



## AGENDA

### REGULAR MEETING OF THE BOARD OF DIRECTORS Tuesday, November 7, 2023 – 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.

### GENERAL TOPIC

- III. Hospital Quality Improvement Work Group – Presentation K. Singh, MD    verbal

### OLD BUSINESS

- IV. **\*Proposed Action - Approve Minutes** S. DiBiasi  
    o October 3, 2023, Regular Meeting A

### NEW BUSINESS

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

San Geronio Memorial Hospital  
 Board of Directors Regular Meeting  
 November 7, 2023

- |       |  |                                     |        |
|-------|--|-------------------------------------|--------|
| VI.   | CEO Monthly Report   | S. Barron                           | verbal |
| VII.  | November, December, & January Board/Committee Meeting Calendars  | S. DiBiasi                          | B      |
| VIII. | Bi-Monthly Patient Care Services Report<br><b>*Proposed Action – Appoint the recommended designees as the qualified persons over the Infection Prevention and Control and Antibiotic Stewardship programs.</b><br>▪ ROLL CALL  | A. Brady                            | C      |
| IX.   | <b>* Proposed Action – Adopt Resolution No. 2023-02</b><br>Resolution of the Board of Directors of the San Geronio Memorial Hospital authorizing Cosmina Maja to execute for and on behalf of the Hospital for the purpose of obtaining state financial assistance provided through the State of California for the Grant Award: FY2023 California State Nonprofit Security Grant Program<br>▪ ROLL CALL | S. Barron                           | D      |
| X.    | FOR REVIEW – Mission/Vision/Values Statement<br>(Proposed approval scheduled for December 2023 meeting)  | S. Barron                           | E      |
| XI.   | <b>* Proposed Action – Approve 2024 Meeting Dates</b><br>▪ ROLL CALL   | S. DiBiasi                          | F      |
| XII.  | FOR REVIEW – Existing Slate of Officers<br>(Proposed approval for 2024 Slate of Officers scheduled for December 2023 Meeting – effective January 2024 meeting)   | S. DiBiasi                          | G      |
| XIII. | Committee Reports:   |                                     |        |
|       | <ul style="list-style-type: none"> <li>• <u>Finance Committee</u> <ul style="list-style-type: none"> <li>○ October 30, 2023, regular meeting minutes</li> <li><b>* Proposed Action – Approve September 2023 Financial Statement (Unaudited)</b><br/>               (Approval recommended by Finance Committee 10/30/2023)</li> <li>▪ ROLL CALL</li> </ul> </li> </ul>                                    | S. DiBiasi/<br>D. Heckathorne       | H      |
| XIV.  | <b>* Proposed Action - Approve Policies and Procedures</b><br>▪ ROLL CALL  | Staff                               | I      |
| XV.   | Chief of Staff Report<br><b>* Proposed Action - Approve Recommendations of the Medical Executive Committee</b><br>▪ ROLL CALL  | R. Sahagian, MD J<br>Chief of Staff |        |

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

XVII. Future Agenda Items

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

- Proposed Action - Recommend approval to Healthcare District Board - Medical Staff Credentialing  
(*Health & Safety Code §32155; and Evidence Code §1157*)
- Telephone conference with legal counsel – Pending litigation  
(Government Code § 54956.9(d)(1))  
*Timothy Ware et. al. v San Gorgonio Memorial Hospital (Case No. CVRI2301216)*
- Receive Quarterly Performance Improvement and Risk Management Committee Report  
(*Health & Safety Code §32155*)
- Receive Quarterly Security/Safety & Emergency Preparedness Report  
(*Health & Safety Code §32155*)
- Receive Quarterly Corporate Compliance Report  
(*Health & Safety Code §32155*)

XVIII. **ADJOURN TO CLOSED SESSION**

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

**RECONVENE TO OPEN SESSION**

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

XIX. **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 November 3, 2023, I posted a copy of the foregoing agenda near the regular meeting place of the Board of Directors of San Gorgonio Memorial Hospital, and on the San Gorgonio Memorial Hospital website, said time being at least 72 hours in advance of the regular meeting of the Board of Directors  
(*Government Code Section 54954.2*).

Executed at Banning, California, on November 3, 2023



Ariel Whitley, Executive Assistant

**TAB A**

REGULAR MEETING OF THE  
SAN GORGONIO MEMORIAL HOSPITAL  
BOARD OF DIRECTORS

October 3, 2023

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, October 3, 2023, in Modular C meeting room, 600 N. Highland Springs Avenue, Banning, California.

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

Members Absent: Darrell Petersen, Steve Rutledge

Required Staff: Steve Barron (CEO), Raffi Sahagian, MD (Chief of Staff), Annah Karam (CHRO), Ariel Whitley (Executive Assistant), Angie Brady (CNE), John Peleuses (VP Ancillary and Support Services), Karan P. Singh, MD (CMO), Margaret Kammer (Controller), Sal Sanchez (Direct of Facilities)

AGENDA ITEM		ACTION / FOLLOW-UP
<b>Call To Order</b>	Chair, Susan DiBiasi, called the meeting to order at 4:00 pm.	
<b>Public Comment</b>	No public comment.	
<b>OLD BUSINESS</b>		
<b>Proposed Action - Approve Minutes September 5, 2023, regular meeting.</b>	Chair, Susan DiBiasi, asked for any changes or corrections to the minutes of the September 5, 2023, regular meeting.  There we none.	<b>The minutes of the September 5, 2023, regular meeting will stand correct as presented.</b>
<b>NEW BUSINESS</b>		
<b>Hospital Board Chair Monthly Report</b>	Chair DiBiasi reported there is a possibility of changing the way materials are distributed to the board for review. Susan reminded the board to pick up their tablets from Ariel prior to the day of the meeting so that they may thoroughly review the materials. Susan announced that she and Shannon McDougall attended the Beaumont State of the City event. She mentioned she would like to consider ways for the hospital and board members to be more involved.	
<b>CEO Monthly Report</b>	No report as Steve Barron, CEO, will give the finance report.	
<b>October, November, &amp; December Board/Committee meeting calendars</b>	Calendars for October, November, and December were included on the board tablets.	

AGENDA ITEM		ACTION / FOLLOW-UP																				
<b>Quarterly Foundation Report</b>	The Quarterly Foundation Report was provided as informational.																					
<b>Proposed Action – Recommend approval to the Healthcare District of the Purchase of Three Physio-Control Lifepak 15 Defibrillators</b>	<p>We need a total of 17 defibrillators in rotation. Over a year ago, our defibrillators needed to be replaced due to a recall. At the time, we purchased 15 refurbished defibrillators. Currently, we have 14, while one is out of service, being repaired.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 606 1255 783"> <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>Absent</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Absent</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Absent	Rader	Yes	Rutledge	Absent	Stevens	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		<b>M.S.C., (Stevens/Rader), the SGMH Board of Directors voted to recommend approval of the Purchase of Three Physio-Control Lifepak 15 Defibrillators to the Healthcare District Board as presented.</b>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Absent																			
Rader	Yes	Rutledge	Absent																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Yes	Motion carried.																				
<b>COMMITTEE REPORTS:</b>																						
<b>Human Resources Committee</b>	At the request of Susan DiBiasi, Annah Karam, Chief Human Resources Officer, briefly reviewed the reports and discussion that were reviewed at the committee meeting. A copy of the Human Resources Committee’s September 26, 2023, special meeting minutes were also included on the board tablets.																					
<b>Finance Committee</b> <b>Proposed Action – Approve August 2023 Financial Statement (Unaudited).</b>	<p>Steve Barron, CEO, reviewed the Executive Summary of the August 2023 Financial report. A copy of the Finance Committee’s September 26, 2023, meeting minutes were also included on the board tablet.</p> <p>It is noted that approval is recommended by the Finance Committee.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1333 1255 1509"> <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>Absent</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Absent</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Absent	Rader	Yes	Rutledge	Absent	Stevens	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		<b>M.S.C., (Rader/Swerdlow), the SGMH Board of Directors approved the August 2023 Financial Statement as presented.</b>
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Absent																			
Rader	Yes	Rutledge	Absent																			
Stevens	Yes	Swerdlow	Yes																			
Tankersley	Yes	Motion carried.																				
<b>Proposed Action – Approve the FY 23-24 Salary Program</b>	<p>Steve Barron, CEO, discussed the FY 23-24 Salary Program. This program would include a 3% general pay increase for SGMH associates.</p> <p>It is noted that approval is recommended by the Finance Committee.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1766 1255 1900"> <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>Absent</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Absent</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> </table>	DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Absent	Rader	Yes	Rutledge	Absent	Stevens	Yes	Swerdlow	Yes	<b>M.S.C., (McDougall/Swerdlow), the SGMH Board of Directors approved the FY 23-24 Salary Program.</b>				
DiBiasi	Yes	Goldstein	Yes																			
McDougall	Yes	Petersen	Absent																			
Rader	Yes	Rutledge	Absent																			
Stevens	Yes	Swerdlow	Yes																			

AGENDA ITEM			ACTION / FOLLOW-UP																				
	Tankersley	Yes	Motion carried.																				
<b>Proposed Action - Recommend Approval to the Healthcare District Board of Additional Funding for the Acquisition of New Fluoroscopy Equipment and Construction Associated with Installation</b>	<p>John Peleuses, VP, Ancillary and Support Svcs., reported on the need for the acquisition of new fluoroscopy equipment and construction associated with the installation at the September board meeting. The Healthcare District Board asked that the purchase not exceed \$1.2M.</p> <p>After reviewing bids for construction, the total exceeds \$1.2M. John is asking for the approval of the additional funds to move forward with this project.</p> <p>It is noted that approval is recommended by the Finance Committee.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 764 1255 940"> <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>Absent</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Absent</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>		DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Absent	Rader	Yes	Rutledge	Absent	Stevens	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (Rader/Swerdlow), the SGMH Board of Directors voted to recommend approval of the Additional Funding for the Acquisition of New Fluoroscopy Equipment and Construction Associated with Installation to the Healthcare District Board.</b></p>
DiBiasi	Yes	Goldstein	Yes																				
McDougall	Yes	Petersen	Absent																				
Rader	Yes	Rutledge	Absent																				
Stevens	Yes	Swerdlow	Yes																				
Tankersley	Yes	Motion carried.																					
<b>Community Planning Committee</b>	<p>Susan DiBiasi gave the Community Planning Committee report as informational. A copy of the Committee’s September 26, 2023, special meeting minutes were also included on the board tablets.</p>																						
<b>Proposed Action – Approve Policies and Procedures</b>	<p>There were Ten (10) policies and procedures included on the board tablets presented for approval by the Board.</p> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1262 1255 1438"> <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>Absent</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Absent</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>		DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Absent	Rader	Yes	Rutledge	Absent	Stevens	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		<p><b>M.S.C., (McDougall/Stevens), the SGMH Board of Directors approved the policies and procedures as submitted.</b></p>
DiBiasi	Yes	Goldstein	Yes																				
McDougall	Yes	Petersen	Absent																				
Rader	Yes	Rutledge	Absent																				
Stevens	Yes	Swerdlow	Yes																				
Tankersley	Yes	Motion carried.																					
<b>Chief of Staff Report</b>  <b>Proposed Action – Approve Recommendations of the Medical Executive Committee</b>	<p>Raffi Sahagian, MD, Chief of Staff, briefly reviewed the Medical Executive Committee report as included on the board tablets.</p> <p>Approval Items:</p> <ul style="list-style-type: none"> <li>2023 Annual Approval of Policies &amp; Procedures (the listing provided by the Medical Staff, was included on the board tablets)</li> </ul> <p><b>BOARD MEMBER ROLL CALL:</b></p> <table border="1" data-bbox="383 1772 1255 1873"> <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>Absent</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Absent</td> </tr> </table>		DiBiasi	Yes	Goldstein	Yes	McDougall	Yes	Petersen	Absent	Rader	Yes	Rutledge	Absent	<p><b>M.S.C., (McDougall/Rader), the SGMH Board of Directors approved the Medical Executive Committee recommended approval items as submitted.</b></p>								
DiBiasi	Yes	Goldstein	Yes																				
McDougall	Yes	Petersen	Absent																				
Rader	Yes	Rutledge	Absent																				

AGENDA ITEM					ACTION / FOLLOW-UP
	Stevens	Yes	Swerdlow	Yes	
	Tankersley	Yes	Motion carried.		
<b>Community Benefit events/Announcements/and newspaper articles</b>	Miscellaneous information was included on the board tablets.				
<b>Future Agenda Items</b>	<ul style="list-style-type: none"> <li>• None</li> </ul>				
<b>Adjourn to Closed Session</b>	<p>Chair, DiBiasi reported the items to be reviewed and discussed and/or acted upon during Closed Session will be:</p> <ul style="list-style-type: none"> <li>➤ Recommend approval to the Healthcare District Board – Medical Staff Credentialing</li> <li>➤ Receive Quarterly Environment of Care/Life Safety/Utility Management Report</li> </ul> <p>The meeting adjourned to Closed Session at 5:03 pm.</p>				
<b>Reconvene to Open Session</b>	<p>The meeting adjourned from closed session at 5:30 pm.</p> <p>At the request of Chair DiBiasi, Ariel Whitley reported on the actions taken/information received during the Closed Session as follows:</p> <ul style="list-style-type: none"> <li>➤ Recommended approval to the Healthcare District Board – Medical Staff Credentialing</li> <li>➤ Received Quarterly Environment of Care/Life Safety/Utility Management Report</li> </ul>				
<b>Adjourn</b>	The meeting was adjourned at 5:33 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**



# November 2023

## Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7 <b>4:00 pm Hospital Board Meeting</b> <b>6:00 pm Healthcare District Board Meeting</b>	8	9	10 <i>Beaumont Chamber Breakfast @7:30 AM</i>	11 <i>Veterans Day</i>
12	13	14 <i>Calimesa Chamber Breakfast @7:30 AM</i>	15 <i>Banning Chamber Breakfast @7AM</i>  <b>5:00 pm Measure H Mtg.</b> <b>5:15 pm Measure A Mtg.</b>	16	17	18
19	20	21	22	23 <i>Thanksgiving Day!</i> <i>Administration Closed</i>	24 <i>Administration Closed</i>	25
26	27	28 <b>9:00 am Finance Committee</b>	29	30		

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

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



# December 2023

## Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2 <i>Calimesa Christmas Light Parade @5:00PM</i>
3	4	5 <b>4:00 pm Hospital Board Meeting</b> <b>6:00 pm Healthcare District Board Meeting</b>	6	7	8 <i>Beaumont Chamber Breakfast @7:30 AM</i>	9
10	11	12 <i>Calimesa Chamber Breakfast @7:30 AM</i>	13	14	15	16
17	18	19	20 <i>Banning Chamber Breakfast @7AM</i>	21	22	23
24	25 	26 <b>9:00 am Finance Committee</b>	27	28	29	30
31 <i>New Year's Eve</i>						

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

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



# January 2024

## Board of Directors Calendar

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

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

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

**TAB C**



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

Our verge (incident report) system has been updated to the latest, best practice model. We are still in the process of working out a few kinks but the transition from the older model to the latest version went well.

There was an unforeseen delay in construction with the CT scanner in the ED. The Joint Commission accreditation will have to be delayed. We are in the process of rescheduling for mid-January.

CMS requires hospital-wide programs for infection control & prevention and antibiotic stewardship. These programs must demonstrate adherence to guidelines, as well as best practices. These programs must also be addressed in collaboration with quality and performance improvement. 482.42 Condition of Participation states that those qualified persons over these programs/departments are appointed by the governing board based on the recommendations of medical staff and nursing leadership. On 10/16/2023 Medical Staff were in favor of recommending Tracie Hudson, Mia Simms-Bullock, and Jose Lopez. It is the recommendation of both medical staff and nursing leadership that the board appoints these individuals.

**TAB D**



**Resolution No. 2023-02**

BE IT RESOLVED BY THE San Gorgonio Memorial Hospital Board of Directors  
(Governing Body)

OF THE San Gorgonio Memorial Hospital THAT  
(Name of Applicant)

Cosmina Maja, Director Information Technology, OR  
(Name or Title of Authorized Agent)

is hereby authorized to execute for and on behalf of the named Applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Security and subgranted through the State of California for the following Grant Award:

FY 2023 Nonprofit Security Grant Program  
(List Grant Year and Program)

Passed and approved this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**Certification**

I, \_\_\_\_\_, duly appointed and  
(Name)

\_\_\_\_\_ Of the San Gorgonio Memorial Hospital Board of Directors  
(Title) (Governing Body)

do hereby certify that the above is a true and correct copy of a resolution passed and approved by the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Official Position)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)





October 19, 2023

William Webster  
Principal  
San Geronio Memorial Hospital  
600 North Highland Springs Avenue  
Banning, CA 92220

Subject: **NOTIFICATION OF SUBRECIPIENT SUBAWARD APPROVAL**  
Fiscal Year (FY) 2023 Nonprofit Security Grant Program (NSGP)  
Subaward #2023-0049, Cal OES ID#TBD  
Subaward Period of Performance: September 1, 2023 to May 31, 2026

Dear William Webster:

We are pleased to announce the approval of your FY 2023 NSGP subaward in the amount of \$149,760.

