



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, July 12, 2023 – 6:00 P.M.

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

<https://zoom.us/j/98998146336?pwd=OVdUZmZLUUZxaDZFcGhkSkt3NnlLQT09>

Passcode: 918012

Board Agenda and Packet can be found at:

[July 2023 | Washington Hospital Healthcare System \(whhs.com\)](https://www.whhs.com)

AGENDA

PRESENTED BY:

- | | |
|--|---|
| <p>I. CALL TO ORDER & PLEDGE OF ALLEGIANCE</p> | <p>Bernard Stewart, DDS
Board President</p> |
| <p>II. ROLL CALL
*Director Jeannie Yee requested to attend meeting remotely</p> | <p>Cheryl Renaud
District Clerk</p> |
| <p>III. COMMUNICATIONS</p> <p>A. Oral
<i>This opportunity is provided for persons in the audience to make a brief statement, not to exceed three (3) minutes on issues or concerns not on the agenda and within the subject matter of jurisdiction of the Board. "Request to Speak" cards should be filled out in advance and presented to the District Clerk. For the record, please state your name.</i></p> <p>B. Written</p> | |
| <p>IV. CONSENT CALENDAR
<i>Items listed under the Consent Calendar include reviewed reports and recommendations and are acted upon by one motion of the Board. Any Board Member or member of the public may remove an item for discussion before a motion is made.</i></p> <p>A. Consideration of Minutes of the Regular Meetings of the District Board: June 14, 19, 26, 28, 2023</p> <p>B. Consideration of the Credentialing Policy</p> <p>C. Consideration of the OPPE Policy</p> | <p>Bernard Stewart, DDS
Board President</p> <p><i>Motion Required</i></p> |

V. PRESENTATION

A. Philippines Medical Mission

PRESENTED BY:

Carmencita Agcaoili, MD
Medical Director, Intensivist Program

Shekar Srinivas, MD
Emergency Medicine Associates

VI. REPORTS

A. Medical Staff Report

Mark Saleh, MD
Chief of Medical Staff

B. Lean Report
WTMF Technology Enhancement

Michelle Hudson, Chief Operating
Officer

C. Service League Report

Sheela Vijay
Service League President

D. Quality Report: WHHS Cardiothoracic Surgery
Program

Ramin Beygui, MD, FACS
Medical Director of
Cardiothoracic Surgery

E. Finance Report

Thomas McDonagh
Vice President & Chief Financial
Officer

F. Hospital Operations Report

Kimberly Hartz
Chief Executive Officer

G. Healthcare System Calendar Report

Kimberly Hartz
Chief Executive Officer

VII. ACTION

VIII. ANNOUNCEMENTS

IX. ADJOURNMENT

Bernard Stewart, DDS
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, June 14, 2023 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Stewart 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: Bernard Stewart, DDS; Michael Wallace; William Nicholson, MD; Jeannie Yee

ROLL CALL

Absent: Jacob Eapen, MD

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

Guests: Donald Pipkin; Angus Cochran; John Lee; Kristin Ferguson; Sheela Vijay; Shakir Hyder, MD; Mary Bowron; Brian Smith, MD; Srikar Boddar; Nick Legge; Prabhjot Khalsa, MD; Kel Kanady; Jack Rose, MD; Maria Nunes; John Zubiena; Michelle Hudson; Jimmy Chang; Melissa Garcia; Maria Fuentes; Gisela Hernandez; Marcus Watkins; Jerri Randrup

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

OPENING REMARKS

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

There were no Oral communications.

*COMMUNICATIONS:
ORAL*

There were no Written communications.

*COMMUNICATIONS:
WRITTEN*

Director Stewart presented the Consent Calendar for consideration:

CONSENT CALENDAR

- A. Consideration of Minutes of the Regular Meetings of the District Board:
May 10, 15, 22 and 24, 2023
- B. Consideration of ARBA Retail Systems Point of Sale

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

Roll call was taken:

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

Motion Approved.

Kimberly Hartz, Chief Executive Officer, introduced Thomas McDonagh, Vice President and Chief Financial Officer and Erica Luna, Assistant Chief Financial Officer, who presented the Budget Estimate for Fiscal Year 2024. Mr. McDonagh stated that Washington Hospital experienced some of the most unprecedented medical and economic challenges during the COVID-19 pandemic. As operations recover and normalize, the System's situation has improved. The COVID-19 State of Emergency in California was lifted on February 28, 2023. However, the impact it had was far reaching and will remain with us as a System and community for some time. From an operational standpoint, we have incorporated many COVID-19 learnings into our daily routines and processes to meet new demands and to continue to care for our community well into the future. The challenges prompted the System to reevaluate our growth plans and embark on a "Road to Recovery". In 2022, we were designated as the next Level II Adult Trauma Center for Alameda County and we continue to prioritize physician and staff recruitment and retention to serve our community.

