



**SONOMA VALLEY HEALTH CARE DISTRICT  
BOARD OF DIRECTORS**

**AGENDA**

**THURSDAY, JANUARY 7, 2021**

**REGULAR SESSION 6:00 P.M.**

**HELD VIA ZOOM VIDEOCONFERENCE ONLY**

**To participate via Zoom videoconferencing  
use the link below:**

<https://sonomavalleyhospital-org.zoom.us/j/96762690659?pwd=T0NjczVGZFNFUW0vbWEvNk1Gc09mdz09>

**and enter the Meeting ID: 967 6269 0659, Passcode: 793555**

**To participate via telephone only,  
dial: 1-669 900 9128 or 1-669 219 2599**

**and enter the Meeting ID: 967 6269 0659, Passcode: 793555**

<p>In compliance with the Americans Disabilities Act, if you require special accommodations to participate in a District meeting, please contact District Clerk Vivian Woodall at <a href="mailto:vwoodall@sonomavalleyhospital.org">vwoodall@sonomavalleyhospital.org</a> at least 48 hours prior to the meeting.</p>	<b>RECOMMENDATION</b>		
<b>AGENDA ITEM</b>			
<p><b>MISSION STATEMENT</b> <i>The mission of SVHCD is to maintain, improve, and restore the health of everyone in our community.</i></p>			
<p><b>1. CALL TO ORDER</b></p>	<i>Rymer</i>		
<p><b>2. PUBLIC COMMENT</b> <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Board at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Board consideration.</i></p>			
<p><b>3. BOARD CHAIR COMMENT</b></p>	<i>Rymer</i>		
<p><b>4. CONSENT CALENDAR</b> a. Board Minutes 12.10.20 b. Medical Staff Credentialing</p>	<i>Rymer</i>	Action	Pages 3-5
<p><b>5. UCSF-SVH AFFILIATION FRAMEWORK</b></p>	<i>Kidd/Rymer</i>	Inform	Page 6
<p><b>6. JEN SWEENEY, UCSF AFFILIATES CHIEF OPERATING OFFICER</b></p>	<i>Sweeney</i>	Inform	Pages 7-29
<p><b>7. VALLEY OF THE MOON POST ACUTE SEMI-ANNUAL REPORT</b></p>	<i>Empey</i>	Inform	Pages 30-36

<b>8. BOARD COMMITTEE ASSIGNMENTS</b>	<i>Rymer</i>	Action	
<b>9. REINVENTING THE CHIEF OF STAFF REPORT</b>	<i>Board</i>	Inform	Page 37
<b>10. CEO SEARCH COMMITTEE UPDATE</b>	<i>Rymer</i>	Inform	
<b>11. CMO REPORT</b>	<i>Kidd</i>	Inform	Pages 38-40
<b>12. ADMINISTRATIVE REPORT FOR JANUARY</b>	<i>Jensen</i>	Inform	Pages 41-43
<b>13. FINANCIALS FOR THE MONTH ENDED OCTOBER 31, 2020</b>	<i>Jensen</i>	Inform	Pages 44-52
<b>14. BOARD COMMENTS</b>	<i>Rymer</i>	Inform	
<b>15. ADJOURN</b>	<i>Rymer</i>		

Note: To view this meeting you may visit <http://sonomatv.org/> or YouTube.com.



**SONOMA VALLEY HEALTH CARE DISTRICT  
BOARD OF DIRECTORS' MEETING**

**MINUTES**

THURSDAY, DECEMBER 10, 2020

**HELD VIA ZOOM VIDEOCONFERENCE**

	<b>RECOMMENDATION</b>	
<b>MISSION STATEMENT</b> <i>The mission of SVHCD is to maintain, improve and restore the health of everyone in our community.</i>		
<b>1. CALL TO ORDER</b>	<i>Hirsch</i>	
The meeting was called to order at 6:00 pm.		
<b>2. PUBLIC COMMENT</b>	<i>Hirsch</i>	
None		
<b>3. BOARD CHAIR COMMENTS</b>	<i>Hirsch</i>	
Ms. Hirsch welcomed the new Board members who were all previously sworn in. Since this was Ms. Mather's last Board meeting, she also expressed her appreciation of Ms. Mather's accomplishments and extended her best wishes to the new Board and to Kelly. Ms. Nevins also thanked Ms. Mather for her contributions to the hospital and the Valley.  Ms. Mather expressed her thanks to both Ms. Hirsch and Ms. Nevins, and the Board members thanked them as well.		
<b>4. CONSENT CALENDAR</b> a. Board Minutes 08.06.20 b. Medical Staff Credentialing	<i>Rymer</i>	Action
		<b>MOTION:</b> by Boerum to approve, 2 <sup>nd</sup> by Mainardi. All in favor.
<b>5. PRESENTATION OF NEW BOARD MEMBER SWEARING IN EVENT</b>	<i>Rymer</i>	Inform
A brief presentation was shown of the swearing-in of the new Board members.		
<b>6. ELECTION OF SVHCD BOARD CHAIR AND OFFICERS</b>	<i>Rymer</i>	Action
Mr. Rymer nominated himself as Chair, Dr. Mainardi as 1 <sup>st</sup> Vice Chair, Ms. Idell as 2 <sup>nd</sup> Vice Chair, Mr. Boerum as Treasurer, and Dr. Bjorndal as Secretary.		<b>MOTION:</b> by Rymer to approve, 2 <sup>nd</sup> by Idell. All in favor.
<b>7. CEO TRANSITION PLAN/APPOINTMENT OF INTERIM CEO</b>	<i>Rymer</i>	Action
Members of the Board, staff, and public thanked Ms. Mather for all her accomplishments and wished her the best in all her endeavors. Ms. Mather recommended Dr. Kidd as Chief Operating Officer over HR, IT, ancillary, nursing, and quality, increasing her time to 0.8 FTE.		<b>MOTION:</b> by Boerum, 2 <sup>nd</sup> by Mainardi. All in favor.

She then recommended Mr. Jensen for Interim CEO reporting to the Board and supervising the Board Clerk, marketing, financial, construction, facilities, and EVS. She recommended Mr. Rymer as representative to the Foundation Board. Dr. Kidd will be on site 2.5 days/week and Mr. Jensen 2 days/week; he is a 0.5 FTE and she recommended he stay at that level.		
<b>8. COMMUNITY PERCEPTION SURVEY RECOMMENDATION</b>	<i>Kenney/ Mather</i>	
Mr. Kenney explained the survey process and recommended Engel Research Partners, which handled the previous two community surveys. If approved, the survey would begin in January and finish in March. Ms. Mather recommended polling in addition to the survey in response to Dr. Mainardi's question.		<b>MOTION:</b> by Boerum to approve, 2 <sup>nd</sup> by Mainardi. All in favor.
<b>9. BOARD RESOLUTION NO. 355 FOR BANK SIGNATURE</b>	<i>Jensen</i>	
Ms. Dungan recommended the resolution be approved with Mr. Jensen and Mr. Rymer having bank signature authority.		<b>MOTION:</b> by Boerum, 2 <sup>nd</sup> by Mainardi. Vote taken by roll call with 5 ayes. Motion passed.
<b>10. REPORT OF AUDIT COMMITTEE</b>	<i>Jensen</i>	
Mr. Jensen said the hospital received a clean audit with no management letter. The auditors will require a single audit in January for the CARES money the hospital received. He indicated the auditors were very complimentary of the hospital's finances and staff.		
<b>11. REPORT OF CEO SEARCH COMMITTEE</b>	<i>Rymer</i>	
Mr. Rymer said the CEO search is moving along quite well. WittKieffer presented nine finalist candidates for resume review at the Committee meeting on December 9 <sup>th</sup> . They reached out to 875 candidates, of which 83 expressed interest and were screened. Six of the nine will meet for structured interviews with the Committee, where one primary and one backup finalist will be selected for interviews with the Board, leadership, medical staff, and the community. Then a recommendation will be made to the Board.		
<b>12. BOARD WORK PLAN AND CALENDAR FOR 2021</b>	<i>Rymer</i>	
Dr. Mainardi recommended Ms. Cheryl Johnson as a speaker. Ms. Mather recommended placeholders for Sonoma's new city manager, Mr. Abraham's replacement at Hospital Council, Ms. Meghan Hardin, and Senator Dodd's team.		<b>MOTION:</b> by Idell to approve, 2 <sup>nd</sup> by Boerum. All in favor.
<b>13. CMO REPORT</b>	<i>Kidd</i>	
Dr. Kidd said the last eight weeks have been spent primarily on recovery from the cyberattack, with a lot of cleanup to do. There are some complex limitations within the Imaging system still (which is keeping SVH from being off stroke divert). As of Friday night, Sonoma County will be sheltering in place. This will not affect hospital services at this time. Two shipments of N95 masks were received. Testing continues to be a struggle with very limited supplies. Two new therapies have been added for outpatients. Approval of		

vaccines is expected within a few days and we should receive a first shipment next week; front line staff and physicians will receive first doses. Outreach to staff and the community is planned as soon as more information is received.		
<b>14. ADMINISTRATIVE REPORT FOR OCTOBER</b>	<i>Mather</i>	
Ms. Mather reported the health information breach notification went out to patients and will be going out to employees. There have been some delays on the CT and MRI projects. We should have the new CT in house in January, and the MRI will be up by the end of 2021. Ms. Kimberly Drummond has been promoted to Chief of Support Services. A 2% salary increase for all staff will be given at the beginning of January. Regarding UCSF she expected them to move to higher level surgeries to Marin and lower level surgeries in Sonoma.		
<b>15. FINANCIALS FOR THE MONTH ENDED SEPTEMBER 30, 2020</b>	<i>Mather</i>	
Mr. Jensen reviewed financial information for the month of September 2020. Days' cash were 63, A/R days were 38.9, A/P was \$2.8 million, and A/P days were 40.8. \$3 million in cash was received on a goal of \$3.3 million. Inpatient revenue was down 19%, outpatient revenue was close to budget, and ER volumes were down but acuity was up. Total operating revenue was \$3.2 million vs. budget of \$3.6 million. Expense variances were largely due to the COVID response. The operating margin was (\$1.1 million) vs. budget of (\$798,000). Net income/loss after all activity was (\$576,326) vs. \$2,047. October financials will be discussed at next week's Finance Committee meeting.		
<b>16. BOARD COMMENTS</b>	<i>Board</i>	
The legislative letter requesting additional relief for California hospitals was included in the packet. New Board member Dr. Judith Bjorndal mentioned the difficulty of forming relationships with remote meetings and asked all attending to bear that in mind.		
<b>17. ADJOURN</b>	<i>Rymer</i>	
Adjourned 7:35 p.m.		

