



AGENDA

REGULAR MEETING OF THE EL CAMINO HEALTHCARE DISTRICT BOARD OF DIRECTORS

Tuesday, January 17, 2017 – 5:30 pm

El Camino Hospital | Conference Rooms E, F, & G (ground floor)
2500 Grant Road, Mountain View, CA 94040

Dennis Chiu will be participating via videoconference from 1750 Welton St., Denver, CO 80202.

PURPOSE: The purpose of the District shall be (i) to establish, maintain and operate, or provide assistance in the operation of, one or more health facilities (as that term is defined in California Health and Safety Code Section 1250) or health services at any location within or without the territorial limits of the District, for the benefit of the District and the people served by the District; (ii) to acquire, maintain and operate ambulances or ambulance services within or without the District; (iii) to establish, maintain and operate, or provide assistance in the operation of free clinics, diagnostic and testing centers, health education programs, wellness and prevention programs, rehabilitation, aftercare, and such other health care services provider, groups, and organizations that are necessary for the maintenance of good physical and mental health in the communities served by the District; and (iv) to do any and all other acts and things necessary to carry out the provisions of the District's Bylaws and the Local Health District Law.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
1. CALL TO ORDER	Peter Fung, MD, Chair		5:30 – 5:31 pm
2. SALUTE TO THE FLAG	Peter Fung, MD, Chair		5:31 – 5:34
3. ROLL CALL	Peter Fung, MD, Chair		5:34 – 5:35
4. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Peter Fung, MD, Chair		5:35 – 5:36
5. PUBLIC COMMUNICATION a. Oral Comments <i>This opportunity is provided for persons in the audience to make a brief statement, not to exceed 3 minutes on issues or concerns not covered by the agenda.</i> b. Written Correspondence	Peter Fung, MD, Chair		information 5:36 – 5:39
6. CONSENT CALENDAR ITEMS: <i>Any Board Member or member of the public may remove an item for discussion before a motion is made.</i> Approval a. Minutes of the Open Session of the District Board Meeting (December 6, 2016)	Peter Fung, MD, Chair	public comment	motion required 5:39 – 5:41
7. FY17 YTD FINANCIALS ATTACHMENT 7	Iftikhar Hussain, CFO	public comment	motion required 5:41 – 5:51
8. ADJOURN TO CLOSED SESSION	Peter Fung, MD, Chair		motion required 5:51 – 5:52
9. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Peter Fung, MD, Chair		5:52 – 5:53

A copy of the agenda for the Regular Meeting will be posted and distributed at least seventy-two (72) hours prior to the meeting. In observance of the Americans with Disabilities Act, please notify us at (650) 988-7504 prior to the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
10. CONSENT CALENDAR <i>Any Board Member may remove an item for discussion before a motion is made.</i> <i>Gov't Code Section 54957.2.</i> a. Minutes of the Closed Session of the District Board Meeting (December 6, 2016)			motion required 5:53 – 5:55
11. Discussion involving <i>Gov't Code Section 54956(d)(2)</i> – conference with legal counsel – pending or threatened litigation; <i>Health & Safety Code 32106(b)</i> for a report involving health care facility trade secrets: - El Camino Hospital Governance	Mary Rotunno, General Counsel; David Nygren, Nygren Consulting		discussion 5:55 – 7:35
12. Report involving <i>Gov't Code Section 54957</i> for discussion and report on personnel performance matters: - Executive Session	Peter Fung, MD, Chair		discussion 7:35 – 7:39
13. ADJOURN TO OPEN SESSION	Peter Fung, MD, Chair		motion required 7:39 – 7:40
14. RECONVENE OPEN SESSION / REPORT OUT			7:40 – 7:41
To report any required disclosures regarding permissible actions taken during Closed Session.			
15. ECH BOARD MEMBER ELECTION AD HOC COMMITTEE REPORT ATTACHMENT 15	David Reeder, ECH Board Member Election Ad Hoc Committee Chair	<i>public comment</i>	possible motion 7:41 – 7:51
16. PACING PLAN ATTACHMENT 16	Peter Fung, MD, Chair	<i>public comment</i>	motion required 7:51 – 7:56
17. BOARD COMMENTS	Peter Fung, MD, Chair	<i>public comment</i>	motion required 7:56 – 7:59
18. ADJOURNMENT	Peter Fung, MD, Chair		motion required 7:59 – 8:00 pm

Upcoming Meetings

- March 14, 2017
- June 20, 2017

**a. Minutes of the Open Session of the District Board
Meeting (December 6, 2016)**



**Minutes of the Open Session of the
El Camino Healthcare District Board of Directors
Tuesday, December 6, 2016**

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040
Conference Rooms E, F & G

Board Members Present

Dennis Chiu, Vice Chair
Peter Fung, MD, Chair
Julia Miller
David Reeder
John Zoglin

Board Members Absent

None

Members Excused

None

Agenda Item	Comments/Discussion	Approvals/Action
1. CALL TO ORDER	The open session meeting of the El Camino Healthcare District Board of Directors (the “Board”) was called to order at 5:30 pm by Chair Fung.	
2. SALUTE TO THE FLAG	Director Fung led the Board members, staff, and members of the public present in the Pledge of Allegiance.	
3. ROLL CALL	A silent roll call was taken. All Board members were present.	
4. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Fung asked if any Board members may have a conflict of interest with any of the items on the agenda. No conflicts were noted.	
5. PUBLIC COMMUNICATION	There were no comments from the public.	
6. CONSENT CALENDAR	<p>Chair Fung asked if any member of the Board or the public wished to remove an item from the consent calendar. Director Zoglin requested that Agenda Item 6b: Pacing Plan be removed from the consent calendar.</p> <p>Motion: To approve the consent calendar: Minutes of the Open Session of the District Board Meeting (October 18, 2016).</p> <p>Movant: Chiu Second: Miller Ayes: Chiu, Fung, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p> <p>In response to Director Zoglin’s question, Director Reeder explained that the Ad Hoc Committee will resume its work on evaluating search firms right after the first of the year. Director Miller noted the next meeting of the Ad Hoc Committee has not been scheduled, and agreed the Committee should be ready for the next District Board meeting on January 17, 2017.</p> <p>Motion: To approve the Pacing Plan.</p> <p>Movant: Zoglin Second: Miller Ayes: Chiu, Fung, Miller, Reeder, Zoglin</p>	<i>Consent calendar approved</i>

