



# Petersburg Medical Center

103 Fram Street  
PO Box 589  
Petersburg, AK 99833

Phone: 907-772-4291  
Fax: 907-772-3085

## BOARD MEETING A g e n d a

DATE: Thursday, July 28, 2022  
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 –<br>June 30, 2022                               | Chair          | <i>in packet</i>           |
| IV. VISITOR COMMENTS  | Chair          | N/A                        |
| V. BOARD MEMBER COMMENTS  | Chair          | N/A                        |
| VI. COMMITTEE REPORTS   | Chair          | N/A                        |
| A. Quality Improvement Committee  |                |                            |
| VII. REPORTS  |                |                            |
| A. Home Health<br><i>Action required: Informational only</i>                    | (K. Testoni)   | <i>in packet</i>           |
| B. Imaging<br><i>Action required: Informational only</i>                        | (S. Paul)      | <i>in packet</i>           |
| C. Lab<br><i>Action required: Informational only</i>                            | (V. Shimek)    | <i>in packet</i>           |
| D. Long Term Care<br><i>Action required: Informational only</i>                 | (H. Boggs)     | <i>in packet</i>           |
| E. Patient Financial Services<br><i>Action required: Informational only</i>     | (C. Lantiegne) | <i>in packet</i>           |
| F. Quality & Infection Prevention<br><i>Action required: Informational only</i> | J. Barnard     | <i>in packet</i>           |
| G. Executive Summary<br><i>Action required: Informational only</i>              | P. Hofstetter  | <i>in packet</i>           |
| H. Financial<br><i>Action required: Informational only</i>                      | C. Brandt      | <i>addendum at meeting</i> |

VIII. UNFINISHED BUSINESS

IX. NEW BUSINESS

X. EXECUTIVE SESSION

*By motion, the Board will enter into Executive Session to consider a medical staff reappointment, for a personnel update, to conduct the CEO annual evaluation and to discuss matters the immediate knowledge of which would clearly have an adverse effect upon the finances of the hospital.*

XI. CEO EVALUATION

XII. NEXT MEETING

XIII. ADJOURNMENT

# *Petersburg Medical Center*

*PO Box 589*

*Petersburg, Alaska 99833*

*Phone: (907) 772-4291 | Fax: (907) 772-3085*



**Meeting:** Medical Center Board Meeting

**Date:** June 30, 2022 **Time:** 5:00 p.m.

**Board Members Present:** Kathi Riemer, Cindi Lagoudakis, George Doyle, Heather Conn (via Zoom), Joe Stratman, Marlene Cushing

**Board Members Absent:** Jerod Cook

**Others Present:** Several PMC staff

- I. **CALL TO ORDER:** Member Doyle called the meeting to order at 5:01 p.m.
- II. **APPROVAL OF THE AGENDA:** Member Stratman made a motion to approve the agenda as presented. Motion seconded by Member Riemer. Motion passed unanimously.
- III. **APPROVAL OF BOARD MINUTES:** Member Riemer made a motion to approve the minutes from May 24, 2022 as presented. Motion seconded by Member Lagoudakis. Motion passed unanimously.
- IV. **VISITOR COMMENTS:** None
- V. **BOARD MEMBER COMMENTS:** None
- VI. **COMMITTEE REPORTS:**
  - A. **Quality Improvement Committee.** Member Cushing attended the LTC quality meeting. Nothing specific to report.
  - B. **Resource Committee.** Member Lagoudakis attended the resource committee meeting this month. More on this will be discussed later in the agenda of today's meeting.
  - C. **Joint Conference Committee.** No update.
  - D. **Foundation Committee.** No update.
  - E. **Special committee(s).** No update.
  - F. **By laws committee.** Member Lagoudakis attended the by laws committee meeting this month. More on this will be discussed later in the agenda of today's meeting.

**G. Assembly work session.** P. Hofstetter participated in the annual assembly and hospital work session on June 14. He summarized it as a positive, collaborative discussion focused on next steps for the new facility site selection.

