

**Public Hospital District #2  
Board Special Meeting Agenda**

**JUNE 12, 2015  
12:00 to 5:00 PM**

**Verdant Community Wellness Center**

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|-----|--|--|----------------|
| 1.  | Call to Order  | Fred Langer                              | 12:00          |
| 2.  | Lunch Served   |  | 12:00 to 12:10 |
| 3.  | Open Public Meetings/Records Training  | Adrian Urquhart Winder,<br>Foster Pepper | 12:10 to 12:50 |
| 4.  | Opening remarks & Verdant general updates  | Carl Zapora                              | 12:50 to 1:10  |
| 5.  | Discussion about Community-wide measures & approach to population health   | George Kosovich                          | 1:10 to 2:00   |
| 6.  | Break  |  | 2:00 to 2:10   |
| 7.  | Verdant Program Review <ul style="list-style-type: none"><li>• Strategic program framework</li><li>• Dental</li><li>• Behavioral Health</li><li>• VCWC</li><li>• Multicultural outreach &amp; programs</li></ul> | George Kosovich &<br>Sue Waldin          | 2:10 to 3:00   |
| 8.  | Financial forecasting scenarios – discuss interest in additional large projects  | George or Carl                           | 3:00 to 3:20   |
| 9.  | Break  |  | 3:20 to 3:30   |
| 10. | Other Superintendent updates & discussion  | Carl Zapora                              | 3:30 to 3:45   |
| 11. | Open Commissioner input & discussion   | All                                      | 3:45 to 4:00   |
| 12. | Adjourn  |  | 4:00           |

**PUBLIC HOSPITAL DISTRICT NO. 2 OF SNOHOMISH COUNTY, WASHINGTON**

**SPECIAL MEETING**

**June 12, 2015**

**12:00 p.m.**

**Verdant Community Wellness Center**

**Commissioners  
Present**

Fred Langer, President  
Deana Knutsen, Commissioner  
Bob Knowles, Commissioner  
Karianna Wilson, Commissioner

**Commissioners Excused**

J Bruce Williams, M.D., Commissioner

**Staff**

Carl Zapora  
George Kosovich  
Jennifer Piplic  
Sue Waldin  
Karen Goto

**Staff Excused**

Lisa King

**Guests**

Adrian Urquhart Winder, Foster Pepper

**Call to Order**

The Special Meeting of the Board of Commissioners was called to order by President Langer at 12:15 p.m.

**Open Public  
Meetings/Records  
Training**

Adrian Urquhart Winder from Foster Pepper provided refresher training to the commissioners on the Open Public Meetings Act in accordance with the requirement for such training to elected officials every four years (E:37:15).

Instructions were provided to the commissioners on connecting to their Verdant Health email address. Commissioners are also reminded to forward any requests for records to Ms. King, the public records officer for Verdant and she will fulfill the requests.

**Opening Remarks &  
Verdant General Updates**

Superintendent Zapora provided a functional review of Verdant including staffing, programming, and strategies (E:38:15).

**Discussion about  
Community Indicators  
and Approach to  
Population Health**

Mr. Kosovich led the commissioners in a discussion on community health indicators.

**Verdant Strategic  
Program Review**

Mr. Kosovich provided the strategic program framework with general updates and reviewed a summary of funded programs (E:39:15).

**Financial Forecasts  
Update, Discussion About  
Large Infrastructure  
Requests**

Mr. Kosovich reviewed the program framework including dental, behavioral health, outreach and programs for underserved, and Ms. Waldin provided the programming update in the Verdant Community Wellness Center.

**Other Superintendent  
Updates & Discussion**

Superintendent Zapora updated the commissioners on the future of the Value Village site. Verdant is a sponsor for the 5K race at the City of Edmonds 4<sup>th</sup> of July celebration with President Langer representing Verdant.

Board retreat will be held Friday, December 4<sup>th</sup> evening and all day December 5<sup>th</sup> at the Tulalip Resort.


