



BOARD OF DIRECTORS: Peter C. Fung, MD | Julia E. Miller | Carol A. Somersille, MD | George O. Ting, MD | John L. Zoglin

AGENDA
MEETING OF THE
EL CAMINO HEALTHCARE DISTRICT BOARD OF DIRECTORS

Tuesday, March 18, 2025– 5:30 pm

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040 | Sobrato Boardroom 1

THE PUBLIC IS INVITED TO JOIN THE OPEN SESSION PORTION OF THE MEETING LIVE AT THE ADDRESS ABOVE
 OR VIA TELECONFERENCE AT:

1-669-900-9128, MEETING CODE: 953 8769 3332#. No participant code. Just press #.

To watch the meeting, please visit:

[ECHD Meeting Link](#)

Please note that the livestream is for **meeting viewing only** and there is a slight delay; to provide public comment, please use the phone number listed above.

NOTE: In the event that there are technical problems or disruptions that prevent remote public participation, the Chair has the discretion to continue the meeting without remote public participation options, provided that no Board member is participating in the meeting via teleconference.

A copy of the agenda for the Special Board 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) 988-3218** 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	ACTION	ESTIMATED TIMES
1.	CALL TO ORDER/ROLL CALL	George Ting, M.D., Board Chair	Information	5:30
2.	CONSIDER APPROVAL FOR AB 2449 REQUESTS	George Ting, M.D., Board Chair	Possible Motion	5:30
3.	SALUTE TO THE FLAG	George Ting, M.D., Board Chair	Information	5:30
4.	POTENTIAL CONFLICT OF INTEREST DISCLOSURES	George Ting, M.D., Board Chair	Information	5:30
5.	PUBLIC COMMUNICATION a. Oral Comments <i>This opportunity is provided for persons desiring to address the Board on any matter within the subject matter jurisdiction of the Board that is not on this agenda. Speakers are limited to three (3) minutes each.</i> b. Written Public Comments <i>Comments may be submitted by mail to the El Camino Hospital District Board of Directors at 2500 Grant Road, Mountain View, CA 94040. Written comments will be distributed to the Board as quickly as possible. Please note it may take up to 24 hours for documents to be posted to the agenda.</i>	George Ting, M.D., Board Chair	Information	5:30
6.	COMMUNITY BENEFIT SPOTLIGHT: ON-SITE DENTAL CARE FOUNDATION Adopt Resolution 2025-02	Jonathan Cowan, Executive Director, Relations and Community Partnerships Cheryl Walter, Executive Director, On-Site Dental Care Foundation	Motion Required	5:30 – 5:45

Agenda: El Camino Healthcare District
March 18, 2025 | Page 2

	AGENDA ITEM	PRESENTED BY	ACTION	ESTIMATED TIMES
7.	RECEIVE ECHD FY25 FINANCIAL REPORT - FY25 Period 7	Carlos Bohorquez, CFO	Motion Required	5:45 – 6:00
8.	ECHD COMMUNITY BENEFIT FUNDS	John Zoglin, Director, ECHD Secretary/Treasurer	Possible Motion	6:00 – 6:15
9.	EL CAMINO HEALTHCARE DISTRICT BOARD HEALTH AND SAFETY CODE § 32103: DIRECTOR COMPENSATION - Consider Initiating Process to Increase Board Compensation	George Ting, M.D., Board Chair	Possible Motion	6:15 – 6:20
10.	ECHD POLICY REVIEW – RECORDS RETENTION POLICY Adopt Resolution 2025-03 Records Retention Policy	George Ting, M.D., Board Chair Theresa Fuentes, CLO	Motion Required	6:20 – 6:30
11.	FORMATION OF FY26 ECHB REAPPOINTMENT/RECRUITMENT AD HOC COMMITTEE Approve Resolution 2025-04	George Ting, M.D., Board Chair	Motion Required	6:30 – 6:35
12.	RECESS TO CLOSED SESSION	George Ting, M.D., Board Chair	Motion Required	6:35 – 6:36
13.	ECHD REAL ESTATE STRATEGY <i>Health & Safety Code Section 32106(b) for a report and discussion involving healthcare facility trade secrets regarding new district services or programs:</i>	Ken King, CAO	Discussion	6:36 – 6:51
14.	APPROVE MINUTES OF THE CLOSED SESSIONS OF THE DISTRICT BOARD MEETINGS a. Minutes of the Closed Session of the District Board Meeting (02/11/2025) <i>Report involving Gov't Code Section 54957.2 for closed session minutes.</i>	George Ting, M.D., Board Chair	Motion Required	6:51 – 6:55
15.	EXECUTIVE SESSION <i>Report involving Gov't Code Section 54957 for discussion and report on personnel performance matters – CEO</i>	George Ting, M.D., Board Chair	Discussion	6:55 – 7:00
16.	ADJOURN TO OPEN SESSION	George Ting, M.D., Board Chair	Motion Required	7:00 – 7:01
17.	RECONVENE OPEN SESSION	George Ting, M.D., Board Chair	Information	7:01 – 7:02
18.	CLOSED SESSION REPORT OUT	Gabe Fernandez, Governance Services Coordinator	Information	7:03 – 7:04

Agenda: El Camino Healthcare District
 March 18, 2025 | Page 3

	AGENDA ITEM	PRESENTED BY	ACTION	ESTIMATED TIMES
19.	CONSENT CALENDAR <i>Items removed from the Consent Calendar will be considered separately.</i> a. Approve Minutes of the Open Session of the District Board Site Visit Meeting (02/07/2025) b. Approve Minutes of the Open Session of the District Board Meeting (02/11/2025) c. Approve Resolution 2025-05: Amending ECHD Conflict of Interest Code d. Receive FY25 Pacing Plan	George Ting, M.D., Board Chair	Motion Required	7:05 – 7:10
20.	BOARD ANNOUNCEMENTS	George Ting, M.D., Board Chair	Information	7:10 – 7:20
21.	ADJOURNMENT Appendix	George Ting, M.D., Board Chair	Motion Required	7:20 pm

Next Meetings: May 20, 2025; June 17, 2025

Next Site Visit Meetings: March 28, 2025

EL CAMINO HEALTHCARE DISTRICT

RESOLUTION 2025-02

RESOLUTION OF THE BOARD OF DIRECTORS OF EL CAMINO HEALTHCARE DISTRICT REGARDING RECOGNITION OF SERVICE TO THE COMMUNITY

WHEREAS, the Board of Directors of the El Camino Healthcare District values and wishes to recognize the contribution of individuals who serve the District’s community as well as individuals who exemplify the El Camino Healthcare District’s mission and values.

WHEREAS, the Board wishes to honor and recognize On-Site Dental Care Foundation for providing comprehensive oral health services for vulnerable community members in Mountain View and Sunnyvale.

WHEREAS, The El Camino Healthcare District and On-Site Dental Care Foundation began a partnership in fiscal year 2021 for oral health services for homeless, low-income seniors, undocumented immigrants, uninsured individuals and low-income families.

WHEREAS, the Board acknowledges On-Site Dental Care Foundation for its commitment to providing comprehensive oral health services for vulnerable community members in Mountain View and Sunnyvale. Through this grant program, On-Site Dental Care Foundation has served more than 1,100 individuals in the community with over 4,000 services.

NOW THEREFORE BE IT RESOLVED that the Board does formally and unanimously pay tribute to:

On-Site Dental Care Foundation

IN WITNESS THEREOF, I have here unto set my hand this **18 DAY OF MARCH, 2025**.

EL CAMINO HEALTHCARE DISTRICT BOARD OF DIRECTORS:

Peter C. Fung, MD • Julia E. Miller • Carol A. Somersille, MD

George O. Ting, MD • John Zoglin

JOHN ZOGLIN
SECRETARY/TREASURER
EL CAMINO HEALTHCARE DISTRICT BOARD OF DIRECTORS





EL CAMINO HEALTHCARE DISTRICT BOARD MEETING COVER MEMO

To: El Camino Healthcare District Board of Directors
From: Carlos A. Bohorquez, Chief Financial Officer
Date: March 18, 2025
Subject: YTD FY2025 Financial Update (as of 1/31/2025)

Purpose:

To approve the Consolidated and Stand-Alone (District) Financials for YTD FY2025 (as of 1/31/2025).

Executive Summary – Consolidated Enterprise Financials (as of 1/31/2025):

Patient activity / volumes remain consistent across the enterprise which has yielded stable financial results through the first seven months of FY2025. The following are key financial KPIs:

Net Patient Revenue (\$):	\$951 million which is favorable to budget by \$34 million / 3.7% and \$96 million / 11.2% higher than in the same period last year.
Total Operating Revenue (\$):	\$991 million is favorable to budget by \$33 million / 3.4% and \$94 million / 10.5% higher than in the same period last year.
Operating Income (\$):	\$100 is favorable to budget by \$21 million / 21.0% and \$10 million / 11.1% higher than the same period last year.
Net Income (\$):	\$194 million is favorable to budget. Favorable net income is primarily attributed to unrealized gains in the investment portfolio.
Balance Sheet (\$):	In the first seven months of FY2025 the net position increased by \$201 million.

Executive Summary – Stand-Alone (District) Financials (as of 1/31/2025):

Total Operating Revenue (\$):	\$17 million is unfavorable to budget by \$4 million / 18%. Unfavorable variance is attributed to timing of receipt of IGT and property tax funds.
Net Income (\$):	\$6 million is unfavorable to budget by \$3 million / 30%. Unfavorable variance is attributed delay in IGT and property tax funds.

Recommendation:

Recommend the District Board of Directors approve the Consolidated and Stand-Alone (District) YTD FY2025 financials.

List of Attachments:

1. Consolidated and Stand-Alone (District) Financials – YTD FY2025 (as of 1/31/2025)



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

**Board Finance Presentation
Fiscal Year 2025
7/1/2024-1/31/2025**

Carlos Bohorquez, CFO
El Camino Healthcare District Board of Directors Meeting
March 18, 2025

Table of Contents

ECHD Consolidated Financial Statements (Includes El Camino Hospital)

Comparative Balance Sheet as of January 31, 2025	Page 3
Statement of Revenues & Expenses Year to Date thru January 31, 2025	Page 4
Notes to Financial Statements.....	Page 5

ECHD Stand-Alone Financial Statements

Comparative Balance Sheet as of January 31, 2025	Page 6
Statement of Revenues & Expenses Year to Date thru January 31, 2025	Page 7
Statement of Fund Balance Activity as of January 31, 2025	Page 8
Notes to Financial Statements	Pages 9-10
Sources & Uses of Property Taxes	Page 11
Q & A	Page 12

NOTE: 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.