	<p>Noes: None Abstentions: None Absent: None Recused: None</p>	
<p>7. RESOLUTION TO ACCEPT SANTA CLARA COUNTY BOARD OF SUPERVISORS RESOLUTION 2016-140 AND ADMINISTRATION OF OATH OF OFFICE</p>	<p>Director Fung reported that on September 27, 2016, the Santa Clara County Board of Supervisors adopted Resolution 2016-140, appointing those individuals, Julia Miller, Dennis, Chiu, and John Zoglin, to the El Camino Healthcare District Board for another four year term.</p> <p>Motion: To accept the Santa Clara County Board of Supervisors Resolution 2016-140.</p> <p>Movant: Reeder Second: Fung Ayes: Chiu, Fung, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p> <p>Chair Fung recognized Directors Chiu, Miller, and Zoglin and thanked them for their continued service. Director Chiu took the oath of office administered by Dr. Peter Chiu, an Adjunct Clinical Faculty member of the Stanford University School of Medicine. Director Miller took the oath of office administered by Kavita Tankha, a member of the El Camino Hospital Foundation Board of Directors. Director Zoglin took the oath of office administered by Mary Rotunno, General Counsel.</p>	<p><i>SCC BOS Resolution 2016-140 accepted, and Directors Chiu, Miller, and Zoglin sworn in</i></p>
<p>8. ELECTION OF EL CAMINO HOSPITAL BOARD MEMBERS</p>	<p>Motion: To elect District Directors Dennis Chiu, Julia Miller, and John Zoglin to the El Camino Hospital Board of Directors.</p> <p>Movant: Reeder Second: Fung Ayes: Chiu, Fung, Miller, Reeder, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Directors Chiu, Miller, and Zoglin elected to the El Camino Hospital Board of Directors</i></p>
<p>9. AMERICAN HEART ASSOCIATION TARGET BP INITIATIVE</p>	<p>Director Fung reported on the significant health risks of high blood pressure. He explained that hypertension is amenable to change with medication and modest lifestyle changes. He described the invitation from the American Heart Association (AHA) to the District (provided in the Board's materials) to join the AHA's Target BP Initiative in concurrence with the District's Hypertension Initiative.</p> <p>Director Miller stated she was not sure how the District would measure appropriate metrics for the program, but voiced her support of the partnership with the AHA and American Medical Association.</p> <p>Motion: That the El Camino Healthcare District support the partnership.</p> <p>Movant: Miller</p> <p>Director Chiu clarified and Director Miller agreed that the partnership would mean collaboration, not a legal partnership.</p> <p>Second: Chiu</p>	<p><i>Collaboration in concept approved</i></p>

Director Fung noted that there are over 400 partners in this initiative, including the Mayo and Cleveland Clinics. He also explained that it is possible to be a silent collaborator while still pledging a commitment to the goal of improving the health of District residents.

Mary Rotunno, General Counsel, described her review of the materials on the AHA website, which discusses submitting data. She noted that the District has no data to submit, and recommended requesting confirmation/recognition from the AHA that collaboration does not require data submission.

Director Reeder commented that he supports the intent of the effort to reduce blood pressure, but expressed concerns about the District's lack of data and use of funds to fully support these efforts that would be used for other Community Benefit programs.

Director Fung commented that the awareness and education components have already been funded through the District's Hypertension Initiative.

Director Fung introduced Mike Gonzalez from the American Heart Association. Mr. Gonzalez explained that the commitment over the next few years could include: programs funded through community benefit, developing a system for tracking data, and putting the urgency of this issue in the public view. He noted that data collection and measurement may be difficult for the District, there is no current expectation for data submission, and suggested that the commitment would be to improve hypertension in the District's population. He reported that it is a free initiative with no funding commitments required.

In response to Director Miller's question, Ms. Rotunno explained that MayView, a Community Benefit grantee, is a partner in the Target BP Initiative and is submitting its data. She reiterated that the District has no additional data of its own to submit.

In response to Director Zoglin's question, Director Fung explained that the District's Hypertension Initiative was approved and funded in the last fiscal year.

Director Reeder requested additional information regarding what the Board is being asked to approve. Director Fung explained that the initiative is encouraging all District residents to have their blood pressure checked and controlled and educating the public about hypertension and its risks.

Director Chiu clarified that the commitment (with no associated funding) would be to encourage voluntary participation of affiliated clinics and District residents to allow blood pressure information to be tracked; he also noted the District's collaborative efforts for Target BP should be in compliance with all federal and state health privacy laws.

Director Chiu restated Director Miller's motion: For the El Camino Healthcare District to sign on to support AHA's Target BP Initiative, which is to encourage the El Camino Healthcare District and El Camino Hospital affiliates and clinics to participate in tracking blood pressure and to decrease the causes of high blood pressure over the next few years. The collaboration with AHA and the District's participation in Target BP will follow state and federal privacy healthcare guidelines.

Director Miller accepted the restatement and clarifications of the

	<p>motion.</p> <p>Second: Chiu</p> <p>Ayes: Chiu, Fung, Miller, Zoglin</p> <p>Noes: None</p> <p>Abstentions: Reeder</p> <p>Absent: None</p> <p>Recused: None</p>	
10. AFFIRMATION OF STANDARDS OF CONDUCT	<p>Director Fung reported that the pacing plan includes affirming the Standards of Conduct each election year. The document was circulated to and signed by each of the Directors and will be posted on the District website.</p>	
11. ADJOURN TO CLOSED SESSION	<p>Motion: To adjourn to closed session at 6:12 pm pursuant to <i>Gov't Code Section 54957.2</i> for approval of the Minutes of the Closed Session of the District Board Meeting (October 18, 2016); pursuant to <i>Gov't Code Section 54957</i> for discussion and report on personnel performance matters: Executive Session.</p> <p>Movant: Miller</p> <p>Second: Chiu</p> <p>Ayes: Chiu, Fung, Miller, Reeder, Zoglin</p> <p>Noes: None</p> <p>Abstentions: None</p> <p>Absent: None</p> <p>Recused: None</p> <p>Director Fung left the meeting at 6:12pm.</p>	<p>Meeting adjourned to closed session at 6:12 pm.</p>
12. AGENDA ITEM 16: RECONVENE OPEN SESSION/REPORT OUT	<p>Open session was reconvened at 6:34 pm.</p> <p>During the closed session, the Board approved the Minutes of the Closed Session of the District Board Meeting of October 18, 2016 by a vote in favor by all members present (Directors Chiu, Miller, Reeder, Zoglin). Director Fung was absent.</p>	
13. AGENDA ITEM 17: BOARD COMMENTS	<p>Director Miller described her recent site visit to Vargas Elementary School to see Bay Area Women's Sports Initiative (BAWSI), a Community Benefit grantee, in action.</p> <p>Director Chiu wished all District residents a happy holiday season.</p>	
14. AGENDA ITEM 18: ADJOURNMENT	<p>Motion: To adjourn at 6:36 pm.</p> <p>Movant: Zoglin</p> <p>Second: Miller</p> <p>Ayes: Chiu, Miller, Reeder, Zoglin</p> <p>Noes: None</p> <p>Abstentions: None</p> <p>Absent: Fung</p> <p>Recused: None</p>	<p>Meeting adjourned at 6:36 pm.</p>

