



# 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, June 10, 2020 – 6:00 P.M.  
Meeting Conducted by Teleconference  
Dial In: 1-877-336-1829 Passcode: 2122606

## AGENDA

### PRESENTED BY:

- |  |   |
|--|---|
| <p><b>I. CALL TO ORDER &amp; PLEDGE OF ALLEGIANCE</b></p>  | <p>Michael J. Wallace<br/>Board President</p> |
| <p><b>II. ROLL CALL</b></p>  | <p>Dee Antonio<br/>District Clerk</p>         |
| <p><b>III. CONSENT CALENDAR</b><br/><i>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.</i></p>   | <p>Michael J. Wallace<br/>Board President</p> |
| <p>A. Consideration of Minutes of the Regular Meetings of the District Board: May 13, 18, 26, and 27, 2020</p>   | <p><i>Motion Required</i></p>                 |
| <p>B. Consideration of Medical Staff Credentialing Action Items (May12, 2020)</p>  |   |
| <p>C. Consideration of Medical Executive Committee Action Items: (1) Allied Health Practitioner OPPE Indicators for Specialties of Medicine, Perfusionist, OB/GYN, and Surgery; and (2) Physician OPPE Indicators for Departments of Surgery and Radiology, including Tele-radiology</p> |   |
| <p>D. Consideration of Budgeted Capital Request: Welch Allyn Replacement Phase 2 (\$720,224.94)</p>  |   |
| <p>E. Consideration of Budgeted Capital Request: Prenatal Diagnostic Center 3<sup>rd</sup> Ultrasound and Viewpoint Software (\$159,225.90)</p>  |   |
| <p><b>IV. COMMUNICATIONS</b></p>   |   |
| <p>A. Oral</p>   |   |
| <p><i>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</i></p>                          |   |

Board Meeting Agenda

June 10, 2020

Page 2

*should be filled out in advance and presented to the District Clerk. For the record, please state your name.*

B. Written

**V. REPORTS**

A. Finance Report

**PRESENTED BY:**

Chris Henry  
Vice President & Chief Financial  
Officer

B. Hospital Operations Report

Kimberly Hartz  
Chief Executive Officer

**VI. ACTION ITEMS**

A. Consideration of Resolution #1211 Memorandum  
of Understanding between Washington Hospital  
and Local 6

*Motion Required*

**VII. ANNOUNCEMENTS**

Kimberly Hartz  
Chief Executive Officer

**VIII. ADJOURN TO CLOSED SESSION**

*In accordance with Section 32106 and 32155 of the  
California Health & Safety Code, portions of this  
meeting may be held in closed session.*

A. Report of Medical Staff and Quality Assurance  
Committee, Health & Safety Code section 32155

B. Report involving a trade secret pursuant to Health  
& Safety Code section 32106

**IX. RECONVENE TO OPEN SESSION &  
REPORT ON CLOSED SESSION**

Michael J. Wallace  
Board President

**X. ADJOURNMENT**

Michael J. Wallace  
Board President

*In compliance with the Americans with Disabilities Act, if you need assistance to participate in this meeting, please contact the District Clerk at (510) 818-6500. Notification two working days prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to this meeting.*

A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, May 13, 2020 via Teleconference in order to comply with Governor Gavin Newsom's and Alameda County's mandatory orders to Shelter at Home to reduce the risk of spread of COVID-19. Director Wallace called the meeting to order at 6:02 pm 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: Michael Wallace; William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS; Jacob Eapen, MD  
Absent:

*ROLL CALL*

Also present: Kimberly Hartz, Chief Executive Officer; Dee Antonio, District Clerk

Guests: Ed Fayen, Chris Henry, Stephanie Williams, Prasad Kilaru MD, Paul Kozachenko

Director Wallace welcomed any members of the general public to the meeting. He stated that Governor's Newsom's Executive Order N-29-20 explicitly waives The Brown Act provision that requires physical presence of members, the clerk or other personnel of the body, or of the public as a condition of participation in, or quorum for, a public meeting. He noted that Washington Township Health Care District continues to comply with the Brown Act in providing teleconference Dial-in information in order to provide the public the opportunity to attend the meeting and that Public Notice for this meeting, including dial-in information, was posted appropriately on our website. When asked if any members of the general public were in attendance and interested in speaking, there was no response.

*OPENING REMARKS*

Director Wallace presented the Consent Calendar for consideration:

*CONSENT CALENDAR*

- A. Minutes of the Regular Meetings of the District Board: April 8, 22, and 27, 2020
- B. Medical Staff Credentialing Action Items
- C. Resolution No. 1209: Resolution and Order of the Board of Directors of Washington Township Health Care District of Alameda County, State of California Calling a District General Election to be Held in Washington Township Health Care District on November 3, 2020.
- D. Resolution No. 1210: Resolution Ordering the Consolidation of the Health Care District General Election to be Held in Washington Township Health Care District of Alameda County, State of California on November 3, 2020; and Requesting the Board of Supervisors of the County of Alameda to Consolidate Said Health Care District General Election with Said Statewide General Election, Insofar as the Territory in Which Said Elections Are to be Held Is the Same

In accordance with District law, policies, and procedures, Director Stewart moved that the Board of Directors approve the Consent Calendar, items A through D.

Director Eapen seconded the motion.

Roll call was taken:

Michael Wallace – aye  
William Nicholson, MD – aye  
Jeannie Yee - aye

Jacob Eapen, MD - aye  
Bernard Stewart, DDS – aye

The motion unanimously carried.

There were no Oral communications.

*COMMUNICATIONS:  
ORAL*

There were no Written communications.

*COMMUNICATIONS:  
WRITTEN  
FINANCE REPORT*

Chris Henry, Vice President & Chief Financial Officer, presented the Finance Report for March 2020 noting that Covid 19 restrictions went into effect March 17<sup>th</sup>. The average daily census was 158.0 with admissions of 960 resulting in 4,820 patient days. Outpatient observation equivalent days were 183. The average length of stay was 5.03 days. The case mix index was 1.474. Deliveries were 128. Surgical cases were 376. Joint Replacement cases were 151. Neurosurgical cases were 22. Cardiac Surgical cases were 10. The Outpatient visits were 7,723 and Emergency visits were 4,398. Total productive FTEs were 1,514.2. FTEs per adjusted occupied bed were 6.52.

