



## A G E N D A

### SEQUOIA HEALTHCARE DISTRICT REGULAR BOARD OF DIRECTORS MEETING 4:30 PM, Wednesday, February 1, 2023 Conference Room, 525 Veterans Boulevard Redwood City, CA 94063

This meeting will be held in person at 525 Veteran’s Boulevard in Redwood City with access available via Zoom teleconference. To join the meeting from your cellphone dial [\(669\) 900-9128](tel:6699009128) and enter meeting ID: [8981 651 9215](tel:89816519215) or join from a computer to <https://us02web.zoom.us/j/89816519215>. Additional information regarding the meeting can be located at our website: [www.seghd.org](http://www.seghd.org)

1. Call To Order And Roll Call
2. Public Comment On Non-Agenda Items\*
- ACTION 3. Consent Calendar - President Shefren
  - a. Approve December 7, 2022 Regular Meeting Minutes
  - b. Approve December 15, 2022 Special Meeting Minutes
  - c. Accept November And December 2022 Financial Statements
- ACTION 4. New Business
  - a. Pursuant To Policies 4.5 And 6.6 Nominate And Appoint Slate Of Board Officers 4:40-4:45  
For Two-Year Terms - President Shefren
  - b. State Of The District - Ms. Kurtzman 4:45-4:55
  - ACTION c. Consider Grant Request From First 5 SMC For Up To \$595,700 Each Year For 4:55-5:10  
Two Years (Total= \$1,191,400; July 2023- June 2025) - Ms. Roberts
  - d. Presentation On SMC Navigation Center Proposed Dental Clinic - Mr. Shih 5:10-5:25  
And Dr. Chavez
  - e. Discuss Whether To Change District Policy To Pay For Candidate Statements 5:25-5:35  
In The Voter Guide - Dr. Shefren
  - ACTION f. Approve Amendment To Employment Contract Of District Chief Executive 5:35-5:40  
Officer - Dr. Shefren
  - ACTION g. Director Requests For Future Agenda Items Per Board Policy 8.3 5:40-5:45  
- President Shefren
5. CEO/Staff Reports:
  - a. CEO Report And Staff Reports- Ms. Kurtzman, Ms. Bratton, Ms. Garcia 5:45-6:05
- ACTION 6. Adjourn  
The Next Regular Meeting Of The Board Of Directors Of Sequoia Healthcare District is Scheduled For 4:30 PM, Wednesday, April 5, 2023, District Conference Room, 525 Veterans Blvd., Redwood City, CA 94063

Jerry Shefren, MD  
Board President

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

Any writings or documents provided to a majority of the Board of Directors regarding any item on this agenda will be made available for public inspection at the District office, 525 Veterans Blvd., Redwood City, CA, during normal business hours. Please telephone 650-421-2155 ext 201 to arrange an appointment.

If you are an individual with a disability and need an accommodation to participate in this meeting, please contact Sequoia Healthcare District at least 48-hours in advance at 650-421-2155 ext 201.

**MINUTES OF REGULAR MEETING  
BOARD OF DIRECTORS  
SEQUOIA HEALTHCARE DISTRICT  
December 7, 2022  
Conference Room, 525 Veterans Boulevard  
Redwood City, CA 94063**

<u>Directors Present</u>	<u>Directors Excused</u>	<u>Also Present</u>
Director Fong Director Griffin Director Nayfack Director Shefren	Director Martinez	Pamela Kurtzman, CEO Mr. Hudak, Legal Counsel Ms. Stamper, Recorder

**1. Call to Order**

President Shefren called the meeting to order at 4:30PM. Roll call attendance was taken. A quorum was present.

**2. Public Comment/Non-Agenda Items**

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

**3. Consent Calendar**

**Motion:** to approve the September 28, 2022 regular meeting minutes.

**By:** Director Nayfack

**Seconded by:** Director Griffin

**Vote:** Ayes - Griffin, Nayfack, Shefren

Nos --

Abstain -- Fong

Absent -- Martinez

**Motion Passed: 3-0-1-1**

**Motion:** To accept September and October 2022 financial statements.

**By:** Director Nayfack

**Seconded by:** Director Griffin

**Vote:** Ayes - Fong, Griffin, Nayfack, Shefren

Nos --

Abstain --

Absent -- Martinez

**Motion Passed: 4-0-0-1**

**4.a. Accept November 8, 2022 Election Results From San Mateo County Registrar's Office And Recognize Dr. William Fong, Dr. Aaron Nayfack, And Dr. Gerald Shefren As Elected Directors For The Term 12/2/2022 To 12/4/2026**

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

As the certified election results have not been received from the SMC registrar's office, the vote to accept the election results was tabled.

**4.b. Introduction To Samaritan House Clinic New Leadership**

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

Mr. Bart Charlow, retiring Executive Director of Samaritan House introduced the new co-directors of the medical clinic that replaced Dr. Jason Wong, Dr. Singh and Dr. Montecute. Dr. Singh introduced himself and discussed his background. SHD Board members and the CEO introduced themselves and their roles with the District.

**4.c. Consider Funding Request From County Health and County Office Of Education For \$25,000 For Mental Health Mapping**

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

Louise Rogers, Chief of San Mateo County Health, Ziomara Ochoa, Director of San Mateo County Behavioral Health and Recovery Services, and Nancy Magee, San Mateo County Superintendent of Schools spoke with the Board about contributing funding to their project to create a collaborative infrastructure to assess gaps and develop action plans for improving social-emotional wellness for children and youth in San Mateo County. The unified plan would position the partners to act on anticipated state and local funding opportunities.

**Motion:** To grant \$25,000 to the County Health and County Office of Education mental health mapping project.

**By:** Director Shefren

**Seconded by:** Director Nayfack

**Vote:** Ayes - Fong, Griffin, Nayfack, Shefren

Nos --

Abstain --

Absent -- Martinez

**Motion Passed: 4-0-0-1**

**4.d. Update By First 5 SMC On Year 3 Grant Outcomes**

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

Emily Roberts of First 5 San Mateo County gave an update on the progress of two Healthy Beginnings initiatives. The Integrated Systems for Children with Special Needs initiative is in the process of integrating layers of systems with many partners for children with special needs. The Early Childhood Mental Health Systems initiative is addressing the impacts of trauma on children and families by supporting children- and family-serving agencies to adopt trauma-informed practices called TRISI. Implementation details are provided in the packet documentation.

**4.e. Update By Planned Parenthood**

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

Margaux Lazarin MD, Associate Medical Director of Primary Care at Planned Parenthood Mar Monte (PPMM) and Jenni Veitch-Olson, Senior Director of Giving reported on the effects on PPMM since the Supreme Court Overturned of Roe Vs. Wade.

In July and August 2022, PPMM saw more out-of-state abortion patients than they did for all of 2021 in total. The greatest increase has come from patients traveling from Texas. PPMM has trained more clinicians, expanded health centers near transportation hubs and is in the process of opening a new health center in Reno, Nevada. The Redwood City Clinic has logged over 3,150 patient visits this year. 90% of all PPMM clients seen are 200% below the federal poverty level (which equates to earning less than \$27,1980 annually). PPMM offers more than just reproductive care. They also offer family medicine, behavioral health care, and a host of

other services. The challenges this year have been hiring and retaining staff, and handling the effects of Covid on staff and clients.

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

Director Shefren would like a summary of a grant before receiving the grant update report.

**5.a. Accept Revision To The Employee Handbook**

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

The current employee handbook is outdated and needs to incorporate new state legislation. Ms. Stamper updated the handbook and included a spreadsheet summary of all changes. At the June 24, 2022 Boar meeting there was discussion regarding disciplinary action and the complaint process. At that time the Board postponed voting on the Employee Manual until Mr. Hudak had a chance to review and draft wording for section 1.03 regarding the complaint reporting process, and section 8.03 regarding representation at disciplinary hearings and reporting to the Board. Mr. Hudak explained his revisions which have been incorporated into the manual presented in the Board packet.

**Motion:** To accept revision to the employee handbook.

**By:** Director Griffin

**Seconded by:** Director Nayfack

**Vote:** Ayes - Fong, Griffin, Nayfack, Shefren

Nos --

Abstain --

Absent -- Martinez

**Motion Passed: 4-0-0-1**

**6. CEO/Staff Reports**

Market forces have been highly volatile and the Districts investments have experienced a \$400K reduction since the beginning of the fiscal year. However, the District is restricted by law to invest in the safest instruments.

Ms. Bratton has scheduled information session dates for HSI grants on January 11 and for Caring Community Grants on January 12. Both dates will have a virtual morning session and an afternoon in-person session at the District office.

In January, Ms. Bratton will be meeting with CC Grantees at their sites. She will send out invitation detail to Board members so they may join her.

Ms. Garcia reported that the HSI newsletters have been published for each of the school districts and that she has created a new monthly newsletter for residents. In addition, she has created a NextDoor account and will be unloading content once she has development content guidelines with CEO Kurtzman.

