

# Washington Township Health Care District

2000 Mowry Avenue, Fremont, California 94538-1716 • (510) 797-1111

Nancy Farber, Chief Executive Officer

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

### **BOARD OF DIRECTORS' MEETING**

Wednesday, February 11, 2015 – 6:00 P.M. Conrad E. Anderson, MD Auditorium

### AGENDA

### **PRESENTED BY:**

**Board Member** 

**Christine Flores** 

Patricia Danielson, RHIT

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

II. ROLL CALL

### **III. EDUCATION SESSION:**

Sexual Assault Response Team (SART) Program

The Ralph M. Brown Act and Health Care Districts: An Overview

### **IV. CONSIDERATION OF MINUTES**

January 14, 19, 26, and 28, 2015

Michael Platzbecker Emergency Room Manager

Senior Executive Assistant

Paul Kozachenko Legal Counsel

Motion Required

### V. COMMUNICATIONS

A. Oral

B. Written

From Peter Lunny, MD, Chief of Staff, dated January 26, 2015 requesting approval of Medical Staff Credentialing Action Items.

### VI. INFORMATION

A. Service League Report

Motion Required

### **PRESENTED BY:**

Debbie Jackson Service League President Elect Board Meeting Agenda February 11, 2015 Page 2

Page 2	,		
	В.	Medical Staff Report	Peter Lunny, MD Chief of Staff
	C.	Hospital Calendar	Nancy Farber Chief Executive Officer
	D.	Construction Report	Ed Fayen, Senior Associate Administrator
	E.	Quality Report Nursing Sensitive Indicators	Mary Bowron, DNP, RN, CIC Senior Director of Quality & Resource Management
	F.	Finance Report	Chris Henry Chief Financial Officer
	G.	Hospital Operations Report	Nancy Farber Chief Executive Officer
VII.	ACTI	ON	
	A.	Consideration of Citrix Netscalers	Motion Required
	В.	Consideration of Resolution No. 1151, Tobacco-Free Campus	Motion Required
	C.	Consideration of Budget Amendment for Nurse Training Programs	Motion Required
	D.	Consideration of Medical Staff Requirement for Annual TB Testing	Motion Required
VIII.	ADJC	OURN TO CLOSED SESSION	
	In acc	ordance with Section 1461, 1462, 32106 and	

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

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

New Program

Estimated date of public disclosure: February 2016

B. Report and discussion regarding California Government Code section 54957: Personnel matters Board Meeting Agenda February 11, 2015 Page 3

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

### X. ADJOURNMENT

Patricia Danielson, RHIT Board Member

Patricia Danielson, RHIT Board Member A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, January 19, 2015 in the Conrad E. Anderson, MD Auditorium 2500 Mowry Avenue, Fremont, California. Director Danielson called the meeting to order at 6:03 p.m. and led those present in the Pledge of Allegiance.

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

Also present: Kimberly Hartz, Senior Associate Administrator, Ed Fayen, Senior Associate Administrator, Bryant Welch, Associate Administrator, Stephanie Williams, Associate Administrator, Chris Henry, Associate Administrator, Albert Brooks, MD, Carlo Coppo, Paul Kozachenko, Christine Flores, Senior Executive Assistant

There were no oral or written communications.

In accordance with Health & Safety Code Sections 1461, 1462 and 32106 and Government Code Section 54954.5(h) Director Danielson adjourned the meeting to closed session at 6:04 p.m., as the discussion pertained to Hospital trade secrets, Human Resources matters and Risk Management.

Director Danielson reconvened the meeting to open session at 6:45 p.m. and reported no action was taken in closed session.

In accordance with District Law, Policies and Procedures, Director Stewart moved for denial of the claim received on December 22, 2014 on behalf of Theresa Tennis, and that the Chief Executive Officer be directed to provide notice in accordance with government code section 945.6. Director Nicholson seconded the motion.

Roll call was taken:

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

The motion unanimously carried.

