

REGULAR MEETING OF THE BOARD OF DIRECTORS SAN BENITO HEALTH CARE DISTRICT 911 SUNSET DRIVE, HOLLISTER, CALIFORNIA THURSDAY, JULY 24, 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 LOCATION1:

Director Gabriel 1000 Greenley Road Sonora, CA 95370

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 (Pack)

2. Board Announcements (Pack)

3. Public Comment (Pack)

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.

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.

(Pack)

4. Consent Agenda – General Business

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.

- A. Consider and Approve Minutes of the Special and Regular Meeting of the Board of Directors June 26, 2025.
- B. Receive Officer/Director Written Reports
 - Physician Services & Clinic Operations
 - Skilled Nursing Facilities (Mabie Southside/Northside)
 - Laboratory and Radiology
 - Foundation
 - Marketing (No report)
 - PMO Project Summary
- C. Consider and Approve Policies:
 - Clinical Evaluation and Management of a Transfusion Reaction (Revised)
 - Infection Control Authority (New)
 - Infection Prevention & Control Program (Revised)
 - Influenza and Pneumococcal Vaccine Program (Revised)
 - Transmission-Based Precautions (Revised)
- D. Consider and Approve Family Medicine Privileges.

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

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

5. Receive Informational Reports

A. Chief Executive Officer (Verbal Report)

(Casillas)

- One Big Beautiful Bill Act (OBBBA)
- Transaction Update

(Miller)

• Independence Biker Rally Update

(Casillas)

- Public Comment
- B. Chief Nursing Officer

(Descent)

- Dashboard June 2025
- ▶ Public Comment
- C. Chief Financial Officer

(Robinson)

- Facilities Update
- Financial Statements June 2025
- Finance Dashboard June 2025
- Supplemental Payments June 2025
- ▶ Public Comment

6. Action Items

A. Consider and Approve Response Letter to the 2024-2025 Grand Jury Report and Authorize Transmittal. (Counsel)

Recommended Action: Approve the Response Letter to the 2024-2025 Grand Jury Report and Authorize Transmittal.

- Report
- Board Questions
- ▶ Public Comment
- ▶ Motion/Second
- Action/Board Vote-Roll Call
- B. Consider and Approve Resolution No. 2025-04, Resolution of the Board of Directors of the San Benito Health Care District Regarding the Administration of the Oaths of Office. (Pack)

Recommended Action: Approve Resolution No. 2025-04, Resolution of the Board of Directors of the San Benito Health Care District Regarding the Administration of the Oaths of Office.

- Report
- ▶ Board Questions
- ▶ Public Comment
- ▶ Motion/Second
- ► Action/Board Vote-Roll Call
- C. Consider the Development of Board Policy Regarding Remote Attendance and Provide Direction to Staff. (Pack)

Recommended Action: Approve the Development of Board Policy Regarding Remote Attendance.

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

7. Public Comment (Pack)

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

8. Closed Session (Pack)

See the Attached Closed Session Sheet Information.

9. <u>Closed Session Report</u> (Counsel)

10. Adjournment (Pack)

The next Regular Meeting of the Board of Directors is scheduled for Thursday, August 28, 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 July 24, 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 case: Case name unspecified:
×	CONFERENCE WITH LEGAL COUNSEL-ANTICIPATED LITIGATION (Government Code §54956.9)
	Significant exposure to litigation pursuant to § $54956.9(d)(2)$, (e)(3): Lidia Fernandez Claim received June 6, 2025.
	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: Employee organization: Unrepresented employee:
	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 medica executive committee, or report of quality assurance committee):
	1. Report – Quality of Care/Peer Review/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



SPECIAL AND 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, JUNE 26, 2025 5:00 P.M. MINUTES

Directors Present

Bill Johnson, Board Member
Devon Pack, Board Member
Victoria Angelo, Board Member (arrived at 5:10 pm)
Nick Gabriel, Board Member - (Teleconference)
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, and Sanchez were present. Director Gabriel was present via teleconference.

2. Board Announcements

No board announcements.

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 (written comments also submitted) and Ms. Zanger.

4. Consent Agenda - General Business

A. Consider and Approve Minutes of the Special Meeting of the Board of Directors – June 4, 2025.

- 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
 - PMO Project Summary Report
- C. Consider and Approve Policies:
 - Manufacturer, Distributor, and FDA Recall Policy (New)
 - Dress Code Policy (Revised)
 - Vancomycin Dosing and Monitoring (New)
 - MRI Response to Low Oxygen Monitoring (Revised)
 - Extended-Infusion Piperacillin/Tazobactam (Zosyn) Protocol: Medication Administration IV Infusion Guidelines (New)
 - Surgical Antimicrobial Prophylaxis (New)
 - Fixed-dose Kcentra for Reversal of Oral Anticoagulants (New)
 - Guideline for the Administration of Crotalidae Polyvalent Immune Fab (CroFab) (New)
 - IVPB to IV Push Conversion (New)
 - Medication Reconciliation Policy (New)
- D. Consider and Approve Resolution No. 2025-03 Adopting Amended and Restated District Bylaws.
- E. Receive Minutes: Special Meeting of San Benito Health Care District Ad Hoc Committee Bylaws, Policies and Procedures.
- F. Consider and Approve Delineation of Privileges:
 - Core-Breast Surgical Oncology Privileges.

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

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

Moved/Seconded/ Carried. Ayes: Directors Johnson, Pack, Sanchez, and Gabriel. Approved 4-0 by roll call.

Director Angelo arrived at the meeting at 5:10 pm.

5. Receive Informational Reports

- A. Chief Executive Officer (Verbal Report)
 - Transaction Update
 - Ad-Hoc Committee Update
 - Helipad Update

Ms. Casillas updated the Board on the helipad. Robert Miller, of Hooper, Lundy Bookman, provided an Ad Hoc Committee Update, along with Committee Members, Directors Pack and Gabriel. Materials for the CEO report are included in the packet.

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

B. Chief Nursing Officer

Dashboard – June 2025

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

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

C. Finance Committee – June 23, 2025

- Financial Statements May 2025
- Finance Dashboard May 2025
- Supplemental Payments May 2025

Mr. Robinson reviewed the financial statements, dashboard, and supplemental payments. These reports are included in the Board packet.

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

6. Action Items

A. Consider and Approve a Professional Services Agreement for John Wiemann, IV, M.D., for a three-year term with an estimated amount of \$795,000 annually.

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

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

MOTION: By Director Gabriel to not approve the Professional Services Agreement for John Wiemann, IV, M.D., for a three-year term with an estimated amount of \$795,000 annually; Seconded by Director Pack.

Moved/Seconded/ Carried: Ayes: Directors Gabriel, Pack. Noes: Johnson, Angelo, and Sanchez. Motion failed 2-3 by roll call.

Director Johnson requested a second motion:

MOTION: By Director Johnson to Approve a Professional Services Agreement for John Wiemann, IV, M.D., for a three-year term with an estimated amount of \$795,000 annually; Seconded by Director Sanchez.

Moved/Seconded/ Carried: Ayes: Johnson, Angelo, and Sanchez. Noes: Pack, Gabriel. Motion carried and approved 3-2 by roll call.

B. Consider and Approve Amendment 1 of the Professional Services Agreement with Bay Area Gynecology Oncology, Inc.

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

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

MOTION: By Director Angelo to approve Amendment 1 of the Professional Services Agreement with Bay Area Gynecology Oncology, Inc.; Seconded by Director Sanchez.

Moved/Seconded/ Carried: Ayes: Directors Johnson, Pack, Angelo, Sanchez, and Gabriel. Approved 5-0 by roll call.

C. Consider and Approve FYE 06/30/26 Operational and Capital Budgets.

Mr. Robinson reviewed the FYE 06/30/26 Operational and Capital Budgets; materials are included in the packet.

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

MOTION: By Director Angelo to approve FYE 06/30/26 Operational and Capital Budgets; Seconded by Director Pack.

Moved/Seconded/ Carried: Ayes: Directors Johnson, Pack, Angelo, Sanchez, and Gabriel. Approved 5-0 by roll call.

D. <u>Consider Residency Qualifications for District Zone 5</u>, and Provide Direction to Staff, Including <u>Authorization to Investigate</u>.

Director Gabriel recused himself from participating in the agenda item.

Ms. Casillas provided a verbal report.

An opportunity for public comment was provided; public comment was received from Ms. Gallagher.

MOTION: By Director Pack to authorize administration to retain a mutual third-party investigator to look into the residency of the Director for District Zone 5, unless Dr. Gabriel or his attorney can present sufficient evidence to establish residency by close of business tomorrow, Friday, June 27, 2025, or administration is able to confirm residency through the registrar of voters' office. Additionally, the Board grants administration the discretion to determine whether any documentation provided by Dr. Gabriel or his attorney would be sufficient to establish his residency; Seconded by Director Sanchez.

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

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) Hearing/Reports, 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 7:31 pm.

9. Reconvene Open Session/Closed Session Report

The Board of Directors reconvened to open session at 7:46 p.m. Counsel stated that one (1) item was discussed: a) Hearing/Reports.

Under item a.) Hearings/Reports, the Credentials report was received and approved by the Board, on motion of Director Johnson, Seconded by Director Angelo, by a vote of 5-0 by roll call.

10. Adjournment:

There being no further regular business or actions, the meeting was adjourned at 7:47 p.m. The next Regular Meeting of the Board of Directors is scheduled for Thursday, July 24, 2025, at 5:00 p.m.



To:

San Benito Health Care District Board of Directors

From:

Amy Breen-Lema, Vice President, Clinic, Ambulatory & Physician Services

Date:

July 11, 2025

Re:

All Clinics – June 2025

Rural Health and Specialty Clinics' visit volumes

Clinic Location	Total visits current month	Total visits prior month (June 2025)
Orthopedic Specialty	442	437
Multi-Specialty	674	721
Sunset	574	655
Surgery & Primary Care	253	321
San Juan Bautista	168	218
1st Street	685	722
4th Street	1,001	1,071
Barragan	521	589
Total	4,318	4,734

Patient visits declined slightly this past month primarily due to some providers taking time off.

Provider recruitment activities with anticipated start dates by specialty:

- Gastroenterology: Sarathy Mandayam, M.D. July 2025.
- Psychiatry: Lourdes Greyson, M.D. August 2025.
- Breast Surgeon: Elaine Lee, M.D August 2025.
- <u>Family Practice</u>: Loc Do, P.A. September 2025.

We are delighted to welcome Dr. Hiral Tank, a locum tenens general surgeon, to our surgery clinic team. She has been well-received by both patients and staff, who appreciate her collaborative approach and the quality of care she provides.



