

Hospital Authority of  
**MILLER  
COUNTY**



# MILLER COUNTY HOSPITAL

## ORGANIZATIONAL MAKE-UP

- 25 Bed Critical Access Hospital with a 107 Bed LTC Facility attached
- 50 bed Vent/Dialysis Unit in this LTC facility
- CON approved to add 50 more beds
- Also have another 60 bed LTC facility in Calhoun County
- 2 RHC's, 1 Specialty Clinic
- Partnership with DaVita Dialysis
- 5 Physicians employed by the hospital, 1 is a general surgeon
- 2 FNP's, 1 PA-C in our clinics
- 1 Podiatrist
- 2 Nephrologists, 2 pulmonologists with consulting privileges

## SERVICE LINES

- Emergency Room – 4 Beds, staffed with mid-levels
- Lab, Radiology & Respiratory Services available 24/7
- Surgery – bronchoscopies, colonoscopies, endoscopies, pediatric dental cases
- Wound Care Program
- Rehab Services – OT, PT, ST
- Very robust swing bed program which accepts chronic ventilator patients, as well as vent patients on dialysis
- Retail pharmacy with a 340b pharmaceutical program
- Recently, Deep South ACO formed 2016 to strengthen our case management of Medicare, Medicaid, & patients without insurance

MILLER COUNTY HOSPITAL  
MILLER COUNTY HEALTH DATA  
(THIS INFORMATION TAKEN FROM 2016 CHNA)

- ❖ Population: approximately 6000
- ❖ Factors that effect the health of our population: high poverty level (40% children live in poverty), low level of formal education, lack of transportation, 20% have no insurance
- ❖ Along with all these factors, we also have high numbers of obesity, diabetes, hypertension, behavioral health related issues such as drug and alcohol addictions
- ❖ Leading causes of death in Miller County:
  1. Cancer
  2. Heart Disease
  3. Chronic Lower Resp. Disease
  4. Accidents
  5. Strokes

# MILLER COUNTY HOSPITAL

Along with serving the population of Miller County, we also see a large number of people from Calhoun and Baker. Both are lacking hospitals in their counties and are included in our service area snapshot:

