

# 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, April 22<sup>nd</sup>, 2021  
TIME: 5:00 p.m.  
LOCATION: Zoom

	<u>Lead</u>	<u>Handout</u>
I. CALL TO ORDER	<i>Chair</i>	<i>N/A</i>
II. APPROVAL OF THE AGENDA	<i>Chair</i>	<i>in packet</i>
III. APPROVAL OF BOARD MINUTES – March 25 <sup>th</sup> , 2021	<i>Chair</i>	<i>in packet</i>
IV. VISITOR COMMENTS	<i>Chair</i>	<i>N/A</i>
V. BOARD MEMBER COMMENTS	<i>Chair</i>	<i>N/A</i>
VI. REPORTS		
A. Pharmacy <i>Action required: Informational only</i>	<i>E. Kubo</i>	<i>in packet</i>
B. Rehabilitation <i>Action required: Informational only</i>	<i>K. DuRoss</i>	<i>in packet</i>
C. Plant <i>Action required: Informational only</i>	<i>M. Boggs</i>	<i>in packet</i>
D. EVS <i>Action required: Informational only</i>	<i>G. Edfelt</i>	<i>in packet</i>
E. Home Health <i>Action required: Informational only</i>	<i>K. Testoni</i>	<i>in packet</i>
F. Quality & Infection Prevention <i>Action required: Informational only</i>	<i>L. Bacom</i>	<i>at meeting</i>
G. Executive Summary <i>Action required: Informational only</i>	<i>P. Hofstetter</i>	<i>in packet</i>
H. Financial <i>Action required: Informational only</i>	<i>R. Tejera</i>	<i>in packet</i>
VII. UNFINISHED BUSINESS		

VIII. NEW BUSINESS

IX. EXECUTIVE SESSION

*By motion, the Board will enter into Executive Session to consider medical staff reappointments and to discuss personnel matters.*

X. NEXT MEETING

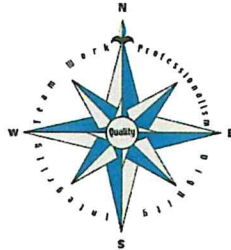
XI. ADJOURNMENT

# Petersburg Medical Center

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



**Meeting:** Medical Center Board Meeting

**Date:** March 25<sup>th</sup>, 2021 **Time:** 5:00 p.m.

**Board Members Present:** Joe Stratman, Marlene Cushing, Jerod Cook, Jim Roberts, Kathi Riemer, Cindi Lagoudakis, George Doyle (members attended via Zoom)

**Board Members Absent:** None

- I. **CALL TO ORDER:** Member Cook called the meeting to order at 5:01 p.m.
- II. **APPROVAL OF THE AGENDA:** Member Riemer made a motion to approve the agenda as presented. Motion seconded by Member Roberts. Motion passed unanimously.
- III. **APPROVAL OF BOARD MINUTES:** Member Stratman made a motion to approve the minutes from February 25<sup>th</sup>, 2021 as presented. Motion seconded by Member Lagoudakis. Motion passed unanimously.
- IV. **VISITOR COMMENTS:** Dr. Hyer stated this is her last meeting as Chief of Staff and that she is turning that rotating position over to Dr. Burt.
- V. **BOARD MEMBER COMMENTS:** Member Lagoudakis noted that Petersburg made the LA Times for the vaccination efforts.
- VI. **REPORTS:**
  - A. **Informatics.** J. Dorner was available to answer questions related to her written report (see copy).
  - B. **Materials Management.** M. Randrup was not in attendance but her written report (see copy) was available to review.
  - C. **Medical Records.** J. Kvernvik was available to answer questions regarding her written report (see copy).
  - D. **Nursing.** J. Bryner was available to answer questions regarding her written report (see copy).
  - E. **Quality & Infection Prevention.** L. Bacom stated that she is staying busy scheduling vaccinations.
  - F. **Executive Summary.** P. Hofstetter provided a verbal report covering topics such as the recent outbreak, new facility, the upcoming work session with the Assembly and workforce

development. J. Bryner provided an update on vaccination efforts. C. Lantiegne provided an update on changing billing vendors. J. Dormer provided an update on changing vendors for electronic health records.

- G. Financial.** R. Tejera noted that there were no major changes and the bottom line is \$1.2 million. She added that she continues to work to increase volumes and patient revenue. She then focused on the cost of pandemic and discussed the American Rescue Plan. She noted that an Emergency Management department was created to track the costs and revenues related to the management of the pandemic. The biggest expense are salaries. Medical supplies is also a major expense, but she is working with FEMA to get some reimbursement. Currently the bottom for this department is a loss of \$1.5 million. The American Rescue Plan is in place and there is a lot of funding for financial relief for rural providers. The process to apply is being developed. Funding is also available for vaccine and testing. There are funds available for mental health and public health that PMC may be eligible for. PPP loan is also receiving funding that PMC may be able to apply for.

**VII. UNFINISHED BUSINESS**

**VIII. NEW BUSINESS**

- A. Hospital Board / Assembly Work Session.** Member Riemer made a motion to approve the agenda as presented for the work session between the hospital board and the borough assembly. Motion seconded by Member Lagoudakis. Motion passed unanimously.
- B. Bylaw Review Committee.** Member Riemer made a motion to form a bylaw review committee. Motion seconded by Member Roberts. Motion passed unanimously. Members Roberts, Lagoudakis and Riemer agreed to serve on the committee.

- IX. EXECUTIVE SESSION** Member Cushing made a motion to enter Executive Session to discuss personnel matters and to review medical information and related public health records which are not subject to public disclosure. Motion seconded by Member Stratman. Motion passed unanimously. Board entered Executive Session at 5:56 pm. Member Riemer made a motion to come out of Executive Session. Motion seconded by Member Lagoudakis. Motion passed unanimously. Board came out of Executive Session at 6:46 pm.

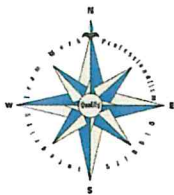
- X. NEXT MEETING** The next regularly scheduled meeting was set for Thursday, April 22<sup>nd</sup>, 2021 at 5:00 p.m.

- XI. ADJOURNMENT** Member Roberts made a motion to adjourn. Motion was seconded by Member Riemer. Motion passed unanimously. The meeting adjourned at 6:50 p.m.

Respectfully submitted,

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Marlene Cushing, Board Secretary



# Petersburg Medical Center

Pharmacy Board Report 4/14/2021

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## Staffing Overview

Staffing remains ,primarily Elise assisted by Steph Romine

## Review and Update

### Flu Shots:

Flu shots were pre-ordered in March to arrive in the fall.

### USP 800:

The hazardous drug room has been built but is not yet in use at this time.

## Opportunities

### Cerner:

PMC will be transitioning from CPSI to Cerner in the fall.

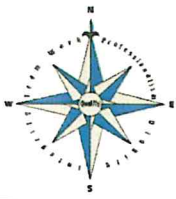
### 340B:

We have made five purchases using the 340B program, all for the same medication, saving a total of \$25,000. Only outpatient visits not paid by Medicaid are eligible for the program, and many medications do not show any price difference. The program will be used for some future outpatient visits.

## Challenges

We still have no running inventory in the drug room at this time. This means that the biannual inventory for the department does not have any defined expected values. We expect that this problem will be remedied with the transition to the Cerner software.

Submitted by Elise Kubo, Drug Room Coordinator



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## Rehabilitation annual board report 2021

Kaitlin DuRoss, PT, DPT, WCC, DWC

The rehabilitation department has been staying steadily busy in all 3 therapies. We currently are staffed with 4 full time PTs, 2 full time OT, 1 full time ST, and 1 full time receptionist. Over the past year our department has had a lot of transition. Multiple full-time employees have left and we struggle to find full time staff to replace them.