## Goals and Metrics for the UCSF Health/SVH Affiliation Proposed Framework

### UCSF Health’s Primary Affiliation Goals

- Providing UCSF Quality-Care No More than 20 Miles from Home in the North Bay
- Develop intentional strategies to create value for UCSF Health and SVH
- Further expand primary and specialty care capabilities

### SVH’s Primary Affiliation Goals

- Increasing convenient, local access to UCSF-quality health care to Sonoma Valley and the North Bay
- Building a network of care with high quality facilities and providers for the North Bay
- Increasing utilization of SVH hospital facilities and enhancing revenue streams

### Vision for the North Bay – Coordination of Care Through an Effective Hospital Network

Sonoma Valley Hospital  
Acute Primary  
Care/Ancillary  
Services/Local Specialists

MarinHealth  
Secondary  
Care/Specialists

UCSF Health  
Quaternary/Tertiary  
Care/Specialists

### Goal “Buckets” for Sonoma Valley Hospital

Increase  
Surgical  
Facilities  
Utilization

Add at least  
(2) new  
surgical  
programs

- Bariatrics
- GI
- Ortho
- Breast Cancer
- General Sx
- Ophtho
- Pain Mgmt
- Endocrine
- Gynecology

Increase  
Ancillary  
Services  
Utilization

Increase  
ancillary  
utilization by  
x%

- MRI
- CT
- Ultrasound
- Nuc Med
- Cardiology
- Labs
- Mammo-  
graphy
- PT/OT/ST
- Wound Care
- Occ Health

Increase  
Specialist  
Access

Add at least  
(3) new  
specialists

- GI
- Urology
- Endocrin
- Rheum
- Pulmonary
- Neuro  
(exists)
- Infectious  
Diseases

Share  
Resources  
and/or  
Reduce Costs

Assess  
opportunity for  
economies of  
skill and scale  
annually

- Information  
Technology
- Quality
- Materials  
Mgmt
- Mktg & PR
- Efficiency
- HR

Enhance IT  
Integration

Implement at  
least (1) IT  
integration/  
enhancement

- EPIC
- Telehealth  
platforms
- Network  
transfer  
center

Improve  
Access to  
UCSF Care

Implement at  
least (2) UCSF  
network  
growth  
solutions

- Physician  
Group linked  
to SVH &  
UCSF  
including  
PCPs &  
Specialists
- Women’s
- Cardiology
- Cancer  
Screening
- Virtual care



# Sonoma Valley Hospital Affiliate Overview

January 7, 2021

Jen Sweeney  
Chief Operating Officer  
UCSF Health Affiliates Network

An aerial photograph of the UCSF campus in San Francisco. The foreground shows several large, multi-story white buildings with many windows. The middle ground is a dense forest of green trees. In the background, a tall, blue metal tower stands on a hill. The sky is clear and blue.

# Agenda

1. UCSF Health Overview
2. Vision 2025
3. Current Collaboration
4. Future Opportunities



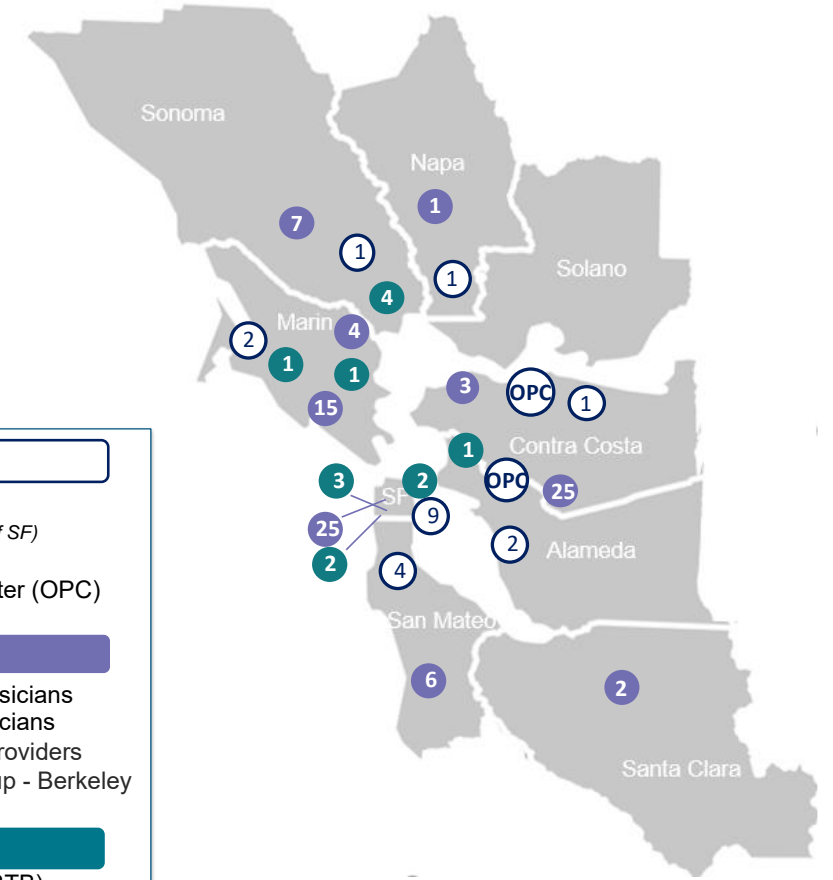
# UCSF Health Mission, Vision, and Values



# UCSF Health Affiliates Network Overview

## Hospitals

## Ambulatory & Physician



UCSF Health	
250+	Specialty Clinics
33	Satellite Clinics ( <i>outside of SF</i> )
3,000	Faculty Providers
2	Satellite Outpatient Center (OPC)
Affiliated Physicians	
152	Clinically Integrated Physicians
127	Benioff Children's Physicians
190	Marin Health Alliance Providers
8	John Muir Medical Group - Berkeley
Affiliate Sites	
7	Hospice by the Bay (HBTB)
6	Golden Gate Urgent Care (GGUC)
2	Circle Medical

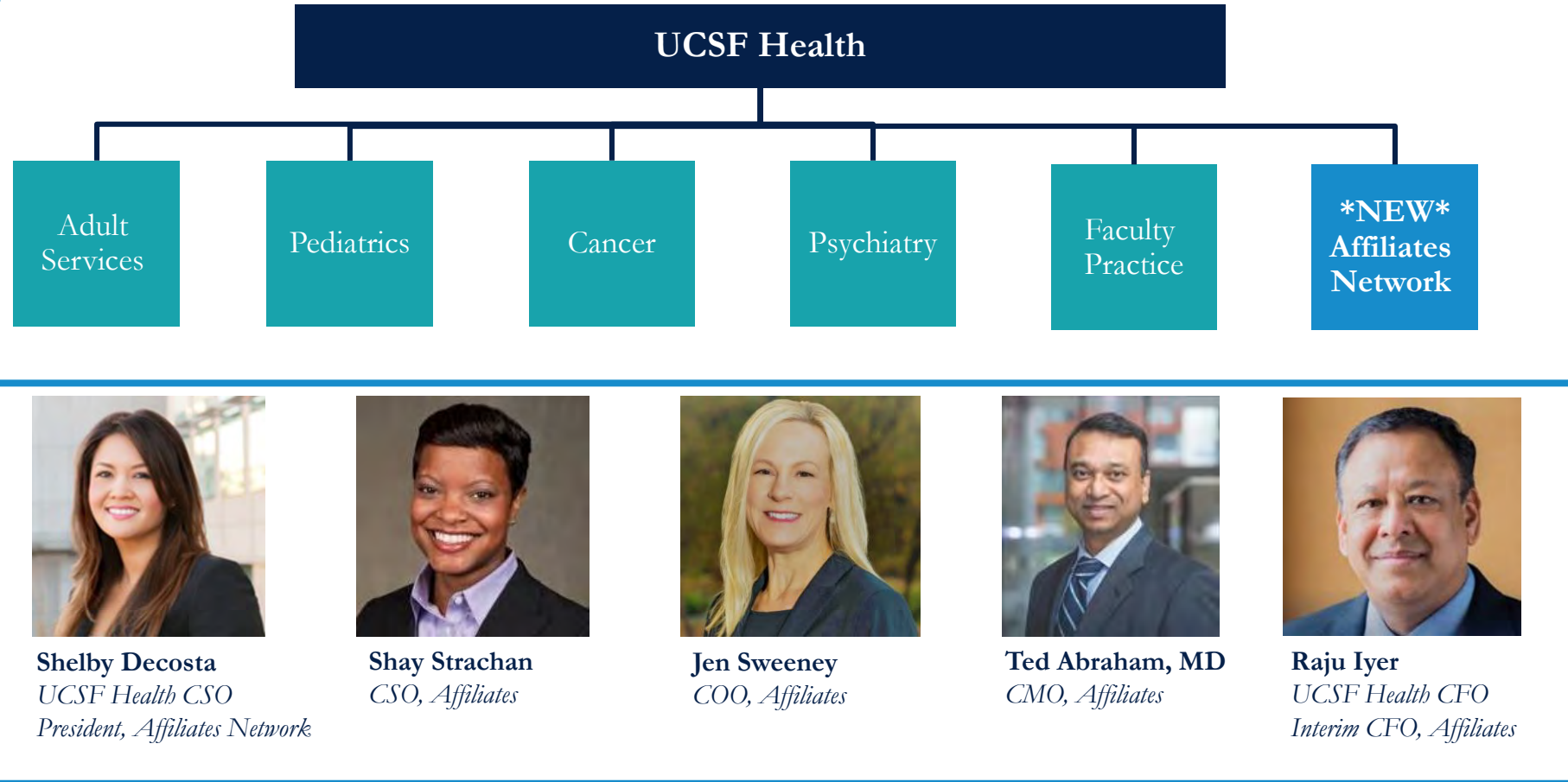
# UCSF Health Vision 2025 calls for further integration and expansion of the network



UCSF Health Network: **Work with our partners to deliver the right care in the right place at the right time**

- Ensure that no one needs to drive more than 20 miles to access UCSF care in the Bay Area
- Develop intentional strategies to create value for UCSF Health and our strategic affiliates
- Further expand primary and specialty care capabilities throughout the network

# UCSF Health has established a new network affiliates executive leadership team to lead our new strategic approach



# To achieve our vision, we have adapted our network strategy to respond in our more complex current environment

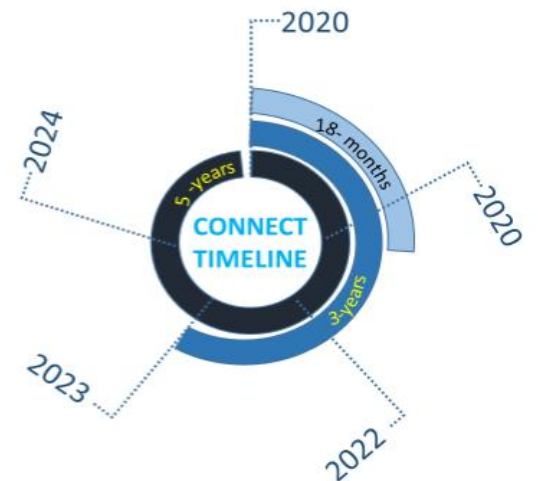
1. <b>WHAT: ALIGN</b>	2. <b>HOW: CONNECT</b>	3. <b>WHERE: EXPAND</b>
<p>Optimize culture and communications across our organization and affiliate network ...develop a dedicated affiliate network leadership team</p>	<p>Create a seamless interconnected network ...rapidly scale innovations in care delivery that promote convenient, and safe care delivery</p>	<p>Close gaps in the care continuum across our priority geographies ...prioritize investment in our contiguous geographies</p>

# ALIGN: Optimize Culture & Communication


- Leadership team committed to the Affiliates network
- Management services to provide leadership support and program development
- Transfer Command Center – SVH potential pilot
  - Streamline process to align upfront patient placement
  - Customer service & reciprocity
- Integration with UCSF & Marin Health Clinic Alliance on IT solutions
- Enhancement of quality delivery of healthcare service with access close to home

# CONNECT: Prioritize optimization of the patient care delivery experience

- Build cohesive quality network of care across North Bay
- Expansion of primary & specialty capabilities at SVH
- Provider and patient system access through digital advancement
- Improved communication across network via interoperability
  - Provider e-mail
  - Development of navigation system
  - Transfer command center



# EXPAND- partner to bring a consistent set of services to the communities we serve jointly

	 JOHN MUIR HEALTH	 Washington Hospital Healthcare System	 marinhealth.	 SONOMA VALLEY HOSPITAL <small>SONOMA VALLEY HEALTH CARE DISTRICT</small>
Acute Care	●	●	●	●
UCSF Outpatient Center	●	●	●	●
Aligned Physician Network	●	●	●	●
UCSF Cancer Care	●	●	●	●
UCSF Adult Specialties	●	●	●	●
UCSF Pediatric Specialties	●	●	●	●
Behavioral Health	●	●	●	●
Primary Care	●	●	●	●
Outpatient Services – Lab, Imaging, Ambulatory Surgery, Pharmacy, Urgent Care	●	●	●	●

● Current ● Future



# Collective vision to guide our affiliation

Combining the expertise and resources of UCSF and SVH to share best practices and **collectively enhance the quality of services in the Sonoma Community**

**Coordinating services** for out-of-area transport of sick patients and facilitating the transfer of patients back to the SVH Community when they require less intensive care

**Enhancing the availability of physician and administrative services** in the Sonoma Community through **program development**

**Increasing patient, family and community satisfaction** with patient care in the Sonoma Community

# Sonoma Valley Hospital's future strategic plan outlines key goals....

## Sonoma Valley Hospital Vision

- Exceed Community Expectations in Emergency Services
- Become a 5 Star Hospital
- Provide Access to Excellent Physicians
- Create the UCSF Health Outpatient Center at Sonoma

.....And is close to recruitment of a new CEO



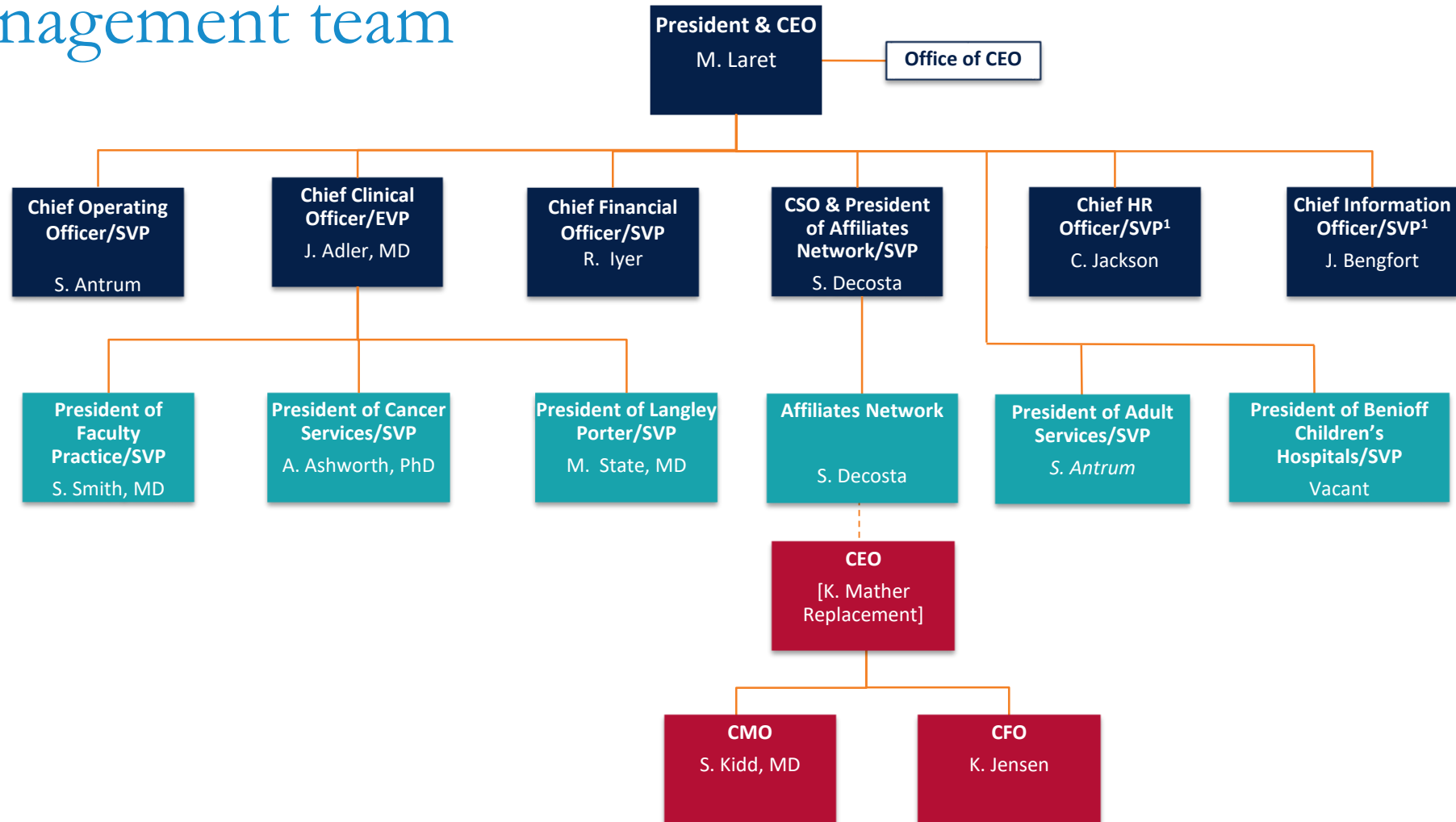
**Contemplated:**  
UCSF Health | Sonoma Valley  
Outpatient Center

# An expanded relationship supports SVH and UCSF in implementing both strategic plans and recruitment

## **Management Services Agreement**

- Drives further integration and alignment with UCSF Health
- Broadens catchment area for SVH
- New growth and business development opportunities
- Provides SVH perspectives at UCSF Health management forums
- Enhances local leadership access to tools and resources at UCSF Health
- Supports development opportunities
- Provides long term risk mitigation for SVHD board

# With a new leadership team, we expect to extend this structure to Sonoma Valley Hospital's executive management team



# Summary: *Opportunity to build and strengthen our visions into the future*



- Expanded partnership with Sonoma Valley Hospital is a high priority for UCSF Health
- We believe in expanding long term mutually beneficial partnerships based on collaboration and commitment to delivering high quality patient care to the community
- We have a strong track record of partnering with strong independent organizations like Sonoma Valley Hospital and will identify strategic opportunities to implement our combined vision



# Appendix

# 3 We continue to collaborate closely to address Covid-19



## Network COVID-19 Sessions

- Monthly affiliate network videoconferences attended by over 120 affiliate members and guests, including SVH CEO and CMO
- UCSF leaders share real-time updates and best-practices



## Protocol & Practice Sharing

- Providing virtual access to UCSF COVID-19 guidelines and protocols
- Connecting UCSF subject matter experts directly with SVH



## Supplies & Personal Protective Equipment

- Extending medical and personal protective equipment to SVH through the Salesforce 1BPPE effort Identifying group purchasing opportunities



## Testing

- Sharing needed testing supplies across the network
- Established pre-operative testing for UCSF North Bay patients at SVH



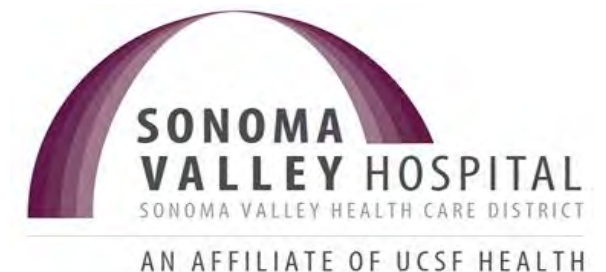
## Tools & Applications

- Leveraging UCSF's experience with clinical technologies to standardize care and communication practices across the network



# Partnership Overview– Demonstrated accomplishments

- Elevated quality of care delivery in the community
  - Acute Stroke Ready certification
  - 5-Star Hospital Quality Readiness
- Developed a telehealth capabilities at Sonoma Valley
  - Neurology, Infectious Disease and Urology
- Integrated the former Prima Clinics under the UCSF / MarinHealth Clinic Alliance
  - Ambulatory EMR, reduced subsidy by \$500,000
- Launched cobranding of the SVH / UCSF affiliation



# Future Collaboration

## *Coordination of Care through an Effective Hospital Network*

- Management services to provide leadership support and program development
- Ambulatory Development
- Build network of care across the North Bay
- Expansion of primary and specialist capabilities
- Integration with UCSF & Marin Health Clinic Alliance on Information Technology solutions
- Further enhancement of quality delivery of healthcare service with access close to home



# EXPAND: Our network will allow us to create capacity at our core sites and scale both population health and complex care initiatives



1. Enhance quality and patient experience across the UCSF Health affiliates network
2. Invest alongside affiliates to fill gaps in care for profitable outpatient services
3. Create a new identity for UCSF in the community – *UCSF Community Care*
4. Manage UCSF patients in community facilities, closer to home to create capacity for complex care at UCSF
5. Utilize technology to connect with patients directly and assist patients and physicians in navigating the UCSF Health affiliates network



# 1 UCSF Health Overview

#1 | US News Northern CA Ranking

#8 | US News National Ranking

1,276 | Licensed beds across 4 hospitals

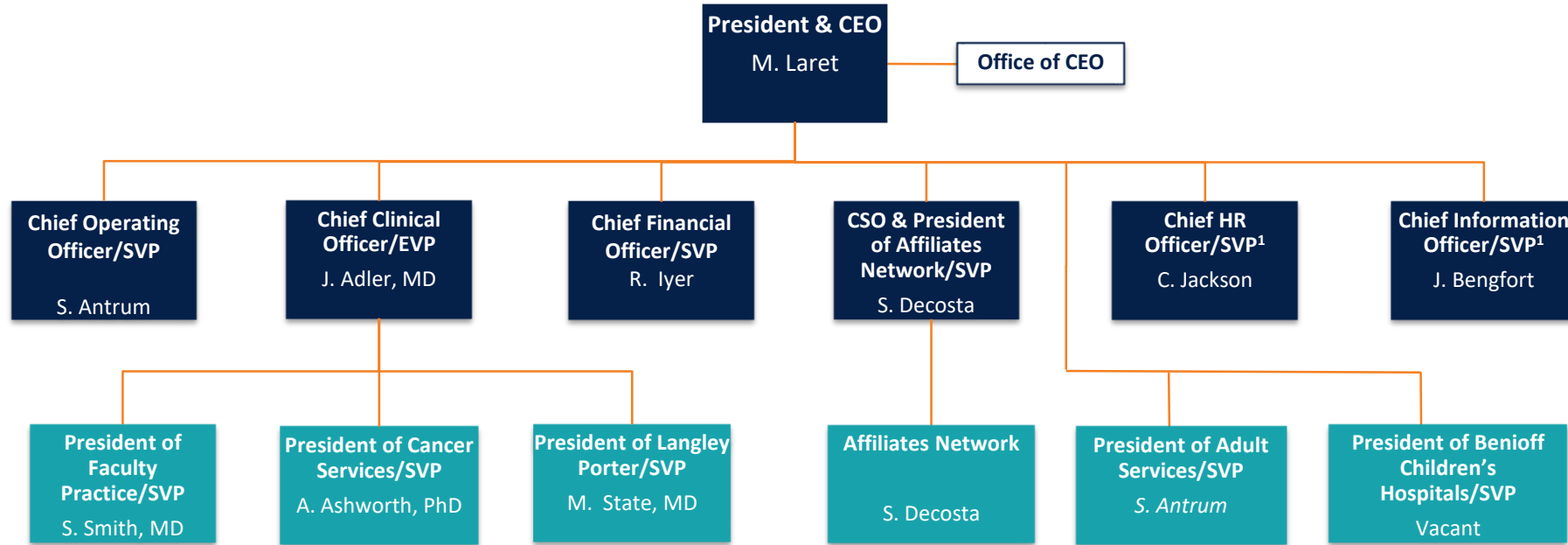
\$5B | Revenue

3K+ & 12K+ | Physicians and Employees

2 M | Outpatient Visits

4

# New organizational structure implemented to achieve strategic objectives



Effective Jan 1 2020



**JANUARY 2021**

**SVH - ENSIGN PARTNERHIP UPDATE**



**VALLEY OF THE MOON**  
— POST ACUTE —

# SUMMARY OF FACILITY

## 4<sup>th</sup> QUARTER CLINICAL METRICS

- Q4 AVERAGE DAILY CENSUS = 21.3 (Census down 4 vs. January)
- Q4 AVG OCCUPANCY 78.8% (down from 91.98% in first quarter)
- Q4 CENSUS WAS 65% LONG TERM CARE
- 14 ADMISSIONS in Q4
- 16 DISCHARGES in Q4
- AVG. LENGTH OF STAY FOR SKILLED RESIDENTS IS 18.4 DAYS IN Q4 (DECREASE FROM 21.76 DAYS Q1)
- AVG. 30 DAY RE-ADMISSION RATE FOR Q3 & 4 6% (6 RESIDENTS)
- NUMBER OF RESIDENTS POSITIVE FOR COVID in 2020 WAS 1. (ADMIT TESTED POSITIVE UPON ADMISSION WHO TESTED NEGATIVE IN HOSPITAL)
- NUMBER OF COVID RELATED DEATHS IN 2020 WAS ZERO



# CENSUS DETAIL 2020

Period Ending	Jan/20	Feb/20	Mar/20	Apr/20	May/20	Jun/20	Jul/20	Aug/20	Sep/20	Oct/20	Nov/20	Dec/20	AVG	YTD
<b>Sonoma Valley Hospital</b>														
	27	27	27	27	27	27	27	27	27	27	27	27	27	27
Managed Care	3.77	1.93	4.35	5.27	3.77	1.17	1.48	1.74	2.47	0.87	0.30	0.45	2.30	2.30
Medicaid	11.71	12.90	12.10	11.67	10.61	12.60	13.45	13.39	15.50	12.10	13.67	11.10	12.55	12.55
Medicare A	9.32	8.45	7.26	4.70	7.00	8.50	7.71	6.35	3.07	7.48	4.67	7.77	6.87	6.87
Other	0.29	0.45	0.13	-	-	0.03	0.26	0.81	1.00	1.71	2.00	1.77	0.70	0.70
Private	-	0.83	1.00	0.77	-	0.20	0.58	1.00	0.47	-	-	-	0.40	0.40
<b>TOTAL</b>	<b>25.10</b>	<b>24.55</b>	<b>24.84</b>	<b>22.40</b>	<b>21.39</b>	<b>22.50</b>	<b>23.48</b>	<b>23.29</b>	<b>22.50</b>	<b>22.16</b>	<b>20.63</b>	<b>21.10</b>	<b>22.83</b>	<b>22.83</b>
Occupancy %	92.95%	90.93%	92.00%	82.96%	79.21%	83.33%	86.98%	86.26%	83.33%	82.08%	76.42%	78.14%	84.55%	84.55%
Admissions	18	11	10	10	10	13	10	8	7	3	5	6	9.25	111
Discharges/Deaths	15	11	11	11	11	11	11	6	9	6	3	7	9.33	112
Leaves/Room Reserves	0	1	1	3	1	1	2	0	1	1	3	1	1.25	15
Return from Leaves	1	0	2	1	1	1	2	0	0	0	3	0	0.92	11



**VALLEY OF THE MOON**  
POST ACUTE

**ENSIGN GROUP**



# KEY QUALITY METRICS

PERFORMANCE GOAL	OBJECTIVE	METRIC	ACTUAL RESULT	GOAL LEVEL
1	Highly Satisfied Patients 90% or > highly satisfied	Measured by resident exit survey question "Would you return or refer a friend to Valley of the Moon?"	Total Q4 Discharges <b>Result= 100%</b>	5 is 90 and above 4 is 85 to 89 3 is 81 to 88 2 is 75 to 80 1 is 74 and below
2	Falls reduction	Falls/patient days	CA Average 1.7 Natl Average 3.3 <b>Result= 3 falls/1,960 &lt; 1%</b>	5 is 1.7 or less 4 is 1.8-2.5 3 is 2.6-3.3 2 is 3.4-3.9 1 is >3.9
3	Restraint Free Environment	Restraint utilization	CA Average 0.5% Natl Average 0.3% <b>Result= 0%</b>	5 is 0.5% or less 4 is 0.4-0.3% 3 is 0.31-0.35 4 is 0.36-0.40 5 is >0.41
4	Pressure Ulcer prevention	CMS report	CA Average 1.27% Natl Average 2.71% <b>Result= 1.29% Short term</b> CA Average 7.78% Natl Average 8.52% <b>Result= 0% Long term</b>	5 is 1.0 or less 4 is 1.1-1.5% 3 is 1.6-1.8% 2 is 1.9-2.1% 1 is >2.1%
5	Antipsychotic Medication	CMS report	CA Average 1.16% Natl Average 1.53% <b>Result= 1.48% Short term</b> CA Average 12.80% Natl. Average 8.74% <b>Result= 13.11% Long term</b>	5 is 1.4% or less 4 is 1.5-1.7% 3 is 1.8-2.0% 2 is 2.1-2.5% 1 is ≥ 2.6 %
6	% Patients successfully returned home	CMS report	CA Average 48.5% Natl Average 48.6% <b>Result= 81.56%</b> (higher % indicates successful discharge)	5 is >48.6% 4 is 48.5-48.3% 3 is 48.2-47.9% 2 is 47.8-46.5% 1 is ≥ 46.6%



**VALLEY OF THE MOON**  
POST ACUTE

**ENSIGN GROUP**

# KEY QUALITY METRICS CONTINUED...

PERFORMANCE GOAL	OBJECTIVE	METRIC	ACTUAL RESULT	GOAL LEVEL
7	Re-hospitalized within 30 days after SNF admission	CMS report	CA Average 22.8% Natl Average 22.9% <b>Result= 9.15%</b>	5 is <22.8% 4 is 22.9-23.5% 3 is 23.6-24.0% 2 is 24.1-24.6% 1 is >24.6
8	Residents who self-report moderate to severe pain	CMS report	CA Average 1.20% Natl Average 8.18% <b>Result= 1.90% Short term</b> CA Average 0.79% Natl Average 4.94% <b>Result= 3.76% long term</b>	5 is 6.2% or < 4 is 6.3-9.0% 3 is 9.1-14.0% 2 is 14.1-18% 1 is ≥ 18%
9	Discharged residents with Emergency Room visit within 30 days	CMS report	CA Average 10.1% Natl Average 10.7% <b>Result= 8.11%</b>	5 is ≤ 10.1% 4 is 10.2-10.5% 3 is 10.6-10.8% 2 is 10.9-11.1% 1 is ≥ 11.2%
10	Catheter Associated Urinary Tract Infection	CMS Report	Natl Average <1.04 <b>Result= 0%</b>	5 is <0.95 4 is <1.00 3 is <1.04 2 is <1.06 1 is <1.08
11	Central Line Bloodstream Infection	CMS Report	Natl Average <0.51 <b>Result= 0%</b>	5 is <0.44 4 is 0.45-0.50 3 is 0.51-0.55 2 is 0.56-0.60 1 is <0.60
12	C-Difficle Infection	CMS Report	Natl Average 7.4/10k pt days <b>Result= 0%</b>	5 is <6.9 4 is 6.8-7.0 3 is 7.1-7.4 2 is 7.5-7.9 1 is >7.9



# FINANCIAL OVERVIEW

	FINAL	FINAL	FINAL	FINAL	FINAL	FINAL
TOTAL NET REVENUE	Jul 2020	Aug 2020	Sep 2020	Oct 2020	Nov 2020	TOTAL Q3 and Q4
Total Net Revenue	825,151.25	541,159.06	527,732.28	529,407.51	439,299.61	2,862,749.71
Total Operating Expenses	470,991.81	380,430.27	390,301.12	400,316.91	366,648.86	2,008,688.97
EBITDAR	312,901.88	133,670.84	111,044.55	102,620.22	50,685.77	710,923.26

May 2020
381,078.16
373,695.98
1,585.71

Revenue Adjustment due to contractual discrepancy with PHP that occurred in May 2020. Approx. \$140K



VALLEY OF THE MOON  
POST ACUTE

ENSIGN  GROUP

# VALLEY OF THE MOON TEAM

Name	Position	Email	
Mike Empey	Administrator	<a href="mailto:mempey@ensignservices.net">mempey@ensignservices.net</a>	
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Shobha Neupane	Director of Rehab	<a href="mailto:Sneupane@ensignservices.net">Sneupane@ensignservices.net</a>	
Jennifer Raymond	Therapy Resource, Flagstone North	<a href="mailto:jraymond@ensignservices.net">jraymond@ensignservices.net</a>	
Claudia Alexander	MDS Resource, Flagstone North	<a href="mailto:cbalexander@ensignservices.net">cbalexander@ensignservices.net</a>	
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Cason Bush	Cluster Leader, Flagstone North	<a href="mailto:cbush@ensignservices.net">cbush@ensignservices.net</a>	
Mira Jensen	Director of Clinical Services, Flagstone	<a href="mailto:mjensen@ensignservices.net">mjensen@ensignservices.net</a>	
Adam Willits	President, Flagstone	<a href="mailto:awillits@ensignservices.net">awillits@ensignservices.net</a>	

## SVH CHIEF OF STAFF BOARD REPORT

**DATE:**

**TERM OF REPORT:**

**CHIEF OF STAFF:**

**CURRENT MEDICAL STAFF BY THE NUMBERS:**

**Total Medical Staff:**

**Active Medical Staff:**

**New Medical Staff:**

**Newly Retired Medical Staff:**

**Pertinent Medical Staff Gaps / Needs:**

**MEDICAL STAFF QUALITY:**

**ED Rate My Hospital Physician Scores:**

**Quality initiatives related to ED / RMH Scores:**

**HCAHPS Physician Scores:**

**Quality initiatives related to HCAHPS Physician Scores:**

**Other Medical Staff Quality Initiatives:**

**MEDICAL STAFF MEETINGS:**

**Any pertinent reports (including departmental updates) from:**

**Medicine Committee:**

**Surgery Committee:**

**MEC:**

**Performance Improvement:**

**Pharmacy & Therapeutics:**

**SUMMARY: OVERALL STATE OF SVH Medical Staff:**



**To:** SVHCD Board of Directors  
**From:** Sabrina Kidd, MD  
**Meeting Date:** January 7, 2020  
**Subject:** CMO Report

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1. March Highlights included:
  - a. CIHQ triennial survey and Stroke Ready Surveys both went well.
    - i. Small list of mainly policy updates that need to be made overall.
    - ii. Stroke Ready official report pending as of date of writing, but verbally we did very well.
  - b. A new PCP will be joining Sonoma Marin Health in late spring.
  - c. CA Bridge grant to increase case management support to ED was submitted.
  - d. COVID-19 Incident Command Center continues to be open and active. Highlights include:
    - i. We are cohorting patients as indicated on one floor.
    - ii. We have opened our second floor to increase the number of available beds and our flex program was approved.
    - iii. We have prepared the Old ED area to be used as a low acuity ED for non-Covid patients should the need arise. We have a triage tent plan ready for implementation once needed.
    - iv. We have opened a RN run screening hotline and drive thru testing site for symptomatic patients who meet criteria.
    - v. We are collecting lists of potential “surge” physicians and staff who are willing and able to volunteer.
    - vi. PPE (Personal protective equipment)
      1. We have received emergency goggles and masks from requested emergency supply stocks.
      2. We have developed re-use protocols for masks, eye protection, and gowns.
      3. Community members have graciously donated supplies and are making re-usable cloth masks for hospital use.
    - vii. Testing supplies and labs continue to be our limiting factor on many fronts.

2. Postponed Events:
  - a. Awaiting Bariatric accreditation site visit. Our application has been submitted and is under review.
3. Quality:
  - a. We reported an “unusual occurrence” to DPH and this will be discussed more through Board Quality Committee.
4. December Highlights included:
  - a. Significant Downtime Security Event Recovery:
    - i. Recovery continues now under the leadership of UCSF.
    - ii. Ended stroke divert status as imaging systems were fully restored.
    - iii. Planning for on-going cybersecurity is in process.
  - b. COVID-19: December COVID-19 inpatient census was steady at 3-5 patients daily. Recent highlights include:
    - i. Vaccination
      1. We have now vaccinated at least 325 healthcare workers including some first responders with round 1 of the Pfizer vaccine
      2. We will work with the county on the next Phases of Vaccine Distribution.
      3. SVH Townhall on the Vaccine 12/17/2020
      4. Community Townhall on the Vaccine 1/12/2021
    - ii. PPE (Personal protective equipment) / Supplies:
      1. All PPE is sufficient at this time. We continue monitoring and have received shipments of newer N95 masks.
    - iii. Testing
      1. In house PCR testing continues on the Aries II machine for all ED and inpatients. Supplies remain very limited (0-48/ week).
      2. We continue drive thru testing for pre-op patients for SVH and UCSF and are processing through UCSF.
      3. We continue to explore options to increase access to testing, but supplies remain limited.
    - iv. Monoclonal Antibodies
      1. Bamlanivimab & Regeneron now available via Emergency Use Authorization (EUA) for outpatient infusions. Very few orders have been received for this therapy.
  - c. GI Services:
    - i. Continuing to explore options with UCSF and MarinHealth.
  - d. ED:
    - i. Census has remained relatively low (around 20 per day average).
  - e. Med-Surg / ICU / Surgery Updates:
    - i. Interviews early January for new Surgery Department director.
    - ii. Talks continue exploring the partial use of the second floor by a dialysis provider.

- f. Sonoma Family Practice:
  - i. Management Service Agreement signed with Meritage to manage SFP and share loss beginning 1/1/2021.
- 5. Medical Staff:
  - i. Combined Performance Improvement / Pharmacy & Therapeutics Meeting held in December, but due to the on-going recovery data available for review was limited.
- 6. Quality Events:
  - a. Breach Notifications were sent following the Cyberattack.





**To:** SVHCD Board of Directors  
**From:** Administrative Team  
**Date:** 12/31/20  
**Subject:** Administrative Report

**Summary**

Over 300 vaccinations were given to staff, physicians and their office staff in December. We also continue to recover from the October 11<sup>th</sup> Significant Downtime Event. You can see that the volumes were significantly down in November due to this event.

**Update from 2025 Strategic Plan:**

Strategic Priorities	Update
Enhance Quality and Services through the affiliation with UCSF Health	<ul style="list-style-type: none"> <li>➤ The new affiliation agreement with UCSF is effective January 1, 2021.</li> <li>➤ UCSF has been instrumental in helping us recover from the cyber-attack.</li> <li>➤ A framework to track the value of the affiliation has been completed and will be used in future quarterly meetings.</li> <li>➤ The second floor will be evaluated for future use by UCSF in addition to the old Emergency department.</li> </ul>
Exceed Community Expectations especially in Emergency Services	<ul style="list-style-type: none"> <li>➤ The CT Project continues to experience delays and but should be done in spring, 2021. The MRI (Project 3) will be up by the end of 2021. We have a plan to move Cardiology into the Outpatient Diagnostic Center area where the old CT is today, which will open up a space for UCSF physicians in the old Cardiology area when needed.</li> <li>➤ Volumes are lower than the prior year due to COVID. Testing supply availability continues to be a problem but the ER patients are being tested as needed.</li> <li>➤ Teleheath for Emergency patients is a recommended strategy for 2021.</li> </ul>
Ensure Patients receive Excellent, Safe care	<ul style="list-style-type: none"> <li>➤ The Human Experience strategy is going well and patient rounding has proven to be very informative. We have selected our top three areas to focus on for improvement and a new work plan charter has been established to take our HCAHPS scores to the top percentile.</li> <li>➤ We are purchasing the bug zapping robot this year thanks to SVHF.</li> <li>➤ We have prioritized refurbishment of the ICU as our next big project to be funded by Sonoma Valley Hospital Foundation and are fundraising.</li> <li>➤ A new General Surgery approach with “Surgicalists” has begun to improve the continuity of care.</li> </ul>
Provide Access to Excellent Physicians	<ul style="list-style-type: none"> <li>➤ We are evaluating the Primary Care physician needs for Sonoma with Prima Medical Group.</li> <li>➤ Meritage Medical Network starts as a partner with Sonoma Family Practice in 2021.</li> <li>➤ UCSF is partnering with us on Gastroenterology.</li> <li>➤ We are looking at more telehealth solutions in 2021.</li> </ul>
Be a Healthy Hospital	<ul style="list-style-type: none"> <li>➤ Health screenings for staff have been completed.</li> <li>➤ Culture team assignments have been made and will continue to promote community trust, leadership development, rewards &amp; recognition and wellness.</li> <li>➤ A video of Wellness U will be offered from SVH in early 2021.</li> </ul>

## OCTOBER 2020

			National Benchmark
<b>Patient Experience</b>	<b>Current Performance</b>	<b>FY 2021 Goal</b>	
Would Recommend Hospital	80%	> 70 percent	50th percentile
Inpatient Overall Satisfaction	84%	>70 percent	50 <sup>th</sup> percentile
Outpatient Services	4.72	4.5	3.8
Emergency Department	4.52	4.5	3.8
<b>Quality &amp; Safety</b>	<b>YTD Performance</b>	<b>FY 2021 Goal</b>	<b>Benchmark</b>
Central Line Infection	0	<1	<.51
Catheter Infection	0	<1	<1.04
Surgery Site Infection – Colon	1	<1	N/A
Surgery Site Infection – Joint	0	<1.5%	N/A
MRSA Bacteremia	0	<.13	<.13
C. Difficile	1	3.5	2.7/10,000 pt days
Patient Safety Indicator	.76	<1	<1
Heart Failure Mortality Rate	11.7%	12%	12.9%
Pneumonia Mortality Rate	17.5%	20%	15.6%
Stroke Mortality Rate	15.1%	15%	13.8%
Sepsis Mortality Rate	7.3%	<18%	25%
30 Day All- Cause Readmissions	14.1%	< 15.3 %	< 15%
Serious Safety Events	0	0	0
Falls	2	< 2.3	2.3
Pressure Ulcers	4.5	<3.7	3.7
Injuries to Staff	6	< 10	17
Adverse Drug Events with Harm	0	0	0
Reportable HIPAA Privacy Events	0	0	0
Case Mix Index	1.5	1.4	1.3
Hospital Star Rating	4	4	3
<b>Staff Satisfaction</b>	<b>Performance</b>	<b>FY 2021 Goal</b>	<b>Benchmark</b>
Staff Pulse Survey	4.05 out of 5	>3.8	75%
Turnover	4.8%/11.52%	< 15%	< 20%
<b>Financial Stability</b>	<b>YTD Performance</b>	<b>FY 2021 Goal</b>	<b>Benchmark</b>
EBDA	-9.1%	>3%	3%
Paid FTE's	225	<235	235
Days Cash on Hand	60.1	>30	30
Days in Accounts Receivable	53.2	<45	50
Length of Stay	4.1	<4.0	4.03
Funds raised by SVHF	\$21.1 million	\$21 million	\$1 million
<b>Strategic Growth</b>	<b>YTD/Projected</b>	<b>FY 2021 Goal</b>	<b>FY 2020</b>
Inpatient Discharges	264/792	850	862
Outpatient Visits	12,125/48,500	48,000	47,802
Emergency Visits	2807/8421	10,000	9784
Surgeries + Special Procedures	640/1920	2000	2226
Community Benefit Hours	100.5/402	400	1332

Note: Colors demonstrate comparison to National Benchmark



Healing Here at Home

## TRENDED MONTHLY RESULTS

MEASUREMENT	Goal FY 2021	Jul 2020	Aug 2020	Sep 2020	Oct 2020	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020
FY YTD Turnover	<15%	2.1	3.4	3.5	3.9	4.8	5.6	5.6	6	7.3	7.3	8.2	8.2
Leave of Absences	<12	6	8	10	13	15	16	13	9	11	13	13	9
EBDA	>3%	-8	-7	-18	-4.4	.4	4.5	16.1	10.5	25.7	-13.9	253	-8.9
Operating Revenue	>3.5m	3.58	3.52	3.19	3.7	3.7	4.0	5.4	4.1	8.3	2.8	1.3	3.4
Expense Management	<4.5m	4.4	4.3	4.4	4.4	4.2	4.4	5.1	4.4	6.8	3.7	3.8	4.5
Net Income	>50k	418	658	-576	-235	101	180	873	307	2351	-297	3600	-565
Days Cash on Hand	>30	73	68.6	63	60	16.9	17.9	20.4	15.7	15.6	43.1	87.1	81
Receivable Days	<50	40	39	39	53.2	44	44	38	42.5	36.9	35.5	44	49
Accounts Payable Days	>50	35	31.6	40	58.3	43	43	42	42.2	53.4	41.9	35.2	40.7
Accounts Payable	<\$3m	2.3	2.1	2.85	4.0	2.9	2.9	2.9	3.0	3.7	2.9	2.4	2.8
Total Paid FTE's	<235	230	229	226	204	230	230	230	231	236	190	205	225
Inpatient Discharges	>80	75	65	60	64	90	87	79	86	63	39	44	65
Patient Days	>300	324	314	214	230	319	336	321	286	218	156	179	238
Observation Days	<20	20	21	32	18	18	29	12	16	16	13	9	16
Average Daily Census	>10	10.5	10.1	7.1	3.6	10.6	10.8	10.4	9.9	7	5.2	5.8	7.9
Outpatient Revenue	>\$15m	16.1	14.9	14.6	9.4	15.9	16.3	17.3	16.3	12.3	7.1	10.5	14.6
Surgeries	>120	115	114	115	121	193	152	150	145	80	17	34	116
Special Procedures	>50	37	34	57	47	72	57	58	79	43	1	8	46
Emergency Visits	>800	735	723	653	696	880	984	953	972	745	529	645	695
MRI	>120	93	84		40	145	159	138	146	70	39	68	116
Cardiology (Echos)	>65	63	71		20	46	85	83	68	52	35	52	70
Laboratory	>11	12.6	12.1		4.0	11.3	11.3	11.6	10.9	8.7	5.5	8.5	11.1
Radiology	>900	883	806		241	888	1033	1113	934	684	420	572	797
Rehab	>2000	2206	1664		971	2207	2181	2422	2119	1626	566	1182	1984
CT	>350	382	426		117	356	433	429	388	335	263	367	401
Mammography	>200	213	179		75	219	216	172	243	243	15	87	228
Ultrasound	>250	228	253		76	255	251	234	238	198	110	163	272
Occupational Health	>550	580	426		534	535	660	517	572	544	392	380	462
Wound Care	>275	191	154		90	237	294	252	233	201	140	112	164



**To:** SVH Finance Committee  
**From:** Ken Jensen, CFO  
**Date:** December 15, 2020  
**Subject:** Financial Report for the Month Ending October 31, 2020

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For the month of October the hospital's actual operating margin of (\$733,200) was (\$157,141) unfavorable to the budgeted operating margin of (\$576,059). After accounting for all other activity; the net loss for October was (\$235,232) vs. the budgeted net income of \$223,725 with a monthly EBDA of (4.4%) vs. a budgeted 0.3%.

**Gross patient revenue** for October was \$19,159,157; (\$4,596,370) under budget. Inpatient gross revenue was under budget by (\$1,995,070). Inpatient days were under budget by (71) days and inpatient surgeries were under budget by (11) cases. Outpatient gross revenue was under budget by (\$1,290,619). Outpatient surgeries were under budget by (34) cases and special procedures were under budget by (35) cases. The Emergency Room gross revenue was under budget by (\$1,310,681) with ER visits under budgeted expectations by (294) visits. Due to network restrictions caused by the SDE we did not have access to calculate outpatient visits for October.

**Deductions from revenue** were favorable to budgeted expectations by \$4,267,869 due to the lower than budgeted gross revenue and the accrual of the Prime Grant with net proceeds of \$386,447.

After accounting for all other operating revenue, the **total operating revenue** was unfavorable to budgeted expectations by (\$346,206).

**Operating Expenses** of \$4,453,066 were favorable to budget by \$189,065. Salaries and wages and agency fees were under budget by \$133,234 due to flexing clinical staff due to lower than budgeted volumes and staff called off due to the SDE and employee benefits were under budget by \$32,335. Supplies were under budget by \$48,731 due to lower than budgeted clinical volumes. Utilities were over budget by (\$90,622) due to PG&E (Electricity) issuing incorrect PG&E invoices for the months of August and September followed up by a corrected invoice (rate adjustments) in October.

After accounting for all income and expenses, but not including Restricted Contributions and GO bond activity, the net loss for October was (\$421,266) vs. a budgeted net loss of (\$256,484). The total net loss for October after all activity was (\$235,232) vs. a budgeted net income of \$223,725.



EBDA for the month of October was (4.4%) vs. the budgeted 0.3%.

**Patient Volumes – October**

	ACTUAL	BUDGET	VARIANCE	PRIOR YEAR
Acute Discharges	64	80	-16	90
Acute Patient Days	230	301	-71	351
Observation Days	18	0	18	21
OP Gross Revenue	\$14,667	\$17,268	(\$2,601)	\$16,072
Surgical Cases	121	166	-45	187

**Gross Revenue Overall Payer Mix – October**

	ACTUAL	BUDGET	VARIANCE	YTD ACTUAL	YTD BUDGET	VARIANCE
Medicare	41.3%	42.1%	-0.8%	40.7%	42.2%	-1.5%
Medicare Mgd Care	15.3%	13.3%	2.0%	14.8%	13.3%	1.5%
Medi-Cal	15.2%	17.8%	-2.6%	19.5%	17.8%	1.7%
Self Pay	1.8%	1.9%	-0.1%	1.2%	1.9%	-0.7%
Commercial	22.6%	22.2%	0.4%	21.1%	22.2%	-1.1%
Workers Comp	3.8%	2.7%	1.1%	2.7%	2.6%	0.1%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>		<b>100.0%</b>	<b>100.0%</b>	

**Cash Activity for October:**

For the month of October the cash collection goal was \$3,296,448 and the Hospital collected \$2,451,693 or under the goal by (\$844,755). The year-to-date cash collection goal was \$11,877,458 and the Hospital has collected \$11,717,965 or under goal by (\$159,493). The collections shortfall was due to the inability to bill claims from October 11<sup>th</sup> through the end of the month.

	CURRENT MONTH	PRIOR MONTH	VARIANCE	PRIOR YEAR
Days of Cash on Hand – Avg.	60.1	63.0	-2.9	22.5
Accounts Receivable Days	53.2	38.9	14.3	46.2
Accounts Payable	\$4,088,562	\$2,849,681	\$1,238,881	\$3,070,966
Accounts Payable Days	58.3	40.8	17.5	45.4

**ATTACHMENTS:**

- Attachment A is the Payer Mix Analysis which includes the projected collection percentage by payer. -
- Attachment B is the Operating Indicators Report
- Attachment C is the Balance Sheet
- Attachment D (two pages) is the Statement of Revenue and Expense. The first page breaks out the hospital operations and page two includes all other activity.
- Attachment E is the Variance Analysis
- Attachment F is the Cash Projection

**Sonoma Valley Hospital**  
**Payer Mix for the month of October 31, 2020**

ATTACHMENT A

YTD

Gross Revenue:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	7,891,140	9,985,272	-2,094,132	-21.0%	33,397,324	33,178,689	218,635	0.7%
Medicare Managed Care	2,921,905	3,161,056	-239,151	-7.6%	12,184,727	10,467,389	1,717,338	16.4%
Medi-Cal	2,915,324	4,220,679	-1,305,355	-30.9%	15,984,297	13,972,420	2,011,877	14.4%
Self Pay	350,762	450,862	-100,100	-22.2%	999,792	1,480,597	-480,805	-32.5%
Commercial & Other Government	4,357,989	5,307,380	-949,391	-17.9%	17,411,923	17,592,766	-180,843	-1.0%
Worker's Comp.	722,037	630,278	91,759	14.6%	2,233,325	2,072,512	160,813	7.8%
<b>Total</b>	<b>19,159,157</b>	<b>23,755,527</b>	<b>(4,596,370)</b>		<b>82,211,388</b>	<b>78,764,373</b>	<b>3,447,015</b>	

Net Revenue:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	933,522	1,174,510	-240,988	-20.5%	3,951,396	4,000,821	-49,425	-1.2%
Medicare Managed Care	335,143	341,032	-5,889	-1.7%	1,398,770	1,142,747	256,023	22.4%
Medi-Cal	318,353	447,133	-128,780	-28.8%	1,637,261	1,493,945	143,316	9.6%
Self Pay	163,210	210,876	-47,666	-22.6%	466,903	649,576	-182,673	-28.1%
Commercial & Other Government	1,377,429	1,696,814	-319,385	-18.8%	5,396,637	5,557,292	-160,655	-2.9%
Worker's Comp.	142,386	114,626	27,760	24.2%	422,169	386,940	35,229	9.1%
Prior Period Adj./IGT	386,447	-	386,447	*	386,447	-	386,447	*
<b>Total</b>	<b>3,656,490</b>	<b>3,984,991</b>	<b>(328,501)</b>	<b>-8.2%</b>	<b>13,659,583</b>	<b>13,231,321</b>	<b>428,262</b>	<b>3.2%</b>

Percent of Net Revenue:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	25.4%	29.4%	-4.0%	-13.6%	28.9%	30.2%	-1.4%	-4.6%
Medicare Managed Care	9.2%	8.6%	0.6%	7.0%	10.2%	8.6%	1.6%	18.6%
Medi-Cal	8.7%	11.2%	-2.5%	-22.3%	12.0%	11.3%	0.7%	6.2%
Self Pay	4.5%	5.3%	-0.8%	-15.1%	3.5%	4.9%	-1.4%	-28.6%
Commercial & Other Government	37.7%	42.6%	-4.9%	-11.5%	39.5%	42.1%	-2.6%	-6.2%
Worker's Comp.	3.9%	2.9%	1.0%	34.5%	3.1%	2.9%	0.2%	6.9%
Prior Period Adj./IGT	10.6%	0.0%	10.6%	*	2.8%	0.0%	2.8%	*
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>-0.1%</b>	<b>-0.1%</b>

Projected Collection Percentage:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	11.8%	11.8%	0.0%	0.0%	11.8%	12.1%	-0.3%	-2.5%
Medicare Managed Care	11.5%	10.8%	0.7%	6.5%	11.5%	10.9%	0.6%	5.5%
Medi-Cal	10.9%	10.6%	0.3%	2.8%	10.2%	10.7%	-0.5%	-4.7%
Self Pay	46.5%	46.8%	-0.3%	-0.6%	46.7%	43.9%	2.8%	6.4%
Commercial & Other Government	31.6%	32.0%	-0.4%	-1.3%	31.0%	31.6%	-0.6%	-1.9%
Worker's Comp.	19.7%	18.2%	1.5%	8.2%	18.9%	18.7%	0.2%	1.1%

**SONOMA VALLEY HOSPITAL  
OPERATING INDICATORS  
For the Period Ended October 31, 2020**

**ATTACHMENT B**

<b>CURRENT MONTH</b>				<b>YEAR-TO-DATE</b>			<b>YTD</b>	
<b>Actual</b>	<b>Budget</b>	<b>Favorable</b>		<b>Actual</b>	<b>Budget</b>	<b>Favorable</b>	<b>Prior</b>	
<b>10/31/20</b>	<b>10/31/20</b>	<b>(Unfavorable)</b>		<b>10/31/20</b>	<b>10/31/20</b>	<b>(Unfavorable)</b>	<b>Year</b>	
		<b>Variance</b>				<b>Variance</b>	<b>10/31/19</b>	
<b>Inpatient Utilization</b>								
<b>Discharges</b>								
1	53	64	(11)	Med/Surg	214	221	(7)	254
2	11	16	(5)	ICU	50	57	(7)	55
3	64	80	(16)	Total Discharges	264	278	(14)	309
<b>Patient Days:</b>								
4	134	218	(84)	Med/Surg	702	755	(53)	891
5	96	83	13	ICU	380	287	93	281
6	230	301	(71)	Total Patient Days	1,082	1,042	40	1,172
7	18	-	18	<b>Observation days</b>	91	-	91	68
<b>Average Length of Stay:</b>								
8	2.5	3.4	(0.9)	Med/Surg	3.3	3.4	(0.1)	3.5
9	8.7	5.2	3.5	ICU	7.6	5.0	2.6	5.1
10	3.6	3.8	(0.2)	Avg. Length of Stay	4.1	3.8	0.3	3.8
<b>Average Daily Census:</b>								
11	4.3	7.0	(2.7)	Med/Surg	5.7	6.1	(0.4)	7.2
12	3.1	2.7	0.4	ICU	3.1	2.3	0.8	2.3
13	7.4	9.7	(2.3)	Avg. Daily Census	8.8	8.5	0.3	9.5
<b>Other Utilization Statistics</b>								
<b>Emergency Room Statistics</b>								
14	696	990	(294)	Total ER Visits	2,807	3,245	(438)	3,527
<b>Outpatient Statistics:</b>								
15	-	4,419	(4,419)	Total Outpatients Visits	12,125	16,372	(4,247)	18,011
16	13	24	(11)	IP Surgeries	67	83	(16)	91
17	108	142	(34)	OP Surgeries	398	464	(66)	555
18	47	82	(35)	Special Procedures	175	266	(91)	314
19	272	293	(20)	Adjusted Discharges	976	974	3	1,191
20	979	1,101	(122)	Adjusted Patient Days	3,955	3,653	302	4,509
21	31.6	35.5	(3.9)	Adj. Avg. Daily Census	32.2	29.7	2.5	36.7
22	1.8042	1.4000	0.404	Case Mix Index - Medicare	1.6332	1.4000	0.233	1.3607
23	1.4964	1.4000	0.096	Case Mix Index - All payers	1.5263	1.4000	0.126	1.4725
<b>Labor Statistics</b>								
24	204	220	16	FTE's - Worked	205	211	6.1	207
25	222	246	25	FTE's - Paid	225	235	10.4	230
26	46.76	45.17	(1.59)	Average Hourly Rate	46.80	44.90	(1.90)	44.62
27	7.02	6.93	(0.09)	FTE / Adj. Pat Day	6.98	7.91	0.93	6.27
28	40.0	39.5	(0.5)	Manhours / Adj. Pat Day	39.8	45.1	5.3	35.7
29	143.7	148.5	4.9	Manhours / Adj. Discharge	161.2	169.1	7.9	135.2
30	20.4%	21.4%	1.0%	Benefits % of Salaries	21.2%	22.7%	1.6%	22.9%
<b>Non-Labor Statistics</b>								
31	16.4%	14.7%	-1.7%	Supply Expense % Net Revenue	16.5%	16.0%	-0.5%	13.6%
32	1,973	2,003	30	Supply Exp. / Adj. Discharge	2,243	2,169	(75)	1,663
33	16,682	16,173	(509)	Total Expense / Adj. Discharge	18,430	18,501	71	14,653
<b>Other Indicators</b>								
34	49.6			Days Cash - Operating Funds				
35	53.2	50.0	3.2	Days in Net AR	43.0	50.0	(7.0)	43.7
36	74%			Collections % of Net Revenue	99%			97.0%
37	58.3	55.0	3.3	Days in Accounts Payable	58.3	55.0	3.3	43.8
38	17.1%	16.8%	0.3%	% Net revenue to Gross revenue	16.2%	16.8%	-0.7%	16.8%
39	17.8%			% Net AR to Gross AR	17.8%			18.8%

**Sonoma Valley Health Care District**  
**Balance Sheet**  
**As of October 31, 2020**

**ATTACHMENT C**

		<u>Current Month</u>	<u>Prior Month</u>	<u>Prior Year</u>
<b>Assets</b>				
Current Assets:				
1	Cash	\$ 451,249	\$ 2,250,201	\$ 1,674,525
2	Cash - Money Market	6,237,307	6,237,010	1,034,330
3	Net Patient Receivables	5,633,964	5,236,334	6,878,979
4	Allow Uncollect Accts	(1,009,355)	(1,008,759)	(1,335,923)
5	Net A/R	4,624,609	4,227,575	5,543,056
6	Other Accts/Notes Rec	2,365,527	76,928	284,781
7	Parcel Tax Receivable	3,800,000	3,800,000	3,800,000
8	GO Bond Tax Receivable	3,168,950	3,168,950	2,953,183
9	3rd Party Receivables, Net	330,206	(53,941)	1,339,408
10	Inventory	857,116	858,424	889,589
11	Prepaid Expenses	758,184	763,971	728,998
12	Total Current Assets	<u>\$ 22,593,148</u>	<u>\$ 21,329,118</u>	<u>\$ 18,247,870</u>
13	Property, Plant & Equip, Net	\$ 50,192,110	\$ 50,401,367	\$ 49,359,998
14	Trustee Funds - GO Bonds	3,353,911	3,353,793	2,956,128
15	Restricted Funds - Board Approved	1,000,000	1,000,000	-
16	Total Assets	<u><u>\$ 77,139,169</u></u>	<u><u>\$ 76,084,278</u></u>	<u><u>\$ 70,563,996</u></u>
<b>Liabilities &amp; Fund Balances</b>				
Current Liabilities:				
17	Accounts Payable	\$ 4,088,562	\$ 2,849,681	\$ 3,070,966
18	Accrued Compensation	4,142,760	3,767,521	3,369,666
19	Interest Payable - GO Bonds	269,180	179,449	286,277
20	Accrued Expenses	1,608,770	1,422,137	1,393,921
21	Advances From 3rd Parties	-	-	119,469
22	Deferred Parcel Tax Revenue	2,533,320	2,849,987	2,533,324
23	Deferred GO Bond Tax Revenue	2,206,125	2,481,890	2,069,861
24	Current Maturities-LTD	308,831	309,121	448,256
25	Line of Credit - Union Bank	5,473,734	5,473,734	5,473,734
26	Other Liabilities	121,966	121,966	626,386
27	Total Current Liabilities	<u>\$ 20,753,248</u>	<u>\$ 19,455,486</u>	<u>\$ 19,391,860</u>
28	Long Term Debt, net current portion	\$ 26,804,184	\$ 26,811,823	\$ 28,871,600
29	Fund Balances:			
30	Unrestricted	\$ 18,455,585	\$ 18,690,817	\$ 14,886,762
31	Restricted	11,126,152	11,126,152	7,413,774
32	Total Fund Balances	<u>\$ 29,581,737</u>	<u>\$ 29,816,969</u>	<u>\$ 22,300,536</u>
33	Total Liabilities & Fund Balances	<u><u>\$ 77,139,169</u></u>	<u><u>\$ 76,084,278</u></u>	<u><u>\$ 70,563,996</u></u>



**Sonoma Valley Health Care District  
Statement of Revenue and Expenses  
Comparative Results  
For the Period Ended October 31, 2020**

ATTACHMENT D

	Month				Volume Information	Year-To-Date				YTD	
	This Year		Variance			This Year		Variance			Prior Year
	Actual		\$	%		Actual	Budget	\$	%		
<b>1</b>	64	80	(16)	-20%	Acute Discharges	265	278	(13)	-5%	309	
<b>2</b>	230	301	(71)	-24%	Patient Days	1,082	1,042	40	4%	1,172	
<b>3</b>	18	-	18	0%	Observation Days	91	-	91	*	68	
<b>4</b>	14,667	17,268	(2,601)	-15%	Gross O/P Revenue (000's)	59,757	56,333	3,425	6%	\$ 64,269	
<b>Financial Results</b>											
<b>Gross Patient Revenue</b>											
<b>5</b>	\$ 4,492,235	\$ 6,487,305	(1,995,070)	-31%	Inpatient	\$ 22,454,308	\$ 22,431,867	22,441	0%	\$ 22,521,779	
<b>6</b>	8,836,678	10,127,297	(1,290,619)	-13%	Outpatient	35,230,491	33,068,856	2,161,635	7%	37,376,802	
<b>7</b>	5,830,244	7,140,925	(1,310,681)	-18%	Emergency	24,526,589	23,263,650	1,262,939	5%	27,059,427	
<b>8</b>	\$ 19,159,157	\$ 23,755,527	(4,596,370)	-19%	<b>Total Gross Patient Revenue</b>	\$ 82,211,388	\$ 78,764,373	3,447,015	4%	\$ 86,958,008	
<b>Deductions from Revenue</b>											
<b>9</b>	(15,826,114)	(19,557,428)	3,731,314	19%	Contractual Discounts	\$ (68,432,252)	\$ (64,680,620)	(3,751,632)	-6%	\$ (71,481,683)	
<b>10</b>	(50,000)	(200,000)	150,000	75%	Bad Debt	(460,000)	(800,000)	340,000	43%	(880,000)	
<b>11</b>	(13,000)	(13,108)	108	1%	Charity Care Provision	(46,000)	(52,432)	6,432	12%	(27,800)	
<b>12</b>	386,447	-	386,447	*	Prior Period Adj/Government Program Revenue	386,447	-	386,447	*	-	
<b>13</b>	\$ (15,502,667)	\$ (19,770,536)	4,267,869	-22%	<b>Total Deductions from Revenue</b>	\$ (68,551,805)	\$ (65,533,052)	(3,018,753)	5%	\$ (72,389,483)	
<b>14</b>	\$ 3,656,490	\$ 3,984,991	(328,501)	-8%	<b>Net Patient Service Revenue</b>	\$ 13,659,583	\$ 13,231,321	428,262	3%	\$ 14,568,525	
<b>15</b>	\$ 63,376	\$ 81,081	(17,705)	-22%	Other Op Rev & Electronic Health Records	\$ 357,459	\$ 324,324	33,135	10%	\$ 251,169	
<b>16</b>	\$ 3,719,866	\$ 4,066,072	(346,206)	-9%	<b>Total Operating Revenue</b>	\$ 14,017,042	\$ 13,555,645	\$ 461,397	3%	\$ 14,819,694	
<b>Operating Expenses</b>											
<b>17</b>	\$ 1,829,728	\$ 1,962,962	133,234	7%	Salary and Wages and Agency Fees	\$ 7,364,999	\$ 7,393,000	28,001	0%	\$ 7,182,173	
<b>18</b>	649,301	681,636	32,335	5%	Employee Benefits	2,565,399	2,671,503	106,104	4%	2,591,669	
<b>19</b>	\$ 2,479,029	\$ 2,644,598	165,569	6%	Total People Cost	\$ 9,930,398	\$ 10,064,503	134,105	1%	\$ 9,773,842	
<b>20</b>	\$ 402,164	\$ 439,819	37,655	9%	Med and Prof Fees (excl Agency)	\$ 1,633,474	\$ 1,696,484	63,010	4%	\$ 1,698,504	
<b>21</b>	537,224	585,955	48,731	8%	Supplies	2,189,877	2,111,537	(78,340)	-4%	1,979,938	
<b>22</b>	410,499	428,333	17,834	4%	Purchased Services	1,670,450	1,591,333	(79,117)	-5%	1,400,764	
<b>23</b>	256,307	266,953	10,646	4%	Depreciation	1,029,833	1,067,812	37,979	4%	1,004,907	
<b>24</b>	196,195	105,573	(90,622)	-86%	Utilities	520,961	436,825	(84,136)	-19%	435,995	
<b>25</b>	47,920	42,599	(5,321)	-12%	Insurance	181,318	170,396	(10,922)	-6%	157,015	
<b>26</b>	16,861	23,821	6,960	29%	Interest	74,080	95,284	21,204	22%	160,317	
<b>27</b>	106,867	104,480	(2,387)	-2%	Other	397,857	415,528	17,671	4%	393,243	
<b>28</b>	-	-	-	*	Matching Fees (Government Programs)	0	-	-	*	0	
<b>29</b>	\$ 4,453,066	\$ 4,642,131	189,065	4%	<b>Operating expenses</b>	\$ 17,628,248	\$ 17,649,702	21,454	0%	\$ 17,004,525	
<b>30</b>	\$ (733,200)	\$ (576,059)	(157,141)	-27%	<b>Operating Margin</b>	\$ (3,611,206)	\$ (4,094,057)	482,851	12%	\$ (2,184,831)	

**Sonoma Valley Health Care District  
Statement of Revenue and Expenses  
Comparative Results  
For the Period Ended October 31, 2020**

ATTACHMENT D

	Month					Year-To- Date				YTD	
	This Year		Variance			This Year		Variance			Prior Year
	Actual		\$	%		Actual	Budget	\$	%		
<b>31</b>	\$ (3,720)	\$ 2,908	(6,628)	-228%						\$ 2,001,103	
<b>32</b>	498	-	498	0%	Miscellaneous Revenue/(Expenses)	\$ 40,696	\$ 12,036	28,660	*	\$ 4,477	
<b>33</b>	0	0	-	*	Donations	498	-	498	0%	(53,664)	
<b>34</b>	316,667	316,667	-	0%	Physician Practice Support-Prima	0	0	-	*	1,266,668	
<b>35</b>	(1,511)	0	(1,511)	0%	Parcel Tax Assessment Rev	1,266,668	1,266,668	-	0%	(5,444)	
<b>36</b>	\$ 311,934	\$ 319,575	(6,130)	-2%	Extraordinary Items	(1,511)	0	(1,511)	0%	\$ 3,213,140	
					<b>Total Non-Operating Rev/Exp</b>	\$ 1,306,351	\$ 1,278,704	29,158	2%		
<b>37</b>	\$ (421,266)	\$ (256,484)	(164,782)	64%	<b>Net Income / (Loss) prior to Restricted Contributions</b>	\$ (2,304,855)	\$ (2,815,353)	512,009	-18%	\$ 1,028,309	
<b>38</b>	\$ -	\$ -	-	0%	Capital Campaign Contribution	\$ -	\$ -	-	0%	\$ -	
<b>39</b>	\$ -	\$ 294,175	(294,175)	0%	Restricted Foundation Contributions	\$ 1,831,219	\$ 1,176,700	654,519	100%	\$ 545,072	
<b>40</b>	\$ (421,266)	\$ 37,691	(458,957)	-1218%	<b>Net Income / (Loss) w/ Restricted Contributions</b>	\$ (473,636)	\$ (1,638,653)	1,165,017	-71%	\$ 1,573,381	
<b>41</b>	186,034	186,034	-	0%	GO Bond Activity, Net	738,436	738,436	-	0%	647,867	
<b>42</b>	\$ (235,232)	\$ 223,725	(458,957)	-205%	<b>Net Income/(Loss) w GO Bond Activity</b>	\$ 264,800	\$ (900,217)	1,165,017	-129%	\$ 2,221,248	
	\$ (164,959)	\$ 10,469	(175,428)		<b>EBDA - Not including Restricted Contributions</b>	\$ (1,275,022)	\$ (1,747,541)	472,519		\$ 2,033,216	
	-4.4%	0.3%				-9.1%	-12.9%			13.7%	
	\$ -										

\* Operating Margin without Depreciation expense:

\$ (733,200)	\$ (576,059)	\$ (157,141)	-27%	<b>Operating Margin</b>	\$ (3,611,206)	\$ (4,094,057)	\$ 482,851	12%
256,307	266,953	10,646	4%	Add back Depreciation	1,029,833	1,067,812	37,979	4%
\$ (476,893)	\$ (309,106)	\$ (146,495)	-54%	<b>Operating Margin without Depreciation expense</b>	\$ (2,581,373)	\$ (3,026,245)	\$ 520,830	15%

**Sonoma Valley Health Care District  
Variance Analysis  
For the Period Ended October 31, 2020**

**ATTACHMENT E**

<b>Operating Expenses</b>	<b>YTD Variance</b>	<b>Month Variance</b>	
Salary and Wages and Agency Fees	28,001	133,234	Salaries and wages are under budget by \$140,811 due to lower clinical volumes than budgeted and registry fees are over budget by (\$7,577).
Employee Benefits	106,104	32,335	
<b>Total People Cost</b>	<b>134,105</b>	<b>165,569</b>	
Med and Prof Fees (excl Agency)	63,010	37,655	Physician fees under budget by \$26,384 and professional fees under budget by \$11,271.
Supplies	(78,340)	48,731	Supplies under budget due to lower clinical volumes than budgeted
Purchased Services	(79,117)	17,834	
Depreciation	37,979	10,646	
Utilities	(84,136)	(90,622)	PG&E (Electricity) is over budget due to 2-months of incorrect PG&E invoices (rate adjustments) followed up by a corrected invoice in October.
Insurance	(10,922)	(5,321)	
Interest	21,204	6,960	
Other	17,671	(2,387)	
Matching Fees (Government Programs)	-	-	
<b>Operating expenses</b>	<b>21,454</b>	<b>189,065</b>	

Sonoma Valley Hospital  
Cash Forecast  
FY 2021

ATTACHMENT F

	Actual July	Actual Aug	Actual Sept	Actual Oct	Forecast Nov	Forecast Dec	Forecast Jan	Forecast Feb	Forecast Mar	Forecast Apr	Forecast May	Forecast Jun	TOTAL
<b>Hospital Operating Sources</b>													
1 Patient Payments Collected	3,655,695	3,057,733	3,407,984	2,690,146	875,608	1,075,000	4,831,335	4,888,730	4,359,205	3,979,608	4,089,394	4,011,761	40,922,199
2 Other Operating Revenue	38,268	137,152	105,236	168,211	81,081	81,081	81,081	81,081	81,081	81,081	81,081	81,081	1,097,516
3 Other Non-Operating Revenue	73,172	15,194	22,125	4,004	23,796	23,796	23,796	23,796	23,796	23,796	23,796	23,796	304,864
4 Unrestricted Contributions	-	3,306	653	498									4,457
5 Line of Credit	-												-
<b>Sub-Total Hospital Sources</b>	<b>3,767,135</b>	<b>3,213,385</b>	<b>3,535,999</b>	<b>2,862,859</b>	<b>980,485</b>	<b>1,179,877</b>	<b>4,936,212</b>	<b>4,993,607</b>	<b>4,464,082</b>	<b>4,084,485</b>	<b>4,194,271</b>	<b>4,116,638</b>	<b>42,329,035</b>
<b>Hospital Uses of Cash</b>													
6 Operating Expenses	5,534,264	3,523,571	3,598,086	3,371,953	4,168,896	4,283,621	4,228,115	4,547,842	4,364,772	4,268,227	4,447,890	4,195,188	50,532,425
7 Add Capital Lease Payments	7,854	88,349	7,904	7,929									112,036
8 Additional Liabilities/LOC		-											-
9 Capital Expenditures	784,429	998,868	96,188	1,281,930	1,350,418	294,175	294,175	294,175	294,175	294,175	294,175	294,175	6,571,057
<b>Total Hospital Uses</b>	<b>6,326,547</b>	<b>4,610,788</b>	<b>3,702,178</b>	<b>4,661,812</b>	<b>5,519,314</b>	<b>4,577,796</b>	<b>4,522,290</b>	<b>4,842,017</b>	<b>4,658,947</b>	<b>4,562,402</b>	<b>4,742,065</b>	<b>4,489,363</b>	<b>57,215,518</b>
<b>Net Hospital Sources/Uses of Cash</b>	<b>(2,559,412)</b>	<b>(1,397,403)</b>	<b>(166,179)</b>	<b>(1,798,952)</b>	<b>(4,538,829)</b>	<b>(3,397,919)</b>	<b>413,922</b>	<b>151,590</b>	<b>(194,865)</b>	<b>(477,917)</b>	<b>(547,794)</b>	<b>(372,725)</b>	<b>(14,886,483)</b>
<b>Non-Hospital Sources</b>													
10 Restricted Cash/Money Market	1,000,000	1,000,000			4,500,000	1,000,000					(6,000,000)		1,500,000
11 Restricted Capital Donations	784,428	973,350	71,332	-	2,312,019	294,175	294,175	294,175	294,175	294,175	294,175	294,175	6,200,354
12 Parcel Tax Revenue	86,141					2,100,000				1,600,000			3,786,141
13 Other Payments - South Lot/Ins. Claims/HHS	340,068	49,150											389,218
14 Other:													-
15 IGT			108,320		(129,950)				1,984,768		4,470,424	120,000	6,553,562
16 IGT - AB915								250,000					250,000
17 PRIME		14,229	270,000			712,947							997,176
<b>Sub-Total Non-Hospital Sources</b>	<b>2,210,637</b>	<b>2,036,729</b>	<b>449,652</b>	<b>-</b>	<b>6,682,069</b>	<b>4,107,122</b>	<b>294,175</b>	<b>544,175</b>	<b>2,278,943</b>	<b>1,894,175</b>	<b>(1,235,401)</b>	<b>414,175</b>	<b>19,676,451</b>
<b>Non-Hospital Uses of Cash</b>													
18 Matching Fees		142,041			312,271	620,237			1,900,000				2,974,549
<b>Sub-Total Non-Hospital Uses of Cash</b>	<b>-</b>	<b>142,041</b>	<b>-</b>	<b>-</b>	<b>312,271</b>	<b>620,237</b>	<b>-</b>	<b>-</b>	<b>1,900,000</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>2,974,549</b>
<b>Net Non-Hospital Sources/Uses of Cash</b>	<b>2,210,637</b>	<b>1,894,688</b>	<b>449,652</b>	<b>-</b>	<b>6,369,798</b>	<b>3,486,885</b>	<b>294,175</b>	<b>544,175</b>	<b>378,943</b>	<b>1,894,175</b>	<b>(1,235,401)</b>	<b>414,175</b>	<b>16,701,902</b>
<b>Net Sources/Uses</b>	<b>(348,775)</b>	<b>497,285</b>	<b>283,473</b>	<b>(1,798,952)</b>	<b>1,830,969</b>	<b>88,966</b>	<b>708,097</b>	<b>695,765</b>	<b>184,078</b>	<b>1,416,258</b>	<b>(1,783,195)</b>	<b>41,450</b>	
Operating Cash at beginning of period	1,818,218	1,469,443	1,966,728	2,250,201	451,249	2,282,218	2,371,184	3,079,281	3,775,046	3,959,124	5,375,382	3,592,187	
<b>Operating Cash at End of Period</b>	<b>1,469,443</b>	<b>1,966,728</b>	<b>2,250,201</b>	<b>451,249</b>	<b>2,282,218</b>	<b>2,371,184</b>	<b>3,079,281</b>	<b>3,775,046</b>	<b>3,959,124</b>	<b>5,375,382</b>	<b>3,592,187</b>	<b>3,633,637</b>	
Money Market Account Balance - Unrestricted	8,236,372	7,236,714	6,237,010	6,237,307	1,737,307	737,512	737,512	737,512	737,512	737,512	6,737,512	6,737,512	
<b>Total Cash at End of Period</b>	<b>9,705,815</b>	<b>9,203,442</b>	<b>8,487,211</b>	<b>6,688,556</b>	<b>4,019,525</b>	<b>3,108,696</b>	<b>3,816,793</b>	<b>4,512,558</b>	<b>4,696,636</b>	<b>6,112,894</b>	<b>10,329,699</b>	<b>10,371,149</b>	
<b>Average Days of Cash on Hand</b>	<b>73.00</b>	<b>68.60</b>	<b>63.00</b>	<b>60.10</b>	<b>29.17</b>	<b>22.56</b>	<b>27.70</b>	<b>32.75</b>	<b>34.09</b>	<b>44.36</b>	<b>74.97</b>	<b>75.27</b>	