El Camino Healthcare District

Consolidated Comparative Balance Sheet (\$ Millions)

(Includes El Camino Hospital)

	Jan 31, 2025	June 30, 2024 Audited w/o Eliminations		Jan 31, 2025	June 30, 2024 Audited w/o Eliminations
ASSETS			LIABILITIES & FUND BALANCE		
Current Assets			Current Liabilities		
Cash & Investments	\$381	\$332	Accounts Payable & Accrued Exp ⁽⁵⁾	\$169	\$177
Patient Accounts Receivable, net	226	214	Bonds Payable - Current	3	14
Other Accounts and Notes Receivable	48	44	Bond Interest Payable	4	13
Inventories and Prepays	53	56	Other Liabilities	19	15
Total Current Assets	708	645	Total Current Liabilities	196	218
Board Designated Assets			Deferred Revenue	2	1
Foundation Reserves	18	23	Deferred Revenue Inflow of Resources	99	93
Community Benefit Fund	20	26	Long Term Liabilities		
Operational Reserve Fund ⁽¹⁾	212	212	Bond Payable	534	540
Workers Comp, Health & PTO Reserves	74	73	Benefit Obligations	36	36
Facilities Replacement Fund ⁽²⁾	620	565	Other Long-term Obligations	31	30
Catastrophic & Malpractice Reserve ⁽³⁾	44	35	Total Long Term Liabilities	601	605
Total Board Designated Assets	989	935	Fund Balance		
Non-Designated Assets			Unrestricted	2,971	2,790
Funds Held By Trustee ⁽⁴⁾	34	40	Minority Interest	(1)	(1)
Long Term Investments	703	669	Board Designated & Restricted	238	219
Other Investments	48	38	Capital & Retained Earnings	0	0
Net Property Plant & Equipment	1,332	1,327	Total Fund Balance	3,208	3,007
Deferred Outflows of Resources	43	43			
Other Assets	249	230			
Total Non-Designated Assets	2,408	2,346			
TOTAL ASSETS	\$4,105	\$3,925	TOTAL LIAB. & FUND BAL.	\$4,105	\$3,925



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

El Camino Healthcare District

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

Year-to-Date through January 31, 2025

(Includes El Camino Hospital)

	<u>Actual</u>	<u>Budget</u>	<u>Fav (Unfav) Variance</u>	<u>Prior YTD FY Actual</u>
Net Patient Revenue ⁽⁶⁾	951	917	34	855
Other Operating Revenues	40	41	(1)	42
Total Operating Revenues	991	958	33	897
Wages and Benefits	510	504	(6)	457
Supplies	133	132	(1)	120
Purchased Services	155	149	(6)	134
Other	34	34	(0)	37
Depreciation	49	50	1	48
Interest	10	10	0	10
Total Operating Expense ⁽⁷⁾	891	879	(12)	806
Operating Income	100	79	21	90
Non-Operating Income ⁽⁸⁾	94	44	50	74
Net Income	194	122	72	164



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 FY2025 Actual to Budget (Includes El Camino Hospital)

- 1) A 60 day reserve of expenses based on this fiscal year’s Hospital budget.
- 2) The current period Facilities Replacement Fund is comprised of (\$ Millions):

ECH Capital Replacement Fund (i.e. Funded Depr.)	\$515
ECH Women’s Hospital Expansion	46
ECHD Appropriation Fund (aka: Capital Outlay)	27
ECH Campus Completion Project	<u>32</u>
	<u>\$620</u>

- 3) The current period Catastrophic & Malpractice Fund is comprised of (\$ Millions):

ECH Catastrophic Fund (aka: Earthquake Fund)	\$42
ECH Malpractice Reserve	<u>2</u>
	<u>\$44</u>

- 4) Funds Held by Trustee now only reflect the GO funds of the District.
- 5) The difference is not significant.
- 6) The difference is not significant.
- 7) The difference is not significant.
- 8) The significant increase in non-operating income was due to great investment returns in the first half of the fiscal year.



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

	Audited			Audited	
	Jan 31, 2025	June 30, 2024		Jan 31, 2025	June 30, 2024
<u>ASSETS</u>			<u>LIABILITIES & FUND BALANCE</u>		
Cash & cash equiv ⁽¹⁾	\$18,296	\$28,310	Accounts payable	\$340	\$0
Short term investments ⁽¹⁾	14,548	533	Current portion of bonds	3,411	3,398
Due fm Retiree Health Plan ⁽²⁾	0	0	Bond interest payable ⁽¹⁰⁾	3,899	5,116
S.C. M&O Taxes Receivable ⁽³⁾	(680)	0	Other Liabilities	3,148	276
Other current assets ^(3a)	171	55			
Total current assets	\$32,335	\$28,898	Total current liabilities	\$10,798	\$8,790
Operational Reserve Fund ⁽⁴⁾	1,500	1,500			
Capital Appropriation Fund ⁽⁵⁾	27,324	24,574			
Capital Replacement Fund ⁽⁶⁾	5,607	5,607	Deferred income	107	57
Community Partnership Fund ⁽⁷⁾	1,704	8,501	Bonds payable - long term	95,517	98,942
Total Board designated funds	\$36,134	\$40,181	Total liabilities	\$106,422	\$107,789
Funds held by trustee ⁽⁸⁾	\$34,012	\$40,216	Fund balance		
Capital assets, net ⁽⁹⁾	\$10,641	\$10,644	Unrestricted fund balance	\$77,313	\$79,188
			Restricted fund balance	(70,613)	(67,038)
			Total fund balance ⁽¹¹⁾	\$6,700	\$12,150
TOTAL ASSETS	\$113,122	\$119,939	TOTAL LIAB & FUND BALANCE	\$113,122	\$119,939



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 December 31, 2024

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

	Actual	Current Year Budget	Variance	Prior Full Year Actual
REVENUES				
(A) Ground Lease Revenue ⁽¹²⁾	\$ 67	66	\$ 1	\$ 112
(B) Redevelopment Taxes ⁽¹³⁾	-	150	(150)	246
(B) Unrestricted M&O Property Taxes ⁽¹³⁾	8,905	10,228	(1,323) ←	11,048
(B) Restricted M&O Property Taxes ⁽¹³⁾	5,663	6,913	(1,250) ←	14,278
(B) G.O. Taxes Levied for Debt Service ⁽¹³⁾	1,575	3,733	(2,158) ←	7,920
(B) IGT/PRIME Medi-Cal Program ⁽¹⁴⁾	(948)	(1,750)	802	(6,093)
(B) Investment Income (net)	1,602	1,202	400	1,806
(B) Other income	-	-	-	-
TOTAL NET REVENUE	16,864	20,542	(3,678)	29,317
EXPENSES				
(A) Wages & Benefits ⁽¹⁵⁾	12	13	1	16
(A) Professional Fees & Purchased Svcs ⁽¹⁶⁾	740	531	(209)	470
(A) Supplies & Other Expenses ⁽¹⁷⁾	54	25	(29)	57
(B) G.O. Bond Interest Expense (net) ⁽¹⁸⁾	3,180	3,313	133	5,118
(B) Community Partnership Expenditures ⁽¹⁹⁾	6,797	7,963	1,166	7,473
(A) Depreciation / Amortization	3	3	-	5
TOTAL EXPENSES	10,786	11,848	1,062	13,139
NET INCOME	\$ 6,079	\$ 8,695	\$ (2,616)	\$ 16,177

(A) Operating Revenues & Expenses
 (B) Non-operating Revenues & Expenses

RECAP STATEMENT OF REVENUES & EXPENSE

(A) Net Operating Revenues & Expenses	\$ (742)
(B) Net Non-Operating Revenues & Expenses	6,820
NET INCOME	\$ 6,079



Note: Totals may not agree due to rounding. See page 10 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>Jan 31, 2025</u>	<u>June 30, 2024</u>
Fiscal year beginning balance	\$ 12,150	\$ 935
Net income year-to-date	\$ 6,079	\$ 16,177
Transfers (to)/from ECH:		
IGT/PRIME Funding ⁽²⁰⁾		\$ 6,167
Capital Appropriation projects ⁽²¹⁾	\$ (11,528)	(11,129)
Fiscal year ending balance	<u><u>\$ 6,700</u></u>	<u><u>\$ 12,150</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) **Cash & Short Term Investments** – The increase over June 30 is due to increased M&O taxes being received in the current year.
- (2) **Due from Retiree Health Plan** – The monies due from Trustee for District's Retiree Healthcare Plan.
- (3) **S.C. M&O Taxes Receivable** – The increase is due to accruing for M&O taxes to be received in subsequent months.
- (3a) **Other Current Assets** – The increase is not significant.
- (4) **Operational Reserve Fund** – Starting in FY 2014, the Board established an operational reserve for unanticipated operating expenses of the District.
- (5) **Capital Appropriation Fund** – The increase is due to the establishment of the year-end FY23 funding set aside for the completion of the MV Campus.
- (6) **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.
- (7) **Community Partnership Fund** – This fund retains unrestricted (Gann Limit) funds to support the District's operations and primarily to support its Community Partnership Programs.
- (8) **Funds Held by Trustee** – Funds from General Obligation tax monies, being held to make the debt payments when due.
- (9) **Capital Net Assets** - The land on which the Mountain View Hospital resides, a portion of the YMCA building, property at the end of South Drive (currently for the Road Runners operations), and a vacant lot located at El Camino Real and Phyllis.
- (10) **Bond Interest Payable** – The decrease is a timing issue and will increase in subsequent months to be comparable to the June 30 amount.
- (11) **Fund Balance** – The positive 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.



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*

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

(13) Taxes: Redevelopment, M&O, G.O. – Tax receipts during the period. G.O. Taxed Levied for Debt will catch up in January as the semi-annual disbursement will occur from the County.

(14) IGT/PRIME Expense – Payments in support of the PRIME or IGT programs.

(15) Wages & Benefits – Due to a new IRS reg that board stipends previously paid as reportable 1099 transactions are now considered to be W-2 reportable transactions, and reported in this section, where previously reported in the “Supplies & Other Expenses.” There will continue to be no other “employees” of the District. This change started in April 2022.

(16) Professional Fees & Services – Actual detailed below:

• Community Partnership Support from ECH (54% of SW&B)	\$ 209
• Santa Clara County Election	450
• Communications Support	56
• Newsletter Printing Services	22
• Other	<u>3</u>
	<u>\$ 740</u>

(17) Supplies & Other Expenses – Actual detailed below:

• Newsletter Postage	\$ 26
• LAFCO	18
• 2025 CSDA Membership	<u>10</u>
	<u>\$ 54</u>

(18) G.O. Bond Interest Expense – It is to be noted that on March 22, 2017 the District refunded \$99M of its remaining \$132M 2006 G.O. bond issue. Refunding of the 2006 G.O. debt, given current interest rates, caused a net present value savings of \$7M.

(19) Community Partnership Expenditures – Starting in FY2014, the District is directly operating its Community Partnership Program at the District level. This represents amounts expended to grantees and sponsorships thus far in this fiscal year. Note the major payments to recipients are made in August & January of the fiscal year.

(20) IGT/PRIME Funding – Transfers from ECH for participation in the PRIME or IGT program thus far in FY 2025.

(21) Capital Appropriation Projects Transfer – Net increase of last year transferred out and establishing current year.



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*

<u>Sources of District Taxes</u>	<u>1/31/25</u>
(1) Maintenance and Operation and Government Obligation Taxes	\$16,143
(2) Redevelopment Agency Taxes	-
Total District Tax Receipts	\$16,143
 <u>Uses Required Obligations / Operations</u>	
(3) Government Obligation Bond	1,575
Total Cash Available for Operations, CB Programs, & Capital Appropriations	14,568
(4) Capital Appropriation Fund – Excess Gann Initiative Restricted*	5,663
Subtotal	8,905
(5) Operating Expenses (Net)	742
Subtotal	8,163
(6) Capital Replacement Fund (Park Pavilion)	4
Funds Available for Community Partnership Programs	\$8,159
 *Gann Limit Calculation for FY2025	 \$10,946

- | | |
|---------------------------------------|--|
| (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) |



Q & A





EL CAMINO HEALTHCARE DISTRICT BOARD MEETING MEMO

To: El Camino Healthcare District Board of Directors
From: John Zoglin, District Board Director and Secretary/Treasurer
Date: March 18, 2025
Subject: ECHD Community Benefit Funds

Purpose or Recommendation:

To establish a consistent philosophy regarding unrestricted tax receipts received subject to Gann limitations that are allocated to El Camino Healthcare District Community Benefit ("Community Benefit") each year by El Camino Healthcare District ("ECHD") Board. Community Benefit shall include grants allocated by Community Benefit Advisory Council ("CBAC") and other programs which promote health for constituents of the District as approved the ECHD Board.

