Board of Directors

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

### **BOARD OF DIRECTORS MEETING**

Wednesday, August 10, 2022 – 6:00 P.M. Meeting Conducted by Zoom

https://us06web.zoom.us/j/83757697569?pwd=ZXZadzZlKzJLeDJ00FBFU051YmF6QT09

Password: 028864

### **AGENDA**

### PRESENTED BY:

I. CALL TO ORDER & PLEDGE OF ALLEGIANCE

Kimberly Hartz, Chief Executive Officer

Jeannie Yee Board President

II. ROLL CALL

Dee Antonio District Clerk

III. BROWN ACT FINDING
GOVERNMENT Code § 54953(e)(3)(B)(ii)

Motion Required

### IV. 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

### V. 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.

Jeannie Yee Board President

A. Consideration of Minutes of the Regular Meetings of the District Board: July 13, 18, 25, and 27, 2022

Motion Required

B. Consideration of TIMS 2000 SP Mobile Cart Package for Speech Pathology Department Board of Directors' Meeting August 10, 2022 Page 2

#### VI. PRESENTATION

PRESENTED BY:

A. American Heart Association Stroke and STEMI Awards: Get With the Guidelines

JoAnne Pineda, Representative American Heart Association

VII. REPORTS

PRESENTED BY:

A. Medical Staff Report

Shakir Hyder, M.D. Chief of Medical Staff

B. Service League Report

Debbie Feary

Service League President

C. Lean Report

WHHS Infection Prevention: Applying Lean

pplying Lean CIC

Principles to Patient Care

Infection Prevention Manager

Gulnazz Hanif, RN BSN MS CNS-

D. Quality Report:

Quality Dashboard Quarter Ending June 30, 2022

Mary Bowron, DNP, RN, CIC,

CNL, CPHQ

Chief of Quality & Resource

Management

E. Finance Report

Chris Henry

Vice President & Chief Financial

Officer

F. Hospital Operations Report

Kimberly Hartz

Chief Executive Officer

### VIII. ANNOUNCEMENTS

### IX. ADJOURN TO CLOSED SESSION

A. Conference involving Trade Secrets pursuant to Health & Safety Code section 32106

X. RECONVENE TO OPEN SESSION & REPORT ON PERMISSIBLE ACTIONS TAKEN DURING CLOSED SESSION

Jeannie Yee Board President

XI. ADJOURNMENT

Jeannie Yee 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, July 13, 2022 via Zoom. Director Yee called the meeting to order at 6:00 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: Jeannie Yee; Bernard Stewart, DDS; Michael Wallace: William Nicholson, MD

ROLL CALL

Absent: Jacob Eapen, MD

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

Guests: Ed Fayen, Chris Henry, Tina Nunez, Larry LaBossiere, Paul Kozachenko, Mary Bowron, Walter Choto, Alicia Curry, Debbie Feary, Kristin Ferguson, Dr. Shakir Hyder, Gisela Hernandez, Nick Legge, Dan Nardoni, Donald Pipkin, Dr. Brian Smith, Marcus Watkins, John Zubiena, Sri Boddu and Caleb Patterson.

Director Yee welcomed any members of the general public to the meeting. She noted that in order to continue to protect the health and safety of the members of the Board, District staff, and members of the public from the dangers posed by the SARS-CoV-2 virus, the Brown Act allows a local agency to continue to hold its meetings remotely as opposed to being required to meet in-person. Section 54953(e)(3) of the Government Code requires that the Board make certain findings every 30 days to continue meeting remotely. One such finding is that "state or local officials continue to impose or recommend measures to promote social distancing." The Alameda County Health Officer continues to recommend social distancing and the wearing of masks indoors, as referenced by the Alameda County Health Care Services Public Health Department COVID-19 website at www.covid-19.acgov.org.

**OPENING REMARKS** 

In accordance with District law, policies, and procedures, Director Stewart moved that the Board of Directors make the finding required by Section 54953(e)(3)(B)(ii) of the Government Code that "state or local officials continue to impose or recommend measures to promote social distancing." Director Nicholson seconded the motion.

Roll call was taken:

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

The motion carried and the finding is affirmed.

Director Yee noted that Public Notice for this meeting, including connection information, was posted appropriately on our website. This meeting, conducted via Zoom, is being recorded for broadcast at a later date.

There were no Oral communications.