Attest as to the approval of the foregoing minutes by the Board of Directors of El Camino Healthcare District:

Peter C. Fung, MD
Chair, ECHD Board

Julia Miller
ECHD Board Secretary

Prepared by: Cindy Murphy, Board Liaison
Sarah Rosenberg, Board Services Coordinator

ATTACHMENT 7



Dedicated to improving the health and well being of the people in our community.

**Board Finance Presentation
Fiscal Year 2017
7/1/2016- 11/30/2016**

Iftikhar Hussain, CFO

El Camino Healthcare District Board of Directors Meeting

January 17, 2017

Contents

ECHD Consolidated Financial Statements (Includes El Camino Hospital)

Comparative Balance Sheet as of November 30, 2016.....	Page 3
Statement of Revenues & Expenses Year to Date thru November 30, 2016	Page 4
Notes to Financial Statements	Page 5

ECHD Stand-Alone Financial Statements

Comparative Balance Sheet as of November 30, 2016.....	Page 6
Statement of Revenues & Expenses Year to Date thru November 30, 2016	Page 7
Statement of Fund Balance Activity as of November 30, 2016	Page 8
Notes to Financial Statements	Pages 9-10
Sources & Uses of Property Taxes	Page 11

NOTES:

Accounting standards require that audited financial statements for El Camino Healthcare District be presented in consolidated format, including El Camino Hospital and its controlled affiliates. In an effort to help ensure public accountability and further ensure the transparency of the District's operations, the District also prepares internal, "Stand-Alone" financial statements which present information for the District by itself.

FY 2017 budget presented excludes cost of issuance and interest expense related to the 2016 Bonds since the issuance was delayed



El Camino Healthcare District

Consolidated Comparative Balance Sheet (\$ Millions)

(Includes El Camino Hospital)

	Nov 30, 2016	June 30, 2016 Audited w/o Eliminations		Nov 30, 2016	June 30, 2016 Audited w/o Eliminations
<u>ASSETS</u>			<u>LIABILITIES & FUND BALANCE</u>		
Current Assets			Current Liabilities		
Cash & Investments	\$240	\$188	Accounts Payable & Accrued Exp	\$87	\$94
Patient Accounts Receivable, net	\$100	\$122	Bonds Payable - Current	7	6
Other Accounts and Notes Receivable	\$7	\$7	Bond Interest Payable	6	8
Inventories and Prepaids	\$44	\$40	Other Liabilities	4	8
Total Current Assets	391	357	Total Current Liabilities	104	116
Board Designated Assets			Deferred Revenue	0	1
Foundation Reserves	14	14	Long Term Liabilities		
Community Benefit Fund	18	16	Bond Payable	354	360
Operational Reserve Fund	102	102	Benefit Obligations	40	38
Workers Comp, Health & PTO Reserves	64	64	Other Long-term Obligations	4	4
Other Board Designated Reserves	159	156	Total Long Term Liabilities	398	402
Total Board Designated Assets	356	351	Fund Balance		
Funds Held By Trustee	43	46	Unrestricted	1,051	1,004
Long Term Investments	206	208	Board Designated & Restricted	249	242
Other Investments	34	34	Capital & Retained Earnings	14	14
Net Property Plant & Equipment	745	743	Total Fund Balance	1,315	1,261
Other Assets	47	48			
Total Non-Designated Assets	1,076	1,079			
TOTAL ASSETS	\$1,823	\$1,786	TOTAL LIAB. & FUND BAL.	\$1,823	\$1,786



El Camino Healthcare District

Consolidated Comparative Statement of Revenues & Expenses (\$ Millions)

Year-to-Date through November 30, 2016

(Includes El Camino Hospital)

	Current Fiscal Year			Prior Year Actual
	<u>Actual</u>	<u>Budget</u>	<u>Fav (Unfav) Variance</u>	
Net Patient Revenue ⁽¹⁾	335	323	13	312
Other Operating Revenues	19	18	2	16
Total Operating Revenues	355	340	14	328
Wages and Benefits	185	190	5	179
Supplies	46	49	3	48
Purchased Services	43	45	2	41
Other	12	13	1	19
Depreciation	20	21	1	19
Interest	2	2	0	2
Total Operating Expense ⁽²⁾	309	320	11	310
Operating Income	46	20	26	19
Non-Operating Income ⁽³⁾	7	10	(3)	(8)
Net Income	53	30	23	11



Note: Totals or variances may not agree due to rounding. See page 5 for footnotes.

El Camino Healthcare District

Notes to Consolidated Financial Statements

Current FY 2017 Actual to Budget

(Includes El Camino Hospital)

- (1) Net Patient Revenue was above budget by approximately \$14M due to receipt of delayed (unbudgeted) IGT payment (\$6.5M) and improvements in rev cycle operations including improvements in charge capture and reduction in denials.**
- (2) The positive variance of approximately \$11M is primarily due to positive variances in productive labor costs (+\$5M), supplies (+\$3.1M), and software maintenance (+\$1.1M).**
- (3) The \$3M negative variance is primarily due to \$5.9M negative variance in IGT/PRIME expense at the District, offset at the Hospital by a \$3.0M gain on interest rate swap as rates have risen.**



El Camino Healthcare District

Stand-Alone Comparative Balance Sheet (\$ Thousands)

*These financial statements **exclude** the District's El Camino Hospital Corporation and its controlled affiliates*

