



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, May 8, 2024 – 6:00 P.M.

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

<https://zoom.us/j/96947525902?pwd=d2FYNHJwdHZOSldQbUhaVGVU1K3JaQT09>

Passcode: 306645

Board Agenda and Packet can be found at:

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

AGENDA

PRESENTED BY:

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

William Nicholson, MD
Second Vice 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.

William Nicholson, MD
Second Vice President

A. Consideration of Minutes of the Regular Meetings of the District Board: April 10, 15, 22 & 24, 2024

Motion Required

B. Consideration of Capital Budget Purchase – Omni Retractor Surgical Instrument Set

C. Consideration of Capital Budget Purchase –
Samsung Portable X-Ray Machine for Trauma

D. Consideration of 3M Software Purchase

E. Consideration of Medical Staff: Performance
Improvement and Patient Safety Committee (PIPS)

V. **PRESENTATIONS**

PRESENTED BY:

A. Trauma Update

Chet Morrison, MD
Trauma Program Medical Director

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:
Quality Dashboard Quarter Ending March 2024

Mary Bowron
Chief Quality Officer

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**

Motion Required

A. Consideration of Resolution No. 1261:
Approval of California Nurses Association
(CNA) Agreement

VIII. ANNOUNCEMENTS

IX. ADJOURNMENT

William Nicholson, MD
Second Vice 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, April 10, 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; William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS; Michael Wallace (arrived 6:05 pm)

ROLL CALL

Also present: Kimberly Hartz; Larry LaBossiere; Tina Nunez; Thomas McDonagh; Terri Hunter; Paul Kozachenko; Tammi Tyson; Dan Nardoni; Laura Anning; Dianne Martin, MD; Angus Cochran; Brian Smith, MD; Donald Pipkin; Gisela Hernandez; Jason Krupp, MD; Jerri Randrup; Lina Huang; Mark Saleh, MD; Melissa Garcia; Sheela Vijay; Kristin Ferguson; Sri Boddu; 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.

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 Minutes of the Regular Meetings of the District Board:
March 13, 18, 25 & 27, 2024

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

Roll call was taken:

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

Motion Approved.

Kimberly Hartz, Chief Executive Officer, introduced Laura Anning, Chief of Patient Experience who presented the Patient Experience Bi-Annual Report. Laura detailed the importance of gathering data and feedback, either by directly interacting with patients, or with the results of a paper or e-survey. The survey questions include the likelihood that a patient would recommend the quality of care from our nurses and doctors, to the environment, their experiences and understanding their care and overall rating. Some new features to the surveys include being available in the patient's preferred language and including specialized surveys from oncology, SCN and PEDS in addition to decreasing the number of non-deliverable surveys. Every comment is acknowledged and with the varying responses, it may indicate some challenges and areas that are impacted, and provides the opportunity for improvement.

*PRESENTATION:
PATIENT
EXPERIENCE –
BIANNUAL REPORT*

Patient Rounding is the practice of healthcare professionals proactively visiting and engaging with patients and family members. Studies have shown that nurse rounding is an effective means to increase patient satisfaction and quality of care and gather information by not solely relying on survey responses. Another means of gathering real time data is through Qualtrics during rounding and this gives us a way to communicate with the patient by listening, understanding and following through. With communication and teamwork, we can effectively increase patient satisfaction.

Dr. Mark Saleh, Chief of Staff, reported that there are 629 Medical Staff members, including 343 active members. Dr. Saleh commented on establishing the committee for the Emergency Medicine Department and working on the Department Manual.

*MEDICAL STAFF
REPORT*

Sheela Vijay, the Service League President, reported for the month of March 2024, that 193 Service League volunteers contributed a total of 1,705 hours. The Service League held a High School Informational Session on March 15, in which 42 high school students attended.

*SERVICE LEAGUE
REPORT*

The Service League also hosted an Open House on Tuesday April 9, 2024 which was well attended by volunteers and employees.

Sheela highlighted a special volunteer, Suzanne Corbett who is 89 years young. Suzanne has been a dedicated knitter and had connected with knitters at the Fremont Senior Center where she learned how to knit baby hats. During the pandemic, she began knitting hats and produced 80 hats by summer of 2020. She is a remote volunteer who knits beautiful hats for the newborn babies, here at Washington Hospital and has donated an estimated 700 hats to date. Suzanne's story illustrates how one person can make a profound impact without being physically present.

The Masquerade Sale will be held on April 29, 30 and May 1 in the Anderson Auditorium.

