



**Hazel Hawkins**  
MEMORIAL HOSPITAL

**REGULAR MEETING OF THE BOARD OF DIRECTORS  
SAN BENITO HEALTH CARE DISTRICT  
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA  
THURSDAY, MARCH 27, 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**

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

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

**AGENDA**

**Presented By:**

- 1. **Call to Order / Roll Call** (Johnson)
- 2. **Board Announcements** (Johnson)
- 3. **Public Comment** (Johnson)  
This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on matters within the jurisdiction of this District Board, which are not otherwise covered under an item on this agenda. This is the appropriate place to comment on items on the Consent Agenda. Board Members may not deliberate or take action on an item not on the duly posted agenda. Written comments for the Board should be provided to the Board clerk or designee for the official record. Whenever possible, written correspondence should be submitted to the Board in advance of the meeting to provide adequate time for its consideration. Speaker cards are available.
- 4. **Consent Agenda – General Business** (Johnson)  
The Consent Agenda deals with routine and non-controversial matters. The vote on the Consent Agenda shall apply to each item that has not been removed. A Board Member may pull an item from the Consent Agenda for discussion. One motion shall be made to adopt all non-removed items on the Consent Agenda.
  - A. Consider and Approve Minutes of the Regular Meeting of the Board of Directors – February 27, 2025.
  - B. Receive Officer/Director Written Reports
    - Physician Services & Clinic Operations

- Skilled Nursing Facilities (Mabie Southside/Northside)
- Laboratory and Radiology
- Foundation
- Marketing
- PMO Project Summary

C. Consider and Approve Policies:

- Outbreak Investigation (Revised)
- Use of Portable Fans (Revised)
- Enhanced Barrier Precautions SNF (New)
- Infection Control and Prevention SNF (New)
- COVID-19 Prevention and Management SNF (New)

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

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

**5. Receive Informational Reports**

A. Chief Executive Officer (Verbal Report)

(Casillas)  
(Gross, Peil)  
(Casillas)

- Transaction Update
- Update on Tariffs
- ▶ Public Comment

B. Chief Nursing Officer

(Descent)

- Dashboard – February 2025
- ▶ Public Comment

C. Finance Committee – March 24, 2025

(Robinson)

- Financial Statements – February 2025
- Finance Dashboard – February 2025
- Supplemental Payments – February 2025
- ▶ Public Comment

**6. Action Items**

A. Consider Approval of Professional Services Agreement for Lorilee Sutter, M.D., in the amount of \$187,200.00 annually.

*Recommended Action: Approval of Professional Services Agreement for Lorilee Sutter, M.D., in the amount of \$187,200.00 annually.*

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

**B. Consider Approval of Proposed Amendments to Bylaws Regarding Committee Meetings.**

*Recommended Action: Approval of Amendments to Bylaws Regarding Committee Meetings.*

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

- 7. Public Comment** (Johnson)  
This opportunity is provided for members to comment on the closed session topics, not to exceed three (3) minutes.
- 8. Closed Session** (Johnson)  
See the Attached Closed Session Sheet Information.
- 9. Closed Session Report** (Counsel)
- 10. Adjournment** (Johnson)  
The next Regular Meeting of the Board of Directors is scheduled for Thursday, April 24, 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 is available on a first come first serve basis.**

**SAN BENITO HEALTH CARE DISTRICT BOARD OF DIRECTORS**  
**March 27, 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:** *In Re San Benito Health Care District*, Case No. 3:24-cv-02266-JD, Northern District Court (Appeal from Bankruptcy Court Case No. 23-50544 SLJ); NUHW Unfair Practice Charge No. SF-CE-2232-M; CNA Unfair Practice Labor Charge No. SF-CE-2231-M

**Case name unspecified:**

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

- LIABILITY CLAIMS**  
(Government Code §54956.95)

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

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

**Consultation with:** (Specify the name of law enforcement agency and title of officer): \_\_\_\_\_

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

**Title:**

- PUBLIC EMPLOYMENT**  
(Government Code §54957)

**Title:**

**PUBLIC EMPLOYEE PERFORMANCE EVALUATION**

(Government Code §54957)

(Specify position title of the employee being reviewed):

**Title:**

**PUBLIC EMPLOYEE DISCIPLINE/DISMISSAL/RELEASE**

(Government Code §54957)

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

**CONFERENCE WITH LABOR NEGOTIATOR**

(Government Code §54957.6)

**Agency designated representative:**

**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 medical audit committee, or report of quality assurance committee):

- 1. Report – 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**



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SAN BENITO HEALTH CARE DISTRICT  
SUPPORT SERVICES BUILDING, 2<sup>ND</sup>-FLOOR, GREAT ROOM  
IN PERSON AND BY VIDEO CONFERENCE**

**THURSDAY, FEBRUARY 27, 2025**

**5:00 P.M.**

**MINUTES**

**Directors Present**

Bill Johnson, Board Member  
Devon Pack, Board Member  
Victoria Angelo, Board Member  
Nick Gabriel, Board Member  
Josie Sanchez, Board Member

**Also Present**

Mary Casillas, Chief Executive Officer  
Mark Robinson, Chief Financial Officer  
Amy Breen-Lema, Vice President, Ambulatory & Physician Services  
Suzie Mays, Vice President, Information & Strategic Services  
Michael Bogey, MD, Chief of Staff  
Heidi A. Quinn, District Legal Counsel

1. **Call to Order/Roll Call**

Director Johnson called the meeting to order at 5:00 PM. A quorum was present, and attendance was taken by roll call. Directors Johnson, Pack, Angelo, Gabriel, and Sanchez were present.

2. **Board Announcements**

President Johnson stated he and Mr. Fendler were provide a tour of the hospital by CEO Mary Casillas. and noted a positive experience in the surgery center.

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.

4. **Consent Agenda - General Business**

A. Consider and Approve Minutes of the Regular Meeting of the Board of Directors –  
January 23, 2025.

B. Consider and Approve Minutes of the Special Meeting of the Board of Directors –  
February 4, 2025.

C. 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

D. Consider and Approve Policies:

- Cybersecurity Management Process (New)
- Observation Status (Revised)
- Layoff and Recall Policy (New Policy)
- Volunteer Assignments (New Policy)
- Payroll Policy (Revised)
- Violence in the Workplace (Revised)

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

**MOTION:** By Director Sanchez to approve the Consent Agenda – General Business, Items (A-D), as presented; Second by Director Johnson.

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

5. **Receive Informational Reports**

A. **Chief Executive Officer**

- Sutter
- Transaction Update
- Strategy Plan

Mary Casillas provided the CEO report, including an update on correspondence from Sutter Health. Mr. Peil, of B. Riley and Mr. Miller of Hooper, Lundy, & Bookman, the District's consultants, provided a transaction update to the Board of Directors. Mr. Miller introduced special counsel Stephanie Gross and Nina Marsden. Mr. Walling and Dr. Saeed, from Insight, shared a plan for the District.

An opportunity was provided for public comment and public comment was received.

B. **Facilities Committee**

1. Review Facilities Updates – February 2025.

- Current Projects
- Pending Projects
- Master Plan

Mr. Robinson reviewed the Facilities report, which is included in the packet.

An opportunity was provided for public comment, and no public comment was received.

C. **Finance Committee**

1. Review Financial Updates – January 2025

- Financial Statements
- Finance Dashboard
- Supplemental Payments

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

An opportunity was provided for public comment, and no public comment was received.

6. **Action Items**

A. Consider Approval of Lease Amendment with Ceglia Properties, LLC for in the amount of \$10,348.85 per month for a one-year extension.

An opportunity was provided for public comment, and no public comment was received.

**MOTION:** By Director Angelo to approve the Lease Amendment with Ceglia Properties, LLC in the amount of \$10,348.85 per month for a one-year extension, Second by Director Pack.

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

B. Consider and Approve Proposal for Verkada Door Access Control in the amount of \$250,004.80.

An opportunity was provided for public comment, and no public comment was received.

**MOTION:** By Director Gabriel to approve Proposal for Verkada Door Access Control in the amount of \$250,004.80, Second by Director Sanchez.

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

C. Consider and Approve Proposal for Medi-Tech Expense Software Upgrade in the amount of \$2,437,900.00.

An opportunity was provided for public comment, and public comment was received.

**MOTION:** By Director Pack to Approve Proposal for Medi-Tech Expense Software Upgrade in the amount of \$2,437,900.00, Second by Director Angelo.

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

D. Consider and Approve to Adopt Resolution No. 2025-02, Awarding Bid to Lowest Responsible Bidder, The Core Group for the Chemistry Analyzer in the amount of \$1,019,900.00.

An opportunity was provided for public comment, and public comment was received.

**MOTION:** By Director Sanchez to Approve and Adopt Resolution No. 2025-02, Awarding Bid to Lowest Responsible Bidder, The Core Group for the Chemistry Analyzer in the amount of \$1,019,900.00., Second by Director Gabriel.



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

E. Consider and Approve Print Services Agreement with Weizix in the amount of \$16,926.00 per month.

An opportunity was provided for public comment, and no public comment was received.

**MOTION:** By Director Pack to Approve Print Services Agreement with Weizix in the amount of \$16,926.00 per month, Second by Director Johnson.

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

7. **Public Comment**

An opportunity was provided for public comment, and no public comment was received.

8. **Closed Session**

President Johnson announced the items to be discussed in Closed Session as listed on the posted Agenda: Conference with Legal Counsel-Existing Litigation Government Code §54965.9(d)(1) and 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 8:07 pm.

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

The Board of Directors reconvened to open session at 8:23 pm. Counsel stated that two (2) items were discussed: 1) Conference with Legal Counsel-Existing Litigation and 2) Hearing/Reports.

No reportable action was taken regarding the conference with Legal Counsel-Existing Litigation. Under hearings and reports, the Credentials report was received and approved by the Board, which voted unanimously 5-0 to accept the Credentialing report.

10. **Adjournment:**

There being no further regular business or actions, the meeting was adjourned at 8:24 p.m.

The next Regular Meeting of the Board of Directors is scheduled for Thursday, March 27, 2025, at 5:00 p.m.



# Hazel Hawkins

MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors  
From: Amy Breen-Lema, Vice President, Clinic, Ambulatory & Physician Services  
Date: March 11, 2024  
Re: All Clinics – February 2025

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### **February 2025 Rural Health and Specialty Clinic's visit volumes**

Clinic Location	Total visits current month	Total visits prior month (January 2025)
Orthopedic Specialty	337	349
Multi-Specialty	512	653
Sunset	653	616
Surgery & Primary Care	275	232
San Juan Bautista	199	248
1st Street	617	587
4th Street	984	1,160
Barragan	691	772
<b>Total</b>	<b>4,268</b>	<b>4,617</b>

The total number of patient visits across all clinic locations decreased slightly from **4,617 in January to 4,268 in February**. This **7.6% decrease** is primarily attributed to:

- A shorter month in February, resulting in fewer available clinic days.
- Provider vacations without gap coverage in certain clinics, leading to temporary reductions in appointment availability.

Despite these factors, some clinics maintained stable visit numbers, and we anticipate a return to typical volumes in the coming months as schedules normalize.

- Provider recruitment activities with anticipated start dates by specialty:
  - Rheumatology: Dr. Lorilee Sutter – will be rejoining the clinics in April 2025

- Endocrinology: Dr. Bilal Ahmed – Pending a start date in April 2025
- Family practice: Amy Chu, PA – April 2025

- Dr. James Lilja, a board-certified Gynecologist/Oncologist, started in our Primary Care and Surgery Clinic on 2/13/2025. He has had a full schedule and has already scheduled surgery cases.
- Dr. John Wiemann, a board-certified, locum tenens orthopedic surgeon, began providing clinic and emergency call services in mid-February and made an immediate impact by performing two major surgeries in his first 48 hours, demonstrating his skill, adaptability, and efficiency. Patient, staff, and physician feedback has been overwhelmingly positive.
- Stephanie Smith, a locum tenens primary care nurse practitioner, has started in the clinics, assuming patients from our outgoing locums. She has been well received by staff and patients and has already extended her assignment with the clinics.



**Hazel Hawkins**  
 MEMORIAL HOSPITAL  
 Mabie Southside/Northside Skilled Nursing Facility  
 Board Report – March 2025

To: San Benito Health Care District Board of Directors  
 From: Jaylee Davison, Interim Director of Nursing, Skilled Nursing Facility

**1. Census Statistics: February 2025**

Southside	2025	Northside	2025
Total Number of Admissions	15	Total Number of Admissions	5
Number of Transfers from HHH	11	Number of Transfers from HHH	4
Number of Transfers to HHH	4	Number of Transfers to HHH	3
Number of Deaths	1	Number of Deaths	3
Number of Discharges	16	Number of Discharges	3
Total Discharges	17	Total Discharges	6
<b>Total Census Days</b>	<b>1162</b>	<b>Total Census Days</b>	<b>1294</b>

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: February 2025**

Southside	From	Payor	Northside	From	Payor
9	HHMH	Medicare	1	Westview Post Acute	CCA
1	St. Louise	Medicare	3	HHMH Re-Admit	Medicare
1	Good Sam.	Medicare	1	St.Louise Re-Admit	Medicare
1	CHOMP	Medicare			
1	HHMH	Hospice			
1	HHMH Re-Admit	Medicare			
1	SVMH Re-Admit	CCA			
<b>Total: 15</b>			<b>Total: 5</b>		

**3. Total Discharges by Payor: February 2025**

Southside	2025	Northside	2025
Medicare	12	Medicare	2
Medicare MC	0	Medicare MC	0
CCA	3	CCA	0
Medical	0	Medical	1
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	2	Hospice	3
Private (self-pay)	0	Private (self ay)	0
Insurance	0	Insurance	0
<b>Total:</b>	<b>17</b>	<b>Total:</b>	<b>6</b>

**4. Total Patient Days by Payor: February 2025**

<b>Southside</b>	<b>2025</b>	<b>Northside</b>	<b>2025</b>
Medicare	698	Medicare	63
Medicare MC	0	Medicare MC	0
CCA	322	CCA	1023
Medical	0	Medical	162
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	114	Hospice	38
Private (self-pay)	28	Private (self-pay)	0
Insurance	0	Insurance	0
Bed Hold / LOA	4	Bed Hold / LOA	8
<b>Total:</b>	<b>1166</b>	<b>Total:</b>	<b>1294</b>
<b>Average Daily Census</b>	<b>41.64</b>	<b>Average Daily Census</b>	<b>46.21</b>



# Hazel Hawkins MEMORIAL HOSPITAL

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



## Updates:

### Laboratory

1. Quality Assurance/Performance Improvement Activities
  - Update on chemistry analyzer project → Assay validation started 1/6/2025. Estimated completion date: 05/2025.
  - Phase 2A construction update → Estimated start of construction: 4/2025
  - Phase 3 and 4 workflow meetings ongoing

### 2. Laboratory Statistics

	February 2025	2025 YTD
Total Outpatient Volume	4021	8565
Main Laboratory	1169	2506
Mc Cray Lab	805	1755
Sunnyslope Lab	383	795
SJB and 4 <sup>th</sup> Street	78	160
ER and ASC	1586	3349
Total Inpatient Volume	173	346

### Diagnostic Imaging

1. Service/Outreach
  - Final stages on preparation for new service offering- low dose lung cancer screening
2. Quality Assurance/Performance Improvement Activities
  - Preparation for multi-modality trailer pad proposal
  - TJC tracers on different modalities



**Hazel Hawkins**  
MEMORIAL HOSPITAL

3. Diagnostic Imaging Statistics

	<b>February 2025</b>	<b>2025 YTD</b>
<b>Radiology</b>	<b>1818</b>	<b>3700</b>
<b>Mammography</b>	<b>652</b>	<b>1340</b>
<b>CT</b>	<b>887</b>	<b>1833</b>
<b>MRI</b>	<b>157</b>	<b>356</b>
<b>Echocardiography</b>	<b>102</b>	<b>212</b>
<b>Ultrasound</b>	<b>682</b>	<b>1482</b>



TO: San Benito Health Care District Board of Directors  
 FROM: Liz Sparling, Foundation Director  
 DATE: March 2025  
 RE: Foundation Report

The Hazel Hawkins Hospital Foundation Board of Trustees met on March 13 and had two presentations. Dr. Michael Bogey presented the need for a new ultrasound for the ER. Kyle Sharp with Edward Jones Investments presented options for our CD which comes due at the end of March.

