



AGENDA

REGULAR MEETING OF THE BOARD OF DIRECTORS

Tuesday, July 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
- June 4, 2024, Regular Meeting A

NEW BUSINESS

- IV. Hospital Board Chair Monthly Report S. DiBiasi verbal
- V. CEO Monthly Report S. Barron verbal

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

- | | | | |
|------------|--|-----------------------------------|---------------------|
| VI. | Bi-Monthly Patient Care Services Report | A. Brady | B |
| VII. | Quarterly Foundation Report | V. Hunter | C |
| VIII. | July, August, & September Board/Committee Meeting Calendars | S. DiBiasi | D |
| IX. | Committee Reports: | | |
| | <ul style="list-style-type: none"> • Hospital Board Executive Committee <ul style="list-style-type: none"> ○ June 25, 2024, regular meeting minutes • Finance Committee <ul style="list-style-type: none"> ○ June 25, 2024, regular meeting minutes * Proposed Action – Approve May 2024 Financial Statement (Unaudited) <ul style="list-style-type: none"> ▪ ROLL CALL ○ * Proposed Action – Recommend Approval to the Healthcare District Board of the FYE 2025 Operating Budget and Capital Budgets
 (approval recommended by Finance Committee 6/25/2024) <ul style="list-style-type: none"> ▪ ROLL CALL | S. DiBiasi/
S. Barron | E

F

G |
| X. | <ul style="list-style-type: none"> * Proposed Action – Recommend Approval to the Healthcare District Board of Policies and Procedures <ul style="list-style-type: none"> ▪ ROLL CALL | Staff | H |
| XI. | Chief of Staff Report – Recommendations of the Medical Executive Committee – Informational | R. Sahagian, MD
Chief of Staff | I |
| XII. | Community Benefit events/Announcements/
and newspaper articles | S. DiBiasi | J |
| *** | ITEMS FOR DISCUSSION/APPROVAL IN CLOSED SESSION | S. DiBiasi | |
| | <ul style="list-style-type: none"> ➤ Proposed Action - Recommend approval to Healthcare District Board - Medical Staff Credentialing
<i>(Health & Safety Code §32155; and Evidence Code §1157)</i> ➤ Receive Quarterly Environment of Care/Life Safety/Utility Management Report
<i>(Health & Safety Code §32155)</i> ➤ Telephone conference with legal counsel – Pending litigation
<i>(Government Code § 54956.9(d)(1))</i>
<i>Desert Anesthesia Consultants, LP v. San Geronio Memorial Hospital, et al. (Case No. RIC2000609)</i> | | |
| XIII. | ADJOURN TO CLOSED SESSION | | |

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

*** 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

XIV. Future Agenda Items

XV. **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 June 28, 2024, 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 June 28, 2024



Ariel Whitley, Executive Assistant

TAB A

REGULAR MEETING OF THE
SAN GORGONIO MEMORIAL HOSPITAL
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: Susan DiBiasi (Chair), Perry Goldstein, Shannon McDougall, Darrell Petersen, Ron Rader, Steve Rutledge, Randal Stevens, Lanny Swerdlow

Members Absent: Dennis Tankersley

Required Staff: Steve Barron (CEO), Raffi Sahagian, MD (Chief of Staff), Daniel Heckathorne (CFO), Angie Brady (CNE), John Peleuses (VP Ancillary and Support Services), Ariel Whitley (EA/Director of Comp. and Privacy), Lani Webb (Administrative Assistant), Connie Cornwall (HIM Manager)

AGENDA ITEM		ACTION / FOLLOW-UP
Call To Order	Chair, Susan DiBiasi, called the meeting to order at 4:02 pm.	
Public Comment	No public comment.	
OLD BUSINESS		
Proposed Action - Approve Minutes	Chair, Susan DiBiasi, asked for any changes or corrections to the minutes of the May 7, 2024, regular meeting.	The minutes of the May 7, 2024, regular meeting will stand correct as presented.
May 7, 2024, regular meeting.	There we none.	
NEW BUSINESS		
Hospital Board Chair Monthly Report	Chair DiBiasi reported that we will be presenting our capital and operating budget at the June Finance Committee Meeting.	
CEO Monthly Report	Steve Barron, CEO, reported that the California State Treasurer's office toured the hospital and met with executive leadership. A follow-up meeting will be scheduled. Steve also reported that the hospital has been busy.	
May, June, & July Board/Committee meeting calendars	Calendars for June, July, and August, were included on the board tablets.	

AGENDA ITEM		ACTION / FOLLOW-UP																				
<p>Proposed Action – Reappoint existing Board members to a four-year term expiring June 30, 2028.</p>	<p>Chair DiBiasi reported that two existing Hospital board members terms were expiring as of June 30, 2024, and both were eligible for reappointment to serve a full four-year term.</p> <p>The two Board members are Susan DiBiasi and Darrell Petersen.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 558 1253 737"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Yes</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>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Rutledge/Stevens), the SGMH Board of Directors approved the reappointment of existing board members Susan DiBiasi and Darrell Petersen to a four-year term, expiring June 30, 2028.</p>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Absent	Motion carried.																				
<p>Quarterly Construction Update</p>	<p>John Peleuses, Vice President of Ancillary and Support Services, gave a detailed report about current construction projects and the status of each.</p>																					
<p>COMMITTEE REPORTS:</p>																						
<p>Hospital Board Executive Committee</p>	<p>The minutes from the May 15, 2024, Hospital Board Executive Committee meeting was included on the board tablet as informational.</p>																					
<p>Finance Committee</p> <p>Proposed Action – Approve April 2024 Financial Statement (Unaudited).</p>	<p>Dan Heckathorne, CFO, reviewed the Executive Summary of the April 2024 Financial report which was included on the board tablet. A copy of the Finance Committee’s May 28, 2024, meeting minutes were also included on the board tablet.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 1266 1253 1444"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Yes</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>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Stevens/Rader), the SGMH Board of Directors approved the April 2024 Financial Statement as presented.</p>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Absent	Motion carried.																				
<p>Proposed Action – Approve Interoperability Antimicrobial Use and Resistance (AUR) Contract</p>	<p>CMS has put out a new federal (unfunded mandated) requirement for Hospitals (and others) to install a system that provides for the bidirectional electronic exchange of antimicrobial use and resistance (AUR) for interoperability.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 1703 1253 1881"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Yes</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>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Petersen/McDougall) Board of Directors voted to approve Interoperability Antimicrobial Use and Resistance (AUR) Contract as presented.</p>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Absent	Motion carried.																				

AGENDA ITEM		ACTION / FOLLOW-UP																				
<p>Proposed Action – Recommend Approval to the Healthcare District Board</p> <ul style="list-style-type: none"> • Annual Insurance Renewals 	<p>The Annual Insurance Renewals were presented to the Board by Dan Heckathorne, CFO. The Insurance Renewals include:</p> <ul style="list-style-type: none"> • Professional and General Liability • Directors and Officers Liability • Employment Practices Liability • Auto Liability • Workers’ Compensation <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 617 1253 793"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Yes</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>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Rader/Swerdlow), the SGMH Board of Directors voted to recommend approval of the Annual Insurance Renewals to the Healthcare District Board.</p>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Absent	Motion carried.																				
<p>Proposed Action – Recommend Approval to the Healthcare District Board of Policies and Procedures</p>	<p>There were five (5) policies and procedures presented for recommended approval to the Healthcare District Board.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 999 1253 1176"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Goldstein</td> <td>Yes</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>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Absent</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Swerdlow	Yes	Tankersley	Absent	Motion carried.		<p>M.S.C., (Rutledge/Swerdlow) , the SGMH Board of Directors voted to recommend approval to the Healthcare District board of the policies and procedures as submitted.</p>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Absent	Motion carried.																				
<p>Chief of Staff Report</p> <p>Recommendations of the Medical Executive Committee – Informational</p>	<p>A discussion was held regarding the recommendations of the Medical Executive Committee. The report was provided as informational.</p>																					
<p>Community Benefit events/Announcements/and newspaper articles</p>	<ul style="list-style-type: none"> • None 																					
<p>Future Agenda Items</p>	<ul style="list-style-type: none"> • None 																					
<p>Adjourn to Closed Session</p>	<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"> ➤ Recommend approval to the Healthcare District Board – Medical Staff Credentialing ➤ Receive Quarterly Infection Prevention and Control Report 																					

AGENDA ITEM		ACTION / FOLLOW-UP
	The meeting adjourned to Closed Session at 5:10 pm.	
Reconvene to Open Session	<p>The meeting adjourned from closed session at 5:34 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"> ➤ Recommended approval to the Healthcare District Board – Medical Staff Credentialing ➤ Received Quarterly Infection Prevention and Control Report 	
Adjourn	The meeting was adjourned at 5:35 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



Bi-Monthly Patient Care Services Report

The bimonthly patient services report aims to provide a comprehensive overview of the nursing services rendered to patients at SGMH during the months of May & June 2024.

1. Key Metrics:

- Total number of patients served in ED up until June 18, 2024: 5,921
- Ambulance Traffic: 17.9%
- Admitted: 510 (8.6%)

2. Patient Satisfaction:

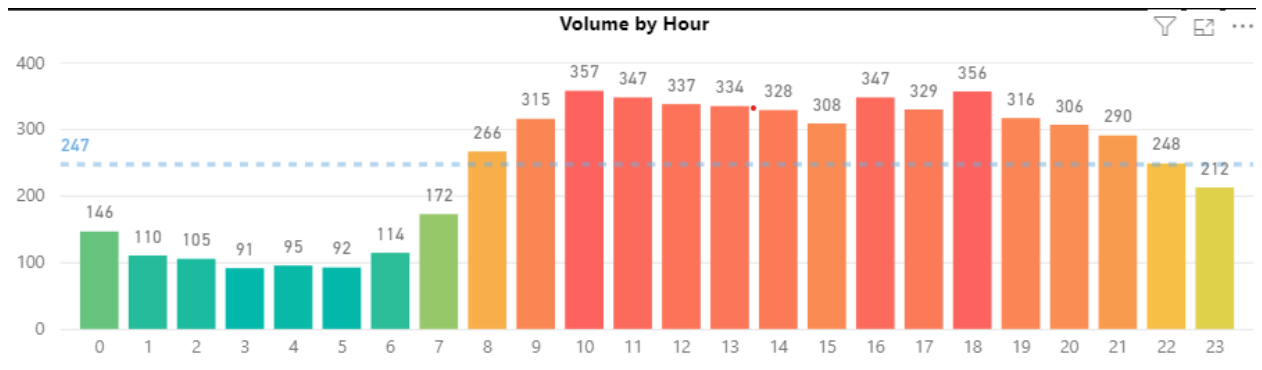
- Implemented a call back system for patients to make sure they have follow-up appointments.
- Physician and APPs are following up on concerns through Auscura.
- Ann Lee address patient complaints immediately and provides service recovery.