Kimberly Hartz, Chief Executive Officer, introduced Dr. Dianne Martin who presented the Annual Antimicrobial Stewardship Report. Dr. Martin began by discussing the Antimicrobial Stewardship Goals, which include promoting the appropriate use of antimicrobial agents, decreasing the development of microbial resistance and preventing the spread of infections caused by resistant organisms, in collaboration with the infection prevention team.

*QUALITY REPORT:
ANNUAL
ANTIMICROBIAL
STEWARDSHIP
REPORT*

Dr. Martin spoke on the importance of Antimicrobial Stewardship and how it is a critical part of modern medicine. The Interdisciplinary Team includes the Physician Leader, Medical Staff, Pharmacist Leader, Infection Prevention, Compliance, Information Services, Laboratory, Pharmacy and Nursing. Dr. Martin emphasized the updates to the treatment guidelines from the Joint Commission, CDC, NSHN, NIH and IDSA and Order Sets and ID Physician Consultation for use of specific antimicrobials.

There are continuous quality improvements by analyzing medication usage, identifying areas of improvement, implementing guidelines, order sets, protocols and optimizing Epic workflows for usage of antimicrobials and evaluating challenges.

There have been accomplishments in quality improvement which includes a developed laboratory screening criteria for sending cultures to reference lab for testing for a resistant gene, designing a treatment algorithm for ED regarding best practice for antibiotics, and implementing an ordering process for novel antibiotics. Also, a modified C.Diff testing algorithm to prevent unnecessary treatment and staff education on laboratory tests that can help determine when to discontinue antibiotics, have been provided

Tom McDonagh, Vice President & Chief Financial Officer, presented the Finance Report for February 2024. The average daily inpatient census was 166.4 with discharges of 933 resulting in 4,827 patient days. Outpatient observation equivalent days were 293. The average length of stay was 5.53 days. The case mix index was 1.673. Deliveries were 123. Surgical cases were 484. The Outpatient visits were 8,380. Emergency visits were 4,950. Cath Lab cases were 191. Joint Replacement cases were 175. Neurosurgical cases were 23. Cardiac Surgical cases were 14. Total FTEs were 1,646.1. FTEs per adjusted occupied bed were 5.89.

FINANCE REPORT

Kimberly Hartz, Chief Executive Officer, presented the Hospital Operations Report for March 2024. Patient gross revenue of \$213.2 million for March was favorable to budget of \$211.8 million by \$1.4 million (0.7%), and it was lower than March 2023 by \$3.1 million (1.4%).

*HOSPITAL
OPERATIONS REPORT*

The Average Length of Stay was 5.14. The Average Daily Inpatient Census was 169.1. There were 908 discharges that was unfavorable to budget of 1,097 (17.2%).

There were 5,241 patient days that was unfavorable to budget of 5,345 (1.9%).
There were 476 Surgical Cases and 186 Cath Lab cases at the Hospital.

Deliveries were 134. Non-Emergency Outpatient visits were 8,756. Emergency Room visits were 5,162. Total Government Sponsored Preliminary Payor Mix was 75.1%, against the budget of 72.2%. Total FTEs per Adjusted Occupied Bed was 5.75.

There were \$154K in charity care adjustments in March 2024.

April Employee of the Month is Soledad Fernandez, Environmental Services Aide.

EMPLOYEE OF THE MONTH

Past Health Promotions & Community Outreach Events:

HEALTHCARE SYSTEM CALENDAR REPORT

- March 20: Managing Diabetes with Exercise – Facebook Live & YouTube
- March 21: District Board Members represented WHHS at the Alameda County Special Districts Association Annual Dinner
- March 23: Newark Annual Family Day at the Park – Newark Community Park
- March 27: Dysphagia and Reflux Disease – Acacia Creek and Masonic Homes Senior Living Communities
- March 28: National Choking Awareness Day Event – Federicos Restaurant
- April 5: Sun: Beauty or Beast – Facebook Live & YouTube

Upcoming Health Promotion & Community Outreach Events

- April 13: Tattoo Removal Clinic - Washington West
- April 17: Grief and Grieving – Carlton Senior Living Community
- April 20: Go Green with Us in 2024! Earth Day Celebration - Fremont Downtown Event Center
- April 24: Robotic Knee Surgery and Muscle-sparing Anterior Hip Surgery – Anderson Auditorium and Facebook Live
- April 25: Choking First Aid Training – La Cabana Restaurant, Newark
- April 27: New Haven Day – James Logan High School
- April 30: Choking First Aid Training – Birdhaus Beer Garden, Union City
- April 30: Heart Valve Disorders in Adults – Acacia Creek and Masonic Homes Senior Living Communities
- May 6-15: Healthcare System Week – Washington Hospital
- May 7: Stroke Prevention Awareness – Facebook Live & YouTube

Kimberly Hartz, Chief Executive Officer, reported that Washington Hospital Healthcare System kicked off a community education campaign about Choking/First Aid in conjunction with National Choking Awareness Day. This event took place at Federicos Grill in Niles on March 28, 2024 at 3:00 pm.

