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HealthMatters

A Journal of Wellness and Good Health Care



Proud to be Your
Local
Health Care
System

HealthMatters

HealthMatters is published as a service for the people of the Kennebec Valley region. Information is written by MaineGeneral's Marketing and Communications staff.

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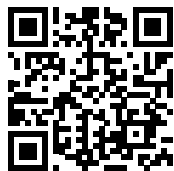
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Message from the CEO

Proud to Be Your Local Health Care System

Life remains in constant flux. This uncertainty is uncomfortable for us all. We wish the pandemic was fully behind us, but we see we have a ways to go.

Rest assured, though, that MaineGeneral continues to be here with you through these tough times.

And we thank you for sticking with us, for understanding the changes, and for adapting right along with us.

Thank you, too, to our dedicated MaineGeneral staff. They have worked endless hours to care for our community during this pandemic.

It's been a stressful two years, but the teams at MaineGeneral Health continue to provide the quality, patient-centered care you've come to trust from us.

We are here for you in the medical center, physician practices, home health and hospice, long-term care facilities, through telehealth and through community health care worker contacts.

We've found ways to make sure we're here for you when you need us.

In the last fiscal year, we expanded virtual visits while continuing to offer in-person care delivered by our highly qualified medical staff.

And while we had to suspend nearly all in-person support groups, classes, education events and other outreach in the medical center and in the community, we still provided more than 650 touch points with community members in the past fiscal year. This includes the mass vaccination clinic, school flu vaccination clinics, educational videos and virtual healthy living classes, support meetings and trainings. In all, we touched more than 97,000 people through these efforts.

Thank you for letting us be your partners in health. We take this responsibility very seriously and are honored to be your local health care provider.

Chuck Hays
President & CEO
MaineGeneral Health

Continuing to make an **IMPACT**

“

This job allows me to draw from everything I've done in the past to help others and, in working closely with them, I really get to know them and their life stories, which is what I find most enjoyable.

DeeDee Bielecki



Some of those who have been positively affected by the IMPaCT Program include, from left, Linda Goodrich, Rosalie Thibodeau, Mike Gerdau and Donna Gerdau of Fairfield.

Mike Gerdau is emphatic when he says his life was changed by an “out-of-the-blue” phone call he received from his primary care practice, asking if he’d like to participate in the IMPaCT Program.

And with his somewhat skeptical “yes,” the lives of several family members living with him were changed as well.

“They said this new program would help me with things I wanted to improve on. To be honest, I really wasn’t expecting anything to come out of it,” says the 57-year-old Fairfield man, who set initial goals of losing weight, planning healthy meals and managing his diabetes.

“Several months later, it’s become more than I ever imagined. It’s changed my life and the lives of the five disabled people in my home – my parents, my in-laws and my wife, Donna, who is a stage-three cancer survivor,” Gerdau adds.

A program launched through an extremely generous endowment provided by the Peter Alford Foundation, IMPaCT provides emotional and social support to patients as they work toward one or more long-term health goals through weekly meetings with community health workers (CHWs) during a six-month period.

At MaineGeneral, CHWs are linked to and work closely with clinicians and staff at Augusta Family Medicine, Elmwood Primary Care, Family Medicine Institute, Four Seasons Family Practice, Maine Dartmouth Family Medicine and Thayer Internal Medicine.

A dining services supervisor when he started meeting with CHW DeeDee Bielecki, who works closely with patients at Elmwood Primary Care, Gerdau shared the challenges of trying to be the sole caretaker for his family members while working full time.

“Going to work 40 hours per week and then taking care of everything and everyone at home was exhausting, with no resolution in sight,” he says.

Bielecki asked if he had ever considered staying at home and being paid to care for his family through a program for which he may be eligible. She also told him about another that would reimburse him for transporting his loved ones to medical and other appointments. Gerdau had never considered this because he didn’t know either program existed.

The two worked together on the necessary paperwork and Gerdau’s applications were approved for both programs. This allowed him to leave his job and give full attention to his family without the added stressors he faced before. Bielecki also helped prepare and submit MaineCare

applications for his family members that also were approved, providing them with needed medical coverage.

“DeeDee took that weight off my shoulders. My wife, who was even more skeptical than I was at the beginning, calls her a saint,” Gerdau says. “It’s not just a monetary or physical relief for us, but a mental one as well – for my whole family.”

