

#### **BOARD OF DIRECTORS**

Anne Stokman, RN, President Timothy Benefield, Vice-President Becky Campo, Secretary Luis Avila, Treasurer (Vacant), Zone 4-Director

PO Box 187, Patterson, CA 95363 Phone (209) 892-8781 Fax (209) 892-3755

### **BOARD OF DIRECTORS MEETING**

Monday, August 26, 2024 @ 6:00 pm

Del Puerto Health Center, 1700 Keystone Pacific Parkway, Ste B, North Conference Room

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

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

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

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

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

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

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

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

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

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

## DEL PUERTO HEALTH CARE DISTRICT Board of Directors Meeting Monday, August 26, 2024 @ 6:00 pm

Del Puerto Health Center, 1700 Keystone Pacific Parkway, Ste B, North Conference Room

- Call to Order
- 2. Pledge of Allegiance
- Board of Directors Roll Call
- 4. Reading the Vision, Mission, and Value Statements

Vision: "A locally cultivated, healthier community."

Mission: "To provide, promote, and partner in quality healthcare for all."

Values: "Compassion – Commitment – Excellence"

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

**Action** 

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

8. **Consent Calendar\*** [Routine committee reports, minutes, and non-controversial items]

Action

- A. \*Approve Finance Committee Minutes June 22, 2024
- B. \*Approve Finance Report & Warrants for the month ending June 30, 2024
- C. \*Approve Board Meeting Minutes July 29, 2024
- D. \*Approve Finance Report & Warrants for the month ending July 31, 2024
- E. \*Approve Board Meeting Minutes August 12, 2024
- 9. Regular Calendar

11.

A. \*Any Consent Calendar items moved to the Regular Calendar

Action

B. Renewal of Health Center Medical Director's Contract

Action

10. **Recess to Closed Session** [The Board of Directors may recess to closed session to discuss certain matters as legally permitted. Any action taken shall be reported in open session.]

Public Employment Employee Performance Evaluation

Title: Chief Executive Officer

- Return to Open Session Report of Closed Session Actions
- 12. Regular Calendar (continued)
  - C. Review Chief Executive Officer's Compensation & Contract

Action

13. Written Reports (Directors may raise any questions they have)

**Discussion** 

A. Administration – Ms. Freese

Gov't Code section 54957:

- B. Ambulance Mr. Willette
- C. Health Center Ms. Benitez
- D. Human Resources Mr. Trefault
- E. Legislative Watch List Ms. Freese
- F. Community Health Needs Assessment Director Stokman/Ms. Freese
- 14. Strategic Plan
  - A. FY 2024-25 Draft Strategic Plan with Prioritized Objectives, SMART Goals, and Action Plan

# DEL PUERTO HEALTH CARE DISTRICT Board of Directors Meeting Monday, August 26, 2024 @ 6:00 pm

Monday, August 26, 2024 @ 6:00 pm
Del Puerto Health Center, 1700 Keystone Pacific Parkway, Ste B, North Conference Room

- 16. Closed Session [Board of Directors may recess to closed session to discuss certain matters as legally
  - A. <u>Health & Safety Code 321069(c)(2)</u> District Health Care Trade Secret (i.e., necessary to initiate a new district service or program or add a district health care facility and, if prematurely disclosed, create a substantial probability of depriving the district of a substantial economic benefit).
- 17. Return to Open Session Report of Closed Session Actions

permitted. Any action taken shall be reported in open session.]

- 18. Director Correspondence, Comments, Future Agenda Items Information Only
- 19. Upcoming Regular Board and Standing Committee Meeting Dates Information Only

Finance – Wed, Sep 25 @ 6:00 PM
Finance – Wed, Oct 23 @ 6:00 PM
Finance – Wed, Nov 20 @ 6:00 PM
Board – Mon, Nov 25 @ 6:00 PM
Board – Mon, Nov 25 @ 6:00 PM

20. Adjourn

## DEL PUERTO HEALTH CARE DISTRICT 875 E Street, Patterson, CA 95363 FINANCE MEETING MINUTES June 22, 2024

## 1. Call to order/Attendance

The meeting was called to order by Luis Avila 8:35 AM

Other Board Members Present: Becky Campo

**Staff Members Present:** Karin Freese, Administrative Director/CEO and Maria Reyes-Palad, Financial Accounting Manager

**2. Public Participation –** there were no comments.

## 3. Acceptance of Agenda

M/S/C Becky Campo/Luis Avila to accept the agenda as presented.

## 4. Finance Report Review

**A.** Review for Approval: April 29, 2024, Finance Meeting Minutes

M/S/C Becky Campo/Luis Avila to accept the minutes for April 29, 2024, as presented.

## B. Review Financial Reports for April 2024

Maria Reyes-Palad reviewed the Financial Reports for April 2024 and answered all questions regarding the reports.

M/S/C Becky Campo/Luis Avila to recommend that the Board accept the April 2024 Financial Reports as presented.

## C. Review for Recommendation April 2024 Warrants

Maria Reyes-Palad reviewed the report and answered all questions regarding the Warrants. M/S/C Becky Campo/Luis Avila to recommend that the Board to accept the Warrants as presented.

## **D.** Review Financial Reports for May 2024

Maria Reyes-Palad reviewed the Financial Reports for May 2024 and answered all questions regarding the reports.

M/S/C Becky Campo/Luis Avila to recommend that the Board accept the May 2024 Financial Reports as presented.

### E. Review for Recommendation May 2024 Warrants

Maria Reyes-Palad reviewed the report and answered all questions regarding the Warrants. M/S/C Becky Campo/Luis Avila to recommend that the Board to accept the Warrants as presented.

## 5. Old Business

## A. FY24-25 Budget Draft

Maria Reyes-Palad presented the FY24-25 Budget Draft per Department with supporting Budget Narrative. Karin Freese and Maria Reyes-Palad answered all questions from Becky Campo and Luis Avila.

M/S/C Becky Campo/Luis Avila to recommend that the Board to accept the FY24-25 Budget with Overall Net Income of \$ 1,781,638 as presented.

## 6. New Business – NONE

### 7. Accounting and Finance Manager Report

A. Asset Replacement Fund Update 2024

No discussion or review was made of Asset Replacement Fund Update 2024. Information Only – No Action Taken.

## B. E Street Land & Building Details

No discussion or review was made of E Street Land & Building Details. Information Only – No Action Taken.

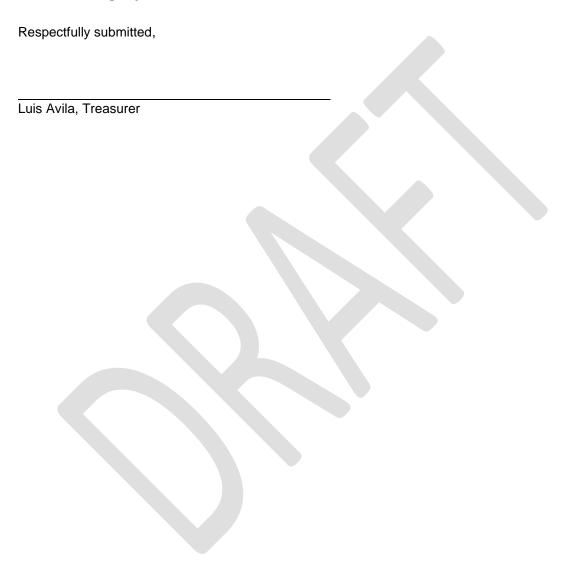
## DEL PUERTO HEALTH CARE DISTRICT 875 E Street, Patterson, CA 95363 FINANCE MEETING MINUTES June 22, 2024

**C.** Set Schedule for Committee Review of Account Reconciliations

To be scheduled with Becky Campo to review the account Reconciliations.

Next Finance Committee Meetings scheduled as follows: Wednesday, July 24 @ 6:30PM Thursday, August 22 @ 6:30 PM Wednesday, September 25 @ 6:30PM

8. Meeting adjourned - 10:05 AM



## Del Puerto Health Care District Balance Sheet

As of June 30, 2024

	Jun 30, 24	May 31, 24	Change	Jun 30, 23	Change	Notes
ASSETS						
Total Current Assets	7,707,579	7,563,927	2%	5,340,068	44%	
Total Fixed Assets	5,106,582	5,041,037	1%	4,960,748	3%	
Total Other Assets	273,263	273,263		273,263		
TOTAL ASSETS	13,087,424	12,878,227	2%	10,574,079	24%	
LIABILITIES & EQUITY						•
Liabilities						
Current Liabilities						
Accounts Payable						
Total 211.000 · Accounts Payable Total	28,881	102,212	(72%)	110,832	(74%)	1
Total Accounts Payable	28,881	102,212	(72%)	110,832	(74%)	•
Credit Cards						_
Total 214.000 · Umpqua CC#2230				120	(100%)	•
Total Credit Cards				120	(100%)	•
Other Current Liabilities						
Total 253.000 · Accrued Payroll Liabilities	425,417	423,851	0%	372,165	14%	
253.280 · COBRA Premium Payable	(1,586)	(1,586)			(100%)	
Total 254.000 · Current Loan Payable	68,096	68,096		68,096		
257.000 · Keystone C CAM	156	350	(55%)		100%	
257.500 · Keystone C Security Deposit	5,000	5,000		5,000		-
Total Other Current Liabilities	497,083	495,711	0%	445,261	12%	-
Total Current Liabilities	525,964	597,923	(12%)	556,213	(5%)	-
Long Term Liabilities						
270.000 · Deferred Inflows - Leases	356,180	356,180		356,180		
290.010 · USDA Loan - 1700 Keystone B	1,302,589	1,308,265	(0%)	1,370,517	(5%)	
Total Long Term Liabilities	1,658,769	1,664,445	(0%)	1,726,697	(4%)	
Total Liabilities	2,184,733	2,262,368	(3%)	2,282,910	(4%)	
Equity						
350.000 · Unrestricted Assets	1,869,853	1,801,117	4%	1,396,247	34%	
Total 360.000 · Assigned Fund Balance	2,672,135	2,980,870	(10%)		1%	
Total 370.000 · Restricted Fund Balance	2,174,605	1,930,559	13%	242,870	795%	
390.000 · Net Fixed Assets (Capital)	2,492,762	2,492,762		2,492,762		
Net Income	1,693,337	1,410,552	20%	1,523,076	11%	Overall result
Total Equity	10,902,692	10,615,860	3%	8,291,171	31%	•
TOTAL LIABILITIES & EQUITY	13,087,425	12,878,228	2%	10,574,081	24%	-

	Jun 30, 24	May 31, 24
Month End Cash Balance	6,415,442	6,145,252
101.015 - TCB Keystone C 8641	(418,355)	(422,759)
103.100 - TCB USDA Debt Reserve 7237	(122,960)	(122,958)
370.010 - Mitigation Fees	(1,173,885)	(1,169,839)
360.030 - Asset Replacement Fund	(1,181,135)	(1,489,870)
AP & Payroll Liabilities	(454,298)	(526,063)
UNENCUMBERED CASH	3,064,809	2,413,763
Percent of Operating Reserve	206%	162%
360.070 - Operating Reserve	1,491,000	1,491,000

# Del Puerto Health Care District YTD by Class

July 2023 through June 2024

	Total 00 Tax	Revenue	Total 01 D	PHCD	Total 02 Pa		Total 03 De		Total 06 K	•	c	VERALL	
	Jul '23 - Jun		Jul '23 - Jun		Jul '23 - Jun		Jul '23 - Jun		Jul '23 -		Jul '23 - Jun		
	24 Budget		24	Budget	24	Budget	24	Budget	Jun 24	Budget	24	Budget	%
Ordinary Income/Expense													
Income													
401.000 · Gross Patient Service Revenue					10,724,343	11,275,753	4,406,344	3,684,467			15,130,687	14,960,220	101%
403.000 · Adjustments					(6,371,621)	(7,167,996)	(670,621)	(330,057)			(7,042,242)	(7,498,053)	94%
405.000 · Bad Debt					(743,223)	(826,513)	(35,178)				(778,401)	(826,513)	94%
407.000 · Other Income			2,098	3,000	10,243	5,700	107,097	10,000			119,438	18,700	639%
Total Income			2,098	3,000	3,619,742	3,286,944	3,807,642	3,364,410			7,429,482	6,654,354	112%
Gross Profit			2,098	3,000	3,619,742	3,286,944	3,807,642	3,364,410			7,429,482	6,654,354	112%
Expense													
601.000 · Salaries & Wages			546,738	522,074	1,707,929	1,684,626	1,558,649	1,518,969			3,813,316	3,725,669	102%
602.000 · Employee Benefits			123,590	140,703	395,881	416,209	429,094	442,605			948,565	999,517	95%
603.000 · Professional Fees			78,529	94,000	59,207	52,874	408,002	411,920			545,738	558,794	98%
604.000 · Purchased Services			14,674	16,885	248,111	277,884	369,179	384,793			631,964	679,562	93%
605.000 · Supplies			7,903	8,258	100,700	90,837	108,106	94,404			216,709	193,499	112%
606.000 · Utilities			7,907	7,708	25,482	23,447	45,741	46,279			79,130	77,434	102%
607.000 · Rental and Lease			245	300			2,457	2,430			2,702	2,730	99%
608.000 · Insurance Coverages			43,830	40,317	229,265	244,060	134,703	127,426			407,798	411,803	99%
609.000 · Maintenance & Repairs			1,341	2,418	91,608	83,660	37,218	33,381			130,167	119,459	109%
610.000 · Depreciation and Amortization			19,795	22,963	184,053	192,570	95,540	97,208	47,727	47,597	347,115	360,338	96%
611.000 · Other operating expenses	24,300	25,756	77,668	75,064	536,357	527,983	121,891	105,554			760,216	734,357	104%
699.999 · Condensed Item Adj. Expense			(867,364)	(874,848)	433,682	437,424	433,682	437,424					
Total Expense	24,300	25,756	54,858	55,842	4,012,275	4,031,574	3,744,262	3,702,393	47,727	47,597	7,883,422	7,863,162	100%
Net Ordinary Income	(24,300)	(25,756)	(52,760)	(52,842)	(392,533)	(744,630)	63,380	(337,983)	(47,727)	(47,597)	(453,940)	(1,208,808)	38%
Other Income/Expense													
Other Income													
701.000 · District Tax Revenues	1,732,660	1,609,732			250,273	247,409					1,982,933	1,857,141	107%
702.000 · Impact Mitigation Fees													
703.000 · Investment Income	15		82,593	40,000	0		0				82,608	40,000	207%
704.000 · Interest Expense							(52,792)	(52,792)			(52,792)	(52,792)	100%
705.000 · Tenant Revenue									137,956	116,956	137,956	116,956	118%
710.000 · Misc Other Income			2,154		300		10,012	3,800			12,466	3,800	328%
Total Other Income	1,732,675	1,609,732	84,747	40,000	250,573	247,409	(42,780)	(48,992)	137,956	116,956	2,163,171	1,965,105	110%
Other Expense													
802.000 · Keystone District Expense									15,895	17,936	15,895	17,936	89%
810.000 · Misc Other Expense													
Total Other Expense									15,895	17,936	15,895	17,936	89%
Net Other Income	1,732,675	1,609,732	84,747	40,000	250,573	247,409	(42,780)	(48,992)	122,061	99,020	2,147,276	1,947,169	110%
Net Income	1,708,375	1,583,976	31,987	(12,842)	(141,959)	(497,221)	20,601	(386,975)	74,334	51,423	1,693,338	738,361	229%

# Del Puerto Health Care District Warrants by Bank Account

June 2024

		Julie 2024		
Type	Date Num	Name	Credit	Notes
101.000 · Cash and o	cash equivalents			
101.010 - Tri Count	•			
101.011 - TCB-Op	erating Checking 17	39		
Bill Pmt -Check	06/13/2024 ACH	Akadimi Foundation	8,716.00	Board Retreat
Bill Pmt -Check	06/13/2024 ACH	Beta Healthcare Group	253.13	
Bill Pmt -Check	06/13/2024 ACH	DeliverHealth	316.00	
Bill Pmt -Check	06/13/2024 ACH	Life Line	340.20	
Bill Pmt -Check	06/24/2024 ACH	Beta Healthcare - Workers Comp		Prepaid Insurance
Bill Pmt -Check	06/24/2024 ACH	Beta Healthcare Group	•	Prepaid Insurance
Bill Pmt -Check	06/14/2024 ACH	McAuley Ford		New Truck
Bill Pmt -Check	06/13/2024 EFT	City Of Patterson-H2O, sewer, garbag	480.88	
Bill Pmt -Check	06/05/2024 EFT	Umpqua Bank	12,604.36	
Bill Pmt -Check	06/21/2024 EFT	ABW Medical, LLC	8,230.00	
Bill Pmt -Check	06/20/2024 EFT	Athena Health, Inc.		collection catch up
Bill Pmt -Check	06/28/2024 EFT	ABW Medical, LLC	800.00	,
Bill Pmt -Check	06/28/2024 EFT	MedStatix, Inc	160.00	
Bill Pmt -Check	06/03/2024 32896	Airgas USA, LLC	219.64	
Bill Pmt -Check	06/03/2024 32897	Bound Tree Medical LLC	674.53	
Bill Pmt -Check	06/03/2024 32898	Data Path, Inc	6,314.34	
Bill Pmt -Check	06/03/2024 32899	Economic & Planning Systems, Inc		Nexus Study
Bill Pmt -Check	06/03/2024 32900	GreenWorks Janitorial Services	4,145.00	, <b>,</b>
Bill Pmt -Check	06/03/2024 32901	Hi-Tech EVS, Inc.	1,481.89	
Bill Pmt -Check	06/03/2024 32902	Life-Assist	3,879.95	
Bill Pmt -Check	06/03/2024 32903	McKesson Medical Surgical Inc.	641.08	
Bill Pmt -Check	06/03/2024 32904	MD - Rodriguez, Jose	35,333.33	
Bill Pmt -Check	06/03/2024 32905	Mission Linen Supply	583.04	
Bill Pmt -Check	06/03/2024 32906	MO-CAL Office Solutions	109.74	
Bill Pmt -Check	06/03/2024 32907	Monique Whitworth	600.00	
Bill Pmt -Check	06/03/2024 32908	Pacific Records Management	333.60	
Bill Pmt -Check	06/03/2024 32909	Patterson Irrigator	1,530.00	
Bill Pmt -Check	06/03/2024 32910	PG&E	26.91	
Bill Pmt -Check	06/03/2024 32911	Riggs Ambulance Service, Inc.	175.00	
Bill Pmt -Check	06/03/2024 32912	Sanofi Pasteur, Inc	5,180.17	
Bill Pmt -Check	06/03/2024 32913	Stericycle	638.14	
Bill Pmt -Check	06/03/2024 32914	Stericycle	191.45	
Bill Pmt -Check	06/03/2024 32915	Verizon Wireless	534.15	
Bill Pmt -Check	06/03/2024 32916	West Side Storage Baldwin	13.50	
Bill Pmt -Check	06/03/2024 32917	Wright, L'Estrange & Ergastolo	148.00	
Bill Pmt -Check	06/13/2024 32918	Airgas USA, LLC	155.57	
Bill Pmt -Check	06/13/2024 32919	AMR-American Medical Response	8,078.07	
Bill Pmt -Check	06/13/2024 32920	BICSEC Security, Inc	25.00	
Bill Pmt -Check	06/13/2024 32921	Bound Tree Medical LLC	985.50	
Bill Pmt -Check	06/13/2024 32922	City Of Patterson-H2O, sewer, garbag	615.83	
Bill Pmt -Check	06/13/2024 32923	Comcast - Other	192.19	
Bill Pmt -Check	06/13/2024 32924	Comcast Business Voice Edge	2,250.39	
Bill Pmt -Check	06/13/2024 32925	Frontier-3755	300.27	
Bill Pmt -Check	06/13/2024 32926	Gilberto Arroyo-06	VOID	
The Onook	55, . 5, 252   02020		V 3.D	Prepaid Association
Bill Pmt -Check	06/13/2024 32927	Keystone Pacific Business Park Owne	20,928.00	•
Bill Pmt -Check	06/13/2024 32928	Language Line	217.95	
Bill Pmt -Check	06/13/2024 32929	McAuley Ford	3,916.10	
Bill Pmt -Check	06/13/2024 32930	McKesson Medical Surgical Inc.	217.50	
Bill Pmt -Check	06/13/2024 32931	MurphyAustin	42.50	