Jessica Baker, is our full time OT. She has been very busy taking on all OT patients since Tara Burns left. We recently added on a traveling OT Kaylee Earll, who has a lot of experience in dementia treatment. Over the next few months OT's goal is to assist in LTC activities, building programs up that are individualized for our residents. Jess will not be taking the school contract this year due to how busy she has been with her caseload. She also plans on taking an unknown amount of time off starting in June.

Denis Kotsoev is our speech language pathologist. He is very motivated and has been steadily busy with his caseload. I have received very positive feedback about Denis from both patient's and staff. He has great energy and has been a great addition to our department. In the future he would like to get FEEs certified for our hospital to continue swallowing studies here. He has finished all his training and has been scoping patients for the past few months. Denis will be leaving our department within the next year. We will start looking for a full time speech therapist this summer.

In Physical therapy currently we have 5 full time PTs, Kaitlin DuRoss, Bradee Axmaker, Amanda Galaktionoff, Nick (traveler), and Suzan (traveler). We are consistently busy throughout the year. At the end of the month, we will be losing Bradee Axmaker and Nick. We are looking for 2 full time therapists, one with peds experience to fill the loss of our pediatric PT. Amanda will continue care for some of our pediatric patients, but for more complex peds services, our services will be very limited.

Kelly Davis is our Rehab receptionist. Shas been doing a great job as our rehabilitation department receptionist. She is very intelligent and well organized, making all our lives easier when our focus is on patient care and not insurance/scheduling/equipment cleaning/scanning/referrals.

Chrystine Lynn is our new Rehab Tech. She is assisting Kelly with tasks and soon will start carrying out LTC resident home exercises programs.

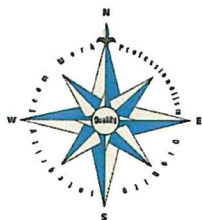
Our progress over the past 4 years moving from a physical therapy department to a fully staffed Rehabilitation department has been amazing but that does not come without challenges. We continue to suffer from "growing pains". The lack of space is an ever-increasing problem with no easy solution. We have

multiple patient complaints about how small our space is. Our office space for the therapists a storage room, without windows, without air flow, without any way to manipulate the temperature. In the summer, the normal temperature in our office is 80degrees. In our gym its about 75degrees. Patient and therapists having to wear masks in areas where the temperature is close to 80degrees and doing exercises is highly uncomfortable. Due to our office space being a community office space for all therapists, we are not allowed to take our masks off within our office. We understand the reasoning why we must wear the masks, but for us it has been uncomfortable due to the poor airflow and temperature control within our department and office space. We have encouraged the therapists to sit in different unoccupied areas of hospital to have some time to take off their mask throughout the day.

Since covid has started, my staff has felt frustration and burnout from being a healthcare provider. We have had multiple permanent staff leave/will be leaving because of frustrations. The burn out in our department is a real thing. It has always been hard to staff our department, and it now seems to be even harder. Over the next few months our services will be limited due to the decrease in PTs and OTs. I have been working with Cindy on getting more contractors to fill our open spots so our perm staff can have some time off to improve mental health.

Our goals as a department for the next couple months include:

- Continue to provide the best service we can for our patients during this time of constant changes
- Hire 2 full time perm PTs (one with peds experience)
- Hire a full time Speech Therapist
- Hire a full time Occupational Therapist



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## PLANT REPORT

April 2021

### **Staffing:**

Presently our department of two is unchanged and healthy.

### **Accomplishments:**

We have made it through another winter with no serious break downs. New snow removal equipment was a huge help in keeping the staff and patients transiting to and from the building safely, as well as a morale boost for the department.

The pandemic has created some innovative answers to questions that were never pondered before. For example, we converted the community van into a visitation booth with an electric heat source, and we created a physical therapy/rehab room in the operating room to limit travel of rehab patients through the hospital. We also developed two new office areas in the clinic with modular panels and frames.

In keeping with the ever-changing goal posts of this pandemic, we focused on equipment or procurements that could possibly have multiple uses both during and after this time. In doing so we found and purchased 5 portable and retractable 20 ft. privacy screens, two of which have see-through panels for visitation. These screens could provide anything from an outdoor triage area under the emergency room canopy, a visitation area in the conference room, or could also be used to mitigate foot traffic in the hallways.

Our local glass man was tasked with putting sliding windows in the respiratory clinic and also the business office for payments. I feel that these alterations will also have a place after things open up.

### **Challenges:**

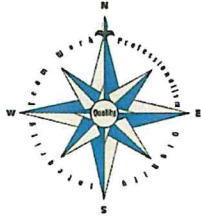
We have two 100-gallon electric hot water heaters that we maintain at 170 degrees. This water is shared by laundry, dietary, and is run through a balancing valve to reduce the temp to 110, then services the LTC oldest portion. In keeping the temps so hot it shortens the life of the heaters,



and we are at that point. Two new heaters have been ordered and should arrive by months end and installed ASAP.

Submitted by:

Mike Boggs, Plant Manager



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## EVS REPORT

April 2021

### Staffing Overview

We have an employee on family break for the meantime. One is retiring and another is probably moving, which will leave us with a staff of four. On the bright side, we have a new applicant!

### Looking Forward

The department goal this year is for all EVS staff to become Certified Health Care Environmental Services Technicians (CHEST). This program reduces variation in practice and establishes a consistent high standard of care and performance.

### Challenges

Our team is getting burned out. This season and weather have been tough on us. EVS is constantly cleaning the floor and following the sand and rocks all over the facility. It's been difficult just to maintain and keep up.

### Accomplishments

We got the new a steamer for deep cleaning, but I have not the opportunity to use it. We are looking into purchasing a small buffer because the current one is large and difficult to maneuver in patient rooms.

Submitted by: Grazel Edfelt



# Petersburg Medical Center

HOME HEALTH Report (4/14/21)

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## Staffing Overview

- Home Health is now has a full compliment of nursing staff. A permanent employee has been hired and will start on or around April 26, 2021. Bringing full time nurses to 3, 1 manager and 2 full time case managers. In addition, we have 1 RN traveler. Our current traveler will be here until April 30, 2021. Additional RN traveler will start May 17,2021. This is in anticipation to our growing census and staffing needs during implementation of the new Electronic Medical Record.
- New assistant biller has had a positive impact on Home Health billing and expedition claims submission and reimbursement. At this time, this position will be increased to full time to meet the billing needs of the department.
- The position of CNA/Biller has been eliminated with the resignation of person in that role. A full time Home Health Aide has been hired and will started on 4/8/21. Home Health nurses have been providing personal care in the absence of this position in order to meet the needs of our patient population. However, this is not a sustainable option.
- Patient navigator/medical social worker has proven to be a valuable addition to the Home Health Program. In addition to working with the patients and families on our service, she has been providing support and assistance to those connected to the clinic. This service is available to anyone in need.

## Review and Update

- Current census is 25. Home Health had 15 referrals between February 19 and March 6, 2021. The majority of these referrals were directly related to the recent Covid outbreak. All of these patients have recovered and have been discharged from service. 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 Healthtesting and ultimately vaccinations.
- We are working with public relations to continue to provide the community with knowledge of our program. Community education on the role of the Home Health team and services provided is vital for continued growth. Home Health provides more than care for the elderly.
- We have 8 patients using the Remote Patient Home monitoring systems. We continue to assess our patients and will adding additional pts to this part of our program as the need arises. We have been able to use these devices on people with Covid recovering at home.

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

Home Health has also provided thermometers and pulse oximeters to those in need, even if they are not on Home Health service.

- 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's are learning to provide in home end of life care. This can be a challenge as we are not yet a Hospice certified agency.