COMMUNICATIONS: ORAL

There were no Written communications.

COMMUNICATIONS: WRITTEN

CONSENT CALENDAR

Director Yee presented the Consent Calendar for consideration:

- A. Minutes of the Regular Meetings of the District Board: June 8, June 20, June 22, and June 27, 2022
- B. Medical Staff: Bylaws
- C. Medical Staff: Organization Manual
- D. Medical Staff: Conflict of Interest Disclosure Statements
- E. Neuroptics Pupillometer NPi-300
- F. Project Budget for Relocation of Cardiology Offices to Fremont Office Center
- G. Philips EPIO Cardiovascular Ultrasound Systems
- H. Appointment to DEVCO Board: Pauline Weaver

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

Roll call was taken:

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

The motion carried.

Kimberly Hartz, Chief Executive Officer, introduced Ed Fayen, Executive Vice President & Chief Operating Officer, who presented the Campus Master Plan as we move forward. Mr. Fayen began with a review of the Master Plan that was first presented in 2002 and approved by the Board of Directors in September 2010, noting the completed construction of the Central Utility Plant, the Center for Joint Replacement, the Parking Garage, and the Morris Hyman Critical Care Pavilion.

PRESENTATION: FACILITY MASTER PLAN

The Master Plan Development – Project Step 1 is centered around the Infill Projects being relocated to the shelled-in space in the Morris Hyman Critical Care Pavilion and the construction of a connecting bridge between the existing six-story building and the Morris Hyman Critical Care Pavilion. The Infill Projects include Sterile Processing, Imaging, Pharmacy, Surgery Support, and Perioperative Services. Also included in Project Step 1 is the addition of a Rehabilitation Sub-acute Unit to the third floor of the 6-story tower.

Step 2 of the Master Plan Development involves the extension of the site utilities to the expanded building footprint and the design and construction of a 4-floor expansion building. This building will house Clinical Lab, PT and OT Rehab Services, Food and Nutrition services and Dining, Cath Lab, and Endoscopy on its first floor; Med-Surg Nursing Unit on the second and third floors; and Birthing Center and Nursery on the fourth floor. The Birthing Center will have exclusive

entry and lobby area from the parking lot which will heighten security measures for that unit.

Step 3 of the Master Plan Development is the demolition of the original (1960) hospital building, construction of a new main entrance, lobby area, and parking areas, and the recirculation of public access and routes within the campus.

Dr. Shakir Hyder, Chief of Staff, reported there are 571 Medical Staff members including 341 active members. He talked about the COVID census and Variant BA.5. He spoke on the new Medical Staff Committee: Leadership Development Committee. Dr. Victoria Leipart is retiring.

MEDICAL STAFF REPORT

Debbie Feary, Service League President, reported that the Service League highlight for June was the first in-person volunteer ice cream social. High school volunteers are still returning to the lobby and the Gift Shop.

SERVICE LEAGUE REPORT

Kimberly Hartz introduced Alisa Curry, Coordinator of Rehab Clinical Programs, who presented the Quality Report on Washington Hospital's Mobility Program related to older adults. Increased mobilization can significantly reduce incidence of complications such as hospital associated infections resulting in decreased hospital stays. Active participation engages the patient, enhance their hospital experience and prepares them for the next level of care.

QUALITY REPORT: MOBILITY PROGRAM

Ms. Curry reviewed the effects of bedrest on our patients and the benefit of clinical goals to decrease the length of stay as well as decrease the number of patients discharged to Skilled Nursing Facilities. The John Hopkins Highest Level of Mobility tool was reviewed. Ms. Curry reviewed the results of mobility interventions on patient outcomes in the period immediately preceding COVID. She discussed the Walking Patient Program and various equipment used to assist patients with their mobility.

Hospital projects going forward include an increased focus on Med Surg patients, working on a plan for Bariatric patient safety, working with EPIC to create "up at mealtime" orders, as well as reviewing best practices at other facilities to maximize patient mobility.

Chris Henry, Vice President & Chief Financial Officer, presented the Finance Report for May 2022. The average daily inpatient census was 152.1 with admissions of 856 resulting in 4,715 patient days. Outpatient observation equivalent days were 294. The average length of stay was 5.67 days. The case mix index was 1.599. Deliveries were 131. Surgical cases were 384. The Outpatient visits were 7,451. Emergency visits were 4,755. Cath Lab cases were 196. Joint Replacement cases were 173. Neurosurgical cases were 22. Cardiac Surgical cases were 16. Total FTEs were 1,580.2. FTEs per adjusted occupied bed were 6.16.

