Hazel Hawkins
MEMORIAL HOSPITAL

REGULAR MEETING OF THE BOARD OF DIRECTORS
SAN BENITO HEALTH CARE DISTRICT
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA
THURSDAY, OCTOBER 23, 2025 – 5:00 P.M.
SUPPORT SERVICES BUILDING, 2ND FLOOR, GREAT ROOM
IN-PERSON AND BY VIDEO CONFERENCE

Members of the public may participate remotely via Zoom at the following link https://zoom.us/join with the following Webinar ID and Password:
Meeting ID: 991 5300 5433
Security Passcode: 007953

TELECONFERENCE LOCATION[1]:
Director Gabriel
923 Dana Drive
Redding, CA 96003

Mission Statement - The San Benito Health Care District is a public agency that serves as a responsive, comprehensive health care resource for its patients, physicians, and the health care consumers of the community.

Vision Statement - San Benito Health Care District is committed to meeting community health care needs with quality care in a safe and compassionate environment.

AGENDA

Presented By:

1. **Call to Order / Roll Call** (Johnson)

2. **Public Comment** (Johnson)
   This opportunity is provided for members to comment on the closed session topics, not to exceed three (3) minutes.

3. **Closed Session** (Johnson)
   See the Attached Closed Session Sheet Information

4. **Reconvene to Open Session**

5. **Closed Session Report** (Counsel)

[1] Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Gabriel from the address shown above. This notice and agenda will be posted at the teleconference location.

6. **Board Announcements** (Johnson)

7. **Public Comment** (Johnson)
This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on matters within the jurisdiction of this District Board, which are not otherwise covered under an item on this agenda. This is the appropriate place to comment on items on the Consent Agenda. Board Members may not deliberate or take action on an item not on the duly posted agenda. Written comments for the Board should be provided to the Board clerk or designee for the official record. Whenever possible, written correspondence should be submitted to the Board in advance of the meeting to provide adequate time for its consideration. Speaker cards are available.

8. **Consent Agenda – General Business** (Johnson)
The Consent Agenda deals with routine and non-controversial matters. The vote on the Consent Agenda shall apply to each item that has not been removed. A Board Member may pull an item from the Consent Agenda for discussion. One motion shall be made to adopt all non-removed items on the Consent Agenda.

- Consider and Approve Minutes of the Regular Meeting of the Board of Directors – August 28, 2025.

- Receive Minutes: District Bylaws / Policies and Procedures Committee -
  - August 25, 2025
  - September 22, 2025

A. Receive Officer/Director Written Reports
- Physician Services & Clinic Operations
- Skilled Nursing Facilities (Mabie Southside/Northside)
- Laboratory and Radiology
- Foundation
- Marketing
- PMO Project Summary

B. Consider and Approve Policies:
- Board Member Code of Conduct *(Revised)*
- Cleaning and Disinfecting Patient Care Equipment *(Revised)*
- Fall Prevention *(Revised)*
- Hand Hygiene *(Revised)*
- Organization-Wide Quality Assessment and Performance Improvement Program *(Revised)*

C. Consider and Approve Privileges:
- Nurse Practitioner Inpatient Privileges (*New*)
- Nurse Practitioner Inpatient Standardized Procedures (*New*)
- OBGYN (with addition of Urogynecology) (*Revised*)

Recommended Action: Approval of Consent Agenda Items (A) through (C).

- ▶ Board Questions
- ▶ Motion/Second
- ▶ Action/Board Vote-Roll Call

9. Receive Informational Reports

A. Chief Executive Officer (Verbal Report) (Casillas)

- Provider Needs Assessment/Community Health Needs Assessment

▶ Public Comment

B. Chief Nursing Officer (Descent)

- Dashboard – September 2025

▶ Public Comment

C. Chief Financial Officer (Robinson)

- Facilities Update – September 22, 2025
- Financial Statements – August 2025
- Finance Dashboard – August 2025
- Supplemental Payments – August 2025
- Facilities Update – October 20, 2025
- Financial Statements – September 2025
- Finance Dashboard – September 2025

▶ Public Comment

10. Action Items

A. Public Hearing and Consideration of Resolution No. 2025-06 Modifying the NUHW Bargaining Unit at San Benito Health Care District.

Recommended Action: Approve Resolution No. 2025-06 Modifying the NUHW Unit at San Benito Health Care District.

▶ Report
▶ Board Questions
▶ Public Comment
▶ Motion/Second
▶ Action/Board Vote-Roll Call

B. Consider and Approve New Board Member Remote Participation Policy.

Recommended Action: Approve New Board Member Remote Participation Policy.

▶ Report
▶ Board Questions
▶ Public Comment
▶ Motion/Second
▶ Action/Board Vote-Roll Call

11. Adjournment (Johnson)

The next Regular Meeting of the Board of Directors is scheduled for Thursday, November 20, 2025, at 5:00 p.m., Great Room.

The complete Board packet including subsequently distributed materials and presentations is available at the Board Meeting, in the Administrative Offices of the District, and posted on the District's website at https://www.hazelhawkins.com/news/categories/meeting-agendas/. All items appearing on the agenda are subject to action by the Board. Staff and Committee recommendations are subject to change by the Board.

Any public record distributed to the Board less than 72 hours prior to this meeting in connection with any agenda item shall be made available for public inspection at the District office. Public records distributed during the meeting, if prepared by the District, will be available for public inspection at the meeting. If the public record is prepared by a third party and distributed at the meeting, it will be made available for public inspection following the meeting at the District office.

Notes: Requests for a disability-related modification or accommodation, including auxiliary aids or services, to attend or participate in a meeting should be made to District Administration during regular business hours at 831-636-2673. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

Please note that room capacity is limited and available on a first-come, first-served basis.

SAN BENITO HEALTH CARE DISTRICT BOARD OF DIRECTORS
October 23, 2025

AGENDA FOR CLOSED SESSION

Pursuant to California Government Code Section 54954.2 and 54954.5, the board agenda may describe closed session agenda items as provided below. No legislative body or elected official shall be in violation of Section 54954.2 or 54956 if the closed session items are described in substantial compliance with Section 54954.5 of the Government Code.

CLOSED SESSION AGENDA ITEMS

☐ **LICENSE/PERMIT DETERMINATION**
(Government Code §54956.7)

Applicant(s): (Specify number of applicants)_____

☐ **CONFERENCE WITH REAL PROPERTY NEGOTIATORS**
(Government Code §54956.8)

☒ **CONFERENCE WITH LEGAL COUNSEL-EXISTING LITIGATION**
(Government Code §54956.9(d)(1))

Name of cases: PERB Case Nos. SF-CE-2231-M and SF CE 2232-M

☐ **CONFERENCE WITH LEGAL COUNSEL-ANTICIPATED LITIGATION**
(Government Code §54956.9)

☐ **LIABILITY CLAIMS**
(Government Code §54956.95)

Claimant: (Specify name unless unspecified pursuant to Section 54961):
Agency claimed against: (Specify name): _____.

☐ **THREAT TO PUBLIC SERVICES OR FACILITIES**
(Government Code §54957)

Consultation with: (Specify the name of law enforcement agency and title of officer):_____

☐ **PUBLIC EMPLOYEE APPOINTMENT**
(Government Code §54957)

Title:

☐ **PUBLIC EMPLOYMENT**
(Government Code §54957)

Title:

☐ **PUBLIC EMPLOYEE PERFORMANCE EVALUATION**
(Government Code §54957)

(Specify position title of the employee being reviewed):

Title:

☐ **PUBLIC EMPLOYEE DISCIPLINE/DISMISSAL/RELEASE**
(Government Code §54957)

(No additional information is required in connection with a closed session to consider discipline, dismissal, or release of a public employee. Discipline includes potential reduction of compensation.)

☒ **CONFERENCE WITH LABOR NEGOTIATOR**
(Government Code §54957.6)

Agency designated representative: Anne Olsen
Employee organization: NUHW

☒ **CONFERENCE WITH LABOR NEGOTIATOR**
(Government Code §54957.6)

Agency designated representative: Anne Olsen
Unrepresented employees

☐ **CASE REVIEW/PLANNING**
(Government Code §54957.8)
(No additional information is required to consider case review or planning.)

☐ **REPORT INVOLVING TRADE SECRET**
(Government Code §37606 & Health and Safety Code § 32106)

Discussion will concern: (Specify whether discussion will concern proposed new service, program, or facility):

1. Trade Secrets, Strategic Planning, Proposed New Programs, and Services.

Estimated date of public disclosure: (Specify month and year):

☒ **HEARINGS/REPORTS**
(Evidence Code Sections 1156 and 1157.7; Health and Safety Code Section 32106)

Subject matter: (Specify whether testimony/deliberation will concern staff privileges, report of medical executive committee, or report of quality assurance committee):

1. Report – Quality / Credentials

☐ **CHARGE OR COMPLAINT INVOLVING INFORMATION PROTECTED BY FEDERAL LAW** (Government Code §54956.86)

(No additional information is required to discuss a charge or complaint pursuant to Section 54956.86.)

ADJOURN TO OPEN SESSION

Hazel Hawkins
MEMORIAL HOSPITAL

REGULAR MEETING OF THE BOARD OF DIRECTORS
SAN BENITO HEALTH CARE DISTRICT
SUPPORT SERVICES BUILDING, 2ND-FLOOR, GREAT ROOM
IN PERSON AND BY VIDEO CONFERENCE

WEDNESDAY, AUGUST 28, 2025
5:00 P.M.
MINUTES

Directors Present
Bill Johnson, Board Member
Devon Pack, Board Member
Victoria Angelo, Board Member
Nick Gabriel, Board Member - (Absent)
Josie Sanchez, Board Member

Also Present
Mary Casillas, Chief Executive Officer
Mark Robinson, Chief Financial Officer
Karen Descent, Chief Nursing Officer
Amy Breen-Lema, Vice President, Ambulatory & Physician Services
Suzie Mays, Vice President, Information & Strategic Services
Heidi A. Quinn, District Legal Counsel

1. **Call to Order/Roll Call**
   Director Johnson called the meeting to order at 5:00 PM. A quorum was present, and attendance was taken by roll call. Directors Johnson, Pack, Angelo, and Sanchez were present; Director Gabriel was absent.

2. **Board Announcements**
   Director Johnson announced that CEO, Mary Casillas was nominated for ACHD CEO of the year.

3. **Public Comment**
   An opportunity for public comment was provided, and individuals were given three minutes to address the Board Members and Administration.

   Public comment was received from Mr. Fendler.

4. **Consent Agenda - General Business**
   A. Consider and Approve Minutes of the Regular Meeting of the Board of Directors –

   - July 24, 2025
   - June 26, 2025 amended.

B. Receive Officer/Director Written Reports - No action required.
- Provider Services & Clinic Operations
- Skilled Nursing Facilities (Mabie Southside/Northside)
- Laboratory and Radiology
- Foundation Report
- Public Relations (No Report)
- PMO Project Summary Report

C. Consider and Approve Policies:
- Identification and Reporting of Suspected Victims of Abuse and Domestic Violence *(Revised)*
- IV Contrast Medial Administration *(Revised)*
- MRI Incidents & Near Miss Policy *(New)*
- Allergic Protocol *(Revised)*
- Diagnostic Imaging Equipment Service and Maintenance Contracts *(Revised)*
- Mammography Radiologist & Technologist Qualifications and Requirements *(Revised)*
- Radiology & Ultrasound Student Programs *(Revised)*
- Antimicrobial Stewardship Program in Long-Term Care *(New)*

Director Johnson presented the consent agenda items to the Board for action. This information is included in the Board packet.

MOTION: By Director Pack to approve the Consent Agenda – General Business, Items (A-C); Seconded by Director Sanchez.

Moved/Seconded/ Carried. Ayes: Directors Johnson, Pack, Angelo, and Sanchez. Approved 4-0-1 by roll call; Director Gabriel was absent.

5. Receive Informational Reports

A. Chief Executive Officer (Verbal Report)
- Transaction Update

Ms. Casillas provided her verbal CEO report, which included information regarding HR1.

An opportunity for public comment was provided, and comments were received from Mr. Fendler (written comments were also provided) and Mr. Swett.

B. Chief Nursing Officer
- Dashboard – July 2025

Ms. Descent provided a report that is included in the packet.

An opportunity was provided for public comment; no comments were received.

C. Facilities and Finance Committee – August 28, 2025
- Facilities Update
- Financial Statements – July 2025
- Finance Dashboard – July 2025
- Supplemental Payments – July 2025

Mr. Robinson provided his CFO report, which included an update on the helipad, financial statements, dashboard, and supplemental payments. These reports are included in the Board packet.

An opportunity was provided for public comment; no comment was received.

6. **Action Items**

A. Consider and Approve a Three (3) year Commercial Lease Agreement with K&S Market, Inc. for 890 Sunset Drive, Suite A-2A.

Ms. Breen-Lema provided a report; materials are included in the packet

An opportunity for public comment was provided; comment was received from Mr. Fendler.

MOTION: By Director Pack to approve the three (3) year Commercial Lease Agreement with K&S Market, Inc. for 890 Sunset Drive, Suite A-2A; Seconded by Director Johnson.

Moved/Seconded/ Carried: Ayes: Directors Johnson, Pack, Angelo, and Sanchez. Motion approved 4-0-1 by roll call; Director Gabriel was absent.

B. Consider Rescheduling or Canceling Next Regular Meeting of the Board of Directors, September 25, 2025.

Ms. Casillas provided a verbal report.

An opportunity for public comment was provided; no comment was received.

MOTION: By Director Johnson to Approve Canceling the Next Regular Meeting of the Board of Directors, September 25, 2025, unless there is a need to meet on an emergency basis; Seconded by Director Angelo.

Moved/Seconded/ Carried: Ayes: Directors Johnson, Pack, Angelo, and Sanchez. Approved 4-0-1 by roll call; Director Gabriel was absent.

7. **Public Comment**

An opportunity for public comment on the closed session items was provided; no public comment was received.

8. **Closed Session**

President Johnson announced the items to be discussed in the Closed Session, as listed on the posted Agenda: a) Conference with Legal Counsel – Existing Litigation; Government Code §54956.9(d)(1). b) Conference with Legal Counsel-Anticipated Litigation/Initiation of litigation pursuant to § 54956.9(d)(4); c) Significant exposure of litigation pursuant to § 54956.9(d)(2); and d) Hearing/Report, Credentials, Evidence Code Sections 1156 and 1157.7; Health and Safety Code Section 32106(b).

The members of the Board entered into a closed session at 6:06 pm.

9. **Reconvene Open Session/Closed Session Report**

The Board of Directors reconvened to open session at 7:41 p.m. Counsel stated that two (4) items were discussed

Under item a) Conference with Legal Counsel – Existing Litigation - a report was provided with no reportable action; b) Conference with Legal Counsel-Anticipated Litigation - a report was provided with

no reportable action; c) Conference with Legal Counsel-Anticipated Litigation/Significant exposure of litigation - report was provided with no reportable action.

Under item d) Hearings/Reports, credentials were received and approved by the board on motion of Director Johnson, Seconded by Director Pack, by a vote of 4-0-1 by roll call; Director Gabriel was absent.

10. **Adjournment:**
There being no further regular business or actions, the meeting was adjourned at 7:42 p.m.
The next Regular Meeting of the Board of Directors is scheduled for Thursday, October 23, 2025, at 5:00 p.m.

Hazel Hawkins
MEMORIAL HOSPITAL

DISTRICT BYLAWS / POLICIES AND PROCEDURES COMMITTEE

AUGUST 25, 2025 – 3:00 PM

GREAT ROOM, 2ND-FLOOR, SUPPORT SERVICES BUILDING

MINUTES

Mission Statement -The San Benito Health Care District is a public agency that serves as a responsive, comprehensive health care resource for its patients, physicians, and the health care consumers of the community.

Vision Statement - San Benito Health Care District is committed to meeting community health care needs with quality care in a safe and compassionate environment.

Committee Members Present
Josie Sanchez, Board Member (Chair)
Devon Pack, Board Member
Mary Casillas, Interim CEO

Also Present
Heidi Quinn, Legal Counsel
Laura Garcia, Executive Assistant

1. Call to Order
   The meeting of the Bylaws/Policies and Procedures Committee was called to order at 3:05 pm by Director Sanchez.

2. Consider and Approve Minutes of the District Bylaws/Polcies and Procedures Committee – June 20, 2025

   Motion: By Director Sanchez, to approve the minutes of the Distrect Bylaws/Polcies and Procedures Committee – June 20, 2025, Seconded by Director Pack, and was unanimously approved.

3. Review of Policies
   - Access to District Records – The policy was reviewed with no revisions.
   - Public Records Request – The policy was reviewed with no revisions.
   - Adherence to Board Bylaws – The policy was reviewed with recommendations for revision.

- Board Member Code of Conduct – The policy was reviewed with recommendations for revision.

4. Create Policy
   - Policy Regarding Remote Attendance – The committee provided direction to draft a policy regarding remote attendance by the board of directors.

5. Consider and Approve Schedule of Future Meetings (Commmittee)

   The Committee did not identify a date and time for the next meeting.

6. Adjournment
   There being no further regular business, the meeting was adjourned at 4:08 p.m.

Committee Members
Josie Sanchez, BOD Secretary (Chair)
Devon Pack, BOD Assistant Secretary
Mary Casillas, Chief Executive Officer

Hazel Hawkins
MEMORIAL HOSPITAL

DISTRICT BYLAWS / POLICIES AND PROCEDURES COMMITTEE
SEPTEMBER 22, 2025 – 2:00 PM
GREAT ROOM, 2ND-FLOOR, SUPPORT SERVICES BUILDING

IN PERSON ONLY

TELECONFERENCE LOCATION[1]:
Director Pack
2922 Kennebec Lane
Columbia, CA

MINUTES

Mission Statement -The San Benito Health Care District is a public agency that serves as a responsive, comprehensive health care resource for its patients, physicians, and the health care consumers of the community.

Vision Statement - San Benito Health Care District is committed to meeting community health care needs with quality care in a safe and compassionate environment.

Committee Members Present
Josie Sanchez, Board Member (Chair)
Devon Pack, Board Member (Via Teleconference)
Mary Casillas, Interim CEO

Also Present
Heidi Quinn, Legal Counsel
Laura Garcia, Executive Assistant

1. Call to Order
   The meeting of the Bylaws/Policies and Procedures Committee was called to order at 2:00 pm by Director Sanchez.

2. Consider and Approve Minutes of the District Bylaws/Policies and Procedures Committee – June 20, 2025

[1] Pursuant to Government Code section 54953(b), Director Pack participated by teleconference. The notice and agenda was posted at the teleconference location.

Motion: By Director Sanchez, to approve the minutes of the District Bylaws/Policies and Procedures Committee – August 25, 2025, Seconded by Director Pack, and was unanimously approved.

3. Review New Policies for Recommendation
    - Board Member Code of Conduct – Direction was provided to forward the policy to the board recommending approval.
    - Remote Attendance – Direction was to forward the policy to the board recommending approval.

4. Review Existing Policies
    - Area of Concern – The Committee requested the policy be referred to the CNO for review.
    - Board Member Roster – The Committee requested review and revisions, and directed it be brought back to the Committee.
    - Board Relationship to Auxiliary – The Committee reviewed with no change.
    - Board Relationship to the Foundation – The Committee reviewed with no change. Confidentiality – The Committee requested review and revisions, and directed it be brought back to the Committee.
5. Consider and Approve Schedule of Future Meetings (Committee)

    The Committee agreed to meet Monday, October 20, 2025 at 10:30 am.

6. Adjournment
    There being no further regular business, the meeting was adjourned at 2:49 p.m.

Committee Members
Josie Sanchez, BOD Secretary (Chair)
Devon Pack, BOD Assistant Secretary
Mary Casillas, Chief Executive Officer

Hazel Hawkins
MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors
From: Amy Breen-Lema, Vice President, Clinic, Ambulatory & Physician Services
Date: Sept 10, 2025
Re: All Clinics – August 2025

August 2025 Rural Health and Specialty Clinics' visit volumes

Clinic Location	Total visits current month	Total visits prior month (July 2025)
Orthopedic Specialty	489	447
Multi-Specialty	602	655
Sunset	791	771
Surgery & Primary Care*	281	283
San Juan Bautista	284	311
1st Street	746	696
4th Street	1,066	1,111
Barragan	574	532
Total	**4,833**	**4,806**

**127 primary care and 154 specialty visits*

Provider recruitment activities with anticipated start dates by specialty:

- Family Practice Physician Assistant: Loc Do, P.A. – September 2025.

