AWARD NUMBER: 13-42-B10583

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12/31/2013

| DATE: 02/11/2013 | | EXPIRATION DATE: 12/31/2013 | | | | | |
|---|--------------------------------|-----------------------------|--|--|--|--|--|
| QUARTERLY PERFORMANCE PROGRESS REPORT FOR PUBLIC COMPUTER CENTERS | | | | | | | |
| General Information | | | | | | | |
| 1. Federal Agency and Organizational Element to Which Report is Submitted | 2. Award Identification Number | 3. DUNS Number | | | | | |
| Department of Commerce, National Telecommunications and Information Administration | 13-42-B10583 | 831038190 | | | | | |
| 4. Recipient Organization | | | | | | | |

| Professional Resources Management of Rabun, LLC | 196 Ridgecrest Circle, Clayton, GA 30525-4111 |
|---|---|
|---|---|

| 5. Current Reporting Period End Date (MM/DD/YYYY) | 6. Is this the last Report of the Award Period? |
|---|---|
| 12-31-2012 | ◯ Yes ● No |

7. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.

| 7a. Typed or Printed Name and Title of Certifying Official | 7c. Telephone (area code, number and extension) |
|--|---|
| Kimberly S Ingram | 706-782-0401 |
| | 7d. Email Address |
| CEO | kingram@inmedgroup.com |
| 7b. Signature of Certifying Official | 7e. Date Report Submitted (MM/DD/YYYY): |
| Submitted Electronically | 02-11-2013 |

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Project Indicators (This Quarter)

1. Please describe significant project accomplishments completed during this quarter (600 words or less).

This quarter saw a significant increase in users at both PCC locations. Several instructor lead classes were held at the downtown location. The Amara Center location saw a significant number of instructor led classes as Mountain Lakes Medical Center implemented an electronic health record this quarter which required training of MD's, nurses and other healthcare providers to use the system. Additionally, Continuing Medical Education (CME) classes began this quarter at The Amara Center location for MD's, CRNP's, PA's and nursing providers. Several health education classes were held for the general public at The Amara Center location this quarter.

2. Please provide the percent complete for the following key milestones in your project. Write "0" in the Percent Complete column and "N/ A" in the Narrative column if your project does not include this activity. If you provided additional milestones in your baseline report, please insert them at the bottom of the table. Figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the percent complete is different from the target provided in your baseline plan (300 words or less).

| | Milestone | Percent Complete | Narrative (describe your reasons for any variance from the baseline plan or any other relevant information) |
|------|-------------------------------------|---------------------|---|
| 2.a. | Overall Project | 90 | Downtown and Amara Center PCC's are fully operational and experiencing increases in users. |
| 2.b. | Equipment / Supply Purchases | - | Progress reported in Question 4 below |
| 2.c. | Public Computer Centers Established | - | Progress reported in Question 4 below |
| 2.d. | Public Computer Centers Improved | - | Progress reported in Question 4 below |
| 2.e. | New Workstations Installed | - | Progress reported in Question 4 below |
| 2.f. | Existing Workstations Upgraded | - | Progress reported in Question 4 below |
| 2.g. | Outreach Activities | - | Progress reported in Question 4 below |
| 2.h. | Training Programs | - | Progress reported in Question 4 below |
| 2.i. | Other (please specify): | - | Progress reported in Question 4 below |

3. Please describe any challenges or issues faced during this past quarter in achieving planned progress against the project milestones listed above. In particular, please identify any areas or issues where technical assistance from the BTOP program may be useful (600 words or less).

Users have increased this quarter with targeted outreach efforts. Additional outreach efforts will focus on the engagement of school age children without in home access to internet or computer and also will focus on visitors and patients of MLMC.

4. Please provide actual total numbers to date or typical averages for the following key indicators, as specified in the question. Write "0" in the Total column and "N/A" in the Narrative column if your project does not include this activity. Unless otherwise indicated below, figures should be reported <u>cumulatively</u> from award inception to the end of the most recent reporting quarter. Please provide a narrative explanation if the total is different from the target provided in your baseline plan (300 words or less).

| | Indicator | Total | Narrative (describe your reasons for any variance from the baseline plan or any other relevant information) |
|------|--|-------|--|
| 12 | New workstations installed and available to the public | 31 | All PC's and devices are installed and available to the public. |
| 4.b. | Average users per week (NOT cumulative) | 363 | Total PCC users this quarter was 4,724 which is up significantly from the previous quarter. |
| 4.c. | Number of PCCs with upgraded broadband connectivity | 0 | N/A |
| | Number of PCCs with new broadband wireless connectivity | 0 | N/A |
| 4.e. | Number of additional hours per week existing and new PCCs are open to the public as a result of BTOP funds | 158 | Two Public Computer Centers open 158 total hours per week with extended hours at downtown location two nights per week and on Saturdays. |

5. Training Programs. In the chart below, please describe the training programs provided at each of your BTOP-funded PCCs.