*PRESENTATION:
BUDGET ESTIMATE
FY 2023-2024*

The FY 2024 budget provides for: (in thousands)

- Total Net Operating Revenue of \$593,027
- Total Operating Expenses of \$577,976
- Funding of Capital Spending Requests of \$43,336
- General Obligation Bond Property Tax Revenue of \$16,626
- Net Income Targets:
 - Hospital Earnings Before Interest, Depreciation & Amortization (EBIDA) of \$51,898
 - Hospital Operating Income of \$15,052
 - Hospital Total Net Income of \$19,290
 - Consolidated Net Income (Loss) of (\$9,808)
- Funding of \$27,003 in Support of Affiliate Operations

Director Michael Wallace moved for adoption of Resolution No. 1251, which is the Budget Estimate for Fiscal Year 2023-2024. This Resolution provides for the necessary funds required for the operation of the District and for the continued support of the Washington Township Hospital Development Corporation in its operations to promote the charitable and community service mission of the District.

*RESOLUTION No. 1251
BUDGET ESTIMATE
FY 2023-2024*

Director William Nicholson, MD seconded the motion.

Director Stewart asked if there were any comments from the members of the public. There were none.

Roll call was taken:

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

Motion Approved.

Dr. Shakir Hyder, Chief of Staff, reported there are 592 Medical Staff members, including 338 active members. Dr. Hyder mentioned that the Washington Hospital Medical Staff Dinner Dance on Saturday, June 10, 2023, honored Dr. Dianne Martin as the recipient of the 2023 Remo Cerruti, MD Physician of the Year Award.

*MEDICAL STAFF
REPORT*

Dr. Hyder stated that Dr. Mark Saleh will be the new Chief of Staff starting July 1, 2023 for the next 24 months and Dr. Aaron Barry is the next Chief of Staff-Elect.

Kimberly Hartz introduced the Service League President, Sheela Vijay. Sheela reported for May that there were 182 members of the Service League who contributed 2,101 hours to the Hospital. There was an orientation of new Service League Members made up of 5 high school students, 17 college students and 89 adults.

*SERVICE LEAGUE
REPORT*

On May 1-3, the Service League held its semi-annual Masquerade Jewelry & Gift Sale and garnered over \$7,000.

The Quilting Group also had their first ever spring quilt raffle. It was a successful fundraising endeavor with \$400 in ticket sales.

In the month of May, Mended Hearts volunteer visits had an increase of 45%. They spoke with 45 heart patients and interacted with 18 family members and caregivers.

As part of the goal that Sheela has made to become acquainted with each of the different volunteer assignments we offer, Sheela gained a first-hand understanding of the day-to day operations by shadowing Margaret Peterson, a dedicated gift shop volunteer.

Kimberly Hartz introduced Dr. Jack Rose, Co-Medical Director of the Stroke Program with Dr. Prabhjot Khalsa. Dr. Rose presented the Stroke Program Calendar year 2023 Review and Quality Report. He explained the Stroke Program leadership, structure, alert process, guidance and dissemination of data, patient volume, outcomes, patient, staff and community education, performance improvement, and patient satisfaction data, as well as the early warning signs of a stroke.

*QUALITY REPORT:
ANNUAL STROKE
PROGRAM UPDATE*

Notable Achievements in 2022-2023:

- GWTG Award-Gold Plus Award for Stroke and Target Honor Roll for Diabetes.
- Decreased median time of rapid administration of thrombolytic therapy utilizing IV TNKase.
- Expanded services to San Joaquin Valley, with increased volume of neurointerventional procedures.
- Augmented marketing strategies for Neuroscience Program.

Tom McDonagh, Vice President & Chief Financial Officer, presented the Finance Report for April 2023. The average daily inpatient census was 158.7 with admissions of 877 resulting in 4,827 patient days. Outpatient observation equivalent days were 272. The average length of stay was 5.52 days. The case mix index was 1.561. Deliveries were 124. Surgical cases were 371. The Outpatient visits were 8,569. Emergency visits were 4,863. Cath Lab cases were 170. Joint Replacement cases were 164. Neurosurgical cases were 25. Cardiac Surgical cases were 10. Total FTEs were 1,407.9. FTEs per adjusted occupied bed were 6.02.