9:21 AM 07/19/24 Accrual Basis

# Del Puerto Health Care District Warrants by Bank Account

June 2024

Time	Data	Missee	Name	ا الاحتاد	Notes
Туре	Date	Num	Name	Credit	Notes
Bill Pmt -Check	06/13/2024		Patterson Tire	1,870.03	
Bill Pmt -Check	06/13/2024		Paul Oil Co., Inc.	3,964.51	
Bill Pmt -Check	06/13/2024		Physicians Service Bureau	358.78	
Bill Pmt -Check	06/13/2024		Quest Diagnostics	304.20	
Bill Pmt -Check	06/13/2024		Solutions Group	125.54	
Bill Pmt -Check	06/13/2024		Stericycle / Shred-it	344.12	
Bill Pmt -Check	06/13/2024		Stericycle / Shred-it	118.69	
Bill Pmt -Check	06/13/2024	32939	TID Turlock Irrigation District +06	1,518.49	
Bill Pmt -Check	06/13/2024		US Postal Service	478.00	
Bill Pmt -Check	06/13/2024	32941	Westside Landscape & Concrete	302.00	
Bill Pmt -Check	06/13/2024	32942	Workbench True Value Hdwe.	2.04	
					Prepaid Membership
Bill Pmt -Check	06/24/2024	32943	ACHD-Assoc of CA Healthcare District	4,870.00	Dues
Bill Pmt -Check	06/24/2024	32944	Airgas USA, LLC	102.30	
Bill Pmt -Check	06/24/2024	32945	Bound Tree Medical LLC	9,811.11	
Bill Pmt -Check	06/24/2024	32946	Crescent Supply	432.17	
Bill Pmt -Check	06/24/2024	32947	Data Path, Inc	181.19	
Bill Pmt -Check	06/24/2024	32948	DMV - Dept of Motor Vehicles	19,012.00	New Ambulance Tax
Bill Pmt -Check	06/24/2024	32949	Frayer Electric, Inc.	300.00	
Bill Pmt -Check	06/24/2024	32950	Life-Assist	1,354.91	
Bill Pmt -Check	06/24/2024	32951	McKesson Medical Surgical Inc.	4,211.72	
Bill Pmt -Check	06/24/2024	32952	Mission Linen Supply	874.56	
Bill Pmt -Check	06/24/2024	32953	Mr. Rooter Plumbing	4,398.65	
Bill Pmt -Check	06/24/2024	32954	Patterson-Westly Chamber of Comme	100.00	
Bill Pmt -Check	06/24/2024	32955	Paul Oil Co., Inc.	4,392.73	
Bill Pmt -Check	06/24/2024	32956	PG&E	30.85	
Bill Pmt -Check	06/24/2024	32957	Staples Advantage	57.47	
Bill Pmt -Check	06/24/2024	32958	West Side Storage Baldwin	216.00	
Bill Pmt -Check	06/24/2024	32959	Zoll	189.94	
Check	06/28/2024	32960	REFUND - Ambulance:REFUND - Kai:	1 160 97	
Check	06/28/2024		REFUND - Ambulance:REFUND - Kai:	3 870 00	Resissued Payer's
Check	06/28/2024		REFUND - Ambulance:REFUND - Kai:	4,865.00	Overpayments
Total 101.011 · TC				385,608.02	
101.012 - TCB-Pay		-	1700	303,000.02	
Liability Check			Payroll Direct Deposit	100,681.90	
Liability Check	06/18/2024		Payroll Direct Deposit	98,608.04	
Liability Check	06/06/2024	EFT	AIG (VALIC)	15,316.02	
Liability Check	06/20/2024		AIG (VALIC)	14,431.24	
Liability Check	06/26/2024		AFLAC	1,254.44	
Liability Check	06/26/2024		CA Choice	49,198.35	
Liability Check	06/26/2024		Principal Life Insurance Co	6,840.45	
Liability Check	06/06/2024		EDD State of California	8,309.47	
Liability Check	06/06/2024		Internal Revenue Service	42,162.97	
Liability Check	06/18/2024		EDD State of California	7,034.49	
Liability Check	06/18/2024		Internal Revenue Service	37,485.09	
Paycheck	06/06/2024		Employee Payroll	3,686.83	
Paycheck	06/06/2024		Employee Payroll	462.86	
Paycheck	06/06/2024		Employee Payroll	840.05	
Paycheck	06/06/2024		Employee Payroll	1,478.75	
Paycheck	06/06/2024		Employee Payroll	4,816.49	
Liability Check	06/06/2024		California State Disbursement Unit	296.30	
-			Franchise Tax Board		
Liability Check	06/06/2024	20110	FIGURE 1 AX DUALU	448.87	

9:21 AM 07/19/24 Accrual Basis

## Del Puerto Health Care District Warrants by Bank Account

June 2024

Туре	Date	Num	Name	Credit	Notes
Liability Check	06/06/2024	25776	Stanislaus County Sheriff - Garn 37	226.00	
Liability Check	06/06/2024	25777	United Steelworkers	351.19	
Paycheck	06/20/2024	25778	Employee Payroll	2,594.86	
Paycheck	06/20/2024	25779	Employee Payroll	594.64	
Paycheck	06/20/2024	25780	Employee Payroll	1,705.31	
Liability Check	06/20/2024	25781	California State Disbursement Unit	296.30	
Liability Check	06/20/2024	25782	Franchise Tax Board	592.21	
Liability Check	06/20/2024	25783	Stanislaus County Sheriff - Garn 37	32.02	
Liability Check	06/20/2024	25784	United Steelworkers	338.84	
Liability Check	06/26/2024	25785	LegalShield	658.25	
Total 101.012 · To	CB-Payroll Ac	count 29	99	400,742.23	
101.015 · TCB - H	Keystone C 80	641			
Bill Pmt -Check	06/13/2024	10398	City Of Patterson-H2O, sewer, garbag	179.80	
Bill Pmt -Check	06/13/2024	10399	Gilberto Arroyo-06	375.00	
Bill Pmt -Check	06/13/2024	10400	Keystone Pacific Business Park Owne	16,708.00	
Bill Pmt -Check	06/13/2024	10401	TID Turlock Irrigation District +06	363.22	
Total 101.015 · To	CB - Keystone	C 8641	-	17,626.02	
Total 101.010 · Tri	Counties Bank	k	, <del>-</del>	803,976.27	
otal 101.000 · Cash	n and cash eq	uivalents	-	803,976.27	
03.000 - Restricted	•			·	
103.100 - TCB-USI		erve 723	7		
Check	06/15/2024	eft	USDA Rural Development Loan-EFT	10,060.00	
Total 103.100 · TCl	B-USDA Debt	Reserve	·	10,060.00	
otal 103.000 · Rest	ricted Funds		<del>-</del>	10,060.00	
TAL			<del>-</del>	814,036.27	
			-	014,000121	
	Less: Irregula	ır Items (	highlighted)	246,633.12	
	NET WARD	ANTO	SSUED - JUNE 2024	567,403.15	



#### **BOARD OF DIRECTORS BOARD OF DIRECTORS**

Anne Stokman, RN, President Timothy Benefield, Vice-President Becky Campo, Secretary Luis Avila, Treasurer

PO Box 187, Patterson, CA 95363 Phone (209) 892-8781 Fax (209) 892-3755

## BOARD OF DIRECTORS MEETING MINUTES Monday, July 29, 2024 @ 6:00 pm

1. Call to order at 6:05 pm by President, Anne Stokman

2. Pledge of Allegiance

3. Roll Call

**Directors Present**: President, Anne Stokman

Vice President, Timothy Benefield

Treasurer, Luis Avila Secretary, Becky Campo

Staff Present: CEO, Karin Freese

Ambulance Director, Paul Willette HC Manager, Suzie Benitez HR Manager, Robert Trefault

Clerk of the Board/Financial Accounting Manager, Maria Reyes-Palad

Clinical Ed and QI Manager, Jim Whitworth

District Legal Council: Dave Ritchie, Cole Huber, LLP

We have a quorum.

4. Reading of the District's Vision, Mission, and Value Statements:

Vision: "A locally cultivated, healthier community."

Mission: "To provide, promote, and partner in quality healthcare for all."

Values: "Compassion – Commitment – Excellence"

## 5. Public Comment Period

Ms. Sylvia Ramirez attended this meeting with her son. She introduced herself as a churchmate of Director Benefield, a resident for seventeen (17) years and having thirteen (13) years of medical background that interested her to be a prospected Board candidate for Zone 4.

- **6. Declarations of Conflict** [Board members disclose any conflicts of interest with agenda items] None.
- 7. Approval of Agenda:

M/S/C: To approve the agenda as presented.

Directors Campo/Benefield

Ayes: Directors Stokman, Benefield, Avila, Campo

Nays: None Abstain: None Motion: Passed

**8. Consent Calendar\*** [Routine committee reports, minutes, and non-controversial items]

A. \* Approve Board Meeting Minutes – June 24, 2024

M/S/C. Approve the Consent Calendar as presented.

Directors Campo/Avila

Ayes: Directors: Stokman, Benefield, Avila, Campo

Nays: None Abstain: None Motion: Passed

- **9. Regular Calendar**\* [Members of the public may address the Board as the Board considers each item. Each speaker is allowed a maximum of five minutes.]
  - A. \*Any Consent Calendar items moved to the Regular Calendar None

## B. Approval of New Middle Management Payscale

Mr. Robert Trefault presented salary market evaluations for three mid-management positions such as Staff Accountant, Assistant HC Manager and Executive Secretary. Analysis data were based and compared with all healthcare districts salary ranges. Job descriptions were reviewed and updated to what is currently performed. Budget impact of estimated amount of \$40,000 for base salary not including benefits.

This item is tabled for next meeting with updated Job Descriptions to be presented as well as the budget impact on administration costs.

## C. Approval of Executive Secretary Job Description

Mr. Robert Trefault presented the Executive Secretary job description with salary of \$71K - \$89K. This position was budgeted with a base salary of \$65K. After reviewing the job description and market salary range, this requires a budget adjustment of \$35,000, total of base salary plus benefits.

**M/S/C. To** approve Executive Secretary Job Description as presented with a budget impact of \$35,000.

Directors Benefield/Avia

Ayes: Directors: Stokman, Benefield, Avila, Campo

Nays: None Abstain: None

Motion: Passed - Roll Call Vote

## D. Update on Annual CEO Evaluation

Director Stokman and Director Benefield had a meeting with Robert Trefault and made a decision to review last year's survey, compare Board, management and employees responses and to set criteria for this year's CEO Evaluation. Survey link for CEO evaluation will be sent by Mr. Robert Trefault next day for all the Board to complete.

## 10. Review of Written Reports

- A. Administration Ms. Freese
  - Fiscal operating results including mitigation fees is \$2.5M
  - Nexus Study will be presented by end of August 2025
  - Back To School Block Party and National Night Out Event which the district will be participating
  - CSDA, CAA and ACHD Annual Conference is September 2024
  - Special Leadership Academy is October 2024
  - \$95K Insurance Loss Claim for Clinic's COVID losses
  - Datapath cybersecurity platform analysis report
  - Happy or Not survey report

- Responses on 1<sup>st</sup> and 2<sup>nd</sup> Survey which identifies the district's priorities
- Special meeting will be scheduled to discuss the Strategic survey results of priorities
- B. Ambulance Paul Willette
  - Number of transports for April, May & June
  - Events where Ambulance participated
  - Employee Anniversaries
- C. Health Center Ms. Benitez
  - 1260 Encounters for June 2024
  - Erica Mercado is a great help to Dr. Rodriguez
  - Lizandro Barragan is on paternity bonding leave for 8 weeks
  - Clinic's staff evaluation was done
  - Asset inventory
  - Events to attend Back to School Block Party
  - Healthnet Depression event in October 2024
  - Director Avila mentioned NAMI National Alliance on Mental Illness
  - Quality Performance 2024
- D. Human Resources Mr. Trefault
  - Employee Engagement Survey results with 88% respond rate
- E. Legislative Watch List Ms. Freese
  - Four (4) items that will impact the district were discussed
- F. Community Health Needs Assessment Director Stokman/Ms. Freese
  - Estimate of cost will be provided by Sac State for the next assessment on January 2025
- 11. Strategic Planning CEO's Annual Report

FY23-24 Accomplishments was reported by a slideshow presentation.

### Adjourned to Closed Session @ 7:44 pm

- **12. Closed Session** [Board of Directors may recess to closed session to discuss certain matters as legally permitted. Any action taken shall be reported in open session.]
  - A. <u>Health & Safety Code 321069(c)(2)</u> District Health Care Trade Secret (i.e., necessary to initiate a new district service or program or add a district health care facility and, if prematurely disclosed, create a substantial probability of depriving the district of a substantial economic benefit).

B. Gov't Code § 54957.6

Conference with Labor Negotiator Employee Organization: USW TEMSA

Local 12911

Negotiators: David Ritchie, JD

Karin Freese & Paul Willette

- 13. Reconvene to Open Session @ 8:22 pm Report of Closed Session
- 14. Continuation of Regular Calendar

Approve MOU with USW/TESMA 12-911 - July 1, 2024 to June 30, 2028 Draft of resolution approving the MOU will be sent out and to be signed.

**M/S/C. To** approve MOU drafted by counsel with a resolution for Board approval.

Directors Avila/Campo

Ayes: Directors: Stokman, Benefield, Avila, Campo

Nays: None Abstain: None Motion: Passed - Roll Call Vote

- 15. Director Correspondence, Comments, Future Agenda Items None
- 16. Upcoming Regular Board and Standing Committee Meeting Dates Information

Special Board Meeting - August 12, 2024 @ 6:00 PM was scheduled.