**Open Commissioner Input  
& Discussion**


Commissioner Knutsen commented that there is not enough time in today's meeting to discuss the many great strategic planning ideas brought forth. Commissioner Wilson would like to see the upcoming December board retreat used for discussion on programs and budget. All commissioners agreed that a late September special meeting might be preferable for starting this discussion rather than waiting until December. A September date will be set up.


**Adjourn**

The meeting was adjourned at 3:32 p.m.

**Attest By:**

  
\_\_\_\_\_  
President

  
\_\_\_\_\_  
Secretary

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## Open Public Meetings Act Training

Verdant Health Commission  
Lynnwood, Washington

June 12, 2015

Adrian Unquhart Winder  
206.447.8972 | WindA@foster.com

This presentation is for informational purposes and does not constitute any legal advice.

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
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### Before we get started... ESB 5964 (2014)

- **Open Meetings Training:** Members of a governing body must complete open meetings training within 90 days after taking office or assuming duties, and then a refresher every 4 years.  
▪ RCW 42.30.205
- **Public Records and Record Retention Training:** Elected officials and public records officers must complete public records and record retention training within 90 days after taking office or assuming duties, and then a refresher every 4 years.  
▪ RCW 42.56.150-.152

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
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### Purpose

- "The legislature finds and declares that all ... public agencies ... exist to aid in the conduct of the people's business."
- "It is the intent of this chapter that their *actions* be taken openly and that their *deliberations* be conducted openly."
- "The people of this state do not yield their sovereignty to the agencies which serve them."

▪ RCW 42.56.010

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### Scope

- "All meetings of the governing body of a public agency shall be open and public
  - and all persons shall be permitted to attend any meeting of the governing body of a public agency,
  - except as otherwise provided in this chapter."
- RCW 42.30.030

It's all about the definitions...

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### What is a Public Agency?

- "Public agency" means ... Any county, city, school district, special purpose district, or other *municipal corporation or political subdivision* of the state of Washington....
- RCW 42.30.020(1)(b)
- Public hospital districts are "municipal corporations"
- RCW 70.44.010

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### What is a Public Agency?

- "Public agency" [also] means ... Any *subagency* of a public agency which is *created by or pursuant to statute*, ordinance, or other legislative act ...
- RCW 42.30.020(1)(c)
- Statutory Examples:
    - Planning commissions
    - Library or park boards
    - Commissions
    - Agencies

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### What is a Governing Body?

- Only meetings of an agency's governing body must be open.
- "Governing body" means...
  - the multimember board, commission, committee, council, or other policy or rule-making body of a public agency, or
  - *any committee thereof* when the committee acts on behalf of the governing body, [or] conducts hearings, or takes testimony or public comment.

▪ RCW 42.30.020(2)

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### Governing Body: Scenarios to Consider

- Membership
  - Are there members of the Board on the Committee? Majority?
- Decision-Making
  - Does the Committee act on behalf of the Board?
  - Delegated authority or "rubber stamp" (adopted "as a matter of course")
- Public Fact Finding
  - Gather evidence, hold hearings, take testimony, receive public comment?
- Providing Advice
  - Merely providing advice or information to the Board

Remember: Look at substance, not just the title

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### What is a Meeting?

- "Meeting" means meetings at which *action* is taken.
  - RCW 42.30.020(4)
- "Action" means the transaction of the *official business* of a public agency by a governing body *including but not limited to* receipt of public testimony, deliberations, *discussions*, considerations, reviews, evaluations, and final actions.
  - RCW 42.30.020(3)

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### Did we (maybe) just have a Meeting?

- Travel & social gatherings excepted only if no "action" is taken.
  - RCW 42.30.070; AGO 2010 No. 9
- Limit informal discussions to an exchange of information.
  - *OPAL v. Adams County*, 128 Wn.2d 869 (1996)
- But, a "straw poll" is agency action at a meeting.
  - *Miller v. City of Tacoma*, 138 Wn.2d 318 (1999)
- And, serial communications (phone tree) are meetings.
  - *Wood v. Battleground School Dist.*, 107 Wn. App. 550 (2001)
- Meetings may take place in person, by phone, email, text ...

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### So, we took action in a Closed Meeting. Now what?

