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

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

Wednesday, March 13, 2024 – 6:00 P.M.

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

https://zoom.us/j/93261045130?pwd=MG1CdDFyUFhpVVk3T3BKSVpIenlrZz09

Passcode: 546892

Board Agenda and Packet can be found at:

March 2024 | Washington Hospital Healthcare System (whhs.com)

**AGENDA** 

PRESENTED BY:

I. CALL TO ORDER & PLEDGE OF ALLEGIANCE

Kimberly Hartz, Chief Executive Officer

Jacob Eapen, MD Board President

II. ROLL CALL

Cheryl Renaud District Clerk

#### III. COMMUNICATIONS

Motion Required

#### A. Oral

This opportunity is provided for persons in the audience to make a brief statement, not to exceed three (3) minutes on issues or concerns not on the agenda and within the subject matter of jurisdiction of the Board. "Request to Speak" cards should be filled out in advance and presented to the District Clerk. For the record, please state your name.

B. Written

#### IV. CONSENT CALENDAR

Items listed under the Consent Calendar include reviewed reports and recommendations and are acted upon by one motion of the Board. Any Board Member or member of the public may remove an item for discussion before a motion is made. Jacob Eapen, MD Board President

#### V. PRESENTATIONS

#### PRESENTED BY:

A. UCSF-Washington Cancer Center, Radiation

**Oncology Updates** 

Emi Yoshida, MD

Assistant Professor UCSF -

Department of Radiation Oncology

Medical Director at UCSF -

Washington Cancer Center, Radiation

**Oncology Center** 

VI. **REPORTS** 

A. Medical Staff Report

Mark Saleh, MD

Chief of Medical Staff

B. Service League Report

Sheela Vijay

Service League President

C. Quality Report: Quality Dashboard Quarter Ending

December 2023

Mary Bowron

**Chief Quality Officer** 

D. Finance Report Thomas McDonagh

Vice President & Chief Financial

Officer

E. Hospital Operations Report Kimberly Hartz

Chief Executive Officer

F. Healthcare System Calendar Report Kimberly Hartz

Chief Executive Officer

VII. ACTION

A. Consideration of Fulfillment of Critically Needed

Position (Edward Fayen)

Motion Required

B. Consideration of Fulfillment of Critically Needed

Position (Robert Alfieri)

Motion Required

VIII. ANNOUNCEMENTS

IX. ADJOURNMENT

Jacob Eapen, MD 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.



# WASHINGTON HOSPITAL MONTHLY OPERATING REPORT

January 2024



# WASHINGTON HOSPITAL INDEX TO BOARD FINANCIAL STATEMENTS January 2024

**Schedule** 

**Reference** Schedule Name

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

Board - 2 Balance Sheet

**Board - 3** Operating Indicators

## Memorandum

**DATE:** February 29, 2024

**TO:** Board of Directors

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

**SUBJECT:** Washington Hospital – January 2024

Operating & Financial Activity

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

#### 1. Utilization – Schedule Board 3

	Januar y	Januar y	Cultelli 12
	<u>Actual</u>	Budget	Month Avg.
ACUTE INPATIENT:			
IP Average Daily Census	165.6	161.2	155.1
Combined Average Daily Census	175.4	170.3	165.8
No. of Discharges	948	955	877
Patient Days	5,134	4,998	4,715
Discharge ALOS	5.45	5.23	5.36
OUTPATIENT:			
OP Visits	8,955	8,729	8,602
ER Visits	5,210	5,386	4,938
Observation Equivalent Days – OP	304	281	325

January

January

Current 12

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

#### 2. Staffing – Schedule Board 3

Total paid FTEs were below Budget. Total productive FTEs for January were 1,366.6, 103.5 below the budgeted level of 1,470.1. Nonproductive FTEs were 72.0 above Budget. Productive FTEs Adjusted Occupied Bed (AOB) were 4.88, 0.72 below the budgeted level of 5.6. Total FTEs per AOB were 5.87, 0.50 below the budgeted level of 6.37.