3. Clinical Outcomes:

- Mortality rate: 1.6 % -----Benchmark 5% (All DNR patients)
- Adverse events: 0, RCA-2, Beta Cases- 3
- 4 CDPH investigations, pending (most likely unfounded)

4. Operational Efficiency:

- Acuity & Volume per hour in ED



- Resource utilization:
 - Staffing levels: Due to high ED and inpatient volume we have had to use registry for Med/Surg and ED. We have 1 OB Traveler.
 - Equipment usage: Nuclear Medicine will be down for 3 weeks starting 6/17.

5. Financial Performance:

- ED and hospital census has been over budget.

6. Quality and Compliance:

- Quality improvement initiatives:
 - Hospital Compare 4 Star.
 - P4P and QIP efforts continue.
 - Validation for 3 Beta Heart Domains- Culture of Safety re-validation, Care for the Caregiver, and Communication & Transparency.

7. Challenges and Opportunities:

- Challenges faced: Increased holding of case management and admitted patients in ED.
- Opportunities for improvement:
 - 1) Signed contract with Adex international travel nurse agency to prepare for increased admissions for stroke patients and current holding issues. Interviewing candidates.
 - 2) Decrease inpatient discharge times.

8. Growth Development/Regulatory:

- A secondary survey will be completed by REMSA (Riverside County EMS agency) to be a stroke receiving facility in August.
- CIHQ re-accreditation was completed.
- Contract for One Legacy Center of Excellence is being reviewed.
- Surgical and Internal Medicine Medical Students from UCR will be rotating with us.
- ED residents from Eisenhower will be rotating starting October 2024. We will also be onboarding Neurology residents in June 2025. This will increase our FTE's for GME CMS payments.
- Neurosurgery will start in July from LLUMC.
- Surgery block time has increased with new ortho group and OB/GYN.
- SAC Health Mobile Neurology Clinic will be on-site once a month starting in July for follow-ups for our stroke patients.
- Working on training for RT staff to do EEGs in house.

9. Conclusion:

- Overall, nursing services have maintained a high standard of quality and patient satisfaction during the reporting period. Efforts will continue to address challenges and capitalize on opportunities for improvement.

Angela Brady, CNE/VP

6/20/24

TAB C

SGMH Foundation report as of May 31, 2024

Foundation Finances

HCN Bank Checking Acct:	\$349,726.45	<u>May 2024</u>
HCN Money Market Acct:	\$128,529.41	<u>May 2024</u>
Total	\$482,507.70	

Foundation Report

- SGMH Foundation is actively looking for grants to support the creation of the Foundation's Speakers Bureau program.
- The Foundation director will continue to cultivate community business relationships to bring awareness to the needs of the hospital.
- The Foundation will be reviewing the capital equipment list to seek revenue to support the needs on the list.

TAB D



July 2024

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting	3	4 Administration Closed Independence Day!	5 Administration Closed	6
7	8	9	10	11	12 Beaumont Chamber Breakfast @7:30 AM	13
14	15	16	17 9:00 am HR Committee Meeting	18	19	20
21	22	23	24	25 SGMH at Beaumont Market Night 5-9 pm	26	27
28	29	30 9:00 am Finance Committee	31			

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

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



August 2024

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting	7	8	9 Beaumont Chamber Breakfast @7:30 AM	10
11	12	13 SGMH at City of Beaumont Parks and Rec's Senior Seminar @ 9 am	14	15	16	17
18	19	20	21 Banning Chamber Breakfast @7AM	22	23	24
25	26	27 9:00 am Finance Committee	28	29	30	31

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

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



September 2024

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 Administration Closed for Labor Day	3 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting	4	5	6	7
8	9	10 SGMH at City of Beaumont Parks and Rec's Senior Seminar @ 9 am	11	12	13 Beaumont Chamber Breakfast @7:30 AM	14
15	16	17	18 Banning Chamber Breakfast @7AM	19	20	21
22	23	24 9:00 am Finance Committee	25	26	27	28
29	30					

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

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

TAB E

REGULAR MEETING OF THE
SAN GORGONIO MEMORIAL HOSPITAL
BOARD OF DIRECTORS

EXECUTIVE COMMITTEE
June 25, 2024

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors Executive Committee was held on Tuesday, June 25, 2024, in Classroom B, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Susan DiBiasi (C), Darrell Petersen, Ron Rader, Steve Rutledge

Members Absent: None

Required Staff: Steve Barron (CEO), Daniel Heckathorne (CFO), Ariel Whitley (Executive Assistant), Angela Brady (CNE), John Peleuses (VP, Ancillary and Support Services)

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP								
Call To Order	Committee Chair Susan DiBiasi called the meeting to order at 11:08 am.									
Public Comment	No public comment.									
OLD BUSINESS										
Proposed Action - Approve Minutes May 15, 2024, Regular Meeting	Chair DiBiasi asked for any changes or corrections to the minutes of the May 15, 2024, regular meeting. There were none.	The minutes of the May 15, 2024, regular meeting will stand correct as presented.								
NEW BUSINESS										
Proposed Action – Approve Annual Insurance Renewals <ul style="list-style-type: none"> • Property and Casualty Programs 	It was noted that approval is recommended by the Finance Committee. ROLL CALL: <table border="1" style="margin-left: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;">DiBiasi</td> <td style="width: 25%;">Yes</td> <td style="width: 25%;">Petersen</td> <td style="width: 25%;">Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> </table> Motion carried.	DiBiasi	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	M.S.C. (Rader/Petersen), the SGMH Executive Committee approved the Property and Casualty Programs Insurance Renewals as presented.
DiBiasi	Yes	Petersen	Yes							
Rader	Yes	Rutledge	Yes							
Adjourn	The meeting was adjourned at 11:15 am.									

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Minutes submitted by Ariel Whitley, Executive Assistant

TAB F

REGULAR MEETING OF THE
SAN GORGONIO MEMORIAL HOSPITAL
BOARD OF DIRECTORS

FINANCE COMMITTEE
June 25, 2024

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors Finance Committee was held on Tuesday, June 25, 2024, in Classroom B, 600 N. Highland Springs Avenue, Banning, California.

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

Members Absent: None

Required Staff: Steve Barron (CEO), Daniel Heckathorne (CFO), John Peleuses (VP, Ancillary & Support Services), Ariel Whitley (Executive Assistant), Angela Brady (CNE)

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP								
Call To Order	Susan DiBiasi called the meeting to order at 9:00 am.									
Public Comment	No public present.									
OLD BUSINESS										
Proposed Action - Approve Minutes May 28, 2024, regular meeting	Susan DiBiasi asked for any changes or corrections to the minutes of the May 28, 2024, regular meeting. There were none.	The minutes of the May 28, 2024, regular meeting will stand correct as presented.								
Status of FYE 23 Audit Findings on Internal Controls	Steve Barron, CEO, gave an update on the status of the FYE 23 audit findings on internal controls.									
NEW BUSINESS										
Proposed Action – Recommend Approval to the Executive Committee of the Hospital Board <ul style="list-style-type: none"> • Annual Insurance Renewals: Property and Casualty Programs 	<p>The Annual Insurance Renewals were presented to the committee by Dan Heckathorne, CFO. The Insurance Renewals include:</p> <ul style="list-style-type: none"> • Property and Casualty Programs <p>ROLL CALL:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DiBiasi</td> <td style="width: 25%;">Yes</td> <td style="width: 25%;">Petersen</td> <td style="width: 25%;">Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> </table> <p>Motion carried.</p>	DiBiasi	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	M.S.C. (Rader/Rutledge), the SGMH Finance Committee voted to recommend approval of the Annual Insurance Renewals: Property and Casualty Programs to the Executive Committee of the Hospital Board.
DiBiasi	Yes	Petersen	Yes							
Rader	Yes	Rutledge	Yes							

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP								
<p>Proposed Action – Recommend Approval to Hospital Board of Directors - Monthly Financial Report (Unaudited) – May 2024</p>	<p>Daniel Heckathorne, CFO, reviewed the Unaudited May 2024 finance report as informational.</p> <p>The month of May resulted in negative \$1.21M EBIDA compared to budgeted negative EBIDA of \$658K and a Flex Budget positive EBIDA of \$1.52M. Overall, Surplus was a negative \$1.52M compared to the budgeted negative \$1.1M.</p> <p>A few adjustments and items of note include:</p> <ul style="list-style-type: none"> • Patient Days, Surgeries, Emergency Visits and Adjusted Patient Days all exceeded budget. • There was \$1.15M of Supplemental Revenues in May including \$421K of unplanned P4P. • The Line of Credit remained at -0- and will be drawn down during the last week of June. <p>ROLL CALL:</p> <table border="1" data-bbox="386 827 1211 898"> <tr> <td>DiBiasi</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> </table> <p>Motion carried.</p>	DiBiasi	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	<p>M.S.C. (Petersen/Rader), the SGMH Finance Committee voted to recommend approval of the Unaudited May 2024 Financial report to the Hospital Board of Directors.</p>
DiBiasi	Yes	Petersen	Yes							
Rader	Yes	Rutledge	Yes							
<p>Proposed Action – Recommend Approval to Hospital Board and Healthcare District Board of FYE 2025 Operating and Capital Budgets</p>	<p>Dan Heckathorne, CFO, presented the FYE 2025 Operating and Capital Budgets as it is an annual requirement.</p> <p>ROLL CALL:</p> <table border="1" data-bbox="386 1178 1211 1249"> <tr> <td>DiBiasi</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> </table> <p>Motion carried.</p>	DiBiasi	Yes	Petersen	Yes	Rader	Yes	Rutledge	Yes	<p>M.S.C. (Rutledge/Rader), the SGMH Finance Committee voted to recommend approval of the FYE 2025 Operating and Capital Budgets to the Hospital Board of Directors.</p>
DiBiasi	Yes	Petersen	Yes							
Rader	Yes	Rutledge	Yes							
<p>Future Agenda Items</p>	<ul style="list-style-type: none"> • None 									
<p>Next Meeting</p>	<p>The next regular Finance Committee meeting will be held on July 30, 2024 @ 9:00 am.</p>									
<p>Adjournment</p>	<p>The meeting was adjourned at 11:08 am.</p>									

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.

Minutes respectfully submitted by Ariel Whitley, Executive Assistant



**SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA**

Unaudited Financial Statements

for

ELEVEN MONTHS ENDING MAY 31, 2024

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 May 31, 2024 and Eleven Months Ended May 31, 2024 (Unaudited)

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

Month - The month of May resulted in negative \$1.21M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted negative EBIDA of \$658K and a Flex Budget positive EBIDA of \$1.52M. Overall Surplus was a negative \$1.52M compared to the budgeted negative \$1.1M.

YTD - Eleven months ending in May resulted in negative \$11.0M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted negative EBIDA of \$1.40M and a Flex Budget EBIDA amount of a negative \$6.95M. YTD Overall Surplus was a negative \$10.4M compared to the budgeted negative \$1.1M.

Note: If the unaccrued Supplemental funds, projected DSH and P4P funds, along with provision for lease principal payments were booked, the YTD EBIDA would be a negative \$10.06M compared to the actual negative booked \$10.34M.

Month - Adjustments and Items of Note:

- Patient Days, Surgeries, Emergency Visits and Adjusted Patient Days all exceeded budget.
- There was \$1.15M of Supplemental Revenues in May including \$421K of unplanned P4P.
- The Line of Credit remained at -0- and will be drawn down during the last week of June.

