



525 Veterans Blvd.
Redwood City, CA 94063

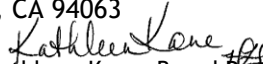
650-421-2155 Phone
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www.seqhd.org

A G E N D A
SEQUOIA HEALTHCARE DISTRICT
REGULAR BOARD OF DIRECTORS MEETING
4:30 PM, Wednesday, December 5, 2018
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 September 27, 2018 Special Meeting Minutes
 - b. Approve October 3, 2018 Regular Meeting Minutes
 - c. Accept September and October 2018 Financial Statements
4. New Business
 - a. Update On Year One Of Two-Year Grant Supporting LVN Services At Maple Street Shelter - Dr. Greenberg, VP Programs And Services, LifeMoves 15 Minutes
 - ACTION b. Update On One-Year Grant To Boys and Girls Club For Psychotherapist At Forest High School Center And Request For Additional One-Year Grant Of \$90,456 - Mr. Jones, Senior Director 15 Minutes
 - c. Presentation And Update On RWC 20/20 Partnership - Ms. Kiser, Executive Director, Redwood City 20/20 15 Minutes
 - d. Presentation On Using Board Docs Platform On District New Website - Ms. Bratton 10 Minutes
 - ACTION e. Ratification Of Termination Of 70 Strong Contract And Approval Of Transition Plan - Ms. Kurtzman 15 Minutes
 - ACTION f. Director Requests For Future Agenda Items Per Board Policy 8.3 - President Kane
5. CEO/Staff Reports:
 - a. CEO Report - Ms. Kurtzman 5 Minutes
 - b. Healthy Schools and HeartSafe - Dr. Li 5 Minutes
 - c. Program Support And Communications - Ms. Bratton 5 Minutes
6. Adjourn

The Next Regular Meeting Of The Board Of Directors Of Sequoia Healthcare District Is Scheduled For 4:30 PM, Wednesday, February 6, 2019, 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 ext 201 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 ext 201.

**MINUTES OF SPECIAL MEETING
BOARD OF DIRECTORS
SEQUOIA HEALTHCARE DISTRICT
September 27, 2018
Conference Room, 525 Veterans Boulevard
Redwood City, CA 94063**

Directors Present

Director Faro
Director Griffin
Director Hickey
Director Kane
Director Shefren

Directors Excused

Also Present

Pamela Kurtzman, CEO
Mr. Hudak, Legal Counsel
Ms. Stamper, Recorder

1. Call to Order

President Kane called the meeting to order at 4:00 PM.

2. Public Comment/Non-Agenda Items

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

3. Adjourn to Closed Session

Adjourn to Closed Session For:

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

4. Reconvene to Open Session

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

5. Adjourn

Motion: At 5:03 PM adjourn meeting.

By: Director Faro

Seconded by: Director Shefren

All in favor

Motion Passed

The next regular meeting of the Board of Directors of Sequoia Healthcare District is scheduled for 4:30 PM, Wednesday, October 3, 2018, District Conference Room, 525 Veterans Blvd., Redwood City, CA.

Respectfully Submitted,

Gerald Shefren, M.D.
Secretary

**MINUTES OF REGULAR MEETING
BOARD OF DIRECTORS
SEQUOIA HEALTHCARE DISTRICT
October 3, 2018
Conference Room, 525 Veterans Boulevard
Redwood City, CA 94063**

Directors Present

Director Faro via
teleconference
Director Griffin
Director Hickey
Director Shefren

Directors Excused

Director Kane

Also Present

Pamela Kurtzman, CEO
Mr. Hudak, Legal Counsel
Ms. Stamper, Recorder

1. Call to Order

Director Griffin called the meeting to order at 4:30 PM.

2. Public Comment/Non-Agenda Items

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

3. Consent Calendar

Motion: To approve the Consent Calendar.

By: Director Griffin

Seconded by: Director Faro

Director Hickey will not vote to approve the minutes as he believes they do not reflect critical Director comments and are very discriminatory when they do include comments. Director Shefren would like the financials in a larger font in the future so the documents will be in a more readable format. In addition, Director Shefren would like the Month to Month budget to include a column showing % of budget utilized.

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

Motion passed

**4.a. Presentation And Committee Recommendation
To Change Investment Management Company**

Ms. Kurtzman reviewed the progress on finding a financial investment firm that can stay within government guidelines but increase our dividends. Directors Faro and Griffin, and Ms. Kurtzman reviewed proposals from 3 investment firms and gave their recommendation to use Signature Investment Advisors LLC (SIA). Dennis Pettinelli of Pettinelli Financial Partners, Brian Holmes and Andrew Lin of SIA presented a breakdown of our current investments and how they could improve our returns.

Motion: To change our investment management company to Signature Investment Advisors LLC.

By: Director Shefren

Seconded by: Director Faro

Vote: 4-0-0-1

Motion Passed

Motion: To create a sub-committee to re-evaluate the percentage of investment securities and

make a recommendation to the Board.

By: Director Shefren

Seconded by: Director Griffin

Vote: 3-0-1-1 with Director Hickey abstained

Motion Passed

DRAFT

4.b. Presentation Of District New Website (Beta Version)

Ms. Gonzalez Flores gave a demonstration of the new features on the revised District website. Director Hickey would like the history of the District included on the website. When the website is completed the Directors will be sent a link to evaluate and provide feedback on the new features before it goes live.

4.c. Presentation On Progress Toward Year One Of 2017-2020 Strategic Plan

Ms. Kurtzman stated that the District has made significant progress toward the goals and key objectives outlined in the strategic plan. She has identified some challenges ahead and areas for growth, including the need for safety net services and basic health care expecting to increase for many community members. Ms. Kurtzman believes these services make the District more vital to creating and maintaining a safe, healthy and equitable community for all residents. She is confident that the District will make progress in these areas.

4.d. Director Requests for Future Agenda Items per Board Policy 8.3

President Kane asked if any Director had an agenda item request. In future, Director Shefren would like a discussion or an agenda item at the retreat where Directors tell staff what they would like reported on. Director Griffin would like the finance subcommittee to give a report at the next Board meeting in December.

5. CEO & Staff Reports

Ms. Kurtzman, Dr. Li and Ms. Bratton's reports are all included in the board packet. Ms. Kurtzman presented a sample copy of the annual report due out in mid-October. Ms. Bratton has been working diligently on the annual report to improve the format, readability and graphics.

Dr. Li reported that the K-8 schools are responding with comprehensive data which will be compared to the California Healthy Kids data. The results will help drive our decision making in the future.

Dr. Li presented a copy of the Sequoia Union High School District parent newsletter that has helpful information for dealing with teens and vaping.

The Neuroscience of Addiction workbooks are now in print and in classrooms. The program is receiving a lot of positive feedback. A student commented that "I used to be told "Just say NO", now I understand Why."

Dr. Li gave the Board members a Parent version of the "Green Folder", a child in crisis action plan for school staff to recognize symptoms of distress and resources/services for youth and families. The folder has distress indicators and contact information for reaching hotlines.

3. Adjourn to Closed Session

Adjourn to Closed Session For:

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

4. Reconvene to Open Session

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

5. Adjourn

Motion: At 6:49 PM adjourn meeting.

By: Director Griffin

Seconded by: Director Shefren

All in favor

Motion Passed

The next regular meeting of the Board of Directors of Sequoia Healthcare District is scheduled for 4:30 PM, Wednesday, December 5, 2018, District Conference Room, 525 Veterans Blvd., Redwood City, CA.

Respectfully Submitted,

Gerald Shefren, M.D.
Secretary

Agenda Item No. 3c
Board of Directors Meeting
December 5, 2018

[illegible]

