

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

MT DPHHS State-Run Health Care Facilities Monthly Status Update
June 2023

The monthly DPHHS Healthcare Facilities division performance scorecard for Montana's state-run health care facilities is below. This scorecard tracks key performance metrics for each of the state-run healthcare facilities inluding census and staffing, budget, training, quality and operations.

Montana State Hospital Performance Scorecard

| Facility | Performance Indicator | Description | Apr-23 | May-23 | Jun-23 | Goal |
|--------------------|---|---|-----------------|-----------------|-----------------|-------|
| Operations Metrics | | | | | | |
| Average Daily Cens | us | | | | | |
| MSH | Census (Total) - % | Average daily census divided by licensed beds | 82.2% | 84.1% | 80.0% | N/A |
| MSH | Census (Total) - Number | Average daily census | 222 | 227 | 216 | N/A |
| MSH | Census (Main Hospital) - Number | Average daily census | 141 | 151 | 138 | N/A |
| MSH | Census (Forensic) - Number | Average daily census | 48 | 46 | 46 | N/A |
| MSH | Census (Group Homes) - Number | Average daily census | 33 | 30 | 32 | N/A |
| Admissions | | | | | | |
| MSH | Admissions (Total) | # of admissions | 59 | 66 | 78 | N/A |
| MSH | Admissions (Main Hospital) | # of admissions | 49 | 60 | 68 | N/A |
| MSH | Admissions (Forensic) | # of admissions | 10 | 6 | 10 | N/A |
| MSH | Admissions (Group Homes) | # of admissions | 0 | 0 | 0 | N/A |
| Discharges | | | | | | |
| MSH | Discharges (Total) | # of discharges | 55 | 71 | 87 | N/A |
| MSH | Discharges (Main Hospital) | # of discharges | 48 | 63 | 81 | N/A |
| MSH | Discharges (Forensic) | # of discharges | 5 | 6 | 6 | N/A |
| MSH | Discharges (Group Homes) | # of discharges | 2 | 2 | 0 | N/A |
| Waitlist | | | | | | |
| MSH | Waitlist for Admission (Total) | # waiting for admission at end of month | 67 | 77 | 70 | <12 |
| MSH | Waitlist for Admission (Main Hospital) | # waiting for admission at end of month | 0 | 0 | 0 | <1 |
| MSH | Waitlist for Admission (Forensic) | # waiting for admission at end of month | 67 | 77 | 70 | <10 |
| MSH | Waitlist for Admission (Group Homes) | # waiting for admission at end of month | 0 | 0 | 0 | <1 |
| HR Metrics | | - | | | | |
| MSH | Employee Vacancy Rate | # of vacancies divided by # of budgeted positions | 37.0% | 38.0% | 37.0% | <15% |
| MSH | Employee Turnover Rate | # of separations divided by # of employees | 1.5% | 3.0% | 2.8% | <5.0% |
| MSH | Net Employee Hires | # of employees hired minus # of employees separated for the month | 0 | (4) | (5) | >6 |
| Finance Metrics | | | | | | |
| MSH | Starting Budget - Current SFY | Starting budget for the current SFY | \$ 48,873,226 | \$ 48,873,226 | \$ 48,873,226 | N/A |
| MSH | Actuals - Current SFY to Date | Actual expenses in the current SFYTD | \$ 58,461,674 | \$ 64,911,885 | \$ 75,689,613 | N/A |
| MSH | Projected Expenses - Current SFY | Projected expenses at end of the current SFY | \$ 92,681,218 | \$ 92,606,639 | \$ 92,671,515 | N/A |
| MSH | Variance - Budget to Projected Expenses | Starting budget minus projected expenses | \$ (43,807,992) | \$ (43,733,413) | \$ (43,798,289) | >\$0 |
| MSH | Cost per Bed Day | Total projected expenses divided by the annualized average daily census | \$ 1,144 | \$ 1,118 | \$ 1,175 | N/A |
| MSH | Revenue - Current SFY to Date | Revenue collected SFYTD | \$ 2,078,207 | \$ 2,034,557 | \$ 2,208,966 | N/A |
| MSH | Traveler Spend | \$ spent on traveling nursing staff for the month | \$ 4,124,718 | \$ 2,849,122 | \$ 3,898,435 | N/A |