“I’m very grateful for people like DeeDee who are meeting with patients, as well as those overseeing

this program and trying to improve it – some of whom I’ll never meet but am still grateful for,” he adds. “It has given me a new appreciation for what care is all about.”

Bielecki, who recently celebrated her one-year anniversary with the program, says she finds tremendous joy in helping people like the extended Gerdau family and the more than 20 other patients on her caseload. As each person’s situation is unique, the extensive knowledge and experiences of her varied

working career are a real asset in connecting them with resources that will support them and improve their quality of life.

If you are a patient at one of the participating primary care practices and think the IMPaCT program would benefit you, please discuss it with your clinician. 🌿

Elmwood Primary Care patient Brenda Barry, left, of Fairfield, smiles broadly before a planned walk with DeeDee Bielecki.





Emergency Department Wait Times: What You Need to **Know** Before You **Go**

MaineGeneral Medical Center operates two 24/7 emergency departments – one at the Alford Center for Health (ACH) in Augusta and the other at Thayer Center for Health (TCH) in Waterville.

In the year before COVID-19, 55,000 people received care at MaineGeneral’s Emergency Department (ED); roughly two-thirds of those at the ACH and one-third at the TCH.

A common concern patients have about the ED is how long they will be in the waiting room before they can see medical staff.

Long waits in the ED are a national issue, and MaineGeneral’s average wait times are similar to those across the nation.

We wanted to give you information before you need emergency care to understand ED wait times.

We sat down with leadership of the ED, Dr. Laurel Parker, medical director, and Janelynn Deprey, RN, ED director, as well as Jennifer Riggs, chief nursing officer of MaineGeneral.

First, it is important that the ED is used appropriately. Patients often come to the ED when they may have been able to see their own doctor or receive care at MaineGeneral Express Care. Leaving the ED to true emergency care would help decrease wait times for everyone [see the infographic on the next page].

“Right now we have someone in the waiting room who has had leg pain for two months; another who has hip pain without a fall,” says Dr. Parker. “They may have been able to get into their primary care provider’s (PCP) office or could have gone to MaineGeneral Express Care. Ongoing health issues are really best addressed by a patient’s PCP. The ED is best for urgent health care needs.”

Next, it is important to know that when a person gets seen, or placed in a room, often depends on the severity of symptoms. “Generally, the sickest patient gets seen first,” says Dr. Parker. “It’s not first-come, first-served.”

Deprey adds that it’s sometimes not clear to other patients in the waiting room how urgent another person’s concerns are. “You can’t always tell by someone’s outward appearance how sick they are or what their needs

are,” she says. “There are many factors we take into account.”

You also may not see critical patients who come to the ED by ambulance as they use a separate entrance.

When you arrive in the ED, you will be seen quickly by a triage nurse who can assess your complaint, and start your evaluation and care from the waiting room. While you are waiting, needed tests can be run and then are available when you are seen by a medical staff member. [See sidebar on average wait times for certain tests on next page.]

Current Pressures on the Emergency Care System

Patients who require emergency care, says Dr. Parker, are coming in sicker, stressing a system of care where more patients need to be admitted, and beds are in short supply.

COVID-19 is only part of the explanation.

Riggs agrees that, overall, beds statewide are difficult to find. This is due to the complicated factors of more and sicker patients, including behavioral health patients, and fewer

Make the smart choice for you.

When your primary care provider is not available, you have two choices:



OR



MaineGeneral Express Care for non-life-threatening symptoms

Including:

- Minor injuries, illnesses, aches or pains
- Cuts, rashes and other skin problems
- Colds, flu, fever, seasonal allergies
- Sprains and strains
- Infections

Costs:

- Similar to physician practice costs

Hours*:

- Open 7 days a week
- Monday - Friday:
8 a.m. - 7:30 p.m.
- Saturday, Sunday & holidays:
8 a.m. - 5 p.m.
- Closed Thanksgiving & Christmas

Locations:

- 15 Enterprise Drive
Augusta, ME 04330
[207-621-8880](tel:207-621-8880)
- 5 Central Maine Crossing
Gardiner, ME 04345
[207-588-3530](tel:207-588-3530)
- 211 Main Street
Waterville, ME 04901
[207-877-3450](tel:207-877-3450)
- 16 Commerce Plaza, Suite 3A
Winthrop, ME 04364
[207-377-1450](tel:207-377-1450)

eCare:

- From your smartphone or computer
- Affordable: \$49 a visit
- Start at ecare.mainegeneral.org

Emergency Department for severe or life-threatening symptoms

Including:

- A hard time breathing
- Bleeding that won't stop
- Sudden or severe pain
- Head injury with loss of consciousness
- Chest pain
- Severe headache
- Sudden weakness or trouble speaking
- Thoughts of harming yourself or others

Costs:

- Higher costs than MaineGeneral Express Care
- Co-payments can vary widely

Hours:

- Open 24/7

Locations:

- Alford Center for Health
35 Medical Center Parkway
Augusta, ME 04330
- Thayer Center for Health
149 North Street
Waterville, ME 04901

long-term care beds in the state. This leads to having to room medical patients in the ED, leaving fewer rooms available for patients arriving at the ED.

The result, she says, is that patients stay in the ED longer. There are delays getting patients admitted to an inpatient wing of the hospital; delays in finding behavioral health placement; and difficulty transferring from the hospital to long-term care.

The same lack of resources exists in nursing homes and long-term care facilities. "These facilities have staffing and bed shortages, so we are having to keep patients who would be best placed in those facilities, which compounds our own bed shortage," Riggs says.

Dr. Parker and Deprey remind the community that the Emergency Department is here to provide the very best health care and that no one should avoid going to the ED when they need their services.

"We are all doing our best to get everyone the care and attention they need, as quickly as we can," Deprey says. 🌿

Estimated Wait Times for Tests

Basic Labs	2 hours
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X-ray	1 hour
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Ultrasound	2 hours
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CT Scan without Contrast	2 hours
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CT Scan with Contrast	4 hours
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Cardiac Evaluation	7 hours
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* Winthrop open Monday through Friday only, 8 a.m. to 5 p.m.



New Weight-Loss Surgical Procedure Available in the

Kennebec Valley

MaineGeneral is the only health system currently offering this surgical procedure

One year ago, Dr. Huy Trieu of the MaineGeneral Bariatric Center began offering the latest bariatric surgical technique, single-anastomosis duodenal switch, also known as loop duodenal switch or single anastomosis duodenoileal bypass with sleeve gastrectomy (SADI-S).

Approved by the American Society for Metabolic and Bariatric Surgery (ASMBS) and the International Federation for the Surgery of Obesity and Metabolic Disorders (IFSO), the surgery combines a gastric sleeve with an intestinal bypass. The sleeve reduces the size of the stomach, and the bypass reduces the amount of food that is absorbed.

“This procedure has better results with few complications compared to gastric bypass and sleeve gastrectomy,” says Dr. Trieu.

Dr. Trieu stresses that weight loss is one benefit of the surgery.

Patients also can see a great impact on their overall health.

“About 80 percent of those who have had the procedure have seen a resolution to their Type 2 diabetes,” he says.

Dr. Trieu is the only surgeon in Maine who does this procedure, but he expects its popularity to increase and other surgeons to begin offering the surgery to patients.

The procedure is available for patients who haven’t tried surgery to lose weight in the past, and for those who have. Anyone who is obese and meets the criteria for weight-loss surgery has the SADI-S as an option.

“It’s good for those who have had sleeves who haven’t lost enough weight or gained some back, but also an excellent option for those who have never had weight-loss surgery before,” Dr. Trieu says.

Gretchen’s Story

Gretchen is one such patient who opted for the SADI-S procedure after finding her initial surgery hadn’t yielded the results she wanted.

“Years ago, I had a gastric sleeve. I lost some weight, but then wasn’t able to lose any more,” she says.

At a follow-up visit with Dr. Trieu, he explained SADI-S as an option for Gretchen.

“After learning more about it, I had no hesitation.”

Gretchen was excited for her surgery to take place in early 2020, after completing pre-procedure steps that are always part of a successful bariatric surgery.

However, the COVID-19 pandemic took hold and delayed her procedure, as it did with all elective surgeries.



After weight-loss surgery, Gretchen is able to take longer walks.

"I call the office if something feels wrong. Everyone at the center is special to me, and they treat me like I'm the only person in the world when I'm in the office" – from front desk staff to the dietitian, wellness coach, physician assistant and, of course, Dr. Trieu.

"They are supportive of my personal journey and are very attentive to my needs," Gretchen says.

Now, almost a year after her surgery, Gretchen says she's still excited about her experience.

