# Del Puerto Health Care District Board of Directors October 26, 2020 Pagular Mooting Agonda

Regular Meeting Agenda
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#### BOARD OF DIRECTORS REGULAR MEETING October 26, 2020 @ 6:30 pm

Our Board meeting will be held remotely via Zoom. You can join on your computer and/or call in.

Screen share at https://us02web.zoom.us/j/4792915693?pwd=VGVuSUVTbGVrdzErdTZJQnhsWVZtUT09

If you are unable to join via computer, or do not have speakers or a microphone on your computer, you can dial in for audio.

Call (669) 900-6833 and enter ID 479 291 5693. The meeting password is DelPuerto

Note that everyone will be muted by default.

If you would like to speak during the public comment portion of the meeting, you have the following options:

Online – raise your hand, or use the Chat options.

Phone – press \*9 to raise your hand, \*6 to send a request to be unmuted to submit comments

The Del Puerto Health Care District welcomes you to this meeting, which is regularly held the last Monday of each month, and your interest is encouraged and appreciated.

**PUBLIC COMMENT PERIOD**: Matters under the jurisdiction of the Board, and not on the posted agenda, may be addressed by the general public at the beginning of the regular agenda. If you wish to speak on an item on the agenda, you are welcome to do so during consideration of the agenda item itself. If you wish to speak on a matter that does not appear on the agenda, you may do so during the Public Comment period, however California law prohibits the Board from taking action on any matter which is not on the posted agenda unless it is determined to be an emergency by the Board of Directors. Persons speaking during the Public Comment will be limited to five minutes or, depending on the number of persons wishing to speak, it may be reduced to allow all members of the public the opportunity to address the Board. Public comments must be addressed to the board as a whole through the President. Comments to individuals or staff are not permitted.

**CONSENT CALENDAR:** These matters include routine financial and administrative actions and are identified with an asterisk (\*). All items on the consent calendar will be voted on as a single action at the beginning of the meeting under the section titled "Consent Calendar" without discussion. If you wish to discuss an item on the Consent Calendar, please notify the Clerk of the Board prior to the beginning of the meeting or you may speak about the item during Public Comment Period.

**REGULAR CALENDAR:** These items will be individually discussed and include all items not on the consent calendar, all public hearings and correspondence.

**CLOSED SESSION:** Is the portion of the meeting conducted in private without the attendance of the public or press to discuss certain confidential matters specifically permitted by the Brown Act. The public will be provided an opportunity to comment on any matter to be considered in closed session prior to the Board adjourning into closed session.

ANY MEMBER OF THE AUDIENCE DESIRING TO ADDRESS THE BOARD ON A MATTER ON THE AGENDA: Please raise your hand or step to the podium at the time the item is announced by the Board President. In order that interested parties have an opportunity to speak, any person addressing the Board will be limited to a maximum of 5 minutes unless the President of the Board grants a longer period of time.

**BOARD AGENDAS AND MINUTES:** Board agendas and minutes are typically posted on the Internet on Friday afternoons preceding a Monday meeting at the following website: <a href="https://dphealth.specialdistrict.org/board-meeting-agendas">https://dphealth.specialdistrict.org/board-meeting-agendas</a>.

Materials related to an item on this Agenda submitted to the Board after distribution of the agenda packet are available for public inspection in the District office at 875 E Street, Patterson, CA during normal business hours. Such documents are also available online, subject to staff's ability to post the documents before the meeting, at the following website <a href="https://dphealth.specialdistrict.org/board-meeting-agendas">https://dphealth.specialdistrict.org/board-meeting-agendas</a>.

**NOTICE REGARDING NON-ENGLISH SPEAKERS:** Board of Director meetings are conducted in English and translation to other languages is not provided. Please make arrangements for an interpreter if necessary.

**REASONABLE ACCOMMODATIONS**: In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the Clerk of the Board at (209) 892-8781. Notification 72 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to this meeting.

Cell phones must to be silenced or set in a mode that will not disturb District business during the meeting.

#### **Del Puerto Health Care District Board of Directors**

#### October 26, 2020

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- 1. Call to Order
- 2. Pledge of Allegiance
- 3. Board of Directors Roll Call
- 4. Reading of the Mission Statement

"The District's primary mission is to provide the highest quality health care services through Patterson District Ambulance and Del Puerto Health Center, while continuing to expand healthcare availability to the citizens of the Del Puerto Health Care District."

- 5. **Public Comment Period** [Members of the public may address the Board on any issues on the Consent Calendar and items not listed on the agenda that are within the purview of the District. Commends on matters that are list on the agenda may be made at the time the Board is considering each item. Each speaker is allowed a maximum of five minutes. Board members may not comment or acting on items not on the agenda.]
- 6. **Declarations of Conflict** [Board members disclose any conflicts of interest with agenda items]
- 7. Approval of Agenda

Action

[\*Directors may request any consent calendar item be moved to regular calendar or change the order of the agenda items.]

- 8. Consent Calendar\* [Routine committee reports, minutes, and non-controversial items] Action
  - A. \*Approve Board Meeting Minutes for September 28, 2020
  - B. \*Approve Finance Committee Meeting Minutes for September 23, 2020
  - C. \*Accept Month End Financials for September 2020
  - D. \*Approve Monthly Warrants for September 2020
  - E. \*Update Policy #2112 Capital Expense
  - F. \*Adopt Policy #3565 Ergonomics
- 9. Regular Calendar

Α.	*Any Consent calendar items moved to regular calendar	Action
B.	Approve Contract w/CSU Sacramento for District Health Survey	Action
C.	Adopt Policy #3142 Whistleblower	Action
D.	Adopt Policy #3442 Employee PTO Donations	Action

#### 10. Reports

A.	Employee Anniversaries & New Hires	<u>October</u>	<u>Years</u>
	Ambulance:	<b>Brandon Cousins</b>	6
		Kirsten Nelson	6
		Lisa Ford	New
	Health Center:	Yaneth Casillas	5
	Administration:	Cheryle Pickle	2
		Danae Skinner	2

- B. Community Health Needs Assessment Director Stokman
- C. Ambulance Director, Paul Willette
- D. Health Center Manager, Suzie Benitez

#### **Del Puerto Health Care District Board of Directors**

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#### **Regular Meeting Agenda**

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E. Administration – Administrative Director/CEO, Karin Hennings

11. Board and Standing Committee Meeting Dates

Finance – Wednesday, November 18, 2020 Board – Monday, November 30, 2020

Board - Friday, December 04, 2020 (tentative)

Post Election - Oath of Office

12. **Closed Session** [Board of Directors may recess to closed session for discussion of certain matters as legally permitted. Any action taken shall be reported in open session.]

A. Gov't Code section 54956.8 Conference with Real Property Negotiator

Property: APN 0131-024-007

B. Gov't Code § 54956.9(b) Conference with Legal Counsel – Anticipated litigation or

significant exposure to litigation: Two (2) potential cases.

13. Reconvene to Open Session – Report of Closed Session

14. Adjourn



# **BOARD OF DIRECTORS MEETING September 28, 2020** @ 6:30 pm Via Zoom

**Board of Directors Minutes** 

1. **Call to order** @ 6:33 pm. By Vice President, Dan Robertson

2. Pledge of Allegiance

3. Board of Directors Roll Call.

**Directors Present**: Director, Dan Robinson

Director, Anne Stokman Director, Becky Campo

Director, George Galloway Mac Master

**Directors Absent:** Director, Steve Pittson

**Staff Present:** Administrative Director/CEO, Karin Hennings

Ambulance Director, Paul Willette joined @ 6:39 Accounting Finance Manager, Maria Reyes-Palad

Clerk of the Board, Cheryle Pickle

**District Legal Council:** Dave Ritchie, Cole Huber, LLP

We have a Quorum

#### 4. Reading of the Mission Statement

"The District's primary mission is to provide the highest quality health care services through Patterson District Ambulance and Del Puerto Health Center, while continuing to expand healthcare availability to the citizens of the Del Puerto Health Care District."

#### 5. Public Comment Period

**Present**: James Rightmire and Debbie Novelli of I Heart Media, Michael Courtney with Westside Community Health Care District, Maria Carlson with MHD Group

6. **Declarations of Conflict:** There were no conflicts of interest.

7. Approval of Agenda: M/S/C To accept the agenda. Director Stokman / Director

Campo

Ayes: Directors Robinson, Stokman, Campo, Mac Master

Nays: None A**bstain**: None

**Passed** 

#### 8. Presentation: Update on iHeart Media Advertising Campaign

Mr. Rightmire reviewed the current campaign numbers. The campaign is still ongoing. He demonstrated how many times our advertising had been shown, where it was shown, and how many English/Spanish spots were run.



He also was able to show the number of clicks that were done thru email. The numbers were higher than the average for healthcare. Ms. Novelli also will follow up with the Administrative Director/CEO to tweak the remaining campaign and give a proposal for continuing the campaign. They answered all questions.

#### 9. Presentation: Marketing via Social Media by MHD Group

Maria Carlson with MHD Group gave a presentation which defined social media. She explained how they would approach a campaign. She shared some examples of how they had managed the Social Media Campaigns for other companies. She answered questions. Ms. Henning will forward a proposal from MHD Group to manage a Social Media campaign, to the Board members.

- 10. Consent Calendar \* [Routine committee reports, minutes, and non-controversial items]
  - A. \*Approve Board Meeting Minutes for August 31, 2020
  - B. \*Approve 2020 Conflict of Interest Biennial Notice with no amendments
  - C. \*Approve Finance Committee Meeting Minutes for August 26, 2020
  - D. \*Accept Month End Financials for August 2020
  - E. \*Approve Monthly Warrants for August 2020

M/S/C That the Board of Directors accept the Consent Calendar as presented. /Director Campo / Director Mac Master Ayes: Directors Robinson, Stokman, Campo, Mac Master

Nays: None Abstains: None

Passed

#### 11. Regular Calendar

A. \* Any Consent calendar items moved to regular calendar

#### B. Adopt for Employee Referral Program

Ms. Hennings explained that our employees are a good source for recruitment, especially in hard to fill positions. They know what type of employee they would like to work with. They know what the job requires. She answered questions. Interns and other types of students would not qualify. It would have to be the candidate's first contact with the District. They would have to work for the District for 90 days before a referral fee would be paid. After the position was opened, the referral incentive would go the first person who completed the form and turned it into Human Resources. The person would need to be hired and work for the district for at least 90 days. After discussion it was decided to adopt the policy as a pilot program.

M/S/C: Motion: that the Employee Referral Program be adopted on 09/28/2020 as a pilot program for 6 months.

/Director Campo/Director Mac Master/

Ayes: Directors Robinson, Stokman, Campo, Mac Master



Nays: None Abstains: None

Passed

#### C. Resolution 2020-07 TCB Loan 3-Yr Payment Plan

Ms. Hennings explained the options for reducing the loan. There is a penalty for any early payment of principle greater than 10%. However, they looked at the interest that would be saved and found that there would still be a significant savings. The finance committee recommended the 4<sup>th</sup> option but wanted the Board's opinion. After discussion it was decided that paying the prepayment penalty was acceptable since the savings in interest was so great.

M/S/C: Motion: Whereas, the Board approved TCB Loan Payment Option 4; Be it now resolved, the Board of Directors directs the Administrative Director/CEO to process payment of \$275k for each year for three (3) years from the District's operating bank account.

/Director Mac Master/Director Stokman/

Ayes: Directors, Robinson, Stokman, Campo, Mac Master

Nays: None Abstains: None Passed

#### D. FY20-21 Budget Modification - Information Only

The Finance committee asked that we modify the income to reflect expectations more accurately. It shows \$200k less income. However, there are \$98K added tax assessments that were not included in the original budget. We will revisit the budget in December/January.

#### E. Resolution 2020-08 Ambulance Unbudgeted Software Operational Expense

Mr. Willette explained the current ePCR (electronic patient care record) from Zoll is at end of life. We're obtaining a new SAAS ePCR at no cost. It gives us greater functionality but does not access the local CAD (Computer Assisted Dispatch) yet. We need programming to make this connection. This would be a one-time cost. The other choice would be to use software from AMR and pay a licensing fee of \$4259 per year. This board discussed this, and all questions were answered.

M/S/C Motion: I move that the Board of Directors approve the unbudgeted operational expense of \$8000. For the development of software that incorporated EMS charts into the Computer Assisted Dispatch System.

