



AGENDA

**REGULAR MEETING OF THE BOARD OF DIRECTORS**

**Tuesday, January 2, 2024 – 4:00 PM**

**Modular C Classroom**

**600 N. Highland Springs Avenue, Banning, CA 92220**

**In compliance with the Americans with Disabilities Act**, if you need special assistance to participate in this meeting, please contact the Administration Office at (951) 769-2160. **Notification 48 hours prior to the meeting** will enable the Hospital to make reasonable arrangement to ensure accessibility to this meeting. [28 CFR 35.02-35.104 ADA Title II].

TAB

- I. Call to Order S. DiBiasi, Chair
- II. Public Comment

A five-minute limitation shall apply to each member of the public who wishes to address the Hospital Board of Directors on any matter under the subject jurisdiction of the Board. A thirty-minute time limit is placed on this section. No member of the public shall be permitted to “share” his/her five minutes with any other member of the public. (Usually, any items received under this heading are referred to staff for future study, research, completion and/or future Board Action.) (PLEASE STATE YOUR NAME AND ADDRESS FOR THE RECORD.)

On behalf of the Hospital Board of Directors, we want you to know that the Board acknowledges the comments or concerns that you direct to this Board. While the Board may wish to occasionally respond immediately to questions or comments if appropriate, they often will instruct the Hospital CEO, or other Hospital Executive personnel, to do further research and report back to the Board prior to responding to any issues raised. If you have specific questions, you will receive a response either at the meeting or shortly thereafter. The Board wants to ensure that it is fully informed before responding, and so if your questions are not addressed during the meeting, this does not indicate a lack of interest on the Board’s part; a response will be forthcoming.

**OLD BUSINESS**

- III. **\*Proposed Action - Approve Minutes** S. DiBiasi
- December 5, 2023, Regular Meeting A

**NEW BUSINESS**

- IV. Hospital Board Chair Monthly Report S. DiBiasi verbal

San Geronio Memorial Hospital  
 Board of Directors Regular Meeting  
 January 2, 2024

- |       |  |                               |         |
|-------|--|-------------------------------|---------|
| V.    | CEO Monthly Report   | S. Barron                     | verbal  |
| VI.   | January, February, & March Board/Committee Meeting Calendars   | S. DiBiasi                    | B       |
| VII.  | Foundation Quarterly Report  | V. Hunter                     | C       |
| VIII. | <b>Reminder – All Hospital Board Members Annual Execution of Confidentiality and Nondisclosure Agreement</b>   | S. DiBiasi                    | D       |
| IX.   | Patient Care Services Bi-Monthly report  | A. Brady                      | E       |
| X.    | <b>* Proposed Action – Annual Approval of Hospital Bylaws</b><br>(per bylaws Section 4.05, (i))<br>▪ <b>ROLL CALL</b>  | S. DiBiasi                    | F       |
| XI.   | <b>Hospital Board Chair – Appoint 2024 Committee Members</b><br>(Copy of 2023 Committee Members included as informational)   | S. DiBiasi                    | G       |
| XII.  | Committee Reports:   |                               |         |
|       | <ul style="list-style-type: none"> <li>• Finance Committee           <ul style="list-style-type: none"> <li>○ December 22, 2023, regular meeting minutes</li> <li>• <b>* Proposed Action – Approve November 2023 Financial Statement (Unaudited)</b><br/>               (Approval recommended by Finance Committee 12/22/2023)<br/>               ▪ <b>ROLL CALL</b></li> </ul> </li> <li>• <b>* Proposed Action – Recommend approval to the Healthcare District Board</b> <ul style="list-style-type: none"> <li>○ <b>Resolution No. 2024-01</b><br/>               (A RESOLUTION APPROVING THE FORM AND AUTHORIZING THE EXECUTION AND DELIVERY OF A SECOND AMENDMENT TO LINE OF CREDIT WITH FIRST FOUNDATION PUBLIC FINANCE, A DELAWARE STATUTORY TRUST AND A WHOLLY-OWNED SUBSIDIARY OF FIRST FOUNDATION BANK, AND APPROVING CERTAIN OTHER ACTIONS)<br/>               ▪ <b>ROLL CALL</b></li> </ul> </li> <li>• <b>* Proposed Action – Recommend approval to the Healthcare District Board</b> <ul style="list-style-type: none"> <li>○ <b>California Health Facilities Financing Authority Distressed Hospital Loan Program, Loan and Security Agreement</b><br/>               ▪ <b>ROLL CALL</b></li> </ul> </li> </ul> | S. DiBiasi/<br>D. Heckathorne | H       |
|       |  | D. Heckathorne                | I       |
|       |  | D. Heckathorne                | handout |
| XIII. | <b>* Proposed Action - Approve Policies and Procedures</b><br>• <b>ROLL CALL</b>   | Staff                         | J       |

San Gorgonio Memorial Hospital  
Board of Directors Regular Meeting  
January 2, 2024

XIV. Chief of Staff Report R. Sahagian, MD verbal  
\* **Proposed Action - Approve Recommendations of the**  
**Medical Executive Committee**  
▪ **ROLL CALL**  
Chief of Staff

XV. Community Benefit events/Announcements/  
and newspaper articles S. DiBiasi K

XVI. Future Agenda Items

\*\*\* **ITEMS FOR DISCUSSION/APPROVAL IN CLOSED SESSION** S. DiBiasi

- Proposed Action - Recommend approval to Healthcare District Board - Medical Staff Credentialing  
(Health & Safety Code §32155; and Evidence Code §1157)
- Receive Quarterly Environment of Care/Life Safety/Utility Management report.  
(Health & Safety Code §32155)

XVII. **ADJOURN TO CLOSED SESSION**

**\* The Board will convene to the Open Session portion of the meeting approximately 2 minutes after the conclusion of Closed Session.**

**RECONVENE TO OPEN SESSION**

\*\*\* **REPORT ON ACTIONS TAKEN DURING CLOSED SESSION** S. DiBiasi

XVIII. **ADJOURN** S. DiBiasi

**\*Action Required**

In accordance with The Brown Act, *Section 54957.5*, all public records relating to an agenda item on this agenda are available for public inspection at the time the document is distributed to all, or a majority of all, members of the Board. Such records shall be available at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

I certify that on December 29, 2023, I posted a copy of the foregoing agenda near the regular meeting place of the Board of Directors of San Gorgonio Memorial Hospital, and on the San Gorgonio Memorial Hospital website, said time being at least 72 hours in advance of the regular meeting of the Board of Directors  
(*Government Code Section 54954.2*).

Executed at Banning, California, on December 29, 2023



Ariel Whitley, Executive Assistant

**TAB A**



REGULAR MEETING OF THE  
SAN GORGONIO MEMORIAL HOSPITAL  
BOARD OF DIRECTORS

December 5, 2023

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, December 5, 2023, in Modular C meeting room, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Susan DiBiasi (Chair), Perry Goldstein, Shannon McDougall, Darrell Petersen, Ron Rader, Steve Rutledge, Randal Stevens, Lanny Swerdlow, Dennis Tankersley

Members Absent: None

Required Staff: Steve Barron (CEO), Raffi Sahagian, MD (Chief of Staff), Daniel Heckathorne (CFO), Annah Karam (CHRO), Ariel Whitley (Executive Assistant), Angie Brady (CNE), John Peleuses (VP Ancillary and Support Services), Karan P. Singh, MD (CMO), Margaret Kammer (Controller), David Imus (Wipfli, LLP)

AGENDA ITEM		ACTION / FOLLOW-UP
<b>Call To Order</b>	Chair, Susan DiBiasi, called the meeting to order at 4:02 pm.	
<b>Public Comment</b>	No public comment.	
<b>OLD BUSINESS</b>		
<b>Proposed Action - Approve Minutes November 7, 2023, regular meeting.</b>	Chair, Susan DiBiasi, asked for any changes or corrections to the minutes of the November 7, 2023, regular meeting.  There we none.	<b>The minutes of the November 7, 2023, regular meeting will stand correct as presented.</b>
<b>NEW BUSINESS</b>		
<b>Hospital Board Chair Monthly Report</b>	Chair DiBiasi thanked the Executive Team for their leadership and commitment to the hospital. She also congratulated Dr. Karan P. Singh (CMO) for his achievement of the Regent's Award by the American College of Healthcare Executives (ACHE) – Southern California chapter for his servant leadership and development of innovative and clinical excellence programs in Riverside County.	
<b>CEO Monthly Report</b>	Steve Barron, CEO, reported that we have two proposals for a radiology group. Steve also reported that the line of credit renewal and the distressed hospital loan will likely be presented at a special meeting for approval.	
<b>December, January, and February</b>	Calendars for December, January, and February were included on the board tablets.	

AGENDA ITEM		ACTION / FOLLOW-UP																				
<b>Board/Committee meeting calendars</b>																						
<b>Proposed Action – Approve Mission/Vision/Values Statement</b>	<p>Steve Barron noted that the current Mission, Vision, and Values Statement is reviewed and re-approved annually by the Hospital Board. It was included on board tablets last month for review.</p> <p>Lanny Swerdlow presented verbiage to change the existing mission statement from “To provide safe, high quality, personalized healthcare services”, to “To restore health and relieve suffering by providing safe, high-quality, affordable healthcare services”.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 741 1255 915"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Yes</td> </tr> <tr> <td>McDougall</td> <td>Absent</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Absent	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Rader/Stevens), the SGMH Board of Directors voted to approve the change to the mission statement to now read “To restore health and relieve suffering by providing safe, high quality, affordable healthcare services”.</b></p>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Absent	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Yes	Motion carried.																				
<b>For Review – Hospital Bylaws</b>	<p>Chair DiBiasi noted that the Hospital Bylaws are slated for their annual approval at the January 2024 meeting. Any suggested changes and/or additions should be directed to staff.</p>																					
<b>For Review – Committee Assignments</b>  <b>(Copy of 2023 Committee Members included as informational)</b>	<p>Chair DiBiasi noted that the committee assignments are included for review. Assignments will be announced at the January 2024 board meeting.</p>																					
<b>Adjourn to Closed Session</b>	<p>Chair, DiBiasi reported the items to be reviewed and discussed and/or acted upon during Closed Session will be:</p> <ul style="list-style-type: none"> <li>➤ Recommend approval to the Healthcare District Board – Medical Staff Credentialing</li> <li>➤ Receive Quarterly Infection Prevention and Control Report</li> <li>➤ Telephone conference with legal counsel – Potential litigation</li> </ul> <p>The meeting adjourned to Closed Session at 4:27 pm.</p>																					
<b>Reconvene to Open Session</b>	<p>The meeting adjourned from closed session at 6:00 pm.</p> <p>Chair DiBiasi reported on the actions taken/information received during the Closed Session as follows:</p> <ul style="list-style-type: none"> <li>➤ Recommended approval to the Healthcare District Board –</li> </ul>																					

AGENDA ITEM		ACTION / FOLLOW-UP																				
	<p>Medical Staff Credentialing with the exception of one provider.</p> <ul style="list-style-type: none"> <li>➤ Received Quarterly Infection Prevention and Control Report</li> <li>➤ Participated in a telephone conference with legal counsel regarding potential litigation. No action was taken.</li> </ul>																					
<b>2024 Slate of Officers</b>	<p>Shannon McDougall joined the meeting at 4:53 pm.</p> <p>Chair DiBiasi noted that a copy of the 2023 Slate of Officers was included on the board tablet.</p>																					
<b>Proposed Action – Nominate/Approve 2024 Hospital Board Chair</b>	<p>Susan DiBiasi was nominated as Hospital Board Chair.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 751 1255 926"> <tr> <td>DiBiasi</td> <td>Abstain</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Abstain	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Rutledge/Rader), the SGMH Board of Directors approved Susan DiBiasi as the 2024 Hospital Board Chair.</b></p>
DiBiasi	Abstain	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				
<b>Proposed Action – Nominate/Approve 2024 Hospital Board Vice Chair</b>	<p>Steve Rutledge was nominated as Hospital Board Vice Chair.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1094 1255 1268"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Abstain</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Abstain	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Tankersley/Rader), the SGMH Board of Directors approved Steve Rutledge as the 2024 Hospital Board Vice Chair.</b></p>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Abstain																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				
<b>Proposed Action – Nominate/Approve 2024 Hospital Board Secretary</b>	<p>Ron Rader was nominated as Hospital Board Secretary.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1436 1255 1610"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Abstain</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Abstain	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (DiBiasi/Rutledge), the SGMH Board of Directors approved Ron Rader as the 2024 Hospital Board Secretary.</b></p>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Abstain	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				

AGENDA ITEM		ACTION / FOLLOW-UP																				
<p><b>Proposed Action – Nominate/Approve 2024 Hospital Board Treasurer</b></p>	<p>Darrell Petersen was nominated as Hospital Board Treasurer.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 405 1255 579"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Abstain</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Abstain	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (DiBiasi/Stevens), the SGMH Board of Directors approved Darrell Petersen as the 2024 Hospital Board Treasurer.</b></p>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Abstain																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				
<p><b>COMMITTEE REPORTS:</b></p>																						
<p><b>Finance Committee</b></p> <p><b>Proposed Action – Approve October 2023 Financial Statement (Unaudited).</b></p>	<p>Dan Heckathorne, CFO, reviewed the Executive Summary of the October 2023 Financial report which was included on the board tablet. A copy of the Finance Committee’s November 28, 2023, meeting minutes were also included on the board tablet. It was noted that the Finance Committee recommends approval of the October 2023 Financial report as presented.</p> <p>It is noted that approval is recommended by the Finance Committee.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1018 1255 1192"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Petersen/Rutledge), the SGMH Board of Directors approved the October 2023 Financial Statement as presented.</b></p>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				
<p><b>Proposed Action – Recommend approval to the Healthcare District Board</b></p> <ul style="list-style-type: none"> <li><b>District Hospital Leadership Forum (DHLF) Annual Dues Renewal</b></li> </ul>	<p>San Gorgonio Memorial Healthcare District &amp; Hospital have been members of the DHLF for many years. The DHLF is the group which formally oversees the overall guidance and planning for all matters related to Supplemental Funding on behalf of California Healthcare Districts. DHLF also coordinates their efforts with numerous California agencies (including CHA) in areas that impact the Healthcare Districts.</p> <p>It was noted that approval is recommended by the Finance Committee.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1596 1255 1770"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Stevens/Rutledge), the SGMH Board of Directors voted to recommend approval of the District Hospital Leadership Forum (DHLF) Annual Dues Renewal to the Healthcare District Board as presented.</b></p>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				

AGENDA ITEM		ACTION / FOLLOW-UP																				
<p><b>Proposed Action – Recommend approval to the Healthcare District Board</b></p> <ul style="list-style-type: none"> <li><b>FYE 23 Financial Audit</b></li> </ul>	<p>Dan Heckathorne, CFO, introduced David Imus of Wipfli, LLP. David presented the FYE 23 Financial Audit.</p> <p>It was noted that approval was recommended by the Finance Committee.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 506 1252 680"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Stevens/Petersen), the SGMH Board of Directors voted to recommend approval of the FYE 23 Financial Audit to the Healthcare District Board as presented.</b></p>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				
<p><b>Update regarding Line of Credit Renewal - Informational</b></p>	<p>Dan Heckathorne, CFO, gave a brief update regarding the Line of Credit Renewal. There is a possibility that a special meeting will be called to approve this item.</p>																					
<p><b>Update regarding Distressed Hospital Loan Program - Informational</b></p>	<p>Steve Barron, CEO, and Dan Heckathorne, CFO, gave an update regarding the next steps of the Distressed Hospital Loan Program. There is a possibility that a special meeting will be called to approve this item.</p>																					
<p><b>Chief of Staff Report</b></p> <p><b>Proposed Action – Approve Recommendations of the Medical Executive Committee</b></p>	<p>Raffi Sahagian, MD, Chief of Staff, briefly reviewed the Medical Executive Committee report as included on the board tablets.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1205 1252 1379"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Stevens/Rader), the SGMH Board of Directors voted to refer the recommendations of the Medical Executive Committee to the Joint Conference Committee (JCC) with the task of identifying an appropriately approved version of the Medical Staff Bylaws for amendments through the medical staff process and later review by the governing body (Healthcare District Board).</b></p>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				

AGENDA ITEM		ACTION / FOLLOW-UP																				
<b>Proposed Action – Approve Policies and Procedures</b>	<p>There were ten (10) policies and procedures included on the board tablets presented for approval by the Board.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 438 1255 613"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Absent</td> </tr> <tr> <td>McDougall</td> <td>Yes</td> <td>Petersen</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Absent</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Absent	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Absent	Tankersley	Yes	Motion carried.		<b>M.S.C., (Rader/Rutledge), the SGMH Board of Directors approved the policies and procedures as submitted.</b>
DiBiasi	Yes	Goldstein	Absent																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Absent																			
Tankersley	Yes	Motion carried.																				
<b>Community Benefit events/Announcements/and newspaper articles</b>	<p>Miscellaneous information was included on the board tablets.</p> <p>Ron Rader announced that Amy Herr who was on the Healthcare District’s Measure H Committee and a huge staple in the community has passed. Her Celebration of Life will take place on Thursday, December 14, 2023, at 5:00pm at Tukwet. Wear cheerful colors to honor her eccentric style.</p>																					
<b>Future Agenda Items</b>	None.																					
<b>Adjourn</b>	The meeting was adjourned at 7:12 pm.																					

In accordance with The Brown Act, *Section 54957.5*, all reports and handouts discussed during this Open Session meeting are public records and are available for public inspection. These reports and/or handouts are available for review at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Respectfully submitted by Ariel Whitley, Executive Assistant

**TAB B**



# January 2024

## Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1 <i>Admin Closed—New Year's Day!</i>	2 <b>4:00 pm Hospital Board Meeting</b> <b>6:00 pm Healthcare District Board Meeting</b>	3	4	5	6
7	8	9 Calimesa Chamber Breakfast	10	11	12 Beaumont Chamber Breakfast	13
14	15	16	17 <b>9:00 am HR Committee Meeting</b> <b>10:00 am Community Planning Meeting</b>	18	19	20 Veterans Expo
21	22	23	24	25	26	27
28	29	30 <b>9:00 am Finance Committee</b>	31			

Items in **bold** = Board/Committee meetings

Items with \* = Associate functions that Board members are invited to attend





# February 2024

## Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6 <b>4:00 pm Hospital Board Meeting</b> <b>6:00 pm Healthcare District Board Meeting</b>	7	8	9	10
11	12	13	14 <i>Happy Valentines Day</i>	15	16	17
18	19 Admin Closed. Presidents Day!	20	21	22	23	24
25	26	27 <b>9:00 am Finance Committee</b>	28	29		

Items in **bold** = Board/Committee meetings

Items with \* = Associate functions that Board members are invited to attend



# March 2024

## Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5 <b>4:00 pm Hospital Board Meeting</b> <b>6:00 pm Healthcare District Board Meeting</b>	6	7	8	9
10	11	12	13	14	15	16
17 	18	19	20	21	22	23
24	25	26 <b>9:00 am Finance Committee</b> <b>10:00 Executive Committee</b>	27	28	29	30 <i>National Doctor's Day!</i>
31						

Items in **bold** = Board/Committee meetings

Items with \* = Associate functions that Board members are invited to attend

**TAB C**

## SGMH Foundation Report as of December 28, 2023

### Foundation Finances

Bank of Hemet Checking Acct:	\$283,976.78	
Bank of Hemet Money Market Acct:	\$128,432.79	
I.E. Community Foundation Acct:	\$94,872.55	<u>(report for Oct 2023)</u>
<b>Total</b>	<b>\$507,282.12</b>	

### Foundation Report

- SGMH Foundation is reviewing its Bylaws to ensure that the organization is compliant with the state of the law and that the bylaws reflect enough flexibility to accommodate the way the organizations operates today. One key focus will be to address foreseeable and potential scenarios while providing perspective on how the organization works and remains relevant.
- The Foundation will continue to cultivate donor relationships to support the Women's Center.

**TAB D**

# CONFIDENTIALITY AND NONDISCLOSURE AGREEMENT

## HOSPITAL BOARD

This Confidentiality and Nondisclosure Agreement (“Agreement”) is entered into on \_\_\_\_\_ between San Geronio Memorial Hospital, a California nonprofit public benefit corporation (“Hospital”) and \_\_\_\_\_, an individual (“Board/Committee Member”). The Hospital and Board/Committee Member are each a “Party” and sometimes collectively referred to herein as the “Parties”.

## RECITALS

A. Board/Committee Member has been appointed as a member of Hospital’s Board of Directors and its Committees wherein Board/Committee Member will have access to certain business information, including, but not limited to, financial information exchanged in closed door sessions of the Board of Directors (“Confidential Information”).

B. Board/Committee Member desires to assure Hospital that the Confidential Information will not be disclosed to other individuals or entities, except as expressly authorized by this Agreement.

NOW, THEREFORE, the Parties hereby agree as follows:

## OPERATIVE PROVISIONS

1. Acknowledgment. The Parties acknowledge and understand that the Confidential Information contains sensitive and private information, some of which may constitute trade secrets of Hospital.

2. Restriction on Use. The Parties agree that only individuals authorized by Hospital (“Authorized Persons”), shall have access to the Confidential Information and that Hospital shall cause any such Authorized Persons having access to the Confidential Information to sign an agreement substantially in the form of this Agreement, in which said Authorized Person agrees to be bound by terms and provisions substantially identical to those set forth in this Agreement.

3. Restriction on Disclosure. Each Party further agrees on behalf of itself and any Authorized Persons, that it shall hold, maintain, and protect the confidential nature of the Confidential Information and shall not disclose the existence or contents of the Confidential Information to any person or entity, except as expressly authorized by this Agreement.

4. Exceptions to Restriction on Disclosure. Nothing contained in this Agreement shall prevent or be interpreted as preventing either Party or the Authorized Persons from disclosing the Confidential Information under the following circumstances:

- (a) Where written consent is provided by the non-disclosing Party; and
- (b) Where disclosure of the Confidential Information is required by subpoena

or other process of law; provided the subpoenaed Party or the Authorized Persons, as the case may be, shall promptly notify the non-subpoenaed Party of the receipt of said process so as to allow the non-subpoenaed Party every opportunity to resist the subpoena, service of process or court order.

5. No Rights in Confidential Information. No rights or licenses in the Confidential Information, expressed or implied, are granted to Board/Committee Member as a result of this Agreement.

6. Survival. Board/Committee Member's obligations with respect to the Confidential Information shall survive any expiration, termination or cancellation of this Agreement and continue to bind Committee Member.

7. Governing Law. This Agreement shall be governed by the laws of the State of California.

8. Remedies. Board/Committee Member acknowledges that money damages alone would not be a sufficient remedy for its breach of this Agreement. In addition to all other remedies, Hospital shall be entitled to specific performance and injunctive or equitable relief to remedy a breach. Board/Committee Member agrees to waive any requirement for the securing or posting of a bond in connection with such remedy. Board/Committee Member agrees to be fully responsible for its breach of any provision of this Agreement.

9. Entire Agreement. This Agreement constitutes the entire agreement and understanding of the Parties with respect to the subject matter herein and supersede all prior agreements and understandings, whether oral or written.

10. Severability. Whenever possible, each provision of this Agreement will be interpreted in such manner as to be effective and valid under applicable law, but if any provision of this Agreement is held to be invalid, illegal or unenforceable in any respect under any applicable law or rule in any jurisdiction, such invalidity, illegality or unenforceability will not affect any other provision or any other jurisdiction but this Agreement will be reformed, construed and enforced in such jurisdiction as if such invalid, illegal or unenforceable provision had never been contained herein.

IN WITNESS WHEREOF, this Agreement has been executed as of the day and year first above written.

**BOARD/COMMITTEE MEMBER:**

By: \_\_\_\_\_  
(signature)

Name: \_\_\_\_\_  
(printed)

# TAB E





### **Bi-Monthly Patient Care Services Report**

This holiday season SGMH was able to provide Christmas presents to over 30 families in the Beaumont, Banning, and Cabazon area. We had 6 truckloads of presents that we delivered to children. It was a great opportunity to share kindness and love throughout our community.

Riverside Radiology Group will start Jan 9, 2024. With such a short notice from our previous group, it took a lot of hours to make this possible. Special thanks to Dr. Singh, IT, and the Radiology Department.

Mindray go-live was 12/19/23. There were some minor hiccups with the vital signs converting into the EHR. This issue was fixed by day three and everything else has been running smoothly.

Omni cell medication units were up and running the week of Dec 18<sup>th</sup>. New units were placed in Med/Surg, ICU/DOU, OR, and the ED. Thanks to Jose and Sal who worked very long hours to make the process smooth.

The Joint Commission accepted our corrective action plan for very minor concerns they observed during survey. Our next re-accreditation survey will be in 3 years.

