



Formerly McDowell Group

SOUTH PENINSULA HOSPITAL COMMUNITY SURVEY 2025

May 2025

PREPARED FOR:

South Peninsula Hospital

TABLE OF CONTENTS

Executive Summary	1
Satisfaction	1
Quality of Care.....	2
Meeting Community Needs	3
Respondent Suggestions and Comments	5
Introduction and Methodology	7
Introduction.....	7
Methodology	7
Telephone Survey Results	12
Use of Services.....	12
Satisfaction with South Peninsula Hospital	14
Quality of Care.....	18
Community Care Needs	19
Community Perceptions of South Peninsula Hospital	20
Bond Proposition.....	21
Respondent Suggestions for South Peninsula Hospital	27
Respondent Characteristics.....	29
Online Survey Results	32
Use of South Peninsula Hospital Services	32
Satisfaction with South Peninsula Hospital	33
Quality of Care.....	35
Community Care Needs	35
Community Perceptions of South Peninsula Hospital	37
Bond Proposition.....	37
Respondent Suggestions for South Peninsula Hospital	42
Respondent Characteristics.....	44
Appendix	46
Phone Survey Verbatim Responses	46
Online Survey Verbatim Responses	57
Survey Instruments	67

Executive Summary

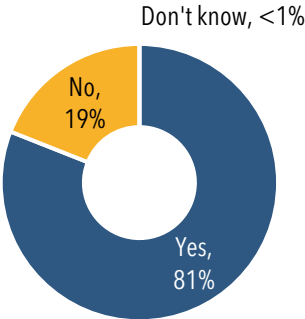
South Peninsula Hospital (SPH) contracted with McKinley Research Group (MRG) to survey its service region residents. The project included a phone survey and an online survey, with the phone survey results most representative of the service region. A total of 409 randomly selected South Peninsula residents completed the phone survey, and 235 individuals completed the online survey. Phone survey results were weighted by age and gender to adjust for differences between the survey population and the population of the South Peninsula region. The following are key findings of the phone survey and respondent recommendations from the telephone and online surveys.

Satisfaction

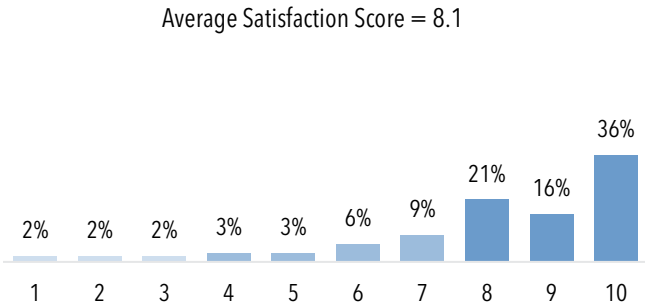
South Peninsula Hospital Care and Services

Survey respondents receiving health care or services from SPH in the past three years were asked about their level of satisfaction with the care they received. Region residents are largely satisfied with the care received. Among respondents receiving care within the past three years, 73% were satisfied (giving scores of 8,9, or 10), 21% were moderately satisfied (middle scores of 4, 5, 6, or 7), and 6% were unsatisfied (scores of 1, 2, or 3). The average satisfaction score was 8.1 out of 10.

Have you received any type of health care or services from South Peninsula Hospital in the past three years? (n=409)



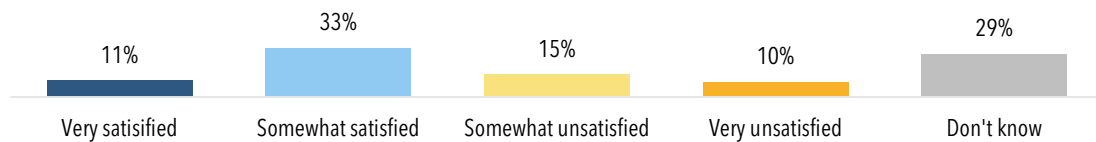
Using a scale of 1 to 10 where 10 means extremely satisfied and 1 means extremely dissatisfied, what is your overall level of satisfaction with the care received at SPH? (n=349)



Management

Overall, residents are not as satisfied with the performance of the board and management of SPH as they are with care and services. While 44% of service area residents are either very or somewhat satisfied with the performance of the board and management, 25% are unsatisfied, and nearly one-third (29%) reported they did not know their level of satisfaction with the performance of the board and management of SPH.

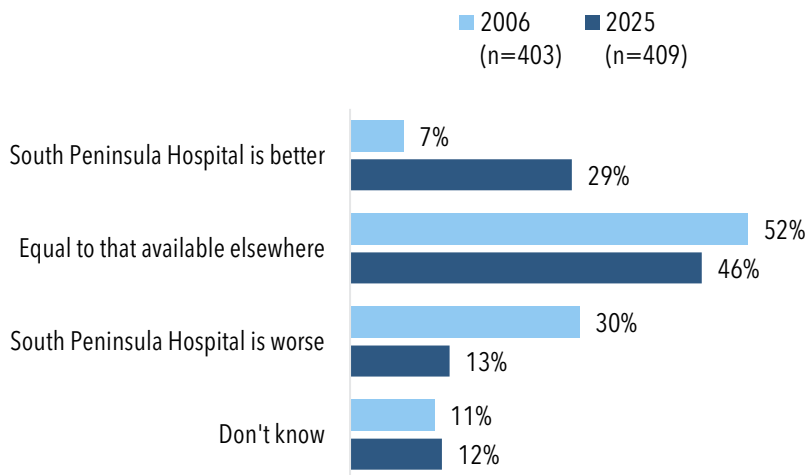
Are you very satisfied, somewhat satisfied, somewhat unsatisfied, or very unsatisfied with the performance of the board and management of South Peninsula Hospital? (n=409)



Quality of Care

Most respondents favorably view the quality of care and services at SPH compared to other providers, with 46% indicating SPH care is equal to that available elsewhere, and 29% saying it is better. Compared to findings from a 2006 community phone survey commissioned by SPH, a greater percentage of respondents reported that care and services at SPH are better than those elsewhere (7% in 2006 compared to 29% in 2025).

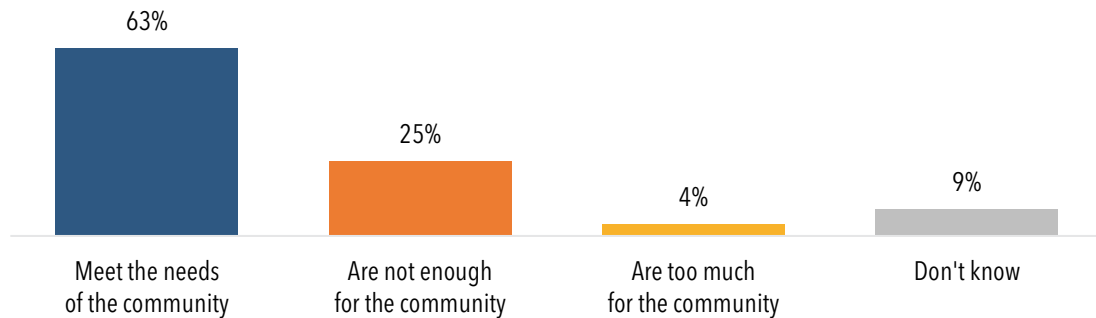
From what you've experienced or heard from others, would you say the overall quality of care and services at SPH is better, worse, or equal to that available elsewhere?



Meeting Community Needs

About two-thirds (63%) of survey respondents feel the services SPH provides meet the community's needs, and one-quarter (25%) feel they are not enough for the community. The remainder think the services are too much for the community (4%) or did not know (9%).

From what you've experienced or heard from others, would you say overall the services provided by SPH meet the needs, are not enough, or are too much for the community? (n=409)

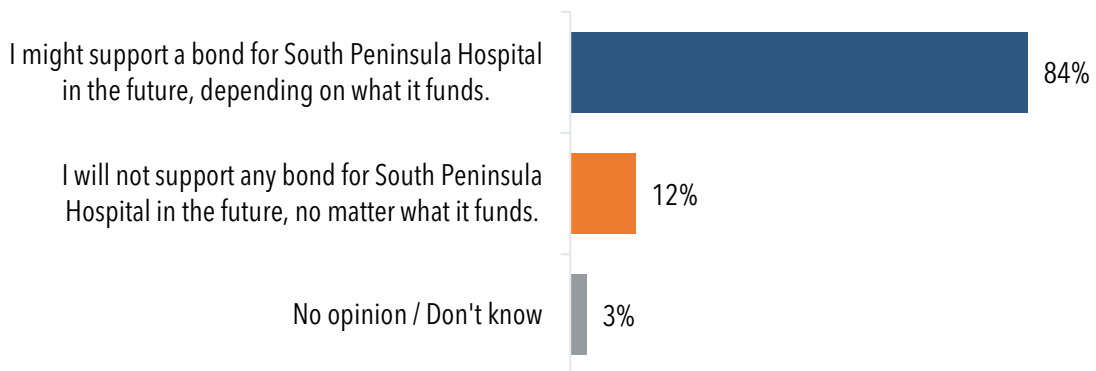


Support

FUTURE SUPPORT

Most respondents are open to supporting future bonds for South Peninsula Hospital. Eighty-four percent of respondents said they might support a bond for SPH in the future, depending on what it funds. Twelve percent of respondents said they will not support any bond for SPH in the future, no matter what it funds.

Which of the following do you agree with most? (n=409)

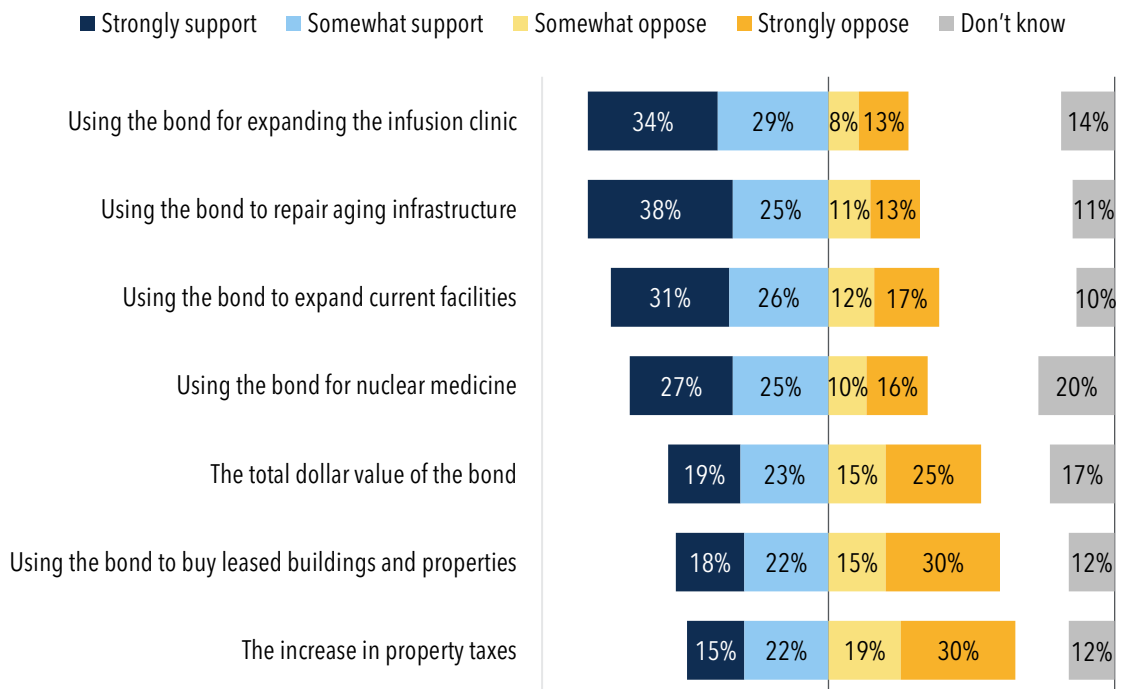


SUPPORT FOR PAST BOND

The 2024 Kenai Peninsula Borough general election ballot included a bond proposition to borrow up to \$38.5 million for building maintenance, facility and service expansion, and property acquisition for SPH. The bond failed. The survey included seven questions about specific aspects of the bond. Over half of survey respondents were supportive of using bond funds to expand the infusion clinic (63%), repair aging infrastructure (63%), expand current facilities (57%), and for nuclear medicine (52%). Using the bond to buy leased buildings and property was the least favored use of the bond, with 40% supportive. Respondents were split on their level of support or opposition to the total dollar value of the bond (42% supportive and 40% opposed). About half (49%) opposed the increase in property taxes associated with the bond.

For all bond items, respondents renting their homes were more likely to support a bond than homeowners, and female respondents were more likely to support bond items than male respondents. Except for increasing property taxes, those in the youngest age bracket showed higher levels of support for all bond items than those in the middle and older age brackets.

The 2024 Kenai Peninsula Borough general election ballot included a bond proposition to borrow up to \$38.5 million for building maintenance, facility and service expansion, and property acquisition for SPH. The bond would have increased the property tax for people living in the SPH Service Area by \$67 per \$100,000 assessed property value. The bond proposition failed. What is your level of support for or opposition to...



Respondent Suggestions and Comments

Phone and online survey participants were asked if they had suggestions for how SPH can better serve their community. The most common themes are presented below. The full list of verbatim responses for both surveys can be found in the Appendix.

Phone Survey

IMPROVED CARE AND EXPANDED SERVICES

Suggestions included hiring more medical staff, reducing appointment wait times, and expanding clinic hours. Many noted difficulties in accessing care due to a shortage of providers or long delays, leading some to seek care in Anchorage or Soldotna. Respondents also called for more comprehensive specialty care and mental health services to be available locally.

FINANCIAL TRANSPARENCY, COST CONCERNS, AND BOND COMMUNICATION

A strong theme was the need for affordability, with complaints about high costs and poor price transparency. Many respondents criticized the bond proposal process, calling for better communication, itemized breakdowns, and justification for spending (especially on real estate).

IMPROVED MANAGEMENT, LEADERSHIP, AND DECISION-MAKING

Another theme was dissatisfaction with SPH management, including criticism of board spending decisions, organizational priorities, and exclusion of independent providers. Some respondents supported SPH but emphasized the need for better leadership and accountability.

IMPROVED PATIENT EXPERIENCE: CUSTOMER SERVICE, COMMUNICATION, AND BILLING

Respondents asked for better customer service, staff training on empathy and communication, and clearer billing practices. Some highlighted negative personal experiences and emphasized the need for more compassionate and competent staff.

Online Survey

STAFFING ISSUES AND PROVIDER QUALITY

Numerous comments addressed staffing problems, including unqualified hires, drug testing failures, rude staff, poor customer service, and high turnover. Community members demanded better screening, retention of quality providers, and an end to reliance on part-time or traveling doctors. Many also called for better communication and training for front-line staff.