Kimberly Hartz presented the Hospital Operations Report for April 2020 indicating that April was a full month under Covid 19 restrictions. Preliminary information for the month indicated gross revenue at approximately \$104,704,000 which included receipt of a one-time Cares Act Grant. The Average Length of Stay was 4.94 and there were 3,238 patient days. The Average Daily Census was 107.9 with some days below 90. There were 138 Surgical Cases (Urgent and Emergent only) and 199 Cath Lab procedures at the Hospital. Deliveries were 128. Non-Emergency Outpatient visits were 2,702. Total Government Sponsored Preliminary Payor Mix was 66.1%, against the budget of 72.1%. Total FTEs per Adjusted Occupied Bed were 8.66. The Washington Outpatient Surgery Center had 57 cases and the clinics saw approximately 1,938 patients. Homeless Patient Total Encounters were 161 with an estimated unreimbursed cost of homeless care of \$586,000 for the month of April.

*HOSPITAL  
OPERATIONS REPORT*

Kimberly Hartz talked about Hospital Week recognitions and gave an update of the COVID-19 preparations for supplies and PPE

*ANNOUNCEMENTS*

In accordance with Health & Safety Code Section 32106 and 32155, Director Wallace adjourned the meeting to closed session at 6:36 pm, as the discussion pertained to Medical Staff and Quality Assurance and Hospital trade secrets. Mr. Wallace stated that the public has a right to know what, if any, reportable action takes place during closed session. Since this is a teleconference call and we have 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 May 14, 2020. He indicated that the minutes of this meeting will reflect any reportable actions.

*ADJOURN TO CLOSED  
SESSION*

Director Wallace reconvened the meeting to open session at 7:28 pm and reported that no reportable action was taken in closed session.

*RECONVENE TO OPEN  
SESSION & REPORT ON  
CLOSED SESSION*

Board of Directors' Meeting

May 13, 2020

Page 3

There being no further business, Director Wallace adjourned the meeting at 7:28 pm. *ADJOURNMENT*

---

Michael J. Wallace  
President

---

Bernard Stewart, DDS  
Secretary

DRAFT

A regular meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, May 18, 2020 via Teleconference in order to comply with Governor Gavin Newsom's and Alameda County's mandatory orders to Shelter at Home to reduce the risk of spread of COVID-19. Director Wallace called the meeting to order at 6:04 p.m. and led those present in the Pledge of Allegiance.

*CALL TO ORDER*

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

*ROLL CALL*

Also present: Kimberly Hartz, Chief Executive Officer; Ed Fayen, Executive Vice President; Chris Henry, Vice President; Tina Nunez, Vice President; Stephanie Williams, Vice President; Paul Kozachenko, Legal Counsel; Dee Antonio, District Clerk

There were no oral communications.

*COMMUNICATIONS*

There were no written communications.

In accordance with District Law, Policies and Procedures, Director Stewart moved that the Board of Directors authorize the Chief Executive Officer to proceed with the purchase of the IntilleVue G7m Anesthetic Gas Monitor Modules from Philips Healthcare for an amount not to exceed \$86,536.45.

*CONSIDERATION OF BUDGETED CAPITAL REQUEST: ANESTHETIC GAS MODULES*

Director Nicholson seconded the motion.

Roll call was taken:

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

The motion unanimously carried.

None

*ANNOUNCEMENTS*

In accordance with Health & Safety Code Sections 32106 and 32155 and California Government Code 54956.9(d)(2), Director Wallace adjourned the meeting to closed session at 6:10 p.m., as the discussion pertained to a trade secret pursuant to Health & Safety Code section 32106 Continuing Program discussion and a Report of Medical Staff and Quality Assurance pursuant to Health & Safety Code Section 32155.

*ADJOURN TO CLOSED SESSION*

Director Wallace reconvened the meeting to open session at 7:18 p.m. and reported that no reportable action was taken in Closed Session.

*RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION*

There being no further business, Director Wallace adjourned the meeting at 7:18 pm.

*ADJOURNMENT*

\_\_\_\_\_  
Michael J. Wallace  
President

\_\_\_\_\_  
Bernard Stewart, DDS  
Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Tuesday, May 26, 2020 via Teleconference in order to comply with Governor Gavin Newsom's and Alameda County's mandatory orders to Shelter at Home to reduce the risk of spread of COVID-19.

*CALL TO ORDER*

Director Nicholson called the meeting to order at 7:30 a.m.

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

*ROLL CALL*

Also present: Jeff Stuart, MD; Prasad Kilaru, MD; Kranthi Achanta, MD; Shakir Hyder, MD; Tim Tsoi, MD; Jan Henstorf, MD; Kimberly Hartz, Chief Executive Officer; Stephanie Williams, Vice President & Chief Nursing Officer

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 8:40 a.m. and reported no reportable action taken in closed session.

*RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION*

There being no further business, the meeting adjourned at 8:40 a.m.

*ADJOURNMENT*

---

Michael Wallace  
President

---

Bernard Stewart  
Secretary

A regular meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, May 27, 2020 via Teleconference in order to comply with Governor Gavin Newsom's and Alameda County's mandatory orders to Shelter at Home to reduce the risk of spread of COVID-19. Director Wallace called the meeting to order at 6:01 p.m. and led those present in the Pledge of Allegiance.

*CALL TO ORDER*

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

*ROLL CALL*

Also present: Kimberly Hartz, Chief Executive Officer; Ed Fayen, Executive Vice President; Chris Henry, Vice President; Tina Nunez, Vice President; Stephanie Williams, Vice President; Paul Kozachenko, Legal Counsel; Dee Antonio, District Clerk

There were no oral communications.

*COMMUNICATIONS*

There were no written communications.

Director Wallace presented the Consent Calendar for consideration:

*CONSENT CALENDAR*

- A. Budgeted Capital Request: Replacement of Coils & Condensate Pan for Air Handler Unit 38 (\$163,875.00)
- B. Budgeted Capital Request: Split System Air Condition Unit for Prenatal Diagnostic Clinic (\$65,272.66)

In accordance with District law, policies, and procedures, Director Stewart moved that the Board of Directors approve the Consent Calendar, items A and B.

Director Yee seconded the motion.

Roll call was taken:

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

The motion unanimously carried.

None

*ANNOUNCEMENTS*

In accordance with Health & Safety Code Sections 32106 and 32155 and California Government Code 54956.9(d)(2), Director Wallace adjourned the meeting to closed session at 6:05 p.m., as the discussion pertained to a trade secret pursuant to Health & Safety Code section 32106 Continuing Program discussion and a Report of Medical Staff and Quality Assurance pursuant to Health & Safety Code Section 32155.

*ADJOURN TO CLOSED SESSION*

Director Wallace reconvened the meeting to open session at 7:50 p.m. and reported that no reportable action was taken in Closed Session.

*RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION*



There being no further business, Director Wallace adjourned the meeting at 7:50 pm. *ADJOURNMENT*

---

Michael J. Wallace  
President

---

Bernard Stewart, DDS  
Secretary

DRAFT



Washington Hospital  
Healthcare System

S I N C E 1 9 4 8

---

## Memorandum

**DATE:** May 26, 2020

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

**FROM:** Prasad Kilaru, MD  
Chief of Staff

**SUBJECT:** Final Credentials Actions

The Medical Executive Committee approved the Credential Action Items on May 18, 2020. Please accept this memorandum as a formal request for consideration of approval by the Board of Directors of the Credential Action Items as attached.

WASHINGTON HOSPITAL MEDICAL STAFF  
FINAL CREDENTIALS ACTION ITEMS

May 18, 2020

The following written communication received from Prasad Kilaru, MD, Chief of Staff, dated May 12, 2020 requesting approval of Medical Staff Credentialing Action Items as follows:

Initial Appointments – Two Year

Anderson, John MD; Britton, Ian MD; Grewal, Harkiran MD; Grewal, Navjot MD; Patel, Bijal MD; Raja, Santhi MD; Rajan, Jay MD; Wilkof, Leslie MD

Initial Appointments – One Year

None

Temporary Privileges

Britton, Ian MD; Grewal, Harkiran MD; Grewal, Navjot MD; Patel, Bijal MD; Raja, Santhi MD; Wilkof, Leslie MD

Disaster Privileges – approved while application is waiting for Board approval

None

Locum Tenens

None

30 Days Extension Request – Application Not Complete

None

Waiver Request

None

Reappointments – Two Year

Barzin, Ario MD; Beg, Sumbul MD; Chen, Fulton MD; El-Sayed, Yasser; Goldman, Robin MD; Haws, Kelly PA-C; Henstorf, Jan MD; Hopkins, Linda MD; Jiang, Lei PA-C; Krishnan, Savitha MD; Kumar, Pradeep MD; Kwok, Joseph MD; Lee, Simon MD; Paro, John MD; Rodwell, Graham MD; Romano, John MD; Sah, Alexander MD; Satariano, Jennifer NP; Siu, John MD; Srinivas, Shekar MD; Wadhvani, Rita MD

Reappointments – One Year

Carlson, Carl MD; Kolluru, Gopala MD; Okamoto, Eric MD

Addition of Physician Supervisor

None

Conditional Reappointments

None

Non-Reappointments – Deemed to Have Resigned

Rose, Barry MD

Transfer in Staff Category

Linn, Wutt MD; Rodwell, Graham MD

Completion of Proctoring Prior to Eligibility for Advancement in Staff Category

None

Completion of Proctoring and Advancement in Staff Category

Krishan, Rachna MD; Linn, Wutt MD

Extension of Proctorship and Provisional Category 1-year

None

New Privilege Requests

Barzin, Ario MD; Beygui, Ramin MD; Henstorf, Jan MD; Kwok, Joseph MD; Sah, Alexander MD; Srinivas, Shekar MD

Delete Privilege Requests

Barzin, Ario MD; Henstorf, Jan MD; Krishan, Rachna MD; Okamoto, Eric MD; Paro, John MD; Romano, John MD

Conflict of Interest Statement Updated

Henstorf, Jan MD; Kumar, Pradeep MD; Krishnan, Savitha MD; Romano, John MD; Sah, Alexander MD

Leave of Absence

None

Reinstatement of Leave of Absence

None

Withdrawal of Application

None

Suspensions / Relinquishment

None

Resignations

Ambati, Sreekanth MD; Chan, Amber NP; Gandhir, Garima DO; Ikpatt, Efe NP; Larralde, Mark MD; Larson, David MD; Samyuktha, Lokeshwar NP



Washington Hospital  
Healthcare System

S I N C E 1 9 4 8

---

## Memorandum

**DATE:** May 18, 2020

**TO:** Kimberly Hartz  
Chief Executive Officer

**FROM:** Prasad Kilaru, MD  
Chief of Medical Staff

**SUBJECT:** MEC Action Items for Board Approval

On May 18, 2020, the Medical Executive Committee approved the Allied Health Practitioner (AHP) OPPE indicators for the specialties of Medicine, Perfusionist, OB/GYN, and Surgery. The MEC also approved the Physician OPPE indicators for the Departments of Surgery and Radiology, including Tele-radiology.

Please accept this memorandum as a formal request for consideration of final approval by the Board of Directors.

**Washington Hospital Healthcare System**  
**STATIT INDICATORS SUMMARY FOR ALLIED HEALTH PROFESSIONALS OPPE PROFILE SUMMARY**

No	Competency Measures	Data Sources	Data Type	AHP MEDICINE
<b>PATIENT CARE</b>				X
1	Prepare admission orders under the direction of the attending	MIDAS	Rate	X
2	History & Physical: accurate and complete	MIDAS	Rate	X
3	Assist with discharge planning, provision of discharge instructions and identify appropriate community resources	MIDAS	Rate	X
4	Diagnostic testing is ordered appropriately (Labs, Imaging)	MIDAS	Rate	X
5	Technical Ability	MIDAS	Rate	X
<b>MEDICAL KNOWLEDGE</b>				X
1	Appropriate selection/ interpretation/analysis of diagnostic	MIDAS	Rate	X
2	Overall integration of clinical information into treatment	MIDAS	Rate	X
3	Pharmacological knowledge/ appropriate ordering of	MIDAS	Rate	X
<b>PRACTICE-BASED LEARNING IMPROVEMENT</b>				X
1	Applies evidence-based medicine to clinical decisions	MIDAS	Rate	X
2	Awareness of quality improvement measures and application	MIDAS	Rate	X
3	Facilitates the learning of students and other health care	MIDAS	Rate	X
<b>INTERPERSONAL/ COMMUNICATION SKILLS</b>				X
1	Promote open communication with Supervising Physician	MIDAS	Rate	X
<b>PROFESIONALISM</b>				X
1	General overall assess of professionalism	MIDAS	Rate	X
<b>SYSTEM-BASED PRACTICE</b>				X
1	Antibiotics ordered appropriately (1 hour prior to surgery, stopped in 24 hours post-op, appropriate drug selected)	MIDAS	Rate	X
2	Pain management appropriate	MIDAS	Rate	X

**Washington Hospital Healthcare System**  
**STATIT INDICATORS SUMMARY FOR ALLIED HEALTH PROFESSIONALS OPPE PROFILE SUMMARY**

