Operational Excellence

Aligning direction, goals, and objectives while empowering and enabling the frontline teams to own and drive improvement bottom up to allow leaders and managers to coordinate larger changes.

Key Elements for Ops Excellence

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People
- Recruitment / Onboarding
- HPPD- Nursing and Therapy
- Staffing Matrix

Leveraging Data/KPIs
- Performance against Budget
- Internal/External Data and Benchmarks
- Tools: Census, Metric Reports, Productivity Reports

Communication
- Committee Structure
- Meetings
- Tools: Minutes, Dashboards, Scorecards, Newsletters

Governance
- Policy and Procedures
- Bylaws
- Regulatory Compliance

Quality/Continuous Improvement
- Focus Projects
- Survey Readiness
- QAPI

Strategic Planning
- Risk Assessments/ Audits
- SWOT Analysis
- Personal Network
- Program Development

People- Challenges

The average cost of turnover for a single bedside RN is $61,110, and it takes about 3 months to fill a clinical role.

2025 NSI National Health Care Retention & RN Staffing

High turnover: Employees who feel lost or unsupported tend to leave faster—often within the first 90 days.

Productivity delays: Without clear instruction, it takes longer for new hires to contribute effectively.

Compliance risks: If staff don't fully understand policies, procedures, or regulations, it opens the door to costly compliance issues.

Poor patient experiences: Confused or disengaged employees can impact service quality, leading to patient dissatisfaction or even negative reviews.

People- Recruitment Best Practice

You can't afford to lose good people, and you can't afford to hire slowly. You need proven talent acquisition strategies. that allow you to meet ratios without cutting corners on quality.

| 01 STRENGTHEN EMPLOYEE BRANDING | 02 OPTIMIZE MOBILE AND TEXT RECRUITING | 03 PRIORITIZE COMPLIANCE AND CREDENTIAL VERIFICATION | 04 LEVERAGE INTERNAL TALENT POOLS | 05 IMPLEMENT EFFECTIVE EMPLOYEE REFERRAL PROGRAMS | 06 USE SOCIAL MEDIA AND NETWORKING CHANNELS |

People- Onboarding Best Practice

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Days 1-30

- Welcome and HR orientation
- Overview of systems, tools, and policies
- Initial role-specific training
- Assigned mentor or peer buddy
- Short-term goals set with manager

Days 31-60

- Deeper training on job responsibilities
- Hands-on practice with support
- Introduction to department leads
- First performance check-in and feedback session

Days 61-90

- Independent task handling
- Continued mentorship
- Final onboarding review
- Personal development plan creation

IRF Boot Camp 2025

Hours Per Patient Day- NHPPD

NHPPD- Total Nursing hours per patient day

Variables

- Patient acuity
- Skill level of staff
- Support from other team members and departments
- Efficiency of clinical documentation

TX HPPD- Total Therapy hours per patient day

Variables

- Patient acuity
- Skill level of staff
- Individual vs. Group therapy
- Efficiency of clinical documentation

$$\text{ALL Nursing Staff Hours per Patient Days (NHPPD)} = \frac{\text{Total Number of Productive Hours Worked by ALL Nursing Staff}}{\text{Total Number of Patient Days}}$$

Key Performance Indicators (KPIs)

Patient Satisfaction

Employee Engagement/Turnover Rate

Functional Improvement/ GG

Discharge Destination

Census

CMI

Admit Motor GG Score

LOS Management

Comorbidity Tier Levels

3 Hours of Therapy

60% Compliance

Net Revenue per Patient Day

Financial Performance to Budget

Payor Efficiency

Nursing Hours Per Patient Day

Therapy Hours per Patient Day

The KPI Creation Flow

Company Vision

Strategic Objective

Organization KPI

Team Operational KPI

Individual Operational KPI

Strategic Use of Data

Strategic use of data to gain a competitive advantage and improve business and patient outcomes is key to being a successful leader.