## **% Of Total Population below poverty level:**

Baker	27.3%	Children 0-17	41.5%
Calhoun	38.5%	Children 0-17	40%

## **% Households with no vehicle**

Baker	13.2%
Calhoun	15.8%

## **% of person's without high school education**

Baker	20%
Calhoun	32%

## **% without health insurance under 65**

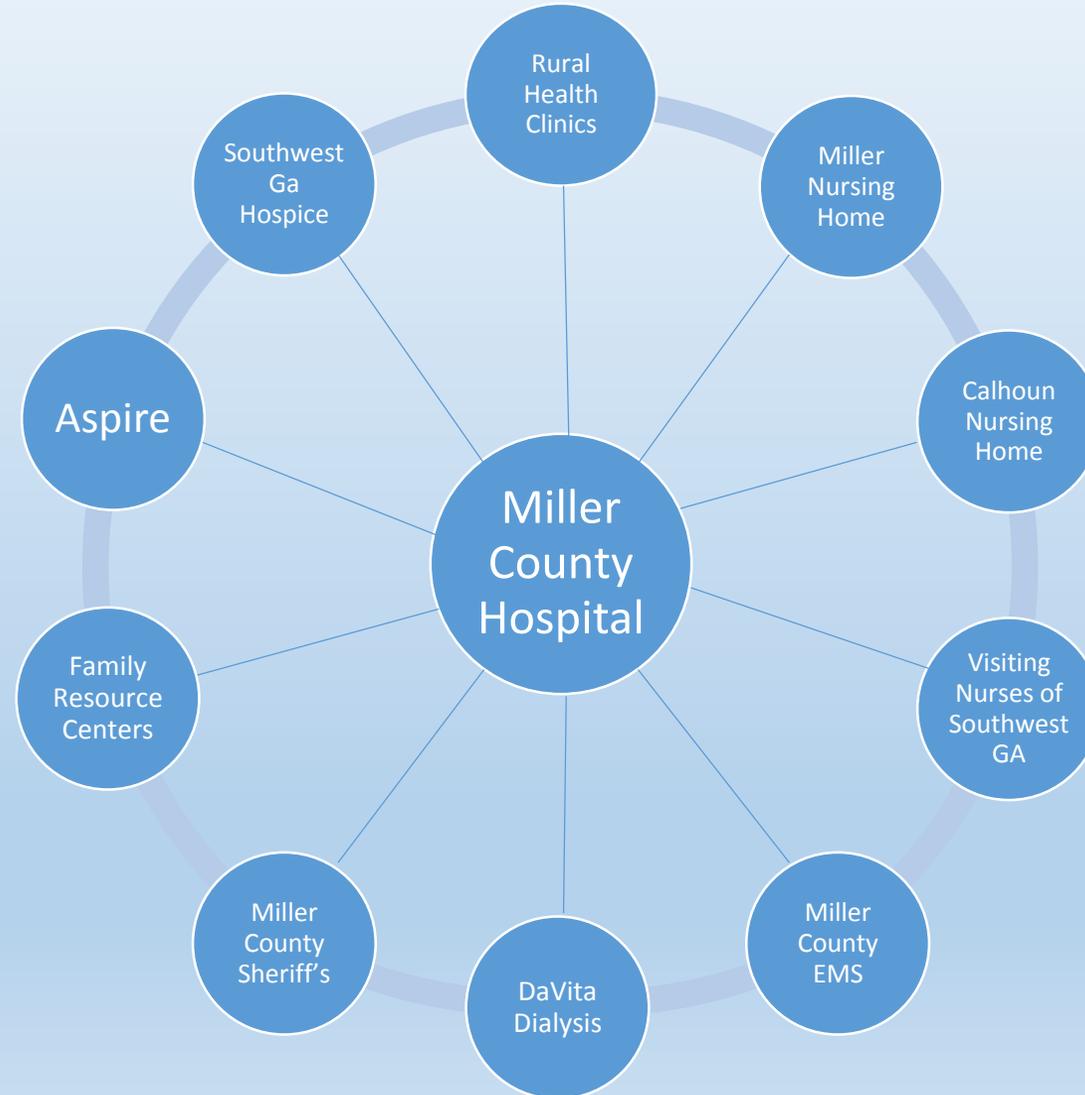
Baker	19%
Calhoun	22.5%

# MILLER COUNTY HOSPITAL

There are 3 intertwining projects we will be doing:

1. Care Coordination Model
2. Mental Health Collaboration
3. Emergency Room Redesign

# MILLER COUNTY HOSPITAL



# MILLER COUNTY – CARE COORDINATION MODEL

## BUDGET - \$235,000

### **MAJOR RESOURCES AND ACTIVITIES**

1. Hiring & training of staff
  - RN
  - LPNs (2)
  - Social Worker
  - Financial Consultant
  - Community Health Coach
2. Develop policies & protocols
3. Renovation of existing space in RHC
4. Community Education & Advertisement of services

### **TARGETED OUTPUTS AND OUTCOMES:**

1. Connect patients to the resources they need
2. Decrease the number of denied hospitalizations by payors
3. Improved bottom line to the hospital

### **PERFORMANCE MEASURES:**

- Decrease total charges for top 5 high volume diagnosis
- Inappropriate utilization of the ER
- Readmission reduction
- Access to care: potentially preventable hospital stays
- Meeting or exceeding 2016 net revenue
- Improved HCAPS scores

# MILLER COUNTY – MENTAL HEALTH COLLABORATION BUDGET - \$400,320

## **MAJOR RESOURCES AND ACTIVITIES**

### **(This is a two-fold project)**

#1 – First is to establish a local presence of the Mental Health group, ASPIRE on the MCH campus.

- Renovation of a house on MCH campus
- Training of staff
- Credentialing of allied health professional involved. i.e. LCSW

#2 – Second part of this project is the establishment of a Residential Recovery Inpatient Program (Touchstone) in the closed Calhoun County Hospital which will need:

1. Facility modification
2. Therapeutic items

## **TARGETED OUTPUT AND OUTCOMES:**

1. Decrease the number of patients that present to MCH's ER in a Mental Health Crisis
2. Increase screening of patients for underlying behavioral health issues when seen in physician's offices
3. Decrease in failed mental health appointments
4. Less local community resources being utilized i.e. ambulances, sheriff offices for transport of mental health patients

### **PERFORMANCE MEASURES:**

- Inappropriate utilization of the ER
- All cause Hospital-wide Readmissions
- Average daily boarding hours for 1013 hold in ER
- Potentially preventable hospital stays

# MILLER COUNTY HOSPITAL

## ER REDESIGN

### BUDGET - \$364,680

#### MAJOR RESOURCES AND ACTIVITIES

Renovation of existing space in the E.R.

- Retain architect (done)
- Met with staff regarding their needs (done)
- Architectural drawings finalized
- Construction bid

This redesign will convert a doctor's lounge and an admissions area into two small bays, possibly a third, from a waiting area that will get converted to a larger isolation or safe room for patients with communicable diseases or mental health patients.

- Equipment upon completion: stretchers, monitors, what will be needed for the "safe room" environment

#### TARGETED OUTPUTS AND OUTCOMES

1. Decrease LWBS, AMA's
2. Decrease Triage Time

#### PERFORMANCE MEASURES

- Meeting or exceeding CY 2016 Net Revenue
- Decrease the 1013 Hold times
- Decrease the potentially preventable Hospital Stays
- Increase market share
- Improve HCAPS scores