- Unintentional violation?
  - Nullification of action. RCW 42.30.060.
  - Attorney's fees and costs. RCW 42.30.120(2).
- Knowing violation?
  - Add personal liability - \$100 civil fine. RCW 42.30.120(1).
- Failed to cure?
  - Potential nullification of later actions.

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### Curing an OPMA Violation

- A later action in OPMA compliance will "cure" the violation.
- But, the subsequent action must be open, otherwise conform to the OPMA, and *not simply be a "summary approval"* of the earlier discussions.
- Approval in "consent agenda" insufficient.
  - *Feature Realty v. Spokane*, 331 F.3d 1082 (9th Cir. 2003).
- Must provide opportunity for community/opposing party input.
  - *OPAL v. Adams County*, 128 Wn.2d 869 (1996).

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### Nuts and Bolts: Types of Meetings

- Business Meetings
- Workshops
- Study Sessions
- Committee Meetings
- Public Hearings
- Retreats
- The OPMA applies to all of these (and more)

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### Nuts and Bolts: Timing and Notice

- Regular Meetings
  - Established by board ordinance, resolution, bylaw, or other rule
- Special Meetings
  - Called by presiding officer or majority of board members
  - 24-hour notice to board members and media
    - Must include time, location, agenda
    - Prominently display at main entrance and meeting site, post to website
    - Members can waive notice if attend or submit written waiver
  - Final action may be taken only on items listed in the notice

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### Nuts and Bolts: Agendas

- Post regular meeting agendas online 24 hours in advance
  - Best practice, but required only if the agency has a website and at least 10 employees
  - Agendas may be amended after posting
  - Failure to post agenda does not invalidate an otherwise legal action
    - RCW 42.30.077 (new in 2014)

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### Nuts and Bolts: Executive Sessions

- The portion of a meeting where the public may be excluded
- Commonly invoked reasons for executive session:
  - Discuss with legal counsel enforcement action, potential litigation
  - Acquisition or sale of real estate
  - Evaluate charges against a public officer or employee
  - Review employee performance / evaluate applicant qualifications
- Final action must be taken in open meeting
  - RCW 42.30.110

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### Nuts and Bolts: Executive Sessions

- Presiding officer announces executive session, stating:
  - Topics and purpose (best practice: cite statutory authority)
  - When the session will end, and if session will be extended
- Attendees:
  - Board Members
  - Others by invitation
  - Attorney must attend if discussing litigation or potential litigation
- Public Records: except for minutes, there is no exemption for records just because they are created in executive session

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### Nuts and Bolts: Minutes

- "The minutes of all regular and special meetings except executive sessions of such boards, commissions, agencies or authorities shall be promptly recorded and such records shall be open to public inspection."
  - RCW 42.32.030
- No required format of minutes
  - But all significant actions should be reflected
- Audio or video recording is not required

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### Nuts and Bolts: Public Attendance and Comment

- Attendance may not be conditioned, for example
  - By requiring attendees to register their names
  - Or by requiring attendees to complete a questionnaire
    - RCW 42.30.040
- The OPMA does not require time for public comment
  - But, other statutes may
  - And, nothing prohibits an agency from allowing time for public comment as a matter of policy

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### Nuts and Bolts: Conduct at Meetings

- Board rules of procedure apply
- Interruptions that disturb orderly conduct. RCW 42.30.050
  - May remove the individuals interrupting the meeting
    - If removal does not restore order, room may be cleared
    - Or, meeting may be adjourned and reconvened at another location
    - Nondisruptive media must be allowed to reenter
    - May take final disposition only on matters listed on agenda
  - Removal of disruptive citizen does not violate first amendment
    - *Jones v. Heyman*, 888 F.2d 1328 (11th Cir. 1989)

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### Nuts and Bolts: Adjournment

- Meeting (or hearing) may be adjourned to a specified time and place, where it will be continued. For example:
  - Governing body did not complete its business
  - No quorum (less than a quorum may adjourn the meeting)
  - All members absent from regular meeting (clerk adjourns using special meeting notice procedures)
- Notice of adjournment "conspicuously posted" immediately after adjournment on or near the meeting room door

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### The Public Records Act: Making Records Available

- An agency must make available for public inspection and copying all public records, unless covered by a specific exemption. (RCW 42.56.070)



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### Diligence: Hidden and Ambiguous Requests

- Comment cards at community forum
- Embedded requests otherwise irrelevant to the communication
- Even if it is ambiguous, treat as a records request
- Ask that oral requests be put in writing (or follow up in writing)
- Forward all requests to designated Public Records Officer

Can you see me?