- One month a trend does not make

- Weight adjusted clinical KPIs

- Need measurable targets/benchmarks to determine success/opportunity

- Cut data and reports to "chewable bites" that are directed toward specific audiences.
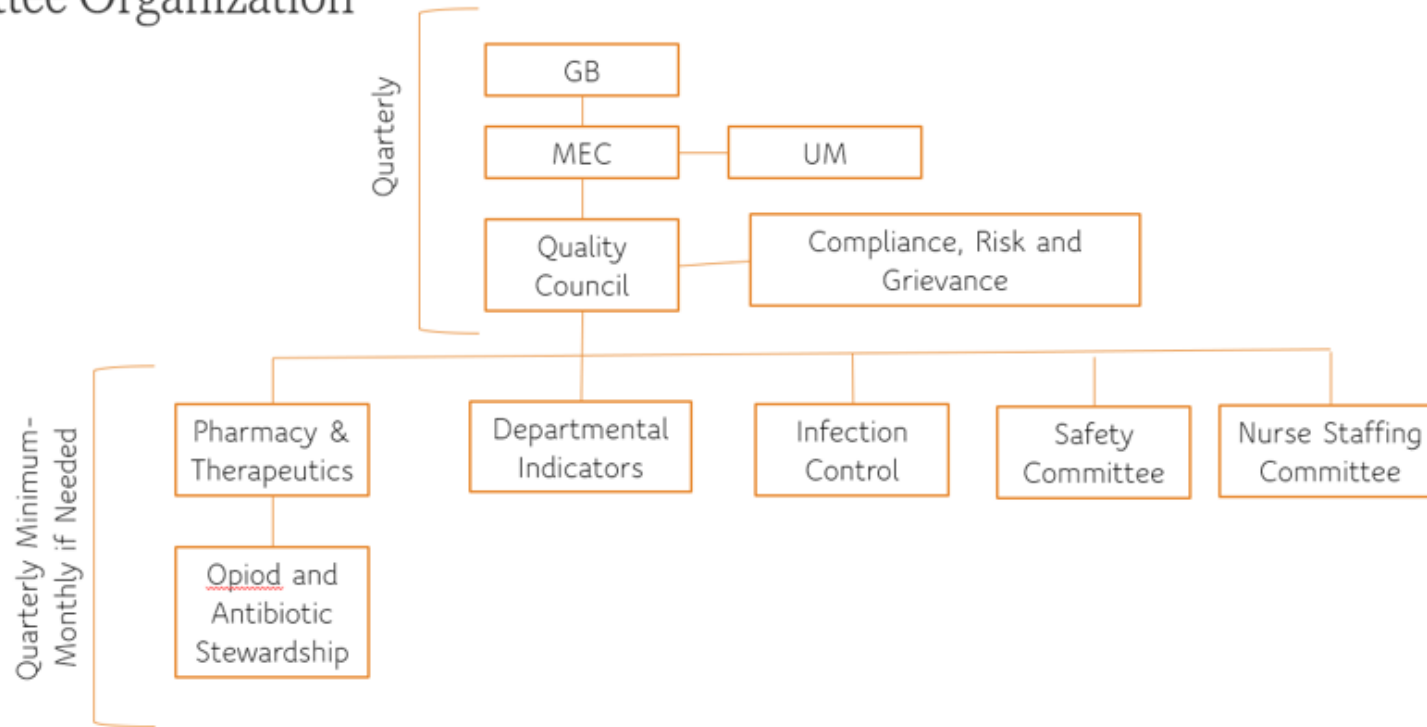
Communication-Meetings

- Leadership and Governance Committees/ Minutes
- Leadership Team Meetings
- Department Manager Meetings
- Morning Huddle/Daily Ops
- Shift Huddles
- Town Hall Meetings
- Surveys
- Newsletters

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Importance of Committee Structure

Committee Organization

Committees play an important role in governance and leadership decision making in the hospital.

Structure-
- Committee Size/Membership
- Meeting Frequency
- Set Calendar sample agenda and minutes

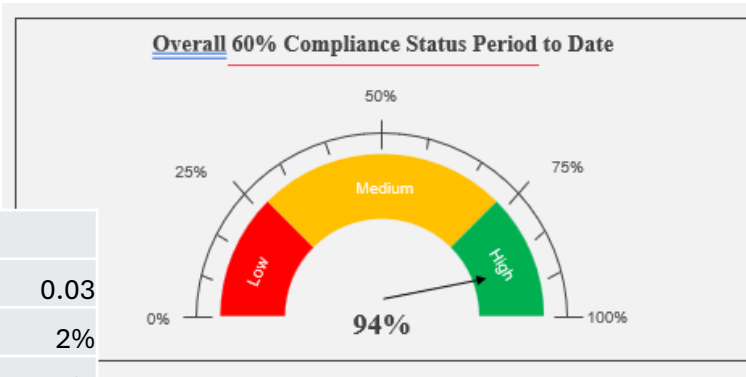**Presentation-**
- Agenda
- Pre-Meeting Packets

Meeting-
- Actions/Recommendations

Post Meeting-
- Minutes
- Communicate new action items appropriately.

