

A meeting of the Board of Directors of the Washington Township Health Care District was held on Wednesday, July 8, 2020 via Zoom in order to comply with Governor Gavin Newsom's and Alameda County's mandatory orders to Shelter at Home to reduce the risk of spread of COVID-19. Director Wallace 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: Michael Wallace; William Nicholson, MD; Jeannie Yee; Jacob Eapen, MD; Bernard Stewart, DDS
Absent:

ROLL CALL

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

Guests: Ed Fayen, Chris Henry, Stephanie Williams, Tina Nunez, Paul Kozachenko, Larry Tramutola, Gisela Hernandez

Director Wallace welcomed any members of the general public to the meeting. He stated that Governor's Newsom's Executive Order N-29-20 explicitly waives The Brown Act provision that requires physical presence of members, the clerk or other personnel of the body, or of the public as a condition of participation in, or quorum for, a public meeting. He noted that Washington Township Health Care District continues to comply with the Brown Act in providing teleconference Dial-in information in order to provide the public the opportunity to attend the meeting and that Public Notice for this meeting, including dial-in information, was posted appropriately on our website. When asked if any members of the general public were in attendance and interested in speaking, there was no response.

OPENING REMARKS

Director Wallace presented the Consent Calendar for consideration:

CONSENT CALENDAR

- A. Minutes of the Regular Meetings of the District Board: June 10, 15, 22, and 24, 2020
- B. Medical Staff Credentialing Action Items

In accordance with District law, policies, and procedures, Director Eapen moved that the Board of Directors approve the Consent Calendar, items A and B.

Director Yee seconded the motion.

Roll call was taken:

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

The motion unanimously carried.

There were no Oral communications.

*COMMUNICATIONS:
ORAL*

There were no Written communications.

*COMMUNICATIONS:
WRITTEN*

Ed Fayen, Senior Vice President & Chief Operating Officer, presented the background and an update on the current Facility Master Plan. Phase One included the construction of the Central Plant which is rated by OSHPD as NPC 4 (Non-Structural Performance Category 4) and SPC 5 (Structural Performance Category 5). The definitions for NPC 4 and SPC 5 are as follows:

*PRESENTATION
FACILITY MASTER
PLAN and SEISMIC
UPDATE*

- NPC 4: The building meets the criteria for NPC “3” and all architectural, mechanical, electrical systems, components and equipment, and hospital equipment meet the bracing and anchorage requirements of Part 2, Title 24. All buildings must be at NPC4 by January 1, 2020 or 2030 depending on the Seismic Design Category and extension request requirements. (*California Administrative Code, Chapter 6, Table 11.1*)
- SPC 5: Buildings in compliance with the structural provisions of the Alquist Hospital Facilities Seismic Safety Act, and are reasonably capable of providing services to the public following strong ground motion. Buildings in this category will have been constructed or reconstructed under a building permit obtained through OSHPD. These buildings may be used without restriction to January 1, 2030, and beyond. (*California Administrative Code, Chapter 6, Table 2.5.3*)

Also included in Phase One was the CJR (Center for Joint Restoration) which was not in the original plan. The CJR was completed in 2013-14 with an OSHPD rating of NPC 4 and SPC 5.

Phase Two was the construction of the Morris Hyman Critical Care Pavilion which was completed in 2018. Its OSHPD rating is also NPC 4 and SPC 5. Phase Three includes constructing new buildings or retrofitting current ones to bring the rest of the campus into compliance with the seismic mandate by 2030.

Mr. Fayen noted that the six-story tower is OSHPD rated at SPC 2 / NPC 2 and will be upgraded to meet NPC 3 standards within the next year. He noted that the Operating Rooms, Catheterization Lab, and Laboratory in their current locations will not be OSHPD compliant after the 2030 deadline. While there have been discussion in the California Legislature about extending this deadline, no new legislation has been passed.

Mr. Fayen emphasized that the seismic deficiencies in Washington Hospital’s remaining facility structures must be addressed now so that new buildings or retrofitted structures will be on-line and operational by the 2030 deadline.

Chris Henry, Vice President & Chief Financial Officer, presented the Finance Report for May 2020. The average daily census was 128.2 with admissions of 762 resulting in 3,974 patient days. Outpatient observation equivalent days were 134. The average length of stay was 4.75 days. The case mix index was 1.477. Deliveries were 122. Surgical cases were 328. Joint Replacement cases were 152. Neurosurgical cases were 13. Cardiac Surgical cases were 4. The Outpatient visits

FINANCE REPORT

Board of Directors' Meeting

July 8, 2020

Page 3

were 4,728 and Emergency visits were 4,367. Total productive FTEs were 1,280.2. FTEs per adjusted occupied bed were 7.59. Mr. Henry noted the increase in Payor Mix was due to the increase in surgeries for senior patients and the resulting lower Medicare.

Kimberly Hartz, Chief Executive Officer, presented the Hospital Operations Report for June 2020 indicating that this was our first full month open. Preliminary information for the month indicated gross revenue at approximately \$165,859,000. The Average Length of Stay was 5.05 and there were 4,001 patient days. The Average Daily Census was 133.4. There were 380 Surgical Cases and 417 Cath Lab procedures at the Hospital. Deliveries were 114. Non-Emergency Outpatient visits were 6,196. Total Government Sponsored Preliminary Payor Mix was 69.5%, against the budget of 72.0%. Total FTEs per Adjusted Occupied Bed were 6.85. The Washington Outpatient Surgery Center had 392 cases and the clinics saw approximately 2,703 patients. Homeless Patient Total Encounters were 177 with an estimated unreimbursed cost of homeless care of \$490,000 for the month of June. The estimated total unreimbursed cost of homeless care for FY20 Year-to-Date is \$5.9M.

*HOSPITAL
OPERATIONS REPORT*

Ms. Hartz emphasized that the community not delay seeking health care. She also announced that Washington Hospital was named Best Hospital in the "Best of" awards.

ANNOUNCEMENTS

In accordance with Health & Safety Code Section 32106 and 32155, Director Wallace adjourned the meeting to closed session at 6:43 pm, as the discussion pertained to Medical Staff and Quality Assurance and Hospital trade secrets. Mr. Wallace stated that the public has a right to know what, if any, reportable action takes place during closed session. Since this is a teleconference call and we have no way of knowing when the closed session will end, the public was informed they could contact the District Clerk for the Board's report beginning July 9, 2020. He indicated that the minutes of this meeting will reflect any reportable actions.

*ADJOURN TO CLOSED
SESSION*

Director Wallace reconvened the meeting to open session at 7:30 pm and reported that no reportable action was taken in closed session.

*RECONVENE TO OPEN
SESSION & REPORT ON
CLOSED SESSION*

There being no further business, Director Wallace adjourned the meeting at 7:30 pm.

ADJOURNMENT

DocuSigned by:

Michael Wallace

Michael J. Wallace
President

DocuSigned by:

Bernard Stewart

Bernard Stewart, DDS
Secretary