Month - The May inpatient average daily census was 23.7 which exceeded the budgeted 21.9. Adjusted Patient Days were 16.0% over budget (2,103 vs. 1,813), while Patient Days were 8.1% over (734 vs. 679). Emergency Visits were 5.4% over budget (3,737 vs. 3,547), and Surgeries were 8.5% over budget (121 vs. 114).

YTD - Inpatient average daily census was 21.6 compared to the budgeted 23.4, and Patient Days were 7.6% below budget (7,266 vs. 7,862). Adjusted Patient Days were only 0.2% below budget (20,881 vs. 20,917), Emergency Visits were 4.5% under budget (38,968 vs. 40,793) and Surgeries were 19.4% below budget (1,103 vs. 1,368) which was 15% below the previous YTD's 1,300 cases.

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

Month - Net Patient Revenues in May were \$5.23M, or \$150K over budget. Other items of note included the fact that gross Inpatient Revenues were 6% (\$892K) over budget, and gross Outpatient Revenues were 18% (\$4.45M) over budget. As discussed in the past, Inpatient Revenues pay about 16% of charges, compared to Outpatient Revenues which pay under 9% of charges.

YTD - Net Patient Revenues through May were \$50.3M compared to budgeted \$58.7M (-14%) Back in November there was a \$504K favorable adjustment to Deductions from Revenues Expense to reverse estimated Medicare Outlier Repayments payable, and there was a one-time \$3.52M negative adjustment for Contractual Allowance Reserves, which was based on the latest reconciliation of cash collections compared to previously estimated collections. Finally, the impact of Surgeries being 15% below budget also has impacted the Net Patient Revenues variance.

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

Month - Operating Revenue in May was \$488K over budget. This is impacted by the Net Patient Revenues being \$150K over budget and the Non-Patient Revenues being \$338K over budget.

YTD - Operating Revenue through May was \$4.49M under budget, impacted by the Net Patient Revenues being \$8.36M under budget and the Non-Patient Revenues being \$3.87M over budget.

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

Month - Operating Expenses in May were \$8.17M, which was over budget by \$1.04M and over the Flex Budget by \$292K. Key items that impacted Expenses were: 1) Salaries, Wages, Benefits, and Contract Labor were collectively \$304K over budget and \$106K over the Flex budget. This is not too

bad considering that the Adjusted Patient Days were 16% over budget, and the Budget did not include the 3.0% pay increases instituted in October, 2023; 2) Physician Fees were \$352K over budget driven by variances of \$63K in Anesthesia expense, \$25K for Radiology services, \$6K for ICU expense and \$247K for Emergency on call fees; 3) Purchased Services were \$320K over budget, largely impacted by the Legal Fees variance of \$186K, \$62K for Allscripts/Navigant fees, and reconciliations of service agreements; and 4) Other Expenses were \$47K over budget, mostly due to a \$59K subscription to Sentry Data Systems for the 340B pharmacy project.

Year-to Date – Operating Expenses through May were \$87.47M and were over budget by \$5.11M and over the Flex Budget by \$5.25M. Key items that impacted Expenses were: 1) Salaries and Wages, Benefits, and Contract Labor were collectively \$2.24M over budget and \$2.70M over the Flex budget. This was driven by the following: a) The \$527K State Mandated California Paid Sick Leave program that was accrued in July plus the additional \$985K additional accrual in January; b) Contract Labor was over budget by \$556K due to several nurse staffing vacancies in OB and ER along with orientation of 2 new grads in the ER; and c) an additional \$153K increase for re-valuing the PTO bank to reflect the 3.0% Wage increase in late October, and although E/R visits are under budget, they are nevertheless higher than last year; 2) Physician Fees are \$2.04M over budget including \$1.03M for Anesthesia, which was impacted by the \$510K anesthesia expense reconciliation in December, a \$101K Radiology fee variance, along with the \$722K retroactive E.R. on-call fees in March and \$169K in May; 3) Purchased Services are \$868K over budget which included Legal Fees exceeding budget by \$839K; 4) Supplies were under budget by \$1.22M, reflective of lower than anticipated service volumes, especially in surgery; and 5) Repairs and Maintenance were over budget by \$206K largely to significant maintenance work occurring in September, October, and January; and 5) Other Expenses were \$571K over budget, mostly due to the IGT variance of \$351K variance along with various items throughout the Hospital including the phone and communication costs.

Balance Sheet/Cash Flow

Patient cash collections in May jumped to \$5.34M compared to \$4.81M in April and \$4.96M in March. Gross Accounts Receivable Days in May stood at 60.6 compared to 59.9 in April and 61.3 in March.

Operating Cash still remained at \$8.6M down from \$10.2M even without accessing the LOC. On the other hand, Accounts Payable increased from \$10.8M in April to \$12.96 at the end of May, whereas Payroll Payables dropped by \$3.3M due to timing of monthly payrolls. Other changes of note included receipt of significant property taxes in May because of the April mid-year payment cycles. The \$12M Line of credit was fully paid down to -0- as of April 15 and remains so as of this writing.

Summary

Positive takeaways:

- 1) All workload volumes were strong and exceeded budget.
- 2) The \$421K P4P revenues was a good surprise.
- 3) Cash balances have been sufficient to meet IGT and Loan repayment requirements.

Negative takeaways:

- 1) Labor costs are over budget; the summer-time flexing program has been implemented as of Memorial Day week-end.
- 2) Legal fees and physician fees continue to exceed budgeted expenses.
- 3) May's EBIDA, adjusted for pending Supplemental Income, DSH & P4P offset by reserving for Cash Payments required for Leases was a negative \$475K, and the YTD is a negative \$10.06M.

SGMIH MAY 2024 SIGNIFICANT ITEMS IMPACTING EBIDA

6/20/2024

EXPENSE		INCOME		GAIN/(LOSS)
SALARIES / BENEFITS/ CONTRACT LABOR				
TOTAL LABOR OVER BUDGET	303,810	NET PATIENT REVENUES OVER BUDGET	150,364	
OTHER EXPENSE				
RADIOLOGY FEES OVER BUDGET	25,810	OTHER REVENUES		
ANESTHESIA FEES OVER BUDGET	62,400	P4P REVENUES	420,322	
EMERGENCY ON CALL PHYSICIAN FEES OVER BUDGET	247,262	HQAF FIXED REVENUE PAYMENT	456,322	
LEGAL FEES OVER BUDGET (YTD OVER BUDGET = \$839K)	186,143	HQAF 8 PASS THRU REVENUE	268,399	
OTHER PURCHASED SERVICES OVER BUDGET	134,059			
EXTRAORDINARY NEGATIVE EXPENSES	<u>959,484</u>	EXTRAORDINARY POSITIVE (NEGATIVE) REVENUES	<u>1,295,407</u>	<u>335,923</u>

Note: These variances are not intended to account for all variances, but are meant to highlight key or unusual variations.

OTHER ITEMS OF NOTE:

\$12M Line of Credit balance paid to -0- as of April 15.

4

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

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

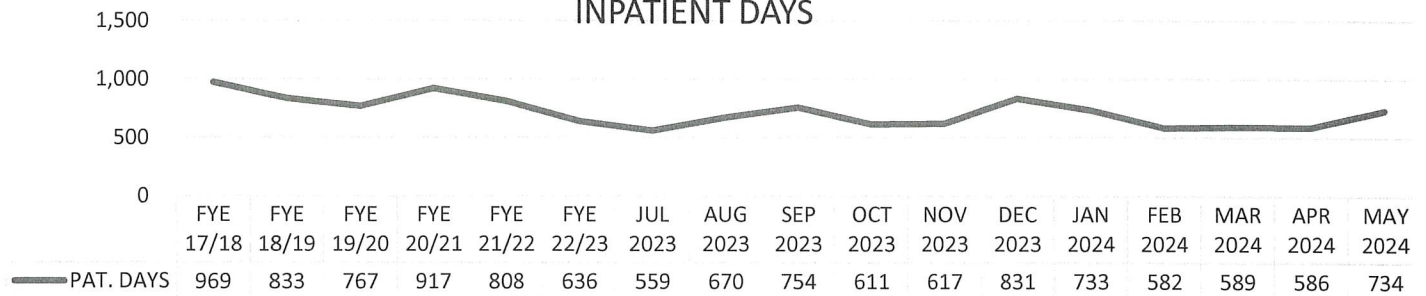
This is a blend of total patient days stayed in the hospital for a month, plus an equivalency factor (based on average inpatient revenue per patient day) applied to the outpatient revenues in order to account for outpatient workloads.

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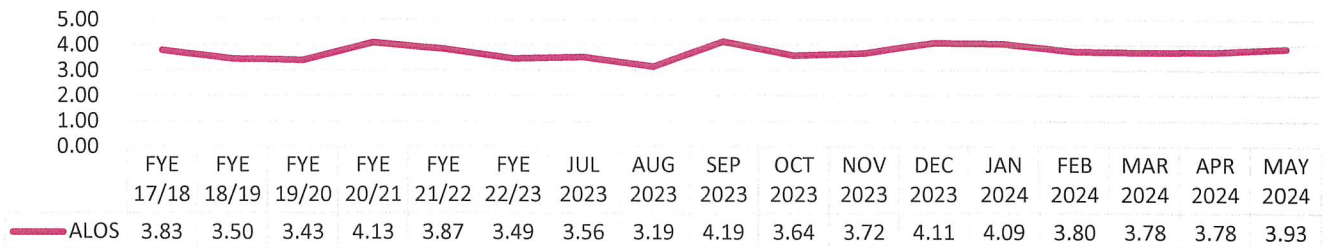
INPATIENT DISCHARGES



