

Washington Township Health Care District

2000 Mowry Avenue, Fremont, California 94538-1716 • (510) 797-1111 Nancy Farber, Chief Executive Officer

Board of Directors Patricia Danielson, RHIT Jacob Eapen, M.D. William F. Nicholson, M.D. Bernard Stewart, D.D.S. Michael J. Wallace

BOARD OF DIRECTORS' MEETING

Wednesday, February 8, 2017 – 6:00 P.M. Conrad E. Anderson, MD Auditorium

AGENDA

PRESENTED BY:

I. CALL TO ORDER & PLEDGE OF ALLEGIANCE

Williams Nicholson, MD Board Member

II. ROLL CALL

Dee Antonio District Clerk

III. EDUCATION SESSION:

Concussion: The Invisible Injury

Steven Zonner, M.D.

Occupational and Sports Medicine

IV. CONSIDERATION OF MINUTES

January 11, 23, and 25, 2017

Motion Required

VIII. COMMUNICATIONS

A. Oral

B. Written

From Kranthi Achanta, MD Chief of Staff, dated January 23, 2017 requesting approval of Medical Staff Credentialing Action Items.

Motion Required

IX. INFORMATION

PRESENTED BY:

A. Service League Report

Debbie Jackson Service League

B. Medical Staff Report

Kranthi Achanta, MD

Chief of Staff

C. Hospital Calendar

Nancy Farber

Chief Executive Officer

Board Meeting Agenda February 8, 2017 Page 2

> D. Lean/Kaizen Report: Revenue Cycle Lean Journey

Chris Henry

Senior Associate Administrator and

Chief Financial Officer

Sandi Adcock

Senior Director Patient Financial

Services

E. Construction Report

Ed Fayen

Senior Associate Administrator

F. Quality Report: Falls Prevention Update Mary Bowron, DNP, RN, CIC

Senior Director of Quality & Resource

Management

G. Finance Report

Chris Henry

Senior Associate Administrator and

Chief Financial Officer

H. Hospital Operations Report

Nancy Farber

Chief Executive Officer

X. ACTION

A. Instrument Tracking System

B. Pneumatic Tube System Upgrade

C. Nova Glucose Meters

D. Portable Ultrasound Machine – Mindray

E. SonoSite Edge II Ultrasound System

XI. ADJOURN TO CLOSED SESSION

In accordance with Section 1461, 1462, 32106 and 32155 of the California health & Safety Code and Sections 54962 and 54954.5 of the California Government Code, portions of this meeting may be held in closed session.

- A. Report and discussion regarding California Government Code section 54957: Personnel matters
- B. Conference regarding medical audit reports, quality assurance reports and privileging pursuant to Health & Safety Code Section 32155.
- C. Report involving a trade secret pursuant to Health & Safety Code section 32106

Motion Required

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XII RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

William Nicholson, MD Board Member

XIII. ADJOURNMENT

William Nicholson, MD Board Member A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, January 11, 2017 in the Conrad E. Anderson, MD Auditorium, 2500 Mowry Avenue, Fremont, California. Director Nicholson called the meeting to order at 6:00p.m. and led those present in the Pledge of Allegiance.

CALL TO ORDER

Roll call was taken: Directors present: William Nicholson, MD; Bernard Stewart, DDS; Michael Wallace; Patricia Danielson, RHIT. Directors absent: Jacob Eapen, MD

ROLL CALL

Also present: Ed Fayen, Senior Associate Administrator; Kranthi Achanta, Chief of Medical Staff; Debbie Jackson, Service League 1st President; Dee Antonio, District Clerk

Guests: Chris Henry, Bryant Welch, Stephanie Williams, Tina Nunez, Kristin Ferguson, Mary Bowron, Albert Brooks, MD, Angus Cochran, Donald Pipkin, Lisalee Wells, Gordon Howie

COMMUNICATIONS

Director Nicholson stated: "Next item on the Agenda. Ordinance No. 17-01, Approving a Formal Agreement for the Private Sale of the Washington Township Health Care District Revenue Bonds, 2017 Series A. This Ordinance approves the form of Bond Purchase Contract for the negotiated sale of the Bonds to the Underwriter pursuant to the California Health and Safety Code. The Ordinance will be brought back to the Board for a second reading thereof. In addition, a Resolution approving the bond issuance and approving the form of other necessary documents will be brought for approval at a future meeting of the Board." Director Nicholson opened the floor to questions from members of the Board. There were no questions. Director Nicholson opened the floor to comments from members of the public. There were no comments.

Director Nicholson gave the first reading of Ordinance 17-01: "Washington Township Health Care District Ordinance No. 17-01 Approving a Formal Agreement for the Private Sale of the Washington Township Health Care District Revenue Bonds, 2017 Series A."

A copy of the ordinance is attached to these minutes.

Ed Fayen, Senior Associate Administrator, introduced Steven Pantilat, MD, Director of the UCSF Palliative Care Leadership Center and Director of the Palliative Care Quality Network. Dr. Pantilat presented information on what terminally ill patients want for their end of life, stating that Palliative Care is medical care focused on improving quality of life for people with serious illnesses. He noted that Palliative Care increases quality and lowers cost for the most seriously ill people. With Palliative Care, patient can experience a better quality of life, improved symptoms, higher satisfaction; they are less likely to get invasive care at the end of life. Patients that are appropriate for Palliative Care include those with serious illness, increased utilization of services, and decreased function.

