

# *Connecting to Resiliency*



Penobscot Community  
Health Care



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PCHC SERVICES & LOCATIONS

- 1

JACKMAN

Jackman Community Health Center

2

OLD TOWN

Helen Hunt Health Center

3

BANGOR

Administrative Building

Adult Wellness Center

Bangor School-Based Health Center

Bridge Clinic

Capehart Community Health Center

Central Lab

Dental Center

Hope House Health and Living Center

Infusion Center

IT & Data Analysis

Medical Specialists

Penobscot Community Health Center

Penobscot Pediatrics

Training and Support Center

Unlimited Solutions Clubhouse

Warren Center for Speech and Audiology

WOW 4 Wellness

4

BREWER

Brewer Medical Center

Brewer High School Based Health Center

Brewer Community School-Based Health Center

5

WINTERPORT

Winterport Community Health Center

6

BELFAST

Seaport Community Health Center

- Audiology

Care Management

Chiropractic Care

Community Care &

Geriatrics

Community Care Teams

Dental Care

Family Medicine

Health Care for the Homeless

Infusion Therapy

Laboratory Services

Mental Health

Nutrition

Osteopathic Manipulation Therapy

Pediatrics

Pediatric Obesity

Pharmacy

Physical Therapy

Podiatry

Recovery Services

Speech Therapy

Unlimited Solutions (vocational services for individuals living with mental health challenges)

Walk-In Care

Women’s Health Care

X-Ray

A look back



Christopher Winstead  
Board Chair

When I looked back on the annual report for 2020, I noticed how many people featured in the report (including myself) used words like “grit” to describe PCHC’s amazing staff, and “unprecedented” to describe the challenges they faced in Year One of Covid Times. As a person privileged to lead

PCHC’s Board, I know firsthand how true those descriptions really are. Did they hold up?

Certainly “grit” still applies, along with passion, dedication, fearlessness and determination, when talking about the nearly-900-strong team members. But “unprecedented” is showing its age, because in 2021, we had all been here before. This was not our first rodeo. Instead, I’m thinking of “resilience” and “innovation.”

- Despite the lingering pandemic that kept some patients away and made in-person primary care occasionally very challenging, PCHC saw more than 260,000 patients, employing telehealth and other strategies to continue to offer the critical access to care that is at the heart of our mission.

- Even given the difficulties in face to face care and amid staff shortages and supply hang-ups, PCHC kept the standards of care high, and improving—beating state and federal averages on key quality benchmarks.
- PCHC continued to grow, preparing to open a school-based health center at Bangor High School, launching a mental health access center to more rapidly connect people to needed services, and purchasing a major property in Belfast to create even greater access to care and wellness services- while more comfortably accommodating the overflowing Seaport Health Center.

I could go on.

For me, the top storyline of 2021 for PCHC is one of continuous improvement despite all odds. I’m immensely proud of this organization and humbled by the opportunity to serve PCHC and witness up close these amazing seasons of strength, grit and growth.

## A year of connections



Lori Dwyer, JD  
President & Chief  
Executive Officer

For PCHC—an organization I am immensely proud to lead—2021 was a year of connections, some brief but incredibly important, some lasting, and all in some way reflecting success in our mission to provide and increase access to care for all who come to us. Consider: the timely connections to care afforded by the new Mental

Health Access Center; the connection to shelter, COVID testing and vaccination for migrant farmworkers and our relationships with Maine Mobile Health, Mano en Mano, the Maine Multicultural Center, and the City of Bangor, that facilitated this. Think also about the partnerships with the Town of Jackman and Northeast Mobile Health Services that fuel our Jackman parahealth project; and the community network supporting our expansion in Belfast; deeper connections to colleagues as we navigated loss and grief. We are also called to reflect on the 27,000 Mainers we provided with the life-saving COVID vaccine.

I thought a lot about connections when hundreds of condolences poured in on the loss of Theresa Knowles, PCHC's Chief Quality Officer and the architect of our quality program. So many people across our state and around the country knew and respected Theresa, her sharp mind and her kind heart. They are our links now, too, as we grieve her loss together.

Soon after the loss of Theresa, we lost our former communications executive, Sarah Dubay—a vital part of the PCHC family for 15 years. We recognized anew the value of her ability to know and relate to a huge number of people across our community. With Sarah's passing, we were reminded again of our fragile and limited time on earth. At her memorial service, Sarah's partner shared a message from Sarah to the rest of us: make time for deep and meaningful connections with others.

I think, too, about the integrated care we are proud to offer our nearly 60,000 patients. The teams of pharmacists,

primary care and mental health providers and specialists who work together, connected as one team, to treat whole persons. "Teamwork makes the dream work," Magic Johnson said.

In his book *Together: The Healing Power of Connection* in a Sometimes Lonely World, Surgeon General Vivek Murthy describes the devastating health impacts of loneliness. Lack of human connection literally makes us sick, and without it, we cannot thrive.

