

Highland Hospital Annual Report 2019

Making a difference, every day.



UR
MEDICINE

HIGHLAND
HOSPITAL

Letter

from Steve, Cindy & Rich LeFrois

Now in its 130th year, Highland is the longest operating hospital in the Rochester community. Starting in 1889, a small private residence on Rochester's South Avenue evolved into a well-respected community hospital that blends UR Medicine's leading edge technology with a compassionate, patient- and family-centered approach to care. The result: region-leading specialty services and continued growth that will support the Rochester community's evolving health care needs well into the future.

Highland continues to maintain a specialized focus on geriatrics, cancer care, orthopaedics, and women's health. As a strategic partner to UR Medicine, Highland plays an important role in its goal of building presence and attracting new patients in upstate New York. We continue to strategically reinvest in our facilities to provide modern, technologically advanced care, and meet the expectations of patients, their families, and our providers, employees, and volunteers. And, we continue to provide quality clinical care with a focus on patient safety and excellent outcomes.

These outcomes result in numerous accreditations, designations, and awards and are the result of the dedication of our exceptional physician, nurses, volunteers, staff and managers. They are driven by our management plan and the long-term objectives outlined in the 2018-22 Strategic Plan, and established by our Board of Directors. These strategic objectives are delivered through six pillars of service and operational excellence: Quality & Safety, Patient- and Family-Centered Care, Growth, Finance, People, and Community/System.

Throughout Highland's long history, its physicians, nurses, staff and volunteers have sought to do more than just deliver the best medicine of the day—they've shared a vision of clinical excellence in a healing environment with personalized, thoughtful care.

In these pages you'll find many examples of how our long history has created a solid foundation for a very bright future.



Steven I. Goldstein

Steven I. Goldstein, President and CEO
Highland Hospital



Rich LeFrois

Richard LeFrois, Chair, Board of Directors
Highland Hospital



Cindy Becker

Cindy Becker, Vice President and COO
Highland Hospital

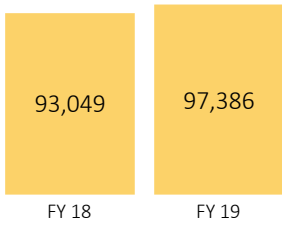
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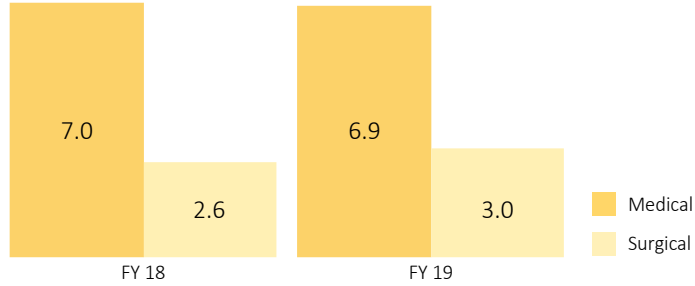


Hospital Statistics & Awards

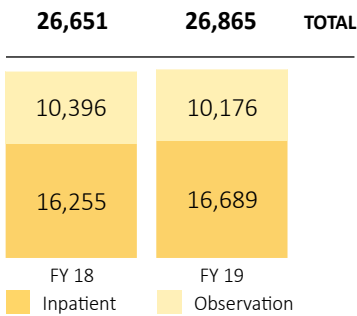
Patient Days



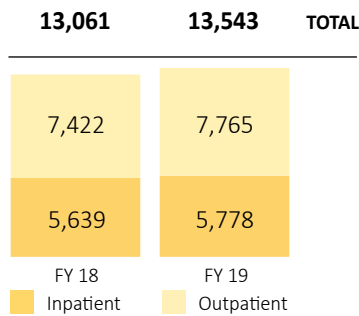
Average Length of Stay



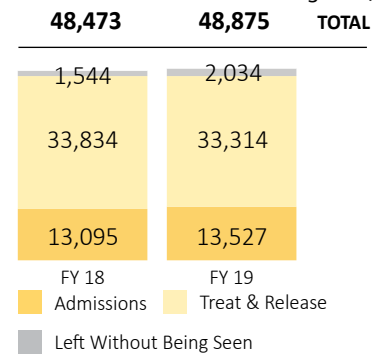
Adult Hospital Discharges



Operating Room Cases



ED Visits (Admissions, Treat & Release, Left Without Being Seen)



Hospital Awards



U.S. News & World Report spotlighted Highland as a "Best Regional Hospital," having achieved "High Performing" ratings in Heart Failure, Hip Replacement, and Knee Replacement. Highland was also ranked #3 in the Rochester Metro Area, and #25 in New York state.



Highland achieved three stars in the Centers for Medicare and Medicaid Services Hospital Compare Overall Rating.



The nonprofit Leapfrog Group ranked Highland in the top percentile among 137 hospitals compared in New York. Highland finished among eight, or 6 percent of hospitals in the state that received "A" scores for safety.

Quality Recognition

In FY 19, Highland and several of its departments were recognized for exceptional performance:

 JOINT COMMISSION CERTIFICATION Evarts Joint Center, Geriatric Fracture Center, Gynecologic Oncology, Palliative Care	 MAGNET® Department of Nursing	 GOLD LEVEL BEACON AWARD FOR EXCELLENCE Intensive Care Unit	 CLINICAL LABORATORY PATHOLOGY ACCREDITATION Clinical and Pathology Laboratory	 AMERICAN COLLEGE OF SURGEONS & AMERICAN SOCIETY OF METABOLIC & BARIATRIC SURGERY Comprehensive Bariatric Center	 NATIONAL COMMITTEE FOR QUALITY ASSURANCE (NCQA) Level 3 Patient-Centered Medical Home, GAMA and Highland Family Medicine
 CORE CERTIFIED Geriatric Fracture Care Program	 AMERICAN HEART/STROKE ASSOCIATION Get with the Guidelines® Heart Failure Gold Plus and Target Stroke Honor Roll	 CENTER OF EXCELLENCE Breast Imaging	 NEW YORK STATE Designated Stroke Center	 NICHE NICHE Designated Hospital Acute Care for Elders Unit	
 ASGE QUALITY RECOGNITION Highland Procedures Center	 AETNA AETNA INSTITUTES OF QUALITY® Evarts Joint Center	 HEALTH CARE EQUALITY LEADER	 ASHP ACCREDITED AMERICAN SOCIETY OF HEALTH SYSTEM PHARMACISTS Residency Training Program	 CENTER OF EXCELLENCE Radiation Oncology (all locations)	 GEDA SILVER LEVEL 2 Geriatric Emergency Department Accreditation



Highland's Performance—Pay for Performance

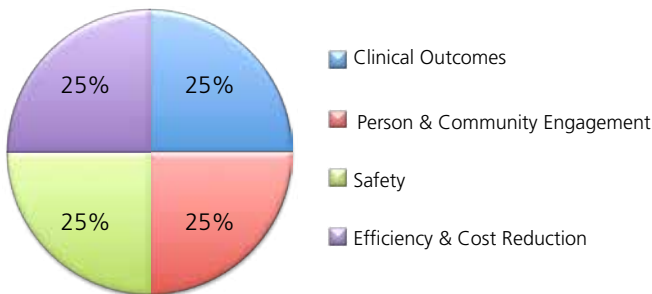
Highland is focused on meeting the federal mandate of improving quality of care, improving population health and reducing the cost of care. Reimbursements for health care systems by the Center for Medicare and Medicaid Services (CMS) reward hospitals that deliver services of higher quality and value.