**4. Adjourn to Closed Session**

Adjourn to Closed Session For:

Under Government Code Sections 54957 and 54957.6 for the following purposes:

PUBLIC EMPLOYEE PERFORMANCE EVALUATION (54957) Title: Chief Executive Officer of Sequoia Healthcare District. CONFERENCE WITH LABOR NEGOTIATOR (54957.6) Agency Designated Representative: Jerry

Shefren, Board President & Arthur Faro, Vice President, Unrepresented  
Employee: Chief Executive Officer, Sequoia Healthcare District

**5. Reconvene To Open Session**

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

**6. Adjourn**

**Motion:** To adjourn the meeting at 6:30PM.

**By:** Director Nayfack

**Seconded by:** Director Griffin

**All in favor**

**Motion Passed**

The next regular meeting of the Board of Directors of Sequoia Healthcare District is scheduled for 4:30 PM, Wednesday, February 1, 2023, District Conference Room, 525 Veterans Blvd., Redwood City, CA.

Respectfully Submitted,

Aaron Nayfack, M.D.,  
Secretary

**MINUTES OF SPECIAL MEETING  
BOARD OF DIRECTORS  
SEQUOIA HEALTHCARE DISTRICT  
December 15, 2022  
Conference Room, 525 Veterans Boulevard  
Redwood City, CA 94063**

<u>Directors Present</u>	<u>Directors Excused</u>	<u>Also Present</u>
Director Fong Director Griffin Director Martinez Director Nayfack Director Shefren		Pamela Kurtzman, CEO Mr. Hudak, Legal Counsel Ms. Stamper, Recorder

**1. Call to Order**

President Shefren called the meeting to order at 5:00PM. Roll call attendance was taken. Director Martinez was absent. A quorum was present.

**2. Public Comment/Non-Agenda Items**

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

**3.a. Accept November 8, 2022 Election Results From San Mateo County Registrar's Office And Recognize Dr. William Fong, Dr. Aaron Nayfack, And Dr. Gerald Shefren As Elected Directors For The Term 12/2/2022 To 12/4/2026**

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

**Motion:** To accept the November 8, 2022 election results from the San Mateo County Registrar's Office and recognize Dr. William Fong, Dr. Aaron Nayfack, And Dr. Gerald Shefren as elected Directors for the term of December 2, 2022 To December 4, 2026.

**By:** Director Nayfack

**Seconded by:** Director Griffin

**Vote:** Ayes - Fong, Griffin, Nayfack, Shefren

Nos --

Abstain --

Absent -- Martinez

**Motion Passed: 4-0-0-1**

**3.b. Continue Discussion Of Dental Pilot With San Mateo County Dental Society And Health Plan Of San Mateo**

Director Martinez joined the meeting.

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

CEO Kurtzman introduced Nakia Brandt of San Mateo County Dental Society (SMCDS) and Pat Curran of Health Plan of San Mateo (HPSM). HPSM is the health plan for people with MediCal. HPSM has integrated dental in addition to medical and has worked for many years with SMCDS.

CEO Kurtzman described how the shortage of Dental providers accepting DentiCal insurance, has resulted in significant barriers to access for patients and the problem is expected to get worse when Medi-Cal benefits are expanded to all undocumented residents effective January 2024. CEO Kurtzman presented additional details of the proposal she is co-developing with Director

Griffin to partner with SMC Dental Society who has access to 661 dental members and 150 non-members to encourage them to sign on with HPSM and accept Denti-Cal patients from waitlists at Samaritan House, Ravenswood, San Mateo Medical Center Dental Clinic, and Sonrisas. The Sequoia Healthcare District (SHD) and Dignity Health Sequoia Hospital would provide funds to pay the difference between the HPSM reimbursement rate and the private dentists' fee for service, thereby making the acceptance of Denti-Cal patients more palatable to private dental providers and reducing the large wait times for residents to be seen for dental care.

#### 4. Adjourn to Closed Session

Adjourn to Closed Session For:

Under Government Code Sections 54957 and 54957.6 for the following purposes:

PUBLIC EMPLOYEE PERFORMANCE EVALUATION (54957) Title: Chief Executive Officer of Sequoia Healthcare District. CONFERENCE WITH LABOR NEGOTIATOR (54957.6) Agency Designated Representative: Jerry Shefren, Board President & Arthur Faro, Vice President, Unrepresented Employee: Chief Executive Officer, Sequoia Healthcare District

#### 5. Reconvene To Open Session

Reconvene to Open Session. President Shefren reported Ms. Kurtzman's performance evaluation was excellent and that the Board made the following motion in closed session to increase her compensation:

**Motion:** To approve a salary increase of \$12,650 for COLA and \$5,500 merit, for a total salary increase of \$18,150 for the Sequoia Healthcare District CEO effective January 1, 2023.

**By:** Director Shefren

**Seconded by:** Director Nayfack

**Vote:** Ayes - Fong, Griffin, Martinez, Nayfack, Shefren

Nos --

Abstain --

Absent --

**Motion Passed: 5-0**

#### 6. Adjourn

**Motion:** To adjourn the meeting at 6:20PM.

**By:** Director Nayfack

**Seconded by:** Director Griffin

**All in favor**

**Motion Passed**

The next regular meeting of the Board of Directors of Sequoia Healthcare District is scheduled for 4:30 PM, Wednesday, February 1, 2023, District Conference Room, 525 Veterans Blvd., Redwood City, CA.

Respectfully Submitted,

Aaron Nayfack, M.D.,  
Secretary

10:30 AM

01/24/23

**Sequoia Healthcare District**  
**Balance Sheet - by Month**

Accrual Basis

As of December 31, 2022

	Jul 31, 22	Aug 31, 22	Sep 30, 22	Oct 31, 22	Nov 30, 22	Dec 31, 22
<b>ASSETS</b>						
<b>Current Assets</b>						
<b>Checking/Savings</b>						
10150-0 · Cash (WF-MMA)	4,560,254.26	3,760,286.41	2,960,312.50	2,960,337.64	2,960,449.57	2,960,701.01
10200-0 · Cash (WF)	10,594,492.76	602,719.55	837,230.53	709,206.50	1,853,608.86	9,227,442.42
10250-0 · Cash from Investments	314,916.70	314,916.70	314,916.70	314,916.70	314,916.70	314,916.70
10300-5 · Cash Equivalents	10,845,529.78	10,720,290.78	10,528,442.78	10,519,989.78	10,624,308.78	10,622,046.78
10350-0 · Schwab Operating Funds Acct#739	10,196,614.01	20,065,809.01	19,882,772.01	19,891,471.01	20,077,973.01	20,076,890.01
<b>Total Checking/Savings</b>	36,511,807.51	35,464,022.45	34,523,674.52	34,395,921.63	35,831,256.92	43,201,996.92
<b>Other Current Assets</b>						
10400-0 · Pension Assets-Vanguard	62,291,104.00	62,291,104.00	62,291,104.00	62,291,104.00	62,291,104.00	62,291,104.00
10500-9 · Pension Contribution Rcvble	24,378,931.00	24,378,931.00	24,378,931.00	24,378,931.00	24,378,931.00	24,378,931.00
10502-0 · Prepaid Grants	500,000.00	500,000.00	500,000.00	500,000.00	500,000.00	500,000.00
<b>Total Other Current Assets</b>	87,170,035.00	87,170,035.00	87,170,035.00	87,170,035.00	87,170,035.00	87,170,035.00
<b>Total Current Assets</b>	123,681,842.51	122,634,057.45	121,693,709.52	121,565,956.63	123,001,291.92	130,372,031.92
<b>Fixed Assets</b>						
12100-6 · Land	138,927.00	138,927.00	138,927.00	138,927.00	138,927.00	138,927.00
12200-6 · Land Improvements	144,158.05	144,158.05	144,158.05	144,158.05	144,158.05	144,158.05
12300-1 · Improvements-Classroom	83,410.44	83,410.44	83,410.44	83,410.44	83,410.44	83,410.44
12300-6 · Buildings	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30	1,249,382.30
12300-8 · Building Improvements	547,329.57	547,329.57	547,329.57	547,329.57	547,329.57	547,329.57
12300-9 · Tenant Improvements	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29	215,113.29
12400-6 · Equipment	76,222.26	76,222.26	76,222.26	76,222.26	76,222.26	76,222.26
12400-7 · Furniture	28,259.91	28,259.91	28,259.91	28,259.91	28,259.91	28,259.91
12500-6 · Accumulated Depreciation	-2,169,663.47	-2,173,538.30	-2,177,413.13	-2,181,287.96	-2,185,162.79	-2,189,037.62
<b>Total Fixed Assets</b>	313,139.35	309,264.52	305,389.69	301,514.86	297,640.03	293,765.20
<b>TOTAL ASSETS</b>	123,994,981.86	122,943,321.97	121,999,099.21	121,867,471.49	123,298,931.95	130,665,797.12
<b>LIABILITIES &amp; EQUITY</b>						
<b>Liabilities</b>						
<b>Current Liabilities</b>						
<b>Accounts Payable</b>						
20000 · Accounts Payable	19,000.00	0.00	0.00	0.00	0.00	0.00
<b>Total Accounts Payable</b>	19,000.00	0.00	0.00	0.00	0.00	0.00
<b>Other Current Liabilities</b>						
20001-0 · Deposit Payable	3,565.00	3,565.00	3,565.00	3,565.00	3,565.00	3,565.00
20100-0 · Grants Payable	2,034,000.00	2,034,000.00	2,034,000.00	2,034,000.00	2,034,000.00	2,034,000.00
20200-0 · HSI Grants Payable	1,281,330.11	603,479.05	206,566.71	206,566.71	206,566.71	206,566.71
<b>Total Other Current Liabilities</b>	3,318,895.11	2,641,044.05	2,244,131.71	2,244,131.71	2,244,131.71	2,244,131.71
<b>Total Current Liabilities</b>	3,337,895.11	2,641,044.05	2,244,131.71	2,244,131.71	2,244,131.71	2,244,131.71
<b>Long Term Liabilities</b>						
22000-1 · Pension Contribution Payable	22,485,573.00	22,485,573.00	22,485,573.00	22,485,573.00	22,485,573.00	22,485,573.00
25000-0 · Deferred inflows from pension	1,893,358.00	1,893,358.00	1,893,358.00	1,893,358.00	1,893,358.00	1,893,358.00
<b>Total Long Term Liabilities</b>	24,378,931.00	24,378,931.00	24,378,931.00	24,378,931.00	24,378,931.00	24,378,931.00
<b>Total Liabilities</b>	27,716,826.11	27,019,975.05	26,623,062.71	26,623,062.71	26,623,062.71	26,623,062.71
<b>Equity</b>						
32000 · Retained Earnings	35,519,985.86	35,519,985.86	35,519,985.86	35,519,985.86	35,519,985.86	35,519,985.86
39004-1 · Invested in Capital Assets	516,195.00	516,195.00	516,195.00	516,195.00	516,195.00	516,195.00
39004-3 · Fiduciary Fund Balance	61,011,405.00	61,011,405.00	61,011,405.00	61,011,405.00	61,011,405.00	61,011,405.00
Net Income	-769,430.11	-1,124,238.94	-1,671,549.36	-1,803,177.08	-371,716.62	6,995,148.55
<b>Total Equity</b>	96,278,155.75	95,923,346.92	95,376,036.50	95,244,408.78	96,675,869.24	104,042,734.41
<b>TOTAL LIABILITIES &amp; EQUITY</b>	123,994,981.86	122,943,321.97	121,999,099.21	121,867,471.49	123,298,931.95	130,665,797.12