| MSH | Monthly Reduction in Traveler Spend | % change in traveler spend from last month to this month. | 0% | -31% | 37% | <-5% |
|---------------|--|---|----------------|----------------|----------------|------|
| Quality Metri | <u>ics</u> | | | | | |
| MSH | Quality Indicator #1: Medicaid Eligibility Evaluation | % of patients evaluated for Medicaid eligibility upon admission | 100% | 96% | 100% | 95% |
| MSH | Quality Indicator #2: Group Therapy Attendance | Patient attendance is 100% for group therapy sessions offered | 71% | 66% | 70% | 75% |
| MSH | Quality Indicator #3: Completion of Community Reentry Plans | Completion of Community Reentry form within 10 days of admission | 49% | 72% | 41% | 90% |
| MSH | Quality Indicator #4: Chemical Restraint Use per 1000 Patient Days | Chemical Restraint occurrence per 1000 patient days | 9.61 | 8.45 | 4.71 | 0 |
| MSH | Training Compliance | Percent of the total trainings required by license and job type that are up to date | 49% | 65% | 84% | 100% |
| MSH | INEW Orientation Training Compliance | Percent of the total new orientation trainings required by license and job type that are up to date | Retired Metric | Retired Metric | Retired Metric | 100% |

Nursing Care Center Performance Scorecard

| Facility | Performance Indicator | Description | Apr-23 | May-23 | Jun-23 | Goal |
|---------------|--|---|----------------|----------------|----------------|-------|
| Delivery of C | are Metrics | | | - | | |
| MMHNCC | Licensed Beds | # of licensed beds | 117 | 117 | 117 | N/A |
| MMHNCC | Census - Number | Average daily census for the month | 66 | 66 | 65 | >105 |
| MMHNCC | Census - % | Average daily census divided by licensed beds | 56% | 56% | 56% | >90% |
| MMHNCC | Admissions | # of admissions for the month | 2 | 0 | 3 | N/A |
| MMHNCC | Discharges | # of discharges for the month | 0 | 1 | 3 | N/A |
| MMHNCC | Waitlist for Admission | # waiting for admission at end of month | 2 | 2 | 2 | <1 |
| Operations I | <u>Metrics</u> | | | | | |
| MMHNCC | Employee Vacancy Rate | # of vacant positions divided by # of budgeted positions | 36.0% | 33.0% | 39.0% | <15% |
| MMHNCC | Employee Turnover Rate | # of separations divided by # of employees | 3.5% | 3.0% | 3.5% | <5.0% |
| MMHNCC | Net Employee Hires | # of employees hired minus # of employees separated for the month | (2) | 2 | (4) | >4 |
| Finance Met | <u>rics</u> | | | | | |
| MMHNCC | Starting Budget - Current SFY | Starting budget for the current SFY | \$ 12,411,241 | \$ 12,411,241 | \$ 12,411,241 | N/A |
| MMHNCC | Actuals - Current SFY to Date | Actual expenses in the current SFYTD | \$ 9,304,130 | \$ 9,975,568 | \$ 12,070,574 | N/A |
| MMHNCC | Projected Expenses - Current SFY | Projected expenses at end of the current SFY | \$ 14,529,132 | \$ 14,513,703 | \$ 14,350,870 | N/A |
| MMHNCC | Variance - Budget to Projected Expenses | Starting budget minus projected expenses | \$ (2,117,891) | \$ (2,102,462) | \$ (1,939,629) | >\$0 |
| MMHNCC | Cost per Bed Day | Total projected expenses divided by the annualized average daily census | \$ 603 | \$ 602 | \$ 605 | N/A |
| MMHNCC | Revenue - Current SFY to Date | Revenue collected SFYTD | \$ 3,719,074 | \$ 4,039,764 | \$ 4,376,469 | N/A |
| MMHNCC | Traveler Spend | \$ spent on traveling nursing staff for the month | \$ 258,319 | \$ 147,834 | \$ 251,726 | N/A |
| MMHNCC | Monthly Reduction in Traveler Spend | % change in traveler spend from last month to this month | 50% | -43% | 70% | <-10% |
| Quality Metr | i <u>cs</u> | | | | | |
| MMHNCC | Quality Indicator #1: Reduce Falls with Major Injuries | Falls with major injuries will be reduced to zero per month | 0.00% | 0.00% | 0.00% | <1% |
| MMHNCC | Quality Indicator #2: Comply with Monthly Weighting Requirements | All patients will be weighed on a monthly basis per the CMS guidelines | 98% | 95% | 96% | 100% |
| MMHNCC | Quality Indicator #3: Reduce UTIs | Lower the percentage of long-stay residents with a UTI below the Montana average | 3.0% | 1.0% | 0.0% | <2.9% |
| MMHNCC | Quality Indicator #4: GDR Attempts | Monthly gradual dose reduction (GDR) attempts in residents who are using antipsychotic medication | 12.0% | 9.0% | 8.0% | >10% |
| MMHNCC | Training Compliance | Percent of the total trainings required by license and job type that are up to date | 91% | 94% | 90% | 100% |