Possible Motion 1:

Until otherwise reviewed or changed, the full amount of ECHD's total annual appropriations subject to Gann limitations after expenses is to be allocated to Community Benefit each year.

In an initial transition period, increase Community Benefit annual expenditure 20% per year until the projected expenditure matches expected unrestricted tax revenue available.

Possible Motion 2

Given recent increased delta between ECHD Community Benefit funds budget and unrestricted tax monies available subject to Gann Limitations, second possible motion would be:

Over past decade, identify delta between:

- Unrestricted Tax monies available each fiscal year under Gann limitations, minus budgeted operating expenses
- Actual Community Benefit funds spent

These monies, also with calculation of return on capital, would be added to annual Community Benefit expenditures once equilibrium is reached whereby the Community Benefit plan is otherwise spending an amount equal to projected annual tax monies available subject to Gann limitations.

For example, if it takes until FY '28, by increasing 20% annually, for Community Benefit budget to match annual tax monies available (minus expenses), then these historic

ECHD Board Memo – ECHD Community Benefit Budget Allocation
March 18, 2025

monies would be available for Community Benefit investment starting at that point. CBAC team would need to calculate how best to invest these extra funds over subsequent 5 years.

ECHD Board would spend time with finance department ensuring these calculations, shown in draft form in attached table, are accurate come July, after budget process is complete.

Background:

ECHD balance sheet has historically high, unencumbered cash equivalent assets. Given historic and continuing operating strength of El Camino Hospital, ECHD Board has the opportunity to return to its historic approach, in action, if not formal policy, of reinvesting unrestricted tax monies up to the calculated Gann Limit allowed to be spent on Community Benefit programs.

This historic philosophy of spending all tax monies available after capital requirements is mentioned here in p. 2 of Community Benefit Plan presented in open session to El Camino Healthcare District Board at the June 19, 2012 board meeting.

El Camino Hospital District supports these programs and initiatives through funds it receives from an annual assessment levied on parcels within district boundaries, totaling about \$9 million each year. About \$4 million of that is budgeted for in-district hospital capital requirements. The balance is allocated by the District Board of Directors to fund the ongoing Community Benefit Program. These funds are administered by El Camino Hospital. El Camino Hospital funds Community Benefit Programs outside the district which is described in a separate document.

For illustration: The FY '25 annual appropriations subject to limitations is: \$11,449,782 (p. 62 of 6/18/24 ECHD meeting)*. This is the calculated increase available based on data received in May 1 letter from CA Department of Finance. If there is a 3% increase, then total would be roughly \$11.8M. However, since FY '25 Community Benefit budget is \$8.05M, the total anticipated under the first motion for FY '26 would increase 20% to roughly \$9.6M.

The amount that is underspent from the maximum, possibly \$11.8M - \$9.6M = \$2.2M this year would be separately identified and the amount plus interest earned would ultimately be spent on Community Benefit.

Attachment: El Camino Healthcare District Budget and Gann Calculation (2018 – 2024)

**El Camino HealthCare District
Budget and Gann Calculation
Budget years 2018 - 2024**

		= (A+B+C)	A	B	C	D	E	= (C-D-E)
FY	Gann Calculation for ECHD Operational Expenses	Total Projected Tax Receipts	Projected Capital	Budgeted Operating Expenses	Total available for CBAC	Budgeted to be Spent on CBAC	COVID Funds	Tax Funds Remaining
2024	\$ 11,047,648	\$ 23,797,000	\$ 11,850,000	\$ 422,000	\$ 11,525,000	\$ 7,950,000		\$ 3,575,000
2023	\$ 10,601,332	\$ 20,734,000	\$ 10,901,000	\$ 744,000	\$ 9,089,000	\$ 7,665,000		\$ 1,424,000
2022	\$ 9,804,247	\$ 18,821,000	\$ 9,017,000	\$ 494,000	\$ 9,310,000	\$ 7,665,000	\$ 1,200,000	\$ 445,000
2021	\$ 9,221,451	\$ 18,821,000	\$ 9,300,000	\$ 943,000	\$ 8,578,000	\$ 7,665,000	\$ 1,200,000	\$ (287,000)
2020	\$ 8,844,668	\$ 16,500,000	\$ 7,654,000	\$ 804,000	\$ 8,042,000	\$ 7,800,000		\$ 242,000
2019	\$ 8,429,113	\$ 16,885,000	\$ 8,300,000	\$ 1,033,000	\$ 7,552,000	\$ 7,000,000		\$ 552,000
2018	\$ 8,024,670	\$ 17,340,000	\$ 5,620,000	\$ 923,000	\$ 10,797,000	\$ 7,000,000		

Note: Budget package was wrong



EL CAMINO HEALTHCARE DISTRICT BOARD MEETING COVER MEMO

To: El Camino Healthcare District Board of Directors
From: George O. Ting, MD, Chair
Date: March 18, 2025
Subject: Board Compensation: Compliance with California Health and Safety Code § 32103

Purpose:

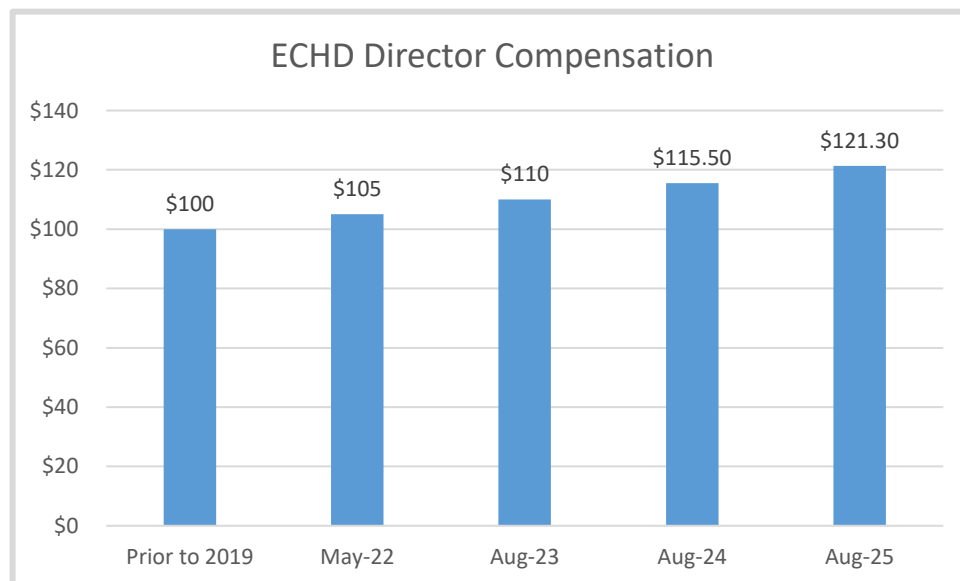
El Camino Healthcare District (“District”) is currently in compliance with the California Health and Safety Code § 32103 by adopting a resolution authorizing board member compensation of \$115.50 per meeting on May 21, 2024. The purpose today is to inquire if the Board desires to propose a 5% annual increase in compensation. This increase would bring board member compensation to \$121.30 per meeting effective August 2025.

Possible Motion:

To direct staff to (1) work with counsel to draft a resolution, (2) publish a notice of public hearing in a newspaper of general circulation, and (3) set a date for the Board to conduct the public hearing to adopt a resolution in accordance with the procedures for being compliant with California Health and Safety Code § 32103(b).

Summary:

- Situation:** Effective January 1, 2019, California Health and Safety Code § 32103 was amended to permit, but not require, healthcare districts to increase the number of meetings in a calendar month to a maximum of five (the Board must make findings if more than 5 meetings per month are required for the effective operations of the district”), the amount of compensation received by district board members for attending meetings of the board of directors by no more than five percent (5%) annually. The code continues to permit allowed necessary traveling and incidental expenses incurred in the performance of official business of the district as approved by the board.



Board Compensation Increase: Compliance with Health and Safety Code § 32103

March 18, 2025

2. **Background:** In accordance with the District's Compensation and Reimbursement Policy, District Board members are currently eligible to receive a stipend in the amount of One Hundred Fifteen Dollars and Fifty Cents (\$115.50) for attendance at District Board and District Board committee meetings for up to five (5) meeting per month. Assembly Bill 2329 (2018) amended California Health and Safety Code § 32103 to allow the Board, by resolution adopted pursuant to the procedure set forth in the Water Code, to increase the stipend by up to five percent (5%) annually. The Water Code procedures require that the Board authorize staff to circulate notice of a public hearing in a newspaper of general circulation once a week for two successive weeks, with at least five (5) days intervening between publication dates. The resolution can be adopted following the newspaper notices and a public hearing and will become effective sixty (60) days after it passes, assuming that the voters have not petitioned for referendum.
3. **Assessment:** Below please find a summary of the steps to be completed if the Board votes to increase compensation or meetings in accordance with the California Health and Safety Code § 32103:
 - Current Board meeting (March 18, 2025) – The Board reviews a draft resolution and draft notice of public hearing and approves for the notice to be published once a week for two successive weeks in a newspaper of general circulation. If approved, the notice of public hearing is published.
 - Future Board meeting (May 20, 2025) – The public meeting takes place and, if approved, the Board passes the resolution. The resolution (and pay increase) becomes effective sixty (60) days thereafter.
 - Within that sixty (60) day period, the voters have the right to petition for a referendum of the resolution. If a petition is presented to the Board prior to the sixtieth (60th) day, the resolution is suspended and the Board will need to reconsider it. The Board can either repeal the resolution or submit the resolution to the voters at a regular or special election. The resolution will pass if it receives a majority vote in favor of it.
 - If the district desires to compensate its member for more than five meetings in a calendar month, the board of directors shall annually adopt a written policy describing, based on a finding supported by substantial evidence, why more than five meetings per month are necessary for the effective operation of the district.
4. **Outcomes:** If the resolution increasing the meeting stipend is adopted and becomes effective as described above, we will ask staff to bring further revisions to the El Camino Healthcare District Board Director Compensation and Reimbursement Policy to a future meeting.

List of Attachments:

- Attachment A – Sample form of Notice of Public Hearing Regarding Board Compensation
- Attachment B - DRAFT Resolution of the Board of Directors Regarding Increasing Compensation for Members of the Board of Directors



Attachment A

NOTICE OF PUBLIC HEARING

EL CAMINO HEALTHCARE DISTRICT

REGARDING BOARD MEMBER COMPENSATION

Pursuant to California Health and Safety Code Section 32103, the Board of Directors of El Camino Healthcare District will hold a Public Hearing to receive public comment and consider adoption of a resolution increasing Board member compensation from One Hundred Fifteen Dollars and Fifty Cents (\$115.50) per day to One Hundred Twenty-One Dollars and Thirty Cents (\$121.30) per day for attendance at a meeting of the Board.