/Director Campo/ Director Stokman/

Ayes: Directors Robinson, Stokman, Campo, Mac Master

Nays: None
Abstain: None

**Passed** 



#### F. Adopt Policy on Use of Non-Appropriated Funds for Food (Non-Travel) and Employee Recognition Expense

Ms. Hennings explained that the auditors pointed out that the non-appropriated funds (non-tax based) should be used to provide meals for staff meetings, or employee recognition. The auditors recommended this policy to codify and establish procedures for the budgeting and application of non-appropriated funds to these types of proper expenses. The policy was discussed, and questions answered.

M/S/C: Motion: I move that the Board of Directors approve Policy 2127, Use of Non-appropriated Funds for Non-Travel Food and Employee Recognition Expense, effective September 28, 2020.

/Director Mac Master/Director Campo/

Ayes: Directors, Robinson, Stokman, Campo, Mac Master

Nays: None Abstains: None Passed

#### 12. Reports

A.	Employee Anniversaries & New Hires	September	<u>Years</u>
	Ambulance:	William Calderon, Jr.	3
		Ricardo Marquez	3
	Health Center:	Rosario Avina	13
		Aracely Ortiz Rodriguez	3
		Yesenia Sanchez	5
	Administration:	Maria Reyes-Palad	2
		Maria Manzo Lizarraga	NEW

#### B. **District Wide Community Assessment –** Director Stokman

Ms. Stokman stated that the questionnaire will be going out sometime in November, after the election. The committee needs to scale down the questions. They currently have 65 questions and need to scale it down to 20-25 questions. The next step is to take it to the pros at Sac State, who will be conducting the survey.

C. West Side Health Care Task Force - George Galloway Mac Masters - No Report

#### D. Ambulance -

Ms. Hennings reviewed the ambulance report. She highlighted the number of times the ambulance was pulled into Modesto/Turlock area. Therefore, we had more mutual aid into our area from Westside. Mr. Willette is working with MVEMS regarding the AMR Shortage in the Modesto/Turlock area.



#### E. Health Center

Ms. Hennings gave the report. She said that the Health Center is going live with the new EHR on October 01, 2020. She has a meeting tomorrow with the physicians to discuss any final concerns. The staff has been training. There is a mock live on Wednesday and they will go live on Thursday. Visits for the month were 900. This is an improvement. This has been due to the media campaign and the staff's efforts to contact all assigned patients. Telehealth is 15-18% of the visits. We are aiming for 20% of visits in the future. School physicals were down due to the children not returning to in person classes. There was a meeting with the Finance Committee and the physicians. We will continue to engage our staff in the solutions to fiscal sustainability.

#### F. Administration – Karin Hennings, Administrative Director / CEO

The Board received notice from the County Clerk's office that the two short term seats have been appointed, unopposed. The seats are Director Campo and Director Mac Master. There is a contested election for the other two seats. So, there will be a election cost for this contest.

The board also received notice from Stanislaus County LAFCO (Local Agency Formation Commission) regarding the Countywide Redevelopment Agency (RDA) Oversight Board: Selection of Regular/Alternative Special District Representative. We can submit a nomination for the Special District Representative Regular/Alternative on the Stanislaus Countywide Redevelopment Agency Oversight Board. Director Campo is interested if Director Pittson is ot available/interested. Ms. Hennings will check with Director Pittson.

Ms. Hennings asked Director Campo to share the idea that she had for the Board. Director Campo feels that we need to work on community relations. She believes that the District, City of Patterson, Fire Department and Law Enforcement should be meeting together. She feels that there are no cohesive relationships. We could have quarterly meetings and share needs and have better communications. We all share the same mission. We need a committee. Wants to place on the agenda for next board meeting. Perhaps we can instruct Ms. Hennings to send a letter to each of the different players to start the interest in the group.

#### 13. Upcoming Regular Board and Standing Committee Meeting Dates

Finance – Wednesday, October 21, 2020 Board – Monday, October 28, 2020 Finance – Wednesday, November 25, 2020 Board – Monday, November 30, 2020 Finance – Wednesday, December 23, 2020 Board – Monday, December 28, 2020

It was recommended that the Finance Committee meeting in November be moved to November 18, 2020 and the December meeting be cancelled but the reports be sent to committee members by December 16, 2020.



The first Friday in December, December 04, 2020 @ 10:00 a.m. we can have a short meeting to have the new Board Members take the Oath of Office. We can have a short Board meeting on either the 4<sup>th</sup> or the 7<sup>th</sup> and cancel the December 28, 2020 meeting.

Every 2 years we need to do Sexual Harassment Training and Ethics Training. We also have to do Non-Conflict of Interest. We can consider doing this in January, perhaps Monday, January 11, 2021. We will decide and send a memo.

Adjourned to Closed Session @ 8:51

14. Closed Session [Board of Directors may recess to closed session for discussion of certain matters as legally permitted. Any action taken shall be reported in open session.]

A. Gov't Code section 54956.8 Conference with Real Property Negotiator

Property: APN 0131-024-007

B. Gov't Code § 54956.9(b) Conference with Legal Counsel – Anticipated litigation or

significant exposure to litigation: One (1) potential case

A. Reconvene to Open Session – Report of Closed Session

No reportable items. Instructions given to staff.

B. **Adjourn @ 9:06** 

#### DEL PUERTO HEALTH CARE DISTRICT 875 E Street - Patterson, California 95363 FINANCE MEETING via Zoom Video Conference MINUTES SEPTEMBER 23, 2020

#### I. Call to order/Attendance

The meeting was called to order by Anne Stokman, Committee Chair, 3:04PM

Other Board Members Present: Becky Campo, Committee Member

Other Staff Members Present: Karin Hennings, Administrative Director/CEO; Maria Reyes-Palad, Financial Accounting Manager; Paul Willette, Ambulance Director; Suzie Benitez, Health Center Manager; and Danae Skinner, Administrative Staff Accountant

II. Public Participation - No comments

#### III. Acceptance of Agenda

M/S/C Anne Stokman/Becky Campo to accept the agenda as presented.

#### IV. Finance Report Review

A. Review for Approval: August 26, 2020 Finance Meeting Minutes
M/S/C Becky Campo/Anne Stokman to accept the minutes for August 26,
2020 as presented.

**B.** Review Financial Report for August 2020

Maria Reyes-Palad reviewed the report and answered all questions regarding the Financial Report.

M/S/C Anne Stokman/Becky Campo to recommend to the Board to accept the Financial Report as presented.

**C.** Review for Recommendation August 2020 Warrants

Maria Reyes-Palad reviewed the report and answered all questions regarding the warrants.

M/S/C Anne Stokman/Becky Campo to recommend to the Board to approve the warrants as presented.

#### IV. Old Business

A. Budget Details FY2020-21

Maria Reyes-Palad reviewed the report answered all questions regarding the Budget Details.

The committee recommended that it be sent to the Board as an Information Item.

**B.** Keystone C Loan Pre-Payment Options

Maria Reyes-Palad reviewed the report answered all questions regarding the report.

M/S/C Anne Stokman/Becky Campo to send the Pre-Payment Options to the Board with the Committee's recommendation that the Board approve Pre-Payment Option Number 4.

**C.** Policy on Non-Travel Meals & Employee Recognition

Karin Hennings reviewed the policy and explained that as a public entity we cannot pay for employee meals or recognition from public funds and this policy would ensure that such expenses come from income earned from District deposits.

M/S/C Becky Campo/Anne Stokman to recommend the Policy to the Board with language stating that the expenses not exceed the budget.

#### DEL PUERTO HEALTH CARE DISTRICT 875 E Street - Patterson, California 95363 FINANCE MEETING via Zoom Video Conference MINUTES SEPTEMBER 23, 2020

#### V. New Business - None

A. FY2020-21 Insurance Cost & Rebate Allocation

Maria Reyes-Palad reviewed the report answered all questions regarding the Insurance Cost & Rebate Allocation.

Information Only – No Action Taken

**B.** Ambulance ePCR Software Connection to Dispatch - Capital Expense Karin Hennings and Paul Willette presented the Resolution and answered all questions regarding the Ambulance ePCR Software Connection to Dispatch - Capital Expense Resolution.

M/S/C Anne Stokman/Becky Campo to recommend to the Board the Ambulance ePCR Software Connection to Dispatch - Capital Expense Resolution.

**C.** Employee Referral Program.

Karin Hennings presented the Resolution and answered all questions regarding Employee Referral Program Resolution.

M/S/C Becky Campo/Anne Stokman to recommend the Employee Referral Program Resolution be sent to the Board.

#### VI. Accounting and Finance Manager Report

- A. Update on Grant and Stimulus Monies Received
  - COVID-19 Summary and Details
  - Telehealth Grant Balance as of July 31, 2020 Report Information Only – No Action
- Updates on E Street Expansion Details
   Maria Reyes-Palad presented the report.
   Information Only No Action
- C. Set Schedule for Committee Review of Account Reconciliations
  Anne Stokman set date of Thursday, September 24, 2020 to come to the
  District Office and review Reconciliations.

#### VII. Meeting adjourned – 3:58PM

Respectfully submitted,

Anne Stokman, Treasurer

# Del Puerto Health Care District Balance Sheet

5:34 PM 10/15/20 Accrual Basis

Balance Sheet As of September 30, 2020

	Sep 30, 20	Aug 31, 20	% Change	% % Aug 31, 20 Change Sep 30, 19 Change	% Change
ASSETS					
Current Assets					
Total Checking/Savings	2,918,221	3,101,616	(%9)	(6%) 2,691,460	8%
Total Accounts Receivable	644,327	593,681	%6	774,679	(11%)
Total Other Current Assets	527,549	402,712	31%	477,581	10%
Total Current Assets	4,090,097	4,098,009	(%0)	3,943,720	4%
Fixed Assets					
Total 151.000 · Capital assets	5,322,751	5,339,886	(%0)	(0%) 5,233,007	2%
Total Fixed Assets	5,322,751	5,339,886	(%0)	5,233,007	2%
FOTAL ASSETS	9,412,848	9,437,895	(%0)	9,176,727	3%
IABILITIES & EQUITY					
Liabilities					
Total Current Liabilities	531,039	603,356	(12%)	536,477	(1%)
Total Long Term Liabilities	2,531,765	2,540,372	(%0)	2,709,117	(%2)
Total Liabilities	3,062,804	3,143,728	(3%)	(3%) 3,245,594	(%9)
Equity					
350.000 · Unrestricted Assets	1,213,410	1,213,410		980,351	24%
Total 360.000 · Assigned Fund Balance	2,292,357	2,292,357		1,967,000	17%
Total 370.000 · Restricted Fund Balance	240,524	240,524		226,440	%9
390.000 · Net Fixed Assets (Capital)	2,492,762	2,492,762		2,492,762	
Net Income	110,990	55,116	101%	264,580	(28%)
Total Equity	6,350,043	6,294,169	1%	5,931,133	%/
FOTAL LIABILITIES & EQUITY	9,412,847	9,437,897	(%0)	(0%) 9,176,727	3%

Operating Acct	, 2,918,221	(83,403)	(121,863)	(72,738)	(119,804)	(876,357)	(354,923)	1,289,133	91%	1,416,000
U	pu	4	37	ne.	es	b	ity (	; ys	a	e V
	Month End Cash on Hand \$	101.015 · TCB - Keystone C 8641	103.100 · TCB-USDA Debt Reserve 7237	280.000 · Deferred Grant Revenue	370.010 · Mitigation Fees	360.030 · Asset Replacement Fund	A/P & Payroll Liability \$	Unencumbered cash \$	Percent of Operating Cash Reserve Goal	360.070 · Operating Cash Reserve

