



**Petersburg Borough
Petersburg Medical Center**

12 South Nordic Drive
Petersburg, AK 99833

**Meeting Agenda
Hospital Board
Regular Meeting**



Thursday, October 24, 2024

5:30 PM

Assembly Chambers

Please click the link below to join the webinar:

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1. Call to Order/Roll Call

A. Call to Order

B. Roll Call

2. Approval of the Agenda

3. Approval of Board Minutes

A. Approval of minutes for the September 19, 2024, board meeting.

4. Visitor Comments

5. Board Member Comments

6. Committee Reports

A. Resource

B. CAH

C. LTC

D. Infection Control

E. Kinder Skog Advisory

7. Reports

A. Case Management/Swing Bed Management
E. Hart provided a written report.

B. Chief of Staff
Dr. Hulebak provided a written report.

C. Clinic
K. Zweifel provided a written report.

D. Community Wellness
J. Walker provided a written report.

E. Dietary
J. Ely provided a written report.

F. Home Health
L. Holder provided a written report.

G. New Facility
J. Wetzel Arcadis provided written report.

H. Quality & Infection Prevention
S. Romine and J. Bryner provided written reports.

I. Executive Summary
CEO P. Hofstetter provided written report.

J. Financials
J. McCormick provided written report.

8. Old Business

9. New Business

A. Review of Hospital Board committee appointments

Current board appointments are as follows:

Quality Improvement Committees
Long term care: Marlene Cushing
Infection control: Joe Stratman
CAH: Joe Stratman

Resource Committee
Jerod Cook, Cindi Lagoudakis, Heather Conn

Joint Conference Committee
Board president (standing appointment)

Foundation Committee
Heather Conn

Community Engagement
Jerod Cook, Marlene Cushing,

Evaluation Committee
Jerod Cook, Marlene Cushing, Kim Simbahon

Bylaws Committee
Jerod Cook, Joe Stratman, Cindi Lagoudakis

Kinder Skog Advisory Committee
Cindi Lagoudakis

10. Next Hospital Board Meeting Date:

11. Executive Session

- A.** By motion, the Board will enter into Executive Session to consider medical staff appointments/reappointments.

12. Adjournment



Petersburg Borough
Petersburg Medical Center

12 South Nordic Drive
 Petersburg, AK 99833

Meeting Minutes
Hospital Board
Regular Meeting



Thursday, September 19, 2024

5:30 PM

Assembly Chambers

1. Call to Order/Roll Call

A. Call to Order

Member Cook called the meeting to order at 5:30pm.

B. Roll Call

Member Cook conducted roll call.

PRESENT

Chairman Jerod Cook
 Board Member Heather Conn
 Board Member Marlene Cushing
 Board Member Cindi Lagoudakis
 Board Member Kimberley Simbahon
 Board Member Mika Hasbrouck

ABSENT

Board Member Joe Stratman

2. Approval of the Agenda

Member Cook motioned for approval of the agenda. P Hofstetter commented he would like to add a legal update during executive session. Motion for approval of agenda with addition.

Motion made by Board Member Simbahon, Seconded by Board Member Lagoudakis.
 Voting Yea: Chairman Cook, Board Member Conn, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Hasbrouck

3. Approval of Board Minutes

- A. Approval of minutes for the August 22, 2024, board meeting.

Motion made by Board Member Lagoudakis, Seconded by Board Member Conn.
Voting Yea: Chairman Cook, Board Member Conn, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Hasbrouck

4. Visitor Comments

None.

5. Board Member Comments

None.

6. New Business

- A. M. Kamp provided an overview of the investment account. Investments are doing well at present. M. Kamp stated he will follow up by providing a performance review report to the Board.

7. Committee Reports

- A. Resource

Member Lagoudakis reported Trubridge has a new team we are working with however we are still moving forward with hiring our own in-house billing team.

- B. Infection Prevention

- C. Long-term Care

- D. Critical Access Hospital

8. Reports

- A. Pharmacy
 - E. Kubo provided a written report.

- B. Rehab Department
 - B. McMahon provided a written report.

- C. Plant Maintenance
 - W. Brooks provided a written report.

Member Cook inquired about the estimated remaining lifespan of the pipe mentioned in the written report and its diameter. W. Brooks responded, stating that the 4-inch diameter pipe is already in a failing state, as it is currently leaking.

- D. Activities
 - A. Neidiffer provided a written report.

- E. Environmental Services
 - G. Edfelt provided a written report.

- F. New Facility
 - Arcadis provided a written report.

- G. Quality & Infection Prevention
 - S. Romine and J. Bryner provided written reports.

- H. Executive Summary
 - P. Hofstetter provided a written report.

P. Hofstetter summarized key points from the written report, noting an increase in patient census in both the hospital and long-term care, as well as heightened activity in the emergency department. PMC has successfully hosted specialty clinics, offering dermatology, ENT, and behavioral health services to the community. Physician Assistant Keith Reilley, who visited PMC from Baltimore, conducted behavioral health training for providers and nursing staff.

PMC is now fully staffed with medical providers, improving access to care. Additionally, two clinic staff members are enrolled in nursing courses, contributing to the development of the local workforce. As we transition into fall, flu cases are emerging in the community. PMC is coordinating with Public Health to distribute flu vaccines, with the first point of dispensing (POD) scheduled for October 10th at the WAVE building from 3-6pm, and a second POD anticipated two weeks later.

In response to Member Cushing's inquiry regarding the high-dose flu vaccine, J. Bryner confirmed that it has been received and will be available soon, pending the preparation of consent forms.

PMC continues to work with HRG/Trubridge. While we have not been awarded two grants, we are still awaiting responses on four others currently pending. The construction of the new facility remains on schedule and within budget. Facility tours are offered every Friday at 5:30 PM, with varying levels of attendance.

- I. Financial
- J. McCormick provided a written report.

Makes note that the finance team is working on cost reports and preparing for audit.

9. Old Business

None.

10. Next Meeting

Scheduled for October 24, 2024.

P. Hofstetter notes that the Manager's Retreat is scheduled for 10/23/24 at the Lutheran Church.

11. Executive Session

By motion, the Board will enter into Executive Session to consider medical staff appointments/reappointments and receive update on legal matter.

Motion made by Board Member Cushing, Seconded by Board Member Hasbrouck. Voting Yea: Chairman Cook, Board Member Conn, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Hasbrouck.

- A. Reconvened after executive session.

Motion made by Board Member Cushing to reappoint pharmacist Heather Lefebvre, and radiologist Jerrell Ingalls, MD to medical staff, Seconded by Board Member Hasbrouck.

Voting Yea: Chairman Cook, Board Member Conn, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Hasbrouck.

12. Adjournment

Motion made by Board Member Conn to adjourn, Seconded by Board Member Cushing. Voting Yea: Chairman Cook, Board Member Conn, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Hasbrouck. Adjourned

approximately 6:15pm.



Petersburg Medical Center

Skilled Swing Bed Report October 2024

Workforce Wellness

- Skilled Swing Bed (SB) is staffed with Acute Care RN's. Swing Bed indicates a hospital room.
- Staffing has improved with 2 RN recent graduates, 2 RN returning from medical leave, and 2 RN travelers included in a total of 11 RN floor positions. 1 RN working as needed.
- 2 RN's are staffed on AC daily if able, and 1 RN is staffed nightly.

Community Engagement

- Currently unable to accept out of town referrals for SB patients due to full census of local patients.
- Networking with larger hospitals in Alaska (ANMC, Alaska Regional, Providence Anchorage) to establish contacts.
- Review online referrals from hospitals in the Seattle area (Swedish, Virginia Mason, Harborview).
- Majority of non-local skilled patients come from Bartlett Regional in Juneau.
- Maintain regular phone contact with Bartlett Regional, at least weekly, typically more frequent.
- Use screening tools (Skilled Screener, LTC Needs Assessment Tool, Infection Control Transfer Form) to assess medical appropriateness and level of care required.
- Review prospectives' insurance and discharge plan to ensure a smooth transition after the Skilled stay.
- Referrals are evaluated by the Nursing Department for Skilled Nursing needs.
- Referrals are evaluated by the PMC Rehab department for qualification and benefit from Skilled Rehab.
- Referrals then go to the PMC physician for approval and completion of a physician-to-physician report.
- LTC Medicaid Authorization for Swing Bed must be approved by DHSS prior to travel and stay.
- Widening the recruitment radius yields mixed results due to factors like payor source, medical/psychiatric complications, and discharge plan challenges.

Patient Centered Care

- Goal: Develop metrics for improving quality of care and achieving optimal outcomes.
- **Developed QIP: Within one week of discovery of need** for LTC level of care and need for Medicaid application assistance. Will notify Jen Ray PMC LTC Medicaid expert: Brandy Boggs HHSW: and Helen Boggs LTC DON.
- Current surveyed areas: readmissions, falls, skin breakdown, Notices of Non-Coverage, skilled patient days.
- Targeting improved communication between local and receiving providers for referrals, medevacs, and patients requiring skilled care; to better disseminate information on services offered.
- Highlighting PMC Skilled Nursing Facility's 24/7 RN staffing for IV therapy, medication management, and wound care directed by certified specialists.

