# 2019

## Annual Performance Assessment & Improvement Report





CENTERED ON EXCELLENCE



### Values:

- personal integrity and commitment to provide compassionate, responsible, quality services to our community
- an environment that allows individuality, team work, and communication to flourish
- the enriching nature of diversity, creativity, and innovation
- honesty and leadership in an atmosphere of mutual respect and trust.

### Vision:

Pullman Regional Hospital is a community leader of integrated health and healing activities where our values guide and inspire, and science and technology quietly enable people to comfort, encourage, and heal.

### **Mission:**

Pullman Regional Hospital exists to nurture and facilitate a healthier quality of life for our community.

### **Customer Service Philosophy:**

Each of us at Pullman Regional Hospital is sincerely interested in exceeding the expectations of others in a courteous, respectful, and friendly manner. We accept personal responsibility to understand each person's needs and provide individualized service.

### **Patient Care Philosophy:**

It is our belief that all individuals are active partners in their own health and healing activities. This is supported by a flexible care environment where information is shared while participation and personal choice are encouraged.

### 2019 — Centered on Excellence



At Pullman Regional Hospital, our Strategic Focus Areas provide direction for our efforts in supporting our mission, moving toward our vision, and being

consistent with our values. Strategic objectives and organizational initiatives offer the operational roadmap for ongoing progress towards our future within a culture of performance measurement and continuous improvement.

	Page
Organizational Responsibility	6-20
Strategic Framework and Strategic Planning Process	6-9
Governing Board Committee Activities	10
Pullman Regional Hospital Foundation	11
Hospital Awards and Happenings	12
Regulatory Compliance	13-16
DNV Accreditation	13
Corporate Compliance	14
Healthcare Insurance Portability and Accountability Act	14
Safety & Physical Environment	15
Ethics Committee	16
Interagency Care Transitions	16
Mental Health and Substance Use Interagency Team	17
Quality of Life Team	17
Medical Staff Activities	18-19

	Page
Superior Clinical Outcomes	20-31
Patient Safety	20-27
2019 Performance Improvements	20
Partnership for Patients	21
Inpatient Falls	22-23
Medication Safety	24
Nulliparous Term Singleton Vertex C-Section Rate	25
30-Day Readmissions	26
Transfers and Time to CT	27
Infection Prevention	28-29
Employee Health	28
Hospital Acquired Infections Rate	29
Surgical Site Infections Rate	29
Community & Customer Satisfaction	30-41
HCAHPS	30-31
CMS Hospital Compare	32
Departmental Patient Satisfaction	33-36
Community Engagement	37-42
Community Outreach & Education	37-38
Volunteer Program Overview	39
Marketing & Community Relations	40-41
Employee Engagement	42-46
Employee Recruitment and Retention	42
Wellness for Life	43
Staff Certifications	44
Pathways to Excellence	45
Staff and Physician Recognition	46

	Page
Financial Effectiveness	47-53
A Year in Review — 2019	47
Financial Performance Summary	48-51
Accountable Care Organization (ACO)	52-53
Innovation: Partnerships and Collaboration	54-69
Pullman Regional Hospital Clinic Network	54-55
Palouse Specialty Physicians	56-57
LCSC Clinical Faculty Agreement	58
Clinical Informatics	59
Information Technology	60
Center for Learning and Innovation	61
Care Coordination	62
Palliative Care	63
Whitman County Health Network	64
Summit Therapy and Health Services	65-68
Pediatric Excellence	69



### **Strategic Planning**

### Strategic Framework at Pullman Regional Hospital

#### **Primary Focus**

- 1. Improving the efficiency and financial performance of our activities
- 2. Pursuing an integrated and collaborative approach to organizing and delivering care and services
- 3. Recruiting and retaining high quality physicians, hospital staff, and other providers
- 4. Fully embracing and integrating the principles of **generosity and philanthropy** leading to committed community support
- 5. Developing plans to assure modern facilities and technology

#### **Secondary Focus**

- 1. Continuing emphasis on our **quality** improvement and **patient safety** cultures by incorporating proven quality and patient safety initiatives into our activities
- 2. Strengthening **market share** in the region through expansion of current services or the addition of new services
- 3. Using the power and creativity of innovation to explore new possibilities
- 4. Supporting continued vigilance in assuring high patient satisfaction
- 5. Developing processes to enhance **employee engagement** thus creating a good place to work

### Strategic Activities for 2019 and Beyond

- Continue pursuit of the Next Era of Excellence plan
- Develop plan for additional outpatient clinical and physician office space that promotes an experience of "one stop care" for our community – proposed construction of a 45,000 square foot addition to the hospital campus was developed.
- Explore and determine the path for establishing a community health information system and implementing a new electronic health record system at Pullman Regional Hospital the decision was made to select the Epic personal health record system as the future system for the hospital and for the integrated community health information system.
  - This should result in establishing the ability to provide a community-wide, personal health record
- Improving the financial performance of the Pullman Regional health system including proposing and passing a UTGO bond a \$29.0 M bond proposal was presented to the community twice in 2019 with narrow failure to pass each time.
- Develop community support for a bond issue through education, organizing a citizen's committee, and community involvement
- Strengthen our efforts and activities related to philanthropy to increase our results in areas of storytelling, volunteering, and fundraising – the Foundation raised \$3.8 M in 2019, we had over 200 volunteers for the hospital.
  - Develop a plan for the remodel of identified hospital space
- Physician recruitment, retention and support activities—In partnership or through the Clinic Network recruit the following: General Internist, Family Physician(s), OB/Gyn, Behavioral Health Providers, Orthopedic Surgeon, Neurologist, Otolaryngologist, General Surgeons.



### **Strategic Planning**

- Retention and support efforts to be considered for all physicians and non-physician providers.
- Explore and develop a pilot program for use of scribes in the emergency department with key metrics being efficacy, efficiency, financial impact, patient satisfaction, physician well-being, nurse satisfaction, etc.
- Implement and support the Pullman Regional Hospital Clinic Network formal organizational structure and pursue efforts for meaningful integration of the Network and Hospital operating activities Continue development of the Clinic Network with expansion of services (i.e. urgent care), self-sustaining finances, and assuring appropriate referrals to the hospital
  - Explore partnership possibilities for expanding unscheduled care services
  - Explore creating a partnership to offer a primary care telemedicine service
- Explore partnership opportunities related to developing value-based payment models within our community
- Develop a process for regular "Lift Where You stand" efforts
- Identify areas of opportunity to expand into that would broaden the continuum of care that is associated with Pullman Regional Hospital (i.e. retail pharmacy, outpatient physical therapy, adult day health, outpatient imaging, chronic illness management, etc.)





### **Strategic Planning Focus Groups**

	Physician recruitment, re	etention and support activit	ies
Scott Adams	Carrie Coen	Karen Geheb	Stephanie Knewbow
Patty Snyder			
	ort the Pullman Regional Hos s for meaningful integration o	<del>-</del>	_
Steve Febus	Debbie Heitstuman	Darin Porter	Jennifer Saarela
Kelly Sanders	Verna Yockey	Karly Port	
	Develop a process for regul	ar "Lift Where You stand" e	fforts
Gerald Early	Jennifer Matera	Cathy Murphy	Shauna Patrick
Corrine Phillips	Erin Richardson	Dana Srikanth	Mary Taggart
Explore partnership opportunities related to developing value-based payment models within our community			
Steve Febus	Bernadette Berney	Steve Cromer	Sandy Frisbey
Becky Highfill	Janine Maines	Pete Mikkelsen	
Identify areas of opportunity to expand into that would broaden the continuum of care that is associated with Pullman Regional Hospital (i.e. retail pharmacy, outpatient physical therapy, adult day health,			
Juli Cross	Sheri Cutler	management, etc.)  Jeannie Eylar	Andrea Howell
Krystal Rogers	Austin Swopes	Pat Wuestney	Andrea nowell
	s and activities related to phi	<u>'</u>	esults in areas of storytelling
our enough	•	g, and fundraising	saits in areas or story terming,
Megan Guido	Melissa Anderson	Phil Carr	Chris Jensen
Rueben Mayes	Stephanie Pierce	Michelle Reynolds	Derek Sedam
Katie Squires			
	Continue pursuit of the	Next Era of Excellence pla	n
Scott Adams	Kaela Dewan	Ed Harrich	Elizabeth Hillman
John O'Bryan	Karly Port	Alison Weigley	

### **Strategic Planning**

### The Next Era of Excellence

Drawing on the ideas and concepts developed in 2012, the Hospital began organizing activities and plans related to The Next Era of Excellence. The major components of the plan are;

Community-Wide		
<b>Electronic Health</b>		
Record		

Update Medical Equipment

Redesign of Current Space

Healthcare Pavilion
Addition

- Establishing a community wide electronic personal health record system to facilitate an integrated comprehensive, one-stop care experience for patients
- The addition of 45,000 square feet on the Hospital campus for physician offices and expanded clinical services
- Upgrading and expanding designated hospital space and services
- Updating and advancing medical technology

The Next Era of Excellence was presented to the community on two ballot propositions, one in April and one in November. Each ballot received a majority of support, however, the April election failed to meet the required voter turnout. The November election failed to receive a super majority by 14 votes. We expect that

renewed efforts for the Next Era of Excellence will continue throughout 2020.





### **Governing Board Committees**

# Pullman Regional Hospital recognizes and appreciates all of the Commissioners for their commitment, time, and effort.

### **Quality Improvement Committee (QIC):**

The QIC continues to provide the oversight for performance assessment and improvement activities of the hospital. This committee functions in the role of monitoring the Clinical Indicators Dashboards, Risk Management Reports, Safety Report, Patient Satisfaction Dashboard and the Community Engagement Dashboard and activities on a regular basis. Along with reports from Departments related to their improvement activities and yearly review of their department functions and processes. In 2019, the committee provided ongoing support in reviewing the Quality Management System of the hospital and further building on this structure. Areas of focus continue to be on the quality reporting and patient safety with emphasis on readmissions, medication safety, and infection prevention with a focus on sepsis management and risk management.

#### **Strategic Planning Committee:**

The committee spent a majority of their time focused on aspects of The Next Era of Excellence plan for meeting the future healthcare needs of the community. The committee was also involved in conversations and plans around ensuring continued access to care with Pullman Regional Hospital and the Palouse Health Center. Additionally, the committee participated in annual planning efforts establishing strategic focus areas for 2020.

#### **Governance Committee:**

The committee made revisions and finalized the Long-term Succession Plan policy as well as reviewed executive employment contracts. The committee also initiated the process of certifying Commissioners with the Washington State Hospital Association (WSHA) Governance Education program. Six of the seven Commissioners completed their training and are certified with WSHA. Additionally, the committee stablished an education calendar for Board members, reviewed and updated bylaws, received quarterly reports on HIPAA and compliance activities, conducted the annual CEO evaluation and the annual self-assessment of the Board, and reviewed and revised Board policies.

#### **Finance Committee:**

In 2019, Pullman Regional Hospital's Finance Committee continued to provide leadership in the financial administration of the hospital. Attention by the committee was given to the financial effectiveness and audit oversight for the district, oversight and input, involvement in:

Independent audit (DZA)

Washington State Auditor - Bi-annual Accountability Audit

340B Audit corrective actional plan development

Contract Negotiations with Aetna, Kaiser, United, & First Choice

Major CAPEX: OR Central Sterilizing unit, Same Day Service expansion project, Inland Ortho purchase/sale/renovation, phone system upgrade, new nurse call system, etc.

UTGO Bond measures to the community

**ACO** efforts

PRHCN Executive Director development and transition from V2V

Clinic Provider compensation and employment contract development

Third Party Payer audits

New partnership reviews

Palouse Health Center

Guiding the development of the 2020 Strategic Management Plan and Budget

### **Pullman Regional Hospital Foundation**

#### 2019—A Year in Review

In 2019 the Foundation raised \$3.8 million in philanthropy on \$852,000 in annual expenses. Based on fundraising productivity and expenses, cost to raise a dollar was \$0.22, or \$0.26 better than our target \$.028. Due to the generosity of the community, \$1.27 million in philanthropic funds were provided to Pullman Regional Hospital through transfers and direct gifts. Community leaders Wayne Druffel and Glenn Johnson volunteered to co-chair The Next Era of Excellence Campaign Cabinet. They recruited cabinet members Ken Casavant, Carol Chipman, Garth Mader, Tony Poston, Dr. Karen Geheb, Steve Mader, Noel Schulz and Foundation Board President Pat Wright. Dr. Karen Geheb volunteered to chair the campaign family division. Cabinet members participated in leadership and major gift meetings. Other key happenings in 2019:

- Initiated fundraising campaign leadership and family division phases
- Successful fundraising Gala to kick off the year
- The Women's Leadership Guild Girlfriends Gather grant award event
- 5<sup>th</sup> Quarter Rally event to support the PRH athletic training program
- Three grants with award totals over \$500,000 to support a wide variety of long-term projects at the hospital
- "No Opinion" financial audit for the 2018 fiscal year
- Building strong partnerships with regional community foundations such as the Innovia Foundation, M.J.
   Murdock Charitable Trust, and the Empire Health Foundation
- A successful "GivingTuesday" campaign in December, launching the Foundation's social media presence that will continue into 2020
- Successful Celebration in the Gardens and planned giving stewardship events
- Retaining donors and acquiring new ones at high levels benchmarked against our peers



### **Hospital Awards & Happenings**

#### **Laboratory Accreditation**

The College of American Pathologists (CAP) is the world's largest organization of board-certified pathologists, with a mission to ensure that there is excellence in how pathology and laboratory medicine is practiced around the world. Under deemed authority by the CMS, the CAP has spent over 70 years promoting



excellence in laboratories and advancing the practice of pathology and laboratory science. Laboratory Accreditation Program (LAP) being CAP ready can mean providing better quality of care while fostering and advocating best practices in pathology and laboratory medicine.

### Women's Choice Award—Overall Patient Experience & Obstetrical Care

We were recognized as one of America's 100 Best Hospitals with two different Women's Choice Awards – one for overall patient experience and another for obstetrical care. Women's Choice is a national award, based on the recommendations and preferences of women as measured by HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) data. This makes the sixth time we have received both awards.



### **BICOE**—Breast Imaging Center of Excellence

Imaging Services at Pullman Regional Hospital has been designated a Breast Imaging Center of Excellence (BICOE) by the American College of Radiology. BICOE is the gold standard of quality in breast imaging centers. BICOE designation is awarded to breast imaging centers that achieve excellence by seeking and earning accreditation in all of the ACR's voluntary breast-imaging accreditation programs and modules. These are Mammography, Stereotactic Breast Biopsy, and Breast Ultrasound (including ultrasound -guided breast biopsy.)



#### Sleep Medicine Accreditation

Pullman Regional Hospital is accredited by the American Academy of Sleep Medicine. Since 1977, the American Academy of Sleep Medicine (AASM) Standards for Accreditation have been the gold standard by which the medical community and the public evaluate sleep medicine facilities. Achieving AASM accreditation demonstrates our commitment to high quality, patient-centered care through adherence to these standards.