**VII. REPORTS:**

- A. Human Resources.** C. Newman summarized her report and was available to answer questions related to the written report (see copy). She further reviewed availability and challenges of housing, vehicle and bicycle status for traveler staff and employees transitioning to the island.
- B. Skilled Nursing.** E. Hart summarized her report and was available to answer questions related to the written report (see copy). She further addressed questions about Medicaid, Medicare and reviewed the importance of the pre-admission process and discharge plans. Because Medicaid goes back 5 years (60 months) on financial review for long term care, advance planning is very important.
- C. Quality & Infection Prevention.** J. Barnard summarized his report and was available to answer questions related to the written report (see copy).
- D. Executive Summary.** P. Hofstetter provided highlights from his written report (see copy).
- E. Financial.** C. Brandt provided a financial management update.

**VIII. UNFINISHED BUSINESS**

**IX. NEW BUSINESS**

- A. By Laws.** Member Stratman and P. Hofstetter participated in a committee meeting earlier in June and provided a recap and recent history of by laws status and routine update. A few grammatical corrections and an update of language based on USPS requirements and Borough legal were recommended. Member Lagoudakis motioned to approve by laws as submitted. Member Stratman seconded. Motion passed unanimously.
- B. FY23 Budget.** C. Brandt provided a review of the budget (addendum at meeting). She explained the high level approach to budgeting because of the many extensive projects (Cerner, Paylocity) completed this year. Member Doyle expressed appreciation for the improvements in the presentation of financials and the improvement of explanations and descriptions. Member Riemer motioned to approve FY23 budget as submitted, including a general contingency of \$200,000 for FY23 capital acquisitions. Member Lagoudakis seconded. Roll call vote of members present: Members Doyle, Stratman, Lagoudakis, Riemer, Cushing, Conn (via Zoom).

- X. EXECUTIVE SESSION** Member Stratman made a motion to enter Executive Session for a medical staff appointment and reappointments and for a personnel update [note: correction as this was a legal matter discussion and inadvertently listed as medical staff and personnel topic]. Motion seconded by Member Lagoudakis. Motion passed unanimously. Board entered Executive Session at 6:15 pm. Member Cushing made a motion to come out of Executive Session. Motion seconded by Member Stratman. Motion passed unanimously. Board came out of Executive Session at 6:30 pm.

- XI. NEXT MEETING** The next regularly scheduled meeting was set for Thursday, July 28, 2022 at 5:00 p.m.
- XII. ADJOURNMENT** Member Riemer made a motion to adjourn. Motion was seconded by Member Stratman. Motion passed unanimously. The meeting adjourned at 6:31 p.m.

Respectfully submitted,

---

Marlene Cushing, Board Secretary

DRAFT



# Petersburg Medical Center

Home Health Department Board Report July 2022

---

## Staffing Overview

- There have been many great changes here in Home Health. We added a new full-time nurse to our staff. One nurse will be transitioning into a newly created position. This position will assist the manager with all “back office” clinical tasks such as record review, quality assurance, staff education and more. Also added an additional half time CNA (certification pending,) half time administrative assistant. We welcomed the addition of a 15-hour-a-week substance abuse counselor on a trial basis. We have a total of 11 staff, all permanent. 5 full time nurses, 1 manager and 3 full-time case managers and the QA nurse. 1 patient navigator, 1.5 home health aides, 2 fulltime billing staff, a 0.5 administrative assistant and a 15-hour-a-week SA counselor. The final addition is a designated home health physical therapist. This position allows for the acceptance of “therapy only” patients. We are currently not using any travel nurses or temporary staff.
- One nurse was recently certified in foot and nail care, and another became a certified wound specialist. Travel nurse turned permanent employee is a certified Hospice and Palliative Care nurse.
- No changes with the billing staff. We recently met with Cynthia Brandt and the billing team at the hospital to streamline and coordinate reporting within the Matrix Care system.
- Patient navigator/medical social worker continues to be a valuable addition to the Home Health Program and PMC community. In addition to working with the patients and families on Home Health, she provides service to anyone in need here in Petersburg. Services include assistance with entitlements, long term care planning, applications for assistance including housing vouchers and food stamps. She is also a resource for Beat the Odds, is the Tribal Veteran’s liaison and most recently passed the exam to become a case coordinator for the Petersburg community.