The Public Hearing will be held on May 20, 2025 at 5:30 PM PST at El Camino Hospital, Sobrato Boardroom 1, 2500 Grant Road, Mountain View, CA 94040 or by teleconference at +16699009128,,99180905651#.

The public is invited to attend and provide oral and/or written comments. Written comments must be received at or prior to the meeting time and date. A copy of the proposed resolution is available for review in the public bulletin posting area located at El Camino Hospital, 2500 Grant Road, Mountain View, CA 94040 or by accessing the District's website at <https://www.elcaminohealthcaredistrict.org/>.

Published pursuant to California Government Code Section 6066.



Attachment B

**PROPOSED RESOLUTION NO.
2025-XX**

**RESOLUTION OF EL CAMINO HEALTHCARE DISTRICT
BOARD OF DIRECTORS REGARDING INCREASING
COMPENSATION FOR MEMBERS OF THE BOARD OF
DIRECTORS**

WHEREAS, Health and Safety Code Section 32103(b) authorizes the Board of Directors of El Camino Healthcare District to increase the amount of compensation received for attending meetings of the Board of Directors by no more than five percent (5%) annually by a resolution adopted pursuant to Chapter 2 (commencing with Section 20200) of Division 10 of the Water Code (Wat. Code, §§ 20200 et seq.); and

WHEREAS, Water Code Section 20200 et seq. sets forth the authority and procedure for establishing compensation for the Board of Directors;

WHEREAS, Water Code Section 20202 authorizes an increase in the amount of compensation that may be received by Directors by no more than five percent (5%) annually following a public hearing;

WHEREAS, Water Code Section 20203 requires that notice of the public hearing be published in a newspaper of general circulation pursuant to Section 6066 of the Government Code;

WHEREAS, Government Code Section 6066 requires that notice of the public hearing be published once a week for two (2) successive weeks, with at least five (5) days intervening between publication dates;

WHEREAS, pursuant to Water Code Section 20204, a resolution adopted pursuant to Chapter 2 of Division 10 of the Water Code shall become effective sixty (60) days from the date of its final passage;

WHEREAS, pursuant to Water Code Section 20204, the voters of El Camino Healthcare District shall have the right, as provided in Chapter 2 of Division 10 of the Water Code, to petition for referendum on any resolution adopted pursuant to such chapter;

WHEREAS, pursuant to Water Code Section 20205, if a petition protesting against the adoption of the resolution is presented to the Board of Directors prior to the effective date of the resolution, the resolution shall be suspended and the Board of Directors shall reconsider the resolution;

WHEREAS, pursuant to Water Code Section 20206, if the Board of Directors does not repeal the resolution against which a petition is filed, the Board of Directors shall submit the resolution to the voters at a regular election or a special election called for the purpose, and the

resolution shall not become effective unless and until a majority of the votes cast at the election are cast in favor of it;

WHEREAS, the compensation for the Board of Directors is currently One Hundred Fifteen Dollars and Fifty Cents (\$115.50) per day of service for each Director; and

WHEREAS, the Board of Directors desires to increase the amount of compensation for Directors by up to five percent (5%) in accordance with the provisions of the Chapter 2 of Division 10 of the Water Code.

WHEREAS, in accordance with Section 20203 of the Water Code and Section 32103(b) of the Health and Safety Code, a public hearing was held on May 20, 2025 at 5:30 PM PST at El Camino Hospital, Sobrato Boardroom 1, 2500 Grant Road, Mountain View, CA 94040 or by teleconference at +16699009128,,99180905651# and a notice of said hearing was duly published in the **[**NEWSPAPER**]**, a newspaper of general circulation, once a week for two weeks as follows: on **[**INSERT DATE**]**, 2025 and **[**INSERT DATE**]**, 2025.

NOW, THEREFORE, THE BOARD OF DIRECTORS OF EL CAMINO HEALTHCARE DISTRICT DOES HEREBY RESOLVE AS FOLLOWS:

Section 1. The above recitals are true and correct and are hereby incorporated herein by this reference.

Section 2. The amount of compensation to be received by Directors for each day's attendance at meetings of the Board of Directors, or for each day's service rendered by a Director by request of the Board of Directors, shall be in the amount of One Hundred and Twenty One Dollars and Thirty Cents (\$121.30) per day for as many days per month as is lawful.

Section 3. All resolutions, or administrative actions by the Board of Directors, or parts thereof, that are inconsistent with any provision of this resolution are hereby superseded only to the extent of such inconsistency.

Section 4. The Chairperson of the Board of Directors shall sign this resolution and the Secretary of the Board of Directors shall attest thereto, and pursuant to Section 20204 of the Water Code, this resolution shall take effect sixty (60) days from the date of adoption.

PASSED, APPROVED, AND ADOPTED this 20th day of May, 2025, by the Board of Directors of El Camino Healthcare District.

George O. Ting, MD
Chairperson of the Board of Directors of
El Camino Healthcare District

[Continued on the following page]

ATTEST:

John Zoglin
Secretary/Treasurer of the Board of Directors
of El Camino Healthcare District

I, John Zoglin, Secretary/Treasurer of the Board of Directors of El Camino Healthcare District, DO HEREBY CERTIFY that the foregoing resolution regarding compensation for members of the Board of Directors of El Camino Healthcare District, was adopted at a regular meeting on May 20, 2025 of said District by the following vote:

AYES:
NOES:
ABSTAIN:
ABSENT:

Secretary/Treasurer

(Seal)



EL CAMINO HEALTHCARE DISTRICT BOARD OF DIRECTORS MEETING MEMO

To: El Camino Healthcare District Board of Directors
From: Theresa Fuentes, Chief Legal Officer
Date: March 18, 2025
Subject: ECHD Records Retention Policy

Recommendation: Adopt ECHD Resolution 2025-03 Policy 7 Retention and Disposition of District Records

Summary:

California Government Code sections 60200 to 60203 outline certain requirements for retention and destruction of district records.

In general, staff follow the El Camino Hospital Retention and Destruction of Organizational Records Policy ("hospital policy") for both hospital and district records. The hospital policy is attached to this memo for informational purposes.

There are certain categories of records that are required by law to be maintained by the district that may not be specifically addressed in the hospital policy. Moreover, California Government Code section 60201 states that the governing body of a special district may authorize retention and disposition of records by adopting a resolution authorizing the disposition of records that will not adversely affect any interest of the district or the public. For these reasons, we recommend that the district through a resolution adopt the proposed policy that specifically incorporates both the hospital policy and the requirements of Government Code sections 60200-60203.

The proposed Policy 7 Retention and Disposition of District Records is based on the template model prepared by the California Special Districts Association, the statutory language contained in California Government Code sections 60200-60203, and the hospital policy retention requirements.

There is one particular item highlighted in section 7.5 of the proposed policy for the board's consideration. While the law requires that district board meeting minutes be retained indefinitely, there is no requirement to retain recording tapes (or other media) of board meetings beyond the 30 days required by the Brown Act.

The CSDA template provides for districts to destroy recordings after one year, which we understand is a widely adopted approach among districts. The one-year period strikes a balance between transparency and practical storage limitations and also complies with

ECHD Board Memo – Records Retention Policy
March 18, 2025

the ACHD certification requirements to have 12 months of board meeting information available online, including minutes, agendas, and related materials.

In addition, staff polled counterparts at other healthcare districts to see how long those districts retained meeting recordings on their websites and received varying information, ranging from no videos, to 30 days, to 1 year, to indefinitely.

Historically the El Camino Healthcare District has maintained at least 4-5 years of recordings available on its website and currently has recordings dating back to 2017. Questions have arisen about storage limitations and the feasibility of retaining recordings indefinitely if there is no policy authorizing their disposition.

This proposed policy establishes guidelines for the retention, management, and lawful disposal of agency records, ensuring compliance with state law while balancing transparency, accountability, and administrative efficiency. The policy defines retention schedules for various document types and provides structured procedures for record disposal, minimizing risks associated with outdated or unnecessary records.

Adopting this policy will support best practices in records management, reduce storage costs, and enhance compliance with public records laws, aligning with the agency's commitment to responsible governance.

List of Attachments:

1. DRAFT ECHD Policy 7 – Retention and Disposition of District Records
2. DRAFT Resolution 2025-03 – Adopting Policy 7 – Retention and Disposition of District Records
3. FOR INFORMATION ONLY: El Camino Hospital Retention and Destruction of Organizational Records Policy



ECHD Policy 7 –Retention and Disposition of District Records

7.0 Purpose. The purpose of this policy is to: provide guidelines to staff regarding the retention or disposal of El Camino Healthcare District (“District”) records; provide for the identification, maintenance, safeguarding and disposal of records in the normal course of business; ensure prompt and accurate retrieval of records; and ensure compliance with legal and regulatory requirements (“District Records Policy”).

7.1 Establishment of Retention Period. Unless otherwise stated herein, District records shall be retained and disposed in accordance with the applicable retention periods specified in the El Camino Hospital Retention and Destruction of Organization Records policy (“Hospital Records Policy”). To the extent that the Hospital Records Policy conflicts with the requirements of this District Records Policy, the District Records Policy controls.

Reasonable retention periods for each category of records is based upon their immediate and future usefulness of each category of records to the District. Retention periods should be assigned to records based on the principle that records should be retained only as long as they serve the immediate administrative, fiscal, historic, operational, historical, or legal purpose for which they were created, and that such categories of records should be disposed of when they no longer serve such purposes.

7.2 Responsibility. The CEO is authorized by the Board of Directors to interpret and implement this policy and to cause to be destroyed any or all such records, papers and documents that meet the qualifications governing the retention and disposal of records, as specified below.

7.3 Authority. California Government Code §§60200 through 60203, and the guidelines prepared by the Secretary of State and the State Controller's Office. Legal authorities for specific categories of records as cited in the Hospital Records Policy.

7.4 General Guidelines. The following general guidelines apply to all District records:

7.4.1 Duplicate records, papers and documents may be destroyed at any time without the necessity of Board authorization or copying to photographic or electronic media.

7.4.2 Except where a record is expressly required to be preserved according to State or Federal law, originals of records more than two years old may be destroyed without the necessity of copying to photographic or electronic media, as long as the retention and destruction of the document complies with this policy and the Hospital Retention Policy.

7.4.3 In addition to the retention periods required under this policy, the District shall retain original administrative, legal, fiscal and/or historical records with continued value (i.e., pending litigation, special projects, long term transactions, etc.) until all matters pertaining to such records are completely resolved or the time for appeals has expired.

7.4.4 Pursuant to the provisions of Government Code section 60201, the District **may not destroy or dispose of any record that is any of the following:**



- a. Relates to the formation, change of organization, or reorganization of the District.
- b. An ordinance adopted by the District. However, an ordinance that has been repealed or is otherwise invalid or unenforceable may be destroyed or disposed of pursuant to this policy five years after it was repealed or because invalid or unenforceable.
- c. Minutes of any meeting of the legislative body of the District.
- d. Relates to any pending claim or litigation or any settlement or other disposition of litigation within the past two years.
- e. Is the subject of any pending request made pursuant to the California Public Records Act, whether or not the District asserts the record is exempt from disclosure, until the request has been granted, or two years have elapsed since the District provided written notice to the requestor that the request has been denied.
- f. Relates to any pending construction that the District has not accepted or as to which a stop notice claim legally may be presented.
- g. Relates to any non-discharged debt of the District.
- h. Relates to the title to real property in which the District has an interest.
- i. Relates to any non-discharged contract to which the District is a party.
- j. Has not fulfilled the administrative, fiscal, or legal purpose for which it was created or received.
- k. Is the unaccepted bid or proposal, which is less than two years old, for the construction or installation of any building, structure, or other public work.
- l. Specifies the amount of compensation paid to District employees or officers or to independent contractors providing personal or professional services to the District, or relates to expense reimbursement to District officers or employees or to the use of District paid credit cards or any travel compensation mechanism. However, a record described herein may be destroyed or disposed of seven years after the date of payment.

