

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, September 28, 2016 – 6:00 P.M. Anderson C

AGENDA

| I. | CALL TO ORDER & PLEDGE OF ALLEGIANCE | Michael Wallace Board Member Christine Flores District Clerk | | | | | |
|------|---|---|--|--|--|--|--|
| II. | ROLL CALL | | | | | | |
| III. | COMMUNICATIONS | | | | | | |
| | A. Oral | | | | | | |
| | B. Written | | | | | | |
| IV. | CLOSED SESSION | Nancy Farber Chief Executive Officer | | | | | |
| | A. Report involving a trade secret pursuant to Health & Safety Code section 32106 | | | | | | |
| | New Program | | | | | | |
| V. | OPEN SESSION | | | | | | |
| | Report on Closed Session | Michael Wallace Board Member | | | | | |
| VI. | ACTION | | | | | | |
| | A. Consideration of Breast Localization and Surgical Guidance System | | | | | | |
| VII. | ADJOURNMENT | Michael Wallace Board Member | | | | | |

Memorandum

DATE: September 16, 2016

TO: Nancy Farber, Chief Executive Officer

FROM: Kimberly Hartz, Senior Associate Administrator

Tina Nunez, Associate Administrator, Ambulatory Care Services

SUBJECT: Purchase of Savi Scout Breast Localization and Surgical Guidance System

We are recommending moving forward with the purchase of the Savi Scout surgical guidance system in the Women's Center. This system will greatly enhance the patient experience and eliminate the need for the patient to be transported the morning of the surgery.

With the Savi Scout, the radiologist places a reflector at the tumor site up to seven days before a lumpectomy or surgical biopsy. With the implementation of the usage of this equipment, a patient will come in a day prior to surgery for the reflector placement and the nuclear medicine injection (if applicable), thereby eliminating those two services the morning of the procedure. These are outpatient services and the patient leaves with little to no discomfort. The morning of the actual procedure can be an anxious time for the patient so this helps to reduce the number of steps and locations that the patient has to complete the morning of the actual procedure. Therefore as a result, the morning of the procedure the patient just presents at the location where the surgery will take place.

During the procedure, the surgeon scans the breast using the handpiece, which emits infrared light and a micro-impulse signal to detect the location of the reflector. Real-time audible and visual indicators assist the surgeon in accurately locating the reflector, along with the target tissue. This equipment is FDA approved and is a non-radioactive approach to targeting breast lesions using micro-impulse radar.

The surgeons have trialed the equipment and have provided positive feedback.

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 Savi Scout breast localization surgical guidance system for a total amount not to exceed \$65,720. This item was included in the Fiscal Year 2017 Fixed Asset Capital Budget.

STRATEGIC PLANNING

PRIORITIES & PROGRESS REPORT

September 23, 2016

I. LEGISLATION

Federal and Local Economic Update

The national economic outlook remains cautiously optimistic. Domestic economic figures indicate that growth has picked up after a slow first half, and household incomes are rising as we continue to see sustained growth in the labor market. The Federal Reserve withheld a rate increase at its September meeting, but has indicated an increase in the target interest rate is very possible by the end of the year.

The Bureau of Labor Statistics job report showed the U.S. economy added 151,000 jobs in August, as the unemployment rate remained unchanged at 4.9%. The monthly average for job growth over the past 12 months was 204,000. Claims for U.S. jobless benefits have declined to 252,000. Claims have now been below 300,000, a threshold associated with a strong labor market, for eighty-one consecutive weeks and are nearing a four-decade low. The four-week moving average, a less volatile measure, dropped by 2,250 to 258,500. The national housing market is showing signs of price stabilization and mild growth across the nation, as inventories remain tight. Last month, the number of properties that received a foreclosure filing in the U.S. was 10% higher than the previous month and 13% lower than the same time last year.

The California economy continues to demonstrate solid growth, as the latest jobs report showed payroll jobs increased in July (state unemployment data lags national data by a month) by 36,400 jobs. But the state's unemployment rate increased for the second month in a row, rising to 5.5% from 5.4% in the previous month. Last month, the number of properties that received a foreclosure filing in the state was 13% higher than the previous month and 4% lower than the same time last year.

Locally, the District's unemployment rate was unchanged in July, (local unemployment data lags national data by a month) at 4.0%. Just over 7,600 District residents in the labor force are unemployed. Foreclosure activity in the District remained steady last month at 37 foreclosures.

Analysis of all of the economic measures included above is ongoing and carefully monitored for potential impacts to hospitals and opportunities for Washington to contribute expertise and advocacy through our elected officials.