HIGH COSTS OF CARE AND CONCERNS ABOUT FINANCIAL MISMANAGEMENT

Many respondents expressed concern over perceived financial mismanagement at SPH, with comments touching on inflated property purchases, high administrative salaries, and expensive care and services compared to other facilities. Many called for reduced patient costs, increased transparency, and improved fiscal responsibility.

FOCUS ON CORE SERVICES OVER EXPANSION

Respondents urged the hospital to stop adding specialty services that they feel do not align with the needs of a rural community. They suggested improving core services like family care, emergency services, pediatric care, mental health services, and long-term care. Many did not feel it was appropriate for SPH to provide plastic surgery or offer nuclear medicine options.

INFRASTRUCTURE, FACILITIES, AND SAFETY CONCERNS

Respondents shared concerns about the condition of current facilities, and called for infrastructure upgrades, better pediatric physical therapy space, improved parking, and safer loading zones. Some highlighted high costs for developing a childcare facility, and others felt that infrastructure upgrades should not be contingent on bond proposals.

Introduction and Methodology

Introduction

South Peninsula Hospital (SPH) contracted with McKinley Research Group (MRG) in spring 2025 to conduct a survey of SPH service area residents regarding attitudes and opinions about overall quality of care, satisfaction with services, support for specific aspects of a recent bond proposition, management, and SPH's ability to meet community needs.

Methodology

The survey was conducted via two methods: telephone and online. The survey questionnaire for both was designed by MRG staff in cooperation with SPH staff. Several questions from a 2006 survey commissioned by SPH and conducted by Craciun Research were repeated to gauge trends on topics of interest.

Both the telephone and online surveys had one screening question. Respondents had to reside in a community within the SPH service area to be eligible for the survey. Areas of questioning included use of SPH facilities, satisfaction with SPH services, community care needs, views on the hospital board, future of hospital growth, and support for or opposition to an unsuccessful hospital bond proposition.

Telephone Survey

The phone survey sample was randomly drawn from an appropriate mix of cell and landline numbers purchased from Dynata, a national supplier of phone samples. Surveys were completed with 409 randomly selected residents living in the Southern Kenai Peninsula. The survey was conducted from April 11 to April 26, 2025. Multiple callback attempts were made to maximize response rates.

The maximum margin of error at the 95% confidence level is $\pm 4.7\%$ for the full sample, with increased margins of error for subsamples.

The phone survey sample was compared to the Kenai Peninsula Borough's adult population by gender and age. As with most random phone surveys, older residents and female residents were more likely to participate than younger and male residents. The average age of respondents was 57 years old, whereas the average age of borough residents was 51 years old; 57% of survey respondents were female compared to the 48% in the borough population. To ensure representativeness, survey results were weighted by age and gender. The following table

presents the gender and age distribution of the phone survey sample alongside the gender and age distribution of the Kenai Peninsula Borough.

Table 1. Telephone Survey Sample Compared to the Kenai Peninsula Borough Population (%)

n=409	Survey Sample (%)	Kenai Peninsula Borough Population (%)
Gender		
Female	57	48
Male	43	52
Age		
18-24	2	10
25-34	11	14
35-44	15	16
45-54	13	15
55-64	13	17
65-74	28	18
75+	18	10
Average age	57	51

Source: U.S. Census Bureau

SUBGROUP ANALYSIS

Survey data were assessed for differences by age group, gender, home ownership, SPH care, and household employment with SPH. Comparisons by subgroup are presented in select tables. Results are omitted when subgroup sample sizes are too small. Statistically significant differences between subgroups are addressed in the text accompanying each table where relevant.

COMPARISON WITH PAST SURVEY

This report compares results from the 2006 SPH survey conducted by Craciun Research to the 2025 phone survey results. Differences in question wording, where applicable, are noted. Comparisons should be interpreted with caution due to differences in sample sizes and demographic characteristics.

This report includes survey results for questions asked in both the 2006 and 2025 phone surveys. While the results can be interesting, caution is advised when comparing the 2006 and 2025 surveys. Methodological differences can account for some changes in results. For instance, the methodology of the 2006 survey requested that the survey be taken by “the healthcare decision maker in the household,” whereas the 2025 survey asked questions of the individual who answered the survey call. The 2006 methodology resulted in a much higher percentage of

females taking the survey in 2006. As shown in the results of the 2025 survey, gender has a strong correlation with attitudes for certain questions.

Online Survey

An online survey was incorporated into the project to allow residents who may not have been included in the phone survey sample the opportunity to express their views.

The online survey closely resembled the phone survey, with a few minor changes in wording to reflect the change from phone to online format. The online survey was conducted between April 24 and May 11, 2025. SPH promoted the survey through paid ads, organizational communications channels, and public announcements. Ads were placed on Facebook, public and commercial radio, and the local newspaper. The survey was promoted through SPH's monthly newsletter, website, and social media accounts. The survey was announced at Borough assembly meetings and the Homer Economic Development Advisory Commission.

A total of 235 individuals completed the survey. The landing page requested that phone survey participants refrain from participating; however, some respondents may have participated in both despite the guidelines. To limit multiple survey entries, cookies were used to limit participation to one survey per device, although this setting would not prevent the most motivated respondents from submitting multiple entries. The total number of duplicates is suspected to be low but is unknown as respondents were not personally identified.

The online survey represents a self-selected sample. Open-call web-based surveys are susceptible to bias, and the results from the online survey should not be considered statistically representative of the SPH service area. Residents with the strongest opinions, whether they were frequent health care users, SPH employees, or felt strongly about the bond, were likely more inclined to participate. The difference in employment at the hospital between the phone survey (13%) and the online survey (23%), and the tone of the open-ended comments from the online survey are particularly indicative of this effect.

The online survey sample differed from the Borough population by gender and age. A margin of error does not apply to an online survey, as it is not a random sample, and the results have not been weighted.

Table 2. Online Survey Sample Compared to Kenai Borough Population (%)

	Phone Survey Sample (%) n=409	Online Survey Sample (%) n=235	Kenai Borough Population (%)
Gender			
Female	57	69	48
Male	43	29	52
Other	-	2	-
Age			
18-24	2	1	10
25-34	11	8	14
35-44	15	12	16
45-54	13	15	15
55-64	13	17	17
65-74	28	26	18
75+	18	20	10
Average age	57	59	51

Source: U.S. Census for age and gender

Online survey tables are presented overall, and by gender, age, and home ownership status. The online survey results are not weighted, and online survey results should not be extrapolated to the greater population. They should be viewed as the results of the segment of the population more engaged on this issue, and who may have greater concern, knowledge, or stake in the outcome than the public at large.

No comparisons were made between the 2025 online survey and the 2006 or 2025 phone surveys.

Organization and Formatting

Survey results are presented first for the phone survey, then for the online survey. To help orient the reader, the page numbers for the phone survey chapter are in **blue** and are in **pink** for the online survey. Verbatim responses to open-ended questions and both survey instruments are included in the Appendix.

Within tables, sample sizes are indicated by the letter *n*. Some columns or rows may not sum to 100% due to rounding or multiple responses to survey questions being allowed.

Telephone Survey Results

Telephone Survey Results

Use of Services

Respondent Use of SPH Care and Services

Survey participants were asked whether they had received any type of health care or services from South Peninsula Hospital (SPH) in the previous three years. Eighty-one percent of respondents had received care, 19% had not, and <1% didn't know. Female respondents were more likely to have received care than male respondents (85% compared to 77%). Those in the oldest age bracket were more likely to have received care (86%) than those in the middle and younger age brackets (81% and 71%, respectively).

Table 3. Have you received any type of health care or services from South Peninsula Hospital (SPH) in the past three years? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240
Yes	81	77	85	71	81	86
No	19	23	15	29	19	14
Don't know	<1	-	<1	-	-	<1

Respondent Use of Care and Services from Other Providers

Those who had not received care from SPH were asked if they had received health care or services from other providers in the previous three years. Two-thirds had received care from other providers, 32% had not, and 1% didn't know. Those in the youngest age bracket were significantly more likely to have received care from other providers (85%) than those in the middle and older age brackets (58% and 55%, respectively).

Table 4. Have you received any type of health care or services from other providers in the past three years? (%)

BASE: Those who had not received care from SPH

	Base	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=60	n=36	n=24	n=11	n=20	n=29
Yes	67	64	71	85	58	55
No	32	34	29	15	42	42
Don't know	1	2	-	-	-	4

Reasons for Using Other Providers

Those who had received care from other providers were asked why they chose another facility, rather than SPH. The most mentioned reason was respondents using care in a better location (29%), followed by respondent using Tribal health or Veterans Affairs facilities (23%), and the cost of SPH care (19%). Seventeen percent of respondents cited “skill/experience/specialty was better elsewhere,” and 16% mentioned other facilities having better scheduling options.

Table 5. Why did you choose another facility for those services, rather than SPH? (%)

BASE: Those who received health care or services from other providers in the past three years

Unweighted Base	Base n=35
Better location	29
Use Tribal health or VA facilities	23
Cost	19
The skill/experience/specialty was better elsewhere	17
The schedule was better, could take me sooner	16
I didn't know SPH offered the service	6
Insurance-related reasons	4
Use alternative medicine	3
The personal care better elsewhere, they are nicer	2
Don't know/refuse	2

Satisfaction with South Peninsula Hospital

Overall Level of Satisfaction with SPH Care

Respondents who received care at SPH were asked to share their level of satisfaction with care received on a scale of 1 to 10, with 10 meaning extremely satisfied and 1 extremely dissatisfied. Just fewer than three-quarters of respondents (73%) were satisfied (giving scores of either 8, 9, or 10). Twenty-one percent expressed moderate satisfaction (middle scores of 4, 5, 6, or 7), and 6% were unsatisfied.

Female respondents were more likely to be satisfied with care received at SPH than male respondents (79% compared to 66%, respectively). Female respondents were significantly more likely to be *extremely* satisfied than male respondents (47% extremely satisfied, compared to just 25% of male respondents).

Table 6. Using a scale of 1 to 10 where 10 means extremely satisfied and 1 means extremely dissatisfied, what is your overall level of satisfaction with the care received at SPH? (%)

BASE: Those who received care at South Peninsula Hospital

	Base	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=349	n=138	n=211	n=43	n=95	n=211
Satisfied TOTAL	73	66	79	67	72	75
10 - Extremely satisfied	36	25	47	39	33	37
9	16	21	11	10	16	18
8	21	20	22	19	23	21
Moderate TOTAL	21	26	17	29	21	17
7	9	12	7	19	5	8
6	6	8	4	6	10	3
5	3	3	2	2	4	2
4	3	2	3	2	2	3
Unsatisfied TOTAL	6	8	4	3	7	7
3	2	1	2	2	1	2
2	2	3	1	-	1	3
1 - Extremely dissatisfied	2	4	1	2	4	2
Average	8.1	7.7	8.5	8.2	7.9	8.1

2006-2025 Comparison

Survey participants were asked a question about overall level of satisfaction in 2006, with the question modified slightly in the 2025 survey. In 2006, the question was phrased, “Using a scale of 1 to 10 where 10 means you are extremely satisfied and 1 means you are extremely dissatisfied, describe your level of satisfaction with the care received at this hospital. You may use any number between 1 and 10.”

Results were consistent from 2006 to 2025, with 74% of respondents satisfied with SPH care received in 2006 and 73% satisfied in 2025. In 2006, the average satisfaction score was 8.0, just slightly lower than 8.1 in 2025.

Table 7. Using a scale of 1 to 10 where 10 means extremely satisfied and 1 means extremely dissatisfied, what is your overall level of satisfaction with the care received at SPH? (%)

BASE: Those who received care at South Peninsula Hospital

Unweighted Base	2006	2025
	n=224	n=349
Satisfied TOTAL	74	73
10 – Extremely satisfied	26	36
9	21	16
8	27	21
Moderate TOTAL	23	21
7	8	9
6	5	6
5	8	3
4	2	3
Unsatisfied TOTAL	3	6
3	1	2
2	<1	2
1 – Extremely dissatisfied	1	2
Average	8.0	8.1

Sources: Craciun Research and McKinley Research Group

Likelihood of Using SPH Services

Those who had received care at SPH were asked how likely their household would be to use SPH for medical care if needed, on a scale of 1 to 10, with 1 meaning extremely unlikely and 10 meaning extremely likely. Eighty-five percent of respondents said they were likely (giving a score of 8, 9, or 10). Among those who were likely to use SPH, the highest percentage were extremely likely (69%), followed by 9% who chose a likelihood of "9" and 7% who chose a likelihood of "8."

Those in the youngest age bracket were slightly more likely to use SPH for medical care (92%) than those in the middle and older age brackets (84% and 81%, respectively).

Table 8. Using a scale of 1 to 10 where 10 means extremely likely and 1 means extremely unlikely, how likely are you or your household to use SPH if medical care is needed? (%)

BASE: Those who received care at South Peninsula Hospital

	Base	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=349	n=138	n=211	n=43	n=95	n=211
Likely TOTAL	85	82	87	92	84	81
10 - Extremely likely	69	61	76	72	77	62
9	9	14	5	13	6	10
8	7	8	6	7	2	9
Moderate TOTAL	10	9	10	6	12	10
7	4	6	2	4	5	3
6	1	-	2	-	2	1
5	3	3	4	-	4	4
4	1	-	2	2	1	1
Unlikely TOTAL	6	9	3	2	4	9
3	1	1	1	-	-	2
2	1	1	-	-	-	1
1 - Extremely unlikely	4	7	2	2	4	6
Average	8.9	8.6	9.2	9.3	9.1	8.6

2006-2025 Comparison

Survey participants were asked how likely their household would be to use SPH for medical care in the 2006 SPH survey. The likelihood of respondents using SPH for medical care increased significantly from 2006 (64% likely) to 2025 (85% likely).

Table 9. Using a scale of 1 to 10 where 10 means extremely likely and 1 means extremely unlikely, how likely are you or your household to use SPH if medical care is needed? (%)

BASE: Those who received care at South Peninsula Hospital

	2006 n=219	2025 n=349
Likely TOTAL	64	85
10 - Extremely likely	36	69
9	11	9
8	17	7
Moderate TOTAL	28	10
7	6	4
6	5	1
5	14	3
4	3	1
Unlikely TOTAL	8	6
3	1	1
2	1	1
1 - Extremely unlikely	6	4
Average	7.6	8.9

Quality of Care

Overall Quality of Care

Asked if overall quality of care and services at SPH is better, worse, or equal to that available elsewhere, 46% of respondents said SPH care is equal to that available elsewhere, 29% said SPH is better, 13% said SPH is worse, and 12% didn't know.

Table 10. From what you've experienced or heard from others, would you say the overall quality of care and services at SPH is better, worse, or equal to that available elsewhere? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240
SPH is better	29	27	30	33	25	28
Equal to that available elsewhere	46	43	49	52	42	46
SPH is worse	13	16	10	4	18	15
Don't know	12	14	11	11	15	11

2006-2025 Comparison

Respondents were asked about the quality of SPH care and services compared to other facilities in the 2006 survey with slightly different wording: "Overall, would you say the quality of medical care and services available from South Peninsula Hospital is better, worse, or equal to that available elsewhere?" In the 2025 survey, respondents were asked, "From what you've experienced or heard from others, would you say the overall quality of care and services at SPH is better, worse, or equal to that available elsewhere?"