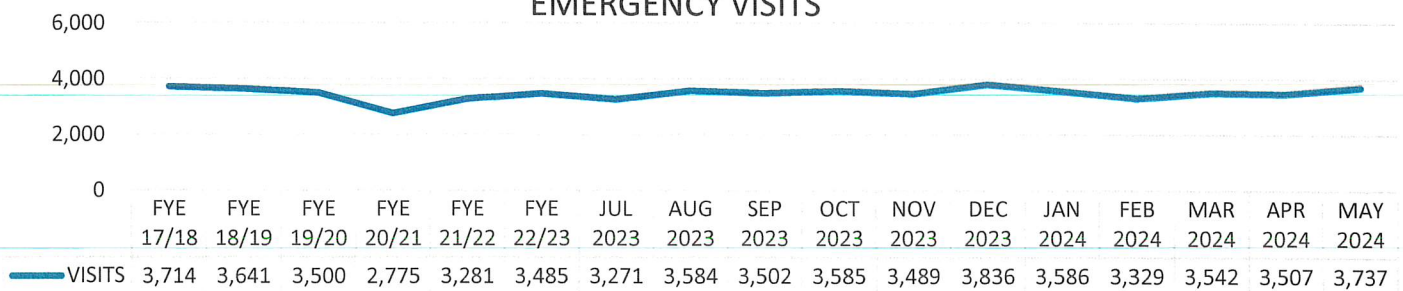
INPATIENT DAYS



AVERAGE LENGTH OF STAY

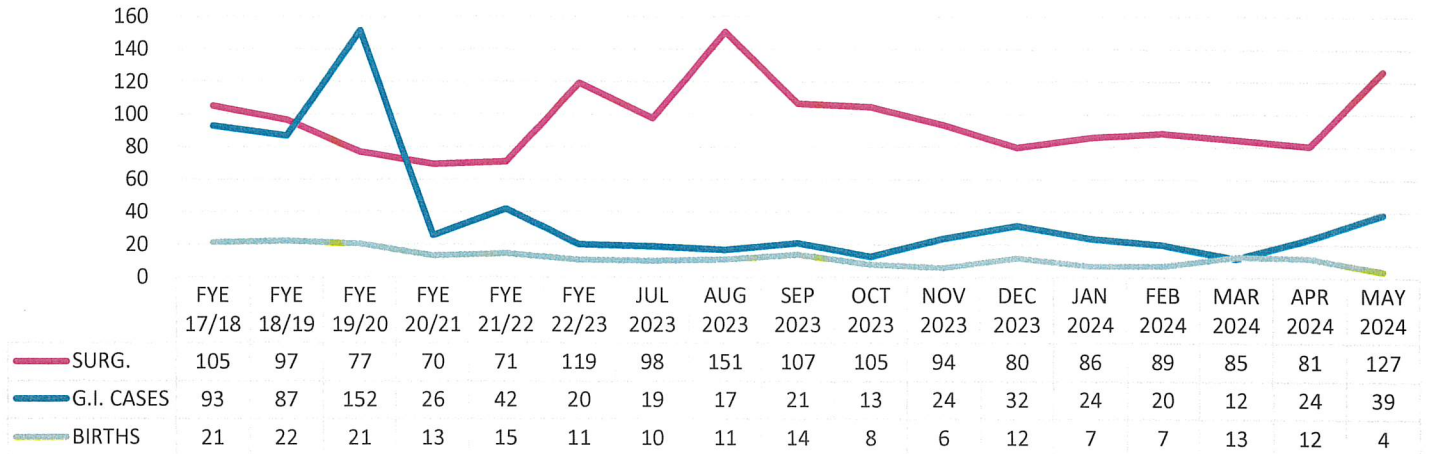


EMERGENCY VISITS

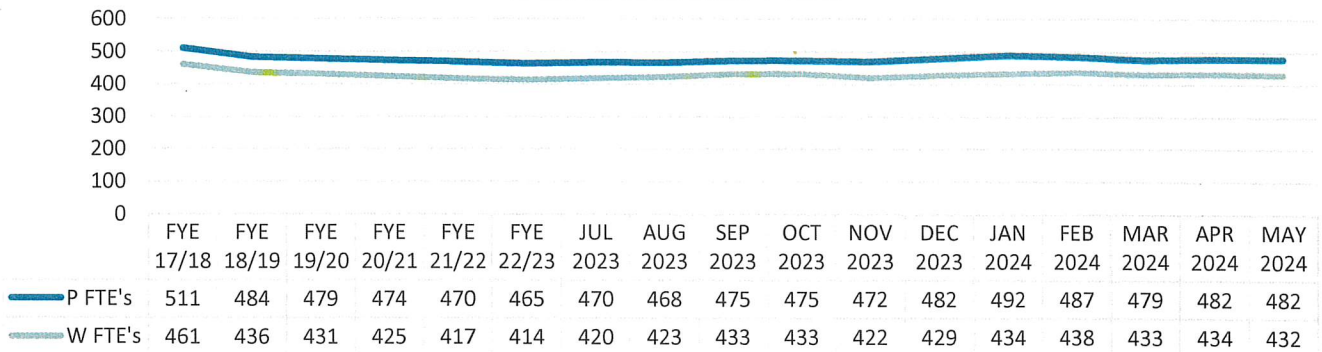


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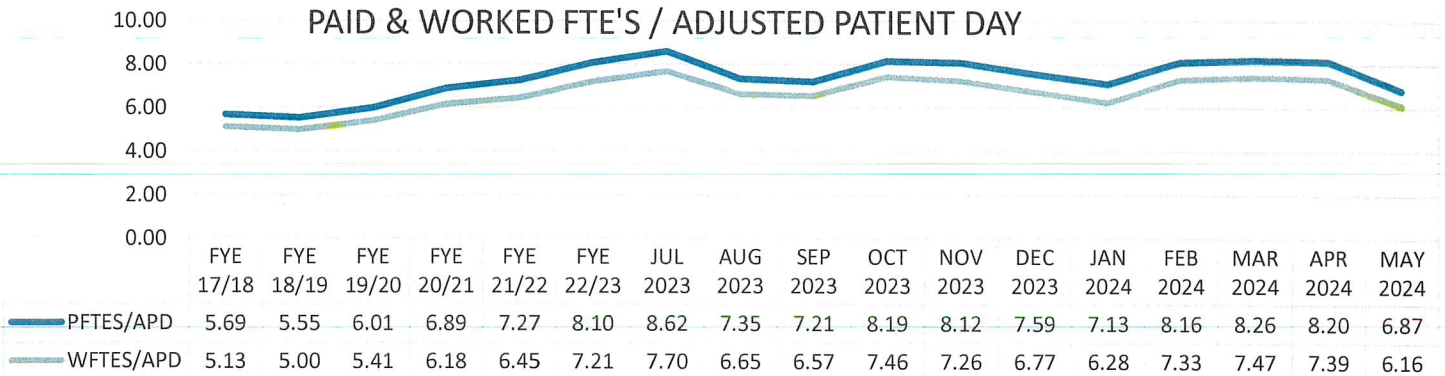
SURGERY CASES, G.I. CASES, N/B DELIVERIES



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

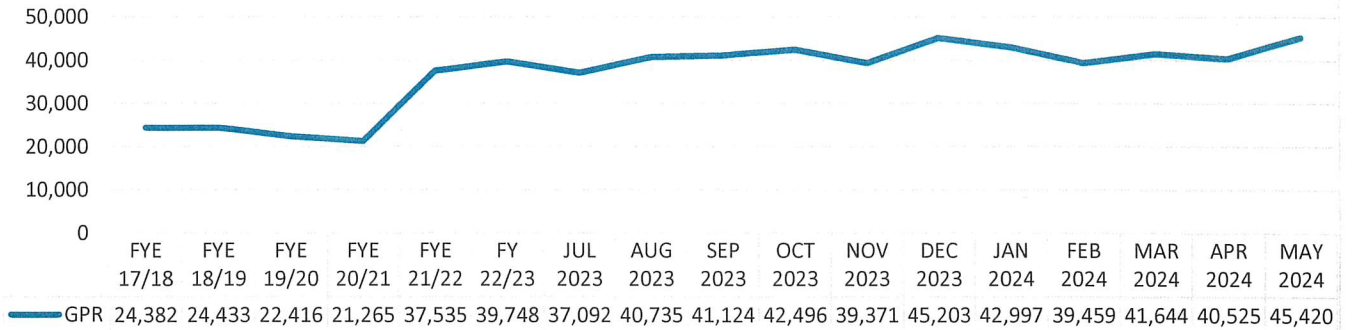
This measurement illustrates that Net Patient Revenues basically only cover Total Labor Expense, and that all of the Other Revenues and Supplemental Incomes are necessary to cover the remaining operational Expenses and EBIDA required to operate the Hospital.

Operating Revenues (Normalized), Expenses, Staffing Expenses, and EBIDA (Normalized)

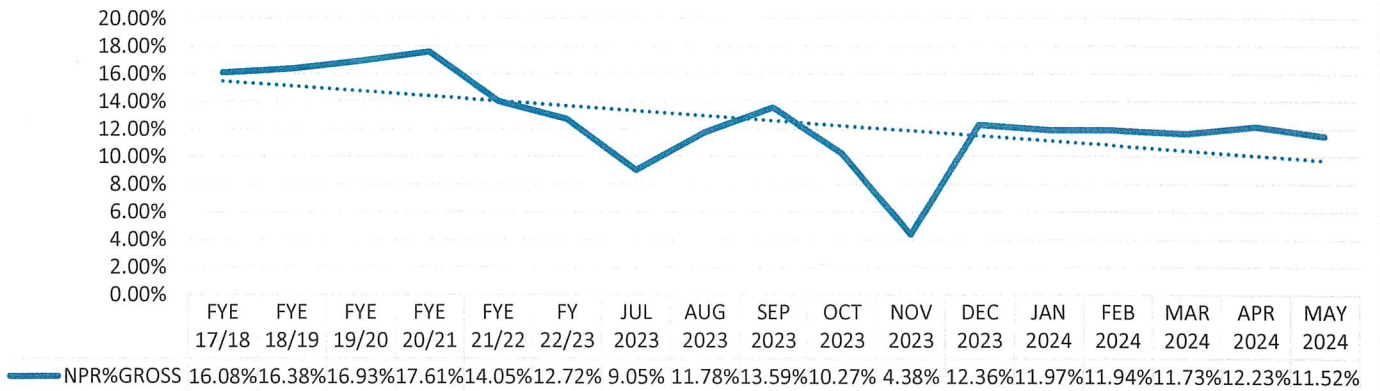
This graph illustrates the "normalization" of Operating Revenues and EBIDA, by reallocating proportionate Supplemental Revenues and related Expenses into the current month and YTD results.

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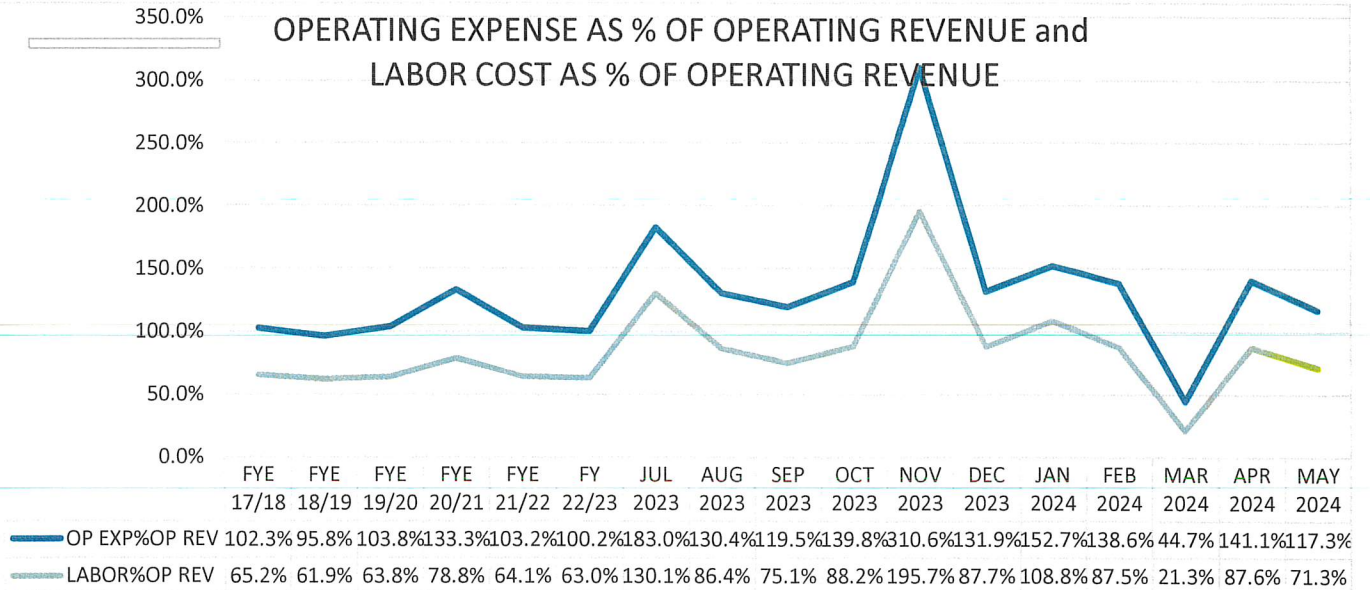
GROSS PATIENT REVENUE (000's)