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### The Importance of Separating Agency Business

- Problems arise when agency officials, employees use personal e-mail or electronic devices for agency business
- Can subject personal devices to search
  - *Government employees and public officials who conduct business on private computers cannot reasonably expect those records to be classified as private; business conducted in . . . official capacities is not the personal property of that employee and is not subject to protections afforded to private property.*  
Peutson v. City of Bainbridge Island, Kitsap County Cause No. 13-2-01839-1 (Memorandum Opinion, November 1, 2013)
- Evolving area of the law

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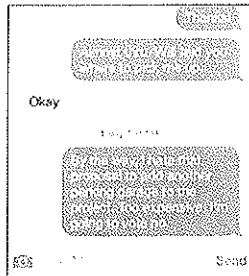
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## The Importance of Separating Agency Business

- Text messages can be public records
- Nissen v. Pierce County*, 183 Wn. App. 581 (2014), review granted, 182 Wn.2d 1008 (2015).



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## The Importance of Separating Agency Business

- Managing Risk:
  - Dedicated e-mail accounts and devices for agency business
  - Central servers and other electronic document sharing solutions
  - E-mail and telecommute policies
  - Training
- Keeping agency business separate helps protect the agency and the individual's privacy

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## Open Public Meetings Act Training

Verdant Health Commission  
Lynnwood, Washington

June 12, 2015

Adnan Urquhart-Winder  
206.447.8972 | [WinderA@fofoster.com](mailto:WinderA@fofoster.com)

This presentation is for informational purposes and does not constitute an offer of legal services.

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## Connecting to a Verdant Health Commission E-mail Account

**Recommendation:** use a dedicated Verdant Health e-mail address

- Can be accessed anywhere through a web browser
- Can also be accessed through a mobile device (ex. Android, iphone)
- E-mail archived and searchable by public records officer for public records requests

### Web Access

- Access through your favorite web browser (Internet Explorer, Google Chrome, Firefox, Safari, etc.)  
Linked through [www.verdanthhealth.org](http://www.verdanthhealth.org) at the bottom of the home page.
- In the top field, type in your full email address: [firstname.lastname@verdanthhealth.org](mailto:firstname.lastname@verdanthhealth.org) and enter password

The screenshot shows the Verdant Health Commission website. At the top right, there are links for "English", "Español", and "Vietnamese". Below these are links for "ABOUT US", "CALENDAR", "THIS & INFO", and "WELLNESS CENTER". The main heading reads "The Verdant Health Commission is working to improve the health and well-being of our community by educating and empowering residents to make healthy lifestyle choices." Below this is a navigation bar with "STAY WELL", "GET ACTIVE", "EAT BETTER", and "SLEEP BETTER". A section titled "Sign Up to Receive Our e-Newsletter" contains four input fields: "Email Address", "First Name", "Last Name", and "Zip Code". At the bottom, there is a copyright notice for 2015, a "Terms of Use" link, and a circled "Employee Login" link.

### Mobile Device Access (Android, iphone)

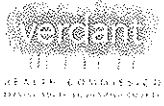
- Can set up a separate e-mail account on your mobile device. This would segregate the e-mail from your work or personal account, but could be set to notify you when you have new messages
- We can provide setup instructions for android and iphone devices and provide technical support to set this up

**Verdant Tech Support:** Dataworks Consulting at 425-687-6185, Primary Consultant: Lucas Bauer, email: [lucas@dataworksconsulting](mailto:lucas@dataworksconsulting)

