



# Washington Township Health Care District

2000 Mowry Avenue, Fremont, California 94538-1716 | 510.797.1111

Kimberly Hartz, Chief Executive Officer

## Board of Directors

Jacob Eapen, MD  
William F. Nicholson, MD  
Bernard Stewart, DDS  
Michael J. Wallace  
Jeannie Yee

## BOARD OF DIRECTORS MEETING

Wednesday, October 9, 2024 – 6:00 P.M.

Board Room of Washington Hospital, 2000 Mowry Avenue, Fremont and via Zoom

<https://zoom.us/j/93483246146?pwd=b8scntI4WasQESKH6LOxZNbbn1HIng.1>

Passcode: 647958

Board Agenda and Packet can be found at:

[October 2024 | Washington Hospital Healthcare System \(whhs.com\)](https://www.whhs.com)

## AGENDA

### PRESENTED BY:

I. **CALL TO ORDER &  
PLEDGE OF ALLEGIANCE**

Jacob Eapen, MD  
Board President

II. **ROLL CALL**

Cheryl Renaud  
District Clerk

III. **COMMUNICATIONS**

A. Oral

*This opportunity is provided for persons in the audience to make a brief statement, not to exceed three (3) minutes on issues or concerns not on the agenda and within the subject matter of jurisdiction of the Board. "Request to Speak" cards should be filled out in advance and presented to the District Clerk. For the record, please state your name.*

B. Written

IV. **CONSENT CALENDAR**

*Items listed under the Consent Calendar include reviewed reports and recommendations and are acted upon by one motion of the Board. Any Board Member or member of the public may remove an item for discussion before a motion is made.*

Jacob Eapen, MD  
Board President

A. Consideration of Minutes of the Regular Meetings of the District Board: September 11, 16, 23 & 25, 2024

*Motion Required*

B. Consideration of Purchase of Belmont Rapid Infuser

C. Consideration of Enterprise Storage Upgrade

**V. PRESENTATIONS**

A. Structural Heart Program: Watchman Device

**PRESENTED BY:**

Harsh Agrawal, MD  
Medical Director, Structural Heart  
Program

B. Alameda County Junior Livestock Program

Angus Cochran  
Chief, Community Support Services

**VI. REPORTS**

A. Medical Staff Report

Mark Saleh, MD  
Chief of Medical Staff

B. Service League Report

Sheela Vijay  
Service League President

C. Quality Report: 2024-2025 Influenza, COVID, and  
RSV Update

Dianne Martin, MD  
Infection Prevention Consultant

D. Finance Report

Thomas McDonagh  
Vice President & Chief Financial  
Officer

E. Hospital Operations Report

Kimberly Hartz  
Chief Executive Officer

F. Healthcare System Calendar Report

Kimberly Hartz  
Chief Executive Officer

**VII. ACTION**

*Motions Required*

A. Consideration of Construction for the Mobile MRI  
Project

B. Consideration of Appointment to DEVCO Board:  
Carol Dutra-Vernaci

**VIII. ANNOUNCEMENTS**

**IX. ADJOURNMENT**

Jacob Eapen, MD  
Board President

A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, September 11, 2024 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Eapen called the meeting to order at 6:00 p.m. and led those in attendance of the meeting in the Pledge of Allegiance.

*CALL TO ORDER*

*PLEDGE OF ALLEGIANCE*

Roll call was taken: Directors present: Jacob Eapen, MD; Michael Wallace; William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS

*ROLL CALL*

Also present: Kimberly Hartz; Larry LaBossiere; Terri Hunter; Tina Nunez; Thomas McDonagh; Paul Kozachenko; Kel Kanady; Gisela Hernandez; Michael Platzbecker; Kristin Ferguson; Laura Anning; Donald Pipkin; Jerri Randrup; Walter Choto; Dan Nardoni; Sheela Vijay; Kadeer Halimi, MD; Mark Saleh, MD; Jason Krupp, MD; Angus Cochran; John Lee; Brian Smith, MD; Betty Goodwin; Marcus Watkins; Melissa Garcia; Mary Bowron; Michelle Hudson; Maria Hernandez, PhD; Rick Hoke; Tammi Tyson; John Zubiena; Sri Boddu; Cheryl Renaud; Shirley Ehrlich

Director Eapen welcomed any members of the general public to the meeting.

*OPENING REMARKS*

Director Eapen noted that Public Notice for this meeting, including Zoom information, was posted appropriately on our website. This meeting was recorded for broadcast at a later date.

The following persons commented: Rehan Noori; Kevin Wong; Adarshdeep Kaur; Peter Liang; Edward Glass; Bryant Soong; Kristin; Grant Hill; Jessica King; Geoff Advincula; Vicky Feng; Alan Liang; Abe Magsombol; Karin Manning; Katie Ng; Marc Del Rio; Raj Sandhu

*COMMUNICATIONS:  
ORAL*

There were no Written Communications.

*COMMUNICATIONS:  
WRITTEN*

Director Eapen presented the Consent Calendar for consideration:

*CONSENT CALENDAR*

A. Consideration of Minutes of the Regular Meetings of the District Board:  
August 14, 19, 26 & 28, 2024

Director Yee moved that the Board of Directors approve the Consent Calendar, Item A. Director Nicholson seconded the motion.

Roll call was taken:

Jacob Eapen, MD – aye  
Michael Wallace – aye  
William Nicholson, MD – aye  
Jeannie Yee – aye  
Bernard Stewart, DDS – aye

Motion Approved.