No	Competency Measures	Data Sources	Data Type	AHP PERFUSSION
<b>PATIENT CARE</b>				X
5	Technical Ability	MIDAS	Rate	X
6	Anticoagulation and hematologic monitoring	MIDAS	Rate	X
7	Physiological monitoring	MIDAS	Rate	X
8	Blood gas and blood chemistry monitoring	MIDAS	Rate	X
<b>MEDICAL KNOWLEDGE</b>				X
1	Appropriate selection/ interpretation/analysis of diagnostic	MIDAS	Rate	X
2	Overall integration of clinical information into treatment	MIDAS	Rate	X
3	Pharmacological knowledge/ appropriate ordering of	MIDAS	Rate	X
<b>PRACTICE-BASED LEARNING IMPROVEMENT</b>				X
1	Applies evidence-based medicine to clinical decisions	MIDAS	Rate	X
2	Awareness of quality improvement measures and application	MIDAS	Rate	X
3	Facilitates the learning of students and other health care	MIDAS	Rate	X
<b>INTERPERSONAL/ COMMUNICATION SKILLS</b>				X
1	Promote open communication with Supervising Physician	MIDAS	Rate	X
<b>PROFESIONALISM</b>				X
1	General overall assess of professionalism	MIDAS	Rate	X
<b>SYSTEM-BASED PRACTICE</b>				X
3	Administration of medications via the extracorporeal circuit	MIDAS	Rate	X
4	Administration of blood components via the extracorporeal	MIDAS	Rate	X
5	Administration of and anesthetic agents via the	MIDAS	Rate	X

Washington Hospital Healthcare System  
**STATIT INDICATORS SUMMARY FOR ALLIED HEALTH PROFESSIONALS OPPE PROFILE SUMMARY**

No	Competency Measures	Data Sources	Data Type	AHP OBGYN
<b>PATIENT CARE</b>				X
1	Prepare admission orders under the direction of the attending	MIDAS	Rate	X
2	History & Physical: accurate and complete	MIDAS	Rate	X
3	Assist with discharge planning, provision of discharge instructions and identify appropriate community resources	MIDAS	Rate	X
4	Diagnostic testing is ordered appropriately (Labs, Imaging)	MIDAS	Rate	X
5	Technical Ability	MIDAS	Rate	X
<b>MEDICAL KNOWLEDGE</b>				X
1	Appropriate selection/ interpretation/analysis of diagnostic	MIDAS	Rate	X
2	Overall integration of clinical information into treatment	MIDAS	Rate	X
3	Pharmacological knowledge/ appropriate ordering of	MIDAS	Rate	X
<b>PRACTICE-BASED LEARNING IMPROVEMENT</b>				X
1	Applies evidence-based medicine to clinical decisions	MIDAS	Rate	X
2	Awareness of quality improvement measures and application	MIDAS	Rate	X
3	Facilitates the learning of students and other health care	MIDAS	Rate	X
<b>INTERPERSONAL/ COMMUNICATION SKILLS</b>				X
1	Promote open communication with Supervising Physician	MIDAS	Rate	X
<b>PROFESIONALISM</b>				X
1	General overall assess of professionalism	MIDAS	Rate	X
<b>SYSTEM-BASED PRACTICE</b>				X
1	Antibiotics ordered appropriately (1 hour prior to surgery, stopped in 24 hours post-op, appropriate drug selected)	MIDAS	Rate	X
2	Pain management appropriate	MIDAS	Rate	X



Washington Hospital Healthcare System  
 STATIT INDICATORS SUMMARY FOR ALLIED HEALTH PROFESSIONALS OPPE PROFILE SUMMARY

No	Competency Measures	Data Sources	Data Type	AHP SUREGRY
<b>PATIENT CARE</b>				X
1	Prepare admission orders under the direction of the attending	MIDAS	Rate	X
2	History & Physical: accurate and complete	MIDAS	Rate	X
3	Assist with discharge planning, provision of discharge instructions and identify appropriate community resources	MIDAS	Rate	X
4	Diagnostic testing is ordered appropriately (Labs, Imaging)	MIDAS	Rate	X
5	Technical Ability	MIDAS	Rate	X
<b>MEDICAL KNOWLEDGE</b>				X
1	Appropriate selection/ interpretation/analysis of diagnostic	MIDAS	Rate	X
2	Overall integration of clinical information into treatment	MIDAS	Rate	X
3	Pharmacological knowledge/ appropriate ordering of	MIDAS	Rate	X
<b>PRACTICE-BASED LEARNING IMPROVEMENT</b>				X
1	Applies evidence-based medicine to clinical decisions	MIDAS	Rate	X
2	Awareness of quality improvement measures and application	MIDAS	Rate	X
3	Facilitates the learning of students and other health care	MIDAS	Rate	X
<b>INTERPERSONAL/ COMMUNICATION SKILLS</b>				X
1	Promote open communication with Supervising Physician	MIDAS	Rate	X
<b>PROFESIONALISM</b>				X
1	General overall assess of professionalism	MIDAS	Rate	X
<b>SYSTEM-BASED PRACTICE</b>				X
1	Antibiotics ordered appropriately (1 hour prior to surgery, stopped in 24 hours post-op, appropriate drug selected)	MIDAS	Rate	X
2	Pain management appropriate	MIDAS	Rate	X

## Surgery OPPE Credential Scorecard

SERVICE: SURGERY

SPECIALTY: CARDIOTHORACIC SURGERY, GENERAL DENTISTRY, GENERAL SURGERY, GENERAL SURGERY HOSPITALIST, NEUROSURGERY, OPHTHALMOLOGY, ORAL AND MAXILLOFACIAL SURGERY, ORAL SURGERY, ORTHOPEDIC SURGERY, ORTHOPEDIC SURGERY HOSPITALIST, OTOLARYNGOLOGY, PATHOLOGY, PEDIATRIC SURGERY, PERIODONTOLOGY, PLASTIC SURGERY, PODIATRY, SURGERY, THORACIC SURGERY, UROLOGY, VASCULAR SURGERY







Status	Indicator	Peers Score	Goal	SPC Alert	Current Period
<b>A - Activity Data</b>					
▼	Total Inpatient Admissions by Provider (M)	1	n/a		Dec-2019
	Total Outpatient Encounters by Provider (M)	No Occurrences	n/a		No Occurrences
▲	Consultations by Provider (M)	2	n/a		Dec-2019
▲	Total Surgical Episodes in WH OR by Provider (M)	3	n/a		Dec-2019
▲	Total Procedures in Cath Lab by Provider (M)	0	n/a		Dec-2019
<b>B - Patient Care</b>					
▼	Acute Care Mortality Rate by Attending Provider (M)	0.0%	n/a		Dec-2019
▼	Inpt with Dx Not Present on Admission Mortality Rate by Provider (M)	0.0%	n/a		Dec-2019
✗ ▲	Severe Sepsis or Septic Shock Mortality Rate by Provider (M)	100.0%	28.0%		Oct-2019
✗ ▲	Sepsis, Any Diagnosis - Mortality Rate by Provider (M)	100.0%	28.0%		Nov-2019
▲	Inpatient Readmission Within 30 Days by Provider (M)	5.1%	n/a		Dec-2019
—	Wound Infection Rate by Provider (M)	0.0%	n/a		Dec-2019
—	Intraoperative Injuries Rate by Provider (M)	0.0%	n/a		Dec-2019
▼	Unplanned Return to OR (	0.3%	n/a		Dec-2019
—	Post-op CNS Complication Rate by Provider (M)	0.0%	n/a		Dec-2019
<b>C - Medical and Clinical Knowledge</b>					
—	Autopsy Requested by Provider (M)	0	n/a		Dec-2019
—	Blood Use Not Meeting Criteria by Provider (M)	0	0		Dec-2019
—	No Blood Transfusion Consent in Chart by Provider (M)	0	0		Dec-2019
<b>D - Practice Based Learning and Improvement</b>					