FINANCE REPORT

Kimberly Hartz, Chief Executive Officer, presented the Hospital Operations Report for June 2022. Preliminary information for the month indicated total gross revenue at approximately \$181,333,000 against a budget of \$177,347,000. We had 86 COVID-19 discharges which represented 11% of total discharges.

HOSPITAL OPERATIONS REPORT

The Average Length of Stay was 5.18. The Average Daily Inpatient Census was 146.9. There were 11 discharges with lengths of stay greater than 30 days, ranging from 31 to 384. Still in house at the end of June were eight patients with length of stays of over 30 days and counting (highest at 270).

There were 4,407 patient days. There were 361 Surgical Cases and 188 Cath Lab cases at the Hospital. The Medicare accreditation survey was completed on April 28, 2022. However, we have not yet received our Medicare certification number which is required to bill Medicare, contract with commercial insurance companies, and credential medical staff with insurance companies. About 35 Medicare cases were performed at PSC in May and June and will be billed once our certification number has been received.

Deliveries were 119. Non-Emergency Outpatient visits were 7,556. Emergency Room visits were 4,735. Total Government Sponsored Preliminary Payor Mix was 72.8%, against the budget of 72.8%. Total FTEs per Adjusted Occupied Bed were 6.80. The Washington Outpatient Surgery Center had 470 cases and the clinics had approximately 16,242 visits.

There were \$396,000 in charity care applications pending or approved in June. The estimated total unreimbursed cost for homeless patients for fiscal year 2022 is \$5.8M.

Kimberly Hartz made the following announcements:

- The Joint Commission is currently on site conducting our long-overdue Lab Survey. They rrived on Monday, July 11<sup>th</sup> for a five day survey.
- Thursday, June 9<sup>th</sup>: Men: Take Charge of Your Health!
- Wednesday, June 29<sup>th</sup>: Maria Nunes, Clinical Manager of the Stroke Program, presented information on Stroke Awareness to the Residence of Acacia Creek Retirement Community in Union City.
- As of Wednesday, July 6<sup>th</sup>, a total of 90,513 COVID vaccine doses have been administered to community members at our vaccination clinic. Total number of people who have a received a COVID vaccine is 42,942.
- As of Tuesday, July 12<sup>th</sup>, a total of 3,702 vaccinations have been administered to the 5-11 year old age group and 60 vaccinations have been administered to the 6-month to 4 year old age group.
- Scheduled for Thursday, July 14<sup>th</sup>: Bone and Joint Health
- Scheduled for Thursday, July 14<sup>th</sup>: Concussion Safety
- Scheduled for Friday, July 15<sup>th</sup>: Beach and Water Safety
- Scheduled for Monday, July 25<sup>th</sup>: free Parkinson's Exercise Demonstration
- Scheduled for Tuesday, July 26<sup>th</sup>: Community Forum on Anti-Asian Hate.

**ANNOUNCEMENTS** 

- Scheduled for Saturday, July 30<sup>th</sup>: Tattoo Removal Clinic
- The Fremont Summer Concert Series continues to run Thursday evenings through August 11<sup>th</sup> at the Central Park Performance Pavilion at Lake Elizabeth.
- The Foundation continues to build momentum for the Washington-UCSF Cancer Center Campaign, raising \$2,025,000 towards a \$10M goal.

### **AWARDS:**

- Practice Greenhealth has awarded Washington Hospital the **Partner for Change Award** in recognition of its work towards impactful sustainability.
- The American Heart Association and American Stroke Association honored us for program excellence with the Get With The Guidelines ® Stroke GOLD PLUS Quality Achievement Award.
- The American Heart Association has honored Washington Hospital with Mission: Lifeline ® - STEMI Receiving Center SILVER Achievement Award.
- July Employee of the Month: Evelyn Magahiz, Pharmacy Technician

There being no further bus	iness, Director Yee adjourned the meeting at 7:47 p.m.	ADJOURNMENT
Jeannie Yee President	William Nicholson, M.D. Secretary	

A regular meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, July 18, 2022 via Teleconference. Director Yee 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: Jeannie Yee; Bernard Stewart, DDS;

ROLL CALL

Michael Wallace; William Nicholson, MD Absent: Jacob Eapen, MD

Also present: Kimberly Hartz, Chief Executive Officer; Ed Fayen, Chief Operating Officer, Chris Henry, Chief Financial Officer; Tina Nunez, Vice President; Larry

LaBossiere, Chief Nursing Officer; Dee Antonio, District Clerk

The Board made such a finding at its meeting earlier in the month.

