

# 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

Monday, May 20, 2024 – 6:00 P.M.

Board Room of Washington Hospital, 2000 Mowry Avenue, Fremont and via Zoom <a href="https://zoom.us/j/92696607943?pwd=dVVrL1VIRUFDaUZoK0J5Zm9BWnN3dz09">https://zoom.us/j/92696607943?pwd=dVVrL1VIRUFDaUZoK0J5Zm9BWnN3dz09</a>

Password: 744198

#### Board Agenda and Packet can be found at:

May 2024 | Washington Hospital Healthcare System (whhs.com)
AGENDA

#### PRESENTED BY:

I. CALL TO ORDER & PLEDGE OF ALLEGIANCE

Jacob Eapen, MD 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. Jacob Eapen, MD Board President

A. Consideration of Two Thromboelastagraphy (TEG) 6s Analyzers

Motion Required

B. Consideration of Construction of Pad, Ramp, Workstation and Mobile MRI

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- V. ACTION
- VI. ANNOUNCEMENTS

#### VII. ADJOURN TO CLOSED SESSION

Jacob Eapen, MD Board President

A. Conference with Labor Negotiators pursuant to Government Code section 54957.6;

Agency designated representatives: Kimberly Hartz, CEO, Thomas McDonagh, Vice President and CFO

B. Conference with Legal Counsel – Anticipated Litigation pursuant to Government Code Section 54956.9(d)(2)

Number of Cases: Two Cases

- C. Conference involving Trade Secrets pursuant to Health & Safety Code Section 32106
  - Strategic Planning
- D. Conference involving Personnel Matters: Chief Executive Officer

# VIII. RECONVENE TO OPEN SESSION & REPORT ON PERMISSIBLE ACTIONS TAKEN DURING CLOSED SESSION

Jacob Eapen, MD Board President

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.



## Memorandum

**DATE:** May 20, 2024

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

**FROM:** Tina Nunez, VP Ambulatory Care and Administrative Services

Walter Choto, Chief of Ambulatory Care Services

**SUBJECT:** Request for Purchase and Install of Two Thromboelastography (TEG) 6s

Analyzers by Haemonetics

We are recommending the purchase of two Thromboelastography (TEG) 6s analyzers as we move towards being a Level II Trauma Center. The TEG analyzer is a self-contained hemostasis analyzer that uses Viscoelastic Testing (VET) technology which is designed to provide a complete testing of clotting properties of blood. It is a reliable way to determine the right blood product or therapy to manage a patient's risk for hemorrhage or thrombosis. This in turn can lead to less patient exposure to donor blood reducing morbidity, mortality, and can be cost effective. Here are some of the advantages in utilizing TEG 6s technology:

- Individualized goal directed coagulation management including Traumainduced Coagulopathy
- 2. Reduced utilization of inappropriate blood product leading to cost savings
- 3. Stratify risk of bleeding and/or thrombotic complications, platelet-related thrombosis or hemorrhage
- 4. Assess hypercoagulable states
- 5. Identify platelet function inhibition
- 6. Improve assessment of bleeding and ischemic event

The utilization of this equipment is critical for the trauma program and management of blood product utilization during cardiac surgeries. The purchase of 2 analyzers is due to the need to have system redundancy and capacity to perform additional viscoelastic testing when needed.

The purchase calculation is as follows:

DESCRIPTION	QUANTITY	PRICE		TRADE-IN CREDIT		TOTAL AFTER CREDIT	
TEG 6s	2	\$	41,995.00	\$	10,000.00	\$	73,990.00
Barcode Scanner	2	\$	600.00	\$	-	\$	1,200.00
Printer	2	\$	300.00	\$	-	\$	600.00
Tax						\$	7,768.48
Freight						\$	11,368.50
TEG Manager License Fee	1	\$	13,000.00	\$	-	\$	13,000.00
TEG Manager Software Maintenance	1	\$	4,000.00	\$	-	\$	4,000.00
TEG Manager Implementation	1	\$	5,000.00	\$	-	\$	5,000.00
TEG Validation	2	\$	300.00	\$	-	\$	600.00
TOTAL						\$	117,526.98

In accordance with District Law, Policies and Procedures, we are recommending that the Board of Directors authorize the Chief Executive Officer to proceed with entering into the necessary agreements with Haemonetics for the purchase of the two thromboelastography (TEG) 6s Analyzers in the amount not to exceed \$117,530. The total amount is included in the Fiscal Year 24 Fixed Asset Capital Budget.

# Memorandum

**DATE:** May 20, 2024

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

**FROM:** Tina Nunez, VP Ambulatory Care and Administrative Services

Walter Choto, Chief of Ambulatory Care

**SUBJECT:** Request for Construction of Pad, Ramp and Workstation for a mobile MRI and

authority for CEO to execute the 3-year agreement.

We are recommending moving forward with the placement of a mobile MRI unit next to the Morris Hyman Critical Care Pavilion (MHCCP) that we can operate to allow us to provide more timely MRI services to our emergency room patients and inpatients. In addition, with the upcoming trauma designation, it will be important that the MRI unit is adjacent to the MHCCP eliminating the time needed to ambulance transport the trauma patient to the existing MRI unit that is across the street.

Currently, when a patient in our emergency room or admitted to our hospital needs an MRI, they are transported via ambulance to the 2500 Mowry Avenue Building (Washington West) where the current MRI operated by Alliance Imaging is located. This MRI services both inpatients and outpatients. There are significant delays in the inpatients and emergency room patients obtaining their scan due to the limited availability of the MRI scanner and the requirement of the transportation services. This also is not ideal from a patient experience perspective. By having our own mobile MRI Unit adjacent to the MHCCP, we would be able to conduct MRI scans for both inpatients and emergency patients including trauma patients, without having to transport them via ambulance to the 2500 building. In addition, this would open up patient access on the outpatient schedule at the MRI unit at Washington West to allow patients to get their scans more timely.

We explored several mobile unit vendors and have selected the company Shared Medical Services. They will provide us a new unit and trailer through a lease arrangement and we would operate with our staff. The placement of this unit will require building a pad for the unit to sit on. In addition to the pad, a ramp to get the patients up to the unit and a workstation are needed. The total cost for this will be an amount not to exceed \$500,000. The unit will be here by September however we are working with the vendor to try to get it here sooner.

In accordance with District Law, Policies and Procedures, it is requested that the Board of Directors authorize the Chief Executive Officer to proceed with entering into the necessary agreements for the construction of the pad and ramp and also the purchase of the workstation in an amount not to exceed \$500,000 and to proceed with executing the three-year lease agreement with Shared Medical Services to provide the mobile MRI to be placed adjacent to the MHCCP. The total capital expense amount was not included in the Fiscal Year 24 Fixed Asset Capital Budget, but the cost will be covered by contingency funds that were budgeted in the FY24 Fixed Asset Capital Budget.