"This is the first time since I was 30 years old that I've been able to lose 50 pounds successfully without gaining in between. I still have a way to go until I feel I am at where I want to be, but I'm on my way."

Gretchen says she can walk farther than she used to, a big goal she had, as well as being able to do other activities, or just sit or bend over comfortably.

Success, though, is about changing your mindset, she says.

"I'm determined and know I'm the only one who can make this work. The surgery is just a tool – though an important one. You have to change your relationship to food. And you have to be an active participant with your team."

Gretchen can't say enough about Dr. Trieu's commitment to her and her well-being. "I trust Dr. Trieu with my life. He and his team have been dedicated to me pre-op to post-surgery. They welcomed me to come back and they offer the hope to be successful. And it takes the team to be successful."

"It's exciting to get on the scale. I'm happy with who I am. Food doesn't rule my life."

To learn more about the single anastomosis duodenal switch and other weight-loss options, go to www.maine-general.org/weight-loss. 🌱

Because Gretchen had already had the sleeve, Dr. Trieu just had to do the intestinal bypass portion.

She spent one night in the hospital after surgery and didn't have much pain, only discomfort, which she expected. She was up and walking every couple of hours soon after surgery.

The surgery, Gretchen explains, is a tool to help her reach her larger goals. "The rest is up to me," she says.

The work – and support of the MaineGeneral Bariatric Center staff – is ongoing. Gretchen says she follows a diet of more healthy fats and protein and watches her carbohydrate intake, but she doesn't deny herself a treat.

"I follow the nutritional advice and take vitamins.

"Physically, the process was very easy; it was the emotional part that was hard," she says.

Support groups, though conducted virtually because of the pandemic, have really helped.

"Elizabeth (the Bariatric Center's dietitian) told me about an online support group. The resources have been valuable, as well as knowing you're not alone."

Gretchen gets annual blood tests to make sure she's getting all the nutrition she needs to stay healthy, but says it's important to know your body. And help is always there at the Bariatric Center.

Appreciating Hospice Care



From Two Perspectives

Gigi Ottmann-Deeves, left, and her mother, Marie Therese "Terry" Ottmann, in a photo from July 2013.

Gigi Ottmann-Deeves joined MaineGeneral Hospice & Volunteers of Kennebec Valley three years ago to comfort patients at the end of their lives at MaineGeneral's Gray Birch and Glenridge facilities.

What she didn't know then was how valuable her training would be in preparing to say goodbye to her mother in March 2021.

"I had that sense from interacting with elderly Hospice patients," she says, recalling the final days of Marie Therese "Terry" Ottmann, who died at age 91 after years of living with dementia and failing health. "Even though the situation was different because it was my mother, it prepared me." It also allowed her to support her five siblings, four of whom live outside of Maine.

"My mother was in MaineGeneral Hospice so she had nursing services and comfort care," she says. "Every day the nurse explained things to me and I could share that information with my siblings."

While COVID-19 restrictions made it incredibly challenging for the family while Terry was in assisted living because they couldn't visit her, Gigi is grateful for special moments she had with her near the end of her life, when she was hospitalized. She's also thankful she could be with her when she passed.

"Being able to support someone as they're dying is really sacred and a privilege," she says. "It gives you a greater perspective about how precious life is."

Now that MaineGeneral Hospice & Volunteers can make in-person visits, Gigi plans to resume volunteering this fall. She recently retired after 35 years of employment with the State of Maine, which gives her greater opportunities to support patients and families.

"I plan to participate more in people's homes and less in nursing homes because I now have more flexibility," she says. "What I provide is friendship and companionship, because many of the patients I met with previously didn't have families, or family members who could visit regularly."

Providing support in many ways

Gigi is one of more than 20 active volunteers who support Hospice patients and their families throughout the Kennebec Valley region, says Loretta McNeil, MaineGeneral Hospice's supervisor of Bereavement and Volunteer Services.

"When we couldn't meet in person, we provided telephone support and also launched a virtual grief support group program. Depending on where we were in the pandemic, there were outdoor meetings – socially distanced and masked," McNeil says, "and some folks delivered groceries for people and did errands for them outside the home."

"We can now be back in homes and it's incredible because patients are lonely," she adds. "Our volunteers provide a lot of social and emotional support and also run all of our bereavement groups."

In addition, MaineGeneral Hospice & Volunteers offers a broad range of grief support to survivors after their loved one has died.