### **Daisy Award**

The DAISY Foundation was established in 1999 and recognizes nurses that have made a significant difference in a patient and their family's experience. The DAISY award for Extraordinary Nurses has been embraced by thousands of healthcare organizations around the world. Pullman Regional Hospital partnered with the DAISY Foundation in 2018 and provides three awards per year. Twenty eight (28) nurses were nominated for these three awards in 2019. The award winners were Nate James, Mark Houghton, and Blake Brackin.







### **DNV Hospital Accreditation**

In 2014, Pullman Regional Hospital began working with Det Norske Veritas (DNV) for hospital accreditation. DNV, a Norwegian manufacturing and maritime company, entered the healthcare accreditation arena in 2008 when it received deemed status from the Centers for Medicare and Medicaid Services (CMS). DNV provides a more consultative approach to the accreditation process, with a primary focus on the development of high reliability organizations through rigorous attention to continuous process improvement.

DNV conducted our seventh annual accreditation survey in August 2019. We had another successful survey which helped demonstrate that we have strong processes in place and a continual focus on our quality management systems and structures within Pullman Regional Hospital. As an organization we continue to focus on our customers; leadership; engagement of people; process approach; improvement, and evidence-based decision making. The adoption of a quality management system helps organizations like ours improve its overall performance and provide a sound basis for sustainable development initiatives.

We continue to meet the standards set forth for accreditation that combines Medicare Conditions of Participation with ISO 9001 Quality Management Systems into our hospital accreditation program. Thru the accreditation process it is allowing us to focus on common goals, like patient care and safety and demonstrate our commitment to excellence in quality and safety. Through our ongoing improvement processes which focus on patient safety and departmental flow processes, our reviews and audits assist us to be better able to define and work on our areas for improvement upfront; engaging all staff in the process.





### **Corporate Compliance**

Pullman Regional Hospital, as a publicly owned non-profit entity, is committed to ethical corporate conduct while we serve the people of Whitman County. The last year brought on positive developments in our Compliance efforts, including:

- Periodic compliance reminders and updates from current events
- Assisted implementation of Martti video translation service
- Focused on Clinical Documentation Improvement
- Continued internal audits of Moon notices and inpatient letter completion
- Hosted quarterly Compliance Committee meetings and reported to administration and board of commissioner members quarterly
- Continued internal monitoring of Pullman Regional Hospital's Revenue Cycle
- Quarterly Utilization Review reports including continued internal monitoring

Thank you to our 2019 Compliance Committee Members: Jeannie Eylar, Steve Febus, Debbie Heitstuman, Hannah Kimball, Janine Maines, Verna Yockey, Kelly Sanders, Elizabeth Boyd, and Sandy Frisbey.

### Healthcare Insurance Portability & Accountability Act (HIPAA)

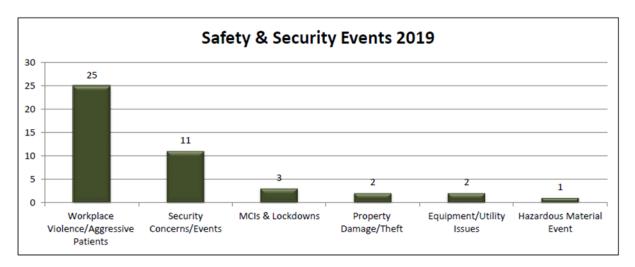
Pullman Regional Hospital's HIPAA Committee led many successes during the year. Over the year, we:

- Continued HIPAA Security Auditing system
- Our Information Technology Team and HIPAA Committee implemented improved email security for personal devices
- Revamped Healthstream learning module
- PRHCN HIPAA policies created and shared
- Clarified use of Police Body Cameras in the hospital
- Conducted quarterly network vulnerability scans
- Creating phishing email test and education
- Reviewed all HIPAA incidents, breaches and concerns
- Shared specific education on password policy and strength, and when Business Associate Agreements (BAAs) are required for vendors
- Conducted internal HIPAA Security Risk Assessment using HHS template that reviewed all EHR systems and reviewed risk findings with committee

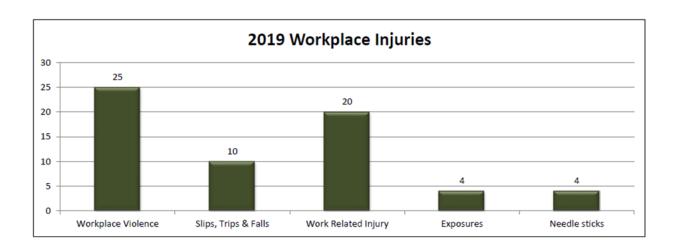
Thank You to our 2019 HIPAA Committee Members: Chris Jensen, Kelly Sanders, Sandy Frisbey, Steve Febus, Hannah Kimball, Debbie Heitstuman, Bernadette Berney, Stephanie Knewbow and Janine Maines

### **Physical Environment**

In 2019, the Safety Committee was focused on activities that continue to provide and improve a safe working environment for all of the employees at Pullman Regional Hospital.



- From the security events, the Safety Committee created new notice stickers for the hospital's entrance doors.
- Pullman Regional Hospital did have one Disaster Medical Coordination Center activation in February 2019 and worked with Whitman Medical Center and Gritman Medical Center to place patients from an MCI.
- The Safety Committee oversees the Code Orange Team that did have an activation in July.
- Workplace injuries are reviewed monthly, as well as with the department director.
- Pullman Regional Hospital has also experienced the nation-wide increase in Workplace Violence. The Safety Committee created a sub-committee dedicated to Workplace Violence Prevention that will meet quarterly starting in 2020.



### **Organizational Ethics**

#### **Ethics Committee**

Ethics Committee membership includes Sandy O'Keefe RN/Hospital Board; Joe Pitzer hospital board, Karen Geheb, MD Hospitalist, Laurie Brown RN, Bishop Place; Barb Sheffler, DSHS Children & Family Services; Pete Mikkelsen, Emergency Department MD; Leyen Vu, MD WSU Health & Wellness, Gerald Early MD, and staff members: Beth Suarez, Anna Engle, Jacob Dyer, Hannah Kimball, Stephanie MacCulloch, and Rory Fletcher. The committee meets 10 months/year and more frequently as consultations requested. Each meeting consists of an educational component from a biomedical ethics perspective, a case review and committee discussion. The committee utilizes Clinical Ethics: A Practical Approach to Ethical Decision in Clinical Medicine, by Albert R. Jonsen, Mark Siegler & William J. Winslade. Learning included topics such as providing reproductive health services to a developmentally disabled woman living with her parents, patient decision making capacity, ways to deal with "hateful patients", palliative care patients requesting knee ablation, and disclosure of medical events. The committee accomplishments included:

- Creation and distribution of a Frequently asked Questions for the Ethics Committee
- Provided case consultations for four clinical case requests
- Established the criteria of when disclosure for a medical event occurs which states we will "inform
  patients and family about all unintended and/or unanticipated events that altered the care of the patient
  or their health status".

**Ethics Committee Co-Chairs:** 

Bill Kabasenche Ph.D. Washington State University Philosophy & Ethics Professor Consultant & Educator Jeannie Eylar Chief Clinical Officer Pullman Regional Hospital

### **Interagency Care Transitions**

The Interagency participants with the Care Transition Group include: Pullman Regional Hospital, Circles of Caring Adult Day Health, Avalon Care Center, Bishop Place, Regency Senior Living, Gentiva Hospice, Gentiva Home Health, local Adult Family Homes, Rural Resources and Pullman EMS. The group met three times in 2019. Services within these agencies ebb and flow and keeping abreast of the changes has proven beneficial to everyone. The group created and maintains a "Continuum of Care" document that is broadly shared so that everyone that needs this information has easy access to it.

#### Goals:

- · To have all people in the right level of care at the right time, with seamless transitions between the organizations.
- · To have established relationships between the people in the organizations.
- · To work through issues related to the transition as early as possible.
- · To establish and maintain the best community team to support our community members during their "transitions in care".

### Key accomplishments in 2019

- · Maintained a non-emergency transportation contract with Pullman EMS and Fire District #12 benefitting our emergency department and the living facilities.
- · Utilized this group as our community resource group in planning the Pullman Regional Hospital's palliative care services and its expansion to provide outpatient palliative care services

### Mental Health and Substance Use Interagency Team

There has been an interagency group that has been meeting monthly for over 16 years. The focus of this group has been to design systems and processes to care for the people that utilize all of our services, build relationships amongst the people in the different agencies, communicate changes in the laws regarding mental health and substance use patients and learn from our experiences of how to improve our care. The agencies involved include Pullman Regional emergency department representatives, Dr Mikkelsen, and Stephanie Knewbow, Verna Yockey from inpatient care, Sarah Rial and Jeana Boyd from Care Coordination, Pullman police, WSU police, WSU Cougar Health Services, and representatives from Palouse River Counseling. Some of the key areas of focus in 2019 were the referral process for WSU students for both behavioral health and counseling services. The two services underwent significant changes in 2018 and providers at the hospital have had concerns that students may be "falling through the cracks". Changes in the law regarding holding psychiatric patients in community hospitals changed, requiring a focus on how to better meet the patients' needs and the legal requirement. The process for the hospital to provide a "single-bed certification" for patients meeting the involuntary admission criteria until there is an available psychiatric bed. This accomplishment was only accomplished because of our strong relationship with Palouse River Counseling.

### **Quality of Life Team**

The Quality of Life Team support patients, families, physicians and hospital staff in navigating Quality of Life issues related to chronic & debilitating illness and End of Life decision making. The committee is comprised of Anna Engle RN/ELNEC Educator, team chair; Paula Fealy, Unit Clerk; Brianna Robinson, Pharmacy; Caitlin Carl RN/ELNEC educator; Sarah Rial, MSW.

One goal of the team is to positively influence primary care physician and hospitalist communication as it relates to their patients and end of life planning and conversations.

The Quality of Life efforts in 2019 included review of 27 hospital deaths. The review included: Did the patient have an Identified Health Care Agency; Did the patient have a POLST form and or Advance Directive? and of those patients with advance directives did the care team honor any known wishes. The QOL team has made significant improvements of addressing patient's wishes as they approach death. The advance care planning initiative has increased our community's awareness of the importance of making ones' wishes known and our staff are more attentive to talking about patient's wishes as well. Of the 27 deaths, 24 of these patients were "comfort measures only/hospice/do not resuscitate" patients and their wishes were followed. The three patients that were "full code" patients were all deaths in the emergency department. One patient was being airlifted by Life Flight and coded in route to SHMC. They landed at Pullman Regional Hospital to try and stabilize him but he died. The QOL has been using their Comfort Menu which is the End of Life options form developed in 2018 and continues to support families and patients at the end of life with the gift of a blanket, bereavement materials, and other comfort options.

The two ELNEC RNs continues to provide training to Pullman Regional Hospital staff and employees. The QOL team also was directly involved with advancing our palliative care services, continuing to expand the continuum of care provided by Pullman Regional Hospital.

### **Medical Staff**

### **Performance Improvement Activities**

### **OB/Peds Committee**

Reviewed 17 charts
Continuing to work on NTSV rates and C-section rates
Maternal hemorrhage case study
Should dystocia simulation training
Annual policy/protocol review

#### **Peds Subcommittee**

Reviewed 26charts
DKA protocol transfer criteria
ED peds readiness guidelines
Reviewing and monitoring pathway utilization



### **Critical Care Medicine Committee**

Reviewed 43 charts; provided feedback to providers
Working on improvements to the Massive Transfusion Policy
Hem/Onc privilege form
Dietitian privilege form
Continue development an Antibiotic Stewardship Program
Nonprescription prescription pad
Team certifications

#### **Surgery Committee**

Reviewed 23 charts
Developing Performance Scorecard
Participating in MTP process

#### **Anesthesia Committee**

Reviewed 108 charts with continued improvement noted in documentation requirements. Developed process for locum provider documentation compliance

#### **Credentials Committee**

Reviewed and recommended 22 initial appointments, 68 reappointments, 17 telemedicine providers and completed 4 FPPEs.

Committee members attended off site advanced credentialing education course and providing education to during committee meetings.

Recommended privilege criteria for Hem/Onc, Dietitian

Recommended revision to Emergency Medicine privilege form for POCUS

### **Performance Improvement Activities**

### **Family Medicine Committee**

Assist with peds and OB/Peds committee chart review Revised Family Medicine C-section privilege criteria

#### **Emergency Medicine Trauma Committee**

80 charts reviewed and provided providers with feedback.

MAT pathway

Revise Emergency Medicine privilege form to include POCUS

Conducted FPPE reviews

### Pharmacy, Therapeutics, and Infection Control Committee

The committee continued to monitor adverse drug reactions, medication errors, hospital-acquired infections, DVT prophylaxis and immunizations. Developing an Antibiotic Stewardship Program. MTP

### **Psychiatry Committee**

Case presentations

Continues to provide oversight for the Telepsychiatry services offered at the hospital

### **Medical Executive Committee**

Continued to provide input to QIC

Recommended revision to Emergency Medicine privilege form to include POCUS

Recommended privilege criteria for Hem/Onc

Recommended privilege criteria for Dietitian

Recommended to the Board of Commissioners 22 initial appointments; 68 reappointments, 17 telemedicine and 4 FPPEs

Working on Bylaws revision with goal for completion in 2020



#### **2019 Performance Improvements**

During National Patient Safety Week, Dr Early and Jeannie Eylar made patient safety rounds. They visited nine departments on various shifts and talked to over 36 clinical staff and physicians. The employees identified over 20 different issues that caused them concern for patient safety. The issues were separated into these categories and the primary improvements are listed in each category.

#### 1. Medication Safety

- •Initiated double check system for all pediatric weights and medications
- •Introduced an enhanced medication administration healthstreams learning emphasizing how to double check medications received in the prior hours. Module was completed by 100% nursing staff and put into new nurses' orientation
- •Pharmacy and the nursing departments are reviewing pyxis "time-out" settings as well as our override policies to assure patient safety

#### 2. Preventing infections

•The hand hygiene task force created a video introducing how we approach each other when we don't see colleagues using appropriate hand hygiene. The video was shown to medical staff and hospital staff and was well received.

### 3. Competence

- •The medication competency was completed for all new and currently working nurses, reminding them of the importance of critical thinking while administering medications.
- •Mock codes, massive transfusions, and postpartum hemorrhage scenarios were conducted in departments using the teams of people that worked together to work through these high risk, low volume activities.
- •TeamSTEPPS focused training for the operating room staff

#### 4. Physical plant and equipment

- •New patient beds, chairs and stretchers have improved the patient and staff safety throughout the hospital
- •We were granted \$10,000 from Coverys to allow us to redesign the doors between BirthPlace and Med-Surg to allow our OB department to be totally locked down. This will occur in 2020.
- •Following a significant violent psychiatric patient experience in the ICU, a group was developed to address putting all patients that need seclusion into ED 5, which is the only room appropriate for that.
- •Our psychiatric care processes are being evaluated to get aligned with Inland NW Behavioral Health Hospital in Spokane.

#### 5. Shift change transfers

•Concerns were voiced from the emergency department, inpatient MSU and ICU, and PACU about patient care delays. A task force reviewed the change of shift transfer policy and updated it to foster an interdepartmental transfer policy that works consistently around the clock.

#### 6. Outpatient identification

•A task force was created after several staff members identified concern around practices in the outpatient imaging, respiratory care, and lab and how we use the two patient identifiers. This task force identified the only area that needed to change current practice were imaging patients receiving medications. Imaging changed their practice to come into compliance.



