

Awards and Recognition

Joint Commission Accreditation | Washington Hospital has earned the prestigious Joint Commission seal of approval. The full three-year accreditation is the Gold Seal of Approval® from the nation's oldest and largest standards-setting and accrediting body in health care. The Hospital also received full accreditation for its laboratory.

Magnet® Status by the American Nurses

Credentialing Center | The American Nurses

Credentialing Center has recognized the high level of care that Washington Hospital's nurses provide to patients and families. Magnet designation for four years was again earned in 2016, with the first one in 2011.

Healthgrades | Washington Hospital is an honored recipient of the Healthgrades Distinguished Hospital Award for Clinical Excellence for consistently providing comprehensive and clinically excellent care.



U.S. News and World Report | Washington Hospital has earned high performance ratings for congestive heart failure, COPD, hip replacement and knee replacement, which has led to a number 5 ranking in the San Francisco Metro Area and number 32 in California.

Baby-Friendly Hospital by the World Health Organization and the United Nations Children's

Fund | Washington Hospital is one of few U.S. hospitals recognized for exceptional support of breastfeeding moms and babies.



Quest for Zero Award in ED and Obstetrics | Washington Hospital has been recognized by Beta Healthcare Group for its *Quest for Zero* quality initiative in the Emergency Department and Obstetrics. *Quest for Zero* is a risk reduction program to improve patient safety.

Practice Greenhealth Partner for Change and Greening the

OR | Washington Hospital has received the Practice Greenhealth Partner for Change Award in recognition of its achievements in

developing programs to prevent pollution, reduce and recycle solid waste, eliminate mercury, reduce water and energy consumption and establish "green"



purchasing policies. For the first time, Washington Hospital earned Practice Greenhealth's Greening the OR Award for demonstrating success in reducing the environmental impact of its surgical suites.

MISSION STATEMENT



s the local Health Care District, our mission is to meet the health care needs of the District residents through medical services, education and research.

Within this scope, Washington Township Health Care District is committed to assuming the leadership role in improving and maintaining the health status of the residents by:

- Identifying and assessing community health care needs.
- Developing mechanisms to respond to the identified need within the financial capabilities of the District.
- Committing to a culture of patient safety and accountability.
- Adopting identified best practices.
- Providing access to high quality, cost-effective health services through an integrated delivery system.
- Partnering with a diverse medical staff and other providers to meet the health care needs of district residents.
- Providing appropriate employee, professional and community educational resources to enhance patient care and health promotion throughout the District.



To support the fulfillment of the mission, the District's strategic vision is to be the regional medical center of choice in Southern Alameda County offering quality services that span the full range of care within the available financial resources.

Resolved by the Board of Directors
Washington Township Health Care Distirct
October 12. 2016



Washington Township Health Care District

From the Chief Executive Officer



Nancy Farber Chief Executive Officer Washington Hospital Healthcare System

or nearly 60 years, Washington Hospital Healthcare System has served the
 communities of southern Alameda County, offering high-quality, locally based medical care to meet your health care needs.

While our focus is on serving our patients and our community, it is gratifying to be recognized for excellence by local and national experts in the field. For example, this past year we received more than a dozen awards from Healthgrades, the leading online consumer resource. We also earned a number of awards for our green environmental practices.

Recently, U.S. News & World Report ranked Washington Hospital fifth on its list of best hospitals in the San Francisco Metro region. We are also very proud that our partner since 2013, UCSF Health, is ranked number 1 in California and number 5 in the nation by Healthgrades.

Honors and rankings are important, but we place a far greater value on the care residents receive at the hospital bedside, in our community clinics, and through our health fairs and other outreach programs. A fundamental measure of our success will always be how well we are meeting the needs of the people we serve.

To stay abreast of changing community needs, we collaborate with other hospitals in the area to conduct a comprehensive Community Health Needs Assessment every three years. This survey helps pinpoint crucial issues affecting the residents of our Health Care District, such as risk of disease and mortality.

The study helps us make informed decisions about the best places to focus our resources. This past year, we have met with leaders in the different local communities to share information from the study and identify ways we can collaborate to address many of the identified needs.

We are also advancing and expanding local health care through our strategic relationship with UCSF Health. This partnership enables us to bring health care experts into the community so residents are not required to travel away from home to seek academic-level care, which fulfills the strategic initiative of moving doctors and not patients. Our newest programs are the UCSF – Washington Cancer Center and the Washington Prenatal Diagnostic Center, which are both overseen by UCSF physicians.

From focusing on excellence, to assessing local health needs, to offering convenient access to leading-edge services, Washington Hospital Healthcare System continues to fulfill its covenant to provide the health care that the community needs.

Nancy Farber
Chief Executive Officer

From the Chief of Staff

n this new era of health care, the role of the medical staff leadership is complex and constantly adapting. The Washington Hospital medical staff is challenged with providing excellent medical care to our patients, while optimizing health care costs. Part of this involves participating in many new government-initiated core measures aimed at performance-based reimbursement. The medical staff leadership is examining the different options to change our medical staff bylaws and realigning our management structure to ensure the highest quality of care exists for Washington Hospital patients.

California is one of the few states that prohibit hospitals from employing doctors directly. While designed many years ago in response to an entirely different health care environment, this prohibition limits the health care models that can be implemented to provide patient care. Washington Hospital now contracts with physician groups to provide hospitalists, critical care intensivists and emergency room doctors. This is in addition to radiologists, pathologists, anesthesiologists, and cardiac surgeons who already are permitted to provide in-hospital services.

Significant efforts now focus on developing more collegial interactions between community-based physicians and the on-site medical staff in the Hospital. In addition, the medical environment is changing from the traditional doctor-patient model to one of a more diagnosis-oriented treatment approach.

Some changes have already been made. Hospitalists provide ongoing care for patients inside the Hospital in coordination with the patient's regular physician. The critical care intensivists are on-site 24/7 to manage critically ill patients. Having these physicians working on-site means they can respond immediately to changes in a patient's condition, which includes modifying treatment plans as test results become available.

The future is full of challenges, but the medical staff leadership is dedicated to optimizing the relationship between the medical staff and the Hospital in order to support and carry out the Washington Hospital Patient First Ethic.

Timothy Tsoi, MD

Chief of Staff, 2017-2019

Washington Hospital Medical Staff



Timothy Tsoi, MD Chief of Staff, 2017–2019 Washington Hospital Medical Staff

From the Board of Directors



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 I. Wallace

his next year, the Washington Hospital Healthcare System will celebrate 60 years of service to our community. We are looking forward to celebrating this milestone anniversary as we move toward the completion of one of the most significant construction projects — the Morris Hyman Critical Care Pavilion, since the Hospital opened in 1958.

During this past year, construction has continued on the Hyman Pavilion. The view of the new building emerging behind the Hospital is particularly exciting and rewarding for all of us who have worked so long and hard to bring this building to fruition.

The Hyman Pavilion is a particularly important addition to the Washington Hospital campus as it is key to our ability to provide expanded emergency and critical care to our patients. The building will house a long-needed larger emergency department, and a state-of-the-art intensive care unit and an advanced coronary care unit. The new emergency department will be approximately four times the size of the current one, which was built more than 50 years ago and intended to serve 16,000 patients a year. Currently, more than 53,000 patients annually arrive at our emergency room, second only to Highland Hospital in Oakland in terms of volume in Alameda County.

