



Minnesota 2024 Critical Access Hospital Quality Inventory and Assessment Results

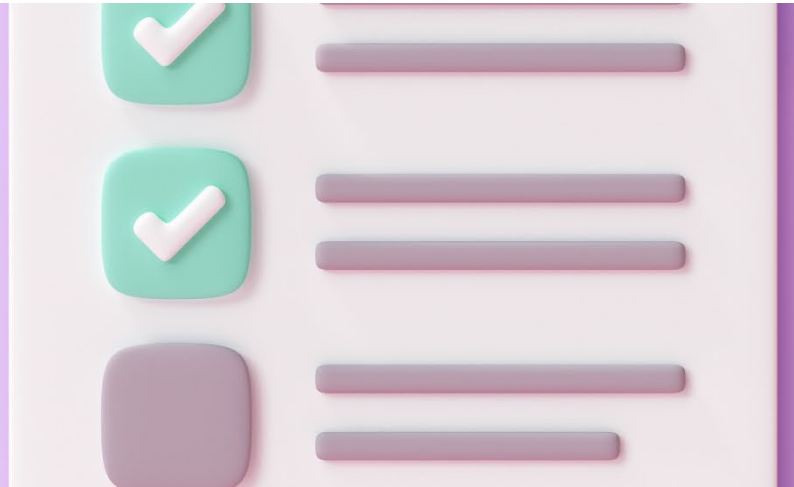
Introduction

CAH Information

Service Lines

CAH Facility Data Summary – Infrastructure

Payment and Demonstration Models



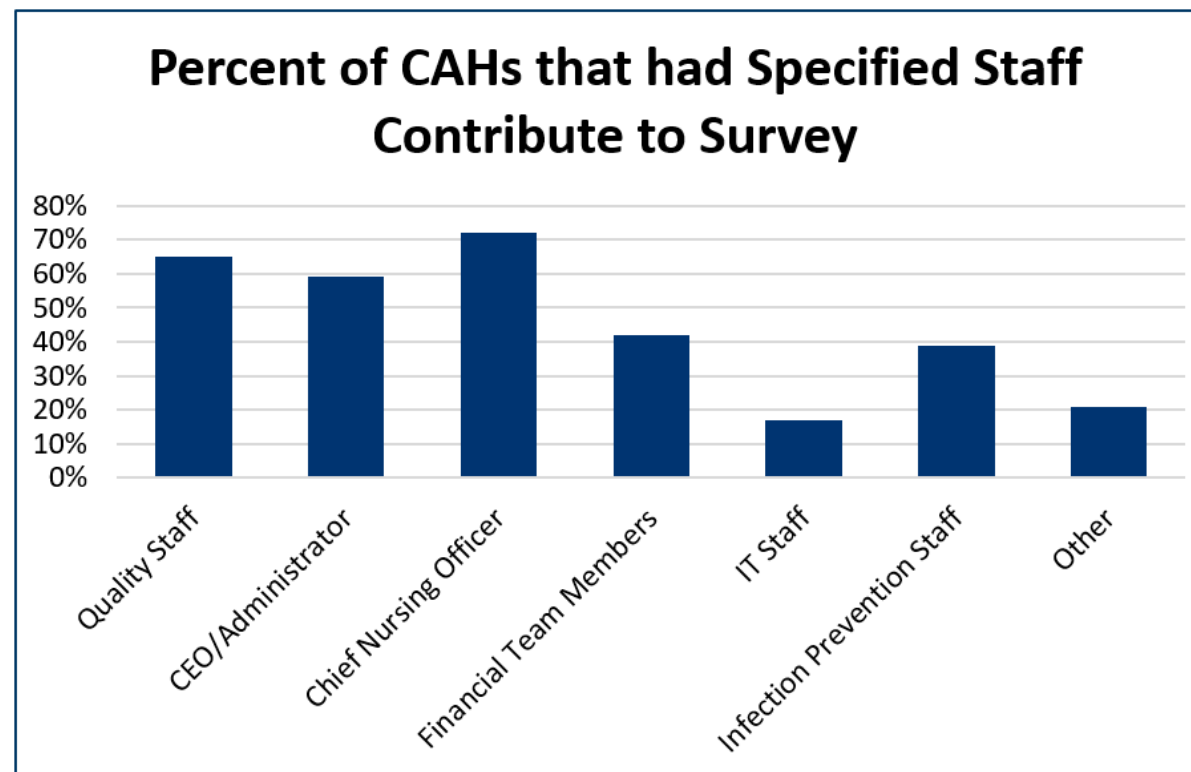
Introduction

Introduction

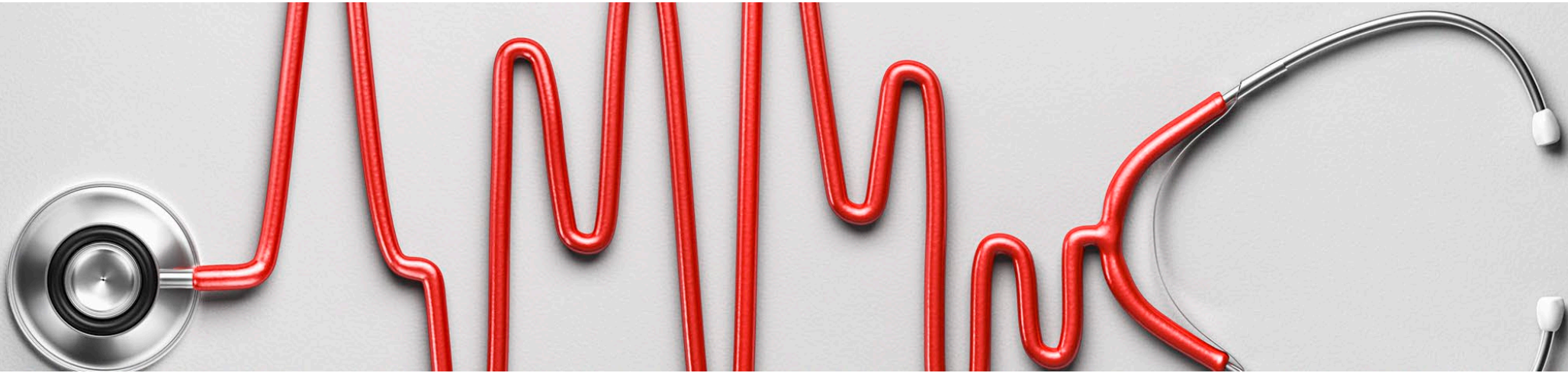
- The purpose of the Critical Access Hospital (CAH) Quality Infrastructure Assessment (QIA) is to learn more about:
 - CAH quality improvement infrastructure and activities
 - Service lines offered
 - Related quality measures
- Data was collected by the Flex Monitoring Team (FMT) between September and November 2024
- 71/76 CAHs responded to the survey
- Second annual CAH Quality Infrastructure Assessment
 - First one completed in 2023
 - 71/77 CAHs responded to the 2023 survey

For more information on the CAH Quality Inventory and Assessment including assessment questions go to: [CAH Quality Inventory & Assessment Resources | Flex Monitoring Team](#)

- All survey responses were self-reported by individuals who work at the Critical Access Hospital
- Who contributed to the assessment?