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

To: San Benito Health Care District Board of Directors

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

1. Census Statistics: June 2025

Southside	2025	Northside	2025
Total Number of Admissions	12	Total Number of Admissions	6
Number of Transfers from HHH	11	Number of Transfers from HHH	5
Number of Transfers to HHH	8	Number of Transfers to HHH	2
Number of Deaths	1	Number of Deaths	2
Number of Discharges	15	Number of Discharges	5
Total Discharges	1351	Total Discharges	5
Total Census Days	1360	Total Census Days	1420

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: June 2025

Southside	From	Payor	Northside	From	Payor
8	ннмн	Medicare	1	L.O.A	CCA
1	Natividad	Medicare	1	ннн	CCA
1	HHH Re-Admit	Medicare	4	ннн	MA
2	HHH Obs.	Medicare			

Total: 12 Total:

3. Total Discharges by Payor: June 2025

Southside	2025	Northside	2025
Medicare	13	Medicare	3
Medicare MC	0	Medicare MC	0
CCA	1	CCA	0
Medical	1	Medical	0
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	0	Hospice	2
Private (self-pay)	1	Private (self ay)	0
Insurance	0	Insurance	0
Total:	16	Total:	5

4. Total Patient Days by Payor: June 2025

Southside	2025	Northside	2025
Medicare	477	Medicare	77
Medicare MC	0	Medicare MC	0
CCA	723	CCA	1151
Medical	60	Medical	90
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	60	Hospice	96
Private (self-pay)	31	Private (self-pay)	0
Insurance	0	Insurance	0
Bed Hold / LOA	9	Bed Hold / LOA	6
Total:	1360	Total:	1420
Average Daily Census	45.33	Average Daily Census	47.33



To:

San Benito Health Care District Board of Directors

From:

Bernadette Enderez, Director of Diagnostic Services

Date:

July 2025

Re:

Laboratory and Diagnostic Imaging

Updates:

Laboratory

- 1. Quality Assurance/Performance Improvement Activities
 - Update on chemistry analyzer project → 75% assay validation completed. Interface validation on going.

- Phase 2A construction update → Construction contract completed. Construction to begin by 08/2025.

2. Laboratory Statistics

	June 2025	2025 YTD
Total Outpatient Volume	4066	25508
Main Laboratory	1237	7552
Mc Cray Lab	936	5519
Sunnyslope Lab	402	2466
SJB and 4th Street	55	475
ER and ASC	1436	9496
Total Inpatient Volume	139	1017

Diagnostic Imaging

- 1. Quality Assurance/Performance Improvement Activities
 - Preparation for multi-modality trailer pad proposal
 - Preparation for onsite CDPH inspection for main hospital
 - Preparation for onsite MQSA inspection for Mammography



2. Diagnostic Imaging Statistics

	June 2025	2025 YTD
Radiology	1679	10994
Mammography	666	4103
СТ	991	5832
MRI	186	1147
Echocardiography	105	665
Ultrasound	709	4515



TO: San Benito Health Care District Board of Directors

FROM: Liz Sparling, Foundation Director

DATE: July 2025

RE: Foundation Report

The Foundation does not meet in July and will resume monthly meetings in August.

Financial Re	eport	June
1.	Income	\$ 15,208.09
2.	Expenses	\$ 4,400.00
3.	New Donors	9
4.	Total Donations	162

Allocations:

No Allocations

Directors Report:

- Irene Davis, Foundation Board President, and I met and presented the Tranquility Room proposal to Kathy Johnson and Tracy Taggart at the Community Foundation. The proposal consists of two rooms, one at each Skilled Nursing Facility to be a dedicated space for residents with Alzheimer's and/or Dementia and their families. JayLee Davison, the Interim Director of the Skilled Nursing Facilities was an integral part of the idea and presentation. The presentation was very well received by the Community Foundation and they have approved a grant for \$100,000. We have started meeting with all the parties involved and the project is underway!
- With the end of the fiscal year, we have started working on our Foundation Audit.

Fundraising Committee:

 As of June 30, there have been 1958 total donations to our current campaign, "Invest in the Future of San Benito County Healthcare, We Deserve It" raising \$1,162,007.17.

Dinner Dance Committee

Our Dinner Dance event this year will be at Leal Vineyards on November 8, 2025. Save the Date! We already have live auction items including an allinclusive trip to Moon Palace Sunrise in Cancun, Mexico! Sponsorship letters have been mailed to past attendees and the "Save the Date" has been posted on social media. We are looking forward to a wonderful event for the Hospital.



	Purpose	Start Date	Go Live	Duration Status	Status	Priority	HCAI IN	HCAI Key Stakeholder	Role	Update
	Nurse Scheduling Software	12/6/2024	8/1/2025	238	in Progress	Low		Jac Fernandez	Senior Director of Acute Care Services	Pending HR credential manager access and training of staff planned for July.
HUGS/Securitas	Infant Security	4/12/2024	11/1/2025	999	In Progress	High		Jac Fernandez	Senior Director of Acute Care Services	Construction scheduled to begin week of 7/14. (cabling vendors prepping for location optimization)
BD Installation	New Pyxis Machines	12/4/2024	9/19/2025	289	In Progress	Medium		Naveen Ravela	Pharmacy Director	Pending HCAI and city of Hollister approval, once finalized will perform remaining electrical work, floor scan and installation.
BD Pharmacy Keeper	IV Compounding Verification 11/14/2024	11/14/2024	TBD		In Progress	High		Naveen Ravela	Pharmacy Director	Technical configuration of RPM server and VPN tunnel
ABBOTT Lab Rebuild	Lab Phase 1: Alinity Analyzers		2/1/2026		In Progress	High	8 11	Bernadette Enderez	Lab/Radiology Director	the validation b0-70% of the validation process. (project will not officially close out until Lab Phase 2 is completed and ready analyzers to move to permanent location)
Bepoz	Café POS / Swipe to Pay for Meals	9/3/2024	11/2026	301		Medium	Ť	Jessica Kopeczy	Certified Dietary Manager	Transactions are successfully processing and synching to payroll. Planning volunteer and doctor tracking in the system.
u Stryker OR Rebuild R	Updating OR per OSHPD Requirements	11/20/2024	12/31/2025	406	In Progress	High	2>	Mendi Suber- Ventura	Director of Surgical Services	Treanor on site 7/9 to walk through and survey site to continue planning
Wi-Fi-Upgrade	Wireless Infrastructure Upgrade	9/16/2024	8/1/2025	319	In Progress	High	- ∞ ≥	Salomon Mercado	Director of Inf Tech	Med surg only location left, pending construction progress for HUGS project

Boiler Replacement	Replace Existing Boiler to Enhance Efficiency & Reliability	1/10/2024	7/1/2025	538	In Progress	High	Doug Mays	Senior Director Support Services	Pending official closeout from HCAI compliance officer. Project construction is completed.
Lab Remodei	Remodel of LAB: Phase 2	6/3/2024	2/1/2026	809	Ongena	High	Bernadette Enderez	Lab/Radiology Direc†or	Contract has been finalized - planning preconstruction walkthroughs and contractor has sub contractors allocating and preparing resources
2nd Floor SSB Doors Installation	Engineering to complete permit process & installation	12/23/2024	TBD		in Progress	Medium	Doug Mays	Senior Director Support Services	City of Hollister has accepted the plans and issues the permit to begin construction
Women's Center Horizon Room Accordion Doors	Use the accordion doors to split the room and allow for dual use.	3/10/2025	8/1/2025		In Progress	Low	Karen Descent	Chief Nursing Officer	Construction is planned to start week of 7/21
Seismic	Upgrade to Meet HCAI Seismic Compliance & Safety Standards	180	TBD		Ongoing	High	Doug Mays	Senior Director Support Services	Pending final review of MICAP and ROM submitted
MRI Upgrade	Proposal submitted	780	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	180	TBD		On Hold	Medium	Bernadette Enderez	Lab/Radiology Director	Proposal Submitted, Treanor to provide recommendation.
•Verkada	Security / SSO + Door Access	3/11/2025	7BO		In Progress	High	Jorge Ramirez	Director of Emerg Mgmt & Security	HCAI has approved the project, pending contractor being assigned to issue building permit. Coordinating with vendor for onsite visit to get sample door/controller started to build the database
Soleran	Replace current engineering ticketing system	1/1/2025	7/1/2025		In Progress	Medium	Doug Mays	Senior Director Support Services	Software configuration in progress.

Med Surg Double Doors	Replace an existing fire rated control forms control control forms control forms control forms for the main hospital cafeteria in the main hospital	1/29/2025	TBD		On Hold	Medium	٥	Doug Mays	Senior Director Support Services	Treanor proposal received, GC needs to be confirmed
ED Helipad	System is an AFF 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	Δ	Doug Mays	Senior Director Support Services	HCAI emergency authorization has been granted. Site walk with all vendors and IOR on 7/9. Pending contract signed before demolition/removal of old system can begin.
Nurse Call System	Replace	9/10/2024	7BD		In Progress	High	or	Jac Fernandez	Senior Director of Acute Care Services	Pricing details collected and presented for review; next step is to schedule a demo.
The Harlford Leave Management System	Automate & centralize administration of leave of absences, ensure regulatory compliance & support to employees.	4/10/2025	7/2/2025	83	0	Medium	Δ	Drew Tarlala	Director of Human Implementation Resources	Implementation complefed.
Physical Therapy Clinic Remodel	Expanding current location to help with ongoing demand	6/1/2025	TBD		in Progress	High	3	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.
Imprivata Forward Advantage Single Sign- On	Enable fast, secure access to clinical systems, improving workflow efficiency and supporting HIPAA compliance.	6/16/2025	7BO		In Progress	High	Š Š	Salomon Mercado	Director of IT	Completed initial setup and testing on test workstation. Successfully tested with Okta and requested inclusion in standard workstation image in preparation for wider rollout.

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Immuware Employee Health Software	Streamline employee health tracking, automate compliance reporting & improve visibility of immunizations, exposures, & health screenings.	6/27/2025	180	In Progress	High	Elizabeth Von Urff	Director, Employee Health/WC	Site build in progress.	
Palliative Care Room	Med/Surg room to be converted as a private space 7/15/2025 for family and loved ones.	7/15/2025	TBD	In Progress	High	Karen Descent	Chief Nursing Officer	Room assessed and required tasks identified.	
Intranet	Intranet redesign and update.	6/27/2026	8/1/2025	In Progress	High	Frankie Gallagher	Director Marketing and Public Relations	Redesigned intranet site in place; content transfer from old site in progress.	
CT Scanner	Replace			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	k				estimated go-live			
Not Started	0	%0				plannea go live			
In Progress	20	71%				started			
Overdue	0	%0							
On Hold	4 7 0	7%							
TOTAL	28	100%							
PROJECT PRIORITY %			PENDING ITEMS	TEMS					
PRIORITY	COUNT	К	Decelons						
High	18	64%	(SANDICK)						
Medium	7	25%	Change						
Low	8	11%							
TOTAL	28	100%							



MEMORANDUM

To:

Board of Directors

From:

Suzie Mays

Vice President, Information & Strategic Services

Date:

July 15, 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
10483 Clinical Evaluation and Management of a Transfusion Reaction	Revised based on AABB Technical Manual 21st Edition.
12383 Infection Control Authority	Newly created to meet CMS requirement for governing board to designate authority for Infection Control Program.
11999 Infection Prevention & Control Program	Updated to align plan with Joint Commission, Title 22, and CMS requirements.
10829 Influenza and Pneumococcal Vaccine Program	Revised to remove requirements for hospitals to offer influenza and pneumococcal vaccinations.
10806 Transmission-Based Precautions	Revised to update standard precautions with current Centers for Disease Control guidelines.