- Emphasizing the advantage of having RN staffing, which is not typical in most Skilled Nursing environments.

Facility

- Obtained High Flow O2 delivery system. IV pump batteries replaced resulting in 100% IV pump functionalities.
- Using newer Sarah Steady Lift for assistance with transfers, to maximize patients' own core and lower extremity strength.

Financial Wellness

- Skilled Swing Bed (SNF SB) care patient days in the past 2 months: 3 (goal: 3 patient days).
- Average census, including all Swing Bed stays (some at LTC level of care): 3 average, many days 4-6 patients.
- No skilled readmissions within 30 days.
- No low inpatient census days. Requiring extra staff and nursing, CNA overtime. Staff stretched thin.

Submitted by: Elizabeth Hart RN Skilled Care Manager



Petersburg Medical Center

Chief of Staff Report October 2024

Workforce Wellness

Medical staff now has a full complement of providers. Dr Justin Morgan started on August 1, 2024. He graduated from Tacoma Family Medicine Residency and has signed a 1-year contract with PMC. He is working full-time.

The physicians are implementing a modified call schedule starting November 2024. The purpose of this change is to have the on-call physician more readily available for patients in the emergency room and hospital without disrupting or decreasing access to care in the clinic. The goal is for this to benefit patients, providers and PMC (financially). Kelly Zwiefel will be administering a survey to providers and patients prior to and after implementation of this schedule to help determine if the new schedule has met the goals. The scheduling for Angela Menish, FNP or Erik Hulebak, PA-C will remain unchanged.

Community Engagement

Dr Morgan was on KFSK in September to introduce himself to the community.

The physicians continue to precept 3rd year medical students for their 6-week family medicine rotation here in Petersburg.

Dr Hulebak has been working with Julie Walker to launch a chapter of *Walk with a Doc* here in Petersburg. The first walk was held in September 2024 and the 2nd is scheduled for October 12, 2024. *Walk with a Doc* is a nationwide program designed to “encourage physical activity and reduce the effects of a sedentary lifestyle”. The scheduled walk begins with a brief talk by a healthcare professional on a specific health topic, followed by a group walk. We aim to organize these walks every 1-2 months, keeping in mind that winter weather may affect our plans.

Patient Centered Care

PMC is dedicated to expanding services for our community patients, reducing the need for travel. Dr. Kamey Kapp, an optometrist from Nome, Alaska, visits the Specialty Clinic for one week every other month to provide care. Additionally, Dr. John Raster, an ENT specialist from Juneau, sees patients in Petersburg twice a year, with his most recent visit in September and plans to return in the spring. Cameron French, PA-C, offers dermatological care and recently saw patients in August. We are also pleased to announce that Dr. Sonkis, a psychiatrist, has joined PMC to provide consultations and telehealth services, with a monthly Saturday clinic scheduled.

Thanks to a behavioral health grant awarded to PMC, our providers had the opportunity to attend an informative session led by a behavioral health expert from Pennsylvania. The talk addressed the complexities surrounding substance abuse and its associated challenges.

Facility

No specific updates to report.

Financial Wellness

Our medical staffing is now at full capacity, and we no longer require locum providers.

Submitted by: Alice Hulebak, MD



Petersburg Medical Center

Joy Janssen Clinic Report Oct 4, 2024

Workforce Wellness

Over the past year the Joy Janssen Clinic has experienced stable staffing with minimal turnover. We recently interviewed candidates for our remaining open positions and are optimistic about being fully staffed by November. To address staffing shortages, we've begun cross-training medical assistants in the reception area, which has been particularly helpful. Currently, two of our team members are nearing completion of the Alaska Primary Care Association's Clinic Medical Assistant Apprenticeship program, and two others have enrolled in UAA's Nursing program. We are also recruiting an additional medical assistant and onboarding a new staff member for reception, including Medicaid Travel duties.

Community Engagement

The clinic continues to engage with the community through outreach and partnerships, including the following initiatives:

Community Initiatives:

1. Free Flu Shot Clinics (Upcoming)
 - October 10th & October 22nd: Partnering with Public Health to offer community flu clinics.
 - Flu shots are also available by appointment at the clinic.
2. Hypertension Quality Project 2023-2024
 - Health Fair (March 23, 2024): Provided free blood pressure screenings, education, and prevention resources to the community during blood draws and the Health Fair event. Approximately 85 people were screened.
 - Community Blood Pressure Clinics:
 - Held free blood pressure screenings at the local grocery store and coffee shop during Heart Health Month (February 2024) and referred patients as needed for follow-up care.
 - Remote home monitoring of blood pressure for selected patients.

Patient Centered Care

The clinic is dedicated to providing personalized care that meets each patient's unique healthcare needs. We are launching a patient satisfaction survey to gather feedback on their experience. Additionally, we continue to offer same-day appointments for patients who need to be seen urgently.

Access to Care Reports:

1. We are tracking the following measures for access to care.
 - i. Clinic Volumes
 - ii. Referrals
 - iii. First next available acute care appointment with PCP and third next available
 - iv. Same-day acute care visits scheduled daily.

2. **Clinic Volumes:** Clinic operations are largely driven by patient needs. The summer months tend to be busier due to the influx of tourism and summer workers.

Month	Total Clinic Visits	Total Encounters
January 2024	775	807
February 2024	683	710
April 2024	750	800
August 2024	619	690

APRIL 2024 Data	Numbers
Total Appt booked in Clinic	782
Total Clinic Appt Seen	750
Total Encounters	
Total Days Doctors in Clinic	48
Total Days all Providers in Clinic	79
Total Hospital Visits:	18
Total No-show Clinic	32

AUGUST 2024 Data	Numbers
Total Appt booked in Clinic	655
Total Clinic Appt Seen	619
Total Encounters	
Total Days Doctors in Clinic	53
Total Days all Providers in Clinic	74
Total Hospital Visits:	35
Total No-show Clinic	36

3. **Referrals:** These outbound referrals include internal and external referrals. Internal referrals are for: audiology, nutrition, rehab/therapies, home health, wound care, and behavior health. External Referrals are to any other specialist outside of Petersburg.

i. **2023 Quarter 1 Data:** 1/1/23 thru 4/30/23
 1. 857 referrals

ii. **2024 Quarter 1 Data:** 1/1/24 thru 4/30/24
 1. 781 referrals

iii. **Total Referrals from 01/01/24-09/09/24:**
 1. 1,454 referrals from clinic
 2. 97 referrals from Hospital & LTC
 3. Total Referrals = 1,551

4. Next Available Reports:

Next Available & Third Next Available:

Summary: In July, our availability is reduced due to staff PTO and increased demand during the busy tourist and fishing season. This is typical for this time of year. However, we still offer availability for same-day appointments for patients with urgent needs. In September access to care improved in most areas.

Sept 2024 Data:

Report Date:	09/06/2024		
Resource	Next acute with PCP	Next available open	Next third avail open
Provider #1	9/10/24: 4 days	9/20/24: 14 days	9/25/24: 19 days
Provider #2	9/11/2024: 5 days	9/23/24: 17 days	9/30/24: 24 days
Provider #3	9/12/24: 6 days	9/25/24: 19 days	9/30/24: 24 days
Provider #4	9/06/24: 0 days	9/10/24: 4 days	9/12/24: 6 days
Provider #5	9/6/24: 0 days	9/9/24: 3 days	9/11/24: 5 days
Provider #6	9/9/24: 3 days	9/10/24: 4 days	9/13/24: 7 days
Avg days to wait	3	10	14

July 2024 Data:

Report Date:	07/5/2024		
Resource	Next acute with PCP	1st Next available open	3rd Next avail open
Provider #1	7/5/24: 0 days	7/22/24: 18 days	7/24/24: 20 days
Provider #2	7/8/2024: 4 days	7/16/4: 12 days	7/24/24: 20 days
Provider #3	7/8/24: 4 days	8/15/24: 42 days	8/19/24: 46 days
Provider #4	7/5/24: 0 days	7/10/24: 6 days	7/12/24: 8 days
Provider #5	7/5/24: 0 days	7/15/24: 11 days	7/16/24: 12 days
Avg days to wait	1.6 days	17.8 days	21 days

April 2024 Data:

Report Date:	04/10/2024		
Resource	Next acute with PCP	Next available open	Next third avail open

#1 Provider	4/15/24: 5 days	5/1/24: 21 days	5/2/24: 22 days
#2 Provider	4/10/24: 0 days	4/16/24: 6 days	4/18/24: 8 days
#3 Provider	4/16/24: 6 days	4/23/24: 13 days	4/23/24: 13 days
#4 Provider	4/11/24: 1 day	4/11/24: 1 day	4/11/24: 1 day
#5 Provider	4/12/24: 2 days	4/12/24: 2 days	4/15/24: 4 days
Avg days to wait:	2.8	8.6	9.6

October 2023 Data:

Report Date: 10/24/2023			
Resource	Next acute with PCP	Next available open	Next third avail open
#1 Provider	10/26/23= 2 days	11/14/23= 21 days	11/15/23= 22 days
#2 Provider	10/26/23 = 2 days	11/3/23 = 10 days	11/15/23 = 22 days
#3 Provider	10/28/23 = 4 days	11/17/23 = 24 days	11/22/23 = 29 days
#4 Provider	10/24/23 = 0 days	10/26/23 = 2 days	10/26/23 = 2 days
#5 Provider	10/24/23 = 0 days	10/24/23 = 0 days	10/30/23 = 6 days
Avg. days to wait	1.5	11	16

Number of Same Day Acute Care Appointments Scheduled:

Summary: The average number of same-day acute care (urgent care) visits scheduled per day significantly increases during the summer months. This trend began in May. In the winter, we typically see 8-12 visits per day, but this rises to 10-16 visits per day in the summer. (Some days even higher getting closer to 20 per day). Additionally, our provider or on-call doctors also have had an increase in ER visits per day during this timeframe.