7.4.5. Notwithstanding the above, any record, paper, or document that is not required by law to be filed and preserved may be destroyed if all of the following conditions are met. For purposes of the records listed in this section 7.4.5, every reproduction is deemed to be an original record and a transcript, exemplification, or certified copy of any reproduction shall be deemed to be a transcript, exemplification, or certified copy, as the case may be, of the original.



7.4.5.1. The record, paper or document is photographed, microphotographed, reproduced by electronically recorded video images on magnetic surfaces, recorded in the electronic data processing system, recorded on optical disk, reproduced on film or any other medium that is a trusted system and that does not permit additions, deletions, or changes to the original document in compliance with government Code section 12168.7 for recording of permanent records or nonpermanent records.

7.4.5.2 The device used to reproduce such record, paper or document on film, optical disk, or any other medium is one that accurately reproduces the original thereof in all details and that does not permit additions, deletions, or changes to the original document images; and,

7.4.5.3 The photographs, microphotographs, or other reproductions on film, optical disk, or any other medium are placed in conveniently accessible files and provisions are made for preserving, examining, and using the files.

7.5 Minutes. Minutes of the meetings of the Board of Directors are usually retained indefinitely in their original form. However, they may upon authorization be destroyed if said minutes are microfilmed as provided for in this policy. **Recording tapes (or other media) of Board meetings will be kept for a period of one year from the date of the recorded meeting, after which they will be destroyed.**

Adopted March 2025



**EL CAMINO HEALTHCARE DISTRICT
RESOLUTION 2025-03**

WHEREAS, California Government Code sections 60200 to 60203 authorize local agencies to establish policies and procedures for the retention, destruction, and management of public records in accordance with applicable legal and administrative requirements; and

WHEREAS, an effective records retention policy ensures that the agency maintains public records for the appropriate duration to comply with legal obligations, operational needs, and historical preservation; and

WHEREAS, the adoption of a comprehensive records retention policy will promote efficiency, reduce unnecessary storage costs, and enhance compliance with state laws governing public records management and disposal; and

WHEREAS, the policy will define retention schedules for various types of records, establish procedures for secure disposal, and ensure transparency and accountability in record-keeping practices;

WHEREAS, the policy for destruction or disposition of records will not adversely affect any interest of the district or of the public.

NOW, THEREFORE, BE IT RESOLVED that the Board of Directors of the El Camino Healthcare District does hereby adopt District Policy 7 – Retention and Disposition of District Records.

DULY PASSED AND ADOPTED by the El Camino Healthcare District Board of Directors at a regular meeting held on March 18, 2025, by the following votes:

AYES:

NOES:

ABSENT:

ABSTENTIONS:

John Zoglin
Secretary, El Camino Healthcare District

Status **Active** PolicyStat ID **16122226**

Origination 04/2003
 Last Approved 09/2024
 Effective 09/2024
 Last Revised 09/2024
 Next Review 09/2027

Owner Diane Wigglesworth:
 VP, Compliance
 Area Corporate Compliance
 Document Procedure
 Types

Retention and Destruction of Organization Records

COVERAGE:

All El Camino Health staff, physicians, and Board Members

PURPOSE:

To document the legally and logistically appropriate record retention periods for Records created and received at El Camino Health facilities. Also, to maintain effective and cost-efficient management techniques in the retention and destruction of all Records in accordance with all applicable state and federal laws and regulations.

Many factors have been taken into consideration in the creation of this procedure, including legal requirements, frequency of use, clinical or fiscal pertinence of records, space constraints, specific department needs, technological advancements, and historical or research uses for records.

STATEMENT:

- It is the procedure of El Camino Health that all Records be retained in accordance with applicable: (1) Federal, State and/or local law and regulation; (2) statutes of limitation; and/or (3) contractual requirements.
- Each department is responsible for developing appropriate controls, systems, and processes to ensure that Records are either retained or appropriately destroyed according to the guidance provided by California Hospital Association or government regulations in the Record and Data Retention Schedule in Attachment "A."
- Records should never be destroyed without first verifying that the minimum recommended retention period has been met and litigation is not pending. Documents that are part of the Legal Medical Record require internal approval prior to the destruction of data by Health

Information Management.

- If a litigation notice is received for certain records, Legal or Risk Management will issue a notice to the affected department(s) with specific guidance relative to the retention of Records until such matter is completed.

DEFINITIONS:

- **Records:** Any paper /electronic document, record, information, or data that a hospital may generate or receive.
- **Medical Records:** Medical or patient health records include clinical data as well as patient demographics, clinical research, imaging (i.e., radiology films), and financial data.
- **Email Communications:** Messages, calendar invites, and documents transmitted by email are similar to paper documents. They may be considered business records and, to that extent, are subject to this procedure. Emails and calendar invites that are considered transitory are not subject to formal retention schedules.
- **Transitory Records:** Transitory Records include duplicate copies of correspondence, duplicate copies of records used for short-term reference purposes, blank forms, stocks of publications, magazines, publications from professional organizations, newspapers, public telephone directories, and transitory messages mainly used for informal communication of information. Transitory messages may include but are not limited to, email for purposes of team communication and collaboration tool (e.g., Slack) messages with short-lived or no administrative value and telephone messages. Transitory records are not subject to formal retention schedules.
- **SharePoint:** Microsoft SharePoint is a web-based collaborative platform that enables organizations to manage and share information, documents, and resources within a secure and structured environment.

REFERENCES:

- California Department of Health Care Services Stats 2017, Ch511, Sec. 25 (AB 1688)
- California Hospital Association Record and Data Retention Schedule 2018
- False Claims Act Statute of Limitations
- Title 22, California Code of Regulations, Section 51476

PROCEDURE:

- A. El Camino Health shall maintain medical records for a minimum of ten (10) years following patient discharge/visit, except for minors. Records of minors must be maintained for at least twenty-five (25) years following patient discharge/visit according to the California Department of Health Care Services (DHCS) [AB 1688 (Chapter 511, Statutes of 2017)].
- B. Email systems facilitate both internal and external business communications on a day-to-day basis. Messages and calendar invites contained on email systems should be kept for no more than two (2) years. Email systems, therefore, should not be considered or used as an information storage system. If the email message is required to be retained due to its content, then messages may be kept in electronic form and should be saved on the hospital network

for up to five (5) years or printed and filed along with other documents related to the same topic or project. An email that contains no substantive business communication, such as invitations to lunch and responses to such, should be routinely discarded.

- C. Secure text messaging (e.g., Epic Secure Chat) or instant messaging (e.g., Epic Chat Box) applications currently used for secure communication of sensitive information, including PHI, are not included in the medical record. This medium is treated the same as verbal communication (e.g., phone calls and face-to-face) and is not retained beyond the 7-day retention period set within the application.
- D. Electronic documents or video sessions (e.g., Zoom), when recorded, will be treated as if they are paper documents. Therefore, any electronic/video files that fall into one of the document types in the Record and Data Retention Schedule (See Attachment A) will be maintained for the appropriate time outlined.
- E. Security Camera footage is maintained for a maximum of 30 days and is then destroyed and not recoverable.
- F. The minimum recommended retention period for each category of records is outlined in the Record and Data Retention Schedule (See Attachment A).
- G. If a document is not specifically listed in this procedure, it is recommended that the retention period for a similar document, or for a document required for a similar purpose, be used.

H. Retention:

1. All El Camino Health staff and physicians shall adhere to the retention periods outlined in the Record and Data Retention Schedule attached and shall be responsible for ensuring the security, privacy, and confidentiality of all records, as required by law.
2. Sharepoint site owners are responsible for the security and access to the documents within their sites. They must ensure an appropriate level of security is granted to only those who need access to the information in order to do their jobs and coordinate work. Sharepoint is not a long-term documentation storage site and any documents that need to be maintained or archived for more than 2 years should be stored with the appropriate applications and/or systems. Files in Sharepoint will be deleted after 6 years and will no longer be accessible.

I. Destruction:

1. Each department shall develop a destruction schedule relating to the Records for which they are responsible. The destruction method should render the destroyed Records unreadable (e.g., disposal into a shredder or specific, secure container for Records destined for shredding) or undecipherable.
2. Disposal of patient medical records and imaging will be coordinated with the Health Information Management Department prior to destruction.
3. Centralized email backup is maintained by Information Technology/Security department. Email business records older than five years (except in the cases of litigation holds or compliance investigations, etc.) will be permanently removed from El Camino Health systems by an appropriate representative designated by Information Technology /Security after consultation with Legal.

4. See Record and Data Retention Schedule in Attachment A to determine when to dispose of certain records. Records should be destroyed as soon as the recommended retention period is passed, except for records subject to litigation holds.

NOTE: Printed copies of this document are uncontrolled. In the case of a conflict between printed and electronic versions of this document, the electronic version prevails.

Attachments

[Attachment A - Retention and Destruction of Organization Records.docx](#)

Approval Signatures

Step Description	Approver	Date
Publish	Patrick Santos: Policy and Procedure Coordinator	09/2024
MEC	Michael Coston: Director Quality and Public Reporting [PS]	09/2024
ePolicy Committee	Patrick Santos: Policy and Procedure Coordinator	07/2024
Compliance Board	Diane Wigglesworth: Compliance and Privacy Officer	06/2024
	Diane Wigglesworth: Compliance and Privacy Officer	06/2024



**EL CAMINO HEALTHCARE DISTRICT
BOARD MEETING MEMO**

To: El Camino Healthcare District Board of Directors
From: George Ting, M.D., Board Chair
Date: March 18, 2025
Subject: Appointment of FY26 El Camino Hospital Board Member Election Ad Hoc Committee

Purpose:

To inform the Board of the appointment of _____ as the FY26 El Camino Hospital Board Member Election Ad Hoc Committee Chair and get approval on remaining members of the Ad Hoc Committee.

Summary:

As part of our established Process for Election and Re-Election of Non-District Board Members (NDBMs) to the El Camino Hospital (ECH) Board of Directors, we convene an Ad Hoc Committee every year, typically in Q1. The primary function of this committee is to review, evaluate, and make informed recommendations concerning the election and re-election of NDBMs to the ECH Board.

Please be advised that two NDBM seats are set to expire in June 2026. The forthcoming Ad Hoc Committee will initially ascertain the interest of the current Director in continuing their service. Following this, the committee will convene to discuss and subsequently provide recommendations on whether reappointment should be pursued.

**EL CAMINO HEALTHCARE DISTRICT
RESOLUTION 2025-04
APPOINTMENT OF SPECIAL ADVISORY COMMITTEE FOR
LIMITED PURPOSE AND LIMITED DURATION**

WHEREAS, the Board of Directors has determined it is necessary to carefully consider and prepare for the reappointment or appointment of Directors to the El Camino Hospital Board,

WHEREAS, such work can be undertaken by a special advisory committee for presentation to and consideration by the Board of Directors at a future meeting; now, therefore, be it.