#### 3. Income - Schedule Board 1

For the month of January, the Hospital realized Net Operating Gain of \$6,000 from Operations, a 0.01% Margin.

Total Gross Patient Revenue of \$216,157,000 for January was \$10,589,000 above Budget, 5.2%.

Deductions from Revenue of \$167,983,000 were 77.71% of Total Gross Patient Revenue, above the budgeted amount of 76.24%.

Total Net Operating Revenue of \$48,833,000 was \$1,440,000 or 2.9% below the Budget.

Total Operating Expenses of \$48,827,000 were lower than Budget by \$797,000, 1.6%.

The Total Non-Operating Gain of \$1,727,000 for the month includes an unrealized gain on investments of \$117,000.

Total Net Income for January was \$1,733,000, or \$1,065,000 above the Budgeted Net Income of \$668,000, and represents a 3.55% Margin.

The Total Net Gain for January using FASB accounting principles, in which the unrealized gain on investments, net interest expense on GO bonds, and property tax revenues are removed from the non-operating income and expense, was \$1,271,000 a 2.6% Positive Margin compared to Budgeted Income of \$451,000 for an favorable variance of \$820,000.

#### 4. Balance Sheet – Schedule Board 2

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

KIMBERLY HARTZ
Chief Executive Officer

KH/TM



## WASHINGTON HOSPITAL STATEMENT OF REVENUES AND EXPENSES

January 2024 GASB FORMAT (In thousands)

January								FISCAL YEAR TO DATE						
ACT	UAL	BUDGET	FAV	(UNFAV) VAR	% VAR.			AC	TUAL	BUDG	BET	FA (UNFAV		% VAR.
\$	127,844 88,313	\$ 126,118 79,450	\$	1,726 8,863	1.4% 11.2%	1 2	OPERATING REVENUE INPATIENT REVENUE OUTPATIENT REVENUE		794,942 603,844	\$ 874 543	4,886 3,665		(79,944) 60,179	-9.1% 11.1%
:	216,157	205,568		10,589	5.2%	3	TOTAL PATIENT REVENUE	1,	398,786	1,418	8,551	(	(19,765)	-1.4%
,	164,813) (3,170) <b>167,983)</b>	(152,985) (3,743) <b>(156,728)</b>		(11,828) 573 <b>(11,255)</b>	-7.7% 15.3% -7.2%	4 5 6	CONTRACTUAL ALLOWANCES PROVISION FOR DOUBTFUL ACCOUNTS DEDUCTIONS FROM REVENUE		049,496) (27,298) <b>076,794)</b>	(2	9,443) 5,647) <b>5,090)</b>		9,947 (1,651) <b>8,296</b>	0.9% -6.4% 0.8%
	77.71%	76.24%				7	DEDUCTIONS AS % OF REVENUE		76.98%	70	6.49%			
-	48,174	48,840		(666)	-1.4%	8	NET PATIENT REVENUE		321,992	333	3,461	-	(11,469)	-3.4%
-	659	1,433		(774)	-54.0%	9	OTHER OPERATING INCOME		6,340	1	0,079		(3,739)	-37.1%
	48,833	50,273		(1,440)	-2.9%	10	TOTAL OPERATING REVENUE		328,332	343	3,540	(	(15,208)	-4.4%
	21,815	23,460		1,645	7.0%	11	OPERATING EXPENSES SALARIES & WAGES		157,897	159	9,549		1,652	1.0%
	8,250	8,034		(216)	-2.7%	12	EMPLOYEE BENEFITS		56,101		4,308		(1,793)	-3.3%
	7,154	6,466		(688)	-10.6%	13	SUPPLIES		43,494		4,327		833	1.9%
	6,660	6,625		(35)	-0.5%	14	PURCHASED SERVICES & PROF SVCS		43,455		4,102		647	1.5%
	1,666 3,282	2,004 3,035		338 (247)	16.9% -8.1%	15 16	INSURANCE, UTILITIES & OTHER DEPRECIATION		12,379 22,778		4,140 1,769		1,761 (1,009)	12.5% -4.6%
	48,827	49,624		797	1.6%	17	TOTAL OPERATING EXPENSE	-	336,104		B,195		2,091	0.6%
	6	649		(643)	-99.1%	18	OPERATING INCOME (LOSS)		(7,772)		5,345		(13,117)	-245.4%
	0.01%	1.29%		(040)	55.170	19	OPERATING INCOME MARGIN %		-2.37%		1.56%		(10,111)	210.170
	0.0170	1.2370				13	NON-OPERATING INCOME & (EXPENSE)		-2.01 /0		1.50 /0			
	1,279	289		990	342.6%	20	INVESTMENT INCOME		4.807		1,981		2.826	142.7%
	(19)	-		(19)	0.0%	21	REALIZED GAIN/(LOSS) ON INVESTMENTS		(1,052)		-		(1,052)	0.0%
	(1,827)	(1,672)		(155)	-9.3%	22	INTEREST EXPENSE		(12,506)	(1:	1,849)		(657)	-5.5%
	(150)	29		(179)	-617.2%	23	RENTAL INCOME, NET		61	`	94		(33)	-35.1%
	-	-		- '	0.0%	24	FOUNDATION DONATION		59		-		59	0.0%
	(240)	-		(240)	0.0%	25	BOND ISSUANCE COSTS		(2,292)		(600)		(1,692)	-282.0%
	569	-		569	0.0%	26	FEDERAL GRANT REVENUE		1,554		-		1,554	0.0%
	1,373	1,373		-	0.0%	27	PROPERTY TAX REVENUE		9,761	(	9,761		-	0.0%
	625	-		625		28	EQUITY INVESTMENT EARNINGS		2,744		-		2,744	0.0%
	-	-		-		29	GAIN (LOSS) ON DISPOSALS		204		-		204	0.0%
	117			117	0.0%	30	UNREALIZED GAIN/(LOSS) ON INVESTMENTS		4,105		-		4,105	0.0%
	1,727	19		1,708	8989.5%	31	TOTAL NON-OPERATING INCOME & EXPENSE		7,445		(613)		8,058	1314.5%
\$	1,733	\$ 668	\$	1,065	159.4%	32	NET INCOME (LOSS)	\$	(327)	\$ 4	4,732	\$	(5,059)	-106.9%
	3.55%	1.33%				33	NET INCOME MARGIN %		-0.10%		1.38%			
\$	1,271	\$ 451	\$	820	181.8%	34	NET INCOME (LOSS) USING FASB PRINCIPLES**	\$	(6,341)	\$ ;	3,098	\$	(9,439)	-304.7%
	2.60%	0.90%					NET INCOME MARGIN %		-1.93%	(	0.90%			

