

138 S. Brandon St. • Fallbrook CA 92028 • 760-731-9187

BOARD OF DIRECTORS REGULAR BOARD MEETING

WEDNESDAY APRIL 12, 2017

6:00 PM

AT

FPUD FALLBROOK PUBLIC UTILITY DISTRICT 990 EAST MISSION ROAD FALLBROOK, CA 92028

AGENDA FALLBROOK REGIONAL HEALTH DISTRICT REGULAR BOARD MEETING Wednesday, April 12, 2017, 6:00 p.m. Fallbrook Public Utilities District, 990 E. Mission Rd., Fallbrook

A. CALL MEETING TO ORDER – PLEDGE OF ALLEGIANCE

B. ADDITIONS TO AGENDA

Pursuant to the Brown Act, additions to the Agenda as posted are exceptional, and expressly limited to three specific situations, as set forth in Government Code 54954.2(b): (1) an "emergency" as determined by majority vote of the board; (2) a 2/3 vote of the board finding that an item requires immediate action – and the need for this action arose in time after the agenda was posted or (3) the item was continued from an earlier meeting (no more than 5 days earlier), at which time the item was validly posted on the agenda of the earlier meeting.

C. BOARD MEMBER AND PUBLIC COMMENTS – 6:15pm to 7:30pm

Opportunity for board members and citizens to speak on items of interest within subject matter jurisdiction of the District. For the record, please state your name. "Request to speak" cards should be filled out in advance and presented to the Board President or the recording secretary. The Board has a policy limiting any speaker to not more than five minutes

D. PRESENTATIONS

- D1. "23 and 1/2 hours: What is the single best thing we can do for our health?" YouTube video
- D2. Total Health Environment Health and Wellness Center

E. CONSENT ITEMS

- E1. Minutes of February 28, 2017 Special Workshop
- E2. Minutes of March 1, 2017 Finance Committee Meeting
- E3. Minutes of March 8, 2017 Regular Board Meeting
- E4. Minutes of March 23, 2017 Special Board Meeting
- E5. Approval of February 2017 Financial Statements
- E6. Amended Conflict of Interest Code—New District Name
- E7. Commercial Real Estate Brokerage/Land Use Consulting Services—Moosa Agreement

F. REPORTS

- F1. Finance Committee Committee of the Whole, Chair: Director Mroz
- F2. Gov't/Public Relation/Community Relations Committee Directors Salmon and Tinker
- F3. Facilities/Strategic Planning Committee Directors Abbott and Salmon
- F4. Executive Director Bobbi Palmer
- F5. General Counsel Blaise Jackson

G. DISCUSSION/ACTION ITEMS

G1. Second Review – Revised Bylaws for District (name change)

H. ITEMS FOR SUBSEQUENT MEETINGS

- H1. Other Director/Staff discussion items
 - H1a. Item(s) for future board agendas
 - H1b. Announcements of upcoming events:
 - Community Collaborative for Health & Wellness Committee (CCHW) meeting Tuesday, April 17, 2017, 9:00-10:30am, Fallbrook Public Utility District Board Room
 - NCCCHI meeting 1st Wednesday, May 3, 2017, 2:00-3:00pm Fallbrook Family Health Center, 1328 S Mission Rd., Fallbrook
 - Finance Committee of the Whole meeting Wednesday, May 3, 2017, Fallbrook Regional Health District Board Room
 - Woman of Wellness Thursday, May 4, 2017, 6pm Fallbrook Library
 - CSDA Special Districts Legislative Days May 16th & 17th 2017, Sacramento

CONSENT ITEMS

FALLBROOK REGIONAL HEALTH DISTRICT BOARD WORKSHOP

Saturday, February 25, 2017, 8:00 a.m. to 11:30 a.m. Fallbrook Regional Health District, Board Room, 138 S. Brandon Rd., Fallbrook

MINUTES

A. CALL MEETING TO ORDER

President Tinker called the meeting to order at 8:00 a.m. Present: Directors Tinker, Salmon, Mroz and Leach with Director Abbott arriving for the tour. Also present: Legal Counsel Blaise Jackson and Executive Director Bobbi Palmer.

B. DISCUSSION ITEMS

"Prevent the Preventable"

B1. 23 and ½ Hours (YouTube Video)

The above YouTube video was played. Dr. Mike Evans provided a visual lecture on the many health advantages of exercise. He noted that as little as ½ hour per day of exercise provides these advantages. With our new name and Mission, this video can be a part of our focus on health & wellness. Each month we are planning a Wellness Walk to promote the benefits of walking, with the hope of participants establishing their own walking groups.

At this time, Counsel suggested discussing Item B4, prior to the arrival of Director Abbott who would recuse himself during that discussion due to possible conflict of interest.

B4. Property Status

a) Personal Property Update/Centurion

Centurion has completed the sale of the equipment and property that had been in the building when it functioned as a hospital. The building can now be viewed as a facility with another use, or multiple uses.

b) Communication with Other Public Agencies

Letters of notice of surplus property had been sent to the Fallbrook Union Elementary School District, Fallbrook Union High School District, Palomar College and the County of San Diego. To date, the County has expressed possible interest and Palomar College has declined the offer.

Discussion ensued regarding possible uses for the building. Tours of the building continue for those with interest.

c) Status of Updated Appraisal

The District has not yet received the updated appraisal report.

B5. Tour of Building/Group Photo (at 10:00 a.m.)

The workshop adjourned at 9:20 a.m. to tour the building. Following the tour, a photograph of the board and staff was taken.

The workshop reconvened at 10:18 a.m. Director Abbott joined the meeting and Director Leach left the meeting.

B2. Community Engagement Services Update Galvanized Strategy Data Points

Executive Director Bobbi Palmer said Erica Holloway of Galvanized Strategies had presented a report at the last regular meeting of the Board of Directors. A draft version of the 2016-2017 Community Engagement Plan was provided for this workshop, along with other data, and corrections are welcome. Ms. Palmer said she wanted the Board to see the scope of the work Ms. Holloway has accomplished. She discussed including faithbased organizations in our conversations about health & wellness in the future. She said Ms. Holloway will be creating packets of information for our legislators for Legislative Day and has provided press releases throughout the State and health organizations regarding what is happening in our District. In addition, she is creating *fast facts* flyers (some of which are included in today's packet) and "Did You Know?" articles. This information is shared with our Advisory Committee and can be shared with the community as members of the Committee advocate for the District. Director Abbott said since North County Fire Protection District and Fallbrook Regional Health District have a JPA, we can work together to meet health needs in the communities we serve.

B3. Community Health Focus Update

CentraForce - Behavioral Data Points CentraForce provided a Behavioral Health Population Overview which was reviewed and discussed. Behavioral Health services have been identified as a needed service in our District.

B6 Recommendations for Discussion/Action Items

Consideration of a letter to federal legislators recommending replacement before repeal of the Affordable Care Act, following receipt of language to be used as recommended by Legal Counsel.

B7 Communications Only

Director Salmon said as a health district, we are concerned about health coverage for the District residents. He suggested that the District communicate with our legislators that we don't want the Affordable Care Act (ACA) repealed without a replacement plan. He suggested replace, then repeal the ACA. Legal Counsel said he would develop language for the communication to be discussed at a regular meeting.

C. ADJOURNMENT

There being no further business, the meeting was adjourned at 11:46 a.m.

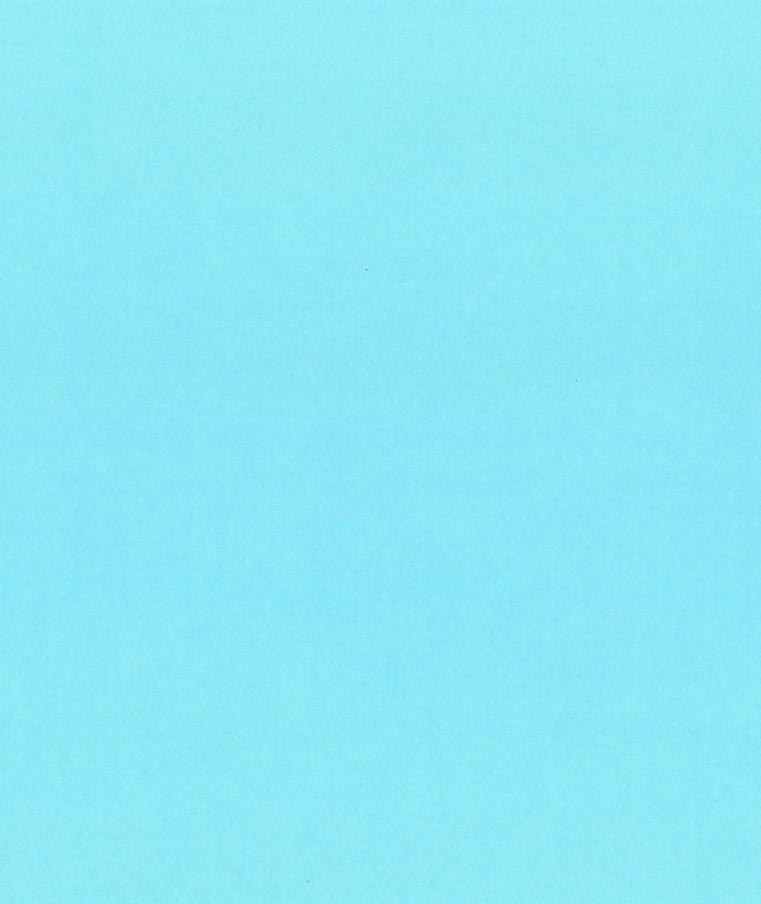
Gordon Tinker, President

Stephen Abbott, Secretary

Minutes approved at the Board of Director's Meeting on: _____

Fallbrook Regional Health District Board Workshop Minutes

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FALLBROOK REGIONAL HEALTH DISTRICT FINANCE COMMITTEE MINUTES

Wednesday, March 1, 2017 at 5:00 P.M. Board Conference Room, 138 S. Brandon Rd., Fallbrook CA 92028

Committee Members Present:	Chair Barbara Mroz, Director William Leach
Absent:	Directors Tinker, Abbott and Salmon
Staff Members:	Executive Director Bobbi Palmer, Accountant Kathy Bogle and
	Bookkeeper Wendy Lyon

1. Call to Order/Roll Call

Chair Barbara Mroz called the meeting to order at 5:00 p.m.

2. Public Comments

There were no public comments.

- 3. Review of Financial Statements for January 2016
 - 1) Balance Sheet Comparison of January to December
 - 2) Income Statement for January 2017/July December 2016
 - 3) Profit & Loss Actual vs Budget January 2017
 - 4) Profit & Loss Budget Overview July 2016 June 2017

Financial statements through January 2017 were reviewed and discussed. One large variance of cash in the bank reflected \$230,790.02 due to fluctuation of the property tax revenue. This appears to increase the bottom line when in fact it reflects the consistent ebb and flow of our property tax revenues. High increases appear as usual in December and trickle into January. At present the total property tax revenue is \$1,022,294.83 and the balance sheet for one month reflects the District under budget and in good standing. Areas showing variances were consultant fees, this was due to the decision to contract with a community engagement services firm after the budget had been approved.

5) LAIF Report

This account had a deposit of \$2,542.45 in February with a total balance of \$1,445,721.62.

6) CalTrust

Balance of \$4,225,909.84 ending January 31, 2017. As mentioned previously, more information regarding the Cal Trust fund will be provided at the next regular meeting of the Board of Directors.

7) Property Tax Revenue – fiscal year to date

This item previously discussed under the financial statements.

Congratulations to the members of the Board who attended the recent Special Leadership District Academy on Governance and Finance presented by SDLA in La Jolla last month. Their participation and completion of the seminar keeps our Board and the District in good standing.

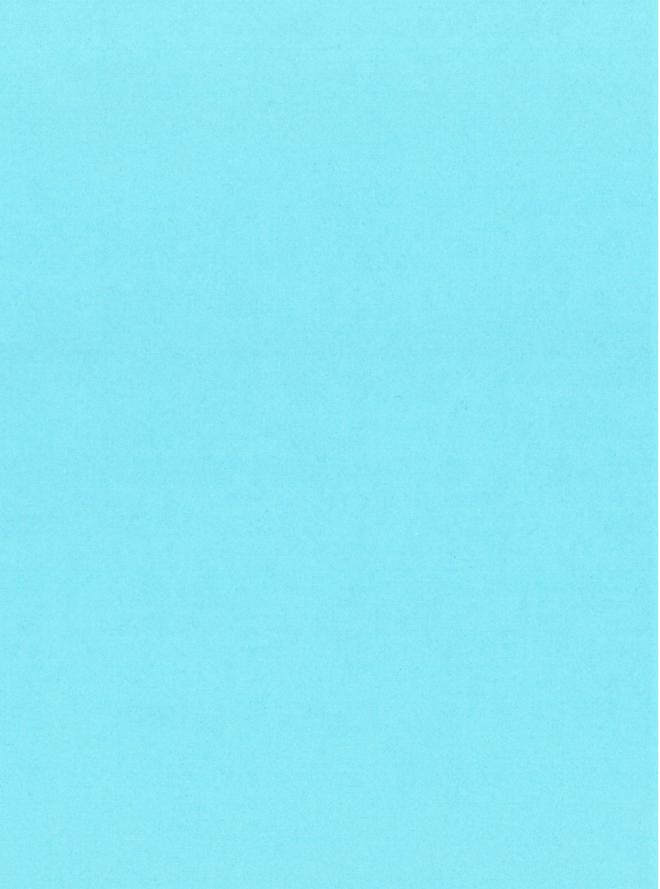
There were no recommendations from the Finance Committee to the full Board.

4. Adjournment

There being no further business, the meeting was adjourned at 5:24 p.m.

Respectively submitted,

Board Secretary/Clerk



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FALLBROOK REGIONAL HEALTH DISTRICT REGULAR BOARD MEETING

Wednesday, March 8, 2017, 6:00 p.m. Fallbrook Public Utilities District, 990 E. Mission Rd., Fallbrook

MINUTES

A. CALL MEETING TO ORDER – PLEDGE OF ALLEGIANCE

President Gordon Tinker called the meeting to order at 6:02 p.m. Board members present: Directors Abbott, Mroz, Salmon and Tinker. Board members absent: Director Leach Also present: Executive Director Bobbi Palmer, Legal Counsel Blaise Jackson and Accountant Kathy Bogle.

President Tinker led the Pledge of Allegiance

B. ADDITIONS TO AGENDA None

C. BOARD MEMBER AND PUBLIC COMMENTS

Debra Lorenzen of the North Inland Community Prevention Program (Mental Health Systems) addressed the Board of Directors regarding the increase in the use of "meth" (methamphetamines) by young people in Southern California, including Fallbrook. She quoted statistics supporting the significant increase. "Meth" is inexpensive and causes substantial damage to the user. Our close proximity to the border contributes to the problem.

D. CONSENT ITEMS

- D1. Minutes of February 1, 2017 Finance Committee Meeting
- D2. Minutes of February 8, 2017 Regular Board Meeting
- D3. Approval of January 2017 Financial Statements
 Action: It was moved by Director Salmon, seconded by Director Abbott to approve the Consent Items as presented. Motion carried (4-0)

E. REPORTS

E1. Finance Committee – Committee of the Whole, Chair: Director Mroz Chair Barbara Mroz provided the Finance Committee report for the meeting of March 1, 2017. The financial statements through January 2017 were reviewed. At present, total property tax revenue is \$1,022,294.83. It was noted repair expense had increased due to needed repairs on the buildings owned by the District. She discussed the LAIF and Cal Trust accounts noting that LAIF has a balance of \$1,445,721.45 and the balance in the Cal Trust account is \$4,225,909.84. There had been previous discussion regarding the Cal Trust account and whether with a financial advisor it might be possible to earn more on the account by moving it. The Finance Committee had no recommendations for the Board.

Fallbrook Regional Health District Regular Board Meeting Minutes

March 8, 2017

Director Mroz said several members of the Board had attended the Special Leadership District Academy on Governance and Finance presented by SDLA in La Jolla last month. Their participation and completion of the seminar helps to keep our Board and District in good standing.

Bobbi Palmer requested that District Accountant Kathy Bogle speak to the matter of the Cal Trust account.

Ms. Bogle said she had researched the Cal Trust Fund and found there to be many solid companies entrusting their dollars to this fund. She said that while the earnings on this account might be small (1 percent after fees were deducted), there is also little risk and she recommended no changes. The Board thanked Ms. Bogle for her efforts and Director Salmon suggested that now that we have this information, we might want to keep the names of the financial advisors for possible further review.

E2. Gov't/Public Relations/Community Relations Committee – Directors Salmon and Tinker

Director Salmon said the Little Hoover Commission is still very active, looking at all special districts and considering a proposed "10 year sunset" for Districts. Bobbi Palmer said she had prepared a packet of information for the board members regarding this matter. She said she is working, in conjunction with Erica Holloway, to meet with legislators regarding this issue. She suggested Town Hall/Board meetings in April & May.

E3. Facilities/Strategic Planning Committee – Directors Abbott and Salmon Director Abbott said on February 25th a board workshop had taken place at FRHD during which strategic planning was discussed.

Howard Salmon suggested that, as a district concerned with health services and the health of the residents of our District, we write a letter to legislators asking that they replace before repealing the Health Care Act.

Action: By consensus the Board directed that a letter to be drafted by legal counsel to legislators and President Trump, requesting that they replace before repealing the Health Care Act.

E4. Executive Director – Bobbi Palmer

Executive Director Bobbi Palmer said we are moving forward with community health efforts. Wellness Walks are taking place each month. The Community Collaborative for Health & Wellness is working with the schools to promote walking activities. The Committee will view a video with Ann Wade who has been advocating, along with other groups, for additional sidewalks and safe routes for walking. Jordan Colby, DMD, will present at Woman of Wellness regarding oral health.

E5. General Counsel – Blaise Jackson

Legal Counsel Jackson reiterated the importance of board members using the District's domain for their District related e-mail communications. District communications are generally considered to be in the public domain and can be requested through the Public Records Act, even if they are sent or maintained on personal devices.

March 8, 2017

Legal Counsel also reported on receiving a call from the Department of Public Health regarding the hospital's CMS certification which was set to expire on 3/15. The Department wanted to make sure The Joint Commission had been notified that the hospital was closed. After several calls with CHS outside legal, and The Joint Commission, it was confirmed that the Joint Commission had been timely notified of the hospital closure in 2015.

F. DISCUSSION/ACTION ITEMS

F1. First Review – Revised Bylaws for District (name change/committee reorganization) – Jackson
Legal Counsel presented a first draft of changes to the Bylaws that included the name change and committee structure changes. There was discussion and Director Salmon said he would like to recommend a couple of changes. He said he would provide his suggestions by the end of the week.
Action: None

G. ITEMS FOR SUBSEQUENT MEETINGS

- G1. Other Director/Staff discussion items
 - G1a. Item(s) for future board agendas Bylaws to be further revised and brought back to the Board.
 - G1b. Announcements of upcoming events:
 - Community Collaborative for Health & Wellness (CCHW) meeting Monday, March 20, 2017, 9:00-10:30am, Fallbrook Public Utility District Board Room
 - NCCCHI meeting 1st Wednesday, April 5, 2017, 2:00-3:00pm Fallbrook Regional Health District Board Room, 138 S. Brandon Rd.
 - Finance Committee of the Whole meeting Wednesday, April 5, 2017, Fallbrook Regional Health District Board Room
 - Woman of Wellness Thursday, April 6, 2017, 6pm Fallbrook Library
- G2. Next Regular Board meeting Wednesday, April 12, 2017, Fallbrook Public Utility District Board Room

H. ADJOURNMENT

There being no further business, the meeting was adjourned at 7:25 p.m.

Gordon Tinker, President

Stephen Abbott, Secretary

Fallbrook Regional Health District Regular Board Meeting Minutes

March 8, 2017

FALLBROOK REGIONAL HEALTH DISTRICT SPECIAL BOARD MEETING Thursday, March 23, 2017, 5:00 p.m. Fallbrook Regional Health District, Board Room, 138 S. Brandon Rd., Fallbrook

MINUTES

Directors present:G. Tinker, S. Abbott, H. Salmon, B. Mroz and B. LeachDirectors absent:NoneStaff present:Bobbi Palmer, Executive DirectorOthers present:Blaise Jackson, Legal Counsel.District Negotiator Travis Ives was present via
teleconference.

