



March 21, 2025

TO: Legal Counsel

News Media

Salinas Californian

El Sol

Monterey County Herald

Monterey County Weekly

KION-TV

KSBW-TV/ABC Central Coast

KSMS/Entravision-TV

The next regular meeting of the **FINANCE COMMITTEE - COMMITTEE OF THE WHOLE of SALINAS VALLEY HEALTH¹** will be held **MONDAY, MARCH 24, 2025, AT 12:00 P.M., DOWNING RESOURCE CENTER, ROOMS A, B, & C, SALINAS VALLEY HEALTH MEDICAL CENTER, 450 E. ROMIE LANE, SALINAS, CALIFORNIA.**

(For Public Access Information Visit <https://www.salinasvalleyhealth.com/about-us/healthcare-district-information-reports/board-of-directors/board-committee-meetings-virtual-link/>.)

A handwritten signature in black ink, appearing to read "Allen Radner".

Allen Radner, MD
President/Chief Executive Officer

Committee Voting Members: **Victor Rey, Jr.**, Chair, **Joel Hernandez Laguna**, Vice-Chair, **Allen Radner, MD**, President/CEO; **Augustine Lopez**, Chief Financial Officer; and **Tarun Bajaj, M.D.**, Medical Staff Member.

Advisory Non-Voting Members: Sanjeev Tandon, Community Members, Administrative Executive Team.

**FINANCE COMMITTEE
COMMITTEE OF THE WHOLE
SALINAS VALLEY HEALTH¹**

**MONDAY, MARCH 24, 2025, 12:00 P.M.
DOWNING RESOURCE CENTER, ROOMS A, B & C**

**Salinas Valley Health Medical Center
450 E. Romie Lane, Salinas, California**

(Visit SalinasValleyHealth.com/virtualboardmeeting for Public Access Information)

AGENDA

1. Call to Order / Roll Call

2. Public Comment

This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on issues or concerns within the jurisdiction of this District Board, which are not otherwise covered under an item on this agenda.

3. Approve Minutes of the Finance Committee Meeting of February 24, 2025 (REY)

- Motion/Second
- Public Comment
- Action by Committee/Roll Call Vote

4. Consider Recommendation for Board Approval of Project Budget and Equipment Procurement for Equipment in Conjunction with the Labor Delivery and Recovery Rooms Project (MILLER)

- Staff Report
- Committee Questions to Staff
- Public Comment
- Committee Discussion/Deliberation
- Motion/Second
- Action by Committee/Roll Call Vote

5. Consider Recommendation for Board Approval of Project Budget(s) to Create Training Facilities in Support of the EPIC Platform Roll Out (MILLER)

- Staff Report
- Committee Questions to Staff
- Public Comment
- Committee Discussion/Deliberation
- Motion/Second
- Action by Committee/Roll Call Vote

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

6. Financial and Statistical Review (LOPEZ)
7. Closed Session
8. Reconvene Open Session / Closed Session Report
9. Review Balanced Scorecard (LOPEZ)
10. Adjournment

The next Finance Committee Meeting is scheduled for **Monday, April 21, 2025** at 12:00 p.m.

This Committee meeting may be attended by Board Members who do not sit on this Committee. In the event that a quorum of the entire Board is present, this Committee shall act as a Committee of the Whole. In either case, any item acted upon by the Committee or the Committee of the Whole will require consideration and action by the full Board of Directors as a prerequisite to its legal enactment.

The Salinas Valley Health (SVH) Board packet is available at the Board Meeting, electronically at <https://www.salinasvalleyhealth.com/~/-/about-us/healthcare-district-information-reports/board-of-directors/meeting-agendas-packets/2025/> and in the SVH Human Resources Department located at 611 Abbott Street, Suite 201, Salinas, California, 93901. All items appearing on the agenda are subject to action by the SVH Board.

Requests for a disability related modification or accommodation, including auxiliary aids or Spanish translation services, in order to attend or participate in-person at a meeting, need to be made to the Board Clerk during regular business hours at 831-759-3050 at least forty-eight (48) hours prior to the posted time for the meeting in order to enable the District to make reasonable accommodations.

**FINANCE COMMITTEE MEETING
COMMITTEE OF THE WHOLE
SALINAS VALLEY HEALTH**

AGENDA FOR CLOSED SESSION

Pursuant to California Government Code Section 54954.2 and 54954.5, the board agenda may describe closed session agenda items as provided below. No legislative body or elected official shall be in violation of Section 54954.2 or 54956 if the closed session items are described in substantial compliance with Section 54954.5 of the Government Code.

CLOSED SESSION AGENDA ITEMS

CONFERENCE WITH LEGAL COUNSEL-ANTICIPATED LITIGATION

(Government Code §54956.9(d)(2))

Significant exposure to litigation pursuant to Section 54956.9(d)(2) or (3) (Number of potential cases): One (1)

Additional information required pursuant to Section 54956.9(e): _____

Initiation of litigation pursuant to Section 54956.9(d)(4) (Number of potential cases): _____

ADJOURN TO OPEN SESSION

CALL TO ORDER
ROLL CALL

(Chair to call the meeting to order)

PUBLIC COMMENT

DRAFT SALINAS VALLEY HEALTH¹
FINANCE COMMITTEE
COMMITTEE OF THE WHOLE
MEETING MINUTES FEBRUARY 24, 2025

Committee Member Attendance:

Voting Members Present: **Victor Rey, Jr.**, Chair, **Allen Radner, M.D.**, President/CEO, **Augustine Lopez**, CFO, **Tarun Bajaj, M.D.**, Medical Staff Member.

Voting Members Absent: **Joel Hernandez Laguna**, Vice-Chair.

Advisory Non-Voting Members Present:

In person: Tim Albert, CCO, Alysha Hyland, CAO, Gary Ray, CLO, and Carla Spencer, CNO.
Via teleconference: Michelle Childs, CHRO, and Clement Miller, COO; Sanjeev Tandon.

Other Board Members Present, Constituting Committee of the Whole:

Via teleconference: Rolando Cabrera, M.D., and Catherine Carson.

1. CALL TO ORDER/ROLL CALL

A quorum was present and Chair Victor Rey, Jr., called the meeting to order at 12:03 p.m. in the Downing Resource Center, Rooms A, B, and C.

2. PUBLIC COMMENT:

None.

3. MINUTES OF THE FINANCE COMMITTEE JANUARY 20, 2025

Approve the minutes of the January 20, 2025 Finance Committee meeting. The information was included in the Committee packet.

COMMITTEE MEMBER DISCUSSION: None.

PUBLIC COMMENT: None.

MOTION:

Upon motion by Committee Member Dr. Bajaj, and second by Committee Member Dr. Radner, the minutes of the January 20, 2025 Finance Committee were approved as presented.

ROLL CALL VOTE:

Ayes: Chair Rey, Dr. Bajaj, Lopez, Dr. Radner;

Nays: None;

Abstentions: None;

Absent: Vice-Chair Hernandez Laguna.

Motion Carried

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

4. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF SENTRICS INTERACTIVE PATIENT CARE SOLUTIONS SYSTEM AS SOLE SOURCE JUSTIFICATION AND CONTRACT AWARD

Audrey Parks, Chief Information Officer, reported that Salinas Valley Memorial Healthcare System (SVMHS) currently utilizes Sentrics, formerly known as Allen Technologies., Inc. (ATI), as the interactive patient care systems or patient education and entertainment solution. The solution is used by patients to access patient education videos, CARE Channel (relaxation videos), Dish Network content and more. We would like to renew the support agreement for an initial 3-year term followed by 1-year annual renewals.

A full report was included in the packet.

COMMITTEE MEMBER DISCUSSION: None.

PUBLIC COMMENT: None.

MOTION:

Upon motion by Committee Member Dr. Radner, and second by Committee Member Lopez, the Finance Committee recommends Board of Directors approval of Sentrics interactive patient care solutions system as sole source justification and contract award for \$455,328 over a 3-year term.

ROLL CALL VOTE:

Ayes: Chair Rey, Dr. Bajaj, Lopez, Dr. Radner;

Nays: None;

Abstentions: None;

Absent: Vice-Chair Hernandez Laguna.

Motion Carried

5. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF PROJECT BUDGET FOR THE SALINAS VALLEY HEALTH MRI EQUIPMENT INSTALLATION AT 444 E. ROMIE OUTPATIENT IMAGING CENTER

Clement Miller, COO, reported that Salinas Valley Health's free-standing outpatient imaging building at the corner of Wilgart and E. Romie includes an area of the building leased to a 3rd-party vendor that provides contract MRI imaging services. The lease is not being renewed, SVH intends to purchase and install a new MRI equipment package to replace leased equipment and all imaging activities will be managed in-house. The facility is not on the Hospital license, rather, it is a stand-alone outpatient facility. The necessary permits will be secured through the City of Salinas. This authorization request is to fund the purchase of the equipment, authorize the accompanying 5-year service agreement, design and permit the installation, and to construct the necessary improvements in and around the project site. Work slated for this project includes equipment installation, and minor refreshing of the building's finishes. Facilities Management is approaching the Board to request approval of capital funding to complete renovations and procure furnishings, furniture and equipment.

A full report was included in the packet.

COMMITTEE MEMBER DISCUSSION: The current magnet is a GE magnet. The value of this project is that it provides the ability to upgrade equipment which will offer more capabilities and will be full ownership.

PUBLIC COMMENT: None.

MOTION:

Upon motion by Committee Member Dr. Bajaj, and second by Committee Member Dr. Radner, the Finance Committee recommends the Board of Directors approve (i) the total estimated Project Budget for the Salinas Valley Health MRI Equipment Installation at 444 E. Romie Lane in the amount of \$4,357,484, (ii) Award equipment contract to Siemens Medical Solutions in the amount of \$2,086,764, and (iii) Award 5-year service contract to Siemens Medical Solutions in the amount of \$712,185.

ROLL CALL VOTE:

Ayes: Chair Rey, Dr. Bajaj, Lopez, Dr. Radner;

Nays: None;

Abstentions: None;

Absent: Vice-Chair Hernandez Laguna.

Motion Carried

6. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF PROJECT BUDGET FOR THE SALINAS VALLEY HEALTH CLINIC MRI EQUIPMENT INSTALLATION AND BUILDING REFRESH AT 626 BRUNKEN AVENUE IMAGING CENTER

Alysha Hyland, CAO, and Clement Miller, COO, reported that Salinas Valley Health authorized the purchase of a new MRI equipment package for installation at 626 Brunken Ave at the January 2025 Board Meeting. This authorization request is to fund the work necessary to design and permit the installation, as well as to construct the necessary improvements in and around the project site. Work slated for this project includes equipment installation, minor refreshing of the building's finishes, and the creation of additional storage needed for operational efficiency as the MRI installation displaces existing space previously used for storage. The planned renovations include select architectural finish refreshments, creation of a new reading room, prep/recovery area to support the new MRI, and a storage solution of some kind as necessary to facilitate the installation of the Canon Orian SP system. Current and projected patient utilization appear to justify the expenditure, supporting additional growth and patient access to high quality imaging services in a cost-effective manner. Facilities Management is approaching the Board to request approval of capital funding to complete renovations and procure furnishings, furniture and equipment. The total requested budget allocation for the project is \$3,367,810. This request is for the equipment taxes and construction for the Salinas Valley Health Clinic MRI Equipment Installation at 626 Brunken Ave in the amount of \$1,532,783.

A full report was included in the packet.

COMMITTEE MEMBER DISCUSSION: None.

PUBLIC COMMENT: None.

MOTION:

Upon motion by Committee Member Dr. Radner, and second by Committee Member Dr. Bajaj, the Finance Committee recommends the Board of Directors approve the total estimated Project

Budget, associated taxes and construction for the Salinas Valley Health Clinic MRI Equipment Installation at 626 Brunken Ave in the amount of \$1,532,783.

ROLL CALL VOTE:

Ayes: Chair Rey, Dr. Bajaj, Lopez, Dr. Radner;

Nays: None;

Abstentions: None;

Absent: Vice-Chair Hernandez Laguna.

Motion Carried

7. CLOSED SESSION

Chair Rey announced that the item to be discussed in Closed Session as listed on the posted Agenda is *Report Involving Trade Secrets, strategic planning/proposed new programs and services*.

The meeting recessed into Closed Session under the Closed Session Protocol at 12:16 p.m.

8. RECONVENE OPEN SESSION/REPORT ON CLOSED SESSION

The Board reconvened Open Session at 12:40 p.m. Chair Rey announced that in Closed Session, the Board received *Report Involving Trade Secrets, strategic planning/proposed new programs and services*. No action was taken.

9. REVIEW KEY OPERATING BUDGET ASSUMPTIONS FISCAL YEAR 2026

Key Operating Budget Assumptions Fiscal Year 2026 including the following:

1. Key Operating Budget Assumptions Fiscal Year 2026 including the following:
 - Operating Budget Timeline & Process. A Board Review Workshop is proposed for June 5, 2025 pending scheduling.
 - Strategic Budget Considerations including budgeting for selected opportunities and consideration of strategic capital investments.
 - Key Operating Budget Assumptions: Operating margin to be determined, patient volumes and current trends, average daily census trends, average length of stay trends, ER visits year over year, labor, non-labor expenses, SVH Clinics key budget assumptions and capital plan management.

A full report was included in the packet.

COMMITTEE MEMBER DISCUSSION: None.

10. FINANCIAL PERFORMANCE REVIEW

An update was received from Augustine Lopez, CFO, on the Financial Performance Review for the month of January 2025. Highlights included Income from Operations \$8.8M, Net Income \$9.4M, and Days Cash on Hand of 373. Physician leadership has been very helpful managing Average Length of Stay (ALOS).

A full report including the January Summary Financials, Financial Statements, Budget Comparison, and Statistics was included in the packet for review.

COMMITTEE MEMBER DISCUSSION: None.

11. BALANCED SCORECARD

Mr. Lopez, CFO, provided a review of the Balanced Scorecard Summary for FY2025 year-to-date, with metrics and progress, with input from Carla Spencer, CNO, Melissa Deen, Manager Infection Prevention, Lilia Meraz Gottfried, Director Clinical Development, and Tiffany DiTullio, CAO Community Wellness.

COMMITTEE MEMBER DISCUSSION: None.

12. ADJOURNMENT

There being no other business, the meeting was adjourned at 12:57 p.m. The next Finance Committee Meeting is scheduled for **Monday, February 24, 2025.**

Victor Rey, Jr., Chair

Board Paper: Finance Committee

Agenda Item: **Consider Recommendation for Board Approval of Project Budget and Equipment Procurement for Equipment in conjunction with the Labor Delivery and Recovery Rooms Project**

Executive Sponsor: Clement Miller, Chief Operating Officer

Date: March 6, 2025

Executive Summary

The current birthing lights operational within the ten LDRP rooms on the medical center's second level are thirty-three years old and at end of useful life. Current project planning contemplates removal and replacement of light systems in all rooms in a phased approach to minimize operational impacts to the department. All planned renovations require plan approval and building permits from California's Department of Health Care Access and Information (HCAI).

Background/Situation/Rationale

Visualization is critical to providing safe birthing care for newborn and mom. The light is moved into place per provider preference to provide adequate visualization with an enhanced light source. The current lights are past end of life and there are no parts available to repair equipment. The replacement of the existing birthing lights requires increasing the size of the opening within the ceiling system to remove and replace the legacy systems. All new lighting controls will be installed during the renovations within the birthing rooms.

The capital improvement budget has funding to commence design in the current 2025 and commence the construction work in fiscal year 2026. A design team will be engaged to finalize the design documentation to secure the permits and complete the installation of the lights in accordance with OSHPD rules and regulations.

Timeline/Review Process to Date:

April 2025	Commence Design and Construction Document Preparation
July 2025	Complete Regulatory Agencies Review
July 2025	Commence Construction (~4 month phased project)

Pillar/Goal Alignment:

☒ Service ☐ People ☒ Quality ☐ Finance ☒ Growth ☐ Community

Financial/Quality/Safety/Regulatory Implications:

The fiscal years 2025 through 2026 plant operations capital budget allocated funding for planning, design and construction activities required to complete the design and construction process. A budget has been attached (Attachment A) summarizing the design, permitting, equipment and engineering fees for schematic design, design documentation, permitting process, contractor bidding support and construction administration services.

Total Planned Capital Budget

Project Forecast

\$100,000	Fiscal Year 2025
\$525,000	Fiscal Year 2026

Recommendation

Consider recommendation to Board of Directors to approve the overall project budget for Labor Delivery and Recovery Room Light Replacement Project in the amount of \$625,000. In addition, we recommend approving the award of the Skytron birthing light fixtures to JM Keckler, in the amount of \$156,237, as presented.

Attachments

- (A) Project Budget at Conceptual Design Review Stage prepared 3/6/2025
- (B) JM Keckler Equipment Procurement Proposal, Quote Q-82603-2

Salinas Valley Health (10348)

Project Cost Summary: LDRP Tower Light Replacement

Architect: SKA

Drawings: Conceptual

Date Printed:

3/6/2025

Version 1:

3/6/2025

Prepared by: Dave Sullivan



	BUDGET	Notes
CONSTRUCTION COST - DIRECT		
Construction - Includes General Liability Insurance	\$100,000	
Total Escalated Construction Cost	\$100,000	
CONSTRUCTION COST - INDIRECT & RESERVES		
Permit/Entitlements (OSHPD Only)	\$25,000	
Equipment	\$250,000	
Furniture & Furnishings	\$0	
Architect and Engineering Fees	\$90,000	
Construction Management	\$110,000	
Testing & Inspection	\$25,000	
Other Misc.	-	
Project Contingencies & Escalation	\$25,000	
Total Escalated Indirect & Reserves Cost	\$525,000	
Total Project Costs	\$625,000	



Salinas Valley Memorial Hospital

Dave Sullivan- Bogard Construction

450 E Romie Ln
Salinas, CA 93901-4098



DATE

03-05-2025

EXPIRES

07-03-2025

PRESENTED BY



ACCOUNT MANAGER: Trina McNeil

**SALINAS VALLEY MEMORIAL- LUCINA
LIGHTS**

Quote#: Q-82603-2



ATTENTION

Salinas Valley Memorial Hospital

450 E Romie Ln
Salinas, CA 93901-4098

Dave
Bogard Construction
dsullivan@bogardconstruction.com

Hello,

Attached is the quote that you requested. Please make your PO out to Skytron and email to trina@kecklermedical.com or fax to 209-847-4166. For additional information please contact me at 510-912-7385. Thank you for your business opportunity.

Mobile: 510-912-7385

Trina McNeil
trina@kecklermedical.com
J.M. Keckler Medical Co., Inc.

QUOTE

Q-82603-2

DATE

03-05-2025

EXPIRES

07-03-2025



ATTENTION

Salinas Valley Memorial Hospital

450 E Romie Ln
Salinas, CA 93901-4098

SALINAS VALLEY MEMORIAL- LUCINA LIGHTS

QUOTE Q-82603-2

PRICING SUMMARY

PRODUCT	QTY	LIST PRICE UNIT	LIST PRICE EXTENDED	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
Lights: Dual Recessed Lights	10	\$ 16,109.00	\$ 161,090.00	\$ 11,517.14	\$ 115,171.40
Subtotal					\$ 115,171.40
Skytron One: Solutions Fees: Q82603					\$ 39,625.63
Handling					\$ 1,439.64
TOTAL INVESTMENT					\$ 156,236.68
REQUIRED DEPOSIT					\$ 0

QUOTE (Q-82603) SPECIFIC TERMS AND CONDITIONS

GPO Vizient - 1 (1151)
ISSUE PO TO Skytron, LLC · PO Box 888615, Grand Rapids, MI, 49588 · P: 616-656-2900 · trina@kecklermedical.com or fax to 209-847-4166
REMIT TO Skytron, LLC · PO Box 675164, Detroit, MI, 48267-5164

QUOTE

Q-82603-2

DATE

03-05-2025

EXPIRES

07-03-2025

Salinas Valley Memorial- Lucina Lights

PRICING DETAIL LIGHTS: DUAL RECESSED LIGHTS

Reference #: C-120763-1

Ceiling Height (inches): 108

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
LCN4-PKG2	Lucina 4 Dual Light Package, consisting of two LCN4 light heads, B5-014-99 wall control, B5-014-39 Control Wand, B5-014-40 Stand for Control Wand. DOES NOT INCLUDE OPTIONAL BACK BOX.	10	\$ 15,732.00	\$ 11,169.72	\$ 111,697.20
B5-014-41	Back Box for Lucina 4 wall controls	10	\$ 102.00	\$ 72.42	\$ 724.20
B5-010-02-1	Sterile drape for Argos control wand, 50 per case	10	\$ 275.00	\$ 275.00	\$ 2,750.00
TOTAL					\$ 115,171.40

QUOTE

Q-82603-2

DATE

03-05-2025

EXPIRES

07-03-2025

Salinas Valley Memorial- Lucina Lights

PRICING DETAIL

SKYTRON ONE: SOLUTIONS FEES: Q82603

Reference #: C-120765-4

ITEM	DESCRIPTION	QTY EXTENDED
SERV-926-14	Installation, inspection and warranty certification of recessed lighting system, single mount or up to two (2) flush ceiling mounted exam system, model series Lucna4 (2). Includes pre-installation walk through, installation and full functional testing of the system. Does not include electrical wiring, structure or wall control unit rough in. Pricing does not include weekend/after hours work.	10
SERV-927-20	Project Management	25
SERV-929-01	Mobilization of service team for site specific required service engagement. Includes all transportation of necessary support equipment/service technician(s) for required service. Does not include transportation of point of service equipment required for the engagement.	1
PRODUCT TOTAL		\$ 39,625.63

QUOTE

Q-82603-2

DATE

03-05-2025

EXPIRES

07-03-2025

Salinas Valley Memorial- Lucina Lights

PRICING DETAIL

SOLUTIONS: DETAILS ONLY - PRICING PRESENTED IN SKYTRON ONE: SOLUTIONS FEES

ITEM	DESCRIPTION	QTY	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
PROJECT SCOPE	As you budget for this project you should include your facilities management team to review the project scope.	1	\$0.00	\$0.00	\$0.00
STORAGE	Customer will receive the product at their facility and store until ready for installation. If storage and staging is requested of J.M. Keckler Medical then please contact your sales representative for pricing and terms.	1	\$0.00	\$0.00	\$0.00
TOTAL					\$0.00

QUOTE

Q-82603-2

DATE

03-05-2025

EXPIRES

07-03-2025

TERMS AND CONDITIONS

CHANGE ORDER FEE: Change order fees, equal to five percent (5%) of order total, apply if order changes occur within 60 days prior to shipment.

CANCELLATION FEE: Eight percent (8%) cancellation fee will be invoiced or deposit will be forfeited on cancelled items of an equipment order.

DRAWING CHANGE FEE: \$200.00 Drawing Revision Charge will be invoiced after 2nd submittal revision, and after 1st fabrication revision. \$750.00 Fabrication Revision Charge will be invoiced if revision is within 45 days of shipping.

MINIMUM ORDER FEE: Orders with a product total less than \$25.00 are subject to a \$20 non-refundable minimum order fee added to the invoice.

RE-STOCKING FEE:

- Equipment - 20% re-stocking fee will apply to all returns for credit of new equipment not yet installed, within 180 days of shipment. Refurbishment charges, if any, are calculated upon inspection of goods when received. All returns to be authorized by Skytron in advance.
- Parts - \$50.00 re-stocking fee for inspection/testing, and up to five percent (5%) of item cost for repair/refurbishing charge (not to exceed \$2,500 per item). Non-warranty part returns with a List Price less than \$100.00 per item are not accepted.
- Re-Stocking policy does not supersede Skytron's North American Warranty policy, Demo policy, or Table Pad Return policy.

WORKING HOURS: All service and installation pricing is based on normal working hours: 8AM to 5PM, Monday thru Friday, excluding holidays.

UNION LABOR: Facilities requiring the use of union labor must be identified as such for quoting purposes.

SEISMIC REQUIREMENTS: Please notify Skytron's Service Manager for installations having specific seismic requirements. Skytron is not responsible for any x-raying of the floor, structural ceiling through bolting, and associated fasteners.

SERVICE CONTRACTS: A signed service contract is required for service programs included in this quote, if applicable. A preliminary evaluation of product may be required for product that has been in use for some time.

SCHEDULING AND TRADE-IN EQUIPMENT: Contact Skytron's Service Manager a minimum of 15 working days prior to desired installation date. Large and intensive projects requiring multiple phases require a minimum 60-day notice before installation commences. Notice is required for installation where trade-in equipment will be present. If required, for a fee, Skytron can disconnect and remove existing equipment.

ELECTRICAL CONNECTIONS, FINAL TIE-INS AND FINISHES: All final tie-ins of electrical connections, plumbing and media must be made by a qualified and licensed individual. Skytron does not provide final tie-in services due to local licensing regulations. Finish work (e.g. caulking and trim) is the responsibility of others. Installation of standard product moldings or trim is included in the pricing provided.

MISCELLANEOUS:

- Unless otherwise noted, Skytron reserves the right to make product improvements, discontinue products or change prices without notice.
- Unless otherwise noted, quoted amounts do not include freight costs and applicable taxes. Freight and tax rates in effect at time of shipment will be applied.
- For products combining lights and equipment pendants, include installation pricing for both individual units.
- Buyer expressly agrees that no terms and conditions shall supersede those in this quote without express, written consent of Skytron.

UV DISINFECTION, IF APPLICABLE: In order to maintain warranty on UV Disinfection products (IPT UV-C), a service contract must be purchased from Skytron, and service work performed by a Skytron Service Technician. Failure to comply with the terms of the service contract may void warranty. Service contract terms and conditions are available upon request.

QUOTE

Q-82603-2

DATE

03-05-2025

EXPIRES

07-03-2025



TERMS AND CONDITIONS CONTINUED VIZIENT

PAYMENT TERMS

Net thirty (30) days after date of invoice, subject to credit approval.

Shipping and Taxes are not included in this quote unless itemized above. All products are invoiced upon shipment.

WARRANTY

1 - year Parts and Labor on contracted products.

1 - year Parts and Labor on non-contracted products.

90 - days on replacement parts, spare bulbs (surgical lights), spare pads (surgical tables), supplies, and accessory items.

15 - years on sterilizer pressure vessel (steam chamber and jacket).

**In order to maintain warranty on UV Disinfection products (IPT UV-C), a service contract must be purchased from Skytron, and service work performed by a Skytron Service Technician.*

Failure to comply with the terms of the service contract may void warranty. Service contract terms and conditions are available upon request.

FREIGHT TERMS

F.O.B. Destination. Freight Prepaid and Added. All shipments subject to handling charge.

DELIVERY

120 Days after receipt of order.

DEPOSIT

25% deposit required for Booms and Active RTLS upon order acceptance.

50% deposit required for Integration and custom products upon order acceptance.

CONTRACT NUMBER

CE7191 (Stainless Steel); CE7201 (Lights, Booms, Integration)

CE7211 (Tables and Accessories); CE7593 (Sterilizers)

CE7598 (Washers and Decontaminators)

I acknowledge that I have reviewed and accept the content of this quote in its entirety.

Signature

Printed Name

Date

Title

Customer Purchase Order Number

Billing Address

Delivery Address

QUOTE

Q-82603-2

DATE

03-05-2025

EXPIRES

07-03-2025

Board Paper: Finance Committee

Agenda Item: Consider Recommendation for Board Approval of Project Budget(s) to create Training Facilities in support of the EPIC platform roll out.

Executive Sponsor: Clement Miller – Chief Operating Officer

Date: March 13, 2025

Executive Summary

Salinas Valley Health has committed to deploying the EPIC platform of management and administration tools in the coming months and years. The commitment requires significant training of all staff to assure efficient and competent utilization of the newly adopted program elements. Existing conference facilities are routinely booked to capacity. Taking existing facilities away from general use to accommodate a slate of full-day Epic training sessions creates an operational challenge. We are proposing to create two new ‘stand-alone’ conference/training facility buildouts, one in the Garage Annex basement, one at 5 Lower Ragsdale.

The garage Annex project (CIP 01.1250.3915) patterns the new development after the DRC’s existing 3-chamber conference rooms A/B/C. The new training room will include full height motorized folding partitions to create 3 individual training chambers that can retract to reestablish the larger single chamber. Video-conferencing equipment will be installed to allow remote engagement. Included in this buildout is the creation of a men’s/women’s bathroom ‘core’ off the currently improved hallway near the new elevator, those toilet facilities will also support future occupancies once the balance of the unfinished basement is developed. The budget allocation for this component is \$1,950,000.

The Ryan Ranch project (CIP 01.1250.3880) takes a portion of the existing VNA tenant space and demises it from the VNA tenancy with a full height wall to become a single training room, also with remote video engagement potential. Work associated with this project includes relocating individuals that currently occupy offices and cubicles within the training room footprint and the preparations needed to accommodate the various personnel moves out of the subject area. These facilities are targeted for completion in late June/Early July 2025 to align with the training schedule established by the training staff. The budget allocation for this component is \$940,000.00 The total requested budget allocation for both projects is **\$2,890,000.00**

Timeline/Review Process to Date:

Late 2024: Preliminary space analysis and concept design
Jan-March 2025: Contracting/Procurement/Permitting
April-June 2025: Construction & Activation activities
July 2025: Training sessions commence

Meeting our Mission, Vision, Goals

Pillar/Goal Alignment:

☐ Service ☐ People ☐ Quality ☐ Finance ☐ Growth ☐ Community

Fiscal Year Capital Budgeting:

Both Projects expected to achieve substantial completion by July 2025
Fiscal Year 2025: \$2,300,000
Fiscal Year 2026: \$ 590,000

Recommendation

Consider recommendation for Board of Directors to approve the total estimated Project Budget(s) to create Training Facilities in support of the EPIC platform roll out in the amount of **\$2,890,000.00**

Attachments

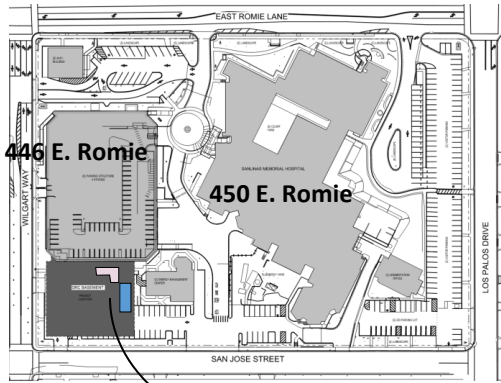
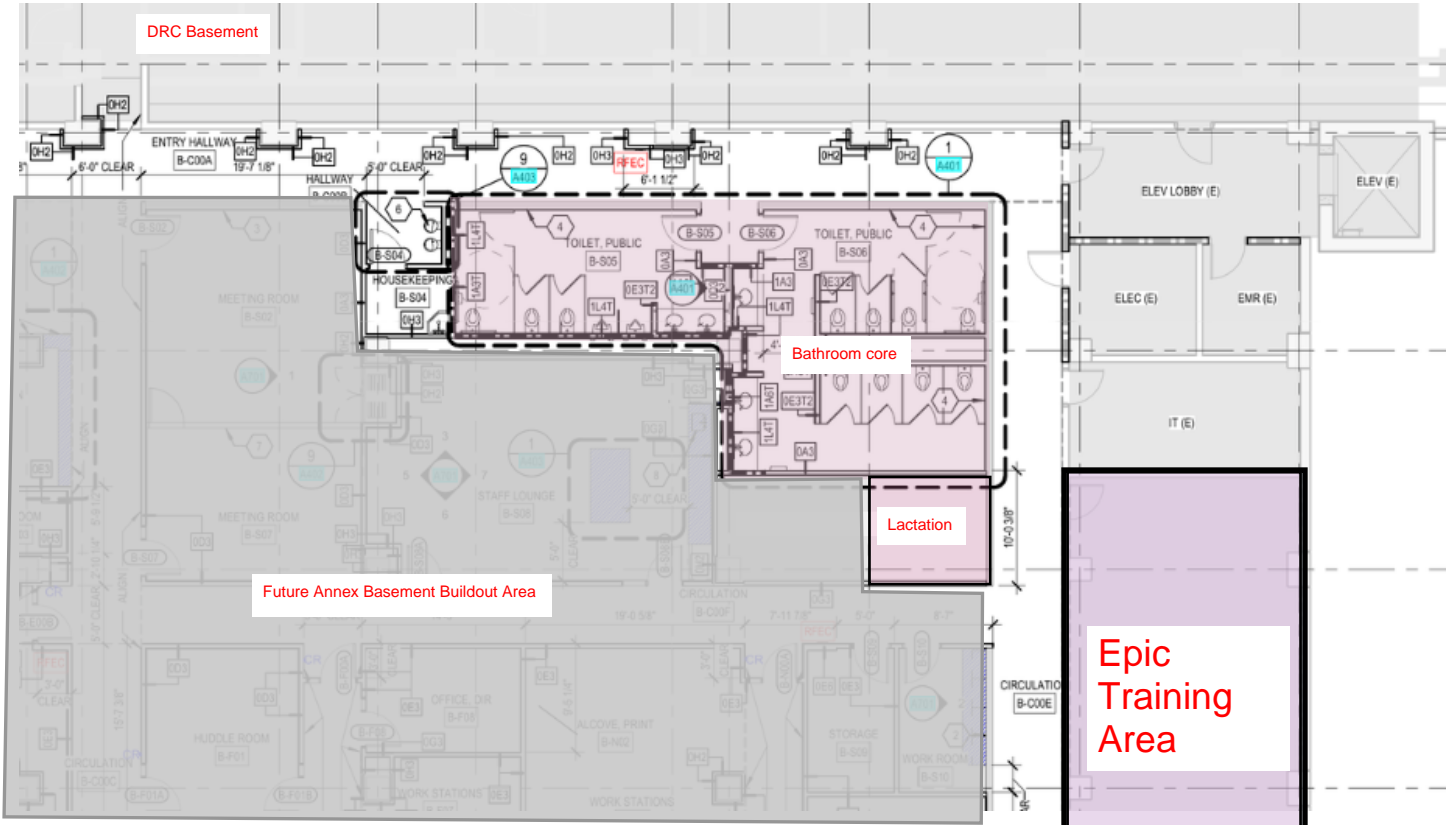
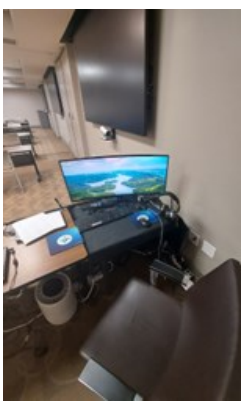
- 1) Attachment ‘A’ – 4-page schematic plan package
- 2) Attachment ‘B’ - Project Cost Budget at time of permit plan submittal



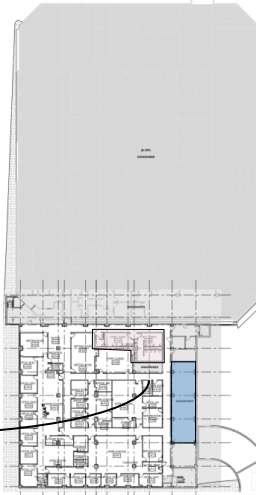
Existing Unfinished Space



Reference - Existing DRC 3-chamber Conference Area



Project Areas



SVH EPIC TRAINING FACILITY
CONCEPT PACKAGE

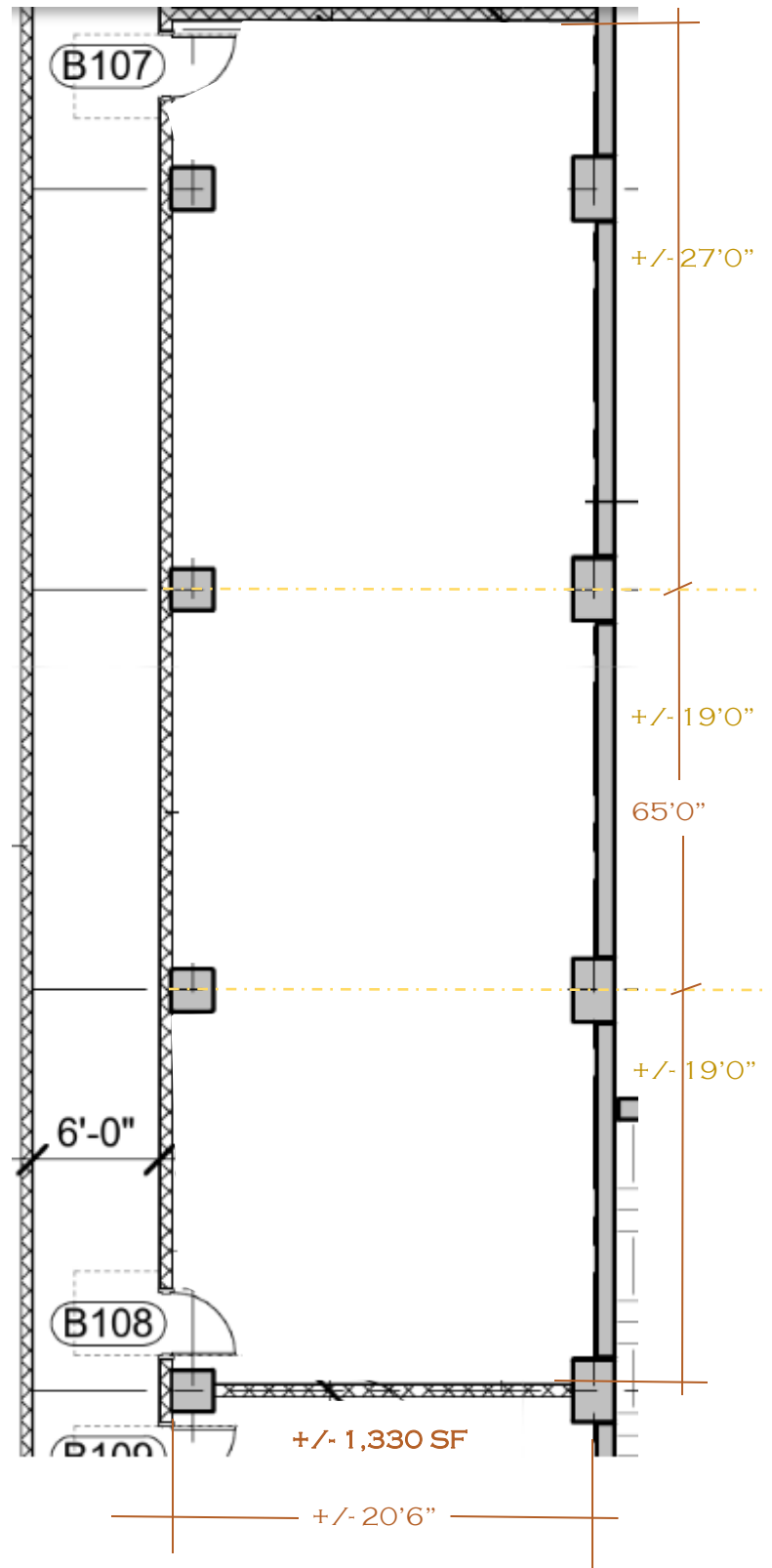
446 E. ROMIE LANE
BASEMENT LEVEL



A
+/-550 SF

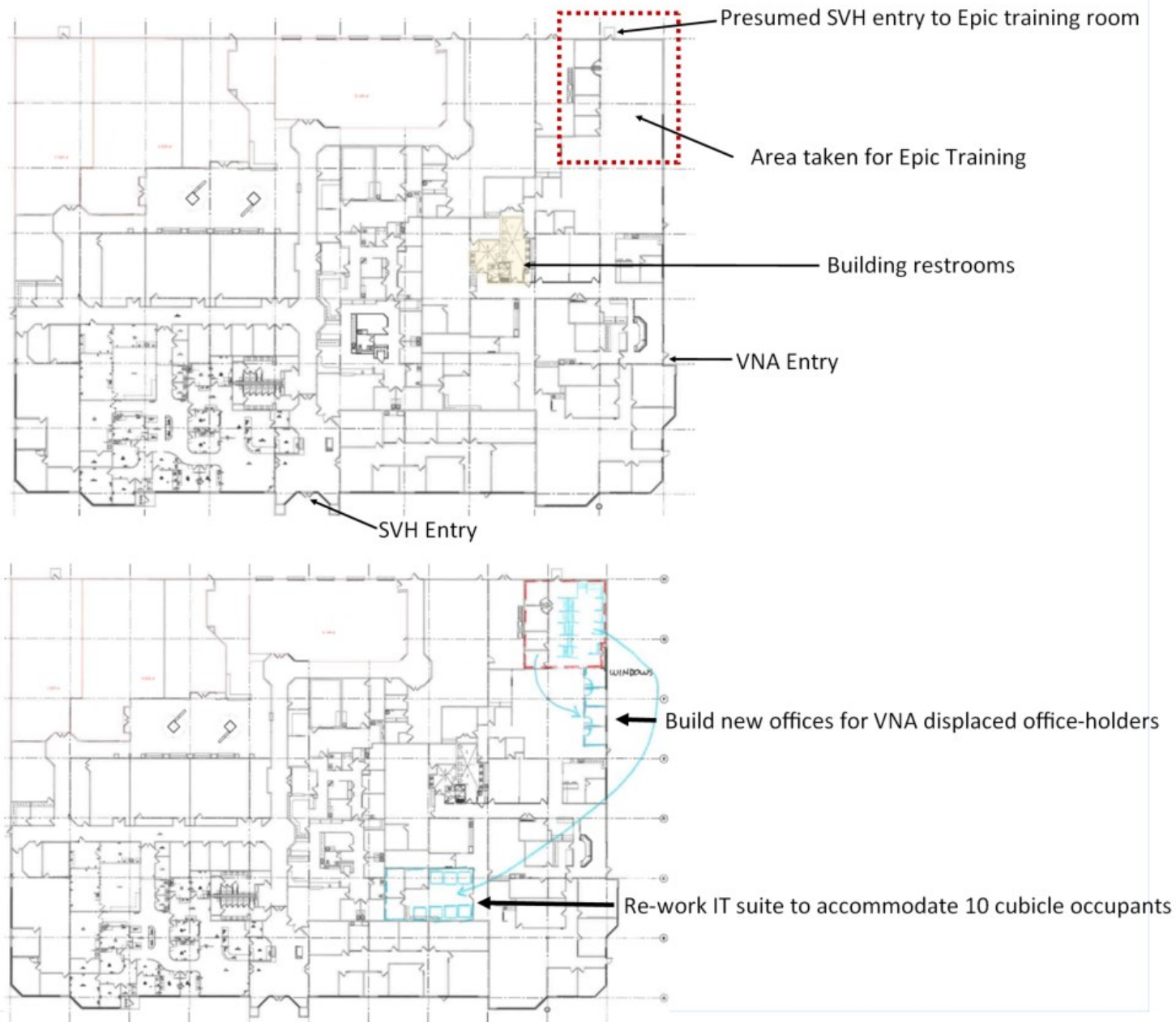
B
+/-380 SF

C
+/-380 SF



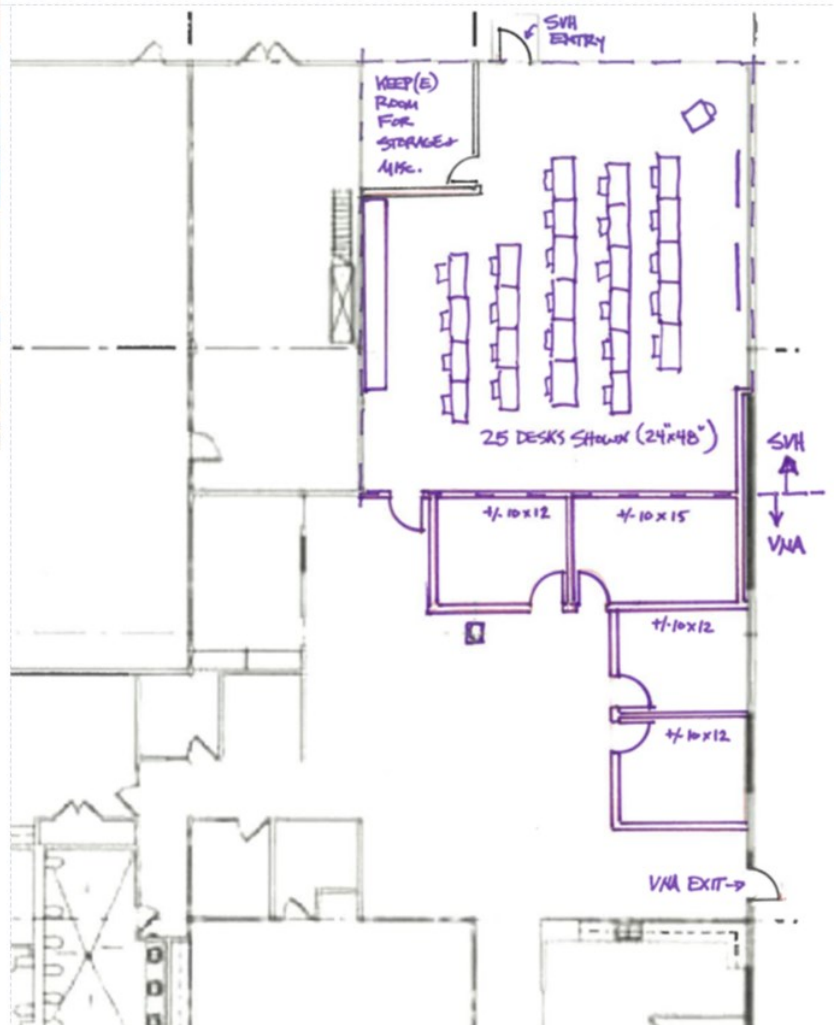
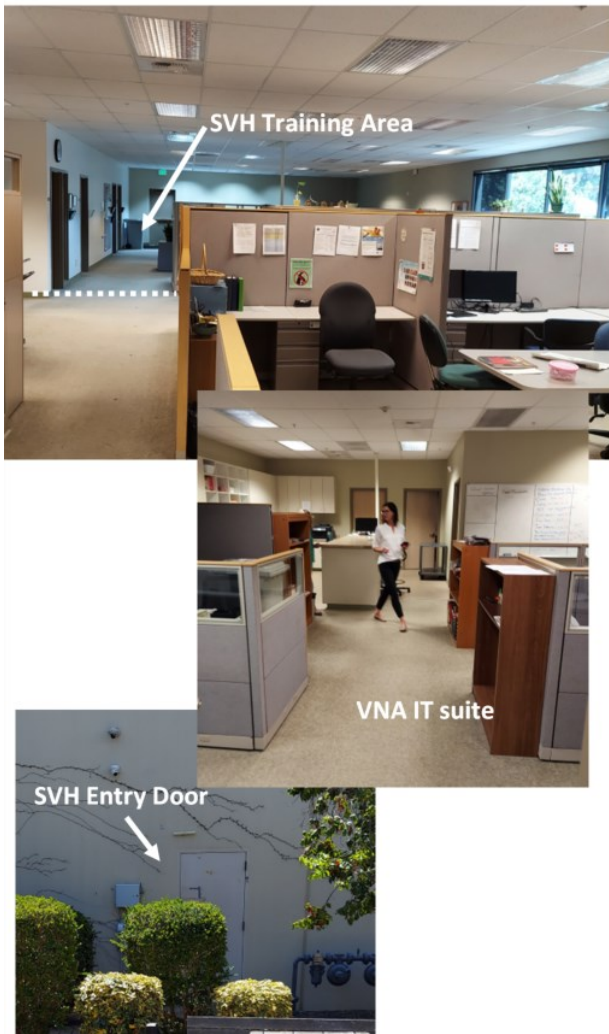
SVH EPIC TRAINING FACILITY CONCEPT PLAN

446 E. ROMIE LANE
BASEMENT LEVEL



SVH EPIC TRAINING FACILITY CONCEPT PACKAGE

MAKE-READY IMPROVEMENTS 5 LOWER RAGSDALE - MONTEREY INSIDE VNA SUITE



SVH EPIC TRAINING FACILITY
CONCEPT PLAN
 5 LOWER RAGSDALE - MONTEREY
 INSIDE VNA SUITE

Preliminary Budget at Permit Plan Submission

SVH - Epic Training Facilities - Garage Annex & 5 Lower Ragsdale

March 2025

	01.1250.3915	01.1250.3880
COST CATEGORY	Annex Basement	Ryan Ranch
Const: Supervision	\$45,000	\$30,000
General Conditions	\$35,000	\$15,000
Soft Demo & pre-prep	\$8,500	\$15,000
Insulation	\$15,000	\$3,500
Drywall	\$50,000	\$28,000
Paint	\$17,000	\$15,000
Doors/Hardware	\$25,000	\$15,000
Ceiling	\$24,000	\$15,000
Conference Room Flooring/Floor Prep	\$15,000	\$10,000
Rest Room Tile	\$30,000	\$0
Cabinetry/Counters	\$20,000	\$10,000
Specialties - Bathroom	\$20,000	\$0
Specialties - Folding Partitions/Struct	\$75,000	\$0
Specialties - Relocate SVH personnel	\$0	\$125,000
FFE - Furnishings	\$70,000	\$60,000
FFE - Appliance - lactation fridge	\$500	\$0
FFE - IT Equipment	\$100,000	\$35,000
FFE - AV Specialty Equipment	\$180,000	\$100,000
Mechanical	\$150,000	\$24,000
Plumbing	\$150,000	\$10,000
Fire Sprinkler	\$25,000	\$12,000
Electrical	\$140,000	\$50,000
Fire Alarm	\$20,000	\$15,000
Data Cable & Terminations	\$90,000	\$45,000
Subtotal	\$1,305,000	\$632,500
Contractor Fees - 7%	\$91,350	\$44,275
Insurance = 1%	\$13,673	\$6,276
Project Bond	\$20,000	\$7,500
Subtotal	\$1,430,023	\$690,551
Soft Costs: Architecture/Engineering	\$130,000	\$75,000
City Fees	\$30,000	\$10,000
Other Fees	\$40,000	\$5,000
Program Management	\$150,000	\$75,000
Subtotal	\$350,000	\$165,000
Allow: common area carpet/wall repair	\$10,000	\$0
Project Contingency	\$159,977	\$84,449
ROM at permit submission	\$1,950,000	\$940,000
Project Totals:	\$2,890,000	

Financial Performance Review

February 2025

Finance Committee

Augustine Lopez

Chief Financial Officer

Consolidated Financial Summary

For the Month of February 2025

\$ in Millions	For the Month of February 2025			
			Variance fav (unfav)	
	Actual	Budget	\$VAR	%VAR
Operating Revenue	\$ 68.1	\$ 58.8	\$ 9.3	15.8%
Operating Expense	\$ 67.4	\$ 61.3	\$ (6.1)	-10.0%
Income from Operations	\$ 0.7	\$ (2.5)	\$ 3.2	128.0%
<i>Operating Margin %</i>	1.0%	-4.2%	5.2%	123.81%
Non Operating Income	\$ 6.3	\$ 4.1	\$ 2.2	53.7%
Net Income	\$ 7.0	\$ 1.6	\$ 5.4	337.5%
<i>Net Income Margin %</i>	10.2%	2.7%	7.5%	277.8%

Non Operating Income includes Normalizing Items of:

- FEMA Grant funds (net) received in February \$1.2 million

Performance related to the prior month:

- Net Revenue was lower this month vs. January mostly due to 28 days in February.
 - ✓ Outpatient Infusion revenues were much lower than last month driven by fewer days.

Consolidated Financial Summary

For the Month of February 2025 - Normalized

\$ in Millions	For the Month of February 2025				
			Variance fav (unfav)		
	Actual	Budget	\$VAR	%VAR	
Operating Revenue	\$ 68.1	\$ 58.8	\$ 9.3	15.8%	
Operating Expense	\$ 67.4	\$ 61.3	\$ (6.1)	-10.0%	
Income from Operations	\$ 0.7	\$ (2.5)	\$ 3.2	128.0%	
Operating Margin %	1.0%	-4.2%	5.2%	123.81%	
Non Operating Income	\$ 5.1	\$ 4.1	\$ 1.0	24.4%	
Net Income	\$ 5.8	\$ 1.6	\$ 4.2	262.5%	
Net Income Margin %	8.4%	2.7%	5.7%	211.1%	

Non Operating Income excludes Normalizing Items of:

- FEMA Grant funds (net) received in February \$1.2 million

Performance related to the prior month:

- Net Revenue was lower this month vs. January mostly due to 28 days in February.
 - ✓ Outpatient Infusion revenues were much lower than last month driven by fewer days.

Executive Summary: Financial Performance

Salinas Valley Health Income from Operations was \$0.7 million for the month which was favorable to budget by \$3.2M. The favorable financial performance for the month was driven by the following:

Key Favorable Performance Highlights:

- **Outpatient revenue** was favorable compared to budget by \$31M (23%), due to higher than budgeted patient volumes in the following areas:
 - **OP Infusion cases** were over budget by 16% (144 cases)
 - **OP Surgeries** were over budget by 12% (28 cases)
 - **CT Scans** were over budget 16% (269 cases)
 - **Mammography** cases were over budget by 13% (304 cases)
- **Total inpatient admissions** were 22% (180 admits) above budget
- **IP surgeries** were over budget by 9% (9 cases)
- **Commercial insurance revenue** was above budget by 11%
- **Average Length of Stay** was 15% favorable to budget at 3.5 days
- **Deliveries** were up 23% (24 cases)

Executive Summary: Financial Performance – Cont'd

■ Key Unfavorable Performance Highlights:

- ✓ MediCal and Medicare patient revenue were over budget 21% and 15%, respectively
- ✓ Total Case Mix was under budget by 5% at 1.53
- ✓ OP Observation cases were over budget by 44% (55 cases)

Consolidated Financial Summary

YTD February 2025

\$ in Millions	FY 2025 February YTD			
			Variance fav (unfav)	
	Actual	Budget	\$VAR	%VAR
Operating Revenue	\$ 545.6	\$ 494.4	\$ 51.2	10.4%
Operating Expense	\$ 520.8	\$ 503.6	\$ (17.2)	-3.4%
Income from Operations	\$ 24.8	\$ (9.2)	\$ 34.0	369.6%
<i>Operating Margin %</i>	4.6%	-1.9%	6.5%	342.1%
Non Operating Income	\$ 26.4	\$ 24.7	\$ 1.7	6.9%
Net Income	\$ 51.2	\$ 15.5	\$ 35.7	230.3%
<i>Net Income Margin %</i>	9.4%	3.1%	6.3%	203.2%

Operating Income includes the Normalizing Item of:

- CCAH Voluntary Rate Range Funds (net) Received YTD for CY 2023 totaled \$4.6 Million

Non Operating Income includes Normalizing Items of:

- FEMA Grant funds (net) received YTD were \$4.2 million
- FEMA Grant funds received inception to date totals \$10.8 million

Consolidated Financial Summary

YTD February 2025 - Normalized

\$ in Millions	FY 2025 February YTD			
	Actual	Budget	Variance fav (unfav)	
			\$VAR	%VAR
Operating Revenue	\$ 541.0	\$ 494.4	\$ 46.6	9.4%
Operating Expense	\$ 520.8	\$ 503.6	\$ (17.2)	-3.4%
Income from Operations	\$ 20.2	\$ (9.2)	\$ 29.4	319.6%
Operating Margin %	3.7%	-1.9%	5.6%	294.7%
Non Operating Income	\$ 22.2	\$ 24.7	\$ (2.5)	-10.1%
Net Income	\$ 42.4	\$ 15.5	\$ 26.9	173.5%
Net Income Margin %	7.8%	3.1%	4.7%	151.6%

Operating Income excludes the Normalizing Item of:

- CCAH Voluntary Rate Range Funds (net) Received YTD for CY 2023 totaled \$4.6 Million

Non Operating Income excludes Normalizing Items of:

- FEMA Grant funds (net) received YTD were \$4.2 million
- FEMA Grant funds received inception to date totals \$10.8 million

SVHMC Revenue Highlights February 2025

Gross Revenues
were 16.1%
favorable to
budget

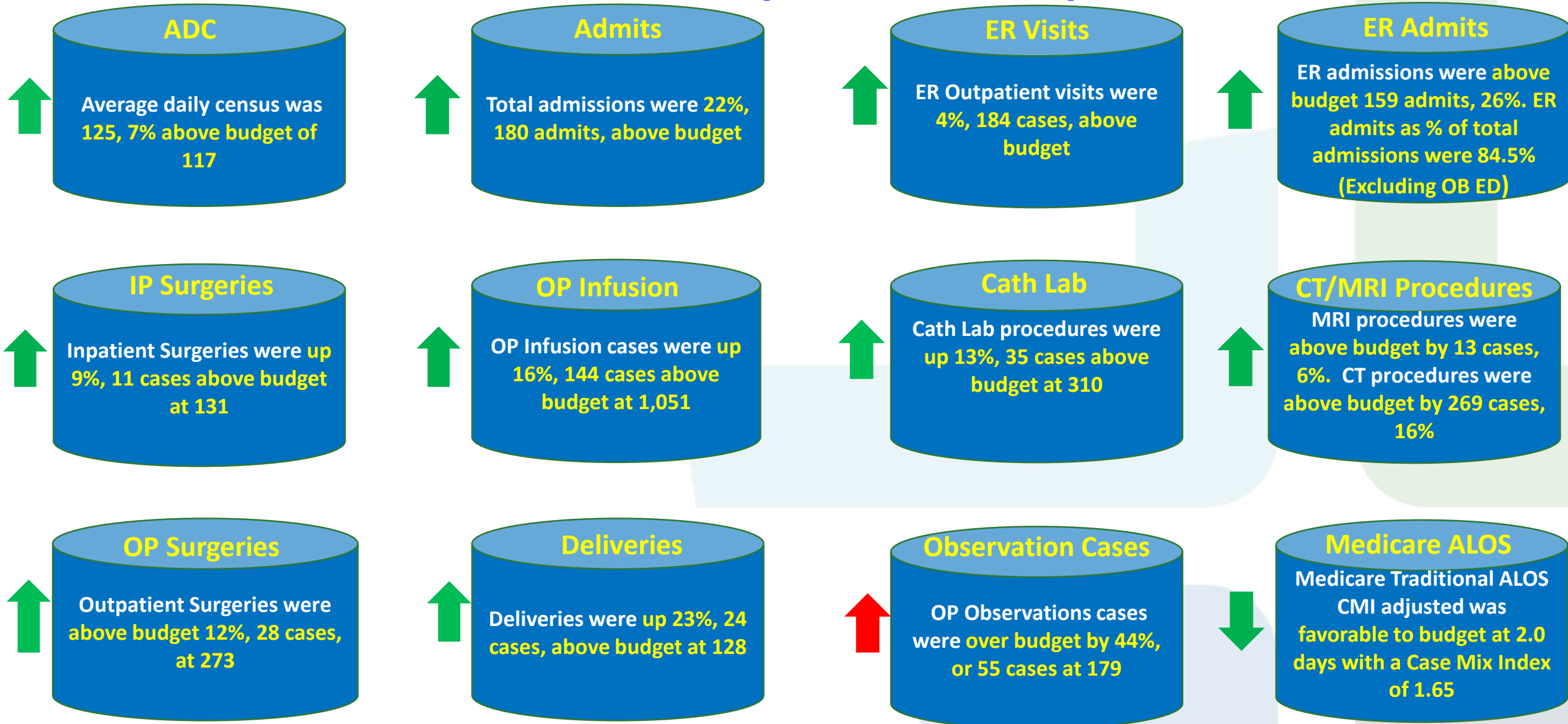
- IP Gross Revenues were 9.3% *favorable* to budget
- ED Gross Revenues were 1.8% *favorable* to budget
- OP Gross Revenues were 30.3% *favorable* to budget in the following areas:
 - OP Infusion
 - OP Surgery
 - CT Procedures
 - Cath Lab

- Commercial: 11% *above* budget
- Medicaid: 21% *above* budget
- Medicare: 15% *above* budget

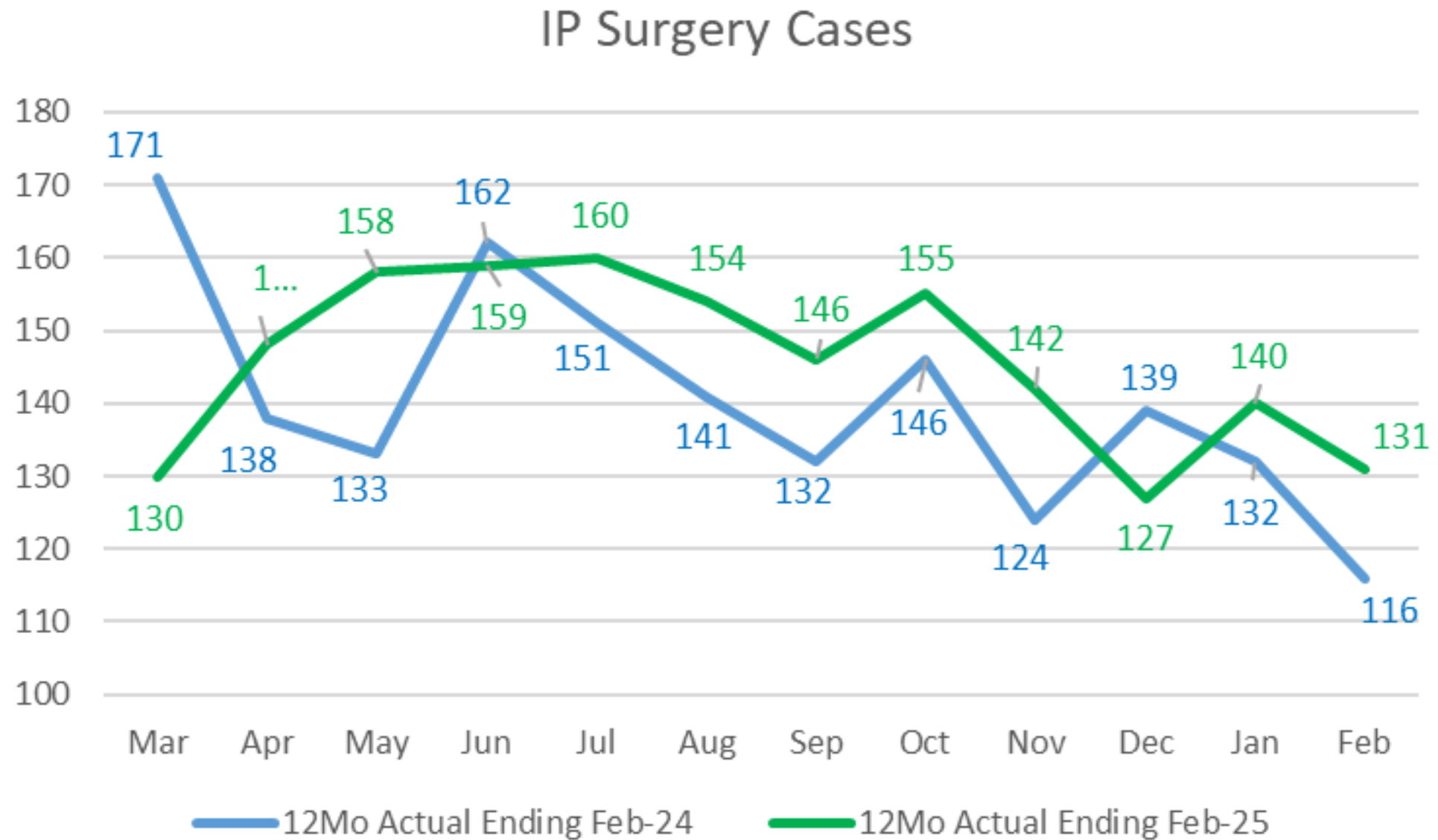
Payor Mix –Mixed

Total Net Patient
Revenues were \$54.5M,
which was *favorable* to
budget by \$7.1M or
14.9%

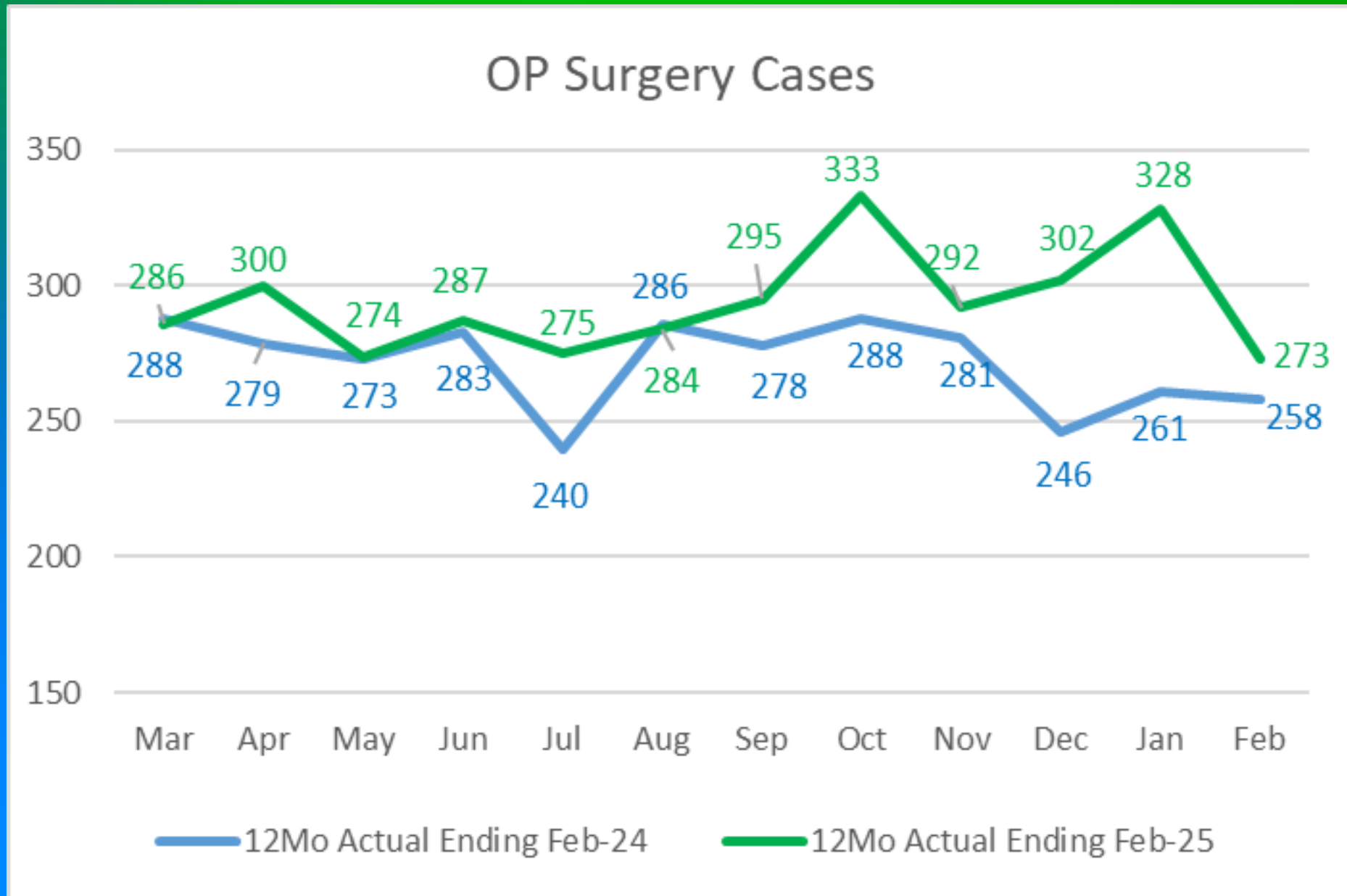
Financial Summary – February 2025



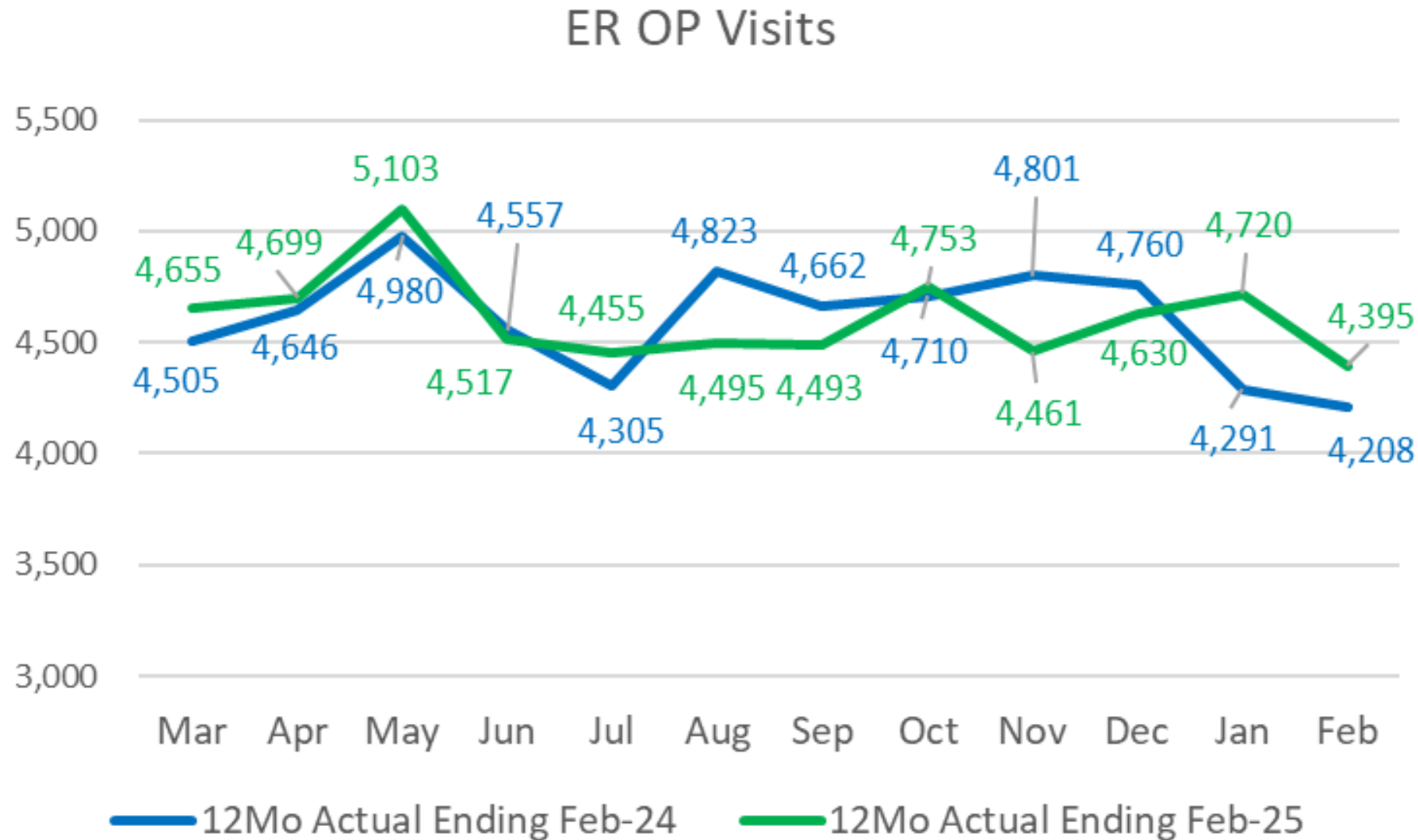
IP Surgery Cases – February 2025



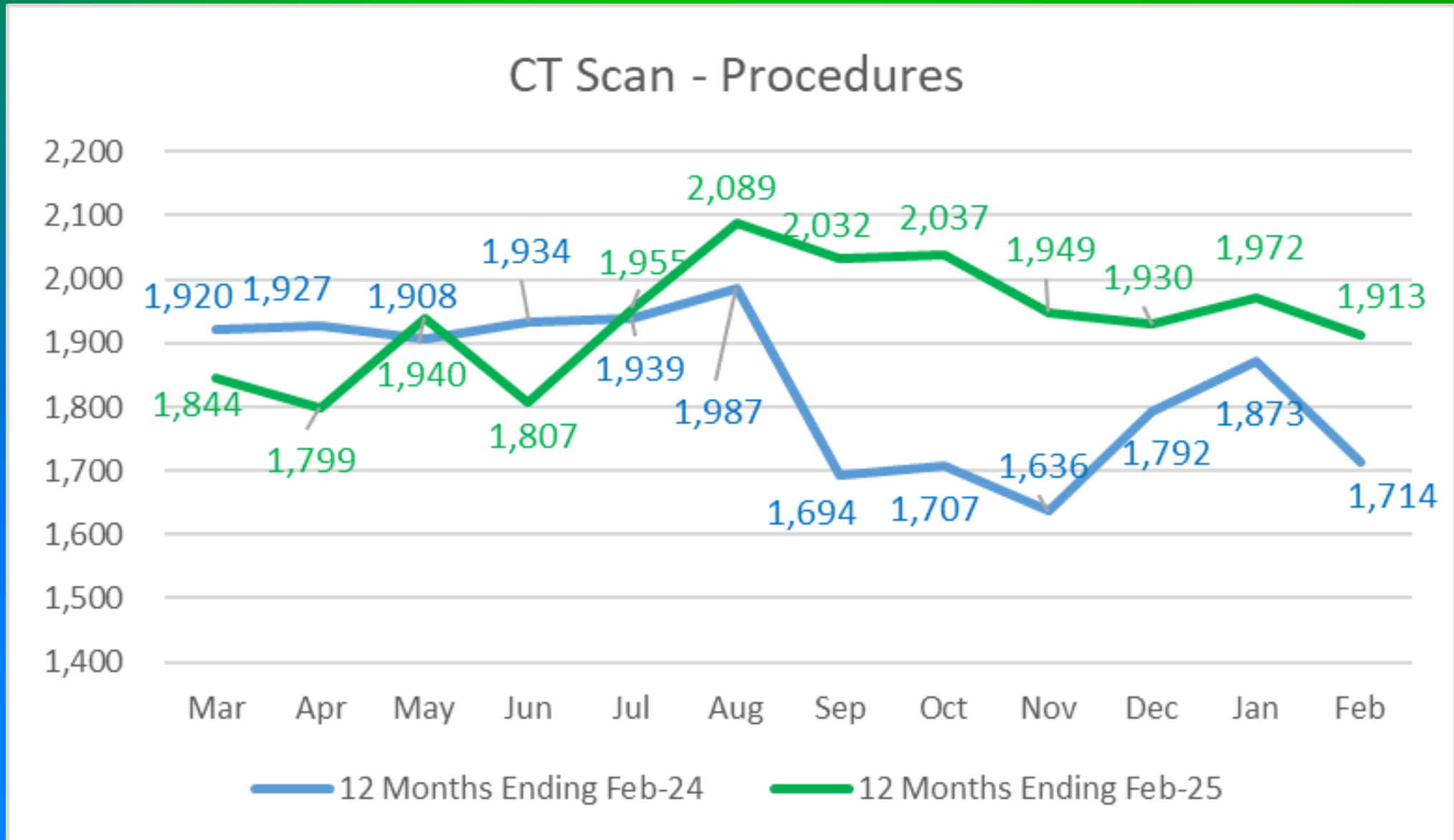
OP Surgery Cases – February 2025



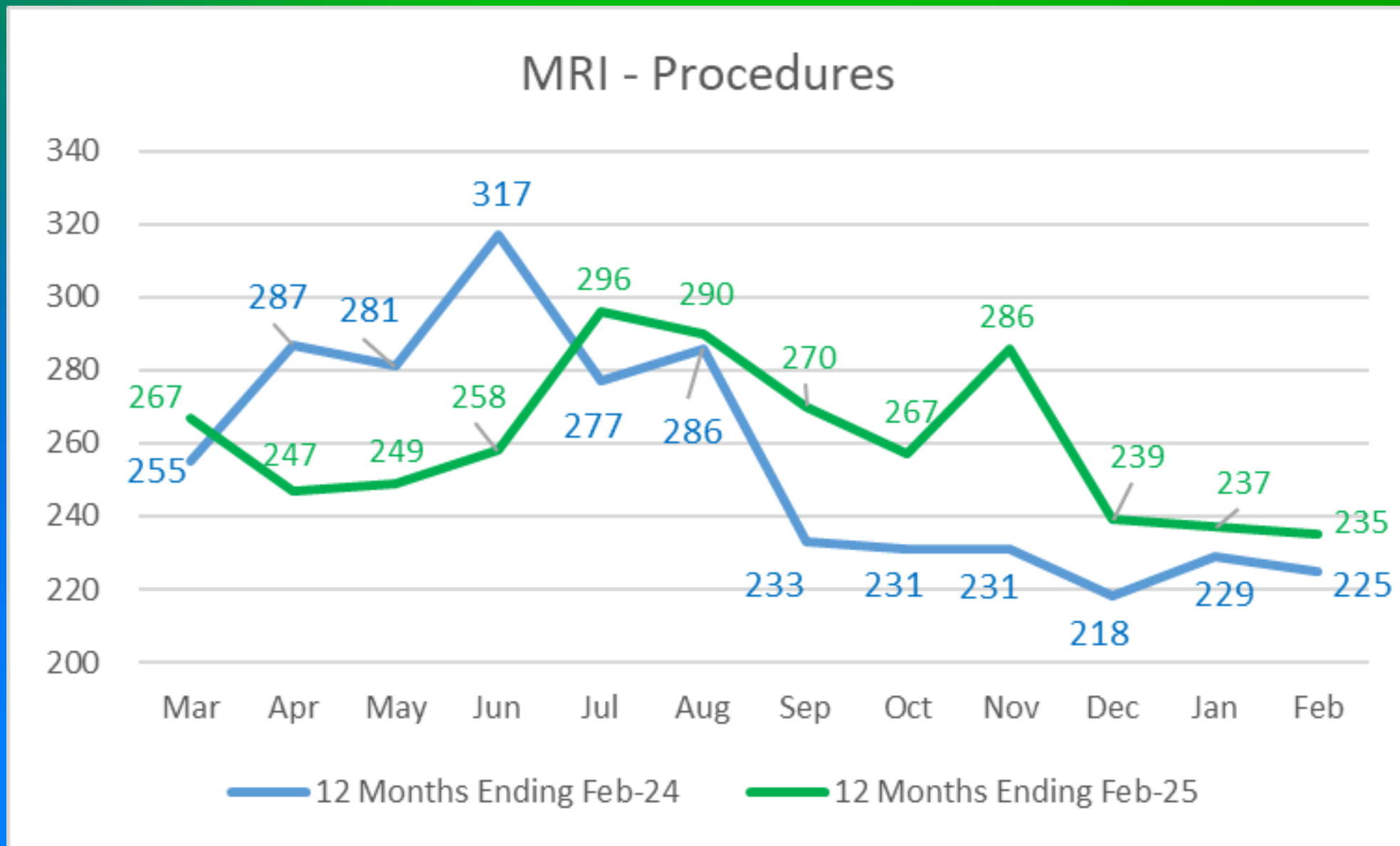
ER OP Visits – February 2025



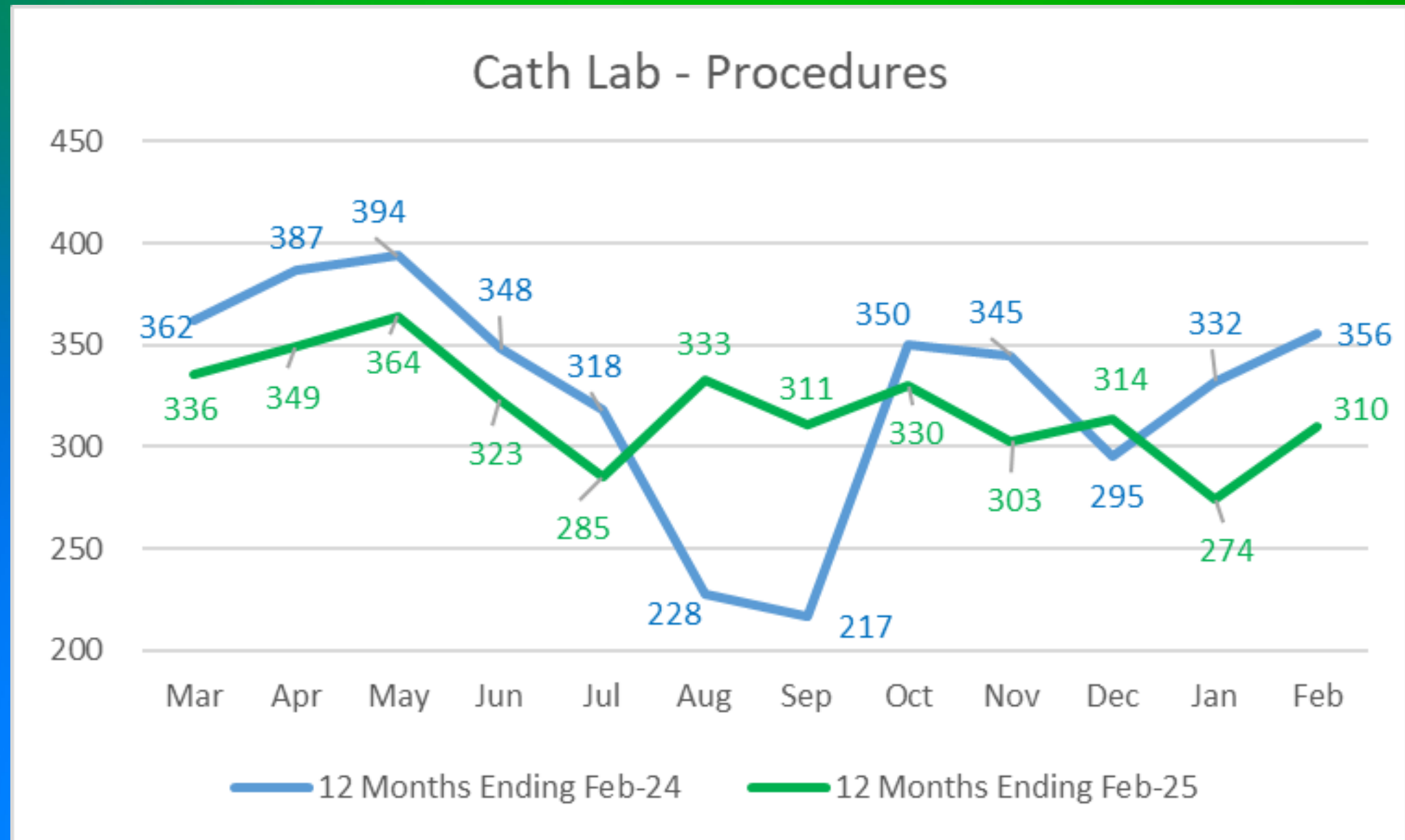
CT Scans – February 2025



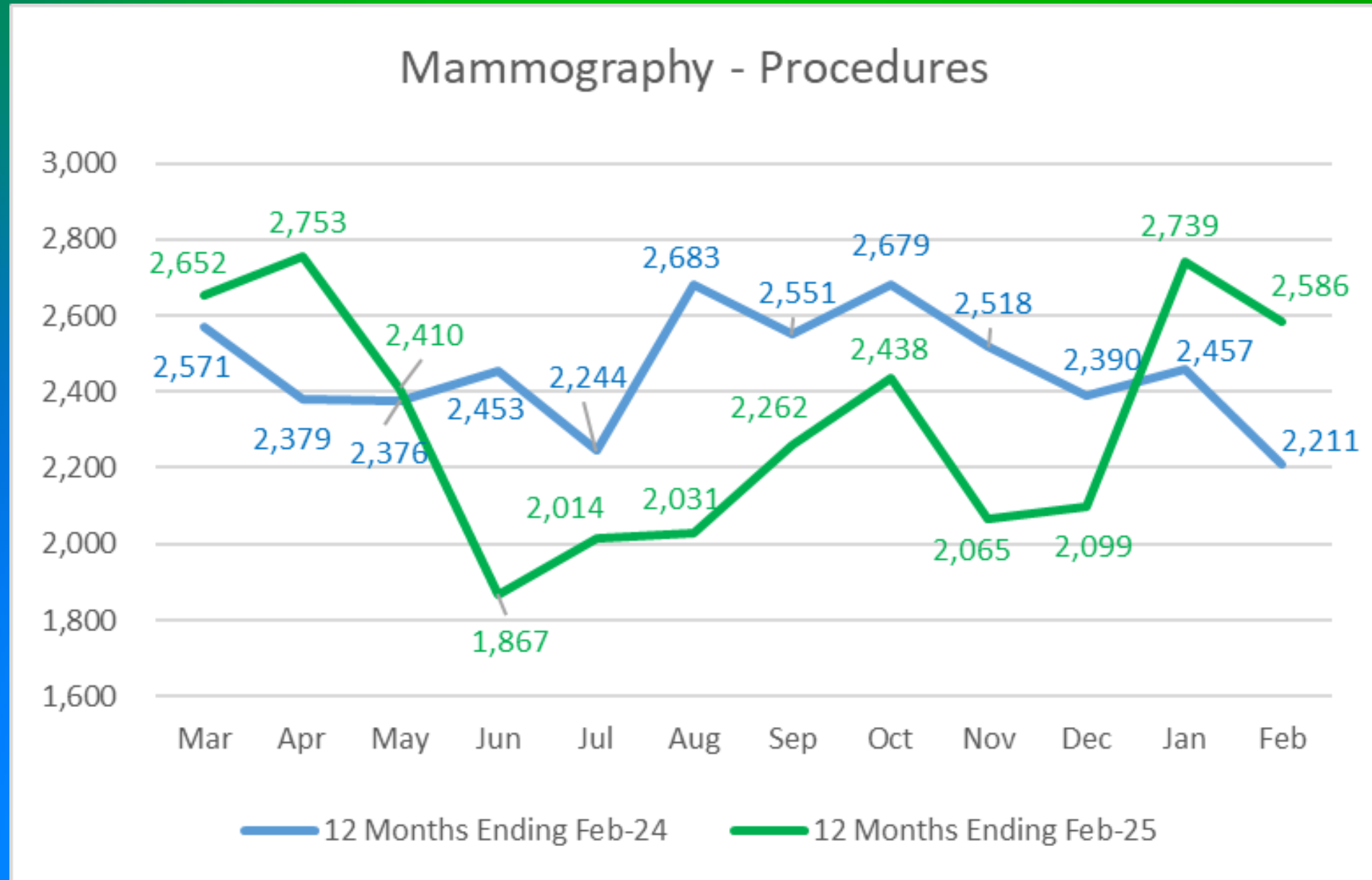
MRI – February 2025



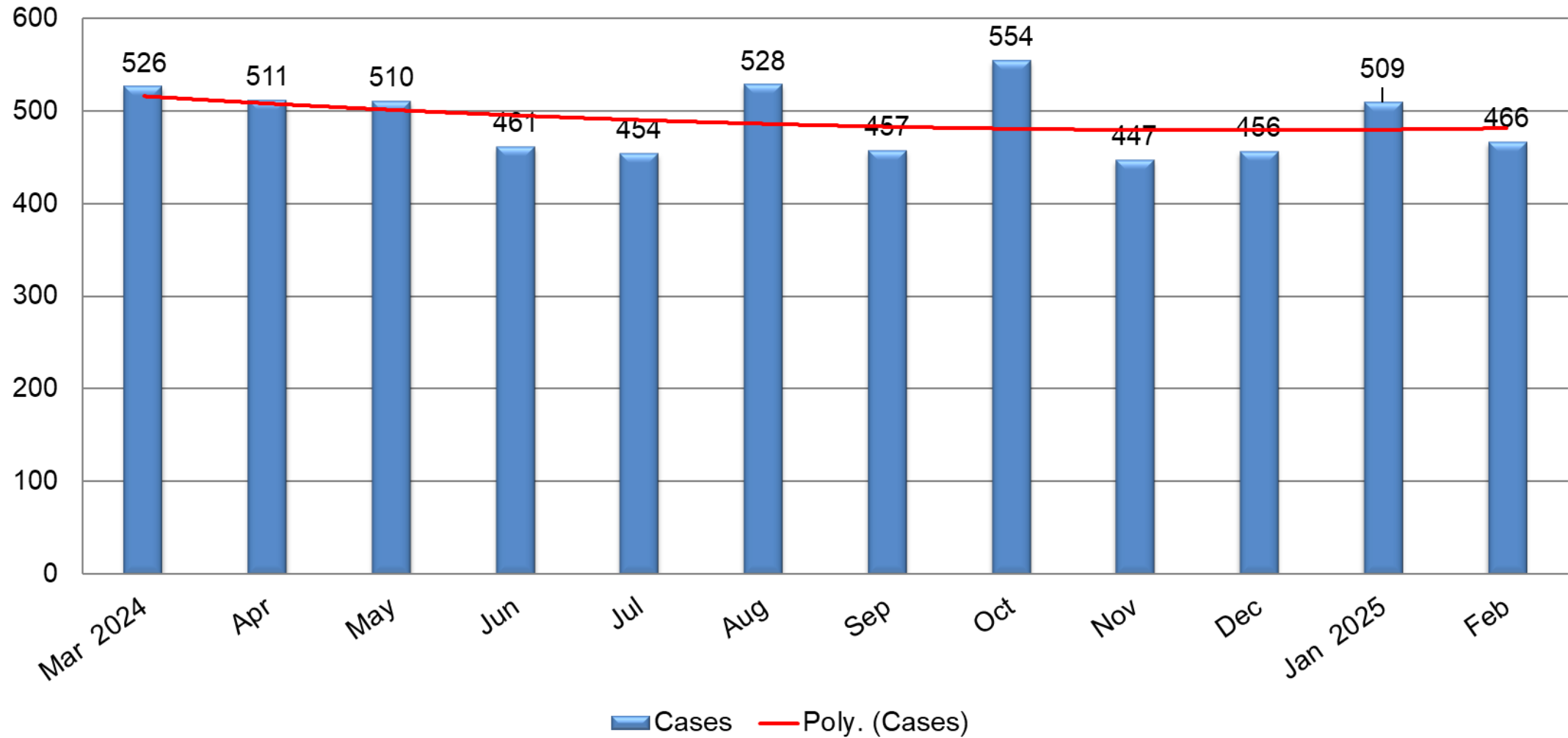
Cath Lab – February 2025



Mammography – February 2025



CDOC Cases - Rolling 12 Month Trend Mar 2024 thru Feb 2025

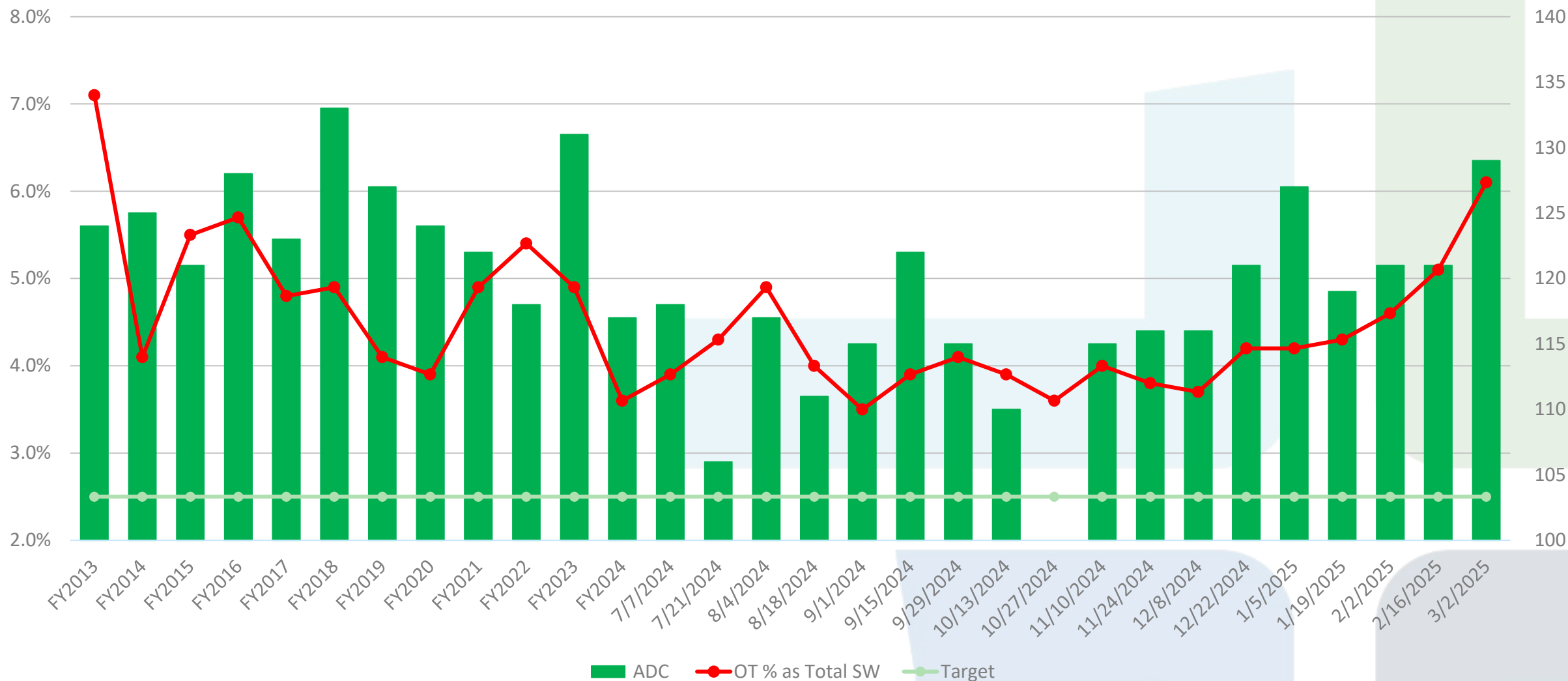


Labor Productivity – February 2025

- 1. Worked FTEs:** During the month of February, worked FTEs on a PAADC basis were 6.9% favorable at **6.2** with a target of **6.7**. *When reviewed on a unit-by-unit level, the variance was **79 FTEs positive (\$1.1M)**.*
- 2. Worked FTEs** increased from 1,566 in January to 1,607 in February. Average daily census decreased by 7 compared to prior month at 125 (7% above budget).
- 3. Paid FTEs:** On a PAADC basis, paid FTEs were **6.8%** favorable to budget at **7.1 actual vs. 7.6 budget**. Paid FTEs increased from 1,824 in January to 1,841 in February.

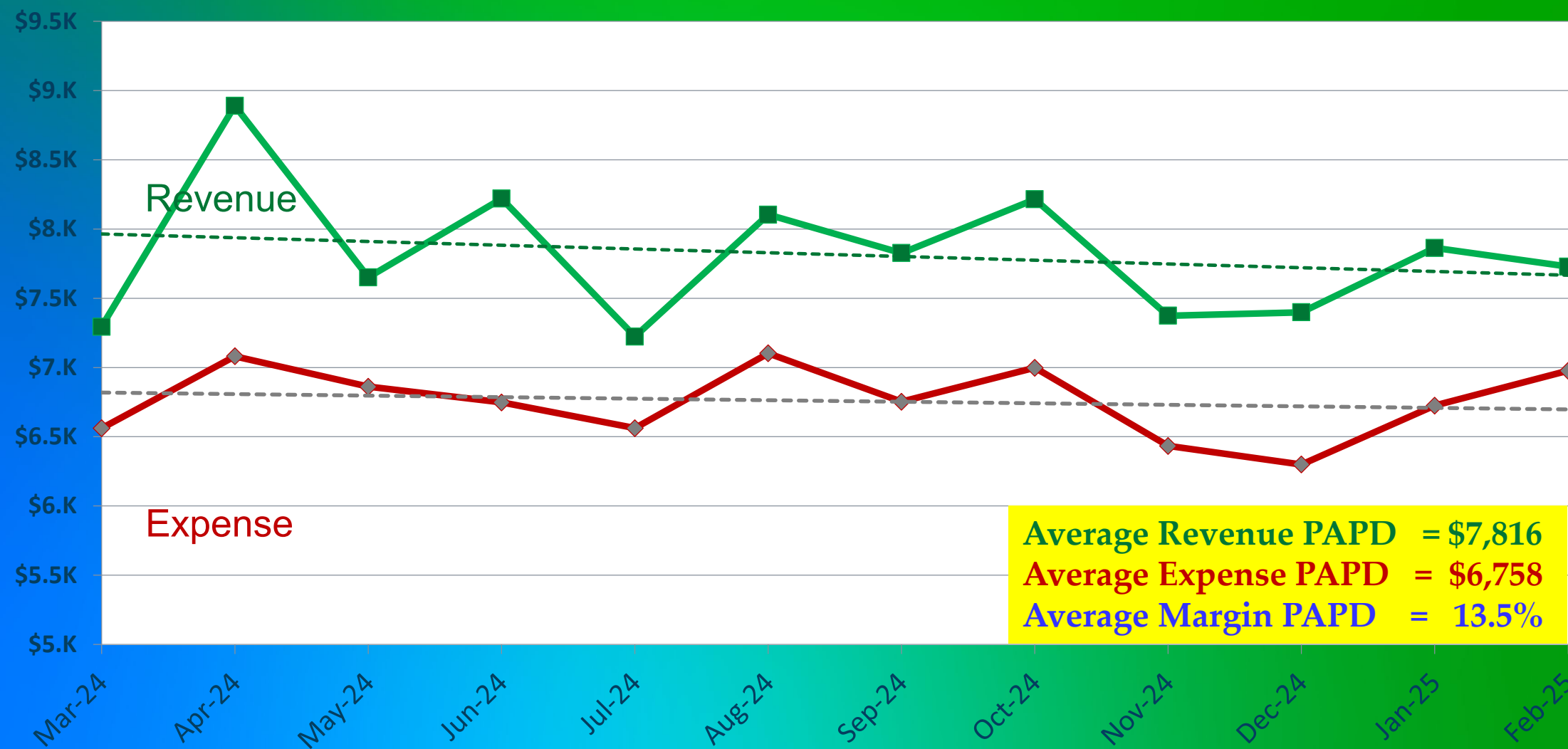
Overtime % of Total Salaries & Wages (excluding holiday)

Updated Thru PPE 3-2-2025



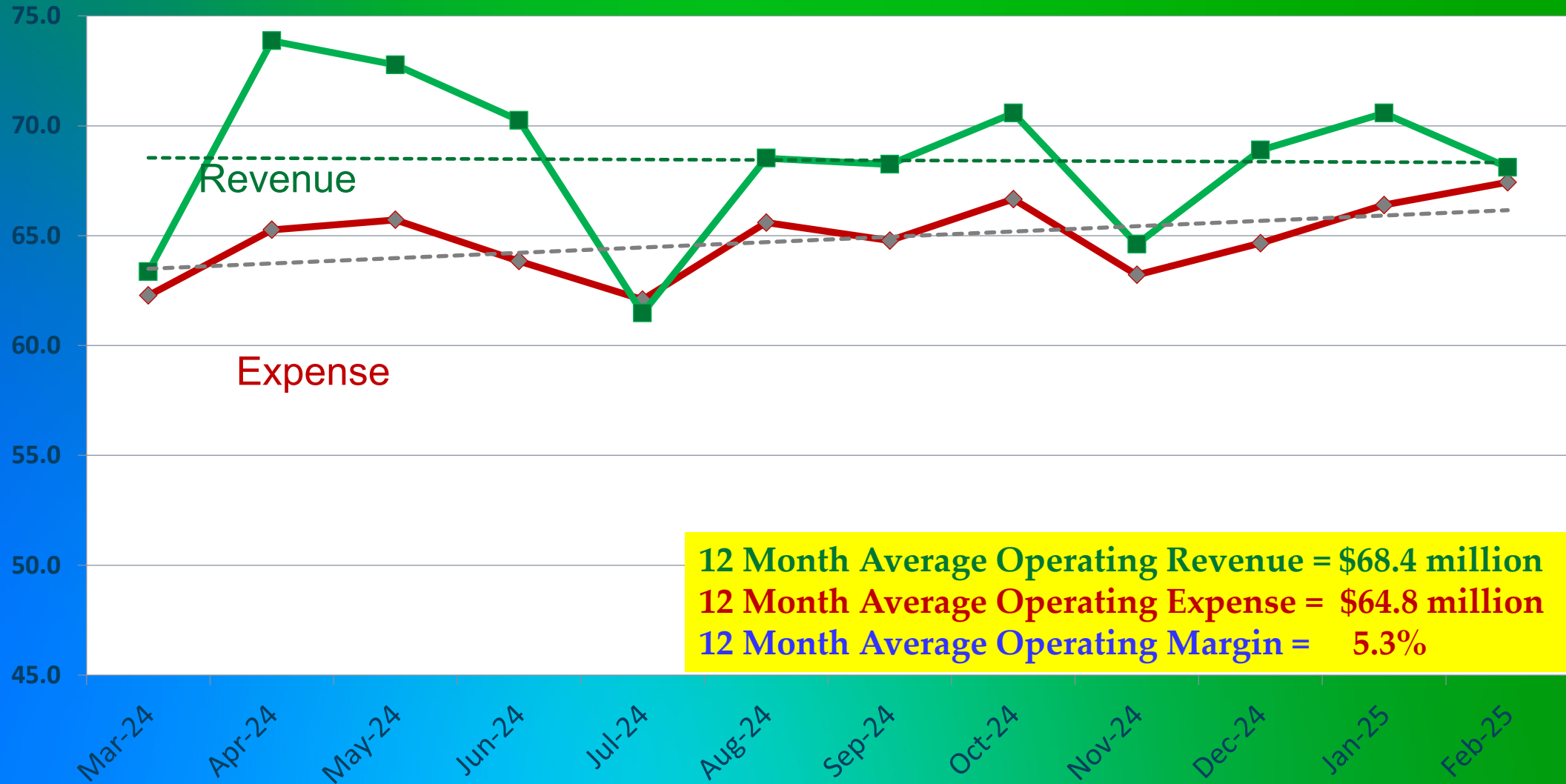
** High inpatient volumes have resulted in additional overtime shifts (while contract labor FTE remain flat).

SVHMC Revenues & Expenses Per Adjusted Patient Day Rolling 12 Months: Mar 24 to Feb 25



SVH Consolidated Revenues & Expenses

Rolling 12 Months: Mar 24 to Feb 25



Salinas Valley Health Key Financial Indicators

	YTD	SVH		S&P A+ Rated		YTD	
Statistic	2/28/25	Target	+/-	Hospitals	+/-	2/29/24	+/-
Operating Margin*	4.6%	5.0%		4.0%		-2.0%	
Total Margin*	9.4%	6.0%		6.6%		3.7%	
EBITDA Margin**	9.0%	7.4%		13.6%		2.8%	
Days of Cash*	364	305		249		338	
Days of Accounts Payable*	46	45		-		47	
Days of Net Accounts Receivable**	67	45		49		60	
Supply Expense as % NPR	14.6%	14.0%		-		13.9%	
SWB Expense as % NPR	52.1%	53.0%		53.7%		55.7%	
Operating Expense per APD*	6,676	6,739		-		6,731	

All metrics above are consolidated for SVH except Operating Expense per APD

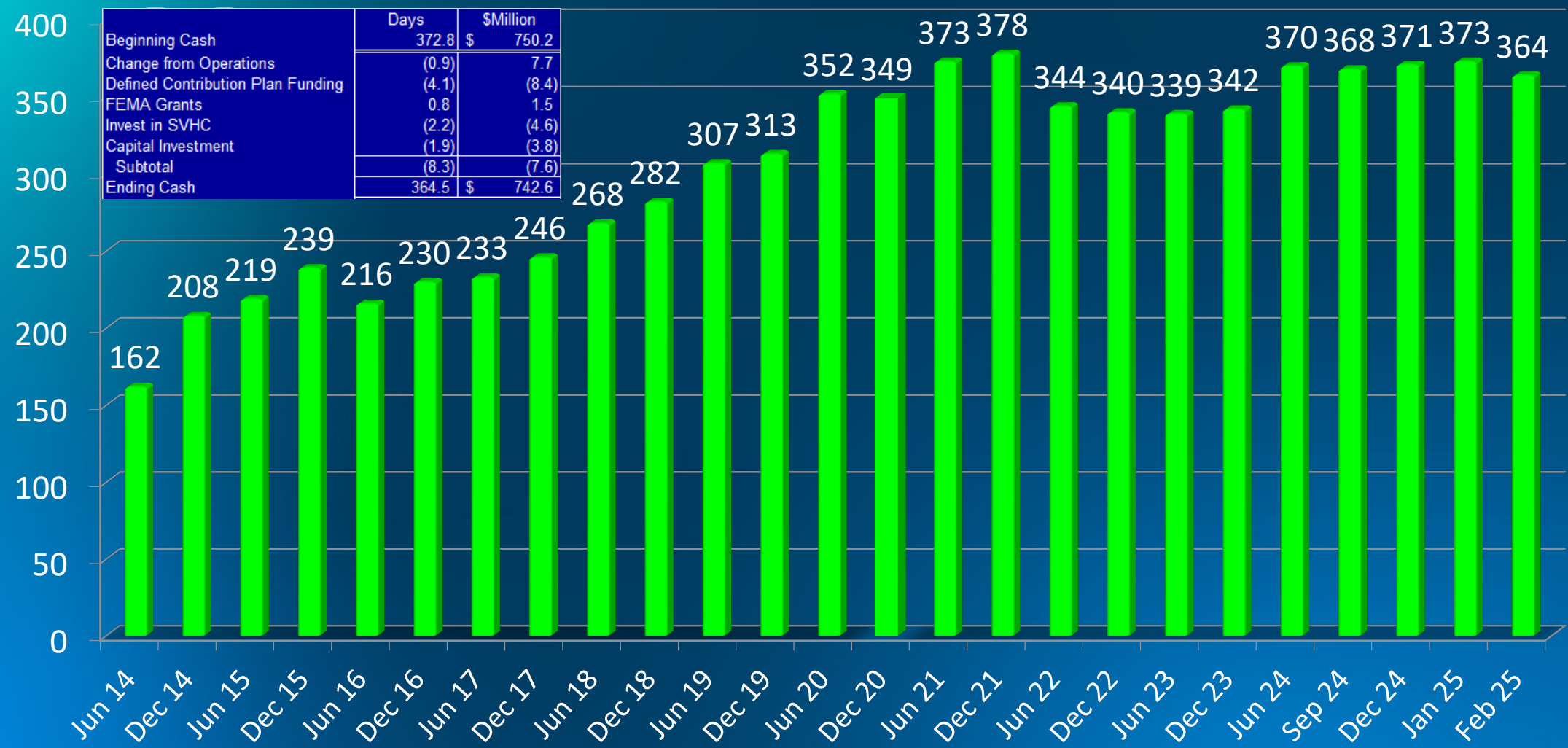
*These metrics have **not** been adjusted for normalizing items

**Metric based on Operating Income (consistent with industry standard)

***Metric based on 365 days average net revenue (consistent with industry standard)

Salinas Valley Health

Days Cash on Hand = 364 Days (\$743M) - February 2025

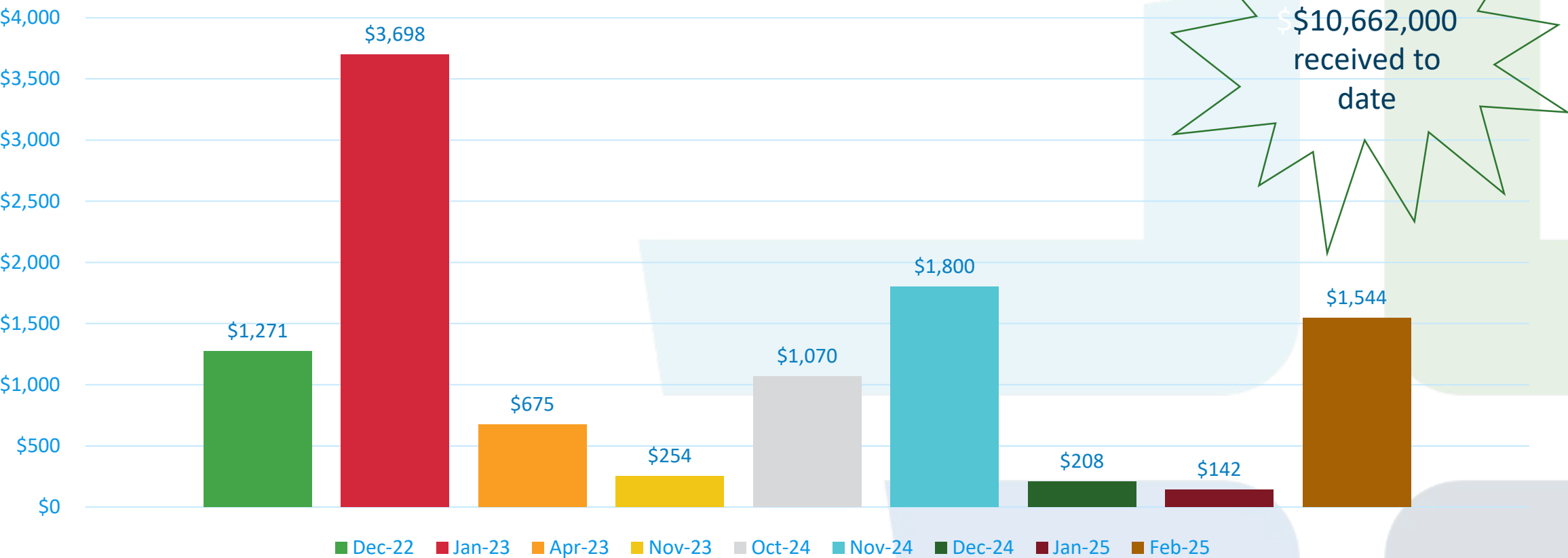


Routine Capital Expenditures Through February 2025

Fiscal Month	FY 2025 Approved Budget *	Total Purchased Expenditures	Remaining	Project	Amount
July	1,916,667	712,780	1,203,887	Nurse Call System	31,722
August	1,916,667	1,382,572	1,737,981	Nuclear Med D-Spect Camera	10,873
September	1,916,667	729,309	2,925,338	Angio Equipment Replacement	8,116
October	1,916,667	1,191,148	3,650,857	Cath Lab Equipment Replacement	9,308
November	1,916,667	794,889	4,772,635	Miscellaneous	11,038
December	1,916,667	1,381,451	5,307,851	Total Improvements	71,057
January	1,916,667	1,565,871	5,658,646	Laboratory-Vitek MS (Mass Spectrometry)	249,225
February	1,916,667	963,787	6,611,526	Maintenance, Admin and ED Furniture	167,603
March	1,916,667		8,528,193	Surgery Stryker Power Drill Set	149,457
April	1,916,667		10,444,859	Surgery Retractor System	96,976
May	1,916,667		12,361,526	Miscellaneous	229,471
June	1,916,667		14,278,193	Total Equipment	892,730
YTD TOTAL	23,000,000	8,721,808	14,278,193	Grand Total	963,787

FEMA Funds Received to Date (\$,000)

Total \$10,662,000 as of March 14, 2025



Questions/Comments

SALINAS VALLEY HEALTH MEDICAL CENTER
SUMMARY INCOME STATEMENT
February 28, 2025

	<u>Month of February,</u>		<u>Eight months ended February 28,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Operating revenue:				
Net patient revenue	\$ 54,516,711	\$ 51,203,565	\$ 453,254,455	\$ 402,589,544
Other operating revenue	<u>1,694,161</u>	<u>1,165,959</u>	<u>12,329,327</u>	<u>8,741,193</u>
Total operating revenue	<u>56,210,872</u>	<u>52,369,524</u>	<u>465,583,782</u>	<u>411,330,737</u>
Total operating expenses	50,742,628	47,158,694	401,823,202	382,673,348
Total non-operating income	<u>1,076,135</u>	<u>(5,076,526)</u>	<u>(13,871,022)</u>	<u>(11,894,106)</u>
Operating and non-operating income	<u>\$ 6,544,380</u>	<u>\$ 134,304</u>	<u>\$ 49,889,558</u>	<u>\$ 16,763,282</u>

SALINAS VALLEY HEALTH MEDICAL CENTER
BALANCE SHEETS
February 28, 2025

	<u>Current year</u>	<u>Prior year</u>
ASSETS:		
Current assets	\$ 428,751,376	\$ 351,193,614
Assets whose use is limited or restricted by board	172,635,520	164,215,685
Capital assets	257,042,931	249,951,875
Other assets	306,744,310	286,832,533
Deferred pension outflows	<u>85,734,219</u>	<u>116,911,125</u>
	<u>\$ 1,250,908,356</u>	<u>\$ 1,169,104,832</u>
LIABILITIES AND EQUITY:		
Current liabilities	94,679,340	91,968,801
Long term liabilities	20,803,488	20,638,874
Lease deferred inflows	1,023,943	1,616,220
Pension liability	90,863,576	118,792,064
Net assets	<u>1,043,538,009</u>	<u>936,088,872</u>
	<u>\$ 1,250,908,356</u>	<u>\$ 1,169,104,832</u>

SALINAS VALLEY HEALTH MEDICAL CENTER
SCHEDULES OF NET PATIENT REVENUE
February 28, 2025

	<u>Month of February,</u>		<u>Eight months ended February 28,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Patient days:				
By payer:				
Medicare	1,730	1,766	13,978	14,368
Medi-Cal	1,069	1,102	8,331	8,413
Commercial insurance	571	409	4,499	4,576
Other patient	108	38	930	821
Total patient days	<u>3,478</u>	<u>3,315</u>	<u>27,738</u>	<u>28,178</u>
Gross revenue:				
Medicare	\$ 128,243,309	\$ 119,729,091	\$ 1,008,862,430	\$ 905,779,116
Medi-Cal	82,778,197	74,556,691	645,258,201	557,562,508
Commercial insurance	56,782,245	47,886,002	464,669,241	417,279,578
Other patient	<u>10,785,176</u>	<u>7,451,292</u>	<u>86,883,237</u>	<u>71,011,282</u>
Gross revenue	<u>278,588,927</u>	<u>249,623,076</u>	<u>2,205,673,109</u>	<u>1,951,632,483</u>
Deductions from revenue:				
Administrative adjustment	121,892	283,914	2,485,144	2,513,879
Charity care	1,465,312	353,174	5,147,446	5,538,719
Contractual adjustments:				
Medicare outpatient	42,421,122	39,018,520	335,870,821	281,089,336
Medicare inpatient	51,797,958	48,184,519	387,464,602	375,545,528
Medi-Cal traditional outpatient	1,434,515	1,789,602	12,308,580	21,967,387
Medi-Cal traditional inpatient	4,763,009	4,897,607	39,573,349	38,029,780
Medi-Cal managed care outpatient	39,487,262	33,576,493	315,709,838	243,969,887
Medi-Cal managed care inpatient	29,567,261	26,646,831	209,407,799	201,180,676
Commercial insurance outpatient	26,107,623	21,391,288	212,531,551	174,394,469
Commercial insurance inpatient	20,786,028	17,829,397	175,907,775	161,393,693
Uncollectible accounts expense	5,499,453	4,350,530	43,865,877	33,909,165
Other payors	<u>620,781</u>	<u>97,636</u>	<u>12,145,872</u>	<u>9,510,420</u>
Deductions from revenue	<u>224,072,216</u>	<u>198,419,512</u>	<u>1,752,418,654</u>	<u>1,549,042,940</u>
Net patient revenue	<u>\$ 54,516,711</u>	<u>\$ 51,203,565</u>	<u>\$ 453,254,455</u>	<u>\$ 402,589,544</u>
Gross billed charges by patient type:				
Inpatient	\$ 133,648,250	\$ 120,101,071	\$ 1,036,328,078	\$ 992,014,802
Outpatient	115,163,534	100,349,331	915,498,459	725,267,074
Emergency room	<u>29,777,143</u>	<u>29,172,674</u>	<u>253,846,572</u>	<u>234,350,607</u>
Total	<u>\$ 278,588,927</u>	<u>\$ 249,623,076</u>	<u>\$ 2,205,673,109</u>	<u>\$ 1,951,632,483</u>

SALINAS VALLEY HEALTH MEDICAL CENTER
STATEMENTS OF REVENUE AND EXPENSES
February 28, 2025

	<u>Month of February,</u>		<u>Eight months ended February 28,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Operating revenue:				
Net patient revenue	\$ 54,516,711	\$ 51,203,565	\$ 453,254,455	\$ 402,589,544
Other operating revenue	<u>1,694,161</u>	<u>1,165,959</u>	<u>12,329,327</u>	<u>8,741,193</u>
Total operating revenue	<u>56,210,872</u>	<u>52,369,524</u>	<u>465,583,782</u>	<u>411,330,737</u>
Operating expenses:				
Salaries and wages	17,652,762	15,832,796	140,817,792	132,969,018
Compensated absences	2,954,067	2,754,652	25,243,808	23,918,846
Employee benefits	8,567,240	9,170,977	64,736,813	67,930,024
Supplies, food, and linen	8,966,955	7,328,460	69,239,354	57,804,224
Purchased department functions	3,730,508	3,168,633	30,784,758	28,850,148
Medical fees	2,942,924	2,510,986	20,729,844	19,909,093
Other fees	1,523,983	2,060,984	15,020,769	18,283,364
Depreciation	2,694,386	2,387,765	20,589,344	19,163,609
All other expense	1,709,803	1,943,441	14,660,720	13,845,022
Total operating expenses	<u>50,742,628</u>	<u>47,158,694</u>	<u>401,823,202</u>	<u>382,673,348</u>
Income from operations	<u>5,468,244</u>	<u>5,210,830</u>	<u>63,760,580</u>	<u>28,657,389</u>
Non-operating income:				
Donations	1,270,081	0	5,515,323	2,333,567
Property taxes	476,714	333,333	3,813,715	2,666,667
Investment income	3,985,637	15,606	13,928,137	19,989,251
Taxes and licenses	0	0	0	0
Income from subsidiaries	<u>(4,656,297)</u>	<u>(5,425,465)</u>	<u>(37,128,197)</u>	<u>(36,883,591)</u>
Total non-operating income	<u>1,076,135</u>	<u>(5,076,526)</u>	<u>(13,871,022)</u>	<u>(11,894,106)</u>
Operating and non-operating income	6,544,380	134,304	49,889,558	16,763,282
Net assets to begin	<u>1,036,993,629</u>	<u>935,954,568</u>	<u>993,648,450</u>	<u>919,325,590</u>
Net assets to end	<u>\$ 1,043,538,009</u>	<u>\$ 936,088,872</u>	<u>\$ 1,043,538,009</u>	<u>\$ 936,088,872</u>
Net income excluding non-recurring items	\$ 6,544,380	\$ 134,304	\$ 49,889,558	\$ 16,763,282
Non-recurring income (expense) from cost report settlements and re-openings and other non-recurring items	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Operating and non-operating income	<u>\$ 6,544,380</u>	<u>\$ 134,304</u>	<u>\$ 49,889,558</u>	<u>\$ 16,763,282</u>

SALINAS VALLEY HEALTH MEDICAL CENTER
SCHEDULES OF INVESTMENT INCOME
February 28, 2025

	<u>Month of February,</u>		<u>Eight months ended February 28,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Detail of income from subsidiaries:				
Salinas Valley Health Clinics				
Pulmonary Medicine Center	\$ (195,442)	\$ (200,426)	\$ (1,645,887)	\$ (1,623,660)
Neurological Clinic	(75,500)	(62,439)	(541,693)	(581,097)
Palliative Care Clinic	(110,775)	(96,434)	(743,084)	(711,893)
Surgery Clinic	(62,010)	(180,392)	(1,188,001)	(1,478,113)
Infectious Disease Clinic	(51,795)	(48,474)	(370,104)	(301,486)
Endocrinology Clinic	(228,483)	(260,673)	(1,823,988)	(1,865,536)
Early Discharge Clinic	0	0	0	0
Cardiology Clinic	(712,712)	(674,109)	(4,741,830)	(4,730,434)
OB/GYN Clinic	(380,869)	(561,826)	(3,335,715)	(3,309,726)
PrimeCare Medical Group	(776,651)	(965,779)	(6,357,736)	(7,026,706)
Oncology Clinic	(484,301)	(415,138)	(3,226,327)	(2,713,947)
Cardiac Surgery	(386,363)	(383,426)	(2,752,843)	(2,477,945)
Sleep Center	(87,831)	(88,613)	(700,715)	(432,257)
Rheumatology	(72,392)	(87,897)	(600,036)	(580,444)
Precision Ortho MDs	(567,426)	(530,556)	(3,676,417)	(3,881,821)
Precision Ortho-MRI	0	0	0	0
Precision Ortho-PT	(94,592)	(65,157)	(610,805)	(378,799)
Vaccine Clinic	0	0	0	16
Dermatology	(35,122)	(38,272)	(332,556)	(325,157)
Hospitalists	0	0	0	0
Behavioral Health	(33,535)	(84,335)	(312,995)	(398,834)
Pediatric Diabetes	(36,506)	(46,863)	(318,750)	(368,411)
Neurosurgery	(138,556)	(84,279)	(964,188)	(325,643)
Multi-Specialty-RR	17,158	1,385	91,252	21,251
Radiology	(264,511)	(386,300)	(2,571,764)	(2,630,147)
Salinas Family Practice	(125,704)	(152,751)	(898,752)	(1,118,913)
Urology	(134,517)	(176,095)	(1,485,862)	(1,382,222)
Total SVHC	(5,038,435)	(5,588,849)	(39,108,796)	(38,621,924)
Doctors on Duty	214,582	(45,956)	153,908	325,865
LPCH NICU JV	0	0	0	0
Central Coast Health Connect	0	0	0	0
Monterey Peninsula Surgery Center	162,118	99,780	1,304,219	1,049,041
Coastal	22,912	29,073	(55,274)	47,409
Apex	0	0	0	0
21st Century Oncology	(11,972)	50,331	169,152	3,223
Monterey Bay Endoscopy Center	(5,503)	30,156	408,595	312,795
Total	<u>\$ (4,656,297)</u>	<u>\$ (5,425,465)</u>	<u>\$ (37,128,197)</u>	<u>\$ (36,883,591)</u>

SALINAS VALLEY HEALTH MEDICAL CENTER
BALANCE SHEETS
February 28, 2025

	<u>Current year</u>	<u>Prior year</u>
A S S E T S		
Current assets:		
Cash and cash equivalents	\$ 274,334,444	\$ 221,537,903
Patient accounts receivable, net of estimated uncollectibles of \$84,355,959	128,401,204	102,081,358
Supplies inventory at cost	8,867,838	7,718,586
Current portion of lease receivable	845,963	1,131,104
Other current assets	<u>16,301,928</u>	<u>18,724,663</u>
Total current assets	<u>428,751,376</u>	<u>351,193,614</u>
Assets whose use is limited or restricted by board	<u>172,635,520</u>	<u>164,215,685</u>
Capital assets:		
Land and construction in process	46,953,903	75,825,405
Other capital assets, net of depreciation	<u>210,089,028</u>	<u>174,126,470</u>
Total capital assets	<u>257,042,931</u>	<u>249,951,875</u>
Other assets:		
Right of use assets, net of amortization	8,155,239	6,714,217
Long term lease receivable	214,212	608,766
Subscription assets, net of amortization	8,805,987	7,722,471
Investment in Securities	266,953,469	252,399,372
Investment in SVMC	941,628	13,970,071
Investment in Coastal	1,697,096	1,729,050
Investment in other affiliates	21,533,050	12,325,698
Net pension asset	<u>(1,556,371)</u>	<u>(8,637,112)</u>
Total other assets	<u>306,744,310</u>	<u>286,832,533</u>
Deferred pension outflows	<u>85,734,219</u>	<u>116,911,125</u>
	<u>\$ 1,250,908,356</u>	<u>\$ 1,169,104,832</u>
L I A B I L I T I E S A N D N E T A S S E T S		
Current liabilities:		
Accounts payable and accrued expenses	\$ 61,322,090	\$ 62,009,649
Due to third party payers	4,542,353	4,336,365
Current portion of self-insurance liability	22,984,197	18,839,225
Current subscription liability	3,014,765	4,299,728
Current portion of lease liability	<u>2,815,935</u>	<u>2,483,835</u>
Total current liabilities	94,679,340	91,968,801
Long term portion of workers comp liability	12,078,720	13,027,333
Long term portion of lease liability	5,331,788	4,449,212
Long term subscription liability	<u>3,392,980</u>	<u>3,162,329</u>
Total liabilities	<u>115,482,828</u>	<u>112,607,676</u>
Lease deferred inflows	1,023,943	1,616,220
Pension liability	<u>90,863,576</u>	<u>118,792,064</u>
Net assets:		
Invested in capital assets, net of related debt	257,042,931	249,951,875
Unrestricted	<u>786,495,078</u>	<u>686,136,997</u>
Total net assets	<u>1,043,538,009</u>	<u>936,088,872</u>
	<u>\$ 1,250,908,356</u>	<u>\$ 1,169,104,832</u>

SALINAS VALLEY HEALTH MEDICAL CENTER
STATEMENTS OF REVENUE AND EXPENSES - BUDGET VS. ACTUAL
February 28, 2025

	Month of February,			Eight months ended February 28,			
	Actual	Variance	% Var	Actual	Budget	Variance	% Var
Operating revenue:							
Gross billed charges	\$ 278,588,927	\$ 38,664,928	16.12%	\$ 2,205,673,109	\$ 2,036,457,092	169,216,017	8.31%
Deductions from revenue	224,072,216	32,152,613	16.75%	1,752,418,654	1,631,644,522	120,774,132	7.40%
Net patient revenue	54,516,711	6,512,316	13.57%	453,254,455	404,812,569	48,441,886	11.97%
Other operating revenue	1,694,161	241,492	16.62%	12,329,327	11,621,352	707,975	6.09%
Total operating revenue	56,210,872	6,753,808	13.66%	465,583,782	416,433,921	49,149,861	11.80%
Operating expenses:							
Salaries and wages	17,652,762	1,068,838	6.45%	140,817,792	136,641,507	4,176,285	3.06%
Compensated absences	2,954,067	709,217	31.59%	25,243,808	26,088,064	(844,256)	-3.24%
Employee benefits	8,567,240	812,694	10.48%	64,736,813	63,306,664	1,430,149	2.26%
Supplies, food, and linen	8,966,955	2,370,384	35.93%	69,239,354	57,240,319	11,999,035	20.96%
Purchased department functions	3,730,508	(94,771)	-2.48%	30,784,758	30,602,262	182,496	0.60%
Medical fees	2,942,924	457,287	18.40%	20,729,844	19,885,098	844,746	4.25%
Other fees	1,523,983	(130,261)	-7.87%	15,020,769	13,881,120	1,139,649	8.21%
Depreciation	2,694,386	155,497	6.12%	20,589,344	19,188,846	1,400,498	7.30%
All other expense	1,709,803	(166,078)	-8.85%	14,660,720	15,777,548	(1,116,828)	-7.08%
Total operating expenses	50,742,628	5,182,806	11.38%	401,823,202	382,611,427	19,211,775	5.02%
Income from operations	5,468,244	1,571,002	40.31%	63,760,580	33,822,494	29,938,086	88.52%
Non-operating income:							
Donations	1,270,081	1,061,748	509.64%	5,515,323	1,666,667	3,848,656	230.92%
Property taxes	476,714	(0)	0.00%	3,813,715	3,813,715	0	0.00%
Investment income	3,985,637	2,094,464	110.75%	13,928,137	15,129,385	(1,201,248)	-7.94%
Income from subsidiaries	(4,656,297)	466,925	-9.11%	(37,128,197)	(40,985,777)	3,857,580	-9.41%
Total non-operating income	1,076,135	3,623,136	-142.25%	(13,871,022)	(20,376,010)	6,504,988	-31.92%
Operating and non-operating income	\$ 6,544,379	\$ 5,194,138	384.68%	\$ 49,889,558	\$ 13,446,484	36,443,074	271.02%

SALINAS VALLEY HEALTH MEDICAL CENTER

PATIENT STATISTICAL REPORT

For the month of February and eight months to date

	Month of February		Eight months to date		Variance
	2024	2025	2023-24	2024-25	
NEWBORN STATISTICS					
Medi-Cal Admissions	33	39	278	288	10
Other Admissions	71	89	643	673	30
Total Admissions	104	128	921	961	40
Medi-Cal Patient Days	52	66	445	542	97
Other Patient Days	111	141	1,065	998	(67)
Total Patient Days of Care	163	207	1,510	1,540	30
Average Daily Census	5.8	7.4	6.2	6.3	0.1
Medi-Cal Average Days	1.6	1.8	1.7	2.1	0.4
Other Average Days	0.8	1.5	1.7	1.5	(0.2)
Total Average Days Stay	1.6	1.6	1.7	1.7	(0.0)
ADULTS & PEDIATRICS					
Medicare Admissions	354	404	3,001	3,086	85
Medi-Cal Admissions	296	281	2,114	2,286	172
Other Admissions	349	300	2,353	2,525	172
Total Admissions	999	985	7,468	7,897	429
Medicare Patient Days	1,490	1,474	12,223	11,612	(611)
Medi-Cal Patient Days	1,090	1,106	8,610	8,804	194
Other Patient Days	771	745	7,404	6,119	(1,285)
Total Patient Days of Care	3,351	3,325	28,237	26,535	(1,702)
Average Daily Census	119.7	118.8	116.2	109.2	(7.0)
Medicare Average Length of Stay	4.3	3.8	4.1	3.8	(0.3)
Medi-Cal AverageLength of Stay	3.6	3.3	3.5	3.4	(0.2)
Other Average Length of Stay	2.3	1.9	2.5	1.9	(0.6)
Total Average Length of Stay	3.4	3.0	3.4	3.0	(0.4)
Deaths	20	26	205	213	8
Total Patient Days	3,514	3,532	29,747	28,075	(1,672)
Medi-Cal Administrative Days	0	0	5	0	(5)
Medicare SNF Days	0	0	0	0	0
Over-Utilization Days	0	0	0	0	0
Total Non-Acute Days	0	0	5	0	(5)
Percent Non-Acute	0.00%	0.00%	0.02%	0.00%	-0.02%

SALINAS VALLEY HEALTH MEDICAL CENTER
PATIENT STATISTICAL REPORT
For the month of February and eight months to date

	Month of February		Eight months to date		Variance
	2024	2025	2023-24	2024-25	
<u>PATIENT DAYS BY LOCATION</u>					
Level I	214	292	1,950	1,990	40
Heart Center	317	292	2,621	2,585	(36)
Monitored Beds	594	575	4,947	4,541	(406)
Single Room Maternity/Obstetrics	267	360	2,457	2,815	358
Med/Surg - Cardiovascular	829	839	6,655	6,949	294
Med/Surg - Oncology	264	261	2,229	2,144	(85)
Med/Surg - Rehab	423	453	3,674	3,698	24
Pediatrics	114	119	1,058	959	(99)
Nursery	163	207	1,510	1,540	30
Neonatal Intensive Care	48	134	922	854	(68)
<u>PERCENTAGE OF OCCUPANCY</u>					
Level I	56.76%	80.22%	61.48%	62.74%	
Heart Center	72.87%	69.52%	71.61%	70.63%	
Monitored Beds	75.86%	76.06%	75.09%	68.93%	
Single Room Maternity/Obstetrics	24.88%	34.75%	27.22%	31.18%	
Med/Surg - Cardiovascular	63.52%	66.59%	60.61%	63.29%	
Med/Surg - Oncology	70.03%	71.70%	70.27%	67.59%	
Med/Surg - Rehab	56.10%	62.23%	57.91%	58.29%	
Med/Surg - Observation Care Unit	0.00%	0.00%	0.00%	0.00%	
Pediatrics	21.84%	23.61%	24.09%	21.84%	
Nursery	34.06%	44.81%	18.75%	19.13%	
Neonatal Intensive Care	15.05%	43.51%	34.35%	31.82%	

SALINAS VALLEY HEALTH MEDICAL CENTER
PATIENT STATISTICAL REPORT
For the month of February and eight months to date

	<u>Month of February</u>		<u>Eight months to date</u>		
	<u>2024</u>	<u>2025</u>	<u>2023-24</u>	<u>2024-25</u>	<u>Variance</u>
<u>DELIVERY ROOM</u>					
Total deliveries	100	136	853	958	105
C-Section deliveries	24	45	273	304	31
Percent of C-section deliveries	24.00%	33.09%	32.00%	31.73%	-0.27%
<u>OPERATING ROOM</u>					
In-Patient Operating Minutes	12,783	16,604	125,698	144,050	18,352
Out-Patient Operating Minutes	29,168	32,427	233,891	275,963	42,072
Total	41,951	49,031	359,589	420,013	60,424
Open Heart Surgeries	6	9	86	91	5
In-Patient Cases	96	108	905	941	36
Out-Patient Cases	278	296	2,314	2,596	282
<u>EMERGENCY ROOM</u>					
Immediate Life Saving	44	42	288	268	(20)
High Risk	811	826	6,015	6,840	825
More Than One Resource	2,445	2,703	22,253	22,439	186
One Resource	1,624	1,782	15,158	14,298	(860)
No Resources	51	40	699	572	(127)
Total	<u>4,975</u>	<u>5,393</u>	<u>44,413</u>	<u>44,417</u>	<u>4</u>

SALINAS VALLEY HEALTH MEDICAL CENTER

PATIENT STATISTICAL REPORT

For the month of February and eight months to date

	Month of February		Eight months to date		
	2024	2025	2023-24	2024-25	Variance
CENTRAL SUPPLY					
In-patient requisitions	11,388	11,125	103,405	98,409	-4,996
Out-patient requisitions	10,467	10,123	82,498	86,549	4,051
Emergency room requisitions	648	430	5,780	4,635	-1,145
Interdepartmental requisitions	6,270	7,102	52,749	54,871	2,122
Total requisitions	28,773	28,780	244,432	244,464	32
LABORATORY					
In-patient procedures	33,969	35,774	292,671	284,764	-7,907
Out-patient procedures	39,448	43,813	207,188	350,997	143,809
Emergency room procedures	12,208	12,246	103,021	100,267	-2,754
Total patient procedures	85,625	91,833	602,880	736,028	133,148
BLOOD BANK					
Units processed	230	230	2,333	2,230	-103
ELECTROCARDIOLOGY					
In-patient procedures	1,103	1,125	8,788	8,947	159
Out-patient procedures	382	510	3,142	3,411	269
Emergency room procedures	1,297	1,310	9,740	10,297	557
Total procedures	2,782	2,945	21,670	22,655	985
CATH LAB					
In-patient procedures	132	122	973	1,053	80
Out-patient procedures	140	125	946	976	30
Emergency room procedures	0	0	0	1	1
Total procedures	272	247	1,919	2,030	111
ECHO-CARDIOLOGY					
In-patient studies	366	387	3,032	3,158	126
Out-patient studies	305	300	2,242	2,642	400
Emergency room studies	1	1	8	13	5
Total studies	672	688	5,282	5,813	531
NEURODIAGNOSTIC					
In-patient procedures	116	159	1,026	1,112	86
Out-patient procedures	23	18	151	196	45
Emergency room procedures	0	0	0	1	1
Total procedures	139	177	1,177	1,309	132

SALINAS VALLEY HEALTH MEDICAL CENTER

PATIENT STATISTICAL REPORT

For the month of February and eight months to date

	Month of February		Eight months to date		
	2024	2025	2023-24	2024-25	Variance
SLEEP CENTER					
In-patient procedures	0	0	0	0	0
Out-patient procedures	244	302	1,882	2,247	365
Emergency room procedures	0	0	0	0	0
Total procedures	244	302	1,882	2,247	365
RADIOLOGY					
In-patient procedures	1,218	1,325	10,486	10,415	-71
Out-patient procedures	428	461	3,209	3,509	300
Emergency room procedures	1,419	1,483	11,819	12,525	706
Total patient procedures	3,065	3,269	25,514	26,449	935
MAGNETIC RESONANCE IMAGING					
In-patient procedures	139	134	1,121	1,409	288
Out-patient procedures	99	123	895	859	-36
Emergency room procedures	1	5	50	50	0
Total procedures	239	262	2,066	2,318	252
MAMMOGRAPHY CENTER					
In-patient procedures	3,665	4,254	32,661	29,548	-3,113
Out-patient procedures	3,617	4,235	32,268	29,452	-2,816
Emergency room procedures	0	0	9	9	0
Total procedures	7,282	8,489	64,938	59,009	-5,929
NUCLEAR MEDICINE					
In-patient procedures	24	11	163	127	-36
Out-patient procedures	147	148	891	1,056	165
Emergency room procedures	0	0	2	2	0
Total procedures	171	159	1,056	1,185	129
PHARMACY					
In-patient prescriptions	78,997	77,810	674,873	636,533	-38,340
Out-patient prescriptions	15,685	16,407	125,734	133,526	7,792
Emergency room prescriptions	9,066	9,482	73,911	79,063	5,152
Total prescriptions	103,748	103,699	874,518	849,122	-25,396
RESPIRATORY THERAPY					
In-patient treatments	13,289	15,859	129,802	120,540	-9,262
Out-patient treatments	1,159	1,547	8,751	7,619	-1,132
Emergency room treatments	493	614	4,080	4,376	296
Total patient treatments	14,941	18,020	142,633	132,535	-10,098
PHYSICAL THERAPY					
In-patient treatments	2,186	2,289	19,868	18,504	-1,364
Out-patient treatments	297	326	2,139	2,068	-71
Emergency room treatments	0	0	0	0	0
Total treatments	2,483	2,615	22,007	20,572	-1,435

SALINAS VALLEY HEALTH MEDICAL CENTER

PATIENT STATISTICAL REPORT

For the month of February and eight months to date

	Month of February		Eight months to date		
	2024	2025	2023-24	2024-25	Variance
OCCUPATIONAL THERAPY					
In-patient procedures	1,420	1,610	11,403	11,651	248
Out-patient procedures	262	262	1,949	1,707	-242
Emergency room procedures	0	0	0	0	0
Total procedures	1,682	1,872	13,352	13,358	6
SPEECH THERAPY					
In-patient treatments	508	483	4,090	4,224	134
Out-patient treatments	46	59	318	304	-14
Emergency room treatments	0	0	0	0	0
Total treatments	554	542	4,408	4,528	120
CARDIAC REHABILITATION					
In-patient treatments	1	2	11	6	-5
Out-patient treatments	581	531	4,118	4,798	680
Emergency room treatments	0	0	0	1	1
Total treatments	582	533	4,129	4,805	676
CRITICAL DECISION UNIT					
Observation hours	319	199	2,540	1,985	-555
ENDOSCOPY					
In-patient procedures	83	89	605	658	53
Out-patient procedures	47	45	444	450	6
Emergency room procedures	0	0	0	2	2
Total procedures	130	134	1,049	1,110	61
C.T. SCAN					
In-patient procedures	702	741	5,739	6,045	306
Out-patient procedures	325	511	2,811	3,994	1,183
Emergency room procedures	684	665	5,797	5,848	51
Total procedures	1,711	1,917	14,347	15,887	1,540
DIETARY					
Routine patient diets	20,648	14,417	138,745	125,684	-13,061
Meals to personnel	26,488	30,048	225,902	280,075	54,173
Total diets and meals	47,136	44,465	364,647	405,759	41,112
LAUNDRY AND LINEN					
Total pounds laundered	91,546	94,732	774,597	781,868	7,271

CLOSED SESSION

*(Report on Items to be
Discussed in Closed Session)*

*RECONVENE OPEN SESSION/
CLOSED SESSION REPORT*











(Meeting Chair)

Balanced Scorecard

FY 2025 YTD January

Monthly Scorecard

Service (30%)

Organizational Goals by Pillar							Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %		FY 2024 Baseline		
I. Service																				
Inpatient - Recommend the Hospital							77.6	75.4	77.3	79.7	77.0	76.0	76.3	77.0	78.5	-1.9%		78.0		
Emergency Room - Likelihood of Recommending							66.9	69.2	70.9	65.6	59.7	65.6	64.1	66.0	62.3	5.9%		61.8		
Ambulatory - Recommend the Hospital							80.0	85.4	79.8	81.3	79.4	82.6	87.9	82.4	86.4	-4.7%		85.4		
Outpatient - Likelihood of Recommending							89.1	87.4	88.6	87.0	89.1	88.1	87.9	88.2	89.4	-1.4%		88.4		

Notes / Assumptions:

- Source: Press Ganey
- Based on monthly **received date**
- Based on top box scores (highest response possible on the survey scale: Yes, Definitely Yes, Always)
- Inpatient Score FY 2024 Baseline was 78.0. **Rationale:** Threshold = Baseline. Target is +0.5 from baseline. Max is +1.0 from baseline.
- ER Score FY 2024 Baseline was 61.8. **Rationale:** Threshold = Baseline. Target is +0.5 from baseline. Max is +1.0 from baseline.
- Ambulatory Score FY 2024 Baseline was 85.4. **Rationale:** Threshold +0.5 from Baseline. Target is +1.0 from baseline. Max is +1.5 from baseline.
- Outpatient Score FY 2024 Baseline was 88.4. **Rationale:** Threshold +0.5 from Baseline. Target is +1.0 from baseline. Max is +1.5 from baseline.

Monthly Scorecard

People (15%)

Organizational Goals by Pillar	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %	FY 2024 Baseline
II. People											
Employee Engagement Indicator Score	N/A	N/A	N/A	N/A	N/A	N/A	N/A	-	4.25		4.18
Safety Culture Index: Prevention and Reporting	N/A	N/A	N/A	N/A	N/A	N/A	N/A	-	4.14		4.07
Safety Culture Index: Resources and Teamwork	N/A	N/A	N/A	N/A	N/A	N/A	N/A	-	3.81		3.76





The Employee Engagement survey is currently being scheduled in May with results available in July.

Notes / Assumptions:

- Source: Press Ganey
- Employee Engagement Survey results are expected to be available on or before July 31, 2025
- Achieve Employee Engagement Indicator score in the range of 4.20 to 4.27 as measured by the 2025 Employee Engagement Survey.
- Achieve Prevention and Reporting score in the range of 4.07 to 4.18 as measured by the 2025 Employee Engagement Survey, Safety Culture Index.
- Achieve Resources and Teamwork score in the range of 3.76 to 3.84 as measured by the 2025 Employee Engagement Survey, Safety Culture Index.

Monthly Scorecard

Quality & Safety Processes – ER (5%)

Organizational Goals by Pillar	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %		FY 2024 Baseline
III. Quality & Safety Processes												
Emergency Room Efficiencies												
Median length of stay for non-admits (in minutes)	181.0	179.0	177.0	178.0	178.0	182.0	184.0	180.0	181.0	0.6%		181.0 
Median time from admit decision to time of admission to nursing unit (in minutes)	71.0	68.0	72.0	65.0	67.0	69.0	65.0	68.0	74.0	8.1%		74.0 

Source: Meditech

ER - LOS for Non-Admits in Minutes: Data Criteria: Calculate the median LOS in minutes for ER Outpatients for each month & YTD for cases in ER (excludes inpatients and patients leaving against medical advice or left without being seen.) Baseline = Target is based on FY 2024 Actuals. The Threshold & Maximum are 2 minute increments from the Target. **Rationale:** SVHMC ER has recently experienced a higher volume level, including a surge of patients and provider turnover. According to CMS, the latest available data from 2021 indicates that the State Rate is 196 minutes and the National Rate is 203 minutes for comparable size hospitals. The implementation of new ED modular will necessitate new patient flow process which could impact wait times / efficiency (Estimated to start October 2024).

ER - Time to Admit in Minutes: Data Criteria: Calculate the median time for inpatients from admit decision to time of admission to nursing unit in minutes (includes observation cases). Baseline = Target is based on FY 2024 Actuals. The Threshold & Maximum are 2 minute increments from the Target.

Rationale: The ER average daily census is currently averaging at about 186 patients a day compared to the baseline period of 128 (Jul21-Jan22), or a **45%** increase in ER census. We also have continued challenges with COVID and respiratory isolation. The vast increase of volume leads to limited space availability and delays. We have put forth a new initiative called the “Big 5 Handover Process”, which is a streamline handover process between the ED and nursing units, which may reduce admit time. The implementation of new ED modular will necessitate new patient flow process which could impact wait times / efficiency (Estimated to start October 2024).

Monthly Scorecard

Quality & Safety Processes – OR & Cath Lab (5%)

Organizational Goals by Pillar	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %	FY 2024 Baseline
III. Quality & Safety Processes											
Operating Room Efficiencies											
Turnover Time (Wheels out / Wheels in) (in minutes)	30.8	30.5	33.9	34.6	32.3	31.1	32.1	32.2	30.5	-5.5%	30.8
Cath Lab Efficiencies											
First Case - On Time Start %	86.1%	81.6%	75.0%	85.4%	83.8%	87.8%	94.3%	84.8%	85.0%	-0.2%	80.4%

Pillar Champion: Aisha Huebner (OR) & Megan Giovanetti (Cath Lab)





OR Turnover Time Measurement: Source is from the **PICIS OR Nurse Record**. Calculate minutes elapsed between the wheels out & wheels in of the next case. Only cases where the time difference is less than or equal to 60 minutes will be included because breaks are often scheduled in a day. Due to MD availability, cases that exceed 60 threshold minutes will not count as a turnover. Excludes non-scheduled cases. Measurement applies to cases for the same physician and same room only. Data will be partitioned by actual date rather than previously scheduled date. **National benchmarks range from 25 to 38 minutes.** FY 2025 Goals are set at a level to continue high efficiency performance and strive to maintain sustainability at these levels as the result of upcoming changes during FY 2025: An additional 7th operating room is expected to open during September & 3 new surgeons hired during FY 2025, which means there will be more complex cases specifically for robotic & neurosurgery cases that require a longer setup and cleanup time for the room.

Cath Lab Percentage of 1st case On Time Start Time

- > Source is from Meditech Community Wide Scheduling for the first case scheduled in each Cath Lab, where the scheduled time is from 7:00 am to 9:00 am
- > Conscious sedation patients prepped and draped 5 minutes before the scheduled start time as measured by “Patient Ready” note charted in McKesson/CPACS
- > Anesthesia patients prepped and draped within 60 minutes of scheduled start time as measured by “Patient Ready” note charted in McKesson/CPACS

Monthly Scorecard

Quality & Safety Processes – HAC & Hand Hygiene (10%)

Organizational Goals by Pillar	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %		FY 2024 Baseline	
III. Quality & Safety Processes													
Hospital Acquired Conditions Index (Weighted Total)	N/A	N/A	0.86	N/A	N/A	0.80	N/A	0.83	0.77	-8.1%		0.77	
Hand Hygiene (Average Number of Observations Per Quarter Per Nursing Unit)	N/A	N/A	251	N/A	N/A	218	N/A	235	220	6.6%		216	

Hospital Acquired Conditions

Source: National Healthcare Safety Network (NHSN) & BD Health Insight Interface
 Hospital Acquired Conditions will be measured **quarterly**

Rationale for Targets: The Threshold = FY 2024 Baseline; Max = FY 2023 Baseline; Target is the midpoint. Utilizing CMS/NHSN/Magnet benchmarks and last year’s FY targets for sustainment and ongoing prevention practices. Process improvement measures for Falls, HAPIs, CLABSI, CAUTI, CDI, and SSI processes are in place. With the changes in the data methodology in FY 2024, especially with CLABSI, CAUTI, CDI & SSI, we are continuing to create consistency by re-baselining the data for FY 2025 and utilizing comparison data outcomes from FY 2023 and FY 2024.

- **Falls with injury:** NDNQI Magnet benchmark 0.5- our outcomes in FY2022 and FY2023 are meeting the benchmarks
- **HAPI—stage 2 and Deep tissue injuries are added to the CMS measures already reported (currently, stage 3,4 and unstageable events are reported)—the goal expanded. There is no current benchmark. We have already improved the outcomes in FY 2023 over FY 2021—**we are proposing to keep/sustain the current outcomes. Displayed as a rate: number of pressure injuries /over 1000 patient days.
- **CLABSI** (Central Line-Associated Bloodstream Infection), Health & Human Services 2020 Goal for CLABSI: SIR <0.50. An HAI Event can create increases above the benchmark SIR due to low utilization. Example: FY Q2 2021 1 CLABSI increased the SIR to 0.63. We will utilize a rate methodology: number of infections/ over 1000 line days. This rate is not risk-adjusted like the SIR rate is, but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data. This is important for rapid continuous improvement work.
- **CAUTI** (Catheter Associated Urinary Tract Infection) Health & Human Services 2020 Goal for CAUTI: SIR <0.75. An HAI Event(s) can create increases above the benchmark SIR due to low utilization. Example: FY Q4 2022 1 CAUTI increased the SIR to 0.72 .We will utilize a rate methodology: number of infections/ over 1000 line days. This rate is not risk adjusted like the SIR rate is but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data.
- **CDI** (Clostridium Difficile Infection), Health & Human Services 2020 Goal for CDI: SIR <0.70. We will utilize a rate methodology: number of infections/ over 1000 patient days. This rate is not risk adjusted like the SIR rate is but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data.
- **SSI** (Surgical Site Infections), Health and Human Services 2020 Goal for SSI <0.70. We will utilize a rate methodology: number of infections/ over 1000 procedure days. This rate is not risk adjusted like the SIR rate is but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data.

Hand Hygiene

Source: Hand Hygiene Auditing Tool populated by SVHMC staff. The threshold = baseline, the target is +4 & Maximum is +14 from baseline.

Monthly Scorecard

Finance (20%)

Organizational Goals by Pillar	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %	FY 2024 Baseline
IV. Finance											
SVHMC Income from Operations (Normalized & Adjusted) (\$ in Millions)	\$4,729	\$7,311	\$7,978	\$9,050	\$6,954	\$8,792	\$8,839	\$91,976	\$50,803	81.0%	\$74,413
Operating Margin (Normalized)	9.2%	12.4%	13.7%	14.8%	12.8%	14.9%	14.5%	13.3%	8.1%	64.5%	11.3%

- Target Methodology is based on SVHMC’s 100% of FY 2025 Board Approved Annual Operating Budget (in dollars).

Monthly Scorecard

Growth (10%)

New Oncology clinical trials opened: 1
(NCI Cancer Moonshot Biobank Study)



Organizational Goals by Pillar										FY 2024 Baseline	
V. Growth											
Increase the scope of the Community Oncology Research Program by adding one to two New Clinical Trials											
Expand / Add one to two New Comprehensive Cancer Program Outpatient Supportive Services											
Initiation of Familial Genetic Testing for non-breast cancers											
Implementation of External TeleHealth Services in the SVH Clinic System & Average Monthly Visits during FY25Q4											
Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %		
-	-	-	-	-	1	-	1	1	0.0%		
-	-	-	-	-	-	-	0	1	-100.0%		
-	-	-	-	-	-	-	0	1	-100.0%		
-	-	-	-	-	-	-	0	25	-100.0%		

Pillar Champion: Lilia Meraz Gottfried

- **Increase the scope of the Community Oncology Research Program by adding 1-2 Clinical Trials:** Success measured by the number of new active Clinical Trial Agreements (CTA's) for IRB-approved oncology research protocols. Expanding the number clinical trials aligns with the Comprehensive Cancer Program's mission to advance oncology research and improve outcomes and health equity within the community. **There is no Threshold (zero opportunity for Threshold Incentive).** Data Source: Research Program (Terri Nielsen)
- **Expand/add Comprehensive Cancer Program Outpatient Supportive Services:** Supportive services in Cancer Care complements the care provided by oncologists. Cancer patients and their families have significant supportive needs throughout their disease trajectory. The Cancer Resource Center currently provides supportive services such as Social Work, personalized Nurse Navigator Support, Support Groups and Wig/Head Covering Program. Supportive services for consideration include lymphedema clinic, nutritional counseling, spiritual care, art therapy, etc. **There is no Threshold (zero opportunity for Threshold Incentive).** Data Source: Comprehensive Cancer Program.
- **Initiation of Familial Genetic Testing for non-breast cancers:** Familial genetic testing allows family members of an individual known to have an inherited gene mutation to test and determine if they need screening tests to look for cancer early or if they need to take steps to lower their risk of cancer. Familial genetic testing is offered for families of breast cancer patients with specific gene mutations. The Target is based on successful initiation of the program, while the Stretch goal will include Genetic Counseling provided as part of the service. **There is no Threshold (zero opportunity for Threshold Incentive).** Data Source: Myriad and Meditech Reports
- **Implementation of External TeleHealth Services in the SVH Clinic System for FY2025 Q4:** Expansion of resources via an external telehealth company. Increase access and expand provider team. Rollout will require implementation plan and resources to ensure success/adoption (insurance credentialing, patient education). Areas of emphasis: after hours and weekend coverage provided. Important to improve access for services, patient experience and reduce burden of call for physicians (provider satisfaction). External resources supplement current services provided at four SVH locations (in person and telehealth). (Not including DOD.) The Threshold will be based on successful implementation of the Telehealth Services, followed by the Target & Maximum measured by average monthly visits during Q4. Data will be provided FY2025, Q4. Data Source: Business & Development Reports

Monthly Scorecard

Community (5%)

Organizational Goals by Pillar	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	FY 2025 Act/Proj	TARGET	Var %		FY 2024 Baseline
VI. Community												
* Increase community engagement through individual district zone specific events	0	0	0	2	0	0	0	2	5	-60.0%		-
** Allocation of Community Benefit funding in South County Measured by: % Over Baseline (\$3,000)	-	-	-	-	-	6.0%	-	6.0%	4.0%	50.0%		-
** Allocation of Community Benefit funding in North County Measured by: % Over Baseline (\$0)	-	-	6.0%	-	-	-	-	6.0%	4.0%	50.0%		-

Community Pillar (Total 5%) – Increase diversified impact throughout the hospital District through community engagement and program support.

Increase community engagement through individual district zone specific events (2.5%)

- Achieved by:
 - Diversified community outreach events in each of the five District zones
 - Community health and service line promotion prioritized
 - Measured by event hosting or participation
- Threshold 3 | Target 5 | Max 6

* **Community Engagement Status:**

Zone 1	Zone 2 ✓	Zone 3	Zone 4	Zone 5 ✓
Confirmed event on April 27 th	COMPLETED on Oct 14 th : Flu Clinic and hospital resource fair at Boys & Girls Club	Confirmed event on March 6 th	Confirmed event March 30 th	COMPLETED on Oct 12 th : Gonzales Family Fun Day

Allocation of Community Benefit funding (2.5%)

- Diversify distribution of Community Benefit Funding to increase grants in North County and South County regions.
- Measurement is based on % increase of total funds allocated in identified areas, baseline FY24 number and development of dashboard
- Achieved by:
 - Development of a Community Funding dashboard
 - Include District funding distribution
 - Outreach to underrepresented communities to encourage aligned funding request
- Threshold: 2% increase | Target: 4% increase | Max: 6% increase

** **Allocation of Community Benefit funding: South County community benefit was funded \$2,500 on 9/23/24 and \$5,000 on 12/30/24 which has exceeded the maximum of 6% over the baseline (baseline is \$3,000). North County community benefit was funded \$5,000 on 9/23/24 which has exceeded the maximum of 6% over the baseline (baseline is \$0).**

QUESTIONS / COMMENTS

ADJOURNMENT