Status	Indicator	Peers Score	Goal	SPC Alert	Current Period
★ ▲	Core VTE-1 - Venous Thromboembolism Prophylaxis by Providers (Q)	100.0%	100.0%		CY2016-Q4
★ —	Core VTE-2 - ICU Venous Thromboembolism Prophylaxis by Provider (Q)	100.0%	100.0%		CY2016-Q4
✗ ▼	Core VTE-3 - VTE Patients With Anticoag Overlap Therapy by Provider (Q)	0.0%	100.0%		CY2015-Q4
✗ ▼	Core VTE-3a - Prin DX VTE w/ Anticoag Overlap Thrpy by Provider (Q)	0.0%	100.0%		CY2015-Q4
★ —	Core VTE-3b - Sec DX VTE w/ Anticoag Overlap Thrpy by Provider (Q)	100.0%	100.0%		CY2015-Q3
★ —	Core VTE-5 - VTE Discharge Instructions by Provider (Q)	100.0%	100.0%		CY2015-Q4
★ —	Core VTE-5a - Prin DX VTE Discharge Instructions by Provider (Q)	100.0%	100.0%		CY2015-Q4
★ —	Core VTE-5b - Sec DX VTE Discharge Instructions by Provider(Q)	100.0%	100.0%		CY2015-Q3
★ —	Core VTE-6 - Incidence of Potentially-Preventable VTE by Provider (Q)	0.0%	0.0%		CY2019-Q1
✗ ▼	Core VTE ALL All-or-None Bundle by Provider (Q)	90.0%	100.0%		CY2015-Q4
<b>E - Interpersonal and Communication</b>					
★ ▲	Composite Patient Satisfaction Score (PG Survey Data) by Provider (Q)	95.0%	90.0%		CY2019-Q3
▼	CAHPS-MD Communication Rate by Provider (Q)	96.3%	n/a	☒	CY2019-Q4
—	Compliment by Provider (M)	0	n/a		Dec-2019
—	Complaints Referred to the Medical Staff by Provider (M)	0	n/a		Dec-2019
<b>F - Professionalism</b>					
▲	Total Brief OP Note Not Documented by Provider (M)	0	n/a		Dec-2019
▲	Total H&P Not Dictated within 24 hours by Provider (M)	0	0		Dec-2019
▲	Total OP/Procedures Report Not Dictated by Provider (M)	0	0		Dec-2019
<b>G - Systems Based Practice</b>					
▼	Average Length of Stay by Provider (M)	2.77	n/a		Dec-2019
<b>H - Professional Practice Evaluation</b>					
▼	PPE-No Action Required by Provider (M)	0	n/a		Dec-2019
▲	PPE-Information Letter-Medical Record Documentation by Provider (M)	0	0	☒	Dec-2019
—	PPE-Information Letters-Rules and Regulations by Provider (M)	0	0		Dec-2019

Status	Indicator	Peers Score	Goal	SPC Alert	Current Period
—	PPE-Information Letter-Compliance with Core Measures by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letter-Clinical Protocol by Provider (M)	0	n/a		Dec-2019
—	PPE-Education Letter by Provider (M)	0	0		Dec-2019
	PPE-Medical Staff Code of Conduct Policy by Provider (M)	No Occurrences	n/a		No Occurrences
	PPE-Practitioner Health Policy by Provider (M)	No Occurrences	n/a		No Occurrences
	PPE-Other Policy by Provider (M)	No Occurrences	n/a		No Occurrences
■	PPE-Collegial Intervention by Provider (M)	0	0		Dec-2019
	PPE-Performance Improvement Plan by Provider (M)	No Occurrences	n/a		No Occurrences

Provider Scorecard Generated 02/24/2020 13:52:19.

#### SPC Alert Legend

-  Most recent period is below Lower Control Limit
-  Most recent period is above Upper Control Limit
-  Process shift: Most recent 8 periods are all above the Center Line
-  Process shift: Most recent 8 periods are all below the Center Line
-  Most recent 6 periods are all increasing
-  Most recent 6 periods are all decreasing
- Green border: The alert is in a positive direction
- Red border: The alert is in a negative direction
- No border: There is no target direction for the indicator







**Radiology OPPE Credential Scorecard**  
**SERVICE: RADIOLOGY**  
**SPECIALTY: DIAGNOSTIC RADIOLOGY, INTERVENTIONAL RADIOLOGY,**  
**NEUROINTERVENTIONAL RADIOLOGY, NEURORADIOLOGY, RADIATION**  
**ONCOLOGY, RADIOLOGY**

Status	Indicator	Peers Score	Goal	SPC Alert	Current Period
<b>A - Activity Data</b>					
▼	Total Radiology Outpatient Encounters (Face to Face) by Provider (M)	5	n/a		Dec-2019
	Total Outpatient Encounters by Provider (M)	No Occurrences	n/a		No Occurrences
▼	Consultations by Provider (M)	2	n/a		Dec-2019
▼	Total Invasive Radiology Procedures by Provider (M)	3	n/a		Dec-2019
▼	Total Procedures in Cath Lab by Provider (M)	3	n/a		Dec-2019
<b>B - Patient Care</b>					
▼	True Positive Mammography by Provider (Q)	37.5%	n/a		CY2019-Q3
▲	False Negative Mammography by Provider (Q)	25.0%	n/a		CY2019-Q3
—	Injury During Invasive Radiology Procedures Rate by Provider (M)	0.0%	n/a		Dec-2019
▲	Complication of Invasive Procedure Rate by Provider (M)	1.5%	n/a		Dec-2019
	Unplanned Return to Cath Lab Rate by Provider (M)	No Occurrences	n/a		No Occurrences
<b>C - Medical and Clinical Knowledge</b>					
—	Informed Consent Present Rate by Provider (M)	90%	n/a		Dec-2019
<b>E - Interpersonal and Communication</b>					
★ ▲	Composite Patient Satisfaction Score (PG Survey Data) by Provider (Q)	100.0%	90.0%		CY2018-Q4
—	CAHPS-MD Communication Rate by Provider (Q)	100.0%	n/a		CY2018-Q4
—	Compliment by Provider (M)	0	n/a		Dec-2019
—	Complaints Referred to the Medical Staff by Provider (M)	0	n/a		Dec-2019
<b>F - Professionalism</b>					
—	Total Brief OP Note Not Documented by Provider (M)	0	n/a		Dec-2019
—	Total H&P Not Dictated within 24 hours by Provider (M)	0	n/a		Dec-2019
—	Total OP/Procedures Report Not Dictated by Provider (M)	0	n/a		Dec-2019
<b>H - Professional Practice Evaluation</b>					