Once the completed application is received and approved, reimbursement of eligible subaward expenditures may be requested using the California Governor's Office of Emergency Services (Cal OES) Financial Management Forms Workbook. Failure to provide documentation in a timely manner could result in a hold on funding, pursuant to Title 2, Code of Federal Regulations (CFR), Sections 200.338(a) and 200.207(b)(1)-(2).

This subaward is subject to requirements in 2 CFR, Part 200, including the Notice of Funding Opportunity (NOFO), the Preparedness Grants Manual, the California Supplement to the NOFO, and all applicable federal, state, and local requirements. All activities funded with this subaward must be completed within the subaward period of performance.

Subrecipients must obtain additional written approval **prior** to incurring costs for activities such as aviation, watercraft, allowability request logs, noncompetitive procurement, and projects requiring Environmental Planning and Historic Preservation review.



William Webster  
October 19, 2023  
Page 2 of 2

Your organization will be required to prepare and submit the Biannual Strategy Implementation Report (BSIR) to Cal OES via the Federal Emergency Management Agency Grants Reporting Tool (GRT) semi-annually for the duration of the subaward period of performance or until all activities are completed and the subaward is formally closed. Failure to submit required reports could result in subaward reduction, suspension, or termination. Throughout the subaward cycle, milestones set in the GRT will be used as indicators of project feasibility, performance, and grant management capacity. This information may also be used in assessing proposals in future grant opportunities.

Your dated signature is required on this letter. Please sign and return the original to your Cal OES Program Representative within 20 calendar days upon receipt and keep a copy for your records. For further assistance, please contact your Cal OES Program Representative.

Sincerely,

*Nancy Ward*

NANCY WARD  
Director

*Coswina Raja on behalf of SGMH*  
William Webster  
San Geronimo Memorial Hospital

*10.23.2023*  
Date

# TAB E



## *Mission*

To provide safe, high quality, personalized healthcare services

## *Vision*

Patients trust San Gorgonio Memorial Hospital to provide safe, personalized healthcare services.

## *Values*

We make those we serve our highest priority

We respect privacy and confidentiality

We communicate effectively

We conduct ourselves professionally

We have a sense of ownership

We are committed to each other and to our community

*We Care for Our Community*

*Safe Care • Quality Care • **Our Care***

*Safe, Great, Modern Healthcare*

Approved by the Board of Directors  
December 6, 2022

**TAB F**

HOSPITAL BOARD  
2024 MEETING DATES FOR BOARD APPROVAL

**Hospital Board – meeting begins at 4:00 pm**

Tuesday, January 2  
Tuesday, February 6  
Tuesday, March 5  
Tuesday, April 2  
Tuesday, May 7  
Tuesday, June 4  
Tuesday, July 2  
Tuesday, August 6  
Tuesday, September 3  
Tuesday, October 1  
Tuesday, November 5  
Tuesday, December 3

**Executive Committee – 10:00 am**

Tuesday, March 26  
Tuesday, June 25  
Tuesday, September 24  
Tuesday, December 17

**Finance Committee – meeting begins at 9:00 am**

Tuesday, January 30  
Tuesday, February 27  
Tuesday, March 26  
Tuesday, April 30  
Tuesday, May 28  
Tuesday, June 25  
Tuesday, July 30  
Tuesday, August 27  
Tuesday, September 24  
Tuesday, October 29  
Tuesday, November 26  
Tuesday, December 17 → Administration is closed on December 31.

**Human Resources Committee – meeting begins at 9:00 am**

Wednesday, January 17, 2024  
Wednesday, April 17, 2024  
Wednesday, July 17, 2024  
Wednesday, October 16, 2024

**Community Planning Committee – meeting begins at 10:00 am**

Wednesday, January 17, 2024  
Wednesday, April 17, 2024  
Wednesday, July 17, 2024  
Wednesday, October 16, 2024

**TAB G**



## 2023 SLATE OF OFFICERS

POSITION

NAME

Chair

Susan DiBiasi

Vice Chair

Steve Rutledge

Secretary

Ron Rader

Treasurer

Darrell Petersen



TAB H

REGULAR MEETING OF THE  
SAN GORGONIO MEMORIAL HOSPITAL  
BOARD OF DIRECTORS

FINANCE COMMITTEE  
October 31, 2023

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

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

Members Absent: None

Required Staff: Steve Barron (CEO), Daniel Heckathorne (CFO), Ariel Whitley (Executive Assistant), Annah Karam (CHRO), Angela Brady (CNE)

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP
<b>Call To Order</b>	Susan DiBiasi called the meeting to order at 9:03 am.	
<b>Public Comment</b>	No public present.	
<b>OLD BUSINESS</b>		
<b>Proposed Action - Approve Minutes September 26, 2023, regular meeting</b>	Susan DiBiasi asked for any changes or corrections to the minutes of the September 26, 2023, regular meeting. There were none.	<b>The minutes of the September 26, 2023, regular meeting will stand correct as presented.</b>
<b>NEW BUSINESS</b>		
<b>Proposed Action – Recommend Approval to Hospital Board of Directors - Monthly Financial Report (Unaudited) – September 2023</b>	<p>Daniel Heckathorne, CFO, reviewed the Unaudited September 2023 finance report as included in the committee packets.</p> <p>The month of September resulted in negative \$1.9M EBIDA compared to budgeted negative EBIDA of \$1.083M and a Flex Budget loss of \$1.35M.</p> <p>For the month of September, Adjustments and Items of Note include:</p> <ul style="list-style-type: none"> <li>• September Patient Days and Adjusted Patient Days exceeded budget.</li> <li>• Emergency visits and Surgery cases were under budget.</li> <li>• The Average Length of Stay was 25% higher than September 2022, yet the overall Case Mix Index was only 7.4% higher than the previous year (1.58 vs 1.47).</li> </ul>	<b>M.S.C. (Rutledge/McDougall), the SGMH Finance Committee voted to recommend approval of the Unaudited September 2023 Financial report to the Hospital Board of Directors.</b>

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP								
	<p><b>ROLL CALL:</b></p> <table border="1" data-bbox="386 317 1211 390"> <tr> <td data-bbox="386 317 589 352">DiBiasi</td> <td data-bbox="589 317 797 352">Yes</td> <td data-bbox="797 317 1003 352">McDougall</td> <td data-bbox="1003 317 1211 352">Yes</td> </tr> <tr> <td data-bbox="386 352 589 390">Petersen</td> <td data-bbox="589 352 797 390">Yes</td> <td data-bbox="797 352 1003 390">Rutledge</td> <td data-bbox="1003 352 1211 390">Yes</td> </tr> </table> <p>Motion carried.</p>	DiBiasi	Yes	McDougall	Yes	Petersen	Yes	Rutledge	Yes	
DiBiasi	Yes	McDougall	Yes							
Petersen	Yes	Rutledge	Yes							
<b>Future Agenda Items</b>	<ul style="list-style-type: none"> <li>• Audit</li> <li>• LOC Renewal</li> </ul>									
<b>Next Meeting</b>	The next regular Finance Committee meeting will be held on November 28, 2023 @ 9:00 am.									
<b>Adjournment</b>	The meeting was adjourned at 10:01am.									

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**

**THREE MONTHS ENDING SEPTEMBER 30, 2023**

**FY 2024**

**Certification Statement:**

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

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

Certified by:

*Daniel R. Heckathorne*

**Daniel R. Heckathorne**

CFO

# San Geronio Memorial Hospital

## Financial Report - Executive Summary

For the Month of September, 2023 and Three Months Ended September 30, 2023 (Unaudited)

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

The month of September resulted in negative \$1.19M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted negative EBIDA of \$1.083M and a Flex Budget loss of \$1.35M.

**YTD** - Three months ending in September resulted in negative \$6.34M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted negative EBIDA of \$2.98M and a Flex Budget loss of \$4.01M. Note: If the unaccrued Supplemental funds, along with provision for lease principal payments were booked, the YTD EBIDA would be a negative \$2.00M, as compared to the actual negative booked \$6.34M.

**Note 1:** The new Premier Budget and Financial Reporting System (BFR) allows the Income Statements to be presented in two ways: a) The traditional comparison of Actual outcomes to Budgeted amounts and b) A comparison that adjusts Budgeted Amounts in accordance with increases or decreases in budgeted Workloads. This is referred to as the “Flex Budget”. This tool, which does not supplant the actual budget, allows leadership to view outcomes adjusted for variances in Workload Volumes.

#### **Month – Adjustments and Items of Note:**

- September Patient Days and Adjusted Patient Days exceeded budget.
- Emergency visits and Surgery cases were under budget.
- The Average Length of Stay was 25% higher than September, 2022, yet the overall Case Mix Index was only 7.4% higher than the previous year (1.58 vs. 1.47).

**Month** – September’s inpatient average daily census was 25.1. Adjusted Patient Days were 8.4% over budget (2,038 vs. 1,880), and Patient Days were 12% over budget (754 vs. 672). Emergency Visits were 7.3% under budget (3,502 vs. 3,779), and Surgeries were 20% under budget (107 vs. 133).

**YTD** - Inpatient average daily census was 21.6. Adjusted Patient Days were 1.0% over budget (5,698 vs. 5,642), Patient Days were 2.8% below budget (1,983 vs. 2,040). Emergency Visits were 8% under budget (10,357 vs. 11,272), and Surgeries were 13.6% under budget (356 vs. 412). Observation Days were 10.9% higher than the previous year (863 vs. 778).

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

**Month** - Net Patient Revenues in September were \$6K (0.11%) over the budgeted \$5.58M. There was a favorable \$1.0M YTD Net Revenue adjustment which was recorded in September. Other items of note included the fact that Inpatient Days were 12% over budget and the Adjusted Patient Days were 8% over budget, nevertheless the 4.19 Average Length of Stay was 25% over budget (4.19 compared to the budgeted 3.36), and Surgeries and Emergency visits were also under budget. Concurrently the overall Case Mix Index which is a measurement of the “intensity” of Inpatients in the Hospital was a CMI of 1.58 which was only 7.4% higher than the previous year. These factors may have a down-the-road impact on the estimated Net Revenues booked in September.

**YTD** – Net Patient Revenues in September were \$13.74M compared to budgeted \$16.95M (-18.9%). This was impacted by the notes in the previous paragraph, plus the YTD Inpatient Days being 2.8% below budget, the E/R visits being 8% below budget and Inpatient Surgeries being 33% (42 cases) below budget. Additionally, in July the Outpatient Medi-Cal and Medi-Cal HMO Revenues were a combined \$937K over the “Flex Revenues” budget, and these are among the lowest paying plans in the Hospitals revenue repertoire, thus having minimal positive impact to Net Revenues.

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

**Month** – Operating Revenue in September was \$131K under budget. This is mostly impacted by the Net Patient Revenues being \$6K over budget and the Non-Patient Revenues being \$137K under budget.

YTD - Operating Revenue through September was \$3.37M under budget. This is impacted by the Net Patient Revenues being \$3.21M under budget and the Non-Patient Revenues being \$164K under budget.

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

**Month** - Operating Expenses in September were \$7.31M and were under budget by \$23K. Key items that impacted overall Expenses were as follows: 1) Salaries and Wages, Benefits, and Contract Labor were collectively \$122K under budget and \$118K under the Flex budget. This was driven by a) The overall PTO accrual being reduced by \$128K, b) full-time orientation costs for 2 new grads in the Emergency Department, and c) Contract Labor was over budget by \$108K due to several nurse staffing vacancies in O.B, ICU, and Emergency Departments. 2) Professional Fees were over budget due to a) Legal Fees being \$82K over budget along with b) various Service Agreements (mostly one-time) being \$41K over budget; 3) Repairs and Maintenance were \$66K over budget, of which \$64K related to numerous repairs in the Plant Operations area including A/C work, repairs, and electrical testing.

**Year-to Date** – Operating Expenses in September were \$22.04M and were under budget by \$114K. Key items that impacted overall Expenses were as follows: 1) Salaries and Wages, Benefits, and Contract Labor were collectively \$380K over budget and \$705K over the Flex budget. This was driven by the following: a) The \$527K State Mandated California Paid Sick Leave program that was accrued for the had to be accrued for the entire year in July; b) Contract Labor was over budget by \$208K due to several nurse staffing vacancies in the Obstetrics and Emergency Department along with orientation of 2 new grads in the Emergency Department; 2) Purchased Services are \$141K over budget which included Legal Fees exceeding budget by \$167K; and 3) Supplies are the most notable item under budget by \$374K, again reflected by lower than anticipated intensities of services, including Inpatient Surgeries and Emergency visits being under budget.

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

Patient cash collections in September totaled \$4.52M compared to August's \$5.00M and \$4.29M in July. Gross Accounts Receivable Days in September were 65.6 compared to 66.2 in August and 66.9 in July. Gross Accounts Receivables and Allowance Reserves are both "grossed up" by \$1.30M to reflect the value of Credit Balances in the A/R.

Cash Balances were \$9.56M in September compared to \$5.96M in August and \$8.59M in July. (Note: the \$4.87M transferred from the Hospital for the August 1<sup>st</sup> G.O. Bonds payments was returned to the Hospital from the Trustee U.S. Bank as of Friday, September 22.) Accounts Payable increased from \$9.76M in August to \$11.59M in September. Finally, a liability is in place reflecting \$378K for July-September (plus \$1.5M for FY 2022 & 1.51M for FY 2023) payable to Medicare for estimated overpayments for outliers and sequestration funds.

### **Summary**

#### **Positive takeaways:**

1) Continued increased Patient Days in August and September.

#### **Negative takeaways:**

- 1) Inpatient Surgeries continue to lag, and ALOS is up.
- 2) September EBIDA, adjusted for pending revised Supplemental Income and reserving for Cash Payments required for Leases was a positive \$312K, however the YTD is still a negative \$2.0M.

**SGMH SEPTEMBER 2023 EXTRAORDINARY ITEMS**

10/26/2023

EXPENSE		INCOME		GAIN/(LOSS)
<b>SALARIES / BENEFITS/ CONTRACT LABOR</b>		<b>REVENUES</b>		
CONTRACT LABOR OVER BUDGET DUE TO STAFF VACANCIES	107,973	NET REVENUES UNDER BUDGET	(993,850)	
LEGAL FEES OVER BUDGET	167,076	3 MONTH NET COLLECTION REVISION	1,000,000	
REPAIRS OVER BUDGET	65,901	<b>OTHER REVENUES</b>		
		OTHER REVENUES UNDER BUDGET	(123,233)	
<b>OTHER EXPENSE</b>		<b>OTHER:</b>		
<b>EXTRAORDINARY NEGATIVE EXPENSES</b>	<b>340,950</b>	<b>EXTRAORDINARY NEGATIVE REVENUES</b>	<b>(117,083)</b>	<b>(458,033)</b>

4

## STATISTICS

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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

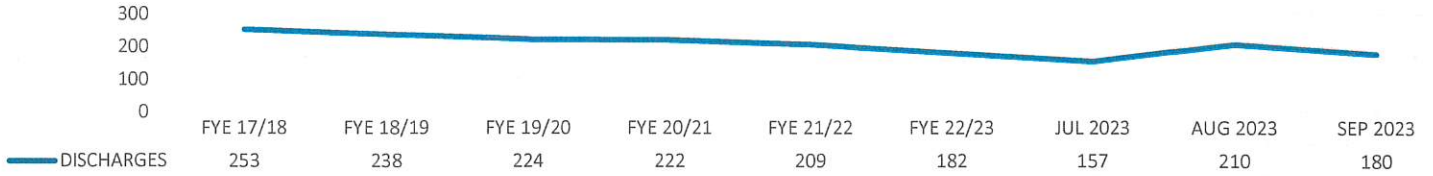
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67 Worked FTEs ( includes Registry FTEs)	Represents an equivalency of full-time staff worked. One FTE is equivalent of working 40 hours per week, 80 hours per pay period, 173.3 hours per 30 day month, or 2,080 hours in a 52 week year. This calculation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