We are pleased to introduce Dr. Elaine Lee who has joined our Surgery Clinic. Dr. Lee is a General Surgeon with a subspecialty focus in breast surgery. She comes to us from the Bay Area Gynecology Oncology Group, bringing a wealth of expertise and a strong reputation for compassionate, patient-centered care. Dr. Lee will be a tremendous asset to our clinics, enhancing access to high-quality surgical services and expanding the specialized care we can provide to our community.

We also welcomed Dr. Lourdes Grayson, Psychologist, to our First Street Clinic. Dr. Grayson will be providing both in-person and virtual visits, expanding access to behavioral health services for our patients. With many years of experience in psychology, she brings a depth of knowledge and compassionate approach that make her an ideal addition to our behavioral health team. Her presence strengthens our commitment to delivering comprehensive, patient-centered care across all aspects of health and wellness.

Hazel Hawkins
MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors
From: Amy Breen-Lema, Vice President, Clinic, Ambulatory & Physician Services
Date: October 8, 2025
Re: All Clinics – Sept. 2025

September 2025 Rural Health and Specialty Clinics' visit volumes

Clinic Location	Total visits current month	Total visits prior month (August 2025)
Orthopedic Specialty	503	489
Multi-Specialty	633	602
Sunset	812	791
Surgery & Primary Care*	337	281
San Juan Bautista	264	284
1st Street	701	746
4th Street	1,119	1,066
Barragan	534	574
Total	**4,903**	**4,833**

- *186 Primary Care visits and 151 specialty visits*

In September, we welcomed full-time family practice physician assistant Loc Do, PA-C, to our clinical team. He brings many years' experience and has recently relocated back to Hollister, where he and his family have returned to their home in the community. Loc has been warmly received by both staff and patients, and we are excited to have him join our organization.

We continue active recruitment efforts for primary care and specialty providers to meet the growing needs of our community.

Hazel Hawkins
MEMORIAL HOSPITAL

Mabie Southside/Northside Skilled Nursing Facility
Board Report – September 2025

To: San Benito Health Care District Board of Directors

From: Jaylee Davison, Interim Director of Nursing, Skilled Nursing Facility

1. Census Statistics: August 2025

Southside	2025	Northside	2025
Total Number of Admissions	15	Total Number of Admissions	3
Number of Transfers from HHH	14	Number of Transfers from HHH	3
Number of Transfers to HHH	6	Number of Transfers to HHH	2
Number of Deaths	1	Number of Deaths	2
Number of Discharges	15	Number of Discharges	4
Total Discharges	16	Total Discharges	4
Total Census Days	**1274**	**Total Census Days**	**1411**

Note: Transfers are included in the number of admissions and discharges. Deaths are included in the number of discharges. Total census excludes bed hold days.

2. Total Admissions: August 2025

Southside	From	Payor	Northside	From	Payor
6	HHMH	Medicare	1	HHMH	Hospice
2	HHMH	CCA	1	HHMH	CCA
1	VA Palo Alto	Medicare	1	HHMH	Medicare
1	Re-Admit Stanford	CCA			
1	Re-Admit HHMH ER	Medical			
1	Re-Admit HHMH ER	CCA			
1	Re-Admit HHMH	Medicare			
1	Re-Admit HHMH Obs.	Medical			
1	Re-Admit HHMH Obs.	Medicare			
Total: 15			**Total:**		

3. Total Discharges by Payor: August 2025

Southside	2025	Northside	2025
Medicare	10	Medicare	1
Medicare MC	0	Medicare MC	0
CCA	3	CCA	1
Medical	2	Medical	0
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	1	Hospice	2
Private (self-pay)	0	Private (self ay)	0
Insurance	0	Insurance	0
Total:	**16**	**Total:**	**4**

4. Total Patient Days by Payor: August 2025

Southside	2025	Northside	2025
Medicare	339	Medicare	36
Medicare MC	0	Medicare MC	0
CCA	769	CCA	1118
Medical	90	Medical	104
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	45	Hospice	143
Private (self-pay)	31	Private (self-pay)	0
Insurance	0	Insurance	0
Bed Hold / LOA	11	Bed Hold / LOA	10
Total:	**1285**	**Total:**	**1411**
Average Daily Census	**41.45**	**Average Daily Census**	**45.52**

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Mabie Southside/Northside Skilled Nursing Facility
Board Report –October 2025

To: San Benito Health Care District Board of Directors

From: Jaylee Davison, Interim Director of Nursing, Skilled Nursing Facility

1. Census Statistics: September 2025

Southside	2025	Northside	2025
Total Number of Admissions	16	Total Number of Admissions	8
Number of Transfers from HHH	12	Number of Transfers from HHH	7
Number of Transfers to HHH	6	Number of Transfers to HHH	3
Number of Deaths	1	Number of Deaths	1
Number of Discharges	11	Number of Discharges	2
Total Discharges	12	Total Discharges	2
Total Census Days	**1308**	**Total Census Days**	**1,374**

Note: Transfers are included in the number of admissions and discharges. Deaths are included in the number of discharges. Total census excludes bed hold days.

2. Total Admissions: September 2025

Southside	From	Payor	Northside	From	Payor
7	HHMH	Medicare	1	Katherine Health	CCA
2	St. Louise	Medicare	3	HHMH	Medicare
1	Stanford	Medicare	1	HHMH/Re-Admit	Medicare
1	Barton Health	Medicare	1	HHMH	CCA
4	HHMH/Re-Admit	CCA	1	HHMH/Re-Admit	CCA
1	HHMH/Re-Admit	Hosp.	1	Home	Medi-Cal
Total: 16			**Total: 8**		

3. Total Discharges by Payor: September 2025

Southside	2025	Northside	2025
Medicare	6	Medicare	1
Medicare MC	0	Medicare MC	0
CCA	5	CCA	0
Medical	0	Medical	0
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	1	Hospice	1
Private (self-pay)	0	Private (self ay)	0
Insurance	0	Insurance	0
Total:	**12**	**Total:**	**2**

4. Total Patient Days by Payor: September 2025

Southside	2025	Northside	2025
Medicare	323	Medicare	39
Medicare MC	0	Medicare MC	0
CCA	851	CCA	1122
Medical	66	Medical	100
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	38	Hospice	106
Private (self-pay)	30	Private (self-pay)	0
Insurance	0	Insurance	0
Bed Hold / LOA	18	Bed Hold / LOA	7
Total:	**1326**	**Total:**	**1374**
Average Daily Census	**44.20**	**Average Daily Census**	**45.80**

Hazel Hawkins
MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors
From: Bernadette Enderez, Director of Diagnostic Services
Date: October 2025
Re: Laboratory and Diagnostic Imaging

Updates:

Laboratory

1. Quality Assurance/Performance Improvement Activities
   - Update on chemistry analyzer project → 90% assay validation completed. Interface validation on going.
   - Phase 2A construction update → Construction ongoing with estimated completion 11/2025. Phase 2B to start after Phase 2A.
   - Successful completion of the TJC laboratory survey.

2. Laboratory Statistics

	September 2025	2025 YTD
Total Outpatient Volume	4464	38434
Main Laboratory	1408	11621
Mc Cray Lab	980	8336
Sunnyslope Lab	489	3795
SJB and 4th Street	104	788
ER and ASC	1483	13894
Total Inpatient Volume	157	1503

Diagnostic Imaging

1. Quality Assurance/Performance Improvement Activities
   - Preparation for multi-modality trailer pad proposal
   - Successful completion of the CDPH survey for Radiology and Mammography

Hazel Hawkins
MEMORIAL HOSPITAL

2. Diagnostic Imaging Statistics

	September 2025	2025 YTD
Radiology	1788	16477
Mammography	604	6132
CT	1072	8939
MRI	207	1814
Echocardiography	113	1003
Ultrasound	750	6870

Hazel Hawkins Hospital
FOUNDATION
Caring for Our Community

TO: San Benito Health Care District Board of Directors
FROM: Liz Sparling, Foundation Director
DATE: October 2025
RE: Foundation Report for August & September

September Foundation Board Meeting:

The Foundation Board of Directors met on September 11 and had two presentations:

- Mishel Thomas, HHMH Clinic Operations Director, Rural Health Clinics & Specialty Offices presented an equipment request for a Portable Breast Ultrasound Machine.
- JayLee Davison, Interim Director of Nursing at the Skilled Nursing Facilities presented the need for 20 medical grade chairs for the Skilled Nursing Facilities, 10 for each location.

Finance Committee

a. Financial Report	**August**
1. Income	$ 38,772.29
2. Expenses	$ 0.00
3. New Donors	2
4. Total Donations	176

Allocations:

1. $100,000 for the Tranquility Rooms at Mabie Northside and Mabie Southside Skilled Nursing Facilities from a grant from the Community Foundation for SBC.
2. $68,000 for a Portable Ultrasound Machine from INVEST Campaign Funds.
3. Up to $10,000 for Medical Grade Chairs for the Skilled Nursing Facilities from the Mabie Northside and Mabie Southside Foundation Funds.

Directors Report:

- The Palliative Care room is finished and it looks beautiful. Thank you Jeri Hernandez for all your hard work generous gifts and thank you Dr. LaCorte for all her support on the project.
- Working on the Tranquility Rooms. The project is underway and the rooms have been painted a beautiful light blue with gray and green undertones. All of the equipment and supplies have been ordered. We are waiting for items to deliver to place in the rooms. Some items had 45 day wait time so hopefully have them by the end of next month.
- Met with Hospice Giving Foundation this week. I shared with them the Palliative Care room update and the Tranquility Room Project and they were very impressed. I would love to get back on their grant cycle so we will start exploring options and I will report back.
- The San Benito County Fair is October 3, 4, 5. A portion of our Hospital Booth is dedicated to the Foundation.
- I am on the Board for San Benito Leadership Institute and they selected their National Philanthropy Day recipient and it is our own Mishel Thomas. The Leadership Board was very impressed with her growth in the program last year and she has become a spokesperson for the program.

Fundraising Committee:

- As of July 31, there have been 2,143 total donations to our current campaign, "Invest in the Future of San Benito County Healthcare, We Deserve It" raising $1,233,959.24.

Nominating Committee:

- We have three open Board positions. Ann Marie Barragan is terming out, Charlie Bedolla and Shari Hubbel will not be committing to a second term. Our Committee will have recommendations at the October Board meeting. We are also working on our selection for National Philanthropy Day honoree.

Dinner Dance Committee

- Currently have $72,350 in Sponsorships. Thank you to those of you who have gotten your sponsorships in, please get your sponsorships in ASAP.
- Update on Auctions items. Online auction is underway for the all-inclusive trip to Cancun. It closes tomorrow at 5pm. Please bid on it if you can!
- We have also secured live auction items for the event including: Courtside Warriors Tickets, Capitola Beach Cottage, Hidden Lake House, Dinner with Dr. Bogey at Irene and Ted Davis' House, Dinner for 8 at the Inn at Tres Pinos with wine and transportation, San Juan Oaks Golf Package, Parking at the Hospital and a Calera Mt. Harlen Tasting & Magnum bottle of wine. Working on enhancing all these items to make the packages even more amazing.

Hazel Hawkins Hospital
FOUNDATION
Caring for Our Community

August Board Meeting:
The Foundation Board of Directors met on August 14 and had three presentations. The Board did not meet in July, therefore June's Financials are presented below.

- Mendi Suber-Ventura, HHMH Director of Surgical Services presented a request for a Hana® Orthopedic Surgical Table for the Surgery Center.
- Dr. LaCorte gave an update on the Palliative Care Suite Upgrade in Med/Surg and End of Life Services Program at HHMH.
- Mishel Thomas, HHMH Clinic Operations Director, Rural Health Clinics & Specialty Offices presented a flooring request for Barragan Family Diabetes Center.

Financial Report

	June	July
1. Income	$ 15,208.09	$ 130,439
2. Expenses	$ 87,040.18	$ 504,400 (Money Market $500K)
3. New Donors	9	0
4. Total Donations	161	193

Allocations:

- $1500 for Furniture for the upgrade for the Palliative Care Suite in Med/Surg.
- $79,000 for a Hana® orthopedic surgical table for the Surgery Center from our Invest Campaign funds (Splitting total cost of $150k with HHMH).
- Up to $30,000 for new flooring for the Barragan Family Diabetes Center.

Directors Report:

- Received the Community Foundation grant for the Tranquility Room in the Skilled Nursing Facilities. The project is underway. Also met with the Visiting Nurses Association as they have a music therapy grant from the Community Foundation. They have two sessions scheduled this month.
- The Palliative Care room is also underway as Dr. LaCorte shared.
- Met with Sunlight Giving Foundation and they are going to request that we get on a three year grant cycle so we don't have to meet every year. They were very impressed with our accomplishments over the past year. Traditionally they give us $75K a year.
- World Breastfeeding Day went really well. It is a Community event put on at HHMH and we as the Foundation provide funds for prizes.
- Scholarship thank you notes were received from: Mishel Thomas, Kendra Lema, Emery Sparling and Jennifer Gonzales. Last month the note from Lacey Granger was shared. Jennifer also made us a crocheted rose.
- Need to start thinking about a new Board Member. Ann Marie will be terming out this year. Charlie, Amy, Shari and Kay will end their first term.

- Philanthropy Day will be celebrated on November 6. Please be thinking of a Foundation supporter that we can honor.
- Working on our audit to be submitted by the end of Sept.

Fundraising Committee:

- As of July 31, there have been 2,071 total donations to our current campaign, "Invest in the Future of San Benito County Healthcare, We Deserve It" raising : $1,190,711.02.

Dinner Dance Committee

- Currently have $28,600 in sponsorships, the invitation packet is at the printer now. I am sorry for my error on the sponsorship benefits page.
- Update on Auctions items. Received a donation to an all - inclusive trip to Cancun but the dates are set for Nov 25-Dec 2– Committee recommendation to do an online auction in September for this. I am researching online platforms.
- Have "Save the Date" cards if anyone would like them to give to out.
- The Dinner Dance Committee selected the donors of the year:
    - Donors of the Year: Jun and Annette Estrada, Business Donor of the Year: Hollister Women's Health – Dr. Ralph and Deborah Armstrong & Heart for Hazel Award: Mary Ann Barragan

Hazel Hawkins MEMORIAL HOSPITAL

Board of Director's Report October 2025

Marketing/Public Relations

MARKETING

- **Social Media Posts Posted on Facebook & LinkedIn**

Preview		Views	Interactions
 'Tis the Season to get your flu shot! Flu Shots are now available throughout the community. Con... Published • Today at 8:01 AM	•••	277	2
 This week HHH employees participated in our annual Skills Day. Skills Days are mandatory annu... Published • Oct 17 at 1:39 PM	•••	6,053	60
 Today was International ShakeOut Day, where 58.2 million participants worldwide registered to t... Published • Oct 16 at 3:53 PM	•••	1,667	15
 This week we are celebrating National Healthcare Security and Safety Week. Thank you to Dale ... Published • Oct 13 at 4:05 PM	•••	12,075	127
 October is National Physical Therapy Month. We are proud of the excellent services our PT/OT s... Published • Oct 13 at 12:28 PM	•••	7,172	89
 This week we have quite a few celebrations for our Healthcare Recognition Weeks. Today we cel... Published • Oct 9 at 2:58 PM	•••	7,081	99
 Our hearts go out to the entire REACH/CalStar team, our community partners and first respond... Published • Oct 7 at 9:19 PM	•••	7,198	172
 Congratulations to our team for a 1st place win on our Fair Booth! Many thanks to Frankie, Liz, J... Published • Oct 3 at 12:54 PM	•••	5,526	101
Stop by at visit our booth at the #sanbenitocountyfair ! What's Going On in Hollister CA. Published • Oct 3 at 9:06 AM	•••	1,665	7
 We're ready for the Fair! Stop by for a visit at our booth in the Pavilion and get some of our fun ... Published • Oct 3 at 8:56 AM	•••	1,479	22
 October is Breast Cancer Awareness Month If you are uninsured now is the time to schedule you... Published • Oct 1 at 4:31 PM	•••	790	7
 Consider giving the "Gift of Life" by donating blood. Our next Blood Drive takes place on Tuesd... Published • Sep 23 at 1:45 PM	•••	1,054	6
 Every year the HHH Auxiliary hosts a Resident's Day event for our Skilled Nursing residents whe... Published • Sep 19 at 10:33 AM	•••	4,042	39
No text content Published • Sep 18 at 2:13 PM	•••	1,071	10

- **Social Media Posts Posted on Facebook & LinkedIn**

	Today we celebrated Environmental Services Week with our amazing housekeeping staff. Our ve... Published • Sep 18 at 2:12 PM	•••	9,412	85
	Hazel Hawkins Expands Women's Health Services *Gynecologic Oncologist and Breast Surgi... What's Going On In Hollister CA. Published • Sep 12 at 2:15 PM	•••	1,840	6
	Hazel Hawkins Expands Women's Health Services Gynecologic Oncologist and Breast Surgical S... Published • Sep 12 at 2:12 PM	•••	1,406	20
	Hazel Hawkins Hospital is pleased to be expanding our service line of Women's Health Services ... What's Going On In Hollister CA. Published • Sep 12 at 9:56 AM	•••	5,754	40
	Hazel Hawkins Hospital is pleased to be expanding our service line of Women's Health Services ... Published • Sep 12 at 9:44 AM	•••	7,377	945
	Final hours to bid! Auction ends at 5:00 pm today. Published • Sep 12 at 9:29 AM	•••	645	1
	The HHH Foundation's Auction is now LIVE for an all-inclusive vacation to Cancun! Support a gr... Published • Sep 4 at 10:00 AM	•••	752	3
	October is Breast Cancer Awareness Month If you are uninsured, underinsured or have a high de... Published • Sep 3 at 3:49 PM	•••	959	7
	On this Labor Day we pay tribute to our employees, physicians and volunteers for their contribu... Published • Sep 1 at 7:30 AM	•••	909	10
	In observance of the Labor Day Holiday on Monday, September 1st, our outpatient service hour... Published • Aug 31 at 8:18 PM	•••	1,112	4
	We have an absolutely amazing staff in our Physical Therapy department and on Friday, an outs... Published • Aug 30 at 3:43 PM	•••	20,529	219
	Check out this amazing online auction for a week-long getaway to an all-inclusive resort in Canc... Published • Aug 28 at 10:46 AM	•••	1,247	7
	What's better than a cold popsicle on a warm day?? Yesterday we celebrated National Popsicle ... Published • Aug 27 at 2:26 PM	•••	3,308	27
	Passing along information from our community partner, San Benito Fire Safe Council. Please tak... Published • Aug 27 at 2:21 PM	•••	986	3

EMPLOYEE ENGAGEMENT

Employees:

- Hazel's Headlines
- September 19 - String Cheese Day
- September 29 - El Guapo Food Truck
- October 30 - Candy Corn Day
- October Recognition Weeks:

National Physical Therapy Month
5 – 11 National Healthcare Supply Chain Week
5 – 11 Healthcare Food Service Workers Week
5 – 11 Physician Assistant Week
5 – 11 Emergency Nurses Week
12 – 18 Case Management Week
12 – 18 National Healthcare Security & Safety Week
10 – 16 Perinatal Nurses Week (OB)
19 – 25 Healthcare Quality Week
19 - 25 National Patient Account Management Week (Business Office)
19 – 25 National Pharmacy Week
10/27 – 11/2 National Health Care Facilities and Engineering Week
19 - 25 National Respiratory Care Week

- Halloween Events:

⇒ Costume Contest
⇒ Pumpkin Carving Contest
⇒ Food Trucks
⇒ Casual for a Cause Blue Jean Day

COMMUNITY ENGAGEMENT

- October 3 - 5 : Hospital booth at San Benito County Fair (Interacted with approximately 1200 visitors)
- October 18: VFW Post 9242 Carnival for Special Needs children - Provided beach balls, first aid kits and first aid supplies for first aid booth.

PHYSICIAN PROMOTION

- Promoting new Women's Services; Dr. Lilja and Dr. Lee

MEDIA

- Mary interviewed with KSBW 's Erin Clark for their Health Watch segment.