# **Partnership** for Patients

Pullman Regional Hospital joined Partnership for Patients, a nation-wide collaborative effort to reduce the number of hospital-acquired conditions by 40% and hospital readmissions by 20%. By joining this initiative, hospitals and health care providers across the nation are pledging to make health care safer, more reliable and less costly – ultimately saving thousands of lives and millions of dollars. The Key displays the areas that we are reporting to the State on performance measures and tracking for Pullman Regional Hospital. This reporting helps to drive the quality metrics we gather and focus on for areas of process improvements an potential system changes.

Monthly, we are submitting information to WA State regarding our performance on the key strategies as listed below. As areas are identified that we are not meeting the indicators or falling below national standards these areas are reviewed further for processes or educational opportunities. This will continue

Medication Safety: Antimicrobial Stewardship Adverse Drug Events Venous Thromboembolism

Catheter Associated Urinary Tract Infections (CAUTI)

C-difficile Infections

Central Line-associated Blood Stream Infections (CLABSI)

Injuries from Falls and Immobility

Safe Deliveries

Pressure Ulcers

Surgical Site Infections

Ventilator-associated Pneumonia

Preventable Readmissions

Patient and Family Engagement



#### **Commitment to Patient Safety**

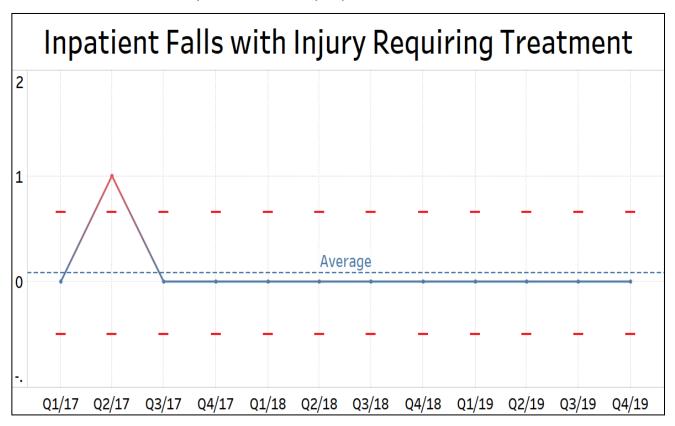
Pullman Regional Hospital is committed to creating and sustaining a work environment where patient safety is consistently a top priority. This environment demonstrates a commitment to designing policies and processes to prevent errors, providing appropriate numbers of qualified staff, encourage event reporting, learning from errors, and commitment to continuous improvement.

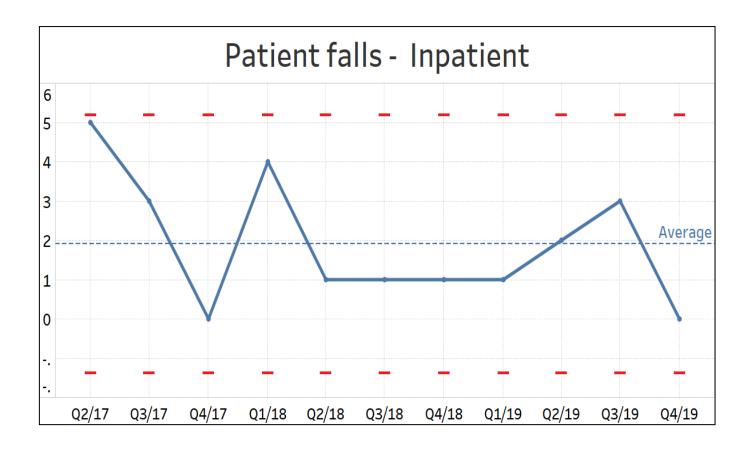
Falls with injuries remains one of the most reportable, serious and costly type of adverse events that occur in the United States (U.S.) hospitals. Per the CDC (Centers for Disease Control and Prevention) one out of five falls causes a serious injury such as broken bones or a head injury. These injuries can make it hard for a person to manage in their every day lives or do activities on their own.

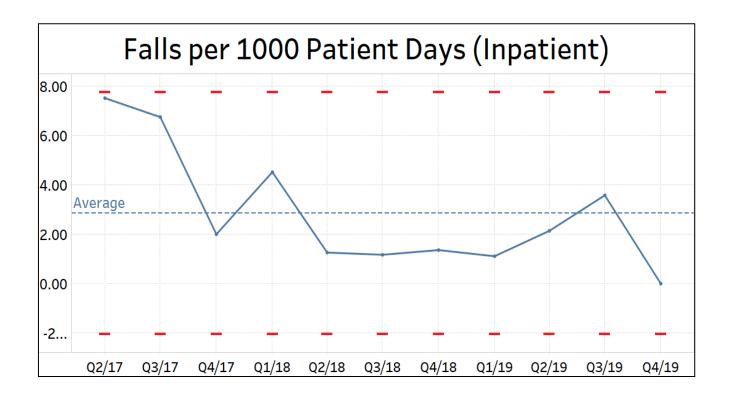
A reportable fall is defined as "any unplanned descent to the ground" even though a patient may have been assisted to gradually be placed on the ground by clinical or therapy staff.

We continue to take a very active position with fall risk assessments for any patient who is admitted to assess their risk for falling and develop individualized fall and injury prevention plans. These plans may include evaluations by the physical therapy team, bed alarms, room placement or specialized equipment. If a patient does experience a fall while in the hospital, there is a falls huddle discussion and reassessment of fall risk and any changes to the plan of care or interventions may be made.

We continue to have a low level of falls and have had no falls requiring treatment since 3rd qtr. 2017. This information is reported to Washington State Hospital Association as one of our quality metrics and shared with our Patient Safety Team and Quality Improvement Committee.

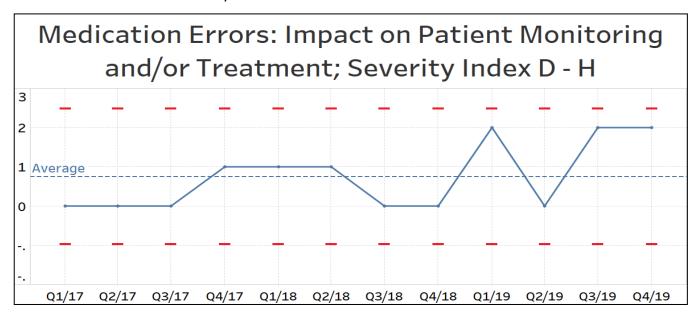




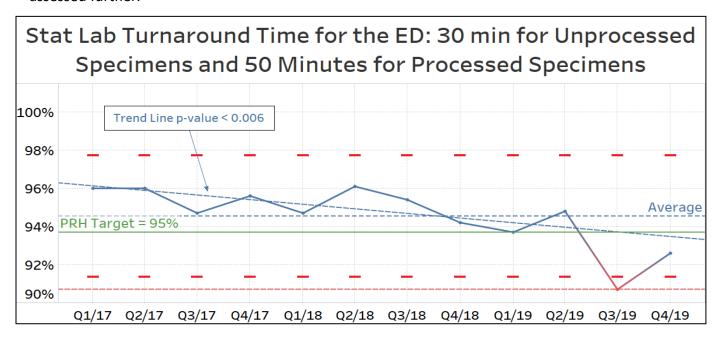


### **Patient Safety**

As part of our patient safety efforts, we focus review on medication safety and how it impacts our patients. Medication errors are reviewed for different levels of potential harm to the patient. For those that reach a higher level of harm that required additional monitoring of a patient or additional interventions a team completes a process review or root cause analysis of the event. This analysis helps to bring better understanding of any potential breaks in process, education or system errors. This review helps determine additional actions that may need to be taken.

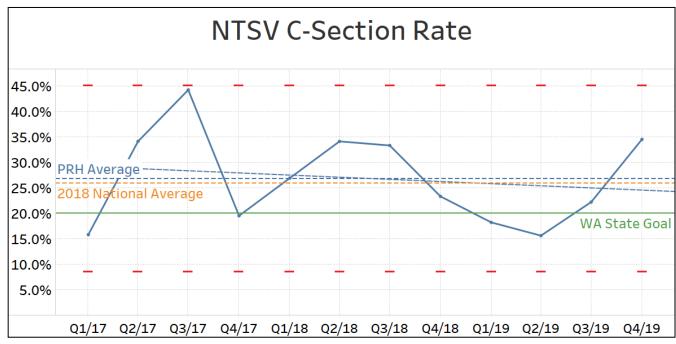


Stat lab turn around time for the Emergency Department is a metric that is shared with our patient safety team as a way to show how timely critical lab results are returned to the Providers in the Emergency Department. This metric is important as it includes those important lab tests that are needed for a potential heart attack victim or someone with stroke symptoms or signs of sepsis. The turn around time of labs is essential in helping determine the needed care our patients may require. Decreases in turn around times is evaluated for potential reasons or processes that may need to be assessed further.

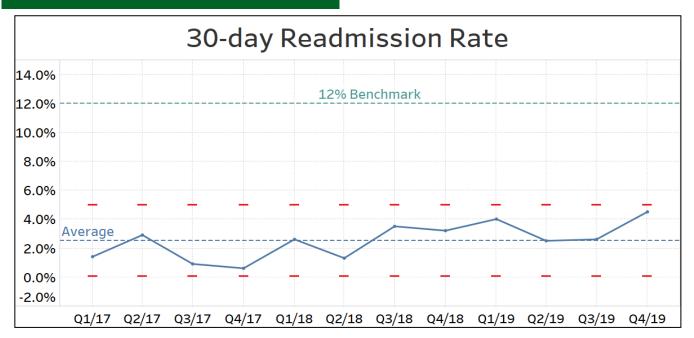


**Nulliparous Term Singleton Vertex (NTSV) C-Section Rate:** The NTSV C-section rate became an area of focus in 2016 and 2017 and continued to be a focus area in 2019 by the Quality Improvement Committee and OB/Peds Committee. Pullman Regional Hospital builds upon the successful effort to reduce early elective deliveries. We are working to improve maternal and infant outcomes by establishing and promoting evidence-based best practices for care as it relates to labor and delivery. In 2019 we saw some decline in our first time C-section rates in the first part of the year. We were not successful to consistently meet our internal target of 25% and the WA State goal of less than 20%. Data continues to be looked at closely and shared with the Physicians for ongoing awareness and involvement in the improvement process.

Pullman Regional Hospital is working collaboratively with the Washington State Hospital Association Safe Deliveries Roadmap initiative with the aim to improve maternal and infant outcomes by establishing and promoting best practices for care.

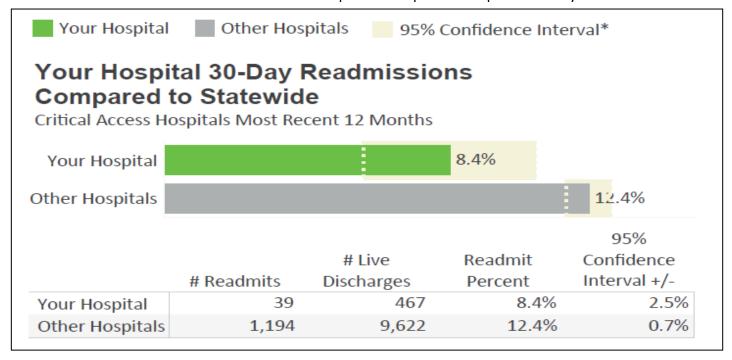






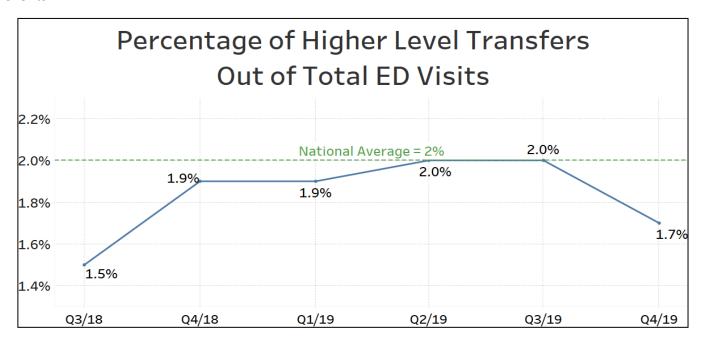
Hospital 30-day Readmissions are reported for "any cause" that requires a patient to be readmitted to any hospital within 30 days of discharge from our facility. Readmissions are reviewed and discussed at our Utilization Review meetings, along with Patient Safety and Quality Improvement Committees. Each readmission is reviewed for any potential related reasons as to why a patient may have needed to be readmitted. Readmissions are often related to multiple medications at time of discharge, low income/ social support needs, end-of-life care, unclear discharge communication with patient/family, or multiple chronic conditions the patient may have.

Pullman Regional Hospital continues to have a low readmission rate in the State of Washington that is evidenced by the graph below as compared with other critical access hospitals. We are one of five critical access hospitals in the state with the lowest rate of readmissions at 8.4%. We continue to have a commitment to reduce readmissions for our patients as part of our patient safety focus.

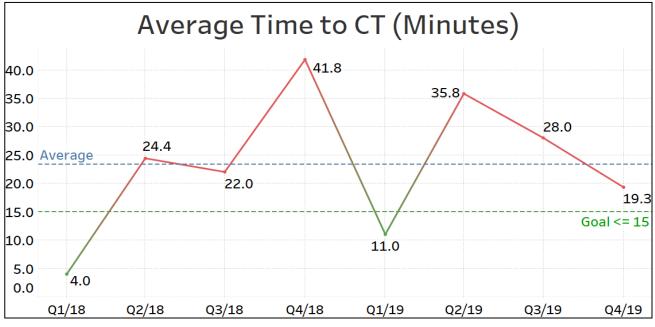


### **Patient Safety**

As a Critical Access Hospital we review all transfers that are sent out of our emergency department for a higher level of care. This review process helps determine that we are effectively managing those patients we are able to and transferring them if they need additional care. The optimal health and well-being of the patient is the principal goal of patient transfer. Many of the transfers that are sent out may be cardiac related where the patient requires cardiac catheterization lab and further treatment or trauma related events.



Average time to CT is an important measure as we continue to build on our stroke care and processes in the emergency department. This critical time is important in the care of a potential stroke patient who may present to the emergency department. The CT scan helps the physicians see and determine the potential type of stroke and options for care or if transfer to higher level of care for optimal stroke care and follow-up is needed. These metrics are essential for review and assisting us to look at our processes and how stroke care and treatment is provided in the emergency room setting.



### **Employee Health**

### 2019 Infection Prevention Employee Health Review

Employee Health strives to provide care and ensure the safety of all the employees and volunteers within the Pullman Regional Hospital and Clinic Network. In 2019, we welcomed Diane Whittick, RN into Employee Health just in time for the annual influenza campaign.

- Shotober kicked off with Dr. Pete Mikkelsen speaking at the September All Staff meeting with a focus on educating staff of the importance of obtaining an annual influenza vaccine.
- Leadership introduced an expectation of 100% participation with the campaign in 2019.
- 100% participation was achieved, with 92% of employees vaccinated, as well as 91% of our volunteers.
- Community support continues to be a focus, 143 family members of employees within the organization were also vaccinated.