## Review and Update

- Current census is 30. We recently had a sustained census of 38 but have discharged several people with “goals met.” We continue to accept referrals and work to meet the needs of our community.
- Home Health staff have consistently been on the frontline providing care to those who have tested positive for COVID 19. This includes direct care, ongoing education, support to the Hotline staff and Public Health testing and ultimately vaccinations.
- We continue community education to provide information about the role of the Home Health team, what services we provide and our scope of services that are available for populations who are not part of the elderly population.
- We ended our agreement with MyVitalz, the remote home monitoring company. We are in the process of looking for a new vendor that can send equipment directly to our patients.
- Home Health continues to provide care to a broad range of patients. This includes short term rehab, medication management, COVID care and End of Life support.

- RN case managers have taken on more end-of-life patients and strive to become increasingly knowledgeable in end of life needs and issues. They are creative and compassionate in the care provided. This can be a challenge as we are not yet a Hospice certified agency.

### **Looking Forward**

- Home Health continues to grow as we improve and expand the referral process and ways to serve those in need.
- Ongoing collaboration with therapy services. These services are an integral part of the home health program. Designated HH PT.
- We have 15 patients receiving home health aide support. Our HHA provides between 25 and 30 visits weekly.
- Continued growth has led to department discussions on flex work schedules to better meet the needs of the patient population and better manage patient care during off hours.
- Continuing education opportunities for all staff
- Patient Navigator is preparing to become a certified Medicaid Planner.
- Discussions around support of Mountainview Manor assistive living facility.

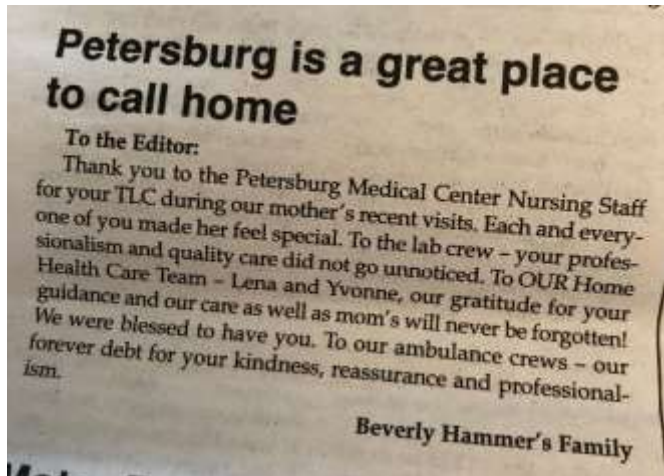
### **Challenges**

- Adjustment to new space and new staff.
- Limited access to DME.

### **Accomplishments**

- Continued census growth recently reached and maintained a census of 38.
- The Home Health team collaborated with the Petersburg Community Foundation and the long-term care staff to provide an educational series on long term care Medicaid and planning for future health care needs.
- Staff of 11.
- Hired a 15-hour-a-week Substance Abuse counselor.
- Hired half-time home health aide/administrative assistant.
- Several staff have obtained additional certifications. Foot and nail care, wound care and a certified Hospice and Palliative care nurse.
- Successful onboarding with the new EMR.
- New coder and Oasis review company. Reduced turnaround time to 48 hours or less. This will expedite billing submission.
- Home Health booth at the Health Fair. Provided an educational discussion on caregiver burnout.
- All home health staff are now under one roof because of the new larger workspace located in the basement of the Elks.
- Received a donation from a family of a previous patient.
- Received a letter of appreciation and commendation of staff mailed to the facility.

- Home health mentioned in this Petersburg Pilot letter to the editor.



### Opportunities

- Connection with facilities down south to alert them to services available at PMC HH.
- Increased staffing to meet the needs of growing census.
- Home Health owned DME.
- Future program growth potential includes in home IV therapies, Hospice services, pediatric services, enhanced behavioral health services including medication management. Adult day program and a personal care line.
- Expand services of Patient Navigator.
- Potential collaboration with Mountainview Manor.

Submitted by: Kirsten Testoni, RN, WCC Home Health Clinical Manager

---





# Petersburg Medical Center

Radiology Department Board Report July 2022

---

## **Staffing Overview**

Radiology currently has two full time employees. We recently had one staff member relocate to another area of the hospital, leaving us with an opening for a full-time technologist. We do have a travel technologist here while we are trying to fill that opening. There will also be a need for a travel technologist starting in November.

## **Review and Update**

Ander Baltzo medical physicist was here the end of June to do a yearly inspection on our CT, diagnostic x-ray, and mammography machines. All machines are running well and within their perspective required ranges.