With this new, larger emergency department, we plan to apply to become a regional trauma center. This will mean residents who require trauma-level care can receive their care right here at our Hospital and will not have to leave their community.

The Hyman Pavilion will provide expanded space for intensive care and critical care patients, with 48 beds compared to the current 28-bed capacity. All the rooms will be private and larger in size. The building also will provide space for an additional 68 private medical/surgical beds and adjacent support space.

With a growing community, Washington Township Health Care District always considers strategic opportunities that could benefit district residents in the future. To that end, we purchased two office buildings adjacent to the Hospital campus earlier this year. The new property offers us a unique opportunity for expansion, future flexibility and is conveniently located adjacent to BART.

We are pleased that the acquisition of this property will enable us to meet the future needs of district residents as we move into our 60th year of serving all of you.

The Washington Township Health Care District Board of Directors

Finding Pain Relief

Specialized team supports doctors in managing patients' painful symptoms



Our Hospital's Pain Management Team, including (from left) Joseph Kwok, MD; Kelly Franco, MSN, FNP-C, CCRN; and Francis Wong, DO, work with doctors and patients to improve pain management.

ne of the main goals of medicine is to ease painful suffering. Pain can be a very complex condition, and it may take a variety of skills and techniques to achieve effective control and relief. That is why there is a medical specialty called Pain Management.

At Washington Hospital, we have a Pain Management Team to support hospitalized patients and their doctors in deciding how to best manage their pain. The team was formed in 2015 at the request of many physicians on the medical staff who saw it as an important need for their patients.

The team is made up of two doctors who are both board certified in anesthesiology and pain management and a nurse practitioner with special training in the field. They help to pinpoint the source of a patient's symptoms and develop the most effective treatment plan to relieve or control the pain.

"Pain management specialists are specifically trained to evaluate, diagnose and treat different types of pain," says Francis Wong, DO, medical director of the Hospital's Pain Management Program and a member of the team. "We have the specialized knowledge, skill and experience to treat complex painful conditions."

Dr. Wong, along with the other team members — Joseph Kwok, MD, and nurse practitioner Kelly Franco — collaborate with attending physicians to implement the treatment plan. This may involve pain medication or an interventional procedure, such as an injection.

For example, a hospitalized patient with sciatic back pain that has not responded to more conservative treatment like physical therapy or medication may get relief from an injection of steroids into the space around the spine. This is called an epidural. Dr. Wong and Dr. Kwok are both skilled in giving interventional injections, which can provide short term pain relief.

"At Washington Hospital, our focus is to provide a balanced multi-modal pain treatment plan that is individualized to each patient. We rely on non-addictive medications and modalities for treatment of chronic pain while also aiming to reduce the patient's dependence on potentially addictive opioids," adds Dr. Wong.

Joint Replacement Dream Team

Visionary joint replacement program helps people stay vital and active

t Washington Hospital's Institute for Joint Restoration and Research, our ultimate goal is to help people enjoy the most active and pain-free lifestyle possible. Today, as one of the leading joint replacement programs in the country, we never stop working to achieve the best treatment outcome and care experience for patients.

In our state-of-the-art facility, the Institute's Co-medical Directors John Dearborn, MD, and Alexander Sah, MD, lead an experienced group of therapists and nurses who are specially trained in joint replacement. The team is dedicated to providing quality care through best practices and standardized protocols. At the same time, they make every effort to tailor the right care for each individual patient.

Both highly regarded in their field, the doctors also perform evidence-based research to find more ways to improve the quality and outcomes of joint replacement. They frequently present the results of their groundbreaking studies at national forums and in medical journals.

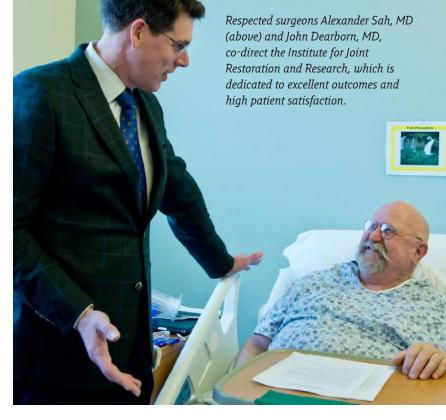
Our patients reap the benefits of this visionary approach to quality and excellence. For example, nearly all patients are able to return home within one day of their procedure. Fewer of our patients experience post-surgical complications compared with other programs in the region and nationally. And, according to independent patient satisfaction surveys, we are ranked in the top 1 percent in the nation for overall joint replacement experience.

We also continue to stay at the forefront of the latest developments in joint replacement. We have a highly successful partial knee replacement program and recently launched an outpatient knee replacement program, which enables qualified patients to return home on the day of their procedure.

The Institute's success has led to phenomenal growth since we first started our joint replacement program in

1998. Today, more people throughout California and beyond are turning to us for help in pursuing their dream of living with vitality and enjoying life to the fullest.





The Best of Both Worlds

Teaming up with UCSF Health brings more top-level care to our community



ow in its fourth year, the growing relationship between Washington Hospital and renowned UCSF Health is bringing the best of both health care worlds to our community. While staying in the comfort and convenience of their own surroundings, local residents have direct, easy access to some of the most sophisticated, academic-level health care services available anywhere.

This includes neonatal, perinatal and pediatric care; genetics counseling; cardiovascular surgery; advanced heart failure and liver failure transplant services; and local access to many of UCSF Health's specialized doctors. More is on the horizon.

Early this year, the organizations took the next big step by opening the UCSF – Washington Cancer Center. The program offers the latest cancer research, technology and treatment in a comforting and convenient environment. Services also include genetic counseling and infusion care in the Sandy Amos, RN, Infusion Center.

The new Cancer Center is led by Co-medical Directors and UCSF Health cancer specialists David Lee, MD, and Bogdan Eftimie, MD. Both doctors are well-established and respected board-certified oncologists and hematologists.

Recognized for outstanding achievement by the American College of Surgeons for the past nine years, Washington Hospital has long been known for consistently providing high-quality, patient-centered cancer care. Partnering with UCSF Health, one of the top cancer care programs in the U.S. and around the world, Washington Hospital is able to offer the community a variety of cancer-related specialties, many not previously available in our area.

Residents of Washington Township Health Care District can now consult UCSF Health's top-level cancer specialists, including some of the world's best scientific minds, right here in our community. Additional advanced cancer care services will soon be available locally, including expanded radiation oncology, immunotherapy and an array of clinical trials.

How has this relationship between a community hospital and a large academic medical center progressed so successfully? Echoing Washington Hospital's longstanding Patient First Ethic, it is because both health care systems are totally committed to putting patients first.

Taking the Pulse of Our Community

Study of local health issues helps us develop the services you need



ashington Hospital is committed to the health of our community. Every three years we participate in a study that takes the health needs "pulse" of people who live and work here. This helps pinpoint health disparities, find more ways to treat and prevent chronic disease, and discover opportunities for healthier living.