# Verdant Key Milestones

E: 3.8.15  
6.12.2015


	A	B	C	D	E	F	G	H
	2010	2011	2012	2013	2014	2015	2016	
1	Hospital Campus	Transition to Sweden	Established Strategic Collaboration Committee	Develop ED strategy w/ Sweden and Providence	SAC Sean project approved	Groundbreaking on ED project	New ED scheduled to open in fall '15	
2				Investigate Stevens Pro. Center & Stevens Health Center	Re-leased Value Village	Kruger Building purchase & Tenant T1's	5/7 to begin Kruger Clinic T1's	5/7 to open Urgent Care at Kruger Clinic
3	Verdant Operations	1200 → 0 staff	0 → 5 staff	5 staff	5 staff	6 staff	6 staff + 1 indirect (2-1-1)	
4		Superintendent search	Rented space					
5		Superintendent hired	Set up IT, benefits, phones, etc.					
6			Develop policies & procedures					
7			1st state audit (clean)	2nd state audit (clean)	2nd state audit (clean)	CPA audit (clean)	3rd state audit (2013, 2014)	
8			CPA audit (clean)	CPA audit (clean)	CPA audit (clean)	CPA audit (clean)	CPA audit (clean)	
9			Attempted purchase of Thru restaurant building	Purchased Prime Pacific Bank building	Building design	Building design & construction	Verdant Community Wellness Center launch	
10				Investigate S01-C3		501(C3) research complete		
11	Community Outreach & Branding	Stevens → SSCCH	New Verdant brand	New website development	New Website launch	Canopy 3 & 4	Canopy 5 & 6	
12		Pledgeholder website	Adapted existing website for Verdant					
13				Canopy 1	Canopy 2			
14			Community Leader Meetings (CLM) 1 (\$7 attendees)	CLM 2 (82 attendees)	CLM 3 (93 attendees)	1st Verdant Partner Roundtable in Sept. CEO Roundtable	Quarterly VPR, CEO Roundtable, Verdant Resource Connector Meetings	
15				Building stakeholder interviews (50)	Building outreach & programming		Verdant Community Wellness Center Launch	
16				6WHY 1 (480 attendees) + reunion	6WHY 2 (230 attendees) + reunion for 2 "classes"	6WHY 3 (250 attendees) + reunion for 3 "classes"	Explore Community Wellness Summit	
17	Program Development		Design program funding "buckets" and priorities	Needs assessment RFP, design	Needs assessment complete; develop priorities 2.0	New program initiatives identified: dental & behavioral health	New mobile dental clinic in service	PSCC Dental Clinic Opens
18			Released Program RFP		Defined Building Healthy Communities Fund	Released preventative behavioral health RFP	Preventative behavioral health programs begin	
19			7 funded programs and projects	28 funded programs and projects	65 funded programs and projects	98 funded programs and projects	Woodway project scheduled fall 2015	RFP for Building Healthy Communities Fund
20				Studied Blue Zones (BZ)	1st "Big Program" w/ Senior Services		BlackLink under construction	
21				Portusis campaign	Opted not to pursue BZ	ACA outreach	220 funded programs and projects	
22	Consulting & Legacy Costs		Howard: \$103k* Ash: \$84k*	Howard: \$166k Ash: \$15k	Howard: \$142k Ash: \$20k	Howard: \$48k Ash: \$27k Beth: \$9k	Consulting budget: \$90k Howard: \$4k (to date) Ash: \$38k (to date) Beth: \$14k Gradient: \$14k WC Budget: \$148k PL: \$0k	
23		Workers comp costs: \$235k* Professional liability: \$93k*	WC: \$321k PL: \$335k	WC: \$342k PL: \$93k	WC: \$211k PL: \$16k	WC: \$163k PL: \$44k		
24	*4 months only for 2010							
25	Financial Metrics							
26	Reserves \$	\$11.4M	\$35.1M	\$40.1M	\$42.5M	\$31.3M	\$33.7M	\$35.8M
27	Liabilities \$	\$31.3M	\$19.1M	\$13.3M	\$7.7M	\$5.5M	\$4.8M	\$3.8M
28	Revenue \$	\$4.1M	\$11.5M	\$11.5M	\$10.6M	\$12.8M	\$12.4M	\$12.7M
29	Program Budget	N/A	\$2.0M	\$6.3M	\$6.3M	\$6.75M	\$7.1M	\$7.7M
30	Program Actual \$	N/A	\$0.3M	\$1.9M	\$3.0M	\$5.8M	\$6.1M (to date)	
31	% Program Budget Expended	N/A	15%	44%	48%	88%	86% (to date)	
32	Committees							
33	Executive	Fred, Chuck	Fred, Chuck	Fred, Bob	Fred, Bob	Bob, Bruce	Fred, Deana	
34	Finance	Deana, Chuck, Glenda	Deana, Chuck, Glenda	Bob, Karrianna, Chuck, Glenda	Karrianna, Bruce, Chuck	Deana, Fred, Chuck	Bob, Deana, Chuck	
35	Program	N/A	Bruce, Bob	Deana, Karrianna	Deana, Karrianna	Karrianna, Fred	Karrianna, Bruce	
36	SCC	N/A	Fred, Bruce	Fred, Bob	Fred, Bob	Deana, Bob	Deana, Fred	