Three components comprise the CMS effort. The combination of these efforts is referred to as Pay for Performance.

1. Hospital Value-Based Purchasing (VBP) Program

CMS sets targets for clinical quality and patient satisfaction and withholds a portion of hospitals' Medicare reimbursements which can be earned back by meeting or exceeding these quality targets.

FY 19 VBP Weighting



Highland's Results: \$750,000 Reimbursement

CMS Areas of Measure	Performance
VALUE-BASED PURCHASING (2% withhold at risk)	
Highland Performance Score	51.96
New York State Score	36.39
U.S. Score	38.52

Value-Based Incentive Payment Percentage: 2.91% (Withhold + bonus payment)

2. Hospital Readmissions Reduction Program

Reducing readmissions remains a priority for Highland as CMS sets performance goals for 30-day hospital readmissions, which hospitals must achieve or penalties will be incurred.

Highland's Results: No Penalty

READMISSIONS REDUCTION

Measured by Excess Readmission Ratio (<1.0 is better)

Acute Myocardial Infarction	0.99
Heart Failure	0.91
Pneumonia	0.99
Chronic Obstructive Pulmonary Disease	0.98
Total Knee/Hip Arthroplasty	0.93

3. Hospital-Acquired Condition Reduction Program

Hospitals are penalized if they exceed thresholds on the rate of Hospital-Acquired Conditions.

Highland's Results: No Penalty

HOSPITAL-ACQUIRED CONDITIONS (HACs)

Measured by Payment Reduction Threshold: 6.75 (lower is better)

HACs Score	-0.48
(payment reduction threshold 0.33) Negative is better, no penalty	

Highland's reimbursement was favorable overall for Pay for Performance. The VBP program score remains higher than the national averages.

CMS Areas of Measure	Financial Impact
Value-Based Purchasing	\$750,000
Readmission Reduction	No penalty
Hospital-Acquired Condition Reduction	No penalty
Overall Impact	\$750,000

Excelsus BlueCross BlueShield Hospital Performance Incentive Program	Financial Impact
Value-Based Purchasing	\$950,691
Total Reimbursement CMS & Excelsus combined	\$1,700,691



Performance Improvement

While changes are constant in the health care environment, Highland's efforts toward providing the highest quality, safe patient care with zero patient harm are persistent—we continually strive to improve. In FY 19, Highland successfully completed three major performance improvement projects and established initiatives to reduce avoidable readmissions. Preventing hospital readmissions improves patient outcomes and can result in significant savings in terms of the overall cost of care. The Performance Improvement team also trained management and director level staff using a new Performance Improvement Foundations course with the goal of advancing leadership development.

Point of Use Cleaning in the OR

With an aim of reducing bioburden on operating room instrumentation, the Point of Use Cleaning Project team increased point of use cleaning compliance from 80 to 98 percent and decreased the number of bioburden incidents to less than 1 percent per surgical procedure. The team also received the Gold Award for Team Excellence at the Greater Rochester Quality Council Performance Excellence Awards.

Late Tray Project

By standardizing workflows and reinforcing accountability, the Late Tray Project team reduced the average number of late trays by 13 percent over 12 months. Highland's Late Tray Project received the Bronze Award for Team Excellence at the Greater Rochester Quality Council Performance Excellence Awards.

Neurosurgery Surgical Site Infection (SSI) Reduction

An interdisciplinary team reviewed care processes and implemented improvements that resulted in a reduction in the Standardized Infection Ratio for Neurosurgery SSIs from 4.103 in FY 18 to 1.287 in FY 19, a 63 percent reduction.

Medication Reconciliation

Using Lean tools, a multi-disciplinary group defined the process for medication reconciliation and assigned roles and responsibilities. The project was a foundation for an FY 20 project with Accountable Health Partners addressing medication reconciliation.

Reducing Avoidable Readmissions

- Formed an interdisciplinary team that focuses on improving discharge planning and prevent avoidable readmissions.
- Improved coordination between Outpatient Pharmacy and providers to ensure patients receive medications upon discharge.
- A Congestive Heart Failure team has developed and piloted best practices on West 5 and expanded to all medical units.
- A Chronic Obstructive Pulmonary Disease (COPD) team identifies all COPD patients and looks at prior and current admissions to ensure all of the risk factors for readmission have been identified and addressed before discharge.

Journey to High Reliability

In the coming fiscal year, Highland will pursue its new commitment to achieving zero patient harm and becoming a High Reliability Organization (HRO). But what does High Reliability mean to us? High Reliability is getting things right each and every time by building and sustaining a culture that places safety above all competing priorities and by preventing failure—in processes, policies, technology, and people. It also means reducing the probability that errors will occur by deploying attention to detail, clear communications, and questioning attitudes.

Patient safety is the guiding principle at Highland and a key driver to all decision making. The vision of our leadership here and throughout the UR Medicine system is zero preventable patient harm. In order to provide great care and achieve zero preventable harm we must excel in three interconnected areas: our processes, our culture, and our performance. High Reliability is the foundation for excellence in these areas and leads to exceptional patient care.





Infection Prevention

The Highland Hospital infection prevention program is focused on decreasing the risk of infection to patients, monitoring health care-associated infections, and implementing strategies to prevent infection.

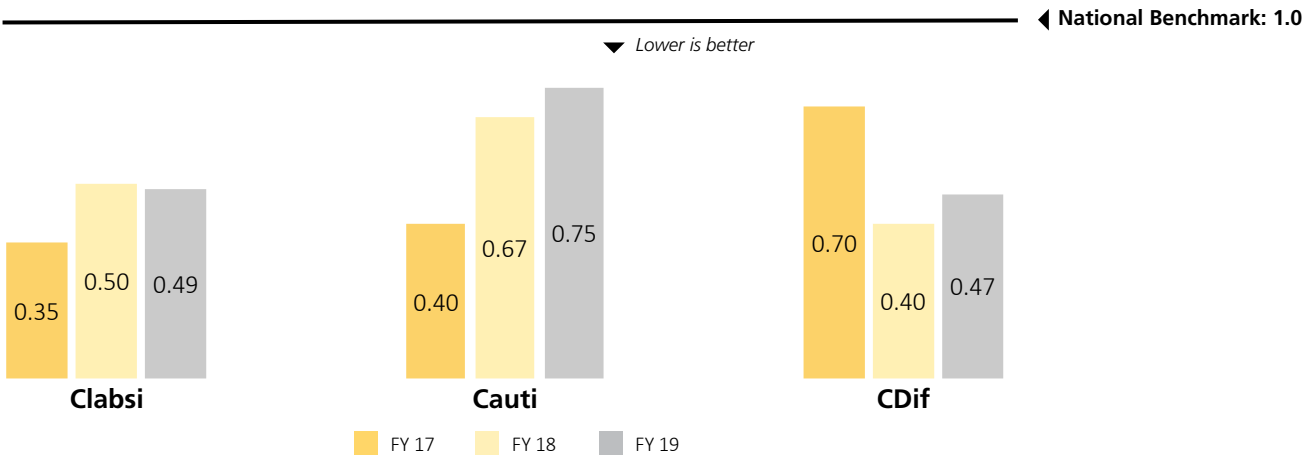
Reports are based upon the standardized infection ratio (SIR), observed versus predicted infections, and a goal of achieving a rate below the threshold of 1.0.