	Nov 30, 2016	June 30, 2016		Nov 30, 2016	June 30, 2016
<u>ASSETS</u>			<u>LIABILITIES & FUND BALANCE</u>		
Cash & cash equiv	\$1,293	\$2,694	Accounts payable ⁽⁸⁾	\$0	\$585
Short term investments	3,431	4,861	Current portion of bonds	2,950	2,485
Due fm Retiree Health Plan ⁽¹⁾	70	80	Bond interest payable	2,012	2,523
S.C. M&O Taxes Receivable	2,440	0	Other Liabilities	136	133
Total current assets	\$7,234	\$7,635	Total current liabilities	\$5,097	\$5,726
Operational Reserve Fund ⁽²⁾	1,500	1,500			
Capital Appropriation Fund ⁽³⁾	6,511	15,472			
Capital Replacement Fund ⁽⁴⁾	4,789	4,684	Deferred income	8	44
Community Benefit Fund ⁽⁵⁾	4,698	3,495	Bonds payable - long term	130,847	133,797
Total Board designated funds	\$17,498	\$25,151	Total liabilities	\$135,952	\$139,567
Funds held by trustee ⁽⁶⁾	\$14,820	\$15,452	Fund balance		
Capital assets, net ⁽⁷⁾	\$11,344	\$11,449	Unrestricted fund balance	\$35,932	\$43,472
			Restricted fund balance ⁽⁹⁾	(120,988)	(123,353)
			Total fund balance	(\$85,056)	(\$79,881)
TOTAL ASSETS	\$50,896	\$59,686	TOTAL LIAB & FUND BALANCE	\$50,896	\$59,686



Note: Totals may not agree due to rounding. See page 9 for footnotes.

El Camino Healthcare District

YTD **Stand-Alone** Stmt of Revenue and Expenses (\$ Thousands)

Comparative Year-to-Date November 30, 2016

*These financial statements **exclude** the District's El Camino Hospital Corporation and its controlled affiliates*

	Actual	Current Year Budget	Variance	Last Year Actual
REVENUES				
(A) Ground Lease Revenue ⁽¹⁰⁾	\$ 37	\$ 37	\$ -	\$ 88
(B) Redevelopment Taxes ⁽¹¹⁾	-	96	(96)	463
(B) Unrestricted M&O Property Taxes ⁽¹¹⁾	3,191	3,191	-	7,162
(B) Restricted M&O Property Taxes ⁽¹¹⁾	2,104	2,104	-	6,171
(B) G.O. Taxes Levied for Debt Service ⁽¹¹⁾	4,185	3,833	352	9,836
(B) IGT/PRIME Medi-Cal Program ⁽¹²⁾	(5,856)	-	(5,856)	(802)
(B) Investment Income (net)	(167)	100	(268)	375
(B) Other income	87	72	15	239
TOTAL NET REVENUE	3,581	9,433	(5,852)	23,532
EXPENSES				
(A) Professional Fees & Purchased Svcs ⁽¹³⁾	134	181	47	355
(A) Supplies & Other Expenses	112	75	(37)	58
(B) G.O. Bond Interest Expense (net) ⁽¹⁴⁾	1,969	1,957	(13)	4,695
(B) Donations to Outside Organizations ⁽¹⁵⁾	3,602	2,802	(800)	5,986
(A) Depreciation / Amortization	105	105	-	253
TOTAL EXPENSES	5,923	5,120	(803)	11,347
NET INCOME	\$ (2,342)	\$ 4,313	\$ (6,655)	\$ 12,185

(A) Operating Revenues & Expenses

(B) Non-operating Revenues & Expenses

RECAP STATEMENT OF REVENUES & EXPENSE

(A) Net Operating Revenues & Expenses	\$ (314)
(B) Net Non-Operating Revenues & Expenses	(2,028)
NET INCOME	\$ (2,342)



Note: Totals may not agree due to rounding. See page 9 for footnotes.

El Camino Healthcare District

Comparative YTD **Stand-Alone** Stmt of Fund Balance Activity (\$ Thousands)

*These financial statements **exclude** the District's El Camino Hospital Corporation and its controlled affiliates*

	<u>Nov 30,2016</u>	<u>June 30, 2016</u>
Fiscal year beginning balance	\$ (79,881)	\$ (92,282)
Net income year-to-date	\$ (2,342)	\$ 12,185
Transfers (to)/from ECH:		
IGT/PRIME Funding ⁽¹⁶⁾	\$ 6,441	\$ 216
Capital Appropriation projects ⁽¹⁷⁾	\$ (9,274)	-
Fiscal year ending balance	<u><u>\$ (85,056)</u></u>	<u><u>\$ (79,881)</u></u>



Note: Totals may not agree due to rounding. See page 10 for footnotes.

El Camino Healthcare District

Notes to Stand-Alone Financial Statements

These financial statements exclude the District's El Camino Hospital Corporation and its controlled affiliates

- (1) **Due from Retiree Health Plan** – The monies due from Trustee for District's Retiree Healthcare Plan.
- (2) **Operating Reserve Fund** – Starting in FY 2014, the Board established an operational reserve for unanticipated operating expenses of the District.
- (3) **Capital Appropriation Fund** – Formerly known as the Capital Outlay Fund, which accumulates at the end of each fiscal year those M&O property taxes that are over the Gann limit and thus become restricted for plant and equipment projects. This amount reflects the accumulation of the fiscal year ended 2016. Note, at each fiscal year end the amount placed into this fund must be board designated for a capital project (must be a value greater than \$100,000 and a minimum life of 10 years) within the next two fiscal years.
- (4) **Capital Replacement Fund** – Formerly known as the Plant Facilities Fund (AKA - Funded Depreciation) which reserves monies for the major renovation or replacement of the portion of the YMCA (Park Pavilion) owned by the District.
- (5) **Community Benefit Fund** – Newly established fund at the District in FY 2014, as the District retains its unrestricted M&O property taxes to pay for its operations and support its Community Benefit Program.
- (6) **Funds Held by Trustee** – Funds from General Obligation tax monies, being held to make the debt payments when due.
- (7) **Capital Net Assets** - The land on which the Mountain View Hospital resides, a portion of the YMCA building, and a vacant lot located at El Camino Real and Phyllis.
- (8) **Accounts Payable and Accrued Expenses** – Expenses due which have not yet been paid.
- (9) **Fund Balance** – The negative fund balance is a result of the General Obligation bonds which assisted in funding the replacement hospital facility in Mountain View. Accounting rules required the District to recognize the obligation in full at the time the bonds were issued ; receipts from taxpayers will be recognized in the year they are levied, slowly reducing the negative fund balance over the next 19 years.



El Camino Healthcare District

Notes to Stand-Alone Financial Statements

These financial statements exclude the District's El Camino Hospital Corporation and its controlled affiliates

(10) Other Operating Revenue – Lease income from El Camino Hospital for its ground lease with the District.

(11) Taxes: Redevelopment, M&O, G.O. – Tax receipts (either received or to be received) during the period.

