	3,156	3,233	3,067	3,040	3,100	3,209	2,960	2,687	2,992	2,280	1,957
Lab Procedures	12,374	14,626	12,570	14,659	14,800	14,902	14,474	15,174	15,064	13,641	14,955	13,566	14,327	14,327	11,768	11,051
Adjusted Patient Days	1,453	1,644	1,496	1,948	1,871	1,722	1,574	1,848	1,894	1,685	1,685	1,685	1,685	1,697	1,393	1,624
Therapy Visits	1,706	1,333	1,401	1,792	1,520	1,373	1,706	1,423	1,386	1,470	1,323	1,324	1,379	1,453	1,314	1,145
Outpatient Special Procedures/Visits	245	213	255	256	342	354	397	393	353	340	358	274	348	324	247	224
Financial Performance																
Net Days in Accounts Receivable	51	59	60	62	64	66	59	59	60	58	54	57	51.33	51	63	63.79
Total Margin	13.47%	11.4%	0.5%	8.7%	8.8%	9.0%	10.1%	8.7%	54.0%	11.1%	15.0%	22.7%	8.2%	18.4%	4.5%	5.30%
Net Operating Revenue/FTE	\$ 19,448	\$ 16,427	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$17,191
Labor as % of net Revenue	\$ 51,602	\$ 61,402	\$ 56,502	\$ 54,202	\$ 58,402	\$ 57,952	\$ 51,992	\$ 58,882	\$ 50,672	\$ 64,962	\$ 55,292	\$ 59,002	\$ 55,522	\$ 572	\$ 61.3%	\$ 59.62
Operating Expense/FTE	\$ 16,894	\$ 14,635	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$\$\$	\$15,891
Days Cash on Hand	156	169	152	146	146	147	155	152	154	156	143	158	155	155	183	120.39
Commercial %	29.10%	27.40%	29.00%	28.40%	28.40%	27.10%	28.30%	28.10%	28.40%	28.10%	28.40%	28.90%	29.30%	29%	29.0%	28.7%
Total Labor Expense/Total Expense	59.00%	68.59%	58.41%	59.48%	62.37%	62.37%	61.73%	63.76%	57.37%	61.89%	59.68%	61.80%	61.02%	61%	61%	62%
Legend																
Green - at or above Goal																
Yellow - within 10% of Goal																
Red - More than 10% below Goal																
*** - Cumulative Total - split year end number																