Table 11. From what you've experienced or heard from others, would you say the overall quality of care and services at SPH is better, worse, or equal to that available elsewhere? (%)

	2006	2025
	n=403	n=409
SPH is better	7	29
SPH is worse	30	13
Equal to that available elsewhere	52	46
Don't know	11	12

Community Care Needs

SPH Ability to Meet Community Needs

Survey participants were asked if the services provided by SPH meet the needs of the community, are not enough, or are too much for the community. Sixty-three percent of respondents said SPH services meet the needs of the community, 25% said SPH services are not enough, 4% said too much, and 9% didn't know.

Table 12. From what you've experienced or heard from others, would you say overall the services provided by SPH meet the needs, are not enough, or are too much for the community? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240
Meets the needs of the community	63	63	63	58	63	66
Are not enough for the community	25	18	32	31	22	23
Are too much for the community	4	6	1	3	5	3
Don't know	9	13	4	7	9	9

SPH Ability to Meet Future Community Needs

Respondents were asked if they think SPH services and facilities will need a large increase, slight increase, slight decrease, or large decrease to meet future community care needs. Just over three-quarters of respondents (77%) thought SPH services and facilities will need either a slight increase (47%) or a large increase (30%). Just 7% of respondents thought services and facilities would need a decrease, and 14% didn't know.

Female respondents were more likely to believe SPH services and facilities will need a *large* increase to meet community needs than male respondents (37% compared to 23%). Those in the youngest age bracket were significantly more likely to believe SPH services and facilities will need an increase (90%) than those in the middle and older age brackets (76% and 71%, respectively).

Table 13. Do you think SPH services and facilities will need a large increase, slight increase, slight decrease, or large decrease to meet future community healthcare needs? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240
Increase TOTAL	77	71	84	90	76	71
Large increase	30	23	37	36	25	30
Slight increase	47	48	46	54	51	41
Decrease TOTAL	7	8	5	3	5	9
Slight decrease	5	5	4	3	4	6
Large decrease	2	3	<1	-	1	3
Don't know	14	18	11	6	17	17

Community Perceptions of South Peninsula Hospital

Satisfaction with SPH Board and Management Performance

Survey participants were asked about their level of satisfaction with the performance of the SPH board and management of SPH. Eleven percent of respondents were very satisfied, and 33% were somewhat satisfied. Female respondents were slightly more likely to be satisfied than male respondents (49% compared to 41%); those in the younger age bracket were significantly more likely to be satisfied than those in the middle and older age brackets (54% compared to 43% and 41%, respectively).

Table 14. Are you very satisfied, somewhat satisfied, somewhat unsatisfied, or very unsatisfied with the performance of the board and management of SPH? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240
Satisfied TOTAL	45	41	49	54	43	41
Very satisfied	11	10	13	13	10	12
Somewhat satisfied	33	31	36	41	33	30
Unsatisfied TOTAL	25	26	25	29	22	25
Somewhat unsatisfied	15	15	15	22	11	15
Very unsatisfied	10	10	10	8	11	10
Don't know	29	32	26	17	35	32

Bond Proposition

Respondents were asked a series of questions about support for a recent bond proposition. The 2024 Kenai Peninsula Borough general election ballot included a bond proposition to borrow up to \$38.5 million for building maintenance, facility and service expansion, and property acquisition for SPH. The bond would have increased the property tax for people living in the SPH Service Area by \$67 per \$100,000 assessed property value. The bond proposition failed. The following section includes responses for the 2025 survey. It also includes data from a question about supporting a tax increase for building private patient rooms from the 2006 survey commissioned by SPH.

Future Support for SPH Bond Proposition

Survey participants were asked about their level of support for a future South Peninsula Hospital bond. Eighty-four percent of respondents said they might support a bond for SPH in the future, depending on what it funds. Twelve percent of respondents said they will not support any bond for SPH in the future, no matter what it funds.

Female respondents were more likely to support a future SPH bond than male respondents (89% compared to 79%, respectively), and younger respondents were more likely to support a future SPH bond than those in the middle and older age brackets (91% compared to 79% and 83%, respectively).

Table 15. Which of the following do you agree with most? (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240	n=56	n=339
I might support a bond for South Peninsula Hospital in the future, depending on what it funds.	84	79	89	91	79	83	83	84
I will not support any bond for South Peninsula Hospital in the future, no matter what it funds.	12	17	6	7	16	12	9	12
No opinion	2	2	3	2	3	2	4	2
Don't know	1	1	2	-	2	2	5	1

Support for Specific Aspects of Bond Proposition

Respondents were asked about their level of support for using the bond to finance seven specific SPH activities. Tables detailing responses for each of the seven activities follow, with subgroup data provided for gender, age, and home ownership.

The highest level of support was for use of the bond for infrastructure repair and an expanded infusion clinic (both 63% overall support); the lowest level of support was for increased property taxes (37% overall support).

Table 16. SUMMARY TABLE: Support for specific aspects of bond proposition (%)

	Support TOTAL	Strongly support	Somewha t support	Oppose TOTAL	Somewha t oppose	Strongly oppose	Don't know
Use of bond for infrastructure repair	63	38	25	24	11	13	11
Use of bond for expanded infusion clinic	63	34	29	21	8	13	14
Expansion of current facilities	57	31	26	29	12	17	10
Use of bond for nuclear medicine	52	27	25	26	10	16	20
Dollar value of bond	42	19	23	40	15	25	17
Use of bond for purchase of leased properties	40	18	22	46	15	30	12
Increased property taxes	37	15	22	49	19	30	12

Subgroup Analysis

For all seven activities, female respondents were more likely to support use of a bond than male respondents. The difference in responses ranged from 6% (34% of male respondents supported increased property taxes versus 40% of female respondents) up to a 22% difference (47% of male respondents supported use of a bond to expand current facilities versus 69% of female respondents).

For all activities except for increasing property taxes, those in the youngest age bracket showed higher levels of support than those in the middle and older age brackets.

For all seven activities, respondents who were renting their homes were more likely to support a bond than homeowners.

USE OF BOND FOR INFRASTRUCTURE REPAIR

Use of the bond to repair aging infrastructure saw the highest level of strong support (38%), with 25% of respondents somewhat supporting, and a total of 63% expressing overall support. Twenty-four percent of respondents opposed this use of the bond and 11% didn't know.

Table 17. Please tell me your level of support for using the bond to repair aging infrastructure. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240	n=56	n=339
Support TOTAL	63	59	68	68	62	61	72	61
Strongly support	38	34	42	39	38	37	44	36
Somewhat support	25	25	26	29	24	24	28	25
Oppose TOTAL	24	29	20	22	24	26	15	27
Somewhat oppose	11	13	9	17	11	8	10	11
Strongly oppose	13	16	10	6	13	18	5	15
Don't know	11	12	10	6	13	12	13	10

USE OF BOND FOR EXPANDED INFUSION CLINIC

Sixty-three percent of respondents expressed overall support for using the bond to expand the infusion clinic (34% strongly supporting and 29% somewhat supporting). Twenty-one percent opposed the use of the bond for expansion of the infusion clinic, and 14% didn't know.

Table 18. Please tell me your level of support for using the bond for expanding the infusion clinic. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	Rent	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=56	n=115	n=240	n=56	n=339
Support TOTAL	63	57	70	72	61	61	72	61
Strongly support	34	29	40	44	27	36	48	32
Somewhat support	29	28	30	28	33	25	24	30
Oppose TOTAL	21	26	16	15	21	24	17	22
Somewhat oppose	8	8	8	10	8	7	13	7
Strongly oppose	13	18	8	5	13	18	4	16
Don't know	14	17	11	13	17	13	11	14

EXPANSION OF CURRENT FACILITIES

Fifty-seven percent of respondents showed overall support for using the bond to expand current facilities (31% strongly supporting and 26% somewhat supporting). Twenty-nine percent of respondents opposed using the bond to expand current facilities, and 10% didn't know.

Table 19. Please tell me your level of support for using the bond to expand current facilities. (%)

	Gender		Age			Home ownership		
	Total	Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240	n=56	n=339
Support TOTAL	57	47	69	68	56	53	75	53
Strongly support	31	26	37	40	32	27	47	28
Somewhat support	26	21	31	28	24	26	28	26
Oppose TOTAL	29	37	20	19	34	31	14	33
Somewhat oppose	12	16	8	14	15	10	8	14
Strongly oppose	17	21	12	6	19	22	6	19
Don't know	10	12	8	4	10	14	11	10

USE OF BOND FOR NUCLEAR MEDICINE

Just over half of respondents (52%) either strongly supported or somewhat supported use of the bond for nuclear medicine (27% strongly supporting and 25% somewhat supporting). Twenty-six percent opposed use of the bond for nuclear medicine, and 20% didn't know.

Table 20. Please tell me your level of support for using the bond for nuclear medicine. (%)

	Gender		Age			Home ownership		
	Total	Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240	n=56	n=339
Support TOTAL	52	48	56	59	54	47	54	51
Strongly support	27	22	32	36	22	25	33	25
Somewhat support	25	26	24	22	32	22	20	26
Oppose TOTAL	26	29	22	21	24	30	18	28
Somewhat oppose	10	10	10	13	10	9	13	10
Strongly oppose	16	19	12	8	13	21	4	18
Don't know	20	21	19	11	22	23	29	17

DOLLAR VALUE OF BOND

Forty-two percent of survey participants supported the total dollar value of the bond (19% strongly supporting and 23% somewhat supporting). Forty percent of respondents opposed the total dollar value of the bond, and 17% didn't know.

Table 21. Please tell me your level of support for the total dollar value of the bond. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240	n=56	n=339
Support TOTAL	42	36	48	47	41	40	47	41
Strongly support	19	15	23	24	16	18	27	16
Somewhat support	23	22	25	23	26	22	19	24
Oppose TOTAL	40	42	38	27	39	47	25	43
Somewhat oppose	15	13	18	13	15	16	14	16
Strongly oppose	25	29	20	14	24	30	11	28
Don't know	17	21	12	20	20	13	28	14

USE OF BOND FOR PURCHASE OF LEASED PROPERTIES

Forty percent of survey participants supported using the bond to buy leased buildings and properties (18% strongly supporting and 22% somewhat supporting). Forty-six percent of respondents opposed using the bond to buy leased buildings and properties, and 12% didn't know.

Table 22. Please tell me your level of support for using the bond to buy leased buildings and properties. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240	n=56	n=339
Support TOTAL	40	34	47	44	42	37	51	38
Strongly support	18	12	24	20	18	17	26	16
Somewhat support	22	21	23	24	24	20	25	22
Oppose TOTAL	46	50	41	42	48	46	30	49
Somewhat oppose	15	18	13	15	17	14	11	16
Strongly oppose	30	32	28	26	30	33	19	34
Don't know	12	14	9	5	10	16	19	10

INCREASED PROPERTY TAXES

Thirty-seven percent of respondents supported an increase in property taxes (15% strongly supporting and 22% somewhat supporting). Forty-nine percent of respondents opposed an increase in property taxes, and 12% didn't know.

Table 23. Please tell me your level of support for the increase in property taxes. (%)

	Gender			Age			Home ownership	
	Total	Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=409	n=174	n=235	n=54	n=115	n=240	n=56	n=339
Support TOTAL	37	34	40	35	34	40	40	37
Strongly support	15	14	17	12	15	17	22	14
Somewhat support	22	20	23	23	19	23	18	23
Oppose TOTAL	49	53	45	42	56	48	40	52
Somewhat oppose	19	16	21	23	20	16	16	20
Strongly oppose	30	37	23	19	36	33	23	32
Don't know	12	11	13	19	10	10	20	10

2006 Tax Increase Responses

The 2006 survey included a series of questions about a hospital expansion, including the question, "For expansion, additional monies will be necessary to provide the planned private patient rooms. Are you in favor of adding private patient rooms?" Then they were asked if they would support a tax increase to pay for the private rooms. While the same question about funding private patient rooms with a tax increase was not asked in 2025, the 2006 results are presented for context.

Table 24. Would you support a tax increase to build private patient rooms? (%)

	Total	Favors adding private rooms	Does not want private rooms
Unweighted Base	n=403	n=196	n=164
Supports a tax increase	32	61	6
Would not support a tax increase	59	30	92
Unsure	9	9	2

Source: Craciun Research

Respondent Suggestions for South Peninsula Hospital

Survey participants were asked, “Do you have any suggestions for how SPH can better serve your community?” Just fewer than half of participants shared comments (47%).

The most common themes are presented below with representative comment examples. The full list of comments can be found in the Appendix.

Improved Access to Care: Staffing, Specialists, and Wait Times

Suggestions included hiring more medical staff (doctors, nurses, specialists), reducing appointment wait times, and expanding clinic hours. Many noted difficulties in accessing care due to a shortage of providers or long delays, leading some to seek care in Anchorage or Soldotna.

Representative comments:

- “The staff is excellent, but they are understaffed.”
- “Need more staff and wider range of operating hours.”
- “It would be nice if SPH's providers were more available; sometimes I go to Soldotna for timely care.”

Financial Transparency, Cost Concerns, and Bond Communication

A strong theme was the need for affordability, with complaints about high costs and poor price transparency. Many respondents criticized the bond proposal process, calling for better communication, itemized breakdowns, and justification for spending (especially on real estate).

Representative comments:

- “Lower the cost of services.”
- “SPH needs to clearly explain what the bond funds would be used for.”
- “Heard about the hospital buying properties for 3x assessed value – this hurt public trust.”

Improved Management, Leadership, and Decision-Making

Another theme was dissatisfaction with SPH management, including criticism of board spending decisions, organizational priorities, and exclusion of independent providers. Some respondents supported SPH but emphasized the need for better leadership and accountability.

Representative comments:

- "Board and management need to be changed."
- "The management needs to be replaced."
- "I don't support management's political stance excluding independent doctors."

Expanded Services, Especially Mental Health and Specialty Care

Many respondents asked for more comprehensive specialty care locally (e.g., cardiology, dermatology, pediatrics, dialysis). Mental health services were cited as lacking, with calls for residential options and integrated psychiatric support.

Representative comments:

- "SPH needs a mental health wing with emergency and residential options."
- "We need more specialties so people don't have to go to Anchorage."
- "Bring in child psychiatry, and a mental health unit is needed."

Improved Patient Experience: Customer Service, Communication, and Billing

Respondents asked for better customer service, staff training in empathy and communication, and clearer billing practices. Some highlighted negative personal experiences and emphasized the need for more compassionate and competent staff.

Representative comments:

- "Better communication between staff."
- "Better customer service and training."
- "Billing department needs to be more transparent and helpful."