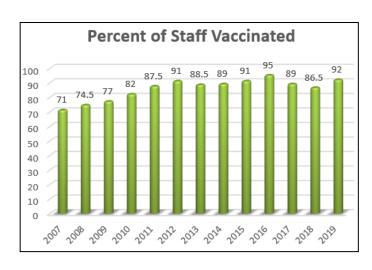
Thank you to Anna Engle, Kim Johnson, Shari Larsen, Andrea Howell, and Catherine Wilkins for helping make the 2109 flu campaign successful!

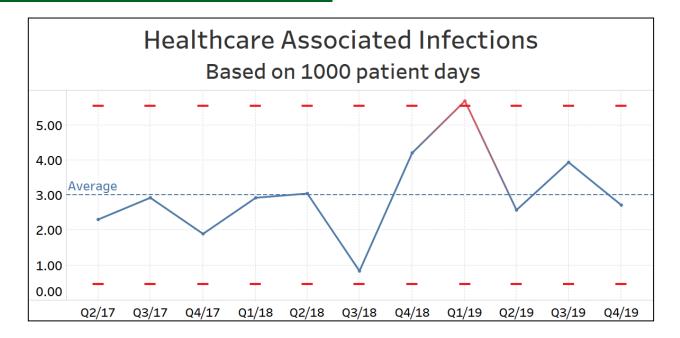
Pullman Regional and the Clinic Network welcomed 134 new employees, and an estimated 150 new volunteers in 2019.

- Employee Health drafted a new welcome letter outlining immunization requirements. In this letter education is provided on varicella, measles, mumps, rubella (German measles), hepatitis B, pertussis, and influenza vaccinations and why they are important to protect patients and themselves.
- New processes were implemented to maintain all employees, volunteers, contract personnel, and medical staff health and immunization records in a central location.
- Integrating the Clinic Network staff, ensuring they meet the same standards of the hospital is a goal. All employees have been asked to provide immunization records; Employee Health will continue to work with individuals to ensure they are protected.
- Employee Health and our Volunteer coordinator, Nikki Nolt have streamlined the process for new volunteers to provide immunization records and receive education during volunteer orientation.

Preventing employee and patient injuries it a top priority, our Safe Patient Handling Committee has new members and a new approach to foster communication between employee health and front-line staff.

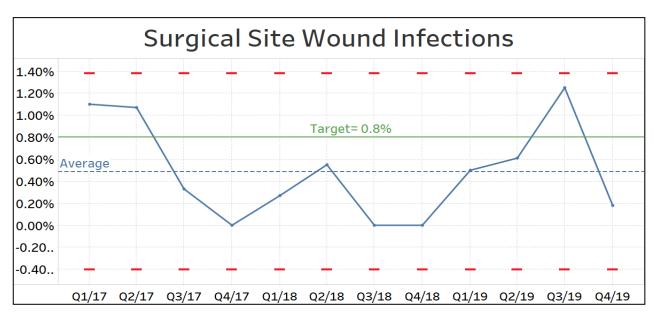
- In 2019, an inventory and maintenance assessment of all equipment available to move and lift patients safely was completed.
- In 2020, round table discussions will be held quarterly in the perspective departments. All staff members working that day are able to attend and have their concerns or needs heard.
- WSHA implemented a new employee injury/claim reporting system. The new system called Origami, allows employees to enter information and report things in real time, reducing time gaps to begin an injury claim.





In 2019 we continued to review and analyze our Hospital Acquired Infections (HAI) based on the number of infections per 1000 patient days. Our overall rate for 2019 was 3.68 infections per 1000 patient days. With each infection that occurs, the case is reviewed by our Infection Prevention nurse looking for any potential breaks in process, following of our policies and procedures, unusual circumstances that may have presented or occurred. Information regarding infections is shared at our PTIC (Pharmacy Therapeutics/Infection Control) meetings along with Patient Safety and Quality Improvement Committee meetings.

Surgical site infections are also reviewed and followed up in the same manner looking for any potential causes. Our surgical teams remain committed to providing safe care for patients undergoing operative and other invasive procedures by following evidence-based perioperative guidelines. These guidelines demonstrate an optimal level of patient care and workplace safety.





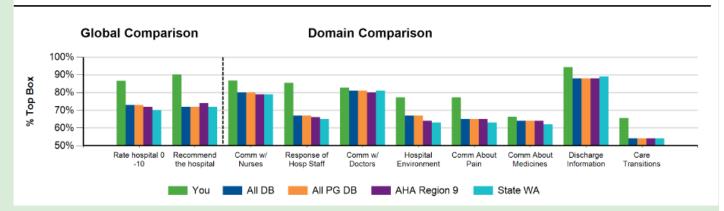
HCAHPS (the Hospital Consumer Assessment of Healthcare Providers and Systems) is a patient satisfaction survey required by CMS (the Centers for Medicare and Medicaid Services) for all hospitals in the United States. In the survey our patients provide us feedback on their experience within the hospital in the specific areas of: Communication with Nurses, Communication with Doctors, Responsiveness of Hospital Staff, Communication about Pain, Communication about Medicines, Discharge Information, Transitions of Care, Cleanliness and Quietness of Hospital Environment and Hospital Rating.

In 2019 our customer satisfaction continued to demonstrate that Pullman Regional Hospital continues to have high rankings as it relates to care for our patients as demonstrated by comparison of hospitals in Washing ton State and in the other comparison groups as shown below. This trend in satisfaction has continued on from past years and is one of the reasons Pullman Regional Hospital continues to be a 5-star hospital in customer satisfaction as rated by our patients.



INPT
HCAHPS Summary Report

Surveys Returned: January 2019 - December 2019



**Top Box Score**: Percentage of responses in the highest possible category for a question, section, or survey. The percentage of "Very Good" or "Always" responses

Domains and Questions  HCAHPS Summary Report for January 2019 – December 2019  Inpatient Units	Top Box Score	Percentile Rank: AHA Region 9 N=272 Hospitals	Percentile Rank: WA State N=52
Rate the Hospital on scale 0 - 10	86.9%	96th	98th
Recommend the Hospital	90.2%	98th	99th
Communication with Nurses	86.7%	97th	97th
Response of Hospital Staff – to call light and help toileting	85.5%	99th	99th
Communication with Doctors	82.7%	67th	61st
Hospital Environment – cleanliness and quietness	77.3%	97th	99th
Communication about Pain	77.2%	97th	99th
Communication about Medications	66.3%	68th	88th
Discharge Information	94.3%	96th	98th
Care Transitions	65.6%	94th	96th



Pullman Regional Hospital continues to have high percentile rankings in both Washington State and AHA Region 9 against other hospitals with our HCAHPS – Inpatient Scores. In the ten domains and question areas we rank 96<sup>th</sup>-99<sup>th</sup> in 8 out of the 10 domains in WA State. In the American Hospital Association benchmarking- we are in the 94<sup>th</sup> or higher ranking in 8 out of the 10 domains.

Positive interactions and satisfaction with our customers continues to be a focus area and demonstrates the commitment to our mission, vision, and values of Pullman Regional Hospital by our staff, volunteers and Providers.

These graphs show how Pullman Regional Hospital has continued to be a 5 Star Hospital related to Patient Satisfaction Nationally and with our Peers in relationship to Rating the Hospital on a scale of 1-10 and

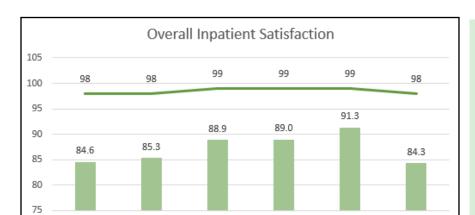
Recommending the Hospital. These Star ratings are taken from CMS—Hospital Compare.

# **Hospital Compare**

	Star rating for this measure	Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)
PULLMAN REGIONAL HOSPITAL	***	87%
Washington Average		71%
National Average		73%

	Star rating for this measure	Patients who reported YES, they would definitely recommend the hospital
PULLMAN REGIONAL HOSPITAL	****	91%
Washington Average		72%
National Average		72%

Pullman Regional Hospital contracts with Press Ganey to assess patient satisfaction. The program includes Inpatient Services of the MSU/ICU Department and Birthplace, with Outpatient Services of Same Day Services, Emergency Department, Respiratory Care, Imaging, and Summit Therapy Services. Data is regularly collected and results are shared with the department leaders in order to identify opportunities for improvement. In addition, leaders continue to explore "best practices" for their departments in customer services.



Q1 2019

n=81

Q2 2019

n=109

Q3 2019

n=115

Q4 2019

n=121

"I will be recommending Pullman Hospital to friends. The experience was exactly what you would hope for when going to hospital."

**Rating Percentage** 

Percentile

"Loved my stay - all staff were kind and listened to my concerns."

"My doctor is the best! I had an excellent stay."

"I had the absolute BEST birthing experience! The nurses, doctors & staff made everything comfortable, special & a time my family will forever appreciate!!"

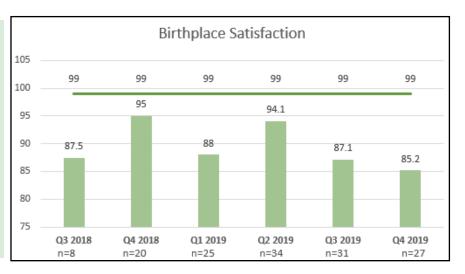
Q4 2018

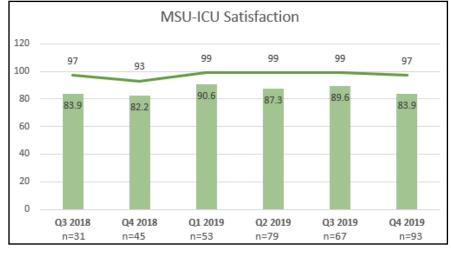
n=68

Q3 2018

n=39

"Will have all my babies there!
Wonderful experience and excellent care
even though having some weird
reactions to medication after C-section.
Can't have enough about nurses, doctors
& staff!"

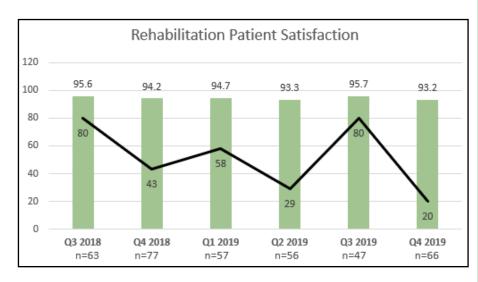




"I am a nurse who formerly worked at a large hospital in Seattle; my experience at Pullman Regional was excellent & I couldn't be more grateful to all the medical staff!"

"EVERYONE treated me very good, I had excellent doctors, nurses, & other helpers."

### **Community & Customer Satisfaction**



"Very pleased with my experience, staff is personable, helpful, and outstanding professionals."

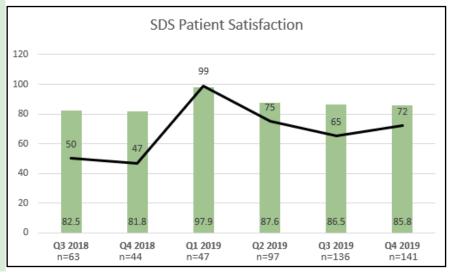
"Have been recommending your facility since my very first visit!!"

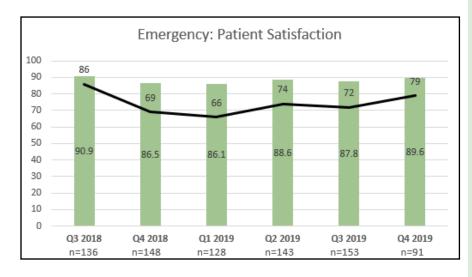
"Both staff members who treated me provided excellent treatments and exercises which have vastly improved my situation, were responsive to changes I experienced, and overall were a pleasure to work with. I can hardly express my full gratitude for the elimination of so much of the pain I'd experienced for months."

"PRH and all drs. & staff & nurses are top notch! Highly professional personable, efficient, communicative, caring! A++!"

"We have to travel a good distance to receive care at PRH and they are always willing to schedule to fit our needs. It is definitely our facility of choice."

"I felt that everyone at the facility truly cared about my well being and tried to make me feel comfortable and at easy. Thank you ALL for that!"

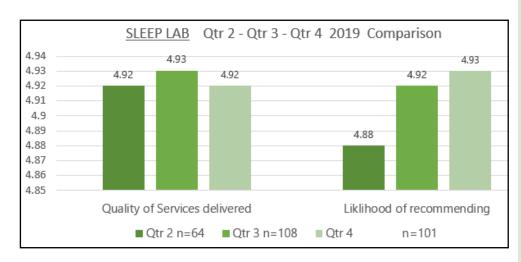




"Hands down best ER experience I've ever had. It was quick, efficient, and thorough."

"Everyone was very nice and really took the time to hear me and what I was saying to them. I felt taken care of."

"I am always grateful for the hospital staff and facilities we have in Pullman."



"Excellent! They explained everything so I could understand what was going on and answered my questions very knowledgeably!"

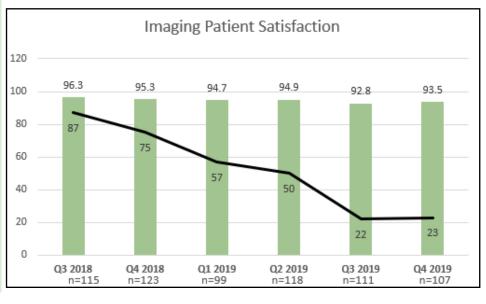
"Very positive experience. Great technician!"

"Fabulous technician! Really helpful and attentive. Very welcoming."

"Can't ask for better care or a better group of people to entrust my child's care with! Better than first class treatment! Thank you!!!"

"All employees were helpful and radiated care and/or happiness. I feel privileged to have such a great hospital in my home town."

"Pullman hospital is definitely above and beyond with their service. Thank you, I appreciate that."





"I drive from Moscow to Pullman for care because of the quality I receive. Thank you!"

"All of my experiences at Pullman Hospital have been 'excellent'. The staff is exceptional."

"Thank you for saving me many times this year.

Keep up the good work."

"Thanks again - I will drive up from Lewiston anytime for your service."

### **Community & Customer Satisfaction**



"I loved being able to order off of a menu for food.

Excellent food!"

"Room service options tasty and timely."

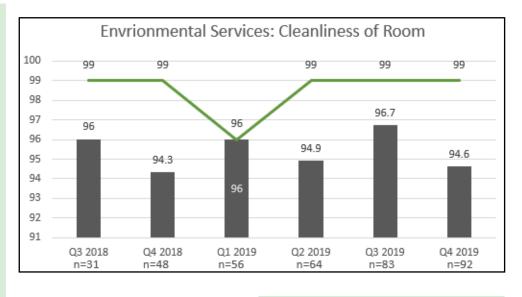
"The person that served my food, cut my meat up, open all other thing I needed."

"Room was clean and kept clean for entire stay."

"Felt comfortable with the tidy and clean room."

"Cleaning crew was polite and prompt."

"I was impressed with the modernity, cleanliness, and relaxed atmosphere of the hospital."





"I thought I was in a '5' star hotel."

"Loved my stay - all staff were kind and listened to my concerns."