- A. CALL MEETING TO ORDER President Gordon Tinker called the meeting to order at 5:02 p.m.
- B. BOARD MEMBER AND PUBLIC COMMENTS None

C. CLOSED SESSION

C1. CONFERENCE WITH REAL ESTATE NEGOTIATOR REGARDING SALE OF REAL PROPERTY PER GOVT CODE 54956.8 -Conference shall include Price and Terms. District Negotiator: Travis Ives APN #s 105-811-01 and 103-246-51. (Former Hospital Property – 624 Elder Street/138 Brandon Road)"

D. RETURN TO OPEN SESSION

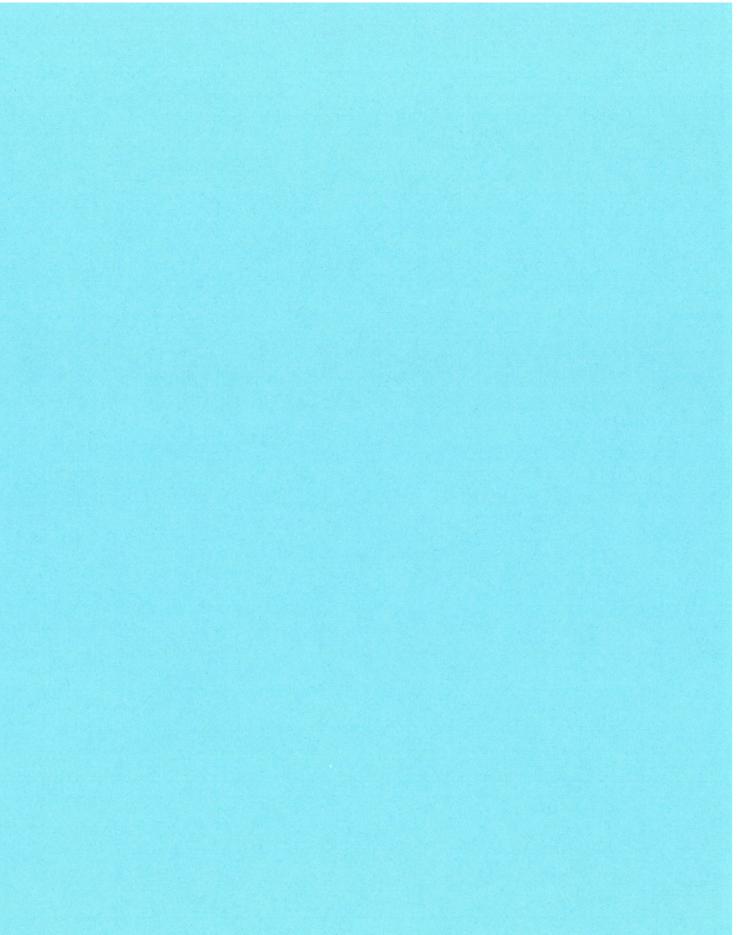
The Board directed its negotiator to take appropriate action with respect to the Real Property matter.

E. ADJOURNMENT

There being no further business, the meeting was adjourned at 6:30 p.m.

Gordon Tinker, President

Stephen Abbott, Secretary



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FALLBROOK HEALTHCARE DISTRICT BALANCE SHEET COMPARISON

Comparison of February, 2017 to January 31, 2017

	Feb 28, 17	Jan 31, 17	\$ Change
ASSETS Current Assets Checking/Savings			
102.9 · Cal Trust Investment Account 102.2 · Cash in Bank - New Operating 102.6 · Cash in Bank -LAIF	4,234,218.84 696,493.54 1,445,721.62	4,225,909.84 905,037.23 1,445,721.62	8,309.00 (208,543.69) 0.00
Total Checking/Savings	6,376,434.00	6,576,668.69	(200,234.69)
Other Current Assets 104 · Prepaid Insurance 114 · Interest Receivable	14,768.46 3,910.36	18,460.60 4,095.84	(3,692.14) (185.48)
Total Other Current Assets	18,678.82	22,556.44	(3,877.62)
Total Current Assets	6,395,112.82	6,599,225.13	(204,112.31)
Fixed Assets 120.01 · ALVARADO BLDG 121 · Equipment 121.2 · Equipment Depreciation 122.0 · ASSETS HELD FOR RESALE 122.01 · FALLBROOK HOSPITAL 122.02 · WELLNESS CENTER	291,240.00 21,394.96 (19,438.31) 4,417,521.00 291,240.00	291,240.00 19,521.65 (19,418.51) 4,417,521.00 291,240.00	0.00 1,873.31 (19.80) 0.00 0.00
Total 122.0 · ASSETS HELD FOR RESALE	4,708,761.00	4,708,761.00	0.00
Total Fixed Assets	5,001,957.65	5,000,104.14	1,853.51
TOTAL ASSETS	11397070.47	11599329.27	(202,258.80)
LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable 140 · Accounts Payable	16,985.73	17,862.72	(876.99)
Total Accounts Payable	16,985.73	17,862.72	(876.99)
Credit Cards		,	, , ,
150.1 · American Express 41007	0.00	74.24	(74.24)
Total Credit Cards	0.00	74.24	(74.24)
Other Current Liabilities 204 · Accrued Vacation & Sick Leave 215 · Comm Healthcare Programs Pble	5,608.24	5,608.24	0.00
215.24 · District Sponsored Programs	26,095.26	26,095.26	0.00
Total 215 · Comm Healthcare Programs	26,095.26	26,095.26	0.00
Total Other Current Liabilities	31,703.50	31,703.50	0.00
Total Current Liabilities	48,689.23	49,640.46	(951.23)
Total Liabilities	48,689.23	49,640.46	(951.23)
Equity 300 · Unrestricted Fund Balance Net Income	11464702.03 (116,320.79)	11464702.03 84,986.78	0.00 (201,307.57)
Total Equity	11348381.24	11549688.81	(201,307.57)
TOTAL LIABILITIES & EQUITY	11397070.47	11599329.27	(202,258.80)

FALLBROOK HEALTHCARE DISTRICT Income Statement For the Month Ended February 28, 2017 & Fiscal Year to Date

	Feb 17	Jul '16
Ordinary Income/Expense		
Income		
400. · District		
402 · Property tax revenue	63,789	1,086,084
403 · Interest / Dividends	3,910	35,048
406 · Unearned Inc(Loss) - Cal Trust	4,213	(33,553)
Total 400. · District	71,913	1,087,579
450. · Properties		
460 · Lease Income		
460.01 · A+ Urgent Care	4,800	38,400
Total 460 · Lease Income	4,800	38,400
Total 450. · Properties	4,800	38,400
Total Income	76,713	1,125,979
Gross Profit	76,713	1,125,979
Expense		
500 · Administrative Expenses		
500.36 · Accrued Vacation & Sick Leave		1,152
500.10 · Salaries	17,870	139,137
500.12 · Payroll Taxes	1,512	10,978
500.14 · W/C Insurance	136	1,089
500.15 · Employee Health & Welfare	1,216	8,020
500.16 · Board Stipends	1,900	9,400
500.17 · Education & Conferences	3,402	8,764
500.18 · Dues & Subscriptions	•,.•=	15,355
500.19 · Insurance - General	3,556	29,451
500.20 · Independent Accounting Services	850	7,000
500.21 · Annual Independent Audit		8,600
500.23 General Counsel	4,935	65,293
500.25 · Office Expense	-	
01 · Communications	283	2,486
02 · I.T. and Website services	703	3,874
03 · Refreshments	138	4,885
04 · Office supplies	1,984	6,185
05 · Admin fees	(31)	850
06 · Independent Contract Services	2,643	21,668
Total 500.25 · Office Expense	5,721	39,948
500.27 · Depreciation	20	277
500.29 · Dist Promotions & Publications	150	11,791
500.32 · Consultant Fees	4,825	44,391
500.33 · Copier Lease	839	6,344
580.01 · General Election		309
Total 500 · Administrative Expenses	46,932	407,298

FALLBROOK HEALTHCARE DISTRICT Income Statement

For the Month Ended February 28, 2017 & Fiscal Year to Date

	Feb 17	Jul '16
590 · Management & Maintenance		
590.01 · Building Engineer	6,765	59,513
590.02 · Gas & Electric	4,659	42,579
590.03 · Water	2,028	19,614
590.04 · Waste Management	162	1,020
590.05 · Security	1,100	8,800
590.06 · Landscape - Grounds Environment	3,200	13,950
590.07 · Custodial Services	300	2,550
590.08 · Elevator	173	1,376
590.09 · Vehicle Expenses		158
590.10 · Maintenance Services & Repairs	737	1,513
590.11 · Medical Records Store & Service	2,334	31,266
590.12 · Fire Alarm System	_,	990
590.13 · CHS Residual Transition Expense		2,500
Total 590 · Management & Maintenance	21,458	185,829
600 · Community Healthcare Programs		
600.02 · Flbk Citizens Crime Prevention	3,000	8,000
600.59 · Palomar Health Foundation	2,500	7,500
600.58 · Michelle's Place	2,500	12,500
600.54 · Healthy Adventures Foundation	3,000	6,000
600.53 · Jeremiah's Ranch		12,000
600.04 · Boys & Girls Club	7,500	29,700
600.07 · Senior Citizens Center	15,525	46,325
600.08 · Smiles Project	17,500	52,500
600.11 · Palomar Family Coun.Serv.	18,500	55,500
600.14 · Flbk Family Health Center	21,250	63,750
600.17 · Foundation for Senior Care	39,197	117,839
600.18 · Flbk Comm Project - Food Pantry	15,000	45,000
600.33 · REINS Therapy	10,200	36,100
600.37 · Trauma Intervention Programs	4,000	8,000
600.46 · North Inland Comm Prev Program	3,208	9,620
600.47 · FUHS - Asperger's Support Ctr	3,250	6,500
600.48 · UCSD Eye Mobile for Children	8,500	8,500
600.57 · North County Fire Protect Distr	25,000	54,839
Total 600 · Community Healthcare Programs	199,630	580,173
800 · District Direct Care Services		
800.02 · A+ Urgent Care	10,000	69,000
Total 800 · District Direct Care Services	10,000	69,000
Total Expense	278,020	1,242,300
Net Ordinary Income	(201,308)	(116,321)
Net Income	(201,308)	(116,321)

FALLBROOK HEALTHCARE DISTRICT Profit & Loss Actual vs Budget

July 2016 through February 2017

	Jul '16	Budget	\$ Over
Ordinary Income/Expense			
Income			
400. · District			
402 · Property tax revenue	1,086,084	1,058,424	
403 · Interest / Dividends	35,048	28,613	6,435
406 · Unearned Inc(Loss) - Cal Trust	(33,553)	0	(33,553)
Total 400. · District	1,087,579	1,087,037	542
450. · Properties			
460 · Lease Income			
460.01 · A+ Urgent Care	38,400	38,400	0
Total 460 · Lease Income	38,400	38,400	0
Total 450. · Properties	38,400	38,400	0
Total Income	1,125,979	1,125,437	542
Gross Profit	1,125,979	1,125,437	542
Expense			
500 · Administrative Expenses 500.36 · Accrued Vacation & Sick Leave	1,152		
500.10 · Salaries	139,137	154,264	(15,127)
500.12 · Payroll Taxes	10,978	16,800	(5,822)
500.12 · Vayion Taxes	1.089	767	322
500.15 · Employee Health & Welfare	8,020	12,240	(4,220)
500.16 · Board Stipends	9,400	17,600	(8,200)
500.17 · Education & Conferences	8,764	10,000	(1,236)
500.18 · Dues & Subscriptions	15,355	11,636	3,719
500.19 · Insurance - General	29,451	30,000	(549)
500.20 · Independent Accounting Servi	7,000	6,800	200
500.21 · Annual Independent Audit	8,600	8,500	100
500.23 · General Counsel	65,293	83,333	(18,041)
500.25 · Office Expense	0.400		14 4 4 4 4
01 · Communications	2,486	3,600	(1,114)
02 · I.T. and Website services	3,874	1,900 2,933	1,974 1,952
03 · Refreshments	4,885	•	(4,481)
04 · Office supplies 05 · Admin fees	6,185 850	10,667	(4,401)
06 · Independent Contract Services	21,668	34,178	(12,510)
Total 500.25 · Office Expense	39,948	53,278	(13,330)
	277		(830)
500.27 · Depreciation 500.29 · Dist Promotions & Publications	11,791	1,107 5,150	6,641
500.32 · Consultant Fees	44,391	12,550	31,841
500.33 · Copier Lease	6,344	4,000	2,344
500.85 · Calif Mandated Reimbursement	0	(6,667)	6,667
580.01 · General Election	309	40,000	(39,691)
Total 500 · Administrative Expenses	407,298	461,358	(54,060)

FALLBROOK HEALTHCARE DISTRICT Profit & Loss Actual vs Budget

July 2016 through February 2017

J	Jul '16	Budget	\$ Over
590 · Management & Maintenance			
590.01 · Building Engineer	59,513	56,333	3,180
590.02 · Gas & Electric	42,579	62,800	(20,221)
590.03 · Water	19,614	16,000	3,614
590.04 · Waste Management	1,020	1,000	20
590.05 · Security	8,800	9,000	(200)
590.06 · Landscape - Grounds Environ	13,950	21,667	(7,717)
590.07 · Custodial Services	2,550	1,000	1,550
590.08 · Elevator	1,376	1,333	43
590.09 · Vehicle Expenses	158	1,000	(842)
590.10 · Maintenance Services & Repairs	1,513	14,100	(12,587)
590.11 · Medical Records Store & Servi	31,266	0	31,266
590.12 · Fire Alarm System	990		
590.13 · CHS Residual Transition Expe	2,500		
Total 590 · Management & Maintenance	185,829	184,233	1,595
600 · Community Healthcare Programs			
600.02 · Flbk Citizens Crime Prevention	8,000	8,000	0
600.59 · Palomar Health Foundation	7,500	7,500	0
600.58 · Michelle's Place	12,500	12,500	0
600.54 · Healthy Adventures Foundation	6,000	6,000	0
600.53 · Jeremiah's Ranch	12,000	12,000	0
600.04 · Boys & Girls Club	29,700	29,700	0
600.07 · Senior Citizens Center	46,325	46,325	0
600.08 · Smiles Project	52,500	52,500	0
600.11 · Palomar Family Coun.Serv.	55,500	55,500	0
600.14 · Flbk Family Health Center	63,750	63,750	0
	117,839	117,839	0
600.18 · Flbk Comm Project - Food Pan	45,000	45,000	0
600.33 · REINS Therapy	36,100	36,100	0
600.37 · Trauma Intervention Programs	8,000	8,000	0
600.46 · North Inland Comm Prev Progr	9,620	9,620	0
600.47 · FUHS - Asperger's Support Ctr	6,500	6,500	0
600.48 · UCSD Eye Mobile for Children	8,500	8,500	25,000
600.57 · North County Fire Protect Distr	54,839	29,839	25,000
Total 600 · Community Healthcare Progra	580,173	555,173	25,000
800 · District Direct Care Services	2002 - 12 Million		
800.02 · A+ Urgent Care	69,000	0	69,000
Total 800 · District Direct Care Services	69,000	0	69,000
Total Expense 1,2	242,300	1,200,765	41,535
Net Ordinary Income (11	16,321)	(75,327)	(40,993)
Net Income (11	16,321)	(75,327)	(40,993)

FALLBROOK HEALTHCARE DISTRICT Profit & Loss Budget Overview July 2016 through June 2017

													TOTAL
	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul '16 - Ju
Ordinary Income/Expense													
Income													
400. · District													
402 · Property tax revenue	13,065.00	12,100.33	15,100.00	13,506.00	75,399.00	633,527.00	253,274.27	42,452.73	45,982.60	388,488.30	184,194.33	22,910.44	1,700,000.00
403 · Interest / Dividends	3,841.21	3,925.01	2,044.36	3,100.00	2,662.55	5,116.19	5,230.40	2,693.14	3,815.28	2,689.53	2,731.28	2,151.05	40,000.00
Total 400. · District	16,906.21	16,025.34	17,144.36	16,606.00	78,061.55	638,643.19	258,504.67	45,145.87	49,797.88	391,177.83	186,925.61	25,061.49	1,740,000.00
450. · Properties													
460 Lease Income													
460.01 · A+ Urgent Care	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	57,600.00
Total 460 · Lease Income	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	57,600.00
Total 450. · Properties	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4 800 00	4 000 00	4 000 00		1 000 00		
Total 430. * Properties	4,000.00	4,000.00	4,000.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	4,800.00	57,600.00
Total Income	21,706.21	20,825.34	21,944.36	21,406.00	82,861.55	643,443.19	263,304.67	49,945.87	54,597.88	395,977.83	191,725.61	29,861.49	1,797,600.00
Gross Profit	21,706.21	20,825.34	21,944.36	21,406.00	82,861.55	643,443.19	062 204 67	40.045.07	54 507 00	005 077 00	101 705 01		
	21,700.21	20,020.04	21,344.50	21,400.00	02,001.00	043,443.19	263,304.67	49,945.87	54,597.88	395,977.83	191,725.61	29,861.49	1,797,600.00
Expense													
500 · Administrative Expenses 500.10 · Salaries	16,533.00	18,533.00	18,533.00	18,533.00	20,533.00	20 522 00	00 500 00	00 500 00	00.040.00				
500.12 · Payroll Taxes	2,100.00	2,100.00	2,100.00	2,100.00	2,100.00	20,533.00 2,100.00	20,533.00 2,100.00	20,533.00	20,910.00	20,910.00	20,910.00	21,006.00	238,000.00
500.14 · W/C Insurance	95.84	95.82	95.82	95.82	95.82	95.82	95.82	2,100.00 95.84	2,100.00 95.85	2,100.00	2,100.00	2,100.00	25,200.00
500.15 · Employee Health & Welfare	1,530.00	1,530.00	1,530.00	1,530.00	1,530.00	1,530.00	1,530.00	1,530.00	1,530.00	95.85 1,530.00	95.85 1,530.00	95.85	1,150.00
500.16 · Board Stipends	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	1,530.00 2,200.00	18,360.00
500.17 · Education & Conferences	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	1,250.00	26,400.00
500.18 · Dues & Subscriptions	7,500.00	591.00	591.00	591.00	591.00	591.00	591.00	590.00	591.00	591.00	591.00	591.00	15,000.00 14,000.00
500.19 · Insurance - General	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00		
500.20 · Independent Accounting Services	850.00	850.00	850.00	850.00	850.00	850.00	850.00	850.00	850.00	850.00	850.00	3,750.00 850.00	45,000.00
500.21 · Annual Independent Audit	0.00	0.00	0.00	8,500.00	0.00	0.00	000.00	050.00	050.00	650.00	650.00	650.00	10,200.00 8,500.00
500.23 · General Counsel	10,416.63	10,416.67	10,416.67	10,416.67	10.416.67	10,416.67	10,416.67	10,416.67	10,416.67	10,416.67	10,416.67	10,416.67	
500.25 · Office Expense	,				10,110.01	10,110.07	10,410.07	10,410.07	10,410.07	10,410.07	10,410.07	10,410.07	125,000.00
01 · Communications	450.00	450.00	450.00	450.00	450.00	450.00	450.00	450.00	450.00	450.00	450.00	450.00	5,400.00
02 · I.T. and Website services	933.00	250.00	250.00	0.00	250.00	217.00	0.00	0.00	250.00	0.00	250.00	0.00	2,400.00
03 · Refreshments	366.63	366.67	366.67	366.67	366.67	366.67	366.67	366.67	366.67	366.67	366.67	366.67	4,400.00
04 · Office supplies	1,333.37	1,333.33	1,333.33	1,333.33	1,333.33	1,333.33	1,333.33	1,333.33	1,333.33	1,333.33	1,333.33	1,333.33	16,000.00
06 · Independent Contract Services	2,176.00	2,176.00	2,176.00	5,576.00	5,556.00	5,506.00	5,506.00	5,506.00	5,406.00	5,404.00	5,506.00	5,506.00	56,000.00
Total 500.25 · Office Expense	5,259.00	4,576.00	4,576.00	7,726.00	7,956.00	7,873.00	7,656.00	7,656.00	7,806.00	7,554.00	7,906.00	7,656.00	84,200.00
500.27 · Depreciation	138.39	138.39	138.39	138.39	138.39	138.39	138.39	138.39	138.39	138.39	138.39	138.39	1,660.68
500.29 · Dist Promotions & Publications	4,000.00	250.00	250.00	250.00	100.00	100.00	100.00	100.00	200.00	250.00	250.00	150.00	6,000.00
500.32 · Consultant Fees	8,000.00	650.00	650.00	650.00	650.00	650.00	650.00	650.00	650.00	600.00	600.00	600.00	15,000.00
500.33 · Copier Lease	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	500.00	6,000.00
500.85 · Calif Mandated Reimbursement	-833.34	-833.34	-833.33	-833.33	-833.33	-833.33	-833.34	-833.34	-833.30	-833.34	-833.34	-833.34	-10.000.00
580.01 · General Election	0.00	0.00	0.00	40,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,000.00
Total 500 · Administrative Expenses	63,289.52	46,597.54	46,597.55	98,247.55	51,827.55	51,744.55	51,527.54	51,526.56	52,154.61	51,902.57	52,254.57	52,000.57	669,670.68
590 · Management & Maintenance													,
590.01 · Building Engineer	7,041.63	7,041.67	7,041.67	7,041.67	7,041.67	7,041.67	7,041.67	7,041.67	7,041.67	7,041.67	7,041.67	7,041.67	84,500.00
590.02 · Gas & Electric	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	7,850.00	94,200.00
590.03 · Water	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	24,000.00
590.04 · Waste Management	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	1,500.00
590.05 · Security	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	1,125.00	13,500.00
590.06 · Landscape - Grounds Environment	2,708.37	2,708.33	2,708.33	2,708.33	2,708.33	2,708.33	2,708.33	2,708.33	2,708.33	2,708.33	2,708.33	2,708.33	32,500.00
590.07 Custodial Services	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	1,500.00
590.08 · Elevator	166.63	166.67	166.67	166.67	166.67	166.67	166.67	166.67	166.67	166.67	166.67	166.67	2,000.00
590.09 · Vehicle Expenses	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	125.00	1,500.00
590.10 · Maintenance Services & Repairs	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	1,762.50	21,150.00
Total 590 · Management & Maintenance	23,029.13	23,029.17	23,029.17	23,029.17	23,029.17	23,029.17	23,029.17	23,029.17	23,029.17	23,029.17	23,029.17	23,029.17	276,350.00

FALLBROOK HEALTHCARE DISTRICT Profit & Loss Budget Overview July 2016 through June 2017