<b>Financial Report</b>	<b>February</b>
1. Income	\$ 9,850.31
2. Expenses	\$ 0
3. New Donors	4
4. Total Donations	181

**Allocations:**

- \$80,000 for a new Ultrasound for the Emergency Department from INVEST in the Future of San Benito County Healthcare Campaign Funds

**Directors Report:**

- We will start gearing up for our All for 1 Employee Giving Campaign that will run the month of April. Letters have been mailed to all HHMH Employees. Last year \$57,714 was pledged and our goal is to exceed that this year. Funds from the All for 1 Employee Giving Campaign were allocated to many different Hospital Departments. Employee contributions do make a difference! All for 1 funds contributed to: Nurse’s station and patient room chairs in the ER, provider chairs and facility improvements to the Barragan Diabetes Center, chairs for patient’s in Med/Surg, upper body exerciser and treadmill for Physical Therapy, scholarships to students in the medical field, endoscopy scope and cameras for the Ambulatory Surgery Center and Baby Friendly program fees for the OB Department.
- Our accountant has all our tax information and they are being prepared.
- Have submitted our non-profit documents with the State for raffles and raffle reporting
- Dr. LaCorte put an order in for more blankets and items to make the “heartbeat in a bottle” for the End of Life Services Program she is championing at HHMH. The program is very well received by patients, family members, friends and HHMH staff.
- Our employees at HHMH are going through a workplace violence training. Learned how to get out of violent situations that are occurring more often in healthcare settings.

**Dinner Dance Report:**

- Our event this year will be at Leal Vineyards on November 8, 2025. Save the Date!

**Fundraising Committee:**

- As of March 17, 2025, there have been 1740 total donations to our current campaign, “Invest in the Future of San Benito County Healthcare, We Deserve It” totaling \$1,151,250.32 plus the \$100K pledge from the Community Foundation.

**Scholarship Committee:**

- Our 2025 Foundation Scholarship Applications are posted on our website and available at the Hospital front desk. They are for graduating seniors and students in higher education programs in the medical field. Applications are due April 1<sup>st</sup>.



**MARKETING**

**• Social Media Posts**



We recently celebrated Health Care Human Resources Week. We love our HR staff along with the skills and professionalism they bring to our organization. Thanks for all you do!

Photo - Tue, Mar 18

Views	Reach	Interactions
0	0	0



**COMPREHENSIVE ORTHOPEDIC SERVICES IN HOLLISTER** You don't have to leave town for Orthopedic Specialty Services or Sports Injuries, our team at Hollister Orthopedic Specialty Center offers comprehensive orthopedic services. Let your primary care provider know that you want to receive services locally. You can find a physician on ou...

Photo - Tue, Mar 18

Views	Reach	Interactions
1,046	521	14



Join our community partners at San Benito Public Health for their Vaccine Clinic. This is an opportunity to get you and your family up-to-date on your vaccines. Wednesday, March 12 3:00 - 5:00 pm Calaveras School

Photo - Mon, Mar 10

Views	Reach	Interactions
353	203	1



**STATEMENT REGARDING THWARTED RANSOMWARE HOAX** Click here to view press statement: <https://www.hazelhawkins.com/images/HMH-Media-Statement-HMH-Thwarts-Ransomware-Hoax.pdf> Hazel Hawkins Memorial Hospital (HHMH) recently received correspondence implying that an outside organization had...

Link - Thu, Mar 6

Views	Reach	Interactions
495	277	1



Join our community partners at San Benito Public Health for their Vaccine Clinic. This is an opportunity to get you and your family up-to-date on your vaccines. Wednesday, March 12 3:00 - 5:00 pm Calaveras School

Photo - Wed, Mar 5

Views	Reach	Interactions
531	309	5



Today we were pleased to collaborate with our First Responder partners to host Sunrise EMS SimLab from HCA Healthcare's Sunrise Health all the way from Las Vegas, NV. The mobile classroom is equipped with the latest education technology including training mannequins that provide lifelike practice for real-time scenarios. Apollo, their adult ma...

Photo - Mon, Mar 3

Views	Reach	Interactions
1,575	794	33



Join our community partners at San Benito Public Health for their Vaccine Clinic. This is an opportunity to get you and your family up-to-date on your vaccines. Wednesday, March 12 3:00 - 5:00 pm Calaveras School

Photo - Thu, Feb 27

Views	Reach	Interactions
750	400	7



We are pleased to be able to share this valuable information from a community partner for this new Stroke Survivor support group. Their next meeting will take place on Tuesday, February 18 at 10:00 am. For more information please call: 831-801-9095 or 831-524-2144.

Photo - Mon, Feb 17

Views	Reach	Interactions
601	307	7



**President's Day Holiday Hours Monday, February 17, 2025** The Emergency Department is ALWAYS Open 24/7 Main Hospital Outpatient Lab & Radiology - 8 am - 2 pm - McCray Lab - Closed - Sunnyslope Lab - Closed - All Community Health Centers - Closed - Patient Payment Center - Closed For more information, please call (831) 637-5711

Photo - Mon, Feb 17

Views	Reach	Interactions
461	279	0



**President's Day Holiday Hours Monday, February 17, 2025** The Emergency Department is ALWAYS Open 24/7 Main Hospital Outpatient Lab & Radiology - 8 am - 2 pm - McCray Lab - Closed - Sunnyslope Lab - Closed - All Community Health Centers - Closed - Patient Payment Center - Closed For more information, please call (831) 637-5711

Photo - Sun, Feb 16

Views	Reach	Interactions
376	229	0

## EMPLOYEE ENGAGEMENT

### Employees:

- Hazel's Headlines
- St. Patrick's Day Casual for a Cause
- Perfect Blend Coffee Cart

## VOLUNTEER/AUXILIARY ENGAGEMENT

- Created Hazel's Thrift Shop page on HHH website
- Creating Auxiliary newsletter
- Promoting Auxiliary Scholarship applications

## PHYSICIAN PROMOTION

- Creating Doctor's Day ad for the FreeLance and Mission Village Voice
- Creating a video to celebrate Doctor's Day
- Highlighting Orthopedic Surgeons on social media and with direct emails to physicians.

## MEDIA

### Public:

Working with Marcus Young from townKRYER PR agency on proactive PR.

- Press Releases:
  - Media Statement—HHMH Thwarts Ransomware Hoax

## COMMUNITY

- San Juan Bautista Clinic staff provided blood pressure checks for ribbon cutting event for SJB Senior Center

# Project Dashboard - March Board

Project Name	Purpose	Start Date	Go Live	Duration	Status	Priority	HCAI	Key Stakeholder	Role	Update
Inovalon	Nurse Scheduling Software	12/16/2024	5/1/2025	146	In Progress	Low		Jac Fernandez	Senior Director of Acute Care Services	Staff training phase 1 completed. Mock scheduling underway - goal is to build simultaneously with house wide staff education. HR sent union notification of workflow change pending finalization of users with email verification and file will be pushed into production.
Trakstar	Employee Performance Reviews	9/3/2024	3/21/2025	199	In Progress	High		Drew Tartala	Director Human Resources	
HUGS/Securitas	Infant Security	4/12/2024	TBD		In Progress	High		Jac Fernandez	Senior Director of Acute Care Services	Technical meeting scheduled for 3/14. Pending Comtel drawings of locations for cable to be pulled and potential power added due to change in SOW. (Could require resubmission to HCAI)
BD Installation	New Pyxis Machines	12/4/2024	9/19/2025	289	In Progress	Medium		Naveen Ravela	Pharmacy Director	Treanor completed site walk and scope. Pending approval
BD Pharmacy Keeper	IV Compounding Verification	11/14/2024	TBD		In Progress	High		Naveen Ravela	Pharmacy Director	Project kickoff call scheduled 3/18
ABBOTT Lab Rebuild	Lab Phase 1: Alinity Analyzers		TBD		In Progress	High		Bernadette Enderez	Lab/Radiology Director	2/28 IOR completed sign off for 2 OSP stickers and also added 2 additional required stickers on the split system that were required for final location approval. Lab team completing validation. (Unit's will not go live in temporary space - will be moved to LAB phase 2 location)

# Project Dashboard - March Board

Bepez	Café POS / Swipe to Pay for Meals	9/3/2024	4/30/2025	239	In Progress	Medium	Jessica Kopeczy	Certified Dietary Manager	Back office licenses have been received and made accessible to the team. IT has helped with data validation and import of users to the system > next steps are testing transactions and having internal review of workflow process + security measures
Hicity	ICU/Medsurg remote telemetry	9/5/2024	3/11/2025	187	Completed	High	Jac Fernandez	Senior Director of Acute Care Services	GoLive occurred 3/11. PMO will work with Nursing for project closeout documentation
Right Hear	ADA Accessibility for Bluetooth Campus Navigation	10/28/2024	4/30/2025	184	In Progress	Low	Suzie Mays	VP Information & Strategic Services	Marketing meeting scheduled, will include staff education. Will put up additional signage through facility
Stryker OR Rebuild	Updating OR per OSHPD Requirements	11/20/2024	12/31/2025	406	Not Started	High	Mendi Suber-Ventura	Director of Surgical Services	Additional meeting scheduled with Stryker for full quote of the remodel
Wi-Fi Upgrade	Wireless Infrastructure Upgrade	9/16/2024	4/30/2025	226	In Progress	High	Solomon Mercado	Director of Inf Tech	Main hospital has been completed, currently working on support services building and will end with SNF and clinic
Boiler Replacement	Replace Existing Boiler to Enhance Efficiency & Reliability	1/10/2024	TBD		In Progress	High	Doug Mays	Senior Director Support Services	HCAI approved ACD001 - Pending IOR review with contractor to finalize
Air Handler Unit (AHU) S-2	Emergency Interim Install	11/18/2024	TBD		In Progress	High	Doug Mays	Senior Director Support Services	There are three spaces that are not meeting current code per the air balance test. HHMH to hire a TAB contractor to balance these rooms

# Project Dashboard - March Board

Sterilizer/Autoclave Installation	Replace Aging Equipment	4/25/2024	11/1/2025	555	In Progress	High	Mendi Suber-Ventura	Director of Surgical Services	Proposal received from Treanor to re-scope the project to allow for install of the new unit purchased.
Lab Remodel	Remodel of LAB: Phase 2	6/3/2024	9/15/2025	469	Ongoing	High	Bernadette Enderez	Lab/Radiology Director	Official award letter sent to the CORE Group. Pending Legal review of the contract before starting construction.
2nd Floor SS8 Doors Installation	Engineering to complete permit process & installation	12/23/2024	TBD		In Progress	Medium	Doug Mays	Senior Director Support Services	Treanor updating drawings per request from City of Hollister to accept.
Seismic	Upgrade to Meet HCAI Seismic Compliance & Safety Standards	TBD	TBD		Ongoing	High	Doug Mays	Senior Director Support Services	Meeting with HCAI for grant on 2/5. Pending Treanor details from work completed related to seismic
MRI Upgrade	Proposal submitted	TBD	TBD		On Hold	Low	Bernadette Enderez	Lab/Radiology Director	Proposal submitted
*Radiology Masterplan	Assessment of equipment and remodel	11/1/2025	TBD		On Hold	High	Bernadette Enderez	Lab/Radiology Director	Meeting to be scheduled to discuss requirements
*Imaging Trailer Pad Make Ready	Treanor to help when MIP starts	TBD	TBD		On Hold	Medium	Bernadette Enderez	Lab/Radiology Director	Proposal Submitted, Treanor to provide recommendation.
*Verkoda	Security / SSO + Door Access	3/11/2025	TBD		In Progress	High	Jorge Ramirez	Director of Emerg Mgmt & Security	Project kickoff call to be scheduled after internal stakeholder and project initiation documentation for the new process has been completed. Equipment has been shipped.
Soleran	Replace current engineering ticketing system	1/1/2025	TBD		In Progress	Medium	Doug Mays	Senior Director Support Services	Data has been collected and provided to Soleran. Next stage is data transition into software.
Med Surg Double Doors	Replace an existing fire rated corridor double door by the cafeteria in the main hospital	1/29/2025	TBD		In Progress	Medium	Doug Mays	Senior Director Support Services	Treanor proposal received, GC selected, pending quote (OSH/PD/HCAI required)

# Project Dashboard - March Board

ED Helipad	system is an AFF system and is no longer allowed in California and has been required to be phased out due to being a hazardous chemical.	1/14/2025					Doug Mays	Senior Director Support Services	Waiting on the vendors proposal before making any type of decisions
Nurse Call System	Replace	9/10/2024	TBD			In Progress	Jac Fernandez	Senior Director of Acute Care Services	Data is being collected to provide to vendor, who will put together a quote for upgrade of all nurse call stations.
<b>Totals</b>									

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

TASK STATUS %	
STATUS	COUNT
Not Started	1
In Progress	18
Overdue	0
On Hold	3
Ongoing	2
<b>TOTAL</b>	<b>24</b>
	<b>100%</b>

  

PROJECT PRIORITY %	
PRIORITY	COUNT
High	15
Medium	6
Low	3
<b>TOTAL</b>	<b>24</b>
	<b>100%</b>

  

PENDING ITEMS	
Decisions	
Accelerate	
Change Requests	



## Memorandum

To: Board of Directors

From: Suzie Mays  
Vice President, Information & Strategic Services

Date: March 13, 2025

Re: Policies for Approval

Please find below a list of policies with 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
Outbreak Investigation	Added regulatory reporting requirements for SNF and GACH. Updated key terms in alignment with APIC test on Outbreak Investigation.
Use of Portable Fans	Updated references and removed closing curtain as option for use of a fan in rooms other than single occupancy. Added requirement for approval by Infection Prevention staff when using portable fan outside of patient room.
Enhanced Barrier Precautions SNF	New policy.
Infection Control and Prevention Policy SNF	New policy.
COVID-19 Prevention and Management SNF	New policy.



## Enhanced Barrier Precautions (EBP)

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### Approvals

- Committee Approval: Infection Control approved on 2/27/2025
  - Committee Approval: Policy & Procedure Committee approved on 3/13/2025
  - Signature: Shonna Avant signed on 2/14/2025, 7:30:14 PM
- 

### Revision Insight

Document ID:	12295
Revision Number:	0
Owner:	Jaylee Davison,
Revision Official Date:	No revision official date

Revision Note:  
Revisions completed from Policy meeting. Ready for next step.

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## Policy : Enhanced Barrier Precautions (EBP)

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### PURPOSE

To prevent transmission of multidrug-resistant organisms (MDROs) and communicable diseases through implementation of Enhanced Barrier Precautions while maintaining resident quality of life in accordance with CDC, CMS, and CDPH Title 22 guidelines.

### POLICY

Hazel Hawkins Memorial Hospital D/P SNF implements Enhanced Barrier Precautions using a resident-centered approach that prioritizes both infection prevention and quality of life. The facility's designated Infection Preventionist oversees this program in collaboration with the interdisciplinary team.