But connection demands an investment in relationships, and such investments require time. In primary care, time is in short supply, a reality made ever more obvious during the pandemic, when constant swerves further increased cognitive burdens and administrative overload.

Elsewhere in this report you will read about the ups and downs of our second COVID year. The lingering pandemic was indeed an overwhelming factor. But this report is also replete with evidence and stories of the multiple ways we connected and reconnected to our community, each other and the people we serve. Our health and success as an organization depends on that multitude of little links and encounters. They provide a strong foundation going into what is sure to be an eventful year of change and accomplishment.

And as 2021 highlighted for us the truth we already knew -- that strong relationships are the glue keeping us together and the engine that fuels our progress -- we know that in 2022 and beyond, we must reclaim our time and prioritize human connection in order to heal ourselves, the people we serve, our communities, our nation and the world.

## At the heart of our mission

PCHC continued to deliver on its core mission—Integrated primary care—throughout the second year of the pandemic. Despite turnover (PCHC was not immune from the "Great Resignation" across every business sector), surges in COVID variants, and economic challenges like supply shortages, PCHC pivoted and prevailed. With the goal of increasing and stabilizing access to care despite COVID, PCHC adapted with the use of telehealth visits, a new mental health access center, walk-in care and other strategies.

And while PCHC's roster of "regular patients"—those seen in the previous 12 months, dropped from 65,000 in 2019 to 58,000 in 2021, patient encounters totaled more than 260,000 in 2021, with 66 percent of those for regular medical services.

Although recovery services represent only a small fraction of the care PCHC provides, they have an outsize impact. PCHC has the largest primary-care aligned recovery program in Maine, and sees more patients every year.

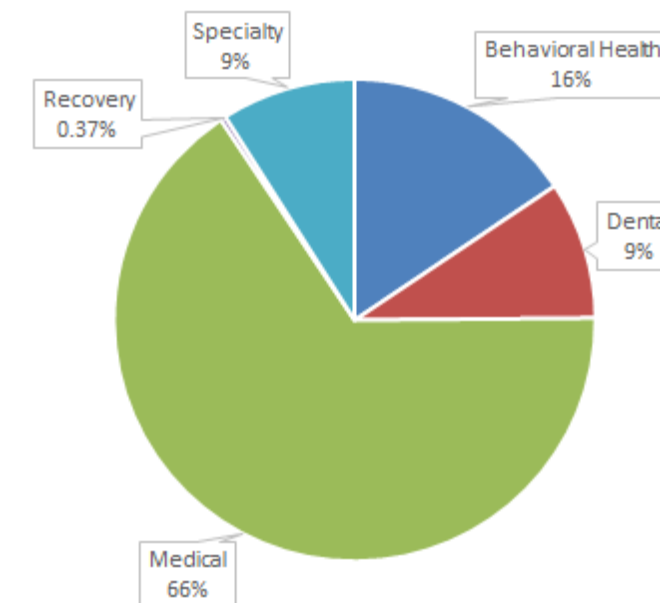
Resilience among our providers, who are focused on team-based and patient-centered care, was critical to this success. Many providers cite that "connectedness" and collaboration as foundational to their work.

"Medicine may cure, but relationships are healing," said Andrew Fletcher, M.D., J.D., Director of Walk-In care.

"Every day we are grateful to our dedicated and caring front-line support teams—the medical assistants, the patient service representatives, medical support assistants, site supervisors, phone team, and all the others who are directly involved with improving our service experience. They covered shifts during a time of unprecedented turnover and low staffing due to COVID. They worked overtime. They volunteered to cover shifts so we could continue to deliver care, uninterrupted. And they did it all with patience, good humor and professionalism."

Dawn Cook,  
Vice President and Chief Operations Officer

## Encounters by Program 2021



*With gratitude*

Noah Nesin, MD  
Innovation Advisor

experienced provider with a tendency to think outside the box--at exploring new pathways to deliver integrated primary care.

The proverbial glass was half-empty, because Nesin's confident, empathetic and collaborative style of clinical leadership would be hard to replace.

How to proceed? PCHC decided NOT to replace their CMO, instead creating a team of executive clinical directors, each assigned to a service line or area, who would work in collaborative leadership while focusing on new approaches and improved models of care. Did Nesin break the mold? Perhaps, but he himself confesses that it's "Inspiring to watch" the new leadership develop.

Nesin practiced in Mattawamkeag and Lincoln for 30 years before joining PCHC as chief quality officer, becoming the CMO the next year. He has been a trusted voice at PCHC, frequently serving as a spokesman for clinical issues, and during the pandemic, leading online community forums about COVID. He inspired younger clinicians and forged new connections statewide. His passion for PCHC's mission manifested itself in his personal dedication to population health issues, especially the treatment of substance-use disorders. He was instrumental in creating PCHC's medication-first, low-barrier Bridge Clinic and worked to launch (and lead) an ECHO training course to expand medication-assisted treatment to nine other sites across the state.