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



#### WASHINGTON HOSPITAL BALANCE SHEET

January 2024 (In thousands)

	ASSETS AND DEFERRED OUTFLOWS	January 2024	Unaudited June 2023	LIABILITIES, NET POSITION AND DEFERRED INFLOWS	January 2024	Unaudited June 2023	
	CURRENT ASSETS			CURRENT LIABILITIES			
1	CASH & CASH EQUIVALENTS	\$ 12,098	\$ 13,792	1 CURRENT MATURITIES OF L/T OBLIG	\$ 9,425	\$ 10,460	
2	ACCOUNTS REC NET OF ALLOWANCES	73,411	66,153	2 ACCOUNTS PAYABLE	35,765	28,901	
3	OTHER CURRENT ASSETS	27,962	21,749	3 OTHER ACCRUED LIABILITIES	55,902	57,874	
4	TOTAL CURRENT ASSETS	113,471	101,694	4 INTEREST	10,769	10,476	
				5 TOTAL CURRENT LIABILITIES	111,861	107,711	
	ASSETS LIMITED AS TO USE			LONG-TERM DEBT OBLIGATIONS			
5	BOARD DESIGNATED FOR CAPITAL AND OTHER	179,597	178,095	6 REVENUE BONDS AND OTHER	225,343	193,400	
6	BOARD DESIGNATED FOR PENSION	0	0	7 GENERAL OBLIGATION BONDS	468,561	342,150	
7	GENERAL OBLIGATION BOND FUNDS	134,973	19,399				
8	REVENUE BOND FUNDS	47,648	6,726				
9	BOND DEBT SERVICE FUNDS	24,195	34,708				
10	OTHER ASSETS LIMITED AS TO USE	10,144	9,792				
11	TOTAL ASSETS LIMITED AS TO USE	396,557	248,720	OTHER LIABILITIES			
				8 SUPPLEMENTAL MEDICAL RETIREMENT	44,029	42,548	
12	OTHER ASSETS	334,728	319,097	9 WORKERS' COMP AND OTHER	9,779	9,732	
				10 NET PENSION	76,675	69,065	
13	PREPAID PENSION	2,125	0	11 ROU ASSET LONG-TERM	2,932	1,903	
14	OTHER INVESTMENTS	22,971	20,166				
15	NET PROPERTY, PLANT & EQUIPMENT	569,690	576,944	12 NET POSITION	536,464	536,790	
16	TOTAL ASSETS	\$ 1,439,542	\$ 1,266,621	13 TOTAL LIABILITIES AND NET POSITION	\$ 1,475,644	\$ 1,303,299	
17	DEFERRED OUTFLOWS	54,665	70,928	14 DEFERRED INFLOWS	18,563	34,250	
18	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 1,494,207	\$ 1,337,549	15 TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	\$ 1,494,207	\$ 1,337,549	



# WASHINGTON HOSPITAL OPERATING INDICATORS January 2024

	January										
								FISCAL YE	AR TO DATE		
12 MONTH AVERAGE	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.	
						PATIENTS IN HOSPITAL					