### DEFINITIONS

1. **Enhanced Barrier Precautions (EBP):** The use of gowns and gloves during high-contact resident care activities for residents with specific risk factors.
2. **High-Contact Resident Care Activities:** Care tasks requiring physical contact with the resident or their immediate environment, including:
  - Personal hygiene
  - Device care
  - Wound care/Dressing changes
  - Transfers involving close contact (including therapy)
  - Linen changes
  - Toileting assistance
3. **Multidrug-Resistant Organisms (MDROs):** Bacteria resistant to multiple antibiotics, including but not limited to:
  - Methicillin-resistant Staphylococcus aureus (MRSA)
  - Vancomycin-Resistant Enterococci (VRE)
  - Extended-Spectrum Beta-Lactamase (ESBL)-producing organisms
  - Carbapenem-Resistant Enterobacterales (CRE)

- Candida Auirs (C. Auris)
- Clostridium difficile (CDIFF)

## PROCEDURE

### A. EBP Implementation

#### 1. Initiation Criteria

- Screen for MDRO(s) infection or colonization
- Presence of chronic open wounds (pressure injury, diabetic, unhealed surgical)
- Indwelling devices (central lines, urinary catheters, feeding tubes)
- During outbreak investigation
- As directed by Infection Preventionist

#### 2. Resident Placement and Activities

- Private rooms not required, cohort based on initial evaluation
- No restriction to group activities
- Ensure wound / device coverage during activities as appropriate
- Hand hygiene before leaving room

#### 3. Required Practices and PPE

- Hand hygiene before and after resident contact
- Gown and glove use during high-contact care
- Proper PPE donning/doffing sequence
- Environmental cleaning after care activities
- Regular disinfection of shared equipment
- Terminal cleaning upon discharge

#### 4. Documentation Requirements

- Initial assessment
- Daily monitoring of conditions requiring EBP
- Weekly evaluations
- Discontinuation criteria met

#### 5. Duration of Precautions

- Continue for duration of stay or until:
  - Wound healing is complete
  - Indwelling device removed

iii. Infection Preventionist and interdisciplinary team document resolution

## **B. Infection Prevention Program**

### **1. Infection Preventionist Responsibilities**

- Daily surveillance rounds
- Staff education
- Compliance monitoring
- Quality assurance activities

### **2. Staff Training**

- Initial (upon hire) and ongoing training on EBP procedures
- Annual competency validation
- Just-in-time training
- Outbreak response training
- Visitor Education on hand hygiene and PPE

## **C. Quality Monitoring**

### **1. Compliance Audits**

- Hand hygiene observations
- PPE use monitoring
- Environmental cleaning checks
- Documentation reviews

### **2. Performance Improvement**

- Monthly data analysis
- Action plan development
- Staff feedback
- Outcome tracking

## **D. Communication**

### **1. Internal Reporting**

- Shift-to-shift handoff
- Department notifications
- Committee updates
- Staff alerts

## 2. External Reporting

- San Benito County Health Department notifications & CDPH reporting as required by law
  - Family/resident communication
- 

## REFERENCES

1. Centers for Disease Control (CDC) Implementation of Enhanced Barrier Precautions. Enhanced Barrier Precautions in Skilled Nursing Facilities. Available at [www.cdc.gov/infection-control/media/pdfs/Webinar-EBPinNH-Nov2022-Slides-508.pdf](http://www.cdc.gov/infection-control/media/pdfs/Webinar-EBPinNH-Nov2022-Slides-508.pdf). Accessed February 3, 2025.
2. Centers for Medicare & Medicaid Services (CMS) Requirements §483.80 Infection Control. Title 42 / Chapter IV / Part 483 / Subpart B / §483.80. Available at [www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-483/subpart-B/section-483.80](http://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-483/subpart-B/section-483.80). Accessed February 3, 2025.
3. California Department of Health (CDPH) Title 22 (CCR )sections §72523,72321, and 72515. All Facility Letter (AFL) Title 42 Code of Federal Regulations (CFR) 483.80
4. Centers for Medicare & Medicaid Services (CMS). Center for Clinical Standards and Quality/Quality, Safety, & Oversight. Ref. QSO-24-08-NH from Director, Quality, Safety & Oversight Group (QSOG). Enhanced Barrier Precautions in Nursing Homes. Available at [www.cms.gov/files/document/qso-24-08-nh.pdf](http://www.cms.gov/files/document/qso-24-08-nh.pdf) Accessed February 3, 2025.

## AFFECTED SNF DEPARTMENTS

1. Nursing Services
2. Environmental Services
3. Rehabilitation Services
4. Dietary Services
5. Social Services
6. Medical Staff
7. Administration
8. Pharmacy

<b>Document ID</b>	12295	<b>Document Status</b>	Pending Committee Approval
<b>Department</b>	SNF	<b>Department Director</b>	Davison, Jaylee
<b>Document Owner</b>	Davison, Jaylee	<b>Next Review Date</b>	

**Attachments:**  
**(REFERENCED BY THIS DOCUMENT)**

**Other Documents:**  
**(WHICH REFERENCE THIS DOCUMENT)**

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## **Infection Control and Prevention Policy (SNF)**

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  - Signature: Shonna Avant signed on 2/14/2025, 7:29:36 PM
- 

### **Revision Insight**

Document ID:	12294
Revision Number:	0
Owner:	Jaylee Davison,
Revision Official Date:	No revision official date

Revision Note:  
New policy - corrections updated from policy meeting. Ready for next steps.

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## Policy : Infection Control and Prevention Policy (SNF)

---

### PURPOSE

To establish and maintain an effective infection prevention and control program that provides a safe, sanitary, and comfortable environment to help prevent the development and transmission of communicable diseases and infections.

### POLICY

Hazel Hawkins Memorial Hospital d/p SNF shall implement comprehensive infection prevention and control practices in accordance with professional standards and regulatory requirements to prevent, identify, report, investigate, and control infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services within the facility.

### DEFINITIONS

- **Standard Precautions:** Basic infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status
- **Transmission-Based Precautions:** Additional precautions based on the suspected or confirmed presence of an infectious agent
- **Multi-Drug Resistant Organism (MDRO):** Microorganisms resistant to multiple classes of antimicrobial agents
- **Personal Protective Equipment (PPE):** Specialized clothing or equipment worn for protection against infectious materials
- **Surveillance:** Systematic collection, analysis, and interpretation of health data
- **Healthcare-Associated Infection (HAI):** Infections that develop after admission (>72 hours), not present or incubating at admission
- **Outbreak:** Occurrence of cases of disease in excess, per CDPH and CMS guidelines

### PROCEDURE

#### A. Administrative Responsibilities

1. Infection Preventionist
  - Designate a qualified Infection Preventionist (IP)
  - IP must have completed specialized training in infection prevention and control
  - Minimum of 40 hours per week dedicated to infection prevention activities
  - Regular reporting to QAPI committee

## 2. Program Management

- Develop and maintain written infection control policies
- Review and update policies annually and as needed
- Conduct regular risk assessments
- Maintain surveillance program

## **B. Prevention and Control**

### 1. Standard Precautions

#### a. Hand Hygiene

- Follow CDC guidelines on hand hygiene:

- Hand washing is necessary in, but not limited to, the following situations:

- i. Before and after having direct patient care.
- ii. Between direct patient care contacts with different patients.
- iii. Before and after using the bathroom, blowing your nose, covering a sneeze or cough, etc.
- iv. Before and after eating, serving, or preparing food.
- v. Before and after preparing and administering medications.
- vi. Before donning gloves and after removing gloves.
- vii. Before and after handling patient body fluids, excretions or mucus membranes. i.e., urine, feces, sputum, blood.
- viii. Before and after handling invasive devices, i.e., peripheral vascular catheters (IV catheters), Foley catheters or other invasive devices that do not require a surgical procedure.
- ix. Before and after performing wound care, dressing changes or contact with any non-intact skin.
- x. Before and after contact with a patient's intact skin (i.e., when taking a pulse, blood pressure, or lifting a patient).
- xi. When hands are visibly dirty, contaminated with organic material or are visibly soiled with blood or other body fluids, wash hands with either a non-antimicrobial soap and water or an antimicrobial soap and water.
- xii. If hands are not visibly soiled, use an alcohol-based hand rub for routinely decontaminating hands in all other clinical situations (IA). Alternatively, wash hands with an antimicrobial soap and water in all clinical situations.
- xiii. Hands must be washed with soap and water:



- a. When caring for patients who have diarrhea associated with Clostridium difficile, as the alcohol based hand sanitizers are not effective to remove spores.
- b. Before the performance of invasive procedures or the placement of intravascular catheters, indwelling urinary catheters, or other invasive devices.

- Perform hand hygiene for minimum 20 seconds

## 2. Personal Protective Equipment

- Select appropriate PPE based on risk assessment:
  - Gloves: For potential contact with blood/body fluids
  - Gowns: For procedures likely to generate splashes
  - Masks: For potential exposure to respiratory secretions
  - Eye Protection: When splashes/sprays anticipated
- Don and doff PPE in correct sequence
- Dispose of PPE properly

## 3. Identification and Screening

- New and returning admissions are screened for infection(s) and/or colonization(s), and H&P review
- Isolation and room placement based on residents screen and individual needs
- Resident infection line listing for tracking and trend identification

## 4. Transmission-Based Precautions

- Contact Precautions
  - Implement for:
    - Multi-Drug Resistant Organisms (MDROs)
    - Clostridium difficile
    - Draining wounds not contained by dressings
  - Use dedicated equipment
  - Enhanced environmental cleaning

## 5. Droplet Precautions

- Implement for:
  - Influenza
  - Pertussis
  - Mumps
- Mask within 6 feet of resident
- Private room when possible

## 6. Airborne Precautions

- Implement for:
  - Tuberculosis
  - Measles
  - Chickenpox
- Negative pressure room required
- N95 respirator or higher protection

### **C. Blood and Body Fluid Spill Management**

#### **1. Response Procedure**

- Don appropriate PPE (gloves, gown, mask, eye protection)
- Contain spill using absorbent materials
- Remove visible organic matter with disposable towels
- Apply EPA-registered disinfectant with appropriate contact time:
  - Small spills: Standard disinfectant (1-minute contact)
  - Large spills: 1:10 bleach solution (10-minute contact)
- Clean from outer edges inward
- Dispose of materials in biohazard containers
- Document incident in facility log

#### **2. Spill Kit Requirements**

- Maintain readily accessible spill kits in designated locations:
  - Utility Room
  - Crash Cart
  - Treatment Cart
- Standard contents:
  - Absorbent materials
  - EPA-registered disinfectant
  - PPE (gloves, gowns, masks, eye protection)
  - Disposal bags
  - Instructions for use
- Monthly spill kit checks and restocking

### **D. Linen Management**

#### **1. Soiled Linen Handling**

- Don appropriate PPE (gloves, gown if splashing likely)
- Hold away from body and uniform
- Do not shake or sort in resident areas
- Place directly in designated bags/containers:

- Regular soiled - clear bags
    - Contaminated/isolation - blue bags
  - Use fluid-resistant containers for wet linen
  - Transport in covered carts
  - Clean linen carts weekly and when visibly soiled
2. Linen Processing
- Handle all soiled linen as potentially infectious
  - Maintain separation of clean and soiled linen
  - Store clean linen:
    - In clean, covered area
    - 6 inches from floor
    - 18 inches from ceiling
  - Handle isolation linen last
  - Clean and disinfect hampers daily

## **E. Surveillance and Reporting**

1. Active Surveillance
- Monitor daily:
    - New infections
    - Temperature logs
    - Antibiotic usage
    - Laboratory reports
    - Adherence monitoring
  - Track infection trends using resident infection line listing
  - Calculate infection rates
2. Mandatory Reporting
- Report to public health authorities:
    - Reportable diseases
    - Outbreaks
    - Unusual occurrences
  - Submit required reports within timeframes

## **F. Environmental Cleaning and Disinfection**

1. Routine Cleaning
- Use EPA-registered disinfectants
  - Follow manufacturer's instructions
  - Clean high-touch surfaces multiple times daily

2. Terminal Cleaning
  - Complete after discharge/transfer
  - Clean all surfaces thoroughly
  - Change privacy curtains

## **G. Employee Health**

1. Health Screening
  - Pre-employment screening
  - Tuberculosis testing, Tri-Annual and status post exposure
  - Immunization review and required titers
  - Work restrictions when ill
2. Exposure Management
  - Post-exposure protocols per employee health
  - Documentation of event
  - Follow-up procedures as indicated

## **H. Education and Training**

1. Initial Training
  - Standard precautions
  - Transmission-based precautions
  - Hand hygiene
  - PPE use
  - Reporting requirements
2. Ongoing Education
  - Annual updates
  - New hire orientation
  - On the spot training
  - Competency validation

---

## **REFERENCES**

1. Centers for Medicare & Medicaid Services (CMS) 42 CFR §483.80: "Infection Control". Available at <https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-483/subpart-B/section-483.80> Accessed February 3, 2025.
2. California Department of Public Health:
  - Title 22, Division 5, Chapter 3, Article 3, §72321: "Infection Control". Available at <https://www.law.cornell.edu/regulations/california/22-CCR-72321> Accessed February 3, 2025.

- AFL 20-84: "Infection Control Recommendations". Available at <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-84.aspx> Accessed February 3, 2025.
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  - "Guidelines for Environmental Infection Control in Health-Care Facilities". Available at <https://www.cdc.gov/infection-control/media/pdfs/Guideline-Environmental-H.pdf> Accessed February 3,2025.
  - "Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents". Available at <https://www.cdc.gov/infection-control/media/pdfs/Guideline-Isolation-H.pdf> Accessed February 3, 2025.
4. OSHA:
- 29 CFR §1910.1030: "Bloodborne Pathogens Standard". Available at <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030> Accessed February 3, 2025.
  - 29 CFR §1910.134: "Respiratory Protection". Available at <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134> Accessed February 3, 2025.
5. APIC Implementation Guides Available at <https://apic.org/Professional-Practice/Implementation-guides/> Accessed February 3, 2025.
6. CDC Guidelines for Healthcare Personnel Infection Prevention Recommendations. Available at <https://www.cdc.gov/infection-control/media/pdfs/Guideline-Infection-Control-HCP-Recommendations-Only-H.pdf> Accessed February 3,2025.
7. AFFECTED SNF DEPARTMENTS
- Administration
  - Nursing Services
  - Environmental Services
  - Dietary Services
  - Rehabilitation Services
  - Activities Department
  - Social Services
  - Medical Staff
  - All other departments and personnel providing services within the facility

<b>Document ID</b>	12294	<b>Document Status</b>	Pending Committee Approval
<b>Department</b>	SNF	<b>Department Director</b>	Davison, Jaylee
<b>Document Owner</b>	Davison, Jaylee	<b>Next Review Date</b>	02/05/2026

**Attachments:**  
**(REFERENCED BY THIS DOCUMENT)**

**Other Documents:**  
**(WHICH REFERENCE THIS DOCUMENT)**

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<http://hzh-iis.hazelhawkins.com/?returnto=%2Fcgi%2Fdoc-gw.pl%3Fref%3Dhmmh%3A12294%240>.



## COVID-19 Prevention and Management (SNF)

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### Approvals

- Committee Approval: Infection Control approved on 3/4/2025
  - Committee Approval: Policy & Procedure Committee approved on 3/13/2025
  - Signature: Shonna Avant signed on 2/14/2025, 7:29:51 PM
- 

### Revision Insight

Document ID:	12276
Revision Number:	0
Owner:	Jaylee Davison,
Revision Official Date:	No revision official date

Revision Note:  
New Policy - revisions completed from policy meeting. Ready for next step.