Finance – Wed, Aug 21 @ 6:30 PM Board – Mon, Aug 26 @ 6:00 PM Finance – Wed, Oct 23 @ 6:30 PM Board – Mon, Oct 28 @ 6:00 PM

17. Adjourn @ 8:27 pm

Respectfully Submitted:	
,	Becky Campo, Board Secretary
	Date Signed

# Del Puerto Health Care District Balance Sheet

As of July 31, 2024

	Jul 31, 24	Jun 30, 24	% Change	Jul 31, 23	% Change	Notes
ASSETS		•		•		
Current Assets						
Total Checking/Savings	6,222,001	6,415,442	(3%)	3,766,607	65%	
Total Accounts Receivable	1,248,215	1,221,101	2%	1,256,529	(1%)	
Total Other Current Assets	444,490	193,643	130%	428,853	4%	•
Total Current Assets	7,914,706	7,830,186	1%	5,451,989	45%	•
Fixed Assets						
Total 151.000 · Capital assets	5,073,139	5,106,582	(1%)	4,934,231	3%	•
Total Fixed Assets	5,073,139	5,106,582	(1%)		3%	
Other Assets	, ,	, ,				
150.000 · Lease Receivable - Non Current	273,263	273,263		273,263		
Total Other Assets	273,263	273,263		273,263		•
TOTAL ASSETS	13,261,108	13,210,031	0%	10,659,483	24%	•
LIABILITIES & EQUITY	-	•		•		:
Liabilities						
Total Current Liabilities	570,261	590,048	(3%)	517,273	10%	
Total Long Term Liabilities	1,652,934	1,658,769	(0%)	1,721,071	(4%)	•
Total Liabilities	2,223,195	2,248,817	(1%)	2,238,344	(1%)	1
Equity			, ,		, ,	
350.000 · Unrestricted Assets	4,539,896	1,869,853	143%	2,919,323	56%	
Total 360.000 · Assigned Fund Balance	2,672,135	2,672,135		2,636,216	1%	
Total 370.000 · Restricted Fund Balance	1,260,638	1,256,422	0%	242,870	419%	
390.000 · Net Fixed Assets (Capital)	2,492,762	2,492,762		2,492,762		
Net Income	72,486	2,670,043	(97%)	129,970	(44%)	July result
Total Equity	11,037,917	10,961,215	1%	8,421,141	31%	
OTAL LIABILITIES & EQUITY	13,261,112	13,210,032	0%	10,659,485	24%	-
						•
	Jul 31, 24	Jun 30, 24	ı			
Month End Cash Balance	6,222,001	6,415,442				
101.015 - TCB Keystone C 8641	(429,777)					
103.100 - TCB USDA Debt Reserve 7237	(122,962)	(122,960)				
370.010 - Mitigation Fees	(1,173,885)					
360.030 - Asset Replacement Fund	(1,181,135)					
AP & Payroll Liabilities	(351,779)	(407,742)				
UNENCUMBERED CASH	2,962,463	3,111,365				
Percent of Operating Reserve	199%					
360.070 - Operating Reserve	1,491,000	1,491,000				

## Del Puerto Health Care District YTD by Class July 2024

	Total 01 Administration		Total 02 P			alth Center		Total 090 Other Non- Operating		Total 096 Keystone Bldg C		AL
	Jul 24 Budget		Jul 24	Budget	Jul 24	Budget	Jul 24	Budget	Jul 24	Budget	Jul 24	Budget
Ordinary Income/Expense												
Income												
401.000 · Gross Patient Service Revenue			1,063,850	945,374	382,333	425,681					1,446,183	1,371,055
403.000 · Adjustments			(600,009)	(561,387)	(64,538)	(56,201)					(664,547)	(617,588)
405.000 ⋅ Bad Debt			(109,266)	(55,767)	16,365	(3,829)					(92,901)	(59,596)
407.000 · Other Income		167	105	678	1,500	1,052					1,605	1,897
Total Income		167	354,680	328,897	335,661	366,703					690,341	695,767
Gross Profit		167	354,680	328,897	335,661	366,703					690,341	695,767
Expense												
601.000 · Salaries & Wages	44,779	50,498	166,944	172,054	166,351	163,975					378,074	386,527
602.000 · Employee Benefits	10,303	12,790	36,839	38,822	43,318	46,587					90,460	98,199
603.000 · Professional Fees	22,021	22,500	6,925	3,250	36,105	39,279					65,051	65,029
604.000 · Purchased Services	1,264	1,190	24,303	21,471	25,384	33,125					50,951	55,786
605.000 · Supplies	424	690	15,069	7,626	6,176	8,894					21,669	17,210
606.000 · Utilities	706	685	2,281	2,205	4,273	3,940					7,260	6,830
607.000 · Rental and Lease					216	216					216	216
608.000 · Insurance Coverages	3,833	3,483	17,771	17,635	11,771	11,771					33,375	32,889
609.000 · Maintenance & Repairs	116	160	6,553	7,267	3,815	3,266					10,484	10,693
610.000 · Depreciation and Amortization	995	879	20,470	20,167	7,945	7,435			4,031	3,966	33,441	32,447
611.000 · Other operating expenses	11,466	12,305	89,627	89,815	9,966	11,457					111,059	113,577
699.999 · Condensed Item Adj. Expense	(94,732)	(79,877)	47,366	39,938	47,366	39,938						(1)
Total Expense	1,177	25,303	434,149	420,250	362,687	369,883			4,031	3,966	802,044	819,402
Net Ordinary Income	(1,177)	(25,136)	(79,469)	(91,353)	(27,026)	(3,180)			(4,031)	(3,966)	(111,703)	(123,635)
Other Income/Expense												
Other Income												
701.000 · District Tax Revenues			20,955	20,955			144,058	144,058			165,013	165,013
703.000 · Investment Income					0		13,679	8,000			13,679	8,000
704.000 · Interest Expense					(4,225)	(4,224)					(4,225)	(4,224)
705.000 · Tenant Revenue									11,283	9,668	11,283	9,668
710.000 · Misc Other Income												
Total Other Income			20,955	20,955	(4,225)	(4,224)	157,737	152,058	11,283	9,668	185,750	178,457
Other Expense			,	,	( , ,	, ,	,	,		,	,	•
802.000 · Keystone District Expense									1,561	1,376	1,561	1,376
810.000 · Misc Other Expense											:	•
Total Other Expense									1,561	1,376	1,561	1,376
Net Other Income			20,955	20,955	(4,225)	(4,224)	157,737	152,058	9,722	8,293	184,189	177,082
Net Income	(1,177)	(25,136)	(58,514)	(70,398)	(31,251)	(7,404)	157,737	152,058	,	4,326	72,485	53,446
		\ -, -; -;	<b>V</b> //	( 1,11-)	ν- , ,	( )	- ,	. ,	-,-,-	,- ·-	,	

# Del Puerto Health Care District Warrants by Bank Account

July 2024

Туре	Date	Num	Name	Credit	Notes
101.000 · Cash and	-	alents			
101.010 · Tri Coun					
101.011 - TCB-Op				0 = 10 = =	D :://
Bill Pmt -Check		_	Alliant Insurance Services		Prepaid Insurance
Bill Pmt -Check			Beta Healthcare Group		Prepaid Insurance
Bill Pmt -Check			Data Path, Inc	6,345.04	
Bill Pmt -Check	07/03/2024	ACH	DeliverHealth	237.00	DD OFMT IOT 0/4 -f
Dill Dest Charle	07/40/2024	<b>ЛС</b> Ы	CA DUCS (DD CEMT ICT)	75,374.27	PP GEMT IGT 3/4 of
Bill Pmt -Check Bill Pmt -Check			CA DHCS (PP-GEMT, IGT)  Data Path, Inc	745.29	C12024
Bill Pmt -Check			DeliverHealth	743.29	
Bill Pmt -Check			Pacific Records Management	322.83	
Bill Pmt -Check			Streamline	3,576.00	
Bill Pmt -Check			Beta Healthcare - Workers Comp		Prepaid Insurance
Bill Pmt -Check		_	Beta Healthcare Group		Prepaid Insurance
Bill Pmt -Check		-	EMS eSchedule	600.00	Tropala modranoo
Bill Pmt -Check		: -	WB Entertainment - Twin Rivers		Company Picnic
Bill Pmt -Check			City Of Patterson-H2O, sewer, garbag	414.73	Company 1 Tomic
Bill Pmt -Check			Umpqua Bank	14,905.70	
Bill Pmt -Check			AP Logic		Consulting & Training Fee
Bill Pmt -Check	07/22/2024	EFT	ABW Medical, LLC	8,230.00	3
Bill Pmt -Check	07/22/2024	EFT	Athena Health, Inc.		Cost Reimb Collection Fe
					EVOC Amb Driver
Bill Pmt -Check	07/23/2024	EFT	Lecticon	1,800.00	Training Online
Bill Pmt -Check	07/01/2024	32963	Airgas USA, LLC	151.73	
Bill Pmt -Check	07/01/2024	32964	GreenWorks Janitorial Services	4,145.00	
Bill Pmt -Check	07/01/2024	32965	MD - Rodriguez, Jose	35,333.33	
Bill Pmt -Check	07/01/2024	32966	PG&E	33.26	
Bill Pmt -Check	07/01/2024	32967	SEMSA Sierra Medical Services Allian	10,353.20	
Bill Pmt -Check	07/01/2024	32968	Stericycle	638.14	
Bill Pmt -Check	07/01/2024	32969	Stericycle	191.45	
Bill Pmt -Check	07/01/2024	32970	Verizon Wireless	578.17	
Bill Pmt -Check	07/03/2024	32971	City of Patterson-Business Licenses	144.00	
Bill Pmt -Check	07/03/2024	32972	Sanofi Pasteur, Inc	4,060.10	
Bill Pmt -Check			Staples Advantage	5,578.19	
Bill Pmt -Check			Frontier-3755	302.08	
Bill Pmt -Check			Monique Whitworth	600.00	
Bill Pmt -Check			Paul Oil Co., Inc.	4,303.11	
Bill Pmt -Check			Rockie's Faces Face Pinting		Company Picnic
Bill Pmt -Check			Love Patterson		National Night Out
Bill Pmt -Check			Airgas USA, LLC	456.95	
Bill Pmt -Check			Amazon	30.14	
Bill Pmt -Check			AMR-American Medical Response	7,811.76	
Bill Pmt -Check			BICSEC Security, Inc	4,700.00	
Bill Pmt -Check			Bound Tree Medical LLC	1,818.66	
Bill Pmt -Check			CA Occupational Physicians	2,255.00	
Bill Pmt -Check			City Of Patterson-H2O, sewer, garbag	547.53	
Bill Pmt -Check			Croscopt Supply	192.32	
Bill Pmt -Check			Crescent Supply	251.43	
Bill Pmt -Check Bill Pmt -Check			DeHart Plumbling Heating & Air Inc	647.00 400.00	
Bill Pmt -Check			Health Financial Systems Language Line	353.70	
Bill Pmt -Check			Life-Assist		
DIII FIIIL -CHECK	01/12/2024	3299 I	LIIG-M35151	3,500.20	

## Del Puerto Health Care District Warrants by Bank Account July 2024

			July 2024		
Туре	Date	Num	Name	Credit	Notes
Bill Pmt -Check	07/12/2024	32992	McKesson Medical Surgical Inc.	4,097.62	
Bill Pmt -Check	07/12/2024	32993	MedStatix, Inc	20.00	
Bill Pmt -Check	07/12/2024	32994	Mission Linen Supply	874.56	
Bill Pmt -Check	07/12/2024	32995	MO-CAL Office Solutions	241.50	
Bill Pmt -Check	07/12/2024	32996	Patterson Irrigator	30.00	
Bill Pmt -Check	07/12/2024	32997	Patterson Tire	2,363.91	
Bill Pmt -Check	07/12/2024	32998	Petty Cash	20.00	
Bill Pmt -Check	07/12/2024	32999	Physicians Service Bureau	360.08	
Bill Pmt -Check	07/12/2024	33000	Ray's Radio Shop	240.49	
Bill Pmt -Check	07/12/2024	33001	Riggs Ambulance Service, Inc.	221.00	
Bill Pmt -Check			Rush Truck Center Ceres	681.00	
Bill Pmt -Check	07/12/2024	33003	Smile Makers	116.40	
Bill Pmt -Check			Stericycle / Shred-it	118.24	
Bill Pmt -Check			City of Patterson-Business Licenses	144.00	
Bill Pmt -Check			Stericycle / Shred-it	342.86	
Bill Pmt -Check			Teleflex / Arrow	1,795.44	
Bill Pmt -Check			TID Turlock Irrigation District +06	1,979.27	
Bill Pmt -Check			Westside Landscape & Concrete	302.00	
Bill Pmt -Check			Workbench True Value Hdwe.	38.52	
Bill Pmt -Check			Zoll	1,340.57	
Bill Pmt -Check			Doctors Medical Center	400.00	
Check	07/24/2024		Wakefield	525.86	
Check	07/24/2024		REFUND - Ambulance:REFUND - Ant	3,992.00	
Check	07/24/2024		REFUND - Ambulance:REFUND - Blu	3,181.50	
Check	07/24/2024		REFUND - Ambulance:REFUND - Blu	273.00	
Check	07/24/2024		REFUND - Ambulance:REFUND - Libe	1,359.19	
Check	07/24/2024		REFUND - Ambulance:REFUND - Kai	4,806.64	
Check	07/24/2024		REFUND - Ambulance:REFUND - Fes	100.00	Refund overpaid patient
Check	07/24/2024		REFUND - Ambulance:REFUND - Ang	250.00	account
Check	07/24/2024		REFUND - Ambulance:REFUND - Gal	173.46	
Check	07/24/2024		REFUND - Ambulance:REFUND - Wri	200.00	
Check	07/24/2024		REFUND - Ambulance:REFUND - Hef	125.00	
Check	07/24/2024		REFUND - Ambulance:REFUND - Avil	250.00	
Bill Pmt -Check			Airgas USA, LLC	252.28	
Bill Pmt -Check			Amazon	88.33	
Bill Pmt -Check			Bound Tree Medical LLC	2,076.02	
Bill Pmt -Check			Cole Huber (Cota Cole)		Prior months bill
Bill Pmt -Check			Crescent Supply	280.90	THOI IIIONGIO DIII
Bill Pmt -Check			McAuley Ford	1,652.18	
Bill Pmt -Check			McKesson Medical Surgical Inc.	2,020.60	
Bill Pmt -Check			Patterson City Tow Service	223.00	
Bill Pmt -Check			PG&E	59.13	
Bill Pmt -Check			SEMSA Sierra Medical Services Allian	10,753.60	
Bill Pmt -Check			Stan Med Soc / CA Medical	380.00	
Bill Pmt -Check			Stanislaus Foundation for Medical Car	50.00	
Bill Pmt -Check			West Side Storage Baldwin	216.00	
Bill Pmt -Check			Yosemite Lock & Key	60.00	
				372,867.34	
Total 101.011 · TC			ig 1733	312,001.34	
101.012 - TCB-Pa	-		Payrall Direct Deposit	104 204 70	
Liability Check			Payroll Direct Deposit	101,394.72	
Liability Check			Payroll Direct Deposit	1,632.81	
Liability Check			Payroll Direct Deposit	113,409.47	9/02/24 Payrall
Liability Check	07/31/2024		Payroll Direct Deposit	107,143.44	8/02/24 Payroll

11:28 AM 08/16/24 Accrual Basis

## Del Puerto Health Care District Warrants by Bank Account July 2024

			·,	
Туре	Date	Num	Name	Credit
Liability Check	07/03/2024	EFT	Corebridge / AIG / VALIC	13,176.69
Liability Check	07/18/2024	EFT	Corebridge / AIG / VALIC	16,550.55
Liability Check	07/19/2024	EFT	CA Choice	51,237.60
Liability Check	07/23/2024	EFT	Principal Life Insurance Co	6,886.66
Liability Check	07/03/2024	E-pay	EDD State of California	7,102.36
Liability Check	07/02/2024	E-pay	Internal Revenue Service	37,595.56
	07/03/2024	E-pay	EDD State of California	1,086.81
Liability Check	07/03/2024		EDD State of California	3.27
-	07/03/2024		Internal Revenue Service	46.78
Liability Check			EDD State of California	57.09
Liability Check			Internal Revenue Service	368.58
Liability Check			EDD State of California	8,222.52
Liability Check	07/18/2024		Internal Revenue Service	42,586.03
Paycheck	07/03/2024		Employee Payroll	2,290.23
Paycheck	07/03/2024		Employee Payroll	594.63
Liability Check	07/03/2024		California State Disbursement Unit	296.30
Liability Check			Franchise Tax Board	592.21
Liability Check	07/03/2024		Stanislaus County Sheriff - Garn 37	64.94
Liability Check	07/03/2024		United Steelworkers	335.17
Paycheck	07/03/2024		Employee Payroll	252.33
Paycheck	07/03/2024		Employee Payroll	2,313.12
Paycheck	07/18/2024		Employee Payroll	132.80
Liability Check			United Steelworkers	329.62
Liability Check			California State Disbursement Unit	296.30
Liability Check			Stanislaus County Sheriff - Garn 37	83.51
Liability Check			Franchise Tax Board	400.08
Liability Check			LegalShield	658.25
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Total 101.012 · TC			99	517,140.43
101.015 - TCB - K	-		City Of Detterand 1100	400.00
Bill Pmt -Check			City Of Patterson-H2O, sewer, garbag	182.22
Bill Pmt -Check			DeHart Plumbling Heating & Air Inc	573.00
Bill Pmt -Check			Gilberto Arroyo-06	355.00
Bill Pmt -Check			Mr. Rooter Plumbing	294.36
Bill Pmt -Check			TID Turlock Irrigation District +06	602.69
Total 101.015 · TO	•		_	2,007.27
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Check	07/14/2024		USDA Rural Development Loan-EFT	10,060.00
Total 103.100 · TCI			· · · · · · · · · · · · · · · · · · ·	10,060.00
otal 103.000 · Rest			= 1231	10,060.00
	inclea Funas	•	-	
DTAL			=	902,075.04
		Less: Irr	egular Items (highlighted)	213,669.94
		Less: 8/0	02/24 Payroll Direct Deposit	107,143.44
			<del>-</del>	320,813.38
		NET W	ARRANT ISSUED - JULY 2024	581,261.66
			=	22.,=00



#### **BOARD OF DIRECTORS BOARD OF DIRECTORS**

Anne Stokman, RN, President Timothy Benefield, Vice-President Becky Campo, Secretary Luis Avila, Treasurer

PO Box 187, Patterson, CA 95363 Phone (209) 892-8781 Fax (209) 892-3755

## BOARD OF DIRECTORS SPECIAL MEETING MINUTES Monday, August 12, 2024 @ 6:00 pm

1. Call to order at 6:12 pm by President, Anne Stokman

2. Pledge of Allegiance

3. Roll Call

**Directors Present**: President, Anne Stokman

Vice President, Timothy Benefield

Treasurer, Luis Avila Secretary, Becky Campo

Staff Present: CEO, Karin Freese

Ambulance Director, Paul Willette HR Manager, Robert Trefault

Clerk of the Board/Financial Accounting Manager, Maria Reyes-Palad

District Legal Council: Dave Ritchie, Cole Huber, LLP (absent)

Public: Ms. Sylvia Ramirez

We have a quorum.

4. Reading of the District's Vision, Mission, and Value Statements:

Vision: "A locally cultivated, healthier community."

Mission: "To provide, promote, and partner in quality healthcare for all."

Values: "Compassion – Commitment – Excellence"

5. Public Comment Period

Ms. Sylvia Ramirez got welcomed and announced her candidacy was filed

- **6. Declarations of Conflict** [Board members disclose any conflicts of interest with agenda items] None.
- 7. Approval of Agenda:

M/S/C: To approve the agenda as presented.

Directors Campo/Benefield

Ayes: Directors Stokman, Benefield, Avila, Campo

Nays: None Abstain: None Motion: Passed

- 8. Strategic Planning Workshop
  - A. Survey Results
  - B. Board Discernment of Top Strategic Priorities
  - C. Next Steps

Upon Board request to cover wider responds than previous surveys, another survey was released and came out with 170 respondents.

Operational goals are separated from the initial long list since these are already ongoing and continuous priorities of the district.

Summary of priority goals were presented by community leaders, board members and Spanish and English speaker patients. All of these were compiled and came out with common eight (8) priority goals:

- 1. Health Care Access
- 2. Master Building Plan
- 3. Community Input
- 4. Community Survey
- 5. Community Presence
- 6. Funding Community Support
- 7. Marketing
- 8. Board

Discussion on each priority goals for further direct to focus of concentration. Then management will lay out objectives and tasks for each project.

With Master Building Plan, timeline was brought up by Board regarding purchase of the land. Contacting the real estate agent would be a solution to determine where were at.