Completed earlier this year, the 2016 Community Health Needs Assessment is the latest version of this wide-ranging survey of people in our service area — Fremont, Newark, Union City, south Hayward, and unincorporated Sunol. It is part of a larger assessment conducted by all nonprofit hospitals in Alameda County. Washington Hospital uses the information gleaned from the study to help create programs and services targeted to meet the identified needs.

"We are proud of the programs we've created over the years based on the results of these assessments," says Lucy Hernandez, the Hospital's Community Outreach Project manager. "It's very exciting when we turn the findings of the study into real services that help people."

Examples of Washington Hospital programs that have been developed based on survey results include the Health Insurance Information Service, Washington on Wheels

(WOW) Mobile Clinic, low-dose CT scanning for lung cancer, and most recently, the new UCSF - Washington Cancer Center (see page 8).

The 2016 Community Health Needs Assessment report identified seven major areas of need in the community: asthma; behavioral health; cancer; cardiovascular and stroke; maternal child health; obesity, diabetes, healthy living and active living; and violence and injury prevention.

Based on 2016 survey findings, the Hospital developed a comprehensive implementation plan addressing all seven areas. Hernandez reports of the seven indicators, behavioral health "stood out" from the others.

"Findings indicate many people don't see behavioral health problems as a public health concern or disease," she explains.

In response to this issue, the Hospital has developed a free comprehensive eight-part Mental Health Education series planned for 2018.

To find out more about the 2016 Community Health Needs Assessment and to read the complete implementation plan, go to whhs.com/About/Community-Connection and click on Community Needs Assessment.

Saving a Powerful Resource

Hospital team urges doctors and patients to use antibiotics wisely



s a community, we have learned about conservation—saving water, energy and other essential resources, so they will be available to us when we need them in the future. In health care, this same principle applies to a vitally important strategy called antibiotic stewardship.

At Washington Hospital, we have a multidisciplinary Antibiotic Stewardship Committee. Their mission is to support and educate doctors, patients and other clinicians on ways to conserve antibiotics and use them judiciously, so they will be more effective in fighting disease.

"We are seeing growing resistance to even some of the strongest antibiotics that we have depended on to fight strep, staph, sexually transmitted diseases, and other infections," says infectious disease specialist Dianne Martin, MD, who leads the committee. "This is very worrisome."

The goal of the committee is to ensure that antibiotics are used only when they are truly needed and for no longer than necessary. They should never be used for a viral infection because antibiotics are not effective in treating viruses.

Doctors and patients should also take care when using antibiotics because they can have side effects, some of which

are potentially fatal. Examples of reactions include allergic shock, called anaphylaxis, and diarrhea due to overgrowth of the bacteria Clostridium difficile or "C. diff."

The committee uses various ways to give doctors the information they need to make the best decisions about antibiotic use. One strategy is called an "antibiogram," an annual report of all the antibiotics prescribed in the Hospital and the resistance or susceptibility that specific bacteria have had to each drug. Doctors can refer to the report to

see which antibiotics have been most effective against certain bacteria.

"Antibiotics are truly 'miracle drugs," emphasizes Dr. Martin. "But, they will only be effective if we use them wisely. This will help ensure that these valuable and potentially life-saving resources continue to be available to us in the future."

Another way to help make sure antibiotics stay effective is to prevent infections in the first place. Remember to wash your hands frequently — including before meals and after using the restroom. And, wash fruits and vegetables before eating or cooking them. Also, keep your vaccinations up to date. If you haven't done so already, now is a good time to get your flu shot!

When Collaboration Is Critical

New team approach and great role for families boost quality of ICU care



n Washington Hospital's intensive care unit (ICU), specially trained doctors, nurses and other health professionals closely monitor and support patients battling cardiac arrest, stroke, severe trauma and other life-threatening conditions.

Since 2008, our ICU has been on a path to a new care model focused on providing the right care at exactly the right moment to achieve the best possible outcome for the patient. It's called an intensivist-directed ICU.

In this highly collaborative approach, a critical care intensivist leads a multidisciplinary team in caring for the patient. Intensivists are doctors who have received extra training in the treatment of very ill patients. At Washington Hospital, they are available 24/7.

The team includes a critical care nurse; pharmacist; registered dietitian; respiratory, physical and occupational therapists; and a chaplain. The patient and family are also vitally important members. A case management nurse is available to address the patient's psychosocial needs.

Active participation of families is essential to caring for critically ill patients. When family members are part of the care team, respect and trust are nurtured. In the new ICU model, strategies include encouraging families to take part in twice-daily patient rounding, as well as frequent team meetings and conferences.

In fall 2016, we fully adopted the intensivist-directed ICU model at Washington Hospital. Now, care for all ICU patients is directed by an intensivist. Care coordination and effective communication lie at the heart of this concept.

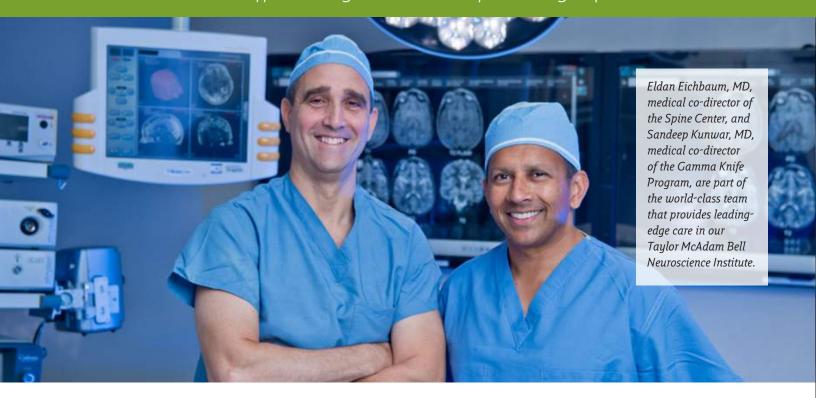
"It's a more patient-centered approach to ICU care," explains Carmencita Agcaoili, MD, director of the Intensivist Program. "And we are already seeing positive results."

As of March 2017, quality measures in the ICU show measurable improvement. Outcomes include lower self extubations, reintubations, as well as continued fewer ventilator days. Also, the rate of central-line associated bloodstream infections has been lower than predicted, despite the fact that patients in our ICU have tended to be sicker.

For more information about the multidisciplinary team approach in the ICU, see page 19 about how our compliance with the Society of Critical Care Medicine's A-F "bundle" has improved quality of care.

Neuroscience 'Gem'

World-class services offer the right treatment for the right patient



ashington Hospital's extensive array of highquality health care services includes leading edge specialty programs that rival those of the finest academic medical centers in the country. One of our "gems" is the Taylor McAdam Bell Neuroscience Institute.

The Institute's world-class medical teams use sophisticated technologies and some of the most advanced and effective, least invasive techniques to treat a wide range of neurological problems, like strokes, brain tumors, painful spinal conditions and more. This means our community has fast, convenient access to some of the most sophisticated neurological care available anywhere.

With our broad range of services, we aren't limited in the care we offer. Our patients can be confident they'll receive the most effective treatment for their particular condition.

Our **Stroke Program** is one of the most comprehensive, innovative and effective services of its kind. Using the latest technology, the expert Stroke Team is committed to fast, effective intervention to achieve the best possible outcome. This is one reason more of our stroke patients survive and return to normal life sooner.