### Looking Forward

- Home Health continues to grow. We will continue to work on our referral process and ways to keep our census rising.
- Ongoing collaboration with therapy services. These services are an integral part of the home health program.
- We have 6 patients receiving home health aide support. We would like to expand on this as we grow. There may a need to add an additional; home health aide in the future.
- Due to continued growth, department discussion on managing patients during off hours. This includes flexed work schedules and on call hours to meet the needs of patient population.
- Continuing education opportunities for all staff
- Patient Navigator is preparing to become a certified Medicaid Planner.

### Challenges

- Resignation of Home Health Aide. RN's have had to provide personal care in addition to regular nursing tasks to meet the needs of our patient population.
- Recent escalation in Covid cases. Home Health managed 11 of these cases.
- New workspace continues to have issues with handling technology needs. IT staff is working to improve. Flexible Home Health Staff working around issues.
- Cumbersome billing process (new EMR will greatly improve this issue.) Significantly slows down our billing process. New CMS guidelines starting January 1,2021 give us only 5 days to submit claims.
- Limited access to DME

### Accomplishments

- Continued census growth, recently reached 39.
- Staff of 7- Newly hired full time RN.
- Hired a social worker/patient navigator.
- Hired an additional billing person, will transition to full time.
- Hired full time Home Health Aide
- Improved communication with the rest of the hospital for better collaboration of care
- New EMR!!!!
- New third party biller.

- Home Health has assisted with both the flu clinic and vaccine clinics by providing vaccines to people who are homebound and could not get out to either clinics.
- New larger work space located in Totem Arms Apartments.
- We have recently received several of surveys back. See attached. Home Health also received a donation from a patient's family and were mentioned in the obituary.

### Opportunities

- Connection with facilities down south to alert them to services available at PMC HH.
- Increased staffing to meet the needs of growing department.
- Home Health owned DME
- Future program growth potential includes; in home IV therapies, Hospice services, pediatric services, enhanced behavioral health services including medication management.
- Expand services of Patient Navigator.

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

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## PETERSBURG MEDICAL CENTER HOME HEALTH AGENCY SATISFACTION QUESTIONNAIRE

Thank you for allowing us to provide care for you or your family member. We are interested in your ideas or opinions about our services. Please take a moment to answer the following questions. Additional comments are welcome and can be recorded on the back of this form.

Questions 1 - 9: Circle the number that best describes your opinion.

1 = Strongly AGREE    2 = agree    3 = No Opinion    4 = Disagree    5 = Strongly DISAGREE

1. I was satisfied with the care provided by the:
  - A. Nurse(s)..... 1 2 3 4 5
  - B. Physical Therapist..... 1 2 3 4 5
  - C. Home Health Aide(s) ..... 1 2 3 4 5
  - D. Other \_\_\_\_\_ 1 2 3 4 5
2. I was involved in making decisions regarding my plan of care. .... 1 2 3 4 5
3. My opinions were considered in the planning for discharge. .... 1 2 3 4 5
4. Staff treated me, my family, and home with respect. .... 1 2 3 4 5
5. Staff explained my conditions, rights, responsibilities, and procedures related to the care I received. .... 1 2 3 4 5
6. The staff generally arrived as scheduled. .... 1 2 3 4 5
7. I was able to reach staff promptly and my calls were returned. .... 1 2 3 4 5
8. I would use this agency again. .... 1 2 3 4 5
9. I would recommend this agency to friends and relatives. .... 1 2 3 4 5
10. Suggestions for improvements. Additional comments: \_\_\_\_\_

11. What most impressed me about the agency's service was: Lena the Home Care Nurse was outstanding. My wife and I felt very cared for.

I would like to discuss my responses further, please contact me.

Thank you for your valuable feedback. This information is confidential and will be used only to improve our services. Please return the completed questionnaire in the enclosed, self addressed, stamped envelope.

Kirsten Testoni  
Home Health Agency Manager

Date 3/24/21



Date 4-3-21

Optional Signature of Person Completing Form

**PETERSBURG MEDICAL CENTER HOME HEALTH AGENCY  
SATISFACTION QUESTIONNAIRE**

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- C. Home Health Aide(s) ..... 1 2 3 4 5
- D. Other \_\_\_\_\_ 1 2 3 4 5

2. I was involved in making decisions regarding my plan of care. .... (1) 2 3 4 5

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4. Staff treated me, my family, and home with respect. .... (1) 2 3 4 5

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9. I would recommend this agency to friends and relatives. .... (1) 2 3 4 5

10. Suggestions for improvements. Additional comments: \_\_\_\_\_

11. What most impressed me about the agency's service was: Her genuine concern for our health.

I would like to discuss my responses further, please contact me.

Thank you for your valuable feedback. This information is confidential and will be used only to improve our services. Please return the completed questionnaire in the enclosed, self addressed, stamped envelope.

Kirsten Testoni  
Home Health Agency Manager

Date 3/24/21



Date 4/2/21

Optional Signature of Person Completing Form

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11. What most impressed me about the agency's service was: EFFICIENT, POSITIVE  
HELPFUL, FRIENDLY

I would like to discuss my responses further, please contact me.

Thank you for your valuable feedback. This information is confidential and will be used only to improve our services. Please return the completed questionnaire in the enclosed, self addressed, stamped envelope.

\_\_\_\_\_  
Home Health Agency Manager      Date 3/24/21  Date 3/24/21  
Optional Signature of Person Completing Form



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- B. Physical Therapist..... 1 2 3 4 5
- C. Home Health Aide(s) ..... 1 2 3 4 5
- D. Other \_\_\_\_\_ ..... 1 2 3 4 5

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- 10. Suggestions for improvements. Additional comments: \_\_\_\_\_

11. What most impressed me about the agency's service was: Home Healthcare Nurses and care, made me feel like I was in

I would like to discuss my responses further, please contact me. the hospital.

They set my mind at ease, calling the doctor.

Thank you for your valuable feedback. This information is confidential and will be used only to They improve our services. Please return the completed questionnaire in the enclosed, self addressed, with stamped envelope.

AWESOME

Kirsten Testoni  
Home Health Agency Manager

Date 3/24/21



Date 3-31-21

Optional Signature of Person Completing Form

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8. I would use this agency again. .... (1) 2 3 4 5

9. I would recommend this agency to friends and relatives. .... (1) 2 3 4 5

10. Suggestions for improvements. Additional comments: Thank you so much, Kirsten! We really appreciate you & all you did for us!

11. What most impressed me about the agency's service was: \_\_\_\_\_

I would like to discuss my responses further, please contact me.

Thank you for your valuable feedback. This information is confidential and will be used only to improve our services. Please return the completed questionnaire in the enclosed, self addressed, stamped envelope.

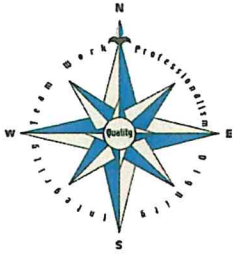
Kirsten Testoni  
Home Health Agency Manager

Date 3/24/21



Date 3-28-21

Optional Signature of Person Completing Form



## *Petersburg Medical Center*

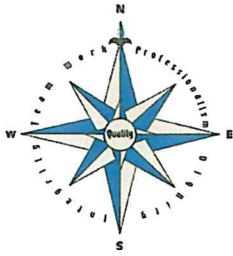
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### **CEO Report:**

*The following updates are not a comprehensive summary of activities due to the activation of the Emergency Preparedness Incident Command Center from the COVID-19 response since March 11<sup>th</sup> 2020.*