Intensive Behavior Center Performance Scorecard

| Facility | Performance Indicator | Description | Apr-23 | May-23 | Jun-23 | Goal |
|--------------------|--|---|----------------|----------------|----------------|-------|
| Delivery of Care I | <u>Metrics</u> | | | | | |
| IBC | Licensed Beds | # of licensed beds | 12 | 12 | 12 | N/A |
| IBC | Census - Number | Average daily census for the month | 8 | 8 | 8 | N/A |
| IBC | Census - % | Average daily census divided by licensed beds | 67% | 67% | 67% | N/A |
| IBC | Admissions | # of admissions for the month | 0 | 0 | 0 | N/A |
| IBC | Discharges | # of discharges for the month | 1 | 0 | 0 | N/A |
| IBC | Waitlist for Admission | # waiting for admission at end of month | 8 | 8 | 8 | <1 |
| Operations Metri | <u>cs</u> | | | | | |
| IBC | Employee Vacancy Rate | # of vacant positions divided by # of budgeted positions | 65.0% | 67.0% | 68.0% | <15% |
| IBC | Employee Turnover Rate | # of separations divided by # of employees | 3.0% | 2.0% | 1.5% | <5.0% |
| IBC | Net Employee Hires | # of employees hired minus # of employees separated for the month | (1) | (1) | (1) | >4 |
| Finance Metrics | | | | | | |
| IBC | Starting Budget - Current SFY | Starting budget for the current SFY | \$ 2,775,188 | \$ 2,775,188 | \$ 2,775,188 | N/A |
| IBC | Actuals - Current SFY to Date | Actual expenses in the current SFYTD | \$ 6,006,785 | \$ 6,347,995 | \$ 7,158,723 | N/A |
| IBC | Projected Expenses - Current SFY | Projected expenses at end of the current SFY | \$ 8,351,097 | \$ 8,331,656 | | N/A |
| IBC | Variance - Budget to Projected Expenses | Starting budget minus projected expenses | \$ (5,575,909) | \$ (5,556,468) | \$ (5,406,998) | >\$0 |
| IBC | Cost per Bed Day | Total projected expenses divided by the annualized average daily census | \$ 2,860 | \$ 2,853 | \$ 2,802 | N/A |
| IBC | Revenue - Current SFY to Date | Revenue collected SFYTD | \$ 73,330 | \$ 80,438 | \$ 91,078 | N/A |
| IBC | Traveler Spend | Dollars spent on traveling nursing staff for the month | \$ 329,059 | \$ 335,536 | \$ 265,613 | N/A |
| IBC | Monthly Reduction in Traveler Spend | % change in traveler spend from last month to this month. | 1% | 2% | -21% | <-10% |
| Quality Metrics | | | | | | |
| IBC | Quality Indicator #1: Behavior Support Plans | Comprehensive behavior support plans are updated at least quarterly or based on the individual's changing needs and expected outcomes | 100% | 100% | 100% | 100% |
| IBC | Quality Indicator #2: Community Outings | Total attendance at community outings | 48 | 55 | 38 | 12 |
| IBC | Quality Indicator #3: Enrichment Center Attendance | Percent of clients meeting their individual Enrichment Center Attendance goals. | 32% | 38% | 40% | 50% |
| IBC | Quality Indicator #4: Learning Objectives | Total Formal Learning Objectives for each client based on hierachy of needs. | 8 | 8 | 16 | 45 |
| IBC | Training Compliance | Percent of the total trainings required by license and job type that are up to date | 98% | 99% | 99% | 100% |