Community Input came out low priority based on past experiences of two (2) board members.

Community survey will be done by Sacramento State University for number 4 goal.

Annual Health Event will be the primary focus for community presence.

Funding community support needs collaboration with the city, churches, community leaders, schools, non-profit agencies, etc. to come out with the plan and purpose coincides with our main healthcare access goal.

Community events are enumerated which the district has been participating for years.

Board members possible means of networking with other healthcare districts and community groups through attending conferences or meetings was discussed for last goal.

Management will present to the Board the objectives, action plans and measures for each goal.

Creating a centralized Board email address for all public questions was decided to prevent Board from directly responding on district's behalf.

- **9. Regular Calendar\*** [Members of the public may address the Board as the Board considers each item. Each speaker is allowed a maximum of five minutes.]
  - A. \*Any Consent Calendar items moved to the Regular Calendar None

## B. Approval of New Middle Management Payscale

Job Descriptions for Staff Accountant and Assistant HC Manager was presented with corresponding \$60K Budget Impact with the Finance Committee recommendation.

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Board of Director Minutes – Date Page 3 of 3

**M/S/C. To** approve New Middle Management Payscale with Job description and budget impact presented.

Directors Stokman/Benefield

Ayes: Directors: Stokman, Benefield, Avila, Campo

Nays: None Abstain: None

Motion: Passed - Roll Call Vote

## 10. Upcoming Regular Board and Standing Committee Meeting Dates Information

Finance – Tue, Aug 20 @ 6:00 PM Board – Mon, Aug 26 @ 6:00 PM Finance – Tue, Sep 24 @ 6:00 PM Board – Mon, Sep 30 @ 6:00 PM Finance – Wed, Oct 23 @ 6:00 PM Board – Mon, Oct 28 @ 6:00 PM

## 11. Adjourn @ 7:50 pm

Respectfully Submitted:	
, ,	Becky Campo, Board Secretary
	Date Signed

## BOARD OF DIRECTORS OF THE DEL PUERTO HEALTH CARE DISTRICT Board Meeting – August 26, 2024

## 9B. DR. JOSE RODRIGUEZ' CONTRACT RENEWAL] DR. JOSE M. RODRIGUEZ'S CONTRACT RENEWAL Page 1 of 2

Department: Chief Executive Office CEO Concurrence: Yes

Consent Calendar: No 4/5 Vote Required: No

SUBJECT: DR. JOSE M. RODRIGUEZ'S CONTRACT RENEWAL

**CONSIDERATIONS:** Dr. Rodriguez has significantly enhanced the District since he joined as a

family physician and medical director in September 2014. His tenure has

brought a level of continuity that is a rare and reassuring presence in the

District, consistently delivering excellent patient care and providing mentorship to nurse practitioners and physician assistants. Given his

substantial contributions, the staff strongly recommends approving a

five-year contract extension under the agreed-upon terms, including a

one-time eight percent increase in compensation.

**RECOMMENDATION:** Staff recommends the Board of Directors approves a five-year contract

renewal with Jose M. Rodriguez, MD, effective September 1, 2024, to

August 31, 2028, at an annual rate of \$340,260 as a family physician plus

\$118,000 per year as the Health Center's Medical Director.

**DISTRICT PRIORITY:** Excellent, reliable medical care and clinic leadership

**POLICY ISSUE:** Fiscal Accountability and Transparency

FISCAL IMPACT: \$458,260 annual contract cost

**STAFFING IMPACT:** None

**CONTACT PERSON:** Karin Freese

**ATTACHMENT(S):** Contract

### RECOMMENDED BOARD ACTION:

ROLL CALL REQUIRED: YES

# BOARD OF DIRECTORS OF THE DEL PUERTO HEALTH CARE DISTRICT Board Meeting – August 26, 2024

## 9B. DR. JOSE RODRIGUEZ' CONTRACT RENEWAL] DR. JOSE M. RODRIGUEZ'S CONTRACT RENEWAL Page 2 of 2

**RECOMMENDED MOTION**: I move the Board of Directors to approve a five-year contract renewal with Dr. Jose M. Rodriguez for \$458,260 annually and authorize the CEO to execute the agreement.

Motion Made By	Motion	Second
President, Stokman		
Vice President, Benefield		
Treasurer, Avila		
Secretary, Campo		

Roll Call Vote	Aye	No	Abstain	Absent
President Stokman				
Vice President Benefield				
Treasurer Avila				
Secretary Campo				

MOTION IS:	
	Approved
	Denied
	Approved as amended
	Other
do hereby CERTIFY th	Clerk of the Board of Directors of the DEL PUERTO HEALTH CARE DISTRICT at the foregoing is a full, true, and correct copy of an action duly adopted at a Board of Directors held the day of
Clerk of the Board, Ma	ria Reyes Date

### PROFESSIONAL SERVICES AGREEMENT

This Professional Services Agreement (hereinafter referred to as "Agreement") is made as of September 1, 2024, or, if later, on the date this Agreement has been fully executed by the parties ("Effective Date") by and between Del Puerto Health Care District ("District") and Jose M. Rodriguez, M.D. ("Physician") ("District and Physician shall each be known as a "party" and together as the "parties.")

### RECITALS

WHEREAS, District is a California healthcare district providing health care and medical services, including primary care, pediatrics, urgent care, and industrial care to persons who reside in the community, including, but not limited to those who have limited ability to pay, or who are otherwise medically underserved ("Patients"); and

WHEREAS, District has established a clinic located at 1700 Keystone Pacific Parkway, Suite B, Patterson, CA 95363 for the purposes of providing primary care and family medical services to Patients ("Health Center"); and

WHEREAS, District wishes to secure the services of Physician to provide Services to Patients presenting at the Health Center and at such other clinics or facilities as the District may establish within its boundaries from time to time; and

WHEREAS, Physician desires to provide such Services to Patients; and

WHEREAS, prior to the Start Date, Physician will be licensed to practice medicine in the State of California with a specialty in family medicine and desires to provide family medicine services ("Services") to Patients; and

WHEREAS, District wishes to secure certain administrative services described in Addendum B to this Agreement, the performance of which shall be by a person holding the position and title of "Medical Director,"; and

WHEREAS, Physician wishes to perform certain administrative and other services, described in Addendum B hereto, as the Medical Director;

NOW, THEREFORE, in consideration of the mutual covenants and agreements herein contained, the parties to this Agreement agree as follows:

## ARTICLE I PHYSICIAN RESPONSIBILITIES

1.1 <u>Practice Establishment</u>. The first day that Physician provides Services hereunder shall be known as

the Start Date. Commencing on the Start Date, Physician shall establish a full-time medical practice (the "Practice") at the Health Center, in order to provide Services as medically necessary and in accordance with the terms and provisions of this Agreement. In the event that the District establishes additional clinics within the District's legal geographic boundaries ("Additional Clinic(s)") that offer family medicine services, Physician shall provide Services at such Additional Clinics as mutually agreed upon with the District and as governed by this Article. District and Physician shall memorialize the Start Date in writing once it is agreed upon.

- 1.2 <u>Full-Time Practice</u>. Physician agrees to be available to provide Services in shifts of ten (10) hours per day, four (4) days a week, Monday through Thursday, inclusive, for forty-seven (47) weeks a year during the Health Center's (and/or any Additional Clinic's) regularly scheduled hours of operation, as scheduled by District. District and Physician may mutually agree to modify the work shifts. New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Thursday, and Christmas Day are paid days off when these holidays fall on a regular clinic operating day and the clinic is closed. As used in this section "one (1) work week" shall mean 32 hours as Physician and 8 hours as Medical Director. Absences greater than five weeks per year will result in a proration of total compensation.
- 1.3 "<u>Vacation</u>" <u>Time Away from Practice</u>. Physician may be absent from performance of his duties for up to four (4) work weeks per year, based on Physician's average hours worked per week. This absence may be designated or referred to informally as "vacation," but will not be vacation or other earned or vested time off. Physician shall continue to receive compensation during such absence as if he had not been absent. Physician shall notify District no less than 30 days in advance of any such absence, and will coordinate with District such that District has enough time to provide other coverage for Physician's services. Physician's absence from performance of his duties shall be in units of no more than two work weeks (i.e., 80 hours) at a time, unless otherwise approved by the Health Center Manager.
- 1.4 <u>CME Time away from Practice</u>. Physician may be absent from performance of his duties for up to one (1) work week per year for attendance at acceptable Continuing Medical Education courses. Physician shall continue to receive compensation during such absence as if he had not been absent. Physician shall notify District no less than 30 days in advance of any such absence, and will coordinate with District such that District has enough time to provide other coverage for Physician's services.
- 1.5 <u>Locum Tenens Service</u>. In the event Physician works more than four (4) days per work week performing Physician Services, he shall be paid a rate equivalent to what the District would pay a locum who would perform those duties.
- 1.6 <u>Patient Count</u>. Physician agrees that for his base contract, he shall provide no fewer than 4,368 patient encounters per year (4,368 visits per year / 45.5 work weeks per year / 4 workdays per week = 24 visits per day). Physician agrees that patients he sees when acting in the role of locum shall not count toward the minimum of 4,368 encounters required by this section.
- 1.7 <u>After-Hours Call</u>. Physician will be required to take after hour call from in one-week (Monday Sunday) blocks. Call weeks are shared evenly among physicians and physician extenders. Current share of call is one week out of four but is subject to change if the Health Center staff includes more or less than

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four licensed providers. When on call Physician shall not be required to be physically present at the Health Center, any Additional Clinic, or any other place as mutually agreed to with District to provide Services but will be available for consultation by telephone. Physician may be required to take call for Services more than one week out of four if they are providing additional services as Medical Director as defined in Addendum B.

- 1.8. <u>Physician Extenders Consultation</u>. When present at the Health Center or any Additional Clinic, Physician shall be available to consult with the District's Nurse Practitioner(s) and Physician Assistant(s) (collectively "Physician Extenders") in the provision of Services to Patients. District shall consult with Physician on Physician Extenders to be hired and/or retained by the District.
- Other Activities; Conflict of Interest. Physician shall not engage in any activities that either (i) create a conflict of interest, or (ii) interfere with Physician's performance of his/her duties hereunder. In the event of a dispute between Physician and District regarding such matter, either party may seek resolution pursuant to Section 9.7 of this Agreement after providing Notice to the other pursuant to the provisions of Articles 9.5 and 9.6. The parties agree that the District consents to Physician's appointment with Paradigm Clinical Research as a principal investigator for the U.S. Department of Health and Human Services-approved clinical research studies. A description of the duties relating to this type of appointment is attached hereto as Exhibit 1 and is incorporated as though fully set out herein by reference. The parties further agree that the appointment of Physician as an investigator does not represent a conflict of interest and is not anticipated to disrupt or interfere with Physician's obligations to the District in Article I of the Contract (as a physician), and Addendum B to the Contract (as Medical Director).
- 1.10 <u>Compliance with Law</u>. Physician shall at all times during the term of this Agreement comply with all applicable federal, state or municipal statutes and ordinances, all applicable rules, regulations, and ethical standards of the Medical Board of California.
- 1.11 <u>Compliance with District Requirements</u>. Physician shall fully comply with District's utilization review mechanisms and District's medical administrative guidelines.
- 1.12 <u>Participation in Quality Assurance</u>, Quality Improvement, Utilization Review, and Risk Management Activities. Physician shall be flexible with their clinic scheduled days to if they are needed to (a) participate in and comply with District's quality improvement, utilization review and risk management programs, including the District's Quality Review Committee; (b) participate in on-going quality improvement monitoring activities, such as audits; (c) participate in risk management activities designed to identify, evaluate and reduce risk of patient injury associated with care; and (d) assist utilization review in setting, monitoring and achieving utilization goals, all at no cost to Physician.
- 1.13 <u>Maintenance of Licensing and Board Certification</u>. Physician hereby represents and warrants that he/she (i) currently holds, or will on or before the Start Date hold, an unrestricted license to practice medicine in the State of California, and (ii) is Board certified in Family Medicine by the America Academy of Family Physicians.
- 1.14 <u>Maintenance of Professional Standards</u>. Physician shall maintain his professional competence and

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skills commensurate with the professional standards of the community, and as required by law, by attending and participating in approved continuing education courses.

- 1.15 <u>Enrollment in Medicare and Medi-Cal Programs</u>. Physician hereby represents that he/she is currently, or by the Start Date will have submitted the application to be, a participating provider, in the Medicare and Medi-Cal program. Physician also represents that, to his/her knowledge, he/she is not, and has never been, a suspended or ineligible provider for Medicare and Medicaid.
- 1.16 <u>Documentation of Personal Status</u>. Physician shall furnish District with documentation reasonably requested by District relating to Physician's health status (as it relates to work availability), licensure status, board certification(s), other professional qualifications, and membership status in professional entities, investigations, disciplinary actions, professional liability claims or civil or criminal investigations or actions relating to Physician's professional practice or qualifications.
- 1.17 <u>Peer Review Information</u>. Physician hereby authorizes the Medical Board of California, as well as all hospitals, healthcare entities and peer review bodies with which Physician is or has been affiliated to provide District with all confidential peer review information and documents relating in any way to Physician's professional qualifications. The District pledges that all of the aforementioned information shall be maintained in confidence.
- 1.18 Patient Care Medical Records. Physician shall prepare complete, timely, and accurate electronic medical and other relevant records with respect to Services in accordance with usual and customary standards (including routine completion of medical records on the same day of visit except in cases where unforeseen circumstances prohibit same day completion), including but not limited to the rules and requirements of all insurers who may be billed by District for Services. All such information and records relating to any Patient receiving Services shall be: (i) prepared on forms developed, provided or approved by Health Center and (ii) be the sole property of the District; provided, however, that subject to restrictions required by law and when required for legal defense, Physician shall have access to, and the ability to copy, such information and records. District shall maintain such information and records in strict compliance with all applicable records safekeeping and records retention laws, rules, regulations, and requirements.
- 1.19 <u>Use of Physician's Name and Image</u>. Subject to Physician's prior review and approval, during the term of this Agreement Physician shall allow District to use his/her name and likeness in advertisements and other marketing materials and to list his/her name on its provider lists.

## ARTICLE II DISTRICT RESPONSIBILITIES

- 2.1 <u>Office Support; Staffing</u>. District shall provide to Physician, at no cost to Physician, such, office space, equipment, and office administrative staff as District deems reasonably necessary, following consultation with Physician, to provide adequate support to the Practice.
- 2.2 <u>Scheduling and Coordination of Services</u>. District shall schedule and coordinate the provision of

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Services for and on behalf of Physician.

- 2.3 <u>Provision of Coverage</u>. When Physician is unable to provide Services due to illness, family emergency or any situation beyond his/her objective control, District administration shall secure the services of a qualified covering physician, to perform the Services and all other Physician duties hereunder, including, but not limited to, duties involving Physician Extenders, until Physician is able to reassume his/her duties. District shall be solely responsible for compensating such covering physician.
- 2.4 Professional Liability Insurance. District shall purchase, at its own expense, and maintain in effect during the term of this Agreement (or any successor agreement under which Physician provides Services to Patients as well as the period set forth in Section 6.6, if applicable) professional liability insurance in the minimum amount of Five Million dollars (\$5,000,000) per claim/occurrence and Fifteen Million Dollars (\$15,000,000) annual aggregate, to insure Physician, District, its Physician Extenders, employees and independent contractors against any claim or claims for damages, whether arising by reason of personal injury or death occurring directly or indirectly in connection with the performance of any Services for Patients, Patterson District Ambulance, or Patterson Fire Department; provided, however, that such minimum coverage limits shall be separate limits applicable to Physician and not shared limits with District, its Physician Extenders, employees and independent contractors. If such policy is a claims-made form of coverage it shall have a retroactive date no later than the Start Date, and District shall maintain tail coverage in perpetuity following the expiration or earlier termination of this Agreement (or any successor agreement under which Physician provides Services to Patients as well as at the end of the period set forth in Section 6.6, if applicable). District shall provide Physician with a certificate evidencing such coverage (including but not limited to tail coverage) in at least the coverage limits set forth above at least two (2) business days following Physician's written request for same. District shall immediately inform Physician in writing in the event District receives any notice that the policy required hereunder is or will be modified or amended. Insurance provided under this Section 2.3.1 shall be from an insurance company with an AM Best rating of at least A VIII.
- 2.5 General Liability Insurance. District shall purchase, at its own expense, and maintain in effect during the term of this Agreement (or any successor agreement under which Physician provides Services to Patients) general comprehensive liability insurance in the minimum amount of One Million Dollars (\$1,000,000) for each occurrence and Three Million Dollars (\$3,000,000) in the annual aggregate, as shall be necessary to insure District, and District's own employees, officers, agents, directors, Physician Extenders and independent contractors, including Physician, against any claim or claims for damages, whether arising by reason of personal injuries or death on District premises. District shall provide Physician with a certificate evidencing such coverage in two (2) business days following Physician's written request for same. District shall immediately inform Physician in writing in the event District receives any notice that the policy required hereunder is or will be modified or amended. Insurance provided under this Section 2.3.2 shall be on an occurrence basis and from an insurance company with an AM Best rating of at least A VIII.
- 2.6 <u>Carrier & No Duplicate Coverage</u>. District shall provide professional liability insurance coverage as described in this section from a carrier chosen by District in its exercise of absolute discretion. District and Physician agree to work together to coordinate insurance coverage and to ensure that there is no duplicate insurance coverage.

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- 2.7 <u>Compliance with Law.</u> District and Physician shall at all times during the term of this Agreement comply with all applicable federal, state or municipal statutes and ordinances, all applicable rules, regulations, and ethical standards applicable to District, including but not limited to requirements for billing for Services.
- 2.8 <u>Marketing Services</u>. Subject to the limitations set forth in this Agreement, District shall provide marketing services it deems reasonably necessary to generate business for District.
- 2.9 <u>Other Services</u>. District shall arrange for the provision of any other services that may be reasonably necessary to ensure the proper functioning of this Agreement.