	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Bion 47	4 47			TOTAL
			cop it	ourio	100 10	Dec To	Jan II	reb 17	Mar 17	Apr 17	May 17	Jun 17	Jul '16 - Ju
600 · Community Healthcare Programs													
600.02 · Flbk Citizens Crime Prevention	2,500.00	0.00	0.00	0.00	2,500.00	0.00	0.00	3,000.00	0.00	0.00	0.00	0.00	8,000.00
600.59 · Palomar Health Foundation	2,500.00	0.00	0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	10.000.00
600.58 · Michelle's Place	5,000.00	0.00	0.00	0.00	5,000.00	0.00	0.00	2,500.00	0.00	0.00	2,500.00	0.00	15,000.00
600.54 · Healthy Adventures Foundation	3,000.00	0.00	0.00	0.00	0.00	0.00	0.00	3,000.00	0.00	0.00	3,000.00	0.00	9,000.00
600.53 · Jeremiah's Ranch	6,000.00	0.00	0.00	0.00	6,000.00	0.00				0.00	0,000.00	0.00	12,000.00
600.04 · Boys & Girls Club	14,700.00	0.00	0.00	0.00	7,500.00	0.00	0.00	7,500.00	0.00	0.00	7,500.00	0.00	37,200.00
600.07 · Senior Citizens Center	15,275.00	0.00	0.00	0.00	15,525.00	0.00	0.00	15,525.00	0.00	0.00	15,538.00	0.00	
600.08 · Smiles Project	17,500.00	0.00	0.00	0.00	17,500.00	0.00	0.00	17,500.00	0.00	0.00	17,500.00	0.00	61,863.00
600.11 · Palomar Family Coun.Serv.	18,500.00	0.00	0.00	0.00	18,500.00	0.00	0.00	18,500.00	0.00	0.00	18,500.00	0.00	70,000.00
600.14 · Flbk Family Health Center	21,250.00	0.00	0.00	0.00	21,250.00	0.00	0.00	21,250.00	0.00	0.00	21,250.00		74,000.00
600.17 · Foundation for Senior Care	39,446.00	0.00	0.00	0.00	39,196.00	0.00	0.00	39,197.00	0.00	0.00		0.00	85,000.00
600.18 · Flbk Comm Project - Food Pantry	15,000.00	0.00	0.00	0.00	15,000,00	0.00	0.00	15,000.00	0.00	0.00	12,250.00	0.00	130,089.00
600.33 · REINS Therapy	15,700.00	0.00	0.00	0.00	10,200,00	0.00	0.00	10.200.00	0.00		15,000.00	0.00	60,000.00
600.37 · Trauma Intervention Programs	4,000.00	0.00	0.00	0.00	0.00	0.00	0.00	4.000.00		0.00	10,200.00	0.00	46,300.00
600.46 · North Inland Comm Prev Program	3,206.00	0.00	0.00	0.00	3.206.00	0.00	0.00	3,208.00	0.00	0.00	0.00	0.00	8,000.00
600.47 · FUHS - Asperger's Support Ctr	0.00	0.00	0.00	0.00	3,250.00	0.00	0.00		0.00	0.00	0.00	0.00	9,620.00
600.48 · UCSD Eye Mobile for Children	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,250.00	0.00	0.00	0.00	0.00	6,500.00
600.57 · North County Fire Protect Distr	29,839.00	0.00	0.00	0.00	0.00	0.00	0.00	8,500.00	0.00	0.00	0.00	0.00	8,500.00
			and the second second second second	0.00	0.00	0.00							29,839.00
Total 600 · Community Healthcare Programs	213,416.00	0.00	0.00	0.00	167,127.00	0.00	0.00	174,630.00	0.00	0.00	125,738.00	0.00	680,911.00
Total Expense	299,734.65	69,626.71	69,626.72	121,276.72	241,983.72	74,773.72	74,556.71	249,185.73	75,183.78	74,931.74	201,021.74	75,029.74	1,626,931.68
t Ordinary Income	-278,028.44	-48,801.37	-47,682.36	-99,870.72	-159,122.17	568,669.47	188,747.96	-199,239.86	-20,585.90	321,046.09	-9,296.13	-45,168.25	170,668.32
come	-278,028.44	-48,801.37	-47,682.36	-99,870.72	-159,122.17	568,669.47	188,747.96	-199,239.86	-20,585.90	321,046.09	-9,296.13	-45,168.25	170,668.32

Local Agency Investment Fund P.O. Box 942809 Sacramento, CA 94209-0001 (916) 653-3001

FALLBROOK HEALTHCARE DISTRICT

ADMINISTRATOR P.O. BOX 2587 FALLBROOK, CA 92088 www.treasurer.ca.gov/pmialaif/laif.asp March 20, 2017

PMIA Average Monthly Yields

Account Number:

/ Tran Type Definitions

February 2017 Statement

Account Summary

Total Deposit: Total Withdrawal:

0.00	Beginning Balance:	1,445,721.62
0.00	Ending Balance:	1,445,721.62



CalTrust Medium Term Fund - FALLBROOK HEALTHCARE DIST

Date	Transaction	Shares	Price Per Share	Amount	Average Cost NAV	Average Cost Amount	Realized Gain/Loss*
01/31/2017 02/01/2017 02/28/2017 02/28/2017	INCOME DISTRIBUTION - JANUARY	420,907.355 407.952 0.000 421,315.307	10.04 10.04 10.05	4,225,909.84 4,095.84 4,213.16 4,234,218.84 0.00 3,910.36 -839.25	10.05200361 10.05199199	4,230,962.25 4,095.84 0.00 4,235,058.09	0.00

* Please note that this information should not be construed as tax advice and it is recommended that you consult with a tax professional regarding your account.

For Inquiries About Your Account, Contact:

Nottingham Investment Administration 116 South Franklin Street Rocky Mount, NC 27804 Attention: CaITRUST Shareholder Services Phone: 800.773.3863 Fax: 252-972-1908 Email: caltrustsupport@ncfunds.com FALLBROOK HEALTHCARE DISTRICT FALLBROOK HEALTHCARE DIST ATTN: BOBBI A PALMER 138 SOUTH BRANDON ROAD FALLBROOK CA 92028

Page 1 of 1

FALLBROOK HEALTHCARE DISTRICT Transaction Detail by Account - 402 Property Tax Revenue July 2016 through February 2017

Туре	Date	Name	Amount	Balance
400. • District 402 • Property tax Deposit Deposit Deposit Deposit Deposit Deposit Deposit Deposit Total 402 • Property Total 400. • District TOTAL	07/20/16 08/10/16 09/07/16 10/04/16 11/02/16 12/07/16 01/18/17 02/15/17	County of SD-pro County of SD-pro County of SD-pro County of SD-pro County of SD-pro County of SD-pro County of SD-pro	13,064.78 28,616.73 9,576.71 23,342.78 50,132.27 600,065.52 297,496.04 63,789.21 1,086,084.04 1,086,084.04	13,064.78 41,681.51 51,258.22 74,601.00 124,733.27 724,798.79 1,022,294.83 1,086,084.04 1,086,084.04 1,086,084.04
IUIAL			1,086,084.04	1,086,084.04

FALLBROOK HEALTHCARE DISTRICT Check Detail

As of February 28, 2017

Туре	Date	Nun	n Name	Мето	Amount
102.2 · Cash i	in Bank - New (Operating			2 10000 W
Bill Pmt -Check	02/01/17	8934	L & M Enterprises, Inc.	January bookkeeping services	-1,030.00
Bill Pmt -Check	02/01/17	8937	Fallbrook Family Health Center	GRANT 276-BEHAVIORAL HEALTH; GRANT 277	-21,250.00
Bill Pmt -Check	02/01/17	8939	Fallbrook Senior Center	GRANT 279-MOBILITY/EXERCISE PGM; GRANT 2	-15,525.00
Bill Pmt -Check	02/01/17	8940	Fallbrook Smiles Project	Grant 281-CELEBRATE HEALTH	-17,500.00
Bill Pmt -Check	02/01/17	8942	Foundation for Senior Care	GRANT 283-ADULT DAY CARE; GRANTE 284-CA	-39,197.00
Bill Pmt -Check	02/01/17	8943	Galvanized strategies formerly CIM Inc	Retainer - Community Engagement Services	-4,000.00
Bill Pmt -Check	02/01/17	8949	Reins	Grant 293-CONSULTING THERAPY PROGRAM	-10,200.00
Check	02/01/17	8935	Boys & Girls Club	Grant 274 TRIPLE PLAY PROGRAM - 3 of 4	-7,500.00
Check	02/01/17	8936	Fallbrook Citizens - FCCPC	Grant 275 GANAS MENTORING PROGRAM - 3 of 3	-3,000.00
Check	02/01/17	8938	Fallbrook Food Pantry	Grant 278 NUTRITION FOR THE HUNGRY - 3 of 4	-15,000.00
Check	02/01/17	8941	Fallbrook Union High School District	Grant 282 ASPERGERS/AUTISM SUPPORT - 2 0	-3,250.00
Check	02/01/17	8944	Healthy Adventures Foundation	Grant 286 FALLBROOK COMMUNITY CTR WELL	-3,000.00
Check	02/01/17	8945	Mental Health Systems-NICPP	Grant 288 NICPP - Youth Advocacy Coalition - 3 of 3	-3,208.00
Check	02/01/17	8946	Michelle's Place	Grant 289 - BREAST HEALTH ASSISTANCE PRO	-2,500.00
Check	02/01/17	8947	Palomar Family Counseling Service	Grant 291 HEALTHY BODIES, HEALTHY MINDS	-18,500.00
Check	02/01/17	8948	Palomar Health Foundation	Grant 292 SENIOR CARE GRANT PROGRAM - 3 o	-2,500.00
Check	02/01/17	8950	Trauma Intervention Programs	Grant 295 TRAUMA INTERVENTION PROGRAMS	-4,000.00
Check	02/01/17	8951	UCSD Eyemobile for Children	Grant # 296 - One time payment	-8,500.00
Bill Pmt -Check	02/06/17	ACH	Apple One Staffing	00102494-0000	-562.80
Bill Pmt -Check	02/07/17	8952	American Express - Credit card	0-41007	-952.81
Check	02/07/17	8964	Bobbi Palmer	Reimbursment-mileage - TIERS Framework Training	-62.48
Bill Pmt -Check	02/07/17	8953	AT&T U-Verse - computer	146524365	-100.78
Bill Pmt -Check	02/07/17	8954	Aztec Cleaning & Maintenance	Invoice No. 196109	-300.00
Bill Pmt -Check	02/07/17	8955	California Secretary of State	REPRODUCTION AND CERTIFIED COPY FEE FO	-6.50
Bill Pmt -Check	02/07/17	8956	Deluxe Check Printing	Check re-order	-351.75
Bill Pmt -Check	02/07/17	8957	Fallbrook Waste - FHD 441078	20-T1 441078	-69.50
Bill Pmt -Check	02/07/17	8958	Fallbrook Waste - Hospital 439928	20-T3 439928	-92.70
Bill Pmt -Check	02/07/17	8959	Iron Mountain-153	CHSRM	-1,144.24
Bill Pmt -Check	02/07/17	8960	Iron Mountain SX-302	SX302/Fallbrook Hosp.	-952.47
Bill Pmt -Check	02/07/17	8961	Palomar Mountain Premium Waters	45919	-23.54
Bill Pmt -Check	02/07/17	8962	Scott & Jackson Esq.	Professional services 2017 JAN.	-5,215.00
Bill Pmt -Check	02/07/17	8963	Village News	1641	-310.80
Check	02/08/17	8965	NCFPD - N. Co. Fire Protection District	Agmt. 2016-1; Installment No. 2	-25,000.00
Bill Pmt -Check	02/14/17	8966	Ascent Elevator Services, Inc.	Elevator Maintenance - Brandon Bldg - 2017 Jan.	-173.00
Bill Pmt -Check	02/14/17	8967	Ed Shobe Plumbing	Labor Charge to Clear Clog at Urgent Care	-200.00
Bill Pmt -Check	02/14/17	8968	Fallbrook Chamber of Commerce	AVOCADO FESTIVAL BANNER	-150.00
Bill Pmt -Check	02/14/17	8969	FPUD - Hospital 2 008757	008757	-117.49
Bill Pmt -Check	02/14/17	8970	Glennie's Office Products, Inc.	6493	-37.66
Bill Pmt -Check	02/14/17	8971	Kathleen Bogle	1/31/17 AND FEB 2017 INVOICES	-1,675.00
Bill Pmt -Check	02/14/17	8972	Ramirez Landscaping & Tree Service	Landscape maintenance Jan 2017	-1,600.00
Bill Pmt -Check	02/14/17	8973	Streamline	Website monthly fee	-200.00
Bill Pmt -Check	02/14/17	8974	T.R.Y. Enterprises	Inv. 7986 - patrol services 2/1/17-2/28/17	-1,100.00
Bill Pmt -Check	02/14/17	8975	Citrus Plaza Self Storage	Storage Unit #322 rental fee 3/1-3/31/2017	-203.00
Bill Pmt -Check	02/14/17	8976	Paragon Services Engineering	Building Engineer Michael Ready plus Cell Phone S	-7,592.22
Bill Pmt -Check	02/17/17	ACH	Apple One Staffing	00102494-0000	-487.76
Bill Pmt -Check	02/17/17	8977	Aztec Cleaning & Maintenance	Office cleaning	-150.00
Bill Pmt -Check	02/17/17	8978	Purchase Power (Pitney Bowes)	8000909009769550	-100.00
Bill Pmt -Check	02/17/17	8979	Streamline	Website monthly fee Jan 2017	-200.00
Bill Pmt -Check	02/21/17	ACH	Apple One Staffing	00102494-0000	-562.80
Bill Pmt -Check	02/22/17	8980	CalPERS	1559595490	-780.86
Bill Pmt - Check	02/22/17	8981	CSDA-State	1589	-175.00
Bill Pmt -Check	02/22/17	8982	Touchbase	344664	-54.81
Bill Pmt -Check	02/22/17	8983	Murphy's Printing	Business Cards, Labels, and Envelopes	-533.36
Bill Pmt -Check	02/28/17	8985	A+ Urgent Care, Inc.	Subsidy #3 of 6	-10,000.00
Check	02/28/17	8984	Pamela Knox	Reimb. for purchases at Major Market on 2/24/17; M	-303.18
Bill Pmt -Check	02/28/17	8986	Cintas Fire	01164	-536.52
Bill Pmt -Check	02/28/17	8987	FPUD - FHD 1 007721	007721-000	-84.22
Bill Pmt -Check	02/28/17	8988	FPUD - FHD 2 007720-001	007720-001	-130.95
Bill Pmt -Check	02/28/17	8989	FPUD - Hospital 1 007720-000	007720	-1,695.52
Bill Pmt -Check	02/28/17	8990	Holloway Computers	Laptop setup	-250.00
Bill Pmt - Check	02/28/17	8991	Konica Minolta Leasing - qds	061-0116888-000	-842.90
Bill Pmt -Check	02/28/17	8992	Palomar Mountain Premium Waters	45919	-17.25
Bill Pmt -Check	02/28/17	8993	SDG&E- Hospital - 8171 / 2250	ACCT. NOS. 2250 AND 8171	-4,079.08
Bill Pmt -Check	02/28/17	8994	SDG&E FHD - 6994	40605976994	-580.00
Check	02/28/17	8996	Linda Bannerman	Office Supplies Reimb Radio Shack on 2/24/17;	-247.53
Bill Pmt -Check	02/28/17		On Top of It Roofing	Leak repairs on Reg. Health Office and A+ Urgent C	-1,250.00
Bill Pmt -Check	02/28/17	9015	Scott & Jackson Esq.	Professional services 2017 FEB.	-4,935.00
Total 102.2 · Cash	in Bank New	Operating	n		-255,850.48
10(d) 102.2 CdSI	THE DATE - NEW	operating	9		200,000.40

TOTAL

-255,850.48



CONFLICT OF INTEREST CODE

OF

FALLBROOK REGIONAL HEALTH DISTRICT

DRAFT

2016 Conflict of Interest Code - FRHD

(Rev 4/2017)

1. <u>Standard Code of FPPC</u>

The Political Reform Act of 1974 (Gov. Code, § 81000 et seq.) requires each state and local government agency to adopt and promulgate a conflict of interest code. Fallbrook Regional Health District has adopted such a code that should be revised and updated. The Fair Political Practices Commission (FPPC) has adopted a regulation (2 Cal. Code of Regs., § 18730), which contains the terms of a standard conflict of interest code that can be incorporated by reference as a district's code. After public notice and hearing, the regulation may be amended by the FPPC to conform to amendments in the Political Reform Act.

2. Adoption of Standard Code of FPPC

The terms of Title 2, California Code of Regulations, section 18730 and any future amendments to it duly adopted by the FPPC are hereby incorporated by reference. A copy of Section 18730 currently in effect (June, 2016) is appended to this Code for reference purposes. This regulation and the Appendix attached hereto designating officials and employees and establishing disclosure categories shall constitute the Conflict of Interest Code of the Fallbrook Regional Health District. This Conflict of Interest Code shall take effect when approved by the Fallbrook Regional Health District Board of Directors and shall thereupon supersede all prior codes adopted by the Fallbrook Regional Health District.

3. Filing of Statements of Economic Interests

Pursuant to the standard conflict of interest code, designated employees set forth in the appendix shall file statements of economic interests with the Secretary of the Fallbrook Regional Health District. Upon receipt of the statements of the members of the Board of Directors, the District Administrator shall make and retain copies and forward the originals of these statements to the Clerk of the San Diego County Board of Supervisors. Statements for all other designated employees shall be retained by the Fallbrook Regional Health District.

APPENDIX EXHIBIT "A"

General Provisions

4. Designated employees listed in Column 1 must disclose investments in business entities and source of income which manufacture, distribute, sell or supply the goods or services listed in Column II. Active Board Members are not listed as they are mandatory reporters under Government Code Section 87200, as they manage public investments.

5. Investments in any business entity or sources of income which are entities or persons engaged in the following health care facilities, services, equipment, instruments, materials, supplies or businesses listed in the categories.

I.	ll
<u>Designated Employees</u>	<u>Disclosure Categories</u>
Candidates Running for the Office of Board of Directors General Counsel Executive Director/Administrator Consultants	ALL ALL ALL *

*Consultants shall disclose all sources of income, interests in real property and investments, and business positions in business entities.

The General Counsel of the District may determine in writing that a particular consultant, although a "designated position," is hired to perform a range of duties that is limited in scope and thus is not required to fully comply with the disclosure requirements described in this section. Such written determination shall include a description of the consultant's duties and, based upon that description, a statement of the extent of disclosure requirements. Such determination shall be a public record and shall be retained for public inspection in the same manner and location as this conflict of interest code.

EXHIBIT "B" CATEGORIES

- 1. Real property
- 2. Medical laboratories
- 3. Ambulance
- 4. Insurance
- 5. Financial audit
- 6. Maintenance or janitorial
- 7. Collection agencies
- 8. Temporary health agencies or services
- 9. Healthcare organizations

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-(Regulations of the Fair Political Practices Commission, Title 2, Division 6, California Code of Regulations)

§ 18730 Provisions of Conflict of Interest Codes

- (a) Incorporation by reference of the terms of this regulation along with the designation of employees and the formulation of disclosure categories in the Appendix referred to below constitute the adoption and promulgation of a conflict of interest code within the meaning of Section 87306 if the terms of this regulation are substituted for terms of a conflict of interest code already in effect. A code so amended or adopted and promulgated requires the reporting of reportable items in a manner substantially equivalent to the requirements of article 2 of chapter 7 of the Political Reform Act, Sections 81000, et seq. The requirements of a conflict of interest code are in addition to other requirements of the Political Reform Act, such as the general prohibition against conflicts of interest contained in Section 87100, and to other state or local laws pertaining to conflicts of interest.
- (b) The terms of a conflict of interest code amended or adopted and promulgated pursuant to this regulation are as follows:

(1) Definitions.

The definitions contained in the Political Reform Act of 1974, regulations of the Fair Political Practices Commission (Regulations 18110, et seq.), and any amendments to the Act or regulations, are incorporated by reference into this conflict of interest code.-

(2) Designated Employees.-

The persons holding positions listed in the Appendix are designated employees. It has been determined that these persons make or participate in the making of decisions which may foreseeably have a material effect on economic interests.

(3) Disclosure Categories.

This code does not establish any disclosure obligation for those designated employees who are also specified in Section 87200 if they are designated in this code in that same capacity or if the geographical jurisdiction of this agency is the same as or is wholly included within the jurisdiction in which those persons must report their economic interests pursuant to article 2 of chapter 7 of the Political Reform Act, Sections 87200, et seq.

In addition, this code does not establish any disclosure obligation for any designated employees who are designated in a conflict of interest code for another agency, if all of the following apply:

(A) The geographical jurisdiction of this agency is the same as or is wholly included within the jurisdiction of the other agency;

(B) The disclosure assigned in the code of the other agency is the same as that required under article 2 of chapter 7 of the Political Reform Act, Section 87200; and

(C) The filing officer is the same for both agencies.(1)

Such persons are covered by this code for disqualification purposes only. With respect to all other designated employees, the disclosure categories set forth in the Appendix specify which kinds of economic interests are reportable. Such a designated employee shall disclose in his or her statement of economic interests those economic interests he or she has which are of the kind described in the disclosure categories to which he or she is assigned in the Appendix. It has been determined that the economic interests set forth in a designated employee's disclosure categories are the kinds of economic interests which he or she foreseeably can affect materially through the conduct of his or her office. (4) Statements of Economic Interests: Place of Filing.