"Hospital stays are not easy but everyone at Pullman Regional Hospital made it seem pleasant."

## **Community Engagement**

Pullman Regional Hospital is a "community leader of integrated health and healing activities." The hospital demonstrated this commitment through its community events and educational offerings.

Community Outreach and Education:

**Total Joint Preparation Class** 

NCOA's Aging and Mastery Program®

AMP® Elective Childbirth 101

Weekend Childbirth

Infant Massage

Alzheimer's Association Healthy Steps Together

Advanced Care Planning

Wellness for Life Program

**PRH Auxiliary** 

**PRH Volunteer Programs** 

Front Desk

Gift Shop

**Community Volunteers** 

**WSU Student Volunteers** 

Music & Memory

Sunnyside Elementary Career Day

**Hospital Tours** 

Qigong for Arthritis

**Qigong for Beginners** 

Tai Chi Beginners

Tai Chi Intermediate

Tai Chi Advanced
Prescription Pets

Chaplain Program

Women's Leadership Guild

Gentle Yoga for Volunteers taught by C. Murphy

**ELNEC Program** 

Relay for Life

GenerosityInspires Volunteers Knitting Baby Hats

**Palouse Pathways Program** 

**WSU Brain Fitness Intervention** 

National Go Red® Day

Neill Public Library Outreach

**Individual Staff Outreach** 

**INHS Telehealth Services** 

**Feeding Team** 

BookPeople® PRH Book Exchange Program

National Health Care Decision Day

Have a Heart Fund Raiser

Fall Caregivers Conference

WSU Coug Health Fair

Palouse 100 K Relay and Solo Run

Palouse 100 K Expo

Daily News Women's Expo

Schweitzer Engineering Laboratories Health &

Wellness Expo

Palouse Family Fun Fair

Lincoln Middle School Family Fair

International Pea and Lentil Festival

PRH/PRH Foundation Golf Tourney

**PRH Foundation Gala** 

Whitman County Humane Society Furball

**Breast Cancer Support Group** 

Lupus Fibro Myalgia Support Group

Good Samaritan Parkinson's Support Group

PRH Women's Parkinson's Support Group

Pullman Relay for Life

Meals on Wheels

INBC -Inland Northwest Blood Center

INHS Telemedicine/Telestroke

Family Promise

Palouse Alliance

**CLI Health Innovation Summit** 

CLI WSU Innovation partnership

#### **Community & Customer Satisfaction**

## **Community Engagement**

Community Outreach and Education (cont'd):

Whitman County Hospice

Poverty Awareness Task Force

PRH Admin/FDN Annual Holiday Gift Donation for

Pullman Child Welfare

**PRH Generosity Inspires** 

**ENLEC Training** 

**BLS** 

**ACLS** 

NRP

**AWHONN Fetal Hear Monitoring** 

Hand Hygiene Education

**De-Escalation Techniques Courses** 

**WWAMI Tutor Sessions** 

Whitman Co Local Emergency Preparedness

Committee

Physician Excellence

**Nurses Recognition Week** 

Volunteer Appreciation Luncheon

Palouse Discovery Science Center/CLI partnership

PRH Auto Dealers for Health

Art Walk at Pullman Regional Hospital

PRH Foundation Homes for Health

Mental Health First Aid



**Hospital Appreciation Week** 

**CRNA** Appreciation Week

Volunteer Appreciation Week

Flu Shot Campaign & PRH Family Flu Clinic

National Board of Advisors for Center for Learning &

Innovation

**Palouse Pathways** 

**Breast Feeding Education & support groups** 

Support groups: Breast Cancer, Fibromyalgia, Lupus

and Traumatic Brain Injury (TBI)

**Addicts Anonymous** 

Vitalent

**Second Opinion** 

#### **Student Programs:**

WWAMI Medical Student Preceptor Program

Interns in Pharmacy

Intercollegiate College of Nursing

LCSC & Walla Walla Community College

C.N.A., and

Radiology clinical education

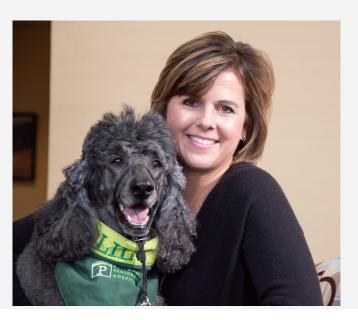
WSU Exercise Physiology

WSU Health Psychology

Post-Doc WSU Students in ED, Med-Surg, shadowing

physicians

WSU Engineering Senior Design Program



## **Community Engagement**

Our volunteers are an invaluable and welcomed complement to the care we provide and an indispensable part of Pullman Regional Hospital. The benefits of giving time to help others include a greater understanding of yourself, the development of life-long friends, and the joy of giving.

#### **Volunteer Program Overview**

Nearly 280 volunteers gave more than 18,460 hours which is equivalent to \$420,450 in value. Volunteer of the Year was awarded to Pat Caraher and the Auxilian of the Year was Janet Reid. The Auxiliary gave \$38,000 in grants for patient comfort to hospital departments. The Gift Garden, the Auxiliary's biggest money-maker, totaled \$142,584 in sales in 2019.

#### **Generosity Inspires**

The GenerosityInspires Committee made 15 awards totaling \$6,890.43 to employees in financial need in 2019.







## **Marketing & Community Relations**

Below is a summary and some highlights our efforts to engage with the community online, a key marketing strategy.

#### Website

Top 10 most-visited webpages of 2019

Homepage – 34,987 views

Careers – 22,316 views

Services - 15,346 views

Financial Services – 12,533 views

New Arrivals – 11,369 views

About Us - 7,638 views

Find a Provider - 7,441 views

BirthPlace - 5,915 views

Summit Therapy – 5,497 views

Health Portal – 4,625 views



#### **Top Performing Facebook Posts (2019)**

Official Hospital new TV commercial – 14.8K Reach, 103 engagements

National CRNA Week - 6.3K Reach, 148 engagements

Dr. and Sharon Hall Generosity – 6K Reach, 149 engagements

Nate Hames DAISY Award – 3K reach, 206 engagements

WSU Football Entitlement Game Dr. Tingstad recognition – 1.3K Reach, 122 engagements



## **Marketing & Community Relations**

#### **Podcast**

#### 2019 Highest Plays and Downloads

Sleep Apnea – 550

Sexual Assault – 444

Advance Care Planning - 438

Heart Health - 437

COOLIEF - 432

Nutrition - 404

Fall Prevention - 374

Next Era - 358

Pelvic Health - 341

Anterior Approach to Hip Replacement - 333



#### **Top Performing Emails (2019)**

NE: Bond Results – OR: 72.56%, CTR: 13.45%

O: COOLIEF - OR: 71.67%, CTR: 32.56%

NE: Evidence Based Care - OR: 69.92%, CTR: 2.15%

O: Hazelwood – OR: 69.74%, CTR: 7.84%

G: Bond Results - OR: 46.59%, CTR: 4.79%

G: Residency - OR: 44.67, CTR: 1.83%

G: Striving for Excellence #2 – OR: 43.29%, CTR: 7.98%

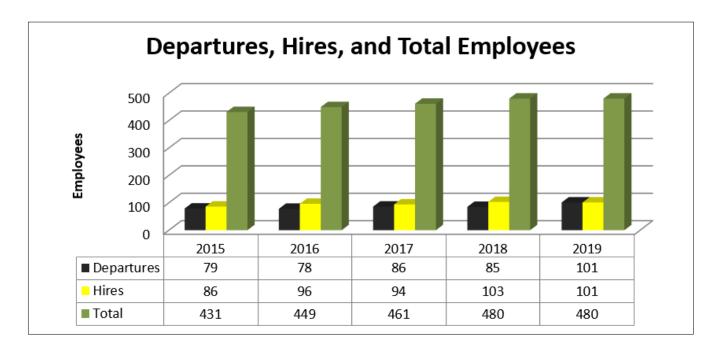
G: End of Year blog – OR: 43.16%, CTR: 5.63%



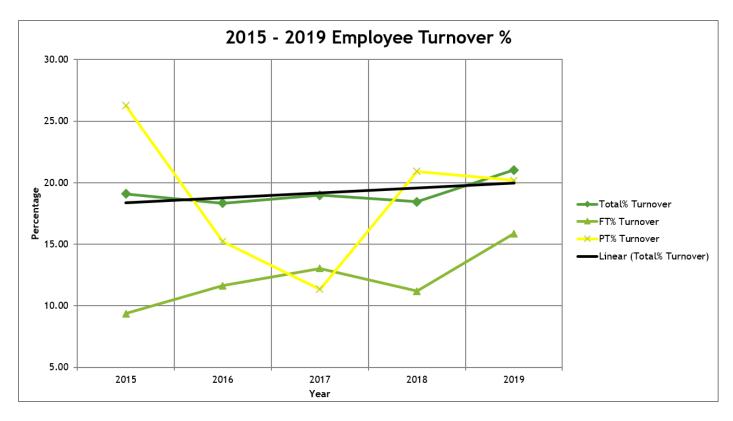


## **Employee Recruitment & Retention**

The past year was another busy year of employees joining and departing from Pullman Regional Hospital. During the year we had 101 folks join us and 101 folks who departed. At the end of 2019 we had 480 employees.

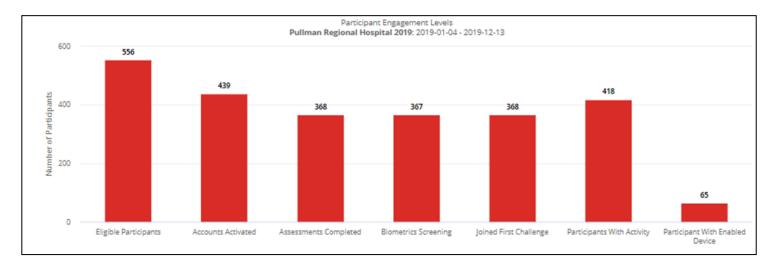


With the arrival and departures, the overall turnover rate for 2019 was at 21%. The Full Time turnover rate was 16%, and the Part Time turnover rate was 20%.



Wellness For Life measurable objectives for 2019 at the organizational level were the following:

JANUARY 1, 2019 GOALS	NOVEMBER 30, 2019 OUTCOMES
65% engagement in Well-Being Assessment	66% engagement in Well-Being Assessment
65% completion of Health Screening	66% completion of Health Screening
10% engagement in Human Performance Coach-	17% engagement in Human Performance Coach-
ing	ing
40% active in human performance activities and	47% active in human performance activities and
initiatives beyond Level 1/Learn requirements	initiatives beyond Level 1/Learn requirements



Verified cohort data from 2018-2019 highlighted that 39% of our Wellness For Life active population improved or sustained healthy metrics (i.e., blood pressure, lipids, A1c and/or BMI) that are important to prevent metabolic syndrome. This change is important as sustaining or improving health metrics requires progress through a series of stages (i.e., pre-contemplation, contemplation, preparation, action and maintenance) that can take months and can occur in a nonlinear fashion.

When it comes to the rest of our population, 40.8% had no significant change in health metrics and only 20.1% experienced an increase in their risk factors from 2018-2019. These participants might need additional intervention approaches to migrate from their current health status to a healthier version of themselves. Given this, Wellness For Life 2020 goal is to increase the usage of the Human Performance Coaching component of the program (20%) by Nov 30<sup>th</sup>. In this way, participants can receive the support they need as they move through the stages of change.

## **Specialty Certifications**

First Name	Certifications	First Name	Certifications	First Name	Certifications
Scott Adams	FACHE	Ginny Gosse	CCRN	Darin Porter	ARRT(CT)(RRA)
Jennifer Anderson	ARRT(M)(CT)	Anna Grindeland	CDR	Brian Poxleitner	ARRT(CT)
Kellsi Ausman	RNC	Charles Gunkle	RNC	Acacia Prather	RNC
Ginny Berg	CEN	Leah Haak	CDR	Julia Purko	ADRMS
Nicoline Blaker	RNC	Randy Hartig	CNOR	Linda Rauch	RNC
Bonnie Brown	RNC	Kelley Hayes	ARRT(CT)	Amy Richards	ARRT(CT)
Brenda Champoux	ARRT(M)	Debbie Heitstuman	CPHQ	Erin Richardson	CDM CFPP
Lisa Cordodor	CNOR	Rebekah Herdon	CCRN	Izzie Roepke	RNC
Tyson Cranston	ARRT(CT)(MR)	Jesse Holcomb	CNOR	Anna Rubalcava	CNOR
Steve Cromer	CNOR	Mark Houghton	CCRN	Lynn Sakamoto	CNOR/CRNFA
Sheri Cutler	CPHIMS/CPHRM	Kim Johnson	CEN	Roseann Sargent	ARRT(CT)
Eileen Davies	CCI	Jamie Johnson	ARDMS	Ben Schacher	CNOR
Frances Davies	NBCOT	Tom Johnson	ARRT(CT)(MR)	Eric Schacher	CNOR
Heather Dixon	AHIMA	Keri Jones	ASHA	Kai Shesiki	NATA
Nancy Downs	ARRT(CT)	Hannah Kasperick	CNOR	Helen Shores	ARRT (N)(M)(CT)/CNMT
Anna Engle	ANCC	Hannah Kimball	CHOP	Bill Siegwarth	ARRT(CT)
Renee Ewing	CEN	Laura Keogh	IBCLC	Stephanie Smick	CMSRN
Katie Eylar	CCP Health Coach	Lyle Lowder	ARRT/NMTCB	Dan Swan	ARRT(CT)
Samantha Faulkner	CCRN	Brigitte Lowe	ARRT(CT)	Megan Swanson	CCRN
Melissa Francik	CDR/WellCoach	Kim Lunsford	CNOR	Austin Swopes	ARRT(CT)
Lacey Frei	ARDMS	Joyce Marshall	CDR	Jennifer Thomas	RNC
Sandy Frisbey	AHIMA	Tawny Nichols	RNC	Natalie Walsborn	CAPA
Andi Gallagher	ARRT(M)(MR)	Carol Owings	RNC/IBCLC	Kaliub Whitman	RNC
Jami Gilkey	ARDMS	Justin Peters	ARRT(CT)	Catherine Wilkins	CPEN
				Betsy Wilson	ASHA
				Dianna Wise	RNC

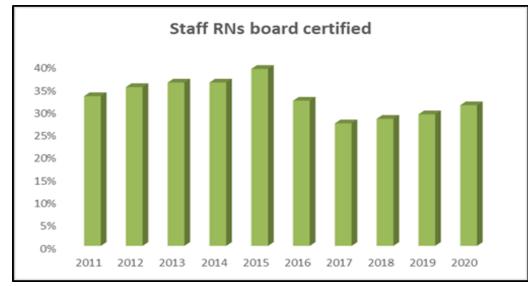
(M)	Mammography Registry in Imaging			
MNTCB	Nuclear Medicine Technology Certification Board			
(MR)	MRI Registry in Imaging			
NATA	National Athletic Trainer Association			
NBCOT	National Board for Certification of Occupational Therapy			
NMTCB	Nuclear Medicine Technology Certification Board			
PCCN	Progressive Care Nursing Certification			
PHR	Professional Human Resources			
PNBC	Pediatric Nurse Board Certified			
RNC	Registered Nurse Certified			
ServSafe Advanced Food Handling Certification				