**TAB F**

**AMENDED AND RESTATED BYLAWS  
OF  
SAN GORGONIO MEMORIAL HOSPITAL  
HOSPITAL BOARD**

**A CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION**

| Approved by SGMH Board of Directors on January 2, 2024~~January 3, 2023~~

**TABLE OF CONTENTS**

ARTICLE 1 OFFICES..... 1  
    Section 1.01 Principal Office..... 1

ARTICLE 2 NONPROFIT NATURE..... 1  
    Section 2.01 Goals and Purposes..... 1  
    Section 2.02 Exempt Purposes..... 2  
    Section 2.03 Dedication of Assets..... 2

ARTICLE 3 MEMBERS..... 2  
    Section 3.01 No Members..... 2

ARTICLE 4 DIRECTORS..... 3  
    Section 4.01 Number..... 3  
    Section 4.02 Use of Terms “Directors” and “Board”..... 3  
    Section 4.03 Restriction on Interested Persons and Employees as Directors..... 3  
    Section 4.04 Powers..... 3  
    Section 4.05 Duties..... 4  
    Section 4.06 Compensation..... 5  
    Section 4.07 Meetings Generally: Organizational Meeting..... 5  
    Section 4.08 Place..... 5  
    Section 4.09 Regular Meetings..... 5  
    Section 4.10 Special Meetings..... 5  
    Section 4.11 Meeting by Telephone..... 5  
    Section 4.12 Notice and Agenda..... 6  
    Section 4.13 Quorum..... 6  
    Section 4.14 Conduct of Meetings..... 6  
    Section 4.15 Meetings Public..... 7  
    Section 4.16 Adjournment..... 7  
    Section 4.17 Ethics Training and Sexual Harassment Avoidance Training  
    Requirements..... 7  
    Section 4.18 Conflicts of Interest and Other Policies..... 7  
    Section 4.19 Confidentiality: Public Statements..... 7  
    Section 4.20 Appropriation of Business Opportunity and Confidential Information..... 8

ARTICLE 5 ELECTION OF DIRECTORS..... 8  
    Section 5.01 Votes Required to Elect Director..... 8  
    Section 5.02 Term of Office of Directors..... 8  
    Section 5.03 Vacancies..... 8

ARTICLE 6 OFFICERS..... 10  
    Section 6.01 Number and Titles..... 10  
    Section 6.02 Other Officers..... 10  
    Section 6.03 Qualification, Election, and Term of Office..... 10

Section 6.04	Removal and Resignation .....	10
Section 6.05	Vacancies .....	10
Section 6.06	Duties of Chair .....	11
Section 6.07	Duties of Vice Chair .....	11
Section 6.08	Duties of Secretary.....	11
Section 6.09	Duties of Treasurer .....	11
Section 6.10	Duties of Chief Executive Officer .....	12
Section 6.11	Execution of Contracts.....	12
ARTICLE 7 COMMITTEES.....		13
Section 7.01	Committees of the Board .....	13
Section 7.02	Executive Committee.....	14
Section 7.03	Finance Committee .....	15
Section 7.04	Human Resources Committee.....	15
Section 7.05	Community Planning Committee .....	15
Section 7.06	Ad Hoc Committees.....	15
ARTICLE 8 MEDICAL STAFF .....		16
Section 8.01	Organization.....	16
Section 8.02	Medical Staff Bylaws, Rules and Regulations.....	16
Section 8.03	Medical Staff Membership and Clinical Privileges .....	16
ARTICLE 9 QUALITY OF PROFESSIONAL SERVICES .....		19
Section 9.01	Board Responsibility.....	19
Section 9.02	Accountability to Board.....	19
Section 9.03	Documentation .....	20
ARTICLE 10 BOARD OF DIRECTORS INITIATION OF PEER REVIEW .....		20
Section 10.01	Basic Policy .....	20
Section 10.02	Suspension of Privileges .....	20
ARTICLE 11 INDEMNIFICATION.....		21
Section 11.01	Right of Indemnity.....	21
Section 11.02	Approval of Indemnity.....	21
Section 11.03	Advancement of Expenses .....	21
Section 11.04	Insurance .....	21
Section 11.05	Other Fiduciary Positions .....	21
Section 11.06	Provisions Not Exclusive.....	22
Section 11.07	Contractual Rights of Non-Directors and Non-Officers.....	22
ARTICLE 12 CORPORATE RECORDS, REPORTS, AND SEAL .....		22
Section 12.01	Minutes of Meetings .....	22
Section 12.02	Books of Account .....	22
Section 12.03	Annual Report.....	22
Section 12.04	Maintenance of Records and Inspection by Directors .....	22

Section 12.05 Corporate Seal.....23

ARTICLE 13 HOSPITAL AUXILIARY AND FOUNDATION .....23

ARTICLE 14 EFFECTIVE DATE & AMENDMENT .....23

    Section 14.01 Effective Date .....23

    Section 14.02 Amendment.....23

**AMENDED AND RESTATED BYLAWS**

**OF**

**SAN GORGONIO MEMORIAL HOSPITAL**

**A CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION**

**ARTICLE 1  
OFFICES**

**Section 1.01 Principal Office**

The principal office of the Corporation for the transaction of its business shall be located at San Gorgonio Memorial Hospital, which is located at the southeastern corner of Highland Springs Avenue and West Wilson Street in the City of Banning, in the County of Riverside, State of California, or such other place or places within the boundaries of the San Gorgonio Memorial Healthcare District (“District”) as the Board of Directors may from time to time designate.

**ARTICLE 2  
NONPROFIT NATURE**

**Section 2.01 Goals and Purposes**

The Corporation manages the San Gorgonio Memorial Hospital for the San Gorgonio Memorial Healthcare District, a local healthcare district under California Health & Safety Code Section 32000. Under the management services agreement between the District and the Corporation, the Corporation is charged with providing management and pharmacy services to the Hospital for the benefit of the communities served by the District. The goals and purposes of this Corporation are to:

- a. operate and maintain the Hospital and provide hospital services for the benefit of the communities served by the San Gorgonio Memorial Healthcare District.
- b. maintain a hospital for the care of persons suffering from illnesses or disabilities which require that the patients receive hospital care.
- c. carry on any activities related to healthcare services which, in the opinion of the Board of Directors, may be justified by the facilities, personnel, funds or other assets that are or can be made available.
- d. participate, so far as circumstances may warrant, in any activity designed and carried on to promote the general health of the community.
- e. provide health education to the Hospital’s patients and members of the community regarding wellness and prevention.

- f. attract and retain a diverse staff of qualified well trained and competent healthcare practitioners and support personnel who will provide care in a competent manner.

### **Section 2.02 Exempt Purposes**

The purposes for which this Corporation is organized are exclusively charitable and educational within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended from time to time (or any successor statute). Notwithstanding any other provisions of these Bylaws, the Corporation shall not, except to an insubstantial degree, engage in or carry on any activities or exercise any power that is not in furtherance with the goals and purposes of this Corporation, or which are not permitted to be carried on (i) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended from time to time (or any successor statute) or Section 23701d of the California Revenue and Taxation Code, as amended from time to time (or any successor statute) or (ii) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1986, as amended from time to time (or any successor statute) or under Section 17201 and related Sections of the California Revenue and Taxation Code, as amended from time to time (or any successor statute).

### **Section 2.03 Dedication of Assets**

The property of this Corporation is irrevocably dedicated to the charitable and educational purposes set forth in these Bylaws, and no part of the net income or assets of this Corporation shall inure to the personal benefit of any Director, Officer, or Member of this Corporation or to the benefit of any other private person. Upon the winding up and dissolution of this Corporation, its assets remaining after payment of, or provision for payment of, all the Corporation's debts and liabilities shall be distributed to the San Geronio Memorial Healthcare District, or any successor public agency charged with carrying out the purposes of the District, to continue to promote and accomplish the public purpose of this Corporation as set forth in these Bylaws. If the District, or the successor entity referred to in the preceding sentence, shall no longer exist at such time, then upon the winding up and dissolution of this Corporation, its assets remaining after payment of, or provision for payment of, all the Corporation's debts and liabilities shall be distributed to another non-profit corporation, trust or fund which is organized and operated exclusively for charitable purposes and which has established its tax exempt status within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended from time to time (or any successor statute), and Section 23701(d) of the California Revenue and Taxation Code, as amended from time to time (or any successor statute), such assets to be used exclusively for the purpose of continuing to promote and accomplish the charitable purpose of this Corporation as set forth in the Articles and in the Bylaws of the Corporation.

## **ARTICLE 3 MEMBERS**

### **Section 3.01 No Members**

The Corporation shall have no members, within the meaning of California Corporations Code Section 5056.



## **ARTICLE 4 DIRECTORS**

### **Section 4.01 Number**

This Corporation shall have nine (9) regular Directors, who shall be known collectively as the Board of Directors. Members of the Board of Directors shall be elected, as set forth in Article 5, provided that each individual who takes office as a Director of the District shall be an *ex officio* Director of the Corporation, with full voting rights and shall count for purposes of establishing a quorum. All of the Directors, including *ex officio* Directors, shall be subject to the same terms and provisions of these Bylaws and applicable law except as expressly provided to the contrary by these Bylaws. Subject to the discretion of the Board, two members of the Board of Directors may be members of the Medical Staff of San Gorgonio Memorial Hospital.

The Chief of Staff shall be an invited guest at all meetings of the Board of Directors, but shall excuse himself or herself from Board meetings when requested to do so by the Chair, and may not attend closed session meetings of the Board unless his or her experience and expertise is required by the Board and he or she is asked to attend by the Board. As the Chief of Staff is not a Director, the Chief of Staff shall have no voting rights and shall not count for purposes of establishing a quorum. The Chief of Staff shall abide by all policies of the Corporation applicable to Directors with respect to conflicts of interests and maintaining the confidentiality of trade secret, competitively sensitive information and closed session information.

### **Section 4.02 Use of Terms “Directors” and “Board”**

The words “Directors” and “Board”, as used in the Articles of Incorporation of this Corporation, or in these Bylaws, in relation to any power or duty requiring collective action, mean “Board of Directors”.

### **Section 4.03 Restriction on Interested Persons and Employees as Directors**

Subject to the additional restrictions in Section 4.18 of these Bylaws, no more than forty-nine percent (49%) of the persons serving on the Board may be interested persons. An interested person is (a) any person compensated by the Corporation for services rendered to it within the previous twelve (12) months, such as an independent contractor, or otherwise, excluding any reasonable compensation paid to a Director as Director; and (b) any brother, sister, ancestor, descendant, spouse, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, or father-in-law of such person. Employees of the Corporation or District may not serve on the Board. However, except as provided to the contrary by Government Code Section 1090, any violation of the provisions of this paragraph shall not affect the validity or enforceability of any transaction entered into by the Corporation.

### **Section 4.04 Powers**

The Directors shall exercise the powers of the Corporation, control its property, and conduct its affairs, except as otherwise provided by law, by the Articles of Incorporation, or by these Bylaws. The Directors shall not be personally liable for the debts, liabilities, or other obligations of the Corporation.

## Section 4.05 Duties

The Board of Directors has responsibility to establish policy for the Hospital and its business including, but not limited to, all matters pertaining to quality of care rendered within the Hospital. The Board of Directors shall exercise this authority in conformity with applicable laws, regulations and accreditation requirements. In furtherance of the foregoing, the role of the Directors shall be as follows:

- a. establish policy for the operation, maintenance and development of the Hospital and its business including, but not limited to, assuring the quality of care within the Hospital.
- b. appoint a competent and experienced Chief Executive Officer who shall be its direct representative in the management of the Hospital.
- c. review the performance of the Chief Executive Officer on an annual basis.
- d. approve the annual operating budget and capital expenditures.
- e. approve the strategic plan on an annual basis.
- f. review and approve periodic financial statements and other financial matters of the Corporation.
- g. assure that adequate revenues are retained by the Corporation and expended in accordance with its charitable purposes.
- h. review and act on financing arrangements recommended by the Chief Executive Officer for the Corporation.
- i. review these Bylaws, the Bylaws of the Medical Staff and all committees on an annual basis, and approve needed changes.
- j. review and approve written personnel policies and establish a procedure for notifying employees of changes in such personnel policies.
- k. review and, where appropriate, approve policies and procedures to promote care, treatment and rehabilitation of patients.
- l. review and revise, as appropriate, all department and service policies and procedures when warranted and ensure that the Medical Staff participates, as appropriate.
- m. act as the final decision-making authority with respect to all matters pertaining to credentialing and privileges. Upon the recommendation and advice of the Medical Staff, the Board shall appoint members of the Medical Staff and grant such privileges as may, in their judgments, be warranted by the experience and training of the applicant.

#### **Section 4.06 Compensation**

The members of the Board of Directors shall be entitled to receive compensation equivalent in amount to that which is payable to the members of the Board of Directors of a California Healthcare District pursuant to the terms of Health & Safety Code Sections 32103. Such amounts shall not be mandatory and Board Members choosing not to accept compensation may do so. Additionally, each Board member shall also be entitled to receive reimbursement for expenses reasonably incurred in conjunction with educational seminars directly related to their function as a hospital board member, subject to such annual budgetary limitations as may be determined from time to time by the Board of Directors.

#### **Section 4.07 Meetings Generally: Organizational Meeting**

The meetings of the Board of Directors of the Corporation are subject to the Ralph M. Brown Act, as provided in California Government Code Section 54952(c). The Board of Directors shall hold its meetings in accordance with the agenda, open meeting and other requirements of the Ralph M. Brown Act, Government Code Section 54950 et seq. The Board of Directors shall annually hold organizational meeting where it shall organize by electing from its number the officers provided in Article 6 hereof to hold office until their successors are appointed as herein provided.

#### **Section 4.08 Place**

Meetings of the Board of Directors shall be held on the campus of the San Geronio Memorial Hospital or at such other place within the boundaries of the District as may be designated from time to time by the Board of Directors.

#### **Section 4.09 Regular Meetings**

Regular meetings of the Board of Directors shall be held at such times as may be prescribed from time to time by resolution of the Board of Directors, but not less than ten times annually. Upon adoption of such a resolution, a copy of the resolution shall be delivered to each member of the Board of Directors. Thereafter, no notice of any meeting held pursuant to the schedule described in the resolution shall be required, other than as may be required by law.

#### **Section 4.10 Special Meetings**

Special meetings of the Board of Directors shall be held whenever called by the Chair, or not less than four (4) of the Directors.

#### **Section 4.11 Meeting by Telephone**

Members of the Board may participate in a meeting through use of conference telephone, electronic video screen communication, or other communications equipment so long as (i) each member participating in the meeting can communicate with all of the other members concurrently, and (ii) each member is provided the means of participating in all matters before the Board, including the capacity to propose, or to interpose an objection, to a specific action to be taken by this Corporation, provided that it complies with California Government Code Section 54953(b).

#### **Section 4.12 Notice and Agenda**

At least 72 hours before a regular meeting and at least 24 hours before a special meeting, the Corporation shall post an agenda containing a brief but descriptive general description of each item of business to be transacted or discussed at the meeting, including items to be discussed in closed session in accordance with the Ralph M. Brown Act.

Notice of the time and place of all special meetings of the Board of Directors shall be given to each Director by one of the following methods: (a) by personal delivery of written notice; (b) by first-class mail, postage prepaid; (c) by telephone, including a voice messaging system or technology designed to record and communicate messages, or electronic transmission by the corporation (as defined in California Corporations Code Section 20). All such notices shall be given or sent to the Director's address or telephone number as shown on the records of the Corporation.

Notices sent by first-class mail shall be deposited in the United States mails at least four (4) days before the time set for the meeting. Notices given by personal delivery, telephone, telegraph, facsimile, electronic mail, or other electronic means shall be delivered, telephoned or given to the telegraph company at least forty-eight (48) hours before the time set for the meeting.

The notice shall state the time of the meeting, and the place if the place is other than the principal office of the Corporation. It need not specify the purpose of the meeting.

Notice of the time and place of holding an adjourned meeting need not be given to absent Directors if the time and place are fixed at the meeting adjourned.

#### **Section 4.13 Quorum**

A quorum shall consist of a majority of the members of the Board of Directors, unless a greater number is expressly required by statute, by the Articles of Incorporation of this Corporation, or by these Bylaws. Every act or decision done or made by a majority of the Directors present at a meeting duly held at which a quorum is present shall be the act of the Board of Directors, except where any law, regulation, or policy of any governmental agency requires a larger minimum vote in favor of any resolution.

#### **Section 4.14 Conduct of Meetings**

The Chair, or in his absence, the Vice Chair or, in the absence of both, a chair chosen by a majority of the Directors present, shall preside at all meetings of the Board of Directors. Meetings shall be governed by such rules of procedure as may be reasonably appropriate under the circumstances, insofar as such rules are not inconsistent or in conflict with these Bylaws, with the Articles of Incorporation of this Corporation, or with law. Each Director present shall have an affirmative duty to vote for or against each matter presented for a vote unless the Director has a conflict of interest that requires the Director to recuse himself. If a Board Member abstains from voting the abstention shall be counted on the side of the matter receiving the highest number of votes. Recusal for these purposes means (i) not voting, and (ii) leaving the meeting after answering any questions posed by the other Directors.

#### **Section 4.15 Meetings Public**

All meetings of the Board of Directors shall be open to the public in accordance with the Ralph M. Brown Act, Government Code Section 54950, et seq. and subject to the other terms of said Act. However, certain items, including but not limited to personnel matters, labor negotiations, quality improvement and other protected Medical Staff matters and litigation matters, are not appropriate for public discussion. Accordingly, where an exception to the open meeting requirement exists under the Brown Act, the Health & Safety Code or other applicable law and where the matter is properly agendized the Board of Directors may meet in closed session.

#### **Section 4.16 Adjournment**

The Board may adjourn any regular, adjourned, special or adjourned special meeting to a time and place specified in the order of adjournment. A copy of the notice of adjournment shall be conspicuously posted on or near the door of the place where the regular, adjourned regular, special or adjourned special meeting was held within 24 hours after the time of adjournment in accordance with Government Code Section 54955.

#### **Section 4.17 Ethics Training and Sexual Harassment Avoidance Training Requirements**

All members of the Board of Directors shall complete a course with a minimum of two hours of training in ethics pursuant to Government Code 54235 (AB 1234), similar to that as is required of the District Board of Directors. Such training will be required of newly appointed Directors within one year of assuming office and shall be renewed each two years thereafter. A certificate of completion showing at least two hours of training must be submitted and placed in each board member's file.

In addition to ethics training, all members of the Board of Directors shall complete a course with a minimum of two hours of training in sexual harassment avoidance pursuant to Government Code 12950.1 (AB 1825 & AB 1661) and 2 CCR 11024. Such training will be required of newly appointed Directors within six months of assuming office and shall be renewed each two years thereafter. A certificate of completion showing at least two hours of training must be submitted and placed in each board member's file.

#### **Section 4.18 Conflicts of Interest and Other Policies**

Members of the Board of Directors shall comply with the District's Conflict of Interest Code, as it may be amended or supplemented from time to time, applicable provisions of the Political Reform Act, Government Code Section 81000, et seq., Government Code Section 1090, et seq. and other policies adopted by the Board, including but not limited to its confidentiality policies. As required by the forgoing laws, Board members shall file an FPPC Form 700 with the Corporation within 30 days of taking office, annually, and within 30 days of leaving office.

#### **Section 4.19 Confidentiality: Public Statements**

The Board of Directors, and each of its members, shall maintain the confidentiality of any and all information that has been discussed in closed session or that is normally discussed in closed

session. Further, each Director with access to confidential information regarding this Corporation or this Corporation's business is expected to hold such information in confidence and to refrain from either using such information for personal gain or disclosing it unnecessarily outside the scope of the Director's duty with respect to this Corporation. No Board member shall make a public statement on behalf of the Board, or in a manner that appears to be on behalf of the Board, unless a majority of the Board has given prior authorization for the public statement at a duly noticed meeting of the Board of Directors.

#### **Section 4.20 Appropriation of Business Opportunity and Confidential Information**

No Director of this Corporation may appropriate or divert to others any opportunity for profit in connection with a transaction in which it is known or could be anticipated that this Corporation is or would be interested. Such opportunities include but are not limited to, acquisition of real or personal property, appointment of suppliers, or design or development of new products, services or areas of business related to this Corporation's present or planned services or service areas.

### **ARTICLE 5 ELECTION OF DIRECTORS**

#### **Section 5.01 Votes Required to Elect Director**

Except as provided in Section 4.01 with respect to *ex officio* Directors, a candidate must receive the vote of a majority of the Directors present to be elected as a Director.

#### **Section 5.02 Term of Office of Directors**

Directors shall serve a term of four (4) years. Each Director may serve a maximum of two (2) consecutive terms. Former directors will be eligible to serve again after one (1) year of non-service. However, *ex officio* Board members shall serve for a term equal to their term on the District Board, and upon their resignation or removal from the District Board for any reason whatsoever, their terms of office as Directors of this Corporation shall cease and terminate, and their successors on the District Board shall be *ex officio* Directors of this Corporation in their place and stead. Each Director other than *ex-officio* Directors, including a Director elected to fill a vacancy, shall hold office until the expiration of the term for which elected, and until a successor has been appointed. The successor Director shall serve the unexpired term of the predecessor Director. If the unexpired term is two (2) years or less, then the successor Director shall serve a term of four (4) years plus the unexpired term. If the unexpired term is more than two (2) years, then the successor Director shall serve the unexpired term and face re-election to serve a new four (4)-year term.

#### **5.03 Vacancies**

- a. Events Causing Vacancies. A Board member, including but not limited to an *ex officio* Director as a consequence of being a District Board member, shall be deemed to have vacated his seat on the occurrence of any of the following:

- (1) The death or resignation of the Director.

- (2) The declaration or resolution of the Board of the vacancy of the office of a Director who has been declared of unsound mind by an order of court or convicted of a felony or has been found by a final order or judgment of any court to have breached a duty under Sections 5230, et seq., of the California Nonprofit Public Benefit Corporation Law.
  - (3) Except as provided in Section 4.01 with respect to *ex officio* Directors, any Director may be removed, either with or without cause, by majority vote of the Directors then in office, at any regular or special meeting of the Board of Directors.
  - (4) Except as provided in Section 4.01 with respect to *ex officio* Directors, the absence of a Director from three consecutive meetings of the Board of Directors, and the determination of a majority of the remaining members of the Board of Directors that such absence was not excused.
  - (5) An increase in the authorized number of Directors.
  - (6) The failure of the Directors, at any meeting of the Directors at which any Director or Directors are to be elected, to fill a vacancy scheduled to be filled by election at such meeting.
- b. Resignations. Any Director may resign, which resignation shall be effective upon giving written notice to the Chair, the Chief Executive Officer, the Secretary, or the Board of Directors, unless the notice specifies a later time for the resignation to be effective. If the resignation of a Director is effective at a future time, the Board of Directors may elect a successor to take office when the resignation becomes effective.
  - c. Vacancies of Directors. An Ad Hoc nominating committee will be formed for the purpose of recommending candidates to fill vacancies of Directors. This committee will be appointed in adherence with Section 7.06 and will include no less than two (2) *ex officio* Directors from the District Board. The Directors may elect a Director or Directors at any time to fill any vacancy or vacancies in the Board of Directors. Directors elected to fill a vacancy or vacancies in the Board of Directors of *ex officio* Directors by virtue of being a District Board member need to be the Director elected to the District Board to fill the vacancy on the District Board.
  - d. No Vacancy on Reduction of Number of Directors. No reduction of the authorized number of Directors shall have the effect of removing any Director before that Director's term of office expires unless such an intent is shown in the records of the meeting and a majority of the directors approve the reduction in number of directors.



## **ARTICLE 6 OFFICERS**

### **Section 6.01 Number and Titles**

The Officers of this Corporation shall be a Chair of the Board, a Vice Chair, a Secretary, and a Treasurer. This Corporation may also have, at the Board's discretion, one or more Assistant Secretaries, one or more Assistant Treasurers, and such other officers as may be appointed in accordance with these Bylaws. Any number of offices may be held by the same person, except that neither the Secretary nor the Treasurer may serve concurrently as the Chair of the Board. The Board shall also appoint a Chief Executive Officer and a Chief Financial Officer of the Corporation who shall be salaried employees of the Corporation.

### **Section 6.02 Other Officers**

The Board may appoint and may authorize the Chair of the Board, or other officer, to appoint such additional officers that the Corporation may require. Each Officer so appointed shall have the title, hold office for the period, have the authority, and perform the duties specified in these Bylaws or determined by the Board.

### **Section 6.03 Qualification, Election, and Term of Office**

The Officers of the Corporation, except those appointed under Section 6.02 of these Bylaws, shall be elected by majority vote of the Directors present at the annual organizational meeting of the Board of Directors. No more than two (2) Officers of the Corporation may be Directors of the District serving as ex officio Directors. Each such Officer shall hold office until the next organizational meeting, or until his removal, death, or resignation. The Officers shall hold their respective offices at the pleasure of the Board of Directors and shall be subject to removal by the Board of Directors at any time.

### **Section 6.04 Removal and Resignation**

Any Officer may be removed, either with or without cause, by majority vote of the Directors then in office, at any regular or special meeting of the Board of Directors, and such Officer shall be removed should he cease to be qualified for the office as herein required. Subject to the terms of any written employment agreement between an officer and the Corporation, any Officer may resign at any time by delivering written notice to the Board of Directors or to the Chair or to the Secretary of the Corporation. Acceptance by the Board of Directors of any such resignation shall not be necessary to make it effective.

### **Section 6.05 Vacancies**

Any vacancy caused by the death, resignation, removal, disqualification, or the like, of an Officer shall be filled by majority vote of the Board of Directors for the unexpired portion of the term.



### **Section 6.06 Duties of Chair**

The Chair of the Board shall preside at meetings of the Board and shall exercise and perform such other powers and duties as the Board may assign from time to time.

### **Section 6.07 Duties of Vice Chair**

If the Chair is absent or disabled, the Vice Chair shall perform all duties of the Chair. When so acting, the Vice Chair shall have all powers of and be subject to all restrictions on the Chair. The Vice Chair shall have such other powers and perform such other duties as the Board or these Bylaws may prescribe.

### **Section 6.08 Duties of Secretary**

The Secretary shall keep or cause to be kept, at the Corporation's principal office or such other place as the Board may direct, a book of minutes of all meetings, proceedings, and actions of the Board and Committees of the Board. The Secretary shall keep or cause to be kept, at the principal office in California, a copy of the Articles of Incorporation and Bylaws, as amended to date.

The Secretary shall give, or cause to be given, notice of all meetings of the Board and of Committees of the Board required by these Bylaws or the California Corporations Code. The Secretary shall keep the Corporate Seal in safe custody and shall have such other powers and perform such other duties as the Board or these Bylaws may prescribe.

### **Section 6.09 Duties of Treasurer**

The Treasurer shall keep and maintain, or cause to be kept and maintained, adequate and correct books and accounts of the Corporation's properties and transactions. The Treasurer shall send or cause to be given to the Directors such financial statements and reports as are required to be given by law, by these Bylaws, or by the Board. The books of account shall be open to inspection by any Director at all reasonable times.

The Treasurer shall deposit or cause to be deposited, all money and other valuables in the name and to the credit of the Corporation with such depositories as the Board may designate, shall disburse the Corporation's funds as the Board may order, shall render to the Chair of the Board, to the Chief Executive Officer, and to the Board, when requested, an account of all transactions as Treasurer and of the financial condition of the Corporation, and shall have such other powers and perform such other duties as the Board or these Bylaws may prescribe. If required by the Board, the Treasurer shall give the Corporation a bond in the amount and with the surety or sureties specified by the Board for faithful performance of the duties of the office and for restoration to the Corporation of all of its books, papers, vouchers, money, and other property of every kind in the possession or under the control of the Treasurer on his or her death, resignation, retirement or removal from office.

## **Section 6.10 Duties of Chief Executive Officer**

Subject to such supervisory powers as the Board may give to the Chair of the Board, if any, and subject to the control of the Board, the Chief Executive Officer (“CEO”) shall be the General Manager of the Corporation and shall supervise, direct, and control the Corporation’s activities, affairs, and officers. The Chief Executive Officer shall have such other powers and duties as the Board or these Bylaws may prescribe. The authority and responsibility of the CEO shall include

- a. carrying out all policies established by the Board.
- b. development, and submission to the Board for approval, of a strategic plan for the organization and operation of the Hospital.
- c. preparation of an annual budget showing the expected receipts and expenditures of the Corporation.
- d. selection, employment, control and discharge of employees, and development and maintenance of personnel policies and practices for the Hospital.
- e. maintenance of physical properties in a good state of repair and operating condition.
- f. supervision of all business affairs to ensure that funds are collected and expended to the best possible advantage.
- g. cooperation with the Medical Staff and with all those concerned with the rendering of professional services to the end that high quality care shall be rendered to the patients.
- h. presentation to the Board of periodic reports reflecting the services provided by the Hospital and the financial activities of the Corporation and preparation and submission of such special reports as may be required by the Board.
- i. attendance at all meetings of the Board and committees thereof.

## **Section 6.11 Execution of Contracts**

The Board may authorize any officer or officers, agent or agents, including but not limited to the Chief Executive Officer, to enter into any contract or execute any instrument in the name of and on behalf of the Corporation. Such authority may be general or confined to specific instances and may be established by the Bylaws, Resolutions or the adoption of specific policies and procedures from time to time; provided, however, that unless so authorized by the Board, no officer, agent, or employee shall have any power or authority to bind the Corporation by a contract or engagement, or to pledge its credit, or to render it liable for any purpose or any amount.

## ARTICLE 7 COMMITTEES

### Section 7.01 Committees of the Board

The committees of the Board may be standing or special. Standing committees shall be the Finance Committee, the Human Resources Committee, and the Community Planning Committee, and other standing committees may also be authorized by the approval of the Board of Directors (collectively, “standing committees”).

For special committees, the Board, by resolution adopted by a majority of the Directors then in office, provided a quorum is present, may create one (1) or more special Committees (“special committees”). Each special committee will have a minimum of three (3) and a maximum of five (5) members who may be Directors and persons who are not Directors who serve at the pleasure of the Board. No more than two (2) members of any special committee may be Directors of the District serving as *ex officio* Directors.

Except as otherwise provided in these Bylaws, all committee member appointments (including the appointment of Committee Chairs) shall be made by the Chair of the Board. The Chair of each Committee must be a member of the Board of Directors. A committee member shall serve his or her designated term unless he or she resigns, is removed or otherwise disqualified to serve, and all committee member terms shall terminate with the reorganization of the Board of Directors at the annual organizational meeting. Committee members shall not be entitled to compensation.

Each committee member shall be entitled to one (1) vote, to be exercised in person. Neither cumulative, substitute, nor proxy voting shall be allowed. A majority of the committee members shall constitute a quorum. All matters submitted to the committee for determination shall be decided by a minimum of a majority of a quorum of committee members.

Except as otherwise provided in these Bylaws, meetings of the committee may be called at any time by the Board Chair or the Chair of the committee. Meetings of all committees shall be open to the public in accordance with the Ralph M. Brown Act, Government Code Section 54950, et seq. and subject to the other terms of said Act as set forth in Section 4.15 of these Bylaws. A summary of all committee meetings including but not limited to all action of such committees shall be reported to the Board of Directors at the next regular or special meeting thereof.

Except as otherwise specifically described herein, the following Sections of these Bylaws pertaining to the Board of Directors shall pertain to members of committees: Section 4.17 Ethics Training and Sexual Harassment Avoidance Training Requirements, Section 4.18 Conflicts of Interest and Other Policies, Section 4.19 Confidentiality: Public Statements, and Section 4.20 Appropriation of Business Opportunity and Confidential Information.

All committees shall be advisory and no committee shall have the power to bind the Board, except when specifically authorized by the Board. The Board may delegate management of certain activities of the Corporation to any such committee as specified in the Board resolution, provided that the activities and affairs of the Corporation shall be managed and all corporate powers shall

be exercised under the ultimate direction of the Board and provided further that no committee, regardless of Board resolution, may:

- a. Take any final action on any matter that, under the California Nonprofit Public Benefit Corporation Law, also requires approval of the members or of the Board of Directors or approval of a majority of all members or of the Board of Directors;
- b. Fill vacancies on the Board or on any Committee that has the authority of the Board;
- c. Fix compensation of the Directors for serving on the Board or on any Committee;
- d. Amend or repeal Bylaws or adopt new Bylaws;
- e. Amend or repeal any resolution of the Board that by its express terms is not so amendable or repealable;
- f. Create any other Committees of the Board or appoint the members of the Committees of the Board;
- g. Expend corporate funds to support a nominee for Director after more people have been nominated for Director than can be elected; or
- h. Approve any contract or transaction to which the Corporation is a party and in which one (1) or more of its Directors has a material financial interest, except as special approval is provided for in Section 5233(d)(3) of the California Corporations Code.

### **Section 7.02 Executive Committee**

The Executive Committee of the Board of Directors, shall consist of the Board Chair, the Board Vice Chair, the Board Secretary, the Board Treasurer and one (1) Director to be selected via a vote held by the Directors of the District serving as ex officio Directors. Each member of the Executive Committee must be a Director. No more than two (2) members of the Executive Committee may be Directors of the District serving as ex officio Directors.

The Executive Committee shall be delegated all powers and authority of the Board of Directors in the management of the business and affairs of the Corporation, except those powers reserved to the Board of Directors as a whole pursuant to Section 7.01. The Executive Committee shall meet quarterly to conduct its business, at a time and place to be designated by the members, or as otherwise provided by an appropriate resolution. The Executive Committee shall also hold special meetings on the call of the Chair.

### **Section 7.03 Finance Committee**

The Finance Committee shall consist of a minimum of three (3) and a maximum of five (5) members of the Board of Directors, together with the Chief Executive Officer and the Chief Financial Officer. No more than two (2) members of the Finance Committee may be Directors of the District serving as *ex officio* Directors. The Finance Committee shall meet monthly, and shall be responsible for advising the Board for the management of all funds of the Corporation. It shall review and submit to the Board each year a proposed budget showing the expected receipts and income for the ensuing year. It shall make recommendations on all major capital expenditures, and significant hospital rate changes. It shall review and make recommendations to the Board of Directors with respect to all salary and wage adjustments, and for overall budget projections. It shall recommend a written plan for annual operations and for a three-year capital expenditure plan, which shall be updated annually.

### **Section 7.04 Human Resources Committee**

The Human Resources Committee shall consist of a minimum of three (3) and a maximum of five (5) members of the Board of Directors, together with the Chief Executive Officer and the Director of Human Resources. No more than two (2) members of the Human Resources Committee may be Directors of the District serving as *ex officio* Directors. The Human Resources Committee shall meet bi-monthly for the purpose of determining the changing personnel requirements of the Hospital, reviewing and analyzing potential modifications to the Hospital's wage and benefit plans, and generally making recommendations to the full Board of Directors regarding personnel matters within the Hospital.

### **Section 7.05 Community Planning Committee**

The Community Planning Committee shall consist of a minimum of three (3) and a maximum of five (5) members of the Board of Directors in addition to the Chief Executive Officer. No more than two (2) members of the Community Planning Committee may be Directors of the District serving as *ex officio* Directors. Community Planning Committee shall meet quarterly for the purpose of determining proposed long range goals for the Hospital and recommendations for methods whereby such goals may be accomplished. Areas of planning shall include, but shall not be limited to, potential expansion, contraction or modification of services rendered by the Hospital, determining and seeking methods of accomplishing marketing goals for the Hospital, including but not limited to those relating to advertising, community involvement, physician recruitment, patient relations and insurance and other third party payment programs (such as HMOs, PPOs and employer groups). All recommendations shall be presented to the Board of Directors for approval or action.

### **Section 7.06 Ad Hoc Committees**

Ad hoc committees may be appointed by the Chair of the Board, with the concurrence of the majority of the Board and in such numbers and for such special tasks as circumstances warrant. Such special Committees shall limit their activities to the accomplishment of the task for which created and appointed, and shall have no power to act except such as is specifically conferred by

action of the Board. Upon completion of the tasks for which appointed, each such special committee shall stand discharged.

## **ARTICLE 8 MEDICAL STAFF**

### **Section 8.01 Organization**

The Board shall cause to be created a Medical Staff organization, to be known as the Medical Staff of San Gorgonio Memorial Hospital, whose membership shall be comprised of all duly licensed physicians, dentists, psychologists and podiatrists who are privileged to attend patients in the Hospital. Membership in this Medical Staff organization shall be a prerequisite to the exercise of clinical privileges in the Hospital, except as otherwise specifically provided in the Medical Staff Bylaws. No applicant to the Medical Staff shall be denied Medical Staff membership on the basis of sex, race, creed, color or national origin, or on the basis of any other criterion lacking professional justification.

### **Section 8.02 Medical Staff Bylaws, Rules and Regulations**

- a. **Purpose.** The Medical Staff organization shall propose and adopt by vote bylaws, rules and regulations for its internal governance (“Medical Staff Bylaws”) which shall be effective when approved by the Board. These Medical Staff Bylaws shall create an effective administrative unit to discharge the functions and responsibilities assigned to the Medical Staff by the Board. The Medical Staff Bylaws, rules and regulations shall state the purposes, functions and policies by which the Medical Staff exercises its responsibilities. The Board of Directors will review and approve the Medical Staff Bylaws annually.
- b. **Procedure.** The Medical Staff shall have the initial responsibility to formulate, adopt and recommend to the Board Medical Staff Bylaws and amendments thereto which shall be effective when approved by the Board. If the Medical Staff fails to exercise this responsibility in good faith and in a reasonable, timely and responsible manner and after written notice from the Board to such effect including a reasonable period of time for response, the Board may resort to its own initiative in formulating or amending Medical Staff Bylaws. In such event, staff recommendations and views shall be carefully considered by the Board during its deliberation and in its actions.

### **Section 8.03 Medical Staff Membership and Clinical Privileges**

- a. **Responsibilities of the Medical Staff Members.** Each member of the Medical Staff shall have appropriate authority and responsibility for the care of his/her patients, subject to such limitations as are contained in these Bylaws, and in the Medical Staff Bylaws, and subject, further, to limitations attached to his/her appointment. The attending physician shall be responsible for preparation of a complete and legible medical record for each patient. Its contents shall be pertinent and current. This record shall include, at a minimum: identification data; chief complaint; past history; family history; history of present illness;



physical examination; special reports such as necessary consultations; clinical laboratory reports and radiology reports and others; provisional diagnosis; appropriate consents; medical and surgical treatment; operative report; pathological findings; progress notes; final diagnosis; condition on discharge; discharge summary and autopsy report when applicable. The CEO shall arrange for all administrative assistance to receive appointment applications to the Medical Staff, and further to provide for necessary administration support to process all materials pertinent to the application of any potential member of the Medical Staff. All applications for and appointments to the Medical Staff shall be in writing and addressed to the Medical Staff Office. The application shall contain full information concerning the applicant's education, licensure, practice, previous hospital experience, and any unfavorable history with regard to licensure and hospital privileges. This information shall be verified by the appropriate body within the Medical Staff. Upon appointment, the applicant will agree in writing to follow the Bylaws, rules and regulations of the Corporation and of the Medical Staff, and all other approved policies of the Medical Staff and the Corporation. All applications shall be reviewed by the Medical Staff prior to being submitted to the Governing Body for approval. When an appointment is not renewed or when privileges have been proposed to be reduced, altered, suspended, or terminated, the staff member shall be afforded the opportunity of a hearing in accordance with the Fair Hearing Plan then in effect. It is the Board of Directors' policy that: (1) only a member of the Medical Staff with admitting privileges shall admit patients to the Hospital; (2) only an appropriately licensed practitioner with clinical privileges shall be directly responsible for a patient's diagnosis and treatment within the area of his privileges; (3) each patient's general medical condition shall be the responsibility of a physician member of the Medical Staff; (4) each patient admitted to the Hospital shall receive a baseline history and physician examination by a physician who is either a member of, or approved by, the Medical Staff; and (5) direct medical care of patients provided by Allied Health Personnel shall be under the appropriate degree of supervision by a licensed practitioner with clinical privileges.

- b. **Delegation to the Medical Staff.** The Board shall delegate to the Medical Staff the responsibility and authority to investigate and evaluate all matters relating to Medical Staff membership status, clinical privileges and corrective action, and shall require that the Medical Staff adopt and forward to it specific written recommendations with appropriate supporting documentation that will allow the Board to take informed action.
- c. **Action by the Board.** Final action on all matters relating to Medical Staff membership status, clinical privileges and corrective action shall be taken by the Board after considering the Medical Staff recommendations, provided that the Board shall act in any event if the Medical Staff fails to adopt and submit any such recommendation within the time period set forth in the Medical Staff Bylaws. Such Board action without a Medical Staff recommendation shall be based on the same kind of documented investigation and evaluation of current

ability, judgment and character as is required for Medical Staff recommendation, and shall be taken only after written notice to the Medical Executive Committee.

- d. **Criteria for Board Action.** In acting on matters of Medical Staff membership status, the Board shall consider the Medical Staffs recommendations and the extent of applicant's utilization of this Hospital, the Hospital's and the community's needs, and such additional criteria as are set forth in the Medical Staff Bylaws. No aspect of membership status nor any specific clinical privileges shall be limited or denied to a practitioner on the basis of sex, race, creed, color, or national origin, nor on the basis of any other criterion unrelated to: (i) good patient care at the Hospital, (ii) professional qualifications, (iii) the Hospital's purposes, needs and capabilities, or (iv) community needs.
- e. **Terms and Conditions of Medical Staff Membership and Clinical Privileges.** The terms and conditions of membership status in the Medical Staff, and the exercise of clinical privileges, shall be as specified in the Medical Staff Bylaws or as more specifically defined in the notice of individual appointment. At a minimum, however, each member of the Medical Staff shall (1) exhibit the skill necessary to allow him to appropriately carry out his duties and (2) carry such malpractice insurance as may be determined to be appropriate from time to time by the Board of Directors. Additionally, each member of the Medical Staff having active staff privileges shall provide on-call back-up coverage within his field of specialty to the Hospital's Emergency Room, pursuant to such back-up call schedule as may be adopted by his Service of the Medical Staff. If no other back-up call coverage schedule is adopted by a Service, Emergency Room back-up call coverage for such Service shall be scheduled on the basis of alphabetical order by last name within such Service, rotating among all active staff physicians within the Service, each being responsible for 24 hour back-up coverage.
- f. **Ethics.** The Principles of Ethics of the appropriate National Association as now in effect or as may be hereinafter amended by that association shall govern the professional conduct of the members of the Medical Staff.
- g. **Procedure.** The procedure to be followed by the Medical Staff and the Board in acting on matters of membership status, clinical privileges, and corrective action shall be specified in the Medical Staff Bylaws. However, each member of the Medical Staff shall be required to obtain and maintain, at his or her own expense, malpractice insurance in such amount as may be determined to be appropriate from time to time by the Board of Directors.
- h. **Fair Hearing Plan.** The Board shall require that any adverse recommendation made by the Medical Executive Committee or any adverse action taken by the Board of Directors with respect to a practitioner's staff appointment, reappointment, Service affiliation, staff category, admitting prerogative or clinical privileges, shall, except under circumstances for which specific



provision is made in the Medical Staff Bylaws, be accomplished in accordance with the Fair Hearing Plan then in effect. Such plan shall provide for procedures to assure fair treatment and afford an opportunity for presentation of all pertinent information. For the purposes of this Section an “adverse recommendation” of the Medical Executive Committee and “adverse action” of the Board shall be defined in the Fair Hearing Plan. The Fair Hearing Plan shall provide for an appeals procedure whereby any applicant for Medical Staff Membership feels a decision of the Medical Staff has been unjust shall have recourse to a hearing by a joint committee composed of Directors and Medical Staff Members. The appellant in such a case shall have the opportunity to present any and all evidence and testimony bearing upon his qualifications for appointment to the Medical Staff. Following such presentation of evidence, the Committee shall present evidence in support of its findings. Failure of an applicant to request a hearing within the time frames set forth in the Fair Hearing Plan shall constitute a waiver of the applicant’s rights to a hearing under the Fair Hearing Plan.

## **ARTICLE 9 QUALITY OF PROFESSIONAL SERVICES**

### **Section 9.01 Board Responsibility**

The Board shall require, after considering the recommendations of the Medical Staff, and the other health care professional staffs providing patient care services, the conduct of specific review and evaluation activities to assess, preserve and improve the overall quality and efficiency of patient care in the Hospital. The Board, through the CEO, shall provide whatever administrative assistance is reasonably necessary to support and facilitate the implementation and the ongoing maintenance and operation of these review and evaluation activities.

### **Section 9.02 Accountability to Board**

The Medical Staff and the other health care professionals providing patient care services shall conduct and be accountable to the Board for conducting activities that contribute to the preservation and improvement of the quality, safety and efficiency of patient care provided in the Hospital. These activities include:

- a. Review and evaluation of the quality of patient care (generally on a retrospective basis) through a valid and reliable patient care review procedure.
- b. Ongoing monitoring and evaluation of patient care practices through the defined functions of the Medical Staff, the other professional services, and the Hospital administration.
- c. Delineation of clinical privileges for members of the Medical Staff commensurate with individual credentials and demonstrated ability and judgment and assignment of patient care responsibilities to other health care professionals consistent with individual qualification and demonstrated ability.

- d. Review of utilization of the Hospital's resources to provide appropriate allocation of those resources to patients in need of them.
- e. Such other measures as the Board may, after considering the advice of the Medical Staff, the other professional services and the Hospital administration, deem necessary for the preservation and improvement of the quality, safety and efficiency of patient care.

### **Section 9.03 Documentation**

The Board shall require, receive, consider and act upon the findings and recommendations emanating from the activities required by Article 8. All such findings and recommendations shall be in writing, and shall be supported and accompanied by appropriate documentation upon which the Board can take informed action.

## **ARTICLE 10 BOARD OF DIRECTORS INITIATION OF PEER REVIEW**

### **Section 10.01 Basic Policy**

It is the policy of this Hospital that peer review be performed by members of the Medical Staff, inasmuch as only licentiates who possess the same or similar education, training and experience have the requisite expertise to insure an efficient, fair and responsive peer review system. Notwithstanding the foregoing, however, in those instances in which the Medical Staffs failure to investigate or to initiate disciplinary action is contrary to the weight of the evidence, the Board of Directors shall have the authority to direct the Medical Executive Committee to initiate an investigation or disciplinary action, but only after consultation with the Chief of Staff. No action shall be taken in an unreasonable manner. In the event the Medical Staff fails to take action in response to a direction from the Board of Directors, the Board of Directors shall have the authority to take action against a member of the Medical Staff. Such action shall be taken only after written notice to the Medical Staff and shall fully comply with the procedures and rules applicable to peer review proceedings established by Sections 809.1 through 809.6, inclusive, of the Business and Professions Code of the State of California.

### **Section 10.02 Suspension of Privileges**

When no person authorized by the Medical Staff is available to summarily suspend or restrict clinical privileges, the Board of Directors, or its designee, may immediately suspend the clinical privileges of a member of the Medical Staff if the failure to summarily suspend those privileges is likely to result in an imminent danger to the health of any individual; provided the Board of Directors has, before the suspension, made reasonable attempts to contact the Medical Executive Committee. A suspension by the Board of Directors which has not been ratified by the Medical Executive Committee within two working days, excluding weekends and holidays, shall terminate automatically.

## **ARTICLE 11 INDEMNIFICATION**

### **Section 11.01 Right of Indemnity**

To the fullest extent permitted by law, this Corporation shall indemnify its Directors, Officers, employees, and other persons described in Section 5238(a) of the California Corporations Code, including persons formerly occupying any such position, against all expenses, judgments, fines, settlements and other amounts actually and reasonably incurred by them in connection with any “proceeding”, as that term is used in that section, and including an action by or in the right of the Corporation, by reason of the fact that the person is, or was, a person described in that section. “Expenses”, as used in these Bylaws, shall have the same meaning as in Section 5238(a) of the California Corporations Code.

### **Section 11.02 Approval of Indemnity**

On written request to the Board by any person seeking indemnification under Section 5238(b) or Section 5238(c) of the California Corporations Code, the Board shall promptly determine under Section 5238(e) of the California Corporations Code whether the applicable standard of conduct set forth in Section 5238(b) or Section 5238(c) has been met and, if so, the Board shall authorize indemnification.

### **Section 11.03 Advancement of Expenses**

To the fullest extent permitted by law, and except as otherwise determined by the Board in a specific instance, expenses incurred by a person seeking indemnification under Sections 11.01, 11.02 or 11.03 of this Article in defending any proceeding covered by those sections shall be advanced by the Corporation before final disposition of the proceeding, on receipt by the Corporation of an undertaking by or on behalf of that person that the advance will be repaid unless it is ultimately determined that the person is entitled to be indemnified by the Corporation for those expenses.

### **Section 11.04 Insurance**

The Corporation shall have the right to purchase and maintain insurance to the full extent permitted by law on behalf of its Officers, Directors, and employees.

### **Section 11.05 Other Fiduciary Positions**

This Article does not apply to any proceeding against any trustee, investment manager or other fiduciary of an employee benefit plan in such person’s capacity as such, even though such person may also be covered by the first sentence of Section 1 of this Article 11. This Corporation shall have power to indemnify such trustee, investment manager or other fiduciary to the extent permitted by subsection (f) of Section 5140 of the California Corporations Code.

### **Section 11.06 Provisions Not Exclusive**

The indemnification and advancement of expenses provided by this Article 11 of these Bylaws shall not be deemed exclusive of any rights to which those seeking indemnification or expense advancement may be entitled under any agreement, vote of disinterested Directors, or otherwise, both as to action in his or her official capacity while holding such office, and shall continue as to a person who has ceased to be a Director, officer, or employee and agent, and shall inure to the benefit of the heirs, executors and administrators of such person.

### **Section 11.07 Contractual Rights of Non-Directors and Non-Officers**

Nothing contained in this Article 11 shall affect any right to indemnification to which persons other than Directors of the Corporation, or any of its subsidiaries, may be entitled by contract or otherwise.

## **ARTICLE 12 CORPORATE RECORDS, REPORTS, AND SEAL**

### **Section 12.01 Minutes of Meetings**

The Corporation shall keep at its principal office, or at such other place as the Board of Directors may order, a book of the minutes of all meetings of Directors with the time and place of holding, whether regular or special, and, if special how authorized, the notice given and the names of those Directors and presenting staff present.

### **Section 12.02 Books of Account**

The Corporation shall keep and maintain adequate and correct accounts of its properties and business transactions, including accounts of its assets, liabilities, receipts, disbursements, gains, and losses.

### **Section 12.03 Annual Report**

The Corporation shall cause an annual report or statement to be sent to the Board of Directors not later than 120 days after the close of the fiscal year in accordance with the provisions of Sections 1500 and 1501. Such report shall contain a balance sheet as of the end of the fiscal year, an income statement and a statement of changes in financial position for such fiscal year, all prepared according to generally accepted accounting procedures, and accompanied by any report thereon of an independent accountant, or if there is no such report, a certificate of the Chief Financial Officer or Chief Executive Officer that such statements were prepared without audit from the books and records of the Corporation. The report shall also provide any information required by California Corporations Code Section 6322.

### **Section 12.04 Maintenance of Records and Inspection by Directors**

The Corporation shall keep at its principal executive office the original or a copy of the Articles of Incorporation, Bylaws, and other records of the Corporation. Every Director shall have the absolute right at any reasonable time to inspect all books, records, and documents of every

kind and the physical properties of the Corporation and each subsidiary corporation. This inspection by a Director may be made in person or by an agent or attorney, and the right of inspection includes the right to copy and make extract of documents.

### **Section 12.05 Corporate Seal**

The Board of Directors shall provide a corporate seal consisting of two concentric circles with the words “San Gorgonio Memorial Hospital”, and the words and figures, “INCORPORATED May 8, 1990, CALIFORNIA.”

## **ARTICLE 13 HOSPITAL AUXILIARY AND FOUNDATION**

The Hospital Auxiliary shall be an integral part of this Corporation, and shall have no separate existence as a corporation or other unincorporated association. The Bylaws of the Hospital Auxiliary shall be approved by the Board of Directors of the Hospital. The Hospital Foundation shall be a separate and independent corporation existing for the benefit of the Hospital.

## **ARTICLE 14 EFFECTIVE DATE & AMENDMENT**

### **Section 14.01 Effective Date**

These Bylaws shall become effective immediately upon their adoption and shall supersede and replace all previous Bylaws of the Corporation. Amendments to these Bylaws shall become effective immediately upon their adoption.

### **Section 14.02 Amendment**

Except as otherwise provided herein or by law, the Board may, after lawful notice to all Directors then in office, adopt, amend or repeal these Bylaws upon the majority vote of the Directors, provided a quorum is present.

**CERTIFICATE OF SECRETARY**

I certify that I am the duly elected and acting Secretary of SAN GORGONIO MEMORIAL HOSPITAL, and that the above Amended and Restated Bylaws, consisting of 28 pages, are the Bylaws of this Corporation as adopted by the Corporation’s Board of Directors on January 2, 2024~~January 3, 2023~~, that they supersede all previous versions of the Bylaws for the Corporation.

Executed on January 2, 2024~~January 3, 2023~~, at Banning, California.

---

Ron Rader, Secretary

**TAB G**

# **San Geronio Memorial Hospital Board**

## **Standing Committee Assignments for 2023**

### **Finance Committee**

Susan DiBiasi (C), Shannon McDougall, Darrell Petersen, Steve Rutledge

### **Human Resources Committee**

Susan DiBiasi, Perry Goldstein, Ron Rader, Steve Rutledge (C)

### **Community Planning Committee**

Susan DiBiasi, Perry Goldstein, Shannon McDougall, Darrell Petersen, Ron Rader, Steve Rutledge (C), Randal Stevens, Lanny Swerdlow, Dennis Tankersley

### **Executive Committee**

Susan DiBiasi (C), Darrell Petersen, Steve Rutledge  
Healthcare District representative – Ron Rader

Note: (C) indicates Committee Chair



TAB H

REGULAR MEETING OF THE  
SAN GORGONIO MEMORIAL HOSPITAL  
BOARD OF DIRECTORS

FINANCE COMMITTEE  
December 22, 2023

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors Finance Committee was held on Friday, December 22, 2023, in the Administration Boardroom, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Susan DiBiasi (Chair), Darrell Petersen, Steve Rutledge

Members Absent: Shannon McDougall

Required Staff: Steve Barron (CEO), Daniel Heckathorne (CFO), Karan P. Singh, MD (CMO), Ariel Whitley (Executive Assistant), Angela Brady (CNE)

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP								
<b>Call To Order</b>	Susan DiBiasi called the meeting to order at 9:31 am.									
<b>Public Comment</b>	No public present.									
<b>OLD BUSINESS</b>										
<b>Proposed Action - Approve Minutes November 28, 2023, regular meeting</b>	Susan DiBiasi asked for any changes or corrections to the minutes of the November 28, 2023, regular meeting. There were none.	<b>The minutes of the November 28, 2023, regular meeting will stand correct as presented.</b>								
<b>NEW BUSINESS</b>										
<b>Proposed Action – Recommend Approval to Hospital Board of Directors - Monthly Financial Report (Unaudited) – November 2023</b>	<p>Daniel Heckathorne, CFO, reviewed the Unaudited November 2023 finance report as included in the committee packets.</p> <p>The month of November resulted in negative \$4.75M EBIDA compared to budgeted negative EBIDA of \$1.2M vs. a positive \$1.42M Flex Budget. There were a few adjustments and items of note.</p> <p><b>ROLL CALL:</b></p> <table border="1" style="margin-left: 20px; border-collapse: collapse;"> <tr> <td style="padding: 2px;">DiBiasi</td> <td style="padding: 2px;">Yes</td> <td style="padding: 2px;">McDougall</td> <td style="padding: 2px;">Absent</td> </tr> <tr> <td style="padding: 2px;">Petersen</td> <td style="padding: 2px;">Yes</td> <td style="padding: 2px;">Rutledge</td> <td style="padding: 2px;">Yes</td> </tr> </table> <p>Motion carried.</p>	DiBiasi	Yes	McDougall	Absent	Petersen	Yes	Rutledge	Yes	<b>M.S.C. (Rutledge/Petersen), the SGMH Finance Committee voted to recommend approval of the Unaudited November 2023 Financial report to the Hospital Board of Directors.</b>
DiBiasi	Yes	McDougall	Absent							
Petersen	Yes	Rutledge	Yes							
<b>Proposed Action – Recommend Approval to Hospital Board and the</b>	No action was taken.									

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP
<b>Healthcare District Board – Adopt Resolution No. 2024-01.</b>		
<b>Proposed Action – Recommend Approval to Hospital Board and the Healthcare District Board –California Health Facilities Financing Authority Distressed Loan Hospital Loan Program, Loan and Security Agreement</b>	No action was taken.	
<b>Future Agenda Items</b>	<ul style="list-style-type: none"> <li>• IT Dashboards</li> </ul>	
<b>Next Meeting</b>	The next regular Finance Committee meeting will be held on January 30, 2024 @ 9:00 am.	
<b>Adjournment</b>	The meeting was adjourned at 10:37 am.	

In accordance with The Brown Act, *Section 54957.5*, all reports, and handouts discussed during this Open Session meeting are public records and are available for public inspection. These reports and/or handouts are available for review at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Original

Handout for Dec. 2023  
Finance Committee  
12/22/23



**SAN GORGONIO MEMORIAL HOSPITAL  
BANNING, CALIFORNIA**

**Unaudited Financial Statements**

for

**FIVE MONTHS ENDING NOVEMBER 30, 2023**

**FY 2024**

**Certification Statement:**

To the best of my knowledge, I certify for the hospital that the attached financial statements, except for the uncertainty of IGT revenue accruals, do not contain any untrue statement of a material fact or omit to state a material fact that would make the financial statements misleading. I further certify that the financial statements present in all material respects the financial condition and results of operation of the hospital and all related organizations reported herein.

Note: Because these reports are prepared for internal users only, they do not purport to conform to the principles contained in U.S. GAAP.

Certified by:

*Daniel R. Heckathorne*

**Daniel R. Heckathorne**

CFO

# San Gorgonio Memorial Hospital

## Financial Report - Executive Summary

For the Month of November, 2023 and Five Months Ended November 30, 2023 (Unaudited)

### Profit/Loss (EBIDA) Summary (MTD) Negative and (YTD) Negative (comparisons to Budget)

**Month** - The month of November resulted in negative \$4.75M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted negative EBIDA of \$1.20M vs. a positive \$1.42M Flex Budget. **YTD** - Five months ending in November resulted in negative \$13.26M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted negative EBIDA of \$4.75M and a Flex Budget loss of \$5.55M. Note: If the unaccrued Supplemental funds, along with provision for lease principal payments were booked, the YTD EBIDA would be a negative \$6.38M, as compared to the actual negative booked \$13.19M.

**Month** - Adjustments and Items of Note:

- Patient Days, Adjusted Patient Days and all key workload volumes were below budget.
- The Average Length of Stay was 4% lower than November, 2022, yet the overall Case Mix Index was 12% higher than November, 2022 (1.63 vs. 1.45). This is a good variance.
- The PTO bank was increased by \$154K based on the recent 3.0% wage increase.
- There was a \$504K favorable adjustment to Deductions from Revenues Expense due to removal of previously estimated Medicare Outlier Repayments no longer deemed necessary.
- There was a one-time \$3.52M adjustment for Contractual Allowance Reserves booked in November. This is based on the latest reconciliation of cash collections compared to previously estimated collections.

**Month** - November's inpatient average daily census was 20.6. Adjusted Patient Days were 3.2% under budget (1,801 vs. 1,861), and Patient Days were 8% below budget (617 vs. 673). Emergency Visits were 6% under budget (3,489 vs. 3,717), and Surgeries were 22% under budget (94 vs. 120).

**YTD** - Inpatient average daily census was 21.0. Adjusted Patient Days were slightly under budget (9,316 vs. 9,350), Patient Days were 5% below budget (3,211 vs. 3,376). Emergency Visits were 7% under budget (17,431 vs. 18,693), and Surgeries were 17% under budget (555 vs. 666). Observation Days reported were 8.7% higher than the previous year (1,535 vs. 1,412).

### Patient Revenues (MTD) Negative Variance (YTD) Negative Variance

**Month** - Net Patient Revenues in November were \$1.72M, or \$3.64M under the budgeted \$5.36M (see Notes: regarding the \$3.52 Contractual Allowance Reserves adjustment and the \$504K Outlier adjustment). Other items of note included the fact that gross Inpatient Revenues were 11% (\$1.64M) under budget, while gross Outpatient Revenues were 1% (\$272K) under budget. As discussed in the past, Inpatient Revenues pay about 16.8% of charges, compared to Outpatient Revenues which pay about 9.7% of charges. This variance shift between budgeted Inpatient vs. Outpatient Revenues has a significant unfavorable impact on Net Revenues as compared to budget.

**YTD** - Net Patient Revenues in November were \$19.83M compared to budgeted \$27.8M (-29%) (see Notes: regarding the \$3.52M Contractual Allowance Reserves adjustment and the \$504K Outlier adjustment). This was also impacted by the YTD Inpatient Days being 5% below budget, the E/R visits being 7% below budget and Surgeries being 17% (111 cases, i.e. I/P = 55 cases and O/P = 56 cases) below budget and 56 combined cases lower than the prior year.

### Total Operating Revenues (MTD) Negative Variance & (YTD) Negative Variance

**Month** - Operating Revenue in November was \$3.78M under budget. This is mostly impacted by the Net Patient Revenues being \$3.64M under budget and the Non-Patient Revenues being \$135K under budget.

**YTD** - Operating Revenue through November was \$8.35M under budget. This is impacted by the Net Patient Revenues at \$8.01M under budget and the Non-Patient Revenues being \$344K under budget.

### **Operating Expenses (MTD) Negative & (YTD) Negative Variance**

**Month** - Operating Expenses in November were \$7.01M and were under budget by \$158K and under the Flex Budget by \$185K. Key items that impacted overall Expenses were as follows: 1) Salaries and Wages, Benefits, and Contract Labor were collectively \$260K under budget and \$313K under the Flex budget. This was impacted by a) Wages were \$402K under budget, which included an additional \$153K accrual to the PTO bank, b) Employee Benefits were \$14K under budget, and c) Contract Labor was over budget by \$156K due to several nurse staffing vacancies in O.B, ICU, and Emergency Departments. 2) Purchased Services were over budget by \$195K, which included Legal Fees being \$264K over budget; and 3) Supplies were \$138K below budget due to low workload volumes and a favorable inventory adjustment to Pharmacy supplies.

**Year-to Date** – Operating Expenses in November were \$36.65M and were over budget by \$86K and over the Flex Budget by \$851K. Key items that impacted overall Expenses were as follows: 1) Salaries and Wages, Benefits, and Contract Labor were collectively \$395K over budget and \$649K over the Flex budget. This was driven by the following: a) The \$527K State Mandated California Paid Sick Leave program that was accrued for the had to be accrued for the entire year in July; b) Contract Labor was over budget by \$458K due to several nurse staffing vacancies in the Obstetrics and Emergency Department along with orientation of 2 new grads in the Emergency Department; and c) an additional \$153K increase for re-valuing the PTO bank to reflect the 3.0% Wage increase in late October; 2) Purchased Services are \$530K over budget which included Legal Fees exceeding budget by \$601K; 3) Supplies are the most notable item under budget by \$566K, again reflected by lower than anticipated intensities of services, including Surgeries and Emergency visits being under budget; 4) Repairs and Maintenance are over budget by \$99K largely to significant maintenance work occurring in September and October, and 5) Other Expenses are \$96K under budget due mostly to certain “seasonal” expenses still waiting to occur.

### **Balance Sheet/Cash Flow**

Patient cash collections in November totaled \$4.51M compared to \$5.24M in October and \$4.52M in September. Gross Accounts Receivable Days in November increased slightly to 60.8 compared to 59.7 in October, 65.6 in September and 66.2 in August.

Cash Balances were \$5.95M compared to \$8.68M in October. Net Accounts Receivable dropped to \$8.95M, primarily due to the \$3.5M adjustment for Contractual Allowance Reserves. Accounts Payable increased to \$10.13M compared to \$9.83M in October. Finally, a liability is in place \$1.5M for FY 2022 payable to Medicare for estimated overpayments for outliers and sequestration funds. The outstanding Line of Credit has held steady at \$4M since June (and was increased to \$8M as of the date of this Executive Summary (12/21/23).

### **Summary**

#### **Positive takeaways:**

- 1) Labor costs were below budget in November; there was significant staff flexing during the month.

#### **Negative takeaways:**

- 1) Surgeries continue to lag behind budget and prior year levels;
- 2) Legal fees continue to be over budget;
- 3) The Contractual Allowance Reserve adjustment significantly impacted outcomes.
- 4) November EBIDA, adjusted for pending revised Supplemental Income and reserving for Cash Payments required for Leases was a negative \$3.24M, and the YTD is a negative \$6.38M.

**SGMH NOVEMBER 2023 EXTRAORDINARY ITEMS**

12/21/2023

EXPENSE		INCOME		GAIN/(LOSS)
<b>SALARIES / BENEFITS/ CONTRACT LABOR</b>		<b>REVENUES</b>		
WAGES UNDER BUDGET	(556,087)	NET REVENUES UNDER BUDGET	(624,626)	
PTO BANK INCREASE FOR 3.0% SALARY INCREASE IN OCTOBER	153,663	NET REVENUE ADJUSTMENT AS OF 11/30/23	(3,519,495)	
CONTRACT LABOR OVER BUDGET DUE TO STAFF VACANCIES	156,450	REMOVE OUTLIER REPAYMENT RESERVE	504,356	
<b>OTHER EXPENSE</b>		<b>OTHER REVENUES</b>		
LEGAL FEES OVER BUDGET	263,693	SUPPLEMENTAL REVENUES RECEIVED	0	
SUPPLIES UNDER BUDGET	(63,273)			
	(45,554)		(3,639,765)	(3,594,211)
<b>EXTRAORDINARY NEGATIVE EXPENSES</b>	<b>(45,554)</b>	<b>EXTRAORDINARY NEGATIVE REVENUES</b>	<b>(3,639,765)</b>	<b>(3,594,211)</b>

H

## STATISTICS

Inpatient Admissions/Discharges (Monthly Average)	Represents number of patients admitted/discharged into and out of the hospital.
Patient Days (Monthly Average)	Each day a patient stays in the hospital is counted as a patient day. This count is normally done at midnight.
Average Daily Census (Inpatient)	Equals the average number of inpatients in the hospital on any given day or month.
Average Length of Stay (Inpatient)	Represents that average number of days that inpatients stay in the hospital.
Emergency Visits (Monthly Average)	Represents the number of patients who sought services at the emergency room.
Surgery Cases - Excluding G.I. (Monthly Average)	Equals the number of patients who had a surgical procedure(s) performed.
G.I. Cases (Monthly)	Number of patients who had a gastrointestinal exam performed.
Newborn Deliveries (Monthly)	Number of babies delivered.

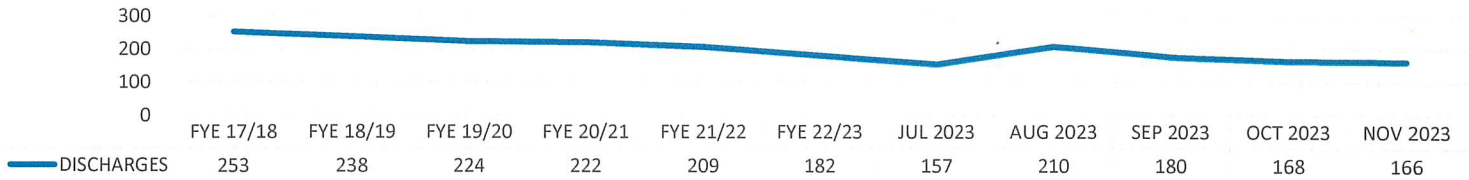
## PRODUCTIVITY

5 Worked FTEs ( includes Registry FTEs)	Represents an equivalency of full-time staff worked. One FTE is equivalent of working 40 hours per week, 80 hours per pay period, 173.3 hours per 30 day month, or 2,080 hours in a 52 week year. This calculation divides the number of hours worked by the number of hours in the respective work period (40, 80, etc.) Example: 340 hours worked in an 80 hour pay period = 4.25 FTE's
Worked FTES per APD	Divides the Total Worked FTE's by the daily average of the Adjusted Patient Days.
Paid FTEs ( includes Registry FTEs)	Represents an equivalency of full-time staff paid. One FTE is equivalent of working 40 hours per week, 80 hours per pay period, 173.3 hours per 30 day month, or 2,080 hours in a 52 week year. This calculation divides the number of hours paid (includes all hours paid consisting of worked hours, PTO hours, sick pay, etc.) by the number of hours in the respective work period (40, 80, etc.) Example: 500 hours paid in an 80 hour pay period = 6.25 FTE's.
Paid FTES per APD	Divides the Total Paid FTE's by the daily average of the Adjusted Patient Days.
ADJUSTED PATIENT DAYS	This is a blend of total patient days stayed in the hospital for a month, plus an equivalency factor (based on average inpatient revenue per patient day) applied to the outpatient revenues in order to account for outpatient workloads.

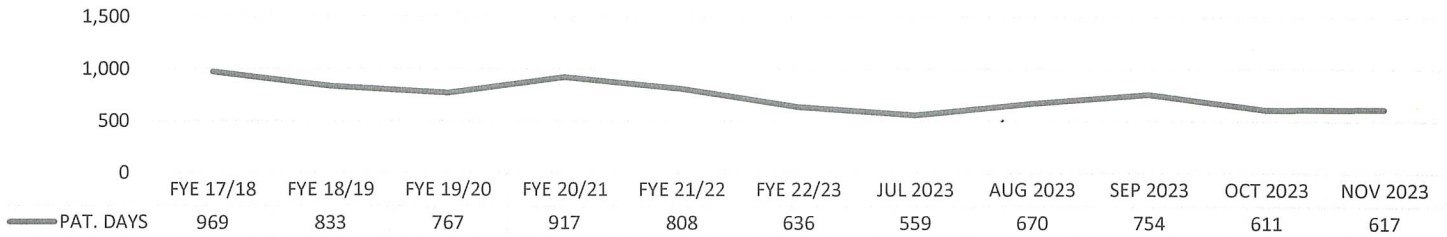


# SAN GORGONIO MEMORIAL HOSPITAL

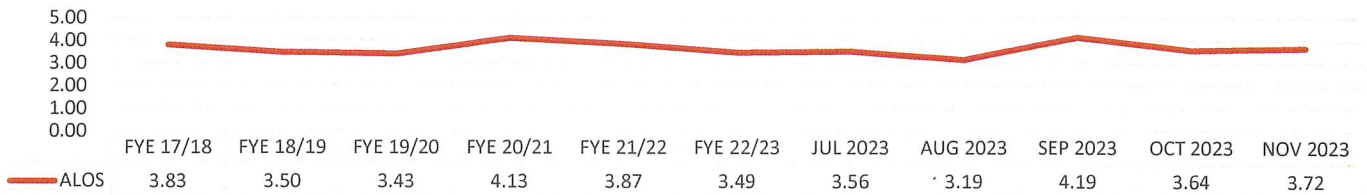
## INPATIENT DISCHARGES



## INPATIENT DAYS



## AVERAGE LENGTH OF STAY

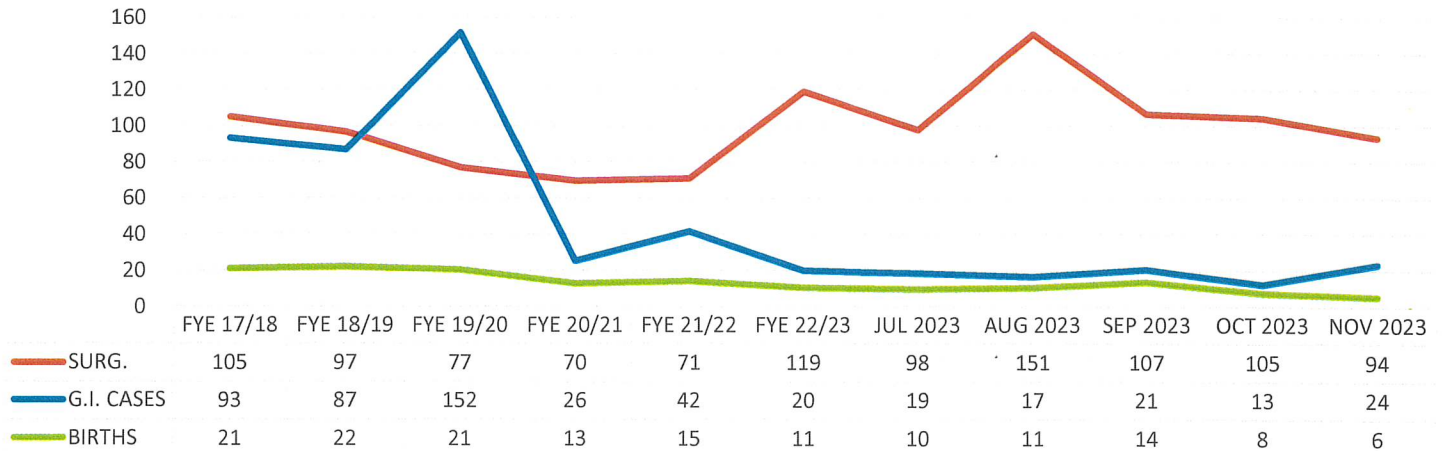


## EMERGENCY VISITS

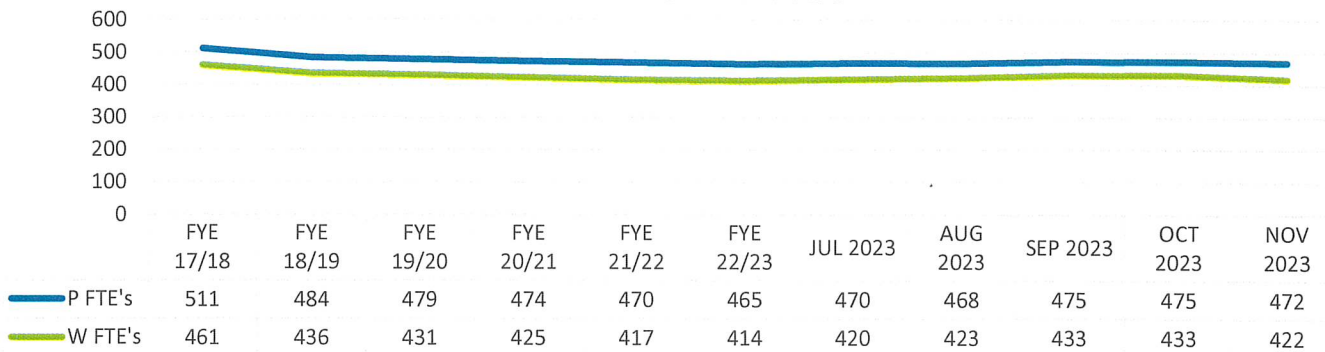


# SAN GORGONIO MEMORIAL HOSPITAL

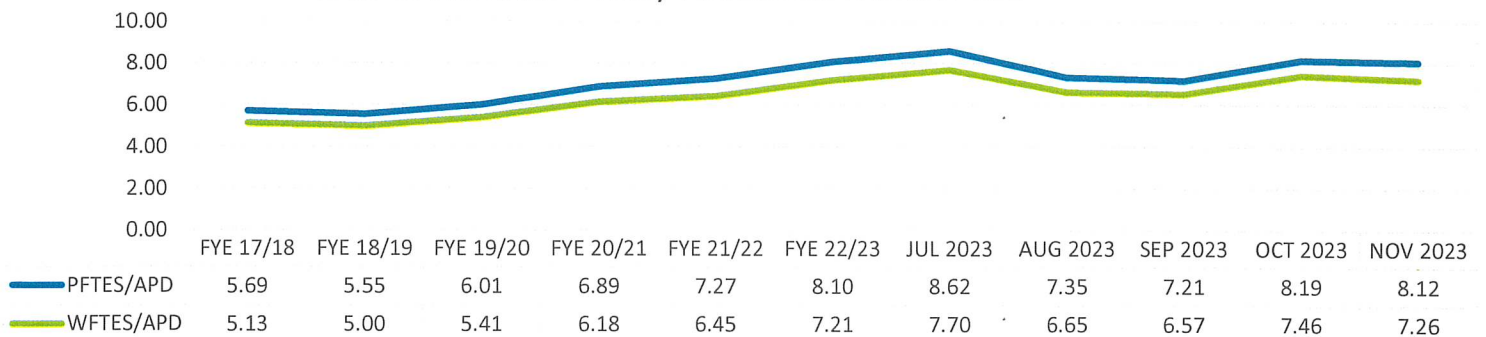
## SURGERY CASES, G.I. CASES, N/B DELIVERIES




## PAID & WORKED FTE'S



## PAID & WORKED FTE'S / ADJUSTED PATIENT DAY

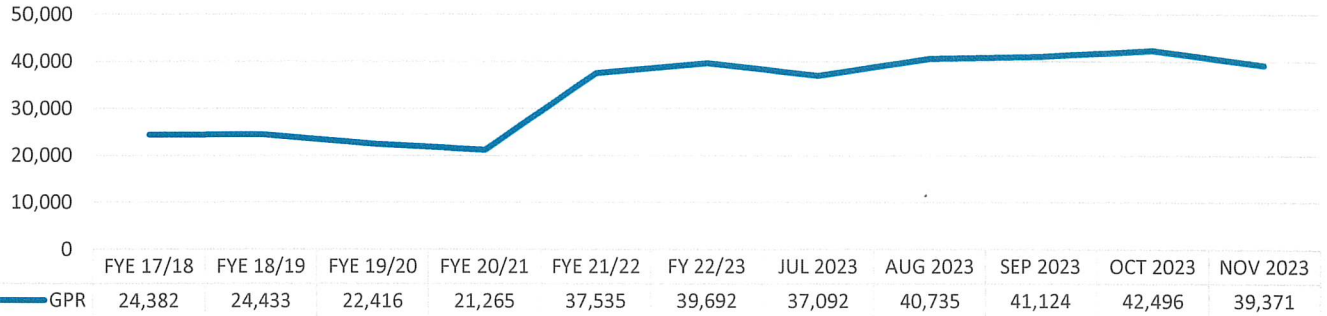


## INCOME STATEMENT

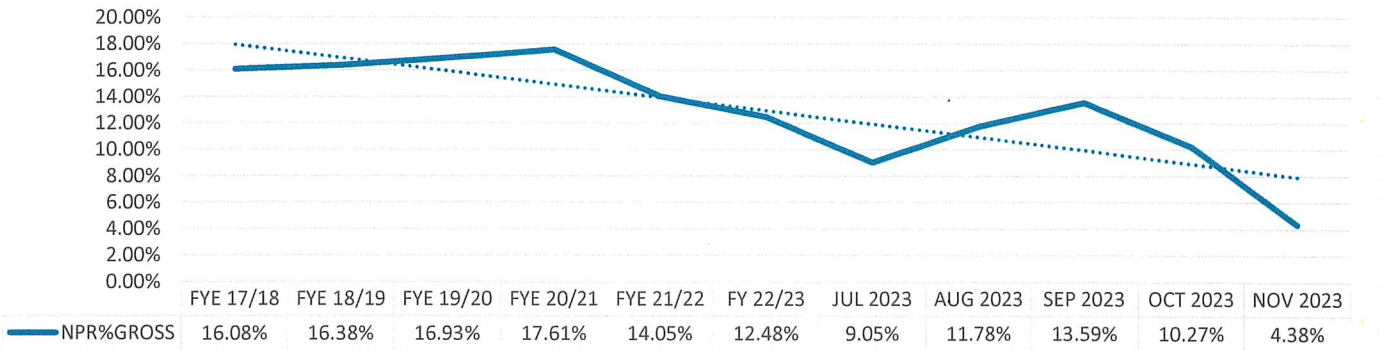
Gross Patient Revenue (000's) (Monthly Ave.)	Represents total charges (before discounts and allowances) made for all patient services provided.
Net Patient Revenue (NPR) (000's) (Monthly Ave.)	Equals the sum of all (patient) charges for services provided that are due to the hospital, less estimated adjustments for discounts and other contractual disallowances for which the patients may be entitled.
NPR as % of Gross	Reflects the percentage of Gross Patient Revenues (charges) that are expected to be collected. Calculated by dividing Net Patient Revenue by the Gross Patient Revenue.
Total Operating Revenue (000's) (Monthly Ave.)	This reflects all Revenues available for payment of Operating Expenses. This includes Net Patient Revenue plus all other forms of miscellaneous Revenues.
Salaries, Wages, Benefits & Contract Labor (000's) (Monthly Ave.)	Represents the total staffing expenses of the Hospital
SWB + Contract Labor as % of Total Operating Revenue	Identifies what portion the Operating Revenues are spent on staffing costs.
 Total Operating Expense (TOE) (000's)(Monthly Ave.)	Operating Expense reflects all costs needed to fund the Hospital's business operations.
TOE as % of Total Operating Revenue	Identifies the relationship that Operating Expenses have to the Total Operating Revenues.
EBIDA (000's)(Monthly Average)	Earnings Before Interest, Depreciation, and Amortization. This reflects the difference between Net Operating Revenues and Total Operating Expense. This is a quick measurement of the Hospital's ability to meet its financial obligations and have additional funds for equipment replacement and future growth of the organization.
EBIDA as % of NPR	This measurement is a gauge of the surplus (or deficit) of funds available for operations and future growth.
Net Patient Revenue vs. Total Labor Expense	This measurement illustrates that Net Patient Revenues basically only cover Total Labor Expense, and that all of the Other Revenues and Supplemental Incomes are necessary to cover the remaining operational Expenses and EBIDA required to operate the Hospital.
Operating Revenues (Normalized), Expenses, Staffing Expenses, and EBIDA (Normalized)	This graph illustrates the "normalization" of Operating Revenues and EBIDA, by reallocating proportionate Supplemental Revenues and related Expenses into the current month and YTD results.

# SAN GORGONIO MEMORIAL HOSPITAL

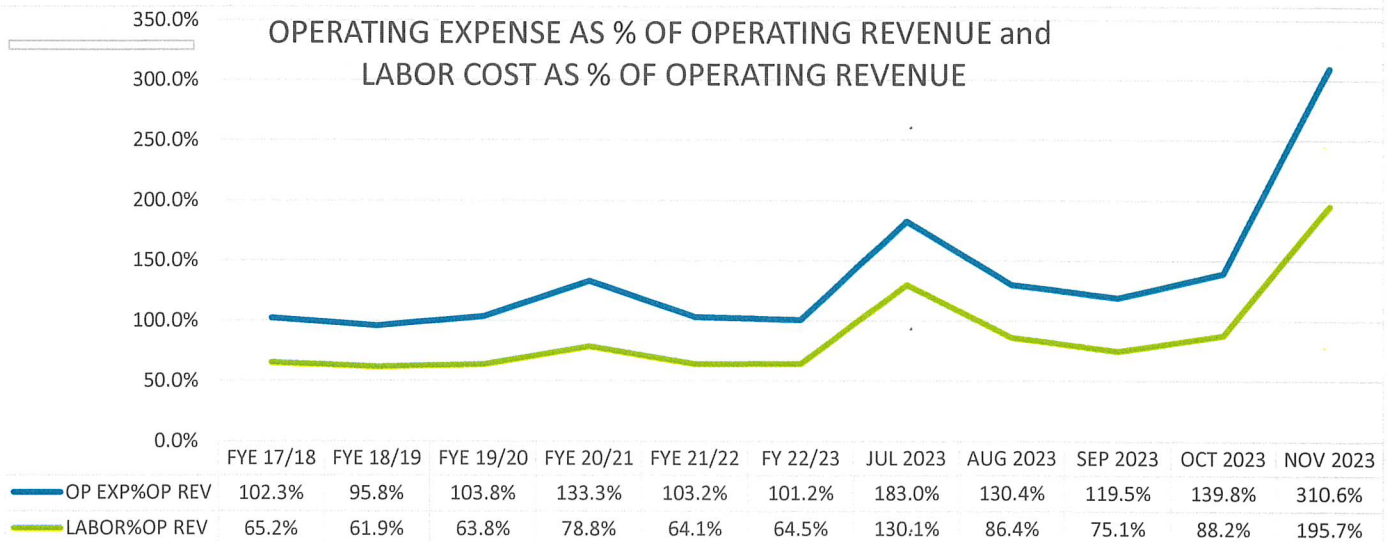
## GROSS PATIENT REVENUE (000's)



## NET PATIENT REVENUE AS % OF GROSS

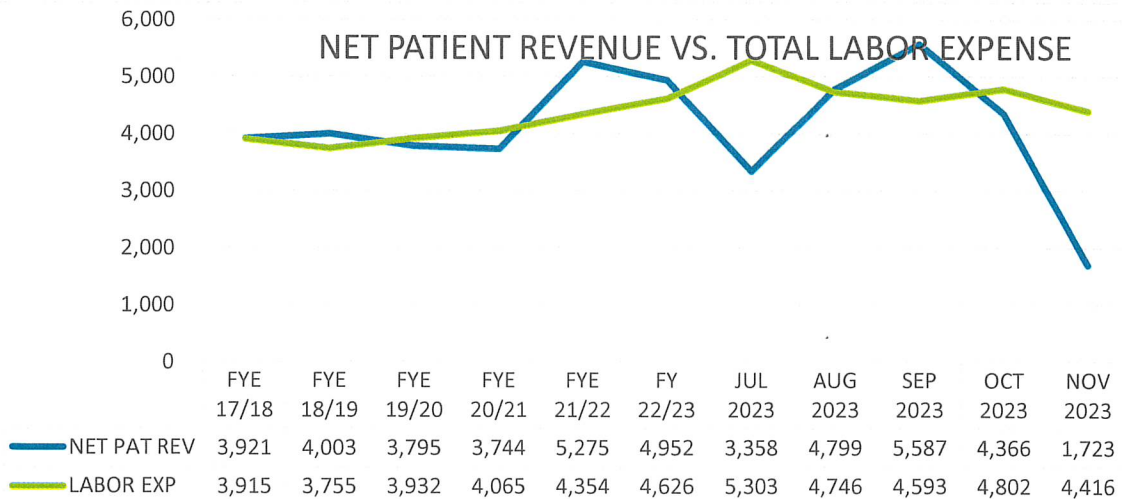


## OPERATING EXPENSE AS % OF OPERATING REVENUE and LABOR COST AS % OF OPERATING REVENUE



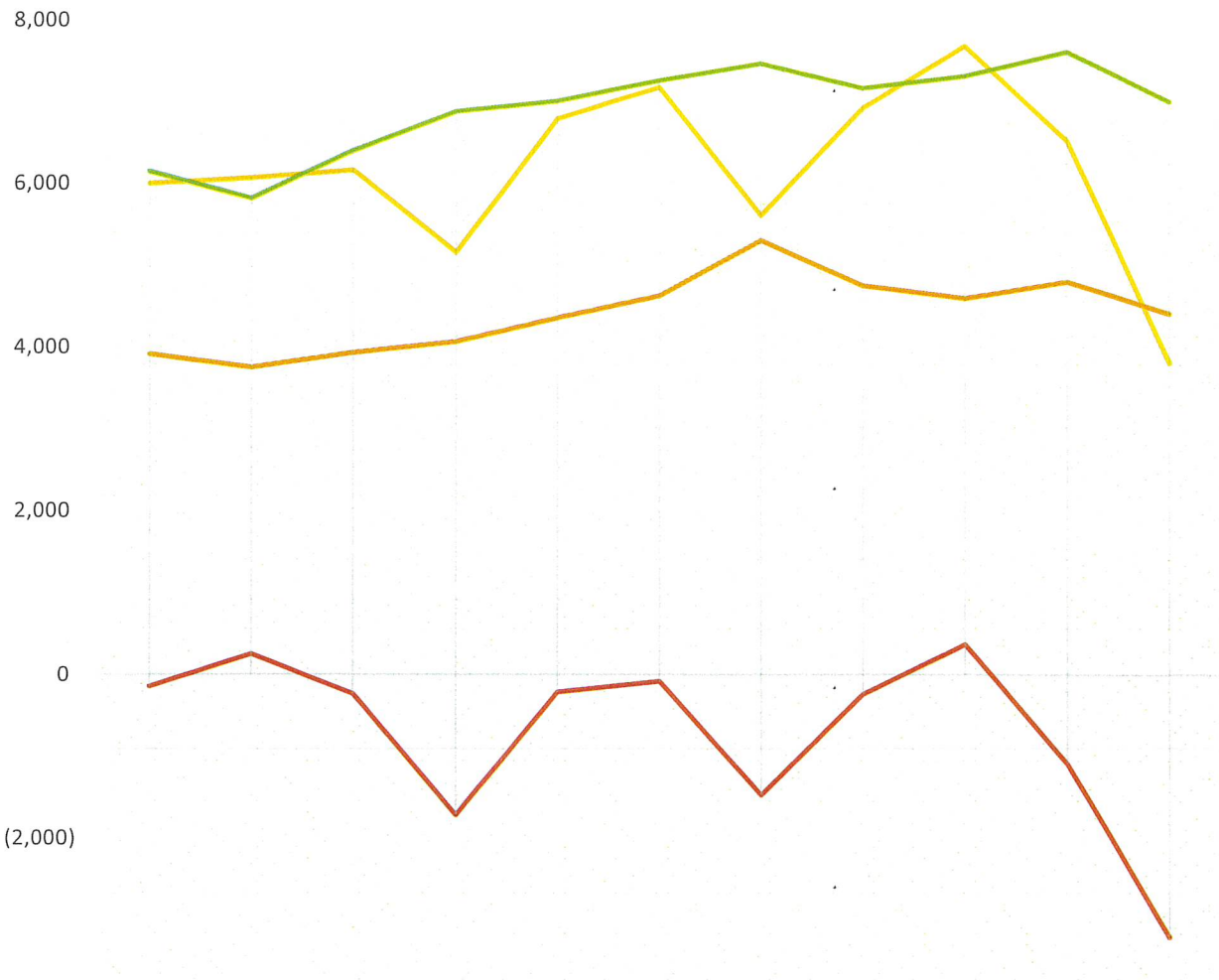
# SAN GORGONIO MEMORIAL HOSPITAL

## OPERATING REVENUE, OPERATING EXPENSE, STAFFING EXPENSE, AND EBIDA



# SAN GORGONIO MEMORIAL HOSPITAL

OPERATING REVENUE (NORMALIZED), OPERATING EXPENSE, STAFFING EXPENSE, AND EBIDA (NORMALIZED) (000's)



	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	FYE 21/22	FY 22/23	JUL 2023	AUG 2023	SEP 2023	OCT 2023	NOV 2023
REV NORMAL	6,006	6,069	6,165	5,160	6,791	7,172	5,604	6,920	7,679	6,522	3,817
OP EXP	6,147	5,817	6,398	6,878	7,007	7,257	7,461	7,164	7,310	7,610	7,006
LABOR EXP	3,915	3,755	3,932	4,065	4,354	4,626	5,303	4,746	4,593	4,802	4,416
EBIDA NORMAL	(141)	252	(233)	(1,719)	(216)	(85)	(1,474)	(243)	369	(1,088)	(3,189)



	FYE18/19	FYE19/20	FYE 20/21	FYE 21/22	FYE 22/23	FYE 23/24	FYE 23/24	FYE 23/24	FYE 23/24	FYE 23/24
	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	7/31/2023	8/31/2023	9/30/2023	10/31/2023	11/30/2023
<b>Gross Patient Revenue</b>										
Inpatient Revenue	\$ 7,667,883	\$ 7,401,282	\$ 9,331,371	\$ 16,603,390	\$ 14,104,379	\$ 12,272,477	\$ 13,826,953	\$ 15,201,247	\$ 14,429,560	\$ 13,489,069
Inpatient Psych/Rehab Revenue	0	0	0	0	0	-	-	-	-	-
Outpatient Revenue	16,765,365	15,067,104	11,933,682	20,932,075	25,582,152	24,819,128	26,907,760	25,923,098	28,065,983	25,881,729
Long Term Care Revenue	0	0	0	0	0	-	-	-	-	-
Home Health Revenue	0	0	0	0	0	-	-	-	-	-
<b>Total Gross Patient Revenue</b>	<b>24,433,247</b>	<b>22,468,386</b>	<b>21,265,053</b>	<b>37,535,465</b>	<b>39,686,530</b>	<b>37,091,605</b>	<b>40,734,713</b>	<b>41,124,345</b>	<b>42,495,543</b>	<b>39,370,798</b>
<b>Deductions From Revenue</b>										
Discounts and Allowances	(19,588,148)	(17,845,730)	(16,635,734)	(31,267,149)	(33,562,183)	(32,843,917)	(34,825,978)	(34,572,937)	(37,124,786)	(36,796,629)
Bad Debt Expense	(858,023)	(653,280)	(824,395)	(1,045,570)	(1,047,941)	(864,969)	(964,980)	(950,573)	(901,941)	(808,712)
GI HMO Discounts	0	0	0	0	0	0	0	0	0	0
Charity Care	(56,168)	(86,517)	(41,362)	(136,947)	(97,443)	(24,281)	(144,312)	(13,958)	(103,164)	(42,458)
<b>Total Deductions From Revenue</b>	<b>(20,502,339)</b>	<b>(18,585,527)</b>	<b>(17,501,490)</b>	<b>(32,449,666)</b>	<b>(34,707,567)</b>	<b>(33,733,167)</b>	<b>(35,935,270)</b>	<b>(35,537,468)</b>	<b>(38,129,891)</b>	<b>(37,647,799)</b>
<b>Net Patient Revenue</b>	<b>3,930,908</b>	<b>3,882,859</b>	<b>3,763,563</b>	<b>5,085,799</b>	<b>4,978,963</b>	<b>3,358,438</b>	<b>4,799,443</b>	<b>5,586,877</b>	<b>4,365,652</b>	<b>1,722,999</b>
<b>Non- Patient Revenues</b>										
Supplemental Revenues	1,485,337	1,157,326	869,707	501,407	939,467	35,377	136,446	0	481,713	0
Grants & Other Op Revenues	205,590	750,434	505,190	725,066	873,887	115,377	158,046	129,370	193,230	131,437
Clinic Net Revenues	22,382	15,743	0	0	0	0	0	0	0	0
Tax Subsidies Measure D	196,524	199,469	209,744	229,405	246,994	246,994	246,994	246,994	246,994	246,994
Tax Subsidies Prop 13	115,388	114,061	142,552	146,104	154,500	154,500	154,500	154,500	154,500	154,500
Tax Subsidies County Suplmtl Funds	16,159	9,064	16,163	25,561	2,308	167,258	0	0	0	0
<b>Non-Patient Revenues</b>	<b>2,041,381</b>	<b>2,246,097</b>	<b>1,743,355</b>	<b>1,627,542</b>	<b>2,217,155</b>	<b>719,506</b>	<b>695,986</b>	<b>530,864</b>	<b>1,076,437</b>	<b>532,931</b>
<b>Total Operating Revenue</b>	<b>5,972,289</b>	<b>6,128,956</b>	<b>5,506,919</b>	<b>6,713,341</b>	<b>7,196,118</b>	<b>4,077,944</b>	<b>5,495,429</b>	<b>6,117,741</b>	<b>5,442,089</b>	<b>2,255,930</b>
<b>Operating Expenses</b>										
Salaries and Wages	2,941,226	3,104,224	3,125,159	3,420,974	3,600,025	4,119,595	3,674,360	3,550,566	3,776,105	3,194,719
Fringe Benefits	702,477	752,708	856,889	830,599	938,302	1,013,089	970,221	848,892	1,033,920	978,795
Contract Labor	106,628	59,516	114,886	99,977	87,455	170,728	101,775	193,746	176,561	242,190
Physicians Fees	246,631	331,858	350,783	330,533	317,726	280,402	260,382	307,954	290,783	282,650
Purchased Services	513,857	691,337	772,336	892,521	820,559	840,396	941,985	1,007,492	1,002,184	1,078,252
Supply Expense	685,518	751,025	903,883	995,446	876,735	700,018	814,829	906,328	861,780	762,898
Utilities	75,471	80,680	92,287	111,192	115,835	104,939	107,960	76,274	88,098	97,211
Repairs and Maintenance	58,325	58,592	139,712	77,524	90,737	61,860	69,232	147,878	136,677	92,822
Insurance Expense	85,267	103,277	110,683	112,745	122,476	185,434	133,116	147,115	138,116	128,116
All Other Operating Expenses	70,922	160,745	148,752	101,142	135,411	59,602	47,639	68,331	55,072	93,494
IGT Expense	58,743	109,484	172,366	0	91,499	0	0	0	0	0
Leases and Rentals	76,150	79,233	79,424	37,952	69,475	25,370	42,245	55,457	50,740	54,691
1206 (b) CLINIC	98,810	94,628	34,096	0	0	0	0	0	0	0
<b>Total Operating Expenses</b>	<b>5,720,023</b>	<b>6,377,306</b>	<b>6,901,255</b>	<b>7,010,605</b>	<b>7,266,235</b>	<b>7,561,433</b>	<b>7,163,744</b>	<b>7,310,033</b>	<b>7,610,036</b>	<b>7,005,838</b>
<b>EBIDA</b>	<b>252,266</b>	<b>(248,351)</b>	<b>(1,394,337)</b>	<b>(297,264)</b>	<b>(70,116)</b>	<b>(3,483,489)</b>	<b>(1,668,315)</b>	<b>(1,192,292)</b>	<b>(2,167,947)</b>	<b>(4,749,908)</b>
<b>Interest, Depreciation, and Amortization</b>										
Depreciation Expense	497,808	506,497	494,721	472,317	558,920	514,671	515,528	605,920	571,451	569,523
Interest & Amortization Expense	418,193	422,094	447,994	391,606	481,556	434,111	445,099	383,794	405,597	370,607
<b>Total Interest, Depr, &amp; Amort.</b>	<b>916,000</b>	<b>928,591</b>	<b>942,715</b>	<b>863,923</b>	<b>1,040,476</b>	<b>948,782</b>	<b>960,627</b>	<b>989,714</b>	<b>977,048</b>	<b>940,130</b>
<b>Non-Operating Revenue:</b>										
Contributions & Other	7,745	27,759	7,121	25,068	149,485	13,926	1,225,118	21,774	13,626	415,400
Tax Subsidies for GO Bonds - M-A	692,457	666,966	598,410	616,059	627,353	627,353	627,353	627,353	627,353	627,353
<b>Total Non Operating Revenue/(Expense)</b>	<b>700,202</b>	<b>694,725</b>	<b>605,531</b>	<b>641,127</b>	<b>776,839</b>	<b>641,279</b>	<b>1,852,471</b>	<b>649,127</b>	<b>640,979</b>	<b>1,042,753</b>
<b>Total Net Surplus/(Loss)</b>	<b>36,467</b>	<b>(482,217)</b>	<b>(1,731,521)</b>	<b>(520,060)</b>	<b>(333,754)</b>	<b>(3,790,992)</b>	<b>(776,471)</b>	<b>(1,532,879)</b>	<b>(2,504,016)</b>	<b>(4,647,285)</b>
Change in Interest in Foundation	0	0	0	0	0	0	0	0	0	0
Extra-ordinary Loss	0	(689,574)	(650)	(284,792)	0	0	0	0	0	0
<b>Increase/(Decrease in Unrestricted Net Assets</b>	<b>\$ 36,467</b>	<b>\$ (1,171,791)</b>	<b>\$ (1,732,171)</b>	<b>\$ (804,852)</b>	<b>\$ (333,754)</b>	<b>\$ (3,790,992)</b>	<b>\$ (776,471)</b>	<b>\$ (1,532,879)</b>	<b>\$ (2,504,016)</b>	<b>\$ (4,647,285)</b>
<b>Total Profit Margin</b>	<b>0.6%</b>	<b>-7.9%</b>	<b>-31.4%</b>	<b>-7.7%</b>	<b>-4.6%</b>	<b>-93.0%</b>	<b>-14.1%</b>	<b>-25.1%</b>	<b>-46.0%</b>	<b>-206.0%</b>
<b>EBIDA %</b>	<b>4.2%</b>	<b>-4.1%</b>	<b>-25.3%</b>	<b>-4.4%</b>	<b>-1.0%</b>	<b>-85.4%</b>	<b>-30.4%</b>	<b>-19.5%</b>	<b>-39.8%</b>	<b>-210.6%</b>

12

Actual EBIDA for Month						(3,483,489)	(1,668,315)	(1,192,292)	(2,167,947)	(4,749,908)
Adjustments to EBIDA to account for Cash Impact of GASB Lease Reclassification						(55,132)	(55,132)	(55,132)	(55,132)	(55,132)
Adjustment for Normalization of Supplemental Income (Net of Current Month Receipts)						1,525,918	1,424,849	1,561,295	1,079,582	1,561,295
Effective EBIDA after Normalization of Supplementals & Adjustments for Cash Outlays for Leases						(2,012,702)	(298,597)	313,872	(1,143,496)	(3,243,744)
						<b>YTD</b>	<b>(2,311,300)</b>	<b>(1,997,428)</b>	<b>(3,140,924)</b>	<b>(6,384,669)</b>

SAN GORGONIO HEALTHCARE DISTRICT & HOSPITAL - BANNING, CA

5 Year Monthly Averages and 12 Rolling Months Ended 11/30/2023

	FYE18/19	FYE19/20	FYE 20/21	FYE 21/22	FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23	FYE 23/24	FYE 23/24	FYE 23/24	FYE 23/24	FYE 23/24
	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	12/31/2022	1/31/2023	2/28/2023	3/31/2023	4/30/2023	5/31/2023	6/30/2023	7/31/2023	8/31/2023	9/30/2023	10/31/2023	11/30/2023
<b>Gross Patient Revenue</b>					12												
Inpatient Revenue	\$ 7,667,883	\$ 7,401,282	\$ 9,331,371	\$ 16,603,390	\$ 14,336,446	\$ 17,505,552	\$ 15,327,216	\$ 13,691,246	\$ 12,451,963	\$ 12,872,356	\$ 13,178,063	\$ 11,147,397	\$ 12,272,477	\$ 13,826,953	\$ 15,201,247	\$ 14,429,560	\$ 13,489,069
Inpatient Psych/Rehab Revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Outpatient Revenue	16,765,365	15,067,104	11,933,682	20,932,075	25,353,762	24,746,141	25,994,869	23,543,943	27,831,252	22,609,141	29,465,200	28,029,203	24,819,128	26,907,760	25,923,098	28,065,983	25,881,729
Long Term Care Revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Home Health Revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total Gross Patient Revenue</b>	<b>24,433,247</b>	<b>22,468,386</b>	<b>21,265,053</b>	<b>37,535,465</b>	<b>39,690,208</b>	<b>42,251,693</b>	<b>41,322,085</b>	<b>37,235,189</b>	<b>40,283,214</b>	<b>35,481,497</b>	<b>42,643,263</b>	<b>39,176,601</b>	<b>37,091,605</b>	<b>40,734,713</b>	<b>41,124,345</b>	<b>42,495,543</b>	<b>39,370,798</b>
<b>Deductions From Revenue</b>																	
Discounts and Allowances	(19,588,148)	(17,845,730)	(16,635,734)	(31,267,149)	(33,562,183)	(35,904,405)	(35,468,343)	(30,914,713)	(35,779,812)	(30,383,694)	(35,144,037)	(32,029,039)	(32,843,917)	(34,825,978)	(34,572,937)	(37,124,786)	(36,796,629)
Bad Debt Expense	(858,023)	(653,280)	(824,395)	(1,045,570)	(1,047,941)	(1,015,237)	(353,998)	(1,246,067)	(334,016)	(799,841)	(2,076,998)	(2,232,123)	(1,864,969)	(964,980)	(950,573)	(901,941)	(808,712)
GI HMO Discounts	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Charity Care	(56,168)	(86,517)	(41,362)	(136,947)	(97,443)	(65,555)	(14,815)	(14,782)	(57,399)	(121,864)	(121,864)	(183,865)	(24,281)	(144,312)	(13,958)	(103,164)	(42,458)
<b>Total Deductions From Revenue</b>	<b>(20,502,339)</b>	<b>(18,585,527)</b>	<b>(17,501,490)</b>	<b>(32,449,666)</b>	<b>(34,707,567)</b>	<b>(36,985,198)</b>	<b>(35,837,156)</b>	<b>(32,175,562)</b>	<b>(36,171,227)</b>	<b>(31,305,399)</b>	<b>(37,342,898)</b>	<b>(34,445,026)</b>	<b>(33,733,167)</b>	<b>(35,935,270)</b>	<b>(35,537,468)</b>	<b>(38,129,891)</b>	<b>(37,647,799)</b>
<b>Net Patient Revenue</b>	<b>3,930,908</b>	<b>3,882,859</b>	<b>3,763,563</b>	<b>5,085,799</b>	<b>4,982,641</b>	<b>5,266,495</b>	<b>5,484,928</b>	<b>5,059,627</b>	<b>4,111,987</b>	<b>4,176,098</b>	<b>5,300,365</b>	<b>4,731,574</b>	<b>3,358,438</b>	<b>4,799,443</b>	<b>5,586,877</b>	<b>4,365,652</b>	<b>1,722,999</b>
<b>Non-Patient Revenues</b>																	
Supplemental Revenues	1,485,337	1,157,326	869,707	501,407	939,467	-	-	-	8,095,568	3,178,030	0	35,377	136,446	-	481,713	-	-
Grants & Other Op Revenues	205,590	750,434	505,190	725,065	873,887	1,059,520	383,032	951,722	4,151,470	2,85,071	440,060	1,866,646	115,377	158,046	129,370	193,230	131,437
Clinic Net Revenues	22,382	15,743	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tax Subsidies Measure D	196,524	199,469	209,744	229,405	246,994	246,994	246,994	246,994	246,994	246,994	246,994	246,994	246,994	246,994	246,994	246,994	246,994
Tax Subsidies Prop 13	115,388	114,061	142,552	146,104	154,500	154,500	154,500	154,500	154,500	154,500	154,500	184,500	154,500	154,500	154,500	154,500	154,500
Tax Subsidies County Supplmtl Funds	16,159	9,064	16,163	25,561	2,308	-	-	-	27,692	-	-	-	167,258	-	-	-	-
<b>Non-Patient Revenues</b>	<b>2,041,381</b>	<b>2,246,097</b>	<b>1,743,355</b>	<b>1,627,542</b>	<b>2,217,155</b>	<b>1,461,014</b>	<b>784,526</b>	<b>1,353,216</b>	<b>12,676,224</b>	<b>3,864,596</b>	<b>811,554</b>	<b>2,298,140</b>	<b>719,506</b>	<b>695,986</b>	<b>530,864</b>	<b>1,076,437</b>	<b>532,931</b>
<b>Total Operating Revenue</b>	<b>5,972,289</b>	<b>6,128,956</b>	<b>5,506,919</b>	<b>6,713,341</b>	<b>7,199,796</b>	<b>6,727,509</b>	<b>6,269,454</b>	<b>6,412,844</b>	<b>16,788,211</b>	<b>8,040,693</b>	<b>6,111,918</b>	<b>7,029,715</b>	<b>4,077,944</b>	<b>5,495,429</b>	<b>6,117,741</b>	<b>5,442,089</b>	<b>2,255,930</b>
<b>Operating Expenses</b>																	
Salaries and Wages	2,941,226	3,104,224	3,125,159	3,420,974	3,600,025	3,976,933	3,389,453	3,077,122	3,403,893	4,883,009	3,569,623	3,495,555	4,119,595	3,674,360	3,550,566	3,776,105	3,194,719
Fringe Benefits	702,477	752,708	856,889	830,599	938,302	921,667	923,548	909,630	983,304	1,136,954	980,844	909,491	1,013,089	970,221	848,892	1,033,920	978,795
Contract Labor	106,628	59,516	114,886	99,977	87,455	81,713	199,814	141,964	74,693	115,720	57,987	25,758	170,728	101,775	193,746	176,561	242,190
Physicians Fees	246,631	331,858	350,783	330,533	322,524	352,767	359,584	329,986	329,711	350,804	344,225	242,648	280,402	307,954	290,783	282,650	282,650
Purchased Services	513,857	691,337	772,336	892,521	815,761	746,115	797,016	476,515	768,170	849,809	766,813	1,125,988	840,396	941,985	1,007,492	1,002,184	1,078,252
Supplied Expense	685,518	751,025	903,883	995,446	876,735	839,353	987,328	723,243	988,949	1,051,584	808,794	1,080,707	700,018	814,829	906,328	861,780	762,898
Utilities	75,471	80,680	92,287	111,192	115,835	115,611	96,716	105,867	98,940	194,633	105,066	136,923	104,939	107,960	76,274	88,098	97,211
Repairs and Maintenance	58,325	58,592	139,712	77,524	90,737	98,149	83,712	101,598	85,772	101,922	127,526	61,628	61,860	69,232	147,878	136,677	92,822
Insurance Expense	85,267	103,277	110,683	112,745	122,393	118,248	114,116	117,116	103,000	117,993	122,000	141,364	185,434	133,116	147,115	138,116	128,116
All Other Operating Expenses	70,922	160,745	148,752	101,142	135,411	143,484	139,122	48,806	72,459	384,176	118,594	125,742	59,602	47,639	68,331	55,072	93,494
IGT Expense	58,743	109,484	172,366	0	91,499	0	0	0	800,045	297,940	0	0	0	0	0	0	0
Leases and Rentals	76,150	79,233	79,424	37,952	69,475	80,559	765	61,844	62,060	72,328	65,966	103,254	25,370	42,245	55,457	50,740	54,691
1206 (b) CLINIC	98,810	94,628	34,096	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total Operating Expenses</b>	<b>5,720,023</b>	<b>6,377,306</b>	<b>6,901,255</b>	<b>7,010,605</b>	<b>7,266,151</b>	<b>7,474,599</b>	<b>7,091,173</b>	<b>6,093,690</b>	<b>7,770,997</b>	<b>9,556,872</b>	<b>7,067,438</b>	<b>7,449,059</b>	<b>7,561,433</b>	<b>7,163,744</b>	<b>7,310,033</b>	<b>7,610,036</b>	<b>7,005,838</b>
<b>EBIDA</b>	<b>252,266</b>	<b>(248,351)</b>	<b>(1,394,337)</b>	<b>(297,264)</b>	<b>(66,356)</b>	<b>(747,090)</b>	<b>(821,719)</b>	<b>319,154</b>	<b>9,017,214</b>	<b>(1,516,179)</b>	<b>(955,520)</b>	<b>(419,344)</b>	<b>(3,483,489)</b>	<b>(1,668,315)</b>	<b>(1,192,292)</b>	<b>(2,167,947)</b>	<b>(4,749,908)</b>
<b>Interest, Depreciation, and Amortization</b>																	
Depreciation and Amortization	497,808	506,497	494,721	472,317	558,920	648,669	661,981	660,120	626,682	627,615	609,030	625,348	514,671	515,528	605,920	571,451	569,523
Interest Expense	418,193	422,094	447,994	391,606	481,556	625,830	491,596	425,067	467,039	550,064	573,399	421,777	434,111	445,099	383,794	405,597	370,607
<b>Total Interest, Depr, &amp; Amort.</b>	<b>916,000</b>	<b>928,591</b>	<b>942,715</b>	<b>863,923</b>	<b>1,040,476</b>	<b>1,274,500</b>	<b>1,153,577</b>	<b>1,085,187</b>	<b>1,093,721</b>	<b>1,177,679</b>	<b>1,182,429</b>	<b>1,047,126</b>	<b>948,782</b>	<b>960,627</b>	<b>989,714</b>	<b>977,048</b>	<b>940,130</b>
<b>Non-Operating Revenue:</b>																	
Contributions & Other	7,745	27,759	7,121	25,068	149,485	307,953	(48,783)	1,875	3,578	5,682	2,771	738	13,926	1,225,118	21,774	13,626	415,400
Tax Subsidies for GO Bonds - M-A	692,457	666,966	598,410	616,059	627,353	627,353	627,353	627,353	627,353	627,353	627,353	627,353	627,353	627,353	627,353	627,353	627,353
<b>Total Non Operating Revenue/Expense</b>	<b>700,202</b>	<b>694,725</b>	<b>605,531</b>	<b>641,127</b>	<b>776,839</b>	<b>935,307</b>	<b>578,570</b>	<b>629,228</b>	<b>630,931</b>	<b>633,035</b>	<b>630,125</b>	<b>628,091</b>	<b>641,279</b>	<b>1,852,471</b>	<b>649,127</b>	<b>640,979</b>	<b>1,042,753</b>
<b>Total Net Surplus/(Loss)</b>	<b>36,467</b>	<b>(482,217)</b>	<b>(1,731,521)</b>	<b>(520,060)</b>	<b>(329,993)</b>	<b>(1,086,283)</b>	<b>(1,396,726)</b>	<b>(136,804)</b>	<b>8,554,424</b>	<b>(2,060,822)</b>	<b>(1,507,824)</b>	<b>(838,378)</b>	<b>(3,790,992)</b>	<b>(776,471)</b>	<b>(1,532,879)</b>	<b>(2,504,016)</b>	<b>(4,647,285)</b>
Change in Interest in Foundation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Extra-ordinary Loss on Financing	0	(689,574)	(650)	(284,792)	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Increase/(Decrease in Unrestricted Net ,</b>	<b>\$ 36,467</b>	<b>\$( 1,171,791)</b>	<b>\$( 1,732,171)</b>	<b>\$( 804,852)</b>	<b>\$( 329,993)</b>	<b>\$( 1,086,283)</b>	<b>\$( 1,396,726)</b>	<b>\$( 136,804)</b>	<b>\$ 8,554,424</b>	<b>\$( 2,060,822)</b>	<b>\$( 1,507,824)</b>	<b>\$( 838,378)</b>	<b>\$( 3,790,992)</b>	<b>\$( 776,471)</b>	<b>\$( 1,532,879)</b>	<b>\$( 2,504,016)</b>	<b>\$( 4,647,285)</b>
<b>Total Profit Margin</b>	<b>0.6%</b>	<b>-7.9%</b>	<														



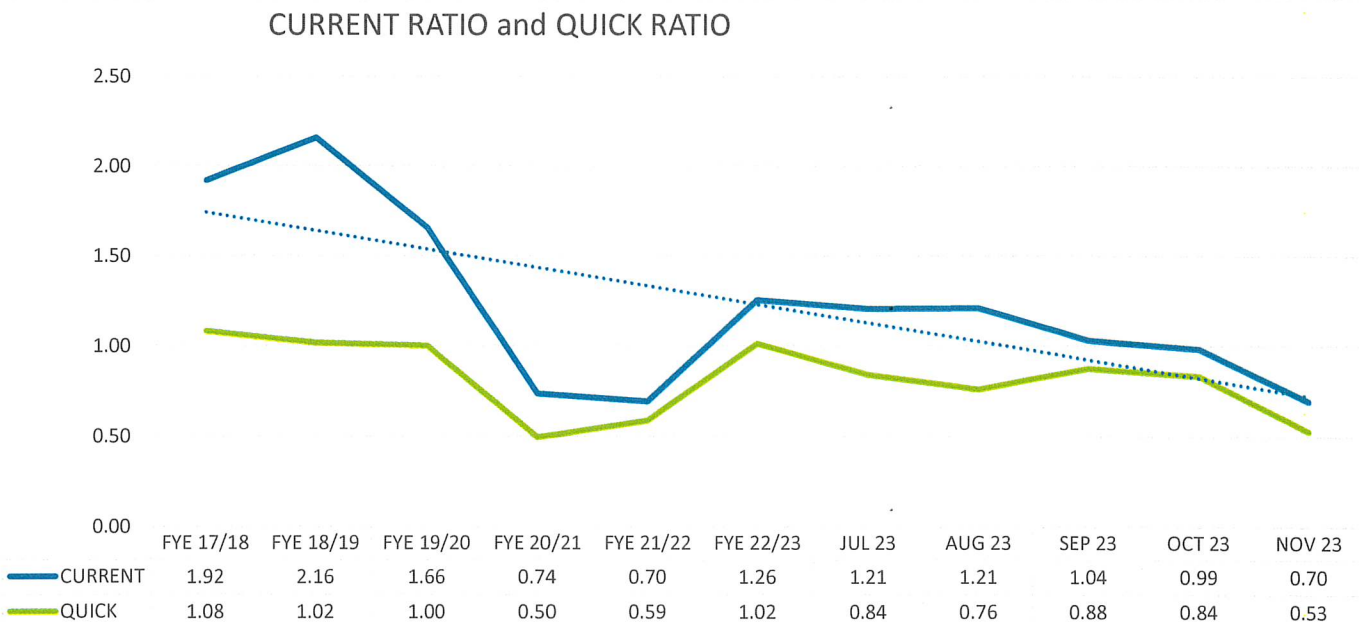
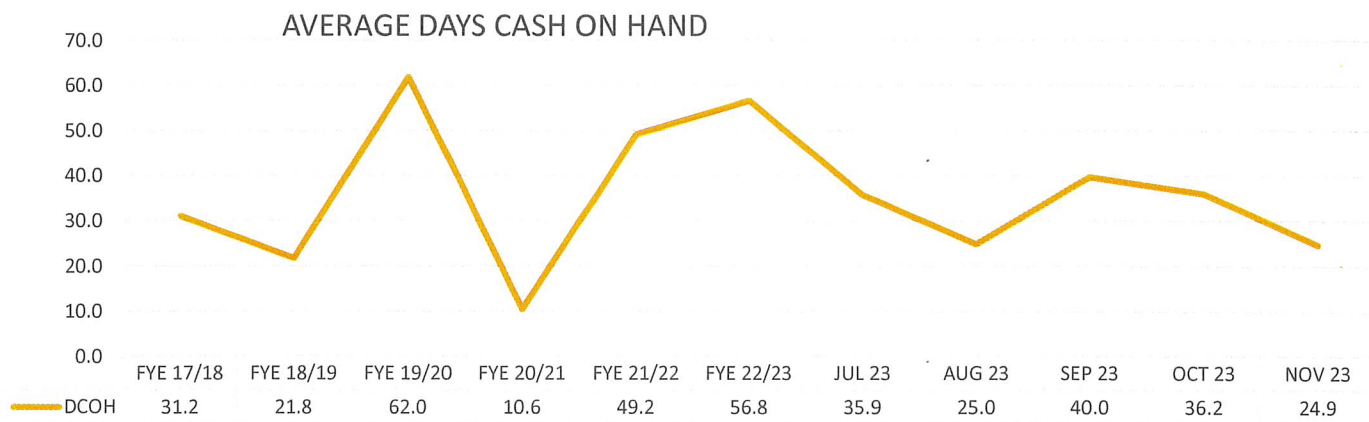
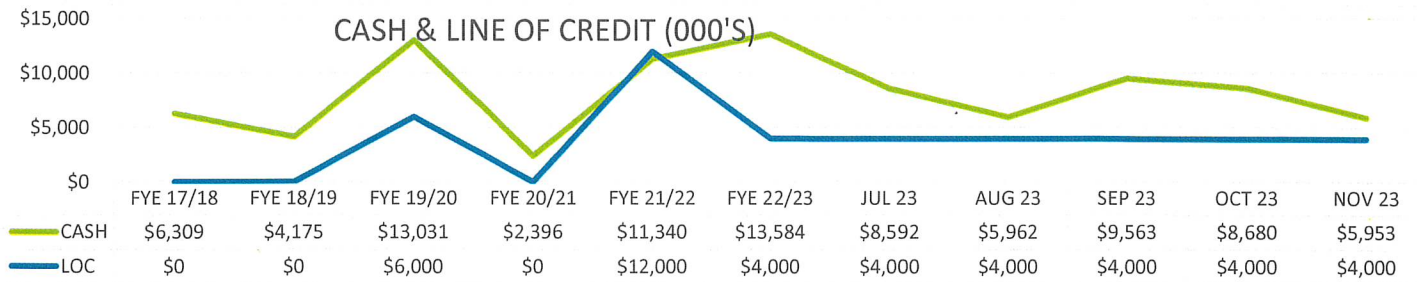
**BALANCE SHEET (Period End)**

---

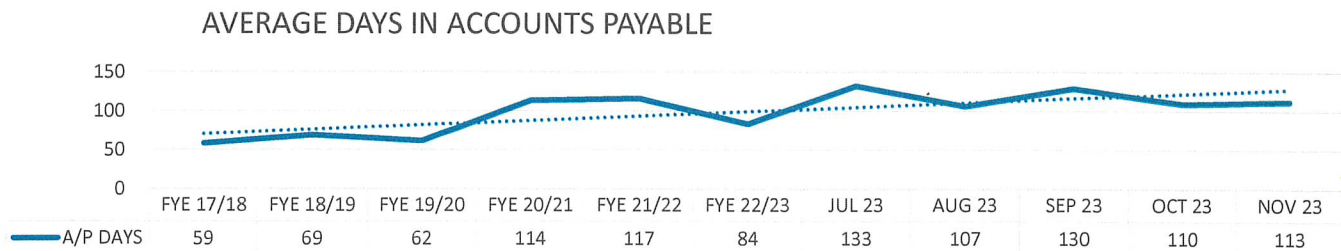
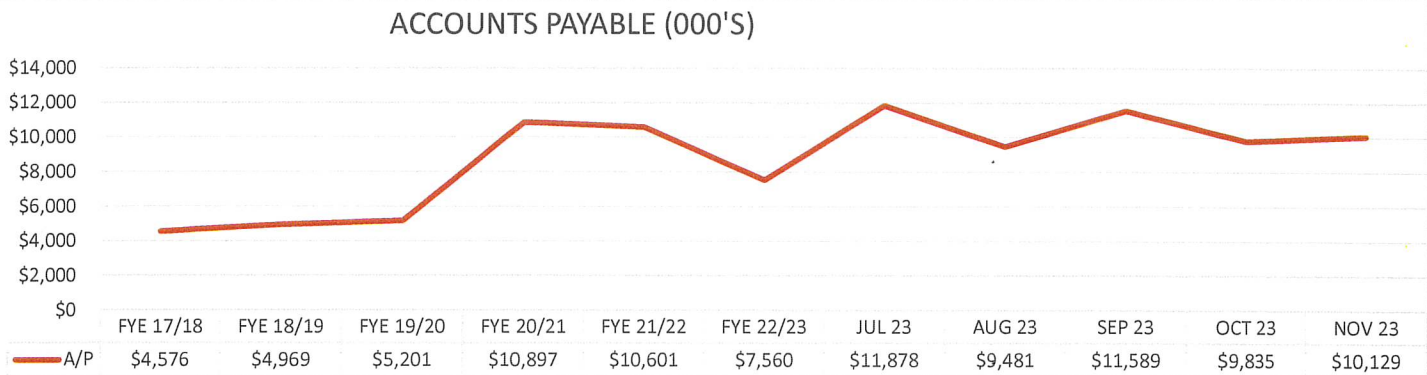
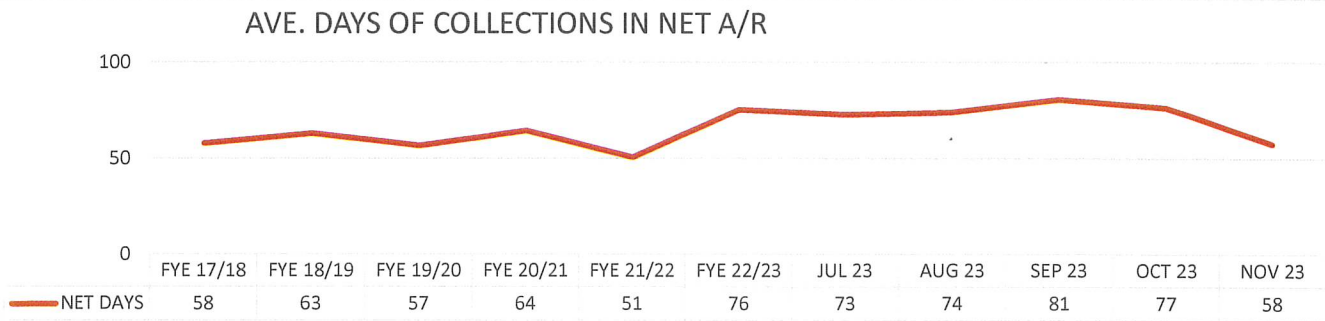
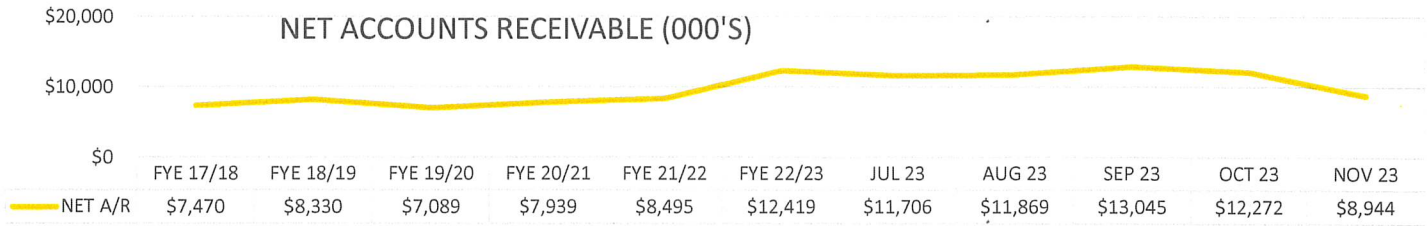
Cash (000's)	Represents all unrestricted cash in the bank at each month-end.
Days Cash on Hand	Calculated by dividing amount of Cash on Hand by the historical average daily amount of cash requirements to cover operating expenses.
Accounts Receivable - Net (000's)	Equals the sum of all (patient) accounts that are due to the hospital, less estimated adjustments for discounts and other contractual disallowances for which the patients may be entitled.
A/R Days - Net	This measures the average number of days it takes to collect payment of the Net Accounts Receivable. Lower values are desired.
Current Ratio (Current Assets/Current Liabilities)	A measure that illustrates the ability for the hospital to pay its obligations that come due over the course of the next year. The greater the Current Assets as compared to the Current Liabilities, the stronger position the organization is in to pay its upcoming obligations. Desired position is greater than 1:00 to 1:00, preferably at least 1:25 to 1:00 or greater.
Quick Ratio	This measures the Cash + Net Accounts Receivable compared to the Current Liabilities. Desired ratio is greater than 1.00 : 1.00.
Accounts Payable (000's)	Reflects payment obligations of the Hospital as of a point in time. Excludes Loans, Payroll and other Debt obligations. Lower values are desired.
Accounts Payable Days	Reflects the average number of days that it takes to pay routine bills. Lower numbers are desired. Calculated by dividing the Accounts Payable amount by the historical average daily cost of routine expenses.
Line of Credit Balance (000's)	The amount that is currently borrowed from a lending institution as of a given point in time.

14

# SAN GORGONIO MEMORIAL HOSPITAL



# SAN GORGONIO MEMORIAL HOSPITAL



# Income Statement

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Nov 22 Act	Nov 23 BD	Nov 23 Act	Variance (Nov 23 Act - Nov 23 BD )	Var%
NET INCOME	-967,110	-803,570	-4,647,285	-3,843,715	-478.33 %
<input type="checkbox"/> EBIDA	-696,883	-1,203,049	-4,749,908	-3,546,859	-294.82 %
<input type="checkbox"/> NET SERVICE REVENUE	5,929,827	6,031,194	2,255,930	-3,775,264	-62.60 %
<input type="checkbox"/> NET PATIENT REVENUE	4,988,746	5,362,764	1,722,999	-3,639,765	-67.87 %
<input type="checkbox"/> OTHER OPERATING REVENUE	941,081	668,430	532,931	-135,499	-20.27 %
<input type="checkbox"/> TOTAL OPERATING EXPENSE	6,626,710	7,234,243	7,005,838	228,405	3.16 %
<input type="checkbox"/> TOTAL OPERATING EXPENSE	6,626,710	7,234,243	7,005,838	228,405	3.16 %
<input type="checkbox"/> NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
<input type="checkbox"/> NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
<input type="checkbox"/> NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
<input type="checkbox"/> TOTAL INTEREST & DEPRECIATION	911,239	960,949	940,130	20,819	2.17 %
<input type="checkbox"/> TOTAL INTEREST & DEPRECIATION	911,239	960,949	940,130	20,819	2.17 %
<input type="checkbox"/> TOTAL INTEREST & DEPRECIATION	911,239	960,949	940,130	20,819	2.17 %

17

# Income Statement

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Jul - Nov 22 Act YTD	Jul - Nov 23 BD YTD	Jul - Nov 23 Act YTD	Variance (Jul - Nov 23 Act YTD - Jul - Nov 23 BD YTD )	Var%
NET INCOME	-5,366,760	-3,713,800	-13,251,643	-9,537,843	-256.82
EBIDA	-5,187,503	-4,753,893	-13,287,272	-8,533,379	-179.50
NET SERVICE REVENUE	29,062,702	31,739,209	23,389,133	-8,350,076	-26.31 %
NET PATIENT REVENUE	25,164,267	27,839,319	19,833,409	-8,005,910	-28.76 %
OTHER OPERATING REVENUE	3,898,435	3,899,890	3,555,724	-344,166	-8.83 %
TOTAL OPERATING EXPENSE	34,250,205	36,493,102	36,676,405	-183,303	-0.50 %
TOTAL OPERATING EXPENSE	34,250,205	36,493,102	36,676,405	-183,303	-0.50 %
NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,790,980	13,765	0.29 %
TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,790,980	13,765	0.29 %
TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,790,980	13,765	0.29 %

18



# Balance Sheet

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Aug 23 Act	Sep 23 Act	Oct 23 Act	Nov 23 Act	Var Oct 23 Act	Var%
NET BALANCE SHEET	25	41	41	61	20	48.78 %
<input type="checkbox"/> TOTAL ASSETS	107,248,342	107,765,986	105,066,797	101,254,932	-3,811,865	-3.63 %
<input type="checkbox"/> TOTAL ASSETS	107,248,342	107,765,986	105,066,797	101,254,932	-3,811,865	-3.63 %
<input type="checkbox"/> CURRENT ASSETS	28,323,945	26,633,320	23,290,191	19,563,327	-3,726,864	-16.00 %
<input type="checkbox"/> ASSETS WHICH USE IS LIMITED	9,519,381	12,127,256	10,664,523	10,666,301	1,778	0.02 %
<input type="checkbox"/> NET PROPERTY, PLANT, AND EQUIPMENT	69,386,966	68,989,789	71,253,631	71,169,380	-84,251	-0.12 %
<input type="checkbox"/> OTHER ASSETS	18,050	15,621	-141,548	-144,076	-2,528	-1.79 %
<input type="checkbox"/> TOTAL LIABILITIES & FUND BALANCE	107,248,317	107,765,945	105,066,756	101,254,871	3,811,885	3.63 %
<input type="checkbox"/> TOTAL LIABILITIES	149,536,052	151,586,559	159,673,507	160,508,907	-835,400	-0.52 %
<input type="checkbox"/> CURRENT LIABILITES	23,624,738	25,688,604	27,560,488	27,982,583	-422,095	-1.53 %
<input type="checkbox"/> LONG TERM LIABILITIES	125,911,314	125,897,955	132,113,019	132,526,324	-413,305	-0.31 %
<input type="checkbox"/> NET ASSETS	-42,287,735	-43,820,614	-54,606,751	-59,254,036	4,647,285	8.51 %
<input type="checkbox"/> NET ASSETS - UNRESTRICTED	-42,287,735	-43,820,614	-54,606,751	-59,254,036	4,647,285	8.51 %

61

## SAN GORGONIO MEMORIAL HOSPITAL

### KEY STATISTICS AND RATIOS

	11/30/22	11/30/23	11/30/23	2024	2024	2023
	ACTUAL	ACTUAL	BUDGET	5 MOS. YTD	5 MOS. YTD	YR END TOTAL
	FY23	FY 24	FY 24	FY 24	FY 24	FY 23
[1] Total Acute Patient Days	704	617	673	3,211	3,376	7,636
[2] Average Daily Census	23.5	20.6	22.4	21.0	22.1	20.9
[3] Average Acute Length of Stay	3.87	3.72	3.40	3.64	3.42	3.49
[4] Patient Discharges	182	166	198	881	986	2,186
[5] Adjusted Patient Days	1,875	1,801	1,861	9,316	9,350	21,460
[6] Observation Days	249	327	281	1,535	1,412	3,160
[7] Total Emergency Room Visits	4,028	3,489	3,717	17,431	18,693	41,821
[8] Average ED Visits Per Day	134	116	124	114	122	115
[9] Total Surgeries (Excluding G.I.'s)	116	94	120	555	666	1,433
[10] Deliveries/Births	6	6	15	49	68	131

20



# Income Statement

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Nov 22 Act	Nov 23 BD	Nov 23 Act	Variance (Nov 23 Act - Nov 23 BD )	Var%
NET INCOME	-967,110	-803,570	-4,647,285	A -3,843,715	-478.33 %
EBIDA	-696,883	-1,203,049	-4,749,908	B -3,546,859	-294.82 %
NET SERVICE REVENUE	5,929,827	6,031,194	2,255,930	C -3,775,264	-62.60 %
NET PATIENT REVENUE	4,988,746	5,362,764	1,722,999	D -3,639,765	-67.87 %
GROSS REVENUE FROM PATIENT SERVICES	37,544,539	41,283,644	39,370,798	E -1,912,846	-4.63 %
TOTAL INPATIENT REVENUE	14,451,105	15,129,582	13,489,069	-1,640,513	-10.84 %
TOTAL OUTPATIENT REVENUE	23,093,434	26,154,062	25,881,729	-272,333	-1.04 %
DEDUCTIONS FROM REVENUE	-32,555,793	-35,920,880	-37,647,799	F -1,726,919	-4.81 %
DEDUCTIONS FROM REVENUE	-32,555,793	-35,920,880	-37,647,799	-1,726,919	-4.81 %
CONTRACTUAL ALLOWANCES	-32,555,793	-35,920,880	-37,647,799	-1,726,919	-4.81 %
501052 - CONTRACTUAL ALLOWANCES	-31,089,374	-35,009,609	-36,796,629	-1,787,020	-5.10 %
501153 - BAD DEBT EXPENSE	-1,429,704	-825,074	-808,712	16,362	1.98 %
501254 - CHARITY WRITE_OFFS	-36,715	-86,197	-42,458	43,739	50.74 %
OTHER OPERATING REVENUE	941,081	668,430	532,931	G -135,499	-20.27 %
OTHER REVENUE - RATE RANGE	0	0	0	0	0.00 %
OTHER REVENUE - OTHER SUPPLEMENTALS	426,574	0	0	0	0.00 %
OTHER REVENUE - DSH	0	0	7,312	7,312	0.00 %
OTHER REVENUE - P4P	0	0	0	0	0.00 %
OTHER REVENUE - OTHER	113,013	258,603	124,125	-134,478	-52.00 %
OPERATING TAX REVENUES	401,494	409,827	401,494	-8,333	-2.03 %
TOTAL OPERATING EXPENSE	6,626,710	7,234,243	7,005,838	H 228,405	3.16 %
TOTAL OPERATING EXPENSE	6,626,710	7,234,243	7,005,838	I 259,888	5.56 %
TOTAL LABOR EXPENSE	4,206,210	4,675,592	4,415,704	J 416,338	9.07 %
EMPLOYEE WAGES & BENEFITS	4,125,966	4,589,852	4,173,514	K 402,424	11.19 %
WAGES	3,398,985	3,597,143	3,194,719	L 13,914	1.40 %
EMPLOYEE BENEFITS	726,981	992,709	978,795	-156,450	-182.47 %
CONTRACT LABOR	80,244	85,740	242,190	-165,434	-13.84 %
PROFESSIONAL FEES	1,132,202	1,195,468	1,360,902	M -165,434	-13.84 %
PROFESSIONAL FEES	1,132,202	1,195,468	1,360,902	N 29,537	9.46 %
PHYSICIAN FEES	212,140	312,187	282,650	-194,971	-22.07 %
PURCHASED SERVICES	920,062	883,281	1,078,252	133,951	9.83 %
SUPPLIES & OTHER EXPENSES	1,288,298	1,363,183	1,229,232		



SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

	Nov 22 Act	Nov 23 BD	Nov 23 Act	Variance (Nov 23 Act - Nov 23 BD )	Var%
☒ SUPPLY EXPENSE	752,903	900,740	762,898	0	15.30 %
☒ OTHER EXPENSES	535,395	462,443	466,334	-3,891	-0.84 %
☒ UTILITIES	135,651	105,791	97,211	8,580	8.11 %
☒ REPAIRS AND MAINTENANCE	66,752	81,591	92,822	-11,231	-13.76 %
☒ INSURANCE	107,505	146,289	128,116	18,173	12.42 %
☒ OTHER EXPENSES	189,487	83,398	93,494	-10,096	-12.11 %
☒ LEASE AND RENTALS	36,000	45,374	54,691	-9,317	-20.53 %
☒ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
☒ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
☒ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
☒ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
☒ OTHER NON-OPERATING REVENUE	13,659	733,075	415,400	-317,675	-43.33 %
☒ NON-OPERATING TAX REVENUE	627,353	627,353	627,353	0	0.00 %
☒ EXTRAORDINARY REVENUE	0	0	0	0	0.00 %
☒ TOTAL INTEREST & DEPRECIATION	911,239	960,949	940,130	20,819	2.17 %
☒ TOTAL INTEREST & DEPRECIATION	911,239	960,949	940,130	20,819	2.17 %
☒ TOTAL INTEREST & DEPRECIATION	911,239	960,949	940,130	20,819	2.17 %
☒ TOTAL INTEREST & DEPRECIATION	911,239	960,949	940,130	20,819	2.17 %
☒ DEPRECIATION	491,445	522,162	569,523	-47,361	-9.07 %
☒ INTEREST & AMORTIZATION	419,794	438,787	370,607	68,180	15.54 %

22

O  
P  
R  
S  
T  
U

V  
W

X  
Y

# Income Statement

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Jul - Nov 22 Act YTD	Jul - Nov 23 BD YTD	Jul - Nov 23 Act YTD	Variance (Jul - Nov 23 Act YTD - Jul - Nov 23 BD YTD )	Var%
NET INCOME	-5,366,760	-3,713,800	-13,251,643	A -9,537,843	-256.82
EBIDA	-5,187,503	-4,753,893	-13,261,951	B -8,508,058	-178.97
NET SERVICE REVENUE	29,062,702	31,739,209	23,389,133	C -8,350,076	-26.31 %
NET PATIENT REVENUE	25,164,267	27,839,319	19,833,409	D -8,005,910	-28.76 %
GROSS REVENUE FROM PATIENT SERVICES	197,821,486	208,312,306	200,817,004	E -7,495,302	-3.60 %
TOTAL INPATIENT REVENUE	72,895,900	75,630,886	69,219,306	-6,411,580	-8.48 %
TOTAL OUTPATIENT REVENUE	124,925,586	132,681,420	131,597,698	-1,083,722	-0.82 %
DEDUCTIONS FROM REVENUE	-172,657,219	-180,472,987	-180,983,595	-510,608	-0.28 %
DEDUCTIONS FROM REVENUE	-172,657,219	-180,472,987	-180,983,595	F -510,608	-0.28 %
CONTRACTUAL ALLOWANCES	-172,657,219	-180,472,987	-180,983,595	-510,608	-0.28 %
501052 - CONTRACTUAL ALLOWANCES	-167,551,035	-175,894,598	-176,164,247	-269,649	-0.15 %
501153 - BAD DEBT EXPENSE	-4,517,014	-4,145,319	-4,491,175	-345,856	-8.34 %
501254 - CHARITY WRITE_OFFS	-589,170	-433,070	-328,173	104,897	24.22 %
OTHER OPERATING REVENUE	3,898,435	3,899,890	3,555,724	G -344,166	-8.83 %
OTHER REVENUE - RATE RANGE	0	0	0	0	0.00 %
OTHER REVENUE - OTHER SUPPLEMENTALS	853,148	434,000	481,713	47,713	10.99 %
OTHER REVENUE - DSH	37,490	37,490	42,689	5,199	13.87 %
OTHER REVENUE - P4P	99,751	86,250	136,446	50,196	58.20 %
OTHER REVENUE - OTHER	900,576	1,293,015	720,148	-572,867	-44.30 %
OPERATING TAX REVENUES	2,007,470	2,049,135	2,174,728	125,593	6.13 %
TOTAL OPERATING EXPENSE	34,250,205	36,493,102	36,651,084	-157,982	-0.43 %
TOTAL OPERATING EXPENSE	34,250,205	36,493,102	36,651,084	H -157,982	-0.43 %
TOTAL LABOR EXPENSE	22,134,880	23,650,409	24,045,262	I -394,853	-1.67 %
EMPLOYEE WAGES & BENEFITS	21,815,551	23,223,383	23,160,262	63,121	0.27 %
WAGES	17,321,376	18,243,751	18,315,345	J -71,594	-0.39 %
EMPLOYEE BENEFITS	4,494,175	4,979,632	4,844,917	K 134,715	2.71 %
CONTRACT LABOR	319,329	427,026	885,000	L -457,974	-107.25
PROFESSIONAL FEES	5,902,859	5,901,253	6,292,480	-391,227	-6.63 %
PROFESSIONAL FEES	5,902,859	5,901,253	6,292,480	-391,227	-6.63 %
PHYSICIAN FEES	1,426,875	1,560,935	1,422,171	M 138,764	8.89 %
PURCHASED SERVICES	4,475,984	4,340,318	4,870,309	N -529,991	-12.21 %



SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD

Jul - Nov 22 Act  
YTD

Jul - Nov 23 BD  
YTD

Jul - Nov 23 Act  
YTD

Variance  
(Jul - Nov 23 Act  
YTD -  
Jul - Nov 23 BD  
YTD )

Var%

☐ SUPPLIES & OTHER EXPENSES	6,212,466	6,941,440	6,313,342	628,098	9.05 %
☑ SUPPLY EXPENSE	4,087,693	4,611,866	4,045,853	566,013	12.27 %
☐ OTHER EXPENSES	2,124,773	2,329,574	2,267,489	62,085	2.67 %
☑ UTILITIES	527,408	540,935	474,482	66,453	12.28 %
☑ REPAIRS AND MAINTENANCE	370,440	409,914	508,469	-98,555	-24.04 %
☑ INSURANCE	634,880	731,445	731,898	-453	-0.06 %
☑ OTHER EXPENSES	532,045	420,410	324,138	96,272	22.90 %
☑ LEASE AND RENTALS	60,000	226,870	228,502	-1,632	-0.72 %
☐ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
☐ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
☐ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
☐ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
☐ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
☑ OTHER NON-OPERATING REVENUE	1,495,095	2,708,073	1,689,844	-1,018,229	-37.60 %
☑ NON-OPERATING TAX REVENUE	3,136,765	3,136,765	3,136,765	0	0.00 %
☑ EXTRAORDINARY REVENUE	0	0	0	0	0.00 %
☐ TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,816,301	-11,556	-0.24 %
☐ TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,816,301	-11,556	-0.24 %
☐ TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,816,301	-11,556	-0.24 %
☐ TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,816,301	-11,556	-0.24 %
☐ TOTAL INTEREST & DEPRECIATION	4,811,117	4,804,745	4,816,301	-11,556	-0.24 %
☑ DEPRECIATION	2,587,218	2,610,810	2,777,093	-166,283	-6.37 %
☑ INTEREST & AMORTIZATION	2,223,899	2,193,935	2,039,208	154,727	7.05 %

O  
P  
Q  
R  
S  
T  
U

V  
W

X  
Y

24

# Income Statement

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Nov 22 Act	Nov 23 Flex	Nov 23 Act	Variance (Nov 23 Act - Nov 23 Flex)	Var%
NET INCOME	-967,110	1,820,940	-4,647,285	A -6,468,225	-355.21 %
EBIDA	-696,883	1,420,746	-4,775,229	B -6,195,975	-436.11 %
NET SERVICE REVENUE	5,929,827	8,611,996	2,255,930	C -6,356,066	-73.80 %
NET PATIENT REVENUE	4,988,746	7,547,066	1,722,999	D -5,824,067	-77.17 %
GROSS REVENUE FROM PATIENT SERVICES	37,544,539	41,803,460	39,370,798	E -2,432,662	-5.82 %
TOTAL INPATIENT REVENUE	14,451,105	16,701,654	13,489,069	-3,212,585	-19.24 %
TOTAL OUTPATIENT REVENUE	23,093,434	25,101,806	25,881,729	779,923	3.11 %
DEDUCTIONS FROM REVENUE	-32,555,793	-34,256,394	-37,647,799	-3,391,405	-9.90 %
DEDUCTIONS FROM REVENUE	-32,555,793	-34,256,394	-37,647,799	F -3,391,405	-9.90 %
CONTRACTUAL ALLOWANCES	-32,555,793	-34,256,394	-37,647,799	-3,391,405	-9.90 %
OTHER OPERATING REVENUE	941,081	1,064,930	532,931	G -531,999	-49.96 %
OTHER REVENUE - RATE RANGE	0	0	0	0	0.00 %
OTHER REVENUE - OTHER SUPPLEMENTALS	426,574	434,000	0	-434,000	-100.00 %
OTHER REVENUE - DSH	0	0	7,312	7,312	0.00 %
OTHER REVENUE - P4P	0	0	0	0	0.00 %
OTHER REVENUE - OTHER	113,013	221,103	124,125	-96,978	-43.86 %
OPERATING TAX REVENUES	401,494	409,827	401,494	-8,333	-2.03 %
TOTAL OPERATING EXPENSE	6,626,710	7,191,250	7,031,159	160,091	2.23 %
TOTAL OPERATING EXPENSE	6,626,710	7,191,250	7,031,159	H 160,091	2.23 %
TOTAL LABOR EXPENSE	4,206,210	4,728,579	4,415,704	I 312,875	6.62 %
EMPLOYEE WAGES & BENEFITS	4,125,966	4,669,083	4,173,514	495,569	10.61 %
WAGES	3,398,985	3,684,688	3,194,719	J 489,969	13.30 %
EMPLOYEE BENEFITS	726,981	984,395	978,795	K 5,600	0.57 %
CONTRACT LABOR	80,244	59,496	242,190	L -182,694	-307.07 %
PROFESSIONAL FEES	1,132,202	1,174,684	1,360,902	-186,218	-15.85 %
PROFESSIONAL FEES	1,132,202	1,174,684	1,360,902	-186,218	-15.85 %
PHYSICIAN FEES	212,140	312,187	282,650	M 29,537	9.46 %
PURCHASED SERVICES	920,062	862,497	1,078,252	N -215,755	-25.02 %
SUPPLIES & OTHER EXPENSES	1,288,298	1,287,987	1,254,553	33,434	2.60 %
SUPPLY EXPENSE	752,903	826,171	762,898	O 63,273	7.66 %
OTHER EXPENSES	535,395	461,816	491,655	-29,839	-6.46 %
UTILITIES	135,651	105,791	97,211	P 8,580	8.11 %