Respondent Characteristics

Community of Residence

Survey participants were asked what community they live in most of the year. Most respondents (70%) lived in Homer, 15% lived in Anchor Point, 6% lived in Ninilchik, and 2% of respondents or fewer lived in the remaining SPH service area communities.

Table 25. What community do you live in most of the year? (%)

n=409	%	Count
Homer	70	285
Anchor Point	15	63
Ninilchik	6	23
Fritz Creek	2	9
Seldovia Village	2	8
Happy Valley	1	5
Kachemak City	1	4
Nikolaevsk	1	3
Diamond Ridge	<1	1
Other	2	2

South Peninsula Hospital Employment

Respondents were asked if any household members worked for SPH. Thirteen percent of respondents had household members working at SPH, 86% did not, and fewer than 1% each did not know or declined to answer.

Table 26. Do you, or anyone in your household, work for SPH? (%)

n=409	%	Count
Yes	13	54
No	86	352
Don't know	<1	2
Refuse	<1	1

Home Ownership

Asked if they rented or owned their homes, 14% of respondents said they rented, 83% were homeowners, 1% didn't know, and 2% declined to answer the question.

Table 27. Do you rent or own your home? (%)

n=409	%	Count
Rent	14	56
Own	83	339
Don't know	1	6
Refused	2	8

Age

The average age of respondents was 57 years. The highest percentage of respondents was aged 65 to 74 (28%), followed by those 75 and older (18%). Combined, those aged 45-54 and 55-64 made up 26% of respondents; those aged 25-34 and 35-44 made up 26% of respondents, and just 2% were 18-24.

Table 28. What is your age? (%)

n=409	%	Count
18-24	2	10
25-34	11	44
35-44	15	63
45-54	13	52
55-64	13	55
65-74	28	113
75+	18	72
Average Age	57 years	

Gender

Fifty-seven percent of respondents were female and 43% were male.

Table 29. What is your gender? (%)

n=409	%	Count
Female	57	235
Male	43	174

Online Survey Results

Online Survey Results

Use of South Peninsula Hospital Services

Respondent Use of SPH Care and Services

Online survey participants were asked whether they had received any type of health care or services from South Peninsula Hospital (SPH) in the previous three years. Ninety-five percent of respondents had received care, 4% had not, and fewer than 1% didn't know.).

Table 30. Have you received any type of health care or services from South Peninsula Hospital (SPH) in the past three years? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134
Yes	95	93	96	100	91	97
No	4	7	3	-	7	3
Don't know	<1	-	1	-	2	-

Respondent Use of Care and Services from Other Providers

Those who had not received care from SPH were asked if they had received health care or services from other providers in the previous three years. Just over four-fifths (82%) had received care from other providers and 18% had not.

Table 31. Have you received any type of health care or services from other providers in the past three years? (%)

BASE: Those who had not received care from SPH

	Base	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=11	n=5	n=6	n=0	n=5	n=4
Yes	82	80	83	N/A	60	100
No	18	20	17	N/A	40	-
Don't know	-	-	-	N/A	-	-

Reasons for Using Other Providers

Those who had received care from other providers were asked why they chose another facility, rather than SPH. Nine survey participants responded and shared reasons such as high costs, reputation, insurance issues, and availability of other facilities. Verbatim comments are included in the appendix of this report.

Satisfaction with South Peninsula Hospital

Overall Level of Satisfaction with SPH Care

Online survey respondents who received care at SPH were asked to share their level of satisfaction with care received on a scale of 1 to 10, with 10 meaning extremely satisfied and 1 extremely dissatisfied. Fifty-nine percent were satisfied (giving scores of either 8, 9, or 10). Twenty-eight percent expressed moderate satisfaction (middle scores of 4, 5, 6, or 7), and 13% were unsatisfied. The average satisfaction score was 7.4.

Table 32. Using a scale of 1 to 10 where 10 means extremely satisfied and 1 means extremely dissatisfied, what is your overall level of satisfaction with the care received at SPH? (%)

BASE: Those who received care at South Peninsula Hospital

	Base	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=224	n=63	n=156	n=19	n=52	n=130
Satisfied TOTAL	59	51	65	32	33	75
10 - Extremely satisfied	29	25	32	16	15	41
9	16	13	17	5	12	18
8	14	13	15	11	6	16
Moderate TOTAL	28	33	24	58	46	17
7	13	10	12	21	19	8
6	4	8	2	-	8	2
5	10	11	9	32	12	6
4	2	5	1	5	8	-
Unsatisfied TOTAL	13	16	12	11	21	8
3	5	6	4	5	8	2
2	3	-	4	-	2	4
1 - Extremely dissatisfied	5	10	3	5	12	3
Average	7.4	6.9	7.7	6.4	6.1	8.2

Likelihood of Using SPH Services

Those who had received care at SPH were asked how likely their household would be to use SPH for medical care if needed, on a scale of 1 to 10, with 1 meaning extremely unlikely and 10 meaning extremely likely. Sixty-three percent of respondents said they were likely (giving a score of 8, 9, or 10), 22% were moderately likely, and 15% were unlikely. The average score was 7.5.

Table 33. Using a scale of 1 to 10 where 10 means extremely likely and 1 means extremely unlikely, how likely are you or your household to use SPH if medical care is needed? (%)

BASE: Those who received care at South Peninsula Hospital

	Base	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=224	n=63	n=156	n=19	n=52	n=130
Likely TOTAL	63	60	66	58	38	73
10 - Extremely likely	45	43	47	42	29	56
9	8	8	9	-	6	8
8	10	10	10	16	4	8
Moderate TOTAL	22	17	21	32	31	15
7	7	3	6	5	13	5
6	3	3	2	-	4	2
5	10	6	11	26	10	7
4	3	5	2	-	4	2
Unlikely TOTAL	15	22	13	11	31	12
3	4	10	3	-	15	1
2	4	3	4	5	6	3
1 - Extremely unlikely	7	10	6	5	10	8
Average	7.5	7.1	7.7	7.3	6.2	8.1

Quality of Care

Overall Quality of Care

Asked if overall quality of care and services at SPH is better, worse, or equal to that available elsewhere, 43% of respondents said SPH care is equal to that available elsewhere, 22% said SPH is better, 27% said SPH is worse, and 9% didn't know.

Table 34. From what you've experienced or heard from others, would you say the overall quality of care and services at SPH is better, worse, or equal to that available elsewhere? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134
SPH is better	22	15	25	5	18	28
Equal to that available elsewhere	43	44	43	58	32	46
SPH is worse	27	37	23	32	49	16
Don't know	9	4	10	5	2	10

Community Care Needs

SPH Ability to Meet Community Needs

Survey participants were asked if the services provided by SPH meet the needs of the community, are not enough, or are too much for the community. Forty-one percent of respondents said SPH services meet the needs of the community, 37% said SPH services are not enough, 15% said SPH services are too much, and 6% didn't know.

Table 35. From what you've experienced or heard from others, would you say overall the services provided by SPH meet the needs, are not enough, or are too much for the community? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134
Meets the needs of the community	41	43	41	26	35	47
Are not enough for the community	37	28	41	53	32	37
Are too much for the community	15	26	10	11	28	9
Don't know	6	3	7	11	5	7

SPH Ability to Meet Future Community Needs

Respondents were asked if they think SPH services and facilities will need a large increase, slight increase, slight decrease, or large decrease to meet future community care needs. Two-thirds of respondents (66%) thought SPH services and facilities will need an increase. Just 16% of respondents thought services and facilities would need a decrease, and 18% didn't know.

Table 36. Do you think SPH services and facilities will need a large increase, slight increase, slight decrease, or large decrease to meet future community healthcare needs? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134
Increase TOTAL	66	57	70	79	49	74
Large increase	22	12	26	26	18	24
Slight increase	44	46	44	53	32	50
Decrease TOTAL	16	29	10	5	26	12
Slight decrease	9	15	6	-	11	7
Large decrease	8	15	5	5	16	4
Don't know	18	13	20	16	25	14

Community Perceptions of South Peninsula Hospital

Satisfaction with SPH Board and Management Performance

Survey participants were asked about their level of satisfaction with the performance of the SPH board and management of SPH. Seventeen percent of respondents were very satisfied and 26% were somewhat satisfied (44% overall satisfaction). Forty-five percent of respondents were unsatisfied, and 11% didn't know.

Table 37. Are you very satisfied, somewhat satisfied, somewhat unsatisfied, or very unsatisfied with the performance of the board and management of SPH? (%)

	Total	Gender		Age		
		Male	Female	18-34	35-54	55+
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134
Satisfied TOTAL	44	38	46	42	37	50
Very satisfied	17	13	20	21	12	22
Somewhat satisfied	26	25	27	21	25	28
Unsatisfied TOTAL	45	57	40	53	60	34
Somewhat unsatisfied	19	18	20	26	14	17
Very unsatisfied	26	40	20	26	46	17
Don't know	11	4	14	5	4	16

Bond Proposition

As described in the Phone Survey section, respondents were asked a series of questions about support for an SPH bond proposition. The following section includes responses for the 2025 survey.

Future Support for SPH Bond Proposition

Survey participants were asked about their level of support for a future South Peninsula Hospital bond. Eighty percent of respondents said they might support a bond for SPH in the future, depending on what it funds. Twenty percent of respondents said they will not support any bond for SPH in the future, no matter what it funds.

Table 38. Which of the following do you agree with most? (%)

Unweighted Base	Gender		Age			Home ownership		
	Total	Male	Female	18-34	35-54	55+	Rent	Own
	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
I might support a bond for South Peninsula Hospital in the future, depending on what it funds.	80	75	81	74	75	85	87	80
I will not support any bond for South Peninsula Hospital in the future, no matter what it funds.	20	25	19	26	25	15	13	20

Support for Specific Aspects of Bond Proposition

Respondents were asked about their level of support for using the bond to finance seven specific SPH activities. Tables detailing responses for each of the seven activities follow, with subgroup data provided for gender, age, and home ownership.

The highest level of support was for use of the bond for infrastructure repair (67%), followed by an expanded infusion clinic (56%); the lowest levels of support were for use of the bond to buy leased properties, and for the overall dollar value of the bond (both with 34% overall support).

USE OF BOND FOR INFRASTRUCTURE REPAIR

Use of the bond to repair aging infrastructure saw the highest level of strong support (42%), with 26% of respondents somewhat supporting, and a total of 67% expressing overall support. Thirty-one percent of respondents opposed this use of the bond and 2% didn't know.

Table 39. Please tell me your level of support for using the bond to repair aging infrastructure. (%)

Unweighted Base	Gender		Age			Home ownership		
	Total	Male	Female	18-34	35-54	55+	Rent	Own
	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
Support TOTAL	67	56	73	63	53	79	71	68
Strongly support	42	37	44	37	33	49	52	41
Somewhat support	26	19	28	26	19	31	19	27
Oppose TOTAL	31	44	24	32	47	19	23	31
Somewhat oppose	8	9	6	5	12	4	6	7
Strongly oppose	23	35	18	26	35	15	16	23
Don't know	2	-	3	5	-	2	6	1

USE OF BOND FOR EXPANDED INFUSION CLINIC

Fifty-six percent of respondents expressed overall support for using the bond to expand the infusion clinic (29% strongly supporting and 28% somewhat supporting). Thirty-four percent opposed the use of the bond for expansion of the infusion clinic, and 10% didn't know.

Table 40. Please tell me your level of support for using the bond for expanding the infusion clinic. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	Rent	35-54	55+	Rent	Own
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
Support TOTAL	56	44	62	63	39	64	74	54
Strongly support	29	18	33	26	21	34	29	29
Somewhat support	28	26	28	37	18	31	45	25
Oppose TOTAL	34	51	26	16	56	24	19	35
Somewhat oppose	9	15	6	-	14	7	-	10
Strongly oppose	25	37	20	16	42	17	19	25
Don't know	10	4	12	21	5	12	6	11

EXPANSION OF CURRENT FACILITIES

Fifty-two percent of respondents showed overall support for using the bond to expand current facilities (30% strongly supporting and 22% somewhat supporting). Forty-four percent of respondents opposed using the bond to expand current facilities, and 4% didn't know.

Table 41. Please tell me your level of support for using the bond to expand current facilities. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
Support TOTAL	52	37	59	53	35	63	68	50
Strongly support	30	25	32	37	23	34	42	28
Somewhat support	22	12	27	16	12	29	26	22
Oppose TOTAL	44	63	36	37	63	33	29	46
Somewhat oppose	11	16	9	16	16	8	13	11
Strongly oppose	33	47	27	21	47	25	16	34
Don't know	4	-	5	11	2	4	3	4

USE OF BOND FOR NUCLEAR MEDICINE

Thirty-nine percent of respondents either strongly supported or somewhat supported use of the bond for nuclear medicine (18% strongly supporting and 21% somewhat supporting). Forty-nine percent opposed use of the bond for nuclear medicine, and 12% didn't know.

Table 42. Please tell me your level of support for using the bond for nuclear medicine. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
Support TOTAL	39	31	43	42	23	49	55	37
Strongly support	18	15	20	16	7	24	16	18
Somewhat support	21	16	23	26	16	25	39	18
Oppose TOTAL	49	63	43	42	68	37	32	51
Somewhat oppose	11	13	10	11	11	11	6	12
Strongly oppose	38	50	32	32	58	25	26	39
Don't know	12	6	15	16	9	14	13	12

INCREASED PROPERTY TAXES

Thirty-seven percent of respondents supported an increase in property taxes (17% strongly supporting and 20% somewhat supporting). Sixty percent of respondents opposed an increase in property taxes, and 3% didn't know.

Table 43. Please tell me your level of support for the increase in property taxes. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
Support TOTAL	37	29	41	21	30	47	35	38
Strongly support	17	13	20	11	11	23	13	18
Somewhat support	20	16	21	11	19	24	23	19
Oppose TOTAL	60	68	56	68	65	51	55	60
Somewhat oppose	18	13	20	16	11	21	19	18
Strongly oppose	41	54	36	53	54	30	35	42
Don't know	3	3	3	11	5	2	10	2

USE OF BOND FOR PURCHASE OF LEASED PROPERTIES

Thirty-four percent of survey participants supported use of the bond to buy leased buildings and properties (18% strongly supporting and 16% somewhat supporting). Sixty-one percent of respondents opposed using the bond to buy leased buildings and properties, and 5% didn't know.

Table 44. Please tell me your level of support for using the bond to buy leased buildings and properties. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
Support TOTAL	34	26	38	37	28	42	42	34
Strongly support	18	13	20	21	16	22	23	18
Somewhat support	16	13	18	16	12	20	19	16
Oppose TOTAL	61	72	56	58	70	53	52	62
Somewhat oppose	12	12	12	11	9	11	19	11
Strongly oppose	49	60	44	47	61	42	32	50
Don't know	5	1	6	5	2	5	6	4

DOLLAR VALUE OF BOND

Thirty-four percent of survey participants supported the total dollar value of the bond (16% strongly supporting and 18% somewhat supporting). Fifty-six percent of respondents opposed the total dollar value of the bond, and 10% didn't know.