The 37th Annual Golf & Bocce Tournament in support of Washington Hospital's Operating Rooms will be held on Thursday, May 2 at the Club at Castlewood in Pleasanton.

ANNOUNCEMENTS

There were no announcements.

There being no further business, Director Eapen adjourned the meeting at 7:42 p.m.

ADJOURNMENT

Jacob Eapen, MD
President

Bernard Stewart, DDS
Secretary

DRAFT

A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, April 15, 2024 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Wallace 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: Michael Wallace; William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS

ROLL CALL

Absent: Jacob Eapen, MD

Also present: Kimberly Hartz; Tina Nunez; Tom McDonagh; Larry LaBossiere; Paul Kozachenko; Shirley Ehrlich

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

OPENING REMARKS

Director Wallace 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 Wallace presented the Consent Calendar items for consideration:

CONSENT CALENDAR

A. Consideration of Console Upgrade for the Optima CT660.

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

Roll call was taken:

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

Motion approved.

Director Nicholson moved for the adoption of Resolution No. 1260, in which the Board of Directors of the Washington Township Health Care District authorizes and directs the Chief Executive Officer to apply for Verification as a Level II Adult Trauma Center and to meet all Verification Requirements of Alameda County. Director Stewart seconded the motion.

*ACTION ITEM:
ADOPTION OF
RESOLUTION
1260:APPLICATION
FOR VERIFICATION AS
A LEVEL II ADULT
TRAUMA CENTER*

Roll call was taken:

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

Motion Approved.

There were no Announcements.

ANNOUNCEMENTS

Director Wallace adjourned the meeting to closed session at 6:07 p.m., as the discussion pertained to reports regarding, 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 Wallace 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 April 16, 2024. The minutes of this meeting will reflect any reportable actions.

*ADJOURN TO CLOSED
SESSION*

Director Wallace reconvened the meeting to open session at 8:31 p.m. The District Clerk reported that during closed session, there was no reportable action taken in closed session.

*RECONVENE TO OPEN
SESSION & REPORT ON
CLOSED SESSION*

There being no further business, Director Eapen adjourned the meeting at 8:32 p.m.

ADJOURNMENT

Michael Wallace
First Vice President

Bernard Stewart, DDS
Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, April 22, 2024 in the Board Room at 2000 Mowry Avenue, Fremont. 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

ROLL CALL

Absent: Michael Wallace; Bernard Stewart, DDS

Also present: Kimberly Hartz; Mark Saleh, MD; John Romano, MD; Shakir Hyder, MD; Terri Hunter; Larry LaBossiere; LaDonna Creech

There were no Oral communications.

*COMMUNICATIONS:
ORAL*

There were no Written communications.

*COMMUNICATIONS
WRITTEN*

Director Eapen adjourned the meeting to closed session at 7:35 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 8:08 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 8:08 a.m.

ADJOURNMENT

Jacob Eapen, MD
President

Bernard Stewart, DDS
Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, April 24, 2024 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Wallace 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: Michael Wallace; William Nicholson, MD; Jeannie Yee; Bernard Stewart, DDS

ROLL CALL

Absent: Director Jacob Eapen, MD

Also present: Kimberly Hartz; Tina Nunez; Terri Hunter; Tom McDonagh; Larry LaBossiere; Paul Kozachenko; John Zubiena; Semone Clark

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

OPENING REMARKS

Director Wallace 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.

The following persons commented: Kim Lake, a nurse at the Hospital delivered a copy of the previously issued strike notice to the Board of Directors.

*COMMUNICATIONS
ORAL*

After Oral Communications Kimberly Hartz commented that she was disappointed with getting the ten-day strike notice while the District and the nurses are involved in good faith mediations. The District now has to plan for the strike even though we may reach agreement at the mediation this Saturday. That means we cannot wait to engage a staffing company, reschedule elective surgeries, and greatly inconvenience patients.

The District will have to incur hundreds of thousands of dollars immediately which will be a total waste of money if an agreement is reached notwithstanding the strike notice and its unnecessary negative consequences. Kimberly indicated that she is committed to the District participating in the mediation on Saturday in good faith with the hope that we can reach an agreement.

Director Wallace also commented: he supported the Administration and asked that CNA consider the negative impact that a strike would have on the District's finances and its patients.

There were no Written Communications.