DocID: Revision: Status:

12383 0

Pending Committee Approval

Department: Infection Control

Manual(s):

Policy: Infection Control Authority Designation

1. PURPOSE

a. To ensure compliance with the Centers for Medicare & Medicaid Services (CMS) Conditions of Participation for Hospitals (42 CFR §482.42), this policy establishes the requirement to designate, in writing, a qualified individual or group of individuals responsible for the hospital's infection prevention and control program.

2. POLICY

a. San Benito Health Care District shall designate in writing an individual or group of individuals as the Infection Control Officer(s) responsible for the development, implementation, and oversight of San Benito Health Care District's infection prevention and control program.

3. PROCEDURE

Designation 4.

- The Governing Body shall appoint, in writing, a qualified Infection Control Officer a. (ICO) or team.
 - i. Name(s) of the designated individual(s): Shonna Avant, RN, BSPH, CIC, CPHQ, CPPS
 - ii. Title and department: Director of Quality, Safety, and Infection Prevention

5. Qualifications

- a. The designated ICO(s) is qualified through education, training, experience, or certification in infection prevention and control.
- Acceptable qualifications include: b.
 - i. Certification in Infection Control (CIC)
 - ii. Experience in epidemiology or hospital infection control
 - Advanced training in public health or nursing with infection prevention focus iii.

Responsibilities 6.

- a. Develop and implement hospital-wide infection prevention and control policies and procedures that adhere to nationally recognized guidelines.
- b. Establish and maintain a surveillance system for detecting, investigating, and controlling healthcare-associated infections (HAIs), including auditing of adherence to infection prevention and control policies and procedures by hospital personnel.
- c. Collaborate with all departments and report infection control data and infection prevention and control issues to the governing body, medical staff, and quality committees.
- d. Communicate and collaborate with the individuals participating in the antibiotic stewardship program.
- e. Training and education of hospital personnel and staff, including medical staff, and, as applicable, personnel providing contracted services in the hospital, on the practical applications of infection prevention and control guidelines, policies, and procedures.
- f. Maintain documentation of the infection prevention and control program and its surveillance, prevention, and control activities

7. Documentation and Review

- a. Written designation and job description of the ICO shall be maintained in the designated individual's personnel records.
- b. This policy shall be reviewed annually or as regulatory requirements change.

REFERENCES

- 42 CFR §482.42 Condition of Participation: Infection Prevention and Control Program accessed on May 18, 2025.
- CMS State Operations Manual, Appendix A Survey Protocol, Regulations and Interpretive Guidelines for Hospitals accessed on May 18, 2025.

AFFECTED DEPARTMENTS

All departments and locations within San Benito Health Care District

Document Owner:

Avant, Shonna

Collaborators:

Greenlee, Arielle Descent, Karen

Silva, Victoria

Approvals

- Committees:

(05/29/2025) Infection Control, (07/08/2025) Chief Nursing Officer, (7/17/2025) Medical Executive Committee, (7/03/2025) Policy Committee,

(Not yet approved) Board of Directors,

- Signers:

Original Effective Date:

Revision Date:

Review Date:

Attachments:

(REFERENCED BY THIS DOCUMENT)

Other Documents:

(WHICH REFERENCE THIS DOCUMENT)

Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in Lucidoc at

http://hzh-iis.hazelhawkins.com/?returnto=%2Fcgi%2Fdoc-gw.pl%3Fref%3Dhhmh%3A12383%240.

about:blank



HAZEL HAWKINS MEMORIAL HOSPITAL APPLICATION FOR CLINICAL PRIVILEGES

FAMILY MEDICINE

Name of Applicant:	
In order to be eligible to request clinic	cal privileges for both initial appointment and recognitional

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 Family Medicine.

Certification: Current Board Certification in Family Medicine by the American Board of Family Medicine, or current, active participation in the process leading to certification.

For Obstetric Privileges - Current Family Medicine Core privileges and successful completion of an ACGME or AOA approved post-graduate residency program in Family Medicine. If requesting C-Section privileges, an Obstetrics Fellowship must be completed.

For Family Medicine Outpatient privileges- In addition to the above, a minimum of a Basic Life Support (BLS) 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:
 - 1. 30 adult inpatients for the Family Medicine-Inpatient Hospitalist Core
 - 2. 24 vaginal deliveries for the Obstetric Core
 - 3. 200 patient encounters for Outpatient Clinic

If the applicant meets the above criteria, he/she may request privileges as specified below.

I hereby request privileges as follows:

Family Medicine- Inpatient Hospitalist Core Privileges
General Medicine Core:
Diagnose, treat, and manage acute and chronic medical conditions requiring inpatient care (this may include patients in the intensive care unit) Core procedures include thoracentesis, paracentesis, joint aspiration, arterial puncture, gastric lavage, incision & drainage of simple abscess, venous cutdown, proctoscopy, lumbar puncture, central venous line placement. Manage preoperative and postoperative medical care in collaboration with surgical teams. Provide discharge planning and coordination, including medication reconciliation and follow-up arrangements. Provide end-of-life care and palliative management as appropriate.
RequestedApproved
Privileges include admission, workup, diagnosis, and provision of treatment to perinatal patients (including dietcontrolled diabetics) and perform normal spontaneous vaginal delivery, and uncomplicated postpartum care. Mandatory OBG consults are required for pre-term labor < 35 weeks, diabetes in pregnancy not controlled by diet, eclampsia, pre-eclampsia, pre-term induction, breech delivery, multiple gestations or other malpresentations, possible placenta previa or abruption placenta, prolonged active phase of labor, prolapse of cord, intra-partum or pre-partum obstetric sepsis, suspected fetal distress, or pregnancy beyond 41 weeks gestation OR, OTHER COMPLICATED OBSTETRICAL CONDITIONS RequestedApproved
Surgical Assist Privileges
Privileges include assist in surgery under the direct supervision of the surgeon, including (but not limited to) suture uncomplicated lacerations, incise and drain abscesses, simple skin biopsy or excision, remove non-penetrating corneal foreign body, preoperative care of surgical patients, and postoperative medical care of surgical patients with the approval of the attending physician or surgeon. Cannot act as the attending surgeon.
RequestedApproved

Family Medicine- Or	rtpatient Clinic						
an outpatient setting in need of care to treat general medical p laboratory work, radiology, EKGs, and other imaging studies. I cancer screenings, and wellness exams. Pre- and post-operal including well-child visits, developmental screenings, and acut limited to, joint, tendon and bursa aspiration or injection, stero	Privileges include evaluation, diagnosis, and provision of non-surgical treatment, including consultation for patients in an outpatient setting in need of care to treat general medical problems. Order and interpret diagnostic tests, including laboratory work, radiology, EKGs, and other imaging studies. Provide preventive care, including immunizations, cancer screenings, and wellness exams. Pre- and post-operative follow-up care, pediatric and well-baby care including well-child visits, developmental screenings, and acute care management. Procedures include, but are not limited to, joint, tendon and bursa aspiration or injection, steroid injection, incision & drainage of simple abscess, wound care, including suturing & minor debridement, splinting/casting, skin biopsy, and foot care.						
Requested	Approved						
ADDITIONAL AND SPECIFIC	PRIVILEGES REQUESTED						
PROCEDURE	REQUESTED APPROVED						

I certify that I have had the requested.	ne necessary trainin	ng and experience to p	erform the procedures I have
Name of Applicant:			Date:
Signature of Applicant:			
APPROVALS: All privileges delineated I upon the physician's spe competence and peer recompetence and peer reco	cialty, licensure, spectory commendations.	ecific training, experie	ve been recommended based nce, health status, current
Exceptions/Limitations:	•		
Medicine Chair			Date
Perinatal Chair			Date

DEPARTMENTAL METRICS	April	May	June	YTD(Jan-June)
# Employees	707	706	710	706
# New Hires	9	3	11	47
# Terminations	7	4	3	37
Overall Turnover	1.0%	0.6%	0.4%	5.24%
Nursing Turnover	1.5%	2.3%	1.5%	10.35%
Terms By Union	April	May	June	YTD(Jan-June)
The California Nurses Association (CNA)		3		
National Union of Healthcare Workers (NUHW)	2		2	14
California License Vocational Nurses (CLVN)	2	1	1	15
Camorna Eccuse vocational Nurses (CLVN)	0	0	0	0
Engineers and Scientists of California (ESC)	0	0	0	
Non-Union				1
	3	0	0	7
Terms By Reason (V=Voluntary & IV= Involuntary)	April	Мау	June	YTD(Jan-June)
Personal (V)	3	2	1	16
lew Opportunity(V)	1	2	0	8
Retirement (V)	0	0	1	3
chedule (V)	1	0	0	1
ob Abandonment (V)	1	0	0	1
lo Reason Given (V)	0	0	0	0
telocating (V)	0	0	1	3
chool (V)	0	0	0	0
No Show (V)	0	0	0	0
RIF(IV)	0	0	0	0

Chief Nursing Officer Report July 2025

- Transition to insulin pens
- We have not identified any hospital acquired CAUTI, CLABSI, or C.Diff infections since the beginning of the year.