Press Releases:
- HHMH Finalist for California Breastfeeding Coalition Hospital of the Year
- HHMH Expands Women's Services
- HHMH's ED and OB Departments Recognized for Excellence in Patient Safety

Project Dashboard - October Board

Project Name	Purpose	Start Date	Go Live	Duration	Status	Priority	HCAI	Key Stakeholder	Role	Update
Inovalon	Nurse Scheduling Software	12/6/2024	11/1/2025	330	In Progress	Low		Jac Fernandez	Senior Director of Acute Care Services	Planned HR credentialing program. Staff training and mock scheduling in progress
HUGS/Securitas	Infant Security	4/12/2024	TBD	0	In Progress	High		Jac Fernandez	Senior Director of Acute Care Services	Subcontractors are fulfilling cabling requirements - starting 9/22 planned 4-5 weeks before Securitas can perform next steps to program system
BD Installation	New Pyxis Machines	12/4/2024	TBD	0	In Progress	Medium		Naveen Ravela	Pharmacy Director	ASC has been ruled off and going to city of Hollister is no longer required. We will look to add Pyxis units into the pharmacy in the main hospital and add to existing. ICU and OB are ready for construction to begin.
BD Pharmacy Keeper	IV Compounding Verification	11/14/2024	TBD		In Progress	High		Naveen Ravela	Pharmacy Director	Pending Meditech resolving a ticket
Lab Remodel	Lab Phase 1: Analyzer Validation		2/1/2026		In Progress	High		Bernadette Enderez	Lab/Radiology Director	Currently on 60-70% of the validation process. (project will not officially close out until Lab Phase 2 is completed and ready analyzers to move to permanent location)
Lab Remodel	Lab Phase 2: Analyzer Replacement	6/3/2024	2/1/2026	608	Ongoing	High		Bernadette Enderez	Lab/Radiology Director	Construction is underway. Apprx 10-15% through schedule. No current impediments to progress.
OR Remodel	Updating OR per OSHPD Requirements	11/20/2024	12/31/2025	406	In Progress	High		Mendi Suber-Ventura	Director of Surgical Services	Pending internal investigation for smaller/cheaper part replacement to see if sufficient fix
Seismic	Upgrade to Meet HCAI Seismic Compliance & Safety Standards	TBD	TBD		Ongoing	High		Doug Mays	Senior Director Support Services	Planning with architects

Project Dashboard - October Board

MRI Upgrade	Proposal submitted	TBD	TBD		On Hold	Low		Bernadette Enderez	Lab/Radiology Director	Proposal submitted
*Radiology Masterplan	Assessment of equipment and remodel	11/1/2025	TBD		On Hold	High		Bernadette Enderez	Lab/Radiology Director	Meeting to be scheduled to discuss requirements
*Imaging Trailer Pad Make Ready	Treanor to help when MP starts	TBD	TBD		On Hold	Medium		Bernadette Enderez	Lab/Radiology Director	Working with vendor to determine suitable method of installation/trailer delivery method.
*Verkada	Security / SSO + Door Access	3/11/2025	TBD		In Progress	High		Jorge Ramirez	Director of Emerg Mgmt & Security	HCAI has approved the project, pending contractor being assigned to issue building permit. (awaiting proposal) Test door has been activated, planning for other equipment to be programmed.
Willdan Energy Solutions	GK12 Program: 9 locations where we can have new water heaters at no cost to the district.	8/29/2025	TBD		In Progress	Medium		Doug Mays	Senior Director Support Services	Planning with internal and the general contractor team for permitting and installation dates
Sterilizer Replacement	installation of new AMSCO 400 48 SD equipment for Sterile Processing Department	9/16/2025	TBD		In Progress	High		Doug Mays	Senior Director Support Services	Initial kickoff meetings with architects and engineering team. Once receive 50% CD set with set up advertisement for bid
Focus Sports Therapy	Renovate and expand Focus sports therapy clinic	7/1/2025	TBD		In Progress	Medium		Doug Mays	Senior Director Support Services	2nd schematic design meeting completed, onsite visit scheduled 10/14 to solidify design.
Physical Therapy Clinic Remodel	Expanding current location to help with ongoing demand	6/1/2025	TBD		On Hold	High		Jun Estrada	Director of Physical Therapy	Continued meetings with facilities, IT, security and internal team for planning and requirements.

Project Dashboard - October Board

Soleran	Replace current engineering ticketing system	1/1/2025	7/1/2025		In Progress	Medium		Doug Mays	Senior Director Support Services	Go Live was 9/29 for corrective work orders. Preventative and Planned Work Orders in progress.
ED Helipad	System is an AFFF system and no longer allowed in CA. Is required to be phased out due to being a hazardous chemical.	1/14/2025	TBD		In Progress	High		Doug Mays	Senior Director Support Services	(E) Emergency HCAI project planned for demolition, proposal received from The Core Group. (S) Regular HCAI project planned for installation.
Nurse Call System	Replace	9/10/2024	TBD		On Hold	High		Jac Fernandez	Senior Director of Acute Care Services	Pricing details collected and presented for review.
Imprivata Forward Advantage Single Sign-On	Enable fast, secure access to clinical systems, improving workflow efficiency and supporting HIPAA compliance.	6/16/2025	TBD		In Progress	High		Salomon Mercado	Director of IT	Successful rollout to ICU, OB, Med/Surg, Emergency Department, Ambulatory Surgery, and OB. Next phase to include Clinics, Lab, Radiology, and Respiratory Therapy.
Immuware Employee Health Software	Streamline employee health tracking, automate compliance reporting & improve visibility of immunizations, exposures, & health screenings.	6/27/2025	Mid-November		In Progress	High		Elizabeth Von Urff	Director, Employee Health/WC	interface mapping phase, focusing on defining and aligning data fields to ensure accurate and consistent information exchange.
Intranet	Intranet redesign and update.	6/27/2026	9/29/2025		Completed	High		Frankie Gallagher	Director Marketing and Public Relations	The intranet system was successfully launched and is now accessible to users.
Tranquility Rooms	Dedicated therapeutic low sensory rooms at William & Inez Mabie Northside and Southside Skilled Nursing Facilities.	7/24/2025	12/11/2025		In Progress	High		Liz Sparling	Director Foundation	Both rooms progressing on schedule. Key items ordered and installation work underway.
Meditech Expanse MaaS Implementation	Electronic Health Record	9/17/2025	7/1/2026		In Progress	High		Suzie Mays	VP, Information and Strategic Services	Vendor contracts near completion. Access to Expanse MaaS October 2, 2025. Dictionary development meetings underway.

Project Dashboard - October Board

CT Scanner	Replace	TBD	TBD		In Progress	High		Bernadette Enderez	Lab/Radiology Director	Both CT's that we have need repairs.
Galen Healthcare Solutions	Galen will archive eCW data that cannot be migrated to Meditech Expanse.	8/13/2025	TBD		In Progress	Medium		Salomon Mercado	Director Information Technology	Server is ready and access setup is underway.
E-Priv	Platform that provides real-time, read-only access to provider info, including privileging data.	8/1/2025	9/17/2025		Completed	Medium		Brittney Slibsager	Director Medical Staff Services	Platform is launched and accessible by users.
Totals										

TASK STATUS %

STATUS	COUNT	%
Not Started	0	0%
In Progress	17	68%
Overdue	0	0%
On Hold	5	20%
Ongoing	2	8%
Completed	1	4%
TOTAL	**25**	**100%**

PROJECT PRIORITY %

PRIORITY	COUNT	%
High	18	72%
Medium	5	20%
Low	2	8%
TOTAL	**25**	**100%**

	estimated go-live
	planned go live
*	possible new/not started

PENDING ITEMS

Decisions	
Actions	
Change Requests	2

SUBJECT: Board Member Code of Conduct

PURPOSE:

The purpose of this policy is to ensure that the San Benito health Care District (SBHCD) Board of Directors upholds the highest standards of ethical and professional conduct. Board members are entrusted with governing in a manner that reflects integrity, transparency, collaboration, and accountability to the community, while complying with state and federal laws, including the Ralph M. Brown Act and AB 1234.

POLICY:

~~The following Code of Conduct was adopted by the San Benito Health Care District Board of Directors on July 20, 2022, to describe the expectations of each Board member during and after their service.~~

~~As a member of the San Benito Health Care District Board of Directors I will:~~ In order to assist with the behavior between and among members of the District Board of Directors and District Staff, the following shall be observed:

General Conduct

- Represent the best interests of the ~~San Benito Health Care~~ District and its constituents' ~~members and the association; Be a positive example to others at San Benito Health Care District in both my attitude and actions,~~ acting ~~at all times~~ with honesty, integrity, diligence, competence, and good faith.
- Become and ~~stay~~ remain knowledgeable about the Board's bylaws, policies, and applicable laws. ~~and procedures;~~
- Become well-informed about ~~each matter~~ matters coming before the Board and participate actively in Board and committee discussions. ~~for decision;~~
- ~~Bring matters to the Board's attention that I believe may have a significant effect on the well-being of San Benito Health Care District members' or the association;~~
- ~~Participate actively in Board and committee discussions;~~
- ~~Listen carefully to other members and consider their opinions respectfully, particularly if they differ from mine;~~ Respect and consider differing viewpoints while listening attentively and engaging constructively.
- ~~Respect and~~ sSupport ~~majority~~ decisions of the majority once made even if personally dissenting, and refrain from undermining Board actions.~~, even if I disagree with the result;~~
- ~~Acknowledge conflicts that arise between my personal interests and the Board's activities, identifying them early and withdrawing from related discussions and votes;~~
- ~~Maintain, in accordance with the law, the confidentiality of information provided to me in my role as a Board member;~~
- ~~Refer member complaints promptly and directly to the Board Chair and appropriate Association staff.~~
- ~~Surrender all information related to San Benito Health Care District matters to my successor, but continue to maintain related duties of confidentiality;~~
- ~~Comply with all San Benito Health Care District policies and procedures to support a work environment that discourages any form of inappropriate conduct, harassment, discrimination, or retaliation;~~

- Recognize and respect the ~~differentiation~~ distinction between governance (Board role) and operations (staff role). ~~responsibilities~~.

Conflicts of Interest & Confidentiality

- Board members must promptly disclose potential conflicts of interest, recuse themselves form related deliberations, and comply with applicable law.
- Confidential information obtained through closed sessions are exempt from disclosure under the Public Records Act must not be shared with unauthorized individuals.
- Board members shall surrender all records and information to their successors upon leaving office, while continuing to honor confidentiality obligations.

Communication & Community Relations

- Member complaints should be referred to the Board Chair and/or Chief Executive Officer for appropriate handling.
- Board members shall be courteous and respectful in all communications with constituents, staff and fellow Directors.
- No Director may speak publicly on behalf of the Board unless they are willing to discuss at the Board meetings.

Professional Standards

- Board members will support a work environment free of harassment, discrimination, or retaliation.
- Safety concerns shall be promptly reported to the Chief Executive Officer or designated staff. Emergencies require immediate action by conducting appropriate authorities.
- Directors shall work collaboratively, treating colleagues with dignity and focusing on issues rather than personalities.

Meeting Conduct

- Board members shall comply with the Ralph M. Brown Act and follow Rosenberg's Rules of Order.
- Directors shall seek clarification on agenda items through the Chief Executive Officer prior to meetings to ensure informed decision-making.
- Differing perspectives are welcome, but discussions must remain respectful and professional.

Discipline for Violations

Violations of the Code of Conduct may result in progressive discipline, considering the severity of the conduct:

- Advisory Letter – Notice of conduct inconsistent with the Code.
- Admonition Letter – With or without corrective action such as training.
- Public Censure – Formal statement of disapproval, potentially with corrective measures.
- Referral – In cases of willful misconduct or unlawful disclosure, matters may be referred to legal authorities or the grand jury as permitted by law.

Acknowledgement

Each Board Member shall sign an acknowledgement of this Code of Conduct, affirming their commitment to abide by its principles during and after their service.

~~I will not:~~

- ~~Share opinions elsewhere that I am unwilling to discuss before the Board or its committees;~~

- ~~Decide how to vote before hearing discussion and becoming fully informed;~~
- ~~Interfere with duties and activities of other Board members;~~
- ~~Speak publicly on behalf of the Board unless specifically authorized to do so.~~

Signature Date

Hazel Hawkins
MEMORIAL HOSPITAL

MEMORANDUM

To: Board of Directors

From: Suzie Mays
Vice President, Information & Strategic Services

Date: October 14, 2025

Re: Policies for Approval

Please find below a list of policies with a summary of changes for Board of Directors approval. All revised policies are available for review upon request. New policies are included in the packet.

Policy Title	**Summary of Changes**
Cleaning and Disinfecting Patient Care Equipment	Revised – Restructured policy to align with current process of cleaning and disinfecting equipment. Updated references.
Fall Prevention	Revised – Now incorporates pediatric and adult into one policy.
Hand Hygiene	Revised – Edited hygiene opportunities to align with CDC, APIC, and SHEA/IDSA guidelines. Added requirements for Infection Control Committee approval for hand sanitizer and lotion products. Updated references.
Organization-Wide Quality Assessment and Performance Improvement Program	Revised – Updated per CMS requirement.

Delineation Of Privileges

Nurse Practitioner- Inpatient

Provider Name:

Privilege	
In order to be eligible to request clinical privileges for both initial appointment and reappointment, a practitioner must meet the following minimum threshold criteria: • Education: Completion of an accredited Nurse Practitioner or Physician Assistant program • Licensure: Current licensure as a Registered Nurse and Nurse Practitioner, or Physician Assistant in the State of California • Board Certification: Current national board certification as a Nurse Practitioner (ANCC, AANP, or equivalent) • Possession of current BLS certification • Required Clinical Experience: Documentation of training and experience of requested privileges and a minimum of fifty (50) patient care activities by the NP providing services for patients for the preceding two (2) years If the applicant meets the above criteria, he/she may request privileges as specified below	
Perform inpatient rounds and document progress notes.	___
Order and adjust medications, including controlled substances, within approved formulary and standardized procedures.	___
Obtain complete medical histories and perform physical examinations, identifying normal and abnormal findings	___
Order, perform, and/or interpret diagnostic and screening studies appropriate to patient care needs.	___
Collect and order specimens for routine laboratory testing, screening, and therapeutic procedures, including blood and blood products.	___
Order and coordinate ancillary services, including physical therapy, occupational therapy, respiratory therapy, radiology, and nursing services.	___
Obtain informed consent when indicated.	___
Initiate and coordinate hospital admissions, transfers, and discharges, including completion of required documentation.	___
Provide and coordinate patient education, health counseling, and ongoing care management	___
Suturing of minor lacerations.	___
Advanced: Insertion/removal of IV lines, urinary catheters, and nasogastric tubes*	___
*Documentation of training and competency required	
Wound Care- Nurse Practitioner* In order to apply for the privileges listed below, you must meet the above criteria AND the following • Provide documentation of formal wound care education (certificate course, continuing education, or specialty training) that covered debridement techniques, dressing applications, and use of advanced wound care modalities • Submit evidence of a minimum of fifty (50) inpatient or outpatient wound care patient care activities within the past 24 months If the applicant meets the above criteria, he/she may request privileges as specified below	
Core: Wound Care Privileges • Perform comprehensive wound assessments. • Cleanse, irrigate, and provide topical wound management. • Order diagnostic and laboratory studies related to wound management. • Educate patients, caregivers, and staff on wound care/prevention	___
Advanced: Application and management of negative pressure wound therapy (NPWT)*	___
*Documentation of training and competency required	
Advanced: Application of advanced/biologic dressings and skin substitutes*	___

Delineation Of Privileges

Nurse Practitioner- Inpatient

Provider Name:

Privilege	

Acknowledgement of Practitioner

I have requested only those privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise.

Signed: _____

Date:_____

Department Chair Recommendation

Allprivilegesdelineatedhavebeenindividuallyconsideredandhavebeenrecommendedbased upon the physician's specialty, licensure, specific training, experience, health status, current competence and peer recommendations

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

[ ] Recommend all requested privileges
[ ] Recommend privileges with the following conditions/modifications:
[ ] Do not recommend the following requested privileges:

Supervising Physician Signature_____

Print Name_____

Date_____

Department Chair Signature_____

Print Name_____

Date_____

INPATIENT- NURSE PRACTITIONER STANDARDIZED PROCEDURES AND PROTOCOLS

Hazel Hawkins Memorial Hospital

POLICY:

These standardized procedures (SPs) authorize credentialed Nurse Practitioners (NPs) at Hazel Hawkins Memorial Hospital to provide inpatient medical care under the supervision of a collaborating physician, consistent with state law, hospital bylaws, and Joint Commission standards.

The Nurse Practitioner agrees to follow the Standardized Procedures/Process Protocols stated below in adherence to the Nurse Practice Act in California Business and Professional Code, Division 2, Chapter 6, Article 8, Sections 2834- 2837.

PURPOSE:

To define the scope of practice, responsibilities, and collaborative requirements for inpatient NPs to ensure safe, effective, and consistent patient care delivery in the hospital setting.

PROCEDURE:

A. DEVELOPMENT AND APPROVAL OF STANDARDIZED PROCEDURES

As a collaborative effort, the Collaborating/Supervising Physicians and Nurse Practitioners of the San Benito Healthcare District have developed the following Standardized Procedures for use in the inpatient setting. Signature on this document denotes acceptance of the procedures and protocols outlined herein.

All Nurse Practitioners and supervising physicians are required to signify agreement with these protocols following the approval process. By signing the Nurse Practitioner Agreement, each individual affirms approval of all policies and protocols contained in this document, intent to abide by the established Process Protocols, and commitment to maintaining a collegial and collaborative relationship with all parties. Nurse Practitioners and physicians who join the staff mid-year, or who provide coverage, must also sign to indicate their agreement. The Medical Staff Office is responsible for ensuring that each clinical area maintains a fully executed written agreement

B. SUPERVISION

a. General Supervision: NPs may evaluate and manage patients independently but must maintain access to a supervising/collaborating physician for consultation at all times.

b. Direct Supervision: Required for procedures and interventions designated as requiring demonstration of competency or when required on the privilege form.

C. CORE INPATIENT NURSE PRACTIONER RESPONSBILITIES

NPs may:

1. Perform admission history and physical examinations.
2. Order, interpret, and act on diagnostic studies (lab, imaging, EKG, etc.).
3. Develop and implement treatment plans in collaboration with supervising physician.
4. Order and adjust medications, including controlled substances (DEA registration required).
5. Order and collect specimens for diagnostic and therapeutic purposes.

6. Perform daily patient rounds and document progress notes.
7. Initiate referrals and consultations to specialty services.
8. Order nursing, dietary, physical therapy, occupational therapy, respiratory therapy, and social services.
9. Provide patient/family teaching and discharge planning.
10. Initiate hospital admissions, transfers, and discharges (per hospital policy).

D. PROCEDURES AUTHORIZED WITH DEMONSTRATED COMPETENCY

- Basic wound care (dressing changes, irrigation, non-selective debridement).
- Advanced wound care (Negative pressure wound therapy (NPWT), selective/sharp debridement) – requires separate competency verification.
- Insertion/removal of IV lines, urinary catheters, and nasogastric tubes.
- Central line management (not insertion, unless specifically credentialed).
- Suturing of minor lacerations.
- Code response participation, including ACLS interventions (must have active ACLS certification for ACLS interventions).

E. INFORMED CONSENT

NPs must obtain informed consent for treatments and procedures within their scope of practice. Documentation must follow hospital consent policy and be obtained prior to the start of the procedure.

F. QUALITY

a. Each NP's performance under these standardized procedures shall be reviewed at least every eight (8) months through the hospital's OPPE process.

b. Each Nurse Practitioner will be subject to initial proctoring through the Focused Professional Practice Evaluation (FPPE) process and will have an additional audit of ten (10) random charts per year. For advanced procedures, the supervising physician will directly observe and proctor the first five (5) cases to ensure competency prior to independent practice.

G. COMPETENCY REQUIRMENTS

- Maintain current unrestricted RN and NP licensure in California.
- Maintain furnishing number and DEA registration (if prescribing controlled substances).
- Maintain BLS certification.
- Demonstrate initial competency through supervised clinical practice.
- Participate in ongoing performance improvement and continuing education.
- Maintain a designated supervising physician at all times throughout their appointment, ensuring supervision is continuously in place during all periods of practice within the hospital.

H. TERM AND TERMINATION:

This agreement is effective as of the initial or reappointment date and will remain in effect until the next scheduled reappointment period, or is terminated by either party. Termination must be made in writing with at least 30 days' notice unless an immediate termination is warranted due to safety, licensure, or compliance issues.

If the Supervising Physician no longer wishes to supervise the NP, the following steps will be taken:

- The Supervising Physician will provide written notice to the NP and the Medical Executive Committee.
- The NP must immediately cease any activities requiring the supervision of that Supervising Physician, but may continue providing services under this Practice Agreement under the supervision of one or more other Supervising Physician(s) who have signed this Agreement.
- If no Supervising Physicians are willing to supervise the NP, the NP must immediately case providing services under this Practice Agreement unless and until a new Supervising Physician executes this Agreement.