FINANCE REPORT

Kimberly Hartz, Chief Executive Officer, presented the Hospital Operations Report for May 2023. Preliminary information for the month indicated total gross revenue at approximately \$202.9 million against a budget of \$19,500,000. We had 35 COVID-19 discharges, which was 3 fewer cases from the prior month, and 12 less than May 2022 at 47 discharges.

*HOSPITAL
OPERATIONS REPORT*

The Average Length of Stay was 5.30. The Average Daily Inpatient Census was 146.8. There were 9 discharges with lengths of stay greater than 30 days, ranging from 34-53. Still in house at the end of May were 6 patients with length of stays of over 30 days and counting.

There were 4,550 patient days. There were 394 Surgical Cases and 182 Cath Lab cases at the Hospital. It was noted that there were 67 cases at the Peninsula Surgery Center in May.

Deliveries were 144. Non-Emergency Outpatient visits were 9,258. Emergency Room visits were 5,147. Total Government Sponsored Preliminary Payor Mix was 71.4%, against the budget of 71.3%. Total FTEs per Adjusted Occupied Bed were 5.49. The Washington Outpatient Surgery Center had 552 cases and the clinics had approximately 16,250 visits.

There were \$445K in charity care adjustments in May.

June Employee of the Month: Kellee Ann Piscanio, Sr. Radiation Therapist

*EMPLOYEE OF THE
MONTH*

Past Health Promotions & Community Outreach Events:

- May 5: Medical Coverage for Special Olympics Track Event
- May 17: Stroke Prevention
- May 18: WHHS Hosted "Celebration of Life"
- May 22: Diabetes Education
- June 3: Tattoo Removal Clinic
- June 6: HPV Vaccine: When and Why?
- June 7: Understanding Palliative Care
- June 8: Fall Prevention
- June 14: Aortic Stenosis
- June 14: Feeding Your Baby During the First Year

Upcoming Health Promotions & Community Outreach Events:

- Thursday Evenings, June 29-August 10: Fremont Summer Concert Series at Central Park Performance Pavilion at Lake Elizabeth

On Thursday, May 4, 2023, Washington Hospital Healthcare Foundation welcomed golfers and bocce ball players to the 36th Annual Golf Tournament at The Club at Castlewood in Pleasanton. After expenses, the event raised \$77,000 for surgical services at the hospital. The Foundation would like to give thanks to its Platinum Sponsors – Fremont Bank and Gonsalves & Kozachenko.

The Foundation will continue to host free charitable giving and estate planning seminars in partnership with estate planner Richard Schachtli at Hopkins Carley. The next free seminar will be held on June 21 at 5pm in the Anderson Auditoriums at Washington West.

The 37th Annual Top Hat Gala is scheduled for Saturday, October 14, 2023.

There being no further business, Director Stewart adjourned the meeting at 8:00 p.m. *ADJOURNMENT*

Bernard Stewart, DDS
President

Jeannie Yee
Secretary

A regular meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, June 19, 2023 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Stewart 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: Bernard Stewart, DDS; William Nicholson, MD; Jeannie Yee

ROLL CALL

Absent: Michael Wallace; Jacob Eapen, MD

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

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

OPENING REMARKS

Director Stewart 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*

There were no Consent Calendar items for consideration.

CONSENT CALENDAR

There were no Action Items for consideration.

ACTION ITEMS

There were no announcements.

ANNOUNCEMENTS

Director Stewart adjourned the meeting to closed session at 6:05 p.m., as the discussion pertained to a Conference involving Trade Secrets pursuant to Health & Safety Code section 32106 (Strategic Planning Discussion) and Conference with legal counsel – Anticipated Litigation pursuant to Government Code section 54956.9(d)(2). Director Stewart 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 June 20, 2023. The minutes of this meeting will reflect any reportable actions.

*ADJOURN TO CLOSED
SESSION*

Director Stewart reconvened the meeting to open session at 7:50 p.m. The District Clerk reported that during closed session, the Board rejected the claim filed by Rajinder Singh and authorized the Chief Executive Officer to provide a notice of rejection of claim.

*RECONVENE TO OPEN
SESSION & REPORT ON
CLOSED SESSION*

There being no further business, Director Stewart adjourned the meeting at 7:50 p.m. *ADJOURNMENT*

Bernard Stewart, DDS
President

Jeannie Yee
Secretary

DRAFT

A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, June 26, 2023 in the Board Room at 2000 Mowry Avenue, Fremont and by Teleconference. Director Stewart called the meeting to order at 7:30 a.m.

