



AGENDA

REGULAR MEETING OF THE BOARD OF DIRECTORS

Tuesday, July 2, 2024

6:00 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 Healthcare District to make reasonable arrangements to ensure accessibility to this meeting. [28 CFR 35.02-35.104 ADA Title II].

TAB

I. Call to Order

S. McDougall, Chair

II. Public Comment

A five-minute limitation shall apply to each member of the public who wishes to address the Healthcare District 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 Healthcare District 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.

NOTE: ALL MEMBERS OF THE SAN GORGONIO MEMORIAL HOSPITAL BOARD OF DIRECTORS ARE INVITED PARTICIPANTS AND MAY ADDRESS THE SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT BOARD OF DIRECTORS AT ANY TIME DURING THIS MEETING.

TAB

OLD BUSINESS

III. * Proposed Action - Approve Minutes

All

- June 4, 2024, regular meeting

A

NEW BUSINESS

- IV. District Board Chair Monthly Report S. McDougall verbal
- V. Chief of Staff Report R. Sahagian, MD B
***Proposed Action - Approve Recommendations of the Medical
Executive Committee**
▪ **ROLL CALL**
- VI. *** Proposed Action – Approve the FYE 2025 Operating Budget and
Capital Budgets** D. Heckathorne C
(approval recommended by Hospital Board 7/02/2024)
▪ **ROLL CALL**
- VII. *** Proposed Action - Approve Notice to the Registrar of Voters
General District Election, November 5, 2024** S. McDougall D
(Candidate must pay total cost of any Candidate Statement)
▪ **ROLL CALL**
- VIII. *** Proposed Action - Approve changes to Conflict of Interest Code
and Resolution No. 2024-03 (Resolution of the Board of Directors of
San Geronio Memorial Healthcare District Amending the Conflict of
Interest Code Pursuant to the Political Reform Act of 1974)** S. McDougall E
▪ **ROLL CALL**
- IX. *** Proposed Action – Adopt Resolution No. 2024-04** S. McDougall F
(Change in banking authorized signers)
▪ **ROLL CALL**
- X. ***Proposed Action - Approve May 2024 Financial Report** D. Heckathorne G
▪ **ROLL CALL**

• Informational: Measure A Funds Report – May 2024 H
- XI. ***Proposed Action - Approve Policies and Procedures** Staff I
▪ **ROLL CALL**
- XII. General Information

***** ITEMS FOR DISCUSSION/APPROVAL IN CLOSED SESSION**

S. McDougall

- Proposed Action – Approve Medical Staff Credentialing
(Health & Safety Code §32155; and Evidence Code §1157)

XIII. 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. McDougall

XIV. Future Agenda Items

XV. Adjournment

S. McDougall

***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 Healthcare District 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 June 28, 2024, I posted a copy of the foregoing agenda near the regular meeting place of the Board of Directors of San Geronio Memorial Healthcare District, and on the San Geronio 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 June 28, 2024



Ariel Whitley, Executive Assistant

TAB A

REGULAR MEETING OF THE
SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT
BOARD OF DIRECTORS

June 4, 2024

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, June 4, 2024, in Modular C meeting room, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Shannon McDougall (Chair), Ron Rader, Randal Stevens, Lanny Swerdlow

Members Absent: Dennis Tankersley

Required Hospital: Steve Barron (CEO), Raffi Sahagian, MD (Chief of Staff), Daniel Heckathorne (CFO), John Peleuses (VP Ancillary and Support Services), Lani Webb (Administrative Assistant), Margeret Kammer (Controller)

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP												
Call To Order	Chair McDougall, called the meeting to order at 6:14 pm.													
Public Comment	No public comment.													
OLD BUSINESS														
Proposed Action - Approve Minutes May 7, 2024, regular meeting.	Chair Shannon McDougall, asked for any changes or corrections to the minutes of the May 7, 2024, regular meeting. There were none.	The minutes of the May 7, 2024, regular meeting will stand correct as presented.												
NEW BUSINESS														
District Board Chair Report	No formal report was given.													
Proposed Action – Approve Annual Insurance Renewals	The Annual Insurance Renewals were presented to the Board by Dan Heckathorne, CFO. The Insurance Renewals include: <ul style="list-style-type: none"> • Professional and General Liability • Directors and Officers Liability • Employment Practices Liability • Auto Liability • Workers’ Compensation BOARD MEMBER ROLL CALL: <table border="1" style="margin-left: 20px;"> <tr> <td>McDougall</td> <td>Yes</td> <td>Rader</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	McDougall	Yes	Rader	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		M.S.C., (Rader/Swerdlow), the SGMHD Board of Directors approved the Annual Insurance Renewals as presented.
McDougall	Yes	Rader	Yes											
Stevens	Yes	Swerdlow	Yes											
Tankersley	Absent	Motion carried.												

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP												
<p>Proposed Action – Approve San Gorgonio Memorial Healthcare District Funds Investment Policy</p>	<p>At the request of Pacific Premier Bank, a District Funds Investment Policy was drafted to be presented to the District Board for approval.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="407 436 1214 541"> <tr> <td>McDougall</td> <td>Yes</td> <td>Rader</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	McDougall	Yes	Rader	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Swerdlow/Rader), the SGMHD Board of Directors approved the San Gorgonio Memorial Healthcare District Funds Investment Policy as presented.</p>
McDougall	Yes	Rader	Yes											
Stevens	Yes	Swerdlow	Yes											
Tankersley	Absent	Motion carried.												
<p>Chief of Staff Report</p> <p>Proposed Action – Approve Recommendations of the Medical Executive Committee</p>	<p>Raffi Sahagian, MD, Chief of Staff, briefly reviewed the Medical Executive Committee report as included on the board tablets.</p> <p>Items for Approval 2024 Annual Approval of Policies and Procedures</p> <ul style="list-style-type: none"> There were sixty-three (63) policies presented for approval. <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="407 909 1214 1014"> <tr> <td>McDougall</td> <td>Yes</td> <td>Rader</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	McDougall	Yes	Rader	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Swerdlow/Rader), the SGMHD Board of Directors approved the recommendations of the Medical Executive Committee as presented.</p>
McDougall	Yes	Rader	Yes											
Stevens	Yes	Swerdlow	Yes											
Tankersley	Absent	Motion carried.												
<p>Proposed Action – Approve the April 2024 Financial Report</p>	<p>Margaret Kammer reviewed the April 2024 Finance Report as included on the board tablets.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="407 1224 1214 1329"> <tr> <td>McDougall</td> <td>Yes</td> <td>Rader</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	McDougall	Yes	Rader	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Rader/Swerdlow), the SGMHD Board of Directors approved the April 2024 Financial report as presented.</p>
McDougall	Yes	Rader	Yes											
Stevens	Yes	Swerdlow	Yes											
Tankersley	Absent	Motion carried.												
<ul style="list-style-type: none"> Informational - Measure A expenditures – April 2024 	<p>Chair McDougall, noted that a copy of the Measure A funds and expenditures – April 2024 was included on the board tablets.</p>													
<p>Proposed Action – Approve Policies and Procedures</p>	<p>There were five (5) policies and procedures included on the board tablets presented for approval by the Board.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="407 1707 1214 1812"> <tr> <td>McDougall</td> <td>Yes</td> <td>Rader</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	McDougall	Yes	Rader	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Stevens/Swerdlow), the SGMHD Board of Directors approved the policies and procedures as submitted.</p>
McDougall	Yes	Rader	Yes											
Stevens	Yes	Swerdlow	Yes											
Tankersley	Absent	Motion carried.												
<p>General Information</p>	<p>None.</p>													

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP
Adjourn to Closed Session	Chair McDougall, reported the items to be reviewed and discussed and/or acted upon during Closed Session will be: <ul style="list-style-type: none"> ➤ Proposed Action–Approve Medical Staff Credentialing. The meeting adjourned to Closed Session at 6:19 pm.	
Reconvene to Open Session	The meeting was reconvened to Open Session at 6:23 pm. At the request of Chair McDougall, Ariel Whitley reported on the actions taken/ information received during closed session as follows: <ul style="list-style-type: none"> ➤ Approved Medical Staff Credentialing 	
Future Agenda Items	<ul style="list-style-type: none"> • None 	
Adjournment	The meeting was adjourned at 6:26 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 Healthcare District 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.

TAB B

SAN GORGONIO MEMORIAL HOSPITAL
Medical Staff Services Department
M E M O R A N D U M

DATE: May 29, 2024

TO: Chair
Governing Board

FROM: Raffi Sahagian, M.D., Chairman
Medical Executive Committee

SUBJECT: MEDICAL EXECUTIVE COMMITTEE REPORT

At the Medical Executive Committee held this date, the following items were approved, with recommendations for approval by the Governing Board:

Approval Item(s):

2024 Annual Approval of Policies & Procedures

The attached list of policies & procedures is recommended for approval (See attached).

Amended Medical Staff Rules and Regulations

B. MEDICAL RECORDS – Page 6

HISTORY & PHYSICAL

(Delete)

~~Shall be on the chart within twenty four (24) hours of admission and/or on the chart prior to surgery. Emergency surgeries shall have hand written Progress Notes. Failure to dictate or legibly hand write the History and Physical within twenty four (24) hours of admission may result in temporary suspension of clinical privileges.~~

(Revise)

An updated examination of the patient, including any changes in the patient's condition, must be completed, and documented within 24 hours after admission or registration, but prior to surgery or a procedure requiring anesthesia services, when the medical history and physician examination are completed within 30 days before admission or registration.