(12) IGT/PRIME Expense – Participation thus far in Inter Governmental Transfer program for FY 2017, not expected for this fiscal year. This program was extremely behind in being implemented for the fiscal year 2015/2016 by the State and finally occurred in August of the District's fiscal year 2017, thus causing it to be non-budgeted. Also participation began in the behavioral health PRIME program with an initial funding of \$1.7M, which returned \$3.5M to the Hospital.

(13) Professional Fees & Services – Detailed below:

• Community Benefit/Admin Support from ECH	\$130
• Legal	2
• Direct Mail / Website	0
• Other	<u>2</u>
	<u>\$ 134</u>

(14) G.O. Bond Interest Expense – Expense includes bond interest expense accruing on the District's debt and other related bond expense.

(15) Donations to Outside Organizations – Starting in FY 2014, the District is directly operating its Community Benefit Program at the District level. This represents amounts expended to grantees and sponsorships thus far in this fiscal year .

(16) IGT/PRIME Funding – Transfers from ECH for participation in the two programs thus far in FY 2017.

(17) Capital Appropriation Projects Transfer – This amount was the approved amount at the Board's June 2016 meeting to be transferred to the Hospital for the future renovation of the Women's Hospital after the IMOB is completed in the Fall 2018.



El Camino Healthcare District

Sources & Uses of Tax Receipts (\$Thousands)

*These financial statements **exclude** the District's El Camino Hospital Corporation and its controlled affiliates*

Sources of District Taxes

11/30/2016

(1) Maintenance and Operation and Government Obligation Taxes \$9,480

(2) Redevelopment Agency Taxes --

Total District Tax Receipts \$9,480

Uses Required Obligations / Operations

(3) Government Obligation Bond 4,185

Total Cash Available for Operations, CB Programs, & Capital Appropriations \$5,295

(4) Capital Appropriation Fund – Excess Gann Initiative Restricted* 2,104

Subtotal \$3,191

(5) Operating Expenses 246

Subtotal \$2,945

(6) Capital Replacement Fund (Park Pavilion) 137

Funds Available for Community Benefit Programs \$2,808

*Gann Limit Calculation for FY2017 \$7,658

(1) M&O and G.O. Taxes	• Cash receipts from the 1% ad valorem property taxes and Measure D taxes
(2) Redevelopment Agency Taxes	• Cash receipts from dissolution of redevelopment agencies
(3) Government Obligation Bond	• Levied for debt service
(4) Capital Appropriation Fund	• Excess amounts over the Gann Limit are restricted for use as capital
(5) Operating Expenses	• Expenses incurred in carrying out the District's day-to-day activities
(6) Capital Replacement Fund	• Fund to ensure that the District has adequate resources to fund repair and replacement of its capital assets (Park Pavilion)



ATTACHMENT 15

ECHD BOARD MEETING AGENDA ITEM COVER SHEET

Item:	<p>El Camino Hospital Board Member Election Ad Hoc Committee Report</p> <p>El Camino Healthcare District Board of Directors</p> <p>January 17, 2017</p>
Responsible party:	David Reeder, Ad Hoc Committee Chair
Action requested:	For Discussion
<p>Background: In anticipation of Dr. Neal Cohen leaving his position as a member of the El Camino Hospital Board of Directors, the Ad Hoc Committee began work on the process of recruiting a replacement in accordance with this Board's established process. In December, staff issued an RFP to six Executive/Board search firms, including some with whom we have experience and some we do not. Of those six, we received 4 responses and interviewed 2 candidates, Tod Gregory of the Tod Gregory Search Firm and Jim Gauss of Witt/Keiffer. Both candidates merited serious consideration, but differed in terms of background, experience, and cost. The El Camino Hospital Board Member Election Ad Hoc Committee recommends the selection of Witt/Keiffer. I will give a full report on the Committee's deliberations and recommendations at our meeting on January 17th.</p> <p>The Committee also updated the position specification in accordance with the competencies we discussed at our last meeting as well as the "Summary of El Camino Hospital" (see attached). We expect that the selected recruiter will help us refine the position description. In addition, we developed the following tentative timeline for the search:</p> <ul style="list-style-type: none"> a. January 17, 2017: District Board Meeting, Approval of recruiter and position description b. Late January 2017: Ad Hoc Committee's first meeting with selected recruiter c. Late January – Mid-February 2017: Public Advertising Period d. Mid-March 2017: Ad Hoc Committee reviews resumes e. March and April 2017: Ad Hoc Committee interviews candidates f. May (Special Meeting) or June (Regular Meeting) 2017: Board interviews candidates and makes appointment <p><u>Next Steps:</u></p> <p>The Committee will begin working with the selected search firm with an eye toward appointment of a new El Camino Hospital Board Member in May or June 2017 for a 3-year term effective July 1, 2017.</p>	
<p>Committees that reviewed the issue and recommendation, if any:</p> <p>El Camino Hospital Board Member Election Ad Hoc Committee</p>	
<p>Summary and Session Objectives:</p> <p>To obtain Board approval of the Draft Position Description and selection of a search firm.</p>	

ECHD BOARD MEETING AGENDA ITEM COVER SHEET

	Suggested discussion questions: <ol style="list-style-type: none">1. Does the Board have any questions or concerns about the Draft Revised Position Description?2. What questions does the Board have about selection of a search firm?3. Does the Board prefer to conduct this search internally?
	Proposed Board motion(s), if any: <ol style="list-style-type: none">1. To approve the Draft Revised Position Description.2. To engage Witt/Keiffer to assist the Board with selection of a new El Camino Hospital Board Member.3. [Or] to conduct this search internally.4. Does the Board wish to schedule a tentative meeting on May 16th (3rd Tuesday) for the purpose of interviewing finalists brought forward by the Committee?
	LIST OF ATTACHMENTS: <ol style="list-style-type: none">1. Draft Revised Position Description2. Revised El Camino Hospital Summary3. Search firm RFP responses (Tod Gregory and Witt/Keiffer)

Att. 15 01 (Draft) Revised Position Sepcification

POSITION SPECIFICATION

Revised January 2017

El Camino Hospital

TITLE: Board Member

LOCATION: Mountain View, California

THE CURRENT BOARD

The El Camino Hospital Board is currently comprised of the five members of the District Board, (Dennis Chiu; Peter C. Fung, MD; Julia Miller; David Reeder; and John Zoglin) along with Neal Cohen, MD, Jeffrey Davis, MD and Lanhee Chen, JD, PhD. The three members of the ECH Board who are not District Board members now serve a maximum of 4 staggered 3-year terms. Director Chen is serving his first term, Dr. Davis is serving his third term, and Dr. Cohen is not seeking reappointment when his current (second) term expires on June 30, 2017.