NET PATIENT REVENUE AS % OF GROSS

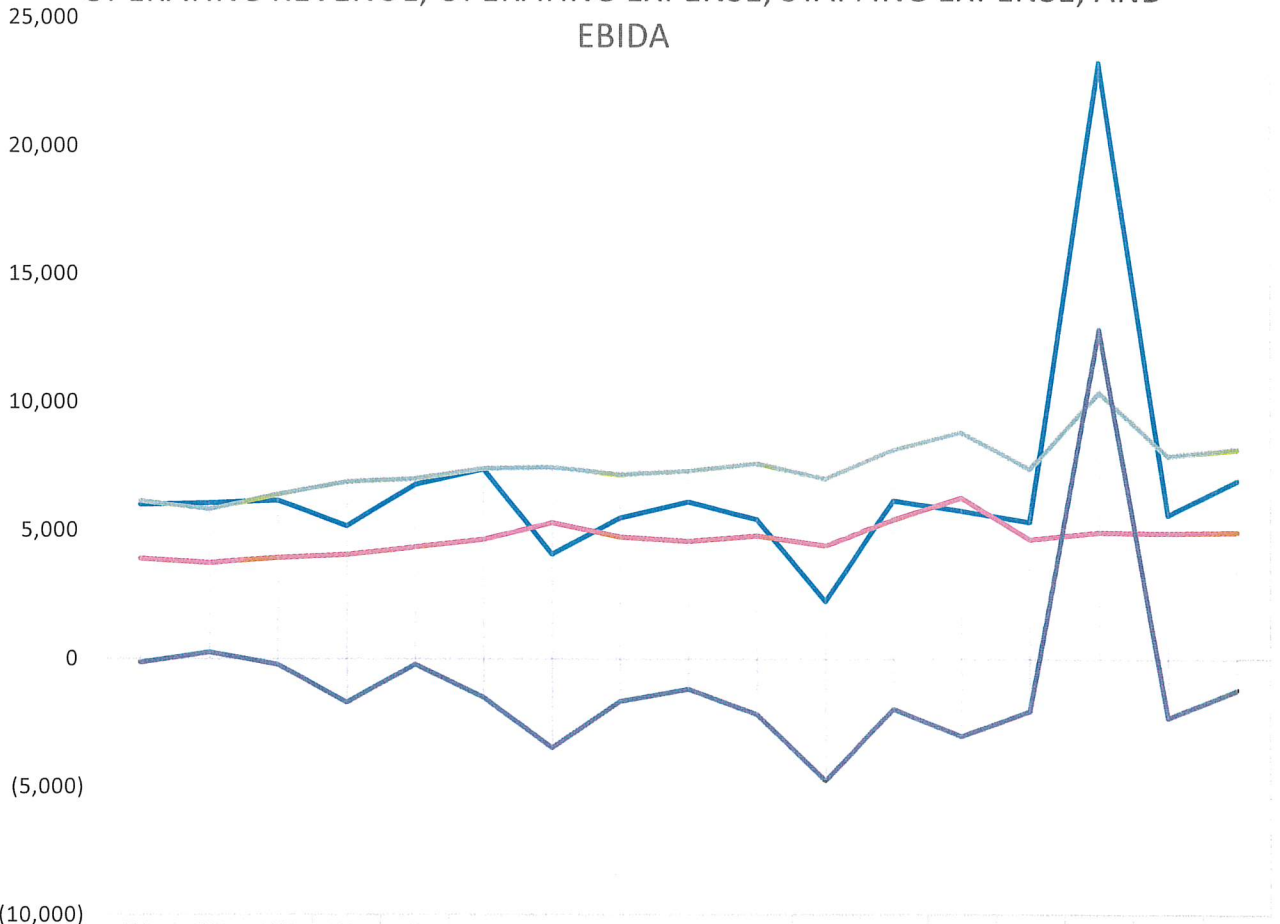


OPERATING EXPENSE AS % OF OPERATING REVENUE and LABOR COST AS % OF OPERATING REVENUE



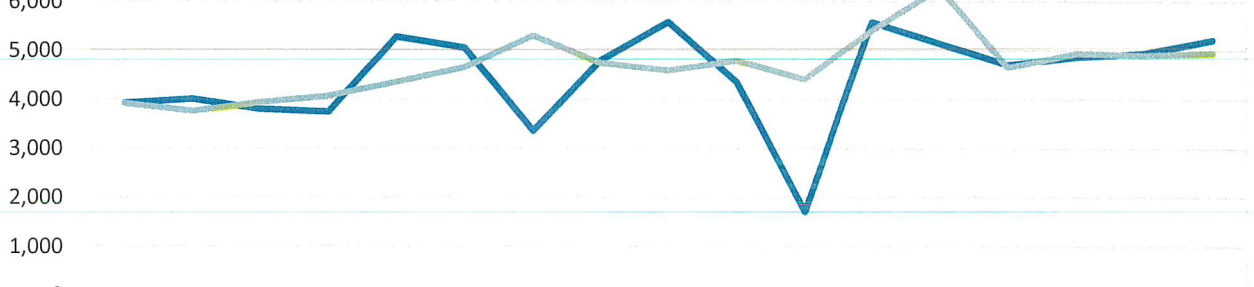
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OPERATING REVENUE, OPERATING EXPENSE, STAFFING EXPENSE, AND EBIDA



	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	DEC 2023	JAN 2024	FEB 2024	MAR 2024	APR 2024	MAY 2024
OP REV	6,006	6,069	6,165	5,160	6,791	7,391	4,078	5,495	6,118	5,442	2,256	6,167	5,772	5,325	23,236	5,610	6,962
OP EXP	6,147	5,817	6,398	6,878	7,007	7,403	7,461	7,164	7,310	7,610	7,006	8,132	8,811	7,378	10,386	7,914	8,169
STAFF EXP	3,915	3,755	3,932	4,065	4,354	4,654	5,303	4,746	4,593	4,802	4,416	5,411	6,277	4,662	4,956	4,915	4,961
EBIDA	(141)	252	(233)	(1,719)	(216)	(1,512)	(3,483)	(1,668)	(1,192)	(2,168)	(4,750)	(1,965)	(3,029)	(2,053)	12,851	(2,304)	(1,207)

NET PATIENT REVENUE VS. TOTAL LABOR EXPENSE



	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	DEC 2023	JAN 2024	FEB 2024	MAR 2024	APR 2024	MAY 2024
NET PAT REV	3,921	4,003	3,795	3,744	5,275	5,057	3,358	4,799	5,587	4,366	1,723	5,588	5,145	4,712	4,884	4,955	5,231
LABOR EXP	3,915	3,755	3,932	4,065	4,354	4,654	5,303	4,746	4,593	4,802	4,416	5,411	6,277	4,662	4,956	4,915	4,961

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	DEC 2023	JAN 2024	FEB 2024	MAR 2024	APR 2024	MAY 2024
REV NORMAL	6,006	6,069	6,165	5,160	6,791	7,391	5,974	7,290	8,049	6,892	4,187	8,099	7,609	7,257	7,345	7,541	7,748
OP EXP	6,147	5,817	6,398	6,878	7,007	7,403	7,461	7,164	7,310	7,610	7,006	8,132	8,811	7,378	10,386	7,914	8,169
LABOR EXP	3,915	3,755	3,932	4,065	4,354	4,654	5,303	4,746	4,593	4,802	4,416	5,411	6,277	4,662	4,956	4,915	4,961
EBIDA NORMAL	(141)	252	(233)	(1,719)	(216)	(1,499)	(1,104)	126	739	(719)	(2,819)	(33)	(207)	(122)	(1,592)	(373)	(421)

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.

