



To: Joint Conference Committee Members
 From: Supervisor John Gioia – District I
 Supervisor Federal Glover – District V

Date: May 8, 2023
 Subject: Meeting Notice

Joint Conference Committee

By: Samir Shah MD, Chief Executive Officer
 Contra Costa Regional Medical Center

JOINT CONFERENCE COMMITTEE AGENDA

May 8, 2023, from 1:00 – 2:00 pm

The public may attend this meeting in person at the following locations:

Conference room 1, Martinez Medical Office Building 2500 Alhambra Ave., Martinez, CA 94553

or

Office of Supervisor Gioia, 11780 San Pablo Ave., Suite D, El Cerrito, CA 94530

or

Office of Supervisor Glover, 190 E. 4th Street, Pittsburg, CA 94565, large conference room

The public also may attend this meeting remotely VIA ZOOM WEBINAR or call-in: Instructions on Page Three of This Agenda

Members: voting – Board of supervisors: supervisor John Gioia, Supervisor Federal Glover; medical executive committee members: Dr Kate Goheen, Dr Dayana Carcamo-Molina; non-voting- CCRMC medical staff president Dr Sara McNeil; Contra Costa Director Health services Anna Roth RN; CCRMC administrator Dr Samir Shah; Health services chief financial officer Pat Godley; CCRMC Chief Medical Officer Dr Samir Shah; CCRMC Chief Nursing Officer Jaspreet Benepal RN, CCRMC Chief Quality Officer Lisa Schilling RN

AGENDA ITEM	RECOMMENDATION
I. CALL TO ORDER and INTRODUCTIONS Meeting Chair- Supervisor John Gioia, District I	Inform
II. APPROVAL OF MINUTES – March 13, 2022 Supervisor Gioia JCC Minutes 3.13.2023 DRAFT.docx	Approval

<p>III. PUBLIC COMMENT Supervisor Gioia</p> <p><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 two 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>Inform</p>
<p>AGENDA ITEM</p>	<p>RECOMMENDATION</p>
<p>IV. ADMINISTRATIVE UPDATE Samir B. Shah, M.D., Chief Executive Officer/Chief Medical Officer; Pat Godley, COO/CFO Contra Costa County; Sergio Urcuyo MD, Medical Director Hospital Operations; Gabriela Sullivan MD, Medical Director Ambulatory Services</p> <ul style="list-style-type: none"> A. Measure X plan B. Operating plan C. Financial update D. Service line expansion and resource requirements E. Capital equipment 2023-2025 <p>JCC 5.8.23 v draft 4.28.23.pptx JC 0323 finance v11.pdf</p>	<p>Inform</p>
<p>V. MEDICAL STAFF UPDATE Kristin Moeller, M.D. Medical Staff President</p> <ul style="list-style-type: none"> A. Consent: Patient Care Policies for CCRM/HCs <p>JCC Consent Agenda - May 2023.pdf</p>	<p>Approval</p>
<p>VI. QUALITY AND SAFETY UPDATES Lisa Schilling, RN, Chief Quality Officer; Courtney Beach, M.D., Medical Director Quality</p> <ul style="list-style-type: none"> A. QAPI 2023 plan and priority projects B. Patient Safety update 	<p>Approval Inform</p>
<p>VIII. ADJOURN</p>	<p>Inform</p>
<p>IX. NEXT MEETING: July 10, 2023</p>	

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ZOOM WEBINAR-Instructions

When: May 8, 2023 01:00 PM Pacific Time (US and Canada)

Topic: JCC

Please click the link below to join the webinar:

<https://cchealth.zoom.us/j/99000522665?pwd=ek1UOEpJMnRBbExvOEZKNldmQnE5Zz09>

Passcode: 719926

Or One tap mobile :

+16465189805,,99000522665# US (New York)

Or Telephone:

Dial(for higher quality, dial a number based on your current location):

+1 646 518 9805 US (New York)

Webinar ID: 990 0052 2665

International numbers available: <https://cchealth.zoom.us/j/99000522665>



JOINT CONFERENCE COMMITTEE MINUTES

March 13, 2023, from 1:00 – 2:00 pm

VOTING MEMBERS PRESENT: Supervisor John Gioia, District I; Supervisor Federal Glover, District 5; Katharine Goheen, MD; Dayana Carcamo-Molina, MD; NON-VOTING MEMBERS PRESENT: Samir Shah MD, Chief Executive Officer/Chief Medical Officer; Kristin Moeller MD, Medical Staff President; Anna Roth, R.N., Health Services Director; GUESTS PRESENT: Jaspreet Benepal RN, Chief Nursing Officer; Sergio Urcuyo MD, Hospital Medical Director; Lisa Schilling RN, Chief Quality and Integration Officer; Dr. Courtney Beach, Chair, Hospital Medicine; Karin Stryker, Director of Safety and Performance Improvement; Gabriela Sullivan MD, Ambulatory and Specialty Medical Director; Andrea Sandler MD, Associate Ambulatory Care Medical Director; Helena Martey RN, Director of Ambulatory Nursing Operations

AGENDA ITEM	RECOMMENDATION
<p>I. CALL TO ORDER AND INTRODUCTIONS Meeting Chair – Supervisor John Gioia, District I</p> <ul style="list-style-type: none"> • Meeting called to order at 1:08 pm by Supervisor Gioia • Location of meeting at three locations under the Brown Act: CCRMC Building 1 Conference Room; Supervisor Gioia’s office in El Cerrito; Supervisor Glover’s office in Pittsburg. • Agenda has been posted outside Supervisors’ offices and CCRMC. Public is invited to attend publicly or remotely. 	Inform
<p>II. APPROVAL OF MINUTES – September 26, 2022 Supervisor Gioia</p> <p>In open session, voting members of Contra Costa Regional Medical Center Joint Conference Committee voted to accept the September 26, 2022, Joint Conference Committee minutes.</p> <p>Public comment on phone:</p> <ul style="list-style-type: none"> • Meeting should have been canceled because Supervisor Glover was not a member at that time. Supervisor Gioia: Anyone can vote on the minutes of previous meetings. Committee has four voting members, and three members were present at the meeting. 	<p><u>Motion:</u> By Goheen Seconded by Gioia</p> <p><u>Ayes:</u> Gioia, Glover, Goheen, Carcamo-Molina</p> <p><u>Abstain:</u> None</p>
<p>III. PUBLIC COMMENT Supervisor Gioia</p> <p>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 two 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.</p>	Inform

<p>Public comment on phone:</p> <ul style="list-style-type: none"> • Unhappy that Supervisor Glover was encouraged to vote on previous minutes when he was not at the meeting. • Concerned for medical professionals. Cannot discriminate. Committee should not exist. Should not continue to operate county business illegally with county laws and rules. • Supervisor Gioia: under law it is appropriate for any member of the committee to vote on minutes even if they are not present. 	
<p>IV. GOVERNANCE Kristin Moeller, M.D., Medical Staff President</p> <p>A. Governing Authority Bylaws - <i>Approval needed for this item.</i></p> <ul style="list-style-type: none"> • Draft of governing bylaws for 2023 need to be read annually. Added Chief Quality Officer as non-voting member. • Article III, Section 1a and 1e: <ul style="list-style-type: none"> ○ 1a) Monitor and evaluate the financial performance of the Hospital and compare it to the applicable budgets and plans ○ 1e) consider plans for changes in the Hospital organization including contracting clinical services • Language update for the Joint Commission and CMS rules that JCC is oversight for clinical services. 	<p>Inform/Approval</p> <p><u>Motion:</u> By Glover Seconded by Goheen</p> <p><u>Ayes:</u> Gioia, Glover, Goheen, Carcamo-Molina</p> <p><u>Abstain:</u> None</p>
<p>V. ADMINISTRATIVE UPDATE Samir B. Shah, MD, Chief Executive Officer/Chief Medical Officer</p> <p><i>Dr. Shah provided an administrative update: Happy to be here meeting in person.</i></p> <ul style="list-style-type: none"> • <i>QIP is managed care directed payment program for California’s public health care system that converts funding from previously-existing supplemental volume-based payments to value-based payments. Simple revenue targets are making sure we are hitting benchmarks on population data. Must reach 44 metrics to maintain specific dollar amount. Money is being granted by the state to CCHP, who is holding CCHS accountable to make sure patients are receiving services for the money received.</i> • <i>Have established multidisciplinary teams working on 44 quality measures. Teams hold regular meetings to plan and monitor improvement activities and review the data and action steps. Executive leadership meets weekly to review data, project updates, discuss challenges and determines use of resources to mitigate barriers.</i> • <i>In 2022, improvement activities were implemented including increasing access to care, extensive outreach to patients, methodologies to enhance virtual visits etc.</i> • <i>Able to realize all allocated QIP PY5 Funding. The required achievement value was 44 and CCRMC achieved 48.</i> • <i>Received 2022 CAPH/SNI Quality Leaders Award for Patient Engagement using Data Insights in the Population Health Category.</i> 	<p>Inform</p>

- *Accomplishments and improvements in all areas including immunizations for adolescents, asthma, breast and cervical cancer screening, BMI screening and follow-up, tobacco cessation interventions, diabetes and kidney evaluation, depression screening, cholesterol medication management, hypertension control etc.*
- *Over 1300 patients over 65 have an advanced care plan, a 13.2% increase.*

We are working on metrics for 2023 and will continue to provide updates throughout the year. Goal is to continue to make a strong impact on our patients.

- *Question: Increased/improved – How does this compare? - Based on baseline measurements and baseline of population, we will be able to provide information on what is needed to improve these outcomes.*
- *Diversity, Equity, Inclusion Update: CCRMC and clinics performance*
- *Recently met with Office of Equity Department and Chief Equity Officer to discuss an equity dashboard that would have patient facing metrics and would be able to look at a number of patient outcomes/metrics and how these metrics can be improved.*
- *Ambulatory care productivity, improvements and initiatives in Ambulatory Care – Dr. Gabriella Sullivan*

Improvements and Initiatives:

- *Redesigning Health Home Team for each provider. Each provider will have dedicated MA/LVN in the clinic, manage provider’s panel and administrative tasks, allowing for a team with close knowledge with each provider’s panel.*
- *Primary care templates are being simplified and standardized for improved access. System will be rolled out by region.*
- *Have hired a Geriatrician and will soon have “memory clinics.” Applying to be recognized by the IHI as an “age-friendly health care system.”*
- *Extensive improvements in Appointment Unit.*
- *Improvements to the functionality of MyChart patient portal. Usage of MyChart increased during the pandemic and has remained since.*
- *New Outreach Committee to vet patient-facing communication. Patient representative is on the committee, which has been positive.*
- *Collaborative Care training in Behavioral Health services through grant received from the Federal Government.*

Equity Highlights:

- *Sustained and committed funding and resources for DEI centered leadership and culture.*
- *Partnered with The Justice Collective.*
- *Transparent / clear recruitment and hiring at all levels of organization.*
- *Create and uphold a culture of safety.*

- *Professional, equitable and sustainable retention, promotion, supervisory practices, and professional development.*
- *Workforce: in many areas we are doing well but we continue to assess whether race/ethnicity is fully represented in CCHS.*

Supervisor Gioia: Is there a breakdown by classification, by management etc.? Dr Sullivan: Data received is departmental level. Workforce data is entire CCHS personnel, not just at CCRMC. We do not have by specific job classification but are working with HSD Personnel for more specific classifications for CCRMC and Health Centers.

CCRMC was participant in Safety Net Institute (SNI) Racial Equity Community of Practice with other safety net health systems across California, to review success and struggles in a peer-peer format.

In partnership with the Center for Human Development, CCRMC & Health Centers offers culturally and linguistically appropriate health navigation and linking patients to community resources, support and advocacy, as part of our efforts to eliminate health disparities and healthcare disparities.

In 2021, increased Child and Adolescent Well Care Visits in the African American population from 33% to 49.5% and reduced the disparity gap from 10% to 6%.

Provided incentives (gift cards) and many families were seen because of these incentives. Will be doing again in 2023.

Ambulatory Challenges:

- *Access to care remains challenging due to increased patient volumes*
- *Providers and health care staff are in high demand throughout the country*
- *We have Locum providers via telehealth-only clinics, which has helped with some of the demand, but patients prefer own providers and in-person visits.*
- *With increased use of MyChart, asynchronous care has also increased. This is a strong motivator leading to a redesign of the Health Home Team and primary care templates.*

Supervisor Gioia: goal is to have less Locums and proper permanent staff. What is being done toward this?

Dr Sullivan: Increase of Locum started with the pandemic. Working with primary care and ED providers, offering innovative ways to make the job more interesting; support methodology done with goal to better able to recruit for a better system. Clinics with highest level of need: West County, Concord, Pittsburg, Miller Wellness, Brentwood.

- *Current structural capacity – short on space and looked at all areas to see how many providers could be accommodated. System can accommodate 20 new providers doing 7 clinics each. This is a small amount of actual need.*

- *Patient population of 182k – we need 121 full-time providers, each doing 7-8 clinics.*
- *We have lost 39 providers from pre-Covid to current date but have gained 26 providers. Despite these challenges, efficiency and productivity in a clinical block has increased from 7.9 to 8.8 in the last few years.*

CCRMC Empanelment demand has increased by 65% over three years due to growth in managed population.

Insufficient to meet demand of what we are currently facing, due to number of factors, labor shortages, space issues. We are hopeful that working with labor to improve conditions and ability to hire and retain providers. It's a competitive environment currently.

Supervisor Gioia: It would be helpful when we conclude labor negotiations, to present CCHS with more specific plan on how to address staff aspects.

Dr. Shah: Measure X would provide opportunity for new office building on Martinez campus, more weekend and evening clinics for more space availability.

- *Infrastructure assessment, public work partnerships and timelines – Dr. Sergio Urcuyo*

Effects of our infrastructure December 2022:

- *Failure of hot water tanks that supply CCRMC resulted in loss of hot water for multiple hours. Short term solution identified and implemented.*
- *Temporary solution identified – implementation resulted in hot water shut down. Bottled water distributed to patients and staff.*
- *Lesson learned – building is 20+ years old and maintenance needs are increasing.*

Current State in process:

- *Hot water tanks, domestic cold-water tanks, water valves throughout hospital, operating room lighting, sterile processing renovations (mandatory to meet regulatory requirements), laboratory automation.*
- *Pending HCAI (formerly OSHPD) approval – cooling towers.*
- *Undergoing assessment – elevators, infant security system, patient call light system, airborne pathogen air handling.*

Planning:

- *Public works report – currently refining recommendations*
- *Master planning process – concurrently with Measure X master planning to identify things that need to be improved and those that need to be repair and upgraded on campus.*

Supervisor Glover: Do we have a preventative maintenance program? Dr Urcuyo: Yes. Failures that occurred in December changed the schedule

<p><i>and caused to move aggressively. Plan has changed in last few months. Using Measure X to think about what we have a need of in the future.</i></p> <p><i>No action items. Public comments: none at CCRMC.</i></p> <p><i>Ends administrative report.</i></p>	
<p>VI. MEDICAL STAFF UPDATE <i>Kristin Moeller, M.D., Medical Staff President</i> <i>Sara McNeil, MD., Medical Staff President elect</i></p> <p>A. Patient Care Policies for CCRMC/HCs</p> <p><i>All policies have been reviewed and have been approved by JCC.</i> <i>All patient care policies go through committees of MEC and Board.</i> <i>Working on these policies during survey time. All policies are available in packet.</i></p> <p><i>Consent</i></p> <p><i>Comments: Policies for review in last five months. Most are routine general for TJC and CMS standards.</i></p> <p><i>Policies were reviewed and approved through committee process 9/2022-2/2023 in more detail.</i></p> <p><i>Policies approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee</i></p> <p><i>Public comment: None currently</i></p>	<p><u>Motion:</u> By Glover Seconded by Goheen</p> <p><u>Ayes:</u> Gioia, Glover, Goheen, Carcamo-Molina</p> <p><u>Abstain:</u> None</p> <p>Inform/Approval</p>
<p>VII. SAFETY AND QUALITY UPDATES Lisa Schilling, RN, Chief Quality Officer Courtney Beach, M.D., Chief, Hospital Medicine</p> <p>A. QAPI 2022 Evaluation</p> <p>Highlights:</p> <ul style="list-style-type: none"> • Excellent QIP performance • Top performance in DEI and SDOH • Recognition for excellence by CAPH • Spring Leapfrog grade B • TJC re-accreditation <p>Looking forward:</p> <ul style="list-style-type: none"> • Quality, safety and value for population; quality plan on priorities for improvement for system; patient safety; quality dashboard to monitor system; patient safety indicators for procedures; focus on diversity, equity and inclusion for populations and perinatal and behavioral health; access as a quality measure; care experience. <p>Quality Plan Evaluation 2022 – Examples of successful improvement:</p>	<p>Inform/Approval</p> <p><u>Motion:</u> By Glover Seconded by Goheen</p> <p><u>Ayes:</u> Gioia, Glover, Goheen, Carcamo-Molina</p> <p><u>Absent:</u> Burgis, Porteous <u>Abstain:</u> None</p>

- QIP measures 40 of 44
- Well child visits in first 30 months of life
- Developmental screening in first 3 years of life
- Immunization: adolescents, influenza
- Screening for depression and follow-up
- Diabetes and asthma care

Examples of areas not meeting goal:

- Decreasing clinic no-show rates and improving access
- Hospital code blue rate
- Anesthesia evaluation in ICU – did not meet goal
- Surgical site infections – did not meet goal

Video appointments have the lowest no-show rate. In-person visits have higher no-show rate.

B. TJC Triennial findings summary

- Hospital accreditation is required for Center for Medicare and Medicaid Services (CMS) participation and payment
- CMS has provided TJC with directive to improve its performance in identifying regulatory deficiencies
- Post-COVID surveys in hospitals are reported to discover more deficiencies than in prior survey periods
- CCRMC and Health Centers were visited by six surveyors over five days in January.

Highlights of TJC findings – total of 58 findings. Similar to 2019 but less significant.

Opportunities for improvement:

- Infection control protocol adherence – high level disinfection of instruments in some clinics
- Following manufacturer instructions with dental chairs and products
- Further modification of inpatient and PES facilities to eliminate ligature risk
- Consent policy adherence for witness signature and translation
- Documentation of: HR orientation and annual requirements; QA procedures on equipment; radiology protocol reviews; annual evaluation and governance review of care related contracts; ED procedure to manage pregnant and postpartum women with eclampsia, preeclampsia
- Completion of precleaning procedure on scopes prior to full sterilization
- Environment of care and life safety: minor adjustments needed for closing fire doors, documentation of drills, securing medical gases

Follow-up actions:

- TJC 45-day re-survey for infection control, ligature risk and associated findings

<ul style="list-style-type: none"> • CCRMC submit 60-day plan with corrective actions and evidence of compliance • CCRMC update policies and approaches based on findings <p>Learnings from Survey:</p> <ul style="list-style-type: none"> • CCRMC highlighted for exemplary focus on diversity, equity and inclusion • Behavioral health program excellence • Perinatal program excellence • Dental program standards and oversight need adjustment • Simplify management of orientation and annual HR requirements • Update consent policy and form needed to adhere to 2021 manual • Diagnostic imaging protocols to follow ASR standards and guidance • Improvement documentation to demonstrate adherence to policy and manufacturer guidelines • Need to direct wire power strip in care delivery settings: resources required. <p>Questions: no public comment</p>	
<p>VIII. Adjourn at 2:28 PM</p>	<p>Inform</p>
<p>IX. NEXT MEETING: May 15, 2023</p>	
<p>Minutes approved by Chair: Supervisor John Gioia, District I</p> <p>_____</p> <p style="text-align: center;">Supervisor John Gioia</p> <p style="text-align: right;">_____</p> <p style="text-align: right;">Date</p> <p style="text-align: right;"><i>Minutes by Denise Whittle</i></p>	

Welcome

Contra Costa Regional Medical Center and Health Centers
Joint Conference Committee

May 8, 2023



CONTRA COSTA
HEALTH



To: Joint Conference Committee Members
 From: Supervisor John Gioia – District I
 Supervisor Federal Glover – District V
 By: Samir Shah MD, Chief Executive Officer
 Contra Costa Regional Medical Center

Date: May 8, 2023
 Subject: Meeting Notice
Joint Conference Committee

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Agenda

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JOINT CONFERENCE COMMITTEE

MINUTES

March 13, 2023, from 1:00 – 2:00 pm

Minutes for Approval

VOTING MEMBERS PRESENT: Supervisor John Gioia, District I; Supervisor Federal Glover, District 5; Katharine Goheen, MD; Dayana Carcamo-Molina, MD; NON-VOTING MEMBERS PRESENT: Samir Shah MD, Chief Executive Officer/Chief Medical Officer; Kristin Moeller MD, Medical Staff President; Anna Roth, R.N., Health Services Director; GUESTS PRESENT: Jaspreet Benepal RN, Chief Nursing Officer; Sergio Urcuyo MD, Hospital Medical Director; Lisa Schilling RN, Chief Quality and Integration Officer; Dr. Courtney Beach, Chair, Hospital Medicine; Karin Stryker, Director of Safety and Performance Improvement; Gabriela Sullivan MD, Ambulatory and Specialty Medical Director; Andrea Sandler MD, Associate Ambulatory Care Medical Director; Helena Martey RN, Director of Ambulatory Nursing Operations

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Public Comment

Contra Costa Regional Medical Center and Health Centers
Joint Conference Committee

May 8, 2023



CONTRA COSTA
HEALTH

CCRMC Administrative Update

Contra Costa Regional Medical Center and Health Centers
Joint Conference Committee

May 8, 2023



CONTRA COSTA
HEALTH



Congratulations!

- TJC triennial survey - CMS accreditation complete
- Leapfrog grade A
- DHCS behavioral health review passed

Measure X Update

Preliminary Project Schedule

	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER
Proposal Accepted, Contract Executed	★ Today					
Project Organization & Ongoing Project Management	📞📞📞📞	📞📞📞📞	📞📞📞📞	📞📞📞📞	📞📞📞📞	📞📞📞📞
Data Collection	📄					
Facility Tours & Stakeholder Interviews	👥					
Phase 1: Current State Understanding	1		2			
Phase 2: Vision Future State	4/19		TBD	3	TBD	
Phase 3: Evaluate Campus & Facility Options					4	
Phase 4: Finalize & Approve Facility Master Plan						5
Deliverables for Each Phase			★	★	★	★ Final Deliverable

- # Steering Committee Meetings**
The Steering Committee will help guide and provide inputs throughout the study
- 📞 Bi-Weekly Touchpoint Meetings / Discussions**

Meeting Agendas

- Steering Committee/Leadership Kick-off Meeting
- Present and Validate Current State Findings
- Present Future Key Room Needs
- Present Campus Options
- Final Options, Timeline, Phasing, & Cost

Strategic Facilities Master Plan

Our Definition of What Strategic Facility Master Planning Is and Is Not

What SFMP Is	What SFMP Is NOT
Long term roadmap for projects (10-25 years)	Immediate and short-term action plan
Accounts for future institutional strategic vision and programmatic growth	Based solely on current market dynamics
Transformational and enables change	Incremental improvement
Dynamic roadmap , frequently reviewed and updated	A static report that sits on a shelf
Incorporates operational efficiencies and best practices	Premised on current operational inefficiencies
Function drives facilities /capital investment	Facilities/capital investment does not drive function
High level conceptual design	Detailed site and building design
Guidelines for operations, experience, digital	Design of operations, experience, digital

Draft Operating Plan

2023 CCRM and Clinics Operating Plan





 Quality and Safety Leapfrog A CMS 4-5 stars QIP top performer	<ol style="list-style-type: none">1. Mortality: improve mortality rate Mortality index O:E <=1.0 (CMS)2. Safety: Reduce hospital acquired harm PSI-90 Post-op hemorrhage Clos SSI Perinatal harm3. Enhanced care management: follow-up care % ED visit with an AOD discharge diagnosis for members 21 who had a f/u within 30 days of ED visit (tent)4. QIP: preventive care Childhood immunization Combination-10: 41.5% Child and adolescents well care visits: 57% Cervical Cancer Screening: 63.6% Colorectal Cancer Screening: 56.2%5. Ambulatory care: delay in treatment Referral visits <=30 days
 Patient experience Top box score	<ol style="list-style-type: none">1. Inpatient experience: top box rating Overall hospital rating Nurse and MD communication Education about medicines Transition in care2. Ambulatory experience: provider and messaging Provider rating (9-10) 82% Messaging turn around time <= 3 business days3. Access: improve access to care Primary care third next available <7d Appointment unit call hold time <30 seconds Hospital admin days (<xx xx%)
 Workforce experience	<ol style="list-style-type: none">1. Provider experience MD panel size (xxx% at target)2. Employee experience First year turnover (<10%)
 Financial strength	<ol style="list-style-type: none">1. Inpatient length of stay Overall hospital LOS<5 days2. Caring for managed population Improve repatriation rate by 5% over 20213. Inpatient bed availability Improve available bed capacity by 5% over 20214. QIP performance QIP incentive payment 100%5. Provider productivity Completed billable visits (per 4 hr block) (xxx%) Clinic no-show rates <1.7% (current ave: 18.6%)
 Equity and Diversity	<ol style="list-style-type: none">1. Patient safety and quality Primary c-section rate: women of African descent <16%

1. Patient access
2. Patient and staff experience
3. Simplification

Draft Operating Plan

2023 CCRMC and Clinics Operating Plan

 <p>Quality and Safety</p> <p>Leapfrog A CMS 4-5 stars QIP top performer</p>	<ol style="list-style-type: none"> Mortality: improve mortality rate Mortality index O/E <= 1.0 (CMS) Safety: Reduce hospital acquired harm PSI-90 Post-op hemorrhage Cala SSI Perinatal harm Enhanced care management: follow-up care % ED visit with an AOD discharge diagnosis for members 21 who had a f/u within 30 days of ED visit (tent) QIP: preventive care Childhood Immunization Combination-10: 41.5% Child and adolescents well care visits: 57% Cervical Cancer Screening: 63.6% Colorectal Cancer Screening: 56.2% Ambulatory care: delay in treatment Referral visits <=30 days
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 <p>Financial strength</p>	<ol style="list-style-type: none"> Inpatient length of stay Overall hospital LOS <5 days Caring for managed population Improve repatriation rate by 5% over 2021 Inpatient bed availability Improve available bed capacity by 5% over 2021 QIP performance QIP incentive payment 100% Provider productivity Completed billable visits (per 4 hr block) (xxx%) Clinic no-show rates <17% (current ave: 18.6%)
 <p>Equity and Diversity</p>	<ol style="list-style-type: none"> Patient safety and quality Primary c-section rate: women of African descent <16%

 <p>Quality and Safety</p>	<ul style="list-style-type: none"> Mortality: improve mortality rate Mortality index O/E <= 1.0 (CMS)
 <p>Patient experience</p>	<ul style="list-style-type: none"> Inpatient length of stay Overall hospital LOS <5 days (excluding Psych, NICU) LLOS: total bed days LLOS decrease by 5%
 <p>Equity and Diversity</p>	<ul style="list-style-type: none"> Patient safety and quality Primary c-section rate: Black women <16%
 <p>Provider productivity</p>	<ul style="list-style-type: none"> Provider productivity Completed primary care billable visits (per 4 hr block) (%) Clinic no-show rates <17% (current ave: 18.6%)

CONTRA COSTA COUNTY
HEALTH SERVICES DEPARTMENT

CONTRA COSTA REGIONAL MEDICAL CENTER
AND HEALTH CENTERS

**JOINT CONFERENCE REPORT
JULY 2022 – MARCH 2023
COMPARATIVE DATA AND
FINANCIAL STATUS**

MAY 8, 2023

Financial Update

CONTRA COSTA
HEALTH

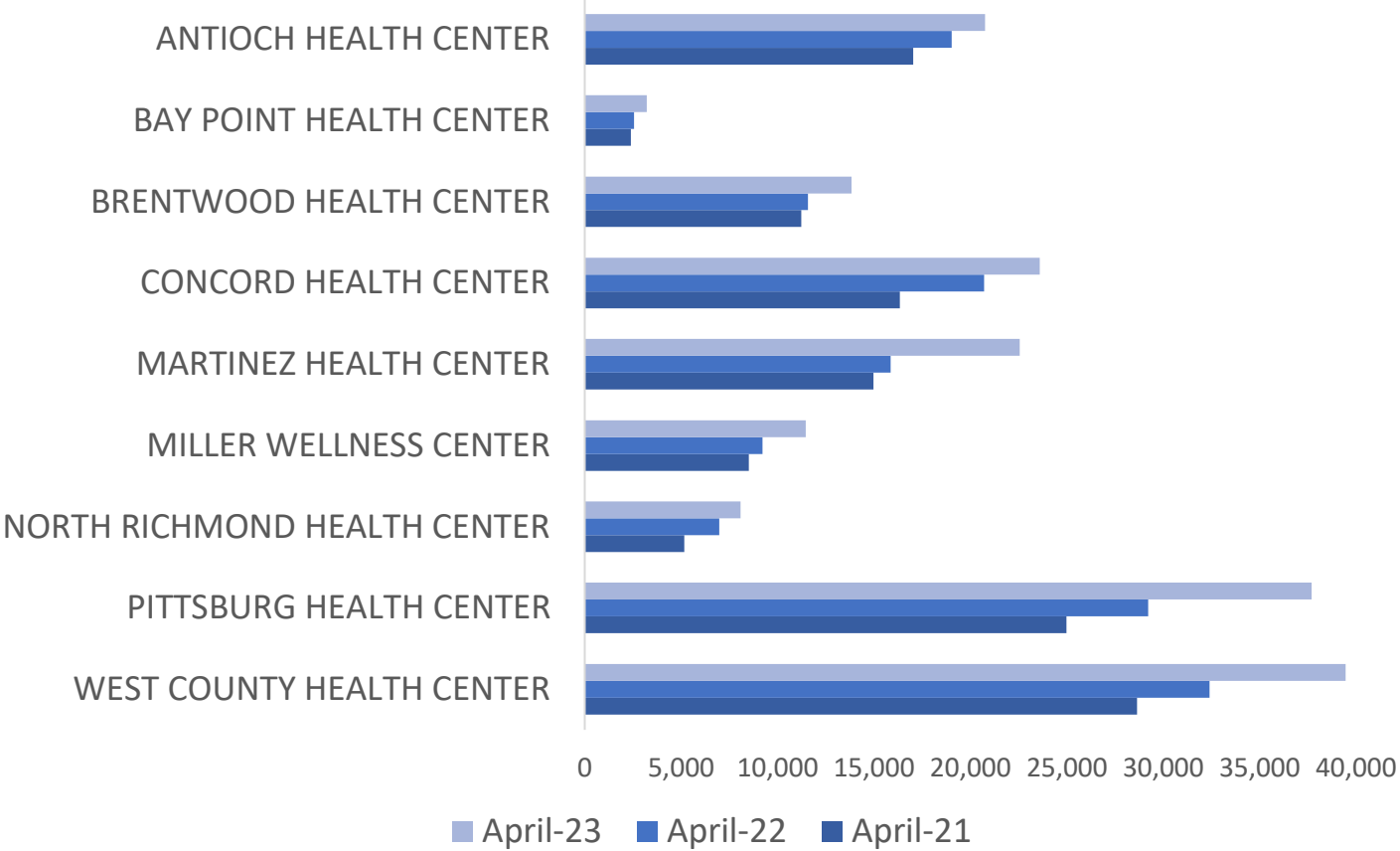


cchealth.org

Provider Recruitment and Staffing

May 8, 2023

CCHP Empanelment



180,674

May 2023

147,574

May 2022

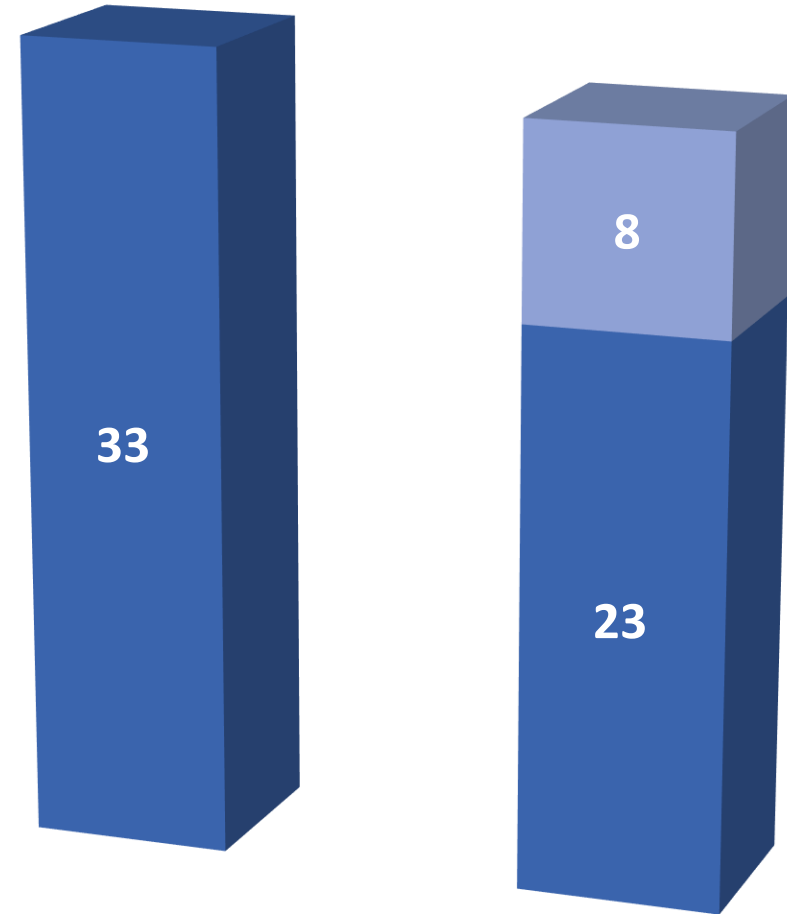
129,270

May 2021

Primary Care Provider Retention

**Since March 2020 (Start of the
Pandemic):**

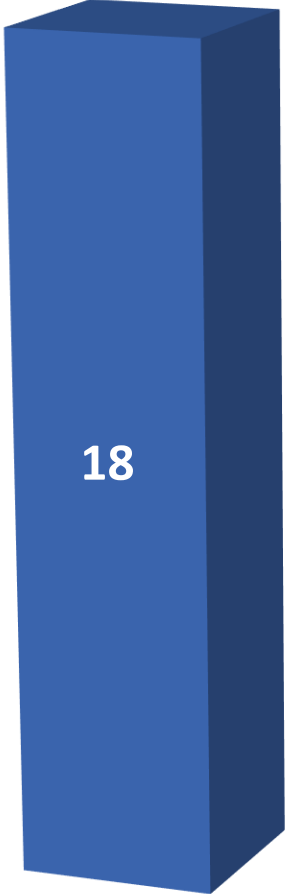
- We have lost 33 Primary Care Providers
- We have hired 23 Primary Care Providers
- 8 additional hires have not started yet



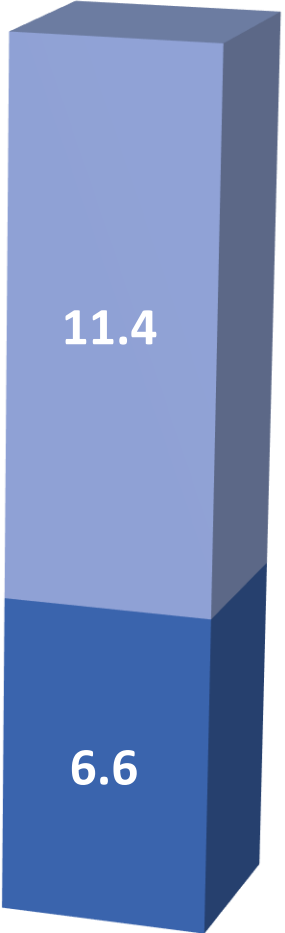
Emergency Department Provider Retention

Since March 2020 (Start of the Pandemic):

- We have lost 18 providers (11 employed, 7 contracted)
- We have hired 15 (1 employed, 14 contractors)
- Takes 2 + contractors to fill 1 FTE due to MOU limitations



Provider Positions
Lost



Effective Positions
brought on

Additional Provider Retention Concerns

Since March 2020 (Start of the Pandemic):

- Lost significant anesthesiologist support
 - Forcing reductions in operating room cases and more patients being sent out to surgery centers
 - Existing staff is trying to carry the remaining workload
 - Currently we have 4 of the 9 FTEs needed to properly staff our operating rooms
- Lost 50% of radiologists
 - Number of scans to read has increased 30%
 - Existing staff is trying to carry the remaining workload

Additional Provider Retention Concerns

Since March 2020 (Start of the Pandemic):

- Pulmonology – lost 50% of full time staff
- ENT – down 33% of providers needed to meet current demand

The Big Picture

- In 2019, the AMA estimated a physician shortage of 122,000 by 2030
- In 2021, 117,000 physicians left the workforce, many due to COVID burnout
 - Doesn't count the older physicians that have cut back
 - Doesn't account for new graduates that are increasingly looking for work-life balance
- *The AAMC reports that physician shortages hamper efforts to remove barriers to care. If populations that are underserved by the health system had health care-use patterns similar to populations with fewer access barriers, the U.S. would be short between 102,400 and 180,400 physicians.*

Clinical Hours and Appointment Volume in Ambulatory

Scheduled Hours	2020	2021	2022	% Increase/Decrease 2020 v 2022	Absolute Change 2020 v 2022
Primary Care	127,877	117,827	121,274	-5%	(6,603)
Specialty Care	72,178	66,811	66,548	-8%	(5,631)

Completed Appts	2020	2021	2022	% Increase/Decrease 2020 v 2022	Absolute Change 2020 v 2022
Primary Care	252,195	248,042	254,087	1%	1,892
Specialty Care	113,922	122,536	121,739	7%	7,817

Clinic Cancellations

Cancel Reason	2020	2021	2022	% Increase/Decrease 2020 v 2022	Absolute Change 2020 v 2022
Same Day / Sick	30,652	31,237	44,051	44%	13,399
Covid-19 Provider Cancellation	23,133	3,255	11,921	-48%	-11,212
FMLA	8,766	7,053	12,547	43%	3,781
All Other Reasons	59,499	41,886	51,203	-14%	-8,296
Grand Total	122,050	83,431	119,722	-2%	-2,328

Table shows the number of visit slots cancelled by the provider

By the Numbers

67 Physicians contacted us over the past 2 years with interest

56 Physicians had preliminary or formal interviews

18 Physicians accepted offers

5 Nurse Practitioners accepted offers

Reasons given for declining an interview or an offer

- **Low Compensation (this should improve with the new MOU)**
 - Daily Patient Volume
 - Clinical Variation of Work
 - Location of Clinics

PDOCC MOU March 2023

Salary increases went into effect March 1st 2023

11%

Overall salary increase
Distributed over the
different Staff Physician
classifications

5%

Additional increase
In November 2023
and 2024

Specialty	Old Base Feb 2023	% Change	Increase	New Base March 2023
Pediatrician	238,252	9.1%	21,681	259,932
Primary Care FM and Adult	239,000	8.8%	21,032	260,032
Emergency Room	260,100	18.4%	47,858	307,958
OB/GYN	239,292	18.7%	44,748	284,040

Primary Care physicians received Additional Administrative time to make the positions more sustainable. This is to address the increased amount of patient messages on MyChart and the increased volume of work due to increased patient engagement



Hiring Mechanisms

Hiring occurs through three separate mechanisms:

1. County Personnel website which follows a strict hiring protocol – this applies to all nursing staff, including Nurse Practitioners, RNs, LVNs, MAs. By design, this system limits recruitment.
2. Staff Physicians are Exempt – physicians are hired into positions as designated by the MOU with PDOCC. Able to use recruitment tools and resources.
3. Contracted Physicians – contracts are used for specialty providers that are not specified within the PDOCC MOU. Able to use recruitment tools and resources.

Recruitment Mechanisms



- Contract with Spin Recruitment Advertising
- Attend local and national recruitment events, especially Residency job fairs
- Speak with current CCRMC Residents and other local Residencies
- Post on the National Health Service website
- Open and fill vacant NP positions, encourage NPs who contact us to “get on the list”
- Two providers given Administrative Time to assist with recruitment

Recruitment Events



- UC Davis Family Medicine Consortium Annual Conference
- Sutter Santa Rosa/Kaiser Santa Rosa/Ukiah Recruitment Event
- John Muir FM Residency Career Panel
- UCSF Primary Care Track Career Night
- FMX/ Family Medicine National Conference
- Lifelong FM Residency Career Night
- CCRMC Career Panel

Where We Advertise

Primary Care

- New England Journal of Medicine
- American Academy of Family Practice (AAFP)
- Journal of the American Medical Association (JAMA) – print and online
- American College of Physicians (Annals of Internal Medicine & ACP Internist) – print and online
- LinkedIn
- PracticeLink
- Student National Medical Association (Includes Job Flash Email)
- National Medical Association (NMA)
- National Hispanic Medical Assoc (NHMA)
- Association of American Indian Physicians

Where We Advertise

Specialty Care

- American Academy of Pediatrics
- American Academy of Orthopedic Surgeons
- American Academy of Dermatology
- American Academy of Neurology
- American Urological Association
- American Geriatric Society
- American Gastroenterological Association
- American College of Gastroenterology
- American College of Correctional Physicians
- American Society for Gastrointestinal Endoscopy
- American Academy of Otolaryngology
- American Psychiatric Association
- American Academy of Child and Adolescent Psychiatry
- American College of Obstetricians and Gynecologists
- Gaswork.com
- American College of Emergency Physicians
- American Academy of Emergency Medicine
- Emergency Medicine News
- Society of Teachers of Family Medicine
- GovernmentJobs.com

Medical Staff Update

Contra Costa Regional Medical Center and Health Centers
Joint Conference Committee

May 8, 2023



CONTRA COSTA
HEALTH

Consent Agenda for Medical Executive Committee

Policies Approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee
March 2023 to April 2023

Ambulatory Care

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
C 3021	Emergency Response Plan for Ambulatory Health Centers	R	N	Reviewed
C 3021 A	Attachment - Concord Health Center	R	N	Reviewed
C 3021 B	Attachment - Bay Point Health Center	R	N	Reviewed
C 3021 C	Attachment - Brentwood Health Center	R	N	Reviewed
C 3021 E	Attachment - Pittsburg Health Center	R	N	Reviewed
C 3021 F	Attachment - Martinez Health Center	R	N	Reviewed
C 3021 G	Attachment - North Richmond Health Center	R	N	Reviewed
C 4021	Emerson Chamber	R	N	Reviewed, references updated
C 4068	Pregnancy Test Walk In	R	N	updated with current info
C 4054	Infusion Pump for Patient's Home Use	R	N	
C 3047	Thefts and Break Ins	R	N	

Policies for Review

- Consent approval: updated policies March-April 2023

Quality and Safety Update

Contra Costa Regional Medical Center and Health Centers
Joint Conference Committee

May 8, 2023



CONTRA COSTA
HEALTH

Quality Priorities



Accreditation
And regulatory



Integration with
operations



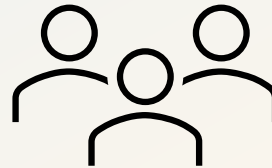
Patient
Safety



Care experience
diversity, equity
and inclusion



External programs
and incentives



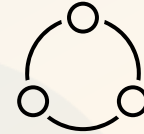
Person centeredness



Population
health



Analytics
and reporting



Performance
improvement



Quality review
and Governance

2023 Priority Quality and Safety Projects

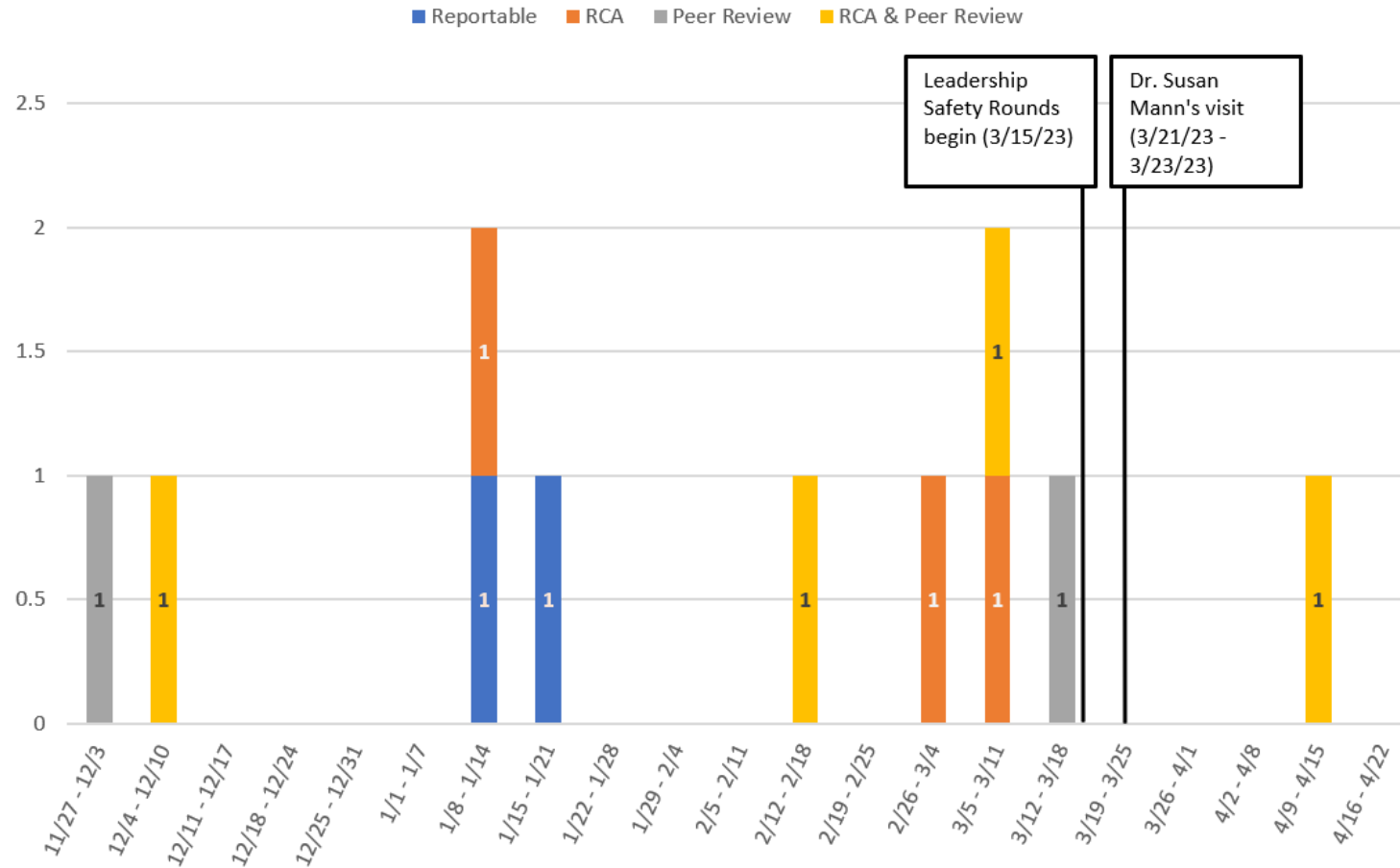
Area	Project	2022 performance	2023 target	Top decile benchmark
Hospital	Fall reduction	0.7/100 Count:159	<0.5/100 Count: 135	0.7/100 (CMS)
	HAPI	0.23/1000	Count: 0	0.6/1000 (CMS)
	Sepsis bundle compliance (1-hr): Serum lactate draw Antibiotic infusion	TBD	95% 95%	
	Code blue reduction	0.49/1000 Count: 22	50% reduction Count:11	0 (IHI)
ED	Plan of care for obstetric hemorrhage	N/A	90% education	N/A
	Columbia screening in triage	90.6%	95%	TBD
	LWBS (AT)	4.68%	4%	
Psychiatry Units	Inpatient admit times	N/A	<= 320 minutes	360 minutes (baseline)
	Influenza vaccination	87.4%	91%	TBD

2023 Priority Quality and Safety Projects (continued)

Area	Project	2022 performance	2023 target	Top decile benchmark
Perinatal units	Severe eclampsia reduction	7.02%	6%	TBD
	Hemorrhage reduction (without transfusion)	7.49%	6%	TBD
	C-section rate Black women (primary)	17.15%	16%	15.7%
Peri-op	SSI reduction abdominal surgery (colorectal, small bowel, abdominal hysterectomies)	3.0 1.0 0.0	<=1 or SIR <=1.0	SIR <= 1.0
	Preventing respiratory failure (PSI-11)	10/1,000 eligible D/C	<=1	6.27/1,000 eligible D/Cs (AHRQ)
	Reducing wound dehiscence (PSI-14)	4.16/1,000 eligible D/C	<=1	1.58/1,000 eligible D/Cs (AHRQ)
Nutrition	Nurse Screening Malnutrition		90%	
Ambulatory	Appropriate follow-up after FIT test (colonoscopy within 6 months positive test)	54.9%	57%	75%
	Appropriate follow-up after mammogram (BIRADS 4-5 biopsy w/in10days)	75.8%	78.6%	90%

Patient Safety Leadership

Result of CERT Review
Dec 2022 - April 2023



Professional Affairs Committee

Contra Costa Regional Medical Center and Health Centers
Joint Conference Committee

May 8, 2023



CONTRA COSTA
HEALTH



To: Professional Affairs Committee Members
 From: Supervisor John Gioia – District I
 Supervisor Federal Glover – District V
 By: Samir Shah, Chief Executive Officer
 Contra Costa Regional Medical Center

Date: May 8, 2023
 Subject: Meeting Notice
Professional Affairs Committee

PAC Agenda

This meeting will go to Closed Session.

PROFESSIONAL AFFAIRS COMMITTEE-VIA ZOOM

AGENDA May 8, 2023 from 2:00 to 3:00 pm

AGENDA ITEM	RECOMMENDATION
I. CALL TO ORDER Meeting Chair- Supervisor John Gioia, District I	
II. ADJOURN TO CLOSED SESSION Supervisor Gioia	
III. APPROVAL OF MINUTES Supervisor Gioia	Inform/ Action
IV. PATIENT SAFETY UPDATE Courtney Beach, M.D., Associate Medical Director, Quality and Safety Chair, Patient Safety and Performance Improvement Committee A. Consent: MERP plan B. Root Cause Analysis review	Approve Inform
V. ADJOURN	
Next Meeting: July 10, 2023	

Reminder, this is a closed meeting.

CONTRA COSTA
HEALTH



Appendix

CONTRA COSTA COUNTY
HEALTH SERVICES DEPARTMENT

CONTRA COSTA REGIONAL MEDICAL CENTER
AND HEALTH CENTERS

JOINT CONFERENCE REPORT
JULY 2022 – MARCH 2023
COMPARATIVE DATA AND
FINANCIAL STATUS

MAY 8, 2023

JOINT CONFERENCE REPORT

Table of Contents

Presentation:

Hospital Daily Census & Average Monthly Discharges Graph	1
Average Daily Census	2
Average Length of Stay by Unit Graph	3
Medical Administrative % Graph.....	4
Psychiatric Administrative % Graph.....	5
Monthly Discharges Graph	6
Outpatient Visits Medical Clinics Graph.....	7
O/P Visits by Clinics	8
Monthly Outpatient Visits Graph	9
O/P Medical Visits by Payor.....	10
CCRMC and Clinics Budget Comparison.....	11
Budget Summary by Division.....	12
Net County Cost Comparison.....	13

Reference Data:

Statistical Comparison.....	14-16
School Based Clinics Number of Visits	17
Inpatient Admissions by County Location.....	18
Outpatient & ED Visits by Region	19-20
Hospital Council East Bay Census ED Quarterly Report.....	21-22
ED Visits by Acuity Level.....	23
Discharges.....	24
Administrative Days.....	25
Average Monthly Births Graph.....	26
Delivery Statistics by City of Origin.....	27
I/P Surgery Department Operating Report Graph.....	28
O/P Surgery Department Operating Report Graph.....	29
Monthly O/P Visits by Medical Clinics Graph.....	30-33

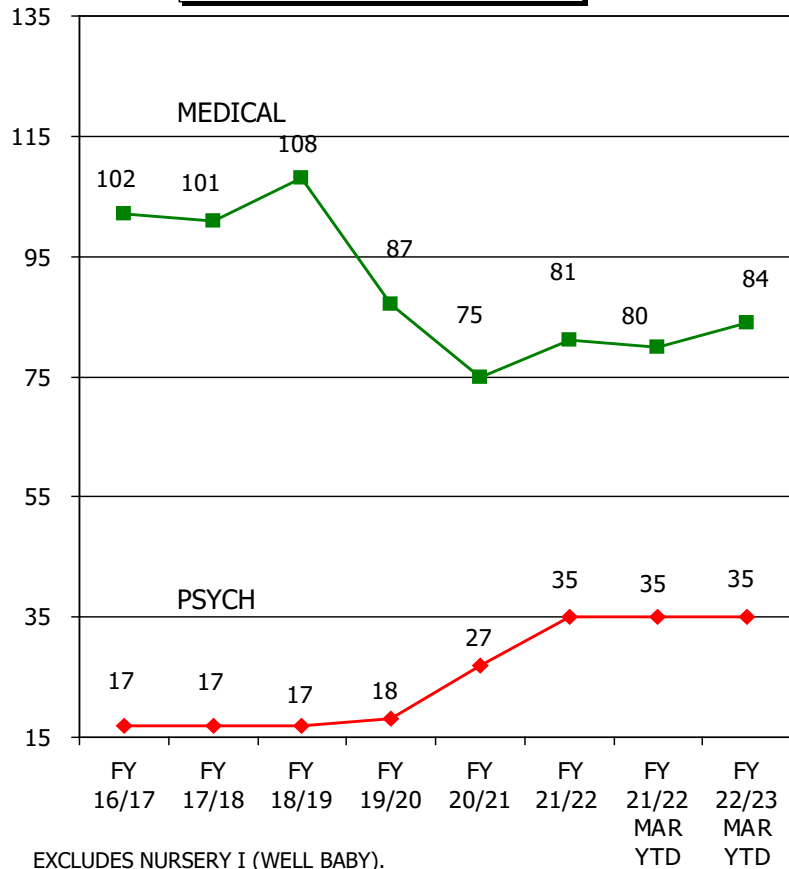
JOINT CONFERENCE REPORT

Table of Contents (continued)

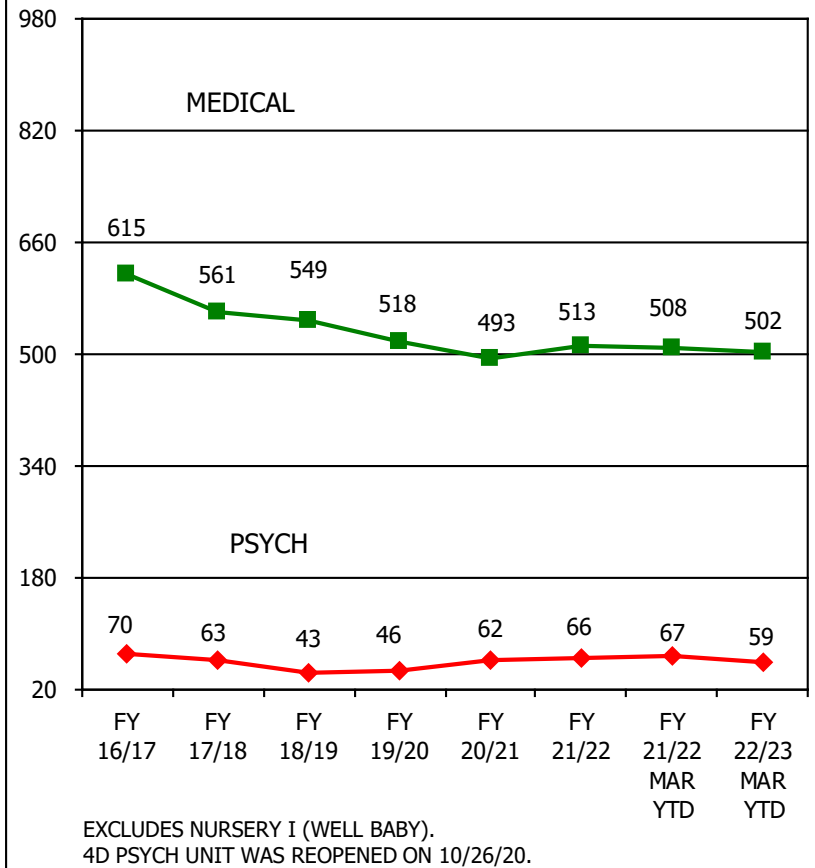
Medicare Discharges Graph.....	34
Medicare Utilization	35
East Bay Hospital Conference I/P Daily Census	36
East Bay Hospital Conference I/P Discharges Med SVCS Stats	37

CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT CONTRA COSTA REGIONAL MEDICAL CENTER FISCAL YEAR COMPARISON

AVERAGE DAILY CENSUS



AVERAGE MONTHLY DISCHARGES

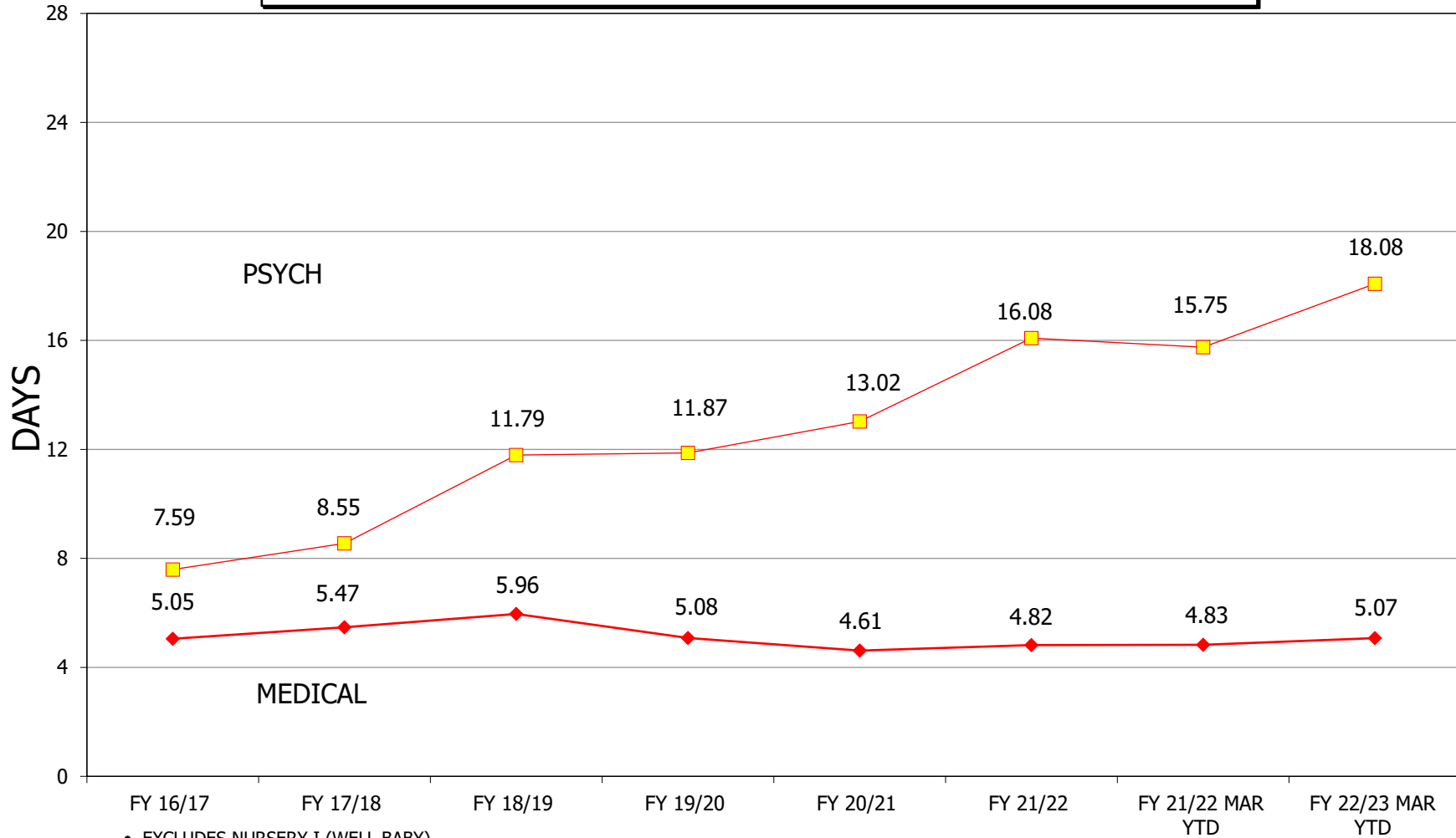


CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
AVERAGE DAILY CENSUS

Month	Medical	Psych	Adult & Psych	Newborn (Well Baby)	Total
July 2020	75	19	94	6	100
August 2020	73	14	87	6	93
September 2020	77	17	94	8	102
October 2020	80	21	101	6	107
November 2020	70	28	98	7	105
December 2020	71	30	101	6	107
January 2021	82	29	111	5	116
February 2021	76	32	108	5	113
March 2021	74	28	102	6	108
April 2021	70	32	102	6	108
May 2021	74	33	107	7	114
June 2021	74	37	111	6	117
FY 2020-21 Average	75	27	102	6	108
July 2021	76	37	113	7	120
August 2021	81	37	118	8	126
September 2021	84	37	121	7	128
October 2021	79	34	113	6	119
November 2021	78	37	115	5	120
December 2021	79	35	114	7	121
January 2022	88	31	119	7	126
February 2022	84	32	116	7	123
March 2022	78	32	110	7	117
April 2022	81	34	115	6	121
May 2022	84	36	120	7	127
June 2022	86	35	121	6	127
FY 2021-22 Average	81	35	116	7	123
July 2022	85	34	119	8	127
August 2022	82	35	117	8	125
September 2022	77	33	110	7	117
October 2022	75	32	107	6	113
November 2022	86	34	120	7	127
December 2022	90	35	125	9	134
January 2023	90	37	127	6	133
February 2023	85	37	122	7	129
March 2023	83	39	122	6	128
April 2023					
May 2023					
June 2023					
FY 2022-23 Average	84	35	119	7	126

Note:
4D Psychiatric Unit was reopened on 10/26/20.

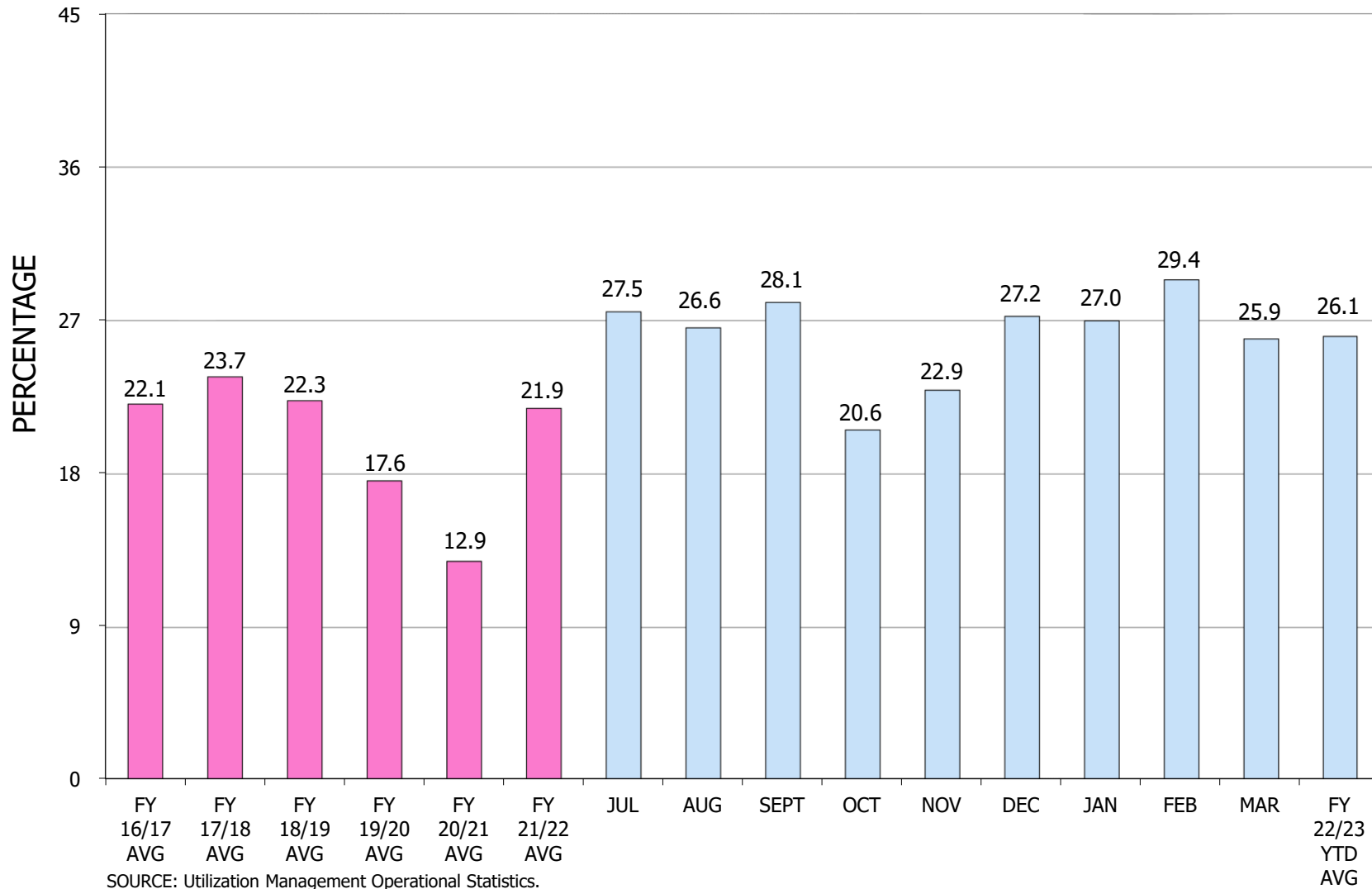
**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
AVERAGE LENGTH OF STAY
FISCAL YEAR COMPARISON**



- EXCLUDES NURSERY I (WELL BABY).
- 4D PSYCHIATRIC UNIT [20 BEDS] WAS SUSPENDED EFFECTIVE 11/20/2006. THIS UNIT WAS REOPENED ON 10/26/2020.

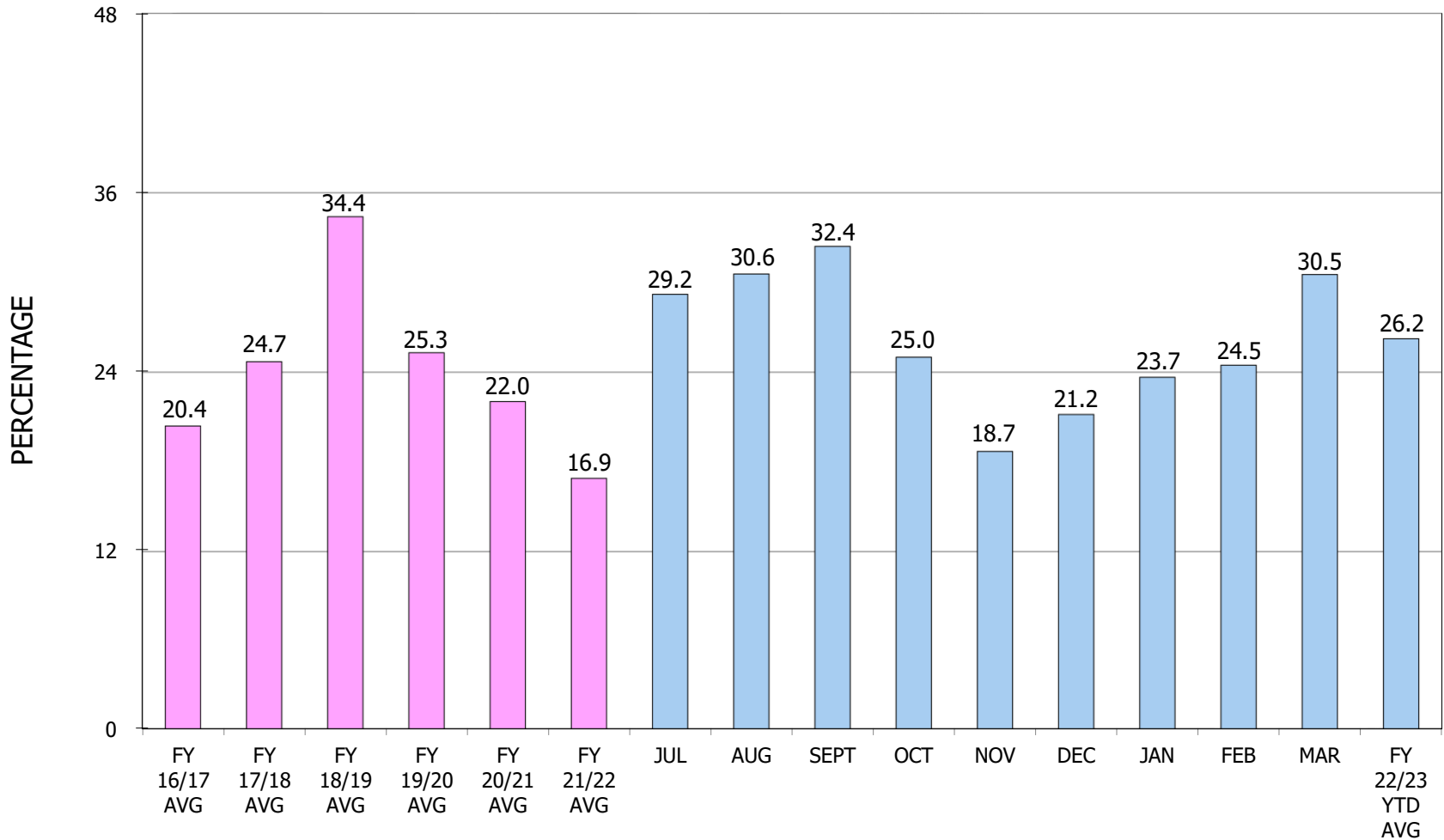
(ALOSJC18)

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
MEDICAL ADMINISTRATIVE DAYS
AS A PERCENTAGE OF TOTAL MEDICAL DAYS**



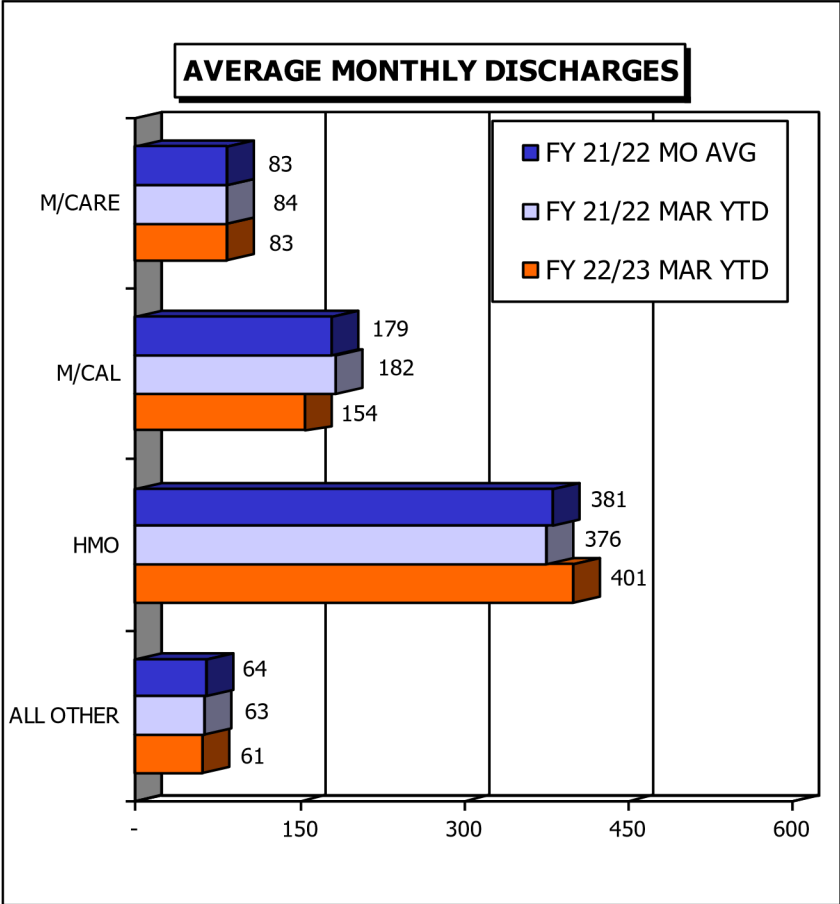
SOURCE: Utilization Management Operational Statistics.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
PSYCHIATRIC ADMINISTRATIVE DAYS
AS A PERCENTAGE OF TOTAL PSYCH DAYS**



SOURCE: Utilization Management Operational Statistics.

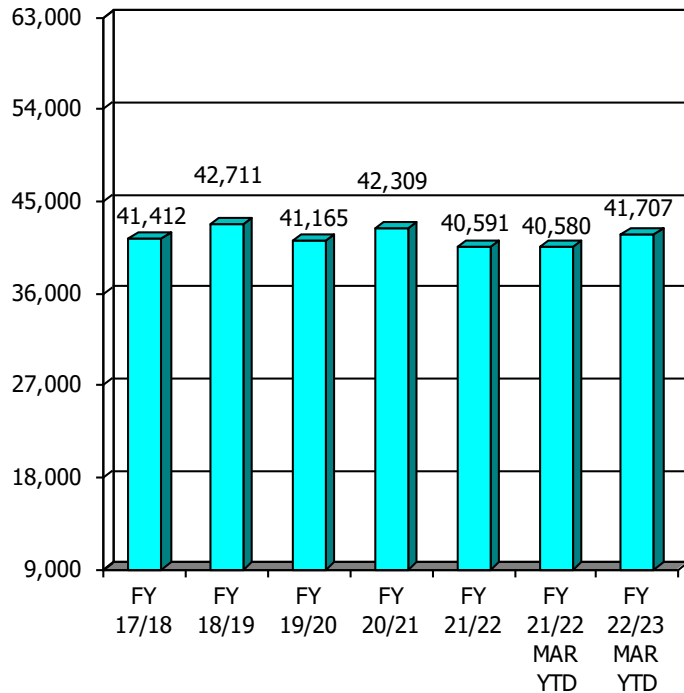
CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT CONTRA COSTA REGIONAL MEDICAL CENTER & HEALTH CENTERS FISCAL YEAR COMPARISON



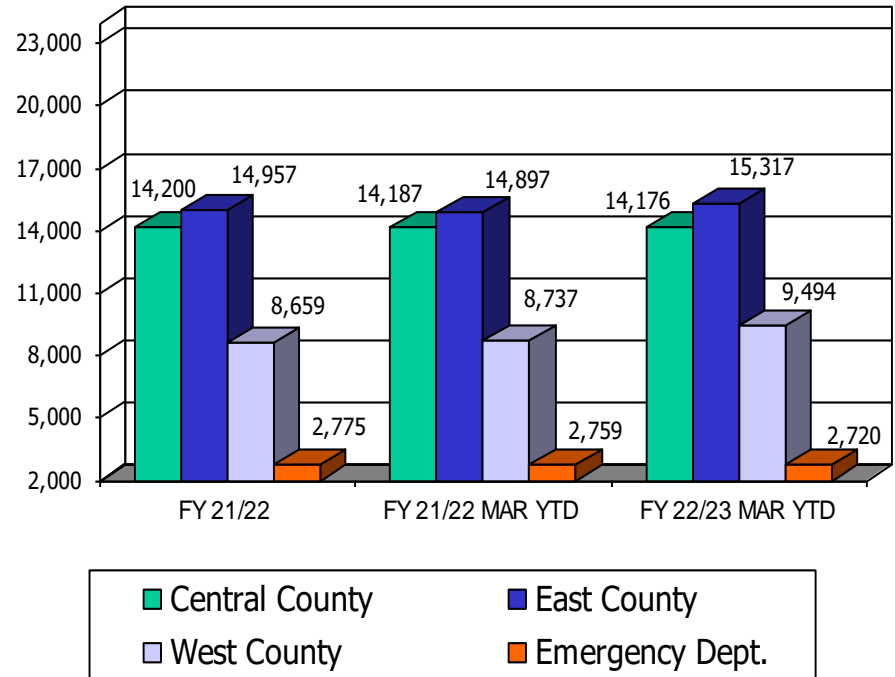
NOTES: Discharges include Psych. Outpatient visits exclude Psych Emergency visits and minimal visits.
"ALL OTHER" includes Private Pay, Insurance and Other Financial Class.

CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT CONTRA COSTA REGIONAL MEDICAL CENTER & HEALTH CENTERS FISCAL YEAR COMPARISON

AVERAGE MONTHLY OUTPATIENT VISITS



AVERAGE MONTHLY OUTPATIENT VISITS BY REGION



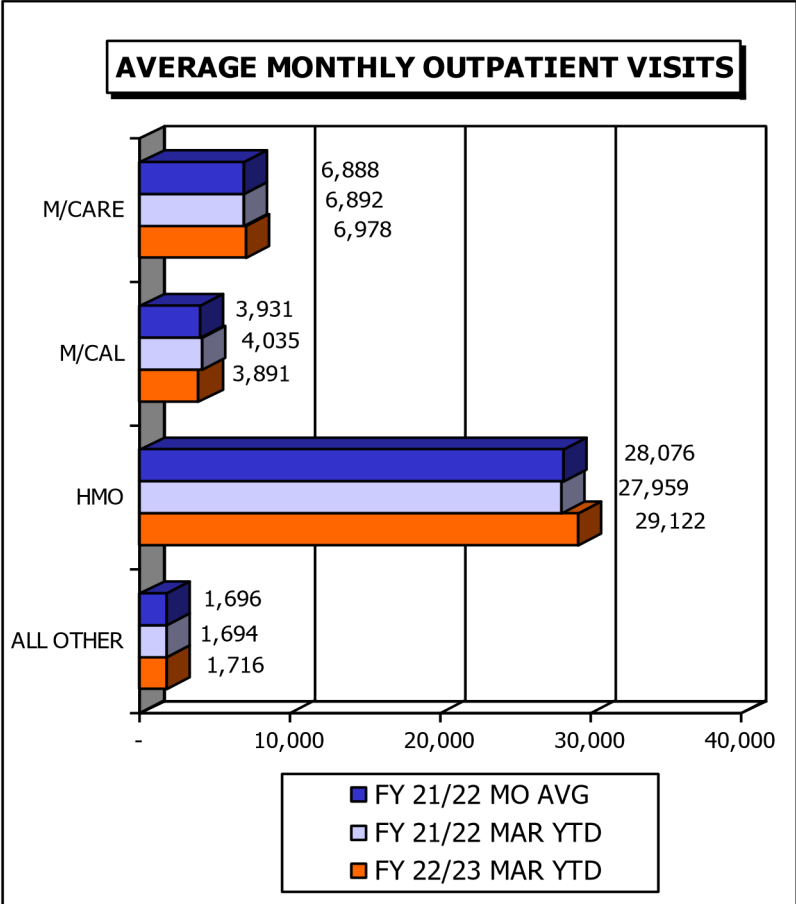
NOTES: OP Visits volume were adjusted starting March 2020 to exclude COVID-19 testing and TeleHealth visits performed by non-billable providers. Outpatient visits exclude Psych Emergency visits and minimal visits.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTH CENTERS
MEDICAL OUTPATIENT VISITS BY CLINIC
FISCAL YEAR AVERAGE COMPARISONS**

	<u>YTD 18/19</u> <u>AVERAGE</u>	<u>YTD 19/20</u> <u>AVERAGE</u>	<u>YTD 20/21</u> <u>AVERAGE</u>	<u>YTD 21/22</u> <u>AVERAGE</u>	<u>YTD 22/23</u> <u>AVERAGE</u>
CONCORD ADULT MED	178	170	157	212	336
CONCORD CLINIC	1,873	2,590	1,829	1,995	1,818
CONCORD SBC DENTAL (MEADOW ELEM.)	16	38	4	40	31
CONCORD RESPITE DENTAL	54	40	3	41	47
CONCORD HEALTHY START	0	6	4	0	0
CONCORD2 CLINIC	1,250	1,140	1,332	1,393	1,452
MARTINEZ DENTAL	346	266	240	282	265
MARTINEZ FAMILY PRACTICE CL	2,916	2,774	3,130	2,647	2,743
MARTINEZ ADULT MED	129	90	116	128	187
MARTINEZ HEALTHY START	218	184	121	181	209
MARTINEZ SPECIALTY CLINIC	5,406	4,965	5,163	5,242	5,305
MARTINEZ WELLNESS CLINIC ADULT MED	458	249	252	210	274
MARTINEZ WELLNESS CLINIC	1,469	1,543	2,277	1,551	1,400
MARTINEZ WELLNESS MENTAL HEALTH	299	298	290	278	109
WILLOW PASS CLINIC	149	107	0	0	0
SUBTTL CENTRAL COUNTY	14,761	14,460	14,918	14,200	14,176
ANTIOCH ADULT MED	321	388	277	278	457
ANTIOCH CLINIC	2,657	2,516	2,584	2,502	2,162
ANTIOCH HEALTHY START	15	21	10	1	0
ANTIOCH SBC DVHS DENTAL	6	2	0	0	0
ANTIOCH SBC FREMONT DENTAL	18	23	3	20	15
ANTIOCH SBC KIMBALL DENTAL	3	0	0	0	0
ANTIOCH SBC TURNER DENTAL	13	11	0	0	0
BAY POINT DENTAL	296	199	0	0	0
BAY POINT DENTAL VAN	0	0	0	0	12
BAY POINT CLINIC	255	184	0	56	441
BRENTWOOD ADULT MED	523	546	579	525	397
BRENTWOOD CLINIC	1,248	1,430	1,295	1,298	1,439
BRENTWOOD HEALTHY START	3	2	2	0	0
BRENTWOOD SBC BRENTWOOD HC DNTL	0	15	0	21	21
PITTSBURG ADULT MED	261	292	424	551	515
PITTSBURG CLINIC	8,976	8,609	9,527	8,872	9,067
PITTSBURG DENTAL	309	241	267	287	286
PHC- HCH DENTAL DELTA LANDING	0	0	0	4	11
PITTSBURG SBC HILLVIEW DENTAL	23	22	4	22	14
PIITTSBURG SBC PITTSBURG HC DNTL	0	5	0	0	0
PITTSBURG HEALTHY START	527	483	446	520	480
SUBTTL EAST COUNTY	15,454	14,989	15,418	14,957	15,317
RHC/WCHC ADULT MED	392	318	317	361	287
No RICH CNTR FOR HEALTH	701	734	795	652	678
RHC/WCHC CLINIC	7,732	7,363	8,033	7,112	7,908
RHC/WCHC DENTAL	234	153	173	160	186
WCHC HOMELESS VAN DENTAL	0	2	0	12	12
WCHC SBC BROOKSIDE DENTAL	25	17	0	1	0
WCHC SBC DE ANZA DENTAL	12	11	0	5	6
WCHC SBC EL CERRITO DENTAL	7	4	0	0	0
WCHC SBC HELMS ELEMENTARY DENTAL	0	0	0	5	16
WCHC SBC KENNEDY DENTAL	40	47	6	45	31
WCHC SBC RICHMOND DENTAL	19	15	0	4	10
WCHC SBC PEDIATRICS KHS	140	85	0	76	123
RHC/WCHC SBC BEHAVIORAL HL	0	0	16	2	0
RHC/WCHC HEALTHY START	281	284	233	224	237
SUBTTL WEST COUNTY	9,583	9,033	9,573	8,659	9,494
EMERGENCY DEPT [1]	2,913	2,683	2,400	2,775	2,720
TOTAL CLINICS	42,711	41,165	42,309	40,591	41,707

Note:
[1] Excludes PES.

CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT CONTRA COSTA REGIONAL MEDICAL CENTER & HEALTH CENTERS FISCAL YEAR COMPARISON



NOTES: OP Visits volume were adjusted starting March 2020 to exclude COVID-19 testing and TeleHealth visits performed by non-billable providers.
 "ALL OTHER" includes Private Pay, Insurance and Other Financial Class.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTH CENTERS
MEDICAL OUTPATIENT VISITS BY PAYOR
FISCAL YEAR 2022/2023**

MONTH	[1]	[2]	HMO														OTHER				GRAND TOTAL		
	MEDI CARE	MEDI CARE/CAL XOVER	MEDI CAL	MEDICAL HPEP	BHC	HP AFDC	HP OTMCAL	HP SPD	HP MCE (TRANS)	HP MCE (NEW)	HP HLT F.MCAL	HP M-XOVER	HP M-SR	HP PVT	HP HIX	TTL HMO	PVT PAY (CASH)	INS	ID/ JAIL	ID/ OTHER		CHDP OTHER	TOTAL OTHER
JULY	3,955	2,143	2,973	392	-	8,853	91	3,243	-	9,860	782	-	-	1,861	-	24,690	502	943	116	54	-	170	35,768
AUGUST	4,874	2,418	3,647	376	-	11,461	111	3,785	-	11,678	1,174	-	-	2,206	-	30,415	636	1,507	144	76	-	220	44,093
SEPTEMBER	4,795	2,367	3,680	374	-	10,680	107	3,824	-	11,124	1,021	-	-	2,014	-	28,770	487	1,665	151	54	-	205	42,343
OCTOBER	4,876	2,404	3,541	407	-	11,479	109	3,928	-	11,903	1,246	-	-	2,164	-	30,829	348	1,299	146	44	-	190	43,894
NOVEMBER	4,393	2,256	3,367	362	-	10,920	123	3,669	-	10,843	1,171	-	-	1,937	-	28,663	331	988	137	41	-	178	40,538
DECEMBER	4,341	2,085	3,145	323	-	10,506	82	3,416	-	10,547	1,036	-	-	1,950	-	27,537	348	955	127	40	-	167	38,901
JANUARY	4,790	2,241	3,629	354	-	11,195	120	3,716	-	11,434	1,025	-	-	2,195	-	29,685	275	962	145	26	-	171	42,107
FEBRUARY	5,725	1,070	3,557	424	-	11,001	117	3,415	-	10,800	1,077	-	-	1,960	-	28,370	297	940	115	28	-	143	40,526
MARCH	7,005	1,068	4,012	454	-	12,651	153	4,077	-	12,880	1,188	-	-	2,195	-	33,144	329	1,044	119	20	-	139	47,195
APRIL	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
MAY	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
JUNE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL VISITS YTD	44,754	18,052	31,551	3,466	-	98,746	1,013	33,073	-	101,069	9,720	-	-	18,482	-	262,103	3,553	10,303	1,200	383	-	1,583	375,365
YTD 22/23 AVG	4,972	2,006	3,506	385	0	10,972	113	3,674	0	11,230	1,080	0	0	2,053	0	29,122	395	1,145	133	43	0	176	41,707
FY 21/22 AVG	4,460	2,428	3,493	438	0	10,176	86	3,729	0	10,835	1,105	0	0	2,145	0	28,076	367	1,075	130	124	0	254	40,591
VARIANCE	512	(422)	13	(53)	0	796	27	(55)	0	395	(25)	0	0	(92)	0	1,046	28	70	3	(81)	0	(78)	1,116
YTD Workdays	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187	187
FY 22/23 Visits per Wkday	239	97	169	19	0	528	5	177	0	540	52	0	0	99	0	1,402	19	55	6	2	0	8	2,007
Average Workdays	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21	21
FY 21/22 Visits per Wkday	208	139	159	21	0	456	3	201	0	556	48	0	0	112	0	1,376	18	94	6	2	0	8	2,023

Notes:

- [1] Medicare includes Medicare Part B.
- [2] Medicare/Medi-cal Crossover includes Medicare Part B/Medi-cal Crossover.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTH CENTERS
FY 22-23 BUDGET STATUS
Feb-23
(In Millions)**

	FY 22/23 Budget	FEBRUARY 2023 Projection	(Over) Under Budget
Expenditures:			
Salaries & Employee Benefits	\$510.88	\$487.16	\$23.72
Services & Supplies ^[3]	\$247.96	\$310.09	(\$62.13)
Capital ^[8]	\$25.47	\$25.47	\$0.00
Total Expenditures	\$784.31	\$822.72	(\$38.40)
Revenues:			
Medicare	\$41.67	\$41.85 ^[6]	(\$0.18)
Medi-Cal ^[1]	\$443.30	\$488.35	(\$45.05)
Other Revenue ^[2]	\$160.63	\$161.68 ^{[5][7]}	(\$1.05)
Capital ^[8]	\$25.47	\$25.47	\$0.00
Total Revenues	\$671.07	\$717.35	(\$46.28)
Net County Cost	\$113.25 ^[4]	\$105.36	\$7.88

NOTES:

- [1] Includes Direct Service and Supplemental Payments
- [2] Includes Private Pay, Detention, Other Income.
- [3] Includes Measure X \$40 M.
- [4] Includes \$73.2M plus \$40M Measure X
- [5] Includes estimated FY22/23 ARPA COVID Funding.
- [6] Includes Medicare Reserve W/O & recognized revenue items adjustments.
- [7] Includes HSD PSRP - Pandemic Service Relief Payment \$6.1M in projection.
- [8] Includes Leases, Equipment, Projects

ACCOUNTS RECEIVABLE

	<u>DECEMBER</u>	<u>JANUARY</u>	<u>FEBRUARY</u>
EPIC Total Accounts Receivable	\$108,859,080	\$104,835,171	\$97,577,840
Accounts Receivable over 180 days	\$25,904,936	\$20,561,892	\$20,173,347
Percent Accounts Receivable over 180 days	24%	20%	21%
Gross Days of Revenue in Accounts Receivable *	53	51	47

* Accounts Receivable at End of the Month / Average Daily Revenue for the 3 Most Current Mon

BUDGET SUMMARY BY DIVISION

	FY 2023-24 RECOMMENDED BUDGET	FY 2023-24 BUDGETED REVENUE	FY 2023-24 RECOMMENDED NET COUNTY COST
ENTERPRISE FUNDS			
Hospital, Clinics and Capital	\$807,131,000	\$691,886,000	\$115,245,000
Contra Costa Health Plan Medi-Cal	\$1,101,813,034	\$1,101,813,034	\$0
Contra Costa Health Plan Commercial	\$79,722,869	\$74,986,869	\$4,736,000
ENTERPRISE FUNDS TOTAL	\$1,988,666,903	\$1,868,685,903	\$119,981,000
GENERAL FUND UNITS			
Mental Health	\$354,613,000	\$316,308,000	\$ 38,305,000
Alcohol and Other Drugs	\$35,066,717	\$33,131,717	\$1,935,000
Homeless Programs	\$21,689,934	\$19,005,934	\$2,684,000
Public Health	\$99,482,669	\$77,242,669	\$22,240,000
Environmental Health	\$25,950,000	\$25,950,000	\$0
Detention	\$42,895,223	\$2,388,223	\$40,507,000
Conservatorship	\$5,167,659	\$1,515,659	\$3,652,000
California Children's Service	\$13,603,880	\$11,165,880	\$2,438,000
GENERAL FUND TOTAL	\$598,469,082	\$486,708,082	\$111,761,000
TOTAL ENTERPRISE & GENERAL FUNDS*	\$2,587,135,985	\$2,355,393,985	\$231,742,000**

* Excludes \$200M in reconciling items from Expense and Revenue

** Net County Cost includes \$63,750,000 in Measure X revenue

NET COUNTY COST COMPARISON

	22-23 BUDGET	23-24 CHANGES	23-24 TOTAL	MEASURE X*
ENTERPRISE FUNDS				
EF-1 Hospital, Clinics and Capital	\$115,245,000	\$2,000,000	\$115,245,000	\$42,000,000
Contra Costa Health Plan Commercial	\$4,736,000	\$0	\$4,736,000	\$750,000
ENTERPRISE FUNDS TOTAL	\$117,981,000	\$2,000,000	\$119,981,000	\$42,750,000
GENERAL FUND UNITS				
Mental Health	\$17,305,000	\$21,000,000	\$38,305,000	\$21,000,000
Alcohol and Other Drugs	\$1,935,000	\$0	\$1,935,000	\$0
Homeless Programs	\$2,684,000	\$0	\$2,684,000	\$0
Public Health	\$22,240,000	\$0	\$22,240,000	\$0
Environmental Health	\$0	\$0	\$0	\$0
Detention	\$40,507,000	\$0	\$40,507,000	\$0
Conservatorship	\$3,652,000	\$0	\$3,652,000	\$0
California Children's Service	\$2,438,000	\$0	\$2,438,000	\$0
Public Administrator	\$344,000	(\$344,000)	\$0	\$0
GENERAL FUND TOTAL	\$91,105,000	\$20,656,000	\$111,761,000	\$21,000,000
TOTAL ENTERPRISE & GENERAL FUND	\$209,086,000	\$22,656,000	\$231,742,000	\$63,750,000

*Measure X amount included in the 23/24 NCC total amount

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTH CENTERS
STATISTICAL COMPARISON**

MARCH 2023

	This Month	This Month Last Year	This Year To Date	Last Year To Date		
TOTAL PATIENTS ADMITTED	663	768	6,286	6,338		
CCU	33	40	318	333		
MEDICAL TELEMETRY	33	29	277	216		
MEDICAL	110	120	970	960		
SURGICAL	79	95	699	878		
IMCU	77	87	663	605		
PERINATAL	4	6	47	54		
POSTPARTUM	129	158	1,340	1,304		
NURSERY II	13	6	84	91		
SUB-TOTAL MEDICAL	478	541	4,398	4,441		
PSYCH UNITS	57	67	541	600		
NURSERY I (WELL BABY)	128	160	1,347	1,297		
TOTAL PATIENTS DISCHARGED	675	778	6,294	6,341		
CCU	14	12	161	119		
MEDICAL TELEMETRY	50	40	354	289		
MEDICAL	131	150	1,150	1,221		
SURGICAL	89	131	834	1,029		
IMCU	43	44	413	331		
PERINATAL	4	3	43	49		
POSTPARTUM	142	161	1,375	1,310		
NURSERY II	25	29	189	221		
SUB-TOTAL MEDICAL	498	570	4,519	4,569		
PSYCH UNITS	54	67	534	606		
NURSERY I (WELL BABY)	123	141	1,241	1,166		
TOTAL PATIENT DAYS	3,960	3,633	34,533	33,462		
CCU	126	105	1,218	1,305		
MEDICAL TELEMETRY	226	231	2,068	1,605		
MEDICAL	768	714	6,377	6,520		
SURGICAL	788	625	6,595	6,289		
IMCU	240	258	2,236	2,238		
PERINATAL	113	118	1,146	1,042		
POSTPARTUM	223	268	2,302	2,187		
NURSERY II	99	96	979	874		
SUB-TOTAL MEDICAL	2,583	2,415	22,921	22,060		
PSYCH UNITS	1,202	1,000	9,654	9,547		
NURSERY I (WELL BABY)	175	218	1,958	1,855		
AVERAGE DAILY CENSUS	127.74	117.19	126.03	122.12		
CCU	4.06	3.39	4.45	4.76		
MEDICAL TELEMETRY	7.29	7.45	7.55	5.86		
MEDICAL	24.77	23.03	23.27	23.80		
SURGICAL	25.42	20.16	24.07	22.95		
IMCU	7.74	8.32	8.16	8.17		
PERINATAL	3.65	3.81	4.18	3.80		
POSTPARTUM	7.19	8.65	8.40	7.98		
NURSERY II	3.19	3.10	3.57	3.19		
SUB-TOTAL MEDICAL	83.32	77.90	83.65	80.51		
PSYCH UNITS	38.77	32.26	35.23	34.84		
NURSERY I (WELL BABY)	5.65	7.03	7.15	6.77		
OCCUPANCY %						
	LIC BEDS	AVAIL BEDS				
CCU	8	8	50.81	42.34	55.57	59.53
MEDICAL TELEMETRY	8	8	91.13	93.15	94.34	73.22
MEDICAL	30	30	82.58	76.77	77.58	79.32
SURGICAL	30	30	84.73	67.20	80.23	76.51
IMCU	10	10	77.42	83.23	81.61	81.68
PERINATAL	11	10	36.45	38.06	41.82	38.03
POSTPARTUM	21	21	34.25	41.17	40.01	38.01
NURSERY LEVEL II	6	6	53.23	51.61	59.55	53.16
SUB-TOTAL MEDICAL *	118	117	71.22	66.58	71.50	68.81
PSYCH UNITS	43	43	90.17	75.02	81.94	81.03
TOTAL *	161	160	76.31	68.85	74.30	72.10

(g)

(g)

(g)

(a)

(g)

* NOTE: Excludes well newborn bassinets (Nursery Level I).

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTH CENTERS
STATISTICAL COMPARISON**

MARCH 2023

	This Month	This Month Last Year	This Year To Date	Last Year To Date	
TOTAL OUTPATIENT VISITS	47,765	46,886	380,497	371,269	
ANTIOCH CLINIC	2,488	2,924	19,460	23,148	(f)
ANTIOCH ADULT MEDICINE CL	575	327	4,111	2,218	
ANTIOCH HEALTHY START	0	0	0	8	
ANTIOCH - SBC FREMONT DENTAL	26	16	138	173	
BRENTWOOD CLINIC/HOME/SNF	1,748	1,437	12,947	11,549	(f)
BRENTWOOD ADULT MEDICINE CL	484	525	3,572	4,964	(f)
BRENTWOOD SBC BRENTWOOD HC DENTAL	24	33	188	176	
BAY POINT FHC	657	0	3,972	0	
BAY POINT - DENTAL VAN	17	0	105	0	
PITTSBURG ADULT MEDICINE CL	410	645	4,632	5,082	(f)
PITTSBURG - DENTAL	299	375	2,577	2,578	(f)
PHC-HCH DENTAL DELTA LANDING	16	10	96	10	
PITTSBURG - SBC HILLVIEW DENTAL	8	24	127	192	
PITTSBURG CLINIC	10,441	10,420	81,607	79,337	(f)
PITTSBURG HEALTHY START	583	636	4,325	4,637	(f)
SUB-TOTAL EAST COUNTY	17,776	17,372	137,857	134,072	(f)
CONCORD CLINIC	1,853	2,211	16,362	18,103	(f)
CONCORD 2 CLINIC	1,566	1,704	13,064	12,256	(f)
CONCORD ADULT MEDICINE CL	429	283	3,020	1,723	(f)
CONCORD SBC DENTAL (MEADOW)	28	48	275	378	
CONCORD - RESPITE DENTAL	54	55	423	364	
FAMILY PRACTICE	3,233	2,995	24,690	24,075	(f)
MTZ ADULT MEDICINE CL	227	90	1,688	933	(f)
MTZ DENTAL CLINIC	267	351	2,389	2,506	(f)
MTZ HEALTHY START	223	228	1,877	1,615	(f)
MTZ SPECIALTY CLINIC	5,961	5,942	47,743	47,191	(f)
MWC CLINIC/ADULT MED/MH	2,098	2,167	16,045	18,538	(f)
SUB-TOTAL CENTRAL COUNTY	15,939	16,074	127,576	127,682	(f)
RHC/WCHC CLINIC	9,037	8,175	71,169	64,340	(f)
RHC/WCHC SBC BEHAVIORIAL HEALTH/WCHC SBC PEDIATRICS KHS	122	104	1,107	676	
RHC/WCHC HEALTHY START	280	257	2,133	2,039	(f)
NO. RICH CNTR FOR HEALTH	796	751	6,104	5,945	
RHC/WCHC DNTAL & SBC -DE ANZA & RHC HIGH & EL CERRITO & KENNEDY - DENTAL WCHC HOMELESS VAN & BROOKSIDE & HELMS ELEM. - DENTAL	419	289	2,357	1,898	(f)
RHC/WCHC ADULT MEDICINE	168	426	2,579	3,738	(f)
SUB-TOTAL WEST COUNTY	10,822	10,002	85,449	78,636	
EMERGENCY ROOM	2,658	2,732	24,483	24,830	
PSYCH EMERGENCY	570	706	5,132	6,049	(b)
SUB-TOTAL EMERGENCY DEPT	3,228	3,438	29,615	30,879	
TOTAL LIVE BIRTHS *	133	161	1,378	1,329	(c)
TOTAL PHYSICAL THERAPY - 15 MIN	5,241	5,475	41,697	44,880	
Inpatient	1,241	1,429	10,622	12,291	
Outpatient	4,000	4,046	31,075	32,589	
TOTAL OCCUPATIONAL THERAPY - 15 MIN	3,366	3,241	26,235	28,733	
Inpatient	1,874	1,828	15,961	16,721	
Outpatient	1,492	1,413	10,274	12,012	
TOTAL RADIOLOGY RVS UNITS	5,226	5,022	42,184	41,590	(e)
Inpatient	492	542	4,520	4,939	
Outpatient	4,734	4,480	37,664	36,651	
TOTAL CT SCAN PROCEDURES	1,204	1,275	9,346	9,560	
Inpatient	274	259	2,343	2,272	
Outpatient	930	1,016	7,003	7,288	
TOTAL NUCLEAR MED RVS UNITS	27	30	248	253	
Inpatient	10	12	97	112	
Outpatient	17	18	151	141	

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTH CENTERS
STATISTICAL COMPARISON**

MARCH 2023

	This Month	This Month Last Year	This Year To Date	Last Year To Date	
TOTAL LAB PROCEDURES	75,496	73,625	578,122	617,360	(e)
Inpatient	11,834	12,224	110,395	114,467	
Outpatient	63,662	61,401	467,727	502,893	
TOTAL PATHOLOGY PROCEDURES	3,290	3,450	25,432	29,499	(e)
Inpatient	283	240	1,946	1,856	
Outpatient	3,007	3,210	23,486	27,643	
TOTAL OPERATING ROOM MINUTES	33,660	31,170	268,260	234,570	
Inpatient	12,150	11,910	105,030	92,970	
Outpatient	21,510	19,260	163,230	141,600	
TOTAL SURGERY	364	343	2,928	2,565	
Inpatient	140	150	1,261	1,162	
Outpatient (includes PACU)	224	193	1,667	1,403	
TTL CARDIOPULMONARY/RESPIRATORY THERAPY	2,763	1,997	21,956	21,927	(e)
Inpatient	2,668	1,871	20,945	21,136	
Outpatient	95	126	1,011	791	
TTL PULMONARY FUNCTION SVC	138	132	1,199	1,134	
Inpatient	3	0	4	2	
Outpatient	135	132	1,195	1,132	
TOTAL EEG PROCEDURES	52	25	172	167	
Inpatient	2	20	11	59	
Outpatient	50	5	161	108	
TOTAL EKG RVS UNITS	1,883	1,965	16,156	16,683	(e)
Inpatient	475	559	4,733	4,911	
Outpatient	1,408	1,406	11,423	11,772	
TOTAL EMG PROCEDURES	72	104	469	709	
Inpatient	0	0	0	0	
Outpatient	72	104	469	709	
TOTAL PHARMACY PRESCRIPTIONS	7,330	8,373	69,816	95,239	(d)
Inpatient	7,227	8,303	69,155	94,628	
Outpatient	103	70	661	611	
	FYE 2022	FYE 2021	FYE 2020	FYE 2019	
CASE MIX INDEX					
Medicare	1.301625	1.346536	1.417241	1.338626	

NOTES:

- (a) No available beds in Nursery I, only bassinets.
- (b) Mental Health Division Outpatient Visits/MHS 464 report. This month's number is based on FY22/23 prior month YTD average. Data not available.
- (c) CCRMC Birth Register.
- (d) HCAI (formerly known as OSHPD) Statistics (/Prescription Statistics and Inventory report manually prepared by Pharmacy staff.
- (e) HCAI (formerly known as OSHPD) Qty Reports starting March 2020 were revised due to new Procedure Codes added. Mostly for Clinical Lab and Radiology. Source: RES RHB2312.
- (f) OP Visits volume reports were adjusted starting March 2020 to exclude COVID-19 Testing and Telehealth Visits performed by non-billable providers.
- (g) 4D Psychiatric unit (20 beds) was reopened on 10/26/20.

CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
SCHOOL BASED CLINICS
NUMBER OF VISITS
PER PUBLIC HEALTH DEPT.
FISCAL YEARS COMPARISON
FY 2019/2020 thru YTD 03/31/2023

	2022						2023						FY 22/23	FY 22/23	FY 21/22	FY 20/21	FY 19/20
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	YTD	Mo. Avg.	Mo. Avg.	Mo. Avg.	Mo. Avg.
West County																	
Crespi Middle School	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7
Deanza High School	45	32	77	64	57	64	74	59	100			572	64	24	-	79	
Deanza High-Dental	-	-	7	11	13	8	7	5	8			59	7	5	-	11	
Dejean Middle School	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7	
El Cerrito High School	-	14	34	41	30	22	29	26	41			237	26	19	-	40	
El Cerrito High -Dental	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	
Helms Middle School	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	17	
Helms Middle School - Behavioral Hlth	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	12	
Helms Middle School - Dental	-	-	-	16	13	5	18	24	34			110	12	3	-	-	
Hercules High School	-	1	20	13	30	16	20	20	26			146	16	15	-	36	
John Swett High	-	-	9	6	5	10	4	7	7			48	5	3	-	14	
Kennedy High School	5	2	23	36	19	24	49	25	52			235	26	12	-	30	
Kennedy High School - Dental	25	30	29	23	27	27	49	29	42			281	31	39	-	47	
Pinole High School	-	-	49	45	49	25	70	44	65			347	39	23	-	26	
Pinole Middle School	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Richmond High School	-	7	47	49	49	49	68	48	45			362	40	15	-	60	
Richmond High School-Dental	-	-	5	21	9	11	15	17	13			91	10	5	-	15	
	75	86	300	325	301	261	403	304	433	-	-	2,488	276	164	12	393	
Pittsburg																	
Antioch High School	31	19	35	23	19	26	22	36	53			264	29	17	-	32	
Antioch Middle School	7	7	7	-	-	-	-	-	-			21	2	5	-	7	
Bidwell High	-	2	6	7	-	3	5	4	4			31	3	5	-	13	
Black Diamond High School/Riverside	-	-	11	13	9	5	7	13	4			62	7	5	-	11	
Deer Valley High School	-	14	39	30	31	20	30	30	45			239	27	16	-	41	
Dozier Libbey	-	-	-	6	13	11	25	24	10			89	10	-	-	-	
Freedom High	-	32	35	18	34	32	37	34	27			249	28	12	-	25	
Fremont Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	12	
Heights Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	10	
Hillview Middle School	-	-	-	-	-	-	-	-	-			-	-	-	-	17	
Hillview Middle - Dental	10	23	14	29	14	10	9	10	8			127	14	22	4	22	
Kimball Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	8	
Liberty High	-	18	38	28	39	29	37	46	24			259	29	10	-	41	
Marina Vista Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	15	
Marsh Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	13	
Mission Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	16	
Parkside Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	14	
Pittsburg High School	18	80	55	46	43	41	54	60	87			484	54	26	-	47	
PHC SBC BH (Behavioral Health for East County schools)	-	-	-	-	-	-	-	-	-			-	-	28	16	-	
Pittsburg High - Dental	-	-	-	-	-	-	-	-	-			-	-	-	-	5	
Turner Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	11	
	66	195	240	200	202	177	226	257	262	-	-	1,825	203	144	20	350	
Concord																	
Bel Air Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	9	
Cambridge Elementary	-	-	-	-	-	-	-	-	-			-	-	-	-	13	
Concord High School	3	6	12	20	17	18	23	21	44			164	18	9	-	20	
Meadow Homes Elementary	-	20	15	19	15	20	5	15				129	14	12	-	57	
Meadow Homes Dental	32	31	32	28	29	35	29	31	28			275	31	38	4	38	
Mt. Diablo High School	-	-	41	34	20	28	29	40	37			229	25	19	-	28	
Olympic High School	4	-	6	11	6	6	7	15	9			64	7	4	-	6	
Ygnacio Vally High School	-	-	17	22	18	16	36	32	34			175	19	14	-	24	
	39	57	123	134	105	123	144	144	167	-	-	1,036	115	96	4	195	
Bay Point																	
Bay Point HC - Van Dental	-	-	-	-	-	-	28	16	17			61	7	-	-	-	
	-	-	-	-	-	-	28	16	17	-	-	61	7	-	-	-	
Brentwood																	
Brentwood HC - Dental	15	15	28	24	20	12	17	23	24			178	20	21	-	15	
	15	15	28	24	20	12	17	23	24	-	-	178	20	21	-	15	
Antioch																	
Deer Valley High - Dental	-	-	-	-	-	-	-	-	-			-	-	-	-	2	
Fremont Elementary - Dental	22	22	7	16	5	14	23	12	26			147	16	20	3	23	
Turner Elementary - Dental	-	-	-	-	-	-	-	-	-			-	-	-	-	11	
	22	22	7	16	5	14	23	12	26	-	-	147	16	20	3	36	
GRAND TOTAL	217	375	698	699	633	587	841	756	929	-	-	5,735	637	444	39	990	

NOTE: School Based Clinics were put on hold in January 2022 due to Covid Omicron surge. School Based Clinics have slowly resumed accepting appointments beginning August 2022.

CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
INPATIENT ADMISSIONS BY COUNTY LOCATION

YTD MARCH 2023

COUNTY/UNIT/MONTH	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	FY 22/23 Total	FY 22/23 Mo. Avg.	FY 21/22 Mo. Avg.	FY 20/21 Mo. Avg.	FY 19/20 Mo. Avg.
Central																	
Medical	169	164	151	164	215	188	182	14	187				1,434	159.3	178.8	174.3	190.9
Psych	13	22	14	24	23	22	23	-48	21				114	12.7	21.4	21.4	15.4
Total Admissions	182	186	165	188	238	210	205	-34	208				1,548	172.0	200.2	195.7	206.3
EAST																	
Medical	247	219	210	188	189	222	230	67	191				1,763	195.9	203.0	189.8	195.5
Psych	8	13	16	18	19	19	20	-38	11				86	9.6	20.8	20.9	12.6
Total Admissions	255	232	226	206	208	241	250	29	202				1,849	205.4	223.8	210.8	208.1
WEST																	
Medical	220	219	265	233	226	273	192	8	224				1,860	206.7	238.1	227.6	235.5
Psych	10	12	19	14	20	20	12	-36	16				87	9.7	15.3	13.6	11.7
Total Admissions	230	231	284	247	246	293	204	-28	240				1,947	216.3	253.3	241.2	247.2
OTHER																	
Medical	34	68	23	33	31	2	24	469	4				688	76.4	26.0	23.2	23.4
Psych	20	21	6	7	6	5	12	168	9				254	28.2	8.1	7.9	6.4
Total Admissions	54	89	29	40	37	7	36	637	13				942	104.7	34.1	31.1	29.8
TOTAL																	
Medical Total	670	670	649	618	661	685	628	558	606				5,745	638.3	645.8	614.8	645.3
Psych Total	51	68	55	63	68	66	67	46	57				541	60.1	65.5	63.8	46.1
Grand Total	721	738	704	681	729	751	695	604	663				6,286	698.4	711.3	678.7	691.4

NOTES:

- Based on patient's most current zip code at time of report; includes prior adjustments.
- 4D Psychiatric Unit was reopened on 10/26/20.
- February 2023 was adjusted to conform with EPIC Inpatient Admits Report (RES0159).

Source: EPIC - Patient Origin Report (RHB 3360)

CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER & HEALTH CENTER
OUTPATIENT VISITS & ED VISITS BY REGION

YTD MARCH 2023

Source: EPIC Patient Origin Report (RHB 3360)

REGION	Jul-22	Aug-22	Sept-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	FY 22/23 Total	FY 22/23 Mo. Avg.	FY 21/22 Mo. Avg.	FY 20/21 Mo. Avg.
Central																
OP Visits																
Antioch Health Center	83	75	91	119	119	129	105	148	127				996	110	88	91
Bay Point Health Center	32	17	42	74	32	47	70	67	80				461	51	5	0
Brentwood Health Center	58	100	84	75	103	77	63	73	110				743	83	70	55
Concord Health Center	2,595	2,597	3,094	3,025	2,773	2,842	2,887	2,859	3,131				25,803	2,867	2,811	2,460
Martinez Health Center	5,399	6,170	6,363	6,652	5,749	6,114	5,927	6,041	7,093				55,508	6,168	6,167	6,926
Pittsburg Health Center	502	647	650	654	582	557	622	692	611				5,517	613	645	616
West County Health Center	178	215	276	278	271	292	253	249	271				2,283	254	195	191
Willow Pass Wellness Center	0	0	0	0	0	0	0	0	0				0	0	0	0
*Other	31	55	34	17	7	2	0	1	1				148	16	27	173
sub-total	8,878	9,876	10,634	10,894	9,636	10,060	9,927	10,130	11,424	0	0	0	91,459	10,162	10,008	10,512
ED Visits	966	881	908	831	913	941	869	820	900				8,029	892	940	799
Total	9,844	10,757	11,542	11,725	10,549	11,001	10,796	10,950	12,324	0	0	0	99,488	11,054	10,948	11,311
EAST																
OP Visits																
Antioch Health Center	2,095	2,568	2,412	2,651	2,318	2,289	2,306	2,359	2,857				21,855	2,428	2,635	2,692
Bay Point Health Center	291	332	380	303	232	286	366	502	526				3,218	358	47	0
Brentwood Health Center	1,314	1,748	1,739	1,707	1,735	1,589	1,516	1,693	2,045				15,086	1,676	1,698	1,763
Concord Health Center	512	591	714	711	641	748	690	652	697				5,956	662	650	530
Martinez Health Center	1,848	2,028	2,043	2,081	1,919	2,075	1,900	1,834	2,365				18,093	2,010	1,991	2,090
Pittsburg Health Center	8,104	9,549	9,516	9,697	8,588	9,040	8,961	9,284	10,645				83,384	9,265	9,082	9,549
West County Health Center	152	166	227	242	251	253	219	235	251				1,996	222	144	168
Willow Pass Wellness Center	0	0	0	0	0	0	0	0	0				0	0	0	0
*Other	17	28	30	22	22	18	10	6	4				157	17	27	99
sub-total	14,333	17,010	17,061	17,414	15,706	16,298	15,968	16,565	19,390	0	0	0	149,745	16,638	16,273	16,891
ED Visits	676	697	628	655	645	631	595	590	659				5,776	642	644	560
Total	15,009	17,707	17,689	18,069	16,351	16,929	16,563	17,155	20,049	0	0	0	155,521	17,280	16,917	17,451

CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER & HEALTH CENTER
OUTPATIENT VISITS & ED VISITS BY REGION

YTD MARCH 2023

Source: EPIC Patient Origin Report (RHB 3360)

REGION	Jul-22	Aug-22	Sept-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	FY 22/23 Total	FY 22/23 Mo. Avg.	FY 21/22 Mo. Avg.	FY 20/21 Mo. Avg.
WEST																
OP Visits																
Antioch Health Center	29	23	36	50	55	69	62	74	71				469	52	40	47
Bay Point Health Center	16	5	25	45	6	29	56	63	66				311	35	2	0
Brentwood Health Center	35	60	67	35	79	63	40	41	44				464	52	34	18
Concord Health Center	92	109	96	115	101	135	108	125	148				1,029	114	139	91
Martinez Health Center	1,743	1,935	1,972	1,964	1,728	1,796	1,746	1,734	2,108				16,726	1,858	1,922	2,076
Pittsburg Health Center	208	234	238	223	218	260	250	360	250				2,241	249	228	194
West County Health Center	6,748	8,194	8,238	9,516	8,355	8,389	8,770	8,195	9,965				76,370	8,486	8,015	8,780
Willow Pass Wellness Center	0	0	0	0	0	0	0	0	0				0	0	0	0
*Other	17	320	388	268	106	63	21	13	5				1,201	133	19	90
sub-total	8,888	10,880	11,060	12,216	10,648	10,804	11,053	10,605	12,657	0	0	0	98,811	10,979	10,399	11,296
ED Visits	1,065	1,075	1,107	1,131	1,019	1,058	966	961	966				9,348	1,039	1,043	904
Total	9,953	11,955	12,167	13,347	11,667	11,862	12,019	11,566	13,623	0	0	0	108,159	12,018	11,442	12,200
**OTHER																
OP Visits																
Antioch Health Center	21	117	112	-52	101	-112	141	27	34				389	43	38	44
Bay Point Health Center	2	28	-3	0	9	-6	15	40	2				87	9	3	0
Brentwood Health Center	28	159	-3	20	52	-51	98	54	57				414	46	41	38
Concord Health Center	52	300	11	-14	198	-179	267	-12	41				664	74	74	67
Martinez Health Center	383	974	336	248	575	-88	850	384	443				4,105	456	439	496
Pittsburg Health Center	151	1,003	-165	189	465	-454	711	71	251				2,222	247	302	311
West County Health Center	169	510	187	156	391	-137	491	185	235				2,187	243	210	228
Willow Pass Wellness Center	0	0	0	0	0	0	0	0	0				0	0	0	0
*Other	-14	372	316	67	32	15	8	0	3				799	89	30	26
sub-total	792	3,463	791	614	1,823	-1,012	2,581	749	1,066	0	0	0	10,867	1,207	1,137	1,210
ED Visits	170	211	154	139	148	121	148	106	133				1,330	148	148	137
Total	962	3,674	945	753	1,971	-891	2,729	855	1,199	0	0	0	12,197	1,355	1,285	1,347
OP Visits Total	32,891	41,229	39,546	41,138	37,813	36,150	39,529	38,049	44,537	0	0	0	350,882	38,986	37,816	39,909
ED Visits Total	2,877	2,864	2,797	2,756	2,725	2,751	2,578	2,477	2,658	0	0	0	24,483	2,721	2,775	2,400
Grand Total	35,768	44,093	42,343	43,894	40,538	38,901	42,107	40,526	47,195	0	0	0	375,365	41,707	40,591	42,309

Notes:

- * Beginning the month of January 21 and onward, OTHER was added on 02/19/21 to all regions to reflect all Public Health Department Clinics (PBH) that were not mapped to a health center.
- ** The OTHER region is designed to catch patients for whom there was no sufficient data to determine a region (Zip code). This will change over time as patient data gets updated therefore, some months may have negative numbers.
 - A. Based on patient's most current zip code at time of report; includes prior adjustments.
 - B. ED Visits exclude Psych ER Visits.
 - C. Report RHB 3360 was rerun on 02/19/21 due to a reporting error of unmappable zip codes. It subsequently resulted in negative values when data was mapped and placed in the correct zip codes/regions when report was rerun later in the month.

**EAST BAY SECTION
CENSUS REPORT
EMERGENCY DEPARTMENT
4th Quarter 2022**

	<i>October</i>		<i>November</i>		<i>December</i>		<i>4th Quarter Totals</i>	
	<i>#Visits</i>	<i>IP-Admits</i>	<i>#Visits</i>	<i>IP-Admits</i>	<i>#Visits</i>	<i>IP-Admits</i>	<i>#Visits</i>	<i>IP-Admits</i>
<u>ALAMEDA COUNTY</u>								
Alameda Hospital	1,238	139	1,326	188	1,396	199	3,960	526
Alta Bates Summit - Berkeley	3,119	1,078	3,014	1,120	3,035	1,099	9,168	3,297
Alta Bates Summit - Oakland	3,150	891	3,158	916	3,253	932	9,561	2,739
Eden Medical Center	3,558	544	3,470	570	3,571	573	10,599	1,687
Highland Hospital	4,025	716	3,972	668	3,909	686	11,906	2,070
John George Psychiatric Hospital	729	208	718	178	752	214	2,199	600
Kaiser Permanente - Fremont	3,813	570	3,940	645	3,944	693	11,697	1,908
Kaiser Permanente - Oakland	5,952	1,092	5,826	1,111	5,718	1,152	17,496	3,355
Kaiser Permanente - San Leandro	6,693	868	6,880	899	6,853	941	20,426	2,708
San Leandro Hospital	2,306	227	2,352	217	2,555	286	7,213	730
St. Rose Hospital	1,852	318	1,881	275	1,988	292	5,721	885
Stanford Health Care Tri-Valley	3,286	615	3,346	622	3,396	647	10,028	1,884
UCSF Benioff Children's Hospital Oakland	3,933	514	3,904	473	3,984	445	11,821	1,432
Washington Hospital Healthcare System	4,970	505	5,126	507	5,517	552	15,613	1,564
<u>CONTRA COSTA COUNTY</u>								
Contra Costa Regional Medical Center	2,756	255	2,725	272	2,751	275	8,232	802
John Muir Med. Ctr. Concord Campus	5,035	929	5,536	988	5,514	1,040	16,085	2,957
John Muir Med. Ctr. Walnut Creek Campus	5,275	1,752	5,546	1,703	5,664	1,830	16,485	5,285
Kaiser Permanente - Antioch	6,284	480	6,893	560	6,509	580	19,686	1,620
Kaiser Permanente - Richmond	5,990	407	6,339	385	6,181	381	18,510	1,173
Kaiser Permanente - Walnut Creek	6,456	609	6,644	645	6,613	688	19,713	1,942
San Ramon Regional Medical Center	1,818	227	1,927	259	1,972	267	5,717	753
Sutter Delta Medical Center	4,226	385	4,642	455	4,570	483	13,438	1,323
<u>SOLANO COUNTY</u>								
Kaiser Permanente - Vacaville	5,073	524	5,290	563	4,971	611	15,334	1,698
Kaiser Permanente - Vallejo	5,560	599	5,821	632	5,737	670	17,118	1,901
NorthBay Medical Center	3,931	724	4,186	744	4,068	796	12,185	2,264
NorthBay VacaValley Hospital	2,307	113	2,445	130	2,369	121	7,121	364
Sutter Solano Medical Center	2,504	228	2,474	290	2,640	274	7,618	792

**EAST BAY SECTION
CENSUS MONITORING REPORT
EMERGENCY DEPARTMENT
4th Quarter 2022-2021 Comparison**

	ED VISITS			INPATIENT ADMITS		
	4th Qtr. 2022	4th Qtr. 2021	% CHANGE	4th Qtr. 2022	4th Qtr. 2021	% CHANGE
<u>ALAMEDA COUNTY</u>						
Alameda Hospital	3,960	3,208	23.44%	526	496	6.05%
Alta Bates Summit - Berkeley	9,168	8,246	11.18%	3,297	3,332	-1.05%
Alta Bates Summit - Oakland	9,561	9,226	3.63%	2,739	2,827	-3.11%
Eden Medical Center	10,599	9,193	15.29%	1,687	1,626	3.75%
Highland Hospital	11,906	11,827	0.67%	2,070	2,044	1.27%
John George Psychiatric Hospital	2,199	2,532	-13.15%	600	658	-8.81%
Kaiser Permanente - Fremont	11,697	9,606	21.77%	1,908	1,767	7.98%
Kaiser Permanente - Oakland	17,496	15,149	15.49%	3,355	3,196	4.97%
Kaiser Permanente - San Leandro	20,426	16,882	20.99%	2,708	2,366	14.45%
San Leandro Hospital	7,213	6,139	17.49%	730	671	8.79%
St. Rose Hospital	5,721	5,047	13.35%	885	775	14.19%
Stanford Health Care Tri-Valley	10,028	8,408	19.27%	1,884	1,055	78.58%
UCSF Benioff Children's Hospital Oakland	11,821	9,287	27.29%	1,432	1,305	9.73%
Washington Hospital Healthcare System	15,613	13,267	17.68%	1,564	1,383	13.09%
<u>CONTRA COSTA COUNTY</u>						
Contra Costa Regional Medical Center	8,232	8,019	2.66%	802	827	-3.02%
John Muir Med. Ctr. Concord Campus	16,085	13,856	16.09%	2,957	2,857	3.50%
John Muir Med. Ctr. Walnut Creek Campus	16,485	13,555	21.62%	5,285	4,853	8.90%
Kaiser Permanente - Antioch	19,686	15,926	23.61%	1,620	1,350	20.00%
Kaiser Permanente - Richmond	18,510	14,602	26.76%	1,173	1,127	4.08%
Kaiser Permanente - Walnut Creek	19,713	16,234	21.43%	1,942	1,846	5.20%
San Ramon Regional Medical Center	5,717	4,623	23.66%	753	718	4.87%
Sutter Delta Medical Center	13,438	10,647	26.21%	1,323	1,357	-2.51%
<u>SOLANO COUNTY</u>						
Kaiser Permanente - Vacaville	15,334	12,087	26.86%	1,698	1,632	4.04%
Kaiser Permanente - Vallejo	17,118	14,542	17.71%	1,901	1,696	12.09%
NorthBay Medical Center	12,185	10,334	17.91%	2,264	1,140	98.60%
NorthBay VacaValley Hospital	7,121	5,939	19.90%	364	437	-16.70%
Sutter Solano Medical Center	7,618	6,531	16.64%	792	657	20.55%

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
EMERGENCY DEPARTMENTS ACTIVITIES
FY 2022/23 & PRIOR YEAR AVERAGES**

MARCH 2023

VISITS BY ACUITY LEVEL	2022						2023						FY22/23	FY22/23	FY21/22	FY20/21	FY19/20	FY18/19
	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL	MO AVG	MO AVG	MO AVG	MO AVG	MO AVG
Brief Evaluation	576	500	462	357	359	315	371	334	364				3,638	404	466	395	391	313
Limited Evaluation	649	705	665	664	670	634	604	504	427				5,522	614	601	551	661	702
Expanded Evaluation	1,210	1,245	1,223	1,320	1,341	1,401	1,220	1,249	1,380				11,589	1,288	1,264	995	1,168	1,327
Detailed Evaluation	280	238	292	263	258	260	252	261	322				2,426	270	249	183	217	309
Comprehensive Evaluation	162	176	155	152	97	141	131	129	165				1,308	145	196	276	245	262
Critical Care Evaluation	0	0	0	0	0	0	0	0	0				0	0	0	0	0	0
TOTAL EMERGENCY VISITS	2,877	2,864	2,797	2,756	2,725	2,751	2,578	2,477	2,658				24,483	2,720	2,775	2,400	2,683	2,913
Left Without Being Seen	271	228	167	244	184	280	186	146	178				1,884	209	149	78	126	209

NOTE:
Excludes Psych ER Visits.

Source: RES2300/RES2309

CONTRA COSTA REGIONAL MEDICAL CENTER
DISCHARGES

	2019						2020						YTD MAR AVG	YTD 2019/20 AVG
	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN		
Medical Care	552	573	525	552	525	534	567	532	520	394	487	458	542	518
Psychiatric	24	31	45	40	55	57	47	46	53	45	59	47	44	46
Sub-total	576	604	570	592	580	591	614	578	573	439	546	505	586	564
Newborn (Well Baby)	137	158	136	145	118	125	146	113	146	99	128	124	136	131
TOTAL	713	762	706	737	698	716	760	691	719	538	674	629	722	695
	2020						2021						YTD MAR AVG	YTD 2020/21 AVG
	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN		
Medical Care	491	511	509	495	474	482	431	436	524	492	529	546	484	493
Psychiatric	51	26	29	36	55	72	65	65	74	97	91	84	53	62
Sub-total	542	537	538	531	529	554	496	501	598	589	620	630	537	555
Newborn (Well Baby)	129	115	149	124	121	120	104	95	135	106	135	119	121	121
TOTAL	671	652	687	655	650	674	600	596	733	695	755	749	658	676
	2021						2022						YTD MAR AVG	YTD 2021/22 AVG
	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN		
Medical Care	532	561	507	508	446	515	485	445	570	512	552	526	508	513
Psychiatric	76	72	54	79	54	66	59	79	67	63	62	60	67	66
Sub-total	608	633	561	587	500	581	544	524	637	575	614	586	575	579
Newborn (Well Baby)	125	157	136	117	115	130	135	110	141	112	133	124	130	128
TOTAL	733	790	697	704	615	711	679	634	778	687	747	710	705	707
	2022						2023						YTD TOTAL	YTD 2022/23 AVG
	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN		
Medical Care	518	516	524	466	520	527	485	465	498				4,519	502
Psychiatric	48	64	60	64	67	69	61	47	54				534	59
Sub-total	566	580	584	530	587	596	546	512	552				5,053	561
Newborn (Well Baby)	156	156	133	123	135	164	129	122	123				1,241	138
TOTAL	722	736	717	653	722	760	675	634	675				6,294	699

Notes:
Nursery II included in Medical Care.
4D Psychiatric unit was reopened on 10/26/20.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
ADMINISTRATIVE DAYS**

	2022/23								
	ADMINISTRATIVE DAYS			TOTAL DAYS			% OF TOTAL DAYS		
	TOTAL PSYCH	TOTAL MEDICAL	GRAND TOTAL	PSYCH	MEDICAL	TOTAL	PSYCH	MED	TOTAL
July	309	793	1,102	1,058	2,882	3,940	29.2	27.5	28.0
August	335	742	1,077	1,096	2,792	3,888	30.6	26.6	27.7
September	328	703	1,031	1,012	2,505	3,517	32.4	28.1	29.3
October	248	520	768	992	2,526	3,518	25.0	20.6	21.8
November	193	636	829	1,032	2,775	3,807	18.7	22.9	21.8
December	231	833	1,064	1,091	3,057	4,148	21.2	27.2	25.7
January	269	809	1,078	1,137	2,998	4,135	23.7	27.0	26.1
February	253	760	1,013	1,034	2,586	3,620	24.5	29.4	28.0
March	367	715	1,082	1,202	2,758	3,960	30.5	25.9	27.3
April									
May									
June									
Total	2,533	6,511	9,044	9,654	24,879	34,533	26.2	26.2	26.2

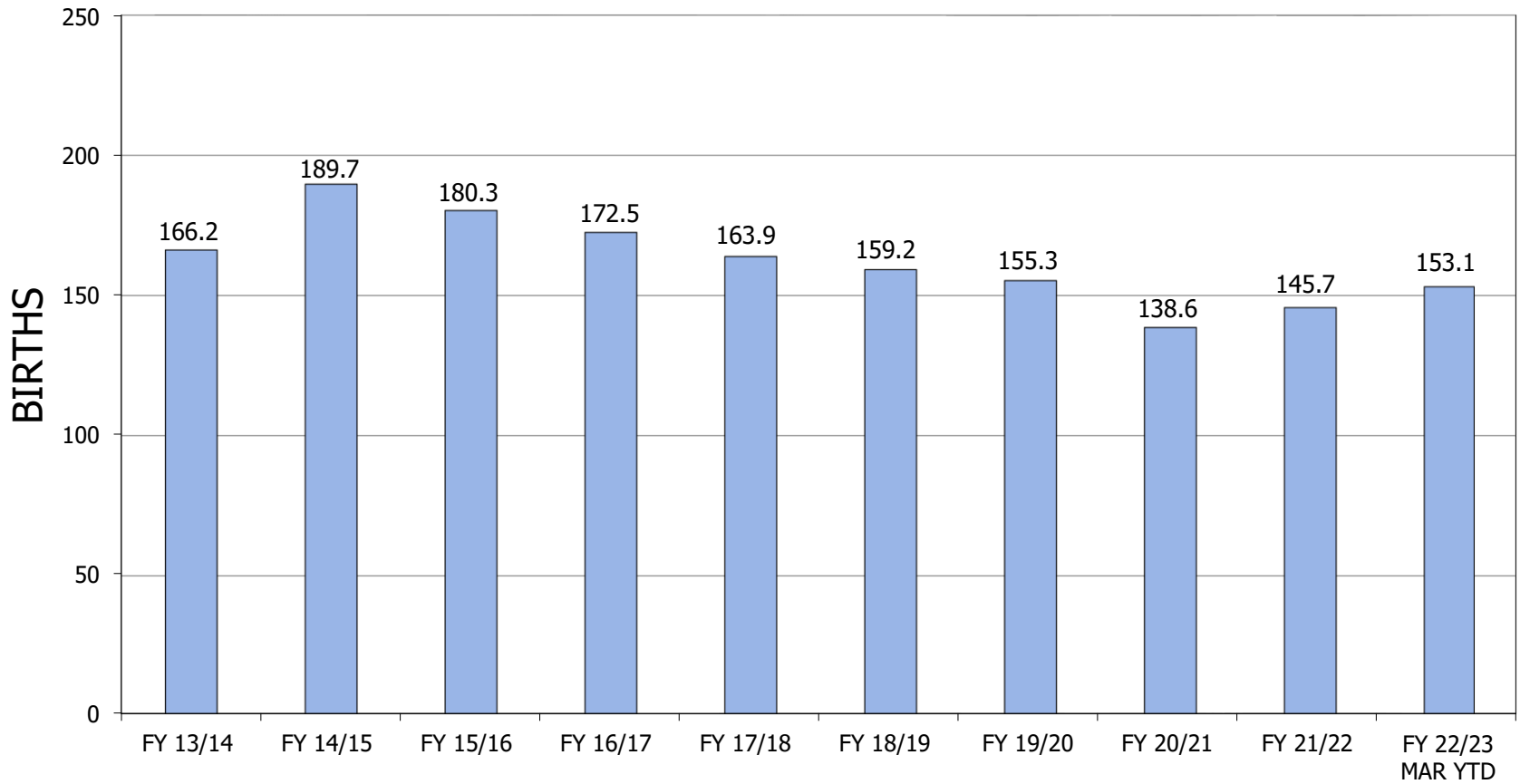
	2021/22								
	ADMINISTRATIVE DAYS			TOTAL DAYS			% OF TOTAL DAYS		
	TOTAL PSYCH	TOTAL MEDICAL	GRAND TOTAL	PSYCH	MEDICAL	TOTAL	PSYCH	MED	TOTAL
July	215	420	635	1,152	2,577	3,729	18.7	16.3	17.0
August	201	402	603	1,149	2,744	3,893	17.5	14.7	15.5
September	246	522	768	1,113	2,713	3,826	22.1	19.2	20.1
October	232	393	625	1,069	2,616	3,685	21.7	15.0	17.0
November	141	668	809	1,099	2,514	3,613	12.8	26.6	22.4
December	166	644	810	1,088	2,673	3,761	15.3	24.1	21.5
January	205	887	1092	973	2,918	3,891	21.1	30.4	28.1
February	173	734	907	904	2,527	3,431	19.1	29.0	26.4
March	241	620	861	1,000	2,633	3,633	24.1	23.5	23.7
April	120	602	722	1,025	2,611	3,636	11.7	23.1	19.9
May	85	508	593	1,114	2,812	3,926	7.6	18.1	15.1
June	124	618	742	1,035	2,776	3,811	12.0	22.3	19.5
Total	2,149	7,018	9,167	12,721	32,114	44,835	16.9	21.9	20.4

NOTES:

- Amounts represent days actions taken on not necessarily services days provided during given month.

SOURCE: Utilization Management Operational Statistics.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
AVERAGE MONTHLY BIRTHS
FISCAL YEAR COMPARISON**

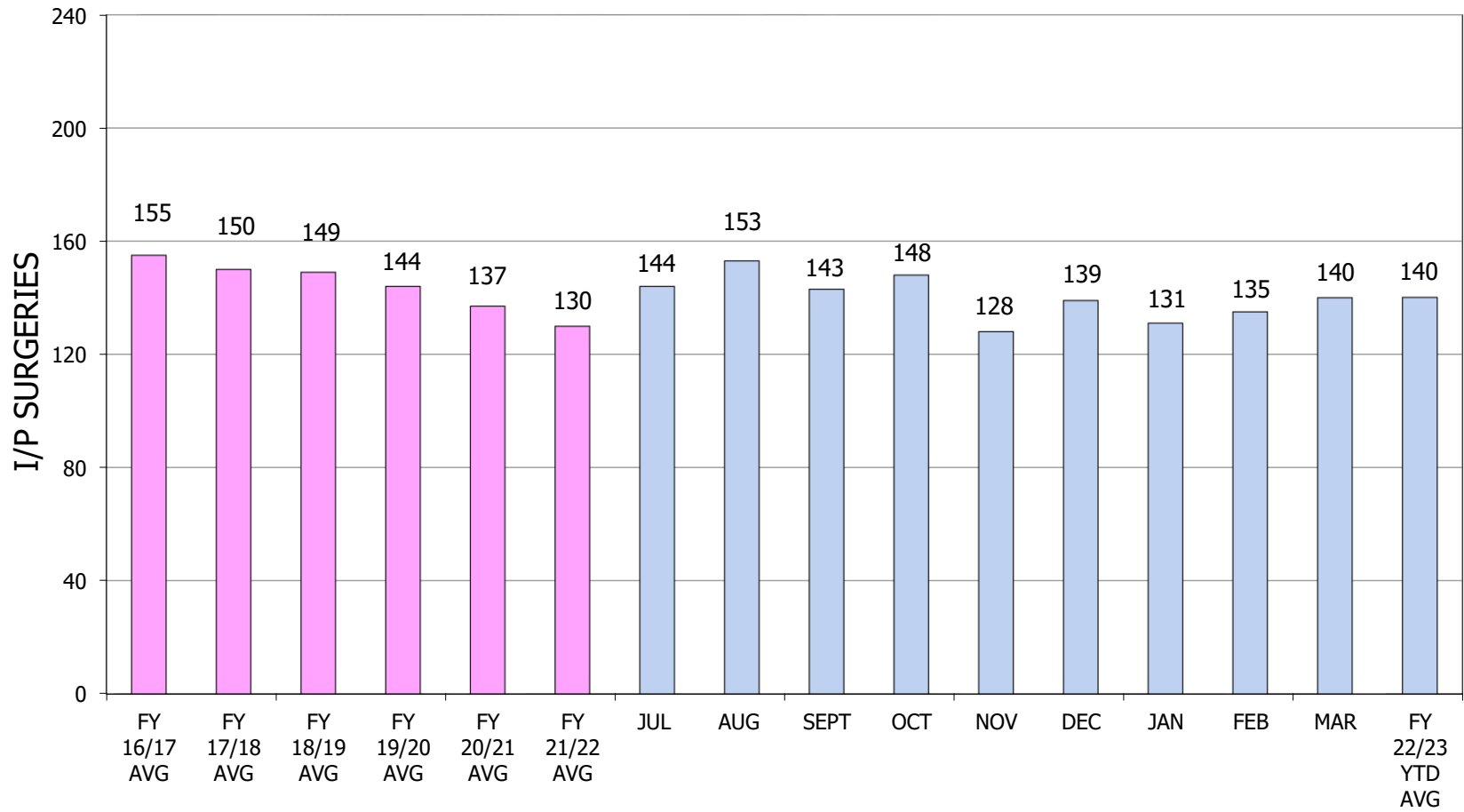


**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTH CENTERS
DELIVERY STATISTICS
by CITY of ORIGIN**

MARCH 2023

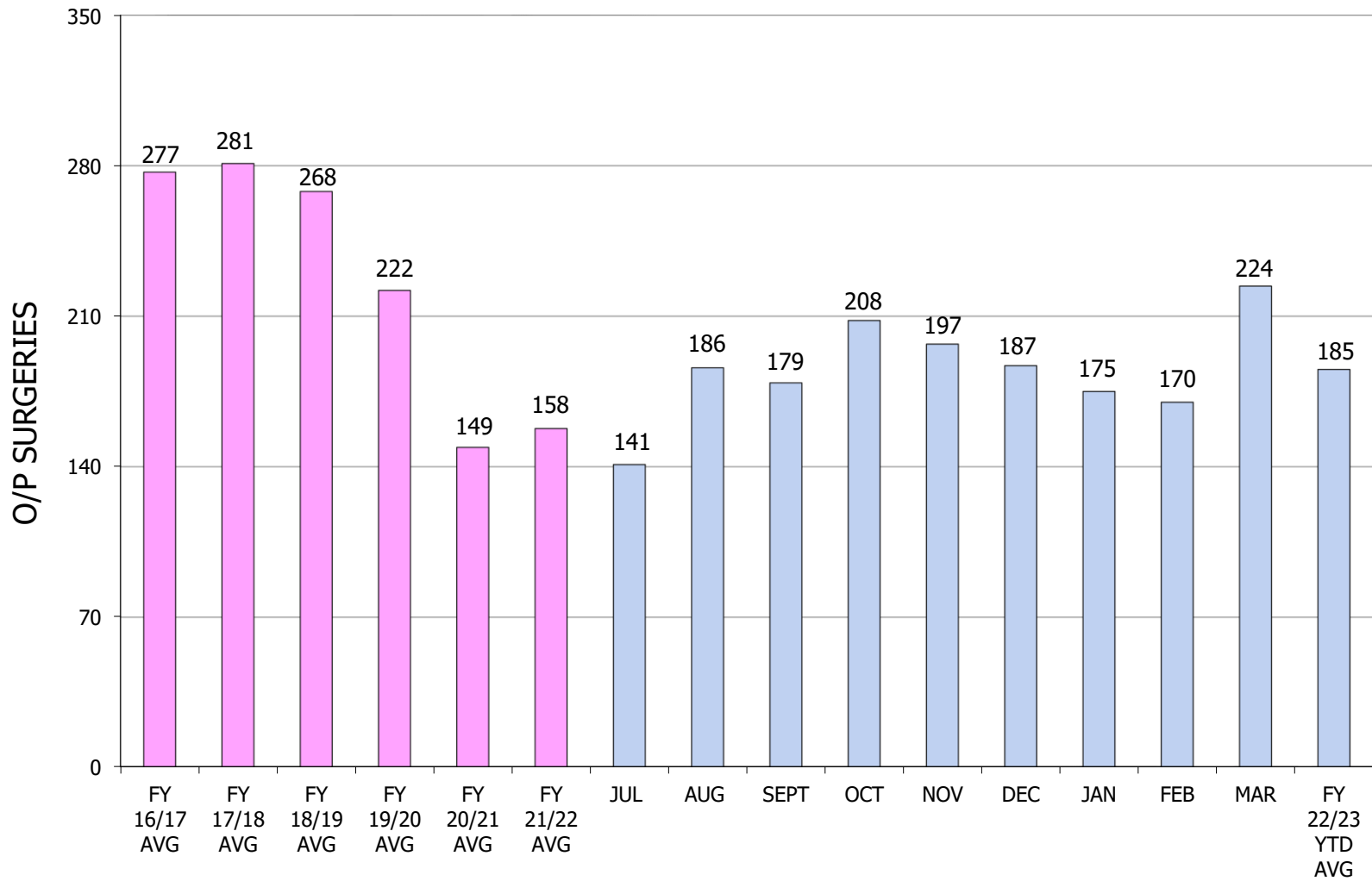
CITY	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	2023 YTD	2023 MO AVG	2022 MO AVG	2021 MO AVG	2020 MO AVG	2019 MO AVG	2018 MO AVG
Alamo	1	0	0										1	0.3	0.1	0.0	0.2	0.1	0.0
Antioch	26	28	17										71	23.7	21.0	24.1	40.2	19.9	20.9
Bay Point	8	16	9										33	11.0	7.5	9.0	14.5	11.0	12.4
Bethel Island	0	1	2										3	1.0	0.1	0.4	0.2	0.2	0.3
Brentwood	1	0	0										1	0.3	4.2	4.4	8.2	3.8	2.4
Byron	0	0	0										0	0.0	0.2	0.2	0.3	0.3	0.3
Clayton	0	0	0										0	0.0	0.3	0.1	0.7	0.2	0.2
Concord	33	24	29										86	28.7	29.4	24.9	56.3	28.2	27.3
Crockett	0	1	0										1	0.3	0.5	0.3	0.9	0.5	0.1
Danville	0	0	0										0	0.0	0.2	0.0	0.3	0.2	0.3
Diablo	0	0	0										0	0.0	0.1	0.0	0.2	0.0	0.0
Discovery Bay	0	0	1										1	0.3	0.3	0.5	0.5	0.2	0.5
Dublin	0	0	0										0	0.0	0.0	0.0	0.0	0.0	0.1
El Cerrito	2	1	2										5	1.7	1.3	1.1	2.4	0.9	1.3
El Sobrante	2	4	4										10	3.3	3.1	2.5	5.8	2.9	3.4
Fairfield	0	0	0										0	0.0	0.1	0.0	0.2	0.1	0.4
Hercules	2	1	1										4	1.3	1.4	2.2	2.8	1.4	2.1
Knightsen	0	0	0										0	0.0	0.0	0.1	0.0	0.0	0.0
Lafayette	0	1	0										1	0.3	0.3	0.0	0.6	0.1	0.1
Martinez	2	5	1										8	2.7	4.3	5.5	8.3	4.8	3.6
Moraga	0	1	0										1	0.3	0.0	0.0	0.0	0.1	0.0
Oakland	1	0	0										1	0.3	0.3	0.4	0.4	0.8	0.3
Oakley	5	2	1										8	2.7	3.8	4.3	7.2	4.3	3.3
Orinda	0	0	0										0	0.0	0.0	0.0	0.0	0.0	0.2
Pacheco	0	0	0										0	0.0	0.8	1.0	1.5	0.5	0.5
Pinole	1	1	2										4	1.3	1.8	1.5	3.5	1.4	1.6
Pittsburg	32	17	21										70	23.3	20.3	15.8	39.3	17.5	18.3
Pleasant Hill	1	3	2										6	2.0	1.7	1.8	3.3	2.9	2.5
Pleasanton	0	0	0										0	0.0	0.1	0.1	0.2	0.0	0.0
Port Costa	0	0	0										0	0.0	0.0	0.1	0.0	0.0	0.1
Richmond	17	20	18										55	18.3	27.9	24.8	52.8	31.7	32.3
Rio Vista	0	0	0										0	0.0	0.1	0.0	0.2	0.0	0.1
Rodeo	2	1	1										4	1.3	2.3	1.8	4.3	2.3	1.4
San Francisco	0	0	0										0	0.0	0.0	0.0	0.0	0.0	0.0
San Pablo	5	12	17										34	11.3	13.0	11.6	14.0	15.3	15.8
San Ramon	0	0	1										1	0.3	0.8	0.5	1.0	0.8	0.3
Suisun City	0	0	0										0	0.0	0.0	0.1	0.1	0.0	0.0
Vacaville	0	0	0										0	0.0	0.1	0.0	0.0	0.0	0.1
Vallejo	1	1	1										3	1.0	0.4	0.3	0.6	0.3	0.9
Walnut Creek	3	3	3										9	3.0	3.3	1.3	2.5	2.7	2.6
Out Of Area	0	1	0										1	0.3	0.7	0.9	0.8	1.3	1.7
TOTAL	145	144	133	0	0	0	0	0	0	0	0	0	422	140.7	151.3	141.3	147.7	156.3	157.5
East County	72	64	51										187	62.3	57.2	58.8	55.6	57.1	58.4
Central County	40	38	36										114	38.0	41.7	35.3	38.5	40.8	37.6
West County	31	40	45										116	38.7	50.8	45.5	51.6	55.9	58.0
Alameda Co.	1	0	0										1	0.3	0.3	0.4	0.3	0.8	0.3
Solano County	1	1	1										3	1.0	0.6	0.3	0.8	0.3	1.4
Other	0	1	0										1	0.3	0.8	1.0	0.9	1.3	1.8
TOTAL	145	144	133	0	0	0	0	0	0	0	0	0	422	140.7	151.3	141.3	147.7	156.3	157.4

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
 CONTRA COSTA REGIONAL MEDICAL CENTER
 I/P SURGERY DEPARTMENT OPERATING REPORT
 FISCAL YEAR COMPARISON**



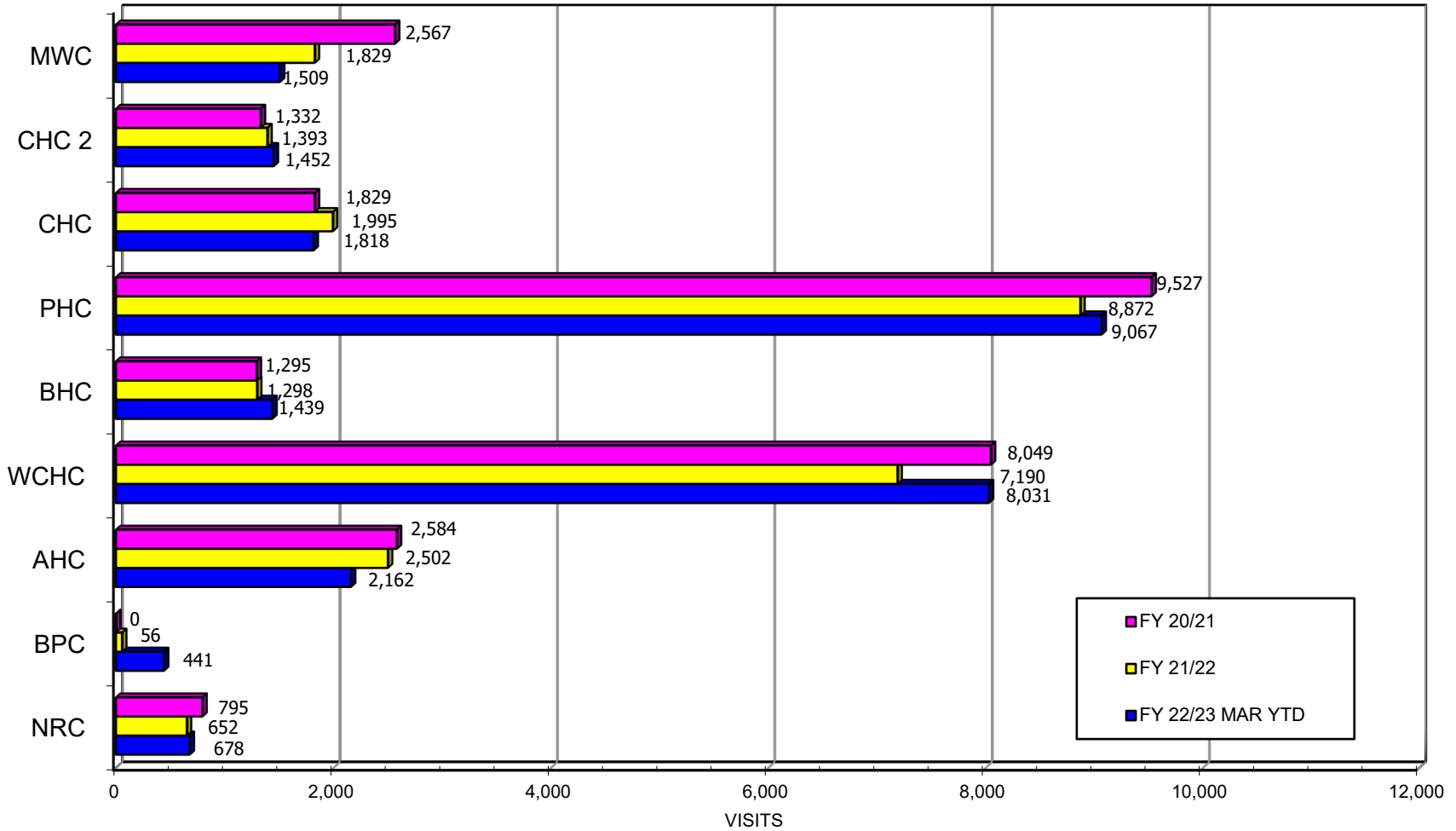
(JC13A)

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
 CONTRA COSTA REGIONAL MEDICAL CENTER
 O/P SURGERY DEPARTMENT OPERATING REPORT
 FISCAL YEAR COMPARISON**



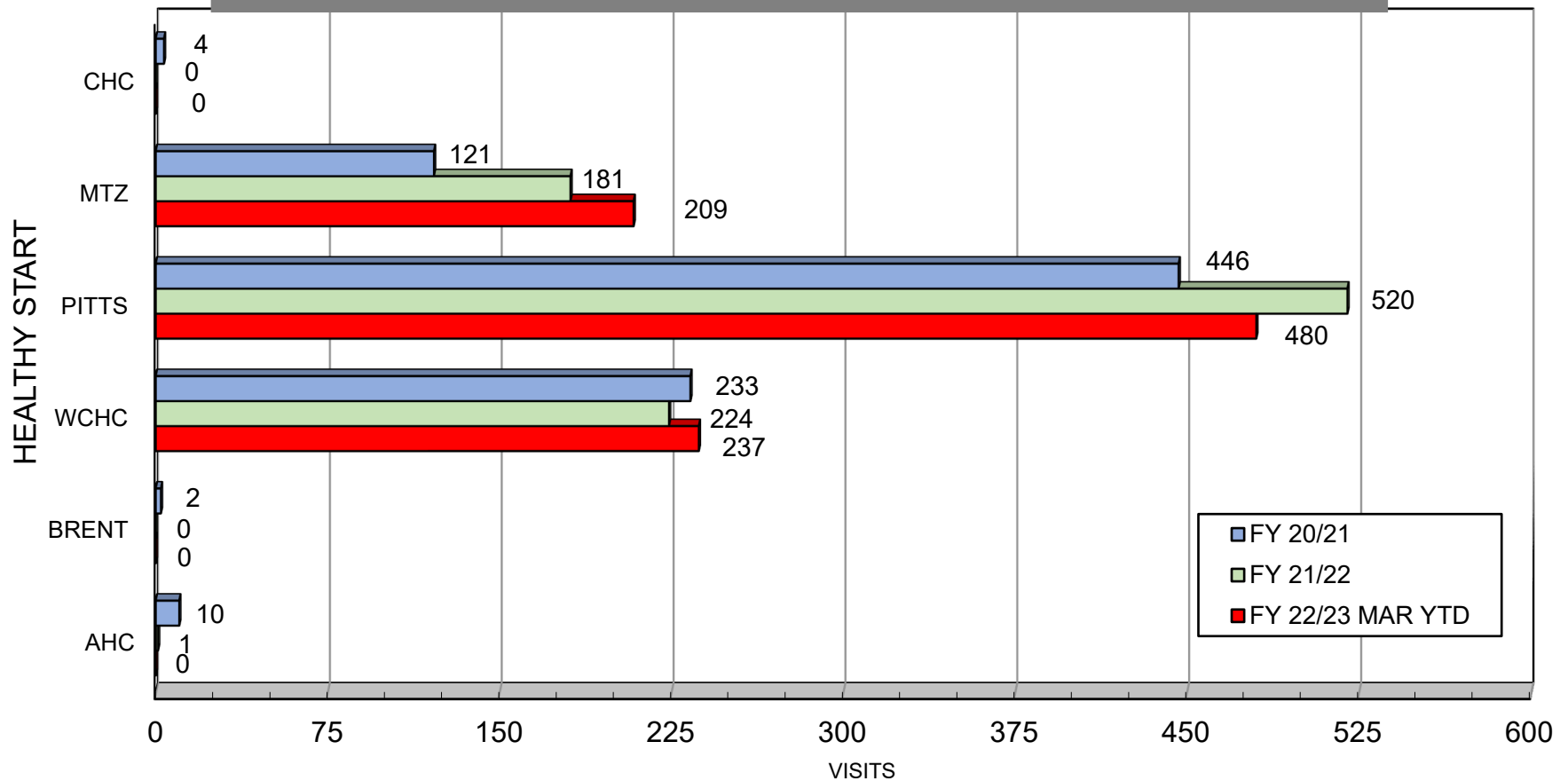
(JC13B)

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA HEALTH CENTERS
AVG MONTHLY OUTPATIENT VISITS BY MEDICAL CLINICS
FISCAL YEAR COMPARISON**



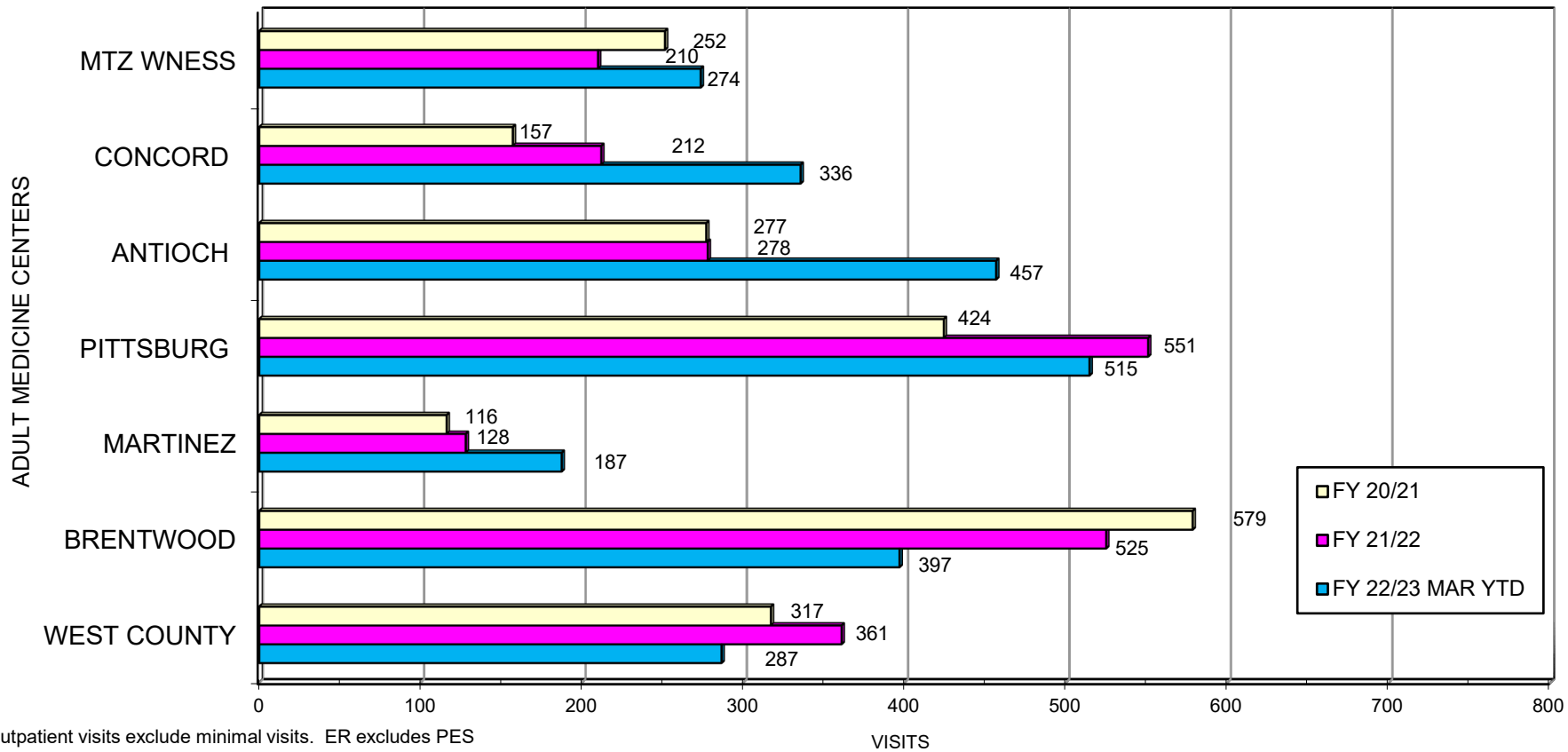
Outpatient visits excludes minimal visits. ER excludes PES.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
HEALTHY START PROGRAMS
AVG MONTHLY OUTPATIENT VISITS BY MEDICAL CLINICS
FISCAL YEAR COMPARISON**

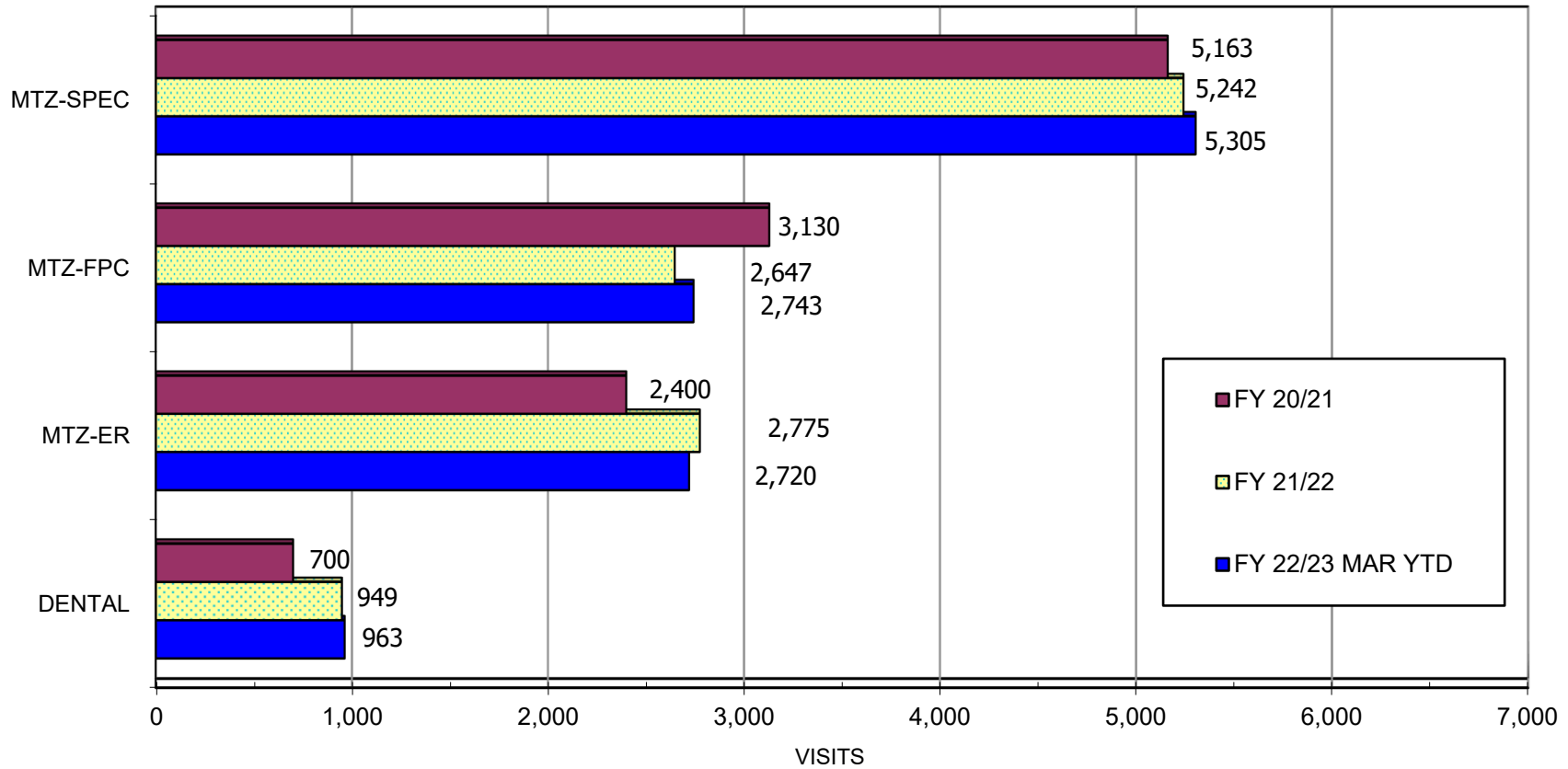


Outpatient visits exclude minimal visits. ER excludes PES.

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
ADULT MEDICINE CENTERS
AVG MONTHLY OUTPATIENT VISITS BY MEDICAL CLINICS
FISCAL YEAR COMPARISON**



**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER AND DENTAL
AVG MONTHLY OUTPATIENT VISITS BY MEDICAL CLINICS
FISCAL YEAR COMPARISON**



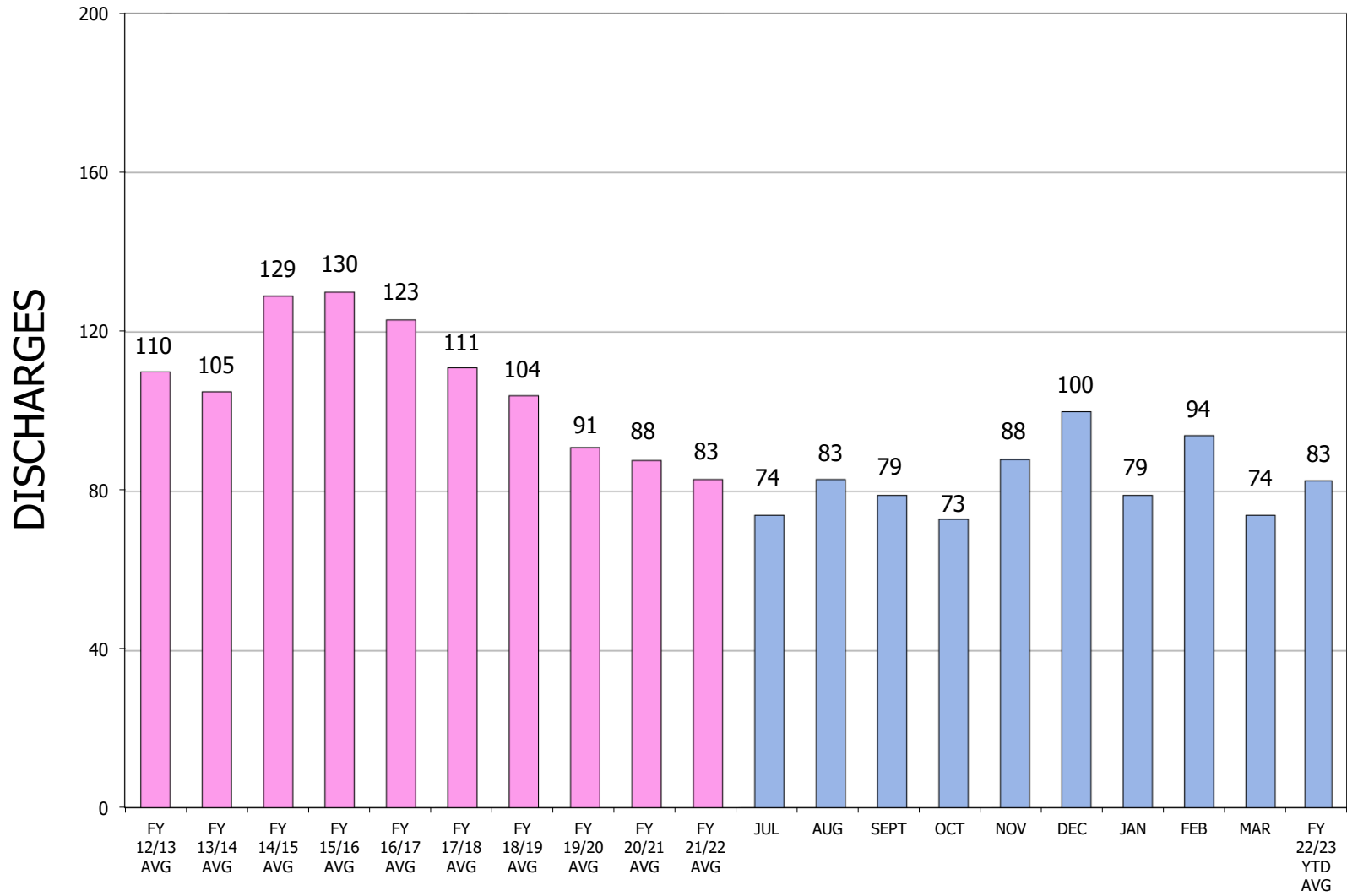
Outpatient visits exclude minimal visits. ER excludes PES.

MTZ-SPEC INCLUDES REHAB.

MTZ-FPC-INCLUDES PRIMARY CARE.

(JC11A)

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
MEDICARE DISCHARGES
FISCAL YEAR COMPARISON**



(MCARDIS)

**CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT
CONTRA COSTA REGIONAL MEDICAL CENTER
MEDICARE UTILIZATION**

FY 22/23

	2022						2023				FY 22/23	FY 22/23	FY 21/22	FY 20/21	FY 19/20	FY 18/19	FY 17/18	FY 16/17	FY 15/16		
	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	YTD	MO AVG	MO AVG	MO AVG	MO AVG	MO AVG	MO AVG		
PATIENT DAYS:																					
MEDICAL	704	612	504	512	587	704	674	566	445				5,308	589.78	628.25	508.42	651.58	963.00	856.25	855.25	791.17
PSYCHIATRIC	188	250	162	215	235	295	364	317	247				2,273	252.56	246.92	199.42	164.42	146.33	135.75	169.75	184.75
TOTAL	892	862	666	727	822	999	1,038	883	692				7,581	842.33	875.17	707.83	816.00	1,109.33	992.00	1,025.00	975.92
DISCHARGES:																					
MEDICAL	69	74	70	65	77	94	70	85	68				672	74.67	74.08	78.67	83.17	96.00	99.83	108.75	113.75
PSYCHIATRIC	5	9	9	8	11	6	9	9	6				72	8.00	9.00	9.08	7.92	8.25	11.50	14.08	16.17
TOTAL	74	83	79	73	88	100	79	94	74				744	82.67	83.08	87.75	91.08	104.25	111.33	122.83	129.92
A.L.O.S.:																					
MEDICAL	10.20	8.27	7.20	7.88	7.62	7.49	9.63	6.66	6.54				7.90	7.90	8.48	6.46	7.83	10.03	8.58	7.86	6.96
PSYCHIATRIC	37.60	27.78	18.00	26.88	21.36	49.17	40.44	35.22	41.17				31.57	31.57	27.44	21.95	20.77	17.74	11.80	12.05	11.43
AVERAGE	12.05	10.39	8.43	9.96	9.34	9.99	13.14	9.39	9.35				10.19	10.19	10.53	8.07	8.96	10.64	8.91	8.34	7.51

NOTES:

4D PSYCHIATRIC UNIT [20 beds] WAS SUSPENDED ON 11/20/06. THIS UNIT WAS REOPENED ON 10/26/20.

Source:

EPIC - Ptday (Inpatient Days Report: RES0149) and Admit Discharges (Inpatient Discharges Report: RES0158).

EAST BAY HOSPITAL CONFERENCE
 I/P STATISTICS MED. SVCS.
 (EXCLUDING PSYCH AND NEWBORN - WELL BABY)
 2022/2023

AVERAGE DAILY CENSUS

HOSPITAL	JUL 22	AUG 22	SEP 22	OCT 22	NOV 22	DEC 22	JAN 23	FEB 23	MAR 23	APR 23	MAY 23	JUN 23	DECEMBER			
													FY 22/23 MO AVG	FY 21/22 MO AVG	% CHG	
HFWA 411																
SUTTER DELTA MEDICAL	65.39	65.39	58.23	51.74	68.77	75.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64.24	73.71	-12.9%
KAISER - ANTIOCH	91.61	98.19	93.20	93.06	106.90	109.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	98.72	94.37	4.6%
KAISER - WALNUT CREEK	151.87	151.65	154.20	150.68	151.23	156.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	152.72	154.51	-1.2%
CONTRA COSTA REGIONAL MED	84.94	81.77	76.90	74.94	85.03	90.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82.32	79.41	3.7%
JOHN MUIR MED CTR - WALNUT CREEK	307.71	299.00	309.93	310.71	308.13	319.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	309.20	289.47	6.8%
JOHN MUIR MED CTR - CONCORD	168.10	165.19	167.97	154.13	172.37	188.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	169.29	161.86	4.6%
HFWA 415																
ALTA BATES SUMMIT-BERKELEY	130.90	130.13	136.87	133.81	154.73	151.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	139.51	139.46	0.0%
ALTA BATES SUMMIT-OAKLAND	132.81	134.55	143.63	136.90	154.13	160.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	143.71	139.14	3.3%
KAISER - RICHMOND	42.39	42.13	45.67	43.39	47.47	53.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45.76	41.48	10.3%

EAST BAY HOSPITAL CONFERENCE
 I/P STATISTICS MED. SVCS.
 (EXCLUDING PSYCH AND NEWBORN - WELL BABY)
 2022/2023

DISCHARGES

HOSPITAL	JUL 22	AUG 22	SEP 22	OCT 22	NOV 22	DEC 22	JAN 23	FEB 23	MAR 23	APR 23	MAY 23	JUN 23	DECEMBER				
													FY 22/23			FY 21/22	% CHG
													YTD	MO AVG	MO AVG		
HFWA 411																	
SUTTER DELTA MEDICAL	513	515	459	444	470	541	0	0	0	0	0	0	2,942	490	546	-10.2%	
KAISER - ANTIOCH	779	824	793	778	815	883	0	0	0	0	0	0	4,872	812	788	3.1%	
KAISER, WALNUT CREEK	1,122	1,098	1,142	1,125	1,114	1,183	0	0	0	0	0	0	6,784	1,131	1,131	0.0%	
CONTRA COSTA REGIONAL MED	525	525	546	472	531	540	0	0	0	0	0	0	3,139	523	526	-0.6%	
JOHN MUIR MED CTR - WALNUT CREEK	1,584	1,606	1,659	1,702	1,663	1,859	0	0	0	0	0	0	10,073	1,679	1,596	5.2%	
JOHN MUIR MED CTR - CONCORD	887	920	912	932	940	1,051	0	0	0	0	0	0	5,642	940	923	1.9%	
HFWA 415																	
ALTA BATES SUMMIT-BERKELEY	960	991	896	905	967	984	0	0	0	0	0	0	5,703	951	971	-2.1%	
ALTA BATES SUMMIT-OAKLAND	837	822	849	789	833	883	0	0	0	0	0	0	5,013	836	892	-6.3%	
KAISER, RICHMOND	357	398	372	387	379	384	0	0	0	0	0	0	2,277	380	392	-3.2%	

Consent Agenda for Medical Executive Committee

**Policies Approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee
March 2023 to April 2023**

Ambulatory Care

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
AC 3021	Emergency Response Plan for Ambulatory Health Centers	R	N	Reviewed
AC 3021 A	Attachment - Concord Health Center	R	N	Reviewed
AC 3021 B	Attachment - Bay Point Health Center	R	N	Reviewed
AC 3021 C	Attachment - Brentwood Health Center	R	N	Reviewed
AC 3021 E	Attachment - Pittsburg Health Center	R	N	Reviewed
AC 3021 F	Attachment - Martinez Health Center	R	N	Reviewed
AC 3021 G	Attachment - North Richmond Health Center	R	N	Reviewed
AC 4021	Emerson Chamber	R	N	Reviewed, references updated
AC 4068	Pregnancy Test Walk In	R	N	updated with current info
AC 4054	Infusion Pump for Patient's Home Use	R	N	
AC 3047	Thefts and Break Ins	R	N	
AC 3030	Maintenance of Ambulatory Care Facilities	R	N	

Consent Agenda for Medical Executive Committee

**Policies Approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee
March 2023 to April 2023**

Cardiopulmonary

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
RCD30.3	Bronchoscopy	R	Y	Post procedure maintenance
RCD30.3.a	Disposable Bronchoscopy	N		New policy on disposable Bronch
N.50.3	High Flow NC in NICU	N		New Policy on high flow oxygen in NICU

Consent Agenda for Medical Executive Committee

**Policies Approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee
March 2023 to April 2023**

Hospital Policies

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
Hosp 503 A	Autopsy Criteria	R		Updated and reviewed
Hosp 503 B	Coroner Criteria	R		Updated and reviewed
Hosp 503 C	Authorization to Consent for Autopsy or Disposition of Remains	R		Updated and reviewed

Consent Agenda for Medical Executive Committee

**Policies Approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee
March 2023 to April 2023**

Infection Control

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
IC 233	Readmission to the Newborn Nursery			no changes
IC 256	Cleaning and Disinfection of Ophthalmic Laser Lens			Updated references
IC 256a	Laser Lens Cleaning and Disinfection Log			
IC 224	Management of Fire, Emergency Services or Law Officer Exposure to Blood and Body Fluids		No	Updated references
IC 201	Hand Hygiene		Yes	added language to include no artificial nails for persons processing equipment or supplies or preparing or serving food
IC 257	Management of ENT Scopes at the end of a Procedure			
IC 249	Management of Dental Instruments and Burs Prior to Return to Sterile Processing			
IC 258	Guidelines for the Use of Ultrasound Gel			
	Management of Multi-Use Dispensers			
IC 259	Dental Unit Water System Maintenance			

Consent Agenda for Medical Executive Committee

**Policies Approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee
March 2023 to April 2023**

Nursing Policies

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
Perinatal 2.21	Outpatient Cervical Ripening for Patients Undergoing Induction of Labor	N		New policy, for placement of cervical ripening agent for outpatient patients
Perinatal 2.05	Intrauterine Amnioinfusion	R		Minimal changes, reviewed, references updated
L&D 2.36 A	Physician Notification of Category II or III Tracing	R		Minimal changes, reviewed, references updated
L&D 2.36 B	Intrauterine Resuscitation Measures (AWHONN)	R		Minimal changes, reviewed, references updated
L&D 2.44	Intrapartum Nursing Care	R		Minimal changes, reviewed, references updated
L&D 2.84	Administration of the Rubella (MMR) Vaccine	R		Minimal changes, reviewed, references updated
L&D 2.90	Telephone Advice	R		Minimal changes, COVID info added, reviewed, references updated
Nursery 3.88	Neonatal Blood Sampling	R		Combined policies - 3.96, 3.102 into 3.88
Nurs 405	Care & Maintenance of Wound Drains	R		Reviewed, updated
Psych 809	EMTALA Log Documenting PES Arrivals	R		Excessive verbiage removed, reviewed, references updated
Nurs 119	Moderate Sedation Administration By Non Anesthesiologists	R		Minimal changes, recently reviewed and approved in 11/22, more needed to be clarified
Nursery 3.16	After Admission Routine Care of Healthy Newborn	RETIRE		In admission
Nursery 3.16 A	Family Education of Newborn	RETIRE		In education
Nursery 3.96	Intra Arterial Blood Gas Sample	RETIRE		BUILT INTO 3.88
Nursery 3.102	Venipuncture	RETIRE		BUILT INTO 3.88
MedSurg Nurs 202	Telemetry Monitor Technician Role and Function			
Nurs 527	Compression Dressing Application on Lower Extremity			
OR Nurs 616/SPD	Immediate Use Steam Sterilization (Flash Sterilization)			
Psych 804	Initial Assessment of Patients with Behavioral Health Concerns in the Emergency Dept and PES	R	Y	Updated references, other changes included taking out a lot of unnecessary detail, while ensuring key information is there. Patients can present initially to the ED or PES- but both their psychiatric and medical care needs will be addressed/ managed - APPROVED

Consent Agenda for Medical Executive Committee

Policies Approved in Patient Care and Policy Evaluation Committee and Ambulatory Policy Committee

March 2023 to April 2023

Nursing Policies

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
Psych 806	Medical Care of Psychiatric patients on the PES unit	R	Y	Updated references, other changes included improving the flow/organization, and removing unnecessary detail, but also ensuring that key information that had been missing is in the policy. - APPROVED
Psych 808	Psychiatric Emergency Services (PES) Intake Procedure	R	Y	Updated references and removed unnecessary detail, re-organized to improve the flow, added some key items that had been missing - APPROVED
Psych 814	Nursing Documentation in PES	RETIRE	N/A	Everything in 814 is in another Psych policy re nuances of psych/ PES
Psych 817	Discharge Process and After Visit Summary (AVS)			The basics of nursing documentation in Nursing 302A are sufficient for just the key points about nursing documentation RETIRE AND ADD NURS 302 TO TOC FOR PSYCH
MedSurg Nurs 901	Medical/Surgical Telemetry Unit Admission Criteria	R	N	Updated references, changed some criteria, updated medications - remove with RRT for
Nurs 1423	Point of Care Rapid Response Electroencephalgraph (EEG)	N	N/A	New policy
Nurs 603	Active Surveillance for MRSA	RETIRE	N/A	Substitute IC 234 - refer to Kathy's email RETIRE

Consent Agenda for Medical Executive Committee

Pharmacy Policies

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
3105	Procurement of Medications	R	N	Reviewed and updated as needed
3113	Drug Shortages	R	N	Reviewed and updated as needed
3201	Drug Procurement, Storage, and Inventory Control	R	N	Reviewed and updated as needed
3316	Compounding of Medications, Sterile and Non-Sterile	R	N	Reviewed and updated as needed
3409	Sterile Compounding of Medications	R	N	Reviewed and updated as needed
3410	Chemotherapy Handling	R	N	Reviewed and updated as needed
3411	Containment Cabinets for Aseptic Compounding	R	N	Reviewed and updated as needed
3424	Medication Recall	R	N	Reviewed and updated as needed
3431	Stability and Expiration Dating (Beyond-Use Dates)	R	N	Reviewed and updated as needed
3613	Handling of Suspected IV Contamination	R	N	Reviewed and updated as needed
4001	Infection Control	R	N	Reviewed and updated as needed
4002	Hand Hygiene	R	N	Reviewed and updated as needed
4004	Aseptic Technique	R	N	Reviewed and updated as needed
4006	End-Product Testing of IV Admixtures	R	N	Reviewed and updated as needed
4009	Environmental Surface Sampling	R	N	Reviewed and updated as needed
4011	Handling of Positive Cultures from Pharmacy Monitoring	R	N	Reviewed and updated as needed
4013	Cleaning of Containment Cabinets and IV Compounding Rooms – Pharmacy Responsibilities	R	N	Reviewed and updated as needed
4014	Cleaning of IV Compounding Rooms – Environmental Services	R	N	Reviewed and updated as needed
4015	Garbing for IV Compounding	R	N	Reviewed and updated as needed
5014	Quality Assurance in Pharmacy	R	N	Reviewed and updated as needed
7006	Pharmacy Hazard Communication Program	R	N	Reviewed and updated as needed
7008	Hazardous Materials and Waste Training	R	N	Reviewed and updated as needed

Policy Number	Department/Policy Name/Policy Owner	New (N) Revised (R) Retired (Ret)	Significant Change? (Y) (N) (N/A)	Brief Description
7022	Drug Storage Temperatures – Pharmacy Department Only	R	N	Reviewed and updated as needed
7024	Room Temperature Monitoring for Drug Storage Areas	R	N	Reviewed and updated as needed
7025	Environmental Air Sampling – Viable and Non-Viable	R	N	Reviewed and updated as needed
8002	Aseptic Technique Competency Assessment	R	N	Reviewed and updated as needed