CALL TO ORDER

ROLL

CALL

COMMUNICATIONS

ADJOURN TO CLOSED SESSION

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

CONSIDERATION OF CLAIM: TENNIS Board of Directors' Meeting January 19, 2015 Page 2

In accordance with Health & Safety Code Sections 1461, 1462 and 32106 and Government Code Section 54954.5(h) Director Danielson adjourned the meeting to closed session at 6:47 p.m., as the discussion pertained to Hospital trade secrets, Human Resources matters and Risk Management.

ADJOURN TO CLOSED SESSION

Director Danielson reconvened the meeting to open session at 8:28 p.m. and reported no action was taken in closed session.

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

There being no further business, Directo at 8:29 p.m.	or Danielson adjourned the meetir	ng ADJOURNMENT
at 0.27 p.m.		
Patricia Danielson, RHIT President	Bernard Stewart, DDS Secretary	-

A meeting of the Board of Directors of the Washington Township Health CALL TOCare District was held on Monday, January 26, 2015 in the Boardroom, ORDER Washington Hospital, 2000 Mowry Avenue, Fremont, California. Director Danielson called the meeting to order at 7:30 a.m. ROLL Roll call was taken. Directors present: Patricia Danielson, RHIT; CALL William Nicholson, Jacob Eapen, MD; Bernard Stewart, DDS Excused: Michael Wallace Also present: Peter Lunny, MD; Jan Henstorf, MD; John Romano, MD, Albert Brooks, MD; Stephanie Williams Excused: Kranthi Achanta, MD **COMMUNICATIONS** There were no oral or written communications. ADJOURN TO Director Danielson adjourned the meeting to closed session at 7:30 a.m. CLOSED SESSION as the discussion pertained to Medical Audit and Quality Assurance. Matters pursuant to Health & Safety Code Sections 1461 and 32155. Director Danielson reconvened the meeting to open session at 8:40 a.m. RECONVENE TO **OPEN SESSION &** and reported no action was taken in closed session. REPORT ON CLOSED SESSION There being no further business, the meeting adjourned at 8:40 a.m. ADJOURNMENT Patricia Danielson, RHIT Bernard Stewart, DDS President. Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, January 28, 2015 in the Conrad E. Anderson, MD Auditorium 2500 Mowry Avenue, Fremont, California. Director Danielson called the meeting to order at 6:05 p.m. and led those present in the Pledge of Allegiance.

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

CALL TO ORDER

ROLL CALL

Also present: Kimberly Hartz, Senior Associate Administrator, Ed Fayen, Senior Associate Administrator, Bryant Welch, Associate Administrator, Stephanie Williams, Associate Administrator, Chris Henry, Associate Administrator, Albert Brooks, MD, Paul Kozachenko, Christine Flores, Senior Executive Assistant

There were no oral or written communications.

In accordance with Health & Safety Code Sections 1461, 1462 and 32106 and Government Code Section 54954.5(h) Director Danielson adjourned the meeting to closed session at 6:07 p.m., as the discussion pertained to Hospital trade secrets, Human Resources matters and Risk Management.

Director Danielson reconvened the meeting to open session at 6:45 p.m. and reported no action was taken in closed session.

In accordance with District Law, Policies and Procedures, Director Stewart moved the Chief Executive Officer be authorized to proceed with the purchase of ten (10) CHG Spirit Select Lowboy Med/Surg Beds for an amount not to exceed \$88,936.50.

Director Wallace seconded the motion.

Roll call was taken:

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

The motion unanimously carried.

COMMUNICATIONS

ADJOURN TO CLOSED SESSION

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

APPROVAL OF PURCHASE OF LOWBOY MED-SURG BEDS Board of Directors' Meeting January 19, 2015 Page 2

In accordance with District Law, Policies and Procedures, Director Stewart moved the Chief Executive Officer be authorized to authorize payment to Epic in an amount not to exceed \$774,716.00 and a supplemental adjustment to the Epic Project Budget of \$774,716.00.