POSITION

BACKGROUND:

With the significant and continuing, large scale changes occurring in the healthcare environment, the District Board has determined that it will seek Hospital Director Candidates who will add to the thoughtful deliberations and guidance from the Board regarding the Hospital's strategic priorities as the Hospital moves "from Volume to Value."

QUALIFICATIONS:

The Board is seeking an individual with deep knowledge and experience in the healthcare industry.

In addition, the Board has prioritized the following preferred competencies that will provide a vital contribution to Board;

- Understanding of complex market partnerships
- Long-range strategic planning
- Healthcare insurance industry experience from either a payer or provide perspective
- Finance experience/entrepreneurship
- Experience in clinical integration/continuum of care

El Camino has relationships with most organizations of its type within Silicon Valley; accordingly, it will be important that conflicts of interest with competitors are avoided to maintain our community relationships. Consideration will be given to both actively employed and recently retired professionals with a commitment to serving the community.

SPECIFIC REQUIREMENTS:

- Physically attend at least two-thirds of all meetings.

Meetings are defined as Hospital Board meetings and Standing Committee meeting(s) to which the Board member has been appointed. Attendance guidelines will be considered met if the Board member physically attends two-thirds of all Hospital Board meetings and two-thirds of the meetings of each Standing Board Advisory Committee to which the member is appointed

- Serve on at least two Standing Board Advisory Committees (credit will be given for assignment to other Board obligations, including but not limited to the El Camino Hospital Foundation Board, Chair of the Board, Ad Hoc Committees and the Community Benefit Advisory Council).
- Willingness to Chair at least one of the Standing Board Advisory Committees when needed.
- Give notice (in accordance with policy) for inability to attend a meeting in-person or via teleconference, except in the case of emergency, to the Board Liaison at least five business days prior to a meeting.
- Agree to abide by the "El Camino Hospital Board Management Compact" (dated December, 2012).

BOARD MEETINGS

The El Camino Hospital Board presently meets monthly, excluding July and December typically at 5:30 pm on the second Wednesday of each month. In addition, two Joint Board and Committee evening educational sessions and one full day retreat are held each year.

COMMITTEE MEETINGS

Meetings are held on weekday evenings beginning between 4 and 5:30 pm and last approximately 1.5 to 2 hours.

Investment – 4x/year

Quality, Patient Care and Patient Experience – 10x/year

Finance – 6x/year

Governance – 4-6x/year

Executive Compensation – 4-6x/year

Corporate Compliance, Privacy and Internal Audit – 6x/year

COMPENSATION

Board members are eligible for compensation in the amount of \$200/Board meeting \$100/Committee meeting attended up to 7 meetings per month.

Att. 15 02 Revised ECH Overview

Overview of El Camino Hospital

Based in Mountain View, California, and established in 1961, El Camino Hospital (ECH) gained an early reputation for technological innovation and the delivery of the highest quality care through high-caliber physicians. The hospital's original mission statement calls for the organization to be an innovative, quality-driven, publicly accountable and locally controlled comprehensive healthcare organization which cares for the sick, relieves suffering, and provides quality, cost comprehensive services to improve the health and well-being of its community. ECH is the preferred community health care destination for the Silicon Valley area, focused on a progressive approach to service delivery and an individualized patient experience, integrating cutting-edge clinical approaches and state-of-the art technology and efficiency within a caring environment.

Over half a century, El Camino Hospital's facilities have grown along with the needs of the community. 2009 saw a major expansion with the opening of a new and breathtaking, five-story, 450,000-square-foot facility. The hospital's innovative design meets the strictest seismic standards for California, while enhancing patient comfort, safety and convenience. Additional features as part of the expansion include wireless technology, teleconferencing and protected access to online patient records from anywhere on the 41-acre campus, Melchor Pavilion medical office building, a state of the art Radiotherapy Center, a new Cancer Center and an outpatient surgical center. There are also plans in place for an integrated medical office building, upgrades to the Women's Hospital, and a new Behavioral Health Service building.

The Mountain View campus is licensed for a total of 300 beds, including both the Women's Hospital and the Lucile Packard Pediatric unit. In order to better serve patients from the further South Bay, a Los Gatos campus was acquired and opened as a second ECH campus in July, 2009. This 143-bed full-service facility with a 24 hour emergency department is served by 400 community-based physicians and includes outstanding programs in Men's Health and Urology, as well as a comprehensive acute inpatient rehabilitation facility and a specially designed post-surgical orthopedic pavilion. A number of new programs are under development on the Los Gatos campus.

The two-campus hospital now employs approximately 3,200 employees and serves not only the El Camino Healthcare District, including, Los Altos, most of Mountain View and parts of Los Altos Hills, Sunnyvale, Cupertino and Palo Alto, but also the surrounding communities of Saratoga, Santa Clara, Los Gatos, Monte Sereno, Alviso and San Jose. ECH has approximately 1,300 practicing physicians on the combined

medical staff across campuses, comprising community physicians as well as physicians from the Palo Alto Medical Foundation (PAMF) a division of Sutter Health. The Camino Division of PAMF includes 432 primary care and specialist physicians representing 42 medical subspecialties. Roughly half of El Camino Hospital admissions come from this advanced medical group, with the balance overseen by community-based physicians. El Camino Hospital's workforce includes three unions: PRN, a local nursing union, the SEIU and Local 39. Relations between these partners have generally been positive, notwithstanding the cost pressures facing all hospital systems.

A leader in technology and quality care, El Camino Hospital was the first hospital to install a computerized Physician Order Entry system in 1971. Since that time other applications have been installed, such as a house-wide secure wireless network, voice-activated communications devices, tablet PCs and tug robots. As a result, ECH has been among the country's "Most Wired Hospitals" since the inception of the award. Recent innovations include the use of eClinicalWorks to link community physicians to the hospital's electronic record system. In January 2014, the ECH Board approved transitioning to EPIC's information technology system. This transformational EHR project, known in house as "iCare," went live in November 2015.

El Camino Hospital enters the exciting, but challenging era of cost constraints and improved integration of care with many assets. Not only does it enjoy an extraordinarily beautiful and technologically advanced physical plant which, like only a handful of California hospitals, fully meets the State's stringent seismic standards and is prepared to meet those challenges with new leadership and a revitalized Board.

