



**Petersburg Borough  
Petersburg Medical Center**

12 South Nordic Drive  
Petersburg, AK 99833

**Meeting Agenda  
Hospital Board  
Regular Meeting**



---

Thursday, September 19, 2024

5:30 PM

Assembly Chambers

---

Please click the link below to join the webinar:

<https://us06web.zoom.us/j/84405952296?pwd=7vU3jUJTJnbRrPKobJtC5XR4UllhvQ.1>

Passcode: 262436

Webinar ID: 844 0595 2296

Or Telephone:

+1 253 205 0468 US

+1 346 248 7799 US

+1 720 707 2699 US

**1. Call to Order/Roll Call**

A. Call to Order

B. Roll Call

**2. Approval of the Agenda**

**3. Approval of Board Minutes**

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

**4. Visitor Comments**

**5. Board Member Comments**

**6. New Business**

A. M. Kamp will provide an overview of the investment account.

**7. Committee Reports**

A. Resource

B. Infection Prevention

C. Long-term Care

D. Critical Access Hospital

## 8. Reports

A. Pharmacy

E. Kubo provided a written report.

B. Rehab Department

B. McMahon provided a written report.

C. Plant Maintenance

W. Brooks provided a written report.

D. Activities

A. Neidiffer provided a written report.

E. Environmental Services

G. Edfelt provided a written report.

F. New Facility

Arcadis provided a written report.

G. Quality & Infection Prevention

S. Romine and J. Bryner provided written reports.

H. Executive Summary

P. Hofstetter provided a written report.

I. Financial

J. McCormick provided a written report.

## 9. Old Business

## 10. Next Meeting

## 11. Executive Session

A. By motion, the Board will enter into Executive Session to review medical files.

## 12. Adjournment



# Petersburg Borough Petersburg Medical Center

## Meeting Minutes Hospital Board Regular Meeting



Thursday, August 22, 2024

5:30 PM

Assembly Chambers

### 1. Call to Order/Roll Call

A. Call to Order

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

B. Roll Call

Member Cook conducted roll call.

**PRESENT**

- Chairman Jerod Cook
- Board Member Heather Conn
- Board Member Marlene Cushing
- Board Member Cindi Lagoudakis
- Board Member Joe Stratman

**ABSENT**

- Board Member Kimberley Simbahon
- Board Member Mika Hasbrouck

### 2. Approval of the Agenda

A motion was made to approve the agenda.

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

### 3. Approval of Board Minutes

A. Motion made by Board Member Lagoudakis to approve minutes for the July 25, 2024, board meeting with additions.

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

**4. Visitor Comments**

None.

**5. Board Member Comments**

Board Member Cushing thanks Board Member Hasbrouck for her service on Board. Both Members Cushing and Lagoudakis complimented the Kinder Skog Orca Kayaking and Theatre events, noting how impactful and life enhancing these programs are for community youth. Member Lagoudakis also expressed enthusiasm regarding Peltola's visit to Petersburg Medical Center, including a tour of the new site and getting an overview of challenges PMC's current facility faces.

**6. Committee Reports**

A. Resource

Member Lagoudakis attended and provided highlights from the meeting, including a recap that investments are continuing to do well. Discussed clarifying what counts as a clinic visit. Notes that there is no change to Trubridge billing yet.

B. Infection Prevention

Member Stratman reports meeting yesterday with update from public health noting the spike in whooping cough. Discussed contract nurse with infection prevention, went through action item list.

C. Long-term Care

Member Cushing attended and reviewed action items, the age of the facility makes things difficult to change ex: moving an ice machine became a complicated move. She noted the efforts LTC team took to provide quality of care for new residents.

**7. Reports**

A. Information Technology/EHR

J. Dormer provided a written report.  
J. Dormer also clarified Member Cushing's question regarding signs.

B. Materials Management

M. Randrup provided a written report.

### C. Medical Records

K. Randrup provided a written report.

Additionally, the board was provided a utilization report.

### D. Nursing

J. Bryner provided a written report.

P. Hofstetter answered Member Stratman's questions related to the challenges and expense of training and staffing colonoscopies and the importance of this service being available to the community.

### E. New Facility

Arcadis provided a written report.

J. Wetzel, Arcadis, expanded on progress and scheduling including logistics involved with transporting new MRI machine.

### F. Quality & Infection Prevention

S. Romine and J. Bryner provided written reports.

### G. Executive Summary

P. Hofstetter provided a written report.

P. Hofstetter provided update on impact of power outage affecting telephone lines, noting no impact to patient care occurred. He notes that Peltola's visit was a group effort. The nursing program and LTC were highlights and it was a positive experience. We appreciated the opportunity to tour the new site with the Borough lobbyist and discuss funding at a federal level and the importance of Borough support. Hofstetter commented on the new facility making significant progress. Tours of the site are available and there is a clickable link on PMC website to book a time.

Member Lagoudakis shared that Peltola was impressed by our community engagement, our involvement with University of Washington medical students, and our coordination with visiting physicians.

### H. Financial

J. McCormick provided a written report.

J. McCormick presented highlights.

## 8. Old Business

---

**9. New Business**

**10. Next Meeting September 19, 2024**

**11. Executive Session**

A. By motion the Board entered Executive Session to review medical files.

By motion the Board came out of Executive Session.

Motion to approve appointments of Justin Morgan MD, Cameron French PA, Jonathan Joe MD, and Joshua Sonkiss MD to medical staff.

