



# Hazel Hawkins MEMORIAL HOSPITAL

**REGULAR MEETING OF THE BOARD OF DIRECTORS  
SAN BENITO HEALTH CARE DISTRICT  
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA  
THURSDAY, AUGUST 22, 2024 – 5:00 P.M.  
SUPPORT SERVICES BUILDING, 2<sup>nd</sup>-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** 941 3856 0039

**Security Passcode:** 834872

**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

1. Call to Order / Roll Call

**Presented By:**

(Hernandez)

2. Board Announcements

(Hernandez)

3. Public Comment

(Hernandez)

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 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 (Pages 1-29)

(Hernandez)

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

- A. Consider and Approve Minutes of the Special Meeting of the Board of Directors – July 25, 2024
- B. Consider and Approve Minutes of the Regular Meeting of the Board of Directors – July 25, 2024
- C. Consider and Approve Minutes of the Special Meeting of the Board of Directors - July 31, 2024
- D. Consider and Approve Minutes of the Special Board Meeting of the Board of Directors – August 8, 2024
- E. Consider and Approve Policies:
  - Deployment of Additional Security Officers
  - Continuing Education
  - Recruitment and Retention
  - Lactation Accommodation
  - Progressive Discipline
- F. Receive Officer/Director Written Reports - No action required.
  - Provider Services & Clinic Operations
  - Skilled Nursing Facilities Reports (Mabie Southside/Northside)
  - Laboratory and Radiology
  - Foundation Report
  - Public Relations
  - PMO Project Summary Report

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

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

**5. Medical Executive Committee \*\*To be distributed at meeting**

(Dr. Bogey)

- A. Consider and Approve Medical Staff Credentials: August 21, 2024

*Recommended Action: Approval of Credentials*

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

**6. Receive Informational Reports (Pages 31-45)**

- A. Chief Executive Officer (Casillas)
  - ▶ Public Comment
  
- B. Chief Nursing Officer (Verbal) (Descent)
  - ▶ Public Comment
  
- C. Finance Committee (Robinson)
  - Finance Committee Meeting Minutes – August 15, 2024
  - Review Financial Updates
    - Financial Statements – July 2024
    - Finance Dashboard – July 2024
    - Supplemental Payments – July 2024
  - ▶ Public Comment

**7. Action Items (Pages 46-53)**

- A. Consider and Approve Resolution No. 2024-09 for Approval of the Amended 401(a) Pension Plan (Robinson)
 

*Recommended Action: Approve Resolution 2024-09 – Amended 401(a) Pension Plan*

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

- B. Consider and Approve Resolution No. 2024-10 for Approval and Adoption a Memorandum of Understanding with the National Union of Healthcare Workers (Casillas)
 

*Recommended Action: Approve Resolution 2024-10 - NUHW MOU*

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

**8. Public Comment (Hernandez)**

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

- 9. Closed Session** (Hernandez)  
(See Attached Closed Session Sheet Information)
- 10. Reconvene Open Session / Closed Session Report** (Hernandez)
- 11. Adjournment** (Hernandez)

The next Regular Meeting of the Board of Directors is scheduled for Thursday, September 26, 2024 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.

**SAN BENITO HEALTH CARE DISTRICT BOARD OF DIRECTORS  
AUGUST 22, 2024**

**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:** (Specify by reference to claimant's name, names of parties, case or claim numbers):

*Bernosky, Rob v. Members of the Board of Directors of San Benito Health Care District et al, Case No. CU-24-00196 (San Benito Superior Court)*

**Case name unspecified:** (Specify whether disclosure would jeopardize service of process or existing settlement negotiations): \_\_\_\_\_

**CONFERENCE WITH LEGAL COUNSEL-ANTICIPATED LITIGATION**

(Government Code §54956.9):

Significant exposure to litigation pursuant to § 54956.9(b): (Specify number of potential cases): One case

**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)

**Title:** (Specify position title of the employee being reviewed):

**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**

(Government Code §37624.3 & Health and Safety Code §§1461, 32155)

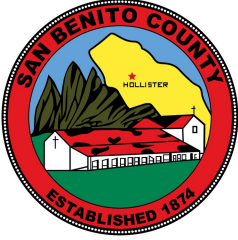
**Subject matter:** (Specify whether testimony/deliberation will concern staff privileges, report of medical audit committee, or report of quality assurance committee):

1. Report from Quality, Risk, and Compliance.

**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**



**SAN BENITO COUNTY  
AGENDA ITEM  
TRANSMITTAL FORM**

Dom Zanger  
District No. 1

Kollin Kosmicki  
District No. 2

Mindy Sotelo  
District No. 3  
Vice-Chair

Angela Curro  
District No. 4  
Chair

Bea Gonzales  
District No. 5

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**Item Number: 4.4**

**MEETING DATE:** 08/13/2024

**DEPARTMENT:** COUNTY COUNSEL

**AGENDA ITEM PREPARER:** Vanessa Delgado

**DEPT HEAD/DIRECTOR:** David Prentice

**SUBJECT:**

**CLOSED SESSION - CONFERENCE WITH LEGAL COUNSEL - POTENTIAL INITIATION OF LITIGATION**

Significant exposure to Litigation (Government Code Section 54956.9 (d)(2),(e)(3))

Number of cases 1:

This item was added as an urgency item by a 5-0 vote. The basis for the closed session was announced as "Potential initiation of litigation."

SBC FILE NUMBER: 160

**AGENDA SECTION:**

CLOSED SESSION

**BACKGROUND/SUMMARY:**

Hold closed session

**RESOLUTION OR ORDINANCE NEEDED FOR THIS ITEM:**

N/A

**CONTRACT NEEDED FOR THIS ITEM:**

N/A

**LAST CONTRACT AMOUNT OR N/A:**

N/A

**STATE IF THIS IS A NEW CONTRACT/ HOW MANY PAST AMENDED CONTRACTS/ OR N/A:**

N/A

**STRATEGIC PLAN GOALS: 1. Operational Development & Excellence**

Yes

**STRATEGIC PLAN GOALS: 2. Planning And Sustainable Growth**

No

**STRATEGIC PLAN GOALS: 3. Technology**

No

**STRATEGIC PLAN GOALS: 4. Community Engagement**

No

**STRATEGIC PLAN GOALS: 5. Health & Safe Community**

No

**BUDGETED:**

N/A

**BUDGET ADJUSTMENT NEEDED:**

N/A

**SOURCE OF FUNDING:**

N/A

**UNFUNDED MANDATE:**

N/A

**SBC BUDGET LINE ITEM NUMBER:**

N/A

**CURRENT FY COST:**

N/A



**STAFF RECOMMENDATION:**

Hold Closed Session

**ATTACHMENTS:**

**SPECIAL MEETING OF THE BOARD OF DIRECTORS  
SAN BENITO HEALTH CARE DISTRICT  
SUPPORT SERVICES BLDG., 2<sup>ND</sup> FLOOR GREAT ROOM**

**THURSDAY, JULY 25, 2024**

**4:00 PM**

**MINUTES**

**IN PERSON AND BY ZOOM VIDEO CONFERENCE**

**MINUTES**

**TELECONFERENCE LOCATION:<sup>1</sup>**

38088 Road 222

Wishon Cove, CA 93669

**Directors Present**

Bill Johnson, Board Member

Devon Pack, Board Member

Rick Shelton, Board Member

Josie Sanchez, Board Member

**Absent**

Jeri Hernandez, Board Member

**Also Present**

Mary Casillas, Chief Executive Officer

Mark Robinson, Chief Financial Officer

Amy Breen-Lema, VP Clinic, Ambulatory, & Phys. Services

Karen Descent, Interim Chief Nursing Officer

Heidi Quinn, District Legal Counsel

Chela Brewer, Executive Assistant

**1. Call to Order- Roll Call**

Directors, Johnson, Shelton, Pack, and Shelton were present; attendance was taken by roll call.

Director Jeri Hernandez was unable to attend remotely.

A quorum was present and the Special Meeting was called to order at 2:00 p.m. by Director Johnson.

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<sup>1</sup> Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Hernandez from the address above. This Notice and Agenda will be posted at the teleconference location.

## 2. **Public Comment**

An opportunity was provided for public comment on closed session, and individuals were given three minutes. There was no public comment.

## 3. **Closed Session**

President Johnson announced the items to be discussed in Closed Session as listed on the posted Agenda:

(1) Threat to Public Services or Facilities, Government Code §54957

Consultation with: Jorge Ramirez, Director of Emergency Management & Security, Hazel Hawkins Memorial Hospital.

(2) Conference with Labor Negotiator, Government Code §54957.6

Agency designated representative: Anne Olsen  
National Union of Healthcare Workers (NUHW)

The meeting was recessed into Closed Session at 4:05 p.m.

The Board completed its business of the Closed Session at 5:00 p.m.

## 4. **Reconvene Open Session/Closed Session Report**

The Board of Directors reconvened into Open Session at 5:00 p.m. District Counsel Quinn reported that in Closed Session the Board discussed: (1) Threat to Public Service of Facilities, Government Code §54957 and (2) Conference with Labor Negotiator, Government Code §54957.6

An update was provided to the Board but no reportable action was taken.

## 5. **Adjournment**

There being no further business or actions, the meeting was adjourned at 5:00 p.m.

The next Regular Meeting of the Board of Directors is scheduled for Thursday, August 22, 2024 at 5:00 p.m.

*Audio of the Special Board Meeting may be found at [Healthcare Services Hollister, CA | Hazel Hawkins Memorial Hospital](#)*

<sup>1</sup> Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Hernandez from the address above. This Notice and Agenda will be posted at the teleconference location.



Hazel Hawkins  
MEMORIAL HOSPITAL

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

**THURSDAY, JULY 25, 2024**

**5:00 P.M.**

**MINUTES**

**HAZEL HAWKINS MEMORIAL HOSPITAL**

**TELECONFERENCE LOCATION:<sup>1</sup>**

38088 Road 222

Wishon Cove, CA 93669

**Directors Present**

Jeri Hernandez, Board Member by teleconference

Bill Johnson, Board Member

Rick Shelton, Board Member

Devon Pack, Board Member

Josie Sanchez, Board Member

**Also Present**

Mary Casillas, Chief Executive Officer

Karen Descent, Interim Chief Nursing Officer

Amy Breen-Lema, VP, Clinic Ambulatory & Physician Services

Michael Bogey, MD, Chief of Staff

Heidi A. Quinn, District Legal Counsel

Richard Peil, B. Riley Advisory Services

Robert Miller, B. Riley Advisory Services

Chela Brewer, Executive Assistant

**1. Call to Order**

Attendance was taken by roll call; Directors Hernandez, Johnson, Shelton, Pack, and Sanchez were present.

A quorum was present and Director Hernandez, called the meeting to order at 5:11 p.m.

<sup>1</sup> Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Hernandez from the address above. This Notice and Agenda will be posted at the teleconference location.

## 2. **Board Announcements:**

Director Hernandez noted:

- She is joining remote and Director Johnson will take over if she experiences issues.

District Legal Counsel noted there will be proposed changes to the resolutions.

## 3. **Public Comment**

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

## 4. **Consent Agenda - General Business**

A. Consider and Approve Minutes of the Regular Meeting of the Board of Directors – June 27, 2024

B. Consider and Approve Policies:

- Telemetry Medical Surgical Policy

C. Receive Officer/Director Written Reports - No action required.

- Provider Services & Clinic Operations
- Skilled Nursing Facilities Reports (Mabie Southside/Northside)
- Laboratory and Radiology
- Foundation Report
- PMO Project Summary Report
- HR Turnover Report

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

**MOTION:** By Director Sanchez to approve Consent Agenda as presented with the Second by Director Shelton.

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

## 5. **Medical Executive Committee Meeting**

A. **Consider and Approve Medical Staff Credentials Reports:**

Dr. Bogey, Chief of Staff, provided a review of the Medical Executive Committee Credentials report dated July 24, 2024.

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration. There was no public comment.

**MOTION:** By Director Sanchez to approve the Credentials Reports as presented; Second by Director Shelton.

<sup>1</sup> Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Hernandez from the address above. This Notice and Agenda will be posted at the teleconference location.

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

B. Consider and Approve Medical Staff Conflict of Interest Policy

Dr. Bogey provided a review of the Medical Staff Conflict of Interest Policy.

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration. There was no public comment.

**MOTION:** By Director Hernandez to hold policy for additional edits as it is not ready for Board approval as presented; Second by Director Sanchez.

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

6. Receive Informational Reports

A. Chief Executive Officer

Mary Casillas provided highlights of the Chief Executive Officer Report.

Amy Breen-Lema provided an update on Physician Recruitment.

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

B. Chief Nursing Officer

Karen Descent, Interim Chief Nursing Officer, provided highlights of the Chief Nursing Officer Report, which is included in the Board packet.

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

C. Finance Committee

1. Finance Committee Meeting Minutes – July 18, 2024

2. Review Financial Updates

- Financial Statements – June 2024
- Finance Dashboard – June 2024
- Supplemental Payments – June 2024
- DHLP-SBHCD Loan

Mary Casillas, CEO provided a review of the financial statements, dashboard, supplemental payments and DHLP-SBHCD Loan included in the Board packet.

<sup>1</sup> Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Hernandez from the address above. This Notice and Agenda will be posted at the teleconference location.

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

## 7. Action Items

- A. Consider Recommendation for Board Approval of Resolution 2024-02 Approving Terms for a Lease, with Option to Purchase, of the District's assets with Insight Foundation of America.

Robert Miller and Richard Peil provided a review of the Resolution 2024-02 Approving Terms for a Lease with Option to Purchase, of the District's assets with Insight Foundation of America which was included in the packet. Proposed changes to the Resolution were presented to the Board. Questions from the Board were answered.

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

**MOTION:** By Director Johnson to approve Resolution 2024-02, as modified by the proposed changes, Approving Terms for a Lease with Option to Purchase, of the District's assets with Insight Foundation of America; Second by Director Pack.

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

- B. Consider Recommendation for Board Approval of Resolution 2024-03 Ordering an Election on a Ballot Measure Proposing the Transfer of Fifty Percent Or More of the District assets, for the Election of Certain Officers, Requesting County Elections to Conduct the Election and Requesting Consolidation of the Election

Mary Casillas provided a review of the Recommendation for Board Approval of Resolution 2024-03 which was included in the packet. Proposed changes to the Resolution and ballot language were presented to the Board. Questions from the Board were answered.

**MOTION:** By Director Johnson to approve Resolution 2024-03, as modified by the proposed changes, Ordering an Election on a Ballot Measure Proposing the Transfer of Fifty Percent Or More of the District assets, for the Election of Certain Officers, Requesting County Elections to Conduct the Election and Requesting Consolidation of the Election; Second by Director Shelton.

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

- C. Consider Recommendation for Board Approval of Professional Services Agreement with Letitia Bradford, M.D. for a Two-Year Term

Amy Breen-Lema provided a review of the proposed revisions to the District Board Approval of Professional Services Agreement, which was included in the packet. Questions from the Board were answered.