CALL TO ORDER

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

ROLL CALL

Absent: Michael Wallace; Jacob Eapen, MD

Also present: Kimberly Hartz; Shakir Hyder, MD; Prasad Kilaru MD; Tim Tsoi, MD; Mark Saleh, MD; John Romano, MD; Larry LaBossiere; Brian Smith, MD; Kristin Ferguson, RN; Jaspreet Kaur

There were no Oral communications.

*COMMUNICATIONS:
ORAL*

There were no Written communications.

*COMMUNICATIONS
WRITTEN*

Director Stewart 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 Stewart reconvened the meeting to open session at 8:18 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 8:18 a.m.

ADJOURNMENT

Bernard Stewart, DDS
President

Jeannie Yee
Secretary

A regular meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, June 28, 2023 in the Board Room at 2000 Mowry Avenue, Fremont and Zoom access was provided. Director Stewart 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: Bernard Stewart, DDS; Michael Wallace; William Nicholson, MD; Jeannie Yee

ROLL CALL

Absent: Jacob Eapen, MD

Also present: Kimberly Hartz; Tom McDonagh; Larry LaBossiere; Tina Nunez; Paul Kozachenko; Cheryl Renaud

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

OPENING REMARKS

Director Stewart 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*

Dr. Stewart presented the Consent Calendar for consideration:

CONSENT CALENDAR

- A. Consideration of Medical Staff: Allergy & Immunology Privileges
- B. Consideration of Medical Staff: Dermatology Privileges
- C. Consideration of Medical Staff: Gastroenterology Privileges
- D. Consideration of Medical Staff: General Dentistry Privileges
- E. Consideration of Medical Staff: Moderate Sedation Privileges
- F. Consideration of Medical Staff: Nephrology Privileges
- G. Consideration of Medical Staff: Nurse Practitioner – Medicine Privileges
- H. Consideration of Medical Staff: Nurse Practitioner – Surgical Privileges
- I. Consideration of Medical Staff: Podiatry Privileges
- J. Consideration of Medical Staff: Psychiatry Privileges
- K. Consideration of Medical Staff: Radiology Privileges

L. Consideration of Medical Staff: Radiosurgery

M. Consideration of Medical Staff: Registered Nurse First Assistant Privileges

N. Consideration of Medical Staff: Rheumatology Privileges

O. Consideration of Medical Staff: Sleep Medicine Privileges

P. Consideration of Medical Staff: Teleradiology Privileges

Director Wallace moved that the Board of Directors approve the Consent Calendar, Items A through P. Director Yee seconded the motion.

Roll call was taken:

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

Motion Approved.

Director Wallace moved for adoption of Resolution No. 1252 and Resolution No. 1253 Pension and OPEB Administrative and Assumption Modifications to Funding Policies.

*ACTION ITEMS:
RESOLUTION NO. 1252
& 1253 PENSION AND
OPEB
ADMINISTRATIVE AND
ASSUMPTION
MODIFICATIONS TO
FUNDING POLICIES*

Director Nicholson seconded the motion.

Director Stewart asked if there were any comments from the members of the public. There were none.

Roll call was taken:

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

Motion Approved.

There were no announcements.

ANNOUNCEMENTS

Director Stewart adjourned the meeting to closed session at 6:07 p.m., as the discussion pertained to reports regarding Medical Audit & Quality Assurance

*ADJOURN TO CLOSED
SESSION*

Matters pursuant to Health & Safety Code Sections 32155, 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 Stewart 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 June 29, 2023. The minutes of this meeting will reflect any reportable actions.

Director Stewart reconvened the meeting to open session at 8:17 pm. The District Clerk reported that during the closed session, the Board approved the closed session meeting minutes of May 15 and 24, 2023 and the Medical Staff Credentials Committee Report by unanimous vote of all Directors present. Also, the Board of Directors rejected the Claim filed by Gina Council and Elizabeth Drachnik and the Chief Executive Officer was directed to provide the claimants with Notice of Rejection of the Claim.