Verdant Health Commission Update  
*Building the Foundation for a Healthier Community*

# Verdant Strategic Program Review

Board mini-retreat  
June 12, 2015



Public Hospital District No. 2, Snohomish County /  
Verdant Health Commission  
*Building the Foundation for a Healthier Community*

## Agenda Items

- Community Indicators & Population Health
- Strategic Framework & Priorities:
  - Dental
  - Behavioral Health
  - Verdant Community Wellness Center
  - Outreach to Underserved
  - Infrastructure Projects

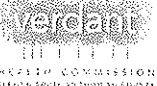


Public Hospital District No. 2, Snohomish County /  
Verdant Health Commission  
*Building the Foundation for a Healthier Community*

## Verdant Mission and Vision:

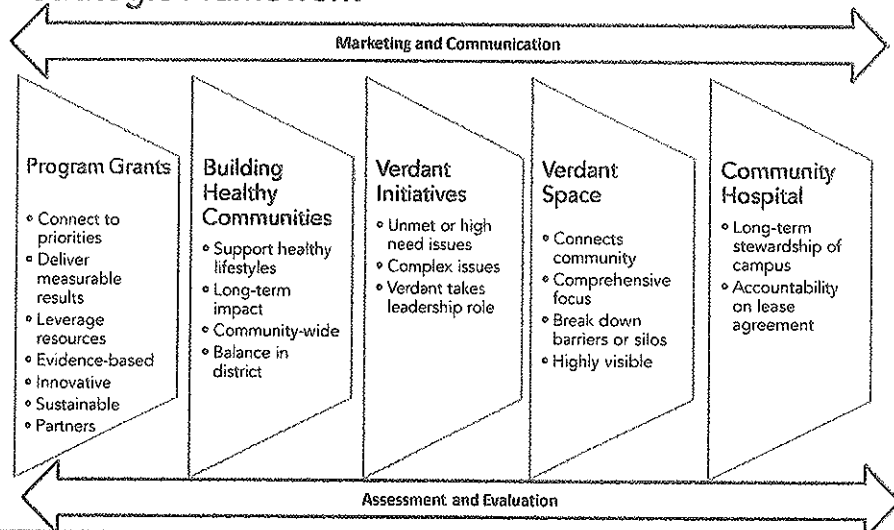
**Mission:** To improve the health and well-being of our community.

**Vision:** To be a sustaining public resource improving the health and well-being of South Snohomish County, collaboratively and creatively working to meet the needs of our community.



