

MT DPHHS State-Run Health Care Facilities

March 2023

ALVAREZ & MARSAL
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Monthly Status Update



Facility Scorecard | Overview – March 31, 2023

Legend:
Status indicates performance, as assessed by financial status, condition, and operations
Green: Acceptable Performance
Yellow: Challenges Exist
Red: Significant Deficiencies

Below is the overview of the March 2023 performance scorecard for Montana’s state-run health care facilities. To reflect the variance of performance across individual metrics by facilities, the scorecard now shows an overall status as well as targeted performance within key areas (i.e., census and staffing, budget, quality and training, and operations).

Table 1: Summary of Facility Scorecards, March 2023

Facility	Overall Status	Census and Staffing	Budget	Quality and Training Metrics	Operations
Montana State Hospital	Red	Red	Red	Yellow	Red
Montana Mental Health Nursing Care Center	Red	Red	Red	Yellow	Red
Intensive Behavior Center	Red	Red	Red	Yellow	Red
Montana Chemical Dependency Center	Yellow	Yellow	Yellow	Yellow	Yellow
Columbia Falls Montana Veterans’ Home	Yellow	Yellow	Green	Yellow	Yellow
Southwestern Montana Veterans’ Home ¹	Yellow	Yellow	Red	N/A	Yellow
Eastern Montana Veterans’ Home ¹	Red	Red	Red	N/A	Yellow

¹ DPHHS contracts out the operations of SWMVH and EMVH, and as a result does not track quality and training metrics for those facilities.

MSH | Scorecard – March 31, 2023

MSH had 11 net hires in March – the fourth consecutive month of positive net hires. MSH level of training compliance has significantly dropped as MSH has redefined the training compliance metric to include all required annual training courses for employees.

Census & Staffing¹

Status: ● Red

Indicator	February 2023	March 2023	Goal
Average Daily Census (% of 270 beds)	82.6%	81.1%	
Admissions	57	81	
Discharges	59	74	
Waitlist	67 ●	67 ●	< 12
Employee Vacancy Rate	40.2% ●	38% ●	< 15%
Employee Turnover Rate	1.6% ●	1.5% ●	< 5.0% ³
Net Employee Hires	+7 ●	+11 ●	+6

Budget – SFY23

Status: ● Red

Indicator	February 2023	March 2023	Goal
Starting Budget	\$48,873,226	\$48,873,226	
Actuals to Date	\$49,320,306	\$57,354,572	
Projected Expenses	\$94,284,997	\$94,886,143	
Variance – Budget to Projected Expenses	-\$45,411,771 ●	-\$46,012,917 ●	> \$0
Cost per Bed Day	\$1,158	\$1,187	
Revenue to Date	\$1,886,317	\$1,948,193	
Monthly Traveler Spend ²	\$3,321,226	\$4,126,745	
Percent change in Traveler Spend	-16% ●	24% ●	< -5%

Quality & Training Metrics

Status: ● Yellow

Indicator	February 2023	March 2023	Goal
% of patients evaluated for Medicaid eligibility upon admission	100% ●	100% ●	95%
Patient attendance for group therapy sessions offered	72% ●	72% ●	75%
% of completed community re-entry form within 10 days of admission	61% ●	60% ●	90%
Chemical restraint occurrence per 1000 patient days [NEW]	N/A	7.25 ●	0
Training Compliance ³	99% ●	50% ●	100%

¹Census and staffing data is aggregated for MSH across the main hospital, forensic facility (Galen) and the group homes.

²Traveler spend sometimes includes estimates when invoicing from vendors is delayed – these estimates are updated with accurate invoices as soon as those are provided, so data between reports may look different.

³ MSH has redefined level of training requirements to include annual trainings and not just onboarding training.

MMHNCC | Scorecard – March 31, 2023

Monthly gradual dose reduction attempts in antipsychotic medications increased from 7.7% to 12.0% in March. The facility's projected budget deficit significantly increased to \$1.8M for the fiscal year.