*COMMUNICATIONS
WRITTEN*

Director Wallace presented the Consent Calendar for consideration:

CONSENT CALENDAR

- A. Consideration of Medical Staff: Hyperbaric Medicine for Nurse Practitioner Privileges
- B. Consideration of Medical Staff: Robotic-Assisted Surgery Privileges

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

Roll call was taken:

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

Motion Approved.

There were no Action Items.

ACTION ITEMS

There were no Announcements.

ANNOUNCEMENTS

Director Wallace adjourned the meeting to closed session at 6:11 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 Legal Counsel – Anticipated Litigation pursuant to Government Code Section 54956.9(d)(2); One Case and Conference Involving Personnel Matters: Chief Executive Officer. Director Wallace 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 April 25, 2024. 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 p.m. The District Clerk reported that during closed session, the Board approved the closed session minutes of March 18 & 27, 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 Wallace adjourned the meeting at 7:28 p.m.

ADJOURNMENT

Michael Wallace
First Vice President

Bernard Stewart, DDS
Secretary

DRAFT



Memorandum

DATE: May 8, 2024

TO: Washington Township Health Care District Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Consideration of Capital Budget Purchase – Omni Retractor Surgical Instrument Set - Operating Room (Trauma Preparedness)

Omni Retractors are commonly utilized in a variety of surgical procedures including general, vascular, trauma, and spinal surgeries in order to hold an incision or wound open while a surgeon works. In calendar year 2023, it is estimated that the Omni Retractor was utilized in 89 surgeries. The department currently owns one Omni Retractor and it is being requested that another is purchased as we transition to a level 2 trauma center. Having another retractor available would prevent delays in surgery in the event that our only set is being utilized while a trauma surgical patient is sent to our operating room.

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 Omni Retractor. The total cost of the Omni Retractor, including tax and shipping, is not to exceed \$41,000. This was included in the FY 2024 capital budget for Trauma.



Memorandum

DATE: April 17, 2024

TO: Washington Township Health Care District Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Request to purchase a Samsung Portable X-Ray Machine for Trauma

We are recommending moving forward with the purchase of the Samsung Portable X-Ray Machine that will be dedicated for Trauma patients. In order for X-Ray to be available immediately for a trauma patient, we need to have a dedicated unit in close proximity of the two Trauma rooms in the Emergency Department.

We explored several vendors and have selected the company Samsung. They provide very high-resolution images, long lasting battery life with fast charging capabilities, and images can be casted to any monitor. This would allow us to display images in a room that the Trauma team can view. The cost of the unit, including taxes and shipping, equates to \$140,458.50. We budgeted \$188,425 in the Fiscal Year 24 Capital Budget.

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 Samsung Portable X-Ray Machine, not to exceed \$140,459 which includes, taxes and shipment. The total amount was included in the Fiscal Year 24 Fixed Asset Capital Budget.



Memorandum

DATE: April 28, 2024

TO: Kimberly Hartz, Chief Executive Officer

FROM: John Lee, Chief Information Officer
Kristin Ferguson, RN, Chief Compliance Officer

SUBJECT: 3M Healthcare Systems Software Purchase

Compliant documentation and coding accuracy are a priority focus for healthcare systems today. Through the use of 3M software, our teams will have access to real time expert logic and thinking technology, increasing accuracy and productivity of documentation, coding and claims reviews. The benefits of implementing 3M are many and will have a significant impact on patient care, quality data and reimbursement outcomes. Some specific benefits include:

- Provides accurate Diagnostic Related Grouping (DRG) capabilities for national and state-based reimbursement methodologies and prioritizes review based on length of stay, severity of illness, risk of mortality.
- DRGs are automatically & accurately computed during coding to help improve coder quality, productivity and compliance.
- Reviews data concurrently and provides critical Severity of Illness (SOI), DRG and LOS data input to quality teams, case management, physicians and utilization.
- Creates coder custom edits and expands financial CDI reviews to include quality metrics, clinical validity, risk adjustments and prevention of revenue loss in a value-based health care environment based on 3M Intellectual Property.

Such benefits will lead to efficiencies in billing and reimbursement cycles, identification and prioritization of real time gaps in documentation, coding and billing, to ensure regulatory compliance, a reduction in claims denials and maximization of reimbursement.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into a 5-year agreement with 3M Health Information Systems. The cost for Year 1 annual software license is \$275,842.34 plus the cost for implementation and initial training totaling **\$16,596**, for a total Year 1 purchase request not to exceed **\$306,718.34**. There will be no more than a 5% increase to the annual license renewal over the 5-year agreement. The cost of Year 1 will be offset by an estimated **\$80,000** cost avoidance from elimination of Nuance Encoder Software. An additional 3% offset cost avoidance will impact the annual software license renewal over the term of the 5-year agreement. This cost was included in the FY 2024 Capital Asset Budget.