<sup>1</sup> Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Hernandez from the address above. This Notice and Agenda will be posted at the teleconference location.

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

**MOTION:** By Director Pack to approve the District Board Approval Policy as presented; Second by Director Sanchez.

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

8. **Adjournment:** There being no further regular business or actions, the meeting was adjourned at 7:02 p.m.

The next Regular Meeting of the Board of Directors is scheduled for Thursday, August 22, 2024 at 5:00 p.m.

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<sup>1</sup> Note: Pursuant to Government Code Section 54953(b), this meeting will include teleconference participation by Director Hernandez from the address above. This Notice and Agenda will be posted at the teleconference location.





Hazel Hawkins  
MEMORIAL HOSPITAL

**SPECIAL MEETING OF THE BOARD OF DIRECTORS  
SAN BENITO HEALTH CARE DISTRICT  
SUPPORT SERVICES BLDG., 2<sup>ND</sup> FLOOR GREAT ROOM**

**WEDNESDAY, JULY 31, 2024**

**2:30 PM**

**MINUTES**

**IN PERSON AND BY ZOOM VIDEO CONFERENCE**

**MINUTES**

**Directors Present**

Bill Johnson, Board Member, remote participation  
Devon Pack, Board Member  
Rick Shelton, Board Member  
Josie Sanchez, Board Member

**Absent**

Jeri Hernandez, Board Member

**Also Present**

Mary Casillas, Chief Executive Officer  
Mark Robinson, Chief Financial Officer  
Amy Breen-Lema, VP Clinic, Ambulatory, & Phys. Services  
Heidi Quinn, District Legal Counsel  
Chela Brewer, Executive Assistant

**1. Call to Order- Roll Call**

Directors Johnson, Pack, Shelton and Sanchez were present; Director Hernandez was absent. Attendance was taken by roll call. A quorum was present and Director Johnson called the meeting to order at 2:30 p.m. Director Johnson participated remotely under the “just cause” provision under AB 2449.

- 2. Consider and Approve Resolution 2024-04 Rescinding Resolution 2024-03, Ordering an Election, and Adopt a Revised Resolution 2024-05 Ordering an Election on a Ballot Measure Proposing the Transfer of Fifty Percent or More of the District Assets, for the Election of Certain Officers, Requesting County Elections to Conduct the Election, and Requesting Consolidation of the Election.**

Heidi Quinn, District Legal Counsel, provided a report to the Board.

An opportunity was provided for public comment and individuals were given three minutes.

**Motion:** Director Pack moved to approve Resolution 2024-04 Rescinding Resolution 2024-03, Ordering an Election; Second by Director Sanchez.

**Moved/Seconded/and Unanimously Carried:** Ayes: Directors Pack, Sanchez, Shelton, Johnson. Approved 4-0 by roll call, with Director Hernandez absent.

**Motion:** Director Pack moved to adopt Resolution 2024-05 Ordering an Election on a Ballot Measure Proposing the Transfer of Fifty Percent or More of the District Assets, for the Election of Certain Officers, Requesting County Elections to Conduct the Election, and Requesting Consolidation of the Election; Second by Director Shelton.

**Moved/Seconded/and Unanimously Carried:** Ayes: Directors Pack, Sanchez, Shelton, Johnson. Approved 4-0 by roll call, with Director Hernandez absent.

### **3. Adjournment**

There being no further business or actions, the meeting was adjourned at 2:48 p.m.

The next Regular Meeting of the Board of Directors is scheduled for Thursday, August 22, 2024 at 5:00 p.m.

*Audio of the Special Board Meeting may be found at [Healthcare Services Hollister, CA | Hazel Hawkins Memorial Hospital](#)*



Hazel Hawkins  
MEMORIAL HOSPITAL

**SPECIAL MEETING OF THE BOARD OF DIRECTORS  
SAN BENITO HEALTH CARE DISTRICT  
SUPPORT SERVICES BLDG., 2<sup>ND</sup> FLOOR GREAT ROOM**

**WEDNESDAY, AUGUST 8, 2024**

**1:30 PM**

**MINUTES**

**IN PERSON AND BY ZOOM VIDEO CONFERENCE**

**MINUTES**

**Directors Present**

Jeri Hernandez, Board Member  
Bill Johnson, Board Member  
Devon Pack, Board Member  
Rick Shelton, Board Member

**Absent**

Josie Sanchez, Board Member

**Also Present**

Mary Casillas, Chief Executive Officer  
Mark Robinson, Chief Financial Officer  
Amy Breen-Lema, VP Clinic, Ambulatory, & Phys. Services  
Karen Descent, Chief Nursing Officer  
Heidi Quinn, District Legal Counsel  
Richard Peil, B. Riley Advisory Services  
Tiffany Rose, Project Coordinator

**1. Call to Order- Roll Call**

Directors Hernandez, Johnson, Pack, and Shelton were present; attendance was taken by roll call. A quorum was present and Director Hernandez called the meeting to order at 1:32 p.m.

**2. Public Comment**

There was no public comment.

### **3. Closed Session**

District Counsel Quinn announced the item to be discussed in Closed Session as listed on the posted agenda is (1) Conference with Legal Counsel – Anticipated Litigation, Government Code §54956.9(b). The closed session is based upon San Benito County’s authorization to initiate litigation against the District (details included in the packet).

The meeting recessed into Closed Session at 1:33 p.m.

The Board completed its business of the Closed Session at 2:20 p.m.

### **4. Reconvene Open Session/Closed Session Report**

The Board of Directors reconvened Open Session at 2:20 p.m. District Counsel Quinn reported that in Closed Session the Board discussed: (1) Conference with Legal Counsel – Anticipated Litigation, Government Code §54956.9(b).

No reportable action was taken by the Board in the Closed Session.

### **5. Consider and Approve/Adopt:**

- A. The Ad Hoc Temporary Advisory Committee provided a report regarding items (A) Resolution 2024-06 Rescinding Resolution 2024-05, Ordering an Election on a Ballot Measure and the Election of Certain Officers; (B) Resolution 2024-07 Approving an Amended Term Sheet with Insight Foundation of America; and (C) Resolution 2024-08 Ordering an Election on a Ballot Measure Proposing the Transfer of Fifty Percent or More of the District Assets, for the Election of Certain Officers, Requesting County Elections to Conduct the Election, and Requesting Consolidation of the Election

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

#### **1. Resolution 2024-06 Rescinding Resolution 2024-05, Ordering an Election on a Ballot Measure and the Election of Certain Officers**

**MOTION:** By Director Hernandez to approve Resolution 2024-06 Rescinding Resolution 2024-05, Ordering an Election on a Ballot Measure and the Election of Certain Officers; Second by Director Pack.

**Moved/Seconded/Unanimously Carried:** Ayes: Directors Hernandez, Johnson, Shelton, and Pack. Absent: Director Sanchez. Approved 4-0 by roll call vote.

#### **2. Resolution 2024-07 Approving an Amended Term Sheet with Insight Foundation of America**

**MOTION:** By Director Johnson to approve Resolution 2024-07 Approving an Amended Term Sheet with Insight Foundation of America; Second by Director Pack.

**Moved/Seconded/Unanimously Carried:** Ayes: Directors Hernandez, Johnson, Shelton, and Pack. Absent: Director Sanchez. Approved 4-0 by roll call vote.

3. **Resolution 2024-08 Ordering an Election on a Ballot Measure Proposing the Transfer of Fifty Percent or More of the District Assets, for the Election of Certain Officers, Requesting County Elections to Conduct the Election, and Requesting Consolidation of the Election**

**MOTION:** By Director Pack to approve Resolution 2024-08 Ordering an Election on a Ballot Measure Proposing the Transfer of Fifty Percent or More of the District Assets, for the Election of Certain Officers, Requesting County Elections to Conduct the Election, and Requesting Consolidation of the Election; Second by Director Hernandez.

**Moved/Seconded/Unanimously Carried:** Ayes: Directors Hernandez, Johnson, Shelton, and Pack. Absent: Director Sanchez. Approved 4-0 by roll call vote.

6. **Adjournment**

There being no further business or actions, the meeting was adjourned at 2:52 p.m.

The next Regular Meeting of the Board of Directors is scheduled for Thursday, August 22, 2024 at 5:00 p.m.

*Audio of the Special Board Meeting may be found at [Healthcare Services Hollister, CA | Hazel Hawkins Memorial Hospital](#)*



## Deployment of Additional Security Officers

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### Disclaimer

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### Revision Insight

Document ID:	12119
Revision Number:	0
Owner:	Doug Mays, Director
Revision Official Date:	No revision official date

Revision Note:  
New policy.

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## Policy : Deployment of Additional Security Officers

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### PURPOSE

To ensure the safety and security of all patients, staff, and visitors at Hazel Hawkins Memorial Hospital, this policy outlines the procedure for house supervisors to call in additional security officers when the current security officers are occupied with other duties.

### POLICY

House supervisors are authorized to call in additional security officers under specific conditions to maintain a safe environment in the hospital. This policy provides the guidelines for such situations and the process to be followed.

#### **Conditions for Calling Additional Security Officers:**

1. **Immediate Threat:** Any situation where there is an immediate threat to the safety of patients, staff, or visitors that cannot be managed by the available security officers.
2. **Multiple Security Incidents:** Simultaneous security incidents occurring in different areas of the hospital that require more personnel than currently available.
3. **High-Risk Patient:** The presence of a high-risk patient requiring continuous security presence, thereby limiting the availability of security officers for other duties.
4. **Emergency Situations:** Any emergency situation such as a fire, active shooter, or bomb threat where additional security is needed to manage the situation effectively.

### PROCEDURE

1. **Assessment:** The house supervisor must assess the situation to determine the need for additional security officers.
2. **Authorization:** The house supervisor is authorized to make the decision to call in additional security officers based on the conditions outlined above.
3. **Communication:**
  - The house supervisor should immediately contact the security team lead or on-duty security supervisor to inform them of the situation and the need for additional officers.
  - If the security team lead or on-duty security supervisor is unavailable, the house supervisor should directly contact the security operations center.
4. **Request:**
  - Provide clear details of the situation, including the location, nature of the threat, and the number of additional officers required.
  - If possible, provide an estimated duration for which the additional security presence will be needed.
5. **Documentation:**
  - The house supervisor must document the incident and the rationale for requesting additional security.
  - Include the names of the security officers called in, the time of the request, and the duration of their deployment.

### POST-INCIDENT REVIEW

After the situation has been resolved, a debriefing session should be held involving the house supervisor, security team lead, and other relevant personnel to review the incident and the response. The objective is to identify any improvements in the procedure and ensure readiness for future incidents.

**Document ID**  
**Department**  
**Document Owner**

12119  
Administration - Multidisciplinary  
Mays, Doug

**Document Status**  
**Department Director**  
**Next Review Date**

Pending Committee Approval  
Fernandez, Jacqueline

**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%3Dhmmh%3A12119%240>.



## Continuing Education Policy

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### PURPOSE

This policy is designed to offer Physician Assistants and Nurse Practitioners (Providers) employed by the district opportunities for professional development, enhancing their skills and ensuring compliance within their roles. The work performance of our employees is crucial to the success of our organization. By investing in their professional development, we are contributing to both their career growth and the future success of our organization.

### POLICY

This policy outlines the San Benito Health Care District's (SBHCD) commitment to supporting professional development and compliance for all regular full-time and part-time Providers.

### PROCEDURE

Providers who have successfully completed their 90-day probationary period are eligible for Continuing Education (CE) Pay to support the maintenance and renewal of their licensure and certifications.

Physician Assistants will be granted fifty (50) CE hours every two years, and Nurse Practitioners will receive thirty (30) CE hours, provided they have completed their probationary period. Providers hired during the year will receive the corresponding CE hours upon completing their probationary period. Any unused hours will expire at midnight on December 31st at the end of their two-year period. These CE hour allocations and any subsequent grants are subject to the following guidelines:

1. Providers will receive one (1) hour of Continuing Education Pay for every one (1) CEU for time calculation.
2. Continuing Education Pay must be coordinated and approved by their department director or designee.
3. Continue Education Pay must not be used beyond the Providers benefited status.
4. Continuing Education Pay is not required for mandatory training such as BLS, ACLS, or NRP at the employee's choice.
5. Continuing Education Pay will not be paid out upon termination.
6. Continuing Education cannot be used for any associated travel, meals & housing expenses.

If approved, Continuing Education Pay that necessitates a provider's absence from work may be used in conjunction with paid time off. However, the total time granted shall not exceed the provider's current status.

Continuing Education Pay shall be paid to the Provider during the pay period it is used and at their base salary hourly rate of pay.

All Continuing Education Pay is contingent upon the receipt of a certificate or course syllabus signed by the course instructor, or other proof of participation such as a payment receipt. Any documentation provided must also include the duration of the course. Providers have up to two weeks from the course date to submit proof to their Director and the payroll department to receive payment. Payment will not be issued for submissions beyond the two-week period.

Requests for Continuing Education Pay that necessitate a Provider's absence from the workplace must be submitted in the same manner as other time-off requests. Approval of this time away will be at the discretion of the Department Director, based on departmental needs. Examples of such courses are provided below:

- Secondary education courses in related subjects lead to a degree or certification for your specialty.
- Seminars and symposia dealing with the practices of their position and specialty.
- Specialized courses relating to provider practice.
- Professional organization-sponsored conferences.
- Formally organized programs for health professionals open to Providers.
- Systems and programs with continuing education approval from the Provider's regulatory body.

**SUBJECT: RECRUITMENT AND RETENTION**

**PURPOSE**

To establish a uniform recruitment and retention program to hire and retain qualified applicants for job vacancies to reduce the Hospital's vacancy rates and avoid employee burnout. All recruiting efforts shall be directed by the Human Resources Director upon notification from a department manager that a job opening exists or is anticipated.

**POLICY**

In accordance with applicable federal, state and local law, San Benito Health Care District (SBHCD) provides equal opportunities for applicants and employees, regardless of race, gender expression, age, pregnancy, reproductive decision making, religion, creed, color, national origin, ancestry, physical or mental handicap, genetic information, veteran status, marital status, sex or any other protected class or status. SBHCD does not show partiality or grant any special status to any applicant, employee or group of employees unless otherwise required by law.

SBHCD will recruit and hire only those individuals who demonstrate a commitment to service and who possess the traits and characteristics that reflect personal integrity and high ethical standards.

**PROCEDURE**

**RECRUITMENT**

SBHCD shall employ a comprehensive recruitment and selection strategy to recruit and select employees from a qualified and diverse pool of candidates.

The strategy should include:

- (a) Identification of racially and culturally diverse target markets.
- (b) Use of marketing strategies to target diverse applicant pools.
- (c) Expanded use of technology and maintenance of a strong Internet presence. This may include an interactive SBHCD website and the use of SBHCD-managed social networking sites, when resources permit.
- (d) Expanded outreach through partnerships with media, community groups, citizen academies, local colleges, universities and the military.
- (e) Employee referral and recruitment incentive programs, when resources permit.
- (f) Consideration of shared or collaborative regional testing processes.
- (g) Posting positions both internally and externally.

