

# Flex Monitoring Team



A Performance Monitoring Resource for Critical Access Hospitals, States, & Communities

## COVID-19 Response in System-Owned and Independent CAHs

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# Background - COVID-19 & CAH Challenges

- COVID-19 affected CAHs differently
  - Exacerbated financial vulnerability
  - Intensified health care professional shortages
- COVID-19 trends were different in rural areas



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# Background - System Ownership

- System-owned CAHs reported assistance with resources was biggest impact of affiliation
- Independent CAHs reported mixed responses, with some positive and some negative impacts
- In general, system-owned CAHs associated with higher profitability and higher average salary per FTE

# Purpose

How do independent CAHs compare to system-owned CAHs in their response to COVID-19, specifically in the areas of workforce and staffing, emergency management, and patient transfers?

# Survey Design

- Survey fielded March-May 2022
- Covered three main topics: workforce, emergency management, and patient transfers
- Selected random sample of CAHs in each of the four census regions
- Started with email survey, followed up via phone reminders

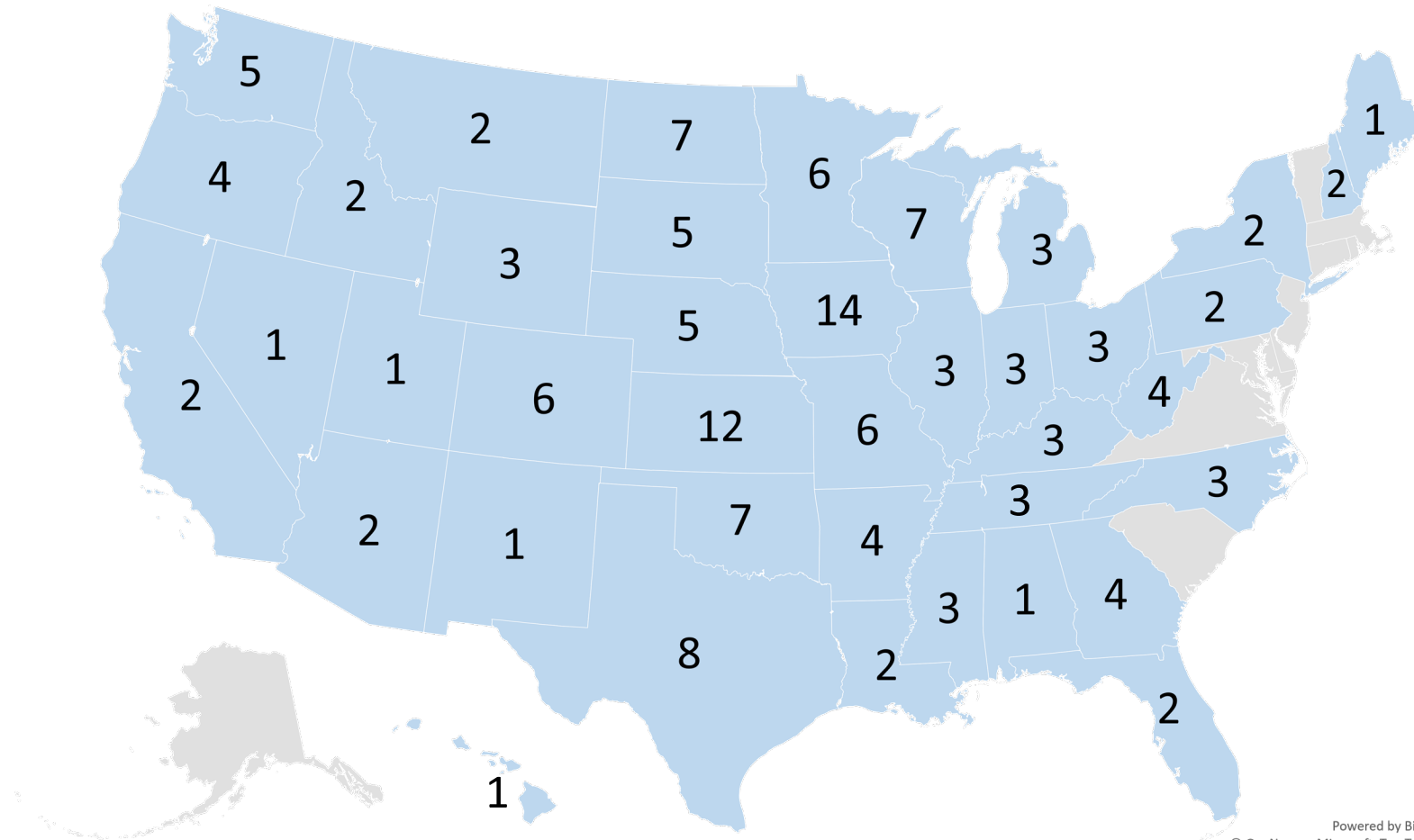
# Survey Response Overview

- 155 Respondents (38%)
- Type of respondents:
  - 72% CEOs
  - Others included DONs, Infection Control, Operations, and Quality
- System ownership:
  - 25% owned by a hospital system
  - 75% independent



Survey by [Nick Youngson](#) CC BY-SA 3.0 Pix4free

# CAH Respondents by State



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# System-owned CAHs (n=39)

## Advantages

- Physical resources and supplies (25)
- Transfers (18)
- Consistent policies (17)
- Staffing resources (8)

## Disadvantages

- Bed availability (9)
- Staffing resources (9)
- Transfer challenges (7)
- Limited autonomy (7)
- Physical resources and supplies (7)



# Independent CAHs (n=119)

## Advantages

Local and timely decision making:

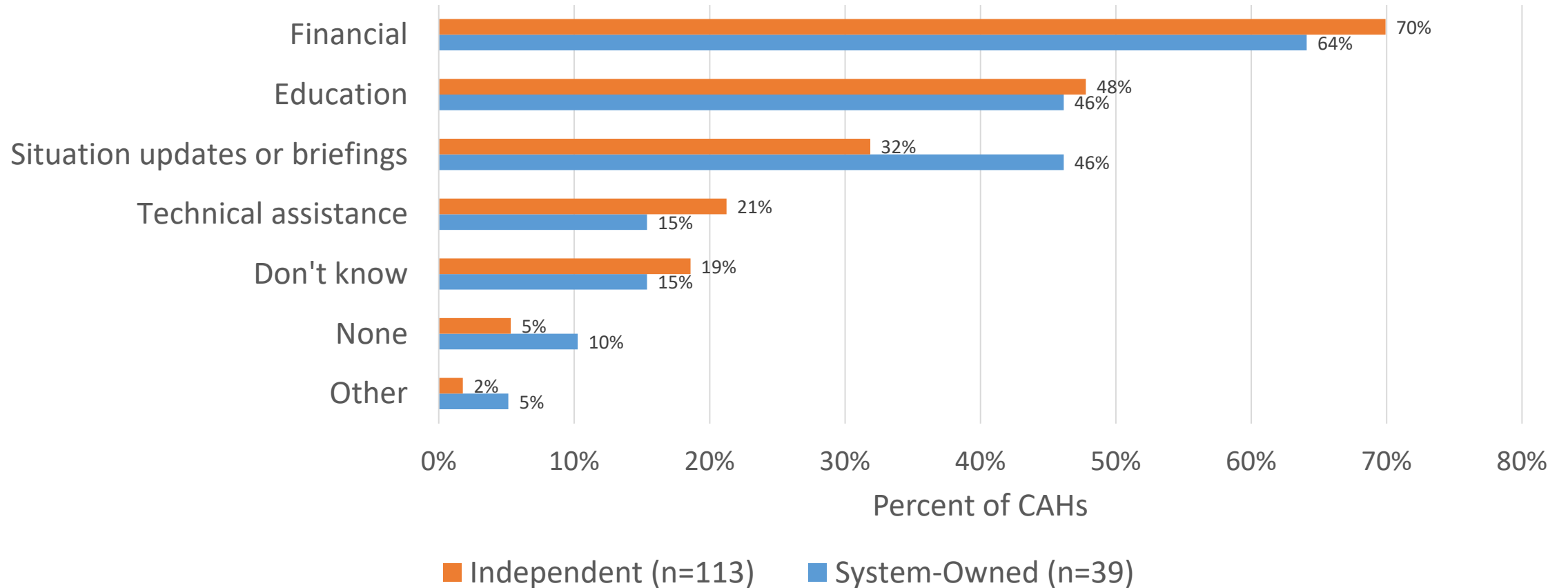
- Staffing (20)
- Adapting processes, procedures, and hospital services (18)
- Supply allocation and purchasing (13)
- Communication (7)