EDUCATION SESSION: PALLIATIVE CARE

Director Danielson moved for approval of the minutes of December 14 and 19, 2016.

APPROVAL OF MINUTES OF December 14 and 19, 2016

Director Stewart seconded the motion.

Roll call was taken:

William Nicholson, MD - aye Bernard Stewart, DDS - aye Michael Wallace – aye Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

The motion unanimously carried.

There were no oral communications.

COMMUNICATIONS: ORAL

The following written communication received from Kranthi Achanta, MD., Chief of Staff, dated November 28, 2016 requesting approval of Medical Staff Credentialing Action Items as follows:

COMMUNICATIONS: WRITTEN

Appointments:

Ahmed, Sumera MD; Bederov, Igor MD; Dao, Catherine MD; Goldberg, Andrew MD; Guo, Lei MD; Mishra, Vikash MD; Navani, Annu MD; Umapathy, Krisnamurthy MD

Temporary Privileges:

Ahmed, Sumera MD; Dao, Catherine MD; Goldberg, Andrew MD; Guo, Lei MD; Mishra, Vikash MD; Umapathy, Krisnamurthy MD

Reappointments:

Chiang, Stephanie MD; Cho, Joyce MD; Eftimie, Bogdan MD; Folan, Luis MD; Lam, Lisa MD; Li, Wendie MD; Sagoo, Daljeet MD

Conditional Reappointments

Ali, Zulfiqar MD

Transfer in Staff Category Goldberg, Roger, MD

Completion of Proctoring & Advancement in Staff Category

Pham, Alexander MD

Completion of Proctoring Prior to Eligibility & Advancement in Staff Category Amin, Nivek MD

New Privilege Requests

Agcaoili, Carmen MD; Mogalo, AmyCecilia MD

Withdrawal of Application

Jampana, Sarat MD; Bui, Lynne MD

Director Wallace moved for approval of the credentialing action items presented by Dr. Achanta.

Director Stewart seconded the motion.

Roll call was taken:

William Nicholson, MD - aye Bernard Stewart, DDS - aye Michael Wallace – aye Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

The motion unanimously carried.

Debbie Jackson, Service League, presented the Service League Report. The Service League Annual Meeting is scheduled for February 14, 2017. Total staffing hours for the month of December: 2703 hours. The Service League has decided to continue their Toy Drive as an annual event.

SERVICE LEAGUE REPORT

Dr. Kranthi Achanta reported there are 588 Medical Staff members which includes 358 active members.

MEDICAL STAFF REPORT

The Hospital Calendar video highlighted the following events:

HOSPITAL CALENDAR: Community Outreach

Past Health Promotions & Outreach Events

On Tuesday, December 13th, the Washington Hospital Management Staff donated hundreds of presents including bicycles, clothing and toys to Tri-City area families in need. The families were identified through OneChild. OneChild is a non-profit organization dedicated to providing disadvantaged children with new clothing and school supplies. OneChild's goal is to promote self-esteem in underprivileged children, so they may appreciate their individual worth.

During the month of December Lucy Hernandez, Community Outreach Project Manager, provided 20 hand hygiene presentations for students at Cabrillo Elementary, Chadbourne Elementary, Maloney Elementary, and Vallejo Mill Elementary schools in Fremont and Kennedy Elementary school in Newark. Information was provided on proper hand washing and hygiene to prevent infection and the spread of germs. 465 students participated.

On Thursday, January 5th, as part of the Diabetes Matters Series, Anna Mazzei, Registered Dietitian, presented, "Mindful Eating in the New Year." 25 people attended.

Upcoming Health Promotions & Community Outreach Events

On Sunday, January 15th from 8 am to noon, Washington On Wheels Mobile Health Clinic and Washington Hospital staff will host a free community flu vaccine clinic at the Our Lady of the Rosary Church in Union City.

On Thursday, January 19th, from 7 to 8:30 pm, as part of the Women Empowering Women series, Dr. Victoria Leiphart, gynecologist, will present "On Your Mark, Get Set, Goal! A Healthier You in 2017."

On Thursday, February 2nd, from 6 to 8 pm, Dr. Seema Sehgal, psychiatry, will present "Understanding Mental Health Disorders."

Also, on Thursday, February 2nd, from 7 to 8 pm, as part of the Diabetes Matters Series, Dr. Ash Jain, cardiologist, will present, "Caring for Your Heart."

On Tuesday, February 7th, from 6 to 8 pm, as part of the Stroke Education Series, Dr. Ash Jain, cardiologist, and Melissa Reyes, RN, will present, "Living with Stroke" and "Future in Diagnosis and Management."

Washington Hospital Healthcare Foundation

Washington Hospital Healthcare Foundation received two community gifts in December. On December 19th, president of Wooly Warmth, Mythri Ambatipudi, delivered a large collection of hand-knitted items for pediatric patients. Wooly Warmth is a group of volunteers who provide handmade, knitted and crocheted warm clothing to the families of newborns to keep their little ones cozy, comfortable and healthy.

On December 20th, the Leos Club of James Logan High School donated 150 holiday cards for patients at Washington Hospital. The cards were distributed to patients in the hospital during the holidays. The Leo club is the high-school affiliate of the Union City Lions Club.