Status	Indicator	Peers Score	Goal	SPC Alert	Current Period
▼	PPE-No Action Required by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letter-Medical Record Documentation by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letters-Rules and Regulations by Provider (M)	0	0		Dec-2019
—	PPE-Information Letter-Compliance with Core Measures by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letter-Clinical Protocol by Provider (M)	0	n/a		Dec-2019
—	PPE-Education Letter by Provider (M)	0	0		Dec-2019
	PPE-Medical Staff Code of Conduct Policy by Provider (M)	No Occurrences	n/a		No Occurrences
	PPE-Practitioner Health Policy by Provider (M)	No Occurrences	n/a		No Occurrences
	PPE-Other Policy by Provider (M)	No Occurrences	n/a		No Occurrences
—	PPE-Collegial Intervention by Provider (M)	0	0		Dec-2019
	PPE-Performance Improvement Plan by Provider (M)	No Occurrences	n/a		No Occurrences

Provider Scorecard Generated 02/24/2020 13:49:06.

#### SPC Alert Legend

-  Most recent period is below Lower Control Limit
-  Most recent period is above Upper Control Limit
-  Process shift: Most recent 8 periods are all above the Center Line
-  Process shift: Most recent 8 periods are all below the Center Line
-  Most recent 6 periods are all increasing
-  Most recent 6 periods are all decreasing
- Green border: The alert is in a positive direction
- Red border: The alert is in a negative direction
- No border: There is no target direction for the indicator

**Teleradiology OPPE Credential Scorecard**  
**SERVICE: RADIOLOGY**  
**SPECIALTY: RADIOLOGY/TELEMEDICINE**

Status	Indicator	Peers Score	Goal	SPC Alert	Current Period
<b>C - Medical and Clinical Knowledge</b>					
—	Major Discrepancy in Radiology Interpretation by Provider (M)	0.00%	n/a		Sep-2018
▲	Minor Discrepancy in Radiology Interpretation by Provider (M)	0.48%	n/a		Sep-2018
<b>H - Professional Practice Evaluation</b>					
▽	PPE-No Action Required by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letter-Medical Record Documentation by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letters-Rules and Regulations by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letter-Compliance with Core Measures by Provider (M)	0	n/a		Dec-2019
—	PPE-Information Letter-Clinical Protocol by Provider (M)	0	n/a		Dec-2019
—	PPE-Education Letter by Provider (M)	0	0		Dec-2019
	PPE-Medical Staff Code of Conduct Policy by Provider (M)	No Occurrences	n/a		No Occurrences
	PPE-Practitioner Health Policy by Provider (M)	No Occurrences	n/a		No Occurrences
	PPE-Other Policy by Provider (M)	No Occurrences	n/a		No Occurrences
—	PPE-Collegial Intervention by Provider (M)	0	0		Dec-2019
	PPE-Performance Improvement Plan by Provider (M)	No Occurrences	n/a		No Occurrences

Provider Scorecard Generated 02/24/2020 13:50:22.

**SPC Alert Legend**

- Most recent period is below Lower Control Limit
- Most recent period is above Upper Control Limit
- Process shift: Most recent 8 periods are all above the Center Line
- Process shift: Most recent 8 periods are all below the Center Line
- Most recent 6 periods are all increasing
- Most recent 6 periods are all decreasing
- Green border: The alert is in a positive direction
- Red border: The alert is in a negative direction
- No border: There is no target direction for the indicator



---

# Memorandum

**DATE:** June 4, 2020

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

**FROM:** Ed Fayen, Executive Vice President and COO

**SUBJECT:** Capital Purchase --Welch Allyn Replacement Phase 2

This is the second phase of replacement of the old Welch Allyn patient monitoring devices and system. WHHS has standardized on the Philips Healthcare monitoring devices and these are the devices that were installed in the ED, Critical Care, and TCU areas of the Morris Hyman Critical Care Pavilion.

These devices monitor patients' physiological status, using various integrated components depending on the patients' acuity. The parameters measured can include Heart Rate, Oxygen Saturation, Blood Pressure, EKG waveforms, etc. The patients' vital signs can be measured on a regular intermittent basis, or continuously. The data is transferred and stored in EPIC for use by clinicians. The units that will receive this technology are 4 West, IJR, Dialysis, Pediatrics, Birthing Center, PACU, and Pre-op Testing.

These devices are needed to replace the older models and the Welch Allyn system that are out of support.

The FY 2020 Capital Budget includes \$720,224.94 to purchase Welch Allyn Replacement Equipment.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to proceed with the purchase of the Welch Allyn Replacement Phase 2 from Philips Healthcare in the amount of \$720,224.94.





---

## Memorandum

DATE: April 02, 2020

CONFIDENTIAL

TO: Kimberly Hartz, Chief Executive Officer

FROM: Stephanie Williams, VP of PCS/Chief Nursing Officer

SUBJECT: PRENATAL DIAGNOSTIC CENTER – 3<sup>RD</sup> ULTRASOUND AND  
VIEWPOINT SOFTWARE

---

The Prenatal Diagnostic Center currently utilizes two 2016 General Electric Voluson E10 ultrasounds to performing diagnostic testing procedures for patients seen in the clinic. Since the clinic opened in early 2018, the volume of patients seen in the clinic has increased and is currently above the monthly anticipated volume for the clinic. The clinic space has a third exam room that is currently not used, and in order to meet patient demand for services and in order to not delay clinical services, a third ultrasound is being requested in order to meet the growing demand in the clinic. The cost of the third ultrasound, a 2019 General Electric Voluson E10 ultrasound, is \$137,494.50 plus \$12,718.24 tax, for a total of \$150,212.70.