CDR	Commission on Dietetic Registration
CNE	Certified Nurse Education
CNMT	Certified Nuclear Medicine Technologist
CNOR	Certified Nurse Operating Room
CPHIMS	Certified Professional Healthcare Information and Management Systems
CPHQ	Certified Professional Healthcare Quality
CPHRM	Certified Professional in Healthcare Risk Management
CRCST	Certified Registered Central Sterilizing Technician
(CT)	CT Registry in Imaging
FACHE	Fellow American College of Healthcare Executives
IBCLS	International Board Certified Lactation Consultant

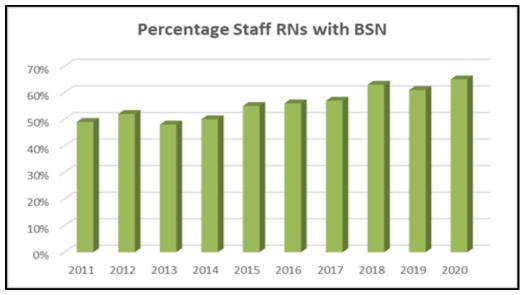
AHIMA	American Health Information
CHOP	Management Association Certified Healthcare Operations Professional
ARDMS	American Registry of Diagnostic Medical Sonography
ARRT	American Registry of Radiology Technologists
ASHA	American Speech and Hearing Association
CAPA	Certified Ambulatory Perianesthesia Nurse
CCRN	Certified Critical Care Registered Nurse
CDE	Certified Diabetes Educator
CDM, CFPP	Certified Dietary Manager, Certified Food Protection Professional
CEN	Certified Emergency Nurse
CMSRN	Certified Medical Surgical Registered

### **2019 Pullman Regional Hospital Medical Staff Certification**

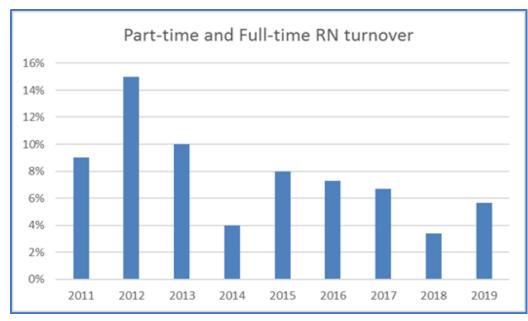
All medical staff members are required to be board-eligible or board certified in a specialty in order to obtain privileges at Pullman Regional Hospital.



One of the components of Pathway to Excellence is professional development of the nurse. Here at Pullman Regional Hospital the staff are encouraged to pursue their BSN or Board Certifications in areas of interest.



Nationally, the goal is to get hospital nursing staff to 80% BSN prepared nurses. PRH is at 64% and the national average is 51%.



RN turnover rate continues to remain below 6%. We have remained below 8% RN turnover for the last 5 years.

#### **Physician Excellence Award**

#### **Dr. Stephanie Fosback**



Employee of the Year Sarah Rial



Nurse Excellence Award
Mark Houghton



#### **Physician Excellence Award:**

Stephanie Fosback, M.D. received the Physician Excellence Award in 2019.

**Employee of the Year** was Sarah Rial in Care Coordination.

**Nurse Excellence Award** went to Mark Houghton, RN.

**Volunteer of the Year** was Pat Caraher, Volunteer Chaplain, for his comforting care with spiritual kindness and sincerity

Auxilian of the Year was Janet Reid, Gift Shop Volunteer, Have-a-Heart Volunteer and much more, for her generous donations of her time and talents throughout many auxiliary areas.



# A YEAR IN REVIEW – 2019 Numbers & Financials

#### **Statement of People & Programs**

Public Hospital District No. 1-A is a community consisting of:

Pullman Regional Hospital (wholly owned by PHD 1-A)

Pullman Regional Hospital Clinic Services, LLC (wholly owned by PHD 1-A)

Palouse Surgeons, LLC (jointly owned)

Palouse Specialty Physicians, P.S. (jointly owned)

#### We are a community of:

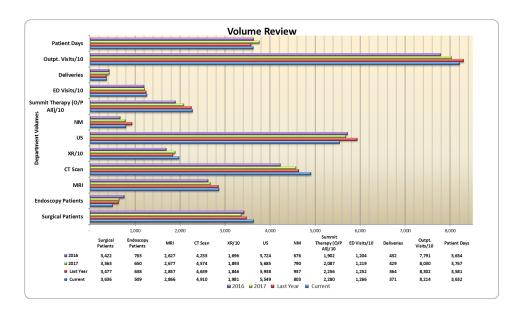
- 558 Full-time (357) and Part-time Employees (201)
- 155 Medical Staff (63 in active membership)

#### As a team we served:

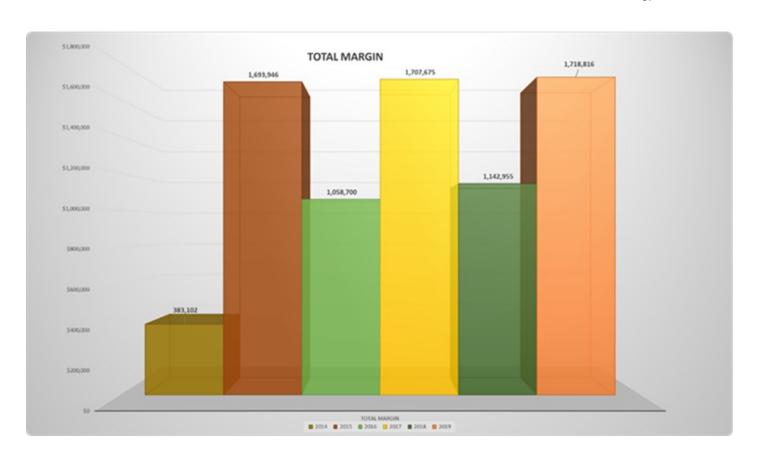
- 1,660 Men, Women, Children, & Newborns as inpatients
- 82,142 Individual outpatient visits
- 43,039 PRHCN Clinic visits

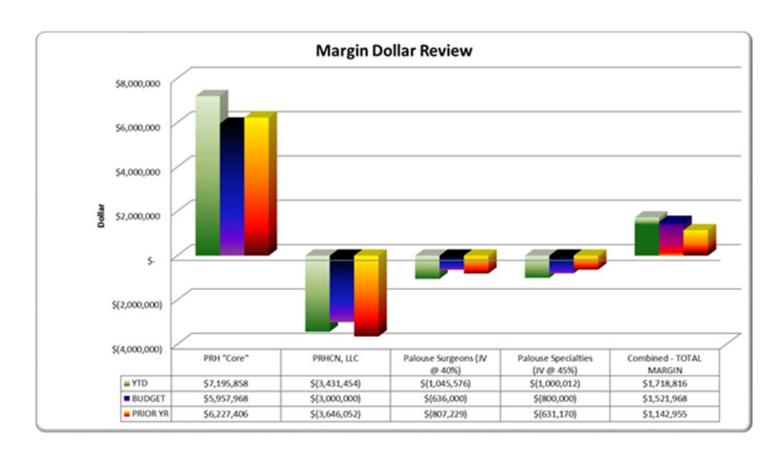
#### **That Totals:**

- 4,343 Patient Days (including newborns)
  - 371 Births at the hospital
- 1,016 Equivalent Observation Patient Days
- 24,380 Observation hours of care
- 12,662 Patients entered our Emergency Department
- 110,516 Laboratory tests were performed
- 33,935 Diagnostic Imaging studies completed
- 4,145 Surgical patients, 88% surgical vs. 12% endoscopy



## **Financial Effectiveness**





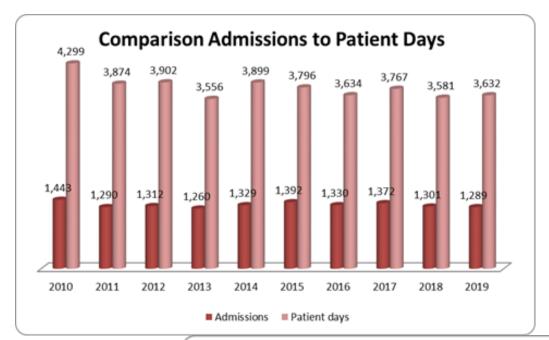
#### **Pullman Regional Hospital Vital Signs**

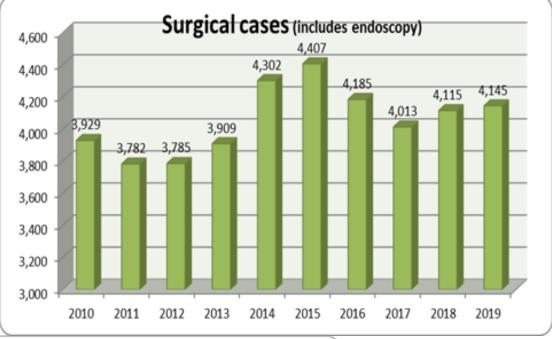
Pullman Regional Hospital	2015	2016	2017	2018	2019
Patient Days	3,796	3,634	3,767	3,581	3,632
Patient Admissions	1,392	1,330	1,372	1,301	1,289
Surgical Cases (including endoscopy)	4,407	4,185	4,013	4,115	4,145
Births	448	432	429	364	371
Observation Hours of Care	13,832	17,286	16,250	19,832	24,380
Diagnostic Imaging	30,357	30,220	32,652	32,835	33,935
Emergency Visits	11,818	12,038	12,188	12,523	12,662
Laboratory Tests	93,924	96,636	99,570	108,264	110,516
FTEs	328	350	362	378	388
Total Beds	25	25	25	25	25

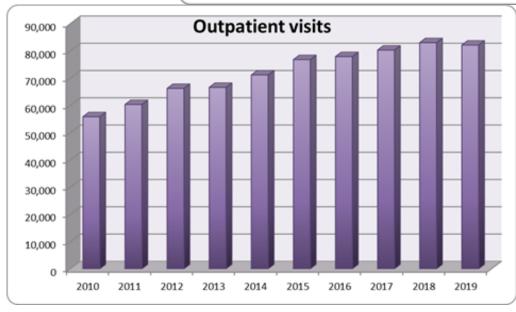
The Hospital saw patient day activity increase 1.4% when compared to last year. Patient days were 3,632 compared to 3,934 budgeted and 3,581 for the previous year. At the same time, observation day equivalents climbed 14.6%.

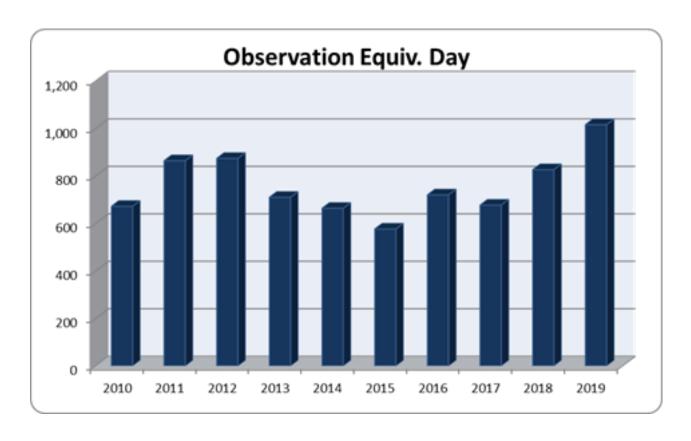
	YTD	BUDGET	Variance	% Variance	PRIOR YEAR	Variance %	Variance
Admissions	1,289	1,436	(147)	<b>-10.2%</b>	1,301	(12)	-0.9%
LOS	2.8	2.7	0.08	<b>2.9%</b>	2.8	0.07	2.4%
Patient Days	3,632	3,934	(302)	<b>-7.7%</b>	3,581	51 🕏	1.4%
Observation Admits	853	743	110	<b>14.8%</b>	731	122	16.7%
Adjusted Patient Days	14,973	14,719	254	<b>→</b> 1.7%	14,159	814	5.7%
Average Daily Census	10.0	10.8	(0.83)	<b>-7.7%</b>	9.8	0.14 🕏	1.4%
Deliveries	371	400	(29)	<b>-7.2</b> %	365	6.00 🕏	1.6%
Summit Therapy/10	2,280	2,400	(120)	<b>-5.0%</b>	2,256	24 🕏	1.1%
ED Visits	12,662	12,500	162	<b>→</b> 1.3%	12,523	139 ⋺	1.1%
Radiology Procedures	33,935	33,255	680	<b>→</b> 2.0%	32,835	1,100	3.4%
Lab Tests	110,516	105,000	5,516	<b>•</b> 5.3%	108,264	2,252 ⋺	2.1%

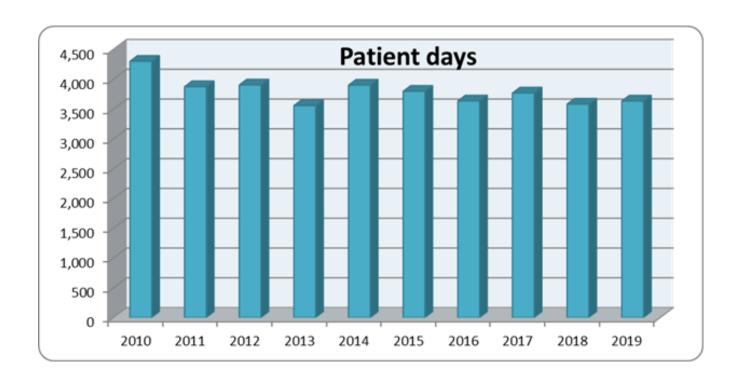
### **Financial Effectiveness**









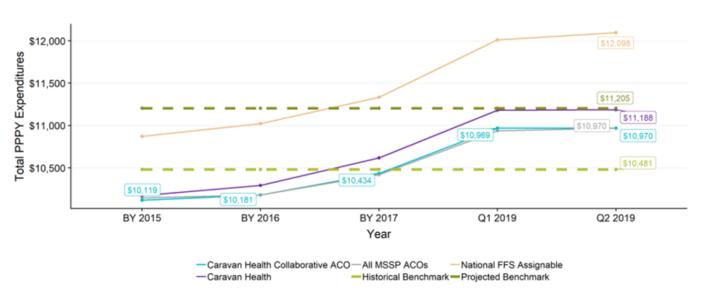


## **Accountable Care Organization (ACO)**

Pullman Regional Hospital, in collaboration with Palouse Medical and Pullman Family Medicine, continue our effort as part of an Accountable Care Organizations (ACOs). There was a transition to the Caravan Health Collaborative ACO. This increased our ACO size from 8 to 132 participants, serving 224,000 attributed patients and 450,000 total Medicare patients across the entire ACO. The Medicare Shared Savings Program is changing and all ACOs will soon be part of the new Pathways to Success program. Current MSSP participants have a lot to consider in the next couple months – they will have to leave their current track within the next 18 months and either move into the new Pathways to Success program or exit altogether. Caravan Health believes the benefits of Pathways are clear, but there are many variables to consider as you make your decision for 2020. Under Pathways, ACOs have no downside risk in the first performance year and can choose how quickly to take on downside risk afterwards. The Basic and Enhanced tracks of the new program replace the old Tracks 1, 1+, 2, and 3, and will have five-year, rather than three-year, agreement periods. The benchmark calculation for Pathways also takes regional factors into account in the very first agreement period. The program includes a new methodology for factoring in risk scores that allows for 3 percent growth over the length of the agreement period. Additionally, Pathways' upside-only years have a shared savings rate of 40 percent, rather than 50 percent in the current program. With these factors in mind, if you join Pathways in January 2020 your estimated benchmark could vary significantly.