Memorandum

DATE: April 29 2024
TO: Kimberly Hartz, Chief Executive Officer
FROM: Mark Saleh, MD, Chief of Staff
SUBJECT: MEC for Board Approval

The attached "Performance Improvement & Patient Safety Committee" (PIPS) is a Committee required for the Trauma Service. The Medical Executive Committee has approved this Committee in an electronic vote on April 29, 2024.

Please accept this memorandum as a formal request for presentation to the Board of Directors for final approval of the attached PIPS Committee description.

3.R TRAUMA SERVICE PERFORMANCE IMPROVEMENT & PATIENT SAFETY (PIPS) COMMITTEE

The PIPS committee shall evaluate the overall care of trauma patients from a clinical and a systems perspective and perform interdisciplinary implementation of improvement strategies.

3.R.1 Composition

- (a) The PIPS committee will consist of members from the Active Medical Staff, Hospital staff and Administration. Only members of the Medical Staff shall be voting members.
- (b) Required members will include the Trauma Surgeons (those members serving on the Trauma Call Panel), the Trauma Medical Director, Physician Liaisons (defined by ACS standards: Orthopedics, Neurosurgery, Critical Care, Emergency Medicine, Anesthesia, Radiology and Geriatrics) , Chief of Quality, Trauma Program Director, Director of Critical Care, and the Dept. Of Emergency Medicine Chair.
- (c) The Chair of the committee shall be the Trauma Medical Director as approved by the Chief of Staff.

3.R.2 Duties

The PIPS committee will perform the following functions:

- a. To manage and support the TRAUMA SERVICE PERFORMANCE IMPROVEMENT AND PATIENT SAFETY PLAN.
- b. Guide the professional performance evaluation (PPE-previously, peer review) and study of cases making recommendations to the appropriate medical staff or hospital department as outlined in the MS PPE Policy & Procedure.
- c. Manage and support the TRAUMA HANDBOOK

3.R.3 Meetings and Reports

This committee will meet monthly and report monthly to the Medical Executive Committee



WASHINGTON HOSPITAL
INDEX TO BOARD FINANCIAL STATEMENTS
March 2024

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



Memorandum

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

SUMMARY OF OPERATIONS – (Blue Schedules)

1. Utilization – Schedule Board 3

	<u>March Actual</u>	<u>March Budget</u>	<u>Current 12 Month Avg.</u>
<u>ACUTE INPATIENT:</u>			
IP Average Daily Census	169.1	172.4	155.3
Combined Average Daily Census	178.4	182.0	166.0
No. of Discharges	908	1,097	880
Patient Days	5,241	4,806	4,737
Discharge ALOS	5.14	5.23	5.33
<u>OUTPATIENT:</u>			
OP Visits	8,756	8,611	8,536
ER Visits	5,162	5,112	4,990
Observation Equivalent Days – OP	287	299	327

Comparison of March’s Actual Acute Inpatient statistics versus the Budget showed a lower level of discharges, and a higher level of patient days. The average length of stay (ALOS) based on discharged days was below Budget. Outpatient visits were higher than Budget. Emergency Room visits were above Budget for the month. Outpatients observation equivalent days were lower than Budget.

2. Staffing – Schedule Board 3

Total paid FTEs were below Budget. Total productive FTEs for March were 1,438.0, below the budgeted level of 1,564.4. Non-Productive FTEs were 207.9 above Budget. Productive FTEs per Adjusted Occupied Bed were 5.03, 0.70 below the budgeted level of 5.73. Total FTEs per adjusted occupied bed were 5.75, 0.53 below the budgeted level of 6.28.

3. Income - Schedule Board 1

For the month of March, the Hospital realized Net Operating Gain of \$2,155,000 from Operations, a 4.24% Margin.

Total Gross Patient Revenue of \$213,237,000 for March was \$1,395,000 above Budget, 0.7%.

Deductions from Revenue of \$163,731,000 were 76.8% of Total Gross Patient Revenue, above the budgeted amount of 76.1%.

Total Operating Revenue of \$50,786,000 was (\$1,191,000) or (2.29%) below the Budget.

Total Operating Expense of \$48,631,000 was lower than the Budget by \$176,000, 0.4%.

The Total Non-Operating Gain of \$1,029,000 for the month includes an unrealized gain on investments of \$535,000.

The Net Income for March was \$3,184,000 which was (\$50,000) below the Budgeted Net Income of \$3,234,000, a (1.5%) Margin.

The Total Net Gain for March 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 \$2,489,000 a (17.7%) Negative Margin compared to Budgeted Income of \$3,025,000 for an unfavorable variance of (\$536,000).