Director Yee welcomed any members of the general public to the meeting. She noted that in order to continue to protect the health and safety of the members of the Board, District staff, and members of the public from the dangers posed by the SARS-CoV-2 virus, the Brown Act allows a local agency to continue to hold its meetings remotely as opposed to being required to meet in-person. Section 54953(e)(3) of the Government Code requires that the Board make certain findings every 30 days to continue meeting remotely. One such finding is that "state or local officials continue to impose or recommend measures to promote social distancing." The Alameda County Health Officer continues to recommend social distancing and the wearing of masks indoors, as referenced by the Alameda County Health Care

Services Public Health Department COVID-19 website at www.covid-19.acgov.org.

**OPENING REMARKS** 

There were no oral or written communications.

**COMMUNICATIONS** 

No announcements.

**ANNOUNCEMENTS** 

In accordance with Health & Safety Code Sections 32106, 32155 and California Government Code 54956.9(d)(2), Director Yee adjourned the meeting to closed session at 6:04 p.m., as the discussion pertained to a Conference involving Trade Secrets pursuant to Health & Safety Code 32106, Conference with Legal Counsel regarding Anticipated Litigation pursuant to Government Code section 54956.9(d)(2), and consideration of closed session Minutes: June 8, 20, and 22, 2022. Director Yee stated that the public has a right to know what, if any, reportable action takes place during closed session. Since this meeting is being conducted via Zoom 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 July 19, 2022. She indicated that the minutes of this meeting will reflect any reportable actions.

ADJOURN TO CLOSED SESSION

Director Yee reconvened the meeting to open session at 7:46 pm. The District Clerk reported that the Board approved the Closed Session Minutes of June 8, 20, and 22, 2022 by unanimous vote of all Directors present:

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

Jeannie Yee Bernard Stewart, DDS Michael Wallace

### William Nicholson, MD

There being no further busi	ness, Director Yee adjourned the meeting at 7:46 pm.	ADJOURNMENT
Jeannie Yee	William Nicholson, M.D.	
President	Secretary	



A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, July 25, 2022 via Zoom. Director Yee called the meeting to order at 7:30 a.m.

CALL TO ORDER

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

ROLL CALL

Excused: Michael Wallace

Also present: Shakir Hyder, MD; Prasad Kilaru, MD; Mark Saleh, MD; Tim Tsoi, MD; Jan Henstorf, MD; Kimberly Hartz, CEO; Brian Smith, MD; John Romano, MD; Larry LaBossiere, CNO; Jaspreet Kaur, Medical Staff Office

There were no oral or written communications.

**COMMUNICATIONS** 

Director Yee 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 Yee reconvened the meeting to open session at 8:22 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 8:22 a.m.

**ADJOURNMENT** 

Jeannie Yee President

William Nicholson, M.D. Secretary

A regular meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, July 27, 2022 via Zoom. Director Yee called the meeting to order at 6:03 p.m. and led those present in the Pledge of Allegiance.

CALL TO ORDER

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

ROLL CALL

Absent: Michael Wallace;

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

Director Yee welcomed any members of the general public to the meeting. She noted that in order to continue to protect the health and safety of the members of the Board, District staff, and members of the public from the dangers posed by the SARS-CoV-2 virus, the Brown Act allows a local agency to continue to hold its meetings remotely as opposed to being required to meet in-person. Section 54953(e)(3) of the Government Code requires that the Board make certain findings every 30 days to continue meeting remotely. One such finding is that "state or local officials continue to impose or recommend measures to promote social distancing." The Alameda County Health Officer continues to recommend social distancing and the wearing of masks indoors, as referenced by the Alameda County Health Care Services Public Health Department COVID-19 website at <a href="www.covid-19.acgov.org">www.covid-19.acgov.org</a>. The Board made such a finding at its meeting earlier in the month.