Nesin is a dryly humorous colleague unafraid to skewer self-importance (in his own presentation or others') but endlessly willing to help, collaborate and inspire. He has a clear-eyed view of modern healthcare. Despite his decades

In mid-2021, PCHC announced that Noah Nesin, M.D., chief medical officer for eight years, was stepping away from the role and into a newly created position as Innovation Advisor to the organization.

The glass was half-full because nobody would be better than Nesin—a savvy,

of experience providing primary care, he rejects any folksy characterization, vocally disapproving of newspaper headlines describing him as a "country doctor."

"I'm a family doctor," he clarifies. Something about the way he says it makes you resolve never to use the word "country" that way again.

Nesin moved into his new role in January 2022 and is collaborating with both PCHC and the Schmidt Institute on new projects and processes. He continues to lead, with other PCHC providers, on the ECHO project. His work with the state Board of Licensure in Medicine and other state and local boards and groups continues. He describes the new work as exciting—and satisfying.

"It allows me to remain meaningfully engaged in the work about which I am passionate and spend much more time with my family and non-professional passions, like cycling, deeper engagement with my faith community and making bread," Nesin said. "It has been a privilege to have the opportunities to help PCHC lead in addressing the vital needs of our patients and communities. It is humbling to know that the work never ends."

Normally, outgoing chief medical officers are showered with praise and parties. COVID put a damper on that kind of send-off, but gracious as always, Nesin offers thanks to his organization instead of the other way around.

"I am deeply grateful. I can't wait to see where we all go from here, together," he said.

Us too, Noah. Us too.



Lori Dwyer, JD  
President & CEO



Dawn Cook  
Vice President &  
Chief Operations Officer



Christine Finn-McLaughlin, MBA  
Chief Finance Officer



Megan Sanders, Esq.  
Chief Human Resources Officer  
& Chief Legal Counsel



Sharyl White, BA  
Chief Information Officer

## BOARD OF DIRECTORS

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**Treasurer - Erin Doucette, CPA, Senior Accountant, BBSC**  
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Shelly Okere, Esq., Assistant District Attorney, Penobscot County

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Katie Spencer White, MSC, President and CEO Mid-Maine Homeless Shelter & Services

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**We're proud that the majority of our board members are also our patients!**

Under federal law, community health centers are required to have patient representation on oversight boards. For us, it's just another way we connect with the communities we serve.

## *It was an ordinary May morning at Auburn Hall—*

—ordinary for COVID times, anyway. The muffled sound of voices behind masks and an occasional peal of laughter mingled with earnest instructions from the University of Maine nursing students, who had come to help with PCHC's busy vaccine clinics. "Could you roll your shirt up a little more? Perfect." Somewhere, Director of Pharmacy Frank McGrady was singing—to the delight of nervous vaccinees lined up for their shot.

From a table in the "recovery room" a quiet voice could be heard: "Mrs. Dumas? How are you? This is Theresa Knowles from PCHC. In Bangor? Yes. I wanted to let you know that you could come in for your COVID vaccine—we have them. Yes, the shot—it's available here. We'll be here all day. You can't? Can we come to you?"

PCHC's indomitable Chief Quality Officer Theresa Bray Knowles was calling people—hundreds of vulnerable people—to offer them the lifesaving COVID vaccine. Patiently, she dialed her cell phone, made her pitch, crossed names off lists. Over and over again, briskly and cheerfully. If the

people were not going looking for the vaccine, Theresa was going to look for the people. If they lived at the end of a tote road in an area populated mostly by trees, if they lived with a disability or poverty or no vehicle or no family to bring them to the vaccine, Theresa was ready to bring the vaccine to them. And did. In addition to multiple home visits and the Auburn Hall clinic, Theresa's mobile teams brought COVID protection to schools, colleges, faith communities, jails, senior housing, community centers and even the parking lot at 103 Maine Ave: drive-thru convenience. By the end of June, PCHC had vaccinated its 20,000th Mainer—a youngster at a school in Bangor's Capehart neighborhood.

The pandemic was and is the biggest emergency and challenge to public health in a lifetime, and Theresa, whose dedication to the people of Maine,

population health, and the health center mission, could only be described as a force of nature. She battled back against COVID and lifted up her colleagues and our patients with a warrior's heart until her tragic diagnosis of cancer. She died August 26, 2021 leaving a heartbroken family, friends and colleagues.

Her legacy was bigger than COVID, of course. She was the architect of PCHC's quality improvement and population health programs, designing for PCHC and for Community Care Partnership of Maine, the accountable care organization that PCHC is part of, quality improvement programs and systems that have led to abiding success for patients and communities across Maine. She championed HPV vaccines for kids, annual wellness visits for Medicare patients, depression screening,

integrated recovery services—all the things that, taken together, make the people and communities we serve healthier.