The code reviewing body shall instruct all designated employees within its code to file statements of economic interests with the agency or with the code reviewing body, as provided by the code reviewing body in the agency's conflict of interest code.(2)

(5) Statements of Economic Interests: Time of Filing.

(A) Initial Statements. All designated employees employed by the agency on the effective date of this code, as originally adopted, promulgated and approved by the code reviewing body, shall file statements within 30 days after the effective date of this code. Thereafter, each person already in a position when it is designated by an amendment to this code shall file an initial statement within 30 days after the effective date of the amendment.

(B) Assuming Office Statements. All persons assuming designated positions after the effective date of this code shall file statements within 30 days after assuming the designated positions, or if subject to State Senate confirmation, 30 days after being nominated or appointed.-

(C) Annual Statements. All designated employees shall file statements no later than April 1. If a person reports for military service as defined in the Service member's Civil Relief Act, the deadline for the annual statement of economic interests is 30 days following his or her return to office, provided the person, or someone authorized to represent the person's interests, notifies the filing officer in writing prior to the applicable filing deadline that he or she is subject to that federal statute and is unable to meet the applicable deadline, and provides the filing officer verification of his or her military status.

(D) Leaving Office Statements. All persons who leave designated positions shall file statements within 30 days after leaving office.

(5.5) Statements for Persons Who Resign Prior to Assuming Office.

Any person who resigns within 12 months of initial appointment, or within 30 days of the date of notice provided by the filing officer to file an assuming office statement, is not deemed to have assumed office or left office, provided he or she did not make or participate in the making of, or use his or her position to influence any decision and did not receive or become entitled to receive any form of payment as a result of his or her appointment. Such persons shall not file either an assuming or leaving office statement.

(A) Any person who resigns a position within 30 days of the date of a notice from the filing officer shall do both of the following:

(1) File a written resignation with the appointing power; and
(2) File a written statement with the filing officer declaring under penalty of perjury that during the period between appointment and resignation he or she did not make, participate in the making, or use the position to influence any decision of the agency or receive, or become entitled to receive, any form of payment by virtue of being appointed to the position.-

(6) Contents of and Period Covered by Statements of Economic Interests.-

(A) Contents of Initial Statements.

Initial statements shall disclose any reportable investments, interests in real property and business positions held on the effective date of the code and income received during the 12 months prior to the effective date of the code.-

(B) Contents of Assuming Office Statements.

Assuming office statements shall disclose any reportable investments, interests in real property and business positions held on the date of assuming office or, if subject to State Senate confirmation or appointment, on the date of nomination, and income received during the 12 months prior to the date of assuming office or the date of being appointed or nominated, respectively.

(C) Contents of Annual Statements. Annual statements shall disclose any reportable investments, interests in real property, income and business positions held or received during the previous calendar year provided, however, that the period covered by an employee's first annual statement shall begin on the effective date of the code or the date of assuming office whichever is later, or for a board or commission member subject to Section 87302.6, the day after the closing date of the most recent statement filed by the member pursuant to Regulation 18754.

(D) Contents of Leaving Office Statements.

Leaving office statements shall disclose reportable investments, interests in real property, income and business positions held or received during the period between the closing date of the last statement filed and the date of leaving office.

(7) Manner of Reporting.

Statements of economic interests shall be made on forms prescribed by the Fair Political Practices Commission and supplied by the agency, and shall contain the following information:

(A) Investment and Real Property Disclosure.-

When an investment or an interest in real property (3) is required to be reported,(4); the statement shall contain the following:

1. A statement of the nature of the investment or interest;

2. The name of the business entity in which each investment is held, and a general description of the business activity in which the business entity is engaged;

3. The address or other precise location of the real property;

4. A statement whether the fair market value of the investment or interest in real property equals or exceeds \$2,000, exceeds \$10,000, exceeds \$100,000, or exceeds \$1,000,000.

(B) Personal Income Disclosure. When personal income is required to be reported, (5) the statement shall contain:

The name and address of each source of income aggregating \$500 or more in value, or \$50 or more in value if the income was a gift, and a general description of the business activity, if any, of each source;
 A statement whether the aggregate value of income from each source, or in the case of a loan, the highest amount owed to each source, was \$1,000 or less, greater than \$1,000, greater than \$10,000;

3. A description of the consideration, if any, for which the income was received;

4. In the case of a gift, the name, address and business activity of the donor and any intermediary through which the gift was made; a description of the gift; the amount or value of the gift; and the date on which the gift was received;

5. In the case of a loan, the annual interest rate and the security, if any, given for the loan and the term of the loan.

(C) Business Entity Income Disclosure. When income of a business entity, including income of a sole proprietorship, is required to be reported (6)

the statement shall contain:

1. The name, address, and a general description of the business activity of the business entity;

2. The name of every person from whom the business entity received payments if the filer's pro rata share of gross receipts from such person was equal to or greater than \$10,000.

(D) Business Position Disclosure. When business positions are required to be reported, a designated employee shall list the name and address of each business entity in which he or she is a director, officer, partner, trustee, employee, or in which he or she holds any position of management, a description of the business activity in which the business entity is engaged, and the designated employee's position with the business entity.

(E) Acquisition or Disposal During Reporting Period. In the case of an annual or leaving office statement, if an investment or an interest in real property was partially or wholly acquired or disposed of during the period covered by the statement, the statement shall contain the date of acquisition or disposal.

(8) Prohibition on Receipt of Honoraria.

(A) No member of a state board or commission, and no designated employee of a state or local government agency, shall accept any honorarium from any source, if the member or employee would be required to report the receipt of income or gifts from that source on his or her statement of economic interests. This section shall not apply to any part-time member of the governing board of any public institution of higher education, unless the member is also an elected official. Subdivisions (a), (b), and (c), of Section 89501 shall apply to the prohibitions in this section.

This section shall not limit or prohibit payments, advances, or reimbursements for travel and related lodging and subsistence authorized by Section 89506.

(8.1) Prohibition on Receipt of Gifts in Excess of \$460.

(A) No member of a state board or commission, and no designated employee of a state or local government agency, shall accept gifts with a total value of more than \$460 in a calendar year from any single source, if the member or employee would be required to report the receipt of income or gifts from that source on his or her statement of economic interests. This section shall not apply to any part-<u>time</u> member of the governing board of any public institution of higher education, unless the member is also an elected official.-Subdivisions (e), (f), and (g) of Section 89503 shall apply to the prohibitions

in this section.-

(8.2) Loans to Public Officials.

(A) No elected officer of a state or local government agency shall, from the date of his or her election to office through the date that he or she vacates office, receive a personal loan from any officer, employee, member, or consultant of the state or local government agency in which the elected officer holds office or over which the elected officer's agency has direction and control.

(B) No public official who is exempt from the state civil service system pursuant to subdivisions (c), (d), (e), (f), and (g) of Section 4 of Article VII of

the Constitution shall, while he or she holds office, receive a personal loan from any officer, employee, member, or consultant of the state or local government agency in which the public official holds office or over which the public official's agency has direction and control. This subdivision shall not apply to loans made to a public official whose duties are solely secretarial, clerical, or manual.

(C) No elected officer of a state or local government agency shall, from the date of his or her election to office through the date that he or she vacates office, receive a personal loan from any person who has a contract with the state or local government agency to which that elected officer has been elected or over which that elected officer's agency has direction and control. This subdivision shall not apply to loans made by banks or other financial institutions or to any indebtedness created as part of a retail installment or credit card transaction, if the loan is made or the indebtedness created in the lender's regular course of business on terms available to members of the public without regard to the elected officer's official status.

(D) No public official who is exempt from the state civil service system pursuant to subdivisions (c), (d), (e), (f), and (g) of Section 4 of Article VII of the Constitution shall, while he or she holds office, receive a personal loan from any person who has a contract with the state or local government agency to which that elected officer has been elected or over which that elected officer's agency has direction and control. This subdivision shall not apply to loans made by banks or other financial institutions or to any indebtedness created as part of a retail installment or credit card transaction, if the loan is made or the indebtedness created in the lender's regular course of business on terms available to members of the public without regard to the elected officer's official status. This subdivision shall not apply to loans made to a public official whose duties are solely secretarial, clerical, or manual.-

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(E) This section shall not apply to the following:

1. Loans made to the campaign committee of an elected officer or candidate for elective office.

2. Loans made by a public official's spouse, child, parent, grandparent, grandchild, brother, sister, parent-in-law, brother-in-law, sister-in-law, nephew, niece, aunt, uncle, or first cousin, or the spouse of any such persons, provided that the person making the loan is not acting as an agent or intermediary for any person not otherwise exempted under this section.

3. Loans from a person which, in the aggregate, do not exceed \$500 at any given time.

4. Loans made, or offered in writing, before January 1, 1998.

(8.3) Loan Terms.

(A) Except as set forth in subdivision (B), no elected officer of a state or local government agency shall, from the date of his or her election to office through the date he or she vacates office, receive a personal loan of \$ 500 or more, except when the loan is in writing and clearly states the terms of the loan, including the parties to the loan agreement, date of the loan, amount of the loan, term of the loan, date or dates when payments shall be due on the loan and the amount of the payments, and the rate of interest paid on the loan.

(B) This section shall not apply to the following types of loans:

1. Loans made to the campaign committee of the elected officer.

2. Loans made to the elected officer by his or her spouse, child, parent, grandparent, grandchild, brother, sister, parent-in-law, brother-in-law, sister-in-law, nephew, niece, aunt, uncle, or first

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cousin, or the spouse of any such person, provided that the person making the loan is not acting as an agent or intermediary for any person not otherwise exempted under this section.

3. Loans made, or offered in writing, before January 1, 1998.

© Nothing in this section shall exempt any person from any other provision of Title 9 of the Government Code.-

(8.4) Personal Loans.

(A) Except as set forth in subdivision (B), a personal loan received by any designated employee shall become a gift to the designated employee for the purposes of this section in the following circumstances:-

1. If the loan has a defined date or dates for repayment, when the statute of limitations for filing an action for default has expired.

2. If the loan has no defined date or dates for repayment, when one year has elapsed from the later of the following:

a. The date the loan was made.

b. The date the last payment of \$100 or more was made on the loan.

c. The date upon which the debtor has made payments on the loan aggregating to less than \$ 250 during the previous 12 months.

(B) This section shall not apply to the following types of loans:

1. A loan made to the campaign committee of an elected officer or a candidate for elective office.

2. A loan that would otherwise not be a gift as defined in this title.

3. A loan that would otherwise be a gift as set forth under subdivision

(A), but on which the creditor has taken reasonable action to collect the balance due.

4. A loan that would otherwise be a gift as set forth under subdivision (A), but on which the creditor, based on reasonable business considerations, has not undertaken collection action. Except in a criminal action, a creditor who claims that a loan is not a gift on the basis of this paragraph has the burden of proving that the decision for not taking collection action was based on reasonable business considerations.-

5. A loan made to a debtor who has filed for bankruptcy and the loan is ultimately discharged in bankruptcy.-

(C) Nothing in this section shall exempt any person from any other provisions of Title 9 of the Government Code.

(9) Disqualification.

No designated employee shall make, participate in making, or in any way attempt to use his or her official position to influence the making of any governmental decision which he or she knows or has reason to know will have a reasonably foreseeable material financial effect, distinguishable from its effect on the public generally, on the official or a member of his or her immediate family or on:-

(A) Any business entity in which the designated employee has a direct or indirect investment worth \$ 2,000 or more;-

(B) Any real property in which the designated employee has a direct or indirect interest worth \$ 2,000 or more;-

(C) Any source of income, other than gifts and other than loans by a commercial lending institution in the regular course of business on terms

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available to the public without regard to official status, aggregating \$ 500 or more in value provided to, received by or promised to the designated employee within 12 months prior to the time when the decision is made;

(D) Any business entity in which the designated employee is a director, officer, partner, trustee, employee, or holds any position of management; or-

(E) Any donor of, or any intermediary or agent for a donor of, a gift or gifts aggregating \$460 or more provided to, received by, or promised to the designated employee within 12 months prior to the time when the decision is made.-

(9.3) Legally Required Participation.

No designated employee shall be prevented from making or participating in the making of any decision to the extent his or her participation is legally required for the decision to be made. The fact that the vote of a designated employee who is on a voting body is needed to break a tie does not make his or her participation legally required for purposes of this section.

(9.5) Disqualification of State Officers and Employees.

In addition to the general disqualification provisions of section 9, no state administrative official shall make, participate in making, or use his or her official position to influence any governmental decision directly relating to any contract where the state administrative official knows or has reason to know that any party to the contract is a person with whom the state administrative official, or any member of his or her immediate family has, within 12 months prior to the time when the official action is to be taken:

(A) Engaged in a business transaction or transactions on terms not available to members of the public, regarding any investment or interest in

real property; or-

(B) Engaged in a business transaction or transactions on terms not available to members of the public regarding the rendering of goods or services totaling in value \$1,000 or more.-

(10) Disclosure of Disqualifying Interest.

When a designated employee determines that he or she should not make a governmental decision because he or she has a disqualifying interest in it, the determination not to act may be accompanied by disclosure of the disqualifying interest.

(11) Assistance of the Commission and Counsel.

Any designated employee who is unsure of his or her duties under this code may request assistance from the Fair Political Practices Commission pursuant to Section 83114 and Regulations 18329 and 18329.5 or from the attorney for his or her agency, provided that nothing in this section requires the attorney for the agency to issue any formal or informal opinion.

(12) Violations.

This code has the force and effect of law. Designated employees violating any provision of this code are subject to the administrative, criminal and civil sanctions provided in the Political Reform Act, Sections 81000=91014. In addition, a decision in relation to which a violation of the disqualification provisions of this code or of Section 87100 or 87450 has occurred may be set aside as void pursuant to Section 91003.

NOTES

⁽¹⁾ Designated employees who are required to file statements of economic interests under any other agency's conflict of interest code, or under article 2 for a different jurisdiction, may expand their statement of economic interests to cover reportable interests in both jurisdictions, and file copies of this expanded statement with both entities in lieu of filing

separate and distinct statements, provided that each copy of such expanded statement filed in place of an original is signed and verified by the designated employee as if it were an original. See Section 81004.-

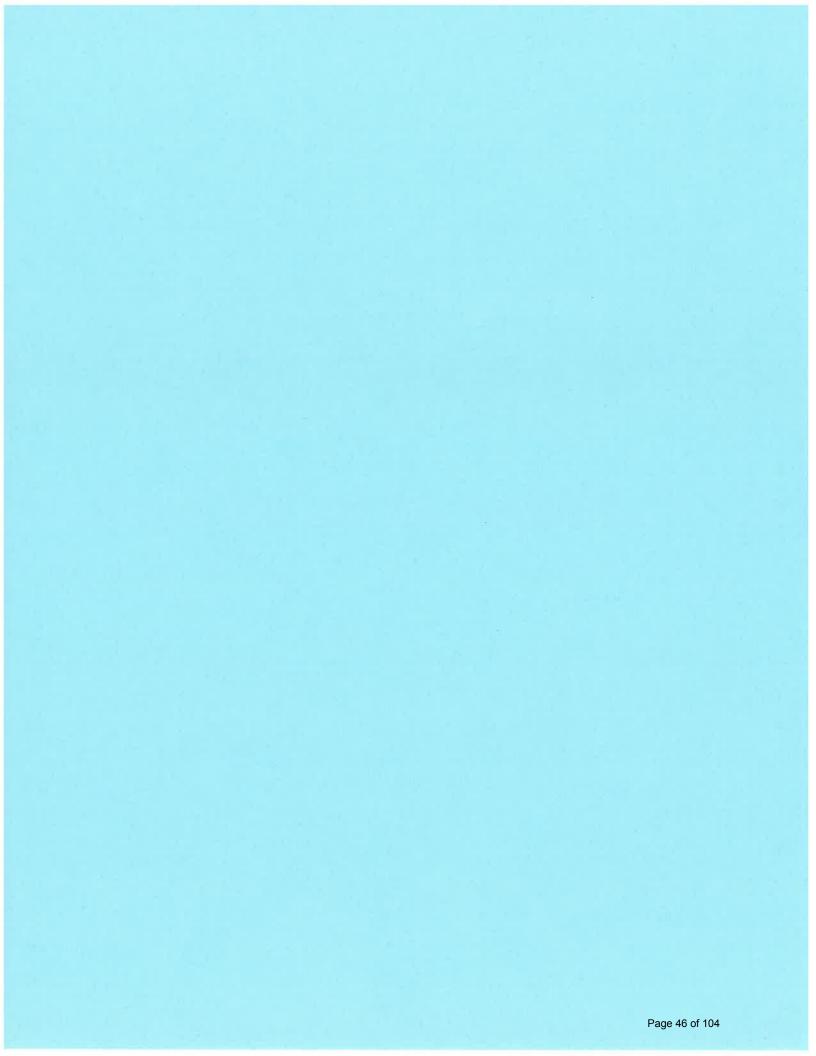
[2] See Section 81010 and Regulation 18115 for the duties of filing officers and persons in agencies who make and retain copies of statements and forward the originals to the filing officer.-

[3] For the purpose of disclosure only (not disqualification), an interest in real property does not include the principal residence of the filer.-

[4] Investments and interests in real property which have a fair market value of less than \$5 2,000 are not investments and interests in real property within the meaning of the Political Reform Act. However, investments or interests in real property of an individual include those held by the individual's spouse and dependent children as well as a pro rata share of any investment or interest in real property of any business entity or trust in which the individual, spouse and dependent children own, in the aggregate, a direct, indirect or beneficial interest of 10 percent or greater.-

[5] A designated employee's income includes his or her community property interest in the income of his or her spouse but does not include salary or reimbursement for expenses received from a state, local or federal government agency.-

(6) Income of a business entity is reportable if the direct, indirect or beneficial interest of the filer and the filer's spouse in the business entity aggregates a 10 percent or greater interest. In addition, the disclosure of persons who are clients or customers of a business entity is required only if the clients or customers are within one of the disclosure categories of the filer.



PROFESSIONAL SERVICES AGREEMENT

This Professional Services Agreement (Agreement) is entered into by and between Fallbrook Healthcare District (District), a public agency organized and operating pursuant to California Health and Safety Code sections 32000 et seq., and Roy Moosa, as follows,

R-E-C-I-T-A-L-S

1. The District requires the professional services of a consultant to assist in analyzing applicable zoning and land use regulations applicable to commercial real estate in the Fallbrook community, with a view toward identifying prospective locations for future healthcare and related services within the community, on a case-by-case basis;

2. Consultant is a real estate broker with substantial real estate marketing and planning experience within the community, and has represented to District that he is qualified and possesses the knowledge, skill, expertise, and other resources necessary to provide the professional services ("Services") outlined in Schedule A, attached hereto, that it is fully acquainted with the scope of services required, and that the Services described in Schedule A adequately and completely define the scope of the services to be provided; and,

3. The District has relied on Consultant's representations in selecting Consultant to perform the Services, and Consultant desires to provide District with such Services, in accordance with the terms and conditions of this Agreement.

C-O-V-E-N-A-N-T-S

1. CONSULTANT'S SERVICES AND SCHEDULE

1.1 Services. Consultant shall provide all labor, materials, equipment, and incidental and customary work necessary to fully and adequately provide District with professional services as required to complete the Services more fully described in the attached hereto Schedule A and incorporated herein by this reference. Consultant shall provide District with such Services in accordance with the terms and conditions of this Agreement. All Services shall be performed by Consultant to the reasonable satisfaction of District. Services shall be specifically requested by the District in writing, on a case by case or individual project basis.

1.2 <u>Personnel</u>. Consultant shall assign adequate and competent personnel as necessary and appropriate for the skillful, competent and timely performance of the Services. Consultant shall ensure that all staff are fully equipped and in possession of all licenses, certificates, permits, qualifications, or approvals of whatever nature required by any governmental agency having jurisdiction for the lawful performance of the portion of the Services to which they are assigned. Consultant warrants that neither it nor any of its employees performing any of the Services are disqualified by the District or debarred by any governmental agency from providing the Services. 1.3 <u>Nondiscrimination</u>. In performing under this Agreement the Consultant will not discriminate against any worker, employee, applicant for employment, or any member of the public, because of race, religion, national origin, ancestry, sex, age, sexual orientation, disability, marital status, domestic partner status, or medical condition, or otherwise commit an unfair labor practice. Consultant's actions of non-discrimination shall include, without limitation, all activities related to initial employment, upgrading or promotion, demotion, transfer, recruitment or recruitment advertizing, layoff, or termination.

1.4 Additional Services. "Additional Services" shall mean those additional professional services which are not described as a part of the Services as set forth in Schedule A of this Agreement, and which are requested by District in writing. Once District has authorized Additional Services, such Additional Services shall be treated in the same manner as if they were Services, except that District shall pay compensation to Consultant for such Additional Services in accordance with Paragraph 2.2 and Consultant shall submit invoices therefore in accordance with Paragraph 2.3. Additional Services shall not be performed by Consultant and no compensation shall be payable by District to Consultant for Additional Services, except to the extent such Additional Services are first authorized or directed by District in writing.

1.5 <u>Records and Audit</u>. Consultant shall maintain accurate and complete accounting records of expenditures, costs and time incurred by the Consultant in connection with the Services. Such records will be maintained in accordance with recognized commercial accounting practices. In addition, Consultant shall maintain complete and accurate records of its performance under this Agreement. District may audit such records at Consultant's offices upon reasonable notice during normal business hours. Apart from Deliverables, the District shall pay the cost of any prints or copies of such documents that are requested. All subcontracts entered into by Consultant with Subconsultants, and all sub-subconsultants of every tier, shall contain sufficient provisions giving effect to this Paragraph 1.5.