**OPENING REMARKS** 

Director Yee noted that Public Notice for this meeting, including connection information, was posted appropriately on our website. This meeting, conducted via Zoom, is being recorded for broadcast at a later date.

There were no oral or written communications.

**COMMUNICATIONS** 

Director Yee presented the Consent Calendar for consideration:

CONSENT CALENDAR

A. Fujifilm Sonosite II Ultrasound System

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

Roll call was taken:

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

The motion carried.

None ANNOUNCEMENTS

In accordance with Health & Safety Code Sections 32106, 32155 and California Government Code 54956.9(d)(2), Director Yee adjourned the meeting to closed session at 6:06 p.m., as the discussion pertained to a Report of Medical Staff and Quality Assurance Committee, Health & Safety Code section 32155 (Medical Staff Credentials Committee Report), Conference involving Trade Secrets pursuant to Health & Safety Code section 32106, and Conference with Legal Counsel – Anticipated Litigation pursuant to Government Code section 54956,9(d)(2). Director Yee stated that the public has a right to know what, if any, reportable action takes place during closed session. Since this meeting is being conducted via Zoom 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 July 28, 2022. She indicated that the minutes of this meeting will reflect any reportable actions.

ADJOURN TO CLOSED SESSION

Director Yee reconvened the meeting to open session at 7:00 pm. The District Clerk reported that during the closed session, the Board approved the Medical Staff Credentials Committee Report by vote of all Directors present:

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

Jeannie Yee Bernard Stewart, DDS Jacob Eapen, MD William Nicholson, MD

There being no further business, Director Yee adjourned the meeting at 7:00 pm.

**ADJOURNMENT** 

Jeannie Yee	William Nicholson, M.D.
President	Secretary



2000 Mowry Avenue, Fremont, California 94538-1716 | 510.797.1111 www.whhs.com

DATE: August 1, 2022

TO: Kimberly Hartz, Chief Executive Officer

FROM: Larry LaBossiere, Vice President and Chief Nursing Officer, Patient Care Services

Christy Casey, Director of Rehabilitation Services

SUBJECT: CAPITAL REQUEST - TIMS 2000 SP MOBILE CART PACKAGE FOR

SPEECH PATHOLOGY DEPARTMENT

I am requesting the purchase of the TIMS SP Mobile Cart Package for Modified Barium Swallow (MBS) Studies. This is now of urgent importance because the current TIMS system is no longer functional and is unsupported. The speech therapists can no longer complete MBS studies until we get this new equipment ordered and installed.

The TIMS Medical Video Platform (MVP) is a PC based video recording device that connects to any fluoroscope and records in high-resolution/high frame rate video with synchronized audio and automatically converts the study to DICOM format for archival to any PACS. TIMS can capture the fluoro imagery at 30 frames per second instead of 10-15 frames per second so critical information is not missed during the study.

The new system will make clinical decisions easier regarding swallowing, will limit the patient's exposure to re-radiation due to inadequate imagery, and will improve fluoro room efficiency with improved workflow. It will also reduce the risk of HIPAA violations by eliminating the use and storage of removable media containing patient information, and improve access to MBS studies by archiving to PACS instead of storing the study on a DVD in a filing cabinet.

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 TIMS 2000 SP Mobile Cart Package for Speech Pathology Department for a cost not to exceed \$28,682.74.

This item is approved for purchase through our current FY23 Capital Budget.





# WASHINGTON HOSPITAL MONTHLY OPERATING REPORT

June 2022



## WASHINGTON HOSPITAL INDEX TO BOARD FINANCIAL STATEMENTS June 2022

Schedule

Reference Schedule Name

**Board - 1** Statement of Revenues and Expenses

**Board - 2** Balance Sheet

**Board - 3** Operating Indicators

Current 12

### **Memorandum**

**DATE:** August 4, 2022

**TO:** Board of Directors

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

**SUBJECT:** Washington Hospital – June 2022

Operating & Financial Activity

### **SUMMARY OF OPERATIONS** – (Blue Schedules)

### 1. Utilization – Schedule Board 3

	Juile	Juile	Cultett 12
	<u>Actual</u>	<b>Budget</b>	Month Avg.
ACUTE INPATIENT:			
IP Average Daily Census	154.4	146.9	154.1
Combined Average Daily Census	164.1	153.8	164.4
# of Admissions	809	850	812
Patient Days	4,633	4,407	4,687
Discharge ALOS	6.00	5.18	5.65
OUTPATIENT:			
OP Visits	7,556	7,165	7,631
ER Visits	4,735	3,893	4,468
Observation Equivalent Days – OP	291	206	313