Public Hospital District No. 2, Snohomish County /  
Verdant Health Commission  
*Building the Foundation for a Healthier Community*

## Strategic Framework

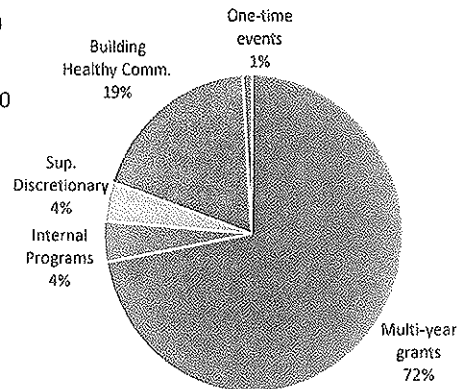






### 2015 Program Budget

Multi-year grants	\$5,115,550
Internal Programs	\$290,000
Sup. Discretionary	\$288,450
Building Healthy Comm.	\$1,331,000
One-time events	\$75,000



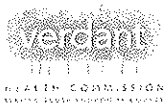
### Program Outcomes vs. Community Outcomes

Key Distinction	Program Outcomes	Community Outcomes
Focus of Effort	Program clients	Specific groups
Strategy	Direct	Changes in organizations, systems, neighborhoods, and networks
Measurement	Program outcomes	Community indicators



## Program Outcomes

- Focus on outcomes vs. outputs
- Objective measures vs. satisfaction scores
- Verdant has been flexible:
  - Pushed for objective measures where possible
  - One-time events
  - Building Healthy Communities Fund



Program Name	Example Program Outcomes	Measures or Indicators
Move 60!	Improve the health and fitness of children	Improvement in % of children in healthy range for BMI, cardio, strength measures
Mobile Medical Clinic	Uninsured patients better manage chronic conditions	Improvement in patient's HgA1c and blood pressure levels
Nurse Family Partnership	At-risk mothers assume the role of competent and sensitive parents	% of mothers that initiate breastfeeding and keep children up-to date with immunizations



## What about Community-wide Indicators?

- Population:
  - Includes everyone, not just client data
  - Estimates and margin of error
  - Infrequent updates, 5 year averages
- Examples:
  - Snohomish Health District Community Health Improvement Plan
  - Institute on Medicine Core Metrics
  - NorthSound ACH (\*Draft Possible\* Measures)
- Long-term commitment
- Multiple community partners working together



## Institute on Medicine Core Metrics for Health

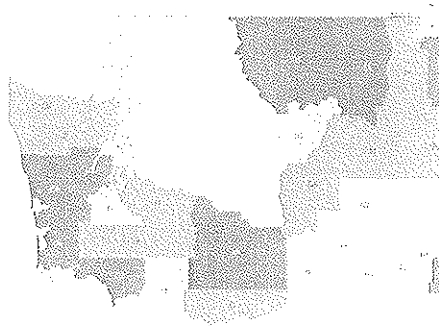
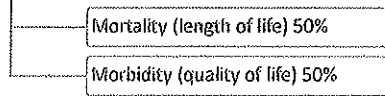
### Core Measure Set with Related Priority Measures

- |   |  |   |
|---|--|---|
| <p> <b>1. Life expectancy</b><br/>Infant mortality<br/>Maternal mortality<br/>Violence and injury mortality</p> <p> <b>2. Well-being</b><br/>Multiple chronic conditions<br/>Depression</p> <p> <b>3. Overweight and obesity</b><br/>Activity levels<br/>Healthy eating patterns</p> <p> <b>4. Addictive behavior</b><br/>Tobacco use<br/>Drug dependence/illicit use<br/>Alcohol dependence/misuse</p> <p> <b>5. Unintended pregnancy</b><br/>Contraceptive use</p> <p> <b>6. Healthy communities</b><br/>Childhood poverty rate<br/>Childhood asthma<br/>Air quality index<br/>Drinking water quality index</p> | <p> <b>7. Preventive services</b><br/>Influenza immunization<br/>Colorectal cancer screening<br/>Breast cancer screening</p> <p> <b>8. Care access</b><br/>Usual source of care<br/>Delay of needed care</p> <p> <b>9. Patient safety</b><br/>Wrong-site surgery<br/>Pressure ulcers<br/>Medication reconciliation</p> <p> <b>10. Evidence-based care</b><br/>Cardiovascular risk reduction<br/>Hypertension control composite<br/>Diabetes control composite<br/>Heart attack therapy protocol<br/>Stroke therapy protocol<br/>Unnecessary care composite</p> | <p> <b>11. Care match with patient goals</b><br/>Patient experience<br/>Shared decision making<br/>End-of-life/advanced care planning</p> <p> <b>12. Personal spending burden</b><br/>Health care-related bankruptcies</p> <p> <b>13. Population spending burden</b><br/>Total cost of care<br/>Health care spending growth</p> <p> <b>14. Individual engagement</b><br/>Involvement in health initiatives</p> <p> <b>15. Community engagement</b><br/>Availability of healthy food<br/>Walkability<br/>Community health benefit agenda</p> |
|---|--|---|