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

**12. Adjournment**

Meeting adjourned 6:19 pm.

Motion made by Board Member Lagoudakis, Seconded by Board Member Conn  
Voting Yea: Chairman Cook, Board Member Conn, Board Member Cushing, Board Member Lagoudakis, Board Member Stratman



# Petersburg Medical Center

Pharmacy Board Report September 11, 2024

---

## **Workforce Wellness**

Staff is primarily Elise, with some assistance from Jolyn.

## **Community Engagement**

## **Patient Centered Care**

We are still facing shortages of several medications, sometimes requiring sourcing from third party distributors that are more expensive than our regular distributor. We try to avoid this as much as possible.

We recently began using a new medication administration system in the clinic, which allows for easier addition of new medications to the clinic formulary and better safety of medication administration in the clinic.

## **Facility**

I am looking forward to implementing a running inventory when that new software is available.

## **Financial Wellness**

We are continuing to explore 340B usage in cooperation with Rexall. Cate is exploring implementing this program with Cirrus, who will provide the service that will coordinate the relationship between us for 340B purchases. We are much closer to being able to partner with them in making these purchases.

We currently use the 340B program to save on a small number of medications. This has been very useful, since some of the medications we use are very expensive.

**Submitted by:** Elise Kubo

---



# Petersburg Medical Center

Rehab Report September 2024

---

## **Workforce Wellness**

Current staffing includes two permanent Physical Therapists and two travel Physical Therapists, one of which is performing Wound Care. Our Speech Therapist reached the end of her contract September 13<sup>th</sup> and currently we have no applicants to fill her position. We have one travel Occupational Therapist who began September 9<sup>th</sup>. Kaitlyn remains on maternity leave and available for telehealth Wound Care consults. We are very optimistic about the current team we are building.

## **Community Engagement**

We are working with nursing staff to develop a Restorative Program to engage with Long Term Care for more regular exercise performance to maintain function and mobility, the position will be posted this month and will include help with LTC residents as well as within our rehab department.

Our Speech Therapist has been spending two afternoons a week at the Cedar Social Club Adult Day Program, engaging with elders and assisting with therapeutic activities.

## **Patient Centered Care**

Therapy currently has a wait list for outpatient physical therapy of 26 individuals due to understaffing. We continue to provide one-on-one treatments to best treat our patients. Permanent positions are posted on multiple locations and HR continues to make every effort to recruit therapists to our community, however it remains difficult. The frequent changeover of staff with using travelers frequently disrupts our ability to provide ideal continuity of care for our patients and LTC residents.

## **Facility**

The rehab department does have frequent difficulty with space to provide adequate patient care and privacy. Staff are utilizing separate rooms and hallways as much as we are able, although often the gym has patients in close proximity to each other. Outside space during summer was used when weather allowed it.

## **Financial Wellness**

The rehab department continues to attempt to increase productivity within the time available, however understaffing remains an issue. As therapy works in multiple settings, with inpatient, outpatient, Long Term Care and home health, we have the workload appropriate for five full time Physical Therapists, one Speech Therapist and one Occupational therapist, which would assist with increasing revenue if fully staffed, however we are having difficulty filling the positions and attaining permanent therapists. Hiring travel therapists is costly and time consuming for all departments to orient new staff as frequently as we have been. We hope to attain permanent staff to improve revenue from the rehab department.

**Submitted by:** Brenna McMahon, DPT, OCS

---





# Petersburg Medical Center

## Plant Maintenance Report September 2024

---

### Workforce Wellness

Our facility maintenance staffing has been doing well over the past 6 months. There have been some shortages due to PTO but nothing out of the ordinary. As we transition into fall and winter we plan to remain fully staffed for our busiest time of the year. However, I do have scheduled time off in November.

### Community Engagement

With the progress of the WERC building throughout the summer we have started community tours of the new site/building. These have been happening weekly and have been a great way for members of the community to come and voice their opinions, both positive and negative if there are any in person. Aside from this we have been busy all summer working outside and around the facility ensuring our campus is clean and kept in the best possible operating condition.

### Patient Centered Care

Our main function in patient care currently is to ensure safety and comfort which largely includes a clean and obstacle-free entrance and exit to the building for patients and visitors. With fall fast approaching we also begin our modulation of cooling/heating to adjust for outside air temps for both patients and staff. We are continuing our audits of patient areas and fixing any issues as they arise. It is our goal to make residents and patients as comfortable as possible while they are here.

### Facility

Our aging facility continues to throw curve balls at us but so far we have been able to work through them. The largest reportable issue has been the deterioration of our septic lines. We continue to find new lines that are on the verge of failure. Our frequent walkthroughs and constant watching have paid off as we have been able to catch everything before it fully fails. (Pictured is a line on the brink of failure.) Other than this we have been busy with many other projects largely those include ensuring the facility is clean/hazard free, all maintenance/preventative maintenance on equipment throughout the facility, and keeping our contract work inline and on-time.



### Financial Wellness

While facility maintenance does not create revenue, it is our job to assist all other departments the best we can so that PMC can operate as efficiently as possible. It is always a balance between doing as much as possible for our organization while keeping our costs down when we can. I do not foresee any large expenses in our department but there is always a catch to that. With all our aging systems I would like to give warning that something can always come up unexpectedly despite our best efforts to catch things early so we have time to properly plan and prepare for large scale projects.