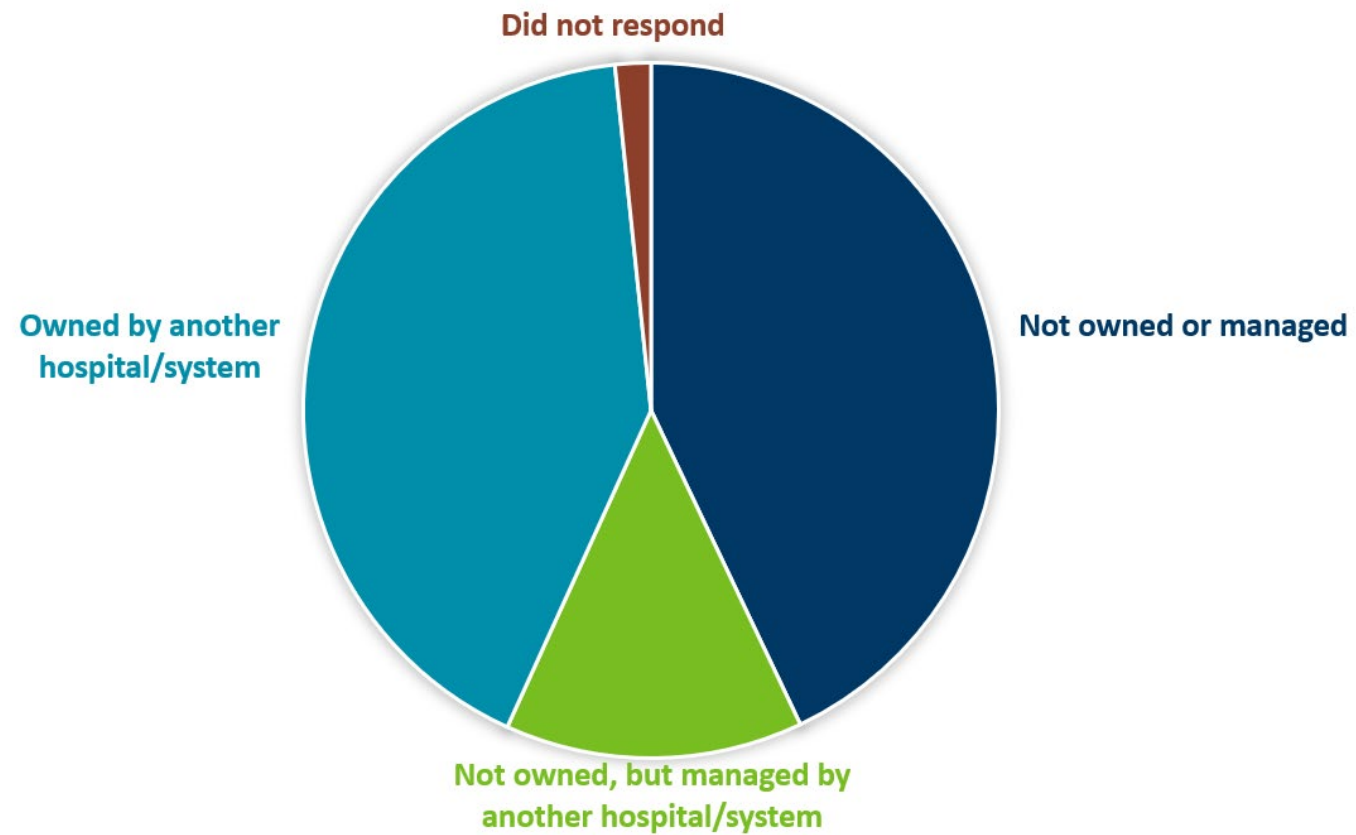


- Data is self-reported
- Different individuals may have completed the surveys in 2023 and 2024, which may contribute to differences in responses instead of changes at the CAH level year-over-year
- 5 CAHs did not respond to the survey; all results are based on the 71 CAHs that completed the survey



