



# Petersburg Medical Center

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## BOARD MEETING A g e n d a

DATE: May 25, 2023  
TIME: 5:00 p.m.  
LOCATION: Dorothy Ingle Conference Room/Zoom

	<u>Lead</u>	<u>Handout</u>
I. CALL TO ORDER	Chair	N/A
II. APPROVAL OF THE AGENDA	Chair	<i>in packet</i>
III. APPROVAL OF BOARD MINUTES – May 1, 2023	Chair	<i>in packet</i>
IV. VISITOR COMMENTS	Chair	N/A
V. BOARD MEMBER COMMENTS	Chair	N/A
VI. COMMITTEE REPORTS		
A. Resource Committee	Chair	N/A
VII. REPORTS		
A. Case Management/Swing Bed Management <i>Action required: Informational only</i>	E. Hart	<i>in packet</i>
B. Chief of Staff <i>Action required: Informational only</i>	Dr. Burt	<i>in packet</i>
C. Clinic <i>Action required: Informational only</i>	K. Zweifel	<i>in packet</i>
D. Community Wellness <i>Action required: Informational only</i>	J. Walker / K. Zweifel	<i>in packet</i>
E. Dietary & Dietitian <i>Action required: Informational only</i>	L. Wickersham / J. Ely	<i>in packet</i>
F. Quality & Infection Prevention <i>Action required: Informational only</i>	S. Romine / J. Bryner	<i>in packet</i>
G. Executive Summary <i>Action required: Informational only</i>	P. Hofstetter	<i>in packet</i>
H. Financial <i>Action required: Informational only</i>	J. McCormick	<i>in packet</i>

VIII. UNFINISHED BUSINESS

IX. NEW BUSINESS

X. EXECUTIVE SESSION

*By motion, the Board will enter into Executive Session to consider medical staff appointments/reappointments, legal matters, and to discuss matters the immediate knowledge of which would clearly have an adverse effect upon the finances of the hospital.*

XI. NEXT MEETING

XII. ADJOURNMENT

# *Petersburg Medical Center*

*PO Box 589*

*Petersburg, Alaska 99833*

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**Meeting:** Medical Center Board Meeting

**Date:** May 1, 2023    **Time:** 5:00 p.m.

**Board Members Present:** Jerod Cook, Heather Conn, Marlene Cushing, Cindi Lagoudakis, Joe Stratman, Kim Simbahon, Jim Roberts (Zoom)

**Others (in person and via Zoom):** Bob Lynn, Scott Newman (Assembly members), many PMC staff, members of the media

- I.     **CALL TO ORDER:** Member Cook called the meeting to order at 5:00 pm.
  
- II.    **APPROVAL OF THE AGENDA:** Member Stratman made a motion to approve the agenda as presented. Motion seconded by Member Cushing. Motion passed unanimously.
  
- III.   **APPROVAL OF BOARD MINUTES:** Member Stratman made a motion to approve the minutes from March 23, 2023, as presented. Motion seconded by Member Lagoudakis. Motion passed unanimously.
  
- IV.    **VISITOR COMMENTS:** None
  
- V.     **BOARD MEMBER COMMENTS:** Member Cushing commented on what a great idea to host an open house on the new facility project.
  
- VI.    **COMMITTEE REPORTS:**
  - A. **Resource Committee:** Reviewed financials
  
- VII.   **REPORTS:**
  - A. **Pharmacy.** E. Kubo provided a written report (see copy) and was available to answer questions.
  - B. **Rehab.** K. DuRoss provided a written report (see copy). C. Newman addressed questions related to hours worked and any impact on pay or benefits.
  - C. **Plant Maintenance.** M. Boggs provided a written report (see copy).
  - D. **Environmental Services.** G. Edfelt provided a written report (see copy).
  - E. **Activities.** A. Neidiffer provided a written report (see copy).

- F. Home Health.** K. Testoni provided a written report (see copy) and was available to answer questions.
- G. Quality & Infection Prevention.** P. Hofstetter provided a written report (see copy) and was available to answer questions. He highlighted that with two recent, completely unannounced surveys (CAH and LTC), the facility had no findings, which is an unprecedented achievement. Member Cook commended Jennifer Bryner for her hard work, diligence and efforts during this time. K. Testoni addressed questions related to the adult day program space posed by Member Lagoudakis.
- H. Executive Summary.** P. Hofstetter provided highlights from the written report (see copy) and was available to answer questions.
- I. Financial.** J. McCormick provided a financial management update (see copy) and was available to answer questions.

**VIII. UNFINISHED BUSINESS**

**IX. NEW BUSINESS**

- A. Board Committee Appointments**
- i. Resource Committee: Heather Conn
  - ii. Community Engagement Committee: Marlene Cushing
  - iii. Kinder Skog Advisory Committee: Kim Simbahon
  - iv. Bylaws Committee: Jim Roberts

- X. EXECUTIVE SESSION** Member Cushing made a motion to enter Executive Session to consider medical staff appointments/reappointments, legal matters, and to discuss matters the immediate knowledge of which would clearly have an adverse effect upon the finances of the hospital. Motion seconded by Member Lagoudakis. Motion passed unanimously. Board entered Executive Session at 5:41 pm.

Member Cushing made a motion to come out of Executive Session. Motion seconded by Member Lagoudakis. Motion passed unanimously. Board came out of Executive Session at 6:27 pm.

Member Cushing made a motion for appointments and reappoints of: Dariusz Zawierucha, MD, Radiologist; Akshay Gupta, MD, Radiologist; Alexander Castiello, MD, Pathology; John Hoyt, MD, Pathologist to the medical staff. Motion seconded by Member Stratman. Motion passed unanimously.

- XI. NEXT MEETING** The next regularly scheduled meeting is scheduled for May 25, 2023.

- XII. ADJOURNMENT** Member Lagoudakis made a motion to adjourn. Motion was seconded by Member Conn. Motion passed unanimously. The meeting adjourned at 6:29 pm.

Respectfully submitted,

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Marlene Cushing, Board Secretary



# Petersburg Medical Center

## Case Management / Swing Bed Management Report May 2023

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### 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 Travelers included in a total of 13 RN floor positions.
- 2 RN's are staffed on AC daily, and 1 RN is staffed nightly.

### Community Engagement

- Presented live on KFSK in May to spotlight the Skilled department and answer questions.
- 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 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.
- Admitting skilled patients without a support system, payor source, or adequate discharge plan causes financial hardship and is not ethically viable for PMC.

### Patient Centered Care

- Goal: Develop metrics for improving quality of care and achieving optimal outcomes.
- 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 skilled services offered.
- Highlight PMC Skilled Nursing Facility's 24/7 RN staffing for IV therapy, medication management, and wound care directed by certified specialists.
- Emphasize the advantage of having RN staffing, which is not typical in most Skilled Nursing environments.

### Facility

- No changes in equipment.

**Financial Wellness**

- Skilled Swing Bed (SNF SB) care patient days in the past 6 months: 1.7 (goal: 3 patient days).
- Average census, including all Swing Bed stays (some at LTC level of care): 2 patient days.
- Average length of stay: 16 days per patient (SNF SB), 17 days for all SB patients.
- No skilled readmissions within 30 days.

**Submitted by:** Elizabeth Hart RN Skilled Care Manager

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# Petersburg Medical Center

Chief of Staff Report (May 25, 2023)

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## **Workforce Wellness**

Our medical staff remains steady at 6 providers. We also have PA student Douglas Bartel working with us this summer.

We will be losing Dr. Hyer in the fall when she leaves us for 18 months for her family's sailing adventure. We are challenged to find a temporary replacement for Dr. Hyer.

Although the summer is our busiest time of year, we are reminding each other to use our PTO to ease the stress.