Tools

All Payors	Jan	Budget	Var
CMI	1.45	1.48	0.03
DC Community	80%	78%	2%
ACT	10%	11%	-1%
SNF	10%	11%	-1%
Motor Subscale	47	48	-1%
PT Sat	80%	85%	-5%
3 Hr. Compliance	94%	95%	-1%

Overall 60% Compliance Status Period to Date

50%
25%   Medium   75%
Low   High
0%   100%
94%

Key Performance Indicators

Discharges in Sample		Details	Facility	Weighted National	Unweighted National
Case Mix Index			178		52968
Average Medicare Expected Reimbursement			1.4894		1.5050
Co-morbidity Distribution (in tiers) - Total			$27,730.93	$27,193.61	$27,095.65
Tier 0					
Tier 1			29.21% (52)		27.96% (14810)
Tier 2			4.49% (8)		6.30% (3337)
Tier 3			16.29% (29)		11.60% (6144)
CMG GG/H Admission (w/o inc.)			50.00% (89)		54.14% (28677)
CMG GG Admission (Walk/Wheel) (w/o inc.)	Graph		44.82	45.41	46.78
CMG GG Discharge (Walk/Wheel) (w/o inc.)	More		40.08	40.17	41.53
CMG GG Change (Walk/Wheel) (w/o inc.)	More		75.36	74.64	74.98
Average Length Of Stay	More		35.28	34.47	33.45
Community Discharges			11.57	13.59	13.53
SNF/Subacute Discharges			80.34% (143)	77.27%	77.48% (41040)
Acute Unit Discharges			10.11% (18)	12.19%	11.60% (6146)
Transfer Patients	More		8.99% (16)	9.92%	10.34% (5478)
Short Stays			10.67% (19)	14.15%	14.20% (7522)
			1.69% (3)	0.93%	1.02% (542)

Time Period		
CMI	01/01/2024 - 01/31/2024	02/01/2024 - 02/29
Patient Days	1.41	1.41
	933	982
Utilization of Resources	January	February
Pharmacy Costs per patient day		
Lab Costs per Patient Day		
Radiology Costs per Patient Day		
Equipment Rental Costs per Patient Day		
Medical Supply Costs per Patient Day		
Transportation Costs per Patient Day		
Number of Outside Services		
Medical Necessity	January	February
Admission Denials (%)		
Claim Denials (%)		
Continued Stay Denials (%)		

INFECTION CONTROL MINUTES
<<DATE>>

Attendees: <LIST NAMES>

TOPIC	DISCUSSION	ACTION ITEMS/ FOLLOW UP	TARGET DATE	RESPONSIBLE PERSON
	Name of person who calls the meeting to order and the time			
	NEW BUSINESS			
Review of Minutes	The minutes from the following meetings were reviewed.	A motion was made and seconded and all members approved the minutes of meetings as written.		
Old Business	List progress on any action items that were assigned during last meeting- identify if they are complete, ongoing, etc.	List any ongoing actions needed.		
	List progress on any action items that were assigned during last	List any ongoing and/or new actions		

Governance

Policy and Procedures- Hospital policies and procedures are crucial for **patient safety, quality of care, and operational efficiency**. They provide a framework that standardizes practices, ensures regulatory compliance, reduces medical errors, and establishes accountability for staff, ultimately creating a more reliable and safe environment for patients and staff.

Medical Staff Bylaws- Think of medical staff bylaws as the rulebook for how a healthcare organization's medical team operates.

Governing Body Bylaws- Governing Bodies have three primary roles: establishing policies, making strategic decisions, and overseeing the healthcare organization's financial, operational and quality.

Quality- Continuous Improvement

CMS hospital requirements for a Quality Assessment and Performance Improvement (QAPI) program include having a comprehensive, ongoing, and data-driven system to monitor and improve patient care, which is overseen by the governing body. The program **must cover all services**, involve staff, and be based on five key elements: Design and Scope, Governance and Leadership, Feedback/Data Systems, Performance Improvement Projects, and Systematic Analysis.

- Quality Indicators

- Focus Projects

- QRP- Mandatory Reporting (2% penalty)

- Constant Survey Readiness

- Reduction of Acute Care Transfers (TEAMS)

Strategic Planning

- Risk Assessments
- SWOT Analysis
- Audits- Internal and External
- Program Development

Risk Assessment Matrix

Likelihood	5	Medium/High	Medium/High	High	High	High
	4	Low / Medium	Medium/High	Medium/High	High	High
	3	Low / Medium	Low / Medium	Medium/High	Medium/High	High
	2	Low	Low	Low / Medium	Low / Medium	Medium/High
	1	Low	Low	Low	Low / Medium	Medium/High
		1	2	3	4	5

Effect

WHY ARE INTERNAL AUDITS IMPORTANT?

Ensures Compliance   Reduces Risks   Drives Improvement

	Helpful	Harmful
Internal	**STRENGTHS** — What do we do best?	**WEAKNESSES** — In what areas do we receive the most complaints?
External	**OPPORTUNITIES** — What opportunities are available to you?	**THREATS** — What trends, conditions, or competitors pose a threat to us?

Honorable Mentions