10:31 AM

01/24/23

Accrual Basis

**Sequoia Healthcare District  
Profit & Loss - by Month**

July through December 2022

	Jul 22	Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	TOTAL
<b>Income</b>							
40300 · Rental Income	800.00	800.00	800.00	800.00	800.00	800.00	4,800.00
40400 · Tax Revenue	96,281.24	0.00	55,638.49	525,131.10	790,120.17	7,632,307.59	9,099,478.59
40500 · Investment Income	206,982.00	-256,044.00	-374,885.00	246.00	290,821.00	-3,345.00	-136,225.00
40600 · Interest Income	155.23	55.10	37.89	33.99	196.25	658.40	1,136.86
40800 · 2021 Dignity Settlement Agrmt	0.00	0.00	0.00	0.00	510,000.00	0.00	510,000.00
<b>Total Income</b>	<b>304,218.47</b>	<b>-255,188.90</b>	<b>-318,408.62</b>	<b>526,211.09</b>	<b>1,591,937.42</b>	<b>7,630,420.99</b>	<b>9,479,190.45</b>
<b>Gross Profit</b>	<b>304,218.47</b>	<b>-255,188.90</b>	<b>-318,408.62</b>	<b>526,211.09</b>	<b>1,591,937.42</b>	<b>7,630,420.99</b>	<b>9,479,190.45</b>
<b>Expense</b>							
60100-1 · Admin. Expense	4,233.15	1,898.25	6,592.54	3,032.28	539.85	7,498.93	23,795.00
60101-1 · Administration Payroll	24,318.14	23,859.32	35,788.98	24,643.24	24,307.27	24,307.26	157,224.21
60300-1 · Board Health Insurance	2,114.02	-2,114.02	0.00	0.00	0.00	0.00	0.00
60300-2 · Employee Health Insurance	7,770.05	8,671.69	8,069.00	6,988.59	8,138.04	3,434.52	43,071.89
60350 · Employee Retirement Benefit	2,445.48	2,273.10	3,409.65	1,804.70	1,792.20	1,792.20	13,517.33
60400-1 · Investment Fees	0.00	0.00	0.00	9,607.16	0.00	0.00	9,607.16
60500-1 · Office Supplies/Equip Maint	634.12	906.68	1,025.82	425.25	0.00	1,797.91	4,789.78
60600-1 · Purchase Services	1,350.00	0.00	0.00	2,500.00	0.00	600.00	4,450.00
60700-1 · Board Expense	0.00	2,350.00	1,729.33	0.00	0.00	489.41	4,568.74
60700-2 · Association/Membership Dues	0.00	8,111.00	225.00	0.00	0.00	0.00	8,336.00
60725-1 · Communications	0.00	-5,000.00	0.00	0.00	0.00	56,327.22	51,327.22
60750-1 · Public Relations	3,853.00	0.00	0.00	0.00	0.00	0.00	3,853.00
60750-2 · Web Site/IT	2,705.53	6,436.53	3,745.16	2,905.53	2,992.96	3,903.53	22,689.24
60800-1 · Insurance	39,413.41	0.00	1,543.00	-600.50	0.00	0.00	40,355.91
60806-1 · LAFCO fees	12,215.00	0.00	0.00	0.00	0.00	0.00	12,215.00
60810-1 · Legal Fees	0.00	810.00	630.00	-4,841.75	1,305.00	3,347.50	1,250.75
65200-1 · Maintenance	2,319.30	1,388.98	1,190.00	3,239.53	815.00	1,867.00	10,819.81
65400-1 · Utilities	2,423.49	1,968.02	2,506.70	1,881.21	1,186.87	3,099.85	13,066.14
65450-1 · Property Insurance	5,656.58	0.00	0.00	0.00	0.00	0.00	5,656.58
65500-1 · Depreciation Expense	3,874.83	3,874.83	3,874.83	3,874.83	3,874.83	3,874.83	23,248.98
70200-1 · Grant Admin Expenses	11.50	0.00	0.00	0.00	31,460.00	119.88	31,591.38
70201-1 · Grant Admin Payroll	14,949.73	15,045.14	22,567.70	15,045.15	15,045.16	20,009.65	102,662.53
70350-1 · Samaritan House	0.00	0.00	0.00	325,900.00	0.00	0.00	325,900.00
70400-1 · Other Grants	0.00	300.00	5,000.00	0.00	0.00	0.00	5,300.00
70550-1 · San Mateo Medical Center	0.00	0.00	0.00	160,000.00	0.00	0.00	160,000.00
70560-1 · Ravenswood Family Health Center	500,000.00	0.00	0.00	0.00	0.00	0.00	500,000.00
70566-1 · Pen Volunteers LYFT program	0.00	1,947.28	1,809.63	1,834.27	15,026.81	920.24	21,538.23
70567-1 · BGCP Psychotherapist	46,585.00	0.00	0.00	0.00	0.00	0.00	46,585.00
70568-1 · Sonrisas	0.00	0.00	0.00	82,756.00	0.00	0.00	82,756.00
70594-0 · Future Impact Funds	0.00	0.00	0.00	0.00	45,000.00	0.00	45,000.00
70595-0 · Covid-19 Emergency Funds	-5,000.00	0.00	0.00	0.00	0.00	-5,000.00	-10,000.00
70706-1 · Sequoia Safe (+HeartSafe)	39,130.00	1,750.03	810.49	-48.84	0.00	0.00	41,641.68
70707-1 · Sequoia Strong	0.00	711.86	2,404.63	1.03	0.00	4,784.95	7,902.47
70707-2 · Sequoia Strong Payroll	7,284.65	6,608.04	9,912.07	6,608.05	6,608.04	6,608.06	43,628.91
70800-1 · School Health Expense	75.00	0.00	1,436.46	0.00	0.00	71,104.90	72,616.36
70801-1 · School Health Payroll	15,286.60	15,777.20	23,665.80	10,283.08	2,384.93	3,626.07	71,023.68
70802-1 · School Health Grants	340,000.00	2,046.00	90,965.01	0.00	0.00	49,041.91	482,052.92
<b>Total Expense</b>	<b>1,073,648.58</b>	<b>99,619.93</b>	<b>228,901.80</b>	<b>657,838.81</b>	<b>160,476.96</b>	<b>263,555.82</b>	<b>2,484,041.90</b>
<b>Net Income</b>	<b>-769,430.11</b>	<b>-354,808.83</b>	<b>-547,310.42</b>	<b>-131,627.72</b>	<b>1,431,460.46</b>	<b>7,366,865.17</b>	<b>6,995,148.55</b>