The clinic sent out preventative screening reminders to women who were due for routine screening exams such as mammograms, pap smears and colonoscopies. We are starting to see a few women call who were overdue for mammograms. We are then able to screen if they would be candidates for any other screening exams to pass along to their physicians. I hope to see this continue and bring in more women for exams.

We received some fliers for lung cancer screening from the Alaska Cancer Partnership which we have hung up around the facility to help promote lung cancer screenings.

## **Looking Forward**

MQSA (The Mammography Quality Standards Act) inspection for mammography is scheduled for August 23. A designated MQSA Specialist from the FDA will be on site that day for the yearly inspection.

## **Challenges**

The mammography machine has needed some repairs that have taken a little while to fix. Multiple parts and trips of a mechanic were needed. We have always been able to keep track of women who need exams and get them scheduled quickly once the machine has been restored to working order.

There are many jobs in the field of radiology open across the nation and state so receiving much feedback about finding a new technologist has been limited.

## **Opportunities**

Continuing to pursue a new mammography machine to upgrade to a Digital breast tomosynthesis or 3D mammography unit.

Submitted by: Sonja Paul B.S.RT(R)(M), RDMS



# Petersburg Medical Center

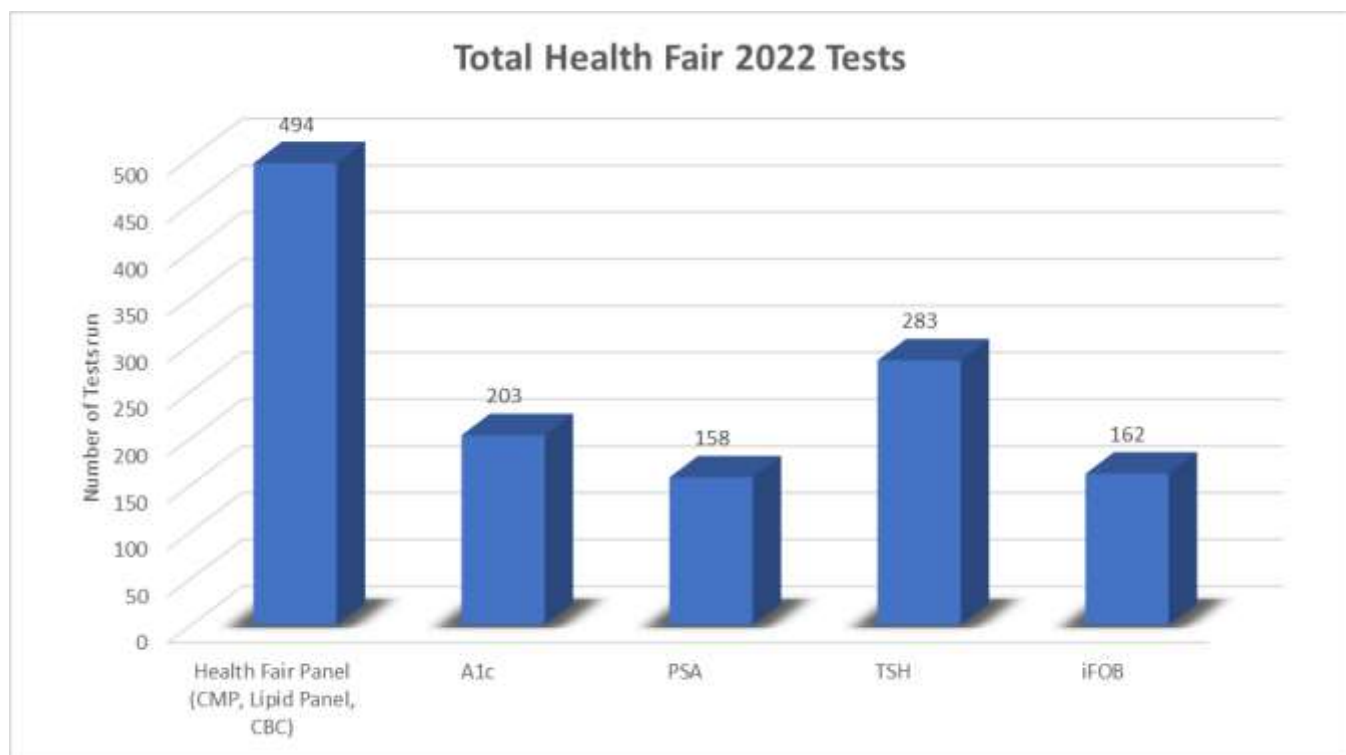
Laboratory Department Board Report July 28, 2022