SBHCD shall avoid advertising, recruiting and screening practices that tend to stereotype, focus on homogeneous applicant pools or screen applicants in a discriminatory manner.

SBHCD strives to facilitate and expedite the screening and testing process, and will periodically inform each candidate of his/her status in the recruiting process.

### **SELECTION PROCESS**

SBHCD shall actively strive to identify a diverse group of candidates that have in some manner distinguished themselves as being outstanding prospects. Minimally, SBHCD should employ a comprehensive screening, background check and selection process that assesses cognitive and physical abilities and includes review and verification of the following:

- (a) A comprehensive application for employment (including previous employment, references, current addresses, education, and contact information).
- (b) Employment eligibility, including U.S. Citizenship and Immigration Services (USCIS) Employment Eligibility Verification Form I-9 and acceptable identity and employment authorization documents consistent with Labor Code § 1019.1. This required documentation should not be requested until a candidate is hired. This does not prohibit obtaining documents required for other purposes.
- (c) Local, state and federal background checks. This will encompass various factors, including but not limited to education, criminal history, SSN trace, and sex offender listing. Notices will be provided in accordance with the requirements of the FCRA and the California Investigative Consumer Reporting Agencies Act.
- (d) Employee Health Screening. Which includes, but not limited to pre-employment physical, fit testing, immunizations, and TB screening.
- (e) A comprehensive evaluation of employees' skills and abilities via competency determination.
- (f) Panel interview assessment by appropriate department heads and/or designee(s).

### **NOTICES**

Upon selecting a candidate for a position, the Director or their appointed representative will formally notify Human Resources in writing of their decision. Subsequently, the Human Resources department will initiate contact with the chosen candidate to commence the hiring process.

Applicants unwilling to submit to a criminal background check are not considered for employment.

The Department of Human Resources will maintain a confidential file of persons who have been not hired/terminated as a result of sanction issues.

SBHCD will not knowingly contract or retain any person that has been:

- 
- Convicted of a criminal offense related to healthcare (unless the person or entity has implemented a compliance program as part of an agreement with the federal government),
  - Listed by a federal agency as debarred, excluded or otherwise ineligible for federal program participation.

The Medical Staff Office will screen all medical staff applicants upon receipt of the initial application to determine if they have:

- Excluded or debarred from a federally funded healthcare program.

All medical staff members will be screened every two years at the time of reappointment. This information will be maintained in the physician's medical staff credential file.

All medical staff professionals have an ongoing obligation to notify the Medical Staff Office if they are convicted of a criminal offense or have been excluded/debarred from a federally funded healthcare program.

The background report and all supporting documentation shall be maintained in accordance with the established records retention schedule, outlined in the policy.

### EMPLOYEE RETENTION

To sustain retention rates within SBHCD, the following protocols will be delineated, with additional measures potentially being included:

1. **Employee Forums & Communication:** Establishing regular sessions to facilitate dialogue between staff members and administration or their Directors, enabling an open exchange of ideas and concerns to address the needs of the District effectively. Employees are encouraged to provide feedback and suggestions for improvement through anonymous surveys and suggestion boxes. In addition, Directors provide ongoing feedback and coaching to support employee development and success.
2. **Well-being:** SBHCD actively encourages work-life balance by offering flexible work arrangements and advocating for the use of vacation time. Additionally, SBHCD provides resources for stress management, including counseling services and mindfulness training, to help employees develop effective coping strategies.
3. **Position Control:** Implementing a system to continuously evaluate staffing levels, mitigating the risk of employee burnout, and enhancing the standard of patient care by ensuring adequate personnel resources are available.
4. **Employee Activities:** Organizing various activities aimed at fostering a positive work environment and boosting morale among employees, thereby promoting a sense of camaraderie and well-being within the workplace. In addition, recognition programs, employee

of the month awards, and peer-to-peer appreciation initiatives are in place to acknowledge outstanding performance.

5. **Training Initiatives:** Introducing comprehensive training programs to enhance the knowledge and skill sets of employees, fostering personal and professional growth opportunities within the district and consequently contributing to overall employee satisfaction and retention.

SBHCD regularly reviews and evaluates the effectiveness of our recruitment and retention strategies. Feedback from employees, exit interviews, and performance metrics are used to identify areas for enhancement and implement necessary changes. Continuous learning and development opportunities are provided to ensure that our policies and practices remain current and effective.

#### **EXIT INTERVIEWS**

SBHCD will systematically administer exit interviews for all departing personnel as part of our ongoing effort to comprehensively evaluate the factors contributing to turnover. This process aims to gain insights into the underlying reasons for employee departures and to identify pertinent areas for improvement within our organization. By conducting these interviews, we seek to proactively address any issues or concerns that may have contributed to employee turnover, thereby fostering a more conducive and supportive work environment for our team members.

#### **EMPLOYMENT STANDARDS**

All candidates will be evaluated based on merit, ability, competence and experience, in accordance with the high standards of integrity and ethics valued by SBHCD.

Validated, job-related and nondiscriminatory employment standards shall be established for each job classification and shall minimally identify the training, abilities, knowledge and skills required to perform the position's essential duties in a satisfactory manner. Each standard should include performance indicators for candidate evaluation. The Department of Human Resources maintain validated standards for all positions.

It is the responsibilities for all facilities under SBHCD to maintain proper staffing levels as required by federal and state regulations. This standard is to be evaluated based on census and overtime occurring in the department(s). In the event there is an immediate need, temporary employment agencies and contractors are utilized to assist in recruiting needed positions, until a candidate is offered position.

## **Subject: Lactation Accommodation Policy**

### **Purpose**

The San Benito Health Care District (SBHCD) is dedicated to fostering the health and welfare of our employees and their families. This policy delineates our commitment to providing reasonable break times for employees who require time to express breast milk for their infant children during work hours.

### **Policy**

SBHCD will make concerted efforts to provide a safe, clean and free of hazardous materials private room or other appropriate location in close proximity to the employee's work area for the purpose of expressing breast milk. These designated spaces will comply with the stipulations outlined by the California Labor Code, including but not limited to:

- Provision of a surface to place a breast pump and personal items.
- Adequate seating arrangements.
- Access to electrical outlets.
- Availability of a nearby sink with running water.
- Access to a nearby refrigerator for storing expressed breast milk.
  - Ensure that all breast milk is properly labeled and removed daily, or as soon as possible, to prevent any expressed milk from being discarded.

### **Procedures**

Employees requesting accommodation for lactation breaks must submit a lactation request to either their department manager (or designee) and the Human Resources department. This request can be made either in writing or verbally.

Upon receipt of the request by the Human Resources department, an acknowledgment letter will be issued to the employee. This letter will be signed and subsequently placed in the employee's personnel file. It is imperative that the employee adheres to the following protocols:

- **Notification Acknowledgment**
  - If the employee does not receive a response or acknowledgment within five days of their initial request, they are advised to follow up in writing via email at [hr2@hazelhawkins.com](mailto:hr2@hazelhawkins.com).
- **Scheduling of Breaks**
  - The requested break time should, whenever possible, coincide with other scheduled break periods.
  - Non-exempt employees are required to clock out for any lactation breaks that do not coincide with their normally scheduled rest periods. Such breaks will be unpaid.
- **Rights and Complaints**
  - Employees retain the right to file a complaint with the Labor Commissioner for any violations of rights accorded under Chapter 3.8 of the California Labor Code regarding lactation accommodations.

### **References**

California Labor Code Section 1030-1034



**SUBJECT: PROGRESSIVE DISCIPLINE POLICY**

**PURPOSE**

San Benito Health Care District's (SBHCD) progressive discipline policy and procedures are designed to provide a structured corrective action process to improve and prevent a recurrence of undesirable employee behavior and performance issues.

**POLICY**

Outlined below are the steps of SBHCD's progressive discipline policy and procedures. SBHCD reserves the right to combine or skip steps depending on the facts of each situation and the nature of the offense. Some of the factors that will be considered are whether the offense is repeated despite coaching, counseling or training; the employee's work record; and the impact the conduct and performance issues have on the organization.

Employees covered by a Collective Bargaining Agreement (CBA) may have different disciplinary rights. This policy will govern disciplinary action for employees covered by a CBA except to the extent this policy and the CBA conflict, in which case the CBA will control.

**PROCEDURE**

The types of misconduct or infractions identified below are merely examples of conduct that may lead to disciplinary action. They are not a complete list of all types of conduct that can result in disciplinary action, up to and including discharge. The steps of progressive discipline are identified below.

The following violations are examples of actions, which normally result in immediate discharge without warning:

- Obtaining employment based on false or misleading information.
- Falsifying information in, or making material omissions in, any documents or records.
- Deliberate or reckless action that causes actual or potential injury, loss, destruction or damage to SBHCD property or supplies, or the property of another employee, or visitor.
- Theft or unauthorized removal from SBHCD premises of property that belongs to or is in the possession of SBHCD, another employee, or a visitor.
- Threats of violence
- Bringing or possessing firearms, weapons, or any other hazardous or dangerous devices on SBHCD property without proper authorization
- Absence of two (2) or more days without authorization from either the appropriate supervisor or human resources.
- Failure to return from an authorized leave of absence on the date such a leave ends.
- Dishonesty.
- Misuse of funds or property.
- Disclosure of confidential information.
- Working under the influence of alcohol, narcotics, illegal drugs or other intoxicants.





- Fighting or provoking a fight, threatening, intimidation or coercing any person on the job or on SBHCD property.
- Falsifying or destroying any time-keeping records.
- Violation of the Drug Free Workplace Policy.
- Discrimination prohibited by law.
- Harassment; especially sexual, racial or other harassment prohibited by law, to include behavior or language offensive to others.
- Incompetence, or inefficiency where a patient's welfare is jeopardized.

The violations listed below are examples of actions, which may result in immediate discharge, particularly if repeated or uncorrected, but would often, depending upon all pertinent facts and circumstances, result in other forms of disciplinary action:

- Unsatisfactory job performance as defined by the cognizant supervisor.
- Failure or refusal to perform the normal and reasonable duties of the position as assigned by a supervisor, or failure or refusal to perform work in the manner described by a supervisor.
- Carelessness or negligence when performing duties.
- Lack of cooperation.
- Excessive or unauthorized absence from or tardiness to work.
- Abuse of lunch or break periods.
- Leaving one's job during working hours without obtaining permission from the appropriate supervisor.
- Working unauthorized overtime.
- Non-compliance or disregard of any established safety rule.
- Violation of any safety, health, security or policies, rules or procedures of SBHCD.
- Failure to follow SBHCD policies as outlined in this guide or any newly instituted policies.

## PROGRESSIVE DISCIPLINE PROCEDURE

### ***Step 1: Counseling and verbal warning***

Step 1 creates an opportunity for the immediate supervisor to bring attention to the existing performance, conduct or attendance issue. The supervisor should discuss with the employee the nature of the problem or the violation of company policies and procedures. The supervisor is expected to clearly describe expectations and steps the employee must take to improve his or her performance or resolve the problem.

Within ten business days, the supervisor will prepare written documentation of the verbal counseling. The employee will be asked to sign this document to demonstrate his or her understanding of the issues and the corrective action.



***Step 2: Written warning***

The Step 2 written warning involves more formal documentation of the performance, conduct or attendance issues and consequences.

During Step 2, the immediate supervisor and a manager/director will meet with the employee to review any additional incidents or information about the performance, conduct or attendance issues as well as any prior relevant corrective action plans. Management will outline the consequences for the employee of his or her continued failure to meet performance or conduct expectations.

If necessary, a formal performance improvement plan (PIP) requiring the employee's immediate and sustained corrective action will be issued within ten business days of a Step 2 meeting. The written warning may also include a statement indicating that the employee may be subject to additional discipline, up to and including termination, if immediate and sustained corrective action is not taken.

***Step 3: Suspension and/or final written warning***

Some performance, conduct or safety incidents are so problematic and harmful that the most effective action may be the temporary removal of the employee from the workplace. When immediate action is necessary to ensure the safety of the employee or others, the immediate supervisor may suspend the employee pending the results of an investigation.

Suspensions that are recommended as part of the normal sequence of the progressive discipline policy and procedures are subject to approval from a next-level director and human resources (HR).

Depending on the seriousness of the infraction, the employee may be suspended without pay in full-day increments consistent with federal, state and local wage and hour employment laws.

Nonexempt/hourly employees may not substitute or use any accrued paid time off in lieu of the unpaid suspension. In compliance with the Fair Labor Standards Act (FLSA), unpaid suspension of salaried/exempt employees is reserved for serious workplace safety or conduct issues. HR will provide guidance to ensure that the discipline is administered without jeopardizing the FLSA exemption status.

Pay may be restored to the employee if an investigation of the incident or infraction absolves the employee of wrongdoing.

***Step 4: Recommendation for termination of employment***

The last and most serious step in the progressive discipline process is a recommendation to terminate employment. Generally, SBHCD will try to exercise the progressive nature of this policy by first providing warnings, issuing a final written warning or suspending the employee from the workplace before proceeding to a recommendation to terminate employment. However, SBHCD reserves the right to combine and skip steps depending on the circumstances of each situation and the nature of the offense. Furthermore, employees may be terminated without prior notice or disciplinary action.

Management's recommendation to terminate employment must be approved by HR and the department director or designate. Final approval may be required from the CEO or designee.



## **APPEALS PROCESS**

Employees will have the opportunity to present information to dispute information management has used to issue disciplinary action. The purpose of this process is to provide insight into extenuating circumstances that may have contributed to the employee's performance or conduct issues while allowing for an equitable solution.

If the employee does not present this information during any of the step meetings, he or she will have five business days after each of those meetings to present such information.

## **DOCUMENTATION AND DISCIPLINE RETENTION**

The employee will be provided copies of all progressive discipline documentation, including PIPs. The employee will be asked to sign copies of this documentation attesting to his or her receipt and understanding of the corrective action outlined in these documents.

Copies of these documents will be placed in the employee's official personnel file.

If after a one (1) year period of time following the issuance of the discipline there has been no other discipline imposed on the employee, the disciplinary notice shall be sealed within the employee's personnel file.

During any leave of absence, whether continuous or intermittent, the disciplinary timeline for employees will be frozen. Upon their return, the timeline will resume from the point of interruption, ensuring a comprehensive duration of a one (1) year period.



# Hazel Hawkins

MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors  
From: Amy Breen-Lema, Vice President, Clinic, Ambulatory & Physician Services  
Date: August 9, 2024  
Re: All Clinics – July 2024

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### **Rural Health and Specialty Clinics' visit volumes**

<b>Clinic Location</b>	<b>Total visits</b>
<i>Orthopedic Specialty</i>	339
<i>Multi-Specialty</i>	688
<i>Sunset</i>	910
<i>Primary Care &amp; Surgery</i>	323
<i>San Juan Bautista</i>	259
<i>1st Street</i>	548
<i>4th Street</i>	1,077
<i>Barragan</i>	640
<b>Total</b>	<b>4,784</b>

- \* The Hazel Hawkins Primary Care & Surgical Specialty Clinic successfully passed a certification survey conducted by The Compliance Team resulting in becoming the District's 6<sup>th</sup> certified rural health clinic in our network. All clinics provide vital primary care & specialty services to our community and we remain very grateful to our dedicated staff, physicians, physician assistants, and nurse practitioners who provide such great care.
  