RESOLVED, that a temporary advisory special committee (“The El Camino Hospital Board Member Reappointment Ad Hoc Committee”), consisting of two members is hereby established pursuant to Article VII, Section 1 of the Bylaws of the El Camino Healthcare District, to carefully consider and prepare for the FY 2026 appointment or reappointment of one or more Directors to the El Camino Hospital Board.

RESOLVED, that the members of the temporary advisory special committee shall determine the time, place, date, and frequency of such committee meetings; be it further.

RESOLVED, that _____ is appointed as Chair of the temporary advisory special committee; be it further

RESOLVED, that _____, shall also serve as a member of the committee having been appointed by the El Camino Healthcare District Board of Directors; be it further

DULY PASSED AND ADOPTED at a regular meeting held on March 18, 2025, by the following votes:

AYES:

NOES:

ABSENT:

ABSTAIN:

John Zoglin, Secretary
ECHD Board of Directors



**El Camino Healthcare District Board of Directors
Site Visit Meeting Minutes**

Friday, February 7th, 2025

**Mountain View Campus of Los Altos United Methodist Church | 748 Mercy Street,
Mountain View, CA 94041**

Board Members Present

George Ting, MD, Chair
Carol A. Somersille, MD,
 Vice Chair (*left the meeting @
 3:50 p.m.*)
John Zoglin, Secretary/
 Treasurer
Julia E. Miller

Others Present

Jon Cowan, Executive Director,
 Government Relations and
 Community Partnerships
Gabriel Fernandez, Coordinator,
 Governance Services
Arielle Bonifacio Hernandez, Sr.
 Community Partnerships Specialist

Others Present (cont.)

John Riemenschmitter, President
Maddy Locke, Corporate
 Development Manager
Dave Arnone, Hope's Corner Board
 Member
Phil Marcoux, Hope's Corner Board
 Member
Shari Kipp, Hope's Corner Board
 Member
Mike Hacker, Grant Writer, and
 Hope's Corner Board Member
**via teleconference*

Board Members Absent

Peter C. Fung, MD

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	Chair Ting called to order the open session of the Special Site Visit Meeting of the El Camino Healthcare District Board of Directors (the "Board") at 3:03 pm and reviewed the logistics for the meeting. A verbal roll call was taken; Directors Miller, Ting, Somersille, and Zoglin were present, constituting a quorum. Director Fung was absent.	<i>Meeting Called to Order at 3:03 pm.</i>
2. PUBLIC COMMUNICATION	Chair Ting asked if there were any members of the public with comments for any items not listed on the agenda. There were no members of the public present.	
3. BOARD AND TEAM INTRODUCTIONS	Mr. Riemenschmitter introduced members of the Hope's Corner staff to the District Board and accompanying El Camino Health staff.	
4. SITE TOUR	The Hope's Corner Staff led a site tour of the facility and the various services available to community members. They also highlighted key milestones that the organization has achieved in assisting the community.	
5. GRANT PARTNER PRESENTATION	The Hope's Corner staff presented the work and history of the organization. Staff shared that the organization began as a collaborative effort between Mountain View Trinity and Los Altos United Methodist Churches and is supported by volunteers from various faith communities, service organizations, and the local community. Staff continued to share the various initiatives in place to offer nutritious meals to homeless, low-income, and vulnerable individuals in the community. The organization provides meals without prerequisites, with takeaway	

	<p>breakfasts available on Mondays and Wednesdays, sit-down breakfasts on Saturdays, and to-go lunches accompanying all breakfasts. Additionally, hot meals and lunches are delivered to RV residents on Wednesdays and Saturdays, and meals are available for pickup by the Day Worker Center on Saturdays.</p> <p>Staff continued to share how the funding from the El Camino Healthcare District is used to purchase nutritious food items and ingredients for cooked dishes. The organization emphasizes balanced, nutritious meals that improve guests' physical and dental health while providing a welcoming and safe environment.</p> <p>Hope's Corner staff shared that they continue to attempt to address food insecurity in the community, offering essential services and nutritious meals to those in need. Growth and partnerships emphasize the ongoing need and community support required to combat hunger.</p>	
<p>6. DISCUSSION and Q&A</p>	<p>The Board inquired about various topics covered throughout the presentation and site visit.</p>	
<p>7. ADJOURNMENT</p>	<p>Motion: To adjourn at 4:02 pm</p> <p>Movant: Miller Second: Ting Ayes: Miller, Ting, Zoglin Noes: None Abstentions: None Absent: Fung, Somersille Recused: None</p>	<p>Meeting Adjourned at 4:02 pm</p>

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

 John Zoglin
 Secretary/Treasurer, ECHD Board

Prepared by: Gabriel Fernandez, Governance Services Coordinator



El Camino Healthcare District Board of Directors
Open Session Meeting Minutes
Tuesday, February 11, 2025

El Camino Hospital | Sobrato Boardroom 1 | 2500 Grant Road, Mountain View, CA

Board Members Present

George O. Ting, MD, Chair
Carol A. Somersille, MD, Vice Chair
John Zoglin, Secretary/Treasurer
Peter C. Fung, MD
Julia E. Miller

Others Present

Dan Woods, CEO
Carlos Bohorquez, CFO
Theresa Fuentes, CLO
Mark Klein, CCMO
Jon Cowan, Executive Director, Government Relations and Community Partnerships

Others Present (cont.)

Anne Yang, Executive Director, Governance Services
Tracy Fowler, Director, Governance Services
Gabriel Fernandez, Governance Services Coordinator

Board Members Absent: None

***Via teleconference*

Agenda Item	Comments/Discussion	Approvals/Action
1. CALL TO ORDER/ROLL CALL	Chair Ting called to order the open session of the Regular Meeting of the El Camino Healthcare District Board of Directors (the "Board") at 5:31 pm and reviewed the logistics for the meeting. A verbal roll call was taken; Directors Fung, Miller, Somersille, Ting, and Zoglin were present, constituting a quorum.	Call to Order at 5:31 pm.
2. CONSIDER AB 2449 REQUESTS	Chair Ting asked if any members of the Board are appearing remotely per AB 2449. None were noted.	
3. SALUTE TO THE FLAG	Chair Ting asked Director Somersille to lead the Pledge of Allegiance.	
4. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Ting asked if any Board members had a conflict of interest with any of the items on the agenda. No conflicts were noted.	
5. PUBLIC COMMUNICATION	Chair Ting asked if there were any members of the public with comments for any items not listed on the agenda. There were no members of the public present.	
6. RECEIVE ECHD FINANCIAL REPORT	<p>Chair Ting asked Ms. Fuentes to comment on the supplemental materials. She noted that the packet had been amended on February 10, 2025 to include the December financials and the amendment was noted on the agenda. Chair Ting then asked Mr. Bohorquez to begin his report.</p> <p>The report highlighted the performance of both the consolidated enterprise and the district, noting a 5.7% increase in the fund balance and a strong investment portfolio. The P&L statement showed minimal variance and strong net income performance halfway through the fiscal year. The district's standalone financials revealed a notable reduction in the fund balance due to a previously approved transfer for capital expenses. Questions and comments included Chair Ting's appreciation for the detailed report and clarification on the Medi-Cal program's categorization. Director Fung inquired about wage and benefit expenses, clarified as stipends for board members, and the district's ability to employ people. The financial report was approved without further questions or comments, and the Board acknowledged the strong financial health and management of the ECHD</p> <p>Motion: To receive the FY25 Period 6 Financial Report which was Amended 2/10/2025.</p>	FY25 Period 6 Financial report was received.

	<p>Movant: Fung Second: Ting Ayes: Fung, Miller, Somersille, Ting, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	
<p>7. ECHD STRATEGIC FRAMEWORK UPDATE</p>	<p>Chair Ting initiated the conversation by questioning how the initiative aligns with the District's framework, emphasizing the importance of addressing social determinants of health such as food, shelter, and safety. Mr. Cowan then shared an overview that included the establishment of ECHD in 1959 and its ongoing commitment to community benefit plans targeting underserved populations. The next step, as highlighted, is focusing on population health, particularly chronic care management, which is not optimal for hospital settings. Concerns were raised by Director Ting about potentially pivoting away from existing programs, but it was clarified that the new initiative is additive and complementary. The team discussed the importance of early intervention and prevention, particularly for chronic diseases like prediabetes, which affects a significant portion of the district's population. Director Fung expressed support for health and wellness initiatives but cautioned against duplicating services already provided by existing partners like the South Asian Heart Program and the Chinese Health Initiative. Director Miller voiced concerns about the process for selecting a vendor and the associated budget, emphasizing the need for careful consideration to ensure alignment with the District's goals. The discussion also covered the employment and funding of the Population Health Program Manager, emphasizing the need for a strategic, action-oriented approach. The meeting concluded with a consensus on the importance of a detailed execution plan, careful vendor selection, and the potential for publishing a report on the program's outcomes to ensure its effectiveness and impact.</p>	<p>Action: Staff to add topic to June ECHD agenda.</p>
<p>8. APPROVE ECHD DISTRICT LOGO MODIFICATION</p>	<p>Mr. Klein opened the discussion on the district logo modification that was actioned at the October 15, 2024 ECHD meeting. Mr. Klein presented the proposed changes, which include compressing the design, using bolder text, increasing line weight, darkening colors, and making the landscape graphic solid blue. The changes aim to strengthen the logo's visibility while preserving its identity. Discussion centered around market testing and implementation costs.</p> <p>Motion: To approve the recommended primary and secondary marks of the updated El Camino Healthcare District logo.</p> <p>Movant: Miller Second: Somersille Ayes: Miller, Somersille, Ting Noes: None Abstentions: Fung, Zoglin Absent: None Recused: None</p>	<p>Updated ECHD logo approved.</p>

<p>9. ECHD BYLAWS REVIEW</p>	<p>Chair Ting opened the discussion about establishing an ad hoc committee to review ECHD bylaw with him serving as Chair and Director Miller serving on the committee. Director Fung recommended Director Zoglin to serve on the committee. Director Zoglin was fine with the committee as proposed.</p> <p>Motion: To adopt Resolution 2025-01 Forming an Ad hoc Committee for Bylaws Review with George Ting as Chair and Julia Miller as Member.</p> <p>Movant: Somersille Second: Miller Ayes: Fung, Miller, Somersille, Ting, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p>Resolution 2025-01 was adopted.</p>
<p>10. RECESS TO CLOSED SESSION</p>	<p>Motion: To recess to closed session at 6:45 pm</p> <p>Movant: Miller Second: Ting Ayes: Fung, Miller, Somersille, Ting Noes: None Abstentions: None Absent: Zoglin Recused: None</p>	<p>Recessed to closed session at 6:45 pm</p>
<p>11. AGENDA ITEM 14: CLOSED SESSION REPORT OUT</p>	<p>The open session was reconvened at 6:53 p.m. by Chair Ting. Agenda Item 11 was addressed in closed session.</p> <p>Mr. Fernandez reported that during the closed session, the ECHD board approved the closed session minutes of the prior meeting.</p>	<p>Reconvened open session at 6:53 pm</p>
<p>12. AGENDA ITEM 15: CONSENT CALENDAR</p>	<p>Chair Ting inquired if any member of the Board intended to remove any item from the consent calendar.</p> <p>Director Miller expressed her dismay to find so many errors on the minutes and assumed the process she put in place to review minutes had been dropped. Director Fung commented that draft meant that these minutes were not the final versions. The minutes from the December 6, 2024 meeting were amended to accurately reflect statement made by Director Miller and the minutes from the December 13, 2024 site visit meeting were amended to accurately reflect attendance.</p> <p>Motion: To approve the consent calendar, with the minutes as modified on February 10, 2025.</p> <p>Movant: Miller Second: Zoglin Ayes: Fung, Miller, Somersille, Ting, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p>The consent calendar was approved.</p>