CNO Dashboard June 2025							
Description	June 2025 Budget	June 2025 Actual	Budget - Year To Date Total	Actual -YTD Total			
ED Visits	2,149	2,226	26,713	27,954			
ED Admission %	10%>	5.21%	10%>	5.58%			
LWBS %	<2.0%	0.7%	<2.0%	0.8%			
Door to Provider	10 min	6 min	10 min	6.5 min			
MS admissions	105	96	1,266	1302			
ICU admissions	16	33	191	280			
Deliveries	40	31	392	364			
OR Inpatient	39	30	424	467			
ASC/OP Cases	72	72	594	687			
GI	58	83	1093	1014			

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

OR Cases by Service Line						
2025	APR	MAY	JUN			
Surgery Total	105	97	185			
GENERAL SURGERY	29	26	23			
ORTHOPEDIC TOTAL	32	44	39			
UROLOGY	2	2	5			
OB/GYN TOTAL	40	24	25			
C/SECTIONS	13	7	10			
ENT TOTAL	2	1	2			
GI TOTAL	92	60	91			
GI ASC	89	56	83			
GI INO	2	2	2			
GI INPT	1	2	6			

2024	APR	MAY	JUN
Surgery Total	91	100	154
GENERAL SURGERY	48	40	38
ORTHOPEDIC TOTAL	19	29	31
PODIATRY	3	6	1
UROLOGY	D	С	0
OB/GYN TOTAL	24	30	26
C/SECTIONS	7	8	16
ENT TOTAL	D	1	1
GITOTAL	108	115	58



REGULAR MEETING OF THE FACILITIES AND FINANCE COMMITTEE SAN BENITO HEALTH CARE DISTRICT 911 SUNSET DRIVE, HOLLISTER, CALIFORNIA MONDAY, JULY 21, 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. Approve Minutes of the Facilities Committee Meeting of May 15, 2025
 - Motion/Second
 - Action by Committee/Roll Call Vote
- 3. Update on Current Projects
 - HHH Helipad Repair
- 4. Review Financial Updates
 - Financial Statements June 2025
 - Finance Dashboard June 2025
 - Supplemental Payments June 2025
- 5. 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.

6. Adjournment



The next Facilities and Finance Committee meeting is scheduled for Monday, August 25, 2025 at 4:30 p.m.

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

BOARD OF DIRECTORS DISTRICT FACILITIES & SERVICE DEVELOPMENT COMMITTEE

THURSDAY, MAY 15, 2025 4:00 P.M. – GREAT ROOM

MINUTES

I. CALL TO ORDER/ROLL CALL:

Devon Pack called the meeting of the District's Facilities & Service Development Committee to order at 4:03p.m.

COMMITTEE MEMBERS:

Devon Pack, Board Vice President	in Attendance
Nick Gabriel, DO, Board Secretary	
Mary Casillas, VP, Chief Executive Officer	in Attendance
Mark Robinson, VP, Chief Finance Officer	in Attendance
Amy Breen-Lema, VP, Clinics, Ambulatory & Physicians Services	in Attendance
Karen Descent, VP Chief Nursing Officer	in Attendance
Suzie Mays, VP Information & Strategic Services	in Attendance
Doug Mays, Senior Director, Support Services	in Attendance
Tina Pulido, Facilities Administrative Support Supervisor	in Attendance

II. APPROVAL OF MINUTES:

The minutes of the District's Facilities & Service Development Committee of February 20, 2025 were reviewed by the Committee.

III. UPDATE ON PROPOSED PROJECTS:

HHH Radiology Imaging Pad (Doug M.)

Doug M. reported that we are looking for a temporary location for an imaging trailer. After discussions with HCAI, any mobile unit put in any location for more than 30 days must be treated as a permanent structure. Per code it also has to be a minimum of 30 feet from the hospital. We are working with our Architect to come up with final numbers to bring this project to the Administrative Team.

IV. UPDATE ON CURRENT PROJECTS:

• HHH Boiler Replacement (Doug M.)

Doug M. reported that the installation portion of this project has been completed; we are currently waiting on the finalized documents from HCAI.

HHH Lab Analyzer Validation Phase 1 (Doug M.)

Doug M. reported that the validation process is ongoing and estimated to be completed by June.

• HHH Lab Analyzer Replacement Phase 2 (Doug M.)

Doug M. reported that this project has already gone to the Board for approval, The Core Group won bid. We are finalizing the contract with our Attorney and should be starting the project as soon as it's completed. Amy L. will be assisting with Project Management and the Attorney to get the contract completed. Mary C. inquired if we are still in budget and Doug M. stated, yes. Estimated time for the project to start is the end of June.

HHH OR Waiver (Doug M.)

Doug M. reported that due to the current system in the main hospital OR's it is difficult to keep the humidity and temperature in compliance. We received a waiver from CDPH to use the ASC for all inpatient and outpatient surgeries. The waiver expires in January 2026. In order to get an extension on the Flex waiver, we must have an approved project submitted with HCAI before the January 2026 expiration date.

• Hugs Infant Alarm Upgrade (Doug M.)

Doug M. reported that before we can start this project we have to complete the Wifi upgrade that was previously approved by the Board. The Wifi access points have been completed throughout the hospital. The Hugs system documents have been submitted to HCAI to start the project.

V. UPDATE ON PENDING PROJECTS:

• HHH Lab Analyzer Replacement Phase 3 (Doug M.)

Doug M. reported that we are in the planning and design stages with Treanor.

• HHH Lab Analyzer Replacement Phase 4 (Doug M.)

Doug M. reported that we are in the planning and design stages with Treanor.

• HHH CT Scanner Replacement (Doug M.)

Doug M. reported that before we can start planning this project we will have to address the mobile trailer and trailer pad.

VI. UPDATE ON MASTER PLAN:

SPC-4d (Doug M.)

Doug M. reported the following:

1) Small and Rural Hospital Relief Program Application (PIN 71)

Doug M. reported that we received notification on 5/14 from HCAI that we have been awarded a \$185,000 grant for reimbursement for the monies spent so far on design fees. HCAI also said if we obtain cost estimates from contractors, we can initiate another grant application. As part of the Seismic compliance plan we are required to have a water rationing plan in place. We are working on the plan with our Architect.

VII. PUBLIC COMMENT:

There was no public comment.

VIII. OTHER BUSINESS:

There was no other business.

VII. ADJOURNMENT:

There being no further business, the meeting was adjourned at 4:18 PM. The next Facilities Committee meeting is scheduled for June 19, 2025 at 4:00pm.



San Benito Health Care District

A Public Agency

911 Sunset Drive

Hollister, CA 95023-5695

(831) 637-5711

July 21, 2025

Pre-Audit

CFO Financial Summary for the District Board:

For the month ending June 30, 2025, the District's Net Surplus (Loss) is \$881,101 compared to a budgeted Surplus (Loss) of \$742,604. The District exceeded its budget for the month by \$138,497.

YTD as of June 30, 2025, the District's Net Surplus (Loss) is \$31,126,910 compared to a budgeted Surplus (Loss) of \$6,867,582. The District is exceeding its budget YTD by \$24,259,328.

Acute discharges were 161 for the month, exceeding budget by 6 discharges or 4%. The ADC was 15.10 compared to a budget of 14.95. The ALOS was 2.81. The acute I/P gross revenue was slightly less than budgeted by (\$16,437) (0%) while O/P services gross revenue exceeded budget by \$1.69 million or 6% over budget. ER I/P visits were 127 and ER O/P visits were over budget by 64 visits or 3%. The RHCs & Specialty Clinics treated 3,202 (includes 521 visits at the Diabetes Clinic) and 1,116 visits respectively.

Other Operating revenue exceeded budget by \$1.58 million due to:

- 1) \$1,162,892 for CY 2024 IGT and (Direct) HQAF funding.
- 2) \$112,289 for CCAH HQIP and \$112,547 higher Magellan Rx rebate.

Operating Expenses were over budget by \$743,827 due mainly to: Registry of \$306,782 (partially offset by savings in Salary & Wages of \$130,195. Benefits and Supplies were over budget by \$189,923 and \$150,935 respectively due mainly to an increase in Employee Health insurance claims and Orthopedic surgery cases.

Non-operating Revenue exceeded budget by \$122,348 which included donations from the Auxiliary and Foundation of \$45,000 and \$83,000 respectively.

The SNFs ADC was 92.60 for the month. The Net Surplus (Loss) is (\$72,625) compared to a budget of \$127,400. YTD, the Net Surplus (Loss) is \$1,569,427 exceeding its budget by \$384,177.

			HALFE BANKING MEMORIAL BOSPITAL HOLLISTER, CA 95023	DRIAL BOSPITAL	d conditino					
			FOR S	FOR PERIOD 06/30/25						
	ACTUBL. 06/36/25	BUDGET 06/30/25	CURLENT MONTH POS/NEG VARIANCE	PERCENT	PRIOR TR 06/30/24	ACTUAL 06/30/25	BUDGET 06/30/25	PERCH POS/NEG PERCH VARIANCE VARIA	PERCENT	PRIOR YR 06/30/24
GROSS PATIENT REVENUE:					900	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	94	414 854	•	A DAR A ST
ACUTE ROUTINE REVENUE	3,455,298	2,248,015	80,531	. e	1,841,130	24,182,850	23,586,479	594,371		24,707,998
ANCILLARY INPATIENT REVENUE HOSPITALIST\PEDS I\P REVENUE	3,732,260	4,008,406	(276,146)	(4)	5,429,374	50,650,757	48,214,110	2,436,647	sn.	50,172,620 2,051,466
TOTAL GROSS INPATIENT REVENUE	9,456,376	9,263,950	192,426	2	11,579,879	115,578,649	110,952,019	4,626,630	*	117,016,696
ANCILLARY OUTPATIENT REVENUE HOSPITALIST\PEDS O\P REVENUE	29,460,285	27,881,281	1,579,004	\ <u>\</u>	25,757,265	352,343,133	331,428,805	20,914,328		326,949,882
TOTAL GROSS OUTPATIENT REVENUE	29,574,249	27,881,281	1,692,968	9	25,845,155	352,457,097	331,428,805	21,028,292	9	327,812,688
TOTAL GROSS PATIENT REVENUE	39,030,625	37,145,231	1,885,394	in.	37,425,034	468,035,746	442,380,824	25,654,922	9	444,829,384
DEDUCTIONS PROM REVENUE:				;		6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6			•	644
MEDICARE CONTRACTUAL ALLOWANCES	11,867,366	10,078,796	1,788,570	18	9,396,253	118,691,535	118,796,692	(105,157)		117, 269, 480
BAD DEBT EXPENSE	1,043,785	528,187	515,598	60	3,901,954	8,592,215	6, 296, 494	2,295,721	3.7	11,008,966
CHARITY CARB	25,024	39,377	(14,353)	(37)	34,099	417,647	52 021 948	4.175.673	(11)	484,918
OTHER CONTRACTUALS AND ALLOSINGALS HOSPITALIST\PRDS CONTRACTUAL ALLOW	103,901	0	103,901		(80,965)	103,901	0	103,901		(52,298)
TOTAL DEDUCTIONS FROM REVENUE	27,561,249	24,985,283	2,575,966	10	25,499,291	311,453,020	297,731,219	13,721,801	5	298,159,423
NET PATIENT REVENUE	11,469,376	12,159,948	(690,572)	(9)	11,925,743	156,582,727	144,649,605	11,933,122	100	146,669,962
OTHER OPERATING REVENUE	2,134,125	547,881	1,586,244	290	604,653	25,602,424	6,581,572	19,020,852	289	7,086,392
WET OPERATING REVENUE	13,603,503	12,707,829	895,672		12,530,396	182,185,151	151,231,177	30,953,974	21	153,756,354
OPERATING EXPENSES.	5,019,973	5,133,335	(113,362)	(2)	5,891,603	60,722,165	61,672,983	(950,818)	(2)	57,247,791
RECISTRY	588,171	228,877	359,294	157	491,872	6,508,068	2,751,332	3,756,736	137	4,548,252
EMPLOYEE BENEFITS	2,559,845	2,338,406	221, 439	10	481,157	26 570,525	19 501 562	873.470	(4)	19,352,379
PROFESSIONAL PEES	1,732,682	1,602,929	156,739	16	621,103	13,503,317	12,067,904	1,435,413	12	12,386,611
PURCHASED SERVICES	1,252,972	1,114,480	138,492	12	1,396,274	16,001,200	13,559,459	2,441,741	18	13,769,711
RENTAL	367,476	145,342	22,134	15	318,900	3,603,358	3,821,724	(18,566)	n (I	3,876,948
DEPRECIATION & AMONI	4,879	27,649	(22,770)	(82)	5,657	544,144	334,821	209,323	63	483,439
OTHER	446,585	428,427	18,158	*	519,097	5,586,954	5,207,795	379, 159	_	5,313,755
TOTAL EXPENSES	13, 223, 029	12,315,438	907,591	7	11,537,369	155,544,935	148,625,231	6,919,704	si.	142,350,699
						200 000	2000	24 614 368	000	11 40C CE4