## Disadvantages

- Staffing challenges (48)
- Lack of physical resources (46)
- Patient transfers (42)
- Lack of support (10)
- Response best practices (8)

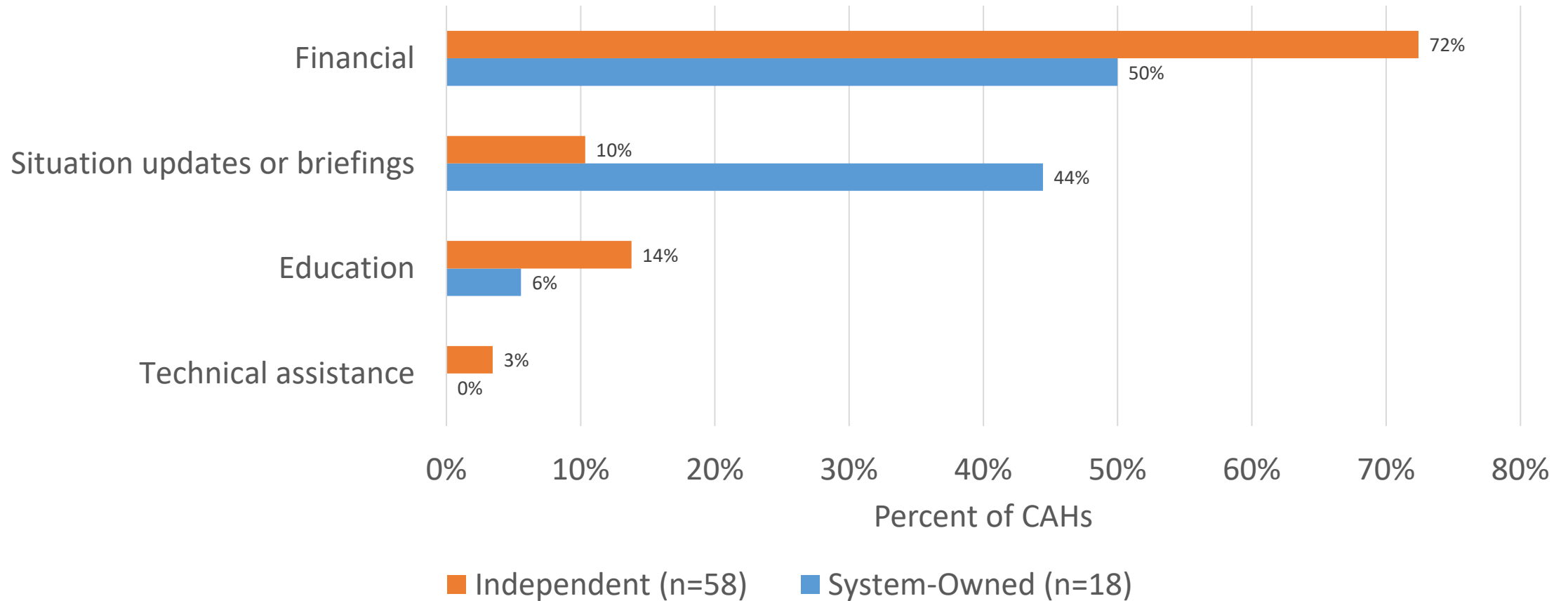
# Flex Support

## Type of Flex Support Received by System Affiliation



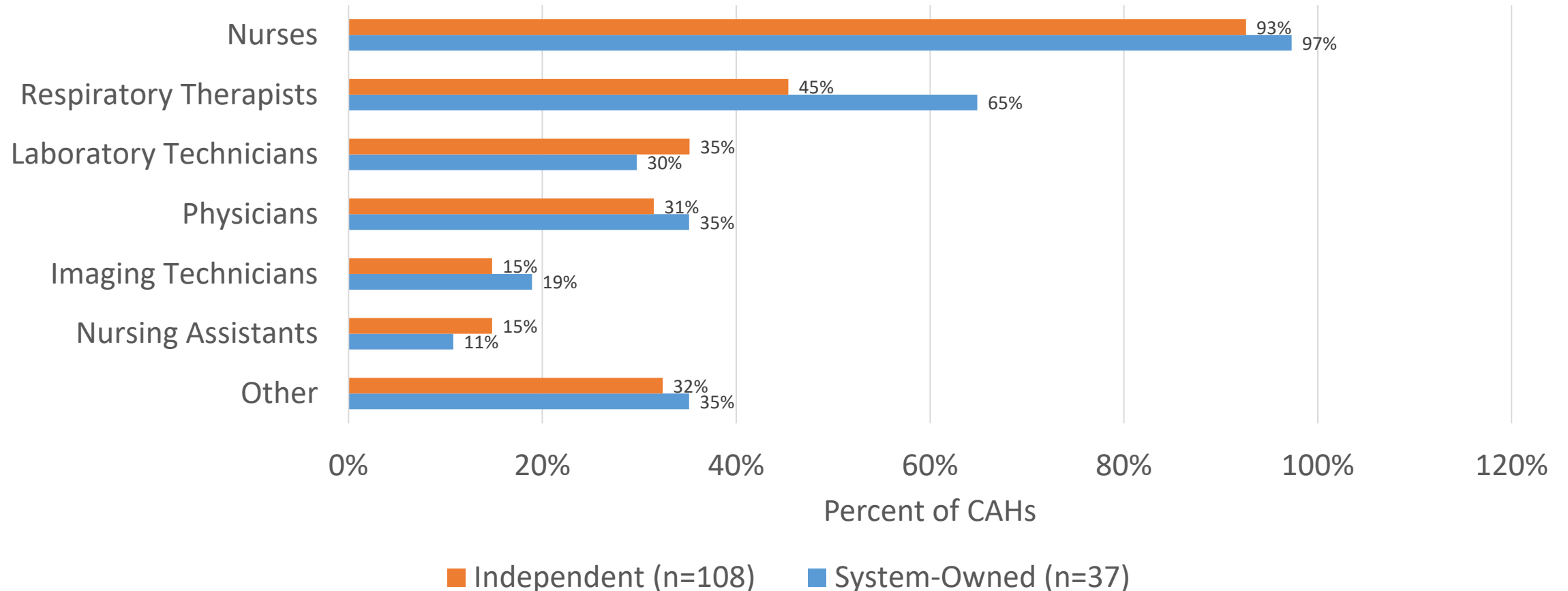