**Submitted by:** Wolf Brooks

---



# Petersburg Medical Center

## Activities Report September 2024

---

### **Workforce Wellness**

The activities coordinator has been back to work full-time since June after taking FMLA and this has improved staffing issues. Having a team member gone for an extended period brought to light challenges with staffing coverage, however, Long-Term Care activities were not affected.

### **Community Engagement**

Long-Term Care activities department is heavily involved in the community. We are grateful for all that the community of Petersburg does to help enhance residents' quality of life.

**KFSK High Country:** Over the Summer the Long-Term Care residents have been enjoying visits up to KFSK to help host the LTC Radio Show. A handful of different residents have helped with hosting over the summer and every resident contributed to the playlists shared.

**Clausen Memorial Museum:** In July Long-Term Care activities collaborated with Clausen Memorial Museum to host an art show for one of our Long-Term Care residents. The staff at the Museum were wonderful to work with and we are hoping to do another show to present all the art that happens in LTC in the spring.

**Petersburg Pilot:** The Petersburg Pilot has been a great help in advertising LTC events for the community and has been excited to share all the things happening in our LTC community.

**Kinderskog:** Moving into the fall, Long-Term Care will be collaborating with the Kinderskog "Strings N' Things" Pod for monthly crafting time.

**Petersburg School District:** LTC Activities department has reached out to the PCSD National Honor Society coordinator to offer opportunities for students to get involved in LTC.

### **Patient Centered Care**

Long-Term Care activities continue to work with our residents and their families to provide activities that best serve each individual resident and their life-long interests. Highlights listed below.

**Art Show:** Long-Term Care Activities worked with the Clausen Memorial Museum to put on an art show displaying several pieces of art created by one of our residents.

**Recognition:** Long-Term Care Activities worked with the Petersburg Friends of the Library along with resident family members to put together a recognition ceremony for one of our LTC residents who has dedicated years of service to the community of Petersburg.

**Swimming:** Over the summer, LTC activities and the rehab department worked together to get one of our residents to the pool. Parks and Recreation dedicated two hours weekly to LTC to ensure we had pool usage. Unfortunately, with the start of school and activities resuming, Parks and Rec has limited pool time available. As of right now Long-Term Care is not able to get this resident to the pool due to limited availability. Parks and Recreation has helped us arrange a time to use the fitness court to get this resident out to exercise and have a change in scenery.

### **Facility**

No concerns regarding equipment.

### **Financial Wellness**

No concerns regarding financial wellness.

**Submitted by:** Alice Neidiffer

---



# Petersburg Medical Center

Environmental Services Report September 2024

---

## **Workforce Wellness**

Overall, our department has been good. With the support of HR and management, our department successfully addressed staffing issues and found solutions. The team has consistently demonstrated strong performance in their roles.

## **Community Engagement**

Our role in community engagement is limited, as our small team is primarily focused on maintaining the hospital's cleanliness while collaborating with others. However, we recently met with quality assurance personnel, received valuable feedback, and are working to implement the necessary improvements as quickly as possible, aiming for completion before the end of the year.

## **Patient Centered Care**

Our team consistently remains attentive, identifying opportunities to enhance safety for staff, visitors, and, most importantly, our patients. If there are potential issues related to patient care we make every effort to discuss them with the CNA and others we encounter on the floor. Our team works across departments to address concerns and remain proactive.

## **Facility**

I'm looking forward to a larger, improved hospital soon. I'm especially excited about moving to a space where I can handle my paperwork privately, as working on a shared public computer has challenges.

## **Financial Wellness**

We work hard to stay within budget, however, costs are rising, including shipping expenses, which are quite high.

**Submitted by: Grazel Edfelt**

---



# Petersburg Medical Center



## New Facility Report September 2024

---

### Sitework

The design team is currently working on a plan for a retaining wall to continue east along the blasted rock area, this will extend to the concrete pavement where it has an intentional jog. Fencing will be constructed along this area and to the delineation of the WERC building and future hospital lot, which will also be fenced to isolate the two areas.

### WERC Building

Exterior metal framing is nearly complete, roofing is nearly complete. All interior slabs have been poured and are currently curing. Exterior glass sheathing is being installed and civil utility work has begun. These activities will continue through September.

The design team is currently working on the MRI Addition to be added on the West side of the building instead of the modular container unit, cost analysis of the container and the addition are very comparable. There are many benefits to the addition and many drawbacks to the container.

### New Hospital Design

BNAP 35% Schematic Design is complete, further design progress is on hold pending grant funding. Phase 5 wetlands permit has been submitted and that process can take 4-5 months to receive approval.

### Upcoming Construction Activities

- September – Exterior Metal Framing, Roofing, Sheathing, Clad, Utilities
- October – Siding, Interior Metal Framing, Mechanical and Electrical Rough-In
- November – Siding, Interior Metal Framing, Mechanical and Electrical Rough-In