## **Community Engagement**

Our local physicians continue to be actively involved in teaching UW School of Medicine medical students. We are happy to contribute to the development of the next generation of medical providers.

## **Patient Centered Care**

Controlled substance prescribing: We are revising our clinic guidelines for managing our chronic pain patients who are taking opioids. Our goal will be harm reduction and more consistent adherence to state and federal recommendations.

Dr. Hulebak has taken over the Aviation Medical Examiner role for FAA flight physicals from Dr. Tuccillo. Dr. Burt has completed training as a medical review officer to assume the MRO role previously held by Dr. Tuccillo.

In addition to developing a diabetes care coordinator nurse role, we are working on creating an obstetric care coordinator nurse role.

We are continuing to apportion Dr. Tuccillo's patients among us.

## **Facility/ Financial Wellness**

We are looking forward to AI Scribe adoption to ease the documentation burden of providers and to more fully capture appropriate visit charges. (This also would boost morale!)

We are currently reviewing the hospital staff bylaws, rules, and regulations in order to update them.

**Submitted by:** Selina Burt, DO

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# Petersburg Medical Center

Joy Janssen Clinic Report May 2023

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## **Workforce Wellness**

The clinic has experienced a shortage of staff over the past six months. During November and December of 2022, we faced significant staffing challenges, with multiple medical assistant staff members being absent due to medical reasons, staff turnover, or other factors. This resulted in a situation where we often had only one or two Medical Assistants available to cover the responsibilities for multiple providers. Despite the difficulties, the staff pulled together and made concerted efforts to ensure that patients continued to receive the care they needed.

In the past three months, we have made new additions to our team, addressing some of the staffing gaps. At present, we have one Medical Assistant assigned to each of our six providers. While progress has been made, the clinic is still undergoing transitions, training, and preparations for the upcoming busy summer months.

I would like to introduce the new staff members who joined our clinic team:

1. Lynette Homme, CNA
2. Melinda Cook, Medical Assistant
3. Jessica Franklin, who transitioned from the role of Medical Assistant to Reception/front desk

We are excited to have these individuals join our team to provide valuable skills and strengthen our workforce.

## **Community Engagement**

The clinic has actively participated in various community outreach events, which are summarized as follows:

1. On January 4, 2023, the Clinic Manager engaged in a live radio session on KFSK, where updates were provided regarding the Specialty Clinic and the hypertension quality project.
2. A collaborative effort between the Wellness Department and the clinic resulted in a booth at the Early Childhood Resource Fair held at Stedman Elementary School on April 15, 2023. The booth aimed to provide information on immunizations, height and weight measurements, as well as handwashing demonstrations using glow-in-the-dark “fake germs” on attendees’ hands.
3. Clinic management actively participated in the Petersburg Medical Center Open House on May 10, 2023. Their involvement included engaging in community conversations and contributing to the event.
4. The clinic consistently seeks opportunities to collaborate with other departments. Currently, Clinic Case Management and Home Health are working together on multiple fronts, such as exploring the potential implementation of a Patient Home Monitoring program for patients with chronic diseases like diabetes, heart disease, and COPD.
5. The clinic and PMC have initiated a Hypertension Quality Project with the aim of enhancing blood pressure readings for our patients. This endeavor involves a collaborative effort across various departments and actively involves community members.

Through these community outreach efforts, the clinic demonstrates its commitment to engaging with the community, promoting health education, and exploring collaborative initiatives with other departments.



## **Patient Centered Care**

The Clinic's primary focus is to consistently deliver exceptional patient-centered care. We actively collaborate with other departments to ensure that patients have a positive experience throughout their medical treatment at the clinic. Several examples of patient-centered care initiatives include:

1. **Case Management:** Our dedicated case manager assists patients in navigating the healthcare system and establishing connections with their healthcare team. They provide support in complex medical situations, such as addressing new diagnoses, managing existing chronic conditions, ensuring timely access to necessary supplies and care, and aiding in care transitions following medical evacuations to outside facilities for higher levels of care. Additionally, they offer diabetes education, outpatient care conferences, and support for wellness initiatives.
2. **Collaboration:** The clinic engages in collaborative efforts with numerous departments and services such as the Laboratory, Radiology, Acute Care, Long-Term Care, and others to meet the needs of the patients. We actively work together with Home Health (HH) to provide comprehensive services to our patients. In instances where a patient is referred to HH but doesn't meet the criteria for home health services, we link them with our outpatient Case Manager (CM) to ensure they receive the essential follow-up care and resources. Likewise, when a patient is discharged from acute care or swing bed and doesn't require HH, we coordinate their transition with the outpatient CM.
3. **Health Education, Prevention & Wellness:** Patients receive daily health education, prevention, and wellness services during their medical visits. Some instances include:
  - **Prevention & Outreach:** In partnership with the Community Wellness team, we mailed out letters to patients with diabetes, providing them with resources and informing them about preventive and annual services required to meet diabetes care standards.
  - **Education:** Our Diabetes Educator/CM collaborates with the dietitian to plan a diabetes class in fall 2023, aiming to educate patients on managing their condition.
  - **Outreach:** We are working on a pediatric report to facilitate outreach to the pediatric population, ensuring they schedule their annual exams and receive required immunizations.

Through these patient-centered care practices, the clinic strives to provide comprehensive support, proactive outreach, and valuable education to enhance the overall health and well-being of the patients we serve.

## **Facility**

Over the past year, the clinic has expanded its healthcare team to include four physicians and two mid-level providers, including a Nurse Practitioner and a Physician Assistant Certified. This increase in providers has led to the expansion of clinic services to the downstairs space, allowing us to maximize the use of all available exam rooms. However, this expansion has presented some challenges, particularly in ensuring that we have sufficient equipment for all the rooms. Some of the exam tables are older and may need updating in the future to enhance patient care.

The growing number of providers necessitates a creative approach to space utilization and room allocation, ensuring that patients do not experience unnecessary wait times due to space constraints. The staff continually strive to be resourceful and plan to ensure the efficient use of exam rooms, although unforeseen circumstances can occasionally arise. Additionally, to accommodate the increased provider capacity, certain specialty services have been relocated outside of the clinic environment, allowing for more space.

Despite the limitations in physical space, the clinic makes every effort to work within these constraints. Equipment, such as vital monitors, is shared between rooms to optimize usage and availability. This ensures that patients receive the necessary care while effectively managing the clinic's resources.

*Guiding Values: Integrity - Dignity - Professionalism - Team Work - Quality*

## **Financial Wellness**

The clinic is actively working towards increasing patient volume and optimizing provider schedules to enhance the clinic's revenue from the services provided. Various strategies are being implemented, such as employing creative scheduling techniques, proactively booking patients on on-call days, and conducting outreach efforts to ensure timely delivery of overdue preventive care. Clinic management and registration staff are diligently addressing work queues, which involve reviewing accounts to identify and resolve any issues or errors in the registration process that could potentially result in delayed reimbursements or claim denials.

Furthermore, the clinic has engaged in collaborative efforts with the Wellness department to seek State and Federal grants for funding services and projects. Two grants are currently pending:

1. **State of Alaska Tobacco Prevention & Control Grant:** This grant, which amounts to a potential annual sum of \$140,000 for three years, aims to improve tobacco-related patient health outcomes through enhanced healthcare services and increased access to evidence-based cessation support. The project's objectives include enhancing the capacity of local healthcare providers to address tobacco use effectively, increasing tobacco screening and referrals, strengthening internal tobacco-related policies, and raising community awareness regarding tobacco cessation resources and the hazards of tobacco use.
2. **HRSA Rural Health Care Coordination Grant:** This grant has the potential to provide funding of up to \$300,000 per year for four years. Its purpose is to promote outreach and expansion of healthcare services in rural areas through comprehensive care coordination strategies. If awarded, PMC plans to focus on a Maternal Child Health project, specifically providing OB case management and services for prenatal and postpartum women, as well as the pediatric population.

