

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, May 10, 2023 – 6:00 P.M. Board Room of Washington Hospital, 2000 Mowry Avenue, Fremont and via Zoom

https://zoom.us/j/96698031922?pwd=cm5TcFpJcDRRT0ZFUmttaGpMcUxpdz09

Passcode: 970794

Board Agenda and Packet can be found at: <u>May 2023 | Washington Hospital Healthcare System (whhs.com)</u> <u>AGENDA</u>

PRESENTED BY:

I. CALL TO ORDER & PLEDGE OF ALLEGIANCE

Bernard Stewart, DDS Board President

II. ROLL CALL

Cheryl Renaud District Clerk

III. COMMUNICATIONS

A. Oral

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

B. Written

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.

- A. Consideration of Minutes of the Regular Meetings of the District Board: April 12, 17, 24 and 26, 2023
- B. Consideration of Garden Level CJR Office Project
- C. Consideration of Contract Modeling and Reporting Tool (Revenue Cycle Management)

Bernard Stewart, DDS Board President

Motions Required

Board of Directors' Meeting May 10, 2023 Page 2

- D. Consideration of Copier Replacement
- E. Consideration of UPS Systems for CT Machines
- F. Consideration of Two-Bin Kanban Supply System
- G. Consideration of Project to Move Information Services and Approval of Lowest Responsible Bidder
- H. Consideration of Appointment of Safety Officer: Daniel O'Connell, Security & Safety Director

V. PRESENTATIONS

A. Community Health Needs Assessment

B. Construction Update

VI. REPORTS

- A. Medical Staff Report
- B. Service League Report
- C. Quality Report: Quality Dashboard QE 03/2023
- D. Finance Report
- E. Hospital Operations Report
- F. Healthcare System Calendar Report

PRESENTED BY:

Angus Cochran Chief of Community Support Services

Kayla Gupta Community Outreach Manager

Ed Fayen Executive Vice President & Chief Operating Officer

Shakir Hyder, MD Chief of Medical Staff

Sheela Vijay Service League President

Mary Bowron Chief Quality Officer

Thomas McDonagh Vice President & Chief Financial Officer

Kimberly Hartz Chief Executive Officer

Kimberly Hartz Chief Executive Officer

VII. ACTION

A. Consideration of Community Health Needs Assessment Motion Required

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, April 12, 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 pm and led those in attendance of the meeting in the Pledge of Allegiance.	CALL TO ORDER PLEDGE OF ALLEGIANCE
Roll call was taken: Directors present: Bernard Stewart, DDS; William Nicholson, MD; Jeannie Yee; Jacob Eapen, MD	ROLL CALL
Absent: Michael Wallace	
Also present: Kimberly Hartz; Cheryl Renaud; Paul Kozachenko; Tina Nunez; Chris Henry; Tom McDonagh; Shirley Ehrlich	
Guests: Gisela Hernandez; Srikar Boddar; Lina Huang, Angus Cochran; Shakir Hyder, MD; Felipe Villanueva; Sheela Vijay; Tigist Awel; John Lee; Analynn Cisneros; Larry LaBossiere; Laura Anning; Dianne Martin, MD and Brian Smith, MD	
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: March 8, 13, 20, 22 and 27, 2023 	
B. Consideration of Donor Recognition Plaques for Legacy Society	
Director Nicholson moved that the Board of Directors approve the Consent Calendar, Items A through B. Director Eapen seconded the motion.	
Roll call was taken:	
Bernard Stewart, DDS – aye Michael Wallace – absent	

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

Motion Approved.

Kimberly Hartz, Chief Executive Officer, introduced the Chief of Patient Experience; Laura Anning, who gave a presentation regarding The Patient Experience. Laura defined Patient Experience to include the sum of all interactions, shaped by an organization's culture that influence patient perceptions across the continuum of care. The framework includes developing a strategy, building the behaviors, managing the work and communicating the message. We gain trust and loyalty by exemplifying our Patient First Ethic values. Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey is the first national, standardized, publicly reported survey of patient's perspectives of hospital care. For meaningful scoring, we aim to have patients respond "definitely yes" in the likelihood to recommend WHHS to their friends and family. Throughout each unit, the metrics for patient experience and improvement plans are displayed on the Operations and Huddle Boards. This assists with communication and expectations are prioritized on the Strategic Map. This supports our Mission Statement to our patients to be cared for and treated well.

Dr. Shakir Hyder, Chief of Staff, reported there are 608 Medical Staff members, including 339 active members.

Kimberly Hartz introduced Analynn Cisneros, the Quality Assurance Manager, who gave a presentation on the Reduction of Congestive Heart Failure Readmissions by Improving Coordination of Care & Communication. As part of the Affordable Care Act (ACA), CMS launched the Hospital Readmissions Reduction Program (HRRP). HRRP encourages hospitals to improve communication and care coordination to better engage patients and caregivers in an effort to reduce avoidable readmissions within 30 days of discharge. This impacts the bottom line of the hospital by reducing the Medicare payments up to 3% for excess readmissions.

Washington Hospital's CHF readmission rate from July 2021 to June 2022 was 26.4% higher than the CMS national readmission rate of 21.3%. The A3 problem solving method was used to get to the root cause of the increased readmission rate. A3 is a lean methodology for problem solving that includes identifying the goals in the SMART format. (Specific, Measurable, Achievable, Realistic and Timely) The key drivers include disease management during hospital stay, transitional care management from inpatient to outpatient, social determinants of health and having one educational resource for staff to use. The interventions for improvement include providing CHF education to patients prior to discharge, revising CHF order sets for providers, scheduling primary and specialty follow-up appointments and having an electronic discharge checklist. By following the WHHS operational priority, the goal is to improve care coordination and reduce the readmission rate from 26.4% to 21.3% by June 30, 2023.

Kimberly Hartz introduced the Service League President, Sheela Vijay. Sheela reported, in the past month, 179 members of the Service League contributed 1,967 hours. There was an orientation in March that was attended by 3 high school students, 12 college students and 5 adults.