As the mother of four sons, she relished the happy chaos of life and had a soft spot for parents, particularly her fellow "Boy Moms." On top of her consuming job, she volunteered as an EMT in her hometown and chaired the school board. Her smile and infectious laugh, which was often laced with righteous sarcasm, breathed life into the vital and demanding work she pursued.

She was a hero for sure, but no saint; funny, stubborn, frequently puzzled by people's reluctance to do the right thing, as she saw it. Fiercely loyal to her teams, Theresa made sure they got the credit for every success ascribed to her. "I have the best people working their tails off," she said, brushing off a compliment about her leadership of PCHC's COVID response.

The many people she encouraged and mentored who play such important roles within PCHC (and in the community at large) are a testament to Theresa's selfless approach to her professional life, and those teams have stepped up to continue Theresa's legacy by

logging an outstanding year for quality improvement, during which care teams improved in nearly every performance indicator in spite of the challenges of a two-year, global pandemic. PCHC and healthcare groups in Maine and nationally, have honored her, including:

- Nurse Practitioner Clinical Excellence Award (posthumous) by the Maine Primary Care Association
- Nurse Practitioner Excellence Award by the American Association of Nurse Practitioners.
- The Dr. Robert Allen Quality Award at PCHC will be renamed the Theresa Knowles Quality Award at the request of Dr. Allen and with unanimous consent of the PCHC Board of Directors
- A Medical Assistant Academy and scholarship is being created in Theresa's name.

Less ceremonial perhaps, but important: Hundreds of tulip bulbs were planted by PCHC'ers at nearly all PCHC locations in memory of Theresa, who loved her spectacularly beautiful flower gardens. Near the end of Theresa's life she was asked by a dear friend and colleague if she knew how much good she had done in her lifetime. Her reply was, "I know." We are thankful that her impact on our organization, on Maine, and the world—obvious to us—was known to her as well.

At this time of year and every year, as these tulips bloom to welcome the Spring, we will be reminded of Theresa's cheerful spirit, of her optimism and of her unyielding determination to do good.

*Less ceremonial perhaps, but important:  
Hundreds of tulip bulbs were planted*



## Exceeding our goals

By almost every standard quality measure, PCHC met or exceeded goals in 2021—a great accomplishment in any year, but extraordinary in the second year of a grueling global pandemic that saw reductions in workforce, an overwhelming focus on the external threat of the virus, and at the heart of our organization, the loss of the trailblazing and dedicated chief quality officer, Theresa Knowles.

Among the top milestones:

- PCHC was recognized by HRSA for exceeding benchmarks in four key areas: health center quality leader, advancement of health information technology, COVID-19 data reporter, and patient-centered medical home (PCMH) recognition.
- Improved adult BMI counseling rate by 15% and depression screening rate by 18%.
- PCHC exceeded national averages for breast cancer screening and smoking cessation.
- PCHC fully immunized two-year-olds at rates far exceeding both state and federal averages.

### Another big number for PCHC: 27,000

That’s the number of people vaccinated against COVID by PCHC in the last year. Twenty-Seven Thousand Mainers, vaccinated at mobile clinics, in faith communities, in senior housing, in jails, at schools and on campuses, in apartments and in homes so remote that GPS doesn’t get you there. In the midst of a surging pandemic, weekdays, workdays and weekends, PCHC’s vaccination team was determined to get shots

### PCHC 2021 Quality Metrics

UDS Clinical Compliance Measure	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Change From Previous Year	State Average	National Average
Controlled HTN	70.00%	71.60%	68.00%	70.37%	67.34%	69.72%	75.54%	73.53%	75.00%	78.01%	3.01%	69.01%	57.98%
Cervical Cancer Screening	46.30%	65.00%	53.50%	53.77%	48.93%	39.30%	53.24%	50.77%	54.77%	53.57%	-1.20%	59.33%	51.00%
2 Year Olds Fully Immunized	36.00%					39.82%	48.19%	48.26%	51.94%	58.31%	6.37%	42.96%	40.42%
DM >9% or No Test*	11.00%	10.50%	23.50%	23.27%	22.49%	25.05%	22.55%	23.96%	22.54%	18.91%	-3.63%	21.42%	35.60%
% Children BMI & Counseling	22.00%	29.13%	44.20%	49.90%	55.53%	55.86%	60.13%	62.81%	64.77%	68.71%	3.94%	58.53%	65.13%
% Adult BMI & Plan	67.00%	67.10%	54.20%	57.32%	47.89%	57.10%	57.68%	59.82%	64.52%	84.25%	19.73%	61.50%	65.72%
% Smokers/Tobacco Cessation	89.00%	89.70%	89.70%	90.63%	88.84%	96.47%	96.61%	92.39%	94.02%	98.50%	4.48%	90.94%	83.43%
Statin Therapy for CAD							66.88%	68.65%	72.42%		3.77%	68.79%	71.92%
IVD: Aspirin/Antithrombotic Therapy	74.00%	86.00%	68.30%	70.62%	70.65%	90.14%	90.53%	86.35%	84.17%	86.10%	1.93%	83.50%	78.80%
Colorectal Screening	50.00%	50.80%	52.80%	58.58%	58.62%	57.40%	57.01%	54.54%	54.29%	59.62%	5.33%	60.86%	40.09%
Breast Cancer Screening									60.35%	63.69%	3.34%	65.16%	45.34%
Depression Screening and Follow-up			47.80%	56.83%	54.17%	63.72%	51.93%	50.17%	64.24%	85.04%	20.80%	66.27%	64.21%
HIV Screening									7.52%	12.44%	4.92%	12.36%	32.29%