# **Del Puerto Health Care District**

5:51 PM 10/15/20 Accrual Basis

YTD by Class July through September 2020

	Tota	Total 01 DPHCD	٥	Total 02	Total 02 Patterson District Ambulance	istrict	Total 03 [	Total 03 Del Puerto Health Center	Health	Total 06 Keystone Bldg C	eystone E	3ldg C		TOTAL	
	Jul - Sep 20	Budget	% of Budget	Jul - Sep 20	Budget	% of Budget	Jul - Sep 20	Budget	% of Budget	Jul - Sep 20	Budget	% of Budget	Jul - Sep 20	Budget	% of Budget
Ordinary Income/Expense Income															
401.000 · Gross Patient Service Revenue				2,220,221	2,108,750	105%	459,495	575,070	80%				2,679,716	2,683,820	100%
403.000 · Adjustments				(1,518,990)	(1,411,096)	108%	(23,901)	(33,106)	72%					(1,444,202)	107%
405.000 · Bad Debt				(171, 130)	(153,066)	112%	(6,191)		100%				(177,321)	(153,066)	116%
407.000 · Other Income	1,425	200	285%	121,623	1,500	8,108%	45,640	44,000	104%				168,688	46,000	367%
Total Income	1,425	200	285%	651,724	546,088	119%	475,043	585,964	81%				1,128,192	1,132,552	100%
Gross Profit	1,425	200	285%	651,724	546,088	119%	475,043	585,964	81%				1,128,192	1,132,552	100%
Expense															
601.000 · Salaries & Wages	107,172	106,673	100%	322,703	275,460	117%	231,724	275,616	84%				661,599	657,749	101%
602.000 · Employee Benefits	29,899	31,766	94%	74,485	78,643	%26	71,915	88,292	81%				176,299	198,701	86%
603.000 · Professional Fees	3,812	16,500	23%	1,827	1,590	115%	179,794	181,644	%66				185,433	199,734	83%
604.000 · Purchased Services	2,676	2,696	%66	56,379	48,257	117%	61,311	73,215	84%				120,366	124,168	%26
605.000 · Supplies	1,552	2,360	%99	26,547	23,150	115%	20,948	23,088	91%				49,047	48,598	101%
606.000 · Utilities	1,933	1,925	100%	6,297	4,825	131%	10,626	10,780	%66				18,856	17,530	108%
607.000 · Rental and Lease	1,190	1,238	%96	92	100	%26	1,432	1,490	<b>%96</b>				2,717	2,828	%96
608.000 · Insurance Coverages	8,337	8,342	100%	44,185	44,435	%66	29,250	28,996	101%				81,772	81,773	100%
609.000 · Maintenance & Repairs	499	775	64%	9,578	21,575	44%	4,353	6,930	93%				14,430	29,280	49%
610.000 · Depreciation and Amortization	2,419	2,420	100%	42,375	42,390	100%	19,444	19,440	100%	11,997	12,000	100%	76,235	76,250	100%
611.000 · Other operating expenses	12,383	12,505	%66	25,032	44,781	%99	23,106	19,487	119%				60,521	76,773	%62
Total Expense	171,872	187,200	92%	609,503	585,206	104%	653,903	728,978	%06	11,997	12,000	100%	1,447,275	1,513,384	%96
Net Ordinary Income	(170,447) (186,700)	(186,700)	91%	42,221	(39,118)	(108%)	(178,861) (143,014)	(143,014)	125%	(11,997)	(11,997) (12,000)	100%	(319,084)	(380,832)	84%
Other Income/Expense															
Other Income															
701.000 · District Tax Revenues	354,999	355,000	100%	60,750	60,750	100%							415,749	415,750	100%
702.000 · Impact Mitigation Fees															
703.000 · Investment Income	3,326	3,100	107%	0			0						3,326	3,100	107%
704.000 · Interest Expense							(15,338)	(15,000)	102%	(11,144)	(11,144) (10,750)	104%	(26,482)	(25,750)	103%
705.000 · Tenant Revenue							1,800	1,800	100%	37,601	32,325	116%	39,401	34,125	115%
710.000 · Misc Other Income								2,000						2,000	
Total Other Income	358,325	358,100	100%	60,750	60,750	100%	(13,538)	(11,200)	121%	26,457	21,575	123%	431,994	429,225	101%
Other Expense															
802.000 · Keystone District Expense										1,925	2,054	94%	1,925	2,054	94%
810.000 · Misc Other Expense															
Total Other Expense										1,925	2,054	94%	1,925	2,054	94%
Net Other Income	358,325	358,100	100%	60,750	60,750	100%	(13,538)	(11,200)	121%	24,532	19,521	126%	430,069	427,171	101%
Net Income	187,878	171,400	110%	102,971	21,632	476%	(192,399) (154,214)	(154,214)	125%	12,535	7,521	167%	110,985	46,339	240%

## **Del Puerto Health Care District Warrants by Bank Account**

September 2020

Туре	Date Nun	September 2020 Name	Credit	NOTES
101.000 · Cash and o		Name	Orcuit	NOTES
101.010 · Tri Count	=			
	erating Checking 1739	9		
Check	09/15/2020 eft	USDA Rural Development Loan-EFT	11,066.00	
Bill Pmt -Check	09/01/2020 EFT	U.S. Bank Equipment Finance - EFT	126.27	
Bill Pmt -Check	09/11/2020 EFT	City Of Patterson-H2O, sewer, garbage	613.04	
Bill Pmt -Check	09/11/2020 EFT	U.S. Bank Equipment Finance - EFT	149.95	
Bill Pmt -Check	09/11/2020 EFT	U.S. Bank Equipment Finance - EFT	140.24	
Bill Pmt -Check	09/01/2020 29424	GreenWorks Janitorial Services	3,877.00	
Bill Pmt -Check	09/01/2020 29425	McKesson Medical Surgical Inc.	787.77	
Bill Pmt -Check	09/01/2020 29426	MD - Blythe, Diana	23,951.33	
Bill Pmt -Check	09/01/2020 29427	MD - Rodriguez, Jose	35,333.33	
Bill Pmt -Check	09/01/2020 29428	PG&E	39.16	
Check	09/11/2020 29429	U.S. Bank Corporate Payment Center	3,724.25	
Bill Pmt -Check	09/11/2020 29430	ADT / Protection One	758.31	
Bill Pmt -Check	09/11/2020 29431	Airgas USA, LLC	634.73	
Bill Pmt -Check	09/11/2020 29432	Amazon	323.43	
Bill Pmt -Check	09/11/2020 29433	BICSEC Security, Inc	25.00	
Bill Pmt -Check	09/11/2020 29434	Bound Tree Medical LLC	1,021.61	
Bill Pmt -Check	09/11/2020 29435	City of Patterson-Business Licenses	55.02	
Bill Pmt -Check	09/11/2020 29436	City Of Patterson-H2O, sewer, garbage	441.26	
Bill Pmt -Check	09/11/2020 29437	Comcast - Other	249.85	
Bill Pmt -Check	09/11/2020 29438	Cradlepoint	180.00	
Bill Pmt -Check	09/11/2020 29439	Data Path, Inc	9,155.00	
Bill Pmt -Check	09/11/2020 29440	DeHart Plumbling Heating & Air Inc	370.00	
Bill Pmt -Check	09/11/2020 29441	Digital Deployment/Streamline	300.00	
Bill Pmt -Check	09/11/2020 29442	Frontier-3755	198.75	
Bill Pmt -Check	09/11/2020 29443	Frontier - HC 8639	194.04	
Bill Pmt -Check	09/11/2020 29444	Graphic Print Stop	37.27	
Bill Pmt -Check	09/11/2020 29445	Greenway Health	1,921.19	
Bill Pmt -Check	09/11/2020 29446	Jorgensen & Co.	60.00	
Bill Pmt -Check	09/11/2020 29447	Language Line	138.84	
Bill Pmt -Check	09/11/2020 29448	Life-Assist	2,004.14	
Bill Pmt -Check	09/11/2020 29449	Malm Fagundes LLP	452.31	
Bill Pmt -Check	09/11/2020 29450	McAuley Ford	286.40	
Bill Pmt -Check	09/11/2020 29451	McKesson Medical Surgical Inc.	140.55	
Bill Pmt -Check	09/11/2020 29452	MedTech Billing Services, Inc	8,781.03	
Bill Pmt -Check	09/11/2020 29453	Mission Linen Supply	531.28	
Bill Pmt -Check	09/11/2020 29454	NextGen Healthcare, Inc	546.00	
Bill Pmt -Check	09/11/2020 29455	O'Reilly Auto Parts	50.66	
Bill Pmt -Check	09/11/2020 29456	Pacific Records Management	199.47	
Bill Pmt -Check	09/11/2020 29457	Patterson Irrigator	30.00	
Bill Pmt -Check	09/11/2020 29458	Paul Oil Co., Inc.	1,957.65	
Bill Pmt -Check	09/11/2020 29459	Pfizer Inc.	1,979.78	
Bill Pmt -Check	09/11/2020 29460	Physicians Service Bureau	330.07	
Bill Pmt -Check	09/11/2020 29461	Pitney Bowes - Meter Refil	201.00	
Bill Pmt -Check Bill Pmt -Check	09/11/2020 29462	Praetorian Digital	495.00	
Bill Pmt -Check	09/11/2020 29463 09/11/2020 29464	Randik Paper Co	238.37	
Bill Pmt -Check	09/11/2020 29464	ReadyRefresh by Nestle	145.79 1 746 90	
Bill Pmt -Check	09/11/2020 29466	Sanofi Pasteur, Inc SEMSA Sierra Medical Services Allianc	1,746.90	
Bill Pmt -Check	09/11/2020 29467	Staples Advantage	9,907.95 61.47	
Bill Pmt -Check	09/11/2020 29468	Stericycle	682.50	
Bill Pmt -Check	09/11/2020 29469	TID Turlock Irrigation District +06	1,833.08	
Dill I IIIL -OHGON	30/11/2020 23403	TID TAILOOK IITIGAROTI DISTRICT TOO	1,000.00	

#### Del Puerto Health Care District Warrants by Bank Account September 2020

		September 2020		
Туре	Date Num	Name	Credit	NOTES
Bill Pmt -Check	09/11/2020 29470	Verizon Wireless	352.73	
Bill Pmt -Check	09/11/2020 29471	Westside Landscape & Concrete	292.50	
Bill Pmt -Check	09/11/2020 29472	Workbench True Value Hdwe.	17.25	
Bill Pmt -Check	09/11/2020 29473	AMS Software Inc.	181.00	
Check	09/15/2020 29474	Wakefield	519.53	
Check	09/24/2020 29475	REFUND - Anthem Blue Cross	3,294.64	
Check	09/24/2020 29476	REFUND - Stillwell, Jordan	75.00	
Bill Pmt -Check	09/24/2020 29477	A West Side Self Storage	228.60	
Bill Pmt -Check	09/24/2020 29478	AMR-American Medical Response	5,655.02	
Bill Pmt -Check	09/24/2020 29479	Beta Healthcare - Workers Comp	5,119.00	
Bill Pmt -Check	09/24/2020 29480	Beta Healthcare Group	17,279.67	
Bill Pmt -Check	09/24/2020 29481	Life-Assist	742.25	
Bill Pmt -Check	09/24/2020 29482	Modesto Welding Products	142.88	
Bill Pmt -Check	09/24/2020 29483	Bound Tree Medical LLC	2,727.33	
Bill Pmt -Check	09/24/2020 29484	California Chamber of Commerce	650.00	
Bill Pmt -Check	09/24/2020 29485	Cole Huber (Cota Cole)	666.50	
Bill Pmt -Check	09/24/2020 29486	iHeart Media	2,250.00	
Bill Pmt -Check	09/24/2020 29487	Intrado (West) Interactive Services	332.34	
Bill Pmt -Check	09/24/2020 29488	Keystone Pacific Business Park Owners	3,609.00	
Bill Pmt -Check	09/24/2020 29489	McKesson Medical Surgical Inc.	3,803.39	
Bill Pmt -Check	09/24/2020 29490	MHD Group	2,000.00	
Bill Pmt -Check	09/24/2020 29491	Mid Valley IT	360.00	
Bill Pmt -Check	09/24/2020 29492	Mission Linen Supply	748.21	
Bill Pmt -Check	09/24/2020 29493	MO-CAL Office Solutions	693.90	
Bill Pmt -Check	09/24/2020 29494	Paul Oil Co., Inc.	1,952.97	
Bill Pmt -Check	09/24/2020 29495	PG&E	24.75	
Bill Pmt -Check	09/24/2020 29496	PowerDMS, Inc	VOID	
Bill Pmt -Check	09/24/2020 29497	ReadyRefresh by Nestle	145.79	
Bill Pmt -Check	09/24/2020 29498	SEMSA Sierra Medical Services Allianc	6,910.16	
Bill Pmt -Check	09/24/2020 29499	Shred-it US JV LLC	568.50	
Bill Pmt -Check	09/24/2020 29500	Staples Advantage	351.68	
Bill Pmt -Check	09/24/2020 29501	Stericycle	682.50	
Bill Pmt -Check	09/24/2020 29502	Stryker Sales Corporation	488.03	
Bill Pmt -Check	09/24/2020 29503	West Side Storage Baldwin	187.20	
Bill Pmt -Check	09/24/2020 29504	Zoll	649.70	
Bill Pmt -Check	09/24/2020 29505	PowerDMS, Inc	3,999.64	
Bill Pmt -Check	09/25/2020 29506	Comcast Business Voice Edge	1,883.40	
Bill Pmt -Check	09/25/2020 29507	PG&E	41.31	
Total 101.011 · TC	B-Operating Checking 17	739	198,100.41	
101.012 · TCB-Pay	roll Account 2999			
Liability Check	09/02/2020	Payroll Direct Deposit	64,341.60	
Paycheck	09/17/2020	Phillips, Steve L.	VOID	
Liability Check	09/16/2020	Payroll Direct Deposit	58,131.52	
Liability Check	09/30/2020	Payroll Direct Deposit	51,914.81 3r	d Payroll
Liability Check	09/24/2020 EFT	Metlife - Group Benefits	1,005.44	
Liability Check	09/03/2020 E-pay	EDD State of California	5,418.67	
Liability Check	09/03/2020 E-pay	Internal Revenue Service	29,158.20	
Liability Check	09/03/2020 E-pay	EDD State of California	1.68	
Liability Check	09/03/2020 E-pay	Internal Revenue Service	25.68	
Liability Check	09/17/2020 E-pay	EDD State of California	4,867.51	d Dovroll
Liability Check	09/17/2020 E-pay	Internal Revenue Service	26,979.46 <sup>3r</sup>	d Payroll
Paycheck	09/03/2020 24683	Employee Payroll	3,155.67	
Paycheck	09/03/2020 24684	Employee Payroll	1,481.75	
Paycheck	09/03/2020 24685	Employee Payroll	1,004.16	