Speed is also essential in our growing Cerebrovascular and Neurointerventional Neurosurgery Program for brain aneurysms and other serious vascular conditions. Based on their diagnosis, patients can be transported to Washington Hospital using our "Code Brain" Pathway. This connects them quickly with Jeffrey Thomas, MD, one of the few neurosurgeons in the country who regularly performs the two most effective surgical repairs of a brain aneurysm.

In our Endoscopic, Skull Base, Pituitary and Brain Tumor Center, an internationally recognized team performs a range of minimally invasive treatments for cancerous and non-cancerous tumors and other conditions. They use powerful, noninvasive technologies like the Gamma Knife Perfexion® to offer patients the most effective treatment, often on an outpatient basis.

To relieve painful, debilitating back and neck problems, our **Spine Center** surgeons perform procedures ranging from traditional open surgery to the latest minimally invasive techniques.

Watch for the 2018 opening of the Morris Hyman Critical Care Pavilion on the Washington Hospital campus. The Pavilion will include a larger, more advanced Emergency Department and state-of-the-art intensive care unit with dedicated beds for stroke and neurosurgery patients.

Expert Care Close to Home

Level II nursery offers top care for babies, comfort for moms and dads



(from left) A mother and toddler, who received care as a premature infant in our Special Care Nursery (SCN), join Editha Aninao, MN, RN (center right) and Nahid Rostami, MD, associate medical director, at last summer's reunion of SCN children and families.

ne sunny afternoon last summer, a very special party was held at Washington Hospital. It was the reunion of parents and babies who were cared for at the Washington Special Care Nursery. A product of our affiliation with UCSF Benioff Children's Hospitals, the 11-bed, special care nursery opened its doors in early 2014.

"We were really excited to have a reunion and to see so many happy, growing babies," says neonatologist James McGuire, MD, medical director of the Washington Special Care Nursery. "Families are so glad they were able to keep their newborns close to home during the first critical days and weeks of their young lives."

The nursery is staffed and equipped to provide specialized, round-the-clock medical care for babies born up to two months before their due date, or 32 weeks of pregnancy. Besides Dr. McGuire, there are two other UCSF neonatologists: Nahid Rostami, MD, the nursery's associate medical director, and Jessica Alsofrom, MD, who joined the unit this summer.

The doctors are available at the Hospital or on-call 24/7. As extra backup, UCSF pediatric hospitalists are always on-site at Washington Hospital. Specially trained neonatal nurses, many with extensive experience taking care of sick babies, and respiratory therapists are also part of the care team.

"The collaboration with UCSF means we can consult quickly and easily with their many pediatric subspecialists in cardiology, gastroenterology, neurology and more, without having to send the baby out of the community," explains Dr. Rostami.

Babies who are born more than two months before their due date, or who are especially sick or fragile, are stabilized by the Special Care Nursery's neonatal specialists and then immediately transferred to UCSF Benioff Children's Hospital's Level III regional intensive care nursery. After babies have progressed, they can return to the Washington Special Care Nursery until they are ready to go home.



TRANSFORMATIONAL LEADERSHIP

From the Chief Nursing Officer

For many, the image of a nurse is one of a lone individual standing by the bedside with total dedication to their patient's health and well-being. Although we often see this image here, I believe the *true* essence of caring, effective, professional nursing at Washington Hospital is teamwork.

As a hospital that has twice received the highly esteemed nursing Magnet® designation from the American Nurses Credentialing Center, we are exceedingly proud of our nurses. But, Magnet is more than a designation. It is a philosophy and a mindset shared by all our nurses and supported by our administration. It ensures that our nurses work well with each other, and with doctors and other disciplines, to achieve the best possible outcomes for our patients.

Washington Hospital nurses also know the value of patient-centered care and the importance of teamwork with patients and families. We see this in their absolute commitment to our long-standing Patient First Ethic, which guides their every decision and action.

We also know that the strength of every team depends on the individual commitment of each nurse to continue developing their own knowledge, skills and strengths. As part of our Magnet status, we encourage and celebrate leadership, innovation, higher education, exemplary professional practice and other attributes that contribute to nursing excellence.

Magnet is the gold standard of nursing. But, we have not earned this status or delivered such a consistently high level of quality care and service by ourselves. It takes the entire team at Washington Hospital working together and speaking with one voice, including dietary staff, housekeepers, doctors, volunteers, professional staff and many others. It truly takes a village.

I am honored to be part of the exceptional group of nurses who demonstrate their individual and team commitment to excellence every day at Washington Hospital.

Stephanie Williams, MHA, RN, CPHQ, NE-BC

Associate Administrator Chief Nursing Officer



Stephanie Williams, MHA, RN, CPHQ, NE-BC, Associate Administrator, Chief Nursing Officer

Transformational Leadership:

Nurses lead the way to highly coordinated care in new ED observation unit

> Our new Emergency Department Observation Unit is a nurse-led effort in collaboration with doctors and other disciplines, including (from left) Amardeep Angroola, MD; Hellai Momen, BSN, RN, case manager; Noemi Gonzalves, BSN, RN, assistant nurse manager; and Frank Zamora, BSN, RN.

Observation KN OBSERVATIO

ast January 17 marked the launch of the Emergency Department's Observation Unit on 3 North at Washington Hospital. Before the new unit was open, patients under observation were scattered throughout the Hospital's nursing units. Patients are admitted under observation status to complete additional diagnostic testing or treatment, which helps determine if they can be

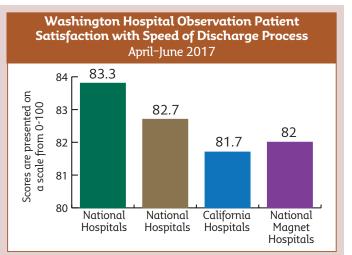
discharged home or should be admitted to the Hospital. Coordinating the care of observation patients requires special attention to on-time ordering, scheduling and interpretation of tests.

The new unit was created to centralize observation patients in one place. The goal is to improve care coordination and timely discharge. The nursing team leading the endeavor

was carefully selected. It includes case managers, nursing leadership, charge nurses and clinical nurses.

Noemi Gonzalves, BSN, RN, leads the nursing management of the unit. She focuses on teamwork and collaboration

between physicians, consultants and ancillary departments. She is assisted by Menchu Cruz, BSN, RN, staff nurse III and charge nurse, who coordinates direct nursing care and mentors the new grads on the unit. Hellai Momen, BSN, RN, case manager, is pivotal in the process of first determining whether patients meet the criteria for observation status, and then coordinating the discharge process.



The unit's goal is for patients to stay less than 24 hours. This requires continuous monitoring of physician orders, coordination with patients, families and other departments, as well as a rapid discharge process.

The unit's nurse leaders collaborate with interdisciplinary teams to provide the right care in the right place at the right time.

Through their efforts, the experience of patients under observation has improved. The highly coordinated care is resulting in a reduced length of stay and greater patient satisfaction with the speed of the discharge process.



Newly graduated nurses Danny Malepeai, BSN, RN (left) and Alysaa Yock, BSN, RN, practice their communications and teamwork skills as part of our TeamSTEPPS new grad support and training program.