1.6 <u>Compliance with Laws</u>. In performing the Services, Consultant shall, and shall require its subconsultants, if any, to at all times comply with all applicable laws, rules, regulations, codes, ordinances, and orders of every kind whatsoever issued, adopted, or enacted by any federal, state, or local governmental body having jurisdiction over the the Services.

1.7 <u>Performance Standard</u>. Consultant shall perform the Services with efficiency and diligence and shall execute the Services in a skillful, competent and thorough manner, in accordance with the standards of Consultant's profession, generally described as that degree of skill and care ordinarily exercised by practicing professionals performing services of a scope, purpose, magnitude, and location comparable with the Services to be provided under this Agreement.

1.8 <u>District's Representative.</u> District's Representative. For purposes of the Agreement, the District's Representative shall be the District's Executive Director, Bobbi Palmer, located at 138 S. Brandon Road, Fallbrook, CA 92028. All Supplemental

Service Agreements or other amendments to this Agreement shall be approved and signed by the District's Representative.

2. FEES AND PAYMENTS.

2.1 <u>Compensation for Services</u>. For the full and satisfactory performance of the Services, District shall compensate Consultant on an hourly basis at a rate of \$150.00 per hour, to be billed in increments of one-quarter hour. Prior to the commencement of work, Consultant shall provide District with a good faith estimate of the number of hours anticipated to be spent on researching a particular parcel, within five (5) business days of receiving District's request for services. Consultant shall not commence work on a particular assignment without first receiving written authorization from the District Representative, after a review of consultant's good faith estimate. Any and all third party costs will be submitted to District for approval prior to incurring any such costs.

2.2 <u>Invoices</u>. Consultant shall deliver an invoice to District no later than the 10th day of each month for Services and any authorized Additional Services provided for the prior calendar month.

(a) For Services performed by Consultant on a time and materials basis or for which compensation is otherwise payable by District on an hourly basis, such as for any Additional Services, and for any Reimbursable Expenses, if any, the invoices shall identify the amount to be paid and contain a detailed itemization of the Services and/or Additional Services performed for each phase of Services identified. Such detailed itemization shall include a breakdown of the Services or Additional Services performed by each of Consultant's employees. All invoices shall include Consultant's signed certification stating, to the best of Consultant's knowledge, information, and belief, that the information in the invoice is accurate and complete.

(b) If District reasonably determines that Consultant's invoice lacks sufficient information, it shall be returned to Consultant, but in no event later than seven (7) days after receipt, accompanied by a written statement setting forth the basis for the District's determination.

2.3 <u>Payment.</u> The District shall remit payment for all amounts due to Consultant within thirty (30) days after receipt of invoices; provided, however, in the event District disputes any portion of Consultant's invoice, it shall timely pay any undisputed amounts invoiced and notify Consultant within thirty (30) days of its receipt of the invoice of the specifics of any disputed amounts. The parties shall expeditiously resolve the subject of any disputed amounts by way of negotiation or, if necessary, mediation. Any such dispute shall not relieve Consultant of its obligation to continue diligently performing the Services.

3. TERM. The term of this Agreement shall run from the date this Agreement is fully executed until June 30, 2017, subject to District's right to sooner terminate or suspend this Agreement as provided in this Agreement.

3.1. Termination for Convenience. District may at any time, in the exercise of its sole discretion, terminate this Agreement in whole or in part, with or without cause, by providing notice to Consultant of its intention to terminate the Agreement for convenience at least ten (10) days before the effective date of termination. So long as the Consultant is not in default under this Agreement at the time of such termination, District shall make an equitable adjustment to the compensation due Consultant taking into account the following:

(a) All compensation and reasonable expenses due to Consultant for Services

and any Additional Services performed up to the effective date of termination; (b) Consultant's actual and reasonable costs of termination;

(c) The amount of any advance payments made by District to Consultant;

(d) Any amounts owing by Consultant to District under the terms of this Agreement; and,

(e) No amount shall be payable by District for the Consultant's anticipated profit on the value of Services or any authorized Additional Services not performed by Consultant, or for any loss, cost, damage, or consequential damages which Consultant or any other party may sustain by reason of or in connection with District's termination of this Agreement.

Consultant hereby expressly waives any and all claims for damages and/or compensation arising under this Paragraph 3.1, except as set forth herein, in the event of such termination.

3.2 Termination for Cause. An Event of Default by Consultant shall be deemed to have occurred when there is: (a) a failure, neglect, or refusal on the part of Consultant to duly observe or perform any obligation or duty required under this Agreement, which failure, neglect, or refusal continues for a period of ten (10) days (or such longer period as District in its sole discretion may determine if such failure is not capable of being cured within such ten (10) day period) after the date on which written notice of the same has been delivered to Consultant by District, and/or (b) any representation or warranty of Consultant set forth in this Agreement or otherwise delivered pursuant to the Agreement will have been false in any material respect when so made or furnished to District. If an Event of Default occurs, then District may exercise any right, power or remedy available to it under this Agreement, law or in equity and has, in particular, without limiting the generality of the foregoing, the right to terminate this Agreement upon written notice to Consultant, in which event District has no further obligations hereunder or liability to Consultant except as to payment for Services actually received and accepted by District through the effective date of termination, subject to set off of any claims of District against Consultant for failure to perform the Services in accordance with this Agreement.

3.3 Continuing Responsibility. Termination of this Agreement, in whole or in part, as provided in Paragraphs 3.1, or 3.2, or in any other manner provided under this Agreement, does not relieve Consultant from liability for its performance of any obligation or Services under this Agreement that was performed or was to have been performed by Consultant on or before the effective date of such termination. In no event will District be liable to the Consultant in any amount for Services or any authorized Additional Services not performed by Consultant, for the Consultant's anticipated profit on the value of the Services or any authorized Additional Services not performed by the Consultant, or for any

loss, cost or damage, including consequential damages which Consultant, its Subcontractor, or any other party may sustain by reason of or in connection with District's termination of this Agreement.

4. INDEPENDENT CONTRACTOR. District has retained Consultant to provide, and Consultant shall perform, the Services as an independent contractor maintaining exclusive direction and control over its employees; and, no personnel utilized by Consultant to perform the Services are employees of District.

5. OWNERSHIP OF DOCUMENTS. All Deliverables and other documents generated by Consultant in the performance of the Services, including all work papers, work-in-progress, designs, documents, data, studies and reports prepared by Consultant as a part of the Services or authorized Additional Services (Consultant Work Product) shall belong to and be subject to the sole ownership and use of District. The provisions of this Paragraph 6 shall survive any termination of this Agreement.

6. CONSULTANT LIABILITY. Should Consultant fail to perform any of its obligations under this Agreement, or otherwise fail to complete the Services within the time prescribed by this Agreement, the Consultant shall be liable to District for the actual damages incurred.

7. **INSURANCE.** Consultant shall procure and maintain in force, at its sole cost and expense, and at all times during the performance of the Services, policies of insurance providing coverage in the amounts and types set forth below, insuring against claims which may arise out of or in connection with this Agreement and/or Consultant's performance of the Services. Consultant shall, upon request from the District, provide such certificates of Insurance or other satisfactory evidence that such policies have been procured and are in effect, and Consultant agrees to promptly notify District of any material changes in the coverages listed below, including without limitation changes in policy limits, changes or non-renewals of coverage, and any replacement carriers. Promptly shall mean not less than ten (10) days prior to the effective date of any material change in the coverages listed below.

7.1 Commercial General Liability Insurance with coverage limits of not less than One Million Dollars (\$1,000,000.00) combined single limit per occurrence for contractual insurance, broad form liability, property damage, independent consultants, and personal injury (including advertising liability).

7.2 Automobile Liability Insurance providing coverage for vehicles used in connection with the performance of this Agreement, whether owned, hired, leased, or borrowed with limits not less than Three Hundred Thousand per injured person, Five Hundred Thousand per injury accident (\$300,000/\$500,000) for bodily injury and \$100,000 for property damage coverage.

8. INDEMNIFICATION. Consultant agrees to indemnify and hold the District, its governing body, officers, employees, representatives, agents, successors and assigns (collectively the District Indemnities), harmless from and against any and all losses, liabilities, claims, causes of action or proceedings in any court or administrative forum, judgments, penalties, costs and expenses of whatever nature or kind, in law or equity (Indemnity Claims), incurred or suffered by the District Indemnities, or any of them, including Indemnity Claims arising by reason of any personal injury (including, without limitation, disease or death) of any person or property loss, loss of use, or damage, to the extent the same arise out of or in connection with the negligent act(s) or omission(s), recklessness, or willful misconduct of Consultant, its officers, employees, subcontractors, representatives, agents, successors or assigns on, in, or about the performance of this Agreement. District shall promptly notify Consultant of its receipt of any claim made against the District by a third party relevant to this Paragraph 9 and/or this Agreement.

9. NOTICE. All notices to be given under this Agreement shall be in writing and shall be deemed effective upon receipt when personally served or two days after mailing by certified, return receipt requested, to the following addresses:

To: District Fallbrook Healthcare District Attention: Bobbi Palmer, Executive Director 138 S. Brandon Road Fallbrook, California 92028

> To: Consultant Roy Moosa, 431 South Main Avenue Fallbrook, CA 92028

10. CONFIDENTIAL INFORMATION. During the course of the performance of this Agreement, Consultant may receive written or verbal information from District, its representatives or agents, not in the public domain. Such information may include District's know how, trade secrets, and other proprietary and confidential information and Consultant agrees to treat such information as confidential information belonging to District. Consultant agrees that neither it, nor its officers, employees, representatives, agents, successors, or assigns will disclose such information to any third party or use the same in any manner without the prior written consent of District. Moreover, Consultant agrees to safeguard such proprietary and confidential information from unauthorized disclosure and/or use using the same degree of care it uses to protect its own proprietary and confidential information, but not less than a reasonable standard of care.

11. CONSEQUENTIAL DAMAGES. In no event shall either party or its contractors, subcontractors, or representatives be liable in contract, tort, strict liability, warranty, or otherwise, for any special, indirect, incidental, or consequential damages, such as, but not limited to, loss of product, loss of anticipated profits or revenue, loss of use of equipment or system, non-operation or increase expense of operation of other equipment or systems, or cost of capital.

12. MISCELLANEOUS PROVISIONS.

12.1 <u>Venue</u>. Venue shall lie only in the federal or state courts in the County of San Diego, State of California.

12.2 <u>Modification</u>. This Agreement may not be altered in whole or in part except by a modification, in writing, executed by all the parties to this Agreement.

12.3 <u>Entire Agreement</u>. This Agreement, together with all Schedules attached, contains all representations and the entire understanding between the parties with respect to the subject matter of this Agreement. Any prior correspondence, memoranda, or agreements, whether or not such correspondence, memoranda, or agreements are in conflict with this Agreement, are intended to be replaced in total by this Agreement and its Schedules.

12.4 <u>Assignment</u>. Consultant shall not be entitled to assign all or any portion of its rights or obligations contained in this Agreement without obtaining the prior written consent of the District. Nothing in this Agreement shall obligate the District to give such consent. Any purported assignment without the District's consent shall be void.

12.5 <u>Binding Effect</u>. This Agreement shall inure to the benefit of and be binding upon the parties and their respective purchasers, successors, heirs, and assigns.

12.6 <u>Unenforceable Provisions</u>. The terms, conditions, and covenants of this Agreement shall be construed whenever possible as consistent with all applicable laws and regulations. To the extent that any provision of this Agreement, as so interpreted, is held to violate any applicable law or regulation, the remaining provisions shall nevertheless be carried into full force and effect and remain enforceable.

This Agreement is entered into in San Diego County, California.

Fallbrook Healthcare District

Consultant

By:

By: _____

Bobbi Palmer, Executive Director

Dated:

Dated: _____

SCHEDULE A

Services to be Provided

- 1. <u>Research applicable Zoning for specifically identified real property to</u> <u>ensure compatibility with desired or prospective healthcare or related</u> <u>services usage on an as-needed basis.</u>
- 2. <u>Provide input and coordination with any efforts to seek or pursue</u> variance or Conditional Use permits on an as needed basis.
- 3. Assist with property valuation or negotiations if/where applicable.
- 4. <u>Such other "additional services" as discussed and mutually agreed</u> <u>upon.</u>

REPORTS

REPORTS Executive Director – Bobbi Palmer

To: Board of Directors Fallbrook Regional Health District From: Bobbi Palmer, MBA, MSW Executive Director Date: April 6, 2017 Re: Monthly Report

Community Health: Call-to-Activity, Wellness One Step at a Time

3rd Wellness Walk Friday April 7th facilitated by Erica Williams and held at the Grand Tradition. The first 100 walkers received a pedometer along with a "healthy eating/healthy cooking recipe book." A drawing was held for one walker to receive a one year walking pass at the beautiful Fallbrook Grand Tradition. This monthly event was advertised at Major Market as well as on the District's website, <u>www.fallbrookhealth.org</u>.

Town Hall Meetings: Scheduled for Wednesday April 12th and Wednesday May 10th.

"Public Outreach and keeping the public informed about what you do and asking them for guidance on how you're doing is a fundamental responsibility for any public agency." Fallbrook Regional Health District got the message out by forming an Advisory Committee in 2016 and conducting informal talks an hour before monthly board meetings. Advertisements were placed in the Village News; a press release was drafted, flyers were distributed as well as a link provided by the Fallbrook Health Directory and placed on <u>www.fallbrookhealth.org</u>. Legislators were also invited.

<u>California Special Districts Association; Grassroots Advocacy Guide, (CSDA) and</u> <u>Association of California Healthcare Districts; (ACHD).</u>

Community Collaborative for Health and Wellness, CCH&W

At the March 20th monthly meeting I presented information related to "Creating Healthier Generations, A look at the 10 years of the Federal Routes to School Program; **Safe Routes.** A U Tube Video was viewed showing a clip by Ann Wade and interviewed by Executive Director Palmer. The School Community has begun taking walks to capture both safe and unsafe walking areas. **Please see attached photos**. Community engagement regarding this issue seems to be a "hot issue" in the Fallbrook Regional Health District area. Parent, administrator surveys are being distributed as well as legislative advocacy to address concerns.

<u>Woman of Wellness: WOW</u> featured Rachel Mason, MS, MA Executive Director of Foundation for Senior Care and James Beebe, Fire Prevention Specialist from North County Fire Protection District.MW, MA entitled "Remembering When, A Fire & Fall Prevention Program".

REPORTS Legislative Communication





March 2017

ACHD Advocate

In this edition

- Legislative Update
- <u>Call For Delegates</u>
- <u>Request for Electronic Consent Forms</u>
- <u>Apply Today to Serve on an ACHD Committee</u>
- <u>Membership Drives Change</u>
- In Case You Missed it... Healthcare District News From Around the State
- <u>Thank You For Attending Legislative Day</u>
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- <u>Register Today for CSDA's Legislative Days</u>
- <u>Budget Update</u>
- Join CAPP Today!
- <u>100 Million Healthier Lives</u>

Legislative Update

Local Government Hearing

As you know, the Assembly Local Government Committee held an oversight hearing on Healthcare Districts on March 8. Based on that hearing, the Chair, Assemblymember Cecilia Aguiar-Curry, has introduced a committee bill, <u>AB 1728</u>, that would require Healthcare Districts to:

- 1. Create and maintain a website, which must include contact information for the District
- 2. Annually adopt a budget
- 3. Annually adopt policies for providing assistance or grant funding to ensure funding is spent on health care services consistent with the mission and purpose of the District.

ACHD's Advocacy Committee took a support position on AB 1728 earlier this week. While we support the transparency and good governance practiced this bill requires, we are also working with the ACHD Working Group on a more comprehensive re-write of the Healthcare District Enabling Act. Stay tuned for updates on the progress of the Working Group.

Little Hoover Commission

As previously reported, the Little Hoover Commission decided not to table the draft report on special districts for the time being, as many Commissioners voiced concern about special district generally and support for broader reforms. The Commission will be holding a follow-up hearing/meeting at an undetermined date. ACHD will keep you updated on the future hearing/meeting details.

Legislative Update

The Legislature has started hearing bills in policy committees. <u>Here are a few key bills</u> that ACHD has an active position on. For more bills, ACHD has a position on, find our Legislative Reports on our website, <u>here</u>.

Budget Update

The Legislature continues to work through the review process for the Budget. As reported last month, ACHD has taken positions on four budget proposals, below. Please note that the Senate has not yet taken up any of these items.

Budget Issue	Assembly Action
Health Care Workforce Recruitment Legislation (AB 2024) Budget Change Proposal	Assembly Budget Subcommittee #1: 2/27/17
Position: SUPPORT	APPROVED
Skilled Nursing Facilities' Nurse Staffing Ratios	Assembly Budget Subcommittee #1:
Position: OPPOSE	3/27/17
	NO ACTION
Proposition 56 Funding for UC (Graduate Medical Education)	Assembly Budget Subcommittee #2:
Position: OPPOSE (supplanting existing UC funding with	3/29/17
Proposition 56 funds intended for enhanced graduate medical education)	NO ACTION
Elimination of \$100 million (over 3 years) in funding for Song-	Assembly Budget
Brown Program (new primary care residencies)	Subcommittee #1:
	2/27/17
Position: OPPOSE	REJECTED

Please contact Amber King at (916) 266-5207 with questions or comments.

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Call For Delegates

Based upon the ACHD Board of Director's strategic planning and the recently completed merger of the ALPHA Fund and BETArma, the Board has undertaken a comprehensive review of the Association Bylaws. As a result of their review, the Board will be recommending to the ACHD Members newly Amended and Restated Association Bylaws for approval by the Member Healthcare Districts, accordingly. Over the next few days, Members will be receiving further information specific to the recommended Bylaws, including the next steps in the review and membership approval process.

In order to prepare for the election to approve the Amended and Restated Association Bylaws, ACHD requests that Member Healthcare Districts appoint one delegate and one alternate delegate to represent your Healthcare District. All delegates must be District Trustees. However, alternate delegates may be District Trustees, Administrators, or Chief Executive Officers. Please complete <u>this form</u> no later than **Friday, April 14, 2017**. We appreciate your prompt attention to this matter.

Staff will provide Members with a separate email pertaining to election materials, logistics and a hosted webinar to inform the membership of the proposed changes to the bylaws. Contact <u>Ken Cohen</u> or <u>Sheila Johnston</u> with any questions or concerns.

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Request for Electronic Consent Forms

In order to comply with current law, we require your consent to send you electronic communication. At your convenience, please review and return the electronic consent form to me by email or fax. You may fax the form to 916.266.5201 or send by email. Access the consent form <u>here</u>.

Please contact Sheila Johnston with any questions.

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Apply Today to Serve on an ACHD Committee

The Governance Committee has started the process of constituting Board Committees for 2017-18. Member District Trustees and Executives who have an interest in being considered for a committee assignment are requested to register their interest by completing this form, along with a brief statement of why they are interested in the committee, to <u>Sheila Johnston</u> by Friday, June 16, 2017.

All committees meet in person at least twice annually and at various other times by conference call. In-person meetings generally meet in Sacramento, however, locations may vary. The commitment is for one year and committees generally meet between 3 and 5 times per year.

Those who wish to continue serving on a committee must re-submit their interest forms.

To submit your interest form, please click here.

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Membership Drives Change



ACHD Members are leading a transformation of our association to meet the unique needs of Healthcare Districts in today's challenging health care environment.

Our new "Membership Drives Change" newsletter highlights the services and support ACHD offers that empower Districts to drive change in their communities.

Member Engagement Matters

- ACHD's Governance Committee members are reviewing the Association's Bylaws and will soon propose an updated structure with the ALPHA Fund/BETA Merger. The Bylaws Review was a directive from the Board of Directors at the October Board Retreat. The proposed changes will allow the Association to increase member engagement and align with Corporations Code.
- ACHD staff is working with our committees to promote robust member engagement by transitioning our Committee calls from a conference call system to webinars. Thank you to our Education Committee for trying out this new technology!
- ACHD's Education Committee is putting the final touches on the 65th Annual Meeting and planning for our 2018 Leadership Academy! This year, our Committee is excited to introduce a Women's Leadership Breakfast and enhanced Wellness activities planned throughout the conference. We also have almost all speakers confirmed for our Conference and will be opening registration for our Annual Meeting soon.
- ACHD's Finance Committee began the process of reviewing the budget for our 2018 Fiscal Year including membership rates.

Leadership for a New Era

A record-setting 115 Healthcare District Trustees, Executives and Staff attended this year's leadership Academy on February 2-3, 2017. Feedback from members on this year's academy was overwhelmingly positive. Members reported the strategies they learned will enable them to be more effective leaders in their Districts and within the Association. <u>This video</u> produced by ACHD staff recaps members' experience at this rewarding and worthwhile event.

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In Case You Missed It... Healthcare District News from Around the State



Pioneers Memorial Hospital District Hosts First Of Three Town Hall Meetings

The City of Brawley's Council Chambers held a special Town Hall meeting hosted by the Pioneers Memorial Healthcare District last week on the topic of "Improving Healthcare In Imperial County." <u>Click here</u> to read the full article.

Petaluma Health Care District wins Community Philanthropy Award

During the 2015-2016 fiscal year, PHCD provided \$280,000 in charitable funds, sponsorships and in-kind technical support to 33 Southern Sonoma County nonprofits, such as the Boys and Girls Club, Mentor Me, North Bay Children's Center, Petaluma Educational Foundation, United Way of the Wine Country Schools of Hope, COTS, PEP House and Mother's Care. <u>Click here</u> to read the full article.