TAB C

San Geronio Memorial Healthcare District Hospital and San Geronio Memorial Hospital FY 2025 Operating and Capital Budgets

To: Finance Committee, Board of Directors, and District Board

Agenda Item for June 25, 2024 Finance Committee and July 2, 2024 Board Meetings

Subject:

Recommendation for Approval of San Geronio Memorial Healthcare District and San Geronio Memorial Hospital June 30, 2025 Operating and Capital Budgets

Key Issues:

Each year it is required that the Hospital and District prepare budgets for the upcoming fiscal year.

The FY 2025 Operating and Capital Budget Package is included as an Attachment to this write-up.

Executive Leadership will present this package to the respective Committees and Boards at the meetings listed above.

Recommended Action:

To approve the San Geronio Memorial Healthcare District and San Geronio Memorial Hospital FYE June 30, 2025 Operating and Capital Budgets as presented.

SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT and HOSPITAL

FYE June 30, 2025 Budget Package

Operating Budget

Assumptions

Workload Indicators

Statement of Revenues and Expenses

Combined Balance Sheet:

San Gorgonio Memorial Hospital & District

Cash Flow Statement

Capital Budget

SGMHD Operating Budget

Prepared: June 14, 2024

SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT AND HOSPITAL

FYE June 30, 2025 Budget Assumptions

Overview:

There are four key elements impacting the upcoming year's budget:

The Hospital's Stroke Program has been certified, and ambulance arrivals are expected to begin in August, 2024. The budget includes conservative volume increases associated with the additional stroke patients.

There are \$7.5M of expected donations into this budget: Remainders of the Morongo Band of Mission Indians' two recent donations: 1) the initial \$5.6M for the Stroke program and 2) the remaining portion of the \$5M to be used for the Fluoroscopy Room and Women's Clinic. Finally, there is \$2.1M from the County of Riverside for the new Nuclear Medicine Spect C/T and related construction costs.

The budget includes recovery of \$9.2M for Employee Retention Tax Credits related to the Covid-19 pandemic. There is a strong possibility that these credits will not be received during the upcoming fiscal year. Our consultants on this matter are unable to predict the IRS' processing time of this application, thus necessitating the need for SGMH seeking additional revenue until such Credits are received.

Plans are in place to establish a new 1206b District Family and Women's Clinic. It is estimated that this Clinic will be operational by January, 2025. As such, the budget only includes nominal growth volume this year for an estimated 25 GYN related surgeries. The entire organization is very grateful to the Morongo Band of Mission Indians generous seed money to get this program established, and there is much anticipation for significant growth in the future based on the shortage of caregivers, both for Obstetrical and Family care services in the local area.

Key Issues:

Growth Opportunities and Recovery from Volume Downturn in 2024

Programs:

Receipt of ambulance deliveries of stroke patients for the newly certified Stroke Program

Initiate development of Women's and Families Clinic to open by January, 2025

Continuation of the Internal Medicine Residency and Critical Care Fellowship Programs

Continuation of Physician Specialty Coverages in Emergency Room

Workloads:

A general overall 4.2% Inpatient workload increase, an 8.5% Surgery caseload increase including new spinal neurosurgery cases, both of which impact the 1.5% Adjusted Patient Day increase. Other major workload volumes are projected to continue at the current years' experience.

Operations:

Revenues:

Decrease of approximately \$200K in Medicare Reimbursement; No increase in Medi-Cal Reimbursement

Nominal increases in PPO and other managed care contracts

Increased recoveries (\$600K) for self-pay up front cash pay program and legal pursuit of denied claims

Supplemental Funding, DSH, P4P, and Other Income will increase by \$1,437,961.

As in the FYE 2024, there are no Aggregated Overall Increase in Patient Charge Rates for FYE 2025 (following 4.46% and 72.2% increases in 2022 and 2021 respectively).

Redlands Community Hospital cancelled its hospital capitation agreement with Optum, resulting in fewer transfers from the SGMH Emergency Department

Expenses:

Focus to continue with 2024 Operating and Staffing levels – Slight increases in various areas required for patient safety, quality, compliance monitoring or otherwise mandated by regulation; Flex down during lower volume periods

Wages include the impact of the 3.0% overall increase from October, 2023, plus an estimated \$525K additional mandate for CPSL in January, 2025. At this point, the budget does not include increases in compensation, other than carryforward of various market adjustments that have occurred over the past year.

Ensure Operational Efficiencies:

Reduction in Contract Labor, Overtime, and Double time costs

Estimated Physician fees and on-call increases totaling \$732K are anticipated

Purchased Services costs to increase for Altera and Guidehouse while Legal fees should see a drop of \$836K

Supplies cost increases consistent with 2024 changes and various inflationary rates estimated in the 1.9% range

Utilities increase based on current year trends plus inflation in the range of 3.1% to 4.7%

Other Expenses overall to generally remain constant with the exception of District election costs (\$215,000)

Leases/Rentals are impacted (as in 2024) by the changes in GASB requirements for equipment and software leases booking requirements. (Non-Operating Depreciation Expense is also impacted by these GASB requirements.)

Capital and Financing:

Key Items: Significant investments in I/T including badge computer access, Nurse Call system, Med-Surg I.V. Pumps, Surgical Table, Lab Chemistry Analyzer, along with donated capital to complete the Stroke Center equipment, Fluoroscopy equipment and room, Nuclear Medicine Spect C/T scanner and renovations, and establishment of the Women's and Family Clinic program.

Pursue compliance with Line of Credit covenants

Continue Pursuit of Funding and Grants opportunities

Debt Service for Bridge Loan Financing and 2021 Revenue Bonds are pledged from the Ad Valorem Taxes, but will be funded from operations

Ad Valorem Taxes then to be applied toward the Capital Equipment budget

Debt Service for General Obligation Bonds from Measure A property Taxes

\$5.2M to repay second QIP Loan (or portion thereof pending legislation) and Other Non-Operating Legal settlements

Renew \$12M Line of Credit

Report Format:

The 2025 Operating Budget was again prepared in the new Premier Budget Financial Reporting (BFR) software system. Please note that the BFR system tabulates Totals from the "bottom up" method, in contrast to the "top down" method which are more traditional.

	C	D	E	F	G	H	I
1	SAN GORGONIO MEMORIAL HEALTH CARE DISTRICT AND HOSPITAL	ACTUAL 2022	ACTUAL 2023	PROJECTED 2024	BUDGET 2025	VARIANCE 2025 TO 2024	VARIANCE PERCENTAGE
2	WORKLOAD INDICATORS						
3							
4	PATIENT DAYS	9,689	7,636	8,037	8,373	336	4.2%
5							
6	AVERAGE DAILY CENSUS	26.55	20.92	21.96	22.94	0.98	4.5%
7							
8	INPATIENT ADMISSIONS/DISCHARGES	2,478	2,186	2,150	2,246	96	4.5%
9							
10	AVERAGE LENGTH OF STAY	3.91	3.49	3.74	3.73	0.01	0.3%
11							
12	EMERGENCY VISITS	39,374	41,821	42,281	42,357	76	0.2%
13							
14	EMERGENCY VISITS PER DAY	108	115	116	116	0.52	0.5%
15							
16	SURGICAL CASES	855	1,433	1,215	1,318	103	8.5%
17							
18	G.I. CASES	503	242	255	255	0	0.0%
19							
20	NEWBORN DELIVERIES	175	131	113	113	0	0.0%
21							
22	PAID FTE'S	469	465	478	477	1	0.2%
23							
24	ADJUSTED PATIENT DAYS	21,909	21,417	22,883	23,226	343	1.5%
25							
26	PAID FTE'S PER ADJUSTED PATIENT DAY	7.81	7.92	7.65	7.50	0.15	2.0%
27							
28	Patient Day increases include an estimated 120 days related to the Stroke Program which is planned to receive ambulance patients in August, 2024.						
29							
30	Note: Favorable Variances are Shown as Positive and Unfavorable Variances are Shown as Negative						