By actively pursuing these grants, the clinic aims to secure additional resources to support important initiatives that will positively impact patient care, particularly in the areas of tobacco cessation, maternal child health, and comprehensive care coordination in rural settings.

**Submitted by:** Kelly K. Zweifel, Clinic Director

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# Petersburg Medical Center

## Community Wellness Report May 2023

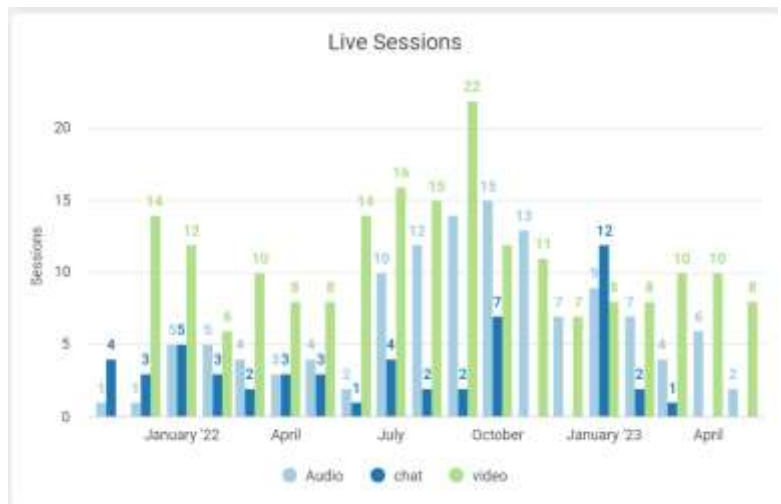
### Workforce Wellness

The Community Wellness Department continues to have consistent staffing. Becky Turland, our Community Wellness Specialist, recently received the [2023 Alaska After School Superhero Award](#) in recognition of all the work she does in Petersburg to support, nurture, and grow the youth of Petersburg. She was one of six recipients of this award in the State.

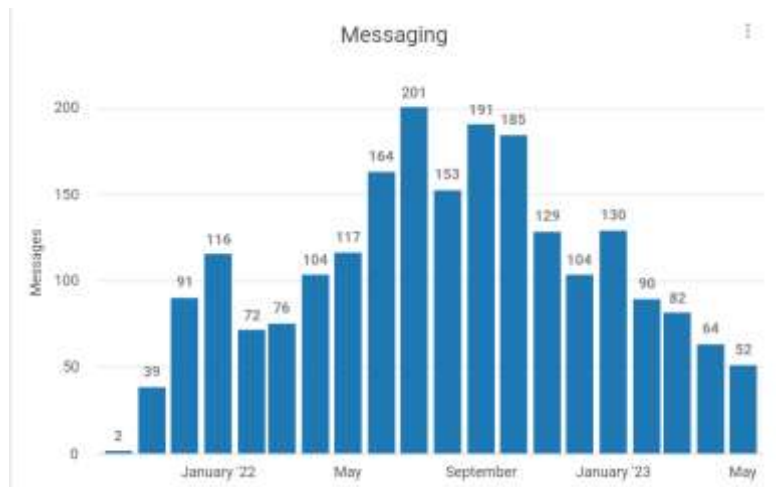
PMC’s Youth Programs will be doubling in capacity this summer and offering extended hours, which requires additional seasonal staffing. One full-time and three part-time PRN positions have been hired for June-August to support the program growth. The part-time positions are all PHS high school students. We look forward to the opportunity to develop a summer staffing model that supports our program and gives work experience to students interested in working with children or pursuing a career in a related field.

The Community Wellness Manager continues to temporarily support Public Relations activities since that position was vacated in February 2022 and has not been re-hired, as well as Emergency Preparedness responsibilities. This has been very challenging and these additional job duties are not able to be given the attention they require.

PMC’s Employee Wellness Program continues to support staff health, wellness, morale and retention in a variety of ways. Of note, the *Betterhelp* employee wellness benefit has been utilized by approximately 25% of PMC employees since its inception in November 2021 and has received a 4.72 out of 5 overall satisfaction rating from our staff. *Betterhelp* offers 4 free behavioral health sessions with a therapist every month and unlimited texting. See charts below for utilization trends for live session and texting with *Betterhelp* therapists. PMC just completed its fourth year of the *Bravo* Employee Wellness Incentive Program, which offers health coaching programs, wellness challenges and opportunities to earn points for biometric screenings and preventive care screenings. This year, 63 staff and 8 spouses engaged in the program – about a 10% improvement in program participation from last year. Each employee or spouse who successfully completes the program will receive a \$300 wellness incentive, distributed as \$25/month on their paychecks from July 1, 2023 – June 30, 2024.



Above and Below: *Betterhelp* utilization by PMC staff Nov. 2021-April 2023



## **Community Engagement**

PMC has been a part of the local SHARE Coalition (Supporting Health Advocacy Resiliency Education) since its inception in 2006. Recently, the administration and leadership of the community coalition transitioned from WAVE to PMC's Community Wellness Department. PMC has been focused on revitalizing the coalition and getting back to in-person meetings after seeing declined attendance during the pandemic. Monthly meetings are attended by community partners including the school, WAVE, PVFD, HIP and Public Health. Recent outreach and engagement have led to Tlingit and Haida, PIA, and OCS attending the meetings as well.

PMC's Youth Programs will be expanding this summer to allow more children to participate and to provide additional programming and options to help meet community childcare needs. This expansion is possible following the recommendation of the State of Alaska Childcare Program to transition the PMC Kinder Skog program from a licensed childcare program to an exempt from childcare licensure recreational program, which will be effective starting in June 2023. This change better reflects the services provided and allows the program to expand capacity and meet the community's needs. The total capacity for the Kinder Skog summer program is essentially doubling, increasing to 40 children, up from the previous capacity of 20. A new program called "Forest Kindy," will be offered for 5-6 year olds to keep kids engaged and learning throughout the summer. Other PMC summer youth programs will continue including PODs (Play Outside Days) and ORCA Camps (Outdoor Recreation Adventure and Creation).

The PMC Live radio show, newsletter, newspaper advertisements, and Facebook posts are temporarily coordinated through Community Wellness until the Public Relations position is filled. The newsletter has decreased from monthly to quarterly due to limited staffing resources for this project. The website is a known area for improvement that is also a challenge to address with limited resources.

### *Community Events:*

- **Turkey Trot:** In November, the Community Wellness Department hosted the second annual Turkey Trot fun run/walk. The event was also a food drive with donations given to HIP for distribution. (~28 participants)
- **Early Childhood Fair:** In April, the Community Wellness Department, Clinic, Home Health, and Audiology all held booths at the community Early Childhood Fair at the elementary school. Youth participated in a handwashing demonstration and received height/weight along with a growth chart. Phil Hofstetter also completed hearing screenings. (~25 youth participants)
- **PMC Youth Programs Information Night:** In May, staff held an information night to provide information on PMC's Kinder Skog, Forest Kindy, ORCA camps and PODs for interested families. (3 families participated)
- **Upcoming events:** The Community Wellness team will coordinate the Pedal/Paddle Battle again in July for the PMC Foundation fundraiser. We will also partner with WAVE to offer a Girls on the Run summer camp in August for girls in 4<sup>th</sup>-6<sup>th</sup> grade. The Rainforest Run 10K and Half Marathon will occur again in September.