Professional Development:

Improving RN new graduate communication skills with TeamSTEPPS

reparing new graduate registered nurses for their transition to clinical practice has been a priority for Washington Hospital for more than 20 years. The registered nurse is a pivotal member of the health care team, coordinating the timely communication of information between other members of the patient's care team. Our program uses a proven curriculum to develop and enhance the skills nurses need to successfully carry out their new professional role.

Recognizing that communication skills are essential to the successful coordination of patient care, Washington Hospital implemented TeamSTEPPS (Team Strategies and Tools to Enhance Performance and Patient Safety), a patient safety initiative in the Emergency Department and Maternal Child Health. TeamSTEPPS is an evidenced-based set of teamwork tools aimed at achieving the best possible patient outcomes through improved communication and collaboration among health care professionals.

When Sam Avila, MSN, RN, our Hospital's director of medical-surgical education, went through TeamSTEPPS

training, she immediately recognized an opportunity for our new grads. The program gives new nurses the tools to increase their knowledge of teamwork, while also building their confidence about communicating and participating with the health care team.

TeamSTEPPS was integrated into new grad RN training at Washington Hospital in April 2016. The two-part training starts by reviewing available tools for team communication with a focus on transferring information to physicians and other members of the health care team. The nurses practice these skills with fellow new grads. The second session is an opportunity for the nurses to receive feedback and coaching about their experiences implementing the newly acquired communication and teamwork tools.

To date, three new grad cohorts have benefited from this education, with positive feedback from the new grads, their preceptors and charge nurses. This important initiative will continue to be a component of our new grad program.





(from left) Nurses Adelita Tinoco, PhD, MS, CNS, RN; Carmen Manosca, BSN, RN-BC; and Mary Abigail Dumaliq, BSN, RN (far right) perform frequent assessments of a patient's pressure ulcer as part of our commitment to continuously improving patient care.

Quality Care: When nurses drive patient outcomes

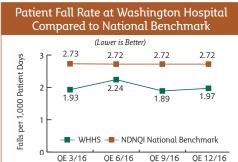
s a Magnet-recognized facility, Washington Hospital is focused on ensuring the highest level of quality and safety for our patients. Nationally recognized nurse-sensitive indicators are used as a barometer of quality of patient care. For several years, we have collected data for internal tracking and for various national quality databases. As part of our commitment to continuously improving patient care, we compare our performance against national benchmarks for nurse related patient outcomes.

Nurse-sensitive indicators are a set of standardized patient outcomes shown to improve with quality nursing intervention and care. The indicators include outcomes like patient falls or hospital-acquired pressure ulcers.

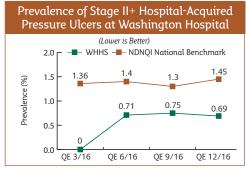
We monitor our nurse-sensitive indicators and report frequently at multiple forums, from the unit level at nursing unit-based council meetings to the board of director meetings, which are open to the community. The trends we identify help to inform our clinical practice, organizational decision-making and quality improvement initiatives. Quality improvement strategies include:

- Assessing patients upon admission
- Nurse rounding hourly on every inpatient unit
- Educating and involving patients and families in their care
- Infection prevention through a team-based approach

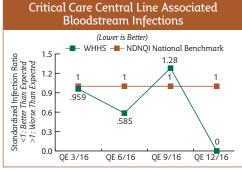
As a result of our quality improvement initiatives and patient-centric nursing approach, we outperformed national hospitals on every nurse-sensitive indicator for nearly all of calendar year 2016.



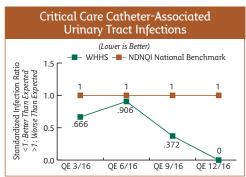
We had a lower inpatient fall rate than the national benchmark throughout calendar year 2016.



Washington Hospital outperformed other national hospitals with a lower prevalence of stage II and above hospital-acquired pressure ulcers during calendar year 2016.



With the implementation of nurse-led Infection prevention quality initiatives in Critical Care, we had lower infection rates than predicted (per the National Healthcare Safety Network) for 3 out of 4 quarters of calendar year 2016.



Our Critical Care Unit had a decrease in catheter-associated urinary tract infections and a lower rate of infections than predicted (according to the National Healthcare Safety Network) throughout calendar year 2016.

NDNQI = National Database of Nursing Quality Indicators NHSN = National Healthcare Safety Network, part of the U.S. Centers for Disease Control (CDC). It is the nation's most widely used healthcare-associated infection (HAI) tracking system.



Our Stroke Team includes (from left) Lizzette Baradi, CPT; Dave Freiheit, MD; Ravinder Kahlon, MD; Charlene Masangkay-Samson, BSN, RN; Melissa Reyes, MSN, RN, NVRN-BC; Prabhjot S. Khalsa, MD; Lisa Villanueva, MSN, RN, CEN; Tashan Arrivas, RN, CNRN, SCRN; Charan Singh, MD; Betty Goodwin, BSN, RN, CEN; and Nicolas Salugsugan, RN.

Target Stroke and Code Neuro: Making stroke response faster and smarter

ashington Hospital's comprehensive approach to caring for stroke patients shows our commitment to the Patient First Ethic. As a Joint Commission-certified and Alameda County-designated Primary Stroke Center, we are dedicated to improving stroke care according to the American Heart Association's *Get With The Guidelines* (GWTG) for stroke.

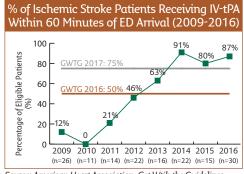
The main goal of the guidelines is to shorten the time between stroke symptoms and specific treatment. The sooner treatment is started, the better chance brain cells can be saved. Every second counts. That is why we implemented Code Neuro in 2016.

When a patient comes to the Emergency Department (ED) with symptoms of a stroke, Code Neuro is activated. An interprofessional team, including a stroke nurse, ED physician, lab and radiology staff, and others go into action.

The team coordinates the necessary testing to determine the cause of the patient's symptoms. Results are obtained as quickly as possible and communicated to the neurologist and ED physician, who will determine the patient's eligibility for the clot-busting medication tPA.

The GWTG goal for administering tPA is 60 minutes from time of patient arrival in 75 percent of cases. Our Hospital has shown significant improvement in patients with ischemic stroke receiving tPA within the 60-minute goal and has exceeded national recommendations.

For many years, Washington Hospital's Stroke Program has received the Performance Achievement Award for Target Stroke from the American Heart Association.



Source: American Heart Association, Get Wtih the Guidelines Program (GWTG).

Our focus on implementing these key strategies to meet the Target Stroke goal has resulted in more efficient treatment and improved outcomes for our patients. If people in Washington Township Health Care District experience stroke symptoms, they can feel confident that Washington Hospital is the smart choice.



Members of our ICU Liberation Collaborative team include (from left) Sandi Lim, MS, OTR/L; Laura Yastishak, DPT, PT, GCS; Victor Davis, RT; Peter Liang, PharmD, BCPS; Maria Nunes, MSN, RN, FNP; Carmencita Agcaoili, MD, director of the Intensivist Program; Kathy Weinberg, MSN, RN, CCNS, CCRN; Elvie Ballar, BSN, RN, CCRN, CNML; and Alisa Curry, DPT, PT, GTC, GCS.