Table 45. Please tell me your level of support for the total dollar value of the bond. (%)

	Total	Gender		Age			Home ownership	
		Male	Female	18-34	35-54	55+	Rent	Own
Unweighted Base	n=235	n=68	n=162	n=19	n=57	n=134	n=31	n=201
Support TOTAL	34	26	37	26	28	41	39	33
Strongly support	16	13	17	16	11	20	16	16
Somewhat support	18	13	20	11	18	21	23	17
Oppose TOTAL	56	68	51	53	65	49	48	57
Somewhat oppose	14	12	14	21	4	15	23	12
Strongly oppose	43	56	37	32	61	34	26	44
Don't know	10	6	12	21	7	10	13	10

Respondent Suggestions for South Peninsula Hospital

Survey participants were asked, "Do you have any suggestions for how SPH can better serve your community?" More than half of respondents shared comments (62%).

The most common themes are presented below with representative comment examples. The full list of comments can be found in the Appendix.

Financial Mismanagement and High Costs

Many community members expressed concern over perceived financial mismanagement at SPH. Criticisms centered around inflated property purchases, high administrative salaries, delayed or complicated billing, and expensive care and services compared to other facilities. Many called for a reduction in costs, increased transparency, and improved fiscal responsibility.

Representative comments:

- "Do not charge 1,000% more for services here vs. Anchorage. Stop mismanaging money and utilize the millions in revenue to operate and expand your facility."
- "Live within your means. Is the hospital running in the red? If so, take care of your budget and save towards an expansion."
- "Quit wasting our money. The medical industry has failed to put people first and are terrible stewards of our money. I would rather suffer a 4 hour drive to Anchorage than be ripped off by the hospital in Homer."

Focus on Core Services Over Expansion

Respondents urged the hospital to stop adding specialty services and other projects that they feel do not align with the needs of a rural community. They suggested improving core services like family care, emergency services, pediatric care, mental health, and long-term care. Many eschewed providing plastic surgery or offering nuclear medicine.

Representative comments:

- "Focus on the quality primary care that a small community needs. Leave the specialties for more populated areas."
- "Lay off chasing opportunities for high payout procedures and services that don't align with community needs (plastic surgery, nuclear medicine)."
- "Instead of overextending into new and unestablished specialties to make more money, SPH should prioritize improving the services that it already provides."

Infrastructure, Facilities, and Safety Concerns

Respondents shared concerns about the condition of current facilities, calling for infrastructure upgrades, better pediatric physical therapy space, improved parking, and safer loading zones. Some felt that infrastructure upgrades should not be contingent on bond proposals.

Representative comments:

- “FIX PEDS PT dept. There are tripping hazards everywhere...she NEEDS a more functional work space that is safe for children.”
- “Focus on existing services and infrastructure and quit trying to expand. Quit spending money for frivolous items and focus on decent work environment for staff and better care for patients.”
- “More safe parking, valet parking, or even bus pick up for people who need to be at appointments.”

Staffing Issues and Provider Quality

There were numerous comments addressing staffing problems, including unqualified hires, drug testing failures, rude staff, poor customer service, and high staff turnover. Community members demanded better screening, retention of quality providers, and an end to reliance on part-time or traveling doctors. Many also called for better communication and training for front-line staff.

Representative comments:

- “Screen your employees better. A large portion can't pass a drug test.”
- “The only part of the hospital that needs improvement is the emergency room staff. It seems to be a training problem not a funding problem.”
- “Get better emergency department physicians that actually provide for patients.”

Respondent Characteristics

Community of Residence

Survey participants were asked what community they live in most of the year. The majority of respondents (53%) lived in Homer, followed by 17% who lived in Anchor Point, 10% in Fritz Creek, 8% in Kachemak City, and 6% in Diamond Ridge. Two percent of respondents or fewer lived in the remaining SPH service area communities.

Table 46. What community do you live in most of the year? (%)

n=235	%	Count
Homer	53	125
Anchor Point	17	39
Fritz Creek	10	24
Kachemak City	8	18
Diamond Ridge	6	14
Fox River	2	4
Seldovia Village	2	4
Ninilchik	1	3
Nikolaevsk	1	2
Happy Valley	<1	1
Kachemak Selo	<1	1

South Peninsula Hospital Employment

Respondents were asked if any household members worked for SPH. Twenty-three percent of respondents had household members working at SPH, 74% did not, and 3% did not know.

Table 47. Do you, or anyone in your household, work for SPH? (%)

n=235	%	Count
Yes	23	53
No	74	175
Don't know	3	7

Home Ownership

Asked if they rented or owned their homes, 13% of respondents said they rent, 86% were home owners, and 1% didn't know.

Table 48. Do you rent or own your home? (%)

n=235	%	Count
Rent	13	31
Own	86	201
Don't know	1	3

Age

The average age of respondents was 59.3 years of age. The highest percentage of respondents were aged 65 to 74 years of age (26%), followed by those 75 years and older (20%). Combined, those aged 45-54 and 55-64 made up 32% of respondents; those ages 25-34 and 35-44 made up 20% of respondents, and just 1% were aged 18-24.

Table 49. What is your age? (%)

n=210	%	Count
18-24	1	2
25-34	8	17
35-44	12	25
45-54	15	32
55-64	17	36
65-74	26	55
75+	20	43
Average Age	59.3 years	

Gender

Sixty-nine percent of respondents were female, 29% were male, and 2% said other.

Table 50. What is your gender? (%)

n=235	%	Count
Female	69	162
Male	29	68
Other	2	5

Phone Survey Verbatim Responses

Open-ended responses to the question: "Do you have any suggestions for how SPH can better serve your community?"

- Excellent service at ED, PT, Homer clinic; We would like a little more education about what the board and management do, but we're grateful for the hospital. It has become more important and comforting to have as we've gotten older, in case we ever need it.
- Hospital treats its buildings better than its staff; Staff are overwhelmingly positive, but clearly there are managerial issues; The mental health clinic has moved SIX times in ONE year; Physical therapy has been moved to an outside facility making it hard for in-hospital patients to access high-quality physical therapy.
- It would be nice to have an infusion clinic AND a blood donation clinic; Magic bull****: How would it get paid for if not property taxes?; Please add a mental health wing that has everything all the way up to emergency residential options and ask local therapists for solutions, because there is a large mental health need and often insurance only covers the hospital services so those need to be much more comprehensive; Lastly, more accessible easy parking.
- Online/text questionnaire is about 70 questions, takes 20-30 minutes, often doesn't seem like the hospital knows you've answered this because they either re-send it or indicate they don't know you've already answered—this is very inefficient for someone with young family; SPH needs to show if they are up to state and national standards with their ventilation care during surgical procedures—seems like people are getting infections from ventilation; add a pediatrician—this is very important for serving young-family growth in Homer
- When you call the hospital's main line, the first choice in the call tree is off-putting ("billing"), maybe start with "Your care is important to us, and we want to help you get to the right office." (make the person know they are important and human); Understanding that they have lots of people to serve and limited time, it's still important to listen carefully and not rush appointments
- Very disappointed with the diagnostic capability of the staff; the solution is to get new, better staff; The demographics of the SPH service area have gotten much older yet SPH has failed to maintain medical expertise with the older demographic
- A better billing department that was on site.
- About the bond: The hospital really needs to help us see the needs more clearly and to see if the costs are reasonable, the triage of the budget choices.
- Attract more specialists for operations.

- Be more community oriented, regardless of where working they need to work together to get along. Stop looking for bonds, the borough already has enough funds. Stop putting pauses on medical places that want to come and help Homer community in all ways possible. No more sabotaging other clinic businesses that want to serve our community.
- Be wiser with the money they have, and more affordable healthcare.
- Become a level 1 trauma center so emergency patients don't have to be airlifted out.
- Better billing system
- Better communication between staff.
- Better community engagement and awareness of services & initiatives.
- Better doctors.
- Better quality medical personnel.
- Better working conditions
- Board and management need to be changed because they approved everything so far and that means they have approved astronomical price hikes; I would consider supporting a future bond if they totally changed management
- board meeting choices should be made public for the community and payment plans should be made clear.
- Bond needs to be better promoted. They could have started educating earlier. Not enough info and info was kind of late to get to the public. Simplifying language would help.
- Cheaper prices
- Choose carefully who is hired in provider care staff. Had an experience where husband nearly died because a nurse did not believe his condition.
- Communication needs to be better. Records are not always shared between Anchorage and Homer providers as they should.
- Continue to grow & expand
- Cost is too much!
- Cost must be competitive with Central Peninsula Hospital and SPH needs to consider aggressively recruiting long term physician positions.
- Cost, feel like trying to take over every element, keep hands off \$600 for appointment, mismanagement of current funds.
- Create housing options for travel nurses/employees of hospital
- Critical access, ER, is great but other services are better in Anchorage.
- Current employee. Only facility - expensive. Rated 10 because only facility I could use.
- Currently visiting specialist that have often or more full time if they do the bond the infusion clinic needs expanded asap not wait for the bond if possible.
- Didn't do a good job justifying the nuclear medicine, they have enough right now.
- Do more training for emergency services.
- Do multiple independent audits to determine what they need, be transparent about the urgency of the needs; If something needs fixing, fix it. But very clear about where the money is going; fund these needs with the very rich people that are increasing in population in

Homer and stop taking the money from people who've been here forever and don't have that kind of money, who don't have million-dollar homes.

- Dr. Raymond is doing better adverse messaging about the hospital on FB than the hospital; he says they're offering too high prices to buy leased properties, but I don't know. The hospital should grow at the same rate as the population. People getting infusion should not have to drive/pay to go to Anchorage or Soldotna, the care is hard enough on them
- Educate and train current staff or get more qualified staff.
- Employee Parking issue
- Employees need autism training to better care for people on the spectrum.
- ER parking lot needs to be bigger.
- ER services really lack; terrible physician in terms of proficiency in preventing compartment syndrome, and terrible bedside manner, no call button and lots of pain with disregard for patient and family member patients in pain; i understand doctors themselves made a pain management problem, but we still need some managed pain during the injury onset
- Expand allergy testing.
- Expand facilities for long term care.
- Expand your facilities.
- Explain billing.
- Feed patients with better food in the rooms. Cafeteria food good.
- Find better doctors and ones who will stay for a while.
- Focus needs on hiring more people instead of the expansion.
- Focus on basic services, don't get too big.
- Focus on quality not quantity. Covert appointed to elected for the board.
- Focus on services provided and make them top-notch before adding other services. Respondent works at South Penn.
- For older & new nurses they need more compassion
- Friends daughter went to ER about a year ago and they were satisfied with the care
- Get people on social media on how great the hospital is.
- Gets care at Seldovia Village Tribal Wellness primarily. Needs more staff and wider variety of specialties.
- Go private.
- Grow with the community.
- Have a better birthing center
- Have a satellite clinic in Seldovia
- Have gotten so specialized. Staff increased 500%. Specialties not used so much. Top heavy.
- Have state of the art equipment, invest in ai for sure.
- Having a heart specialist would be good. Heard they are bringing in dialysis.
- Healthcare costs too high, people fly to Seattle because it's cheaper.
- Hear expensive compared to other medical facilities. Poor management of funds. To do an MRI cost is \$9,000 compared to Anchorage at \$800.

- Heard they are hiring a pediatrician. If true, additional services for young population is needed.
- HIPAA - needs better emphasis. Small community - everyone knows everyone. Needs better facilities and more specialties.
- Hire local medical staff
- Hire more staff and wider range of operating hours.
- Homer Medical should be larger.
- Hospital needs to expand to accommodate growing population.
- I am very happy to pay for a bond, but SPH has to line-itemize exactly how they intend to use the funds, not broadly saying, "Aging infrastructure," but what buildings, what assets, what repair?" Every aspect of the bond funds need to be clearly explained or it will fail again. The infusion clinic needs education not expansion, for example, for years they did not saline-flush the line, so up to a quarter of people's medication stayed in the line...after years of complaining, the hospital now flushes the line so that patients get the full dose. More education.
- I didn't know they are managed by a non-profit.
- If an emergency happened and the facility can't handle the case, need to refer to Anchorage. Heard about patient's dying because the hospital tried to "hang" on to patients that could have had better care elsewhere.
- If I'm willing to put my money into SPH expanding, then why can't the doctors of my choice be allowed in to treat me in my hospital (SPH). I don't support the current management's political stance excluding local independent doctors of my choice in the hospital and as an example of the consequences of that, we took our family to Soldotna for the birth of a grandchild. The care at SPH is fantastic though.
- I'm so happy with the hospital. I don't know anyone in management, but I support what they are doing.
- Improve patient centered care
- Improve urgent care, not emergency care
- In terms of attitude, they get a 14, they are unbelievably helpful and professional. We only go elsewhere when we need specialty care that's not available in Homer. About buying leased properties; this is where it all fell apart. Even my savvy educated friends thought this bond was about enriching a few land owners. SPH needs a better information campaign, even a smaller more personal campaign to let people know what the bond would do. What does great medical care mean to us if we can find parking to access it, for example? I don't know who the board and management are, but I couldn't be more supportive of the hospital and services.
- Increase parking spaces.
- Increase radiology services
- In-depth care extreme - Uses medevacs. Grossly overpriced.
- Integrating functional/ root causing medicine.

- It is unrealistic that the hospital will have a \$38.5m bond without raising property taxes, but I'm all for supporting the hospital. It's also preferable that the hospital lease properties from owners in order that they support a business and stay on the borough's tax income.
- It would be helpful if SPH could easily contract for more than just emergency care with Indian Health Services, for example mammograms, so that people don't need to miss work, fly to Anchorage, and care is served by SPH and IHS pays less than sending its patients to Anchorage and SPH gets the business
- It would be nice if SPH's providers were more available; I voted for the 2024 bond (want SPH to know this) but they sometimes go to Soldotna for timely care because the same appointment in Homer would be 2 months out.
- It would take too much time to tell you all the suggestions we have.
- Keep prices low especially for bloodwork/labs.
- Larger facility and expand the services.
- Larger infusion center, more nuclear medicine, and need a local dermatologist.
- Lower cost of basic health care
- Lower prices if possible
- Lower prices.
- Lower the cost of services.
- Make care more affordable
- Make healthcare more affordable
- Make the cost of care more affordable for everyone.
- Make wise decisions and don't spend large amounts of money unnecessary.
- Making healthcare affordable and listen to patient requests.
- Manage physical spending in a smarter way.
- Maybe not be a jerk about the bill
- More advertising about the different skill levels of providers would help
- More community gatherings.
- More doctors.
- More resources and better access to specialists
- More specialists are needed and know they are coming. I was sorry the bond failed. Purchasing buildings would be better than leasing.
- More specialties. Include hip replacements.
- More specialty doctors even if they rotate and are only here for a limited number of times a month.
- My issue with bond is that it includes buying buildings the sellers have overpriced. The hospital is forced to pay extremely high prices if the bond includes building/properties. Don't want the hospital to overpay. Other parts of the bond were fine. My use of SPH is very dependent on what health service I need, often prices do not match services.
- Need better management of hospital, money that goes in should provide better services. Service board that responds to needs.