### Budget

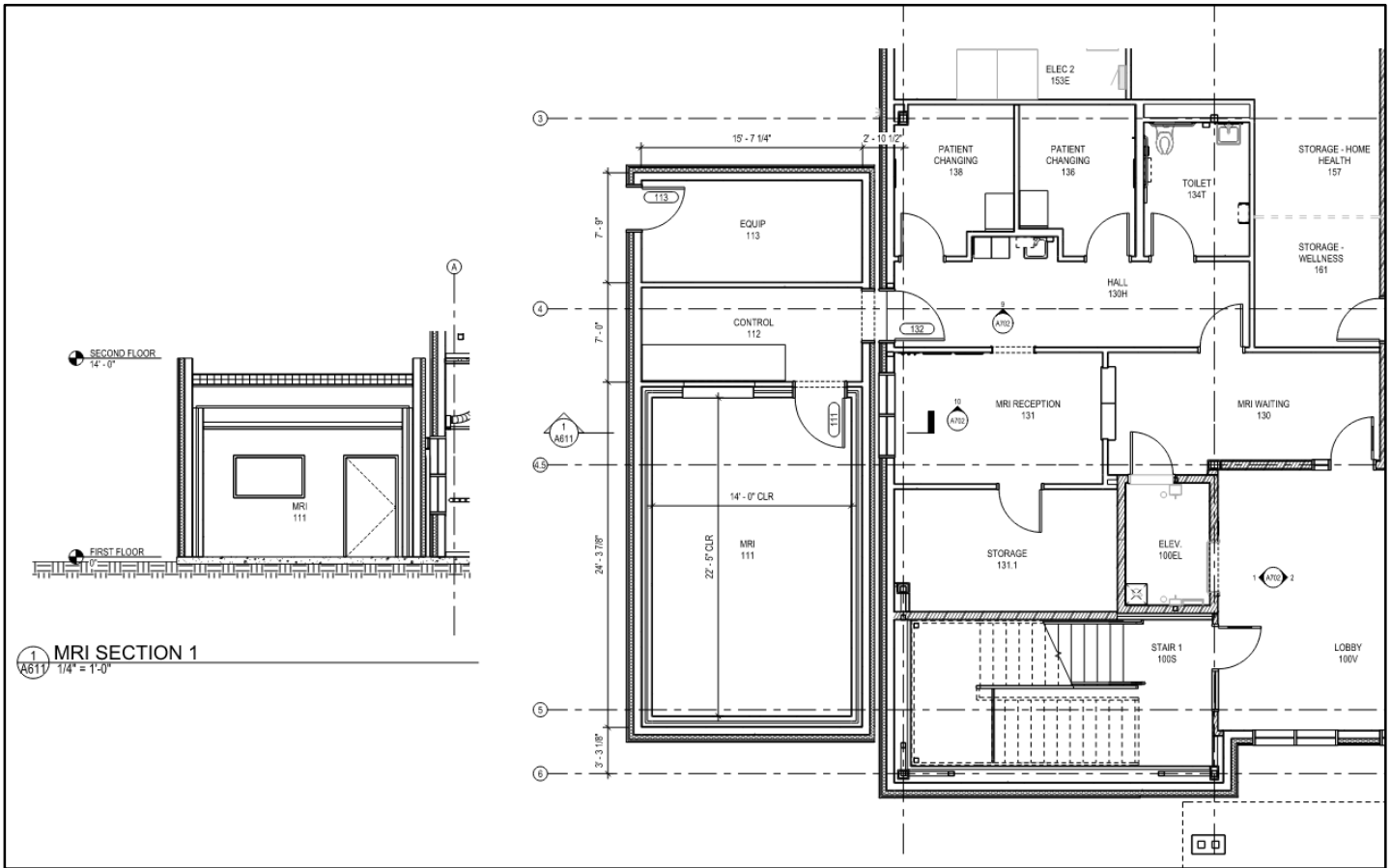
- WERC budget – \$22.7 M
  - CCPF Treasury Grant – \$20 M
  - HRSA Grant – \$2.7
- Hospital Sitework & Design Budget up to 35% – \$5.3 M
  - HRSA Grant – \$5.3 M

**Submitted by:** Justin Wetzel – Arcadis Project Manager

---



### MRI Addition – Concept Design



### WERC – Hospital Lot Looking NW



**EPDM Roofing**



**Exterior Glass Sheathing**







# Petersburg Medical Center

Quality Report September 2024

---

## **Workforce Wellness**

Quality staff is currently participating in a Quality Assurance Performance Improvement (QAPI) program series offered by the Alaska Hospital & Healthcare Association that is designed to enhance the effectiveness of programs and the utilization of data to facilitate desired outcomes. This resource will be utilized in the development of a PMC-wide QAPI plan/policy.

## **Community Engagement**

Community Health Needs Assessment-collaboration has expanded to include additional work group members that provide unique and valuable local and state-wide perspectives. Key informant interviews will begin this month and inform the contents of the upcoming community survey.

Tai Ji Quan Moving for Better Balance-The next in-person class will begin around September 17th. The remote/zoom class will start October 21<sup>st</sup>. Technical assistance and transportation are available as needed to help reduce any barriers to participation.

## **Patient Centered Care**

The Home Health-End of Life Order Set has been integrated into home health EMR-Matrixcare. This allows for quick, essentially error-free order entry that integrates into the patient care plan. These streamlined order entry processes will enhance communication, decrease clinician documentation burden and increase the efficiency and accuracy of the intervention implementation. The next steps will include Cerner integration (initiated through IT department), pharmacy collaboration and staff training.

The Health Equity Transformation Assessment has been completed by PMC staff and has been submitted to the American Hospital Association this month to receive a personalized Transformation Action Plan (should be coming soon.) This action plan will provide a structure and process for improvement to advance health equity. It will also provide guidance for incorporating diversity, equity, and inclusion (DEI) industry standards and language into PMC policy.