- The Medical Staff office must be notified of any such changes to update credentialing records and clinical privileges.

Declaration: Our signatures below signify that we fully understand the foregoing Standardized Procedures and Protocols for Nurse Practitioner practice and agree with its terms without reservation.

Nurse Practitioner:

Name: _____

Signature: _____

Supervising Physician(s):

Name: _____

Signature: _____

Specialty: _____

Approved by:
- Interdisciplinary Practice Committee (IDPC)
- Medical Executive Committee (MEC)
- Board of Directors

Hazel Hawkins Memorial Hospital

Delineation Of Privileges

OBSTETRICS AND GYNECOLOGY

Provider Name:

Privilege	
In order to be eligible to request clinical privileges for both initial appointment and reappointment, a practitioner must meet the following minimum threshold criteria: • Education: M.D. or D.O. • Formal Training: The applicant must demonstrate successful completion of an ACGME or AOA approved post-graduate residency program in Obstetrics & Gynecology. • Certification: Board Certification by the American Board of Obstetrics and Gynecology, or active participation in the process leading to certification. • Successful completion of an ACOG-endorsed course that includes current NICHD nomenclature • Current NRP certification recommended • Required Clinical Experience: The applicant for initial appointment or reappointment must be able to demonstrate that he/she has satisfactorily performed services as an attending physician in the past 24 months for at least: 50 obstetrical hospital patients for the Obstetric Core, including 5 cesarean sections and 30 gynecologic hospital patients for the Gynecology Core, including 5 major abdominal adnexal or uterine surgeries, laparotomy or laparoscopic If the applicant meets the above criteria, he/she may request privileges as specified below	
OB/GYN Core Privileges	
Obstetric Core: Privileges include admission, workup, consultation, diagnosis, and the treatment of female patients of all ages presenting in any condition of pregnancy. These privileges include cesarean sections, vacuum extraction Low/Outlet, forceps extraction Low/Outlet, external cephalic version, OB ultrasound (limited, AFI, fetal position), resuscitation of infant, newborn circumcision, amniocentesis, post-partum bilateral tubal ligation, simple repair of umbilical or incisional hernia at time of another OB/Gyn procedure, repair at delivery of rectovaginal fistula, and all other procedures related to normal and complicated pregnancies. Also included are privileges for ICU management of patients in any phase of pregnancy, including post partum.	___
Gynecology Core: Privileges also include admission, workup, consultation, diagnosis, and preoperative, intraoperative, and postoperative care necessary to correct or treat female patients of all ages presenting with illnesses, injuries, and disorders of the gynecologic system, surgical treatment of urinary stress incontinence, cystoscopy including biopsy, laparoscopy, Laparoscopic-Assisted Vaginal Hysterectomy, endometrial ablation, simple minor surgical procedures and nonsurgical treatment of illness and injuries of the mammary glands and urinary tract. Also included are privileges for ICU management of GYN and post-surgical patients	___
Ambulatory Care – Hazel Hawkins Ambulatory Clinics: Privileges include outpatient management of obstetrical and gynecological patients	___
Core privileges do not include any of the following specific privileges. For each, the applicant must demonstrate the minimum training and experience as defined below	
Moderate Sedation (passing score on hospital exam required)	___
Gynecologic Oncology To apply for these privileges, you must have the following: • Education: M.D. or D.O. • Formal Training: The applicant must demonstrate successful completion of Residency in Obstetrics and Gynecology AND a Fellowship in Gynecologic Oncology (ACGME-accredited or equivalent) • Certification: Board-certified or board-eligible in Gynecologic Oncology (e.g., ABOG certification) • Required Clinical Experience: The applicant for initial appointment or reappointment must be able to demonstrate that he/she has satisfactorily performed services as an attending physician in the past 24 months for at least 50 inpatient or outpatients for Gynecology Oncology services.	
Gynecology Oncology: Clinic Privileges include the ability to evaluate, diagnose, treat, and provide consultative care to outpatients with gynecologic cancers or pre-cancerous conditions. Core outpatient privileges may include but are not limited to: assessment and management of abnormal Pap smears,	___

Delineation Of Privileges
OBSTETRICS AND GYNECOLOGY

Provider Name:

Privilege	
cervical dysplasia, and other precancerous conditions, interpretation of imaging and pathology reports related to gynecologic oncology, and placement and removal of intrauterine devices (IUDs) for oncology indications.	
Gynecology Oncology: Hospital Privileges to admit, evaluate, diagnose, consult, and perform history and physical exam provide surgical care, and medically manage the care of women with malignant diseases of the reproductive tract and peritoneum, including the ovaries, fallopian tubes, uterus, uterine cervix, vulva and vagina; and trophoblastic diseases. Cystoscopy and biopsy, intraperitoneal catheter placement, chest tube placement, laparoscopic lymphadenectomy and cancer staging operations, including pelvic, para-aortic and scalene lymphadenectomy. Radical and microsurgical operations in the abdomen and pelvis required to treat these conditions, including radical debulking operations, radical hysterectomy, vulvectomy, splenectomy, pelvic exenteration, including construction of a neovagina, harvesting of skin and myocutaneous grafts, and performance of procedures on the bowel and urinary tract as indicated, including ureters, bladder, urethra, e.g., urinary diversion, neocystostomy, intestinal resection and reanastomosis	___
Urogynecology To apply for these privileges, you must have the following: • Education: M.D. or D.O. • Formal Training: The applicant must demonstrate successful completion of Residency in Obstetrics and Gynecology AND a Fellowship in Female Pelvic Medicine & Reconstructive Surgery (Urogynecology) (ACGME-accredited or equivalent) • Certification: Board-certified or board-eligible • Required Clinical Experience: The applicant for initial appointment or reappointment must be able to demonstrate that he/she has satisfactorily performed services as an attending physician in the past 24 months for at least 50 inpatient or outpatients for Urogynecology services.	
Urogynecology: Clinic Privileges include but are not limited to history and physical examination specific to urogynecology, Urodynamic testing and interpretation, Cystoscopy, Office-based diagnostic procedures (e.g., endometrial biopsy), Pessary fitting, insertion, and management, Outpatient management of urinary incontinence and pelvic organ prolapse, Pelvic floor injections (e.g., botulinum toxin, bulking agents), and outpatient wound care and follow-up post-surgical management	___
Urogynecology: Hospital Privileges to admit, evaluate, diagnose, consult, and perform history and physical exam provide surgical care, and medically treat patients with complex pelvic floor issues. This includes, but not limited to: procedures to treat stress urinary incontinence (including those that utilize permanent implants) urge urinary incontinence (including neuromodulation), fecal incontinence , pelvic organ prolapse (including procedures utilizing mesh and grafts), reconstruction of the vagina bladder and urethra , and Diagnostic and operative cystoscopy for benign conditions including ureteral stents.	___
Acknowledgement of Practitioner I have requested only those privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise. Signed: _____ Date:_____ **Department Chair Recommendation** Allprivilegesdelineatedhavebeenindividuallyconsideredandhavebeenrecommendedbased upon the physician's specialty, licensure, specific training, experience, health status, current competence and peer recommendations I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s): **[ ] Recommend all requested privileges** **[ ] Recommend privileges with the following conditions/modifications:**	

Delineation Of Privileges
OBSTETRICS AND GYNECOLOGY

Provider Name:

Privilege	
[ ] Do not recommend the following requested privileges: Department Chair Signature_____ Print Name_____ Date_____	

Chief Nursing Officer Report

October 2025

- Skills Fair
- ACLS Training
- OB and ED BETA Awards

OB won 3 BETA awards:

- Two Quality and Sustainability awards:
  - NTSV cesarean birth rate for 3 consecutive years (2022-2024)
  - Maternity Safety Standards Implementation
- MDC Superstar Award:
  - Small Birth Volume Hospitals

ED won 1 BETA Award:

- Quest for Zero:
  - Sepsis education
  - Patient Call backs

CNO Dashboard September 2025

Description	September 2025 Actual	September 2025 Budget	YTD Total Actual	YTD Total Budget
ED Visits	2,303	2,276	6,912	6,765
ED Admission %	6.00%	10%>	6.00%	10%>
LWBS %	1.0%	<2.0%	1%	<2.0%
Door to Provider	6 min	10 min	6.33 min	10 min
MS admissions	102	105	323	346
ICU admissions	28	18	78	56
Deliveries	32	31	93	102
OR Inpatient	45	33	118	136
ASC/OP Cases	62	36	220	115
GI	82	91	213	272

Met or Exceeded Target
Within 10% of Target
Not Within 10%

OR Cases By Service Line

2025	JUL	AUG	SEPT
TOTAL SURGERIES**	204	158	189
GENERAL SURGERY	31	42	40
ORTHOPEDIC TOTAL	46	40	34
PODIATRY	0	0	0
TOTAL JOINTS	2	9	3
UROLOGY	4	3	2
OB/GYN TOTAL	30	22	18
C/SECTIONS	8	4	6
ENT TOTAL	2	1	2
GI TOTAL	91	50	93
GI ASC	87	44	82
GI INO	0	2	2
GI INPT	4	4	9
GI CANCELS	0	0	1

THESE TOTALS INCLUDE GI

*cancels not included in GI Total

OR Cases By Service Line

2024	JUL	AUG	SEPT
TOTAL SURGERIES**	203	207	164
GENERAL SURGERY	55	40	38
ORTHOPEDIC TOTAL	29	20	25
PODIATRY	2	0	0
TOTAL JOINTS	0	0	2
UROLOGY	5	4	5
OB/GYN TOTAL	19	20	8
C/SECTIONS	12	10	2
ENT TOTAL	1	1	1
GI TOTAL	94	121	87
GI ASC	89	110	82
GI INO	0	1	1
GI INPT	5	10	4
*GI CANCELS**	2	2	3

San Benito Health Care District
Facilities and Finance Committee Minutes
September 22, 2025 - 4:30pm

Present: Josie Sanchez, Assistant Secretary
Victoria Angelo, Board Treasurer
Mary Casillas, Chief Executive Officer
Mark Robinson, Chief Financial Officer
Suzie Mays, Vice President, Information & Strategic Services
Douglas Mays, Senior Director of Support Services
Sandra DiLaura, Controller

Public:

1. **CALL TO ORDER**
   The meeting of the Facilities and Finance Committee was called to order at 4:30pm.

2. **UPDATE ON CURRENT PROJECTS**
   A. August 2025 Project Dashboard
   The Project Dashboard was reviewed in detail on each of the open projects. Most of the projects are still in progress while the WiFi upgrade, Boiler Replacement, and Palliative Care Room have now been completed.

3. **REVIEW FINANCIAL UPDATES**
   A. August 2025 Financial Statements
   For the month ending August 31, 2025, the District's Net Surplus (Loss) is $1,175,278 compared to a budgeted Surplus (Loss) of $1,330,581. The District was under budget for the month by $155,303.

   YTD as of August 31, 2025, the District's Net Surplus (Loss) is $1,705,777 compared to a budgeted Surplus (Loss) of $2,419,720. The District is under budget YTD by $713,943.

   Acute discharges were 179 for the month, under budget by 7 discharges or 4%. The ADC was 16.10 compared to a budget of 16.90. The ALOS was 2.79. The acute I/P gross revenue was less than budgeted by **($429,788) (5%)** while O/P services gross revenue was under budget by **$837,779** or **3%** under budget. ER I/P visits were 140 and ER O/P visits were over budget by 133 visits or 6%. The RHCs & Specialty Clinics treated 3,742 (includes 574 visits at the Diabetes Clinic) and 1,091 visits respectively.

   Other Operating revenue exceeded budget by **$1.34 million** due mainly to:

   1) **$213,916** settlement for FYE June 30, 2001 Cost Report appeal.

2) **$280,163** settlement for FYE June 30, 2003 Cost Report appeal.
3) **$158,700** from the HQIP from Central CA Alliance for Health (CCAH).
4) **$125,000** from the Medi-Cal Capacity Grant Program sponsored by CCAH.

Operating Expenses were slightly over budget by **$92,706** due mainly to: overages in Professional Fees and Supplies of $210,113 and 176,040 respectively. These overages were largely offset by savings in Benefits and Other Expenses of $273,493 and $103,698 respectively.

Non-operating Revenue was under budget by **$19,193** due to the timing of donations from the Foundation.

The SNFs ADC was **86.29** for the month. The Net Surplus (Loss) is $41,356 compared to a budget of $91,928. YTD, the Net Surplus (Loss) is $183,007 under budget by $35,307 due to a lower than budgeted ADC.

B. August 2025 Finance Dashboard

The Finance Dashboard and Cash Flow Statement were reviewed by the Committee.

C. Supplemental Payment Program

No new information was presented as of August 2025.

4. **PUBLIC COMMENT**

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

5. **ADJOURNMENT**

There being no further business, the Committee was adjourned at 5:01 pm.

Respectfully submitted,

Sandra DiLaura
Controller

Hazel Hawkins
MEMORIAL HOSPITAL

REGULAR MEETING OF THE FACILITIES AND FINANCE COMMITTEE
SAN BENITO HEALTH CARE DISTRICT
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA
MONDAY, SEPTEMBER 22, 2025 - 4:30 P.M.
SUPPORT SERVICES BUILDING, 2ND FLOOR – GREAT ROOM

San Benito Health Care District is a public agency that serves as a responsive, comprehensive health care resource for its patients, physicians and the community.

1. Call to Order

2. Update on Current Projects
   - Project Dashboard – August 2025

3. Review Financial Updates
   - Financial Statements – August 2025
   - Finance Dashboard – August 2025
   - Supplemental Payments – August 2025

4. Public Comment
   This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on matters within the jurisdiction of this District Board **Committee,** which are not on this agenda.

5. Adjournment

The next Facilities and Finance Committee meeting is scheduled for **Monday, October 20, 2025** at **4:30 p.m.**

Hazel Hawkins
MEMORIAL HOSPITAL

The complete Facilities and Finance Committee packet, including subsequently distributed materials and presentations, is available at the Facilities and Finance Committee meeting and in the Administrative Offices of the District. All items appearing on the agenda are subject to action by the Facilities and Finance Committee. Staff and Committee recommendations are subject to change by the Facilities and Finance Committee.

Notes: Requests for a disability-related modification or accommodation, including auxiliary aids or services, to attend or participate in a meeting should be made to District Administration during regular business hours at 831-636-2673. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

Project Dashboard - Facilities

Project Name	Purpose	Start Date	Go Live	Duration	Status	Priority	Key Stakeholder	Role	Update
BD Installation	New Pyxis Machines	12/4/2024	TBD		In Progress	Medium	Naveen Ravela	Pharmacy Director	ASC has been ruled off and going to city of hollister is no longer required. We will look to add pyxis units into the pharmacy in the main hospital and add to existing. ICU and OB are ready for construction to begin.
Lab Phase 1	Upgrading Analyzers (Validation Only)	6/1/2024	2/1/2026	610	In Progress	High	Bernadette Enderez	Lab/Radiology Director	currently on 60-70% of the validation process. (project will not officially close out until Lab Phase 2 is completed and ready analyzers to move to permanent location)
Lab Phase 2	Analyzer Replacment	6/3/2024	2/1/2026	608	In Progress	High	Bernadette Enderez	Lab/Radiology Director	Construction is underway. Apprx 10-15% through schedule. No current impediments to progress.
OR Rebuild	Updating OR per OSHPD Requirements	11/20/2024	12/31/2025	406	In Progress	High	Mendi Suber-Ventura	Director of Surgical Services	Proposal received from Treanor for mechanical/HVAC system upgrade. Pending HCAI authorization and CDPH plan acceptance for waiver continuation
Wi-Fi-Upgrade	Wireless Infrastructure Upgrade	9/16/2024	9/1/2025	350	Completed	High	Salomon Mercado	Director of Inf Tech	All Locations have been activated.

Project Dashboard - Facilities

Boiler Replacement	Replace Existing Boiler to Enhance Efficiency & Reliability	1/10/2024	9/1/2025	600	Completed	High	Doug Mays	Senior Director Support Services	Official final cost report and verified compliance reports have been sent in. This project is closed pending paper work
Seismic	Upgrade to Meet HCAI Seismic Compliance & Safety Standards	TBD	TBD		Ongoing	High	Doug Mays	Senior Director Support Services	Pending final review of MTCAP and ROM submitted
MRI Upgrade	Proposal submitted	TBD	TBD		On Hold	Low	Bernadette Enderez	Lab/Radiology Director	Proposal submitted
*Radiology Masterplan	Assessment of equipment and remodel	11/1/2025	TBD		On Hold	High	Bernadette Enderez	Lab/Radiology Director	Meeting to be scheduled to discuss requirements
*Imaging Trailer Pad Make Ready	Treanor to help when MP starts	TBD	TBD		On Hold	Medium	Bernadette Enderez	Lab/Radiology Director	Proposal Submitted, Treanor to provide recommendation for additional requirements
*Verkada	Security / SSO + Door Access	3/11/2025	TBD		In Progress	High	Jorge Ramirez	Director of Emerg Mgmt & Security	HCAI has approved the project, pending contractor being assigned to issue building permit. (awaiting proposal) Test door has been activated, planning for other equipment to be programmed.
ED Helipad	System is an AFFF system and no longer allowed in CA. Is required to be phased out due to being a hazardous chemical.	1/14/2025	TBD		In Progress	High	Doug Mays	Senior Director Support Services	WSFP + Treanor demo package and AMC has been submitted. Coordinator with GC remainder services for abatement, demolition and installation.

Project Dashboard - Facilities

Physical Therapy Clinic Remodel	Expanding current location to help with ongoing demand	6/1/2025	TBD		In Progress	High	Jun Estrada	Director of Physical Therapy	Kickoff call and initial planning has started. Key to new location has been received. Will meet with facilities, IT, security and internal team for continued planning and requirements.
Focus Sports Therapy	Rennovate and expand Focus sports thereapy clinic	7/1/2025	TBD		In Progress	Medium	Doug Mays	Senior Director Support Services	3D floor scanning was completed, pending initial design schematic from the architects.
Palliative Care Room	Med/Surg room to be converted as a private space for family and loved ones.	7/15/2025	TBD		Completed	High	Karen Descent	Chief Nursing Officer	This project has been completed.
CT Scanner	Replace		TBD		In Progress	High	Bernadette Enderez	Lab/Radiology Director	Both CT's that we have need repairs. One needs a tube replaced. The CT in our ER is partially down until they arrive to begin repairs
Totals									

TASK STATUS %		
STATUS	**COUNT**	**%**
Not Started	0	0%
In Progress	9	56%
Overdue	0	0%
On Hold	3	19%
Ongoing	1	6%
Completed	3	19%
TOTAL	**16**	**100%**
PROJECT PRIORITY %		

estimated go-live
planned go live

Project Dashboard - Facilities

PRIORITY	COUNT	%
High	12	75%
Medium	3	19%
Low	1	6%
TOTAL	16	100%

Hazel Hawkins
MEMORIAL HOSPITAL
SKILLED NURSING FACILITIES
HOME HEALTH AGENCY
San Benito Health Care District

San Benito Health Care District
A Public Agency
911 Sunset Drive
Hollister, CA 95023-5695
(831) 637-5711

September 22, 2025

CFO Financial Summary for the District Board:

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HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
HOLLISTER, CA 95023
FOR PERIOD 08/31/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24
GROSS PATIENT REVENUE:										
ACUTE ROUTINE REVENUE	4,043,553	4,017,441	26,112	1	4,176,088	7,422,103	7,514,931	(92,828)	(1)	7,701,120
SNF ROUTINE REVENUE	2,014,980	2,092,500	(77,520)	(4)	1,970,850	4,099,020	4,185,000	(85,980)	(2)	3,943,680
ANCILLARY INPATIENT REVENUE	4,087,276	4,819,027	(731,751)	(15)	4,686,482	7,803,521	9,362,027	(1,558,506)	(17)	9,324,746
HOSPITALIST\PEDS I\P REVENUE	230,247	0	230,247		0	405,445	0	405,445		0
TOTAL GROSS INPATIENT REVENUE	10,376,055	10,928,968	(552,913)	(5)	10,833,420	19,730,088	21,061,958	(1,331,870)	(6)	20,969,546
ANCILLARY OUTPATIENT REVENUE	30,535,290	31,493,199	(957,909)	(3)	29,781,196	61,173,504	62,417,644	(1,244,140)	(2)	57,982,812
HOSPITALIST\PEDS O\P REVENUE	120,130	0	120,130		0	238,801	0	238,801		0
TOTAL GROSS OUTPATIENT REVENUE	30,655,420	31,493,199	(837,779)	(3)	29,781,196	61,412,305	62,417,644	(1,005,339)	(2)	57,982,812
TOTAL GROSS PATIENT REVENUE	41,031,476	42,422,167	(1,390,692)	(3)	40,614,616	81,142,393	83,479,602	(2,337,209)	(3)	78,952,358
DEDUCTIONS FROM REVENUE:										
MEDICARE CONTRACTUAL ALLOWANCES	11,645,339	11,434,199	211,140	2	10,742,452	22,466,689	22,487,134	(20,445)	0	21,433,476
MEDI-CAL CONTRACTUAL ALLOWANCES	10,948,566	10,854,319	94,247	1	9,956,187	21,518,372	21,341,272	177,100	1	20,569,800
BAD DEBT EXPENSE	839,343	1,053,971	(214,628)	(20)	637,981	1,971,055	2,080,647	(109,592)	(5)	1,303,650
CHARITY CARE	25,830	32,862	(7,033)	(21)	(95)	95,915	64,601	31,314	49	1,119
OTHER CONTRACTUALS AND ADJUSTMENTS	4,998,595	5,077,425	(78,830)	(2)	4,933,179	10,217,546	9,982,593	234,953	2	9,443,280
HOSPITALIST\PEDS CONTRACTUAL ALLOW	61,743	0	61,743		0	133,109	0	133,109		0
TOTAL DEDUCTIONS FROM REVENUE	28,519,416	28,452,776	66,640	0	26,269,705	56,402,686	55,956,247	446,439	1	52,751,324
NET PATIENT REVENUE	12,512,060	13,969,391	(1,457,331)	(10)	14,344,912	24,739,707	27,523,355	(2,783,648)	(10)	26,201,034
OTHER OPERATING REVENUE	2,486,732	1,148,459	1,338,273	117	562,377	4,055,939	2,284,232	1,771,707	78	1,184,036
NET OPERATING REVENUE	14,998,792	15,117,850	(119,058)	(1)	14,907,288	28,795,647	29,807,587	(1,011,941)	(3)	27,385,070
OPERATING EXPENSES:										
SALARIES & WAGES	5,486,709	5,593,690	(106,981)	(2)	5,054,909	10,690,181	11,141,716	(451,535)	(4)	9,826,801
REGISTRY	579,923	525,384	54,539	10	509,623	1,245,052	1,050,769	194,283	19	988,725
EMPLOYEE BENEFITS	2,202,630	2,496,773	(294,143)	(12)	2,272,908	4,473,333	4,985,189	(511,856)	(10)	4,287,281
PROFESSIONAL FEES	1,854,607	1,644,784	209,823	13	1,677,439	3,557,323	3,289,568	267,755	8	3,046,070
SUPPLIES	1,495,033	1,317,533	177,500	14	1,024,816	2,738,988	2,641,220	97,768	4	2,083,210
PURCHASED SERVICES	1,408,232	1,369,379	38,853	3	1,280,372	2,925,549	2,725,234	200,315	7	2,491,342
RENTAL	189,402	169,755	19,647	12	157,330	404,166	339,510	64,656	19	277,825
DEPRECIATION & AMORT	324,724	315,203	9,521	3	319,286	646,440	630,406	16,034	3	637,990
INTEREST	68,370	19,814	48,556	245	6,104	74,114	39,684	34,430	87	12,186
OTHER	578,408	718,670	(140,262)	(20)	520,510	1,105,186	1,312,003	(206,817)	(16)	867,481
TOTAL EXPENSES	14,188,037	14,170,985	17,052	0	12,823,296	27,860,332	28,155,299	(294,967)	(1)	24,518,911
NET OPERATING INCOME (LOSS)	810,755	946,865	(136,110)	(14)	2,083,992	935,314	1,652,288	(716,974)	(43)	2,866,159

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
HOLLISTER, CA 95023
FOR PERIOD 08/31/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	20,000	(20,000)	(100)	8,222	46,000	40,000	6,000	15	13,876
PROPERTY TAX REVENUE	248,434	248,434	0	0	241,122	496,868	496,868	0	0	482,244
GO BOND PROP TAXES	181,114	181,114	0	0	175,915	362,227	362,228	(1)	0	351,830
GO BOND INT REVENUE\EXPENSE	(61,114)	(61,114)	0	0	(65,081)	(122,227)	(122,228)	1	0	(130,163)
OTHER NON-OPER REVENUE	15,479	16,399	(921)	(6)	16,295	28,303	32,798	(4,496)	(14)	30,561
OTHER NON-OPER EXPENSE	(22,650)	(22,742)	92	0	(27,767)	(45,300)	(45,484)	184	0	(55,630)
INVESTMENT INCOME	3,261	1,625	1,636	101	5,182	4,592	3,250	1,342	41	9,283
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	364,523	383,716	(19,193)	(5)	353,887	770,462	767,432	3,030	0	702,002
NET SURPLUS (LOSS)	1,175,278	1,330,581	(155,303)	(12)	2,437,879	1,705,777	2,419,720	(713,943)	(30)	3,568,161
EBIDA	$ 1,402,653	$ 1,548,526	$ (145,874)	(9.42)%	$ 2,674,098	$ 2,157,516	$ 2,855,610	$ (698,094)	(24.44)%	$ 4,040,113
EBIDA MARGIN	9.35%	10.24%	(0.89)%	(8.70)%	17.94%	7.49%	9.58%	(2.09)%	(21.79)%	14.75%
OPERATING MARGIN	5.41%	6.26%	(0.86)%	(13.69)%	13.98%	3.25%	5.54%	(2.30)%	(41.40)%	10.47%
NET SURPLUS (LOSS) MARGIN	7.84%	8.80%	(0.97)%	(10.97)%	16.35%	5.92%	8.12%	(2.19)%	(27.02)%	13.03%

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
HOLLISTER, CA 95023
FOR PERIOD 08/31/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24
GROSS PATIENT REVENUE:										
ROUTINE REVENUE	4,043,553	4,017,441	26,112	1	4,176,088	7,422,103	7,514,931	(92,828)	(1)	7,701,120
ANCILLARY INPATIENT REVENUE	3,751,756	4,437,902	(686,146)	(16)	4,417,063	7,033,089	8,599,777	(1,566,688)	(18)	8,770,142
HOSPITALIST I\P REVENUE	230,247	0	230,247		0	405,445	0	405,445		0
TOTAL GROSS INPATIENT REVENUE	8,025,555	8,455,343	(429,788)	(5)	8,593,151	14,860,636	16,114,708	(1,254,072)	(8)	16,471,261
ANCILLARY OUTPATIENT REVENUE	30,535,290	31,493,199	(957,909)	(3)	29,781,196	61,173,504	62,417,644	(1,244,140)	(2)	57,982,812
HOSPITALIST O\P REVENUE	120,130	0	120,130		0	238,801	0	238,801		0
TOTAL GROSS OUTPATIENT REVENUE	30,655,420	31,493,199	(837,779)	(3)	29,781,196	61,412,305	62,417,644	(1,005,339)	(2)	57,982,812
TOTAL GROSS ACUTE PATIENT REVENUE	38,680,976	39,948,542	(1,267,567)	(3)	38,374,347	76,272,941	78,532,352	(2,259,411)	(3)	74,454,073
DEDUCTIONS FROM REVENUE ACUTE:										
MEDICARE CONTRACTUAL ALLOWANCES	11,358,202	11,160,388	197,814	2	10,549,006	21,879,337	21,939,512	(60,175)	0	20,988,136
MEDI-CAL CONTRACTUAL ALLOWANCES	10,845,577	10,753,567	92,010	1	9,770,999	21,306,261	21,139,768	166,493	1	20,271,530
BAD DEBT EXPENSE	869,271	1,048,971	(179,700)	(17)	602,957	1,967,742	2,070,647	(102,905)	(5)	1,284,459
CHARITY CARE	22,805	32,862	(10,057)	(31)	(95)	92,891	64,601	28,290	44	1,119
OTHER CONTRACTUALS AND ADJUSTMENTS	4,944,091	5,042,362	(98,271)	(2)	4,909,262	10,168,925	9,912,466	256,459	3	9,401,409
HOSPITALIST\PEDS CONTRACTUAL ALLOW	61,743	0	61,743		0	133,109	0	133,109		0
TOTAL ACUTE DEDUCTIONS FROM REVENUE	28,101,689	28,038,150	63,539	0	25,832,130	55,548,265	55,126,994	421,271	1	51,946,653
NET ACUTE PATIENT REVENUE	10,579,287	11,910,392	(1,331,106)	(11)	12,542,218	20,724,676	23,405,358	(2,680,682)	(12)	22,507,420
OTHER OPERATING REVENUE	2,486,732	1,148,459	1,338,273	117	562,377	4,055,939	2,284,232	1,771,707	78	1,184,036
NET ACUTE OPERATING REVENUE	13,066,019	13,058,851	7,168	0	13,104,594	24,780,615	25,689,590	(908,975)	(4)	23,691,456
OPERATING EXPENSES:										
SALARIES & WAGES	4,417,628	4,490,853	(73,225)	(2)	4,068,743	8,573,831	8,937,354	(363,523)	(4)	7,850,657
REGISTRY	511,320	476,160	35,160	7	458,648	1,108,310	952,320	155,990	16	891,605
EMPLOYEE BENEFITS	1,714,265	1,987,758	(273,493)	(14)	1,822,736	3,498,973	3,967,473	(468,500)	(12)	3,371,225
PROFESSIONAL FEES	1,852,397	1,642,284	210,113	13	1,675,229	3,552,903	3,284,568	268,335	8	3,041,650
SUPPLIES	1,395,057	1,219,017	176,040	14	933,901	2,516,705	2,444,450	72,255	3	1,882,832
PURCHASED SERVICES	1,315,542	1,265,245	50,297	4	1,199,794	2,728,344	2,517,062	211,282	8	2,325,534
RENTAL	175,533	161,839	13,694	9	155,819	370,193	321,458	48,735	15	275,048
DEPRECIATION & AMORT	285,424	276,162	9,262	3	280,162	567,685	552,324	15,361	3	559,742
INTEREST	68,370	19,814	48,556	245	6,104	74,114	39,684	34,430	87	12,186
OTHER	528,892	632,590	(103,698)	(16)	438,898	972,866	1,174,538	(201,672)	(17)	741,203
TOTAL EXPENSES	12,264,428	12,171,722	92,706	1	11,040,033	23,963,923	24,191,231	(227,308)	(1)	20,951,682
NET OPERATING INCOME (LOSS)	801,591	887,129	(85,538)	(10)	2,064,561	816,692	1,498,359	(681,667)	(46)	2,739,774

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
HOLLISTER, CA 95023
FOR PERIOD 08/31/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	20,000	(20,000)	(100)	8,222	46,000	40,000	6,000	15	13,876
PROPERTY TAX REVENUE	211,194	211,194	0	0	204,954	422,388	422,388	0	0	409,908
GO BOND PROP TAXES	181,114	181,114	0	0	175,915	362,227	362,228	(1)	0	351,830
GO BOND INT REVENUE\EXPENSE	(61,114)	(61,114)	0	0	(65,081)	(122,227)	(122,228)	1	0	(130,163)
OTHER NON-OPER REVENUE	15,479	16,399	(921)	(6)	16,295	28,303	32,798	(4,496)	(14)	30,561
OTHER NON-OPER EXPENSE	(17,602)	(17,694)	92	(1)	(21,578)	(35,204)	(35,388)	184	(1)	(43,253)
INVESTMENT INCOME	3,261	1,625	1,636	101	5,182	4,592	3,250	1,342	41	9,283
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	332,331	351,524	(19,193)	(6)	323,908	706,078	703,048	3,030	0	642,042
NET SURPLUS (LOSS)	1,133,923	1,238,653	(104,730)	(9)	2,388,468	1,522,770	2,201,407	(678,637)	(31)	3,381,816

HAZEL HAWKINS SKILLED NURSING FACILITIES
HOLLISTER, CA
FOR PERIOD 08/31/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24	ACTUAL 08/31/25	BUDGET 08/31/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/24
GROSS SNF PATIENT REVENUE:										
ROUTINE SNF REVENUE	2,014,980	2,092,500	(77,520)	(4)	1,970,850	4,099,020	4,185,000	(85,980)	(2)	3,943,680
ANCILLARY SNF REVENUE	335,520	381,125	(45,605)	(12)	269,419	770,432	762,250	8,182	1	554,605
TOTAL GROSS SNF PATIENT REVENUE	2,350,500	2,473,625	(123,125)	(5)	2,240,269	4,869,452	4,947,250	(77,798)	(2)	4,498,285
DEDUCTIONS FROM REVENUE SNF:										
MEDICARE CONTRACTUAL ALLOWANCES	287,138	273,811	13,327	5	193,446	587,352	547,622	39,730	7	445,339
MEDI-CAL CONTRACTUAL ALLOWANCES	102,989	100,752	2,237	2	185,189	212,111	201,504	10,607	5	298,269
BAD DEBT EXPENSE	(29,928)	5,000	(34,928)	(699)	35,024	3,313	10,000	(6,687)	(67)	19,191
CHARITY CARE	3,024	0	3,024		0	3,024	0	3,024		0
OTHER CONTRACTUALS AND ADJUSTMENTS	54,504	35,063	19,441	55	23,917	48,621	70,127	(21,506)	(31)	41,871
TOTAL SNF DEDUCTIONS FROM REVENUE	417,727	414,626	3,101	1	437,575	854,421	829,253	25,168	3	804,671
NET SNF PATIENT REVENUE	1,932,773	2,058,999	(126,226)	(6)	1,802,694	4,015,031	4,117,997	(102,966)	(3)	3,693,614
OTHER OPERATING REVENUE	0	0	0	0	0	0	0	0	0	0
NET SNF OPERATING REVENUE	1,932,773	2,058,999	(126,226)	(6)	1,802,694	4,015,031	4,117,997	(102,966)	(3)	3,693,614
OPERATING EXPENSES:										
SALARIES & WAGES	1,069,082	1,102,837	(33,756)	(3)	986,166	2,116,350	2,204,362	(88,013)	(4)	1,976,143
REGISTRY	68,603	49,224	19,379	39	50,976	136,742	98,449	38,293	39	97,120
EMPLOYEE BENEFITS	488,365	509,015	(20,650)	(4)	450,172	974,361	1,017,716	(43,355)	(4)	916,057
PROFESSIONAL FEES	2,210	2,500	(290)	(12)	2,210	4,420	5,000	(580)	(12)	4,420
SUPPLIES	99,975	98,516	1,459	2	90,915	222,283	196,770	25,513	13	200,379
PURCHASED SERVICES	92,690	104,134	(11,444)	(11)	80,578	197,205	208,172	(10,967)	(5)	165,808
RENTAL	13,869	7,916	5,953	75	1,511	33,973	18,052	15,921	88	2,777
DEPRECIATION	39,301	39,041	260	1	39,124	78,755	78,082	673	1	78,247
INTEREST	0	0	0	0	0	0	0	0	0	0
OTHER	49,516	86,080	(36,564)	(43)	81,613	132,320	137,465	(5,145)	(4)	126,278
TOTAL EXPENSES	1,923,610	1,999,263	(75,653)	(4)	1,783,263	3,896,409	3,964,068	(67,659)	(2)	3,567,229
NET OPERATING INCOME (LOSS)	9,164	59,736	(50,573)	(85)	19,431	118,622	153,929	(35,307)	(23)	126,385
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	37,240	37,240	0	0	36,168	74,480	74,480	0	0	72,336
OTHER NON-OPER EXPENSE	(5,048)	(5,048)	0	0	(6,188)	(10,096)	(10,096)	0	0	(12,377)
TOTAL NON-OPERATING REVENUE/(EXPENSE)	32,192	32,192	0	0	29,980	64,384	64,384	0	0	59,960
NET SURPLUS (LOSS)	41,356	91,928	(50,573)	(55)	49,411	183,007	218,313	(35,307)	(16)	186,345

HAZEL HAWKINS MEMORIAL HOSPITAL
HOLLISTER, CA
For the month ended 08/31/25

	CURR MONTH 08/31/25	PRIOR MONTH 07/31/25	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/25
CURRENT ASSETS					
CASH & CASH EQUIVALENT	42,081,547	46,413,047	(4,331,500)	(9)	46,670,217
PATIENT ACCOUNTS RECEIVABLE	65,518,188	61,712,345	3,805,843	6	66,556,290
BAD DEBT ALLOWANCE	(7,628,156)	(7,410,556)	(217,600)	3	(7,062,672)
CONTRACTUAL RESERVES	(36,713,359)	(34,221,439)	(2,491,920)	7	(38,404,377)
OTHER RECEIVABLES	9,180,354	6,344,117	2,836,237	45	5,006,860
INVENTORIES	4,980,415	5,003,186	(22,771)	(1)	4,981,471
PREPAID EXPENSES	2,688,153	2,780,442	(92,289)	(3)	2,599,584
DUE TO\FROM THIRD PARTIES	(181,860)	(181,860)	0	0	(181,860)
TOTAL CURRENT ASSETS	79,925,283	80,439,283	(514,000)	(1)	80,165,513
ASSETS WHOSE USE IS LIMITED					
BOARD DESIGNATED FUNDS	5,872,547	5,526,072	346,475	6	5,243,618
TOTAL LIMITED USE ASSETS	5,872,547	5,526,072	346,475	6	5,243,618
PROPERTY, PLANT, AND EQUIPMENT					
LAND & LAND IMPROVEMENTS	3,370,474	3,370,474	0	0	3,370,474
BLDGS & BLDG IMPROVEMENTS	100,098,374	100,098,374	0	0	100,098,374
EQUIPMENT	46,611,786	46,397,595	214,191	1	46,216,122
CONSTRUCTION IN PROGRESS	4,578,142	4,486,240	91,902	2	4,324,809
GROSS PROPERTY,PLANT, AND EQUIPMENT	154,658,776	154,352,684	306,092	0	154,009,779
ACCUMULATED DEPRECIATION	(99,069,432)	(98,729,796)	(339,636)	0	(98,393,920)
NET PROPERTY, PLANT, AND EQUIPMENT	55,589,343	55,622,887	(33,544)	0	55,615,859
OTHER ASSETS					
UNAMORTIZED LOAN COSTS	315,732	321,473	(5,742)	(2)	327,215
PENSION DEFERRED OUTFLOWS NET	7,038,149	7,038,149	0	0	7,038,149
TOTAL OTHER ASSETS	7,353,881	7,359,622	(5,742)	0	7,365,364
TOTAL UNRESTRICTED ASSETS	148,741,053	148,947,864	(206,811)	0	148,390,354
RESTRICTED ASSETS	127,725	127,672	53	0	127,208
TOTAL ASSETS	148,868,778	149,075,537	(206,758)	0	148,517,563

HAZEL HAWKINS MEMORIAL HOSPITAL
HOLLISTER, CA
For the month ended 08/31/25

	CURR MONTH 08/31/25	PRIOR MONTH 07/31/25	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/25
CURRENT LIABILITIES					
ACCOUNTS PAYABLE	6,552,668	5,898,194	(654,473)	11	6,124,661
ACCRUED PAYROLL	1,915,086	3,884,598	1,969,512	(51)	3,467,229
ACCRUED PAYROLL TAXES	976,810	295,867	(680,943)	230	257,552
ACCRUED BENEFITS	4,706,154	4,850,693	144,539	(3)	5,074,320
OTHER ACCRUED EXPENSES	95,398	88,152	(7,246)	8	80,907
PATIENT REFUNDS PAYABLE	1,310	1,310	0	0	1,310
DUE TO\FROM THIRD PARTIES	4,028,165	4,701,466	673,301	(14)	4,701,466
OTHER CURRENT LIABILITIES	950,496	852,447	(98,050)	12	756,834
TOTAL CURRENT LIABILITIES	19,226,086	20,572,727	1,346,641	(7)	20,464,279
LONG-TERM DEBT					
LEASES PAYABLE	4,621,452	4,628,380	6,928	0	4,635,296
BONDS PAYABLE	28,477,841	28,506,361	28,520	0	28,534,881
TOTAL LONG TERM DEBT	33,099,293	33,134,740	35,448	0	33,170,177
OTHER LONG-TERM LIABILITIES					
DEFERRED REVENUE	0	0	0	0	0
LONG-TERM PENSION LIABILITY	23,814,514	23,814,514	0	0	23,814,514
TOTAL OTHER LONG-TERM LIABILITIES	23,814,514	23,814,514	0	0	23,814,514
TOTAL LIABILITIES	76,139,893	77,521,982	1,382,089	(2)	77,448,970
NET ASSETS:					
UNRESTRICTED FUND BALANCE	70,919,019	70,919,019	0	0	70,919,019
RESTRICTED FUND BALANCE	104,090	104,038	(53)	0	149,573
NET REVENUE/(EXPENSES)	1,705,777	530,498	(1,175,278)	222	0
TOTAL NET ASSETS	72,728,886	71,553,555	(1,175,331)	2	71,068,592
TOTAL LIABILITIES AND NET ASSETS	148,868,778	149,075,537	206,758	0	148,517,563