APPROVAL OF SUPPLEMENTAL FUNDING FOR EPIC

Director Nicholson seconded the motion.

Roll call was taken:

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

The motion unanimously carried.

In accordance with Health & Safety Code Sections 1461, 1462 and 32106 and Government Code Section 54954.5(h) Director Danielson adjourned the meeting to closed session at 6:47 p.m., as the discussion pertained to Hospital trade secrets, Human Resources matters and Risk Management.

Director Danielson reconvened the meeting to open session at 9:10 p.m. and reported no action was taken in closed session.

There being no further business, Director Danielson adjourned the meeting at 9:11 p.m.

ADJOURN TO CLOSED SESSION

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

ADJOURNMENT

Patricia Danielson, RHIT President Bernard Stewart, DDS Secretary





**DATE:** January 23, 2015

TO: Nancy Farber, Chief Executive Officer

**FROM:** Edward Fayen, Senior Associate Administrator System Operations & Management Support Services

### SUBJECT: Citrix Netscalers

Physicians and Hospital Staff currently use the hospital's Citrix web portal to access Epic WeCare and other applications. Those users that have access internally have the same access externally. In order to better secure our environment, the Citrix Netscalers will provide Washington Hospital Healthcare System the ability to lock down external access to our applications. The Citrix Netscalers will also provide the ability to require those users to have an approved antivirus application to access the environment.

The Citrix Netscalers adds front-end optimization to ensure performance, scalability, security and resiliency for remote users. The Netscalers also helps to protect web applications against attacks from web-based/internet virus or hacking. There are additional benefits with high performance load balancing and content switching to web applications and database servers to ensure fast, reliable application delivery. The project will take approximately two months to complete.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into the necessary contracts and proceed with the purchase of the hardware, software and implementation services, for a total amount not to exceed **\$77,782.40**. This is an approved project in the 2015 Capital Project budget.

/da



### Washington Hospital Healthcare System

9

8

N C E

# Memorandum

- **DATE:** February 6, 2015
- TO: Nancy Farber, Chief Executive Officer
- FROM: Albert Brooks, MD, Chief Medical Services
- SUBJECT:
   MEC Request for Board Approval

   Rules & Regulations: Tuberculosis Screening for Medical & AHP Staff

The Medical Executive Committee, at its meeting of December 15, 2014, approved the proposed revision to the Rules & Regulations Article II., Section X. Infection Control Policies. Please accept this memorandum as a formal request for presentation to the Board of Directors for final approval of this revision. The attached document describes the requirement for all Medical and Allied Health staff to comply with the current hospital policy regarding Tuberculosis Screening for Healthcare Workers as recommended by the Joint Commission during their recent survey in 2014.

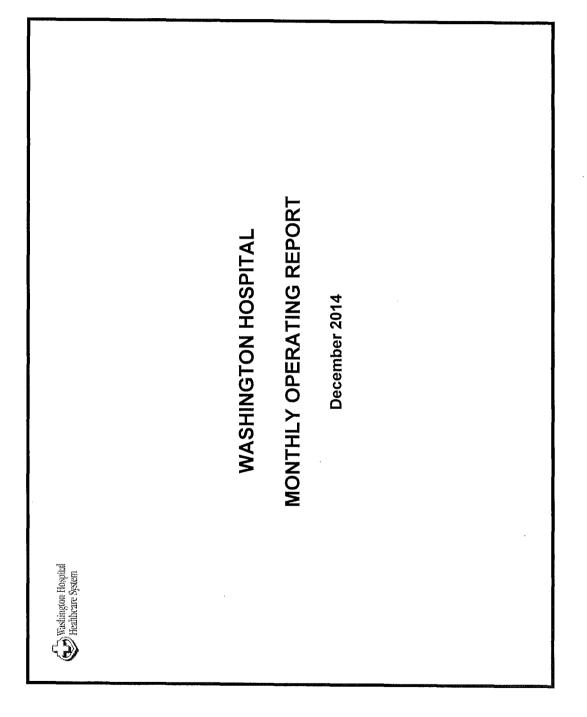
### Rules & Regulations Article II., Section X. Infection Control Policies