Montana Chemical Dependency Center Performance Scorecard

| Facility | Performance Indicator | Description | Α | pr-23 | May-23 | Jun-23 | Goal |
|-----------|--|--|----|-----------|-----------------|-----------------|--------|
| Delivery | of Care Metrics | | | | | | |
| MCDC | Licensed Beds | # of licensed beds | | 48 | 48 | 48 | N/A |
| MCDC | Census - Number | Average daily census for the month | | 21 | 23 | 21 | >43 |
| MCDC | Census - % | Average daily census divided by licensed beds | 4 | 44% | 48% | 44% | 90% |
| MCDC | Admissions | # of admissions for the month | | 26 | 41 | 39 | N/A |
| MCDC | Discharges | # of discharges for the month | | 30 | 37 | 27 | N/A |
| MCDC | Waitlist for Admission | # waiting for admission at end of month | | 0 | 0 | 0 | <1 |
| Operatio | ons Metrics | | | | | | |
| MCDC | Employee Vacancy Rate | # of vacant positions divided by # of budgeted positions | 9 | 9.0% | 12.0% | 14.0% | <15% |
| MCDC | Employee Turnover Rate | # of separations divided by # of employees | 3 | 3.5% | 0.0% | 1.8% | <5.0% |
| MCDC | Net Employee Hires | # of employees hired minus # of employees separated for the month | | (2) | 0 | (1) | 0 |
| Finance | <u>Metrics</u> | | | | | | |
| MCDC | Starting Budget - Current SFY | Starting budget for the current SFY | \$ | 6,000,763 | \$ 6,000,763 | \$ 6,000,763 | N/A |
| MCDC | Actuals - Current SFY to Date | Actual expenses in the current SFYTD | \$ | 4,303,501 | \$ 4,620,270 | \$ 5,671,470 | N/A |
| MCDC | Projected Expenses - Current SFY | Projected expenses at end of the current SFY | - | 6,668,857 | \$ 6,505,023 | \$ 6,454,696 | N/A |
| MCDC | Variance - Budget to Projected Expenses | Starting budget minus projected expenses | \$ | (668,094) | \$ (504,260) | \$ (453,933) | >\$0 |
| MCDC | Cost per Bed Day | Total projected expenses divided by the annualized average daily census | \$ | 870 | \$ 775 | \$ 842 | N/A |
| MCDC | Revenue - Current SFY to Date | Revenue collected SFYTD | \$ | 881,782 | \$ 1,070,788 | \$ 1,286,816 | N/A |
| MCDC | Traveler Spend | Dollars spent on traveling nursing staff for the month | \$ | - | \$ - | \$ - | N/A |
| Quality I | <u>Metrics</u> | | | | | | |
| MCDC | Quality Indicator #1: Discharge Follow-up | Discharge follow-ups, or attempts, will be conducted for 100% of discharges | 1 | 00% | 100% | 100% | 100% |
| MCDC | Quality Indicator #2: Reducing AMAs | Number of discharges against medical advice per month will be reduced | | 10 | 13 | 13 | < 7 |
| MCDC | Quality Indicator #3: Referral Conversion Rate | Number of complete referrals to number of actual patient admissions | 8 | 83% | 84% | 68% | >90% |
| MCDC | Quality Indicator #4: Days to Admission | Number of days from initial outreach to admission (average between patients without legal involvement and patients with legal involvement) | | 7.8 | 10.28 | 7.68 | 5 days |
| MCDC | Training Compliance | Percent of the total trainings required by license and job type that are up to date | 8 | 80% | 100% | 96% | 100% |

