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A G E N D A
SEQUOIA HEALTHCARE DISTRICT
BOARD OF DIRECTORS MEETING
4:30, Wednesday, June 15, 2017
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 Kane
 - a. Approve April 5, 2017 Regular Meeting Minutes
 - b. Approve May 15, 2017 Special Meeting Minutes
 - c. Accept March, April and May 2017 Financial Statements
- ACTION 4. New Business
 - a. Consider Grant Request From Ravenswood Family Health Center For Three Years (July 1, 2017-June 30, 2020) Totaling \$2.7 Million -- Ms. Luisa Bauda
 - ACTION b. Consider Request To Approve The School Health Initiative Grants and Budget For 2017-18 Up To \$3,991,335 - Ms. Kurtzman
 - ACTION c. Consider Adoption of New Board Policy 19.5 Regarding Board Use of Email Address - Mr. Hudak
 - ACTION d. Consider Adoption Of 2017-2020 Strategic Plan - Mr. Michelson
 - ACTION e. Consider Adoption Of Proposed Budget For Fiscal Year Ending June 30, 2018 - Mr. Michelson
 - f. Discussion: Employee Benefits - President Kane
 - ACTION g. Director Requests For Future Agenda Items Per Board Policy 8.3 - President Kane
5. CEO/Staff Reports
 - a. CEO Report - Mr. Michelson
 - b. Healthy Schools - Ms. Kurtzman
 - c. HeartSafe - Mr. Nielsen
- ACTION 6. Adjourn to Closed Session For The Purposes Of:
 - a. CONFERENCE WITH LEGAL COUNSEL - ANTICIPATED LITIGATION
Consideration of initiation of litigation pursuant to Government Code Section 54956.9(d)(4) - One potential case
- ACTION 7. Reconvene To Open Session: Announce Any Reportable Actions Taken In Closed Session

Continued

**MINUTES OF REGULAR MEETING
BOARD OF DIRECTORS
SEQUOIA HEALTHCARE DISTRICT
April 5, 2017
Conference Room, 525 Veterans Boulevard
Redwood City, CA 94063**

Directors Present

Director Griffin
Director Hickey
Director Kane
Director Shefren

Directors Absent

Director Faro

Also Present

Mr. Michelson, CEO
Mr. Hudak, Legal Counsel
Ms. Johnson, Recorder

1. Call to Order

By: President Kane
Time: 4:30pm

2. Public Comment/Non-Agenda Items

President Kane asked if there was any public comment on non-agenda items. There was none.

3.a. - 3.b. Consent Calendar

Motion: To approve the Consent Calendar.

By: Director Shefren

Seconded by: Director Griffin

Vote: 3-0-0-1

Motion Passed

4.a. Update From The San Mateo County Fall Prevention Task Force

Ms. Patrice Christensen reported on the coalition's efforts to prevent falls among older adults living in San Mateo County. The coalition's 60 members include all hospitals serving county residents, the county health system, community-based service organizations and for-profit companies serving older adults. Ms. Christensen was pleased to report that unintentional falls among adults 65+ has been steadily declining.

Ms. Christensen, Ms. Violet and Ms. Serafin-Dixon presented the Board with a Certificate of Recognition as thanks for the District's continued support.

**4.b. Mission Hospice Grant Request For \$300,000 To Support
The Woodside Mission House**

Mr. Dwight Wilson shared with the Board that Mission Hospice has purchased a residential care facility to serve as a second Hospice House in San Mateo County. The demand for care is currently exceeding the capacity of the Mission House in San Mateo. That facility had been projected to run at a negative financial performance but is now at break-even. The new Woodside Mission House would mostly serve individuals from the southern part of the county and more from within District boundaries. Drs. Weller and Pasternak, Lisa Deal and Cindy Gill all spoke to the importance of the District's past financial support and joined Mr. Wilson in asking the Board to consider their request for a one time capital improvement grant of \$300,000 for Woodside Mission House.

Motion: In order to consider more available funding options, to postpone consideration of this request until the special meeting in May.

By: Director Hickey

Seconded by: Director Shefren

Vote: 3-1-0-1 with President Kane opposed.

Motion Passed

**4.c. Consider Grant Request From The Magical Bridge Foundation For
An Additional \$200,000**

Ms. Jill Asher reported that in working with the city of Redwood City and local groups, they have secured approximately \$3.4 million of the estimated \$3.6 million project costs and asked the Board to consider an additional contribution of \$200,000 to help conclude fund raising so that construction can begin in October 2017.

Motion: To approve an additional \$200,000 grant request to the Magical Bridge Foundation.

By: President Kane

Seconded by: Director Griffin

Vote: 2-2-0-1 with Directors Hickey and Shefren opposed.

Motion Failed

Motion: To approve a matching grant of up to \$100,000 to the Magical Bridge Foundation.

By: Director Shefren

Seconded by: President Kane

Director Hickey asked that the maker of the motion consider amending it to stipulate that the match come from San Mateo County. Director Shefren, the maker of the motion, declined the amendment.

Call for the question.

Vote: 3-1-0-1 with Director Hickey opposed.

Motion Passed

**4.d. Consider Setting A Special Meeting For May 16, 2017 And Rescheduling The
Regular Meeting From June 7 to June 15, 2017.**

Mr. Michelson explained that the Special Meeting will include grant recommendations, school nurses, the strategic plan and the Hospice House request. The June meeting will consider the annual budget and Mr. Michelson would like to have all Directors in attendance.

Motion: To hold a special board meeting on May 16 at 3:00 PM and to reschedule the June 7 meeting to June 15 at 4:30 PM.

By: Director Shefren

Seconded by: Director Griffin

Vote: 3-1-0-1 with Director Hickey opposed.

Motion Passed

4.e. Director Requests for Future Agenda Items

President Kane asked if any Director had an agenda item request. There were none.

5.a. CEO Report

Mr. Michelson reported that the Meals-On-Wheels program has a waiting list and he will be checking with local food supporters to see if other non-profits can help fill the gap.

Mr. Michelson and Director Kane attended the ACHD Legislative Days and the Board was provided with a handout of current legislation.

CDA Cares, of which Mr. Michelson is fundraising chair, has exceeded its goal for the event later this month.

5.b. Community Grants & Healthy Schools Report

Ms. Kurtzman reported that 54 grant applications have been received and 47 will be recommended to the Board for funding.

Ms. Kurtzman and Director Griffin continue their work on the School Nursing Improvement Plan. Pamela presented a draft of the Executive Summary adding that the completed proposal will be presented in May and a budget request for up to \$300,000 will be presented June.

5.c. HeartSafe Report

Mr. Michelson noted that Mr. Nielsen was teaching a CPR class and not currently available to attend this meeting.

In response to comments from Directors Hickey and Shefren, Mr. Michelson will have Mr. Nielsen provide the Board with an AED monitoring report and also a budget breakout as to the per-person cost of CPR/AED training.

6. Adjourn to Closed Session

Adjourn to Closed Session For The Purpose Of Conference with Legal Counsel Under Government Code Sections 54957 and 54957.6. for the purposes of Public Employee Performance Evaluation.

7. Reconvene to Open Session

Reconvene to Open Session. There was no reportable action taken in closed session.

8. Adjourn

Motion: At 6:45 PM adjourn meeting.

By: President Kane

Seconded by: Director Griffin

All in favor

Motion Passed

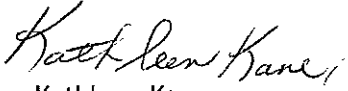

A Special Meeting of the Board is scheduled for 3:00 PM, Tuesday, May 16, 2017 to review the Community Grants, School Nurse Shortage, the Strategic Plan and other topics.

The next regular meeting of the Board of Directors of Sequoia Healthcare District is scheduled for 4:30 PM, Thursday, June 15, 2017, District Conference Room, 525 Veterans Blvd., Redwood City, CA.

Respectfully Submitted,

Jerry Shefren
Secretary

ACTION 8. Adjourn.
The Next Regular Meeting Of The Board Of Directors Of Sequoia
Healthcare District Is Scheduled For 4:30 PM, Wednesday, August 2, 2017,
District Conference Room, 525 Veterans Blvd., Redwood City, CA 94063


Kathleen Kane
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.

**MINUTES OF SPECIAL MEETING
BOARD OF DIRECTORS
SEQUOIA HEALTHCARE DISTRICT
May 16, 2017
Conference Room, 525 Veterans Boulevard
Redwood City, CA 94063**

Directors Present

Director Faro
Director Griffin
Director Hickey (arrived at
4:15pm)
Director Kane
Director Shefren

Directors Absent

Also Present

Mr. Michelson, CEO
Mr. Hudak, Legal Counsel
Ms. Stamper, Recorder

1. Call to Order

By: President Kane
Time: 3:00 PM

2. Public Comment/Non-Agenda Items

President Kane asked if there was any public comment on non-agenda items. There was none.

**3.b. Community Grants Program: Approve Programs Recommended
For Funding 2017/2018**

Ms. Kurtzman presented information and recommendations on funding for Community Grants for 2017/2018. The members of the Grants Committee reviewed 54 letters of intent. The majority of funding for this round of grants is for preventive health services to District residents. The Committee is requesting funding for 42 agencies totaling \$2,063,500. Thirty-six of the agencies are renewals and 6 are new grantees.

Public comment was taken from several members of the audience representing non-profit organizations. They spoke to the importance of the programs they were able to offer due to the Community Grants Program and thanked the Board for its support.

Mr. Michelson thanked Ms. Kurtzman and the committee for their hard work. Ms. Kurtzman thanked Mr. Michelson for his assistance and support.

Motion: To approve \$2,063,500 to the 42 non-profit agencies recommended by the Grants Review Committee.

By: Director Shefren

Seconded by: Director Griffin

Vote: 4-0

Motion Passed

**3.a. Consider Grant Request From Mission Hospice For \$300,000 to Support The
Woodside Mission House**

Mr. Dwight Wilson provided the additional information requested by the Board regarding financial support for the Woodside Mission House. In addition, Mr. Wilson presented an option for a capital campaign or a charity per diem. Mr. Wilson reported that Stanford Foundation is giving them a grant of \$500,000, and they are seeking funding from 3 additional hospital foundations. Director Shefren discussed guarantees of bed availability for District residents. He stated that he supports a supplement of individual costs, not for capital improvement, with a requirement of reporting to the Board in 6 months and 12 months the number of District residents that were served as well as those denied due to lack of availability.

Motion: To approve a \$300,000 grant for Woodside Mission House to supplement individual costs with a requirement of reporting to the Board in 6 months and 12 months the number of District residents that were served as well as those denied due to lack of availability.

By: Director Shefren

Seconded by: Director Faro

Vote: 4-0

Motion Passed

3.c. Update on the District's Strategic Plan

Mr. Michelson presented the updated draft District Strategic Plan and gave an overview of the development of the draft. Comments were taken from the Board and discussed. Public input was taken. Mr. Michelson will incorporate the suggested changes and will present the revised Strategic Plan at the next meeting for approval.

3.d. Approve the Fourth Amendment To Employment Agreement of The District's Chief Executive Officer

President Kane presented the Fourth Amendment to the Employment Agreement of the District's Chief Executive Officer. Director Shefren and Director Hickey asked for clarification of the current severance package. Mr. Hudak will research and present the current severance package to the Board.

Motion: To approve the Fourth Amendment Mr. Michelson's employment Agreement

By: Director Shefren

Seconded by: Director Faro

Vote: 4-1 with Director Hickey opposed

Motion Passed

4. Adjourn to Closed Session

Adjourned to Closed Session for the purposes of:

- a. CONFERENCE WITH LEGAL COUNSEL - ANTICIPATED LITIGATION
Consideration of initiation of litigation pursuant to Government Code Section 54956.9 (d)(4) - One potential case

5. Reconvene To Open Session

Reconvene to Open Session. There was no reportable action taken in closed session.

6. Adjourn

Motion: At 5:30 PM adjourn meeting.

By: President Kane

Seconded by: Director Faro

Vote: 5-0

Motion Passed

The next regular meeting of the Board of Directors of Sequoia Healthcare District is scheduled for 4:30 PM, Thursday, June 15, 2017, District Conference Room, 525 Veterans Blvd., Redwood City, CA.

Respectfully Submitted,

Jerry Shefren, Secretary

SEQUOIA HEALTHCARE DISTRICT
Balance Sheet
Fiscal Year 2016-17

Agenda Item No. 3.c
Board of Directors Meeting
6/15/17

	July	August	September	October	November	December	January	February	March	April	May	June
ASSETS												
Current Assets												
Cash (WF-MMA)	\$ 4,569,349.91	\$ 3,769,867.54	\$ 2,870,295.36	\$ 2,470,641.32	\$ 2,970,974.71	\$ 7,321,572.07	\$ 6,022,445.28	\$ 5,423,106.25	\$ 4,823,760.20	\$ 7,924,544.81	\$ 7,525,526.49	
Cash (WF)	111,103.00	80,255.84	153,204.84	72,457.51	161,694.24	438,020.76	431,936.80	33,187.98	709,429.75	171,535.38	353,103.00	
Cash from Investments	540,995.70	540,995.70	540,995.70	540,995.70	540,995.70	540,995.70	540,995.70	540,995.70	540,995.70	540,995.70	540,995.70	
Cash Equivalents	9,891,507.51	9,886,061.51	9,892,215.51	9,888,581.51	9,849,917.51	9,855,637.51	9,875,039.51	9,891,275.51	9,898,594.51	9,923,016.51	9,938,268.51	
Total Current Assets	15,112,956.12	14,277,180.59	13,456,711.41	12,972,676.04	13,523,582.16	18,156,226.04	16,870,417.29	15,888,565.44	15,972,780.16	18,560,092.40	18,357,893.70	0.00
Property, Plant & Equipment												
Land	138,927.00	138,927.00	138,927.00	138,927.00	138,927.00	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	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	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30	
Building Improvements	527,129.57	527,129.57	527,129.57	527,129.57	527,129.57	527,129.57	527,129.57	527,129.57	527,129.57	527,129.57	527,129.57	
Tenant Improvements	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	
Improvements-Classroom	83,410.44	83,410.44	83,410.44	83,410.44	83,410.44	83,410.44	83,410.44	83,410.44	83,410.44	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	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	28,259.91	28,259.91	28,259.91	28,259.91	28,259.91	
Accumulated Depreciation	(1,818,319.59)	(1,824,439.34)	(1,830,559.09)	(1,836,678.84)	(1,842,798.59)	(1,848,918.34)	(1,855,038.09)	(1,861,157.84)	(1,867,277.59)	(1,873,397.34)	(1,879,517.09)	
Net Property/Plant/Equipment	636,676.15	630,556.40	624,436.65	618,316.90	612,197.15	606,077.40	599,957.65	593,837.90	587,718.15	581,598.40	575,478.65	0.00
Total Assets	15,749,632.27	14,907,736.99	14,081,148.06	13,590,992.94	14,135,779.31	18,762,303.44	17,470,374.94	16,482,403.34	16,560,498.31	19,141,690.80	18,933,372.35	0.00
LIABILITIES & FUND BALANCE												
Current Liabilities												
Accounts Payable	\$ 3,750.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	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	3,165.00	3,165.00	3,165.00	3,165.00	3,165.00	
Grants Payable	1,957,209.04	1,217,585.87	1,216,906.28	1,216,906.28	1,042,906.28	1,042,906.28	116,906.28	73,906.28	73,906.28	73,906.28	73,906.28	
Total Current Liabilities	1,964,124.04	1,220,750.87	1,220,071.28	1,220,071.28	1,046,071.28	1,046,071.28	120,071.28	77,071.28	77,071.28	77,071.28	77,071.28	0.00
Fund Balances												
Invested in Capital Assets	639,630.00	639,630.00	639,630.00	639,630.00	639,630.00	639,630.00	639,630.00	639,630.00	639,630.00	639,630.00	639,630.00	
Fund Balance	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	14,365,210.07	
Net Surplus/Loss	(1,219,331.84)	(1,317,853.95)	(2,143,763.29)	(2,633,918.41)	(1,915,132.04)	2,711,392.09	2,345,463.59	1,400,491.99	1,478,586.96	4,059,779.45	3,851,461.00	
Total Fund Balance	13,785,508.23	13,686,986.12	12,861,076.78	12,370,921.66	13,089,708.03	17,716,232.16	17,350,303.66	16,405,332.06	16,483,427.03	19,064,619.52	18,856,301.07	0.00
Total Liabilities & Fund Balance	15,749,632.27	14,907,736.99	14,081,148.06	13,590,992.94	14,135,779.31	18,762,303.44	17,470,374.94	16,482,403.34	16,560,498.31	19,141,690.80	18,933,372.35	0.00