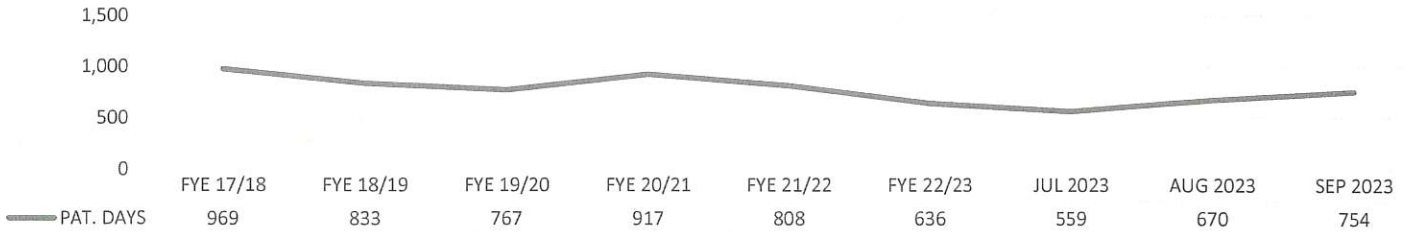


# SAN GORGONIO MEMORIAL HOSPITAL

## INPATIENT DISCHARGES



## INPATIENT DAYS



## AVERAGE LENGTH OF STAY

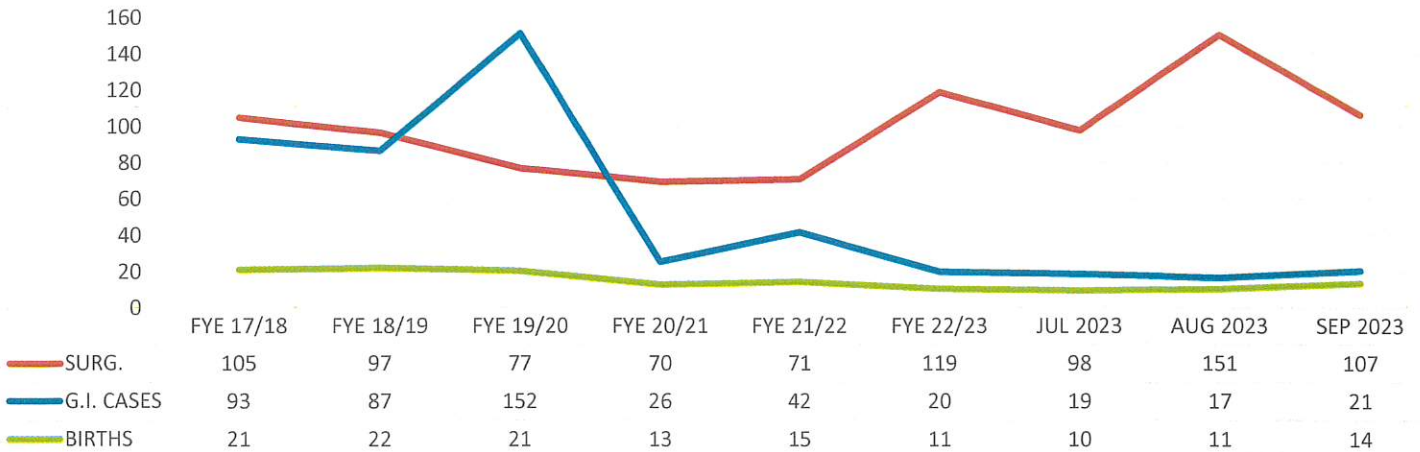


## EMERGENCY VISITS

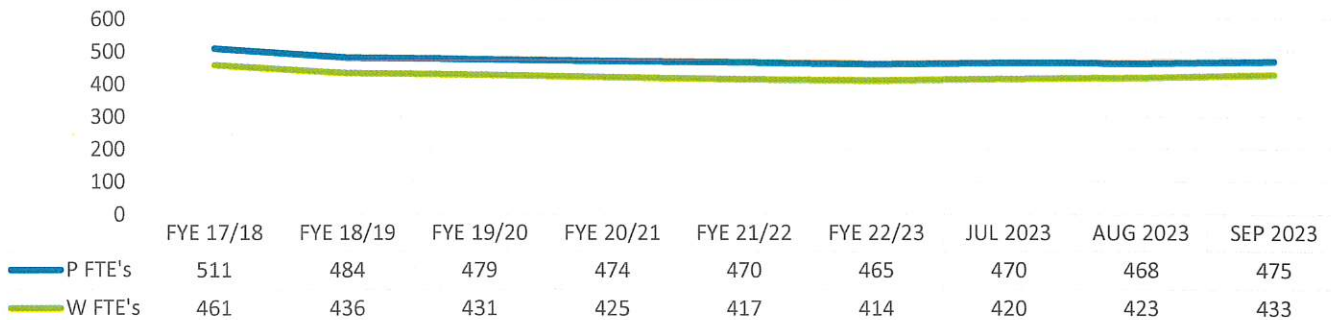


# SAN GORGONIO MEMORIAL HOSPITAL

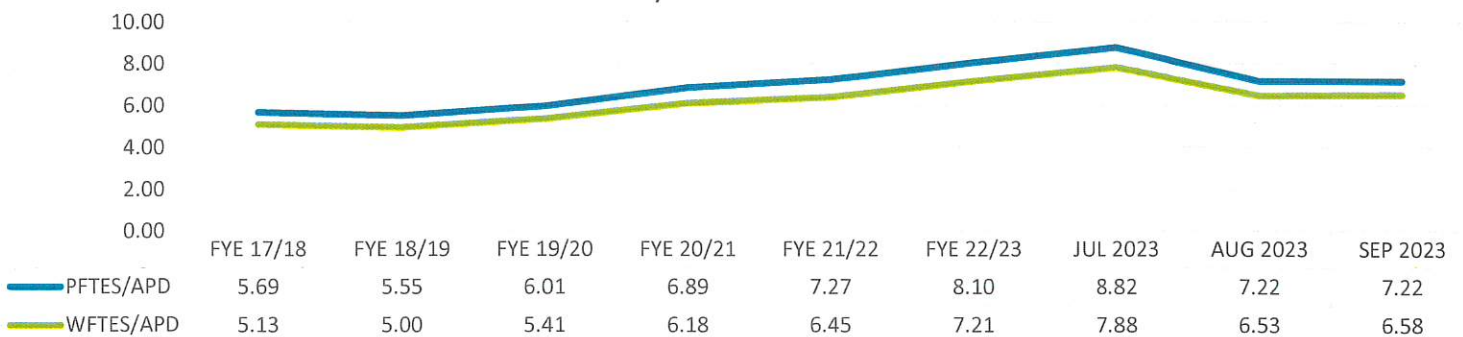
## SURGERY CASES, G.I. CASES, N/B DELIVERIES



## PAID & WORKED FTE'S



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



## INCOME STATEMENT

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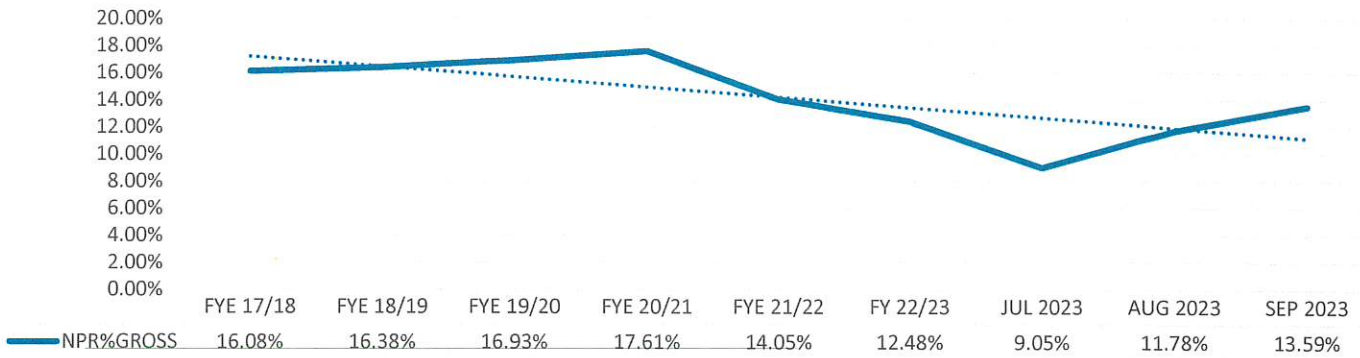
Gross Patient Revenue (000's) (Monthly Ave.)	Represents total charges (before discounts and allowances) made for all patient services provided.
Net Patient Revenue (NPR) (000's) (Monthly Ave.)	Equals the sum of all (patient) charges for services provided that are due to the hospital, less estimated adjustments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

# SAN GORGONIO MEMORIAL HOSPITAL

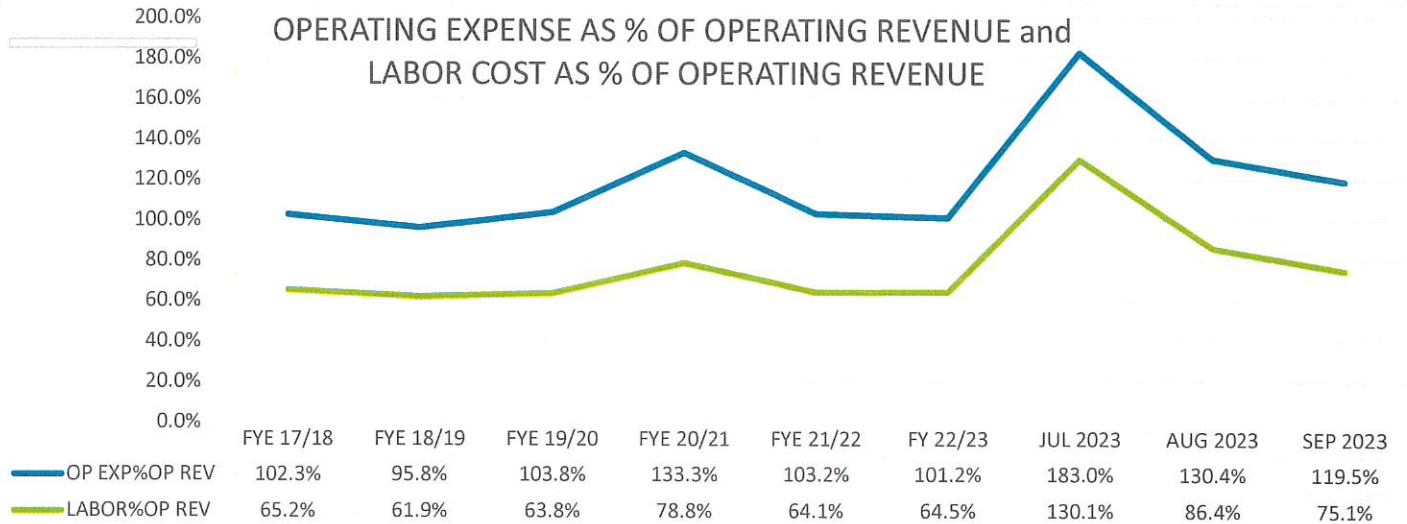
## GROSS PATIENT REVENUE (000's)



## NET PATIENT REVENUE AS % OF GROSS

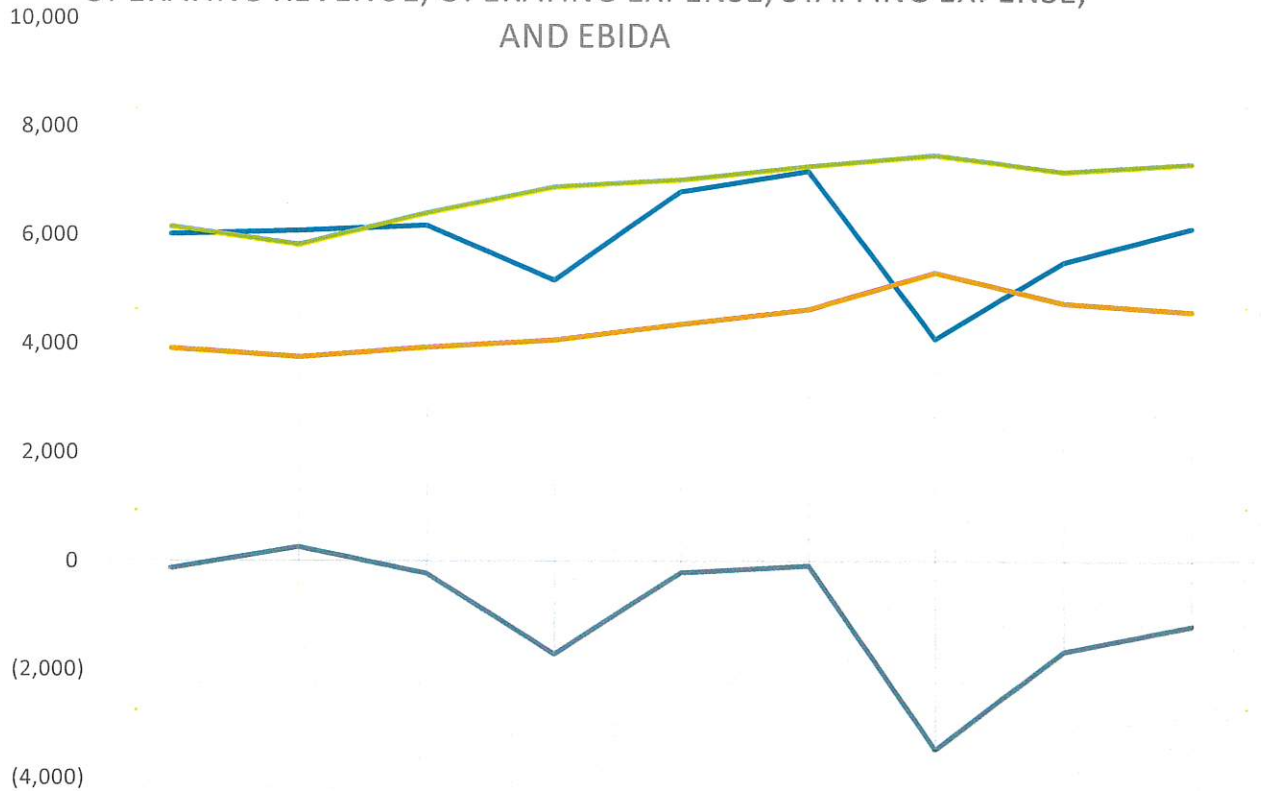


## OPERATING EXPENSE AS % OF OPERATING REVENUE and LABOR COST AS % OF OPERATING REVENUE



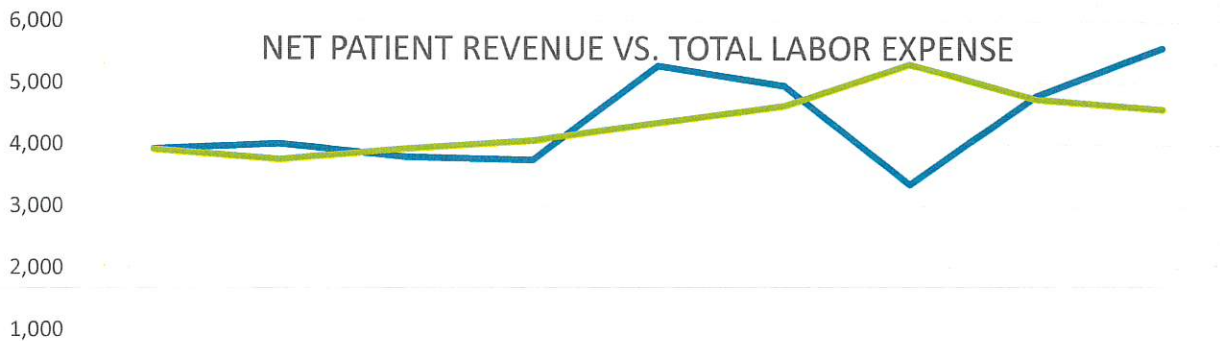
# SAN GORGONIO MEMORIAL HOSPITAL

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



	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	FYE 21/22	FY 22/23	JUL 2023	AUG 2023	SEP 2023
OP REV	6,006	6,069	6,165	5,160	6,791	7,172	4,078	5,495	6,118
OP EXP	6,147	5,817	6,398	6,878	7,007	7,257	7,461	7,164	7,310
STAFF EXP	3,915	3,755	3,932	4,065	4,354	4,626	5,303	4,746	4,593
EBIDA	(141)	252	(233)	(1,719)	(216)	(85)	(3,483)	(1,668)	(1,192)