### X. Infection Control Policies

- 1. Infection Control Policies are located in the Washington Hospital Numbered Memoranda, Section 6.
- 2. All practitioners shall comply with the current hospital policy regarding Universal Blood and Body Fluid Precautions. Refer to Washington Hospital Administrative Memo #3-190 as a guide.

### 3. <u>All practitioners shall comply with the current hospital policy regarding</u> <u>Tuberculosis Screening for Healthcare Workers.</u> <u>Refer to Washington</u> <u>Hospital Administrative Memo #2-186 as a guide.</u>

- 4. All patients with infectious diseases shall be isolated according to the infection control policies. If the attending physician wishes to question the isolation precautions instituted, he or she may discuss the matter with the Infection Control Coordinator.
- 5. Any patient admitted with a draining wound, sinus tract or other purulent draining lesion will be placed on appropriate precautions, according to infection control policies.
- 6. Certain infectious diseases must, by law, be reported to the Public Health Department. It is the responsibility of the physician in charge to report the diagnosis to the Hospital Infection Control Coordinator. The list of reportable diseases and the procedure for reporting is contained in the Infection Control Policies.
- 7. Initiation and maintenance of intravenous lines is governed by Infection Control Policies, located in the Infection Control Manual.
- 8. All practitioners shall comply with current Hospital policy regarding proper hand hygiene. Refer to the Infection Control Policies as a guide (Change approved by MEC 11/15/04, Board 12/8/04).



Washington Hospital Healthcare System	WASHINGTON HOSPITAL INDEX TO BOARD FINANCIAL STATEMENTS December 2014								
	Schedule <u>Reference</u>	Schedule Name							
	Board - 1	Statement of Revenues and Expenses							
	Board - 2	Balance Sheet							
	Board - 3	Operating Indicators							



# Memorandum

**DATE:** February 6, 2015

**TO:** Board of Directors

**FROM:** Nancy Farber

SUBJECT: Washington Hospital – December 2014 Operating & Financial Activity

### **<u>SUMMARY OF OPERATIONS</u>** – (Blue Schedules)

### 1. Utilization – Schedule Board 3

ACUTE INPATIENT:	December <u>Actual</u>	Budget	Current 12 <u>Month Avg.</u>
Average Daily Census	148.6	165.1	153.1
# of Admissions	976	1,070	964
Patient Days	4,606	5,119	4,653
Discharge ALOS	4.39	4.78	4.80
<u>OUTPATIENT</u> :	December <u>Actual</u>	<u>Budget</u>	Current 12 <u>Month Avg.</u>
OP Visits	6,998	7,061	7,392
ER Visits	4,469	4,304	4,381
Observation Equivalent Days – OP	273	194	257

Comparison of December 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 above budget for the month.

### 2. Staffing – Schedule Board 3

Total paid FTEs were 46.0 below budget. Total productive FTEs for December were 1,101.8, 54.1 below the budgeted level of 1,155.9. Nonproductive FTEs were 8.1 above budget. Productive FTEs per adjusted occupied bed were 5.40, 0.01 above the budgeted level of 5.39. Total FTEs per adjusted occupied bed were 6.42, 0.09 above the budgeted level of 6.33.

### 3. Income - Schedule Board 1

For the month of December the Hospital realized a gain of \$2,361,000 from operations.

Total Gross Patient Service Revenue of \$165,493,000 for December was 2.0% below budget.

Deductions from Revenue of \$127,703,000 represented 77.17% of Total Gross Patient Service Revenue. This percentage is above the budgeted amount of 76.81%.