## ARTICLE III BILLING OF CLAIMS AND REASSIGNMENT OF PROFESSIONAL FEES

- 3.1 <u>Patient Insurance Acceptance</u>. Physician will support the DPHC patient base and will be required to comply with third party contracting requirements.
- 3.2 <u>Administrative Assistance with Applications</u>. District shall assist Physician in submitting applications to become a participating provider in the Medicare and Medi-Cal programs as well as such other programs in which District wishes Physician to become a participating provider.
- 3.3 <u>Billing and Collection</u>. District shall bill and collect all professional fees generated by in the provision of Services as follows: 1) District shall bill and collect from Medicare and Medi-Cal in its own right for Services provided by Physician and Physician Extenders to Rural Health Clinic Patients (Section 1861(aa)(2) of the Social Security Act); and 2) District shall act as Physician's exclusive billing agent for all other third-party payors for Services provided by Physician and Physician Extenders, and be entitled to all collections derived therefrom.
- 3.4 <u>Transfer of Right to Bill and Receive Professional Fees</u>. Physician hereby transfers and assigns to District all of Physician's rights to bill and receive the professional fees due Physician from third party payors, including the Medicare and Medi-Cal programs, and from self-pay patients, for Services provided to Patients. Physician does not guarantee any collections from the provision of Services.
- 3.5 Reasonable Value. The revenues collected by District on Physician's behalf, less the compensation paid by District to Physician pursuant to **Exhibit "A"** hereto, represents the reasonable value of the billing and other services, personnel, facilities and equipment made available by District to Physician in this Agreement, does not result in any illegal profit or gain to District from the Services and allows District to ensure that District's fees and charges, if any, are reasonable, fair, and consistent with the basic commitment of District to provide adequate health care to all residents within its boundaries, as required by Section 32129 of the California Health and Safety Code.
- 3.6 <u>Inspection and Copying of Financial Records.</u> Physician shall have the right, during the District's

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normal business hours, to inspect and copy, at Physician's expense, District's records regarding billing and collection for the Services provided by Physician. Such inspection and copying rights shall extend to all post-termination Services provided by Physician pursuant to Section 6.6 of this Agreement. Physician shall have unrestricted access to Medicare claims submitted by District for Services provided by Physician, and the District and Physician shall be jointly and severally responsible for any Medicare overpayment to District; provided, however, unless a refund is due to Medicare/CMS determination that Physician was not eligible to bill for reimbursement for the particular Services provided, District shall indemnify, defend and hold Physician harmless from and against any such overpayments as well as any interest, penalties and any other amounts, claims and liabilities arising by reason of such overpayments.

3.7 <u>Use of "Sweep" Account.</u> Physician agrees that amounts paid from any source to Physician or to an account in Physician's name shall be placed into a "sweep" account, and that District shall have the exclusive right to have such amounts transferred from said "sweep" account into an account held exclusively in District's name. Physician further agrees that in establishing the "sweep, account he will authorize such transfers to be made automatically and daily. Physician further agrees to take all steps necessary to set up and maintain such "sweep" account and transfer authorization prior to commencing the performance of Services under this Agreement.

## ARTICLE IV COMPENSATION

- 4.1 <u>Physician Compensation</u>. District shall compensate Physician for the Services provided hereunder in accordance with the schedule set forth in **Exhibit "A"**, attached hereto and incorporated herein by reference.
- 4.2 <u>Physician's Failure to Meet Medical Records Requirements</u>. In the event Physician fails to submit medical charts in a timely manner or in compliance with the standard of care for such charting, District shall have the right to terminate Physician pursuant to Section 6.3.2.
- 4.3 <u>Failure to provide timely credentialing or contracting with third party payors.</u> In the event that Physician fails to complete credentialing and District is unable to collect payment for visits provided by Physician, District shall not be liable to pay physician for those visits based on the total lost revenue.
- 4.4 <u>Fair Market Value Compensation</u>. The consideration paid by District to Physician as set forth herein is commensurate with the fair market value of Physician's services. No part of such payments by District is made with the intent to induce the referral of patients by Physician to District, nor is Physician under any obligation whatsoever, either explicit or implied, to refer patients to District.

## ARTICLE V INDEPENDENT CONTRACTORS

5.1 <u>Independent Contractor Status</u>. Physician is and shall always be an independent contractor with

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respect to District in the performance of his/her obligations under this Agreement. Nothing in this Agreement shall be construed to create an employer/employee, joint venture, lease or landlord/tenant relationship between Physician and District. Physician shall not hold himself out as an officer, agent or employee of District or incur any contractual or financial obligation on behalf of District, without District's prior written consent.

- 5.2 <u>Expenses Paid by Contractor</u>. Except as otherwise set forth in this Agreement, Physician shall be solely responsible for paying all his/her expenses, including, but not limited to, health and disability insurance, life insurance, retirement plan contributions, income taxes, FICA, FUTA, SDI and all other payroll, employment or other taxes and withholdings.
- 5.3 <u>Waiver of Employee Benefits</u>. In the event that this independent contractor relationship is determined by tax authorities to constitute an employment relationship, Physician shall pay all FICA, FUTA, SDI And payroll taxes and withholdings and hereby waives for the period prior to the date such determination becomes final, any and all claims to coverage under District's pension, profit-sharing, health, dental, welfare or similar type plans which are generally limited to District's employees, unless otherwise agreed by District in writing.

## ARTICLE VI TERM AND TERMINATION

- 6.1 <u>Term.</u> This Agreement shall remain in full force and effect for a term of five (5) years, effective as of the Start Date ("Initial Term"). At least thirty (30) days prior to the expiration of the Initial Term, and each succeeding term of this Agreement, the parties shall meet to discuss renewal of the Agreement, and any desired amendments.
- 6.2 <u>Automatic Termination</u>. Notwithstanding any other provision in this Agreement, this Agreement shall automatically terminate without the requirement of any notice when any of the following occurs:
  - A. Physician's license to practice medicine in the State of California expires or is suspended, restricted, or subjected to conditions of probation, without regard to whether or not such revocation, expiration, suspension, restriction or condition of probation has been finally adjudicated;
  - B. Physician dies, or becomes disabled (a "disability" for purposes of this section is defined as either a physical or mental disability that is certified by two physicians which prevents Physician from performing the essential tasks comprising Services for more than 45 days in any six-month period or a pregnancy disability which prevents Physician from performing the essential tasks comprising Services for more than 12 weeks in any twelve-month period);
  - C. Physician's professional status at any health care entity of which Physician is a member or applicant for membership is denied, terminated, suspended, or restricted, for a medical disciplinary cause or reason;

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- D. Physician's status as a provider in the Medicare program or the Medi-Cal program, or in any other managed care contracting plan or program is terminated, suspended, or restricted; or
- E. Physician is convicted of a crime involving moral turpitude; or
- F. District fails to keep in full force and effect the insurance required by Section 2.4
- 6.3 <u>Automatic Termination After Notice to Physician</u>. Notwithstanding any other provision in this Agreement, this Agreement shall automatically terminate upon not fewer than thirty (30) days prior written notice from District to Physician when any of the following occurs:
  - A. Physician engages in conduct which, for any cause or reason, including but not limited to the inability of Physician to work effectively with others, is determined by District in its reasonable discretion to be unethical, detrimental to patient safety or to the delivery of quality patient care;
  - B. Physician routinely fails to complete medical charts, forms or reports on the same business day Services are provided, after being advised of deficiencies in doing so two or more times in writing within a twelve (12) month period;
  - C. Physician fails to qualify for the necessary professional liability insurance coverage required pursuant to the terms of this Agreement; or
  - D. Physician's breach of any of the material terms or covenants of Article III, VII, or VIII.
- 6.4 Other Terminations. This Agreement may also be terminated upon the breach of a material term, excluding any occurrences described at Section 6.1 or 6.2, if such material breach is not cured to the reasonable satisfaction of the non-breaching party within fifteen (15) days of written notice to the breaching party; provided, however, if the breach is the failure of District to timely pay an amount under this Agreement, such written notice shall be five (5) business days.
- 6.5 <u>Without Cause Termination</u>. This Agreement may be terminated without cause by either party at any time by giving at least sixty (60) days prior notice to the other party. In the event that this Agreement is terminated prior to the end of the Initial Term the parties may not enter into the same or substantially the same arrangement prior to the first (1<sup>st</sup>) anniversary of the Start Date.
- 6.6 <u>Post-Termination Obligations</u>. Upon termination or expiration of this Agreement, Physician shall assist District in the transfer of Physician's Patients to other appropriate physicians credentialed by the District and shall continue to provide Services to such Patients in acute distress or in critical need of care until such transfer is completed, or until the District has specifically assumed responsibility for Services to Patients, but in no event for more than thirty (30) days following termination of this Agreement. Physician shall receive compensation as set forth in Exhibit A, part 1 through 5, on a pro rata daily basis for each day Services are provided after the effective date of termination, and District shall continue to satisfy its non-compensation obligations under this Agreement during such period as if this Agreement were still in effect. Upon termination or expiration of this Agreement, District shall also timely pay to Physician all accrued

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but unpaid compensation or reimbursement owed to Physician under this Agreement.

6.7 <u>Upon effective date of termination</u>, Physician shall immediately and permanently discontinue the use of all marks, names, or indicia which in the opinion of District may in any way indicate or tend to indicate that Physician is in any manner associated with District.

# ARTICLE VII CONFIDENTIAL AND PROPRIETARY INFORMATION AND NON-SOLICITATION

- 7.1 <u>Proprietary Property of District.</u> Physician acknowledges that District, in connection with its business, has developed certain operating manuals, symbols, trademarks, trade names, service marks, designs, patient lists, procedures, processes, and other copyrighted, patented, trademarked, or legally protectable information, which is confidential and proprietary to District. Physician shall not use any name, symbol, mark, or other proprietary information of District in any of its advertising or promotional materials or otherwise except as expressly provided by District. Upon termination of this Agreement, Physician agrees to promptly return any other confidential or proprietary information in his/her possession or control to District. Neither Physician nor District shall unfairly compete with each other.
- 7.2 Non-Solicitation of Providers or Staff. During the Term of this Agreement, and for a period of three (3) years after its termination, Physician shall not, either alone or as a partner, joint venture, officer, director, trustee, employee, consultant or stockholder of, or any similar capacity with, any company or business organization recruit, solicit, or otherwise seek to induce employees or contract physicians of District or any of its subsidiaries or affiliates to terminate their employment or contract relationships with District or any such subsidiary or affiliate, nor shall Physician solicit or induce any third party with which District has a contractual or business relationship, to terminate its relationship with District or to reduce the volume of patients referred by any such organization or entity to District.
- Non-Solicitation of Patients. During the term of this Agreement and any extensions or renewals thereof, and for a further period of three (3) years after termination of this Agreement, Physician agrees not to induce, or attempt to induce, any Patient to change his/her HMO, PPO, can1er, other managed care program, medical contractor, or physician, or to disenroll from any HMO or other managed care program with which District now or hereafter arranges for Physician to contract during the term of this Agreement and any renewals hereof. Physician and District may agree on a payment amount by Physician to District for the right to induce any Patient in the manner otherwise prohibited above.
- 7.4 <u>Injunctive Relief.</u> The parties hereto recognize that irreparable injury could result to the other party, if a party fails to perform his/her or its obligations under this Article VII. Each party hereto acknowledges and consents that in such event, the other party shall be entitled, in addition to any other remedies and damages available to him or it, to whatever injunctive relief may be appropriate to restrain the breach or compel the performance of this Article VII.
- 7.5 <u>Survival</u>. This Article shall survive the expiration or termination of this Agreement regardless of the cause giving rise to such expiration or termination.

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# ARTICLE VIII INDEMNIFICATION

- 8.1 <u>Indemnification of Physician</u>. District shall indemnify and hold harmless Physician and its shareholders, directors, officers, employees or agents (if any) from and against any and all claims, causes of action, liabilities, losses, damages, penalties, assessments, judgments, awards or costs, including reasonable attorneys' fees and costs, arising out of, resulting from, or relating to: (i) the breach of this Agreement by District or (ii) the negligent acts or omissions or willful conduct of District or any employee or agent of District.
- 8.2 <u>Indemnification of District</u>. Physician shall indemnify and hold harmless District and its directors, officers, employees or agents from and against any and all claims, causes of action, liabilities, losses, damages, penalties, assessments, judgments, awards or costs, including reasonable attorneys' fees and costs, arising out of, resulting from, or relating to: (i) the breach of this Agreement by Physician or (ii) the negligent acts or omissions or willful conduct of Physician.

# ARTICLE IX GENERAL TERMS AND CONDITIONS

- 9.1 <u>Alteration of Terms</u>. The body of this Agreement fully expresses all understandings of the parties concerning all matters covered and shall constitute the total agreement of the parties with respect to the subject matter hereof. No addition to, or alteration of, the terms of this Agreement whether by written or verbal understanding of the parties, their officers, agents, or employees, shall be valid unless made in the form of a written amendment to this Agreement which is formally approved and executed by the parties.
- 9.2 <u>Governing Law.</u> The validity, interpretation and performance of this Agreement shall be governed by and construed in accordance with the laws of the State of California ("State").
- 9.3 <u>Severability</u>. The provisions of this Agreement shall be deemed severable and if any portion shall be held invalid, illegal or unenforceable for any reason, the remainder of this Agreement shall be effective and binding on the parties.
- 9.4 <u>Waiver</u>. A waiver of any of the terms and conditions hereof shall not be construed as a waiver of any other terms and conditions hereof.
- 9.5 <u>Notices</u>. Notices required or permitted to be given under this Agreement, except as otherwise specifically provided for herein, shall be in writing and may either be delivered personally or sent by national overnight delivery (FedEx or UPS or similar carrier), delivery charges prepaid, or sent by registered mail in the United States Postal Service, return receipt requested, postage prepaid.

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To District:
Del Puerto Health Care District
875 E Street OR P. O. Box 187
Patterson, California 95363
Attention: Chief Executive Officer

<u>To Physician</u>:
Jose M. Rodriguez, M.D.
2712 Palazzo Ct
Modesto, CA 95356

- 9.6 <u>Notification Date</u>. A notice shall be deemed given on the date it is delivered in person or the next business day after deposit with overnight delivery or four (4) business days after being deposited in the mail in accordance with the foregoing. Either party may change the address at which to send notices by giving the other party ten (10) days prior written notice of such change.
- Arbitration. In the event that any problem or dispute concerning the terms of this Agreement is not satisfactorily resolved, the dispute shall be submitted to binding arbitration for resolution. Such arbitration shall be final and binding, shall be conducted in Stanislaus, California, before an arbitrator mutually selected by the parties from the panel of arbitrators maintained by the Judicial Arbitration and Mediation Service ("JAMS"), and shall be conducted in accordance with the rules and regulations of JAMS then in effect, including the optional appeal procedures set forth in JAMS rules and regulations. The parties shall have the rights of discovery as set forth in Part 4 of the California Code of Civil Procedure, and the provision of section 1283.05, as incorporated by reference pursuant to section 1283.1(b) of the Code of Civil Procedure. The fees and costs of JAMS and the arbitrator, including any costs and expenses incurred by the arbitrator in connection with the arbitration, shall be borne equally by the parties, unless otherwise agreed to by the parties. Each party shall be responsible for the costs and expenses incurred by such party in connection with the arbitration, including its own attorney's fees and costs.
- 9.8 <u>Assignment</u>. The rights, duties, and obligations arising hereunder may only be assigned by a party with the prior written consent of the other party, which consent may be granted or denied in the exercise of such party's sole and absolute discretion; provided, however, that Physician upon written notice to District may assign this Agreement to a professional medical corporation wholly owned by Physician without District's consent.
- 9.9 <u>Third Party Beneficiaries</u>. The rights and obligations of each party to this Agreement shall inure solely to the benefit of the parties hereto, and no person or entity shall be a third-party beneficiary of this Agreement.
- 9.10 <u>Understanding of Agreement</u>. The parties hereto acknowledge and agree that this Agreement has been negotiated at arm's length and between parties equally sophisticated and knowledgeable in the matters dealt with in this Agreement. Accordingly, any rule of law or legal decision that would require interpretation of any ambiguities in this Agreement against the party that has drafted it is not applicable and is waived. The provisions of this Agreement shall be interpreted in a reasonable manner to affect the intent of the parties as set forth in this Agreement.
- 9.11 <u>Survival</u>. The provisions of Sections 1.13, 2.3, 3.1, 3.2, 6.6, 9.1 through 9.6, 9.8, 9.9, 9.10, and

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Articles V, VII, and VIII shall survive the expiration or termination of this Agreement.					
IN WITNESS WHEREOF, the parties have executed this Agreement.					
DEL PUERTO HEALTH CARE DISTRICT	PHYSICIAN				
By:	By:				
Karin Freese, Chief Executive Officer	Jose M. Rodriguez, M.D., an individual				

# EXHIBIT A PHYSICIAN COMPENSATION AND BENEFITS

- A-1. <u>Compensation</u>. District shall pay Physician the amount of three hundred forty thousand two hundred and sixty dollars (\$340,260) in annual base compensation. Said amount is inclusive of any medical insurance allowance or retirement benefit payment that may be defined in other District provider contracts.
- A-2. Start Date. The start date shall be September 1, 2024.
- A-3. <u>Payment Date</u>. Payments under Sections 1, 2 and 3 shall be made in arrears and commence in the calendar month next following the Start Date and shall be made by District to Physician on or before the 5<sup>th</sup> day of each calendar month.
- A-4. <u>Potential Adjustment</u>. Compensation described above may be reviewed and adjusted by District, after consultation with Physician, if the average charges after adjustments per Health Center patient for all insurers is reduced by ten percent (10%) or more at the end of each fiscal year. Average patient charges after adjustments for FYE 2019 is \$235.00 per patient.
- A-5. <u>Days Off.</u> District's annual base compensation paid to Physician at section 1, above, includes sixteen (16) working days for illness and vacation and four (4) working days for Continuing Medical Education ("CME") as well as the paid days off set forth in Section 1.2, if applicable.
- A-6. <u>Reimbursements</u>. District shall also provide the following reimbursements to Physician within thirty (30) days of Physician providing reasonable proof of payment:
  - California Medical License and regional hospital privilege fees and renewal fees, and DEA renewal fees (including any fees to transfer any certification to California);
  - Annual membership in the American Academy of Family Physicians and Stanislaus/California Medical Society; and
  - Annual City of Patterson Business License.
  - Any application, credentialing, submittal, or other fees related to participation in any third -party payor agreements or providing Services at any health facility as mutually agreed upon and within the District's geographic boundaries.
- A-7. Productivity Bonus Eligibility and Payment.
  - **Bonus Eligibility**: The physician earns a bonus for every billable encounter above a certain yearly goal (4,368 patient visits or greater than 24 patients per day and 182 clinic days).
  - Quarterly Bonus Calculation:
    - Every quarter, the physician's patient count is compared to an expected number based on how many clinic days the Physician worked.
    - o If Physician sees more patients than expected, Physician gets a bonus of \$69.38 for each patient over 24 patients per day.
    - o However, Physician only receives 60% of this bonus at the end of each quarter. The remaining 40% is settled at the end of the year.
  - Example:
    - o In Quarter 2, the physician sees 1,122 patients.