Census & Staffing

Status: ● Red

Indicator	February 2023	March 2023	Goal
Average Daily Census (% of 117 beds)	56% ●	56% ●	> 90%
Admissions	1	1	
Discharges	1	0	
Waitlist	3 ●	3 ●	< 1
Employee Vacancy Rate ¹	34% ●	33% ●	< 15%
Employee Turnover Rate ²	4.2% ●	0% ●	< 5.0%
Net Employee Hires	+0 ●	+1 ●	+4

Budget – SFY23

Status: ● Red

Indicator	February 2023	March 2023	Goal
Starting Budget	\$12,411,241	\$12,411,241	
Actuals to Date	\$7,857,259	\$8,794,087	
Projected Expenses	\$13,007,644	\$14,245,384	
Variance – Budget to Projected Expenses	-\$596,403 ●	-\$1,834,143 ●	> \$0
Cost per Bed Day	\$548	\$5600	
Revenue to Date	\$3,081,961	\$3,380,432	
Monthly Traveler Spend	\$134,648	\$172,226	
Percent change in Traveler Spend ¹	-9% ●	5% ●	< -10%

Quality & Training Metrics

Status: ● Yellow

Indicator	February 2023	March 2023	Goal
Falls with major injuries (as % of residents)	0% ●	0% ●	0%
% of patients being weighed monthly per CMS guidelines	98% ●	98% ●	100%
% of residents with a UTI against the Montana state average	3% ●	1.5% ●	< 2.9%
Monthly gradual dose reduction (GDR) attempts in residents who are using antipsychotic medications	7.7% ●	12.0% ●	> 10%
Training Compliance	85% ●	85% ●	100%

¹ Vacancy rate data may reflect a slight delay in processing hires and separations in SABHRS due to system limitations.

² The goal for employee turnover rate is being changed to < 5.0% from < 1.0%.

IBC | Scorecard – March 31, 2023

IBC continues to struggle with high employee vacancy rates, with nearly two-thirds of their positions vacant. IBC reported that 100% of behavior support plans are now being updated on a quarterly basis. IBC will introduce a new quality metric tracking total formal learning objectives for clients next month.

Census & Staffing

Status: ● Red

Indicator	February 2023	March 2023	Goal
Average Daily Census (% of 12 beds)	75%	75%	
Admissions	0	0	
Discharges	0	0	
Waitlist	13 ●	11 ●	< 1
Employee Vacancy Rate	63.6% ●	64.0% ●	< 15%
Employee Turnover Rate ²	4.2% ●	0.0% ●	< 5.0%
Net Employee Hires	+1 ●	+1 ●	+4

Budget – SFY23

Status: ● Red

Indicator	February 2023	March 2023	Goal
Starting Budget	\$2,775,188	\$2,775,188	
Actuals to Date	\$5,113,182	\$5,744,647	
Projected Expenses	\$8,698,655	\$8,930,445	
Variance – Budget to Projected Expenses	-\$5,923,467 ●	-\$6,155,257 ●	> \$0
Cost per Bed Day	\$2,648	\$2,719	
Revenue to Date	\$59,143	\$66,674	
Monthly Traveler Spend ¹	\$327,266	\$327,048	
Percent change in Traveler Spend ¹	-2% ●	0% ●	< -10%

Quality & Training Metrics

Status: ● Yellow

Indicator	February 2023	March 2023	Goal
Comprehensive behavior support plans are updated at least quarterly or based on the individual's changing needs and expected outcomes	88% ●	100% ●	100%
Total attendance at community outings	13 ●	57 ●	12
Percent of clients meeting individual Enrichment Center attendance goals	31% ●	48% ●	50%
Total formal learning objectives for each client based on hierarchy of needs [NEW]	N/A	0 ●	45
Training Compliance	96% ●	67% ●	100%

¹Traveler spend sometimes includes estimates when invoicing from vendors is delayed – these estimates are updated with accurate invoices as soon as those are provided, so data between reports may look different.

²The goal for employee turnover rate is being changed to < 5.0% from < 1.0%.

MCDC | Scorecard – March 31, 2023

MCDC remained fully staffed across direct patient care positions in March, and as a result had no traveler spend for the month. MCDC continues to struggle with low census and is currently in the process of rightsizing the facility to lower capacity.