June 14, 2024

	A	B	C	D	E	F	G
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL						
2							
3	INCOME STATEMENT	ACTUAL 2022	ACTUAL 2023	PROJECTED 2024	BUDGET 2025	VARIANCE 2025 TO 2024 (see note)	VARIANCE PER CENTAGE (see note)
4	NET INCOME	(9,658,207)	(2,138,626)	(14,368,473)	8,923,037	23,291,510	162.1%
5	EBIDA	(3,427,380)	95,004	(11,640,963)	(5,476,915)	6,164,048	53.0%
6							
7	TOTAL OPERATING REVENUE	80,775,709	88,934,094	82,507,579	89,525,201	7,017,622	-8.5%
8	NET PATIENT REVENUE	61,064,563	60,683,187	54,157,208	58,929,786	4,772,578	-8.8%
9	GROSS REVENUE FROM PATIENT SERVICES	450,460,569	476,970,252	492,786,241	502,347,171	9,580,930	-1.9%
10	TOTAL INPATIENT REVENUE	199,211,481	170,061,363	173,565,573	179,180,423	5,614,850	-3.2%
11	TOTAL OUTPATIENT REVENUE	251,249,088	306,908,889	319,220,668	323,166,748	3,946,080	-1.2%
12	DEDUCTIONS FROM REVENUE	(389,395,986)	(416,287,065)	(438,629,033)	(443,417,385)	(4,788,352)	-1.1%
13	CONTRACTUAL ALLOWANCES	(375,205,782)	(402,542,457)	(427,442,785)	(432,014,104)	(4,571,319)	-1.1%
14	BAD DEBT EXPENSE	(12,546,840)	(12,575,294)	(10,496,347)	(10,699,995)	(203,648)	-1.9%
15	CHARITY WRITE_OFFS	(1,643,364)	(1,169,314)	(689,901)	(703,286)	(13,385)	-1.9%
16							
17	TOTAL OTHER OPERATING REVENUE	19,711,126	28,250,907	28,350,371	30,595,415	2,245,044	-7.9%
18	OTHER REVENUE - RATE RANGE	315,425	11,273,599	14,103,274	13,971,285	(131,989)	0.9%
19	OTHER REVENUE - OTHER SUPPLEMENTALS	6,016,888	5,309,174	5,464,990	6,417,154	952,164	-17.4%
20	OTHER REVENUE - DSH	2,877,557	1,468,419	1,020,351	983,962	(36,389)	3.6%
21	OTHER REVENUE - PAP	690	1,209,554	977,113	1,000,000	22,887	-2.3%
22	OTHER REVENUE - OTHER	5,687,737	4,125,161	1,799,457	2,490,745	691,288	-38.4%
23	OPERATING TAX REVENUES	4,812,829	4,865,000	4,985,186	5,732,269	747,083	-15.0%
24	OPERATING REVENUE TAX REVENUE MH.	2,752,857	2,560,821	2,963,928	3,306,435	342,507	-11.6%
25	OTHER REVENUE PROP 13	1,753,245	2,276,487	1,854,000	2,250,834	396,834	-21.4%
26	OTHER REVENUE ABX 163	306,727	27,692	167,258	175,000	7,742	-4.6%
27							
28	TOTAL OPERATING EXPENSE	84,203,089	88,839,090	94,148,542	95,002,116	(853,574)	-0.9%
29	TOTAL LABOR EXPENSE	52,039,651	55,851,318	60,410,063	59,700,952	709,111	1.2%
30	EMPLOYEE WAGES & BENEFITS	50,783,474	54,876,259	58,743,798	58,295,522	448,276	0.8%
31	WAGES	40,816,275	43,616,652	47,087,788	46,300,957	786,831	1.7%
32	EMPLOYEE BENEFITS	9,967,199	11,259,607	11,656,010	11,994,565	(338,555)	-2.9%
33	CONTRACT LABOR	1,256,177	975,059	1,666,265	1,405,430	260,835	15.7%
34							
35	PHYSICIAN FEES	3,742,589	3,596,869	5,591,208	6,323,035	(731,827)	-13.1%
36	PURCHASED SERVICES	11,159,755	10,363,881	11,262,631	11,352,201	(89,570)	-0.8%
37	SUPPLY EXPENSE	11,852,995	11,439,041	9,621,456	10,324,012	(702,556)	-7.3%
38	UTILITIES	1,312,183	1,116,447	1,209,262	1,284,862	(75,600)	-6.3%
39	REPAIRS AND MAINTENANCE	758,728	921,676	1,196,666	895,452	301,214	25.2%
40	INSURANCE	1,421,235	1,434,578	1,570,989	1,727,590	(156,601)	-10.0%
41	OTHER EXPENSES	1,915,503	2,921,117	2,752,848	2,959,502	(206,654)	-7.5%
42	LEASE AND RENTALS	450	1,194,163	533,419	434,510	98,909	18.5%
43							
44	TOTAL NON-OPERATING REVENUE & EXPENSE	4,097,311	9,522,789	9,224,344	25,675,268	16,450,924	178.3%
45	OTHER NON-OPERATING REVENUE	122,101	1,591,039	4,418,171	7,703,485	3,285,314	74.4%
46	NON-OPERATING INTEREST INCOME	46,712	206,541	175,787	175,787	0	0.0%
47	NON-OPERATING DONATIONS/GAIN ON SALE	75,389	1,384,498	4,242,384	7,527,698	3,285,314	77.4%
48	NON-OPERATING TAX REVENUE	7,392,710	7,931,750	7,528,236	8,739,685	1,211,449	16.1%
49	EXTRAORDINARY REVENUE (EXPENSE)	(3,417,500)	0	(2,722,063)	9,232,098	11,954,161	439.2%
50							
51	TOTAL INTEREST & DEPRECIATION	10,328,138	11,756,419	11,951,854	11,275,316	676,538	5.7%
52	DEPRECIATION	5,592,016	5,940,464	6,994,298	6,317,760	676,538	9.7%
53	INTEREST & AMORTIZATION	4,736,122	5,815,955	4,957,556	4,957,556	0	0.0%
54							
55	Note: Favorable Variances are Shown as Positive and Unfavorable Variances are Shown as Negative						June 14, 2024

	A	B	C	D	E	F	G
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL						
2	BALANCE SHEET	JUNE 2022	JUNE 2023	JUNE 2024	JUNE 2025	VARIANCE 2024 TO 2025 (see note)	VARIANCE PERCENTAGE (see note)
3	TOTAL ASSETS	112,302,165	112,558,570	107,469,218	108,718,129	1,248,911	1.2%
4	CURRENT ASSETS	22,630,675	29,638,354	26,612,105	24,683,305	(1,928,800)	-7.2%
5	CASH & EQUIVALENTS	11,073,544	14,521,085	14,924,646	13,924,996	(999,650)	-6.7%
6	NET PATIENT ACCOUNTS RECEIVABLE	8,746,991	12,177,379	9,209,921	9,403,750	193,829	2.1%
7	HOSPITAL ACCOUNTS RECEIVABLE	77,594,807	86,192,181	89,418,295	91,307,408	1,889,113	2.1%
8	LESS: ALLOWANCE FOR BAD DEBTS	(68,847,816)	(74,014,802)	(80,208,374)	(81,903,658)	(1,695,284)	2.1%
9							
10	OTHER CURRENT ASSETS	2,810,140	2,939,890	1,268,760	1,268,760	0	0.0%
11	TAXES RECEIVABLE	1,375,017	2,263,620	1,011,259	1,324,186	312,927	30.9%
12	MISC RECEIVABLE	7,502	64,052	347,314	347,314	0	0.0%
13	DUE FROM 3RD PARTIES	(748,043)	(1,097,349)	(2,799,879)	(3,836,032)	(1,036,153)	37.0%
14	INVENTORIES	1,829,462	1,311,782	2,240,365	1,828,320	(412,045)	-18.4%
15	PREPAID EXPENSES	346,202	397,785	409,719	422,011	12,292	3.0%
16							
17	ASSETS WHICH USE IS LIMITED	12,734,281	9,102,770	8,523,484	8,494,080	(29,404)	-0.3%
18	NET PROPERTY, PLANT, AND EQUIPMENT	76,582,823	73,452,527	71,968,710	75,201,715	3,233,005	4.5%
19	PROPERTY, PLANT, AND EQUIPMENT	164,801,341	166,692,035	171,415,428	180,966,193	9,550,765	5.6%
20	LAND & LAND IMPROVEMENTS	4,828,182	4,828,182	4,828,182	4,828,182	0	0.0%
21	BUILDINGS & BUILDING IMPROVEMENTS	129,281,491	129,281,491	129,281,491	136,045,614	6,764,123	5.2%
22	FIXED EQUIPMENT	28,997,660	29,262,127	31,416,424	39,416,424	8,000,000	25.5%
23	CONSTRUCTION IN PROGRESS	1,694,008	3,320,235	5,889,331	675,973	(5,213,358)	-88.5%
24							
25	LESS: ACCUMULATED DEPRECIATION	(88,218,518)	(93,239,508)	(99,446,718)	(105,764,478)	(6,317,760)	6.4%
26	OTHER ASSETS	354,386	364,919	364,919	339,029	(25,890)	-7.1%
27							
28	TOTAL LIABILITIES & FUND BALANCE	112,302,176	112,558,570	107,469,218	108,718,129	(1,248,911)	-1.2%
29	TOTAL LIABILITIES	146,026,043	148,421,077	157,706,602	150,032,476	7,674,126	4.9%
30	CURRENT LIABILITIES	34,918,239	28,682,871	41,384,035	40,671,681	712,354	1.7%
31	ACCOUNTS PAYABLE	10,378,212	11,278,786	10,211,079	10,637,342	(426,263)	-4.2%
32	PAYROLL PAYABLES	6,421,579	6,484,769	8,168,881	8,825,661	(656,780)	-8.0%
33	SALARIES & WAGES PAYABLE	2,057,716	579,682	878,666	1,335,446	(456,780)	-52.0%
34	PAYROLL TAXES & DEDUCTIONS PAYABLE	1,905,118	3,235,802	3,919,761	3,919,761	0	0.0%
35	ACCRUED PTO & SICK DAYS PAYABLE	2,458,745	2,669,285	3,370,455	3,570,455	(200,000)	-5.9%
36						0	
37	LINE OF CREDIT	12,000,000	4,043,719	10,000,000	12,000,000	(2,000,000)	-20.0%
38	OTHER CURRENT LIABILITIES	6,118,448	6,875,597	7,370,513	6,680,190	690,323	9.4%
39	ACCRUED INTEREST PAYABLE	1,925,911	1,609,780	1,493,130	1,506,126	(12,996)	-0.9%
40	OTHER CURRENT LIABILITIES	4,192,537	5,265,817	4,140,432	1,022,362	3,118,070	75.3%
41							
42	LONG TERM LIABILITIES	111,107,804	119,738,206	116,322,567	109,360,795	6,961,772	6.0%
43							
44	NET ASSETS	(33,723,867)	(35,862,507)	(50,237,384)	(41,314,347)	8,923,037	17.8%
45	NET ASSETS - BEGINNING OF PERIOD	(24,065,660)	(33,723,881)	(35,868,911)	(50,237,384)	(14,368,473)	-40.1%
46	CURRENT YEAR NET GAIN/(LOSS)	(9,658,207)	(2,138,626)	(14,368,473)	8,923,037	23,291,510	162.1%
47							
48							
49	Note: Favorable Variances are Shown as Positive and Unfavorable Variances are Shown as Negative						June 14, 2024
50			7				