Week Ending: 8/10/2024	
Date	# Of Same Day Acute Care Appts
Monday 8/5/2024	6
Tuesday 8/6/2024	2
Wednesday 8/7/2024	7
Thursday 8/8/2024	4
Friday 8/9/2024	8
Saturday 8/10/2024	12
AVERAGE:	6.5

Week Ending: 7/20/2024	
Date	# Of Same Day Acute Care Appts
Monday 7/15/2024	15
Tuesday 7/16/2024	14
Wednesday 7/17/2024	12
Thursday 7/18/2024	10
Friday 7/19/2024	10
Saturday 7/20/2024	6
AVERAGE:	11

Week Ending: 5/4/2024	
Date	# Of Same Day Acute Care Appts
Monday 4/29/24	19
Tuesday 4/30/24	10
Wednesday 5/1/24	11
Thursday 5/2/24	6
Friday 5/3/24	7
Saturday 5/4/24	6
AVERAGE:	13

Week Ending: 6/29/2024	
Date	# Of Same Day Acute Care Appts
Monday 6/24/24	14
Tuesday 6/25/24	11
Wednesday 6/26/24	8
Thursday 6/27/24	9
Friday 6/28/24	14
Saturday 6/29/24	9
AVERAGE:	10.8

Facility

The Joy Janssen Clinic team, comprising of the Clinic Manager, Assistant Manager, Medical Director, Medical Assistants, and Reception Supervisor, are actively participating in the planning of our new facility. We regularly attend meetings to offer input regarding the design and operational flow of the clinic. In recent months, we have not had regular meetings related to the new facility.

Financial Wellness

The clinic is pursuing strategies to boost patient volume and optimize provider schedules to enhance revenue by the following techniques:

1. Implementing new call schedule that is beneficial to the cost report reimbursement model and provides continuity of care for patients and provider.
2. Management and registration staff diligently addressing work queues.
 - Reviewing accounts to identify and rectify issues or errors in the registration process.
 - Preventing delayed reimbursements or claim denials.
3. The clinic has made a concerted efforts to secure increased reimbursements for care management services by:
 - Focusing on Chronic Care Management and Transitional Care Management programs
 - Encouraging wellness visits including well child, well-women, physicals, and Medicare wellness visits.
 - Implementing remote home monitoring through the HealthSnap program.

Submitted by: Kelly K. Zweifel, Clinic Director



Petersburg Medical Center

Community Wellness and Public Relations Report October 2024

Workforce Wellness

The Community Wellness Department gained one employee during the past six months. This position is primarily grant funded and supports the Tobacco Prevention and Control and Fall Prevention grant projects within our department. The Community Wellness Manager has taken the role of Public Relations in addition to continuing as the Community Wellness Manager. This transition has gone well and Community Wellness seems like a natural fit for Public Relations duties.

Public Relations has been partnering with Human Resources to implement new strategies for recruitment including newspapers statewide, Indeed, and Facebook advertising. Outcomes and cost benefit analysis for these recruitment strategies are being tracked. PMC has seen a 30% increase in the traffic to our Careers page within the past 90 days. This suggests new strategies (especially online) are effective in engaging and will hopefully lead to improvements in recruitment over time. Other strategies include highlighting departments on social media each month. Work will continue on these recruitment strategies, and they will evolve along with our Branding and Refresh project.



The Community Wellness Department oversees the Employee Wellness program, which continues to support staff health, wellness, morale and retention in a variety of ways. PMC's *Bravo Employee Wellness Incentive Program* was open from January 2024-April 2024 and had 45% of eligible staff and spouses participate, similar to the past two years. This program provides monetary incentives to eligible staff and spouses for meeting program requirements such as biometric screenings, health coaching programs, cancer screenings and for achieving set health metrics such as blood pressure and cholesterol. Ninety percent of participants maintained or eliminated at least one health risk since the previous year (blood pressure, BMI, cholesterol, or blood glucose). PMC will be entering a contract with a new third party wellness vendor in 2025 due to Bravo no longer continuing to offer these services. This provides an opportunity to provide new motivations and incentive

structures for wellness program engagement. PMC continues to offer access to *Betterhelp* for employees (online behavioral health), which continues to be well utilized and receive positive reviews. Over the past year, PMC has had an average of seven active *Betterhelp* users each month, with a satisfaction rating of 4.47/5.

Community Engagement

Community engagement is a key focus of our department. Community Engagement efforts include coordinating the monthly PMC Live Radio show, publishing the quarterly PMC Community Newsletter, managing social media sites, and installing new digital screens throughout the facility for new information sharing channels. The PR Manager has also been dedicating time over the past several months to updating the PMC website, which is a long-term project. PMC’s Facebook page reach and interactions have increased significantly in the past 90 days (84% and 99% respectively).

Additionally, PMC has hired Element, an Alaskan based graphic design firm, to work with local artist Grace Wolf to update and refresh PMC’s branding and logo. This will allow all our public-facing and internal materials to follow consistent look and feel and focus on strategic communications priorities. The project began in September and has had several opportunities for staff input including a survey and a visioning session. New branding guidelines and refreshed logo will be presented to the PMC Board for review in December.



The Community Health Needs Assessment is currently being conducted. This is a requirement for non-profit hospitals to conduct every three years to identify community health needs and adopt an implementation strategy for how to address them. PMC is partnering with Petersburg Public Health to conduct this assessment. The team is finishing key informant interviews and will be implementing a community wide survey to gather input in November. The final report is scheduled to be completed in Spring 2025.

Community and Staff Trainings:

Community Wellness staff facilitated a full-day Youth Mental Health First Aid (YMHFA) training for community members this month. YMHFA teaches adults how to recognize and respond to the signs and symptoms of a mental health challenge in young people. The program is designed for people who regularly interact with youth, such as guardians, teachers, school staff, coaches and caregivers. (6 participants)

Community Events:

The annual Pedal/Paddle Battle biking/kayaking fundraiser event was put on in partnership with the PMC Foundation. The event raised approximately \$17,000 to support continuing education for PMC staff and scholarships for graduating PHS seniors entering the healthcare field.

Wellness staff is working on a “[Helmets are Sweet](#)” initiative to educate and promote helmet wearing. Staff worked with Partners in Education (PiE) to put on [Roll and Stroll to School Day](#) last month Helmets and reflective vests were distributed to elementary students (78 bikes; 24 helmets distributed). Funding for helmets for the ongoing initiative coordinated by SHARE is provided by PVFD, SOA Injury Prevention Unit, and American Legion.

Youth Programs:

The Kinder Skog program, with both half-day and full-day options, served a record 93 youth this summer. For the first time, every youth on the waitlist was offered a summer enrollment spot. Five ORCA Camps were offered this summer, enrolling 48 participants aged 6-16. Camps included [theater camp](#), a [kayaking expedition](#) with Onward and Upward, fly-fishing camp with Tlingit and Haida, a running camp, and a basketball camp. With a team of 13 summer staff, the programs successfully promoted health, wellness, social-emotional learning, physical activity, and so much more.

Patient Centered Care

Fall Prevention Programs:

PMC is in year two of a four-year grant to offer evidence-based fall prevention programs. [Tai Ji Quan: Moving for Better Balance](#) and [Bingocize](#). Bingocize is being offered at Parks and Rec as well as within LTC and Mountain View Manor. All programs are going well, with continuing increases in participation with each workshop.

Program	Workshops Completed	Participants
Bingocize	5	68
Tai Ji Quan	2	52
Tai Ji Quan (remote)	1	7
Total	7	127

Tobacco Prevention and Control:

PMC’s Tobacco Prevention and Control grant project has gained momentum since hiring a dedicated Project Coordinator. PMC has updated our current Tobacco Free Campus policy to adopt more inclusive language for all types of tobacco and nicotine products (rather than just cigarettes). Annual staff training on tobacco addiction, cessation resources, and skills for asking and advising patients to quit will be implemented this Fall. Last year’s clinical staff survey indicated that most staff felt they needed additional training in these areas. Patient waiting areas and clinic rooms are being outfitted with digital screens to promote PMC events, health education messages, and resources. These screens are funded by the State of Alaska Tobacco Prevention and Control grant.