PRESENTATION: PATIENT EXPERIENCE

MEDICAL STAFF REPORT

LEAN REPORT

SERVICE LEAGUE REPORT

Sheela reported that the Service League has partnered with Fremont Unified School District that brings students from the special education program into the Service League. These adult students take continuing education courses through the school district and are placed in workplaces and volunteers positions. In March, they assembled about 250 urine test kits and 100 patient welcome bags for medical oncology.

Sheela also reported on the volunteer program for Mended Hearts. Mended Hearts is a national and community-based nonprofit organization founded in 1951 by Dr. Dwight Harken, a cardiac surgeon. Mended Hearts has an accredited visitor program that consist of patients themselves who listen and share information about living with heart disease from the perspective of someone who has been there. Currently we have 2 volunteers making their patient rounds in our telemetry department as "accredited visitors". In March, Mended Hearts volunteers talked to 40 heart patients in the hospital. They also interacted with 20 family members.

Dr. Dianne Martin presented on the Antimicrobial Stewardship Program. Antimicrobial Stewardship Goals include promoting the appropriate use of antimicrobial agents, decreasing risks for the development of microbial resistance and decreasing the spread of infections caused by resistant organisms, in collaboration with the infection prevention team. The mission of the Antimicrobial Stewardship Program is to foster appropriate use of antimicrobial agents through education, implementation of accepted protocols, and interactive discussion with medical staff and health care staff to ensure best outcomes for the patient, while minimizing the development of resistance.

Antibiotic resistance occurs when organisms develop mechanisms to defeat the antibiotics designed to eradicate them. COVID-19 is a recent example of this as a global challenge. Resistant organisms render antibiotics ineffective and negate the benefits of modern medicine. The Joint Commission promotes quality care standards for hospitals. The Antimicrobial Stewardship Program is one of the required standards. The leader(s) are responsible for implementing a hospital-wide stewardship program with a team, including an interdisciplinary committee and coordination of efforts with pertinent departments. The committee monitors antibiotics using Days of Therapy (DOT) and reporting data to the National Health Safety Network (NHSN).

Resistance continues to be a global health threat. The Antimicrobial Stewardship Program can help preserve the power of our currently available antimicrobials. Lastly, the data analysis of antibiotics usage provides information on how to prioritize the stewardship interventions and action plans.

Tom McDonagh, Vice President & Chief Financial Officer, presented the Finance Report for February 2023. The average daily inpatient census was 167 with admissions of 866 resulting in 4,675 patient days. Outpatient observation equivalent days were 265. The average length of stay was 5.56 days. The case mix index was 1.589. Deliveries were 107. Surgical cases were 344. The Outpatient visits were QUALITY REPORT: ANNUAL ANTIMICROBIAL STEWARDSHIP PROGRAM

FINANCE REPORT

8,681. Emergency visits were 4,424. Cath Lab cases were 172. Joint Replacement cases were 157. Neurosurgical cases were 24. Cardiac Surgical cases were 11. Total FTEs were 1,645.9. FTEs per adjusted occupied bed were 5.66.

Kimberly Hartz, Chief Executive Officer, presented the Hospital Operations Report for March 2023. Preliminary information for the month indicated total gross revenue at approximately \$216.3 million against a budget of \$191,960,000. We had 35 COVID-19 discharges which was 6 fewer cases from the prior month, and 15 fewer than March 2022 at 50 discharges.

The Average Length of Stay was 5.48. The Average Daily Inpatient Census was 165.7. There were 11 discharges with lengths of stay greater than 30 days, ranging from 31-116. Still in house at the end of March were 7 patients with length of stays of over 30 days and counting.

There were 4,675 patient days. There were 395 Surgical Cases and 158 Cath Lab cases at the Hospital. It was noted that there were 66 cases at the Peninsula Surgery Center in March.

Deliveries were 143. Non-Emergency Outpatient visits were 10,059. Emergency Room visits were 5,069. Total Government Sponsored Preliminary Payor Mix was 75.7%, against the budget of 71.8%. Total FTEs per Adjusted Occupied Bed were 5.82. The Washington Outpatient Surgery Center had 568 cases and the clinics had approximately 18,267 visits.

There were \$158K in charity care adjustments in March.

April Employee of the Month: Cindy Wojdon, Staff Nurse IV, ICU.

Past Health Promotions & Community Outreach Events:

- March 8: Life After Stroke
- March 15: Common Urology Concerns
- March 16: Robotic-Assisted Knee Replacement
- March 22: Mood and Anxiety Disorders: Breaking the Stigma
- March 28: Fall Prevention and Recovery
- March 30: Stroke Prevention
- March 30: Doctor's Day 2023
- April 1: Tattoo Removal Clinic
- April 4: The Aging Spine

Upcoming Health Promotions & Community Outreach Events:

- April 22: Emergency Preparedness Fair
- April 22: New Haven Day
- April 22: Go Green with us in 2023! Earth Day Celebration

HOSPITAL OPERATIONS REPORT

EMPLOYEE OF THE MONTH

HOSPITAL CALENDAR

- May 2: Carotid Artery Disease (CAD) What is it? How can we treat it?
- Vaccination Clinic as of April 6:
- A total of 98,896 COVID vaccine doses have been administered to community members at our vaccination clinic.

Washington Hospital Healthcare System received California Department of Health Care Services (DHCS) Quality Synergy Award for "Outstanding Performance towards Clinical Goals of DHCS's Comprehensive Quality Strategy". The award was given to two of the District Hospitals that were top performers in 2021 on what DHCS calls its "Bold Goals" which focus on children's preventive care, maternity care and birth equity, and behavioral health integration.

The HERS Breast Cancer Foundation awarded Washington Hospital Healthcare System the Hope Award at its 14th Annual People with Purpose Pink Tie Gala. The Hope Award is intended to recognize a community partner working with HERS that brings hope to survivors of breast cancer.

The Foundation's 36th Annual Golf Tournament will be held on Thursday, May 4, 2023, at the Club at Castlewood in Pleasanton. Funds raised from the event will support surgical services at Washington Hospital.

The Foundation will continue to host free charitable giving and estate planning seminars in partnership with estate planner Richard Schachtili 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.