4. Balance Sheet – Schedule Board 2

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

KIMBERLY HARTZ
Chief Executive Officer

KH/TM



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

<u>March</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>	
\$ 126,028	\$ 133,806	\$ (7,778)	-5.8%	1	\$ 1,042,429	\$ 1,128,724	\$ (86,295)	-7.6%	
87,209	78,036	9,173	11.8%	2	773,636	694,687	78,949	11.4%	
213,237	211,842	1,395	0.7%	3	1,816,065	1,823,411	(7,346)	-0.4%	
(160,733)	(157,455)	(3,278)	-2.1%	4	(1,363,445)	(1,360,513)	(2,932)	-0.2%	
(2,998)	(3,850)	852	22.1%	5	(33,321)	(33,011)	(310)	-0.9%	
(163,731)	(161,305)	(2,426)	-1.5%	6	(1,396,766)	(1,393,524)	(3,242)	-0.2%	
76.78%	76.14%			7	76.91%	76.42%			
49,506	50,537	(1,031)	-2.0%	8	419,299	429,887	(10,588)	-2.5%	
1,280	1,440	(160)	-11.1%	9	8,629	12,956	(4,327)	-33.4%	
50,786	51,977	(1,191)	-2.3%	10	427,928	442,843	(14,915)	-3.4%	
23,719	24,140	421	1.7%	11	204,152	205,895	1,743	0.8%	
7,016	7,177	161	2.2%	12	71,046	68,658	(2,388)	-3.5%	
6,867	6,095	(772)	-12.7%	13	56,411	56,565	154	0.3%	
5,918	6,402	484	7.6%	14	56,294	56,887	593	1.0%	
1,784	1,964	180	9.2%	15	15,887	18,091	2,204	12.2%	
3,327	3,029	(298)	-9.8%	16	29,507	27,830	(1,677)	-6.0%	
48,631	48,807	176	0.4%	17	433,297	433,926	629	0.1%	
2,155	3,170	(1,015)	-32.0%	18	(5,369)	8,917	(14,286)	-160.2%	
4.24%	6.10%			19	-1.25%	2.01%			
456	287	169	58.9%	20	5,996	2,538	3,458	136.2%	
(154)	-	(154)	0.0%	21	(1,317)	-	(1,317)	0.0%	
(1,850)	(1,708)	(142)	-8.3%	22	(16,120)	(15,260)	(860)	-5.6%	
307	112	195	174.1%	23	527	285	242	84.9%	
-	(3,535)	3,535	100.0%	24	2,059	-	2,059	0.0%	
-	-	-	0.0%	25	(2,291)	(600)	(1,691)	-281.8%	
(1)	3,535	(3,536)	-100.0%	26	2,250	3,535	(1,285)	-36.4%	
1,373	1,373	-	0.0%	27	12,507	12,507	-	0.0%	
363	-	363		28	3,668	-	3,668	0.0%	
-	-	-		29	204	-	204	0.0%	
535	-	535	0.0%	30	3,391	-	3,391	0.0%	
1,029	64	965	1507.8%	31	10,874	3,005	7,869	261.9%	
\$ 3,184	\$ 3,234	\$ (50)	-1.5%	32	\$ 5,505	\$ 11,922	\$ (6,417)	-53.8%	
6.27%	6.22%			33	1.29%	2.69%			
\$ 2,489	\$ 3,025	\$ (536)	-17.7%	34	\$ (313)	\$ 9,865	\$ (10,178)	-103.2%	
4.90%	5.82%				-0.07%	2.23%			

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



WASHINGTON HOSPITAL
BALANCE SHEET
March 2024
(In thousands)