#### Color Guide

Better than state, better than nation
Better than state, worse than nation
Worse than state, better than nation
Worse than state, worse than nation

Each year PCHC is evaluated against state and federal averages in certain benchmark areas of population health. In 2021, PCHC notably did not fall behind in any of those areas, and in most, improved over prior year and overwhelmingly surpassed the averages.

in the arms of everybody who wanted one—and maybe couldn’t wait in line at a mass clinic, or get to a clinic, or know where to find the clinic.

In collaboration with the University of Maine School of Nursing, Penquis, and other organizations, the PCHC vax team went “where the people are,” as she Knowles put it. It’s a signal accomplishment that fully reflects PCHC’s mission and role as a healthcare safety net.

## At few organizations does the phrase “Human Resources” resonate as deeply as it does at PCHC.

At few organizations does the phrase “Human Resources” resonate as deeply as it does at PCHC. Understanding that lots of humans—nearly 900—make our mission successful every day, and that people really are our greatest resource, our HR professionals worked hard in 2021 to increase our resiliency, encourage joy in our work, and successfully recruit more needed “human resources” to our team. Working with Communications and Engagement and Infection Control, HR made sure the workforce was well-informed about safety protocol changes, vaccination safety and availability, testing capacity and new science around variants and community transmission. Indeed, COVID made everything more difficult, but with workforce health and safety at the top of the priority list, HR achieved multiple goals last year, including:

- 95 percent of the workforce vaccinated against COVID
- First safety-systems professional hired, to put patient experience and safety at the center of our daily work
- A new training committee established and money allocated to address and solve for unmet need for training
- A \$2 wage increase for most job titles, signaling a significant investment in our people.
- Held health insurance premiums nearly constant to previous year
- Designated a Leader in Healthcare Equality by the Human Rights Campaign
- Significant resources allocated to diversity, equity, inclusion and belonging at PCHC; multiple improvements made to continue to attract and retain outstanding colleagues
- The 2021 culture survey reflected the same or improved scores as compared to 2020 in all 6 domains measured, across 90+ questions
- Allocated significant resources to assessing current state of diversity, equity, inclusion and belonging at PCHC—and making improvements to continue to attract and retain outstanding employees.
- Hired and onboarded 262 staff, including 47 providers.



90+  
questions

262  
new staff



\$2  
increase

47  
new  
providers



95%  
vaccinated

## Careful stewardship by the Operations and Finance teams

For PCHC's Finance team, 2021 reflected the kind of uncertainty felt across the business sector, as the pandemic continued for a second year.

Despite general optimism engendered by widespread vaccine availability—and a slight “return to normal” over the summer—COVID continued to dampen PCHC's finance picture. This mirrored the situation at every other health care organization in the country where patient volumes never recovered from 2020. FQHCs, as mainly primary-care providers, had the additional challenge of encouraging patients to come back into the clinics—without the benefit of rebounding surgical and procedure volume to improve the balance sheet. Cumbersome PPE requirements, visitor/guest restrictions and generalized fear of infection kept some regular patients away. Others had simply got out of the habit of regular primary care. Others who participated in “the Great Resignation” saw their health insurance change or disappear, a dissuading factor for many patients.

As a result PCHC's roster of regular patients—those seen in the last year—dipped from 65,000 in 2019 to 58,000 in 2021.

There were 266,796 patient encounters in 2021, including 30,939 telehealth visits. Of those, 29,874 were video calls, and 1,065 were phone visits.

Net patient revenues were \$58.73 million against a budgeted \$67.6 million, resulting in a variance of -\$8.89 million.

However, grant and other income – including extremely meaningful and needed stimulus funds of \$8.6 million, trended highly positive against budget and there was a small but significant operating gain against a budgeted \$730 million loss. And a projected net loss of more than \$1 million ended being only slightly more than \$100,000. In the end, and largely thanks to the influx of government funds and careful stewardship by the Operations and Finance teams, PCHC notched a much smaller than budgeted negative variance.