SEQUOIA HEALTHCARE DISTRICT
Income Statement
Fiscal Year 2016-17

Agenda Item No.3.c
Board of Directors Meeting
6/15/17

													Variance			
	July	August	September	October	November	December	January	February	March	April	May	June	Year to Date	Budget 16-17	Amount	Percent
INCOME																
Rental Income	3,850.34	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36		43,893.94	48,048.00	(4,154.06)	-8.6%
Tax Revenue	0.00	0.00	25,205.36	6,844.23	1,019,782.42	4,998,673.86	96,269.18	738,579.60	586,106.09	2,891,168.81	346,366.38		10,708,995.93	11,000,000.00	(291,004.07)	-2.6%
Investment Income	4,014.00	(5,446.00)	6,154.00	(3,634.00)	(38,664.00)	5,720.00	19,402.00	16,236.00	7,319.00	24,422.00	15,252.00		50,775.00	150,000.00	(99,225.00)	-66.2%
Interest Income	651.76	521.48	430.60	347.42	336.57	608.42	879.36	666.30	656.12	787.31	984.59		6,869.93	7,700.00	(830.07)	-10.8%
Pension Income	0.00	0.00	0.00	0.00	0.00	3,800,000.00	0.00	0.00	0.00	0.00	0.00		3,800,000.00	3,800,000.00	-	0.0%
Total Income	8,516.10	(920.16)	35,794.32	7,562.01	985,459.35	8,809,006.64	120,554.90	759,486.26	598,085.57	2,920,382.48	366,607.33	0.00	14,610,534.80	15,005,748.00	(395,213.20)	-2.6%
EXPENSES																
Administrative Expenses																
Admin. Expense	511.35	734.70	794.94	561.16	550.01	909.85	855.56	682.55	597.41	471.61	2,002.84		8,671.98	12,000.00	3,328.02	27.7%
Admin. Payroll	20,673.20	18,093.25	17,925.85	17,925.85	17,925.85	32,922.56	19,623.73	19,417.60	19,360.46	19,522.10	19,360.45		222,750.90	240,000.00	17,249.10	7.2%
Board Health Insurance	2,712.88	2,747.99	2,259.29	6,410.16	1,502.88	6,101.53	2,419.92	2,860.47	11,620.50	2,677.11	1,796.93		43,109.66	68,000.00	24,890.34	36.6%
Employee Health Insurance	2,985.70	3,780.17	3,780.17	2,255.03	3,780.17	4,150.61	2,014.73	5,974.47	6,845.95	3,407.08	5,495.43		44,469.51	40,000.00	(4,469.51)	-11.2%
Employee Retirement Benefit	1,509.58	1,376.36	1,376.36	1,376.36	1,376.36	2,356.17	1,583.52	1,406.78	1,406.78	1,406.78	1,406.78		16,581.83	21,000.00	4,418.17	21.0%
Investment Fees	0.00	0.00	0.00	7,071.55	3,750.00	0.00	7,070.89	3,750.00	0.00	0.00	10,802.85		32,445.29	46,000.00	13,554.71	29.5%
Office Supplies/Equip Maint	1,144.19	47.53	241.17	290.68	964.09	205.87	779.95	376.19	258.72	903.24	2,077.56		7,289.19	11,000.00	3,710.81	33.7%
Accounting fees	0.00	0.00	15,000.00	0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	0.00		18,000.00	21,000.00	3,000.00	14.3%
Board Expense	0.00	0.00	50.60	30.14	0.00	315.92	0.00	80.29	375.00	487.55	61.55		1,401.05	6,500.00	5,098.95	78.4%
Associations/Membership	7,500.00	0.00	10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	325.00	0.00		17,825.00	18,000.00	175.00	1.0%
Communications	0.00	475.00	0.00	25,040.63	587.28	275.99	240.35	0.00	0.00	0.00	1,056.80		27,676.05	30,000.00	2,323.95	7.7%
Web Site/IT	1,700.00	3,145.00	4,186.54	4,873.83	4,701.50	12,353.00	4,044.00	4,305.00	7,267.70	5,239.31	4,834.00		56,649.88	66,000.00	9,350.12	14.2%
Pension Plan Expense	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00			
Gen'l Liability & D/O Insurance	29,191.04	(1,000.00)	0.00	(197.00)	0.00	(1,000.00)	(88.57)	(895.00)	0.00	0.00	(1,000.00)		25,010.47	29,000.00	3,989.53	13.8%
Election Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	261,297.52	0.00	0.00		261,297.52	150,000.00	(111,297.52)	-74.2%
LAFCO fees	0.00	0.00	0.00	5,783.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		5,783.00	8,500.00	2,717.00	32.0%
Legal Fees	0.00	0.00	9,066.00	0.00	4,470.00	1,485.00	2,250.00	1,440.00	1,035.00	2,295.00	4,320.00		26,361.00	25,000.00	(1,361.00)	-5.4%
Bank Fees	0.00	0.00	0.00	0.00	0.00	30.00	0.00	0.00	0.00	0.00	0.00		30.00	100.00	70.00	70.0%
Total Admin. Expenses	67,927.94	29,400.00	64,680.92	71,421.39	39,608.14	63,106.50	40,794.08	39,398.35	310,065.04	36,734.78	52,215.19	0.00	815,352.33	792,100.00	(23,252.33)	-2.9%
Pension Plan Expense	0.00	0.00	0.00	0.00	0.00	3,800,000.00	0.00	0.00	0.00	0.00	0.00	0.00	3,800,000.00	3,800,000.00	0.00	0.0%
Total Admin. With Pension Plan	67,927.94	29,400.00	64,680.92	71,421.39	39,608.14	3,863,106.50	40,794.08	39,398.35	310,065.04	36,734.78	52,215.19	0.00	4,615,352.33	4,592,100.00	(23,252.33)	-0.5%
Property Expenses																
Maintenance	1,165.00	944.46	1,486.80	1,780.00	1,157.00	1,629.46	1,449.88	1,292.81	3,061.33	2,916.88	1,290.00		18,173.62	22,500.00	4,326.38	19.2%
Utilities	1,269.07	2,493.86	3,137.65	2,443.19	2,239.46	1,672.04	2,501.42	2,123.30	2,448.49	2,241.81	2,216.50		24,786.79	30,000.00	5,213.21	17.4%
Property Insurance	1,573.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		1,573.72	2,000.00	426.28	21.3%
Depreciation	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75		67,317.25	73,000.00	5,682.75	7.8%
Total Property Expenses	10,127.54	9,558.07	10,744.20	10,342.94	9,516.21	9,421.25	10,071.05	9,535.86	11,629.57	11,278.44	9,626.25	0.00	111,851.38	127,500.00	15,648.62	12.3%

SEQUOIA HEALTHCARE DISTRICT
Income Statement
Fiscal Year 2016-17

Agenda Item No.3.c
Board of Directors Meeting
6/15/17

	July	August	September	October	November	December	January	February	March	April	May	June	Year to Date	Budget 16-17	Variance	
															Amount	Percent
Grant Expenses																
Grant Admin Expenses	501.40	165.92	832.52	18,022.39	572.23	297.38	1,523.68	714.44	3,435.15	397.59	1,069.44		27,532.14	45,000.00	17,467.86	38.8%
Grant Admin Payroll	7,049.07	6,116.62	6,074.76	6,074.77	6,074.62	10,335.10	6,509.76	6,419.57	6,419.56	6,419.56	6,419.56		73,912.95	80,000.00	6,087.05	7.6%
SFSU Nursing Program	0.00	0.00	627,054.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		627,054.00	613,000.00	(14,054.00)	-2.3%
Samaritan House Grant	170,644.00	0.00	0.00	170,644.23	0.00	0.00	170,644.23	0.00	0.00	0.00	56,881.42		568,813.88	683,000.00	114,186.12	16.7%
Other Grants	3,000.00	10,000.00	320.00	8,500.00	0.00	1,633.50	3,769.87	0.00	9,379.38	8,456.30	11,397.84		56,456.89	90,000.00	33,543.11	37.3%
San Mateo Medical Ctr. So County	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,053.50	0.00	0.00		138,053.50	537,000.00	398,946.50	74.3%
Ravenswood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	350,000.00	0.00	0.00	0.00		350,000.00	700,000.00	350,000.00	50.0%
Community Grants Program	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	2,100,000.00	2,100,000.00	100.0%
Mission Hospice	500,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		500,000.00	500,000.00	0.00	0.0%
PFS-Sequoia 70	100,000.00	0.00	0.00	178,381.50	2,336.25	0.00	0.00	191,533.19	0.00	0.00	187,433.18		659,684.12	813,000.00	153,315.88	18.9%
Oral Health Coalition	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50,000.00	0.00	0.00	0.00		50,000.00	50,000.00	0.00	0.0%
2016-17 New Grants & Programs	0.00	0.00	0.00	10,000.00	0.00	0.00	0.00	400,000.00	0.00	0.00	0.00		410,000.00	1,100,510.00	690,510.00	62.7%
Total Grant Expenses	781,194.47	16,282.54	634,281.28	391,622.89	8,983.10	12,265.98	182,447.54	998,667.20	157,287.59	15,273.45	263,201.44	0.00	3,461,507.48	7,311,510.00	3,850,002.52	52.7%
Program Expenses																
Living Healthy	0.00	2,063.03	3,991.45	6,662.30	5,167.53	2,147.50	216.00	2,721.85	3,413.92	3,424.84	3,962.20		33,770.62	58,000.00	24,229.38	41.8%
HeartSafe Admin Expense	20,000.00	145.00	275.30	604.56	75.00	75.00	370.31	75.00	2,389.42	292.23	460.11		24,761.93	39,000.00	14,238.07	36.5%
HeaftSafe Payroll	5,323.43	4,808.24	4,808.24	4,808.24	4,808.22	7,212.31	5,163.64	5,059.73	4,999.90	4,999.90	4,999.91		56,991.76	64,000.00	7,008.24	11.0%
HeaftSafe Training & Equipment	2,033.63	59.28	1,852.13	31.05	10,655.42	242.42	267.93	0.00	0.00	235.49	0.00		15,377.35	31,000.00	15,622.65	50.4%
School Health Admin	300.00	425.00	1,650.71	775.54	3,647.61	1,399.92	2,938.43	2,150.00	21,482.54	520.98	1,715.79		37,006.52	35,000.00	(2,006.52)	-5.7%
School Health Payroll	7,825.93	8,310.72	8,894.43	7,448.22	8,642.01	10,969.63	8,049.44	8,345.12	7,982.62	8,270.12	7,570.12		92,308.36	160,930.00	68,621.64	42.6%
School Health Grants	333,115.00	26,550.07	130,525.00	4,000.00	175,569.74	275,642.00	236,164.98	638,504.75	740.00	258,159.76	231,174.77		2,310,146.07	3,300,560.00	990,413.93	30.0%
Total Program Expenses	368,597.99	42,361.34	151,997.26	24,329.91	208,565.53	297,688.78	253,170.73	656,856.45	41,008.40	275,903.32	249,882.90	0.00	2,570,362.61	3,688,490.00	1,118,127.39	30.3%
Total Expenses	1,227,847.94	97,601.95	861,703.66	497,717.13	266,672.98	4,182,482.51	486,483.40	1,704,457.86	519,990.60	339,189.99	574,925.78	0.00	10,759,073.80	15,719,600.00	4,960,526.20	31.6%
Net Surplus/Loss	(1,219,331.84)	(98,522.11)	(825,909.34)	(490,155.12)	718,786.37	4,626,524.13	(365,928.50)	(944,971.60)	78,094.97	2,581,192.49	(208,318.45)	0.00	3,851,461.00	(713,852.00)	(4,565,313.00)	

Budget by Month 2016-17

Income	July	August	September	October	November	December	January	February	March	April	May	Year To Date	Projected To Date	Difference	Budget
Rental Income	3,850.34	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	4,004.36	43,893.94	44,000.00	(106.06)	48,048.00
Tax Revenue	0.00	0.00	25,205.36	6,844.23	1,019,782.42	4,998,673.86	96,269.18	728,579.60	586,106.09	2,891,168.81	346,366.38	10,698,995.93	10,000,000.00	698,995.93	11,000,000.00
Investment Income	4,014.00	(5,446.00)	6,154.00	(3,634.00)	(38,664.00)	5,720.00	19,402.00	16,236.00	7,319.00	24,422.00	15,252.00	50,775.00	120,000.00	(69,225.00)	150,000.00
Interest Income	651.76	521.48	430.60	347.42	336.57	608.42	879.36	666.30	656.12	787.31	984.59	6,869.93	6,000.00	869.93	7,700.00
Pension Income	0.00	0.00	0.00	0.00	0.00	3,800,000.00	0.00	0.00	0.00	0.00	0.00	3,800,000.00	3,800,000.00	0.00	3,800,000.00
Total Income	8,516.10	(920.16)	35,794.32	7,562.01	985,459.35	8,809,006.64	120,554.90	749,486.26	598,085.57	2,920,382.48	366,607.33	14,600,534.80	13,970,000.00	630,534.80	15,005,748.00
Expense															
Admin. Expense	511.35	734.70	794.94	561.16	550.01	909.85	855.56	682.55	597.41	471.61	2,002.84	8,671.98	10,000.00	(1,328.02)	12,000.00
Admin. Payroll	20,673.20	18,093.25	17,925.85	17,925.85	17,925.85	32,922.56	19,623.73	19,417.60	19,360.46	19,522.10	19,360.45	222,750.90	200,000.00	22,750.90	240,000.00
Board Health Insurance	2,712.88	2,747.99	2,259.29	6,410.16	1,502.88	6,101.53	2,419.92	2,860.47	11,620.50	2,677.11	1,796.93	43,109.66	56,000.00	(12,890.34)	68,000.00
Employee Health Insurance	2,985.70	3,780.17	3,780.17	2,255.03	3,780.17	4,150.61	2,014.73	5,974.47	6,845.95	3,407.08	5,495.43	44,469.51	32,000.00	12,469.51	40,000.00
Employee Retirement Benefit	1,509.58	1,376.36	1,376.36	1,376.36	1,376.36	2,356.17	1,583.52	1,406.78	1,406.78	1,406.78	1,406.78	16,581.83	17,000.00	(418.17)	21,000.00
Investment Fees	0.00	0.00	0.00	7,071.55	3,750.00	0.00	7,070.89	3,750.00	0.00	0.00	10,802.85	32,445.29	34,000.00	(1,554.71)	46,000.00
Office Supplies/Equip Maint	1,144.19	47.53	241.17	290.68	964.09	205.87	779.95	376.19	258.72	903.24	2,077.56	7,289.19	9,000.00	(1,710.81)	11,000.00
Accounting fees	0.00	0.00	15,000.00	0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	0.00	18,000.00	18,000.00	0.00	21,000.00
Board Expense	0.00	0.00	0.00	30.14	0.00	315.92	0.00	80.29	375.00	487.55	61.55	1,401.05	2,000.00	(598.95)	6,500.00
Associations/Membership	7,500.00	0.00	10,000.00	0.00	0.00	0.00	0.00	0.00	0.00	325.00	0.00	17,825.00	17,500.00	325.00	18,000.00
Communications	0.00	475.00	0.00	25,040.63	587.28	275.99	240.35	0.00	0.00	0.00	1,056.80	27,676.05	28,000.00	(323.95)	30,000.00
Web Site/IT	1,700.00	3,145.00	4,186.54	4,873.83	4,701.50	12,353.00	4,044.00	4,305.00	7,267.70	5,239.31	4,834.00	56,649.88	54,000.00	2,649.88	66,000.00
Gen'l Liability & D&O Insurance	29,191.04	(1,000.00)	0.00	(197.00)	0.00	(1,000.00)	(88.57)	(895.00)	0.00	0.00	(1,000.00)	25,010.47	26,000.00	(989.53)	29,000.00
Election Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	261,297.52	0.00	0.00	261,297.52	150,000.00	111,297.52	150,000.00
LAFCO fees	0.00	0.00	0.00	5,783.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,783.00	8,500.00	(2,717.00)	8,500.00
Legal Fees	0.00	0.00	9,066.00	0.00	4,470.00	1,485.00	2,250.00	1,440.00	1,035.00	2,295.00	4,320.00	26,361.00	21,000.00	5,361.00	25,000.00
Bank Fees	0.00	0.00	0.00	0.00	0.00	30.00	0.00	0.00	0.00	0.00	0.00	30.00	70.00	(40.00)	100.00
Pension	0.00	0.00	0.00	0.00	0.00	3,800,000.00	0.00	0.00	0.00	0.00	0.00	3,800,000.00	3,800,000.00	0.00	3,800,000.00
Property Expenses															
Maintenance	1,165.00	944.46	1,486.80	1,780.00	1,157.00	1,629.46	1,449.88	1,292.81	3,061.33	2,916.88	1,290.00	18,173.62	18,000.00	173.62	22,500.00
Utilities	1,269.07	2,493.86	3,137.65	2,443.19	2,239.46	1,672.04	2,501.42	2,123.30	2,448.49	2,241.81	2,216.50	24,786.79	25,000.00	(213.21)	30,000.00
Property Insurance	1,573.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,573.72	2,000.00	(426.28)	2,000.00
Depreciation	6,940.33	6,940.33	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	6,119.75	68,958.41	60,000.00	8,958.41	73,000.00
Grants															
Grant Admin Expenses	501.40	165.92	832.52	18,022.39	572.23	297.38	1,523.68	714.44	3,435.15	397.59	1,069.44	27,532.14	36,000.00	(8,467.86)	45,000.00
Grant Admin Payroll	7,049.07	6,116.62	6,074.76	6,074.77	6,074.62	10,335.10	6,509.76	6,419.57	6,419.56	6,419.56	6,419.56	73,912.95	66,000.00	7,912.95	80,000.00
SFSU Nursing Program	0.00	0.00	627,054.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	627,054.00	613,000.00	14,054.00	613,000.00
Samaritan House Grant	170,644.00	0.00	0.00	170,644.00	0.00	0.00	170,644.23	0.00	0.00	0.00	56,881.42	568,813.65	683,000.00	(114,186.35)	683,000.00
Other Grants	3,000.00	10,000.00	320.00	8,500.00	0.00	1,633.50	3,769.87	0.00	9,379.38	8,456.30	11,397.84	56,456.89	70,000.00	(13,543.11)	90,000.00
San Mateo Medical Ctr. So Cour	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,053.50	0.00	0.00	138,053.50	250,000.00	(111,946.50)	537,000.00
Ravenswood	0.00	0.00	0.00	0.00	0.00	0.00	0.00	350,000.00	0.00	0.00	0.00	350,000.00	350,000.00	0.00	700,000.00
Community Grants Program	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,100,000.00
Mission Hospice	500,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	500,000.00	500,000.00	0.00	500,000.00
PFS-Sequoia 70	100,000.00	0.00	0.00	178,381.50	2,336.25	0.00	0.00	191,533.19	0.00	0.00	187,433.18	659,684.12	650,000.00	9,684.12	813,000.00
Oral Health Coalition	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50,000.00	0.00	0.00	0.00	50,000.00	50,000.00	0.00	50,000.00
2016-17 New Grants & Program	0.00	0.00	0.00	10,000.00	0.00	0.00	0.00	400,000.00	0.00	0.00	0.00	410,000.00	800,000.00	(390,000.00)	1,100,510.00