Mass shooting drill in Cloverdale real enough for participants

"It's sad we have to practice this," said Tom Hinrichs, chief executive operator of the Cloverdale Health Care District, which provides ambulance services for an 85-square-mile area. "But these things can happen in little towns." <u>Click here</u> to read the full article.

Colette Menzel Named Chief Financial Officer at Antelope Valley Hospital

Colette Menzel, Ph.D., has been named chief financial officer of Antelope Valley Hospital (AVH), effective immediately. She replaces former CFO Paul Brydon who came out of retirement in early January to serve in an interim capacity while the search for a permanent CFO was taking place. Read the full press release here.

Grossmont Healthcare District awards 39 scholarships

GHD awarded \$88,500 in scholarships to 39 high school students who have expressed interest in a career as a healthcare professional. <u>Click here</u> to read the full article.

Palomar Medical Center Escondido staff donates \$50K for hospital expansion

The medical staff at Palomar Medical Center Escondido donated \$50,000 to help fund the expansion of the hospital's Emergency Department. The hospital is starting the build-out of "Pod D," the newest addition to the Emergency Department, which last year served more than 92,000 area residents yearly. <u>Click here</u> to read the full article.

Mercy partners with Tahoe Forest Health System for Epic implementation

Mercy Technology Services, the IT arm of the Catholic health system, is partnering with Tahoe Forest Health System to deploy an Epic electronic health record system at its locations in California and Nevada. <u>Click here</u> to read the full article.

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Thank You for Attending Legislative Day



Thank you to everyone who attended 2017 Legislative Day in Sacramento! Your attendance made this year's Legislative Day a great success and your enthusiasm and positive spirit made our event memorable.

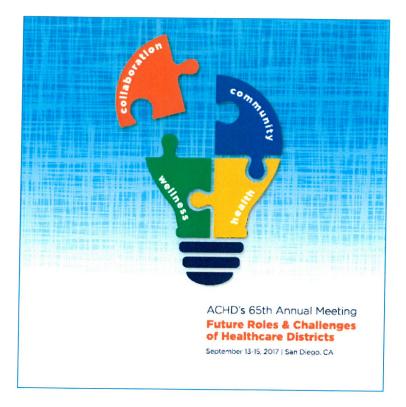
Please help us continue to improve our Legislative Day event by completing a <u>brief survey</u>. Your input will help us make next year's event a success.

Legislative Day is designed to provide opportunities to interact with your colleagues from Healthcare Districts, understand current legislative and regulatory issues facing Healthcare Districts and foster relationships with your statewide elected officials. We hope you will continue to use these relationships to advocate for legislative issues moving forward.

Please contact Amber King with any questions.

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SAVE THE DATE: ACHD's 65th Annual Meeting



As the state of health care continues to evolve and the pace of change continues to increase, we wonder: how will our important Member Districts evolve to meet the challenges ahead and continue to serve their communities? ACHD's Annual Meeting will provide opportunities to hear different perspectives on a wide variety of topics, ranging from effective governance to advancing the health in your communities, while providing opportunities to share your experience and views with your Healthcare District colleagues.

When: September 13-15, 2017

Where: Kona Kai Resort and Spa, 1551 Shelter Island Drive, San Diego, CA 92106

Session	Speaker
General Session: Welcome Luncheon	Gyre Renwick, Lyft
Breakout Session: Lessons Learned from Recent MSR Process	Linda Wagner, Seneca Healthcare District Cheryl Fama, Peninsula Healthcare District Richard Berkson, Berkson Associates Mark Bramfitt, Sonoma County LAFCo Moderator: Ted Owens, Tahoe Forest Health System
Breakout Session: The Board and Policy-making: Getting Clear on the Roles	Brent Ives, BHI Consulting
General Session: State of the Association	Julie Nygaard, Board Chair, ACHD Ken Cohen, Executive Director, ACHD Amber King, Senior Legislative Advocate, ACHD Sheila Johnston, Member Services, ACHD
General Session: Covered California: Adapting for the Future	Speaker TBD
Luncheon General Session: Website	Bobbi Palmer, Fallbrook Regional Health

Session topics and speakers include:

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Compliance	District Sloane Dell'Orto, Getstreamlined
BETA Eminent Lecturer Sponsored Speaker: Compose Your World	Kai Kight
Breakout Session: Strategic Thinking: Board Action Plan	Robert Nelson, Nelson Strategic Consulting
Breakout Session: The State of Behavioral Health in California	Sheree Low, MPA, VP Behavioral Health, California Hospital Association

Stay tuned for more information! Please contact Sheila Johnston with questions.

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Register Today for CSDA's Legislative Days

You are cordially invited to Special Districts Legislative Days

May 16-17, 2017, at the Grand Events Center in Sacramento Register Online Today

A dynamic two-day conference, Special Districts Legislative Days (Legislative Days) provides attendees with the opportunity to hear from and interact with statewide policymakers and legislators, as well as to network and discuss district challenges with local and state elected officials. Legislative Days includes keynote addresses from California's highest office-holders, including Pedro Nava, Chair of The Little Hoover Commission, as well as moderated panel discussions with the state's leading experts covering the most pertinent issues facing each type of special district.

Register online today to attend Legislative Days.

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Join CAPP Today!



The Association of California Healthcare Districts (ACHD) is a member of Californians Allied for Patient Protection (CAPP), the coalition created to protect access to health care through California's Medical Injury Compensation Reform Act (MICRA). ACHD continues to strongly support the preservation of MICRA.

In 2014, California voters definitively rejected Proposition 46, an attempt by the trial lawyers to quadruple MICRA's non-economic damages cap. Had this ballot measure passed, California

would have seen higher health care costs and decreased access to care, especially among vulnerable populations who are most in need. Despite this victory, the battle to protect MICRA continues.

ACHD is strongly urging its members to individually become supporters of the CAPP coalition.

There is **no cost** to be a member of CAPP, and you will be in good company. Seven out of 10 Board Members are already CAPP members, with more than 1,000 other organizations representing community clinics, hospitals, physicians, nurses, EMTs, labor unions, local governments, dentists and other health care providers. A complete coalition list can be found on the CAPP website at <u>www.micra.org</u>.

As a CAPP member, you will receive quarterly newsletters with updates on legislative activities concerning MICRA and direct access to the CAPP staff to be your one stop resource on MICRA. Additionally, CAPP holds events for legislators in their legislative district and CAPP members are invited to attend free of cost.

Please take a moment to complete and return the <u>CAPP Coalition Sign-Up Form</u>. Thank you for endorsing this important organization and its goal to preserve MICRA.

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100 Million Healthier Lives

The 100 Million Healthier Lives (100 MHL), created by the Institute for Healthcare Improvement (IHI), is an unprecedented collaboration of change agents who are fundamentally transforming the way we think and act to improve health, wellbeing and equity. ACHD would



like to provide you with information should your Healthcare District wish to join the 100 MHL Movement.

Why 100 Million Healthier Lives?

The time is right for a major leap forward in the creation of health, wellbeing, and equity. The rising tide of chronic disease, an aging population, structural inequity in health outcomes (despite advances in health care), and technology demand a fundamentally different approach, one which brings us together across sectors to address the physical, social and behavioral contributors to health together. By choosing an audacious goal -- 100 million people living healthier lives by 2020 -- that no one group can achieve alone, we are committing to unprecedented collaboration, a humble spirit of learning, innovation and improvement, and systemic change to create an equitable health and wellbeing system.



Why Healthcare Districts?

Healthcare Districts are in a perfect position to impact the health of the people they serve. They are a trusted organization in the community and have the infrastructure to reach their members. They have a great potential to change lives in the community, especially among the most vulnerable populations such as children, seniors, and socioeconomically disadvantaged. Healthcare Districts also have an obligation to give back through improving the health of their community members.

View the 100 Million Healthier Lives Movement informational booklet here.

Contact Sheila Johnston with any questions or concerns.

Back to top

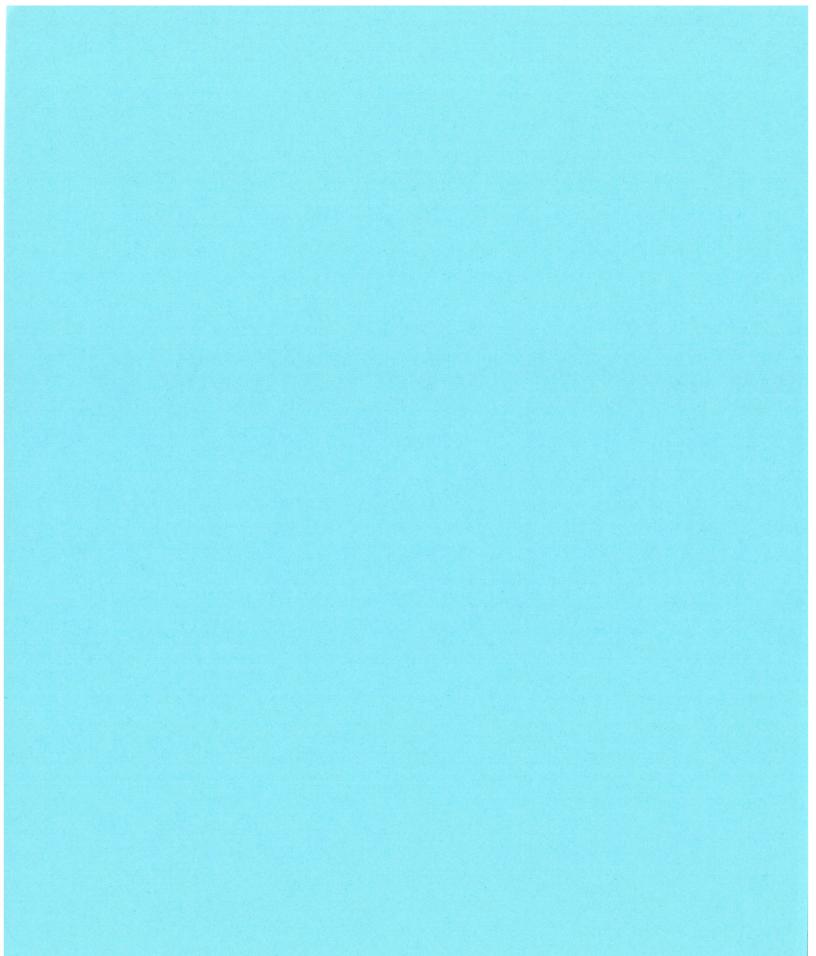
Resources

Legislative Reports ACHD Message Certified Healthcare District Board Self-Assessment Tool CEO Evaluation Partnership with Capella University

Connect with ACHD on social media

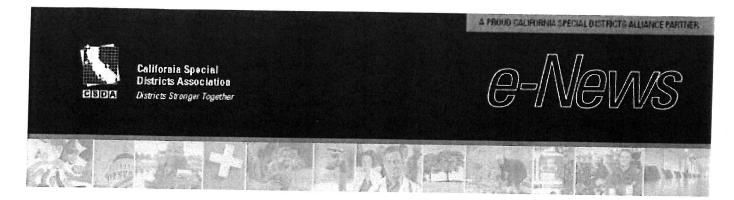


ACHD, 1215 K Street, Suite 2005, Sacramento, CA, 95814 · www.achd.org



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USDA e-News



CSDA Sponsors Bill to Promote Local Process for LAFCO Representation

CSDA is proud to announce the introduction of Assembly Bill 979 (Lackey), which simplifies the process for seating special district representatives on Local Agency Formation Commissions. Co-sponsored by CSDA and the California Association of Local Agency Formation Commissions (CALAFCO), AB 979 would ensure a local opt in approach for special districts to gain representation on Local Agency Formation Commissions (LAFCOs).

AB 979 simplifies the existing process by allowing special districts to vote on LAFCO representation in a meeting of the county's independent special districts selection committee. Every independent special district would have the opportunity to participate in the election process, either in-person or by mail, casting one vote for or against the question.

LAFCOs administer and approve the formation, dissolution, and boundaries of local agencies, including the cities and special districts, in each county. LAFCOs are composed of representatives from local cities, counties, and members of the public. Special districts have the ability to opt in to representation on LAFCOs. Since 1972, special districts have obtained LAFCO representation in 30 of the 58 counties in California.

Under current law, special districts may acquire representation on a LAFCO if a majority of all special districts in a county pass a board resolution supporting such action within a one-year period. The most recent county to gain special district representation was Santa Clara County in 2012. Organization of the county's 20 special districts to vote on an individual board resolution within a one-year period required a well-funded campaign and a part-time organizer.

Simplifying the LAFCO representation process empowers special districts in the 28 counties with no special district representation to more effectively consider their participation on LAFCO. In cases where special districts choose to participate, special district representation on LAFCO would provide a more diverse and representative decision-making foundation to the LAFCO. Special districts are often instrumental in solving communities' service deficiencies and their input in these processes is of great value.

Importantly, AB 979 ensures a local decision-making process when it comes to special district representation on LAFCO. Some have previously proposed eliminating local control related to this process by imposing mandates on special districts. This legislation would guard against such efforts by facilitating a manageable, efficient, and effective process that maintains the local opt in by each county's special districts.

AB 979 has been referred to the Assembly Local Government Committee for a hearing. Further information on the bill can be found <u>here</u>. Should you have any questions about the bill, please contact CSDA Legislative Representative Rylan Gervase at <u>rylang@csda.net</u>. For the most up to date information on AB 979 and other important affecting special districts, be sure to sign up for CSDA's <u>Legislative Roundup Webinar</u> on March 30.

California Special Districts Association | 1112 | Street | Suite 200 | Sacramento, CA 95814 | 877.924.CSDA (2732)

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http://csda.informz.net/admin31/content/template.asp?sid=46568&brandid=3092&uid=889215128&mi=5997912&mfqid=31027020&ptid=0&ps=46568 Page 71 of 104



This Week in Sacramento

INFORMATION & INSIGHTS FROM HURST BROOKS ESPINOSA . WEEK OF MARCH 20, 2017

The Future of the Affordable Care Act: No Vote on AHCA; Its Future Unclear

FEDERAL UPDATE

While a vote was expected today on the American Health Care Act (AHCA) – the House Republican budget reconciliation measure to repeal and replace the Affordable Care Act (ACA) – House Republican leadership signaled that they do not have sufficient votes to pass the measure. Multiple media sources are saying President Trump asked Speaker Ryan to withdraw the bill from consideration. However, Speaker Ryan indicates he asked the President to withdraw the bill. Leadership continued to have problems attracting moderate and conservative Republican support. The House has recessed; at this point, it is unclear what, if anything, will occur next week on the AHCA.

Leading up to today, negotiations on the AHCA continued until late Thursday. The most recent discussions between the White House, which began taking a proactive role in the negotiations, and the Freedom Caucus, comprised of conservative Republicans, focused on amending the measure to repeal the Essential Health Benefits (EHB). The ACA created 10 EHBs that all plans are required to provide; the list includes inpatient care, outpatient care, emergency room care, maternity care, prescription drugs, mental health and substance use disorder treatment, pediatric care, lab tests, rehabilitative care, and preventative services. It would be at a state's discretion whether to require EHBs.

There are two issues related to repealing the EHBs -

Worth Noting: Transportation Funding Update

The Fix Our Roads Coalition hosted a number of rallies this week to push for legislative agreement on a transportation funding package. Some Capitol sources are reporting that a deal may be coming together. Key provisions, as we understand them, include the following:

- Reduction of the proposed legislative package from \$6 billion to \$5 billion (higher than the Governor's \$4 billion January proposal).
- Elimination of the zero emission vehicle (ZEV) registration fee; in its place, all vehicles would be subject to a new fee.
- Removal of Cap and Trade auction revenues from the package, which results in a decrease in resources dedicated to public transit. It is reported that transit would be dealt with at a later date in a different proposal.

It is not yet clear where an excise tax would be set for gasoline or diesel.

Language could be in print as early as next week. The Governor and Legislature continue to focus on April 6 as the deadline for arriving at a resolution. Stay tuned!

one practical and one political. The 2015 effort to repeal and replace the ACA did not include repealing the EHBs because the Senate Parliamentarian believed that it would be outside the rules for what may be included in budget reconciliation. Presumably, House amendments to remove the EHBs must be removed to get a bill through the Senate. Secondarily, appealing to the Freedom Caucus by repealing the EHBs meant that leadership lost votes from moderate Republicans.

The Congressional Budget Office (CBO) released a revised <u>score</u> to the ACHA yesterday after the bill was amended in Rules Committee on March 22. The March 22 amendments would: 1) allow states to choose between a block grant and per capita cap and 2) allow states to impose work requirements on Medicaid beneficiaries. CBO estimates:

- 14 million more people would be uninsured under the AHCA than under current law in 2018 and grow to 24 million in 2026.
- Premiums would increase until 2020 and would generally decline after 2020 (estimate 10 percent lower than current law).
- The March 22 amendments decrease projected savings by \$186 billion (i.e. the amendments don't save as much money as the original version) because of changes to the IRS and Medicaid provisions.

CALIFORNIA UPDATE

The Brown Administration released its preliminary <u>analysis</u> of the AHCA on Wednesday morning, which found the measure would cost California approximately \$24 billion by 2027. The following is a summary of the Administration's analysis and comments:

- California's state share of Medi-Cal will increase from \$680 million in 2020 to \$5.3 billion in 2027 due to the per capita cap.
- The aggregate spending limit in the per capita cap would have a chilling effect on provider or plan rate increases or any future supplemental payments (such as the Hospital Quality Assurance Fee).
- By 2027, nearly all the expansion enrollees, over 4.8 million individuals, would not be eligible for enhanced federal funding. The Federal Medicaid Assistance Percentage (FMAP) will drop from 90% to 50%.
- The reduced Federal Medicaid Assistance Percentage (FMAP) for the expansion enrollees that do not remain continuously enrolled is the most significant cost shift to states. California estimates that reduced FMAP will cost \$4.8 billion (\$3.3 billion General Fund) in 2020 and grow to \$18.5 billion (\$13 billion General Fund) in 2027.
- Elimination of the enhanced federal funding of 6% for certain In-Home Supportive Services (IHSS costs in 2020 will increase state costs by approximately \$400 million in 2020.
- The ban on federal payments to providers that provide abortion services appears to only apply to Planned Parenthood Affiliates of California. They currently serve more than 600,000 Medi-Cal and Family PACT beneficiaries; a one-year ban is estimated to be worth \$400 million.
- Expanded presumptive eligibility for hospitals is eliminated. In 2017-28, state expenditures on hospital presumptive eligibility is \$400 million (\$192 million state General Fund). The elimination will shift costs to hospitals and individuals who will no longer be found eligible for Medi-Cal.

The Assembly Health Committee and Assembly Budget Subcommittee No. 1 held a joint informational hearing on the impact to California of the AHCA on Wednesday in Fresno. (A video of the hearing can be viewed <u>here</u>.) Assembly Members Joaquin Arambula, Jim Wood, and Miguel Santiago attended the hearing. The panel heard presentations from the Insure the Uninsured Project (ITUP), Western Center on Law and Poverty, and the Legislative Analyst's Office with respect to the details of the proposal. They also heard from consumers and advocates, including the County Behavioral Health Directors, on the AHCA impact. Materials include:

- Agenda
- Background paper
- LAO handout on ACA
- LAO handout on Medicaid and CBO
- ITUP presentation
- <u>UC Berkeley Labor Center data brief</u>
- Western Center on Law & Poverty handout
- Speaker Biographies

The Senate Health Committee is holding a hearing in San Diego today on the impact of the AHCA on California. Materials from that hearing include an <u>agenda</u>, a background <u>paper</u>, and a <u>summary</u> of the major provisions of the AHCA.

Proposition 57 Proposed Regulations Released

The California Department of Corrections and Rehabilitations has released <u>proposed regulations</u> to implement the provisions of Proposition 57. The regulations will undergo the public review and comment process through the Office of Administrative Law; information on how to submit comments can be found <u>here</u>.

Proposition 47 Recidivism Reduction Grants

The Board of State and Community Corrections' (BSCC) review and rating process of Proposition 47 recidivism reduction grant proposals, which were due last month, is getting underway. On March 29, the Executive Steering Committee tasked with reviewing proposals and making funding recommendations to the BSCC will receive its rater training. (An agenda, with location details, is available <u>here</u>.)

Recall that the recidivism reductions grants were broadly available to any local or state public agency. The BSCC received a total of 56 grant applications. Of those, 40 featured a county or county agency as a lead applicant; 10 were city or city agency applicants; four proposals were submitted by a school district; and two courts made grant requests. The ESC will review and rate the proposals through May, with funding recommendations presented to the Board at its June meeting.

BOE Audit Report Anticipated Next Week

The Sacramento Bee reported today that a pending Department of Finance audit of the Board of Equalization will indicate that the Board still cannot explain how it has corrected revenue allocation errors identified in a November 2015 audit by State Controller (and Board of Equalization member) Betty Yee. The DOF audit says the Board provided eleven different answers that it did not fully explain and that some calculations shifted revenue among accounts by as much as \$1.1 billion. Recall that allocation errors at the BOE have resulted in a 2016 decision to halt the quarterly true-up allocations of Proposition 172 public safety sales tax revenues to cities and counties, in addition to potentially impacting sales and use tax revenue allocations dedicated to 1991 and 2011 Realignment accounts. The audit report is expected to be released on March 30.