155.1	165.6	161.2	4.4	3%	1	ADULT & PEDS AVERAGE DAILY CENSUS	155.2	161.4	(6.2)	-4%	
10.7	9.8	9.1	0.7	8%	2	OUTPT OBSERVATION AVERAGE DAILY CENSUS	11.5	8.9	2.6	29%	
165.8	175.4	170.3	5.1	3% 16%	3 4	COMBINED AVERAGE DAILY CENSUS NURSERY AVERAGE DAILY CENSUS	166.7	170.3	(3.6)	-2% -7%	
8.3	8.5	7.3	1.2				8.1	8.7	(0.6)		
174.1	183.9	177.6	6.3	4%	5	TOTAL	174.8	179.0	(4.2)	-2%	
3.6	2.5	3.0	(0.5)	-17%	6	SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *	3.2	3.2	-	0%	
4,715	5,134	4,998	136	3%	7	ADULT & PEDS PATIENT DAYS	33,372	34,692	(1,320)	-4%	
325	304	281	23	8%	8	OBSERVATION EQUIVALENT DAYS - OP	2,469	1,922	547	28%	
877	948	955	(7)	-1%	9	DISCHARGES-ADULTS & PEDS	6,157	6,634	(477)	-7%	
5.36	5.45	5.23	0.22	4%	10	AVERAGE LENGTH OF STAY-ADULTS & PEDS	5.36	5.23	0.13	2%	
						OTHER KEY UTILIZATION STATISTICS					
1.550	1.535	1.531	0.004	0%	11	OVERALL CASE MIX INDEX (CMI)	1.565	1.545	0.020	1%	
						SURGICAL CASES					
201	206	206	-	0%	12	ORTHOPEDIC CASES	1,385	1,363	22	2%	
26	28	30	(2)	-7%	13	NEUROSURGICAL CASES	190	201	(11)	-5%	
11	16	13	3	23%	14	CARDIAC SURGICAL CASES	81	96	(15)	-16%	
34	31	44	(13)	-30%	15	VASCULAR CASES	225	256	(31)	-12%	
101 92	102 85	111 88	(9) (3)	-8% -3%	16 17	ENDOSCOPY CASES OTHER SURGICAL CASES	733 654	713 658	20 (4)	3% -1%	
464	468	492	(24)	-5%	18	TOTAL CASES	3,268	3,287	(19)	-1%	
404	400	492	(24)	-570	10	TOTAL GAGES	3,200	5,201	(19)	-170	
164	191	207	(16)	-8%	19	TOTAL CATH LAB CASES	1,166	1,373	(207)	-15%	
126	124	106	18	17%	20	DELIVERIES	881	898	(17)	-2%	
8,602	8,955	8,729	226	3%	21	OUTPATIENT VISITS	59,786	59,587	199	0%	
4,938	5,210	5,386	(176)	-3%	22	EMERGENCY VISITS	35,210	36,177	(967)	-3%	
						LABOR INDICATORS					
1,434.4	1,366.6	1,470.1	103.5	7%	23	PRODUCTIVE FTE'S	1,426.5	1,454.1	27.6	2%	
206.9	275.9	203.9	(72.0)	-35%	24	NON PRODUCTIVE FTE'S	219.6	197.8	(21.8)	-11%	
1,641.3	1,642.5	1,674.0	31.5	2%	25	TOTAL FTE'S	1,646.1	1,651.9	5.8	0%	
5.27	4.88	5.60	0.72	13%	26	PRODUCTIVE FTE/ADJ. OCCUPIED BED	5.22	5.56	0.34	6%	
6.03	5.87	6.37	0.50	8%	27	TOTAL FTE/ADJ. OCCUPIED BED	6.03	6.31	0.28	4%	