SEQUOIA HEALTHCARE DISTRICT
Income Statement
Fiscal Year 2018-19

Agenda Item No. 3c
Board of Directors Meeting
December 5, 2018

															Variance	
	July	August	September	October	November	December	January	February	March	April	May	June	Year to Date	Budget 18-19	Budget Remaining	Percent of Budget Remaining
INCOME																
Rental Income	5,200.00	5,200.00	5,200.00	5,200.00									20,800.00	62,400.00	(41,600.00)	-66.7%
Tax Revenue	38,979.01	31,623.96	11,376.66	566,876.84									648,856.47	12,500,000.00	(11,851,143.53)	-94.8%
Investment Income	10,428.00	27,762.00	4,318.00	15,453.00									57,961.00	50,000.00	7,961.00	15.9%
Interest Income	655.45	854.94	1,234.54	1,722.55									4,467.48	5,500.00	(1,032.52)	-18.8%
Pension Income	0.00	0.00	0.00	0.00									0.00	2,700,000.00	(2,700,000.00)	-100.0%
Total Income	55,262.46	65,440.90	22,129.20	589,252.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	732,084.95	15,317,900.00	(14,585,815.05)	-95.2%
EXPENSES																
Administrative Expenses																
Admin. Expense	1,020.47	2,586.35	505.84	2,197.82									6,310.48	20,000.00	13,689.52	68.4%
Admin. Payroll	12,432.08	15,626.75	15,420.46	14,945.68									58,424.97	240,000.00	181,575.03	75.7%
Grant Admin Expenses	1,545.00	278.15	19,400.00	835.16									22,058.31	25,000.00	2,941.69	11.8%
Grant Admin Payroll	1,299.63	2,599.23	2,547.67	2,429.00									8,875.53	65,000.00	56,124.47	86.3%
Board Health Insurance	1,851.43	1,851.43	7,796.41	779.86									12,279.13	60,000.00	47,720.87	79.5%
Employee Health Insurance	2,057.64	4,657.01	4,932.54	3,466.86									15,114.05	65,000.00	49,885.95	76.7%
Employee Retirement Benefit	489.38	1,325.66	1,325.66	1,325.66									4,466.36	25,000.00	20,533.64	82.1%
Investment Fees	0.00	0.00	7,136.13	0.00									7,136.13	35,000.00	27,863.87	79.6%
Accounting fees	0.00	0.00	0.00	12,000.00									12,000.00	25,000.00	13,000.00	52.0%
Board Expense	0.00	0.00	800.00	1,576.85									2,376.85	7,500.00	5,123.15	68.3%
Associations/Membership	7,725.00	0.00	0.00	0.00									7,725.00	32,500.00	24,775.00	76.2%
Communications	0.00	3,221.72	780.00	14,888.09									18,889.81	33,000.00	14,110.19	42.8%
Office Supplies/Equip Maint	934.67	416.42	109.41	933.39									2,393.89	11,000.00	8,606.11	78.2%
Web Site/IT	3,493.82	3,499.15	3,459.19	7,950.54									18,402.70	60,000.00	41,597.30	69.3%
Insurance/D&O/Libility/WC	32,020.04	0.00	0.00	(1,560.50)									30,459.54	30,000.00	(459.54)	-1.5%
Election Fees	0.00	0.00	0.00	0.00									0.00	275,000.00	275,000.00	0.0%
LAFCO fees	0.00	0.00	0.00	0.00									0.00	7,000.00	7,000.00	100.0%
Legal Fees	11,530.00	990.00	2,880.00	12,641.00									28,041.00	40,000.00	11,959.00	29.9%
Bank Fees	0.00	0.00	0.00	139.99									139.99	50.00	(89.99)	-180.0%
Total Admin. Expenses	76,399.16	37,051.87	67,093.31	74,549.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	255,093.74	1,056,050.00	800,956.26	75.8%
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	0.00	2,700,000.00	2,700,000.00	100.0%
Property Expenses																
Maintenance	1,189.89	1,679.89	1,930.55	3,216.89									8,017.22	25,000.00	16,982.78	67.9%
Utilities	2,287.48	2,277.29	2,568.00	3,178.20									10,310.97	33,000.00	22,689.03	68.8%
Property Insurance	1,733.75	0.00	0.00	0.00									1,733.75	2,050.00	316.25	15.4%
Depreciation	3,874.83	3,874.83	3,874.83	3,874.83									15,499.32	47,000.00	31,500.68	67.0%
Total Property Expenses	9,085.95	7,832.01	8,373.38	10,269.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,561.26	107,050.00	71,488.74	66.8%

SEQUOIA HEALTHCARE DISTRICT
Income Statement
Fiscal Year 2018-19

Agenda Item No. 3c
Board of Directors Meeting
December 5, 2018

														Variance		
	July	August	September	October	November	December	January	February	March	April	May	June	Year to Date	Budget 18-19	Budget Remaining	Percent of Budget Remaining
Capital Improvements																
Computer and Copier Upgrades	0.00	2,783.23	0.00	4,143.82									6,927.05	19,000.00	12,072.95	63.5%
Building Improvements	0.00	0.00	0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,000.00	25,000.00	100.0%
Total Capital Improvements	0.00	2,783.23	0.00	4,143.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,927.05	44,000.00	37,072.95	84.3%
Grants																
Samaritan House Grant	0.00	0.00	0.00	236,988.25									236,988.25	947,953.00	710,964.75	75.0%
Other Grants	0.00	0.00	0.00	1,800.00									1,800.00	90,000.00	88,200.00	98.0%
San Mateo Medical Center	0.00	0.00	0.00	0.00									0.00	0.00	0.00	0.0%
Ravenswood Family Health Ctr	0.00	0.00	0.00	0.00									0.00	700,000.00	700,000.00	100.0%
Community Grants Program	0.00	0.00	0.00	0.00									0.00	2,400,000.00	2,400,000.00	100.0%
70 Strong	0.00	0.00	0.00	185,592.00									185,592.00	658,171.00	472,579.00	71.8%
Oral Health Coalition	0.00	0.00	0.00	0.00									0.00	0.00	0.00	0.0%
TBD Grants	200,000.00	53,584.10	34,966.68	4,816.01									293,366.79	3,288,876.00	2,995,509.21	91.1%
Total Grant Expenses	200,000.00	53,584.10	34,966.68	429,196.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	717,747.04	8,085,000.00	7,367,252.96	91.1%
Program Expenses																
Living Healthy	0.00	0.00	0.00	0.00									0.00	50,000.00	50,000.00	100.0%
HeartSafe Program	33,743.92	2,160.61	10,000.00	2,095.01									47,999.54	49,000.00	1,000.46	2.0%
HeartSafe Payroll	374.26	1,209.71	1,193.40	1,193.40									3,970.77	16,000.00	12,029.23	75.2%
School Health Exp	1,715.50	1,840.77	961.25	12,162.00									16,679.52	100,000.00	83,320.48	83.3%
School Health Payroll	5,399.51	14,876.62	14,784.14	14,784.12									49,844.39	164,395.00	114,550.61	69.7%
School Health Grants	305,000.00	12,720.00	0.00	203,860.00									521,580.00	4,035,605.00	3,514,025.00	87.1%
Total Program Expenses	346,233.19	32,807.71	26,938.79	234,094.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	640,074.22	4,415,000.00	3,774,925.78	85.5%
Total Expenses	631,718.30	134,058.92	137,372.16	752,253.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,655,403.31	16,407,100.00	14,751,696.69	89.9%
Net Surplus/Loss	(576,455.84)	(68,618.02)	(115,242.96)	(163,001.54)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(923,318.36)	(1,089,200.00)	(29,337,511.74)	

**Month to Month Budget
September - October 2018**

Agenda Item No. 3c
Board of Directors Meeting
Deember 5, 2018

	September Budget	September Actual	October Budget	October Actual	4 Month Total Budget	4 Month Total Actual
Income						
Rental Income	5,200.00	5,200.00	5,200.00	5,200.00	20,800.00	20,800.00
Tax Revenue	25,000.00	11,376.66	525,000.00	566,876.84	550,000.00	648,856.47
Investment Income	2,000.00	4,318.00	3,000.00	15,453.00	15,000.00	57,961.00
Interest Income	400.00	1,234.54	400.00	1,722.55	1,600.00	4,467.48
Pension Income	0.00	0.00	0.00	0.00	0.00	0.00
Total Income	32,600.00	22,129.20	533,600.00	589,252.39	587,400.00	732,084.95
Expenses						
Admin. Expense	800.00	505.84	600.00	2,197.82	2,800.00	6,310.48
Admin. Payroll	20,000.00	15,420.46	20,000.00	14,945.68	80,000.00	58,424.97
Grant Admin Expenses	500.00	19,400.00	19,000.00	835.16	21,300.00	22,058.31
Grant Admin Payroll	5,000.00	2,547.67	6,000.00	2,429.00	21,000.00	8,875.53
Board Health Insurance	8,000.00	7,796.41	1,900.00	779.86	13,700.00	12,279.13
Employee Health Insurance	5,000.00	4,932.54	5,000.00	3,466.86	19,000.00	15,114.05
Employee Retirement Benefit	2,000.00	1,325.66	2,000.00	1,325.66	8,000.00	4,466.36
Investment Fees	0.00	7,136.13	6,000.00	0.00	6,000.00	7,136.13
Accounting fees	0.00	0.00	15,000.00	12,000.00	15,000.00	12,000.00
Board Expense	3,200.00	800.00	1,500.00	1,576.85	4,700.00	2,376.85
Associations/Membership	11,000.00	0.00	0.00	0.00	18,900.00	7,725.00
Communications	500.00	780.00	25,000.00	14,888.09	29,500.00	18,889.81
Office Supplies/Equip Maint	500.00	109.41	500.00	933.39	3,000.00	2,393.89
Web Site/IT	5,000.00	3,459.19	5,000.00	7,950.54	20,000.00	18,402.70
Insurance/D&O/Liability/WC	(500.00)	0.00	0.00	(1,560.50)	31,500.00	30,459.54
Election fees	0.00	0.00	275,000.00	0.00	275,000.00	0.00
LAFCO fees	0.00	0.00	0.00	0.00	0.00	0.00
Legal Fees	4,000.00	2,880.00	4,000.00	12,641.00	18,000.00	28,041.00
Bank Fees	0.00	0.00	0.00	139.99	0.00	139.99
Pension Plan Expense	0.00	0.00	0.00	0.00	0.00	0.00
Maintenance	2,000.00	1,930.55	2,000.00	3,216.89	8,000.00	8,017.22
Utilities	2,600.00	2,568.00	3,500.00	3,178.20	10,700.00	10,310.97
Property Insurance	0.00	0.00	0.00	0.00	1,800.00	1,733.75
Depreciation	3,900.00	3,874.83	3,900.00	3,874.83	15,600.00	15,499.32
Computer and Copier Upgrades	0.00	0.00	0.00	4,143.82	4,000.00	6,927.05
Building Improvements	0.00	0.00	25,000.00	0.00	25,000.00	0.00
Samaritan House Grant	78,996.09	0.00	78,996.08	236,988.25	315,984.33	236,988.25
Other Grants	5,000.00	0.00	5,000.00	1,800.00	22,000.00	1,800.00
San Mateo Medical Ctr. So County	0.00	0.00	0.00	0.00	0.00	0.00
Ravenswood	0.00	0.00	0.00	0.00	0.00	0.00
Community Grants Program	0.00	0.00	0.00	0.00	0.00	0.00
70 Strong	0.00	0.00	165,000.00	185,592.00	165,000.00	185,592.00
Oral Health Coalition	0.00	0.00	0.00	0.00	0.00	0.00
TBD Grants	200,000.00	34,966.68	200,000.00	4,816.01	725,000.00	293,366.79
Living Healthy	4,000.00	0.00	6,000.00	0.00	15,000.00	0.00
HeartSafe Program	3,500.00	11,193.40	3,500.00	3,288.41	41,000.00	51,970.31
School Health Program	100,000.00	15,745.39	300,000.00	230,806.12	1,000,000.00	588,103.91
Total Expenses	464,996.09	137,372.16	1,179,396.08	752,253.93	2,936,484.33	1,655,403.31
Net	(432,396.09)	(115,242.96)	(645,796.08)	(163,001.54)	(2,349,084.33)	(923,318.36)