SCHEDULE BOARD 2

ASSETS AND DEFERRED OUTFLOWS			March 2024	Unaudited June 2023	LIABILITIES, NET POSITION AND DEFERRED INFLOWS			March 2024	Unaudited June 2023		
CURRENT ASSETS					CURRENT LIABILITIES						
1	CASH & CASH EQUIVALENTS	\$	22,414	\$	13,792	1	CURRENT MATURITIES OF L/T OBLIG	\$	9,425	\$	10,460
2	ACCOUNTS REC NET OF ALLOWANCES		75,111		66,153	2	ACCOUNTS PAYABLE		37,114		28,901
3	OTHER CURRENT ASSETS		<u>32,644</u>		<u>21,749</u>	3	OTHER ACCRUED LIABILITIES		60,533		57,874
4	TOTAL CURRENT ASSETS		130,169		101,694	4	INTEREST		<u>6,112</u>		<u>10,476</u>
						5	TOTAL CURRENT LIABILITIES		113,184		107,711
ASSETS LIMITED AS TO USE					LONG-TERM DEBT OBLIGATIONS						
5	BOARD DESIGNATED FOR CAPITAL AND OTHER		179,325		178,095	6	REVENUE BONDS AND OTHER		225,107		193,400
6	BOARD DESIGNATED FOR PENSION		0		0	7	GENERAL OBLIGATION BONDS		468,457		342,150
7	GENERAL OBLIGATION BOND FUNDS		132,219		19,399						
8	REVENUE BOND FUNDS		47,936		6,726						
9	BOND DEBT SERVICE FUNDS		16,828		34,708						
10	OTHER ASSETS LIMITED AS TO USE		<u>10,220</u>		<u>9,792</u>						
11	TOTAL ASSETS LIMITED AS TO USE		386,528		248,720	OTHER LIABILITIES					
12	OTHER ASSETS		347,222		319,097	8	SUPPLEMENTAL MEDICAL RETIREMENT		44,670		42,548
13	PREPAID PENSION		0		0	9	WORKERS' COMP AND OTHER		9,854		9,732
14	OTHER INVESTMENTS		23,920		20,166	10	NET PENSION		76,047		69,065
15	NET PROPERTY, PLANT & EQUIPMENT		562,463		576,944	11	ROU ASSET LONG-TERM		2,794		1,903
16	TOTAL ASSETS		<u>\$ 1,450,302</u>		<u>\$ 1,266,621</u>	12	NET POSITION		542,297		536,790
17	DEFERRED OUTFLOWS		49,994		70,928	13	TOTAL LIABILITIES AND NET POSITION		<u>\$ 1,482,410</u>		<u>\$ 1,303,299</u>
18	TOTAL ASSETS AND DEFERRED OUTFLOWS		<u>\$ 1,500,296</u>		<u>\$ 1,337,549</u>	14	DEFERRED INFLOWS		17,886		34,250
						15	TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS		<u>\$ 1,500,296</u>		<u>\$ 1,337,549</u>



**WASHINGTON HOSPITAL
OPERATING INDICATORS**
March 2024

12 MONTH AVERAGE	March						FISCAL YEAR TO DATE			
	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.
155.3	169.1	172.4	(3.3)	-2%	1					
10.7	9.3	9.6	(0.3)	-3%	2					
166.0	178.4	182.0	(3.6)	-2%	3					
8.2	8.3	9.3	(1.0)	-11%	4					
174.2	186.7	191.3	(4.6)	-2%	5					
3.7	6.6	6.1	0.5	8%	6					
4,737	5,241	5,345	(104)	-2%	7					
327	287	299	(12)	-4%	8					
880	908	1,097	(189)	-17%	9					
5.33	5.14	5.23	(0.09)	-2%	10					
1.561	1.567	1.517	0.050	3%	11					
198	177	197	(20)	-10%	12					
26	22	31	(9)	-29%	13					
11	7	13	(6)	-46%	14					
32	18	43	(25)	-58%	15					
106	144	112	32	29%	16					
95	108	97	11	11%	17					
467	476	493	(17)	-3%	18					
169	186	213	(27)	-13%	19					
127	134	143	(9)	-6%	20					
8,536	8,756	8,611	145	2%	21					
4,990	5,162	5,112	50	1%	22					
1,428.9	1,438.0	1,564.4	126.4	8%	23					
210.2	207.9	150.5	(57.4)	-38%	24					
1,639.1	1,645.9	1,714.9	69.0	4%	25					
5.27	5.03	5.73	0.70	12%	26					
6.04	5.75	6.28	0.53	8%	27					

PATIENTS IN HOSPITAL

ADULT & PEDS AVERAGE DAILY CENSUS
 OUTPT OBSERVATION AVERAGE DAILY CENSUS
 COMBINED AVERAGE DAILY CENSUS
 NURSERY AVERAGE DAILY CENSUS
 TOTAL
 SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *
 ADULT & PEDS PATIENT DAYS
 OBSERVATION EQUIVALENT DAYS - OP
 DISCHARGES-ADULTS & PEDS
 AVERAGE LENGTH OF STAY-ADULTS & PEDS

158.0	163.1	(5.1)	-3%
11.1	9.0	2.1	23%
169.1	172.1	(3.0)	-2%
8.1	8.6	(0.5)	-6%
177.2	180.7	(3.5)	-2%
3.6	3.5	0.1	3%
43,440	44,843	(1,403)	-3%
3,049	2,485	564	23%
7,998	8,636	(638)	-7%
5.35	5.24	0.11	2%