- \* Provider recruitment activities with anticipated start dates by specialty:
  - Endocrinology: Maria Arambulo, M.D. – August 19, 2024
  - Behavioral Health/Psychiatry: Jehan Helmi, M.D. – August 26, 2024
  - Women's Health & C-section assist services: Marissa Diaz, PA-C – September 2024
  - Primary Care: Kimberly Hill, FNP – September 2024
  - Psychology: Kerri King, Ph.D. – August 2, 2024



# Hazel Hawkins MEMORIAL HOSPITAL

## Mabie Southside/Northside Skilled Nursing Facility Board Report – AUGUST 2024

To: San Benito Health Care District Board of Directors

From: Dee Cross, RN, MLS, Interim Director of Nursing, Skilled Nursing Facility

### 1. Census Statistics: July 2024

Southside	2024	Northside	2024
Total Number of Admissions	14	Total Number of Admissions	1
Number of Transfers from HHH	13	Number of Transfers from HHH	1
Number of Transfers to HHH	4	Number of Transfers to HHH	1
Number of Deaths	0	Number of Deaths	1
Number of Discharges	15	Number of Discharges	1
Total Discharges	15	Total Discharges	2
<b>Total Census Days</b>	<b>1284</b>	<b>Total Census Days</b>	<b>1343</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: July 2024

Southside	From	Payor	Northside	From	Payor
9	HHMH	Medicare	1 (Re-Admit)	HHH	Medicare
1	HHMH	CCA			
1	HHMH	PVT			
1	HHMH/Re-Admit	Medicare			
2	HHMH/Re-Admit	CCA			
<b>Total: 14</b>			<b>Total: 1</b>		

### 3. Total Discharges by Payor: July 2024

Southside	2024	Northside	2024
Medicare	11	Medicare	1
Medicare MC	0	Medicare MC	0
CCA	3	CCA	0
Medical	0	Medical	0
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	0	Hospice	1
Private (self-pay)	1	Private (self pay)	0
Insurance	0	Insurance	0
<b>Total:</b>	<b>15</b>	<b>Total:</b>	<b>2</b>

#### 4. Total Patient Days by Payor: July 2024

<b>Southside</b>	<b>2024</b>	<b>Northside</b>	<b>2024</b>
Medicare	289	Medicare	80
Medicare MC	0	Medicare MC	0
CCA	874	CCA	1069
Medical	31	Medical	155
Medi-Cal MC	0	Medi-Cal MC	0
Hospice	50	Hospice	3
Private (self-pay)	40	Private (self-pay)	31
Insurance	0	Insurance	0
Bed Hold / LOA	11	Bed Hold / LOA	5
<b>Total:</b>	<b>1295</b>	<b>Total:</b>	<b>1343</b>
<b>Average Daily Census</b>	<b>41.77</b>	<b>Average Daily Census</b>	<b>43.32</b>



# Hazel Hawkins MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors  
From: Bernadette Enderez, Director of Diagnostic Services  
Date: August 2024  
Re: Laboratory and Diagnostic Imaging



Updates:

**Laboratory**

1. Quality Assurance/Performance Improvement Activities
  - Update on chemistry analyzer project → Alinity analyzers delivered 8/12/24. Validation area preparation in process.
2. Laboratory Statistics

	July 2024	YTD
Total Outpatient Volume	3722	26957
Main Laboratory	1192	8084
HHH Employee Covid Testing	15	98
Mc Cray Lab	922	7000
Sunnyslope Lab	413	2678
SJB and 4 <sup>th</sup> Street	61	332
ER and ASC	1119	8675
Total Inpatient Volume	389	2050

**Diagnostic Imaging**

1. Service/Outreach
  - Ongoing validation to transition to having Stat Rad perform final reads.
2. Quality Assurance/Performance Improvement Activities
  - Performance Improvement Project: MRI time studies



**Hazel Hawkins**  
MEMORIAL HOSPITAL

3. Diagnostic Imaging Statistics

	<b>July 2024</b>	<b>YTD</b>
Radiology	1604	12206
Mammography	707	4974
CT	928	6303
MRI	173	1167
Echocardiography	100	793
Ultrasound	736	5354





TO: San Benito Health Care District Board of Directors  
 FROM: Liz Sparling, Foundation Director  
 DATE: August 2024  
 RE: Foundation Report

The Hazel Hawkins Hospital Foundation Board of Trustees met on August 8. INSIGHT joined our meeting via Zoom - Dayne Walling, Director of Public Policy & Government Relations presented an update on their plan for HHMH.

<b>Financial Report</b>	<b>July</b>
1. Income	\$ 9,911.58
2. Expenses	\$ 143,500.00
3. New Donors	2
4. Total Donations	147

**Allocations:**

- \$3,900 for 12 Patient Room Guest Chairs for Med/Surg from 2023 Dinner Dance Funds











**Dinner Dance Report:**

- We are excited about our in person Dinner Dance this year on **November 2** at the Paicines Ranch. Please mark your calendars! Our “Save the Date” and sponsorship solicitation letter have been mailed and we already have \$15,900 in sponsorships to date.
- Our Dinner Dance Committee selected the following people/organizations to be honored on November 2nd for at our Dinner Dance Fundraiser. They have all accepted and are thrilled and honored to be at our event.
  - A. **Hazel Hawkins Hospital Auxiliary** as our Donors of the Year
  - B. **Calera Wine Company/Duckhorn Portfolio** as our Business Donor of the Year
  - C. **Doug & Suzie Mays** as our “Heart for Hazel” recipients for their years of dedication to the Hospital and the Foundation.



## MARKETING

### • Social Media Posts

	<b>Celebrating 2024 World Breastfeeding Week</b> Thu, Aug 1	Post reach 290	Engagement 61
	<b>Join us on Thursday, August 1st to celebrate the benefits of breastfeeding and receive information for your family from our community partners.</b> Tue, Jul 30	Post reach 1,655	Engagement 45
	<b>SAN BENITO HEALTH CARE DISTRICT VOTES TO PUT LEASE TO OWN INITIATIVE ON THE NOVEMBER BALLOT Measure Will Ask Voters To Approve Deal to Lease With Option To Buy District Assets to Insight At its regularly scheduled board meeting, the San Benito Health Care District (District) approved a term sheet regarding a lease...</b> Fri, Jul 26	Post reach 216	Engagement 18
	<b>Our popular \$5 Jewelry &amp; Accessories sale is back! Thursday, July 25, 7 am - 6 pm Friday, July 26, 7 am - 3 pm HHH Women's Center - 2nd Floor Horizon Room</b> Wed, Jul 24	Post reach 820	Engagement 42
	<b>HMMH was delighted to welcome Dr. Fred Sadler and Dr. Valerie Berry, founders and leaders of the CSUMB Physician Assistant program, to the Hospital today. They expressed their heartfelt gratitude for our continued support. Our ER and clinics proudly host PA students during their medical rotations, offering invaluable mentorship from our...</b> Fri, Jul 12	Post reach 1,164	Engagement 322
	<b>4th of July Holiday Hours for HHH Clinics and Outpatient Services EMERGENCY DEPARTMENT ALWAYS OPEN 24/7</b> Tue, Jul 2	Post reach 588	Engagement 30
	<b>We are always proud of the excellent care our physicians and staff provide to our community. Today we received a phone call thanking Dr. Edwin Savay, ER physician, for saving their father's life. Dr. Savay was able to quickly assess and stabilize the patient and knowing the patient needed advanced cardiac care, was able to immediately work with...</b> Mon, Jul 1	Post reach 1,078	Engagement 406
	<b>Congratulations to our 2024 HHH family graduates!</b> Wed, Jun 26	Post reach 699	Engagement 126
	<b>"Proud of the Work We Do and the Difference We Make" We are extremely proud of the excellent care our staff provides to our community. Received from Gidget GoLightly Thumbs up for Hazel Hawkins Hospital! If it weren't for Dr Bogey and Hazel Hawkins ER... About 4 weeks ago I called 911. I thought I was having a heart attack. The medics...</b> Fri, Jun 21	Post reach 1,051	Engagement 448
	<b>Congratulations to our 2024 Auxiliary Scholarship recipients! Your applications were outstanding and the scholarships are very well deserved! Serena Adame Adriana Arroyo Corbin Bies Lacey Bourdet Angela Costales Brian Estrada Jacquelynn Juarez Ana Nunez Griselda Reynoso Amber Stroud Rosie Valencia</b> Fri, Jun 21	Post reach 749	Engagement 76

## EMPLOYEE ENGAGEMENT

### Employees:

- Joint Commission Celebration Food Truck events
- "Behind the Scenes" - highlighting behind the scenes departments/employees on social media

## MEDIA

### Public:

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

- Press Releases
  - Statement regarding San Benito County Board of Supervisors placing Advisory Measure on the November ballot
  - SBHCD votes to place Lease-to-Own Initiative on the November ballot
  - NUHW ratifies new contract with HHMH

### VIDEO'S POSTED ON SOCIAL MEDIA

- Celebrating World Breastfeeding Day Drive-through event

## COMMUNITY

- Assisted Jana Tomasini with World Breastfeeding Day drive-through event
- Auxiliary recognized for donating household items to the Helping Hands Program for homeless individuals to find permanent housing



**PMO Project Summary Report**

**Date: 8/13/24**

Summary of current and completed projects managed by the Project Management Office (PMO). This is a high-level overview of the PMO's activity, highlighting key initiatives and their outcomes.

**Current Projects**

<b><u>Project Name</u></b>	<b><u>Project Description</u></b>	<b><u>Start Date</u></b>	<b><u>Target Completion Date</u></b>	<b><u>Current Status</u></b>	<b><u>Key Deliverables</u></b>
Boiler Replacement	Replace existing boiler to enhance efficiency and reliability.		TBD	Demolition completed; structural slab pour completed; 14 day compaction results for slab strength received 07/08/24.  New Boiler Equipment approved to install on new concrete slab on 07/15/24.  Plumbing, electrical, and mechanical work in progress aiming at a completion date TBD.	Install new boiler.
Sterilizer Installation	Engineering to complete permit process and installation of new sterilizer to replace aging equipment.		Install will be scheduled ASAP after "Notice to Proceed with Construction" is released.	06/20/24 - Permit APPROVED; submitted to HCAI.  HCAI IOR retained for project.  Install will be scheduled ASAP after "Notice to Proceed w/ Construction" is released.	Installation of new sterilizer.



I.T. Room RTU Compressor Replacement	Replace RTU compressor - I.T. Room.		TBD	Replacement of Compressor completed 07/01/24 w/ Commercial Air. Getting additional estimates for completion.	Replace compressor equipment.
2 <sup>nd</sup> Floor SSB Doors Installation	Engineering to complete permit process and installation of doors on 2 <sup>nd</sup> Floor of SSB.		TBD	Awaiting doors and city permit; installation of wall, door/side light, and closer install to follow. Revised drawing based on feedback from contractor.	Installation of new doors – Support Serv Bldg 2 <sup>nd</sup> floor.
Lab Rebuild		6/3/24	TBD	Project kick off week of 06/03 with EP and structural walk through. PO issued for Chemical Analyzers due for delivery 08/12/24. HCAI meeting completed 06/26 w/ Traenor HL to discuss emergency replacement of Chemical Analyzers; temporary staging location changed per HCAI directive as "Temporary" Construction documents due early July/GC bid process to follow for Phase I & II.	



Seismic	Upgrade to meet HCAI seismic compliance and safety standards.		TBD	Awaiting five signs for install from HCAI; Traenor HL following.  Small rural hospital grant approved; Funding application process has been initiated. Pending OSHPD review on the report.	
HH OR Status			2025	Proposal submitted Work must be complete in 2025.  Schedule shared with HHH (Prior to CDPH exemption expiration).  Authorized Yes, to replace both lights.  Consultant site visit complete HHMH to connect Treanor to Striker to start the talk.	
Access eForms/Passport	Access Passport is a web-based forms solution that provides access to the functional elements you need to remove all paper from your forms processes—making them completely electronic from start to finish.	4/29/24	11/30/24	ADT delivered to TEST. We are testing data flow now. All servers installed with software. Security groups being developed.	New registration forms and new hardware install.



Hicuity	Remote Telemetry	8/8/24	10/29/24	Kickoff call completed. Working through tasks. On Site assessment scheduled.	Data Collection Worksheet (DCW) completed.
BD Anti Diversion & Pyxis Install	Install larger Pyxis in ICU. Current one will go to OB Surg. Install new in PACU and outside OR. Returning Anesthesia units. Implement pharmacy diversion software across all.	2/9/24	Jan 2025	Data extracts and mapping tables are being worked on. Kickoff call scheduled for 8.22.24.	Install additional units and move units. Install diversion software on units. Install data drops and electrical.
Bepoz	Add employees and employee numbers to Bepoz to allow for charging and payroll deduction of café charges.	6/3/24	TBD	Nutrition Services working on developing group settings and testing prior to entering employee data.	Building of employees for payroll deduction in the café.
EHR Project	Identify and demo EHR systems.	2/14/24	TBD	2 <sup>nd</sup> phase initiated for Expanse – ROI data being captured.	ROI data compiled by Finance.
Green Security Vendor Credentialing	Institutional safety company that combines credentialing and background investigation with advanced onsite technologies to	2/29/24	9/3/24	Equipment delivered. Training being scheduled.	Manage, track, background check, and credential ALL non-employees entering the hospital.



	control, manage, and monitor the access of ALL non-employees.				
Insight Due Diligence	Coordinate gathering of data and put in data room	3/19/24	TBD	Data room established. We are about 70% completed.	Collect data and populate new data room.
Promoting Interoperability	Meet measures and successfully attest to CMS regulations.	1/5/24	Q4 – calendar year (Oct-Nov-Dec)	In process-waiting on Iatric vendor for information. May have to submit waiver as vendor is not responsive and cannot provide any guarantee they can meet our deadline.	Attest and report out successful completion of identified measures.
National Graphics	Implement new forms vendor	8/9/24	Ongoing	Sent forms along with monthly usage for pricing.	Approval provided for 4 forms for Anesthesia & OR.
Securitas/Hugs	Enterprise-wide protection to infant and pediatric patients of all ages, including well newborns.	5/28/24	TBD	Hardware received and Project manager assigned to project. Waiting for kickoff call to be scheduled.	HUGS enterprise solution with tags.