Kimberly Hartz, Chief Executive Officer, introduced Gisela Hernandez, Chief Diversity, Equity and Inclusion Officer, who presented the DEI Journey Update. Gisela described the purpose of DEI and how we can foster a stronger and more inclusive culture that supports equitable care and improves patient and workforce satisfaction. The National Priorities for Health Equity included Four Calls to Action which include building an infrastructure, engaging with the community, improving population health and attending to provider and/or employee development. As of May 2024, the hospital standardized the approach in prioritizing accurate and enhanced demographic information.

The Health Equity, Diversity and Inclusion Council (HEDIC) provides oversight over DEI across the entire Healthcare System. Gisela detailed the goals in the Scorecard for Population Health, which are aligned with the HEDIC committee's work to oversee in each of the categories; Metrics of Inclusion, Culture of Inclusion, Linking Quality with Equity and Inclusive Community Engagement.

The HEDIC Data, Metrics and Compliance Committee has implemented some enhancements within the Midas Reporting System by adding Bias or Equity Concerns, as a possible contributing factor.

The HEDIC People and Culture Committee conducted a Workforce Survey of all hospital employees in August of 2024. There was overwhelming support to create Workforce Resource Groups (WRG). Next steps are to establish two Workforce Resource Groups: women and multicultural groups.

The HEDIC Equity of Care Committee is currently focused on Readmissions, and looking at Discharge Dispositions, Race and Ethnicity, Preferred Language and Use of Interpreters.

The HEDIC Community Engagement Committee is developing a Community Advisory Board that will consist of 10-12 community members residing or working in the District, representing a wide range of lived experience and identities representing cultures, race and ethnicities, faiths, sexual orientations, ages and more.

Gisela also shared other improvement work that is underway, including enhancement of cultural food options in the Birthing Center. It was noted that 44% of patients were having meals brought in from the outside. As a result, this led to a conversation with the Food and Nutrition Services Department and they are developing a plan to incorporate a wider selection of culturally diverse meals.

There are a growing number of regulations and requirements from various agencies and organizations such as the State, CMS and The Joint Commission. AB1204

requires that hospitals post their reports annually on a public site by September 30, 2025.

Dr. Mark Saleh, Chief of Medical Staff, reported that there are 667 Medical Staff members, including 347 active members. StatRad Nighthawk Service started on August 29. Dr. Saleh mentioned that the TB Testing and Flu Blitz took place on Monday, September 9. There will be another Flu Blitz at the end of the month. The Quarterly Medical Staff Luncheon will take place on September 27.

*MEDICAL STAFF  
REPORT*

Sheela Vijay, Service League President, reported that for the month of August, 253 Service League volunteers contributed a total of 2,587 hours. The Service League of Volunteers recently onboarded 31 new volunteers during their last orientation, including 9 adults, 18 college students and 4 high school students. Currently, there are over 600 students on the high school wait list. To better utilize their enthusiasm and support, they are actively exploring additional volunteer opportunities beyond the Gift Shop, Lobby and Birthing Center.

*SERVICE LEAGUE  
REPORT*

The Service League has been approached by the Washington Hospital Center for Wound Healing and Hyperbaric Medicine with a request for volunteers. They are currently evaluating the possibility of opening the Wound Clinic for volunteer opportunities, which would provide an additional way to support patient care. The Service League participated in the Heart Health Fair at the Nakamura Clinic on Saturday, September 7. There was a good turnout and many attendees expressed their desire to join the volunteer team and several individuals signed up.

Sheela Vijay, Service League President, and Evangeline, Imana-Iyemura, Director of Volunteer Services, will be attending the California Hospital Volunteer Leadership Conference in San Diego. They will be participating in a panel discussion about the successful reopening of the Gift Shop post the COVID-19 Pandemic, including the strategies they used among the challenges they faced.

Kimberly Hartz, Chief Executive Officer, introduced Dr. Kadeer Halimi, Medical Director of Emergency Medicine and Michael Platzbecker, Director of Emergency Services. Dr. Halimi began with the Mission of the Washington Hospital Emergency Department (ED) which is to serve the community by providing high quality care and clinical excellence with efficiency. Dr. Halimi spoke about the structure and various services of the ED including thirty-nine rooms with 100% privacy.

*QUALITY REPORT:  
QUALITY REPORT: ED  
PROGRAM UPDATE*

Dr. Halimi highlighted that the ED volume not only rebounded back from the pandemic, but had a historical year in FY 2024 with a volume of 60,720 visits. Despite the unrelenting ED volume, the ED physician group has performed the medical-screening examinations in an expeditious manner. Dr. Halimi noted that while the number of admitted patients has slightly increased over the last four years,

that the percentage of boarded patients (greater than 4 hours) has more than doubled from 9% to 18%. This has negatively impacted all measures of throughput; Admit Length of Stay, Discharge Length of Stay, Left Without Being Seen (LWBS) and Ambulance Patient Offload Time (APOT). The Emergency Department is still below the goal of 1.5% for patients who left without being seen (LWBS).

The ED is the recipient of the Beta Healthcare Quest for Zero award for thirteen consecutive years. There is 100% completion of the Quality Initiative for Sepsis learning module totaling 94 nurses and 26 providers.

Michael Platzbecker explained the Ambulance Patient Offload Time (APOT), a statewide initiative, codified by AB40. The Alameda County Emergency Medical Services Agency (ALCO EMS) Goal is that 90% of patients will have an offload time of 30 minutes or less. Despite the increase in EMS volume, the average offload was less than 25 minutes for FY 2024. Michael mentioned that while we had a record-setting census in the ED, at times, it exceeded our capacity. The average hourly census increased to 35 patients and frequently the hourly census exceeded 50 patients. Trauma mandates that we have one available room at all times dedicated to trauma services. The departmental priority was to reduce the 90<sup>th</sup> Percentile Time from 60 to 50 minutes by Quarter Ending June 2024, which was achieved at 46 minutes.