**Month to Month Budget  
November - December 2022**

	November Budget	November Actual	December Budget	December Actual	6 Month (July - December) Total Budget	6 Month (July - December) Total Actual	12 Month (July - June) Total Budget
<b>Income</b>							
Rental Income	800.00	800.00	800.00	800.00	4,800.00	4,800.00	9,600.00
Tax Revenue	700,000.00	790,120.17	6,400,000.00	7,632,307.59	7,740,000.00	9,099,478.59	14,000,000.00
Investment Income	7,000.00	290,821.00	7,000.00	(3,345.00)	42,000.00	(136,225.00)	80,000.00
Interest Income	75.00	196.25	75.00	658.40	450.00	1,136.86	800.00
2021 Dignity Settlement Agrmt	510,000.00	510,000.00	0.00	0.00	510,000.00	510,000.00	510,000.00
Pension Income	0.00	0.00	0.00	0.00	0.00	0.00	2,200,000.00
<b>Total Income</b>	<b>1,217,875.00</b>	<b>1,591,937.42</b>	<b>6,407,875.00</b>	<b>7,630,420.99</b>	<b>8,297,250.00</b>	<b>9,479,190.45</b>	<b>16,800,400.00</b>
<b>Expenses</b>							
Admin. Expense	2,500.00	539.85	2,000.00	7,498.93	16,000.00	23,795.00	28,000.00
Admin. Payroll	30,000.00	24,307.27	40,000.00	24,307.26	190,500.00	157,224.21	390,500.00
Board Health Insurance	1,700.00	0.00	1,700.00	0.00	9,800.00	0.00	20,000.00
Employee Health Insurance	10,000.00	8,138.04	10,000.00	3,434.52	58,000.00	43,071.89	120,000.00
Employee Retirement Benefit	2,400.00	1,792.20	2,400.00	1,792.20	13,946.00	13,517.33	28,000.00
Investment Fees	0.00	0.00	0.00	0.00	7,500.00	9,607.16	30,400.00
Office Supplies/Equip Maint	750.00	0.00	750.00	1,797.91	4,500.00	4,789.78	9,000.00
Purchased Services	10,000.00	0.00	20,000.00	600.00	62,800.00	4,450.00	100,000.00
Accounting fees	17,000.00	0.00	0.00	0.00	25,000.00	0.00	48,000.00
Board Expense	1,500.00	0.00	1,000.00	489.41	9,000.00	4,568.74	15,000.00
Associations/Membership	300.00	0.00	0.00	0.00	38,000.00	8,336.00	38,000.00
Communications	44,000.00	0.00	1,000.00	56,327.22	45,500.00	51,327.22	45,700.00
Public Relations	200.00	0.00	0.00	0.00	4,300.00	3,853.00	4,300.00
Web Site/IT	4,000.00	2,992.96	4,000.00	3,903.53	32,000.00	22,689.24	52,000.00
Pension Plan Expense	0.00	0.00	2,200,000.00	0.00	2,200,000.00	0.00	2,200,000.00
Insurance/D&O/Liability/WC	0.00	0.00	0.00	0.00	40,000.00	40,355.91	40,000.00
Election fees	0.00	0.00	250,000.00	0.00	250,000.00	0.00	250,000.00
LAFCO fees	0.00	0.00	0.00	0.00	15,450.00	12,215.00	15,450.00
Legal Fees	4,000.00	1,305.00	4,000.00	3,347.50	26,000.00	1,250.75	50,000.00
Bank Fees	0.00	0.00	50.00	0.00	50.00	0.00	100.00
Maintenance	2,000.00	815.00	2,000.00	1,867.00	13,000.00	10,819.81	25,000.00
Utilities	2,000.00	1,186.87	2,000.00	3,099.85	13,000.00	13,066.14	25,000.00
Property Insurance	0.00	0.00	0.00	0.00	3,900.00	5,656.58	3,900.00
Depreciation	3,916.00	3,874.83	3,916.00	3,874.83	23,504.00	23,248.98	47,000.00
Grant Admin Expenses	28,000.00	31,460.00	100.00	119.88	29,400.00	31,591.38	30,000.00
Grant Admin Payroll	15,000.00	15,045.16	15,000.00	20,009.65	90,000.00	102,662.53	190,000.00
Samaritan House Grant	0.00	0.00	0.00	0.00	316,887.50	325,900.00	1,267,550.00
Other Grants	1,000.00	0.00	1,000.00	0.00	5,000.00	5,300.00	10,000.00
San Mateo Medical Ctr. Dental Clin	0.00	0.00	0.00	0.00	160,000.00	160,000.00	160,000.00
Ravenswood Family Health Ctr	0.00	0.00	0.00	0.00	500,000.00	500,000.00	1,000,000.00
LifeMoves LVN	0.00	0.00	0.00	0.00	0.00	0.00	127,500.00
Pen Volunteers LYFT program	5,000.00	15,026.81	5,000.00	920.24	30,000.00	21,538.23	60,000.00
BGCP Psychotherapist	0.00	0.00	0.00	0.00	46,585.00	46,585.00	93,170.00
Sonrisas	0.00	0.00	0.00	0.00	89,275.00	82,756.00	357,100.00
First 5 SMC	0.00	0.00	198,415.00	0.00	198,415.00	0.00	396,830.00
Future Impact Funds	0.00	45,000.00	93,000.00	0.00	186,000.00	45,000.00	277,900.00
Covid-19 Emergency Funds	0.00	0.00	0.00	(5,000.00)	0.00	(10,000.00)	0.00
Community Grants Program	0.00	0.00	0.00	0.00	0.00	0.00	4,050,000.00
Sequoia Smart	4,200.00	0.00	4,200.00	0.00	25,200.00	0.00	50,000.00
Sequoia Safe (+HeartSafe)	12,500.00	0.00	12,500.00	0.00	75,000.00	41,641.68	150,000.00
Sequoia Strong Program	11,200.00	6,608.04	11,200.00	11,393.01	70,800.00	51,531.38	145,000.00
School Health Program	216,925.00	2,384.93	74,575.00	123,772.88	915,800.00	625,692.96	4,850,000.00
<b>Total Expenses</b>	<b>430,091.00</b>	<b>160,476.96</b>	<b>2,959,806.00</b>	<b>263,555.82</b>	<b>5,840,112.50</b>	<b>2,484,041.90</b>	<b>16,800,400.00</b>
<b>Net</b>	<b>787,784.00</b>	<b>1,431,460.46</b>	<b>3,448,069.00</b>	<b>7,366,865.17</b>	<b>2,457,137.50</b>	<b>6,995,148.55</b>	<b>0.00</b>

**State of the District February 2023**  
**Pamela Kurtzman, CEO Sequoia Healthcare District**

This State of the District narrative provides a high-level overview of the current status and strategic direction of the District. Here, I report on our current financial standing, our operational position, and the health of our grants and programs as measured against our new strategic goals.

**Financial Summary:**

- Each year our tax revenue grows. This has shown itself to be a reliable source of income. Our current fiscal year tax budget is \$14M, and I expect it to pass that amount by about \$1M, by June 30th.
- Unanticipated income we received in 2021 (\$2,000,000 Dignity settlement, \$678,202 CA Covid Relief Grant, CHI refund of \$1,004,400), provided us with a healthy reserve in addition to funds we have committed to programs and services. We have close to \$8M that is not yet allocated, but we are actively exploring significant investments with these dollars, as we are committed to re-investing all net revenue into our community.
- Our investment income has unfortunately seen a decrease in gains again this past year due to the ongoing turbulence of the markets combined with our very conservative investment strategies that minimize risk. Of recent however, we have been trending toward a more positive yield.
- Annual payment of settlement funds provide and additional \$1.10M, \$510k to invest jointly with Dignity and an additional \$510k to invest independently to improve community health in important ways.
- CEO retains strong financial oversight of District finances and administrative and overhead expenses are kept minimal.

<b>Income</b>	<b>Expenses</b>
Total anticipated tax revenue and other income sources: \$16,800,400	Total expenses including grants and programs is \$16,800,800
14,000,000 (property taxes)	\$7,655,050 Grants
+2,800,400 (other sources)	\$5,345,400 Programs
	\$1,554,450 Admin/other non-personnel expenses
	\$2,300,900 Pension, building, capital improvements
Funds remaining in budget from FYE 2018-2022 = \$8,050,000 to invest in community over next 3 years	

Next steps for 2023:

- Develop FY 2023-24 Operating budget- present draft to Board in April, approve in June

- We have more unallocated funds in our reserve account than we'd like, but we have plans for these dollars. Investing \$3-\$5 million to address oral health disparities in a significant way is one of my highest priorities in 2023. There are many more opportunities beyond oral health to invest these funds in that have been identified in our strategic plan and that also ensures our ongoing focus on equity.