During the regular meeting of the Board of Directors (Board) on April 12, 2023, the Board considered Agenda Item VII.A, consisting of the following items pertaining to the Chief Executive Officer Employment Agreement: (i) Consideration of Adjustments to Base Salary; (ii) Consideration of Award of "At Risk" Compensation; and (iii) Consideration of Extension of Term of Employment Agreement. The following Board members were present:

President Bernard Stewart Director Jeannie Yee Director Jacob Eapen Director William F. Nicholson

Director Michael Wallace was not present at the meeting.

President Stewart introduced the agenda item. The Board will be considering adjustments and awards under the employment agreement for the fiscal year ending June 2022.

CONSIDERATION OF CHIEF EXECUTIVE OFFICER EMPLOYMENT AGREEMENT

Mr. Kozachenko read his Memorandum to the Board of Directors, dated April 7, 2023, into the record, a copy of which was included in the packet available to the public. The Memorandum reviewed the Board's compensation philosophy, the Board's previous actions regarding CEO's compensation, and the procedure for making adjustments to the CEO's compensation.

President Stewart began the Board's discussion concerning the CEO's compensation. He noted that the Board's philosophy has been to compensate the CEO at the 65th percentile of the California peer group. The District hired Ms. Hartz in 2019 as a new CEO, and it was appropriate to start her at a lower rate than the 65th percentile and gradually increase her salary to the goal of the 65th percentile. As of June 30, 2022, Ms. Hartz had completed her third year as the CEO. There is no doubt that Ms. Hartz's performance for the fiscal year ending June 2022 was excellent. She delivered EBIDTA performance well above the budget during a period in which the COVID pandemic was still an issue. He proposed adjusting her base salary close to 95% of the 65th percentile, or \$955,700.

Director Nicholson indicated his agreement with President Stewart's proposal. He noted Ms. Hartz's stellar performance during her tenure as the CEO and her personal growth over the past three years.

President Stewart referred back to the Gallagher Report. He noted that the report describes the salaries of CEOs at similar hospitals. The Board has always felt that it needs to be competitive with these peer facilities.

Director Eapen noted that the Board has always followed the Gallagher Report and the 65th percentile goal. He noted that Ms. Hartz is currently compensated well below the 65th percentile. He indicated he has no hesitancy in approving the proposed increase in base salary.

President Stewart opened the public hearing on the issue of the adjustment of the CEO's base salary.

President Stewart closed the public hearing on the issue of the adjustment of the CEO's base salary. There were no comments.

Director Nicholson moved that the Board increase the CEO's base salary to \$955,700, which is near 95% of the 65th percentile of the California peer group and that the adjustment be effective July 1, 2022. Director Eapen seconded the motion.

President Stewart called for a vote:

President Stewart	AYE	Director Nicholson	AYE
Director Yee	AYE	Director Wallace	Absent
Director Eapen	AYE		

The motion passed.

CONSIDERATON OF ADJUSTMENTS TO BASE SALARY

Ms. Hartz complimented her team and noted that her success would not be possible without them.

President Stewart directed the Board to consideration of the second action item regarding an award of incentive compensation. He noted that the Board has the discretion to award up to 25% of her base salary, or \$215,250.

President Stewart stated his belief that Ms. Hartz deserves the entire award. He noted, however, that she has expressed some concern about that amount in light of the challenges the District is expected to face in the coming years. He believes that the Board should be mindful of her concerns. He proposed that the Board consider an award of \$120,000.00. He noted the following accomplishments for the fiscal year ending June 2022. She delivered a positive EBITDA variance from the budget was \$28,000,000, and these funds will fund needed capital improvements, including state-of-the-art medical technology. She led the successful effort to have Washington Hospital designated as the third adult trauma center in Alameda County. Currently, trauma patients must be transported to Castro Valley. She advanced the District's affiliation with UCSF Health, a world-renowned medical center. She was instrumental in the creation of the WHHS & UCSF Health Cancer Center, which will bring better cancer care into this community.

Director Nicholson stated that he shared President Stewart's sentiments that Ms. Hartz was deserving of the full incentive compensation award. The Board was delighted to see the \$28,000,000 positive variance on EBITDA. He echoed Dr. Stewart's statements regarding the trauma center designation and the affiliation with UCSF and noted that each one standing alone would have been enough to justify the full incentive compensation award. He also understands Ms. Hartz's concerns about receiving the entire award. He agrees that an award of \$120,000 would be appropriate.

Director Eapen stated that Ms. Hartz has earned her award through her performance. He has no hesitation regarding the incentive award.

President Stewart opened the public hearing on the issue of an incentive award.

President Stewart closed the public hearing on the issue of an incentive award. There were no comments.

Director Nicholson made a motion that the Board award the CEO incentive compensation in the amount of \$120,000 based on the CEO's outstanding performance. Director Yee seconded the motion.

President Stewart called for a vote:

President Stewart	AYE	Director Nicholson	AYE
Director Yee	AYE	Director Wallace	Absent
Director Eapen	AYE		

CONSIDERATION OF AWARD OF "AT RISK" COMPENSATION

The motion passed.

President Stewart turned to the third action item, whether to extend the term of the employment agreement. He asked for a motion to extend the term of the contract to June 30, 2026. There were no comments from the Board members.

President Stewart opened the public hearing on the issue of extending the term of the contract.

President Stewart closed the public hearing on the issue of extending the term of the contract. There were no comments.

Director Nicholson made a motion that the Board extend the term of the employment agreement for two years, for a new term starting July 1, 2022, and ending June 30, 2026, and authorize the President of the Board to execute an amendment to the employment agreement consistent with the actions approved by the Board at this meeting. Director Eapen seconded the motion.

President Stewart called for a vote:

President Stewart	AYE	Director Nicholson	AYE
Director Yee	AYE	Director Wallace	Absent
Director Eapen	AYE		

The motion passed.

This concluded the discussion on this agenda item.

There being no further business, Director Stewart adjourned the meeting at 8:35 p.m. ADJOURNMENT

Bernard Stewart, DDS President Jeannie Yee Secretary CONSIDERATION OF EXTENSION OF TERM OF EMPLOYMENT AGREEMENT

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SENT CALENDAR
ON ITEMS

Motion Approved.