Hazel Hawkins
MEMORIAL HOSPITAL

San Benito Health Care District
Hazel Hawkins Memorial Hospital
AUGUST 2025

Description	MTD Budget	MTD Actual	YTD Actual	YTD Budget	FYE Budget
Average Daily Census - Acute	16.90	16.10	14.63	16.00	15.00
Average Daily Census - SNF	90.01	86.29	87.84	90.00	90.00
Acute Length of Stay	2.82	2.79	2.66	2.79	2.80
ER Visits:					
Inpatient	155	140	274	297	1,638
Outpatient	2,145	2,278	4,335	4,193	27,053
Total	2,300	2,418	4,609	4,490	28,691
Days in Accounts Receivable	50.0	51.6	51.6	50.0	50.0
Productive Full-Time Equivalents	561.68	545.45	535.86	561.68	575.17
Net Patient Revenue	13,969,391	12,512,060	24,739,707	27,523,355	157,730,532
Payment-to-Charge Ratio	32.9%	30.5%	30.5%	33.0%	32.4%
Medicare Traditional Payor Mix	29.83%	28.45%	28.32%	29.88%	28.71%
Commercial Payor Mix	22.36%	23.43%	24.71%	22.08%	23.36%
Bad Debt % of Gross Revenue	2.50%	2.05%	2.43%	2.50%	2.53%
EBIDA	1,548,526	1,402,653	2,157,516	2,855,610	13,769,729
EBIDA %	10.24%	9.35%	7.49%	9.58%	7.98%
Operating Margin	6.26%	5.41%	3.25%	5.54%	3.79%
Salaries, Wages, Registry & Benefits %:					
by Net Operating Revenue	56.99%	55.13%	56.98%	57.63%	59.06%
by Total Operating Expense	60.80%	58.28%	58.90%	61.01%	61.39%
Bond Covenants:					
Debt Service Ratio - 1.25	9.93	8.99	6.92	9.15	7.36
Current Ratio - 1.50	2.00	4.16	4.16	2.00	2.00
Days Cash on hand - 30.00	94.78	95.71	95.71	94.78	110.00

Met or Exceeded Target
Within 10% of Target
Not Within 10%

Statement of Cash Flows
Hazel Hawkins Memorial Hospital
Hollister, CA
Two month ending August 31, 2025

	CASH FLOW		COMMENTS
	Current Month 8/31/2025	Current Year-To-Date 8/31/2025	
CASH FLOWS FROM OPERATING ACTIVITIES:			
Net Income (Loss)	$1,175,278	$1,705,777	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:			
Depreciation	339,636	675,512	
(Increase)/Decrease in Net Patient Accounts Receivable	(1,096,323)	(87,432)	
(Increase)/Decrease in Other Receivables	(2,836,237)	(4,173,494)	
(Increase)/Decrease in Inventories	22,771	1,056	
(Increase)/Decrease in Pre-Paid Expenses	92,289	(88,570)	
(Increase)/Decrease in Due From Third Parties	0	0	
Increase/(Decrease) in Accounts Payable	654,473	428,006	
Increase/(Decrease) in Notes and Loans Payable	0	0	
Increase/(Decrease) in Accrued Payroll and Benefits	(1,433,109)	(1,201,052)	
Increase/(Decrease) in Accrued Expenses	7,246	14,492	
Increase/(Decrease) in Patient Refunds Payable	0	0	
Increase/(Decrease) in Third Party Advances/Liabilities	(673,301)	(673,301)	
Increase/(Decrease) in Other Current Liabilities	98,050	193,662	Semi-Annual Int. - 2005 GO & 2021 Revenue Bonds
Net Cash Provided by Operating Activities:	(4,824,505)	(4,911,121)	
CASH FLOWS FROM INVESTING ACTIVITIES:			
Purchase of Property, Plant and Equipment	(306,092)	(648,997)	
(Increase)/Decrease in Limited Use Cash and Investments	0	0	
(Increase)/Decrease in Other Limited Use Assets	(346,475)	(628,929)	Bond Principal & Int Payment - 2014 (2005) & 2021 Bonds
(Increase)/Decrease in Other Assets	5,742	11,484	Amortization
Net Cash Used by Investing Activities	(646,825)	(1,266,442)	
CASH FLOWS FROM FINANCING ACTIVITIES:			
Increase/(Decrease) in Capital Lease Debt	(6,928)	(13,844)	
Increase/(Decrease) in Bond Mortgage Debt	(28,520)	(57,040)	2014 GO Principal & Refinancing of 2013 Bonds with 2021 Bonds
Increase/(Decrease) in Other Long Term Liabilities	0	0	
Net Cash Used for Financing Activities	(35,448)	(70,884)	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	(46,000)	
Net Increase/(Decrease) in Cash	(4,331,500)	(4,588,670)	
Cash, Beginning of Period	46,413,047	46,670,217	
Cash, End of Period	**$42,081,547**	**$42,081,547**	$0
Cost per day to run the District	$439,664	$42,364,666	Budgeted Cash on Hand
Operational Days Cash on Hand	95.71	($283,119)	Variance

Hazel Hawkins Memorial Hospital
Supplemental Payment Programs
FYE August 31, 2026

	Payor	Actual FY 2026	Actual FY 2025	Notes:
Intergovernmental Transfer Programs:				**Requires District to fund program and wait for matching return.**
- AB 113 Non-Designated Public Hospital (NDPH)				
SFY 2023/2024 Final Payment SFY 2024/2025	DHCS	202,500	39,795	IGT due April 2026. Expect payment by June 2025.
SFY 2024/2025 Interim SFY 2025/2026	DHCS	202,500	305,302	IGT due April 2026. Expect payment by June 2025.
- SB 239 Hospital Quality Assurance Fund (HQAF) CY 2025	CCAH	2,160,000	2,407,056	Paid IGT of $1,067,193 in April. Rec. in May.
- Rate Range Jan. 1, 2023 through Dec. 31, 2023	Anthem	-	1,339,141	Received in February 2025.
- Rate Range Jan. 1, 2024 through Dec. 31, 2024	CCAH	2,611,837	-	
- QIP PY 6 Settlement	DHCS	-	4,311,260	Sent IGT of $2,342,379 in March. Rec. in May.
- QIP PY 7 Settlement	DHCS	2,700,000		Funded IGT on Aug. 22nd, $900,434.15. Expect payment in Oct/Nov '25.
- District Hospital Directed Payments (DHDP) CY 2024	DHCS	630,000	710,853	Funded IGT on Aug. 22nd, $379,041.08. Expect payment in Oct/Nov '25.
- QIP PY 5 Loan Repayment	District	-	(3,090,086)	Paid on Decmber 9, 2024.
IGT sub-total		8,506,837	6,023,320	
Non-Intergovernmental Transfer Programs:				**Direct Payments.**
- AB 915 SY 2024-25	DHCS	-	1,802,585	Received on March 17, 2025. Based on FFS. County now under CCAH.
- SB 239 Hospital Quality Assurance Fund (HQAF)	DHCS	-	1,069,577	Rec. Sep. 4, 2024.
- SB 239 Hospital Quality Assurance Fund (HQAF) VIII	DHCS	-	1,081,621	Expected to Rec. 4th qtr payment by June 30, 2025.
- SB 239 Hospital Quality Assurance Fund (HQAF) VIII	DHCS	-	3,244,863	Rec'd 1st, 2nd, & 3rd Qtr payments YTD.
- SB 239 Hospital Quality Assurance Fund (HQAF) IX	DHCS	3,570,006		Qtrly Pmts expected March, May, July, & October 2026.
- Distinct Part, Nursing Facility (DP/NF)	-	-	-	Based on actual cost difference.
- Medi-Cal Disproportionate Share (DSH)	DHCS	180,837	1,260,151	H.R. 1 reduction of 60% effective 10/01/2025.
Non-IGT sub-total		3,750,843	8,458,797	
Program Grand Totals		12,257,680	14,482,117	
Total Received		180,837	17,572,203	
Total Pending		12,076,843		
Total Paid		-	(3,090,086)	
Net Supplemental Payments		12,257,680	14,482,117	

Hazel Hawkins
MEMORIAL HOSPITAL

REGULAR MEETING OF THE FACILITIES AND FINANCE COMMITTEE
SAN BENITO HEALTH CARE DISTRICT
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA
MONDAY, OCTOBER 20, 2025 - 4:30 P.M.
SUPPORT SERVICES BUILDING, 2ND FLOOR – GREAT ROOM

San Benito Health Care District is a public agency that serves as a responsive, comprehensive health care resource for its patients, physicians and the community.

1. Call to Order

2. Update on Current Projects
   - Project Dashboard – September 2025

3. Review Financial Updates
   - Financial Statements – September 2025
   - Finance Dashboard – September 2025

4. Public Comment
   This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on matters within the jurisdiction of this District Board **Committee,** which are not on this agenda.

5. Adjournment

The next Facilities and Finance Committee meeting is scheduled for **Monday, November 17, 2025** at **4:30 p.m.**

The complete Facilities and Finance Committee packet, including subsequently distributed materials and presentations, is available at the Facilities and Finance Committee meeting and in the Administrative Offices of

Hazel Hawkins
MEMORIAL HOSPITAL

the District. All items appearing on the agenda are subject to action by the Facilities and Finance Committee. Staff and Committee recommendations are subject to change by the Facilities and Finance Committee.

Notes: Requests for a disability-related modification or accommodation, including auxiliary aids or services, to attend or participate in a meeting should be made to District Administration during regular business hours at 831-636-2673. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

OCT Project Dashboard - Facilities

Project Name	Purpose	Start Date	Go Live	Duration	Status	Priority	Key Stakeholder	Role	Update
BD Installation	New Pyxis Machines	12/4/2024	TBD		In Progress	Medium	Naveen Ravela	Pharmacy Director	Looking to add Pyxis units into the pharmacy in the main hospital and add to existing. ICU and OB are ready for construction to begin.
Lab Phase 1	Upgrading Analyzers (Validation Only)	6/1/2024	2/1/2026	610	In Progress	High	Bernadette Enderez	Lab/Radiology Director	currently on 60-70% of the validation process. (project will not officially close out until Lab Phase 2 is completed and ready analyzers to move to permanent location)
Lab Phase 2	Analyzer Replacment	6/3/2024	2/1/2026	608	In Progress	High	Bernadette Enderez	Lab/Radiology Director	Construction is underway. Apprx 20% through schedule. No current impediments to progress.
OR Rebuild	Updating OR per OSHPD Requirements	11/20/2024	12/31/2025	406	In Progress	High	Mendi Suber-Ventura	Director of Surgical Services	Pending internal investigation for smaller/cheaper part replacement to see if sufficient fix

OCT Project Dashboard - Facilities

Sterilizer Replacement	installation of new AMSCO 400 48 SD equipment for Sterile Processing Department	9/16/2025	TBD		In Progress	High	Doug Mays	Senior Director Support Services	Initial kickoff meetings with architects and engineering team. Once receive 50% CD set with set up advertisement for bid
Seismic	Upgrade to Meet HCAI Seismic Compliance & Safety Standards	TBD	TBD		Ongoing	High	Doug Mays	Senior Director Support Services	Planning with architects
MRI Upgrade	Proposal submitted	TBD	TBD		On Hold	Low	Bernadette Enderez	Lab/Radiology Director	Proposal submitted
*Radiology Masterplan	Assessment of equipment and remodel	11/1/2025	TBD		On Hold	High	Bernadette Enderez	Lab/Radiology Director	Meeting to be scheduled to discuss requirements
*Imaging Trailer Pad Make Ready	Treanor to help when MP starts	10/1/2025	TBD		In Progress	Medium	Bernadette Enderez	Lab/Radiology Director	Architect proposal submitted, Working with vendor to determine suitable method of installation/trailer delivery method.
Tranquility Rooms	Dedicated therapeutic low sensory rooms at William & Inez Mabie Northside and Southside Skilled Nursing Facilities.	7/24/2025	12/11/2025		In Progress	High	Liz Sparling	Director Foundation	Both rooms progressing on schedule. Key items ordered and installation work underway.
*Verkada	Security / SSO + Door Access	3/11/2025	TBD		In Progress	High	Jorge Ramirez	Director of Emerg Mgmt & Security	HCAI has approved the project, pending contractor being assigned to issue building permit. (awaiting proposal) Test door has been activated, planning for other equipment to be programmed.

OCT Project Dashboard - Facilities

HUGS/Securitas	Infant Security	4/12/2024	12/1/2025	598	In Progress	High	Jac Fernandez	Senior Director of Acute Care Services	Subcontractors are fullfiulling cabling requirements - starting 9/22 planned 4-5 weeks before Securitas can perform next steps to program system
ED Helipad	System is an AFFF system and no longer allowed in CA. Is required to be phased out due to being a hazardous chemical.	1/14/2025	TBD		In Progress	High	Doug Mays	Senior Director Support Services	(E) Emergency HCAI project planned for demolition, proposal received from The Core Group. (S) Regular HCAI project planned for installation. Awaiting finalized proposals
Physical Therapy Clinic Remodel	Expanding current location to help with ongoing demand	6/1/2025	TBD		In Progress	High	Jun Estrada	Director of Physical Therapy	Continued meetings with internal team for planning and facility requirements.
Focus Sports Therapy	Rennovate and expand Focus sports thereapy clinic	7/1/2025	TBD		In Progress	Medium	Doug Mays	Senior Director Support Services	2nd schematic design meeting completed, onsite visit scheduled 10/14 to solidify design.
Willdan Energy Solutions	GK12 Program: 9 locations where we can have new water heaters at no cost to the district.	8/29/2025	TBD		In Progress	Medium	Doug Mays	Senior Director Support Services	Planning with internal and the general contractor team for permitting and installation dates

OCT Project Dashboard - Facilities

CT Scanner	Replace		TBD		On Hold	High	Bernadette Enderez	Lab/Radiology Director	Both CT's that we have need repairs. One needs a tube replaced. The CT in our ER is partially down until they arrive to begin repairs
Totals									

TASK STATUS %

STATUS	COUNT	%
Not Started	0	0%
In Progress	13	76%
Overdue	0	0%
On Hold	3	18%
Ongoing	1	6%
Completed	0	0%
TOTAL	**17**	**100%**

PROJECT PRIORITY %

PRIORITY	COUNT	%
High	12	71%
Medium	4	24%
Low	1	6%
TOTAL	**17**	**100%**

estimated go-live
planned go live

Hazel Hawkins
MEMORIAL HOSPITAL
SKILLED NURSING FACILITIES
HOME HEALTH AGENCY
San Benito Health Care District

San Benito Health Care District
A Public Agency
911 Sunset Drive
Hollister, CA 95023-5695
(831) 637-5711

October 20, 2025

CFO Financial Summary for the District Board:

For the month ending September 30, 2025, the District's Net Surplus (Loss) is $1,440,850 compared to a budgeted Surplus (Loss) of $1,129,743. The District exceed its budget for the month by $311,107.

YTD as of September 30, 2025, the District's Net Surplus (Loss) is $3,243,806 compared to a budgeted Surplus (Loss) of $3,549,463. The District is under budget YTD by $305,657.

Acute discharges were 156 for the month, the budgeted amount. The ADC was 14.97 compared to a budget of 14.67. The ALOS was 2.88. The acute I/P gross revenue exceeded budget by **$575,571** or **6%** while O/P services gross revenue exceeded budget by **$942,640** or **3%**. ER I/P visits were 127 and ER O/P visits were over budget by 24 visits or 1%. The RHCs & Specialty Clinics treated 3,767 (includes 534 visits at the Diabetes Clinic) and 1,136 visits respectively.

Other Operating revenue exceeded budget by **$909,150** due mainly to:

1) **$590,591** final accrual for the CY 23 Phase II DHDP.
2) **$507,857** accrual of a direct payment from HQAF CY 2025.

Operating Expenses were under budget by **$288,183** due mainly to: savings in savings in Employee Benefits and Salaries & Wages Expenses of $378,409 and $97,283 respectively. The savings were slightly offset by overages in Registry and Professional fees of $122,176 and 150,395 respectively.

Non-operating Revenue exceeded budget by **$74,253** due to the timing of donations from the Foundation.

The SNFs ADC was **89.13** for the month. The Net Surplus (Loss) is $40,813 compared to a budget of $101,078. YTD, the Net Surplus (Loss) is $228,103 under budget by $91,289 due to a lower than budgeted ADC.

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
HOLLISTER, CA 95023
FOR PERIOD 09/30/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24
GROSS PATIENT REVENUE:										
ACUTE ROUTINE REVENUE	3,741,664	3,394,570	347,094	10	3,675,703	11,163,767	10,909,501	254,266	2	11,376,823
SNF ROUTINE REVENUE	2,011,950	2,025,000	(13,050)	(1)	2,004,450	6,110,970	6,210,000	(99,030)	(2)	5,948,130
ANCILLARY INPATIENT REVENUE	4,434,885	4,385,560	49,325	1	4,437,414	12,238,406	13,747,587	(1,509,181)	(11)	13,762,160
HOSPITALIST\PEDS I\P REVENUE	192,202	0	192,202		0	597,647	0	597,647		0
TOTAL GROSS INPATIENT REVENUE	10,380,701	9,805,130	575,571	6	10,117,567	30,110,789	30,867,088	(756,299)	(3)	31,087,113
ANCILLARY OUTPATIENT REVENUE	30,380,143	29,547,538	832,605	3	28,130,418	91,553,647	91,965,182	(411,535)	0	86,113,230
HOSPITALIST\PEDS O\P REVENUE	110,035	0	110,035		0	348,836	0	348,836		0
TOTAL GROSS OUTPATIENT REVENUE	30,490,178	29,547,538	942,640	3	28,130,418	91,902,483	91,965,182	(62,699)	0	86,113,230
TOTAL GROSS PATIENT REVENUE	40,870,879	39,352,668	1,518,211	4	38,247,984	122,013,272	122,832,270	(818,998)	(1)	117,200,342
DEDUCTIONS FROM REVENUE:										
MEDICARE CONTRACTUAL ALLOWANCES	12,081,024	10,589,749	1,491,275	14	9,965,597	34,547,713	33,076,883	1,470,830	4	31,399,072
MEDI-CAL CONTRACTUAL ALLOWANCES	11,397,797	10,046,283	1,351,514	14	10,226,182	32,916,169	31,387,555	1,528,614	5	30,795,981
BAD DEBT EXPENSE	490,478	994,177	(503,699)	(51)	830,680	2,461,533	3,074,824	(613,291)	(20)	2,134,330
CHARITY CARE	38,317	30,402	7,915	26	136,264	134,232	95,003	39,229	41	137,383
OTHER CONTRACTUALS AND ADJUSTMENTS	4,818,481	4,698,929	119,552	3	4,687,617	15,036,027	14,681,522	354,505	2	14,130,898
HOSPITALIST\PEDS CONTRACTUAL ALLOW	12,132	0	12,132		0	145,241	0	145,241		0
TOTAL DEDUCTIONS FROM REVENUE	28,838,230	26,359,540	2,478,690	9	25,846,340	85,240,916	82,315,787	2,925,129	4	78,597,664
NET PATIENT REVENUE	12,032,649	12,993,128	(960,479)	(7)	12,401,645	36,772,356	40,516,483	(3,744,127)	(9)	38,602,679
OTHER OPERATING REVENUE	2,169,923	1,260,773	909,150	72	750,332	6,225,862	3,545,005	2,680,857	76	1,934,368
NET OPERATING REVENUE	14,202,572	14,253,901	(51,330)	0	13,151,977	42,998,218	44,061,488	(1,063,270)	(2)	40,537,047
OPERATING EXPENSES:										
SALARIES & WAGES	5,313,710	5,410,993	(97,283)	(2)	4,968,010	16,003,891	16,552,709	(548,818)	(3)	14,794,811
REGISTRY	647,561	525,385	122,176	23	477,630	1,892,613	1,576,154	316,459	20	1,466,355
EMPLOYEE BENEFITS	2,025,506	2,403,915	(378,409)	(16)	2,236,769	6,498,840	7,389,104	(890,265)	(12)	6,524,051
PROFESSIONAL FEES	1,794,989	1,644,594	150,395	9	1,512,691	5,352,312	4,934,162	418,150	9	4,558,761
SUPPLIES	1,192,570	1,242,643	(50,073)	(4)	1,020,584	3,931,558	3,883,863	47,695	1	3,103,794
PURCHASED SERVICES	1,343,113	1,311,618	31,495	2	1,286,569	4,175,765	4,036,852	138,913	3	3,777,912
RENTAL	143,305	169,755	(26,450)	(16)	183,137	543,189	509,265	33,924	7	460,962
DEPRECIATION & AMORT	327,195	315,203	11,992	4	320,739	973,635	945,609	28,026	3	958,729
INTEREST	8,054	19,757	(11,703)	(59)	5,408	82,168	59,441	22,727	38	17,593
OTHER	423,689	464,011	(40,322)	(9)	463,908	1,528,875	1,776,014	(247,139)	(14)	1,331,389
TOTAL EXPENSES	13,219,691	13,507,874	(288,183)	(2)	12,475,445	40,982,844	41,663,173	(680,329)	(2)	36,994,355
NET OPERATING INCOME (LOSS)	982,880	746,027	236,853	32	676,532	2,015,374	2,398,315	(382,941)	(16)	3,542,691