Background

In September 2017, Sequoia Healthcare District Board of Directors approved a one-time grant of **\$194,480**, to be disbursed over a two year period, to support a full-time Licensed Vocational Nurse (LVN) at the Maple Street Shelter in Redwood City. It was agreed that the second year funding would be approved upon successful outcomes of the year 1 pilot program and a presentation to the SHD Board of Directors.

The grant has helped LifeMoves to meet the increasing health needs associated with an aging homeless population. They hired a full-time LVN who plays a significant role in assisting clients over the age of 50 with health screenings, assessments, medication management, and serve as a liaison to schedule, manage, and monitor client's engagement with health care professionals. LVN oversight services include crisis intervention, community referrals, and regular appointments to help clients better address and manage their health issues.

In addition, the LVN works to reinforce medication compliance and monitors side effects, educates clients on health conditions, helps clients navigate the health care system, coordinates clients' appointment services, monitors wound care and infection control, and helps connect clients to eligible benefits and housing support.

Budget

LifeMoves Budget for Maple Street Shelter LVN Pilot Program January 1, 2018 - December 31, 2019	
Year 1 Salary and Fringe	\$88,400
Year 2 Salary and Fringe	\$88,400
Administration/supervision	\$17,680
Program Total	\$194,480

The attached update provides specific program goals and year one outcomes and will be followed by a presentation by Dr. Brian Greenberg to SHD Board of Directors at the December 5th public meeting.

Update to SHCD Board of Directors

- Funding for Licensed Vocational Nurse at
Maple Street Shelter, Redwood City
- Shelter-Based Behavioral Health Support Services

Dr. Brian Greenberg, LifeMoves VP Programs & Services

December 2018

Maple Street Shelter: Context and Grant Goals

- **Maple Street is the largest homeless shelter in San Mateo County**
 - Majority of clients are age 50+ (with life-skills equivalent to an 80 year-old housed individual). Average age 49.6.
 - Approximately 60% have disabilities
 - Shelter staff manage an average of 6 medications/shelter resident
 - SHCD grant for Licensed Vocational Nurse (LVN) sought to address and stabilize serious medical issues of Maple Street clients, which are significant barriers to their obtaining stable housing
- **SHCD awarded LifeMoves a two-year grant to fund an LVN staff position for Maple Street**
 - Goal 1: Establish policies, protocols and priorities for health needs of senior clients
 - Goal 2: Improve rate at which medically-fragile homeless adults seniors regain stable housing

Maple Shelter Functioning: Status Pre-LVN

- **Status Pre-LVN**
 - Many clients did not take medications as prescribed (time, dosage, etc.)
 - Many clients were partially or fully non-compliant with medication protocols
 - Shelter experienced significant behavioral issues, largely attributable to medication non-compliance
 - Staff estimates client-initiated calls to 911 averaged 15-20/month (clients called 911 due to feeling sick, faint, for minor injuries, etc.) (more to come...).
 - Very low rates of older clients moving into stable, permanent housing

Maple Status: Post-SHCD Grant Implementation

- **LVN hired late December 2017**
 - LVN supports approximately 30 clients/night, 80 clients YTD (90% over age 50)
 - New protocols and medication management have significantly increased client compliance and overall client health
 - Significant decrease in number of behavioral incidents (no reported incidents at all within the last month)
 - Significant decrease in client-initiated 911 calls (staff estimates approx. 2/month, down from 15-20/month)
 - LifeMoves staff conducting in-depth analysis of possible cost-savings to Medi-Cal and County due to lower number of 911 calls (re: ambulance and ER charges)
 - LVN coordinates with SMC nurse (who makes regular visits to do TB testing of clients)
 - and assists clients by escalating their needs, strategizing issues of specialist accessibility, etc.
 - Significant improvement in number of medical appointments kept
 - Increased client awareness of health and wellness issues, including related dietary issues

LVN at Maple: Successes and Challenges

- **Success #1: New medication policies and protocol have led to significant improvements in client health and overall shelter safety**
 - Medication compliance and practice is now strong and well-established
 - Presence of on-site nurse promotes overall client well-being, as evidenced by significantly lower rate of calls to 911
- **Success #2: Improved percentage of clients into stable housing**
 - 38% of LVN clients transitioned to stable housing during this year-to-date (CY18)
 - Placements included nursing homes, market-rate housing, and family and friends
 - This represents modest improvement over CY17 results
- **Key Challenge: No funding available for skilled nursing, subsidized senior care, board and care, and other alternative placements**
 - Most facilities do not accept Medi-Cal or Medicare without significant co-pay
 - Family reunification continues to represent most viable alternative for many of these clients, for whom market-rate housing is not a realistic option

Behavioral Health Support Services for Homeless Individuals and Families

- **Trauma is both a cause and a result of homelessness**
 - Most individuals and families who enter our shelters have a history of trauma
 - Becoming homeless inflicts additional trauma
 - The results in children can be devastating: Childhood homelessness has long-term negative consequences on attainment of developmental milestones, academic achievement, and later-life mental health and substance abuse
 - Sound behavioral health is key to clients regaining stable housing
- **To address trauma and other behavioral health issues, LifeMoves offers BehavioralMoves at all of its shelter sites**
 - BehavioralMoves offers free, on-site behavioral health support services in real-time to clients within the District
 - Led by Dr. Nancy Morgan, licensed psychologist; services provided by third-year Ph.D. candidates under Student Practicum Program
 - Offerings include individual, group and milieu counseling; art therapy, domestic violence support groups, teen groups, etc.

BehavioralMoves: Program Scope

- **SHCD has been a long-time supporter of BehavioralMoves, with the first two-year grant awarded to LifeMoves in FY18**
 - Sites/clients covered: 3 sites, approx. 200-220 clients/night
 - Maple Street (Redwood City): 111 beds for single adults
 - Haven Family House (Menlo Park): 24 family units (approx. 72 beds)
 - Redwood Family House (Redwood City): 10 family units (approx. 30 beds)
 - Program protocol:
 - All clients screened at intake (children screened with parental consent)
 - Broad range of services offered and available to all clients
 - Number of clients supported has increased with increasing capacity of Student Practicum program (19 students in current cohort)
- **Program structure (free, on-site) eliminates virtually all barriers to clients receiving timely support**
 - Allows intervention at earliest possible time
 - In contrast, referrals to County Call Center are limited to cases of serious mental illness, and wait-times can exceed shelter length of stay

BehavioralMoves: Successes and Challenges

- **Success #1: More clients screened, more screening tools**
 - Much internal work has been done over the past two years on standardizing our screening protocols, resulting in larger numbers of clients being screened
 - Recent upgrades to LifeMoves proprietary database (Salesforce-based) will increase capacity for better reporting and analysis of results and trends
- **Success #2: Larger cohort of Ph.D. students trained each year in behavioral health issues facing the homeless community**
 - Program started with 8-10 students and has expanded to current cohort of 19
 - This results in increased future resources and community awareness
- **Key Challenge: Trend-line is an increasing acuity in individuals and families**
 - Increasing rates of depression and anxiety require referrals-out and more specialized resources
 - High housing costs exacerbate anxiety, as well as ability to locate stable housing



Background

In December 2017, Sequoia Healthcare District Board of Directors approved a grant for \$90,456 to support a pilot program that would provide a full-time (1.0 FTE) Psychotherapist to serve youth attending the Boys and Girls Club of the Peninsula (BGCP) Forest High School Center in Redwood City. It was agreed that BGCP would be eligible for a second year of funding upon successful outcomes of the year 1 pilot program and a presentation to the SHD Board of Directors.

Budget

Item	Cost	SHD cost share	BGCP cost share	AA cost share
Annual Evaluation and Administration	\$10,453	0	0	\$10,453
Bi-lingual Psychotherapist - full time for one year	\$118,456	\$90,456	\$28,000	0
Total Project Expenses	\$128,909 per year (\$257,818 over two years)	\$90,456	\$28,000	\$10,453

Outcome Summary

As the new year approaches, we are pleased and proud to report its success. From its inception in January to the writing of this report, over 40 teens at the Boys and Girls Club have met with the psychotherapist from Acknowledge Alliance, totaling over 250 hours of direct service to the families of the community.