Date: 07/14/25 @ 1732 Umer: SDILAURA										PAGE 2
			HASHL HAMKLING NEBRORLAL ROSPITAL - COGRIFMED ROLLISTER, CA 95023 FOR PHRICED 06/30/25	ME PERSONIAL ROSPITAL MOLLISTER, CA 95023 POR PERSON 06/30/25	AL - COMBINED 33					
	ACTUAL 06/30/25	BUDGET 06/30/25	POSTANCE PRECENT PARTANCE VARIANCE	PERCENT	PRIOR YR D6/30/24	ACTUAL 06/30/25	ACTUAL SUDGET 06/30/25 06/30/25	POS/MEG PERCENT VARIANCE VARIANCE	PERCENT	PRIOR YR 06/30/24
NON - OPERATING REVIEWED EXPENSE:										
DOMATIONS	128,149	5,000	123,149	2,463	146,825	354,744	160,000	194,744	122	390,752
PROPERTY TAX REVENUE	244,527	241,122	3,405	7	593,991	2,896,869	2,893,464	3,405	0	2,856,812
GO BOND PROP TAXES	200,577	175,915	24,662	14	260,119	2,135,640	2,110,980	24,660	7	2,134,384
GO BOND INT REVENUE/EXPENSE	(65,081)	(65,081)	0	0	(68,721)	(780,977)	(780,972)	(5)	0	(824,653)
OTHER MON-OPER REVENUE	13,166	15,908	(2,742)	(11)	14,328	186,085	190,896	(4,811)	(3)	206,282
OTHER MON-OPER EXPENSE	(22,911)	(22,651)	(260)	1	(91,406)	(322,565)	(312, 732)	(9,833)	E	(490,611)
INVESTMENT INCOME	2,202	0	2,202		13,460	16,899	0	16,899		9,251
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/ (EXPENSE)	500,629	350,213	150,416	43	868,596	4,486,694	4,261,636	225,058	in.	4,282,218
NET SURPLUS (LOSS)	881,101	742,604	138,497	19	1,861,623	31,126,910	6,867,582	24,259,328	353	15,687,872
RBIDA	\$ 1,084,708	\$ 972,898	\$ 111,810	11.49\$	\$ 2,080,531	\$ 33,897,970	\$ 9,672,030	\$ 24,225,940	250,47\$	\$ 18,745,699
EBIDA MARGIN	7.978	7.66%	0.32%	4.15%	16 60%	119,611	404 9	12.21%	190,92%	12.19%
OPERATING MARGIN	2.808	3.098	(0.29)	k (9.42) t	7.92\$	14.62%	1.728	12.90%	748.578	7.42%
NET SURPLUS (LOSS) MARGIN	6.481	5.848	0.63%	10.838	34.864	17.091	4.548	12.54%	276.23%	10.20%

		EAST	HAZEL EANTING MEDICAL	HENCRIAL ROSPITAL - BOLLISTER, CA 95023	ACOTE PACILITY 13	F				
			TOR 1	FOR PERIOD 06/30/25						
	ACTUAL 06/30/25	BUDGET 06/30/25	CORREGE NORTH ROF/HING VARIANCE	PERCENT	PRICH TR 06/30/24	ACTUAL 06/30/25	BUDGET 06/30/25	POS/MEG VARIANCE	PERCENT	PRIOR YR 06/30/24
GROSS PATIENT REVENUE:										
ROUTINE REVENUE ANCILLARY IMPATIENT REVENUE HOSPITALIST IR PREVENUE	3,455,298 3,272,674 180,758	3,248,015	207,283 (404,479) 180,758	(11)	4,095,139 5,150,323 214,236	40,564,284 45,890,931 180,758	39,149,430 44,321,922 0	1,414,654 1,569,009	* *	40,084,613 46,563,908 2,051,466
TOTAL GROSS INPATIENT REVENUE	6,908,731	6,925,168	(16,437)	0	9,459,698	86,635,973	83,471,352	3,164,621		88, 699, 986
ANCILLARY OUTPATIENT REVENUE HOSPITALIST O\P REVENUE	29,460,285	27,881,281	1,579,004	9	25,757,265	352,343,133	331,428,605	20,914,328	9	326,949,882
TOTAL GROSS OUTPATIENT REVENUE	29,574,249	27,881,281	1,692,968	9	25,845,155	352,457,097	331, 428, 805	21,028,292	9	327,812,688
TOTAL GROSS ACUTE PATIENT REVENUE	36,482,980	34,806,449	1,676,531	LITY	35, 304, 853	439,093,070	414,900,157	24,192,913	9	416,512,675
DEDUCTIONS PROM REVENUE ACUTE:										
MEDICARE CONTRACTUAL ALLOWANCES	11,508,390	9,862,766	1,645,624	1.7	5,687,602	123, 985, 205	117,608,337	6,376,868	is	111, 799, 395
MEDI-CAL CONTRACTUAL ALLOWANCES	9, 395, 090	9,844,084	(448, 995)	(5)	9,451,196	117,771,873	117, 314, 293	457,580	37	115,626,488
BAD DEBT EXPENSE	1,054,150	39,377	(14, 353)	(37)	34,099	356, 209	469, 391	(113,182)	(34)	481,216
OTHER CONTRACTUALS AND ADJUSTMENTS	4,849,055	4,335,831	513,224	12	6,341,770	103,901	51, 636, 009	4,031,065	6 0	54,630,842 (52,298)
Stiffside of the state of the s	26 935 609	24. 605. 245	2 330.364	10	25.341.886	306,408,244	293, 264, 524	13,143,720	5	293, 592, 705
ICIAL ACUIB DECOCIACIOS FACE REVENUES						130 684 833	200 200 100	11 040 104	0	122 919 969
NET ACUTE PATIENT REVENUE	9,547,370	10, 201, 204	(653, 834)	(9)	7, 762, 761	727, 888, 821	177	F 64	•	1
OTHER OPERATING REVENUE	2,134,125	547,081	1,586,244	290	604,653	25,602,424	6,581,572	19,020,852	289	7, 086, 392
NET ACUTE OPERATING REVENUE	11,681,495	10,749,085	932,410	•	10,567,620	158, 287, 251	128,217,205	30,070,046	24	130,006,361
OPERATING EXPENSES:										
SETANTES & MAGES	3,976,813	4,107,008	(130,195)	(6)	4,516,065	48, 277, 984	49, 487, 573	(1,209,589)	(2)	45,504,240
REGISTRY	506, 782	200,000	306,782	153	454, 183	5,842,604	2,400,000	3,442,604	143	4,109,712
EMPLOYER BENEFITS	2,001,664	1,811,741	189,923	11	43,589	20, 679, 149	19, 473, 520	874.992	<u>()</u>	19, 325, 859
PROPESSIONAL PEES	1,730,472	1,000,045	150,935	17	559,932	12,307,768	10,912,745	1, 395, 023	11	11, 270, 696
SUPPLIES SERVICES	1,119,385	1,028,073	91,312	•	1,281,663	14,811,074	12, 508, 181	2,302,893	1.8	12,716,465
RENTAL	144,035	144, 283	(248)	0	212,421	1,802,656	1,755,423	47,233	m (1,738,675
DEPRECIATION & ANORT	276,712	278,940	(2,220)	(1)	279,777	5,333,272	3,347,260	209, 323	9 69	000 T 100 T
INTEREST	404,164	373,693	30,471	4 2	451,703	4,904,506	4,542,335	362,171	8	4,657,373
TOTAL EXPENSES	11,196,801	10,452,974	743,827		9, 400, 559	132,851,668	126, 432, 189	6,419,479	5	121, 263, 424
(2001) WASCIST CATTER GREEN MINES		200 313		1	0000	26 436 683	7 785 016	73 650 567	1 126	8.742.937

Date: 07/14/25 @ 1731 User: SDILAURA										ď	PAGE 2
		EXTE	HAIR, EANTIES KERORIAL BOSPITAL - ACUTE PACILITY EQLISTER, CA 95023 POR PERIOD 06/30/25	MODILAL BOSPITAL - MOLLISTER, CA 95023 FOR PERIOD 06/30/25	- ACUTE PACILII 23 15	E					
	ACTUAL 06/30/25		SUDGET POSTME PERCENT PRICE YR. 6/30/25 VARIANCE VARIANCE 06/30/24	PERCENT	PRIOR YR. 06/30/24	ACTUBL 06/30/25	\$CDORT 06/30/25	POS/MEG PERCENT TARIANCE VARIANCE	PERCENT	PRIOR YR 06/30/24	
NON-OPERATING REVENUE\EXPENSE:											
DONATIONS	128,149	2,000	123,149	2,463	146,825	354,744	160,000	194,744	122	390,752	-
PROPERTY TAX REVENUE	207,883	204,954	2,929	٦	504,892	2,462,377	2,459,448	2,929	0	2,428,286	
GO BOND PROP TAXES	200,577	175,915	24,662	14	260,119	2,135,640	2,110,980	24,660	4	2,134,384	
GO BOND INT REVENUE/EXPENSE	(65,081)	(65,081)	0	0	(68,721)	(780,977)	(780,972)	(5)	0	(824,653)	
OTHER NON-OPER REVENUE	13,166	15,908	(2,742)	(11)	14,326	186,085	190,896	(4,811)	(3)	206,282	_
OTHER MON-OPER EXPENSE	(17,863)	(17,603)	(260)	7	(65,217)	(252,867)	(243,036)	(119'6)	*	(407,556)	
INVESTMENT INCOME	2,202	0	2,202		13,460	16,899	0	16,899		9,251	_
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	a	0	0	0	
TOTAL NON-OPERATING REVENUE/(EXPENSE)	469,033	319,093	149,940	4.7	785,685	4,121,900	3,897,316	224,584	9	3,936,747	
NET SURPLUS (LOSS)	953,727	615,204	338,523	55	1,952,745	29,557,482	5,682,332	23,875,150	420	12,679,684	
]