Highland conducts surveillance on high-risk infections such as central line associated bloodstream infections (CLABSI), catheter associated urinary tract infections (CAUTI), and Clostridioides difficile (C. difficile) infections. These three areas

outperformed goals while CAUTI infections were slightly higher than the previous two years.

Large scale efforts are underway to reduce urinary catheter use and alternatives to the urinary catheter when indicated in select patient populations. A pilot project on one of Highland's medical units has already resulted in an 80 percent decrease in CAUTIs and expansion of those strategies to other high-risk units is underway.

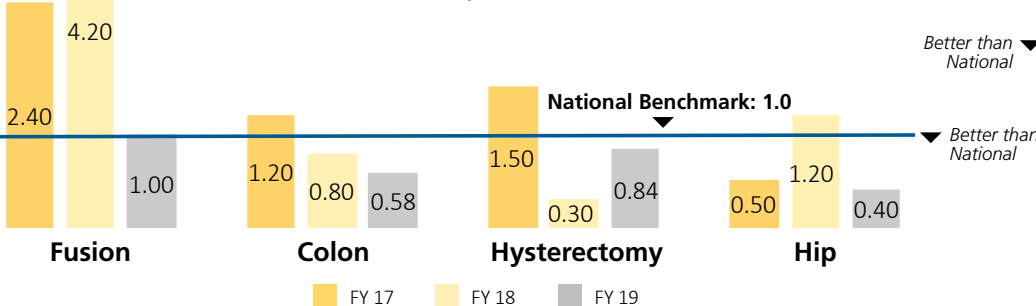
C. difficile infections outperformed national benchmarks by a statistically significant difference for two consecutive years.



Surgical Site Infections (SSIs)

SSIs trended down in most areas and remain below the national benchmark of 1.0. A large performance improvement project in neurosurgery resulted in a statistically significant decrease in SSIs.

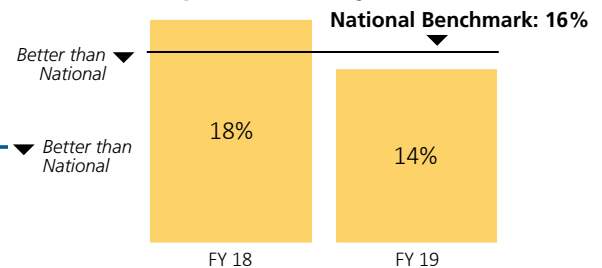
A large scale improvement project was initiated in response to an increase in orthopedic joint infections. This included a comprehensive skin preoperative cleaning and nasal decontamination protocol, initiatives to improve instrument and environmental contamination, enhanced antibiotic prophylaxis protocols, and revised orthopedic bundles to standardize best practices.



Sepsis

Sepsis mortality has decreased over time, where early recognition and treatment are key factors in survival. Highland has achieved improvement in adherence to our sepsis protocol, which includes early antibiotic administration and resuscitation with fluids, among other treatments.

Sepsis Mortality Rate





HCAHPS Hospital Consumer Assessment of Healthcare Providers and Systems

HCAHPS Domains	FY 19 Results	Achievement Threshold*	National Benchmark*
Global Rating	73.0%	71.8%	85.67%
Recommend Hospital	78.8%	NA	NA
Communication with Nurses	79.9%	79.06%	87.36%
Responsiveness of Hospital Staff	61.8%	65.77%	81.00%
Communication with Doctors	83.0%	79.91%	88.10%
Cleanliness	66.0%	65.61%	79.58%
Quietness	52.9%	65.61%	79.58%
Communication about Medication	61.2%	63.83%	74.75%
Discharge	90.4%	87.38%	92.17%
Care Transitions	54.8%	51.87%	63.32%

**Achievement Threshold – represents the fiftieth percentile of all hospitals' performance for each measure during the baseline period.*

National Benchmark – represents the mean of the top decile of all hospitals' performance for each measure during the baseline period.

Patient satisfaction and quality, safe patient care come first at Highland. We are committed to an outstanding patient experience for each and every patient—it is at the heart of all we do, and driven by our ICARE values.

Our Patient- and Family-Centered Care approach is an integral part of our daily operations and provides a framework to achieve our goals of delivering a unique brand of service excellence that results in high patient satisfaction. The patient experience is measured by CMS' Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) program.

In FY 19, Highland exceeded the achievement threshold in six HCAHPS domains, including:

- Global Rating
- Communication with Nurses
- Communication with Doctors
- Cleanliness
- Discharge
- Care Transitions

Staff members and providers are receiving additional training and focused initiatives are in place to improve in the remaining three domains.

Highland has focused on improving diversity awareness and inclusion specific to the LGBTQ patient and family population (and staff as reflected in the People section on page 16). Our efforts resulted in receiving the 2019 LGBTQ Healthcare Equality Leader designation from the Healthcare Equality Index (Human Rights Campaign Foundation).





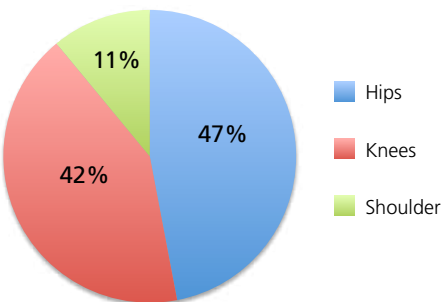
Perioperative Services

- **Volume:** Operating Room volume grew four percent in FY 19.
- In FY 19, Highland continued to upgrade and expand its operating room (OR) capabilities.
 - Renovations completed in two Total Joint Replacement rooms in June 2019.
 - OR upgrades to continue in fall 2019, including renovations to one additional operating room, control desk, and locker rooms.
- Replacement of all 21 anesthesia machines.
- Ended the year 62 cases ahead of its projected volume. FY 20 volume is projected to be nearly 14,000 cases.
- OR and Sterile Processing Department won a Team Excellence Gold Award for the Performance Improvement project: Point of Use Cleaning in the OR. This initiative has helped decrease bioburden on instrumentation.
- Case volume and operating room utilization continue to increase and are projected to grow at roughly 14% over the next five years.

Orthopaedics

- **Volume:** Orthopaedic OR volumes grew 10 percent in FY 19.
- Highland's Joint replacement volume has increased 47% from FY 16 to FY 19. In FY 19, the department saw its highest volume ever at 2,399 joint replacements.
- To accommodate anticipated growth, Highland has allocated six state-of-the-art operating rooms committed to joint replacement.
- The dedicated inpatient unit on East 6 has decreased overall length of stay from 1.94 days in FY 18 to 1.76 in FY 19. This decrease has added over 141 bed days on East 6.

