



MIDDLE PARK HEALTH

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*Keeping Life Grand*

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

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January 1-December 31, 2020

## ABOUT

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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. MPMC 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.

## PURPOSE

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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

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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

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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

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### **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 2020 COMPARED TO 2019

|                                   |                                     |
|-----------------------------------|-------------------------------------|
| Inpatient days ↓ 33%              | Kremmling Urgent Care Visits ↓ 64 % |
| Swing Care Days ↑ 2%              | Rehabilitation procedures ↓ 17 %    |
| Extended care days ↓ 45%          | Winter Park Clinic ↓ 29%            |
| Surgery cases ↑ 6 %               | Granby Clinic ↓ 17 %                |
| Gastrointestinal (GI) Cases ↓ 9 % | Kremmling Clinic ↓ 20%              |
| Emergency Room visits ↓ 11%       | North Park (Walden) Clinic ↓ 7%     |
| Lab procedures ↑ 3%               | X Ray Procedures ↓ 23%              |
| CT procedures ↓ 6 %               | MRI Procedures ↓ 4%                 |

Average length of stay for inpatients: 2.1 days (50.4 hours) compared to 2.4 days (57.6 hours) in 2019. The length of stay by hours continues to meet the 96 hours annual average CMS regulatory requirement for CAH status. Readmissions to the hospital were 5.4% for all cause, which falls below the national average of 17.5% recognized by CMS.

### Rural Health Clinics

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- Ransomware
  - Through extreme teamwork all of the clinics charts from the Ransomware attack were registered, scanned, proper charges were dropped and they were sent out the door for payment.
- Rural Health Clinic (RHC) status was earned for the Grand Lake clinic.
  - Through massive preparations, we were told by our surveyor that, “We were the most prepared for a survey that she had ever seen in her career.” We were able to start billing RHC rates in June of 2020.
- 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% in October of 2020! 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).
- New Service Line
  - In collaboration with one of our ANPs, the Revenue Cycle Team, IT and Marketing, we were able to bring Botox for Migraine relief to our patients. The service is highly reimbursable by insurance and has been proven to provide migraine relief to those suffering chronic headaches.
- Integrating the Colorado Immunization Information System (CIIS) with EPIC
  - This removed the need for vaccination information to be entered in both CIIS and EPIC separately; this not only increases the efficiency of the nurse’s and medical assistant’s workflow, it removes the possibility of documentation error caused by duplication. Through collaboration between COHRIO, IT, and clinic staff, we were able to accomplish this in the Winter Park, Granby and Kremmling Clinic.
- Participation in the Colorado Health Neighborhood
  - Through improving on claims data on the below initiative’s:
    - 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

We’ve been able to earn the organization \$~30,000.00 in incentive payments. We are now consolidating our Foundations program metrics around these incentives as well to earn greater payments.

- Quality Payment Programs (QPP)
  - In collaboration with the Quality Director, the Primary Care Clinic's quality data was submitted to the QPP earning us 93.05/100 on the four categories (Quality, Promoting Interoperability, Improvement Activities, and Cost). This score equates to a 1.32% increase in Medicare Part B payment, payable across the entire organization!
- Becoming a Primary Care Medical Home
  - We've launched our "Year one Foundation's Program" in all five of the clinics, working on one quality metric every ten weeks to accomplish the PDSA's geared to improve processes and lay the foundation for our "Master's 1" and "Master's 2" program in the next two years. Each year the program has the potential to earn the clinics \$50,000 in incentive payments; at the successful completion of the program, the clinics will earn their Primary Care Medical Home (PCMH) designation.
- Turnover Rates
  - Through concentrated efforts of staff appreciation and a teamwork approach, the clinic's turn-over rate (all-cause) for 2020 (1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> Quarter combined) is 2.7%.
- Successful RHC Surveys!
  - Kremmling, Granby, and Winter Park clinic passed their three-year Rural Health Clinic surveys with flying colors; the surveyor spent less than four hours in each clinic and we received our recertification ensuring financial stability for the next three years.
- Social Determinants of Health Screening and Interventions.
  - The Accountable Health Communities model is a Center for Medicare and Medicaid Innovation initiative to determine whether social needs screening, navigation and community collaboration will improve health care costs and outcomes.
  - Clinic patients will receive a iPad with social questions, (Do you have food in the house?, Do you have transportation?, etc.) that will be read immediately by the medical professional rooming the patient as well as sent to Rocky Mountain Health Plans to help navigate the patient to the resources within the county.
  - This initiative also ties into our Foundation's program for financial incentive.
- MyMiddleParkHealth

In collaboration with other departments we set to launch "MyMiddleParkHealth" December 1<sup>st</sup>. Patients will be able to:

- Schedule appointments and check in online
- Complete new patient and health history paperwork
- Communicate with their Care Team
- View bills (pay them in 2021)
- Access their Medical Record
  - Radiology Reports (4 days)
  - Lab Results (non-sensitive, immediately)
  - Pathology (5 days after being resulted)
- View follow-up instructions

- View educational videos
- Price Estimation
- View Provider's Biographies
  - This has also been very helpful in patients receiving information on COVID results.
- Odeza
  - In collaboration with other departments we will be launching Odeza, (hopefully along with MyMiddleParkHealth) a tool that allows automated text message reminders on appointment, confirmations of appointments, cancelations, reschedules, etc.