"We connect with them for 13 months after the death of their loved one, providing whatever support they may want," McNeil says. "This ongoing support is important because grief has no timeline – there are stages and they're neither neat nor orderly."

Learn more at www.mainegeneral.org/hospice.

Proud of Our Staff

We are so proud of our staff at MaineGeneral. Never has this been more true than the past year and a half. Everyone – on the front lines and behind the scenes – is a health care hero whose number-one goal is to provide excellent care to every patient, every time.

Deanna Stearns

Deanna Stearns is a high-performing, certified nursing assistant (CNA) at MaineGeneral Rehabilitation & Long Term Care at Glenridge.

"I love my residents, teammates and the whole MaineGeneral team," Deanna says. "I love being able to work with them, see the smiles on their faces, and being here when their families couldn't be here was so special."



Bonnie Petrone

Bonnie Petrone, RN, 3 South at the Alford Center for Health.

"Being a nurse is who I am," Bonnie says. "I enjoy my patients and coworkers every day, even on the difficult ones. Thankfully I work with a bunch of dedicated individuals who love working with our patients, never judging and always seeing the patients beyond their diagnosis. I am blessed to have to opportunity to work with the people I do, and hope to continue for at least a bit longer."



Scarlett Turner

Scarlett Turner, certified nursing assistant, 3 West.

"I love being a CNA," Scarlett says. "Helping and taking care of patients and offering encouragement and comfort to loved ones is very rewarding to me. I always feel that I made a difference in someone's life."



Steve Diaz, MD, chief medical officer

Recognized by Maine magazine as one of the 25 Mainers of the Year.

"My proudest accomplishment is that we have been helping our community navigate and manage through the COVID-19 pandemic."

MaineGeneral offers a variety of career opportunities for people like Scarlett, Bonnie, Deanna and Dr. Diaz who want to make a difference. To learn more, visit www.mainegeneral.org/careers.



MaineGeneral vaccination team at the Windsor Fair with Thomas Foster (in background with ball cap), President of the Windsor Fair.

COVID-19 Corner

The pandemic continued to impact our community and health system. We're so grateful to all those in our community who continue to practice what we know makes a difference to stop the spread of COVID-19, including:

- Masking when in public places
- Social distancing
- Staying home when sick
- Getting vaccinated for COVID-19

Below are some statistics from the mass vaccination site at the Augusta Civic Center, which closed July 1, and across the community at pop-up vaccination clinics.

MaineGeneral pop-up vaccination clinics ended earlier this fall, but you can still get your vaccines at any MaineGeneral primary care practice. We also began offering vaccinations to children ages 5 - 11 on Nov. 8. Get the latest on how to get your vaccination at www.maine-general.org/covid.



46,275

doses at community health clinics (Augusta Civic Center, Alford Center for Health and pop-up clinics)



127

volunteers gave

1,462

volunteer hours



80

people were hired to work the clinics



140

existing MaineGeneral Health employees worked at the clinics

14 of whom were offered permanent positions

Making Prevention Possible

Increasing Program
Delivery and
Engaging a New
Audience During
COVID-19



MaineGeneral's Peter Alford Prevention & Healthy Living Center (PAPHLC) aims to improve community health by helping people engage in healthy lifestyles, increasing access to care and reducing barriers to participation in healthy activities and behaviors. For the last several years, we have offered classes on a variety of topics that fall into four major content areas: healthy cooking and eating, physical movement, mind-body as well as evidence-based chronic disease prevention and management programs. We offer these classes in areas that people can easily access, such as yoga studios, YMCAs, low-income housing complexes and primary care practices. We also offer classes at our main campus, the Alford Center for Health.

COVID-19 changed all this – but offered new ways to connect with people.



All of a sudden, in-person classes were no longer an option, so we had to rapidly shift in order to maintain community engagement.

Jasmine Waite

Due to patient privacy concerns, PAPHLC could not offer Zoom programming at the beginning of the pandemic. In the absence of Zoom, they developed a telephonic health coaching program.

“Through telephone outreach, we helped community members make progress toward their health goals, even in those unprecedented times,” Jasmine says. “Many individuals were facing rapidly changing routines and new stressors, which made reaching or maintaining their health goals that much more difficult and important. We were glad we could launch telephonic

health coaching immediately to meet people where they were at.”