It is thanks to the Boys and Girls Club's strong belief in Acknowledge Alliance's mission, "to promote lifelong resilience in children and youth, and strengthen the caring capacity of the adults who influence their lives," that an opportunity arose to pursue and live this mission. In addition to spending many hours in therapy with families, the psychotherapist provides training, consultation, and guidance to staff on trauma-informed approaches, healthy boundaries, mandated reporting, and any other essential mental health needs of the Boys and Girls Club community. And through its commitment to this partnership, the Boys and Girls Club, in turn, can live its mission, "to provide the low-income youth of our community with the opportunities they need to achieve school success." As a result of this outstanding collaboration, Acknowledge Alliance and the Boys and Girls Club are caring for the whole child, addressing some of the community's most acute mental health needs, and helping teens and families live healthy, integrated lives.

We look forward to providing additional details on the outcomes of this successful program and answering any questions the Sequoia Healthcare District Board of Directors might have at the December 5th public meeting.

Sincerely,

Daniela Velasquez, MFTi
Acknowledge Alliance
The Boys and Girls Club of the Peninsula, Redwood City

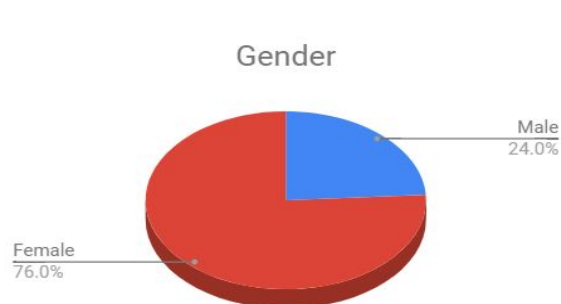
The power of classroom wellness
Acknowledge Alliance
2017-2018 Evaluation Report
Boys and Girls Club Redwood City

In the first half of 2018, Acknowledge Alliance began providing counseling services to at-risk students attending Boys and Girls Club Redwood City (BGC). Most data collection for the Collaborative Counseling Program occurs in May to early June of each year, which means that at the time of data collection, more than two-thirds of BGC clients had been in counseling for only 0-3 months. Given the limited time BGC students had been in counseling, we would expect to see that outcomes as a result of receiving counseling services would also be limited. This report includes data about services provided by Acknowledge Alliance to Boys and Girls Club Redwood City (BGC) from January to June 30, 2018.

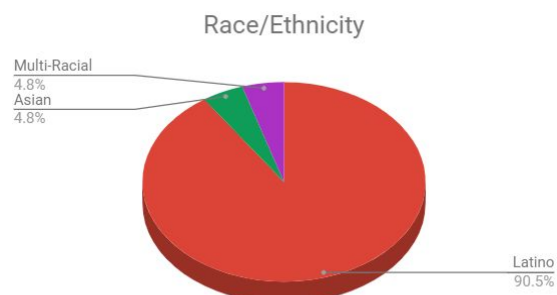
Clients Served:

- CCP provided counseling services to 44 clients from Boys and Girls Club Redwood City.
- No clients were involved in the juvenile justice system at either intake or exit. (n=21)
- Eighty-one percent of students lived in Redwood City, 14% lived in East Palo Alto and 5% lived in Menlo Park. (n=21)

Client Demographics:



Source: 2017-2018 CCP Client Lists, N=21.



Source: 2017-2018 CCP Client Lists, N=21.

Hours of Counseling Provided:

CCP staff and interns provided 105 hours of individual counseling.

Program Outcomes:

CCP staff and interns measured progress made by each client using the Children's Global Assessment Functioning Scale (GAF). The Children's GAF is a 100-point scale used by mental health clinicians to measure psychological, social and school functioning for children ages 6-17. It was adapted from the Adult Global Assessment of Functioning Scale and is a valid and reliable tool for rating a child's general level of functioning on a health-illness continuum. CCP interns determined GAF scores for clients who had been seen more than three times at the beginning and end of therapy. The response rate for the Children's GAF for clients at BGC was 100% (n=26). For BGC clients:

- The average PRE GAF score for clients was 59.7.

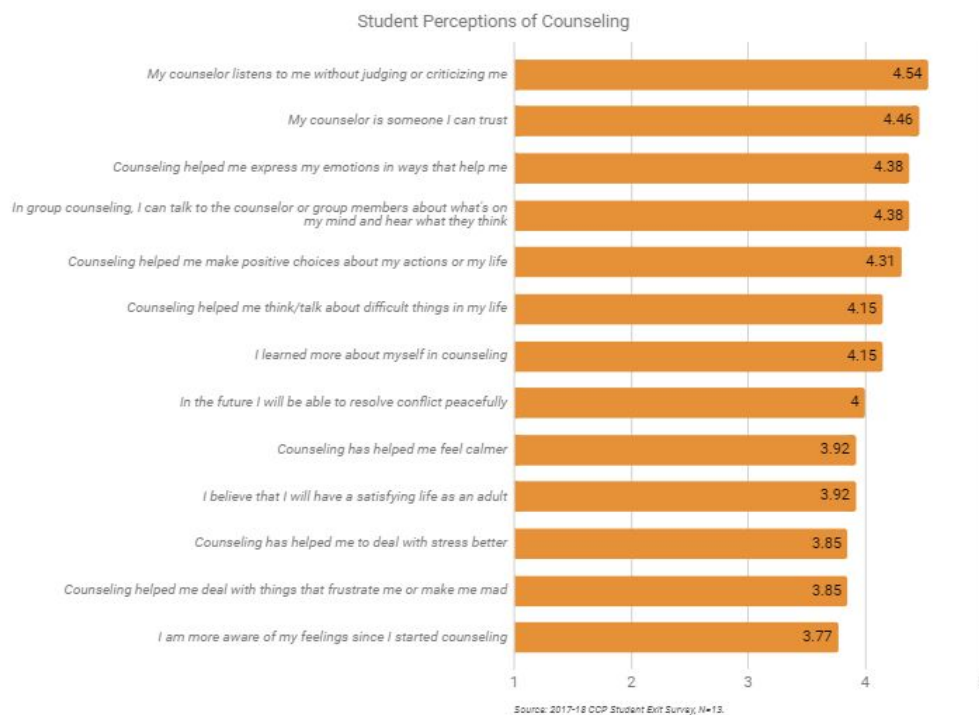
- The average POST GAF score for clients was 69.2.
- The average GAF score increased from pre to post by 16%.

The average score for general functioning of Boys and Girls Club students who received Acknowledge counseling services increased by 16% from pre to post.

STUDENT SURVEY RESULTS

Of the BGC clients who completed the Student Exit Survey, 69% were ages 15-17 and over eight in ten (85%) were female, and all had received individual counseling (n=13). None of the clients were on probation, (n=12). Seventy-three percent of BGC clients were in their first year of receiving counseling services and 27% were in their second year, (n=11). When asked how many months students had been in counseling this year, the largest proportion reported 0-3 months (69%), while 31% reported 3-6 months, (n=13).

Students were asked to what extent they agreed or disagreed with a series of statements about their counseling experience using a rating scale where 1=strongly disagree, 2=disagree, 3=neither agree nor disagree, 4=agree and 5=strongly agree. Overall clients had relatively positive counseling experiences, and the range of answers fell between 3.77 and 4.54. The highest rated items both related to their relationship with their counselor as someone who would *listen to them without judgement/criticism* (4.54) and *that they could trust* (4.46).



Both of these aspects are important because effective counseling should provide clients with an opportunity to be able to talk safely about their lives and traumatic experiences, relieve their pressure, deal with their problems and explore self care. Essential to this process is feeling that their counselor listens to them without judgement and is someone that they can trust.

At the end of the CCP Student Exit Survey, students were given the opportunity to respond to two open-ended questions asking, "Was counseling helpful to you?" and "Is there anything else you'd like to say about your experience in counseling?" Eleven of the 12 responses were positive, indicating that counseling helped students process their emotions, deal with conflict and make good decisions. Some illustrative responses are included below.

"[Counseling] gave me a safe place to talk about my emotions without feeling judgement."

"[Counseling] has allowed me to address the fact that I am the one who sets high expectations for myself, and I alone choose how to feel."

"Counseling was helpful me to because it gave me a reason to freely express my feelings about situations I had difficulty solving."

*15-year-old female,
Boys and Girls Club Redwood City*

"Counseling is extremely helpful for me in just expressing my feelings to someone and getting respectful and critical feedback that helps me better my decision making. I have also learned how to approach situations better."

"Counseling was helpful because it helped me figure out how to solve problems."

"When I had conflict, I came to talk with my counselor."

STAFF SURVEY RESULTS

As this was the first year of Acknowledge Alliance's partnership with BGC, students were receiving counseling services from Acknowledge (at the BGC site) for the first time (n=15). Eight in ten students (80%) were seen by staff on average once a week, while 13% were seen once every two weeks, and 7% were seen once a month (n=15).

San Mateo County Juvenile Hall School's graduation rate is 9.8%, and its dropout rate is 79%. Studies on high school attrition indicate that preventive counseling, occurring before students are in crisis, reduces the risk of high school dropout.¹ CCP aims for 75% of their students to be enrolled in school and working towards high school graduation. Results from this year's staff survey found that all BGC clients were still attending school in some form or another.

Staff were asked to include comments or observations about their client that they saw for counseling. Responses indicated that even during the limited time that the therapist saw BGC clients, significant progress had been made. A selection of responses are included below.