The trustees of the Foundation thank these groups for contributing gifts that benefits the patients of Washington Hospital.

On Thursday, December 15th, the Washington Township Healthcare District Board members attended the Newark Chamber of Commerce Holiday Luncheon.

Washington On Wheels Mobile Health Clinic, W.O.W.

During the month of September, the Washington On Wheels Mobile Health Clinic (W.O.W.) continued to serve community members at the Fremont Family Resource Center, the Fremont Senior Center and the Ruggieri Senior Center in Union City.

The total number of community members receiving health care from the Washington On Wheels Clinic during the month of December was 23.

Internet Marketing

There were 21,420 visits to the hospital website in the month of September. The hospital's Employment section was the most viewed webpage with 21,850 page views, followed by the Physicians section with 9,543 page views and the About WHHS section with 8,262 page views. The Volunteers section had 2,749 page views and the Patients & Visitors section had 2,704 page views.

InHealth - Channel 78

During the month of December, Washington Hospital's cable channel 78, InHealth, captured new programming including a Sports Medicine Program called "Why Does My Shoulder Hurt?"

In addition, InHealth aired the December Board of Directors meeting.

HOSPITAL CALENDAR: Washington Hospital Foundation Report

HOSPITAL CALENDAR: District Board of Directors Report

HOSPITAL CALENDAR: Washington On Wheels Mobile Health Van

HOSPITAL CALENDAR: Internet Report

HOSPITAL CALENDAR: InHealth

Employee of the Month

Health Insurance Information Coordinator, Kristi Caracappa, is January's Employee of the Month. Kristi is an individual that consistently exemplifies the Patient First Ethic philosophy through all her work here at Washington Hospital. Kristi joined Washington Hospital as the Health Insurance Information Coordinator in 2012 and prior to that worked as a contractor for us in that role. She has helped countless community members on navigating the complicated world of insurance benefits. She just finished a very busy period of time – open enrollment with the Medicare community members. She demonstrates patients and a willingness to help individuals through the complicated maze. This is further validated through the community health and wellness seminars that she puts on and the evaluations highlight her expert knowledge; it reassures many patrons they are receiving nonbias quality insurance advice. Kristi goes beyond our community. She is dedicated to our fellow employees by serving as WHEA president for the past two years. Also for the last two years she has provided the leadership and logistics as the Employee Recognition Dinner coordinator. Her attention to detail and execution is impressive. Her colleagues describe her as a "team player;" an "I will find you an answer" colleague. She always has a pleasant demeanor with her clients and anyone else she comes into contact with. She is the first to ask someone if they need help if they appear lost – regardless of her busy schedule.

Mr. Fayen introduced Robert Alfieri, Chief of Facilities, who presented the construction update on the Morris Hyman Critical Care Pavilion. Mr. Alfieri shared photos of the exterior metal panels and glazing on the north side and southeast corner, pulling wires for low voltage systems on the ground floor, power distribution equipment on the ground floor electrical room, drywall in progress on the first floor ED area, primer sealer on drywall on the first floor north, testing the plumbing and piping systems in progress, the metal ceiling panel installation above the landscape garden on the third floor east side, the sheathing around the south exterior courtyard third floor, terrace area north end of the third floor, the duct and hydroponic piping starting in the penthouse, and the exterior plaster on the penthouse east wall, ending with a view of the construction site.

Mr. Fayen introduced Mary Bowron, Senior Director of Quality & Resource Management who presented the Washington Hospital Surgical Site Infection Prevention program. A surgical site infection is an infection that occurs after surgery in the part of the body where surgery took place within 30 post-operative days or within 90 days if an implant has been placed. It was noted that under CMS' Hospital Acquired Condition Reduction Program, the lowest performing hospitals (bottom 25% nationwide) lose 1% of all Medicare payments for a given fiscal year and are scored on Patient Safety and Infection Control. SSIs account for 20% of all national healthcare-associated infections and costs associated with SSIs are estimated to be \$10B nationally. Ms. Bowron reviewed Washington Hospital's focus on quality monitoring and the focus by the Infections Prevention Committee on increasing safety and decreasing surgical site infection rates. Over the past two years, Washington Hospital's surgical site infection rate has been lower than expected with a significantly lower infection rate as of January 2016. Washington

HOSPITAL
CALENDAR: Employee
of the Month – Zachary
Heald

CONSTRUCTION
REPORT
Construction Update

QUALITY REPORT: Surgical Site Infection Prevention

Hospital has scored among the top percent of national hospitals for hospital-acquired conditions with no penalties accrued for all three years of the program. Washington Hospital was in the top 30% of hospitals throughout the nation for low (colon and hysterectomy) surgical site infection rates.

Chris Henry, Chief Financial Officer, presented the Finance Report for November 2016. The average daily census was 145.3 with admissions of 950 resulting in 4,358 patient days. Outpatient observation equivalent days were 232. The average length of stay was 4.58 days. The case mix index was 1.495. Deliveries were 145. Surgical cases were 403. Joint Replacement cases were 137. Neurosurgical cases were 25. Cardiac Surgical cases were 13. The Outpatient visits were 6,833 and Emergency visits were 4,212. Total productive FTEs were 1,234,1. FTEs per adjusted occupied bed were 6.87.