### *Partnerships:*

- **Grants:** The Community Wellness Department has been working on several grant proposals that are partnered with other PMC Departments including Behavioral Health, Clinic, Home Health, as well as the SHARE Coalition. Several collaborative grant proposals are currently pending. Potential grant projects include maternal/child health and wellness, behavioral health supports for youth, and tobacco referrals and resources within PMC.
- **Kinder Skog:** Kinder Skog partnered with LTC for a gardening day and celebration of Earth Day with flower cupcakes from the Dietary Dept. They have also recently partnered with community members to offer STEM activities to participants including making jam and pickles with Sitka 4-H representative, learning about trees and frogs with the USFS and learning about invasive crabs with the Alaska Sea Grant representative. They also continue to participate in "HIP Kids" by filling food bags for HIP to distribute to food insecure community members.

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## **Patient Centered Care**

The Community Wellness team focuses on prevention of chronic disease and behavioral health issues including substance use. Our team works to promote healthy lifestyles, preventive screenings, and health education in the community and within our staff as well as support programs and initiatives that aim to reduce risk factors and increase protective factors for youth.

- **Lifestyle Balance Class:** The year-long diabetes and heart disease prevention program uses a CDC-approved curriculum. The second year of the program began in January. (*8 participants*)
- **Blood Pressure Screenings:** Community Wellness and Home Health partnered to offer free community blood pressure screenings during Heart Health Awareness month. 47 community screenings were completed - 6 normal, 25 elevated, 26 high. The Clinic Nurse Case Manager followed up and 42% of those who had high readings had followed up with a provider within one month.
- **Population Health Management:** In May, the Clinic Nurse Case Manager and Community Wellness team sent patient education letters to about 200 patients with diabetes to provide information regarding diabetes management.
- **Aging-in-Place:** The three-year pilot grant for the CAPABLE program, an evidence-based aging-in-place program, will end June 30, 2023. During the last year of the grant, the CAPABLE program license was discontinued due to the strict program license requirements that were barriers to our small healthcare facility and small community. PMC is utilizing the remainder of the grant funds to support aging-in-place through Home Health's Caregiver Cafes and purchasing adaptive equipment and home maintenance services to help seniors continue living independently and safely in their homes. This project is being completed in partnership with the Rehabilitation Department and Home Health and ends June 30, 2023. (*~15 participants*)
- **Falls Prevention:** A \$549,327 grant award was received from the Administration on Community Living to fund a three-year project to implement evidence-based falls prevention programming locally. The Community Wellness Department and Home Health will partner to implement two programs – *Tai Ji Quan: Moving for Better Balance* and *Bingocize* beginning in August. Both programs will be looking for community-based facilitators.

## **Facility**

The Community Wellness Department will work with IT to procure technology equipment necessary to implement virtual *Tai Ji Quan: Moving for Better Balance* programming (required by ACL grant) in June-July.

The Kinder Skog program currently rents a classroom at Stedman Elementary School. Due to limited space available at the school, the program will have to move to the school Occupational Therapy room and will only have access to the room after school hours. Planning a future space for PMC Youth Programs on the new hospital campus will be important to sustaining the programs, as rental space appropriate for youth programs in Petersburg is limited.

## **Financial Wellness**

The Community Wellness Department is a non-revenue generating department and has therefore recently shifted to being largely supported by grants to sustain current programs and continue growing the services provided in our community. Over the past several months our department has worked collaboratively with Home Health, Clinic, Behavioral Health, Petersburg School District, Public Health, PVFD, and the SHARE Coalition to apply for federal, state and local grants. Most of these grants will partially fund positions within our department as well as other departments. PMC's contracted grant writer has been incredibly helpful in writing and/or supporting our team in the writing of grants. Below is a list of grants the Community Wellness Department has recently applied for, independently and in coordination with other departments:

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## **Grants Received**

- Administration for Community Living: \$549,327 grant received to fund a three-year project to implement evidence-based falls prevention programming. The Community Wellness Department and Home Health will partner to implement two programs – *Tai Ji Quan: Moving for Better Balance* and *Bingocize* beginning in August. Two Community Wellness and two Home Health positions will be partially funded by this grant.
- Petersburg Community Foundation: \$10,000 received to fund two facilitators to get certified and host Youth Mental Health First Aid training for the community.

## **Grants Submitted**

- AHHA Workforce Initiative: One year funding to support healthcare workforce morale, retention, wellness, and growth; possibly up to three years. Applied for funds to support one year of Betterhelp employee benefit and two temporary summer Youth Program Mentors to expand youth programs to support more PMC staff with children needing summer care. (*\$42,711 requested*)
- State of Alaska Tobacco Prevention and Control: Three-year grant to support health systems change for tobacco cessation within PMC healthcare system including implementing and improving processes for asking about tobacco use, advising to quit, and referring to cessation resources. (*\$145,000 per year requested for 3 years*)
- HRSA Rural Network Planning: One-year grant to support the development of a formal Rural Health Network through the SHARE Coalition. This will lead to increased coordination of services, development of network governing structure, strategic planning, shared priorities, etc. (*\$100,000 requested*)

## **Grants In Process**

- HRSA Care Coordination: Three-year grant to support and improve care coordination for maternal and child health. If funded, this project will fund a nurse case manager position in the clinic and a new position in the community wellness department to coordinate clinical and non-clinical services for pregnant, post-partum, infants and young children.
- Crossett Foundation: One-year funding to support Kinder Skog and other PMC Youth Programs including supplies, STEM related activities, and tuition scholarships. (*~\$15,000 will be submitted*)
- RurAL CAP: Working on developing an 11-month project to support youth mental health and access to services which may include supporting behavioral health clinician in the schools, Kinder Skog scholarships, and other prevention activities that are still to be determined.

With Kinder Skog's transition from a licensed childcare program to a legally exempt recreational program, PMC will no longer be able to accept State or Tribal tuition assistance for low-income families. A scholarship program is being developed for eligible families in need of tuition assistance who are affected by this licensing change. This scholarship program will be supported completely by grants, sponsorships, and fundraising. PMC plans to begin the process of applying for accreditation under the American Camps Association during the Fall/Winter of 2023, which would provide accreditation standards and would allow PMC to accept State and Tribal assistance again.

**Submitted by:** Julie Walker, Community Wellness Manager

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# Petersburg Medical Center

Dietary Report May 2023

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## **Workforce Wellness**

Besides the usual challenges of staff illness and covering for one another, our staff has been mostly dependable. We come together as a team and do whatever we can to keep the department running so that people can get fed a delicious meal. We do still have one opening for part time diet aide who can help cover to relieve me from covering.

## **Community Engagement**

Our community engagement consists of getting involved with anything food related, such as providing a nice food spread for Julebaking, snacks and cookies for Open House, baking cupcakes for Earth Day and involving Kinderskog, and providing food for our picnics during the warmer months. Activities makes the necessary arrangements with the city to rent the space, followed by the invitation to the community. We provide the food, as well as cooking and serving to all guests.

## **Patient Centered Care**

Food quality has improved tremendously. We strive to make improvements any given chance. We have slowly started to change some of our existing menu items. We do our best to monitor what works, what doesn't. We make necessary adjustments to new menu items. We change the cooking methods to work with the equipment we have, as well as improving flavor. We have started including customer satisfaction surveys forms to get feedback from our patients.

## **Facility**

I use our dietician as my resource for any equipment issues that we need help with.

## **Financial Wellness**

Due to inflation and a rise in our LTC census, we are controlling our budget by ordering in bulk from US Foods. Items that I typically would have shopped for at the grocery store cost quite a bit less through our vendor.

**Submitted by:** Lidia Wickersham

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# Petersburg Medical Center

Dietitian Report May 2023

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## Workforce Wellness

Through the Wellness Department, I am on the employee wellness committee, and I help find/order snacks for the employee snack program. I provide a supportive leadership role within the Food & Nutrition Services Department. And of course, I find myself answering coworkers' personal nutrition related questions throughout the day.