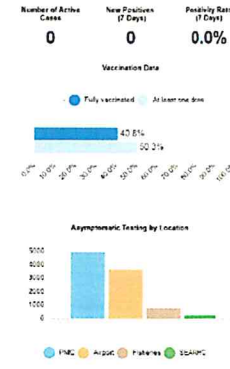
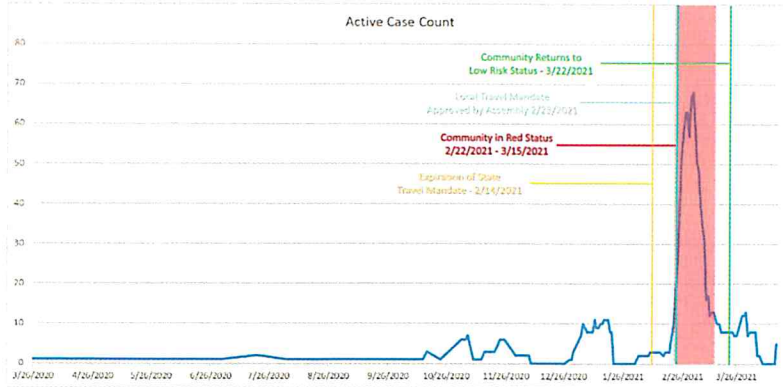
Petersburg Medical Center (PMC) is beyond the annual ‘anniversary’ of the activation of the Emergency Incident Command System for the COVID pandemic on March 11<sup>th</sup>, 2020. While Petersburg has recovered from the outbreak in February and March there are occasional clusters occurring. Travel, variants of COVID and non-eligible (children/adolescents) are at risk as the nation continues to grapple with various hotspots. Alaska cases have increased recently but Petersburg cases have returned to a much lower level (thankfully). The number of cases on the line graph for Petersburg can be seen below in addition to the community dashboard. As a community Petersburg ranks as one of the highest vaccination rates in the state. Over 50% of the community is fully vaccinated. The J&J vaccine is currently on pause with the recent safety concerns and PMC will resume once the investigation is complete and has been cleared for use again. PMC has not seen any adverse reactions or concerns. Another highly successful vaccination POD in the community gym occurred on April 9<sup>th</sup> for a total of 7 large (130 – 400 people each) vaccination dispensing and many smaller ones in our facility. Jennifer Bryner and her vaccine team should be highly commended on this effort. This is likely the last large POD but PMC is evaluating how to complete smaller PODs in the facility, clinic and out in the community (cannery, businesses, airport). The local pharmacy will also likely begin administering vaccines in their location downtown.

Funding to support all the COVID efforts continues to stall and have uncertainty for PMC. The finance office has been working diligently on the budget for FY22. There is a lot of potential funding to fill the gaps and this calendar year will be very important in setting the stage for the future for PMC services in the community. PMC has been providing more services outside of the facility in the form of COVID testing (airport, businesses), COVID vaccination PODs, Home Care (physician visits and the Capable program) and Home Health services. The technological advancements with Cerner, telehealth and the financial vendor change to HRG will all lead to incredible improvements to PMC. These changes will absolutely position PMC to strengthen its financial and service capability in the community.



# Petersburg Medical Center

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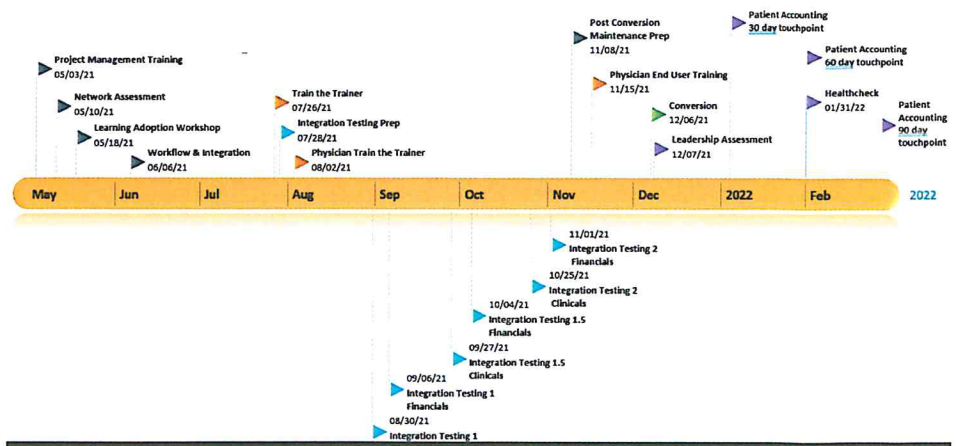
## New Facility:

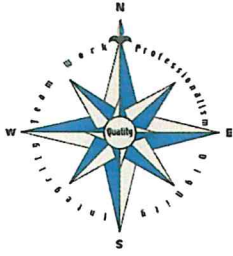
In Jan/Feb we were asked by the Borough to put our CAPSIS request together that with the potential to at least get to the next phase (\$16.2M) which is a portion of the complete facility (\$80M). The Assembly / PMC Board work session agenda is scheduled for April 28<sup>th</sup>. We hope to have a productive conversation on the new facility replacement, operations of the last year and the future of PMC in the community. There is a capital infrastructure funding request that was submitted through ASHNHA to support new facility and capital for the Cerner implementation. I continue to advocate how important it is for PMC to move forward with as close to shovel ready as possible by selecting the site through the completion of the environmental studies. This places PMC in a position to obtain funding for capital infrastructure funding.

## Community Education/Outreach:

- Rasmuson Foundation Meeting on non-profits in Southeast 4-15-2021
- April in-person (masked / physical distanced) luncheon with the physicians.
- PMC reports out at March and April Borough Assembly Meeting.
- ASHNHA Legislative committee meeting in April.
- Vaccination POD- April 9<sup>th</sup>. PMC, PHN, School, EMS, and community volunteers.

### PMC Cerner Event Milestones Timeline

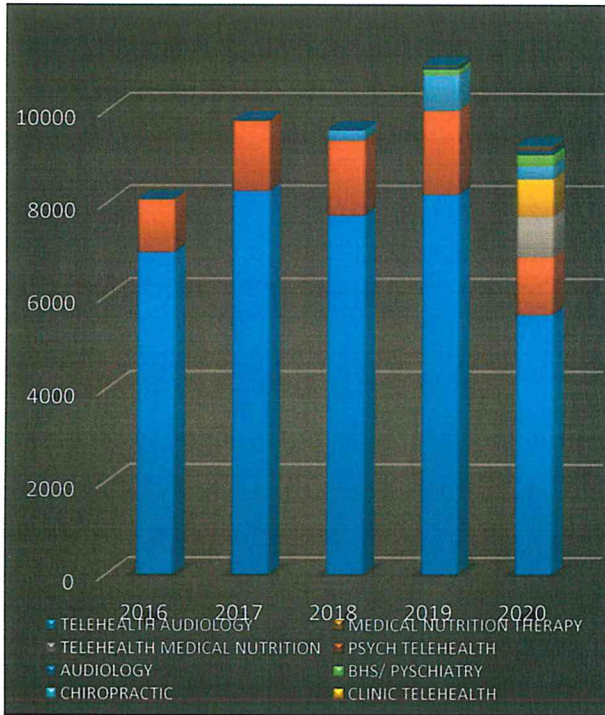




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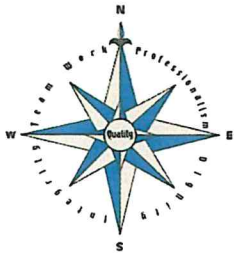
- Telehealth equipment and software from CARES act continue to be rolled out.
- Cerner roadmap project is being constructed and beginning (below).
- HRG continues to work well with all financial departments.



## Integrated Healthcare:

In the past year it has been impressive to see the large adjustment in integrating services into the clinic. COVID has forced PMC to become adaptable and standup various types of way to deliver services. The graphs and charts speak for themselves. Of note are the variations in types of delivery.