FINANCE REPORT

Mr. Fayen presented the Hospital Operations Report for December 2016. Preliminary information indicated inpatient revenue for the month of December at approximately \$130,300,000. The Average Length of Stay of 4.77 and there were 5,311 patient days. There were 368 Surgical Cases and 352 Cath Lab procedures at the Hospital. Deliveries for November were 146. Non-Emergency Outpatient visits were 6,426. FTEs per Adjusted Occupied Bed were 6.10. The Washington Outpatient Surgery Center had 516 cases and the clinics saw approximately 3,902 patients.

HOSPITAL OPERATIONS REPORT

In accordance with District Law, Policies and Procedures, Director Stewart moved the Chief Executive Officer be authorized to enter into the necessary contracts and proceed with the purchase of the software and professional services for a total amount not to exceed \$125,691.

APPROVAL OF THE TISSUE TRACKCORE

Director Danielson seconded the motion. Roll call was taken:

> William Nicholson, MD - aye Bernard Stewart, DDS - aye Michael Wallace – aye Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

The motion unanimously carried.

In accordance with District Law, Policies and Procedures, Director Stewart moved the Chief Executive Officer be authorized to enter into the necessary contracts and proceed with the purchase of the software and professional services for a total amount not to exceed \$122,159.

APPROVAL OF DATA LOSS PREVENTION

Director Wallace seconded the motion. Roll call was taken:

> William Nicholson, MD - aye Bernard Stewart, DDS - aye Michael Wallace – aye

> Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

The motion unanimously carried.

In accordance with Health & Safety Code Sections 1461, 1462 and 32106 and Government Section 54954.5(h) Director Nicholson adjourned the meeting to closed session at 7:26 pm, as the discussion pertained to Hospital trade secrets, Human Resources matters and Risk Management.

ADJOURN TO CLOSED SESSION

Director Nicholson reconvened the meeting to open session at 7:59 pm and reported no action was taken in closed session.

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

There being no further business, Director Nicholson adjourned the meeting at 7:59 pm.

ADJOURNMENT

William Nicholson, MD President Patricia Danielson, RHIT Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, January 23, 2017 in the Fremont Conference Room, Washington Hospital, 2000 Mowry Avenue, Fremont, California. Director Nicholson called the meeting to order at 7:30 a.m.

CALL TO ORDER

Roll call was taken. Directors present: William Nicholson, MD; Bernard Stewart, DDS; Patricia Danielson, RHIT

ROLL CALL

Excused: Michael Wallace; Jacob Eapen, MD

Also present: Kranthi Achanta, MD; Timothy Tsoi, MD; Peter Lunny, MD; Kimberly Hartz, Senior Associate Administrator

There were no oral or written communications.

COMMUNICATIONS

Director Nicholson adjourned the meeting to closed session at 7:30 a.m. as the discussion pertained to Medical Audit and Quality Assurance Matters pursuant to Health & Safety Code Sections 1461 and 32155.

ADJOURN TO CLOSED SESSION

Director Nicholson reconvened the meeting to open session at 8:30 a.m. and reported no reportable action was taken in closed session.

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

There being no further business, the meeting was adjourned at 8:30 a.m.

ADJOURNMENT

William Nicholson, MD President Patricia Danielson, RHIT Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, January 25, 2017 in the Board Room, 2000 Mowry Avenue, Fremont, California. Director Nicholson called the meeting to order at 6:00 p.m. and led those present in the Pledge of Allegiance.

CALL TO ORDER

Roll call was taken. Directors present: William Nicholson, MD; Bernard Stewart, DDS; Patricia Danielson, RHIT

ROLL CALL

Excused: Michael Wallace; Jacob Eapen, MD

Also present: Kimberly Hartz, Senior Associate Administrator; Ed Fayen, Senior Associate Administrator; Chris Henry, Associate Administrator; Stephanie Williams, Associate Administrator; Tina Nunez, Associate Administrator; Bryant Welch, Associate Administrator; Paul Kozachenko, Legal; Colleen Doerr, Sr. Executive Assistant II

COMMUNICATIONS

There were no oral communications.

There were no written communications.

In accordance with Health & Safety Code Sections 32106 and Government Section 54957, Director Nicholson adjourned the meeting to closed session at 6:00 p.m., as the discussion pertained to Hospital trade secrets, Human Resource matters, and Risk Management.

ADJOURN TO CLOSED SESSION

Director Nicholson reconvened the meeting to open session at 7:00 p.m. and reported no reportable action was taken in closed session.

In accordance with District Law, Policies and Procedures, Director Stewart moved that the bid received from James R. Griffin, Inc. for the Administrative Office and Kaizen Promotion Office Build Out Project be approved for a total amount not to exceed \$652,244.

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

CONSIDERATION OF BIDS FOR ADMINISTRATIVE OFFICE AND KAIZEN PROMOTION OFFICE BUILD OUT PROJECT

Director Wallace seconded the motion.

Roll call was taken:

William Nicholson, MD – aye Bernard Stewart, DDS – aye Michael Wallace – aye Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

The motion carried.

In accordance with District Law, Policies and Procedures, Director Stewart moved that the contingency budget for the Administrative Office and Kaizen Promotion Office Build Out Project be increased by \$30,000.

Director Wallace seconded the motion.

Roll call was taken:

William Nicholson, MD – aye Bernard Stewart, DDS – aye

> Michael Wallace – aye Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

The motion carried.