Exemplary Professional Practice: Improving care for critical care patients

ashington Hospital is committed to giving ICU patients the best possible outcome and improving the experience for their families. Our Hospital's multidisciplinary Critical Care Team, was selected to be one of 69 teams across the nation participating in the ICU Liberation Collaborative sponsored by the Society of Critical Care Medicine (SCCM) and the Gordon and Betty Moore Foundation.

The purpose of the collaborative was to improve outcomes for ICU patients by decreasing mechanical ventilation, increasing mobility and strength, and growing family involvement in the plan of care.

The project involved a set of evidence-based interventions called the ABCDEF bundle. The interventions are related to assessing and treating patient pain; checking patients on mechanical ventilation; choosing drugs, including analgesics and sedatives; assessing for delirium; early exercise and mobility; and family engagement.

Our team was led by Carmencita Agcaoili, MD, director of the Intensivist Program, Kathy Weinberg, RN, critical care clinical nurse specialist, and Alisa Curry, PT, coordinator

of rehabilitation clinical programs. As a Collaborative participant, the team achieved the following improvements:

- Increased patient rounding twice daily, which is led by Intensivists. Rounds include the elements of the bundle. Patients and families are invited to participate.
- Developed a pain assessment tool specifically for critically ill patients to increase caregiver ability to treat pain in patients who cannot tell the nurse about their pain.
- Created a program to increase exercise and mobility for ICU patients that guides staff in assessing the readiness of patients, including those on mechanical ventilation, to move or walk.

As a result of these interventions, our ICU patients are tending to spend less time in critical care and to be less debilitated when they go home.

At the culmination of the ICU Liberation Collaborative, Washington Hospital's team was recognized as the top-performing community hospital in the Western Region and for achieving a significant increase in early patient mobility.

Certified nurses (from left)
Donna Burdusis, BSN, RN,
ONC; Ginalyn Nacnac, BSN,
RN; Carolyn Crosby, BSN,
RN; Winston Asprec, BSN, RN,
BC-CV; Laurie Neel, BSN, RN,
CCRN; Mary Valerio, BSN, RN,
CCRN; David Steffeck, RN;
Jennifer Nguyen, RN, CCRN,
PCCN; Laurie Miller, RN,
CPAN; and Yvonne EugenioCrum, BSN, RN, are among
many at our Hospital who
have earned advanced degrees
and certifications.



The Value of Advanced Nursing Education: What it means for nurses and patients

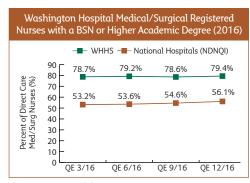
t Washington Hospital, we honor and recognize our certified nurses and those who pursue higher education. For nurses, earning advanced academic degrees and certifications fulfills their personal and professional goals. These achievements also benefit our patients.

Nurses who have taken educational steps above and beyond have demonstrated the experience, knowledge and skills in their specialty to help them care for our patients with complex conditions. In turn, patients receive quality care and education from nurses with extensive knowledge and skills.

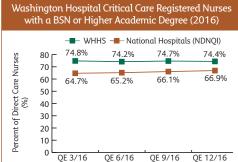
Through these accomplishments, nurses also validate their specialized knowledge and enhance their credibility with colleagues and other members of the health care team.

They often serve in leadership roles and actively participate in initiatives to improve patient care and outcomes. Consistent with Washington Hospital's Magnet® designation, our goal is that 80 percent of our nurses will have a Bachelor of Science in nursing (BSN) or higher degree by the year 2020.

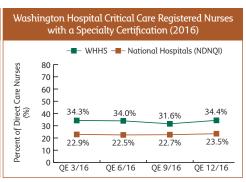
Washington Hospital nurses are well prepared to be clinical experts who serve as resources, providing education to patients and families about maintaining their health. Our Hospital supports its nurses in achieving their goals and advancing their professional growth through tuition reimbursement, scholarships, mentoring, preceptorship placements and flexible scheduling. In these ways, the Hospital and our nurses collaborate to continue fulfilling our Mission and Patient First Ethic.



79.4 percent of direct care nurses in our Medical/Surgical units have met this standard, which far exceeds the national benchmark.



74.4 percent of nurses in our Critical Care units have earned BSN or higher academic degrees, which is above the national benchmark.



34.4 percent of our Critical Care nurses have a specialty certification, exceeding the national benchmark.

NDNQI = National Database of Nursing Quality Indicators



Exemplary Practice: Recognizing nurse excellence

hroughout the organization, Washington Hospital nurses make a difference for patients and their families by delivering compassionate care that puts patients at the center. Our clinical nurses see their daily work as an opportunity to touch the lives of others with sensitivity, patience, caring and kindness. Each year, our Hospital proudly bestows the DAISY and Nurse of the Year Awards to recognize nurses for the extraordinary work they do every day.

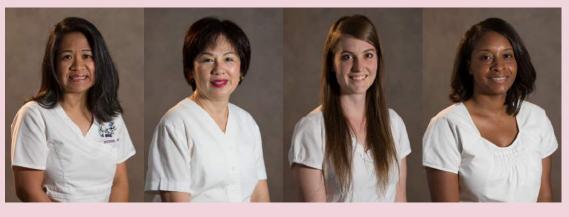
The DAISY Award was founded in 1999 to memorialize J. Patrick Barnes. His family created

the DAISY Foundation to recognize and thank nurses around the world for the contributions they make to their patients' care. Washington Hospital has participated in the DAISY Award program since 2005, when one of our patients and his family were particularly impressed with the excellent nursing care they received here.



This year's DAISY award recipients are (from left) Yvonne Eugenio-Crum, BSN, RN, and Jenner Flores, BSN, RN.

Patients and colleagues nominate nurses for the DAISY Award. It recognizes an extraordinary nurse who demonstrates compassion and kindness in his or her every day work. DAISY nurses practice at the highest level of clinical excellence, foster teamwork and uphold a high standard of nursing care.



Nurse of the Year awards were given to (from left) Yvonne Eugenio-Crum, BSN, RN; Marita Lim-Mendioro, RN; Katie Gorman, BSN, RN; and Janell Kelley, BSN, RN.

Recipients of the Nurse of the Year Award are nominated by their peers for exemplary clinical skills, leadership and professionalism. Each is dedicated to our Hospital's Mission and Patient First Fthic.

Selected by the medical staff and recognized at an annual banquet, Nurses of the Year demonstrate flexibility and

versatility. They often shine in direct patient care and supervisory roles. They also encourage change by leading Hospital committees and participating in nursing peer review. Nurses of the Year show a strong commitment to patient safety and improved patient outcomes.

Honoring Our 'Employees of the Month'

Congratulations and thank you to this year's recipients

n Washington Hospital Healthcare System, our employees are essential and valued members of the health care team. Each month, we recognize an individual on our staff for their exceptional contributions in the areas of service to patients and visitors, teamwork with others, and creativity that helps to improve the organization.

We are proud to honor the following employees who were named "Employee of the Month" during FY 2016-17.