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## Policy : COVID-19 Prevention and Management (SNF)

---

### PURPOSE

To establish evidence-based protocols for the prevention, early detection, containment, and management of COVID-19 in the skilled nursing facility to protect residents, staff, and visitors while ensuring compliance with regulatory requirements.

### POLICY

Hazel Hawkins Memorial Hospital d/p SNF shall implement comprehensive measures to prevent and manage COVID-19 transmission within the facility, following current guidelines from CMS, CDC, CDPH, and San Benito County Health Department. This policy ensures a safe environment while maintaining quality care for residents.

### DEFINITIONS

- **COVID-19:** Disease caused by the SARS-CoV-2 virus
- **PPE:** Personal Protective Equipment
- **Transmission-Based Precautions:** Measures taken in addition to standard precautions for patients with known or suspected infectious conditions
- **Close Contact:** Being within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period
- **Outbreak:** One or more facility-acquired COVID-19 cases in residents or staff
- **Up-to-date Vaccination:** Having received all recommended COVID-19 vaccines, including boosters when eligible

### PROCEDURE

#### A. Surveillance Screening & Monitoring During Outbreak

1. Entry Screening
  - Screen all persons entering the facility for:
    - Temperature checks ( $\geq 100.0^{\circ}\text{F}$ )
    - COVID-19 symptoms



- Recent exposure to COVID-19
  - Travel history as relevant
  - COVID-19 Signs and Symptoms Signage Posted at high traffic areas, recommending no visits if symptoms present
  - Maintain screening logs for at least 12 months
2. Resident Monitoring
    - Conduct daily symptom screening and temperature checks
    - Document findings in medical record
    - Immediately isolate and test symptomatic residents

## **B. Testing Protocols**

1. Routine Testing
  - Upon Admission (day 1, day 3, and day 5)
  - Any staff or resident with signs or symptoms
  - Document all test results
  - Follow current CDC and CDPH guidelines for testing and reporting
2. Response Testing
  - Test all symptomatic residents and staff upon identification of a positive case
  - Conduct contact tracing
  - Implement serial testing as required by public health

## **C. Infection Prevention Measures**

1. Personal Protective Equipment
  - Ensure adequate PPE supply
  - Required PPE based on transmission risk:
    - N95 respirators for confirmed/suspected cases
    - Surgical masks for routine care
    - Eye protection as indicated
  - Conduct regular PPE competency training
2. Environmental Cleaning
  - Use EPA-registered disinfectants
  - Increase cleaning frequency of high-touch surfaces
  - Terminal cleaning for COVID-19 rooms

## **D. Visitation**

1. Follow current CMS and CDPH guidelines for:
  - Indoor/outdoor visitation
  - Compassionate care visits
  - Essential caregivers
  - Offer alternative methods of visiting
2. Maintain visitor logs for contact tracing
3. Educate visitors on infection prevention

## **E. Outbreak Management**

1. Immediate Actions
  - Implement outbreak testing protocol per San Benito Public Health
  - Implement outbreak line listing for reporting and tracking
  - Notify local health department and CDPH within 24 hours of outbreak status
  - Enhance monitoring and restrictions
  - Increase environmental cleaning
2. Communication
  - Notify residents, families, and staff
  - Provide regular updates
  - Document all communications
  - Updating and notifying local health department and CDPH until outbreak cleared

## **F. Vaccination**

1. Maintain current records of resident and staff vaccination status
2. Offer COVID-19 vaccines to residents and staff
3. Educate about vaccine benefits and safety
4. Document vaccine administration and declinations

## **G. Education and Training**

1. Provide regular updates on:
  - COVID-19 prevention
  - PPE use
  - Hand hygiene
  - Current COVID-19 guidelines

2. Document all training sessions

## H. Documentation Requirements

1. Maintain records of:
  - Screening logs
  - Testing results
  - Vaccination status
  - Training attendance
  - Outbreak response measures
2. Ensure accessibility for survey teams

---

## REFERENCES

- Centers for Medicare & Medicaid Services (CMS) QSO Memos. Ref: QSO-20-39-NH Revised 05/08/2023. Available at <https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf> Accessed February 3, 2025.
- Centers for Medicare & Medicaid Services (CMS) QSO Memos. Ref: QSO-25-11-NH. Available at <https://www.cms.gov/files/document/qso-25-11-nh.pdf> Accessed February 3, 2025.
- California Department of Health (CDPH). Title 42 / Chapter IV / § 483.80 Infection Control. Available at <https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-483/subpart-B/section-483.80> Accessed February 3, 2025.
- CDPH All Facilities Letters (AFLs): AFL 23-12 Coronavirus Disease 2019 (COVID-19) Recommendations for PPE, Resident Placement/Movement, and Staffing in Skilled Nursing Facilities. Available at <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-23-12.aspx> Accessed February 3, 2025.
- CDC Guidelines for Healthcare Facilities and Infection Control Guidance: SARS-CoV-2. Available at <https://www.cdc.gov/covid/hcp/infection-control/index.html> Accessed February 3, 2025.
- San Benito County Health Department Guidelines. Available at <https://hhsa.cosb.us/communicable-diseases/> Accessed February 3, 2025.

## AFFECTED SNF DEPARTMENTS

- Nursing Services
- Environmental Services

- Dietary Services
- Rehabilitation Services
- Social Services
- Activities
- Administration
- Medical Staff
- All other departments and personnel entering the facility

*Note: This policy shall be reviewed annually and updated as needed based on current regulatory requirements and evidence-based practices.*

<b>Document ID</b>	12276	<b>Document Status</b>	Pending Committee Approval
<b>Department</b>	SNF	<b>Department Director</b>	Davison, Jaylee
<b>Document Owner</b>	Davison, Jaylee	<b>Next Review Date</b>	02/05/2026

**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%3A12276%240>.

[Cybersecurity](#)

# Ransom demand at California hospital turns out to be a hoax

BECKER'S  
**HEALTH IT**

Subscribe



By: **Naomi Diaz** 2 days ago

Share

Hollister, Calif.-based Hazel Hawkins Memorial Hospital was [targeted](#) by a social engineering hoax.

Hazel Hawkins Memorial Hospital received information that an outside organization had gained access to its information systems and was demanding a ransom to avoid leaking protected health information, according to a March 6 breach notification from the hospital.

After working with local, state and federal law enforcement agencies as well as a hospital cybersecurity partner, Hazel Hawkins Memorial Hospital determined that the emailed ransom notes were part of a social engineering hoax and that there was no evidence of a ransomware attack.

There was also no evidence that the hospital's information systems were compromised.

The incident comes after the American Hospital Association and the FBI [received](#) multiple reports of hospitals and health systems receiving data extortion letters sent through the U.S. Postal Service and originating domestically.

**More In:**

*Becker's Hospital Review*

**Hospitals among victims of alleged ransomware developer extradited to US**

**38 passwords that take 1 second to crack**

**Yale New Haven Health confronts 'cybersecurity incident'**

Advertisement

## Next Up in Cybersecurity

### Cybersecurity

**Cyberattacks spark credit downgrades at 2 systems**

Cyberattacks can cripple hospitals of any size, but they're particularly damaging to smaller hospitals with fewer resources to recover, according...



By: **Laura Dyrda** 4 hours ago

### Cybersecurity

**Hackers use ChatGPT to target healthcare**

Health systems should be on the lookout for a ChatGPT vulnerability hackers are using to target industries including healthcare, the...



By: **Giles Bruce** yesterday

## HUMAN RESOURCES DASHBOARD 2025

DEPARTMENTAL METRICS	January	February	YTD(Jan)
# Employees	704	705	705
# New Hires	13	5	18
# Terminations	9	6	15
Overall Turnover	1.3%	0.9%	2.13%
Nursing Turnover	0.73%	1.45%	2.18%

Terms By Union	January	February	YTD(Jan)
The California Nurses Association (CNA)	1	2	3
National Union of Healthcare Workers (NUHW)	5	3	8
California License Vocational Nurses (CLVN)	0	0	0
Engineers and Scientists of California (ESC)	0	0	0
Non-Union	3	1	4

Terms By Reason (V=Voluntary & IV= Involuntary)	January	February	YTD(Jan)
Personal (V)	3	2	5
New Opportunity(V)	2	2	4
Retirement (V)	0	1	1
Schedule (V)	0	0	0
Job Abandonment (V)	0	0	0
No Reason Given (V)	0	0	0
Relocating (V)	0	1	1
School (V)	0	0	0
No Show (V)	0	0	0
RIF(IV)	0	0	0
Performance (IV)	4	0	4



## Chief Nursing Officer Report

March 2025

### Patient Care Services

- Hicuity went live March 11th

### Quality, Regulatory, and Infection Prevention

- Quality and Risk Director
- Influenza and other respiratory illnesses have stabilized at this time

<b>CNO Dashboard February 2025</b>				
Description	February 2025 Budget	February 2025 Actual	Budget - Year To Date Total	Actual -YTD Total
ED Visits	2,133	2,309	17,637	18,504
ED Admission %	10%>	5%	10%>	6.02%
LWBS %	<2.0%	1.1%	<2.0%	0.98%
Door to Provider	10 min	9 min	10 min	7.23%
MS admissions	105	112	815	889
ICU admissions	24	28	120	177
Deliveries	34	21	257	243
OR Inpatient	40	40	269	333
ASC/OP cases	56	55	376	421
GI	86	106	726	735
Met or Exceeded Target				
Within 10% of Target				
Not Within 10%				



Hazel Hawkins  
MEMORIAL HOSPITAL

**REGULAR MEETING OF THE FINANCE COMMITTEE  
SAN BENITO HEALTH CARE DISTRICT  
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA  
MONDAY, MARCH 24, 2025 - 4:30 P.M.  
SUPPORT SERVICES BUILDING, 2<sup>ND</sup> 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. Review Financial Updates
  - Financial Statements – February 2025
  - Finance Dashboard – February 2025
  - Supplemental Payments – February 2025
  
3. Consider Recommendation for Board Approval of Professional Services Agreement with Lorilee Sutter, M.D.
  - Report
  - Committee Questions
  - Motion/Second
  
4. Public Comment

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

The next Finance Committee meeting is scheduled for **Monday, April 21, 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



# Hazel Hawkins

MEMORIAL HOSPITAL

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.



San Benito Health Care District

## San Benito Health Care District

A Public Agency  
911 Sunset Drive  
Hollister, CA 95023-5695  
(831) 637-5711

March 24, 2025

### CFO Financial Summary for the District Board:

For the month ending February 28, 2025, the District's Net Surplus (**Loss**) is \$3,912,058 compared to a budgeted Surplus (**Loss**) of \$1,181,338. The District exceeded its budget for the month by \$2,730,720.

YTD as of February 28, 2025, the District's Net Surplus (**Loss**) is \$15,358,843 compared to a budgeted Surplus (**Loss**) of \$4,870,031. The District is exceeding its budget YTD by \$10,488,812.

Acute discharges were 156 for the month, slightly under budget by 3 discharges or 2%. The ADC was 16.39 compared to a budget of 17.28. The ALOS was 2.94. The acute I/P gross revenue was under budget by **\$301,228 (4%)** while O/P services gross revenue exceeded budget slightly by **\$389,341** or 1% over budget. ER I/P visits were 138 and ER O/P visits were over budget by 175 visits or 9%. The RHCs & Specialty Clinics treated 3,419 (includes 691 visits at the Diabetes Clinic) and 849 visits respectively.

Adding to the District's recorded earnings this month are the following supplemental revenue programs:

- 1) **\$1,311,259.68** final settlement for QIP PY6 CY2023.
- 2) **\$710,852.61** District Hospital Direct Payment (DHDP) for June 1<sup>st</sup> – June 30, 2023.
- 3) **\$459,882** final accrual of CY 2023 Rate Range settlement of \$1,339,140.97.

**Other Operating** revenue exceeded budget by **\$2,047,640** due to the aforementioned items 1 & 2.

**Operating Expenses** were over budget by **\$338,150** due mainly to: Registry of \$260,257 (partially offset by savings in Salaries & Wages of \$135,993 and Benefits of \$80,150), Supplies of \$86,429 and Purchase Services of \$267,048. These overages are partly attributable to an increase in orthopedic surgeries (implants) and other medical supplies. In addition, an increase for the month in repairs and maintenance.

**Non-operating Revenue** exceeded budget by **\$767**.

The SNFs ADC was **87.61** for the month. The Net Surplus (**Loss**) is \$83,794 compared to a budget of \$73,364. YTD, the Net Surplus (**Loss**) is \$1,028,792 exceeding its budget by \$318,755.

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED  
HOLLISTER, CA 95023  
FOR PERIOD 02/28/25

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE			
	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24
GROSS PATIENT REVENUE:										
ACUTE ROUTINE REVENUE	3,015,985	3,205,234	(189,249)	(6)	3,205,233	26,712,740	26,289,166	423,574	2	26,289,159
SNF ROUTINE REVENUE	1,846,410	1,831,113	15,297	1	1,917,720	15,780,720	15,471,671	309,049	2	17,213,188
ANCILLARY INPATIENT REVENUE	4,249,115	4,311,085	(61,970)	(1)	4,355,819	34,466,098	32,242,698	2,223,400	7	32,151,190
HOSPITALIST\PEDS I/P REVENUE	0	0	0	0	190,967	0	0	0	0	1,301,060
TOTAL GROSS INPATIENT REVENUE	9,111,510	9,347,432	(235,922)	(3)	9,669,739	76,959,558	74,003,535	2,956,023	4	76,954,596
ANCILLARY OUTPATIENT REVENUE	27,678,552	27,289,211	389,341	1	26,754,117	231,621,865	219,973,390	11,648,475	5	215,660,195
HOSPITALIST\PEDS O/P REVENUE	0	0	0	0	70,146	0	0	0	0	503,838
TOTAL GROSS OUTPATIENT REVENUE	27,678,552	27,289,211	389,341	1	26,824,263	231,621,865	219,973,390	11,648,475	5	216,164,033
TOTAL GROSS PATIENT REVENUE	36,790,062	36,636,643	153,419	0	36,494,002	308,581,423	293,976,925	14,604,498	5	293,118,629
DEDUCTIONS FROM REVENUE:										
MEDICARE CONTRACTUAL ALLOWANCES	10,189,537	9,989,886	199,651	2	9,457,791	81,352,689	79,907,955	1,444,734	2	78,293,349
MEDI-CAL CONTRACTUAL ALLOWANCES	9,146,801	9,862,365	(715,564)	(7)	9,489,109	78,833,009	78,984,045	(151,036)	0	77,780,159
BAD DEBT EXPENSE	425,981	523,630	(97,649)	(19)	1,086,296	5,652,854	4,187,928	1,464,926	35	5,658,443
CHARITY CARE	129,710	39,034	90,676	232	19,159	306,068	312,192	(12,124)	(4)	330,447
OTHER CONTRACTUALS AND ADJUSTMENTS	3,949,405	4,309,866	(360,461)	(8)	4,165,481	36,698,514	34,572,519	2,125,995	6	35,290,598
HOSPITALIST\PEDS CONTRACTUAL ALLOW	0	0	0	0	6,137	0	0	0	0	54,314
TOTAL DEDUCTIONS FROM REVENUE	23,841,434	24,724,781	(883,347)	(4)	24,223,972	202,837,133	197,964,639	4,872,494	3	197,407,309
NET PATIENT REVENUE	12,948,628	11,911,862	1,036,766	9	12,270,030	105,744,290	96,012,286	9,732,004	10	95,711,320
OTHER OPERATING REVENUE	2,595,521	547,881	2,047,640	374	467,230	7,531,356	4,383,048	3,148,308	72	4,493,882
NET OPERATING REVENUE	15,544,149	12,459,743	3,084,406	25	12,737,260	113,275,646	100,395,334	12,880,312	13	100,205,202
OPERATING EXPENSES:										
SALARIES & WAGES	4,614,553	4,783,156	(168,603)	(4)	4,418,679	39,738,669	40,790,634	(1,051,965)	(3)	37,370,751
REGISTRY	501,160	226,951	274,209	121	460,241	4,106,213	1,833,900	2,272,313	124	2,515,630
EMPLOYEE BENEFITS	2,064,249	2,191,132	(126,883)	(6)	2,219,885	17,341,057	18,381,083	(1,040,026)	(6)	16,498,981
PROFESSIONAL FEES	1,469,252	1,496,355	(27,103)	(2)	1,522,520	12,523,822	12,983,278	(459,456)	(4)	12,992,946
SUPPLIES	1,076,491	1,001,715	74,776	8	1,068,443	8,820,784	7,953,189	867,595	11	8,423,325
PURCHASED SERVICES	1,330,110	1,040,185	289,925	28	1,152,306	10,653,324	9,027,255	1,626,069	18	8,576,111
RENTAL	172,628	135,655	36,973	27	142,832	1,286,361	1,177,254	109,107	9	1,098,845
DEPRECIATION & AMORT	317,940	318,477	(538)	0	320,896	2,547,532	2,547,816	(284)	0	2,599,837
INTEREST	5,632	27,824	(22,192)	(80)	30,089	299,231	223,961	75,270	34	435,778
OTHER	425,943	402,053	23,890	6	463,687	3,559,339	3,467,717	91,622	3	3,419,639
TOTAL EXPENSES	11,977,956	11,623,503	354,453	3	11,799,577	100,866,331	98,386,087	2,480,244	3	93,931,843
NET OPERATING INCOME (LOSS)	3,566,193	836,240	2,729,953	327	937,684	12,409,315	2,009,247	10,400,068	518	6,273,359