State and Federal Legislative Update

CA Legislature

The Governor has until September 30 to take action on any legislation passed this Session.

Some of the legislation worth noting includes:

AB 2257 (Maienschein) Local Agency Meetings: Agenda, Online Posting

This bill was signed by the Governor. The Ralph M. Brown Act requires the legislative body of a local agency to post, at least 72 hours before the meeting, an agenda containing a brief general description of each item of business to be transacted or discussed at a regular meeting, in a location that is freely accessible to members of the public and to provide a notice containing similar information with respect to a special meeting at least 24 hours prior to the special meeting. This bill requires an online posting of an agenda for a meeting occurring on and after January 1, 2019, of a legislative body of a city, county, special district, school district, or political subdivision established by the state that has an Internet Web site to be posted on the local agency's primary Internet Web site homepage accessible through a prominent, direct link, as specified.

AB 1568 (Bonta) Medi-Cal: Demonstration Project

This bill was signed by the Governor. This bill requires the State Department of Health Care Services to establish and operate the Whole Person Care pilot program, a component of the Medi-Cal 2020 demonstration project, under which counties, Medi-Cal managed care plans, and community providers that elect to participate in the pilot program are provided an opportunity to establish a new model for integrated care delivery that incorporates health care needs, behavioral needs, and social support, including housing and other supportive services, for the state's most high-risk, high-utilizing populations.

AB 2471 (Quirk) Health Care Districts: Dissolution

This bill did not pass out of the Senate and is dead for this session. This bill would require the Alameda County local agency formation commission to order the dissolution of the Eden Township Healthcare District if that health care district meets certain criteria. The criteria established by this bill would require the expedited dissolution of the District if the District: a) does not currently receive property tax; b) has substantial net assets; c) does not own or operate a hospital, medical clinic, wellness center, or ambulance service; and, d) fails to comply with the provisions of AB 2737 (Bonta). If Alameda LAFCO orders the dissolution of the District, the expedited dissolution process pursuant to AB 912 (Gordon), would require Alameda LAFCO to hold at least one noticed public hearing, and after conducting protest proceedings, order an election only if majority protest is registered. This bill is sponsored by Alameda County. One of the big questions surrounding this bill was what would happen to the District's net assets and cash accounts if it was dissolved.

SB 1076 (Hernandez) General Acute Care Hospitals: Observation Services

This bill is still sitting on the Governor's desk. This bill would require a general acute care hospital that provides observation services to comply with the same licensed nurse-to-patient ratios as supplemental emergency services (1:4). The bill would require that a patient receiving observation services receive written notice that his or her care is being

provided on an outpatient basis, which may affect the patient's health coverage reimbursement.

AB 2737 (Bonta) Non-provider Health Care Districts

This bill was signed by the Governor. The Local Health Care District Law provides for local health care districts that govern certain health care facilities. Each health care district has specific duties and powers respecting the creation, administration, and maintenance of the districts, including the authority to purchase, receive, take, hold, lease, use, and enjoy property of every kind and description within and without the limits of the district. This bill will require a non-provider health care district, as defined, to spend at least 80% of its annual budget on community grants awarded to organizations that provide direct health services and not more than 20% of its annual budget on administrative expenses, as defined. The bill will require a non-provider health care district to pay any amount required to be paid in the district's annual budget year by a final judgment, court order, or arbitration award before payment of those grants or administrative expenses. By requiring a higher level of service from non-provider health care districts, this bill will impose a statemandated local program.

SB 957 (Hueso) Healthcare Districts: Design-Build Process

This bill was signed by the Governor. This bill would authorize, until January 1, 2025, any health care district to use the design-build process when contracting for the construction of a hospital or health facility building. Because the bill would expand the application of the procurement process to additional design-build entities, the bill would expand the crime of perjury, thereby imposing a state-mandated local program.

AB 1306 (Burke) Scope of Practice: Nurse-Widwives

This bill did not pass out of the Legislature and is dead for this session. This bill would require an applicant for a certificate to practice nurse-midwifery to provide evidence of current advanced level national certification by a certifying body that meets standards established and approved by the Board of Registered Nursing. The bill would also require the board to create and appoint a Nurse-Midwifery Advisory Committee consisting of certified nurse-midwives in good standing with experience in hospital settings, alternative birth settings, and home settings, a nurse-midwife educator, as specified, 2 qualified physicians, and a consumer of midwifery care.