CLINIC Visits	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR
Chiropractics	0	32	28	32	13	56	32	29	23
Audiology	4	7	9	12	8	8	12	14	12
Audiology Telehealth					4				
Psych Telehealth	0	0	2	6	7	10	8	5	4
Psych Phone								16	26
Psychiatry	4	4	13	16	13	35	35	25	31
Behavior Health	16	3	6	6	3	6			
Behavior Health Phone								1	3
Behavior Health Telehealth								5	22
Clinic visits	431	523	585	631	549	613	456	514	491
Clinic Phone Visit	52	59	35	71	68	70	77	52	39
Clinic Telehealth	18	17	8	16	27	22	27	21	1
Clinic Respiratory	107	113	69	89	87	80	101	332	203
Nutrition visit	3	2	8	1		2	4	4	13
Nutrition Phone	2	2	1		1			1	6
Nutrition Telehealth	2	2	2	2	2				1
<b>Total Clinic Visits</b>	<b>639</b>	<b>764</b>	<b>766</b>	<b>882</b>	<b>782</b>	<b>902</b>	<b>752</b>	<b>1,019</b>	<b>875</b>
COVID Airport asym test	366	245	197	260	349	462	459	314	580
COVID Lab asym test	662	689	621	640	379	429	487	423	441
COV Comm FREE	community asymptomatic FREE covid tests						23	233	137
COVID vaccine under txrm	Inhouse vaccine given; 3-4 weeks apart					136	347	79	187
Mnt Case					1				
Capable Project Program									4
RN Case Management									16
Employee Health								15	9



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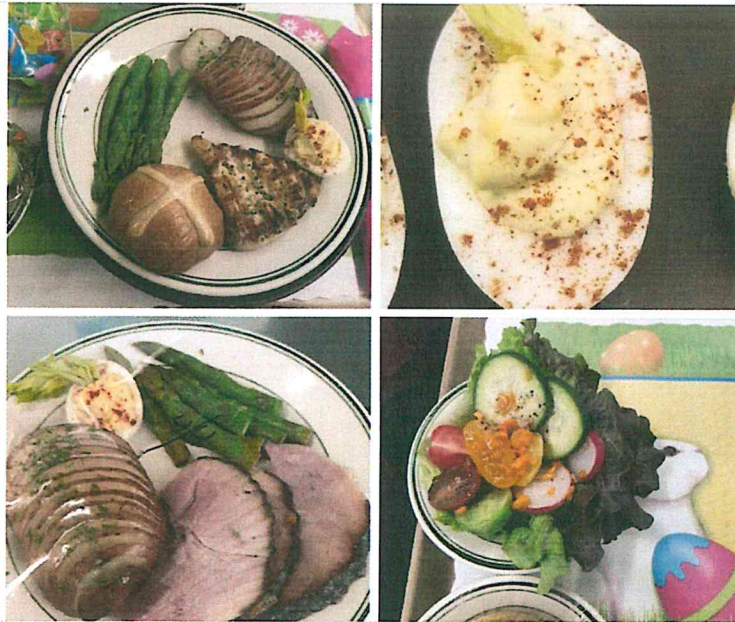
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## Workforce development:

### Strategic Plan: COVID 2021&Beyond

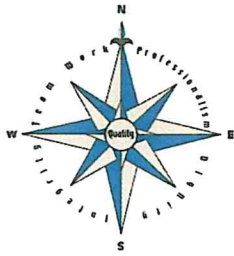
1. Workforce: Morale; leadership: Collaboration; Integrity; Professionalism: leading by example and being a part of the team.
2. Care and Safety: Covid safety for transmission, safety in vaccines, safety in good teasinging.
3. Innovation helps keeps us focused and capitalize on opportunity for improved health care. (Gaps, Technology, New Facility).
4. Finance – fiscally strong during a difficult time.



PMC received notice that the application for the National Health Service Corp application to become a designated site through HRSA will be approved. The application process continues for this cycle and will close on May 6<sup>th</sup>. Once this occurs this

will assist in PMC's ability to retain employees through federal loaner repayment programs for providers under the clinic. The SHARP3 loaner repayment program was also open for professionals with the State of Alaska. There are eligible applicants within PMC for this program and 2 (PT), 1 (Physician) and 1 (RN) were approved.

PMC is working on leadership and/or ladder opportunities for staff. PMC continues to evolve with both increased FTE opportunities and turnover. A recent JAMA article shows the nation is struggling with healthcare worker retention. There is a strong association with childcare needs and worker turnover. I believe this should be on our strategic roadmap as well as a training facility for nursing.



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## Original Investigation | Public Health Experiences of a Health System's Faculty, Staff, and Trainees' Career Development, Work Culture, and Childcare Needs During the COVID-19 Pandemic

Rebecca K. Delaney, PhD; Amy Locke, MD; Mandy L. Fershing, MS; Claudia Geist, PhD; Erin Clouse, MPH; Michelle Precourt Debbink, MD, PhD; Benjamin Haaland, PhD; Amy J. Tanner, MHA, MPH; Yoshimi Anzai, MD, MPH; Angela Fagerlin, PhD

### Abstract

**IMPORTANCE** In March 2020, US public buildings (including schools) were shut down because of the COVID-19 pandemic, and 42% of US workers resumed their employment duties from home. Some shutdowns remain in place, yet the extent of the needs of US working parents is largely unknown.

**OBJECTIVE** To identify and address the career development, work culture, and childcare needs of faculty, staff, and trainees at an academic medical center during a pandemic.

**DESIGN, SETTING, AND PARTICIPANTS** For this survey study, between August 5 and August 20, 2020, a Qualtrics survey was emailed to all faculty, staff, and trainees at University of Utah Health, an academic health care system that includes multiple hospitals, community clinics, and specialty centers. Participants included 27 700 University of Utah Health faculty, staff, and trainees who received a survey invitation. Data analysis was performed from August to November 2020.

**MAIN OUTCOMES AND MEASURES** Primary outcomes included experiences of COVID-19 and their associations with career development, work culture, and childcare needs.

**RESULTS** A total of 5030 participants completed the entire survey (mean [SD] age, 40 [12] years);

### Key Points

**Question** What are the associations of the COVID-19 pandemic with career development and what are the work culture and childcare needs of employees and trainees?

**Findings** In this survey study, most participants with children did not have childcare fully available and many considered leaving the workforce and were worried about their career. Being female with children or having a clinical job role was associated with consideration for leaving the workforce and reducing hours.

**Meaning** These findings suggest that a substantial number of employees and trainees experienced major stress and work disruptions because of the

Employee Forum: Scheduled April 20<sup>th</sup>. The focus will be on the past year and the future at PMC. We will provide survey feedback opportunities during and after the forum.

Wellness Bravo Program: Employee wellness incentive program \$260 individually or \$520 per year off premium to enroll. Fasting labs and clinic visit completed biometric screening which is part of the program open to spouses for the first year. Health coaching program, Cleveland Clinic Navigating Change which is focused on coping with changes.

## 2019-2020 (July – Mar)

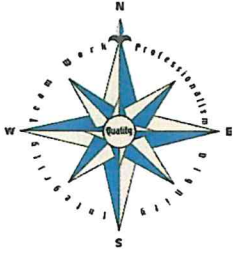
HOME HEALTH (pt)										
Patients	12	10	14	14	13	7	6	11	10	
Admission of new patient	1	3	7	3	3	2	2	7	2	
Discharge of a patient	5	3	3	4	8	3	2	3	1	
RN visits	56	28	38	74	58	39	28	52	51	
PT visits	41	25	35	52	33	25	8	23	28	
Aide visits										
Speech therapist	10	15	8	3	5	3	2	7	8	
Occupational therapy	13	12	12	12	11	5	3	6	1	
Total visits	120	80	93	141	107	72	41	88	88	

## 2020-2021 (July – Mar)

HOME HEALTH (pt)										
Patients	25	27	26	31	30	32	38	37	42	
Admission of new patient	6	5	2	7	3	3	9	7	11	
Discharge of a patient	3	3	2	4	1	3	8	6	16	
RN visits	180	152	129	135	137	166	152	155	200	
PT visits	50	63	46	74	98	68	89	79	55	
Aide visits		2	13	28	39	34	18	39	0	
Speech therapist	28	23	21	10	25	21	11	13	12	
Occupational therapy	14	15	4	10	10	4	17	14	17	
Total visits	272	255	213	257	309	293	287	300	284	

**Finance:** The financial package is included for March FY21. We are awaiting funding through the Federal COVID funding package. The CARES Act funding, PPP and grants are budgeted through but we will need to maintain vaccine POD, testing, and staffing for continued and ongoing response within the community.