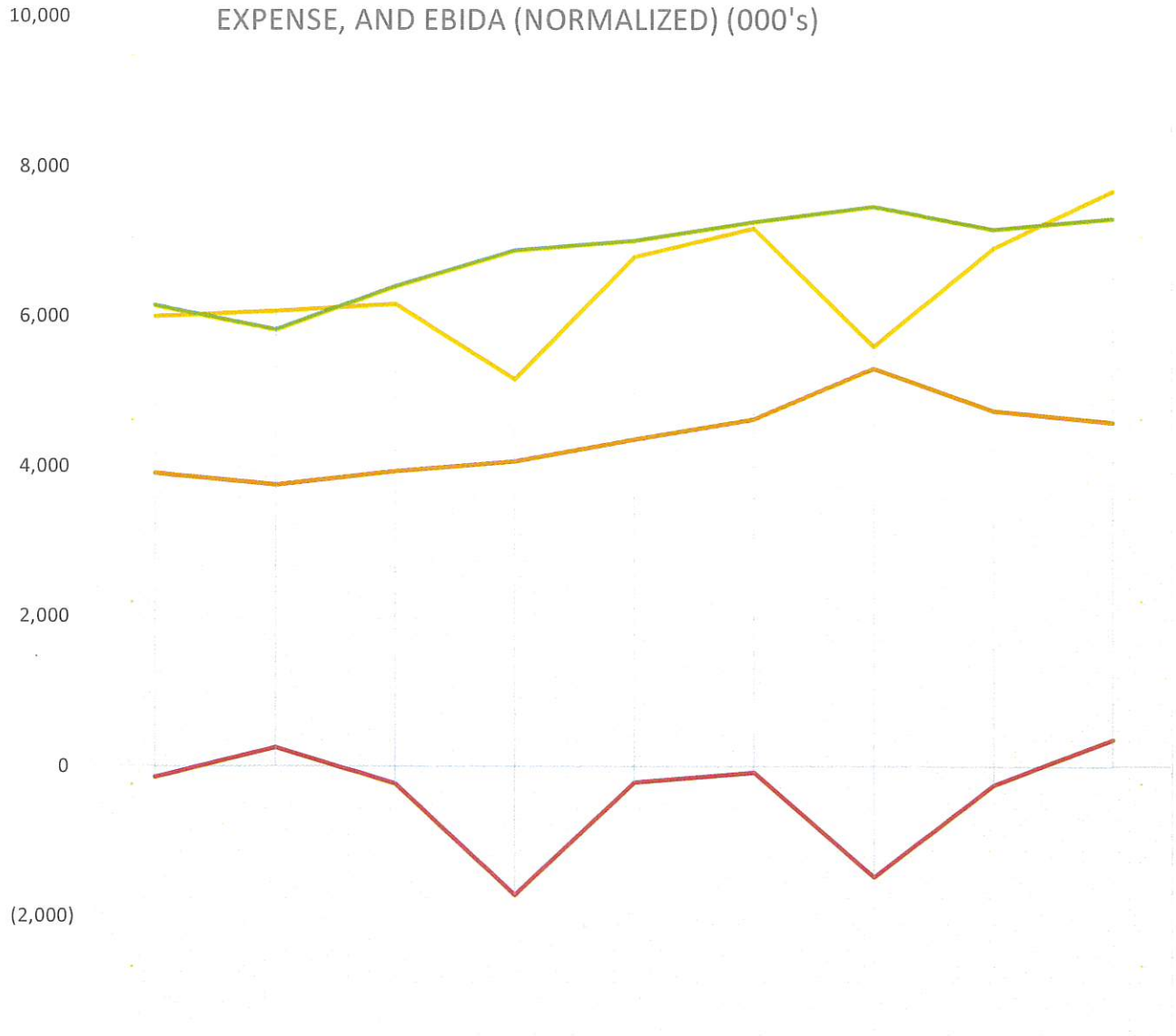
## NET PATIENT REVENUE VS. TOTAL LABOR EXPENSE



	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	FYE 21/22	FY 22/23	JUL 2023	AUG 2023	SEP 2023
NET PAT REV	3,921	4,003	3,795	3,744	5,275	4,952	3,358	4,799	5,587
LABOR EXP	3,915	3,755	3,932	4,065	4,354	4,626	5,303	4,746	4,593

# 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
REV NORMAL	6,006	6,069	6,165	5,160	6,791	7,172	5,600	6,916	7,675
OP EXP	6,147	5,817	6,398	6,878	7,007	7,257	7,461	7,164	7,310
LABOR EXP	3,915	3,755	3,932	4,065	4,354	4,626	5,303	4,746	4,593
EBIDA NORMAL	(141)	252	(233)	(1,719)	(216)	(85)	(1,478)	(247)	365

SAN GORGONIO HEALTHCARE DISTRICT & HOSPITAL - BANNING, CA

Month-to- Month FYE June 30, 2024

Statement of Revenue and Expense

	FYE18/19	FYE19/20	FYE 20/21	FYE 21/22	FYE 22/23	FYE 23/24	FYE 23/24	FYE 23/24
	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	12 MONTHLY AVE.	7/31/2023	8/31/2023	9/30/2023
<b>Gross Patient Revenue</b>								
Inpatient Revenue	\$ 7,667,883	\$ 7,401,282	\$ 9,331,371	\$ 16,603,390	\$ 14,104,379	\$ 12,272,477	\$ 13,826,953	\$ 15,201,247
Inpatient Psych/Rehab Revenue	0	0	0	0	0	-	-	-
Outpatient Revenue	16,765,365	15,067,104	11,933,682	20,932,075	25,582,152	24,819,128	26,907,760	25,923,098
Long Term Care Revenue	0	0	0	0	0	-	-	-
Home Health Revenue	0	0	0	0	0	-	-	-
<b>Total Gross Patient Revenue</b>	<b>24,433,247</b>	<b>22,468,386</b>	<b>21,265,053</b>	<b>37,535,465</b>	<b>39,686,530</b>	<b>37,091,605</b>	<b>40,734,713</b>	<b>41,124,345</b>
<b>Deductions From Revenue</b>								
Discounts and Allowances	(19,588,148)	(17,845,730)	(16,635,734)	(31,267,149)	(33,562,183)	(32,843,917)	(34,825,978)	(34,572,937)
Bad Debt Expense	(858,023)	(653,280)	(824,395)	(1,045,570)	(1,047,941)	(864,969)	(964,980)	(950,573)
GI HMO Discounts	0	0	0	0	0	0	0	0
Charity Care	(56,168)	(86,517)	(41,362)	(136,947)	(97,443)	(24,281)	(144,312)	(13,958)
<b>Total Deductions From Revenue</b>	<b>(20,502,339)</b>	<b>(18,585,527)</b>	<b>(17,501,490)</b>	<b>(32,449,666)</b>	<b>(34,707,567)</b>	<b>(33,733,167)</b>	<b>(35,935,270)</b>	<b>(35,537,468)</b>
	-83.9%	-82.7%	-82.3%	-86.5%	-87.5%	-90.9%	-88.2%	-86.4%
<b>Net Patient Revenue</b>	<b>3,930,908</b>	<b>3,882,859</b>	<b>3,763,563</b>	<b>5,085,799</b>	<b>4,978,963</b>	<b>3,358,438</b>	<b>4,799,443</b>	<b>5,586,877</b>
<b>Non-Patient Revenues</b>								
IGT/DSH Revenues	1,485,337	1,157,326	869,707	501,407	939,467	35,377	136,446	0
Grants & Other Op Revenues	205,590	750,434	505,190	725,066	873,887	115,377	158,046	129,370
Clinic Net Revenues	22,382	15,743	0	0	0	0	0	0
Tax Subsidies Measure D	196,524	199,469	209,744	229,405	246,994	246,994	246,994	246,994
Tax Subsidies Prop 13	115,388	114,061	142,552	146,104	154,500	154,500	154,500	154,500
Tax Subsidies County Suplmtl Funds	16,159	9,064	16,163	25,561	2,308	167,258	0	0
<b>Non-Patient Revenues</b>	<b>2,041,381</b>	<b>2,246,097</b>	<b>1,743,355</b>	<b>1,627,542</b>	<b>2,217,155</b>	<b>719,506</b>	<b>695,986</b>	<b>530,864</b>
<b>Total Operating Revenue</b>	<b>5,972,289</b>	<b>6,128,956</b>	<b>5,506,919</b>	<b>6,713,341</b>	<b>7,196,118</b>	<b>4,077,944</b>	<b>5,495,429</b>	<b>6,117,741</b>
<b>Operating Expenses</b>								
Salaries and Wages	2,941,226	3,104,224	3,125,159	3,420,974	3,600,025	4,119,595	3,674,360	3,550,566
Fringe Benefits	702,477	752,708	856,889	830,599	938,302	1,013,089	970,221	848,892
Contract Labor	106,628	59,516	114,886	99,977	87,455	170,728	101,775	193,746
Physicians Fees	246,631	331,858	350,783	330,533	317,726	280,402	260,382	307,954
Purchased Services	513,857	691,337	772,336	892,521	820,559	840,396	941,985	1,007,492
Supply Expense	685,518	751,025	903,883	995,446	876,735	700,018	814,829	906,328
Utilities	75,471	80,680	92,287	111,192	115,835	104,939	107,960	76,274
Repairs and Maintenance	58,325	58,592	139,712	77,524	90,737	61,860	69,232	147,878
Insurance Expense	85,267	103,277	110,683	112,745	122,476	185,434	133,116	147,115
All Other Operating Expenses	70,922	160,745	148,752	101,142	135,411	59,602	47,639	68,331
IGT Expense	58,743	109,484	172,366	0	91,499	0	0	0
Leases and Rentals	76,150	79,233	79,424	37,952	69,475	25,370	42,245	55,457
1206 (b) CLINIC	98,810	94,628	34,096	0	0	0	0	0
<b>Total Operating Expenses</b>	<b>5,720,023</b>	<b>6,377,306</b>	<b>6,901,255</b>	<b>7,010,605</b>	<b>7,266,235</b>	<b>7,561,433</b>	<b>7,163,744</b>	<b>7,310,033</b>
<b>EBIDA</b>	<b>252,266</b>	<b>(248,351)</b>	<b>(1,394,337)</b>	<b>(297,264)</b>	<b>(70,116)</b>	<b>(3,483,489)</b>	<b>(1,668,315)</b>	<b>(1,192,292)</b>
<b>Interest, Depreciation, and Amortization</b>								
Depreciation Expense	497,808	506,497	494,721	472,317	558,920	514,671	515,528	605,920
Interest & Amortization Expense	418,193	422,094	447,994	391,606	481,556	434,111	445,099	383,794
<b>Total Interest, Depr, &amp; Amort.</b>	<b>916,000</b>	<b>928,591</b>	<b>942,715</b>	<b>863,923</b>	<b>1,040,476</b>	<b>948,782</b>	<b>960,627</b>	<b>989,714</b>
<b>Non-Operating Revenue:</b>								
Contributions & Other	7,745	27,759	7,121	25,068	149,485	13,926	1,225,118	21,774
Tax Subsidies for GO Bonds - M-A	692,457	666,966	598,410	616,059	627,353	627,353	627,353	627,353
<b>Total Non Operating Revenue/(Expense)</b>	<b>700,202</b>	<b>694,725</b>	<b>605,531</b>	<b>641,127</b>	<b>776,839</b>	<b>641,279</b>	<b>1,852,471</b>	<b>649,127</b>
<b>Total Net Surplus/(Loss)</b>	<b>36,467</b>	<b>(482,217)</b>	<b>(1,731,521)</b>	<b>(520,060)</b>	<b>(333,754)</b>	<b>(3,790,992)</b>	<b>(776,471)</b>	<b>(1,532,879)</b>
Change in Interest in Foundation	0	0	0	0	0	0	0	0
Extra-ordinary Loss	0	(689,574)	(650)	(284,792)	0	0	0	0
<b>Increase/(Decrease in Unrestricted Net Assets)</b>	<b>\$ 36,467</b>	<b>\$ (1,171,791)</b>	<b>\$ (1,732,171)</b>	<b>\$ (804,852)</b>	<b>\$ (333,754)</b>	<b>\$ (3,790,992)</b>	<b>\$ (776,471)</b>	<b>\$ (1,532,879)</b>
<b>Total Profit Margin</b>	<b>0.6%</b>	<b>-7.9%</b>	<b>-31.4%</b>	<b>-7.7%</b>	<b>-4.6%</b>	<b>-93.0%</b>	<b>-14.1%</b>	<b>-25.1%</b>
<b>EBIDA %</b>	<b>4.2%</b>	<b>-4.1%</b>	<b>-25.3%</b>	<b>-4.4%</b>	<b>-1.0%</b>	<b>-85.4%</b>	<b>-30.4%</b>	<b>-19.5%</b>

Actual EBIDA for Month						(3,483,489)	(1,668,315)	(1,192,292)
Adjustments to EBIDA to account for Cash Impact of GASB Lease Reclassification						(52,549)	(52,549)	(52,549)
Adjustment for Normalization of Supplemental Income (Net of Current Month Receipts)						1,522,017	1,420,948	1,557,394
Effective EBIDA after Normalization of Supplementals & Adjustments for Cash Outlays for Leases						(2,014,021)	(299,916)	312,553
						YTD	(2,313,937)	(2,001,385)

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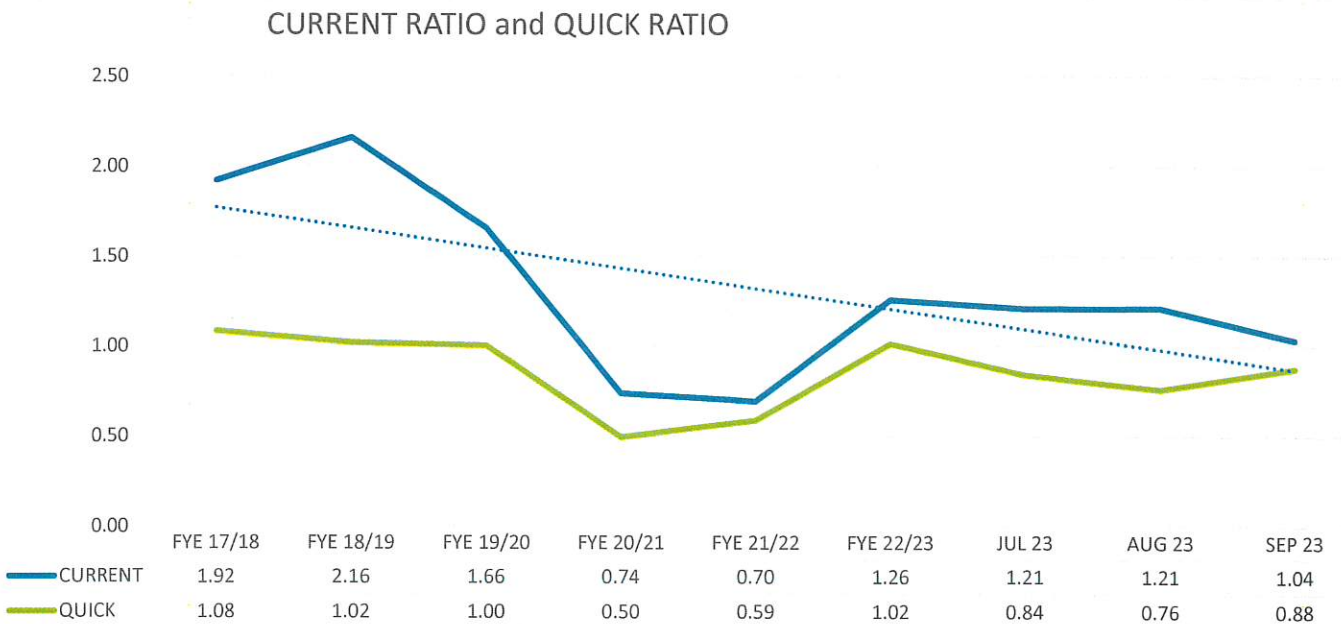
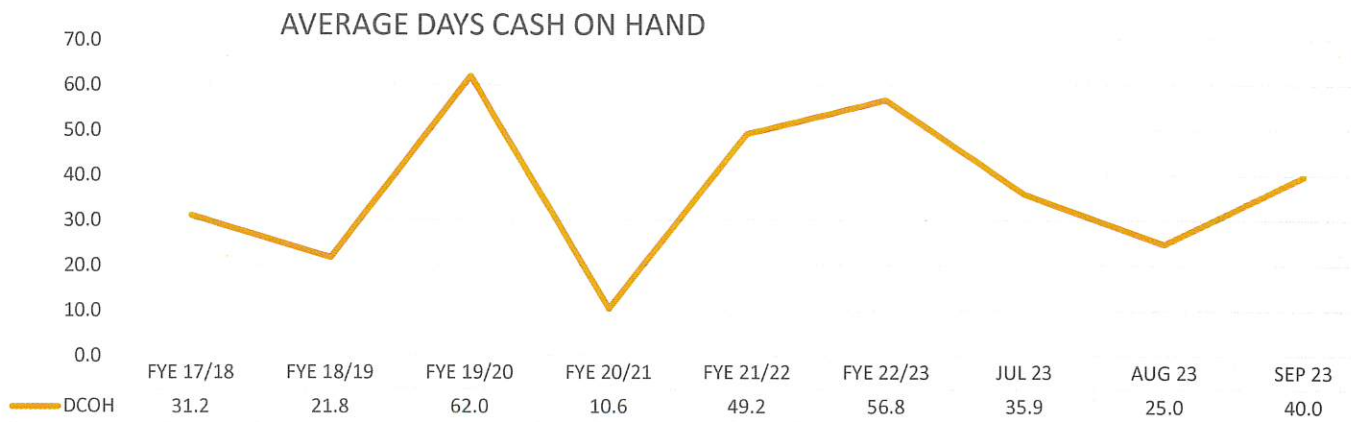
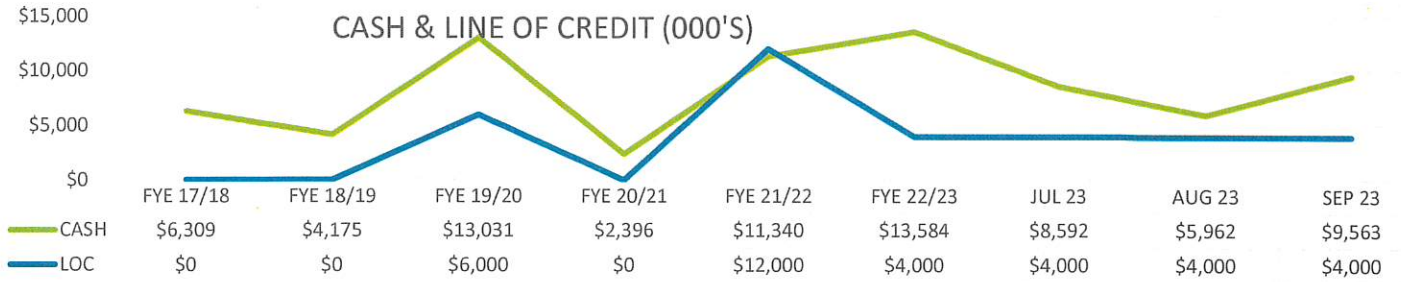
**BALANCE SHEET (Period End)**