- Need large increase in healthcare, needs are growing but keep up the good work.
- Need more equipment and facilities for patient care should also expand.
- Need more specialists - Dermatology and Rheumatology.
- Need more staff and a wider range of operating hours.
- Need to be better at communicating. Should consider lowering costs. Nursing care is substandard.
- Need to cut back on services because the hospital is too expensive.
- Need to figure out how to get better doctors.
- Needs a mental health unit, inpatient and outpatient and consulting psychiatrists.
- Needs a NICU building.
- Needs an ability to grow.
- Needs better communication about pros/cons of the bond.
- Needs more specialties like dialysis.
- Needs more specialties so people don't have to go to Anchorage.
- Needs more specialty support for aging population.
- Needs to be a full service hospital.
- Not a welcoming environment. Better training is necessary and better customer care, empathy, and attention to detail.
- Not happy with how run. Does not pay enough for nurses. Don't listen to union reps. Can better facilitate union.
- Not sure if every city in AK needs every specialty. AK state should get together to plan what services are needed by each community. Many services can be offered bi-weekly/monthly.
- On future bonds, more transparency on what you're spending funds on.
- Opt to travel outside for major care. Will go to SPH for minor stuff.
- Order equipment to remove staples. They had to use a tool when his staples were removed because they didn't have adequate device.
- Pass the bond.
- Pay Doctors less.
- Physical maintenance is poor.
- Please bring in child psychiatry.
- Please ensure chemo is available to our community.
- Please incorporate community discussions
- Please offer more services so that people don't have to go to Oregon, Washington, etc. If you don't get enough money now, you'll just have to keep stair-stepping in more bond requests every year. I don't know the South P Board, but having worked with the board of the borough, they don't always have the right knowledge to evaluate the challenges they are trying to solve. I see a lot of empty space at South P; use it before you buy more. CPH has had lots of upgrades over the past 10 years, while South P is still very outdated. I could go into the ER and see 10 things that need upgrading and it matters when you have to stay there more than a short while.

- Please provide better education and PR around education, we don't clearly understand why SPH needs such an increase in facilities and funding. SPH is not quite meeting the needs of the baby boomers who have been in the area the longest, such as bringing in a monthly nephrologist/specialist and letting us know they are there.
- Pretty good job. Don't take anymore money from the community.
- Prior to the bond, the health assessment needs survey [found that] the hospital is meeting needs of the community. SPH did community outreach and got a better sense of community needs and now needs to focus accurately on actual community needs. Accept real answer to results of meetings. Keep Peter Micciche out of any part.
- Property tax affects housing. Stop squishing small businesses.
- Put resources towards more mental health. Currently transport Psych patients out. Heard that a kids provider is coming. Prefer to allocate funds to services needed rather than buying up buildings.
- Renegotiate lease as a real hospital so that prices for services can be lowered.
- Room to expand. Could offer better Mental Health options.
- Saved my life, but I wanted to go home early and they let me. Should have done more hands on exam.
- Should not be competing with private industry
- SPH can be more customer service friendly
- SPH could prioritize communications. I wasn't aware there was a bond proposition nor what it would have funded.
- SPH is a monopoly, Control healthcare. 400% to 500% more buying buildings. It feels mismanaged,
- SPH is attempting to recruit and address the needs of the community very well, but being a critical access facility with independent funding is tricky; they have success in recruiting high-quality care providers to a small community.
- SPH is lagging on nuclear medicine and really needs it.
- SPH is spread out and it should be more centrally located.
- SPH might not have enough services to serve the community, such as elder care and psychiatric care; buying up a lot of the property in Homer for 3x the assessed value-- this got to a lot people, overpaying with bond.
- SPH needs to take a look at itself.
- SPH should stop trying to monopolize care and service in the area; we have independent physical therapists, for example, and SPH should not have built a big physical therapy wing pulling business from the local independent therapists.
- SPH, ER services are excellent, top notch, better than Anchorage. The survey will not yield useful results because the questions are not department-specific. If this is only public opinion then should there be a bond? Or services? I feel it is missing information?
- Stay positive and do the best you can do with the resources you have.
- Stop doing unneeded & unnecessary medical tests.

- Stop spending money.
- Strong lack of functional and holistic medicine.
- Strong support for nuclear medicine so that people in treatment don't have to drive to Soldotna/Anchorage; General feedback: SPH should fill the need for a skilled nursing facility in the area.
- Terrible bedside manner. Need better customer service. Not heard. Training not enough for staff.
- The billing and insurance department need their staff to be trained better.
- The billing department needs help and to be more transparent with patients.
- The care providers (MD, nurses, therapists, etc.) are amazing; the management needs to be replaced-- when a younger family member was in grave condition no one would return my calls until a former SPH CEO intervened on my behalf. The board and management manage money poorly and need to show they can do much better before asking for more handouts.
- The ER could run a bit better, wait times are too long.
- The hospital doesn't use funds appropriately, for example the last major hire was a plastic surgeon, which the hospital doesn't necessarily need; and the hospital also proposed creating on-site childcare for hospital employees, which takes away from community childcare providers and also reduces the childcare available to the community and may take away the best providers.
- The hospital needs to focus on providing value to its patients.
- The staff is excellent, but they are understaffed so wait times are very long; if they could have more staff and see people more quickly, then they would be an A+ hospital
- They can continue coordinating services. Have a good relationship with Central Peninsula Hospital. Continue local pregnancy & birth services.
- They charge too much; lower the prices.
- They could hire more staff.
- They do a pretty bang up job.
- They keep asking for more and more funding, it's hard to support another round of funding. SPH has grown too fast and too much growth is like a cancer. Slow down! We now have a plastic surgeon for a service area of ~10,000...
- They need a better financial rate for the uninsured.
- They need to get the bond passed.
- They need to show the community why they need the bond.
- They should include doctors that have been banned from the hospital; specifically, Dr. Hockman, who is not able to request lab work
- They're doing a great job in the community.
- Too strong political leaning. Need to keep politics out of healthcare.
- Transparency in prices. Even a ball-park estimate would be better than getting a huge bill.
- Transparency with the billing department, stop subsidizing uninsured people, more interpersonal communications and less dealing with bots.

- Unsure that the hospital will be able to get the bond.
- Up the trauma level.
- Very happy with services. Continue doing what they are doing. Very unhappy with the city government.
- Very satisfied with the hospital.
- Visitor policy should be revised. Lots of changes with visitor policy.
- We chose to move to Homer due to the excellent backgrounds of the medical staff, specialists and generalists alike and we are former execs in medical community so we scrutinize these things; the present and past management always contribute strongly to local boards like the visitor centers; and it should be noted that in another survey SPH was considered a model for all AK hospitals and people voted not to merge with Soldotna for consider that SPH would lose its high quality.
- Will not support due to fixed income.
- Will not support SPH until they move the hospital to a better location. Parking is bad.
- Work to keep the staff there, because if they are unhappy they quit. Treat them well. For example, Providence staff are very happy and nice. SPH should also have a chapel, even just a small little prayer room, available 24-7.
- Worried about how SPH will handle long term care patients with current Trump admin. Worried that SPH will be forced to go no science focused because of Kennedy. Also, some people trying to make tons of money from hospital by selling overpriced buildings to SPH. SPH should buy land while they still can. And has SPH considered building hospitals underground?
- Would be nice to have a town hall once a year to hear public concern
- Would like more price transparency with billing.
- Would like more transparency of board. Bond not clearly stated with the public.
- Would like to see other people's decisions included and include others in the plan make a broad future plan and make a board election

Some callers left additional comments throughout the survey. These comments are presented here:

- Better parking. More nurses and hospitalists. Larger ER.
- Bond did not make sense.
- Bond needs to be explained better. Heard that bad deal on land prices. Chose Serene Waters because of knowledgeable & trained providers.
- Borough and city can work to figure out how to fund certain parts of the bond without taxing the people because we are struggling as it is.
- Did not have enough information on the bond. Would have liked to be better informed.
- Did not know about the bond. Thinks they should fix their current infrastructure before expanding.

- Does not get to vote on any bonds. Would be nice to go to the facility instead of all the way to Anchorage.
- Dr. Hoss did exceptional work. Very satisfied with his work and professional
- Everyone has just been really sweet in all the departments every time I have gone.
- Excellent care at the hospital but substandard care at clinics.
- Given the cost of services the hospital should be self-sufficient.
- Great not to have to travel to Anchorage.
- Had aneurism last year. Has had 5 different neurologists. Would like consistent staff. Homer is aging and SPH staff is not equipped for elderly care.
- I am very pleased with all of the care and service I have received at SPH
- I think they do a really great job with what they have. They are running out of space and need more space.
- I think they do a tremendous job of bringing in experienced doctors.
- If people can't get what they need in this community, they will have to go elsewhere (pay airfare, hotels), and I think we need a full-circle service here so that people can get the care they need in our area.
- In Homer, the senior population is increasing. Considering that they live 75 miles away, they can make improvements to bring access closer.
- Interviewee feels the survey should have asked: 1) What specialty clinics do you think SPH should add? Because there are gaps in specialty services at SPH that people need and should not have to travel 80 miles to get. 2) The survey should have asked what are the top 3 aspects you would strongly support for bond fund usage; and 3) What are the bottom 3 additions that you would strongly oppose for bond fund usage. Interviewee is most likely to go to SPH for in-patient, because it's the only choice, but would go somewhere else for out-patient. Interviewee wants SPH to know that they would ONLY be less opposed to the bond if it ONLY went to nuclear medicine and infusion clinic funding.
- Interviewee has used every wing of SPH and five other hospitals in and outside of Alaska, due to family health issues, and interviewee tells people all the time that SPH is better than all that they have used, including big San Antonio and Houston facilities, and Anchorage: quality of care in SPH is better because they attract higher quality providers and we're being treated by community members who more quickly can diagnose what's happening—this outweighs even specialty care in big city hospitals.
- Interviewee wants SPH to know that the MOST important aspect is that a bond fund the infusion clinic, because his wife is being treated for cancer now and they do a lot of long drives for care.
- Interviewee would like to say "leave as-is" but had to make a choice based on the survey so they chose "slight decrease" when thinking about if the hospital will need to grow/contract to meet the community's future healthcare needs
- Just keep treating people kindly.
- Money is spent recklessly. Go back to basic health needs.

- More community outreach and education to the community on how to stay/live healthy.
- More concerned about the people receiving care than the building being fixed or renovated.
- More equipment needed for specialty clinics
- Need more information and to break down what money is going to be spent on. Need more sophisticated representatives to be able to sell the bond.
- Need new mammogram machine
- Needs more community outreach - more meetings
- Nice that many services are a part of the hospital. It would be nice if it was centrally located to have more camaraderie.
- One Thanksgiving, the interviewee's pain management doctor was away and the interviewee felt overly probed about being drunk; the interviewee got physically sick from pain until doctors simply asked for a urine test, which interviewee says she quickly passed. "It was horrible treatment." The interviewee felt her son should have been allowed in to advocate; interviewee waited 5 hours and got dehydrated. Her regular pain doctor did give her pain meds and she can normally get a pain shot. This event sets the stage for her view of the hospital and at 72-years-old they should not have assumed she was alcoholic, but been rehydrated and received pain medication after a week of aspirin.
- Only problem with the bond is the property tax was too high and if the total amount was cut in half.
- Abstained from voting on the bond issue because felt like it was not clear. Wanted a who, what, where, when, why. It wasn't clear as to what the money would be used for.
- SPH is equal to other hospitals for less-involved procedures, but no hospital can compete with a place like Dana-Faber for very involved procedures like liver cancer
- SPH is much worse than Anchorage health services and care available.
- SPH has a sufficient level of services.
- The hospital should use their earnings to fund these initiatives. Services are already expensive so revenue should be good. Elderly care needs need to be met so they don't have to travel. My E.R. trip was extremely expensive.
- The properties considered for purchase in the bond were overpriced. The size of the facility does not meet the needs of the community.
- The value of the property that was going to be bought with the bond was too high.
- They did an amazing job last time I was there. Everyone was friendly and professional.
- Think about purchasing the property where the campground was, Upper Karen Hornaday part that just got cleared. Think about buying that from the city or whoever owns it. We appreciate them being there; they help a lot of people.
- Utilize space more efficiently. When one of the buildings flooded had to work remotely. Did not have a problem with this, but other space could have been utilized.
- Very supportive of any needs to improve hospital and services.

- Visiting specialist needs permanent places/position down that way instead of visiting every so often
- Was born at SPH. Hospital gifts hams and turkeys to each employee over the holidays and that is money that can be better spent.
- When it comes to the total dollar value of the bond that was defeated, a double the amount might alleviate the needs, however, not what the community wants to pay for but it is what it needs.
- Works for SPH and feels that it's a wonderful facility.
- Would need more information to understand the bond

Online Survey Verbatim Responses

Open-ended responses to the question "Do you have any suggestions for how South Peninsula Hospital can better serve your community?"