**Price Transparency project:** Through ASHNHA we are



## *Petersburg Medical Center*

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working with PARA (Vendor Name) to develop price transparency tools per the CMS regulation.

**Revenue Cycle/Billing:** A PSA and a Pilot article were written to notify the community about the change in billing /claims vendor. We terminated the agreement with TruBridge and transitioned to HRG. This is working very well with our team and a great addition to developing improvements in the billing and claims.



# ***PETERSBURG MEDICAL CENTER***

## **FINANCIAL REPORTING PACKAGE**

**FISCAL YEAR 2021**

**For the nine months ended March 31, 2021**

**PETERSBURG MEDICAL CENTER**  
Statement of Revenues and Expenses  
For the nine months ended March 31, 2021

	Month Actual	Month Budget	\$ Variance	% Variance	YTD Actual	YTD Budget	\$ Variance	% Variance	Prior YTD	% Variance
<b>Gross Patient Revenue:</b>										
1. Inpatient	\$241,060	\$310,284	(\$69,224)	-22.3%	\$2,627,725	\$2,299,676	\$328,049	14.3%	\$3,446,368	-23.8%
2. Outpatient	1,068,140	974,831	93,309	9.6%	8,481,982	7,629,944	852,038	11.2%	8,624,991	-1.7%
3. Long-term Care	258,259	353,485	(95,226)	-26.9%	2,075,280	2,949,949	(874,669)	-29.7%	2,913,009	-28.8%
4. Total gross patient revenue	1,567,459	1,638,600	(71,141)	-4.3%	13,184,987	12,879,568	305,419	2.4%	14,984,368	-12.0%
<b>Deductions from Revenue:</b>										
5. Contractual adjustments	287,306	284,625	(2,681)	-0.9%	2,518,933	2,237,181	(281,752)	-12.6%	2,113,528	-19.2%
6. Prior year settlements	0	0	0	n/a	0	0	0	n/a	0	n/a
7. Bad debt expense	55,335	9,176	(46,159)	-503.0%	(62,655)	72,126	134,781	186.9%	76,321	-182.1%
8. Charity and other deductions	23,496	56,078	(32,582)	58.1%	488,416	440,779	(47,637)	-10.8%	399,776	-22.2%
9. Total deductions from revenue	366,137	349,879	(16,258)	-4.6%	2,944,694	2,750,086	(194,608)	-7.1%	2,588,625	-13.7%
10. Net patient revenue	1,201,322	1,288,721	(87,399)	-6.8%	10,240,293	10,129,482	110,811	1.1%	12,394,743	-17.4%
<b>Other Revenue</b>										
11. Inkind Service - PERS/USAC	143,535	62,277	81,258	130.5%	884,561	560,491	324,070	57.8%	560,489	57.8%
12. Grant revenue	21,462	13,750	7,712	56.1%	2,602,614	123,750	2,478,864	2003.1%	770,534	237.8%
13. Federal & State Relief	(137,500)	150,000	(287,500)	-191.7%	3,877,513	3,350,000	527,513	15.7%	0	n/a
14. Other revenue	91,838	2,603	89,235	3428.2%	606,944	15,927	591,017	3710.8%	66,380	814.3%
15. Total other operating revenue	119,335	228,630	(109,295)	-47.8%	7,971,632	4,050,168	3,921,464	96.8%	1,397,403	470.5%
16. Total operating revenue	1,320,657	1,517,351	(196,694)	-13.0%	18,211,925	14,179,650	4,032,275	28.4%	13,792,146	32.0%
<b>Expenses:</b>										
17. Salaries and wages	976,977	807,672	(169,305)	-21.0%	8,066,622	7,157,172	(909,450)	-12.7%	6,967,991	-15.8%
18. Contract labor	63,455	64,958	1,503	2.3%	595,923	604,625	8,702	1.4%	655,550	9.1%
19. Employee benefits	420,796	320,625	(100,171)	-31.2%	3,266,664	2,849,896	(416,768)	-14.6%	2,742,308	-19.1%
20. Supplies	124,913	124,240	(673)	-0.5%	960,653	986,660	26,007	2.6%	1,049,880	8.5%
21. Purchased services	159,599	62,679	(96,920)	-154.6%	1,373,070	750,991	(622,079)	-82.8%	958,487	-43.3%
22. Repairs and maintenance	62,019	50,365	(11,654)	23.1%	1,816,079	406,149	(1,409,930)	347.1%	394,768	-960.0%
23. Minor equipment	22,593	5,887	(16,706)	-283.8%	620,173	86,862	(533,312)	-614.0%	84,651	-632.6%
24. Rentals and leases	15,210	11,633	(3,577)	30.7%	132,553	104,700	(27,853)	26.6%	101,497	-30.6%
25. Utilities	76,791	53,140	(23,651)	-44.5%	619,367	450,560	(168,807)	-37.5%	465,847	-33.0%
26. Training and travel	1,501	29,936	28,435	95.0%	46,507	131,752	85,245	64.7%	105,790	56.0%
27. Depreciation	57,547	62,280	4,733	7.6%	494,259	525,679	31,420	6.0%	524,115	5.7%
28. Insurance	8,301	8,756	455	5.2%	94,864	78,804	(16,060)	-20.4%	71,034	-33.5%
29. Other operating expense	21,094	14,845	(6,249)	-42.1%	173,379	118,263	(55,116)	-46.6%	166,044	-4.4%
30. Total expenses	2,010,796	1,617,016	(393,780)	-24.4%	18,260,113	14,252,112	(4,008,001)	-28.1%	14,287,962	-27.8%
31. Income (loss) from operations	(690,139)	(99,665)	(590,474)	592.5%	(48,188)	(72,462)	24,274	-33.5%	(495,816)	-90.3%
<b>Nonoperating Gains(Losses):</b>										
32. Investment income	4,191	6,250	(2,059)	-32.9%	578,136	56,250	521,886	927.8%	(294,133)	296.6%
33. Interest expense	0	(6)	6	100.0%	(623)	(693)	70	10.1%	(4,434)	85.9%
34. Gain (loss) on disposal of assets	0	0	0	n/a	0	0	0	n/a	0	n/a
35. Other non-operating revenue	9,226	0	9,226	0.0%	10,867	0	10,867	0.0%	12,036	-9.7%
36. Net nonoperating gains (losses)	13,417	6,244	7,173	114.9%	588,380	55,557	532,823	959.1%	(286,531)	305.3%
37. Change in Net Position (Bottom Line)	(\$676,722)	(\$93,421)	(\$583,301)	-624.4%	\$540,192	(\$16,905)	\$557,097	3295.4%	(\$782,347)	169.0%