Census & Staffing

Status: ● Yellow

Indicator	February 2023	March 2023	Goal
Average Daily Census (% of 48 beds)	48% ●	35% ●	> 90%
Admissions	26	30	
Discharges	33	30	
Waitlist	0 ●	0 ●	< 1
Employee Vacancy Rate	7.0% ●	5.3% ●	< 15%
Employee Turnover Rate ²	3.8% ●	3.5% ●	< 5.0%
Net Employee Hires	-2 ●	-1 ●	> 0

Budget – SFY23

Status: ● Yellow

Indicator	February 2023	March 2023	Goal
Starting Budget	\$6,000,763	\$6,000,763	
Actuals to Date	\$3,764,764	\$4,187,392	
Projected Expenses	\$6,331,197	\$6,694,357	
Variance – Budget to Projected Expenses	-\$330,434 ●	-\$330,434 ●	> \$0
Cost per Bed Day	\$754	\$1,079	
Revenue to Date	\$161,828	\$373,681	
Monthly Traveler Spend	\$0	\$0	
Percent change in Traveler Spend	n/a	n/a	n/a

Quality & Training Metrics

Status: ● Yellow

Indicator	February 2023	March 2023	Goal
% of discharge follow-ups, or attempts, across all discharges	100% ●	100% ●	100%
Number of discharges against medical advice (AMA)	9 ●	8 ●	< 4
Number of complete referrals to number of actual patient admissions ¹	69% ●	77% ●	85%
Average number of days from initial outreach to admission	5.41 ●	7.45 ●	< 5
Training Compliance	98% ●	99% ●	100%

¹ Because referrals towards the end of a month are sometimes admitted in the following month, numbers are updated month-to-month to reflect a more accurate percentage.

² The goal for employee turnover rate is being changed to < 5.0% from < 1.0%.

CFMVH | Scorecard – March 31, 2023

CFMVH significantly reduced waitlist by filtering our ineligible clients. Increasing average daily census remains a goal of the facility. Traveler spend decreased by 55% from February.

Census & Staffing

Status: **Yellow** ●

Indicator	February 2023	March 2023	Goal
Average Daily Census (% of 117 beds)	53.0% ●	53.0% ●	> 90%
Admissions	2	6	
Discharges	4	5	
Waitlist	136 ●	30 ●	< 15
Employee Vacancy Rate	25.5% ●	27% ●	< 15%
Employee Turnover Rate ²	4.5% ●	2% ●	< 5.0%
Net Employee Hires	-1 ●	0 ●	> +4

Budget – SFY23

Status: **Green** ●

Indicator	February 2023	March 2023	Goal
Starting Budget	\$14,997,323	\$14,997,323	
Actuals to Date	\$7,802,995	\$9,123,951	
Projected Expenses	\$14,735,475	\$14,555,842	
Variance – Budget to Projected Expenses	\$261,848 ●	\$441,481 ●	> \$0
Cost per Bed Day	\$651	\$643	
Revenue to Date	\$2,065,434	\$2,260,067	
Monthly Traveler Spend ¹	\$472,311	\$214,042	
Percent change in Traveler Spend ¹	+14% ●	-55% ●	< -10%

Quality & Training Metrics

Status: **Yellow** ●

Indicator	February 2023	March 2023	Goal
All patients that have a risk of falls are identified and risk interventions are put in place	100% ●	100% ●	100%
Number of UTIs per month	12% ●	14% ●	0
Use of antianxiety medications	34% ●	25% ●	25%
Medication Errors	4% ●	4% ●	< 5%
Training Compliance	89% ●	89% ●	100%

¹Traveler spend sometimes includes estimates when invoicing from vendors is delayed – these estimates are updated with accurate invoices as soon as those are provided, so data between reports may look different.

²The goal for employee turnover rate is being changed to < 5.0% from < 1.0%.

SWMVH & EMVH | Scorecard – March 31, 2023

SWMVH waitlist increased to 15 in March. Census remains low at both facilities.

Because SWMVH and EMVH are run by state contractors, we do not track data on staffing, quality measures, or training compliance. We also do not track certain budget components including traveler spend, cost per bed day, and revenue to date.