- 1) Stop hiring people that can't pass a drug test. 2) Stop hiring support staff from overseas. 3) stop giving bonuses of Homer bucks and meat vouchers with my tax dollars. 4) Move the unofficial smoking break room away from the stop sign by the ER entrance.
- A better facility and medical team are at Central PH. A good medivac to CPH would be better than part-time docs or worse telemedicine that our tax dollars pay for. The area does not support specialty docs full time like Adcox who has a terrible surgery reputation. P T services and support for CPH and ANC hospitals makes a better focus. The breakdown of tax dollars does NOT support doctor dreams of big Alaska salaries!!!!!!
- Add more physicians to the family care clinic not just Homer Medical Clinic. A better cardiologist to serve SPH.
- Address rude ER staff, I have not had one visit to the ER for myself or a family member, that's counting 5 different occasions.
- Administration is lacking. Have received bills sent to insurance for items not done. Family members have experienced the same.
- Aging Infrastructure improvements are not bond dependent. Infrastructure is a necessity and belongs on the daily balance sheet and is managed with the routine budget or capital budget from normal business practices. The fact that this component was on the bond tells you largely of the severity of funds mismanagement at play. Clearly, if you can't manage to upkeep aging infrastructure while continuing to pay 7 figure salaries to employees and board members and spending wastefully in other areas you are not capable of managing the existing funds and an even greater reason not to trust you with more tax payer money. Wasteful decisions are being made by the board on unnecessary expansions, i.e., plastics and PT among others and severely overpaying your top 5% while passing up on fixing aging infrastructure like the generator among other items. Highly likely to vote against and encourage others to vote against any of your bond proposals till we see actionable evidence of improvement in management

- All portions of the hospital function perfectly exactly the way they are. The only part of the hospital that needs improvement is the emergency room staff. It seems to be a training problem not a funding problem
- An oncologist here full time. Cardiologist also. I think the problem with the bond bill was the inflated sale price of the leased properties
- Be more open to ideas and other business in the community
- Be more public and transparent about decision making, avoid conflict of interest. Focus on cost effective, accessible, safe, basic care. Avoid adding specialized services which are not supportable.
- Better doctors; specifically, ER
- Better management of finances with more focus on quality of care and less focus on trying to increase revenue and expansion
- Better pricing for lab draws
- Bring prices in line with other communities. Stop wasting money on aesthetics & more land acquisition. Focus on better care within the existing services. Create an urgent care clinic. Try answering the phone occasionally. Return calls to clients occasionally. Stop using out-of-state billing services. Serve the entire community, not just the rich retired people who live near the hospital.
- By increasing facility/facilities to provide traveling medical personnel with their own offices and staff, i.e., doctors from Anchorage.
- Change the board of directors, total mismanagement.
- Charge reasonable rates and get medical staff who are competent.
- Concentrate on basic services and coordinating transportation when higher level services are needed.
- Continue the community outreach and wellness programs. Educated consumers make better decisions
- Continue to fund upstream prevention through community health promotion activities and offerings. Increase trauma informed skills and communication skills for clerical staff among ALL clinic areas of SPH.
- Costs to the patients
- Creating a wound care clinic, or a pediatric specific clinic
- Decrease wait times to see doctors....months to see a physician in Homer is too long...consider bringing in outside administrators with a broad experience and broader knowledge of healthcare instead of promoting within which just perpetuates "this how we have always done things"
- Develop a fully staffed Hospice to meet the needs of the aging population
- Do not charge 1000% more for services here vs Anchorage. Stop mismanaging money and utilize the millions in revenue to operate and expand your facility.
- Don't be a monopoly and hinder private practices from serving our community. The egregious amount spent on repairing/remodeling the building for the daycare was not sensible. Nuclear medicine doesn't have a place in a small town like Homer. Please stick to the basics and let people travel to the most adept providers for specialized medicine in hub locations where those services are established and refined.
- Don't be willing to pay prices that reflect FUTURE values of property. That's ridiculous.

- Don't let Mark Halpin make a killing off his properties. Go with assessed value.
- Don't raise taxes, can barely afford to make mortgage payments now
- Don't try to force us to buy overpriced real estate from friends of board members. I won't vote for a bond floated to make Mark Halpin and the Church of the Rock people rich.
- Don't try to purchase properties at exorbitantly inflated prices! Allow naturopathic doctors who are highly trained individuals in our community to use hospital lab services, denying them this service is insanely ridiculous.
- Don't go farther in debt
- Excel on small hospital experience, leave big hospital treatment for larger hospitals that have more experience.
- Expand pediatric service, OT/PT, Women's Health, basic family health care, preventative and community care. These services may not be reimbursed at a high rate compared to more intensive medical care but they are what is needed in this rural community. The SPH board and leadership team need to advocate for essential community resources needed to support a robust year-round population and employee pool - education, childcare, housing, senior care and services. People will move away from Homer and employee retention will fail if our schools do not remain strong and there is no affordable housing for middle-income families.
- Fair pricing
- Fire Christopher Landess. No need to expand when you have perpetrators of medical abuse and malpractice on staff.
- First, let patients know the cost of a typical blood panel work; I was surprised to be billed \$750 for a \$250 service; [after insurance paid their \$750 share]; I think there's improvement between insurance and SPH billing and the patient. Second, kindly inform your counter staff not to tell me to "have a blessed day"—we are not in Birmingham sweetie, and the religious connotation of staff resembles Providence; keep your crosses hidden from me and your Christian slight out of my sight. Thirdly, train staff in customer kindness and courteous handling; it's almost unbearable to be greeted by some of the most malcontent of Homer's finest.
- Fix your ability to consistently receive faxed orders. My somewhat negative responses are 100% due to this issue. It is so bad even the physician offices are sending paper copies with patients for backup.
- Focus on existing services and infrastructure and quit trying to expand. Quit spending money for frivolous items and focus on a decent work environment for staff and better care for patients.
- Focus on inpatient services. Let private practices provide clinical services.
- Focus on the quality primary care that a small community needs. Leave the specialties for more populated areas. Billing rates are exorbitant for routine care and emergent care. Primary care shouldn't be sacrificed in a community hospital that is tax supported in order to generate revenue through specialties.
- fundraising
- Get a better handle on the delivery of services they are already providing before increasing services.

- Get a better handle on your prices. I can go up to Anchorage and get a colonoscopy for half the price as here. I had to have 2 colonoscopies done here last year because the first doctor didn't get all of the polyps out and wanted to cut out a piece of my colon. That one cost \$10,000 and then 4 months later Dr. Kincaid went in and got everything out that Dr. Belue (sp?) didn't and that one was over \$6,000. No consistency in pricing for the same procedure. My insurance hates it when I have stuff done at the hospital here because it is one of the most expensive in the state.
- GET AN MRI MACHINE & BETTER Full Time CARDIO DEPT.
- Get better emergency department physicians that actually provide for patients. Fire Dr. Landess
- Get rid of Derotha Ferraro. Decrease the pay of administrators and techs to the same level of comparable hospitals
- Get us a dermatologist, a rheumatologist, an ophthalmologist. No cosmetic surgeon or million dollar radiologists.
- Give patients all their options available, even if it means going to a different hospital.
- Have a few traveling specialists, like Dermatology and expanded cardiology testing. I shouldn't have to go to Anchorage for a stress test
- Have employees do their job right the 1st time. It affects a person's health.
- Hire a geriatrician to work with our aging population
- Hire more in-state medical staff. You're not John Hopkins. Be nice to the community. Mirror Central Peninsula hospital. Stop paying big bucks to lure people here. Hire from inside the state.
- Hire more specialists (such as audiologists) even if they come just a few times a month.
- Honesty and integrity and transparency when soliciting community funding.
- I am very satisfied with the service I have gotten at SPH and hope it can keep up with our community growth.
- I appreciate the quality care I have gotten from South Peninsula Hospital, but also appreciate being able to visit other medical professionals like Dr. Huffman. I believe SPH should stay open to other medical professionals writing requests/orders for patients so we can continue to be our own advocates and make our own decisions on who we see and at what expense.
- I don't see the next to buy 3 buildings. The new building admin is in is luxury not a need and should not be bought. Also explaining what upgrades need to be done and what the cost is will go a long way. Explain in more detail as to why something cost so much will help too.
- I guess as a nonprofit I have issues with the high cost of any service provided. Even including insurance normally people put off going to hospital when they should...
- I hate the fact that we have to travel for services
- I have had excellent experiences at SPH over the last 41 years. The care provided and personal connection with Doc's, nurses, CNA's to Office staff and everything in between has been great. Two services we need that I believe we don't have is a Cardiologist and Dermatologist.
- I need cervical spine and lumbar spine surgeries and procedures in Homer.

- I think that our facility is really too small for Nuclear Medicine. I would much rather see it try to expand long term care as these options are severely limited in our community.
- I think the management of the hospital is excellent. I love that fact we have traveling doctors providing great local care. I hope one day the travelers will be more accessible. Keep up the great work!
- Inpatient Mental Health Services, outpatient psychiatry, more pediatric providers, integrated case management and mental health.
- Instead of overextending into new and unestablished specialties to make more money, SPH should prioritize improving the services that it already provides. If SPH insists on extending into new and uncharted territory, it should prioritize the following: improving mental health services, drug/alcohol treatment centers, walk-in urgent care clinic. The ER is not financially reasonable for many people having an urgent/non-emergent health problems, and the HMC walk-in clinic is limited in its hours/what it offers. There is a growing economic crisis in this area, and that is exacerbating substance use and other mental health crises. This community needs meaningful help that will make a difference right now - not abstract "help" like getting a plastic surgeon that people can't afford to see anyway. I feel that SPH is not interested in assisting the homeless/those struggling with substance abuse/people struggling with their mental health because it won't make as much money.
- It feels like the hospital is wasting money trying to provide services that are not needed. A lot of confidence was lost when so much money was invested in services like plastic surgery (and paying inflated surgeon salaries) that are largely not needed by the community. I would like to see an increase in providers who provide essential services for a greater portion of the population (midwives, preventative health, etc). It sends the message that the hospital cares about the health and vitality of the community and not just on surgical procedures.
- It would be really good for our community to have more drug abuse prevention resources.
- It's widely known that the admin team needs to be entirely replaced.
- I've lived in Homer for 40 years and am so alienated from this ongoing criminal conspiracy that I will, in any case possible, take my business to Seattle.
- Keep Dr. Atwood, please, please, please. He was amazing with our super complicated kiddos care and kept us local in the area instead of being flown out or referred up to Anchorage
- Keep service area voters in the loop. It's got to be ongoing. Periodic surveys, radio outreach, public meetings at strategic times can all be good. Try to get regular input from people who use the hospital and associated services.
- Lay off chasing opportunities for high payout procedures and services that don't align with community needs (plastic surgery, nuclear medicine (go up the road)). Use a collaborative approach with other agencies to improve community health. The daycare project is a joke- gearing up for a 12-hour day for infants is cringy and it seems catered to only the high-paid hospital staff. The land grab mission is counter-productive to the housing crisis in town.
- Less focus on revenue and monopolizing healthcare

- Let in competition! Your prices are outrageous.
- Listen to your patients. Don't get upset when a extremely ill person doesn't use the correct medical terminology.
- Live within your means. Is the hospital running in the red? If so, take care of your budget and save towards an expansion.
- Local teaching and hiring
- Lower prices for equal service in comparison to ANC/Lower 48.
- Lower the cost of healthcare- it's so expensive here
- Make sure patient's families are listened to and respected
- Manage funds appropriately so you don't have to bond for deferred maintenance.
- Managers, Hospitalists need to be more available to advise patients regarding treatment, less time in meetings.
- Meet the prices of Central Peninsula or Anchorage. It's so much cheaper to drive up the road to save thousands of dollars on any screenings needs.
- More cardiac diagnostic services. Larger specialty clinic with more providers. Sheltered and safer loading and unloading area for outpatients who need assistance. Assistance with loading and unloading elderly and disabled. More teleconferencing. Increased cardiac care--especially diagnostics and specialty clinic. Better and more personal phone management. Medical supply center.
- More parking
- More primary care providers needed. Not enough options and longer wait times to be seen by a doctor
- More safe parking, valet parking or even bus pick up for people who need to be at appointments. SPH Bus, do pickups for staff or patients at certain times.
- More space for clinics, under one roof, full service building. Specialty with primary care with rehab lab and x-ray
- More specialists so we don't have to travel out of town.
- Need internal medicine, cardiologist, cardiac rehab
- Need to upgrade the infusion clinic.
- Needs more PCP availability. Needs more ability to fire employees who don't perform or behave well. An empty position is better than keeping someone to just have it filled
- Now primary care physicians
- Now that I'm in my 80s I'd like to be reassured that I'll be allowed to die pretty promptly if the opportunity arises, as opposed to spending a long while in long term care. I have no desire to be in long term care despite the good reputation of your facility.
- Nuclear medicine, larger LTC, cancer treatment
- Number one thing you can do to improve service is to FIRE the acute care director, who actively discriminates against certain classes of employees, and has favored employees who are incompetent (RNs and CNAs) that she protects. Slightly less important, the second thing you can do to improve services at SPH is to FIRE the CEO. Pain management clinic.
- Parking

- Patients are not just 'cogs in the wheel' Remember that the patient might be your neighbor or family member and you yourself might be a patient one day!
- Plan for future
- Please keep up the good work. Figure a way to avoid the exorbitant price for the rental properties. Nuclear medicine is not necessary. Thanks.
- Prove SPH can use the money they get now more effectively.
- Purchase senior center to help off load burdens waiting for housing assistance. Cardiac Rehabilitation. Need internal medicine MD. Need GI specialist on rotation at Specialty clinic. Need Cardiac NP to come to Specialty clinic and future cardiac rehab. Need an inpatient behavior NP to see psych patients and form separate department from Acute Care staffing matrix. Bring set Free & AAA opportunities peer mentor program to help support the recovery process.
- Put the patient portals into one site. I never know where to find my results. I have to have 2 passwords and check both sites. It needs to be one site.
- Put the physical therapy unit back at the hospital.
- Quit overcharging. Quit trying to take over every single healthcare related thing in Homer.
- Quit paying outrageous salaries to doctors and let them practice without being subsidized...quit trying to create a monopoly
- Quit trying to monopolize everything
- Quit wasting our money. The medical industry has failed to put people first and are terrible stewards of our money. I would rather suffer a 4 hour drive to Anchorage than be ripped off by the hospital in Homer.
- Reduce costs. DOGE it
- Retain the physicians you have on staff. Great group of physicians
- Review admission policies. - Encourage prov. to seek training to not only recognize but treat patients with "new" diagnoses such as ME/CFS/ Long covid/ FND. Re: dilapidated buildings. Start over. With the current market, had bond passed—we would have way overpaid for many properties. None of the money from that bond was earmarked for specialty/family practice clinics which are bursting at the seams for space. Daycare has cost way more than anticipated and won't even be affordable for many. FIX PEDS PT dept. There are tripping hazards everywhere and Allison Glass is phenomenal—she NEEDS a more functional workspace that is safe for children.
- Safer, sheltered and assisted loading and unloading area for outpatients. More cardiac services--diagnostics and care so I don't have to travel to Anchorage. More specialized PT for spinal cord injury and/neurologic compromise.
- Screen your employees better. A large portion can't pass a drug test. Many aren't fluent in English. The front desk guy is leaving to go work at a weed shop?? Surely you can do better than that...
- Since the West (LTC) addition, SPH seems "out of control", and getting worse. If SPH can justify owning additional property (not businesses) then a clear plan for expanding SPH "footprint" should be developed, and justified for voters, with a plan to aggressively obtain that additional footprint (by eminent domain, if necessary). A rough approximation of "fair market value" of the entire area bounded by Bartlett (E & W sides), Fairview (N

side), and Hohe (W side) is a bit over \$3M. The "negotiation" for currently leased properties clearly favored the "seller" (paying off expected revenues for 25 years!!) and threw the community (taxpayers) 'under the bus'. "Managed extortion" vs "negotiation" would be more accurate. Most taxpayers in KPB aren't dumb, and word got around quickly ... and the Bond Prop was doomed (aside from 'bad blood' by at least one physician).