Michael reported that there was a 23% increase in administration of IV thrombolytic therapy. This resulted from a collaborative and multidisciplinary effort to assure early detection of stroke symptoms and aggressive tissue plasminogen activator (t-PA) screening.

It is noted that Washington Hospital is one of two SART programs in Alameda County. Achievements include Facebook Live presentations about interpersonal violence and SART Services, collaboration with Ohlone College Nurse Practitioner on exam capability, Nurse Examiners maintaining a response time in less than 30 minutes despite the challenge of advocacy shortages.

Michael stated that our overarching focus was accomplishing the ALCO Level 2 Adult Trauma Designation. Our committee participation included a Trauma Medical Staff Development Committee, Trauma Operations Committee and TAC/Regional Trauma Center Meeting Participation. There was operational and staff preparation, including education for TNCC classes with a 90% achievement rate. Among various preparations, staff participated in Helicopter Emergency Medical Service (HEMS) Simulation Exercises, EMT 9-1-1 Ride along services and the survey to gauge readiness and identify security concerns.

Next steps include are not limited to: maintaining a Foley free ED to decrease CAUTIs, improve APOT timeliness, participating in Healthcare Acquired Infection

(HAI) Never-Event reviews, collaborating with Trauma/Community Relations for Community Engagement, Trauma Care Coordination and ACS Compliance and Pediatric Readiness.

Tom McDonagh, Vice President & Chief Financial Officer, presented the Finance Report for July 2024. The average daily inpatient census was 161.6 with discharges of 959 resulting in 5,009 patient days. Outpatient observation equivalent days were 380. The average length of stay was 5.73 days. The case mix index was 1.609. Deliveries were 125. Surgical cases were 508. The Outpatient visits were 8,932. Emergency visits were 5,217. Cath Lab cases were 173. Joint Replacement cases were 196. Neurosurgical cases were 32. Cardiac Surgical cases were 13. Total FTEs were 1,648.8. FTEs per adjusted occupied bed was 5.97. Overall, the net income for July was \$1,700,000.

*FINANCE REPORT*

Kimberly Hartz, Chief Executive Officer, presented the Hospital Operations Report for August 2024. Patient gross revenue of 220.8 million for August was favorable to budget of \$212.1 million (4.1%), and it was higher than August 2023 by \$23.1 million (13.6%). Trauma Cases of 138 for August was favorable to the budget of 103 by 35 (34.0%). Trauma gross revenue of \$13.6 million for August was favorable to the budget of \$13.0 million by \$605K (4.6%).

*HOSPITAL  
OPERATIONS REPORT*

The Average Length of Stay was 4.93. The Average Daily Inpatient Census was 146.5 and was unfavorable to budget of 163.2 by 16.7 (10.2%). There were 968 Discharges that was favorable to budget of 909 (6.5%).

There were 4,545 patient days and was unfavorable to budget of 5,059 by 514 days (10.2%). There were 544 Surgical Cases and 199 Cath Lab cases at the Hospital.

Deliveries were 149. Non-Emergency Outpatient visits were 9,031. Emergency Room visits were 5,095. Total Government Sponsored Preliminary Payor Mix was 73.7%, against the budget of 74.3%. Total FTEs per Adjusted Occupied Bed were 6.28.

There were \$79K in charity care adjustments in August 2024.

September Employee of the Month is Martha "Letty" Perez, Payroll Associate, General Accounting.

*EMPLOYEE OF THE  
MONTH*

Past Health Promotions & Community Outreach Events:

*HOSPITAL CALENDAR*

- August 15: Retirement Reception for Suzanne Shenfil, Director, Human Services, City of Fremont
- August 17: Festival of Globe, India Day Fair, Fremont Hall of Justice

- August 17: Washington Hospital Employee Association's Family Fun Days at Aqua Adventure in Fremont
- August 28: Stroke: Warning Signs and Risk Factors – Facebook Live & YouTube
- September 7: Union City Heart Health Fair – Nakamura Clinic Parking Lot, Union City
- September 10: Washington Township Men's Club – Newark Pavilion
- September 11: Importance of Prostate Cancer Screening – Facebook Live & YouTube

Upcoming Health Promotions & Community Outreach Events:

- September 12: Polly's Heart Health Fair – Ruggieri Senior Center, Union City
- September 16: AAUW One Book Once Community Opioid Discussion – Anderson Auditorium
- September 20: Union City Family Center Toddler to Career Fair – Barnard White Middle School, Union City
- September 22: Newark Days Community Resource Faire – Newark Community Center
- September 22: Fremont Disability Fair – Fremont Downtown Event Center
- September 25: Sepsis: What Is It and How Can We Increase Awareness – Facebook Live & YouTube
- September 28: New Haven Schools Foundation Mutt Strutt – Masonic Home, Union City
- September 28: HERS Run/Walk/Yoga, Quarry Lakes, Fremont
- October 5: Fremont Police Department Safety Fair – Fremont Police Department
- October 5: NAMI Walks – Fremont Central Park
- October 9: Breast Cancer Surgery: What Are the Options? – Facebook Live & YouTube

Washington Hospital received three awards this week from BETA. Quest for Zero in Excellence in ED, Quest for Zero Excellence in OB (Washington Hospital) and Quest for Zero Excellence in OB (WTMF Women's Health).