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED  
 HOLLISTER, CA 95023  
 FOR PERIOD 02/28/25

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE		
	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE

NON-OPERATING REVENUE\EXPENSE:

DONATIONS	0	5,000	(5,000)	(100)	18,795	213,451	140,000	73,451	53	215,283
PROPERTY TAX REVENUE	241,122	241,122	0	0	205,711	1,928,976	1,928,976	0	0	1,645,688
GO BOND PROP TAXES	175,915	175,915	0	0	170,388	1,407,318	1,407,320	(2)	0	1,363,102
GO BOND INT REVENUE\EXPENSE	(65,081)	(65,081)	0	0	(68,721)	(520,651)	(520,648)	(3)	0	(549,769)
OTHER NON-OPER REVENUE	17,445	15,908	1,537	10	19,033	131,007	127,264	3,743	3	144,063
OTHER NON-OPER EXPENSE	(27,767)	(27,766)	(1)	0	(32,700)	(222,950)	(222,128)	(822)	0	(262,869)
INVESTMENT INCOME	4,231	0	4,231	0	0	12,377	0	12,377	0	(4,209)
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0

TOTAL NON-OPERATING REVENUE/(EXPENSE)

	345,865	345,098	767	0	312,506	2,949,527	2,860,784	88,743	3	2,551,290
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NET SURPLUS (LOSS)

	3,912,058	1,181,338	2,730,720	231	1,250,190	15,358,843	4,870,031	10,488,812	215	8,824,649
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EBIDA

	\$ 4,146,931	\$ 1,416,747	\$ 2,730,184	192.70%	\$ 1,502,119	\$ 17,232,658	\$ 6,753,303	\$ 10,479,355	155.17%	\$ 10,874,022
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EBIDA MARGIN

	26.68%	11.37%	15.31%	134.62%	11.79%	15.21%	6.73%	8.49%	126.15%	10.85%
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OPERATING MARGIN

	22.94%	6.71%	16.23%	241.83%	7.36%	10.95%	2.00%	8.95%	447.38%	6.26%
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NET SUREPLUS (LOSS) MARGIN

	25.17%	9.48%	15.69%	165.44%	9.82%	13.56%	4.85%	8.71%	179.51%	8.81%
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HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY  
HOLLISTER, CA 95023  
FOR PERIOD 02/28/25

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE			
	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24
<b>GROSS PATIENT REVENUE:</b>										
ROUTINE REVENUE	3,015,985	3,205,234	(189,249)	(6)	3,205,233	26,712,740	26,289,166	423,574	2	26,289,159
ANCILLARY INPATIENT REVENUE	3,896,966	4,008,946	(111,979)	(3)	4,008,938	31,599,735	29,689,816	1,909,919	6	29,689,816
HOSPITALIST I\ P REVENUE	0	0	0	0	190,967	0	0	0	0	1,301,060
TOTAL GROSS INPATIENT REVENUE	6,912,951	7,214,179	(301,228)	(4)	7,405,138	58,312,476	55,978,982	2,333,494	4	57,280,035
ANCILLARY OUTPATIENT REVENUE	27,678,505	27,289,211	389,294	1	26,754,117	231,621,818	219,973,390	11,648,428	5	215,650,195
HOSPITALIST O\ P REVENUE	47	0	47		70,146	47	0	47		503,838
TOTAL GROSS OUTPATIENT REVENUE	27,678,552	27,289,211	389,341	1	26,824,263	231,621,865	219,973,390	11,648,475	5	216,164,033
TOTAL GROSS ACUTE PATIENT REVENUE	34,591,503	34,503,390	88,113	0	34,229,401	289,934,340	275,952,372	13,981,968	5	273,444,068
<b>DEDUCTIONS FROM REVENUE ACUTE:</b>										
MEDICARE CONTRACTUAL ALLOWANCES	9,961,164	9,792,840	168,324	2	9,221,627	79,375,383	78,243,047	1,132,336	1	76,569,984
MEDI-CAL CONTRACTUAL ALLOWANCES	9,065,978	9,747,290	(681,313)	(7)	9,311,190	78,046,014	78,011,741	34,273	0	76,523,588
BAD DEBT EXPENSE	371,770	518,630	(146,860)	(28)	1,074,113	5,658,010	4,147,928	1,510,082	36	5,741,465
CHARITY CARE	68,272	39,034	29,238	75	16,502	238,630	312,192	(73,562)	(24)	327,790
OTHER CONTRACTUALS AND ADJUSTMENTS	3,938,598	4,279,907	(341,309)	(8)	4,149,133	36,448,448	34,319,380	2,129,068	6	34,992,382
HOSPITALIST\ PEDI CONTRACTUAL ALLOW	0	0	0	0	6,137	0	0	0	0	54,314
TOTAL ACUTE DEDUCTIONS FROM REVENUE	23,405,781	24,377,701	(971,920)	(4)	23,778,703	199,766,485	195,034,288	4,732,197	2	194,209,522
NET ACUTE PATIENT REVENUE	11,185,722	10,125,689	1,060,033	11	10,450,698	90,167,855	80,918,084	9,249,771	11	79,234,546
OTHER OPERATING REVENUE	2,595,521	547,881	2,047,640	374	467,230	7,531,356	4,383,048	3,148,308	72	4,493,882
NET ACUTE OPERATING REVENUE	13,781,243	10,673,570	3,107,673	29	10,917,929	97,699,211	85,301,132	12,398,079	15	83,728,428
<b>OPERATING EXPENSES:</b>										
SALARIES & WAGES	3,691,312	3,827,305	(135,993)	(4)	3,507,862	31,569,351	32,779,849	(1,210,498)	(4)	29,786,017
REGISTRY	460,257	200,000	260,257	130	396,107	3,742,222	1,600,000	2,142,222	134	2,281,409
EMPLOYEE BENEFITS	1,619,643	1,699,793	(80,150)	(5)	1,759,146	13,482,814	14,255,641	(772,828)	(5)	12,771,229
PROFESSIONAL FEES	1,467,042	1,494,203	(27,161)	(2)	1,520,310	12,506,142	12,964,608	(458,466)	(4)	12,975,266
SUPPLIES	994,089	907,660	86,429	10	974,304	8,054,918	7,185,806	869,112	12	7,636,245
PURCHASED SERVICES	1,226,585	959,537	267,048	28	1,062,349	8,957,457	8,327,363	1,530,094	18	7,910,707
RENTAL	156,585	134,668	21,917	16	141,580	1,228,717	1,168,679	60,038	5	1,090,509
DEPRECIATION & AMORT	278,689	278,940	(251)	0	281,221	2,225,347	2,231,520	(6,173)	0	2,483,542
INTEREST	5,632	27,824	(22,192)	(80)	30,089	299,231	223,961	75,270	34	435,778
OTHER	369,031	350,784	18,247	5	407,140	3,112,652	3,024,655	87,997	3	3,012,436
TOTAL EXPENSES	10,268,864	9,880,714	388,150	4	10,080,107	86,078,850	83,762,082	2,316,768	3	80,183,138
NET OPERATING INCOME (LOSS)	3,512,379	792,856	2,719,523	343	837,822	11,620,361	1,539,050	10,081,311	655	3,545,291

HAZEL HANKINS MEMORIAL HOSPITAL - ACUTE FACILITY  
 HOLLISTER, CA 95023  
 FOR PERIOD 02/28/25

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE			
	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24	ACTUAL 02/28/25	BUDGET 02/28/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	5,000	(5,000)	(100)	18,795	213,451	140,000	73,451	53	215,293
PROPERTY TAX REVENUE	204,954	204,954	0	0	174,854	1,639,632	1,639,632	0	0	1,398,832
GO BOND PROP TAXES	175,915	175,915	0	0	170,388	1,407,318	1,407,320	(2)	0	1,363,102
GO BOND INT REVENUE\EXPENSE	(65,081)	(65,081)	0	0	(68,721)	(520,651)	(520,648)	(3)	0	(549,769)
OTHER NON-OPER REVENUE	17,445	15,908	1,537	10	19,033	131,007	127,264	3,743	3	144,063
OTHER NON-OPER EXPENSE	(21,578)	(21,578)	0	0	(25,412)	(173,444)	(172,624)	(820)	1	(204,567)
INVESTMENT INCOME	4,231	0	4,231	0	0	12,377	0	12,377	0	(4,209)
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	315,885	315,118	767	0	288,937	2,709,690	2,620,944	88,746	3	2,362,736
NET SURPLUS (LOSS)	3,828,264	1,107,974	2,720,290	246	1,126,759	14,330,051	4,159,994	10,170,057	245	5,908,027



HAZEL HAWKINS SKILLED NURSING FACILITIES  
HOLLISTER, CA  
FOR PERIOD 02/26/25

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE		
	ACTUAL 02/26/25	BUDGET 02/26/25	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 02/29/24	ACTUAL 02/26/25	BUDGET 02/26/25	POS/NEG VARIANCE	PERCENT VARIANCE
GROSS SNF PATIENT REVENUE:									
ROUTINE SNF REVENUE	1,846,410	1,831,113	15,297	1	1,917,720	15,780,720	15,471,671	309,049	2
ANCILLARY SNF REVENUE	352,149	302,140	50,009	17	346,881	2,866,362	2,552,882	313,480	12
TOTAL GROSS SNF PATIENT REVENUE	2,198,559	2,133,253	65,306	3	2,264,601	18,647,082	18,024,553	622,529	4
DEDUCTIONS FROM REVENUE SNF:									
MEDICARE CONTRACTUAL ALLOWANCES	228,373	197,046	31,327	16	236,164	1,977,306	1,664,908	312,398	19
MEDI-CAL CONTRACTUAL ALLOWANCES	80,824	115,075	(34,252)	(30)	177,918	786,995	972,304	(185,309)	(19)
BAD DEBT EXPENSE	54,211	5,000	49,211	984	12,182	(5,157)	40,000	(45,157)	(113)
CHARITY CARE	63,438	0	63,438		2,657	61,438	0	61,438	2,657
OTHER CONTRACTUALS AND ADJUSTMENTS	10,807	29,959	(19,152)	(64)	16,348	250,066	253,139	(3,073)	(1)
TOTAL SNF DEDUCTIONS FROM REVENUE	435,653	347,080	88,573	26	445,270	3,070,648	2,930,351	140,297	5
NET SNF PATIENT REVENUE	1,762,906	1,786,173	(23,267)	(1)	1,819,332	15,576,434	15,094,202	482,232	3
OTHER OPERATING REVENUE	0	0	0	0	0	0	0	0	0
NET SNF OPERATING REVENUE	1,762,906	1,786,173	(23,267)	(1)	1,819,332	15,576,434	15,094,202	482,232	3
OPERATING EXPENSES:									
SALARIES & WAGES	923,241	955,851	(32,610)	(3)	910,617	8,169,318	8,010,785	158,533	2
REGISTRY	40,904	26,951	13,953	52	64,134	363,991	233,900	130,091	56
EMPLOYEE BENEFITS	444,607	491,339	(46,732)	(10)	460,739	3,858,243	4,125,442	(267,199)	(7)
PROFESSIONAL FEES	2,210	2,152	58	3	2,210	17,680	18,670	(990)	(5)
SUPPLIES	82,402	94,055	(11,653)	(12)	94,139	765,866	767,383	(1,517)	0
PURCHASED SERVICES	103,524	80,648	22,876	28	89,957	795,867	699,892	95,975	14
RENTAL	16,043	987	15,056	1,525	1,252	57,644	8,575	49,069	572
DEPRECIATION	39,251	39,537	(287)	(1)	39,675	312,184	316,296	(4,112)	(1)
INTEREST	0	0	0	0	0	0	0	0	0
OTHER	56,912	51,269	5,643	11	56,547	446,686	443,062	3,624	1
TOTAL EXPENSES	1,709,092	1,742,789	(33,697)	(2)	1,719,470	14,787,480	14,624,005	163,475	1
NET OPERATING INCOME (LOSS)	53,814	43,384	10,430	24	99,862	788,954	470,197	318,757	68
NON-OPERATING REVENUE\EXPENSE:									
DONATIONS	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	36,168	36,168	0	0	30,857	289,344	289,344	0	0
OTHER NON-OPER EXPENSE	(6,188)	(6,188)	0	0	(7,288)	(49,506)	(49,504)	(2)	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	29,980	29,980	0	0	23,569	239,838	239,840	(2)	0
NET SURPLUS (LOSS)	83,794	73,364	10,430	14	123,431	1,028,792	710,037	318,755	45