Facility

PMC Community Wellness Team will participate in transition planning meetings with leadership as the move to the WERC building approaches.

A dedicated permanent space continues to be a priority for our Youth Programs. While staff have been extremely creative with the spaces they currently rent from the Petersburg Lutheran Church, the ability to expand PMC’s youth programming is very dependent upon facility space.

Financial Wellness

The PMC Youth Programs has applied for accreditation through the American Camps Association (ACA). They completed a site visit this summer and we expect to receive our accreditation status by November. This status not only requires high quality and safety standards for our programs, but it will also allow PMC to accept financial assistance for low income families through the State of Alaska. This will be a great opportunity for financial stability for PMC and decrease the need to fundraise to support program scholarships.

Submitted by: Julie Walker, Community Wellness and Public Relations Manager



Petersburg Medical Center

Food & Nutrition Services (F&NS) / Dietitian Report October 2024

Workforce Wellness

The Food & Nutrition Services (F&NS) Department has been fully staffed since January 2024. One FT cook left for a scheduled FMLA leave this week and I was able to bring in a temporary cook from out of state who has worked with us before. It should be an easy transition to cover the leave. One part-time Diet Aide is currently on unplanned FMLA leave of absence, but we hope they return soon. I am looking for one more Diet Aide to fill in gaps in scheduling with these absences.

Community Engagement

Collaborating with the LTC activities department, we hosted two bar-b-ques at Sandy Beach this summer. Both events were very successful with over 30 guests at each event. We also had a nice Volunteer Appreciation event in June, and helped with the food at the Paddle/Peddle Battle.

We continue to provide a hot lunch meal to the Cedar Social Club's home health program.

Patient Centered Care

Since our Medicare Survey, we implemented an "always available" menu residents/patients can order from if they don't like the meal. Several people take advantage of this each week. Our next departmental goal will be to start taking meal orders for all residents/patients who are able to make meal choices so they have a say in what is served to them. I am creating the new process for doing this now, and am actively recruiting internal candidates who are interested in talking with the residents and obtaining meal orders.



Summer LTC picnics at Sandy Beach



Volunteer Appreciation party in June

Facility

I am happy to report that we have no new equipment issues! Everything is working and we are very happy with our new stove and oven (pics to left). Both had to be replaced and were installed in September.



Financial Wellness

Whenever we need new supplies or equipment, I am always focused on what is useful both, now in the current building, and later in the new hospital. We also focus on taking care of our existing and new equipment.



Submitted by: Jeanette Ely, RDN



Petersburg Medical Center

Home Health Report October 2024

Workforce Wellness

The Home Team has had many changes in the past few months. We have hired a full-time RN and our travel CNA has decided to commit permanently to Petersburg and has transitioned to permanent status in an expanded role. Laura Holder RN remains the permanent manager of the department. Current staff include 1 travel nurse, 1 new hire permanent nurse, 1 new hire permanent CNA/clerical assistant, and adult day activities assistant. The ancillary staff, billing, quality and patient navigator all remain stable. Twice weekly “huddles” for clinical staff are ongoing to review caseloads, patient acuity, and any immediate department needs. This also helps to improve patient care and creates cohesiveness among staff. Twice a month the therapy department joins us for case review and coordination. (IDT meetings.) These are documented in the patient electronic medical record and have improved continuity of care. We celebrate monthly birthdays as a team. We are committed to supporting staff with ongoing training that benefits our department and community. Two nurses will be attending the wound care conference in Anchorage (Oct 21-25, 2024). These skills will be valuable for patient care in and out of our department.

Community Engagement

The priority of this department is to reach as many community members as possible. Whether through traditional home health services, program extensions or working directly with other community agencies. Ongoing projects include- partnering with Mountain View Manor, waiver and care coordinating services, and assistance with the quality programs throughout the hospital. The Healthsnap program has started for patients within the community and has been well received. We have initiated our “soft launch” programming in adult day in our new space within the PIA building. This collaboration has been integral to the success of this important outreach respite program. We have recently received a 3-year funding grant for the Adult Day program, and we look forward to expanding services using this grant.

Patient Centered Care

The clinical staff here in Home Health continue to go above and beyond providing support and care to the patients we serve. Though we do not yet offer traditional Hospice, we continue to provide in-home care for end-of-life patients under our care. The kindness and respect along with strong clinical skills offered to these patients and their families is exceptional. This is an area of focus for expansion of our programs in the region both for meeting community needs, but also financial sustainability for the department as a whole.

Facility

The home health department is fortunate to have a space within the PIA building that works well for our initial launch of adult day. PIA also houses our storage room for DME and the administrative office for home health. This space is a great fit for our department, and we appreciate PIA for the opportunity to work out of their building. This collaboration continues to be beneficial for community outreach and program sustainability.

Financial Wellness

Home Health continues to have some financial challenges, but we have seen census stabilization over the last quarter and with the help of travel nurses we have recently had 27 admissions over the last four months. Our internal goal is to maintain a census of 22, currently we sit at 23 patients in the community. In addition, our quality nurse provides support to LTC and assists in managing the quality needs within the PMC community. The patient Navigator works across departments and into the community to provide support and resources. Ongoing projects include- partnering with Mountain View Manor, Waiver and care coordinating services, including the potential of an adult day program and the opportunity to provide respite care. We continue to see positive results from these efforts.

Submitted by: Laura Holder, RN, Home Health Manager



Petersburg Medical Center



Construction Report - October 2024

Sitework

Gjoa Street utility extension was successfully completed; manholes, vaults, water, sewer, power, and communication underground pathways have been installed. This work included connections and reconfigurations to residential homes affected by the water and sewer extensions to the new PMC site.

The transformer has been set on PMC property to feed power to the new WERC building. Water and sewer have also been routed through the property and tied into the new building, this includes the extension to the hospital site for future ties. Rock N Road is currently working on installing the Storm Drain system.

WERC Building

Interior metal framing is 85% complete and on-going, mechanical, and electrical rough-in is also about 75% complete. Window installation is nearly complete and insulation at exterior walls has been started. Vaproshield WRB exterior wrap has been completed and protects the glass gyp sheathing until the clad build-up with additional insulation and siding can be installed.

The design team is currently working on a new variation of the MRI addition that has been coordinated with Siemens and ETS Lindgren to provide a comprehensive plan that better fits the space. The objective is to get the contractor a foundation plan in time to pour the footings before winter freeze up so that the Addition can be built in parallel with the building and eventually catch up to sequencing.

New Hospital Design

Further design progress is on hold pending grant funding. The Phase 5 wetlands permit has been submitted, and approval can take 4-5 months.

Upcoming Construction Activities

- October – Interior Metal Framing, Mechanical and Electrical Rough-In, Gypsum wallboard installation.
- November – Clad and Siding, Gypsum wallboard installation, Taping, Painting, Pour exterior slab concrete, MRI Addition Foundation.
- December – Clad and Siding, Gypsum wallboard installation, Taping, Painting.

Budget

- WERC budget – \$22.7 M
 - CCPF Treasury Grant – \$20 M
 - HRSA Grant – \$2.7
- Hospital Sitework & Design Budget up to 35% – \$5.3 M
 - HRSA Grant – \$5.3 M

Submitted by: Justin Wetzel – Arcadis Project Manager

Vaproshield WRB Installation



Mechanical & Electrical Rough-In





Petersburg Medical Center

Quality Report October 2024

Workforce Wellness

Quality staff is scheduled to engage in AHHA's Social Determinants of Health (SDOH) Collaborative starting this week. The Quality Director (Phil) will be attending AHHA's Health Equity Summit on October 29th.

Community Engagement

Community Health Needs Assessment-The team is just finishing up with key informant interviews conducted with a wide variety of identities, roles, and lived experiences within our community. These interviews will inform the contents of the upcoming community survey. Timeline for publication is April 2025.

Tai Ji Quan Moving for Better Balance-The next remote/zoom class will start October 21st. Technical assistance is available as needed to help reduce any barriers to participation. Community outreach for this program resulted in new contacts within the SEARHC network, Wrangell, and Kupreanof.

Patient Centered Care

Working with department managers this month to update key performance indicator stats and goals as they relate to the PMC strategic plan.

The Medicare Beneficiary Quality Improvement Project (MBQIP) reporting will include health equity measures in 2025 with required reporting in 2026. These consist of a 'commitment to health equity' and two new measures requiring the collection of data on the Social Determinants of Health (SDOH). The scheduled AHHA activities (mentioned above) will help to inform PMC activities related to SDOH screening and resource linkage.

Facility

The Quality Committee for LTC will meet on October 16th to review this month's data and provide updates on identified action items. Additions to the committee include Amy O'Connor and Rachel Kandoll with Infection Prevention.

The annual review and update of the LTC Facility Assessment will begin this week. Staff will be working to incorporate new regulatory requirements related to staff retention and contingency planning. The purpose of the assessment is to evaluate the resident population and determine what resources are necessary to care for residents competently during both day-to-day operations and emergencies. Board member input is required in this process.