### Operations Summary:

Overall, District operations are running smoothly and efficiently. We have a dedicated and cohesive team who work well together, and a new Director of School Health about to join us. We also have a committed and unified Board that is dedicated to the mission of the District, and that we are financially solid. Staff and Board annually assess our activities and budget to assure that our support is reaching all segments of our community and to ensure our outcomes meet or exceed expectations. In addition, we've made some notable and important operational improvements over the past year, including:

- Modernized outdated HR policies and procedures-- we now have an updated employee handbook that provides guidelines on employer-employee relationships, health and safety measures, conflict resolution and disciplinary measures that comply with relevant laws and regulations.
- Updated District policies and procedures, replaced with new explicitly equitable ones and ones that assure compliance with the newest regulatory requirements- Specifically, policies 15.9, 24.8, and 23.1 that the board approved June 2022.
- Updated technology to make Board meetings more accessible to public and streamline digital access to meeting agendas (past and present). Moved from Board Docs to Granicus PEAK Agenda program that improves flow and ease of agenda development and automates agenda uploads to website and is searchable by topic.
- Staff worked with Versaic to add additional custom features to the online grant application platform. This improved technology simplifies the application process and saves time for staff, grantees and the grants review committee.
- Staff worked with an outside legal consultant and demographer to complete all redistricting requirements and develop a new boundary map, that is interactive on our website. This was a tremendous undertaking for several months and required significant staff time and focus
- Completed ACHD recertification process with one item pending. Certification demonstrates good governance through a core set of accountability and transparency standards and best practices for healthcare districts.
- Completed all redistricting requirements in May 2022
- Staff consistently track new legislation and regulatory requirements relevant to healthcare districts

### Operational Challenges

The pandemic has exacerbated our concerns for affordable and safe housing, food insecurity, access to basic health care (including lack of affordable oral health and mental health support), and lack of affordable childcare. These challenges are compounded by work force shortages

among all types of health-related services. Additionally, the unmet community health care needs not only outweigh our funding capacity, but also our staffing capabilities (though our small, dedicated team does all we can). Also challenging programmatically, is the difficulty in measuring our impact. Part of why healthcare is so hard to measure is because health data is complex, difficult to collect, and the often different definitions and standards that are used make it difficult to develop quality indicators (or metrics). This in turn makes it a real challenge to record information and quantify it accurately.

**Sequoia Healthcare District Strategic Priorities**

With help from our talented and energetic staff and board, we now have a new three-year strategic plan, that was approved and adopted in April 2022, that prioritizes and seizes opportunities to serve our community in important ways. The new strategic goals contain more explicit language and focus on equity in ALL organizational and program policies. The plan ultimately serves as an actionable and equitable roadmap for improving health access, addressing social determinants of health, and influencing policies through advocacy.

**The Five New Priority Areas and Strategic Goals**

Priority Area	Strategic Goals
<b>Equity and Inclusion</b>	<i>Engage in population-specific efforts to address the needs of those residents in the district that are historically underserved or particularly impacted by health disparities.</i>
<b>Innovation</b>	<i>Support new and innovative strategies that improve the health and well-being of district residents.</i>
<b>Collaboration</b>	<i>Use collaboration with community organizations to magnify the positive impact on the health and well-being of district residents</i>
<b>Communications</b>	<i>Improve effectiveness and reach of communications to district residents, in a culturally sensitive manner of all resources and activities that enhance their health</i>
<b>Advocacy</b>	<i>Be an advocate for change on issues that impact the health of district residents</i>

As I reflect on the past year, it is gratifying to see how much progress we’ve made as an organization, as we work to implement strategies that focus, allocate, and align our resources to address many of the concerning health trends we saw in our data. Highlighted below, are some of our most significant accomplishments as they relate to each of our new strategic goals:

**Equity and Inclusion**

The plan now has an explicit focus on Diversity, Equity, and Inclusion. Although the District has always focused on health equity through targeted investments in our most vulnerable communities, we have not made it an explicit, stated goal.

- Through Smartie Target training provided by RWC Together and a DEI workshop offered by ACHD, staff learned how economic inequality impacts individuals and families across a wide range of issues, and what policies might address these challenges. We then applied them to the development of our new strategic plan.
- Engaged Circle Up to provide DEI training in schools
- Implemented Board DEI assessment Tool

### ***Innovation***

In developing our new strategic goals, we first analyzed trends in health care and explored ideas for addressing both new and persistent challenges, particularly around access to food, oral health, and mental health services.

- We assessed data from 6 local sources and deployed resources to address immediate and longer-range needs. An example of a short-term response is our holiday food grants program to address the urgent and rising concern of food insecurity. The majority of our funding supports ongoing, long-term initiatives.
- Data showed that a gap exists for people to access even low-cost fitness and health education programs, so we developed a novel pilot program to partner with local Park and Recs to subsidize two health classes for District residents. In turn, they recognize our support of these programs in their published communications.
- A new partnership with American Red Cross will increase opportunities and encourage District residents to learn CPR, basic first aid, and disaster preparedness by making it more affordable. Our intention is to better prepare our residents, and thereby our communities, to respond, stay safe, and recover from a disaster.
- Our school program has been an incubator for several innovative ideas including, most recently, “Care Solace” which connects students and families with mental health resources, a new partnership between Care Solace and “Kognito” a suicide prevention app, and “Early Alert” a text-based program with weekly check-ins and referrals to resources that were piloted in Sequoia Union High School District in 2022.

### **Next steps for 2023**

- Explore innovative strategies to address critical workforce shortages among healthcare workers
- Partner with County Behavioral Health and SMC Office of Education on a mental health roadmap strategy to track various sources of funding to better align, and not duplicate services, to improve systems of care for mental health services.
- Further develop the plan to improve access to quality oral health services for noninsured and under-insured community members

### ***Communication***

An important goal has been to improve communications and public outreach efforts utilizing technology and social media

- Bringing Luz on Board has helped significantly to increase our formal and informal communications with stakeholders through e-newsletters, social media and our annual report.
- Our communication materials are culturally sensitive and presented in English and in Spanish.
- Held a series of 6 Townhall meetings last year on various topics throughout the year to inform and promote District activities
- Our Health Fair on the Square on May 21 brought together 80 organizations and local leaders for a day of wellness activities and health education.
- To build and strengthen community relationships I stay active and involved in initiatives that align with our efforts such as my participation on the SMC Covid Recovery Council and the Sequoia Hospital Grants Committee.
- Our annual report is improving each year and this year we expanded to more households within our boundaries and was mailed in mid- November to be transparent and informative of District activities
- New website launched in October 2018 in English and Spanish, new interactive map. Staff assures that our website is regularly updated and in compliance with legislative requirements.
- The HSI newsletter is sent to families electronically in all 8 school districts.
- We now have a monthly newsletter featuring District activities and highlighting partner programs
- Staff seek opportunities to make presentations to community groups.
- New- Monthly Town Halls on relevant topics- Next one centered on heart health on Feb 16, 2023

### ***Collaboration***

Staff have brought organizations together on multiple occasions to share ideas and seek solutions to a host of the most urgent community needs. These collaborations have resulted in bringing important community benefits including

- The District plays an active role in several community collaboratives including RWC Together, Healthy Community Collaborative, County Covid Recovery Committee, Office of Education, South County Mental Health Collaborative, and many more

### ***Advocacy***

A significant change to our strategic plan is our focus on advocacy as a new priority area. This change re-emphasizes our commitment to advocate for the health and wellness of all District residents going forward. We are still developing in this area, but we've begun taking the following steps:

- Staff are developing a set of Advocacy Guiding Principles and potential strategies to provide direction on a range of issues that impact District residents, specifically Community Health, Finance, Access to Care, and Local government

- We are vigilant in staying informed and engaged in legislation-related discussions and decisions that are relevant to healthcare districts. ACHD keeps us informed of changes in legislative policies and proposed legislation.
- Ms. Bratton remains a member of the ACHD Advocacy committee

## Conclusion

How we define, develop, and sustain our value to the community is how we measure our impact. Anecdotally, we see that our impact is growing by leaps and bounds, and so is our sense of purpose. We have a committed and talented staff to carry out our key objectives and a unified board to provide oversight and set direction. Our Community Grants program serves more residents than ever before and is well aligned with our funding philosophy and other community investments. We are significantly growing our visibility in the community through our use of social media, virtual Town Halls, monthly newsletters, and word-of-mouth of trusted partners. More residents are benefiting from District resources than ever before through greater access to healthy food, quality health care, dental, and behavioral health services through our considerable support of community clinics, non-profits, and school partnerships.

Our five new strategic priorities founded in DEI principles will help ensure that our investments are progressively advancing our community toward impactful outcomes as we look to grow, expand, and evolve our efforts in the months and years ahead. We are halfway through our current fiscal year, working on new goals, while we continue to make tremendous progress on last year's goals.



## Healthy Beginnings Initiative Proposal

*Prepared for Sequoia Health Care District  
February 2023*

First 5 San Mateo County (First 5 SMC) is pleased to present the Sequoia Health Care District (SHD) Board with our proposal for continuation funding for the Healthy Beginnings Initiative for a two-year period from July 1, 2023 through June 30, 2025.

### Background

The Healthy Beginnings Initiative, which focuses on addressing some of the most pressing and pervasive health challenges facing young children and their families in San Mateo County, has been funded by SHD in partnership with First 5 SMC and other contributors since 2020. The Initiative positions SHD as a significant partner and investor for two distinct strategies: Integrated Systems for Children with Special Needs and Enhanced Early Childhood Mental Health Systems. The initial three-year grant was approved by the SHD Board in October 2019 for the term of July 1, 2020 through June 30, 2023.