"Student has had a wonderful shift in the small amount of time we have been working together. She is more social and outgoing and motivated to have a social life. I'm looking forward to the next few years."

"Working with student was beautiful. The time we spent together was meaningful to the both of us. She has expressed the value of therapy to her as a place to

"Student was one of the first students/teens referred at BGC. He was having angry outbursts and getting in trouble at school and at the Club. Through our work together, student was able to identify his biggest trigger: being misunderstood. Student was an interesting case since he made a drastic change in a small amount of time."

*Acknowledge Alliance Therapist,
Boys and Girls Club Redwood City*

¹ Bearden, L.J., Spencer, W.A., & Moracco, J.C. (1989). A study of high school dropouts, *The School Counselor*, 27, 113-120.
Morey, R.E., Miller, C.D., Fulton, R., & Rosen, L.A. (1992). High School peer counseling: The relationship between student satisfaction and peer counselors' style of helping, *The School Counselor*, 40, 293-300.
Praport, H. (1993) Reducing high school attrition: Group counseling can help. *The School Counselor*, 40(3), 309-311.
Wirth-Bond, S., Coyne, A., & Adams, M. (1991). A school counseling program that reduces dropout rates. *The School Counselor*, 39, 131-137.

explore her feelings safely. I can't wait to see what her future looks like."

"Student was great to work with. He enjoys the quiet space and maximizes his time in session by exploring and talking about the things that are bothering him. I'm looking forward to the next year and hearing about his summer."

"Student was engaged in his therapy. He always came to his sessions. He has made great strides to live a safer and happier life. He is wonderful to work with."

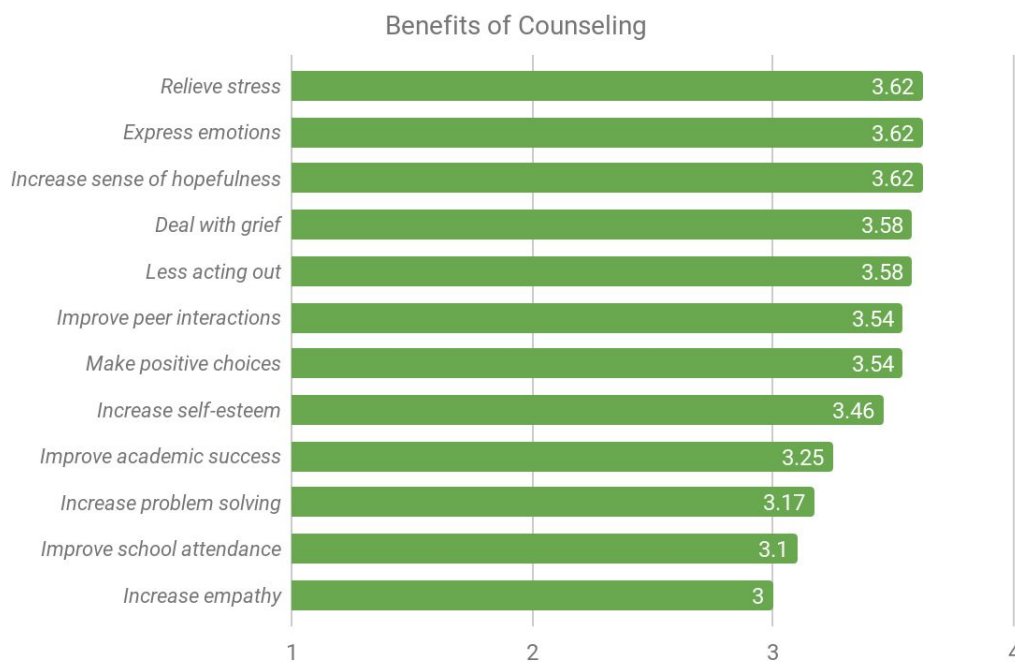
"Student has worked hard in therapy. She's had a gradual change. She is more sure of herself and her choices. She has discovered her strengths and individuality! She has been so wonderful to work with, and I can't wait to see her grow in the next year."

PROBATION AND SCHOOL STAFF RESULTS:

Acknowledge Alliance conducted its annual online survey of school and probation staff's perceptions of the Collaborative Counseling Program. Of a total of 85 respondents, fourteen respondents were from Boys and Girls Club, and of those, thirteen reported interacting with students directly or frequently enough to observe any behavioral and/or attitudinal changes in students receiving counseling. Respondents were a mix between teachers, administrators and support staff.

- 92% of respondents indicated that students are reporting their counseling experiences as positive and helpful (n=13).
- All respondents stated that they would recommend these services to a colleague (n=12).

On a scale of 1 to 4, respondents were asked to respond to a series of items related to how counseling services had benefited students. The highest rated items, in no particular order, were *relieving stress*, (3.62), *expressing emotions constructively* (3.62) and *increasing sense of hopelessness* (3.62).



Source: 2017-18 CCP School and Probation Staff Survey, N=13.

In an open-ended question, staff were asked to provide examples of changes they had seen students demonstrate. Comments highlighted positive behavioral, attitudinal and social changes seen among students receiving counseling.

"Youth are motivating each other during stressful times."

"I've seen students go in to work with Alliance and come out with a new attitude towards life. And increased cooperation with fellow students."

"Students have changed their perception of how they view counseling."

"Students seem to find healthy ways to deal with stress and have truly enjoyed someone listening to them. They will often look forward to their session with their Acknowledge counselor."

"Students are able to utilize coping skills. Students are able to recognize triggers."

"I've seen one of my students improve in fewer acting out behaviors ever since the therapists has been seeing him."

"Students are more expressive of positive emotions. More likely to think through and verbalize their feelings."

"We have one student who got into frequent fights and was doing poorly in school. Since attending counseling, he has turned his behavior and grades around. He has not gotten into a single fight this year and has been participating more with our clubhouse activities."

-Boys and Girls Club Staff

When asked to name the best part of Acknowledge Alliance's counseling services, respondents' answers underscored the importance of having culturally competent mental health services available on-site for students who have likely not had access to counseling previously.

"That the Acknowledge counselor offers both individual and group sessions to students. They are both effective but with a slight different approach but keeping in mind the needs of the clients."

"[Acknowledge counseling] has helped in shaping our programming and the approach we are taking when working with our students regarding conflict and mental health."

-Boys and Girl Club Staff

"To be able to provide this type of service and method of counseling to students who have not had access and/or have not liked counseling previously."

"The commitment to the students and cultural competency."

"Having someone to refer students to who we see are having internal or external problems."

"Seeing teens less stressed and more focused on their academics."

"One-on-one counseling for the students."

"The therapist is involved in all aspects of BGC programming. She understands the mission that we are trying to drive."

Redwood City 2020: A Healthy Community Partnership

Our Vision:

All people in Redwood City and North Fair Oaks are healthy, safe, and successful. Our community of local organizations, public agencies, families, and youth collaborates to develop and implement impactful programs that build on strengths and address acute needs.

Our Goals:

Redwood City 2020 partners collaborate to reduce poverty, improve the academic success of all students, increase community engagement, promote health and wellness, and enhance safety. Together, we make positive changes in Redwood City and North Fair Oaks.

Our Communities:

The Redwood City and North Fair Oaks communities include an ethnically diverse population of children, youth, and families from some of the most impoverished and under-resourced neighborhoods in San Mateo County where poverty, violence, and lack of social services often interfere with students' academic achievement. Despite these challenges, our communities possess many strengths and resources. Redwood City and North Fair Oaks families are resilient, resourceful, and fiercely dedicated to their children, community leaders are innovative and mission-driven, and there is an exceptional level of collaboration, community spirit, and willingness to share resources for the benefit of all.

Our Initiatives:

To mitigate challenges and enhance our communities' collective strengths, Redwood City 2020 has embraced a Pipeline of Success; Community Health, Wellness, and Safety; and Community Engagement as its three main initiatives.

- **The Pipeline of Success initiative** is a collective impact effort to ensure that every student in our community will graduate from high school prepared for success in college, career, community, and life. Cradle-to-Career Collaboration, the Big Lift, and Community Schools are keystone initiatives that actualize our Pipeline of Success vision.
- **Community Health, Wellness and Safety** strives to eliminate teen drug and alcohol use, increase the number of students who walk and cycle to school, and increase access to healthy and affordable food.
- **Community Engagement** provides youth with development opportunities, engages families as partners in student achievement, and increases cultural and social awareness.

Our Roles:

- Incubate projects
- Convene and facilitate collaboration
- Leverage resources and fund programs
- Provide professional development
- Research and evaluate our work
- Spark innovation

Our Partners:

- Cañada College
- City of Redwood City
- John W. Gardner Center, Stanford University
- Kaiser Permanente
- Redwood City School District
- San Mateo County Health System
- San Mateo County Human Services Agency
- Sequoia Healthcare District
- Sequoia Union High School District
- Over 100 affiliate organizations





Demonstration and Instruction

BoardDocs is said to be the easiest to use and most powerful paperless-meeting software available. It is designed exclusively for the needs of county governments, municipalities and school districts.

This is now the Tool SHD will use to manage our agendas and minutes, record voting, track progress on strategic planning, and it has an advanced search feature.

Jenny Bratton will provide instruction to Board Directors on how to use this easy new system.