Programs	July	August	September	October	November	December	January	February	March	April	May	Year To Date	Projected To Date	Difference	Budget
Living Healthy	0.00	2,063.03	3,991.45	6,662.30	5,167.53	2,147.50	216.00	2,721.85	3,413.92	3,424.84	3,962.20	33,770.62	40,000.00	(6,229.38)	58,000.00
HeartSafe Admin Expense	20,000.00	145.00	275.30	604.56	75.00	75.00	370.31	75.00	2,389.42	292.23	460.11	24,761.93	32,000.00	(7,238.07)	39,000.00
HeartSafe Payroll	5,323.43	4,808.24	4,808.24	4,808.24	4,808.22	7,212.31	5,163.64	5,059.73	4,999.90	4,999.90	4,999.91	56,991.76	52,000.00	4,991.76	64,000.00
HeartSafe Training/Equip	2,033.63	59.28	1,852.13	31.05	10,655.42	242.42	267.93	0.00	0.00	235.49	0.00	15,377.35	20,000.00	(4,622.65)	31,000.00
School Health Admin	300.00	425.00	1,650.71	775.54	3,647.61	1,399.92	2,938.43	2,150.00	21,482.54	520.98	1,715.79	37,006.52	25,000.00	12,006.52	35,000.00
School Health Payroll	7,825.93	8,310.72	8,894.43	7,448.22	8,642.01	10,969.63	8,049.44	8,345.12	7,982.62	8,270.12	7,570.12	92,308.36	130,000.00	(37,691.64)	160,930.00
School Health Grants	333,115.00	26,550.07	130,525.00	4,000.00	175,569.74	275,642.00	236,164.98	638,504.75	740.00	258,159.76	231,174.77	2,310,146.07	2,300,000.00	10,146.07	3,300,560.00
Total Expenses	1,228,668.52	98,422.53	861,703.66	497,716.90	266,672.98	4,182,482.51	486,483.40	1,704,457.86	519,990.60	339,189.99	574,925.78	10,760,714.73	11,255,070.00	(494,355.27)	15,719,600.00

Organization name: South County Community Health Center
(dba: **Ravenswood Family Health Center**)
Federal Tax ID Number: 94-3372130
Address: 1885 Bay Road, East Palo Alto, CA 94303
Chief Executive Officer: Luisa Buada, RN, MPH
Telephone: (650) 330-7410 **Email:** lbuada@ravenswoodfhc.org
Contact: Jessica Chiu – Director of Development, Planning & Evaluation
Phone: 650-617-7830 | **Email:** jchiu@ravenswoodfhc.org | **Fax:** 650-321-1560



Sequoia Healthcare District – Grant Request

Summary of Request

Ravenswood Family Health Center (RFHC) is respectfully requesting a three year grant in the amount of \$800,000 for FY 17-18, \$900,000 for FY 18-19 and \$1,000,000 for FY 19-20 for a total of \$2,700,000 over the three years between July 1, 2017 – June 30, 2020, to support a continuum of health care services that we provide to Sequoia Healthcare District (SHD) residents. Over the last two years, our main health center, which opened in Spring 2015, allowed us to significantly increase the number of SHD residents we served, as well as provide additional health care services that enhanced our continuity of care. SHD's investment in RFHC will enable us to leverage additional funding and ultimately expand vital health care access to SHD residents across the life span. In turn, our services will deliver lasting positive impact on the health and wellbeing of SHD residents while reducing their utilization of local emergency rooms-a shift that will save local hospitals and taxpayers millions over time.

Cost of Care for Sequoia Healthcare District Residents

RFHC's **direct professional cost per visit** for combined medical, dental, and behavioral health care services to SHD residents is **\$209.01 per visit** or **\$903.61 per patient each year**. When enabling services (enrollments, referrals, case management, health education, and patient navigation) are included, the **cost per patient each year is \$1,024.1**. Furthermore, when costs of combined medical, dental, and behavioral health care services; enabling services; plus overhead; administration and facility operational and depreciation expense are included, the **total cost per patient each year is \$1,859.45**. The new building is situated in a larger beautiful new healing space which has made it possible for us to offer more services to more patients, like mammography, x-ray, ultrasound, same day dental care, optometry, pharmacy, and Gynecology onsite. However, it has simultaneously increased our depreciation and operating costs.

The current total cost for RFHC to provide comprehensive health care services (including enabling services and facility and non-clinical support services) to SHD residents is \$6,742,354, of which **\$2,157,553** is spent to care for uninsured SHD residents. **RFHC's grant request per year represents only 12% of the total cost of care for all SHD residents seen at RFHC** (based on current utilization), and 37% of the total cost of care for uninsured SHD residents. As a percentage of RFHC's projected FY 17-18 budget of \$29 million, the request of \$800,000 in FY 17-18 from SHD represents 2.75% of our total organization's budget.

Population Served

Among our 15,931 patients who accessed our health care services in 2016, 3,626 or 23% were SHD residents. RFHC has increased the number of SHD residents served by 170% since 2009 when we first requested operating support (RFHC served 1,344 SHD residents in 2009). We provide health care services to the most vulnerable, low-income populations residing in SHD. For instance, 88% of the SHD residents we serve are from households with incomes 200% and below the federal poverty level (\$49,200 for a family of four). In addition, 32% of the SHD residents seen at RFHC are uninsured and 68% are enrolled in public health coverage programs. About 36% of the SHD resident patients have a complex medical condition such as diabetes, hypertension, asthma, heart disease, and depression. The majority of SHD residents served are also ethnic minorities (90%)—including 81% Latino, 4% African American, and 3% Native Hawaiian or Pacific Islander. Furthermore, 67% of the SHD resident patients are best served in a language other than English with Spanish and Tongan being the languages most often spoken.

Fiscally Well-Managed

Since 2001, we have grown from a start-up clinic with a budget of \$1.1 million and 13 employees providing basic primary care to a full-service health center with a budget of over \$28 million in FY 2016-2017 and 206 employees. In Fiscal Year (FY) 2015-2016 (July 1, 2015 – June 30, 2016), RFHC’s organizational budget was \$ 26,091,891. For FY 2016-2017 (July 1, 2016 – June 30, 2017), RFHC’s projected total budget is \$28,035,708. Our organizational growth reflects our strong financial management. RFHC’s expanded capacity has come largely from growth in third-party patient revenue, such as Medi-Cal and non-federal grants. We deliver cost-effective services through organizational productivity; balancing a challenging mix of reimbursements of health care services, government funds, foundation grants; and maximizing individual donor opportunities and engagement. Our financial systems ensure accountability and support timely, accurate fiscal reporting.

In addition, we have received national recognition for a model of care that integrates medical, mental health and dental services into a patient-centered health home. In May, 2017, we achieved Level Three Patient-Centered Medical Home (PCMH) recognition through the National Committee for Quality Assurance (NCQA). PCMH is a model of care that puts patients at the forefront of care. Research has demonstrated that this model not only improves quality of care, but also enhances patient experience and satisfaction while reducing health care costs. Finally, our quality improvement findings have guided our efforts to improve productivity and cost-efficiencies. RFHC has had a clean annual independent audit under federal guidelines since opening in 2001. Together, our strong stewardship of resources and our efficient and effective clinical care sustain the financial health of our organization.

Proposed Grant Objectives

Objective 1: *RFHC will increase the number of unduplicated SHD resident patients from 4,018 (FY 16-17) to at least 4,652 resident patients over three years. RFHC will also increase the total number of service visits from 33,042 (FY 16-17) to 34,352, 36,045 and 37,849 service visits each of the three grant years respectively. Please see below for details.*

Proposed Services for SHD Resident Patients	FY 15-16 Actual	FY 16-17	FY 17-18	FY 18-19	FY 19-20
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	(Jul 1, 2015- June 30, 2016)	Actual (11 mos annualized)			
Unduplicated SHD Resident Patients	3809	4018	4220	4430	4652
Medical Visits	7806	8720	8862	9303	9769
Lab, Immunizations, Screening Encounters	2791	3773	3800	3980	4180
Health Education Encounters	2779	3130	3375	3545	3720
Dental Visits	3938	3568	3800	3980	4180
Behavioral Health Visits	764	851	845	885	930
Pharmacy Consultation Visits	2244	3772	4010	4210	4420
Optometry Visits	373	759	845	885	930
Mammography Visits	270	240	250	265	280
X-ray Visits	129	275	295	310	325
Ultrasound Visits	68	157	170	177	185
Enrollment in Health Plans - Visits	2974	3410	3585	3765	3955
Referrals to Specialists	1633	2887	2955	3100	3255
Case Management	1465	1500	1560	1640	1720
Total All Service Visits	27234	33042	34352	36045	37849

Please note, all of our visit types increased from FY 15-16 to FY 16-17(11mos), with exception of our dental visits and mammography visits. Our dental clinic experienced staffing shortage last fiscal year where we did not have a Pediatric Dentist for four months. Also, in 2015 we were catching up with backlog of mammograms from 2014, artificially causing an increase in visit volume.

Objective 2: *By June 30, 2018, RFHC will provide 70% of our unduplicated SHD diabetic patients with comprehensive eye and vision exams. 75% by June 30, 2019. 80% by June 2020*

Our optometry clinic consists of two exam rooms, a specialized testing room, an alcove and office for on-site optical services (selecting, fitting, and dispensing of prescription eyeglasses). We provide comprehensive primary eye and vision care services, including vision testing, diabetic retinopathy screening, glaucoma and cataract screening and treatment, eyeglasses prescriptions, binocular vision services, and low vision screening.

Our effective team-based care and our enhanced patient recall have enabled us to dramatically increase our rate of providing diabetic patients with comprehensive eye and vision exams. As mentioned in our semi-annual report, in FY 2015-2016, 37% of our SHD diabetic patients received optometry care. In FY 2016-2017 (11 mos), this rate rose to 63%. We are working on numerous initiatives to ensure that all of

our diabetic patients receive comprehensive eye and vision exams. Our providers regularly refer eligible diabetic patients to our Optometry department for eye exams. Our health coaches are also diligently contacting diabetic patients who are out of care to schedule them for eye exam appointments. Additionally, our referral assistants have been conducting intensive reminder phone calls, 3 per scheduled visit, where they educate diabetic patients on the importance of attending their optometry appointments. Finally, we have also enhanced our recall tracking system through our i2iTracks Population Health Management database which automatically notifies our Optometry team to contact patients who are due for a follow-up appointment.

Finally, as mentioned in our most recent semi-annual report, we have launched our optical shop in September 2016. Our optical shop ensures that patients receive eyeglasses conveniently at our health center and at prices within their means. We have an in-house optician who works closely with our patients to select eyeglasses that suit their needs and style. Patients without health insurance can purchase glasses for as little as \$45 to \$90 a pair. Our optical shop is highly in demand and will help draw more diabetic patients to seek optometry care.

Objective 3: *By June 30, 2018, RFHC will provide 250 of our unduplicated SHD female patients ages 40-74 with mammograms (screening or diagnostic). 265 by June 30, 2019. 280 by June 30, 2020.*

Women in our communities face a multitude of cultural, linguistic, and socioeconomic barriers that make it challenging for them to maintain regular mammogram screenings and check-ups. Some of these barriers we have observed include lack of health knowledge, lack of language-appropriate information and services, lack of transportation, and lack of access to high-quality and affordable health care.

Since the opening of our main health center in May 2015, we have been able to provide life-saving screening mammograms in house at our Imaging Center. Our Women's Health program staff collaborate with technicians from Palo Alto Medical Foundation (PAMF) to deliver these screening mammograms and refer women who require diagnostic mammograms to PAMF or to San Mateo Medical Clinic. For patients who receive a positive diagnosis or who require additional treatment, our Women's Health team refers them to Stanford Hospital and other medical facilities for treatment. Our staff also connect patients to vital financial assistance and support services that help them successfully complete treatment. In addition, our Women's Health team provides linguistically and culturally appropriate breast cancer prevention and treatment education, directly benefiting our Latino and Tongan patients who are the most high-risk and underserved patient populations in our community.

Objective 4: *By June 30, 2018, RFHC will provide 3,800 dental visits to our unduplicated SHD patients with comprehensive oral health care. 3,980 dental visits by June 30, 2019. 4,180 dental visits by June 30, 2020.*

Access to dental care is critical in the developmental trajectory of children, given that Early Childhood Caries (ECC) is the most prevalent disease during childhood. If left untreated, ECC can lead to school absenteeism, learning problems, systemic diseases, hospitalization, and in rare cases, death (American Academy of Pediatric Dentistry, 2011). Also, research shows that low-income children have higher incidents of ECC, and are less likely to receive comprehensive dental care. Since over 78% of our pediatric patients come from families with income 200% or below FPL, improving access to oral health care is one of our top priorities.

RAVENSWOOD FAMILY DENTISTRY

Since 2010, our state-of-the-art dental clinic, Ravenswood Family Dentistry (RFD), has served as a critical access point for comprehensive oral health care for low-income children and families. We provide comprehensive oral health services including preventive, educational, restorative, surgical, emergency, periodontal, and prenatal oral health care services. Our dental care is integrated with our primary medical care, and is delivered through a team-based, patient-centered health home model. As parents bring their children in to RFD to seek treatment for painful, acute oral health conditions (such as cavities), they are connected to many other important screening, immunization, health education, and treatment services for their children. Our dental staff conducts “warm hand-off”, where they personally introduce children and their families to their Pediatric Providers, in order to enhance rapport in the patient-provider relationship. Our dental and pediatric medical team also work together to develop a care plan that is tailored to the needs of each individual child. In this way, our dental clinic not only improves our pediatric population’s oral health, but also acts as a gateway for children who are uninsured and/or without a medical home to be connected to primary health care. From July 1, 2016-May 31, 2017, we served 328 pediatric patients under age six residing in SHD. This pool of children represents a valuable opportunity for us to instill good oral hygiene habits and promote lifelong oral health in the next generation of SHD residents.

Virtual Dental Home

In the last five years, we have pioneered our virtual dental home (VDH) program through our Early Childhood Oral Health Initiative (ECOHI). In this program, our highly trained and experienced Registered Dental Hygienist in Alternative Practice and Dental Assistant/Navigator bring portable dental and imaging equipment to our partner preschool and community sites serving low-income children. There, our staff provide children with oral health education, dental disease risk assessments, fluoride varnish, sealants, temporary resin fillings for beginning cavities without drilling, as well as any necessary referrals to our dental clinic and local dental clinics that accept Medi-Cal. Last year, our VDH program has provided oral health services and education for low-income children at 31 sites across San Mateo County. We have also collaborated with University of the Pacific Center for Special Care, Sonrisas Community Dental Center, and Fair Oak’s Pediatric Clinic at San Mateo Medical Center to enhance the effectiveness and reach of our VDH program.