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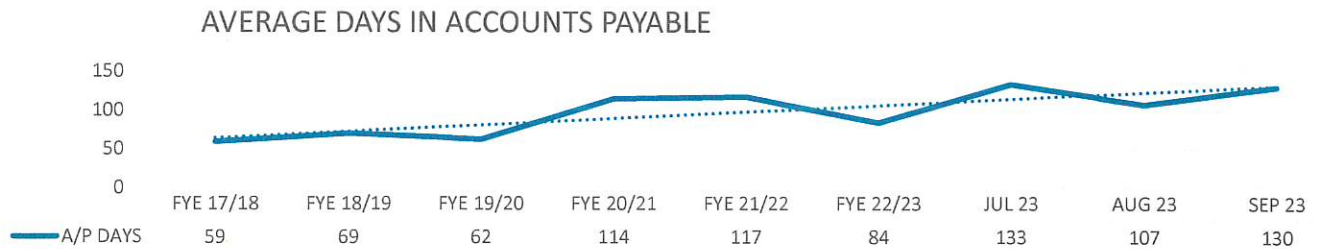
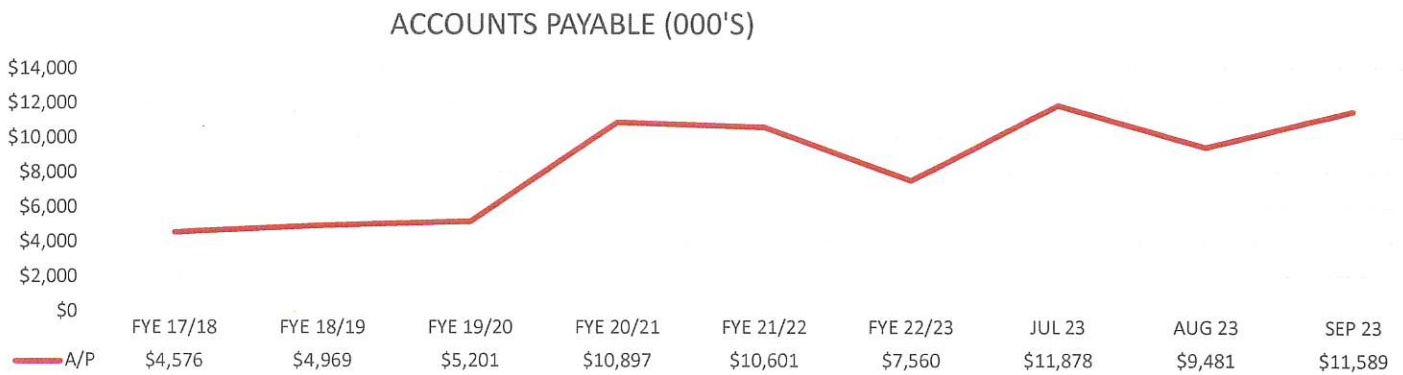
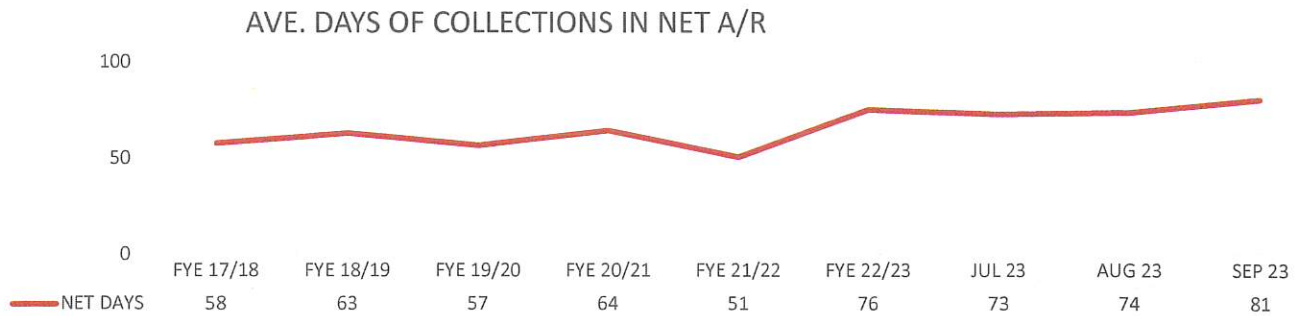
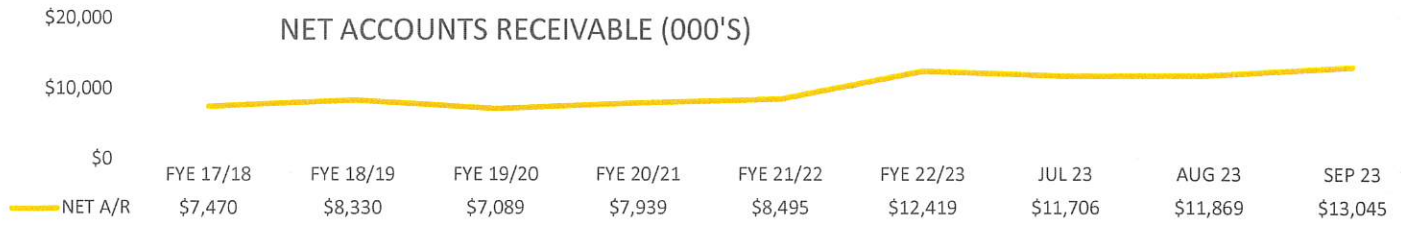
Cash (000's)	Represents all unrestricted cash in the bank at each month-end.
Days Cash on Hand	Calculated by dividing amount of Cash on Hand by the historical average daily amount of cash requirements to cover operating expenses.
Accounts Receivable - Net (000's)	Equals the sum of all (patient) accounts 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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# SAN GORGONIO MEMORIAL HOSPITAL



# SAN GORGONIO MEMORIAL HOSPITAL



# Income Statement Select Periods

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Sep 22 Act	Sep 23 Flex	Sep 23 BD	Sep 23 Act	Var (Sep 23 Act - Sep 23 BD)	Var%
NET INCOME	-2,570,070	-944,522	-684,329	-1,532,879	A -848,550	-124.00 %
EBIDA	-2,255,510	-1,346,794	-1,083,808	-1,192,292	B -108,484	-10.01 %
NET SERVICE REVENUE	4,996,271	5,956,595	6,249,157	6,117,741	C -131,416	-2.10 %
NET PATIENT REVENUE	4,474,237	5,288,165	5,580,727	5,586,877	D 6,150	0.11 %
OTHER OPERATING REVENUE	522,034	668,430	668,430	530,864	E -137,566	-20.58 %
TOTAL OPERATING EXPENSE	7,251,781	7,303,389	7,332,965	7,310,033	F 22,932	0.31 %
TOTAL OPERATING EXPENSE	7,251,781	7,303,389	7,332,965	7,310,033	G 22,932	0.31 %
TOTAL LABOR EXPENSE	4,350,287	4,710,903	4,715,324	4,593,204	H 122,120	2.59 %
PROFESSIONAL FEES	1,611,895	1,247,917	1,225,184	1,315,446	I -90,262	-7.37 %
SUPPLIES & OTHER EXPENSES	1,289,599	1,344,569	1,392,457	1,401,383	J -8,926	-0.64 %
NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	K -711,301	-52.29 %
TOTAL INTEREST & DEPRECIATION	955,572	958,156	960,949	989,714	L -28,765	-2.99 %

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# Income Statement Select Periods

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Sep 22 ActYTD	Sep 23 FlexYTD	Sep 23 BDYTD	Sep 23 ActYTD	Var (Sep 23 ActYTD - Sep 23 BDYTD)	Var%
NET INCOME	-3,758,159	-3,763,629	-2,743,291	-6,100,342	-3,357,051	-122.37 %
EBIDA	-3,996,762	-4,009,931	-2,984,426	-6,344,096	-3,359,670	-112.57 %
NET SERVICE REVENUE	16,821,956	17,457,399	19,061,392	15,691,114	-3,370,278	-17.68 %
NET PATIENT REVENUE	14,835,170	15,347,114	16,951,107	13,744,758	-3,206,349	-18.92 %
OTHER OPERATING REVENUE	1,986,786	2,110,285	2,110,285	1,946,356	-163,929	-7.77 %
TOTAL OPERATING EXPENSE	20,818,718	21,467,330	22,045,818	22,035,210	10,608	0.05 %
TOTAL OPERATING EXPENSE	20,818,718	21,467,330	22,045,818	22,035,210	10,608	0.05 %
TOTAL LABOR EXPENSE	13,411,198	13,937,609	14,263,194	14,642,972	-379,778	-2.66 %
PROFESSIONAL FEES	3,776,471	3,549,782	3,585,074	3,638,611	-53,537	-1.49 %
SUPPLIES & OTHER EXPENSES	3,631,049	3,979,939	4,197,550	3,753,627	443,923	10.58 %
NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60 %
TOTAL INTEREST & DEPRECIATION	3,068,888	2,877,680	2,882,847	2,899,123	-16,276	-0.56 %

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# Balance Sheet

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Jul 23 Act	Aug 23 Act	Sep 23 Act	Var Aug 23 Act	Var%
NET BALANCE SHEET	28	25	41		64.00 %
☐ TOTAL ASSETS	108,857,355	107,248,342	107,765,986	517,644	0.48 %
☐ TOTAL ASSETS	108,857,355	107,248,342	107,765,986	A 517,644	0.48 %
☐ CURRENT ASSETS	29,102,360	28,323,945	26,633,320	B -1,690,625	-5.97 %
☐ ASSETS WHICH USE IS LIMITED	9,523,613	9,519,381	12,127,256	C 2,607,875	27.40 %
☐ NET PROPERTY, PLANT, AND EQUIPMENT	69,972,999	69,386,966	68,989,789	D -397,177	-0.57 %
☐ OTHER ASSETS	258,383	18,050	15,621	E -2,429	-13.46 %
☐ TOTAL LIABILITIES & FUND BALANCE	108,857,327	107,248,317	107,765,945	F -517,628	-0.48 %
☐ TOTAL LIABILITIES	150,368,591	149,536,052	151,586,559	G -2,050,507	-1.37 %
☐ CURRENT LIABILITES	24,440,152	23,624,738	25,688,604	H -2,063,866	-8.74 %
☐ LONG TERM LIABILITIES	125,928,439	125,911,314	125,897,955	I 13,359	0.01 %
☐ NET ASSETS	-41,511,264	-42,287,735	-43,820,614	J 1,532,879	3.62 %
☐ NET ASSETS - UNRESTRICTED	-41,511,264	-42,287,735	-43,820,614	K 1,532,879	3.62 %

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## SAN GORGONIO MEMORIAL HOSPITAL

KEY STATISTICS AND RATIOS						
	09/30/22	09/30/23	09/30/23	2024 3 MOS. YTD ACTUAL	2024 3 MOS. YTD BUDGET	2023 YR END TOTAL
	ACTUAL FY23	ACTUAL FY 24	BUDGET FY 24	FY 24	FY 24	FY 23
[1] Total Acute Patient Days	616	754	672	1,983	2,040	7,636
[2] Average Daily Census	20.5	25.1	22.4	21.6	22.2	20.9
[3] Average Acute Length of Stay	3.31	4.19	3.36	3.63	3.43	3.49
[4] Patient Discharges	186	180	200	547	594	2,186
[5] Adjusted Patient Days	1,767	2,038	1,880	5,698	5,642	21,460
[6] Observation Days	273	268	286	863	852	3,160
[7] Total Emergency Room Visits	3,599	3,502	3,779	10,357	11,272	41,821
[8] Average ED Visits Per Day	120	117	126	113	123	115
[9] Total Surgeries (Excluding G.I.'s)	119	107	133	356	412	1,433
[10] Deliveries/Births	20	14	14	35	41	131

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# Income Statement Select Periods

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Sep 22 Act	Sep 23 Flex	Sep 23 BD	Sep 23 Act	Var (Sep 23 Act - Sep 23 BD)	Var%
NET INCOME	-2,570,070	-944,522	-684,329	-1,532,879	A -848,550	-124.00 %
EBIDA	-2,255,510	-1,346,794	-1,083,808	-1,192,292	B -108,484	-10.01 %
NET SERVICE REVENUE	4,996,271	5,956,595	6,249,157	6,117,741	C -131,416	-2.10 %
NET PATIENT REVENUE	4,474,237	5,288,165	5,580,727	5,586,877	D 6,150	0.11 %
GROSS REVENUE FROM PATIENT SERVICES	37,278,934	40,943,079	41,868,343	41,124,345	E -743,998	-1.78 %
TOTAL INPATIENT REVENUE	13,087,715	15,599,205	15,094,025	15,201,247	F 107,222	0.71 %
TOTAL OUTPATIENT REVENUE	24,191,219	25,343,874	26,774,318	25,923,098	G -851,220	-3.18 %
DEDUCTIONS FROM REVENUE	-32,804,697	-35,654,914	-36,287,616	-35,537,468	H 750,148	2.07 %
DEDUCTIONS FROM REVENUE	-32,804,697	-35,654,914	-36,287,616	-35,537,468	I 750,148	2.07 %
CONTRACTUAL ALLOWANCES	-32,804,697	-35,654,914	-36,287,616	-35,537,468	J 750,148	2.07 %
501052 - CONTRACTUAL ALLOWANCES	-31,691,213	-34,750,391	-35,367,042	-34,572,937	K 794,105	2.25 %
501153 - BAD DEBT EXPENSE	-685,695	-818,964	-833,497	-950,573	L -117,076	-14.05 %
501254 - CHARITY WRITE_OFFS	-427,789	-85,559	-87,077	-13,958	M 73,119	83.97 %
OTHER OPERATING REVENUE	522,034	668,430	668,430	530,864	N -137,566	-20.58 %
OTHER REVENUE - RATE RANGE	0	0	0	0	O 0	0.00 %
OTHER REVENUE - OTHER SUPPLEMENTALS	0	0	0	0	P 0	0.00 %
OTHER REVENUE - DSH	0	0	0	0	Q 0	0.00 %
OTHER REVENUE - P4P	0	0	0	0	R 0	0.00 %
OTHER REVENUE - OTHER	120,540	258,603	258,603	129,370	S -129,233	-49.97 %
OPERATING TAX REVENUES	401,494	409,827	409,827	401,494	T -8,333	-2.03 %
TOTAL OPERATING EXPENSE	7,251,781	7,303,389	7,332,965	7,310,033	U 22,932	0.31 %
TOTAL OPERATING EXPENSE	7,251,781	7,303,389	7,332,965	7,310,033	V 22,932	0.31 %
TOTAL LABOR EXPENSE	4,350,287	4,710,903	4,715,324	4,593,204	W 122,120	2.59 %
EMPLOYEE WAGES & BENEFITS	4,329,009	4,623,338	4,629,551	4,399,458	X 230,093	4.97 %
WAGES	3,324,352	3,637,719	3,633,361	3,550,566	Y 82,795	2.28 %
EMPLOYEE BENEFITS	1,004,657	985,619	996,190	848,892	Z 147,298	14.79 %
CONTRACT LABOR	21,278	87,565	85,773	193,746	AA -107,973	-125.88 %
PROFESSIONAL FEES	1,611,895	1,247,917	1,225,184	1,315,446	AB -90,262	-7.37 %
PROFESSIONAL FEES	1,611,895	1,247,917	1,225,184	1,315,446	AC -90,262	-7.37 %
PHYSICIAN FEES	286,687	312,187	312,187	307,954	AD 4,233	1.36 %
PURCHASED SERVICES	1,325,208	935,730	912,997	1,007,492	AE -94,495	-10.35 %



SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

	Sep 22 Act	Sep 23 Flex	Sep 23 BD	Sep 23 Act	Var (Sep 23 Act - Sep 23 BD)	Var%
☐ SUPPLIES & OTHER EXPENSES	1,289,599	1,344,569	1,392,457	1,401,383	-8,926	-0.64 %
☑ SUPPLY EXPENSE	850,659	877,683	924,987	906,328	18,659	2.02 %
☐ OTHER EXPENSES	438,940	466,886	467,470	495,055	-27,585	-5.90 %
☑ UTILITIES	171,657	109,915	109,915	76,274	33,641	30.61 %
☑ REPAIRS AND MAINTENANCE	32,625	81,981	81,977	147,878	-65,901	-80.39 %
☑ INSURANCE	173,709	146,289	146,289	147,116	-827	-0.57 %
☑ OTHER EXPENSES	60,949	83,327	83,915	68,331	15,584	18.57 %
☑ LEASE AND RENTALS	0	45,374	45,374	55,456	-10,082	-22.22 %
☐ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	-711,301	-52.29 %
☐ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	-711,301	-52.29 %
☐ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	-711,301	-52.29 %
☑ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	-711,301	-52.29 %
☐ TOTAL INTEREST & DEPRECIATION	955,572	958,156	960,949	989,714	-28,765	-2.99 %
☐ TOTAL INTEREST & DEPRECIATION	955,572	958,156	960,949	989,714	-28,765	-2.99 %
☐ TOTAL INTEREST & DEPRECIATION	955,572	958,156	960,949	989,714	-28,765	-2.99 %
☐ TOTAL INTEREST & DEPRECIATION	955,572	958,156	960,949	989,714	-28,765	-2.99 %
☑ DEPRECIATION	545,778	519,369	522,162	605,920	-83,758	-16.04 %
☐ INTEREST & AMORTIZATION	409,794	438,787	438,787	383,794	54,993	12.53 %
602928 - INTEREST EXPENSE	40,000	78,728	78,728	20,000	58,728	74.60 %
602929 - AMORTIZATION EXPENSE	369,794	360,059	360,059	363,794	-3,735	-1.04 %

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# Income Statement Select Periods

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Sep 22 ActYTD	Sep 23 FlexYTD	Sep 23 BDYTD	Sep 23 ActYTD	Var (Sep 23 ActYTD - Sep 23 BDYTD)	Var%
NET INCOME	-3,758,159	-3,763,629	-2,743,291	-6,100,342	-3,357,051	-122.37 %
EBIDA	-3,996,762	-4,009,931	-2,984,426	-6,344,096	-3,359,670	-112.57 %
NET SERVICE REVENUE	16,821,956	17,457,399	19,061,392	15,691,114	-3,370,278	-17.68 %
NET PATIENT REVENUE	14,835,170	15,347,114	16,951,107	13,744,758	-3,206,349	-18.92 %
GROSS REVENUE FROM PATIENT SERVICES	119,694,953	117,419,484	125,852,560	118,950,663	-6,901,897	-5.48 %
TOTAL INPATIENT REVENUE	45,113,452	42,041,588	45,765,252	41,300,677	-4,464,575	-9.76 %
TOTAL OUTPATIENT REVENUE	74,581,501	75,377,896	80,087,308	77,649,986	-2,437,322	-3.04 %
DEDUCTIONS FROM REVENUE	-104,859,783	-102,072,370	-108,901,453	-105,205,905	3,695,548	3.39 %
DEDUCTIONS FROM REVENUE	-104,859,783	-102,072,370	-108,901,453	-105,205,905	3,695,548	3.39 %
CONTRACTUAL ALLOWANCES	-104,859,783	-102,072,370	-108,901,453	-105,205,905	3,695,548	3.39 %
501052 - CONTRACTUAL ALLOWANCES	-101,954,482	-99,482,913	-106,138,751	-102,242,832	3,895,919	3.67 %
501153 - BAD DEBT EXPENSE	-2,382,799	-2,344,520	-2,501,378	-2,780,522	-279,144	-11.16 %
501254 - CHARITY WRITE_OFFS	-522,502	-244,937	-261,324	-182,551	78,773	30.14 %
OTHER OPERATING REVENUE	1,986,786	2,110,285	2,110,285	1,946,356	-163,929	-7.77 %
OTHER REVENUE - RATE RANGE	0	0	0	0	0	0.00 %
OTHER REVENUE - OTHER SUPPLEMENTALS	0	0	0	0	0	0.00 %
OTHER REVENUE - DSH	18,745	18,745	18,745	35,377	16,632	88.73 %
OTHER REVENUE - P4P	99,751	86,250	86,250	136,446	50,196	58.20 %
OTHER REVENUE - OTHER	663,808	775,809	775,809	402,793	-373,016	-48.08 %
OPERATING TAX REVENUES	1,204,482	1,229,481	1,229,481	1,371,740	142,259	11.57 %
TOTAL OPERATING EXPENSE	20,818,718	21,467,330	22,045,818	22,035,210	10,608	0.05 %
TOTAL OPERATING EXPENSE	20,818,718	21,467,330	22,045,818	22,035,210	10,608	0.05 %
TOTAL LABOR EXPENSE	13,411,198	13,937,609	14,263,194	14,642,972	-379,778	-2.66 %
EMPLOYEE WAGES & BENEFITS	13,199,790	13,705,570	14,005,187	14,176,723	-171,536	-1.22 %
WAGES	10,428,115	10,783,333	11,012,090	11,344,521	-332,431	-3.02 %
EMPLOYEE BENEFITS	2,771,675	2,922,237	2,993,097	2,832,202	160,895	5.38 %
CONTRACT LABOR	211,408	232,039	258,007	466,249	-208,242	-80.71 %
PROFESSIONAL FEES	3,776,471	3,549,782	3,585,074	3,638,611	-53,537	-1.49 %
PROFESSIONAL FEES	3,776,471	3,549,782	3,585,074	3,638,611	-53,537	-1.49 %
PHYSICIAN FEES	851,123	936,561	936,561	848,738	87,823	9.38 %
PURCHASED SERVICES	2,925,348	2,613,221	2,648,513	2,789,873	-141,360	-5.34 %

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SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Sep 22 ActYTD	Sep 23 FlexYTD	Sep 23 BDYTD	Sep 23 ActYTD	Var (Sep 23 ActYTD - Sep 23 BDYTD )	Var%
☐ SUPPLIES & OTHER EXPENSES	3,631,049	3,979,939	4,197,550	3,753,627	443,923	10.58 %
☑ SUPPLY EXPENSE	2,431,821	2,580,185	2,795,177	2,421,175	374,002	13.38 %
☐ OTHER EXPENSES	1,199,228	1,399,754	1,402,373	1,332,452	69,921	4.99 %
☑ UTILITIES	309,250	328,149	328,149	289,173	38,976	11.88 %
☑ REPAIRS AND MAINTENANCE	203,934	245,629	246,478	278,970	-32,492	-13.18 %
☑ INSURANCE	433,234	438,867	438,867	465,666	-26,799	-6.11 %
☑ OTHER EXPENSES	252,810	250,981	252,757	175,572	77,185	30.54 %
☑ LEASE AND RENTALS	0	136,128	136,122	123,071	13,051	9.59 %
☐ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60 %
☐ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60 %
☐ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60 %
☑ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60 %
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,877,680	2,882,847	2,899,123	-16,276	-0.56 %
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,877,680	2,882,847	2,899,123	-16,276	-0.56 %
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,877,680	2,882,847	2,899,123	-16,276	-0.56 %
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,877,680	2,882,847	2,899,123	-16,276	-0.56 %
☑ DEPRECIATION	1,659,577	1,561,319	1,566,486	1,636,119	-69,633	-4.45 %
☐ INTEREST & AMORTIZATION	1,409,311	1,316,361	1,316,361	1,263,004	53,357	4.05 %
602928 - INTEREST EXPENSE	299,929	236,184	236,184	171,622	64,562	27.34 %
602929 - AMORTIZATION EXPENSE	1,109,382	1,080,177	1,080,177	1,091,382	-11,205	-1.04 %

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# Income Statement

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Sep 22 Act	Sep 23 BD	Sep 23 Flex	Sep 23 Act	Variance (Sep 23 Act - Sep 23 Flex )	Var%
NET INCOME	-2,570,070	-684,329	-944,522	-1,532,879	A -588,357	-62.29 %
EBIDA	-2,255,510	-1,083,808	-1,346,794	-1,192,292	B 154,502	11.47 %
NET SERVICE REVENUE	4,996,271	6,249,157	5,956,595	6,117,741	C 161,146	2.71 %
NET PATIENT REVENUE	4,474,237	5,580,727	5,288,165	5,586,877	D 298,712	5.65 %
GROSS REVENUE FROM PATIENT SERVICES	37,278,934	41,868,343	40,943,079	41,124,345	E 181,266	0.44 %
TOTAL INPATIENT REVENUE	13,087,715	15,094,025	15,599,205	15,201,247	-397,958	-2.55 %
TOTAL OUTPATIENT REVENUE	24,191,219	26,774,318	25,343,874	25,923,098	579,224	2.29 %
DEDUCTIONS FROM REVENUE	-32,804,697	-36,287,616	-35,654,914	-35,537,468	117,446	0.33 %
DEDUCTIONS FROM REVENUE	-32,804,697	-36,287,616	-35,654,914	-35,537,468	117,446	0.33 %
CONTRACTUAL ALLOWANCES	-32,804,697	-36,287,616	-35,654,914	-35,537,468	F 117,446	0.33 %
501052 - CONTRACTUAL ALLOWANCES	-31,691,213	-35,367,042	-34,750,391	-34,572,937	177,454	0.51 %
501153 - BAD DEBT EXPENSE	-685,695	-833,497	-818,964	-950,573	-131,609	-16.07 %
501254 - CHARITY WRITE_OFFS	-427,789	-87,077	-85,559	-13,958	71,601	83.69 %
OTHER OPERATING REVENUE	522,034	668,430	668,430	530,864	G -137,566	-20.58 %
OTHER REVENUE - RATE RANGE	0	0	0	0	0	0.00 %
OTHER REVENUE - OTHER SUPPLEMENTALS	0	0	0	0	0	0.00 %
OTHER REVENUE - DSH	0	0	0	0	0	0.00 %
OTHER REVENUE - P4P	0	0	0	0	0	0.00 %
OTHER REVENUE - OTHER	120,540	258,603	258,603	129,370	H -129,233	-49.97 %
OPERATING TAX REVENUES	401,494	409,827	409,827	401,494	I -8,333	-2.03 %
TOTAL OPERATING EXPENSE	7,251,781	7,332,965	7,303,389	7,310,033	J -6,644	-0.09 %
TOTAL OPERATING EXPENSE	7,251,781	7,332,965	7,303,389	7,310,033	K -6,644	-0.09 %
TOTAL LABOR EXPENSE	4,350,287	4,715,324	4,710,903	4,593,204	L 117,699	2.50 %
EMPLOYEE WAGES & BENEFITS	4,329,009	4,629,551	4,623,338	4,399,458	M 223,880	4.84 %
WAGES	3,324,352	3,633,361	3,637,719	3,550,566	N 87,153	2.40 %
EMPLOYEE BENEFITS	1,004,657	996,190	985,619	848,892	136,727	13.87 %
CONTRACT LABOR	21,278	85,773	87,565	193,746	-106,181	-121.26 %
PROFESSIONAL FEES	1,611,895	1,225,184	1,247,917	1,315,446	-67,529	-5.41 %
PROFESSIONAL FEES	1,611,895	1,225,184	1,247,917	1,315,446	-67,529	-5.41 %
PHYSICIAN FEES	286,687	312,187	312,187	307,954	4,233	1.36 %
PURCHASED SERVICES	1,325,208	912,997	935,730	1,007,492	-71,762	-7.67 %
SUPPLIES & OTHER EXPENSES	1,289,599	1,392,457	1,344,569	1,401,383	-56,814	-4.23 %

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SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

	Sep 22 Act	Sep 23 BD	Sep 23 Flex	Sep 23 Act	Variance (Sep 23 Act - Sep 23 Flex )	Var%
⊕ SUPPLY EXPENSE	850,659	924,987	877,683	906,328	Q -28,645	-3.26 %
⊖ OTHER EXPENSES	438,940	467,470	466,886	495,055	-28,169	-6.03 %
⊕ UTILITIES	171,657	109,915	109,915	76,274	R 33,641	30.61 %
⊕ REPAIRS AND MAINTENANCE	32,625	81,977	81,981	147,878	S -65,897	-80.38 %
⊕ INSURANCE	173,709	146,289	146,289	147,116	T -827	-0.57 %
⊕ OTHER EXPENSES	60,949	83,915	83,327	68,331	U 14,996	18.00 %
⊕ LEASE AND RENTALS	0	45,374	45,374	55,456	V -10,082	-22.22 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	-711,301	-52.29 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	-711,301	-52.29 %
⊖ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	-711,301	-52.29 %
⊕ NON-OPERATING REVENUE & EXPENSE	641,012	1,360,428	1,360,428	649,127	W -711,301	-52.29 %
⊖ TOTAL INTEREST & DEPRECIATION	955,572	960,949	958,156	989,714	-31,558	-3.29 %
⊖ TOTAL INTEREST & DEPRECIATION	955,572	960,949	958,156	989,714	-31,558	-3.29 %
⊖ TOTAL INTEREST & DEPRECIATION	955,572	960,949	958,156	989,714	-31,558	-3.29 %
⊖ TOTAL INTEREST & DEPRECIATION	955,572	960,949	958,156	989,714	-31,558	-3.29 %
⊖ TOTAL INTEREST & DEPRECIATION	955,572	960,949	958,156	989,714	-31,558	-3.29 %
⊕ DEPRECIATION	545,778	522,162	519,369	605,920	X -86,551	-16.66 %
⊖ INTEREST & AMORTIZATION	409,794	438,787	438,787	383,794	54,993	12.53 %
└ 602928 - INTEREST EXPENSE	40,000	78,728	78,728	20,000	Y 58,728	74.60 %
└ 602929 - AMORTIZATION EXPENSE	369,794	360,059	360,059	363,794	Z -3,735	-1.04 %

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# Income Statement

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD	Jul - Sep 22 Act YTD	Jul - Sep 23 BD YTD	Jul - Sep 23 Flex YTD	Jul - Sep 23 Act YTD	Variance (Jul - Sep 23 Act YTD - Jul - Sep 23 Flex YTD)	Var %
NET INCOME	-3,758,159	-2,743,291	-3,763,629	-6,100,342	A -2,336,713	-62.0
EBIDA	-3,996,762	-2,984,426	-4,009,931	-6,344,096	B -2,334,165	-58.2
NET SERVICE REVENUE	16,821,956	19,061,392	17,457,399	15,691,114	C -1,766,285	-10.1
NET PATIENT REVENUE	14,835,170	16,951,107	15,347,114	13,744,758	D -1,602,356	-10.4
GROSS REVENUE FROM PATIENT SERVICES	119,694,953	125,852,560	117,419,484	118,950,663	E 1,531,179	1.30
TOTAL INPATIENT REVENUE	45,113,452	45,765,252	42,041,588	41,300,677	-740,911	-1.76
TOTAL OUTPATIENT REVENUE	74,581,501	80,087,308	75,377,896	77,649,986	2,272,090	3.01
DEDUCTIONS FROM REVENUE	-104,859,783	-108,901,453	-102,072,370	-105,205,905	-3,133,535	-3.07
DEDUCTIONS FROM REVENUE	-104,859,783	-108,901,453	-102,072,370	-105,205,905	-3,133,535	-3.07
CONTRACTUAL ALLOWANCES	-104,859,783	-108,901,453	-102,072,370	-105,205,905	F -3,133,535	-3.07
501052 - CONTRACTUAL ALLOWANCES	-101,954,482	-106,138,751	-99,482,913	-102,242,832	-2,759,919	-2.77
501153 - BAD DEBT EXPENSE	-2,382,799	-2,501,378	-2,344,520	-2,780,522	-436,002	-18.6
501254 - CHARITY WRITE_OFFS	-522,502	-261,324	-244,937	-182,551	62,386	25.4
OTHER OPERATING REVENUE	1,986,786	2,110,285	2,110,285	1,946,356	G -163,929	-7.77
OTHER REVENUE - RATE RANGE	0	0	0	0	0	0.00
OTHER REVENUE - OTHER SUPPLEMENTALS	0	0	0	0	0	0.00
OTHER REVENUE - DSH	18,745	18,745	18,745	35,377	16,632	88.7
OTHER REVENUE - P4P	99,751	86,250	86,250	136,446	50,196	58.2
OTHER REVENUE - OTHER	663,808	775,809	775,809	402,793	H -373,016	-48.0
OPERATING TAX REVENUES	1,204,482	1,229,481	1,229,481	1,371,740	I 142,259	11.57
TOTAL OPERATING EXPENSE	20,818,718	22,045,818	21,467,330	22,035,210	J -567,880	-2.65
TOTAL OPERATING EXPENSE	20,818,718	22,045,818	21,467,330	22,035,210	J -567,880	-2.65
TOTAL LABOR EXPENSE	13,411,198	14,263,194	13,937,609	14,642,972	K -705,363	-5.06
EMPLOYEE WAGES & BENEFITS	13,199,790	14,005,187	13,705,570	14,176,723	-471,153	-3.44
WAGES	10,428,115	11,012,090	10,783,333	11,344,521	L -561,188	-5.20
EMPLOYEE BENEFITS	2,771,675	2,993,097	2,922,237	2,832,202	M 90,035	3.08
CONTRACT LABOR	211,408	258,007	232,039	466,249	N -234,210	-100.
PROFESSIONAL FEES	3,776,471	3,585,074	3,549,782	3,638,611	-88,829	-2.50
PROFESSIONAL FEES	3,776,471	3,585,074	3,549,782	3,638,611	-88,829	-2.50
PHYSICIAN FEES	851,123	936,561	936,561	848,738	O 87,823	9.38
PURCHASED SERVICES	2,925,348	2,648,513	2,613,221	2,789,873	P -176,652	-6.76