Financial Wellness

No new information in this area.

Submitted by: Stephanie Romine, RN



Petersburg Medical Center

Infection Prevention and Control Report October 2024

Workforce Wellness

Amy O'Connor and Rachel Kandoll are both actively working at PMC!

Community Engagement

The ICAR results have been received and will be utilized to help determine our priorities in quality improvement initiatives.

Infection Prevention and Control (IPC) staff are meeting with departments, providing education, publishing practice alerts, implementing new processes, improving old processes, reviewing and revising policies, and participating in organizational meetings and huddles.

Patient Centered Care.

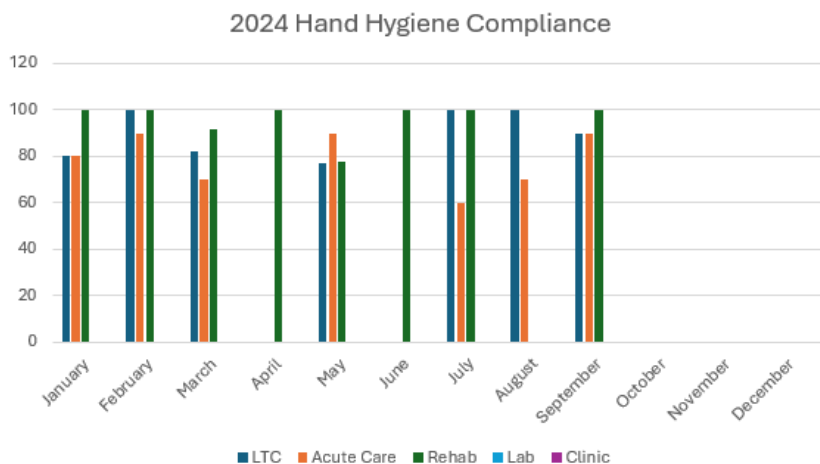
Vaccine status for LTC residents

Influenza: 87% Up to Date, all have been offered vaccine protection.

Covid: 79% Up to Date, all have been offered vaccine protection.

RSV: 8% Up to date, active planning, prescribing, and vaccination in process.

2024 Hand Hygiene Compliance



LTC 2024 Infection Prevention Metrics:

Urinary Tract Infections (UTI): 1

Catheter associated Urinary Tract Infections (CAUTI): 1

Clostridium Difficile infections: 0

Covid-19 infections: 3

Influenza infections: 0

RSV infections: 0

Facility

No changes. Our aging facility continues to cause obstacles to meet current IPC standards.

Financial Wellness

No changes.

Submitted by: Jennifer Bryner, MSN, RN



Petersburg Medical Center

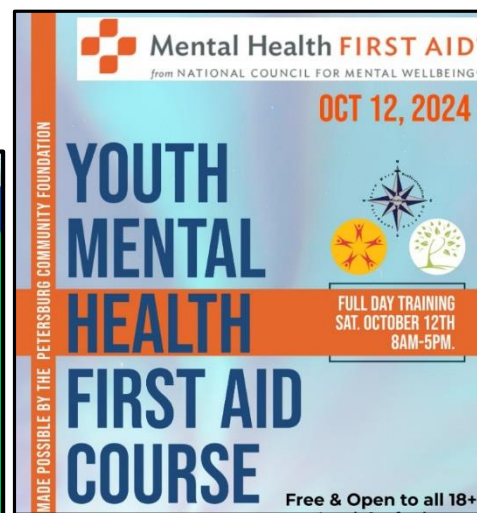
CEO Board Report October 2024

Mission Statement: Excellence in healthcare services and the promotion of wellness in our community.

Guiding Values: Dignity, Integrity, Professionalism, Teamwork, Quality

Community Engagement: Goal: To strengthen the hospital’s relationship with the local community and promote health and wellness within the community.

- Sept 23-26th AHHA board meeting and annual conference.
- Community can sign up online for site tours every Friday afternoon at 5:30pm at www.pmcak.org.
- Continued community classes Bingocize and Tai Ji Quan.
- Oct 7th -Attended and reported at Borough Assembly Meeting
- Oct 8th-Meet and greet with new assembly member James Valentine.
- Oct. 12th- Youth Mental Health First Aid Course hosted by PMC staff at the WAVE building.
- Oct 12th-Walk with a Doc; walk begins at Hungry Point Trail by the ball field. Topic was Breast Cancer awareness and prevention.
- Online survey available for those wanting so submit suggestions and ideas for road naming. Suggestions due by 10/31/24.
- Oct. 24th- KFSK PMC Live.

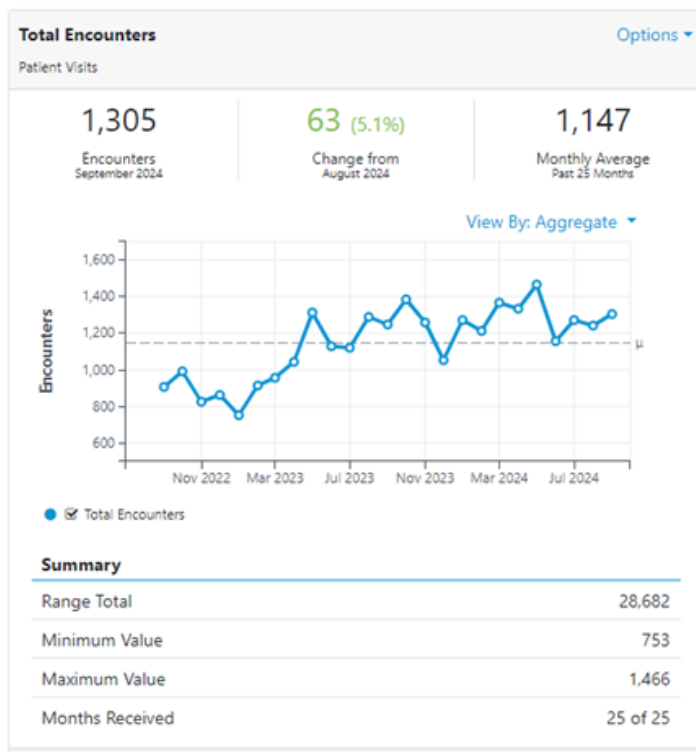
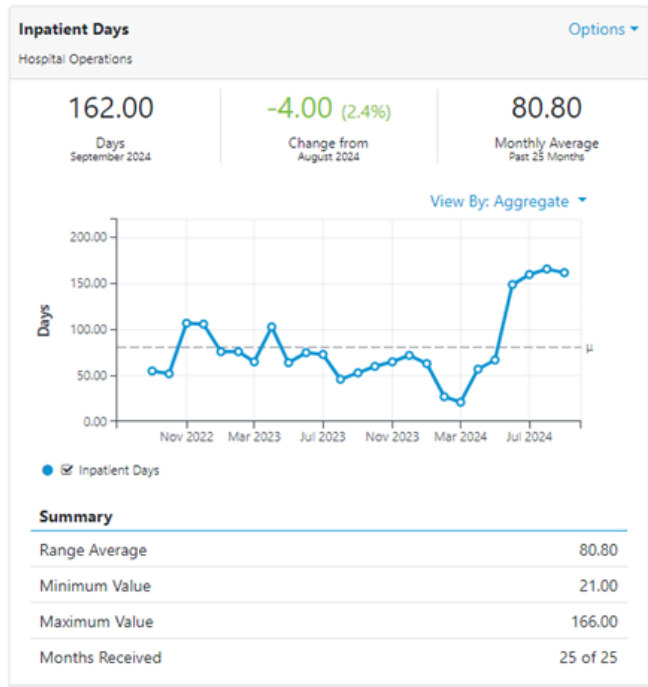
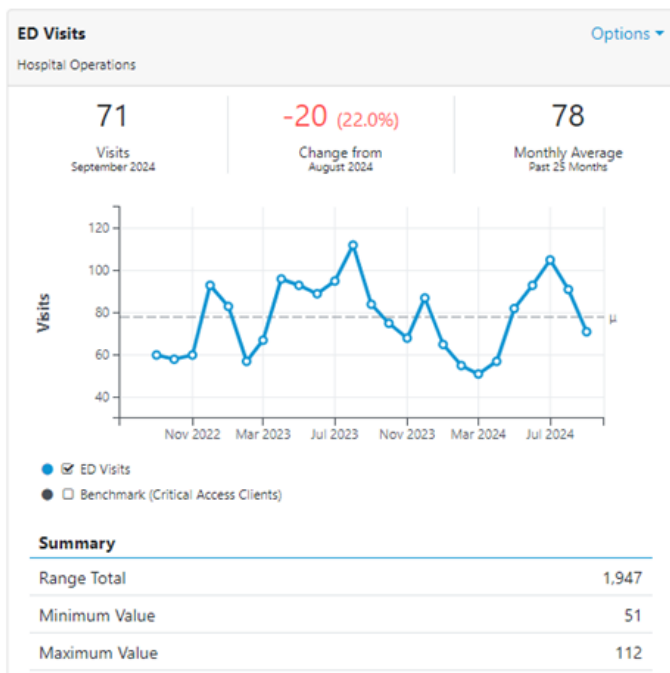


Financial Wellness: Goal: To achieve financial stability and sustainability for the hospital.