DENTAL CLINIC EXPANSION

RFD currently houses four pediatric oral prevention treatment chairs, five adult chairs, and three oral surgery quiet rooms. Additionally, we house two integrated oral health prevention operatories (treatment rooms) in our main health center. In total, we have 14 dental operatories. However, given our phenomenal growth in the recent years, our dental clinic has reached capacity, and we are facing increasing difficulty in providing patients with appointments as soon as they need them, which reduces our effectiveness in retaining new families and families facing barriers accessing care. We are currently in the process of expanding our dental clinic to increase its operational space by 75%, which will allow us to increase our patient capacity by 50%. The 9 new chairs that are planned will be focused on pediatric dental treatment. We anticipate that a significant percentage of our new pediatric patients will be SHD children who do not have regular access to dental care.

Objective 5: *By June 30, 2018, all of RFHC’s Medicare-Part D patients will be able to be served at our on-site Pharmacy.*

From Jul 1, 2016-May 31, 2017, more than 50% of our SHD patients (2,183) received at least one prescription from RFHC, and a significant percentage of these patients filled their prescriptions at our in-house retail pharmacy, located in our main health center. Our pharmacy serves as a one-stop shop for our patients, allowing them to avoid lengthy wait for their medications or travel long distances to an outside drug store or pharmacy, which could result in patients not picking up their medications due to transportation barriers or time constraints. To improve the speed and accuracy in our prescription service, we have implemented the following high-tech innovations in our retail pharmacy. We have installed a robot which dispenses up to 200 of the most common prescriptions at a rate of 180 scripts per hour. We have also launched our NexGen interface which automatically updates patient information on ScriptPro. Finally, in December 2016 we began e-prescribing to our own pharmacy (in addition to e-prescribing to outside pharmacies). All of these features allow us to significantly reduce errors, save staff time, and improve the efficiency and quality of services provided through our pharmacy.

We received our retail pharmacy license in December 2015, and began prescribing to our uninsured patients, patients under San Mateo County's Access and Care for Everyone (ACE) program, and patients paying on a sliding fee scale. After completing a lengthy and timely process to obtain our Medi-Cal and Family PACT licenses for our pharmacy, we were able to serve Medi-Cal and Family PACT patients in our pharmacy starting December 2016. This was an important step forward for our pharmacy since the majority of our patients since the start of the Affordable Care Act (ACA) are now covered by Medi-Cal. With funding from Sequoia Healthcare District, we aim to obtain our Medicare Part-D license over the next year in order to serve our older adult patients with Medicare Part-D health coverage.

Evaluation

By utilizing our data systems in conjunction with our financial system, we will ensure that SHD funds are spent only on SHD residents. We have a robust infrastructure of program evaluation tools for patient and clinical data, including Electronic Health Records (EHR), Dentrix (electronic dental records system), and i2iTracks Population Health Management System (a platform that allows us to identify and actively manage our patient population's health needs, chronic conditions and diseases, and health outcomes). Our providers, clinic staff, and enabling services staff will utilize our data systems to record, track, and monitor data for the SHD residents we serve.

Our highly skilled and experienced data analysts will generate monthly reports that allow us to conduct regular process evaluations, which includes validating data for SHD residents and making sure we are on target to achieving our proposed objectives and projected numbers. Our data analysts will also utilize our systems to generate semi-annual reports for SHD that identify the number and demographics of SHD residents (de-identified) seen at RFHC as well as the types of services they received. In addition, our staff will be able to work with an auditor from SHD to conduct an audit on our data for the SHD residents we serve (required to be on-site at RFHC since HIPAA regulations restrict us from sending patient data to non-health care partner agencies unless it is de-identified).

Additionally, our Deputy Chief Financial Officer and our Grants Accounting Manager from our Finance Department will oversee internal control of grant funds. Our Grants Accounting Manager will utilize our financial accounting system to regularly and accurately input expenditure of funds for our SHD grant (as we do for all of our grants) to ensure correct and reliable financial information for reports. Our Finance Department will also be able to work with an auditor from SHD to perform an audit on our financial systems.

Outcomes

RFHC serves as a critical safety-net community health center that provides comprehensive health care services to high-risk, vulnerable populations in San Mateo County who would otherwise not have access to care. Funding from SHD will enable RFHC to increase access to much needed health care services and enhance the health and wellness of SHD residents as well as underserved communities throughout San Mateo County. The long term impact of our services includes reducing health disparities for San Mateo County's indigent children, families, and individuals, reducing emergency room visits which translate into significant cost savings for tax payers, and enabling more SHD residents to lead full, productive lives. Just as ill health is one of the main factors trapping people in poverty, we believe that by helping our patients achieve optimal health, we open the door to prosperity and success in all other areas of their lives.

Care Coordination

To ensure that our patients have access to services that we do not provide in-house, we refer them to a wide range of services in the community. Our Referrals Department not only connects our patients to the services they need, but also conducts follow-up to troubleshoot any questions that patients may have and provide additional support. Examples of referred services include the following: Cardiology, Orthopedic Surgery, Gynecology, Urology, Ophthalmology, Pain Management, Physical Therapy, Nephrology, Hematology/Oncology, Pulmonary, Neurology, Gastroenterology, Dermatology, Rheumatology, Endocrinology, Endoscopy, Allergy/Immunology, etc. We also refer patients to our partner organizations in the community including Voices of Recovery, Nuestra Casa, as well as other social services agencies to support patients with accessing addiction treatment, housing, food, and employment.

Funding Sources and Fundraising Goal

Core support funding from SHD will help cover our costs for providing health care services to uninsured/underinsured patients residing in SHD that we are not fully reimbursed for. Funding from SHD will also play a critical role in the fundraising goal of our overall organizational budget (for the presentation to the District board we will attach pie charts related to our FY 17-18 organizational budget and fundraising goal). While we continue to fundraise through grant solicitations and annual campaigns, funding from SHD provides us with the financial stability we need to expand comprehensive health care access for SHD residents of all ages.



Projected Budget 2017-18 Narrative

Overview:

Overall the school budget is increasing by about \$450K over 2016-17 of which close to \$300,000 is going for increased counseling to address our number one concern for adolescent mental health services. Another \$60K is going for increased school nursing support in advance of our more comprehensive school nursing improvement plan (which will be presented later in the year). An additional \$60k is allocated to expand physical education. We are also looking to fill our vacant staff position through the hiring of Jenny Bratton who will join us in July. Jenny comes to us after a career as a teacher and special projects manager with the Sequoia Union High School District. Jenny will work 75 percent time on our Healthy Schools Initiative and 25 percent of her time on the District website and communications.

Other smaller, new or expanded projects comprise the additional funding increase.

New: Key Goals for 2017-18

- Complete our mental health data collection and analysis project with our 8 school districts and develop plan to address the complex social and emotional health needs of students
- Develop and implement comprehensive and sustainable plan to address the overwhelming school nursing challenges many of our schools face
- Expansion of HSI newsletter to two additional school districts
- Hire new support staff to assist program director with development and implementation of new projects

Budget:

Total Budget Requested 2017-18	2016-17	Difference
\$3,980,085	\$3,536,743	+\$449,995

Direct funding to school districts:

2017-18	2016-17	Difference
\$2,529,310	\$2,212,350	+\$316,960

Nearly 65% of the total budget is allocated to school districts to support key wellness staff and programs.

- Direct Staff (n=30): \$1,830,460
- Subcontracted Services: \$577,590
- Materials, curriculum, training: \$84,500

School district total does not include 3rd party contractors or PE+ program staff. The majority of funding supports wellness staff directly employed by school districts, as will be shown later in this report.

HSI Grants:

2017-18	2016-17	Difference
\$327,000	\$273,500	+\$53,500

There are 14 grants to be recommended out of 29 requests. Total amount in requests: \$469,575; total amount recommended: \$327,000. This amount is up by 53K from last year. Of the 14 being recommended, 11 are renewals and 3 are new programs. A listing of the agencies and program descriptions is attached to this report.

PE+:

2017-18	2016-17	Difference
\$841,000	\$772,560	+\$68,440

PE+: As the PE+ program continues to grow in depth and breadth, so has its popularity. This year we will add KIPP Charter in Redwood City for a total of 12 schools and will offer our summer program again. The Redwood City School District will contribute \$90,000 toward the cost of PE+ and each of the 11 schools contributes between \$8,000 and \$16,000 (based on a sliding fee scale). Charter will contribute \$30k.

Program Management:

2017-18	2016-17	Difference
\$158,275	\$130,333	+\$27,942

Increase in program management costs will allow for a .75 staff to assist program director

Contract Support:

2017-18	2016-17	Difference
\$65,000	\$37,500	+\$27,500

Contractors this year include Julie Engberg to continue her work on PE+ Health Huddles and Mike Newlin with Duerr Evaluation Resources who will continue with mental health data collection and analysis.

Other Program Expenses:

2017-18	2016-17	Difference
\$37,000	\$42,500	-\$5,500

These costs include RWC 2020 membership fees, supplies, travel for conferences, staff training and development, promotional materials and discretionary.

Healthy Schools Initiative DRAFT Budget 2017-18

San Carlos	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Wellness Coordinator (1.0FTE)	\$ 117,000.00	\$ 121,095.00	\$ 4,095.00	increase represents a 3.5 COLA
Nursing Services	\$ 103,000.00	\$ 132,500.00	\$ 29,500.00	increase brings 2nd nurse to full time-
Counselors Middle	\$ 117,000.00	\$ 117,000.00	\$ -	1 FTE
Elementary School Counselors	\$ 95,000.00	\$ 155,000.00	\$ 60,000.00	adds .6 FTE Mental Health
			\$ -	
Subcontractor Services				
Elementary PE staff	\$ 43,800.00	\$ 43,800.00	\$ -	PE Assoc and Legarza contract
			\$ -	
Other				
Kognito staff mental health training	\$ -	\$ 5,400.00	\$ 5,400.00	New
Total San Carlos Funding	\$ 475,800.00	\$ 574,795.00	\$ 98,995.00	
Redwood City	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Wellness Director (1.0 FTE)	\$ 124,000.00	\$ 128,340.00	\$ 4,340.00	increase represents a 3.5 COLA
Coordinator Support Staff	\$ -		\$ -	.125- New- JB time
				increasing salaries to market, adding 2.0 hrs
Nursing Services	\$ 188,000.00	\$ 220,000.00	\$ 32,000.00	
Licensed Vocational Nurse (1 FTE)	\$ 62,000.00	\$ 65,000.00	\$ 3,000.00	brings salary to market rate
Subcontractor Services				
Star Vista Counseling services contract	\$ 167,500.00	\$ 240,000.00	\$ 72,500.00	adds services to Ford, Roosevelt
Primary Intervention Program (PIP) Lucky Kids	\$ 20,000.00	\$ 20,000.00	\$ -	Star Vista
Children's Place Program	\$ 25,000.00	\$ 25,000.00	\$ -	Star Vista
Adaptive PE	\$ 10,000.00	\$ 10,000.00	\$ -	
Other				
Supplies and Discretionary	\$ 2,500.00	\$ 2,500.00	\$ -	may include conferences, trainings, workshops
Total Redwood City Funding	\$ 599,000.00	\$ 710,840.00	\$ 111,840.00	

Belmont-Redwood Shores	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 Budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Health Educator / Wellness Coordinator (1.0 FTE)	\$ 110,000.00	\$ 110,000.00	\$ -	
Credentialed School Nurse (0.5 FTE)	\$ 37,000.00	\$ 37,000.00	\$ -	
Licensed Vocational Nurse (.75 FTR)	\$ 50,000.00	\$ 50,000.00	\$ -	
Subcontractor Services				
Social Emotional Support Services	\$ 68,500.00	\$ 68,500.00	\$ -	Star Vista
Elementary School Counselor Pilot	\$ -	\$ 24,000.00	\$ 24,000.00	New
Health Connected	\$ 16,000.00	\$ 16,000.00	\$ -	
Footsteps (PE Support)	\$ 65,650.00	\$ 65,650.00	\$ -	
PE Equipment	\$ 1,000.00	\$ 1,000.00	\$ -	Replenish
Other				
Staff Wellness	\$ 2,000.00	\$ 1,600.00	\$ (400.00)	Teacher stipend (yoga)
Site teacher leaders	\$ 3,000.00	\$ 2,100.00	\$ (900.00)	Stipends
Ralston School Climate Support	\$ 15,000.00	\$ -	\$ (15,000.00)	funds reallocated for PD trainings
Staff PD Trainings	\$ -	\$ 10,900.00	\$ 10,900.00	new- PBIS, Kognito, Mindfulness
Health Ed Curriculum	\$ 22,000.00	\$ 23,500.00	\$ 1,500.00	Great Body Shop K-8, Ralston curriculum
Supplies, Walk/Jog, Discretionary	\$ 4,300.00	\$ 5,000.00	\$ 700.00	May include conferences, trainings, workshops
Total BRSSD Funding	\$ 394,450.00	\$ 415,250.00	\$ 20,800.00	
Sequoia Union	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Wellness Coordinator (10 mo/yr)	\$ 103,200.00	\$ 106,625.00	\$ 3,425.00	represents a 3.5 COLA
Coordinator support staff	\$ -	\$ -	\$ -	.125- New, JB time
Nurse 1 (1.0 FTE)	\$ 103,200.00	\$ 103,200.00	\$ -	
Nurse 2 (1.0 FTE)	\$ 103,200.00	\$ 103,200.00	\$ -	
Community School Wellness Coordinator at Redwood	\$ 50,000.00	\$ 50,000.00	\$ -	.50 of 1.0 FTE
Acknowledge Alliance Psychotherapist at Redwood	\$ -	\$ 50,000.00	\$ 50,000.00	New position-.50 of 1.0 FTE

Subcontractor Services			\$ -	
Health Connected	\$ 50,000.00	\$ 50,000.00	\$ -	
Star Vista Counseling at M.A	\$ 12,500.00	\$ 12,500.00	\$ -	
CSM Parent Ed	\$ 20,000.00	\$ 20,000.00	\$ -	
ATOD Curriculum Support	\$ -	\$ 15,000.00	\$ 15,000.00	<i>New</i>
Mental Health Curriculum Support	\$ -	\$ 20,000.00	\$ 20,000.00	<i>New</i>
ACS at Redwood	\$ 10,000.00	\$ -	\$ (10,000.00)	<i>replaced by psychotherapist</i>
Quiet Time at Redwood	\$ 20,000.00	\$ 20,000.00	\$ -	
Other				
Discretionary funds	\$ 3,500.00	\$ 3,500.00	\$ -	<i>(conferences, trainings, supplies)</i>
Total SUHSD Funding	\$ 475,600.00	\$ 554,025.00	\$ 78,425.00	
Woodside Elementary	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Counselor	\$ 25,000.00	\$ 25,000.00	\$ -	
Wellness Coordinator	\$ 25,000.00	\$ 25,000.00	\$ -	
Other				
Kognito staff mental health training	\$ -	\$ 800.00	\$ 800.00	<i>New</i>
Total Woodside Elem Funding	\$ 50,000.00	\$ 50,800.00	\$ 800.00	
Portola Valley	Budget 2016-17	Budget 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Nurse	\$ 25,000.00	\$ 25,000.00	\$ -	
Counselor	\$ 20,000.00	\$ 20,000.00	\$ -	
Stipends for teacher wellness leaders	\$ 12,500.00	\$ 12,500.00	\$ -	<i>*In lui of single wellness coordinator</i>
Other				
Kognito staff mental health training	\$ -	\$ 1,800.00	\$ 1,800.00	<i>new</i>
Total Portola Valley Funding	\$ 57,500.00	\$ 59,300.00	\$ 1,800.00	
Los Lomitas	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Nurse	\$ 25,000.00	\$ 25,000.00	\$ -	
Wellness Coordinator	\$ 50,000.00	\$ 50,000.00	\$ -	