## Facilities/Plant Operations

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- This year we spent a great deal of time coordinating 2 major construction projects (\$18.5 million) at two of our facilities. There was a great deal of communication with the MPH Staff, contractors and local authorities to be able to continue services for the public and to work towards completion on these projects.
- Broke ground on 15,000 sq. ft. construction in Kremmling. New clinic, lab, imagine, ED and support areas. Slated to open June 21.
- Broke ground on 7,500 sq. ft. construction in Granby. New clinic and inpatient wings. Slated to open June 21.
- Added 28,500 sq. ft. of parking lot in Granby.
- COVID support for hospitals and clinics (plastic walls, Plexiglas, supplies etc.)
- Installed new X-ray in Kremmling.
- Negotiated a contract with Tolin Mechanical to service our commercial HVAC, Boilers, hot water heaters etc.
- Continue with the day to day maintenance for 7 sites.
- Environmental Services has worked hard during the COVID Pandemic doing many terminal cleans around the clock.

## Cliffview

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- Cliffview Assisted Living Center in 2020 had one resident move out and relocate. Another resident moved in with one month. As of January 2021, we are at full capacity and we have 10 people on our waiting list.
- Cliffview experienced an outbreak of COVID this year for two weeks. We were on isolation and residents had to eat in their rooms. Cliffview had all their dietary staff out and six more personal care providers. Hospital staff assisted filling in the needs and proper PPW was provided and available. All residents recovered from COVID and have been offered the vaccination.
- The activity program has been adapted to less visitors but residents have enjoyed the following:
  - Wolford Pontoon boat ride and picnic



- Bingo Games
  - Library book delivery
  - Reading aloud
  - Community Thanksgiving Dinner (Drive through)
  - Christmas Party
  - Outdoor carolers
  - Balloon Volleyball
  - Outdoor music concert
  - Zoom music concert
  - Exercise
  - Movies and Popcorn
- The visitors allowed are dependent on COVID Colorado Dashboard numbers. Residents are allowed to go out on van trips and with family and friends but are encourage to wear a mask when doing so.
  - Residents are tested for COVID according to state regulations, if they are symptomatic or leave the facility. Testing occurs weekly or bi-weekly or every other week depending on the data in Grand County.
  - Residents are able to enjoy their meals out of their rooms in three locations. We have enjoyed several large donations from 4-H kids and ranchers in Grand County including a steer, lamb and chickens.
  - Residents enjoyed their large evergreen tree being lit up for Christmas by local donors and for many Christmas gifts and goodies from local folks. We count our blessings!

## **ED and Inpatient Department 2020**

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- Collaborated in the Creation of COVID policies and procedures and continued nursing education
- Partnered with Flight for Life for SIM lab training
- Evacuated Granby ED and moved to the Winter Park clinic for continued care and then reopened Granby ED during fire outbreak
- Implemented Good Day Pharmacy and cycled medications for Extended Care
- Created a 6 week google doc nursing/CCT/CNA schedule
- Initiated and continued to provide staffing for COVID swabbing and vaccination clinics
- Up to date on Trauma audits
- Implemented Trauma Tuesday Education
- Increased trauma data collection and reporting
- Implemented Friday fill-in newsletter for continued staff communication
- Brought on 2<sup>nd</sup> nurse lead for continuity of leadership 7 days a week
- Combined Trauma Nurse Coordinator with a Clinical Educator position to create one FTE
- Huddle board revamped at both locations
- Implemented High School intern rotation through the hospital departments
- Continued hosting Denver College of Nursing students