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
HOLLISTER, CA 95023
FOR PERIOD 09/30/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	96,641	20,000	76,641	383	0	142,641	60,000	82,641	138	13,876
PROPERTY TAX REVENUE	248,434	248,434	0	0	241,122	745,302	745,302	0	0	723,366
GO BOND PROP TAXES	181,114	181,114	0	0	175,915	543,341	543,342	(1)	0	527,744
GO BOND INT REVENUE\EXPENSE	(61,114)	(61,114)	0	0	(65,081)	(183,341)	(183,342)	1	0	(195,244)
OTHER NON-OPER REVENUE	13,866	16,399	(2,533)	(15)	16,406	42,169	49,197	(7,028)	(14)	46,967
OTHER NON-OPER EXPENSE	(22,650)	(22,742)	92	0	(27,820)	(67,950)	(68,226)	276	0	(83,450)
INVESTMENT INCOME	1,678	1,625	53	3	3,431	6,270	4,875	1,395	29	12,714
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	457,969	383,716	74,253	19	343,971	1,228,432	1,151,148	77,284	7	1,045,973
NET SURPLUS (LOSS)	1,440,850	1,129,743	311,107	28	1,020,504	3,243,806	3,549,463	(305,657)	(9)	4,588,665
EBIDA	$ 1,670,694	$ 1,347,688	$ 323,006	23.96%	$ 1,258,230	$ 3,925,391	$ 4,203,298	$ (277,908)	(6.61)%	$ 5,298,343
EBIDA MARGIN	11.76%	9.45%	2.31%	24.41%	9.57%	9.13%	9.54%	(0.41)%	(4.30)%	13.07%
OPERATING MARGIN	6.92%	5.23%	1.69%	32.22%	5.14%	4.69%	5.44%	(0.76)%	(13.88)%	8.74%
NET SURPLUS (LOSS) MARGIN	10.14%	7.93%	2.22%	27.99%	7.76%	7.54%	8.06%	(0.51)%	(6.35)%	11.32%

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
HOLLISTER, CA 95023
FOR PERIOD 09/30/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24
GROSS PATIENT REVENUE:										
ROUTINE REVENUE	3,741,664	3,394,570	347,094	10	3,675,703	11,163,767	10,909,501	254,266	2	11,376,823
ANCILLARY INPATIENT REVENUE	4,033,600	4,016,728	16,872	0	4,065,493	11,066,688	12,616,505	(1,549,817)	(12)	12,835,634
HOSPITALIST I\P REVENUE	192,202	0	192,202		0	597,647	0	597,647		0
TOTAL GROSS INPATIENT REVENUE	7,967,466	7,411,298	556,168	8	7,741,196	22,828,102	23,526,006	(697,904)	(3)	24,212,457
ANCILLARY OUTPATIENT REVENUE	30,380,143	29,547,538	832,605	3	28,130,418	91,553,647	91,965,182	(411,535)	0	86,113,230
HOSPITALIST O\P REVENUE	110,035	0	110,035		0	348,836	0	348,836		0
TOTAL GROSS OUTPATIENT REVENUE	30,490,178	29,547,538	942,640	3	28,130,418	91,902,483	91,965,182	(62,699)	0	86,113,230
TOTAL GROSS ACUTE PATIENT REVENUE	38,457,644	36,958,836	1,498,808	4	35,871,613	114,730,585	115,491,188	(760,603)	(1)	110,325,687
DEDUCTIONS FROM REVENUE ACUTE:										
MEDICARE CONTRACTUAL ALLOWANCES	11,803,273	10,325,156	1,478,117	14	9,699,244	33,682,610	32,264,668	1,417,942	4	30,687,380
MEDI-CAL CONTRACTUAL ALLOWANCES	11,221,375	9,948,781	1,272,594	13	10,108,539	32,527,636	31,088,549	1,439,087	5	30,380,070
BAD DEBT EXPENSE	489,866	989,177	(499,311)	(51)	893,410	2,457,608	3,059,824	(602,216)	(20)	2,177,869
CHARITY CARE	38,317	30,402	7,915	26	136,264	131,208	95,003	36,205	38	137,383
OTHER CONTRACTUALS AND ADJUSTMENTS	4,831,801	4,664,997	166,804	4	4,643,814	15,000,726	14,577,463	423,263	3	14,045,223
HOSPITALIST\PEDS CONTRACTUAL ALLOW	12,132	0	12,132		0	145,241	0	145,241		0
TOTAL ACUTE DEDUCTIONS FROM REVENUE	28,396,765	25,958,513	2,438,252	9	25,481,270	83,945,030	81,085,507	2,859,523	4	77,427,924
NET ACUTE PATIENT REVENUE	10,060,879	11,000,323	(939,444)	(9)	10,390,343	30,785,555	34,405,681	(3,620,126)	(11)	32,897,763
OTHER OPERATING REVENUE	2,169,923	1,260,773	909,150	72	750,332	6,225,862	3,545,005	2,680,857	76	1,934,368
NET ACUTE OPERATING REVENUE	12,230,802	12,261,096	(30,294)	0	11,140,675	37,011,417	37,950,686	(939,269)	(3)	34,832,131
OPERATING EXPENSES:										
SALARIES & WAGES	4,265,716	4,335,031	(69,315)	(2)	3,863,415	12,839,548	13,272,385	(432,838)	(3)	11,714,072
REGISTRY	583,415	476,160	107,255	23	448,153	1,691,725	1,428,480	263,245	18	1,339,758
EMPLOYEE BENEFITS	1,571,361	1,908,909	(337,548)	(18)	1,720,512	5,070,334	5,876,382	(806,048)	(14)	5,091,737
PROFESSIONAL FEES	1,792,779	1,642,094	150,685	9	1,510,481	5,345,682	4,926,662	419,020	9	4,552,131
SUPPLIES	1,073,637	1,147,273	(73,636)	(6)	932,001	3,590,342	3,591,723	(1,381)	0	2,814,833
PURCHASED SERVICES	1,244,330	1,210,682	33,648	3	1,194,909	3,879,777	3,727,744	152,033	4	3,520,443
RENTAL	110,121	161,839	(51,719)	(32)	181,389	480,313	483,297	(2,984)	(1)	456,437
DEPRECIATION & AMORT	286,684	276,162	10,522	4	281,616	854,369	828,486	25,883	3	841,358
INTEREST	8,054	19,757	(11,703)	(59)	5,408	82,168	59,441	22,727	38	17,593
OTHER	320,446	406,048	(85,602)	(21)	411,045	1,293,312	1,580,586	(287,274)	(18)	1,152,248
TOTAL EXPENSES	11,256,543	11,583,955	(327,412)	(3)	10,548,928	35,127,569	35,775,186	(647,617)	(2)	31,500,610
NET OPERATING INCOME (LOSS)	974,259	677,141	297,118	44	591,747	1,883,848	2,175,500	(291,652)	(13)	3,331,521

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
HOLLISTER, CA 95023
FOR PERIOD 09/30/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	96,641	20,000	76,641	383	0	142,641	60,000	82,641	138	13,876
PROPERTY TAX REVENUE	211,194	211,194	0	0	204,954	633,582	633,582	0	0	614,862
GO BOND PROP TAXES	181,114	181,114	0	0	175,915	543,341	543,342	(1)	0	527,744
GO BOND INT REVENUE\EXPENSE	(61,114)	(61,114)	0	0	(65,081)	(183,341)	(183,342)	1	0	(195,244)
OTHER NON-OPER REVENUE	13,866	16,399	(2,533)	(15)	16,406	42,169	49,197	(7,028)	(14)	46,967
OTHER NON-OPER EXPENSE	(17,602)	(17,694)	92	(1)	(21,632)	(52,806)	(53,082)	276	(1)	(64,885)
INVESTMENT INCOME	1,678	1,625	53	3	3,431	6,270	4,875	1,395	29	12,714
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	425,777	351,524	74,253	21	313,992	1,131,855	1,054,572	77,283	7	956,034
NET SURPLUS (LOSS)	1,400,036	1,028,665	371,371	36	905,739	3,015,704	3,230,072	(214,369)	(7)	4,287,555

HAZEL HAWKINS SKILLED NURSING FACILITIES
HOLLISTER, CA
FOR PERIOD 09/30/25

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24	ACTUAL 09/30/25	BUDGET 09/30/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 09/30/24
GROSS SNF PATIENT REVENUE:										
ROUTINE SNF REVENUE	2,011,950	2,025,000	(13,050)	(1)	2,004,450	6,110,970	6,210,000	(99,030)	(2)	5,948,130
ANCILLARY SNF REVENUE	401,285	368,832	32,453	9	371,921	1,171,717	1,131,082	40,635	4	926,526
TOTAL GROSS SNF PATIENT REVENUE	2,413,235	2,393,832	19,403	1	2,376,371	7,282,687	7,341,082	(58,395)	(1)	6,874,656
DEDUCTIONS FROM REVENUE SNF:										
MEDICARE CONTRACTUAL ALLOWANCES	277,752	264,593	13,159	5	266,353	865,103	812,215	52,888	7	711,693
MEDI-CAL CONTRACTUAL ALLOWANCES	176,422	97,502	78,920	81	117,643	388,533	299,006	89,527	30	415,912
BAD DEBT EXPENSE	612	5,000	(4,388)	(88)	(62,730)	3,925	15,000	(11,075)	(74)	(43,539)
CHARITY CARE	0	0	0	0	0	3,024	0	3,024		0
OTHER CONTRACTUALS AND ADJUSTMENTS	(13,320)	33,932	(47,252)	(139)	43,804	35,301	104,059	(68,758)	(66)	85,675
TOTAL SNF DEDUCTIONS FROM REVENUE	441,466	401,027	40,439	10	365,069	1,295,886	1,230,280	65,606	5	1,169,740
NET SNF PATIENT REVENUE	1,971,770	1,992,805	(21,035)	(1)	2,011,302	5,986,801	6,110,802	(124,001)	(2)	5,704,916
OTHER OPERATING REVENUE	0	0	0	0	0	0	0	0	0	0
NET SNF OPERATING REVENUE	1,971,770	1,992,805	(21,035)	(1)	2,011,302	5,986,801	6,110,802	(124,001)	(2)	5,704,916
OPERATING EXPENSES:										
SALARIES & WAGES	1,047,994	1,075,962	(27,968)	(3)	1,104,596	3,164,343	3,280,324	(115,981)	(4)	3,080,739
REGISTRY	64,146	49,225	14,921	30	29,477	200,888	147,674	53,214	36	126,597
EMPLOYEE BENEFITS	454,145	495,006	(40,861)	(8)	516,257	1,428,506	1,512,722	(84,216)	(6)	1,432,314
PROFESSIONAL FEES	2,210	2,500	(290)	(12)	2,210	6,630	7,500	(870)	(12)	6,630
SUPPLIES	118,933	95,370	23,563	25	88,583	341,216	292,140	49,076	17	288,961
PURCHASED SERVICES	98,783	100,936	(2,153)	(2)	91,661	295,988	309,108	(13,120)	(4)	257,469
RENTAL	33,185	7,916	25,269	319	1,747	62,876	25,968	36,908	142	4,525
DEPRECIATION	40,511	39,041	1,470	4	39,123	119,266	117,123	2,143	2	117,370
INTEREST	0	0	0	0	0	0	0	0	0	0
OTHER	103,242	57,963	45,279	78	52,863	235,563	195,428	40,135	21	179,141
TOTAL EXPENSES	1,963,148	1,923,919	39,229	2	1,926,516	5,855,275	5,887,987	(32,713)	(1)	5,493,745
NET OPERATING INCOME (LOSS)	8,621	68,886	(60,265)	(88)	84,785	131,526	222,815	(91,289)	(41)	211,170
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	37,240	37,240	0	0	36,168	111,720	111,720	0	0	108,504
OTHER NON-OPER EXPENSE	(5,048)	(5,048)	0	0	(6,188)	(15,144)	(15,144)	0	0	(18,565)
TOTAL NON-OPERATING REVENUE/(EXPENSE)	32,192	32,192	0	0	29,980	96,576	96,576	0	0	89,939
NET SURPLUS (LOSS)	40,813	101,078	(60,265)	(60)	114,765	228,103	319,391	(91,289)	(29)	301,110

HAZEL HAWKINS MEMORIAL HOSPITAL
HOLLISTER, CA
For the month ended 09/30/25

	CURR MONTH 09/30/25	PRIOR MONTH 08/31/25	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/25
CURRENT ASSETS					
CASH & CASH EQUIVALENT	41,358,446	42,081,547	(723,101)	(2)	46,670,217
PATIENT ACCOUNTS RECEIVABLE	65,389,168	65,518,188	(129,020)	0	66,556,290
BAD DEBT ALLOWANCE	(6,739,015)	(7,628,156)	889,141	(12)	(7,062,672)
CONTRACTUAL RESERVES	(37,634,480)	(36,713,359)	(921,121)	3	(38,404,377)
OTHER RECEIVABLES	11,328,929	9,330,441	1,998,488	21	5,156,947
INVENTORIES	5,004,777	4,980,415	24,362	1	4,981,471
PREPAID EXPENSES	3,007,788	2,688,153	319,635	12	2,599,584
DUE TO\FROM THIRD PARTIES	(181,860)	(181,860)	0	0	(181,860)
TOTAL CURRENT ASSETS	81,533,753	80,075,370	1,458,383	2	80,315,600
ASSETS WHOSE USE IS LIMITED					
BOARD DESIGNATED FUNDS	5,902,662	5,872,547	30,115	1	5,243,618
TOTAL LIMITED USE ASSETS	5,902,662	5,872,547	30,115	1	5,243,618
PROPERTY, PLANT, AND EQUIPMENT					
LAND & LAND IMPROVEMENTS	3,370,474	3,370,474	0	0	3,370,474
BLDGS & BLDG IMPROVEMENTS	100,098,374	100,098,374	0	0	100,098,374
EQUIPMENT	47,133,761	46,575,536	558,225	1	46,216,122
CONSTRUCTION IN PROGRESS	4,770,353	4,614,392	155,961	3	4,324,809
GROSS PROPERTY,PLANT, AND EQUIPMENT	155,372,962	154,658,776	714,187	1	154,009,779
ACCUMULATED DEPRECIATION	(99,411,539)	(99,069,432)	(342,107)	0	(98,393,920)
NET PROPERTY, PLANT, AND EQUIPMENT	55,961,423	55,589,343	372,080	1	55,615,859
OTHER ASSETS					
UNAMORTIZED LOAN COSTS	309,990	315,732	(5,742)	(2)	327,215
PENSION DEFERRED OUTFLOWS NET	7,038,149	7,038,149	0	0	7,038,149
TOTAL OTHER ASSETS	7,348,139	7,353,881	(5,742)	0	7,365,364
TOTAL UNRESTRICTED ASSETS	150,745,977	148,891,140	1,854,836	1	148,540,441
RESTRICTED ASSETS	127,776	127,725	51	0	127,208
TOTAL ASSETS	150,873,753	149,018,866	1,854,887	1	148,667,650

HAZEL HAWKINS MEMORIAL HOSPITAL
HOLLISTER, CA
For the month ended 09/30/25

	CURR MONTH 09/30/25	PRIOR MONTH 08/31/25	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/25
CURRENT LIABILITIES					
ACCOUNTS PAYABLE	7,631,338	6,552,668	(1,078,671)	17	6,221,841
ACCRUED PAYROLL	2,398,886	1,915,086	(483,800)	25	3,467,229
ACCRUED PAYROLL TAXES	143,122	976,810	833,688	(85)	257,552
ACCRUED BENEFITS	4,514,482	4,706,154	191,672	(4)	5,074,320
OTHER ACCRUED EXPENSES	92,144	95,398	3,254	(3)	80,907
PATIENT REFUNDS PAYABLE	3,101	1,310	(1,792)	137	1,310
DUE TO\FROM THIRD PARTIES	3,983,965	4,028,165	44,200	(1)	4,701,466
OTHER CURRENT LIABILITIES	908,494	950,496	42,002	(4)	756,834
TOTAL CURRENT LIABILITIES	19,675,533	19,226,086	(449,447)	2	20,561,459
LONG-TERM DEBT					
LEASES PAYABLE	4,614,513	4,621,452	6,939	0	4,635,296
BONDS PAYABLE	28,449,321	28,477,841	28,520	0	28,534,881
TOTAL LONG TERM DEBT	33,063,833	33,099,293	35,459	0	33,170,177
OTHER LONG-TERM LIABILITIES					
DEFERRED REVENUE	0	0	0	0	0
LONG-TERM PENSION LIABILITY	23,814,514	23,814,514	0	0	23,814,514
TOTAL OTHER LONG-TERM LIABILITIES	23,814,514	23,814,514	0	0	23,814,514
TOTAL LIABILITIES	76,553,880	76,139,893	(413,987)	1	77,546,150
NET ASSETS:					
UNRESTRICTED FUND BALANCE	71,069,106	71,069,106	0	0	70,971,926
RESTRICTED FUND BALANCE	104,141	104,090	(51)	0	149,573
NET REVENUE/(EXPENSES)	3,146,626	1,705,777	(1,440,850)	85	0
TOTAL NET ASSETS	74,319,873	72,878,973	(1,440,900)	2	71,121,500
TOTAL LIABILITIES AND NET ASSETS	150,873,753	149,018,866	(1,854,887)	1	148,667,650

Hazel Hawkins
MEMORIAL HOSPITAL

San Benito Health Care District
Hazel Hawkins Memorial Hospital
SEPTEMBER 2025

Description	MTD Budget	MTD Actual	YTD Actual	YTD Budget	FYE Budget
Average Daily Census - Acute	14.67	14.97	14.74	15.57	15.00
Average Daily Census - SNF	90.00	89.13	88.26	90.00	90.00
Acute Length of Stay	2.82	2.88	2.73	2.80	2.80
ER Visits:					
Inpatient	124	127	401	420	1,638
Outpatient	2,152	2,176	6,511	6,345	27,053
Total	2,276	2,303	6,912	6,765	28,691
Days in Accounts Receivable	50.0	50.2	50.2	50.0	50.0
Productive Full-Time Equivalents	561.68	536.04	535.92	561.68	575.17
Net Patient Revenue	12,993,128	12,032,649	36,772,356	40,516,483	157,730,532
Payment-to-Charge Ratio	33.0%	29.4%	30.1%	33.0%	32.4%
Medicare Traditional Payor Mix	29.42%	30.53%	29.06%	29.73%	28.71%
Commercial Payor Mix	22.61%	21.71%	23.70%	22.25%	23.36%
Bad Debt % of Gross Revenue	2.50%	1.20%	2.02%	2.50%	2.53%
EBIDA	1,347,688	1,670,694	3,925,391	4,203,298	13,769,729
EBIDA %	9.45%	11.76%	9.13%	9.54%	7.98%
Operating Margin	5.23%	6.92%	4.69%	5.44%	3.79%
Salaries, Wages, Registry & Benefits %:					
by Net Operating Revenue	58.51%	56.23%	56.74%	57.91%	59.06%
by Total Operating Expense	61.74%	60.42%	59.53%	61.25%	61.39%
Bond Covenants:					
Debt Service Ratio - 1.25	8.64	10.71	8.39	11.23	7.36
Current Ratio - 1.50	2.00	4.14	4.14	2.00	2.00
Days Cash on hand - 30.00	94.66	94.99	94.99	94.66	110.00