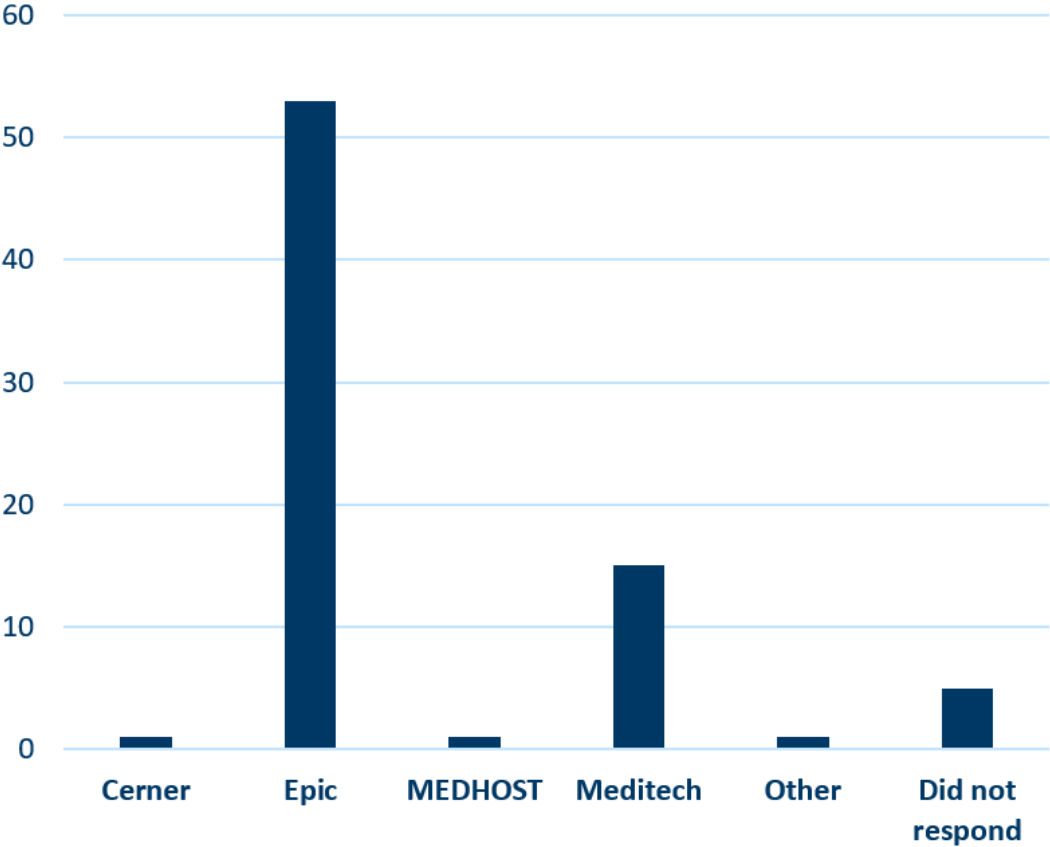
CAH Information

SYSTEM AFFILIATION

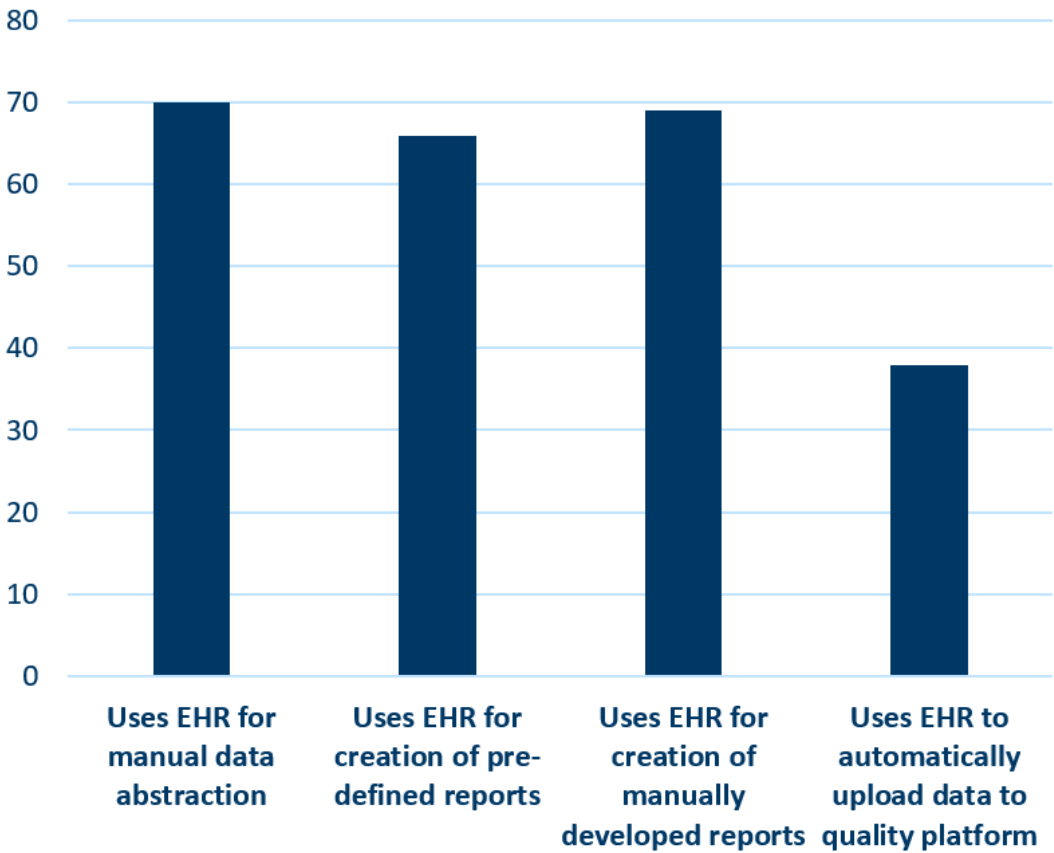


CAH Information

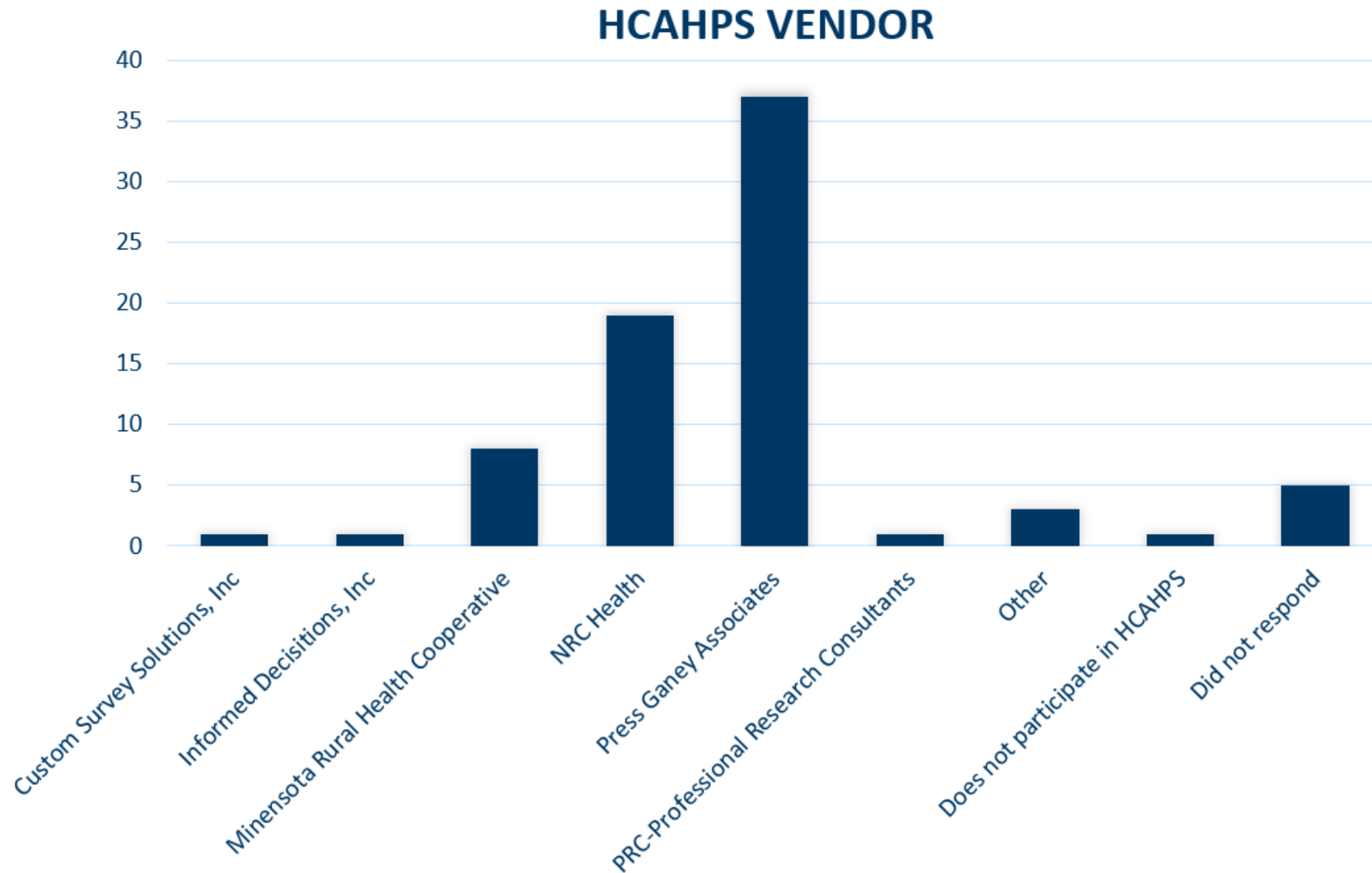
EHR Vendor



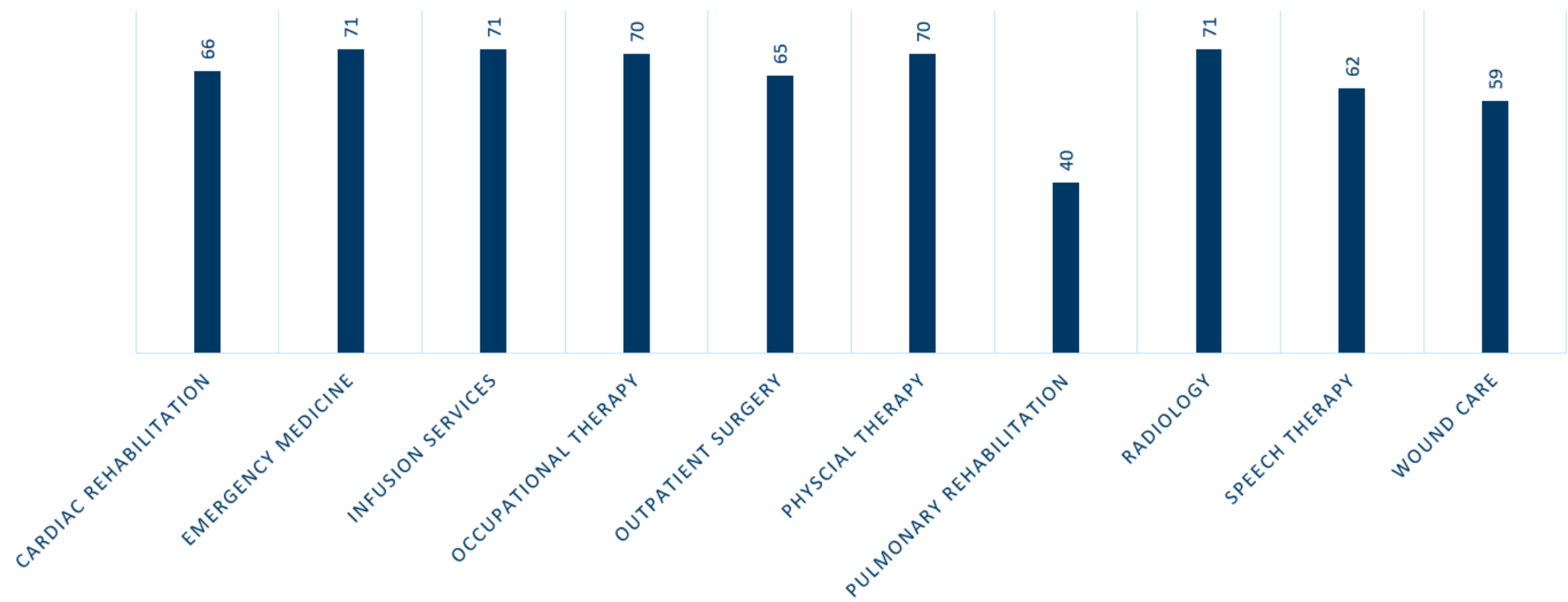
Number of CAHs and EHR Use



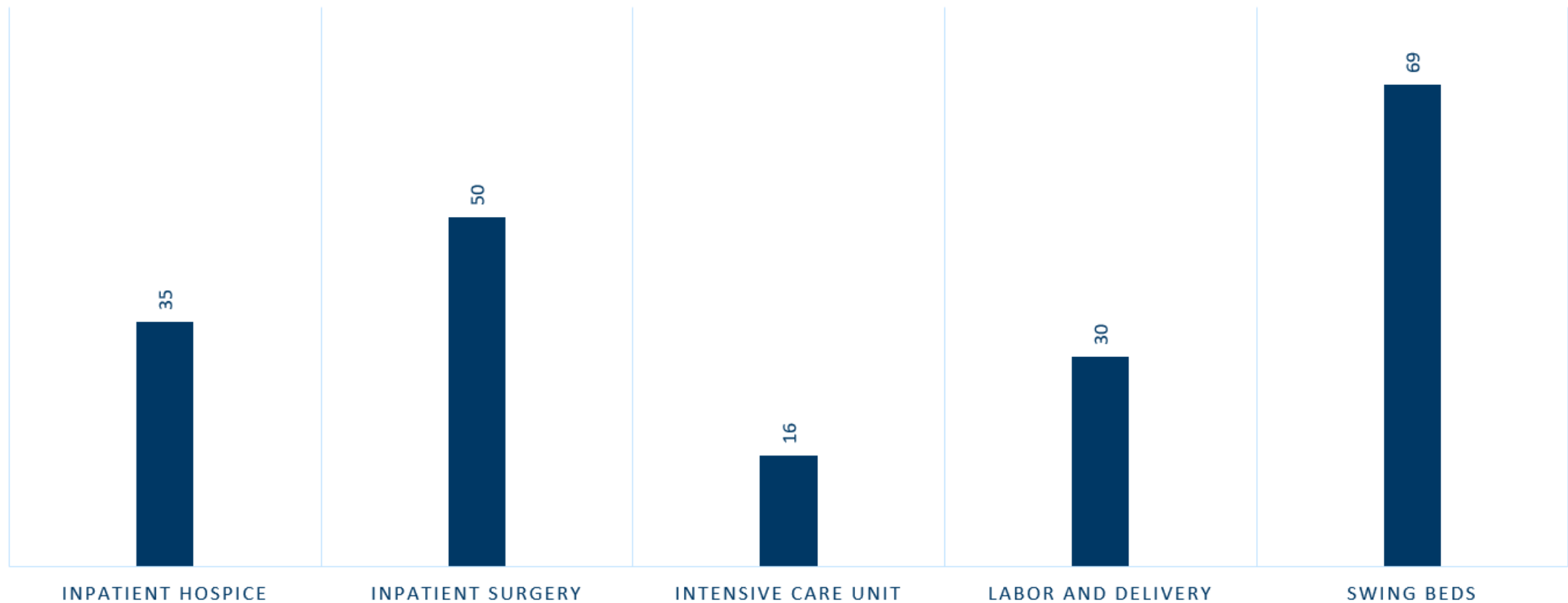
CAH Information



HOSPITAL OUTPATIENT SERVICES

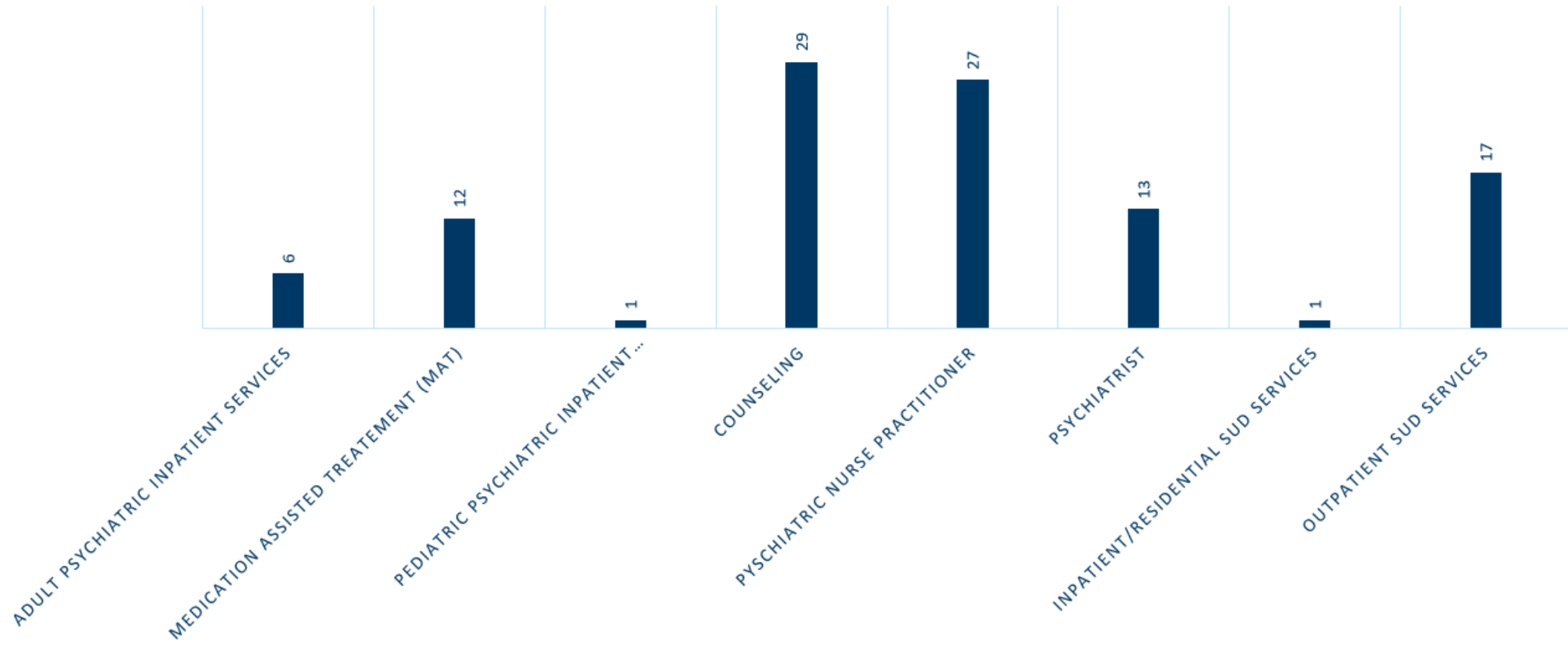


HOSPITAL INPATIENT SERVICES

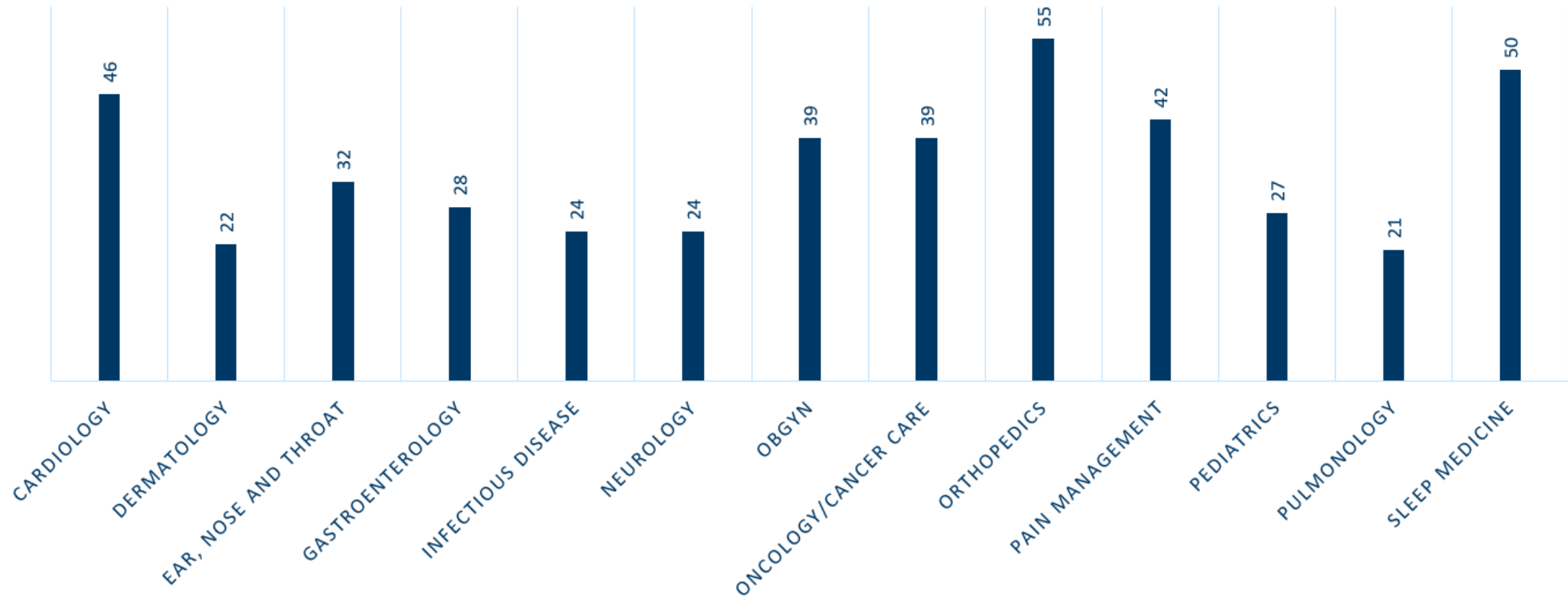


Service Lines

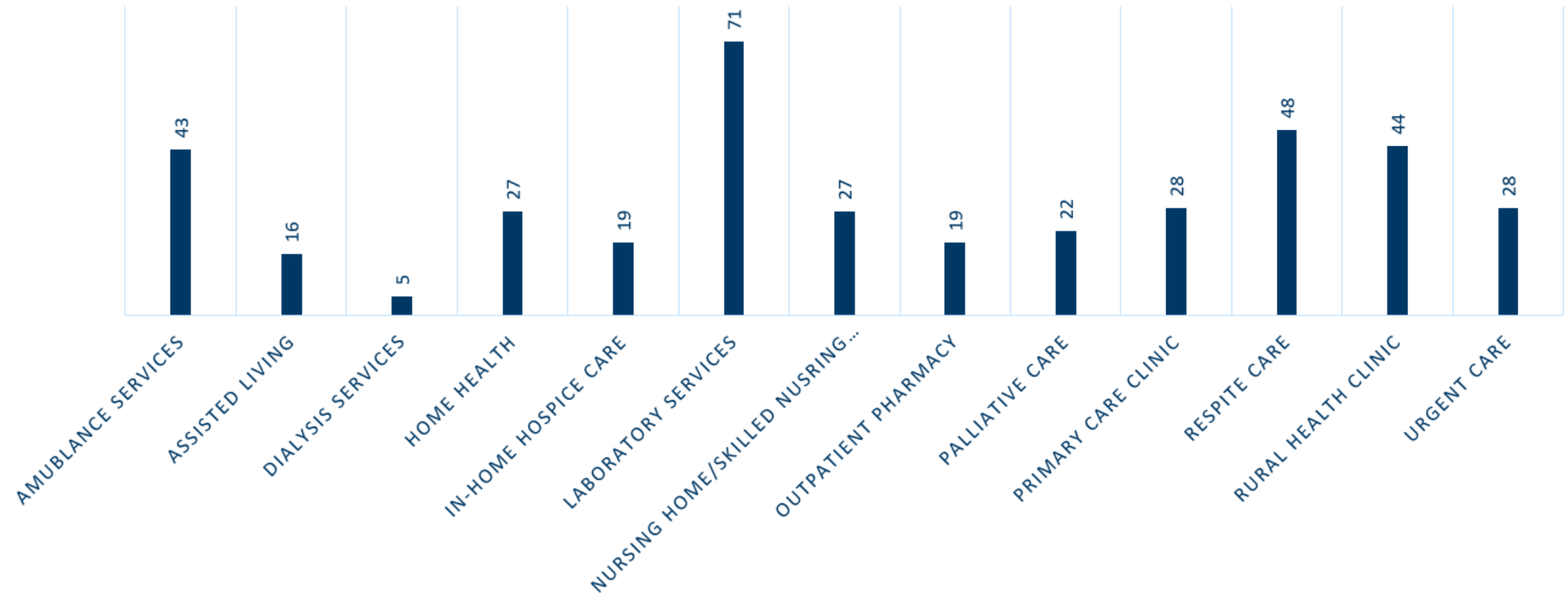
BEHAVIORAL HEALTH SERVICES



SPECIALTY CARE



OTHER SERVICES