SWMVH Scorecard

Census
Status: **Yellow** ●

Indicator	February 2023	March 2023	Goal
Average Daily Census (% of 60 beds)	76.7% ●	76.7% ●	> 90%
Admissions	4	0	
Discharges	4	1	
Waitlist	10 ●	15 ●	< 15

Budget – SFY23
Status: **Red** ●

Indicator	February 2023	March 2023	Goal
Starting Budget	\$2,995,743	\$2,995,743	
Actuals to Date	\$1,797,086	\$2,292,534	
Projected Expenses	\$4,398,729	\$4,823,363	
Variance – Budget to Projected Expenses	-\$1,402,986 ●	-\$1,828,620 ●	> \$0

EMVH Scorecard

Census
Status: **Red** ●

Indicator	February 2023	March 2023	Goal
Average Daily Census (% of 80 beds)	68.8% ●	71.3% ●	> 90%
Admissions	3	5	
Discharges	2	3	
Waitlist	3 ●	5 ●	< 15

Budget – SFY23
Status: **Red** ●

Indicator	February 2023	March 2023	Goal
Starting Budget	\$4,511,074	\$4,511,074	
Actuals to Date	\$2,405,326	\$3,779,423	
Projected Expenses	\$5,958,658	\$5,976,274	
Variance – Budget to Projected Expenses	-\$1,447,584 ●	-\$1,465,200 ●	> \$0

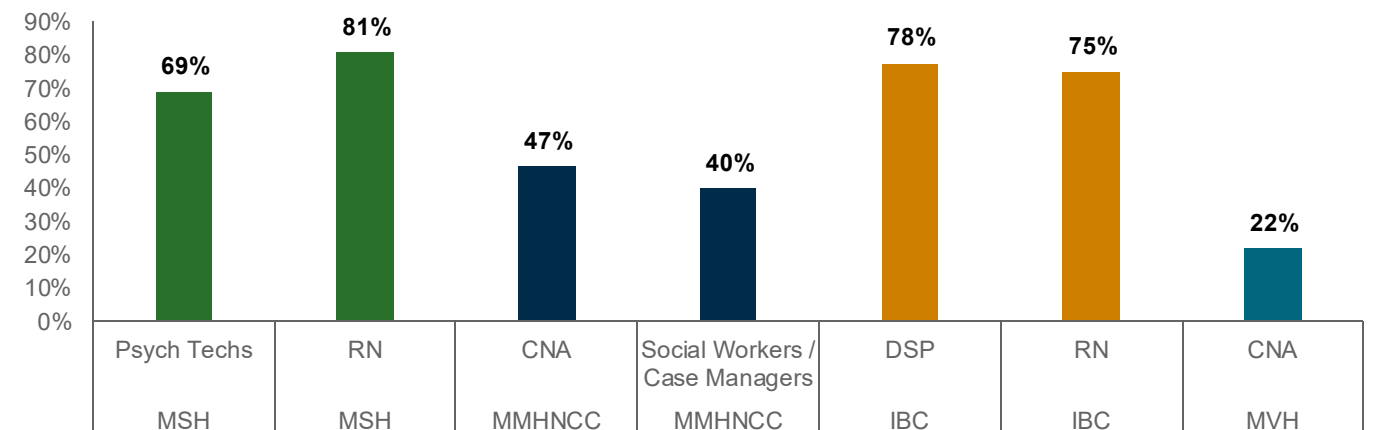
Facilities Workforce Development & Hiring Updates | March 2023

This month, facilities launched a workforce development taskforce which is focused on expanding outreach to target colleges & universities, increasing digital footprint to market open job positions to online job boards, exploring options for nursing teaching site partnerships, improving the efficiency of the interview process, and improving employee retention through coordinated efforts.