The Board and leadership team are currently embarking on a new strategic planning process with the assistance of Interim Chief Executive Officer Donald, C. Sibery. Recruitment of a permanent CEO began in November 2016 and is expected to be complete in May or June 2017.

The El Camino Healthcare District is the Hospital's sole-owner and effective landlord. Its Board holds some reserved powers, but delegates to the El Camino Hospital Board, a 501 (c)(3) organization, routine oversight of hospital operations. The District and Hospital by-laws give the Board of Directors broad latitude in deciding and defining how it most effectively conducts its business (within the realm of any legal or regulatory constraints). In January 2011, the Board decided to undergo a process to review its operations and policies with the goal of updating and improving how the Board contributes to and engages with the organization.

Expectations for the role boards of directors play have changed significantly over the past decade. The Board has evolved with the times and tried to keep up with best practices. With that in mind, both the administration and the Board have undergone a re-engineering process to look at how they are operating with an eye to increasing efficiency over the last several years. Based on this evaluation, the Board determined that best practices indicated that a significant portion of governance should be

conducted via Board Committees, comprised of at least two Board members, and three or more community members with deep expertise in the functional area. The ECH Board currently has a total of 22 experts, most who reside in the local community, serving on its Advisory Committees who provide insight and perspective that compliments that of the Board members. Board membership on committees is aligned primarily with expertise and secondarily with interest. All committee members are voting members, though any vote is advisory in nature – making recommendations to the Hospital or District Boards for final decision. One or more members of the Executive Leadership Team serve as staff to each committee.

Accountabilities have been defined for Governance, Finance, Investment, Quality, Compliance and Audit, and Executive Comp Committees. In addition, policies have been developed regarding Board education and training. The Board continues to review its meeting cadence in light of the role of committees in streamlining Board deliberations.

Finally, a key feature of this governance improvement initiative was the 2012 decision of the elected five person District Healthcare Board to utilize authorization in its bylaws for appointment of three independent directors. With understanding of the challenges ahead for all vital health systems, the ECH District Board had determined to add to its 501(c)(3) Hospital Board seasoned executives who bring a national perspective and enrich the Board's capacity to facilitate El Camino Hospital's leadership as a forward-looking early adopter in the coming industry transformation.

The El Camino Hospital Board is currently comprised of the five members of the District Board (Dennis Chiu; Peter C. Fung, MD; Julia Miller, David Reeder and John Zoglin) Neal Cohen, MD, Lanhee Chen, JD, PhD and Jeffrey Davis, MD. The three members of the ECH Board who are not District Board members now serve a maximum of (4) 3-year terms. These three year terms are staggered. One term expires each year on June 30th. Director Chen is serving his first term, Directors Davis is serving his third term and Director Cohen is completing his second term.

.

Revised January 4, 2017

Att. 15 03 Gregory Response to RFP

Tod Gregory - Executive Search
98 University Drive, Menlo Park, CA 94025
Tod.gregory@gmail.com 415 699-6140

January 3, 2017

RE: RFP Board of Director El Camino Hospital

Cindy Murphy, Board Liaison
El Camino Healthcare District
El Camino Hospital
2500 Grant Road
Mountain View, CA 94040

sent via email to Cindy_murphy@elcaminohospital.org

Dear Cindy,

Thank you for answering my questions back in December and allowing me to present my out of the box nontraditional response to your RFP. These two pages are my official response.

Having worked locally for Korn/Ferry International for 22 years I personally know how the large retained executive search firms work and what they can offer. As a local sole practitioner who has lived for the last 36 years exactly 8.8 miles from El Camino Hospital what I offer is a very strong local network with excellent relevant contacts. Examples include the past CEO of Palo Alto Medical Foundation, doctors at Stanford Hospital, El Camino Hospital, PAMF and San Jose's Good Samaritan and O'Connor Hospital. I grew up in Scotts Valley and thus am familiar with Los Gatos and the market served by your second facility. I am also a long time Rotarian and past President of the largest and most successful breakfast club in Santa Clara county – Palo Alto University Rotary. I currently serve on our club's Membership Committee and thoroughly enjoy seeking out and recruiting top notch new members for Rotary and our club. My most recent success has been to successfully recruit four new women, three lawyers including two diversity candidates and the current head of Palo Alto's private and nationally ranked Castilleja School. Professionally I conduct only one or two executive searches per year.

Herewith in short order the answers to your questions:

NAME: Tod Gregory (actual formal name is Quintard Gregory)

TYPE OF ORGANIZATION: Sole proprietorship

OFFICIAL: Tod Gregory

CONTACT: Tod Gregory

PROGRAM MANAGER: Tod Gregory

FEDERAL ID NUMBER – 563-60-3474

ADDRESS: 98 University Drive, Menlo Park, CA 94025

RELEVANT EXPERIENCE

- 22 years with Korn/Ferry International – San Francisco & Palo Alto
- Currently provide executive search and career counseling services
- Recent search/counseling assignments – CEO American Red Cross Silicon Valley
Stanford Graduate School of Business
- Comprehensive Liability Insurance – State Farm Menlo Park # 97-CU-C610-8
- 3 References:
Florence Buatois – Board Member – American Red Cross Silicon Valley
650 492-1954 flower23@mac.com
Phillip Hoare – VP CIO Wilson Sonsini Goodrich & Rosati –
650 354-4290 phoare@wsgr.com
Quinn Tranh – past CEO American Red Cross Silicon Valley –
408 613-8047 QuinnTran8@gmail.com

PROFESSIONAL FEES AND EXPENSES

- \$ 10,000 total – including expenses – payable one third upon agreement; one third 30 days later and final third 30 days later.

TIMING AND METHODOLOGY

- January 5 – February 5 –finalize position specification, meet with each Director
- February 5 – March 5 – initiate research, develop list of potential candidates
- March 5 – April 5 – interview potential candidates and present finalists

DISTRICT RESPONSIBILITIES

- To provide timely feedback re the Position Specification
- To provide information re candidates identified from other sources
- To be on hand for Search Committee meetings and interviews
- All possible candidates are subject to same qualification process

CONCLUSION - WHAT SETS TOD GREGORY APART

There are three major qualities which differentiate my work:

- Executive search experience for the global leader – Korn/Ferry International
- Outstanding local network gained by living and working in the area 36 years
- Ability, motivation and drive to work on one assignment at a time

Att. 15 03 Witt-Kieffer Response to RFP

January 3, 2017

Ms. Cindy Murphy
Board Liaison
El Camino Healthcare District
El Camino Hospital
2500 Grant Road
Mountain View, CA 94040

Via email

Cindy_murphy@elcaminohospital.org

Dear Ms. Murphy:

Thank you for requesting our response to your request for proposal – El Camino Hospital Board Member Search Firm. Witt/Kieffer is one of the nation's top ten search firms and the only leading firm dedicated to serving healthcare, universities and other non-profits. We are a corporation and have offices throughout the country, including two offices in California.