FY23 Benchmarks for Key Performance Indicators (KPIs): Gross A/R days to be less than 55, DNFB < then 5 days, and 90 Days Cash on Hand

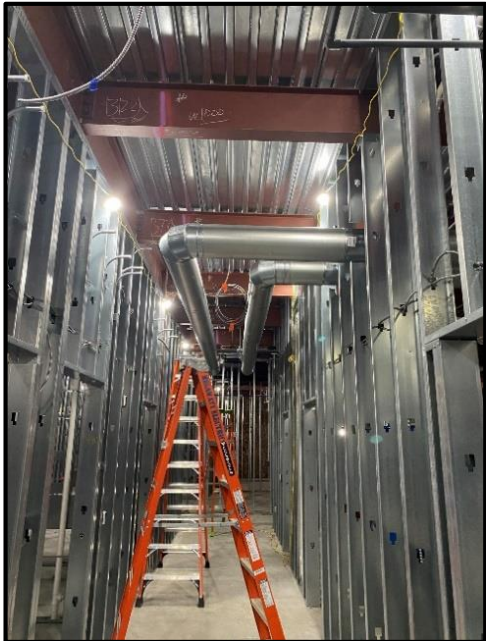
- **Accounts Receivables (AR) Update:** Accounts Receivables (AR) continue to hover around 80-83 days. The revenue cycle team works tirelessly to improve this metric with a target of 55 days. We are continuing to advance by bringing this aspect of revenue cycle in-house and have hired our first employee in this role!

- The finance packet includes the September FY25 financials. This will mark the end of the first quarter in FY25. As a comparison from the previous year the financials are the strongest quarter we have seen in years with collections approaching \$2M consecutively.
- The finance team continues the process of preparing for the FY24 full audit.
- September month close showed a significant receivable due to the high volumes this summer in inpatient, swing bed and LTC.
- The status of the grants for FY25 is attached. We have secured 6 grants, some of which are multi-year totaling \$423,722 for FY25 and \$585,366 in FY26-27. We have still two pending grants related to the new facility, one is the appropriations for \$3M and the other is USDA telemedicine and technology grant for \$640k.



New Facility: Goal: To expand the capacity and capabilities of the community borough-owned rural hospital through the construction of a new facility, while taking into account the needs and priorities of the local community. Arcadis submitted the update on the new facility and we continue to be on track and on budget for the WERC building. Transition planning with the departments that will move will continue monthly until the move date next summer/fall. Design completed for MRI contract was signed pending RFP process, Certificate of Need application will be submitted.

- Site Preparation: Site preparation is complete for the full 4.9 acres of wetlands permitting. Permitting for the additional area by the northeast corner will be in process.
- Progress on WERC Building: Progress continues with interior metal framing, mechanical & electrical rough in and some interior work. The windows are being installed and MRI foundation poured in November.
- Updates: Project updates are available on the PMC website under the “New Facility & Planning” tab. Photos are updated on social media every Friday afternoon.
- Tour of the Sites: Guided tours of the site for community are scheduled every Friday at 5:30pm, sign up available on PMC website. The number of community members dwindles into fall but we will continue to hold these weekly.
- Senator Murkowski Appropriations: PMC is on the list for \$3M, which needs to make it through congressional approval still and we are monitoring
- Lead-Up to State Capital Budget, Governor’s Budget, and State Bond: PMC will need to continue advocating as the #1 federal and state priority for next FY. This advocacy is vital to assist PMC to secure grants and funding. We are reviewing alternatives to funding through multiple federal programs.



Workforce Wellness: Goal: To create a supportive work environment and promote the physical and mental well-being of hospital staff, in order to improve retention rates and overall productivity.

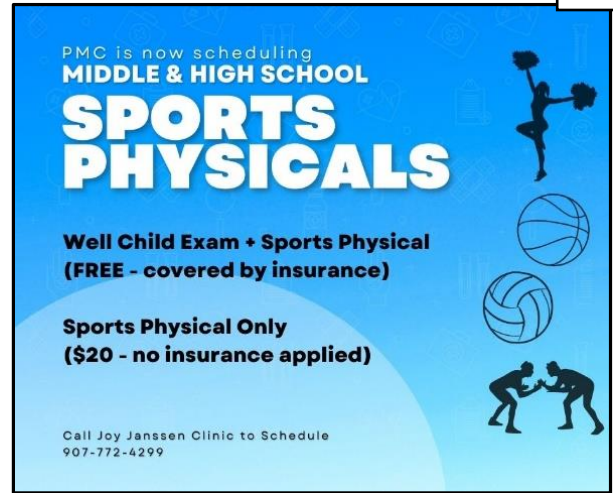
- PMC welcomes Rachel Kandoll, RN taking on the role of Infection Prevention, Michael File as Facility Engineer.
- 10/23/2024 -Annual Managers Retreat
- PR is also collaborating with the Anchorage-based firm Element and local artist Grace Wolf to refresh and improve the PMC logo and brand.
- CEO Office Hours each month
- Abbey Hardy and Becky Turland conducted a series of de-escalation training for all staff this month.
- Keith Reilley, psychiatrist NP from Baltimore OPC provided training to nursing staff and medical staff with a series of trainings as part of the BHS telepsychiatry grant on Sept 16-18.
- Employee engagement efforts this month included the new internal newsletter Cyndi Newman in HR creates. This month highlights Physical Therapy Staff, Medical Assistants, Healthcare supply chain week, and National Boss's Day.



Patient-Centered Care and Wellness: Goal: To provide high-quality, patient-centered care and promote wellness for all patients.

- The Cedar Social Club adult day program has new certification allowing more people to participate and receive services. Thanks to a state grant there is now three years of funding that will help the Cedar Club benefit more people for more times during the day.
- The Home Health Department is now approved for Medicaid waiver program of adult day services and this continues to develop.
- Access to care:
 - Specialty clinic for scopes continues to be a challenge to schedule with SEARHC's next visit to PMC. We are tentatively working on November as the next date to coordinate.
 - Psychiatrist Joshua Sonkiss is working and continues to take referrals and consultations from the providers.
 - Optometrist Dr. Kamey Kapp saw patients in Specialty Clinic 9/30-10/4.
 - Primary care continues to offer well child exams with sport physicals.
 - Erik Hulebak conducted weight certifications for our local wrestling team.

- First Flu Shot POD at WAVE was a success, Approximately 68 people were vaccinated. Next pop up is on 10/22/24 from 3-6 pm at WAVE.
- Clinic availability: In summary, the clinic is now fully staffed with 4 physicians and 2 mid-level practitioners. The wait time for regular appointments are working to improve with high demand providers.



Sept 2024 Data:

Report Date:	09/06/2024		
Resource	Next acute with PCP	Next available open	Next third avail open
Provider #1	9/10/24: 4 days	9/20/24: 14 days	9/25/24: 19 days
Provider #2	9/11/2024: 5 days	9/23/24: 17 days	9/30/24: 24 days
Provider #3	9/12/24: 6 days	9/25/24: 19 days	9/30/24: 24 days
Provider #4	9/06/24: 0 days	9/10/24: 4 days	9/12/24: 6 days
Provider #5	9/6/24: 0 days	9/9/24: 3 days	9/11/24: 5 days
Provider #6	9/9/24: 3 days	9/10/24: 4 days	9/13/24: 7 days
Avg days to wait	3	10	14

Submitted by: Phil Hofstetter, CEO



Petersburg Medical Center

2024 GRANT PROPOSALS

Updated October 15, 2024

6 Secured 2024 Grant Awards: \$423,722 in FY25 + \$585,366 in FY26-27

◆ **ACF Summer ORCA Camps**

Provide three day camps for Petersburg youth and launch the first overnight kayak camp for teens.

1 Year | \$20,000 awarded

◆ **PCF Teen Mental Health First Aid**

Train PMC staff to be certified as facilitators of the evidence-based tMHFA prevention curriculum.

1 Year | \$9,260 awarded

◆ **SBHA School-Based Health Services Grant**

Partnership to provide School Nurse & Behavioral Health supports for PCSD K-12 students.

1 Year | \$87,115 awarded

Will fund: **0.85 FTE** across **3 positions** in Primary Care / BH; and **\$4,148** in PMC indirect costs.

◆ **State Health Dept. Opioid Settlement Funds Grant**

Sustain telepsychiatry access pilot program established by PMC's 2023 HRSA grant.

3 Years | \$142,828 annually

Will fund: **0.9 FTE** across **3 positions** (PC/BH & Grants Director); and **\$18,630** in PMC indirect costs.

◆ **State Health Dept. FY2025 Hospital Preparedness Program**

Purchase two radio base stations & four mobile handheld radios for emergency preparedness/drills.