PAPHLC’s next step was to develop one-time classes to provide basic knowledge for those looking to make healthy changes. “Healthy Eating 101 and Diabetes Prevention Education, for example, were starting points for patients who were referred by their clinicians to our year-long and six-week chronic disease self-management programs that had been paused due to pandemic restrictions,” Jasmine explains.

Jasmine and her fellow educators were soon trained to facilitate these group programs by phone – a win-win for everyone involved.

“These telephonic programs gave participants the opportunity to engage with one another, reducing social isolation while also making healthy behavior changes,” Jasmine says. “We were pleasantly surprised at how appealing these classes were to community members who didn’t want to be on video but were comfortable talking over the phone, who struggled with technology, or who hadn’t previously engaged with our programs due to trouble traveling.

“This was a significant discovery. Telephonic classes weren’t an option prior to the pandemic, but through it being one of our only class facilitation options, we learned that in-person classes had actually been a barrier for some individuals! Therefore, we will continue to offer telephonic classes post-pandemic.”



PAPHLC instructors Ben Ramsdell, Jane Moore and Baylee Doughty leading classes on Zoom



In addition to telephonic delivery, another essential way in which PAPHLC maintained community engagement was through online platforms like YouTube. Instructors videotaped classes such as tai chi, strength training, healthy cooking demonstrations and meditation. PAPHLC also increased their online presence through regular Facebook posts and a monthly e-newsletter. “Our Facebook posts have been viewed more than 50,000 times and our pre-recorded classes and videos on our YouTube channel have received more than 5,000 views,” says Alicia Rice, community health manager.

Thanks to these new ways of offering classes during the pandemic, Chronic Disease Prevention and Management class enrollments increased 32 percent and PAPHLC was able to offer 27 new classes.

Instructor Mike Keighley taping a yoga class for YouTube



“We’re thrilled with the increase in engagement we’ve seen and plan to continue these online platforms even as we transition back to in-person classes,” Alicia says. “MaineGeneral also secured Zoom for Healthcare so we can host virtual classes safely, allowing us to expand our reach further.”

Following Maine CDC and MaineGeneral guidelines, PAPHLC started hosting in-person classes outside, with masks and social distancing, in June 2021; these offerings have included yoga, strength training, labyrinth walking and forest bathing classes. Classes will move inside when the weather gets colder, with the same COVID-19 precautions in place – and a positive outlook for the future.

“All of us at PAPHLC are very proud of our efforts over the last 18-plus months to embrace technology and be flexible so we could continue to serve our community,” Alicia says. “Despite the negative impacts of COVID-19, from forcing patients to delay health care to increasing social isolation, we successfully continued to provide healthy living content to community members, and also engaged with new audiences. We’re very excited to see what the future holds.” 🌱



MaineGeneral Health DAY of HOPE

The Day of Hope is a day of inspiration and celebration – and even though we had to do so virtually, hope is never lost.

Thanks to our generous community, the Day of Hope raised more than \$168,000 to help support those in our area living with cancer.

We held pop-ups at area business leading up to the Oct. 2 event, and celebrated our cancer community while supporting the work and patients at the Harold Alfond Center for Cancer Care (HACCC).

See the videos from the Day of Hope at www.maine-general.org/dayofhope. ↘



Thank you to our Day of Hope Sponsor:






Annual Campaign Donors

List recognizes gifts made between July 1, 2020 and June 30, 2021

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Harold Alford Foundation
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United Way of Kennebec Valley