#### Del Puerto Health Care District Warrants by Bank Account September 2020

_			September 2020		
Туре	Date	Num	Name	Credit	NOTES
Paycheck	09/03/2020	24686	Employee Payroll	1,048.28	
Paycheck	09/03/2020	24687	Employee Payroll	1,441.28	
Paycheck	09/03/2020	24688	Employee Payroll	2,665.65	
Paycheck	09/03/2020	24689	Employee Payroll	1,943.84	
Paycheck	09/01/2020	24690	Employee Payroll	150.67	
Liability Check	09/03/2020	24691	AIG (VALIC)	12,722.38	
Liability Check	09/03/2020	24692	United Steelworkers	520.90	
Paycheck	09/17/2020	24693	Employee Payroll	4,171.30	
Paycheck	09/17/2020	24694	Employee Payroll	1,478.07	
Paycheck	09/17/2020	24695	Employee Payroll	991.13	
Paycheck	09/17/2020	24696	Employee Payroll	1,036.90	
Paycheck	09/17/2020	24697	Employee Payroll	1,444.94	
Paycheck	09/17/2020	24698	Employee Payroll	2,711.16	
Paycheck	09/17/2020	24699	Employee Payroll	1,940.34	
Liability Check	09/17/2020	24700	AIG (VALIC)	12,640.39	
Liability Check	09/17/2020	24701	United Steelworkers	458.60	
Paycheck	09/17/2020	24702	Employee Payroll	1,863.03	
Liability Check	09/17/2020	24703	CA Choice	33,618.60	
Liability Check	09/17/2020	24704	Delta Dental	3,625.24	
Liability Check	09/17/2020	24705	MES Vision	584.57	
Liability Check	09/17/2020	24706	LegalShield	306.05	
Liability Check	09/24/2020	24707	AFLAC	2,523.58	
Total 101.012 · TCE	B-Payroll Accou	unt 2999	_	337,373.05	
101.015 - TCB - Key	ystone C 864°	1			
Bill Pmt -Check	09/11/2020	EFT	Tri Counties Bank-EFT	7,442.07	
Bill Pmt -Check	09/11/2020	10205	City Of Patterson-H2O, sewer, garbage	181.02	
Bill Pmt -Check	09/11/2020	10206	DeHart Plumbling Heating & Air Inc	1,068.50	
Bill Pmt -Check	09/11/2020	10207	TID Turlock Irrigation District +06	700.48	
Bill Pmt -Check	09/11/2020	10208	Gilberto Arroyo-06	355.00	
Bill Pmt -Check	09/24/2020	10209	Keystone Pacific Business Park Owners	2,879.00	
Total 101.015 - TCB	- Keystone C	8641	-	12,626.07	
Fotal 101.010 ⋅ Tri Co	=		<del>-</del>	548,099.53	
otal 101.000 · Cash a		/alents	-	548,099.53	
3.000 - Restricted I	-	aiorno		0 10,000.00	
103.100 · TCB-USDA		re 7237			
Check	09/15/2020		USDA Rural Development Loan-EFT	10,060.00	
Total 103.100 · TCB-				10,060.00	
otal 103.000 · Restric		220110 1201	-	10,060.00	
TAL	nou i unus		-	558,159.53	
IAL			=	330,138.33	
			Less: 3rd Payroll	83,761.78	
			TOTAL WARRANTS ISSUED	474,397.75	

	EFFECTIVE DATE
CAPITAL EXPENSE	MM/DD/YYY

SECTION:

POLICY NUMBER:

**BOARD** 

2112

#### 1. Purpose

The purpose of this policy is to set forth the regulations and procedures governing the control and reporting of capital and controlled assets. It is intended to assist personnel in implementing and maintaining an effective and accurate process for tracking fixed assets is necessary for the following reasons:

- The District prepares financial information using the Generally Accepted Accounting Principles (GAAP) and Government regulations require us to track asset's cost, depreciation, and disposal of the asset.
- The District also utilize asset records for insurance purposes. In the event of a loss it is
  necessary to have an accurate record of the asset to ensure adequate insurance coverage, of
  the item lost.
- The most important reason is accountability. District Assets are purchased using taxpayers' funds. It is important to have a process in place to account for the use of taxpayers' funding.

#### 2. Definitions

For the purpose of these policies and procedures the following definitions apply.

Assets - Refers to both "capital" and "controlled assets".

Capital Assets - Refers to real or tangible property having:

- A value greater than or equal to capitalization threshold of \$2500;
- Not be intended for sale in the ordinary course of operations; and
- Having an estimated useful life of greater than one year from the time of acquisition.

**Controlled Assets -** Refers to items with a cost less than \$1000 or less than \$2500 total cost for multiple items purchased, but which are particularly at risk or vulnerable to loss or theft.

#### 3. Capitalization Threshold

All purchased assets with a cost of \$2500 or greater should be recorded as Fixed Asset and should be capitalized.

Total cost would be the basis for purchase of multiple items; not per unit cost.

For example:

**\$2500 or greater** - purchase of 10 pcs of printers with a unit cost of \$250 each; total cost is \$2500. These printers should be recorded as Fixed Assets and capitalized since total amount is \$2500. These are treated as Capital Assets.

**Lesser than \$2500** – purchase of 5 pcs of printers with a unit cost of \$250 each; total cost is \$ 1250. These printers should be expensed as Small Tools and Minor Equipment. These are treated as Controlled Assets.

#### 4. Classification and Definition of Assets

#### a. Land

Land includes the investment in real estate other than:

- Buildings and improvements; and
- Land acquired for street and road purposes.

Land - including any acreage, parcel, or plot associated with infrastructure – should be reported at cost, estimated cost, or estimated fair value at the date of acquisition. Land is not depreciated because it has an indefinite life.

#### b. Buildings and Improvements

Building and Improvements are physical property of a permanent (non-moveable) nature. Fixtures are defined as permanent attachments to buildings that are not intended to be removed and that function as part of the building, such as boilers, lighting fixtures, or plumbing.

POLICY NUMBER:	2112

**BOARD** 

SECTION:

	EFFECTIVE DATE
CAPITAL EXPENSE	MM/DD/YYY

#### c. Equipment

Equipment includes movable personal property of a relatively permanent nature and of significant value, such as furniture, machines, tools and vehicles.

#### d. Intangible Assets

Intangible assets are assets that lack physical substance, are nonfinancial in nature (not in a monetary form), and have a useful life extending beyond a single reporting period. Examples include easements, water rights, computer software, copyrights, patents, intellectual property, goodwill, privileges and other intangible property necessary or valuable in the conduct of operations.

#### e. Construction in Progress

These are the recorded expenditures for general capital assets being constructed but not yet completed. These remains in this account and adjusted with additional expenditures until the project is completed. Upon completion, the proper asset is charged with the total of the completed construction and crediting Construction in Progress account.

#### 5. Estimated Life

The useful life of an asset is the normal operating life in terms of utility to the owner. Estimates of useful life consider factors such as physical wear and tear and technological changes that bear on the economic usefulness of the asset.

District uses the following chart of asset classification with respective useful life based on Internal Revenue Service guideline 1.35.6.10:

Land - 0 years Building and Improvements - 40 years Fixtures - 10 years

Equipment:

Laptop and Desktop - 3 years
Furnitures - 8 years
Vehicles - 5 years
Intangible (Software) - 3 years

#### 6. Capital Expense Request

- Department manager fills up a Capital Expense Purchase Request Form (Attachment A) when needed. The purpose, description, type and justification of the purchase should be clearly stated.
- The following should be identified:

#### Asset classification

- Capital Assets when cost is \$2500 or more and recorded as Assets; or
- Controlled Assets when cost is lower than \$2500 and recorded as Expense.

#### **Funding**

- Asset Replacement Fund funds set aside for capital asset purchases; or
- Financing either a loan or a lease.
- Three (3) quotes is required for review of Finance Committee over \$25,000 value or contract greater than three (3) years;
- and to be approved by Board of Directors.
- Once resolution is approved, CEO will then approve the request form and proceed with the purchase.

	EFFECTIVE DATE
CAPITAL EXPENSE	MM/DD/YYY

All Capital Expense Request will be filed accordingly in this manner:

- Approved Board Resolution
- Capital Expense Request Form with approvals from Finance, Board and CEO
- Three (3) Quotes

#### 7. Recording

A copy of the completed request form will be forwarded to Accounting to record the purchase appropriately.

- All capital asset purchases should be recorded on usual accounting manner; debiting Asset and crediting Liability or Cash.
- Only when funding is coming out of the Asset Replacement Fund; then a separate entry should be made to segregate the approved request; crediting Approved Capital Expense account and debiting Asset Replacement Fund.



#### **Karin Hennings**

From: Yumi Edwards

**Sent:** Wednesday, April 25, 2018 10:11 AM

**To:** Karin Hennings **Subject:** FW: capital expenses

Hi Karin, this is the last "official" policy on capital expenses.

From: Lee Cross

Sent: Monday, May 11, 2015 2:37 PM

To: Yumi Edwards < Yumi. Edwards@dphealth.org>

**Subject:** RE: capital expenses

Yumi----I am confirming that the new minimum capitalization policy is \$2,500 effective immediately so the cost of my new tablet computer should be expensed unless the total purchase exceeds \$2,500.

Our policy needs a little more definition on a "group" or "project" purchase when buying multiple items in one purchase that totals over \$2,500---then it should be capitalized. For example, if the purchase is 30 chairs with a \$100.00 cost each, you would capture the total cost with installation, training, and freight all picked up as a "group or project asset". Make a copy of this email as the new capitalization policy. This does not need Board approval.

From: Yumi Edwards

Sent: Monday, May 11, 2015 2:28 PM

To: Lee Cross

Subject: FW: capital expenses

Hi Lee, as discussed effective April 2015 we will adopt \$2500. as the minimum cost for an item to be depreciated.

Thanks, yumi

From: Yumi Edwards

Sent: Wednesday, May 6, 2015 9:31 AM

To: Lee Cross

**Subject:** FW: capital expenses

Hi Lee, here is our auditor's recommendation on the amount to be capitalized.

**From:** Jerrel Tucker [<u>mailto:jerrel.tucker@comcast.net</u>]

**Sent:** Thursday, April 30, 2015 7:09 AM

To: Yumi Edwards

Subject: Re: capital expenses

Yumi.

Most of our smaller districts are using \$2,500 to \$5,000. Also you may want to develop a "project" policy. This where you complete a project that has a number of items

purchased, but some are individually under your capitalization limit. Many of our clients will look at the project as one item and capitalize all associated costs.