- Hired 4 new grads from Denver College of Nursing in part due to their clinical experience here at MPH as well as the maturity of nursing department.
- Brought in house – BLS/CPR
- 3 nurses became Chemo certified
- Increased patient safety by Barcode medication scanning/picture for EXTENDED CARE
- Revamped outpatient infusion center processes by collaborating with scheduling and increasing staff involvement with entering orders and ensure timely infusions as well as increased census.
- Hosted a virtual skills day for all clinical staff
- Successfully provided staffing for all inpatient orthopedic surgical procedures
- Brought in ACLS/PALS to provide certifications for employees throughout hospital
- Implemented shift huddles combined Granby and Kremmling
- Nursing leadership completed TOPIC certified
- Implemented 30, 60, 90 day evaluations for all new employees
- Completed the plan of corrections for Trauma Designation
- Transferred all Extended Care Residents to a different location and back again due to COVID
- Collaborated with rehab department to create an activities calendar
- Implemented patient zoom visitation due to limited visitation
- Implemented call lights in Kremmling ED
- Implemented Elsevier modules for nursing education
- Implemented digital patient call backs
- All nursing staff became NIH Stroke certified
- Cooperated with the fiscal mission of the hospital by down-staffing and job sharing during low census
- Implemented cross training of all nurses to all locations (ED, Inpatient, Infusion)
- Collaborated with the design of the new build and expansion projects

### **Dietary and Nutrition Services Accomplishments 2020**

#### **MPH-Kremmling Dietary**

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- Adjusted to the COVID pandemic by stream lining processes and decreasing staff hours when appropriate.
- Adjusted our menu and food supply during the COVID vendor food shortages/delivery difficulties and changes.
- Developed a COVID epidemic menu cycle, feeding plan and transportation system for potential Emergency patient Surge in April.
- **Note:** Major concepts from this theorized plan was used in the **Cliffview COVID Outbreak in October- November, 2020 for 6 weeks.** Hospital dietary kitchen became the centralized kitchen for meal prep.
- All 3 Cliffview Dietary staff members were quarantined
- 2 Hospital Dietary Assistance and 1 RD prepared 60-75 meals per day, transported all 3 meals per day for 6 weeks to Cliffview Residence.

- Celebrated Birthdays with special meal and dessert for our 100 Year Old Resident! And 4-Nonagenarians!
  - **Cliffview Dietary Department:**
  - **Received locally donated 4-H Side of Beef:**
- In August, approximately 470 pounds of donated beef ( a cost savings estimated at \$1,650.00)
- This is high quality beef that has enriched the Residence weekly diets and saved MPH money.
- **Special Beef cuts used to prepare a Prime Rib Christmas Party and New Year's Day meal for the Cliffview Residence**
  - Planned and prepared special Thanksgiving Resident meal plus "TO GO meals" for the needed in the Kremmling Community. Well received and grateful community members.
- Successful Approval from the CDPHE State Health Survey, September, 2020.
  - **Nutritional Services: Out-Patient Consults in Clinics and In-Patient/Residence Care, November 2020**
- Jean Anderson, RD was able to focus on the Out- Patient and Resident/ In-patient nutritional assessments after the COVID outbreak at Cliffview. Her position changed to focus on the Nutrition Services.
- Jody Cordova and Sarah Ramirez have taken over the Dietary foodservice management duties.
  - **Employee Monthly Meal/ Celebrations:**
  - Hospital Week in May had several days of food specialties.
  - The Dietary Staff continued to combine efforts with the Leadership and Spirit Team to provide almost monthly summer barbeques from June thru September.
  - Thanksgiving and Christmas Holiday Meals were also prepared.

## Medical Staff Changes Since the 2019 Annual Review

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The following providers joined MPH:

- Christina Travis, FNP joined MPH
- Dr. Todd Odegaard, DO joined MPH

The following provider resigned:

- Randi Wagner, DO

# 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

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- 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

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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

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- MPH has attested for Stage 3 Meaningful Use for the hospital and clinics
- MPH has attested for MIPS for clinic providers
- MPH has been preparing application documents for the upcoming 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 – 208**
- \* **Retired - 49**
- \* **New – 33**

## PERFORMANCE IMPROVEMENT AND QUALITY ASSURANCE

### Clinical Quality Measures

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MPH is compared to other reporting CAH/hospitals, and MPH is meeting the benchmark set for each measure. The Clinics received an exemption for 2017 reporting of Clinical Quality Measures, although they continued to work on initiatives to enhance patient care and screenings.

#### Preventable Harm Rates: Hospital Acquired

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- Blood Stream Infections: 0
- Catheter Associated Urinary Tract Infections: 0
- Falls: 20
- 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         | 8   |  | # Patients transfused        | 4 |
| # Crossmatched units          | 29  |  | # Crossmatched units         | 3 |
| Crossmatch- Transfusion ratio | 0.4 |  | Crossmatch-Transfusion ratio | 1 |
| # single unit transfusion     | 2   |  | # single unit transfusion    | 2 |
| Total # transfusions          | 21  |  | Total # transfusions         | 6 |

## 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 established for CY2021:

- Opening of both the Kremmling and Granby facilities new construction.
- Implemented COVID-19 PCR and antibody testing.
- Initiated COVID-19 vaccine program.