

# CLOVERDALE HEALTH CARE DISTRICT

## Regular Meeting Agenda

JANUARY 11 2021, 7:00 P.M.

126 N. Cloverdale Blvd

IN-PERSON AND VIRTUAL

ROLL CALL: PRESIDENT: WINTER VICE PRESIDENT: DeMARTINI TREASURER: DELSID SECRETARY: HANCHETT MEMBER: MARTIN

AGENDA APPROVAL:

PUBLIC COMMENT PERIOD: PUBLIC COMMENT PERIOD PROVIDES TIME FOR MEMBERS OF THE AUDIENCE TO ADDRESS THE BOARD ON MATTERS WHICH DO NOT APPEAR ON TONIGHT'S AGENDA. TIME LIMIT FOR COMMENTS TO THE BOARD ON NON-AGENDIZED ITEMS IS LIMITED TO FIVE MINUTES (GOVERNMENT CODE SECTION 54954.3(b))

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ITEMS:

1. Election of Officers
2. Minutes NOVEMBER 2020- no December meeting
3. Financial Statement December 2020
4. Managers Report-
5. Review/Approve FY 19-20 Audit
6. Mid Year Budget review
7. Staffing
8. Medical Director recruitment
9. COVID 19 Vaccination Response
10. From Members-

Adjourn to Executive Meeting: none

Adjourn to Regular Meeting

Adjourn till February 8, 2020

All agenda items, reports, minutes, are available for review at the offices of the Cloverdale Health Care District located at 209 N. Main St. Cloverdale Ca 95425 and are available upon request. Posted per Government Code section 54954.2 January 7, 2020, Any disabled, handicapped, or other meeting attendees needing special assistance or other accommodations for participation, please contact the business office 24 hrs before the meeting. 707-894-5862.

**Cloverdale Health Care District**  
**Meeting Minutes-November 9, 2020 (No meeting in October)**

Roll Call: Director Tom Hinrichs, Al Delsid and Neena Hanchett were present. President Winter joined via teleconference. Board members DeMartini and Martin were not present.

**Meeting agenda was approved by all board members with no changes.**

**Previous Minutes:** Minutes of the Sept. 14, 2020 meeting were approved unanimously after a motion to approve was put forward by board member Delsid and seconded by member Hanchett. There was no meeting in October. Unanimously approved by those present.

**Financial Statement for October, 2020-**The financials were approved unanimously after a short discussion of budgeted view versus actual was explained by Tom. Hanchett made a motion for approval; Delsid seconded and all board members present approved.

**Ma n a g e r ' D i s t r i c t S t a f f** completed mandatory on-line sexual harassment training. Four patients with acute Covid-19 symptoms were transported from Cloverdale Healthcare Center and reported to the county health department as required. The new patient transport gurney is working out well. Tom signed the Letter of Intent for the 2021 IGT. The district is and will remain in good fiscal condition with funds still being dedicated to ambulance replacement and reserve accounts.

**Election-November, 2020:** Hanchett and Winter signed the Oath of Office for their new terms on the board.

**From Members/For the Good of the Order:** Tom was given his Appreciation gift at the meeting as the Appreciation Dinner was postponed and then cancelled due to the county Covid-19 Pandemic. Thank you, Tom for your stewardship of the district.

The meeting was adjourned at 7:21 p.m. The next meeting is Monday, December 14, 2020.

Respectfully submitted,

Neena Hanchett,  
Board Secretary

CLOVERDALE AMBULANCE

Balance Sheet  
December 31, 2020

ASSETS

Current Assets		
Exchange Bank Bus. Checking	\$	130,424.68
SBA PPP Payment-delete		54,129.90
RESERVE/CAPITAL ACCT		285,746.97
Ambulance Replacment Savings		186,009.02
Accounts Receivable Ambulance		135,454.76
Reserve for Doubtful Accts.		6,517.29
Prepaid insurance		643.89
IGT Refundable deposits		438.00
SBA PPP Payment		<u>(16,807.67)</u>
Total Current Assets		782,556.84
Property and Equipment		
Land		17,789.00
Ambulance and Equipment		462,048.41
Furniture and fixtures		16,563.64
Building and Improvements		323,365.96
A/D - Other Fixed Assets		<u>(373,922.00)</u>
Total Property and Equipment		445,845.01
Other Assets		<u>                    </u>
Total Other Assets		<u>0.00</u>
Total Assets	\$	<u><u>1,228,401.85</u></u>