FY 19 Total Joint Replacement Surgeries



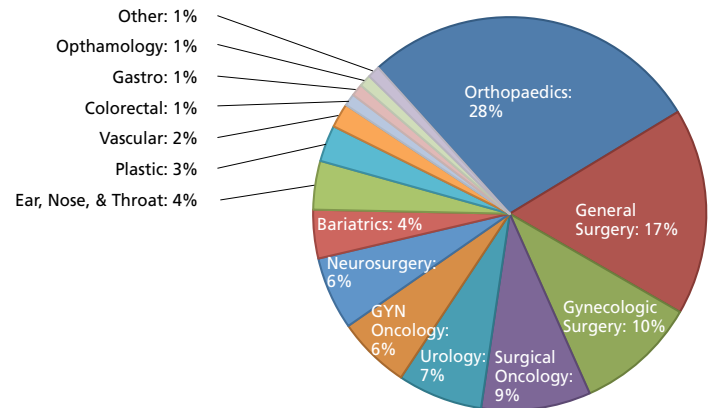
Perioperative Services

	13,061	13,543	TOTAL
	7,422	7,765	
	5,639	5,778	
	FY 18	FY 19	
	Outpatient	Inpatient	



Volume

Operating Room Services by Type



Orthopaedic Surgeries

	3,364	3,584	TOTAL
	655	726	
	2,709	2,858	
	FY 18	FY 19	
	Inpatient	Outpatient	



Volume

	FY 18	FY 19	
Average Length of Stay	2.60	2.80	↑
Clinic Visits	781	872	↑

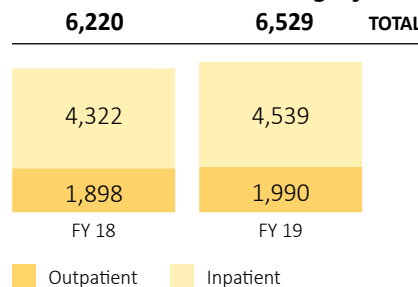


General Surgery & Subspecialty

Highlights by division:

- **Volume:** Department of Surgery volume increased by 5 percent in FY 19.
- **Colorectal / General:** Implemented new wound dressings that enhance healing and minimize infection.
- **ENT:** Became the first hospital in the Rochester region to offer a hypoglossal nerve stimulation procedure as a new treatment for obstructive sleep apnea.
- **Surgical Oncology:** Acquired advanced lighted retractors to improve visualization and intraoperative patient safety.
- **Plastic surgery:** Implemented SPY intraoperative imaging technology to ensure adequate blood perfusion for effective wound healing. The department also introduced new technology to improve breast reconstruction post mastectomy.
- **Urology:** Implemented UroLift as a minimally invasive treatment alternative for men suffering from enlarged prostates.
- **Vascular:** Implemented point of care blood gas analysis to improve intraoperative care of vascular compromised patients.

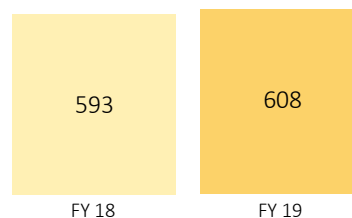
OR Cases for General Surgery & Subspecialty



Bariatric Surgery

- **Volume:** Bariatric Surgery volume increased by 3 percent in FY 19.
- In FY 19, Highland Hospital was awarded a Comprehensive Center reaccreditation the American College of Surgeons (ACS) Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP).
- An online video for Highland's Bariatric Seminars has become a preferred option for patients, with two-thirds of participants choosing this over attending an in-person seminar.

Bariatric Surgeries



Weight Management & Lifestyle Center

Highland's Weight Management & Lifestyle Center offers non-surgical approaches to treating obesity and related conditions, while also conducting research on the link between nutrition and cancer through the Weight Management & Lifestyle Center Research Fund.

- The Weight Management & Lifestyle Center is now offering three HMR Meal Replacement Weight Loss Classes and two Plant Based Classes weekly. In addition, maintenance classes for graduates of both programs are now being held.
- Participants completing the meal replacement weight loss program had an average total weight loss of 8.6% and those completing the Plant Based Program had an average of 6.1% weight loss.

- A financial assistance program has been added to expand offerings to a more diverse population.
- In cooperation with the WMLC meal replacement vendor, an online program with phone coaching was established as another treatment option for participants.
- **Weight Management & Lifestyle Center Research Fund:** Thomas M. Campbell, M.D., has successfully attracted in excess of \$3.5 million to support research on demonstrating the impact of plant based nutrition as an intervention in a variety of diseases. Active studies are underway in metastatic cancer, kidney disease, and diabetes.



Women's Health

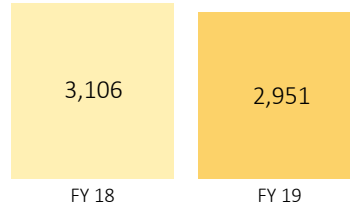
• Volume:

- A total 2,951 deliveries occurred at Highland in FY 19.
- Combined Breast Imaging volume at all four locations (Red Creek, Highland, Penfield, and Anthony Jordan Health Center) increased by 3 percent.
- Multiple disabilities among providers impacted volume metrics in Highland Women's Health offices.
- Highland opened a new Highland Women's Health ambulatory OB/GYN office in Fairport in February 2019.
- Expanded the availability of the latest breast imaging technology at the Highland Breast Imaging locations in Penfield and at Red Creek to include 3D imaging with Tomosynthesis.
- Completed the renovation of the Family Maternity Center and Special Care Nursery. The project rebuilt the triage area for maternity care, providing optimal space and privacy for mothers in FY 18. In FY 19 the Special Care Nursery was completed, providing private rooms for all neonates, allowing parents to stay overnight when their babies require a longer hospital stay.

Radiation Oncology

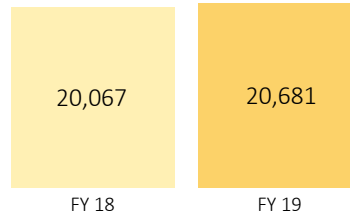
- **Volume:** Radiation Oncology experienced a 12 percent increase in procedures and a 6 percent increase in patient volumes.
- In FY 19, Highland started SBRT (stereotactic body radiation therapy) for prostate cancer. SBRT is the precise delivery of a large dose of radiation to a tumor.
- Highland Radiation Oncology will open a new satellite office at 155 Bellwood Drive in Greece. The group will be relocating from the Unity campus and colocating with Interlakes (medical) oncology in February 2020.

Deliveries



A decrease of 5 percent is due to the departure of two obstetricians and an overall decline in birth rates.