PROPOSAL TO BRING 70 STRONG PROGRAM OPERATIONS AND MANAGEMENT IN-HOUSE

Background

In January, 2017, 70 Strong was launched as a source of connecting individuals to services based on their unique needs. 70 Strong was first envisaged by former CEO Lee Michelson to address concern over the District's increasing older adult population who after retirement, tend to become isolated and less connected with others, factors that can lead to poor health outcomes.

At the time, District staff lacked the specific expertise and capacity to operate the program in-house, so Mr. Michelson and the District Board chose to partner with Peninsula Family Service because of their experience with providing a variety of services in the community for older adults and because of their deep knowledge and commitment to older adult health and wellness.

Months of literature review and focus groups identified gaps in information needed to locate available services. It was also identified that some individuals may need assistance in exploring, locating, and accessing services already available in the community. As a result, the program design involved a three-tiered model that was expected to maximize achievement of the desired outcomes.

- Tier 1- an easy to use online directory with comprehensive information on community resources such as fitness, nutrition, social activities and support services located within the Sequoia Healthcare District
- Tier 2- a navigator that helps call-in and drop-in clients access and learn about community resources.
- Tier 3- Home visits to assess needs, risk for falls and safety in the resident environment and ongoing support for up to one month by a navigator.

Expected Outcomes

Overarching goals for the program include transformation at the systemic level along with localized changes that would support the health of individual residents. The systemic change is an increased awareness of services and activities for older adults in our community that would set in motion a movement toward an age-friendly community. At the individual level, 70 Strong intends to impact health and wellbeing in a number of ways, including:

- Increased social interactions
- Reduced barriers to services
- Increased access to transportation
- Maintenance or improvement of emotional, mental and physical health
- Improved ability to manage health and wellness

Review of Outcomes

The systems level change to increase awareness of services and activities for our older residents and move toward an age-friendly community is beginning to materialize, although this is difficult to quantify. At the individual level, we do not know the degree to which 70 Strong is impacting the health and wellbeing of our individual residents. This is because the majority of people who may be benefitting from this program are doing so through the online resource directory and we do not have a system of communicating with those individuals to determine the level of impact the program had on them.

The website, which is the first Tier, appears to be a very successful component of the program. The initial goal for visits to the site was set at 8,000. Between the launch of the program in January through the end of December 2017, we exceeded that goal by 141 visits. For 2018, the goal was raised to 10,000 visits and the most recent report provided in November showed 13,300 visits to 70strong.org. Views for fitness programs is the most popular service, followed by social groups and volunteer opportunities.

In contrast to the success of the resource directory, the Tier 2 and 3 program elements relating to navigation services, have not resulted in the robust outcomes we expected. When the program was launched, we anticipated that it would take approximately 18 months to reach the service objectives of 3,200 contacts annually for Tier 2 and 400 for Tier 3. In 2018, the goals were set more moderately to a total of 700 phone and in-person visits. Although Peninsula Family Service staff are thoroughly committed and worked diligently to reach those goals, there has been limited progress in the growth and utilization of these program components. Between January and September 2018, there were 181 contacts made through the navigators.

Proposed Changes

Given the lower than expected utilization of the Tier 2 and 3 program elements, combined with the high cost of providing these services, I propose we forgo Tiers 2 and 3 at this time, and instead focus efforts on the Tier 1 web-based referral resource, and operate the program internally.

Objectives

Specific objectives of the program:

1. Older adults in the district now have access to a centralized, up-to-date list of activities and services from a trusted source.
2. 70 Strong will decrease isolation as a result of older adults being connected and actively engaged within the community. Those already accessing the community will have opportunity to engage in new ways.
3. Older adults in the District will know how to find and utilize services and programs that improve their quality of life. Likewise, providers of these services will have the opportunity to engage this population in meaningful ways with increased participation and connectedness.

Scope

1. Transition Phase

- *Transition Oversight-* Pamela Kurtzman, Heather Clearly, and Susan Houston will provide direct oversight of the transition process. This will include logistics, communications, training, marketing, and reporting.
- *Transition Team-* We will rely upon current 70 Strong staff to assist with the smooth transition of services either to be carried out by SHD in-house staff or phased out.
- *Transition Strategies-* Strategies for a successful transition will include training by navigators to SHD staff, training on the many aspects of the website, including data management, by contractors, training by VP older adult services on the administrative aspects of the program, including transfer of vendor contracts and evaluation and data collection.
 - During the transition most all core components of the program will be retained, however some less significant program services will be eliminated prior to the transition end date, which are detailed below.
 - Once all of the necessary steps have been completed, the partnership will be officially dissolved and the partners will no longer be liable for any of the partnership's obligations.

2. In-House Implementation Phase

1. Bringing 70 Strong in-house would require we hire a full-time program coordinator (see attached job description).
2. Continuing contract with Healthify, the online resource tool that's embedded in the 70 Strong website.
3. Database tracking - maintaining a database to track participant's enrollment, outcomes and services accessed is critical to this effort.
4. Search Engine Optimization- affects the online visibility of the website or a web page in a web search engine's unpaid results. Brings results to top of the page in a web search of key words and has been shown to dramatically increase website visits.

5. Marketing - marketing is crucial to the success of the website.

Timeframe

	Description of Work	Start and End Dates
Phase One	Provide 90 day notice of termination of contract and bring Cat on Board (refer to grant termination agreement for details)	November 15, 2018-February 15, 2019
Phase Two	Dissolve partnership responsibilities, fully implement new service delivery model and examine the project closely during first 6 months with the objective to adjust the design on an ongoing basis.	February 15, 2019-ongoing

Project Budget

	Description of Work	Anticipated Costs	Anticipated Savings
Phase One	We will continue funding all current staffing and most operating costs through February 15, 2019 at the level detailed in the attached transition agreement. In addition to PFS staff, new SHD Program Manager would begin work in mid-December so there would be overlap.	\$153,000	\$312,000
Phase Two	Full time Project Coordinator	\$110,000	
	Website Resource Contract (Healthify)	\$43,000	
	Search Engine Optimization	\$38,000	
	Marketing and Postage	\$25,000	
	Computer and Supplies	\$7,500	
	Other Program Costs (staff development and trainings)	\$3,000	
	Program Evaluation	\$18,000	
	Total	\$ 244,500	\$505,000

Evaluation

May contract with Applied Survey Research (ASR) to develop annual surveys and conduct key informant interviews with participants and service providers, provide data entry and analysis, and prepare final outcomes report and presentation of findings to SHD Board and staff.

Job Description

Position:

70 Strong Program Manager

Description:

The 70 Program Manager will lead, plan, and develop the operational and administrative requirements of the 70 Strong program to assure all aspects of the program are functioning effectively and efficiently.

Currently, the 70 Strong Program is undergoing a transition from a three-tiered model delivered through a partnership with Peninsula Family Services (PFS), a local non-profit partner to a single tier 1 model operated by Sequoia Healthcare District. The transition period begins Nov 15th, 2018 and will be completed by February 15th, 2019. Initially, the program manager will provide leadership and oversight of the transition process and will work with PFS partners to assure seamless transition of tier 1 program activities. PFS team will provide guidance related to program activities, including communications, logistics, website, marketing, and reporting.

This position requires a high level of personal integrity and the ability to problem solve and make sound decisions that build trusting relationships and strong community collaborations.

Duties and Responsibilities:

I. Program Oversight, Planning, and Development

- Responsible for the administration and function of the 70 Strong Program
- Develop, review, and enhance program procedures to assure high level of productivity and efficient operational processes
- Set quarterly and annual goals and develop action plan
- Work with local agencies to assure coordination of services and other activities to maximize program efficiency and growth

- Recruit volunteers and coordinate volunteer activities
- Keep informed of similar programs in other communities for potential program enhancements and developments
- Conduct quarterly meetings with 70 Strong Advisory Team to discuss progress, ideas, and assure committee input is obtained
- Ensure long term success of program, promote sustainability

II. Contract Management/ Database Coordination

- Work with web contractor, *Healthify*, to ensure accuracy of resource information in the Directory(company will also provide maintenance and updates to application, training and support to users, and reports on site usage and activity)
- *Work with ETO Consultant*- who will create queries and custom and user reports, troubleshoot user issues, update features on ETO

III. Marketing and Promotions

- Marketing includes community events, print ads, collateral, social media, targeted direct mail, media opportunities, events and opportunities that arise
- Build relationships with local agencies service target population
- Conduct presentations in the community, coordinate with other community events

IV. Budgeting

- Maintain operating budget and monitor expenses

V. Program Evaluation

- Work with Evaluation Consultant to conduct focus groups, key informant interviews with participants and service providers, design surveys and conduct data analysis

VI. Reporting

- Meet weekly with District CEO to report activities, provide updates, and discuss ideas
- Provide bi-monthly written program updates, and formal end-of-year presentation to SHD CEO, 70 Strong Advisory Committee, and SHD Board of Directors

Qualifications:

- Minimum of Bachelors Degree in health-related field, Masters Degree preferred in fields of public or community health services or health education
- Must possess an ability to develop collaborative relationships with community organizations to expand capacity to address aging and older-adult health issues
- This position requires a high level of creativity and advanced skills in health program marketing, including print, web and social media
- Analytic skills and knowledge of program evaluation and survey development is also required
- Comfortable with delivering presentations and speaking before groups
- Successful experience working with and engaging a culturally diverse community in working on shared goals.