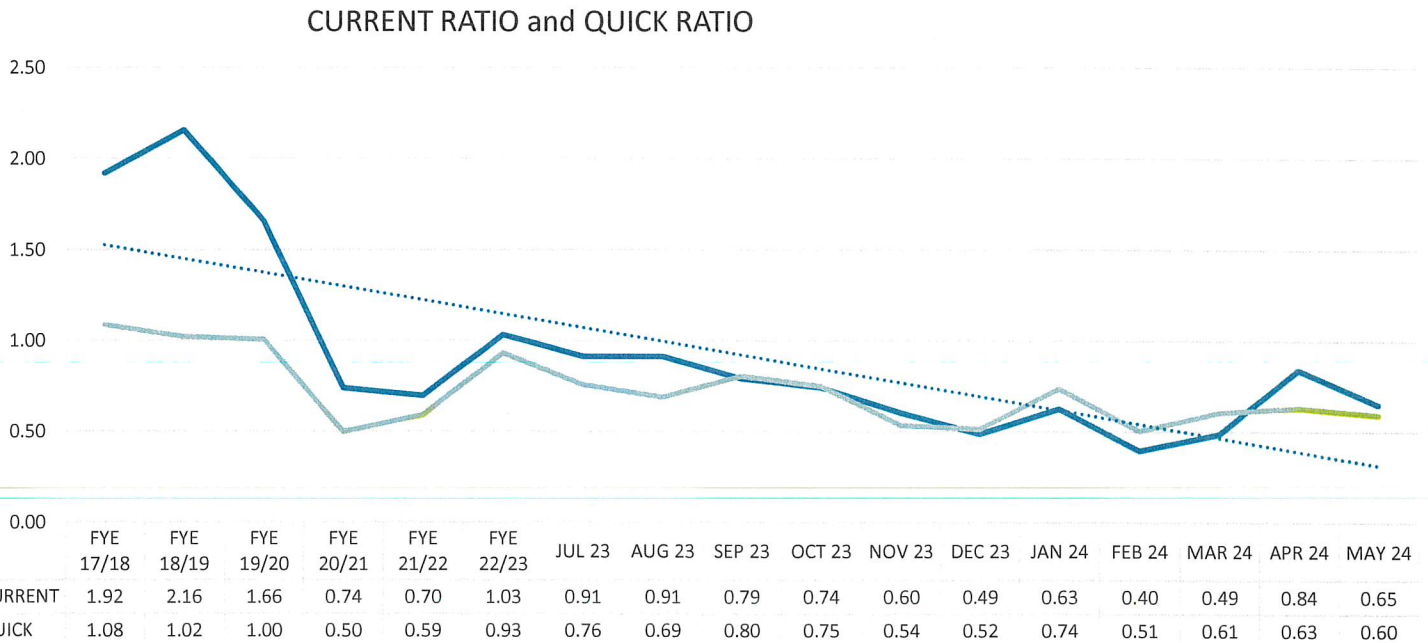
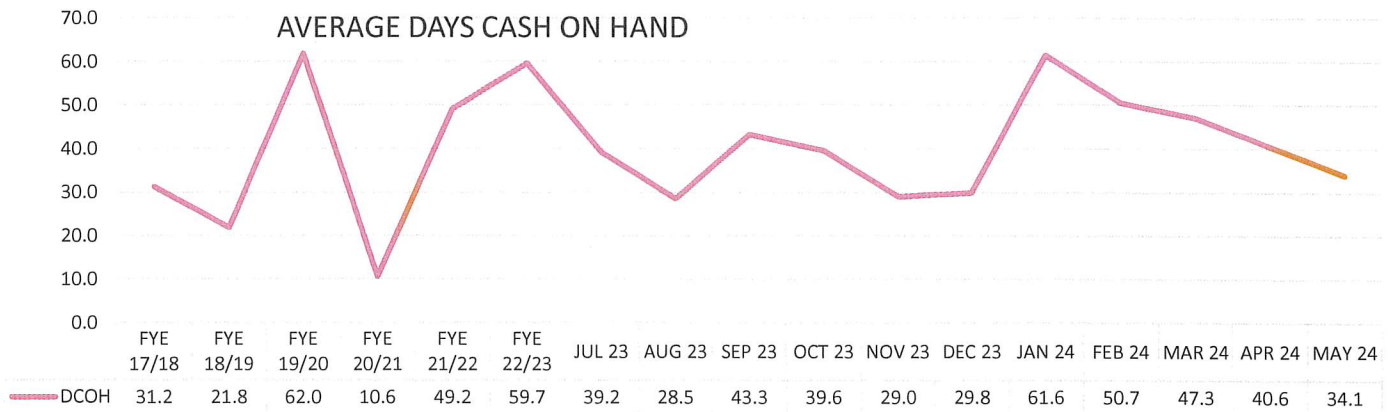
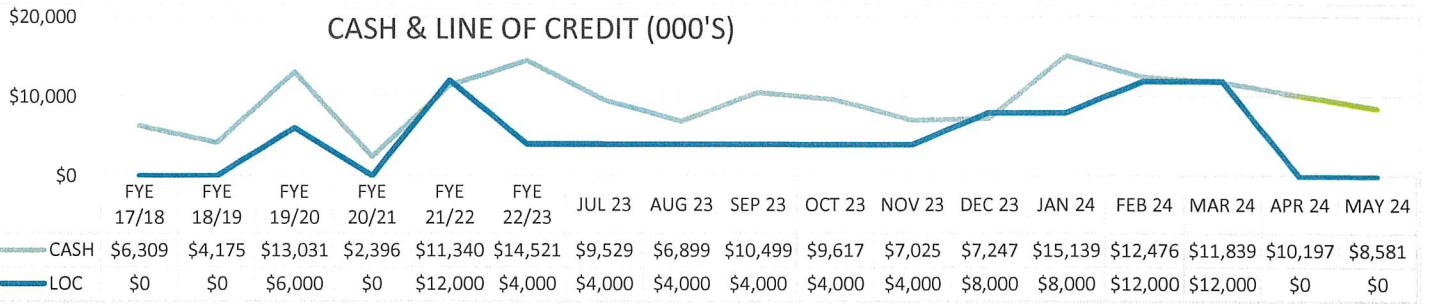
Accounts Payable Days

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.

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NET ACCOUNTS RECEIVABLE (000'S)



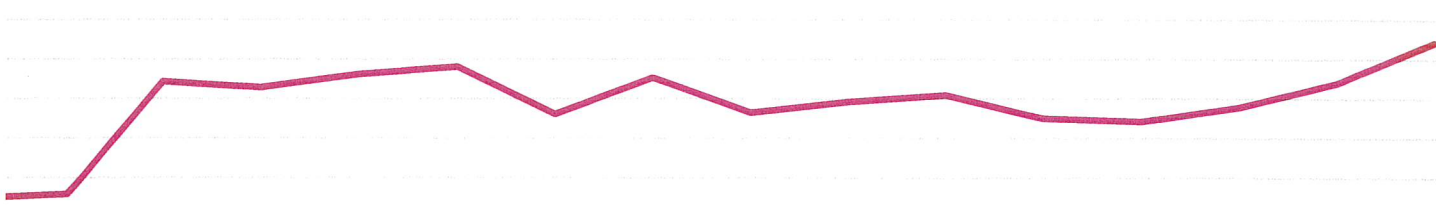
YE	FYE	FYE	FYE	FYE	JUL 23	AUG 23	SEP 23	OCT 23	NOV 23	DEC 23	JAN 24	FEB 24	MAR 24	APR 24	MAY 24
18/19	19/20	20/21	21/22	22/23	\$11,706	\$11,869	\$13,045	\$11,872	\$8,544	\$9,922	\$9,875	\$8,728	\$8,619	\$8,784	\$8,641

AVE. DAYS OF COLLECTIONS IN NET A/R



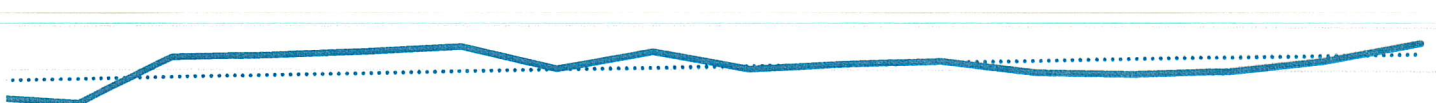
FYE	FYE	FYE	FYE	FYE	JUL 23	AUG 23	SEP 23	OCT 23	NOV 23	DEC 23	JAN 24	FEB 24	MAR 24	APR 24	MAY 24
18/19	19/20	20/21	21/22	22/23	72	74	80	74	55	63	63	55	55	56	55

ACCOUNTS PAYABLE (000'S)



FYE	FYE	FYE	FYE	JUL 23	AUG 23	SEP 23	OCT 23	NOV 23	DEC 23	JAN 24	FEB 24	MAR 24	APR 24	MAY 24
19/20	20/21	21/22	22/23	\$11,641	\$9,245	\$11,073	\$9,319	\$9,874	\$10,216	\$9,024	\$8,873	\$9,621	\$10,835	\$12,896

AVERAGE DAYS IN ACCOUNTS PAYABLE



FYE	FYE	FYE	FYE	JUL 23	AUG 23	SEP 23	OCT 23	NOV 23	DEC 23	JAN 24	FEB 24	MAR 24	APR 24	MAY 24
19/20	20/21	21/22	22/23	127	101	121	102	108	111	99	97	100	113	133

	A	B	C	D	E	F	G	H	I	J	K
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL										
	INCOME STATEMENT		MAY 2024 BUDGET	MAY 2024 ACTUAL	VARIANCE MAY ACTUAL TO BUDGET	VARIANCE PER CENTAGE		MAY 2024 YTD BUDGET	MAY 2024 YTD ACTUAL	VARIANCE MAY YTD ACTUAL TO BUDGET	YTD VARIANCE PER CENTAGE
2			(1,096,759)	(1,518,065)	(421,306)	-38.4%		(1,148,308)	(10,396,950)	(9,248,642)	-805.4%
3	NET INCOME		(657,624)	(1,206,703)	(549,079)	-83.5%		(1,398,178)	(11,004,064)	(9,605,886)	-687.0%
4	EBIDA										
5											
6	TOTAL OPERATING REVENUE		6,473,754	6,962,128	488,374	7.5%		80,955,428	76,461,972	(4,493,456)	-5.6%
7	NET PATIENT REVENUE		5,080,663	5,231,027	150,364	3.0%		58,716,755	50,349,326	(8,367,429)	-14.3%
13	OTHER OPERATING REVENUE		1,393,091	1,731,101	338,010	24.3%		22,238,673	26,112,646	3,873,973	17.4%
20											
21	TOTAL OPERATING EXPENSE		7,131,378	8,168,831	(1,037,453)	-14.5%		82,353,606	87,466,036	(5,112,430)	-6.2%
34											
35	NON-OPERATING REVENUE & EXPENSE										
36	TOTAL NON-OPERATING REVENUE (EXPENSE)		655,777	651,471	(4,306)	-0.7%		11,188,802	11,476,681	287,879	2.6%
42	TOTAL INTEREST & DEPRECIATION		1,094,912	962,833	132,079	12.1%		10,938,932	10,869,567	(69,365)	0.6%
45											
46	6/20/2024										

16

	A	B	C	D	E	F	G
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL						
2	BALANCE SHEET	JUNE 2022	JUNE 2023	APRIL 2024	MAY 2024	VARIANCE APRIL TO MAY	VARIANCE PERCENTAGE
3	TOTAL ASSETS	112,302,165	112,558,570	109,117,766	106,637,266	(2,480,500)	-2.3%
4	CURRENT ASSETS	22,630,675	29,638,354	25,144,004	18,856,436	(6,287,568)	-33.3%
16	ASSETS WHICH USE IS LIMITED	12,734,281	9,102,770	10,599,381	14,183,484	3,584,103	25.3%
17	NET PROPERTY, PLANT, AND EQUIPMENT	76,582,823	73,452,527	73,035,352	73,260,816	225,464	0.3%
24	OTHER ASSETS	354,386	364,919	339,029	336,530	(2,499)	-0.7%
25							
26	TOTAL LIABILITIES & FUND BALANCE	112,302,176	112,558,570	109,117,695	106,637,178	2,480,517	2.3%
27	TOTAL LIABILITIES	146,026,043	148,421,077	153,865,491	152,903,039	962,452	0.6%
28	CURRENT LIABILITIES	34,918,239	28,682,871	29,871,296	28,929,734	941,562	3.3%
38	LONG TERM LIABILITIES	111,107,804	119,738,206	123,994,195	123,973,305	20,890	0.0%
41	NET ASSETS - UNRESTRICTED	(33,723,867)	(35,862,507)	(44,747,796)	(46,265,861)	1,518,065	-3.3%
45	6/20/2024						

SAN GORGONIO MEMORIAL HOSPITAL

	FY23	FY 24	FY 23	FY 24	FY 23	FY 24	FY 23	FY 24	FY 23	FY 24
	05/31/23	05/31/24	05/31/24	05/31/24	2023	2024	2023	2024	2023	2024
	ACTUAL	ACTUAL	BUDGET	BUDGET	11 MOS YTD ACTUAL	11 MOS YTD ACTUAL	11 MOS YTD ACTUAL	11 MOS YTD ACTUAL	YR END TOTAL	11 MOS.YTD BUDGET
[1] Total Acute Patient Days	537	734	679	679	7,140	7,266	7,140	7,862	7,636	7,862
[2] Average Daily Census	17.3	23.7	21.9	21.9	21.3	21.6	21.3	23.4	20.9	23.4
[3] Average Acute Length of Stay	3.3	3.9	3.7	3.7	3.6	3.8	3.6	3.6	3.5	3.6
[4] Patient Discharges	163	187	184	184	1,998	1,913	1,998	2,198	2,186	2,198
[5] Adjusted Patient Days	1,656	2,103	1,813	1,813	19,697	20,881	19,697	20,917	21,460	20,917
[6] Observation Days	292	423	268	268	2,896	3,708	2,896	3,082	3,160	3,082
[7] Total Emergency Room Visits	3,543	3,737	3,547	3,547	38,345	38,968	38,345	40,793	41,821	40,793
[8] Average ED Visits Per Day	114	121	114	114	114	116	114	121	115	121
[9] Total Surgeries (Excluding G.I.'s)	125	127	117	117	1,300	1,103	1,300	1,368	1,433	1,368
[10] Deliveries/Births	6	4	11	11	122	104	122	133	131	133