Workstream	Progress so far
Increasing Candidate Pool	<ul style="list-style-type: none"> Had calls with MSU-Missoula, Montana Tech, Salish Kootenai College, and Carroll College, and reached out to several additional colleges, including MSU-Bozeman, Missoula College, and Helena College, to explore potential nursing rotation partnerships with colleges and the various state facilities. Registered MVH to attend a career fair at Salish Kootenai College. Continued CNA trainee classes at MMHNCC and MVH. Reclassified MMHNCC Social Worker positions as case workers to reduce educational barriers to job acceptance. Reached out to Montana Department of Labor to begin assessing the feasibility of CNA registered apprenticeships at the facilities.
Advertising & Outreach Opportunities	<ul style="list-style-type: none"> Attended in-person career fairs at Montana Tech, Missoula College, Carroll College, and Butte High School, as well as a virtual fair with MSU-Billings, to advertise positions at the facilities. Reached out to colleges and high schools to share job postings. Posted flyers at local businesses and schools near facilities. Began posting open job postings to digital job boards such as LinkedIn and Handshake
Candidate Experience Improvement	<ul style="list-style-type: none"> Held focus groups at MSH and MMHNCC with RNs, CNAs, and Psychiatric Technicians to get insights into current recruitment processes and opportunities for improvement from a staff perspective. Solicited feedback from staff hired in the last six months through a new hire survey to assess areas of opportunity in the recruitment process. Circulated guides to better assist candidates through the state website application process, based on feedback from staff and the survey.
Employee Retention	<ul style="list-style-type: none"> DPHHS is conducting a feasibility assessment for retention incentives to go alongside hiring and referral incentives, to improve state employee retention.

Data Snapshot: March 2023							
Facility	Priority positions	# of Applicants	# of Interviews	# of Offers extended	# of Offers Accepted	# of New Hires	# of Separations
MSH	Psych Tech	15	9	8	6	6	2
	RN	0	0	0	0	0	0
NCC	CNA	3	1	0	0	0	0
	CNA Trainees ¹	3	0	0	0	n/a	n/a
IBC	DSP	2	2	0	0	1	1
	RN	0	0	0	0	1	1
MVH	CNA	3	1	1	1	1	1
	CNA Trainees	0	0	1	1	n/a	n/a

Vacancy Rates in Priority Positions - March 31, 2023



¹ Next CNA Trainee course begins on 4/24/23

Wins & Challenges (1 of 3) | March 31, 2023

Legend:
 Status indicates performance, as assessed by financial status, condition, and operations
Green: Acceptable Performance
Yellow: Challenges Exist
Red: Significant Deficiencies

Facility	Operations Status	Current Operational Challenges	Wins this Month
MSH		<ul style="list-style-type: none"> More work needed to analyze data and identify patterns and trends to drive quality initiatives. High vacancy rates continue, particularly for direct care staff. Contractors/travelers are being used to cover vacancies. Contract staff spend has continued to increase, and projected expenses for FY23 exceed the budget significantly. There are opportunities to improve discharge planning and active treatment. <i>Climate and Culture Survey:</i> Employees reported low satisfaction with recognition, support, development, and salary. 	<ul style="list-style-type: none"> The facility exceeded its net hires goal for the third month in a row, and five Psychiatric Technicians were hired. MSH hired & onboarded a new facility administrator.
MMHNCC		<ul style="list-style-type: none"> Limited active behavioral health treatment. There appears to be over-reliance on particular treatment modalities. Lack of practice guidelines for psychotropic medication use. The employee vacancy rate remains high at the facility, and direct patient care staffing remains an issue for the facility. <i>Climate and Culture Survey:</i> Employees reported low satisfaction with workload, recognition, support, development, and salary. MMHNCC continues to experience excessive sick leave and staff call offs. 	<ul style="list-style-type: none"> The facility hired a Food Service Worker. Launch of new employee committee to support newly hired staff as they transition into their new roles. State Surveyor issued facility a CMS 2567 statement of deficiencies and plan of correction. NCC submitted and received approval on a plan of correction which would remedy all deficiencies by March 13th.

Wins & Challenges (2 of 3) | March 31, 2023

Legend:
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Red: Significant Deficiencies