In accordance with District Law, Policies and Procedures, Director Stewart moved for the reappointment of Benn Sah, MD, Shirley Buschke, Russ Blowers, Miro Garcia, and Gloria Villasana Fuerniss to the Washington Hospital Development Corporation Board of Directors for 2017.

CONSIDERATION OF REAPPOINTMENT TO THE WASHINGTON TOWNSHIP HOSPITAL DEVELOPMENT CORPORATION

Director Wallace seconded the motion.

Roll call was taken:

William Nicholson, MD – aye Bernard Stewart, DDS – aye Michael Wallace – aye Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

The motion carried.

In accordance with District Law, Policies and Procedures, Director Stewart moved for the denial of a claim presented on December 22, 2016 on behalf of Andrew Malarski and that the Chief Executive Officer be directed to provide notice in accordance with government code section 945.6.

CONSIDERATION OF CLAIM: MALARSKI

Director Stewart seconded the motion.

Roll call was taken:

William Nicholson, MD – aye Bernard Stewart, DDS – aye Michael Wallace – aye Patricia Danielson, RHIT – aye Jacob Eapen, MD – absent

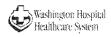
The motion carried.

There being no further business, Director Nicholson adjourned the meeting at 7:03 p.m.

ADJOURNMENT

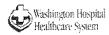
William Nicholson, MD President Patricia Danielson, RHIT

Secretary



WASHINGTON HOSPITAL MONTHLY OPERATING REPORT

December 2016



WASHINGTON HOSPITAL INDEX TO BOARD FINANCIAL STATEMENTS December 2016

Schedule

Reference Schedule Name

Board - 1 Statement of Revenues and Expenses

Board - 2 Balance Sheet

Board - 3 Operating Indicators

DATE:

February 3, 2017

TO:

Board of Directors

FROM:

Nancy Farber

SUBJECT:

Washington Hospital – December 2016

Operating & Financial Activity

SUMMARY OF OPERATIONS – (Blue Schedules)

1. Utilization – Schedule Board 3

ACUTE INPATIENT:	December <u>Actual</u>	Budget	Current 12 Month Avg.
Average Daily Census # of Admissions Patient Days Discharge ALOS	171.3	153.4	154.8
	1,068	1,026	1,002
	5,311	4,754	4,721
	4.77	4.63	4.64
OUTPATIENT:	December <u>Actual</u>	Budget	Current 12 Month Avg.
OP Visits	6,426	7,274	6,924
ER Visits	4,661	4,425	4,436
Observation Equivalent Days – OP	214	218	249

Comparison of December acute inpatient statistics to those of the budget showed a higher level of admissions and a higher level of patient days. The average length of stay (ALOS) based on discharged days was above budget. Outpatient visits were lower than budget. Emergency Room visits were above budget for the month.

2. Staffing – Schedule Board 3

Total paid FTEs were 10.1 above budget. Total productive FTEs for December were 1,151.1, 60.7 below the budgeted level of 1,211.8. Nonproductive FTEs were 70.8 above budget. Productive FTEs per adjusted occupied bed were 5.00, 0.86 below the budgeted level of 5.86. Total FTEs per adjusted occupied bed were 6.10, 0.63 below the budgeted level of 6.73.

3. Income - Schedule Board 1

For the month of December the Hospital realized a gain of \$2,888,000 from operations.

Total Gross Patient Service Revenue of \$174,922,000 for December was 3.1% above budget.

Deductions from Revenue of \$133,822,000 represented 76.50% of Total Gross Patient Service Revenue. This percentage is above the budgeted amount of 76.38%.

Total Operating Revenue of \$41,700,000 was \$1,058,000 (2.6%) above the budget.

Total Operating Expense of \$38,812,000 was \$1,827,000 (4.5%) below the budgeted amount.

The Total Non-Operating Gain of \$1,477,000 for the month of December includes an unrealized loss on investments of \$137,000 and property tax revenue of \$1,344,000. This property tax revenue will be used to pay the debt service for the general obligation bonds.

The Total Net Gain for December was \$4,365,000, which was \$2,681,000 more than the budgeted gain of \$1,684,000.

The Total Net Gain for December using FASB accounting principles, in which the unrealized loss on investments and property tax revenues are removed from the non-operating income and expense, was \$3,158,000 compared to a budgeted gain of \$289,000.

4. Balance Sheet – Schedule Board 2

In the month of December, the Hospital contributed \$22 million to the pension plan, resulting in a substantial reduction in the net pension liability.

There were no other noteworthy changes in assets and liabilities when compared to November 2016.

NANCY FARBER Chief Executive Officer

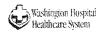
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WASHINGTON HOSPITAL STATEMENT OF REVENUES AND EXPENSES December 2016 GASB FORMAT (In thousands)