LIABILITIES AND CAPITAL

Current Liabilities

CLOVERDALE AMBULANCE

Balance Sheet  
December 31, 2020

Accounts payable	\$	4,496.15	
Accrued retirement benefits		(4,779.54)	
Accrued Interest		57.20	
Accrued AFLAC		<u>113.80</u>	
Total Current Liabilities			(112.39)
Long-Term Liabilities		<u>                    </u>	
Total Long-Term Liabilities			<u>0.00</u>
Total Liabilities			(112.39)
Capital			
Fund Balance		731,591.05	
Prior Year Profit (Loss)		464,102.78	
Net Income		<u>32,820.41</u>	
Total Capital			<u>1,228,514.24</u>
Total Liabilities & Capital	\$		<u><u>1,228,401.85</u></u>

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CLOVERDALE AMBULANCE  
Income Statement  
Compared with Budget  
For the Six Months Ending December 31, 2020

	Current Month Actual	Current Month Budget	Year to Date Actual	Year to Date Budget	Year to Date Variance
Revenues					
Ambulance Service	\$ 94,169.08	\$ 79,000.00	\$ 474,340.68	\$ 473,714.00	626.68
Less - Contract Allowances	(26,341.94)	(38,500.00)	(230,958.82)	(230,958.82)	0.00
Donations	0.00	0.00	275.00	0.00	275.00
Property Tax (13)	25,272.43	250,000.00	29,853.04	30,000.00	(146.96)
Special Assessment	88,933.95	89,000.00	92,020.95	95,000.00	(2,979.05)
Interest Income	0.00	100.89	107.51	544.27	(436.76)
Other (Income) and Expenses	0.00	0.00	5,933.00	0.00	5,933.00
<b>Total Revenues</b>	<b>182,033.52</b>	<b>379,600.89</b>	<b>371,571.36</b>	<b>368,299.45</b>	<b>3,271.91</b>
Cost of Sales					
<b>Total Cost of Sales</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Gross Profit</b>	<b>182,033.52</b>	<b>379,600.89</b>	<b>371,571.36</b>	<b>368,299.45</b>	<b>3,271.91</b>
Expenses					
Salaries & Wages	33,138.20	33,175.00	198,791.45	199,050.00	(258.55)
Health benefits employer	5,257.55	4,750.00	29,144.65	28,500.00	644.65
Fuel Expense	679.82	1,500.00	7,754.29	9,000.00	(1,245.71)
Work Comp ACHD	1,632.00	1,632.00	10,961.00	9,792.00	1,169.00
Payroll Exp UTI/ETT	33.18	125.00	506.00	750.00	(244.00)
Amb Repair Maintenance	193.71	820.00	3,586.82	4,920.00	(1,333.18)
Supplies Patient	3,046.92	2,090.00	11,735.01	12,540.00	(804.99)
Employee Benefits Volunteers	624.90	416.00	813.66	2,496.00	(1,682.34)
Outside Services	128.00	1,325.00	3,343.35	7,950.00	(4,606.65)
Bad Debit Writeoff	0.00	0.00	(1,479.53)	0.00	(1,479.53)
Patient Refunds	1,485.00	0.00	1,485.00	0.00	1,485.00
employer soc. sec.	2,052.26	1,925.69	15,686.21	11,853.52	3,832.69
Employer Medicare	479.99	450.38	3,253.71	2,772.32	481.39
Dues & Subscriptions	0.00	0.00	2,704.00	2,704.00	0.00
Capital Equipment	0.00	0.00	12,493.58	12,000.00	493.58