Total Operating Revenue of \$37,936,000 was \$1,385,000 below the budget.

Total Operating Expense in December was \$4,544,000 (11.3%) below the budgeted amount.

The Total Non-Operating Gain of \$543,000 for the month of December includes an unrealized loss on investments of \$509,000 and property tax revenue of \$784,000. This property tax revenue will be used to pay the debt service for the general obligation bonds.

The Total Net Gain for December was \$2,904,000, which was \$2,610,000 more than the budgeted gain of \$294,000.

The Total Net Gain for December using FASB accounting principles, in which the unrealized loss on investments and property tax revenues are removed from the non-operating income and expense, was \$2,629,000 compared to a budgeted loss of \$490,000.

### 4. Balance Sheet – Schedule Board 2

Noteworthy changes in assets and liabilities, when compared to the November 2014 amounts were as follows:

Net Pension Liability was reduced by approximately \$17 million due to the funding of the Hospital's annual contribution.

Bond Debt Service Funds increased by \$5.9 million due to the funding of the debt service payments due on January 1, 2015.

Board Designated Funds for Capital and Other and Cash and Cash Equivalents decreased by \$6.3 million and \$8.1 million, respectively, due to the funding of the debt service and pension obligations. The decrease in cash and investments was mitigated by the higher level of patient account collections.

There were no other noteworthy changes in assets and liabilities when compared to the November 2014 amounts.

NANCY FARBER Chief Executive Officer

NF/CH:cd

SCHEDULE BOARD 1

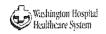
.

Washington Hospital Realthcare System

#### WASHINGTON HOSPITAL STATEMENT OF REVENUES AND EXPENSES December 2014 GASB FORMAT (In thousands)

DECEMBER						YEAR TO DATE				
ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.	
\$ 120,482 45,011	\$ 130,004 38,913	\$ (9,522) 6,098	-7.3% 15.7%	1 2 3	OPERATING REVENUE INPATIENT REVENUE OUTPATIENT REVENUE	\$ 698,089 277,988	\$    734,225 245,087	\$ (36,136) 32,901	-4.9% 13.4%	
165,493	168,917	(3,424)	-2.0%	4	TOTAL PATIENT REVENUE	976,077	979,312	(3,235)	-0.3%	
(127,703)	(129,742)	2,039	1.6%	5	CONTRACTUAL ALLOWANCES	(749,457)	(747,512)	(1,945)	-0.3%	
77.17%	76.81%			6	CONTRACTUAL AS % OF REVENUE	76.78%	76.33%			
37,790	39,175	(1,385)	-3.5%	7	NET PATIENT REVENUE	226,620	231,800	(5,180)	-2.2%	
146	146	0	0.0%	8	OTHER OPERATING INCOME	1,050	1,059	(9)	-0.8%	
37,936	39,321	(1,385)	-3.5%	9	TOTAL OPERATING REVENUE	227,670	232,859	(5,189)	-2.2%	
				10	OPERATING EXPENSES					
14,318	14,867	549	3.7%	11	SALARIES & WAGES	82,789	81,639	(1,150)	-1.4%	
5,225	6,037	812	13.5%	12	EMPLOYEE BENEFITS	31,228	34,969	3,741	10.7%	
4,021	4,076	55	1.3%	13	SUPPLIES	24,392	24,726	334	1.4%	
4,907	4,797	(110)	-2.3%	14	PURCHASED SERVICES & PROF FEES	29,738	29,202	(536)	-1.8%	
1,206	1,231	25	2.0%	15	INSURANCE, UTILITIES & OTHER	7,833	7,976	143	1.8%	
2,224	5,474	3,250	59.4%	16	PROVISION FOR DOUBTFUL ACCOUNTS	21,154	31,758	10,604	33.4%	
2,774	2,774	0	0.0%	17	DEPRECIATION	16,570	16,519	(51)	-0.3%	
900	863	(37)	-4.3%	18	INTEREST EXPENSE	5,455	5,355	(100)	-1.9%	
35,575	40,119	4,544	11.3%	19	TOTAL OPERATING EXPENSE	219,159	232,144	12,985	5.6%	
2,361	(798)	3,159	395.9%	20	OPERATING INCOME (LOSS)	8,511	715	7,796	1090.3%	
6.22%	-2.03%			21	OPERATING INCOME MARGIN %	3.74%	0.31%			
				22	NON-OPERATING INCOME & (EXPENSE)					
223	223	0	0.0%	23	INVESTMENT INCOME	1,344	1,324	20	1.5%	
(1)	0	(1)	0.0%	23	REALIZED GAIN/(LOSS) ON INVESTMENTS	(33)	0	(33)	0.0%	
46	85	(39)	-45.9%	24	RENTAL INCOME, NET	344	483	(139)	-28.8%	
784	784	0	0.0%	25	PROPERTY TAX REVENUE	5,228	5,225	3	0.1%	
(509)	0	(509)	0.0%	26	UNREALIZED GAIN/(LOSS) ON INVESTMENTS	(791)	0	(791)	0.0%	
543	1,092	(549)	-50.3%	27	TOTAL NON-OPERATING INCOME & EXPENSE	6,092	7,032	(940)	-13.4%	
\$ 2,904	\$ 294	\$ 2,610	887.8%	28	NET INCOME (LOSS)	\$ 14,603	<u>\$ 7,747</u>	\$ 6,856	88.5%	
7.65%	0.75%			29	NET INCOME MARGIN %	6.41%	3.33%			
\$ 2,629	\$ (490)	\$ 3,119	636.5%	30	NET INCOME (LOSS) USING FASB PRINCIPLES**	\$ 10,166	\$ 2,522	\$ 7,644	303.1%	
6.93%	-1.25%				NET INCOME MARGIN %	4.47%	1.08%			
0.0070						T1 /U				