	2020	2021
Patient Revenue	59,103,303	65,380,252
340b Revenue	6,959,177	7,754,696
Grant Revenue	19,989,369	23,337,950
Other Revenue	1,958,244	2,016,944
	88,010,093	98,489,842

### New Leadership at Finance

Josh Pendergast was promoted to Controller, closing a leadership gap at that crucial position. With more than 20 years of experience in finance, budgeting, analysis and leadership, he brings a wide array of skills and knowledge to the role. As Controller, Josh is managing the budget process; assessing accounting operations, evaluating the effectiveness of accounting software, and developing business-performance metrics.



### Acres of Opportunity in Belfast

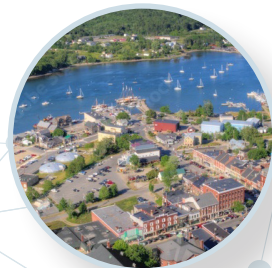
PCHC purchased 21 Schoodic Drive, a seven-building campus once operated by Bank of America, in the late fall. While providing a new home for our bustling—and bursting at the seams—Seaport Community Health Center, the new campus offers PCHC a chance to make space for multiple aligned providers and organizations as well as address longtime needs in Waldo County.

The \$7 million purchase, secured with bridge loans, will be ultimately financed through government vehicles designed for organizations like PCHC and in support of local economic development.

#### Why a whole campus to replace one clinic?

The broadest definition of PCHC's mission includes not just the provision of care to all—regardless of life circumstances—but tackling the social determinants of health in ways that truly benefit the lives of the communities we serve. That means working to open access to multiple types of care, addressing social needs like childcare, elder services, nutrition, education and wellness, and collaboration with community partners to advance all of these objectives. It means aligning our work with entities that share our values, it means that we live a model of continuous improvement so we can continue to provide access at our high standards of quality.

The campus at 21 Schoodic Drive allows us the greater capacity sorely needed by the current Seaport practice, with room to expand and thus improve both access to and improve access to care and meet community needs.



## Imagine PCHC as a human body. The backbone is primary care: It's what we do.

The musculature is our clinics and providers, making that care possible. But the nervous system, from the fingertips to the brain? That would be Information Systems. Every single thing PCHC does—each project we undertake, every patient record, all the codes that keep us reimbursed—is powered by IS.

Despite multiple extra challenges presented by COVID, increasing cybersecurity threats and upgrades needed in the ever-more connected and competitive healthcare technology environment, PCHC's Information Systems group had a successful year in 2021.

### Among the highlights:

- The long-awaited practice management upgrade was completed on schedule and budget after a year of preparation and investment.
- The Seaport EMR migration project was completed and running after many months of prep.
- Technology that allows patients to self-schedule, check in from home and handle co-pays, was successfully implemented at Brewer Medical Center and Penobscot Pediatrics.
- A pilot of an exciting new AI-driven diagnostic tool was completed. Many walk-in clinic providers found it helpful and requested continued use. The product will be expanded throughout PCHC, first at the Adult Wellness Center.
- Upgrades and patches on multiple systems were planned, executed, tested and successfully running on schedule and budget.
- Security fixes and proactive steps to protect systems rolled out throughout the year.
- Guest WI-Fi—an important satisfier in service experience—was installed at several practices, including Bridge, Seaport and Dental.
- Multi-factor authentication, a cumbersome but important security step when working with cloud-based services, was implemented for Teams (the Microsoft product used by most of the PCHC workforce for communication and collaboration).
- The bi-annual cybersecurity tabletop exercise was completed with Legal, Risk, Marketing and Operations staff.

The “human factor” in Information Systems had a stellar year as well as the department notched multiple recognitions and certifications. New hires had an immediate impact, particularly on internal service requests. Robert Zavaleta was promoted to Director of IS Operations and Data Analytics.

Cybersecurity

Guest  
WI-Fi

EMR  
migration

self-  
scheduling  
tool

investment

Multi-factor  
Authentication

diagnostic  
tool

## Safely housing and caring for our guests at Hope House

The pandemic slogged on—and so did the epidemic (worsened by COVID) of homelessness and its contributing factors including mental health crises, substance use, family rupture, job loss and economic disenfranchisement. Hope House Health and Living Center was challenged as never before to provide emergency shelter, navigation and healthcare to a growing population with increasingly complex needs.