County Profiles on BSCC Website

The BSCC has posted to its website profiles of all 58 California counties, which provide data and information intended to assist in understanding conditions that may affect the local criminal justice systems. Information on each county is aggregated from publicly available statewide databases and includes general county demographic information, details on the locally incarcerated population, and various arrest and crime statistics. The profiles can be viewed <u>here</u>.

LAO Budget Reports

This week, the Legislative Analyst's Office published the following reports of interest:

Policy Area	Issues
Managing Floods in California link	Flood History, Causes, and Risk
	 Flood Management Responsibilities
	 Flood Management Infrastructure

Information & Insights from Hurst Brooks Espinosa ■ Week of March 20, 2017 Page 3

Policy Area	Issues
2024 Olympic Bid <u>link</u>	 Nonstructural Flood Management Efforts Flood Response Activities Flood Recovery Programs Flood-Related Spending Estimated Flood Management Funding Needs Key Flood Management Challenges in California Bid Update Updated Olympic Financial Plan City Agreements Federal Government Role Economic Study
History of California's Budget Reserves link	Policy brief

Upcoming Hearings of Interest

A number of policy issues and bills of interest will be considered next week, including the following.

Date	Committee(s)	Topic
Wednesday, March 29	Assembly Budget Subcommittee No. 1 – Health and Human Services (HHS) Agenda can be found here next week.	Topic Budget Item 5180 - Department of Social Services Budget Item 4260 - Department of Health Care Services - Child Welfare and Foster Care Budget Item 5180 - Department of Social Services - Community Care Licensing - In-Home Supportive Services
Thursday, March 30	Senate Budget and Fiscal Review Subcommittee No. 3 – HHS Agenda can be found <u>here</u> next week.	 CCI/IHSS MOE - Vote only Budget Item 0977 - Health Facilities Financing Authority Investment in Mental Health Wellness Act of 2013 Budget Item 4260 - Department of Health Care Services Mental Health and Substance Use Disorder Services Budget Item 4560 - Mental Health Services Oversight and Accountability
		Commission Budget Item 5175 – Department of Child Support Services Budget Item 5180 – Department of Social Services - Child Welfare Services
	Senate Budget and Fiscal Review Subcommittee No. 4 – State Administration and General Government (Agenda Part B) Agenda can be found <u>here</u> next week.	Proposition 2 proposal Budget Item 9210 – Local Government Financing Budget Item 8885 – Commission on State Mandates Budget Item 9100 – Tax Relief

Please feel free to contact any one of us at Hurst Brooks Espinosa with questions ...

JEAN HURST			
	KELLY BROOKS	ELIZABETH ESPINOSA	
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		encembeauvocacy.com	

Information & Insights from Hurst Brooks Espinosa
Week of March 20, 2017
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REPORTS Communication Only

Fallbrook Regional HEALTH DISTRICT



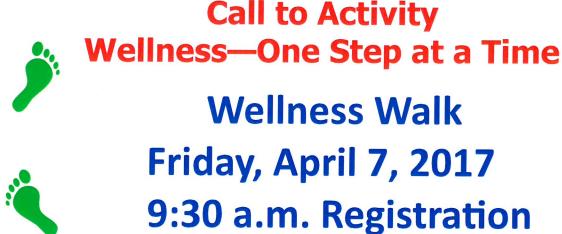


Follow these steps to be in the know about the "building" at 624 E. Elder Street

- 1. Go to our website: www.fallbrookhealth.org Review our FAST FACTS under the Media tab and check out photos of our activities in the Gallery.
- 2. Attend <u>Town Hall/Board</u> meetings on Wednesdays, <u>April 12th and May 10th</u>, starting at 6:00 p.m. at the Fallbrook Public Utility District, 990 E. Mission Rd.
- **3.** You can address **your** elected officials regarding your interest in or recommendations about uses for the building.



FALLBROOK REGIONAL HEALTH DISTRICT Serving Bonsall, De Luz, Fallbrook & Rainbow







Meet new people; form your own walking group.

Join us to walk the grounds at the Grand Tradition Estate & Gardens 220 Grand Tradition Way

> Led by Erica Williams Fallbrook Village Fitness



FREE PEDOMETERS TO FIRST 100 WALKERS



Proud to be a partner of: **LIVE WELL** SAN DIEGO FRHD MISSION Promoting health for the people of the District

WELLNESS WALK AT GRAND TRADITION ESTATE AND GARDENS APRIL 7TH 2017





Health

High blood sugar affects the whole body

Lucette Moramarco Staff Writer

Janice Baker, a registered dietician, spoke about diabetes and nutrition at the February Woman of Wellness program at Fallbrook Library.

While she has worked at Pomerado Hospital for the last 12 years, she said that she has not been out of school for 35 years with all the continuing education classes she takes to keep up with the latest information.

She reviewed the basics of diabetes management, weight management and the associated health risks of having diabetes.

Baker explained that diabetes means that "blood sugar is at high levels and toxic to our organs, like an oil spill." Food controls blood sugar so portion control plays a key part in managing the disease.

Being physically active is important but it is "all about the food," Baker said. Changes in diet have to be individualized. There is no one right way to treat the disease

She pointed out that the eyes, kidneys, and nervous system are all affected by high blood sugar which is the leading cause of heart disease. It also makes cholesterol more dangerous, is the leading cause of kidney disease and makes people prone to infections and dehydration.

According to Baker, normal blood sugar levels for a person with diabetes are 80 to 130 when fasting, less than 180 two hours after a meal. When diabetes is under control, a checkup every six months is good enough

There is now an A1C blood test that measures blood sugar levels weighted over the last three months for a more accurate picture of the patient's health.

Complications are starting at a lower blood sugar level and more people are being diagnosed. Part of the reason for that is the way people live, or work, now, Instead of manual typewriters, there are computers; instead of getting up to change the channel on a television, the watcher uses a remote control.

"Lifestyle realignment combined with large screen TVs, recliners, people driving everywhere and eating bigger meals" all lead to more people developing diabetes, Baker said.

"Movement is medicine," Baker said, adding "chronic sitting is like smoking and recliners are like cigarettes." When people sit a lot, the inactivity increases the risk of blood clots, deep vein thromboses and pulmonary embolisms, so 'chronic sitting kills'

She advised the attendees to break up sitting to no more than 30 minutes at a time. Getting up to move often is important, especially after age 40 as loss of muscle tissue happens with constant sitting. Physical activity not only regulates one's appetite, it also improves one's metabolism and mood. "Small little things, like a tire realignment, can make a difference," Baker said.

The causes of diabetes also include genetic disposition. Ethnicity and family history play a part in the disease too.

Stress is also a factor. Psychological and emotional issues, including depression, can cause people to eat out of emotion, she said. The body releases hormones that raise blood sugar levels; hormones tell the liver to put out sugar in the blood.

"Stress management has great benefits; the impact of just having fun is just as important as medicine," according to Baker. Social isolation also has an

impact on one's health. When someone is sick, their blood sugar level goes crazy. In a hospital setting, blood sugar needs to be carefully monitored as any infection affects it, she advised. Therefore, the less time spent in a hospital is better, decreasing the chance of developing a secondary infection

Dental care is critical as high blood sugar feeds bacteria, "like a HomeTown Buffet", she said, which impairs immunity and affects recovery

Besides regular visits to the dentist, it is important to get screening done for diabetes. Prediabetes is not benign, Baker added. It can cause vascular disease, high blood pressure and high cholesterol

There are different kinds of diabetes, Baker said. It can be an autoimmune disease; people with type 1 diabetes are below the age of 30 and must have insulin.

Type 2 diabetes is a progressive disease. Half of the people diagnosed with it will eventually need insulin; by the time it is diagnosed, half of the cells in their pancreas no longer function. For some people, they need insulin at first, "to clean up the oil spill", then can be taken off of it.

"Insulin is just another therapy," Baker said, "not good or bad." There are 12 different classes of oral medication to treat diabetes. Insulin can be fitted to just what you need," she added.

Gestational diabetes is more common in women who have a higher weight to start with, who are older, and who are certain ethnicities. Elevated blood sugars cause babies to be too large, develop lung/respiratory distress, and have a difficult delivery. These babies are also more likely to be obese and are 40 to 50 percent more likely to develop diabetes when they are older.

Prenatal health care makes a big difference, she said, as well as healthy eating, screening and breast feeding.

Janice Baker, a registered dietician, tells how to Lucette Moramarco oboto

deal with diabetes during the February WOW program at Fallbrook Library.

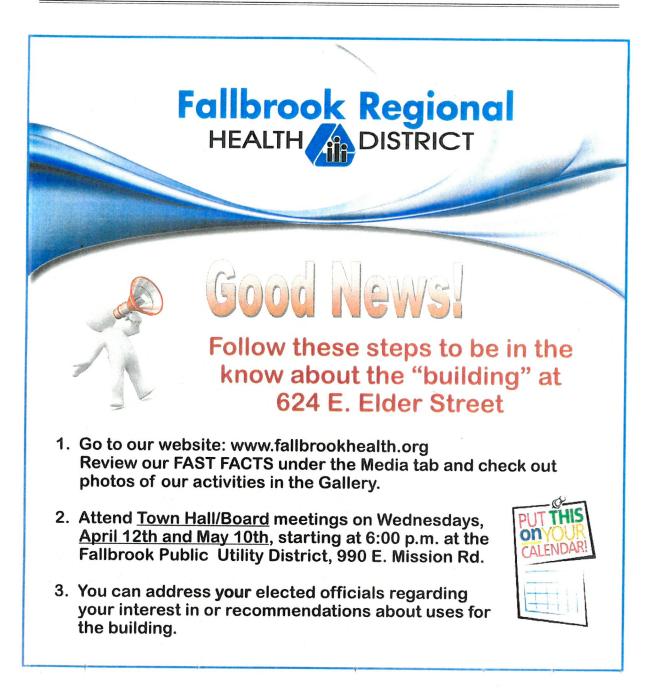
When someone asked what makes blood sugar go up overnight, Baker explained the "dawn phenomenon" as a nocturnal release of hormones that tells the liver to produce sugar. The blood sugar drops overnight, the liver overreacts and puts out more sugar causing a rebound effect.

It is important to know that when diabetes is combined with high blood pressure, they cause a double whammy effect on the cardiovascular system which increases one's risk of developing dementia, Alzheimer's or ministrokes.

"It is not just what you eat, it's how you eat," Baker said; "eating in front of screens is like texting while driving, disconnects the brain from the GI tract." Part of mindful eating is planning meals which is where consulting a registered dietician can help.

Taking diabetes and nutrition classes can also help people cope with the disease. Palomar Health offers free classes to everyone at both Palomar and Pomerado hospitals. For more information, visit www.palomarhealth.org/ classes-and-events/classes-search.







Thursday, April 6, 2017 Fallbrook Library 124 S. Mission Rd.

6:00 p.m. - Social/ Refreshments

6:30 p.m.—7:30 p.m. Presentation/Door Prizes

Featured Presentation:

"Remembering When, A Fire & Fall Prevention Program"

The Remembering When program was developed by the National Fire Protection Association in order to promote approaches and strategies to help older adults decrease their risk of fire and falls.

Presenters:

Rachel A. Mason, MS, MA Foundation for Senior Care James Beebe, Fire Prevention Specialist North County Fire Protection District

Free Event including Light Refreshments • Door Prizes

Please Note: <u>No need for Reservations at this time</u> Please plan to attend and bring a friend!

Questions? Contact Pam Knox at pknox@fallbrookhealth.org Or call 760-731-9187

Please bring non-perishable food items for Fallbrook Food Pantry



WOMAN OF WELLNESS FALLBROOK LIBRARY APRIL 6TH 2017







A FIRE AND FALL PREVENTION PROGRAM

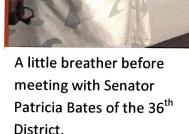
ACHD LEGISLATIVE DAY 2017

April 3rd 2017 Sacramento CA





Bobbi Palmer, FRHD Executive Director helping security guard and California Grizzly Bear protect the Governor's office.





Howard Salmon, FRHD VP and ACHD Advocacy Chair met with Assemblywoman Marie Waldron and ACHD President Julie Nygaard.

ACHD LEGISLATIVE DAY 2017 April 3rd 2017 Sacramento CA



A little breather before meeting with Senator Patricia Bates of the 36th District.



Assembly Member Rocky Chavez and Bobbi Palmer



Bobbi Palmer, FRHD Executive Director helping security guard and California Grizzly Bear protect the Governor's office.



Howard Salmon, FRHD VP and ACHD Advocacy Chair met with Assembly Member Marie Waldron and ACHD President Julie Nygaard.



DUE DATE April 28th

Committed to a Healthy Community

ANNOUNCING THE 2017-2018 Community Health Contract's Program

Applications Are Available Now!

Each year, the Fallbrook Regional Health District's Community Health Contract's Program provides funding to non-profits and public agencies whose activities and programs improve the health and wellness of District residents.

Applications will be available on our website at **fallbrookhealth.org** on **March 31st 2017**

QUESTION & ANSWER FORUM

Wednesday, April 12, 2017 from 5:00 to 6:00 p.m. Fallbrook Public Utilities District, 990 E. Mission Rd., Fallbrook

The deadline for submitting an electronic copy and <u>five</u> 3-hole punched hard copies will be **Friday, April 28th 2017 by 4:00 p.m.**

Please use the following email addresses: BPalmer@fallbrookhealth.org LBannerman@fallbrookhealth.org PKnox@fallbrookhealth.org. Hand deliver or mail hard copies to 138 S. Brandon Rd., Fallbrook CA 92028.

To learn more about the Community Health Contract's Program please visit our website or call (760) 731-9187.

Bobbi Palmer, MBA, MSW Executive Director

Fallbrook Regional Health District Hosting Town Hall

Posted on March 30, 2017 (http://www.achd.org/2017/03/30/fallbrook-regional-health-district-hosting-town-hall/) by achdalpha (http://www.achd.org/author/achdalpha/) and filed under ACHD News (http://www.achd.org/category/achd-news/)

FALLBROOK, Calif. (March 30, 2017) ---- The Fallbrook Regional Health District will host a town hall during a special board meeting on Wednesday, April 12 at 6 p.m. at the Fallbrook Public Utility District, 990 E. Mission Road.

The District Board of Directors seeks public feedback on the sale of public land at 624 E. Elder Street, formerly operating as the Fallbrook Hospital and its annex buildings. The District intends to identify suitable medical services to address identified local health concerns, including cancer, diabetes and hypertension.

The voter-approved special district collects roughly \$1.6 million annually to cover health care provider shortages, uninsured Californians, patients with low or fixed incomes, and underserved populations.

Since 2000, the district community health contracts have supported more than 270 health programs offering no-cost services for the North San Diego County unincorporated communities of Fallbrook, Bonsall, Rainbow and De Luz. In the last five years, the District granted about \$3 million in health services benefiting the public.

With a largely 55-plus population, many District contracts support senior programs offering transportation, health screenings and education as well as nutritious food options, including those delivered to the home.

"Last year, our full health assessment of 57,000 area residents helped us to better align contractual services with top wellness threats," said Executive Director Bobbi Palmer of the Fallbrook Regional Health District. "We also assessed area 911 call data and noticed a high rate of falls, which is the leading cause of death from injury among people 65 and older. Through contracts, the District boosted funding for in-home fall prevention assessments and mobility-improvement exercise programs."

Other health contracts support underserved families and youth by offering dental and eye exams, access to a local food pantry, disability support and mental and behavioral health services.

In addition to contractual services, Fallbrook Regional Health District directly operates health programs, including the Community Collaborative Health & Wellness Committee, Fallbrook Community Healthcare Resource Directory, Healthcare Hero, Woman of Wellness (WOW) and North County Community Collaborative Health Initiative

#

ABOUT Fallbrook Regional Health District

Fallbrook Regional Health District is a special district covering affordable community health needs in the communities of Fallbrook, Bonsall, De Luz and Rainbow. The roughly \$1.6 million collected in voter-approved taxes supports nearly \$700,000 annually in full spectrum community health programs and services, including health screenings, preventative treatment and urgent care. Learn more about community health needs provided by the district at www.fallbrookhealth.org (http://www.fallbrookhealth.org/).

Contact: Erica Holloway

Galvanized Strategies, on behalf of Fallbrook Healthcare District

m. (619) 796-1651

Erica@galvanizedstrategies.com (mailto:Erica@galvanizedstrategies.com)

← Petaluma Health Care District wins Community Philanthropy Award (http://www.achd.org/2017/03/30/petaluma-health-care-district-wins-community-philanthropy-award/)

Petaluma teen saves a life with CPR → (http://www.achd.org/2017/04/10/petaluma-teen-saves-life-cpr/)

CONTACT US

(916) 266-5200 Email Us (mailto:info@achd.org)

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Petaluma Health Care District wins Community Philanthropy Award (http://www.achd.org/2017/03/30/petaluma-health-care-district-wins-community-philanthropy-award/)

Grossmont Healthcare District Awards 39 Scholarships (http://www.achd.org/2017/03/24/grossmont-healthcare-district-awards-39-scholarships/)

Mayers Memorial Hospital District Receives District Certification (http://www.achd.org/2017/03/17/mayers-memorial-hospital-district-receives-district-certification/)

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Bobbi's personal tour guides

BOYS & GIRLS CLUB OPEN HOUSE

March 27th 2017 Fallbrook CA









March 23, 2017

www.VillageNews.com

Fallbrook & Bonsall

Volume 21, Issue 12

50¢

Fallbrook Regional Health District to host town hall meeting

FALLBROOK – The Fallbrook Regional Health District (FRHD) will host a town hall meeting during its regular board meeting Wednesday, April 12 at 6 p.m. at the Fallbrook Public Utility District, 990 E. Mission Road.

The FRHD board of directors seeks public feedback on the sale of public land at 624 E. Elder Street, formerly operating as the Fallbrook Hospital and its annex buildings. The building is an asset to our communities and the district is seeking feedback from taxpayers to identify potential uses.

The voter-approved special district collects roughly \$1.6 million annually to cover health care provider shortages, uninsured Californians, those with low or fixed incomes, and underserved populations.

Since 2000, the district community health contracts have supported more than 270 health programs offering no-cost services for the north San Diego County unincorporated communities of Fallbrook, Bonsall, Rainbow and De Luz. In the last five years, the district granted about \$3 million in health services benefiting the public.

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"Last year, our full health assessment of 57,000 area

see MEETING, page A-4

MEETING from page A-1

residents helped us to better align contractual services with top wellness threats," said executive director Bobbi Palmer of FRHD. "We also assessed area 911 call data and noticed a high rate of falls, which is the leading cause of death from injury among people 65 and older. Through contracts, the district boosted funding for inhome fall prevention assessments and mobility-improvement exercise programs."

Other health contracts support underserved families and youth by offering dental and eye exams, access to a local food pantry, disability support and mental and behavioral health services.

In addition to contractual services, FRHD collaboratively operates health programs including the Community Collaborative Health & Wellness Committee, North County Community Collaborative Health Initiative and an annual Prostate Cancer Screening. In addition, the district created and maintains the Community Resources Directory, sponsored the Healthcare Heroes program, and facilitates the Woman of Wellness (WOW) Program, Wellness Walks and participates in other community events.

NCFPD approves lease purchase agreement for new ambulance

Joe Naiman

Village News Correspondent

The North County Fire Protection District (NCFPD) board approved a lease purchase agreement for a new ambulance.

The 5-0 board vote March 1 approved the lease in which the fire district will pay \$228,710.85, including \$20,119.28 in interest charges, over five years and will then own the ambulance. Community Leasing Partners will have ownership of the ambulance until the lease is paid off.

until the lease is paid off. "It's needed," said NCFPD fire chief Steve Abbott. "Since the hospital closure our mileage has been significantly increased for transport, roughly tripled."

Fallbrook Hospital closed

in December 2014, which has forced NCFPD ambulances to transport patients to facilities further away. In January 2016 the Fallbrook Healthcare District authorized a grant for a new ambulance in which the healthcare district would cover half of the cost. The fire protection district, which also provides emergency medical services, took possession of that ambulance Oct. 6. The new ambulance has been traveling approximately 5,000 miles each month. "We need to replace these things

realistically once every three years at that kind of rate if not every two years," Abbott said.

Prior to the closure of Falbrook Hospital, ambulances had frontline status for five to seven years and became reserve units typically after 100,000 miles.

The acquisition of the new ambulance, which is expected to be based at Station 5 in Bonsall, will allow the oldest ambulance to be retired completely. That ambulance, which was obtained in 2003, currently has reserve status and is based at the fire district headquarters. The nextoldest ambulances were acquired in 2009, and one of those will be transferred from front-line duty to reserve status.

Lease purchase financing enables local governments or non-profit organizations to obtain financing at lower interest rates than a normal payment plan.

"The lender retains the note, but it becomes ours once it's paid off," Abbott said.

The equipment is sold as a taxexempt municipal lease. "The lease purchase is a benefit to the lender," Abbott said.

The purchase price without the interest is \$208,591.57. The fire district will pay back that amount at an interest rate of 3.15 percent. "You're typically paying less interest than you are on a straightup loan," Abbott said.

The fire district will make five annual payments of \$45,742.17 beginning in March 2018. The final payment is scheduled to be made on March 1, 2022.

The new ambulance is expected to be received by the fire district in late August.

HEALTH

Buckingham recognized as Health Champion for January



From right, Emily Preciado, a representative from Senator Joel Anderson's office, and Courtesy photo Bobbi Palmer, executive director of the Fallbrook Regional Health District, present Sandra Buckingham, E-RYT 200, RYT 500, with a certificate of recognition for being named the January 2017 Health Champion at the March 2 Woman of Wellness event. Buckingham is a registered yoga teacher, certified SilverSneakers instructor and continuing education provider. She serves on the FRHD Advisory Committee and attended the Institute of Local Government with Palmer on Jan. 31 in Riverside. She also established and facilitates the Fallbrook Wellness Directory and led the district's Wellness Walk on March 3.