The 38<sup>th</sup> Annual Top Hat Gala is set for Saturday, October 12, 2024. Funds raised at this year's Top Hat will support the purchase of a wide-bore MRI for the Hospital.

Scholarships were awarded for the Dr. Albert V. Assali Scholarship last month to two students pursuing higher education in the field of medicine. The winners are Juan Ernesto Vazquez Guijarro, who is pursuing a masters in nursing at Cal State Sacramento, and Shannon Ly, who is studying medicine at UC Davis.



The Foundation is hosting a special recognition luncheon on September 17 at Casa Bella Restaurant in Sunol for all Legacy Society members and the Foundation's closest supporters.

Director Yee moved that the Board of the Directors authorize the Chief Executive Officer to execute the contracts necessary for Ratcliff Architects to proceed with the next phase of the Project in an amount not to exceed \$2,956,493. Director Nicholson seconded the motion.

*ACTION ITEMS:  
CONSIDERATION OF  
ARCHITECTURAL  
FEES FOR PHASE III  
BUILDING OF THE  
FACILITY MASTER  
PLAN*

Roll call was taken:

Jacob Eapen, MD – aye  
Michael Wallace – aye  
William Nicholson, MD – aye  
Jeannie Yee – aye  
Bernard Stewart, DDS – aye

Motion approved.

Director Yee moved that the Board of the Directors approve the recommendation of the Chief Executive Officer as stated in the Memorandum for the Closure of the Pediatric Department Due to Low Volume and Availability of Quality Pediatric Care at Nearby Specialized Institutions. Director Nicholson seconded the motion.

*CONSIDERATION OF  
CLOSURE OF THE  
PEDIATRIC  
DEPARTMENT DUE  
TO LOW VOLUME  
AND AVAILABILITY  
OF QUALITY  
PEDIATRIC CARE AT  
NEARBY SPECIALIZED  
INSTITUTIONS*

Roll call was taken:

Jacob Eapen, MD – aye  
Michael Wallace – aye  
William Nicholson, MD – aye  
Jeannie Yee – aye  
Bernard Stewart, DDS – aye

Motion approved.

There were no Announcements.

*ANNOUNCEMENTS*

There being no further business, Director Eapen adjourned the meeting at 8:42 p.m.

*ADJOURNMENT*

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Jacob Eapen, MD  
President

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Bernard Stewart, DDS  
Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, September 16, 2024 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Eapen 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: Jacob Eapen, MD; Michael Wallace; William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS

*ROLL CALL*

Also present: Kimberly Hartz; Tom McDonagh; Larry LaBossiere; Terri Hunter; Paul Kozachenko; Cheryl Renaud; Shirley Ehrlich

Director Eapen welcomed any members of the general public to the meeting.

*OPENING REMARKS*

Director Eapen noted that Public Notice for this meeting, including Zoom information, was posted appropriately on our website. This meeting is being conducted in the Board Room and by Zoom.

There were no Oral Communications.

*COMMUNICATIONS  
ORAL*

There were no Written Communications.

*COMMUNICATIONS  
WRITTEN*

Director Eapen presented the Consent Calendar for consideration:

*CONSENT CALENDAR*

- A. Consideration of Replacement Pipe Project
- B. Consideration of Roof Replacement Project at 2500 Mowry Avenue

Kimberly Hartz, Chief Executive Officer, requested to remove Item B, to be presented at a future date.

- C. Consideration of Purchase of Raumedic IntraCranial Pressure (ICP) Monitoring System

Director Yee moved that the Board of Directors approve the Consent Calendar, Items A and C. Director Nicholson seconded the motion.

Roll call was taken:

Jacob Eapen, MD – aye  
Michael Wallace – aye  
William Nicholson, MD – aye  
Jeannie Yee – aye  
Bernard Stewart, DDS – aye

Motion Approved.

Director Yee moved that the Board of Directors authorize the Chief Executive Officer to amend the budget for the Center for Joint Replacement Garden Clinic Project by \$189,000 for a revised budget amount of \$4,532,675 to complete the outstanding work for the project. Director Nicholson seconded the motion.

*ACTION ITEMS*

Roll call was taken:

Jacob Eapen, MD – aye  
Michael Wallace – aye  
William Nicholson, MD – aye  
Jeannie Yee – aye  
Bernard Stewart, DDS – aye

Motion Approved.

There were no Announcements.

*ANNOUNCEMENTS*

Director Eapen adjourned the meeting to closed session at 6:05 p.m., as the discussion pertained to Conference involving Trade Secrets pursuant to Health & Safety Code Section 32106 (Strategic Planning), Conference with Labor Negotiators pursuant to Government Code Section 54957.6 and Conference with Legal Counsel – Existing Litigation pursuant to Government Code Section 54956.9(d)(1). Director Eapen stated that the public has a right to know what, if any, reportable action takes place during closed session. Since this meeting was being conducted in the Board Room and via Zoom, there is no way of knowing when the closed session will end. The public was informed they could contact the District Clerk for the Board's report beginning September 17, 2024. The minutes of this meeting will reflect any reportable actions.

*ADJOURN TO CLOSED SESSION*

Director Eapen reconvened the meeting to open session at 7:37 p.m. The District Clerk reported that there were no reportable actions taken in closed session.

*RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION*

There being no further business, Director Eapen adjourned the meeting at 7:37 p.m.