The Medicare Beneficiary Quality Improvement Project (MBQIP) reporting will include health equity measures in 2025 with required reporting in 2026. These consist of a 'commitment to health equity' and two new measures requiring the collection of data on the Social Determinants of Health.

## **Facility**

The Quality Committee for LTC and CAH will meet on September 18th. This month's agenda will include review and approval of the updated active policy list.

## **Financial Wellness**

The home health department will be utilizing the newly awarded Adult Day grant. This 3-year grant will help to support the controlled growth of this program by supporting staffing needs, equipment, and will offer scholarships to local qualified participants.

**Submitted by: Stephanie Romine, RN**

---





# Petersburg Medical Center

## Infection Prevention and Control Report September 2024

### Workforce Wellness

Amy O'Connor will join us as a temporary full-time consultant Infection Preventionist during the week of September 23. Rachel Kandoll, RN, has been hired to work alongside Amy and will train to become our permanent Infection Preventionist. Rachel will initially work part-time, meeting regulatory requirements, with the potential to transition to a full-time role in the future.

### Community Engagement

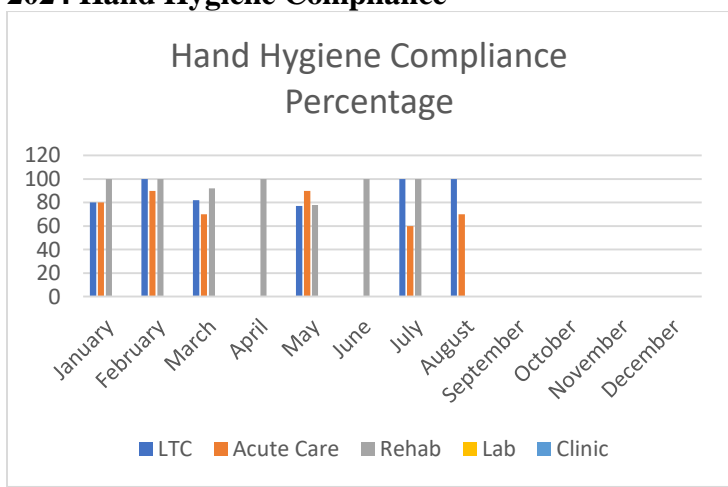
On August 29, Rebecca Hamel and Anna Frick from the Alaska Section of Epidemiology visited us for an ICAR (Infection Control Assessment and Response). They reviewed our Infection Prevention and Control (IPC) program, toured our facility, and observed our environment, staff, cleaning, laundry, and patient care procedures. Their full report will be available within six weeks. During the exit conference, they praised our teamwork, adherence to procedures, and good hand hygiene. Gilda in EVS received special recognition for her excellent work while cleaning a patient room. They provided some reminders on maintaining good practices and noted that the most significant infection prevention risks stem from our aging facility, which would require a complete remodel to meet current infection control standards.

### Patient Centered Care.

We experienced a COVID outbreak in our LTC facility starting on August 11. An outbreak is defined as three or more staff members or one resident with a confirmed COVID diagnosis. We had four staff members and three residents test positive, all of whom have since recovered. We tested all residents twice weekly throughout the outbreak and have not had any new cases for over two weeks, indicating the outbreak is now over.

Over the next month, we will focus on administering respiratory vaccines to ensure all residents are offered protection against influenza, COVID, and RSV.

### 2024 Hand Hygiene Compliance



### LTC 2024 Infection Prevention Metrics:

- Urinary Tract Infections (UTI): 1
- Catheter associated Urinary Tract Infections (CAUTI): 1
- Clostridium Difficile infections: 0
- Covid-19 infections: 3

Influenza infections: 0

**Facility**

As mentioned above, our physical environment presents significant challenges to following current IPC guidelines. For example, meeting current standards in laundry processing would require a complete remodel of the laundry area. While our staff do an excellent job of adhering to infection control principles to prevent the spread of infection through laundry, they must work much harder than if they were operating in a properly engineered space.

**Financial Wellness**

Additional staffing will increase costs but will enhance IPC quality, help prevent burnout, and allow me to focus on other aspects of my role.

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

---



# Petersburg Medical Center

## CEO Board Report September 2024

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

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

**Summary:** Over the past four weeks, we’ve experienced a consistently higher-than-average census in inpatient, swingbed, and LTC units. Primary care access remained stable, along with home health services. PMC is now fully staffed with medical professionals. In our specialties, Dermatology PA French held a high-volume clinic, Psychiatry telehealth services resumed, and Dr. Raster successfully conducted ENT clinics. Behavioral Health Services will offer several training sessions in September, led by Keith Reilley, ANP, as part of the BHS grant. These sessions, aimed at medical staff and nurses, will focus on the opioid epidemic and the latest treatment protocols. Keith Reilley, who currently works at an outpatient treatment clinic in Baltimore and is formerly associated with Johns Hopkins, will be leading the training. The Wellness Department had great participation in the Rainforest Run, with several employees joining in. Julie Walker is leading the initiative to refresh the PMC brand. Additionally, the annual manager retreat is scheduled for October 23rd and will be held at the Lutheran Church.

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

- 8/21- Attended and reported out to the PIA Tribal Council Meeting
- 9/2-Rainforest Run had 31 participants.
- Community can sign up online for site tours every Friday afternoon at 5:30pm at [www.pmcak.org](http://www.pmcak.org).
- Sept 3rd PMC submitted monthly report to the Borough Assembly.
- Sept 9th-Met with Assembly Member Bob Lynn
- Sept 12- Meeting with Representative Himschoot.
- Sept 17<sup>th</sup> and Sept 25<sup>th</sup>-Upcoming community classes Bingocize and Tai Ji Quan.
- Sept 23- AHHA board meeting and annual conference.