**Completed Projects – FY 7.1.24 - 6.30.25**

<u>Project Name</u>	<u>Project Description</u>	<u>Start Date</u>	<u>Completion Date</u>	<u>Key Achievements</u>	<u>Lessons Learned</u>
ER Chiller	Rebuild ER Chiller		Completed		Rebuild ER Chiller





				Rebuild is complete	
Annex MD Office Compressor Replacement	Replace compressor equipment at Annex MD Office.		7/1/24 Completed	Replacement of Compressor completed 07/01/24 w/ Commercial Air	Replace compressor equipment.
TJC Cities	Installation of GFCI outlets in OR1 and L/D.		Completed	07/20/24 – GFCI install within OR and LD areas scheduled.	
OR Suite #1 (ASC)			7/12/23 Completed	RTU 5 coil and compressor repair scheduled 07/12/24.	
Hollister Paint kitchen/café – Kitchen Floor Epoxy	Refresh paint and epoxy floor in hospital kitchen/café.			07/08/24 - Painting project initiated; Epoxy floor painting in process.	
Contract Management Software	Demo, choose and build contract management repository	5/6/24	6/30/24 - Completed	Purchasing staff is entering contracts	Demo and selection of software
MD Staff	MD-Staff is a feature rich enterprise level credentialing system that is powerful, user friendly, and intuitive.	3/18/24	20-30 Weeks - Completed	Test Conversion Scheduled for 6/12/24 – Install completed	Provide Merge Documents and priv forms Training Upload checklists



ER door glass replacement – WC Window replacement	Replace glass door in Emergency Room and window in Women's Center.		7/1/24 Completed	Replace glass doors	New glass doors Emergency Room and Window in Women's Center.
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Medical Executive Committee

to be

Distributed at Meeting

CEO Report  
August 2024

**Legislative Updates**

- AB2098 - would extend repayment conditions for non-designated public hospitals with loans from the CHFFA. Passed through appropriations and goes to the Senate for vote.
- SB1432 – Seismic bill to extend due date passed out of appropriations. Going to Assembly for vote.
- AB3275 – Timely reimbursement from payors. Going to senate for vote.

**Physician Services**

**Recruitment Initiatives**

- We are currently working with four agencies to assist with ongoing recruitment efforts focusing on permanent candidates or ones who may transition from locum to permanent roles.
- An advertisement will be placed in the Mental Health Recruitment Guide for the annual American Psychiatry Association conference to expand our search for a psychiatrist.
- **Active postings for clinic positions include** Physician & PA/NP roles for psychiatry, endocrinology, pediatrics, family practice.

**Successful Recruiting Efforts Calendar YTD**

- January: **Joseph Fabry, D.O.** (General Surgery)
- March: **Stefan Klein, M.D.** (Orthopedic hand & upper extremity)
- April: **Yilma Kebelo, DPM** (Podiatry)
- July: **Leland Estrella, DNP, PMHNP** (Mental Health Nurse Practitioner)
- August: **Kerri King, PhD** (Psychologist) and **Letitia Bradford, M.D.** (Orthopedics). **Maria Arambulo, M.D.** (Endocrinology) starting as a locums with the potential to become permanent. **Jehan Helmi, M.D.** (Psychiatry) joining as a fully remote locum provider to fill the gap left by Dr. Malik's departure.

**Looking Forward**

- September: **Lida Zhen, M.D.** (Gastroenterology) will transition in with the current GI panel. **Roberto Pardo, P.A.** (GI Mid-Level Practitioner) will join the surgery clinic. **Marissa Diaz, P.A.** (Women's Health) and **Kimberly Hill, FNP** (Family Practice) to start.

## HUMAN RESOURCES DASHBOARD 2024

DEPARTMENTAL METRICS	June	July	YTD(Jan-July)
# Employees	685	687	680
# New Hires	11	10	91
# Terminations	7	10	67
Overall Turnover	1.0%	1.5%	8.4%
Nursing Turnover	0.8%	0.8%	10.8%

Terms By Union	June	July	YTD(Jan-July)
The California Nurses Association (CNA)	1	1	14
National Union of Healthcare Workers (NUHW)	5	3	38
California License Vocational Nurses (CLVN)	0	2	4
Engineers and Scientists of California (ESC)	0	1	1
Non-Union	1	3	10

Terms By Reason (V=Voluntary & IV= Involuntary)	June	July	YTD(Jan-July)
Personal (V)	1	1	14
New Opportunity(V)	0	4	4
Retirement (V)	1	0	10
Schedule (V)	0	0	3
Job Abandonment (V)	1	0	3
No Reason Given (V)	0	0	14
Relocating (V)	2	0	4
School (V)	1	1	2
No Show (V)	0	0	1
RIF(IV)	0	0	1
Performance (IV)	1	4	12

San Benito Health Care District  
Finance Committee Minutes  
August 15, 2024 - 4:30pm

Present: Jeri Hernandez, Board President  
Rick Shelton, Board Treasurer  
Mary Casillas, Chief Executive Officer  
Mark Robinson, Chief Financial Officer  
Amy Breen-Lema, Vice President Clinic, Ambulatory & Physician Services  
Karen Descent, Interim Chief Nursing Officer  
Sandra DiLaura, Controller

Public:

**1. CALL TO ORDER**

The meeting of the Finance Committee was called to order at 4:31pm.

**2. REVIEW FINANCIAL UPDATES**

**A. July 2024 Financial Statements**

For the month ending (and YTD) July 31, 2024, the District's Net Surplus (**Loss**) is \$1,130,282 compared to a budgeted Surplus (**Loss**) of **(\$272,273)**. The District exceeded its budget for the month by \$1,402,555.

Acute discharges were 180 for the month, exceeding budget by 47 discharges or 35%. The ADC was 15.10 compared to a budget of 12.59. The ALOS was 2.60. The acute I/P gross revenue exceeded budget by **\$1.9 million** while O/P services gross revenue was **\$1.98 million** or 8% over budget. ER I/P visits were 139 and ER O/P visits were over budget by 36 visits or 2%. The RHCs & Specialty Clinics treated 3,757 (includes 640 visits at the Diabetes Clinic) and 1,027 visits respectively.

**Other Operating** revenue exceed budget by **\$73,778** due mainly to interest from U.S. Bank accounts.

**Operating Expenses** were under budget by **\$706,295** due mainly to negative variances in: Registry of \$232,957 and Supplies of \$101,930 being off-set by positive variances in Salaries & Wages of \$381,420, Employee Benefits of \$301,599 and Professional Fees of \$287,409.

**Non-operating Revenue** slightly exceeded budget by **\$3,017**.

The SNFs ADC was **84.65** for the month. The Net Surplus (**Loss**) is \$136,934 compared to a budget of \$61,722.

**B. July 2024 Finance Dashboard**

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

**C. Other Financial Updates**

Other items noted included:

- Supplemental Payment Program for FY 2025 are budgeted amounts the final numbers will not be in for a few months. There is only one outstanding item for FY 2024 which is anticipated to come in September 2024.

**3. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF 401 (a) Pension Plan.**

Defined Contribution Pension Plan with a maximum of 4% match to the 401(a) plan. The contribution calculation is the employee's base rate times regular scheduled hours exclusive to call or standby pay. Eligibility is achieved by successfully passing hospital's probationary period. The Finance Committee recommends this resolution for Board approval.

**4. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF NUHW Bargaining Agreement.**

National Union of Healthcare Workers has come to an agreement with Hazel Hawkins. This agreement provides clarity on a few issues including salaries, pension opportunities, and personal time off (PTO) accrual as well as new medical insurance premiums decrease. The retro payment was accrued for prior years and the new rates are included in the current year budget. Increase in PTO accrual is based on years of service. The Finance Committee recommends this resolution for Board approval.

**5. ADJOURNMENT**

There being no further business, the Committee was adjourned at 5:19 pm.

Respectfully submitted,

Sandra DiLaura  
Controller



**Hazel Hawkins**  
MEMORIAL HOSPITAL

August 15, 2024

**CFO Financial Summary for the District Board:**

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HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED  
 HOLLISTER, CA 95023  
 FOR PERIOD 07/31/24

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE		
	ACTUAL 07/31/24	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23
GROSS PATIENT REVENUE:									
ACUTE ROUTINE REVENUE	3,525,032	2,751,303	773,729	28	2,751,302	2,751,303	773,729	28	2,751,302
SNF ROUTINE REVENUE	1,972,830	1,933,008	39,822	2	2,318,973	1,933,008	39,822	2	2,318,973
ANCILLARY INPATIENT REVENUE	4,638,265	3,549,220	1,089,045	31	3,607,728	3,549,220	1,089,045	31	3,607,728
HOSPITALIST\PEDES I\P REVENUE	0	0	0	0	137,889	0	0	0	137,889
TOTAL GROSS INPATIENT REVENUE	10,136,126	8,233,531	1,902,595	23	8,815,892	8,233,531	1,902,595	23	8,815,892
ANCILLARY OUTPATIENT REVENUE	28,201,616	26,217,811	1,983,805	8	25,703,754	26,217,811	1,983,805	8	25,703,754
HOSPITALIST\PEDES O\P REVENUE	0	0	0	0	53,898	0	0	0	53,898
TOTAL GROSS OUTPATIENT REVENUE	28,201,616	26,217,811	1,983,805	8	25,757,652	26,217,811	1,983,805	8	25,757,652
TOTAL GROSS PATIENT REVENUE	38,337,742	34,451,342	3,886,400	11	34,573,544	34,451,342	3,886,400	11	34,573,544
DEDUCTIONS FROM REVENUE:									
MEDICARE CONTRACTUAL ALLOWANCES	10,691,024	9,312,632	1,378,392	15	9,815,875	9,312,632	1,378,392	15	9,815,875
MEDI-CAL CONTRACTUAL ALLOWANCES	10,613,612	9,241,700	1,371,912	15	9,725,889	9,241,700	1,371,912	15	9,725,889
BAD DEBT EXPENSE	665,668	489,000	176,668	36	712,509	489,000	176,668	36	712,509
CHARITY CARE	1,214	36,429	(35,216)	(97)	44,219	36,429	(35,216)	(97)	44,219
OTHER CONTRACTUALS AND ADJUSTMENTS	4,510,102	4,064,788	445,314	11	4,024,786	4,064,788	445,314	11	4,024,786
HOSPITALIST\PEDES CONTRACTUAL ALLOW	0	0	0	0	(4,361)	0	0	0	(4,361)
TOTAL DEDUCTIONS FROM REVENUE	26,481,619	23,144,549	3,337,070	14	24,318,916	23,144,549	3,337,070	14	24,318,916
NET PATIENT REVENUE	11,856,122	11,306,793	549,329	5	10,254,628	11,306,793	549,329	5	10,254,628
OTHER OPERATING REVENUE	621,659	547,881	73,778	14	589,241	547,881	73,778	14	589,241
NET OPERATING REVENUE	12,477,782	11,854,674	623,108	5	10,843,869	11,854,674	623,108	5	10,843,869
OPERATING EXPENSES:									
SALARIES & WAGES	4,771,892	5,177,667	(405,775)	(8)	4,390,111	4,771,892	(405,775)	(8)	4,390,111
REGISTRY	479,102	229,839	249,263	109	176,048	229,839	249,263	109	176,048
EMPLOYEE BENEFITS	2,014,373	2,375,126	(360,753)	(15)	1,857,189	2,375,126	(360,753)	(15)	1,857,189
PROFESSIONAL FEES	1,368,632	1,656,213	(287,581)	(17)	1,532,333	1,656,213	(287,581)	(17)	1,532,333
SUPPLIES	1,058,394	943,127	115,267	12	854,563	943,127	115,267	12	854,563
PURCHASED SERVICES	1,210,970	1,151,622	59,348	5	1,083,635	1,151,622	59,348	5	1,083,635
RENTAL	120,495	150,183	(29,688)	(20)	114,389	150,183	(29,688)	(20)	114,389
DEPRECIATION & AMORT	318,704	318,477	227	0	325,656	318,477	227	0	325,656
INTEREST	6,082	28,179	(22,097)	(78)	26,997	28,179	(22,097)	(78)	26,997
OTHER	346,971	441,612	(94,641)	(21)	421,132	441,612	(94,641)	(21)	421,132
TOTAL EXPENSES	11,695,615	12,472,045	(776,431)	(6)	10,782,052	11,695,615	(776,431)	(6)	10,782,052
NET OPERATING INCOME (LOSS)	782,167	(617,371)	1,399,538	(227)	61,818	(617,371)	1,399,538	(227)	61,818

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED  
 HOLLISTER, CA 95023  
 FOR PERIOD 07/31/24

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE			
	ACTUAL 07/31/24	BUDGET 07/31/24	PERCENT VARIANCE	ACTUAL 07/31/23	BUDGET 07/31/23	PERCENT VARIANCE	ACTUAL 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	5,654	5,000	13	(558)			5,654	654	13	(558)
PROPERTY TAX REVENUE	241,122	241,122	0	174,854			241,122	0	0	174,854
GO BOND PROP TAXES	175,915	175,915	0	170,388			175,915	0	0	170,388
GO BOND INT REVENUE\EXPENSE	(65,081)	(65,081)	0	(68,721)			(65,081)	0	0	(68,721)
OTHER NON-OPER REVENUE	14,266	15,908	(10)	28,585			14,266	(1,642)	(10)	28,585
OTHER NON-OPER EXPENSE	(27,863)	(27,766)	(97)	(32,700)			(27,863)	(97)	0	(32,700)
INVESTMENT INCOME	4,101	0		1,051			4,101	4,101		1,051
COLLABORATION CONTRIBUTIONS	0	0	0	0			0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	348,115	345,098	1	272,899			348,115	3,017	1	272,899
NET SURPLUS (LOSS)	1,130,282	(272,273)	(515)	334,716			1,130,282	1,402,555	(515)	334,716
EBIDA	\$ 1,366,015	\$ (36,864)	(3,805.55)%	\$ 591,405			\$ 1,366,015	\$ 1,402,879	(3,805.55)%	\$ 591,405
EBIDA MARGIN	10.95%	(0.31)%	(3,620.09)%	5.45%			10.95%	11.26%	(3,620.09)%	5.45%
OPERATING MARGIN	6.27%	(5.21)%	(220.36)%	0.57%			6.27%	11.48%	(220.36)%	0.57%
NET SURPLUS (LOSS) MARGIN	9.06%	(2.30)%	(494.38)%	3.09%			9.06%	11.36%	(494.38)%	3.09%

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY  
HOLLISTER, CA 95023  
FOR PERIOD 07/31/24