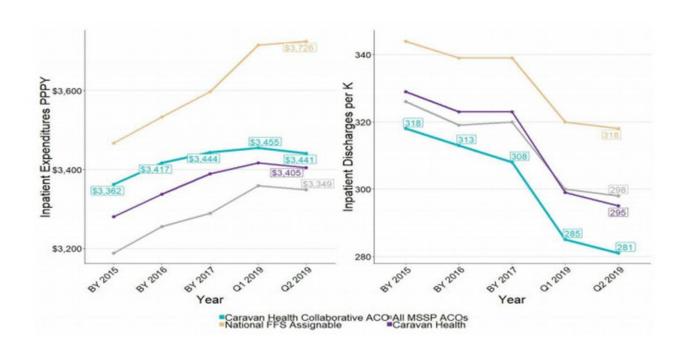
As a member, the Pullman group continues to score very well on the total expenditure per assigned beneficiary landing well below the national average.

## Total Expenditures per Assigned Beneficiary per Year

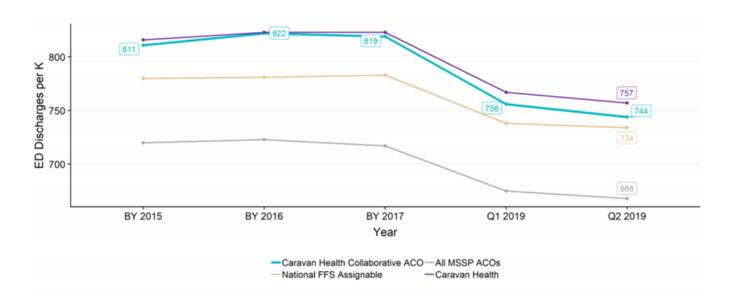


Unadjusted PPPY expenditures remained stable from Q1 2019 to Q2 2019

## Inpatient Expenditures and Utilization



## ED Discharges per 1,000 Beneficiaries



#### **Clinic Network**

Pullman Regional Hospital Clinic Network is wholly owned by Whitman County Public Hospital District No. 1A. Consisting of 6 clinics under the leadership of Executive Director Karly Port, the Pullman Regional Hospital Clinic Network strives to enhance lives and preserve health by enabling access to a comprehensive, fully-integrated network of providers delivering high quality, affordable care with kindness, integrity, and respect.













#### **Pullman Family Medicine**

Pullman Family Medicine provides a range of services including Pediatrics, Obstetrics, Preventative Care, Procedures, Diabetic Education, and on-site Lab services.

Our staff is dedicated to high quality, affordable, evidence -based healthcare and understand what it means to have a family doctor.

#### **Palouse Heart Center**

At the Palouse Heart Center, our mission is to ensure you have easy access to expert health care-and to increase understanding of that care which exists right here, close to home. Our dedication to learning and innovation is meant to improve care, lower costs and foster your better health.













#### **Palouse Pediatrics**

At Palouse Pediatrics we are dedicated to providing the highest quality pediatric care by: facilitating normal physical, emotional, and spiritual wellness of children in the community, being available for parents in order to provide continuity of care in a family environment, maintaining cost effectiveness as a high priority, partnering with our patients' families, sharing responsibility for their health care and promoting a work atmosphere that encourages collaboration within Palouse Pediatrics and throughout the community.



#### **Palouse Health Center**

Palouse Health Center provides a range of services including Sports & DOT Physicals, Wellness Exams for children and adults, Medicare Physicals, Diabetes Management, CPOD, Heart Disease and more.

We are dedicated to providing accessible, high quality healthcare, to inspire our patients to thrive through healthy lifestyles, and to enhance the well-being of our community.







#### **Palouse Pulmonology & Sleep Medicine**

We perform specialized services, such as Pulmonary Function Testing to measure your degree of fitness and aid in the assessment of shortness of breath; specific diagnostic asthma testing; and testing to determine the need for supplemental oxygen for everyday living or air travel. In addition, our lab specialists offer testing for disability evaluations..

#### Palouse Psychiatry & Behavioral Health

Palouse Psychiatry & Behavioral Health is a strong and vital partner in the provision of mental health services with a focus on psychiatric evaluation and treatment for adults living in Whitman County and the Palouse region.

We are dedicated to the treatment of psychiatric conditions safely, professionally, and confidentially in an atmosphere of mutual respect.



## **Palouse Specialty Physicians**

In a first-of-its kind collaboration, Pullman Regional Hospital, Gritman Medical Center and Whitman Medical Center are joining forces to bring you high-quality specialized care to the Palouse in a network called Palouse Specialty Physicians. This is an ongoing result of an ambitious vision for a community of hospitals and patients that are healthier together.

#### **Palouse ENT and Audiology**

Our Ear, Nose & Throat & Audiology department handles a range of conditions affecting patients from the tops of their heads to the bottom of their necks. From headaches, severe allergies and chronic sinusitis, to specific cancers, hearing loss and vertigo – the ENT and audiology team are here to help. Click Here to learn more about our ENT & Audiology services.





## Cancer Care Northwest Palouse Oncology and Hematology

Full-time Oncology and Hematology services are now available on the Palouse thanks to a regional partnership between Palouse Specialty Physicians and Cancer Care Northwest.

#### **Palouse Urology**

Palouse Urology takes care of all aspects of both the male and female urinary system, including the bladder, kidneys, adrenal glands and urethra.





## **Palouse Specialty Physicians**





#### **Palouse Neurology**

Our new full-service Neurology clinic is staffed by Dr. Sarita Said-Said and offers specialized diagnostics and treatment for a full range of neurological conditions including ALS, Spinal Muscular Atrophy, Epilepsy, Parkinson's Disease, MS, Stroke, and more.

#### **Palouse Surgeons**

Palouse Surgeons is a surgical practice with an evidence-based, outcome-driven approach focused on providing easy access to high-quality care in The Palouse community.





#### **Palouse Aesthetics**

Palouse Aesthetics is dedicated to making the latest technologies and most-innovative techniques available to the region. From revolutionary anti-aging treatments to next-level hair removal, we provide you with the confidence you need for a healthy well-being.

#### **LCSC Clinical Faculty Agreement**

In 2016, Pullman Regional Hospital developed a partnership with Lewis and Clark State College (LCSC) which allowed a Pullman Regional Hospital RN serve as a clinical faculty member for nursing students doing a clinical rotation at Pullman Regional Hospital. This partnership was initiated to address several concerns:

- LCSC was having difficulties recruiting faculty
- Pullman Regional had experienced some concerns with faculty that weren't familiar with the hospital policies, practices, and people.
- Pullman Regional Hospital had several RNs that were interested in teaching in a nursing program. In 2019 Pullman Regional Hospital used this agreement for nursing students three twelve hour shifts per week for both spring and winter semesters. Four hospital RNs have participated in the clinical faculty position, while they have maintained their clinical position at the hospital. The nurses' that worked in this capacity in 2019 came from Clinical Informatics, BirthPlace, and Medical-Surgical unit. Twelve hours of their regular profiled hours each week are dedicated to the faculty position, during the school year. They are paid at their regular rate of pay and LCSC reimburses the hospital an agreed upon flat fee for these hours. The flat fee is less than any of these RNs are paid and to make up for that difference, LCSC provides Pullman Regional Hospital 2 free credit vouchers for each faculty each semester. The hospital then provides these tuition vouchers to employees that are attending LCSC.

These credit vouchers may be applied to any LCSC credits with priority given in the following order; RN's attending LCSC for their B.S.N., Employees attending LCSC as entry into the Nursing Program, Employees attending LCSC into any additional Baccalaureate Educational Program, or Employees attending LCSC for a C.N. A. program

The benefits of this partnership have been tremendous, including:

- Improved student clinical experience
- Improved hospital staff satisfaction
- Improved patient safety
- New development opportunities for hospital RNs to participate in the education of nursing students

In 2019, eight employees were awarded free tuition credits to attend LCSC. Twelve free credits were awarded, which is the equivalent of \$3756.00 that Pullman Regional Hospital didn't pay in tuition reimbursement. The excess of what the hospital pays the nurses versus what LCSC pays via the contract and the tuition credits varies based on what the hourly wage of the nurse is. In 2019, the hospital paid an additional \$10,000.00 for the two semesters. Because of the benefits identified above, we feel this additional cost is well worth it!



## **Clinical Informatics**

**New EMR Search** – Efforts to find a replacement for our current EMR (Electronic Medical Record) system continued through the first quarter of 2019. With Meditech and EPIC in the final running, the decision was made by the search committee to move forward with implementation of EPIC in the hospital and clinic network settings. Replacement of our current EMR system was one of four primary efforts included in the Next Era of Excellence initiative proposed to the community through a tax bond vote in April and November. Since the bond did not pass, the Board of Commissioners will continue discussions about 'next steps' to meet the needs of the hospital and needs of the community.

Electronic Prescribing Controlled Substances (EPCS)—Beginning in January 2021, providers who care for Medicare patients will be asked to electronically prescribe all prescriptions including controlled substances. The Institute of Medicine's report on the role of e-prescribing in reducing medication errors received widespread publicity, helping to build awareness of e-prescribing's role in enhancing patient safety. Opioid addiction, drug diversion and overdose deaths are among the primary forces driving the push toward EPCS. Efforts continue to enroll and support all hospitalists, emergency physicians and any other prescribing providers in using our electronic prescription system for all medications, including controlled substances. The

Centers for Medicare and Medicaid Services (CMS) made e-prescribing a required objective which is measured and reported each year. Meeting these federal requirements allows Pullman Regional Hospital to maintain certified status in the national healthcare incentive program.

#### Prescription Drug Monitoring Program (PDMP) --

Pullman Regional Hospital began collaboration with Meditech and DrFirst to integrate a PDMP report into the e-prescribing functions of our electronic medical records (EMR) system. PDMPs are state-run databases



that collect patient-specific prescription history to inform a provider's clinical decision making at the point of care. Currently our emergency department providers can view a patient's PDMP report by logging into a website or, for a select group of patients, the report is found within an Emergency Department Information Exchange (EDIE) printout. The integration of PDMP within our EMR prescribing screen will automatically provide the necessary information about any patient for whom a controlled prescription is being entered.

**MBQIP** - Pullman Regional Hospital continues to participate in the Medicare Beneficiary Quality Improvement Project (MBQIP). The goal of MBQIP is to improve the quality of care provided in critical access hospitals (CAHs) by increasing quality data reporting and then driving quality improvement activities based on the data. Clinical Informatics continues to collect and report CMS inpatient and outpatient quality measures on a quarterly basis. We work in collaboration with the Quality Department to analyze data and graphs which compare CAHs in our state.

## **Information Technology**

Pullman Regional Hospital's Information Technology Department continues to advance the security of our electronic systems with hardware and software upgrades. In 2019 it brought many advancements including:

#### **Workstation and Server OS Upgrades:**

We completed updating all of the computer and server OS'es due to Windows 7 and Server 2008 going end of life in Jan of 2020. This was a huge undertaking as it required a lot of the applications we support to be built out on new servers and then data migrated.

#### **Phone System Upgrade:**

Started upgrading the organization-wide phone system. PFM and the Pullman Peds office will be added to the same system that the rest of the organization uses.

#### Pulmonology Office:

Built out Somnoware/Somnostar/Remlogic for the Pulmonology office. This project took a lot more time than it of needed due to the fact that the 3 different vendors do not work well together, unless using older software. We really wanted to use the newer version of their software so that we could put it on a newer OS, therefore, making it less vulnerable to malicious attack.

#### **Docuware Upgrade:**

Docuware was completely upgraded over the summer to its latest version. Docuware is our document management system and as you can imagine, this was a large undertaking with lots of data to move.

#### **Application Firewall:**

A meaningful use requirement was put on our Centricity farm to open it up to any potential applications that would want to be built so that it can share data. This required us to build an application firewall to protect this connection back to the EMR.



Pullman Regional Hospital was again named as one of the 25 most wired rural hospitals nationally by *Hospital and Health Networks*. Based upon a benchmarking study, hospitals report how they use information technology to address five key areas: safety and quality, customer service, business processes, workforce, and public health and safety. Awards are given to hospitals achieving the highest scores in these areas. This was the twelfth time Pullman Regional Hospital has received this award (2007-2019).

## **Center for Learning & Innovation**

#### **Center for Learning and Innovation**

The Center for Learning & Innovation (CLI) continues to stimulate employees to think creatively and build strong partnerships in the community. In 2019, the CLI assisted in faculty research, expanded collaborations, finalized the patent for the maternity gown, and continued to improve and market the Speech Sounds Visualized App.

The Center for Learning and Innovation continues to partner with faculty on research and student-centered projects. In 2019, we continued to work with Washington State University's Mechanical and Materials Engineering graduate students to fine-tune and improve the design for the wearable arm sleeve simulator and chest tube simulator program We continue to look for opportunities to collaborate with WSU faculty and ways to improve the patient experience.

Pullman Regional Hospital was awarded its first patent in 2019 for the maternity gown design created by now retired BirthPlace nurse, Laurie Heimbigner. The application process began in 2016. The maternity gown project is now moving into the testing and customer discovery phase.

Through expanding education outreach and building new collaborations with area businesses, the Center for Learning & Innovation is having an impact on our community. In 2019, the Center for Learning & Innovation expanded its partnership with the Palouse Discovery Science Center to provide education and inspire youth through an interactive exhibit. In addition, outreach efforts were expanded by offering community education classes such as the Women's Wellness Wednesday and the Men's Biscuit and Gravy Breakfast.

Speech Sounds Visualized, an app developed in partnership with Keri Jones, Pullman Regional Hospital Speech Language Pathologist, uses moving x-rays along with auditory and written instruction to assist people with English pronunciation. The team made significant upgrades to the app in 2019 including changing to a subscription model. More than 300 subscriptions have been sold last year. The development team continues to identify improvements to the app based on consumer discovery and user feedback.

2019 brought many changes and progress for the Center for Learning & Innovation. We continue to grow and look for new ways of improving healthcare and promote health education in our community.





## **Care Coordination**

#### **Department of Care Coordination**

- -Medical Social Work Palliative Care Social Services at Circles of Caring Social Work Extender Interns
- -Utilization Management Transitional Care Nursing/Chronic Care Management Advanced Care Planning
- -Integrated Behavioral Health at Pullman Family Medicine Integrated Behavioral Health for Feeding Team and Dyslexia Clinic Health Coaching

Every existing program that the Care Coordination Department is active in continues to grow and thrive! This year we are highlighting a few new projects that we are excited about and proud to be a part of.

In 2019 we applied for a Health Resources and Services Administration (HRSA) grant to implement a Health Coaching program, this will include providing health coaching to our patients as well as training for staff in the hospital and clinic settings. We have hired an RN and MSW as the Health Coaches/trainers, and believe this interdisciplinary team will prove to be very dynamic.