Dr. Nicholson moved that the Board of Directors approve the Action Item as listed:

B. Consideration of Corporate Compliance Annual Plan

Director Eapen seconded the motion.

Roll call was taken:

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

Motion Approved.

Dr. Nicholson moved that the Board of Directors approve the Action Item as listed:

- C. Consideration of Resolution #1250 Corporate Resolution Fremont Bank Operating Accounts
- D. Consideration of Resolution #1251 Corporate Resolution Fremont Bank -Facsimile Signature Agreements

NOTE: Resolutions #1250 and #1251 were consolidated into Resolution #1250.

Director Eapen seconded the motion.

Roll call was taken:

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

Motion Approved.

Director Stewart adjourned the meeting to closed session at 6:15 p.m., as the discussion pertained to a Conference involving Trade Secrets pursuant to Health & Safety Code section 32106; Conference involving Strategic Planning Discussion. 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 April 18, 2023. The minutes of this meeting will reflect any reportable actions.

ADJOURN TO CLOSED SESSION

Director Stewart reconvened the meeting to open session at 8:40 p.m. The District Clerk reported that during the closed session, the Board approved the closed session minutes of March 13, 20, and 22, 2023 by unanimous vote of all directors present.

RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION

There being no further business, Director Stewart adjourned the meeting at 8:40 p.m. ADJOURNMENT

Bernard Stewart, DDS President Jeannie Yee Secretary

A meeting of the Board of Directors of the Washington Township Health Care District was held on Monday, April 24, 2023 in the Board Room 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; Mary Bowron, RN; Brian Smith, MD; 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 Sections 1461 and 32155.	ADJOURN TO CLOSED SESSION
Director Stewart reconvened the meeting to open session at 8:55 a.m. and reported no reportable action taken in closed session.	RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION
There being no further business, the meeting adjourned at 8:55 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 April 26, 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; Shirley Ehrlich; Ed Fayen	
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 or written communications.	COMMUNICATIONS
There were no items on the Consent Calendar for consideration.	CONSENT CALENDAR
Director Stewart adjourned the meeting to closed session at 6:02 p.m., as the discussion pertained to reports regarding Medical Audit & Quality Assurance Matters pursuant to Health & Safety Code Sections 1461 and 32155, and 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 Teleconference and 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 April 27, 2023. The minutes of this meeting will reflect any reportable actions.	ADJOURN TO CLOSED SESSION
Director Stewart reconvened the meeting to open session at 7:20 pm. The District Clerk reported that during the closed session, the Board approved the Medical Staff Credentials Committee Report and Waiver Requests by unanimous vote of all Directors present. The Board also authorized the CEO to sign the notice of return of late claim to Gerry Roberts by unanimous vote of all Directors present.	RECONVENE TO OPEN SESSION & REPORT ON CLOSED SESSION
There being no further business, Director Stewart adjourned the meeting at 7:20 pm.	ADJOURNMENT

Bernard Stewart, DDS President Jeannie Yee Secretary





AMENDED 5/9/23

Agenda Item: IV., B.

DATE: May 9, 2023

TO: Washington Township Health Care District Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Garden Level CJR Office Project

Over the last decade, we have seen tremendous volume growth associated with our Institute for Joint Replacement and Research. Since 2020, we have added two orthopedic specialists to the roster of physicians affiliated with the Institute: Drs. Costouros and Bonner. This has effectively doubled the professional staff of the Program with little to no physical change of the Clinic space. We are recommending building out the basement level of the Center for Joint Replacement (CJR) building for an additional office suite, so that all practices have the needed space to continue to grow.

We completed design of this space several months ago, and received HCAI approval for construction of the office suite on April 18, 2023. In anticipation of HCAI approval, we went out to bid with the final submitted design drawings sent to HCAI on December 7, 2022. Three firms pre-qualified for the bid, and three bids were submitted on February 23, 2023. The bid results are as follows:

MarCon Builders	\$4,344,710
James R. Griffin, Inc.	\$3,337,982
Rudolph and Sletten	\$5,342,331

After review, it was determined that James R. Griffin Inc. of Fremont, CA is the lowest responsible bidder.

All bids broke out the cost for an external elevator to bring patients to the basement level from the parking lot located behind the CJR building. In a value engineering effort, it was decided we would remove the elevator from the project at this time and put in an allowance for a patient lift. With this change, James R. Griffin Inc. is still the lowest responsible bidder.

The Budget for this Project is as follows:

Construction Costs	
Construction	\$2,388,870
Construction Contingency	<u>\$477,774</u>
Total Construction Costs	\$2,866,644

FFE	
FFE (including x-ray machine)	\$492,753
IT	\$180,032
Signage and Security	\$ <u>25,000</u>
Total FFE	\$697,785
Design	\$397,333
Testing/Inspection, HCAI and PM	
Testing/Inspection	\$96,726
HCAI	\$66,187
Project Management	\$ <u>219,000</u>
Total T/I, HCAI, PM	\$381,913
Total Project Cost	\$4,343,675

This project was not included in the FY 2023 Capital Project Budget. It was thought we would be starting the project in FY24. However, given the importance of the continued growth of the Program, I recommend we move forward with the project.

The staff recommends the Board adopt the following motions:

- 1. The Board hereby approves the budget for the Garden Level CJR Office Project for an amount not to exceed \$4,343,675
- 2. The Board hereby approves James R. Griffin Inc. as the lowest responsible bidder for the Garden Level CJR Office Project and the CEO is hereby authorized to execute any and all contracts in connection with this Project consistent with the Board's approval.





DATE:	April 11, 2023	Agenda Item: IV., C.
то:	Washington Township Health Care District Board of Directors	
FROM:	Kimberly Hartz, Chief Executive Officer	
SUBJECT:	Contract Modeling and Reporting Tool (Revo	enue Cycle Management)

The Contract Services Department and WTMF have requested **Contract Modeling and Reporting** Software through PMMC. The software and services are to be used in conjunction with Strata, Athena and other systems to provide improvements in our negotiation position via use of centralized data and analytics while providing meaningful and accurate financial reporting are expected. Opportunities include:

- Standardize modeling and rate analysis
- Insight into denial/underpay trends by payer
- Insight into patient payment trends by payer
- Improved reporting for denial/underpayments management
- Improved/centralized analytics for performance monitoring
- Improved/centralized analytics for prospective simulation/analysis
- Understanding of net revenue impact for denials or underpayments for prioritization
- Improved reporting/analytics for root cause analysis and prevention

The project will take approximately 6 months to fully complete and will be performed using both internal and external labor, in conjunction with vendor assistance.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into the necessary contracts and proceed with the purchase of the hardware, software, and implementation services, for a total amount not to exceed **\$131,260**. This project was included in the FY 2023 Capital Budget.