### Timeline

The goals of the proposed strategies are two-fold: to achieve both direct impact and positive systemic change that benefits our youngest residents, their families, and those that serve them. This approach prioritizes sustainable improvement within organizations and systems of care and allows families beyond the direct service reach to benefit. Systemic investments do not often show immediate returns. In general, successful efforts may take anywhere from three to seven years to produce the desired outcomes. Consequently, sustained funding of these strategies is imperative to realize these gains. First 5 SMC therefore requests an additional two-year partnership with SHD for the two existing program components.

### Integrated Systems for Children with Special Needs

Through ongoing partnership with SHD, First 5 SMC intends to further bolster the continuum of care to identify & treat children with special needs and address systemic issues that impact accessibility & quality of these services. This includes promoting universal social-emotional and developmental screening for children 0-5; embedding screenings & care coordination into pediatric clinics, early learning settings, or family support services; and supporting linkages & timely access to care coordination, assessment, & services for children and families requiring assistance.

As a result of SHD's investment over the past two-and-a-half years, within District boundaries, 380 children have received a developmental screening through Help Me Grow SMC, staff has conducted 25 outreach events to promote the Help Me Grow system, and 457 unique families have been supported via the Help Me Grow Centralized Access Point.

## Healthy Beginnings Initiative Proposal

*Prepared for Sequoia Health Care District  
February 2023*

The draft deliverables for FY 2023-24 can be found in Attachment #1. The proposed two-year budget is below. Detailed budget and scope of work documents for each year of funding will be developed as a part of the contracting process, should the proposal be approved.

<b>Integrated Systems for Children with Special Needs</b>	<b>FY 2023-24</b>	<b>FY 2024-25</b>
Personnel (lead grantee agency staff salaries and benefits, expanded capacity for clinic referrals)	\$198,200	\$198,200
Subcontractors and Consultants (wraparound supports to fill identified gaps, niche expertise for systems)	\$208,900	\$208,900
Operating Expenses	\$19,000	\$19,000
Capital Expenses (laptop, etc)	\$500	\$500
Backbone Agency Initiative Administration & Policy Leadership (F5SMC staff time)	\$15,300	\$15,300
Indirect Costs @ 10% of Personnel	\$19,800	\$19,800
<b>Total</b>	<b>\$461,700</b>	<b>\$461,700</b>

### Enhanced Early Childhood Mental Health Systems

In collaboration with SHD, First 5 SMC will continue supporting trauma- and resiliency-informed practices and policies in child- and family-serving organizations that serve SHD residents. Supports to organizations may include agency self-assessments, cross-agency training and education to better understand the domains of trauma-informed organizational practices, and individualized agency coaching and/or technical assistance to support the integration of trauma-informed practices at an organizational level.

During the current three-year funding term, nine child- and family-serving agencies and County departments have undertaken assessment, individualized coaching, and multi-agency cohorts with the goal of becoming more trauma-informed. These agencies employ approximately 1,500 staff members who in turn support countless families, making the reach of this work significant.

The draft deliverables for FY 2023-24 can be found in Attachment #1. The proposed two-year budget is below. Detailed budget and scope of work documents for each year of funding will be developed as a part of the contracting process, should the grant be approved.

## Healthy Beginnings Initiative Proposal

*Prepared for Sequoia Health Care District*

*February 2023*

Enhanced Mental Health Systems	FY 2023-24	FY 2024-25
Initiative Design	\$28,333	\$28,333
Organizational Change & Assessment Administration	\$23,333	\$23,333
Organizational Coaching	\$26,667	\$26,667
Cohort Facilitation	\$16,667	\$16,667
Community Event	\$13,333	\$13,333
Initiative Leadership & Administration	\$25,667	\$25,667
<b>Total</b>	<b>\$134,000</b>	<b>\$134,000</b>

### Overall Budget

The draft budgets provided here for the Board’s review incorporate the most recent projections for overall cost by strategy and best estimates of the proportion of the overall effort that would be targeted to serve SHD residents by fiscal year. It also takes into consideration other funding partnerships that have been secured to support each strategy. Currently, the Integrated Systems for Children with Special Needs effort leverages funding from Peninsula Health Care District, in addition to funding from First 5 SMC and SHD. The Enhanced Early Childhood Mental Health Systems component receives Mental Health Services Act (MHSA) funding through San Mateo County Health to supplement First 5 SMC and SHD’s investment.

Initiative Strategy/ Component	FY 2023-24	FY 2024-25	TOTAL
Integrated Systems for Children with Special Needs	\$461,700	\$461,700	\$923,400
Enhanced Mental Health Systems (TRISI)	\$134,000	\$134,000	\$268,000
<b>Total</b>	<b>\$595,700</b>	<b>\$595,700</b>	<b>\$1,191,400</b>

### Target Population and Reporting

First 5 SMC is committed to ensuring that we provide a detailed and accurate count of the children, families, and providers served by both Initiative components to ensure a dedicated focus on SHD residents. The current data system utilized by our implementation partners for our Integrated System for Children with Special Needs Initiative tracks clients by address and zip codes. This data can be extracted by location and analyzed to provide breakdowns to the District as desired. In addition, outreach efforts for both Initiative components will be targeted to effectively reach parents and providers within the SHD boundaries.



# Healthy Beginnings Initiative Proposal

*Prepared for Sequoia Health Care District  
February 2023*

## **In Partnership**

Thank you for the opportunity to submit this proposal to the Sequoia Healthcare District Board to continue to build on our three-year partnership to support the District's youngest residents in reaching their greatest potential. We look forward to building on our history of collaboration with you all in service of those we collectively serve.

# Healthy Beginnings Initiative

**Fiscal Year 2023-24 (July 1, 2023 – June 30, 2024)**

## Integrated Systems for Children with Special Needs

### Anticipated Service Deliverables

- Provide direct outreach to 250 community service providers and 500 parents of young children about Help Me Grow SMC and reach 7,000 users via the HMG website.
- Conduct office-based training and/or technical assistance for three pediatric and/or family practices serving SHD children to promote best practices for developmental promotion, surveillance, and screenings.
- Screen 200 unduplicated children using the ASQ-3 and ASQ-SE
- Serve 250 families of young children in SHD with care coordination and navigation supports through the HMG call center.
- Provide enhanced wraparound services to families & providers of young children, including parent-child developmental playgroups, legal services, & multidisciplinary case conferences for those with complex circumstances or conditions

### Anticipated Systems Deliverables

- Ensure that child- and family-serving systems leaders are informed and have input into the implementation and continuous improvement of the HMG system.
- Convene local pediatricians four times to identify opportunities to further efforts to promote universal screening, care coordination, and linkage to services for children with or at risk of special needs & to advise on HMG health provider outreach efforts.
- Utilize two Community Provider Networking meetings per year to promote the use of the HMG Call Center, update the resource database, and align efforts to support early identification and linkages for families.
- Facilitate quarterly Systems Change for Children with Special Needs meetings to elevate opportunities for cross-sector collaboration and information sharing.

## Early Childhood Mental Health Systems

### Anticipated Service Deliverables

- Support three agencies serving SHD families to conduct trauma-informed organizational self-assessments and share the results back with agency staff.
- Continue frequent cross-agency cohort meetings for staff at three large County systems to build understanding about practices of trauma-informed organizations.
- Provide ongoing intensive coaching and/or technical assistance to three large County systems serving SHD families.

### Anticipated Systems Deliverables

- Moderate, curate and promote the use of a local online platform/ resource hub for information and resources to further trauma-informed systems and service delivery.
- Host one community event to share learnings from the nine agency participants of the Trauma- and Resiliency-Informed Systems Initiative and to promote healing for staff in the agencies of focus.
- Support the use of common definitions around trauma and resiliency to better align efforts and promote awareness of trauma and its impacts.

## **Dental Program at San Mateo County Navigation Center in Redwood City Using Dental and Hygiene Students/Residents/Fellows from University of the Pacific's Arthur A. Dugoni School of Dentistry**

### **Objective**

The San Mateo County Navigation in Redwood City will provide dental students/residents/fellows an opportunity to participate in oral healthcare within an integrated, interdisciplinary model of care, incorporating best practices in medicine and oral health for previously and currently homeless individuals seeking routine oral and general healthcare. Participation in this program will allow The Dugoni School of Dentistry to meet two of our five Strategic Priorities: Prepare Confident, Competent Oral Healthcare Providers for Current and Future Practice Models and Expand the Role of the Dugoni School as a Community Partner in Health and Wellness.

The Dugoni School of Dentistry has a long history of participating in programs to provide oral healthcare to those who are unhoused in the communities we serve (<https://dental.pacific.edu/pacific-newsroom/dugoni-school-volunteers-care-san-franciscos-underserved-project-homeless-connect>). Through this collaboration, the Dugoni School of Dentistry (Dugoni) will provide oral healthcare services as part of an interdisciplinary team for this vulnerable population in San Mateo County (SMC). Our goal will be to stabilize and restore diminished oral health resulting from homelessness and other social determinants of health, such that individuals can once again focus on prevention and maintenance of their dentition as they transition into permanent housing. We may continue to see patients after they leave the navigation center to complete the stabilization phase or comprehensive care as appropriate to individual patient needs. At the time that these primary care services have been completed, whether before or after they leave the Navigation Center, we will refer them to a local provider and facilitate their transition to care in their existing or new dental home.