*RECONVENE TO OPEN
SESSION & REPORT ON
CLOSED SESSION*

There being no further business, Director Stewart adjourned the meeting at 8:18 pm. *ADJOURNMENT*

Bernard Stewart, DDS
President

Jeannie Yee
Secretary



Memorandum

DATE: June 19, 2023
TO: Kimberly Hartz, Chief Executive Officer
FROM: Shakir Hyder, MD, Chief of Staff
SUBJECT: MEC for Board Approval:

The Medical Executive Committee, at its meeting on June 19, 2023, approved the updated Credentialing Policy and OPPE Policy Items dated June 13, 2023.

Please accept this memorandum as a formal request for presentation to the Board of Directors for final approval of the attached updated Credentialing Policy and OPPE Policy dated June 13, 2023.

WASHINGTON HOSPITAL

MEDICAL STAFF

CREDENTIALING POLICY

Approved by the Board on November 14, 2018
Approved by the Medical Staff on September 11, 2018

ARTICLE 2

QUALIFICATIONS, CONDITIONS, AND RESPONSIBILITIES

2.A.QUALIFICATIONS

2.A.1.Threshold Eligibility Criteria:

To be eligible to apply for initial appointment, reappointment, or clinical privileges, an individual must, as applicable:

- (a) have a current, unrestricted license to practice in California, which is not subject to any restrictions, probationary terms, or conditions not generally applicable to all licensees;
- (b) have never had a license to practice denied, revoked, restricted or suspended by any state licensing agency;
- (c) have never had an application for Medical Staff membership or clinical privileges not processed, or had membership or privileges automatically relinquished, at the Hospital or any of its affiliated entities, due to an omission or misrepresentation;
- (d) have a current, unrestricted DEA registration in compliance with Hospital requirements (i.e., have all required levels on the DEA registration); exceptions to this requirement are the Pathologist, Tele-Radiologist and Administrative staff members.
- (e) be located close enough to fulfill Medical Staff responsibilities and to provide timely and continuous care for his or her patients in the Hospital in accordance with the Medical Staff Rules and Regulations;
- (f) have current, valid professional liability insurance coverage in a form and in amounts satisfactory to the Board, Hospital, and Medical Executive Committee;
- (g) have never been excluded or precluded from participation in Medicare, Medicaid, or any other federal or state governmental health care program;
- (h) have never had Medical Staff or Allied Health Staff appointment, clinical privileges, or status as a participating provider denied, revoked, or terminated by any health care facility or health plan, including this Hospital, for reasons related to clinical competence or professional conduct;
- (i) have never resigned Medical Staff or Allied Health Staff appointment, or relinquished privileges, during an investigation (or in exchange for not conducting such an investigation at any health care facility, including this Hospital);

WASHINGTON HOSPITAL

MEDICAL STAFF

**ONGOING PROFESSIONAL
PRACTICE EVALUATION
(OPPE) POLICY**

Approved by the Board on November 14, 2018
Approved by the Medical Staff on September 11, 2018

4. **OPPE Reports.**

every eight

4.A **Reports.** An OPPE report for each Practitioner shall be prepared at least ~~every six~~ months. A copy shall be placed in the Practitioner's file and considered in the reappointment process and in the assessment of the Practitioner's competence to exercise the clinical privileges granted. A Practitioner's OPPE report may include:

- (1) the Practitioner's activity during the OPPE period (i.e., numbers of procedures, admissions, and consults);
- (2) clinical performance as measured by the approved Department and Medical Staff OPPE clinical indicators listed in Appendices B and C;
- (3) the number of Informational Letters sent pursuant to the Professional Practice Evaluation Policy (Peer Review) (Informational Letters are a non-punitive, educational tool to help improve Practitioner performance through the use of feedback);
- (4) the number of cases reviewed pursuant to the Professional Practice Evaluation Policy (Peer Review) and the dispositions of those cases; and
- (5) the number of complaints addressed pursuant to the Medical Staff Professionalism Policy and the disposition of those matters.

4.B **Review by PPE Support Staff, Medical Staff Leader, and Department Chair.**

- (1) **Initial Review.** The PPE Support Staff will review each OPPE report. As needed, the PPE Support Staff will consult with the PPEC Chair, a Medical Staff Officer, or the Department Chair.
- (2) **Data Within Expected Parameters of Performance/No Concerns.** If the OPPE report reveals that the Practitioner's data is within, or better than, expected performance parameters and no other issues or concerns are noted, the PPE Support Staff shall provide a copy of the report to the Practitioner or notify the Practitioner how to access the report. The PPE Support Staff shall also indicate that the report is being provided solely for the Practitioner's information and use in his or her patient care activities and that no response and no further review are necessary at that time. The PPE Support Staff shall notify the applicable Department Chair of these determinations.
- (3) **Data Not Within Expected Parameters of Performance, Raises Questions, and/or Based on Low Volume.** If performance is not within expected parameters or raises any questions or concerns, or if the