Employees in every department will be offered training in the basics of health coaching and motivational interviewing as a way to improve health outcomes for our patients and increase patient centered care. The Care Coordination department embraces the concept that everyone who interacts with our patients has an opportunity to make them feel empowered in their wellness journey and we see this as an opportunity to promote that belief throughout Pullman Regional Hospital and Clinic Network.

In our work with Birth Place we have identified a need for more support of women experiencing postpartum mental health issues. After reviewing the resources in our area, we realized there is only one mental health professional certified in perinatal mental health, so we have two Clinical Social Workers working on Perinatal Mental Health Certification. In 2019 they completed 16 hours of training to get their certification in Maternal Mental Health. In 2020 they will attend an in-person psychotherapy focused training program and then test to be considered Perinatal Mental Health – Certified professionals. We are excited about the opportunities this opens up for us to serve women and children in our communities and look forward to building partnerships with the physicians providing care to them.

Our Advanced Care Planning Coordinator organized a community wide workshop series called "Sacred Art of Living and Dying" put on by the Sacred Art of Living Center. This is a 4-part series 1) Understanding Spiritual Pain 2) Diagnosing Spiritual Pain 3) Healing Spiritual Pain and 4) Transforming Spiritual Pain.

Thirty-nine participants attended the first session in December, the next three will happen during 2020. We were able to pay for this training through Practice Transformation funding in support of Palliative Care. This is another example of how we emphasize team based care and bring the various programs together to expand knowledge not just for our staff but our community partners as well.



### **Care Coordination**

#### **Palliative Care**

The hospital began providing inpatient palliative care services in June of 2018 as a result of a collaborative effort lead by the Washington State Department of Health called the Washington Rural Palliative Care Initiative (WRPCI) and support and approval from PRH's community Transitional Care team. Participating in these efforts, provided the Palliative Care team with access to Telehealth Case Consultation Sessions and resources such as the palliative care screening tool, Edmonton Symptom Assessment Scale, and advanced communication techniques with Vital Talk training. PRH formed a Core Consultation Team composed of a Physician Assistant, 2 Registered Nurses, Social Worker, and Pharmacist. This team continues to grow

through monthly case consultation session, frequent education sessions, and by additional education and training opportunities with CAPC (Center to Advance Palliative Care) and formal Palliative Care Certification that the PA-C gained following completion of the University of Washington program.

Throughout 2019, the interdisciplinary core consult team provided services to more than 40 patients. Palliative Care is specialized care for people with chronic or serious illness and is appropriate at any stage of serious illness. It is focused on providing relief from the symptoms and stress of a serious illness and can be provided along with curative treatments with the goal to improve quality of life for both the patient and the family as well as, facilitate patient autonomy, access to



information, and choice. These services help patients and families understand the nature of their illness, and make timely, informed decisions about care.

Patients are screened using the tool the team helped develop in collaboration with the Rural Palliative Care Initiative to determine if they meet the need for palliative services. More than 200 patients were screened during the year with approximately 79% meeting palliative care criteria. A goals of care conversation that often includes advanced care planning with recommendations to address specific identified goals was offered to a number of these patients, based on team capacity, followed by an opportunity to enroll in ongoing services. Goals of care conversations are conducted in a manner to try and assess the whole person (physical, emotional, spiritual, mental, social). Palliative Care services include goals of care conversations, symptom assessments, advanced care planning, social services, medication, collaborative care meetings (patient, family, providers/specialists involved), referrals to beneficial services, access to contact line, and ongoing follow-up calls after discharge. These services have resulted in decreased emergency department visits and inpatient admissions; allowed patients to remain at home or in the least restrictive setting; provided wrap-around support; and, gave voice to patient/family wishes and added quality of life.

## **Whitman County Health Network**

#### **Whitman County Health Network**

During 2019 the Whitman County Health Network again focused on issues and activities related to the overall vision of the Network as stated below.

The Whitman County Health Network will represent the united voice of Whitman county constituencies in the development, coordination, and delivery of health and human services. We envision that this united effort will:

Improve family and individual health and well-being Improve access to health and human services

Reduce costs of current delivery processes and redirect savings toward targeted, strategic early intervention.

Specific efforts carried out in 2019 include

County wide community assessment

Continued practice transformation efforts with support from the Greater Columbia Accountable Communities of Health (GCACH)

Local health improvement network efforts focused on countywide Strengthening Families Program Conducted quarterly community-wide meetings including one

general membership meeting



#### **Practice Transformation**

Pullman Regional Hospital and Pullman Family Medicine collaborated together over 2019 in the Greater Columbia Accountable Community of Health Practice Transformation project. The goal of these efforts is to build a more Patient Centered Medical Home model of care delivery through population health strategies. These efforts fit well with the Medicare Accountable Care Organization model with Caravan that PRH and PFM are involved with. Throughout the year, steps were taken to develop team-based care, integrated behavioral health, better involve patients in decision-making, as well as help patients to better care for themselves and their conditions.

Specific PFM steps were: doubling access to behavioral health services in the clinic with team-based monthly review of these cases; bringing nutrition services onsite 1 day per week-within two weeks the RD was fully booked; adding a call line for providers to reach a hospital pharmacist for medication review/ recommendations; and risk stratification of the entire clinic population to identify high risk patients with diabetes, depression, anxiety-develop case management processes to prevent gaps in care within the highest and second highest risk groups.

Over the year, the hospital was able to align care coordination and special population efforts already taking place into Practice Transformation efforts. The Inpatient Palliative Care service and Transitional Care Nurse service were two of these. Other steps included in these efforts were screening patients for depression and anxiety-assure follow-up for those that score at-risk, inpatient discharge follow-up phone calls, and diabetic care. Tools to better assist patients in decision-making were identified and if not found, were created. Overall, year one of the three-year project went well. Our focus over the next two years will include sustainability through demonstrated value in outcomes.

#### Summit Therapy and Health Services 2019 In Review

#### **Services**

Summit Therapy and Health Services is a diverse department of Pullman Regional Hospital. We have seven distinct patient service lines that include:

Physical Therapy Occupational Therapy Speech Therapy Acupuncture

Massage Therapy

**Genetic Counseling** 

Athletic Training



In addition to these patient focused services, we provide an integral part of our employee wellness program:

Wellness For Life, Veronica Hopwood-Coordinator

#### Locations

Outpatient Clinic on Pullman Regional Hospital campus at 1620 SE Summit Court

Inpatient Rehabilitation within Pullman Regional Hospital

Outpatient Physical Therapy clinic on WSU campus at Cougar Health Services

Pelvic Health Physical Therapy within the Pullman OB-Gyn clinic at the Professional Mall

Physical, Occupational and Speech Therapy as needed at Circles of Caring on Bishop Blvd

Athletic Training Services in the Chinook Building on the WSU campus, and within the Pullman, Garfield-Palouse, Colton and Potlatch schools

SAIL (Stay Active and Independent For Life) exercise classes in Palouse, Colton, Colfax, Regency Senior Living in Pullman and Ridge Pointe in Pullman

#### Growth

2019 was a year of modest growth with a 1.6% overall increase in total numbers of patients seen. Our therapists saw a total of 25,710 patients in 2018 compared to 26,134 in 2019.

The largest areas of growth were in Genetic Counseling with an increase in 18% and Occupational Therapy with an increase of 16%.



#### Summit Therapy and Health Services 2019 In Review

#### **Highlights**

#### **Dyslexia Program**

Frances Davies, Occupational Therapist and Jennifer Griffin, Speech and Language Pathologist received the Pullman Regional Hospital Foundation Scholarship to further their education in the area of dyslexia. They underwent an intensive 30-hour training on the Connections: OG (Orton Gillingham) in 3D Method and became certified to implement this technique.

Frances and Jennifer provide a unique approach with expertise in their professional arenas. Frances utilizes sensory integration, visual perception and fine motor skills for her portion of the program, while Jennifer relies upon phonological processing and the language component of speech therapy to insure a comprehensive approach to treating dyslexia.

In 2019 they saw a total of 29 patients ranging in age from 6-75 years for a total of 450 separate patient visits. They each see every patient separately for an evaluation in their area of expertise and then provide individual treatment sessions 1-2 times per week for 6-12 months.

They involve family members in the treatment sessions and plan of care and spend time providing home activities to help leverage the work they are doing in the clinic.

The Garfield-Palouse School District has contracted with us to provide services to some of their students. They understand the value of the program as it relates to student success in the classroom setting, and they transport 3-4 students and a teacher to our office 1-2 times a week for group and individual sessions.

The Dyslexia Program has been a resounding success and we have plans to continue to expand and grow as we are able. Since literacy is the gateway to success in school and in life, this is a foundational service that has far reaching impacts on those who participate.

Dyslexia	Program 2019		
		Evaluations	Treatments
	Occupational Therapy	20	182
	Speech Therapy	21	227
	TOTAL	41	409

#### Summit Therapy and Health Services 2019 In Review

#### SAIL Program (Stay Active and Independent for Life)

In 2017 there were 943 fall related deaths in the State of Washington in people over the age of 65. This number has doubled in the last 15 years! One in every three adults over the age of 65 experience a fall each year. Not only is this a staggering number, this is a trend that is not unique to our communities on the Palouse.

Our rehabilitation department at Summit Therapy and Health Services has taken this very seriously, and has established measures to help prevent falls in our community. We have worked internally to develop an inpatient and outpatient falls prevention program that includes screenings and treatment protocols.

The goals of our Falls Prevention Program are to decrease injury and death related to falls in our community members over the age of 65, provide a venue in which to increase strength and balance for community members in Colton, Colfax, Palouse and Pullman, prevent initial hospital admissions due to falls and prevent hospital re-admissions due to falls.

As we planned to expand this program to the community, we looked to the State of Washington for assistance. The State of Washington sponsors a fall prevention initiative program that includes training for SAIL (Stay Active and Independent for Life) classes. SAIL is an evidence- based class that has shown to significantly reduce falls in people over the age of 65 if they participate regularly and increase their strength and balance.

Our department was able to secure a grant from the Pullman Regional Hospital Foundation to train 15 of our staff members to become certified SAIL instructors. We completed that at the end of June 2019 and began planning our approach to fill the needs in the community.

5 years ago, Holli Parrish, one of our staff physical therapists was able to work with the Palouse School District and secure a grant for remodeling the Palouse High School weight room with the goal of offering a SAIL class. Holli has been teaching this class for the last 4 years and regularly has between 15-20 participants twice a week.



Over the summer we worked to establish venues for each class and on the week of September 23<sup>rd</sup>, National Falls Prevention Week, we started classes at the following locations:

Colton-Colton Booster Gun Club

Pullman-Ridge Pointe Retirement Community Clubhouse

**Pullman-Regency Senior Living** 

Colfax-Colfax Public Library

The model we chose for instructors was to have a mix of clinical and non-clinical staff divided into teams with lead instructors for each location. In order to be mindful of productivity, this model seems to fit with our department and hospital strategies of financial effectiveness combined with quality patient care and clinical outcomes.

With only three months of data at the end of 2019, these classes have all been extremely successful with regular attendance and some marked improvement in overall balance and fitness. We have heard many grateful comments from all locations, thanking us for thinking of them and providing an easy outlet for them to be able to exercise, socialize and work in a safe and stress- free setting.

For our new locations in Colfax, Colton and Pullman we have had 737 people who have participated in class with a range of 7-18 people per class, twice a week over the last 3 months. Including the Palouse class, the total number of participants in all the classes for 2019 was 1208.

The locations have all been provided at no charge to us and the State of Washington SAIL program has donated music speakers, cuff weights and promotional materials at no cost.

In addition to the Pullman Regional Hospital Foundation Scholarship for training, the Whitman County Health Network awarded us a \$5000 grant for equipment such as extra weights, gait belts and chairs, as well as mileage expenses.



## **Pediatric Center of Excellence**

## Pediatric Center of Excellence Vision

Pullman Regional Hospital's *Pediatric Center of Excellence* promotes wellness and treats illness for all pediatric patients, from birth through adolescence. We are committed to providing exemplary pediatric, family focused care by:

Continually improving our capabilities to safely care for patients

Creating a standardized approach to ensure quality services

Strengthening competence in pediatric care utilizing local regional and statewide expertise

Centralizing coordination of care

Enhancing the physical environment for pediatric care

Assuring patient choice, flexibility, and partnership approach to care

While continuing to work within the framework of the vision for the *Pediatric Center of Excellence* these accomplishments were made to improve how we care for this special population in 2019:

New policy development addressing pediatric weights and medication administration to improve safety and outcomes

Quality improvement computer safeguards implemented to assist staff on double checks for pediatric weights and medications to ensure safety

Pediatric resuscitation supplies and emergency medications on code carts were reorganized and packaged for improved clarity, efficiency, and to ensure safe administration

Hospital wide clinical staff competency education required and completed on pediatric distraction and comfort techniques from protocol initiated in 2018

Additional pediatric sexual assault training provided to SANE staff

Pediatric sexual assault reference guidelines developed to assist staff w/ pediatric SA exams

New Nitrous Oxide equipment, staff training and protocol implemented to assist with pediatric procedures in the emergency department

Process improvement project on pediatric disaster including MCI drill with multi-agency involvement Additional funding request was granted through the PRH auxiliary allowing purchase of iPad, virtual reality headset, pediatric fabric for blankets and gift card for purchase of toys and other distraction items

Continued monthly physician/nurse pediatric case review

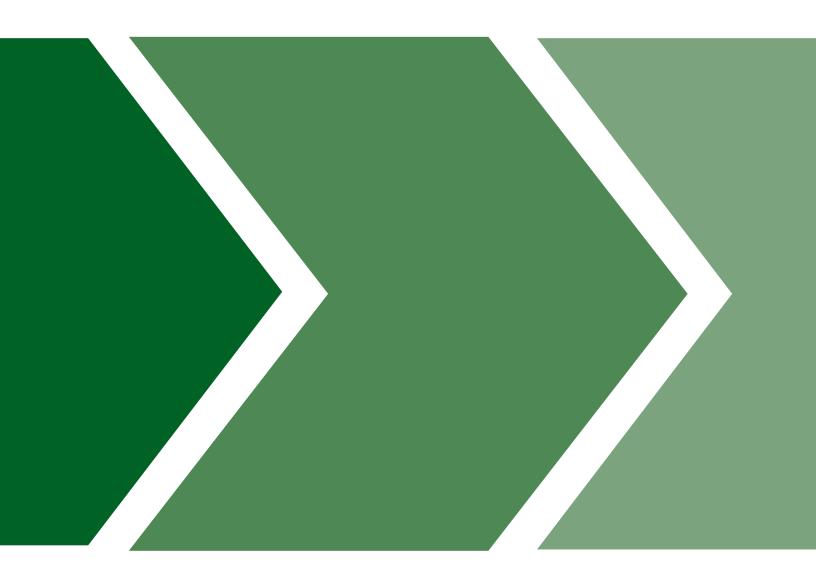
Continued staff education and competency assessment through live and recorded training/presentations

Continued coordination of pediatric care with local providers, Sacred Heart Children's Hospital, Summit Therapy Pediatric Team, laboratory and radiology services

Continued work with families to assist in care decisions as well as distraction and comfort techniques while engaging the child and allowing choices when able

# 2019

## Annual Performance Assessment & Improvement Report





CENTERED ON EXCELLENCE