1 Year | \$14,664.28 awarded

◆ **State Health Dept. Adult Day Services Grant**

Support for Cedar Social Club staffing and over \$33K per year in scholarships for participants.

3 Years | \$149,855 annually

Will fund: **1.0 FTE** across **4 positions** in Home Health; and **\$13,623** in PMC indirect costs.

2 Pending FY24 Grant Requests: \$3.6 million for New Health Campus

◆ **Senate Appropriations Congressionally Directed Funds (Sen. Murkowski)**

New Medical Center & Long-Term Care facility remaining costs through Phase 3.

1 Award | \$3,000,000 total requested – *Decision Pending Fall 2024*

◆ **US Dept. Agriculture Distance Learning and Telemedicine Grant**

Equipment and software supporting telemedicine & workforce development goals.

1 Award | \$640,148 total requested – *Decision Pending Fall 2024*

6 Multi-Year Grant Awards Continuing in FY25

- ◆ **ACL Communities Deliver & Sustain Evidence-Based Falls Prevention**
 Provides two evidence-based falls prevention programs to older adults, people with disabilities, and others with mobility challenges, both in person and through telehealth; and connects eligible community members with available in-home services & other care at PMC.
 Year 2 of 4 | \$549,327 awarded total
 Currently funding: **0.85 FTE** across **3 positions** in Community Wellness & Home Health
 Program housed in: Community Wellness
- ◆ **AHHA Facility-Led Workforce Initiative Funding**
 Provides financial support for Community Wellness youth programs, specifically expansion of summer camps, and behavioral health and wellness supports for PMC personnel.
 Year 2 of 2 | \$52,992 awarded Year 2
 Program housed in: Community Wellness
- ◆ **HRSA Congressionally Directed Spending: Community Project**
 Contributes to New Medical Center & Long-Term Care facility sitework and construction costs.
 Awarded 2022 | \$8,000,000 awarded total
 Project housed in: Finance
- ◆ **HRSA Rural Community Opioid Response Project – Overdose Response**
 No-Cost Extension (NCE) of FY24 project establishing PMC’s telepsychiatry access pilot program.
 Year 2 of 2 | \$65,000 remaining to spend down
 Project housed in: Primary Care / Behavioral Health
- ◆ **State DPH Division Community-Based Tobacco Prevention & Control Grant**
 Implements the evidence-based Million Hearts® Change Package for Tobacco Cessation in the PMC health care systems change, by making tobacco cessation a practice and system priority and creating a supportive environment for cessation.
 Year 2 of 3 | \$145,000 per year
 Currently funding: **0.8 FTE** across **3 positions** in Community Wellness & Clinic; **\$13,050** in indirect
 Program housed in: Primary Care Clinic / Community Wellness
- ◆ **US Department of Treasury Coronavirus Capital Projects Fund Grant**
 Constructs a 19,000 square foot Wellness, Education, and Resource Center (WERC) building adjacent to the New Medical Center & Long-Term Care facility, which will include program space enabling community work, education and health monitoring.
 Year 3 of 6 | \$20,000,000 awarded total
 Project housed in: Finance

PETERSBURG MEDICAL CENTER

FINANCIAL REPORTING PACKAGE

For the month ended September 30, 2024

PETERSBURG MEDICAL CENTER
Key Volume Indicators
FISCAL YEAR 2025

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	YTD	% Change
1. Clinic Visits	853	879	866										2,598	2,344	10.8%
2. Radiology Procedures	259	202	211										672	594	13.1%
3. Lab Tests (excluding QC)	2,057	1,754	1,707										5,518	5,431	1.6%
4. Rehab Services Units	1,031	787	788										2,606	2,882	-9.6%
<i>Physical</i>	687	629	643												
<i>Occupational</i>	281	112	123												
<i>Speech</i>	63	46	22												
5. Home Health Visits	151	176	175										502	482	4.1%
6. Emergency Room Visits	95	88	65										248	275	-10%
<i>Hospital Inpatient</i>															
7. Patient Days - Acute	34	49	27										110	90	22.2%
8. Patient Days - Swing Bed	120	115	135										370	103	259.2%
9. Patient Days - Total	154	164	162										480	193	148.7%
10. Average Daily Census - Acute	1.1	1.6	0.9										1.2	1.0	22.2%
11. Average Daily Census - Swing Bed	3.9	3.7	4.5										4.0	1.1	259.2%
12. Average Daily Census - Total	5.0	5.3	5.4										5.2	2.1	148.7%
13. Percentage of Occupancy	41.4%	44.1%	45.0%										43.5%	17.5%	148.7%
<i>Long Term Care</i>															
14. LTC Days	372.0	418.0	410.0										1,200	1,233	-2.7%
15. Average Daily Census	12.0	13.5	13.7										13.0	13.4	-2.7%
16. Percentage of Occupancy	80.0%	89.9%	91.1%										87.0%	89.3%	

PETERSBURG MEDICAL CENTER
Statement of Revenues and Expenses
 For the month ended September 30, 2024

Month Actual	Month Budget	\$ Variance	% Variance		YTD Actual	YTD Budget	\$ Variance	% Variance	Prior YTD	% Variance
				Gross Patient Revenue:						
\$646,256	\$335,254	\$311,002	92.8%	1. Inpatient	\$2,076,049	\$1,005,763	\$1,070,286	106.4%	\$937,303	121.5%
840,389	1,004,554	(164,165)	-16.3%	2. Outpatient	2,694,357	3,013,662	(319,305)	-10.6%	2,909,570	-7.4%
607,975	521,472	86,503	16.6%	3. Long Term Care	1,739,830	1,564,416	175,414	11.2%	1,524,649	14.1%
475,901	447,678	28,223	6.3%	4. Clinic	1,375,690	1,343,039	32,651	2.4%	1,241,746	10.8%
46,341	44,315	2,026	4.6%	5. Home Health	134,491	132,944	1,547	1.2%	147,854	-9.0%
<u>2,616,862</u>	<u>2,353,273</u>	<u>263,589</u>	<u>11.2%</u>	6. Total gross patient revenue	<u>8,020,417</u>	<u>7,059,824</u>	<u>960,593</u>	<u>13.6%</u>	<u>6,761,122</u>	<u>18.6%</u>
				Deductions from Revenue:						
327,619	513,644	186,025	36.2%	7. Contractual adjustments	1,010,887	1,540,934	530,047	34.4%	1,796,796	43.7%
0	(84,770)	(84,770)	100.0%	8. Prior year settlements	0	(254,310)	(254,310)	100.0%	-	n/a
42,434	12,500	(29,934)	-239.5%	9. Bad debt expense	179,565	37,500	(142,065)	-378.8%	(489,263)	-136.7%
57	8,333	8,276	99.3%	10. Charity and other deductions	(2,528)	24,999	27,527	110.1%	22,965	111.0%
<u>370,110</u>	<u>449,707</u>	<u>79,597</u>	<u>17.7%</u>	Total revenue deductions	<u>1,187,924</u>	<u>1,349,123</u>	<u>161,199</u>	<u>11.9%</u>	<u>1,330,498</u>	<u>10.7%</u>
<u>2,246,752</u>	<u>1,903,566</u>	<u>343,186</u>	<u>18.0%</u>	11. Net patient revenue	<u>6,832,493</u>	<u>5,710,701</u>	<u>1,121,792</u>	<u>19.6%</u>	<u>5,430,624</u>	<u>25.8%</u>
				Other Revenue						
91,562	84,247	7,315	8.7%	12. Inkind Service - PERS/USAC	273,544	252,741	20,803	8.2%	248,218	10.2%
94,004	52,179	41,825	80.2%	13. Grant revenue	269,851	156,537	113,314	72.4%	121,361	122.4%
0	9,563	(9,563)	-100.0%	14. Federal & State Relief	0	28,689	(28,689)	-100.0%	-	n/a
11,062	38,202	(27,140)	-71.0%	15. Other revenue	83,729	114,606	(30,877)	-26.9%	93,582	-10.5%
<u>196,628</u>	<u>184,191</u>	<u>12,437</u>	<u>6.8%</u>	16. Total other operating revenue	<u>627,124</u>	<u>552,573</u>	<u>74,551</u>	<u>13.5%</u>	<u>463,162</u>	<u>35.4%</u>
<u>2,443,380</u>	<u>2,087,757</u>	<u>355,623</u>	<u>17.0%</u>	17. Total operating revenue	<u>7,459,618</u>	<u>6,263,274</u>	<u>1,196,344</u>	<u>19.1%</u>	<u>5,893,785</u>	<u>26.6%</u>
				Expenses:						
981,864	985,955	4,091	0.4%	18. Salaries and wages	3,025,445	2,957,865	(67,580)	-2.3%	2,902,885	-4.2%
159,226	105,318	(53,908)	-51.2%	19. Contract labor	534,989	315,954	(219,035)	-69.3%	193,939	-175.9%
369,786	366,660	(3,126)	-0.9%	20. Employee benefits	1,124,842	1,099,980	(24,862)	-2.3%	1,088,363	-3.4%
210,613	136,754	(73,859)	-54.0%	21. Supplies	524,857	410,262	(114,595)	-27.9%	380,682	-37.9%
159,786	127,281	(32,505)	-25.5%	22. Purchased services	411,398	381,843	(29,555)	-7.7%	343,707	-19.7%
73,747	45,699	(28,048)	-61.4%	23. Repairs and maintenance	168,991	137,097	(31,894)	-23.3%	153,467	-10.1%
29,784	21,719	(8,065)	-37.1%	24. Minor equipment	104,050	65,157	(38,893)	-59.7%	73,515	-41.5%
33,463	21,138	(12,325)	-58.3%	25. Rentals and leases	95,467	63,414	(32,053)	-50.5%	60,832	-56.9%
80,581	91,623	11,041	12.1%	26. Utilities	242,483	274,868	32,384	11.8%	255,052	4.9%
12,834	10,192	(2,643)	-25.9%	27. Training and travel	34,202	30,575	(3,628)	-11.9%	27,380	-24.9%
97,179	100,766	3,587	3.6%	28. Depreciation	295,572	302,298	6,726	2.2%	277,968	-6.3%
18,252	22,212	3,960	17.8%	29. Insurance	57,336	66,636	9,300	14.0%	49,648	-15.5%
21,437	34,575	13,138	38.0%	30. Other operating expense	94,508	103,725	9,217	8.9%	89,651	-5.4%
<u>2,248,552</u>	<u>2,069,891</u>	<u>(178,661)</u>	<u>-8.6%</u>	31. Total expenses	<u>6,714,140</u>	<u>6,209,673</u>	<u>(504,467)</u>	<u>-8.1%</u>	<u>5,897,090</u>	<u>-13.9%</u>
<u>194,828</u>	<u>17,866</u>	<u>176,962</u>	<u>-990.5%</u>	32. Income (loss) from operations	<u>745,478</u>	<u>53,601</u>	<u>691,877</u>	<u>-1290.8%</u>	<u>(3,305)</u>	<u>22658.3%</u>
				Nonoperating Gains(Losses):						
68,706	11,324	57,382	506.7%	33. Investment income	241,401	33,972	207,429	610.6%	(93,530)	-358.1%
(12,569)	(4,439)	(8,130)	-183.2%	34. Interest expense	(34,061)	(13,317)	(20,744)	-155.8%	(36,228)	6.0%
0	0	0	n/a	35. Gain (loss) on disposal of assets	0	0	0	n/a	-	n/a
1,186,249	1,016,667	169,582	16.7%	36. Other non-operating revenue	3,926,501	3,050,001	876,500	28.7%	778,477	404.4%
<u>1,242,386</u>	<u>1,023,552</u>	<u>218,834</u>	<u>21.4%</u>	37. Net nonoperating gains (losses)	<u>4,133,842</u>	<u>3,070,656</u>	<u>1,063,186</u>	<u>34.6%</u>	<u>648,719</u>	<u>-537.2%</u>
<u>\$1,437,214</u>	<u>\$1,041,418</u>	<u>\$395,796</u>	<u>38.0%</u>	38. Change in Net Position (Bottom Line)	<u>\$4,879,319</u>	<u>\$3,124,257</u>	<u>\$1,755,062</u>	<u>56.2%</u>	<u>\$645,415</u>	<u>-656.0%</u>