WASHINGTON HOSPITAL
MONTHLY OPERATING REPORT

May 2023



**WASHINGTON HOSPITAL
INDEX TO BOARD FINANCIAL STATEMENTS
May 2023**

<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: June 30, 2023
TO: Board of Directors
FROM: Kimberly Hartz, Chief Executive Officer
SUBJECT: Washington Hospital – May 2023
Operating & Financial Activity

SUMMARY OF OPERATIONS – (Blue Schedules)

1. Utilization – Schedule Board 3

	May <u>Actual</u>	May <u>Budget</u>	Current 12 <u>Month Avg.</u>
<u>ACUTE INPATIENT:</u>			
IP Average Daily Census	146.8	134.9	158.3
Combined Average Daily Census	156.9	145.2	167.3
# of Admissions	887	758	880
Patient Days	4,550	4,182	4,813
Discharge ALOS	5.30	5.52	5.49
<u>OUTPATIENT:</u>			
OP Visits	9,633	8,704	8,750
ER Visits	5,147	4,483	4,896
Observation Equivalent Days – OP	313	320	273

Comparison of May Actual acute inpatient statistics versus the Budget showed a higher level of admissions, 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. Observation equivalent days were lower than Budget.

2. Staffing – Schedule Board 3

Total paid FTEs were above Budget. Total productive FTEs for May were 1,457.3, 141.0 above the budgeted level of 1,316.3. Nonproductive FTEs were 19.6 above Budget. Productive FTEs per adjusted occupied bed were 5.49, 0.24 below the budgeted level of 5.73. Total FTEs per adjusted occupied bed were 6.13, 0.25 below the budgeted level of 6.38.

3. Income - Schedule Board 1

For the month of May, the Hospital realized Net Operating Income of \$285,000 from Operations, a 0.60% Margin.

Total Gross Patient Revenue of \$202,928,000 for May was 10.60% above Budget.

Deductions from Revenue of \$157,634,000 were 77.68% of Total Gross Patient Revenue, above the budgeted amount of 76.84%.

Total Operating Revenue of \$47,172,000 was \$4,173,000 above the Budget by 9.70%.

Total Operating Expense of \$46,887,000 was higher than the Budget by \$5,203,000 (12.50%).

The Total Non-Operating Loss of \$94,000 for the month includes an unrealized loss on investments of \$468,000.

The Net Income for May was \$191,000 (0.40% Margin), which was \$2,441,000 below the budgeted income of \$2,632,000.

The Total Net Gain for May using FASB accounting principles, in which the unrealized loss on investments, net interest expense on GO bonds and property tax revenues are removed from the non-operating income and expense, was \$213,000, a 0.45% Margin, compared to budgeted income of \$2,324,000 for an unfavorable variance of \$2,111,000.

4. Balance Sheet – Schedule Board 2

There were no noteworthy changes in assets and liabilities when compared to April 2023.

KIMBERLY HARTZ
Chief Executive Officer

KH/TM



WASHINGTON HOSPITAL
STATEMENT OF REVENUES AND EXPENSES
May 2023
GASB FORMAT
(In thousands)