## Staffing Overview

Lab hired a new Lab Assistant in May so that our Uncertified Lab Technician can continue training to become a certified Medical Technologist. The new Lab Assistant is cross-training with our Ancillary Receptionist to provide additional support for Lab registration. Lab has also hired a new certified Lab Technician who will begin in September. However, we will also have a Medical Technologist officially retire at the end of September. Miriam has been filling in as needed to provide relief for the rest of the Techs. She has been amazing, and we are sorry to see her go.

## Review and Update

The 2022 Health Fair and blood draws are complete. 494 community members had their blood drawn! That means there were 494 Complete Metabolic Panels, Lipid Panels, and CBC's run, plus 203 A1c's, 158 PSA's, 283 TSH's, and 162 iFOBs! Most results were available in the Patient Portal the same day blood was drawn.



Months of planning went into the Health Fair. Because this was the first Health Fair since Cerner's go-live (and the 2020 Health Fair draws were cut short due to COVID), Registration, Lab, Wellness, IT, and the Business Office all worked together to establish new workflows. It was truly a team effort, and we all discovered valuable tools that will be useful for the 2024 Health Fair.

A huge thank you to our awesome volunteer phlebotomists David Berg, Samantha Turcott, Asia Prus, Sharon Hunter, and Jessica Franklin for all their hard work!

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

### **Looking Forward**

Last year Petersburg had its first community blood drive hosted by the Blood Bank of Alaska. Many were hoping to have BBAK return this year, however, due to staffing shortages at the blood bank, they are unable to come to Petersburg this year. The Lab will continue to reach out to have BBAK return in 2023.

### **Challenges**

Lab Technologist shortages continue to affect staffing nation-wide. Between the number of accredited programs decreasing and the burn-out of current techs due to COVID, filling existing vacancies will continue to be challenging.

### **Accomplishments**

As previously mentioned, the 2022 Health Fair blood draws went extremely well considering the workflow changes and supply shortages we faced as compared to previous Health Fairs. There was excellent teamwork and communication between departments, and we saw good community involvement. There was a lot of positive feedback with respect to how quickly results showed up in the Patient Portal.

### **Opportunities**

The University of Alaska Medical Laboratory Science program provided an opportunity for potential employers to visit with the graduating Medical Technologists during their Senior Seminar on July 19. PMC was represented along with other hospital labs from around the state to share about their labs and available employment opportunities for new graduates.

The lab plans to host a UAA student in the Spring with the hope they may be a good fit for joining our team.

Submitted by: Violet Shimek, MLS (ASCP)<sup>CM</sup>, Laboratory Manager

---



# Petersburg Medical Center

Long Term Care Quality Board Report July 2022

---

## Staffing Overview

### Nursing:

0600 – 1830: 1 staff nurse

1800 – 0630: 1 staff nurse

0600 – 1830: 2 CNA

1800 – 0630: 2 CNA

### Activities:

1 Activities Coordinator working Monday-Friday (0800 – 1700)

Aid 1: Monday - Friday (0700 – 1500)

Aid 2: Saturday – Tuesday (0830 – 1830)

Aid 3: Wednesday-Sunday (1100-1900)

## **Current LTC Census: 11**

LTC has been busy with admissions this summer. In the last two months we have had four new admissions. We are planning for a resident to join us next week and possibly another from Ketchikan as well in the next two weeks. Ketchikan LTC unit is full, and we have been receiving increased referrals from the Ketchikan region. We expect to have 12-13 residents by the end of July. We have a team who evaluates each referral using a rigorous process to determine if our facility is appropriate. Often, referrals do not become residents here based on the results of that very involved and regimented process.