<p>13. AGENDA ITEM 16: BOARD ANNOUNCEMENTS</p>	<p>Director Miller shared that she was reappointed as Vice President of the Silicon Valley Tobacco Securitization Authority and was reappointed as Chair to the Santa Clara County Tobacco Securitization Corporation. These are positions she has held since 2017.</p>	
<p>14. AGENDA ITEM 14: ADJOURNMENT</p>	<p>Motion: To adjourn at 7:03 p.m. Movant: Fung Second: Ting Ayes: Fung, Miller, Somersille, Ting, Zoglin Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Meeting adjourned at 7:03 p.m.</i></p>

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

John Zoglin
Secretary/Treasurer, ECHD Board

Prepared by: Tracy Fowler, Director, Governance Services
Reviewed by: Tracy Fowler, Director, Governance Services, and Theresa Fuentes, Chief Legal Officer



**EL CAMINO HEALTHCARE DISTRICT
BOARD MEETING MEMO**

To: El Camino Healthcare District Board of Directors
From: Theresa Fuentes, Chief Legal Officer
Date: March 18, 2025
Subject: Resolution 2025-05 Adopting Conflict of Interest Code

Recommendation:

To approve Resolution 2025-05 Adopting El Camino Healthcare District Conflict of Interest Code

Summary

1. **Situation:** The El Camino Healthcare District (“District”) is required under California law to adopt and promulgate a Conflict of Interest (COI) Code to be approved by the COI Code reviewing body, which is the County of Santa Clara Board of Supervisors. The District’s COI Code was last adopted and approved by the Board of Supervisors in October 2024. We added a new position, Executive Director, Governance Services, since that last approval.
2. **Authority:** California Government Code section 87302 requires the COI Code to enumerate positions within the District, that involve the making or participating in making decisions that may have a reasonably foreseeable material effect upon any financial interest, and for such positions, the COI Code must state the specific types of investments, business positions, interests in real property, and sources of income that are reportable. In addition, Government Code section 87200 requires certain public officials who manage public investments to disclose the person’s investments and interests in real property and income from all sources.
3. **Background:** The COI Code has been updated to reflect the added position of Executive Director, Governance Services. The County of Santa Clara has approved the updated COI Code.

List of Attachments:

1. Resolution 2025-05 - CLEAN
2. Resolution 2025-05 - REDLINE

EL CAMINO HEALTHCARE DISTRICT

Conflict of Interest Code

March 18, 2025

RESOLUTION OF THE BOARD OF DIRECTORS OF
THE EL CAMINO HEALTHCARE DISTRICT ADOPTING BY
REFERENCE THE MODEL CONFLICT OF INTEREST CODE
SET FORTH IN TITLE 2, SECTION 18730 OF THE
CALIFORNIA CODE OF REGULATIONS

RESOLUTION 2025-05

As Amended March 18, 2025

WHEREAS, pursuant to Section 87300 *et. seq.* of the California Government Code, the El Camino Healthcare District is required to adopt and promulgate a Conflict of Interest Code;

WHEREAS, the El Camino Healthcare District previously adopted a Conflict of Interest Code on October 16, 2018;

WHEREAS, The El Camino Healthcare District desires now to update its formal Conflict of Interest Code so as to comply with changes to the applicable provisions of Section 87300 *et. seq.* of the California Government Code and Title 2, Section 18730 of the California Code of Regulations;

WHEREAS, pursuant to Government Code Section 87302, the Conflict of Interest Code must specifically enumerate the positions within the District, other than those specified in Government Code Section 87200, that involve making or participating in making decisions that may have a reasonably foreseeable material effect upon any financial interest, and for each such enumerated position, the Conflict of Interest Code must state the specific types of investments, business positions, interests in real property and sources of income that are reportable;

WHEREAS, Title 2, Section 18730 of the California Code of Regulations contains the terms of a Model Conflict of Interest Code developed by the Fair Political Practices Commission (“FPPC”) that agencies can adopt by reference, which may be amended from time to time by the FPPC after public notice and hearing to conform to amendments in the Political Reform Act; and,

WHEREAS, adopting by reference the terms of the FPPC’s Model Conflict of Interest Code set forth in the California Code of Regulations, and amendments thereto, as the Conflict of Interest Code of the El Camino Healthcare District will meet the statutory requirements for adopting such a code and save the District the time and resources by minimizing the actions required to keep the Code in conformity with the Political Reform Act;

NOW THEREFORE, the Board of Directors of the El Camino Healthcare District resolves as follows:

1.0 The Model Conflict of Interest Code set forth in Title 2, Section 18730 of the California Code of Regulations, which is incorporated herein by reference, and any amendments to the Model Conflict of Interest Code subsequently adopted by the FPPC, are hereby adopted by the El Camino Healthcare District as its Conflict of Interest Code. The full text of 2, CCR Section 18730 may be found at the FPPC home page: (<http://www.fppc.ca.gov>).

2.0 **Exhibit A**, which is attached hereto and incorporated herein, enumerates the positions within the District (in addition to any of those set forth in Government Code Section 87200) that are subject to the provisions of the Conflict of Interest Code and their respective disclosure categories. This Resolution and the attached Exhibit A together constitute the Conflict of Interest Code of the El Camino Healthcare District.

3.0 Pursuant to Section 4 of the Model Conflict of Interest Code adopted hereby, public officials and designated employees shall file Statements of Economic Interests with the Director of Governance Services of the El Camino Healthcare District, who shall be the District's filing official. If a statement is received in signed paper format, the district's filing official shall make and retain a copy and forward the original of this statement to the filing officer, the County of Santa Clara Clerk of the Board of Supervisors. If a statement is electronically filed using the County of Santa Clara's Form 700 e-filing system, both the District's filing official and the County of Santa Clara Clerk of the Board of Supervisors will receive access to the e-filed statement simultaneously. Statements of Economic Interests shall be made on forms prescribed by the FPPC. The District shall make the statements available for public inspection and reproduction pursuant to Government Code Section 81008.

4.0 No Conflict of Interest Code shall be effective until it has been approved by the code reviewing body. Notwithstanding this effective date, the adoption of this Conflict of Interest Code shall not be considered an original adoption as to those designated officials or employees who have already been filing annual statements of economic interest. Those persons shall not be required to file again this year. Newly designated officials or employees who were not already required to file by law shall file statements within 30 days of the effective date of this Code, and all designated officials and employees shall continue to file statements upon assuming or leaving office as directed in Sections of the Model Conflict of Interest Code.

Passed and adopted at a Regular Meeting of the Board of Directors of the El Camino Healthcare District held on the 18th of March of 2025, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

John Zoglin, Secretary
El Camino Healthcare District
Board of Directors

EXHIBIT A**DESIGNATED POSITIONS AND DISCLOSURE CATEGORIES****Designated Positions:****Disclosure Categories:**

CHIEF EXECUTIVE OFFICER*	1
CHIEF LEGAL OFFICER*	1
CHIEF ADMINISTRATIVE SERVICES OFFICER*	2
CHIEF COMMUNICATIONS AND MARKETING OFFICER*	2
CHIEF INFORMATION OFFICER*	2
CHIEF OPERATING OFFICER*	2
CONTROLLER*	2
DIRECTOR, GOVERNANCE SERVICES*	2
DIRECTOR, COMMUNITY PARTNERSHIPS*	2
DIRECTOR, STRATEGIC COMMUNICATIONS*	2
EXECUTIVE DIRECTOR, GOVERNANCE SERVICES*	2
EXECUTIVE DIRECTOR, GOVERNMENT RELATIONS AND COMMUNITY PARTNERSHIPS*	2
MEMBER, COMMUNITY BENEFIT ADVISORY COUNCIL	2
CONSULTANT	3 ¹
NEWLY CREATED POSITION**	

* These positions are employees of El Camino Hospital who provide services to the El Camino Healthcare District per agreement with the District.

**** Newly Created Positions**

A newly created position that makes or participates in the making of decisions that may foreseeably have a material effect on any financial interest of the position-holder, and which specific position title is not yet listed in the District's conflict of interest code is included in the list of designated positions and shall

¹ In general, unless outside legal counsel engaged to represent the District participate in making governmental decisions as defined in regulation 18704, they shall not be deemed to be "consultants" for purposes of the District's Conflict of Interest Code.

disclose pursuant to the broadest disclosure category in the code, subject to the following limitation: The CEO may determine in writing that a particular newly created position, although a “designated position,” is hired to perform a range of duties that are limited in scope and thus is not required to fully comply with the broadest disclosure requirements, but instead must comply with more tailored disclosure requirements specific to that newly created position. Such written determination shall include a description of the newly created position’s duties and, based upon that description, a statement of the extent of disclosure requirements.

The District’s determination is a public record and shall be retained for public inspection in the same manner and location as this conflict-of-interest code. (Gov. Code Section 81008.)

As soon as the District has a newly created position that must file statements of economic interests, the District shall contact the County of Santa Clara Clerk of the Board of Supervisors Form 700 division to notify it of the new position title to be added in the County’s electronic Form 700 record management system, known as eDisclosure. Upon this notification, the Clerk’s office shall enter the actual position title of the newly created position into eDisclosure and the District shall ensure that the name of any individual(s) holding the newly created position is entered under that position title in eDisclosure.

Additionally, within 90 days of the creation of a newly created position that must file statements of economic interests, the District shall update this conflict-of-interest code to add the actual position title in its list of designated positions, and submit the amended conflict of interest code to the County of Santa Clara Office of the County Counsel for code-reviewing body approval by the County Board of Supervisors. (Govt. Code Sec. 87306.)

Disclosure Categories:

Category 1: A position assigned to this category must report all investments and business positions and sources of income (including gifts, loans, and travel payments) from sources related to the health care industry, which shall include but not be limited to medical equipment suppliers, pharmaceutical companies, insurance companies, suppliers of health and behavioral health care services, and any other entities related to the health care industry, and all sources that are of the type which within the previous two years have provided services, equipment, leased space, materials, or supplies to the District, and all sources that receive, are planning to apply to receive, or have received in the last two years, grants or other monies from or through the District. A position in this category must also report all interests in real property located entirely or partly within the boundaries of the district, or within two miles of district boundaries, or of any land owned or used by the District.

Category 2: A position assigned to this category must report investments and business positions in business entities, and income (including gifts, loans and travel payments) from sources that are of the type which within the previous two years has provided services, equipment, leased space, materials, or supplies to the District, or which receive, are planning to apply to receive, or have received in the last two years, grants or other monies from or through the District,. A position in this category must also report all interests in real property located entirely or partly within the boundaries of the District, or within two miles of District boundaries, or of any land owned or used by the District.