May					YEAR TO DATE				
ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.		ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.	
					OPERATING REVENUE				
\$ 112,312	\$ 107,787	\$ 4,525	4.2%	1	\$ 1,273,143	\$ 1,254,144	\$ 18,999	1.5%	
90,616	75,610	15,006	19.8%	2	889,336	845,266	44,070	5.2%	
202,928	183,397	19,531	10.6%	3	2,162,479	2,099,410	63,069	3.0%	
(152,852)	(137,437)	(15,415)	-11.2%	4	(1,638,480)	(1,576,017)	(62,463)	-4.0%	
(4,782)	(3,491)	(1,291)	-37.0%	5	(34,610)	(39,970)	5,360	13.4%	
(157,634)	(140,928)	(16,706)	-11.9%	6	(1,673,090)	(1,615,987)	(57,103)	-3.5%	
77.68%	76.84%			7	77.37%	76.97%			
45,294	42,469	2,825	6.7%	8	489,389	483,423	5,966	1.2%	
1,878	530	1,348	254.3%	9	13,110	5,706	7,404	129.8%	
47,172	42,999	4,173	9.7%	10	502,499	489,129	13,370	2.7%	
					OPERATING EXPENSES				
22,105	19,690	(2,415)	-12.3%	11	241,076	225,176	(15,900)	-7.1%	
7,006	5,141	(1,865)	-36.3%	12	65,626	57,012	(8,614)	-15.1%	
6,076	5,405	(671)	-12.4%	13	64,498	61,478	(3,020)	-4.9%	
6,030	5,549	(481)	-8.7%	14	64,178	62,627	(1,551)	-2.5%	
1,735	1,959	224	11.4%	15	20,233	22,013	1,780	8.1%	
3,935	3,940	5	0.1%	16	40,385	41,390	1,005	2.4%	
46,887	41,684	(5,203)	-12.5%	17	495,996	469,696	(26,300)	-5.6%	
285	1,315	(1,030)	-78.3%	18	6,503	19,433	(12,930)	-66.5%	
0.60%	3.06%			19	1.29%	3.97%			
					NON-OPERATING INCOME & (EXPENSE)				
497	196	301	153.6%	20	4,176	2,333	1,843	79.0%	
(234)	-	(234)	0.0%	21	(1,393)	-	(1,393)	0.0%	
(1,592)	(1,773)	181	10.2%	22	(18,476)	(19,507)	1,031	5.3%	
180	121	59	48.8%	23	636	831	(195)	-23.5%	
-	1,250	(1,250)	-100.0%	24	635	2,250	(1,615)	-71.8%	
-	-	-	0.0%	25	14	-	14	0.0%	
-	-	-	0.0%	25	550	-	550	0.0%	
1,523	1,523	-	0.0%	26	16,671	16,671	-	0.0%	
(468)	-	(468)	0.0%	27	(419)	-	(419)	0.0%	
(94)	1,317	(1,411)	-107.1%	28	2,394	2,578	(184)	-7.1%	
\$ 191	\$ 2,632	\$ (2,441)	-92.7%	29	\$ 8,897	\$ 22,011	\$ (13,114)	-59.6%	
0.40%	6.12%			30	1.77%	4.50%			
\$ 213	\$ 2,324	\$ (2,111)	-90.8%	31	\$ 5,083	\$ 18,699	\$ (13,616)	-72.8%	
0.45%	5.40%				1.01%	3.82%			

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



**WASHINGTON HOSPITAL
BALANCE SHEET**
May 2023
(In thousands)

SCHEDULE BOARD 2

ASSETS AND DEFERRED OUTFLOWS		May 2023	Audited June 2022	LIABILITIES, NET POSITION AND DEFERRED INFLOWS		May 2023	Audited June 2022
CURRENT ASSETS				CURRENT LIABILITIES			
1	CASH & CASH EQUIVALENTS	\$ 10,424	\$ 5,439	1	CURRENT MATURITIES OF L/T OBLIG	\$ 10,460	\$ 10,065
2	ACCOUNTS REC NET OF ALLOWANCES	63,790	76,757	2	ACCOUNTS PAYABLE	23,201	17,948
3	OTHER CURRENT ASSETS	22,698	13,050	3	OTHER ACCRUED LIABILITIES	56,890	70,463
4	TOTAL CURRENT ASSETS	<u>96,912</u>	<u>95,246</u>	4	INTEREST	8,501	10,516
				5	TOTAL CURRENT LIABILITIES	<u>99,052</u>	<u>108,992</u>
ASSETS LIMITED AS TO USE				LONG-TERM DEBT OBLIGATIONS			
6	BOARD DESIGNATED FOR CAPITAL AND OTHER	186,940	199,979	6	REVENUE BONDS AND OTHER	193,531	202,530
6	GENERAL OBLIGATION BOND FUNDS	19,318	18,778	6			
7	REVENUE BOND FUNDS	6,726	6,610	7	GENERAL OBLIGATION BONDS	342,195	345,595
8	BOND DEBT SERVICE FUNDS	22,114	32,494				
9	OTHER ASSETS LIMITED AS TO USE	9,766	9,543				
10	TOTAL ASSETS LIMITED AS TO USE	<u>244,864</u>	<u>267,404</u>	OTHER LIABILITIES			
12	OTHER ASSETS	294,413	272,341	11	SUPPLEMENTAL MEDICAL RETIREMENT	37,889	37,676
13	PREPAID PENSION	42,895	36,970	12	WORKERS' COMP AND OTHER	9,131	9,353
14	OTHER INVESTMENTS	18,952	15,386				
15	NET PROPERTY, PLANT & EQUIPMENT	572,712	600,578	15	NET POSITION	552,869	543,971
16	TOTAL ASSETS	<u>\$ 1,270,748</u>	<u>\$ 1,287,925</u>	16	TOTAL LIABILITIES AND NET POSITION	<u>\$ 1,234,667</u>	<u>\$ 1,248,117</u>
17	DEFERRED OUTFLOWS	27,674	29,208	17	DEFERRED INFLOWS	63,755	69,016
18	TOTAL ASSETS AND DEFERRED OUTFLOWS	<u>\$ 1,298,422</u>	<u>\$ 1,317,133</u>	18	TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	<u>\$ 1,298,422</u>	<u>\$ 1,317,133</u>