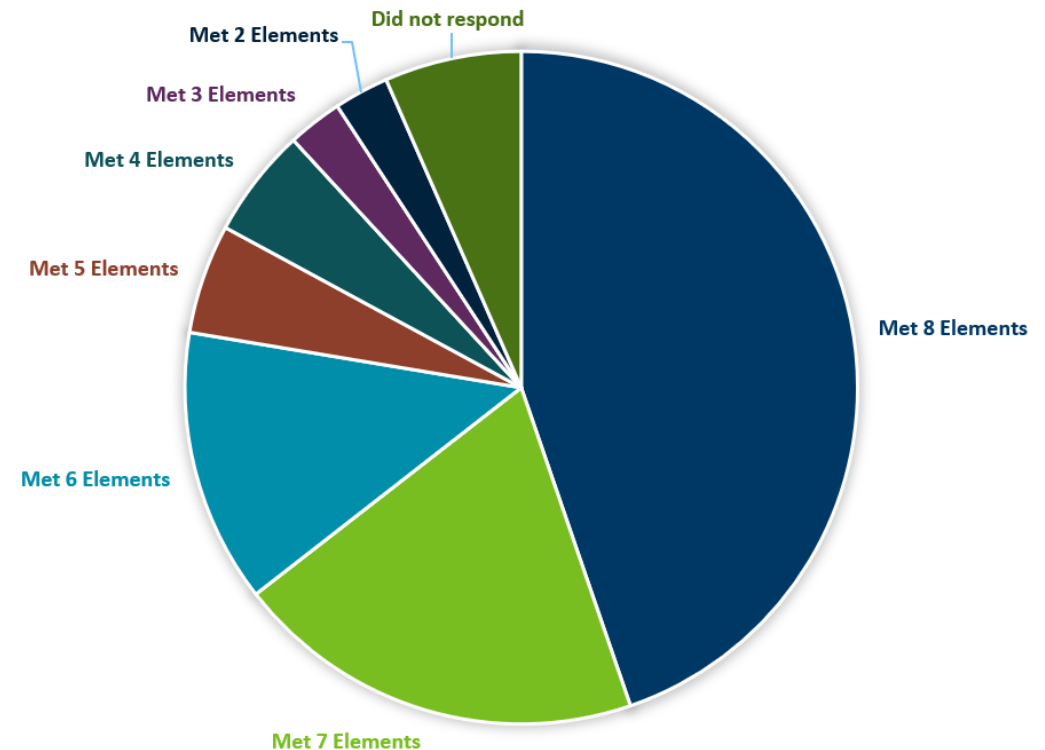




CAH Facility Data Summary - Infrastructure

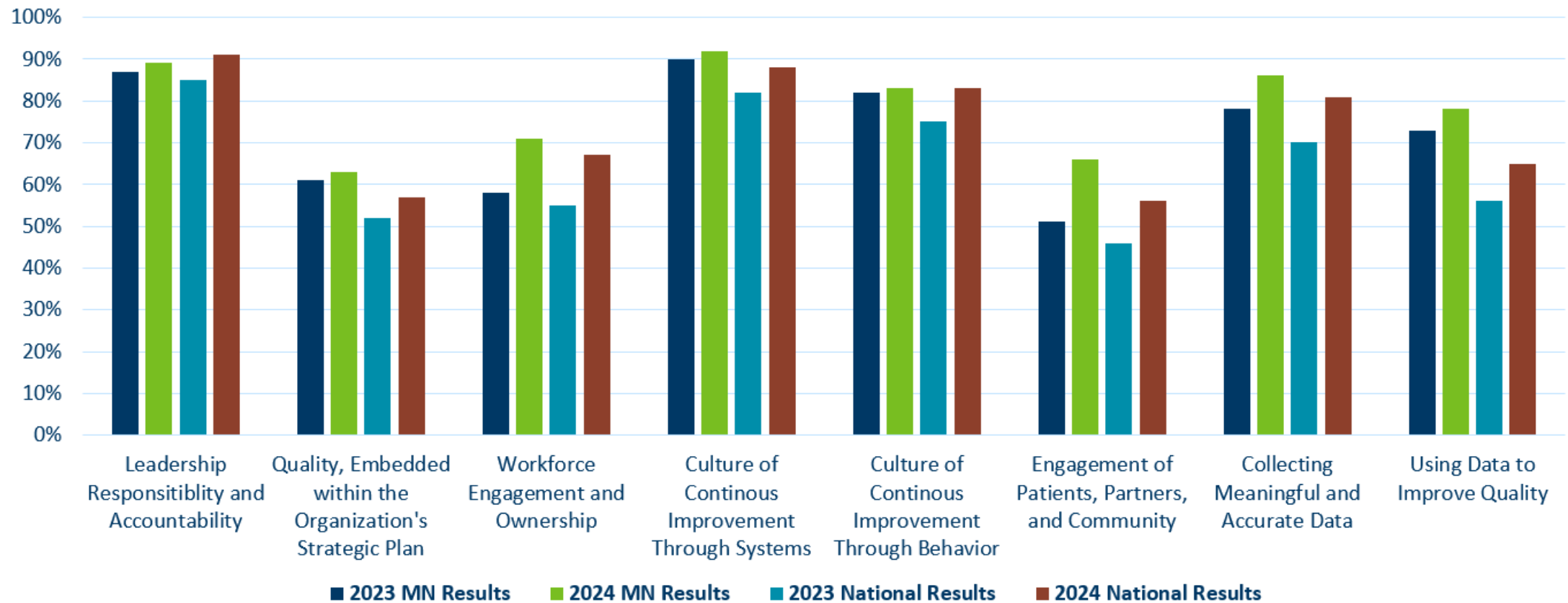
CAH Facility Data Summary - Infrastructure

- CAHs self-reported if they met each of the 8 elements
 - Leadership, responsibility and accountability
 - Quality embedded within the organization's strategic plan
 - Workforce engagement and ownership
 - Culture of continuous improvement through system
 - Culture of continuous improvement through behavior
 - Engagement of Patients, Partners, and community
 - Collecting Meaningful and accurate data
 - Using data to improve quality