The Prenatal Diagnostic Center also uses a software called Viewpoint, which interfaces with the General Electric ultrasounds and the Epic medical record system. Viewpoint allows the clinic physician and staff to create, review or edit exams and document exam findings, which are interfaced with Epic for documentation into the medical record. In order to meet the operating requirements of the clinic given the patient demand for services, and additional user license is required as well as an additional license for the 3<sup>rd</sup> ultrasound. The cost of the additional licenses is \$8,250 plus \$763.13 tax, for a total of \$9,013.13.

The total capital expenditure requested is \$159,225.90



**WASHINGTON HOSPITAL**  
**MONTHLY OPERATING REPORT**

April 2020



**WASHINGTON HOSPITAL  
INDEX TO BOARD FINANCIAL STATEMENTS  
April 2020**

<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



---

# Memorandum

**DATE:** June 4, 2020  
**TO:** Board of Directors  
**FROM:** Kimberly Hartz, Chief Executive Officer  
**SUBJECT:** Washington Hospital – April 2020  
Operating & Financial Activity

---

## SUMMARY OF OPERATIONS – (Blue Schedules)

### 1. Utilization – Schedule Board 3

	<u>April Actual</u>	<u>April Budget</u>	<u>Current 12 Month Avg.</u>
<u>ACUTE INPATIENT:</u>			
Average Daily Census	107.9	167.9	153.3
# of Admissions	641	980	931
Patient Days	3,238	5,036	4,677
Discharge ALOS	4.94	5.14	4.99
<u>OUTPATIENT:</u>			
OP Visits	2,702	7,343	7,289
ER Visits	2,435	4,044	4,240
Observation Equivalent Days – OP	77	127	175

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

### 2. Staffing – Schedule Board 3

Total paid FTEs were 235.3 below budget. Total productive FTEs for April were 1,060.7, 242.4 below the budgeted level of 1,303.1. Nonproductive FTEs were 7.1 above budget. Productive FTEs per adjusted occupied bed were 7.34, 1.82 above the budgeted level of 5.52. Total FTEs per adjusted occupied bed were 8.66, 2.35 above the budgeted level of 6.31.

### 3. **Income - Schedule Board 1**

For the month of April, the Hospital realized a loss of \$6,334,000 from operations.

Total Gross Patient Service Revenue of \$104,703,000 for April was 39.9% below budget.

Deductions from Revenue of \$79,197,000 represented 75.64 percent of Total Gross Patient Service Revenue. This percentage is below the budgeted 77.73 percent, primarily due to payor mix.

Total Operating Revenue of \$25,921,000 was \$13,375,000 (34.0%) below the budget.

Total Operating Expense of \$32,255,000 was \$7,121,000 (18.1%) below the budgeted amount.

The Total Non-Operating Income of \$1,024,000 for the month includes an unrealized gain on investments of \$499,000 and property tax revenue of \$1,417,000.

The Total Net Loss for April was \$5,310,000, which was \$5,294,000 less than the budgeted loss of \$16,000.

The Total Net Loss for April using FASB accounting principles, in which the unrealized loss or income on investments, net interest expense on GO bonds and property tax revenues are removed from the non-operating income and expense, was \$6,086,000 compared to a budgeted loss of \$243,000.

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

As a result of both the reduced level of patient activity in April, and on-going cash collections for services provided prior to March 17<sup>th</sup>, net patient accounts receivable declined by \$8.0 million to \$51.7 million at April 30, 2020. Cash collections in future months, which will be based on services provided after March 16<sup>th</sup>, are anticipated to be significantly lower.

During the month of April, as part of the federal government's efforts to assist providers experiencing reduced revenues and related cash flow challenges, the Hospital received \$56.8 million in advanced payments from Medicare and another \$9.3 million in stimulus funding under the COVID-19 related CARES Act.

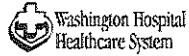
The \$66.1 million total for both funding sources is reflected in liabilities as Other Accrued Liabilities and in assets as Cash and Cash Equivalents and Board Designated for Capital and Debt. The Medicare advance payments will be repaid based on future Medicare patient activity and the requirements for recognition of the stimulus funding in income are still being developed. It is anticipated that the stimulus funding will be recognized as non-operating revenue by June 2020.

There were no other noteworthy changes in assets and liabilities when compared to March 2020.

KIMBERLY HARTZ  
Chief Executive Officer

KH/CH





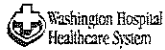
**WASHINGTON HOSPITAL  
BALANCE SHEET**

April 2020  
(In thousands)

SCHEDULE BOARD 2

ASSETS AND DEFERRED OUTFLOWS			LIABILITIES, NET POSITION AND DEFERRED INFLOWS				
	April 2020	Audited June 2019		April 2020	Audited June 2019		
<b>CURRENT ASSETS</b>			<b>CURRENT LIABILITIES</b>				
1	CASH & CASH EQUIVALENTS	\$ 60,219	\$ 32,099	1	CURRENT MATURITIES OF L/T OBLIG	\$ 9,500	\$ 8,550
2	ACCOUNTS REC NET OF ALLOWANCES	51,670	68,968	2	ACCOUNTS PAYABLE	14,312	23,784
3	OTHER CURRENT ASSETS	13,470	11,672	3	OTHER ACCRUED LIABILITIES	117,790	53,148
4	TOTAL CURRENT ASSETS	125,359	112,739	4	INTEREST	7,091	11,933
				5	TOTAL CURRENT LIABILITIES	148,693	97,415
<b>ASSETS LIMITED AS TO USE</b>			<b>LONG-TERM DEBT OBLIGATIONS</b>				
6	BOARD DESIGNATED FOR CAPITAL AND OTHER	213,633	156,039	6	REVENUE BONDS AND OTHER	224,100	224,309
7	GENERAL OBLIGATION BOND FUNDS	0	43	7	GENERAL OBLIGATION BONDS	332,109	335,824
8	REVENUE BOND FUNDS	10,878	18,613	<b>OTHER LIABILITIES</b>			
9	BOND DEBT SERVICE FUNDS	17,594	31,451	10	NET PENSION LIABILITY	29,739	63,510
10	OTHER ASSETS LIMITED AS TO USE	10,073	9,779	11	WORKERS' COMP	8,083	7,750
11	TOTAL ASSETS LIMITED AS TO USE	252,178	215,925	12	SUPPLEMENTAL MEDICAL RETIREMENT	42,205	37,299
13	OTHER ASSETS	218,831	199,715	15	NET POSITION	503,171	506,810
14	OTHER INVESTMENTS	11,486	0	16	TOTAL LIABILITIES AND NET POSITION	\$ 1,288,100	\$ 1,272,917
15	NET PROPERTY, PLANT & EQUIPMENT	688,316	726,001	17	DEFERRED INFLOWS	68,174	44,923
16	TOTAL ASSETS	\$ 1,284,684	\$ 1,254,380	18	TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	\$ 1,356,274	\$ 1,317,840
17	DEFERRED OUTFLOWS	60,104	63,460				
18	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 1,356,274	\$ 1,317,840				