**WASHINGTON HOSPITAL
OPERATING INDICATORS
May 2023**

12 MONTH AVERAGE	May						YEAR TO DATE				
	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.	
	<u>PATIENTS IN HOSPITAL</u>										
158.3	146.8	134.9	11.9	9%	1	ADULT & PEDS AVERAGE DAILY CENSUS	158.6	147.7	10.9	7%	
9.0	10.1	10.3	(0.2)	-2%	2	OUTPT OBSERVATION AVERAGE DAILY CENSUS	8.9	11.0	(2.1)	-19%	
167.3	156.9	145.2	11.7	8%	3	COMBINED AVERAGE DAILY CENSUS	167.5	158.7	8.8	6%	
8.3	9.1	7.8	1.3	17%	4	NURSERY AVERAGE DAILY CENSUS	8.3	7.8	0.5	6%	
175.6	166.0	153.0	13.0	8%	5	TOTAL	175.8	166.5	9.3	6%	
3.4	3.2	2.9	0.3	10%	6	SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *	3.4	2.8	0.6	21%	
4,813	4,550	4,182	368	9%	7	ADULT & PEDS PATIENT DAYS	53,128	49,477	3,651	7%	
273	313	320	(7)	-2%	8	OBSERVATION EQUIVALENT DAYS - OP	2,988	3,671	(683)	-19%	
880	887	758	129	17%	9	ADMISSIONS-ADULTS & PEDS	9,745	8,787	958	11%	
5.49	5.30	5.52	(0.22)	-4%	10	AVERAGE LENGTH OF STAY-ADULTS & PEDS	5.44	5.63	(0.19)	-3%	
	<u>OTHER KEY UTILIZATION STATISTICS</u>										
1.555	1.521	1.599	(0.078)	-5%	11	OVERALL CASE MIX INDEX (CMI)	1.547	1.599	(0.052)	-3%	
	<u>SURGICAL CASES</u>										
165	189	145	44	30%	12	JOINT REPLACEMENT CASES	1,824	1,643	181	11%	
25	25	29	(4)	-14%	13	NEUROSURGICAL CASES	274	325	(51)	-16%	
10	11	15	(4)	-27%	14	CARDIAC SURGICAL CASES	110	154	(44)	-29%	
171	169	169	-	0%	15	OTHER SURGICAL CASES	1,887	1,840	47	3%	
371	394	358	36	10%	16	TOTAL CASES	4,095	3,962	133	3%	
169	182	222	(40)	-18%	17	TOTAL CATH LAB CASES	1,839	2,408	(569)	-24%	
125	144	118	26	22%	18	DELIVERIES	1,384	1,314	70	5%	
8,750	9,633	8,704	929	11%	19	OUTPATIENT VISITS	97,449	96,029	1,420	1%	
4,896	5,147	4,483	664	15%	20	EMERGENCY VISITS	54,014	49,924	4,090	8%	
	<u>LABOR INDICATORS</u>										
1,413.2	1,457.3	1,316.3	(141.0)	-11%	21	PRODUCTIVE FTE'S	1,418.7	1,375.2	(43.5)	-3%	
207.3	167.5	147.9	(19.6)	-13%	22	NON PRODUCTIVE FTE'S	204.2	183.4	(20.8)	-11%	
1,620.5	1,624.8	1,464.2	(160.6)	-11%	23	TOTAL FTE'S	1,622.9	1,558.6	(64.3)	-4%	
5.25	5.49	5.73	0.24	4%	24	PRODUCTIVE FTE/ADJ. OCCUPIED BED	5.27	5.56	0.29	5%	
6.02	6.13	6.38	0.25	4%	25	TOTAL FTE/ADJ. OCCUPIED BED	6.02	6.30	0.28	4%	

* included in Adult and Peds Average Daily Census