CLOVERDALE AMBULANCE  
Income Statement  
Compared with Budget  
For the Six Months Ending December 31, 2020

	Current Month	Current Month	Year to Date	Year to Date	Year to Date
	Actual	Budget	Actual	Budget	Variance
Utilities	509.03	467.18	3,553.37	3,181.29	372.08
Insurance - General	1,583.30	1,583.00	9,499.80	9,498.00	1.80
Accounting	6,500.00	0.00	6,500.00	6,700.00	(200.00)
Office expense	3,161.33	1,700.00	10,892.22	10,200.00	692.22
Payroll Tax FUTA	9.48	13.68	144.57	132.94	11.63
Telephone	262.17	197.51	1,550.90	1,182.38	368.52
Volunteer Appr. Mtng.	0.00	0.00	(300.00)	0.00	(300.00)
Total Expenses	60,776.84	52,170.44	332,620.06	335,222.45	(2,602.39)
Net Income	\$ 121,256.68	\$ 327,430.45	\$ 38,951.30	\$ 33,077.00	5,874.30

## **STAFF REPORT**

### **January 2021**

Manager Report—

Operations- The COVID 19 lockdown affected us early in the holiday season, late November through early December with a significant downturn in responses and transports. However, by mid-December, the call volume increased and ended above our monthly average. For the calendar year 2020, the District billed a total of 515 accounts. This number is within our yearly norms for the last several years. The ambulance response statistical report is posted to the website for review

Operationally there were no interruptions, injuries, or mechanical issues. Workforce is steady

December 5<sup>th</sup> we conducted our bi-annual in-house EMT skills refresher skills class.

Our staff has begun the COVID 19 vaccination process. 80% of the crews have received the first dose of the Pfizer vaccine and are scheduled for the second dose this month. The remaining staff is assessing the vaccines before committing to the vaccination.

COVID- Our area has had an increase in the population of people testing positive. The Sonoma Department of Health has a notification process in place to notify responder agencies when a positive COVID patient is transported. All of our notifications resulted from the CHCC and were already know to us. The staff assumes all patient contacts are COVID positive and we have a 100% compliance rate with PPE usage and no exposure events. The hospitals are heavily impacted, we have seen a longer drop off times at the ED due to lack of beds and staffing shortages.

Audit- The FY 19-20 Audit has been completed. The audit is posted to the District website for review. The District had an overall loss of revenue from the prior year due to the adjustment in the funding dates for the IGT funding.- no IGT funds were received during the FY. The operational loss was consistent with prior years. Approval by the Board is required.

Midyear Budget review- Upon review of the financial statements staff noted that the monthly budgeted amounts for ambulance services have been misstated in the budget and the financial reports. The increase in the charged base rates and less contract allowance was not reflected accurately in the FY 20-21 budget. The financial report and the budget have been corrected to reflect the actual average numbers for the year to date.

Staffing- Staff is bringing forward a proposal to add a full-time paramedic position within the District. The staff proposal consists of several components to realize this.

- 1) Management will reallocate \$2,000 per month of current salary towards funding the new position. With the addition of a paramedic position, the reduction in fieldwork and shift coverage for the District management will be reduced. Management will continue to cover shifts as needed. The shift calendar and part-time staffing for the balance of shifts will also be adjusted as needed to remain fully staffed and work hour compliant.
- 2) The three quarter time EMT position will have its health benefits reallocated to the new paramedic position.

This reallocation of funds is almost expense neutral to the District as planned and should be sustainable into the future. Eris Polan who is a three-quarter-time paramedic currently will have his hours increased to full-time and assume this position. The changes are reflected in the mid-year budget adjustments.

Medical Director- Our current medical director for the ambulance service has retired. Dr. Richard Ganz has served in this capacity for over thirty years. While he was not an “active” medical director he did fulfill vital functions related to medication and prescription needs for the ambulance operations.