**WASHINGTON HOSPITAL  
OPERATING INDICATORS  
April 2020**

12 MONTH AVERAGE	April						YEAR TO DATE			
	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.
	<b><u>PATIENTS IN HOSPITAL</u></b>									
153.3	107.9	167.9	(60.0)	-36%	1	ADULT & PEDIATRIC AVERAGE DAILY CENSUS	148.4	163.9	(15.5)	-9%
5.8	2.6	4.2	(1.6)	-38%	2	OUTPATIENT OBSERVATION AVERAGE DAILY CENSUS	5.8	5.3	0.5	9%
8.7	7.7	8.5	(0.8)	-9%	3	NURSERY AVERAGE DAILY CENSUS	8.7	8.9	(0.2)	-2%
167.8	118.2	180.6	(62.4)	-35%	4	TOTAL	162.9	178.1	(15.2)	-9%
3.8	2.2	2.7	(0.5)	-19%	5	SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *	3.6	3.3	0.3	9%
4,677	3,238	5,036	(1,798)	-36%	6	ADULT & PEDIATRIC PATIENT DAYS	45,256	49,980	(4,724)	-9%
175	77	127	(50)	-39%	7	OBSERVATION EQUIVALENT DAYS - OP	1,762	1,606	156	10%
931	641	980	(339)	-35%	8	ADMISSIONS-ADULTS & PEDIATRIC	9,082	9,786	(704)	-7%
4.99	4.94	5.14	(0.20)	-4%	9	AVERAGE LENGTH OF STAY-ADULTS & PEDIATRIC	4.95	5.11	(0.16)	-3%
	<b><u>OTHER KEY UTILIZATION STATISTICS</u></b>									
1.475	1.463	1.456	0.007	0%	10	OVERALL CASE MIX INDEX (CMI)	1.475	1.461	0.014	1%
	<b><u>SURGICAL CASES</u></b>									
140	31	169	(138)	-82%	11	JOINT REPLACEMENT CASES	1,357	1,452	(95)	-7%
22	9	22	(13)	-59%	12	NEUROSURGICAL CASES	214	243	(29)	-12%
10	7	10	(3)	-30%	13	CARDIAC SURGICAL CASES	104	104	-	0%
183	91	179	(88)	-49%	14	ALL OTHERS	1,800	2,025	(225)	-11%
355	138	380	(242)	-64%	15	TOTAL CASES	3,475	3,824	(349)	-9%
378	199	329	(130)	-40%	16	TOTAL CATH LAB PROCEDURES	3,820	3,513	307	9%
128	128	117	11	9%	17	DELIVERIES	1,284	1,292	(8)	-1%
7,289	2,702	7,343	(4,641)	-63%	18	OUTPATIENT VISITS	72,005	74,824	(2,819)	-4%
4,240	2,435	4,044	(1,609)	-40%	19	EMERGENCY VISITS	41,804	42,496	(692)	-2%
	<b><u>LABOR INDICATORS</u></b>									
1,301.1	1,060.7	1,303.1	242.4	19%	20	PRODUCTIVE FTE'S	1,290.0	1,296.1	6.1	0%
189.3	192.2	185.1	(7.1)	-4%	21	NON PRODUCTIVE FTE'S	192.3	190.7	(1.6)	-1%
1,490.4	1,252.9	1,488.2	235.3	16%	22	TOTAL FTE'S	1,482.3	1,486.8	4.5	0%
5.85	7.34	5.52	(1.82)	-33%	23	PRODUCTIVE FTE/ADJ. OCCUPIED BED	5.87	5.52	(0.35)	-6%
6.71	8.66	6.31	(2.35)	-37%	24	TOTAL FTE/ADJ. OCCUPIED BED	6.75	6.33	(0.42)	-7%

\* included in Adult and Peds Average Daily Census



---

## Memorandum

**DATE:** June 2, 2020

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

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

**SUBJECT:** **Summary of Contract Negotiations with Local 6  
International Longshoremen & Warehouse Union**

We concluded the contract negotiations for a successor Memorandum of Understanding with the International Longshoremen & Warehouse Union (Local 6) on Thursday, May 14, 2020 and the members voted to ratify the settlement terms on Wednesday, May 20<sup>th</sup>.

The International Longshoremen & Warehouse Union, which consists of Radiology and Cath Lab technologists, has approximately 39 regular and 22 per diem employees for a total of 61 members.

I am proposing that the Board of Directors approve the terms agreed upon between Washington Hospital Healthcare System and the International Longshoremen & Warehouse Union (Local 6) as summarized below.

**Wages/Contract Term** The contract is for a three-year term from January 1, 2020 – December 31, 2022 and provides for wage increases over the course of that term. For the first year of the contract, all employees covered by this MOU will receive a 1% across-the-board increase to base wage rates retroactive to January 1, 2020. For the second year of the contract, the employees will receive a 2.5% across-the-board increase, and for the third year of the contract the across-the-board increase will be 2.5%. All future increases are effective in the next regular pay period following January 1.

Employees called back to work who are not on call will receive a differential of \$350, which is an increase from the current contractual rate of \$250. This change will be effective in the second year of the three-year contract.

**Addition of Step 7 After 15 Years of Service:** Employees would receive an additional step increase to a newly created Step 7 after 15 years of service. This additional step will be added in the second year of the contract. The current contract range ends at Step 6 with one year between steps.

**Benefits:** There were no changes made to benefits.

**Other Enhancements:** Agreement was reached on other minor language changes. In addition, side letters were signed and agreed upon regarding the Cath Lab Weekend Call Team and Accommodations for the COVID-19 Emergency.

**RESOLUTION 1211**  
**INTERNATIONAL LONGSHOREMEN & WAREHOUSE UNION (LOCAL 6)**

Washington Township Health Care District, a local health care district, does hereby resolve as follows:

Attached hereto is a List of Amendments to the current Agreement that will be incorporated into a new Memorandum of Understanding by and between the designated representative of Washington Hospital, that being the Chief Executive Officer, and the International Longshoremens & Warehouse Union (Local 6), a recognized majority representative under the terms of Board Resolution 331A.

The terms and conditions of the attached List of Amendments will be implemented in their entirety effective on the various dates specified with the Memorandum.

Passed and adopted by the Board of Directors of Washington Township Health Care District this 10<sup>th</sup> day of June, 2020, by the following vote:

AYES:

NOES:

ABSENT:

---

Michael Wallace  
President of the Washington Township  
Health Care District Board of Directors

---

Bernard Stewart  
Secretary of the Washington Township  
Health Care District Board of Directors