- Each element has 3-4 criteria that CAHs had to report they met or did not meet



CAH Facility Data Summary - Infrastructure

Number of CAHs that reported meeting each element in 2023 and 2024



CAH Facility Data Summary - Infrastructure

Leadership, Responsibility and Accountability		
Number of CAHs that met Element in 2023	Number of CAHs that met Element in 2024	Percent Change
67	68	+2%
Element Criteria:		
	Percent of CAHs that met criteria in 2023	Percent of CAHs that met criteria in 2024
The hospital ([board] 2024) engages in and supports quality improvement	96%	96%
Organizational resources are adequately allocated to support QI	99%	100%
Executive leadership oversees design and functionality of the QI program	100%	100%

CAH Facility Data Summary - Infrastructure

Quality Embedded within the Organization's Strategic Plan		
Number of CAHs that met Element in 2023	Number of CAHs that met Element in 2024	Percent Change
47	48	+2%
Element Criteria:		
	Percent of CAHs that met criteria in 2023	Percent of CAHs that met criteria in 2024
Quality leaders participate in organizational strategic planning	90%	76%
Quality is a core component of the organization's strategic plan	90%	89%
Quality is reflected in all core components of the organization's strategic plan	75%	80%

CAH Facility Data Summary - Infrastructure

Workforce Engagement and Ownership

Number of CAHs that met Element in 2023	Number of CAHs that met Element in 2024	Percent Change
45	54	+13%
Element Criteria:		
	Percent of CAHs that met criteria in 2023	Percent of CAHs that met criteria in 2024
The organization has formal onboarding and orientation that embed quality as a priority	82%	90%
The organization has regular and ongoing professional development opportunities for staff related to quality	89%	90%
Quality improvement is incorporated into standard work	90%	96%