June

June

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

### 2. Staffing – Schedule Board 3

Total paid FTEs were 111.3 above budget. Total productive FTEs for June were 1,348.7, 51.3 above the budgeted level of 1,297.4. Nonproductive FTEs were 60 above budget. Productive FTEs per adjusted occupied bed were 4.98, 0.98 below the budgeted level of 5.96. Total FTEs per adjusted occupied bed were 5.88, 0.92 below the budgeted level of 6.8.

### 3. Income - Schedule Board 1

For the month of June the Hospital realized Operating Income of \$1,061,000 from operations.

Total Gross Patient Revenue of \$181,333,000 for June was 2.2% above budget.

Deductions from Revenue of \$140,546,000 represented 77.51% of Total Gross Patient Revenue. This percentage is slightly below the budgeted amount of 77.56%.

Total Operating Revenue of \$41,374,000 was \$1,205,000 (3.0%) above the budget.

Total Operating Expense of \$40,313,000 was \$51,000 (0.1%) below the budgeted amount.

The Total Non-Operating Loss of (\$1,103,000) for the month includes an unrealized loss on investments of (\$994,000).

The Net Loss for June was (\$42,000), which was \$65,000 less than the budgeted loss of (\$107,000).

The Total Net Income/(Loss) for June 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 \$712,000 compared to a budgeted loss of (\$392,000) or favorable variance of \$1,104,000.

### 4. Balance Sheet – Schedule Board 2

There were no noteworthy changes in assets and liabilities when compared to May 2022.