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

	Nov 22 Act	Nov 23 Flex	Nov 23 Act	Variance (Nov 23 Act - Nov 23 Flex)	Var%
⊕ REPAIRS AND MAINTENANCE	66,752	81,444	92,822	-11,378	-13.97 %
⊕ INSURANCE	107,505	146,289	128,116	18,173	12.42 %
⊕ OTHER EXPENSES	189,487	82,929	93,494	-10,565	-12.74 %
⊕ LEASE AND RENTALS	36,000	45,363	80,012	-34,649	-76.38 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,042,753	-317,675	-23.35 %
⊕ OTHER NON-OPERATING REVENUE	13,659	733,075	415,400	-317,675	-43.33 %
⊕ NON-OPERATING TAX REVENUE	627,353	627,353	627,353	0	0.00 %
⊕ EXTRAORDINARY REVENUE	0	0	0	0	0.00 %
⊖ TOTAL INTEREST & DEPRECIATION	911,239	960,234	914,809	45,425	4.73 %
⊖ TOTAL INTEREST & DEPRECIATION	911,239	960,234	914,809	45,425	4.73 %
⊖ TOTAL INTEREST & DEPRECIATION	911,239	960,234	914,809	45,425	4.73 %
⊖ TOTAL INTEREST & DEPRECIATION	911,239	960,234	914,809	45,425	4.73 %
⊖ TOTAL INTEREST & DEPRECIATION	911,239	960,234	914,809	45,425	4.73 %
⊕ DEPRECIATION	491,445	521,447	544,202	-22,755	-4.36 %
⊕ INTEREST & AMORTIZATION	419,794	438,787	370,607	68,180	15.54 %

Q  
R  
S  
T  
U

V  
W

X  
Y

26



# Income Statement

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Jul - Nov 22 Act YTD	Jul - Nov 23 Flex YTD	Jul - Nov 23 Act YTD	Variance (Jul - Nov 23 Act YTD - Jul - Nov 23 Flex YTD )	Var%
NET INCOME	-5,366,760	-4,511,029	-13,251,643	A -8,740,614	-193.76
EBIDA	-5,187,503	-5,554,494	-13,287,272	B -7,732,778	-139.22
NET SERVICE REVENUE	29,062,702	30,245,152	23,389,133	C -6,856,019	-22.67 %
NET PATIENT REVENUE	25,164,267	26,382,762	19,833,409	D -6,549,353	-24.82 %
GROSS REVENUE FROM PATIENT SERVICES	197,821,486	199,505,051	200,817,004	E 1,311,953	0.66 %
TOTAL INPATIENT REVENUE	72,895,900	72,743,144	69,219,306	-3,523,838	-4.84 %
TOTAL OUTPATIENT REVENUE	124,925,586	126,761,907	131,597,698	4,835,791	3.81 %
DEDUCTIONS FROM REVENUE	-172,657,219	-173,122,289	-180,983,595	-7,861,306	-4.54 %
DEDUCTIONS FROM REVENUE	-172,657,219	-173,122,289	-180,983,595	F -7,861,306	-4.54 %
CONTRACTUAL ALLOWANCES	-172,657,219	-173,122,289	-180,983,595	-7,861,306	-4.54 %
OTHER OPERATING REVENUE	3,898,435	3,862,390	3,555,724	G -306,666	-7.94 %
OTHER REVENUE - RATE RANGE	0	0	0	0	0.00 %
OTHER REVENUE - OTHER SUPPLEMENTALS	853,148	434,000	481,713	47,713	10.99 %
OTHER REVENUE - DSH	37,490	37,490	42,689	5,199	13.87 %
OTHER REVENUE - P4P	99,751	86,250	136,446	50,196	58.20 %
OTHER REVENUE - OTHER	900,576	1,255,515	720,148	-535,367	-42.64 %
OPERATING TAX REVENUES	2,007,470	2,049,135	2,174,728	125,593	6.13 %
TOTAL OPERATING EXPENSE	34,250,205	35,799,646	36,676,405	-876,759	-2.45 %
TOTAL OPERATING EXPENSE	34,250,205	35,799,646	36,676,405	H -876,759	-2.45 %
TOTAL LABOR EXPENSE	22,134,880	23,396,525	24,045,262	I -648,737	-2.77 %
EMPLOYEE WAGES & BENEFITS	21,815,551	23,037,958	23,160,262	-122,304	-0.53 %
WAGES	17,321,376	18,148,620	18,315,345	J -166,725	-0.92 %
EMPLOYEE BENEFITS	4,494,175	4,889,338	4,844,917	K 44,421	0.91 %
CONTRACT LABOR	319,329	358,567	885,000	L -526,433	-146.82
PROFESSIONAL FEES	5,902,859	5,833,911	6,292,480	-458,569	-7.86 %
PROFESSIONAL FEES	5,902,859	5,833,911	6,292,480	-458,569	-7.86 %
PHYSICIAN FEES	1,426,875	1,560,935	1,422,171	M 138,764	8.89 %
PURCHASED SERVICES	4,475,984	4,272,976	4,870,309	N -597,333	-13.98 %
SUPPLIES & OTHER EXPENSES	6,212,466	6,569,210	6,338,663	230,547	3.51 %
SUPPLY EXPENSE	4,087,693	4,243,324	4,045,853	O 197,471	4.65 %
OTHER EXPENSES	2,124,773	2,325,886	2,292,810	33,076	1.42 %

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Jul - Nov 22 Act YTD	Jul - Nov 23 Flex YTD	Jul - Nov 23 Act YTD	Variance (Jul - Nov 23 Act YTD - Jul - Nov 23 Flex YTD)	Var%
⊕ UTILITIES	527,408	540,935	474,482	66,453	12.28 %
⊕ REPAIRS AND MAINTENANCE	370,440	408,884	508,469	-99,585	-24.36 %
⊕ INSURANCE	634,880	731,445	731,898	-453	-0.06 %
⊕ OTHER EXPENSES	532,045	417,763	324,138	93,625	22.41 %
⊕ LEASE AND RENTALS	60,000	226,859	253,823	-26,964	-11.89 %
⊖ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
⊖ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
⊖ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
⊖ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
⊖ NON-OPERATING REVENUE & EXPENSE	4,631,860	5,844,838	4,826,609	-1,018,229	-17.42 %
⊕ OTHER NON-OPERATING REVENUE	1,495,095	2,708,073	1,689,844	-1,018,229	-37.60 %
⊕ NON-OPERATING TAX REVENUE	3,136,765	3,136,765	3,136,765	0	0.00 %
⊕ EXTRAORDINARY REVENUE	0	0	0	0	0.00 %
⊖ TOTAL INTEREST & DEPRECIATION	4,811,117	4,801,373	4,790,980	10,393	0.22 %
⊖ TOTAL INTEREST & DEPRECIATION	4,811,117	4,801,373	4,790,980	10,393	0.22 %
⊖ TOTAL INTEREST & DEPRECIATION	4,811,117	4,801,373	4,790,980	10,393	0.22 %
⊖ TOTAL INTEREST & DEPRECIATION	4,811,117	4,801,373	4,790,980	10,393	0.22 %
⊖ TOTAL INTEREST & DEPRECIATION	4,811,117	4,801,373	4,790,980	10,393	0.22 %

28

P  
D  
R  
S  
T  
U  
  
V  
W  
  
X



# Balance Sheet

## SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Aug 23 Act	Sep 23 Act	Oct 23 Act	Nov 23 Act	Var Oct 23 Act	Var%
NET BALANCE SHEET	25	41	41	61	20	48.78 %
☐ TOTAL ASSETS	107,248,342	107,765,986	105,066,797	101,254,932	-3,811,865	-3.63 %
☐ TOTAL ASSETS	107,248,342	107,765,986	105,066,797	101,254,932	-3,811,865	-3.63 %
☐ CURRENT ASSETS	28,323,945	26,633,320	23,290,191	19,563,327	-3,726,864	-16.00 %
☐ CASH & EQUIVALENTS	5,962,136	9,562,533	8,544,718	5,952,687	-2,592,031	-30.33 %
☐ OPERATING CASH	5,962,136	9,562,533	8,544,718	5,952,687	-2,592,031	-30.33 %
☐ NET PATIENT ACCOUNTS RECEIVABLE	11,868,614	13,045,101	12,272,291	8,944,208	-3,328,083	-27.12 %
☐ HOSPITAL ACCOUNTS RECEIVABLE	85,426,983	86,780,649	82,545,789	83,591,108	1,045,319	1.27 %
☐ LESS: ALLOWANCE FOR BAD DEBTS	-73,558,369	-73,735,548	-70,273,498	-74,646,900	-4,373,402	-6.22 %
☐ OTHER CURRENT ASSETS	10,493,195	4,025,686	2,473,182	4,666,432	2,193,250	88.68 %
☐ TAXES RECEIVABLE	10,383,333	3,942,074	3,969,211	5,324,379	1,355,168	34.14 %
☐ MISC RECEIVABLE	-789,260	-744,971	-1,211,089	-1,164,431	46,658	3.85 %
☐ DUE FROM 3RD PARTIES	-2,727,166	-2,812,136	-2,906,513	-2,361,037	545,476	18.77 %
☐ INVENTORIES	2,570,923	2,629,470	1,654,440	1,988,621	334,181	20.20 %
☐ PREPAID EXPENSES	1,055,365	1,011,249	967,133	878,900	-88,233	-9.12 %
☐ ASSETS WHICH USE IS LIMITED	9,519,381	12,127,256	10,664,523	10,666,301	1,778	0.02 %
☐ ASSETS WITH LIMITED USE	9,519,381	12,127,256	10,664,523	10,666,301	1,778	0.02 %
☐ INTERNALLY DESIGNATED	9,519,381	12,127,256	10,664,523	10,666,301	1,778	0.02 %
☐ NET PROPERTY, PLANT, AND EQUIPMENT	69,386,966	68,989,789	71,253,631	71,169,380	-84,251	-0.12 %
☐ PROPERTY, PLANT, AND EQUIPMENT	163,646,975	163,742,519	166,530,956	166,939,426	408,470	0.25 %
☐ LAND & LAND IMPROVEMENTS	4,828,182	4,828,182	4,828,182	4,828,182	0	0.00 %
☐ BUILDINGS & BUILDING IMPROVEMENTS	129,281,491	129,281,491	129,281,491	129,281,491	0	0.00 %
☐ FIXED EQUIPMENT	26,146,618	26,146,618	28,492,084	28,462,948	-29,136	-0.10 %
☐ CONSTRUCTION IN PROGRESS	3,390,684	3,486,228	3,929,199	4,366,805	437,606	11.14 %
☐ LESS: ACCUMULATED DEPRECIATION	-94,260,009	-94,752,730	-95,277,325	-95,770,046	-492,721	-0.52 %
☐ LESS: ACCUMULATED DEPRECIATION	-94,260,009	-94,752,730	-95,277,325	-95,770,046	-492,721	-0.52 %
☐ OTHER ASSETS	18,050	15,621	-141,548	-144,076	-2,528	-1.79 %
☐ OTHER ASSETS	18,050	15,621	-141,548	-144,076	-2,528	-1.79 %
☐ INVESTMENT IN AFFILIATE	-550,922	-550,762	-705,341	-705,281	60	0.01 %
☐ BONDS	568,972	566,383	563,793	561,205	-2,588	-0.46 %
☐ TOTAL LIABILITIES & FUND BALANCE	107,248,317	107,765,945	105,066,756	101,254,871	3,811,885	3.63 %
☐ TOTAL LIABILITIES	149,536,052	151,586,559	159,673,507	160,508,907	-835,400	-0.52 %
☐ CURRENT LIABILITES	23,624,738	25,688,604	27,560,488	27,982,583	-422,095	-1.53 %



SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

	Aug 23 Act	Sep 23 Act	Oct 23 Act	Nov 23 Act	Var Oct 23 Act	Var%
[-] ACCOUNTS PAYABLE	9,760,386	11,588,993	9,574,179	10,128,862	-554,683	-5.79 %
[-] [-] ACCOUNTS PAYABLE-TRADE	9,760,386	11,588,993	9,574,179	10,128,862	G -554,683	-5.79 %
[-] PAYROLL PAYABLES	5,091,476	5,085,470	6,383,002	5,879,981	H 503,021	7.88 %
[-] [-] SALARIES & WAGES PAYABLE	-1,070,729	-1,070,777	-602,404	-602,404	0	0.00 %
[-] [-] PAYROLL TAXES & DEDUCTIONS PAYABLE	3,208,798	3,330,602	4,159,761	3,640,721	519,040	12.48 %
[-] [-] ACCRUED PTO & SICK DAYS PAYABLE	2,953,407	2,825,645	2,825,645	2,841,664	-16,019	-0.57 %
[-] LINE OF CREDIT	4,025,465	4,025,465	4,029,070	4,030,873	-1,803	-0.04 %
[-] [-] LINE OF CREDIT	4,025,465	4,025,465	4,029,070	4,030,873	I -1,803	-0.04 %
[-] OTHER CURRENT LIABILITIES	4,747,411	4,988,676	7,574,237	7,942,867	J -368,630	-4.87 %
[-] [-] ACCRUED INTEREST PAYABLE	2,540,812	2,901,748	3,262,685	3,623,621	-360,936	-11.06 %
[-] [-] OTHER CURRENT LIABILITIES	2,206,599	2,086,928	4,311,552	4,319,246	7,694	0.18 %
[-] LONG TERM LIABILITIES	125,911,314	125,897,955	132,113,019	132,526,324	-413,305	-0.31 %
[-] [-] OTHER LONG TERM LIABILITIES	125,911,314	125,897,955	132,113,019	132,526,324	-413,305	-0.31 %
[-] [-] NOTES PAYABLE	125,911,314	125,897,955	132,113,019	132,526,324	K -413,305	-0.31 %
[-] NET ASSETS	-42,287,735	-43,820,614	-54,606,751	-59,254,036	L 4,647,285	8.51 %
[-] [-] NET ASSETS - UNRESTRICTED	-42,287,735	-43,820,614	-54,606,751	-59,254,036	L 4,647,285	8.51 %
[-] [-] [-] NET ASSETS - BEGINNING OF PERIOD	-37,720,272	-37,720,272	-46,002,393	-46,002,393	0	0.00 %
[-] [-] [-] [-] NET ASSETS - BEGINNING OF PERIOD	-37,720,272	-37,720,272	-46,002,393	-46,002,393	M 0	0.00 %
[-] [-] CURRENT YEAR NET GAIN/(LOSS)	-4,567,463	-6,100,342	-8,604,358	-13,251,643	N -4,647,285	-54.01 %
[-] [-] [-] CURRENT YEAR NET GAIN/(LOSS)	-4,567,463	-6,100,342	-8,604,358	-13,251,643	N -4,647,285	-54.01 %

30

	B	C	D	E	F	G	J
1	<b>SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT &amp; HOSPITAL</b>					<b>CASH FLOW</b>	
2							
3						<b>Current Month</b>	<b>Y-T-D</b>
4						<b>11/30/2023</b>	<b>11/30/2023</b>
5	<b>BEGINNING CASH BALANCES</b>						
6		Cash: Beginning Balances- Hospital				\$ 4,768,687	\$ 10,775,913
7		Cash: Beginning Balances- District				3,911,795	2,808,453
8		Cash: Beginning Balances Totals				\$ 8,680,482	\$ 13,584,366
9							
10	<b>Receipts</b>						
11		Patient Collections				\$ 4,513,860	\$ 23,559,682
12		Tax Subsidies/Measure D/Prop 13				401,494	\$ 2,007,470
13		Misc Tax Subsidies				-	\$ 167,258
14		Donations/Grants				401,774	\$ 402,074
15		Supplemental Funding (Rate Range, Etc.)				-	\$ 653,536
16		Draws/(Paydown) of LOC Balances				-	\$ -
17		Other Revenues/Receipts/Transfers				131,437	\$ 5,594,277
18	<b>TOTAL RECEIPTS</b>					\$ 5,448,565	\$ 32,384,297
19							
20	<b>Disbursements</b>						
21		Wages, Benefits, & Contract Labor				\$ 4,415,704	\$ 23,945,262
22		Other Operating Costs				2,590,134	\$ 12,675,098
23		Capital Spending				472,646	\$ 823,093
24		Debt Service Payments				76,041	\$ 88,983
25		Other - Changes in Accounts Payable, Other				621,835	\$ 2,483,540
26	<b>TOTAL DISBURSEMENTS</b>					\$ 8,176,360	\$ 40,015,976
27							
28	<b>TOTAL CHANGE in CASH</b>					\$ (2,727,795)	\$ (7,631,679)
29							
30	<b>ENDING CASH BALANCES</b>						
31		Ending Balances- Hospital				\$ 2,383,802	\$ 2,040,892
32		Ending Balances- District				3,568,885	3,911,795
33		Ending Balances- Totals				\$ 5,952,687	\$ 5,952,687
34							
35							
36							
37		LOC Current Balances				\$ 4,000,000	\$ 4,000,000
38		LOC Interest Expense Incurred				6,813	\$ 80,004
39							
40							

**TAB I**

**SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT**

**RESOLUTION NO. 2024-01**

**RESOLUTION APPROVING THE FORM AND AUTHORIZING THE EXECUTION AND DELIVERY OF A SECOND AMENDMENT TO LINE OF CREDIT AGREEMENT WITH FIRST FOUNDATION PUBLIC FINANCE (FORMERLY FIRST FOUNDATION PUBLIC FINANCE TRUST), A DELAWARE STATUTORY TRUST AND A WHOLLY-OWNED SUBSIDIARY OF FIRST FOUNDATION BANK, AND APPROVING CERTAIN OTHER ACTIONS**

RESOLVED, by the Board of Directors (the "Board") of the San Gorgonio Memorial Healthcare District (the "District"), as follows:

WHEREAS, the District has issued its San Gorgonio Memorial Healthcare District (Riverside County, California) Revenue Bonds, Series 2021, in the aggregate principal amount of up to \$2,350,000 (the "2021 Bonds") pursuant to an Indenture of Trust, dated as of January 1, 2021 (as amended and supplemented, the "Indenture"), by and between the District and U.S. Bank National Association, as trustee;

WHEREAS, pursuant to the Line of Credit Agreement dated January 7, 2021 (the "Original Agreement"), between the District and First Foundation Public Finance, formerly known as First Foundation Public Finance Trust, a Delaware statutory trust and a wholly-owned subsidiary of First Foundation Bank, including its successors and permitted assigns (the "Bank"), the Bank provided a revolving taxable credit facility in the aggregate principal amount of up to twelve million dollars (\$12,000,000) (as amended and supplemented, the "Credit Facility"), for the purpose of providing capital to the District for working capital purposes of the District, such Credit Facility is secured from gross revenues of the District on a parity with the 2021 Bonds; and

WHEREAS, the Bank is willing to amend the Credit Facility pursuant to a Second Amendment to Line of Credit (the "Amendment") to (i) extend the Termination Date of the Credit Facility from January 5, 2024 to January 4, 2025, and (ii) make certain additional changes to the Original Agreement on the terms and conditions set forth therein, subject to credit approval.

NOW, THEREFORE, it is hereby ORDERED and DETERMINED, as follows:

*Section 1.* The Amendment/term sheet, in the form presented to this meeting, is hereby approved. The Chair of the Board, the Vice Chair of the Board, the Chief Executive Officer of the District, and the Chief Financial Officer of the District or their designees, are hereby authorized and directed, for and in the name of the District, to execute and deliver the Amendment, with such changes, additions and deletions therein as the officer executing the same may approve, such approval to be conclusively evidenced by the execution and delivery of the Agreement.

*Section 2.* The Chair of the Board, the Vice Chair of the Board, the Secretary of the Board, the Assistant Secretary of the Board, the Chief Executive Officer of the District, and the Chief Financial Officer of the District or their designees are hereby authorized and directed, for and in the name of the District, to execute and deliver any other documents as may be deemed necessary or appropriate to approve the Amendment, such approval to be conclusively evidenced by the execution and delivery of such documents.

*Section 3.* The Secretary or the Assistant Secretary of the Board are hereby authorized and directed to attest the signature of the Chair of the Board, the Vice Chair of the Board, the Chief Executive Officer of the District, and the Chief Financial Officer of the District, or their designee thereof, as may be required in connection with the execution and delivery of the Amendment and such other documents referenced above in accordance with this resolution.

*Section 4.* This resolution shall take effect immediately upon its passage.

\* \* \* \* \*

PASSED AND ADOPTED this 2<sup>nd</sup> day of January 2024, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAINING:

By \_\_\_\_\_

Chair, Board of Directors  
San Gorgonio Memorial Healthcare District

I hereby certify that the foregoing resolution was duly adopted at a meeting of the Board of Directors of the San Gorgonio Memorial Healthcare District held on the 2<sup>nd</sup> day of January 2024.

By \_\_\_\_\_

Secretary, Board of Directors  
San Gorgonio Memorial Healthcare District

**TAB J**

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting January 2, 2024

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
1	Code Silver-Weapons, Hostage Situation or Active Assailant - Security Policy	Security	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
2	Decontamination Procedures - Disaster Policy	Emergency Preparedness	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
3	Fire Watch Policy	Engineering	Sanchez, Salvador: Director of Engineering	Ariel Whitley for Hospital Board of Directors
4	Food Services - Disaster Policy	Emergency Preparedness	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
5	Hazardous Material Safety Communication Program	Environment of Care	Sanchez, Salvador: Director of Engineering	Ariel Whitley for Hospital Board of Directors
6	Hospital Lockdown - Security Policy	Security	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
7	Internal Flooding - Disaster Policy	Emergency Preparedness	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
8	Parking Policy - Security	Security	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
9	Radiation Safety Committee Membership	Radiation Safety Program	Chamberlin, Krystal: Director Diagnostic Imaging	Ariel Whitley for Hospital Board of Directors
10	Safety Guidelines in the Kitchen	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
11	Using Quaternary Sanitizer	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors

**TAB K**



# A Happy Holiday and a Healthy New Year



Since 1951 we've provided the best possible healthcare to our community. Whether you're new to the area, or have lived here for generations, San Gorgonio Memorial Hospital is here to care for you.

600 N. Highland Springs Ave., Banning, CA  
951-845-1121 | [www.sgmh.org](http://www.sgmh.org)



**SAN GORGONIO  
MEMORIAL HOSPITAL**

# We Are Ready For You

- Robotic Surgery
- Less time for recuperation
- Less re-infection
- Fewer complications
- Most effective minimally invasive surgery with a successful track record



600 N. Highland Springs Ave., Banning, CA  
951-845-1121 | [www.sgmh.org](http://www.sgmh.org)



SOLUTIONS BY SECTOR  
WEBINAR

SECURITY  
REGISTERED  
IACET  
EARN 0.1 IACET CEU

# Solving Hiring & Retention Challenges in Healthcare Security

Already Registered?

[LOG IN NOW](#)

Start Date: 1/31/2024

Start Time: 2:00 PM EST

Duration: 60 minutes

## Abstract

Earn: 0.1 IACET CEU

## Register Today

First Name \*

Last Name \*

Job Title \*

Company \*

State/Province \*

Country \*

Work Email \*

Time Zone

Phone \*





As an IACET Accredited Provider, BNP Media offers IACET CEUs for its learning events that comply with the ANSI/IACET Continuing Education and Training Standard.

Participants completing this course may be eligible to receive Continuing Professional Education credit or CPEs toward ASIS re-certification.

Training may qualify for related continuing education for recertification activity through NICET. Students may claim one (1) Continuing Professional Development (CPD) point per hour of instruction towards their NICET recertification requirement for any sessions that expand their knowledge of the subject matter pertaining to the certifications they hold.

In this webinar, Joey Hunter, Director of Security and Emergency Management at San Gorgonio Memorial Hospital, shares steps for making the right security hire and increasing retention rates in healthcare security roles. Drawing from his more than 30-year career in enterprise security, Hunter discusses lessons on behavioral assessments in the hiring process, interview questions that demonstrate retention potential, and how to motivate high-performing employees to stay at your healthcare organization.

**Learning Objectives:**

1. Outline challenges in security hiring and retention in the healthcare sector.
2. Discuss strategies to make the right hire for entry- and mid-level security roles.
3. Highlight the importance of training in security staff

**What is your primary business/industry? \***

**What is your primary job function? \***

To help enhance your networking experience, would you like to opt in to receive communications from the Solutions by Sector Webinar Series sponsors? Your information will be shared pursuant to our Privacy Policy below and any existing qualifications on your account will supersede this permission. \*

**Subscribe/renew the following:**

[Accept Privacy Policy](#)

By clicking "register", you acknowledge that you have read BNP Media's [Privacy Policy](#), agree to its terms, and consent to allow BNP Media to use your information consistent with the Privacy Policy. You agree your information submitted will be shared with the sponsor(s) of the webinar.

**REGISTER**



[Technical Requirements](#)

[Contact Us](#)

[Privacy Policy](#)

retention.

4. Learn how to demonstrate your organization's investment in its security staff.

## Speaker



### **Joey Hunter**

Director of Security,  
Safety and Emergency  
Preparedness  
San Geronio Memorial  
Hospital

# Sponsored by



# Share With Friends

Photo Courtesy of: kateleho Seisa / E+ / Via Getty

Images



---

A BNP Media Event. © Copyright 2024 by BNP Media II, LLC. All rights reserved.  
550 W Merrill St, Suite 200, Birmingham, MI 48009