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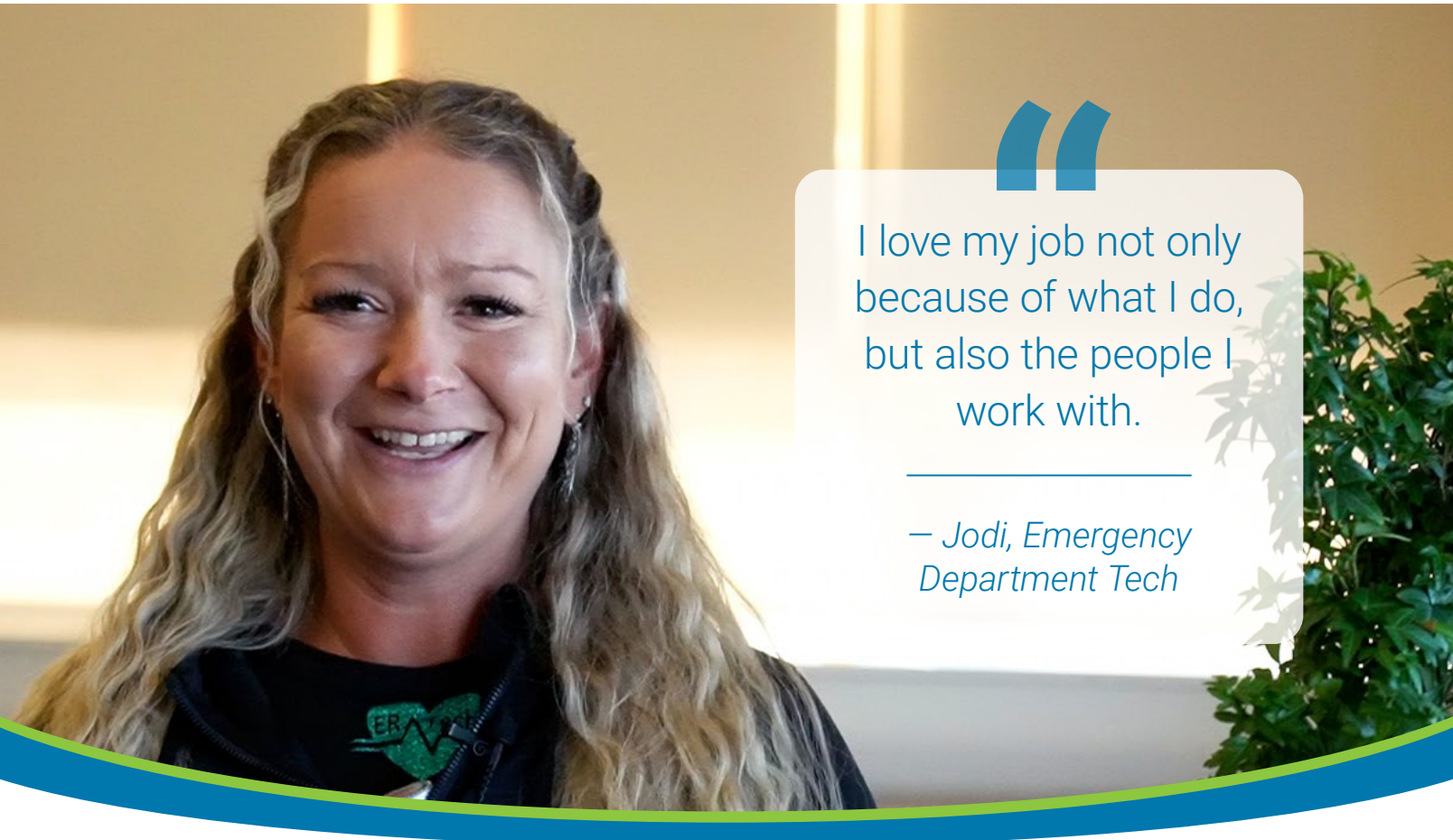
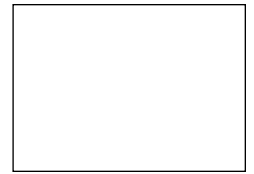
A look at the numbers.

Financial Summary

(amounts in 000s)

Fiscal Year

	2020	2021
Income		
Net Patient Revenue	491,635	536,724
Other Revenue	83,437	84,624
Total	575,072	621,348
Costs		
Salaries & Benefits	319,252	345,419
Suppliers & Vendors	223,679	249,020
Interest	19,940	14,301
Depreciation	21,852	23,185
Total	584,723	631,925
Operating Margin	(9,651)	(10,577)
Statistical Data		
Discharges	10,736	10,833
Surgeries		
Inpatient	2,587	2,643
Outpatient	6,830	7,040
Births	968	1,012
Emergency Department Visits	47,378	43,579
Outpatient Lab Tests	1,108,878	1,247,657
Outpatient Imaging Procedures	96,528	106,403
Oncology Procedures	57,313	56,772
Physician Office Visits		
Primary Care	194,077	203,394
Specialty Care	159,289	165,043
HomeCare and Hospice Visits		
HomeCare	56,566	48,588
Hospice	34,979	30,376
Days of Skilled Patient Care		
Skilled Nursing	43,415	42,610
Skilled Nursing (dementia)	10,929	10,798
Skilled Rehab	36,846	32,440



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— Jodi, Emergency Department Tech

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