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| Name of Training Program | Length of Program (per hour basis) | Number of Participants per Program | Number of Training Hours per Program | | |
|---|------------------------------------|---------------------------------------|---|--|--|
| Computer Fun 101 - Part I | 2 | 18 | 36 | | |
| Computer Fun 101 - Part II | 2 | 14 | 28 | | |
| NGTC - Excel for Beginners | 7 | 5 | 35 | | |
| Georgia MLS Re-Insight (Downtown PCC) | 3 | 18 | 54 | | |
| NGTC - Introduction to Digital Photography | 3 | 15 | 45 | | |
| NGTC - Advanced Digital Photography | 3 | 8 | 24 | | |
| Retired Teachers Association Monthly Meeting | 2 | 16 | 32 | | |
| GA DOL - Trade Show | 1 | 29 | 29 | | |
| NGTC - Web Design 2 | 3 | 3 | 9 | | |
| The Amara Center Open House | 1 | 18 | 18 | | |
| Barnwell Hospital Conference | 5 | 12 | 60 | | |
| Chamber Business After Hours | 3 | 62 | 186 | | |
| Contract Discussions | 1 | 5 | 5 | | |
| Diabetes Training Class | 3 | 4 | 12 | | |
| Evening with the Doc | 2 | 38 | 76 | | |
| FATC EHR CarePath Training | 2 | 5 | 10 | | |
| Finance Employment Conference | 1 | 4 | 4 | | |
| Flint River Hospital Conference | 3 | 11 | 33 | | |
| Friday Grand Rounds CME | 1 | 15 | 15 | | |
| GA MLS Training | 3 | 17 | 51 | | |
| InMed Quarterly DON Meeting | 6 | 11 | 66 | | |
| MLMC Hospital Auxiliary Meeting | 1 | 34 | 34 | | |
| MLMC Medical Staff Quarterly Meeting | 2 | 15 | 30 | | |
| MLMC Radiology Dept. Introduction | 1 | 26 | 26 | | |
| MLMC Registration Staff Meeting | 3 | 8 | 24 | | |
| MS Support Group | 2 | 14 | 28 | | |
| NextGen: Dept Mgr Workflow | 2 | 262 | 524 | | |

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| 5/(12. 02/11/2010 | | | | |
|---|----------------|---------------------|-------|--|
| NextGen: Employee Health | 2 | 21 | 42 | |
| NextGen: Live Rollout Conference | 1 | 4 | 4 | |
| NextGen: Meaningful Use Conference | 2 | 10 | 20 | |
| NextGen: Medicare and Medicaid | 1 | 3 | 3 | |
| NextGen: Overview | 2 | 94 | 188 | |
| NextGen: Physicians Overview | 2 | 15 | 30 | |
| NextGen: Training - Charge Master | 2 | 7 | 14 | |
| NextGen: Training - End User | 9 | 46 | 414 | |
| NextGen: Training - ER | 4 | 15 | 60 | |
| NextGen: Training - Financials (Patient Charge Report) | 2 | 4 | 8 | |
| NextGen: Training - Financials (Payments) | 2 | 6 | 12 | |
| NextGen: Training - MedSurg | 4 | 8 | 32 | |
| NextGen: Training - Nursing | 4 | 51 | 204 | |
| NextGen: Training - OR & OP | 9 | 11 | 99 | |
| NextGen: Training - Pharmacy | 4 | 7 | 28 | |
| NextGen: Training - PT & OT | 5 | 5 | 25 | |
| NextGen: Training - Registration | 2 | 22 | 44 | |
| NextGen: Training - RT | 4 | 12 | 48 | |
| North Shore Staff Review | 2 | 29 | 58 | |
| Nursing Skills Assessment | 4 | 54 | 216 | |
| P.E.A.R.L.S. Recruitment | 1 | 7 | 7 | |
| Progressive Relaxation Instruction | 1 | 6 | 6 | |
| RGNS Team-Building Wrap-up | 2 | 61 | 122 | |
| Skills Assessment Planning | 1 | 5 | 5 | |
| Using HCAHPS Data Effectively Conference | 1 | 9 | 9 | |
| NextGen: Training Scheduling | 8 | 48 | 384 | |
| MLMC Med Staff Presentation | 2 | 14 | 28 | |
| Add Tr | aining Program | Remove Training Pro | ogram | |

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Project Indicators (Next Quarter)

1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).

Increase in the number of health education classes offered at the Amara Center with the participation of additional MD's from the County. Increase outreach efforts targeting school age children to make theri families aware of the downtown location. Increase outreach efforts to make visitors aware of the hours and availability of the PCC at the hospital campus.