In addition, the proximity of the dental clinic to the SMC jails in Redwood City will make clinical services available to inmates there as well. If during or after the first 2-3 years of the pilot program, it is determined there is adequate chair and clinic capacity to also serve the inmates at the jail that is adjacent to the center, we may also see those patients for comprehensive care on site. In the interim, we would see inmates for emergency care only, with the understanding that access to comprehensive and restorative care for anyone seen on an emergency basis would be the responsibility of the SMC jail through another provider. If the inmates do not have means or insurance to pay for dental services provided in the clinic, it is anticipated that SMC would cover the cost of services provided to inmates. This collaboration between Dugoni and other on-site providers is a unique opportunity to establish best practices in medicine and dentistry for previously homeless individuals and inmates at the jail seeking routine oral and general healthcare through the Navigation Center.

### **Background**

The launch of this program will require Dental and Dental Hygiene Boards of California's approval of the site as an extramural educational site and be subject to all accreditation standards observed by Dugoni and The University. An executed memorandum of understanding (MOU) between participating entities is required. Students/Residents/Fellows from Dugoni will receive training and provide general dental services appropriate to their skill level under the direct supervision of onsite Dugoni faculty. Faculty will also provide care as needed for situations that require skill level above that of students and residents or fellows. The Navigation Center dental clinic will run five days a week with periodic specialty clinics, serving a resident census up to 260. Individuals are anticipated to remain 90-120 days and receive behavioral,

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dental, housing, medical, and social services. The clinic will serve mainly adults, however, patients of any age with needs beyond the capability of the school program to provide in the general dental clinic on site, may also be referred by Dugoni to a local provider or dental specialist for care. This could include private practice, community health clinic, the Dugoni main campus or hospital-based clinics.

### **Learning Resources**

Third year DDS students, second year IDS students (international) and second year dental hygiene students in good standing may participate in the rotation under direct supervision of the clinic director. Residents and/or fellows in advanced and specialty training programs may participate in rotations at the discretion of and as assigned by their program directors, under direct supervision of the clinic director and adjunct specialty faculty as required by CODA (Commission on Dental Accreditation).

### **Attending Faculty**

Clinic director – five days per week

Adjunct specialty faculty – on a monthly rotation or as needed

### **Operating Hours**

Dugoni will provide clinical services from 8 - 5 PM. Clinic will begin at 8:30 am and the last patient will be scheduled no later than 3:30 to allow for a morning huddle and time for documentation at the end of the day.

Dugoni will assign one dedicated faculty member, the clinic director, to oversee all clinical activities four days per week and two days of faculty practice per month to alternate with the oral and maxillofacial surgery (OMFS)/endodontic (ENDO) specialty clinics. This individual must be able to perform the full spectrum of general dental services, including care of children and older adults, basic oral surgery, endodontics, periodontics, and prosthodontics. Supervision of the specialty clinics will be provided by adjunct specialty faculty on site those days. The purpose of the two faculty practice days per month and two specialty clinic days per month is to ensure a full scope of provider types and abilities so that most patient needs can be met by the dental clinic. The faculty member may use the two days of specialty time for non-clinical administrative time each month and work remotely on those days if they so choose.

Assignment of residents and fellows will be established in coordination with their program directors and the Clinic Director. Student hours will be limited during exam periods and student breaks. The Clinic Director and staff may engage in administrative activities and patient care at this time.

Student rotations will take place over 42 weeks during the academic year and clinical services will be provided 48 weeks per year providing an estimated 2,500 patient visits per year. There will be no student rotations during scheduled examination or student vacation periods however faculty practice and resident rotations may continue at the discretion of program directors. The clinic will be closed for all University recognized holidays, faculty development days and staff appreciation days that include an extended period during the Winter Break.

**Dental Program at San Mateo County Navigation Center in Redwood City  
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The clinic director is expected to schedule vacation time during academic breaks. In the event they have a planned absence for the purpose of attending a continuing education program or other professional event, they need to work with their department chair to find an appropriate replacement during their planned absence. In the event of illness or an emergency that occurs in short or without notice, clinic may need to be cancelled and the patients rescheduled, unless the department chair is able to locate an appropriate replacement in the time available.

Dugoni will provide two teaching dental assistants (DAs), cross trained to also provide administrative support for scheduling, billing, and clinic stocking and maintenance. Both will work five days per week. They will alternate chairside and administrative duties as appropriate to meet the various needs within the clinical and educational setting.

Proposed clinic schedule:

<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
OMFS/ENDO Faculty Practice*	Pre-doctoral (2)	Pre-doctoral (2)	Hygiene (2)	Advanced Education in General Dentistry (AEGD) resident

\*Faculty practice will alternate with specialty clinics

**Reimbursement**

Dugoni anticipates a 3-5 year development phase of this clinic staffed exclusively by Dugoni faculty, staff, students, residents, and fellows onsite.

Estimated costs of the program, inclusive of salaries, laboratory, and supply expenses as well as other administrative costs related to clinic functions including but not limited to IT and billing infrastructure to be approximately \$600,000. The revenues based on an estimated 2,500 patient visits annually, Denti-Cal reimbursement rates and procedures most likely provided in this clinic are approximately \$300,000. Closing this gap and meeting the costs required for Dugoni to launch the dental program will require community investment to ensure all needed faculty, staff, and other infrastructure are in place to support patient care as well as maintain educational program standards.

**Two sources of funding will be required to launch the program:**

1) Dugoni will bill Denti-Cal, private dental insurance, fee for service basis, other payment models as appropriate with prior agreement, or other payers as appropriate for delivery of dental care. Dugoni will use its own electronic dental record sytem (Axium) and patients will be designated as patients of Dugoni. Revenue generated from billing will off-set student/resident/fellow and faculty production if they were otherwise providing care in the dental school clinics as well as consumable clinical supplies, materials, laboratory costs and unreimbursed care as a result of Denit-Cal denied claims. However, this reimbursement is not anticipated to be adequate to support dedicated faculty and staff required to operate



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the clinic, provide appropriate supervision, and meet the full range of needs for this vulnerable and at-risk population to receive the treatment required to restore them to oral health.

2) Grant and/or gift funding is required to hire the clinic director and two dental assistant/administrative positions. It is not our intention to draw or borrow from existing campus resources to “piece together” the program. A discrete program with dedicated faculty and staff is required to ensure services can be provided at least 240 days per year. Guaranteed funding sources are required to establish the program for a minimum of four and preferably five years to allow for development of the clinical program and innovation for financial and program sustainability.

Below is an estimated annual budget, assuming a majority Denti-Cal payor mix. Should there be a different mix of payors or there are changes in reimbursement rates or models, we will update the Board. The budget was modeled on projected number of patient visits and common procedures that will be needed by the patients seeking care in this clinic.

### **Annual Budget**

Expected Gross Clinic Revenue	\$382,137.91
Expected Unpaid Claims (20%)	<b>\$ (76,427.58)</b>
Lost Revenue in SF	<b>\$ (20,000.00)</b>
<b>Total Revenues</b>	<b>\$285,710.33</b>
Salary Expense	\$350,000.00
Fringe Expense	\$119,000.00
Supply and Laboratory Expense	\$ 38,428.88
Admin Fee	<u>\$ 97,485.78</u>
<b>Total Expenses</b>	<b>\$604,914.66</b>
<b>Gain (Loss)</b>	<b><u>\$ (319,204.33)</u></b>

Ideally, an endowment would be established to fund the clinic independent of the provider. Dugoni is happy to collaborate with community stakeholders to secure such funds to ensure these services remain available to those in need in perpetuity.

### **Evaluation Methods Overview**

Periodic visits by and consultations with other Dugoni faculty not expressly assigned to the clinic (e.g., Diagnostic Sciences, Special Care Clinic, AEGD, Oral Surgery etc.) will be conducted as needed and without advanced notice to the facility and other providers. The program will be evaluated annually by faculty onsite and at the request of the Associate Dean for Oral Health Education at Dugoni, the Associate Dean for Clinical Affairs, the Inter-professional Education and Extramural Rotation Coordinator or specialty program directors.

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All standards of care observed on campus and as required by The Dental Practice Act will also be observed and adhered to in this clinic as an extension of clinical care provided by Dugoni. Any additional requirements established by SMC and LifeMoves will also be observed.

**Ask**

Five-year financial commitment to support the dental program at San Mateo County Navigation Center operated by University of the Pacific's Arthur A. Dugoni School of Dentistry.

**Approve Revision To Employment Contract Of District Chief Executive**

At the December 15, 2022 Board meeting, Directors made a motion to approve a salary increase of \$18,150 for the Sequoia Healthcare District CEO effective January 1, 2023. This calculation was based on an incorrect salary of \$275,000, rather than the correct salary of \$275,500. This \$500 difference calculates to \$18,183 for a new annual salary of \$293,683.