Facility	Operations Status	Current Operational Challenges	Wins this Month
IBC	Red	<ul style="list-style-type: none"> Continued high staff vacancy rates, slow hiring, and travel staff to cover. Onboarding of new state employees continues to be a slow, resource-intensive process. Behavior Clinician announced their resignation. Ongoing negotiations for a new food contract have been delayed, facility continues to order food or cook on campus. Physical plant needs upgrades. Continued challenges with delivery of active treatment. Facility director identified issues with current staff training and orientation. A new process is being developed. Environment continues to have an institutional feel. 	<ul style="list-style-type: none"> Enrichment Center classes were developed and began operation on March 13th. The facility was able to identify community placement two current clients. Printed the first edition of a client-produced newsletter. New Director of Nursing was successfully onboarded. All client rooms were deep cleaned, and new furniture was purchased for all units Client social outings have tripled for the month of march, and more client outings are scheduled for next month.
MCDC	Yellow	<ul style="list-style-type: none"> Overall census and occupancy remains low. Barriers affecting census include patients leaving treatment prior to completion and scheduled admissions not arriving. Continuing to work on ways to improve census. Discharges against medical advice (AMAs) remain high. Facility experienced COVID outbreak with positive results for 1 patient and 4 staff. 	<ul style="list-style-type: none"> 100% staffed across the facility with direct care staff – as a result, there was no traveler spend between November and March. Continued collaboration with Office of American Indian Health to increase supports with native population. Filled vacancies in 3 key roles: RN in a per diem position, an administrative assistant and treatment technician. Prior patient was a keynote speaker at an event where the former patient spoke about their journey to sobriety. Staff attended presentation on Connect Resources, an online referral system used by many healthcare providers.
CFMVH	Yellow	<ul style="list-style-type: none"> Difficulty filling vacant positions. Vacancies are hard to fill due to local health care competition. Currently have 36 open positions, 20 of which are CNA positions. Lack of affordable housing. Low census and high waitlist numbers. 	<ul style="list-style-type: none"> Facility was identified by US News & World Report as a high performing facility, and in the top 16 percent of nursing homes nationwide. Hired two new RNs. Recorded 6 new admissions to the facility and decreased waitlist by removing unqualified candidates. Reduced monthly traveler spend by 55% since February.

Wins & Challenges (3 of 3) | March 31, 2023

Legend:
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Facility	Operations Status	Current Operational Challenges	Wins this Month
SWMVH	Yellow	<ul style="list-style-type: none"> Cottages 4 and 5 are not VA licensed due to ongoing construction. Estimated projected completion date is June 2023. Cottage 5 will require staffing to open. Several facilities and equipment issues have been identified which will require repairs including stoving, ice machines and plumbing. FY23 projected expenses currently exceed the budget for the year. Census numbers remain low at 77% of capacity, falling short of the 90% goal. 	<ul style="list-style-type: none"> Facility staff participated in a planning committee for a Community Activity in May for Seniors in the area. Residents and staff participated in St. Patrick's Day Parade. New Radio Ads were recorded and are playing on local radio stations
EMVH	Yellow	<ul style="list-style-type: none"> The facility remains without a permanent full-time Administrator. The position is being advertised by the new operator. The Exterior Fascia and Roof project public bid process received 3 bids from contractors but has not yet been awarded. The roof continues to leak. The Interior Remodel project public bid process only received 1 bid from a contractor and was \$200,000 over budget for the project. Options being considered are to rebid which will cause further delay in spending the awarded ARPA funds, or to reduce the project cost by removing planned elements from the project. The facility remains out of compliance following the February CMS recertification, and the new contractor is working through the Plan of Correction process will likely end in a revisit survey in early April. The facility continues to use a hybrid health record system which is mostly paper and an antiquated electronic record. This negatively impacts efficiency and may be contributing to error potential. 	<ul style="list-style-type: none"> Eduro Healthcare is assumed operations fully on March 1st. The facility was able to hire 6 new CNAs, an Assistant Director of nursing, Director of Social Services, Director of Activities, Director of Support Services, and a Business Office Manager EMVH foundation agreed to purchase new furniture for the Special Care Unit day room, Direct TV service for all residents, and barber services for all residents.
Overall, all DPHHS facilities	Yellow	<ul style="list-style-type: none"> Lack of electronic health records system makes it difficult to track patient quality and safety measures. Immature HR, Finance, and IT services across all facilities. Lack of quality improvement programs. Lack of ability to recruit experienced full-time employees. Lack of clinical leadership, and other human resources at the Division level. 	<ul style="list-style-type: none"> Alvarez & Marsal's report was published in December and was shared with stakeholder groups, including non-profit partners, unions, and facilities staff. The recommendations of the A&M report was presented Montana State Legislature at the beginning of January. DPHHS launched workforce development task force aimed at lowering vacancies across facilities and improving employee retention.

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