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

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

- **Accounts Receivables (AR) Update:** Accounts Receivables (AR) hovering around 80 days. The revenue cycle team continues to work on improving this metric with a target of 55 days. We met again with HRG/Trubridge executive leadership with hard date deliverables and they switched out teams in an effort to improve the collections. However, we will continue to advance by bringing this aspect of revenue cycle in-house.

- The finance packet includes the first month of FY25. The finance team continues the process of preparing for the FY24 full audit.
- August month close showed a significant receivable due to the high volumes this summer in inpatient, swingbed and LTC.
- The status of the grants for FY25 is attached. We did not receive two grants that were pending: the Denali Commission and the SAMHSA Strategic Prevention Framework grant. That leaves four grants that are pending.

**New Facility:** Goal: To expand the capacity and capabilities of the community borough-owned rural hospital through the construction of a new facility, while taking into account the needs and priorities of the local community. Arcadis submitted the update on the new facility and we are on track and on budget for the WERC building. The steering committee me to discuss and approve the color schematics provided by the designated committee. This combination is indicated below. PMC will need to name the building for the WERC that meets the treasury grant requirements and is also in need of naming the road leading to the lot.



- Site Preparation: Site preparation is complete for the full 4.9 acres of wetlands permitting. Permitting for the additional area by the northeast corner will be in process.
- Progress on WERC Building: Progress continues on the WERC building. Concrete flooring, stairs, pan decking and roof are almost complete with the walls going up. The shell in process is on track.
- Updates: Project updates are available on the PMC website under the “New Facility & Planning” tab. Photos are updated on social media every Friday afternoon.
- Tour of the Sites: Guided tours of the site for community are scheduled every Friday at 5:30pm, sign up available on PMC website. There were 13 community members that signed up on Aug 30<sup>th</sup>. 0 on September 6<sup>th</sup>.





- Senator Murkowski Appropriations: PMC is on the list for \$3M, which needs to make it through congressional approval still, but is an important nod to the continued support of the project.
- Lead-Up to State Capital Budget, Governor’s Budget, and State Bond: PMC will need to continue advocating as the #1 federal and state priority for next FY. This advocacy is vital to assist PMC to secure grants and funding.



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

- Holli Davis and Bessie Johnson started UAA nursing program this month.
- PR is working with HR and has increased our visibility for jobs in Southeast as well as in Anchorage and Fairbanks. Our goal is to reduce the turnover rate for PMC in FY 24 and our vacancy rates. PR is also collaborating with the Anchorage-based firm Element and local artist Grace Wolf to refresh and improve the PMC logo and brand.
- Employee engagement efforts this month included the new internal newsletter Cyndi Newman in HR creates. This month highlights environmental services and housekeeping (Sept 8<sup>th</sup>-14<sup>th</sup>) and National Finance and Accounting appreciation week (Sept 23<sup>rd</sup>-27<sup>th</sup>).
- Monthly CEO office hours.



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

- Overall, August continued to see high volumes in our ER with 95 patients while the inpatient unit saw much higher than normal volumes with over 166 inpatient days with highest swingbed volumes in many years. LTC is almost full as well and our primary care clinic is also seeing high volumes.
- Home Health has experienced a high acuity level, that has been particularly difficult with staffing ratio.
- The Home Health Department is now approved for Medicaid waiver program of adult day services.
- Access to care:
  - Specialty clinic for scopes continues to be a challenge to schedule with SEARHC’s next visit to PMC. We are working on finding the next date to coordinate.
  - Dermatology was at PMC during the week of August 26th, with Cameron French, PA-C, seeing a total of 105 patients at the Joy Janssen Clinic.
  - Psychiatrist Joshua Sonkiss has his first telehealth clinic and saw patients in clinic early this month. He will continue to take referrals and consultations from the providers.

- Psychiatric nurse practitioner Keith Reilley, MSN, PMHNP-BC will be coming to PMC the week of September 16<sup>th</sup> to do trainings/presentations for the nursing staff and one day for the doctors.
- Optometrist Dr. Kamey Kapp is scheduled to see patients in Specialty Clinic 9/30-10/4.
- Primary care continues to offer well child exams with sport physicals.
- **Clinic availability:** In summary, the clinic is now fully staffed with 4 physicians and 2 mid-level practitioners. The wait time for regular appointments are working to improve with high demand providers. Same-day acute care appointments typically range between 9 to 20 per day. Referrals to specialty internal and external since January 1<sup>st</sup> are 1,551. **Next Available Appointments:** The most current report for first and third next available for the following. The appointments vary among providers, but the averages are:

**April:**

*1st Available Appointment:* 8.6 days

*3rd next Available Appointment:* 9.6 days

**July:**

*1st Available Appointment:* 17.8 days

*3rd next Available Appointment:* 21.2 days

**August:**

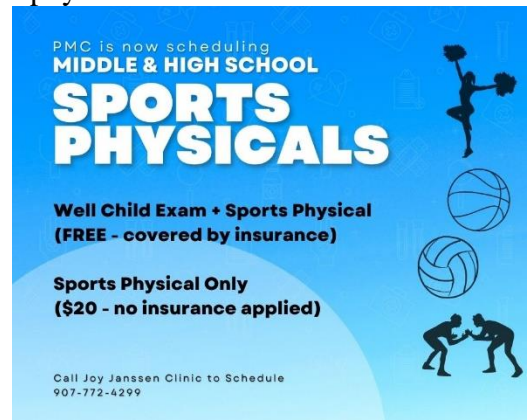
*1st Available Appointment:* 10.2 days

*3rd next Available Appointment:* 17.7 days

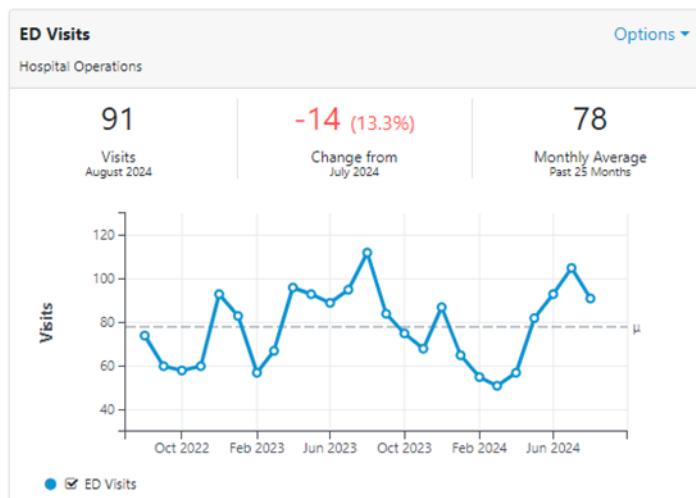
**Sept:**

*1st Available Appointment:* 10.1 days

*3rd next Available Appointment:* 14.1 days



**Metric Details**



Submitted by: Phil Hofstetter, CEO



# Petersburg Medical Center

## 2024 GRANT PROPOSALS

Updated September 9, 2024

### 6 FY24 Grant Awards to Date: \$423,722 in FY25 + \$585,366 over FY26-27

◆ **ACF Summer ORCA Camps**

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

1 Year | \$20,000 awarded

◆ **PCF Teen Mental Health First Aid**

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

1 Year | \$9,260 awarded

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

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

1 Year | \$87,115 awarded

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

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

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

3 Years | \$142,828 annually

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

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

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

1 Year | \$14,664.28 awarded

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

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

3 Years | \$149,855 annually

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

### 3 Pending Grant Requests: \$5.9 million, FY25-FY29

◆ **OASH Community Level Innovations Grant**

Collaboration to address colorectal cancer and hypertension health disparities.

4 Years | \$555,600 annually – Pending: decision by September 30, 2024

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

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

1 Award | \$3,000,000 total requested – Pending: decision by September 30, 2024

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

Equipment and software supporting telemedicine & workforce development goals.

1 Award | \$640,148 total requested – Pending: decision by September 30, 2024

## 6 Continuing Multi-Year Grant Awards

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

**Submitted by:** Katie McKay Bryson, Director of Grants, Planning & Evaluation



# ***PETERSBURG MEDICAL CENTER***

## **FINANCIAL REPORTING PACKAGE**

**For the month ended August 31, 2024**

**PETERSBURG MEDICAL CENTER**  
**Key Volume Indicators**  
**FISCAL YEAR 2025**

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	Prior YTD	% Change
1. Clinic Visits	853	758											1,611	1,615	-0.2%
2. Radiology Procedures	259	180											439	395	11.1%
3. Lab Tests (excluding QC)	2,057	1,633											3,690	3,850	-4.2%
4. Rehab Services Units	1,031	787											1,818	2,064	-11.9%
<i>Physical</i>	687	629													
<i>Occupational</i>	281	112													
<i>Speech</i>	63	46													
5. Home Health Visits	151	176											327	364	-10.2%
6. Emergency Room Visits	95	88											183	194	-5.7%
<b><i>Hospital Inpatient</i></b>															
7. Patient Days - Acute	34	49											83	64	29.7%
8. Patient Days - Swing Bed	120	115											235	77	205.2%
9. Patient Days - Total	154	164											318	141	125.5%
10. Average Daily Census - Acute	1.1	1.6											0.2	1.0	-76.0%
11. Average Daily Census - Swing Bed	3.9	3.7											0.7	1.2	-43.5%
12. Average Daily Census - Total	5.0	5.3											0.9	2.3	-58.3%
13. Percentage of Occupancy	41.4%	44.1%											7.9%	19.0%	-58.3%
<b><i>Long Term Care</i></b>															
14. LTC Days	372.0	400.0											772	813	-5.0%
15. Average Daily Census	12.0	12.9											2.3	13.1	-82.4%
16. Percentage of Occupancy	80.0%	86.0%											15.4%	87.4%	-82.4%



