



SELBY  
GENERAL  
HOSPITAL

Memorial Health System

**Selby General Hospital  
Inpatient Rehabilitation Center  
STRATEGIC BUSINESS PLAN  
Oct 2018-Sep 2021**

Section 1: Executive Summary

The Rehabilitation Center at Selby General Hospital has a history of rehabilitation service to the Mid-Ohio Valley community since 1993. This Strategic Plan marks the eighth (8<sup>th</sup>) CARF accreditation cycle which began in 1997 with the original Medical Rehabilitation accreditation. Stroke Specialty accreditation was earned in 2006. Excellence in everything we do motivates us every day to attract the best talent in our region who will create the best customer experience and outcomes attainable. The hallmarks of this 3-year cycle will include a focus on listening to our customers and team to create improvement opportunities as well as navigating new CMS quality reporting requirements that will change our processes and payment structure. Technology will play a key role in improving communication and quality as well as expanding service offerings. The Covid-19 pandemic that began in Feb 2020 will have a financial and service delivery impact not yet fully realized.

Section 2: Mission

To enhance the health of the people and the communities we serve.

Section 3: Values

**Community** – We exist to treat our friends, family, and neighbors. We are part of the social fabric of our community.

**Health** – We want to improve and sustain the health of the people in our community with medical and rehabilitative treatments that are innovative and cost-effective.

**Excellence** – We will be excellent in all we do and will not choose services we cannot be excellent in providing. We strive for the top 10% in the nation for quality, care, and service.

**Life** – We want to maximize the quality of life for our community from health to support so they can live their best lives.

## Section 4: SWOT

STRENGTHS	WEAKNESSES
<ul style="list-style-type: none"> <li>• Bolt documentation for all disciplines</li> <li>• Flexibility of team</li> <li>• Patient-centered schedule</li> <li>• Patient-centered treatment sessions</li> <li>• High skill level of staff</li> <li>• SGH facility is quiet and allows outside treatment space</li> <li>• Facility is open, clean, and great for visiting families</li> <li>• 1 primary physician for continuity of care</li> <li>• Physicians are active in care and easily approachable</li> <li>• Physician collaboration occurs often</li> <li>• Physician leadership is strong</li> <li>• Willingness to help, supportive co-workers</li> <li>• Longevity of staff</li> <li>• RN nursing model of care</li> <li>• Nursing educator in-house</li> <li>• Tuition reimbursement and certification bonus programs</li> <li>• Therapy staff engagement scores above 90<sup>th</sup> percentile</li> <li>• Customer satisfaction scores above 90<sup>th</sup> percentile</li> </ul>	<ul style="list-style-type: none"> <li>• Evening and Sunday therapeutic interventions</li> <li>• Absence of an Activity Therapist or activities that add fun, etc.</li> <li>• Limited patient community reintegration sessions/outings</li> <li>• Transitions of care into and out of IPR can be awkward for patients</li> <li>• Knowledge of community resources for staff is limited</li> <li>• Patient hand-off to non-IPR nursing and therapy staff allow for inconsistencies and errors</li> <li>• Food service competency with modified diets</li> <li>• Non-IPR staff charting is often incomplete</li> <li>• Communication between shifts; blaming other shifts</li> <li>• Lack of Marketing Liaison to other facilities</li> <li>• 10 bed unit at times limits new admissions</li> <li>• Staff being pulled to and from IPR unit</li> </ul>
OPPORTUNITIES	THREATS
<ul style="list-style-type: none"> <li>• Partner with acute team to improve patient selection</li> <li>• Work with Trauma Coordinator to follow transferred patients and funnel them back to IPR</li> <li>• Teambuilding across shifts</li> <li>• Same therapist NRC Picker question</li> <li>• Build new referral sources, market in Athens and Guernsey counties</li> <li>• Food service engagement has improved and is an opportunity to improve overall care</li> <li>• Improve communication with patients and healthcare team</li> <li>• Website upgrade</li> <li>• Employee engagement improvement</li> <li>• Neurosurgical service growth</li> <li>• Quality Improvement/IRF-Pai changes</li> </ul>	<ul style="list-style-type: none"> <li>• Insurance denials and benefit limitations</li> <li>• Parkersburg Orthopedic teams moved surgical volume away from the system</li> <li>• Recruiting difficulties for PT and OT should a position open</li> <li>• Competition from larger health systems who have IPR units</li> <li>• Reduction in CCMC referrals</li> <li>• Reimbursement issues from coding and documentation omissions</li> <li>• Orthopedic surgical volume variability</li> <li>• PT and OT recruiting is difficult</li> </ul>

## Section 5: Goals & Objectives

### **Pillar: Service**

**Objective 1: Identify and reduce barriers that prevent access to The Rehabilitation Center.**

**Strategy 1: Marketing the Medical Rehabilitation Program and the Stroke Specialty Program to increase community awareness.**

**Strategy 2: Collaborate with discharge planners to facilitate referrals and admissions.**

**Strategy 3: Demonstrate diligence with 3rd party payors to adhere to and enable access to IRF services.**

**Objective 2: Provide excellent customer experiences that exceed expectations.**

**Strategy 1: Identify improvement opportunities using input and feedback from those we serve.**

### **Pillar: People**

**Objective 1: To have a happy workforce that functions as a team with a person-centered focus as measured by employee engagement survey scores.**

**Strategy 1: Increase employee engagement survey score for nursing to at or above the hospital median.**

**Strategy 2: Promote relationships with nursing and allied health educational institutions for recruitment and other collaborative opportunities.**

**Objective 2: Improve communication with person served**

**Strategy 1: Gather input from person served**

**Strategy 2: Gather input from caregivers**

### **Pillar: Growth**

**Objective: Establish a strong referral base that ensures IPR qualifying referrals to optimize occupancy capacity thus ensuring business sustainability.**

**Strategy 1: Build a strong foundation for advanced technologies to improve processes and outcomes**

**Strategy 2: Increase admissions and overall patient days**

**Strategy 3: Cardiothoracic surgery program implementation**

**Strategy 4: Increase Selby surgical volume**

### **Pillar: Stewardship**

**Objective: Provide quality services with respect to time and cost.**

**Strategy 1: Remain informed and knowledgeable of regulatory requirements and changes**

**Strategy 2: Reimbursement rate and coding accuracy**

**Strategy 3: Efficiency Measures**

**Strategy 3: Financial Management**

### **Pillar: Quality**

**Objective: Provide services that effectively improve the health of the person served**

**Strategy 1: Monitor and compare outcomes for effectiveness and functional improvement.**

**Strategy 2: Analyze and determine causes for scores that vary from regional and national scores.**

**Strategy 3: Effectiveness Measures**

### **Pillar: Community**

**Objective: Support and encourage safe and fulfilling community living for those we serve.**

**Strategy 1: To promote independence with continuing rehab after discharge**

**Strategy 2: Promote socialization and community reintegration when discharged to the home.**