Memorandum

DATE: April 26, 2023

Agenda Item: IV., D.

TO: Washington Township Health Care District Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Copier Replacement

Hospital departments utilize multi-function copier equipment throughout the hospital for printing, scanning and copying data on a day to day basis. Each year, the Information Services department reviews service call history, page counts and technology usage for all copiers to identify which equipment needs to be replaced.

This year, we have identified eight copiers that need to be replaced. The copiers marked for replacement service various departments, including patient care floors, the finance department and biomedical engineering. By replacing older and more problematic copiers, we improve the efficiency of operations and allow staff to focus foremost on patient care concerns.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to enter into the necessary contracts and proceed with the purchase of hardware for a total amount not to exceed **\$39,575**. This project was included in the FY 2023 Capital Budget.



Agenda Item: IV., E.

Memorandum

DATE:	May 2, 2023
то:	Washington Township Health Care District Board of Directors
FROM:	Kimberly Hartz, Chief Executive Officer
SUBJECT:	Request to Purchase and Install 2 GE UPS Systems for the CT Machines

The CT machines utilize a UPS system as a surge protector and backup power in an event of an outage. Two of our UPS systems, one in the main hospital and one in the outpatient department, are currently out of service. Both units are over 14 years old and the vendor is not able to obtain parts to repair the UPS systems. Although this is not budgeted in the Fiscal Year 2022/23 Fixed Asset Capital Budget, the Washington Hospital Healthcare Foundation will be providing the funds to cover the cost.

Staff recommends moving forward with the purchase of 2 GE UPS systems. The cost of both systems, which is in line with MD Buyline, is listed below.

Price of 2 systems (includes shipping)	\$ 40,960.00
Taxes on 2 systems	<u>\$ 4,198.40</u>
Total Costs	\$ 45,158.40

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to proceed with the purchase of 2 GE UPS systems. This amount includes the equipment, taxes, and shipping, not to exceed \$45,159. The total amount was not included in the FY 2022/23 Fixed Asset Capital Budget. The Washington Hospital Healthcare Foundation will be providing the funds to cover the cost.





Agenda Item: IV., F

DATE:	May 3, 2023
TO:	Washington Township Health Care District Board of Directors
FROM:	Kimberly Hartz, Chief Executive Officer
SUBJECT:	Capital Request - Two-Bin Kanban Supply System

The current method of replenishing supplies in the hospital is fragmented, inefficient, and difficult to manage. The current concept is the "fill-up" model, whereby the Supply Chain team "tops off" the supplies based on personal judgment, which often leads to waste. In addition, it is difficult to monitor performance and optimize supply levels with the lack of data analytics at our fingertips.

The Supply Chain is recommending the implementation of a Two-Bin Kanban system that simplifies the process, creating a clear signal for replenishment. This system would also come with an analytics dashboard tool that allows oversight to quickly identify process gaps and optimization opportunities. This solution has been presented to Patient Care Services and they have provided their endorsement. Three companies were considered, and Blue Bin Inc. was selected based on two main factors. First, Blue Bin provides resources to implement the program, teaching our staff how to use and manage the system, and second, a dashboard and analytics tool. The expectation is then, that our Supply Chain staff has the skill to implement, sustain, and optimize on our own for the future.

We would like to roll this out in two phases. Phase 1 of this implementation is planned to last 6 months. The cost to implement Phase 1 is \$331,000. While this was not included in the FY23 capital budget, we have had several items come under the budgeted amount this fiscal year. As a result, there is available capital to cover the expense.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to proceed with the implementation of Phase 1 of the Kanban System by Blue Bin Inc. and enter into the necessary contracts and proceed with the purchase in the amount not to exceed \$331,000.





Agenda Item: IV., G.

DATE: May 1, 2023

TO: Washington Township Health Care District Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Information Services move to Fremont Office Center

The Washington Hospital IS department currently occupies 16,191 rentable square feet at 39141 Civic Center Dr., suites 400/450. The current lease is set to expire July 31, 2023 and the Landlord is requiring a minimum of a 1-year lease extension.

The ideal situation for IS would be to remain close to the main hospital and 2500 Mowry and be in a hospital owned building, eliminating the lease expense for a non-revenue producing department. We have identified available space in the Fremont Office Center.

We received two bids for the construction cost to the suite. Below are the bids.

Ameca Construction:	\$512,520
Innovative Project Solutions:	\$707,360

After review, it was determined that Ameca Construction is the lowest responsible bidder. Additional costs include purchasing gently used cubicles and furniture along with IT equipment and cabling. The total Budget for this Project is as follows:

Construction Costs									
Construction including con	tingency <u>\$512,520</u>								
Total Construction costs	\$512,520								
FFE									
62 Cubicles and furniture	\$31,862								
Install existing furniture in	offices \$6,350								
IT equipment and cabling	<u>\$136,657</u>								
Total FFE	\$174,869								
Moving Costs	\$12,610								
Total Project Cost	\$699,999								

This project has been proposed for the Capital budget for FY2024. However, in order to complete the project prior to the current location lease expiration of July 31, 2023, the project needs to be started in the current fiscal year.

The staff recommends the Board adopt the following motions:

- 1. The Board hereby approves the budget for the IS Move to the Fremont Office Center Project for an amount not to exceed \$699,999.
- 2. The Board hereby approves Ameca Construction as the lowest responsible bidder for the IS Move to the Fremont Office Center Project and the CEO is hereby authorized to execute any and all contracts in connection with this Project consistent with the Board's approval.