	B	C	D	E	F	G	H	I	J
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT AND HOSPITAL								
2									
3	CASH FLOW REPORT					ACTUAL 2022	ACTUAL 2023	PROJECTED 2024	BUDGET 2025
4	BEGINNING CASH BALANCES								
5		Cash: Beginning Balances- Hospital				\$ 2,395,672	\$ 9,995,092	\$ 12,282,287	\$ 14,511,732
6		Cash: Beginning Balances- District				25,281	1,078,770	2,238,799	412,914
7		Cash Restricted - District				9,846,366	12,734,282	9,102,771	8,523,484
8		Cash: Beginning Balances Totals				12,267,319	23,808,144	23,623,857	23,448,130
9									
10	Receipts								
11		Patient Collections				63,176,610	55,619,230	58,422,687	58,929,786
12		Tax Subsidies/Measure H; Prop 13; Measure A				11,898,812	12,894,771	12,346,164	14,296,954
13		Misc Tax Subsidies				306,727	27,692	167,258	175,000
14		Donations/Grants/Loans				3,856,030	16,162,550	14,042,384	7,527,698
15		Supplemental Funding (Rate Range, Etc.)				9,210,510	19,260,746	21,565,728	22,372,401
16		Draws/(Paydown) of LOC Balances				12,000,000	(8,000,000)	6,000,000	2,000,000
17		Other Operating & Extraordinary Revenues				5,687,737	4,125,161	2,177,394	11,722,843
18	TOTAL RECEIPTS					106,136,426	100,090,150	114,721,615	117,024,682
19									
20	Disbursements								
21		Wages, Benefits, & Contract Labor				50,783,474	54,876,259	58,743,798	58,295,522
22		Other Operating Costs				33,419,615	32,864,848	33,955,517	35,389,356
23		Capital Spending				1,997,152	1,888,943	4,723,393	9,764,123
24		Debt Service Payments (Includes Interest)				6,307,244	9,652,039	11,982,069	13,320,952
25		Other Non-Operating Payments				0	0	3,039,563	3,100,000
26		Other Changes in Current Assets & Current Liabilities				2,088,116	492,348	2,453,002	(1,816,218)
27	TOTAL DISBURSEMENTS					94,595,601	99,774,437	114,897,342	118,053,735
28									
29	TOTAL CHANGE in CASH					11,540,825	315,713	(175,727)	(1,029,053)
30									
31	ENDING CASH BALANCES								
32		Ending Balances- Hospital				9,995,092	12,282,287	14,511,732	13,286,582
33		Ending Balances- District				1,078,770	2,238,799	412,914	638,414
34		Ending Balances - Restricted District				12,734,282	9,102,771	8,523,484	8,494,080
35		Ending Balances- Totals				\$ 23,808,144	\$ 23,623,857	\$ 23,448,130	\$ 22,419,076
36									
37	TOTAL UNRESTRICTED CASH					\$ 11,073,862	\$ 14,521,086	\$ 14,924,646	\$ 13,924,996
38									
39	LINE OF CREDIT BALANCE					\$ 10,000,000	\$ 10,000,000	\$ 10,000,000	\$ 12,000,000
40									
41									

June 14, 2024

	A	B	C	D	E	F	L	M	N	O	P	Q	R	S	T	U	V		
1	San Gorgonio Memorial Hospital				6/12/2024		FY 2023		FY 2024 Priority 1 = Highest, 4 = Lowest	FY 2024		FY 2025 Priority 1 = Highest, 4 = Lowest	FY 2025		FY 2026		FY 2027		
2	3-Year Capital Budget FYE's 2025 - 2027																		
3	DESCRIPTION	DEPARTMENT	Owner																
4	Hospitalwide Badge Computer Access	Admin	Brady	\$	151,050			3				1	\$	109,000	\$	58,740	\$	58,740	
5	Contingency	Admin	Barron	\$	413,791			1	\$	219,805			\$	132,469					
6																			
7	Patient Transport Van (3 each)	Behavioral H.	Maciel					3	\$	45,000					\$	25,000	\$	50,000	
8	Expansion Construction	Behavioral H.	Maciel					2	\$	10,000	2		\$	35,000	\$	-	\$	-	
9																			
10	Electriccal Bike	Cardiac Rehab	Brady										\$	1,000					
11	Treadmill (2 each)	Cardiac Rehab	Brady										\$	4,000					
12	Women's and Family Clinic	Clinic	Brady										\$	2,204,270					
13																			
14	Patient tray cart	Dietary	Hawthorne										\$	5,000	\$	5,000	\$	5,000	
15	Disaster Food Replacement	Dietary	Hawthorne					4					\$	33,735					
16	Dietary Food Management (Software System)	Dietary	Hawthorne	\$	49,365			4	\$	-					\$	63,000			
17																			
18	Syngo Dynamics Server update	ECHO	Garewak									2		\$	50,000				
19	Treadmill system	ECHO	Garewak									1		\$	35,835				
20																			
21	Mindray Monitors in RC/Doc Area	ED	Phillippi					4	\$	-				\$	-	\$	-	\$	-
22	Computer Arms	ED	Phillippi										\$	8,000	\$	8,000	\$	8,000	
23	Space IV Pumps (x 4/ year)	ED	Phillippi	\$	63,750			2	\$	63,750				\$	32,000	\$	16,000		
24																			
25	Riding Floor Care unit	EVS	Medraano					2	\$	12,000									
26																			
27	CD Image Maker	HIM	Cornwall	\$	-			2	\$	16,620					\$	-	\$	-	
28																			
29	IS Upgrades and Server Replacements	I/T	Maja	\$	250,000			1-P	\$	300,000	1		\$	497,000			\$	-	
30	Altera Dragon (40 Licenses)	I/T	Maja								1		\$	71,240					
31	Firewall Upgrades	I/T	Maja								1		\$	35,000	\$	-	\$	-	
32																			
33	ICU AccuVein	ICU	Tagliapietra												\$	6,000			
34	ICU Bladder Scanner	ICU	Tagliapietra												\$	12,000			
35	ICU Diagnostic US Machine	ICU	Tagliapietra									2		\$	45,000				
36	ICU EKG Machine	ICU	Tagliapietra									1	\$	18,000					
37	ICU IV Pumps (5 each)	ICU	Tagliapietra											\$	32,000	\$	4,000		
38	ICU Spectralink Phones (15 each)	ICU	Tagliapietra																
39																			
40	Fluoroscopy/Rad Room (Room 2)	Imaging	Chamberlin	\$	1,005,000			2					\$	1,498,015	\$	-	\$	-	
41	Rad Room 1	Imaging	Chamberlin					2									\$	900,000	
42	PAC'S Cube Replacement	Imaging	Chamberlin	\$	14,319			1	\$	14,319					\$	-	\$	-	
43	AI Doc	Imaging	Chamberlin					1	\$	150,000									
44	Portable X-Ray Machine	Imaging	Chamberlin	\$	170,000			2							\$	130,000			
45	Hybrid CT/NM Camera (Spect)	Imaging	Chamberlin	\$	2,000,000			1	\$	2,000,000			\$	2,150,000	\$	-	\$	-	
46	Mammography w/ Tomo & Stereo	Imaging	Chamberlin	\$	536,000			4	\$	-				\$	1,600,000				
47	Stroke Program Completion	Imaging	Chamberlin										\$	1,661,838					
48	ED Radiology Room	Imaging	Chamberlin									1		\$	500,000				
49	DI Reading Workstation	Imaging	Chamberlin											\$	65,000				
50	Ultrasound Units (2 Zach)	Imaging	Chamberlin											\$	150,000	\$	150,000		
51	PACS Workstation	Imaging	Chamberlin											\$	60,795				
52																			
53	CS-2500 Coagulation Analyzer (Back-up Unit)	Lab	Hazley	\$	45,000			1	\$	44,000		2	\$	45,000					
54	Chemistry Analyzers	Lab	Hazley					1	\$	360,000			\$	371,574					
55	Altera BB Interface	Lab	Hazley												\$	162,000			
56	Blood Bank Program Upgrade	Lab	Hazley					1	\$	190,000		1		\$	110,000				
57																			
58	Med-Surg Nurse Call	M/S	Freude									1	\$	288,698					
59	Med-Surg IV Pumps (4 each)	M/S	Freude									1							
60	Med- Surg Spectra Link Phones	M/S	Freude																
61	ICU Monitors & Telemetry System	Nursing Units	Brady	\$	673,000			1-P	\$	1,178,316				\$	-	\$	-		
62																			