					(III tilousalius)					
DECEMBER					YEAR TO DATE					
ACTUAL	FAV BUDGET (UNFAV) % VAR		% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.	
				1	OPERATING REVENUE					
\$ 130,268	\$ 125,754	\$ 4,514	3.6%	2	INPATIENT REVENUE	\$ 702,092	\$ 747,840	\$ (45,748)	-6.1%	
44,654	43,844	810	1.8%	3	OUTPATIENT REVENUE	276,628	263,359	13,269	5.0%	
174,922	169,598	5,324	3.1%	4	TOTAL PATIENT REVENUE	978,720	1,011,199	(32,479)	-3.2%	
(133,822)	(129,547)	(4,275)	-3.3%	5	CONTRACTUAL ALLOWANCES	(752,356)	(772,630)	20,274	2.6%	
76.50%	76.38%			6	CONTRACTUAL AS % OF REVENUE	76.87%	76.41%			
41,100	40,051	1,049	2.6%	7	NET PATIENT REVENUE	226,364	238,569	(12,205)	-5.1%	
600	591	9	1.5%	8	OTHER OPERATING INCOME	3,716	2,780	936	33.7%	
41,700	40,642	1,058	2.6%	9	TOTAL OPERATING REVENUE	230,080	241,349	(11,269)	-4.7%	
				10	OPERATING EXPENSES					
16,065	16,834	769	4.6%	11	SALARIES & WAGES	91,419	93,319	1,900	2.0%	
5,672	5,476	(196)	-3.6%	12	EMPLOYEE BENEFITS	33,346	34,156	810	2.4%	
4,282	4,446	164	3.7%	13	SUPPLIES	25,705	27,034	1,329	4.9%	
5,073	5,462	389	7.1%	14	PURCHASED SERVICES & PROF FEES	29,452	31,185	1,733	5.6%	
1,320	1,504	184	12.2%	15	INSURANCE, UTILITIES & OTHER	8,414	8,957	543	6.1%	
2,815	3,263	448	13.7%	16	PROVISION FOR DOUBTFUL ACCOUNTS	19,846	20,185	339	1.7%	
2,853	2,853	-	0.0%	17	DEPRECIATION	17,002	17,002	-	0.0%	
732	801	69	8.6%	18	INTEREST EXPENSE	4,478	4,835	357	7.4%	
38,812	40,639	1,827	4.5%	19	TOTAL OPERATING EXPENSE	229,662	236,673	7,011	3.0%	
2,888	3	2,885	96166.7%	20	OPERATING INCOME (LOSS)	418	4,676	(4,258)	-91.1%	
6.93%	0.01%			21	OPERATING INCOME MARGIN %	0.18%	1.94%			
				22	NON-OPERATING INCOME & (EXPENSE)					
264	224	40	17.9%	23	INVESTMENT INCOME	1,521	1,332	189	14.2%	
(19)	_	(19)	0.0%	24	REALIZED GAIN/(LOSS) ON INVESTMENTS	96	-	96	0.0%	
25	62	(37)	-59.7%	25	RENTAL INCOME, NET	293	374	(81)	-21.7%	
1,344	1,395	(51)	-3.7%	26	PROPERTY TAX REVENUE	8,084	8,229	(145)	-1.8%	
(137)		(137)	0.0%	27	UNREALIZED GAIN/(LOSS) ON INVESTMENTS	(3,073)		(3,073)	0.0%	
1,477	1,681	(204)	-12.1%	28	TOTAL NON-OPERATING INCOME & EXPENSE	6,921	9,935	(3,014)	-30.3%	
\$ 4,365	\$ 1,684	\$ 2,681	159.2%	29	NET INCOME (LOSS)	\$ 7,339	\$ 14,611	\$ (7,272)	-49.8%	
10.47%	4.14%			30	NET INCOME MARGIN %	3.19%	6.05%			
\$ 3,158	\$ 289	\$ 2,869	992.7%	31	NET INCOME (LOSS) USING FASB PRINCIPLES**	\$ 2,328	\$ 6,382	\$ (4,054)	-63.5%	
7.57%	0.71%				NET INCOME MARGIN %	1.01%	2.64%			

^{**}NET INCOME (FASB FORMAT) EXCLUDES PROPERTY TAX INCOME AND UNREALIZED GAIN(LOSS) ON INVESTMENTS



WASHINGTON HOSPITAL BALANCE SHEET

December 2016 (In thousands)

	ASSETS AND DEFERRED OUTFLOWS	DECEMBER 2016	AUDITED JUNE 2016		LIABILITIES, NET POSITION AND DEFERRED INFLOWS		DECEMBER 2016		AUDITED JUNE 2016	
	CURRENT ASSETS					CURRENT LIABILITIES				
1	CASH & CASH EQUIVALENTS	\$ 35,348	\$	38,459	1	CURRENT MATURITIES OF L/T OBLIG	\$	6,447	\$	5,056
2	ACCOUNTS REC NET OF ALLOWANCES	62,024		62,580	2	ACCOUNTS PAYABLE		38,006		42,079
3	OTHER CURRENT ASSETS	11,348		8,018	3	OTHER ACCRUED LIABILITIES		59,561		57,095
4	TOTAL CURRENT ASSETS	108,720		109,057	4	INTEREST		11,699		11,321
•	TO THE SOURCE THE SOUR	·			5	TOTAL CURRENT LIABILITIES		115,713		115,551
	ASSETS LIMITED AS TO USE					LONG-TERM DEBT OBLIGATIONS				
6	BOARD DESIGNATED FOR CAPITAL AND OTHER	186,013		187,431	6	REVENUE BONDS AND OTHER		198,614		204,019
7	GENERAL OBLIGATION BOND FUNDS	116,708		184,470	7	GENERAL OBLIGATION BONDS		341,045		342,546
8	REVENUE BOND FUNDS	8,391		10,441						
9	BOND DEBT SERVICE FUNDS	21,561		25,041		OTHER LIABILITIES				
10	OTHER ASSETS LIMITED AS TO USE	15,478		15,591	10	NET PENSION LIABILITY		38,072		52,960
11	TOTAL ASSETS LIMITED AS TO USE	348,151		422,974	11	WORKERS' COMP		9,504		9,057
• • •	10 1/L //30210 225 //3 / 3 / 3	,			12	SUPPLEMENTAL MEDICAL RETIREMENT		40,428		38,791
13	OTHER ASSETS	148,136		139,895						
14	NET PROPERTY, PLANT & EQUIPMENT	561,465		505,967	14	NET POSITION		432,755		425,416
15	TOTAL ASSETS	\$ 1,166,472	\$	1,177,893	15	TOTAL LIABILITIES AND NET POSITION	\$	1,176,131	\$	1,188,340
16	DEFERRED OUTFLOWS	22,557		27,061	16	DEFERRED INFLOWS		12,898		16,614
17	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 1,189,029	\$	1,204,954	17	TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	\$	1,189,029	\$	1,204,954