*ADJOURNMENT*

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Jacob Eapen, MD  
President

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Bernard Stewart, DDS  
Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, September 23, 2024 in the Board Room at 2000 Mowry Avenue, Fremont and by Teleconference. Director Eapen called the meeting to order at 7:30 a.m.

*CALL TO ORDER*

Roll call was taken. Directors present: Jacob Eapen, MD; William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS

*ROLL CALL*

Absent: Michael Wallace

Also present: Kimberly Hartz; Shakir Hyder, MD; Mark Saleh, MD; Ranjana Sharma, MD; John Romano, MD; Brian Smith, MD; Larry LaBossiere; Terri Hunter; Jaspreet Kaur

There were no Oral communications.

*COMMUNICATIONS:  
ORAL*

There were no Written communications.

*COMMUNICATIONS  
WRITTEN*

Director Eapen 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 Section 32155.

*ADJOURN TO CLOSED  
SESSION*

Director Eapen 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 adjourned at 8:30 a.m.

*ADJOURNMENT*

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Jacob Eapen, MD  
President

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Bernard Stewart, DDS  
Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, September 25, 2024 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Nicholson called the meeting to order at 6:00 p.m. and led those in attendance of the meeting in the Pledge of Allegiance.

*CALL TO ORDER*

*PLEDGE OF ALLEGIANCE*

Roll call was taken: Directors present: William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS

*ROLL CALL*

Absent: Jacob Eapen, MD; Michael Wallace

Also present: Kimberly Hartz; Terri Hunter; Thomas McDonagh; Larry LaBossiere; Nicholas Kozachenko; Cheryl Renaud; Shirley Ehrlich

Director Nicholson welcomed any members of the general public to the meeting.

*OPENING REMARKS*

Director Nicholson noted that Public Notice for this meeting, including Zoom information, was posted appropriately on our website.

There were no Oral Communications.

*COMMUNICATIONS:  
ORAL*

There were no Written Communications.

*COMMUNICATIONS:  
WRITTEN*

There were no items on the Consent Calendar for consideration.

*CONSENT ITEMS*

Director Yee moved that the Board of Directors approve Resolution No. 1267: Roof Replacement Project at 2500 Mowry Avenue, as presented. Kimberly Hartz, Chief Executive Officer, explained that the roof at 2500 Mowry Avenue is 30 years old and is in need of replacement. The District used an informal solicitation process to obtain these bids. This Resolution justifies the selection of Tremco products and the use of an informal selection process. Dr. Stewart seconded the motion.

*ACTION ITEMS*

Roll call was taken:

Jacob Eapen, MD – absent  
Michael Wallace – absent  
William Nicholson, MD – aye  
Jeannie Yee – aye  
Bernard Stewart, MD – aye

Motion approved.

There were no Announcements.

*ANNOUNCEMENTS*

Director Nicholson adjourned the meeting to closed session at 6:05 p.m., as the discussion pertained to reports regarding Medical Audit & Quality Assurance Matters pursuant to Health & Safety Code Section 32155, Conference Involving Trade Secrets pursuant to Health & Safety Code Section 32106 (Strategic Planning), and Conference with Labor Negotiators pursuant to Government Code Section 54957.6. Director Nicholson stated that the public has a right to know what, if any, reportable action takes place during closed session. Since this meeting was being conducted in the Board Room and via Zoom, there is no way of knowing when the closed session will end. The public was informed they could contact the District Clerk for the Board's report beginning September 26, 2024. The minutes of this meeting will reflect any reportable actions.

*ADJOURN TO CLOSED  
SESSION*

Director Nicholson reconvened the meeting to open session at 6:53 p.m. The District Clerk reported that during closed session, the Board approved the closed session minutes of August 14, 29 & 28, 2024 and the Medical Staff Credentials Committee Report by unanimous vote of all directors present.

*RECONVENE TO  
OPEN SESSION &  
REPORT ON CLOSED  
SESSION*

There being no further business, Director Nicholson adjourned the meeting at 6:54 p.m.

*ADJOURNMENT*

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William Nicholson  
Second Vice President

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Bernard Stewart, DDS  
Secretary



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# Memorandum

**DATE:** October 1, 2024

**TO:** Washington Township Health Care District Board of Directors

**FROM:** Kimberly Hartz, Chief Executive Officer

**SUBJECT:** Belmont Rapid Infuser Purchase

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We are requesting approval to purchase one (1) additional Belmont Rapid Infuser for our Trauma Program.

Currently, we have three (3) Belmont Rapid Infusers that are utilized for Trauma house wide and stored in ED, OR, and the Birthing Center (in case of hemorrhage). However, when the County surveyed us for Trauma, they recommended that we have a 4<sup>th</sup> machine housed in the ICU. The Belmont Rapid Infuser is a leading medical device in combating hypothermia and blood loss and delivers life-saving, warmed blood and fluid at the touch of a button, enabling clinicians to do their best work.

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 one (1) Belmont Rapid Infuser. The total cost of the device, including tax and freight, is \$42,434.73. This purchase is not included in the FY25 capital budget.

Washington Hospital Healthcare Foundation has available funds to cover the total cost of this purchase and will reimburse the Hospital in January 2025 after their Annual Disbursement.



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# Memorandum

**DATE:** October 1, 2024

**TO:** Washington Township Health Care District Board of Directors

**FROM:** Kimberly Hartz, Chief Executive Officer

**SUBJECT:** Enterprise Storage Upgrade

The current enterprise storage solution is from 2017 and is now at over 90% of capacity. In addition, the existing storage solution will no longer be supported after December 2024. Our enterprise storage houses all of our major data stores, including those for our Epic EMR, inventory and financial management, email and PACs systems.