	A	B	C	D	E	F	L	M	N	O	P	Q	R	S	T	U	V	
1	San Gorgonio Memorial Hospital																	
					6/12/2024		FY 2023		FY 2024 Priority 1 = Highest, 4 = Lowest	FY 2024		FY 2025 Priority 1 = Highest, 4 = Lowest	FY 2025		FY 2026		FY 2027	
2	3-Year Capital Budget FYE's 2025 - 2027																	
3	DESCRIPTION	DEPARTMENT	Owner															
63	Doppler Ultrasound System	O/R	Castillo						4						\$ 43,575		\$ -	
64	New Scrub Sinks (& faucet repair)	O/R	Castillo	\$	29,053				4					\$	29,053		\$ -	
65	Power Set	O/R	Castillo	\$	-				1-P	\$	28,000			\$	-		\$ -	
66																		
67	Steam Instrument Sterilizer	O/R	Castillo	\$	121,895				1-P	\$	325,000			\$	-		\$ -	
68	Operating Lights	O/R	Castillo	\$	141,630				1	\$	200,000		2		\$	20,000	\$ -	
69	Robotic Table	O/R	Castillo	\$	97,896				3					\$	100,000		\$ -	
70	Fracture Table/Spinal table	O/R	Castillo	\$	112,516				1	\$	120,000			\$	236,465		\$ -	
71	Stotz Bipolar											1	\$	28,510			\$ -	
72	Panda Infant Warmer	OB	Garcia						3					\$	35,000		\$ -	
73	Labor Bed 2 each)	OB	Garcia						3					\$	37,500		\$ -	
74	Guest pull-out bed/chairs x 11	OB	Garcia						3					\$	42,350		\$ -	
75	Centricity Upgrade	OB	Garcia									1	\$	28,000			\$ -	
76	Delivery Room Monitor Carts	OB	Garcia						3					\$	30,000		\$ 15,000	
77	Anesthesia Machines	O/R	Castillo															
78	Surgical Robotic system	O/R	Castillo							\$	1,900,000							
79																		
80	Omnicell Controlled Cabinet	Pharmacy	Lopez									1	\$	12,529				
81	IV Hood Replacement	Pharmacy	Lopez									2	\$	8,560				
82	Pharmaceutical Dispensing systems	Pharmacy	Lopez	\$	850,000													
83																		
84	Automatic Transfer Switch	Plant	Sanchez	\$	150,000				2				3		\$	460,000	\$ 260,000	
85	Floor Replacement due Poor Moisture sealant	Plant	Sanchez						4						\$	231,000	\$ -	
86	Cooling Tower Media	Plant	Sanchez											\$	65,000		\$ -	
87	ED Lighting	Plant	Sanchez											\$	20,000		\$ -	
88	EV Charging Stations	Plant	Sanchez											\$	65,000		\$ 65,000	
89	Trash Covers MOB	Plant	Sanchez															
90	Fire Alarm Upgrade	Plant	Sanchez												\$	225,000		
91	Parking Lot Repairs and Striping	Plant	Sanchez						4						\$	80,000	\$ 75,000	
92	Circulating Pump	Plant	Sanchez	\$	15,000				4	\$	-				\$	15,000	\$ 15,000	
93	Air Curtain Fly Fan x 4	Plant	Sanchez	\$	28,000				4	\$	-				\$	28,000	\$ 28,000	
94	Storage containers (3)	Plant	Sanchez						4						\$	-	\$ 75,000	
95	OR1 Med Gas panel Communication	Plant	Sanchez	\$	8,000				1	\$	8,000							
96	Medcial Gas Control panel replacement /OB	Plant	Sanchez	\$	20,000				1	\$	20,000		2		\$	33,000	\$ 20,000	
97	Sterile Processing Humidification System	Plant	Sanchez	\$	246,850				1	\$	250,000				\$	260,000	\$ -	
98	Package A/C Units (6each)	Plant	Sanchez						1	\$	25,000		1	\$	20,000	\$	24,000	
99	Infant Security System	Plant	Sanchez	\$	40,000					\$	-				\$	-	\$ -	
100																		
101	Total Lift Bed	Rehab	Kumaran														\$ 37,641	
102																		
103	Vapotherm (5 each)	RT	Caruso											\$	37,945			
104	BIPAP (3 each)	RT	Caruso							\$	-	1	\$	58,275				
105																		
106	Metal Detectors - OB and ER Entrances	Security	Hunter	\$	36,170				1	\$	40,000			\$	60,000			
108	Visitor Camera System	Security	Hunter	\$	-				4	\$	-				\$	38,000	\$ 38,000	
109	Panic Alarm	Security	Hunter						3					\$	20,000			
110	Total Requests			\$	7,268,285					\$	7,519,810			\$	9,764,123	\$	5,029,848	\$ 1,844,381
111	Less Donated Equipment			\$	(5,200,000)					\$	(6,415,000)			\$	(7,514,123)	\$	-	\$ -
112	Less Projected Donations			\$	(5,540,931)					\$	(150,000)			\$	(150,000)			\$ -
113	Less Property Tax Proceeds			\$	(1,854,000)					\$	(954,810)			\$	(2,100,000)			\$ -
114	Requests Over (Under) Funds			\$	(5,326,646)					\$	-			\$	-	\$	5,029,848	\$ 1,844,381

	A	B	C	D	E	F	G
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT						
2							
3	INCOME STATEMENT (DISTRICT ONLY)	ACTUAL 2022	ACTUAL 2023	PROJECTED 2024	BUDGET 2025	VARIANCE 2025 TO 2024 (see note)	VARIANCE PER CENTAGE (see note)
4	NET INCOME	2,354,583	3,621,279	5,799,472	11,892,051	6,092,579	105.1%
5	EBIDA	4,156,593	4,257,397	4,143,418	4,997,742	854,324	20.6%
6							
7	TOTAL OPERATING REVENUE	4,860,757	4,865,000	5,000,384	5,782,472	782,088	15.6%
8	OTHER REVENUE	47,928	0	15,198	50,203	35,005	230.3%
9	OPERATING TAX REVENUES	4,812,829	4,865,000	4,985,186	5,732,269	747,083	15.0%
10	OPERATING REVENUE TAX REVENUE MH.	2,752,857	2,560,821	2,963,928	3,306,435	342,507	11.6%
11	OTHER REVENUE PROP 13	1,753,245	2,276,487	1,854,000	2,250,834	396,834	21.4%
12	OTHER REVENUE ABX 163	306,727	27,692	167,258	175,000	7,742	4.6%
13							
14	TOTAL OPERATING EXPENSE	704,164	607,603	856,966	784,730	(72,236)	8.4%
15	PURCHASED SERVICES	471,639	362,688	582,040	353,612	(228,428)	39.2%
16	LEGAL FEES	188,256	112,687	328,428	100,000	(228,428)	69.6%
17	GROUND PURCHASED SERVICES	116,657	140,559	129,962	129,962	0	0.0%
18	PURCHASED SERVICES	166,726	109,442	123,650	123,650	0	0.0%
19							
20	OTHER EXPENSES	232,525	244,915	274,926	431,118	156,192	-56.8%
21	ELECTION FEES	172,000	207,375	0	215,000	215,000	100.0%
22	OTHER EXPENSES	60,525	37,540	274,926	216,118	(58,808)	21.4%
23							
24	NON-OPERATING REVENUE & EXPENSE	7,656,371	9,522,789	11,934,234	16,430,997	4,496,763	37.7%
25	OTHER NON-OPERATING REVENUE	263,661	1,591,039	4,405,998	7,691,312	3,285,314	74.6%
26	NON-OPERATING INTEREST INCOME	188,272	206,541	163,614	163,614	0	0.0%
27	NON-OPERATING DONATIONS/GAIN ON SALE	75,389	1,384,498	4,242,384	7,527,698	3,285,314	77.4%
28	NON-OPERATING TAX REVENUE MA.	7,392,710	7,931,750	7,528,236	8,739,685	1,211,449	16.1%
29							
30	TOTAL INTEREST & DEPRECIATION	9,458,381	10,158,907	10,278,180	9,536,688	(741,492)	7.2%
31	DEPRECIATION	5,131,231	5,023,124	5,912,652	5,171,160	(741,492)	12.5%
32	INTEREST & AMORTIZATION	4,327,150	5,135,783	4,365,528	4,365,528	0	0.0%
33							
34	Note: Favorable Variances are Shown as Positive and Unfavorable Variances are Shown as Negative						June 14, 2024