	A	B	C	D	E	F	G	H	I	J	K
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL										
	INCOME STATEMENT		MAY 2024 BUDGET	MAY 2024 ACTUAL	VARIANCE MAY ACTUAL TO BUDGET	VARIANCE PER CENTAGE		MAY 2024 YTD BUDGET	MAY 2024 YTD ACTUAL	VARIANCE MAY YTD ACTUAL TO BUDGET	YTD VARIANCE PER CENTAGE
2											
3	NET INCOME		(1,096,759)	(1,518,065)	(421,306)	-38.4%	(1,148,308)	(10,396,950)	(9,248,642)	(9,248,642)	-805.4%
4	EBIDA		(657,624)	(1,206,703)	(549,079)	-83.5%	(1,398,178)	(11,004,064)	(9,605,886)	(9,605,886)	-687.0%
5											
6	TOTAL OPERATING REVENUE		6,473,754	6,962,128	488,374	7.5%	80,955,428	76,461,972	(4,493,456)	(4,493,456)	-5.6%
7	NET PATIENT REVENUE		5,080,663	5,231,027	150,364	3.0%	58,716,755	50,349,326	(8,367,429)	(8,367,429)	-14.3%
8	GROSS REVENUE FROM PATIENT SERVICES		40,075,051	45,419,755	5,344,704	13.3%	462,146,264	456,064,842	(6,081,422)	(6,081,422)	-1.3%
9	TOTAL INPATIENT REVENUE		14,962,562	15,855,039	892,477	6.0%	173,891,851	158,696,016	(15,195,835)	(15,195,835)	-8.7%
10	TOTAL OUTPATIENT REVENUE		25,112,489	29,564,716	4,452,227	17.7%	288,254,413	297,368,826	9,114,413	9,114,413	3.2%
11	DEDUCTIONS FROM REVENUE		(34,994,388)	(40,188,728)	(5,194,340)	14.8%	(403,429,509)	(405,715,516)	(2,286,007)	(2,286,007)	0.6%
12											
13	OTHER OPERATING REVENUE		1,393,091	1,731,101	338,010	24.3%	22,238,673	26,112,646	3,873,973	3,873,973	17.4%
14	OTHER REVENUE - RATE RANGE		0	0	0	0.0%	11,273,599	15,552,501	4,278,902	4,278,902	38.0%
15	OTHER REVENUE - OTHER SUPPLEMENTALS		724,661	724,661	0	0.0%	3,061,863	3,109,576	47,713	47,713	1.6%
16	OTHER REVENUE - DSH		0	0	0	0.0%	74,981	99,941	24,960	24,960	33.3%
17	OTHER REVENUE - P4P		0	420,577	420,577	0.0%	475,500	1,001,998	526,498	526,498	110.7%
18	OTHER REVENUE - OTHER		258,603	184,369	(74,234)	-28.7%	2,844,633	1,764,938	(1,079,695)	(1,079,695)	-38.0%
19	OPERATING TAX REVENUES		409,827	401,494	(8,333)	-2.0%	4,508,097	4,583,692	75,595	75,595	1.7%
20											
21	TOTAL OPERATING EXPENSE		7,131,378	8,168,831	(1,037,453)	-14.5%	82,353,606	87,466,036	(5,112,430)	(5,112,430)	-6.2%
22	TOTAL LABOR EXPENSE		4,657,259	4,961,069	(303,810)	-6.5%	52,429,407	55,228,598	(2,799,191)	(2,799,191)	-5.3%
23	WAGES		3,582,951	3,882,358	(299,407)	-8.4%	40,457,014	42,937,621	(2,480,607)	(2,480,607)	-6.1%
24	EMPLOYEE BENEFITS		988,566	992,886	(4,320)	-0.4%	10,980,768	10,742,937	237,831	237,831	2.2%
25	CONTRACT LABOR		85,742	85,825	(83)	-0.1%	991,625	1,548,040	(556,415)	(556,415)	-56.1%
26	PHYSICIAN FEES		312,187	664,139	(351,952)	-112.7%	3,434,057	5,471,046	(2,036,989)	(2,036,989)	-59.3%
27	PURCHASED SERVICES		800,480	1,120,682	(320,202)	-40.0%	9,943,415	10,811,104	(867,689)	(867,689)	-8.7%
28	SUPPLY EXPENSE		879,198	892,629	(13,431)	-1.5%	10,139,555	8,921,225	1,218,330	1,218,330	12.0%
29	UTILITIES		110,703	83,651	27,052	24.4%	1,176,564	1,104,086	72,478	72,478	6.2%
30	REPAIRS AND MAINTENANCE		81,355	105,259	(23,904)	-29.4%	907,584	1,113,175	(205,591)	(205,591)	-22.7%
31	INSURANCE		146,289	130,000	16,289	11.1%	1,609,179	1,406,908	202,271	202,271	12.6%
32	OTHER EXPENSES		98,533	145,287	(46,754)	-47.5%	2,214,731	2,785,797	(571,066)	(571,066)	-25.8%
33	LEASE AND RENTALS		45,374	66,115	(20,741)	-45.7%	499,114	624,097	(124,983)	(124,983)	-25.0%
34											
35	NON-OPERATING REVENUE & EXPENSE										
36	TOTAL NON-OPERATING REVENUE (EXPENSE)		655,777	651,471	(4,306)	-0.7%	11,188,802	11,476,681	287,879	287,879	2.6%
37	OTHER NON-OPERATING REVENUE INCL DONATIONS		28,424	24,118	(4,306)	-15.1%	4,287,919	4,197,861	(90,058)	(90,058)	-2.1%
38	OTHER NON-OPERATING DONATIONS		0	0	0	0.0%	3,975,255	4,029,026	53,771	53,771	1.4%
39	NON-OPERATING TAX REVENUE		627,353	627,353	0	0.0%	6,900,883	6,900,883	0	0	0.0%
40	EXTRAORDINARY REVENUE (EXPENSE)		0	0	0	0.0%	0	377,937	377,937	377,937	0.0%
41											
42	TOTAL INTEREST & DEPRECIATION		1,094,912	962,833	132,079	12.1%	10,938,932	10,869,567	69,365	69,365	0.6%
43	DEPRECIATION		656,125	585,434	70,691	10.8%	6,112,275	6,417,740	(305,465)	(305,465)	-5.0%
44	INTEREST & AMORTIZATION		438,787	377,399	61,388	14.0%	4,826,657	4,451,827	374,830	374,830	7.8%
45											
46	6/20/2024										

	A	B	C	D	E	F	G	H	I	J	K
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL										
	INCOME STATEMENT		MAY 2024 FLEX BUDGET	MAY 2024 ACTUAL	VARIANCE MAY ACTUAL TO FLEX BUDGET	VARIANCE PER CENTAGE		MAY 2024 YTD FLEX BUDGET	MAY 2024 YTD ACTUAL	VARIANCE MAY YTD ACTUAL TO FLEX BUDGET	YTD VARIANCE PER CENTAGE
2	NET INCOME		2,473,842	(1,518,065)	(3,991,907)	161.4%		(4,637,527)	(10,396,950)	(5,759,423)	-124.2%
3	EBIDA		1,517,463	(1,206,703)	(2,724,166)	179.5%		(6,946,203)	(11,004,064)	(4,057,861)	-58.4%
4											
5											
6	TOTAL OPERATING REVENUE		9,393,928	6,962,128	(2,431,800)	-25.9%		75,274,492	76,461,972	1,187,480	1.6%
7	NET PATIENT REVENUE		4,744,245	5,231,027	486,782	10.3%		48,438,738	50,349,326	1,910,588	3.9%
8	GROSS REVENUE FROM PATIENT SERVICES		44,361,617	45,419,755	1,058,138	2.4%		446,850,370	456,064,842	9,214,472	2.1%
9	TOTAL INPATIENT REVENUE		16,229,395	15,855,039	(374,356)	-2.3%		163,006,569	158,696,016	(4,310,553)	-2.6%
10	TOTAL OUTPATIENT REVENUE		28,132,222	29,564,716	1,432,494	5.1%		283,843,801	297,368,826	13,525,025	4.8%
11	DEDUCTIONS FROM REVENUE		(39,617,372)	(40,188,728)	(571,356)	1.4%		(398,411,632)	(405,715,516)	(7,303,884)	1.8%
12											
13	OTHER OPERATING REVENUE		4,649,683	1,731,101	(2,918,582)	-62.8%		26,835,754	26,112,646	(723,108)	-2.7%
14	OTHER REVENUE - RATE RANGE		3,379,662	0	(3,379,662)	0.0%		14,952,389	15,552,501	600,112	4.0%
15	OTHER REVENUE - OTHER SUPPLEMENTALS		601,591	724,661	123,070	0.0%		4,092,654	3,109,576	(983,078)	-24.0%
16	OTHER REVENUE - DSH		0	0	0	0.0%		74,981	99,941	24,960	33.3%
17	OTHER REVENUE - P4P		0	420,577	420,577	0.0%		475,500	1,001,998	526,498	110.7%
18	OTHER REVENUE - OTHER		258,603	184,369	(74,234)	-28.7%		2,732,133	1,764,938	(967,195)	-35.4%
19	OPERATING TAX REVENUES		409,827	401,494	(8,333)	-2.0%		4,508,097	4,583,692	75,595	1.7%
20											
21	TOTAL OPERATING EXPENSE		7,876,465	8,168,831	(292,366)	-3.7%		82,220,695	87,466,036	(5,245,341)	-6.4%
22	TOTAL LABOR EXPENSE		4,855,210	4,961,069	(105,859)	-2.2%		52,532,461	55,228,598	(2,696,137)	-5.1%
23	WAGES		3,796,597	3,882,358	(85,761)	-2.3%		40,827,110	42,937,621	(2,110,511)	-5.2%
24	EMPLOYEE BENEFITS		1,001,401	992,886	8,515	0.9%		10,833,475	10,742,937	90,538	0.8%
25	CONTRACT LABOR		57,212	85,825	(28,613)	-50.0%		871,876	1,548,040	(676,164)	-77.6%
26	PHYSICIAN FEES		345,520	664,139	(318,619)	-92.2%		3,634,055	5,471,046	(1,836,991)	-50.5%
27	PURCHASED SERVICES		845,124	1,120,682	(275,558)	-32.6%		9,796,541	10,811,104	(1,014,563)	-10.4%
28	SUPPLY EXPENSE		939,463	892,629	46,834	5.0%		9,406,073	8,921,225	484,848	5.2%
29	UTILITIES		110,703	83,651	27,052	24.4%		1,176,564	1,104,086	72,478	6.2%
30	REPAIRS AND MAINTENANCE		81,726	105,259	(23,533)	-28.8%		906,300	1,113,175	(206,875)	-22.8%
31	INSURANCE		146,289	130,000	16,289	11.1%		1,609,179	1,406,908	202,271	12.6%
32	OTHER EXPENSES		507,054	145,287	361,767	71.3%		2,660,455	2,785,797	(125,342)	-4.7%
33	LEASE AND RENTALS		45,376	66,115	(20,739)	-45.7%		499,067	624,097	(125,030)	-25.1%
34											
35	NON-OPERATING REVENUE & EXPENSE										
36	TOTAL NON-OPERATING REVENUE (EXPENSE)		2,055,777	651,471	(1,404,306)	-68.3%		13,238,347	11,476,681	(1,761,666)	-13.3%
37	OTHER NON-OPERATING REVENUE INCL DONATIONS		1,428,424	24,118	(1,404,306)	-98.3%		6,337,464	4,197,861	(2,139,603)	-33.8%
38	OTHER NON-OPERATING DONATIONS		1,400,000	0	(1,400,000)	0.0%		6,024,800	4,029,026	(1,995,774)	-33.1%
39	NON-OPERATING TAX REVENUE		627,353	627,353	0	0.0%		6,900,883	6,900,883	0	0.0%
40	EXTRAORDINARY REVENUE (EXPENSE)		0	0	0	0.0%		0	377,937	377,937	0.0%
41											
42	TOTAL INTEREST & DEPRECIATION		1,099,398	962,833	136,565	12.4%		10,929,671	10,869,567	60,104	0.5%
43	DEPRECIATION		660,611	585,434	75,177	11.4%		6,103,014	6,417,740	(314,726)	-5.2%
44	INTEREST & AMORTIZATION		438,787	377,399	61,388	14.0%		4,826,657	4,451,827	374,830	7.8%
45											
46	6/20/2024										