How change	s in the Afford	How changes in the Affordable Care Act could affect you	t could affect	no/
Trudy Lieberman <i>Bural Health News Service</i> <i>Republican efforts to repeal and</i> replace Obamacare are getting lots of media attention. But like most reporting on major issues, the coverage is about who's up, who's down, who wins, and who loses. Explanations of how proposals will affect people will get short shrift. I've heard from readers complaining about Obamacare and from some who praised it. This column will tackle some of those concerns and explain the potential effects of the legislation that has so far been okayed by two Congressional committees. The bill that may reach the potential effects, but the primary goal - to reduce government healthcare spending and encourage more personal responsibility in choosing healthcare arrangements – is not likely to change. Will I continue to receive subsidies? Like Obamacare, Republican proposals call for tax credits to help people buy coverage, but there are significant differences. Obamacare policies are pegged to income with those at the bottom of the income scale getting larger credits. Those credits get smaller as jncome rises and phase out when families and individuals have incomes greater than 400 percent of the federal poverty level. (This year that's	\$97,000 for a family of four and \$47,000 for individuals.) The GOP proposal ties credits to age: individuals under 30 would receive a \$2,000 credit. The credit phases out for individuals with the amount gradually rising until someone age 60 and older can receive a \$4,000 redit. The credit phases out for individuals with incomes of \$75,000 and for families filing joint returns with income of \$150,000. Each family member can receive a credit, but a maximum of five people in one family can get a credit for a family living in a low-cost area in the Midwest would be the same for a family living in high-cost city like Los Angeles. Credits also may not be worth as much to older person three times more than a younger person for the same policy. Under Trumpcare, they can charge five times more. An analysis just released by the consulting firm Oliver Wyman found that Republican tax credits would have a major impact in rural areas where insurance premiums now are often higher and people are older and poorer. A larger proportion of people may do worse, Jeanne Lambrew, a senior fellow at The Century Foundation, says large premium increases could also cause a	disproportionate number of healthy rural Americans to drop coverage, potentially causing insurance markets in rural areas to unravel. Will coverage for pre-existing conditions continue? Proposals still require insurers to cover people no matter how sick they are. But if people let their insurance lapse for 63 days, they will have to pay a 30 percent penalty when they buy a new policy. Will I have more choice of more insurers? Today consumers in one-third of all U.S. counties have a choice of only one Obamacare insurer, and if they want to use their tax credits, they must buy from the sole insurer. Under GOP plans people may have more choice because they can use their tax credits to buy any policy an insurer wants to sell, but they can't use them to buy abortion coverage. Under Obamacare the value of the plans is standardized; for example, all silver plans must cover 70 percent of someone's	costs. But such standardization would disappear under the new law making it difficult to shop. Will I have to pay for benefits I don't need? The ACA calls for an essential benefit package so insurers could not exclude services like mental health treatment and maternity care. For now, the GOP plan continues the essential benefits, but that could change. What about rising premiums and higher cost sharing? Premiums, deductibles, and other cost sharing will continue to rise because medical inflation continues to rise. Neither Obamacare nor Republican proposals include serious provisions for containing costs. Although limits on out-of- pocket spending would continue, those limits increase each year, causing families to pay higher and higher amounts out of pocket. Will anyone lose coverage? Those who gained coverage under Medicaid expansion in their states may lose benefits. Young adults can remain on their parents'	plans until they turn 26, but Obamacare's individual mandate would be gone. Its purpose: to prevent people from gaming the system by buying insurance only when they needed it and dropping it when they didn't. It didn't always work well. It's not clear the GOP's idea of making people pay a 30 percent penalty when they return to the market will work any better. Health and Human Services Secretary Tom Price has promised, "Nobody will be worse off financially." Not everyone agrees. Washington and Lee law proffssor emeritus Timothy Jost says younger and wealthier people in low-cost areas will be better off than they were under Obamacare. Older and poorer people living in high-cost areas will be worse off under the Republican plan? Write to Trudy at <i>trudy.lieberman@</i> <i>gmail.com</i> .

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March 23, 2017



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STANFORD HEALTH PROMOTION NETWORK ANNUAL SUMMIT MARCH 16TH 2017

11.61

HOW GRATITUDE HEALS, ENERGIZES, & TRANSFORMS LIVES

Robert A. Emmons, Ph.D. University of California, Davis @Dr_BobEmmons

A way of seeing

MEDICIN

Gratitude is an affirmation of goodness and the recognition that the sources of this goodness are outside the self



Fallbrook Regional HEALTH DISTRICT

MISSION: Promoting health for the people of the District

Fallbrook Regional Health District Hosting Town Hall

Board Meeting Set to Discuss Sale, Uses of District Property

FALLBROOK, Calif. (March 13, 2017) ---- The Fallbrook Regional Health District will host a town hall during a regular board meeting on Wednesday, April 12 at 6 p.m. at the Fallbrook Public Utility District, 990 E. Mission Road.

The District Board of Directors seeks public feedback on the sale of public land at 624 E. Elder Street, formerly operating as the <u>Fallbrook Hospital</u> and its annex buildings. The building is an asset to our communities and the District is seeking feedback from taxpayers to identify potential uses.

The voter-approved <u>special district</u> collects roughly \$1.6 million annually to cover health care provider shortages, uninsured Californians, those with low or fixed incomes, and underserved populations.

Since 2000, the District <u>community health contracts</u> have supported more than 270 health programs offering <u>no-cost services</u> for the North San Diego County unincorporated communities of Fallbrook, Bonsall, Rainbow and De Luz. In the last five years, the District granted about \$3 million in health services benefitting the public.

With a largely 55-plus population, many District contracts support senior programs offering transportation, health screenings and education as well as nutritious food options, including those delivered to the home.

"Last year, our full health assessment of 57,000 area residents helped us to better align contractual services with top wellness threats," said Executive Director Bobbi Palmer of the Fallbrook Regional Health District. "We also assessed area 911 call data and noticed a high rate of falls, which is the leading cause of death from injury among people 65 and older. Through contracts, the District boosted funding for in-home fall prevention assessments and mobility-improvement exercise programs."

Other health contracts support underserved families and youth by offering dental and eye exams, access to a local food pantry, disability support and mental and behavioral health services.

In addition to contractual services, Fallbrook Regional Health District collaboratively operates <u>health programs</u> including the Community Collaborative Health & Wellness Committee, North County Community Collaborative Health Initiative and an annual Prostate Cancer Screening. In addition, the District created and maintains the Fallbrook Community Resources Directory, sponsored the Healthcare Heroes program, and facilitates the Woman of Wellness (WOW) Program, Wellness Walks and participates in other community events.

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ABOUT Fallbrook Regional Health District

Fallbrook Regional Health District is a special district covering affordable community health needs in the communities of Fallbrook, Bonsall, De Luz and Rainbow. The roughly \$1.6 million collected in voter-approved taxes supports nearly \$700,000 annually in full spectrum community health programs and services, including health screenings, preventative treatment and urgent care. Learn more about community health needs provided by the district at <u>www.fallbrookhealth.org</u>.

Contact: Erica Holloway Galvanized Strategies, on behalf of Fallbrook Regional Health District m. (619) 796-1651 <u>Erica@galvanizedstrategies.com</u>

DISCUSSION/ACTION ITEMS

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AMENDED & RESTATED BYLAWS OF FALLBROOK REGIONAL HEALTH DISTRICT

ARTICLE I DEFINITIONS

- 1.1 "Administrator" means the Executive Director or Chief Executive of the District.
- 1.2 "Board" means the Board of Directors of the District.
- 1.3 "Director" means an elected/appointed member of the Board of Directors.
- 1.4 "District" means the Fallbrook Regional Health District.
- 1.5 "Facilities" means the health care facilities and services operated by the District.

ARTICLE II ORGANIZATION, POWERS AND PURPOSES

- 2.1 ORGANIZATION. The District is a political subdivision of the State of California organized under the Local Health Care District Law, Division 23 of the Health and Safety Code.
- 2.2 GENERAL PURPOSES AND POWERS. The District is organized for the purposes described in the Local Hospital District Law and shall have and may exercise such powers in the furtherance of its purposes as are now or may hereafter be set forth in the Local Health Care District Law and any other applicable statutes, rules, or regulations of the State of California. The powers of the District include, but are not necessarily limited to, all of those powers authorized by Health and Safety Code Sections 32121 through 32138, inclusive.
- 2.4 DISSOLUTION. Any proposal for dissolution of the District shall be subject to confirmation by the voters of the District in accordance with Cortese-Knox Local Government Reorganization Act of 1985 (Gov. Code, § 56000 et seq.).

ARTICLE III OFFICES

3.1 PRINCIPAL OFFICE. The principal office of the District is hereby fixed and located at 138 South Brandon Road, Fallbrook, California 92028.

ARTICLE IV BOARD

- 4.1 GENERAL POWERS. The Board is the governing body of the District. All District powers shall be exercised by or under the direction of the Board. The Board is authorized to make appropriate delegations of its powers and authority to officers and employees. The Board shall evaluate the performance of its principal Administrator, as well as the Board's own performance.
- 4.2 OPERATION OF FACILITIES. The Board shall be responsible for the operation of all Facilities owned, leased, or operated by the District, according to the best interests of the public health, and shall make and enforce all rules, regulations, and bylaws necessary for the administration, government, protection, and maintenance of the Facilities under the Board's management and all property belonging thereto, and may prescribe the terms upon which patients may be admitted thereto.
- 4.3 NUMBER AND QUALIFICATION. The Board shall consist of five (5) members, each of whom shall be a registered voter residing in the District.
- 4.4 ELECTION AND TERM OF OFFICE. An election shall be held in the District on the first Tuesday after the first Monday in November in each even-numbered year, at which a successor shall be chosen to each Director whose term shall expire on the first Friday of December following such election. The election of Board members shall be an election at large within the District and shall be consolidated with the statewide general election. The candidates receiving the highest number of votes for the offices to the filled at the election shall be elected thereto. The term of office of each elected Board member shall be four (4) years or until the Board member's successor is elected and has qualified, except as otherwise provided by law in the event of a vacancy. An orientation shall be provided which familiarizes each new Board member with his or her duties and responsibilities, including the Board's responsibilities for quality care and the Facilities' quality assurance programs. Continuing education opportunities shall be made available to Board members.
- 4.5 VACANCIES. When a vacancy occurs on the Board of Directors, and except as otherwise specified by statute, the remaining Board members may fill any vacancy on the Board by appointment as outlined in Government Code Section 1780.
- 4.6 RESIGNATION OR REMOVAL. Any Board member may resign effective upon giving written notice to the Chairman, the Secretary, or the Board, unless the notice specifies a later time for the effectiveness of such resignation. The term of any member of the Board shall expire if the member is absent from three consecutive regular meetings or from three of any five consecutive meetings of the Board and if the Board by resolution declares that a vacancy exists on the Board. All or any of the members of the Board may

be recalled at any time by the voters following the recall procedure set forth in Division 16 of the Elections Code.

4.8 COMPENSATION. Each Director shall be compensated as authorized by the Local Health Care District Law (Health & Saf. Code, § 32103) at the rate of One Hundred Dollars (\$100) per meeting, with a limit of five (5) meetings per month. For purposes of this paragraph, the word "meeting" includes all regularly scheduled Board meetings, special Board meetings, Board committee meetings, and sanctioned meetings inclusive of events sponsored by other local governments at which the District is expected or is invited to be represented as an official participant; meetings and/or events of agencies of which the District is a member or a subscribing participant, including events presented or sponsored by the Association of California Healthcare Districts ("ACHD"), the California Special District's Association ("CSDA"), and any Board-approved educational seminars, including attendance at periodic ethics training prescribed by Assembly Bill 1234. Additionally, included are any and all occasions that constitute the performance of official duties such as District-sponsored special events, activities promotional of District-sponsored events, and in conducting review and/or site visits of District grant program applicants or recipients.

ARTICLE V BOARD MEETINGS

- 5.1 BOARD MEETING. A meeting of the Board is any congregation of a majority of the members of the Board at the same time and place to hear, discuss, or deliberate upon any item that is within the subject matter jurisdiction of the Board. A meeting is also the use of direct communication, personal intermediaries, or technological devices that is employed by a majority of the members of the Board to develop a collective concurrence as to action to be taken on an item by the members of the Board.
- 5.2 REGULAR MEETINGS. Regular meetings of the Board shall be held as follows:

On the second Wednesday of each month at 6:00 p.m. at the main conference room of the Fallbrook Public Utilities District, 990 East Mission Road, Fallbrook, California 92028; provided, however, that should said date fall upon a legal holiday, then the meeting shall be held at the same time on the next business day.

- 5.3 ANNUAL ORGANIZATION MEETING. The Board's annual organizational meeting shall be held on the second Wednesday in December at the place designated in a resolution by the Board. At that meeting, the Board shall organize by the election of one of its members as President, one as Vice-President, and one as Secretary. The President shall appoint a Treasurer who shall serve at the pleasure of the Board. The Board shall also fix the date, time, and location for the regular Board meetings for the ensuing year.
- 5.4 SPECIAL MEETINGS. A special meeting may be called at any time by the Board President or by a majority three-fifths (3/5th) of the Board members, by delivering personally or by mail written notice to each Board member and to each local newspaper

of general circulation, radio, or television station requesting notice in writing. Such notice must be delivered personally, by mail, or by electronic or digital means at least twenty-four (24) hours before the time of such meeting as specified in the notice. The call and notice shall specify the time and place of the special meeting and the business to be transacted. No other business shall be considered at special meetings.

- 5.5 QUORUM. A majority of the members of the Board shall constitute a quorum for the transaction of business. The act of a majority of the Board members present at a meeting at which a quorum is present shall be the act of the Board. No action shall be taken by secret ballot.
- 5.6 ADJOURNMENT. The Board may adjourn any regular, adjourned regular, special, or adjourned special meeting to a time and place specified in the Order of Adjournment. Less than a quorum may so adjourn from time to time. A copy of the Order or Notice of Adjournment shall be conspicuously posted on or near the door of the place where the meeting was held within twenty-four (24) hours after the time of the adjournment.
- 5.7 RULES AND REGULATIONS. The Board may adopt rules, regulations, and standard procedures governing the Board, the District, and any District Facilities and programs. Any rules, regulations, or procedures shall not conflict with these Bylaws.
- 5.8 MEMBERS OF THE PUBLIC. The public shall be entitled to attend the open session portion of every Board meeting. Every agenda for regular meetings shall provide an opportunity for members of the public to address the Board on items of interest to the public that are within the jurisdiction of the Board, regardless of whether such items are on the current agenda. If a member of the public addresses an item within the Board's jurisdiction that is not on the agenda, the Board shall take no action respecting the item addressed by the member of the public. The Board may adopt reasonable regulations concerning the amount and duration of time individual speakers are permitted to address the Board. The Board shall not prohibit any speaker from raising public criticism of any District program or action taken by the Board, or public criticism of any District rule, regulation, or standard procedure.

ARTICLE VI BOARD COMMITTEES

- 6.1 APPOINTMENT. All committees, whether standing or special (ad hoc), shall be appointed by the Board President and shall be comprised of not more than two (2) members of the Board of Directors and such additional members as may be appropriate. The chairman of each committee shall be appointed by the President. All committees shall be advisory only to the Board unless otherwise specifically authorized to act by the Board.
- 6.2 STANDING COMMITTEES. Standing Committees shall meet periodically. The District shall have the following Standing Committees:

Finance/Audit/Health Contracts/Grant/Investment. This committee shall be responsible for monthly review of budgetary and financial matters related to the District, including the annual audit and community health contracts program. The committee shall annually review and make recommendation to the Board of the amount of revenues available for community health contracts generally, as well as individual grant applicants.– This committee shall also be responsible for review of the District investments and appraisal of market conditions relating to the prudent investment of District Funds, including recommending changes to investments and investment policy where appropriate. This committee shall report its activities to the full board at each regular meeting. The chair of this committee shall be the Treasurer appointed by the President. The committee is also responsible for recommending the annual budget in accordance with the District's strategic plan. TheThe committee shall operate as a committee of the whole, meaning that all board members may elect to attend the committee meetings, though only the appointed members of the committee shall be entitled to recommend items to submit to the full board at a regular board meeting.

Facilities/Strategic Planning. This committee shall be responsible for periodic inspection of district owned facilities, and for review and consideration of real estate matters. The committee shall work with staff to develop and update the District's strategic plan, and shall review, monitor, and make recommendations to the Board regarding the annual Operating Plan. This committee shall meet at least quarterly and report its activities to the Board.

Governmental and Public Relations. This committee shall be responsible for monitoring healthcare legislation and public policy and to advise the District Board of possible/ probable impact on matters of the District as/when indicated. The committee shall be responsible for interface with other agencies, including other levels of government, as well as the public; inclusive of speeches or public appearances, the development of press releases, etc., for the purpose of informing the public of the District's actions or positions on matters within the jurisdiction of the District. The committee shall meet at least quarterly and shall report on its activities to the District Board.

- 6.3 SPECIAL OR AD HOC COMMITTEES. A special or ad hoc committee is an advisory committee composed solely of the members of the Board, which are less than a quorum of the Board and which does not have continuing subject matter jurisdiction and does not have a meeting schedule fixed by resolution or formal action of the Board. Special or ad hoc committees may be appointed by the President for special tasks as circumstances warrant and upon completion of the task for which appointed such special or ad hoc committee shall stand discharged.
- 6.4 ADDITIONAL CONSULTANTS. A committee chairman may invite additional individuals with expertise in a pertinent area to meet with and assist the committee. Such consultants shall not vote or be counted in determining the existence of a quorum and may be excluded from any committee session.

- 6.5 MEETINGS AND NOTICE. Meetings of a committee may be called by the Chairman or President of the Board, the chairman of the committee, or a majority of the committee's voting members. Meetings and notice of all standing committees, and of any other committee, board, or other body, irrespective of their composition, whether permanent or temporary, decision-making or advisory, created by resolution or formal action of the Board, excluding special or ad hoc committees as defined in section 6.3 above, shall be noticed and held in accordance with the requirements of The Ralph M. Brown Act.
- 6.6 QUORUM. A majority of the voting members of a committee shall constitute a quorum for the transaction of business at any meeting of such committee. Each committee shall keep minutes of its proceedings.
- 6.7 MANNER OF ACTING. The act of a majority of the members of a committee present at a meeting at which a quorum is present shall be the act of the committee so meeting. No act taken at a meeting at which less than a quorum was present shall be valid unless approved in writing by the absent members. For special or ad hoc committees, action may be taken without a meeting by a writing setting forth the action so taken signed by each member of the committee entitled to vote.
- 6.8 TENURE. Each member of a standing committee shall hold office for a period of one (1) year or until a successor is appointed. Any member of a committee may be removed at any time by the Chairman or President subject to the consent of the Board. A member of the Board shall cease to hold committee membership upon ceasing to be a Board member.

ARTICLE VII OFFICERS

- 7.1 PRESIDENT. The Board shall elect one of its members as President at the annual organizational meeting, and the President shall hold office until a successor is elected. In the event of a vacancy in the office of President, the Board may elect a new President. The President shall be the principal officer of the District and shall preside at all meetings of the Board. The President shall appoint all Board committee members and committee chairmen, shall consult with the Administrator in the preparation of meeting agendas, and shall perform all duties incident to the office and such other duties as may be prescribed by the Board from time to time.
- 7.2 VICE PRESIDENT. The Board shall elect one of its members as Vice President at the annual organizational meeting, and the Vice President shall hold office until a successor is elected. In the absence of the President, the Vice President shall perform the duties of the President.
- 7.3 SECRETARY. The Board shall elect one of its members as Secretary at the annual organizational meeting, and the Secretary shall hold office until a successor is elected. The Secretary shall provide for or coordinate the keeping of minutes of all meetings of the Board. The Secretary shall give or cause to be given appropriate notices in

accordance with these Bylaws, or as required by law, and shall authenticate all resolutions and other official reports and records of the District as needed.

- 7.4 TREASURER. The Board President shall appoint a Treasurer who shall serve at the pleasure of the Board. The Treasurer shall be charged with the safekeeping and disbursal of the funds in the treasury of the District. The Treasurer shall also serve as the chairman of the Finance/Audit/Grant/Investment Committee.
- 7.5 DISTRICT ADMINISTRATOR. The Board shall select and employ a District Administrator who shall serve as Executive Director or Chief Executive, and shall report to the Board. The Administrator be a full-time employee of the District and shall be responsible for the day-to-day administration of the District and the implementation of policies adopted by the Board. The Board shall develop, maintain, and periodically update a job description for the District Administrator, which job description shall outline in greater detail the functions and responsibilities of the Administrator's position with the District.

ARTICLE VIII AMENDMENT

These Bylaws may be amended or repealed by vote of at least three (3) members of the Board at any Board meeting. Such amendments or repeal shall be effective immediately, except as otherwise indicated by the Board.

SECRETARY'S CERTIFICATE

I, the undersigned, the duly appointed, qualified, and acting Secretary of the Board of Directors for the Fallbrook Healthcare District, do hereby certify that attached hereto is a true, complete and correct copy of the current Bylaws of Fallbrook Healthcare District, duly adopted by the Board of Directors on ______, 2017.

Dated: _____, 2017

Secretary

Secretary's Certificate