- Sooooooooooooo many suggestions.
- SPH is far too expensive and refers to specialist care far too often. You aren't the community hospital you one were, you're now a corporation that serves the needs of the corporation. It's really sad.
- SPH is not the only game in town, they should start to understand that. Instead of trying to take over our town & medical services
- SPH needs better management and admin. Care is better elsewhere, staff is not treated fairly or compensated fairly for what they do.
- SPH needs to focus on the day to day needs of the patients. Specialty needs and care should be sent up the road. Increasing the campus and creating a monopoly isn't in the communities best interest.
- Stop charging \$800 for services I frequently travel to Anchorage and Soldotna for and only pay \$200
- Stop forgiving tens of thousands of medical bills for some and charge out the butt to others. Better QUALITY care
- Stop robbing us blind! Your bills are outrageous compared to other hospitals for the crappiest service. CPH is so much cheaper and better.
- Stop trying to create monopoly
- Stop wasteful spending. Like \$60,000 dollars on a building that you never moved into.
- Term limits for board members, community liaison on the board, more transparency between board and public.
- That hospital is so top heavy, it will collapse eventually. Paying Ryan Smith \$540,000 a year while you fill all the worker positions with Filipinos whom can barely speak English speaks volumes...
- The "off the street" pricing is extremely inflated. I would never go back unless in dire need and close to death. This is no exaggeration. I often wonder how many people in the community die because of the extreme expense of the hospital services.
- The service providers are top notch. Not so sure about management and efficient use of assets and resources. If you ask for money, be very specific about it's use and don't ask for a bunch of unrelated things at once. Make damn sure you're using what you have efficiently. Be transparent.
- The services you offer are great. But the cost is astronomical. If I don't have emergency care I will travel to Soldotna or Anchorage... same good quality of care and 1/2 the cost. Quit over paying for management and services that we do not need. And cut costs of medical care. Then and only then will I support a bond.
- The Specialty Clinic is awesome. Long wait times to get appts. Do understand that you are dealing with itinerants. So appreciate the services of this Clinic.

- The Specialty clinic rocks :) !! please have more availability for some specialties (e.g., ENT)
- There is no need to be bringing specialty services to our community that the population can't support due to size of the service area. Besides, a 75 mile drive up the road enables you to get the services that we can't afford to bring in to our small community. If this was a consideration I think the community could understand and be on board to support maintaining the facility that exists. We can not afford to burden this community by increasing property taxes to supplement someone's "big dreams"
- Too big, too expensive,
- Urgent care facility
- urgent care option - I really hoped that was what was happening on Lake St where the auto parts store was - it would have been a stellar urgent care location. Super needed!
- Urgent care. The medical clinic has issues and we have had to go elsewhere. It is totally money grab vs. care! We use the hospital for test and emergencies.
- We are a small community that can not afford the medical cost at SPH. We can go up the road for the same treatment and same amazing care but pay less money. This community can not support a huge medical campus. Scale back and concentrate on daily care and emergencies and send a patients up the road for specialty care.
- We badly need a dialysis clinic!!! And a hyperbaric chamber.
- We can't get basic healthcare like pain management but somehow have a plastic surgeon. Money not well spent
- We do not need a plastic surgeon. We need more pediatrics and primary health care
- We have a large senior demographic and they do need certain care that they don't get here have to go to Soldotna or Anchorage. We do need to be able to provide care for people here at home or not make people drive up to Anchorage to get treatment their toes nails cut. Also, for whatever reason you are the most expensive there is in hospitals or doctors. I'm not sure how that can change but it sure needs to come down especially for people on fixed incomes
- We need an urgent care clinic so as to lighten the load to the ER
- We need better communication about what is needed, what is happening with your infrastructure and plans or hopes for changes. I feel poorly informed, this survey might have been accompanied by a simple bullet point list from most urgent needs to hopes for expansion. Many do not even know about your power outage issue! consider a community conversation where board members can be introduced, questions can be addressed, etc.
- When the VA clinic sends patients to get care at SPH, there doesn't seem like a seamless process to transfer and exchange records and data.
- Work first on fixing what is broken with the way the hospital is administered and operated. Consider your patients as your customers and future. Do what is right for them. Stop making big, life altering mistakes and decisions that do not have the customer's best health and care as the priority. Fix your billing!! Error after error shows the incompetence and impacts your credibility. Provide accurate and timely estimates like every other facility in the state. Hire an anesthesiologist. Your doctor's inappropriate care and lack of proper diligence nearly killed me. And my story is not an anomaly. And you know it. Fix it. Doctor

after doctor has advised against having any procedure done at the hospital; your own doctors. I learned the hard way that they were right. You are unnecessarily putting people's lives at risk and taking advantage of patients in stressful times. You should be ashamed of how you operate.

- You have the highest rates for services even with good insurance. I think this may be the reason for people to say no to any tax increase etc. I am retired from the ER medical service industry. I support all except your increase for services! SPH charges the most money for even a simple blood panel!!!! It is really outrageous. Please get real about your hospital pricing. It is because of this, and this alone, people do not support your tax increase! I would be happy to have a civil discussion about this. I love the staff there. However, you will get incredible providers when you update the tools it takes to provide the great care equivalent to your hospital prices that you charge.

Survey Instruments

See attached telephone and online survey instruments.

PHONE #

INTERVIEWER NAME:

DATE:

Hello, this is _____ with McKinley Research. We are conducting a survey about South Peninsula Hospital. I'd like to ask you a few questions.

1. What community do you live in most of the year? (DO NOT READ; if they live in a community not on list, ask if they live south of Ninilchik, if not thank and end)

- | | |
|-------------------|--|
| 01. Anchor Point | 07. Kachemak City |
| 02. Diamond Ridge | 08. Nikolaevsk |
| 03. Fox River | 09. Ninilchik |
| 04. Fritz Creek | 10. Seldovia Village |
| 05. Happy Valley | 11. Other: Kachemak Selo, Halibut Cove, Jakolof Bay, Miller Landing, Port Graham, Nanwalek |
| 06. Homer | |

(READ) **South Peninsula Hospital is a Borough-owned hospital managed by a non-profit. It provides services in the southern Kenai Peninsula through many clinics, including the Homer Medical Center. For survey purposes, we will refer to South Peninsula Hospital as SPH and consider the emergency room, inpatient and outpatient clinics and services.**

2. Have you received any type of health care or services from South Peninsula Hospital (SPH) in the past three years?

01. Yes (Skip to Q5) 02. No 03. Don't know 04. Refuse

3. Have you received any type of health care or services from other providers in the past three years?

01. Yes 02. No (skip to Q7) 03. Don't know (skip to Q7) 04. Refuse (skip to Q7)

4. Why did you choose another facility for those services, rather than SPH? (Do not read; check all that apply)

- | | |
|---|--|
| 01. Doctors chose facility, referred me | 09. Better location |
| 02. The skill/experience/specialty was better elsewhere | 10. Concern about privacy, know everybody |
| 03. The personal care better elsewhere, they are nicer | 11. Use ANMC / ANS or VA facilities |
| 04. The schedule was better, could take me sooner | 12. Insurance-related reasons |
| 05. It was recommended by family, friends | 13. Don't like SPH, wouldn't ever go there, don't trust it, etc. [specify] |
| 06. I didn't know SPH offered the service | 14. Don't know/refuse |
| 07. Cost | 15. Other (SPECIFY) _____ |
| 08. Use alternative medicine | |

SKIP to Q7

5. Using a scale of 1 to 10 where 10 means extremely satisfied and 1 means extremely dissatisfied, what is your overall level of satisfaction with the care received at SPH?

Extremely dissatisfied Extremely satisfied
 1 2 3 4 5 6 7 8 9 10 0 DK/Ref.

6. Using a scale of 1 to 10 where 10 means extremely likely and 1 means extremely unlikely, how likely are you or your household to use SPH-if medical care is needed?

Extremely dissatisfied Extremely satisfied
 1 2 3 4 5 6 7 8 9 10 0 DK/Ref.

7. From what you've experienced or heard from others, would you say the overall quality of care and services at SPH is better, worse, or equal to that available elsewhere?

- 01. SPH is better 03. Equal to that available elsewhere
- 02. SPH is worse 04. Don't know

8. From what you've experienced or heard from others, would you say overall the services provided by SPH meet the needs, are not enough, or are too much for the community?

- 01. Meets the needs of the community 03. Are too much for the community
- 02. Are not enough for the community 04. Don't know

(READ) The 2024 Kenai Peninsula Borough general election ballot included a bond proposition to borrow up to \$38.5 million for building maintenance, facility and service expansion, and property acquisition for SPH.

The bond would have increased the property tax for people living in the SPH Service Area by \$67 per \$100,000 assessed property value. The bond proposition failed.

9. Now I will read you a list of specifics about the bond. Please tell me your level of support for (read item) do you strongly support, somewhat support, somewhat oppose, or strongly oppose?

	Strongly support	Somewhat support	Somewhat oppose	Strongly oppose	Don't know	Refuse
a. The total dollar value of the bond	1	2	3	4	5	6
b. The increase in property taxes	1	2	3	4	5	6
c. Using the bond to repair aging infrastructure	1	2	3	4	5	6
d. Using the bond to buy leased buildings and properties	1	2	3	4	5	6
e. Using the bond to expand current facilities	1	2	3	4	5	6
f. Using the bond for nuclear medicine	1	2	3	4	5	6
g. Using the bond for expanding the infusion clinic	1	2	3	4	5	6

10. Which of the following do you agree with most? (Read 1-2)

- 01. I might support a bond for South Peninsula Hospital in the future, depending on what it funds.
Or
- 02. I will not support any bond for South Peninsula Hospital in the future, no matter what it funds.
- 03. No opinion
- 04. Refused

11. Are you very satisfied, somewhat satisfied, somewhat unsatisfied, or very unsatisfied with the performance of the board and management of SPH?

- | | | |
|------------------------|--------------------------|----------------|
| 01. Very satisfied | 03. Somewhat unsatisfied | 05. Don't know |
| 02. Somewhat satisfied | 04. Very Unsatisfied | 06. Refused |

12. Do you think SPH services and facilities will need a large increase, slight increase, slight decrease, or large decrease to meet future community healthcare needs?

- | | | |
|---------------------|---------------------|----------------|
| 01. Large increase | 03. Slight decrease | 05. Don't know |
| 02. Slight increase | 04. Large decrease | 06. Refused |

13. Do you have any suggestions for how South Peninsula Hospital can better serve your community?

01. None / Don't know

02. _____

(READ) I have 3 questions for demographic purposes only.

14. Do you, or anyone in your household, work for SPH?

- | | |
|---------|----------------|
| 01. Yes | 03. Don't know |
| 02. No | 04. Refused |

15. Do you rent or own your home?

- 01. Rent
- 02. Own

- 03. Don't know
- 04. Refused

16. In what year were you born?

01. _____ (4 digit)

02. Refused

Thank you for participating in this survey!

17. Gender (Don't ask)

01. Female

02. Male

02. Don't know

18. Additional Comments:

SPHCommunitySurvey.com

South Peninsula Hospital is requesting your help in filling out a short survey asking your opinions and ideas for future needs and medical services.

This online version is intended for those individuals who were not already surveyed by telephone. If you've already completed the telephone version, thank you, your responses have already been recorded and are not necessary.

1. What community do you live in most of the year?

- | | |
|-------------------|----------------------|
| 12. Anchor Point | 21. Kachemak Selo |
| 13. Diamond Ridge | 22. Miller Landing |
| 14. Fox River | 23. Nanwalek |
| 15. Fritz Creek | 24. Nikolaevsk |
| 16. Halibut Cove | 25. Ninilchik |
| 17. Happy Valley | 26. Port Graham |
| 18. Homer | 27. Seldovia Village |
| 19. Jakolof Bay | 28. Other _____ |
| 20. Kachemak City | |

South Peninsula Hospital is a Borough-owned hospital, managed by a non-profit. It provides services in the southern Kenai Peninsula through many clinics, including the Homer Medical Center. For survey purposes, please consider South Peninsula Hospital's emergency room, inpatient services, and its outpatient clinics and services.

2. Have you received any type of health care or services from South Peninsula Hospital in the past three years?

04. Yes (Skip to Q5) 05. No 06. Don't know

3. Have you received any type of health care or services from other providers in the past three years?

04. Yes 05. No (skip to Q7) 06. Don't know (skip to Q7)

4. Why did you choose another facility for those services, rather than South Peninsula Hospital?

16. Please Specify _____
SKIP to Q7

5. What is your overall level of satisfaction with the care received at South Peninsula Hospital?

Extremely dissatisfied 1 2 3 4 5 6 7 8 9 10 Extremely satisfied

6. How likely are you or your household to use South Peninsula Hospital if medical care is needed?

Extremely unlikely 1 2 3 4 5 6 7 8 9 10 Extremely likely

7. From what you have experienced or heard from others, how would you say the overall quality of care and services at South Peninsula Hospital is compared to care available elsewhere?

- 05. South Peninsula Hospital is better
- 06. South Peninsula Hospital is worse
- 07. South Peninsula Hospital is equal
- 08. Don't know

8. From what you have experienced or heard from others, how would you say overall the services provided by South Peninsula Hospital meet community needs?

- 05. Meets the needs of the community
- 06. Are not enough for the community
- 07. Are too much for the community
- 08. Don't know

(READ) The 2024 Kenai Peninsula Borough general election ballot included a bond proposition to borrow up to \$38.5 million for building maintenance, facility and service expansion, and property acquisition for South Peninsula Hospital.

The bond would have increased the property tax for people living in the South Peninsula Hospital Service Area by \$67 per \$100,000 assessed property value. The bond proposition failed.

9. Thinking about the bond, whether you voted or not, what was your level of support for or opposition to:

	Strongly support	Somewhat support	Somewhat oppose	Strongly oppose	Don't know
h. The total dollar value of the bond	1	2	3	4	5
i. The increase in property taxes	1	2	3	4	5
j. Using the bond to repair aging infrastructure	1	2	3	4	5
k. Using the bond to buy leased buildings and properties	1	2	3	4	5
l. Using the bond to expand current facilities	1	2	3	4	5
m. Using the bond for nuclear medicine	1	2	3	4	5
n. Using the bond for expanding the infusion clinic	1	2	3	4	5

11. Which of the following do you most agree with?

- 05. I might support a bond for South Peninsula Hospital in the future, depending on what it funds.
- 06. I will not support any bond for South Peninsula Hospital in the future, no matter what it funds.

12. What is your level of satisfaction with the performance of the board and management of South Peninsula Hospital?

- 07. Very satisfied
- 08. Somewhat satisfied
- 09. Somewhat unsatisfied
- 10. Very unsatisfied
- 11. Don't know

13. How much do you think South Peninsula Hospital services and facilities will need to increase or decrease to meet future community healthcare needs?

- 07. Large increase
- 08. Slight increase
- 09. Slight decrease
- 10. Large decrease
- 11. Don't know

14. Do you have any suggestions for how South Peninsula Hospital can better serve your community?

03. None / Don't know

04. _____

The next questions are for demographic purposes only and all answers will remain confidential.

15. Do you, or anyone in your household, work for South Peninsula Hospital?

- 05. Yes
- 06. No
- 07. Don't know

16. Do you rent or own your home?

- 05. Rent
- 06. Own
- 07. Don't know

17. In what year were you born?

03. _____ (4 digit)

18. What is your gender?

- 03. Female
- 02. Male
- 03 Other

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