2. Please provide the percent complete anticipated for the following key milestones in your project as of the end of the next quarter. Write "0" in the second column if your project does not include this activity. Figures should be reported cumulatively from award inception to the end of the next reporting quarter. Please provide a narrative description if the planned percent complete is different from the target provided in your baseline plan (300 words or less).

| | Milestone | Planned Percent Complete | Narrative (describe reasons for any variance from baseline plan or any relevant information) |
|------|--|--------------------------------|--|
| 2.a. | Overall Project | 94 | We anticipate being at 94% complete on the project at the end of next quarter. |
| 2.b. | Equipment / Supply Purchases | - | Milestone Data Not Required |
| 2.c. | 2.c. Public Computer Centers Established | | Milestone Data Not Required |
| 2.d. | Public Computer Centers Improved | - | Milestone Data Not Required |
| 2.e. | New Workstations Installed | - | Milestone Data Not Required |
| 2.f. | Existing Workstations Upgraded | - | Milestone Data Not Required |
| 2.g. | Outreach Activities | - | Milestone Data Not Required |
| 2.h. | Training Programs | - | Milestone Data Not Required |
| 2.i. | Other (please specify): | - | Milestone Data Not Required |

3. Please describe any challenges or issues anticipated during the next quarter that may impact planned progress against the project milestones listed above. In particular, please identify any areas or issues where technical assistance from the BTOP program may be useful (600 words or less).

Continue to increase the number of users at both locations. Provide additional CME classes for healthcare providers.

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Public Computer Center Budget Execution Details

Activity Based Expenditures (Public Computer Centers)

1. Please provide details below on your total budget, cumulative actual expenditures (for the period ending the current quarter), and cumulative anticipated expenditures (for the period ending next quarter) for each line item, including detailed disbursements of both matching funds and federal funds from project inception through end of this quarter (actual) or next quarter (anticipated). Actual and anticipated figures should be reported cumulatively from award inception to the end of the applicable reporting quarter.

| Budget for Entire Project | | | Actuals from Project Inception through End of Current Reporting Period | | | Anticipated Actuals from Project Inception through End of Next Reporting Period | | | |
|--|----------------------|-----------------------------|--|---------------|-------------------|---|----------------|-------------------|------------------|
| Cost Classification | Total Cost (plan) | Matching Funds (plan) | Federal Funds (plan) | Total Cost | Matching Funds | Federal Funds | Total Costs | Matching Funds | Federal Funds |
| a. Personnel | \$489,200 | \$193,500 | \$295,700 | \$218,521 | \$42,022 | \$176,499 | \$265,000 | \$57,000 | \$208,000 |
| b. Fringe Benefits | \$89,016 | \$48,375 | \$40,641 | \$25,405 | \$4,958 | \$20,447 | \$32,000 | \$7,000 | \$25,000 |
| c. Travel | \$6,000 | \$6,000 | \$0 | \$5,962 | \$5,962 | \$0 | \$5,962 | \$5,962 | \$0 |
| d. Equipment | \$346,498 | \$0 | \$346,498 | \$345,979 | \$0 | \$345,979 | \$345,979 | \$0 | \$345,979 |
| e. Supplies | \$146,854 | \$0 | \$146,854 | \$147,945 | \$2,831 | \$145,114 | \$150,000 | \$4,000 | \$146,000 |
| f. Contractual | \$244,775 | \$0 | \$244,775 | \$222,792 | \$0 | \$222,792 | \$222,792 | \$0 | \$222,792 |
| g. Construction | \$465,000 | \$465,000 | \$0 | \$700,151 | \$700,151 | \$0 | \$710,000 | \$710,000 | \$0 |
| h. Other | \$42,623 | \$20,000 | \$22,623 | \$71,082 | \$32,089 | \$38,993 | \$85,000 | \$41,000 | \$44,000 |
| i. Total Direct Charges (sum of a through h) | \$1,829,966 | \$732,875 | \$1,097,091 | \$1,737,837 | \$788,013 | \$949,824 | \$1,816,733 | \$824,962 | \$991,771 |
| j. Indirect Charges | \$137,397 | \$137,397 | \$0 | \$27,440 | \$27,440 | \$0 | \$30,000 | \$30,000 | \$0 |
| k. TOTALS (sum of i and j) | \$1,967,363 | \$870,272 | \$1,097,091 | \$1,765,277 | \$815,453 | \$949,824 | \$1,846,733 | \$854,962 | \$991,771 |

2. Program Income: Please provide the program income you listed in your application budget and actuals to date through the end of the reporting period.

a. Application Budget Program Income: \$0

b. Program Income to Date: \$0