**PETERSBURG MEDICAL CENTER**  
**Balance Sheet**  
**Aug, 2024**

<b>ASSETS</b>	<b>Aug 2025</b>	<b>July 2024</b>	<b>June 2024</b>	<b>Aug 2024</b>
<b>Current Assets:</b>				
1. Cash	1,037,546	709,109	356,249	611,482
2. Cash - insurance advances	0	0	0	0
3. Investments	565,583	562,481	1,057,873	47,244
4. Total cash	<u>1,603,129</u>	<u>1,271,590</u>	<u>1,414,122</u>	<u>658,725</u>
5. Patient receivables	7,464,539	7,125,978	6,821,298	5,306,177
6. Allowance for contractals & bad debt	(2,525,965)	(2,465,042)	(2,363,151)	(1,794,294)
7. Net patient receivables	<u>4,938,574</u>	<u>4,660,936</u>	<u>4,458,147</u>	<u>3,511,883</u>
8. Other receivables	3,063,699	3,456,202	2,231,342	666,900
9. Inventories	319,212	325,386	319,404	298,799
10. Prepaid Expenses	296,351	320,018	161,762	281,344
11. Total current assets	<u>10,220,965</u>	<u>10,034,133</u>	<u>8,584,777</u>	<u>5,417,651</u>
<b>Property and Equipment:</b>				
12. Assets in service	28,638,436	28,622,553	28,601,075	28,061,691
13. Assets in progress	12,175,733	11,089,348	9,368,246	1,535,883
14. Total property and equipment	<u>40,814,169</u>	<u>39,711,901</u>	<u>37,969,321</u>	<u>29,597,574</u>
15. Less: accumulated depreciation	(22,497,348)	(22,398,205)	(22,298,956)	(21,339,611)
16. Net property and equipment	<u>18,316,821</u>	<u>17,313,696</u>	<u>15,670,365</u>	<u>8,257,963</u>
<b>Assets Limited as to Use by Board</b>				
17. Investments	3,468,800	3,421,665	3,337,912	3,025,395
18. Building fund	753,126	743,255	724,158	654,284
19. Total Assets Limited as to Use	<u>4,221,927</u>	<u>4,164,920</u>	<u>4,062,069</u>	<u>3,679,679</u>
<b>Pension Assets:</b>				
20. OPEB Asset	<u>6,685,608</u>	<u>6,685,608</u>	<u>6,685,608</u>	<u>6,685,608</u>
<b>Deferred Outflows:</b>				
21. Pension	<u>2,554,803</u>	<u>2,554,803</u>	<u>2,554,803</u>	<u>2,554,803</u>
22. Total assets	<u>\$42,000,123</u>	<u>\$40,753,159</u>	<u>\$37,557,622</u>	<u>\$26,595,704</u>

<b>LIABILITIES &amp; FUND BALANCE</b>	FY24			
	<b>Aug 2025</b>	<b>July 2024</b>	<b>June 2024</b>	<b>Aug 2024</b>
<b>Current Liabilities:</b>				
23. Accounts payable	\$4,058,849	\$4,345,018	\$3,255,927	\$1,588,430
24. Accrued payroll	447,796	336,579	240,920	373,029
25. Payroll taxes and other payables	218,540	193,869	236,514	205,561
26. Accrued PTO and extended sick	1,061,892	1,046,508	1,018,401	1,047,088
27. Deferred revenue	150,895	183,641	152,525	164,962
28. Due to Medicare	440,798	440,798	160,798	365,055
29. Due to Medicare - Advance	0	0	0	0
30. Due to Blue Cross - Advance	0	0	0	0
31. Other current liabilities	3,517	3,517	4,145	3,069
32. Loan Payable - SBA	0	0	0	0
33. Current portion of long-term debt	441,703	439,970	618,244	350,606
34. Total current liabilities	<u>6,823,989</u>	<u>6,989,900</u>	<u>5,687,475</u>	<u>4,097,801</u>
<b>Long-Term Debt:</b>				
35. Capital leases payable	2,214,448	2,249,095	2,283,594	2,376,080
<b>Pension Liabilities:</b>				
36. Net Pension Liability	16,521,607	16,521,607	16,521,607	16,521,607
37. OPEB Liability	-	-	-	-
38. Total pension liabilities	<u>16,521,607</u>	<u>16,521,607</u>	<u>16,521,607</u>	<u>16,521,607</u>
39. Total liabilities	<u>25,560,044</u>	<u>25,760,602</u>	<u>24,492,676</u>	<u>22,995,487</u>
<b>Deferred Inflows:</b>				
40. Pension	623,594	623,594	623,594	623,594
<b>Net Position:</b>				
41. Unrestricted	12,306,565	12,306,566	2,751,845	2,751,845
42. Current year net income (loss)	3,509,921	2,062,397	9,689,507	224,779
43. Total net position	<u>15,816,485</u>	<u>14,368,963</u>	<u>12,441,352</u>	<u>2,976,623</u>
44. Total liabilities and fund balance	<u>\$42,000,123</u>	<u>\$40,753,159</u>	<u>\$37,557,621</u>	<u>\$26,595,705</u>

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

**PETERSBURG MEDICAL CENTER**  
**Key Operational Indicators**  
**For the month ended August 31, 2024**

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD	Prior YTD	% Change
1. Contractual Adj. as a % of Gross Revenue	13.8%	11.2%											21.3%	20.6%	-3.7%
2. Charity/Other Ded. As a % of Gross Revenue	0.0%	-0.1%											-0.1%	1.1%	107.9%
3. Bad Debt as a % of Gross Revenue	1.2%	3.7%											-2.8%	2.5%	-212.3%
4. Operating Margin	11.5%	12.8%											4.5%	-10.2%	144.1%
5. Total Margin	48.4%	39.0%											18.8%	-10.6%	276.6%
6. Days Cash on Hand (Including Investments)	83.3	87.9											-	81.3	-23.7%
7. Days in A/R (Net)	67.7	65.3											-	62.0	0.2%
8. Days in A/R (Gross)	84.7	84.8											-	79.2	22.7%