Other				
Kognito staff mental health training	\$ -	\$ 1,800.00	\$ 1,800.00	<i>new</i>
Total Las Lomitas Funding	\$ 75,000.00	\$ 76,800.00	\$ 1,800.00	
MP City School District	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Staff Salaries				
Wellness Coordinator	\$ 50,000.00	\$ 50,000.00	\$ -	
Nurse	\$ 25,000.00	\$ 25,000.00	\$ -	
Other				
Emotional & Behavioral Support Services	\$ 10,000.00	\$ 10,000.00	\$ -	
Kognito staff mental health training	\$ -	\$ 2,500.00	\$ 2,500.00	<i>new</i>
Total MP City Funding	\$ 85,000.00	\$ 87,500.00	\$ 2,500.00	
Total Direct to School Districts	\$ 2,212,350.00	\$ 2,529,310.00	\$ 316,960.00	
Special Programs	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
PE+ academic year	\$ 750,000	\$ 816,000	\$ 66,000	<i>increase coach salaries added KIPP</i>
PE+ summer 2018	\$ 22,560	\$ 25,000	\$ 2,440	
School Project Mini Grants	\$ 20,000	\$ 15,000	\$ (5,000)	<i>Grants between \$500-\$2,500</i>
Parent Newsletter SC, BRSSD and RWCSD	\$ 5,000	\$ 7,500	\$ 2,500	<i>expand to RWC</i>
PE+ Water Safety Program	\$ 43,000	\$ -	\$ (43,000)	<i>New pilot program was cancelled</i>
Total Special Projects	\$ 840,560.00	\$ 863,500.00	\$ 22,940.00	
Grants to Non-Profits	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Adelante Spanish Emersion Garden Program	\$ 12,500.00	\$ 14,000.00	\$ 1,500.00	
Adolescent Counseling Srvs- On Campus Counseling	\$ 25,000.00	\$ 25,000.00	\$ -	<i>Woodside, Las Lomitas, McKinley</i>
Children's Health Council Teen Mental Health Initiative	\$ -	\$ 16,500.00	\$ 16,500.00	<i>Teen Mental Health Initiative- NEW</i>
Families United- Healthy Through Education	\$ -	\$ 30,000.00	\$ 30,000.00	<i>Healthy Through Education- NEW</i>
Friends for Youth Connect	\$ 30,000.00	\$ 50,000.00	\$ 20,000.00	<i>Connect Mentoring Initiative Expansion</i>
Jasper Ridge Horsebuddies	\$ 10,500.00	\$ 12,500.00	\$ 2,000.00	

John Gill Elementary Outdoor Classroom Garden Program	\$ -	\$ 10,000.00	\$ 10,000.00	<i>Education Outside Garden Program- NEW</i>
KIPP Headstand	\$ 32,000.00	\$ -	\$ (32,000.00)	<i>did not reapply</i>
One Life Counseling- Building Resiliency in Schools	\$ 15,000.00	\$ 25,000.00	\$ 10,000.00	<i>Expanding pilot to 4 RWCS D Schools</i>
Redwood City 20/20- SRTS	\$ 15,000.00	\$ 12,500.00	\$ (2,500.00)	
San Carlos Charter Learning Center School Counselor	\$ 25,000.00	\$ 25,000.00	\$ -	<i>Counselor</i>
See Well to Learn- Vision program for low income preschoolers	\$ 40,000.00	\$ 40,000.00	\$ -	
Sienna Youth Center of St. Francis- Holy Family Outdoor and PE	\$ 16,500.00	\$ 17,000.00	\$ 500.00	
Star Vista Counseling at Arbor Bay	\$ 12,000.00	\$ 12,000.00	\$ -	<i>*Subcontractor Star Vista</i>
Star Vista Youth Development Initiative	\$ 25,000.00	\$ 25,000.00	\$ -	
YMCA SV- Project Cornerstone	\$ 15,000.00	\$ 12,500.00	\$ (2,500.00)	
Total Grants	\$ 273,500.00	\$ 327,000.00	\$ 53,500.00	
Other	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Promotional materials, supplies, printing	\$ 15,000	\$ 7,500	\$ (7,500)	<i>no longer includes web</i>
Staff Development- workshops, training, conferences	\$ 7,500	\$ 7,500	\$ -	
RWC 20/20 annual fees	\$ 15,000	\$ 15,000	\$ -	<i>Cost is \$25,000 -\$10,000 to come from membership budget</i>
Discretionary Funds	\$ 5,000	\$ 7,000	\$ 2,000	
Total Other	\$ 42,500.00	\$ 37,000.00	\$ (5,500.00)	
Program Staff and Contractor Support	Budget 2016-17	Recommended for 2017-18	Difference from 2016-17 budget	Explanation- * Blue indicates new or major change
Program Director Salary- .65 FTE	\$ 87,333	\$ 91,700	\$ 4,367	<i>represents 5% increase</i>
HSI Program Coordinator- .75 FTE	\$ 43,000	\$ 66,575	\$ 23,575	<i>add .25 FTE from 2016</i>
PE+ HH Curriculum Support	\$ 12,500	\$ 15,000	\$ 2,500	<i>Julie Engberg</i>
HSI Evaluation Support Contractor	\$ 25,000	\$ 50,000	\$ 25,000	<i>Mike Newlin- increase SOW</i>
Total Program Management	\$ 167,833.00	\$ 223,275.00	\$ 55,442.00	
GRAND TOTAL	\$ 3,536,743.00	\$ 3,980,085.00	\$ 443,342.00	



2017-18 School-Based Grants Recommendations

Total Amount of Grant Funding Recommended= **\$327,000**
15 grants, includes **3 new** applications

By category of service, the 2017-18 recommendations are:

Nutrition Education: \$24,000

Organization: Adelante Spanish Immersion School

Program Name: Nutrition Ambassador Garden Program

Renewal Application (3rd year funding)

Program Description: Grant supports school garden and outdoor classroom coordinator who provides structured nutrition training and leadership opportunities to students in the 4th and 5th grades. Students are coached to co-lead nutrition-based activities and/or games with their peers at the school and families at home

Expected Outcomes:

- Increased knowledge of nutrition concepts by Adelante students
- Increased consumption of fruits and vegetables during school lunch
- Increased consumption of fruits and vegetables at home
- Increased leadership skills
- Students become health ambassadors

Program budget: \$39,750

Requested amount: \$15,125

Amount approved: \$14,000 (35% of program budget)

School Contribution: \$23,625 (PTO)

Schools Served: Adelante Spanish Immersion- RCSD

Number served:

- Students: 463
- Caregivers: 1000
- School staff: 19

Service units per client:

- Students: 12
- Caregivers: 5
- School staff: 4

Cost per unit: \$.71; **Per Client:** \$10.08

Organization: John Gill Elementary PTO

Program Name: Education Outside Garden Program

***New Application**

Program Description: Teaches hands on nutrition science and health education. Students learn where their food comes from and that they can be agents in growing that food. As agents in growing their own food they may be willing to try new foods. Their bodies may be strengthened by time spent tending to the garden.

Expected Outcomes:

- Increased knowledge of nutrition concepts by Adelante students
- Increased consumption of fruits and vegetables during at home and school
- Students will learn about the nutrients in their food
- What is healthy and what is not
- Students will learn about where their food comes from and that they can be agents in growing that food. As agents in growing their own food we hope that they will be willing to try new foods such as kale and fava beans.
- Their bodies will be strengthened by time spent tending to the garden

Program budget: \$22,000

Requested amount: \$11,000

Amount approved: \$10,000 (50% of program budget)

School Contribution: \$11,000 (PTO)

Schools Served: John Gill Elementary- RCSD

Number served:

- Students: 325
- Caregivers: 0
- School staff: 0

Service units per client:

- Students: 38
- Caregivers: 0
- School staff: 0

Cost per unit: \$3.56; **Per Client:** \$67.70.

Social Emotional Health: \$191,000

Organization: Adolescent Counseling Services

Program Name: On-Campus Counseling Program

Renewal Application: (6th year funding)

Program Description: Provides free, one-on-one mental health assessments, depression screenings, ongoing individual therapy, supportive services, and education to youth, parents/caregivers, and school staff on campus, during school hours

Expected Outcomes:

- 425 students will receive individual therapy and depression screenings
- 25 students will participate in support groups
- 175 parents/caregivers will receive mental health education
- 75 school staff will receive mental health education.
- For students seen five or more times: 1) 70% of clients with an individualized treatment plan will partially or fully achieve their goals at the conclusion of therapy; 2) 75% will improve their level of functioning and increase coping skills as evaluated by their therapist or counselor; 3) 80% will report that the counseling they received was "helpful" or "very helpful", as reported during the client exit interview; and 4) 60% of students identified as mildly depressed will show a reduction of depressive symptoms at the conclusion of therapy.

Program budget: \$887,778

Requested amount: \$50,000

Amount approved: \$25,000 (2.8% of program budget)

School District Contribution: \$85,000

Schools Served: Woodside High School, La Entrada Middle School

Number served:

- Students: 450
- Caregivers: 175
- School staff: 75

Service units per client:

- Students: 4
- Caregivers: 1
- School staff: 1

Cost per unit: \$173; **Per Client:** \$508

Organization: Friends for Youth

Program Name: Connect Mentoring Initiative

Renewal Application: (2nd year funding)

Program Description: Aims to ensure that students are safe, thriving, healthy, and succeeding in school, with the positive support of a community mentor

Expected Outcomes:

- Positively impact the frequency and quality of the youth's school involvement.
- Building life-skills and academic engagement with 100% of the youth in the program remaining in school
- Mentors provide motivation, structure, and support that lead to reduced suspensions due to behavioral issues, enhanced school attitudes and engagement, improvement in effort towards schoolwork, and an improvement of grades
- Enrich key ancillary skills (e.g., behavioral, emotional, physical health) of at-risk youth
- Develop connectedness and improve youth's relationships with their parents, peers, and other key adults

Program budget: \$198,826

Requested amount: \$50,000

Amount approved: \$50,000 (25% of program budget)

School District Contribution: \$85,000

Schools Served: Sequoia and Carlmont High School

Number served:

- Students: 133
- Caregivers: 108
- School staff: 2

Service units per client:

- Students: 4
- Caregivers: 1
- School staff: 1

Cost per unit: \$173; **Per Client:** \$508

Organization: Children's Health Council

Program Name: Teen Mental Health Initiative

***New Application**

Program Description: Program seeks to expand CHC's work with teens and families with mild to severe symptoms of anxiety and depression to focus on community engagement. Senior Engagement Manager will be hired to work directly with schools and will be overseen CHC's Clinical Services Director.

Expected Outcomes:

- Increased cross-collaboration among schools and districts throughout San Mateo and Santa Clara County
- Increased support for counselors and wellness coordinators
- Collaboration between CHC and schools/districts to provide services and fill gaps in mental health and wellness (especially education and therapy)

Program budget: \$398,500

Requested amount: \$16,500

Amount approved: \$16,500 (4% of program budget)

School District Contribution: \$0

Schools Served:

- All Belmont-Redwood Shores elementary and middle schools
- Las Lomas (K-3), La Entrada (4-8)
- Menlo Park- Hillview (6-8)
- San Carlos Central (5-8), Arundel (K-4), Tierra Linda (5-8)
- All Sequoia Union High School District Schools + Redwood

Number served:

- Students: 1000
- Caregivers: 500
- School staff: 150 (counselors and Wellness Coordinators)

Service units per client:

- Students: 5
- Caregivers: 10
- School staff: 105

Cost per unit: \$150; **Per Client:** \$150

Organization: San Carlos Charter Learning Center

Program Name: School Counselor

Renewal Application (5th year funding)

Program Description: Supports students in the realm of social emotional learning both within the classroom and in outside environments. The program supports the learner within the classroom by helping to develop greater self-esteem, problem solving skills, social skills, emotional regulation and conflict management. Also, the counselor works directly with the staff to help support learners within the classroom by developing skill specific lessons or modifications to the current classroom setup

Expected Outcomes:

- Parent support through direct sessions with parent groups, parent support in Special Education meetings, parent conferences and planned parent education meetings.
- Curriculum development and implementation being an integral part of the classroom support given to the staff as they impart lessons to help with classroom culture
- Direct service to the learner population, both group and individual counseling as shown by the number of learners receiving direct service on a weekly or bi-weekly basis by the counselor.

Program budget: \$47,000

Requested amount: \$25,000

Amount approved: \$25,000 (49% of program budget)

School Contribution: \$22,000

Schools Served: San Carlos Charter Learning Center

Number served:

- Students: 250
- Caregivers: 55
- School staff: 35

Service units per client:

- Students: 2-3
- Caregivers: 1
- School staff: 1

Cost per unit: \$40; **Per Client:** \$80-\$120

Organization: Star Vista

Program Name: Youth Development Initiative

Renewal Application (6th year funding)

Program Description: Offers Peer Mediation, an innovative program that recruits and equips students with the tools to facilitate and resolve conflicts in a peaceful manner and make their schools safer. A recently developed peer education component offers students conflict resolution workshops with the goals of using their Peer Mediation training to educate students about the mediation process, conflict and its sources, and strategies and skills of effective communication. The program also includes the Youth Advisory Board (YAB), which functions as the student voice for the Sequoia Teen Resource Center

Expected Outcomes:

- increase in respect for others opinions
- improvement in adult connections
- increase in knowledge about community services
- increase in future goal setting

For the Leadership and Resiliency program participants

- increased attendance
- increased school and community bonding
- improvement in adult connections

Program budget: \$102,550

Requested amount: \$30,000

Amount approved: \$25,000 (25% of program budget)

School Contribution: \$36,500

Schools Served: Sequoia High School

Number served:

- Students: 2,000
- Caregivers: 0
- School staff: 150

Service units per client:

- Students: 2-3
- Caregivers: 0
- School staff: 2

Cost per unit: \$13.27; **Per Client:** \$45.47

Organization: Star Vista

Program Name: Star Vista School Based Counseling Services at Arbor Bay

Renewal Application (5th year funding)

Program Description: Provides a qualified mental health clinician to Arbor Bay School to provide social and emotional support for students with significant learning challenges and their families. These services include crisis intervention, individual and group counseling, classroom observation, teacher and staff consultation, parent education and support, and, when appropriate, referrals to other services.

Expected Outcomes:

- enhanced school performance
- increased school and community bonding
- social and familial relationships
- improved emotional symptoms
- improved behavioral symptoms
- improved insight and judgment

Program budget: \$14,000

Requested amount: \$12,000

Amount approved: \$12,000 (86% of program budget)

School Contribution: \$2,000

Schools Served: Arbor Bay, San Carlos

Number served:

- Students: 15
- Caregivers: 15
- School staff: 15

Service units per client:

- Students: 18
- Caregivers: 18
- School staff: 6

Cost per unit: \$63.36; **Per Client:** \$633

Organization: YMCA of Silicon Valley/Project Cornerstone

Program Name: School Partnerships

Renewal Application (5th year funding)

Program Description: Project Cornerstone School Partnerships brings together all stakeholders in a school community (young people, parents, and school staff) to address the social and emotional needs of students to improve school climate and create caring communities of learners

Expected Outcomes:

Parent Engagement:

- 85% of parents will report that they are making efforts to support their own children and other children in their community.

Student Engagement:

- 80% of students that participate in the Expect Respect workshops will report that they are more likely to support other students that are bullied.

Parent Workshops:

- 90% of workshop participants will report that they are making efforts to support their own children and other children in their community.

School Staff Engagement:

- 85% of school staff will take time to intentionally build relationships with their students.

