UNIVERSITY OF VIRGINIA
BOARD OF VISITORS
MEETING OF THE
MEDICAL CENTER
OPERATING BOARD
FOR THE UNIVERSITY
OF VIRGINIA
TRANSITIONAL CARE HOSPITAL
February 23, 2012
AGENDA

I. REPORTS BY THE VICE PRESIDENT AND CHIEF EXECUTIVE OFFICER OF THE TRANSITIONAL CARE HOSPITAL (Mr. Howell)
   A. Vice President's Remarks
   B. Operations and Finance Report (Mr. Howell to introduce Ms. Michelle D. Hereford; Ms. Hereford to report)

II. EXECUTIVE SESSION
   • ACTION ITEMS - To consider proposed personnel actions regarding the appointment, reappointment, resignation, assignment, performance, and credentialing of specific medical staff and allied health professionals, as provided for in Section 2.2-3711(A)(1) of the Code of Virginia. The meeting of the Medical Center Operating
Board is further privileged under Section 8.01-581.17 of the Code of Virginia.

- Discussion of proprietary, business-related information pertaining to the operations of the Transitional Care Hospital, where disclosure at this time would adversely affect the competitive position of the Transitional Care Hospital, specifically:
  - Confidential information and data related to the adequacy and quality of professional services, patient safety in clinical care, and patient grievances for the purpose of improving patient care at the Transitional Care Hospital; and
  - Consultation with legal counsel regarding the Transitional Care Hospital compliance with relevant federal reimbursement regulations, licensure, and accreditation standards, all of which will involve proprietary business information of the Transitional Care Hospital and evaluation of the performance of specific Transitional Care Hospital personnel.

The relevant exemptions to the Virginia Freedom of Information Act authorizing the discussion and consultation described above are provided for in Section 2.2-3711 (A) (1), (7), and (22) of the Code of Virginia. The meeting of the Medical Center Operating Board is further privileged under Section 8.01-581.17 of the Code of Virginia.
UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY

BOARD MEETING: February 23, 2012

COMMITTEE: Medical Center Operating Board

AGENDA ITEM: I.A. Vice President’s Remarks

ACTION REQUIRED: None

DISCUSSION: The Vice President and Chief Executive Officer of the University of Virginia Transitional Care Hospital will inform the Medical Center Operating Board of recent events that do not require formal action.
UNIVERSITY OF VIRGINIA
MEDICAL CENTER OPERATING BOARD
AGENDA ITEM SUMMARY

BOARD MEETING: February 23, 2011

COMMITTEE: Medical Center Operating Board

AGENDA ITEM: I.B. Operations and Finance Report

ACTION REQUIRED: None

BACKGROUND: The University of Virginia Transitional Care Hospital began operations on August 4, 2010. It prepares a periodic report, including write-offs of bad debt and indigent care, and reviews it with Executive Leadership before submitting the report to the Medical Center Operating Board. The University of Virginia Transitional Care Hospital also provides an update of significant operations of the hospital occurring since the last Medical Center Operating Board meeting.

FINANCE REPORT

The University of Virginia Transitional Care Hospital ended the period of July 1, 2011 through November 30, 2011 with an operating loss of $504,645 compared to the budgeted loss of $147,486. The loss is due to admissions being 14% below budget and the actual Case Mix Index of 1.19 being significantly below the budget of 1.50.

OPERATIONS REPORT

Access to services at the Transitional Care Hospital is guided by the collaborative efforts of clinicians, insurance providers, patients, and families. The Transitional Care Hospital employs clinical liaisons who are deployed to the community to identify appropriate candidates and evaluate referrals. These referrals are often received directly from providers and through the use of an electronic program known as E-discharge. New referrals are brought to an interdisciplinary team and reviewed every morning during a daily huddle session.

For the period from July 1, 2011 through November 30, 2011, the total number of referrals was 139, resulting in 69 admissions. Of the 69 admissions, 50 came from the University of Virginia Medical Center. It is estimated that Transitional
Care Hospital relieved the Medical Center of 1,500 patient days through November 30, 2011 by admitting these 50 patients.

**Clinical Operations**

Clinical services at the Transitional Care Hospital are provided by physicians, registered nurses, registered respiratory therapists, rehabilitation professionals, and support services, including patient care assistants, diagnostic radiology technicians, and pharmacists. These disciplines work collaboratively to develop a plan of care which is evaluated weekly in an interdisciplinary meeting. In addition, daily multidisciplinary rounds provide an opportunity to communicate a daily plan as well as recent changes in patient status.

Patient Care Services – Respiratory Complex, Wound Management, and Rehabilitation Services comprise a majority of the defined patient population.