## Community Engagement

I am working with the Nurse Diabetes Educator, Amy Hollis, to create a Diabetes Wellness class. This is still in the developmental stages, but we expect to hold the classes in late-summer/early-fall.

Along with the improvements in the PMC menus, I have been helping review menus on a consulting basis for the Senior Meal program and the Mountain View Manor menus to ensure compliance with menu requirements.

## Patient Centered Care

Since the last report, I have updated the hospital menus twice and am working on a third update now. With help from the Food & Nutrition Services Manager, we have overhauled the dinner menu, modified most of the desserts, and have replaced many unliked recipes with new menu items that seem to be going over very well. I have created new diet extensions for all therapeutic diets and dysphagia diets to complement the menu (this is required per Medicare guidelines and was audited during our CAH survey by the state surveyors).

Diet accuracy has improved significantly with the implementation of traycards. This is a way to reference every patient's diet, beverages, portions, and preferences all on one card that the kitchen staff use to set up meal trays. This is currently a manual process that we plan to computerize soon.

I have an ongoing Quality project in coordination with the I.T. department to improve the records sent to the kitchen. We are working on improving the reporting of diets and changes from Cerner to the kitchen.

I completed a project to improve patient safety when it comes to food allergies and how they are reported from Cerner to the PMC kitchen.

Through QA we have implemented a Food Nutrition Service customer satisfaction survey to patients receiving meals in the hospital to help identify areas that we are doing well and areas that need improvement. Early data suggests that patients are happy with the appearance and variety of the food and that areas of improvement are temperatures of the food at delivery.

Reported in QA April 2023: Customer Satisfaction Survey implemented 2/10/23 - 8 respondents

Please rate the food services received during your stay:	Avg. Score (Rated 1 to 5 with 5 = Excellent)
1. Appearance of my meal trays.	3.7
2. Taste of the food served.	3.6
3. Meals served include foods I like.	3.9
4. Food temperatures of hot foods such as soups, entrees, and coffee.	3.4



5. Food temperatures of cold foods such as juice, milk, and desserts.	3.6
6. Food service staff response to my food likes and dislikes.	3.9
7. Daily meals served in a timely manner – about the same time each day.	4.4
8. Time allowed to eat my meals.	4.1
9. I am offered a substantial evening snack.	4.1
Nursing Units surveyed	Number of respondents
AC	3
LTC	2
OP	2
Guest	1

**Facility**

I am working with I.T. to starting a new online software, [www.DiningRD.com](http://www.DiningRD.com), that will provide a resource for menus, recipes, and traycards. All of these items are currently done manually, and this program will combine all three. This program meets all of our current needs, has some add-ons that we can implement in the future, and is a fraction of the cost that MealSuites was in the past. Expected implementation by end of summer.

One of the ways I support the kitchen is in my experience with equipment needs/issues. We still have a challenging time working with the electric stoves in the kitchen. When the smaller of the two stove tops stopped working over the winter, I worked with Mike Boggs to come up with a creative solution that was cheaper than replacing it that would benefit the kitchen. We had the electrician remove the stove that was hardwired into the wall and create an outlet in its place. Now we plug in a single induction burner that the cooks love using, and it is compliant with fire code because we can now use it to cook under the hood. The larger 6 burner stove is still challenging to use but replacing a few internal parts last year has extended its life.

Over the winter, we repaired a 2-door reach in freezer that had been broken for months. Although the freezer space was not essential, my main concern was to make sure it was working in case something went wrong with the walk-in freezer. We have had many challenges with temperature of the walk-in freezer both before and during my time at PMC and it is always a concern when an old piece of equipment starts acting up – especially with the dollar amount of product/food in it. For now, the walk-in freezer is functioning and holding temp, but it still concerns me about how long we can expect to continue to keep it running. If something should happen to it, we now have a second reach-in freezer that we can move the highest priced product into temporarily until repairs can be made.

**Financial Wellness**

I do not run a department directly, but I do help support the Food & Nutrition Services Manager in this. I also see patients through the clinic and home health that earns PMC revenue.

**Submitted by:** Jeanette Ely, RDN

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# Petersburg Medical Center

Quality Report May 2023

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## **Workforce Wellness**

The interim Quality Director oversees shared initiatives led by department heads and Home Health Quality.

## **Community Engagement**

PMC hosted a Community Open House to provide the opportunity to learn about the replacement medical center project, preview the building design concepts, provide feedback, and ask questions. This was held at the Holy Cross House at the Lutheran Church and said to be a great success at engaging the community in conversation with staff and the Bettisworth North team on the new PMC facility.

PMC Wellness department was just awarded the Administration for Community Living's (ACL) 2023 Empowering Communities to Deliver and Sustain Evidence-Based Falls Prevention Programs Grant. These programs are set to start in August and are funded for four years. Currently, Petersburg does not have any evidence-based fall prevention programming and it has been identified as a need within PMC and the community. Project goals include establishing and maintaining the new programs and increasing the number of individuals who participate. There are two programs that will be implemented and one of them will be offered in a remote capacity. This grant provides the opportunity for increasing community partnerships and collaboration and will be supported through transportation assistance and a tech lending library.

## **Patient Centered Care**

The collaboration for a Remote Patient Monitoring program between Home Health, the Joy Janssen Clinic, Case Management, IT, and Billing continues. Progress has been made as a contract is under review at this time. Processes for referral management, eligibility, monitoring, communication, and billing are being identified and developed. This patient monitoring program has the potential to increase provider access and communication for patients experiencing challenges with chronic disease and will support current quality initiatives.

The May Quality Committee meeting focused on LTC and CAH is scheduled for May 24. The meeting schedule has been adjusted to later in the month at the request of multiple managers to facilitate reporting of the most up-to-date statistics and information and to allow ample time for interdepartmental data review prior to meetings. Additional departments have been recruited to participate in the next committee meeting to provide their insights and support. A rotational reporting schedule has been developed to optimize efforts.

## **Facility**

A space for the Adult Day Service program has been secured at the Mountain View Manor. Initiation of the program is moving forward. The program will likely start by offering half-day services on four days per week. PMC Adult Day Service aims to offer support to the widest population possible. Generally, services will be targeted to those over 60 who have physical or cognitive limitations that may include Alzheimer's dementia and/or other related dementias. Participants will be able to receive assistance with activities of daily living such as bathing, toileting, and dressing. The program plans to collaborate with LTC activities department to design an enriching social atmosphere to enhance the experience for participants.

## **Financial Wellness**

The Home Health department has submitted a grant application for Senior In-Home Services through the State of Alaska Division of Senior and Disabilities Services. Grant reward notification will occur any day now. Being awarded this grant will allow PMC to expand support to seniors in Petersburg and possibly surrounding areas. This funding will allow qualifying individuals to receive care without regard to a payor resource. Program

Services for this grant include case management, chore service, respite and extended respite care, personal care services, service coordination, and supplemental services.

The newly awarded ACL grant provides partial salary support for four current staff members to aid in its implementation of project activities, reporting requirements, provide transportation and technical support, as well as project management.

**Submitted by:** Stephanie Romine, RN

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# Petersburg Medical Center

## Infection Control and Prevention Report May 2023

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### **Workforce Wellness**

There have been no changes in this area. I am still fulfilling the duties of the Infection Preventionist.

### **Community Engagement**

The Infection Control (IC) department continues to collaborate closely with nursing, laboratory, EVS, and quality. We have received our new cleaning supplies and are awaiting in-person training.

PMC's influenza vaccination rate was 76% for the period October 1, 2022 – March 31, 2023, which is the federal reporting requirement. Our rate was consistently 95-97% in the years prior to covid.

### **Patient Centered Care**

The covid pandemic officially ended on May 11, 2023. With this, many waivers and regulations have been lifted, but some notable ones will remain in effect until the end of 2024 or until new updates are provided. It is important to note that covid vaccination for employees is still required, and covid vaccines and treatment are available to consumers at no cost.

Recently, there have been changes in the covid vaccine guidelines. Unvaccinated individuals now only require one dose of a bivalent vaccine to be considered up-to-date in their vaccination. Individuals over 65 and those with certain health conditions are now eligible for a second bivalent booster if at least 4 months have passed since the last booster. The clinic is actively working on becoming a covid vaccine provider to ensure accessibility similar to other routine vaccines.

Covid continues to impact PMC. We currently have two departments, including LTC, experiencing an outbreak. While a few residents were re-infected within 90 days of the prior outbreak, they have not displayed severe symptoms. Our staff is working tirelessly to protect both the residents and themselves from the spread of this highly contagious illness.

### **Facility**

We face significant challenges in LTC when it comes to separating ill residents from others, especially those with memory-related illnesses such as dementia. We are collaborating with the Bettisworth North architects to address this issue in the plans for the new building.

I am currently learning how to run the DA2 reports in Cerner and I am hopeful that utilizing the technology in the system will help me save time.

### **Financial Wellness**

No changes have occurred in this area.

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**Submitted by:** Jennifer Bryner, MSN, RN



# Petersburg Medical Center

CEO Board Report May 25, 2023

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

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

## **Highlights:**

During the past month, the focus has been on the open house for the replacement building project; at the request of the Borough, working to improve operational processes such as billing at Mountain View Manor; and advocating on status of healthcare across the industry and replacement building project with legislators.

- Open House: Nearly 100 community members attended the day-long open house on the replacement building project. Bettisworth North provided several presentations and Q&A sessions throughout the day, accompanied by draft visuals of the proposed building design and space planning.
- Advocacy: Met with Senator Murkowski regarding appropriations funding for the new facility in the future. Sent an updated capital funding request to Senator Stedman to support this next FY capital project for new facility.
- Met in Fairbanks with AHHA (Alaska Hospital Association) for executive meeting to discuss the legislative year and next year's goals. Healthcare financial losses, mental health crisis, payment reform and nursing compact were all major discussion points.
- Met with Bartlett in Juneau regarding potential partnership conversations to move forward with group sourcing conceptions and collaborative opportunities.



*May 10 community open house on building project with Bettisworth North presenting.*

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

**FY23 Benchmarks for Key Performance Indicators (KPIs):** A/R days to be less than 45, DNFB < then 5 days, and 90 Days Cash on Hand

- PMC completely paid off the approximately ~\$5 million Medicare advance payment emergency COVID relief.
- PMC was awarded a Falls Prevention grant of almost \$500,000 spread out over 4 years. The grant begins May 1 and will include departments in primary care, LTC/CAH, wellness and home health.
- The Home Health department submitted and is pending approval on a state grant to expand senior in-home services. Grant award notification will occur in May. Being awarded this grant will allow



PMC to expand support to seniors in Petersburg and possibly surrounding areas.

- PMC applied for a \$975,000 infrastructure related grant with the Denali Commission. Awards are expected to be announced in June.
- Cost report re-opening for 2019-2022 may offer settlement back to PMC with CMS ruling for removing the OPEB (PERS benefit calculation).
- State Medicaid rebasing desk review to set the rates for LTC next 4 years. Reviewing the option for an exceptional relief letter to support the removal of the cap and requesting rebasing to set for FY23 in addition to the next 4 years.

**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.

- Open house: PMC hosted a public open house covering the replacement facility project on May 10 at the Holy Cross House, Petersburg Lutheran Church, from 11:00 am – 7:00 pm. Representatives from Bettisworth North, project architect, provided a brief overview of project planning and design, accompanied by draft visuals of the proposed building design and space planning. Community members had ample opportunity to view the draft visuals, offer feedback, and ask questions about the design and planning process during this day-long open house. Several short informational sessions were presented throughout the day and early evening.
- Survey: An online, community wide survey is being conducted in conjunction with the May 10 open house. The survey is available at <https://bit.ly/PMC-project> and closes on May 20.
- Updates: Project updates are available on the PMC website under the “New Facility” tab: <https://www.pmcak.org/new-facility.html>.

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

- April 19: PMC provides update at PIA Council meeting on replacement facility project and home health presents on support for a grant to provide expanded home-based services to seniors in Petersburg and possibly surrounding areas.
- April 22: Petersburg Medical Foundation hosted the 2023 Circle of Life race. Proceeds benefit Beat the Odds.
- April / May: Educational sessions with school children to learn more about careers in imaging, laboratory, therapy and rehabilitation
- May 2: Written report for Assembly meeting
- May 4: KFSK Radio PMC Live
- May 10: Community open house on replacement building project

**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.

- Congratulations to Becky Turland, who was awarded the Alaska Afterschool Superhero award for 2023. Becky received the award at the April 24 SHARE coalition meeting.
- PMC applied for an AHHA Workforce Initiative to help support employee wellness programs and childcare initiatives.



- PMC was awarded a grant from the Petersburg Community Foundation for \$10,000 to support training for two staff members to obtain certification as facilitators in Youth Mental Health First Aid.

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

- CMS recertification survey for the Critical Access Hospital Designation occurred in April without any findings. This is a significant achievement.
- The collaboration for a Remote Patient Monitoring and Chronic Care Management program between Home Health, the Joy Janssen Clinic, Case Management, IT, and Billing continues. Progress has been made in the vendor evaluation and departmental recommendations will be coming soon. This patient monitoring program has the potential to increase provider access and communication for patients experiencing challenges with chronic disease and will support current quality initiatives.

**Submitted by:** Phil Hofstetter, CEO

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# ***PETERSBURG MEDICAL CENTER***

## **FINANCIAL REPORTING PACKAGE**

**FISCAL YEAR 2023**

**For the ten months ended April 30, 2023**



<b>PETERSBURG MEDICAL CENTER</b> <b>Statement of Revenues and Expenses</b> <b>For the ten months ended April 30, 2023</b>
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Month Actual	Month Budget	\$ Variance	% Variance		YTD Actual	YTD Budget	\$ Variance	% Variance	Prior YTD	% Variance
				<i>Gross Patient Revenue:</i>						
\$437,486	\$426,833	\$10,652	2.5%	1. Inpatient	\$3,174,679	\$4,145,791	(\$971,112)	-23.4%	\$3,051,776	4.0%
1,315,915	1,506,317	(190,402)	-12.6%	2. Outpatient	13,703,645	14,621,630	(917,985)	-6.3%	11,389,008	20.3%
476,237	421,740	54,497	12.9%	3. Long-term Care	4,459,789	4,088,734	371,055	9.1%	2,863,050	55.8%
<u>2,229,638</u>	<u>2,354,890</u>	<u>(125,253)</u>	<u>-5.3%</u>	4. <b>Total gross patient revenue</b>	<u>21,338,113</u>	<u>22,856,154</u>	<u>(1,518,041)</u>	<u>-6.6%</u>	<u>17,303,834</u>	<u>23.3%</u>
				<i>Deductions from Revenue:</i>						
621,730	456,234	(165,496)	-36.3%	5. Contractual adjustments	4,598,917	4,214,845	(384,073)	-9.1%	2,573,563	-78.7%
(82,045)	0	82,045	n/a	6. Prior year settlements	17,955	0	(17,955)	n/a	0	n/a
(138,722)	30,297	169,019	557.9%	7. Bad debt expense	148,834	290,714	141,880	48.8%	(50,251)	-396.2%
53,331	65,062	11,731	18.0%	8. Charity and other deductions	258,726	624,298	365,572	58.6%	457,100	43.4%
<u>454,294</u>	<u>551,593</u>	<u>97,299</u>	<u>17.6%</u>	9. <b>Total deductions from revenue</b>	<u>5,024,432</u>	<u>5,129,856</u>	<u>105,424</u>	<u>2.1%</u>	<u>2,980,412</u>	<u>-68.6%</u>
<u>1,775,343</u>	<u>1,803,297</u>	<u>(27,954)</u>	<u>-1.6%</u>	10. <b>Net patient revenue</b>	<u>16,313,681</u>	<u>17,726,298</u>	<u>(1,412,617)</u>	<u>-8.0%</u>	<u>14,323,422</u>	<u>13.9%</u>
				<i>Other Revenue</i>						
79,682	117,610	(37,928)	-32.2%	11. Inkind Service - PERS/USAC	805,820	1,176,104	(370,284)	-31.5%	1,206,780	-33.2%
0	8,272	(8,272)	-100.0%	12. Grant revenue	316,740	141,529	175,211	123.8%	685,975	-53.8%
302,856	0	302,856	n/a	13. Federal & State Relief	302,856	0	302,856	n/a	1,046,233	-71.1%
51,008	12,708	38,300	301.4%	14. Other revenue	1,056,055	952,471	103,584	10.9%	685,025	54.2%
<u>433,546</u>	<u>138,591</u>	<u>294,955</u>	<u>212.8%</u>	15. <b>Total other operating revenue</b>	<u>2,481,471</u>	<u>2,270,104</u>	<u>211,367</u>	<u>9.3%</u>	<u>3,624,013</u>	<u>-31.5%</u>
<u>2,208,889</u>	<u>1,941,888</u>	<u>267,001</u>	<u>13.7%</u>	16. <b>Total operating revenue</b>	<u>18,795,151</u>	<u>19,996,402</u>	<u>(1,201,251)</u>	<u>-6.0%</u>	<u>17,947,435</u>	<u>4.7%</u>
				<i>Expenses:</i>						
935,873	958,445	22,572	2.4%	17. Salaries and wages	9,743,582	9,712,245	(31,337)	-0.3%	9,342,340	-4.3%
55,796	48,535	(7,261)	-15.0%	18. Contract labor	654,218	490,872	(163,346)	-33.3%	455,784	-43.5%
325,544	386,442	60,898	15.8%	19. Employee benefits	3,483,122	3,902,010	418,888	10.7%	3,654,523	4.7%
91,267	151,793	60,527	39.9%	20. Supplies	1,364,913	1,517,932	153,019	10.1%	1,412,933	3.4%
129,584	121,066	(8,518)	-7.0%	21. Purchased services	1,398,561	1,260,438	(138,123)	-11.0%	1,579,284	11.4%
70,743	33,763	(36,980)	-109.5%	22. Repairs and maintenance	483,786	391,629	(92,157)	-23.5%	663,432	27.1%
(13,174)	12,190	25,364	208.1%	23. Minor equipment	137,785	121,900	(15,885)	-13.0%	193,159	28.7%
21,653	17,296	(4,357)	-25.2%	24. Rentals and leases	212,143	172,958	(39,185)	-22.7%	157,723	-34.5%
95,454	91,382	(4,073)	-4.5%	25. Utilities	927,422	913,815	(13,607)	-1.5%	900,151	-3.0%
13,597	6,778	(6,819)	-100.6%	26. Training and travel	69,733	67,780	(1,953)	-2.9%	74,824	6.8%
10,439	102,952	92,512	89.9%	27. Depreciation	863,848	1,029,516	165,668	16.1%	575,997	-50.0%
15,137	12,784	(2,353)	-18.4%	28. Insurance	149,269	127,840	(21,429)	-16.8%	112,662	-32.5%
24,515	28,091	3,575	12.7%	29. Other operating expense	312,776	280,906	(31,871)	-11.3%	290,844	-7.5%
<u>1,776,430</u>	<u>1,955,306</u>	<u>178,876</u>	<u>9.1%</u>	30. <b>Total expenses</b>	<u>19,801,158</u>	<u>19,989,841</u>	<u>188,682</u>	<u>0.9%</u>	<u>19,413,654</u>	<u>-2.0%</u>
<u>432,459</u>	<u>(13,418)</u>	<u>445,877</u>	<u>3322.9%</u>	31. <b>Income (loss) from operations</b>	<u>(1,006,007)</u>	<u>6,561</u>	<u>(1,012,568)</u>	<u>15432.2%</u>	<u>(1,466,220)</u>	<u>31.4%</u>
				<i>Nonoperating Gains(Losses):</i>						
19,857	12,500	7,357	58.9%	32. Investment income	226,166	125,000	101,166	80.9%	(258,020)	-187.7%
(14,834)	(454)	(14,380)	-3167.4%	33. Interest expense	(194,793)	(71,225)	(123,568)	-173.5%	(24,263)	-702.9%
0	0	0	n/a	34. Gain (loss) on disposal of assets	0	0	0	n/a	0	n/a
(10,057)	0	(10,057)	n/a	35. Other non-operating revenue	(155,815)	0	(155,815)	n/a	(73,265)	112.7%
<u>(5,034)</u>	<u>12,046</u>	<u>(17,080)</u>	<u>-141.8%</u>	36. <b>Net nonoperating gains (losses)</b>	<u>(124,442)</u>	<u>53,775</u>	<u>(178,217)</u>	<u>-331.4%</u>	<u>(355,548)</u>	<u>65.0%</u>
<u>\$427,425</u>	<u>(\$1,372)</u>	<u>\$428,798</u>	<u>-31246.1%</u>	37. <b>Change in Net Position (Bottom Line)</b>	<u>(\$1,130,449)</u>	<u>\$60,336</u>	<u>(\$1,190,785)</u>	<u>-1973.6%</u>	<u>(\$1,821,767)</u>	<u>37.9%</u>

( ) or - indicates unfavorable variance

**PETERSBURG MEDICAL CENTER**  
**Key Volume Indicators**  
**For the ten months ended April 30, 2023**

<u>Current Month</u>					<u>Year-To-Date</u>						
<u>Actual</u>	<u>Budget</u>	<u>Variance</u>				<u>Actual</u>	<u>Budget</u>	<u>Variance</u>		<u>Prior YTD</u>	<u>Variance %</u>
		<u>Amount</u>	<u>%</u>					<u>Amount</u>	<u>%</u>		
<b>Hospital Inpatient</b>											
46	27	19	70.4%	1.	Patient Days - Acute Care	292	270	22	8.1%	254	15.0%
62	67	(5)	-7.5%	2.	Patient Days - Swing Bed	437	670	(233)	-34.8%	468	-6.6%
108	94	14	14.9%	3.	Patient Days - Total	729	940	(211)	-22.4%	722	1.0%
1.5	0.9	0.6	70.4%	4.	Average Daily Census - Acute Care	1.2	0.9	0.3	35.3%	0.8	43.8%
2.1	2.2	(0.2)	-7.5%	5.	Average Daily Census - Swing Bed	1.8	2.2	(0.4)	-18.4%	1.5	16.8%
3.6	3.1	0.5	14.9%	6.	Average Daily Census - Total	3.0	3.1	(0.1)	-3.0%	2.4	26.3%
30.0%	26.1%	3.9%	14.9%	7.	Percentage of Occupancy	25.0%	25.8%	-0.8%	-3.0%	19.8%	26.3%
<b>Long Term Care</b>											
382	360	22	6.1%	8.	Resident Days	3,700	3,372	328	9.7%	2,735	35.3%
12.7	12.0	1	6.1%	9.	Average Daily Census	15.2	11.1	4.1	37.3%	9.0	69.2%
84.9%	80.0%	4.9%	6.1%	10.	Percentage of Occupancy	101.5%	73.9%	27.6%	37.3%	60.0%	69.2%
<b>Other Services</b>											
91	67	24	35.8%	11.	Emergency Room Visits	665	670	(5)	-0.7%	661	0.6%
228	190	38	20.0%	12.	Radiology Procedures	2,111	1,900	211	11.1%	1,869	12.9%
1,853	2,200	(347)	-15.8%	13.	Lab Tests (excluding QC)	18,652	22,000	(3,348)	-15.2%	21,060	-11.4%
1,055	752	303	40.3%	14.	Rehab Services Units	8,896	7,520	1,376	18.3%	6,401	39.0%
176	267	(91)	-34.1%	15.	Home Health Visits	2,421	2,670	(249)	-9.3%	2,262	7.0%
** 705	1,233	(528)	-42.8%	16.	Clinic Visits	7,260	12,330	(5,070)	-41.1%	9,136	-20.5%

( ) or - indicates unfavorable variance

**PETERSBURG MEDICAL CENTER**  
**Key Operational Indicators**  
**For the ten months ended April 30, 2023**

<u>Current Month</u>					<u>Year-To-Date</u>						
<u>Actual</u>	<u>Budget</u>	<u>Variance</u>			<u>Actual</u>	<u>Budget</u>	<u>Variance</u>		<u>Prior YTD \$</u>	<u>Prior YTD %</u>	
		<u>Amount</u>	<u>%</u>				<u>Amount</u>	<u>%</u>			
27.9%	19.4%	-8.5%	-43.9%	1.	Contractual Adj. as a % of Gross Revenue	21.6%	18.4%	-3.1%	-16.9%	14.9%	-44.9%
2.4%	2.8%	0.4%	13.4%	2.	Charity/Other Ded. as a % of Gross Revenue	1.2%	2.7%	1.5%	55.6%	2.6%	54.1%
-6.2%	1.3%	7.5%	583.6%	3.	Bad Debt as a % of Gross Revenue	0.7%	1.3%	0.6%	45.2%	-0.3%	340.2%
19.6%	-0.7%	20.3%	-2933.3%	4.	Operating Margin	-5.4%	0.0%	-5.4%	-16412.1%	-8.2%	34.5%
19.4%	-0.1%	19.5%	-27714.1%	5.	Total Margin	-6.1%	0.3%	-6.4%	-2112.0%	-10.4%	41.5%
				6.	Days Cash on Hand (Including Investments)	73.8				168.4	-56.2%
				7.	Days in A/R	61.9				45.3	-36.5%

Future months to include FTE's and Salary related indicators.

**PETERSBURG MEDICAL CENTER**

**Balance Sheet**

**April 30, 2023**

**ASSETS**

	<u>Apr 2023</u>	<u>Mar 2023</u>	<u>June 2022</u>	<u>Apr 2022</u>
<b>Current Assets:</b>				
1. Cash - operating	274,368	344,794	916,516	2,215,212
2. Cash - insurance advances	236,488	275,446	783,728	1,353,327
3. Investments	296,950	296,251	2,597,751	2,600,341
4. Total cash	<u>807,806</u>	<u>916,491</u>	<u>4,297,995</u>	<u>6,168,880</u>
5. Patient receivables	6,973,239	7,127,469	6,260,353	5,905,249
6. Allowance for contractals & bad debt	(3,428,992)	(3,591,919)	(3,363,222)	(3,621,438)
7. Net patient receivables	<u>3,544,247</u>	<u>3,535,550</u>	<u>2,897,131</u>	<u>2,283,812</u>
8. Other receivables	64,891	52,655	90,695	60,523
9. Inventories	324,486	328,611	356,624	272,416
10. Prepaid expenses	<u>118,256</u>	<u>156,218</u>	<u>111,147</u>	<u>1,408,410</u>
11. Total current assets	<u>4,859,685</u>	<u>4,989,524</u>	<u>7,753,592</u>	<u>10,194,041</u>
<b>Property and Equipment:</b>				
12. Assets in service	28,006,286	27,998,828	28,188,862	23,401,906
13. Assets in progress	<u>567,585</u>	<u>488,688</u>	<u>73,363</u>	<u>525,461</u>
14. Total property and equipment	28,573,871	28,487,517	28,262,225	23,927,367
15. Less: accumulated depreciation	(20,888,277)	(20,877,838)	(20,024,431)	(19,585,864)
16. Net property and equipment	<u>7,685,594</u>	<u>7,609,679</u>	<u>8,237,794</u>	<u>4,341,503</u>
<b>Assets Limited as to Use by Board</b>				
17. Investments	2,925,292	2,913,832	2,768,388	2,928,336
18. Building fund	<u>631,917</u>	<u>628,177</u>	<u>594,036</u>	<u>627,534</u>
19. Total Assets Limited as to Use	<u>3,557,210</u>	<u>3,542,009</u>	<u>3,362,424</u>	<u>3,555,871</u>
<b>Pension Assets:</b>				
20. OPEB Asset	<u>8,781,677</u>	<u>8,781,676</u>	<u>8,781,677</u>	<u>1,054,533</u>
<b>Deferred Outflows:</b>				
21. Pension	<u>2,756,254</u>	<u>2,756,254</u>	<u>2,756,254</u>	<u>2,894,105</u>
22. Total assets	<u><b>\$27,640,420</b></u>	<u><b>\$27,679,141</b></u>	<u><b>\$30,891,741</b></u>	<u><b>\$22,040,053</b></u>

**LIABILITIES & FUND BALANCE**

	<u>Apr 2023</u>	<u>Mar 2023</u>	<u>June 2022</u>	<u>Apr 2022</u>
<b>Current Liabilities:</b>				
23. Accounts payable	1,506,912	1,537,666	1,286,742	1,213,818
24. Accrued payroll	466,977	400,090	152,464	449,307
25. Payroll taxes and other payables	231,995	216,545	162,345	91,570
26. Accrued PTO and extended sick	1,032,147	991,788	994,445	1,000,437
27. Deferred revenue	157,840	528,295	402,639	325,544
28. Due to Medicare	70,991	191,762	1,760,708	1,128,565
29. Due to Medicare - Advance	236,488	275,447	783,728	1,353,327
30. Due to Blue Cross - Advance	0	0	0	0
31. Other current liabilities	3,515	3,516	3,515	3,534
32. Loan Payable - SBA	0	0	0	0
33. Current portion of long-term debt	<u>329,647</u>	<u>328,306</u>	<u>333,818</u>	<u>62,027</u>
34. Total current liabilities	<u>4,036,511</u>	<u>4,473,414</u>	<u>5,880,404</u>	<u>5,628,130</u>
<b>Long-Term Debt:</b>				
35. Capital leases payable	2,458,605	2,486,697	2,734,425	127,905
<b>Pension Liabilities:</b>				
36. Net Pension Liability	12,053,763	12,053,764	12,053,763	12,894,055
37. OPEB Liability	-	-	-	-
38. Total pension liabilities	<u>12,053,763</u>	<u>12,053,764</u>	<u>12,053,763</u>	<u>12,894,055</u>
39. Total liabilities	<u>18,548,879</u>	<u>19,013,875</u>	<u>20,668,592</u>	<u>18,650,090</u>
<b>Deferred Inflows:</b>				
40. Pension	9,613,036	9,613,036	9,613,036	903,147
<b>Net Position:</b>				
41. Unrestricted	2,446,104	2,446,104	4,308,584	4,308,584
42. Current year net income (loss)	(2,967,598)	(3,393,874)	(3,698,471)	(1,821,768)
43. Total net position	<u>(521,495)</u>	<u>(947,770)</u>	<u>610,113</u>	<u>2,486,816</u>
44. Total liabilities and fund balance	<u><b>\$27,640,420</b></u>	<u><b>\$27,679,141</b></u>	<u><b>\$30,891,741</b></u>	<u><b>\$22,040,053</b></u>

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

( ) or - indicates unfavorable variance