After lengthy review and negotiation, the Information Systems team has selected a new storage system from Pure Storage that will provide improved performance and capacity for at least the next 5 years. Pure Storage is highly regarded and is a leader in providing storage performance for hospitals that utilize Epic systems.

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 hardware, software, implementation services and other fees for a total amount not to exceed \$2,145,000. This is an approved top priority project in the FY 2025 capital budget.





**WASHINGTON HOSPITAL**  
**INDEX TO BOARD FINANCIAL STATEMENTS**  
**August 2024**

<b><u>Schedule Reference</u></b>	<b><u>Schedule Name</u></b>
<b>Board - 1</b>	Statement of Revenues and Expenses
<b>Board - 2</b>	Balance Sheet
<b>Board - 3</b>	Operating Indicators



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# Memorandum

**DATE:** September 30, 2024  
**TO:** Board of Directors  
**FROM:** Kimberly Hartz, Chief Executive Officer  
**SUBJECT:** Washington Hospital – August 2024  
Operating & Financial Activity

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## SUMMARY OF OPERATIONS – (Blue Schedules)

### 1. Utilization – Schedule Board

	August <u>Actual</u>	August <u>Budget</u>	Current 12 <u>Month Avg.</u>
<u>ACUTE INPATIENT:</u>			
IP Average Daily Census	146.6	163.2	156.9
Combined Average Daily Census	158.5	176.4	167.8
No. of Discharges	968	909	897
Patient Days	4,545	5,059	4,787
Discharge ALOS	4.93	5.57	5.36
<u>OUTPATIENT:</u>			
OP Visits	9,031	8,711	8,685
ER Visits	5,095	5,410	5,096
Observation Equivalent Days – OP	370	408	332

Comparison of August's actual Acute Inpatient statistics versus the budget showed a lower level of Average Daily Census which translates into lower Patient Days. Discharges were higher than budget, and the Average Length of Stay (ALOS), based on discharged days, over-performed the budget. Outpatient visits were favorable to budget, but Emergency Room visits were unfavorable to budget for the month. Outpatients Observation Equivalent days were also favorable to budget.

### 2. Staffing – Schedule Board 3

Total paid FTEs were below budget. Total productive FTEs for August came in at 1,448.5, below the Fixed Budget level of 1,506.8. Non-Productive FTEs were below budget by 7.8. Total FTEs per Adjusted Occupied Bed were 6.34, or 0.31 worse than the budgeted level of 6.03.

### 3. Income - Schedule Board 1

For the month of August, the Hospital realized a Net Operating Gain of \$770,000 from Operations, a 1.5% Margin.

Total Gross Patient Revenue of \$220,835,000 for August was \$8,717,000 above the budget, 4.1%.

Deductions from Revenue totaled \$171,209,000 which equates to a 77.5% blended contractual rate, was slightly unfavorable to the budgeted rate of 77.0%.

Total Net Operating Revenue of \$50,710,000 was \$543,000 or 1.1% above the Budget.

Total Operating Expenses for the month were \$49,940,000, which was lower than the budget by \$546,000, 1.1%.

The Total Non-Operating Gain of \$2,581,000 for the month includes an unrealized gain on investments of \$1,287,000, and was favorable to the budget of \$617,000.

The Net Income for August was \$3,351,000, a 6.6% Margin, and was \$3,053,000 above the Budgeted Net Income of \$298,000.

The Total Net Gain for August using FASB accounting principles, in which the unrealized gain on investments, net interest expense on GO bonds and property tax revenues are removed from the non-operating income and expense, was \$954,000 (a 1.88% Margin) compared to Budgeted Income of (\$43,000) for a favorable variance of \$997,000.

#### 4. **Balance Sheet – Schedule Board 2**

There were no noteworthy changes in assets and liabilities when compared to July 2024.

KIMBERLY HARTZ  
Chief Executive Officer

KH/TM



**WASHINGTON HOSPITAL**  
**STATEMENT OF REVENUES AND EXPENSES**  
**August 2024**  
**GASB FORMAT**  
**(In thousands)**