The District is required to have a medical director. There are not any enunciated requirements in regulation as to the minimum duties other than the need to have one. At a minimum, the authorization by an MD is required to order certain medical supplies as they are prescription-only and the ability to attain scheduled medications is also a minimum duty. Most medical directors also are used for quality control purposes (CQI) when clarification is needed from our CQI staff. Some medical directors also are used for training staff at some agencies. Staff has attached a draft medical director agreement for review. Dr. Ganz provided his services pro bono, going forward there will most likely be a cost associated with a new medical director. As we seek a new medical director staff will be cognitive of that cost and return to the Board for approval of that cost before any formal agreement is signed.

COVID 19 Vaccination Response- The State of California has approved the use of paramedic and EMT personnel in any mass vaccination role out. To this end, the District has attempted to be designated as a vaccination provider. That decision has not been made by the Sonoma County Department of Public Health. However, local clinics have already been designated as approved locations. We have approached the Alexander Valley Clinic with our desire and ability to provide staffing to administer the COVID vaccination when the mass vaccination events occur. They have agreed. Our EMT personnel who expressed a desire to participate will be undergoing training soon, paramedic personnel already can vaccinate as part of their scope of practice and all have already undergone the COVID19 specific training.



**CLOVERDALE HEALTH CARE DISTRICT**  
**MANAGEMENT'S DISCUSSION AND ANALYSIS**

**JUNE 30, 2020 AND 2019**

**FINANCIAL ANALYSIS OF THE FUND STATEMENTS**

The fund financial statements focus on individual parts of the District's operations in more detail than the government-wide statements. The District's individual fund statements provide information on inflows and outflows and balances of expendable resources. The District's Governmental Funds reported a fund balance of \$661,234 on June 30, 2020 and \$694,434 on June 30, 2019, a decrease of \$33,200 and increase of \$188,179 for fiscal years ending June 30, 2020 and 2019, respectively.

**General Fund Budgetary Highlights**

Over the course of the year, the District reviews the annual operating budget monthly.

The final revised budget for the fiscal year 2019-2020 General Fund reflected a net increase to the ending balance of \$6,507.

The District ended the fiscal year 2019-2020 net decrease of \$33,200 to the General Fund ending balance.

The final revised budget for the fiscal year 2019-2018 General Fund reflected a net increase to the ending balance of \$2,539.

The District ended the fiscal year 19-18 net increase of \$188,179 to the General Fund ending balance.

**CAPITAL ASSETS**

By the end of the 2019-20 fiscal year, the District had invested \$831,232 in a broad range of capital assets, including administrative buildings, site improvements, vehicles, and equipment.

The capital assets net of depreciation is \$304,332 on June 30, 2020, which is a decrease of \$79,677.

By the end of the 2018-19 fiscal year, the District had invested \$831,232 in a broad range of capital assets, including administrative buildings, site improvements, vehicles, and equipment.

The capital assets net of depreciation is \$384,009 on June 30, 2019, which is a decrease of \$28,171.

**CLOVERDALE HEALTH CARE DISTRICT**  
**STATEMENT OF REVENUES AND EXPENDITURES**  
**FISCAL YEARS ENDED JUNE 30, 2020, 2019 AND 2018**

	<u>2019-2020</u>	<u>2018-2019</u>	<u>2017-2018</u>
<b>REVENUES</b>			
Current secured property tax	\$ 43,120	\$ 41,913	\$ 37,741
Special Assessments	156,464	156,492	163,465
Interest income	848	579	316
Gain on sale of assets	-	-	-
Other local revenue	72,300	176,298	83,809
Charges for ambulance services	713,735	729,416	780,951
Less: Contractual adjustments	(391,199)	(326,254)	(409,558)
Provision for bad debts	(8,222)	(13,379)	(23,766)
	<u>587,046</u>	<u>765,065</u>	<u>632,958</u>
Total Revenues			
<b>EXPENDITURES</b>			
Salaries and wages, including payroll taxes	415,540	382,182	363,055
Workers' compensation insurance	83,097	80,104	65,205
Services and supplies:			
Fuel	15,338	18,121	14,457
Insurance - general	16,116	18,656	20,095
Repairs and maintenance - ambulance	5,558	10,166	2,967
Supplies for patients	22,296	20,070	24,388
Legal and audit fees	9,583	7,215	6,953
Office expense	19,895	17,068	19,096
Other expenses - dues, subscriptions, volunteers, refunds, travels	5,411	5,568	4,399
Outside services	14,490	8,672	11,143
Repairs and maintenance - office painting, flooring, furniture, bed	3,012	716	1,732
Utilities and telephone	7,810	8,348	9,799
Capital outlay expenditures	2,100	-	24,260
	<u>620,246</u>	<u>576,886</u>	<u>567,549</u>
Total Expenditures			
Excess of Revenues Over Expenditures	(33,200)	188,179	65,409
Fund Balances - Beginning of Year	<u>694,434</u>	<u>506,255</u>	<u>440,846</u>
Fund Balances - End of Year	<u>\$ 661,234</u>	<u>\$ 694,434</u>	<u>\$ 506,255</u>