Bolstered by MaineHousing and a full-facility lease at the Odlin Road Ramada Inn, and in collaboration with the Ramada's management team, the city of Bangor, and multiple other partners, for the majority of the year Hope House sheltered and fed up to about 180 people. Perhaps unsurprisingly, the Ramada served as a laboratory of sorts for how we may best serve our unhoused neighbors. When given the agency, privacy and safety of individual rooms, more guests were able to improve their health and navigate more successfully into transitional or permanent housing. Using this model, as funding for the Ramada lease was ending, Hope House renovated its original home at 179 Corporate Drive. Individual "sleeping pods" provided more COVID-safe sleeping quarters that also improved privacy for guests. Renovated bathrooms and common areas including the dining room allowed for additional privacy and social distancing. The renovated

*"I got to understand those experiencing homelessness, substance abuse or mental health issues better, I plan to use that knowledge for the greater good of my community in the future."*



PCHC Doty Woodward  
Community Award Honoree  
Free Martin  
Ramada Inn, Bangor

shelter holds 56 guests, 10 fewer than pre-pandemic levels, but in what we now know are better accommodations.

In 2021, Ramada General Manager Free Martin—a champion for Hope House and an outspoken advocate for homeless services—was honored with the Doty-Woodward Award for Community Service by the PCHC Board. He continues to be a vocal supporter.

Housing our "neighbors without walls" continues to be a flashpoint in public discourse, in Bangor as everywhere. Despite this, the collaborative homeless response system here is functioning, and with broader cooperation and a willingness to seek innovative solutions, 2022 might prove to be a turning point in this important, difficult work.



## Better equipped to face changes

Sensing big changes in dental care landscape, including demographic, regulatory and technical shifts, PCHC in 2021 launched a significant and impactful restructuring of its 46-chair dental practice. The change involved some layoffs, reimagined workflows, new care-delivery processes and commitment to a new practice model. Six months later, positive evidence of progress is abundant.

It became clear throughout 2021 that the 46-chair Penobscot Community Dental was not ready for approaching change, including:

- Greater need for access with the MaineCare expansion to adult dental (coming in mid-2022)
- Less need for dental residency programs as the University of New England expanded opportunities
- A growing shift to the dental-therapist model, which PCHC, as the only employer of a dental therapist on the East Coast, should pioneer in Maine
- Increased difficulty in recruiting and retaining dental staff

Additionally, practice culture and workflows posed an obstacle to change management and evolution at the practice.

The solution—to remake PCHC Dental from the ground up—was seismic, particularly as it involved laying off about three dozen team members. General dentistry was paused, and it was announced that this

year's class of dental residents would be the last. The practice shut for several days, and there was particular impact on walk-in care.

Since then:

- Multiple team members reapplied for newly imagined roles and rejoined the practice.
- Hours were adjusted; Fridays are now reserved for training, deep-cleaning and other repairs and leadership meetings, which means Monday-Thursday can be completely devoted to patient care.
- A new on the job training model for dental assistants is about to graduate its second class.
- A new executive clinical director for Dental with experience with FQHCs has been hired.
- Several other new dentists have joined the team

While initially traumatic, the restructuring of the dental practice has made it more resilient and better equipped to face coming external changes.



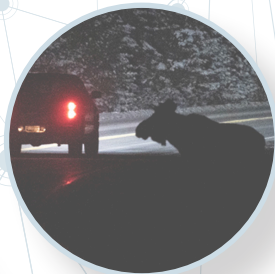
## *As a community health center focused on underserved communities in Maine,*

PCHC has a unique view of the social determinants of health, including the nearly complete lack of access to healthcare in many rural areas. In our state, with a land mass which could comfortably hold New Hampshire, Vermont and most of Massachusetts, that lack of access is the norm. PCHC is privileged to operate the Jackman Community Health Center, which offers a laboratory in frontier healthcare even as it cares for about 850 people in an area about the size of Rhode Island, the nearest hospitals at least 50 miles away in either direction.

The federal grant-funded parahealth project in Jackman will allow us to provide 24-7 care to the people in this remote community, using telehealth to advise and guide paramedics at the clinic when the clinic's sole physician is not present.

The project really got off the ground in 2021, meeting the following milestones:

- The education and certification process for paramedics to become certified in ambulatory infection prevention was created.
- Paramedics spent the entire year working at the clinic under the supervision of Pat Doyle, M.D. They also became oriented with clinic operations and were the sole resource for patient intake for patients seeking care after hours.
- Collaboration with the community has resulted in an emergency response protocol for dispatching paramedics and creation of a community oversight program. The Somerset County community-needs assessment is being followed as the program develops to make sure the program addresses those needs.
- Equipment has been installed to ensure adequate telehealth processes.
- Legal agreements underpinning the effort are underway and many have been completed.
- Workflow has been developed for an additional site (with a similar but not identical model) at the Winterport Community Health Center.
- Plans are underway for handling prescription medication during after-hours care at the clinic.
- Final approval for the program was received from Maine Emergency Medical Services, including clear definitions and scope of work for paramedics—both during the day when the physician is present



## *Resiliency was the name of the game at Unlimited Solutions Clubhouse in 2021.*

Clubhouse, providing vocational and life skills to people recovering from mental illness, faced more than the usual operational challenges from COVID; as many of its usual programs are in-person and the lingering pandemic and multiple surges made everything more difficult. However, the team—and all the members! – coped creatively to ensure continuity and maximize results.