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE		
	ACTUAL 07/31/24	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23
GROSS PATIENT REVENUE:									
ROUTINE REVENUE	3,525,032	2,751,303	773,729	28	2,751,302	2,751,303	773,729	28	2,751,302
ANCILLARY INPATIENT REVENUE	4,353,079	3,230,268	1,122,811	35	3,230,270	3,230,268	1,122,811	35	3,230,270
HOSPITALIST I/P REVENUE	0	0	0	0	137,889	0	0	0	137,889
TOTAL GROSS INPATIENT REVENUE	7,878,111	5,981,571	1,896,540	32	6,119,461	5,981,571	1,896,540	32	6,119,461
ANCILLARY OUTPATIENT REVENUE	28,201,616	26,217,811	1,983,805	8	25,703,754	26,217,811	1,983,805	8	25,703,754
HOSPITALIST O/P REVENUE	0	0	0	0	53,898	0	0	0	53,898
TOTAL GROSS OUTPATIENT REVENUE	28,201,616	26,217,811	1,983,805	8	25,757,652	26,217,811	1,983,805	8	25,757,652
TOTAL GROSS ACUTE PATIENT REVENUE	36,079,726	32,199,382	3,880,344	12	31,877,113	32,199,382	3,880,344	12	31,877,113
DEDUCTIONS FROM REVENUE ACUTE:									
MEDICARE CONTRACTUAL ALLOWANCES	10,439,130	9,104,621	1,334,509	15	9,510,175	9,104,621	1,334,509	15	9,510,175
MEDI-CAL CONTRACTUAL ALLOWANCES	10,500,531	9,120,222	1,380,309	15	9,580,907	9,120,222	1,380,309	15	9,580,907
BAD DEBT EXPENSE	681,501	484,000	197,501	41	647,290	484,000	197,501	41	647,290
CHARITY CARE	1,214	36,429	(35,216)	(97)	44,219	36,429	(35,216)	(97)	44,219
OTHER CONTRACTUALS AND ADJUSTMENTS	4,492,147	4,033,160	458,987	11	3,947,991	4,033,160	458,987	11	3,947,991
HOSPITALIST\PEDS CONTRACTUAL ALLOW	0	0	0	0	(4,361)	0	0	0	(4,361)
TOTAL ACUTE DEDUCTIONS FROM REVENUE	26,114,524	22,778,432	3,336,092	15	23,726,221	22,778,432	3,336,092	15	23,726,221
NET ACUTE PATIENT REVENUE	9,965,203	9,420,950	544,253	6	8,150,892	9,420,950	544,253	6	8,150,892
OTHER OPERATING REVENUE	621,659	547,881	73,778	14	589,241	547,881	73,778	14	589,241
NET ACUTE OPERATING REVENUE	10,586,862	9,968,831	618,031	6	8,740,133	9,968,831	618,031	6	8,740,133
OPERATING EXPENSES:									
SALARIES & WAGES	3,781,915	4,163,334	(381,420)	(9)	3,474,908	4,163,334	(381,420)	(9)	3,474,908
REGISTRY	432,957	200,000	232,957	117	141,859	200,000	232,957	117	141,859
EMPLOYEE BENEFITS	1,548,488	1,850,087	(301,599)	(16)	1,431,779	1,850,087	(301,599)	(16)	1,431,779
PROFESSIONAL FEES	1,366,422	1,653,831	(287,409)	(17)	1,530,123	1,653,831	(287,409)	(17)	1,530,123
SUPPLIES	948,931	847,001	101,930	12	758,208	847,001	101,930	12	758,208
PURCHASED SERVICES	1,125,740	1,062,336	63,404	6	999,391	1,062,336	63,404	6	999,391
RENTAL	119,229	149,089	(29,860)	(20)	113,398	149,089	(29,860)	(20)	113,398
DEPRECIATION & AMORT	279,580	278,940	640	0	286,263	278,940	640	0	286,263
INTEREST	6,082	28,179	(22,097)	(78)	26,997	6,082	(22,097)	(78)	26,997
OTHER	302,305	385,147	(82,842)	(22)	379,397	385,147	(82,842)	(22)	379,397
TOTAL EXPENSES	9,911,649	10,617,944	(706,295)	(7)	9,142,324	10,617,944	(706,295)	(7)	9,142,324
NET OPERATING INCOME (LOSS)	675,213	(649,113)	1,324,326	(204)	(402,191)	675,213	1,324,326	(204)	(402,191)

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY  
 HOLLISTER, CA 95023  
 FOR PERIOD 07/31/24

	-----CURRENT MONTH-----				-----PRIOR YR-----				-----YEAR-TO-DATE-----					
	ACTUAL 07/31/24	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23	ACTUAL 07/31/24	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23	ACTUAL 07/31/24	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE
NON-OPERATING REVENUE\EXPENSE:														
DONATIONS	5,654	5,000	654	13	(558)	5,654	5,000	654	13	(558)	5,654	5,000	654	13
PROPERTY TAX REVENUE	204,954	204,954	0	0	143,997	204,954	204,954	0	0	143,997	204,954	204,954	0	0
GO BOND PROP TAXES	175,915	175,915	0	0	170,388	175,915	175,915	0	0	170,388	175,915	175,915	0	0
GO BOND INT REVENUE\EXPENSE	(65,081)	(65,081)	0	0	(68,721)	(65,081)	(65,081)	0	0	(68,721)	(65,081)	(65,081)	0	0
OTHER NON-OPER REVENUE	14,266	15,908	(1,642)	(10)	28,585	14,266	15,908	(1,642)	(10)	28,585	14,266	15,908	(1,642)	(10)
OTHER NON-OPER EXPENSE	(21,675)	(21,578)	(97)	0	(25,412)	(21,675)	(21,578)	(97)	0	(25,412)	(21,675)	(21,578)	(97)	0
INVESTMENT INCOME	4,101	0	4,101	0	1,051	4,101	0	4,101	0	1,051	4,101	0	4,101	0
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	318,135	315,118	3,017	1	249,330	318,135	315,118	3,017	1	249,330	318,135	315,118	3,017	1
NET SUREPLUS (LOSS)	993,348	(333,995)	1,327,343	(397)	(152,861)	993,348	(333,995)	1,327,343	(397)	(152,861)	993,348	(333,995)	1,327,343	(397)

HAZEL HAWKINS SKILLED NURSING FACILITIES  
HOLLISTER, CA  
FOR PERIOD 07/31/24

	CURRENT MONTH			PRIOR YR			YEAR-TO-DATE			
	ACTUAL 07/31/24	BUDGET 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23	BUDGET 07/31/24	ACTUAL 07/31/24	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/23
GROSS SNF PATIENT REVENUE:										
ROUTINE SNF REVENUE	1,972,830	1,933,008	39,822	2	2,318,973	1,933,008	1,972,830	39,822	2	2,318,973
ANCILLARY SNF REVENUE	285,186	318,952	(33,766)	(11)	377,459	318,952	285,186	(33,766)	(11)	377,459
TOTAL GROSS SNF PATIENT REVENUE	2,258,016	2,251,960	6,056	0	2,696,431	2,251,960	2,258,016	6,056	0	2,696,431
DEDUCTIONS FROM REVENUE SNF:										
MEDICARE CONTRACTUAL ALLOWANCES	251,894	208,011	43,883	21	305,700	208,011	251,894	43,883	21	305,700
MEDI-CAL CONTRACTUAL ALLOWANCES	113,081	121,478	(8,397)	(7)	144,981	121,478	113,081	(8,397)	(7)	144,981
BAD DEBT EXPENSE	(15,833)	5,000	(20,833)	(417)	65,219	5,000	(15,833)	(20,833)	(417)	65,219
CHARITY CARE	0	0	0	0	0	0	0	0	0	0
OTHER CONTRACTUALS AND ADJUSTMENTS	17,955	31,628	(13,673)	(43)	76,794	31,628	17,955	(13,673)	(43)	76,794
TOTAL SNF DEDUCTIONS FROM REVENUE	367,096	366,117	979	0	592,695	366,117	367,096	979	0	592,695
NET SNF PATIENT REVENUE	1,890,920	1,885,843	5,077	0	2,103,736	1,885,843	1,890,920	5,077	0	2,103,736
OTHER OPERATING REVENUE	0	0	0	0	0	0	0	0	0	0
NET SNF OPERATING REVENUE	1,890,920	1,885,843	5,077	0	2,103,736	1,885,843	1,890,920	5,077	0	2,103,736
OPERATING EXPENSES:										
SALARIES & WAGES	989,978	1,014,333	(24,355)	(2)	915,203	1,014,333	989,978	(24,355)	(2)	915,203
REGISTRY	46,145	29,839	16,306	55	34,189	29,839	46,145	16,306	55	34,189
EMPLOYEE BENEFITS	465,885	525,039	(59,155)	(11)	425,410	525,039	465,885	(59,155)	(11)	425,410
PROFESSIONAL FEES	2,210	2,382	(172)	(7)	2,210	2,382	2,210	(172)	(7)	2,210
SUPPLIES	109,464	96,126	13,338	14	96,355	96,126	109,464	13,338	14	96,355
PURCHASED SERVICES	85,230	89,286	(4,056)	(5)	84,244	89,286	85,230	(4,056)	(5)	84,244
RENTAL	1,266	1,094	172	16	991	1,094	1,266	172	16	991
DEPRECIATION	39,123	39,537	(414)	(1)	39,392	39,537	39,123	(414)	(1)	39,392
INTEREST	0	0	0	0	0	0	0	0	0	0
OTHER	44,666	56,465	(11,799)	(21)	41,735	56,465	44,666	(11,799)	(21)	41,735
TOTAL EXPENSES	1,783,966	1,854,101	(70,135)	(4)	1,639,728	1,854,101	1,783,966	(70,135)	(4)	1,639,728
NET OPERATING INCOME (LOSS)	106,954	31,742	75,212	237	464,008	31,742	106,954	75,212	237	464,008
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	36,168	36,168	0	0	30,857	36,168	36,168	0	0	30,857
OTHER NON-OPER EXPENSE	(6,188)	(6,188)	0	0	(7,288)	(6,188)	(6,188)	0	0	(7,288)
TOTAL NON-OPERATING REVENUE/(EXPENSE)	29,980	29,980	0	0	23,569	29,980	29,980	0	0	23,569
NET SURPLUS (LOSS)	136,934	61,722	75,212	122	487,577	61,722	136,934	75,212	122	487,577

HAZEL HAWKINS MEMORIAL HOSPITAL  
 HOLLISTER, CA  
 For the month ended 07/31/24

	CURR MONTH 07/31/24	PRIOR MONTH 06/30/24	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/24
<b>CURRENT ASSETS</b>					
CASH & CASH EQUIVALENT	32,140,544	35,254,150	(3,113,606)	(9)	35,254,150
PATIENT ACCOUNTS RECEIVABLE	69,013,972	67,848,785	1,165,187	2	67,848,785
BAD DEBT ALLOWANCE	(9,539,989)	(9,487,617)	(52,372)	1	(9,487,617)
CONTRACTUAL RESERVES	(43,684,717)	(43,327,435)	(357,282)	1	(43,327,435)
OTHER RECEIVABLES	5,570,444	5,263,198	307,246	6	5,263,198
INVENTORIES	4,494,501	4,496,070	(1,569)	0	4,496,070
PREPAID EXPENSES	2,536,327	1,775,026	761,301	43	1,775,026
DUE TO\FROM THIRD PARTIES	1,892,052	1,892,052	0	0	1,892,052
<b>TOTAL CURRENT ASSETS</b>	<b>62,423,133</b>	<b>63,714,229</b>	<b>(1,291,096)</b>	<b>(2)</b>	<b>63,714,229</b>
<b>ASSETS WHOSE USE IS LIMITED</b>					
BOARD DESIGNATED FUNDS	6,970,142	4,072,225	2,897,917	71	4,072,225
<b>TOTAL LIMITED USE ASSETS</b>	<b>6,970,142</b>	<b>4,072,225</b>	<b>2,897,917</b>	<b>71</b>	<b>4,072,225</b>
<b>PROPERTY, PLANT, AND EQUIPMENT</b>					
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	44,684,771	44,585,938	98,832	0	44,585,938
CONSTRUCTION IN PROGRESS	1,412,196	1,243,050	169,146	14	1,243,050
<b>GROSS PROPERTY, PLANT, AND EQUIPMENT</b>	<b>149,565,815</b>	<b>149,297,836</b>	<b>267,979</b>	<b>0</b>	<b>149,297,836</b>
ACCUMULATED DEPRECIATION	(94,742,612)	(94,409,166)	(333,446)	0	(94,409,166)
<b>NET PROPERTY, PLANT, AND EQUIPMENT</b>	<b>54,823,202</b>	<b>54,888,670</b>	<b>(65,468)</b>	<b>0</b>	<b>54,888,670</b>
<b>OTHER ASSETS</b>					
UNAMORTIZED LOAN COSTS	392,237	398,148	(5,911)	(2)	398,148
PENSION DEFERRED OUTFLOWS NET	18,285,289	18,285,289	0	0	18,285,289
<b>TOTAL OTHER ASSETS</b>	<b>18,677,526</b>	<b>18,683,437</b>	<b>(5,911)</b>	<b>0</b>	<b>18,683,437</b>
<b>TOTAL UNRESTRICTED ASSETS</b>	<b>142,894,003</b>	<b>141,358,560</b>	<b>1,535,443</b>	<b>1</b>	<b>141,358,560</b>
<b>RESTRICTED ASSETS</b>	<b>19,052</b>	<b>18,593</b>	<b>459</b>	<b>3</b>	<b>18,593</b>
<b>TOTAL ASSETS</b>	<b>142,913,054</b>	<b>141,377,153</b>	<b>1,535,901</b>	<b>1</b>	<b>141,377,153</b>

HAZEL HAWKINS MEMORIAL HOSPITAL  
 HOLLISTER, CA  
 For the month ended 07/31/24

	CURR MONTH 07/31/24	PRIOR MONTH 06/30/24	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/24
CURRENT LIABILITIES					
ACCOUNTS PAYABLE	6,273,827	8,572,685	2,298,858	(27)	8,572,685
ACCRUED PAYROLL	5,278,538	4,776,918	(501,620)	11	4,776,918
ACCRUED PAYROLL TAXES	1,564,394	1,530,768	(33,626)	2	1,530,768
ACCRUED BENEFITS	6,155,886	6,695,829	539,943	(8)	6,695,829
ACCRUED PENSION (CURRENT)	4,952,331	4,952,331	0	0	4,952,331
OTHER ACCRUED EXPENSES	90,526	89,559	(967)	1	89,559
PATIENT REFUNDS PAYABLE	2,437	12,920	10,483	(81)	12,920
DUE TO\FROM THIRD PARTIES	294,647	294,647	0	0	294,647
OTHER CURRENT LIABILITIES	1,470,420	1,416,889	(53,531)	4	1,416,889
TOTAL CURRENT LIABILITIES	26,083,006	28,342,546	2,259,540	(8)	28,342,546
=====					
LONG-TERM DEBT					
LEASES PAYABLE	8,135,610	5,442,390	(2,693,221)	50	5,442,390
BONDS PAYABLE	31,713,601	31,742,121	28,520	0	31,742,121
TOTAL LONG TERM DEBT	39,849,212	37,184,511	(2,664,701)	7	37,184,511
=====					
OTHER LONG-TERM LIABILITIES					
DEFERRED REVENUE	0	0	0	0	0
LONG-TERM PENSION LIABILITY	36,485,864	36,485,864	0	0	36,485,864
TOTAL OTHER LONG-TERM LIABILITIES	36,485,864	36,485,864	0	0	36,485,864
=====					
TOTAL LIABILITIES	102,418,081	102,012,921	(405,161)	0	102,012,921
NET ASSETS:					
UNRESTRICTED FUND BALANCE	39,269,640	39,269,640	0	0	39,269,640
RESTRICTED FUND BALANCE	95,052	94,593	(459)	1	94,593
NET REVENUE/(EXPENSES)	1,130,282	0	(1,130,282)		0
TOTAL NET ASSETS	40,494,973	39,364,233	(1,130,740)	3	39,364,233
=====					
TOTAL LIABILITIES AND NET ASSETS	142,913,054	141,377,153	(1,535,901)	1	141,377,153
=====					