Compensation:

This is a full time 40 hour per week position. Year 1 salary is \$78,000 plus benefits which include health insurance up to \$1,650 monthly (minus 5% employee contribution), 401K matching up to 4%, \$50k life insurance, paid time off and sick leave, 12 annual paid holidays, mileage and cell phone reimbursement.

Start Date:

December 12 (negotiable)

Position reports directly to District CEO



525 Veterans Blvd.
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November 16, 2018

Heather Cleary, CEO
Peninsula Family Service
24 Second Avenue
San Mateo, CA 94401

RE: 70 Strong Partnership Termination Agreement

Dear Heather,

This letter confirms our formal 90-day notice to terminate our 70 Strong Program MOU dated June 21, 2018, effective February 15, 2019, subject to District Board approval. I believe that this notice and accompanying transition plan reflects our mutual understanding based on our November 13th discussion.

We recognize the tremendous commitment and contribution Peninsula Family Service staff has made toward the success of this pilot program and we greatly appreciate your dedicated service over these past two years. We have concluded, however, that the Tier 2 and 3 program elements relating to the concierge component of the business model have not resulted in the robust outcomes we expected. Therefore, we have decided to forgo Tiers 2 and 3, and instead focus efforts on the Tier 1 web-based referral resource which will be operated by Sequoia Healthcare District and its staff.

We understand that the early termination of our original MOU affects your organization and the 70 Strong staff. With this in mind, we have developed a plan and budget for the transition of services that aims to facilitate a seamless transition process for everyone.

We have very much enjoyed working with you, your organization, and the entire 70 Strong team and appreciate all you've done.

Sincerely,

Pamela Kurtzman
CEO, Sequoia Healthcare District

Contract Termination and Transition of Services Agreement

Purpose

This agreement establishes the termination of the contract between Peninsula Family Service and Sequoia Healthcare District for the 70 Strong Program, and provides for an effective and efficient transition of services.

Parties

Sequoia Healthcare District and Peninsula Family Service

Period of Agreement

This 90 day notice of termination of contract begins November 15, 2018, and ends February 15, 2019.

Scope of Services During Transition Period

- *Transition Oversight-* Pamela Kurtzman, Heather Clearly, and Susan Houston will provide direct oversight of the transition process. This will include logistics, communications, training, marketing, and reporting.
- *Transition Team-* We will rely upon current 70 Strong staff to assist with the smooth transition of services either to be carried out by SHD in-house staff or phased out.
- *Transition Strategies-* Strategies for a successful transition will include training by navigators to SHD staff, training on the many aspects of the website, including data management, by contractors, training by VP older adult services on the administrative aspects of the program, including transfer of vendor contracts and evaluation and data collection.
- All outstanding appointments with clients or others should be completed before our contract is officially terminated
- Once all of the necessary steps have been completed, the partnership will be officially dissolved and the partners will no longer be liable for any of the partnership's obligations.
- We would like to receive all relevant invoices by March 15, 2019
- During the transition most all core components of the program will be retained, however some less significant program services will be eliminated prior to the transition end date, which are detailed below.

To be retained through 2/15/2019

1. Staffing and their associated benefits to carry out continued responsibilities as defined in original proposal:

- Vice President of Older Adult Services, Susan Houston, 0.30 FTE
- Associate Director of Older Adult Services, Laura Swartzel, 0.15 FTE
- Lead Community Navigator, Theodora Kyle-Singer- LCSW, 1.0 FTE
- Community Navigator, Natalie Archer, 0.65 FTE
- Program Development Director, Tessa Solomon, 0.05 FTE
- Database Coordinator/Resource Specialist, Lina Peruzzi, 1.0 FTE

2. Operating Expenses

- Scholarship and service discounts
- Hot Spots for tablets
- Employee mileage and transportation- staff travel to and from outstations
- Some promotional materials
- Common costs

3. Vendor Contracts

- Website
 - Healthify (Purple Binder Directory)- Provides ongoing content updates for service database.
- Search Engine Optimization (SEO)

4. Administration @ 15%

This includes a portion of management, finance and human resources costs associated specifically with the 70 Strong program.

To be retained through 12/31/2018

1. Contractual

- ASR evaluation- Currently conducting focus groups, surveys and key informant interviews with participants and other service providers, data entry and analysis, preparation of final report and presentation of findings to SHD and Advisory Committee
- Content Marketing- annual contract ends 12/31/2018. Will continue marketing efforts during this timeframe.

To be discontinued immediately

1. Program Operations

- Staff trainings
- Volunteer incentives
- Workstations and equipment
- Office Supplies and postage

2. Contractual

- Website CRM
 - Carina Merrick- Website designer, she helps us make major changes to the website which is attached to the directory.
 - ETO Software
 - ETO Consultant

Deliverables

To assure the smooth transition and continued forward momentum of the program's successful website referral resource, the transfer of program services shall also include (but are not limited to) assistance with the following

- Current 70 Strong staff and contractor Support- work with SHD 70 Strong staff Cathleen

Bottini to provide guidance and technical support in the areas of website and data management, marketing, volunteer recruitment, and other relevant and necessary instruction.

- Program planning materials and data
- Listing of community contacts and referrals
- Vendor contracts- We also will require assistance with transferring of vendor contracts
- Final evaluation outcomes report- ASR and Tessa Solomon
- Marketing and collateral materials developed for 70 Strong provided via electronic format
- Return computer/ laptops and other workstation and outpost supplies purchased specifically for the 70 Strong program

Budget

We will continue funding all current staffing through February 15, 2019 at the level detailed in the below budget. We also agree to fund most current operating expenses, common costs, and overhead expenses as originally budgeted through the end of the termination agreement.

<i>Personnel- maintained through 2/15/2019</i>	<i>FY18-19</i>	<i>Transition Period 11/15/18-2/15/19</i>
Vice President of Older Adult Services- Susan Houston- 0.30 FTE	\$33,002	\$8,250
Associate Director of Older Adult Programs- Laura Swartzel- 0.15 FTE	\$10,788	\$2,700
Program Development Director- Tessa Solomon- 0.05 FTE	\$4,616	\$4,616 through 12/31/18
LCSW, Lead Community Navigator Theodora Kyle-Singer- 1.0 FTE	\$73,913	\$18,500
Community Navigator- Coralia Briones- 0.50 FTE	\$46,446	\$11,615
Database Coordinator/Resource Specialist- Lina Peruzzi- 1.0 FTE	\$49,297	\$12,325
<i>Personnel total minus benefits</i>	<i>\$218,062</i>	<i>\$58,006</i>
<i>Benefits {38%}</i>	<i>\$82,864</i>	<i>\$22,040</i>
Total Personnel	\$300,925	\$80,046 <i>Estimated personnel costs through 2/15/2019</i>
<i>Operating Costs</i>		
Staff training/Professional Development	\$9,000	No additional funds

Volunteer Incentives	\$500	No additional funds
Scholarship and Service Discounts i.e. Lyft rides	\$1,000	Up to \$250 through 2/15/19
Workstations and Equipment	\$800	No additional funds
Hot Spot, Office Supplies and Postage	\$2,200	Up to \$300 through 2/15/19
Employee Mileage and Transportation	\$2,000	Up to \$480 through 2/15/19
Flyers & Other Promotional Events & Materials	\$36,500	Up to \$1,200 through 12/31/18
Common Costs include Utilities, IT, Insurance, Audit, Occupancy, and Payroll Processing Fees, Recruitment (6% of personnel, operating & contractual)	\$32,150	Up to \$8,000 through 2/15/19
Project Expenses and Operating Costs	\$84,150	\$9,030 <i>Estimated operating costs through 2/15/19</i>
Contractual		
Content Marketing <i>Includes outstation visits, print ads, collateral, social media, targeted direct mail, media opportunities, events and opportunities that arise.</i>	\$50,400	Annual contract ends 12/31/2018 Up to \$4,200 through 12/21/18
Search Engine Optimization	\$48,000	Up to \$12,000 through 2/15/19
Website/CRM <ul style="list-style-type: none"> \$43,000 - Healthy-Purple Binder Directory- Provides ongoing content updates for service database. Company will also provide maintenance and updates to application, training and support to users, and reports on site usage and activity. \$2,000 - Carina Merrick- Website designer, she helps make major changes to the website which is attached to the directory. \$11,500 - ETO Software-Maintenance of database used to manage 70 Strong participation and results. \$10,000 - ETO Consultant- 150 hours per year of consulting to create queries and custom and user reports, troubleshoot user issues, provide 	\$66,500	No ETO software, tracking, or K. Merrick web updates- Total website up to \$11, 250 through 2/15/19

<i>staff training on queries, update and/or build new features on ETO.</i>		
Evaluation Plan – ASR	\$18,000	Through 12/31/2018
Total Contractual	\$182,900	\$27,450 <i>Estimated contractual costs through 2/15/19</i>
Administration (15% of total program)	\$85,196	Up to \$21,300 through 2/15/19
TOTAL	\$653,171	\$133,010 <i>Estimated expenses through 2/15/2019</i>

Your signature below indicates your acceptance of the terms and conditions outlined in this agreement

Sequoia Healthcare District

Peninsula Family Service

Pamela Kurtzman, CEO

Heather Cleary, CEO

Date

Date

CEO Report for October-November 2018

Pamela Kurtzman

BUSINESS AND FINANCIAL UPDATE:

Financial Summary

- Recognizing that there are several timing issues, at mid-way through the fiscal year our revenue is in line with what is expected at this time of year and our expenses are well within, or in many cases below budget. To date, our total income is just over \$730,000, only about 5% of what we budgeted, but we expect to receive large tax payments and pension income in December. On the expense side, our total costs were \$1,655,000, about 10% of total budgeted. Please refer to the detailed line item budget in the December Board packet.