Key is to set your limit and be consistent in its application. Hope this helps.

Regards,

Jerrel Tucker CPA 1111 E Herndon Ave, Ste 211 Fresno, CA 93720 Office (559)431-7708 ext 3 Fax (559)431-7685

This message and any attached documents contain information from a CPA firm that may be confidential and therefore privileged. If you are not the intended recipient you may not read, copy, distribute or use this information. If you have received this transmission in error please notify the sender immediately by reply e-mail and then delete this message. Thank you.

From: "Yumi Edwards" < Yumi. Edwards@dphealth.org>

To: "Jerrel Tucker" < <a href="mailto:jerrel.tucker@comcast.net">jerrel.tucker@comcast.net</a> Sent: Wednesday, April 29, 2015 9:47:23 AM

Subject: capital expenses

Hi Jerrel,

Currently the District capitalizes equipment costs above \$500., we would like to increase this amount and are asking what you would advise or recommend?

Thanks, Yumi

PS- did you receive the engagement letter yesterday?

SECTION:	PERSONNEL
POLICY NUMBER:	3565

ERGONOMICS	EFFECTIVE DATE
	TBD

**Policy Scope**: All Employees, Volunteers, and Contractors working at DPHCD.

#### **Purpose**

As a subset of Workplace Safety, to establish an Ergonomics policy and program that guides Del Puerto Health Care District in prevention measures to avoid work-related musculoskeletal disorder (WMSD) injuries. When WMSD injuries result from a repeated task, process, or operation actions performed over time by an employee they are referred to as a Repetitive Motion Injury (RMI).

RMI occur in healthcare settings from repeated tasks that cause wear and tear over time on the soft tissues of the body. Use of ergonomic principles can help to identify risk factors for injury and design safer work tasks, tools, technology and environments which can eliminate or minimize RMI.

This policy is based on current evidence-based practice and requirements of the California Ergonomics Standard, California Code Regulations (CCR) Title 8, § 55110 – Repetitive Motion Injuries (RMI).

#### **Policy Statement**

Del Puerto Health Care District places a high value on the safety of its employees and patients. Del Puerto Health Care District is committed to supporting employee health, safety, and wellness by providing ergonomic education as well as worksite and job evaluations. Likewise, employees are expected to commit to their own responsibility for health and safety of self, co-workers, and patients, by adhering to the outlined policy and procedures, and complying with any ergonomic recommendations given during evaluation and education.

Work-related Musculoskeletal Disorders (WMSD) are major cause of injury for many healthcare workers. All vocations in the healthcare industry have potential to be exposed to Work-related Musculoskeletal Disorders (WMSD). Force, duration, repetition, posture, and vibration are all risk factors that can contribute to WMSDs. All work-related injuries must be reported by employees and documented by Human Resources. In addition, injury trends and risk factors will be identified and controlled, as is reasonably practicable, and employees will be trained and monitored for effective use of prevention measures.

#### **Definitions:**

**Ergonomics** - The scientific discipline concerned with the understanding of interactions among humans and other elements of a system (people, tools, technology, tasks, and environment) and the profession that applies theory, principles, data, and other methods designed to optimize human well-being and overall system performance.<sup>3</sup>

**Injury trends** – Injuries occurring to more than one employee, by the same cause, while performing a job process, or operation of identical or similar work activity.

**Repetitive Motion Injuries (RMI):** Musculoskeletal injuries that occur over time and cause wear and tear on the muscles, tendons, ligaments, and nerves and are objectively identified and diagnosed by a licensed physician or medical provider licensed to diagnose musculoskeletal

SECTION:	PERSONNEL	
POLICY NUMBER:	3565	

	EFFECTIVE DATE
ERGONOMICS	TBD

disorders. Other names for RMI include repetitive strain injuries, repetitive stress injuries, cumulative trauma disorders, overuse disorder / injury.

**Work-related Musculoskeletal Disorders (WMSD):** Injuries sustained while performing work that affect the muscles, tendons, ligaments, nerves, joints, blood vessels, spinal discs and other soft tissues of the body. WMSDs can be repetitive or from a single event.

#### **Procedures**

#### 1. Responsibilities

- a. Senior Leadership / Directors:
  - i. Ensures that processes and funding are in place to 1) perform ergonomic assessments and 2) manage the risk factors associated with WMSDs, 3) fund the adaptation or redesign of the worksite / work task, and 4) provide ergonomic education to all employees.
  - ii. Oversees responsibility for assigning a person(s) responsible for ergonomics program oversight.
  - iii. Communicates in a format understandable by all employees about safety and health topics related to WMSDs and ergonomic interventions.
- b. Ergonomics Program Administrator (ie., the Human Resources Manager):
  - i. Develops, manages and evaluates, at least annually, the ergonomics program.
  - ii. Performs or arranges for performance of preventive and workers compensation ergonomic assessments of employees and gives a written report and action plan to the supervisor/ manager and employee.
  - iii. Ensures all new employees receive ergonomics education on risk factors specific to their job.
  - iv. Provides employees continual access to ongoing education on ergonomics by several means: annual classes, intranet resources, local departmental and system resources (handouts, ergonomics champions) or in-servicing where WMSD injury trending is occurring.
  - v. Establish a list of approved ergonomic equipment that can be assigned.
  - vi. Provide or arrange for ergonomic input into any new construction or remodeling projects.
  - vii. Analyze the injury data pertaining to WMSD injuries, review and / or participate in injury investigations.
  - viii. Communicate and collaborate with leadership on implementation of risk factor remediation strategies.

#### c. Managers / Supervisors:

- i. Ensures that all new employees receive ergonomics education and resources for understanding how to set up their worksite correctly to prevent WMSDs.
- ii. Respond promptly to schedule an ergonomic assessment upon employee request [To the extent possible].
- iii. Provide time during the ergonomic assessment of an employee that they are free from work duties and can participate.
- iv. Coordinate purchase of ergonomic equipment and arrange for installation, as recommended by the assessment process, in a timely manner.
- v. Ensure that employees comply with ergonomic recommendations made during an assessment.

#### d. Employees:

i. Promptly report all known hazards / risk factors present in your job to your supervisor or manager.

	EFFECTIVE DATE
ERGONOMICS	TBD

ii. Promptly report / document any work related WMSDs / injuries and notify your supervisor or manager.

SECTION:

**POLICY NUMBER:** 

**PERSONNEL** 

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- iii. Attend new employee training for ergonomics.
- iv. Comply with any ergonomic recommendations or equipment use advised during your ergonomic assessment.

#### 2. Requirements / (Procedures):

- a. Ergonomic Assessments:
  - i. Preventive Ergonomic Assessments will be provided when an employee begins their job. The employee must notify their supervisor or manager of the request. The supervisor / manager is responsible for promptly [within 3 business days] arranging / requesting an ergonomic assessment, providing time free of work duties for the employee to attend the assessment and facilitate purchase and installation of the recommended equipment. A written report with recommendations should be given to both the manager and the employee and kept on file as long as the employee works for the District.

For computer workstations, employees should first go through a self-assessment process using provided resources (handouts, checklists, on-line education) to learn how to adjust their equipment or notify the supervisor / manager of equipment needs. If further intervention is required, or employee is still with discomfort, an ergonomic assessment should be ordered.

ii. Workers Compensation Ergonomic Assessments as needed should be performed by a competent assessor outside the organization to prevent conflict of interest. HR is responsible for promptly [within three business days] arranging / requesting the assessment, providing time free of work duties for the employee to attend the assessment and facilitate purchase and installation of the recommended equipment. A written report with recommendations should be given to both the manager and the employee and kept on file for as long as the employee works for the organization.

#### b. Hazard / Risk Factor identification:

- i. Use of a safety hierarchy of controls should be used to remediate risk factors found during a worksite assessment or job assessment.
  - 1. **Eliminate** physically remove the hazard.
  - 2. **Substitution** replace the hazard with a different product or procedure.
  - 3. **Engineering controls** isolate people from the hazard.
  - 4. **Administrative controls** change the way people work; providing and enforcing breaks, job rotation, job enlargement.
  - 5. **Personal Protective Equipment (PPE)** protect the worker from the hazard by use of a PPE.

#### c. Training:

- i. New Employee Training: All new employees will receive ergonomics education specific to their work tasks, tools, technology and environments. Education should contain at a minimum:
  - **a.** Del Puerto Health Care District's Information about program on ergonomics.

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**b.** Information on how to find ergonomic resources including how to request ergonomic assessment of their worksite or work tasks.

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- **c.** How to identify WMSD / RMI risk factors, known exposures with their job that may occur and current means of prevention that are utilized.
- d. Symptoms associated with WMSDs / RMI and consequences of injuries.
- **e.** Importance or reporting symptoms and injuries promptly to their manager / supervisor.
- f. Training can be accomplished by 1) oral presentations, 2) videos
   3) Distribution of written material 4) on-line learning modules 5) hands-on training or any combination of above.
- ii. Refresher training: Resources will be made available for ongoing employee self-help and annual refresher training. Training can be accomplished by 1) oral presentations, 2) videos 3) Distribution of written material 4) on-line learning modules 5) hands-on training or any combination of above. It must cover at a minimum the initial information.

#### d. Record Keeping:

- i. Documentation of new and refresher training should be recorded and kept for a period of 2 years.
- **ii.** Ergonomic assessments should be kept on file for as long as the employee is employed by the District].

#### e. Program Review:

i. A written review of the Ergonomics Program will be done annually by the program administrator / manager. The annual assessment will be shared with senior leadership (and front-line employees). The minimal assessment should include the number of ergonomic assessments performed by type, percentage of employees trained (both new and refresher), and WMSD / RSI injury and first aid analysis. Different departments within the organization should be summarized individually.

#### References:

- California Ergonomics Standard, California Code Regulations (CCR) Title 8, §5110 Repetitive Motion Injuries (RMI).
- CDC (2017). 2016 Survey of Occupational Injury and Illnesses Charts Package. https://www.bls.gov/iif/osch0060.pdf
- 3. What is Ergonomics? (2018). *Definitions and Domains of Ergonomics*. International Ergonomics Association Website. <a href="https://www.iea.cc/whats/index.html">https://www.iea.cc/whats/index.html</a>

### BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT Board Meeting – [MMM DD, YYY]

9.B CSU Sacramento Survey Contract Page 1 of 1

Department: Chief Executive Office CEO Concurrence: Yes

Consent Calendar: No 4/5 Vote Required: No

SUBJECT: CSU Sacramento Survey Contract for Community Health Needs Survey

**STAFF REPORT:** The District Health Needs Assessment presents the contract with CSU

Sacramento, Public Health Survey Research Program to conduct a household survey in the geographic boundaries of the District. This survey is a vital component of the DPHCD strategic planning process. The Survey will be completed in November-December in mailed, online and telephone formats. We plan to place ads in the newspaper to help promote a vigorous community response. The survey is expected to get

results from 300-400 households.

Survey topics include: health insurance, access to doctors, health

education, problems receiving health care, dental health,

tobacco/substance abuse, chronic health conditions, emergency room

use, safety, and demographics

**CONSIDERATIONS:** The Committee, Chair (Anne Stokman), and AD/CEO recommend

adoption of this contract to conduct the Community Health Needs

Assessment Survey.

**DISTRICT PRIORITY:** Meeting the needs of the community we serve; Strategic Planning

FISCAL IMPACT: \$59,661 contract total (\$51,000 from budget, \$8,661 unbudgeted to be

adjusted in December budget update)

**STAFFING IMPACT:** None

**CONTACT PERSON:** Karin Hennings

**ATTACHMENT(S):** Contact

Scope of Work

#### RECOMMENDED BOARD ACTION:

ROLL CALL REQUIRED: YES

RECOMMENDED MOTION: I move the Board of Directors approve the contract with California State

University Sacramento for the Community Heath Needs Survey in the

amount of \$59,661.

# Research Services Agreement between Sacramento State Sponsored Research and and Del Puerto Health Care District

THIS AGREEMENT ("Agreement"), dated and effective as of \_\_\_\_\_\_\_\_, 2020 (the "Effective Date"), is between University Enterprises, Inc., a California nonprofit public benefit corporation doing business as Sacramento State Sponsored Research ("SSSR"), and Del Puerto Health Care District, a California local government agency ("DPHCD").