The accompanying notes are an integral part of the financial statements.

**CLOVERDALE HEALTH CARE DISTRICT**  
**SCHEDULE OF AUDIT FINDINGS AND RESPONSES**  
**FOR THE FISCAL YEAR ENDING JUNE 30, 2020**

**Section I - Summary of Auditor's Results**

***Financial Statements***

Type of auditor's report issued:	Unmodified
Internal control over financial reporting:	
Material weakness(es) identified?	___ Yes <u>x</u> No
Significant deficiency(ies) identified that are not considered to be material weakness?	___ Yes <u>x</u> None reported
Noncompliance material to financial statements noted?	___ Yes <u>x</u> No

**CLOVERDALE HEALTH CARE DISTRICT**  
**SCHEDULE OF AUDIT FINDINGS AND RESPONSES**  
**FOR THE FISCAL YEAR ENDING JUNE 30, 2020**

There were no findings or recommendations considered reportable conditions determined as a result of prior audit of Cloverdale Health Care District for the year ended June 30, 2019.

**CLOVERDALE HEALTHCARE DISTRICT AMBULANCE  
FINAL BUDGET FY 2020-2021  
OPERATIONS**

**SALARIES AND WAGES** **\$407,000**

Positions	Salary Step	
(1) Manager/Paramedic	5	\$80,000 (56,000 + 24,000)
(1) Paramedic	5	\$62,000
(1) Paramedic	5	\$62,000
(5) Paramedic part-time	5	\$43,000
(2) EMT	1	\$105,100
Volunteer payroll		\$25,000
Overtime		\$30,000
<i>( 457(b) Benefits included in Salary and Wages ABOVE \$24,000)</i>		

**TAXES** **\$37,000**

Medicare	\$6,100
FUTA	\$2,600
Soc Sec.	\$24,000
SUI/ETT	\$4,300

**EMPLOYEE BENEFITS** **\$54,290**

**WORK COMP** **\$19,584**  
ACHD.\$1,632 mo

**FUEL EXPENSE** **\$18,000**

**AMBULANCE REPAIRS** **\$9,800**

Est. Mileage.....	\$31,000
Tires	\$800
Lube/oil/filter	\$400
Cleaning/Disinfection supplies	\$150
Batteries	\$200
Reserve for repairs	\$5000
Accident Deduct.	\$1000
Comp. Deduct.	\$1000

## COVERDALE HEALTH CARE DISTRICT

### Medical Director Agreement

THIS AGREEMENT made this \_\_\_\_\_ day \_\_\_\_\_ of, by and between \_\_\_\_\_, hereinafter the "Medical Director" or "MD," \_\_\_\_\_ hereinafter the "District,"

The parties recite and declare:

The undersigned Physician, currently licensed to practice medicine or osteopathy by the California Board of Medicine, hereby agrees to serve as **Primary Medical Director (MD)** for the undersigned District during a period beginning January 1, 2021, continuous and renewable yearly on the same date, until or unless earlier revoked at the will and discretion of either Party in writing thirty (30) days before revocation date. This Agreement also shall terminate if the District' functions as a prehospital emergency service.