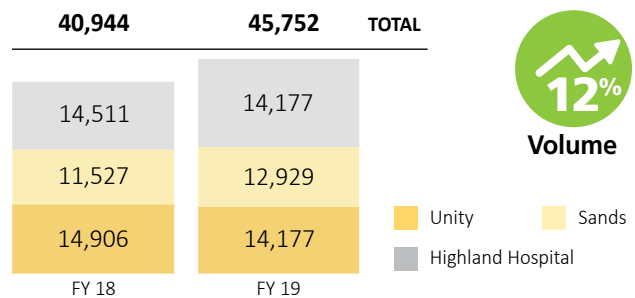
Highland Breast Imaging – All Sites



Volume

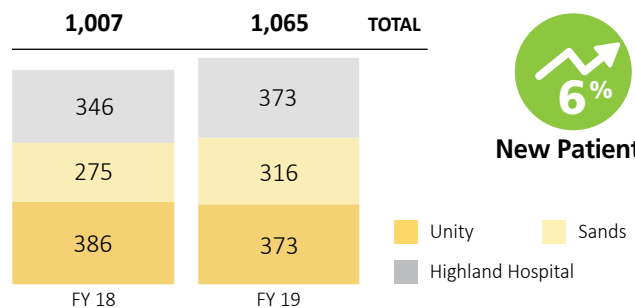
	FY 18	FY 19	
Community OB/GYN Visits	8,652	8,131	↓
Highland Women's Health	9,436	7,696	↓
University Midwifery Group	5,616	5,363	↓
Rochester Adolescent Maternity Program	758	657	↓

Radiation Oncology Procedures



Volume

New Radiation Oncology Patients

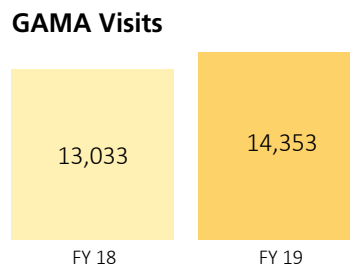
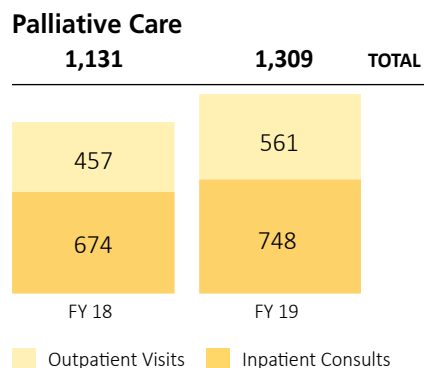
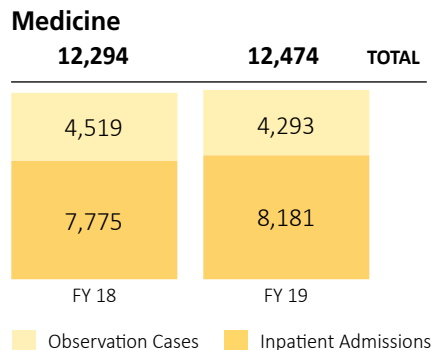


New Patients



Department of Medicine

- **Volume:** In FY 19 admissions increased by 1 percent. Outpatient volume increased by 5 percent.
- **Wilmot at Highland**
 - **Volume:** a total of 559 patients were admitted to East 5: 483 Inpatients and 76 Observation patients.
 - Wilmot Cancer Institute and Highland Hospital continued their collaboration to include admission of solid tumor oncology patients to Highland’s newly renovated East 5 unit.
- **Palliative Care**
 - **Volume:** Outpatient Palliative Care visits increase by 22 percent and inpatient consults increased by 10 percent.
 - Chin-Lin Ching, M.D., was appointed Director of the Highland Hospital Palliative Care Consult Service and a nurse practitioner was added to the team in May.
 - Quality remains high with a 98.4% overall satisfaction (satisfied or extremely satisfied) on surveys.
- **Geriatrics and Medicine Associates (GAMA)**
 - **Volume:** Outpatient visits have increased by 10 percent.
 - The practice has increased its volume with the expansion of our Nephrology and Palliative Care departments.
 - Dr. Kenneth Chin, an Internal Medicine physician, has joined the group, and added four staff members, securing two office suites to accommodate increasing volumes.
- **Complex Care Center:** Team-based rounding has been established for patients affiliated with the Complex Care Center, which treats adult patients with complex childhood-onset conditions. There will also be a dedicated APP with the support of Tiffany Pulcino, M.D.
- **Geographic Coverage:** Hospitalists and APP staff have been consistently assigned to the same units on inpatient floors to provide more uniform coverage and facilitate more team-based rounding. The goal is to have 100% of providers assigned in this way to enhance consistency.
- **Interdisciplinary Rounding:** Interdisciplinary Teams are rounding on patients on West 4, West 5 and West 7 patient units, with a positive impact. A standardized process has been developed for afternoon huddles with providers, nurses, and social workers to discuss potential discharges and barriers to discharge.
- **Grant Update:** Daniel Mendelson, M.S., M.D., FACP, AGSF, CMD, Associate Chief of Medicine, is playing a key role in an American Geriatrics Society initiative supported with a John



A. Hartford Foundation of New York grant to disseminate a national model for co-management of older adults hospitalized with hip fractures. The four year grant is in its third year.

- **Geriatric Fracture Textbook:** Highland’s Joseph Nicholas, M.D., along with Michael Blauth, M.D., and Steven Kates, M.D., published a comprehensive textbook regarding the optimal care for the management of osteoporotic fractures in older adults.



Emergency Department

- **Volume:** The ED saw volume growth of 1 percent in FY 19.
- In FY19, Highland's Emergency Department became the first in Upstate New York to receive the Geriatric Emergency Department Accreditation (GEDA). The silver standard – Level 2 GEDA recognizes emergency departments that provide excellent care for older adults.
- The ED completed the second year of its Emergency Nursing Residency Program, which has allowed the Emergency Department to maintain a more robust staffing pattern.
- The department once again earned its Primary Stroke Center Certification, which recognizes hospitals that meet standards to support better outcomes for stroke care. Highland Hospital has been a stroke certified center for 15 years.
- Tim Lum, M.D., was honored with a Rochester Business Journal Health Care Achievement Award in the Senior Care category.

ED Visits

	48,473	48,875	TOTAL
	1,544	2,034	
	33,834	33,314	
	13,095	13,527	
	FY 18	FY 19	

■ Admissions
 ■ Treat and Release
 ■ Left Without Being Seen

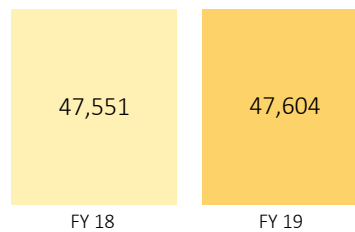


Volume

Cardiology

- **Volume:** The Cardiology Department saw nearly 1 percent growth in volume in FY 19.
- Jason Pacos, M.D., was named the Associate Chief of URMC Cardiology at Highland while Chad Teeters, M.D. serves as Chief of Cardiology and Executive Medical Director of Accountable Health Partners.
- Highland's Cardiology practice now has eight cardiologists and four nurse practitioners.
- A new RN case manager will be hired in 2019 to provide improved access to care and an enhanced care model to decrease cardiac readmissions to the hospital.
- Highland Sonographers and Cardiologists maintained the Intersocietal Commission for the Accreditation of Echocardiography Laboratories (ICAEL) certification of Highland's Echocardiography.
- Highland received the Get With The Guidelines® Heart Failure Gold Plus and Target: Heart FailureSM Honor Roll Quality Achievement Awards.