#### A. RECITALS

- 1. WHEREAS, SSSR administers grants and contracts benefiting California State University, Sacramento ("Sacramento State"), for activities of its faculty, centers and institutes, including the Public Health Survey Research Program ("PHSRP") in the division of Academic Affairs, in accordance with California Education Code section 89900, et seq., and as authorized under Title 5 of the California Code of Regulations section 42500(a)(7); and
- 2. WHEREAS, DPHCD would like SSSR to conduct a community health service needs assessment, with Dr. Julia Tomassilli, director of PHSRP, as principal investigator ("Principal Investigator"), as is more particularly described in the attached Attachment A (Scope of Work); and
- 3. WHEREAS, SSSR is willing to perform the work described above and contract with DPHCD under the terms and conditions set forth herein;

NOW, THEREFORE, in consideration of the promises and mutual covenants contained herein, DPHCD and SSSR agree as follows:

#### B. SCOPE OF WORK

SSSR agrees to use all reasonable efforts to perform for DPHCD the research activities described in Attachment A (hereinafter the "Scope of Work" or "the project"). The activities will be under the direction and supervision of Dr. Julia Tomassilli ("Principal Investigator"). If Principal Investigator is for any reason unable to continue the work under the Scope of Work, the parties may select a mutually acceptable substitute or terminate this Agreement with no penalty to either party.

#### C. TERM

This Agreement shall become effective upon being fully signed by both parties to this Agreement and shall be effective until March 31, 2021, unless extended pursuant to mutual agreement in writing between the parties. Project costs incurred before the effective date but that would have been allowed had they occurred after the Agreement was fully executed shall be allowed.

#### D. COMPENSATION AND INVOICING

DPHCD agrees to reimburse SSSR for the direct and indirect costs of the services performed under this Agreement in a total amount not to exceed \$59,661 (Fifty-nine Thousand Six Hundred Sixty-one Dollars), payable within thirty (30) days of receipt of SSSR's monthly invoices. Indirect costs shall be calculated in accordance with the budgeted indirect costs in Attachment B.

Invoices should be sent via email to Accounts Payable at the following address: admin@dphealth.org

DPHCD further agrees to include "PI Tomassilli" in the memo line of its payment(s).

#### E. REPORTING

- 1. SSSR will provide reports on the progress of the research as outlined or required in the Scope of Work.
- 2. DPHCD agrees that SSSR may include the following language on written reports submitted in performance of this project:

This report was prepared by the Public Health Survey Research Program at California State University, Sacramento, and submitted to Del Puerto Health Care District on \_\_\_\_\_[date].

3. DPHCD further agrees (a) not to modify, alter, revise or otherwise change any report delivered by SSSR in performance of the project, (b) not to misrepresent SSSR's findings and conclusions in discussing the study's results with third parties or the public, and (c) that any reports or potions thereof delivered to DPHCD under this Agreement that DPHCD copies and/or distributes to third parties or to the public shall include the language identified in E.2. above or other language that credits the PHSRP as the study's author. This provision is not intended to restrict DPHCD from discussing the project's results with third parties or the public, but rather to ensure both the integrity of the study's findings and that the PHSRP receives credit as the author.

#### F. CONFIDENTIALITY AND PUBLICATION

- 1. SSSR and Principal Investigator agree to keep confidential any business information, technical data, formulas, specifications or other proprietary information of DPHCD supplied by DPHCD in writing to Principal Investigator, so long as the writing is marked "CONFIDENTIAL" and delivered to Principal Investigator during the course of the activities described in the Scope of Work ("Confidential Information"). Specifically, oral disclosures are not covered by this section F unless and until they are reduced to writing, marked "CONFIDENTIAL," and delivered to Principal Investigator.
- 2. The obligations of this section F shall not apply to information that is: (a) in the public domain as of the effective date or comes into the public domain during the term of the Agreement through no fault of SSSR or Principal Investigator; (b) learned by SSSR or Principal Investigator through a third party entitled to disclose it; (c) developed by SSSR or Principal Investigator independently of information obtained from DPHCD as shown by competent written records; (d) already known to SSSR or Principal Investigator before DPHCD's disclosure, as shown by competent written records; or (e) required to be disclosed by law, or to comply with government regulations, subpoenas or court orders, provided DPHCD receives adequate notice of such demand.
- 3. DPHCD agrees that Principal Investigator has the right to refuse acceptance of DPHCD's Confidential Information.
  - 4. DPHCD agrees that, pursuant to SSSR's mission and policy:
- a. SSSR may publish and/or present results of the Scope of Work or new scientific information regarding the research services performed hereunder; however, SSSR affirmatively agrees not to include DPHCD's Confidential Information in published material.
- b. SSSR, including students and faculty of Sacramento State, may use data sets collected during the performance of this agreement for educational and research purposes after the conclusion of project.
- 5. The parties' obligations as described in this section F survive the Agreement's term but expire three (3) years from the final date of DPHCD's payment, to coincide with SSSR's record retention period.
- 6. Nothing in this Agreement shall be construed to prohibit Principal Investigator from using and publishing her own work and/or from presenting that work in conferences.

#### G. GENERAL PROVISIONS

- 1. <u>Indemnification</u>. To the full extent required or permitted by law, each party hereto ("Indemnitor") agrees to be responsible and assume liability for and indemnify, defend, and hold the other party ("Indemnitee") harmless for Indemnitor's own wrongful or negligent acts or omissions, or those of Indemnitor's officers, agents or employees, arising out of the performance of this Agreement.
- 2. <u>Compliance with Laws</u>. Each party agrees to comply with all applicable federal, state and local laws, codes, regulations, rules and orders.
- 3. <u>Confidentiality of Personally Identifiable Information</u>. Except as otherwise provided by law, information or data that personally identifies an individual or individuals shall be protected in accordance with California Civil Code sections 1798, et seq., and other relevant state or federal statutes and regulations. The parties shall comply with California Civil Code sections 1798, et seq., and other relevant state or federal statutes and regulations in safeguarding in perpetuity all such information or data that comes into their possession under this agreement and shall not release or publish any such information or data except as permitted by law.
- 4. <u>McKee Transparency Act</u>. Notwithstanding any other provision in this Agreement, DPHCD understands and acknowledges that SSSR is subject to the McKee Transparency Act, Education Code sections 89913-89919.
- 5. <u>Assignment</u>. Neither party shall assign nor transfer any interest in this Agreement, nor assign any claims for money due or to become due during this Agreement, without the prior written approval of the other party.
- 6. <u>Termination</u>. Either party may terminate this Agreement for convenience upon thirty (30) days' prior written notice to the other. All reasonable costs and non-cancelable obligations incurred by SSSR at the time of said termination shall be reimbursed by DPHCD, not to exceed the total amount specified above. At the request of DPHCD, all unused DPHCD-supplied tangible materials at the time of termination shall either be destroyed by SSSR or returned to DPHCD.
- 7. <u>Notices</u>. All notices or communications given hereunder shall be in writing and shall be personally delivered or mailed, by prepaid, certified mail or overnight courier, or transmitted by facsimile or electronic mail transmission (including PDF), to the party to whom such notice or communication is directed, to the mailing address or regularly-monitored electronic mail address of such party as follows:

TO DPHCD: Karin Freese Hennings

Administrative Director/CEO Del Puerto Health Care District

PO Box 187

Patterson, CA 95363 Telephone 209-894-8201 Facsimile 209-892-3755

Email: Karin.Hennings@dphealth.org

TO SSSR: Monica F. Kauppinen, Director

Sponsored Programs Administration Sacramento State Sponsored Research 6000 J Street, Bookstore Bldg, Suite 3400

Sacramento, CA 95819-6111 Telephone: 916-278-7565 Facsimile: 916-278-4886 Email: mkauppi@csus.edu

Any such notice or communication shall be deemed to have been given on (i) the day such notice or communication is personally delivered, (ii) three days after such notice or communication is mailed by prepaid certified or registered mail,

- (iii) one working day after such notice or communication is sent by overnight courier, or (iv) the day such notice or communication is faxed or sent electronically, provided that the sender has received a confirmation of such fax or electronic transmission.
- 8. <u>Governing Law.</u> This Agreement will be governed by and be construed in accordance with the laws of the State of California. Any claim, action or suit between the parties that arises out of or relates to performance of this Agreement will be brought and conducted solely and exclusively within the Superior Court of California, County of Sacramento.
- 9. <u>Changes and Amendments</u>. This Agreement, together with its attachments, constitutes the entire agreement between the parties with respect to the Scope of Work, and no amendments shall be effective unless made in writing and signed by authorized representatives of both parties. In the event of a conflict between the terms of this Agreement and of any attachment, the terms of this Agreement control.
- 10. Counterparts; electronic signatures. This Agreement may be executed in counterparts, each of which shall be deemed an original and all of which shall constitute one and the same instrument, and shall become effective when counterparts have been signed by each party and delivered to the other. Further, the parties agree that this Agreement may be electronically signed or transmitted by facsimile or electronic mail in portable document format (.pdf) and that such electronic signatures shall be deemed the same as hand-written signatures for the purposes of validity, enforceability and admissibility.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed as of the date set forth herein by their duly authorized representatives.

UNIVERSITY ENTERPRISES, INC., dba	DEL PUERTO HEALTH CARE DISTRICT
SACRAMENTO STATE SPONSORED RESEARCH	
By:	By:
Monica F. Kauppinen, Director	Karin Freese Hennings
Sponsored Programs Administration	Administrative Director/CEO

# Attachment A to Research Services Agreement between Sacramento State Sponsored Research and Del Puerto Health Care District

Project Title: Del Puerto Community Health Service Needs Assessment

Sacramento State PI: Julia Tomassilli

Project Period: Upon contract execution through April 30, 2021

#### **Scope of Work**

The Public Health Survey Research Program ("PHSRP") at California State University Sacramento will conduct a Community Health Service Needs Assessment for the Del Puerto Health Care District ("DPHCD") to assist it to meet its goals to understand the health and health care needs of residents in the DPHCD and to assess the prevalence of their health conditions and health care accessibility. The Needs Assessment will rely on data PHSRP will collect via survey as described below.

Using Address Based Sampling (ABS), PHSRP will sample approximately 9,000 residential mailing addresses in the 95363, 95313, 95385, and 95387 zip codes, mailing a letter and survey (in English and Spanish) to each household. The letter will include a link to an online version of the survey. Using CATI (Computer Assisted Telephone Interview; in English and Spanish), phone interviewers will also attempt to complete the survey for households that have not already done so by phone or mail and for which telephone numbers are available. This process is expected to result in approximately 300 to 400 completed surveys (one survey per household/address).

The Needs Assessment project will involve, at a minimum, the following activities:

- **Development:** Collaborate with DPHCD to develop and design the Needs Assessment methodology and survey (including introductory letter) to meet DPHCD's data needs while balancing participant burden and maximizing response rate.
- Sampling and Recruitment: Purchase sample of residential addresses as described above. Print and mail recruitment letters to all households sampled. Follow-up with non-responding households via phone.
- **Data Collection:** Program online and CATI versions of the survey to match the paper version. Track completed surveys in every version. Conduct data entry from paper forms to electronic database. Keep sample and survey data confidential and secure.
- **Project Management and Tracking:** Complete and submit regular reports on Needs Assessment progress to DPHCD. Meet with DPHCD staff as needed. Obtain University Institutional Review Board (IRB) approval/waiver.
- **Data Submission:** Data deliverables will be a clean survey dataset, a comprehensive data dictionary or codebook, and a methodology and initial analyses report.
- **Personnel Management:** Hire/assign, train, and oversee a project coordinator, health interviewers, and data enterers as needed to complete study goals.