Program budget: \$423,038

Requested amount: \$15,000

Amount approved: \$12,500 (8% of program budget)

School Contribution: \$165,000

Schools Served:

- Las Lomitas
- La Entrada (4-8)
- Henry Ford (k-8)
- John Gill (k-8)
- North Star (3-8)
- Arroyo (4-5)
- Rocketship (k-8)

Number served:

- Students: 1800
- Caregivers: 85
- School staff: 30

Service units per client:

- Students: 8
- Caregivers: 6
- School staff: 1

Cost per unit: \$1.00; **Per Client:** \$8.00

Preventive Health/Screening: \$40,000

Organization: Prevent Blindness Northern California

Program Name: See Well to Learn

Renewal Application (3rd year funding)

Program Description: Provides comprehensive vision screening and intervention for students requiring glasses and referrals and counseling for parents of students with more serious vision issues. Program seeks to correct undiagnosed vision issues in order to enable children to achieve academic success, kindergarten readiness, third grade reading proficiency and improved social and behavioral outcomes

Expected Outcomes:

- Screening at least 782 students (allowing for 8% absences)
- Follow-up exams to approximately 102 students (~13% of all students)
- Provide free prescription glasses to all students needing glasses. Children with high prescriptions receive two free pairs of glasses, one for school and one for home.
- Follow-up parent compliance calls for 90% of students receiving glasses (calls will be made to all numbers 90% success rate based on past experience.)
- At least 75% of parents surveyed at the party will report that glasses have significantly improved their child's life and/or improved behavior, cooperation and/or engagement

Program budget: \$114,000

Requested amount: \$50,000

Amount approved: \$40,000 (35% of program budget)

School Contribution: \$0

Schools Served:

- Redwood City Elementary - Roosevelt (k-5)
- Redwood City Elementary - Selby Lane (k-8)
- State Preschool Programs - Redwood City School District: Redwood City; Hoover State Preschool (RCSD), Hawes CDC (RCSD), Taft CDC (RCSD), Roosevelt (RCSD), Fair Oaks (RCSD), Garfield Children's Center (RCSD), John Gill (RCSD), Child Dev Ctr-John Gill St. Preschool, Selby Lane CDC (RCSD), Child Dev Ctr-Henry Ford Child Dev. Ctr.-Preschool, Clifford Elementary (RCSD), Taft Elementary (RCSD), Fair Oaks (RCSD), Fair Oaks Head Start Center — IHSD, Menlo Park Head Start Center — IHSD, and City of Menlo Park, Bellehaven Child Development Center

Number served:

- Students: 782
- Caregivers: 782
- School staff: 32

Service units per client:

- Students: 2
- Caregivers: 2
- School staff: 1

Cost per unit: \$85.75; **Per client:** \$115.38

Physical Education/Activity: \$72,000

Organization: Jasper Ridge Farm

Program Name: Horsebuddies

Renewal Application: (4th year funding)

Program Description: Through animal assisted activities, Horsebuddies seeks to enrich the lives of students who are living with special needs, facing life threatening illnesses, or facing family challenges such as homelessness or domestic violence. Students are engaged intellectually, emotionally, socially, soulfully and physically

Expected Outcomes:

- Increase the physical activity of each student (flexibility, balance, coordination and muscle strength)
- Increase the emotional and social well being of each student-activities in this program encourage and nurture relationship development: student to self, student to others, and student to the world at large.
- Increase the cognitive skills of each student - communicate more effectively, increase attention span, improve social interactions improve, including eye contact, vocal volume and expressive language

Program budget: \$50,800

Requested amount: \$12,700

Amount approved: \$12,500 (25% of program budget)

School District Contribution: \$0

Schools Served:

- Belmont-Redwood Shores Elementary - Ralston (6-8)
- Las Lomitas Elementary - La Entrada (4-8)
- Menlo Park Elementary - Hillview (6-8)
- Portola Valley Elementary - Corte Madera (4-8)
- Redwood City School District:
 - Garfield (k-8)
 - Hoover (k-5)
 - Kennedy Middle (6-8)
 - Roosevelt (k-5)
 - Roy Cloud (k-8)

- Selby Lane (k-8)
- Taft (k-8)
- San Carlos School District
 - Brittan Acres (k-4)
 - Heather (k-4)
 - White Oaks (k-4)
 - Central (5-8)
 - Arundel (k-4)
 - Tierra Linda (5-8)
- Sequoia Union High School District
 - Carlmont (9-12)
 - Menlo-Atherton (9-12)
 - Sequoia (9-12)
 - Woodside (9-12)
 - Redwood Alternative (9-12)
- Woodside Elementary (k-8)

Number served:

- Students: 130
- Caregivers: 0
- School staff: 13

Service units per client:

- Students: 3
- Caregivers: 0
- School staff: 3

Cost per unit: \$119; **Per Client:** \$357

Organization: Redwood City 20/20

Program Name: Safe Routes to School

Renewal Application: (6th year funding)

Program Description: This program utilizes national framework set for Safe Routes to School (SRTS), which includes five components, Education, Enforcement, Encouragement, Engineering, and Evaluation. Support for walking and biking to school programs help increase physical activity goals. Activities include organizing walking school bus routes, providing outreach and educational programming for both students and families, gathering data on barriers to walking and biking to school, as well as writing grants and working with stakeholders to address barriers

Expected Outcomes:

- Increase parents'/caregivers' awareness of Safe Routes program offerings by 15% as measured by Fall and Spring parent/caregiver surveys
- Improve safety by providing 600 students proper bicycle and pedestrian safety education
- Increase the amount of students walking or biking regularly to school as measured by student travel tally surveys
- Improve infrastructure for safe walking and bicycling to school by collaborating with Redwood City School District, City of Redwood City and San Mateo County partners to reduce infrastructural barriers to walking and biking to school

Program budget: \$120,000

Requested amount: \$15,000

Amount approved: \$12,500 (10% of program budget)

School District Contribution: \$0 (County Office of Ed funds majority)

Schools Served:

- Redwood City School District
 - Clifford (k-8)
 - Fair Oaks (k-5)
 - Garfield (k-8)
 - Henry Ford (k-8)
 - Hoover (k-5)
 - John Gill (k-8)
 - Kennedy Middle (6-8)
 - MIT (k-8)
 - North Star (3-8)
 - Roy Cloud (k-8)
 - Selby Lane (k-8)
 - Taft (k-8)

Number served:

- Students: 2,000
- Caregivers: 120
- School staff: 50

Service units per client:

- Students: 2.5
- Caregivers: 3
- School staff: 3

Cost per unit: \$21; Per Client: \$52.85

Organization: Families United

Program Name: United through Education

***New Application**

Program Description: A 9-session family engagement workshop to low income families that teaches them to create and implement good habits concerning academics, living a healthy lifestyle, and what resources are available to them to support their health and how to access these resources.

Expected Outcomes:

- Familias Unidas is typically the first class that parents participate in at their school. Only 5% of families reported to have participated in another class prior to attending Familias Unidas.
- Before attending the Familias Unidas class, 10% of the families reported having a reading routine compared to 86% after completing the class. 10% of the total graduated families also claimed to read 3 times or more per week, which increased to 90% of the families at the end of the classes.
- Only 5% of the family members had library cards prior to the Familias Unidas class and by the end all members, including children, received library cards.
- 0% of the 850 families knew how to find appropriate books for their children's reading level and all 850 families stated that they had this knowledge to by the end of the workshop.
- 95% of the families reported to have the confidence to communicate with teachers regarding the progress of their children in all areas compared to the 15% of families at the beginning of the class.
- United through Education has seen an increase of physical activity and healthy food choices within the families. Specifically, only 15% of families had an exercise routine prior to starting the class compared to 80% at the end. 95% of the families reported to have knowledge regarding how to distinguish between nutritious foods and serve nutritious meals for their families compared to only 20% at the start of the class.
- Only 10% of families reported to be aware of prevention and the risks related to diabetes compared to the 95% when asked at the end of the session.
- 85% of parents reported a decrease in their stress level after learning about parenting strategies and how to support their children at home.

Program budget: \$225,000

Requested amount: \$50,000

Amount approved: \$30,000 (22% of program budget)

School District Contribution: \$0

Schools Served:

- Redwood City School District
 - Adelante (k-8)
 - Fair Oaks (k-5)
 - Garfield (k-8)
 - Hawes (k-8)
 - Henry Ford (k-8)
 - Hoover (k-5)
 - John Gill (k-8)
 - Selby Lane (k-8)
 - Taft (k-8)
 - State Preschool Programs in RCSD

Number served:

- Students: 1080
- Caregivers: 790
- School staff: 0

Service units per client:

- Students: 9
- Caregivers: 9
- School staff: 0

Cost per unit: \$18.33; **Per Client:** \$165

Organization: St. Francis Center

Program Name: Holy Family School PE, Community and Outdoor Health and Wellness Education Program

Renewal Application: (4th year funding)

Program Description: Support students; faculty and parents to gain opportunities to be outdoors and create an educational community learning model. This program helps Holy Family School continue to learn how to be active in and outdoors in local parks, regional parks and state parks. This is a collaborative initiative with the Stand Up 8 Running Program and 1 Grain to 1000 Grains to teach a classes for youth and their families during school and afterschool about fitness and nutrition as well as overall health

Expected Outcomes:

- Twenty six Holy Family School grade 4 students grades will engage in structured physical activities in nature including traditional sports centered around a ethnic studies PE Curriculum, running (trail and on pavement), hiking classes, and biking classes.
- Holy Family School students will have structured PE time during their extended school day twice a week.
- Youth and parents will participate in three 5k runs throughout the school year.
- 4th Grade youth will help plan the 5th Annual North Fair Oaks Bike Rodeo event as a community service event.
- SYC, Holy Family School staff and parents will participate in community development days that build on collaboration and reaching peak performance to assist the overall mission of the school and organization
- Youth and families will participate in workshops and dialogue seminars on healthy foods and exercise once a month from 1 Grain to 1000 Grains Nutrition Program.

Program budget: \$69,136

Requested amount: \$17,000

Amount approved: \$17,000 (24% of program budget)

School Contribution: \$0

Schools Served: Holy Family School

Number served:

- Students: 26
- Caregivers: 30
- School staff: 9

Service units per client:

- Students: 49
- Caregivers: 27
- School staff: 11

Cost per unit: \$5.57; **Per Client:** \$195.40

() indicates SHCD newly funded programs*

PUBLIC RECORDS REQUESTS

1.1 Requests for public records shall be subject to the California Public Records Act (California Government Code Sections 6250 et seq.) and shall be handled according to the provisions of that act.

1.2 The District may charge a reasonable fee for copying records provided by the requesting party. The charge shall be \$0.15 per page for normal size pages and shall be adjusted for odd sized pages or copies that require special handling. The Chief Executive Officer or designee may waive the charge for incidental copies, not exceeding 10 pages, that require minimal handling. There shall be no charge for copies of documents provided as part of a public meeting.

1.3 If the request is expected to involve a significant amount of copies and effort, District staff may make an estimate of the cost. District staff may then ask the requesting party to confirm that the proposed charge and delivery time are acceptable and to signify acceptance in a reasonable manner (written approval, email, etc.). District staff may require a deposit of the estimated cost before making copies. Once the requesting party has agreed to the estimated cost and delivery date, District staff will have the copies made and will deliver the copies when full payment is received.

1.4 If a person requests to inspect certain documents, District staff will provide such an opportunity within a reasonable period of time after the request. The document inspection may, at District staff's discretion, be conducted under the supervision of a District employee. No documents may be removed, copied or tampered with in any way, without the District staff's permission. All copying requests will follow the procedures outlined in policies 19.1, 19.2 and 19.3.

1.5 **The District shall issue an email address, using the District's domain name, to all employees and Directors.**

a) Employees are required to use their District email account for all District-related communications.

b) Directors are encouraged to use their District email account for District-related communications. Email communications on a Director's personal or business account that relate to District business are subject to disclosure under the Public Records act. Directors who do not utilize their District email account shall make their personal and/or business email accounts available for review by the District's legal counsel when necessary to comply with a request under the Public Records Act.



FOR YOUR HEALTH

2017 – 2020

Strategic Plan

June 2017

Table of Contents

1. Introduction
2. Planning Committee
3. Planning Process Including Next Steps
4. Mission and Vision Statements
5. 2017 SWOT Analysis
6. Goals and Key Actions to Achieve Goals

Appendix

- A. List of Participants Providing Input
- B. Strategic Planning Questions
- C. Health Assessment Data
- D. Suggestions and Comments from Participants
- E. Health Concerns for our District per Scott Morrow, MD
- F. 2014 SWOT Analysis
- G. 2017-2020 Financial Commitment Chart
- H. 2017-2020 District Schedule

Introduction

The goal of the strategic planning committee was to draft a document that sets the framework for the District for the timeframe of July 1, 2017 to June 30, 2020.

Planning Committee

The committee consisted of two Board members: Jerry Shefren and Katie Kane, and two staff members: Lee Michelson and Pamela Kurtzman. The committee met from January – April, 2017 with more than fifty (50) community leaders who provided comments and suggestions.

Planning Process

The committee met with community leaders, some of them in small groups and some individually. The meetings lasted about one hour each and strategic questions were discussed. In addition, the committee reviewed local health data and met with Dr. Scott Morrow, the Medical Director of San Mateo County. The committee met four times to discuss what was learned and have collectively produced the draft of the plan.

Next Steps

1. On May 16, the Board will meet to review and recommend changes to the Draft.
2. On June 15, the Board will meet to adopt the new strategic plan.

Mission Statement

To improve the health of the District residents by enhancing access to care and promoting wellness.

Vision Statement

To improve the health of our community through responsible stewardship of District taxpayer dollars.

100% Return Policy

Sequoia Healthcare District is committed to returning all current tax dollars back to the community through health services.

2017 S.W.O.T. Analysis

STRENGTHS

1. District has wide support from those interviewed and our efforts to provide access to care and health prevention services.
2. Tax revenue provides a dependable and growing source of income.
3. District has strong financial reserves and they are invested in low-risk instruments.
4. District staff is experienced and knowledgeable and are recognized as leaders in the field.
5. District provides services to more than 50,000 residents per year.
6. Districts ability to be nimble and react to new opportunities or challenges quickly.
7. District "partnership" approach to working with grantees to address health concerns is well received.

WEAKNESSES

1. EBIDA payments are anticipated to be \$0 during the next few years.
2. Due to conservative government regulated investment policy, the interest earned on investments is very low.
3. District's small staff size limits our opportunity to thoroughly develop relationships with strategic partners such as other funders and program experts.

OPPORTUNITIES

1. There continues to be significant unmet health care needs in our community.
2. The complicated nature of health care created the need for better coordination and collaboration of services.

THREATS

1. Unmet community health care needs will continue to outweigh our funding capacity
2. Public support for programs impacting undocumented residents may erode.
3. Unknown effects of Federal cuts in support for health services.

2017-2020 Strategic Goals and Key Actions

Goal 1 - Assure the prudent oversight and management of District assets.

Key Actions

1. Staff will prepare an annual income and expense budget for Board approval at the June Board meeting with a draft budget submitted for the April or May Board meeting. Staff will provide projected income and expenses every two months and will present a performance-to-date at each Board meeting. Staff will not over-spend expense budget unless approved by the Board. Budget will be listed on website.
2. District will contract for an annual audit and report findings to the Board through a presentation by the auditors. The audit will be listed on the website.
3. District will engage an investment company to coordinate investments and management of District reserves and will monitor performance to assure that our policies and procedures are being closely followed. Investment reports will be presented to the Board.
4. Staff will provide the Board via email a copy of our monthly check register and will provide detail when asked.
5. District CEO will review all invoices and approve before payments are made.

Goal 2 - Support the best health programs that serve all of our residents and assure that grantees are selected solely on expected health outcomes.

Key Actions

1. District will require all grantees applying for funds through the Community Grants process to provide a letter of intent and application

- to be reviewed by staff and a grants committee that includes up to two Board members and four community members.
2. All grantees will be required to submit a mid-year report and end of year report detailing service outcomes including how many residents were served and outlining how District funds were spent for staff review.
 3. For all grantees applying for funds outside the grants process (Major Initiative with request exceeding \$100,000), the grantee must submit a formal request to the staff. These requests will be evaluated by the Board of Directors and if approved a memorandum of understanding will be developed spelling out the expected health outcomes and number of residents to be served.
 4. For all new grantees, staff will meet in –person with grantee staff and when necessary make site visits to witness programs. Staff may choose to reach out to program specialists to assist in reviewing requests.
 5. Staff will review grantee program policies to assure that all programs are available to all residents without prejudice and ideally have a scholarship or sliding scale program for lower-income residents.

Goal 3 - To be a catalyst for bringing new programs and approaches in health care to our area that have been successful in other places.

Key Actions

1. Staff will review the projects of other health care districts to identify successful programs that can be brought to our area.
2. Staff will attend conferences where impactful programs are discussed to ascertain their merit and feasibility for our area. Follow-up visits to see the programs in action may be required.
3. Staff will be receptive to meet with program developers to discuss their ideas.

Goal 4 - To be a leader in bringing organizations together to support good ideas that benefit our residents and to participate in supporting County-wide efforts.

Key Actions

1. District representatives will play an active role in community collaboratives and where appropriate take on a leadership role.
2. District will monitor who else is funding health programs and when appropriate work with them to better leverage funds.
3. District will encourage grantees to work collaboratively when such cooperation leads to better health outcomes. The District may provide forums to foster relationships among grantees.

Goal 5 - Communicate with District residents through a wide approach to communications including an active website, a social media presence, public presentations, and our annual newsletter mailing.

Key Actions

1. Email addresses will be gathered from residents so that annual reports and other communications can be sent to them electronically.
2. Staff will seek opportunities to make presentations to community groups.
3. Efforts will be made to encourage public attendance and participation at Board meetings.
4. Staff will assure that our website is regularly updated and current.

Goal 6 - Create and manage our own programs and services to complement what is offered by other community-based organizations or to fill gaps if such services are not adequately offered.

Key Actions

1. To adequately manage our programs including the hiring and supervision of staff.
2. Identify partner organizations to co-develop and lead programs when such partner organizations have the required expertise.
3. To regularly assess the needs of our community and to understand who are the service providers addressing these issues.

Goal 7 - Serve all segments of our community, all age groups, all income groups and geographic areas within the District with special attention given to areas and populations where there is a demonstrated special need and to do so in a culturally sensitive manner.

Key Actions

1. Annually assess our activities and budget to assure that our support is reaching all segments of our community and where ratios have been established determine if our outcomes meet or exceed expectations.
2. Develop relationships with organizations that serve special needs populations.
3. Produce communication materials that are culturally sensitive and language friendly.

Goal 8 – To be transparent and informative of District Activities.

Key Actions

1. Conform to all guidelines outlined in the ACHD certification process.
2. Review websites of other Districts and look for ideas that can be added to our website that better inform our residents of our activities.
3. Post minutes of our Board meetings on our website within 10 days of the meeting.

Appendix

Participants

The following community leaders of non-profit executives, school leadership, key elected officials and their staff, health care executives and representatives from business, law enforcement as well as community volunteers were selected to provide comments and suggestions to the planning committee. The majority of the participants were keenly aware of some programs and services of SHD; background materials about the District including our budget and previous strategic plan were mailed to them in advance.