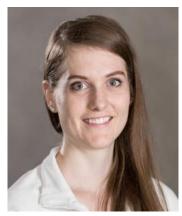
Rochelle Evans, Medical Imaging Services – July 2016



Victor Salazar, Information Services August 2016



Victoria Cayetano, Materials Management - September 2016



Katie Gorman, Nursing Services October 2016



Raj Sandhu, Clinical Laboratory November 2016



Zach Heald, Facilities Services December 2016



Kristi Caracapa, Health Insurance Information Services – January 2017



Gina Orozco, Environmental Services – February 2017



Wubnesh Yelma, Patient Care Services – March 2017



Nari Chavis, Financial Planning and Analysis – April 2017



Ellen Strack, Clinical Laboratory May 2017



Gloria Bonilla, General Accounting June 2017

Working Together to Control Diabetes

Expert teams offer specialized care for hospitalized patients



iabetes is a serious health condition affecting more than one in 10 residents in Alameda County. When patients with diabetes are ill, the disease can fluctuate greatly, so it is important that their care be closely managed.

At Washington Hospital, we are always working to deliver safe, efficient, excellent diabetes care. Our staff includes nurses and doctors who specialize in diabetes treatment. Other team members include diabetes nurse educators and clinical pharmacists. They follow best practices in diabetes care and share helpful educational materials with patients and families.

Our highly trained nurses, who are on the front lines of bedside care, assess patients for diabetes when they are admitted. The inpatient diabetes nurse educator collaborates with the nursing staff. She meets with patients and families before they leave the hospital to ensure that they have the knowledge, skills and supplies to manage their own or their loved one's diabetes.

A clinical pharmacist is assigned to each patient care unit to promote communication among all members of the multidisciplinary diabetes care team. When team members work closely together, dosages and other care can be adjusted quickly, if needed. This can lead to a lower risk of complications for our patients.

Led by endocrinologist Prasad Katta, MD, our Diabetes Advisory Group is another multidisciplinary team that monitors outcomes of diabetes patients throughout the Hospital. To help ensure that we are providing the best care to our patients, they compare our outcomes with internal and national trends and benchmarks.

In caring for our inpatients with diabetes, we use data from blood glucose monitoring at the bedside. Glucose monitoring in the hospital has come a long way, and we are on the forefront with leading edge equipment. Our glucose meters transfer data wirelessly into the patient's secure electronic health record. This rapid flow of up-to-date information enables the diabetes care team to make fast, accurate treatment decisions.

Making Gains Against Concussion

Sports Medicine program adds technology and therapy to improve results for athletes



n recent years, the problem of sports-related concussions has attracted a lot of public concern. The fact is, our knowledge and understanding of concussion is still evolving.

Washington Hospital Healthcare System offers a full spectrum of care for sports-related concussions through the Sports Medicine specialists at Washington Township Medical Foundation (WTMF). Recently, the program expanded its capabilities by adding a unique assessment tool and developing a partnership with physical therapy at the Washington Outpatient Rehabilitation Center (WORC).

Fast, accurate diagnosis of concussion and tracking the progress of recovery have long been a challenge. Now, WTMF physicians are using a portable technology called EYE-SYNC to quickly identify and assess concussions and monitor recovery more accurately.

"EYE-SYNC is a virtual reality headset programmed to detect visual tracking abnormalities by measuring how well the eye synchronizes to a precisely moving target," explains Steven Zonner, DO, WTMF Sports Medicine specialist. "It can quickly help identify whether a person has one of the two most common types of concussion — oculomotor or vestibular."

An oculomotor concussion causes vision problems, while a vestibular concussion mainly affects the body's balance system, as well as vision. A thorough assessment and the right treatment plan are essential to successful recovery from concussion. With vestibular concussion, research has shown specific physical therapy exercises can improve the outcome.

Sharmi Mukherjee, PT, DPT, director of outpatient physical therapy at WORC, is skilled in creating customized treatment plans for dizziness and other balance issues related to vestibular concussion. Mukherjee and WTMF doctors often collaborate in treating athletes who have suffered this type of concussion.

Once a treatment plan has been developed, athletes work closely with physical therapists to track their progress. Physical therapists use the EYE-SYNC to monitor recovery by checking to see if there is improvement in the patient's ability to visually track the moving target.

Washington Hospital and WTMF doctors are committed to improving the diagnosis and treatment of concussions, with a special focus on young athletes in our community. Now, when the doctors serve as athletic trainers at local high school football games, the silver case containing the EYE-SYNC is often at their side on the field.

Growing into the Future

Larger, state-of-the-art critical care facility advances toward completion



n Washington Hospital Healthcare System, we are always mindful of the future and how, with your support, we will continue to meet the growing and changing needs of our community. Right now, big changes on our main campus are a visible demonstration of an important way we are fulfilling this responsibility.

Directly behind the main Hospital, the 223,000-square-foot Morris Hyman Critical Care Pavilion is moving closer to its estimated completion date in June 2018. When the doors open, this facility — which includes three stories and a fourth floor underground — will answer our community's need for expanded emergency and critical care services. It will be one of the most advanced of its kind in the Bay Area.

The building's exterior shell is now complete, with the electrical system tied to the campus power plant and elevators installed. Every day, the construction site continues to be a hub of activity, as more and more of the inner work is being completed. Inside, the Emergency Department is four times larger than our current ED. And, there are many more

rooms for intensive care and other critical care patients, plus 68 medical/surgical rooms — all private and more spacious.

As we anticipate the opening of the Hyman Pavilion and the major step forward it represents for our Hospital and

community, we are looking even further ahead. Consistent with our long-term, strategic plan, we have purchased an 8.5-acre property with two

Although not required by law, the Independent Citizens' **Bond Oversight Committee** demonstrates the Health Care District's commitment to transparency.

buildings at the corner of Civic Center Drive and Walnut Avenue in Fremont. Conveniently located next to the Hospital campus and close to BART, this property offers opportunities and flexibility so we can continue responding to our community's future health care needs.

For more information about facilities or construction, please visit whhs.com/about or contact Washington Hospital Community Relations at (510) 791-3417.

Teaming Up With Our Community

Foundation supports local health care excellence

he Washington Hospital Healthcare Foundation leads the way in teaming up with the community to grow support for medical services and technologies. In 2016, the Foundation initiated the Critical Care Campaign, a fundraising effort to secure major gifts and pledges for equipment in the Morris Hyman Critical Care Pavilion.

This year's 31st annual Top Hat Dinner Dance brought together 630 guests who celebrated the return of autumn during an evening of socializing, dining and dancing. Held on October 14,



the gala raised \$182,000 toward the purchase of a state-of-the-art, new linear accelerator for Radiation Oncology Center (ROC) patients. Chairs for the event were William Dugoni, MD, medical director of the Washington Women's Center; Gary Charland, JD, president and CEO of Masonic Homes of California; and Debbie Jackson, president of the Washington Hospital Service League.

During the winter holiday season in 2016, the Trees of Angels once again lit up local city centers and shopping areas in southern Alameda County. The traditional kickoff was at the

Bernardin Family McDonalds in Fremont, followed by tree lightings at the City Hall in Newark and Union City, and the Washington West building next to the Hospital. The heartwarming Trees of Angels raised \$8,400 for local hospice care.

In January 2017, the Foundation welcomed Helen Kennedy as its new president.

"My thanks to outgoing President Rod Silveira for his two years of excellent leadership," said Kennedy. "I'm excited to have the opportunity to do my part to develop our community's connection with Washington Hospital."