Cardiology Procedures—Highland and Red Creek (Inpatient & Outpatient)



Volume



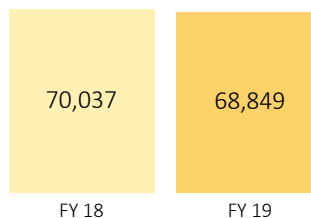
Highland Family Medicine

- **Volume:** Patient volume increased by 3 percent in FY 19, but patient visits were not as high as predicted due primarily to above average clinician disability leaves.
- Colleen Fogarty, M.D., MSc, FAAFP, was appointed as William Rocktaschel Professor and Chair of the University of Rochester Medical Center’s Department of Family Medicine in July 2019. Dr. Fogarty is the first woman to chair the department, succeeding Thomas L. Campbell, M.D., who stepped down after serving 16 years.
- Highland Family Medicine (HFM) will expand from seven to eight suites by January 2020.
- A new education space and new office space for the faculty was added October 2019.
- A community leader in addressing the opioid crisis, HFM provides universal substance-abuse screening, an integrated onsite certified alcohol and substance abuse counselor (CASAC), an expanded buprenorphine program
- A collaborative effort with the Highland’s ED provides buprenorphine to patients who survive opioid overdose and bridges them to care at HFM.
- Highland Family Medicine is involved in several New York State Delivery System Reform Incentive Program (DSRIP) initiatives focused on improving clinical outcomes and addressing barriers to care for Medicaid patients, including those concerning integrated behavioral health, transition care management, ED triage, health home care managers, and the integrated delivery system.

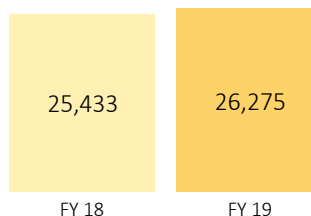
Primary Care

- **Volume:** In FY 19, Primary Care saw a 7 percent decrease in visits due to the departure of two physicians. Volume of patients has remained roughly the same.
- New providers at Highland practices include Raysha Crawford, M.D. at Webster Family Medicine and Anna Jack, M.D. at East Ridge Family Medicine.
- System network has more than 150 PCPs in 34 practices throughout the Rochester Region.

Highland Family Medicine Visits



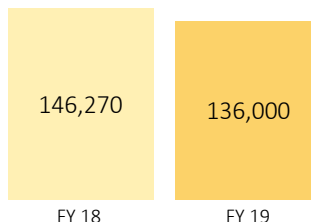
Highland Family Medicine Patients



Patient Volume

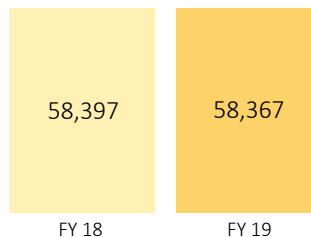
- A federal grant of \$1.65 million from the Health Resources & Services Administration continues to support a nurse practitioner residency program and help prepare clinicians for healthcare reform.
- Highland Family Medicine’s Nurse Practitioner Residency program has been accredited by the National Nurse Practitioner Residency and Fellowship Accreditation Commission.

Primary Care Visits



In FY 19 Primary Care saw a 7% decrease in visits due to the departure of two physicians.

Primary Care Patients





Building a New Tomorrow

In May 2020, Highland will begin construction of a \$70 million patient tower to continue to modernize our patient care facilities and achieve a crucial strategic goal: upon completion of the project, the hospital will have nearly all private patient rooms.

Patients prefer, and increasingly, expect a private room when they require a hospital stay. And with good reason: with private rooms, patients benefit from a reduced risk of hospital-acquired infections, more personal space, and the positive therapeutic impact of more privacy and less noise during recovery. From an operational standpoint, private rooms provide flexibility for surge capacity, better management of patient flow (including replacing the current process of blocking beds in semi-private rooms for patient gender), infection status, and routine maintenance.

Due to changes in city zoning regulations, Highland sought and received an updated zoning designation in March 2019 (a Planned Development District), which required approvals from the city of Rochester planning commission, city council, and mayor.

Highlights

- Four stories and a mechanical penthouse will add 80,000 square feet of clinical space atop the hospital's southeast wing (completed in 2016).
- Three of the floors will house a total of 58 private patient rooms and one floor will house other clinical programs.
- Enhancements to patient rooms will include large windows to maximize light, specialized acoustical elements to minimize noise, improved HVAC design, and patient and family amenities such as a desk area and sleeper sofa.
- Improvements to the patient unit include decentralized nursing stations to provide full patient visibility and decrease response time to patients, central work areas, expanded bariatric rooms with specialized equipment, and a designated Physical Therapy space to serve all three patient floors.



1. View of western side of new patient tower. **2.** View of new patient tower from Mt. Vernon Avenue. **3.** Decentralized nursing station gives nurses full patient visibility and decreases response time. **4.** Meditation rooms cap corridors and offer views of Highland Park. **5.** Broad and bright hallways include bench seating. **6.** Contemporary colors and lighting promote a calming environment. **7.** Private patient rooms provide ample space for treatment and visitors.



Facility Improvements and Additions

The FY 19 capital expenditures for facilities construction, renovation, and equipment totaled \$22 million and included the following major projects, among others:

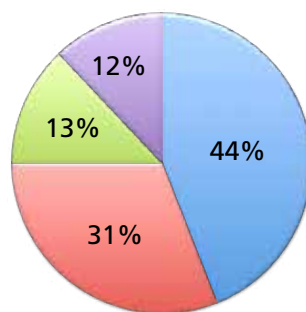
Highlights

- **Family Medicine Renovations**—\$2.7 million (\$3.3 million total). This project kicked off in FY 19 and will finish in FY 20. The renovations create a new centralized check in space, refurbished treatment area and increased capacity for the resident program.
- **OR renovations**—\$2.4 million (\$3.2 million total). This project creates six state of the art total joint replacement ORs.
- **New Patient Tower**—\$1.4 million (\$70 million budget). Architects and engineers have completed 75 percent of the project design and the Certificate of Need application was submitted to the New York State Department of Health. Approvals are expected in late fall 2019.
- **West 5 Refurbishment**—\$1.4 million. The West 5 inpatient unit was refurbished to improve patient perception of the hospital environment.
- **Special Care Nursery**—\$1.3 million (\$3.8 million total). The second phase of the Family Maternity Center’s renovation provided private rooms for all neonates, allowing parents to stay overnight when their babies require a longer hospital stay. (Phase 1, the Family Maternity Center Triage area, was completed in FY 18.)
- **Dialysis RO replacement**—\$495K. The water treatment system for the dialysis unit was replaced to increase safety for this patient population.
- **Culver Medical Group**—\$321K. This practice was renovated to make the clinic more efficient and able to handle more patients.
- **Sterile Processing Department (SPD) Renovations**—\$229K. The decontamination area within SPD was renovated to include two additional sinks to improve throughput of surgical instruments. The new sinks are designed to include staff ergonomics that improve working conditions for the SPD staff.

Information Technology: \$3.1 million

- The FY 19 capital expenditures for information technology totaled \$3.1 million and included equipment replacements as well as support of the ongoing growth of eRecord and the technologies that integrate with it to improve patient care. Some highlights include the following:
 - Ongoing improvements to MyChart, improving the patient experience and helping patients stay connected to their care.
 - Continued expansion of eRecord within UR Medicine system, providing better information on patients who receive care at different facilities within our system.
 - Successful integration of eRecord and Alaris pumps to reduce potential for medication errors in medical records.