KIMBERLY HARTZ Chief Executive Officer

KH/CH



# WASHINGTON HOSPITAL STATEMENT OF REVENUES AND EXPENSES June 2022 GASB FORMAT (In thousands)

	Jur	ne				-		YEAR 1	TO DATE	~~~
ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	В	UDGET	FAV (UNFAV) VAR	% VAR.
\$ 103,341 77,992	\$ 119,711 57,636	\$ (16,370) 20,356	-13.7% 35.3%	1 2	OPERATING REVENUE INPATIENT REVENUE OUTPATIENT REVENUE	\$ 1,375,294 948,932		1,410,674 711,118	\$ (35,380) 237,814	-2.5% 33.4%
181,333	177,347	3,986	2.2%	3	TOTAL PATIENT REVENUE	2,324,226	:	2,121,792	202,434	9.5%
(136,251) (4,295) (140,546)	(134,219) (3,337) (137,556)	(2,032) (958) <b>(2,990)</b>	-1.5% -28.7% -2.2%	4 5 6	CONTRACTUAL ALLOWANCES PROVISION FOR DOUBTFUL ACCOUNTS DEDUCTIONS FROM REVENUE	(1,767,188 (40,918 <b>(1,808,106</b>	<u>)</u>	1,603,277) (39,930) <b>1,643,207</b> )	(163,911) (988) (164,899)	-10.2% -2.5% -10.0%
77.51%	77.56%	.,,,		7	DEDUCTIONS AS % OF REVENUE	77.79%	, .	77.44%	, , ,	
40,787	39,791	996	2.5%	8	NET PATIENT REVENUE	516,120		478,585	37,535	7.8%
587	378	209	55.3%	9	OTHER OPERATING INCOME	6,572		4,538	2,034	44.8%
41,374	40,169	1,205	3.0%	10	TOTAL OPERATING REVENUE	522,692		483,123	39,569	8.2%
					OPERATING EXPENSES					
20,217	18,656	(1,561)	-8.4%	11	SALARIES & WAGES	242,584		222,649	(19,935)	-9.0%
4,410	5,941	1,531	25.8%	12	EMPLOYEE BENEFITS	54,720		70,745	16,025	22.7%
5,953	5,280	(673)	-12.7%	13	SUPPLIES	69,933		62,462	(7,471)	-12.0%
4,342	4,683	341	7.3%	14	PURCHASED SERVICES & PROF FEES	60,368		56,694	(3,674)	-6.5%
1,340	1,977	637	32.2%	15	INSURANCE, UTILITIES & OTHER	20,846		22,998	2,152	9.4%
4,051	3,827	(224)	-5.9%	16	DEPRECIATION	46,291		47,306	1,015	2.1%
40,313	40,364	51	0.1%	17	TOTAL OPERATING EXPENSE	494,742		482,854	(11,888)	-2.5%
1,061	(195)	1,256	644.1%	18	OPERATING INCOME (LOSS)	27,950		269	27,681	10290.3%
2.56%	-0.49%			19	OPERATING INCOME MARGIN %	5.35%	o o	0.06%		
					NON-OPERATING INCOME & (EXPENSE)					
249	262	(13)	-5.0%	20	INVESTMENT INCOME	2,574		3,190	(616)	-19.3%
(48)	-	(48)	0.0%	21	REALIZED GAIN/(LOSS) ON INVESTMENTS	(383	)	-	(383)	0.0%
(1,777)	(1,732)	(45)	-2.6%	22	INTEREST EXPENSE	(20,908	)	(20,748)	(160)	-0.8%
26	117	(91)	-77.8%	23	RENTAL INCOME, NET	235		1,642	(1,407)	-85.7%
-	-	-	0.0%	24	FOUNDATION DONATION	1,030		1,031	(1)	-0.1%
-	-	-	0.0%	25	BOND ISSUANCE COSTS	(456	)	(600)	144	24.0%
-	-	-	0.0%	25	FEDERAL GRANT REVENUE	1,039		-	1,039	0.0%
1,441	1,441	-	0.0%	26	PROPERTY TAX REVENUE	17,298		17,298	-	0.0%
(994)		(994)	0.0%	27	UNREALIZED GAIN/(LOSS) ON INVESTMENTS	(8,582	<u> </u>	-	(8,582)	0.0%
(1,103)	88	(1,191)	-1353.4%	28	TOTAL NON-OPERATING INCOME & EXPENSE	(8,153	)	1,813	(9,966)	-549.7%
\$ (42)	\$ (107)	\$ 65	60.7%	29	NET INCOME (LOSS)	\$ 19,797	\$	2,082	\$ 17,715	850.9%
-0.10%	-0.27%			30	NET INCOME MARGIN %	3.79%	<b>6</b>	0.43%		
\$ 712	\$ (392)	\$ 1,104	281.6%	31	NET INCOME (LOSS) USING FASB PRINCIPLES**	\$ 25,104	\$	(1,340)	\$ 26,444	1973.4%
1.72%	-0.98%				NET INCOME MARGIN %	4.80%	, 0	-0.28%		

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



### WASHINGTON HOSPITAL BALANCE SHEET

June 2022 (In thousands)

	ASSETS AND DEFERRED OUTFLOWS	June 2022	Audited June 2021	-	LIABILITIES, NET POSITION AND DEFERRED INFLOWS	June 2022	Audited une 2021
1	CURRENT ASSETS CASH & CASH EQUIVALENTS	\$ 5,439	\$ 31,619	1	CURRENT LIABILITIES  CURRENT MATURITIES OF L/T OBLIG	\$ 10,065	\$ 10,930
2 3 4	ACCOUNTS REC NET OF ALLOWANCES OTHER CURRENT ASSETS TOTAL CURRENT ASSETS	76,757 13,050 95,246	73,792 12,052 117,463	2 - 3 - 4 5	ACCOUNTS PAYABLE OTHER ACCRUED LIABILITIES INTEREST TOTAL CURRENT LIABILITIES	 17,948 70,463 10,516 108,992	 18,246 112,710 10,597 152,483
6	ASSETS LIMITED AS TO USE  BOARD DESIGNATED FOR CAPITAL AND OTHER GENERAL OBLIGATION BOND FUNDS	199,979 18,778	215,928 0	6 6	LONG-TERM DEBT OBLIGATIONS REVENUE BONDS AND OTHER	202,530	211,490
6 7 8 9	REVENUE BOND FUNDS BOND DEBT SERVICE FUNDS OTHER ASSETS LIMITED AS TO USE	6,610 32,494 9,543	6,643 32,763 10,098	7	GENERAL OBLIGATION BONDS	345,595	328,564
10	TOTAL ASSETS LIMITED AS TO USE  OTHER ASSETS	267,404 272,341	265,432 246,106	- 11 12	OTHER LIABILITIES SUPPLEMENTAL MEDICAL RETIREMENT WORKERS' COMP AND OTHER	37,676 9,353	40,419 8,033
13	PREPAID PENSION	36,970	5,161			ŕ	·
14 15	OTHER INVESTMENTS  NET PROPERTY, PLANT & EQUIPMENT	15,386 600,578	12,163 640,049	15	NET POSITION	543,971	524,174
16	TOTAL ASSETS	\$ 1,287,925	\$ 1,286,374	16	TOTAL LIABILITIES AND NET POSITION	\$ 1,248,117	\$ 1,265,163
17 18	DEFERRED OUTFLOWS  TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 1,317,133	\$ 1,330,437	_	DEFERRED INFLOWS  TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	\$ 69,016 <b>1,317,133</b>	\$ 65,274 <b>1,330,437</b>