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- o Based on 43 workdays, Physician was expected to see 1,032 patients.
- The difference (90 extra patients) is eligible for the bonus.
- o The bonus for these 90 patients at \$69.38 per visit is \$6,244.20.
- O Since Physician receives 60% of the bonus as a deposit, Physician receives \$3,746.52 by the 15<sup>th</sup> day after the end of the quarter.
- Year-End Reconciliation: At the end of the year, the total number of patients seen is compared to the annual goal (4,368 patients). The final bonus amount is calculated, and if the physician has been overpaid during the year, they must repay the excess bonus advancement.
- A.8. Addendum A is specifically incorporated into this Agreement as if entirely set forth herein.

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# ADDENDUM B MEDICAL DIRECTOR DUTIES AND COMPENSATION

- B-1. <u>Responsibilities</u>. The District contracts with a Health Center Medical Director ("Medical Director") to provide oversight of all medical services provided through the Health Center and /or any Additional Clinic's. In addition to provider patient care responsibilities, Physician agrees to assume the Medical Director role for Del Puerto Health Care District including the Del Puerto Health Center. The Medical Director provides oversight of all medical services provided through the Health Center and /or any additional clinics and agrees to consult with all other Providers on Health Center protocols and Services.
- B-2. <u>Performance as Medical Director</u>. Physician agrees to devote no fewer than eight (8) hours per week as the Health Center's Medical Director. As Medical Director, Physician shall provide direction, supervision, and administrative services in support of the medical aspects of the District's operations. Such activities shall include, without limitation, working the District administration to locate personnel to cover uncovered Health Center provider shifts, providing Health Center medical care training and oversight, engaging in community outreach, and Health Center provider oversight. Medical Director shall document the work performed as Medical Director in a manner that satisfies Center for Medicare and Medicaid Services (CMS) audit requirements.
- B-3. <u>Call Coverage</u>. Physician further agrees that, as an integral and necessary part of the Services provided by Medical Director, he, in agreement with other District providers shall assure a provider is available by telephone, pager, or other agreed-upon electronic means, for consultation with Providers and Patients, and shall be responsible when another provider is not available to take call, except for such times as Physician is on vacation or engaged in a course of CME.
- B-4. <u>Physician Extender Oversight and Management</u>. In the event Medical Director determines that a Physician or Physician Extender is not performing his/her duties in a manner that meets the applicable standard of care in pediatric, family, or industrial medicine or is behaving inappropriately toward Patients, fellow employees, families of Patients, or visitors at the Health Center, Medical Director shall report such concerns to the Chief Executive Officer. It shall be the District's sole responsibility to take whatever actions it deems necessary regarding such Physician Extender.
- B-5. <u>Training</u>. As the Medical Director, Physician shall be responsible for training Physician Extenders on proper standards of care and accurate medical record-keeping. Additionally, the Physician shall establish and maintain systems for regularly reviewing these records. The District is committed to developing Physician Extenders who may eventually become employees. Therefore, the Medical Director is expected to precept one Physician Extender student during each rolling 12-month period. The student's qualifications, aptitude, and potential to join the District as a provider shall be assessed and mutually agreed upon by the CEO and the Medical Director before any student is accepted for preceptorship.
- B-6. <u>Supplemental Support Obligations</u>. As Medical Director, Physician shall also provide EMR support, participate in and/or create outreach programs, and participate, at his option, in community events related to the services performed by the District

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- B-7. Duty to Dedicate Full Time and Effort to District. During the term of this Agreement and all subsequent terms, Medical Director shall devote his full time, energy, and ability exclusively to the duties described herein, and shall not, without District's prior written consent, render to others services of any kind for compensation, or engage in any other activity that would materially interfere with the performance of Medical Director's duties under this Agreement, whether as a Provider or as Medical Director.
- B-8. <u>Non-Conflict of Interest</u>. Medical directorships and medical society activities are not considered conflicts of interest for the Physician.
- B-9. <u>Non-Compete</u>. Medical Director shall not set up a competing enterprise while operating under this Agreement, whether directly or indirectly, whether as a partner, employee, creditor, shareholder, or otherwise.
- B-10. <u>No Outstanding Commitments</u>. Medical Director here represents that he has no other outstanding commitments inconsistent with any of the terms of this Agreement or the duties to be rendered under it, or that such inconsistent commitments will be terminated prior to the effective date of this Agreement.
- B-11. <u>Fee.</u> District shall pay Physician One Hundred Eighteen Thousand (\$118,000.00) per year as compensation for Medical Director services. Such amount shall be payable to Physician in monthly payments five (5) days following the first of the month for Medical Director services rendered for the previous month. Said payment shall not be made if Physician has failed to document the work performed as Medical Director in a manner that satisfies Center for Medicare and Medicaid Services (CMS) audit requirements.
- B-12. Addendum B is specifically incorporated into this Agreement as if entirely set forth herein.

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CEO's Report by Karin Freese June 2024

#### Financial Position-July 31, 2024:

Cash Balance (all funds) + \$6,222,001
 Restricted Funds - \$3,259,538
 Current Liabilities - \$570,261
 Unencumbered Cash = \$2,392,202

#### **Financial Summary:**

The Del Puerto Health Care District's balance sheet for July 31, 2024, shows that the district is in good financial shape, with steady growth in assets and equity compared to last month and a big improvement from last year.

Current Assets: The money and assets that can quickly be turned into cash increased slightly by 1% from June to July, going from \$7.83 million to \$7.91 million. This is mainly due to better management of money owed to the district and a large increase in other current assets. Compared to last year, current assets grew by 45%, meaning the district has much more liquidity now.

Current Liabilities: These are short-term debts that the district has managed well, decreasing by 3% from June to July, totaling \$570,261. This is a testament to the district's effective financial management. However, compared to last year, current liabilities are up by 10%, which could be due to higher costs or more short-term obligations.

Long-Term Liabilities: These stayed about the same, with only a tiny decrease from June and a 4% drop from last year, totaling \$1.65 million. This shows the district is handling its long-term debt well. Equity:

Unrestricted Assets: These funds the district can use for anything increased by 143% from June to July, reaching \$4.54 million. This is a good sign of financial strength. Compared to last year, unrestricted assets grew by 56%.

Cash and Reserves: The district's cash balance at the end of July was \$6.22 million, a slight decrease from June. After accounting for reserves and liabilities, the district had \$2.96 million in available cash, a small decrease from the previous month. However, the reserve for operating expenses remains robust at 199%, ensuring the district's ability to cover its costs and providing a sense of financial security.

In summary, the Del Puerto Health Care District is financially strong, with significant growth in assets and equity over the past year. However, last month's income and cash decrease should be watched to ensure continued financial stability.

#### Administration:

• Following our Strategic Planning discussions, it became clear that there might be a gap in understanding the day-to-day responsibilities of running the district, including managing employees, overseeing finances, delivering patient care, and providing emergency medical services. I collaborated with our department managers to create a Guide to Daily Operational Responsibilities (attached) to bridge this gap. This guide aims to provide valuable insight into our work's complex and fast-paced nature, showcasing the significant achievements we accomplish with limited resources. Board and community members are welcome to visit our operations to experience in person the good works of the Del Puerto Health Care District.

#### **Community Engagement:**

- I would like to thank our dedicated ambulance and health center personnel who actively participated in the Back to School Block Party at PHS Stadium on Saturday, August 3, and the National Night Out Block Party at the North and South Patterson Parks on Tuesday, August 6. Their commitment to community engagement and public health is commendable and greatly appreciated.
- Social Media Posts (August report attached)

CEO's Report by Karin Freese June 2024

- Health Center Patient Satisfaction survey results are attached
- A five-part survey, written by Board Member Tim Benefield, was published sequentially in the Patterson Irrigator. Thanks to Tim for his effort and insightful sharing of the Del Puerto HCD story. All five articles have been placed on our website with links to the original articles at https://www.dphealth.org/introduction-to-a-five-part-series-on-dphcd

#### **Legislation/Advocacy Activities:**

• I have added a new page to our website that is connected and automatically updated with actions taken on bills we track that impact the Del Puerto Health Care District now or in the future. The web page address is: <a href="https://www.dphealth.org/legislative-priorities">https://www.dphealth.org/legislative-priorities</a>

#### Strategic Planning:

• (See Agenda Item 14: FY 2024-25 Draft Strategic Plan with Prioritized Objectives, SMART Goals, and Action Plan)

**Upcoming Events:** 

Event	Location	Notes
BETA Risk Management Symposium	Huntington Beach	Beta pays for five staff members to attend this
(Sept 5-6)		two day event.
CSDA Annual Conf (Sept 9-12)	Indian Wells	All types of Special Districts are present (Dir
	(Palm Springs)	Avila, Mr. Trefault, Ms. Reyes-Palad, and Ms.
		Freese are registered to attend)
CAA Annual Conference (Sep 17-20)	Anaheim	Ambulance industry state-wide meeting
ACHD Annual Conference (Sep 25-27)	Sacramento	Health care districts' state-wide meeting
Grayson Night Out (Oct 11)	Grayson	Community-wide Public Safety Meet & Greet
Special District Leadership Academy	San Rafael	Special District Leadership Academy (Mr.
(Nov 3-6)		Trefault, Ms. Ramirez, and Mr. Avila attending)

#### Guide to Daily Operational Responsibilities

#### 1. Strategic Planning

- Lead the creation of the district's strategic plan, incorporating input from all departments and stakeholders.
- Conduct a triennial Community Health Needs Assessment (CHNA) to understand the community's healthcare needs, patient demographics, and competitive landscape.
- Set long-term goals and objectives, ensuring alignment with the district's mission and community needs.
- Provide leadership in Administrative, Organizational, and Financial development plans.
- Direct department heads in executing strategic initiatives, monitoring progress, and making adjustments as necessary.
- Ensure that strategic plans are flexible and responsive to changing circumstances, including healthcare trends and funding shifts.

#### 2. Board of Directors

- Keep the Board of Directors informed on the condition of the District's Financial, Personnel, and Management factors that influence aspects of its operation.
- Keep the Board of Directors apprised of actions and the execution of contractual agreements for the District's professional services, recommending changes as required.
- With the Board and Staff, recommend policies to be authorized by the Board and implement all policy decisions of the Board of Directors.
- Review the District's long-range strategy and confirm that the achievement of its Mission is realized consistently and on time.
- Keep the Board of Directors informed of staff concerns about work performance and safety and security needs in the district's workplace environment.
- Assist the Board President with Board meeting agendas.
- Ensure accurate completion, posting, and distribution of Board meeting minutes and resolutions
- Ensure the maintenance and security of official Board records and compliance with Federal, State, and Local Regulations.
- Assist prospective Board members with the process of Board appointment or election

#### 3. Relations with Staff

- Build an effective management team.
- Conduct staff and department meetings in a manner that develops openness, trust, and respect.
- Maintain a collaborative environment that attracts, retains, and motivates a diverse staff of top-quality people.
- Promote and build capacity through educational opportunities for staff while continually addressing and coaching "best practices."
- Collaborate with the Human Resources Manager, Health Center Manager, Medical Director(s), and the Director of Ambulance Operations to support and coach employees on maintaining a safe, professional, ethical, and compliant work environment.

# 4. Community Relations

- Establish and foster collaborative relationships with community groups, private, public, and non-profit organizations.
- Represent the District's programs and mission to agencies, organizations, and community constituents.
- Act as the district's primary spokesperson for the healthcare district in media interactions and public interactions.

## 5. Departmental Oversight (Finance, HR, Ambulance/EMS, Health Center)

• All Departments:

#### Guide to Daily Operational Responsibilities

- Ensure compliance with all state regulations and mandates.
- Review, negotiate, and approve all contracts and agreements, including vendor contracts, employment agreements, and service contracts.
- Lead the development and review of district policies, ensuring they are comprehensive, current, and aligned with the district's goals.
- Stay well informed of Crisis and Risk Management knowledge and share it with the Board and Staff, recommending implementation when necessary.
- Ensure that safety inspections, training programs, and policies are properly developed, applied, and consistently followed across all departments, maintaining compliance and a safe work environment.
- Ensure district Public Records Act standard operating procedures comply with Federal, State, and District mandates.

#### Finance:

- Oversee the district's financial health, reviewing budgets, financial reports, and audits.
- Cultivate financial strategies, including revenue generation, cost control, and investment management.
- Review and recommend a sustainable investment portfolio with the Finance Committee.

#### Human Capital:

- Foster a positive organizational culture, focusing on employee engagement and professional development.
- Ensure the abilities, skills, and knowledge of each employee can be measured and will contribute to the productivity of the District.
- Ensure that all employees are informed of new and updated policies, providing training to ensure understanding.

#### Ambulance/EMS:

- Ensure EMS services operate efficiently, meet regulatory standards, and provide high-quality care.
- Collaborate with EMS leadership on service expansion, equipment upgrades, and training programs.

#### • Health Center:

- Provide strategic oversight of health center operations, ensuring the delivery of patient-centered care.
- Work with medical leadership to assess community health needs and expand services accordingly.

# 6. Financial Operations

- Familiarize the Board with the District's financial needs and status.
- Pursue Development Impact Mitigation Fees and other funding opportunities from grants and public and governmental agencies, assuring compliance with grant restrictions.
- Direct and ensure that the District sustains adequate insurance coverage to protect the District appropriately.

# 7. Legal (General, Employment, Governance)

- Ensure the district's adherence to all relevant laws and regulations, including healthcarespecific legislation and employment laws.
- Oversee the management of legal risks, including handling lawsuits, investigations, and compliance issues.
- Work with legal counsel to resolve disputes and manage litigation.
- Confer with the district's legal counsel on media communications as necessary, such as press releases.

# 8. Local Government (City, County, School Districts, LAFCO)

• Develop and maintain strong relationships with local government officials, including city

#### Guide to Daily Operational Responsibilities

- council members, county supervisors, and LAFCO representatives.
- Collaborate on joint ventures for community health initiatives, including efforts to engage with local school districts and promote health education, preventive care, and access to healthcare services for students and families.
- Monitor and ensure compliance with local government regulations, zoning laws, and public health mandates.
- Represent the district at local government meetings and community forums.

# 9. State Organizations (ACHD, CSDA, EMSAAC, CAA, CARHC)

- Serve as the district's representative at state-level healthcare organizations, advocating for district interests.
- Stay informed of state policy changes, regulatory updates, and best practices to inform district strategies.
- Build and maintain relationships with leaders of other healthcare districts and organizations to share knowledge and resources.
- Facilitate participation in state-led initiatives that align with district goals.

# 10. Legislative Relationships (State Representative, State Senator, County Supervisor, Federal Senators, and Federal Representative)

- Develop and maintain strong relationships with local, county, state, and federal personnel to advocate for legislative needs.
- Act as the primary advocate for the district in legislative matters, lobbying for policies that support the district's mission and objectives.
- Track and analyze proposed legislation and policy changes that may impact the district.
- Prepare position papers, testimony, and briefings for legislative committees and hearings.
- Collaborate with relevant advocacy groups to amplify the district's voice on important healthcare issues.

# 11. Provider Professional Service Agreements and Employment

- Review and negotiate professional service agreements with healthcare providers, ensuring favorable terms for the district.
- Manage provider relationships, addressing any concerns or issues that arise.
- Conduct monthly meetings with providers to discuss performance, contract fulfillment, and areas for improvement.
- Oversee the recruitment, hiring, and onboarding of healthcare providers, ensuring alignment with district standards.

# 12. Union Contracts, Negotiations, and Implementation

- Lead negotiations with the Union representing district employees, working to secure agreements that balance employee needs with fiscal responsibility.
- Ensure all Union contracts are fully implemented, with regular reviews to ensure compliance and address potential issues.
- Consult on Union grievances and disputes, ensuring fair and timely resolution following union contracts and district policies.

# 13. Personal Leadership and Development

- Continue education through conferences and seminars in health care, administration, and management areas to maintain, strengthen, and capitalize on ideas, philosophies, and abilities as a Health Care District leader.
- Maintain a working knowledge of significant developments and trends in the Health Care and Emergency Medical Services industries.
- Pursue relevant degrees and certifications to support ongoing professional development and leadership effectiveness.

<sup>\*\*</sup>NOTE: These departments are unstaffed. The CEO performs these responsibilities as much as possible.

