



Northern Inyo County Local Hospital District

**Board of Directors Regular Meeting**

**Wednesday May 20, 2009 5:30pm**

*Board Room  
Northern Inyo Hospital*

# ***DRAFT AGENDA***

## **NORTHERN INYO COUNTY LOCAL HOSPITAL DISTRICT BOARD OF DIRECTORS MEETING**

**May 20, 2009 at 5:30 P.M.**

***In the Board Room at Northern Inyo Hospital***

1. Call to Order (at 5:30 P.M.).
2. Opportunity for members of the public to comment on any items on this Agenda.
3. Approval of minutes of the April 15, 2009 regular meeting.
4. Financial and Statistical Reports for the month of March 2009; John Halfen.
5. Administrator's Report; John Halfen.
  - A. Building Update
  - B. Radiology Update
  - C. Physician Recruiting
  - D. F.Y.I. Section
  - E. Other
6. Chief of Staff Report – Richard Nicholson, M.D..
  - A. Advancement of Board-certified internist Vasuki Sittampalam, M.D. to the Northern Inyo Hospital Active Medical Staff with requested privileges (*action item*).
  - B. Appointment of Board-certified radiologist Stuart A. Souders, M.D. to the Provisional Consulting Medical Staff with requested privileges (*action item*).
  - C. Appointment of Board-certified neurologist Maria T. Toczek, M.D. to the Provisional Consulting Medical Staff with requested privileges (*action item*).
  - D. Approval of Hospital wide Policy/Procedure: *Fetal Fibronectin Testin* (*action item*).
  - E. Other
7. Old Business
  - A. I.T. Action Plan (*action item*).
  - B. Reaffirmation of John Halfen as negotiator regarding potential acquisition of real property at Barlow Lane and Highway 395, Bishop, California. Negotiation will be with the designee(s) of Inyo Mono Title (*action item*).
8. New Business
  - A. Approval of Language Services Annual Report (*action item*) including the following:
    1. Increase to Interpreter pay grades (*action item*).
    2. Mission Statement translation into Spanish (*action item*).
  - B. 2009 / 2010 Budget (*action item*).

- C. Termination of professional services agreement (*action item*).
- 9. Reports from Board members on items of interest.
- 10. Opportunity for members of the public to comment on any items on this Agenda, and/or on any items of interest.
- 11. Adjournment to closed session to:
  - A. Hear reports on the hospital quality assurance activities, and hear a report from the Medical Staff Executive Committee (Section 32155 of the Health and Safety Code, and Government Code Section 54962).
  - B. Instruct negotiator regarding price and terms of payment for the purchase, sale, exchange, or lease of a real property (Government Code Section 54956.8).
  - C. Confer with legal counsel regarding claim filed by John Nesson M.D. against Northern Inyo County Local Hospital District and other Defendants (Government Code Section 54956.9(a)).
- 12. Return to open session, and report of any action taken in closed session.
- 13. Opportunity for members of the public to address the Board of Directors on items of interest.
- 14. Adjournment.

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**BUDGET VARIANCE ANALYSIS**

**Mar-09 PERIOD ENDING PRIOR TO AUDIT**

**In the month, NIH was**

	<b>12%</b>	<b>over budget in IP days;</b>
	<b>( -0.1% )</b>	<b>under in IP Ancillary Revenue and</b>
	<b>( 8.6% )</b>	<b>over in OP Revenue resulting in</b>
<b>\$ 160,003</b>	<b>( 2.4% )</b>	<b>over in gross patient revenue from budget &amp;</b>
<b>\$ 251,272</b>	<b>( 6.4% )</b>	<b>over in net patient revenue from budget</b>

**Total Expenses were:**

<b>\$ 177,091</b>	<b>( 4.6% )</b>	<b>over budget. Wages and Salaries were</b>
<b>\$ 70,367</b>	<b>( 5.0% )</b>	<b>over budget and Employee Benefits</b>
<b>\$ (61,091)</b>	<b>( -7.3% )</b>	<b>under budget.</b>
<b>\$ 196,014</b>		<b>of other income resulted in a net income of</b>
<b>\$ 336,959</b>	<b>\$ 110,506</b>	<b>over budget.</b>

**The following expense areas were over budget for the month:**

<b>\$ 70,367</b>	<b>5%</b>	<b>Wages and Salaries</b>
<b>\$ 182,428</b>	<b>65%</b>	<b>Professional Fees; registry staff &amp; Physicians</b>
<b>\$ 8,750</b>	<b>5%</b>	<b>Supplies Expense</b>
<b>\$ 13,050</b>	<b>6%</b>	<b>Depreciation Expense (see note below)</b>
<b>\$ 64,835</b>	<b>142%</b>	<b>Interest Expense (see note below)</b>

**Other Information:**

<b>39.79%</b>	<b>Contractual Percentages for month</b>
<b>40.71%</b>	<b>Contractual Percentages for Year</b>

**\$ 3,523,886 Year-to-date Net Revenue**

**Special Notes for Month:**

**Interest Expense will remain high for year due to first Phase of Building Project being completed and the interest payments for the first issue of the 2005 General Obligation Bond will no longer be capitalized as it was during the construction. The depreciation expense was under estimated during the budget process and will be over budget all year.**

**We have added a new line on the Income Statement to show the amount of 3rd party contractals being reduced monthly. Auditors feel we have too high of an amount booked for Medicare and Medi-Cal Cost Report settlements.**

# NORTHERN INYO HOSPITAL

## Balance Sheet

March 31, 2009

### Assets

	<u>Current Month</u>	<u>Prior Month</u>	<u>FYE 2008</u>
<b>Current assets:</b>			
Cash and cash equivalents	4,823,914	2,663,285	2,434,216
<b>Short-term investments</b>	14,692,024	16,788,728	15,199,287
Assets limited as to use	2,651,693	1,894,253	49,003
Plant Expansion and Replacement Cash	1	1	1,941,239
Other Investments (Partnership)	961,824	961,824	352,361
Patient receivable, less allowance for doubtful accounts \$4425,492	6,745,256	7,380,603	8,273,347
Other receivables (Includes GE Financing Funds)	731,156	622,064	571,376
Inventories	2,172,348	2,171,599	2,177,577
Prepaid expenses	744,530	730,591	602,851
<b>Total current assets</b>	<u>33,522,744</u>	<u>33,212,948</u>	<u>31,601,257</u>
<b>Assets limited as to use:</b>			
Internally designated for capital acquisitions	556,555	548,176	558,237
Specific purpose assets	568,774	568,632	520,160
	<u>1,125,329</u>	<u>1,116,809</u>	<u>1,078,397</u>
<b>Revenue bond construction funds held by trustee</b>	806,520	759,081	782,802
Less amounts required to meet current obligations	<u>2,651,693</u>	<u>1,894,253</u>	<u>49,003</u>
<b>Net Assets limited as to use:</b>	<u>(719,843)</u>	<u>(18,364)</u>	<u>1,812,196</u>
<b>Long-term investments</b>	<u>8,914,638</u>	<u>8,914,638</u>	<u>8,914,638</u>
<b>Property and equipment, net of accumulated depreciation and amortization</b>	<u>33,211,060</u>	<u>32,616,097</u>	<u>29,541,929</u>
<b>Unamortized bond costs</b>	<u>295,200</u>	<u>296,687</u>	<u>308,583</u>
<b>Total assets</b>	<u>75,223,800</u>	<u>75,022,007</u>	<u>72,178,602</u>

# NORTHERN INYO HOSPITAL

## Balance Sheet

March 31, 2009

### Liabilities and net assets

	<u>Current Month</u>	<u>Prior Month</u>	<u>FYE 2008</u>
<b>Current liabilities:</b>			
Current maturities of long-term debt	168,070	226,072	683,626
Accounts payable	1,446,904	1,726,291	1,140,966
Accrued salaries, wages and benefits	3,165,620	3,018,049	2,600,516
Accrued interest and sales tax	447,730	352,980	172,391
Deferred income	142,958	190,608	-
Due to third-party payors	2,612,468	2,604,006	3,940,301
Due to specific purpose funds	-	-	-
<b>Total current liabilities</b>	<u>7,983,750</u>	<u>8,118,006</u>	<u>8,537,799</u>
<b>Long-term debt, less current maturities</b>	25,270,196	25,270,196	25,270,196
Bond Premium	380,954	382,159	391,804
<b>Total long-term debt</b>	<u>25,651,150</u>	<u>25,652,356</u>	<u>25,662,000</u>
<b>Net assets:</b>			
Unrestricted	41,020,125	40,683,013	37,458,642
Temporarily restricted	568,774	568,632	520,160
<b>Total net assets</b>	<u>41,588,899</u>	<u>41,251,645</u>	<u>37,978,803</u>
<b>Total liabilities and net assets</b>	<u>75,223,800</u>	<u>75,022,007</u>	<u>72,178,602</u>

# NORTHERN INYO HOSPITAL

## Statement of Operations

As of March 31, 2009

	MTD Actual	MTD Budget	MTD Variance \$	MTD Variance %	YTD Actual	YTD Budget	YTD Variance \$	YTD Variance %	Prior YTD
<b>Unrestricted revenues, gains and other support:</b>									
In-patient service revenue:									
Routine	633,524	607,596	25,928	4.3	5,532,299	5,468,364	63,935	1.2	1,959,439
Ancillary	1,824,122	2,028,606	(204,484)	(10.1)	17,517,987	18,257,454	(739,467)	(4.1)	6,342,843
Total in-patient service revenue	2,457,645	2,636,202	(178,557)	-6.8%	23,050,285	23,725,818	(675,533)	-2.8%	8,302,282
Out-patient service revenue	4,287,307	3,948,747	338,560	8.6	36,992,786	35,538,723	1,454,063	4.1	11,346,822
<b>Gross patient service revenue</b>	<b>6,744,952</b>	<b>6,584,949</b>	<b>160,003</b>	<b>2.40</b>	<b>60,043,072</b>	<b>59,264,541</b>	<b>778,531</b>	<b>1.3</b>	<b>19,649,104</b>
<b>Less deductions from patient service revenue:</b>									
Patient service revenue adjustments	218,517	142,545	(75,972)	(53.3)	1,953,944	1,282,905	(671,039)	(52.3)	405,095
Contractual adjustments	2,359,502	2,535,204	175,702	6.9	22,942,055	22,816,836	(125,219)	(0.6)	8,444,707
Prior Period Adjustments	8,462	-	(8,462)	100.0	(1,635,215)	-	1,635,215	100.0	(41,889)
<b>Total deductions from patient service revenue</b>	<b>2,586,481</b>	<b>2,677,749</b>	<b>91,268</b>	<b>3.4</b>	<b>23,260,784</b>	<b>24,099,741</b>	<b>838,957</b>	<b>3.5</b>	<b>8,807,914</b>
<b>Net patient service revenue</b>	<b>4,158,472</b>	<b>3,907,200</b>	<b>251,272</b>	<b>6%</b>	<b>36,782,288</b>	<b>35,164,800</b>	<b>1,617,488</b>	<b>5%</b>	<b>10,841,190</b>
Other revenue	43,305	28,005	15,300	54.6	341,848	252,045	89,803	35.6	81,422
Transfers from Restricted Funds for Other Operating Expenses	65,541	65,541	-	-	589,869	589,869	-	0.0	-
<b>Total Other revenue</b>	<b>108,846</b>	<b>93,546</b>	<b>15,300</b>	<b>16.4</b>	<b>931,717</b>	<b>841,914</b>	<b>89,803</b>	<b>10.7</b>	<b>81,422</b>
<b>Total revenue, gains and other support</b>	<b>4,267,317</b>	<b>4,000,746</b>	<b>266,571</b>	<b>16.5</b>	<b>37,714,005</b>	<b>36,006,714</b>	<b>1,707,291</b>	<b>10.7</b>	<b>10,922,613</b>
<b>Expenses:</b>									
Salaries and wages	1,477,793	1,407,426	(70,367)	(5.0)	12,546,574	12,666,834	120,260	1.0	3,831,559
Employee benefits	777,879	838,970	61,091	7.3	7,584,007	7,550,730	(33,277)	(0.4)	2,119,417
Professional fees	463,959	281,531	(182,428)	(64.8)	3,193,909	2,533,779	(660,130)	(26.1)	832,154
Supplies	501,502	474,570	(26,932)	(5.7)	4,354,323	4,271,130	(83,193)	(2.0)	1,310,138
Purchased services	203,583	194,833	(8,750)	(4.5)	1,823,965	1,753,497	(70,468)	(4.0)	459,146
Depreciation	222,200	209,150	(13,050)	(6.2)	1,951,370	1,882,350	(69,020)	(3.7)	370,096
Interest	110,671	45,836	(64,835)	(141.5)	987,492	412,524	(574,968)	(139.4)	96,812
Bad debts	97,143	168,022	70,879	42.2	1,179,984	1,512,198	332,214	22.0	459,178
Other	184,237	241,537	57,300	23.7	1,797,386	2,173,833	376,447	17.3	557,114
<b>Total expenses</b>	<b>4,038,966</b>	<b>3,861,875</b>	<b>(177,091)</b>	<b>(4.6)</b>	<b>35,419,010</b>	<b>34,756,875</b>	<b>(662,135)</b>	<b>(1.9)</b>	<b>10,035,614</b>
<b>Operating income (loss)</b>	<b>228,352</b>	<b>138,871</b>	<b>89,481</b>	<b>21.1</b>	<b>2,294,995</b>	<b>1,249,839</b>	<b>1,045,156</b>	<b>12.6</b>	<b>886,998</b>
<b>Other income:</b>									
District tax receipts	47,650	37,013	10,637	28.7	428,850	333,117	95,733	28.7	111,039
Interest	49,273	60,000	(10,727)	(17.9)	745,337	540,000	205,337	38.0	265,680
Other	90,865	8,333	82,532	990.4	375,333	74,997	300,336	400.5	18,839
Grants and Other Non-Restricted Contributions	8,226	3,333	4,893	146.8	17,331	29,997	(12,666)	(42.2)	10,000
Partnership Investment Income	-	-	-	-	-	-	-	-	-
<b>Total other income, net</b>	<b>196,014</b>	<b>108,679</b>	<b>87,335</b>	<b>80</b>	<b>1,566,851</b>	<b>978,111</b>	<b>588,740</b>	<b>60.2</b>	<b>405,559</b>
<b>Non-Operating Expense</b>									
Medical Office Expense	17,550	13,408	(4,142)	(30.9)	132,783	120,672	(12,111)	(10.0)	31,239
Urology Office	9,908	7,689	(2,219)	(28.9)	77,522	69,201	(8,321)	(12.0)	43,252
Pediatric Office	47,731	-	(47,731)	N/A	100,073	-	(100,073)	N/A	-
OB-GYN Office	12,217	-	(12,217)	N/A	27,582	-	(27,582)	N/A	-
<b>Total Non-Operating Expense</b>	<b>87,407</b>	<b>21,097</b>	<b>(66,310)</b>	<b>(314.3)</b>	<b>337,960</b>	<b>189,873</b>	<b>(148,087)</b>	<b>(78.0)</b>	<b>74,491</b>
<b>Excess (deficiency) of revenues over expenses</b>	<b>336,959</b>	<b>226,453</b>	<b>110,506</b>	<b>48.8</b>	<b>3,523,886</b>	<b>2,038,077</b>	<b>1,485,809</b>	<b>72.9</b>	<b>1,218,066</b>



**NORTHERN INYO HOSPITAL**  
**Statement of Operations—Statistics**  
*As of March 31, 2009*

	Month		Year		YTD Budget	YTD Actual	YTD Budget	YTD Actual	Year	
	Actual	Budget	Variance	Percentage					Variance	Percentage
<b>Operating statistics:</b>										
Beds	25.00	25.00	N/A	N/A	25.00	25.00	N/A	N/A	N/A	N/A
Patient days	296.00	265.00	31.00	1.12	2,632.00	2,385.00	247.00	247.00	1.10	1.10
Maximum days per bed capacity	775.00	750.00	N/A	N/A	6,750.00	6,750.00	N/A	N/A	N/A	N/A
Percentage of occupancy	38.19	35.33	2.86	1.08	38.42	35.33	3.09	3.09	1.09	1.09
Average daily census	9.55	8.83	0.72	1.08	9.61	8.83	0.77	0.77	1.09	1.09
Average length of stay	2.82	3.01	(0.19)	0.94	3.08	3.01	0.07	0.07	1.02	1.02
Discharges	105.00	88.00	17.00	1.19	855.00	792.00	63.00	63.00	1.08	1.08
Admissions	102.00	87.00	15.00	1.17	849.00	783.00	66.00	66.00	1.08	1.08
Gross profit-revenue depts.	4,345,957.57	4,321,007.00	24,950.57	1.01	39,265,231.54	38,889,063.00	376,168.54	376,168.54	1.01	1.01
<b>Percent to gross patient service revenue:</b>										
Deductions from patient service revenue and bad debts	39.79	43.22	(3.43)	0.92	40.71	43.22	(2.51)	(2.51)	0.94	0.94
Salaries and employee benefits	33.12	34.08	(0.96)	0.97	33.30	34.08	(0.78)	(0.78)	0.98	0.98
Occupancy expenses	5.57	4.38	1.19	1.27	5.39	4.38	1.01	1.01	1.23	1.23
General service departments	5.42	6.28	(0.86)	0.86	5.98	6.28	(0.30)	(0.30)	0.95	0.95
Fiscal services department	4.85	4.74	0.11	1.02	4.87	4.74	0.13	0.13	1.03	1.03
Administrative departments	5.34	5.37	(0.03)	0.99	5.04	5.37	(0.33)	(0.33)	0.94	0.94
Operating income (loss)	2.21	1.84	0.37	1.20	3.29	1.84	1.45	1.45	1.79	1.79
Excess (deficiency) of revenues over expenses	5.00	3.44	1.56	1.45	5.87	3.44	2.43	2.43	1.71	1.71
<b>Payroll statistics:</b>										
Average hourly rate (salaries and benefits)	39.76	43.24	(3.48)	0.92	41.32	43.24	(1.92)	(1.92)	0.96	0.96
Worked hours	50,201.55	47,276.00	2,925.55	1.06	425,240.74	425,484.00	(243.26)	(243.26)	1.00	1.00
Paid hours	56,183.78	51,895.00	4,288.78	1.08	483,949.37	467,055.00	16,894.37	16,894.37	1.04	1.04
Full time equivalents (worked)	285.24	273.27	11.96	1.04	272.59	273.27	(0.68)	(0.68)	1.00	1.00
Full time equivalents (paid)	319.23	299.97	19.25	1.06	310.22	299.97	10.25	10.25	1.03	1.03

# NORTHERN INYO HOSPITAL

## Statements of Changes in Net Assets

As of March 31, 2009

	<u>Month-to-date</u>	<u>Year-to-date</u>
<b>Unrestricted net assets:</b>		
Excess (deficiency) of revenues over expenses	336,959.35	3,523,885.51
Net Assets due/to transferred from unrestricted	-	12,178.75
Net assets released from restrictions used for operations	-	35,325.92
<b>Net assets released from restrictions used for payment of long-term debt</b>	<b>(65,541.00)</b>	<b>(589,869.00)</b>
Contributions and interest income	152.74	(9,907.43)
<b>Increase in unrestricted net assets</b>	<u>271,571.09</u>	<u>2,971,613.75</u>
<b>Temporarily restricted net assets:</b>		
District tax allocation	-	550,811.01
Net assets released from restrictions	-	(502,623.88)
Restricted contributions	-	100.00
Interest income	142.02	326.72
Net Assets for Long-Term Debt due from County	65,541.00	589,869.00
<b>Increase (decrease) in temporarily restricted net assets</b>	<u>65,683.02</u>	<u>638,482.85</u>
<b>Increase (decrease) in net assets</b>	337,254.11	3,610,096.60
<b>Net assets, beginning of period</b>	41,251,645.32	37,978,802.83
<b>Net assets, end of period</b>	<u>41,588,899.43</u>	<u>41,588,899.43</u>

# NORTHERN INYO HOSPITAL

## Statements of Changes in Net Assets

As of March 31, 2009

	<u>Month-to-date</u>	<u>Year-to-date</u>
<b>Unrestricted net assets:</b>		
Excess (deficiency) of revenues over expenses	336,959.35	3,523,885.51
Net Assets due/to transferred from unrestricted	(8,226.02)	3,952.73
Net assets released from restrictions used for operations	-	35,325.92
<b>Net assets released from restrictions used for payment of long-term debt</b>	<b>(65,541.00)</b>	<b>(589,869.00)</b>
Contributions and interest income	8,378.76	(1,681.41)
<b>Increase in unrestricted net assets</b>	<u>271,571.09</u>	<u>2,971,613.75</u>
<b>Temporarily restricted net assets:</b>		
District tax allocation	-	550,811.01
Net assets released from restrictions	-	(502,623.88)
Restricted contributions	-	100.00
Interest income	142.02	326.72
Net Assets for Long-Term Debt due from County	65,541.00	589,869.00
<b>Increase (decrease) in temporarily restricted net assets</b>	<u>65,683.02</u>	<u>638,482.85</u>
<b>Increase (decrease) in net assets</b>	337,254.11	3,610,096.60
<b>Net assets, beginning of period</b>	41,251,645.32	37,978,802.83
<b>Net assets, end of period</b>	<u>41,588,899.43</u>	<u>41,588,899.43</u>

# NORTHERN INYO HOSPITAL

## Statements of Cash Flows

*As of March 31, 2009*

	<b>Month-to-date</b>	<b>Year-to-date</b>
<b>Cash flows from operating activities:</b>		
Increase (decrease) in net assets	337,254.11	3,610,096.60
Adjustments to reconcile excess of revenues over expenses to net cash provided by operating activities: (correcting debt payment)	-	-
Depreciation	222,200.28	1,951,369.92
Provision for bad debts	97,142.75	1,179,984.49
Loss (gain) on disposal of equipment	-	11,229.70
(Increase) decrease in:		
Patient and other receivables	429,113.59	188,327.50
Other current assets	(14,688.12)	(136,449.97)
Plant Expansion and Replacement Cash	-	1,941,237.87
Increase (decrease) in:		
Accounts payable and accrued expenses	(84,715.71)	1,289,338.92
Third-party payors	8,462.00	(1,327,833.00)
<b>Net cash provided (used) by operating activities</b>	<b>994,768.90</b>	<b>8,707,302.03</b>
 <b>Cash flows from investing activities:</b>		
Purchase of property and equipment	(817,163.59)	(5,620,501.66)
Purchase of investments	2,096,703.96	(102,199.52)
Proceeds from disposal of equipment	-	(11,229.70)
<b>Net cash provided (used) in investing activities</b>	<b>1,279,540.37</b>	<b>(5,733,930.88)</b>
 <b>Cash flows from financing activities:</b>		
Long-term debt	(59,207.33)	(526,405.10)
Issuance of revenue bonds	(47,438.75)	(23,717.80)
Unamortized bond costs	1,486.95	13,382.55
Increase (decrease) in donor-restricted funds, net	(8,520.78)	(46,932.44)
<b>Net cash provided by (used in) financing activities</b>	<b>(113,679.91)</b>	<b>(583,672.79)</b>
 <b>Increase (decrease) in cash and cash equivalents</b>	 2,160,629.36	 2,389,698.36
<b>Cash and cash equivalents, beginning of period</b>	<b>2,663,284.55</b>	<b>2,434,215.55</b>
<b>Cash and cash equivalents, end of period</b>	<b>4,823,913.91</b>	<b>4,823,913.91</b>

**Northern Inyo Hospital  
Summary of Cash and Investment Balances  
Calendar Year 2009**

Month	<u>Operations Checking Account</u>				<u>Time Deposit Month-End Balances</u>								
	Balance at Beginning of Month	Deposits	Disbursements	Balance at End of Month	Investment Operations Fund	Bond and Interest Fund (2)	Equipment Donations Fund	Childrens Scholarship Fund	Tobacco Settlement Fund	Total Revenue Bond Fund (1)	Project Revenue Bond Fund (1)	General Obligation Bond Fund	
January	910,403	3,465,150	3,801,871	573,681	25,688,066	557,358	26,212	3,137	8,014	521,838	729,992	18,350	974
February	573,681	5,073,277	4,962,667	684,291	25,701,675	557,358	26,212	3,137	8,014	521,965	759,081	-	-
March	684,291	6,979,617	5,689,346	1,974,563	23,604,971	557,497	26,218	3,138	8,016	530,337	806,520	-	-
April	220,726	5,565,892	5,070,387	716,230	21,993,157	533,397	25,192	3,035	5,855	532,756	904,546	18,258	2,706,314
May	716,230	4,861,035	4,171,128	1,406,138	22,583,401	505,947	25,192	3,035	20,855	532,894	934,534	18,258	2,318,199
June	1,406,138	3,979,790	4,241,108	1,144,820	24,112,234	506,089	25,199	3,036	10,960	533,038	782,802	18,278	1,941,042
July	1,144,820	3,591,736	4,304,179	432,378	25,157,206	473,714	25,799	3,036	10,960	533,181	826,431	18,297	1,896,555
August	432,378	3,928,525	4,052,898	308,005	24,668,222	539,232	25,799	3,036	10,960	533,315	870,108	18,316	1,802,362
September	308,005	6,941,975	5,021,257	2,228,723	23,464,535	539,363	25,805	3,037	8,963	533,463	913,829	18,335	488,249
October	2,228,723	3,669,458	5,409,330	488,851	24,438,919	72,065	25,805	3,037	8,963	521,427	957,490	18,349	490,613
November	488,851	3,294,047	3,600,921	181,977	24,595,851	89,165	25,805	3,037	8,963	521,554	1,000,949	18,350	491,657
December	181,977	4,947,737	4,219,311	910,403	24,670,653	557,358	26,222	3,037	8,014	521,703	682,553	18,350	882

Notes: (1) The difference between the Total and Project Revenue Bond Funds represents amounts held by the trustee to make payments on the District's behalf and about \$575,000 to cover the Bond Reserve Account Requirement with respect to the Series 1998 Bonds. The Project is exhausted.  
(2) The Bond and Interest Fund now contains the Debt Service amount from the County for both the original Bond and the 2005 Bond.

## Investments as of 03/31/2009

ID	Purchase Date	Maturity Date	Institution	Certificate ID	Rate	Principal Invested
1	21-Sep-07	01-Apr-09	Citigroup Med Term Note	125581AJ7	3.38%	239,293
2	02-Mar-09	01-Apr-09	Local Agency Investment Fund	20-14-002	1.82%	1,731,394
3	02-Mar-09	01-Apr-09	Local Agency Investment Fund	20-14-002 Walker	1.82%	309,197
4	02-Mar-09	01-Apr-09	Prudential Instl Liquidity	1012-2406	0.74%	100,000
5	31-Mar-09	01-Apr-09	Union Bank-Money Market	2740028807	0.35%	11,781,580
6	07-Aug-08	15-Jun-09	World Savings Bank Note	98153BAE4	5.17%	1,105,773
7	12-Jun-08	19-Jun-09	Federal Home Loan Bank-Wachovia	3133XFVF0	5.25%	102,703
<b>Current Fiscal Year Totals</b>						<b>15,369,940</b>
8	03-Jun-08	01-Jul-09	International Lease Finance Corp	459745FM2	4.75%	1,005,500
9	10-Oct-08	09-Oct-09	Amboy Bank	023305CF0	3.75%	250,000
10	15-Oct-08	15-Oct-09	Colonial Bank, N.A.	195554PG9	3.65%	250,000
11	15-Oct-08	15-Oct-09	Comerica Bank	200339CT4	3.65%	250,000
12	15-Oct-08	15-Oct-09	Morgan Stanley Bank	61747MPB1	3.65%	250,000
13	17-Oct-08	16-Oct-09	Bank of Michigan	06424TCW9	3.60%	250,000
14	17-Oct-08	16-Oct-09	Firstbank of Puerto Rico	337629B32	3.70%	250,000
15	17-Oct-08	16-Oct-09	GMAC Bank	36185AXP8	3.65%	250,000
16	16-Oct-08	16-Oct-09	Westernbank Puerto Rico	95989QKL0	3.75%	250,000
17	21-Sep-07	01-Nov-09	Citigroup Med Term Note	12560PCL3	6.88%	702,987
18	17-Feb-09	01-Nov-09	Federal Home Loan Mtg Corp-MBS	31282VBY0	4.50%	68,652
19	22-Feb-08	07-Dec-09	Bear Stearns Co Note	073902BR8	4.58%	933,927
20	12-Dec-08	12-Dec-09	1st Financial Bank USA (FNC CD)	5X42582	3.55%	249,000
21	12-Dec-08	12-Dec-09	Discover Bank (FNC CD)	5x42584	3.15%	250,000
22	12-Dec-08	12-Dec-09	M&T Bank N.A. (FNC CD)	5X42577	3.15%	250,000
23	12-Dec-08	12-Dec-09	Texas Community Bank (FNC CD)	5X42597	3.40%	250,000
24	18-Aug-08	15-Dec-09	World Savings Bank Note	9515GAA3	5.24%	492,950
25	30-Dec-04	30-Dec-09	Capital City Bank and Trust	9N01713	4.75%	99,000
26	05-Jan-09	05-Jan-10	Gulf Cost Community Bank IFNC CD)	5X42841	2.64%	99,000
27	11-Dec-08	15-Jan-10	Berkshire Hathaway Fin Corp GRD Sr Note	084664AR2	2.49%	203,510
28	11-Dec-08	22-Feb-10	Citigroup Inc	172967CU3	6.49%	97,308
29	25-Jul-08	01-Mar-10	Schwab Medium Term Note	80851QCX0	4.33%	528,440
30	11-Dec-08	15-Apr-10	Greater Bay Bancorp Sr Note	391648AT9	3.82%	101,688
31	22-Apr-05	22-Apr-10	Bank of Waukegan	065563AR9	4.75%	99,000
32	11-Dec-08	28-Apr-10	Toyota Motor Credit Corp Note	829233PV60	2.79%	200,164
33	24-Apr-08	15-May-10	American General Finance Corp Note	02635PSV6	4.47%	503,905
<b>Fiscal Year End 2010</b>						<b>8,135,031</b>
34	18-Dec-08	18-Dec-10	Worlds Foremost Bank (FNC CD)	5X42688	4.40%	100,000
<b>Fiscal Year End 2011</b>						<b>100,000</b>
<b>Total Investments</b>						<b>23,604,971</b>

## Financial Indicators

	Target	Mar-09	Feb-09	Jan-09	Dec-08	Nov-08	Oct-08	Sep-08	Aug-08	Jul-08	Jun-08	May-08	Apr-08
Current Ratio	>1.5-2.0	4.20	4.09	3.89	4.13	3.92	3.90	3.31	3.68	3.64	3.70	4.28	4.09
Quick Ratio	>1.33-1.5	3.74	3.66	3.50	3.69	3.47	3.44	2.89	3.22	3.18	3.31	3.85	3.64
Days Cash on Hand	>75	227.43	222.55	230.22	223.53	223.62	218.15	229.56	229.67	222.74	233.39	239.70	254.30

NORTHERN INYO HOSPITAL  
DEPARTMENTAL NON-EMERGENCY OUTPATIENT VISITS

MONTHS 2009	* DIAGNOSTIC RADIOLOGY		* MAMMOGRAPHY		* NUCLEAR MEDICINE		* ULTRASOUND		* CT SCANNING		* MRI		LABORATORY		E.K.G/ EEG		PHYSICAL THERAPY		RESPIRATORY THERAPY		RURAL HEALTH CLINIC		TOTALS		
	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	07 / 08 / 09	
JANUARY	308 / 544 / 606	198 / 193 / 434	36 / 71 / 96	166 / 205 / 206	112 / 170 / 165	86 / 89 / 470	1621 / 1809 / 1635	139 / 103 / 120	335 / 335 / 363	19 / 10 / 10	941 / 1057 / 1457	3961 / 4596 / 5562													
FEBRUARY	263 / 593 / 477	194 / 193 / 182	38 / 63 / 51	157 / 205 / 195	102 / 217 / 153	71 / 85 / 435	1662 / 1744 / 1643	84 / 113 / 116	302 / 364 / 314	19 / 11 / 10	965 / 1150 / 1374	3857 / 4738 / 4950													
MARCH	269 / 529 / 581	122 / 311 / 261	29 / 133 / 1	144 / 223 / 201	95 / 233 / 152	76 / 403 / 472	1734 / 1774 / 1904	100 / 149 / 121	340 / 346 / 428	16 / 12 / 13	1095 / 1211 / 1477	4020 / 5324 / 5611													
APRIL	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /
MAY	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /
JUNE	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /
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SEPTEMBER	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /
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DECEMBER	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /	/ / /
CALENDAR YEAR	840 / 1666 / 1664	514 / 697 / 877	103 / 267 / 148	467 / 633 / 602	309 / 620 / 470	233 / 577 / 1377	5017 / 5327 / 5182	323 / 385 / 357	977 / 1045 / 1105	54 / 33 / 33	3001 / 3418 / 4308	11839 / 14648 / 16123													
MONTHLY AVERAGES	280 / 555 / 555	171 / 232 / 292	34 / 89 / 49	156 / 211 / 201	103 / 207 / 157	78 / 192 / 458	1672 / 1776 / 1727	108 / 122 / 119	326 / 348 / 368	18 / 11 / 11	1000 / 1139 / 1436	3946 / 4883 / 5374													

\*Radiology has changed their methodology for capturing statistics and feel these are more accurate. They are much higher than previously reported.



NORTHERN INYO HOSPITAL  
STATISTICS

MONTHS	IP			SURGERIES			TOTAL			BIRTHS			ADMITTS			ER			OP REFERRALS			ADMITTS (WINB)			PT DAYS (W/O NB)			PT DAYS (W/NB)			DISCH (W/NB)		
	07	08	09	07	08	09	07	08	09	07	08	09	07	08	09	07	08	09	07	08	09	07	08	09	07	08	09	07	08	09	07	08	09
	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009	2009	2008	2009
JANUARY	38	33	46	73	106	109	111	139	155	17	16	25	47	48	48	510	573	594	3331	3237	3241	111	107	141	299	329	359	380	364	406	106	96	142
FEBRUARY	24	17	26	59	81	97	83	98	123	19	14	15	14	39	33	521	545	494	2991	3165	2988	107	86	96	251	241	245	291	274	278	105	96	100
MARCH	25	32	24	53	82	116	78	114	140	17	13	22	49	43	38	460	506	542	3079	3285	3579	117	108	124	286	318	296	322	349	338	116	102	127
APRIL	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
MAY	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
JUNE	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
JULY	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
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SEPTEMBER	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
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DECEMBER	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
CALENDAR YEAR	87	82	96	185	269	322	272	351	418	53	43	62	110	130	119	1491	1624	1630	9401	9687	9808	335	301	361	836	888	900	963	987	1022	327	294	369
MONTHLY AVERAGE	29	27	32	62	90	107	91	117	139	18	14	21	37	43	40	487	541	543	3,134	3,229	3,269	112	100	120	279	296	300	321	329	341	109	98	123

**Northern Inyo Hospital  
Monthly Report of Capital Expenditures  
Fiscal Year Ending JUNE 30, 2008  
As of March 31, 2009**

<b>MONTH APPROVED BY BOARD</b>	<b>DESCRIPTION OF APPROVED CAPITAL EXPENDITURES</b>	<b>AMOUNT</b>
FY 2006-07	NovaRad RIS (part of original NovaRad PACS System)	208,426 *
FY 2007-08	Seimens Patient Monitor SC 9000XL	7,799
	3-D FOR M.E.P.	45,000
	OMNICELL COLOR TOUCH	55,419 *
	Access II Immunoassay System (Approved 4-08 with Reagent Agreement)	64,724 *
	AMOUNT APPROVED BY THE BOARD IN PRIOR FISCAL YEARS TO BE EXPENDED IN THE CURRENT FISCAL YEAR	<u>381,368</u>
FY 2008-09	Beckman Coulter Act10	10,344 *
	Modular Building Purchase-Quality Improvement	21,785 *
	Modular Building Purchase-Employee Health & Community Relations	31,114 *
	Laparoscopic Video Equipment-Surgery	245,209 *
	Coagulation Analyzer	25,000
	Mizuhosi Fracture Table	117,329
	AMO Phaco Machine for Surgery	75,000
	AMOUNT APPROVED BY THE BOARD IN THE CURRENT FISCAL YEAR TO BE EXPENDED IN THE CURRENT FISCAL YEAR	<u>525,781</u>
	Amount Approved by the Board in Prior Fiscal Years to be Expended in the Current Fiscal Year	381,368
	Amount Approved by the Board in the Current Fiscal Year to be Expended in the Current Fiscal Year	<u>525,781</u>
	Year-to-Date Board-Approved Amount to be Expended	270,128

**Northern Inyo Hospital  
 Monthly Report of Capital Expenditures  
 Fiscal Year Ending JUNE 30, 2008  
 As of March 31, 2009**

<b>MONTH APPROVED BY BOARD DESCRIPTION OF APPROVED CAPITAL EXPENDITURES</b>	<b>AMOUNT</b>
Year-to-Date Administrator-Approved Amount	511,022 *
Actually Expended in Current Fiscal Year	<u>637,022 *</u>
Year-to-Date Completed Building Project Expenditures	872,409 *
<b>TOTAL FUNDS APPROVED TO BE EXPENDED</b>	<u><u>1,418,172</u></u>
<b>Total-to-Date Spent on Incomplete Board Approved Expenditures</b>	<b>0</b>
Reconciling Totals:	
Actually Capitalized in the Current Fiscal Year Total-to-Date	1,148,044
Plus: Lease Payments from a Previous Period	0
Less: Lease Payments Due in the Future	0
Less: Funds Expended in a Previous Period	0
Plus: Other Approved Expenditures	<u>270,128</u>
<b>ACTUAL FUNDS APPROVED IN THE CURRENT FISCAL YEAR TOTAL-TO-DATE</b>	<u><u>1,418,172</u></u>
Donations by Auxiliary	0
Donations by Hospice of the Owens Valley	0
+Tobacco Funds Used for Purchase	12,179
	<u>0</u>
	<u><u>12,179</u></u>

\*Completed Purchase

(Note: The budgeted amount for capital expenditures for the fiscal year ending June 30, 2006, is \$3,600,000 coming from existing hospital funds.)

\*\*Completed in prior fiscal year

**Northern Inyo Hospital  
 Monthly Report of Capital Expenditures  
 Fiscal Year Ending JUNE 30, 2008  
 As of March 31, 2009**

<b>Administrator-Approved Item(s)</b>	<b>Department</b>	<b>Amount</b>	<b>Month Total</b>	<b>Grand Total</b>
DR3080CII SCANNER	SURGERY CLINIC	2,531		
DR3080CII SCANNER	SURGERY CLINIC	2,531		
IR 102SiF Printer/Copier/Scanner	PEDIATRIC CLINIC	2,252		
SHARP UP3500 POS TERMINAL WITH CASH CAFETERIA		2,717		
DIAMOND FLEX GRASPERS 5MM	SURGERY	2,449		
KVM SOLUTION DOMINION CAT5 SWITCH	IT	8,198		
CISCO AIRONET 4400 WLAN	IT	13,572		
BI-DIRECTION SIEMENS CA4500 ANALYZER LAB		3,500		
<b>Month Ending March 31, 2009</b>			<b>37,751</b>	<b>511,022</b>

**Northern Inyo Hospital**  
**PLANT EXPANSION AND REPLACEMENT BUILDING PROJECTS**

**(Completed and Occupied or Installed)**

<b>Item</b>		<b>Amount</b>	<b>Grand Total</b>
Turner Construction; Retainer Payment for Phase I	Support Building	436,352	
Turner Construction; Retainer Payment for Phase I	Radiology Building	419,240	
<b>MONTH ENDING AUGUST 31, 2008</b>			<b>855,592</b>
<hr/>			
HVAC Roof System-Support Building	Support Building	16,817	
<b>MONTH ENDING MARCH 31, 2009</b>			<b>872,409</b>
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**NORTHERN INYO HOSPITAL**  
*Northern Inyo County Local Hospital District*  
Medical Staff Office

150 Pioneer Lane  
Bishop, California 93514  
(760) 873-2136 voice  
(760) 872-5836 fax

TO: Board of Directors, Northern Inyo County Local Hospital District  
FROM: Richard Nicholson, M.D., Chief of Medical Staff  
DATE: May 5, 2009  
RE: Medical Executive Committee report

The Medical Executive Committee met on May 5, 2009.

Following careful review and consideration, the Committee agreed to recommend to the Hospital District Board of Directors approval of the following:

1. Advancement of Board-certified internist Vasuki Sittampalam, M.D. to the Northern Inyo Hospital Active Medical Staff with requested privileges;
2. Appointment of Board-certified radiologist Stuart A. Souders, M.D. to the Provisional Consulting Medical Staff with requested privileges commensurate with his breast imaging practice;
3. Appointment of Board-certified neurologist Maria T. Toczek, M.D. to the Provisional Consulting Medical Staff with requested privileges for EEG interpretation;
4. Hospitalwide Policy/Procedure entitled *Fetal Fibronectin Testing*.

---

Richard Nicholson, M.D., Chief of Staff

**NORTHERN INYO HOSPITAL  
POLICY AND PROCEDURE**

Title: <b>Fetal Fibronectin Testing</b>	
Scope:	Department: <b>OB/Gyn</b>
Source: Kneip, Jan	Effective Date:

**PURPOSE:**

Collection of fetal fibronectin specimens in order to determine the probability of labor within the next 7 to 14 days .

**SPECIAL CONSIDERATIONS:**

Physician order IS required.

Procedure may be performed by :  x .RN

Special education required to perform procedure: YES

Age Specific Consideration: More detailed explanations/communications may be needed for teenage patients depending on level of understanding/maturity level.

1. Basic fetal monitoring
2. Ability to independently care for the interpartum patient as determined by the Perinatal Unit Head Nurse.

**EQUIPMENT:**

1. ONE specimen collection device from the Fetal Fibronectin kit.
2. Speculum
3. Gloves
4. Light spot
5. Label and biohazard bag.

**PRECAUTIONS:**

Standard precautions when dealing with body fluids. The specimen should be obtained after 24 weeks gestation. Specimen should be obtained prior to digital exam and:

- No sexual intercourse in the prior 24 hours
- Less than 3 cm dilated
- No circlage
- No ROM
- No Bleeding
- No Previa
- No Aburption
- No reproductive tract cancer
- No KY, Monistat, Betadine, ECT.**

**All of the above can give false positive results.**

**PROCEDURE: This can be performed either by speculum exam or "blind" swab insertion**

1. During a speculum examination, lightly rotate the Dacron swab across posterior fornix of the vagina for approximately 10 seconds to absorb cervicovaginal secretions. **OR** for the blind procedure digitally separate the labia and insert the Dacron swab blindly toward the posterior fornix and leave in place for at least 10 seconds.
2. Remove swab and immerse Dacron tip in buffer. Break the shaft (at the score) even with the top of the tube (see figure 2 in the box instructions.)
3. Align the shaft with the hole inside the cap and push down tightly over the shaft sealing the tube with a click. **Warning** The shaft **MUST** be aligned to avoid leakage. (Figure 3)



**NORTHERN INYO HOSPITAL  
POLICY AND PROCEDURE**

<b>Title: Fetal Fibronectin Testing</b>	
<b>Scope:</b>	<b>Department: OB/Gyn</b>
<b>Source: Kneip, Jan</b>	<b>Effective Date:</b>

4. Send the tube to the Laboratory for testing. Transport specimens at 2 to 25°C
5. Specimens not tested within eight (8) hours of collection must be stored refrigerated at 2° to 8° C and assayed within three (3) days of collection. DO not expose to temperatures above 25°C.

**DOCUMENTATION:**

Document in the Nurse Notes the method performed and how the patient tolerates the exam. Note when the specimen was sent to the lab. Lab results will be posted in the chart.

**Committee approval needed:** No

**Responsibility for review and maintenance:** Perinatal Unit Nurse Manager

**Index:** Fetal Fibronectin Testing

**Initiated:** 12/12/05;

**Revised:** 04/15/09 jk

**Reviewed:**

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# HIS Professionals IT Assessment

## Primary weaknesses noted in assessment

- Projects and help requests are too slow to resolve or complete.
  - Low levels of customer service and helpfulness from IT staff.
  - Poor communication of the IT department with the rest of the hospital
- 

## Causes of weaknesses

- High diversity of systems (healthcare applications) and hardware (computers, printers, fax machines, copiers, etc.) leads to high workloads.
  - IT Culture of negativity, control and condescension
  - Expectations and priorities not clearly established or agreed upon.
- 

## Short term solutions

- Slow response
  - *(Complete)* Single phone number for Help Desk.
    - Internally, 3411
    - Externally, 760-873-2835
  - *(Not Started)* Hot line for patient care issues.
    - Watching to see if 3411 is sufficient.
  - *(In Progress)* Standardization of hardware and software.
    - Completed upgrade of all workstations to Windows XP.
    - Upgrade of old workstations to Dell in progress.
    - Upgrade to Office 2007 completed prior to July 1.
  - *(Not Started)* Automation of common IT tasks.
    - Will be able to do this with implementation of Office 2007.
- Customer service
  - *(In Progress)* Focus on being helpful/good attitude.

- Customer service classes to be completed 06/24/09.
    - Commentary from outside IT is that customer service has improved.
    - *(Not Started)* Employee evaluations to contain customer service grade.
    - *(Not Started)* Customer service surveys and “secret shoppers”.
  - Communication and Governance
    - *(In Progress)* Two committees have been created to replace the old Information Management Committee.
      - IT Executive Committee
        - Meets twice monthly.
        - Provide final approval for IT projects.
        - Set priority of IT projects.
        - Final approval of IT Strategic Plan
        - Composed of Carrie Petersen, Leo Freis, John Halfen and Adam Taylor
      - IT Steering Committee
        - Meets once monthly
        - Advises the Executive Committee regarding IT projects.
        - Advises the Executive Committee regarding the Strategic Plan.
        - Forms subcommittees to perform detailed discussions of IT-related issues.
        - Composed of Carrie Petersen, Leo Freis, Adam Taylor, Lisa Harmon, Neil Lynch, Scott Hooker, Susan Batchelder and Tracy Aspel.
    - *(In Progress)* Project Governance
      - Three part process including:
        - Project Proposal
          - Preliminary budget
          - Initial business case
          - Requested priority
        - Project Charter
          - Concrete dates and priority
          - Detailed project plan
          - Measureable objectives
        - Post-project Evaluation
          - Did project meet goal?
          - Improvements for next time
-

## Medium term solutions:

- Slow response
    - *(In Progress)* Learn and document basic support of all applications.
      - IT already has inherent knowledge of all applications. We need to formalize what we are supposed to know.
    - *(Not Started)* Operational Level Agreements (OLEs) with application software experts (ASEs)
    - *(Not Started)* Reduce diverse systems
      - Consider purchase of a single Hospital Information System that integrates separate programs we are now using.
    - *(In Progress)* Centralized hardware (printers, faxes and copiers)
      - Remove individual office/desk printers.
  
  - Customer Service
    - *(Not Started)* Shadowing other departments to learn workflows and critical IT issues.
    - *(Not Started)* Create targets for resolution on first contact
    - *(Not Started)* Plan for follow up communication after resolution
  
  - Communication
    - *(Not Started)* Assist ASEs with finding and publishing documentation as well as user training.
    - *(Not Started)* Single sign-on passwords.
- 

## Long term solutions:

- *(Not Started)* Convert help desk technicians to application analysts.
  - Depends on level of system diversity.
    - High diversity = Basic IT application support
    - Low diversity = Comprehensive IT application support

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# **NORTHERN INYO HOSPITAL**

Northern Inyo County Local Hospital District

150 Pioneer Lane · Bishop, California 93514 · Voice (760) 873-5811 · Fax (760) 872-2768

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## **LANGUAGE SERVICES DEPARTMENT**

### **ANNUAL REPORT**

**2008 - 2009**

**Breaking down the language barrier:  
Translating Limited English Proficiency Policy into Practice.**

**José García  
Language Services Manager**

## Language Services Department Mission

*“The purpose of the Northern Inyo Hospital Language Service Program is to ensure timely and appropriate access to medical services for limited- and non-English speaking, and hearing-impaired patients.”*

### Introduction

Since its early beginnings, one of America’s greatest and enduring strengths has been its inclusion and immigration of individuals who speak a variety of different languages. Whatever our language is, we are bound together by shared dreams and an adherence to a common set of legal principles governing our society.

One of those principles is Title VI of the Civil Rights Act of 1964:

“No person in the United States shall on the ground of race, color, or national origin be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.<sup>1</sup>”

Lets focus on one part of Title VI, the prohibition of discrimination on the basis of national origin.

What is national origin? It is different from citizenship, or even where one was born. Simply put national origin refers to ancestry, and national origin discrimination encompasses all actions that treat a person or group of people

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<sup>1</sup> Title VI, 42 U.S.C. § 2000d. Prohibition against exclusion from participation in, denial the benefits of, and discrimination under Federally assisted programs on ground of race, color or national origin.



differently or more harshly because of that ancestry. One characteristic often associated with ancestry is language.

Discrimination based on an individual's inability to speak, read, write, or understand English may be a type of national origin discrimination.

If individuals have a limited ability to speak, read, write, or understand English they are Limited English Proficient or LEP<sup>2</sup>.

All state and local governments, and all other entities that receive financial assistance from the Federal government are called "recipients." Recipients include entities such as hospitals, police departments, housing authorities, unemployment centers, and state agencies such as food stamps offices, welfare, and social services agencies, and many others. Recipients must provide LEP individuals "meaningful access" to important benefits, information, services, encounters, and rights that are available to individuals who speak English.

Title VI has been part of our nation's civil rights laws since 1964. Presidential executive order 13166 directed federal agencies to provide their recipients with guidance on how to comply with Title VI by taking reasonable steps to providing meaningful access to LEP persons. The order also told federal agencies themselves to provide meaningful access to LEP persons.

What does it mean to provide meaningful access? All do, there are many factors that can be used, the Federal Guidance<sup>3</sup> focuses on the following four factors to consider when determining how to provide meaningful access:

1. The number or proportion of LEP persons in the community.

The more people who speak a particular language and are eligible to be served, or likely to be encountered the more services in that language are

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<sup>2</sup> As set forth by Title VI of the Civil Rights Act of 1964, and for Presidential Executive Order 13166 of August 11, 2000.

<sup>3</sup> DOJ, and DHHS Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons.

needed.

2. The frequency of contact a recipient has or should have with LEP persons.

The more frequent the contact, the greater the need for interpreters, translators, or other language assistance tools.

3. The nature and importance of the benefit, service, communication, encounter, or information to the LEP person.

The more important the more likely high quality and timely language services are needed. Another way to think of this is to determine the consequences to an LEP person if communication is not effective.

4. The resources available to the program, along with the cost of providing language assistance.

Smaller programs with more limited budgets, generally, are not expected to provide the same level and expense of language services, as larger programs with larger budgets.

Balancing these factors will help to determine the level of language services necessary to provide meaningful access.

Situations can be life threatening for patients, and could be avoided. Without language assistance, doctors, nurses, and health care providers in general, are unable to properly communicate with patients, obtain a medical history, and unable to provide the same quality of health care as they do to English-speaking patients.

## Northern Inyo Hospital's Language Services Program

Northern Inyo Hospital is required<sup>4</sup> to take reasonable steps to ensure meaningful access to its programs, activities, and services by Limited English Proficient persons. Northern Inyo Hospital recognizes that access to basic health care services is the right of every patient.<sup>5</sup>

The purpose of Northern Inyo Hospital's Language Services Policy is to define its Language Services Program, in order to provide the necessary competent language assistance, to ensure timely and appropriate access to health care services for patients with language or communication barriers requesting services at any facility owned or operated by NIH. While maintaining compliance with all state and federal regulations, and accrediting agency (The Joint Commission – JCAHO) guidelines pertaining to providing language assistance for non-English speaking and LEP patients, and the hearing impaired.

The fundamental purpose of healthcare interpreters is to facilitate communication between two parties who do not speak the same language and do not share the same culture.<sup>6</sup>

The healthcare interpreter's basic function is to support the health and well-being of the patient and a positive patient-provider relationship.<sup>7</sup>

Northern Inyo Hospital's Language Services Program follows state<sup>8</sup> and federal<sup>9</sup> guidelines for training interpreters providing language assistance. California Health and Safety Code, Section 1259 requires acute care facilities to adopt and annually review its policy to provide language assistance to patients experiencing language or communication barriers.

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<sup>4</sup> DHHS Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons.

<sup>5</sup> California Health and Safety Code, Section 1259.

<sup>6</sup> California Standards for Healthcare Interpreters.

<sup>7</sup> California Standards for Healthcare Interpreters.

<sup>8</sup> California Health and Safety Code, Section 1259.

<sup>9</sup> DHHS Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons.

Northern Inyo Hospital is committed to equally and fairly compensate its employees who have proven to have a skill that makes them additionally valuable in providing health care services. In addition, and to maintain compliance, and improve the quality of services provided; the following policy change is being proposed (action item):

1. "Approved Bilingual Employees<sup>10</sup>" including "Dual-Role Interpreters<sup>11</sup>" should receive an increase to the next pay grade from their base hourly wage, after completion of required criteria.

Northern Inyo Hospital's Language Services Program encompasses:

1. Direct patient care in qualifying languages,
2. In-person verbal and sign language interpretation,
3. Translation of Vital Documents, and
4. Over-the-phone interpreting services.

#### Direct patient care in qualifying languages

In health care, communication is everything. Patients have the right to properly communicate with health care providers. Ethically and legally, health care providers are required to provide meaningful access to LEP patients, by providing competent language assistance.

Current global demographics create the need for individuals to expand their ability to communicate in a language other than their primary. As mention during the introduction, "one of America's greatest and enduring strengths has been its

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<sup>10</sup> Northern Inyo Hospital, Language Services Policy, Level I, Approved Bilingual Employee

<sup>11</sup> Northern Inyo Hospital, Language Services Policy, Dual-Role Interpreter.

inclusion and immigration of individuals who speak a variety of different languages.” Northern Inyo Hospital’s service area primarily includes the Zip Code 93514. According with the U.S. Census Bureau, in the year 2000, 11.2% of the population (5 years and over) speak a language other than English at home in the 93514 Zip Code; the State of California had 12.4 million or 39.5%, and the U.S. 17.9%. The following table shows the primary language of all patients seen at NIH during 2008.<sup>12</sup>

	Language	Patients
1	Arabic	11
2	Cantonese	1
3	Czech	1
4	Danish	1
5	Dutch	5
6	English	62587
7	French	7
8	German	26
9	Hebrew	1
10	Hindustani	19
11	Italian	4
12	Japanese	1
13	Korean	3
14	Mandarin	1
15	None	57
16	Other	72
17	Portuguese	1
18	Russian	1
19	Sign Language	41
20	Spanish	2694
21	Thai	58
22	Turkish	1
23	Vietnamese	57
	Total	65650

As noted, 57 patients were admitted with “none” and 72 with “other” language. Admission Services can improve in patient data collection, if we believe that every human being has a language, and if it’s “other,” that other language should be recorded.<sup>13</sup>

Federal and State regulations establish guidelines for providing services in languages other than English. Northern Inyo Hospital has used one of these regulations, the California Health and Safety Code Section 1259 to establish the criteria to designate its Bilingual Employees and Dual-Role Interpreters. Only those who have demonstrated proficiency in that particular language can be approved to provide direct services in a language other than English. By implementing language skills evaluation, and the designation of “Approved Bilingual Employee,” Northern Inyo Hospital

<sup>12</sup> Northern Inyo Hospital, Affinity program.

<sup>13</sup> California Health and Safety Code Section 1259, and 128835.

demonstrates its adherence to legal principles governing health care practices and civil rights, and shows patients its dedication to provide meaningful access to LEP patients.

In-person verbal and sign language interpretation, and Over-the-phone interpreting

Healthcare interpreting requires preparation and specialized training. Interpreters should have and demonstrate proficiency in a language other than English, and in medical terminology in English and in the target language. Also, interpreters should adhere to a professional code of ethics and to standards of practice for healthcare interpreters. Northern Inyo Hospital has provided the training required by its Language Services Policy to all employees providing interpreting services. As of today we have trained and actively participating 12 dual-role interpreters.

American Sign Language interpreting demand at NIH it is low but, we are committed to address the deaf and hearing-impaired language needs, as that of every patient experiencing barriers to communication with health care providers.

Sign Language interpreting was needed in 12 occasions for a total of 35 hours billed during 2008.

The following table shows clinical and non-clinical in-person verbal interpreting sessions provided by NIH employees during 2008:

3/08	4/08	5/08	6/08	7/08	8/08	9/08	10/08	11/08	12/08	1/09	2/09	Total
132	135	90	101	87	119	94	210	142	150	167	169	1596

Over-the-phone interpreting services have increased over the last 12 months; this is due in part to the purchase (and its strategic placement) of the dual-handset cordless telephones, and its designated use to contact Language Line's over-the-phone interpreting services.

Northern Inyo Hospital's service area demographics mirror the nation's with representatives from all 5 different race groups. According with the US Census 2000, Asia was represented with people from India, China, Philippines, Japan, Korea, Vietnam, and other Asian countries. Native Hawaiian and Other Pacific Islander included people from Hawaii, and some other Pacific Islands. Hispanics from any race accounted for 11.1% including 9.2% from México. Caucasians from any ethnic group total 77.6%.

The table to the right and below shows the use of the over-the-phone interpreting services from Language Line during 2008:

<b>March 2008</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	14	117
	<b>Total</b>	<b>14</b>	<b>117</b>
<b>April</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	19	174
	Gujarati	4	35
	Punjabi	1	7
	Hindi	1	5
	Vietnamese	1	5
	<b>Total</b>	<b>26</b>	<b>226</b>
<b>May</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	13	130
	Gujarati	2	13
	Punjabi	1	8
	<b>Total</b>	<b>16</b>	<b>151</b>
<b>June</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	14	162
	German	2	23
	<b>Total</b>	<b>16</b>	<b>185</b>

<b>July</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	18	193
	<b>Total</b>	<b>18</b>	<b>193</b>
<b>August</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	12	106
	German	4	43
	Italian	1	4
	<b>Total</b>	<b>17</b>	<b>153</b>
<b>September</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	15	139
	German	2	31
	Italian	1	18
	<b>Total</b>	<b>18</b>	<b>188</b>
<b>October</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	25	247
	German	4	48
	French	1	11
	<b>Total</b>	<b>30</b>	<b>306</b>
<b>November</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	29	229
	<b>Total</b>	<b>29</b>	<b>229</b>
<b>December</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	18	182
	Vietnamese	14	154
	<b>Total</b>	<b>32</b>	<b>336</b>
<b>January 2009</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	30	352
	Vietnamese	2	67
	French	1	2
	<b>Total</b>	<b>33</b>	<b>421</b>
<b>February</b>	<b>Language</b>	<b>Calls</b>	<b>Minutes</b>
	Spanish	17	159
	Vietnamese	3	48
	<b>Total</b>	<b>20</b>	<b>207</b>
<b>2008 - 2009</b>	<b>Total</b>	<b>269</b>	<b>2712</b>



## Translation of Vital Documents

Federal and State law, within the Limited English Proficiency Policy, require acute care hospitals, health care providers, and recipients in general to translate Vital Documents into “threshold languages.”<sup>14</sup>

Northern Inyo Hospital’s commitment to translate LEP Policy into Practice has included the translation, into applicable languages, of its vital documents for patient care. Availability of written materials in a language the patient understands it is not only required by law but also ethically responsible, and reduces the hospital’s liability risk.

Written translations are as simple and complicated as verbal interpreting. No two languages are the same. Lets focus in English and Spanish. The English language has three to four times more words than Spanish; therefore it takes more words to say something in Spanish. English has words or concepts that do not exist in Spanish; those have to be explained when interpreting or translating.

Interpreting is the verbal rendition of a message’s meaning from one language to another. Interpreting can’t be done by “translating” word by word; each language has a different syntax, grammar, and morphology. Language is part of a culture, and of a person or group of people cultural background.

If interpreting and translating is explaining the meaning of a word, phrase or text, then each one can have many different versions; depending on who has done it, and on the person’s cultural background, including nationality, education, etc.

A translation not only needs to meet professional standards, but also needs to be culturally adapted to ensure understanding from target audience. Before I came to Northern Inyo Hospital, many translations were done improperly. Those translations are in use, I edit them as soon as I find them, there are many; it is a

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<sup>14</sup> California Health and Safety Code, Section 1259. DHHS Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons.

challenge but, it is my goal to properly translate all NIH's Vital Documents. Currently, Language Services is working with Medical Records and the Forms Committee to account for all patient care related forms that go into a patient's medical record, to make those available on-line, and to have a comprehensive list of forms and documents that need to be translated.

During 2008 Language Services translated 97 documents. Highlights include the opportunity to work with The Society for Healthcare Epidemiology of America (SHEA) and translate their "Patient Guidelines on Healthcare-Associated Infections." SHEA gave credit to NIH for translating the documents on their website, <http://www.shea-online.org/about/patientguides.cfm>.

Some one unknown translated Northern Inyo Hospital's Mission Statement into Spanish some time ago. It is obvious and needless to say that such translation was very poorly done. Due to the Mission Statement's nature and value, I took the following approach to ensure the quality of its translation:

1. I translated the Statement into Spanish,
2. I submitted the original in English, and my translation to Language Line Services, requesting a certificate or accuracy of my translation,
3. Language Line only made 12 changes to my translation, and gave me a certificate of accuracy for "their" translation,
4. I carefully review all changes made, and agree to only three of them.

Therefore, I would like to submit to your consideration my translation, with Language Line's Certificate of Accuracy to its adoption as the official Mission Statement's translation into Spanish, (action item).

Attached you will find:

1. Mission Statement in English,
2. Statement's current translation,

3. José's first translation,
4. Language Line's translation,
5. Language Line's Certificate of Accuracy, and
6. José's Final translation, for adoption as official translation.

**Breaking down the language barrier** it is not an act of tolerance; it is placing patient's rights before the provider's responsibilities.

**Translating Limited English Proficiency Policy into Practice**, means taking the necessary measures to provide timely competent language assistance to people experiencing unequal access to health care services. It means to practice cultural competency, by respecting and valuing cultural differences.

Northern Inyo Hospital is committed to provide the necessary tools and measures to avoid national origin discrimination based on an individual's inability to speak, read, write, or understand English.

Sincerely,

José García

Language Services Manager

Northern Inyo Hospital

May, 20, 2009

**Jose's final translation**

## **Northern Inyo Hospital** **Misión**

*El propósito de Northern Inyo Hospital es:  
proporcionar Atención Médica de Calidad  
manteniendo un ambiente que sea  
positivo y humanitario  
para los Pacientes, el Personal y la Comunidad  
a quienes servimos, con responsabilidad financiera.*

### **Valoramos:**

*Excelencia en la atención al paciente,  
a través de nuestros esfuerzos por mantener actualizada  
la educación del personal y de los miembros de la comunidad.*

*Un ambiente de recuperación,  
manteniendo una atmósfera altruista,  
confianza, dignidad y servicio.*

*Estabilidad fiscal,  
manteniendo en equilibrio nuestras obligaciones  
con el paciente y el personal.*

*Conduciendo las actividades del hospital  
en una atmósfera de  
equidad y comunicación abierta.*

*Nuestra ubicación rural,  
proporcionando oportunidades para servicios  
que de otra forma no existirían.*





Language Line  
services

## CERTIFICATION

Language Line Services Document Translation Department, hereby declares that professional translators experienced in the language and field of expertise required were used in the translation of your submitted documents. We believe the translations to be true and accurate to the best of our knowledge.

Document Name: JOB33473-Spanish

1 Document:  
NIH Mission Statement\_Q09043185

Translation Date: April 22, 2009

**Sara Gramcko**  
Account Executive  
Document Translation Department  
Phone. (888) 763-3364  
Fax. (800) 648-0170  
Email. [translation@languageline.com](mailto:translation@languageline.com)

## ORIGINAL

### Northern Inyo Hospital *Mission Statement*

*The purpose of Northern Inyo Hospital is:  
to provide Quality Healthcare  
by maintaining an environment that is  
positive and caring  
for the Patients, Staff and Community  
we serve, in a financially responsible manner.*

#### ***We Value:***

*Excellence in patient care,  
provided through our efforts to maintain current  
education for staff and community members.*

*A healing environment,  
provided by maintaining a caring atmosphere,  
trust, dignity and service.*

*Fiscal stability,  
balanced with our obligations  
to the patients and staff.*

*Conducting the activities of the hospital  
in an atmosphere of  
fairness and open communication.*

*Our unique rural location,  
providing opportunities for services  
that otherwise might not exist.*



## LANGUAGE LINE TRANSLATION

### Northern Inyo Hospital *Declaración de la Misión*

*El propósito de Northern Inyo Hospital es:  
proporcionar Atención Médica de Calidad  
manteniendo un ambiente que sea  
positivo y humanitario  
para los Pacientes, el Personal y la Comunidad  
a la que servimos, con responsabilidad financiera.*

#### ***Valoramos:***

*La excelencia en la atención al paciente,  
a través de nuestros esfuerzos por mantener una educación  
actualizada para el personal y los miembros de la comunidad.*

*Un ambiente de sanación,  
manteniendo una atmósfera humanitaria,  
confianza, dignidad y servicio.*

*Estabilidad fiscal,  
en equilibrio con nuestras obligaciones  
con los pacientes y el personal.*

*Llevar a cabo las actividades del hospital  
en una atmósfera de  
equidad y comunicación abierta.*

*Nuestra extraordinaria ubicación rural,  
proporcionando oportunidades para servicios  
que de otro modo no existirían.*



## ORIGINAL

### Northern Inyo Hospital *Mission Statement*

*The purpose of Northern Inyo Hospital is:  
to provide Quality Healthcare  
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trust, dignity and service.*

*Fiscal stability,  
balanced with our obligations  
to the patients and staff.*

*Conducting the activities of the hospital  
in an atmosphere of  
fairness and open communication.*

*Our unique rural location,  
providing opportunities for services  
that otherwise might not exist.*



## JOSÉ'S FIRST TRANSLATION

### Northern Inyo Hospital *Misión*

*El propósito de Northern Inyo Hospital es:  
proporcionar Atención Médica de Calidad  
al mantener un ambiente  
positivo y humanitario  
para los Pacientes, el Personal y la Comunidad  
a quienes servimos, con responsabilidad financiera.*

#### *Valoramos:*

*Excelencia en la atención al paciente,  
al esforzarnos en mantener actualizada  
la educación del personal y de los miembros de la comunidad.*

*Un ambiente de recuperación,  
al mantener una atmósfera altruista,  
de confianza, dignidad y servicio.*

*Estabilidad fiscal,  
al mantener en equilibrio nuestras obligaciones  
con los pacientes y el personal.*

*Conduciendo las actividades del hospital  
en una atmósfera de  
equidad y comunicación abierta.*

*Nuestra extraordinaria ubicación rural,  
proporcionando oportunidades para servicios  
que de otra forma no existirían.*



# *Declaración de la Misión*

*El propósito del Inyo Hospital Norteño es  
para promover el cuidado del salud  
mientras manteniendo un ambiente que está  
positivo y cuidado  
para los pacientes, los empleados y la comunidad.*

## *Valemos*

*Cuidado excelente del paciente,  
provedido a través de nuestros esfuerzos para mantener una educación corriente  
para nuestros empleos y los miembros de la comunidad.*

## *Un Ambiente Curativo*

*provedido por una atmósfera cuidando, con confianza, dignidad y servicio.  
Estabilidad fiscal,  
un estado con equilibrio con nuestras obligaciones a los pacientes y los empleos.  
Conduciendo las actividades del hospital en una atmósfera con  
justicia y comunicación abierta.  
Nuestro sitio, único y rural,  
provediendo oportunidades para servicios de otro modo  
no existirían.*



# *Current translation*



## ***Northern Inyo Hospital Mission Statement***

*The purpose of Northern Inyo Hospital is:  
to provide Quality Healthcare  
by maintaining an environment that is  
positive and caring  
for the Patients, Staff and Community  
we serve, in a financially responsible manner.*

### ***We Value:***

*Excellence in patient care,  
provided through our efforts to maintain current  
education for staff and community members.*

*A healing environment,  
provided by maintaining a caring atmosphere,  
trust, dignity and service.*

*Fiscal stability,  
balanced with our obligations  
to the patients and staff.*

*Conducting the activities of the hospital  
in an atmosphere of  
fairness and open communication.*

*Our unique rural location,  
providing opportunities for services  
that otherwise might not exist.*



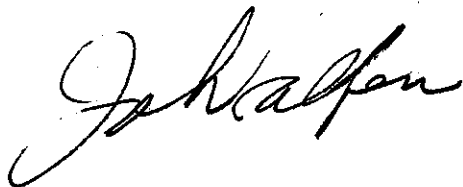
**THIS SHEET  
INTENTIONALLY  
LEFT BLANK**

**Budget year  
2010  
Narrative**

I have always told anyone who would care to listen that businesses cannot "budget" for train wrecks. You can make disaster plans for how to respond operationally, but budgeting for these events is by and large a waste of time.

If anyone was going to predict a train wreck for California rural hospitals I think it would be this year. Federal tax revenue collections are running at 45% of last years rate and 37% of projected. The City of Los Angeles is running at a \$530,000,000 deficit (and growing) while the State of California is \$35,000,000,000 in the red, just for operations, no capital. One house in 56 in California has gone through foreclosure and is vacant. Social Security will now go bankrupt in the year 2017 instead of the 2037 year projection only two years ago.

But I cannot budget for what this red ink foretells. What you have before you for approval is the same cookie-cutter we have been using for the last seven years that has served us reasonably well. When the negatives start showing up we will just have to adapt as best we can. Otherwise, 2010 is expected to look a lot like 2009.

A handwritten signature in cursive script, appearing to read "J. Halpern".

# **BUDGET YEAR 2010 ASSUMPTIONS**

1. Across the Board rate increase of 7.5%, effective 6-1-2009
2. COLA of 2.0% in July
3. COLA of 1% in January
4. Capital Expenditure Budget of \$ 507,431.11 (one priority)
5. Addition of Steps Six and Seven to all Pay Grades, which currently stop at Five.
6. Normal growth in contractals and discounts
7. Normal growth of Employee Benefits
8. Inflation for supplies and other consumables of 10.0%
9. No changes in any "Other Income Categories".
10. No Changes in Non-Operating Expense (mostly rentals and practice management agreements) from current experience.
11. Depreciation will increase consistent with building project.
12. No significant increase in Accounts Receivable or Accounts Payable

NORTHERN INYO HOSPITAL  
Statement of Operations  
As of February 28, 2009

	FYE 08	2/28/2009 FYE 2009 YTD Actual	2009 Projected	2010 Budget Working
Unrestricted revenues, gains and other support:				
In-patient service revenue:				
Routine	6,967,356	4,898,775	7,348,162	7,899,275
Ancillary	23,020,561	15,693,865	23,540,797	25,306,357
<b>Total in-patient service revenue</b>	<b>29,987,917</b>	<b>20,592,640</b>	<b>30,888,960</b>	<b>33,205,632</b>
Out-patient service revenue	46,235,644	32,705,479	49,058,219	52,737,585
<b>Gross patient service revenue</b>	<b>76,223,561</b>	<b>53,298,119</b>	<b>79,947,179</b>	<b>85,943,217</b>
Less deductions from patient service revenue:				
Patient service revenue adjustments	2,034,895	1,735,427	2,603,141	2,798,376
Contractual adjustments	28,568,850	20,582,553	30,873,830	32,263,152
Prior Period Adjustments		(1,643,677)	(1,643,677)	(500,000)
<b>Total deductions from patient service revenue</b>	<b>30,603,745</b>	<b>20,674,303</b>	<b>31,833,293</b>	<b>34,561,528</b>
<b>Net patient service revenue</b>	<b>45,619,816</b>	<b>32,623,816</b>	<b>48,113,886</b>	<b>51,381,689</b>
Other revenue	331,983	298,544	447,815	481,401
Transfers from Restricted Funds for Other				
Operating Expenses	786,490	524,328	786,492	775,990
<b>Total Other revenue</b>	<b>1,118,473</b>	<b>822,872</b>	<b>1,234,307</b>	<b>1,257,391</b>
<b>Total revenue, gains and other support</b>	<b>46,738,289</b>	<b>33,446,688</b>	<b>49,348,193</b>	<b>52,639,080</b>
Expenses:				
Salaries and wages	15,595,269	11,068,781	16,603,172	18,046,803
Employee benefits	8,966,567	6,806,128	10,209,192	10,923,835
Professional fees	3,405,634	2,729,950	4,094,925	4,070,737
Supplies	5,315,324	3,852,822	5,779,232	6,085,109
Purchased services	2,100,007	1,620,382	2,430,573	2,679,057
Depreciation	2,177,176	1,729,170	2,593,754	2,764,778
Interest	494,959	876,821	1,315,232	1,267,897
Bad debts	1,711,338	1,082,842	1,624,263	1,746,082
Other	2,428,817	1,613,149	2,419,724	2,453,387
<b>Total expenses</b>	<b>42,195,089</b>	<b>31,380,045</b>	<b>47,070,067</b>	<b>50,037,685</b>
<b>Operating income (loss)</b>	<b>4,543,200</b>	<b>2,066,643</b>	<b>2,278,126</b>	<b>2,601,395</b>
Other income:				
District tax receipts	525,995	381,200	571,800	571,800
Interest	986,310	696,064	1,044,096	520,060
Other	208,424	284,468	426,702	941,681
Grants and Other Non-Restricted Contributions	109,189	9,105	13,658	14,682
Partnership Investment Income	(34,519)	-	-	-
<b>Total other income, net</b>	<b>1,795,399</b>	<b>1,370,836</b>	<b>2,056,255</b>	<b>2,048,223</b>
Non-Operating Expense				
Medical Office Expense	124,767	115,233	172,849	510,253
Urology Office	113,673	67,613	101,420	169,286
Pediatric Office	-	52,343	78,514	506,504
OB-GYN Office	-	15,365	23,047	155,817
<b>Total Non-Operating Expense</b>	<b>238,439</b>	<b>250,553</b>	<b>375,830</b>	<b>1,341,860</b>
<b>Excess (deficiency) of revenues over expenses</b>	<b>6,100,160</b>	<b>3,186,926</b>	<b>3,958,551</b>	<b>3,307,758</b>

Northern Inyo Hospital - 2009-10 Capital Expenditure Requests

ID	Department	Description	Est Cost	Life	Req	JDH	note
				Yrs	prior	prior	
				of			
		1-Budget Year					
		2-Budget Year; Optional					
		3-Future Purchase					
		5-Budget Year; Building Proj Purchase from Operating					
6170-01	Medical Surgical Unit	Pediatric Supply Cart	\$ 1,727.50	10	1	1	
6380-01	Perinatal	3-Perinatal Glider Chairs with Hospital Grade Cushions	\$ 2,337.00	10	1	1	
7010-01	Rural Health Clinic	Automated External Defibrillator	\$ 2,500.00	5	1	1	
7420-02	Surgery	AORN Perioperative Video Library for Education	\$ 3,000.00	5	1	1	
7420-04	Surgery	CO2 Module for C Surgery	\$ 4,000.00	8	1	1	
7420-05	Surgery	Computer workstation mobile carts (3 each)	\$ 6,000.00	5	1	1	
7420-06	Surgery	High powered drill for orthopedic procedures	\$ 22,000.00	5	2	1	
7420-07	Surgery	Fluid Warmer for Irrigation	\$ 6,000.00	5	1	1	
7420-08	Surgery	Radical 7 Oximeter with set SpO2	\$ 13,000.00	10	1	1	
7420-09	Surgery	Stryker Small Pin Driver Handpiece	\$ 7,000.00	5	1	1	
7420-12	Surgery	Miscellaneous Instruments for Single Port Laparoscopy	\$ 15,000.00	3	1	1	
7420-13	Surgery	Triad Generator for laparoscopic procedures	\$ 30,000.00	5	1	1	
7509-02	EKG	Automatic Blood Pressure (Physician Request For Adenosine Studies)	\$ 7,000.00	6	1	1	
7720-02	Respiratory Care	Aluminum Supply Cart	\$ 1,800.00	10	1	1	
8320-01	Dietary	Electric Range Vulcan Hart Model E36L 208 Volt 3 Phase	\$ 4,290.82	10	1	1	
8320-02	Dietary	Heat on demand-Heat pellet bass for Patient food trays	\$ 4,185.79	5	1	1	
8390-01	Pharmacy	IV Pumps Hospital Pumps	\$ 5,590.00	10	1	1	
8460-01	Maintenance	Reseal the roofs on the PI and Community Relations Buildings	\$ 2,500.00	10	1	1	
8460-02	Maintenance	Security Cameras	\$ 15,000.00	5	1	1	
8460-03	Maintenance	New Roof for MRI Building	\$ 23,000.00	10	1	1	
8480-01	Information Technology	New Storage Area Network	\$ 75,000.00	5	1	1	
8480-03	Information Technology	Network Switches for new storage solution	\$ 20,000.00	5	1	1	
8480-04	Information Technology	Quantity 6 48-port switches; quantity 2 24-port switches	\$ 71,500.00	5	1	1	
8480-05	Information Technology	New Air Conditioning Unit for Server Room	\$ 100,000.00	10	1	1	
8480-06	Information Technology	Tape and Disk Backup	\$ 40,000.00	5	1	1	
8480-10	Information Technology	Voice Mail System	\$ 25,000.00	10	1	1	
		<b>TOTAL PRIORITY 1</b>	<b>\$ 507,431.11</b>				
6380-02	Perinatal	4 Hillrom Affinity Birthday Beds	\$ 20,000.00	15	2	2	
6380-03	Perinatal	Phillips Fetal Monitoring System	\$ 100,000.00	7	2	2	
6530-01	Nursery	Newborn Isolette	\$ 13,000.00	10	2	2	
7391-01	Chemotherapy	3 wall mounted TB w/DVD players	\$ 3,225.00	5	1	2	
7420-01	Surgery	Anesthesia Monitors for Surgical Suites	\$ 60,000.00	7	2	2	
7420-03	Surgery	Arthroscopy Instrumentation (additional set for backup)	\$ 20,000.00	3	2	2	
7420-10	Surgery	Portable Ultrasonic Cleaner for Surgery/CS	\$ 20,000.00	10	2	2	
7420-11	Surgery	Compartmental Pressure Indwelling Monitoring System	\$ 7,000.00	5	2	2	

**Northern Inyo Hospital - 2009-10 Capital Expenditure Requests**

ID	Department	Description	Est Cost	Life	Req prior	JDH prior	note
7427-02	PACU	2 STRYKER PACU GURNEYS	\$ 12,000.00	7	2	2	2
7503-02	Laboratory	Ultracentrifuge	\$ 13,766.00	7	1	2	2
7590-01	EKG	Computer for Physicians	\$ 2,500.00	5	1	2	2
7720-01	Respiratory Care	Vision BIPAP	\$ 12,000.00	8	2	2	2
8410-01	Grounds	Pavement at RHC (Asphalt)	\$ 62,265.00	8	2	2	2
8440-01	Environmental Services	Floor Polisher	\$ 4,000.00	5	2	2	2
8480-07	Information Technology	Data Backup Software upgrade	\$ 90,000.00	5	2	2	2
8480-08	Information Technology	4 Servers for hosting Citrix Applications	\$ 26,000.00	5	5	2	2
8700-01	Medical Records	3M Audit Expert System	\$ 41,161.00	5	1	2	2
		<b>TOTAL PRIORITY 2</b>	<b>\$ 506,917.00</b>				
7078-01	Surgey Clinic	Logid P5 pre-owned Ultrasound Machine	\$ 32,065.00	5	3	3	3
7503-01	Laboratory	GenXpert IV, 4 Testing Site System w/6 color Modules, Desktop Computer & Software	\$ 77,104.00	5	3	3	3
8390-02	Pharmacy	Infusion Pumps "Smart Pumps"	\$ 257,103.00	5	3	3	3
8460-04	Maintenance	Autoclave Compactor (only if replacement is required by State)	\$ 450,000.00	10	3	3	3
8480-02	Information Technology	2 Servers	\$ 10,000.00	5	3	3	3
8480-09	Information Technology	Large Flat Screen Monitor	\$ 2,500.00	5	3	3	3
		<b>TOTAL PRIORITY 3</b>	<b>\$ 828,772.00</b>				
		<b>GRAND TOTAL OF CAPITAL REQUESTS</b>	<b>\$ 1,843,120.11</b>				

**CASH PROVIDED BY**

OPERATIONS	\$3,307,758
NON-CASH ITEMS	\$2,593,754
INCREASE IN AP	\$110,000

**TOTAL CASH AVAILABLE** \$6,011,512

**CASH USED BY**

PRINCIPAL PAYMENTS	\$1,115,957
INCREASE IN AR	\$235,971
2010 CAPITAL BUDGET	\$507,431

**TOTAL CASH USES** \$1,859,359

AVAILABLE FOR PHASE II \$4,152,153



Annual expenditure change in the Consumer Price Index for All Urban Consumers (CPI-U),  
selected expenditure categories, 1999-2008

Expenditure category	Dec. 2008 Relative Importance	Percent change for 12 months ended December--										
		1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	
All items	100.000	2.7	3.4	1.6	2.4	1.9	3.3	3.4	2.5	4.1	0.1	
Food	14.629	1.9	2.8	2.8	1.5	3.6	2.7	2.3	2.1	4.9	5.9	
Food at home	8.156	1.7	2.9	2.6	0.8	4.5	2.4	1.7	1.4	5.6	6.6	
Food away from home	6.474	2.3	2.4	3.0	2.3	2.3	3.0	3.2	3.2	4.0	5.0	
Energy	7.624	13.4	14.2	-13.0	10.7	6.9	16.6	17.1	2.9	17.4	-21.3	
Energy commodities	3.465	29.5	15.7	-24.5	23.7	6.9	26.7	16.7	6.1	29.4	-40.5	
Motor fuel	3.164	30.2	13.9	-24.8	24.6	6.8	26.1	16.2	6.4	29.5	-42.2	
Gasoline	2.964	30.1	13.9	-24.9	24.8	6.8	26.1	16.1	6.4	29.6	-43.1	
Fuel oil	0.188	30.9	40.5	-26.7	14.7	7.8	39.5	27.2	2.3	32.5	-21.0	
Energy services (electricity and natural gas)	4.159	1.2	12.7	-1.5	0.4	6.9	6.8	17.6	-0.6	3.4	7.7	
Electricity	3.002	0.7	2.6	6.1	-1.9	2.6	2.1	10.7	7.5	5.2	8.6	
Natural gas	1.157	2.1	36.7	-15.1	6.7	17.4	16.4	30.2	-14.2	-0.4	5.5	
All items less food and energy	77.746	1.9	2.6	2.7	1.9	1.1	2.2	2.2	2.6	2.4	1.8	
Commodities less food and energy	21.461	0.2	0.6	-0.3	-1.5	-2.5	0.6	0.2	-0.1	0.1	-0.6	
Apparel	3.691	-0.5	-1.8	-3.2	-1.8	-2.1	-0.2	-1.1	0.9	-0.3	-1.0	
Televisions	0.135	-7.3	-10.7	-10.8	-10.6	-14.3	-12.3	-14.4	-22.6	-18.3	-19.4	
Medical care commodities	1.625	4.0	2.8	4.4	3.1	2.1	2.2	3.7	1.8	2.7	1.6	
Prescription drugs	1.253	6.1	3.6	6.0	4.5	2.5	3.5	4.4	1.9	3.3	1.5	
New vehicles	4.480	-0.3	0.0	-0.1	-2.0	-1.8	0.6	-0.4	-0.9	-0.3	-3.2	
Used cars and trucks	1.628	1.2	3.4	-1.9	-5.5	-11.8	4.8	1.4	-2.2	0.5	-8.1	
Personal computers and peripheral equipment	0.214	-26.5	-22.8	-30.6	-22.0	-17.9	-14.0	-15.8	-11.7	-13.6	-11.5	
Alcoholic beverages	1.127	2.8	2.7	2.5	2.2	2.1	2.8	1.3	2.4	3.8	4.4	
Tobacco and smoking products	0.776	11.4	7.5	8.9	9.5	-0.4	3.1	5.8	2.8	7.5	6.3	
Services less energy services	56.285	2.7	3.4	4.0	3.4	2.6	2.8	2.9	3.7	3.3	2.7	
Shelter	33.200	2.5	3.4	4.2	3.1	2.2	2.7	2.6	4.2	3.0	1.9	
Rent of primary residence	5.957	3.1	4.0	4.7	3.1	2.7	2.9	3.1	4.3	4.0	3.4	
Owners' equivalent rent of primary residence	24.433	2.4	3.4	4.5	3.3	2.0	2.3	2.5	3.9	2.8	2.1	
Hotels and motels	2.323	1.7	2.7	-0.8	0.0	3.1	5.0	3.3	3.9	4.5	-3.8	
Medical care services	4.765	3.6	4.6	4.8	5.6	4.2	4.9	4.5	4.1	5.9	3.0	
College tuition	1.452	4.0	4.5	6.2	7.0	9.8	8.6	6.6	7.0	6.1	5.8	
Airline fares	0.731	10.9	5.9	-3.9	-2.4	-0.1	-1.5	6.4	-1.0	10.6	1.4	
Other index aggregations:												
Commodities	39.556	2.7	2.7	-1.4	1.2	0.5	3.6	2.7	1.3	5.2	-4.1	
Services	60.444	2.6	3.9	3.7	3.2	2.8	3.1	3.8	3.4	3.3	3.0	

Note: Data are not seasonally adjusted. Relative importance data are based on 2005-2006 Consumer Expenditure Survey data, updated by price change.

**Table 2. Consumer Price Index for All Urban Consumers (CPI-U): Seasonally adjusted U.S. city average, by expenditure category and commodity and service group**

(1982-84=100, unless otherwise noted)

Item and group	Seasonally adjusted indexes				Seasonally adjusted annual rate percent change for						
					3 months ended—				6 months ended—		
	Dec. 2008	Jan. 2009	Feb. 2009	Mar. 2009	June 2008	Sep. 2008	Dec. 2008	Mar. 2009	Sep. 2008	Mar. 2009	
<b>Expenditure category</b>											
All items .....	211.577	212.174	213.007	212.714	6.5	3.1	-12.4	2.2	4.7	-5.4	
Food and beverages .....	219.181	219.309	219.076	218.792	7.4	8.2	2.7	-.7	7.8	1.0	
Food .....	219.082	219.193	218.970	218.651	7.8	8.5	2.5	-.8	8.1	.8	
Food at home .....	219.179	218.879	217.968	217.202	10.2	10.4	.8	-3.6	10.3	-1.4	
Cereals and bakery products .....	255.655	255.719	254.347	253.863	14.2	12.0	6.9	-2.8	13.1	2.0	
Meats, poultry, fish, and eggs .....	208.726	208.536	208.389	206.465	7.4	11.0	.0	-4.3	9.2	-2.2	
Dairy and related products <sup>1</sup> .....	210.838	209.632	204.537	199.687	5.8	8.7	-5.0	-19.5	7.3	-12.5	
Fruits and vegetables .....	277.783	274.270	275.374	275.843	19.1	10.5	-14.3	-2.8	14.7	-8.7	
Nonalcoholic beverages and beverage materials .....	164.038	163.804	163.173	164.813	3.7	7.3	6.3	1.9	5.5	4.1	
Other food at home .....	191.809	192.914	192.419	192.431	11.0	11.0	8.4	1.3	11.0	4.8	
Sugar and sweets .....	194.164	197.086	196.990	197.299	6.8	10.2	9.2	6.6	8.5	7.9	
Fats and oils .....	209.848	205.904	203.729	204.029	34.3	22.4	7.2	-10.6	28.2	-2.1	
Other foods .....	205.566	207.193	206.838	206.741	8.6	9.4	8.5	2.3	9.0	5.3	
Other miscellaneous foods <sup>1 2</sup> .....	123.791	124.012	122.580	122.402	3.9	9.4	9.0	-4.4	6.6	2.1	
Food away from home <sup>1</sup> .....	220.684	221.319	221.968	222.216	4.7	6.1	4.6	2.8	5.4	3.7	
Other food away from home <sup>1 2</sup> .....	154.062	153.402	154.726	154.414	3.6	5.9	5.4	.9	4.7	3.1	
Alcoholic beverages .....	219.154	219.504	219.141	219.315	3.5	5.2	5.4	.3	4.3	2.8	
Housing .....	217.592	217.646	217.621	217.335	4.8	1.9	-.4	-.5	3.3	-.4	
Shelter .....	248.519	248.938	248.881	248.899	2.3	2.0	1.0	.6	2.2	.8	
Rent of primary residence <sup>3</sup> .....	246.928	247.744	248.087	248.490	3.7	3.6	3.0	2.6	3.7	2.8	
Lodging away from home <sup>2</sup> .....	140.600	139.122	136.561	133.328	-.4	-.5	-9.9	-19.1	-.5	-14.6	
Owners' equivalent rent of primary residence <sup>3 4</sup> .....	254.683	255.349	255.687	256.257	2.3	1.9	1.8	2.5	2.1	2.2	
Tenants' and household insurance <sup>1 2</sup> .....	120.019	120.402	120.683	120.737	4.8	2.9	.3	2.4	3.8	1.3	
Fuels and utilities .....	219.092	217.515	217.260	214.254	25.1	-1.2	-9.0	-8.5	11.2	-8.8	
Household energy .....	198.564	198.727	196.415	192.927	29.6	-3.1	-11.9	-10.9	12.1	-11.4	
Fuel oil and other fuels .....	263.242	256.210	251.478	232.191	60.7	-29.6	-65.9	-39.5	6.4	-54.6	
Gas (piped) and electricity <sup>3</sup> .....	203.746	202.120	202.043	199.289	26.8	.0	-4.7	-8.5	12.6	-6.6	
Water and sewer and trash collection services <sup>2</sup> .....	156.646	157.027	157.141	157.817	5.5	8.6	6.4	3.0	7.0	4.7	
Household furnishings and operations .....	128.910	128.759	129.008	129.436	.8	4.5	.2	1.6	2.6	.9	
Household operations <sup>1 2</sup> .....	150.689	150.438	150.156	150.914	8.5	6.0	1.3	.6	7.2	1.0	
Apparel .....	118.221	118.523	120.039	119.744	1.0	4.3	-4.6	5.3	2.6	.2	
Men's and boys' apparel .....	111.478	113.210	116.328	116.007	-.5	-1.4	-4.5	17.3	-.9	5.8	
Women's and girls' apparel .....	106.214	106.470	107.374	106.592	.2	10.6	-9.6	1.4	5.3	-4.2	
Infants' and toddlers' apparel .....	113.474	114.014	112.796	113.510	-2.5	-.9	-.2	.1	-.8	.0	
Footwear .....	124.534	124.325	125.209	125.517	4.1	-1.9	2.2	3.2	1.0	2.7	
Transportation .....	167.353	169.489	172.759	170.903	14.8	1.4	-55.5	8.8	7.9	-30.4	
Private transportation .....	161.950	164.414	168.067	166.252	14.1	1.3	-57.3	11.1	7.5	-31.1	
New and used motor vehicles <sup>2</sup> .....	91.321	91.534	91.997	92.016	-1.9	-4.8	-5.6	3.1	-3.4	-1.3	
New vehicles .....	131.766	132.132	133.199	134.020	-.5	-4.6	-4.8	7.0	-2.6	1.0	
Used cars and trucks .....	126.872	125.893	123.757	121.704	-7.0	-10.7	-13.8	-15.3	-8.9	-14.6	
Motor fuel .....	160.675	169.176	182.030	173.947	42.4	5.5	-93.5	37.4	22.6	-70.2	
Gasoline (all types) .....	157.460	166.839	180.685	173.498	42.4	6.5	-93.9	47.4	23.2	-70.1	
Motor vehicle parts and equipment <sup>1</sup> .....	133.077	133.414	134.108	134.484	4.8	10.5	6.3	4.3	7.6	5.3	
Motor vehicle maintenance and repair <sup>1</sup> .....	239.356	241.076	241.689	242.118	6.0	7.0	3.8	4.7	6.5	4.3	
Public transportation .....	243.444	239.071	234.648	232.294	24.6	3.6	-24.0	-17.1	13.6	-20.6	
Medical care .....	368.302	369.914	371.175	371.902	2.2	2.3	2.7	4.0	2.3	3.3	
Medical care commodities .....	298.814	299.887	301.710	302.464	-2.1	.6	4.2	5.0	-.7	4.6	
Medical care services .....	389.723	391.533	392.512	393.210	3.7	2.9	2.2	3.6	3.3	2.9	
Professional services .....	315.052	316.115	316.299	316.416	4.4	2.8	2.4	1.7	3.6	2.1	
Hospital and related services <sup>3</sup> .....	545.921	550.035	554.315	557.588	5.5	5.8	4.2	8.8	5.6	6.5	

See footnotes at end of table.

# **BUDGET YEAR 2010 Resolution 1**

The Northern Inyo County Local Hospital District approves the FY 2010 operating budget of \$85,943,217 and a capital budget of 507,431.11 which provides for:

- An Across the Board rate increase of 7.5%, effective 6-1-2009
- Normal growth in contractals, discounts, bad debt, and charity.
- No change in employee benefits
- No growth in FTE's
- Inflation for supplies and other consumables of 10.0%
- An increase in Depreciation consistent with the building project

## **Resolution 2**

The Northern Inyo County Local Hospital District additionally:

- Approves a 2% COLA effective the first pay period in July for all employees.
- Provides for an additional COLA of 1% for all employees to be approved at a later date but not before 1-1-2010.
- Approves adding steps six and seven to all pay grades.