GROSS SWP PATIENT REVENUE: ROUTINE SWP REVENUE AMCILLARY SWP REVENUE TOTAL GROSS SWP PATIENT REVENUE			HAZH, MANKING SKILLED NÜLĞING PACILITIES HOLLISTER, CA	CELLED NURSENG	PACILITIES					
T REVENUE			POR PI	MOLLISTER, CA FOR PERIOD 06/30/25						
GROSS SWP PATIENT REVENUE: ROUTINE SWF REVENUE AMCILLARY SWP REVENUE TOTAL GROSS SWP PATIENT REVENUE	ACTUAL 06/30/25	BUDGET 06/30/25	CURRECT HOUTE POS/HING VARIANCE	PERCENT	PRIOR YR 06/30/24	ACTUAL 06/30/25	BUDGET 06/30/25	POS/MMG PHR PARTANCE VAR	PERCENT	PRIOR YR 06/30/24
ROUTINE SMF REVENUE AMCILLARY SMP REVENUE TOTAL GROSS SMP PATIENT REVENUE										
TOTAL GROSS SNP PATIENT REVENUE	2,088,060	2,007,529	80,531	₩ Øi	1,841,130	24,182,850	23,588,479	594,371	3 3 2 3	3,608,712
	2,547,646	2,338,782	208,864	6	2,120,181	28,942,676	27,480,667	1,462,009	8	28, 316, 710
DEDUCTIONS PROM REVENUE SNP:										
MEDICARE CONTRACTUAL ALLOWANCES	358,976	216,030	142,946	99	212,297	3,464,896	2,538,357	926,539	37	2,641,187
MEDI-CAL CONTRACTUAL ALLOHANCES	120,627	126,162	(5,536)	(4)	(56,943)	919,663	1,482,399	(562,737)	(38)	1,642,992
BAD DEST EXPENSE CHARITY CARE	(10, 165)	000's	(15,365)	(307)	(6, 228)	61,438	000.000	61,438	₽	3,702
OTHER CONTRACTUALS AND ADJUSTMENTS	156,402	32,846	123,556	376	8,280	530, 547	385, 939	144,608	38	376,932
TOTAL SNP DEDUCTIONS FROM REVENUE	625,640	380.038	245,602	9	157,405	5,044,776	4,466,695	578,081	13	4, 566,717
NET SNP PATIENT REVENUE	1,922,006	1,958,744	(36,738)	(2)	1,962,776	23,897,900	23,013,972	683,928	4	23,749,993
OTHER OPERATING REVENUE	٥	0	0	0	0	0	0	0	0	0
NET SWF OPERATING REVENUE	1,922,006	1,958,744	(36,738)	(2)	1,962,776	23,897,900	23,013,972	863,928	~	23, 749, 993
OPERATING EXPENSES:	1.043 160	1 026.327	16.833	8	1.375.538	12,444,181	12,185,410	258,771	74	11,743,551
REGISTRY	81,389	28,877	52,512	182	37,689	665,465	351,332	314,133	86	438,540
SHILDYSE SENETITS	558, 181	526,665	31,516	9 (437,569	5,891,376	6,269,036	(377,660)	(9)	5,566,170
PROFESSIONAL WEBS	102.359	96,554	5,805	9	61,171	1, 195, 549	1, 155, 159	40,390	4	1,115,915
PURCHASED SERVICES	133,587	86,407	47,140	55	114,612	1,190,126	1,051,278	138,848	13	1,053,246
RENTAL	23,441	1,059	22, 382	4, 114	39.124	469.886	474,444	(4,558)	(2)	472,575
DEFRECTION INTEREST	0	0	0	0	0	0	0	0	0	0
OTHER	42,421	54,734	(12, 313)	(23)	67, 394	682,448	665,460	16,988	m	656, 382
TOTAL EXPENSES	2,026,238	1,862,464	163,764	8	2,136,809	22,693,268	22, 193, 042	500, 226	2	21,087,275
WET OPERATING INCOME (LOSS)	(104,222)	96,280	(200,502)	(208)	(174,033)	1,204,633	820,930	383,703	4.7	2,662,718
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS PROPERTY TAX REVENUE OTHER HON-OPER EXPENSE	36,645	36,368	477	0 # 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	434,493 (69,698)	434,016	477	000	428,526
TOTAL NON-OPERATING REVENUE/(EXPENSE)	31,597	31,120	477	2	82,911	364,795	364,320	475	0	345,471
NBT SURPLUS (LOSS)	(72, 625)	127,400	(200,025)	(157)	(91,122)	1,569,427	1,185,250	364, 177	8	3,006,188

Date: 07/14/25 @ 1730
User: SDILAURA

HAZEL HAWKINS MEMORIAL HOSPITAL HOLLISTER, CA For the month ended 06/30/25

	For the month	ended 06/30/25			
	CURR MONTH 06/30/25	PRIOR MONTH 05/31/25	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/24
CURRENT ASSETS					
CASH & CASH EQUIVALENT	46,674,801	46,074,130	600.671	1	35.145.624
PATIENT ACCOUNTS RECEIVABLE	66,556,290	66,592,582	(36, 292)	0	67,848,785
BAD DEBT ALLOWANCE	(7,062,672)	(6,686,582)	(376,090)	6	(9,487,617)
CONTRACTUAL RESERVES	(38, 404, 377)	(38,570,490)	166,113	0	(46, 279, 766)
OTHER RECEIVABLES	5,032,841	3,708,159	1,324,682	36	5,931.344
INVENTORIES	4,556,855	4,456,182	100,673	2	4,496,070
PREPAID EXPENSES	2,599,584	2,103,502	496.082	24	1,775,026
DUE TO\PROM THIRD PARTIES	(181,860)	(181,860)	0	0	200,709
TOTAL CURRENT ASSETS	79,771,462	77, 495, 624	2,275,838	3	59,630,175
		========	**	=======================================	
ASSETS WHOSE USE IS LIMITED					
BOARD DESIGNATED FUNDS	5,234,141	8,013,013	(2,778,872)	(35)	3,512,919
TOTAL LIMITED USE ASSETS	5, 234, 141	0,013,013	(2,778,872)	(35)	3,512,919
	===========	*****			*********
PROPERTY, PLANT, AND EQUIPMENT					
LAND & LAND IMPROVEMENTS	3,370,474	3,370,474	0	Q	3,370,474
BLDGS & BLDG IMPROVEMENTS	100,098,374	100,098,374	0	0	100.098,374
EQUIPMENT	46,216,440	45,876,270	340,170	1	44,435,024
CONSTRUCTION IN PROGRESS	4,324,809	4,199,667	125,143	3	1,393,964
GROSS PROPERTY, PLANT, AND EQUIPMENT	154,010,097	153,544,784	465,313	0	149,297,836
ACCUMULATED DEPRECIATION	(98,388,978)	(98,058,044)	(330,934)	0	(94,409,166)
NET PROPERTY, PLANT, AND EQUIPMENT	55,621,119	55,486,741	134,379	О	54,888,670
				*******	********
OTHER ASSETS					
UNAMORTIZED LOAN COSTS	327,215	333,126	(5,911)	(2)	398,148
PENSION DEFERRED OUTFLOWS NET	7,038,149	7,038,149	0	0	7,038,149
TOTAL OTHER ASSETS	7,365,364	7,371,275	(5,911)	0	7,436.297
			***************************************		******
TOTAL IMPROVED ACCOME	1.13 000 555				
TOTAL UNRESTRICTED ASSETS	147,992,086	148,366,653	(374,566)	0	125,468,061
	建 工业组织成果现金条件等	**********	********	*********	********
RESTRICTED ASSETS	127,208	127,157	51	0	127, 119
	127,200	151,131	21		127,119
TOTAL ASSETS	148,119,295	148,493,810	(374,515)	0	125,595,180

Date: 07/14/25 @ 1730 PAGE 2 User: SDILAURA HAZEL HAWKINS MEMORIAL HOSPITAL HOLLISTER, CA For the month ended 06/30/25 CURR MONTH PRIOR MONTH POS/NEG PERCENTAGE PRIOR YR 06/30/25 05/31/25 VARIANCE VARIANCE 06/30/24 CURRENT LIABILITIES 6,196,661 5,571,589 (625,072) 11 8,572,685 3,467,229 2,920,381 (546,849) 19 5,824,977 ACCOUNTS PAYABLE 5,824,977 ACCRUED PAYROLL 456,178 12 ACCRUED PAYROLL TAXES 510,049 (53,871) 456,178 (53,871)
5,206,840 132,520
78,823 (6,742)
1,310 0
5,356,466 655,000
1,046,982 290,147 1,608,471 ACCRUED BENEFITS 5.074.320 (3) 6,695,829 85,565 OTHER ACCRUED EXPENSES PATIENT REFUNDS PAYABLE 1,310 12,920 DUE TO\FROM THIRD PARTIES 4,701,466 2,355,584 (12) OTHER CURRENT LIABILITIES 756,834 (28) 611.755 TOTAL CURRENT LIABILITIES 20,793,435 20,638,568 (154,867) LONG-TERM DEBT 4,642,201 6,905 401 1,358,520 LEASES PAYABLE 4,692,-4.635.296 (5) 5,107,486 BONDS PAYABLE 28,534,881 TOTAL LONG TERM DEBT 33,170,177 (4) 36,849,607 34,535,602 1,365,425 医抗性动物性结肠性结合 口格的现在分词 医动脉性性神经炎 医神经性神经炎性 医神经神经神经神经 医克克特特氏试验检检试验检检检验 OTHER LONG-TERM LIABILITIES 0 DEFERRED REVENUE 0 0 0 23,814,514 LONG-TERM PENSION LIABILITY 23,814,514 23,814,514 0 0 TOTAL OTHER LONG-TERM LIABILITIES 23,814,514 23,814,514 23,814.514 TOTAL LIABILITIES 77,778,126 78,988,684 1,210,558 (2) 86,435,901 NET ASSETS! UNRESTRICTED FUND BALANCE 0 39,064,686 39,064,686 39,064,686 0 45,058 (881,101) 94,593 RESTRICTED FUND BALANCE 149,573 194,631 (23) NET REVENUE/(EXPENSES) 31,126,910 30,245,809 3