Met or Exceeded Target
Within 10% of Target
Not Within 10%

Statement of Cash Flows
Hazel Hawkins Memorial Hospital
Hollister, CA
Three month ending September 30, 2025

	CASH FLOW		COMMENTS
	Current Month 9/30/2025	Current Year-To-Date 9/30/2025	
CASH FLOWS FROM OPERATING ACTIVITIES:			
Net Income (Loss)	$1,440,850	$3,243,806	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:			
Depreciation	342,107	1,017,619	
(Increase)/Decrease in Net Patient Accounts Receivable	161,000	73,568	
(Increase)/Decrease in Other Receivables	(1,998,488)	(6,171,982)	
(Increase)/Decrease in Inventories	(24,362)	(23,306)	
(Increase)/Decrease in Pre-Paid Expenses	(319,635)	(408,205)	
(Increase)/Decrease in Due From Third Parties	0	0	
Increase/(Decrease) in Accounts Payable	1,078,671	1,409,496	
Increase/(Decrease) in Notes and Loans Payable	0	0	
Increase/(Decrease) in Accrued Payroll and Benefits	(541,561)	(1,742,605)	
Increase/(Decrease) in Accrued Expenses	(3,254)	11,238	
Increase/(Decrease) in Patient Refunds Payable	1,792	1,792	
Increase/(Decrease) in Third Party Advances/Liabilities	(44,200)	(717,501)	
Increase/(Decrease) in Other Current Liabilities	(42,002)	151,660	Semi-Annual Int. - 2005 GO & 2021 Revenue Bonds
Net Cash Provided by Operating Activities:	(1,389,932)	(6,398,226)	
CASH FLOWS FROM INVESTING ACTIVITIES:			
Purchase of Property, Plant and Equipment	(714,187)	(1,363,184)	
(Increase)/Decrease in Limited Use Cash and Investments	0	0	
(Increase)/Decrease in Other Limited Use Assets	(30,115)	(659,044)	Bond Principal & Int Payment - 2014 (2005) & 2021 Bonds
(Increase)/Decrease in Other Assets	5,742	17,226	Amortization
Net Cash Used by Investing Activities	(738,560)	(2,005,002)	
CASH FLOWS FROM FINANCING ACTIVITIES:			
Increase/(Decrease) in Capital Lease Debt	(6,939)	(20,783)	
Increase/(Decrease) in Bond Mortgage Debt	(28,520)	(85,560)	2014 GO Principal & Refinancing of 2013 Bonds with 2021 Bonds
Increase/(Decrease) in Other Long Term Liabilities	0	0	
Net Cash Used for Financing Activities	(35,459)	(106,343)	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	(46,000)	
Net Increase/(Decrease) in Cash	(723,101)	(5,311,765)	
Cash, Beginning of Period	42,081,547	46,670,211	
Cash, End of Period	**$41,358,446**	**$41,358,446**	$0
Cost per day to run the District	$435,375	$41,627,055	Budgeted Cash on Hand
Operational Days Cash on Hand	94.99	($268,609)	Variance

SUBJECT: Board Member Remote Participation

PURPOSE:

The purpose of this policy is to ensure that the San Benito Health Care District (District) Board of Directors upholds the highest standards of ethical and professional conduct. Board members are entrusted with governing in a manner that reflects integrity, transparency, collaboration, and accountability to the community, while complying with state and federal laws, including the Ralph M. Brown Act (Brown Act) and Government Code sections 53234, as may be amended (AB 1234).

POLICY:

Attendance Required

Board members are expected to be at the dais at all times during meetings except for necessary short breaks and other reasonable exceptions. The Board expects its members to attend regularly and notify the Board Clerk of any planned absences.

Board members are strongly encouraged to attend meetings in person. State law allows Board members to attend meetings remotely by following the procedures outlined in Government Code section 54953(b) (Traditional Teleconferencing Rules) or the procedures outlined in AB 2449 (AB 2449 Remote Attendance), as may be amended.

Number of Remote Appearances

Remote appearances shall be permitted not more than three (3) times a calendar year for each legislative body. For example, three (3) times per calendar year for Board meetings and three (3) additional times for committee meetings that are subject to the Ralph M. Brown Act (Brown Act). AB 2449 rules still apply, which provide that no more than two (2) meetings may be attended remotely during a calendar year for "just cause," as described below.

General Procedures for Remote Appearances

Board members shall follow the mandatory procedures set forth in applicable law. At any meeting where a Board member is participating remotely, the following requirements must be met:

1. At least a quorum of the Board must participate from a single physical location within the jurisdiction of the District.

2. The agenda must identify and include an opportunity for the public to attend and directly address the Board member through a call-in option, an internet-based service option, and in-person at the location of the meeting.

3. The Board may not take action if there is an unresolved disruption to the broadcast or to the ability to take call-in or internet-based public comment.

If the above threshold requirements are met, the Board member attending remotely must ensure they follow the procedures with either the Traditional Teleconferencing Rules or the AB 2449 Remote Attendance.

Traditional Teleconferencing Rules – Attendance Procedures

The Board member attending remotely using these procedures must ensure that:

1. The meeting agenda identifies the remote attendance location and is posted at that location in an area that is accessible and visible 24 hours a day for at least 72 hours prior to a regular meeting and 24 hours prior to a special meeting.

2. The remote attendance location is open and fully accessible to the public, and fully accessible under the Americans with Disability Act, throughout the entire meeting. These requirements apply to private residences, hotel rooms, and similar facilities, all of which must remain fully open and accessible throughout the meeting, without requiring identification or registration.

3. The remote attendance technology used is open and fully accessible to all members of the public, including those with disabilities.

4. Members of the public who attend the meeting at the remote attendance location have the same opportunity to address the Board from the remote location that they would if they were present in the Board's meeting room.

5. The remote attendance location must not require an admission fee or any payment for attendance.

6. If the meeting includes a closed session, the Board member must ensure that there is a private location available for that portion of the meeting. A private location means a closed room where no other person can hear any portion of the closed session.

If a Board member intends to follow the procedures of the Traditional Teleconferencing Rules but determines that any or all of these requirements cannot be met, the Board member shall not participate in the meeting remotely using Traditional Teleconferencing Rules.

Traditional Teleconferencing Rules – Guidelines

- The Board member must provide the Board Clerk with five (5) days written notice in advance of the publication of the agenda regarding the member's intent to participate remotely. The notice must include the address at which the remote attendance will occur.

- The Board member is responsible for posting the Board meeting agenda in the remote location, or having the agenda posted by somebody at the location and confirming the posting has occurred. The Board Clerk will assist, if necessary, by emailing, faxing or mailing the agenda to the address or fax number the Board member requests; however, it is the Board member's responsibility to ensure the agenda arrives and is posted. If the Board member will need the assistance of the Board Clerk in the delivery of the agenda, the fax number of address must be included in the five-day advance written notice, above.

- The Board member must ensure that the location will be publicly accessible while the meeting is in progress.

- The Board member must state at the beginning of the Board meeting that the posting requirement was met at the location and that the location is publicly accessible and must describe the location.

AB 2449 Remote Attendance Procedures

Remote participation is allowed in certain narrow circumstances without publishing the remote location on the meeting agenda and without providing public access from the remote location.

Where the requirements of AB 2449 are met, a Board member is not required to follow the procedures described in the Traditional Teleconferencing Rules, above.

A member may participate remotely under AB 2449 if they have "just cause" or "emergency circumstances" that require remote participation, as defined by AB 2449, as may be amended.

1. "**Just Cause**" is defined as:

    - A childcare or caregiving need of a child, parent, grandparent, grandchild, sibling, spouse, or domestic partners that requires remote attendance.

    - A contagious illness that prevents in-person attendance.

    - A need related to a physical or mental disability that cannot be resolved by a request for reasonable accommodation, or

    - Travel while on the business of a state or local agency.

    A Board member with "just cause" to attend remotely must notify the Board or Board Committee and the Board Clerk at the earliest possible opportunity, including at the start of the meeting, or their need to participate remotely and provide a general description of the circumstances.

2. "**Emergency Circumstances**" is defined as a physical or family medical emergency that prevents a Board member form attending the Board meeting in person.

    - A Board member attending remotely due to emergency circumstances must notify the Board, the Board Committee, and the Board Clerk at the earliest possible opportunity.

    - The Board or Board Committee must request a general description of the circumstances relating to the Board member's need to appear remotely. The description does not need to have more than 20 words, and the Board member does not have to disclose any personal medical information.

    - At the earliest opportunity available to it, the Board or Board Committee must, by a majority vote of its members, take action on the request to approve or disapprove it. If the request does not allow sufficient time to place it on the agenda for the meeting for which the request is made, the legislative body must take action on the request at the beginning of the meeting by majority vote.

3. **Disclosures**. Board members attending remotely must publicly disclose at the meeting before any action is taken whether any other individuals 18 years of age or older are present in the room at the remote location with the member and general nature of the member's relationship with the individual.

San Benito Health Care District
Facilities and Finance Committee Minutes
October 20, 2025 - 4:30pm

Present: Bill Johnson, Board President
Victoria Angelo, Board Treasurer
Mary Casillas, Chief Executive Officer
Mark Robinson, Chief Financial Officer
Amy Breen-Lema, Vice President Clinic, Ambulatory & Physician Services
Suzie Mays, Vice President, Information & Strategic Services
Karen Descent, Chief Nursing Officer
Douglas Mays, Senior Director of Support Services
Sandra DiLaura, Controller

Public:

1. **CALL TO ORDER**
   The meeting of the Facilities and Finance Committee was called to order at 4:30pm.

2. **UPDATE ON CURRENT PROJECTS**
   A. September 2025 Project Dashboard
   The Project Dashboard was reviewed in detail on each of the open projects. All of the projects are still in progress with the MRI Upgrade, Radiology Masterplan, and CT Scanner being placed on hold.

3. **REVIEW FINANCIAL UPDATES**
   A. September 2025 Financial Statements
   For the month ending September 30, 2025, the District's Net Surplus (Loss) is $1,440,850 compared to a budgeted Surplus (Loss) of $1,129,743. The District exceed its budget for the month by $311,107.

   YTD as of September 30, 2025, the District's Net Surplus (Loss) is $3,243,806 compared to a budgeted Surplus (Loss) of $3,549,463. The District is under budget YTD by $305,657.

   Acute discharges were 156 for the month, the budgeted amount. The ADC was 14.97 compared to a budget of 14.67. The ALOS was 2.88. The acute I/P gross revenue exceeded budget by **$575,571** or **6%** while O/P services gross revenue exceeded budget by **$942,640** or **3%**. ER I/P visits were 127 and ER O/P visits were over budget by 24 visits or 1%. The RHCs & Specialty Clinics treated 3,767 (includes 534 visits at the Diabetes Clinic) and 1,136 visits respectively.

   Other Operating revenue exceeded budget by **$909,150** due mainly to:

1. **$213,916** settlement for FYE June 30, 2001 Cost Report appeal.
2. **$280,163** settlement for FYE June 30, 2003 Cost Report appeal.
3. **$158,700** from the HQIP from Central CA Alliance for Health (CCAH).
4. **$125,000** from the Medi-Cal Capacity Grant Program sponsored by CCAH.

Operating Expenses were slightly over budget by **$92,706** due mainly to: overages in Professional Fees and Supplies of $210,113 and 176,040 respectively. These overages were largely offset by savings in Benefits and Other Expenses of $273,493 and $103,698 respectively.

Non-operating Revenue exceeded budget by **$74,253** due to the timing of donations from the Foundation.

The SNFs ADC was **89.13** for the month. The Net Surplus (Loss) is $40,813 compared to a budget of $101,078. YTD, the Net Surplus (Loss) is $228,103 under budget by $91,289 due to a lower than budgeted ADC.

B. September 2025 Finance Dashboard

The Finance Dashboard and Cash Flow Statement were reviewed by the Committee.

4. **PUBLIC COMMENT**

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

5. **ADJOURNMENT**

There being no further business, the Committee was adjourned at 5:05 pm.

Respectfully submitted,

Sandra DiLaura
Controller

Resolution No. 2025-06

RESOLUTION OF THE BOARD OF DIRECTORS OF THE SAN BENITO HEALTH CARE DISTRICT MODIFYING THE NATIONAL UNION OF HEALTHCARE WORKERS UNIT AT SAN BENITO HEALTH CARE DISTRICT

WHEREAS, the San Benito Health Care District, a California Local Health Care District ("District"), is governed by the Health Care District Law (Health & Safety Code sections 32000 et seq.);

WHEREAS, the District Board of Directors ("Board") approved Ordinance 2004-06 Regarding Employee Election of Labor Organizations ("Ordinance 2004-06") in accordance with Government Code section 3507(a);

WHEREAS, the Ordinance 2004-06 authorizes the Board to assess the appropriateness of a bargaining unit requested by an employee organization and to determine the appropriate unit based on specified criteria;

WHEREAS, on August 8, 2025, the National Union of Healthcare Workers ("NUHW") submitted a written request to modify the existing bargaining unit it represents to include various District departments including the employees in the business office, the emergency technicians in the Emergency Department, and a case management assistant;

WHEREAS, upon receipt of a request to modify an existing and recognized unit of employees, the Board, pursuant to California Government Code Section 3507.1 and Ordinance 2004-06, has the responsibility to determine whether the modification to include a new classification of employees would result in an appropriate unit of employees;

WHEREAS, on October 23, 2025, the Board held a public hearing to review the proposed modification to NUHW, and consider the relevant criteria set forth in Section 2 of Ordinance 2004-06;

WHEREAS, the Board determined the proposed classifications meet the criteria set forth in Section 2 of Ordinance 2004-06;

WHEREAS, pursuant to Government Code 3507.1(c), NUHW has requested recognition to represent employees in certain specified classifications pending the results of a secret ballot election;

WHEREAS, the District, pursuant to Government Code 3507.1(c) and Ordinance 2004-06, has agreed to recognize NUHW representing certain recognition to represent employees in certain specified classifications pending the results of a secret ballot election, which will be overseen by State Mediation-Conciliation Service; and

WHEREAS, this Resolution is exempt from review under the California Environmental Quality Act (Public Resources Code section 21000 *et seq.)* ("CEQA") pursuant to 14 Cal. Code of Regulations, section 15061(b)(3), because it can be seen with certainty that there is no possibility that modifying a bargaining unit may have a significant effect on the environment.

NOW, THEREFORE, BE IT RESOLVED AND ORDERED by the San Benito Health Care District Board of Directors as follows:

SECTION 1. The District Board of Directors hereby finds and determines that the foregoing recitals are true and correct.

SECTION 2. The Board, based upon the request filed by NUHW, finds and determines that NUHW is the appropriate bargaining unit for the following classifications provided NUHW establishes a showing of interest in the form of authorization cards by 30% of the employees in the desired units who are eligible to vote:

	Position Title
Business Office	Senior Patient Account Rep
	Senior Insurance Biller SNF
	Business Analyst
	Business Office Floater
	Commercial Correspondence F/U
	Biller
	Senior Insurance Biller I
	Senior Insurance Biller II
	Insurance Biller I
Emergency Department	Emergency Technician
Case Management	Case Management Assistant

SECTION 3. Pursuant to the District's Ordinance 2004-06 Regarding Employee Election of Labor Organizations, the State Mediation and Conciliation Service will determine whether NUHW has obtained a showing of interest in the form of authorization cards signed by 30% of the desired units who are eligible to vote.

SECTION 4. Should NUHW have shown the requisite showing of interest and pursuant to Government Code section 3507.1, the State Mediation and Conciliation Service will carry out the secret ballot election and certify the results of the election and notify NUHW, District Administration and the Board of Directors.

SECTION 5. The Board directs District Administration to take any and all actions, including executing relevant documents, to carry out the intent of this Resolution in accordance with Ordinance 2004-06.

PASSED AND ADOPTED this 23rd day of October, 2025 by the following vote:

AYES:

NOES:

ABSTENTIONS:

ABSENT:

_____

William Johnson, President

Attested: _____

Nick Gabriel, Secretary

SUBJECT: Board Member Code of Conduct

PURPOSE:

The purpose of this policy is to ensure that the San Benito health Care District (SBHCD) Board of Directors upholds the highest standards of ethical and professional conduct. Board members are entrusted with governing in a manner that reflects integrity, transparency, collaboration, and accountability to the community, while complying with state and federal laws, including the Ralph M. Brown Act and AB 1234.

POLICY:

~~The following Code of Conduct was adopted by the San Benito Health Care District Board of Directors on July 20, 2022, to describe the expectations of each Board member during and after their service.~~

~~As a member of the San Benito Health Care District Board of Directors I will:~~ In order to assist with the behavior between and among members of the District Board of Directors and District Staff, the following shall be observed:

General Conduct

- Represent the best interests of the ~~San Benito Health Care~~ District and its constituents' ~~members and the association; Be a positive example to others at San Benito Health Care District in both my attitude and actions,~~ acting ~~at all times~~ with honesty, integrity, diligence, competence, and good faith.
- Become and ~~stay~~ remain knowledgeable about the Board's bylaws, policies, and applicable laws. ~~and procedures;~~
- Become well-informed about ~~each matter~~ matters coming before the Board and participate actively in Board and committee discussions. ~~for decision;~~
- ~~Bring matters to the Board's attention that I believe may have a significant effect on the well-being of San Benito Health Care District members' or the association;~~
- ~~Participate actively in Board and committee discussions;~~
- ~~Listen carefully to other members and consider their opinions respectfully, particularly if they differ from mine;~~ Respect and consider differing viewpoints while listening attentively and engaging constructively.
- ~~Respect and~~ sSupport ~~majority~~ decisions of the majority once made even if personally dissenting, and refrain from undermining Board actions. ~~, even if I disagree with the result;~~
- ~~Acknowledge conflicts that arise between my personal interests and the Board's activities, identifying them early and withdrawing from related discussions and votes;~~
- ~~Maintain, in accordance with the law, the confidentiality of information provided to me in my role as a Board member;~~
- ~~Refer member complaints promptly and directly to the Board Chair and appropriate Association staff.~~
- ~~Surrender all information related to San Benito Health Care District matters to my successor, but continue to maintain related duties of confidentiality;~~
- ~~Comply with all San Benito Health Care District policies and procedures to support a work environment that discourages any form of inappropriate conduct, harassment, discrimination, or retaliation;~~

- Recognize and respect the ~~differentiation~~ distinction between governance (Board role) and operations (staff role). ~~responsibilities~~.

Conflicts of Interest & Confidentiality

- Board members must promptly disclose potential conflicts of interest, recuse themselves form related deliberations, and comply with applicable law.
- Confidential information obtained through closed sessions are exempt from disclosure under the Public Records Act must not be shared with unauthorized individuals.
- Board members shall surrender all records and information to their successors upon leaving office, while continuing to honor confidentiality obligations.

Communication & Community Relations

- Member complaints should be referred to the Board Chair and/or Chief Executive Officer for appropriate handling.
- Board members shall be courteous and respectful in all communications with constituents, staff and fellow Directors.
- No Director may speak publicly on behalf of the Board unless they are willing to discuss at the Board meetings.

Professional Standards

- Board members will support a work environment free of harassment, discrimination, or retaliation.
- Safety concerns shall be promptly reported to the Chief Executive Officer or designated staff. Emergencies require immediate action by conducting appropriate authorities.
- Directors shall work collaboratively, treating colleagues with dignity and focusing on issues rather than personalities.

Meeting Conduct

- Board members shall comply with the Ralph M. Brown Act and follow Rosenberg's Rules of Order.
- Directors shall seek clarification on agenda items through the Chief Executive Officer prior to meetings to ensure informed decision-making.
- Differing perspectives are welcome, but discussions must remain respectful and professional.

Discipline for Violations

Violations of the Code of Conduct may result in progressive discipline, considering the severity of the conduct:

- Advisory Letter – Notice of conduct inconsistent with the Code.
- Admonition Letter – With or without corrective action such as training.
- Public Censure – Formal statement of disapproval, potentially with corrective measures.
- Referral – In cases of willful misconduct or unlawful disclosure, matters may be referred to legal authorities or the grand jury as permitted by law.

Acknowledgement

Each Board Member shall sign an acknowledgement of this Code of Conduct, affirming their commitment to abide by its principles during and after their service.

~~I will not:~~

- ~~Share opinions elsewhere that I am unwilling to discuss before the Board or its committees;~~

- ~~Decide how to vote before hearing discussion and becoming fully informed;~~
- ~~Interfere with duties and activities of other Board members;~~
- ~~Speak publicly on behalf of the Board unless specifically authorized to do so.~~

Signature Date