#### Guide to Daily Operational Responsibilities

# Information Technology Department\*\* (Summary only - please see full guide)

- Primary contact for software installation, support, and technical issues for staff
- Vendor and Budget Management
  - Develop relationships with IT Vendors
  - Monitor expenditure and ensure effective use of resources
- IT Strategy Development and Implementation
  - o Align technology initiatives with organizational goals
  - Identify and implement technology
- Technological Innovation and Advocacy
  - Stay informed about emerging technologies
  - o Promote adoption of technologies that advance the district's mission
- Software and Hardware Management w/Department Managers
  - Oversee management of hardware assets
  - o Ensure software and hardware solutions align with budgetary restraints
- Cybersecurity and Data Protection
  - Ensure the application of IT security measures
  - Ensure staff training on cybersecurity best practices
- IT Policy and Compliance
  - Develop and enforce IT policies and procedures
  - o Ensure all HIPAA standards are met
- Disaster Recovery and Business Continuity
  - o Develop and maintain a disaster recovery plan
  - o Ensure business continuity plans exist for disruptions
- Vendor Supported Solutions
  - o Technical Support and Issue Resolution
  - System Maintenance and Optimization

# Marketing Department\*\* (Summary only - please see full guide)

- Strategic Marketing Planning
  - o Develop a comprehensive marketing plan
  - Market research
- Brand Management
  - Brand Development and Positioning
  - Brand Guidelines
- Community Engagement and Outreach
  - Community Events and Sponsorships
  - o Public Health Campaigns
  - Print Media Campaigns
- Digital Marketing and Online Presence
  - Website Management
  - Social Media Marketing
  - Email Marketing
- Public Relations
  - Media Relations
  - o Crisis Communication
- Patient and Community Education
  - o Educational Materials (e.g., development and production)
  - Health Literacy Campaigns
- Advertising and Promotions
  - o Traditional Advertising (e.g., newspaper, radio)
  - Digital Advertising
  - o Promotional Offers (e.g., free physicals)
- Patient Experience and Engagement

# **Guide to Daily Operational Responsibilities**

- o Patient Feedback and Surveys
- o Patient Engagement Programs (e.g., town halls, patient focus groups)
- Collaboration and Partnerships
  - o Partnership Development (e.g., X-ray)
  - Referral Networks Improvement
- Monitoring and Reporting
  - Marketing Analytics
  - o Reporting to Leadership

# **DPHCD Finance Department**

# Guide to Daily Operational Responsibilities

## 1. Accounts Payable and Receivable

- Receiving bills, gaining manager approval, entering payments, printing checks and reports, getting signatures, preparing and mailing
- · Receive patient payments
- Prepare and make bank deposits
- Billing reconciliation for Ambulance and Health Center
  - o Receive monthly reports from external billing companies
  - Enter charges and adjustments into QuickBooks
  - o Reconcile billing reports and bank deposits

#### 2. Reporting

- Expense and income tracking by department and project
- Budget monthly monitoring and reporting
- Monthly, quarterly and annual fiscal reports to internal and external users (Board, State, County, Insurance, USDA, etc.)
- Tracking of Intergovernmental Transfer revenue versus voluntary contributions
- · Quarterly insurance reporting

## 3. Facility Management:

- Tenant relations
- Monthly billing of rent and Common Area Maintenance expenses
- Emergency repairs and scheduled maintenance (e.g., roof, HVAC, plumbing)
- Periodic lease renewal

# 4. Non-Operating Revenue:

- Tax roll preparation for ambulance special assessment
- Track tax and special assessment receipts, prepare audits and reports
- Development Impact Mitigation Fee monitoring, receipts and reporting

# 5. Payroll

- Biweekly payroll audit process, compiling reports, and printing checks
- Bi-weekly reconciliation and payment of retirement benefits (i.e., 414(h), 457 EE, 457 ER)
- Monthly reconciliation and payment of health care benefits accounts (i.e., medical, dental, vision)

#### 6. Administration

- Cash management for optimal returns
- Fixed asset and medical supplies monitoring and reconciliation
- State and local permits, licenses, and tax payments
- Risk management with insurance oversight
- Respond to public record requests
- · Respond to medical record requests
- Foundation recordkeeping and registration renewal

#### 7. Annual Responsibilities

- Budget preparation and mid-year revision
- Insurance applications (i.e., general, professional, employment, cyber, directors)
- Fiscal year-end processes
- · Financial statements audit
- Calendar year W2, W3, and 1099 reconciliation and filing
- Prepare, submit, and respond to audits of government-required reports (e.g., Medicare Cost Report, Medi-Cal Reimbursement, State Compensation, and County Income and Expenses).

# **DPHCD Human Resources Department**

# Guide to Daily Operational Responsibilities

# 1. Recruitment and Staffing:

- Provide human capital guidance and recommendations to management
- Manage job postings, update job descriptions
- Participate in City of Patterson job fairs
- Source, screen, and evaluate candidates
- Conduct and assist with hiring manager interviews
- Coordinate the hiring process

# 2. Employee Relations:

- Address employee concerns
- Assist in resolving conflicts
- Recommend and provide tools to maintain a positive workplace environment.

# 3. Compensation and Benefits Administration:

- Conduct regular salary and wage market studies and recommend adjustments as necessary
- Oversee payroll data input, changes in wages or deductions
- Administer employee benefits enrollment and programs
- Ensure compliance with compensation regulations
- Track and coordinate mandated state and federal leave programs

# 4. Training and Development:

- Onboard and orient new hires for warm handoff to the department
- Offboard separating employees (e.g., exit interviews, collection of district property, final check)
- Organizing and facilitating employee training sessions
- Assign and track annual and biennial training requirements of employees and board
- Encourage employee participation in professional development programs

# 5. Performance Management:

- Address management employee performance questions and concerns
- Coach employees when workplace skill improvement is needed
- Assist managers to write and implement improvement plans when necessary
- Track managers' completion of annual performance reviews

# 6. Compliance and Risk Management:

- Ensure the organization adheres to labor laws and regulations,
- Manage employee records
- Handle compliance-related issues (e.g. safety)
- Track license and certification expiration dates and renewals
- Oversee worker's compensation claims
- Coordinate District's safety program(s) (e.g., ambulance, health center, emergency preparedness)
- Carry out the District's ergonomic program

# 7. HR Policy and Procedure Management:

- Develop, update, and enforce HR policies and procedures
- Ensure HR policies and procedures align with district goals and legal requirements.

#### **Patterson District Ambulance**

#### Guide to Daily Operational Responsibilities

# 1. Emergency Response to 911 Dispatches:

- 3,400 responses resulting in 2,400 transports annually
- 365 square mile/234,000-acre response area.
- Perform medical assessments
- Provide necessary medical interventions
- Transport to an emergency department
- [Fun Fact: PDA crews have transported patients to distant facilities like San Jose Regional Medical Center, Valley Care Pleasanton, or Valley Children's Healthcare in Madera]
- Monitor the EMS system, respond to dispatch inquiries, and determine whether supervisor involvement is needed—often for active 911 calls that require immediate response.
- Supervisor response to multi-casualty or high-acuity incident scenes including Fire or Law standby incidents, 5150 incidents, or whenever requested.

#### 2. Administration:

- Scheduling for daily ambulance staffing, standby events, and support of local events and training
  initiatives. Respond to vacation scheduling, PTO requests, and sick callouts. [Fun Fact: this task
  can take considerable time depending on staffing requirements and personnel availability.] [Fun
  Fact: Supervisors must occasionally work on ambulances to maintain minimum unit availability].
- Respond to patients, patient family members, allied agencies, or hospital inquiries, complaints, or requests for information in real-time, as needed.
- Provide documents and reports when requested (e.g., monthly updates, receipts for purchases).
- Development and enforcement of operational policies and procedures.
- Union relationship building, labor-management committee, address union situational concerns and respond to grievances.
- Bi-weekly payroll preparation
- Interview and assist in selection and hiring processes
- Training and onboarding of new employees

# 3. Operational Readiness:

- Ensure ambulance vehicles and crews' operational readiness.
- Ensure crew quarters are clean and provide a safe work environment.
- Coordinate ambulance maintenance (e.g., routine maintenance, brakes, oil, tires, A/C.
- Coordinate ambulance repairs to maintain fleet readiness for the required number of ambulance units each day (e.g., engine, chassis, radios, electrical, inverters (charges vehicle batteries when connected to shore power), or any other ambulance systems, functions, or required maintenance.
- Maintain EMS supply cache to ensure we always have everything we need. We address shortages, backorders, or any other supply issues impacting availability. Conduct annual supply and asset inventories.

# 4. Quality Improvement and Clinical Education:

- Provide oversight, quality improvement, and clinical education or training for new or revised treatment protocols and EMS system policies, including developing educational content, skills instruction, testing, post-training follow-up, and reporting as required, for:
  - PDA Paramedics and EMTs
  - o Patterson Fire Response Advance Life Support (FRALS) paramedics and EMTs
- Audit 100% of all patient care reports (ePCRs) written by PDA and Fire personnel.
- Open investigations regarding PDA responses or patient care concerns
- Report or respond to Unusual Occurrence (i.e., an unexpected event with significant impact) (aka UO) incidents or circumstances.
- Initiate internal education and training initiatives based on quality improvement metrics.
- Provide EMS training to allied agencies West Stanislaus Fire Protection District, Westport Fire District, Mountain View Fire District – as needed or requested.

#### **Patterson District Ambulance**

#### Guide to Daily Operational Responsibilities

## 5. Local Emergency Medical Services Agency (LEMSA):

- The LEMSA is responsible for coordinating, regulating, and overseeing emergency medical services within a specific geographic area, ensuring that high-quality care is provided to patients in emergency situations.
- Active participation in County EMS Agency for all LEMSA initiatives.
- EMS System meetings (e.g., system status and operations, ad hoc committees, agency director level initiatives, train-the-trainer, policy and protocol development. and pre-implementation training)
- EMS System patient care-related meetings STEMI, Stoke, Trauma, Stanislaus County Healthcare Emergency Preparedness Coalition (SCHEPC), Local Quality Improvement Group (LQIG)
- Participate in emergency preparedness drills planning, participation as evaluators, PDA crew participation at field level

# 6. Community Participation:

- Attend City Council, Planning Commission, and Public Safety meetings.
- Participate in community-interest meetings as needed. (e.g., meeting of community members with law, fire, and EMS)
- Provide Community CPR Training
   — "CPR Saturdays"
- Participation in these annual community events:
  - Love Patterson
  - National Night Out
  - Grayson Night Out
  - Back to School Block Party
  - Apricot Fiesta
  - Patterson HS lunch for incoming Freshmen during their orientation
  - Patterson HS End of Year lunch for Seniors
  - Patterson HS Prep projects EMS crew shadow/ride time
  - Patterson HS Health Career training
  - Participate in the PJUSD United Patterson community group
  - PJUSD School Career Days at High School, Middle School, and Elementary grades
  - Jr. Tigers football EMS standby typically four games each Saturday (home games only) [Fun Fact: 4 games = +/-ten hours with mobilization and demobilization time]
  - Patterson HS football EMS standby includes Freshman/Sophomore, JV, and Varsity games. [Fun Fact: Frosh/Soph games one game on Thursdays and JV / Varsity games back-to-back on Fridays, home games only]
  - Patterson Recreational Center Safety Day
  - Patterson Parks and Recreational events (e.g., parking lot skate events)

#### **Del Puerto Health Center**

#### Guide to Daily Operational Responsibilities

# 1. Patient Care Operations:

- 15,500 visits annually; 7,500 assigned Medi-Cal patients and 800 Medicare patients
- Oversee patient care support teams, including call center, front desk, medical records, patient engagement, and specialist referral teams
- Coordinate with providers, social workers, and other healthcare professionals to ensure cohesive care delivery.
- Address and find solutions for patient needs discovered during visits
- Ensure patients can access the necessary resources, including medications, equipment, and support services.
- · Complete patient-requested forms (e.g., worker's compensation, disability
- Process Patient Income Discount Fee application and response.
- Work with providers to improve patient satisfaction and address any issues that may arise in patient care.
- Provide emotional support to patients and their families during critical times.
- Manage transitions between different levels of care (e.g., from hospital to home care), ensuring continuity and avoiding gaps in care.
- Respond to emergencies or sudden changes in a patient's condition, coordinating urgent care and making quick, informed decisions.

#### 2. Provider Relations

- Implementing strategies to retain providers, including ensuring job satisfaction, providing career development opportunities, and fostering a supportive work environment.
- Receive provider feedback and ensure that their concerns are addressed promptly.
- Offer support, training, and resources to help providers meet performance goals.
- Ensure providers adhere to all relevant healthcare regulations and standards.
- Oversee and manage the licensing, credentialing, and re-credentialing processes for providers with various payors and regulatory bodies to ensure all are current and compliant with industry standards.
- Review patient care documentation to maintain thorough and accurate patient records, documenting all aspects of care, communications, and decisions.

# 3. Staffing:

#### • Hiring and Onboarding:

- Interview and assist in the selection and hiring processes
- o Training and onboarding of new employees
- o Support the LVN/Medical Assistant students with their externship and rotations
- Bi-weekly payroll preparation
- Staff problem solving

#### Scheduling:

- Schedule health center staffing and support for local events
- o Responding to vacation scheduling, PTO requests, and sick callouts
- Distribute staff according to the daily schedule adjustments

#### Education and Development:

- Developing educational content, skills instruction, testing, post-training follow-up, and reporting as required for providers and health center staff
- Quality improvement and clinical education for Medical Assistants
- Customer service training for front desk, referrals, medical records, and phone room staff
- Conduct monthly meetings for medical assistants, providers and both combined.

#### 4. Administrative

 Provide documents and reports when requested (e.g., purchase receipts and monthly reports, medical records)

#### **Del Puerto Health Center**

#### Guide to Daily Operational Responsibilities

- Support Provider licensing, payor credentialing, and contracting
- Respond to patients, family members, allied agencies, and hospital inquiries, complaints, or requests for information.
- Develop, deliver, and enforce policies and procedures
- Provider support (patient forms, labs, messages, completing patient forms)
- Prepare and manage provider-related documentation, including medical records, patient charts, and correspondence.
- Generate and provide reports on provider performance, patient volume, and other relevant metrics.

# 5. Operational Readiness:

#### • Facility Supplies, Maintenance, and Safety:

- o Ensure the health center is clean and provides a safe work environment
- Maintain medical supply inventory and orders. Address shortages, backorders, or other supply issues impacting availability
- Coordinate equipment maintenance and repairs
- o Update equipment software (e.g., athenaHealth, Welch Allyn)
- Conduct safety inspections

#### • Electronic Health Record System:

- Deploy IT hardware to all staff and patient exam rooms.
- Coordinate fixit tickets with IT vendor
- o Train providers and staff on use and system updates or changes
- o Install supplemental software and train on usage (i.e., Dragon Naturally Speaking).

# 6. Quality Improvement and Education:

- Provide oversight, quality improvement, and clinical education or training for new or revised health center, CMS/Medi-Cal, or payer policies
- Participate in or lead quality improvement initiatives to enhance patient care outcomes.
- Monitor and analyze key performance indicators (KPIs) to identify areas for improvement in patient care.
- Track, assign, and achieve Healthcare Effectiveness Data and Information Set (HEDIS) goals.
- Initiate internal education and training initiatives based on quality improvement metrics

# 7. Policy and Procedures:

- Develop and enforce policies and procedures to ensure healthcare regulations and standards compliance.
- Monitor changes in healthcare laws and regulations and implement necessary updates to practice policies.

# 8. Program & Mandate Compliance:

- Vaccines for Children program compliance
- Federal Rural Health Clinic certification compliance
- Annual/Biennial Audits and Inspections:
  - CMS (conducted by payers),
  - California Department of Health Care Services
  - Vaccines for Children
  - Medical Records

# 9. Community Outreach

- Organize our providers for community speaker events
- Support Licensed Vocational Nurse and Medical Assistant students with their externships and rotations.
- Participate in annual community events

# **Del Puerto Health Center**

# **Guide to Daily Operational Responsibilities**

- o Love Patterson
- Apricot Fiesta First Aid Station
- Back to School Block Party
- o High school sports physicals
- Jr. Tigers football sports physicals
   Women's Health Day (i.e., on-site mammograms and PAPs)
- National Night Out

# **DPHCD Information Technology Department**

Guide to Daily Operational Responsibilities

# 1. Vendor and Budget Management

- Manage relationships with IT vendors and service providers, negotiating contracts and ensuring high-quality service delivery.
- Monitor IT expenditures and manage the department's budget, ensuring costeffective use of resources.
- Report on IT spending and provide recommendations for budget adjustments based on changing needs or emerging opportunities.

# 2. IT Strategy Development and Implementation

- Oversee the development and execution of the district's IT strategy, aligning technology initiatives with organizational goals.
- Focus on enhancing innovation, operational efficiency, and data security within the IT infrastructure.
- Collaborate with other departments to identify and implement technology solutions that support district objectives, particularly in Health Care and Emergency Medical Services.

# 3. Technological Innovation and Advocacy

- Stay informed about emerging technologies and trends that could benefit the district.
- Understand and advocate for the adoption of practical technological innovations to advance the district's healthcare and emergency medical services.
- Lead pilot programs and initiatives to test and integrate new technologies that enhance service delivery and operational efficiency.

# 4. Software and Hardware Management with Department Managers

- Evaluate, select, and procure software and hardware solutions aligned with the district's needs and budgetary constraints.
- Manage the deployment and maintenance of software applications, ensuring they are up-to-date and functioning correctly.
- Oversee the lifecycle management of hardware assets, including servers, workstations, and networking equipment.

# 5. Software and Hardware Management with Department Managers

- Evaluate, select, and procure software and hardware solutions aligned with the district's needs and budgetary constraints.
- Manage the deployment and maintenance of software applications, ensuring they are up-to-date and functioning correctly.
- Oversee the lifecycle management of hardware assets, including servers, workstations, and networking equipment.

# 6. Cybersecurity and Data Protection

• Lead efforts to protect district data from cybersecurity threats by implementing robust security measures, including firewalls, encryption, and intrusion detection systems.

# **DPHCD Information Technology Department**

#### Guide to Daily Operational Responsibilities

- Conduct regular audits of IT systems and procedures to identify vulnerabilities and ensure compliance with security best practices.
- Develop and deliver staff training programs on cybersecurity awareness, ensuring that all employees understand and follow best practices for data protection.

# 7. IT Policy and Compliance

- Develop and enforce IT policies and procedures that ensure compliance with legal, regulatory, and district-specific requirements.
- Monitor compliance with IT policies, conducting regular reviews and updates to address evolving risks and technological changes.
- Coordinate with legal and compliance teams to ensure that all IT practices adhere to relevant regulations and standards.

# 8. Disaster Recovery and Business Continuity

- Develop and maintain the district's disaster recovery plan, ensuring that critical IT systems can be restored quickly in the event of an outage or security breach.
- Conduct regular tests of the disaster recovery plan to identify and address potential weaknesses.
- Ensure that business continuity plans incorporate IT considerations, supporting the district's ability to maintain operations during and after disruptions.

# 9. Vendor Supported Services

# Technical Support and Issue Resolution

- Act as the primary contact for IT issues, providing prompt assistance and ensuring the timely resolution of technical problems.
- Monitor and manage the IT helpdesk, prioritizing and addressing support requests from staff across the district.
- Troubleshoot and resolve hardware, software, and network-related issues to minimize downtime and maintain productivity.

#### System Maintenance and Optimization

- Oversee the regular maintenance of IT systems, including updates, backups, and performance monitoring.
- Optimize network and system performance to ensure reliable and efficient operation across the district.
- Plan and manage system upgrades, minimizing disruption to daily operations.

