



MONTHLY REPORT

Presented November 18, 2020
(for October 2020)

***SAN JUAN COUNTY PUBLIC HOSPITAL DISTRICT NO. 1
AND
SAN JUAN ISLAND EMERGENCY MEDICAL SERVICES***

FINANCIAL REPORTS

Supporting data can be found in the attached EDEN Reports for Revenue and Expenditures by Fund, Revenue Detail, Monthly Financial Statement by Fund (Cash Balance), Expenditure Status, Outstanding Warrants, and Warrant Summaries.

SJCPHD #1 FINANCIALS (Fund 6521)

2020 BUDGET Consolidated Overall COMPARISONS – 84% into this year:

- REVENUE = \$387,652; Cumulative: Jan. – October = \$1,269,277; or 62% of revised budget projections
- EXPENSES = \$33,543; Cumulative: Jan. – October = \$ 1,326,852 or 65% of revised budget projections
- CASH = \$632,800

ANALYSIS:

You will notice a significant boost in cash on hand through October due to property tax receipts (up about \$382,000). Property Tax Revenues are down 8% from this time last year and 2.08% down year to date from 2019. The larger percentage of decrease in October of this year is because of property owners paying all their taxes in April of this year.

SJIEMS FINANCIALS (Fund 6511 and 6512)

2020 BUDGET Consolidated Overall COMPARISONS – 83% into this year:

- REVENUE = \$518,372; Cumulative: Jan. – October = \$2,075,765; or 48% of revised budget projections
 - GEMT = \$ 16,399; Cumulative – Jan. – October = \$119,121; 47% of revised budget projections
- EXPENSES = \$201,914; Cumulative: Jan. – October = \$2,185,062; or 51% of revised budget projections
 - Note \$300,000 transfer to reserve fund 6512 included in total expenses.
- CASH, RESERVES, INVESTMENTS = \$1,984,945
 - CASH = 1,338,945.19
 - RESERVES (FUND 6512) = \$300,000
 - INVESTMENTS = \$346,000

ANALYSIS:

San Juan Island EMS remains more stable than many government organizations due to the strong financial position built by the Board and management over the last five years.

However, the decline in GEMT funding and ambulance service fees has resulted in financial pressure that will need to be watched closely. Expenditures are below expectations as we have not made a Director of Logistics and Operations hire. However, it should be said that the delay in this critical hire has also been a challenge. Severance for

Karl Kuetzing expires the first week of December, which will reduce expenses further.

Property taxes are down 7% in October compared to October of 2019. Year to date property taxes are only down 2.16% compared to the same time last year. Again, many property owners paid their full year of property tax in April of this year.

OPERATIONS REPORTS

SJCPHD#1 – OPS REPORT

October was a month spent concentrating on budget preparation for 2021 as is typical for the month of October.

The San Juan Community Based Long Term Care Network was recently awarded a one year \$100,000 grant from the HRSA Network Planning Grant Program in October of 2020. This grant was originally submitted in November of 2019 and after scoring 94% with no weaknesses, the project was not funded. The assumption was that the grant program had run out of funding. In the past when this has occurred, there is a chance that funding will open up, and the grant will be awarded at a later date; this is apparently what occurred, and the grant was funded on October 15, 2020.

Per the grant, the formal Network members include: San Juan County Public Hospital District No. 1, the Inter Island Healthcare Foundation, PeaceHealth, and San Juan County Public Hospital District No.2 (Lopez Island Hospital District)

This grant is separate and distinct from the HRSA Care Coordination \$250,000 per year/3-year grant awarded in August 2020. Though there are real synergies and opportunities to collaborate between the grants.

HRSA (Federal Health Resources and Services Rural Network) is a federal agency that focuses on improving access to health care services for people who are uninsured, isolated or medically vulnerable. The specific purpose of HRSA's Rural Network Planning Grant is to promote the development of integrated health care networks in order to: achieve efficiencies; expand access to, coordinate, and improve the quality of basic health care services; and strengthen the rural health care system as a whole.

We received no record requests for the month of October.

Nathan Butler and I split time between the Public Hospital District Office and the San Juan Island EMS offices. The phone upgrade is complete. You can reach both of us at either place by dialing the public hospital district number (360) 378-2857 and dial extension 201 for Pamela Hutchins and extension 202 for Nathan Butler.

SJIEMS – STATISTICAL REPORT (OPS PART 1)

Department Stats - September 2020

- 79 runs for October 2020
- 898 runs January 1, 2020 through current reporting period.
 - There were 993 calls from Jan 1, 2019 to October 31, 2019 = 10% decrease.
- Average number of responders per call = 2:8
- Island Air = 15, Airlift NW = 2, LifeFlight = 0, Navy = 0, Coast Guard = 0
- Monthly Average Chute Time – EMS (time of page until resource rolling) = 2:13
- Average Scene Time – EMS = 29:10
- Monthly Average Response Times continue to be within suburban benchmarks
 - Overall - Average response time 8:56 with 91% of calls under 20:00 (benchmark for suburban area) and 69% under 10:00 (urban benchmark)
 - In Town – 61 calls (85%) – Average response time 7:03 with 77% under 8:00
 - Mid-Island – 16 calls (20%) - Average response time 10:00 with 88% of calls under 20:00 and 25% under 10:00
 - North end – 2 calls (2.5%) - Average response time 19:47 with 50% of calls under 20:00 and 0% under 10:00
 - South end – 0 calls (0%)
 - Outer Island – 0 calls (0%) inside of district
 - No calls out of district
 - Note that these are raw times, not adjusted for staging or extended wait times for ALNW arrival, or simultaneous calls
 - Benchmark times are per North Region EMS & Trauma Care Council standards which comply with State RCWs and WACs