HAZEL HAWKINS MEMORIAL HOSPITAL  
 HOLLISTER, CA  
 For the month ended 02/28/25

	CURR MONTH 02/28/25	PRIOR MONTH 01/31/25	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/24
CURRENT ASSETS					
CASH & CASH EQUIVALENT	26,201,019	27,314,301	(1,113,282)	(4)	35,145,624
PATIENT ACCOUNTS RECEIVABLE	73,229,894	65,766,315	7,463,580	11	67,848,785
BAD DEBT ALLOWANCE	(7,481,092)	(7,750,215)	269,124	(4)	(9,487,617)
CONTRACTUAL RESERVES	(49,214,233)	(44,058,764)	(5,155,469)	12	(46,279,766)
OTHER RECEIVABLES	7,589,992	6,255,337	1,334,655	21	5,931,344
INVENTORIES	4,485,091	4,490,095	(5,004)	0	4,496,070
PREPAID EXPENSES	2,254,721	2,288,168	(33,447)	(2)	1,775,026
DUE TO\FROM THIRD PARTIES	80,119	272,832	(192,713)	(71)	200,709
TOTAL CURRENT ASSETS	<u>57,145,513</u>	<u>54,578,069</u>	<u>2,567,443</u>	<u>5</u>	<u>59,630,175</u>
ASSETS WHOSE USE IS LIMITED					
BOARD DESIGNATED FUNDS	<u>8,190,862</u>	<u>7,914,767</u>	<u>276,096</u>	<u>4</u>	<u>3,512,919</u>
TOTAL LIMITED USE ASSETS	<u>8,190,862</u>	<u>7,914,767</u>	<u>276,096</u>	<u>4</u>	<u>3,512,919</u>
PROPERTY, PLANT, AND EQUIPMENT					
LAND & LAND IMPROVEMENTS	3,370,474	3,370,474	0	0	3,370,474
BLDGS & BLDG IMPROVEMENTS	100,098,374	100,098,374	0	0	100,098,374
EQUIPMENT	45,551,631	45,522,947	28,684	0	44,435,024
CONSTRUCTION IN PROGRESS	<u>3,096,230</u>	<u>2,975,110</u>	<u>121,121</u>	<u>4</u>	<u>1,393,964</u>
GROSS PROPERTY, PLANT, AND EQUIPMENT	<u>152,116,709</u>	<u>151,966,904</u>	<u>149,805</u>	<u>0</u>	<u>149,297,836</u>
ACCUMULATED DEPRECIATION	<u>(97,064,504)</u>	<u>(96,731,822)</u>	<u>(332,682)</u>	<u>0</u>	<u>(94,409,166)</u>
NET PROPERTY, PLANT, AND EQUIPMENT	<u>55,052,205</u>	<u>55,235,082</u>	<u>(182,877)</u>	<u>0</u>	<u>54,888,670</u>
OTHER ASSETS					
UNAMORTIZED LOAN COSTS	350,859	356,770	(5,911)	(2)	398,148
PENSION DEFERRED OUTFLOWS NET	<u>7,038,149</u>	<u>7,038,149</u>	<u>0</u>	<u>0</u>	<u>7,038,149</u>
TOTAL OTHER ASSETS	<u>7,389,008</u>	<u>7,394,919</u>	<u>(5,911)</u>	<u>0</u>	<u>7,436,297</u>
TOTAL UNRESTRICTED ASSETS	<u>127,777,588</u>	<u>125,122,837</u>	<u>2,654,751</u>	<u>2</u>	<u>125,468,061</u>
RESTRICTED ASSETS	<u>128,802</u>	<u>128,754</u>	<u>49</u>	<u>0</u>	<u>127,119</u>
TOTAL ASSETS	<u>127,906,390</u>	<u>125,251,591</u>	<u>2,654,799</u>	<u>2</u>	<u>125,595,180</u>

HAZEL HAWKINS MEMORIAL HOSPITAL  
 HOLLISTER, CA  
 For the month ended 02/28/25

	CURR MONTH 02/28/25	PRIOR MONTH 01/31/25	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/24
CURRENT LIABILITIES					
ACCOUNTS PAYABLE	5,959,776	6,797,957	838,182	(12)	8,572,685
ACCRUED PAYROLL	1,517,447	1,582,525	65,078	(4)	5,824,977
ACCRUED PAYROLL TAXES	1,371,845	1,252,455	(119,390)	10	1,608,471
ACCRUED BENEFITS	4,977,565	5,350,807	373,242	(7)	6,695,829
OTHER ACCRUED EXPENSES	58,596	51,854	(6,742)	13	89,559
PATIENT REFUNDS PAYABLE	1,470	1,470	0	0	12,920
DUE TO\FROM THIRD PARTIES	(1,216,208)	(974,028)	242,180	25	2,355,584
OTHER CURRENT LIABILITIES	724,805	554,184	(170,621)	31	611,755
TOTAL CURRENT LIABILITIES	13,395,295	14,617,224	1,221,928	(8)	25,771,780
LONG-TERM DEBT					
LEASES PAYABLE	4,662,847	4,669,706	6,859	0	5,107,486
BONDS PAYABLE	31,513,961	31,542,481	28,520	0	31,742,121
TOTAL LONG TERM DEBT	36,176,807	36,212,186	35,379	0	36,849,607
OTHER LONG-TERM LIABILITIES					
DEFERRED REVENUE	0	0	0	0	- 0
LONG-TERM PENSION LIABILITY	23,814,514	23,814,514	0	0	23,814,514
TOTAL OTHER LONG-TERM LIABILITIES	23,814,514	23,814,514	0	0	23,814,514
TOTAL LIABILITIES	73,386,617	74,643,924	1,257,307	(2)	86,435,901
NET ASSETS:					
UNRESTRICTED FUND BALANCE	39,064,686	39,064,686	0	0	39,064,686
RESTRICTED FUND BALANCE	96,276	96,228	(49)	0	94,593
NET REVENUE/(EXPENSES)	15,358,811	11,446,753	(3,912,058)	34	0
TOTAL NET ASSETS	54,519,774	50,607,667	(3,912,107)	8	39,159,279
TOTAL LIABILITIES AND NET ASSETS	127,906,390	125,251,591	(2,654,799)	2	125,595,180

Description	MTD Budget	MTD Actual	YTD Actual	YTD Budget	FYE Budget
Average Daily Census - Acute	17.28	16.39	14.57	15.00	14.90
Average Daily Census - SNF	86.13	87.61	86.35	83.73	85.00
Acute Length of Stay	3.04	2.94	2.68	3.00	2.90
<u>ER Visits:</u>					
Inpatient	137	138	1,096	936	1,444
Outpatient	1,996	2,171	17,408	16,701	25,269
Total	2,133	2,309	18,504	17,637	26,713
Days in Accounts Receivable	50.0	57.9	57.9	50.0	50.0
Productive Full-Time Equivalents	521.33	527.01	512.62	521.33	521.33
Net Patient Revenue	11,911,862	12,948,628	105,744,290	96,012,286	144,649,605
Payment-to-Charge Ratio	32.5%	35.2%	34.3%	32.7%	32.7%
Medicare Traditional Payor Mix	29.56%	32.07%	28.52%	28.95%	28.51%
Commercial Payor Mix	21.78%	22.52%	23.40%	21.72%	21.88%
Bad Debt % of Gross Revenue	1.42%	1.20%	1.83%	1.42%	1.42%
EBIDA	1,416,747	4,146,931	17,232,658	6,753,303	9,671,943
EBIDA %	11.37%	26.68%	15.21%	6.73%	6.40%
Operating Margin	6.71%	22.94%	10.95%	2.00%	1.72%
Salaries, Wages, Registry & Benefits %: by Net Operating Revenue	57.80%	46.19%	54.02%	60.77%	61.10%
by Total Operating Expense	61.95%	59.94%	60.66%	62.01%	62.15%
<u>Bond Covenants:</u>					
Debt Service Ratio	1.25	13.84	13.84	1.25	5.18
Current Ratio	1.50	4.27	4.27	1.50	2.00
Days Cash on hand	30.00	64.60	64.60	30.00	100.00
Met or Exceeded Target					
Within 10% of Target					
Not Within 10%					

**Statement of Cash Flows**  
**Hazel Hawkins Memorial Hospital**  
**Hollister, CA**  
**Eight months ending February 28, 2025**

	CASH FLOW		COMMENTS
	Current Month 2/28/2025	Current Year-To-Date 2/28/2025	
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>			
Net Income (Loss)	\$3,912,058	\$15,358,843	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:			
Depreciation	332,682	2,655,340	
(Increase)/Decrease in Net Patient Accounts Receivable	(2,577,233)	(4,453,167)	
(Increase)/Decrease in Other Receivables	(1,334,656)	(1,658,646)	
(Increase)/Decrease in Inventories	5,004	10,979	
(Increase)/Decrease in Pre-Paid Expenses	33,447	(479,697)	
(Increase)/Decrease in Due From Third Parties	192,713	120,590	
Increase/(Decrease) in Accounts Payable	(838,182)	(2,612,910)	
Increase/(Decrease) in Notes and Loans Payable	0	0	
Increase/(Decrease) in Accrued Payroll and Benefits	(318,930)	(6,262,420)	
Increase/(Decrease) in Accrued Expenses	6,742	(30,964)	
Increase/(Decrease) in Patient Refunds Payable	0	(11,449)	
Increase/(Decrease) in Third Party Advances/Liabilities	(242,180)	(3,571,792)	
Increase/(Decrease) in Other Current Liabilities	170,621	113,051	Semi-Annual Int. - 2005 GO & 2021 Revenue Bonds
<b>Net Cash Provided by Operating Activities:</b>	<b>(4,569,971)</b>	<b>(16,181,087)</b>	
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>			
Purchase of Property, Plant and Equipment	(149,805)	(2,818,874)	
(Increase)/Decrease in Limited Use Cash and Investments	0	0	
(Increase)/Decrease in Other Limited Use Assets	(276,096)	(4,677,943)	Bond Principal & Int Payment - 2014 (2005) & 2021 Bonds
(Increase)/Decrease in Other Assets	5,911	47,288	Amortization
<b>Net Cash Used by Investing Activities</b>	<b>(419,990)</b>	<b>(7,449,529)</b>	
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>			
Increase/(Decrease) in Capital Lease Debt	(6,859)	(444,640)	
Increase/(Decrease) in Bond Mortgage Debt	(28,520)	(228,160)	2014 GO Principal & Refinancing of 2013 Bonds with 2021 Bonds
Increase/(Decrease) in Other Long Term Liabilities	0	0	
<b>Net Cash Used for Financing Activities</b>	<b>(35,379)</b>	<b>(672,800)</b>	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	(32)	
<b>Net Increase/(Decrease) in Cash</b>	<b>(1,113,282)</b>	<b>(8,944,605)</b>	
Cash, Beginning of Period	27,314,301	35,145,624	
<b>Cash, End of Period</b>	<b>\$26,201,019</b>	<b>\$26,201,019</b>	\$0

Budgeted Cash on Hand

\$26,265,981

\$405,559

Cost per day to run the District  
Operational Days Cash on Hand

64.60

(\$64,962)

Variance

Hazel Hawkins Memorial Hospital  
 Supplemental Payment Programs  
 As of February 28, 2025, FYE June 30, 2025

Payor	Actual FY 2025	Actual FY 2024	Notes:
<b>Intergovernmental Transfer Programs:</b>			
- AB 113 Non-Designated Public Hospital (NDPH) SFY 2022/2023 Final Payment SFY 2023/2024	425,000	407,785	Requires District to fund program and wait for matching return. Paid on 04/17/24, \$156,525.63, funds rec'd in June. Exp. June 2025.
- SFY 2023/2024 Interim SFY 2024/2025	389,100	434,472	Paid on 04/24/24, \$506,883.51, funds rec'd in June. Exp. June 2025.
- SB 239 Hospital Quality Assurance Fund (HQAF) CY 2022	-	2,405,548	Net amount rec'd on November 1, 2023 check for CY 2022.
- SB 239 Hospital Quality Assurance Fund (HQAF) CY 2023	-	2,432,278	IGT by March 22, 2024 of \$1,257,738, funds expected in May/June. Expected in May 2025.
- SB 239 Hospital Quality Assurance Fund (HQAF) CY 2024	2,425,000	-	IGT by Feb. 23, 2024 of \$472,508, funds expected in April/May. Received in February 2025.
- Rate Range Jan. 1, 2022 through Dec. 31, 2022	-	1,025,179	IGT by Feb. 16, 2024 of \$1,891,350.65, funds expected in April/May. Expected in May 2025.
- Rate Range Jan. 1, 2022 through Dec. 31, 2023	1,339,141	3,459,757	Expected in May 2025. New Program created by the DHLF.
- QIP PY 5 Settlement	-	-	Paid on 02/26/2024.
- QIP PY 6 Settlement	4,311,260	-	Paid on 04/08/2024.
- District Hospital Directed Payments (DHDP) CY 2023	710,853	(1,253,000)	Due January 3, 2025. Paid on December 9, 2024.
- QIP PY 4 1st Loan Repayment	-	(1,222,438)	
- QIP PY 4 2nd Loan Repayment	-	-	
- QIP PY 5 Loan Repayment	(3,090,086)	-	
<b>IGT sub-total</b>	<b>6,510,267</b>	<b>7,689,581</b>	
<b>Non-Intergovernmental Transfer Programs:</b>			
- AB 915 SY 2023-24	4,100,000	4,143,717	Direct Payments. Received on March 11, 2024. Exp. June 2025.
- SB 239 Hospital Quality Assurance Fund (HQAF)	1,069,577	1,069,577	Rec. Sep. 4, 2024.
- SB 239 Hospital Quality Assurance Fund (HQAF) VIII	-	3,208,731	1st, 2nd & 3rd Qtrs rec'd on 03/19/2024, 05/23/2024 & 06/27/2024. Expected to Rec. 4th qtr payment by June 30, 2025.
- SB 239 Hospital Quality Assurance Fund (HQAF) VIII	1,081,621	-	Rec'd 1st, 2nd, & 3rd Qtr payments YTD. Based on actual cost difference.
- Distinct Part, Nursing Facility (DP/NF)	3,244,863	-	Expected quarterly through June 30, 2025.
- Medi-Cal Disproportionate Share (DSH)	767,627	1,452,877	
<b>Non-IGT sub-total</b>	<b>10,263,688</b>	<b>9,874,903</b>	
<b>Program Grand Totals</b>	<b>16,773,955</b>	<b>17,564,484</b>	
Total Received	6,421,208	18,970,344	
Total Pending	13,442,833	1,069,577	
Total Paid	(3,090,086)	(2,475,438)	
Net Supplemental Payments	16,773,955	17,564,484	

**Board of Directors Contract Review Worksheet**

*Agreement for Professional Services with Lorilee Sutter, M.D.*



**Executive Summary:** Dr. Lorilee Sutter is a board-certified rheumatologist with extensive experience who originally joined the District in 2012, then moved out of the area in 2022. She will play a vital role in the orthopedic clinic serving patients with both common and complex rheumatology conditions. Her return will help strengthen access to specialized care for the community.

**Recommended Board Motion:** It is recommended the hospital Board approve the Professional Services Agreement with Lorilee Sutter, M.D. at a rate of \$195 per hour up to 80 hours per month.

**Services Provided:** Part-time rheumatology professional services.

**Agreement Terms:**

<b>Contract Term</b>	<b>Effective Date</b>	<b>Estimated Base Monthly Cost</b>	<b>Estimated Annual Cost</b>	<b>Term clause</b>
2 years	4/10/2025	\$15,600	\$187,200	60 days

## PROFESSIONAL SERVICES AGREEMENT

This Professional Services Agreement (“**Agreement**”) is made, entered into and effective as of **April 10, 2025** (“**Effective Date**”), by and between San Benito Health Care District, a local health care district organized and operated pursuant to Division 23 of the California Health and Safety Code (“**SBHCD**”), and Lorilee Sutter, M.D. (“**Physician**”).

### RECITALS

- A. SBHCD owns and operates Hazel Hawkins Memorial Hospital, a licensed general acute care facility located at 911 Sunset Drive, Hollister, California (“**Hospital**”). Hospital provides inpatient and outpatient services to residents of the San Benito Health Care District and surrounding communities which constitute the Hospital’s service area (“**Hospital Service Area**”).
- B. SBHCD owns and operates specialty and rural health clinic as defined in Title 22, California Code of Regulations section 51115.5 to provide services to patients in the Hospital Service Area (“**Clinic**”).
- C. Physician is licensed to practice medicine in the State of California, is a member in good standing of the medical staff of Hospital and is experienced and qualified to provide rheumatology services.
- D. Section 32129 of the California Health and Safety Code provides that a health care district may contract with a Physician to render professional health services in order to ensure that adequate health care is available to all residents within its service area.
- E. SBHCD has determined that entering into this Agreement with Physician is in the best interests of the Hospital and the public health of the residents of the Hospital Service Area and is an appropriate way to assure availability of specialty and rural health clinic services to patients in the Hospital Service Area.
- F. The parties desire to enter into this Agreement to set forth their respective responsibilities in connection with the Services provided by Physician in the Hospital Service Area during the term of this Agreement.

The parties hereby agree as follows:

### ARTICLE 1 - DUTIES AND OBLIGATIONS OF PHYSICIAN

- 1.1 **Medical Services.** Physician shall (“**Physician**”), provide professional health care services in Physician’s medical specialty to patients at Clinic and/or Hospital and on the schedule more fully described in Exhibit A, which is attached to this Agreement and incorporated by this reference (“**Services**”). Services include Medicare services, Medi-Cal services, services pursuant to any other federal health care program or a state health care financial program (“**Governmental Programs**”), workers’ compensation services, and charity care. Physician shall cooperate to enable Clinic’s and Hospital’s participation in Medicare, Medi-Cal, Governmental Programs, workers’ compensation services and commercial payor programs. Physician shall provide Services to all patients, including Medicare, Medi-Cal, Governmental Program, and workers’ compensation beneficiaries, in a non-discriminatory manner and in accordance with all applicable laws and SBHCD policies and procedures, as developed and implemented in collaboration with physician leadership of Hospital and Clinic.
- 1.2 **Qualifications.** Physician shall: (i) be duly licensed to practice medicine by the State of California; (ii) be qualified to perform the Services by having adequate levels of competency and experience; (iii) have skill comparable to those prevailing in the community; (iv) not be excluded from participation in any governmental healthcare program; (v) be approved for and maintain active membership and/or clinical privileges on the Hospital’s medical staff in accordance with medical staff bylaws, rules and regulations, and other medical staff governing directives; (vi) be certified as a participating physician in the Medicare and Medi-Cal programs; and (vii) hold an unrestricted Drug Enforcement Administration (“**DEA**”) registration number.



- 1.3 Compliance. In connection with the operation and conduct of the Clinic and Hospital and rendition of Services, Physician shall, at all times, comply with the applicable terms of this Agreement and with all applicable federal, state and local laws, rules and regulations, including requirements for participation in the Medicare and Medi-Cal programs, the Hospital medical staff bylaws, rules and regulations, and applicable policies and procedures, and will at all times be aware of and participate in meeting the SBHCD Corporate Compliance program goals and objectives.
- 1.4 Credentialing. In order to be efficiently credentialed with payors contracted with SBHCD, Physician shall participate in the Council for Affordable Quality Healthcare (“CAQH”) credentialing program and shall timely comply with requests from CAQH or SBHCD personnel for (i) credentialing information regarding Physician, and (ii) documents necessary for the credentialing of Physician.
- 1.5 Use of Premises. No part of the SBHCD premises shall be used at any time by Physician as an office for the general or private practice of medicine.
- 1.6 Medical Records/Chart Notes. Physician shall provide appropriate and necessary documentation for each patient’s medical record for all patient encounters in the Clinic and Hospital in compliance with the hospital’s and clinics’ policies and procedures.
- 1.7 Coding. Physician shall properly code all professional services rendered to patients. Physician’s coding shall be used for purposes of billing for Services provided by Physician. All such coding shall be subject to review and audit by an independent auditing company mutually agreed upon by the parties.
- 1.8 Professional Standards. In performing Services, Physician shall comply with the principles and ethics of the American Medical Association, the California Medical Association and any federal, state or municipal law, statute or ordinance dealing with the practice of medicine by Physician. Physician shall further abide in all respects with the Code of Conduct applicable to professional health care providers of any hospital, outpatient clinic or surgery center, including but not limited to SBHCD, at which Physician shall provide professional services. Physician shall provide services to all SBHCD patients on a courteous and prompt basis, be available and accessible to patients, provide them with full and meaningful information and render services in a manner which assures continuity of care.

## **ARTICLE 2 - DUTIES AND OBLIGATIONS OF SBHCD**

- 2.1 Duties. SBHCD agrees to furnish at its own cost and expense, for the operation of the Clinic and Hospital, the following:
  - 2.1.1 Space and Equipment. Space and Equipment as may be reasonably required for the operation of the Clinic and Hospital as approved by SBHCD.
  - 2.1.2 Services and Supplies. Maintenance, repair, and replacement of equipment as are reasonably required; all utilities, including telephone, power, light, gas, and water; and all supplies that may be reasonably required for the operation of the Clinic and Hospital.
  - 2.1.3 Non-physician Personnel. All non-physician personnel with appropriate education, training and experience required to operate the Clinic and Hospital, including a qualified administrative manager. SBHCD shall have the sole right and responsibility for the hiring and termination of all its employees. SBHCD shall be responsible for the scheduling of non-physician Clinic and Hospital personnel.
- 2.2 Eligibility. At all times during the term of this Agreement, Clinics and Hospital shall remain eligible to participate in the Medicare and Medi-Cal programs.
- 2.3 Contracts. SBHCD shall be solely responsible for negotiating all contracts for the reimbursement of Services provided in the Clinic and Hospital. SBHCD in its sole and absolute discretion shall determine the negotiation parameters for the terms, conditions, and rates for such contracts.

- 2.4 Access to Records. Physician shall have access to the SBHCD patient medical and business records for quality of care and compliance purposes.

### **ARTICLE 3 - BILLING AND ASSIGNMENT OF REVENUE**

- 3.1 Billing and Collection. SBHCD shall perform billing and collection services under this Agreement. Physician shall cooperate with SBHCD and shall use his/her best efforts to furnish appropriate documentation of patient care services provided by Physician to enable SBHCD to timely and accurately bill and collect for such services.
- 3.2 Assignment of Professional Service Revenues. Physician hereby assigns to SBHCD the right to all revenue from any and all patients, third-party payors, and governmental programs for all Services rendered by Physician and its Physicians at the Hospital and the Clinic under this Agreement. The Parties intend that SBHCD may bill and collect directly from the Medicare carrier for Physician's services to Medicare beneficiaries in compliance with Medicare Publication 100-04, Chapter 1, Sec. 30.2.7.

### **ARTICLE 4 - COMPENSATION FOR SERVICES BY PHYSICIAN**

- 4.1 Compensation. As compensation for the provision of Services in the Clinic and Hospital, SBHCD shall pay Physician as outlined in Exhibit A to this Agreement and in accordance with the normal SBHCD contract payment process for Services provided by Physician. Physician shall not bill for facility fees, administrative, supervisory, medical director, or similar services.
- 4.2 Schedule of Charges. SBHCD, in its sole and absolute discretion, shall decide upon the schedule of charges for the Clinic and Hospital. Pursuant to California Health and Safety Code Section 32129, the SBHCD Board of Directors may review the fees and charges for Services provided at the Clinic and Hospital to ensure such fees and charges are reasonable, fair, and consistent with the basic commitment of SBHCD to provide adequate health care to all residents within the Hospital Service Area.

### **ARTICLE 5 - TERM AND TERMINATION**

- 5.1 Term. The term of this Agreement shall commence on the Effective Date and continue for a period of two (2) years, ending on **April 9, 2027 at 11:59 PM**, unless terminated earlier as provided in this Agreement, and shall renew for successive one (1) year periods upon mutual written agreement of the parties.
- 5.2 Termination. Either party shall have the right to terminate this Agreement without stating a cause or reason and without cost or penalty upon sixty (60) days' prior written notice to the other party. Notwithstanding, either party shall have the right to terminate the Agreement for cause upon written notice to the other party as set forth below. If this Agreement is terminated prior to expiration of the initial year of the term, the parties shall not enter into any new agreement or arrangement during the remainder of such year.
- 5.3 Definition of Cause. For purposes of this Agreement, "cause" shall include, but not be limited to, the occurrence of any of the following events:
- 5.3.1 SBHCD or Physician is in breach of any material term or condition of this Agreement and such breach has not been cured within thirty (30) days following written notice of such breach.
  - 5.3.2 SBHCD or Physician becomes insolvent or declares bankruptcy.
  - 5.3.3 The license to practice medicine or to prescribe controlled substances of Physician is revoked or suspended.

- 5.3.4 SBHCD fails to carry or reinstate the insurance required in ARTICLE 8 of this Agreement or such coverage is cancelled or revoked within fifteen (15) days following notice of revocation from its insurance carrier.
- 5.3.5 Upon the determination that Physician has violated a material term of ARTICLE 9 of this Agreement.
- 5.3.6 The performance by either party of any term, condition, or provision of this Agreement which jeopardizes the licensure of Hospital, Hospital's participation in Medicare, Medi-Cal or other reimbursement or payment program, or Hospital's full accreditation by The Joint Commission or any other state or nationally recognized accreditation organization, or the tax-exempt status of Hospital's bonds, or if for any other reason such performance violates any statute, ordinance, or is otherwise deemed illegal, or is deemed unethical by any recognized body, agency, or association in the healthcare fields, and the jeopardy or violation has not been or cannot be cured within sixty (60) days from the date notice of such jeopardy or violation has been received by the parties.
- 5.3.7 The loss of or reduction in Physician's medical staff privileges at any facility where Physician provides professional health care services, whether voluntary or involuntary.
- 5.3.8 Physician being charged with or convicted of a crime other than an infraction, traffic citation, or similar charge.
- 5.3.9 Physician's engagement in: (i) willful misconduct (which means the knowing and intentional failure to exercise ordinary care to prevent material injury to SBHCD or the commission of an intentional act with knowledge that it is likely to result in material injury to the SBHCD), (ii) fraudulent activities, (iii) crimes or acts of moral turpitude, (iv) any breach of a duty to SBHCD, a patient, or any third party payor, (v) sexual harassment or abuse, or (vi) or any other action or omission that could materially affect SBHCD's business or reputation in an adverse manner.

5.4 Termination/Expiration Not Subject to Fair Hearing. It is agreed between the parties that should either party exercise its right to terminate this Agreement such decision to terminate, and the actual termination or expiration of this Agreement, shall apply to rights under this Agreement only and not to Physician's medical staff privileges or membership on the medical staff of Hospital. The termination or expiration of this Agreement shall not be subject to the Fair Hearing Plan of the Medical Staff Bylaws, the hearing procedures provided by Healthcare District Law, or any other fair hearing procedure regarding medical staff appointments or privileges.

## **ARTICLE 6 - INDEPENDENT CONTRACTOR**

- 6.1 Independent Contractor Status. Physician is engaged in an independent contractor relationship with SBHCD in performing all work, services, duties, and obligations pursuant to this Agreement. Neither SBHCD nor Hospital shall exercise any control or direction over the methods by which Physician performs work and functions, except that Physician shall perform at all times in strict accordance with then currently approved methods and practices of Physician's professional specialty. SBHCD's sole interest is to ensure that Physician performs and renders services in a competent, efficient, and satisfactory manner in accordance with high medical standards.
- 6.2 Independent Contractor Responsibilities. The parties expressly agree that no work, act, commission, or omission of Physician pursuant to the terms and conditions of this Agreement shall be construed to make or render Physician, the agent or employee of SBHCD or Hospital. Physician shall not be entitled to receive from SBHCD or Hospital vacation pay, sick leave, retirement benefits, Social Security, workers' compensation, disability or unemployment insurance benefits or any other employee benefit. Physician shall be solely responsible for paying when due all income, employment and withholding taxes and employment benefits, if any, including estimated taxes, incurred as a result of the compensation paid by SBHCD to Physician for Services under this Agreement. Physician is responsible for providing, at his/her

own expense, disability, unemployment, workers' compensation and other insurance (if applicable), training, permits and licenses.

## ARTICLE 7 - REPRESENTATIONS AND WARRANTIES

- 7.1 SBHCD Representations and Warranties. SBHCD for itself, and its board of directors, officers, employees, and agents (collectively, "Agents"), represents and warrants to SBHCD, upon execution and while this Agreement is in effect, as follows:
- 7.1.1 SBHCD has all requisite power and authority to enter into this Agreement and to perform its obligations under this Agreement;
  - 7.1.2 This Agreement has been duly authorized, executed, and delivered by SBHCD and is a legal, valid, binding obligation of SBHCD, enforceable in accordance with its terms;
  - 7.1.3 The parties have bargained at arms' length to determine Physician's compensation under this Agreement, the compensation is fair market value for the Services; and the compensation is consistent with fair market value for similar services in the community; and
  - 7.1.4 The execution and delivery of this Agreement and the consummation of the transactions contemplated hereby by SBHCD will not violate and provisions of, or constitute a default under, and contract or other agreement to which SBHCD is a party or by which it is bound, other than violations, defaults or conflicts that would not materially and adversely affect the ability of SBHCD to perform the its obligations pursuant to this Agreement.
- 7.2 Physician Representations and Warranties. Physician, for Physician and Physician's Agents, represents and warrants to SBHCD, upon execution and while this Agreement is in effect, as follows:
- 7.2.1 Physician is not bound by any agreement or arrangement which would preclude Physician from entering into, or from fully performing the Services;
  - 7.2.2 Physician's license to practice medicine in California or in any other jurisdiction has never been denied, suspended, revoked, terminated, voluntarily relinquished under threat of disciplinary action, or restricted in any way;
  - 7.2.3 Physician's medical staff privileges at any health care facility have never been denied, suspended, revoked, terminated, voluntarily relinquished under threat of disciplinary action, or made subject to terms of probation or any other restriction;
  - 7.2.4 Physician has not in the past conducted, and is presently not conducting, his/her medical practice in such a manner as to cause Physician to be suspended, excluded, barred or sanctioned under Medicare or Medi-Cal, or any government licensing agency, nor have they every been convicted of a criminal offense related to health care, or listed by a federal agency as debarred, excluded or otherwise ineligible for federal program participation;
  - 7.2.5 Physician has, and shall maintain throughout the term of this Agreement, an unrestricted license to practice medicine in California and Medical Staff privileges at Facility;
  - 7.2.6 Physician has all requisite power and authority to enter into this Agreement and to perform its obligations under this Agreement;
  - 7.2.7 This Agreement has been duly authorized, executed, and delivered by Physician and is a legal, valid, binding obligation of Physician, enforceable in accordance with its terms; and
  - 7.2.8 The parties have bargained at arms' length to determine Physician's compensation under this Agreement, the compensation is fair market value for the Services; and the compensation is consistent with fair market value for similar services in the community; and

- 7.2.9 The execution and delivery of this Agreement and the consummation of the transactions contemplated hereby by Physician will not violate and provisions of, or constitute a default under, and contract or other agreement to which Physician is a party or by which it is bound, other than violations, defaults or conflicts that would not materially and adversely affect the ability of Physician to perform the Services required under this Agreement.

## **ARTICLE 8 - LIABILITY/MALPRACTICE INSURANCE COVERAGE**

- 8.1 Coverages. SBHCD shall maintain general and professional liability insurance coverage for Physician for Services provided by Physician to SBHCD patients during the term of this Agreement in a minimum amount of \$1,000,000 per occurrence and \$3,000,000 annual aggregate. In the event the coverage that SBHCD obtains to comply with this Section of this Agreement is a "claims made" policy, and SBHCD, as applicable, changes insurance carriers or terminates coverage upon or after termination of this Agreement, SBHCD shall immediately obtain and shall maintain "tail" coverage in the amounts otherwise required under this Section for at least seven (7) years following termination of this Agreement.

## **ARTICLE 9 - PROTECTED HEALTH INFORMATION**

- 9.1 Protected Health Information. Physician shall maintain the confidentiality of all Protected Health Information ("PHI") in accordance with all applicable federal, state, and local laws and regulations, including, but not limited to, the California Confidentiality of Medical Information Act and the Federal Health Insurance Portability and Accountability Act of 1996 and regulations promulgated thereunder ("HIPAA"). Without limiting the foregoing, Physician agrees to maintain PHI, as defined from time to time under HIPAA, which may be made available to or received by Physician pursuant to this Agreement, in accordance with the requirements of HIPAA. Physician agrees that Physician shall:
- 9.1.1 Not use or further disclose PHI in a manner that would violate HIPAA if done by Hospital or violate the requirements of applicable laws or this Agreement;
  - 9.1.2 Use appropriate safeguards to prevent use or disclosure of PHI except as permitted by law and the terms of this Agreement, and report to Hospital any use or disclosure of PHI not permitted by law or by this Agreement of which Physician becomes aware;
  - 9.1.3 Comply with the elements of any compliance program established by Hospital that applies to the use or disclosure of PHI and ensure that any subcontractors or agents to whom Physician provides PHI agree to the same restrictions and conditions that apply to Physician with respect to such PHI;
  - 9.1.4 In accordance with HIPAA, (i) make available PHI to the subject Patient; (ii) make available PHI for amendment and incorporate any amendments to PHI; and (iii) make available the information required to provide an accounting of disclosures of PHI to the subject Patient;
  - 9.1.5 Make Physician's internal practices, books, and records relating to the use and disclosure of PHI available to the Secretary of the United States Department of Health and Human Services for purposes of determining Hospital's and Physician's compliance with HIPAA;
  - 9.1.6 At termination of this Agreement, return or destroy all PHI received from or created by SBHCD and retain no copies of such PHI or, if return or destruction is not permissible under law or the terms of this Agreement, continue to maintain all PHI in accordance with the provisions of this Section and limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible.
- 9.2 Electronic Protected Health Information ("EPHI"). Physician agrees that Physician will: (i) implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the EPHI that Physician creates, receives, maintains, or transmits on behalf of SBHCD; (ii) report to SBHCD any security incident with respect to EPHI of which

Physician becomes aware; and (iii) ensure that any agent, including a subcontractor, to whom Physician provides EPHI agrees to implement reasonable and appropriate safeguards to protect such information.

## ARTICLE 10 - REQUIRED DISCLOSURES

- 10.1 Required Disclosures. Physician shall notify SBHCD in writing within three (3) days after any of the following events occur:
- 10.1.1 Physician's license to practice medicine in the State of California or any other jurisdiction lapses or is denied, suspended, revoked, terminated, voluntarily relinquished (under threat of disciplinary action) or made subject to terms or probation or other restriction;
  - 10.1.2 Physician's medical staff membership and/or privileges at any health care facility or entity are denied, suspended, revoked, terminated, voluntarily relinquished (under threat of disciplinary action), or made subject to terms of probation or other restriction;
  - 10.1.3 Physician is required to pay damages in any malpractice action by way of judgment or settlement, except that Physician shall not be required to breach a settlement or confidentiality agreement;
  - 10.1.4 Receipt of notice of the commencement of any investigation into Physician's medical license or Physician's medical practice by the Medical Board of California, California Attorney General, the Department of Health and Human Services Office of Inspector General, the Department of Justice, or any other entity of federal, state, or local government;
  - 10.1.5 Physician's Drug Enforcement Agency registration number is revoked, suspended, terminated, relinquished, placed on terms of probation, or restricted in any way;
  - 10.1.6 An event occurs that substantially interrupts all or a portion of Physician's professional practice, that materially adversely affects Physician's ability to perform Physician's obligations hereunder, including the Services, or which could likely cause Physician to be in breach of this Agreement; or
  - 10.1.7 Physician's conviction of a criminal offense related to health care or any Physician's listing by a federal agency as being debarred, excluded or otherwise ineligible for federal program participation.

## ARTICLE 11 - GENERAL PROVISIONS

- 11.1 Notices. Any notice to be given to any party hereunder shall be deposited in the United States Mail, duly registered or certified, with return receipt requested, with postage paid, and addressed to the party for which intended, at the addresses set forth in the signature block, or to such other address or addresses as the parties may hereafter designate in writing to each other.

SBHCD: San Benito Health Care District  
911 Sunset Drive  
Hollister CA, 95023

Physician: Lorilee Sutter, M.D.  
3596 Savanna Way  
Palm Springs CA, 92262

- 11.2 No Waiver. No waiver of any of the provisions of this Agreement shall be deemed, or shall constitute, a waiver of any other provision, whether or not similar, nor shall any waiver constitute a continuing waiver. No waiver shall be binding unless executed in writing by the party making the waiver.

- 11.3 Governing Law and Venue. This Agreement shall be governed by, construed and enforced in accordance with the laws of the State of California. Venue shall be in the County of San Benito, California.
- 11.4 Ownership of Patient Records. All Clinic and Hospital patient records shall be maintained by SBHCD and are the property of SBHCD. Physician shall have the right to access such records during normal business hours.
- 11.5 Patient Choice. Notwithstanding anything herein to the contrary, all compensation paid to Physician pursuant to this Agreement is solely for the purpose of obtaining the services of Physician for patients of the SBHCD community. The parties recognize and affirm the importance of individual patient choice in selection of medical services. Nothing contained in this Agreement shall be interpreted to obligate, encourage, or solicit, in any way, the referral of any individual patient to any health care facility, including the Facility, contrary to that patient's choice of another provider of medical services. Further, nothing in this Agreement shall be interpreted to prevent, restrict, or discourage the Physician from referring patients to any other provider of health care services.
- 11.6 Exclusive Property of SBHCD. All data, files, records, documents, promotional materials, and similar items relating to the business of SBHCD, whether prepared by or with the assistance of Physician or otherwise coming into Physician's possession shall remain the exclusive property of SBHCD and shall not be removed from SBHCD's facilities under any circumstances without the prior written consent of SBHCD.
- 11.7 Confidentiality. The parties acknowledge and agree that during the term of this Agreement and in the course of the discharge of Physician's duties hereunder, Physician shall have access to and become acquainted with information concerning the operation of SBHCD, and information which, pursuant to applicable law and regulation, is deemed to be confidential, including, but not limited to, trade secrets, medical records, patient medical and personal information, and personnel records. Physician agrees that such information shall not be disclosed either directly or indirectly to any other person or entity or used by Physician in any way either during the term of this Agreement or at any other time thereafter, except as is required herein. Physician understands breach of this article will be an irremediable breach of this Agreement. Such breach will result in immediate termination of this Agreement.
- 11.8 Binding Agreement; No Assignment. This Agreement shall be binding upon and shall inure to the benefit of the parties to it and their respective legal representatives, successors, and permitted assigns. No party may assign this Agreement or any rights hereunder, or may they delegate any of the duties to be performed hereunder without the prior written consent of the other party.
- 11.9 Dispute Resolution. If any dispute, controversy, or claim arises out of this Agreement, for a period of thirty (30) days following written notice of the dispute, controversy or claim from one party to the other, the parties will use their good faith efforts to resolve the dispute, controversy, or claim. If the matter cannot be resolved by the parties in this fashion, then such dispute, claim or controversy shall be heard in San Benito County, California, pursuant to the provisions of California Code of Civil Procedure Sections 638 through 645.1, inclusive. The hearing shall be final and binding to the greatest extent permitted by law, and the cost thereof, including reasonable attorneys' fees, shall be borne by the losing party in such proportions as the referee may decide. Judgment on the award may be entered in any court having jurisdiction thereof.
- 11.10 Section 952 of Omnibus Budget Reconciliation Act of 1980. In accordance with Section 952 of the Omnibus Reconciliation Act of 1980 (PL 96-499), Physician agrees that the books and records of Physician will be available to the Secretary of Department of Health and Human Services and the Comptroller General of the United States, or their duly authorized representatives, for four (4) years after termination of this Agreement. In the event that any of the services to be performed under this Agreement are performed by any subcontractor of Physician at a value or cost of \$10,000 or more over a twelve (12) month period, Physician shall comply and assure that such subcontractor complies with the provisions of Section 952 of the Omnibus Reconciliation Act of 1980. If not applicable to this Agreement, this Section shall automatically be repealed.

11.11 Entire Agreement; Amendment. This Agreement, its exhibits, and all referenced documents constitute the entire agreement between the parties pertaining to the subject matter contained herein. This Agreement supersedes all prior and contemporaneous agreements, representations and understandings of the parties which relate to the subject matter of this Agreement. No supplement, amendment or modification of this Agreement shall be binding unless executed in writing by all of the parties.

The parties hereby executed this Agreement as of the Effective Date first set forth above.

**SBHCD**  
SAN BENITO HEALTH CARE DISTRICT

**PHYSICIAN**  
Lorilee Sutter, M.D.

By: \_\_\_\_\_  
Mary T. Casillas, Chief Executive Officer

By: \_\_\_\_\_  
Lorilee Sutter, M.D.

Date: \_\_\_\_\_

Date: \_\_\_\_\_



## EXHIBIT A

### PHYSICIAN SERVICES AND COMPENSATION

- .1 **Further Description of Medical Services.** Physician shall provide professional medical services in Physician's specialty at locations specified by SBHCD, which will be within the SBHCD healthcare district boundaries, or at facilities within thirty (30) miles of the SBHCD Hospital.
- A.1.1 **Professional Services.** Physician shall provide Services in the Clinic beginning on the Effective Date. Physician shall provide such services in coordination with other physicians who are contracted with SBHCD to provide similar services to patients and pursuant to a mutually agreed-upon schedule. If Physician and other physicians cannot agree on such a schedule, SBHCD shall determine the schedule.
- A.1.2 **Specialty Services.** Physician shall provide the following **Rheumatology** Services.
- A.1.3 **Clinic Services.** Clinic operating hours are Monday through Friday, from 8:00 a.m. to 5:00 p.m. Physician shall provide the following Clinic Services in the Clinics in accordance with the schedule set forth in Section A.2 of this Exhibit A:
- A.1.3.1 New and follow-up office visits;
  - A.1.3.2 Consultations;
  - A.1.3.3 Post discharge follow-up visits;
  - A.1.3.4 Ensuring the quality, availability, and expertise of medical services rendered in the Clinic and at Clinic-related activities;
  - A.1.3.5 Supervising physician assistants and nurse practitioners (collectively referred to as "Mid-Level Practitioners") as necessary for reimbursement or consult in the absence of the Medical Director;
  - A.1.3.6 Coordination of medical activities of the Clinic as a whole to be accomplished through continuous communication with appropriate SBHCD administrative personnel regarding medical administration of the Clinic;
  - A.1.3.7 Assisting with the development of a plan for quality assurance for the Clinic;
  - A.1.3.8 Provide required chart review and audits of care provided by Mid-Level Practitioners
- A.2 **Schedule.** Physician's schedule shall include Professional Services to SBHCD patients on a part-time basis consisting of eighty (80) hours per month, 48 weeks per year. Schedule to be mutually agreed upon between SBHCD and Physician.
- A.3 **Hospital Call Coverage.** There is no Hospital Call Coverage provision associated with this Agreement.
- A.4 **Compensation.**
- A.4.1 **Compensation Methodology Compliance.** In order to maintain continuity in the Compensation Methodology under this Agreement and to ensure commercial reasonableness and fair market value compensation to Physician for Services provided under this Agreement in compliance with Stark Law and Anti-Kickback regulations, SBHCD and Group agree that SBHCD retains the right to continue, for the term of this Agreement, application of the compensation formula in this Agreement.
- A.4.2 **Compensation.** Physician's Compensation, which includes professional services and supervision ("Compensation"), shall be paid on a monthly basis on SBHCD's standard payment cycle for similar agreements and shall be in the amount of One Hundred Ninety-Five Dollars and No Cents (\$195.00) per hour for Rheumatology Professional Services.

- A.4.3 **Payment on Termination.** On termination of this Agreement, which is not extended, renewed or superseded by another agreement, SBHCD shall pay to Group any amounts due to Group within forty-five (45) days after the termination of this Agreement.
- A.4.4 **Agreement Includes All Compensation from SBHCD.** Incorporated into compensation under the Agreement, unless specifically excluded, are all the Physician's sources of practice revenues and income, including Hospital Call coverage stipends, other hospital on-call fees, hospital stipends, and reading fees; provided, however, that services as a medical director within SBHCD, service on medical staff or SBHCD positions such as department chair or chief of staff, call panels which are not currently in effect, or other items specifically excluded by written agreement between Physician and SBHCD shall be independently compensated to Physician by SBHCD, if any, and are not subject to the terms of this Agreement.
- A.5 **Services and Activities in Support of SBHCD.** SBHCD and Physician acknowledge and agree that certain services and activities may be required of Physician in support of SBHCD and Clinic to ensure a continuing high level of patient care. To that end, Physician shall participate in functions/events from time to time, in support of the SBHCD Clinics and the SBHCD facilities. In addition, to assist in the recruitment and retention of highly skilled practitioners, upon SBHCD's request, Physician shall participate in recruitment meetings with SBHCD physician candidates. SBHCD shall reimburse Group for reasonable meal expenses incurred as part of meeting with physician candidates hosted at the request of SBHCD.
- A.6 **Practice Guidelines/Best Quality Practices.** Physician shall demonstrate cooperative work arrangements with the Medical Staff, Quality and Safety Leadership and SBHCD Administration to achieve mutually accepted practice guidelines and the best quality practices. These practices will be evidenced based, and include at minimum the following:
- A.6.1 Attendance at regular monthly meetings with SBHCD Clinic and Hospital leadership when requested to review any operational or quality issues.
- A.6.2 Timely completion of all incomplete inpatient records, including completion of all admission and discharge medication reconciliation.  
*Goal: As specified by Medical staff rules and regulations or hospital policy.*
- A.6.3 Completion of all office visit notes within seven (7) days of visit.
- A.6.4 Timely signing of orders.  
*Goal: As specified by Medical staff rules and regulations or hospital policy.*
- A.6.5 Timely discharges summaries.  
*Goal: As specified by Medical staff rules and regulations or hospital policy.*
- A.6.6 Commitment to use of SBHCD supported electronic health/medical record platforms.
- A.6.7 Compliance with all governmental and SBHCD quality reporting initiatives that may come into effect from time to time.
- A.6.8 Timely arrival at Hospital for scheduled procedures and Clinic for scheduled patient visits.

**San Benito Health Care District**  
**Board of Directors**  
**COMMITTEE & REPRESENTATIVE ASSIGNMENTS – 2024-2025**

Assignment	Johnson	Pack	Gabriel	Sanchez	Angelo	Meeting Times
<b>Board Committees/Brown Act Compliant</b>						
Facilities/Svc. Develop Committee		*X	X			3 <sup>rd</sup> Thursday bi-monthly/4:00 – 4:30 p.m.
Finance Committee	X				*X	4 <sup>th</sup> Monday each month/4:30 – 5:30 p.m.
Strategic Planning Committee	*X				X	Quarterly/4:00-5:00 p.m.
Patient Satisfaction Committee			*X	X		Quarterly/3:30-4:30 p.m.
<b>Ad Hoc/Advisory Committees</b>						
Bylaws/Board Policies Committee		X		*X		Annually/As Scheduled
Human Resources		*X			X	Annually/As Scheduled
<b>Board Representatives</b>						
SBHCD Board Rep to Auxiliary Board				X		2 <sup>nd</sup> Monday each month/10:00-12:00 p.m.
SBHCD Board Rep to Foundation Board				X		2 <sup>nd</sup> Thursday each month/12:00-1:00 p.m.
SBHCD Board Rep to Medical Staff	X					Quarterly on 4th Tuesday of the month 8:00-9:00 a.m.

\*Chair

If unable to attend, please find a replacement.

Two (2) Board Members are needed at each Board Committee meeting.