Montana Veterans Home Performance Scorecard

| Facility | Performance Indicator | Description | Apr-23 | | May-23 | Jun-23 | Goal |
|------------------|---|---|------------------|------|------------|------------------|-------|
| Delivery o | of Care Metrics | | | | | | |
| CFMVH | Licensed Beds | # of licensed beds | 117 | | 117 | 117 | N/A |
| CFMVH | Census - Number | Average daily census for the month | 64 | | 66 | 70 | >105 |
| CFMVH | Census - % | Average daily census divided by licensed beds | 54.7% | | 56.4% | 59.8% | >90% |
| CFMVH | Admissions | # of admissions for the month | 4 | | 5 | 5 | N/A |
| CFMVH | Discharges | # of discharges for the month | 2 | | 1 | 1 | N/A |
| CFMVH | Waitlist for Admission | # waiting for admission at end of month | 35 | | 43 | 44 | <15 |
| Operation | s Metrics | | | | | | |
| CFMVH | Employee Vacancy Rate | # of vacant positions divided by # of budgeted positions | 28.0% | | 26.0% | 25.5% | <15% |
| CFMVH | Employee Turnover Rate | # of separations divided by # of employees | 1.3% | | 1.0% | 0.6% | <5.0% |
| CFMVH | Net Employee Hires | # of employees hired minus # of employees separated for the month | (1) | | 0 | 0 | >4 |
| Finance M | <u>letrics</u> | | | | | | |
| CFMVH | Starting Budget - Current SFY | Starting budget for the current SFY | \$ 14,997,323 | \$ | 14,997,323 | \$ 14,997,323 | N/A |
| CFMVH | Actuals - Current SFY to Date | Actual expenses in the current SFYTD | \$ 9,668,710 | | 10,370,740 | 3,397,119 | N/A |
| CFMVH | Projected Expenses - Current SFY | Projected expenses at end of the current SFY | \$ 14,502,743 | | 14,508,369 | 14,523,493 | N/A |
| CFMVH | Variance - Budget to Projected Expenses | Starting budget minus projected expenses | \$ 494,580 | \$ | 488,954 | \$ 473,830 | >\$0 |
| CFMVH | Cost per Bed Day | Total projected expenses divided by the annualized average daily census | \$ 621 | \$ | 602 | \$ 568 | N/A |
| CFMVH | Revenue - Current SFY to Date | Revenue collected SFYTD | \$ 2,531,091 | \$ | 2,937,773 | \$ 3,198,190 | N/A |
| CFMVH | Traveler Spend | \$ spent on traveling nursing staff for the month | \$ 297,054 | \$ | 406,030 | \$ 219,789 | N/A |
| CFMVH | Monthly Reduction in Traveler Spend | % change in traveler spend from last month to this month. | 39% | | 37% | -46% | <-10% |
| Quality Mo | etrics | | | | | | |
| CFMVH | Quality Indicator #1: Fall Risk Interventions | All patients that have a risk of falls are identified and risk interventions are put in place | 100% | 100% | | 100% | 100% |
| CFMVH | Quality Indicator #2: Reduce UTIs | The number of UTIs (CAUTI) per month will be reduced by 20% per month until zero | 0% | | 14% | 0% | 0% |
| CFMVH | Quality Indicator #3: Reduce Antianxiety Medication Use | Use of antianxiety medications will be reduced to 25 percent of residents | 21% | | 26% | 25% | <25% |
| CFMVH | Quality Indicator #4: Reduce Medication Errors | Medication errors are below 5% | 4% | | 4% | 4% | <5% |
| CFMVH | Training Compliance | Percent of the total trainings required by license and job type that are up to date | 93% | | 97% | 94% | 100% |