I would be leading all aspects of this search and have over 30 years experience serving organizations similar to El Camino. Located in Irvine, California, I have extensive experience recruiting board members in the state, am the former Chief Executive Officer of our company and would be honored to represent you on this important work. I personally serve on boards and understand the critical governance issues facing our nation's hospitals and health systems. In recognition for this work, I have served on the American Hospital Association's, Center for Healthcare Governance, National Board of Advisors. I would be your contact person for this engagement and manage all aspects of this work.

Our Federal Payee Identification Number is 36-2919320 and our payment address would be our corporate offices:

2015 Spring Road, Suite 510
Oak Brook, IL 60523

Thank you for your interest and please call if you have any questions. My cell phone number is 949/300.9271.

Sincerely,



James W. Gauss
Senior Partner, Healthcare and Board Services

Relevant Experience

1. Witt/Kieffer has been serving clients in the health field since 1969.
2. Our annual revenue is fifty-nine million for the year 2016.
3. Our annual expenses are fifty-eight million
4. Seven percent of our revenues are dedicated to research and development. We have a very robust research division which is always utilized on board searches
5. In our primary market – hospitals and health systems, we estimate a twenty-five percent market share.
6. We carry fifteen million in comprehensive liability insurance through Travelers Insurance Company.
7. We have 230 full-time employees.
8. We have recruited board members in the last three years to the following healthcare organizations. The individuals placed had governance experience and competencies in finance, technology, clinical care delivery, population health, strategic planning in addition to other skills and experiences.
 - a. PIH Health – an integrated, regional health system located in Whittier, California. I recruited multiple board members for the parent board.

Contacts:

Peggy Chulack
Primary governance contact for the board
562/698.0811 extension 12409

Jim West
Chief Executive Officer
562/698.0811 extension 12413

I am pleased to provide multiple board member reference names at your request.

- b. Methodist Hospital of Southern California – a complex medical center located in Arcadia, California. I recruited multiple board members for the parent board.

Contacts:

Kathy Ellison
Immediate Past Chair – Board of Directors
626/340.3614 (cell)

Dan Ausman
Chief Executive Officer
626/574.3600

I am pleased to provide multiple additional board member references at your request.

- c. SCAN Health Plan – an innovative health plan serving California residents primarily focused on seniors. Located in Long Beach, California. I just completed a search for a board member. The client was so pleased with the pool, they selected two people and expanded the board. We did not charge the client additional fees for the additional placement.

Contact:

Colleen Cain
Chair – Governance
Former Chair of the Board
503/740.0220 (cell)

Other board member references can be provided at your request. Colleen may be out of the country so please let me know if you have any difficulty reaching her.

Additional Information

Our process includes:

- Comprehensive search start-up to understand your needs, board culture and other aspects of this search.
- Complete vetting of candidates.
- In depth sourcing to include identification of candidates who most closely match your needs.
- On-site management of the complete interview process.
- On-going follow-up after placement.

Expectations for the District

- It is critical current members are available to discuss the organization's needs and with advance notice be available to meet the candidates.
- Other background on El Camino will be made available, as appropriate, during the search process. It is understood that this information is confidential.

Fees and Expenses

- The professional fee for this search is \$50,000. Expenses will be billed on a monthly basis for travel and other expenses incurred on your behalf.

ATTACHMENT 16

EL CAMINO HEALTHCARE DISTRICT BOARD
FY2017 PACING PLAN (Updated December 7, 2016)

FY17 Q1		
JULY 2016	AUGUST 10, 2016	SEPTEMBER 2016
No Meeting	Approval of Campus Development Funding	No meeting
FY17 Q2		
OCTOBER 18, 2016	NOVEMBER 2016	DECEMBER 6, 2016
<ul style="list-style-type: none"> ▪ FY17 YTD ECHD Financials ▪ FY16 Community Benefit Year End Report ▪ FY16 Stand-Alone Financials ▪ FY16 Financial Audit Presentation – Consolidated ECH District Financials ▪ Approve FY16 Hospital Audit ▪ Hospital Board Member Election Ad Hoc Committee Report ▪ GO Bond Re-Financing Approval ▪ Approval of Easement for Melchor and 2500 Hospital Drive Driveway merging ▪ Pacing Plan 	No Meeting	<ul style="list-style-type: none"> ▪ Swearing in of District Board Members ▪ Election of El Camino Hospital Board Directors ▪ Silicon Valley Tobacco Securitization Joint Powers Authority Board Report ▪ ACHD Report ▪ Affirm and Sign Standards of Conduct ▪ Pacing Plan

FY17 Q3		
JANUARY 17, 2017	FEBRUARY 2017	MARCH 14, 2017
<ul style="list-style-type: none"> Recognition (As Needed) Community Benefit Spotlight (If Time Allows) FY17 YTD ECHD Financials Hospital Board Member Election Ad Hoc Committee Report (if necessary) Pacing Plan Bi Annual By Laws Review (done last in FY15) Bi Annual Reserve Powers Review (done last in FY15) GO Bond Transaction Update El Camino Hospital Governance 	No Meeting	<ul style="list-style-type: none"> Recognition (As Needed) Community Benefit Spotlight (If Time Allows) FY17 YTD ECHD Financials Hospital Board member Election Ad Hoc Committee Report (if necessary). Affirm Process for Board Officer Election Pacing Plan <u>Bi-Annual By-Laws Review (Last done in FY15)</u> <u>Bi-Annual Reserve Powers Review (Last Done in FY15)</u> <u>ECH Physician Development Plan</u> <u>Closed Session Minutes Content</u>
FY17 Q4		
APRIL 2017	MAY 2017	JUNE 20, 2017
No Meeting	No Meeting	<ul style="list-style-type: none"> Recognition (As Needed) Community Benefit Spotlight (If Time Allows) FY17 YTD ECHD Financials Tax Appropriation for FY18 District Capital Outlay Fund Review and Approve FY18 Pacing Plan Approval of FY18 Community Benefit Plan Approve ECH FY18 Budget Approve ECHD FY18 Budget Appoint Hospital Board Member Election Ad Hoc Committee <u>Biennial Board Officer Election</u> <u>ACHD Membership</u>