( ) or - indicates unfavorable variance

**PETERSBURG MEDICAL CENTER****Key Volume Indicators**

For the nine months ended March 31, 2021

Current Month			Year-To-Date				
Actual	Budget	Variance Amount %	Actual	Budget	Variance Amount %		
27	34	(7) -20.6%	199	204	(5) -2.5%	283	-29.7%
29	75	(46) -61.3%	505	620	(115) -18.5%	1,045	-51.7%
56	109	(53) -48.6%	704	824	(120) -14.6%	1,328	-47.0%
0.9	1.1	(0.2) -20.6%	1.3	0.7	0.6 74.7%	1.0	26.4%
0.9	2.4	(1.5) -61.3%	3.3	2.3	1.0 45.9%	3.8	-13.1%
1.8	3.5	(1.7) -48.6%	4.6	3.0	1.6 53.0%	4.8	-4.7%
15.1%	29.3%	-14.2%	21.4%	25.1%	-3.7%	40.2%	-46.8%
263	372	(109) -29.3%	2,177	3,104	(927) -29.9%	3,226	-32.5%
8.5	12.0	(3.5) -29.3%	7.9	11.3	(3.4) -29.9%	11.7	-32.3%
56.6%	80.0%	(0) -29.3%	52.9%	75.5%	-22.6%	78.2%	-32.3%
54	57	(3) -5.3%	464	529	(65) -12.3%	523	-11.3%
191	191	- 0.0%	1,501	1,327	174 13.1%	1,716	-12.5%
-	2,321	(2,321) -100.0%	17,731	17,622	109 0.6%	19,278	-8.0%
678	670	8 1.2%	5,568	4,861	707 14.5%	9,551	-41.7%
27	60	(33) -55.0%	424	524	(100) -19.1%	615	-31.1%
284	150	134 89.3%	2,441	1,350	1,091 80.8%	838	191.3%
875	946	(71) -7.5%	7,345	6,615	730 11.0%	8,343	-12.0%
580	-	580 n/a	3,232	-	3,232 n/a	-	n/a
441	-	441 n/a	4,771	-	4,771 n/a	-	n/a

( ) or - indicates an unfavorable variance

**PETERSBURG MEDICAL CENTER**  
**Key Operational Indicators**  
**For the nine months ended March 31, 2021**

	<u>Current Month</u>			<u>Year-to-Date</u>			#
	<u>Actual</u>	<u>Budget</u>	<u>Variance</u> <u>Amount</u> / <u>%</u>	<u>Actual</u>	<u>Budget</u>	<u>Variance</u> <u>Amount</u> / <u>%</u>	
18.3%	17.4%	-1.0%	-5.5%	19.1%	17.4%	-1.7%	-10.0%
1.5%	3.4%	1.9%	56.2%	3.7%	3.4%	-0.3%	-8.2%
3.5%	0.6%	-3.0%	-530.4%	-0.5%	0.6%	1.0%	184.9%
-52.3%	-6.6%	-45.7%	-695.6%	-0.3%	-0.5%	0.2%	48.2%
-50.7%	-6.1%	-44.6%	-727.3%	2.9%	-0.1%	3.0%	2519.5%
				205.4			146.3
				42.5			49.9

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

**PETERSBURG MEDICAL CENTER**  
Balance Sheet  
March 31, 2021

**ASSETS**

**Current Assets:**

	Mar 2021	Feb 2021	June 2020	Mar 2020
1. Cash - operating	\$2,842,852	\$3,301,228	\$6,977,720	\$1,759,421
2. Cash - insurance advances	3,625,422	3,625,422	3,648,599	0
3. Investments	2,605,210	2,605,040	2,597,056	2,591,302
4. Total cash	9,073,484	9,531,690	13,223,375	4,350,723
5. Patient receivables	4,597,714	4,591,183	4,327,789	4,882,553
6. Allowance for contractuals & bad debt	(2,946,663)	(2,944,250)	(2,984,193)	(2,904,700)
7. Net patient receivables	1,651,051	1,646,933	1,343,596	1,977,853
8. Other receivables	158,524	98,466	69,848	23,637
9. Inventories	297,044	293,944	287,034	265,754
10. Prepaid expenses	193,738	195,995	95,727	143,451
11. Total current assets	11,373,841	11,767,028	15,019,580	6,761,418

**Property and Equipment:**

12. Assets in service	22,690,322	22,683,218	22,118,622	22,094,733
13. Assets in progress	110,985	99,812	441,798	372,527
14. Total property and equipment	22,801,307	22,783,030	22,560,420	22,467,260
15. Less: accumulated depreciation	(18,798,510)	(18,740,963)	(18,304,246)	(18,135,667)
16. Net property and equipment	4,002,797	4,042,067	4,256,174	4,331,593

**Assets Limited as to Use by Board**

17. Investments	2,963,033	2,958,279	2,495,153	2,213,891
18. Building fund	627,512	626,516	525,783	465,858
19. Total Assets Limited as to Use	3,590,545	3,584,795	3,020,936	2,679,749

**Deferred Outflows:**

20. Pension	2,524,894	2,524,894	2,524,894	2,883,764
21. Total assets	\$21,492,077	\$21,918,784	\$24,821,584	\$16,656,524

**LIABILITIES & FUND BALANCE**

**Current Liabilities:**

	Mar 2021	Feb 2021	June 2020	Mar 2020
22. Accounts payable	\$637,654	\$616,024	\$732,449	\$776,259
23. Accrued payroll	322,127	232,942	473,575	253,899
24. Payroll taxes and other payables	68,651	55,577	99,937	69,106
25. Accrued PTO and extended sick	972,631	939,005	880,050	830,739
26. Deferred revenue	608,011	482,395	2,654,847	5,000
27. Due to Medicare	989,892	1,018,672	778,672	270,633
28. Due to Medicare - Advance	3,573,422	3,573,422	3,573,422	0
29. Due to Blue Cross - Advance	52,000	52,000	52,000	0
30. Other current liabilities	21,794	21,794	0	0
31. Loan Payable - SBA	0	0	1,800,000	0
32. Current portion of long-term debt	54,104	54,104	85,961	124,895
33. Total current liabilities	7,300,286	7,045,935	11,130,913	2,330,531

**Long-Term Debt:**

34. Capital leases payable	30,391	34,727	69,411	62,323
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**Pension Liabilities:**

35. Net Pension Liability	11,270,762	11,270,762	11,270,762	11,593,911
36. OPEB Liability	323,644	323,644	323,644	2,366,512
37. Total pension liabilities	11,594,406	11,594,406	11,594,406	13,960,423

**Total liabilities**

38. Total liabilities	18,925,083	18,675,068	22,794,730	16,353,277
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**Deferred Inflows:**

39. Pension	1,148,977	1,148,977	1,148,977	1,185,483
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**Net Position:**

40. Unrestricted	877,826	877,826	(99,888)	(99,888)
41. Current year net income (loss)	540,192	1,216,914	977,766	(782,347)
42. Total net position	1,418,017	2,094,739	877,877	(882,236)

**Total liabilities and fund balance**

43. Total liabilities and fund balance	\$21,492,077	\$21,918,784	\$24,821,584	\$16,656,524
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**PETERSBURG MEDICAL CENTER**  
**Statement of Cash Flows**  
**March 31, 2021**

	FY21	FY20	Variance
<b>Cash Flows from Operating Activities</b>			
1. Cash received from patient services	10,144,058	12,262,709	(2,118,651)
2. Cash from other sources	547,222	119,917	427,305
3. Cash paid to suppliers	(6,303,429)	(3,857,242)	(2,446,187)
4. Cash paid to employees	(10,870,885)	(9,337,645)	(1,533,240)
5. Net cash provided by (used for) operating activities	<u>(6,483,034)</u>	<u>(812,261)</u>	<u>(5,670,773)</u>
<b>Cash Flows from Investing and Noncapital Financing Activities:</b>			
6. Change in Board Designated Investments	8,527	29,793	(21,266)
7. Cash from grant programs	2,592,598	775,534	1,817,064
8. Cash from provider relief funds	33,533	0	33,533
9. Cash (to)/from providers - advances	0	0	0
10. Cash from/payments on SBA Loan	0	0	0
11. Cash from non-operating revenue	10,867	12,036	(1,169)
12. Net cash provided by noncapital financing activities	<u>2,645,525</u>	<u>817,363</u>	<u>1,828,162</u>
<b>Cash Flows from Capital and Related Financing Activities</b>			
13. Interest paid	(623)	(4,434)	3,811
14. Cash payments on long-term debt	(70,877)	(93,050)	22,173
15. Purchase of property and equipment	(240,882)	(601,132)	360,250
16. Net cash used for capital and related financing activities	<u>(312,382)</u>	<u>(698,616)</u>	<u>386,234</u>
17. Net increase (decrease) in cash and cash equivalents	<u>(4,149,891)</u>	<u>(693,514)</u>	<u>(3,456,377)</u>
18. Cash and cash equivalents, beginning of year	13,223,375	5,044,237	8,179,138
19. Cash and cash equivalents, end of period	<u>9,073,484</u>	<u>4,350,723</u>	<u>4,722,761</u>
20. Days Cash on Hand - Operating/Investments	88.4	90.5	(2.2)
21. Days Cash on Hand - Provider Advances	58.8	-	58.8
22. Days Cash on Hand - Total Operating Cash & Investments	<u>147.2</u>	<u>90.5</u>	<u>56.6</u>
23. Day Cash on Hand - Total Operating/Investment/Board	<u>205.4</u>	<u>146.3</u>	<u>59.1</u>
24. Days in Accounts Payable	<u>27.7</u>	<u>55.3</u>	<u>27.6</u>