SJIEMS – OPS REPORT (OPS PART 2)

IAFF LOCAL #3219-

No Update for September. Negotiations with the union began in October, and some agreement has been found on issues such as PTO for EMTs, backpay for overtime not previously accounted for, and adjusting wages to reflect the desired annual amount but taking into account overtime. The District is represented by Nathan Butler, Pamela Hutchins, Trish Lehman, and District Legal Counsel Richard Davis.

Operations-

Operations continue under the Covid-19 response model initiated in late March. Regularly filling all the shift openings continues to be a challenge, but we have a group of “regulars” who take on a significant number of those spots. In October, Brad Creezy topped the volunteer list with 213 hours, but four put in more than 40 hours (Trevor Bolton, Kyle Dodd, Dwight Colley, Margaret Longley; John Salinas was just on the edge with 39 hours)

October shifts hours at 2675 were stronger than September, August, or July of 2020, but is significantly less than March through June. This decline in shift hours is likely in part due to allowing people to respond in personal vehicles (POV), as our average number of responders

per call has not declined. Statistics for shifts follows:

- 2675 hours in October 2020
- 2255 hours in September 2020
- 2625 hours in August 2020
- 2483 hours in July 2020
- 3126 hours in June 2020
- 3488 hours in May 2020
- 3884 hours in April 2020
- 3670 hours in March 2020

Medical Protocols:

No updates on the ALS protocols for October, but Dr. Corsa is back from Afghanistan, and we hope for something to share soon.

Staff Training

All of the required skills have been checked off for 2020 and we are focusing on scenario-based training in small teams. These small teams are made up of a Lieutenant, staff EMT, medic and volunteers EMTs. The training is done either outside or in a space with good ventilation.

The October OTEP training focused on HIPAA Training, and then had Run Reviews with Dr. Corsa.

The fourth Tuesday training is the ALS - Advanced Life Support Training for the medics from 3:00- 5:00 p.m. before run reviews begin with the rest of the agency at 6:00 p.m.

Community-

With the continuation of COVID 19 restrictions, classroom training for American Heart Association remains on hold. We are currently instructing people to go online at elearning.heart.org for training. Once they complete their course, they need to print out the completion certificate. Then they need to call the office and we get them set up with Lainey or another instructor for a skills test. Once that is completed and payment is made an ecard is issued. As the COVID restrictions continue we are seeing more people needing to renew their credentials this way.

We issued 10 cards in October:

- Heartsaver First aid CPR/AED – 8
- BLS Provider – 1

We continue to get the word out to the community about our child safety seat and bicycle helmet programs. Here is a list of what we gave out in October:

Infant car seats: Gifted – 1, Loaner – 1, Installation only – 1

Convertible: Gifted – 2, Loaned – 1, Installation only – 1

Boosters: 2

Community Paramedicine-

The main goals of the community paramedicine program and service have not changed. They remain: to improve the quality of life and health for our citizens while reducing the cost of healthcare. This meets the hospital district's goal of "aging in place". Through Community Paramedicine, we can identify short- and long-term patient outcomes that are appropriate for measuring the success of a variety of interventions.

The North Region approved our grant requests for both the Pediatric Emergency Assessment Recognition & Stabilization (PEARS) course (fully funded) and the geriatric courses (all remaining funds after grants so just shy) for our county. We will need to hold these courses and submit receipts for reimbursement before June 30, 2021. We still will be able to hold the Pre-Hospital Trauma Life Support (PHTLS) course by using the generous offer of instruction from our MPD and adding the expenses of food and supplies required. That one will not have a time frame issue.

In September 2020, there were 28 patients who are actively engaged, 3 under observation, and 7 referred but not yet enrolled.

EMS – Fire Integration

The Board resolution that suspended staff participation in EMS – Fire Integration was retracted during the September Board meeting. However, the Steering Committee remains inactive.

Civil Investigative Demand- (CID)

In September there was no public update regarding the CID.

Covid-19 Situation-

No significant changes to our EMS situation in October 2020. Again, we continue to operate under our Emergency Declaration. Personal protective equipment (PPE) supplies remain adequate and we continue to require daily checks of temperature for those working at the station. The District always keeps at least a six-month supply of PPE on hand and is evaluating the metrics for this to ensure a very generous supply of all PPE.

The number of cases in Washington State began to rise significantly in October and into November, but so far it has not had an impact on our EMS situation.

Respectfully submitted,

Pamela Hutchins
Superintendent/CEO
San Juan County Public Hospital District No. 1
San Juan Island EMS

Assistance from:

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Weyshawn Koons, Director of Emergency Response / Chief Training Officer