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SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - YTD

	Jul - Sep 22 Act YTD	Jul - Sep 23 BD YTD	Jul - Sep 23 Flex YTD	Jul - Sep 23 Act YTD	Variance (Jul - Sep 23 Act YTD - Jul - Sep 23 Flex YTD)	Var %
☐ SUPPLIES & OTHER EXPENSES	3,631,049	4,197,550	3,979,939	3,753,627	226,312	5.69
☑ SUPPLY EXPENSE	2,431,821	2,795,177	2,580,185	2,421,175	159,010	6.16
☐ OTHER EXPENSES	1,199,228	1,402,373	1,399,754	1,332,452	67,302	4.81
☑ UTILITIES	309,250	328,149	328,149	289,173	38,976	11.88
☑ REPAIRS AND MAINTENANCE	203,934	246,478	245,629	278,970	-33,341	-13.5
☑ INSURANCE	433,234	438,867	438,867	465,666	-26,799	-6.11
☑ OTHER EXPENSES	252,810	252,757	250,981	175,572	75,409	30.0
☑ LEASE AND RENTALS	0	136,122	136,128	123,071	13,057	9.59
☐ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60
☐ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60
☐ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60
☑ NON-OPERATING REVENUE & EXPENSE	3,307,491	3,123,982	3,123,982	3,142,877	18,895	0.60
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,882,847	2,877,680	2,899,123	-21,443	-0.75
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,882,847	2,877,680	2,899,123	-21,443	-0.75
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,882,847	2,877,680	2,899,123	-21,443	-0.75
☐ TOTAL INTEREST & DEPRECIATION	3,068,888	2,882,847	2,877,680	2,899,123	-21,443	-0.75
☑ DEPRECIATION	1,659,577	1,566,486	1,561,319	1,636,119	-74,800	-4.79
☐ INTEREST & AMORTIZATION	1,409,311	1,316,361	1,316,361	1,263,004	53,357	4.05
602928 - INTEREST EXPENSE	299,929	236,184	236,184	171,622	64,562	27.3
602929 - AMORTIZATION EXPENSE	1,109,382	1,080,177	1,080,177	1,091,382	-11,205	-1.04

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# Balance Sheet

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

SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly	Jul 23 Act	Aug 23 Act	Sep 23 Act	Var Aug 23 Act	Var%
NET BALANCE SHEET	28	25	41		64.00 %
☐ TOTAL ASSETS	108,857,355	107,248,342	107,765,986	517,644	0.48 %
☐ TOTAL ASSETS	108,857,355	107,248,342	107,765,986	517,644	0.48 %
☐ CURRENT ASSETS	29,102,360	28,323,945	26,633,320	-1,690,625	-5.97 %
☑ CASH & EQUIVALENTS	8,592,216	5,962,136	9,562,533	3,600,397	60.39 %
☐ NET PATIENT ACCOUNTS RECEIVABLE	11,705,510	11,868,614	13,045,101	1,176,487	9.91 %
☑ HOSPITAL ACCOUNTS RECEIVABLE	85,055,613	85,426,983	86,780,649	1,353,666	1.58 %
☑ LESS: ALLOWANCE FOR BAD DEBTS	-73,350,103	-73,558,369	-73,735,548	-177,179	-0.24 %
☐ OTHER CURRENT ASSETS	8,804,634	10,493,195	4,025,686	-6,467,509	-61.64 %
☑ TAXES RECEIVABLE	8,306,499	10,383,333	3,942,074	-6,441,259	-62.03 %
☑ MISC RECEIVABLE	-792,040	-789,260	-744,971	44,289	5.61 %
☑ DUE FROM 3RD PARTIES	-2,390,019	-2,727,166	-2,812,136	-84,970	-3.12 %
☑ INVENTORIES	2,580,712	2,570,923	2,629,470	58,547	2.28 %
☑ PREPAID EXPENSES	1,099,482	1,055,365	1,011,249	-44,116	-4.18 %
☐ ASSETS WHICH USE IS LIMITED	9,523,613	9,519,381	12,127,256	2,607,875	27.40 %
☐ ASSETS WITH LIMITED USE	9,523,613	9,519,381	12,127,256	2,607,875	27.40 %
☑ INTERNALLY DESIGNATED	9,523,613	9,519,381	12,127,256	2,607,875	27.40 %
☐ NET PROPERTY, PLANT, AND EQUIPMENT	69,972,999	69,386,966	68,989,789	-397,177	-0.57 %
☐ PROPERTY, PLANT, AND EQUIPMENT	163,740,287	163,646,975	163,742,519	95,544	0.06 %
☑ LAND & LAND IMPROVEMENTS	4,828,182	4,828,182	4,828,182	0	0.00 %
☑ BUILDINGS & BUILDING IMPROVEMENTS	129,281,491	129,281,491	129,281,491	0	0.00 %
☑ FIXED EQUIPMENT	26,205,300	26,146,618	26,146,618	0	0.00 %
☑ CONSTRUCTION IN PROGRESS	3,425,314	3,390,684	3,486,228	95,544	2.82 %
☑ LESS: ACCUMULATED DEPRECIATION	-93,767,288	-94,260,009	-94,752,730	-492,721	-0.52 %
☐ OTHER ASSETS	258,383	18,050	15,621	-2,429	-13.46 %
☐ OTHER ASSETS	258,383	18,050	15,621	-2,429	-13.46 %
☑ INVESTMENT IN AFFILIATE	-313,178	-550,922	-550,762	160	0.03 %
☑ BONDS	571,561	568,972	566,383	-2,589	-0.46 %
☐ TOTAL LIABILITIES & FUND BALANCE	108,857,327	107,248,317	107,765,945	-517,628	-0.48 %
☐ TOTAL LIABILITIES	150,368,591	149,536,052	151,586,559	-2,050,507	-1.37 %
☐ CURRENT LIABILITES	24,440,152	23,624,738	25,688,604	-2,063,866	-8.74 %
☐ ACCOUNTS PAYABLE	12,156,951	9,760,386	11,588,993	-1,828,607	-18.73 %
☑ ACCOUNTS PAYABLE-TRADE	12,156,951	9,760,386	11,588,993	-1,828,607	-18.73 %

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SAN GORGONIO MEM. HEALTH CARE DISTRICT & HOSPITAL - Monthly

	Jul 23 Act	Aug 23 Act	Sep 23 Act	Var Aug 23 Act	Var%
<input checked="" type="checkbox"/> PAYROLL PAYABLES	3,838,426	5,091,476	5,085,470	EE 6,006	0.12 %
<input checked="" type="checkbox"/> LINE OF CREDIT	4,023,662	4,025,465	4,025,465	FF 0	0.00 %
<input type="checkbox"/> OTHER CURRENT LIABILITIES	4,421,113	4,747,411	4,988,676	GG -241,265	-5.08 %
<input checked="" type="checkbox"/> ACCRUED INTEREST PAYABLE	2,179,876	2,540,812	2,901,748	HH -360,936	-14.21 %
<input checked="" type="checkbox"/> OTHER CURRENT LIABILITIES	2,241,237	2,206,599	2,086,928	II -119,671	-5.42 %
<input type="checkbox"/> LONG TERM LIABILITIES	125,928,439	125,911,314	125,897,955	JJ 13,359	0.01 %
<input checked="" type="checkbox"/> OTHER LONG TERM LIABILITIES	125,928,439	125,911,314	125,897,955	JJ 13,359	0.01 %
<input type="checkbox"/> NET ASSETS	-41,511,264	-42,287,735	-43,820,614	KK 1,532,879	3.62 %
<input type="checkbox"/> NET ASSETS - UNRESTRICTED	-41,511,264	-42,287,735	-43,820,614	KK 1,532,879	3.62 %
<input checked="" type="checkbox"/> NET ASSETS - BEGINNING OF PERIOD	-37,720,272	-37,720,272	-37,720,272	LL 0	0.00 %
<input checked="" type="checkbox"/> CURRENT YEAR NET GAIN/(LOSS)	-3,790,992	-4,567,463	-6,100,342	MM -1,532,879	-33.56 %

30

	B	C	D	E	F	G	J
1	<b>SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT &amp; HOSPITAL</b>					<b>CASH FLOW</b>	
2							
3						<b>Current Month</b>	<b>Y-T-D</b>
4						<b>9/30/2023</b>	<b>9/30/2023</b>
5	<b>BEGINNING CASH BALANCES</b>						
6		Cash: Beginning Balances- Hospital				\$ 3,135,138	\$ 10,775,913
7		Cash: Beginning Balances- District				2,826,998	2,808,453
8		Cash: Beginning Balances Totals				\$ <b>5,962,136</b>	\$ <b>13,584,366</b>
9							
10	<b>Receipts</b>						
11		Patient Collections				\$ 4,512,791	\$ 13,808,585
12		Tax Subsidies/Measure D/Prop 13				401,494	\$ 1,204,482
13		Misc Tax Subsidies				-	\$ 167,258
14		Donations/Grants				-	\$ 300
15		Supplemental Funding (Rate Range, Etc.)				-	\$ 171,823
16		Draws/(Paydown) of LOC Balances				-	\$ -
17		Other Revenues/Receipts/Transfers				4,996,487	\$ 5,269,610
18	<b>TOTAL RECEIPTS</b>					\$ <b>9,910,772</b>	\$ <b>20,622,058</b>
19							
20	<b>Disbursements</b>						
21		Wages, Benefits, & Contract Labor				\$ 4,593,204	\$ 14,542,972
22		Other Operating Costs				2,716,829	\$ 7,461,514
23		Capital Spending				0	\$ 129,109
24		Debt Service Payments				-	\$ 12,942
25		Other - Changes in Accounts Payable, Other				(999,658)	\$ 2,497,354
26	<b>TOTAL DISBURSEMENTS</b>					\$ <b>6,310,375</b>	\$ <b>24,643,891</b>
27							
28	<b>TOTAL CHANGE in CASH</b>					\$ <b>3,600,397</b>	\$ <b>(4,021,833)</b>
29							
30	<b>ENDING CASH BALANCES</b>						
31		Ending Balances- Hospital				\$ 6,735,852	\$ 6,907,759
32		Ending Balances- District				2,826,681	2,654,774
33		Ending Balances- Totals				\$ <b>9,562,533</b>	\$ <b>9,562,533</b>
34							
35							
36							
37		LOC Current Balances				\$ 4,000,000	\$ 4,000,000
38		LOC Interest Expense Incurred				31,389	\$ 31,389
39							
40							

# TAB I

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
1	30 Day All Cause Readmission Monitoring and Analysis	Case Management	Mitchell, Marvin: Director Case Management	Ariel Whitley for Hospital Board of Directors
2	Account Follow-up, Group Insurance	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
3	Account Follow-up, Medicare/Medi-Cal	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
4	Account Follow-up, Self Pay	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
5	Activase/Alteplase (t-PA) Protocol -- Use in Acute Ischemic Stroke	Nursing	Freude, Gayle: Nursing Director Med/Surg	Ariel Whitley for Hospital Board of Directors
6	Activities Unlicensed Laboratory Personnel May Or May Not Perform	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
7	Admission of Infant Born Out of Asepsis	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
8	Admission to Women's Center Guidelines	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
9	Adoption Planning	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
10	Annual Employee Health Screening	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
11	Associate Health Records	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
12	Associate Education	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
13	Associate Health - Exposure to Communicable Diseases	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
14	Associate Health Nursing Care Guidelines	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
15	Associate Hepatitis - B Vaccine / Antibody Screening	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
16	Audit and Procedure	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
17	Autopsies	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
18	Bad Debt Conversion to Charity Care	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
19	Basic Life Support (BLS)	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
20	Bubble Study with Echocardiogram	EKG Echo	Garewal, Cheri: Echo Technician	Ariel Whitley for Hospital Board of Directors
21	California Paid Sick Leave ("CPSL")	Human Resources	Karam, Annah: Chief Human Resources Officer	Ariel Whitley for Hospital Board of Directors
22	Charity Care	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
23	Clinical Duties of the Clinical Laboratory Medical Director	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
24	Clinical Lab Services for STAT, Timed and Routine Blood Collection	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
25	Clinical Lab Specific Precautions	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
26	Clinical Lab Test Turnaround Times (TAT)	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
27	Clinical Laboratory Scope of Services	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
28	Community Education	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
29	Compliance Program Staff Training and Education	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
30	Compliance with the Stark and Anti-Kickback Laws	Compliance	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
31	Contingency Plan Components	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
32	Continuing Education Certificates	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
33	Corporate Compliance Program	Compliance	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
34	CT Chest For Evaluation of Pulmonary Embolism	Diagnostic Imaging	Chamberlin, Krystal: Director Diagnostic Imaging	Ariel Whitley for Hospital Board of Directors
35	Cultural, Ethnic and Religious Food Preferences	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
36	Dead on Arrival	Emergency Department	Brady, Angela: Chief Nursing Executive	Ariel Whitley for Hospital Board of Directors
37	Department-Level Charge Control	Compliance	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
38	Detecting Fraud and Abuse; Federal and State False Claims Act	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
39	Diagnostic Imaging Contrast Pre-Medication Protocol for Patients with a Known Contrast Allergy	Diagnostic Imaging	Chamberlin, Krystal: Director Diagnostic Imaging	Ariel Whitley for Hospital Board of Directors
40	Dietary Department Personal Appearance and Hygiene	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors
41	Discipline for Violation of Any Privacy or Information Security Policy	Compliance	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
42	Echsonography Interpretation Times	EKG Echo	Garewal, Cheri: Echo Technician	Ariel Whitley for Hospital Board of Directors
43	Education Needs Assessment Policy	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
44	Electrical Ground Fault Safety Testing	Engineering	Sanchez, Salvador: Director of Engineering	Ariel Whitley for Hospital Board of Directors
45	Elopement from Emergency Department	Emergency Department	Brady, Angela: Chief Nursing Executive	Ariel Whitley for Hospital Board of Directors
46	Emergency Cesarean Section Preparation of Patient	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
47	Employee Education - Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and Basic Life Support Certification (BLS) Policy	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
48	Employee Education - Fire Safety and Disaster Preparedness	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
49	Employee Education Records	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
50	Employee Health Program Objectives	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
51	EMTALA Emergency Treatment Compliance	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
52	Evaluating and Selecting Reference Laboratories	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
53	Expired Laboratory Reagents, Supplies and Collection Tubes	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
54	Financial Reporting	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
55	General Specimen Rejection	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
56	Gram Stains Performed on the 2nd and 3rd Shifts	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
57	Handheld Nebulizers (HHN)	Respiratory Therapy	Peleuses, John: VP of Ancillary Services	Ariel Whitley for Hospital Board of Directors
58	Handling and Transport of Specimens to the Lab	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
59	Identification Badges	Human Resources	Karam, Annah: Chief Human Resources Officer	Ariel Whitley for Hospital Board of Directors
60	Injury and Illness Prevention Plan	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
61	Interdepartmental Transfer of Patients	Nursing	Freude, Gayle: Nursing Director Med/Surg	Ariel Whitley for Hospital Board of Directors
62	Interpretation and Release of Amnisure Test Results	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
63	Intraosseous Infusion System	Emergency Department	Brady, Angela: Chief Nursing Executive	Ariel Whitley for Hospital Board of Directors
64	Lab - Fasting Tests	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
65	Laboratory Analyzer Relocation	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
66	Level Of Care Screening And Interventions	Case Management	Mitchell, Marvin: Director Case Management	Ariel Whitley for Hospital Board of Directors
67	Licensed and Non Licensed Independent Practitioners Disaster Credentialing - Disaster Policy	Emergency Preparedness	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors



POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
68	Mandatory Annual Education Requirements	Education	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
69	Medicare and California Outpatient Observation Notice	Case Management	Mitchell, Marvin: Director Case Management	Ariel Whitley for Hospital Board of Directors
70	Medicare Bad Debt	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
71	MRI Contrast Policy and Protocol	Diagnostic Imaging	Chamberlin, Krystal: Director Diagnostic Imaging	Ariel Whitley for Hospital Board of Directors
72	Nurse Collected Specimens	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
73	Patient Financial Services Scanning	Patient Financial Services	Cox, Mayda: Director Financial Services	Ariel Whitley for Hospital Board of Directors
74	Patient-Visitor Assistance	Social Services	Mitchell, Marvin: Director Case Management	Ariel Whitley for Hospital Board of Directors
75	Patient, Associate and Visitor Tracking - Disaster Policy	Emergency Preparedness	Hunter, Joey: Director Emergency Preparedness, EOC & Security	Ariel Whitley for Hospital Board of Directors
76	Patient's Own Medications (Or Home Medication)	Nursing	Freude, Gayle: Nursing Director Med/Surg	Ariel Whitley for Hospital Board of Directors
77	Payment Monitoring	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
78	Pediatric Assessment and Reassessment	Emergency Department	Brady, Angela: Chief Nursing Executive	Ariel Whitley for Hospital Board of Directors
79	Pediatric Patients	Pediatrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
80	Personal Interruptions	Human Resources	Karam, Annah: Chief Human Resources Officer	Ariel Whitley for Hospital Board of Directors
81	Placental Abruption	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
82	Point of Care Testing (POCT) Nitrazine Testing	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
83	Point of Care Testing (POCT) Strep A Screening on ID Now	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
84	Point of Care Testing (POCT) Visual Urine Dipstick Test	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
85	Preparation of the Patient for Cesarean Section	Obstetrics	Garcia, Antonia: Director of OB Services	Ariel Whitley for Hospital Board of Directors
86	Procedure for Outpatient Lab Tests	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
87	Proper Collection and Handling of Reference Testing Specimens	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
88	Public Health Department Reporting	Employee Health	Nelson, Kim: Employee Health & Education Coordinator	Ariel Whitley for Hospital Board of Directors
89	Quality of Clinical Lab Water	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
90	Quality System Assessment	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
91	QuickVue Dipstick Strep A Test	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
92	Recapping of Needles	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
93	Reference Intervals	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
94	Referrals, Kick-backs and Rebates	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
95	Repeat Testing for Critical Values and Delta Checks	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
96	Reporting Compliance Issues and Concerns	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
97	Reporting of Results	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
98	Reporting Quality and/or Patient Safety Concerns	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
99	Reports for Infection Prevention	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
100	Responsibilities During Investigations and Reviews	Compliance	Cornwall, Connie: HIM Manager	Ariel Whitley for Hospital Board of Directors
101	Restricted Activities in All Technical Work Areas	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
102	Security Awareness & Training	Compliance	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
103	Security Incidents	Compliance	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
104	Security of Laboratory Specimens	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
105	Social Media	Human Resources	Karam, Annah: Chief Human Resources Officer	Ariel Whitley for Hospital Board of Directors
106	Specimen Identification and Accessioning	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
107	Storage, Preparation, Evaluation and Tracking of Reagents	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
108	Stroke: Certification Participation Requirements	Nursing	Soriano Fregoso, Guillermo: Stroke Coordinator	Ariel Whitley for Hospital Board of Directors
109	Stroke: Data Collection, Performance & Quality Improvement	Nursing	Soriano Fregoso, Guillermo: Stroke Coordinator	Ariel Whitley for Hospital Board of Directors
110	Supervisory Review of Laboratory Results	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
111	Three Compartment Sink Washing	Dietary	Hawthorne, Lakeisha: Director Food and Nutrition	Ariel Whitley for Hospital Board of Directors

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting November 7, 2023

	<b>Title</b>	<b>Policy Area</b>	<b>Owner</b>	<b>Workflow Approval</b>
112	Timely Reporting of Infectious and Communicable Diseases	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
113	Urine Collection	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors
114	Use and Disclosure of Protected Health Information for Research	HIPAA Privacy	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
115	Utilization Management Medical Record Review	Case Management	Mitchell, Marvin: Director Case Management	Ariel Whitley for Hospital Board of Directors
116	Waiver of Rights (Compliance)	Compliance	Whitley, Ariel: Executive Assistant	Ariel Whitley for Hospital Board of Directors
117	Whole Blood Glucose Testing Using the Roche® Accucheck Inform II Meter	Clinical Laboratory	Hazley, Byron: Director Laboratory	Ariel Whitley for Hospital Board of Directors

**TAB J**

**SAN GORGONIO MEMORIAL HOSPITAL**

**Medical Staff Services Department**

**M E M O R A N D U M**

**DATE:** October 18, 2023

**TO:** Susan DiBiasi, Chair  
Governing Board

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

**SUBJECT: MEDICAL EXECUTIVE COMMITTEE REPORT**

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

**Approval Item(s):**

**2023 Annual Approval of Policies & Procedures**

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

**Infection Control & Surveillance Report**

A recommendation was made by CIHQ via Conditions of Participation: Recommend Traci Hudson, R.N., and Mia Simms-Bullock, LVN, are over the IC Program and Jose Lopez, Pharm.D., is over the Antibiotic Stewardship Program.

**SAN GORGONIO MEMORIAL HOSPITAL  
2023 ANNUAL APPROVAL  
POLICIES & PROCEDURES**

10.18.2023

Title	Policy Area	Revised?
Activase/Alteplase (t-PA) Protocol -- Use in Acute Ischemic Stroke	Nursing	Revised
Activities Unlicensed Laboratory Personnel May Or May Not Perform	Clinical Laboratory	Revised
Admission of Infant Born Out of Asepsis	Obstetrics	Revised
Admission to Women's Center Guidelines	Obstetrics	Revised
Adoption Planning	Obstetrics	Revised
Autopsies	Clinical Laboratory	Revised
Bubble Study with Echocardiogram	EKG Echo	Revised
Clinical Duties of the Clinical Laboratory Medical Director	Clinical Laboratory	Revised
Clinical Lab Services for STAT, Timed and Routine Blood Collection	Clinical Laboratory	New
Clinical Lab Specific Precautions	Clinical Laboratory	Revised
Clinical Lab Test Turnaround Times (TAT)	Clinical Laboratory	Revised
Clinical Laboratory Scope of Services	Clinical Laboratory	Revised
CT Chest For Evaluation of Pulmonary Embolism	Diagnostic Imaging	Revised
Dead on Arrival	Emergency Department	Revised
Diagnostic Imaging Contrast Pre-Medication Protocol for Patients with a Known Contrast Allergy	Diagnostic Imaging	Unchanged
Elopement from Emergency Department	Emergency Department	Revised
Emergency Cesarean Section Preparation of Patient	Obstetrics	Revised
Evaluating and Selecting Reference Laboratories	Clinical Laboratory	Revised
Expired Laboratory Reagents, Supplies and Collection Tubes	Clinical Laboratory	Revised
General Specimen Rejection	Clinical Laboratory	Revised
Gram Stains Performed on the 2nd and 3rd Shifts	Clinical Laboratory	Revised
Handling and Transport of Specimens to the Lab	Clinical Laboratory	Revised
Interdepartmental Transfer of Patients	Nursing	Revised
Interpretation and Release of Amnisure Test Results	Clinical Laboratory	Revised
Intraosseous Infusion System	Emergency Department	Revised
Lab - Fasting Tests	Clinical Laboratory	Revised
Laboratory Analyzer Relocation	Clinical Laboratory	Revised
MRI Contrast Policy and Protocol	Diagnostic Imaging	Revised

Nurse Collected Specimens	Clinical Laboratory	Revised
Participation in Graduate Medical Education Programs	Medical Staff	New
Patient's Own Medications (Or Home Medication)	Nursing	Revised
Pediatric Assessment and Reassessment	Emergency Department	Revised
Pediatric Patients	Pediatrics	Unchanged
Placental Abruptio	Obstetrics	Revised
Point of Care Testing (POCT) Nitrazine Testing	Clinical Laboratory	Revised
Point of Care Testing (POCT) Visual Urine Dipstick Test	Clinical Laboratory	Revised
Preparation of the Patient for Cesarean Section	Obstetrics	Revised
Procedure for Outpatient Lab Tests	Clinical Laboratory	Revised
Proper Collection and Handling of Reference Testing Specimens	Clinical Laboratory	Revised
Quality of Clinical Lab Water	Clinical Laboratory	Revised
Quality System Assessment	Clinical Laboratory	Revised
QuickVue Dipstick Strep A Test	Clinical Laboratory	Revised
Recapping of Needles	Clinical Laboratory	Revised
Reference Intervals	Clinical Laboratory	Revised
Repeat Testing for Critical Values and Delta Checks	Clinical Laboratory	Revised
Reporting of Results	Clinical Laboratory	Revised
Reporting Quality and/or Patient Safety Concerns	Clinical Laboratory	Revised
Reports for Infection Prevention	Clinical Laboratory	Revised
Restricted Activities in All Technical Work Areas	Clinical Laboratory	Revised
Security of Laboratory Specimens	Clinical Laboratory	Unchanged
Specimen Identification and Accessioning	Clinical Laboratory	Revised
Storage, Preparation, Evaluation and Tracking of Reagents	Clinical Laboratory	Unchanged
Stroke: Certification Participation Requirements	Nursing	New
Stroke: Data Collection, Performance & Quality Improvement	Nursing	New
Supervisory Review of Laboratory Results	Clinical Laboratory	Unchanged
Timely Reporting of Infectious and Communicable Diseases	Clinical Laboratory	Revised
Urine Collection	Clinical Laboratory	Revised
Whole Blood Glucose Testing Using the Roche® Accucheck Inform II Meter	Clinical Laboratory	Revised



**TAB K**

## Whitley, Ariel

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**From:** Barron, Steven  
**Sent:** Thursday, November 2, 2023 3:15 PM  
**To:** Whitley, Ariel  
**Subject:** FW: California Enacts New Minimum Wage Requirements For Healthcare Workers

Include this in the board package

---

**From:** [REDACTED]  
**Sent:** Thursday, November 02, 2023 3:05 PM  
**To:** [REDACTED]  
**Subject:** California Enacts New Minimum Wage Requirements For Healthcare Workers

All:

SB 525, signed into law by Governor Newsom on October 13, 2023, raises the minimum wage for most healthcare workers in California starting on June 1, 2024. The law is codified in California Labor Code Sections 1182.14 and 1182.15, which establish 5 multi-year schedules for implementation of the new minimum wage requirements, along with periodic increases in the minimum wage. The mandatory compensation levels and timing of minimum wage increases vary based on the healthcare facility's classification, which is tied to the size and nature of its operations. Like the other state minimum wage requirements, the healthcare minimum wage law will be enforceable by the Labor Commissioner through civil actions and is considered the "applicable state minimum wage" for covered employers and employees for all purposes, including the California wage orders.

### **Broad Definitions of Covered Employees, Employers and Health Care Services**

The statute applies to an expansive range of healthcare employees who are engaged in providing and supporting patient care and healthcare services, regardless of their formal job titles. Covered employees include nurses, physicians, caregivers, medical residents, interns or fellows, patient care technicians, janitors, housekeeping staff groundskeepers, guards, clerical and administrative workers, food service workers, medical coding and billing personnel, schedulers and call center workers. Also included are contracted or subcontracted workers who provide services supporting the provision of healthcare if the healthcare employer "directly or indirectly" controls the worker's wages, hours or working conditions.

The law contains exclusions for (1) outside salespersons, (2) delivery/waste collection workers, (3) medical transportation workers who are not employed by the healthcare entity, and (4) work performed in the public sector where the primary duties performed are not "health care services."

Covered "Health care services," includes patient care-related services including nursing, caregiving, technical and ancillary services, janitorial work, housekeeping, groundskeeping, guard duties, business office clerical work, food services, laundry, medical coding and billing, call center and warehouse work, scheduling, and gift shop work, but only where such services support patient care.

More than 20 types of healthcare providers are enumerated within SB 525's definition of "covered healthcare facilities," including those that are part of an integrated health care delivery systems, licensed general acute care and psychiatric hospitals, healthcare clinics (such as primary, specialty, urgent care community and rural health clinics), skilled nursing facilities, licensed home health agencies and physician groups, among others. The law contains specific exclusions for hospitals owned, controlled, or operated by the State Department of State Hospitals and tribal clinics and outpatient facilities operated by federally recognized Indian tribes and tribal organizations.

## **Minimum Wage Requirements and Phase-In Timing Determined by Healthcare Provider Classification:**

There are five minimum pay requirements and phase-in schedules that apply based on the classification of the facility:

### **Category 1: Largest Employers, Integrated Health Delivery Systems, and county facilities in large population areas**

Health care facility employers that (a) have 10,000 or more full-time equivalent employees (FTEE's), (b) are part of an integrated health care delivery system or a health care system with 10,000 or more FTEEs, (c) dialysis clinics, and (d) health facilities affiliated or operated by a county with a population of more than 5,000,000, as of January 1, 2023.

- \$23 per hour from June 1, 2024\*, to May 31, 2025,
- \$24 per hour from June 1, 2025, to May 31, 2026, and
- \$25 per hour from June 1, 2026, forward, until adjusted based on the lesser of the Consumer Price Index or 3.5%.

\*County owned, affiliated, or operated facilities are not required to comply until January 1, 2025.

### **Category 2: Hospitals with governmental payor mix, rural hospitals, and county facilities in small population areas**

Facilities with (a) a high (90%) combined Medicare and Medi-Cal payor mix (b) independent hospitals with an elevated (75%) Medicare and Medi-Cal payor mix, (c) rural independent covered health care facility (includes healthcare districts), and (d) health care facilities that are owned, affiliated, or operated by a county with a population of less than 250,000 as of January 1, 2023.

- \$18 per hour from June 1, 2024\*, to May 31, 2033, including annual 3.5 percent increases,
- \$25 per hour from June 1, 2033, forward, until adjusted based on the lesser of the Consumer Price Index or 3.5%.

\*County owned affiliated or operated facilities are not required to comply until January 1, 2025.

### **Category 3: Health Clinics**

Primary care clinics and free clinics not operated by public entities such as healthcare districts, community clinics and associated intermittent clinics, rural clinics and urgent care clinics owned by or affiliated with community and rural clinics.

- \$21 per hour from June 1, 2024, to May 31, 2026,
- \$22 per hour from June 1, 2026, to May 31, 2027,
- \$25 per hour from June 1, 2027, forward, until adjusted based on the lesser of the Consumer Price Index or 3.5%.

### **Category 4: Skilled Nursing**

Facilities that provide skilled nursing and supported care on an extended basis that are not otherwise covered above.

- \$21 per hour from June 1, 2024, to May 31, 2026,
- \$23 per hour from June 1, 2026, to May 31, 2028,
- \$25 per hour from June 1, 2028, forward, until adjusted based on the lesser of the Consumer Price Index or 3.5%.

### **Category 5: Other Healthcare Facilities**

All other healthcare facility employers not included above:

- \$21 per hour from June 1, 2024, to May 31, 2026,
- \$23 per hour from June 1, 2026, to May 31, 2028,
- \$25 per hour from June 1, 2028, forward, until adjusted based on the lesser of the Consumer Price Index or 3.5%.

## **New Minimum Salary Requirements for Exempt Healthcare Employees**

The minimum compensation for covered salaried healthcare employees must be the monthly equivalent of no less than 150% of the healthcare worker minimum wage or 200 percent of the state minimum wage, whichever is greater. The

salary minimum applies to all covered exempt employees, including employees of the state, political subdivisions, municipalities, and the University of California providing health care services.

**Publication of Covered Facilities and Opportunity to Challenge Misclassification**

The law requires the Department of Health Care Access and Information to publish, prior to January 1, 2024, a list of all covered facilities Categories 1 and 2 above. If a facility believes that it was inappropriately excluded from list of hospitals that qualify for Category 2 (i.e., hospitals with a high or elevated governmental payor mix and rural independent hospitals) it may file a request to be so classified and must also provide specific required information to support the request no later than January 31, 2025.

**Waiver Program for Certain Covered Employers**

In recognition of the significant burden and increased costs of compliance to covered facilities, there is a provision requiring the Department of Industrial Relations to, prior to March 1, 2024, develop a waiver program for the health facilities in Category 3, above (including community care clinics, free clinics, and rural health clinics). The waiver program would allow facilities to apply for a temporary pause or alternative phase-in schedule for the pay requirements upon a showing that the financial impact of compliance with the law would threaten the facility’s ability to continue operations. Among the considerations for the approving waiver requests are whether (1) compliance would cause the actual or likely closure of the facility, patient services, or the loss of jobs, (2) the facility is in financial distress, (4) the facility is small or rural and (4) closure would significantly impact access to services in the region. The waivers would last for one year and there will be a renewal process available.

**Preemption of other laws regulating compensation for health care facility employees**

AB 525 specifically voids any local laws or ordinances relating to the compensation or wages of covered health care facility employees that are enacted or take effect after September 6, 2023.

**Next Steps**

All covered healthcare employers will need to ensure that their pay practices comply with these new compensation mandates, most of which take effect on June 1, 2024. Please let us know if you need our assistance to determine which schedule and pay requirements apply to your operations, whether you are eligible for the waiver program, or if you have any other questions.

**Best regards,**

[Redacted signature]

[Redacted signature]

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