## Review and Update

- LTC COVID outbreak: On July 8 a resident tested positive. They were moved to the acute side per our COVID plan. This was the first resident since the start of COVID that has tested positive. They had minor symptoms and were moved out of LTC in an abundance of caution. This started a seven-day isolation period. Staff wore fit tested N95 masks and eye protection throughout their shift as well as full PPE (addition of gown and gloves) with any close personal cares. This new positive re-set the outbreak clock and twice weekly testing continued. On July 11 an additional resident tested positive with mild symptoms. This resident remained in their room in LTC with select staff entering the room for care. No additional cases were identified on July 14 or July 18. On July 19 after a full 7 days of isolation for all residents, the first resident was recovered, and the second resident had two negative antigen tests that were performed 24 hours apart. This allowed staff to return to wearing KN95 masks and eye protection throughout their shift. Presently, staff continue to wear full COVID PPE (N95, eye protection, gown, and gloves) to enter the second resident's room until July 22 which will mark the full 10-day quarantine. LTC will remain in outbreak status until July 26. This means that Staff wear KN95 masks and eye protection while working. Staff and residents test twice a week. If a new positive case is identified the

outbreak clock will reset. If another resident were to test positive during this time a new 7-day isolation period will begin.

- LTC visitation remains open. While in outbreak status visitors are asked to visit in resident's rooms or designated visitation areas (solarium, DICR, etc.). Visitors are encouraged to antigen test prior to visitation. They are screened and asked to visit another time if they are a close contact or have symptoms. Visitors are provided with a KN95 mask. COVID positive residents can only have visitors for compassionate care reasons and must wear full PPE.
- New blinds are in rooms and working well.
- 4 rooms in LTC have been freshly painted and 3 rooms have new flooring.
- Two new recliners purchased for LTC but have not come in yet.
- Home health, LTC, and Skilled departments provided community education for Medicaid planning and PMC services. Still planning to have a Southeast local Medicaid lawyer give a presentation this fall.
- OT services have returned to LTC.

### **Looking Forward**

- Build up volunteer program again with new Activities Coordinator.
- Newer residents may be interested in joining the resident council and starting to get this program up and running again. (In the recent past, there was lack of interest.)
- Working with Maintenance to update LTC (lighting, furniture, paint) providing a much-needed face lift.
- Starting to offer in person education/training to staff. Still working on interruptions with planned in person training and outbreaks.
- Continue to evaluate all referrals, provide education on the admissions process and work with other care providers across the region on the referral process.

### **Challenges**

- Staffing continues to be difficult at this point. Many of the residents in LTC require high care needs and 1:1 supervision. Travelers are difficult to come by (RN, LPN, and CNA) due to COVID.
- Strict sick leave policy. Staff cannot work if they have any symptoms.
- Isolation status was very difficult for residents and staff.

### **Accomplishments**

- PMC LTC continues to be 5-star via CMS, which now also includes vaccination and booster rates.
- Fantastic Nursing, CNA, Activities team.
- Three team members passed their CNA exams to become licensed CNAs.
- Elizabeth and Helen recertified as resident assessment coordinators (RAC-CT) for MDS assessments that are completed and submitted to CMS.

**Opportunities**

- Working with the Alaska Nursing Homes Together (ANHT) Group through Mountain Pacific Quality. This has been an exceptional group to be a part of. Most nursing homes and ALFs around the state are involved in this group as well as State Epi, HFLC, ASHNHA, LTC Ombudsman, etc. Now meeting monthly.
- PMC was able to secure funding through the ASHNHA CNA Workforce Development Project with the goal to retain and recruit valuable CNA staff. We were able to reward the CNA staff who have worked so hard with these monetary incentives (\$20,500 in total). This is ongoing and a wonderful incentive to offer new CNA staff.

Submitted by: Helen Boggs, RN 7/20/22

---



# Petersburg Medical Center

Patient Financial Services - July 19, 2022

---

Healthcare Resource Group (HRG) – third party billing vendor Patient Financial Services (PFS)

## **Staffing Overview**

PFS has maintained our staff of 2 on-site PFS Reps, 1 remote PFS Rep and a manager. We continue efforts to fill one open full-time position in our department. The consultant we engaged to help with the Cerner implementation and PFS manager transition is still supporting PMC facility wide as we work through the issues in the Cerner build, review our policies and streamline PFS processes.

## **Review and Update**

**AR** – PFS Reps continues to work in both the historical CPSI system and the new Cerner system. Billing claims is complete out of the CPSI system, and we are now working on claim follow up, denials and balances. We anticipate the wind down process for CPSI to be complete towards the end of 2022.