II. FOUNDATION

Capital Campaign

The Campaign Cabinet, the volunteer leadership of the campaign, has now met twice and is leading the campaign in the community. To date, the campaign has raised \$550,000 in pledges. The priority has been on soliciting gifts from cabinet members and identifying prospects in the community to approach for gifts.

Top Hat

Top Hat takes place on October 8. To date, \$240,000 has been received in sponsorships, with 560 RSVPs received from attendees.

DEVCO FINANCIAL STATEMENTS

Reporting Period 1

Month of July 2016

Washington Township Hospital Development Corporation Summary Income Statement July 2016

| | Current | Month | | | Year - To - Date | | | |
|-----------|-----------|-------------------------|----------|--------------------------------|------------------|-----------|-------------------------|----------|
| | | Favorable/(Unfavorable) | | | | _ | Favorable/(Unfavorable) | |
| | | | % | | | | | % |
| Actual | Budget | Variance | Variance | | Actual | Budget | Variance | Variance |
| 2,923 | 3,399 | (476) | (14.0%) | (1) Visits | 2,923 | 3,399 | (476) | (14.0%) |
| 253 | 313 | (60) | (19.2%) | (2) Treatments & Procedures | 253 | 313 | (60) | (19.2%) |
| 3,176 | 3,712 | (536) | (14.4%) | (3) Total | 3,176 | 3,712 | (536) | (14.4%) |
| | | | | Gross Revenue | | | | |
| 3,024,645 | 3,552,110 | (527,465) | (14.8%) | (4) Patient Revenue | 3,024,645 | 3,552,110 | (527,465) | (14.8%) |
| 761,564 | 775,116 | (13,552) | (1.7%) | (5) Other Revenue | 761,564 | 775,116 | (13,552) | (1.7%) |
| 3,786,209 | 4,327,226 | (541,017) | (12.5%) | (6) Total Gross Revenue | 3,786,209 | 4,327,226 | (541,017) | (12.5%) |
| | | | | Deductions | | | | |
| 1,506,987 | 1,786,395 | 279,408 | 15.6% | (7) Total Deductions | 1,506,987 | 1,786,395 | 279,408 | 15.6% |
| 49.8% | 50.3% | 0.5% | | Contractual Percentage | 49.8% | 50.3% | 0.5% | |
| 2,279,222 | 2,540,831 | (261,609) | (10.3%) | (8) Net Revenue | 2,279,222 | 2,540,831 | (261,609) | (10.3%) |
| | | | | Expenses | | | | |
| 715,832 | 737,262 | 21,430 | 2.9% | (9) Purchased Labor | 715,832 | 737,262 | 21,430 | 2.9% |
| 236,683 | 277,883 | 41,200 | 14.8% | (10) Purchased Benefits | 236,683 | 277,883 | 41,200 | 14.8% |
| 274,292 | 258,648 | (15,644) | (6.0%) | (11) Supplies | 274,292 | 258,648 | (15,644) | (6.0%) |
| 297,953 | 290,844 | (7,109) | (2.4%) | (13) Professional Fees | 297,953 | 290,844 | (7,109) | (2.4%) |
| 176,474 | 186,159 | 9,685 | 5.2% | (14) Purchased Services | 176,474 | 186,159 | 9,685 | 5.2% |
| 79,624 | 76,500 | (3,124) | (4.1%) | (16) Depreciation and Amort | 79,624 | 76,500 | (3,124) | (4.1%) |
| 23,485 | 22,479 | (1,006) | (4.5%) | (17) Utilities | 23,485 | 22,479 | (1,006) | (4.5%) |
| 440,165 | 439,782 | (383) | (0.1%) | (18) Building Lease | 440,165 | 439,782 | (383) | (0.1%) |
| 122,868 | 136,626 | 13,758_ | 10.1% | (19) Other Expenses | 122,868 | 136,626 | 13,758 | 10.1%_ |
| 2,367,376 | 2,426,183 | 58,807 | 2.4% | (20) Total Expenses | 2,367,376 | 2,426,183 | 58,807 | 2.4% |
| (88,154) | 114,648 | (202,802) | (176.9%) | (21) Net Operating Income/Loss | (88,154) | 114,648 | (202,802) | (176.9%) |
| 25,844 | 96,370 | 70,526 | 73.2% | (22) Minority Interest | 25,844 | 96,370 | 70,526 | 73.2% |
| (113,998) | 18,278 | (132,276) | (723.7%) | (23) Net Income/Loss | (113,998) | 18,278 | (132,276) | (723.7%) |