OTHER KEY UTILIZATION STATISTICS

OVERALL CASE MIX INDEX (CMI)
 SURGICAL CASES
 ORTHOPEDIC CASES
 NEUROSURGICAL CASES
 CARDIAC SURGICAL CASES
 VASCULAR CASES
 ENDOSCOPY CASES
 OTHER SURGICAL CASES
 TOTAL CASES
 TOTAL CATH LAB CASES
 DELIVERIES
 OUTPATIENT VISITS
 EMERGENCY VISITS

1.579	1.547	0.032	2%
1,737	1,745	(8)	0%
235	262	(27)	-10%
102	120	(18)	-15%
289	342	(53)	-15%
1,000	933	67	7%
865	833	32	4%
4,228	4,235	(7)	0%
1,543	1,796	(253)	-14%
1,138	1,150	(12)	-1%
76,922	76,302	620	1%
45,322	46,039	(717)	-2%

LABOR INDICATORS

PRODUCTIVE FTE'S
 NON PRODUCTIVE FTE'S
 TOTAL FTE'S
 PRODUCTIVE FTE/ADJ. OCCUPIED BED
 TOTAL FTE/ADJ. OCCUPIED BED

1,432.6	1,468.7	36.1	2%
213.5	188.6	(24.9)	-13%
1,646.1	1,657.3	11.2	1%
5.20	5.57	0.37	7%
5.98	6.29	0.31	5%

**RESOLUTION NO. 1261
CALIFORNIA NURSES ASSOCIATION (CNA)**

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 California Nurses Association (CNA), 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 within the Memorandum.

Passed and adopted by the Board of Directors of Washington Township Health Care District this 8th day of May, 2024, by the following vote:

AYES:

NOES:

ABSENT:

William Nicholson, M.D.
Second Vice President of the Washington
Township Health Care District Board of
Directors

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



Memorandum

DATE: May 6, 2024

TO: Kimberly Hartz
Chief Executive Officer

FROM: John Zubiena
Chief Human Resources Officer

SUBJECT: California Nurses Association (CNA) Agreement

We have been in negotiations with the California Nurses Association to work out a successor contract. CNA represents over 800 registered nurses at Washington Hospital.

Washington Hospital and the California Nurses Association have reached a Tentative Agreement on a new, 4-year contract, starting July 1, 2023 which was ratified by the CNA membership on May 3, 2024. The recommendation is for the Washington Township Health Care District Board of Directors to approve the key terms and amendments as outlined below:

- 22.5% across the board wage increase over 4 years (5.5% year 1, 5.75% year 2, 5.75% year 3, 5.5% year 4).
- Retroactive pay of 5.5% back to September 1, 2023.
- Increase in hourly differentials for evening shift from \$7.05 to \$7.30, night shift from \$11.50 to \$11.75, charge nurse relief from \$4.25 to \$5.00, and the nurse preceptor role from \$2.75 to \$4.00.
- Implementation of new health plan July 1.
- Change of uniform color from white to navy blue with a one-time \$100 stipend.
- Paid time without a patient assignment to complete mandatory clinical in-service education.
- Maintenance of current contract language on floating and like areas for floating.

- Updated language to provide meal and rest breaks pursuant to SB 1334, but with more flexibility on timing of breaks than the law currently provides (similar to language agreed to with SEIU.)
- More detailed language regarding infectious disease prevention and addition of a section on workplace violence prevention.
- Expanded language regarding the prohibition of discrimination, harassment, and retaliation.
- Reduction in the number of months that disciplines remain on record (i.e., verbal reprimands may not be used in subsequent disciplinary determinations if there are no similar incidents within a 12-month period; Step I or Step II Written Reprimands may not be issued in subsequent disciplinary determinations if there are no similar incidents within a 24-month period).
- Addition of an article that permits up to four nurses per year to participate in the Registered Nurse Response Network.
- Increase from 60 days to 90 days for nurses who are scheduled to work on their birthday and/or a recognized holiday to take another day off with pay.
- A revision to the letter of understanding governing 12-hour shift schedules to provide the ability to adopt mixed units of 12-hour and 8-hour shifts.
- A change in the seniority definition for per diem nurses, providing one year of seniority credit for each 2,000 hours worked (currently one year of seniority credit is awarded for each 3,000 hours worked).
- Updated bereavement language consistent with AB 1949, including to allow per diem nurses to take up to 5 days of unpaid bereavement leave in the case of death in the nurse's immediate family.
- Increase in the amount of notice to be provided to a scheduled per diem nurse of cancellation from 1.5 hours to 2 hours. In addition, nurses who call out from their scheduled shift must now provide 2.5 hours notice to the hospital in order to improve the process for last minute scheduling changes.