#### **Project Timeline**

Activities	Description	PHSRP Responsible Party	Timeline	
Kickoff summary/review	Participate in an initial meeting with DPHCD to discuss the Scope of Work activities and timeline. Detailed review of all protocols.	PHSRP Director	Within a week of contract execution	
Correspondence	Respond to questions by DPHCD staff by email or phone. Be available for weekly meetings by phone.	PHSRP Director, Project Coordinator	Duration of the contract	
Finalize Needs Assessment	Finalize the methodology, survey content and design, and letter	PHSRP Director, Project Coordinator	November 30, 2020	
Recruitment	Print and mail recruitment letters and surveys (in English and Spanish) to sampled households.	etters and surveys (in English and Spanish) to sampled		
Collect data	Collect completed paper and online surveys, and conduct phone calls and surveys for non-responding households.  Project Coordinator, Interviewers		December 2020 - February 2021	
Submit weekly progress reports	Report progress to DPHCD on recruitment, completion of surveys, any problems.	Project Coordinator	December 2020 - February 2021	
Conduct data entry and quality assurance/quality control (QA/QC)	Enter paper data into electronic databases and conduct QA/QC on data entry.  Project Coordinator, Data Enterers		December 2020 - February 2021	
Final report	Submit final report including information regarding: methodology, recruitment, completion	ding: Project Coordinator		
Databases	Submit final database and codebook to DPHCD PHSRP Director, Project Coordinator		April 30, 2021	
Confirm destruction of all paper and electronic documents with identifiable information	Destroy paper and electronic documents with identifiable information	PHSRP Director	April 30, 2021	

# Attachment B to Research Services Agreement between Sacramento State Sponsored Research and Del Puerto Health Care District

Job Title	# of Months/ hours	Annual Salary	Total Salary	Fringe Benefits	Total	% FTE	Total
A. Personnel							
Research Program Director	5	\$102,816.00	\$3,570.00	\$25,404.12	\$28,974.12	15%	\$4,346.12
Systems Support Coordinator	5	\$71,316.00	\$2,476.25	\$17,621.00	\$20,097.25	10%	\$2,009.72
Administrative Support Coordinator	5	\$36,324.00	\$1,261.25	\$8,975.06	\$10,236.31	10%	\$1,023.63
Operations Coordinator	5	\$72,180.00	\$2,506.25	\$17,834.48	\$20,340.73	20%	\$4,068.15
Project Coordinator	5	\$40,000.00	\$1,388.89	\$9,883.33	\$11,272.22	75%	\$8,454.17
Public Health Survey Interviewers I	1	\$33,515.00	\$232.74	\$1,656.20	\$1,888.94	250%	\$4,722.36
Public Health Survey Interviewers II	1	\$35,720.00	\$248.06	\$1,765.16	\$2,013.22	25%	\$503.30
Data Enterers	1	\$35,360.00	\$245.56	\$1,747.37	\$1,992.93	40%	\$797.17
Total Personnel Expenses				\$25,924.62			
B. Operating Expenses							
1. Telephone	Shared cost of phone lines and vm, local and long distance charges				\$2,000.00		
2. Office Supplies	5 months @ \$100/month			\$500.00			
3. Minor Office Equipment, Repair and Maintenance  Shared costs to cover - Software subscriptions; costs for other phone/communication equipment, IT service backup, security, networking support, and repair work. 5 months at 15%				\$1,875.00			
4. Space	7,790 sf @	\$2.1/sqft/mo	5 months, 1	5%			\$12,442.50
Total Operating Expenses			penses	\$16,817.50			
C. Other Costs							
1. Mail and Phone sampling Purchase of mail and phone sample as per methodology				\$2,000.00			
2. Printing and mailing Intro letter and paper survey to all addresses in area in English and Spanish			\$10,500.00				
Total Other Costs				\$12,500.00			
E. Total Direct Costs				\$55,242.12			
F. Indirect Costs @ 8% of Direct Costs				\$4,419.37			
G. TOTAL PROJECT COST							\$59,661.49

#### BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT

#### **Board Meeting - October 26, 2020**

9C Adopt Policy #3142 Whistleblower9C Adopt Policy #3142 Whistleblower Page 1 of 1

Department: Chief Executive Office CEO Concurrence: Yes

Consent Calendar: No 4/5 Vote Required: No

**SUBJECT:** Adopt Policy #3142 Whistleblower

**STAFF REPORT:** A whistleblower policy encourages staff and volunteers to come forward

with credible information on illegal practices or violations of adopted policies of the organization, specifies that the organization will protect the individual from retaliation, and identifies those staff or board members or outside parties to whom such information can be reported.

The District does not have a formal Whistleblower policy that clarifies the policy and procedure for reporting wrong-doing and what to do if retaliation occurs. This proposal states the policy and procedures.

**CONSIDERATIONS:** It is a best practice to have a whistleblower policy in place.

**DISTRICT PRIORITY:** Transparency

FISCAL IMPACT: None

**STAFFING IMPACT:** None

**CONTACT PERSON:** Karin Hennings

**ATTACHMENT(S):** 3142 Draft Whistleblower Policy

#### RECOMMENDED BOARD ACTION:

ROLL CALL REQUIRED: NO

RECOMMENDED MOTION: I move the Board of Directors adopt Policy #3142 Whistleblower.

POLICY N	IUMBER:	3142
	EFFECTIVE DATE	

**PERSONNEL** 

SECTION:

	EFFECTIVE DATE
WHISTLEBLOWER POLICY	TBD

#### Purpose:

The purpose of this policy is to: (1) encourage staff, Board members and volunteers to report to the DPHCD any credible information in their possession regarding illegal or improper activities and/or retaliation as defined herein, including violations of the DPHCD's policies, promptly to those members of the DPHCD specified in this policy; and (2) prohibit the DPHCD's Board of Directors, Chief Executive Officer (Administrative Director/CEO) and supervising employees from retaliating against any employee who reports illegal or improper activities to the DPHCD or law enforcement agencies as provided herein; and (3) specify a procedure by which information regarding illegal or improper activities of or retaliation by members of the Board of Directors or employees can be reported to the DPHCD and investigated; and (4) provide a hearing process to any employee or Board member who has filed a written complaint with the DPHCD alleging actual or attempted acts of retaliation in response to having made a protected disclosure to the DPHCD or law enforcement protected by this policy.

#### Policy:

It is the policy of DPHCD that its employees should be free to report violations of law, abuse of authority, fraud, economic waste, or gross misconduct, incompetence or inefficiency without fear of retaliation or retribution. This policy is based on a finding that the DPHCD best serves itself and its membership when it can be candid and honest without reservation in conducting the business of the DPHCD.

The DPHCD prohibits retaliation by employees, Board members, or volunteers against any staff member, Board member, or volunteer for making good faith complaints, reports or inquiries regarding illegal or improper activities under this policy to the DPHCD or any law enforcement agency, or for participating in a review or investigation of any such complaints under this policy. This protection extends to those whose allegations are made in good faith but prove to be mistaken. The DPHCD reserves the right to discipline persons who make bad faith, knowingly false, or vexatious complaints or reports regarding alleged illegal or improper activities, or who otherwise abuse this policy.

#### **Definitions:**

- A. "Illegal Order" means a directive to violate or assist in violating a federal, state or local law, rule or regulation, or an order to an employee to work or cause others to work in conditions outside of their scope of duty that could unreasonably threaten the health and safety of employees or the public.
- B. "Illegal or Improper Activity" means an activity by a member of the Board of Directors, an employee, or a volunteer of the DPHCD that is undertaken in the performance of that person's duties that is either: (1) a violation of any state or federal law or regulation including, but not limited to, corruption, malfeasance, bribery, theft of property, fraud, coercion, conversion, abuse of property or willful omission to perform a duty; or (2) violates DPHCD policies, is economically wasteful, or involves gross misconduct, incompetency, or inefficiency. Illegal or Improper Activity includes alleged financial, accounting or audit improprieties and alleged ethical violations by employees or Board members
- C. "Protected Disclosure" means a good faith communication from an employee or Board member of the DPHCD to the DPHCD or law enforcement agencies that discloses information that may be evidence of Illegal or Improper Activity.

WHISTLEBLOWER POLICY	EFFECTIVE DATE
	TBD

SECTION:

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**PERSONNEL** 

3142

D. "Retaliation" means an employee or director using or attempting to use his or her official authority or influence over an employee to intimidate, threaten, or coerce any employee in order to interfere with the rights of employees to freely report Illegal or Improper Activity to the DPHCD or a law enforcement agency. Retaliation includes, but is not limited to, promising to confer, or conferring any benefit; affecting or threatening to affect any reprisal; or taking or directing others to take, recommend, or approve any personnel action against an employee making a Protected Disclosure including, but not limited to, demotion, transfer, assignment, performance evaluation, suspension, or other disciplinary action including termination

#### Procedure:

Encouragement of reporting of illegal or improper activity: DPHCD encourages employees and members of the Board to file complaints or reports about Illegal Orders or Illegal or Improper Activity or alleged Retaliation with the Administrative Director/CEO. All such complaints shall include specific facts supporting any allegation of Illegal or Improper Activity, or Retaliation, as defined by this policy. Complaints of Illegal or Improper Activity or Retaliation may be made anonymously, but such anonymity may impede the ability of the District to conduct a thorough investigation. If the Administrative Director/CEO is alleged to be involved in the complaint or report, then such complaint shall be filed with the President of the Board of Directors. If the President of the Board is also alleged to be involved in the complaint, then the complaint or report shall be filed with DPHCD's General Counsel.

Other allegations with respect to which the DPHCD has existing complaint, grievance, or appeal procedures as specified in the District's policies should be addressed pursuant to those procedures, such as issues of alleged discrimination or harassment which are processed by the DPHCD's human resources department. This policy is not intended to provide a procedure for the filing of employee or Board member complaints regarding any employment issues other than whistleblowing activities and protection of employees from Retaliation for making Protected Disclosures.

<u>Investigations of Allegations of Illegal or Improper Activity</u>: The Administrative Director/CEO may request that a person submitting a complaint alleging Illegal or Improper Activity provide his or her name and contact information and provide the names and contact information for any persons who could help substantiate the claim. However, this information is not required in order to submit a complaint.

Upon receiving a complaint from any employee or member of the Board that an employee or Board member has engaged in an Illegal or Improper Activity, the Administrative Director/CEO will investigate the allegations in the complaint. The identity of the person filing the complaint, or of any person providing information in confidence regarding the facts in the complaint shall not be disclosed without the express permission of the person providing the information. However, the Administrative Director/CEO may disclose the facts in the complaint to a law enforcement agency if an allegation of criminal conduct is contained in the complaint filed with the DPHCD.

The Administrative Director/CEO may request the assistance of DPHCD General Counsel and/or any outside consultant for assistance in evaluating an allegation of Illegal or Improper Activity or investigating of Illegal or Improper Activity as authorized by this policy. The Administrative Director/CEO shall investigate the allegations in the complaint and prepare a report of the results of the investigation within sixty (60) days of the date of the complaint.

If, upon completion of the investigation, the Administrative Director/CEO finds that an employee or Board member may have engaged or participated in an Illegal or Improper Activity, the Administrative Director/CEO

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	EFFECTIVE DATE	
WHISTLEBLOWER POLICY	TBD	

shall make such findings in the investigative report and include recommended actions to prevent the continuation or recurrence of the Illegal or Improper Activity. Such recommendations may include taking disciplinary action against those employees found to have violated this policy, which action may be taken by the Administrative Director/CEO. The investigative report may also recommend imposing sanctions, including loss of office, on those Board members found to have violated this policy. In that event the report shall be filed with the Board of Directors which shall comply with the policies of the DPHCD in initiating discipline against a member of the Board of Directors. The DPHCD shall keep confidential all investigation work product including the investigative report.

<u>Complaints of Retaliation and Investigation</u>. An employee or volunteer who believes he or she has been subjected to Retaliation as defined and prohibited by this policy shall file a written complaint with the Administrative Director/CEO which specifies the alleged retaliatory conduct and identifies the individuals allegedly engaged in such conduct.

Upon receipt of the complaint the Administrative Director/CEO shall commence an investigation of the allegations contained in the complaint of Retaliation, which shall include interviews of the complainant and any potential witnesses. The Administrative Director/CEO may utilize the services of DPHCD General Counsel and/or other consultants in conducting such investigation and preparing an investigation report. A written investigation report regarding the alleged Retaliation shall be completed within thirty (30) days of receipt of a complaint of Retaliation.

Based on the investigation, the Administrative Director/CEO shall decide whether Retaliation occurred in violation of this policy and, if so, what steps should be taken to remedy the situation. The Administrative Director/CEO's decision shall be communicated to the complaining employee. In making his or her determination, if it is alleged that improper disciplinary action was taken against the complaining employee in Retaliation for having made a Protected Disclosure, the Administrative Director/CEO shall consider whether the taking or failing to take any personnel action with respect to an employee who has complained of Retaliation is justified on the basis of evidence separate and apart from the fact that the person has made a Protected Disclosure, such as inadequate job performance. If the evidence in the investigation reveals that a Protected Disclosure was a contributing factor in the alleged Retaliation against a former or current employee, the burden of proof shall be on the supervisor or other employee imposing the discipline to demonstrate by clear and convincing evidence that the alleged personnel action would have occurred for legitimate, independent reasons even if the complaining employee had not engaged in Protected Disclosures of Illegal or Improper Activity.