PETERSBURG MEDICAL CENTER
Balance Sheet
Sept, 2024

ASSETS	Sept 2024	Aug 2024	June 2024	Sept 2023
Current Assets:				
1. Cash	1,169,639	1,037,546	356,249	491,961
2. Cash - insurance advances	0	0	0	0
3. Investments	568,108	565,583	1,057,873	47,275
4. Total cash	<u>1,737,746</u>	<u>1,603,129</u>	<u>1,414,122</u>	<u>539,236</u>
5. Patient receivables	7,594,686	7,464,539	6,821,298	5,219,064
6. Allowance for contractals & bad debt	(2,559,091)	(2,525,965)	(2,363,151)	(1,563,356)
7. Net patient receivables	<u>5,035,595</u>	<u>4,938,574</u>	<u>4,458,147</u>	<u>3,655,708</u>
8. Other receivables	1,427,657	3,063,699	2,231,342	918,852
9. Inventories	306,512	319,212	319,404	303,968
10. Prepaid Expenses	266,774	296,351	161,762	252,042
11. Total current assets	<u>8,774,285</u>	<u>10,220,965</u>	<u>8,584,777</u>	<u>5,669,806</u>
Property and Equipment:				
12. Assets in service	28,639,756	28,638,436	28,601,075	28,082,848
13. Assets in progress	13,368,962	12,175,733	9,368,246	2,023,816
14. Total property and equipment	42,008,718	40,814,169	37,969,321	30,106,665
15. Less: accumulated depreciation	(22,594,527)	(22,497,348)	(22,298,956)	(21,430,977)
16. Net property and equipment	<u>19,414,191</u>	<u>18,316,821</u>	<u>15,670,365</u>	<u>8,675,688</u>
Assets Limited as to Use by Board				
17. Investments	3,525,406	3,468,800	3,337,912	2,923,461
18. Building fund	764,981	753,126	724,158	632,936
19. Total Assets Limited as to Use	<u>4,290,387</u>	<u>4,221,927</u>	<u>4,062,069</u>	<u>3,556,397</u>
Pension Assets:				
20. OPEB Asset	<u>6,685,608</u>	<u>6,685,608</u>	<u>6,685,608</u>	<u>6,685,608</u>
Deferred Outflows:				
21. Pension	<u>2,554,803</u>	<u>2,554,803</u>	<u>2,554,803</u>	<u>2,554,803</u>
22. Total assets	<u>\$41,719,274</u>	<u>\$42,000,123</u>	<u>\$37,557,622</u>	<u>\$27,142,302</u>

LIABILITIES & FUND BALANCE	Sept 2024	Aug 2024	June 2024	Sept 2023
Current Liabilities:				
23. Accounts Payable - Trade	\$1,050,011	\$4,058,847	\$3,255,927	\$1,815,451
24. Accounts Payable - New Facility	1,242,796	0	0	0
25. Accrued Payroll	522,259	447,796	240,920	477,831
26. Payroll taxes and other payables	232,300	218,540	236,514	216,643
27. Accrued PTO and extended sick	1,064,154	1,061,892	1,018,401	970,006
28. Deferred revenue	134,398	150,895	152,525	147,969
29. Due to Medicare	440,798	440,798	160,798	270,730
30. Due to Medicare - Advance	0	0	0	0
31. Due to Blue Cross - Advance	0	0	0	0
32. Other current liabilities	3,517	3,517	4,145	3,069
33. Current portion of long-term debt	443,788	441,703	618,244	352,099
34. Total current liabilities	<u>5,134,020</u>	<u>6,823,987</u>	<u>5,687,476</u>	<u>4,253,797</u>
Long-Term Debt:				
35. Capital leases payable	2,173,523	2,214,448	2,283,594	2,346,047
Pension Liabilities:				
36. Net Pension Liability	16,521,607	16,521,607	16,521,607	16,521,607
37. OPEB Liability	-	-	-	-
38. Total pension liabilities	<u>16,521,607</u>	<u>16,521,607</u>	<u>16,521,607</u>	<u>16,521,607</u>
39. Total liabilities	<u>23,829,150</u>	<u>25,560,042</u>	<u>24,492,677</u>	<u>23,121,451</u>
Deferred Inflows:				
40. Pension	623,594	623,594	623,594	623,594
Net Position:				
41. Unrestricted	12,387,212	12,374,380	2,751,845	2,751,845
42. Current year net income (loss)	4,879,319	3,442,105	9,689,507	645,413
43. Total net position	<u>17,266,530</u>	<u>15,816,486</u>	<u>12,441,352</u>	<u>3,397,257</u>
44. Total liabilities and fund balance	<u>\$41,719,274</u>	<u>\$42,000,122</u>	<u>\$37,557,622</u>	<u>\$27,142,302</u>

**Note: Cash on line 1 is for presentation purposes only. The total cash in bank is the sum of Lines 1 and 2.

PETERSBURG MEDICAL CENTER
Key Operational Indicators
For the month ended September 30, 2024

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD	YTD	% Change
1. Contractual Adj. as a % of Gross Revenue	14.2%	11.2%	12.5%										21.3%	20.6%	-3.7%
2. Charity/Other Ded. As a % of Gross Revenue	0.0%	-0.1%	0.0%										-0.1%	1.1%	107.9%
3. Bad Debt as a % of Gross Revenue	1.2%	3.7%	1.6%										-2.8%	2.5%	-212.3%
4. Operating Margin	9.1%	12.8%	8.0%										4.5%	-10.2%	144.1%
5. Total Margin	47.5%	39.0%	39.0%										18.8%	-10.6%	276.6%
6. Days Cash on Hand (Including Investments)	83.3	87.9	89.8										89.8	81.3	10%
7. Days in A/R (Net)	68.5	65.9	67.8										67.8	62.0	9.3%
8. Days in A/R (Gross)	85.3	85.3	87.1										87.1	79.2	10%