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



#### WASHINGTON HOSPITAL BALANCE SHEET December 2014 (In thousands)

	ASSETS AND DEFERRED OUTFLOW	DE	ECEMBER 2014	-	UDITED JNE 2014		LIABILITIES, NET POSITION AND DEFERRED INFLOWS	ECEMBER 2014	-	UDITED JNE 2014
	CURRENT ASSETS						CURRENT LIABILITIES			
1	CASH & CASH EQUIVALENTS	\$	17,831	\$	13,995	1	CURRENT MATURITIES OF L/T OBLIG	\$ 5,994	\$	10,010
2	ACCOUNTS REC NET OF ALLOWANCES		50,679		50,447	2	ACCOUNTS PAYABLE	13,150		20,804
3	OTHER CURRENT ASSETS		8,519		8,189	3	OTHER ACCRUED LIABILITIES	44,141		40,982
4	TOTAL CURRENT ASSETS		77,029		72,631	4	INTEREST	 9,872		10,119
						5	TOTAL CURRENT LIABILITIES	73,157		81,915
	ASSETS LIMITED AS TO USE						LONG-TERM DEBT OBLIGATIONS			
6	BOARD DESIGNATED FOR CAPITAL AND OTHER		166,599		165,678	6	REVENUE BONDS AND OTHER	208,598		213,386
7	GENERAL OBLIGATION BOND FUNDS		134,434		136,916	7	GENERAL OBLIGATION BONDS	197,479		198,703
8	REVENUE BOND FUNDS		10,389		10,388					
9	BOND DEBT SERVICE FUNDS		12,955		26,248		OTHER LIABILITIES			
10	OTHER ASSETS LIMITED AS TO USE		15,082		15,030	10	NET PENSION LIABILITY	40,551		71,400
11	TOTAL ASSETS LIMITED AS TO USE		339,459		354,260	11	WORKERS' COMP	8,967		8,418
						12	SUPPLEMENTAL MEDICAL RETIREMENT	35,914		34,466
13	OTHER ASSETS		119,721		113,193					
14	NET PROPERTY, PLANT & EQUIPMENT		394,758		401,352	14	NET POSITION	355,176		340,573
15	TOTAL ASSETS	\$	930,967	\$	941,436	15	TOTAL LIABILITIES AND NET POSITION	\$ 919,842	\$	948,861
16	DEFERRED OUTFLOWS		4,151		23,403	16	DEFERRED INFLOWS	15,276		15,978
17	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	935,118	\$	964,839	17	TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	\$ 935,118	\$	964,839