Investment Income

- Since the October Board meeting, we have not yet completed the transfer of our investment portfolio to Signature Investments due to a challenge with securing a 3rd party trustee. However, that issue was recently resolved and we anticipate the transition to occur during the first week of December.
- Our 2017-18 audit has been completed and our CPA will present the report at the February Board meeting for approval.
- QuickBooks transition has begun and Heidi expects this to be completed by the end of the year.

BUILDING UPDATE:

- Window installation is in process and painting will be completed over the next two weeks.
- Ron Bedrosian informed me that he is planning to move at end of December. Currently he occupies one office and a reception area. I have contacted our rental agent to begin the process of finding a new tenant.

TAX REVENUE INVESTMENT PLANNING UPDATE:

- I've drafted a set of key priority areas for our future investments that align with our strategic plan and assure meaningful and prudent investments of our uncommitted tax dollars. My team and I have set preliminary goals and developed an action plan for how we might achieve these goals over the next two years. We look forward to discussing the funding priorities and key strategies at the Board retreat in December.

PROGRAM UPDATES

Community Grants

- Mid-year reports due December 20 and we will conduct site visits to some programs in January. Let Jenny or me know if you are interested in visiting a particular program.
- I've begun planning for the 2019-20 grant cycle. We will hold public information sessions on Jan 8th and 10th and will place an ad in the Daily Journal announcing our new funding cycle and inviting our local non-profits to attend.

District Programs

70 Strong

- I've developed a plan and timeline to move operations of the program in-house. This will considerably reduce costs associated with the program. I look forward to sharing this plan with the Board in December and seeking approval to initiate the transition.

COMMUNITY INVOLVEMENT UPDATE

ACHD

- I plan to attend the Leadership Academy January 24-25 in Sacramento. This is intended for newly elected and returning Board members and CEO's to provide resources and governance tools. Let Heidi know if you would like to attend and she will register you.
- On a monthly basis, ACHD hosts one-hour webinars on topics that are relevant to Healthcare Districts and our community partners. On Dec 5th, I will participate in a webinar detailing new laws for 2019 that relate to health and healthcare. I will keep the Board informed of any legislative changes impacting our work.

Redwood City 20/20

- Redwood City 2020 Executive Director Jana Kiser will give a presentation updating the Sequoia Healthcare District (SHD) Board of Directors about Redwood City 2020, particularly the Cradle-to-Career Pipeline of Success and other initiatives supporting SHD goals. After her brief presentation Jana looks forward to fielding questions about the collaborative and its efforts.

Oral Health Coalition (OHC)

- I continue to work with OHC, San Mateo County, and the Health Plan of San Mateo (HPSM) to improve access to care for all demographics. I've developed a draft plan for how SHD might help address challenges to access for our residents that I will share at the Board retreat. I hope to receive input from Board members that I can use to establish funding priorities and strategies and guide my action plan in this area.

Sequoia Hospital Grants Committee

- Member of Sequoia Hospital Grants Committee. Will attend grant reception on December 14th to disperse funds to the non-profits selected to receive funding. My involvement on this committee has been an important avenue for me to learn about other grant-making processes.

Middlefield Junction

- On October 15th, I presented a conceptual idea in partnership with Bridge Housing for how we might utilize the available community space at MJ. I recently learned that Bridge Housing was not awarded the contract. However, I'm now in communication with Heather Peters, the Senior Housing and Community Development Policy Analyst with the County Department of Housing to discuss opportunities to still partner on the project. Heather is very interested in working with us. Although this is a potentially significant project that will be a few years out, the planning has begun and I will meet with her again in January. I will keep the Board informed on these discussions.

OTHER UPDATES AND ACTIVITIES

- Attended Boys and Girls Club Women's Leadership Conference on November 14th in Menlo Park. The District received public praise for our long time support of programs at BGCP.
- Participated in a yoga and meditation class during the Adaptive PE Active Aging Week in late Sept at VMSC. I was the only person in the class under 60... I felt young... and loved it!
- Have been meeting with several leaders from County Health including Louise Rogers, Shireen Malekafzali, and CJ Kunnappilly to assure alignment of programs and services and opportunities for partnering and sharing resources.
- I would like to coordinate with the Board, visits to our major grant partners including Samaritan House RWC to see new remodel, Ravenswood Health Center, Mission Hospice Redwood City, and others. I will be sending invites soon for visits in January and February.

Karen Li
Director of School Health Report: October-November 2018

Healthy Schools Initiative

- 1) Met with Superintendents (Baker, Streshly, Milliken, Polido, Cesario) and mental health teams at specific school districts regarding 2018-19 HSI goals and Mental Health Data survey
- 2) Met with StarVista and Adolescent Counseling Services re: Mental Health Data survey
- 3) Planned and led Oct. and Nov. HSI Team meetings—(agendas attached)
- 4) Jenny and I worked on distributing the HSI Fall Newsletter to all eight districts
- 5) Alcohol, Tobacco, and Other Drug (ATOD) efforts:
 - a) Will include a “Vaping Education Letter” in the next HSI Newsletter
 - b) Working with collaborative partners on upcoming Peer Education vaping program
 - c) Attending Advisory Board meetings for Stanford’s Tobacco Prevention Toolkit
 - d) Arranged a meeting with Sen. Jerry Hill’s office to discuss his upcoming bill packet including anti-vaping legislation
 - e) Was an author of a Stanford poster presentation at the AACAP (American Academy of Child and Adolescent Psychiatry) conference in Seattle: “Comprehensive Substance Abuse Prevention at Northern California High Schools”—Neuroscience of Addiction curriculum pre and post data
 - f) Met with new ACS director of their Substance Abuse Treatment Program, Dr. Ingrid Ammondson
- 6) Mental Health/Student Services:
 - a) Worked with Atlas Mental Health team (Stanford/UC Berkeley start-up) to develop a “Parent Green Folder” app, which is now ready to launch--Woodside Elementary and Las Lomitas Elementary School Districts planning to pilot
 - b) Hosted the Oct. and Nov. South County Mental Health Collab meetings
 - c) Met with ACS’s new program director, Dr. Sarah Burdge to align our goals
- 7) Angst Film Project:
 - a) Four highly successful community evening film showings of ANGST took place September-October—Woodside, Menlo-Atherton, Carmont, and Sequoia High Schools—including staff and student panel discussions. Were accompanied by daytime showings to staff and students. Refer to the HSI newsletter for full details and a video clip produced by the Boys and Girls Club of the Peninsula.

- Made arrangements for video filming at Carlmont's evening event (included on new SHD YouTube channel). Hosted a post-ANGST celebration at SHD
- b) Parent Green Folders were distributed at all ANGST showings
- 8) Social Emotional Learning (SEL):
 - a) Invited the Class Catalyst team from Michigan and Illinois to the Nov. HSI team meeting--discussed piloting their SEL data tool in select classrooms--RCSD interested
 - b) Planning for enhanced Tier One support of SEL in districts
 - 9) Attended the annual Safe and Supportive Schools Conference at UC Berkeley--planning follow-up with keynote speakers/topics
 - 10) Planning for Dec. Board/staff retreat
 - 11) School Wellness Alliance Advisory Group (SWAAG)--Restorative Justice Practices survey distributed to school districts
 - 12) Challenge Success Annual Event--11/2/18--include video on our SHD YouTube channel
 - 13) Attended Eating Disorders Gala in Nov. with Pamela and Maynell--Project HEAL--11/10/18
 - 14) Oral Health Coalition Nov. meeting--follow-up plans with RCSD (Andrea Garen)

HeartSafe Program

- 1) Overseeing contractor Erica Lyons and on-site CPR classes
- 2) Provided support to VIA and SUHSD for Nov. 4th Teen Heart Screening at Sequoia High:
 - 338 Pre-Registered
 - 299 screened
 - 297 echoed
 - 25 walk-ins
 - 64 no shows
 - 117 volunteers
 - 38 Follow-up needed
 - 27 BP
 - 5 Shortness of breath
 - 6 Cardiac: 2 serious, 4 less serious

Jenny Bratton
Staff Report October- November 2018

Activity Summary

I. Healthy Schools Initiative:

- Working with Karen on mental health data collection within all eight school districts to streamline the process
- Formatted mock-up of online HSI newsletter and presented it to Wellness Coordinators at October 14th meeting and revised and edited the newsletter for each district and distributed links the last week of October.

II. Communications

- Coordinated the revision and release of the Annual Report mailing
- Continuing updates to Board Docs platform to archive past meetings
- Maintain event calendar on website
- Assisted with new email migration and integration
- Acted as liaison for communication between Francisca and Versaic
- Initiated the adoption of mini-grants application on Versaic platform
- Working with grant partners to help with mid-year reporting

III. Community/Additional Activities

- Edited SUHSD WAC newsletter as part of Sequoia Union High School District Wellness Advisory Exec Committee (WAC Exec) role
- Represented SHD to present Rotary with a certificate of appreciation for their donation to the November 4th Via Heartscreen at Sequoia HS
- Attended Safe and Supportive Schools Conference at UC Berkeley on Nov 7th and 8th and attended Challenge Success evening talk at Stanford on Nov 2nd
- Planning December Board/Staff retreat