## WASHINGTON HOSPITAL OPERATING INDICATORS June 2022

		Jun	ie					YEAR 1	TO DATE	
12 MONTH AVERAGE	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.
						PATIENTS IN HOSPITAL				
154.1 10.3 164.4	154.4 9.7 164.1	146.9 6.9 153.8	7.5 2.8 10.3	5% 41% 7%	1 2 3	ADULT & PEDS AVERAGE DAILY CENSUS OUTPT OBSERVATION AVERAGE DAILY CENSUS COMBINED AVERAGE DAILY CENSUS	154.1 10.3 164.4	143.2 6.6 149.8	10.9 3.7 14.6	8% 56% 10%
7.9	8.0	8.0	-	0%	4	NURSERY AVERAGE DAILY CENSUS	7.9	7.6	0.3	4%
172.3	172.1	161.8	10.3	6%	5	TOTAL	172.3	157.4	14.9	9%
2.9	2.6	3.2	(0.6)	-19%	6	SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *	2.9	2.7	0.2	7%
4,687	4,633	4,407	226	5%	7	ADULT & PEDS PATIENT DAYS	56,242	52,268	3,974	8%
313	291	206	85	41%	8	OBSERVATION EQUIVALENT DAYS - OP	3,754	2,408	1,346	56%
812	809	850	(41)	-5%	9	ADMISSIONS-ADULTS & PEDS	9,739	9,955	(216)	-2%
5.65	6.00	5.18	0.82	16%	10	AVERAGE LENGTH OF STAY-ADULTS & PEDS	5.65	5.25	0.40	8%
						OTHER KEY UTILIZATION STATISTICS				
1.594	1.598	1.638	(0.040)	-2%	11	OVERALL CASE MIX INDEX (CMI)	1.594	1.632	(0.038)	-2%
174 25 12 180	161 26 4 170	128 23 10 177	33 3 (6) (7)	26% 13% -60% -4%	12 13 14 15	SURGICAL CASES JOINT REPLACEMENT CASES NEUROSURGICAL CASES CARDIAC SURGICAL CASES OTHER SURGICAL CASES	2,093 299 145 2,157	1,640 290 120 2,081	453 9 25 76	28% 3% 21% 4%
391	361	338	23	7%	16	TOTAL CASES	4,694	4,131	563	14%
202	188	224	(36)	-16%	17	TOTAL CATH LAB CASES	2,427	2,425	2	0%
120	119	111	8	7%	18	DELIVERIES	1,442	1,442	-	0%
7,631	7,556	7,165	391	5%	19	OUTPATIENT VISITS	91,570	89,731	1,839	2%
4,468	4,735	3,893	842	22%	20	EMERGENCY VISITS	53,616	45,904	7,712	17%
						LABOR INDICATORS				
1,351.7 196.6	1,348.7 243.4	1,297.4 183.4	(51.3) (60.0)	-4% -33%	21 22	PRODUCTIVE FTE'S NON PRODUCTIVE FTE'S	1,351.7 196.6	1,282.4 174.5	(69.3) (22.1)	-5% -13%
1,548.3	1,592.1	1,480.8	(111.3)	-8%	23	TOTAL FTE'S	1,548.3	1,456.9	(91.4)	-6%
5.19 5.95	4.98 5.88	5.96 6.80	0.98 0.92	16% 14%	24 25	PRODUCTIVE FTE/ADJ. OCCUPIED BED TOTAL FTE/ADJ. OCCUPIED BED	5.19 5.95	5.95 6.76	0.76 0.81	13% 12%

<sup>\*</sup> included in Adult and Peds Average Daily Census