Southwest Montana Veterans Home Performance Scorecard

| Facility | Performance Indicator | Description | Apr-23 | May-23 | Jun-23 | Goal |
|-----------------|---|---|-------------------|----------------|----------------|------|
| Delivery | of Care Metrics | | | | | |
| SWMVH | Licensed Beds | # of licensed beds | 60 | 60 | 60 | N/A |
| SWMVH | Census - Number | Average daily census for the month | 45 | 42 | 42.5 | >54 |
| SWMVH | Census - % | Average daily census divided by licensed beds | 75.0% | 70.0% | 70.8% | >90% |
| SWMVH | Admissions | # of admissions for the month | 3 | 3 | 9 | N/A |
| SWMVH | Discharges | # of discharges for the month | 2 | 7 | 8 | N/A |
| SWMVH | Waitlist for Admission | # waiting for admission at end of month | 12 | 31 | 6 | <15 |
| Finance I | <u>Metrics</u> | | | | | |
| SWMVH | Starting Budget - Current SFY | Starting budget for the current SFY | \$ 2,995,743 | \$ 2,995,743 | \$ 2,995,743 | N/A |
| SWMVH | Actuals - Current SFY to Date | Actual expenses in the current SFYTD | \$ 2,766,958 | \$ 3,400,474 | \$ 3,397,119 | N/A |
| SWMVH | Projected Expenses - Current SFY | Projected expenses at end of the current SFY | \$ 4,810,640 | \$ 4,432,066 | \$ 4,454,859 | N/A |
| SWMVH | Variance - Budget to Projected Expenses | Starting budget minus projected expenses | \$ (1,814,897) | \$ (1,436,323) | \$ (1,459,116) | >\$0 |

Eastern Montana Veterans Home Performance Scorecard

| Facility | Performance Indicator | Description | Apr-23 | May-23 | Jun-23 | Goal |
|-----------------|---|---|--------------|--------------|--------------|------|
| Delivery | of Care Metrics | | | | | |
| EMVH | Licensed Beds | # of licensed beds | 80 | 80 | 80 | N/A |
| EMVH | Census - Number | Average daily census for the month | 55 | 54 | 55 | >72 |
| EMVH | Census - % | Average daily census divided by licensed beds | 68.8% | 67.5% | 68.8% | >90% |
| EMVH | Admissions | # of admissions for the month | 4 | 1 | 5 | N/A |
| EMVH | Discharges | # of discharges for the month | 6 | 4 | 2 | N/A |
| EMVH | Waitlist for Admission | # waiting for admission at end of month | 2 | 3 | 0 | 0 |
| Finance I | <u>Metrics</u> | | | | | |
| EMVH | Starting Budget - Current SFY | Starting budget for the current SFY | \$ 4,511,074 | \$ 4,511,074 | \$ 4,511,074 | N/A |
| EMVH | Actuals - Current SFY to Date | Actual expenses in the current SFYTD | \$ 4,145,403 | \$ 4,294,755 | \$ 4,520,573 | N/A |
| EMVH | Projected Expenses - Current SFY | Projected expenses at end of the current SFY | \$ 5,142,927 | \$ 5,228,510 | \$ 5,061,745 | N/A |
| EMVH | Variance - Budget to Projected Expenses | Starting budget minus projected expenses | \$ (631,853) | \$ (717,436) | \$ (550,671) | >\$0 |