The 32nd annual Gene Angelo Pessagno golf tournament was held last spring on April 24, with 178 golfers teeing off at Castlewood Country Club. In the evening, more than 200 attended the awards banquet. Lamar Henson repeated his role as tournament chairman. The popular event raised \$100,000 for the Hospital's Surgical Services fund. Congratulations to the team from Fremont Bank, who won the Corporate Challenge Cup again this year.

To learn more about the Washington Hospital Healthcare Foundation, or to make a charitable donation, please call (510) 791-3428 or email foundation@whhs.com.

Volunteers are essential to our health care team

he volunteers of the Washington Hospital Service League work closely with our Hospital's staff nearly every day to offer care and support for patients, families and visitors. They also raise and donate funds for Healthcare System programs. This year, the Service League gave \$60,000 to help purchase a bedside SonoSite ultrasound machine for the Emergency Department. This new piece of equipment gives clinicians enhanced guided capability to evaluate, diagnose and treat critically ill patients in an expeditious manner, which includes ultrasound-guided IV placement on people who would otherwise require multiple IV placement attempts.

In FY 2017, our volunteers gave a total of 35,223 hours, adding their personal touch to a myriad of departments and units throughout the Hospital. For example, volunteers manage and staff the Gift Shop, with proceeds going to support Hospital services. One new opportunity is Nurse Unit Assist, which enables volunteers to help the Hospital's nursing units during busy hours of the day. They also take time to visit with and comfort patients.

Thanks to Debbie Jackson, who is in her third year as Service League president and also helps manage the Gift Shop.



Volunteers (from left) Herman Canario, Margaret McCutchen and (far right) Jeannie Yee; and Emergency Department nurse (center) Jeremy Holley, RN and doctor (center right) Lin Naing, MD, showcase the ultrasound machine that was purchased in part by the Service League's annual donation to the Hospital.

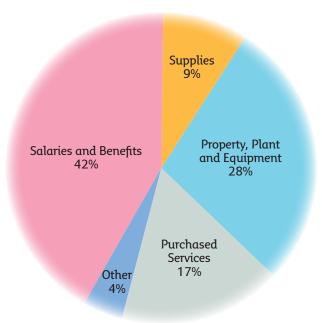
2016-17 Financial Statements

| HOSPITAL STATISTICS | FY 2017 |
|---|--|
| Admissions | 12,223 |
| Patient Days | |
| Deliveries | 1 7 2 0 |
| Surgery Cases | |
| Outpatient Visits | 82,609 |
| ER Visits | 53,325 |
| Physicians on Staff (as of June 30, 2017) | |
| BALANCE SHEET (in \$000s) | June 30, 2017 |
| Current Assets | \$ 164,217 |
| Assets Limited As to Use | 0.5==50 |
| Property, Plant and Equipment | |
| Other Assets | |
| Deferred Outflows | 38,609 |
| Total Assets and Deferred Outflows | \$1,158,597 |
| Current Liabilities | \$ 121,987 |
| Long-Term Debt | E90.067 |
| Other Long-Term Liabilities | |
| Deferred Inflows | |
| Net Position | 338,058 |
| Total Liabilities, Deferred Inflows | 330,030 |
| and Net Position | \$1,158,597 |
| | |
| INCOME STATEMENT (in \$000s) | FY 2017 |
| INCOME STATEMENT (in \$000s) Net Patient Service Revenue | FY 2017 \$489,952 |
| , , , | \$489,952 |
| Net Patient Service Revenue | \$489,952 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue | \$489,952 14,752 \$504,704 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits | \$489,952 14,752 \$504,704 274,669 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses | \$489,952 14,752 \$504,704 274,669 217,476 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Evponses | \$489,952 14,752 \$504,704 274,669 217,476 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue Other Non-Operating Expense, net | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 (513) |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue Other Non-Operating Expense, net Total Non-Operating Revenue | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 (513) \$ 6,947 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue Other Non-Operating Expense, net Total Non-Operating Revenue Net Income CASH EXPENDITURES (in \$000s) | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 (513) \$ 6,947 \$ 19,506 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue Other Non-Operating Expense, net Total Non-Operating Revenue Net Income CASH EXPENDITURES (in \$000s) Salaries and Benefits | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 (513) \$ 6,947 \$ 19,506 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue Other Non-Operating Expense, net Total Non-Operating Revenue Net Income CASH EXPENDITURES (in \$000s) Salaries and Benefits Property, Plant and Equipment | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 (513) \$ 6,947 \$ 19,506 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue Other Non-Operating Expense, net Total Non-Operating Revenue Net Income CASH EXPENDITURES (in \$000s) Salaries and Benefits Property, Plant and Equipment Purchased Services | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 (513) \$ 6,947 \$ 19,506 \$274,669 181,478 108,290 |
| Net Patient Service Revenue Other Revenue Total Operating Revenue Salaries and Benefits Other Expenses Total Operating Expenses Operating Income Interest Expense Property Tax Revenue Other Non-Operating Expense, net Total Non-Operating Revenue Net Income CASH EXPENDITURES (in \$000s) Salaries and Benefits Property, Plant and Equipment | \$489,952 14,752 \$504,704 274,669 217,476 \$492,145 \$ 12,559 (8,688) 16,148 (513) \$ 6,947 \$ 19,506 \$274,669 181,478 108,290 58,701 |

CARING FOR THE COMMUNITY

Washington Township Health Care District provides many benefits to the community. One direct benefit that receives little notice is the health care that is provided for free, or for which the district is not fully compensated. For the fiscal year ending June 30, 2017, Washington Hospital provided uncompensated health care services with an estimated total cost of approximately \$55 million to the community's medically indigent population. Additional uncompensated health care services with an estimated total cost of more than \$123 million were provided to Medicare and Medicare HMO patients. The district also provided a myriad of health education and wellness programs that are available to the general public, and other general community support, at an estimated cost of \$2 million.

CASH EXPENDITURES Fiscal year ending June 30, 2017



Washington Hospital Healthcare System 2000 Mowry Avenue Fremont. CA 94538-1716

NONPROFIT ORG.
ECRWSS
U.S. POSTAGE
PAID
SALT LAKE CITY, UT
PERMIT NO. 500

POSTAL CUSTOMER

When you need care — including your flu shot — but it's not an emergency

ou or a family member is sick or injured and you need medical care, but it's not an emergency. Maybe you don't have a family physician. Or, you know how important it is to get this season's flu vaccine and you need it right away. Or, maybe your doctor is out of town. Where can you go?

Washington Hospital has a convenient, cost-effective alternative to emergency room care. It's called Washington Urgent Care.

Our expert, friendly Urgent Care team includes doctors, nurses, nurse practitioners and registration clerks. They're available to give you the flu vaccine or help with minor emergencies like cuts, sprains and fractures . . . colds, flu and asthma . . . stomach issues and vomiting . . . fever, headache, back pain, and much more.

You're welcome to walk in. No appointment is necessary.



Find us in the Washington West building (2nd floor) next to Washington Hospital at 2500 Mowry Ave. in Fremont. Hours: 8 a.m. to 8 p.m. every day of the year. Phone: (510) 791-CARE (791-2273).

In case of a true emergency, always call 9-1-1 or go to the nearest hospital emergency room.