The investigation report of the alleged Retaliation prepared by the Administrative Director/CEO shall include a written decision as to whether this policy has been violated. If the investigation report concludes that this policy has not been violated and the complaining employee disagrees with the determination of the Administrative Director/CEO, the complaining employee may appeal in writing the decision to the Board of Directors. That appeal must be filed within ten (10) business days of receipt of the investigation report and decision of the Administrative Director/CEO.

If an appeal is filed, the Board of Directors shall conduct a hearing of the complaining employee's appeal and hear and receive all evidence submitted by the complaining employee. In hearing the appeal, the Board of Directors may take evidence, and hear testimony from the complaining employee and other witnesses. The Board of Directors shall consider whether an activity protected by this policy was a contributing factor in the alleged Retaliation against the complaining employee and if the alleged retaliatory action could have occurred for legitimate, independent business reasons even if the complaining employee had not made Protected Disclosures. The Board of Directors shall render a final decision in writing to the complaining employee within

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thirty (30) days after completing the hearing which concludes whether Retaliation prohibited by this policy has occurred or not. If the Board of Directors finds that the provisions of this policy have been violated, it shall order that any personnel action taken against the complaining employee be reversed and that a memorandum be placed in the employee's personnel file indicating the results of the decision of the Board of Directors on appeal.

A complaining employee shall be required to exhaust his or her administrative remedies by filing an appeal with the Board of Directors regarding any alleged violation of this policy before being entitled to commence a civil action in the Superior Court.



### BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT

# **Board Meeting – October 26, 2020**

# 9.D – Policy for Employee PTO Donations Page 1 of 1

Department: Chief Executive Office CEO Concurrence: Yes

Consent Calendar: No 4/5 Vote Required: No

**SUBJECT:** Policy for Employee PTO Donations

**STAFF REPORT:** Following discussion at the bargaining table it was agreed that

employees would be able to donate accrued time off to other employees who have catastrophic leave needs. This policy and forms memorialize the policy and procedure for requesting and donating accrued Paid Time

Off (PTO).

**CONSIDERATIONS:** If an employee has a need for additional leave due to a personal or family

catastrophe, other employees may donate some of their PTO to them prevent the employee from suffering from an unpaid leave of absence.

**DISTRICT PRIORITY:** Employee morale

FISCAL IMPACT: None

**STAFFING IMPACT:** Minimal to track and adjust PTO

**CONTACT PERSON:** Karin Hennings

**ATTACHMENT(S):** PTO Donation Policy, Procedure and Forms

# RECOMMENDED BOARD ACTION:

ROLL CALL REQUIRED: NO

RECOMMENDED MOTION: I move the Board of Directors adopt the District Policy 3442 Employee

Paid Time Off Donations.

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HARDSHIP LEAVE AND PAID TIME OFF (PTO) DONATION	MM/DD/YYY		

# <u>Purpose</u>

The intent of a Hardship Leave and Paid Time Off (PTO) Donation Policy is to allow employees to voluntarily assist co-workers who are in critical need of time off due to disasters, non-job related injuries, temporary disabilities or illnesses, or is the primary care giver to an immediate family member with an injury or illness and do not have PTO or ESL available. No employee may solicit donations of PTO from co-workers.

# **Policy**

An employee may donate accrued Paid Time Off to a fellow employee who is under a Hardship Leave. Such employees can receive PTO hours in the form of donations from co-workers. Extended Sick Leave (ESL) balances are not eligible for donation.

Nothing in this policy will be construed to limit or extend the maximum allowable absence under FMLA

Employees need to meet the following criteria:

# **Donating Employee:**

- Voluntarily elects to donate Paid Time Off and does so with the understanding that donated leave will not be returned unless the recipient does not utilize all the leave. Any leave not used will be returned to the donor.
- Donates a minimum of 4 hours and increments of 1 hour thereafter
- Retains a Paid Time Off balance of least 80 hours for ADM/HC or 120 hours for AMB.
- Completes a "Paid Time Off Donation" form.

# Recipient Employee:

- Employee must have completed his/her probationary period.
- Employee must be on an approved hardship leave meaning th recipient employee must show absences are required due to disaster or the serious illness or injury of themselves or a person qualified under Family Medical Leave Act (FMLA) guidelines.
- Employee has provided written verification that the serious health condition exists.
- Employee must have exhausted or is expected to exhaust his or her PTO & EST balances.
- An employee may receive donated leave up to the number of hours the employee is scheduled to work each pay period.
- Employee has agreed to accept the leave under the terms of this policy and completes a "Hardship Leave Request" form.

# **Procedure and Limitations**

HARDSHIP LEAVE AND PAID TIME OFF (PTO) DONATION

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<u>Donating PTO</u>. The donation of Paid Time Off to a coworker on Hardship Leave shall occur on a strictly confidential and voluntary basis and administered on an as needed basis. The Human Resources Department shall ensure that no employees are forced to donate PTO and shall respect all employees' right to privacy.

<u>Hardship Leave Application</u>. To apply for a Hardship Leave, employees must have exhausted, or will soon exhaust, their PTO and ESL and have a documented disaster or medical leave. Employees not meeting the eligibility requirements as described will be notified of the reason for ineligibility by the Human Resources Department and applications will be clearly marked "NOT ELIGIBLE" and placed in the employee's personnel file. The approval of Hardship Leave is at the discretion of the Administrative Director / CEO.

<u>Need Awareness</u>. With the permission of the employee who is in need of leave or a member of the employee's immediate family, information may be released to employees including the basic circumstances leading to this request for donated PTO. Personal or detailed medical information will not be included. Any written notice to DPHCD employees will be approved by Administrative Director / CEO and the employee or their representative prior to release.

<u>Paid Leave Status</u>. Employees using donated leave shall be considered in active pay status and shall accrue leave and be entitled to any benefits to which they would otherwise be entitled. Donated Paid Time Off shall be considered Paid Time Off but shall never be converted into a cash benefit. The employee receiving the Paid Time Off donation is eligible to receive a total lifetime donation of up to a maximum of 480 hours HC/ADM or 720 hours AMB. If the recipient leaves DPHCD due to termination, retirement, disability, etc. any remaining donated Paid Time Off will be returned to the donors on a prorated basis.

<u>Training</u>. The Human Resources department shall provide staff with information on the Paid Time Off donation policy upon hiring.

# Hardship Leave Frequently Asked Questions:

- What is Hardship Leave? Also known as Donated Leave, Hardship Leave is the type of leave used when District employees donate their accrued PTO to another employee who is out on approved medical or disaster leave and qualifies for hardship leave donations.
- 2. How do I qualify for Hardship Leave? You must be a regular employee of the District with an illness, injury, or have experienced a disaster.

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- **3.** How do I apply for Hardship Leave? Submit a Hardship Leave Request Form with documentation of the disaster or medical leave need.
- **4.** Can I qualify for a Hardship Leave for my family member? Yes, if their family member is qualified under the FMLA guidelines.
- **5.** Does the person who gets the donated leave know who donated it? No. The information is confidential.
- **6.** How is the leave transferred? The donation is hour to hour.
- 7. What happens to the donated leave if it is not all used? Only the amount of time projected to be needed is accepted as donated leave.



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# Paid Time Off (PTO) Donation Program Request Form

EMPLOYEE NAME:	DEPT:
Date of Request:	
Requested by:	
Current PTO available:	
Reason for request to receive	ve donated time:
	ch verifies need of donated PTO: s health condition of employee or family member):
soliciting donations of PTO till be released; however, I unde order to clarify why a donati	se information to its employees concerning my request for the sole purpose of me. I acknowledge that no personal information or specific medical condition will erstand that the basic circumstances leading to this request may be provided in on of time is needed. I have been advised that any written notice to DPHCD request will be given to me for approval prior to its release.
Signature:	Dated:
Employee	
	For office use only – Do not write below this line
I confirm that the requesting ceived donated PTO.	employee has a legitimate need and circumstance making them eligible to re-
Signature:	Dated:
Human Resources	
By signature, I approve the tr	ansfer of donated PTO time.
Signature:Admin Director / CEO	Dated:

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# Paid Time Off (PTO) Donation Program Donation Form

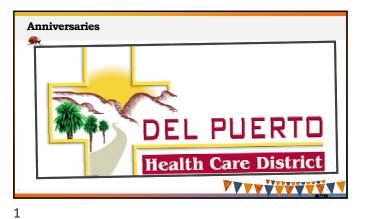
DPHCD has established a PTO Donation Program that allows employees to donate a portion of their accrued PTO time to a PTO Donation Bank that can be accessed by employees who are experiencing a crisis situation, such as a medical emergency of their own or of a family member that results in frequent absences from work. Donations for the giver and receiver are anonymous.

To be eligible to donate PTO time, an employee must be eligible to accrue and use PTO time and must have enough accrued PTO balance from which to donate. The maximum amount of PTO that an employee may donate per request is 15% of her/his accrued PTO balance at the time the donation request is made, not to exceed 40 (ADM/HC) or 60 (AMB) total hours per calendar year.

In all donations both the giver and receiver and amount of PTO are anonymous.

To be completed by donating employee and submitted to Human Resources.				
Employee Name:	Department #:			
I hereby voluntarily authorize up to PTO hours to be deducted from my PTO balance and donated to the PTO donation bank. I understand that this donation is voluntary and irrevocable.				
Employee Signature	Date:			
I would like to specify that my PTO time be donated to the employee specified below. I understand for my nominee to receive donated PTO they must have experienced a crisis such as a medical emergency of their own or of a family member that results in frequent absences from work.				
Recipient's Name:				
Donor - please submit completed form to Human Resources.				
For office use only – Do not write below this line				
Date request received:	PTO balance at time of request:			
15% of current balance:	PTO total transferred to recipient:			
Date of PTO transfer:	Date recipient notified of donation:			
Date donor thanked:				

10/23/2020

















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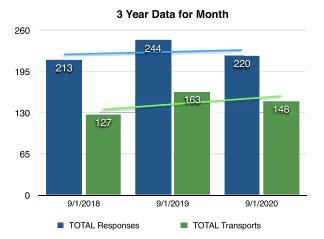


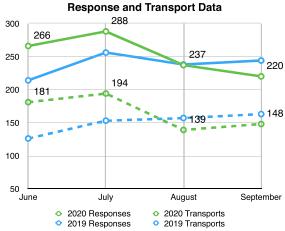
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# Patterson District Ambulance Response Report September 1, 2020 - September 30, 2020 Monthly Response Summary

	P91	P92	P93	P1	ws	AMR	PDA TOTALS	Other TOTALS	GRAND TOTALS
Responses	85	108	27	3	25	1	220	26	246
Transports	63	67	18	0	13	0	148	13	161
Transport %	74.12%	62.04%	66.67%		52.00%	0.00%	67.27%	50.00%	65.45%
Cancelled Response	6	15	3						
Adjusted Transport %	79.75%	72.04%	75.00%						





# **Mutual Aid Responses**

	Westside		AMR	
	Responses	Transports	Responses	Transports
INTO District	25	13	1	0
<b>OUT of District</b>	4	2	23	13

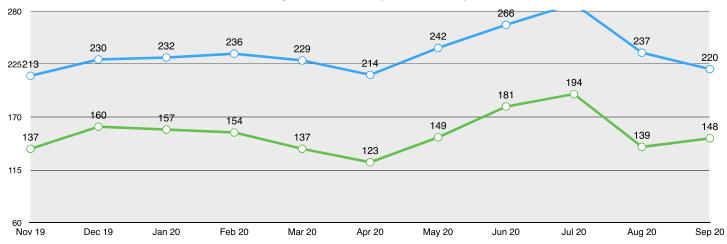
# **PDA In District Response %**

Last Month %	This Month %	NET Change %	
91.15%	89.43%	-1.72%	

# Rolling Compliance Periods - Snapshot on January 1, 2020

Urban		Suburban		Rural	
Code 3	Code 2	Code 3	Code 2	Code 3	Code 2
89.32%	94.93%	100%	100%	97.45%	100%

# Rolling 12 Months - Responses / Transports



# **DEL PUERTO HEALTH CENTER 121 TELEHEALTH Consults**

# September 2020/2021