# Flex Support

## Most Helpful Flex Support by System Ownership



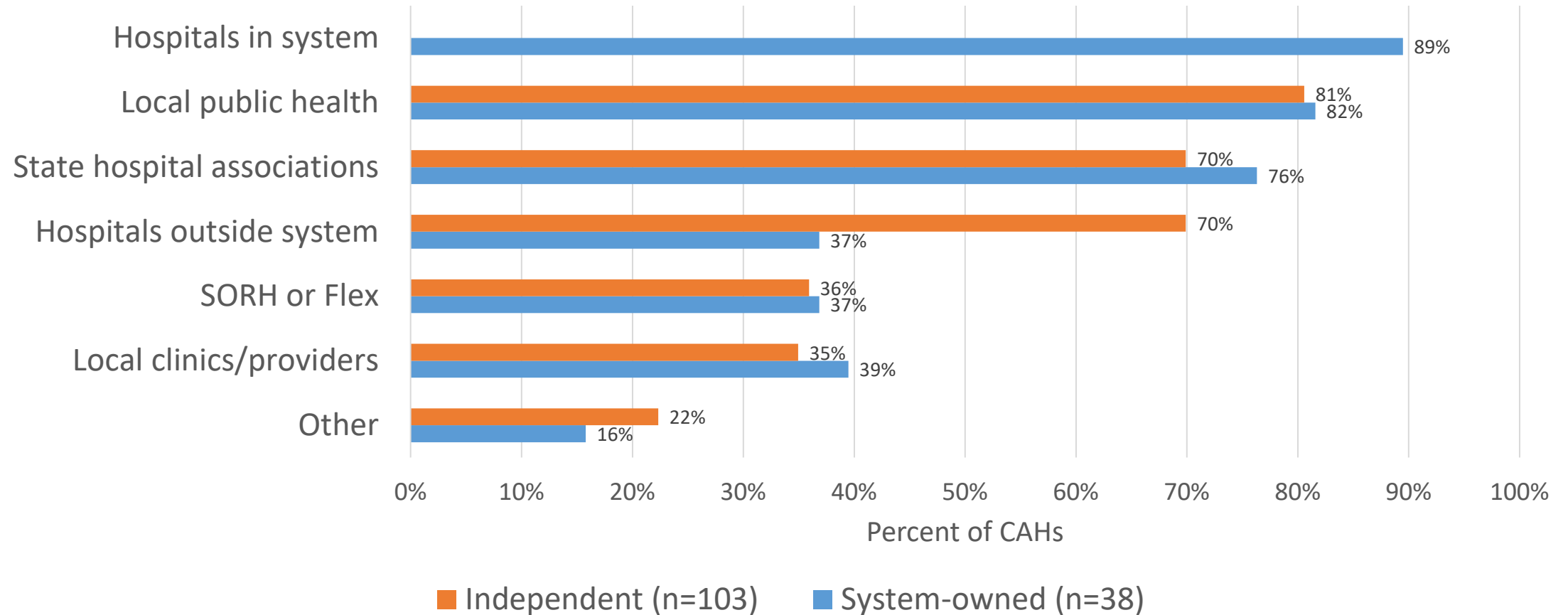
# Workforce – Recruiting Challenges

## Staff Positions Challenging to Recruit by System Ownership



# Partnerships

## Partnerships for Emergency Management by System Ownership



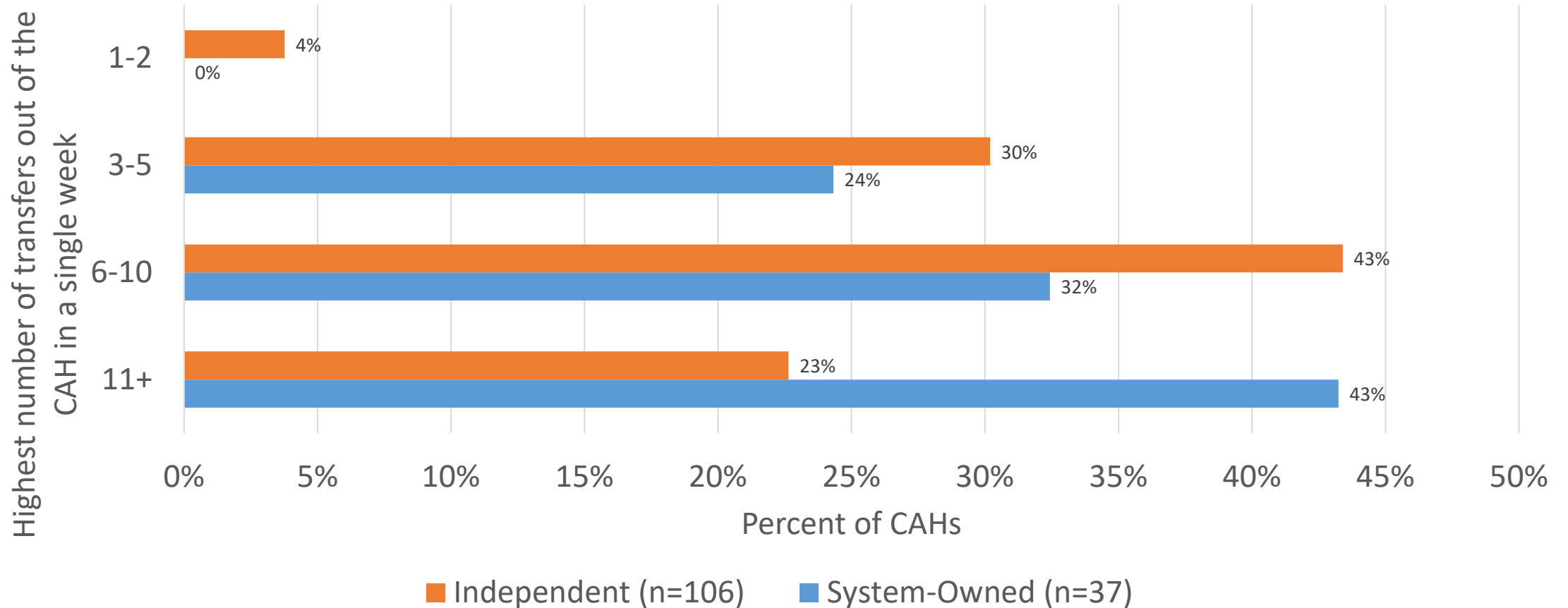
# Partnerships

*“One of the positives of the pandemic is our area Critical Access hospitals have worked closer together than ever before. CEO's from 5 different hospitals- competitors - get together via zoom once a week to go over issues and learn from each other.*

*We have also done joint marketing for example on masking and vaccinations. It's common for our infection control nurses, CNO's, and others to collaborate and share.”*