**Charge Master** – updates are happening daily to the CDM as more charge items are being used/created and Cerner build issues are found.

(The charge or item master—also called the charge description master (CDM)—is a master price list of supplies, devices, medications, services, procedures, and other items for which a distinct charge to the patient or tracked supplies exists. A current and accurate CDM is vital to any provider seeking proper reimbursement and a key indicator in a healthy revenue cycle.)

**DSH Survey** – The Disproportionate Share Hospital (DSH) Survey was submitted to an assigned auditor for review in June 2022. This was an extensive project and spanned PFS, Finance and IT departments for reporting, verifying information and submission. Federal law requires that state Medicaid programs make Disproportionate Share Hospital (DSH) payments to qualifying hospitals that serve a large number of Medicaid and uninsured individuals. PMC received a DSH payment in FY19 of \$200,000.00. The Alaska Medicaid DSH Examination for FY19 was a mandated examination to comply with the federal regulation that requires DSH payments made under the state Medicaid programs to be validated. In addition to completing the survey, a claims-level analysis was prepared to support the uninsured services provided and payments received during the year. Once the review is finished, we will be contacted towards the middle of August with any questions for follow up and we should receive the results of the review when complete.

## **Looking Forward**

PFS is prepping for the FY22 Financial Audit that will start in August. The FY22 audit will be challenging for our department as it will span three EHR systems and two different billing system. The PFS portion of the audit will include billing and claim information for the hospital, clinic, and home health, both in Cerner and CPSI, along with the new home health system MatrixCare.

CPSI Wind down process is happening! The PFS team is looking forward to the resolution of claims and balances in CPSI and turning our full focus to working out of our new Cerner system.

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

### **Challenges**

It is a busy and challenging time in the Business Office. Our doors to the public are still closed, but patients can use the Walk-Up Window at the BO to receive face to face customer service. We have updated the PMC website to include options for online payments for both the historical and new system. In addition, the IT department has updated the website with fillable documents that can be submitted electronically by patients.

### **Accomplishments**

PFS Reps continue to give great patient care as they help navigate the new billing processes in Cerner and the remaining patient statements in CPSI. They have worked hard to make the transition to the new system as seamless as possible.

Submitted by:

Carrie Lantiegne – Patient Financial Services Manager, [clantiegne@pmc-health.org](mailto:clantiegne@pmc-health.org), 907-772-5734

---





# Petersburg Medical Center

Quality and Infection Prevention Board Report July 2022

---

## **Review and Update**

The transition to a new Quality Manager is ongoing. Quality systems and reporting are being analyzed for efficiency and requirements. Onboarding of the Infection Preventionist scheduled for August.

## **Looking Forward**

QAPI Projects:

- iAuditor for facility rounding, EVS checklists, maintenance, dietary.
- Patient Family Engagement for Skilled admissions
- Dietary: Steam table and meal plan review
- Clinic: Covid Testing Process
- Financial/HR: Paylocity
- LTC: Room renovation
- LTC: Lucynt Activity Table
- Medevac follow-up by case manager
- Antimicrobial Stewardship Outpatient ABX therapy monitoring

## **Opportunities**

Healthcare should be safe, timely, effective, efficient, equitable, and patient centered. Quality drives all operations of a healthcare facility to include the Board. Institute for Healthcare Improvement (IHI) has resources and board education opportunities. For more information visit:

<http://www.ihl.org/resources/Pages/IHIWhitePapers/Framework-Effective-Board-Governance-Health-System-Quality.aspx>

## **Challenges**

COVID-19 transmission is occurring widely throughout much of Alaska. Because the Independence Day holiday affected testing, it is difficult to determine a trend. Hospitalizations remain below the peak of the Omicron wave, though COVID-19 hospitalizations have increased substantially since mid-April, especially among older Alaskans.

2,123 cases were reported in Alaskans the week of July 3–July 9, which is an 18% decrease compared to the previous week. This decline is likely an artifact due to a holiday-related decline in testing volume.

COVID-19 cases declined last week compared to the prior week in all five of the largest boroughs (Municipality of Anchorage, Matanuska-Susitna Borough, Fairbanks North Star Borough, Kenai Peninsula Borough, and City and Borough of Juneau), but this likely reflects the drop in testing around Independence Day.