<u>August</u>				<u>FISCAL YEAR TO DATE</u>				
<u>ACTUAL</u>	<u>BUDGET</u>	<u>FAV (UNFAV) VAR</u>	<u>% VAR.</u>		<u>ACTUAL</u>	<u>BUDGET</u>	<u>FAV (UNFAV) VAR</u>	<u>% VAR.</u>
\$ 125,044	\$ 122,298	\$ 2,746	2.2%	<b>1</b>	\$ 253,984	\$ 246,955	\$ 7,029	2.8%
95,791	89,820	5,971	6.6%	<b>2</b>	187,153	174,122	13,031	7.5%
<b>220,835</b>	<b>212,118</b>	<b>8,717</b>	4.1%	<b>3</b>	<b>441,137</b>	<b>421,077</b>	<b>20,060</b>	4.8%
(168,669)	(159,458)	(9,211)	-5.8%	<b>4</b>	(332,865)	(316,715)	(16,150)	-5.1%
(2,540)	(3,892)	1,352	34.7%	<b>5</b>	(6,902)	(7,726)	824	10.7%
<b>(171,209)</b>	<b>(163,350)</b>	<b>(7,859)</b>	-4.8%	<b>6</b>	<b>(339,767)</b>	<b>(324,441)</b>	<b>(15,326)</b>	-4.7%
<b>77.53%</b>	<b>77.01%</b>			<b>7</b>	<b>77.02%</b>	<b>77.05%</b>		
<b>49,626</b>	<b>48,768</b>	<b>858</b>	1.8%	<b>8</b>	<b>101,370</b>	<b>96,636</b>	<b>4,734</b>	4.9%
1,084	1,399	(315)	-22.5%	<b>9</b>	2,211	2,796	(585)	-20.9%
<b>50,710</b>	<b>50,167</b>	<b>543</b>	1.1%	<b>10</b>	<b>103,581</b>	<b>99,432</b>	<b>4,149</b>	4.2%
23,444	23,828	384	1.6%	<b>11</b>	48,786	46,175	(2,611)	-5.7%
6,813	7,562	749	9.9%	<b>12</b>	16,082	15,236	(846)	-5.6%
7,553	6,982	(571)	-8.2%	<b>13</b>	14,454	13,955	(499)	-3.6%
6,916	6,817	(99)	-1.5%	<b>14</b>	13,878	13,877	(1)	0.0%
1,726	1,828	102	5.6%	<b>15</b>	3,475	3,697	222	6.0%
3,488	3,469	(19)	-0.5%	<b>16</b>	6,833	6,938	105	1.5%
<b>49,940</b>	<b>50,486</b>	<b>546</b>	1.1%	<b>17</b>	<b>103,508</b>	<b>99,878</b>	<b>(3,630)</b>	-3.6%
<b>770</b>	<b>(319)</b>	<b>1,089</b>	341.4%	<b>18</b>	<b>73</b>	<b>(446)</b>	<b>519</b>	116.4%
<b>1.52%</b>	<b>-0.64%</b>			<b>19</b>	<b>0.07%</b>	<b>-0.45%</b>		
682	577	105	18.2%	<b>20</b>	1,169	1,153	16	1.4%
(14)	(154)	140	90.9%	<b>21</b>	59	(309)	368	119.1%
(1,630)	(1,649)	19	1.2%	<b>22</b>	(3,119)	(3,299)	180	5.5%
127	294	(167)	-56.8%	<b>23</b>	214	407	(193)	-47.4%
-	-	-	0.0%	<b>25</b>	(1)	-	(1)	0.0%
(2)	176	(178)	-101.1%	<b>26</b>	(2)	352	(354)	-100.6%
2,194	1,373	821	59.8%	<b>27</b>	3,567	2,746	821	29.9%
(63)	-	(63)		<b>28</b>	283	(64)	347	542.2%
1,287		1,287	0.0%	<b>30</b>	2,814		2,814	0.0%
<b>2,581</b>	<b>617</b>	<b>1,964</b>	318.3%	<b>31</b>	<b>4,984</b>	<b>986</b>	<b>3,998</b>	405.5%
<b>\$ 3,351</b>	<b>\$ 298</b>	<b>\$ 3,053</b>	1024.5%	<b>32</b>	<b>\$ 5,057</b>	<b>\$ 540</b>	<b>\$ 4,517</b>	836.5%
<b>6.61%</b>	<b>0.59%</b>			<b>33</b>	<b>4.88%</b>	<b>0.54%</b>		
<b>\$ 954</b>	<b>\$ (43)</b>	<b>\$ 997</b>	2318.6%	<b>34</b>	<b>\$ 861</b>	<b>\$ (141)</b>	<b>\$ 1,002</b>	710.6%
<b>1.88%</b>	<b>-0.09%</b>				<b>0.83%</b>	<b>-0.14%</b>		

\*\*NET INCOME (FASB FORMAT) EXCLUDES PROPERTY TAX INCOME, NET INTEREST EXPENSE ON GO BONDS AND UNREALIZED GAIN(LOSS) ON INVESTMENTS



**WASHINGTON HOSPITAL**  
**BALANCE SHEET**  
**August 2024**  
*(In thousands)*

ASSETS AND DEFERRED OUTFLOWS		August 2024	Unaudited June 2023	LIABILITIES, NET POSITION AND DEFERRED INFLOWS		August 2024	Unaudited June 2023
<b>CURRENT ASSETS</b>				<b>CURRENT LIABILITIES</b>			
1	CASH & CASH EQUIVALENTS	\$ 20,247	\$ 23,537	1	CURRENT MATURITIES OF L/T OBLIG	\$ 9,820	\$ 9,425
2	ACCOUNTS REC NET OF ALLOWANCES	79,506	73,908	2	ACCOUNTS PAYABLE	40,491	41,162
3	OTHER CURRENT ASSETS	30,324	25,556	3	OTHER ACCRUED LIABILITIES	58,715	58,960
4	TOTAL CURRENT ASSETS	130,077	123,001	4	INTEREST	2,035	13,961
				5	TOTAL CURRENT LIABILITIES	111,061	123,508
<b>ASSETS LIMITED AS TO USE</b>				<b>LONG-TERM DEBT OBLIGATIONS</b>			
5	BOARD DESIGNATED FOR CAPITAL AND OTHER	184,727	180,885	6	REVENUE BONDS AND OTHER	216,200	224,753
6	BOARD DESIGNATED FOR PENSION	0	0	7	GENERAL OBLIGATION BONDS	468,199	468,300
7	GENERAL OBLIGATION BOND FUNDS	132,991	131,846				
8	REVENUE BOND FUNDS	48,007	48,613				
9	BOND DEBT SERVICE FUNDS	12,040	35,694				
10	OTHER ASSETS LIMITED AS TO USE	10,628	10,342				
11	TOTAL ASSETS LIMITED AS TO USE	388,393	407,380	<b>OTHER LIABILITIES</b>			
12	OTHER ASSETS	360,212	354,795	8	SUPPLEMENTAL MEDICAL RETIREMENT	41,482	41,143
				9	WORKERS' COMP AND OTHER	10,600	10,389
13	OTHER INVESTMENTS	24,083	23,784	10	NET PENSION	54,032	52,379
14	NET PROPERTY, PLANT & EQUIPMENT	561,746	567,806	11	ROU ASSET LONG-TERM	8,772	8,124
15	TOTAL ASSETS	\$ 1,464,511	\$ 1,476,766	12	NET POSITION	557,364	553,147
16	DEFERRED OUTFLOWS	33,379	37,668	13	TOTAL LIABILITIES AND NET POSITION	\$ 1,467,710	\$ 1,481,743
17	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 1,497,890	\$ 1,514,434	14	DEFERRED INFLOWS	30,180	32,691
				15	TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	\$ 1,497,890	\$ 1,514,434