Motion: To approve amendment of annual salary increase from \$18,150 to \$18,183.

## Sequoia Healthcare District

### CEO Report February 2023

Pamela Kurtzman

#### BUSINESS AND FINANCIAL UPDATE:

##### Financial Summary

- **Tax income-** Actuals at this mid-year are just over \$9M which is about \$1.5M over projected at this point in the budget cycle. We typically receive large distributions in December and February, and we have not yet received a February distribution.
- **Investment income-** We have seen some improvement with the performance of our portfolio over the past couple of months with November being especially good. You can see just how volatile the markets still are given the massive swings in our gains and losses from month to month: July 206,982.00; Aug - 256,044.00; Sept -374,885.00; Oct 246.00; Nov 290,821.00; Dec -3,345.00. By December's end, our investment loss is at -136,225.00 but at our lowest point, we were down -\$424k, which is why I say things have improved. We budgeted a gain of \$80k for the year so we are down \$216k relative to our proposed budget. We will see what happens between now and June, keeping in mind that our funds are directed to the most conservative, low risk investments per CA local agency investment guidelines.
- **Expenses-** at October's end total just over \$2M. The 4-month actuals are relatively consistent with the 4-month budgeted total, aside from the few items indicated in red on the month-to-month financial statements where I have explanations noted.
- **Audit-** Heidi provided information to the new auditors and has begun the audit process. I have every reason to believe that they will produce the report on time.
- **Dignity Settlement Funds-** Bill Graham and I have been discussing a plan to co-invest the settlement funds in oral health access, which we will bring to the Board in the next several weeks.
- **Pension Income-** The pension pass-through was received on Jan 20<sup>th</sup> in the expected amount of \$2.2M. Bill and I are reviewing the payment process for how invoices are paid out of the district pension fund. Currently, the hospital manages the account, but Mark's recommendation is that the District manage the process since we are the owners of the plan. I will soon work with Bill to begin that transition, assuring we have an audit accountability system in place.

##### HSI

- Director of School Health update: We've identified our new Director of School Health! At this point, I cannot disclose who it is until her current employer has

been informed. The new team member will begin to transition into the role over the next month while finishing up a project with their current employer. I will make an official announcement soon!

- Jenny and I are maintaining momentum with school wellness leads, co-leading monthly meetings and planning for the work ahead. Our new HSI director and I will begin meeting with school superintendents in February and March to plan the next school health budget.

## **OTHER UPDATES AND ACTIVITIES**

### **ACHD**

- Board Member (Jan 2022- present). Our next meeting, a strategic planning retreat, will be in person in Sacramento, February 16-17<sup>th</sup>.
- Mark your calendar for the 2023 ACHD Annual Conference to be held September Sept. 14 - 15<sup>th</sup> at the Palisades at Tahoe
- Chair Education Committee (Jan 2021-present), We are planning our educational offerings as well as our next in-person annual conference. Your input is requested! We are seeking your ideas on a variety of education related topics. Please visit this link for more details <https://www.achd.org/achd-call-for-proposals>
- The ACHD recertification process is very close to being completed. This certification will demonstrate that we practice good governance through a core set of accountability and transparency standards and best practices for healthcare districts.

### **Dental Pilot And Clinic Progress**

- I, along with Director's Griffin and Shefren continue to meet with stakeholders and HPSM leadership to finalize a plan for increasing access to oral health services for district residents who face significant barriers to care. We are working to identify the most appropriate and sensible approach for reimbursing the private practice dentist who agree to accept and treat Denti-Cal patients.
- Due to unforeseen circumstances, the consultant we began working with was unable to deliver a comprehensive oral health needs assessment that would inform our decision making regarding a brick and mortar dental clinic. We have not yet been billed for any part of the work that was completed and she does still offer occasional valuable guidance and professional opinion.
- I'm looking to engage another consultant right away who can pull together existing data and develop an RFP for us so we may move the process along.
- Peter Shih, of SMC Health will share with the Board at our Feb 1 meeting, what they are doing to bring dental services to the new Navigation Center in

Redwood City which is operated by LifeMoves, and will later request some level of funding from SHD.

## COMMUNITY INVOLVEMENT

- **Redwood City Together (formerly RWC 2020)** Participate in Executive meetings and attend both Executive and Leadership committee meetings.
- Member of the **County Recovery Coordination Council**. These bi-weekly meetings are intended to inform, advise, and foster dialogue as the county develops its strategic plan to recover from the pandemic. My participation will help ensure that the District is informed and aligned with the larger recovery efforts to collaborate and leverage our resources.
- Participate in monthly meetings of the **County Covid Communications and Equity Workgroup**
- I continue to participate in discussions hosted by **Stanford Social Innovation** and in forums hosted by **County Health Policy and Planning**

*\*See Jenny and Luz's staff reports for activity updates related to community grants and communications.*

*\* Our regularly scheduled April Board meeting is April 5, which is Passover. We need to discuss whether we want to move the meeting to another date.*

**Jenny Bratton**  
**Staff Report Feb-2023**

**Activity Summary**

**I. Community Grant Program**

- Released NEW Mid-Year Scoring Module on Versaic Platform (versus scoring google sheets for the grants committee for scoring)
- Compiled Mid-Year scores in advance of 2nd grant check release in February
- Launched 2023 Grant Cycle:
  - Presented grants info session to community partners on Jan. 11<sup>th</sup> and 12<sup>th</sup>
  - Answering questions and monitoring LOI applications for Feb. 10th deadline
- Next Steps:
  - Will start scheduling virtual site visits with grant partners in February
  - Will create, test, and demo Full-Year Scoring Module with Versaic team
  - Will convene 2023-24 Grants Committee for LOI scoring discussion after Feb. 10<sup>th</sup>
  - Will compile Joint Holiday Food program report outcomes for next Board meeting
  - Will create and send post-pandemic survey to partners
  - Will report outcomes on SHD pilot San Carlos Rec winter classes for future Board meeting

**III. Healthy Schools Initiative (HSI)**

- HSI Team development/support
  - Convening monthly HSI Wellness Team (January 20<sup>th</sup>)
- Met with Special Olympics and Child Mind Institute
- In attendance:
  - School Wellness Alliance Advisory group (January 24<sup>th</sup>)
  - South County Mental Health Collaborative (January 20<sup>th</sup>)
  - Tobacco Education Committee (January 25<sup>th</sup>)

Upcoming SHD-sponsored/participatory events:

- TUPE Brief Intervention Training (Feb. 15-16):  
[www.briefinterventiontraining.eventbrite.com](http://www.briefinterventiontraining.eventbrite.com)
- Impact of Cannabis on Youth: [www.CannabisImpactOnYouth.eventbrite.com](http://www.CannabisImpactOnYouth.eventbrite.com)
- Stanford Cannabis Prevention and Awareness Conference:  
<https://tinyurl.com/ConfRegistration2023>

**IV. ACHD**

- Advocacy Committee (January 19<sup>th</sup>): AB 40 (Rodriguez): Emergency medical services  
(For a complete list of ACHD positions on active bills, visit:  
[www.achd.org/monthlylegislativeupdate](http://www.achd.org/monthlylegislativeupdate))

**IV. Communications**

- Worked with Luz to update grants webpage
- Coordinated with Charlene Margot (Parent Education Series) on February Town Hall on Heart Health (February 16<sup>th</sup>)
- Continue conversation with Red Cross for future classes
- Participate in Health Fair planning

## January Staff Report

### Luz Garcia — Communications Specialist

#### Grants Info Sessions

- Designed all promotional materials for the January Grants Info Sessions: Eventbrite banner, social media posts and print ads
- Managed event communication with 30+ attendees via Eventbrite by sending pre and post event emails
- Designed and uploaded informational pdf's for the [2023-24 grants cycle](#) & about the [2022-23 grantees](#) (note: We encourage you to share these with your network to help us increase community awareness of the grants program. Thank you!)

#### Newsletters

- Continued building monthly partner newsletters while steadily increasing our audience reach.
  - [December 2022](#) update
  - [January 2023](#) update
- Acquired successful open rates of > 50% ([average open rate](#) across industries is 21.33%)

#### Health Fair 2023

- Began health fair planning with PAL.
  - Progress update: Assigned roles, produced a task list & finalized a date (mark your calendars for Saturday, July 29<sup>th</sup>)

#### Public Outreach

- *SHD Town Hall Eventbrite Banner*
  - We hope you can join us and help us spread the word about our [upcoming town hall](#) on Thursday, February 16<sup>th</sup> from 6-7 PM which will focus on heart health.
- *Social Media*
  - Continuing to see growth across both Instagram and Facebook
  - Continuing to build a district social media policy.
- *Website*
  - Provided support to connect with Streamline and Granicus and discuss a potential transition to a new system.
    - Gathered feedback from fellow health districts about their experiences to determine next steps.
- *Webinar - Causal Pathways: Discovering How, Why, and When Our Strategies Matter*
  - Key takeaway: designing impactful strategies in the district will require that we dig deeper into the conditions that are present and can/will affect outcomes.

#### Other

- *Asana*
  - Developed a template to streamline team project communication and collaboration and to track progress toward strategic goals.