WASHINGTON HOSPITAL OPERATING INDICATORS

December 2016

	DECEMBER						YEAR TO DATE			
12 MONTH AVERAGE	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.
						PATIENTS IN HOSPITAL				
154.8 8.2	171.3 6.9	153.4 7.0 11.0	17.9 (0.1) (0.4)	12% -1% -4%	1 2 3	ADULT & PEDS AVERAGE DAILY CENSUS OUTPT OBSERVATION AVERAGE DAILY CENSUS WELLBORN NURSERY AVERAGE DAILY CENSUS	148.2 8.4 10.6	152.8 6.8 10.8	(4.6) 1.6 (0.2)	-3% 24% -2%
10.9 173.9	188.8	171.4	17.4	10%	4	TOTAL	167.2	170.4	(3.2)	-2%
4.2	5.4	3.9	1.5	38%	5	SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *	4.3	3.9	0.4	10%
4,721	5,311	4,754	557	12%	6	ADULT & PEDS PATIENT DAYS	27,267	28,114	(847)	-3%
1,002	1,068	1,026	42	4%	7	ADMISSIONS-ADULTS & PEDS	5,732	5,871	(139)	-2%
4.64	4.77	4.63	0.14	3%	8	AVERAGE LENGTH OF STAY-ADULTS & PEDS	4.64	4.79	(0.15)	-3%
						OTHER KEY UTILIZATION STATISTICS				
1.527	1.438	1.566	(0.128)	-8%	9	OVERALL CASE MIX INDEX (CMI)	1.521	1.554	(0.033)	-29
134	129	143	(14)	-10% 19%	10 11	SURGICAL CASES JOINT REPLACEMENT CASES NEURO SURGICAL CASES	785 150	819 148	(34) 2	-49 19
25 10 206	19 5 215	16 9 223	3 (4) (8)	-44%	12 13	CARDIAC SURGICAL CASES GENERAL SURGICAL CASES	63 1,229	58 1,430	5 (201)	9% -14%
375	368	391	(23)	-	14	TOTAL SURGICAL CASES	2,227	2,455	(228)	-9
356	352	376	(24)	-6%	15	TOTAL CATH LAB PROCEDURES	2,067	2,308	(241)	-10
152	146	161	(15)	-9%	16	DELIVERIES	895	920	(25)	-39
6,924 4,436	6,426 4,661	7,274 4,425	(848) 236	-12% 5%	17 18	OUTPATIENT VISITS EMERGENCY VISITS	40,739 25,910	44,137 25,544	(3,398) 366	-8' 1'
						LABOR INDICATORS				
1,206.1 187.8	1,151.1 252.1	1,211.8 181.3	60.7 (70.8)	5% -39%	19 20	PRODUCTIVE FTE'S NON PRODUCTIVE FTE'S	1,186.2 193.9	1,216.9 183.7	30.7 (10.2)	3 -6
1,393.9	1,403.2	1,393.1	(10.1)	_	21	TOTAL FTE'S	1,380.1	1,400.6	20.5	1
5.71 6.60	5.00 6.10	5.86 6.73	0.86 0.63	15% 9%	22 23	PRODUCTIVE FTE/ADJ. OCCUPIED BED TOTAL FTE/ADJ. OCCUPIED BED	5.74 6.68	5.89 6.78	0.15 0.10	3° 1°

^{*} included in Adult and Peds Average Daily Census

DATE:

January 25, 2017

TO:

Nancy Farber, Chief Executive Officer

FROM:

Edward Fayen, Sr. Associate Administrator

SUBJECT:

Instrument Tracking System

One of the many inputs to a successful surgery is proper instrumentation. Inpatient surgery today is very complex and requires multiple instrument trays and literally dozens of instruments. The process of cleaning, sorting, organizing, sterilizing and delivering instrument trays is the responsibility of the Central Processing Department and, and to a lesser extent, the Operating Room. There are a number of hand-offs in this process and it is problem prone.

It has become state-of-the-art for Central Processing Departments and Operating Rooms to have a computerized tracking system to monitor the instrument sets as they go through the above described process to insure that all sets are complete and properly sterilized. These systems also tie in the autoclaves in both the Central Processing Department and the Operating Room so that instrument sets are identified as they go into the autoclaves, complete cycling of instruments recorded, biological test results recorded, and alarms set off should complete sterilization not occur. In addition, the system will track missing instruments and the exact location of any instrument tray or container in either the Central Processing Department or the Operating Room.