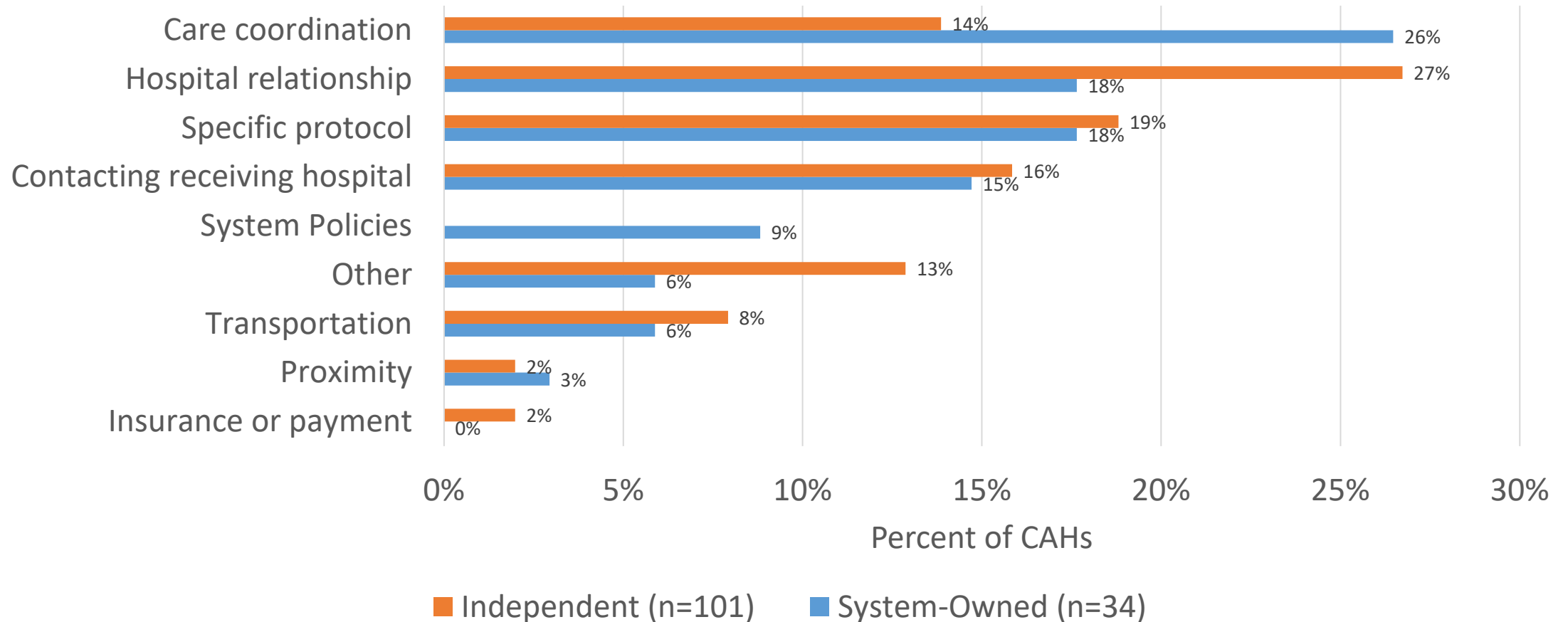
# Patient Transfers- Outbound

## Outbound Transfer Volume by System Ownership



# Patient Transfers- Outbound

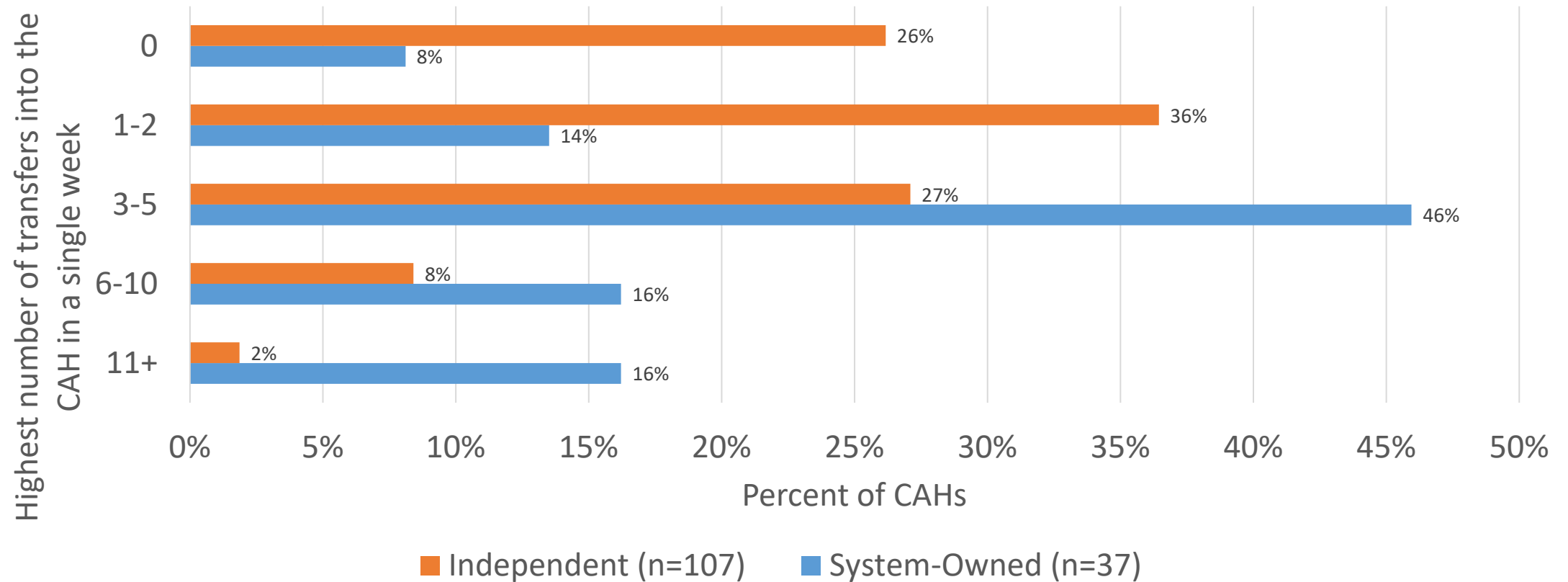
## Facilitators for Outbound Transfers by System Ownership





# Patient Transfers - Inbound

## Inbound Transfer Volume by System Ownership



# Patient Transfers

*“We had very standardized processes and policies in place throughout the system. We had access to a Division Transfer Center that assisted with transferring patients to a higher level of care.”*

*“I also made it a priority to work with the larger hospitals in our service area to minimize the difficulties associated with medical transfers. We also reminded them we had skilled nursing beds and we had the capacity to take on some of their lower acuity patients when they reached bed capacity. Kind of a reverse transfer strategy”*

# Key Takeaways

- There weren't as many big differences between system-owned and independent CAHs as expected
- Flex Support – financial support more helpful to independent CAHs
- Workforce challenges – Respiratory Therapists more difficult for systems
- Partnerships – both worked with other hospitals
- Transfers – system CAHs more likely to select higher transfers out; independent CAHs more likely to have 0 or very few transfers in

# Key Takeaways

*“We did our best. Our staff who stayed are exceptional people. We are here for our community and will stop at nothing to stay open.”*

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# Thank you!

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