69,505,126

(836,043)

148,119,295 148,493,810 374,515 0 125,595,180

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70.341.169

TOTAL NET ASSETS

TOTAL LIABILITIES AND NET ASSETS



San Benito Health Care District Hazel Hawkins Memorial Hospital JUNE 2025

Description	WTD Budget	MTD Actual	YTD Actual	YTD Budget	FYE Budget
Average Daily Census - Acute	14.95	15 10	14.73	14.90	14.90
Average Daily Census - SNF	88.05	92.60	83,07	85.00	85.00
Acute Length of Stay	2.89	2,81	2.73	2.90	2.90
ER Visits:					
Inpatient	114	127	1 609	1,444	1,444
Outpatient	2,035	2 0.99	26.345	25,269	25,269
Total	2,149	2,225	27.951	26,713	26,713
Days in Accounts Receivable	50.0	51.1	51.1	50.0	\$0.0
Productive Full-Time Equivalents	521.33	523.75	520.47	\$21.33	521.33
Net Patient Revenue	12,159,948	11,469,376	156,582,727	144,649,605	144,649,605
Payment-to-Charge Ratio	32.7%	29.4%	33.5%	32.7%	32.7%
Medicare Traditional Payor Mix	31.93%	30.61%	29.57	28.51%	28.51%
Commercial Payor Mix	20.82%	24.661)	23,436	21.88%	21.88%
Bad Debt % of Gross Revenue	1.42%	2.70	1 8.7	1.42%	1.42%
EBIDA EBIDA %	972,898 7.66%	1.084.708 7.97	33,897,970 18 61	9,672,030 6.40%	9,672,030 6.40%
Operating Margin	3.09%	2.80%	14.62	1.72%	1.72%
Salaries, Wages, Registry & Benefits %:					
by Net Operating Revenue	60.60%	60.049	51.49	61.10%	61.10%
by Total Operating Expense	62.53%	61 77 3	60.30	62.15%	62.15%
Bond Covenants:					
Debt Service Ratio	1.25	18.14	18.14	1.25	5.18
Current Ratio	1.50	184	3.81	1.50	2.00
Days Cash on hand	30.00	132.03	112.03	30.00	100.00
Met or Exceeded Target				l	
Within 10% of Target Not Within 10%					

of Cash Flows	kins Memorial Hospital	welve months ending June 30, 2025
Statement of Cash Flow	Hazel Hawkins I	twelve months

	CASH FLOW		COMMENTS
	Current Month 6/30/2028	Current Year-To-Date 6/30/2025	
CASH FLOWS FROM OPERATING ACTIVITIES: Net income (Loss) Adjustments to Reconcile Net Income to Net Cash	\$881,101	\$31,126,910	
Provided by Operating Activities: Depreciation	330,934	3,979,814	
(Increase)/Decrease in Net Patient Accounts Receivable	246,269	(9,007,838)	
(increase)/Decrease in Unier Receivables (increase)/Decrease in inventories	(1324,061)	(80,784)	
(Increase)/Decrease in Pre-Paid Expenses	(496,082)	(824,560)	
(Increase)/Decrease in Due From Third Parties	0 625.072	382,569	
Increase(Decrease) in Notes and Loans Payable	0 000 000	0	
indrease(Decrease) in Accued Payroll and Derleins Increase(Decrease) in Accued Expenses	6,742	(386 E)	
Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities	(655,000)	2,345,882	
Increase/(Decrease) in Other Current Liabitities Net Cash Provided by Operating Activities:	(1,189,366)	(9,510,640)	Semi-Annual Int 2005 GO & 2021 Revenue Bonds
CASH FLOWS FROM INVESTING ACTIVITIES: Purchase of Property, Plant and Equipment (Increase)/Decrease in Limited Use Cash and Investments	(465,313)	(4,712,283)	
(Increase)/Decrease in Other Limited Use Assets (Increase)/Decrease in Other Assets Net Cash Used by Investing Activities	2,7/8,872 5,911 2,319,470	70,932 70,932 (6,362,854)	dond Principal & In Payment - 2014 (2005) & 2021 Bonds Amortization
CASH FLOWS FROM FINANCING ACTIVITIES:	(6.905)	(472,190)	
Increase/(Decrease) in Copyer Long Debt Increase/(Decrease) in Other Long Term Liabilities	(1,358,520)	(3,207,240)	2016 GO Principal & Nationancing of 2013 Bonds with 2021 Bonds
Net Cash Used for Financing Activities	(1,365,425)	(3,679,430)	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	(46,109)	54,891	
Net increase/(Decrease) in Cash	600,671	11,529,177	
Cash, Beginning of Period	46,074,130	35,145,624	
Cash, End of Parlod	\$46,674,801	\$46,674,801	0\$
こうできないことできるから こうしんかん しんこうしん ないないしゃ こうしん	The second secon		
Cost per day to run the District	\$416,012	\$40,286,969	Budgeted Cash on Mand

Operational Days Cash on Hand

\$6,387,832

Hazel Hawkins Memorial Hospital Supplemental Payment Programs FYE June 30, 2025

July 24, 2025

The Honorable J. Omar Rodriguez, Presiding Judge Judge of the Superior Court c/o Office of the County Counsel 450 Fourth Street Hollister, CA 95023

Re: 2024-2025 San Benito County Grand Jury Final Report - San Benito Health Care District

Dear Honorable Judge Rodriguez,

This letter is in response to the San Benito County Civil Grand Jury Final Report regarding the San Benito Health Care District ("SBHD" or "District") pursuant to Penal Code sections 933 and 933.05. The District Board approved the responses contained in this correspondence at its regular meeting on July 24, 2025.

The District is committed to complying with applicable law. The District appreciates the Civil Grand Jury's work and responds to the report's findings and recommendations below. The actual report language is displayed in **bold type** for readability.

FINDINGS

F1. Three members of the 2024 Board of Directors for the SBHD were not administered the Oath of Office by a person who is authorized to do so. The error was remediated in December 2024, after it was brought to the attention of the Board of Directors.

The District Board disagrees with this finding.

Government Code section 1360 requires all elected or appointed officers to take and subscribe the oath or affirmation set forth in Article XX of the California Constitution. Section 1362 provides that "[u]nless otherwise provided, the oath may be taken before any officer authorized to administer oaths..." Section 1001 defines "civil executive officers" to include "... such other officers as fill offices created by or under the authority of charters or laws for the government of counties and cities or of the health, school, election, road, or revenue laws; or persons serving on boards and commissions created under the laws of the state or established under the State Constitution."

The District is a health care district governed by Health Care District Law, set forth at Health and Safety Code section 32000 et seq. Health Care District Law section 32002 specifically provides that health care district elections must be conducted in accordance with the Uniform District Election Law ("UDEL"), which is found at Election Code section 10500 et seq. (Health and Safety Code section 32002.) The District Bylaws similarly provide that District elections are subject to UDEL (Bylaws, Section VII.A.3.)

Election Code section 10512(b), which is part of the UDEL, governs the administration of the oath for those members elected to the District Board and provides:

"The county elections official or district secretary, or a person designated by the county elections official or district secretary, may administer the oath or affirmation set forth in Section 3 of Article XX of the California Constitution to the candidate elected to office."

Neither Health Care District Law nor any provision of the Government Code <u>requires</u> a County Official listed in Government Code section 24000 to administer the Oath of Office to a District Board member, although they are authorized to do so.

Rather, the District Secretary, or a person designated by District Secretary, has authority to administer the oath or affirmation to newly elected Board members. In an abundance of caution, the District had the Oaths of Office re-administered by a County official between December 13-19, 2024.

RECOMMENDATIONS

R1. The SBHD must ensure that only those persons duly authorized to administer the oath of office for elected officials in all government areas or departments, as detailed in Government Code 24000, should be performing this function. It is imperative for the integrity of the electoral process and the validity of the official actions taken by board members that these authorized individuals properly administer the oath of office.

The District agrees it is imperative for the integrity of the electoral process that the Board members are sworn into office in accordance with Health Care District Law and UDEL. The District Secretary or designee may administer the Oath of Office. The recommendation has been implemented.

The District appreciates the opportunity to respond to the San Benito County Civil Grand Jury's Report.

William Johnson		
William Johnson		
President of the Board of Directors		

Respectfully,

Resolution No. 2025-04

RESOLUTION OF THE BOARD OF DIRECTORS OF THE SAN BENITO HEALTH CARE DISTRICT REGARDING ADMINISTRATION OF OATHS OF OFFICE

WHEREAS, the San Benito Health Care District ("District") is a local health care district duly organized and operating under the terms of the Local Health Care District Law (California Health and Safety Code Division 23, sections 32000-32492 ("Local Health Care District Law");

WHEREAS, in addition to Local Health Care District Law, the District is governed by Uniform District Election Law, set forth at California Elections Code section 10500 et seq.;

WHEREAS, the District Bylaws provide that procedures of the election shall be governed by the Local Health Care District Law and the Uniform District Election Law (Bylaws, VII.A.3);

WHEREAS, Uniform District Election Law, set forth at California Elections Code section 10500 et seq., requires that elective officers, elected or appointed, "take office at noon on the first Friday in December next following the general district election," and that prior to taking office, each elective officer "shall take the official oath" (section 10554);

WHEREAS, Government Code section 1360 requires all elected or appointed officers to "take and subscribe the oath or affirmation set forth in Article XX of the California Constitution";

WHEREAS, Government Code section 1362 provides that the "oath may be taken before any officer authorized to administer oaths";

WHEREAS, Government Code section 1225 states that an "executive officer, a judicial officer, and a Member of the legislature may administer and certify oaths";

WHEREAS, Government Code section 1001 provides that "civil executive officers" include "such other officers as fill offices created by or under the authority of charters or laws for the government of counties and cities or of the health, school, election, road, or revenue laws; or persons serving on boards and commissions created under the laws of the state or established under the State Constitution";

WHEREAS, Elections Code section 10512(b) provides that "[t]he county elections official or district secretary, or a person designated by the county elections official or district secretary, may administer the oath or affirmation set forth in Section 3 of Article XX of the California Constitution to the candidate elected to office";

WHEREAS, the District Board of Directors is committed to ensuring proper procedures for the administration of the oath of office for elected and appointed officials as required under applicable laws;

WHEREAS, the District Board of Directors, including the District Secretary, desire to designate individuals authorized to administer oaths to elected and appointed officials of the District; and

WHEREAS, this Resolution is not defined as a project under the California Environmental Quality Act ("CEQA"), set forth at Public Resources Code section 21065, or section 15378 of the State CEQA Guidelines, because administration of the Oaths of Office will not cause either a direct physical change in the environment or a reasonably foreseeable indirect physical change in the environment.