Unlimited Solutions is just one of hundreds of Clubhouses worldwide who help thousands of people transition to the world of work while working toward independent living. The “work-ordered day” of Clubhouse ensures that groups and individuals work together to manage and maintain the Clubhouse and its programs.

Meanwhile, there are plenty of supports and learning opportunities around finding and keeping employment, securing independent housing, enrolling in education programs and maintaining a healthy lifestyle. Clubhouse members even shop for and cook each other, set up events and manage their own social media, communications, and fundraising events. The benefits are not only for members; by placing valuable workers in paid employment at dozens of local businesses and organizations, Clubhouse also strengthens the local economy.

### **Here are some of 2021's impressive highlights:**

In 2021, Clubhouse members earned \$651,486.\*

- Eleven members worked at transitional employment sites including Sweep And Slate and Chick-Fil-A
- Another 52 Members worked in supported and independent jobs at nearly 30 businesses and nonprofits from the University of Maine to Bangor Savings Bank (and PCHC)
- Fourteen members attended college or university programs
- Eleven members attended other higher-ed programs
- Despite COVID, the number of unique individuals served was 143, and the average daily attendance was 24
- A whopping 100 percent of our members worked on healthy lifestyles, including Wellness Walks, health classes and other wellness activities throughout the year.

\* Earned income numbers are based on members that volunteer information and estimates



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A grant from the **Coverys Community Healthcare Foundation** supported an innovative program to incorporate primary care pharmacists into the care teams to educate patients about their disease, their medication, self-care and when to call their provider about symptoms. The program specifically focused on patients with substance use disorder, hepatitis C, and diabetes and had an additional goal of reducing emergency room visits. The “collaborative visit model” was supported by robust data collection and other quality improvement processes and met a number of goals. While the project was hampered by COVID-19 restrictions, it proved again the value of pharmacists as part of primary care teams educating and supporting patients with challenging diseases.

A grant from the **Davis Family Foundation** supported the purchase of updated equipment and software for infant hearing tests—necessary and time-sensitive procedures. Thanks to this generous grant, the Warren Center for Speech and Hearing, which is the only hearing center north of Waterville that specializes in infant hearing tests, was able to continue to provide this important service to families regardless of their ability to pay or insurance status.

A gift from the **Lunder Foundation**, Peter and Paula Lunder Family, in honor of Dr. Noah Nesin, supports the WOW Clinic. Specifically, the grant helps fund a Medical Support Assistant in the childhood obesity program.

A grant from the **City of Bangor** provided more than \$80,000 to renovate Hope House’s emergency shelter and create more COVID-safe sleeping quarters and common areas. The new “sleeping pods” at Hope House also provide a measure of privacy and dignity to our guests.

- CareQuest
- City of Bangor
- Coverys Community Healthcare Foundation
- Davis Family Foundation
- Direct Relief
- Family Planning Association of Maine
- Federal Centers for Disease Control & Prevention (CDC)
- Federal Department of Health & Human Services
- Federal Emergency Management Agency (FEMA)
- Harvard Pilgrim
- Health Resources and Services Administration (HRSA)
- KeyBank Foundation
- Lunder Foundation
- Maine Cancer Foundation
- Maine Centers for Disease Control & Prevention (CDC)
- Maine Department of Health and Human Services
- Maine Health Access Foundation (MeHAF)
- Maine State Housing Authority
- National Institute on Drug Abuse (NIDA)
- New Balance Foundation
- Sidney R. Baer, Jr. Foundation
- Skowhegan Savings Charitable Foundation
- Substance Abuse Mental Health Services Administration (SAMHSA)
- TJX Foundation
- United States Department of Agriculture
- United Way of Eastern Maine

## Unique journeys and lessons to share

Follow us on Instagram @HumansofPCHC



## *Our Mission*

We provide comprehensive, integrated primary health care services for all to improve the health and wellbeing of our patients and the Maine communities we serve. PCHC believes deeply in the value of every human being and that fundamental belief informs our actions. We strive to ensure the best possible patient experience for all patients and seek to improve access to high-quality health care. Our policies and decisions shall not create barriers to accessing care, and our goal always is to improve access for the most vulnerable among us.

## *Our Vision for Success*

A community in which everyone has access to quality, cost-effective health care, where people are empowered to advocate for their personal goals and needs and are supported by community-based resources, and where health encompasses physical and emotional wellness, personal dignity and a sense of belonging.

## *Values*

Patient-Centered Care | Respect | Passion | Quality | Innovation | Collaboration



Penobscot Community  
Health Care