Agenda Item: IV., H

DATE: May 3, 2023

TO: Washington Township Health Care District Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: Appointment of Safety Officer: Daniel O'Connell

We are required by The Joint Commission and other regulatory bodies to have our Governing Body appoint a Safety Officer. Dan O'Connell, Safety & Security Director, would be the appropriate individual to fill the role of Safety Officer. Mr. O'Connell is qualified for this position through education, training and experience. This appointment is recommended by both the Chief Executive Officer and the Washington Hospital Healthcare System Safety Committee.

The Safety Officer and his or her designees are authorized on behalf of the Safety Committee, and with the support of hospital management, to initiate appropriate and immediate remedial action, if failure to take such immediate action might result in personal injury to individuals, or damage to equipment or to other property.

The Safety Officer's authority to initiate remedial action shall be limited to cases of personal injury or damage to property and shall, when in the case of possible personal injury, be further limited to nonmedical and safety matters. The Safety Officer is not authorized to intervene in cases where treatment of the patient might be in question or when his or her education, training, and experience does not qualify him to act.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors approve the appointment of Daniel O'Connell as the Safety Officer. This appointment would be in place until revoked by the Governing Body.



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

May 10, 2023

Appointment of Safety Officer

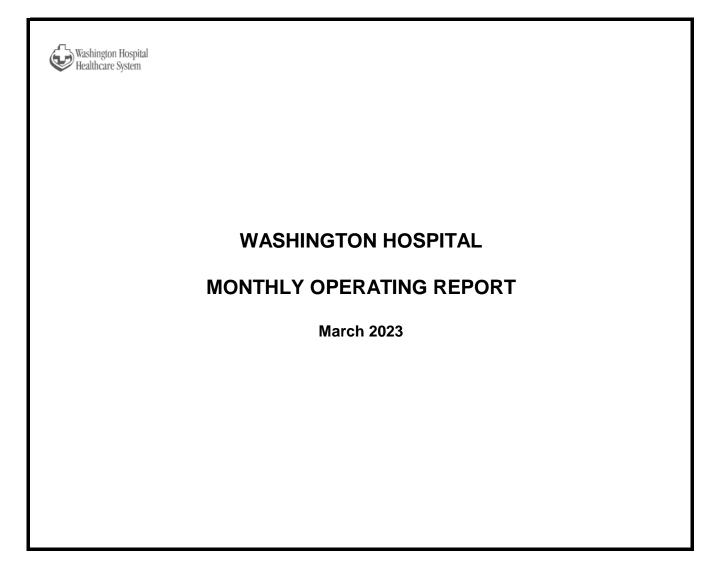
The Governing Body of Washington Hospital Healthcare System does hereby appoint Daniel O'Connell, Safety & Security Director, as the Safety Officer. Mr. O'Connell is qualified for this position through education, training and experience. This appointment is recommended by both the Chief Executive Officer and the Washington Hospital Healthcare System Safety Committee.

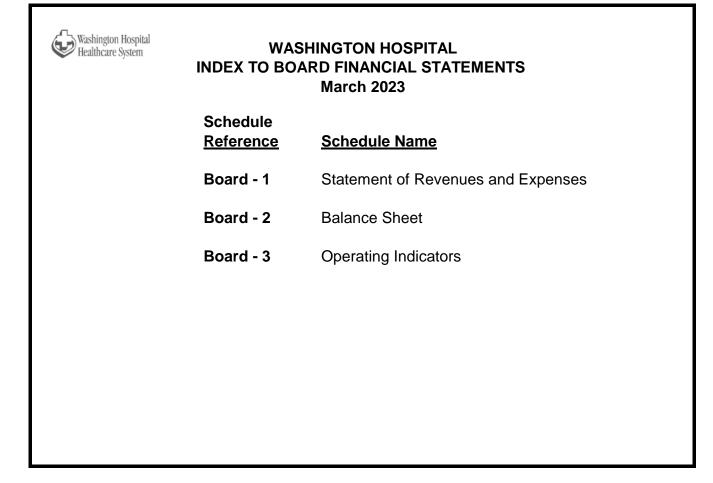
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This appointment is in place until revoked by the Governing Body.

Bernard Stewart, DDS, President Board of Directors Washington Township Health Care District







Memorandum

- **DATE:** April 30, 2023
- **TO:** Board of Directors
- **FROM:** Kimberly Hartz, Chief Executive Officer
- SUBJECT: Washington Hospital March 2023 Operating & Financial Activity

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

1. Utilization – Schedule Board 3

March	March	Current 12
<u>Actual</u>	Budget	Month Avg.
165.7	147.2	158.6
175.2	158.3	167.5
906	816	873
5,138	4,564	4,825
5.48	5.59	5.59
10,059	8,596	8,476
5,069	4,447	4,818
296	343	271
	<u>Actual</u> 165.7 175.2 906 5,138 5.48 10,059 5,069	Actual Budget 165.7 147.2 175.2 158.3 906 816 5,138 4,564 5.48 5.59 10,059 8,596 5,069 4,447

Comparison of March 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 March were 1,498.2, 117.1 above the budgeted level of 1,381.1. Nonproductive FTEs were 50.0 above Budget. Productive FTEs per adjusted occupied bed were 5.18, 0.52 below the budgeted level of 5.70. Total FTEs per adjusted occupied bed were 5.82, 0.44 below the budgeted level of 6.26.

3. Income - Schedule Board 1

For the month of March, the Hospital realized Net Operating Income of \$1,762,000 from Operations, a 3.57% Margin.

Total Gross Patient Revenue of \$216,305,000 for March was 12.70% above Budget.

Deductions from Revenue of \$168,301,000 were 77.81% of Total Gross Patient Revenue, above the budgeted amount of 77.09%.

Total Operating Revenue of \$49,409,000 was \$4,897,000 above the Budget by 11.00%.

Total Operating Expense of \$47,647,000 was higher than the Budget by \$4,974,000, 11.70%.

The Total Non-Operating Gain of \$2,743,000 for the month includes an unrealized gain on investments of \$2,138,000.

The Net Income for March was \$4,505,000, which was \$2,568,000 above the budgeted income of \$1,937,000, a 9.12% Margin.

The Total Net Gain for March 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 \$1,957,000 a 3.96% Margin compared to budgeted income of \$1,629,000 for a favorable variance of \$328,000.