	A	B	C	D	E	F	G
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL						
2	BALANCE SHEET						
3	TOTAL ASSETS	112,302,165	112,558,570	109,117,766	106,637,266	(2,480,500)	-2.3%
4	CURRENT ASSETS	22,630,675	29,638,354	25,144,004	18,856,436	(6,287,568)	-33.3%
5	CASH & EQUIVALENTS	11,073,544	14,521,085	10,164,848	8,580,823	(1,584,025)	-18.5%
6	NET PATIENT ACCOUNTS RECEIVABLE	8,746,991	12,177,379	8,784,041	8,640,693	(143,348)	-1.7%
7	HOSPITAL ACCOUNTS RECEIVABLE	77,594,807	86,192,181	83,071,267	85,424,396	2,353,129	2.8%
8	LESS: ALLOWANCE FOR BAD DEBTS	(68,847,816)	(74,014,802)	(74,287,226)	(76,783,703)	(2,496,477)	3.3%
9	OTHER CURRENT ASSETS	2,810,140	2,939,890	6,195,115	1,634,920	(4,560,195)	-278.9%
10	TAXES RECEIVABLE	1,375,017	2,263,620	5,671,399	1,567,393	(4,104,006)	-261.8%
11	MISC RECEIVABLE	7,502	64,052	(906,866)	(903,765)	3,101	-0.3%
12	DUE FROM 3RD PARTIES	(748,043)	(1,097,349)	(1,808,856)	(1,767,736)	41,120	-2.3%
13	INVENTORIES	1,829,462	1,311,782	2,105,689	1,882,385	(223,304)	-11.9%
14	PREPAID EXPENSES	346,202	397,785	1,133,749	856,643	(277,106)	-32.3%
15							
16	ASSETS WHICH USE IS LIMITED	12,734,281	9,102,770	10,599,381	14,183,484	3,584,103	25.3%
17	NET PROPERTY, PLANT, AND EQUIPMENT	76,582,823	73,452,527	73,035,352	73,260,816	225,464	0.3%
18	PROPERTY, PLANT, AND EQUIPMENT	164,801,341	166,692,035	171,202,070	171,920,255	718,185	0.4%
19	LAND & LAND IMPROVEMENTS	4,828,182	4,828,182	4,828,182	4,828,182	0	0.0%
20	BUILDINGS & BUILDING IMPROVEMENTS	129,281,491	129,281,491	129,281,491	129,281,491	0	0.0%
21	FIXED EQUIPMENT	28,997,660	29,262,127	31,416,424	31,395,416	(21,008)	-0.1%
22	CONSTRUCTION IN PROGRESS	1,694,008	3,320,235	5,675,973	6,415,166	739,193	11.5%
23	LESS: ACCUMULATED DEPRECIATION	(88,218,518)	(93,239,508)	(98,166,718)	(98,659,439)	(492,721)	0.5%
24	OTHER ASSETS	354,386	364,919	339,029	336,530	(2,499)	-0.7%
25							
26	TOTAL LIABILITIES & FUND BALANCE	112,302,176	112,558,570	109,117,695	106,637,178	2,480,517	2.3%
27	TOTAL LIABILITIES	146,026,043	148,421,077	153,865,491	152,903,039	962,452	0.6%
28	CURRENT LIABILITIES	34,918,239	28,682,871	29,871,296	28,929,734	941,562	3.3%
29	ACCOUNTS PAYABLE	10,378,212	11,278,786	10,802,553	12,895,936	(2,093,383)	-16.2%
30	PAYROLL PAYABLES	6,421,579	6,484,769	10,817,175	7,480,872	3,336,303	44.6%
31	SALARIES & WAGES PAYABLE	2,057,716	579,682	1,168,515	(199,803)	1,368,318	-684.8%
32	PAYROLL TAXES & DEDUCTIONS PAYABLE	1,905,118	3,235,802	6,078,205	4,166,332	1,911,873	45.9%
33	ACCRUED PTO & SICK DAYS PAYABLE	2,458,745	2,669,285	3,570,455	3,514,343	56,112	1.6%
34	LINE OF CREDIT	12,000,000	4,043,719	59,943	63,548	(3,605)	-5.7%
35	ACCRUED INTEREST PAYABLE	1,925,911	1,609,780	6,800,038	7,160,974	(360,936)	-5.0%
36	OTHER CURRENT LIABILITIES	4,192,537	5,265,817	1,391,587	1,328,404	(63,183)	-4.8%
37							
38	LONG TERM LIABILITIES	111,107,804	119,738,206	123,994,195	123,973,305	20,890	0.0%
39							
40	NET ASSETS						
41	NET ASSETS - UNRESTRICTED	(33,723,867)	(35,862,507)	(44,747,796)	(46,265,861)	1,518,065	-3.3%
42	NET ASSETS - BEGINNING OF PERIOD	(24,065,660)	(33,723,881)	(35,868,911)	(35,868,911)	0	0.0%
43	CURRENT YEAR NET GAIN/(LOSS)	(9,658,207)	(2,138,626)	(8,878,885)	(10,396,950)	(1,518,065)	14.6%
44							
45	6/20/2024						

	B	C	D	E	F	G	J
1	SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT & HOSPITAL					CASH FLOW	
2							
3						Current Month	Y-T-D
4						5/31/2024	5/31/2024
5	BEGINNING CASH BALANCES						
6		Cash: Beginning Balances- Hospital				\$ 5,735,788	\$ 11,583,441
7		Cash: Beginning Balances- District				4,461,403	2,937,644
8		Cash: Beginning Balances Totals				\$ 10,197,191	\$ 14,521,085
9							
10	Receipts						
11		Patient Collections				\$ 5,337,126	\$ 53,822,687
12		Tax Subsidies/Measure D/Prop 13				401,494	\$ 4,416,434
13		Misc Tax Subsidies				-	\$ 167,258
14		Donations/Grants/Loans				-	\$ 13,279,312
15		Supplemental Funding (Rate Range, Etc.)				1,145,238	\$ 19,764,016
16		Draws/(Paydown) of LOC Balances				-	\$ (8,000,000)
17		Other Revenues/Receipts/Transfers				184,369	\$ 2,146,032
18	TOTAL RECEIPTS					\$ 7,068,227	\$ 85,595,739
19							
20	Disbursements						
21		Wages, Benefits, & Contract Labor				\$ 4,961,069	\$ 54,143,881
22		Other Operating Costs				3,207,762	\$ 32,641,393
23		Capital Spending				776,458	\$ 4,001,949
24		Debt Service Payments (Excl.G/O Bonds)				80,825	\$ 4,338,969
25		Other - Changes in Accounts Payable, IGT's, Etc.				(341,519)	\$ (3,590,191)
26	TOTAL DISBURSEMENTS					\$ 8,684,595	\$ 91,536,001
27							
28	TOTAL CHANGE in CASH					\$ (1,616,368)	\$ (5,940,262)
29							
30	ENDING CASH BALANCES						
31		Ending Balances- Hospital				\$ 5,371,111	\$ 5,371,111
32		Ending Balances- District				3,209,712	3,209,712
33		Ending Balances- Totals				\$ 8,580,823	\$ 8,580,823
34							
35							
36							
37		LOC Current Balances				\$ -	\$ 12,000,000
38		LOC Interest Expense Incurred				0	\$ 154,419
39							
40							

TAB G

San Gorgonio Memorial Healthcare District Hospital and San Gorgonio 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 Gorgonio Memorial Healthcare District and San Gorgonio 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 Gorgonio Memorial Healthcare District and San Gorgonio 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				\$	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						\$	460,000	\$	260,000	
85	Floor Replacement due Poor Moisture sealant	Plant	Sanchez						4						\$	231,000	\$	-	
86	Cooling Tower Media	Plant	Sanchez										\$	65,000	\$	65,000			
87	ED Lighting	Plant	Sanchez										\$	20,000	\$	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	Medical Gas Control panel replacement /OB	Plant	Sanchez	\$	20,000				1	\$	20,000					\$	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	\$	22,000	\$	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 H

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

TAB I

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 J

Hospital earns accreditation

San Gorgonio Memorial Hospital has been surveyed by the Center for Improvement in Healthcare Quality (CIHQ) and has successfully met the requirements for hospital accreditation by demonstrating compliance with CIHQ Standards and the Conditions of Participation by the Centers for Medicare and Medicaid Services. This recognition reflects the hospital's continuous commitment to safety and quality patient care.

San Gorgonio Memorial

Hospital was subjected to a rigorous unannounced onsite assessment on Friday, May 17. The CIHQ team toured the hospital, reviewed medical records, observed care practices and interviewed staff and patients.

"CIHQ's goal is to partner with hospitals to improve the care provided in our communities," stated Richard Curtis, chief executive officer of CIHQ. "CIHQ is proud to recognize San Gorgonio Memorial Hospital for achieving accreditation."

Empowering better healthcare,
one metric at a time!

ACCREDITED
Center for Improvement
in Healthcare Quality
CIHQ
HOSPITAL

NATIONALLY RECOGNIZED
A
SPRING 2024
LEAPfrog
HOSPITAL
SAFETY GRADE

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MEMORIAL HOSPITAL

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