TAB D

TAB E

CONFLICT OF INTEREST CODE

OF THE

SAN GORGONIO MEMORIAL

HEALTHCARE DISTRICT

**CONFLICT OF INTEREST CODE
OF THE
SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT**

(Amended July ~~5, 2022~~, 2024)

The Political Reform Act (Government Code Section 81000, et seq.) requires state and local government agencies to adopt and promulgate conflict of interest codes. The Fair Political Practices Commission has adopted 2 Cal. Code of Regs. Section 18730 which contains the terms of a standard conflict of interest code which can be incorporated by reference in an agency's code. After public notice and hearing Section 18730 may be amended by the Fair Political Practices Commission to conform to amendments in the Political Reform Act. Therefore, the terms of 2 California Code of Regulations Section 18730 and any amendments to it duly adopted by the Fair Political Practices Commission are hereby incorporated by reference. This regulation (attached) and the attached Appendix designating officials and employees and establishing disclosure categories, shall constitute the conflict of interest code of the San Gorgonio Memorial Healthcare District (the "District")

All Officials and Designated Employees required to submit a statement of economic interests shall file their statements with the District Secretary as the District's Filing Officer within 30 days of taking office, annually, and within 30 days of leaving office. The Filing Officer shall make and retain a copy of all statements filed by Board of Directors and Chief Executive Officer, and forward the originals of such statements to the Clerk of the Board of Supervisors. The Filing Officer shall retain the originals of the statements of all other Designated Employees. The Filing Officer will make all retained statements available for public inspection and reproduction during regular business hours. (Gov. Code Section 81008.)

CONFLICT OF INTEREST CODE
OF THE
SAN GORGONIO MEMORIAL
HEALTHCARE DISTRICT

EXHIBIT “A”

OFFICIALS WHO MANAGE PUBLIC INVESTMENTS

District Officials who manage public investments, as defined by 2 Cal. Code of Regs. § 18701(b), are NOT subject to the District’s Code, but are subject to the disclosure requirements of the Act. (Government Code Section 87200 et seq.). [Regs. § 18730(b)(3)] These positions are listed here for informational purposes only.

It has been determined that the positions listed below are officials who manage public investments¹:

Board of Directors

Chief Executive Officer

Chief Financial Officer

Financial Consultants

¹ Individuals holding one of the above-listed positions may contact the FPPC for assistance or written advice regarding their filing obligations if they believe that their position has been categorized incorrectly. The FPPC makes the final determination whether a position is covered by § 87200.

DESIGNATED POSITIONS

GOVERNED BY THE CONFLICT OF INTEREST CODE

<u>DESIGNATED EMPLOYEES'</u> <u>TITLE OR FUNCTION</u>	<u>DISCLOSURE CATEGORIES</u> <u>ASSIGNED</u>
Hospital Chief Executive Officer	1, 2
Hospital Chief Financial Officer	1, 2
General Counsel	1, 2
Chief Nursing Officer	4
Chief Human Resources Officer	4
<u>VP, Ancillary and Support Services</u>	<u>4</u>
Chief Medical Officer	4
Compliance Officer	5
Controller	4
Director, Behavioral Health Center	5
Director, Case Management	5
Director, Clinical Laboratory	5
Director, Construction Management	4
<u>Director, Corporate Compliance and Privacy</u>	<u>5</u>
Director, Diagnostic Imaging	5
Director, Dietary Services	5
Director, Emergency Department Nurse	5
Director, Environmental Safety/Security/Emergency Preparedness	5
Director, Environmental Services	5
Director, Foundation	5
Director, ICU/DOU	5
Director, Infection <u>Prevention and Control</u>	5
Director, Information Technology	5

DESIGNATED EMPLOYEES'
TITLE OR FUNCTION

DISCLOSURE CATEGORIES
ASSIGNED

Director, Materials Management	4
Director, Medical Staff Services	5
Director, Medical Surgical <u>and Case Management</u>	5
Director, Nursing Resources & Cardio Pulmonary Services	5
Director, Obstetrical/GYN Services	5
Director, Patient Access	5
Director, Performance Improvement	5
Director, Pharmacy	5
Director, Physical Therapy	5
Director, Plant Operations	5
Director, Surgical Services	5

MEMBERS OF BOARDS,
COMMITTEES AND COMMISSIONS

Healthcare District & Hospital Board of Directors	1, 2
Measure A Community Oversight Committee	3, 5
Measure H Community Oversight Committee	3, 5

Consultant²

² Consultants shall be included in the list of Designated Employees and shall disclose pursuant to the broadest disclosure category in this Code subject to the following limitation:

The Chief Executive Officer may determine in writing that a particular consultant, although a “designated position,” is hired to perform a range of duties that are limited in scope and thus is not required to fully comply with the disclosure requirements described in this Section. Such written determination shall include a description of the consultant’s duties and, based upon that description, a statement of the extent of disclosure requirements. The Chief Executive Officer’s determination is a public record and shall be retained for public inspection in the same manner and location as this Conflict of Interest Code.

EXHIBIT "B"

DISCLOSURE CATEGORIES

The disclosure categories listed below identify the types of investments, business entities, sources of income, including gifts, loans and travel payments, or real property which the Designated Employee must disclose for each disclosure category to which he or she is assigned.

Category 1: All investments and business positions in business entities, and sources of income, including gifts, loans and travel payments, that are located in, do business in, or own real property within the jurisdiction of the District.

Category 2: All interests in real property which is located in whole or in part within, or not more than two (2) miles outside, the jurisdiction of the District.

Category 3: All investments and business positions, and sources of income, including gifts, loans and travel payments that are engaged in land development, construction or the acquisition or sale of real property within the jurisdiction of the District.

Category 4: All investments and business positions, and sources of income, including gifts, loans and travel payments, that provide services, supplies, materials, machinery, vehicles or equipment of a type purchased or leased by the District.

Category 5: All investments and business positions, and sources of income, including gifts, loans and travel payments, that provide services, supplies, materials, machinery, vehicles or equipment of a type purchased or leased by the Designated Employee's department, unit or division.

RESOLUTION NO. 2024-03

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE SAN GORGONIO
MEMORIAL HEALTHCARE DISTRICT AMENDING THE CONFLICT OF
INTEREST CODE PURSUANT TO THE POLITICAL REFORM ACT OF 1974**

WHEREAS, the Legislature of the State of California enacted the Political Reform Act of 1974, Government Code Section 81000 et seq. (the “Act”), which contains provisions relating to conflicts of interest which potentially affect all officers, employees, and consultants of the San Gorgonio Memorial Healthcare District (the “District”), and requires all public agencies to adopt and promulgate a conflict of interest code; and

WHEREAS, the Board of Directors adopted a Conflict of Interest Code (the “Code”) in compliance with the Act; and

WHEREAS, subsequent changed circumstances within the District have made it advisable and necessary pursuant to Sections 87306 and 87307 of the Act to amend and update the District’s Code; and

WHEREAS, notice of the time and place of a public meeting on, and of consideration by the Board of Directors of the District, the proposed amended Code was provided each affected designated employee and publicly posted for review at the offices of the District; and

WHEREAS, a public meeting was held upon the proposed amended Code at a regular meeting of the Board of Directors on July 2, 2024, at which all present were given an opportunity to be heard on the proposed amended Code.

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of the San Gorgonio Memorial Healthcare District that the Board of Directors does hereby adopt the proposed amended Conflict of Interest Code, a copy of which is attached hereto and shall be on file with the Executive Assistant and available to the public for inspection and copying during regular business hours;

BE IT FURTHER RESOLVED that the said amended Code shall be submitted to the Board of Supervisors of the County of Riverside for approval and said Code shall become effective 30 days after the Board of Supervisors approves the proposed amended Code as submitted.

APPROVED AND ADOPTED this 2nd day of July 2024.

Shannon McDougall, Chair, Board of Directors
San Gorgonio Memorial Healthcare District

ATTEST:

Lanny Swerdlow, Vice Chair, Board of Directors
San Gorgonio Memorial Healthcare District

TAB F

**SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT
RESOLUTION NO. 2024-04**

BE IT RESOLVED, that at a regular board meeting held July 2, 2024, by the Board of Directors of San Gorgonio Memorial Healthcare District, a California Non-profit Public Benefit-Corporation, that Patricia Brown, Irwin Reeves, Joe Dotan, Lynn Baldi, Estelle Lewis, and Ludwig Cibelli, are hereby removed as an authorized signers with all financial institutions. Authorized signers for all financial institutions shall be: Shannon McDougall, Chair of the Healthcare District Board of Directors; Steven Barron, Chief Executive Officer of the Hospital, and Angela Brady, Chief Nursing Officer of the Hospital are authorized to enter into deposit accounts, transfer funds, brokerage, invest, manage cash, deposit service agreements and sign on behalf of the corporate with financial institutions. They may designate from time to time who is authorized to withdraw funds, initiate payment orders and otherwise give instructions on behalf of the Healthcare District with respect to its deposit and brokerage accounts. Two (2) signatures are required for withdrawal amounts in excess of \$10,000.

AND BE IT FURTHER RESOLVED, that this authorization is in addition to any other authorizations in effect and shall remain in full force until written notice of its revocation is delivered to said financial institutions.