SCHEDULE BOARD 2

Wishington Hospital Bealthcare System

#### WASHINGTON HOSPITAL OPERATING INDICATORS December 2014

		DECEN	IBER				YEAR TO DATE			
							*	i EAN		
12 MONTH AVERAGE	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.
						PATIENTS IN HOSPITAL				
153.1	148.6	165.1	(16.5)	-10%	1	ADULT & PEDS AVERAGE DAILY CENSUS	145.4	153.8	(8.4)	-59
8.5	8.8	6.3	2.5	40%	2	OUTPT OBSERVATION AVERAGE DAILY CENSUS	8.7	7.1	1.6	23
10.8	11.4	9.4	2.0	21%	3	NURSERY AVERAGE DAILY CENSUS	11.2	10.0	1.2	12
172.4	168.8	180.8	(12.0)	-7%	4	TOTAL	165.3	170.9	(5.6)	-3
4,653	4,606	5,119	(513)	-10%	5	ADULT & PEDS PATIENT DAYS	26,751	28,293	(1,542)	-59
964	976	1,070	(94)	-9%	6	ADMISSIONS-ADULTS & PEDS	5,811	5,839	(28)	0
4.80	4.39	4.78	(0.39)	-8%	7	AVERAGE LENGTH OF STAY-ADULTS & PEDS	4.57	4.85	(0.28)	-6'
						OTHER KEY UTILIZATION STATISTICS				
1.493	1.497	1.505	(0.008)	-1%	8	OVERALL CASE MIX INDEX (CMI)	1.446	1.509	(0.063)	-4
						SURGICAL CASES				
111	108	112	(4)	-4%	9	JOINT REPLACEMENT CASES	654	662	(8)	-1
26	21	18	3	17%	10	NEURO SURGICAL CASES	155	151	4	3
9 54	10 30	11 59	(1)	-9% -49%	11 12	CARDIAC SURGICAL CASES MINIMALLY INVASIVE CASES	62 248	55 367	7	13
346	341	337	(29) 4	-49% 1%	13	TOTAL CASES	240 2,073	2,065	(119) 8	-32 C
									-	
597	691	546	145	27%	14	TOTAL CATH LAB PROCEDURES	3,729	3,469	260	7'
152	159	138	21	15%	15	DELIVERIES	960	884	76	9
7,392	6,998	7,061	(63)	-1%	16	OUTPATIENT VISITS	43,189	44,816	(1,627)	-4
4,381	4,469	4,304	165	4%	17	EMERGENCY VISITS	26,468	25,083	1,385	6
						LABOR INDICATORS				
1,190.7	1,101.8	1,155.9	54.1	5%	18	PRODUCTIVE FTE'S	1,147.3	1,150.9	3.6	0
184.0	209.1	201.0	(8.1)	-4%	19	NON PRODUCTIVE FTE'S	181.4	179.0	(2.4)	-1
1,374.7	1,310.9	1,356.9	46.0	3%	20	TOTAL FTE'S	1,328.7	1,329.9	1.2	0
5.68	5.40	5.39	(0.01)	0%	21	PRODUCTIVE FTE/ADJ. OCCUPIED BED	5.64	5.61	(0.03)	-1
6.56	6.42	6.33	(0.09)	-1%	22	TOTAL FTE/ADJ. OCCUPIED BED	6.54	6.48	(0.06)	-1