Description	Target	MTD Actual	YTD Actual	YTD Target
Average Daily Census - Acute	12.59	15.10	15.10	12.59
Average Daily Census - SNF	81.97	84.65	84.65	81.97
Acute Length of Stay	2.94	2.60	2.60	2.94
<b>ER Visits:</b>				
Inpatient	104	139	139	104
Outpatient	1,972	2,008	2,008	1,972
Total	2,076	2,147	2,147	2,076
Days in Accounts Receivable	50.0	56.6	56.6	50.0
Productive Full-Time Equivalents	521.33	500.09	500.09	521.33
Net Patient Revenue	11,306,793	11,856,122	11,856,122	11,306,793
Payment-to-Charge Ratio	32.8%	30.9%	30.9%	32.8%
Medicare Traditional Payor Mix	28.97%	26.09%	26.09%	28.97%
Commercial Payor Mix	21.43%	23.10%	23.10%	21.43%
Bad Debt % of Gross Revenue	1.42%	1.74%	1.74%	1.42%
EBIDA	-36,864	1,366,015	1,366,015	-36,864
EBIDA %	-0.31%	10.95%	10.95%	-0.31%
Operating Margin	-5.21%	6.27%	6.27%	-5.21%
Salaries, Wages, Registry & Benefits %: by Net Operating Revenue	65.65%	58.23%	58.23%	65.65%
by Total Operating Expense	62.40%	62.12%	62.12%	62.40%
<b>Bond Covenants:</b>				
Debt Service Ratio	1.25	8.78	8.78	1.25
Current Ratio	1.50	2.39	2.39	1.50
Days Cash on hand	30.00	87.36	87.36	30.00
Met or Exceeded Target				
Within 10% of Target				
Not Within 10%				



## Statement of Cash Flows

Hazel Hawkins Memorial Hospital  
Hollister, CA

Eleven months ending July 31, 2024

	CASH FLOW		COMMENTS
	Current Month 7/31/2024	Current Year-To-Date 7/31/2024	
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>			
Net Income (Loss)	\$1,130,282	\$1,130,282	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:			
Depreciation	333,446	333,446	
(Increase)/Decrease in Net Patient Accounts Receivable	(755,533)	(755,533)	
(Increase)/Decrease in Other Receivables	(307,246)	(307,246)	
(Increase)/Decrease in Inventories	1,569	1,569	
(Increase)/Decrease in Pre-Paid Expenses	(761,301)	(761,301)	
(Increase)/Decrease in Due From Third Parties	0	0	
Increase/(Decrease) in Accounts Payable	(2,298,858)	(2,298,858)	
Increase/(Decrease) in Notes and Loans Payable	0	0	
Increase/(Decrease) in Accrued Payroll and Benefits	(4,697)	(4,697)	
Increase/(Decrease) in Accrued Expenses	967	967	
Increase/(Decrease) in Patient Refunds Payable	(10,483)	(10,483)	
Increase/(Decrease) in Third Party Advances/Liabilities	0	0	
Increase/(Decrease) in Other Current Liabilities	53,531	53,531	Semi-Annual Int. - 2005 GO & 2021 Revenue Bonds
<b>Net Cash Provided by Operating Activities:</b>	<b>(3,748,605)</b>	<b>(3,748,605)</b>	
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>			
Purchase of Property, Plant and Equipment	(267,979)	(267,979)	
(Increase)/Decrease in Limited Use Cash and Investments	0	0	
(Increase)/Decrease in Other Limited Use Assets	(2,897,917)	(2,897,917)	Bond Principal & Int Payment - 2014 (2005) & 2021 Bonds
(Increase)/Decrease in Other Assets	5,911	5,911	Amortization
<b>Net Cash Used by Investing Activities</b>	<b>(3,159,985)</b>	<b>(3,159,985)</b>	
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>			
Increase/(Decrease) in Capital Lease Debt	2,693,221	2,693,221	
Increase/(Decrease) in Bond Mortgage Debt	(28,520)	(28,520)	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>2,664,701</b>	<b>2,664,701</b>	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	0	
<b>Net Increase/(Decrease) in Cash</b>	<b>(3,113,604)</b>	<b>(3,113,604)</b>	
Cash, Beginning of Period	35,254,150	35,254,150	
<b>Cash, End of Period</b>	<b>\$32,140,546</b>	<b>\$32,140,546</b>	\$0

\$367,893

Cost per day to run the District

87.36

Operational Days Cash on Hand

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

Payor	Budget 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	<b>Requires District to fund program and wait for matching return.</b> 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 (HOAF) CY 2022	-	2,405,548	Net amount rec'd on November 1, 2023 check for CY 2022.
- SB 239 Hospital Quality Assurance Fund (HOAF) 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 (HOAF) CY 2024	2,425,000	1,025,179	IGT by Feb. 23, 2024 of \$472,508, funds expected in April/May. Expected in December 2024.
- Rate Range Jan. 1, 2022 through Dec. 31, 2022	-	3,459,757	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	900,000	-	
- QIP PY 5 Settlement	-	(1,253,000)	Paid on 02/26/2024.
- QIP PY 6 Settlement	3,450,000	(1,222,438)	Paid on 04/08/2024.
- QIP PY 4 1st Loan Repayment	-	-	Due January 3, 2025.
- QIP PY 4 2nd Loan Repayment	-	-	
- QIP PY 5 Loan Repayment	(3,090,086)	-	
<b>IGT sub-total</b>	<b>4,499,014</b>	<b>7,689,581</b>	
<b>Non-Intergovernmental Transfer Programs:</b>			
- AB 915	4,100,000	4,143,717	<b>Direct Payments.</b> Received on March 11, 2024. Exp. June 2025.
- SB 239 Hospital Quality Assurance Fund (HOAF)	-	1,069,577	Expected by Sep. 30, 2024.
- SB 239 Hospital Quality Assurance Fund (HOAF)	-	3,208,731	1st, 2nd & 3rd Qtrs rec'd on 03/19/2024, 05/23/2024 & 06/27/2024. Expected by Sep. 30, 2024.
- SB 239 Hospital Quality Assurance Fund (HOAF) VIII	4,280,000	-	Based on actual cost difference.
- District Part, Nursing Facility (DP/NF)	-	1,452,877	Expected quarterly through June 30, 2025.
- Medi-Cal Disproportionate Share (DSH)	1,000,000	-	
<b>Non-IGT sub-total</b>	<b>9,380,000</b>	<b>9,874,903</b>	
<b>Program Grand Totals</b>	<b>13,879,014</b>	<b>17,564,484</b>	
Total Received	-	18,970,344	
Total Pending	16,969,100	1,069,577	
Total Paid	(3,090,086)	(2,475,438)	
Net Supplemental Payments	13,879,014	17,564,484	

**Resolution No. 2024-09**

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE SAN BENITO HEALTH CARE DISTRICT TO APPROVE AN AMENDED 401(a) PLAN**

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

**WHEREAS**, the District owns and operates certain health care facilities and real estate in the County of San Benito, California (“County”), including Hazel Hawkins Memorial Hospital (“Hazel Hawkins”), two skilled nursing facilities, five rural health clinics, two community health clinics, and two satellite lab/draw stations;

**WHEREAS**, the District is the sole provider of certain health care services in the County, including the emergency and related hospital services provided at Hazel Hawkins;

**WHEREAS**, due to multiple factors affecting hospitals and other health care providers for many years, the District declared a fiscal emergency on November 4, 2022, and filed for Chapter 9 bankruptcy on May 23, 2023;

**WHEREAS**, despite the efforts over the past several years of the District’s management (“Management”) and District Board of Directors (“Board”) to reduce expenses, uncontrollable increases in expenses and decreases in revenues have created an operating gap and cash flow deficit that threatens the District’s long-term fiscal viability and, if allowed to continue, could threaten patient care and patient safety;

**WHEREAS**, effective January 1, 1995, the District established The San Benito Health Care District Defined Contribution Matching Plan (“Plan”);

**WHEREAS**, the District has continued to maintain the Plan, on a frozen basis for the past twenty years, with the recordkeeping assistance of Corebridge Financial (“Corebridge”);

**WHEREAS**, as part of its ongoing strategy to improve the District’s finances, the District’s Management and its Board would like to reactivate the Plan, and once again provide employer matching contributions in exchange for certain benefits that once had been provided under the District’s now-frozen defined benefit pension plan;

**WHEREAS**, the District’s special labor counsel (“Labor Counsel”) has been in negotiations and discussions with various of the District’s collective bargaining units and unrepresented employee groups concerning the reactivation of the Plan in exchange for appropriate concessions by such groups;

**WHEREAS**, Labor Counsel and Management have received advice and input from the District’s special employee benefits counsel (“Benefits Counsel”) regarding best options and practices for amending and reactivating the Plan for the purposes mentioned above;

**WHEREAS**, the District’s Management, Labor Counsel, and Benefits Counsel are making the following recommendations regarding the amendment and reactivation of the Plan, as follows (“Recommendations”):

- 1) amend the Plan to reduce the eligibility period to ninety (90) days of employment;
- 2) amend the Plan to provide for entry into the Plan as of the next full payroll period beginning after Plan eligibility;
- 3) amend the Plan to provide for 100% immediate and full vesting as of the date of entry into the Plan;
- 4) amend the Plan to provide for a District-funded employer match of 4% of the participant’s compensation, provided that the participant defers at least 1% of their compensation into the District’s Deferred Compensation Plan (i.e., the match will be funded on a payroll by payroll basis and shall not exceed 4% of the participant’s Plan compensation for such payroll);
- 5) amend the Plan to limit distributions to single sums and direct/indirect rollovers; and
- 6) appoint the District’s CEO and CFO as co-plan administrators of the Plan and to authorize them to:
  - a) establish the appropriate effective date(s) of the foregoing Plan amendments and the implementation of the reactivated matching arrangement with the Deferred Compensation Plan;
  - b) finalize and execute the amendment and restatement of the Plan in accordance with these Recommendations; and
  - c) arrange for and oversee the appropriate and timely notification and education of District employees affected by these changes, so that they can take advantage of the new matching benefits;

**WHEREAS**, the District Board has determined it is in the best interests of the District and the communities served by the District, and in furtherance of the District’s mission, that the District amend and reactive the Plan by approving the Recommendations.

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

**SECTION 1.** The District Board of Directors hereby finds and determines that the foregoing recitals are severally ratified, confirmed, approved and adopted in all respects.

**SECTION 2.** The District Board approves the foregoing Recommendations of Management and Counsel in all respects.

**SECTION 3:** The CEO and the CFO are hereby authorized to take any and all reasonable and necessary actions, including the adoption of additional, related Plan amendments, provided that such amendments do not have a significant adverse cost impact on the District, to carry out the purposes of these Resolutions.

PASSED AND ADOPTED this 22nd day of August, 2024 by the following vote:

AYES:

NOES:

ABSTENTIONS:

ABSENT:

\_\_\_\_\_  
Jeri Hernandez, President

Attested: \_\_\_\_\_  
Josie Sanchez, Secretary

Hazel Hawkins Memorial Hospital  
Changes to Benefits  
For the FYE June 30, 2025

Est. Cost  
Year 1

---

\$2,000,000

**401(a) Defined Contribution Pension Plan**

- The cost is based on all eligible employees participating in the plan.

**Overview:**

- Eligibility is achieved by successfully passing the hospital's probationary period.
- Vesting is upon completion of the probationary period.
- The "Normal" retirement age is 65 or fully vested as indicated above.
- The contribution calculation is the employee's base rate times regular scheduled hours exclusive of call or standby pay.
- If an employee contributes 1% to the 457(b) plan, the hospital will contribute a "maximum" of 4% to the 401(a) plan.
- Maximum contributions by an employee are proscribed by the IRS.
- Effective Date as soon as Corebridge can implement the plan.

**Resolution No. 2024-10**

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE SAN BENITO HEALTH CARE DISTRICT APPROVING AND ADOPTING A MEMORANDUM OF UNDERSTANDING WITH THE NATIONAL UNION OF HEALTHCARE WORKERS**

**WHEREAS**, the San Benito Health Care District (“District”), acting through its appointed negotiation team, and representatives of the National Union of Healthcare Workers (“NUHW”), a duly recognized employee organization representing certain healthcare workers, met and conferred in good faith and fully communicated and exchanged information concerning wages, hours, and the terms and conditions of employment;

**WHEREAS**, the appointed representatives of the District and NUHW agreed on certain matters as provided in the tentative agreements (“Tentative Agreements”), attached hereto, and recommend the District and NUHW implement those Agreements in the form of a Memorandum of Understanding;

**WHEREAS**, on August 8, 2024, the NUHW voted to ratify the proposed changes to the existing Memorandum of Understanding with Hazel Hawkins Memorial Hospital, as outlined in the Tentative Agreements;

**WHEREAS**, the MOU shall expire on June 30, 2025;

**WHEREAS**, the District Board of Directors (“Board”) has been presented with a summary of the Tentative Agreements for approval; and

**WHEREAS**, the Board has reviewed and evaluated the Tentative Agreements and authorizes the District to approve and adopt the MOU containing the Tentative Agreements and authorizes the District Administration to take all steps to execute the necessary documents.

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

**SECTION 1.** The Recitals set forth above are true and correct and are incorporated into this Resolution by reference.

**SECTION 2.** The Board has hereby approved the Tentative Agreements for incorporation into the MOU for the period of 1/1/2022 – 12/31/25.

**SECTION 3.** The District Administration is directed to take any and all actions, including executing relevant documents, to carry out the intent of this Resolution.

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

PASSED AND ADOPTED this 22nd day of August, 2024 by the following vote:

AYES:

NOES:

ABSTENTIONS:

ABSENT:

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Jeri Hernandez, President

Attested: \_\_\_\_\_  
Josie Sanchez, Secretary



Hazel Hawkins Memorial Hospital  
 Changes to Benefits per the N.U.H.W. Agreement  
 For the FYE June 30, 2025

Costs

**Bargaining Unit Raises include:**

- Retro to 1st ppe in Janaury 2022
- Retro to 1st ppe in Janaury 2023
- Retro to 1st ppe in Janaury 2024

Totals

\$ 2,000,000

- The retro payment amount was accrued in prior years.
- The new payment rates are included in the budget.

**Increase of PTO accrual at:**

- 10 years of service an increase from 30 to 33.
- 15 years of service an increase from 30 to 34.
- 20 years of service an increase from 30 to 35.
- 25 years of service an increase from 30 to 36.