Signed: _____ DATE: July 2, 2024
Ronald Rader, Secretary
San Gorgonio Memorial Healthcare District Board of Directors

TAB G

INCOME STATEMENT MTD & YTD May 2024

San Gorgonio Memorial Healthcare District

Monthly				Year to Date				
May 24 Act	May 24 RBD	Variance	Var		Act 2024	ReviseBD24	Variance	Var
-	-	-	0.00%	OTHER REVENUE	1,523	-	1,523	0
601	2,500	(1,899)	-76%	OTHER REVENUE - OTHER	10,525	27,500	(16,975)	-61.73%
401,494	409,827	(8,333)	-2%	OPERATING TAX REVENUES	4,583,692	4,508,097	75,595	1.68%
402,095	412,327	(10,232)	-2%	OTHER OPERATING REVENUE	4,595,740	4,535,597	60,143	1.33%
402,095	412,327	(20,464)	-5%	NET SERVICE REVENUE	4,595,740	4,535,597	60,143	1.33%
				PROFESSIONAL FEES				
-	4,894	(4,894)	-100%	601923 LEGAL FEES	321,171	193,846	(127,325)	-65.68%
3,541	9,954	(6,413)	-64%	601962 GROUND PURCHASED SERVICES	115,434	109,494	5,940	5.42%
-	10,611	-	0%	601969 PURCHASED SERVICES	85,024	116,721	(31,697)	-27.16%
3,541	25,459	(21,918)	-86%	PURCHASED SERVICES	521,629	420,061	(153,082)	-36.44%
-	-	-	0%	SUPPLY EXPENSE	39,205	-	(39,205)	0
58	3,199	(3,141)	-98%	OTHER EXPENSES	196,493	35,189	(161,304)	-458.39%
58	3,199	(3,141)	-98%	SUPPLIES & OTHER EXPENSES	235,698	35,189	(200,509)	-569.81%
3,599	28,658	(25,059)	-87%	TOTAL OPERATING EXPENSE	757,327	455,250	(302,077)	-66.35%
3,599	28,658	(25,059)	-87%	TOTAL OPERATING EXPENSE	757,327	455,250	(302,077)	-66.35%
398,496	383,669	(14,827)	-4%	EBIDA	3,838,413	4,080,347	241,934	5.93%
				NON-OPERATING REVENUE & EXPENSE				
24,118	1,419,511	(1,395,393)	0%	OTHER NON-OPERATING REVENUE	4,189,472	6,239,421	(2,049,949)	-32.85%
627,353	627,353	-	0%	NON-OPERATING TAX REVENUE	6,900,883	6,900,883	-	0.00%
651,471	2,046,864	(1,395,393)	-68%	NON-OPERATING REVENUE & EXPENSE	11,090,355	13,140,304	(2,049,949)	0.01%
492,721	626,684	133,963	21%	DEPRECIATION	5,419,931	5,788,424	(368,493)	2.22%
363,794	387,611	23,817	6%	INTEREST & AMORTIZATION	4,001,734	4,263,721	(261,987)	2.22%
856,515	1,014,295	157,780	16%	TOTAL INTEREST & DEPRECIATION	9,421,665	10,052,145	(630,480)	3.92%
193,452	1,416,238	(1,222,786)	-86%	NET INCOME	5,507,103	7,168,506	5,801,370	-0.04%

Balance Sheet DISTRICT -May 2024

DISTRICT - Monthly	Jun 23 Act	March 24 Act	April 24 Act	May 24 Act	Var Apr 24 Act	Var%
NET BALANCE SHEET	30,887	4	2	5	-2	-40.00 %
TOTAL ASSETS	121,223,805	137,061,921	139,074,787	138,036,975	-1,037,812	-0.75 %
CURRENT ASSETS	5,448,747	10,671,721	11,032,078	5,676,781	-5,355,297	-94.34 %
CASH & EQUIVALENTS	2,937,644	8,025,919	4,461,403	3,210,112	-1,251,291	-38.98 %
OPERATING CASH	2,937,644	8,025,919	4,461,403	3,210,112	-1,251,291	-38.98 %
OTHER CURRENT ASSETS	2,511,103	2,645,802	6,570,675	2,466,669	-4,104,006	-166.38 %
TAXES RECEIVABLE	1,724,469	1,859,168	5,784,041	1,680,035	-4,104,006	-244.28 %
MISC RECEIVABLE	660,465	660,465	660,465	660,465	0	0.00 %
PREPAID EXPENSES	126,169	126,169	126,169	126,169	0	0.00 %
ASSETS WHICH USE IS LIMITED	9,097,642	16,347,383	10,583,684	14,178,230	3,594,546	25.35 %
INTERNALLY DESIGNATED	9,097,642	16,347,383	10,583,684	14,178,230	3,594,546	25.35 %
NET PROPERTY, PLANT, AND EQUIPMENT	71,309,907	70,420,682	71,158,724	71,442,461	283,737	0.40 %
PROPERTY, PLANT, AND EQUIPMENT	164,549,415	168,094,679	169,325,442	170,101,900	776,458	0.46 %
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	27,119,507	28,931,911	29,539,796	29,577,061	37,265	0.13 %
CONSTRUCTION IN PROGRESS	3,320,235	5,053,095	5,675,973	6,415,166	739,193	11.52 %
LESS: ACCUMULATED DEPRECIATION	-93,239,508	-97,673,997	-98,166,718	-98,659,439	-492,721	0.50 %
OTHER ASSETS	35,367,509	39,622,135	46,300,301	46,739,503	439,202	0.94 %
INVESTMENT IN AFFILIATE	34,802,583	39,080,510	45,761,264	46,203,055	441,791	0.96 %
BONDS	564,926	541,625	539,037	536,448	-2,589	-0.48 %
TOTAL LIABILITIES & FUND BALANCE	121,192,918	137,061,919	139,074,781	138,036,970	-1,037,811	-0.75 %
TOTAL LIABILITIES	115,631,631	126,319,778	128,168,956	126,937,693	-1,231,263	-0.97 %
CURRENT LIABILITES	1,951,521	2,959,889	7,947,425	6,729,520	-1,217,905	-18.10 %
ACCOUNTS PAYABLE	341,741	229,100	1,147,387	-431,454	-1,578,841	365.93 %
OTHER CURRENT LIABILITIES	1,609,780	2,730,789	6,800,038	7,160,974	360,936	5.04 %
ACCRUED INTEREST PAYABLE	1,609,780	2,730,789	6,800,038	7,160,974	360,936	5.04 %
LONG TERM LIABILITIES	113,680,110	123,359,889	120,221,531	120,208,173	-13,358	-0.01 %
NOTES PAYABLE	113,680,110	123,359,889	120,221,531	120,208,173	-13,358	-0.01 %
NET ASSETS	5,561,287	10,742,141	10,905,825	11,099,277	193,452	1.74 %
NET ASSETS - UNRESTRICTED	5,561,287	10,742,141	10,905,825	11,099,277	193,452	1.74 %
NET ASSETS - BEGINNING OF PERIOD	844,181	5,592,174	5,592,174	5,592,174	0	0.00 %
CURRENT YEAR NET GAIN/(LOSS)	4,717,106	5,149,967	5,313,651	5,507,103	193,452	3.51 %

TAB H

San Geronio Memorial Healthcare District

Measure A analysis of Project Funds Paid by General Category

5/31/2024

	Measure A Project-to-Date	Current Month-Measure A 5/31/2024	District Funds 5/31/2024
Computer Equipment	\$ 5,311,028	\$ -	
Radiology Equipment	\$ 1,526,641	\$ -	
Legal/Regulatory/Bonds	\$ 3,143,910	\$ -	
Architectural (HDR)-ALL PHASE 1 PROJ	\$ 11,756,851	\$ -	
Construction Management-ALL PHASE 1	\$ 12,875,601	\$ -	
Contractors 1-A (HELIPAD/COOLING TOW	\$ 7,814,103	\$ -	
Other	\$ 3,021,460	\$ -	
Contractors 1-B (CENTRAL PLANT)	\$ 20,800,201	\$ -	
Contractors 1-C (ED/ICU)	\$ 28,157,355	\$ -	
Contractors 1-E Dietary Remodel	\$ 5,225,946	\$ -	
Contractors 1-Medley Project	\$ 4,796,620	\$ -	
Previous Expenditures for Measure A-Phase 1	\$ 104,429,717	\$ -	
Contractors, Architect, Mgmt - 2-A Patient Facility prior to 9/01/14	\$ 7,015,575		
Expenditures prior to 9/01/14 all phases	\$ 111,445,293		
Project expenditures using District Funds			
TCU Conversion 0001	\$0.00	\$0.00	\$ 108,612
Medical Records Conversion 0004	\$0.00	\$0.00	\$ 13,618
Pharmacy Conversion 0005	\$0.00	\$0.00	\$ 50,447
CIP Patient Care Facility-0008	\$0.00	\$0.00	\$ 2,100
Project Expenditures using Measure A funds			
TCU Conversion 0001	\$ 539,852.53	\$0.00	
Medical Records Conversion 0004	\$0.00	\$0.00	
Pharmacy Conversion 0005	\$0.00	\$0.00	
CIP Patient Care Facility-0008	\$1,338,416.28	\$0.00	\$0.00
OR Electrical Conversion	\$0.00	\$0.00	\$39,751.00
Other Construction Costs	\$150,247.92	\$0.00	
Other Non-Construction Costs	\$470,258.06	\$270,691.67	\$5,955.22
Total Expenditures	\$ 113,944,067	\$ 270,692	\$ 220,483