Ms. Maya Altman and
Mr. Patrick Curran
Health Plan of San Mateo

Mr. Rafael Avendano
Sienna Youth Center

Mr. Craig Baker
San Carlos Schools

Mr. Frank Bartaldo
United American Bank

Mr. Chris Beth
Redwood City Parks and
Recreation

Ms. Amy Buckmaster
Redwood City Chamber of
Commerce

Ms. Lisa Cesario
Las Lomas Schools

Mr. Bart Charlow
Samaritan House

Dr. Steven Adelsheim
Stanford Dept. of Psychiatry

Ms. Luisa Bauda
Ravenswood Family Health
Center

Mr. John Baker
Redwood City Schools

Assembly member Marc Berman

Sheriff Carlos Bolanos
San Mateo County

Ms. Beth Boldt
Belmont- Redwood Shores
Schools

Ms. Anne Campbell
County Office of Education

Dr. Anand Chabra
San Mateo County Health System

Mr. David Fleishman
4 C's San Mateo

Mr. Peter Fortenbaugh
Boys and Girls Club of the
Peninsula

Mr. Bill Graham
Sequoia Hospital

Ms. Mindy Hill
San Carlos Schools

Dr. Ramsey Khasho
Children's Health Council

Dr. Karen Li
Sequoia Union High School
District

Ms. Melissa Lukin
CORA

Ms. Ginny Maiwald
Menlo Park Schools

Dr. Michael Milliken
Belmont- Redwood Shores
Schools

Mr. Tom Mohr
San Mateo Community College
District Board

Ms. Katherine Peterson
Woodside Schools

Ms. Carrie Du Bois
Sequoia Union High School Board

Mr. Michael Garb
First 5 Commission/Thrive

Ms. Andrea Garen
Redwood City Schools

Mr. Brian Greenberg
Life Moves

Ms. Kathy Jackson
2nd Harvest Food Bank

Dr. C.J. Kunnappilly
San Mateo Medical Center

Ms. Kitty Lopez
First 5 San Mateo

Ms. Alisa Mac Avoy
Redwood City School Board

Mr. John Maltbie and
Ms. Peggy Jensen
San Mateo County Manager

Dr. Sara Mitchell
Star Vista

Dr. Scott Morrow
San Mateo County Health System

Mr. Bryan Neider
Gatepath

Ms. Beth Polito
Woodside Schools

Mr. Alan Sarver
Sequoia Union High School
District Board

Supervisor Warren Slocum and
Carole Marks

Ms. Srija Srinivasan
San Mateo County Health System

Ms. Paula Uccelli
Uccelli Foundation

Ms. Melissa Platte
Mental Health Association

Ms. Louise Rogers
San Mateo County Health System

Ms. Kristen Shima
Corte Madera School

Ms. Robin Spindler
Las Lomas Schools

Ms. Kim Staff
Menlo Park Schools

Dr. Yogita Thakur
Ravenswood Family Health
Center

Strategic Planning Questions

1. What percentage of District dollars should be allocated for treatment of acute or chronic disease and what percentage for more prevention focused strategies?
2. How should the District balance its commitment to all residents vs. special needs or at-risk groups?
3. Is it better to take a wide approach and tackle many issues including what might be viewed as smaller programs or limit efforts at broader bigger approaches?
4. Is it ok for the District to support capital or capacity building projects in addition to program support or instead of program support?
5. Should SHD remain a local independent special district or should it look to merge with the other government entities?
6. Is the District most beneficial as a funder of community programs or are there other key roles such a program developer/manager, policy advocate or convener?

Additionally, we also asked if there were any specific health issues that we should pay particular attention to over the next couple of years or any that we should avoid.

Sequoia Healthcare District Needs Assessment

Summary Report

This summary report displays data found on health need indicators in the Sequoia Healthcare District (SHD). The SHD's status on each health indicator is compared to Healthy People 2020 targets (when available) and state and county averages. The SHD includes: Atherton (94027), Belmont (94002), Foster City (94404), Menlo Park (94025), Portola Valley (94028), Redwood City (94019, 94061, 94063, and 94065), San Carlos (94070), San Mateo (94403), and Woodside (94062). Comparison counties for this report include: San Mateo County as well as Alameda County, Napa County, and Santa Clara County.

The SHD covers an area with a total population of 220,000. The majority of the population in the SHD is White (69%) and 23% of the population is Latino. The median family income for families in San Mateo County is \$117,149, higher than the median family income reported for families in the Redwood City Elementary District (\$107,034) but lower than reported for the Sequoia High School District (\$134,974). Compared to the state and the other comparison counties, the SHD has a smaller percentage of the population in poverty (18% versus 20%-28% in comparison counties and 36% for the state).

Healthcare Access

Healthcare access is lower than comparison counties.

- The rate of primary care physicians (per 100,000) is lower in the SHD (97.5) than San Mateo (99.1), Alameda (106.1), Napa (101.9) and Santa Clara Counties (105.9). However, the SHD rate is higher compared to the state rate (78.5).
- The density rate of Federally Qualified Health Centers (per 100,000) is lower in the SHD (0.33) compared to each comparison county (between 0.56-5.86) and the state rate (2.37).

Major Health Conditions

Asthma prevalence in San Mateo County is higher than the state.

- Sixteen percent of adults 18 and older in San Mateo County have asthma, similar to the 16% of adults in Alameda County. Asthma prevalence is higher in San Mateo County than Napa County (14%), Santa Clara County (14%), and the state (14%).

Breast, colorectal, and prostate cancer incidence rates in San Mateo County are higher than benchmarks.

San Mateo County compared to the state:

- *Slightly higher percentage of low birth weight births*
- *Slightly higher percentage of adults with no HIV/AIDS screening.*
- *Slightly lower percentage of adults managing their diabetes.*
- *Higher percentage of adults drinking excessively.*

- Prostate and breast cancer incidence rates for San Mateo County (140.0 and 138.3, respectively) are higher than the state targets (126.9 and 122.1, respectively). Compared to the HP2020 benchmark (38.7), San Mateo County has a higher colorectal incidence rate (40.0).

Excessive alcohol consumption in San Mateo County is higher than the state.

- The percentage of adults drinking excessively in San Mateo County (22%) is higher than Alameda (20%) and Santa Clara Counties (14%) and the state (17%).

The mortality rate due to intentional self-harm (suicide) is higher than comparison counties but lower than benchmarks.

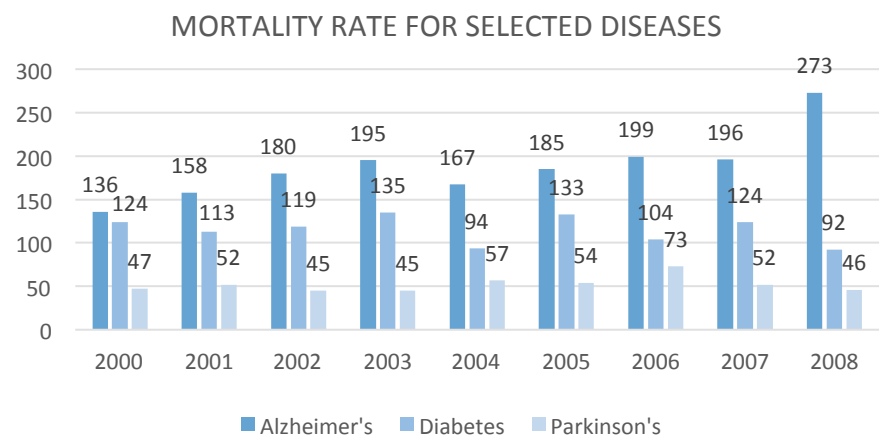
- The age-adjusted mortality rate (per 100,000) due to intentional self-harm (suicide) is higher in the SHD (8.62) than San Mateo (8.29), Alameda (8.16), and Santa Clara Counties (7.90). However, the SHD fared well compared to benchmarks having lower rates than the HP2020 target (10.2) and the state rate (9.80).

The number of deaths due to Alzheimer's disease is rising.

- The mortality rate for Alzheimer's has been growing, while the mortality rate for other diseases of "old age" are shrinking (see chart to the right).

The mortality rate for coronary heart disease is higher than the HP 2020 benchmark.

- The age-adjusted mortality rate (per 100,000) for coronary heart disease is higher in the SHD (113.4) than the HP2020 target (100.8). However, the SHD rate is lower than each of the other comparison counties.



Source: Senior Health in San Mateo County – Current Status and Future Trends 2012.

Special education enrollment is increasing.

- The percentage of students enrolled in special education has increased for each school district in the SHD with the exception of Sequoia Union which declined slightly from 13% in 2011 to 11% in 2015.

Other related indicators for major health conditions are faring well compared to the benchmarks.

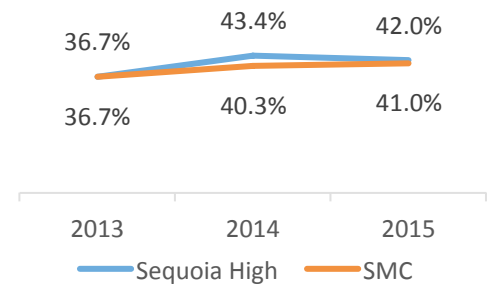
- The percentage of adults in San Mateo County smoking cigarettes (11%) is lower than the state (13%).
- The percentage of adults with poor mental health in San Mateo County (11%) is lower than the state (16%).
- Youth mental health indicators such as depression-related feelings and suicidal ideation are lower for students in the Sequoia Union School District compared to the state.

Physical Health

Disparities are found among students who meet healthy fitness standards.

- Wide disparities exist across school districts and grades in students meeting all fitness standards. In 2015, three-quarters of 7th grade students in Belmont-Redwood Shores met all fitness standards higher than students in Menlo Park City (62%), San Carlos (27%) and Redwood City (19%) School Districts.
- For 5th grade, more than half of students in Belmont-Redwood Shores and Menlo Park City School Districts met the standards compared to less than a quarter in San Carlos and Redwood City School Districts.
- The percentage of 9th graders in the Sequoia Union District meeting all the fitness standards has been increasing since 2013 (See chart above).
- Ethnic disparities can also be seen in 9th graders meeting the fitness standards. Asian students (60%) are more likely to meet all the fitness standards compared to other race/ethnicities and two times more likely than Latino students (27%).

Grade 9 Students Meeting All Fitness Standards, 2015



Source: As cited on kidsdata.org, California Dept. of Education, Physical Fitness Testing Research Files (Dec. 2015).

The Redwood City School District is not faring as well as the state in regard to student healthy weight.

- A higher percentage of 5th and 7th grade students in the Redwood City Elementary School District (45% and 44%, respectively) are overweight or obese compared to the state (40% and 39%, respectively).

Ethnic disparities are found among students who are overweight or obese.

- For 5th and 7th grade students, Latinos are more likely to be overweight or obese. For 9th grade students, Latino and Native Hawaiian/Pacific Islander are more likely than other race/ethnicities to be overweight or obese.

The rate of fast food restaurants is higher than the state.

- The SHD (79.53) has a higher rate of fast food restaurants (per 100,000) than San Mateo (73.77), Napa (63.01), and Santa Clara (78.69) Counties and the state (74.51).

San Mateo County compared to the state:

- Slightly higher percentage of youth with inadequate fruit and vegetable consumption.
- Lower percentage of adults who are overweight

Data sources: All indicator data was pulled from Community Commons with the exception of income, fitness, youth obesity, special education, school mental health data (kidsdata.org) and Alzheimer's disease data (Senior Health in San Mateo County – Current Status and Future Trends 2012).

Suggestions and Comments Summary

The following comments were made by the individuals that were interviewed during the planning process:

1. The District should remain primarily a funder but other roles suggested were: program provider, convener of interested parties around health issues, policy promoter, convener of funders to discuss mutual interests, community educator, catalyst for innovation and supporter for staff development and training. Additionally, it was suggested that the District should play a role in communicating to pediatricians to assure that every child has a consistent medical home for all services.
2. The District should consider exploring which of the roles identified above are needed and assess the impact they would have on District staff time recognizing that the current staff is small and any expanded activities may require adding personnel.
3. There are many health issues that need special attention but the most common issue is mental health services at all age levels. The District was encouraged to layout our plan as to how we want to address this issue and a budget that is significant which could include additional staff. Some of the other areas suggested for special attention were:
 - Childhood obesity
 - Oral health
 - Older adult health especially around dementia care
 - Homelessness and housing
 - Foster children
 - College age students (food security, mental health and oral health)
 - Teen pregnancy and family planning
 - Opiate addiction and other alcohol and drug addictions
 - Transportation availability and affordability

- Undocumented residents of all age groups and helping to assure that they maintain the ability to access care
 - Under age 5 population and pre-natal care with special focus on screenings and identification of learning and developmental delays
4. The District should be more focused on prevention than treatment while recognizing that there is some role for assuring treatment for our residents. Some participants suggested that prevention should be more than 50% of our budget, possibly closer to 65-70%, and the earlier that the District intervenes the better. More coordination with First 5 was encouraged by one party. It was suggested that prevention is a continuum and has many levels and not easily defined.
 5. The District was encouraged to remain a leader in prevention even if national funding cuts lead to an increased need in more money being spent for basic treatment. The County Manager and others indicated that the County may have to abandon some of its prevention efforts to address treatment, leaving the District as one of the only funders left that can move in the direction of prevention. The District would be wise to limit long-range funding until the national changes to healthcare are clear, as that may affect all recommendations.
 6. Our school program received significant praise and we were encouraged to remain a leader in school health. The Redwood City schools were mentioned as having greater needs in the years ahead, however, all school districts need some assistance. The schools have many unfunded mandates and District help is greatly encouraged and appreciated. Some interviewees commented on the need to continue shifting our efforts toward poorly funded schools and those serving the largest number of high need students.

7. The District policy to spend 100% of the annual tax income on grants and programs is well received and viewed to be the right policy.
8. The District should remain independent and there was not strong belief that we should merge or even expand our boundaries. Many mentioned that it would be a mistake to merge with the County in particular due to their bureaucratic structure. Our ability to remain nimble in our decision making was a major positive compared to other partners. Some did suggest that it would be good if we could find a way to incorporate East Palo Alto and east Menlo Park.
9. The District should support both large and small projects but a significant part of the budget should be directed to larger more focused programs. There seems to be universal agreement with using some funds for capital projects, especially when our support can be leveraged to get others to contribute. A few commented that the District is spreading itself too wide and that the Community Grants Program should consider fewer but larger grants. One group recommended investing in early childcare facilities.
10. The District should continue its efforts to be better known and encourage public awareness and support. The public needs to be made more aware of the health needs of the community and what the District is doing about them.
11. The District should have programming that benefits all income segments but possibly as much as 60-70% of our efforts should be directed at the lower-income communities. There is also a growing concern about the needs of the “economically challenged middle class” as it has become so expensive to live in this area.
12. Some focus should be given to innovation, however the district was encouraged to support proven, well-established programs and be a source for sustainability instead of being too drawn in to change for the

sake of change. Multi-year support was looked upon as a positive as long as the grantee continued to prove their worthiness.

13. Overall, there were very few participants who recommended any major or even intermediate changes from what was in our current strategic plan. The District was encouraged to remain mission driven and that all activities and funding should support our mission.
14. Many individuals mentioned the divide that exists among various segments of residents due to language and cultural differences. The District should take a lead role in assuring that cohesiveness and inclusion is a hallmark of our actions and the actions of those that we support.

Health Concerns for our District per Scott Morrow, MD

1. The increasing rate of obesity and its impact on chronic disease
 - Sugar-sweetened beverages
 - High-sodium diets
2. Environmental Safety
 - Promoting walking/biking
 - Supporting public transit
3. Early Literacy and Development
 - Supporting parent engagement
 - Early screening and diagnosis in areas like eyesight and hearing
4. Access to care for the uninsured
 - Support for clinics for the low-income
 - Private providers encouraged to be more supportive
5. Mental health and substance issues
 - Primary prevention
 - De-criminalization of substance abuse
6. Growing elderly population
 - Housing needs
 - Dementia
7. Youth asset development
 - Mentoring and supportive relationships
 - Support for after-school programs

Note: less emphasis on changing individual behavior and more commitment to system-wide change and policy development.

2014 S.W.O.T. Analysis

STRENGTHS

1. District has wide support from those interviewed and of our efforts to provide access to care and health prevention services.
2. Tax revenue provides a dependable source of income.
3. District has financial reserves and they are invested in low-risk instruments.
4. District is staffed to allow for proper management of District functions.

WEAKNESSES

1. EBIDA payments are anticipated to be less than projected.
2. There is insufficient awareness of the services provided through the Sequoia Healthcare District and by potential recipients of services and residents in general.
3. Low rate of return on reserved dollars invested.

OPPORTUNITIES

1. There continues to be significant unmet health care needs in our community.
2. The complicated nature of health care created the need for better coordination and collaboration of services.
3. Improve electronic connectivity with District residents.