4. Balance Sheet – Schedule Board 2

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

KIMBERLY HARTZ Chief Executive Officer

KH/TM

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

March						March								YEAR TO DATE					
AC	TUAL	в	UDGET	(U	FAV NFAV) VAR	% VAR.			ACT	UAL	в	JDGET	(U	FAV NFAV) VAR	% VAR.				
\$ 123,926 92,379		\$	116,616 75,344	\$	7,310 17,035	6.3% 22.6%	1 2	OPERATING REVENUE INPATIENT REVENUE OUTPATIENT REVENUE	. ,	61,575 14,728	\$1	,029,773 695,205	\$	31,802 19,523	3.1% 2.8%				
	216,305		191,960		24,345	12.7%	3	TOTAL PATIENT REVENUE	1,7	76,303	1	,724,978		51,325	3.0%				
(*	167,961) (340) 168,301)		(144,324) (3,655) (147,979)		(23,637) 3,315 (20,322)	-16.4% 90.7% -13.7%	4 5 6	CONTRACTUAL ALLOWANCES PROVISION FOR DOUBTFUL ACCOUNTS DEDUCTIONS FROM REVENUE	(1,3	47,099) 27,570) 74,669)	(1	,295,047) (32,842) , 327,889)		(52,052) 5,272 (46,780)	-4.0% 16.1% -3.5%				
	77.81%		77.09%				7	DEDUCTIONS AS % OF REVENUE	·	77.39%		76.98%							
	48,004		43,981		4,023	9.1%	8	NET PATIENT REVENUE	4	01,634		397,089		4,545	1.1%				
	1,405		531		874	164.6%	9	OTHER OPERATING INCOME		7,369		4,647		2,722	58.6%				
	49,409		44,512		4,897	11.0%	10	TOTAL OPERATING REVENUE	4	09,003		401,736		7,267	1.8%				
	23,179 6,021 6,045 6,803 1,721 3,878 47,647		20,257 5,286 5,622 5,563 2,004 3,941 42,673		(2,922) (735) (423) (1,240) 283 63 (4,974)	-14.4% -13.9% -7.5% -22.3% 14.1% 1.6% -11.7%	11 12 13 14 15 16 17	OPERATING EXPENSES SALARIES & WAGES EMPLOYEE BENEFITS SUPPLIES PURCHASED SERVICES & PROF FEES INSURANCE, UTILITIES & OTHER DEPRECIATION TOTAL OPERATING EXPENSE	: : ;	95,286 52,998 53,180 52,012 16,704 32,847 03,027		185,122 46,731 50,552 51,493 18,091 33,510 385,499		(10,164) (6,267) (2,628) (519) 1,387 <u>663</u> (17,528)	-5.5% -13.4% -5.2% -1.0% 7.7% 2.0% -4.5%				
	1,762		1,839		(77)	-4.2%	18	OPERATING INCOME (LOSS)		5,976		16,237		(10,261)	-63.2%				
	3.57%		4.13%				19	OPERATING INCOME MARGIN %		1.46%		4.04%							
\$	436 (254) (1,674) 57 517 - 1,523 2,138 2,743 4,505 9.12%	\$	196 - (1,773) 152 - - 1,523 - - 98 1,937 4.35%	\$	240 (254) 99 (95) 517 - - 2,138 2,645 2,568	122.4% 0.0% 5.6% -62.5% 0.0% 0.0% 0.0% 0.0% 2699.0% 132.6%	20 21 22 23 24 25 25 26 27 28 29 30	NON-OPERATING INCOME & (EXPENSE) INVESTMENT INCOME REALIZED GAIN/(LOSS) ON INVESTMENTS INTEREST EXPENSE RENTAL INCOME, NET FOUNDATION DONATION BOND ISSUANCE COSTS FEDERAL GRANT REVENUE PROPERTY TAX REVENUE UNREALIZED GAIN/(LOSS) ON INVESTMENTS TOTAL NON-OPERATING INCOME & EXPENSE NET INCOME (LOSS) NET INCOME MARGIN %	·	3,250 (998) 15,228) 434 517 14 550 13,625 (361) 1,803 7,779 1.90%	\$	1,897 - (15,960) 565 1,000 - 13,625 - 1,127 17,364 4.32%	\$	1,353 (998) 732 (131) (483) 14 550 - (361) 676 (9,585)	71.3% 0.0% 4.6% -23.2% -48.3% 0.0% 0.0% 0.0% 60.0% -55.2%				
\$	1,957	\$	1,629	\$	328	20.1%	31	NET INCOME (LOSS) USING FASB PRINCIPLES**	\$	4,780	\$	14,669	\$	(9,889)	-67.4%				
	3.96%		3.66%	<u> </u>				NET INCOME MARGIN %	<u> </u>	1.17%		3.65%							
	5.50 /0		5.00 /0							1.17 /0		5.05 /0							

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



WASHINGTON HOSPITAL BALANCE SHEET March 2023 (In thousands)