PETERSBURG MEDICAL CENTER

Key Volume Indicators

FISCAL YEAR 2021

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	Prior YTD	% Change
<b>Hospital Inpatient</b>															
1. Patient Days - Acute Care	29	35	15	28	20	7	26	12	27				199	283	-29.7%
2. Patient Days - Swing Bed	62	68	45	80	45	29	81	66	29				505	1,045	-51.7%
3. Patient Days - Total	91	103	60	108	65	36	107	78	56				704	1,328	-47.0%
4. Average Daily Census - Acute Care	0.9	1.1	0.5	0.9	0.7	0.2	0.8	0.4	0.9				1.3	1.0	-13.1%
5. Average Daily Census - Swing Bed	2.0	2.2	1.5	2.6	1.5	0.9	2.6	2.4	0.9				3.3	3.8	-13.1%
6. Average Daily Census - Total	2.9	3.3	2.0	3.5	2.2	1.2	3.5	2.8	1.8				4.6	4.8	-4.7%
7. Percentage of Occupancy	24.5%	27.7%	16.7%	29.0%	18.1%	9.7%	28.8%	23.2%	15.1%				21.4%	40.2%	-46.8%
<b>Long Term Care</b>															
8. Resident Days	279	279	241	245	210	217	233	210	263				2,177	3,226	-32.5%
9. Average Daily Census	9.0	9.0	8.0	7.9	7.0	7.0	7.5	7.5	8.5				7.9	11.7	-32.3%
10. Percentage of Occupancy	60.0%	60.0%	53.6%	52.7%	46.7%	46.7%	50.1%	50.0%	56.6%				52.9%	78.2%	-32.3%
<b>Other Services</b>															
11. Emergency Room Visits	64	76	42	40	35	42	65	46	54				464	523	-11.3%
12. Radiology Procedures	157	173	150	146	164	189	184	147	191				1,501	1,716	-12.5%
13. Lab Tests (excluding QC)	3,082	2,748	2,606	2,576	2,253	2,218	2,248	578	678				17,731	19,278	-8.0%
14. Rehab Services Units	759	696	563	565	575	657	497	578	578				5,588	5,433	-41.7%
15. OP Treatment Room	33	55	54	53	36	65	45	56	27				424	435	-31.1%
16. Home Health Visits	272	255	213	257	309	272	286	293	284				2,441	541	191.3%
17. Clinic Visits	632	758	755	879	779	900	748	1,019	875				7,345	4,811	-12.0%
18. Airport COVID Tests	366	245	197	260	349	462	459	314	580				3,232	-	n/a
19. Lab Asymptomatic COVID Tests	662	689	621	640	379	429	487	423	441				4,771	-	n/a



PETERSBURG MEDICAL CENTER

Key Operational Indicators

For the nine months ended March 31, 2021

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD	Prior YTD	% Change
1. Contractual Adj. as a % of Gross Revenue	23.8%	12.5%	14.9%	24.6%	16.7%	19.8%	20.9%	19.2%	18.3%				19.1%	14.1%	-35.4%
2. Charity/Other Ded. as a % of Gross Revenue	5.8%	3.0%	5.5%	2.1%	6.0%	2.0%	3.5%	4.2%	1.5%				3.7%	2.7%	-38.8%
3. Bad Debt as a % of Gross Revenue	2.1%	1.4%	-6.7%	3.1%	-4.1%	3.0%	-7.0%	-1.1%	3.5%				-0.5%	0.5%	193.3%
4. Operating Margin	10.9%	11.6%	4.0%	-42.1%	31.2%	10.4%	-9.4%	-26.5%	-52.3%				-0.3%	-3.6%	92.6%
5. Total Margin	15.8%	15.8%	0.5%	-45.0%	37.2%	13.0%	-8.8%	-19.5%	-50.7%				2.9%	-5.8%	149.6%
6. Days Cash on Hand (Including Investments)	313.2	292.9	279.4	265.8	273.8	224.3	220.5	211.5	205.5	-	-	-	205.4	146.3	40.4%
7. Days in A/R	49.6	49.8	37.7	39.2	36.2	35.9	42.6	44.5	42.5	-	-	-	42.5	49.9	15.0%

Petersburg Medical Center  
Capital  
FY21

Dept Name	Description	(1) Approved Budget	(2) Substitutions	(3) Revised Budget	(4) Committed	(5) Paid	(6) Total Paid/Committed	(7) Budget Remaining
	<b>FY20 Assets in Progress</b>					76,999		
	<b>FY21 Capital Budget</b>							
IT	Fire Suppression - Server Room	19,078		19,078			-	19,078
IT	Server	16,515		16,515			-	16,515
IT	RAPC Interface	-	14,580	14,580		14,580	14,580	-
Acute/Swing/ER	Fetal Monitor	22,000		22,000			-	22,000
Acute/Swing/ER	IV Smart Pumps (12)	48,840		48,840		7,104	7,104	41,736
Acute/Swing/ER	Ventilators	25,000	3,263	28,263		28,263	28,263	-
Acute/Swing/ER	Vital Carts	-	9,020	9,020		9,020	9,020	-
LTC	Beds (4)	10,671		10,671			-	10,671
PT	Powermatic Mat Platform	5,000		5,000			-	5,000
Lab	Traction Plant	7,795		7,795			-	7,795
Lab	Glucometers (5)	34,685		34,685			-	34,685
Lab	Microscan	25,000		25,000		25,000	25,000	-
Imaging	Ultrasound	190,024		190,024			-	190,024
Plant	Industrial Washer	12,618	889	13,507		13,507	13,507	-
Plant	Plow Truck with Sander	60,000		60,000			-	60,000
Plant	Ice Makers (3)	18,000		18,000		6,481	6,481	11,519
Plant	Car - Toyota Highlander	-	5,000	5,000		5,000	5,000	-
Plant	Hot Water Heaters	-	28,767	28,767		28,767	28,767	(0)
Audiology	Audiology Equipment	14,774	214	14,988		14,988	14,988	(0)
Telehealth	To Be Determined (see budget)	-		-			-	-
Admin	Cerner Project	100,000	11,173	11,173		11,173	11,173	-
Admin	Contingency	-	(72,906)	27,094		-	-	27,094
	<b>Total - FY21</b>	<b>610,000</b>	<b>-</b>	<b>610,000</b>	<b>-</b>	<b>163,883</b>	<b>163,883</b>	<b>446,117</b>
	<b>Total Expenditures per Cash Flow</b>					<u>240,882</u>		
	<b>Funding Sources - FY21</b>							
	PMC Operations	610,000	-	610,000				
	Grants	-	-	-				
	Cares Act	-	-	-				
	Board Reserves	-	-	-				
	<b>Total</b>	<b>610,000</b>	<b>-</b>	<b>610,000</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

( ) or - indicates unfavorable variance