FY 19 Capital Expense: \$25,176,875



- Construction: \$11,164,587
- Equipment: \$7,895,390
- IT: \$3,166,140
- Renovation/Facility Updates: \$2,950,759





Financial Performance

Highland achieved a 3.2 percent operating margin in FY 19 against a budget of \$413 million. Challenges that impacted financial performance included federal and New York state budget/reimbursement constraints, market forces impacting recruitment/retention, as well inflationary pressures on wages, supplies, pharmaceuticals, and other expenses not offset by comparable reimbursement rate increases. Our third-party payers continued their push to shift patients from inpatient to outpatient status resulting in lower reimbursement rates. Highland continued to meet these challenges through building volume/market share, in part through the ongoing implementation of our Facility Master Plan.

While the transition to Value Based Purchasing, “Pay for Performance,” still has not progressed as quickly as previously predicted, Highland continues to outperform both Centers for Medicare and Medicaid Services (CMS) and Excellus targets in FY 19, resulting in incremental revenues of approximately \$1.3 million expected in FY 2020.

Highland has achieved an average operating margin of 4.5% over the past 15 years, which far exceeds the current New York state average margin of one percent. In addition, Highland maintained a strong cash position of 162 days, which will help to fund operating and capital needs in the future. This continuing positive financial performance also helps us to maintain our A-level bond rating from both Standard & Poors and Moody’s.

Highland’s budget for FY 20 targets an operating margin of 3.4 percent, under a continuation of the predominant fee-for-service reimbursement methodology. Highland will continue to grow inpatient and outpatient volumes and market share in key clinical areas:

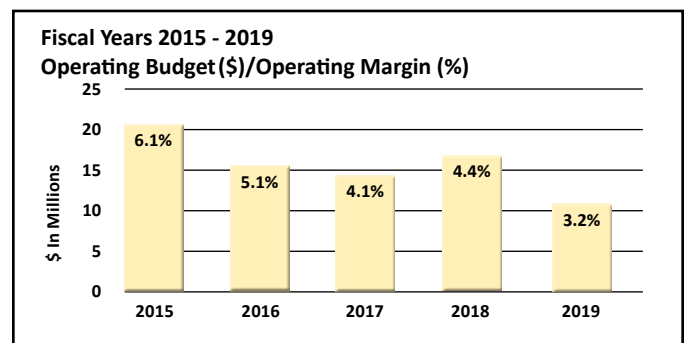
- Solid Tumor Oncology
- Orthopaedic Surgeries
- General Surgery

Key contributing factors to Highland’s success will include:

- A projected increase of 414 inpatient discharges
- Targeted outpatient volume growth
- Capital expenditures totaling \$36.1M

Key Financial Metrics (in thousands)	FY 18	FY 19
Operating Revenue	\$387,902	\$412,635
Operating Expenses		
Salaries & Benefits	\$230,435	\$240,270
Supplies & Other Expenses	\$117,181	\$134,284
Interest & Depreciation	\$23,271	\$24,703
Total Expenses	\$370,887	\$399,257
Income from Operations	\$17,015	\$13,378
Non-Operating Revenue	\$24,686	\$13,724
Change in Net Assets	\$41,701	\$41,346
Days Cash-on-Hand	148	162

Highland Financial Results vs. State Medians				
	2018	2019	Budgeted 2020	NYS Median
Operating Margin	4.4%	3.2%	3.4%	0.4%
Days Cash-on-Hand	148	162	152	53
Average Age of Plant	11	11	11.1	15.6





Delivery System Reform Incentive Payment Program

New York state's comprehensive health reform through the Delivery System Reform Incentive Payment (DSRIP) Program continues to focus on system reform, community collaboration, clinical improvement, and population health management for Medicaid patients.

Under the auspices of the UR Medicine DSRIP Program, Highland care management staff continues to implement projects at Highland Family Medicine (HFM), the Emergency Department, and in several of its safety-net primary care practices including East Ridge Family Medicine and Culver Road Medical.

- Initiatives are focused on transitions of care – from hospital to home – for Highland Family Medicine and the primary care practices, as well as care management for Medicaid patients provided by NYS Health Home care managers in primary care practices.
- DSRIP funding underpinned the following new initiatives introduced in FY 19:
 - Health Home Care Management and Community Health Care Workers in Primary Care: A DSRIP-funded expansion of workforce to improve patient access to and navigation through the care continuum.
 - Legal Aid Collaboration: Through DSRIP, HFM partnered with Finger Lakes Legal Care to provide legal services to patients. Medical-legal partnerships such as this help patients address structural problems at the root of many health inequities.
 - Capital Expansions and Renovations: DSRIP has funded a portion of the HFM capital expansion and Culver Road Medical renovations. Both of those projects were launched to better integrate behavioral health, primary care, and general care management into the primary care office.





Taking Pride In Highland FY 19

Highland encourages its staff members to strive for a better future for themselves and their families. In FY 19 the talents, dedication, and hard work of Highland's 3,090 employees supported the hospital's growth and helped us to achieve our Management Plan Goals.

Employee Engagement, Recognition, and Retention

Highland remains firmly committed to employee development and career growth.

- During FY 19, there were 269 internal promotions. Highland is proud to support the advancement of our strong internal candidates into new roles. As examples, one employee moved from food service into a Patient Care Technician position, and a maintenance staff member is being trained as a pharmacy technician.
- Additional career ladders were implemented in the maintenance department and for Perioperative Support Technicians, paving the way for employees in those areas to continue to grow and develop in their roles.
- Highland expanded certification pay to recognize employees who are committed to additional training and education. More than 300 employees are now receiving extra pay based on their certifications.
- Tuition Assistance continues to afford employees the opportunity to further their education with financial support. More than 100 employees were supported through this benefit.
- Highland Hospital was awarded the "LGBTQ Healthcare Equality Leader" designation from the Healthcare Equality Index 2019. Highland earned the top score of 100 in the HEI 2019 survey, which is sponsored and administered by the Human Rights Campaign.
- A LGBTQ Ambassador program was established in support of our inclusion efforts for our employees, patients, and families.
- Human Resources (HR) continued to facilitate periodic "pulse" surveys in departments across the hospital to monitor employee engagement and the results of action planning from the 2017 employee survey, which was administered again in Fall 2019.
- Our powerful recognition programs continued throughout the year including Employee of the Month, Service Recognition awards, various recognition weeks for functional areas (e.g. Nurses' Week), "Beat the Blahs" week in February, and Promise Week in May, all offering a variety of ways for Highland employees to celebrate and recognize each other and the great work that is done.
- Throughout the year, over 200 employees were recognized as Shining Examples by patients, families and co-workers.
- Continuing our commitment to employee wellness, Highland sponsored a wellness fair during "Beat the Blahs" week that had over 200 employees participate. Highland offers discounts on gym memberships and retail purchases and incentives designed to help staff live a healthy lifestyle. Highland has focused on adding more healthy options in its cafeteria, including Nathan's Soups, meatless grill options, and nutritious takeaway items and to-go salads.
- Employee Health Services launched Agility, an Electronic Medical Record system, which has streamlined and improved accuracy of records and eliminated paper charts, resulting in improved efficiency and accuracy.