# **DPHCD Marketing Department**

#### Guide to Daily Operational Responsibilities

# 1. Strategic Marketing Planning

#### Develop a Comprehensive Marketing Plan:

- Create a strategic marketing plan aligned with the healthcare district's mission, vision, and long-term goals.
- o Identify target audiences, including patients, community members, local businesses, and government agencies.
- Establish measurable objectives and key performance indicators (KPIs) to track the effectiveness of marketing initiatives.

#### Market Research:

- Conduct market research to understand the community's healthcare needs, patient demographics, and competitive landscape.
- Analyze trends in healthcare services and patient preferences to inform marketing strategies.
- Regularly assess community feedback and satisfaction to adapt marketing efforts.
- o Provide research-based reports to guide district resource allocation as needed

## 2. Brand Management

#### Brand Development and Positioning:

- Develop and maintain a strong, consistent brand identity that reflects the district's values and commitment to quality care.
- Position the healthcare district as a trusted provider of healthcare services within the community.

#### Brand Guidelines:

- Create and enforce brand guidelines to ensure consistency across all marketing materials and communications.
- Oversee the use of the district's logo, colors, and messaging across various platforms.

# 3. Community Engagement and Outreach

#### Community Events and Sponsorships:

- Plan and execute community health events, workshops, and seminars to promote health education and district services.
- Sponsor local events and partner with community organizations to enhance the district's visibility and reputation.
- o Engage community leaders to ensure the district's appropriate participation in events.

#### Public Health Campaigns:

- Develop and implement public health campaigns focused on preventive care, wellness programs, and chronic disease management.
- Collaborate with local schools, businesses, and organizations to promote health initiatives.

#### Print Media Campaigns:

- o Develop and distribute district annual report to the community
- Develop and distribute triennial Community Health Needs Assessment results
- o Provide Human Resources with relative content for employee newsletter

# 4. Digital Marketing and Online Presence

#### Website Management:

- o Maintain and regularly update the healthcare district's website with relevant information, including services, news, events, and contact details.
- Optimize the website for search engines (SEO) to improve visibility in online searches.

#### Social Media Marketing:

- Develop and manage social media profiles on platforms such as Facebook, Twitter, Instagram, and LinkedIn.
- Create engaging content that highlights district services, patient success stories, health tips, and community events.

# **DPHCD Marketing Department**

#### Guide to Daily Operational Responsibilities

 Monitor social media activity and respond to inquiries, comments, and feedback in a timely manner.

#### Email Marketing:

- Design and execute email marketing campaigns to keep patients and community members informed about services, events, and health tips.
- Segment email lists to deliver targeted messages to specific groups, such as seniors, families, or individuals with chronic conditions.

#### 5. Public Relations

#### Media Relations:

- Build and maintain relationships with local media outlets to secure coverage of district initiatives, events, and achievements.
- Write and distribute press releases to announce new services, facilities, partnerships, and other important news.
- Support the CEO who is the primary spokesperson for the healthcare district in media interactions.

#### Crisis Communication:

- Develop and implement a crisis communication plan to manage public relations during emergencies, negative incidents, or other crises.
- Ensure timely and transparent communication with the public and media during crises.

# 6. Patient and Community Education

#### Educational Materials:

- Develop brochures, flyers, newsletters, and other educational materials that provide information on the district's services, health tips, and preventive care.
- Ensure that materials are culturally sensitive and accessible to all segments of the community.

#### Health Literacy Campaigns:

- Promote health literacy by providing resources and information to help community members make informed healthcare decisions.
- Organize workshops and webinars on topics such as nutrition, fitness, mental health, and chronic disease management.

# 7. Advertising and Promotions

#### • Traditional Advertising:

- Plan and execute advertising campaigns through traditional media channels such as newspapers, radio, and local TV.
- Create print advertisements, billboards, and direct mailers to reach different segments of the community.

#### Digital Advertising:

- Implement online advertising campaigns, including pay-per-click (PPC) ads, display ads. and social media ads.
- Use targeted digital marketing strategies to reach specific demographics and promote specific services or events.

#### Promotional Offers:

 Develop and promote special offers, such as free health screenings, discounted services, or new patient incentives, to attract new patients and retain existing ones.

# 8. Patient Experience and Engagement

#### • Patient Feedback and Surveys:

- Collect and analyze patient feedback through surveys, focus groups, and online reviews.
- Use insights from patient feedback to improve services and enhance the overall patient experience.
- o Report patient feedback to management for possible action.

# **DPHCD Marketing Department**

#### Guide to Daily Operational Responsibilities

#### • Patient Engagement Programs:

- Develop programs to engage patients in their healthcare journey, such as wellness challenges, support groups, and loyalty programs.
- Implement initiatives to increase patient retention and satisfaction.

# 9. Collaboration and Partnerships

#### • Partnership Development:

- Establish partnerships with local businesses, schools, non-profits, and government agencies to expand the district's reach and impact.
- Collaborate with other healthcare providers to offer joint services, health fairs, or community wellness programs.

#### • Referral Networks:

Build and maintain a network of referral sources, including physicians, specialists, and community organizations, to increase patient referrals.

# 10. Monitoring and Reporting

#### Marketing Analytics:

- Track and analyze the performance of marketing campaigns using tools like Google Analytics, social media analytics, and email marketing platforms.
- Use data to refine marketing strategies, optimize campaigns, and demonstrate ROI to stakeholders.

#### Reporting to Leadership:

- Regularly report on marketing activities, outcomes, and ROI to the district's leadership team.
- Provide insights and recommendations for future marketing initiatives based on data and trends.

# Please rate our service today



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17% 26 resp.

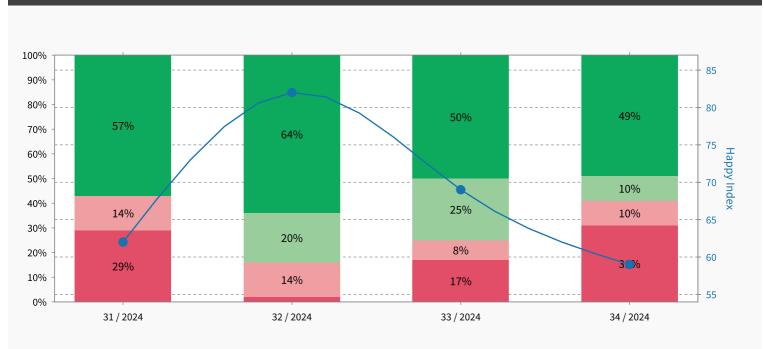


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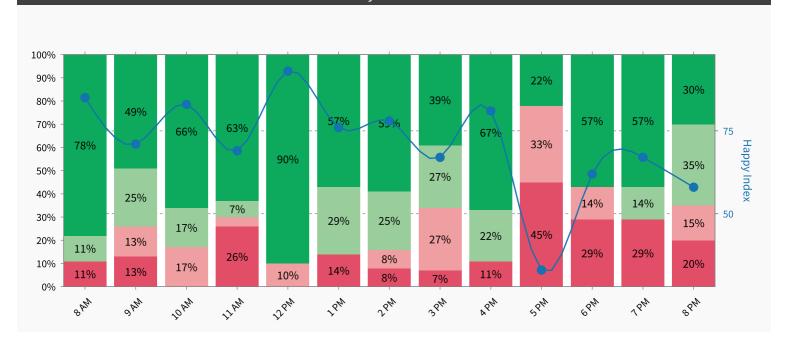
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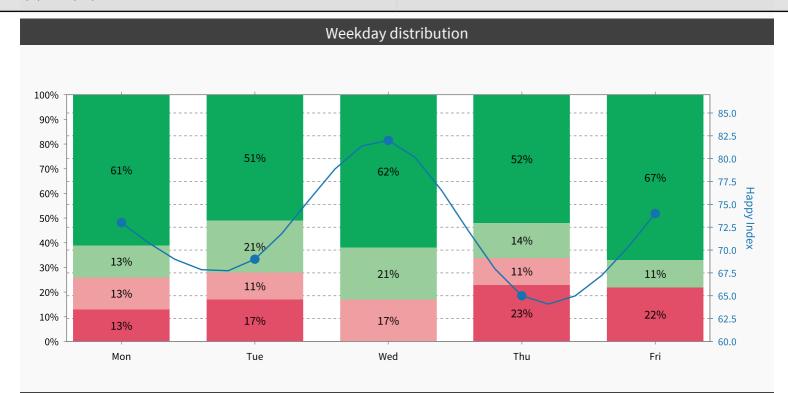
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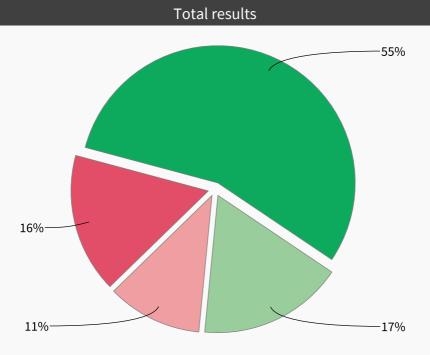
# Week distribution

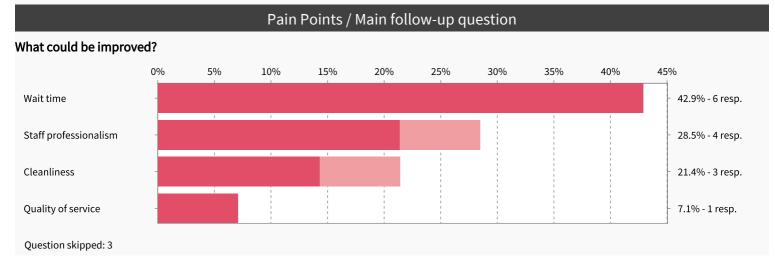


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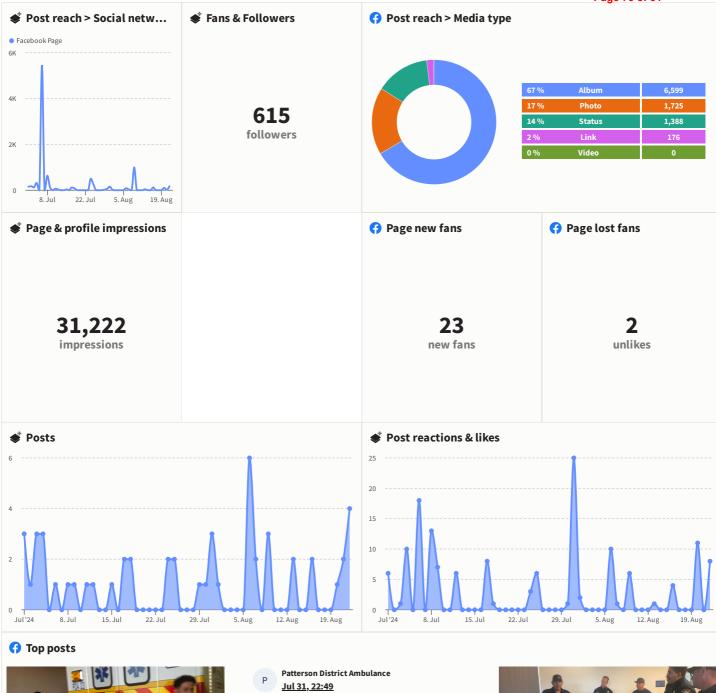








 $HappyOrNot^{\circ}$ 





Our newest ambulance has officially hit the streets and is ready to serve our community with top-notch equipment and care. We're committed to providing the best

**18** likes and reactions

When this happens, it's usually because the owner only shared it with a small group of people, changed who can see it or it's been deleted.

16 likes and reactions



≟ N Last week, we teamed up with PHI Med 4-1 Modesto to provide airway training to both Patterson City Fire Department ( City of Patterson - Local Government ) and

**13** likes and reactions



# Ambulance Report July 2024

Patterson responses in July: 333 responses resulting in 221 transports – a new all-time high in transports, including four by our BLS unit. There were 315 responses in the Patterson District Ambulance response area, resulting in 206 transports. PDA units responded to 295 of 315 (93.65%) EMS calls in our district and transported 194 of 206 (94.17%) of all patients transported from our district. AMR had four responses into the district with 3 transports, and Westside had 14 responses, yielding nine transports. PDA responded into the Westside District 23 times which resulted in 14 transports and 15 responses in AMR response area with 13 transports.

The entire EMS system was busy in July, an increase common to the summer months. All ambulance providers saw increased response volume, which resulted in busy area emergency rooms. ER staff did an excellent job getting ambulances in and out, which helped reduce extended ambulance response times.

PDA assisted AmWest, a non-emergency ambulance provider in Stanislaus County, by precepting 5-call paramedic ride time as part of the LEMSA accreditation process. We also had several doctors in their Kaiser ER residency ride with our ambulance crews. This is always beneficial to everyone – the doctors and our personnel.

The football season is just beginning, which means lots of football standbys for PDA. While football game standbys can be routine and fun to watch, they can also turn in an instant and become high-stress interactions. Many EMS personnel—not just at PDA—have no interest in these potentially high-stress events, which makes them hard to staff. It is not uncommon for me to attend games to provide backup and training for brave EMTs venturing into football standbys.

Vehicle Update: One ambulance is out of service after a vehicle accident in June, requiring extensive repairs. Other ambulances have had persistent air conditioning issues, but we have kept the minimum number of ambulances in service and maintained our response profile.

# **Health Center Report July 2024/ Suzie Benitez**

Encounter July 2024					
Primary Care Vacation/Sick/CME time off					
Provider	Hours worked	Encounters			
Rodriguez	116	441			
Singh	144	481			
Barragan	120	316			
Primary Total	380	1,238			
Mental Health Encoun	ters				
Herrera		85			
Saturday Clinics		0			
HC Total Encounters		1,323			
Urgent Care Clinic En	counters (Tuesday and	Thursday)			
Date	Time	Encounters			
February	5:00pm-9:00pm	170			
March	5:00pm-9:00pm	134			
April	5:00pm-9:00pm	133			
May	5:00pm-9:00pm	82% Medi-cal 18% Private =136			
June	5:00pm-9:00pm	91			
July	5:00pm-9:00pm	66% Medi-cal 34% Private = 98			

- Staff and Provider meeting-July 17th.
- Monthly Health Plan Meeting (HEDIS MEASURES SUPPORT)
- Back to School Block Party participation on Saturday, August 3<sup>rd</sup> 8:30-11:30 am. Gave away plenty of school supplies including a girl and boy bike.
- Community Event-Topic "Depression" scheduled for Tuesday, October 8<sup>th</sup> from 10:00-11:30 am. Presentation will be provided by Dr. Rodriguez and Jessica Herrera, LCSW.

Column1	Column2
2024 Measures	2024 Measure Description
IHA	Initial Health Appointment
DEV	Developmental Screening in the First Three Years of Life
TFL-CH	Topical Fluoride for Children
BCS	Breast Cancer Screening
CCS	Cervical Cancer Screening
CIS10	Childhood Immunization Status-Combination 10
IMA	Immunizations for Adolescents-Combination 2
LSC	Lead Screening in Children
W30_1	Well-Child Visits in the First 0 to 15 Months-Six or More Well-Child Visits
W30_2 WCV	Well-Child Visits in the First 15 Months to 30 Months-Two or More Well-Child Visits Child and Adolescent Well Care Visits
CBP	Controlling High Blood Pressure
HBD COL	Hemoglobin A1C Control for Patients With Diabetes-HbA1C Poor Control (>9%)  Colorectal Cancer Screening
CHL	Chlamydia Screening Women
PPC Pre	Timeliness of Prenatal Care
PPC_Post	Timeliness Postpartum Care
FUM	Follow-Up After ED Visits for Mental Illness-30 days
FUA	Follow-Up After ED Visits for Substance Abuse-30 days
AMR	Asthma Medication Ratio
WCV REL	Child and Adolscent WCV-Black or While REL Cohort

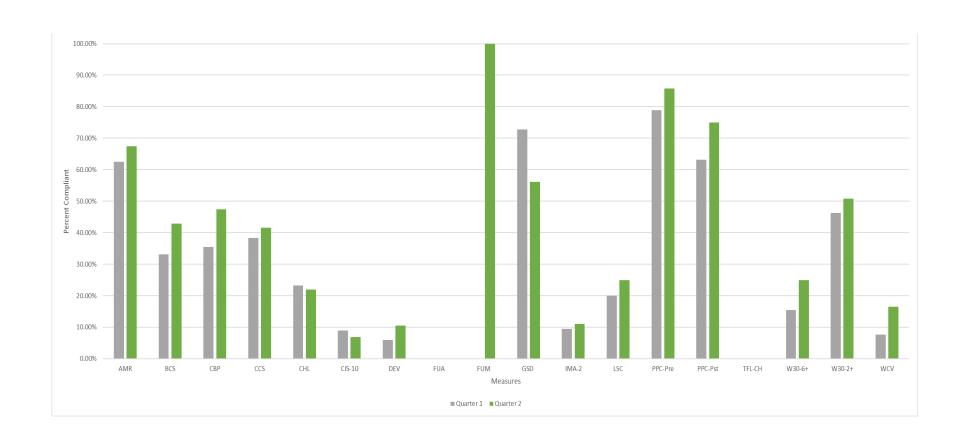
# Quality Performance – JULY 2024MY







# **Trend Report HPSJ JULY 2024**



#### **Human Resources Status Report August 2024**

By Robert Trefault, Human Resources Manager

The Del Puerto Health Care District's Human Resources Department continues to be actively involved in the District's growth and employee engagement. In August, we were able to bring two Paramedics onto the Ambulance team. We also got our newest Health Center provider fully credentialed with the payers so she can bill for her own patient encounters, increasing productivity and patient care by 33%! We are still working on recruiting a Pediatrician and an Advanced Practice Provider (e.g., NP, PA).

Human Resources worked to get the salary ranges for the Health Center Assistant Manager, Staff Accountant, and Executive Secretary positions approved. This included updating the Job Descriptions and conducting a market survey for all positions. I also assisted with the CEO Evaluation Committee by collecting data and providing guidance to properly evaluate the DPCHD CEO. This involved conducting a market survey, an Employee Engagement Survey, a CEO Evaluation Survey, and gathering data on yearly accomplishments and goals. This information will be discussed at tonight's Board meeting in closed session.

We are preparing to launch a new Del Puerto Health Care District Employee Newsletter and will ask employees to help choose a new name. The new format will include information on the District, a focus on an employee, and community news. We plan to send out the first edition at the end of September.