CAH Facility Data Summary - Infrastructure

Culture of Continuous Improvement Through Systems		
Number of CAHs that met Element in 2023	Number of CAHs that met Element in 2024	Percent Change
69	70	+2%
Element Criteria:		
	Percent of CAHs that met criteria in 2023	Percent of CAHs that met criteria in 2024
The organization uses standardized methods for improving processes	100%	100%
Leadership incorporates expectations for QI into job descriptions and department and committee charters	97%	99%
The organization has processes in place for continuous reporting and monitoring of QI data	100%	100%

CAH Facility Data Summary - Infrastructure

Culture of Continuous Improvement Through Behavior					
Number of CAHs that met Element in 2023		Number of CAHs that met Element in 2024		Percent Change	
63		63		0%	
Element Criteria:					
			Percent of CAHs that met criteria in 2023		Percent of CAHs that met criteria in 2024
The organization monitors adherence to best practices such as evidence-based protocols/order sets in all areas			100%		99%
The organization intentionally develops strong peer relationships with internal and external partners including those at the local, state, and federal levels			100%		100%
Employees demonstrate initiative to achieve goals and strive for excellence			90%		89%
Managers and leaders regularly evaluate behaviors to ensure they align with organizational values			99%		100%

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CAH Facility Data Summary - Infrastructure

Engagement of Patients, Partners, and Community					
Number of CAHs that met Element in 2023		Number of CAHs that met Element in 2024		Percent Change	
39		50		+14%	
Element Criteria:					
			Percent of CAHs that met criteria in 2023		Percent of CAHs that met criteria in 2024
The organization collects feedback from patients/families beyond patient experience surveys			85%		92%
The organization collaborates with other care providers using closed-loop referrals processes to ensure quality of care			99%		99%
The organization uses a variety of mechanisms to share quality data with patients, families, and the community			85%		85%
Leaders synthesize and develop action plans in response to patient, family, and community feedback			75%		85%

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CAH Facility Data Summary - Infrastructure

Collecting Meaningful and Accurate Data		
Number of CAHs that met Element in 2023	Number of CAHs that met Element in 2024	Percent Change
60	65	+8%
Element Criteria:		
	Percent of CAHs that met criteria in 2023	Percent of CAHs that met criteria in 2024
The organization has a multidisciplinary process for identifying key quality metrics	89%	93%
Leaders identify risks and opportunities based on analyses of key performance metrics	100%	100%
The organization leverages health information technology (HIT) to support complete and accurate data collection	97%	100%
The organization collects and documents demographic and health related social needs (HRSN) data	97%	99%

CAH Facility Data Summary - Infrastructure

Using Data to Improve Quality					
Number of CAHs that met Element in 2023		Number of CAHs that met Element in 2024		Percent Change	
56		59		+5%	
Element Criteria:					
			Percent of CAHs that met criteria in 2023		Percent of CAHs that met criteria in 2024
The organization shares data transparently both internally and externally			100%		99%
The organization incorporates external data sources to inform QI efforts			86%		89%
Leaders act on and clearly communicate the data results from quality initiatives			89%		92%
The organization uses benchmarking to identify where quality can be improved			99%		100%

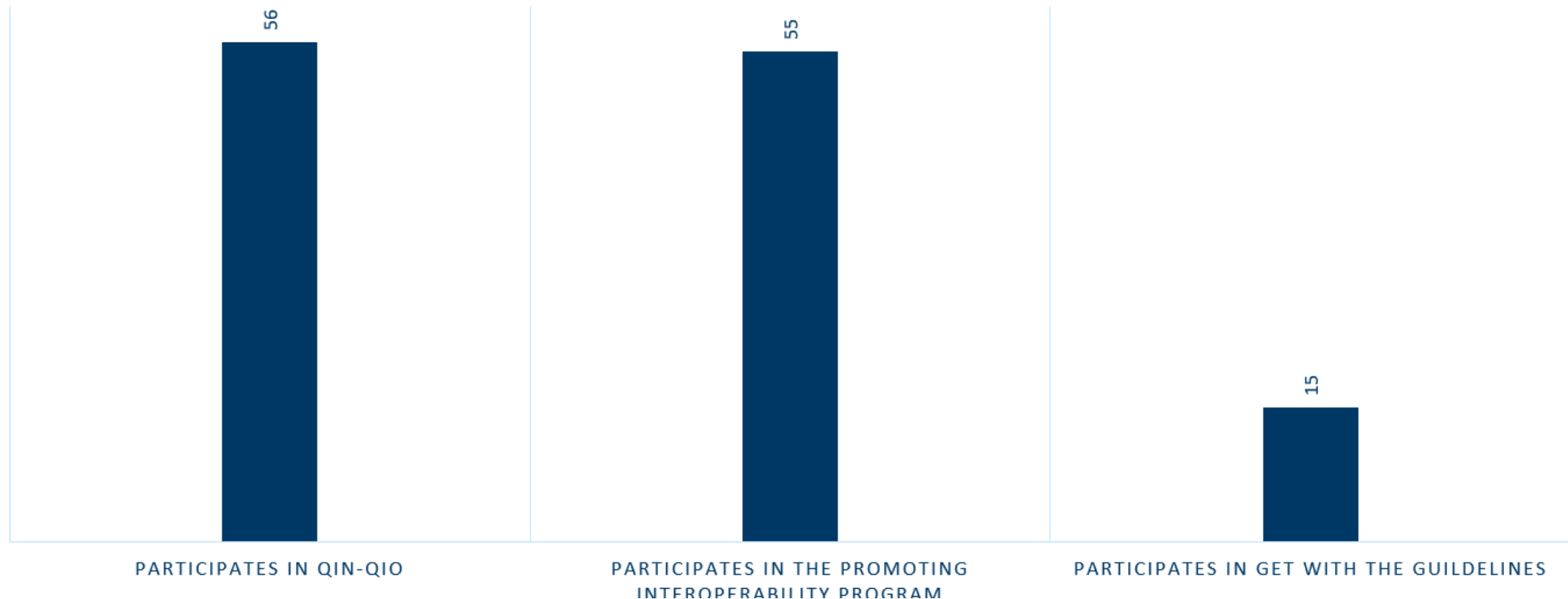
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Quality Initiatives and Collaborative Models

Quality Initiatives and Collaborative Models

QUALITY INITIATIVES AND COLLABORATIVE MODELS



Quality Initiatives and Collaborative Models

PAYMENT AND DEMONSTRATION MODELS