Highland represents at the Rochester PRIDE Parade.



Talent Acquisition and Employee Attraction

Highland Hospital proudly attracts strong talent and continues to broaden and improve our talent acquisition tools and processes to ensure we're attracting the top candidates to join our team.

- In FY 19, the Careers web page was completely redesigned and streamlined to make it easier for applicants to learn about Highland and apply for our open positions, including a "Job Spotlight" category to showcase new and hard-to-fill openings.
- Through the new "face" to our career opportunities and by continuing to leverage social media and other recruiting methods to increase outreach to passive candidates.

Employee Compensation and Benefits

Highland continuously monitors and benchmarks our compensation and benefits practices in order to remain competitive in the job market and continue to make Highland an attractive employer. In FY 19 the following improvements were made:

- Enhanced the starting vacation benefit to minimum of three weeks of vacation for all eligible employees
- Initiated 403(b) "Auto-enroll" process for new hires to enable and encourage employees to invest in their retirement
- Added voluntary vision plan to allow for group participation in vision coverage for employees
- Increased dependent coverage to age 26 for dental and life consistent with all other benefit offerings
- Added domestic partner coverage for supplemental life insurance benefit
- Revised the paid-time-off (PTO) policy to allow for off-cycle position changes which provide more flexibility for employees transferring between roles

Learning & Development

The Center of Organizational Learning continued to expand our training offerings to meet the learning needs at both the hospital and departmental levels.

- Over 1,800 employees participated in more than 6,100 hours of instructor led trainings in 127 different training sessions.
- In our online learning platform, Achieve, there were 117,899 training sessions completed for a total of 20,494 hours of training throughout the year.
- We enhanced our partnership with the Employee Assistance Program and offered new workshop sessions tailored to assist employees personally and professionally.

Volunteers

- We continue to have robust and dedicated support from our Volunteer programs across the hospital, with over 400 individual volunteers across a variety of assignments contributing over 47,000 hours of service to our patients and their families.



Highland Volunteers celebrate National Volunteer Week in April.





Accountable Health Partners

Accountable Health Partners (AHP) is the clinically integrated network of the University of Rochester Medical Center and community providers that includes eight community hospitals in our system and more than 2,500 providers, including Highland Hospital and its employed physicians. AHP was organized in 2013 with a focus on delivering superior patient care, improving provider experience, and aligning incentives to make health care more affordable.

- With a vision for improving population health and medication-related outcomes, Manager of Pharmacy Services Erica Dobson, PharmD, and her team successfully piloted the integration of clinical pharmacy services in an outpatient primary care practice while leading initiatives focused on improving prescribers' preference for lower-cost medications. As a result of the pharmacy team's efforts, savings topped \$4 million.
- Laura Jean Shipley, M.D., joined AHP's clinical team as pediatric medical director. Working closely with AHP's pediatric care management team, Dr. Shipley led efforts throughout FY 19 to implement point-of-care lead testing throughout the network's pediatric and family medicine practices.
- FY 19 was a period of significant growth both in the number of primary care providers on contract and the number of covered lives attributed to the network's PCPs.
- The year also brought a number of successes under the network's value based contracts, establishing clinical contracts with significant gainsharing being distributed to the hospitals, physicians and other providers whose high-quality, high value care delivery contributed to those positive results.

Proud Community Sponsor

Highland supports more than 20 local non-profit organizations and events that align with mission and business objectives, community outreach goals, employee engagement and wellbeing, and system advancement.



Highland debuted hand sanitizer stations at the 2019 Lilac Festival.



Highland's sponsorships in FY19 include:

- Alzheimer's Association
- American Heart Association
- Anthony Jordan Health Center
- Business Association of the South Wedge Area
- Cancer Wellness Connection
- Gilda's Club
- Highland Park Neighborhood Association
- Lifespan
- Out Alliance
- Pluta Cancer Foundation
- South Wedge Planning Committee
- South Side Little League
- St. Joseph's Neighborhood Center
- Trillium Health
- Wilmot Cancer Institute



Highland providers and staff go the distance at Tour de Cure.

Neighborhood Relations

Highland is unique in Rochester in that it is not just a community hospital, but a neighborhood hospital as well. Highland has been an integral part of the Highland Park neighborhood for 130 years. We are committed to two-way, transparent dialog, and to that end, hold bi-monthly meetings as part of the Highland Park Neighborhood Highland Hospital Interaction Committee, with a purpose of sharing information, discussing and resolving issues, and airing concerns, questions, and perspectives. In FY 19, Highland and neighborhood representatives have formed two additional committees: a Parking Task Force that will explore issues related to parking in the neighborhood, and a Patient Tower Information Committee to serve as a conduit of information regarding the design and timeline of Highland's proposed new patient tower. The tower is currently undergoing site plan review with the city of Rochester as well as certificate of need review with the New York State Department of Health.

Highland maintains a facilities blog on its web site to keep neighbors informed of ongoing renovations and other facilities updates. Highland is invested in continued beautification of its campus, implementing recommendations from its Landscape Master Plan, created with input from Highland's neighbors in fall 2015.



Highland leaders pitched in at School 12 on the United Way's Day of Caring.





Highland Foundation

- Highland Hospital received a \$1 million donation from the LeFrois family for its private bed modernization project. The generous donation was announced at the 13th Annual Highland Hospital Gala. The LeFrois family has a long history of supporting and choosing Highland Hospital for their care. The private bed modernization project is part of an addition that will transform nearly all of Highland Hospital's patient care rooms to private.
- Highland Hospital's 13th Annual Gala, held April 6, netted more than \$300,000 (in addition to the \$1 million donation announcement from the LeFrois family) and kicked off Highland's campaign to support the Private Bed Modernization Project. A total of 1,021 seats were sold at the event where guests enjoyed cocktails, a whimsical garden theme, aerial performers, and music by the Silver Arrow Band. Special thanks to Highland Hospital's co-chairs Timothy Lum, M.D., Nancy McKnight, M.D., Richard LeFrois, Phyllis LeFrois, John LeFrois, Jennifer LeFrois, Matt Greenfield, and Maiya Greenfield for their vision and leadership.
- Longtime member of the Foundation Board, Mary Lou Huff, made a \$25,000 gift and challenged the members of the Foundation board to pledge and support Highland Hospital's modernization project. With gifts large and small the Foundation raised \$100,000 for the project and will be recognized in one of the family waiting rooms that will be constructed in the new patient care area when complete in 2022.



1. Left to right: John LeFrois, Rich LeFrois, Jennifer LeFrois, Phyllis LeFrois, Maiya Greenfield, Matt Greenfield, Nancy McKnight, M.D., Timothy Lum, M.D., Cindy Becker, and Steve Goldstein.
 2. An aerial artist serves champagne to a guest.
 3. Part of the Emergency Department team poses for a photo together at the Gala.
 4 and 6. Performers circulate the room, serving champagne on large tiered skirts.
 5. An aerial artist performs using silks during dinner.

Volunteer Boards

Highland is grateful for the significant, generous support it received from its volunteer Highland Hospital Board of Directors and Highland Foundation Board of Directors in FY 19.

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Vice Chair: Mark Eidlin
Secretary: Kathleen Whelehan
Treasurer: Brenda Lischerelli

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