The intensity of COVID-19 transmission varies between communities outside the largest boroughs. Trajectories are mixed, with COVID-19 cases declining in some communities but increasing or holding steady in others. Making comparisons between communities is difficult because testing practices may vary between communities.

COVID-19 cases continue to occur in many communities in Alaska off the road system, with some communities experiencing high numbers of cases relative to their population size.

The Omicron variant accounts for effectively all SARS-CoV-2 circulating in Alaska. The BA.5 lineage of Omicron is increasing in frequency and by now likely accounts for the majority of cases. Visit Alaska's SARS-CoV-2 Genomics Dashboard to learn more.

To learn more about COVID-19 cases, hospitalizations, and deaths due to COVID-19 in Alaska, visit the Cases Dashboard or the quarterly report. The cases dashboard includes demographic information on cases and the quarterly report includes demographic information on hospitalizations and deaths.

Upcoming meetings (meetings will be in person and Zoom, DI Conference Room):

- LTC Quality
- CAH Quality
- Infection Prevention

Submitted by: Jay Barnard, [jbarnard@pmc-health.org](mailto:jbarnard@pmc-health.org), 907-772-5545

---

Resources:

State of Alaska Weekly Case Update (Wednesdays): <https://dhss.alaska.gov/dph/Epi/id/Pages/COVID-19/weeklyupdate.aspx>

Institute for Healthcare Improvement: <http://www.ihl.org/>



# Petersburg Medical Center

CEO Board Report July 2022

---

## **CEO Report:**

The past month has seen another outbreak with COVID that affected our LTC facility. Following almost 3 weeks of testing and management this appears to be resolved. COVID appears to be an inclusion of daily operations in healthcare and will likely continue along this path.

PMC moved forward with opening and filling a youth coordinator position for addressing the childcare motion a previous board meeting. We are fortunate to have Kinderskog as an outcome to this process and look forward to moving this pilot project forward.

As reported at the last board meeting the PMC / Borough work session and assembly approval resulted in moving forward with the Geotech and environmental study focusing on two site locations (N Haugen and Excel St). PMC is also working with the Borough on a collaborative assessment with assisting Mountain View Manor.

PMC received an unannounced visit from OSHA on July 21 as part of a Local Emphasis Program for healthcare worker safety and health inspections in localized areas. The final report will be sent to PMC in the coming weeks and captured in an upcoming Quality department board meeting.

## **Legislative Update:**

The 32<sup>nd</sup> Alaska legislature finished last month with a few items of note for PMC.

- The governor signed HB265 into law to increase access to care. This has the potential for PMC to expand its telehealth program and increase access to care. PMC continues to utilize telehealth visits in primary care and behavioral health on a regular basis.
- PMC line item for \$20M allocated in the state capital budget was signed and the first meeting with the program manager occurred. This is funding through a COVID package under the Department of Treasury section 604 with a focus on workforce development, health monitoring and economic improvement for the community.

## **Community Education/Outreach:**

- On July 6, PMC had the opportunity to provide USCG Base Ketchikan Health Safety and Work-Life Department Head for Southeast Alaska LT Bohner and Dr. Jose Gomez, the Coast Guard psychologist for the state of Alaska, with a tour of the Joy Janssen clinic and overview of PMC services. We talked about ways to work more seamlessly to provide continuity of care to USCG personnel and families in the area, including capabilities and processes for patient communications between Ketchikan clinic and Joy Janssen Clinic.
- PMC reports out at July 5 Borough Assembly Meeting
- KFSK Radio PMC Live monthly July 7
- Managers meeting July 22
- Paylocity Time and Attendance implementation complete for July 1 new FY23

**Integrated Healthcare & Work Force Development:**

PMC has been fortunate in hiring and onboarding Quality Director, Infection Prevention, Controller and new staff in various departments. There continues to be a resurgence of workforce hires that is encouraging as some of our long-time staff retire and openings are filled. The national movement towards healthcare burnout is significant and we are feeling fortunate and encouraged.

**Finance:** The financial package is included for review and approval for FY23 Budget. We are seeing increases in LTC and recovery in our services but the recent COVID outbreak sets us back in both morale, access to care and improvements. The past year had a negative variance due to many of these issues with COVID, Medicare pay back and recovery volumes.

**PMC Statistics:**