TBD

- It will take time for the payroll department to calculate the increase based on employee seniority.

	<u>Current</u>	<u>New</u>
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**Changes to Health Insurance Premiums:**

- Employee only: Fulltime per pay period
- Employee only: Part-time per pay period
- Employee plus 1: Fulltime per pay period
- Employee plus 1: Part-time per pay period

-	\$ 92.32	\$ 70.00
-	\$ 115.38	\$ 90.00
-	\$ 138.46	\$ 115.00
-	\$ 161.54	\$ 135.00

- All Employee plus 1 or more pay the same premium.

**401(a) Defined Contribution Pension Plan:**

- The amount is included in the hospital wide estimate.

# TENTATIVE AGREEMENT SUMMARY

On July 24, after two years of difficult, detailed, and complex bargaining, the rank-and-file NUHW Bargaining Committee reached a tentative agreement with Hazel Hawkins management. The tentative agreement is now subject to a vote of the NUHW membership. **Our NUHW bargaining committee is unanimously recommending a YES vote on the new agreement.**

Our contract is a short-term agreement, something that our committee decided was best for now, based on the unknowns that we are facing regarding the future of the hospital. Namely, will Insight take over the operations of the hospital? Will the County? Will the voters approve a change in the hospital's operations? What will the judge rule later this year regarding the hospital's appeal of the bankruptcy ruling? If the judge rules against the hospital, will Hazel Hawkins' appeal the case to the 9th Circuit Court of Appeals, which would delay the outcome into next year? In considering all this uncertainty, our NUHW committee agreed to a new contract that will expire on June 30, 2025. This will give us an opportunity later this year and early next year to bargain again and to revisit any of the concessions and changes the hospital imposed. One of our most important goals was to preserve our retroactive wage increases.

In these negotiations, the major battle we confronted was the employer's imposition of PTO, health plan, and retirement take-aways. We had to threaten a strike. Finally, we were able to lessen the impact of those concessions but we have to recognize the sacrifice our members have made during the last two and half years.



## Tentative Agreement Ratification Vote

Wednesday, August 7

6 a.m. to 4 p.m.

Thursday, August 8

2 p.m. to 7 p.m.

**Place:** Breakroom near the cafeteria

**The NUHW Bargaining Committee recommends a YES vote**

## SUMMARY OF TENTATIVE AGREEMENT

### WAGES

**3.5% Across-the-Board Increase (2022).** Effective the first full pay period after 1/1/22, all currently active employees will receive a 3.5% across-the-board increase retroactively on all hours paid. The wage appendix will be adjusted accordingly.

**3% Across-the-Board Increase (2023).** Effective the first full pay period after 1/1/23, all currently active employees will receive a 3% across-the-board increase retroactively on all hours paid. The wage appendix will be adjusted accordingly,

**3% Across-the-Board Increase (2024).** Effective the first full pay period after 1/1/24, all currently active employees will receive a 3% across-the-board increase retroactively on all hours paid. The wage appendix will be adjusted accordingly.

**3% Across-the-Board Increase (2025).** Effective the first full pay period after 1/1/25, all currently active employees will receive a 3% across-the-board increase on all hours paid. The wage appendix will be adjusted accordingly.

**Term of Agreement.** The contract ends June 30, 2025.

**Separate Check.** The retroactive pay for 2022, 2023, and 2024 will be paid in a separate check and will be issued within 30 days of ratification of the contract.

**PTO (formerly Vacation, Sick Leave and Holidays)**

The employer has combined vacation, sick leave and holidays into a single PTO program.

The maximum cap on accrual of PTO hours is 320 hours.

Accrual Rates have been improved from the imposed rates as follows:

Years of Service	PTO Days Per Year
1 Year of Service	20 Days Per Year
2 Years of Service	21 Days Per Year
3 Years of Service	22 Days Per Year
4 Years of Service	23 Days Per Year
5-9 Years of Service	30 Days Per Year
10 Years of Service	33 Days Per Year
15 Years of Service	34 Days Per Year
20 Years of Service	35 Days Per Year
25 Years of Service	36 Days Per Year

**Juneteenth and MLK Holidays** will be included in the agreement.

**Sick Leave Bank.** Any sick leave accrued prior to implementation of PTO will be used for illness of the employee until it is exhausted.

**Vacation Bank.** Any currently accrued vacation will be considered "Legacy Vacation." Legacy Vacation can be cashed out by November of each year. This is the only paid time benefit that is eligible for cash out. The actual amount of legacy vacation days that are eligible for cash out will be announced by the hospital.

If an employee wants a cash out, they must submit a request by December 1. The payment of the cash out will be the last pay period of the following January.

**RETIREMENT**

**Defined Benefit Pension Substitution.** The pension will be replaced with a Defined Contribution Benefit Plan.

**Benefits of Defined Benefit Plan—Preserved.** The benefits of the current Defined Benefit Plan have been frozen, that is, the hospital, since the date of the imposition of the take-away, has not made any new contributions to the plan to enhance the benefit for participating employees. However, it must continue to fund the plan so that employees who were in the plan have their retirement benefit available when they retire.

**Defined Contribution Plan to be Implemented.**

- The employer will institute a defined contribution plan (401a).

- Employees who pass their probationary period are immediately eligible for the 401a plan and will be considered fully vested in the plan, i.e., any funds in the plan belong to the employee.
- If an employee wishes to participate in the 401a plan, which provides that the hospital contribute an amount equal to 4% of the employee's salary, (important) the employee must contribute at least an amount equal to 1% of their salary to the 457b Deferred Compensation account already in existence. Maximum contributions made by the employee beyond the foregoing contributions are subject to IRS rules and regulations.

**HEALTH INSURANCE**

The co-pays and deductibles currently imposed remain.

Imposed premiums have been reduced as follows:

COVERED	FULL-TIME EMPLOYEE	PART-TIME EMPLOYEE
For Employee only	\$70 per pay period	\$90 per pay period
Employee + 1	\$115 per pay period	\$135 per pay period
Employee + 2	\$115 per pay period	\$135 per pay period
Employee + 3 or more	\$115 per pay period	\$135 per pay period

The employer will continue to explore the possibility of moving to a commercial health plan.

**EDUCATIONAL LEAVE**

The employer will offer the number of hours necessary for employees to renew required licensure. The hours will be available for two years and renewed every two years. There is no carry over after each two-year period. This program applies to employees who are currently eligible for educational leave.

**STANDBY PAY**

Prior to implementation of the concessions, when an employee was on standby and called back to work, they received both the premium pay and the standby pay, while at work. Now, when they are called to work, they only receive the premium pay while at work. The standby pay will continue to be paid while the employee is not at work.

**NO OTHER CHANGES**

For all other purposes the provisions of the current agreement remain the same, allowing for modifications commensurate with the agreed-upon tentative agreements.

# RESUMEN DEL ACUERDO TENTATIVO

El 24 de julio, tras dos años de negociaciones difíciles, detalladas, y complejas, el Comité de Negociación de NUHW compuesto por trabajadores, alcanzó un acuerdo tentativo con la gerencia de Hazel Hawkins. El acuerdo tentativo ahora está sujeto a un voto por parte de los miembros de NUHW. Nuestro Comité de Negociación de NUHW unánimemente recomienda un voto de Sí a favor del nuevo acuerdo. Le demos mucho al Comité de Negociación de NUHW y a sus compañeros de trabajo que participaron en estas negociaciones para resolver las preocupaciones de sus colegas.

Nuestro contrato es muy corto, algo que nuestro comité decidió era lo mejor por ahora, en base a todas las incertidumbres que enfrentamos sobre el futuro del hospital. En particular, ¿si Insight se hará cargo de las operaciones del hospital? ¿O si será el condado? ¿Aprobarán los votantes un cambio en las operaciones del hospital? ¿Cuál será la determinación del juez en unos meses con respecto a la apelación del hospital sobre el dictamen del caso de bancarota? Si el juez falla en contra del hospital, ¿Llevará Hazel Hawkins su apelación ante la Corte de Apelaciones del 9o Distrito, lo que retrasaría el resultado hasta el próximo año? Al considerar todas estas incógnitas, nuestro comité de negociaciones de NUHW alcanzó un nuevo contrato que dura hasta el 30 de junio de 2025. Esto nos dará la oportunidad más tarde este año y a principios del próximo de negociar de nuevo y visitar cualquiera de las concesiones y cambios que el hospital haya impuesto. Uno de nuestros objetivos principales era preservar nuestros aumentos salariales retroactivos.

En estas negociaciones, la batalla más fuerte que enfrentamos fue la imposición de recortes al PTO, plan de salud, y jubilación por parte del empleador. Tuvimos que amenazar con una huelga. Al final logramos aminorar el impacto de estas concesiones en este acuerdo tentativo, pero debemos reconocer el sacrificio que han hecho nuestros miembros durante los últimos dos años y medio.



## Voto de Ratificación del Acuerdo Tentativo

Miércoles 7 de agosto

6 a.m. – 4 p.m.

Jueves 8 de agosto

2 p.m. – 7 p.m.

**Lugar:** Sala de descanso  
cerca de la cafetería

**El Comité de Negociación de  
NUHW recomienda votar Sí por el  
Acuerdo Tentativo**

## RESUMEN DEL ACUERDO TENTATIVO

### SALARIOS

**Aumento del 3.5% para todos (2022).** A partir del primer período de pago completo después del 1/1/22, todos los empleados actualmente activos recibirán un aumento general del 3.5% de forma retroactiva en todas las horas pagadas. El apéndice salarial se ajustará en consecuencia.

**Aumento del 3% para todos (2023).** A partir del primer período de pago completo después del 1/1/23, todos los empleados actualmente activos recibirán un aumento general del 3% de forma retroactiva en todas las horas pagadas. El apéndice salarial se ajustará en consecuencia.

**Aumento del 3% para todos (2024).** A partir del primer período de pago completo después del 1/1/24, todos los empleados actualmente activos recibirán un aumento general del 3% de forma retroactiva en todas las horas pagadas. El apéndice salarial se ajustará en consecuencia.

**Aumento del 3% para todos (2025).** A partir del primer período de pago completo después del 1/1/25, todos los empleados actualmente activos recibirán un aumento general del 3% de forma retroactiva en todas las horas pagadas. El apéndice salarial se ajustará en consecuencia.

**Vigencia del Acuerdo.** El contrato termina el 30 de junio de 2025.

**Cheque por Separado.** El pago retroactivo para el 2022, 2023, y 2024 se hará en un cheque por separado y se emitirá dentro de los 30 días siguientes a la ratificación del contrato.

**PTO (antes Vacación, Licencia por Enfermedad y Días Festivos)**

El empleador ha combinado la vacación, la licencia por enfermedad, y los días festivos en un solo programa de PTO.

La acumulación máxima de horas de PTO es de 320 horas.

Las Tasas de Acumulación se han mejorado de las tasas impuestas, como se describe a continuación:

Años de Servicio	Días de PTO Por Año
1 Año de Servicio	20 Días Por Año
2 Años de Servicio	21 Días Por Año
3 Años de Servicio	22 Días Por Año
4 Años de Servicio	23 Días Por Año
5-9 Años de Servicio	30 Días Por Año
10 Años de Servicio	33 Días Por Año
15 Años de Servicio	34 Días Por Año
20 Años de Servicio	35 Días Por Año
25 Años de Servicio	36 Días Por Año

**Días Festivos de Juneteenth y MLK** están incluidos en el acuerdo.

**Banco de Días de enfermedad.** Cualquier licencia por enfermedad acumulada antes de la implementación del PTO se utilizará para enfermedades del empleado hasta que se agote.

**Banco de Vacaciones** Cualquier vacación acumulada actualmente se considerará "Legacy Vacations". Las Legacy Vacation se pueden cambiar a efectivo antes de noviembre de cada año. Este es el único beneficio de tiempo pagado que es elegible para retiro en efectivo. El hospital anunciará la cantidad real de días de vacaciones heredados que son elegibles para retiro en efectivo. Si un empleado desea un retiro de efectivo, debe presentar una solicitud antes del 1 de diciembre. El pago en efectivo se hará en el último período de pago del enero siguiente.

**JUBILACIÓN**

**Sustitución de Pensiones de Beneficio Definido.** La pensión será reemplazada por un Plan de Beneficios de Aportación Definida

**Beneficios del Plan de Beneficios Definido — Preservados.** Los beneficios del actual Plan de Beneficios Definidos han sido congelados, es decir, el hospital, desde la fecha de imposición de los recortes, no ha realizado nuevos aportes al plan para potenciar el beneficio de los empleados participantes. Sin embargo, debe continuar financiando el plan para que los empleados que estaban en el plan tengan su beneficio de jubilación disponible cuando se jubilen.

**Se implementará un Plan de Contribución Definido.**

- Se implementará un plan de contribución definido (401a).

- Los empleados que pasen su período de prueba son inmediatamente elegibles para el plan 401a y se consideran totalmente incluidos en el plan, es decir, todos los fondos del plan pertenecen al empleado.
- Si un empleado desea participar en el plan 401a, donde el hospital contribuye con una cantidad equivalente al 4% del salario del empleado, (importante) el empleado debe contribuir al menos una cantidad equivalente al 1% de su salario a la cuenta del plan 457b Diferido ya existente. Las contribuciones máximas realizadas por el empleado más allá de las contribuciones anteriores están sujetas a las reglas y regulaciones del IRS.

**SEGURO MÉDICO**

Los copagos/deducibles actualmente impuestos siguen igual.

Se redujeron las primas impuestas:

COBERTURA	EMPLEADO DE TIEMPO COMPLETO	EMPLEADO DE MEDIO TIEMPO
Solo para el empleado	\$70 por período de paga	\$90 por período de paga
Empleado + 1	\$115 por período de paga	\$135 por período de paga
Empleado + 2	\$115 por período de paga	\$135 por período de paga
Empleado + 3 o más	\$115 por período de paga	\$135 por período de paga

El empleador continuará explorando la posibilidad de cambiarse a un plan médico comercial.

**LICENCIAS EDUCATIVAS**

El empleador ofrecerá la cantidad de horas necesarias para que los empleados renueven la licencia requerida. Las horas estarán disponibles por dos años y se renovarán cada dos años. No hay prórroga después de cada período de dos años. Este programa se aplica a los empleados que actualmente son elegibles para una licencia educativa

**PAGO DE GUARDIA**

Antes de la implementación de las concesiones, cuando un empleado estaba en espera y era llamado para regresar a trabajar, recibía tanto el pago de la prima como el pago en espera, mientras estaba en el trabajo. Ahora, cuando los llaman a trabajar, solo reciben el pago de la prima mientras están en el trabajo. El pago standby se seguirá pagando mientras el empleado no esté en el trabajo.

**NINGÚN OTRO CAMBIO**

Para todos los demás fines, las disposiciones del acuerdo actual siguen siendo las mismas, permitiendo modificaciones proporcionales a los acuerdos tentativos vigentes.