Measure A Project General Obligation Funds
Statement of Funds Flows

PROCEEDS SUMMARY:	
Initial Project Fund transfer from sale of General Obligation Bonds 2006 A to FSA	25,200,349
Initial Project Fund Transfer from sale of General Obligation Bonds 2006 B (08/08,	24,876,964.91
Initial Project Fund from sale of General Obligation Bonds 2006 C (08/14/2009)	57,800,000
Planholder Checks project to date and refunds for overpayments	24,072
HDR Returned payments	139,979
Initial Proceeds	108,041,365
<u>Investment Income</u>	
FSA Inc. (Series 2006 A)	1,762,060
BB&T GIC (Series 2008 B)	1,461,176
Bank of Hemet Series A	1,001
City National Money Market	81
GE Capital (Series 2009 C)	2,638,823
Security Bank Money Market	39,653
Interest Income SUBTOTAL	5,902,795
Total Proceeds Available for Measure A:	\$ 113,944,159

Projected Interest by end of Project>	5,912,351
Total Projected Proceeds Available for Measure A:	\$ 113,953,716

FUND FLOWS:		
Total Measure A Funds Initial Proceeds (from above)		108,041,364.81
Add:	<u>Rate</u>	<u>Interest Income</u>
FSA Inc. (Series 2006 A), FY 07	5.27%	1,030,536.43
FSA Inc. (Series 2006 A), FY 08	5.27%	635,706.73
FSA Inc. (Series 2006 A), FY 09	5.27%	95,817.32
BB&T GIC (Series 2008 B) FY 09	4.94%	680,384
BB&T GIC (Series 2008 B) FY 10	4.94%	648,151
BB&T GIC (Series 2008 B) FY 11	4.94%	132,640
GE Capital (Series 2009 C) FY 10	1.75%	688,722
GE Capital (Series 2009 C) FY 11	1.75%	956,529
GE Capital (Series 2009 C) FY 12	1.75%	591,104.24
GE Capital (Series 2009 C) FY 13	1.75%	293,402.39
GE Capital (Series 2009 C) FY 14	1.75%	109,065.59
Bank of Hemet Series A		1,001
City National Money Market		81
Security Bank Construction funds		1,126
Security Bank Construction Money Market		38,527
Total Interest Income earned	\$	5,902,795
Project Expenditures (from above)	\$	113,944,067
Total Consolidated Funds available:	\$	92.00
	spent to date	100%

MEASURE A BALANCES:		
	Balances as of 05/31/2024	
Bank of Hemet Series A	4310	-
Security Bank of California Construction F1	1812	92
Security Bank of California Money Market	2509	-
Total Balances	\$	92
	VARIANCE	\$ (0.00)

TAB I

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

	Title	Policy Area	Owner	Workflow Approval
1	Administration of Antibiotics	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
2	Admission of Newborn Delivered Outside of the Women's Center	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
3	All-Hazards Emergency Operations Plan	Emergency Preparedness	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
4	Anticoagulation Protocol for Heparin Infusion Therapy	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
5	California Safe Surrender Law (section 1255)	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
6	Care of Patient After Normal Vaginal Delivery	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
7	Care of Patient During Vaginal Delivery	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
8	Care of The Newborn	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
9	Cleaning and Disinfecting Direct Compounding Area	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
10	Compliance with Food Law	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
11	Compressed Gas Cylinders Handling, Storage and Transport Safety	Environment of Care	Sanchez, Salvador: Director of Engineering	Ariel Whitley for Hospital Board of Directors
12	Consultation from an Intensive Care Nursery	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
13	Continuing Education Courses	Education	Angel, Katy: Clinical Nurse Educator	Ariel Whitley for Hospital Board of Directors
14	Diet Orders	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
15	Dietary Associate Meal Service and Theft	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors

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

	Title	Policy Area	Owner	Workflow Approval
16	Dietary Department In-service Training	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
17	Dietary Department New Hire Orientation	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
18	Dietary Department Use of Gloves	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
19	Dietary Patient Meal Service Frequency and Accommodations	Dietary	Kielhold, Jean: Dietician	Ariel Whitley for Hospital Board of Directors
20	Disaster Tube Feeding Procedure	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
21	Drug Recalls	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
22	Employee Health Communicable Disease Exposure Guidelines	Employee Health	Lagrimas, Nina: Employee Health Coordinator	Ariel Whitley for Hospital Board of Directors
23	Environmental Monitoring of Primary Engineering Control	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
24	Facilities Systems Risk Assessment	Facilities	Sanchez, Salvador: Director of Engineering	Ariel Whitley for Hospital Board of Directors
25	Fire Prevention in an Oxygen Enriched Environment	Environment of Care	Sanchez, Salvador: Director of Engineering	Ariel Whitley for Hospital Board of Directors
26	Group B Streptococcal Prevention in Newborn	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
27	Guidelines for Kitchen Sanitation	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
28	In Transit Management of Medications	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
29	Infant Blood Gas Capillary, Venous Blood Gas, and Cord pH	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
30	Inpatient Pharmacy Anticoagulation Service – Warfarin Therapy	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors

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

	Title	Policy Area	Owner	Workflow Approval
31	Intravenous Vancomycin Adult Dosing and Monitoring Protocol	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
32	Legionella / Water-Borne Pathogen Management Program	Facilities	Sanchez, Salvador: Director of Engineering	Ariel Whitley for Hospital Board of Directors
33	Lexiscan Stress Test	EKG Echo	Garewal, Cheri: Echo Technician	Ariel Whitley for Hospital Board of Directors
34	Master Formula for Pharmacy Compounding	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
35	Medication Administration	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
36	Medication Labeling and Order Requirements	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
37	Medication Storage	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
38	Newborn Car Seat	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
39	Newborn Security	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
40	Non Medicated Intravenous Solutions: Storage and Distribution	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
41	Notice of Privacy Practices	HIPAA Privacy	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
42	Ophthalmic Prophylaxis of the Newborn	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
43	Patient Grievance & Complaint Policy	Administration	Brady, Angela: Chief Nursing Executive	Ariel Whitley for Hospital Board of Directors
44	Patient Self-Administration of Own Medication and Medication Delivery Devices	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
45	Pharmacy Department Statement of Objective and Philosophy	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors

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

	Title	Policy Area	Owner	Workflow Approval
46	Pharmacy Medication Refrigerator & Freezer Temperature Recording	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
47	Pharmacy Renal Dose Adjustment Protocol	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
48	Pharmacy Sterile Compounding Garbing	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
49	Piperacillin-Tazobactam (Zosyn®) Extended Infusion	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
50	Preparation of the Patient for Cesarean Section	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
51	Provider Orders: Transcribing, Acknowledging and Processing	Nursing	Freude, Gayle: Director Med/Surg/CM and SW and P&P Chairperson	Ariel Whitley for Hospital Board of Directors
52	Rapid Fetal Fibronectin (fFN)Test	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
53	Receiving Supplies in Dietary Department	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
54	Required Testing Every 6 Months in Addition to Daily Quality Control	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
55	Security of Pharmacy Department	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
56	SGMH Workplace Violence Prevention Program	Security	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
57	Sterile Compounding Personnel Training and Evaluation	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
58	Sterile Processing - Care and Maintenance of Sterilizers	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
59	Sterile Processing - Chemical Indicators For Sterrad Sterilization	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors

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

	Title	Policy Area	Owner	Workflow Approval
60	Sterile Processing - Event Related Sterility/Shelf Life	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
61	Sterile Processing - Immediate Use Steam Sterilization	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
62	Sterile Processing - Infection Surveillance	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
63	Sterile Processing - Minimally Invasive Scopes /Lens/Cameras/Cords	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
64	Sterile Processing - Monitoring Steam Sterilizer Function	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
65	Sterile Processing - Preparation and Assembly of Surgical Instrumentation	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
66	Sterile Processing - Single Use Items	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
67	Sterile Processing - Steam Sterilization of Surgical Instruments and Patient Care Devices	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
68	Sterile Processing - Steam Sterilization Quality Control and Sterility Assurance	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
69	Sterile Processing - Sterilizer Control Number	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
70	Stress Echocardiogram	EKG Echo	Garewal, Cheri: Echo Technician	Ariel Whitley for Hospital Board of Directors
71	Surgical Services - RN First Assistant (RNFA)	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
72	Surgical Services - Electrosurgery Unit (ESU) Use & Safety Precautions	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
73	Surgical Services - Labeling Medications and Solutions On and Off the Sterile Field	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors
74	Surgical Services - Procedure/Surgery Scheduling	Surgical Services	Castillo, Yubitza: Interim Director of Surgical Services	Ariel Whitley for Hospital Board of Directors

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

	Title	Policy Area	Owner	Workflow Approval
75	The Women's Center Dress Code	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
76	The Women's Center Patient Identification	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
77	Use of Investigational Medications	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
78	Use of Patient's Home Medications	Pharmacy	Lopez, Jose: Director Pharmacy	Ariel Whitley for Hospital Board of Directors
79	Women's Center Out-Patients	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors