



525 Veterans Blvd.  
Redwood City, CA 94063

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**A G E N D A**  
**SEQUOIA HEALTHCARE DISTRICT**  
**BOARD OF DIRECTORS ANNUAL ORGANIZATIONAL MEETING**  
**4:30, Wednesday, February 4, 2015**  
**Conference Room**  
**525 Veterans Boulevard, Redwood City, CA 94063**

1. Call To Order And Roll Call
2. Public Comment On Non-Agenda Items\*
- ACTION 3. Consent Calendar - President Shefren
  - a. Approve December 6, 2014 Regular Meeting Minutes
  - b. Accept November And December 2014 Financial Statements
4. CEO/Staff Reports
  - a. CEO Report & State Of The District - Mr. Michelson
  - b. Healthy Schools - Ms. Kurtzman
  - c. PE+ - Ms. Gabet
  - d. HeartSafe - Mr. Nielsen
- ACTION 5. New Business
  - a. Grant Request For \$1.2 Million For 2015-16 From Children's Health Initiative/Healthy Kids - Ms. Srija Srinivasan
  - b. Community Grants Mid-Year Performance Report - Ms. Kurtzman
  - c. Transfer Agreement Ad Hoc Committee Report - President Shefren
  - ACTION d. Pursuant To Policies 4.5 And 6.6 Nominate And Appoint Slate Of Board Officers For Two-Year Terms - President Shefren
  - ACTION e. Director Requests For Future Agenda Items - Board Policy 8.3 - President Shefren
- ACTION 6. With Respect To Each Item Of Business To Be Discussed In Closed Session Pursuant To Government Code Section 54956.8:

CONFERENCE WITH REAL PROPERTY NEGOTIATOR

Property: 525 Veterans Avenue, Redwood City, California  
Agency Negotiator: Lee Michelson  
Negotiating Party: Barry Swenson Builder  
Under negotiation: Price and terms of payment  
Convene to Closed Session
- ACTION 7. Reconvene To Open Session: Announce Any Reportable Actions Taken In Closed Session

Continued...

<b>MINUTES OF REGULAR MEETING BOARD OF DIRECTORS SEQUOIA HEALTHCARE DISTRICT December 3, 2014 Conference Room, 525 Veterans Boulevard, Redwood City, CA 94063</b>		
<b><u>Directors Present</u></b> Director Griffin Director Hickey Director Kane Director Shefren	<b><u>Directors Excused</u></b> Director Faro	<b><u>Also Present</u></b> Mr. Michelson, CEO Mr. Hudak, Legal Counsel Ms. Johnson, Recorder
<b><u>1. Call to Order</u></b>  By: President Shefren Time: 4:30 pm		
<b><u>2. Public Comment/Non-Agenda Items</u></b>  President Shefren asked if there was any public comment on non-agenda items. Barbara McCarthy of the Veterans Memorial Senior Center presented a photo display of participants in the Adaptive Physical Education Program. She thanked the Board for their continued support of VMSC.  Mr. Michelson introduced Ken Cohen, the new Executive Director of ACHD.		
<b><u>3.a. - 3.b. Consent Calendar</u></b>  Motion: To approve the Consent Calendar By: Director Kane Seconded by: Director Griffin Vote: 4-0-1 Motion Passed		
<b><u>4. CEO/Staff Reports</u></b>  Mr. Michelson reported that the Living Healthy workshops are going well. He has been tracking participants and with the exception of the Foster City class, participants are 100% District residents. He is looking into ways to encourage more District residents in Foster City to participate.  Mr. Michelson attended the American Public Health Association in New Orleans and his report is included in the packet.  Healthy Schools Initiative: Ms. Kurtzman reported that a new online grants management portal is being established which will streamline the grants programs from the LOI process to final reporting.  Ms. Kurtzman reported she also attended the APHA conference and found many interesting sessions.  PE+ Program: The Drink Water First campaign, implemented to encourage children to drink water rather a sugary drink was discussed. Ms. Gabet has started transitioning to overseeing the Healthy Schools Initiative grants.  HeartSafe: Mr. Nielsen reported that the classroom is completed and the scheduling of CPR classes will begin in January. He is working with Gwen to place a "Learn CPR" button on the District's website which will link directly to a registration form. Several classes will be open to the general public.		

**5.a Accept The District's Annual Audit For The Period Ending June 30, 2014**

President Shefren asked if there was public comment on agenda item 5.a. There was none.

Mr. Ahmad Gharaibeh of Vavrinek, Trine and Day reported that the District received an unqualified opinion which is the highest level of assurance and the District is in a very solid financial position. The internal control report noted that no compliance issues and no deficiencies were found.

**Motion:** To accept the June 30, 2014 annual audit.

**By:** Director Shefren

**Seconded by:** Director Griffin

**Vote:** 4-0-1

**Motion Passed**

**5.b. Accept Certified Election Results From San Mateo County Registrar's Office and Recognize Dr. Shefren, Mr. Hickey and Mr. Faro as Newly Elected Directors for the Term 12/5/2014-12/7/2018**

President Shefren asked if there was public comment on agenda item 5.b. There was none.

**Motion:** To accept election results from San Mateo County Registrar's Office.

**By:** Director Kane

**Seconded by:** Director Griffin

**Vote:** 4-0-1

**Motion Passed**

**5.c. Consider Resolution 14-4 Amending Sequoia Healthcare District Employees Pension Plan**

President Shefren asked if there was public comment on agenda item 5.c. There was none.

Mr. Hudak reported that the amendment regarding same sex spouses is to conform with the changes in federal law. There is no financial impact to the District.

**Motion:** To adopt Resolution 14-4.

**By:** Director Hickey

**Seconded by:** Director Griffin

**Vote:** 4-0-1

**Motion Passed**

**5. d. Transfer Agreement Ad Hoc Committee Report**

President Shefren asked if there was public comment on this item. There was none.

President Shefren reported that he spoke with Michael Blaszyk of Dignity Health who indicated he and Ms. Vaskelis would be open to meeting with the Board and reviewing the issues that have changed in healthcare and discussing why Sequoia Hospital's performance is not as projected in the Development Agreement. He also indicated Dignity would be open to discussing a buyout. President Shefren would like Mr. Blaszyk and Ms. Vaskelis to meet with the District's Ad Hoc committee, comprised of himself, Director Griffin and Mr. Michelson, to review issues of Sequoia Hospital's performance versus the projections in the agreement. The Ad Hoc committee is looking into hiring a consultant to produce a new 3-5 year projection based on actual performance.

#### **5. e. Director Request for Future Agenda Items**

President Shefren asked if any Director had an agenda item request. Director Hickey requested that an action item be placed on the February meeting agenda that Sequoia Healthcare District launch an initiative to engage stakeholders in dialogue seeking resolution of the transitional status of both healthcare districts in San Mateo County.

There was no second and therefore the item will not be placed on the February agenda.

#### **6. Adjourn**

**Motion:** At 5:30 PM adjourn meeting.

**By:** Director Kane

**Seconded by:** Director Griffin

**Vote:** 4-0-1

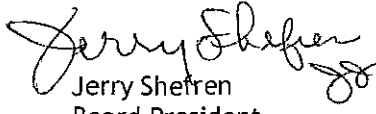
**Motion Passed**

The next regular meeting of the Board of Directors of Sequoia Healthcare District is scheduled for 4:30 PM, Wednesday, February 4, 2015, District Conference Room, 525 Veterans Blvd., Redwood City, CA.

Respectfully Submitted,

Kathleen Kane  
Secretary

8. Adjourn. The Next Regular Meeting Of The Board Of Directors Of Sequoia Healthcare District Is Scheduled For 4:30 PM, Wednesday, April 1, 2015, District Conference Room, 525 Veterans Blvd., Redwood City, CA 94063

  
Jerry Shetren  
Board President

\*Public comment will be taken for each agenda item prior to the board's consideration on that item.

Any writings or documents provided to a majority of the Board of Directors regarding any item on this agenda will be made available for public inspection at the District office, 525 Veterans Blvd., Redwood City, CA, during normal business hours. Please telephone 650-421-2155 to arrange an appointment.

If you are an individual with a disability and need an accommodation to participate in this meeting, please contact Sequoia Healthcare District at least 48-hours in advance at 650-421-2155.

SEQUOIA HEALTHCARE DISTRICT  
Balance Sheet

Agenda Item No. 3.b  
Board of Directors Meeting  
2/4/15

	July	August	September	October	November	December	January	February	March	April	May	June
<b>ASSETS</b>												
<b>Current Assets</b>												
Cash (WF-MMA)	\$ 1,934,503.84	\$ 1,934,914.63	\$ 1,935,312.26	\$ 1,935,723.22	\$ 1,936,121.01	\$ 5,936,943.13						
Cash (WF)	199,017.52	681,665.74	440,130.15	811,161.68	563,274.29	353,923.25						
Cash from Investments	246,156.70	246,156.70	246,156.70	246,156.70	246,156.70	246,156.70						
Cash Equivalents	11,873,712.51	9,896,151.51	9,879,677.51	9,915,641.51	9,938,654.51	9,917,327.51						
J. Gabet Reimbursement	92.29	0.00	0.00	0.00	0.00	0.00						
Total Current Assets	14,253,482.86	12,758,888.58	12,501,276.62	12,908,683.11	12,684,206.51	16,454,350.59						
<b>Property, Plant &amp; Equipment</b>												
Land	138,927.00	138,927.00	138,927.00	138,927.00	138,927.00	138,927.00						
Land Improvements	144,158.05	144,158.05	144,158.05	144,158.05	144,158.05	144,158.05						
Buildings	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30						
Building Improvements	513,129.57	513,129.57	513,129.57	513,129.57	513,129.57	513,129.57						
Tenant Improvements	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29						
Improvements-Classroom	6,984.28	7,110.44	60,520.44	60,520.44	83,410.44	83,410.44						
Equipment	68,615.18	68,615.18	68,615.18	68,615.18	68,615.18	68,615.18						
Furniture	28,259.91	28,259.91	28,259.91	28,259.91	28,259.91	28,259.91						
Accumulated Depreciation	(1,662,063.38)	(1,668,140.88)	(1,674,218.38)	(1,680,295.88)	(1,686,373.38)	(1,692,450.88)						
Net Property/Plant/Equipment	702,506.20	696,554.86	743,887.36	737,809.86	754,622.36	748,544.86						
Total Assets	14,955,989.06	13,455,443.44	13,245,163.98	13,646,492.97	13,438,828.87	17,202,895.45						
<b>LIABILITIES &amp; FUND BALANCE</b>												
<b>Current Liabilities</b>												
Accounts Payable	\$ 9,807.52	\$ 2,873.62	\$ 98.62	0.00	0.00	0.00						
Deposit Payable	3,165.00	3,165.00	3,165.00	3,165.00	3,165.00	3,165.00						
Grants Payable	1,299,096.00	727,893.00	692,508.09	675,000.00	675,000.00	675,000.00						
Total Current Liabilities	1,312,068.52	733,931.62	695,771.71	678,165.00	678,165.00	678,165.00						
<b>Fund Balances</b>												
Invested in Capital Assets	705,418.00	705,418.00	705,418.00	705,418.00	705,418.00	705,418.00						
Fund Balance	13,598,331.00	13,598,331.00	13,598,331.00	13,598,331.00	13,598,331.00	13,598,331.00						
Net Surplus/Loss	(659,828.46)	(1,582,237.18)	(1,754,356.73)	(1,335,421.03)	(1,543,085.13)	2,220,981.45						
Total Fund Balance	13,643,920.54	12,721,511.82	12,549,392.27	12,968,327.97	12,760,663.87	16,524,730.45						
Total Liabilities & Fund Balance	14,955,989.06	13,455,443.44	13,245,163.98	13,646,492.97	13,438,828.87	17,202,895.45						

**SEQUOIA HEALTHCARE DISTRICT**  
**Income Statements**

Agenda Item No.3.b  
Board of Directors Meeting  
2/4/15

	July	August	September	October	November	December	January	February	March	April	May	June	Year to Date	Budget 14-15
<b>INCOME</b>														
Rental Income	3,559.86	3,559.86	3,844.64	3,703.45	3,703.45	3,703.45							22,074.71	44,400.00
Tax Revenue	0.00	10,945.29	0.00	455,353.40	458,455.03	4,023,021.15							4,947,774.87	9,500,000.00
Investment Income	(10,522.00)	22,439.00	(16,474.00)	35,964.00	23,013.00	(21,327.00)							33,093.00	100,000.00
Interest Income	478.96	422.57	402.86	414.32	404.51	827.98							2,951.20	6,000.00
Pension Income	0.00	0.00	0.00	0.00	0.00	2,600,000.00							2,600,000.00	2,600,000.00
ROI-Sequoia Hospital EBIDA	0.00	0.00	0.00	351,987.05	0.00	0.00							351,987.05	-
Total Income	(6,483.18)	37,366.72	(12,226.50)	847,422.22	485,575.99	6,606,225.58							7,957,880.83	12,250,400.00
<b>EXPENSES</b>														
<b>Administrative Expenses</b>														
Admin. Expense	323.57	631.24	3,103.49	594.42	486.83	764.77							5,904.32	13,000.00
Admin. Payroll	16,897.63	20,196.44	17,107.56	18,645.85	17,107.56	17,107.57							107,062.61	232,000.00
Board Health Insurance	3,505.80	3,505.80	3,505.80	2,416.56	3,505.80	9,512.34							25,952.10	60,000.00
Employee Health Insurance	5,041.29	4,604.74	1,824.70	2,402.24	3,947.44	3,061.34							20,881.75	48,000.00
Employee Retirement Benefit	923.61	2,179.16	1,468.78	1,525.94	1,468.78	1,468.78							9,035.05	18,000.00
Investment Fees	0.00	0.00	0.00	0.00	0.00	3,750.00							3,750.00	48,000.00
Office Supplies/Equip Maint	453.44	559.09	549.58	357.86	1,027.55	670.21							3,617.73	7,500.00
Purchased Services	0.00	0.00	0.00	0.00	0.00	0.00								50,000.00
Accounting fees	0.00	0.00	0.00	0.00	17,000.00	0.00							17,000.00	19,000.00
Board Expense	0.00	71.31	0.00	105.00	70.85	28.69							275.85	8,000.00
Associations/Membership	0.00	7,500.00	180.00	0.00	0.00	0.00							7,680.00	17,800.00
Communications	539.13	0.00	0.00	29,472.68	0.00	0.00							30,011.81	25,000.00
Public Relations	1,350.00	0.00	360.00	0.00	0.00	0.00							1,710.00	30,000.00
Web Site/IT	8,115.00	1,012.88	2,007.50	3,743.55	1,345.62	10,840.00							27,064.55	30,000.00
Insurance/D&O	26,832.00	(48.50)	171.00	0.00	(2,732.50)	0.00							24,222.00	21,000.00
Election Fees	0.00	0.00	0.00	0.00	0.00	0.00							0.00	200,000.00
LAFCO fees	0.00	0.00	0.00	0.00	8,369.00	0.00							8,369.00	10,000.00
Legal Fees	0.00	2,570.00	4,357.00	826.00	2,007.50	964.00							10,724.50	20,000.00
Bank Fees	0.00	0.00	0.00	0.00	0.00	30.02							30.02	100.00
Total Admin. Expenses	63,981.47	42,782.16	34,635.41	60,090.10	57,354.43	44,447.72	0.00	0.00	0.00	0.00	0.00	0.00	303,291.29	857,400.00
Pension Plan Expense	0.00	0.00	0.00	0.00	0.00	2,600,000.00	0.00	0.00	0.00	0.00	0.00	0.00	2,600,000.00	2,600,000.00
Total Admin. With Pension Plan	63,981.47	42,782.16	34,635.41	60,090.10	57,354.43	2,644,447.72	0.00	0.00	0.00	0.00	0.00	0.00	2,903,291.29	3,457,400.00
<b>Property Expenses</b>														
Maintenance	1,030.00	1,613.94	1,100.00	1,427.94	1,667.60	1,350.00							8,189.48	30,000.00
Utilities	1,243.47	1,838.71	3,027.29	1,869.70	2,807.66	2,875.59							13,662.42	26,000.00
Property Insurance	1,678.51	0.00	0.00	0.00	0.00	0.00							1,678.51	2,000.00
Depreciation	6,077.50	6,077.50	6,077.50	6,077.50	6,077.50	6,077.50							36,465.00	80,000.00
Total Property Expenses	10,029.48	9,530.15	10,204.79	9,375.14	10,552.76	10,303.09	0.00	0.00	0.00	0.00	0.00	0.00	59,995.41	138,000.00

**SEQUOIA HEALTHCARE DISTRICT**  
**Income Statements**

Agenda Item No.3.b  
Board of Directors Meeting  
2/4/15

	July	August	September	October	November	December	January	February	March	April	May	June	Year to Date	Budget 14-15
<b>Grant Expenses</b>														
Grant Admin Expenses	0.00	39.85	400.00	547.03	153.56	22,554.35							23,694.79	6,000.00
Grant Admin Payroll	5,623.41	6,766.83	5,840.66	5,840.66	5,840.66	5,840.65							35,752.87	72,000.00
Children's Health Initiative	0.00	675,000.00	0.00	0.00	0.00	0.00							675,000.00	1,350,000.00
SFSU Nursing Program	0.00	0.00	0.00	0.00	470,237.00	0.00							470,237.00	475,000.00
Samaritan House Grant	165,674.00	0.00	0.00	165,674.00	0.00	0.00							331,348.00	663,000.00
Other Grants	24,500.00	1,250.00	0.00	5,000.00	0.00	0.00							30,750.00	60,000.00
San Mateo Medical Ctr. So County	0.00	0.00	0.00	0.00	0.00	0.00							0.00	1,000,000.00
Ravenswood-Belle Haven Clinic	0.00	0.00	0.00	0.00	0.00	0.00							0.00	500,000.00
Community Grants Program	0.00	0.00	0.00	0.00	0.00	0.00							0.00	1,725,500.00
Chronic Disease Management	0.00	1,351.25	665.00	4,298.04	303.16	4,913.76							11,531.21	30,000.00
Apple Tree Dental	250,000.00	0.00	0.00	0.00	0.00	0.00							250,000.00	500,000.00
<b>Total Grant Expenses</b>	<b>445,797.41</b>	<b>684,407.93</b>	<b>6,905.66</b>	<b>181,359.73</b>	<b>476,534.38</b>	<b>33,308.76</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,828,313.87</b>	<b>6,381,500.00</b>
<b>Program Expenses</b>														
HeartSafe Admin Expense	0.00	15,101.12	222.08	353.48	99.79	272.73							16,049.20	20,950.00
HeartSafe Payroll	3,965.86	5,751.12	4,534.60	4,534.60	4,534.60	4,534.60							27,855.38	59,650.00
HeartSafe Training & Equipment	442.55	236.00	0.00	1,548.71	5,099.31	58.03							7,384.60	67,400.00
School Health Admin	585.00	919.68	5,317.89	5,447.82	3,821.32	3,544.85							19,636.56	57,000.00
School Health Payroll	9,608.89	12,488.49	10,572.62	10,572.65	10,572.62	10,572.60							64,387.87	136,500.00
Gabet salary expense adjust	184.62	92.29	0.00	0.00	0.00	0.00							276.91	
School Health Grants	118,750.00	188,466.50	87,500.00	155,204.29	124,670.88	135,116.62							809,708.29	2,777,000.00
<b>Total Program Expenses</b>	<b>133,536.92</b>	<b>223,055.20</b>	<b>108,147.19</b>	<b>177,661.55</b>	<b>148,798.52</b>	<b>154,099.43</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>945,298.81</b>	<b>3,118,500.00</b>
<b>Total Expenses</b>	<b>653,345.28</b>	<b>959,775.44</b>	<b>159,893.05</b>	<b>428,486.52</b>	<b>693,240.09</b>	<b>2,842,159.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>5,736,899.38</b>	<b>13,095,400.00</b>
<b>Net Surplus/Loss</b>	<b>(659,828.46)</b>	<b>(922,408.72)</b>	<b>(172,119.55)</b>	<b>418,935.70</b>	<b>(207,664.10)</b>	<b>3,764,066.58</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,220,981.45</b>	<b>(845,000.00)</b>



CEO Report: February 2015- Lee Michelson

1. I have recently been elected as Vice Chair of the First5 Commission for San Mateo County.
2. The District currently has four Living Healthy Classes scheduled to begin in February at three different sites. We anticipate full classes of 16 participants for each class.
3. The District was a sponsor of the Eldercare Fair at the San Carlos Adult Activity Center and a memory care event: Alive Inside presented by the Ombudsman Services.
4. The Apple Tree Clinic groundbreaking event will take place on January 29. The clinic hopes to open by April.
5. The general meeting of the San Mateo County Oral Health Coalition will take place on February 17<sup>th</sup>. Etta Kinney of the San Mateo County Dental Society will be the main presenter.
6. March 10 will mark Glenna Vaskelis last participation on the pension committee. She will be replaced by the new Sequoia Hospital CEO, soon to be named.
7. The San Mateo County Medical Center will be holding an anniversary celebration for the South County Clinic on Middlefield Road to mark their first year of service. The date is Saturday, March 21. Time still to be determined.
8. A new handicap ramp will soon be built from the back parking lot through the rear door. We anticipate the ramp to be in by mid-February.

**State of the District: February 2015: Lee Michelson, CEO**

Introduction – Last year the District updated our strategic plan and established eleven key guiding principles. This State of the District report will chronicle activities undertaken over the past twelve months that will demonstrate how these guidelines have shaped our actions. It will also spell out several next step considerations for 2015.

In summary the District was successful on many fronts: financial management, the development of our communications program, the expansion of our Healthy Schools Initiative and the identification and support of several new programs that are already or soon will offer additional health services for our residents.

We have maintained our staff, remained active in our community and improved our grants management and monitoring program. We have also been recognized by the Association of California Health Care Districts for our management performance.

The next twelve months will be equally exciting with several new efforts that will challenge us to achieve even more. Full speed ahead!

**Guiding principle #1:** The District will remain primarily a funder of top-quality programs. Though we will develop and offer our own signature programs, that effort will be secondary.

Activities:

1. The District budgeted expenditures for grants and programs of \$9.5 million for fiscal year 2014-15 of which more than \$9 million is paid to health service providers and school districts.
2. The number of District staff has remained at two full –time and three part-time along with a part-time communications consultant. Additional program staff are hired on a per project basis

Next Steps:

1. The District will explore a summer intern program that may provide project assistance at either a low-cost or college credit option.
2. As the District has made a decision to primarily provide services through program partners, we may elect to invest time and a small amount of money into capacity building efforts such as training in outcome evaluation and staff development.

**Guiding principle #2:** The District will work towards a better understanding of the health impact that we and our partners are having on the health status of our residents.

Activities:

1. The District has contracted with a grants management software company to institute an online communication system that will not only make it easier for our grantees to apply and report but also improve our ability to monitor and evaluate their performance especially over an extended timeframe.
2. The District worked with an outside evaluator Applied Survey Research to evaluate our PE+ program and its impact on the health and fitness of thousands of public school children.

3. Several efforts have been made to coordinate our Healthy Schools Initiative with testing and survey programs used by the schools.

Next Steps:

1. The District plans to hire Applied Survey Research to work with both our grantees and grants committee on improving our knowledge and skills around outcomes measurement.
2. The District is developing a set of questions for our major funding initiatives that should result in a more uniformed reporting. The new grants management software will be used for this group moving forward.
3. The Living Healthy team are working on a post-workshop survey to be sent out 3 months, 6 months and one year after taking the class.

**Guiding Principle # 3:** The District will be a catalyst for bringing new programs to our community.

Activities:

1. The District has made a major commitment to Apple Tree Dental of Minnesota to develop a mobile dental program that will increase access to oral health care especially for children, older adults and residents with special health challenges.
2. The District has agreed to support the future building of a hospice home to serve those residents that need special attention during the final days of their lives.
3. The District is funding a pilot project called Food Friends, a Colorado based program with twelve local preschools to promote healthy eating and active physical activity.
4. Our new CPR classroom is already booking groups to learn hands-only CPR and choking safety.
5. Several new school based programs have been initiated including Quiet Time, the meditation program that has proven to be impactful.

#### Next Steps:

1. The District is exploring expanding our PE+ program to include a summer fitness program.
2. District staff are researching and discussing potential new programs that would add services for both the very young child and for older adults.
3. The District and our partners will be offering the first area high school heart screening this March which is expected to reach more than 1,000 students.

**Guiding Principle #4:** The District will challenge itself and our partners to be innovative.

#### Activities:

1. The Chronic Disease Management program was revised to focus significantly more on nutrition and stress management leading to a renaming of the program to Living Healthy and promoting the program to both those with chronic disease and those attempting to avoid those health problems.

#### Next Steps:

1. The grants committee will be asked to consider developing a mini-grants program that will allow our grantees to apply for additional funds to try a new idea without jeopardizing funding for their existing programs.
2. Staff will begin to define what we mean by innovation and how we are going to decide what is innovative.

**Guiding principle #5:** The District staff and Board will be involved in our community and support collaborative efforts that address important health issues.

#### Activities:

1. The staff actively participates on more than 20 health focused committees and takes leadership roles on several.

2. The Board continues to be active in programs like Mayors Meals on Wheels Delivery Day and Samaritan House Holiday food distribution.

Next steps:

1. Staff will develop a reporting document to be included with staff reports indicating what committees they are serving on, what their role is on the committee and what the committees are working on.
2. Staff will provide opportunities for Board members to visit programs and attend events.

**Guiding Principle #6:** The District will continue to allocate spending 100% of our current tax income on community health programs.

Activities:

1. Anticipating receiving \$9.5 million in tax income during the fiscal year 2014-15, we budgeted that same amount for grants and programs.

Next steps:

1. We will assess tax income received through May; estimate how much we may receive in June and therefore a total for the year. We will then calculate a 4% growth to determine an estimated to budget for tax income for 2015-16.
2. We will present a budget of expenditures for grants and programs for 2015-16 that will equal anticipated tax income.

**Guiding principle #7:** The District will be mindful of the health needs of all of our residents but focus primarily on identified vulnerable populations: older adults, young children and those living with special health challenges.

Activities:

1. In an effort to provide services to all geographic regions of our area, we have expanded our school wellness effort to include school districts serving the families of Portola Valley, Woodside and Menlo Park.

2. We committed funding to Apple Tree Dental believing that their mobile program will bring dental services directly to the populations least able to access care.
3. Several new grants (6) were awarded to programs that primarily or exclusively serve an older adult population.
4. We are funding a pilot project with the Child Care Coordinating Council and twelve day care centers that focuses on the healthy development of the young child.

Next steps:

1. We are currently exploring additional programs that are specifically targeting serving the older adult and others serving the 0-5 year old population.
2. We are supporting a heart screening program that will be offered free to all area high school students.
3. Our new grant application and reporting forms will attempt to capture better demographic information detailing who we are serving and how and this will be reported in our next annual report.

**Guiding principle # 8:** The District will produce and manage a top-flight website and explore opportunities to better communicate through social media.

Activities:

1. The District website offers a community calendar, CPR class registration and updated information online.
2. We have initiated an email newsletter and are active on social media sites including Facebook and Twitter.
3. School wellness coordinators have been tasked with providing stories and photos of various programs at their school sites.
4. Potential grantees can access the grant portal on our website.

#### Next Steps:

1. We are in the process of developing our first Healthy Schools Initiative email newsletter and our PE+ partners have developed a newsletter for parents and school staff.
2. We are utilizing new “neighborhood” social websites to advertise our CPR and Living Healthy classes and we expect to expand that effort as those sites develop.

**Guiding Principle #9:** The District will remain conservative in our investment of reserve dollars to minimize risk.

#### Activities:

1. The District is restricted by law as to how we may invest reserves. We could convert our investments to real estate or other products but have chosen not to do so because of the potential risks associated with such conversions.

#### Next actions:

1. No new or different activity expected.

**Guiding principle #10:** The District will be a vigilant steward of taxpayer dollars.

#### Activities:

1. Administrative dollars continue to represent less than 10% of the total budget and spending remains under-budget overall and in most line items. We have not yet received election costs so it is unclear how that cost may impact our performance.
2. District staff continues to closely monitor the spending of our grantees to assure that they are spending grant dollars as promised. Any discrepancies are discussed with the grantee and may result in nonpayment of the 2<sup>nd</sup> half of the grant amount.



3. A new annual report distribution system was used allowing us to distribute twice as many annual reports for the same distribution fee.
4. When assessing grant applications and communicating with service providers, we make it clear that District funds should not be used to provide services that could have been paid for from other government or other funding source.

Next Steps:

1. The next budget is expected to show administrative dollars allocated at 8% or less.
2. We do not anticipate adding new staff at this time.

**Guiding principle #11:** The district reserves (the dollars invested with Fiduciary Trust) will be protected to pay for administration, elections and building expenses. These expenses may also be paid for through rental income, investment income and EBIDA share. Tax income is expected to be used for programs and grants.

Activities:

1. For fiscal year 2014-15 the expectation was that the above mentioned expenses would be paid for from a combination of non-tax income and reserves. It was estimated that \$845,000 in invested reserves would be converted to cash as needed to cover expenses. The District did however receive \$352,000 in unexpected EBIDA revenue which should reduce the amount needed to \$493,000.

Next Steps:

1. We anticipate receiving an estimated EBIDA for the 2015-16 fiscal year this March. This will help guide us in determining whether or not invested reserves will be needed to cover some expenses for 2015-16. Expenses should be less overall as there will not be an election this November.

Pamela Kurtzman  
Staff Report for December 2014-January 2015

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*Activity Summary*

**I. Healthy Schools Initiative**

- The Wellness Coordinators and I held our second quarterly meeting on Jan 9th to review their progress toward meeting individual goals and refine their assessment and reporting tools. At the beginning of the year, coordinators created an action plan, that among several purposes, serves to provide me a baseline to measure their progress toward meeting their goals. Each of their action plans begins with clearly defined objectives and measureable outcome strategies that align with the goals of HSI and with the strategic goals of the individual school districts. A focal point of discussion was in assuring that data are used to drive decisions. Our most commonly referred data is from the California Healthy Kids Survey (Every other year), Physical Fitness Test (Every year), and the School Health Index (Every other year). Remember that I invite board members to view their detailed action plans, which I will share upon request
- Worked with Lee in defining and communicating how my work aligns with, and contributes to, the 11 major goals of the District's strategic plan which Lee will share with the Board on Feb 4th
- **Committees**
  - A significant number of hours are spent attending meetings, and sometimes leading discussions of the school district Wellness Committees, the County School Wellness Alliance, and the school health summit planning committee. Wellness committee meetings are monthly for 6 of the 8 school district partners. The County School Wellness Alliance also meets monthly and the school summit planning meetings are twice monthly During November through January to prepare for the February 25 summit
  - Member of the Get Healthy grants selection committee. We met twice in December to review and recommend grant proposals for community-based wellness programs.
  - Chamber Education Committee meets the first Wednesday of each month during lunch to discuss ways in which business can participate to improve local schools
- **Healthy Schools Initiative newsletter**
  - We are working with a local parent/writer to pilot a monthly online parent newsletter that will be distributed via email to all parents in the San Carlos School District beginning March 2 through June. The idea is that if it is well-received, which we will measure, we will eventually expand to all 8 partner school districts. The content will include a note from SHD HSI Director/ CEO, a feature parent education article, a kids recipe/ nutrition tip of the day, recent health news, Counselor's Corner, a humorous cartoon, "Around School" (student contribution), and local events including family events and parent education opportunities. A draft of the first edition will be completed in mid-February.

**II. HSI and CC Grants**

- **2014-14 (current grants)**
  - Reviewed mid-year reports of current grants. A summary of these reports is attached. A Power Point of the mid-year outcomes will be presented at the Feb 4th Board meeting
  - Jennifer is fully engaged in overseeing the HSI grants and she will present on the mid-year reports

- **2015-16 Grants Cycle:**

*Budget:*

- This year an increase in property taxes collected allowed SHD to increase our grants budget from \$1,350,000 last year to \$1,725,000 this year. The grants committee agreed to transfer up to \$100,000 of this increase to HSI grants and up to \$25,000 for evaluation training. This brings the amount available to the HSI grants program to \$300,000 (up from \$225,000 last year) and the amount available for the CC grants cycle to \$1,600,000.
- New this year:
  - The grants committee approved offering up to \$25,000 in “mini grants” for both school and community programs. School-based mini-grants will be funded through the \$100,000 increase HSI will receive.
  - Also new this year, the committee approved the use of up to \$25,000 for ASR evaluation training of staff, grants committee members, and approved non-profit agencies.

*Priority Funding Areas:*

- Active and Healthy Living
- Preventive Healthcare Services
- Treatment of Priority Health Conditions

*CC Grants Committee:*

- The current committee is comprised of 6 members, 5 of which are “seasoned” and 1 new member. *SHD Board members:* Kim Griffin, Katie Kane; *Community members:* Tom Mohr, Kristin Dragoo, Ruth West, Marie Violet; *SHD Staff:* Pamela Kurtzman, Lee Michelson

*Procedure:*

- We will continue to use a two-step process; Letter of Intent and then full application.
- Will enlist the help of ASR as noted above
- We held two grants information sessions for potential applicants on January 6<sup>th</sup> and on January 8<sup>th</sup> here at our SHD offices. An average of 40 people attended each session.
- The grants committee met on January 20 in preparation of the 2015-16 grants cycle to determine the grants procedures, review selection criteria, and priorities for the new funding cycle. Minor changes were made to our current Letter of Intent (LOI) prior to it going online. We are working with ASR to assist in the revisions to the full application prior to it going live in February.
- **Our online grants management portal went live on Jan 9th!** Applicants are completing LOI's through Feb 9th. So far, things have been going very smoothly. The full application is being revised with the help of ASR and the grants committee prior to it going live in February. I look forward to sharing it with the Board

*Timeline:*

- Letters of Intent due Feb 9
- Full proposals due March 27
- Board approval in May (Date to be determined)

### **III. *Children's Health Initiative***

- The SHD Board will hear from HPSMC at our February Board meeting when they report on their analysis of year-end spending and enrollment for FY 13-14 and request \$1.2 M to support funding need. A one-page summary of their request is attached to this report

- Wellness Coordinator Kim Staff teaches a group for boys, and will be expanding that model into a Hillview Faculty Men's Group. The first meeting is January 27th at lunch. Topics will include Jungian archetypes of masculinity and what it means to become a man in our society, and building social-emotional skills.
- At the next Asset meeting on January 21st, the Wellness Coordinator (Kim Staff) will share the info she will be presenting to the Menlo Park Community Trust on the ongoing work the District has done around: social-emotional learning, social-emotional health, and student academic support
- Laurel held its first Caring + Sharing community meeting on November 17<sup>th</sup>. Approximately 75% of qualifying families attended

#### Las Lomitas:

- **Nutrition and PE: Food Allergy Awareness :** The Kyle Dine food allergy awareness assembly provided students in grades K-3 with basic information about food allergies including common allergens, symptoms as well as how to keep allergic friends safe by washing hands, not sharing food and avoiding cross contamination. The assembly also had a strong anti-bullying message and emphasized having empathy for our differences. Assess and improve snacks in student store as one goal of the Wellness Committee. Advertise District-wide Healthy Snack Policy. District-wide memo sent by Director of Student Services encouraging families to send healthier snacks for student birthdays and class celebrations, decrease sweets. Also, partnering with Stanford Health for All Intern at Las Lomitas School Intern working weekly through May with our New Games lunchtime physical activity program in collaboration with PE teacher, nurse, speech therapist to track student's progress through May in area of physical fitness and social emotional growth
- **Mental Health/ Social Emotional:** La Entrada School Climate Committee made up administration, parents and school counselors to evaluate and discusses school climate and identify safety and health concerns at school. Coordinates with Wellness Committee. Project Cornerstone - builds positive relationships, opportunities, values, that provide the foundation for a healthy, successful future. Establish a class at school for stress reduction. Collaborate with school counselors Identify health concerns from Healthy Kids Survey. Partner with Stanford Health for All Intern Provide a stress assessment/reduction program for interested 4-8 graders during Leopard's lounge lunch. Focus on mindful breathing techniques. Provide on site mental health assistance for students. Mindfulness to start Feb 2014
- **Staff Wellness-** Staff stress has been identified as a needed area of wellness to address. They will hold a staff exercise class /possible lunchtime mindfulness class. Also partnering with Stanford "Health for All" program to create a staff exercise and stress reduction program. Coordinating with Woodside School District to share ideas and resources for wellness activities.

#### Portola Valley:

- **Wellness Committee:** A committee of PTO, school counselor, principal, District Office and 1-2 parents make up the wellness committee so far
- **Safe Routes to School:** Set up/advertise bike walk to school days; set up tally sheets to track walker and riders, recruit volunteers to hand out rewards, find incentives (stickers, pedometers, etc.), set up school to school and class to class competition. Set up rewards for largest increase within grade level at CMS twice during 2014-15 school year. Using PTO Weekly announcements, school morning announcements and Portola Valley Forum as a means to promote student/parent bike and walk to school days. Competition at CMS levels for the first semester is complete. Numbers have been tallied and a party will be provided to the 8th grade class for the highest increase in participation. Will continue the incentive for 2nd semester
- **Staff Wellness: Provided** supplemented yoga classes to all teachers and administration. The first 5-week series started in November and the 2nd 5 week series started in mid-January. Anticipating a one

#### IV. *Highlights from our School District Partners:*

##### Redwood City:

- **Epi Pen Legislation:** Serving as the school district main point of contact for New Epi Pen legislation that will require schools to have pens available at schools for anyone experiencing a serious allergic reaction. This means that school staff and administrators will need additional training for when to use Epi pens since a person experiencing a serious reaction may not have an action plan in the school office. I have begun to attend office manager meetings to inform them of the new legislation. I am currently scheduling and planning additional meetings and trainings on using Epi, recognizing signs and symptoms of severe allergic reactions, as well as reviewing CPR certifications and getting those up to date.
- **Wellness Policy Revision:** Wellness Policy revisions are completed. The policy needs to be finalized by the RCSD policy committee and then voted on by the RCSD school board. I will be preparing for the roll out of the new policy, which begins with communicating the new policy to school staff and administrators at staff meetings throughout the spring. It will also mean updating communications and preparing flyers that reflect the updated policy and guidelines and providing healthy alternatives for teachers and families when needed. Next steps also include revising the Administrative Regulations which provide more information on how the school board policy will be carried out.
- **Drink Water First:** A student and parent survey was conducted as part of the Get Healthy San Mateo County (GHSMC) grant awarded to the school district. This data was summarized and included in a final report that will inform future projects related to Drink Water First in RCSD. Next steps will include reporting findings to facilities, administrators, student groups, families and the wellness committee. At this time, three new Global Tap fountains have been installed (Gill, Clifford and Kennedy) and three more are being ordered. I am still working to secure additional funding for more fountains.

##### San Carlos:

- **Staff Development:** Science teachers signed up for Puberty Talk. PE teachers working with PE+ to learn PFT for grades 1-4. After school sports coaches and PE teachers will do diversity training on Feb 11. Staff attended Restorative Justice and Youth Mental Health First Aid trainings
- **2015 Health Fair:** Planning Good2Go! Fair to include keynote speakers from California Health Medical Reserve Corps
- **Mental Health:** Developed complete Mental Health Tiers of Support document to guide interventions by psychologists, counselors, and MFT interns. Second Step is to develop protocols for 5150 and suicide assessments
- **2015 Wellness Summit:** Planned January 14 SWA meeting about ATOD use. Planning Wellness Summit to include a presentation about using the School Health Index
- **School Health Index:** Coordinated school site councils to perform the School Health Index assessment. Worked with PE staff to conduct an equipment survey.

##### Belmont-Redwood Shores:

- **SEL (Social-Emotional Learning):** A committee has been hard at work evaluating curriculum. They narrowed it down from 12 programs to 4. The committee will meet to narrow it down to 2 programs to pilot this spring. They will meet again in April to make a final recommendation to the board of 1 program to adopt for implementation next fall. Overall, this program will hopefully have a big district-wide impact. One challenge is that while there is excitement about it overall, teachers are very concerned about how they will be able to fit anything else into their already packed day.

- **Positive Behavior Intervention Support):** Along with their SEL program, they're working with school sites to implement PBIS and have participated in county PBIS training. Mindy will do a PBIS presentation at the county school wellness summit next month. In addition to PBIS, they've also been working with several school sites on peer conflict manager programs.
- **Outcomes Assessments:** They have been analyzing data from Physical Fitness Testing, CA Healthy Kids Survey, and School Health Indexes. Those outcomes will be reported in June.
- **Health curriculum recognition:** The Great Body Shop (the health curriculum they use funded by SHD) asked them to be one of the "Featured Schools" on their new website. They're impressed with the way they've been able to use their program and really integrate it into all of their schools. This comes with free materials for 5 classrooms and a banner on display at a local conference.
- They're also continuing to develop and spread their staff wellness program. They've offered flu shot clinics, fitness classes and CPR training and have a health screening planned for next month. They're also working on a discount membership with Crunch gyms.

#### Sequoia Union:

- **Alcohol and Other Drugs--**"Neuroscience of Addiction" presentations to parents/staff/students this semester. The presentations for students will take place at the comprehensive sites, plus an intensive 9 week curriculum with select students at Redwood High. The parent/staff presentation by Dr. Alex Stalcup is on Jan. 29, 2015 at the SUHSD DO
- **E-cigarettes-** and other emerging tobacco products--Bay Area expert, Alissa Ralston, will present to parents/staff/students/community on Feb. 12th. The SUHSD Board of Trustees passed an updated tobacco policy in Nov, 2014 which includes prohibition of e-cigarettes
- **Mental Health:** Mission Be mindfulness pilots with IB and Health Careers Academy students took place at Sequoia High this past semester. Twenty-two students participated in the daily 6 week-program. The QT pilot at Redwood has trained 11 staff and 55 students. The program received national attention when NBC aired a special feature of the Quiet Time program in San Francisco. They are interested in a follow up segment with the Redwood High students next year. View the segment at: <http://www.nbcnews.com/nightly-news/san-francisco-schools-transformed-power-meditation-n276301>.
- **Health and Safety:** Continuing planning the district-wide cardiac screening event, March 22, 2015, with the goal of screening 800-1,000 students for risk of sudden cardiac arrest. In conjunction with our HeartSafe program, Dignity Health, and local firefighters they completed CPR training for M-A's freshman class this fall and are over halfway to their goal of training ALL SUHSD students. They will distribute a post-CPR training using Survey Monkey to PE teachers. Through a collaboration with Dignity Health, Pediatric Wellness Group, and PAMF, they are continuing work on ImPact concussion testing and education for parents and students at Carlmont and Woodside. Working with Dr. Ghajar's team at Stanford on a concussion study using the Eye-Trac device. To date, their concussion team has obtained baseline neurocognitive data on over 200 athletes and conducted post-injury tests on over 6 students.

#### Menlo Park City:

- **Social Emotional Support Programs- Life Skills Lessons:** Operating on a 5-week lesson rotation, counselors are working to align the 5 CASEL Core Competencies: self-awareness, self-management, social awareness, relationship skills, and responsible decision making with Common Core standards related to listening and communicating. Counselors conduct lessons in every classroom within the 5-week rotation period. Also, at Oak Knoll starting the week of January 26th, all of the 5th grade classes will receive the mindful school curriculum delivered by a former Oak knoll parent (8 weeks 2x a week for 15mins)

time, free for participants, Zumba class. If there is enough enthusiasm, then we will bring in Zumba as well. Contact bay area/local chefs. Bring in chef to teach teachers healthy cooking alternative for one or more class, depending on interest.

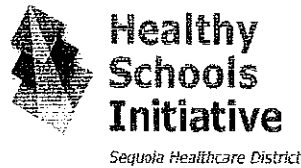
#### **Woodside Elementary:**

- **Health Education:** Nurse and District Wellness Coordinator, Abbe Keane, is focusing on increasing health education for all students and professional development around health related topics for staff. Psychologist/counselor provides individual/group counseling as needed and S.E.L. lessons are offered once a week and are integrated into the curriculum. Abbe is working to recruit students who will be ambassadors in creating a positive school climate. She is also working to develop health plans for students with chronic illness, provide health screenings and referrals, expand family life curriculum for grades 6-8, and explore options for drug and alcohol prevention education.
- **Social/ Emotional Support:** Psychologist/counselor provides S.E.L. provide lessons 1 time per week. Lessons are integrated into curriculum. Provides individual/group counseling as needed. Body image presentation: "Love the Skin You're In."
- **Nursing services:** Identifying and developing health plans for students with chronic illness. Health screenings and referrals. Expanding family life curriculum for grades 6-8. Grades K-3: "Being Healthy" lessons. Employee health: TB, flu, and blood pressure screenings. Coordinate and assist with nutrition education.

#### **V. *Web and Social Media***

- Gwen assisted with the integration of our website with our new grants management portal
- Gwen also led a discussion at our Jan 9 Wellness Committee meeting to continue assisting the wellness coordinators with increasing communication and awareness of their work within schools. We are striving to keep our webpages up to date with fresh, relevant information.





## Jennifer Gabet Board Report

### Activity Summary for December 2014 - January 2015

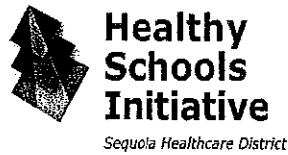
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#### *, Grants Program, Sub-contracts, and Other Highlights:*

- Completed PE+ school contribution budget plan and provided it to the Assistant Superintendent of Redwood City School District for presentation to principals in January. Worked with PE partners on summer program proposals due in January.
- Worked with PE+ Coordinators on refining of measurable goals and objectives for reporting purposes and drafting of the end-of-year student survey. Continued to meet with lead team on a regular basis.
- Observed the PE+ Mid-Year Training Day on January 5th with guest speaker, Aaron Locks, National Academy of Athletics President, who was well-received. The PE+ skills training session incorporated more hands-on teaching practice.
- Collaborated with Dairy Council who trained PE+ coaches from 5 schools on January 15th on the Dairy Council curriculum in order to pilot use of lessons and workbooks on rainy days and to send information home to parents. Workbooks are free to students and come in English and Spanish. The Dairy Council is the adopted classroom nutrition curriculum for Redwood City School District.
- Co-facilitated two grants information sessions with Pamela. About 44 people attended the 2 sessions.
- Met with Adelante principal, PTA president, parent volunteer grant writer, and garden teacher to discuss school garden proposal and PE program. Representatives from PE+ Parks, Recreation, and Community Services also attended.
- Reviewed Mid-term reports from grantees, sub-contractors, and PE+ partners. Trained under Pamela for the Healthy Schools Initiative grants and sub-contracts. Followed up with organizations.
  - Site visits: Siena Youth Center, CAT/ACS at Woodside, Footsteps Afterschool PE, Redwood City 2020 Safe Routes to School, Collective Roots, Mary Meta Lazarus Child Development Center.
- Visited PE+ PRCS sites to view and assess dance competition and curriculum changes. Facilitated dance curriculum changes in PE+ with PCC Coordinator.
- Coordinated water bottle ordering and education piece with Gwen and Pamela for school districts to promote Drink Water First Initiative and the Healthy Schools Initiative.
- Continue to coordinate PE+ data collection and analysis between partners.
- Participated in the San Mateo County School Wellness Alliance meetings, Redwood City School District Wellness Committee, San Carlos School District Wellness Meeting, Healthy Schools Initiative Wellness Coordinator Meeting. Attend BANPAC meeting 1/28/15.





## HSI Grants, School District Sub-contracts, PE+ Partnership Project Mid-Year Report 2014-15

Now in its fifth year, the Healthy Schools Initiative continues to partner with non-profit and government organizations through the HSI Grants Program (5th year), School District Sub-contractor Process (2nd year), and PE+ Partnership Project (3rd year), to provide key services within SHD area schools, reaching students pre-K through grade 12, families, and teachers/staff in the priority areas of mental health, physical activity, nutrition, and other health education topics. This report highlights funding status and tracking information for the three programs. Summary of financial information and participants is provided on the back page (p. 5).

### Funding Status

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#### Funding Totals

1. Grants: 12 grants total \$237,000, representing a decrease from last year. Three grants became sub-contracts this year: Acknowledge Alliance-Transition, Health Connected-Teen Talk, and CSM Consulting-Parent Education Series.
2. Sub-contracts: 8 sub-contracts total \$388,200.
3. PE+: 2 partners total \$650,313.

#### Priority Areas

- Mental health continues to be the priority area in grants and sub-contracts with the most number of agencies funded (6 of 12 in grants and 4 of 8 in sub-contracts) and the highest percentage of dollars (72% of grants and 50% of sub-contracts). This is partly due to PE funding because PE+ is the largest program of HSI. Additional school district funding for counseling and PE programs is not reflected in this report. Mental health and PE will likely continue to be priority funding areas.

#### Funding Partnerships: HSI's goal is to partner with others in funding programs.

1. Grants: 10 of 12 grants receive funding from sources in addition to HSI grants. For 2 grants, HSI provides 100% of the funding; one is new this year.
2. Sub-contracts: 5 of 8 sub-contracts are cost-shared with the school districts.

3. PE+: SHD is now providing 78% of the funding for PE+. Both the schools and the City of Redwood City provided funds this year. For this next year, PE+ is seeking higher school contributions to raise salaries as a way to improve recruitment and retention of coaches. Summer employment opportunities are also being discussed. The high staffing model is proving to be a challenge with the budget. A lower staffing ratio was proposed but was turned down by the school district.

## Audiences Reached

1. Grants: 3 serve pre-K; 4 serve afterschool; 4 serve K-8; 4 serve high school; 2 serve special needs.
  - These grantees target diverse audiences with unmet needs.
  - Further clarification of the target audiences will be determined in the future.
2. Sub-contracts: 4 serve SUHSD; 2 serve K-8 in BRSSD; 1 serves K-8 in RCSD; 1 serves K-8 in SCSD/afterschool.
3. PE+: 2 partners serve K-5 in RCSD.

## Organizations

- Multiple Projects: Some providers have multiple contracts, as below, while some delineate multiple interventions within their grants, e.g., Safe Routes to School.
  - Star Vista: 3 sub-contracts and 2 grants; Footsteps: 1 sub-contract and 1 grant.
- Multiple Providers of Services:
  - Four organizations (PCC, PRCS, Legarza, and Footsteps) provide PE to the school districts; Siena Youth Center provides PE to the private school of the St. Francis Center but it is not included in the grant this year.
  - Four organizations: Star Vista, Adolescent Counseling Services in partnership with CAT, and Acknowledge Alliance provide counseling services in the schools, but the latter is a specialized program. The part-time counselor position for Charter may belong in a school district budget rather than a grant in the future.

## Tracking

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### Numbers Reached

1. Grants: 2,849 participants have been reached to date out of 12,687 proposed. Nine of 12 grantees are on track for target outreach.
  - The very high target numbers for event participation for Safe Routes to School may be unattainable and are skewing the proposed figures. HorseBuddies has a strong plan to reach their target numbers. Collective Roots will not receive the second payment due to inadequate progress and financial difficulties.

2. Sub-contracts: 9,244 participants. Sub-contractors are making excellent progress on their goals, although Star Vista @ M-A had to provide more crisis response than expected and Star Vista @ RCSD had to negotiate for a change of counseling plans at one school.
3. PE+: 5,107 participants. PE+ is on track with current programs and is looking to recruit new sites in Redwood City, pending budget negotiations.

## **Student/Parent Changes**

- As of the mid-term report, most of the organizations reported on their objectives, evaluation methods, and some preliminary data, but not significant outcomes. Those will be provided in the final reports.
1. Physical fitness:
    - PE+ entered its second year of pre-post physical fitness testing for grades 1-5. Pre-test data will be available on-line and post-test data will be done at the end of the year. Considerable work still needs to be done, however, for significant numbers of children who do not have adequate levels of fitness, especially following summer break when fitness levels drop. Negotiation between leadership at schools, school district, and SHD on fitness approaches may help. Afterschool sports participation did not increase after introduction of PE+ which shows how important it is to have PE during the school day.
    - All the PE programs need to implement and, at the same time, streamline evaluation. PE programs see a large number of participants so data volume is high. The Wellness Coordinators and PE+ have begun to share fitness data methods. However, data management increases program costs unless volunteer help can be found.
  2. Social-emotional indicators
    - All the non-profit counseling programs use a pre-test/post-test format for their individual and group counseling programs and will hopefully have those outcomes available by the final report. Star Vista has a new reporting system in place this year.
    - The part-time staff person at Charter will likely need assistance for improved evaluation, but this should be coordinated with other individual counselors in the school districts.
    - Only one subcontractor, Acknowledge Alliance, works with an outside evaluator and includes funding for that position in the contract. However, a large quantity of data is collected and managed in that case.
    - New grantees, HorseBuddies and QuietTime, have evaluation methods in place to report social-emotional changes.

3. Nutrition knowledge, intention, communication, select behaviors

- The HSI grants program and subcontractors do not have many nutrition programs other than embedded nutrition messaging in PE, which can only be supportive to other nutrition efforts on school campuses in order to show positive changes.
- The nutrition survey that was conducted in PE+ last year was suspended this year due to data management issues. Currently, PE+ is looking at other evaluation options such as a year-end survey. Nutrition evaluation can be challenging especially with prevention efforts in children.
- The Mary Meta Lazarus Child Development Center conducts evaluation of knowledge changes in the children. Food service changes are noted, but consumption of foods has not been tracked. Suggested piloting evaluation of behavior changes this spring.

4. Sexual health knowledge, intention, communication

- Health Connected-Teen Talk has a strong evaluation design for their sexual health program using pro-bono assistance from the Palo Alto Medical Foundation and a volunteer evaluation consultant.

5. Other: walking/biking to school; distracted driving; alcohol, tobacco, and other drugs; youth development/leadership

- These outcome areas do not have strong evaluation and need more assistance with defining measurable objectives, establishing baseline data, and/or using needs assessments to help define interventions.
- The health needs assessment for Sequoia High School was completed by the Youth Development Initiative this fall.
- New grantees will attend evaluation workshops by ASR.

## **Student/Parent – Staff – Partner Satisfaction**

1. Grants: Recommend satisfaction surveys for those not already completing them.
2. Sub-contracts:
  - All wellness coordinators are satisfied with the current subcontractors.
  - It is not clear if other satisfaction surveys are collected from the sub-contractors. Recommend implementing satisfaction surveys for participants and school personnel to complete if not already being done.
  - CSM Consulting has strong satisfaction data to report on the Parent Education Series.
3. PE+: The PE+ program instituted a teacher/principal satisfaction survey last year and plans to implement it at the end of this year. A student satisfaction survey is being designed and planned for the end of this year.

# HeartSafe Program

## Activity Summary for December 2014 and January 2015

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### HeartSafe Region Task Force Meetings

Attend and participate in regional planning and support

### AED / CPR Trainings

- Redwood City School District Child Nutrition Services (two sessions)
- Sacred Heart High School Parents

### AED / CPR Scheduled Trainings

- Belmont/Redwood Shores yard duty personnel
- Nesbitt Elementary School staff
- Central Elementary School staff
- Belmont/Redwood Shores Little League coaches and parents
- Community classes first Saturday and Tuesday of every month
- Carlmont High School Freshman Class
- Sequoia High School Freshman Class
- Sequoia High School Health fare
- Redwood High School Health fare
- Woodside High School Health fare
- San Francisco Bay Area Sidewalk CPR Training Days

### Classroom Update

We have held our first CPR/AED/Choking classes in the new classroom and everything went especially well! The room was comfortable and all of the audio/video components worked flawlessly.

### Cardiac Screening Update

The March 22<sup>nd</sup> cardiac screening event at Sequoia High School is almost here! In cooperation with the Sequoia High School District, students from all the District's schools will be invited to receive a free EKG screening, blood pressure check and CPR training. Many of those students will also receive an echocardiogram if their family history or the EKG results suggests so. Volunteers for that day can sign up now at <http://www.theviafoundation.org/volunteer-sequoia/>

## Photographs



New Classroom



New Classroom

Sacred Heart Parents

## Conference Attendance Form

Staff member: G. Nielsen

Conference attended: Parent Heartwatch Annual Conference

Location: Scottsdale, AZ

Dates: Jan 16<sup>th</sup> to the 18<sup>th</sup> 2015

Summary of your participation:

- 1) Full day heart screening event at local junior college. Event set up and scribe for Echo Tech.
- 2) Attended scheduled classes and related events

How did attending conference benefit you?

- 1) Gained further experience running a large-scale heart screening.
- 2) Continuing education re Cardiac Arrest
- 3) Presentations and discussions regarding AED and CPR programs

Conference attendance approved by: CEO

January, 2015

**Sequoia Health Care District**

January 27, 2015 Update

San Mateo County Children's Health Initiative

The San Mateo County Children's Health Initiative (CHI) continues to work to assure that every child in San Mateo County has health insurance. A November 2014 assessment by the respected statewide research and advocacy firm, Children Now, found that San Mateo County ranks **#1** among all 58 counties in the State for the percentage of children enrolled in health insurance all year – **97%**.

SHCD was instrumental in CHI's founding and has been a sustaining, core funder since the initiative began in 2003. CHI leverages other funding for children age 0-5 (First5 of San Mateo County) and children who live in other parts of the County (Peninsula Health Care District, San Mateo County), and County funding supports some of the costs of children from SHCD.

Key milestones for this current year include:

- Completed all training, policy change and information system milestones related to Affordable Care Act implementation.
  - Redwood City School District and Ravenswood Family Health Center remain important contracted partners, who leverage their role and trust with our target population to assist children and their families obtain health insurance.
  - We competed and were awarded a grant to serve as a "Navigator" for Covered California, coordinating outreach and enrollment assistance to consumers during this second Affordable Care Act open enrollment.
- Continued to achieve increased enrollment of children in public coverage. Medi-Cal and Covered CA coverage is pursued first, with our local Healthy Kids program as an option for those who do not qualify for other programs.
- HK enrollment in 2014 ranged from 3,463 to 3,816.
- Of the total HK population, the kids living in the SHCD geographic area represent 33% (1,141 kids in December 2014).
- SHCD's requested investment in our effort represents 20% of our total budget
- We have earned continued funding from San Mateo County, Peninsula Health Care District, First5 of San Mateo County, and Lucile Packard Children's Hospital.

In February, 2014, we requested that you consider a 3-year grant at \$1.35 million/ year. You generously awarded us \$1.35 million for 2014 and asked that we update you at least annually on our progress and results. Based on our enrollment and funding, we respectfully request a second year investment of \$1.2 million to sustain our results over the next twelve months. We look forward to presenting an update at your February 4<sup>th</sup> meeting.



**Children's Health Initiative**  
 Enrollment by zip code and age, SHCD  
 January 26, 2015



April, 2014

	0-5	Ages 6-18
94404	1	83
94065	0	4
94063	27	657
94002	0	15
94070	1	13
94019	5	120
94062	0	22
94028	0	0
94025	13	137
94027	0	1
94061	8	292
	55	1344

January, 2015

	0-5	ages 6-18
94404	1	12
94065	0	3
94063	26	565
94002	4	17
94070	1	6
94019	4	81
94062	0	22
94028	0	0
94025	17	123
94027	0	1
94061	7	251
	60	1081

Other core funders' commitments to CHI for the coming year:

- San Mateo County: \$2,430,000
- Peninsula Health Care District: \$1,050,000
- First5 of San Mateo County: \$298,453
- Lucile Packard Children's Hospital: \$50,000

SHD Caring Community Grants 2014 – 2015  
**MID-YEAR REPORT REVIEW NARRATIVE**

Agenda Item 5.b  
Board of Directors Mtg. 2-4-15

Pamela Kurtzman  
Jan 28, 2015

## **I. Overview:**

As the Caring Community Grants Program is rooted in the District's mission and vision, the funding priorities of the grants program align with the community health outcomes the District seeks to achieve as defined in our 2014 strategic plan. Each grant falls within one or more of the three priority areas below:

Priority funding areas this year continue to be:

1. Active and Healthy Living
2. Preventive Health
3. Treatment of Priority Health Conditions

- **Active and Healthy Living-** strategic focus is to enhance the overall health of District residents and reduce chronic disease risk by supporting programs that provide opportunities for physical activity, nutrition education and health literacy, and access to nutritious foods
- **Treatment of Priority Health Conditions-** strategic focus is to prevent the onset of disease or worsening of chronic diseases amongst District residents by providing access to disease screenings, health education and access to preventive health care services
- **Preventive Health-** strategic focus is to prevent the onset of disease or worsening of chronic diseases amongst District residents by providing access to disease screenings, health education and access to preventive health care services

Funding priorities were determined by assessing our demographic data (who are our residents), Key drivers data (where are the areas of greatest need) health outcomes data (major health issues faced by our residents), and examining the determinants of health (what is causing the identified health issue).

### **Drivers of Health:**

- Environment: (physical , policy, economic, social/ culture)
- Access and Delivery: (preventive care, early intervention)
- Behavior: Health promoting behaviors (healthy eating, proper exercise vs. risky behaviors (alcohol and drug abuse, tobacco use, violence)
- Biology: (gender and age)

In addressing health issues, we recognize that a wide variety of strategies are proposed. We seek to fund programs that support our goals and our distinct selection criteria help us choose the most promising programs. Strong programs address one or more of the above priority health issues and several key health indicators listed in the attached grants summary results matrix, serve our most vulnerable and underserved community members, and have well defined and measurable goals.

## **II. Grants Review Process:**

### **Assessment:**

Just as in business, our bottom line counts too. However, each grantee we fund measures the bottom line differently. Businesses can look to revenue, income, sales, earnings per share, and other quantitative indicators to measure performance. Unfortunately, we don't often have such clear-cut indicators of impact.

SHD Caring Community Grants 2014 – 2015  
**MID-YEAR REPORT REVIEW NARRATIVE**

Sometimes non-profits find it difficult to quantify the objective they wish to achieve or whether the achievements were a result of their program or other forces. Nevertheless, attempts are made at every angle to assess grantee performance toward their proposed goals. Questions asked in the application are carried through to both reports to evaluate progress on:

- Target
- Reach
  - Numbers proposed vs number served at mid-term
  - Units proposed vs units served
- Strategies
- Outcomes (based on strategies)
- Evaluation
  - Measure (what measured)
  - Analysis
- Financial accountability

Below are the steps taken in assessing mid-year progress and subsequent grant funding:

1. Grantee fills -out report form and submits to Pamela.
2. Pamela reviews and forwards to Lee for review and comments.
3. Pamela contacts grantee if there are questions or concerns that need additional explanation.
4. Pamela decides if grantee has met sufficient expectations to warrant second half payment.
5. Pamela authorizes payment and requests check from Janeene.
6. Lee signs checks up to \$25,000. If more than \$25,000 Lee and Board member co-signs.

***Reporting Outcomes:***

For this report, I wanted to understand the impact of clusters of programs that focus on a particular goal or set of goals. Rather than just asking whether a specific grant program was effective, I began looking at groups of grants that were meant to affect a specific health problem and assessing whether the grants as a group were effective in addressing it. You will see in the attached pages that I grouped by strategic focus of priority area, then by service type. Physical activity could have been placed under Active and Healthy living, however, I placed fitness programs under preventive health instead because the programs we support are rooted in addressing the majority of indicators for disease prevention.

Our giving mainly supports programs that provide direct services such as feeding the hungry or supporting free medical care for the uninsured— the links between these social contributions and our funding are generally considered self-evident. At this mid-year review, the impact of these programs are measured by the number of people served, units of service provided, and if the program appears on target for meeting its intended outcomes.

***Mid-Term Outcomes Summary:***

- Total amount funded for grant year = \$1,350,000
- 32 Programs
  - Food security- \$322,000
    - At a cost of \$120,000, SHD help provide 7,246 residents with over 32,000 hot meals and nearly 470,000 pounds of food through these programs.
  - Drug and Alcohol-\$160,000
    - Just over \$73,000 has been used to help our nearly 750 youth and adults recover from drug and alcohol abuse by providing a total of almost 23,000 program service units

SHD Caring Community Grants 2014 – 2015  
**MID-YEAR REPORT REVIEW NARRATIVE**

- Mental Health (includes social, emotional, behavioral)- \$475,000
  - More than \$230,000 of our \$475,000 commitment to treat mental health issues or to provide social/ emotional support has been used to date. Close to 1,000 youth and adults benefitted from these programs so far and collectively have received over 30,000 service units.
  - Our total investment this year in the area of Treatment of Priority Health Conditions is \$635,000 and is mainly used to support mental and behavioral health and drug and alcohol treatment programs. Funds are also used for mentoring and child advocacy programs.
  - At mid-term, \$313,116 of funds have been used to support drug, alcohol, and mental health programs for 53,426 youth and adult residents.
- Physical Activity and Safety- \$393,000
  - Many programs we support through the grants program are a combination of prevention and treatment and we recognize that health concerns are addressed through many different approaches.
  - I recognize that safety programs are very distinct from exercise programs, but I grouped them together, mainly out of convenience. Both are certainly preventive health programs.
  - This grants cycle SHD committed \$373,000 to support fitness programs and \$20,000 to provide critical repairs and safety apparatus to assure people are safe in their homes.
  - Over 1,800 residents of all ages have participated in fitness and health education programs during the first half of the current grants cycle. Collectively, these programs have provided nearly 170,000 service units.

I did not calculate cost per client or cost per unit at this time, but will at final reporting

***Key Questions to address and final reporting:***

1. What are we learning from these grants?
2. How can we be sure that our grants are really making a difference in improving health or health care?



## Caring Community Grants 2014 Mid- Year Status

On Target- Meeting Expectations	Organization	Program	Comments
	Peninsula Volunteers	Meals on Wheels	
	St. Anthony's	Feeding the Need	
	Second Harvest	Family Harvest	
	Second Harvest	Produce Mobile and Senior Brown Bag	
	El Centro de Libertad	Youth Intervention Program	
	El Centro de Libertad	Adult Outpatient Treatment	
	Service League Hope House	Healthy Women and Infants	
	Adolescent Counseling Services	After-School Counseling Program	
	Adolescent Counseling Services	Outlet Program	
	CASA	Core Services	Borderline whether it's healthcare. Does support social/ emotional health. A much need program
	Inn Vision Shelter Network	Family Wellness Program	
	Sequoia YMCA	Enhance Program	
	Peninsula Family Service	Senior Peer Counseling	
	Star Vista	Daybreak	
	Advocates for Accessible Recreation (AFAR)	RCPRCS- Special Needs Afternoon Program (SNAP)	
	Boys and Girls Club	Triple Play	



	Edgewood Center	Healthy Kin	
	Friends of Veterans Memorial Senior Center	Adaptive Physical Education Program	
	Peninsula Family Service	Wellness Program for Seniors at Fair Oaks	
	Peninsula Volunteers	Rosener House	
	CORA	Family-Centered Mental Health	In good standing, but they note that their program is severely impacted with more complicated cases.
<b>Proceed with Caution</b>	Friends for Youth	WHY Mentoring?	No question vulnerable youth benefit from a consistent trusting adult. Not clear though if they are really providing the health components to the extent they proposed
	Caminar	Bridges to Wellness	Outcomes not clear. Not certain making any significant difference
	Mental Health Association	Public Health and Wellness	Numbers are way down from proposed. Explanation not clear. Keeping a close eye on 2nd half of year
	Latino Commission	Casa Aztlan	Reach is way below expected, expensive staff rather than use of interns- just cautious
	Rebuilding Together	Safe at Home	Surprised they have such limited funding. Have to compromise their goals due to funding
	Sheriff's Activity League	SAL Academicos and Healthy Kids	Program offered in San Carlos and Menlo Park where there is not the greatest need. We are a small part of their funding, but want to assure SHD resources are used where most needed.
<b>Concerned</b>	Casa de Redwood	Better Living for Seniors	Numbers are way below proposed, but just getting started. Watching.
	Our Common Ground	Our Common Ground	First Year funding. Poorly written interim report. Numbers much lower than proposed. Not serving significant number of SHD residents
	Adapt Foundation	Friends and Family Adult and Youth	After 5 years of operation, has still not been able to find additional funding. Probably still a valued service to those who participate but sustainability and growth continue to be concerns.
	St. Francis	Community Garden	Have not gotten permits to build. Waiting...