#### The District:

The District agrees that during the term of this Agreement, it will meet all requirements to maintain its status as an active and regulatory compliant prehospital emergency service within the Coastal Valleys EMS Agency Region..

The District agrees that during the term of this Agreement, the District will provide insurance coverage as our Medical Director or supervising physician, we provide coverage for their **administrative** duties which MAY include:

- \_ establishing medical protocol as necessary;
- \_ creating medical training curriculum;
- \_ providing medical training; or
- \_ conducting medical quality assurance.

If the Medical Director is an employee or volunteer, he or she is covered while performing their duties for as an ambulance crew member, the MD can perform BLS or ALS services within the scope of their duties while on duty and as a responder.

There is no medical malpractice coverage for any doctor while acting as a doctor, except for their administrative duties.

The District agrees that during the term of this Agreement it will make available to the MD on request all records and documents about the certification, training, continuing education, and field practice of EMS-certified personnel, including but not limited to District copies of Patient Care Reports (PCRs) electronic or otherwise for quality review purposes.

The District agrees that during the term of this Agreement it will implement and maintain a quality assurance program, in coordination with the MD, to ensure provider skills and knowledge proficiency at the appropriate level(s) of certification per the CVEMSA Policies and Procedures and Administrative Policy Manual.

The District will adhere to and maintain a compliant narcotic storage and distribution policy.

If the need arises, the District agrees that during the term of this Agreement it will work with the MD to develop any changes needed to its EMS Plan that will promote maximum patient care in the District's service areas should include, but not be limited to personnel training and evaluation, continuing education, provider service review, and provisions to upgrade as appropriate the level of patient care service provided by the District.

The District provides a fair and equitable process by which complaints and disciplinary actions involving the delivery of emergency medical care can be promptly reviewed, adjudicated, and otherwise resolved per the District employee policy manual and per the requirements of the CVEMSA. The District can seek input from the MD regarding any resolution decisions affecting the delivery of service, quality assurance reviews, and employee performance...

The District agrees to develop a communications venue for District personnel as follows: (i.e. phone#, email, etc.) to have direct contact to the District MD regarding the discussion of issues relating to the provision of patient care, application of patient care protocols.

The District shall provide to the MD a current listing of all EMS personnel and the District's officers.

The District agrees that during the term of this Agreement it will comply with all laws, rules, regulations, and patient care protocols now existing or later enacted by federal, state, or regional EMS authorities concerning training, equipment, and field practice by providers. Any violation of such laws, rules, or regulations shall constitute a material breach of this Agreement and shall give MD the right to terminate this Agreement.

**The MD:**

The MD agrees during the term of this Agreement to hold current regional and state endorsement as a Medical Doctor or Osteopathy.

The MD will provide documentation and copies of licenses as needed by the District which provides authorization as needed to buy medical supplies and medications which require a prescription and to act as the District CLIA Director. The ability to issue a DEA 222 form is required.

To provide technical assistance, medical leadership, and medical training as needed for the District and its EMS-certified personnel.

The MD can, during the term of this Agreement, represent the District as a member of the Medical Advisory Committee or Emergency Medical Care Committee and, when possible, to attend meetings of these committees and/or review copies of minutes and other documents to ensure the District's compliance with the regional Care.

The MD agrees during the term of this Agreement to work in coordination with the LEMSA Medical Director and District leaders to promote the highest level of proficiency within the District and to ensure optimal prehospital patient care within the District.

The MD and the District leadership agree during the term of this Agreement to maintain close and regular channels of communication, to meet regularly and to appropriately address issues and concerns in a prompt, professional and effective manner.

Either Party may terminate this Agreement with **thirty (30) days notice** to the other Party unless extenuating circumstances exist causing immediate termination.

\_\_\_\_\_  
Medical Director (print)

\_\_\_\_\_  
EMS District (print)

\_\_\_\_\_  
Operational Medical Director (sign)

\_\_\_\_\_  
Authorized Officer (sign)

Date: \_\_\_\_\_