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

SECTION 1. The foregoing recitals are true, correct, and a substantive part of this Resolution.

SECTION 2. Any elective officer of the San Benito Health Care District Board of Directors, the United States of America, the State of California, and any city, district, or county located within the State of California, is hereby authorized to administer the Oath of Office to any individual required to take and subscribe to such an Oath under applicable law, including, but not limited to, elected or appointed officials of the San Benito Health Care District. For purposes of this Resolution, "elective officers" means any officer of a local, state, or federal agency, or political subdivision, holding an office that can be filled by election pursuant to state or federal law.

SECTION 3. This authority shall be exercised in accordance with applicable laws and procedures, and in furtherance of the official duties of the elected official administering the oath.

SECTION 4. This Resolution shall take effect immediately upon its adoption.

PASSED AND ADOPTED this 24th day of July, 2025 by the following vote:

	AYES:	
	NOES:	
	ABSTENTIONS:	
	ABSENT:	
		William Johnson, President
Attested:		
	Nick Gabriel, Secretary	

San Benito Health Care District Facilities and Finance Committee Minutes July 21, 2025 - 4:36pm

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. APPROVE MINUTES OF THE FACILITIES COMMITTEE MEETING, MAY 15, 2025

3. CURRENT PROJECTS

A. HHH Helipad Repair

Received approval from HCAI to use Helipad on a temporary basis, as long as extra extinguishers are added and security is called to monitor. Start date of the Permanent repair is still unknown but once contract is, signed installation could take 6-8 weeks to complete.

4. REVIEW FINANCIAL UPDATES

A. June 2025 Financial Statements

For the month ending June 30, 2025, the District's Net Surplus (Loss) is \$881,101 compared to a budgeted Surplus (Loss) of \$742,604. The District exceeded its budget for the month by \$138,497.

YTD as of June 30, 2025, the District's Net Surplus (Loss) is \$31,126,910 compared to a budgeted Surplus (Loss) of \$6,867,582. The District is exceeding its budget YTD by \$24,259,328.

Acute discharges were 161 for the month, exceeding budget by 6 discharges or 4%. The ADC was 15.10 compared to a budget of 14.95. The ALOS was 2.81. The acute I/P gross revenue was slightly less than budgeted by (\$16,437) (0%) while O/P services gross revenue exceeded budget by \$1.69 million or 6% over budget. ER I/P visits were 127 and ER O/P visits were over budget by 64 visits or 3%. The RHCs & Specialty Clinics treated 3,202 (includes 521 visits at the Diabetes Clinic) and 1,116 visits respectively.

Other Operating revenue exceeded budget by \$1.58 million due to:

- 1) \$1,162,892 for CY 2024 IGT and (Direct) HQAF funding.
- 2) \$112,289 for CCAH HQIP and \$112,547 higher Magellan Rx rebate.

Operating Expenses were over budget by \$743,827 due mainly to: Registry of \$306,782 (partially offset by savings in Salary & Wages of \$130,195. Benefits and Supplies were over budget by \$189,923 and \$150,935 respectively due mainly to an increase in Employee Health insurance claims and Orthopedic surgery cases.

Non-operating Revenue exceeded budget by \$122,348 which included donations from the Auxiliary and Foundation of \$45,000 and \$83,000 respectively.

The SNFs ADC was **92.60** for the month. The Net Surplus (Loss) is (\$72,625) compared to a budget of \$127,400. YTD, the Net Surplus (Loss) is \$1,569,427 exceeding its budget by \$384,177.

B. June 2025 Finance Dashboard

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

C. Supplemental Payment Program

All expected supplementals have been received as of June 2025.

5. PUBLIC COMMENT

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

6. ADJOURNMENT

There being no further business, the Committee was adjourned at 4:39 pm.

Respectfully submitted,

Sandra DiLaura Controller



July 17, 2025 San Benito Healthcare District Board of Directors

Via Electronic Delivery - Corrected

Re: The 2024-25 San Benito County Civil Grand Jury Consolidated Report Dear Members of the Board of Directors,

Enclosed please find a copy of the above report by the 2024-25 San Benito County Grand Jury.

Attached are excerpts from Penal Code sections 933 and 933.05. Please note that subdivision (f) of Penal Code section 933.05 specifically prohibits any disclosure of the contents of a grand jury report by a public agency or its officers or governing body before its release to the public, which will occur two days after the date of this letter.

Penal Code §933.05 requires that you respond separately to the specified Findings and Recommendations contained in the report. Penal Code § 933.05 mandates the content and format of responses. Penal Code section 933 mandates the deadline for responses.

The Board of Directors of the Healthcare District is required to respond within 90 days as follows:

Hard copy to: The Honorable J. Omar Rodriguez, Presiding Judge, 450 Fourth Street, Hollister, CA 95023.

Responses are public records. Your entity must maintain a copy of your response.

Should you have any questions, please contact me at (831) 313-3147 or email me at: BarbaraSBCGJ@gmail.com.

Sincerely,

Barbara Douglass-Scherer

Foreperson, 2024-25 San Benito County Civil Grand Jury

Enclosures: Grand jury report and Penal Code sections 933 and 933.05 (excerpts)

§ 933. Findings and Recommendations (Excerpt)

No later than 90 days after the grand jury submits a final report on the operations of any public agency subject to its reviewing authority, the governing body of the public agency shall comment to the presiding judge of the superior court on the findings and recommendations pertaining to matters under the control of the governing body, and every elected county officer or agency head for which the grand jury has responsibility pursuant to Section 914.1 shall comment within 60 days to the presiding judge of the superior court, with an information copy sent to the board of supervisors, on the findings and recommendations pertaining to matters under the control of that county officer or agency head and any agency or agencies which that officer or agency head supervises or controls. In any city and county, the mayor shall also comment on the findings and recommendations. All of these comments and reports shall forthwith be submitted to the presiding judge of the superior court who impaneled the grand jury. A copy of all responses to grand jury reports shall be placed on file with the clerk of the public agency and the office of the county clerk, or the mayor when applicable, and shall remain on file in those offices...

As used in this section, "agency" includes a department.

§ 933.05. Responses to Findings (Excerpt)

- (a) For purposes of subdivision (b) of Section 933, as to **each** grand jury **finding**, the responding person or entity shall indicate one of the following:
 - (1) The respondent agrees with the finding.
 - (2) The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefor.
- (b) For purposes of subdivision (b) of Section 933, as to **each** grand jury **recommendation**, the responding person or entity shall report one of the following actions:
 - (1) The recommendation has been implemented, with a summary regarding the implemented action.
 - (2) The recommendation has not yet been implemented, but will be implemented in the future, with a timeframe for implementation.
 - (3) The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a timeframe for the matter to be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This timeframe shall not exceed six months from the date of publication of the grand jury report.
 - (4) The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefore.
- (c) However, if a finding or recommendation of the grand jury addresses budgetary or personnel matters of a county agency or department headed by an elected officer, both the agency or department head and the board of supervisors shall respond if requested by the grand jury, but the response of the board of supervisors shall address only those budgetary or personnel matters over which it has some decision making authority. The response of the elected agency or department head shall address all aspects of the findings or recommendations affecting his or her agency or department.
- (f) A grand jury shall provide to the affected agency a copy of the portion of the grand jury report relating to that person or entity two working days prior to its public release and after the approval of the presiding judge. No officer, agency, department, or governing body of a public agency shall disclose any contents of the report prior to the public release of the final report. (*Emphasis added*.)

SAN BENITO HEALTHCARE DISTRICT COMPLAINT BACKGROUND

INTRODUCTION

The 2024-2025 Civil Grand Jury (CGJ) received a complaint regarding the swearing-in process of the recently elected Board of Directors for the San Benito Healthcare District (SBHD).

METHODOLOGY

The CGJ conducted multiple interviews, including, but not limited to, witnesses, County staff, and other persons deemed knowledgeable of the incidents. Reviewed were the current and past 2024-2025 swearing-in document confirmation.

BACKGROUND

According to Title 1, Division 4, Chapter 1, Article 8, Code 1225 - Who is authorized to administer oaths lists the officers who can officially administer and certify oaths. Title 3, Division 2, Part 1, Chapter 1, Code 24000, lists the county officers who are allowed to administer oaths. For complete information regarding these Government Codes, log onto https://leginfo.legislature.ca.gov for detailed information.

DISCUSSION

In November 2024, three seats for the Board of Directors at the SBHD were up for election. Each newly elected seat was sworn in separately in December 2024.

Based on our investigation, it was determined that the three newly elected Board of Directors who were elected to the SBHD were NOT sworn in according to the government codes listed above. It was also determined that this error was subsequently remedied (corrected).

Oath Not Administered Correctly Date	Date Error Remediated by San Benito County Officials	Number of Unauthorized Days
12/5/2024	12/19/2024	14
12/5/2024	12/13/2024	8
12/4/2024	12/13/2024	9

In reviewing documents obtained by the CGJ regarding the Oath of Office being administered to the Board of Directors of the SBHD, it was determined that elected officials before December 4, 2024, were not sworn in by persons authorized to do so. The CGJ did not decide as to whether or not meeting and voting rights may have been violated during the period between being incorrectly sworn in and the remedial action to correct the status of the Board member.



The review of previous years' procedures has brought to light a significant issue concerning the administration of the Oath of Office to the Board Members of the SBHD. It has been observed that before December 4, 2024, individuals who were not authorized to administer the oath were performing this vital function. The unauthorized administration of the Oath of Office has several potential implications: (1) Validity of Board Members' Positions: The legitimacy of the Board Members' positions may be questioned, as the oath was not administered by authorized individuals. This could potentially invalidate their roles and responsibilities. (2) Meeting and Voting Rights: If the Board Members were not validly inducted, any decisions made during meetings and any votes cast may be subject to legal scrutiny and potential invalidation. This can severely affect the governance and operational decisions of the Healthcare District.

FINDINGS AND RECOMMENDATIONS

F1: Three members of the 2024 Board of Directors for the SBHD were not administered the Oath of Office by a person who is authorized to do so. The error was remediated in December 2024, after it was brought to the attention of the Board of Directors.

R1: The SBHD must ensure that only those persons duly authorized to administer the oath of office for elected officials in all government areas or departments, as detailed in Government Code 24000, should be performing this function. It is imperative for the integrity of the electoral process and the validity of the official actions taken by board members that these authorized individuals properly administer the oath of office.

REQUIRED RESPONSES

San Benito Healthcare District Board of Directors

<u>Disclaimer</u>: This report was issued by the Civil Grand Jury, except for **Stacie McGrady**, due to a perceived bias towards the San Benito Healthcare District. This Civil Grand Juror did not participate in any aspect of the investigation, including interviews and deliberations, the preparation and writing of this report, or the approval of the report.