Category 3: Consultants, as defined for purposes of the Political Reform Act, shall disclose pursuant to the broadest disclosure category in the conflict of interest code subject to the following limitation: The CEO may determine in writing that a particular consultant, although a “designated position,” is hired to perform a range of duties that is limited in scope and thus is not required to comply fully with the disclosure requirements of the broadest disclosure category, but instead must comply with more tailored disclosure requirements specific to that consultant. Such a determination shall include a description of the

consultant's duties and, based upon that description, a statement of the extent of disclosure requirements. All such determinations are public records and shall be retained for public inspection along with this conflict of interest code. A "consultant" is an individual who, pursuant to a contract with the District, makes a governmental decision as defined in regulation 18700.3, or serves in a staff capacity with the District and in that capacity participates in making a governmental decision as defined in regulation 18704 or performs the same or substantially all the same duties for the District that would otherwise be performed by an individual holding a position specified in the District's Conflict of Interest Code under Government Code section 87302.

Positions Subject to Government Code § 87200 Filing Requirements District officials who manage public investments, as defined by 2 California Code of Regulations § 18700.3(b) are not subject to the District's Code but must file disclosure statements under Government Code § 87200. These positions are listed here for informational purposes only.

It has been determined that the positions listed below are officials who manage public investments:

- MEMBER, BOARD OF DIRECTORS
- CHIEF FINANCIAL OFFICER*

Government Code § 87200 filers shall file Statements of Economic Interests with the Director of Governance Services of the El Camino Healthcare District, who shall be the District's filing official. If a statement is received in signed paper format, the District's filing official shall make and retain a copy and forward the original of this statement to the filing officer, the County of Santa Clara Clerk of the Board of Supervisors. If a statement is electronically filed using the County of Santa Clara's Form 700 e-filing system, both the District's filing official and the County of Santa Clara Clerk of the Board of Supervisors will receive access to the e-filed statement simultaneously. Statements of Economic Interests shall be made on forms prescribed by the FPPC. The District shall make the statements available for public inspection and reproduction pursuant to Government Code Section 81008.

*The Chief Financial Officer is an employee of El Camino Hospital who provides services to the El Camino Healthcare District per agreement with the District.

EL CAMINO HEALTHCARE DISTRICT

Conflict of Interest Code

~~October 15, 2024~~ March 18, 2025

RESOLUTION OF THE BOARD OF DIRECTORS OF
THE EL CAMINO HEALTHCARE DISTRICT ADOPTING BY
REFERENCE THE MODEL CONFLICT OF INTEREST CODE
SET FORTH IN TITLE 2, SECTION 18730 OF THE
CALIFORNIA CODE OF REGULATIONS

RESOLUTION ~~2024~~2025-0540

As Amended ~~October 15, 2024~~ March 18, 2025

WHEREAS, pursuant to Section 87300 *et. seq.* of the California Government Code, the El Camino Healthcare District is required to adopt and promulgate a Conflict of Interest Code;

WHEREAS, the El Camino Healthcare District previously adopted a Conflict of Interest Code on October 16, 2018;

WHEREAS, The El Camino Healthcare District desires now to update its formal Conflict of Interest Code so as to comply with changes to the applicable provisions of Section 87300 *et. seq.* of the California Government Code and Title 2, Section 18730 of the California Code of Regulations;

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WHEREAS, adopting by reference the terms of the FPPC’s Model Conflict of Interest Code set forth in the California Code of Regulations, and amendments thereto, as the Conflict of Interest Code of the El Camino Healthcare District will meet the statutory requirements for adopting such a code and save the District the time and resources by minimizing the actions required to keep the Code in conformity with the Political Reform Act;

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2.0 **Exhibit A**, which is attached hereto and incorporated herein, enumerates the positions within the District (in addition to any of those set forth in Government Code Section 87200) that are subject to the provisions of the Conflict of Interest Code and their respective disclosure categories. This Resolution and the attached Exhibit A together constitute the Conflict of Interest Code of the El Camino Healthcare District.

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4.0 No Conflict of Interest Code shall be effective until it has been approved by the code reviewing body. Notwithstanding this effective date, the adoption of this Conflict of Interest Code shall not be considered an original adoption as to those designated officials or employees who have already been filing annual statements of economic interest. Those persons shall not be required to file again this year. Newly designated officials or employees who were not already required to file by law shall file statements within 30 days of the effective date of this Code, and all designated officials and employees shall continue to file statements upon assuming or leaving office as directed in Sections of the Model Conflict of Interest Code.

Passed and adopted at a Regular Meeting of the Board of Directors of the El Camino Healthcare District held on the ~~15th-18th of October~~ March of ~~2024~~2025, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

John Zoglin, Secretary
El Camino Healthcare District
Board of Directors

EXHIBIT A**DESIGNATED POSITIONS AND DISCLOSURE CATEGORIES****Designated Positions:****Disclosure Categories:**

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CONTROLLER*	2
DIRECTOR, GOVERNANCE SERVICES*	2
DIRECTOR, COMMUNITY PARTNERSHIPS*	2
DIRECTOR, STRATEGIC COMMUNICATIONS*	2
<u>EXECUTIVE DIRECTOR, GOVERNANCE SERVICES*</u>	<u>2</u>
EXECUTIVE DIRECTOR, GOVERNMENT RELATIONS AND COMMUNITY PARTNERSHIPS*	2
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* These positions are employees of El Camino Hospital who provide services to the El Camino Healthcare District per agreement with the District.

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disclose pursuant to the broadest disclosure category in the code, subject to the following limitation: The CEO may determine in writing that a particular newly created position, although a “designated position,” is hired to perform a range of duties that are limited in scope and thus is not required to fully comply with the broadest disclosure requirements, but instead must comply with more tailored disclosure requirements specific to that newly created position. Such written determination shall include a description of the newly created position’s duties and, based upon that description, a statement of the extent of disclosure requirements.

The District’s determination is a public record and shall be retained for public inspection in the same manner and location as this conflict-of-interest code. (Gov. Code Section 81008.)

As soon as the District has a newly created position that must file statements of economic interests, the District shall contact the County of Santa Clara Clerk of the Board of Supervisors Form 700 division to notify it of the new position title to be added in the County’s electronic Form 700 record management system, known as eDisclosure. Upon this notification, the Clerk’s office shall enter the actual position title of the newly created position into eDisclosure and the District shall ensure that the name of any individual(s) holding the newly created position is entered under that position title in eDisclosure.

Additionally, within 90 days of the creation of a newly created position that must file statements of economic interests, the District shall update this conflict-of-interest code to add the actual position title in its list of designated positions, and submit the amended conflict of interest code to the County of Santa Clara Office of the County Counsel for code-reviewing body approval by the County Board of Supervisors. (Govt. Code Sec. 87306.)

Disclosure Categories:

Category 1: A position assigned to this category must report all investments and business positions and sources of income (including gifts, loans, and travel payments) from sources related to the health care industry, which shall include but not be limited to medical equipment suppliers, pharmaceutical companies, insurance companies, suppliers of health and behavioral health care services, and any other entities related to the health care industry, and all sources that are of the type which within the previous two years have provided services, equipment, leased space, materials, or supplies to the District, and all sources that receive, are planning to apply to receive, or have received in the last two years, grants or other monies from or through the District. A position in this category must also report all interests in real property located entirely or partly within the boundaries of the district, or within two miles of district boundaries, or of any land owned or used by the District.

Category 2: A position assigned to this category must report investments and business positions in business entities, and income (including gifts, loans and travel payments) from sources that are of the type which within the previous two years has provided services, equipment, leased space, materials, or supplies to the District, or which receive, are planning to apply to receive, or have received in the last two years, grants or other monies from or through the District,. A position in this category must also report all interests in real property located entirely or partly within the boundaries of the District, or within two miles of District boundaries, or of any land owned or used by the District.

Category 3: Consultants, as defined for purposes of the Political Reform Act, shall disclose pursuant to the broadest disclosure category in the conflict of interest code subject to the following limitation: The CEO may determine in writing that a particular consultant, although a “designated position,” is hired to perform a range of duties that is limited in scope and thus is not required to comply fully with the disclosure requirements of the broadest disclosure category, but instead must comply with more tailored disclosure requirements specific to that consultant. Such a determination shall include a description of the

consultant's duties and, based upon that description, a statement of the extent of disclosure requirements. All such determinations are public records and shall be retained for public inspection along with this conflict of interest code. A "consultant" is an individual who, pursuant to a contract with the District, makes a governmental decision as defined in regulation 18700.3, or serves in a staff capacity with the District and in that capacity participates in making a governmental decision as defined in regulation 18704 or performs the same or substantially all the same duties for the District that would otherwise be performed by an individual holding a position specified in the District's Conflict of Interest Code under Government Code section 87302.

Positions Subject to Government Code § 87200 Filing Requirements District officials who manage public investments, as defined by 2 California Code of Regulations § 18700.3(b) are not subject to the District's Code but must file disclosure statements under Government Code § 87200. These positions are listed here for informational purposes only.

It has been determined that the positions listed below are officials who manage public investments:

- MEMBER, BOARD OF DIRECTORS
- CHIEF FINANCIAL OFFICER*

Government Code § 87200 filers shall file Statements of Economic Interests with the Director of Governance Services of the El Camino Healthcare District, who shall be the District's filing official. If a statement is received in signed paper format, the District's filing official shall make and retain a copy and forward the original of this statement to the filing officer, the County of Santa Clara Clerk of the Board of Supervisors. If a statement is electronically filed using the County of Santa Clara's Form 700 e-filing system, both the District's filing official and the County of Santa Clara Clerk of the Board of Supervisors will receive access to the e-filed statement simultaneously. Statements of Economic Interests shall be made on forms prescribed by the FPPC. The District shall make the statements available for public inspection and reproduction pursuant to Government Code Section 81008.

*The Chief Financial Officer is an employee of El Camino Hospital who provides services to the El Camino Healthcare District per agreement with the District.



EL CAMINO HEALTHCARE DISTRICT FY2025 PACING PLAN / MASTER CALENDAR

AGENDA ITEM	Q1			Q2			Q3			Q4		
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
COMMUNITY BENEFIT												
Spotlight Recognition				✓		✓		✓				
CB Year-End Report				✓								
CBAC Policy – Annual Approval				✓								
CB Plan Study Session											✓	
CB Mid-Year Metrics											✓	
Approval of CB Plan												✓
Grant Partner Site Visit				✓		✓		✓	✓			
COMPLIANCE												
Financial Audit – Consolidated ECH District Financials				✓								
Approve Hospital Audit				✓								
DISTRICT REAL ESTATE												
Real Estate Update				✓					✓			
District Capital Outlay											✓	✓
EXECUTIVE PERFORMANCE												
CEO Performance Review		✓										
FINANCE												
Financials				✓				✓	✓			✓
Budget											✓	✓
Tax Appropriation (Gann limit)												✓
GOVERNANCE												
Appoint Ad Hoc Committee & Advisors for ECHB Director Election		✓										
ECHB Director Ad Hoc Committee Update				✓				✓	✓		✓	
Appointment/Re-appointment of El Camino Hospital Board Director								Incumbent			✓ New	
Review Process for ECHD Board Officer Election (<i>Odd Years</i>)											✓	
ECHD Board Officer Election (<i>Odd Years</i>)												✓
Appointment of Liaison to the Community Benefit Advisory Council												✓
Pacing Plan & Meeting Dates												✓
Oath of Office for Newly Elected/Re-elected Directors (<i>Even Years</i>)						✓						
Possible Appointment to ECHB Board for Newly Elected Directors (<i>Even Years</i>)						✓						
ECHD Board Self-Evaluation		✓										
ECHD Bylaws Review								✓				
STRATEGY												
Strategic Plan Update		✓		✓								