- **Respiratory Services** is led by the Pulmonary Medical Director, Sharon Esau, M.D., and managed by a registered respiratory therapist. During the period from July 1, 2011 through December 31, 2011, the Transitional Care Hospital provided care to 35 patients requiring mechanical ventilation. Twenty-six patients achieved this goal, yielding a ventilator weaning rate of 88.46% versus the national benchmark of 60.1%. In addition, Respiratory Services continues to evaluate the feasibility of a formal pulmonary rehabilitation program. Meanwhile, we have also recently evaluated a piece of equipment which would permit on-site evaluation of pulmonary function, thus reducing the cost, disruption, and patient dissatisfaction associated with our current process of transporting patients off-site for this evaluation. We are also in the process of implementing a joint educational series with Emergency Medicine Services to provide airway management competency certification to licensed Independent Practitioners and Respiratory Therapists.

- The wound management program is led by a Nurse Practitioner who is certified in wound and ostomy care. The Transitional Care Hospital Wound Ostomy Care (WOC) plan includes obtaining The Joint Commission (TJC) certification. The Transitional Care Hospital has been able to recruit a part-time burn/wound tech to support our patient care efforts as the program and census grow.
• Rehabilitation Services is comprised of Physical Therapy, Occupational Therapy, and Speech Language Pathology. These services continue to be in high demand as a result of our acuity levels and complicating factors, such as a high proportion of morbidly obese patients. Patient satisfaction with these services remains high and our patients continue to respond exceedingly well physiologically as a result of this care.

Length of Stay

The Transitional Care Hospital’s length of stay for the period ending November 30, 2011, was 30.85 compared to the industry requirement of 25 days for Medicare patients.

Human Resources

The Transitional Care Hospital is currently staffed with 69 full-time equivalents (FTEs). Six of these are contracted registered nurses. As the Transitional Care Hospital continues to grow and develop, it will be imperative to acquire and retain talented employees; therefore, our focus has been on the following:

• Recruitment – For the period of October 1, 2011 through December 31, 2011, we have successfully recruited 16 permanent staff: seven registered nurses, six patient care assistants, one hospital unit coordinator, and two respiratory therapists. In addition, with the assignment of a new Human Resources Representative dedicated primarily to the Transitional Care Hospital, we expect to continue to effectively recruit permanent staff to replace our current travelers (a net of five of whom will be completing their contracts by March 1, 2012). Additionally, we have begun the process of recruiting Licensed Practical Nurses (LPNs), a caregiver group we believe will provide high-quality and cost efficient support to our patient population.

• Employee Engagement – In July 2011, 97% of Transitional Care Hospital employees participated in the Allegiance Employee Engagement Survey. The overall facility Engagement Index was 73.04, which exceeds the National Healthcare Benchmark Index of 71.00. As a result of this survey, a multidisciplinary Employee Engagement Committee
was formed. This employee-led committee is working collaboratively with the leadership team to further understand the results and develop actions to address them. To date, the Employee Engagement Committee has developed additional small surveys, developed a newsletter, presented findings to staff and leadership, and hosted various activities and events, including holiday activities.

- System Human Resources Activities – Effective March 18, 2012 the definition of full-time employment will change from 40 hours per week to a minimum of 36 hours per week (0.9 FTE). This staffing change is consistent with the Medical Center policy.

Quality and Performance Improvement

The Transitional Care Hospital is working with the Medical Center Lab to have out-patient laboratory services certified by the College of American Pathologists instead of by The Joint Commission. We are expecting the survey to occur before the end of February. In addition, we continue to participate with the National Health Safety Network to benchmark our hospital-acquired infections and conditions against other Long Term Acute Care Hospitals across the nation.

The Transitional Care Hospital is methodically exploring mechanisms to increase the number of responses to our Patient Satisfaction Survey. Currently, the rate of return is less than 10%. The first steps are to ensure that the process is working as agreed upon with the vendor, to develop a local Patient Satisfaction Liaison role within the Transitional Care Hospital, and to explore alternative mechanisms to facilitate response rates.

In January 2012, we implemented a standardized, on-going survey readiness and patient safety initiative, modeled after the Medical Center program. This program is designed to increase the depth and breadth of staff education related to patient safety and regulatory standards, as well as to maintain on-going oversight of the physical appearance of the facility.

Community Outreach and Other Activities

During the holiday season, the Transitional Care Hospital hosted various activities and events, with the focus on our patients, their families, and those in need of assistance. Among the various events we hosted were a caroling performance
by the Virginia Consort, lighting of outside trees for patients and families to enjoy, and the sponsorship of two families who were in need of assistance. These activities further support the high level of engagement of our physicians and employees.