	ASSETS AND DEFERRED OUTFLOWS	 March 2023	Audited une 2022		LIABILITIES, NET POSITION AND DEFERRED INFLOWS	 March 2023	Audited une 2022
1 2 3	CURRENT ASSETS CASH & CASH EQUIVALENTS ACCOUNTS REC NET OF ALLOWANCES OTHER CURRENT ASSETS	\$ 12,019 67,279 21,315	\$ 5,439 76,757 13,050	1 2 3	CURRENT LIABILITIES CURRENT MATURITIES OF L/T OBLIG ACCOUNTS PAYABLE OTHER ACCRUED LIABILITIES	\$ 10,460 21,127 57,884	\$ 10,065 17,948 70,463
4	TOTAL CURRENT ASSETS	100,613	95,246	4 5	INTEREST TOTAL CURRENT LIABILITIES	 4,596 94,067	 10,516 108,992
	ASSETS LIMITED AS TO USE				LONG-TERM DEBT OBLIGATIONS		
6 6	BOARD DESIGNATED FOR CAPITAL AND OTHER GENERAL OBLIGATION BOND FUNDS	186,473 19,170	199,979 18,778	6 6	REVENUE BONDS AND OTHER	193,793	202,530
7 8	REVENUE BOND FUNDS BOND DEBT SERVICE FUNDS	6,681 16,139	6,610 32,494	7	GENERAL OBLIGATION BONDS	342,285	345,595
9 10	OTHER ASSETS LIMITED AS TO USE TOTAL ASSETS LIMITED AS TO USE	 9,689 238,152	 9,543 267,404			07.440	07.070
12	OTHER ASSETS	289,673	272,341	11 12	SUPPLEMENTAL MEDICAL RETIREMENT WORKERS' COMP AND OTHER	37,416 9,142	37,676 9,353
13	PREPAID PENSION	42,895	36,970				
14	OTHER INVESTMENTS	18,913	15,386				
15	NET PROPERTY, PLANT & EQUIPMENT	574,966	600,578	15	NET POSITION	551,751	543,971
16	TOTAL ASSETS	\$ 1,265,212	\$ 1,287,925	16	TOTAL LIABILITIES AND NET POSITION	\$ 1,228,454	\$ 1,248,117
17	DEFERRED OUTFLOWS	 27,953	 29,208	17	DEFERRED INFLOWS	 64,711	 69,016
18	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 1,293,165	\$ 1,317,133	18	TOTAL LIABILITIES, NET POSITION AND DEFERRED INFLOWS	\$ 1,293,165	\$ 1,317,133



WASHINGTON HOSPITAL OPERATING INDICATORS March 2023

		Mar	ch					YEAR 1	TO DATE	
12 MONTH AVERAGE	ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.			ACTUAL	BUDGET	FAV (UNFAV) VAR	% VAR.
						PATIENTS IN HOSPITAL				
158.6 8.9 167.5	165.7 <u>9.5</u> 175.2	147.2 <u>11.1</u> 158.3	18.5 (1.6) 16.9	13% -14% 11%	1 2 3	ADULT & PEDS AVERAGE DAILY CENSUS OUTPT OBSERVATION AVERAGE DAILY CENSUS COMBINED AVERAGE DAILY CENSUS	161.8 <u>8.7</u> 170.5	148.6 <u>11.0</u> 159.6	13.2 (2.3) 10.9	9% -21% 7%
8.2	9.3	7.5	1.8	24%	3 4	NURSERY AVERAGE DAILY CENSUS	8.3	7.8	0.5	6%
175.7	184.5	165.8	18.7	11%	5	TOTAL	178.8	167.4	11.4	7%
3.5	4.1	2.2	1.9	86%	6	SPECIAL CARE NURSERY AVERAGE DAILY CENSUS *	3.6	2.8	0.8	29%
4,825	5,138	4,564	574	13%	7	ADULT & PEDS PATIENT DAYS	44,336	40,724	3,612	9%
271	296	343	(47)	-14%	8	OBSERVATION EQUIVALENT DAYS - OP	2,394	3,022	(628)	-21%
873	906	816	90	11%	9	ADMISSIONS-ADULTS & PEDS	8,052	7,241	811	11%
5.59	5.48	5.59	(0.11)	-2%	10	AVERAGE LENGTH OF STAY-ADULTS & PEDS	5.48	5.62	(0.14)	-2%
						OTHER KEY UTILIZATION STATISTICS				
1.566	1.517	1.621	(0.104)	-6%	11	OVERALL CASE MIX INDEX (CMI)	1.547	1.606	(0.059)	-4%
166 25 10 173	185 23 11 176	146 31 15 170	39 (8) (4) 6	27% -26% -27% 4%	12 13 14 15	SURGICAL CASES JOINT REPLACEMENT CASES NEUROSURGICAL CASES CARDIAC SURGICAL CASES OTHER SURGICAL CASES	1,474 228 97 1,562	1,359 267 124 1,505	115 (39) (27) 57	8% -15% -22% 4%
374	395	362	33	9%	16	TOTAL CASES	3,361	3,255	106	3%
175	158	217	(59)	-27%	17	TOTAL CATH LAB CASES	1,507	1,957	(450)	-23%
123	143	112	31	28%	18	DELIVERIES	1,125	1,076	49	5%
8,476	10,059	8,596	1,463	17%	19	OUTPATIENT VISITS	79,291	78,747	544	1%
4,818	5,069	4,447	622	14%	20	EMERGENCY VISITS	44,140	40,972	3,168	8%
						LABOR INDICATORS				
1,401.1 207.4	1,498.2 185.4	1,381.1 135.4	(117.1) (50.0)	-8% -37%	21 22	PRODUCTIVE FTE'S NON PRODUCTIVE FTE'S	1,416.4 207.0	1,379.2 188.0	(37.2) (19.0)	-3% -10%
1,608.5	1,683.6	1,516.5	(167.1)	-11%	23	TOTAL FTE'S	1,623.4	1,567.2	(56.2)	-4%
5.24 6.02	5.18 5.82	5.70 6.26	0.52 0.44	9% 7%	24 25	PRODUCTIVE FTE/ADJ. OCCUPIED BED TOTAL FTE/ADJ. OCCUPIED BED	5.23 6.00	5.54 6.30	0.31 0.30	6% 5%



Memorandum

Agenda Item: VII., A.

DATE: May 3, 2023

TO: Washington Township Health Care District Board of Directors

FROM: Kimberly Hartz, Chief Executive Officer

SUBJECT: 2023 Community Health Needs Assessment

As required by federal regulations, WHHS has completed its 2023 Community Health Needs Assessment (CHNA). This comprehensive analysis of the health status of the residents of Washington Township Health Care District is conducted every three years, in order to determine the greatest health needs in the Tri-Cities area.

The CHNA incorporates analysis of health indicators collected by the State of California, Alameda County, and other public health agencies. The voices of District residents and publichealth experts are also included through key-informant interviews and focus groups.

Staff will present the results of the CHNA to city councils, school districts, advocacy groups, and community based organizations in the District to solicit additional feedback. This will then lead to the development of a Health Improvement Plan laying out a three-year blueprint addressing the health needs prioritized in the CHNA.

In accordance with District law, policies, and procedures, I request that the Board of Directors vote to accept the findings contained in the 2023 Community Health Needs Assessment.