This project was included in the Fiscal Year 2017 IT Capital Budget. The budget for this project is \$263,183.00.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into the necessary contracts and proceed with the purchase of the hardware, software and implementation services for the instrument-tracking project for a total amount not to exceed \$263,183.00.

DATE:

January 25, 2017

TO:

Nancy Farber, Chief Executive Officer

FROM:

Edward Fayen, Sr. Associate Administrator

SUBJECT:

Pneumatic Tube System Upgrade

When we complete the Morris Hyman Pavilion, we will be connecting the pneumatic tube system from the main hospital building to the Morris Hyman Pavilion so that there will be a seamless transfer of pneumatic tubes between the main hospital, Morris Hyman Pavilion and the 2500 Building. In order to complete this, we will need to upgrade the pneumatic tube system, which was installed when the six-story tower was built in the 1970's (and updated once with the opening of the 2500 Building). The pneumatic tube system will have to be upgraded to a digital computerized system from its current analog configuration. Upgrades to the transfer stations, system chutes, and the exchange table that reroutes tubes to their proper locations will also be included in this project. The upgrade will change the tubes to a clamshell type which, while the same overall size as the current carriers, carry a greater capacity due to the loading mechanism.

The pneumatic tube system upgrade was included in the Fiscal Year 2017 capital project budget for an amount not to exceed \$245,050.00.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into the necessary contracts and proceed with the purchase of a pneumatic tube system upgrade by Pneumatic Tube Products for a total amount not to exceed \$254,050.00.

DATE:

January 23, 2017

TO:

Nancy Farber, Chief Executive Officer

FROM:

Ed Fayen, Sr. Associate Administrator

John Lee, Chief Information Officer

SUBJECT:

Nova Glucose Meters

Point of Care glucose testing is performed on a regular basis by our nursing staff. Existing meters are in need of replacement as they are now five years old and end of life. In addition, the existing meters fail to scan some armbands as they are not capable of reading a two dimensional barcode and the one dimensional barcode can be difficult to scan successfully. New StatStrip Glucose Hospital Meters from Nova Biomedical are capable of scanning the two dimensional barcodes.

The new Nova Glucose Meters have been evaluated and tested by our nursing staff and are more reliable than the existing meters. Today, information is entered manually when a patient armband cannot be scanned and this can lead to inaccurate documentation in the patient chart. The new meters also come with new docking stations that will also ensure more reliable connectivity between the meter and our WeCare electronic health record.

In accordance with District Law, Policies and Procedures, I request that the Board of Directors authorize the Chief Executive Officer to proceed with the purchase of hardware in an amount not to exceed \$60,703. These monies are included in the Fiscal Year 2017 Capital Budget under PR#170070.

DATE

January 20, 2017

TO:

District Board of Directors

FROM:

Nancy Farber, Chief Executive Officer

SUBJECT:

Portable Ultrasound Machine - Mindray DS, USA

The Ultrasound department has three fixed units and one portable unit. The portable unit is primarily used in ICU/CCU to image patients who are too unstable to be transported to the imaging department. This unit was purchased in 2004 and over the course of time, even with proper upgrades and maintenance, the image quality has gradually deteriorated to the extent that it is hard to use in the ICU/CCU where the lighting is not optimal.

The three fixed units in the Ultrasound department were purchased over 10 years ago. In addition to routine imaging, they are also used for thyroid and renal biopsies, thoracentesis and paracentesis. The image quality has degraded over time to the extent that the radiologists are having difficulty viewing the anatomy that is of interest especially with thyroid biopsies.

The purchase of a new ultrasound machine will not only allow us to do portable imaging in the ICU/CCU but will also give us the ability to perform biopsies and drainages that are often difficult to do on the fixed units. The penetration power of the transducers and the higher resolution of the monitors on the new portable ultrasound will provide the precise detailed imaging that the radiologists need to perform the procedures.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into the necessary contracts and proceed with the purchase of a new ultrasound machine by Mindray for a total amount not to exceed \$151,101.29. These monies are included in the Fiscal Year 2017 Capital Budget.

DATE:

January 25, 2017

TO:

Nancy Farber, Chief Executive Officer

FROM:

Edward Fayen, Sr. Associate Administrator

SUBJECT:

SonoSite Edge II Ultrasound System

The American Academy of Emergency Physicians (ACEP) recommends the immediate availability of dedicated ultrasound equipment in the emergency department for optimal patient care. Acquisition of the SonoSite Edge II Ultrasound system will meet this goal.

The SonoSite Edge II Ultrasound System uses portable, state of the art technology to provide point of care diagnostic imaging and guidance of difficult or high-risk procedures for critically ill patients. The primary benefit derived from implementing this equipment in the Emergency Department is the enhanced capability to effectively evaluate, diagnose, and treat patients in an expeditious manner. These benefits include but are not limited to:

- Facilitating central line insertion
- Facilitating ultrasound guided IV insertion
- Facilitating Focused Assessment with Sonography in Trauma (FAST) to rapidly identify free fluid (usually blood) in the peritoneal, pericardial, or pleural spaces

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into the necessary contracts and proceed with the purchase of a SonoSite Edge II Ultrasound System by FUJIFILM SonoSite for a total amount not to exceed \$72,994.04.