### Memorandum

DATE: March 4, 2024

TO: Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Fulfillment of Critically Needed Position (Edward Fayen)

As the Board is well aware, Washington Hospital Healthcare System, like many other healthcare systems, is facing significant challenges in recruiting qualified employees to fill critical positions.

The law allows the District to employ a retired employee before the 180 day waiting period provided that the Board of Directors, certifies "the nature of the employment and that the appointment is necessary to fill a critically needed position before the 180 days have passed" [Cal Gov Code § 7522.56]. The Board's action may not be placed on the consent calendar.

Edward Fayen, Executive Vice President & COO, is retiring on April 1, 2024, but his skills and experience in construction design, management and operations are needed to perform critical work of limited duration. As the Board of Directors is aware, we are embarking on the next phase of the Facility Master Plan in order to meet the state of California mandated seismic regulations. This entails in depth knowledge of design and construction management for this project and associated ones that cost over \$400 million dollars and entails building a full new building. Edward Fayen is the only employee who has a complete understanding of these required construction projects. He is needed to assist with these projects and help with transitioning the new Director of Construction Management into her position.

We do not make this request lightly. However, these are extraordinary times, and his assistance is of critical importance to the smooth functioning and future growth of our Healthcare System.

I therefore recommend that the Board of Directors certify and approve the employment of Edward Fayen to fill a critically needed position for no more than 180 days and to not exceed 360 hours.

### Memorandum

DATE: March 4, 2024

TO: Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Fulfillment of Critically Needed Position (Robert Alfieri)

As the Board is well aware, Washington Hospital Healthcare System, like many other healthcare systems, is facing significant challenges in recruiting qualified employees to fill critical positions.

The law allows the District to employ a retired employee before the 180 day waiting period provided that the Board of Directors, certifies "the nature of the employment and that the appointment is necessary to fill a critically needed position before the 180 days have passed" [Cal Gov Code § 7522.56]. The Board's action may not be placed on the consent calendar.

Robert Alfieri, Chief of Facilities Services, is retiring on April 1, 2024. His skills and experience in facilities management are needed to perform critical work of limited duration, especially given the fact that we are embarking on the next phase of the Facility Master Plan in order to meet state of California mandated seismic regulations. At this point, Robert Alfieri is the only person with the depth and breadth of knowledge of our facilities to ensure that they run smoothly and effectively for the safety of our patients, staff and physicians. Robert is needed to be available to assist with any issues or questions that arise pertaining to our facilities infrastructure and to be available to train his replacement.

We do not make this request lightly. However, these are extraordinary times, and his assistance is of critical importance to the smooth functioning and future growth of our Healthcare System.

I therefore recommend that the Board of Directors certify and approve the employment of Robert Alfieri to fill a critically needed position for no more than 180 days and to not exceed 360 hours.