**WASHINGTON HOSPITAL  
OPERATING INDICATORS**

August 2024

12 MONTH AVERAGE	August						FISCAL YEAR TO DATE			
	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.
	<b><u>PATIENTS IN HOSPITAL</u></b>									
156.9	146.6	163.2	(16.6)	-10%	1	ADULT & PEDS AVERAGE DAILY CENSUS	154.1	164.9	(10.8)	-7%
10.9	11.9	13.2	(1.3)	-10%	2	OUTPT OBSERVATION AVERAGE DAILY CENSUS	12.1	12.8	(0.7)	-5%
167.8	158.5	176.4	(17.9)	-10%	3	COMBINED AVERAGE DAILY CENSUS	166.2	177.7	(11.5)	-6%
7.9	8.6	7.6	1.0	13%	4	NURSERY AVERAGE DAILY CENSUS	8.2	7.6	0.6	8%
175.7	167.1	184.0	(16.9)	-9%	5	TOTAL	174.4	185.3	(10.9)	-6%
3.6	4.6	4.0	0.6	15%	6	SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *	3.7	4.0	(0.3)	-8%
4,787	4,545	5,059	(514)	-10%	7	ADULT & PEDS PATIENT DAYS	9,554	10,223	(669)	-7%
332	370	408	38	9%	8	OBSERVATION EQUIVALENT DAYS - OP	750	791	41	5%
897	968	909	59	6%	9	DISCHARGES-ADULTS & PEDS	1,927	1,842	85	5%
5.36	4.93	5.57	0.6	11%	10	AVERAGE LENGTH OF STAY-ADULTS & PEDS	5.33	5.55	0.2	4%
	<b><u>OTHER KEY UTILIZATION STATISTICS</u></b>									
1.603	1.684	1.547	0.137	9%	11	OVERALL CASE MIX INDEX (CMI)	1.649	1.563	0.086	6%
	<b><u>SURGICAL CASES</u></b>									
191	207	155	52	34%	12	ORTHOPEDIC CASES	403	316	87	28%
27	22	38	(16)	-42%	13	NEUROSURGICAL CASES	54	76	(22)	-29%
13	18	12	6	50%	14	CARDIAC SURGICAL CASES	31	22	9	41%
34	47	40	7	18%	15	VASCULAR CASES	83	78	5	6%
118	134	112	22	20%	16	ENDOSCOPY CASES	265	215	50	23%
99	116	138	(22)	-16%	17	OTHER SURGICAL CASES	216	266	(50)	-19%
482	544	495	49	10%	18	TOTAL CASES	1,052	973	79	8%
180	199	192	7	4%	19	TOTAL CATH LAB CASES	372	372	-	0%
125	149	120	29	24%	20	DELIVERIES	274	245	29	12%
8,685	9,031	8,711	320	4%	21	OUTPATIENT VISITS	17,963	16,949	1,014	6%
5,096	5,095	5,410	(315)	-6%	22	EMERGENCY VISITS	10,312	10,530	(218)	-2%
	<b><u>LABOR INDICATORS</u></b>									
1,432.5	1,448.5	1,506.8	58.3	4%	23	PRODUCTIVE FTE'S	1,437.0	1,501.4	64.4	4%
209.7	191.7	199.5	7.8	4%	24	NON PRODUCTIVE FTE'S	207.5	216.9	9.4	4%
1,642.2	1,640.2	1,706.3	66.1	4%	25	TOTAL FTE'S	1,644.5	1,718.3	73.8	4%
5.26	5.59	5.32	(0.27)	-5%	26	PRODUCTIVE FTE/ADJ. OCCUPIED BED	5.37	5.34	(0.03)	-1%
6.04	6.34	6.03	(0.31)	-5%	27	TOTAL FTE/ADJ. OCCUPIED BED	6.14	6.11	(0.03)	0%



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# Memorandum

**DATE:** September 23, 2024

**TO:** Washington Township Health Care District Board of Directors

**FROM:** Kimberly Hartz, Chief Executive Officer

**SUBJECT:** Appointment to the Washington Township Hospital Development Corporation Board of Directors

The Washington Township Hospital Development Corporation is a public benefit (nonprofit) California Corporation which is affiliated with the District. A five-member Board of Directors governs the Washington Township Hospital Development Corporation (DEVCO). Dr. Benn Sah was originally appointed to the DEVCO Board on January 18, 2010 and recently retired from the DEVCO Board effective June 18, 2024. This has created a vacancy on the DEVCO Board.

Please accept this memorandum as a request that the Board of Directors appoint Carol Dutra-Vernaci to fill the vacant position on the Washington Township Hospital Development Corporation Board of Directors for the remainder of the 2024 calendar year.