THREATS

1. Unmet community health care needs will continue to outweigh our funding capacity.
2. Public support for programs impacting undocumented residents may erode.
3. Unknown effects of the Affordable Healthcare Act on our residents.

3 Year Commitment Chart (2017-2020)

As of 3/21/2017

	Organization	2017-18 Commitment	2018-19 Commitment	2019-2020 Commitment
1.	Ravenswood			
2.	Samaritan house	\$703,000		
3.	SMMC	\$340,000		
4.	70 Strong	\$731,000		
5.	Healthy Schools			
6.	HeartSafe			
7.	Living healthy			
8.	Other Grants	\$50,000		
9.	Caring Community			
TOTAL		\$1,824,000	\$0	\$0

Total C+Prop.	\$1,824,000	\$0	\$0
Anticipated Tax Income	\$11,800,000	\$12,300,000	\$12,900,000
Available for Additional Funding	\$9,976,000	\$12,300,000	\$12,900,000

SHD Schedule: 2017-2020

2017

MAY 2017	Draft of 3 year Strategic Plan presented to the Board
JUNE 2017	Strategic Plan for 2017-2020 approved by Board 2017-18 Budget approved by Board

2018

MAY 2018	Strategic Plan Year 1 progress report 2018-19 Budget Draft presented to the Board
JUNE 2018	2018-19 Budget approved by Board
NOVEMBER 2018	Board election for 3 Board positions

2020

JANUARY 2020	Planning process for 2020-2023 Strategic Plan begins
MAY 2020	Strategic Plan Year 3 progress report Draft of 2020-2023 Strategic Plan presented to the Board Draft of 2020-21 Budget presented to the Board
JUNE 2020	2020-2023 Strategic Plan approved by the Board 2020-21 Budget approved by Board
NOVEMBER 2018	Board election for 2 Board positions

2019

FEBRUARY 2019	Board officer's election
MAY 2019	Strategic Plan Year 2 progress report Draft of 2019-20 Budget presented to Board
JUNE 2019	2019-20 Budget approved by Board

Budget Narrative for 2017-18

Income: The only real adjustments on income are that we have increased the line item for tax income from \$11 million to \$11.8 million and we have reduced investment income from \$150,000 to \$100,000.

Expenses: No major administrative changes except we will not have an election this year and we have added the line item for purchased services of \$50,000 to cover costs related to the forensic audit associated with the development agreement. No material changes in the property expense area.

There are changes in the grants and program expense area:

1. San Mateo Medical Center decreases from \$537,000 to \$340,000
2. Nursing is decreased from \$613,000 to \$0 as we are no longer funding that program after June 30
3. Community Grants has been increased from \$2,100,000 to \$2,400,000
4. Mission Hospice decreases from \$500,000 to \$0 as we are done paying this grant
5. Sequoia 70 (70 Strong) is reduced from \$813,000 to \$732,000
6. School Health increases from \$3,500,000 to \$3,900,000
7. TBD – New Programs increases from \$1,100,000 to \$2,484,489

Estimated revenue & expense are 11 months actual YTD 5/31/17 plus June projected.

		Approved Budget 2016-2017	Estimated at 6/30/17	Draft Budget 2017-2018
Rental Income	(1)	\$ 48,048	48,048	\$ 48,048
Tax Revenue	(2)	11,000,000	11,500,000	11,800,000
Investment Income		150,000	66,275	100,000
Interest Income		7,700	7,700	7,700
Pension Income	(3)	3,800,000	3,800,000	3,800,000
Return on Investment SQ Hospital	(4)	-	-	-
Total Revenues		\$ 15,005,748	\$ 15,422,023	\$ 15,755,748
EXPENSES				
Administrative Expenses				
Admin. Expense	(5)	252,000	257,400	295,000
Board Health Insurance	(6)	68,000	52,330	55,000
Employee Health Insurance	(7)	40,000	50,000	60,000
Employee Retirement Benefit	(8)	21,000	18,000	23,000
Investment Fees		46,000	40,000	44,000
Office Supplies/Equip Maint		11,000	10,000	11,000
Purchased Services	(9)	-	-	50,000
Accounting fees		21,000	18,000	19,000
Board Expense		6,500	1,500	6,500
Association/Membership Fees		18,000	17,825	18,000
Communications	(10)	30,000	27,700	30,000
Web Site/IT		66,000	61,500	66,000
Insurance/D&O/Liability/WC		29,000	25,010	26,000
Election Fees	(11)	150,000	261,297	-
LAFCO fees		8,500	5,783	7,000
Legal Fees		25,000	30,000	35,000
Bank Fees		100	30	100
Total Administrative Expenses		\$ 792,100	\$ 876,375	\$ 745,600
Pension Expense				
Pension Plan Expense	(12)	3,800,000	3,800,000	3,800,000
PROPERTY EXPENSES				
Maintenance		22,500	22,500	22,500
Utilities		30,000	25,089	30,000
Insurance/Property		2,000	1,574	2,000
Depreciation		73,000	73,435	68,000
Total Property Expenses		\$ 127,500	\$ 122,598	\$ 122,500
Grant Expenses				
Grant Admin Expenses	(13)	125,000	125,000	125,000
SFSU Nursing Program	(14)	613,000	627,054	-
Samaritan House Clinic	(15)	683,000	683,000	703,054
Other Grants		90,000	70,000	90,000
San Mateo Medical Center	(16)	537,000	537,000	340,250
Ravenswood-Fairoaks Health C	(17)	700,000	700,000	700,000
Community Grants Program	(18)	2,100,000	2,100,000	2,400,000
Mission Hospice	(19)	500,000	500,000	-
Sequoia 70	(20)	813,000	813,000	731,872
Oral Health Coalition	(21)	50,000	50,000	50,000
TBD Program or Grant Expense	(22)	1,100,510	810,000	2,484,489
Total Grant Expenses		\$ 7,311,510	\$ 7,015,054	\$ 7,624,665
Program Expenses				
Living Healthy		58,000	40,000	50,000
HeartSafe Program	(23)	134,000	102,129	134,000
School Health Program	(24)	3,496,490	3,496,490	3,991,335
Total Program Expenses		\$ 3,688,490	\$ 3,638,619	\$ 4,175,335
Total Expenses		\$ 15,719,600	\$ 15,452,646	\$ 16,468,100
Net Surplus/Loss**		\$ (713,852)	\$ (30,623)	\$ (712,352)

**Funds will be transferred from District Reserves to cover deficit.

Sequoia Healthcare District
Budget for Fiscal Year Ending 6/30/2018
Assumptions

Revenue Assumptions

- 1 Rental Income - Year Seven of seven year tenant lease for 1,507 SF office space, 525 Veterans Blvd. ends August 2017
- 2 Tax revenue projected to increase by \$800,000.
- 3 Pension Income (and Expense) are pass-through items based on current projections
- 4 Return on Investment from Sequoia Hospital based on most recent Hospital projections

Expense Assumptions

- 5 Administration Expense primarily covers 80% salary expense of CEO, 100% salary expense of Exec. Coordinator, payroll service expense and conference expenses
- 6 Board health insurance adjusted closer to actual
- 7 Employee Health Insurance benefit includes inlieu payments for one District staff member.
- 8 Employee Retirement Benefit is staff employee 401K contribution match
- 9 Purchased Services for Grant Thornton compliance review
- 10 Communications expense is primarily production and mailing costs of annual report to the community
- 11 No election in 2017
- 12 Pension Expense (and Income) are pass-through items based on current projections

Grants

- 13 Grants Administration primarily covers inhouse grant processing; 20% of CEO & 35% of Program Director salary expense
- 14 District's commitment to SFSU Nursing Program has ended
- 15 Samaritan House year three of three year grant
- 16 San Mateo Medical Center year three of three year grants
- 17 Ravenswood two year commitment ended. Applying for new two year grant
- 18 Community Grants Program increased by \$300,000
- 19 District's commitment to Mission Hospice has ended
- 20 Sequoia 70 year two of two year grant
- 21 Oral Health Coalition Grant Year two of two year grant
- 22 To Be Determined program/grant expense of \$2,484,489

Programs

- 23 HeartSafe three year budget ended. Budgeted amount for one year only
- 24 School Health Initiative budget increase over prior year due to additional funding for mental health and nursing support.

Current Insurance benefits

Allowance: The District pays up to \$1,500 a month per employee minus 10% of the premium for all employees who work 20 hours or more per week. Board members receive the same allowance.

In-lieu option: Employees who opt out of health benefits are entitled to a \$200 per month stipend.

Date benefit approved: The current allowance and in-lieu thresholds were established in 2013. According to insurance broker Ron Bedrosian the average premium has increased more than 40% since 2013.

CEO Report: June 2017: Lee Michelson

1. The District is supporting a mental health symposium with the Mental Health Association on June 9th at the Sobrato Center. I will comment on the program at the Board meeting.
2. The District is also sponsoring a Seniors on the Square program in support of the Ombudsman Services on Friday June 16 in Redwood City. We will promote our 70 Strong Program and other older adult services that we support.
3. Registration is now open for the ACHD Conference in September in San Diego. The dates are September 13-14 and more info can be obtained by going to ACHD.org
4. I received the Golden Toothbrush Award for community support of oral health by the San Mateo County Dental Association for my work on the CDA cares event and for leading the local Oral Health Coalition.
5. I was interviewed by the Mercury News for an upcoming article on 70 Strong. They also interviewed staff of the project, Redwood City Council member Diane Howard and program participants including a very fit and active 89 year old woman who participates in yoga classes at the NFO Community Center.
6. The final LAFco report with recommendations will be presented for approval at their meeting on July 18 at 2;30pm. Once approved we will post this on our website.
7. Our long time partnership with San Francisco State, Cañada College and Sequoia Hospital with the nursing education program ends as of June 30. This partnership provided education to more than 400 nurses, many of whom have become leaders in our community.

Investment Report: 2016-17

1st Quarter

1. Estimate- \$37,500
2. Actual- \$5,000
3. Difference- (\$32,500)

2nd Quarter

1. Estimate- \$37,500
2. Actual- (\$36,000)
3. Difference- (\$73,500)

3rd Quarter

1. Estimate- \$37,500
2. Actual- \$43,000
3. Difference- \$5,500

4th Quarter

1. Estimate- \$37,500
2. Actual \$40,000 (April and May)
3. Difference- \$2,500

Total

1. Estimate- \$150,000
2. Actual- \$51,000
3. Difference- (\$99,000)- 11 months

Fees

1. Estimate- \$46,000
2. Actual- \$32,000- 11 months
3. Difference- (\$14,000)- 11 months

Uncommitted dollars: The District is committed to spending 100% of current tax dollars. For fiscal year 2016-17, which ends at the end of this month, we have \$400,000 of uncommitted dollars. For the upcoming fiscal year starting July 1, we estimate starting the year with \$2.4 million uncommitted. The following is a list of projects that staff is currently in discussions that may lead to proposals for funding.

Under review: updated June, 2017

1. Magical Bridge: \$100,000: The Board committed spending an additional \$100, 000 as a match. We anticipate that this match will be met within the next two weeks
2. Headspace Mental Health Clinic: Several discussions have been held between with Stanford University Department of Community Psychiatry and the Boys and Girls Club in Redwood City about a drop-in counseling center for adolescents and young adults. This project would require the building of a building or mobile units. Investigating space needs and costs and also sustainability.
3. School Nurse project: Pamela and Kim Griffin have been investigating several concerns including nurse credentialing and establishing a floating pool of trained nurses to be used shared by school districts.
4. Medical respite: One discussion has been held with LifeMoves regarding the need for medical respite at the homeless shelters. LifeMoves is planning an expansion of their Maple Street site that could include a special wing for medical respite. More discussion may happen once their expansion plans are approved by the County.
5. Samaritan House RWC: A possible remodel of the center is being investigated. The District has committed \$2,000 to space and concept planning which will take place over the next two months to determine/suggest a better use of current space and what it would take to make the clinic more efficient. Additionally, a plan could be forthcoming for general improvement which could include new flooring, painting, furniture etc.

6. Meditation project for Redwood High School: The District has had discussions with the Quiet Time staff to assess the cost to extend meditation to all 350 or so students twice a day at Redwood High School. Preliminary estimates are in the \$175,000-\$200,000 per year range.
7. Oral Health Coalition: We have received an initial inquiry to assess if we would be interested in discussing a pilot project that would bring dental services to the home of those receiving meals on wheels. Waiting for a proposal.
8. Middlefield Junction: This could be a major project for the District to consider. The Middlefield Junction project is a large construction project for the North Fair Oaks Community that would consist of housing, a new library, a new community center, and more, including a health and wellness center to focus on nutrition, fitness, and health education. The main players are the City of Redwood City and the County of San Mateo but the health and wellness center could have District interest. The estimated price range for that aspect of the project would be \$3-5 million. Anticipate that the project is 3 or more years from being a reality.
9. Mental health for college students: A meeting was held with Tom Mohr, President of the Community College District, about the lack of resources for college students at Cañada and the College of San Mateo. Tom will be coordinating a meeting with college staff to discuss their needs.

Pamela Kurtzman
Staff Report April-May 2017

Activity Summary

I. Healthy Schools Initiative Updates:

School Mental Health- update

- Our evaluation consultant continues to draft the formal data collection plan that is expected to begin as early as June 2017, with the bulk of the work being completed over the Fall 2017- Winter 2018. He will present an update to the Board at the August meeting.
- Continuing to assess the feasibility of bringing the Australian-based model, “Headspace” teen mental health drop-in center to the Boys and Girls Club RWC. We met with Directors of the NFO clinic to discuss the impact it could have on the clinic and how we might collaborate on this endeavor. At this point, further discussion is needed.
- Lee and I met with Tom Mohr of San Mateo Community Colleges on June 2nd to discuss mental health needs of college students. We learned of the significant unmet needs for this population. Lee and I will continue exploring this area over the next few months.

HSI Grants

- 2017-18 school grants recommendations are attached and will be discussed at our June 15th Board meeting
- We will hold the grants reception for these grants in early August (date tbd)
- 2016-17 final reports for school grants are due June 15th. A full update of these outcomes will be provided at the August Board meeting.

HSI parent newsletter

The final issue of the San Carlos newsletter was released in May and San Carlos’ will go out early June

•  **Update**

- ASR is nearing the end of their data collection and evaluation efforts for the PE+ program. I’m looking forward to sharing what is learned of our final outcomes by early fall.

II. *Caring Community Grants*

- **2017-18:** Thank you for your approval of the 2017-18 recommendations. We hope you will join us at our awards luncheon hosted by our friends at PJCC on June 22nd (also Janeene's b-day) from 12p-2p.

III. *Healthy Kids*

- Our next meeting of the advisory committee is July 21 where we will discuss how best to spend program reserves. I will provide an update to the Board at our August board meeting.

IV. *Community/Additional Activities*

- Volunteered at CDA Cares event on April 22nd
- Attended California State of Reform in Sacramento April 27th addressing the topic of healthcare and health policy
- Volunteered for Make Time for Fitness annual event of May 17th.
- Attended Caminar event at Filoli on May 18th
- Hosted Wellness booth at Hometown Days May 20-21
- Attended Immigration Reform Conference at Stanford May 25th

Committees

- San Mateo County School Health Alliance Co-Chair (meets each month)
- Redwood City School District Wellness Committee (Meets 2nd Tuesday each month)
- Sequoia Union High School District Wellness Advisory Committee (WAC) (meets 3rd Monday each month)
- Belmont- Redwood Shores Wellness Committee (meets 3rd Thursday each month)
- San Carlos School District Wellness Committee (meets 3rd Tuesday each month)
- Las Lomas Wellness Committee
- South County Mental Health Collaborative (meeting dates TBD)

V. *Attachment*

- 2017-18 School-based grants recommendations
- Updates from our Wellness Coordinators to be provided in August

HeartSafe Program

Activity Summary for Apr & May 2017

HeartSafe Region Task Force Meetings

Attend and participate in regional planning and support.

AED / CPR Trainings – Over 700 persons trained!

- D-Tech HS
- Selby Lane School staff
- Redwood City Rotary
- Belmont Redwood Shores School District
- Menlo Park Fire District
- Carlmont HS Freshmen
- Sequoia HS Freshmen
- San Carlos Hometown Days
- Boy Scouts

AED / CPR Scheduled Trainings

- Jasper Ridge Farm
- Redwood City Parks & Rec staff
- SHCD Adult CPR Classroom sessions
- Sports House
- SHCD Infant CPR Classroom Sessions
- Hawes School teachers and staff

F/Y 16-17 HeartSafe Programs and Trainings (as of June 7, 2017)

Total number of CPR Programs: 132

Approximate number of persons trained in CPR: 2,750!

- Number of Infant CPR Classes in SHD Classroom: 12

Number of Infant CPR Students: 162

- Number of Adult CPR Classes in SHD Classroom: 20

Number of Adult CPR Students: 210

Family & Friends Photographs