Public Hospital District No. 2, Snohomish County /  
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**RWJF Health Outcomes**



Snohomish County Ranks 7<sup>th</sup>  
out of 39 Counties in WA

Source: Robert Wood Johnson Foundation  
compilation of Public Health data:  
<http://www.countyhealthrankings.org>



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	Snohomish County	Trend	Error Margin	Top U.S. Performers	Washington	Rank (of 39)
<b>Health Outcomes</b>						7
<b>Length of Life</b>						8
Resistant to death	5,177	~	5,050-5,353	5,200	5,506	
<b>Quality of Life</b>						13
Free or low health	10%		12-14%	10%	14%	
Free physical health days	3.7		3.5-3.9	2.5	3.6	
Free mental health days	3.6		3.4-3.8	2.3	3.3	
Low birth weight	5.9%		5.7-6.1%	5.9%	6.3%	
<b>Health Factors</b>						5
<b>Health Behaviors</b>						10
Adult smoking	16%		15-17%	14%	16%	
Adult obesity	28%	~	27-30%	25%	27%	
Food and nutrient intake	7.9			8.4	7.5	
Physical inactivity	18%		17-20%	20%	18%	
Awareness of exercise opportunities	95%			92%	89%	
Excessive drinking	18%		17-20%	10%	17%	

Source: Robert Wood Johnson Foundation compilation of Public  
Health data: <http://www.countyhealthrankings.org>



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## North Sound ACH \*Possible Measures\*



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## Verdant Needs Assessment

- Community Health Data
- Focus Groups
  - Youth
  - Families (Low-income & Spanish-speaking)
  - Caregivers
  - Front-line providers
- Community Survey (phone, web-based)



## Five Messages from Verdant Assessment

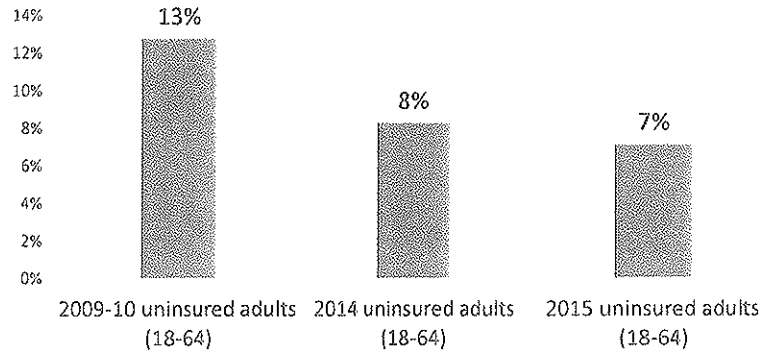
1. Place and demography matters:
  - South Snohomish County is not homogenous.
  - Significant differences exist by neighborhood and by ethnic group
2. Social connection is hard to find
3. Complexity of service systems is a barrier for both providers and clients
4. Cost of care and a lack of insurance are the greatest access barriers
5. Care-givers need support



Data for Verdant Service Area	2008 (95% C.I.)	2010 (95% C.I.)
% with poor mental health in last 30 days (BRFSS)	37.2 (30.7,44.3)	35.3 (30.2, 40.8)
% with poor physical health in last 30 days (BRFSS)	36.5 (30.6,42.8)	35.5 (30.5,40.8)
% with no 1st trimester prenatal care (BRFSS)	18.8 (17.4, 20.4)	18.7 (17.8,19.7)
% with no health care exam in past 2 years	10.3 (6.0,17.1)	21.0 (16.5, 26.2)



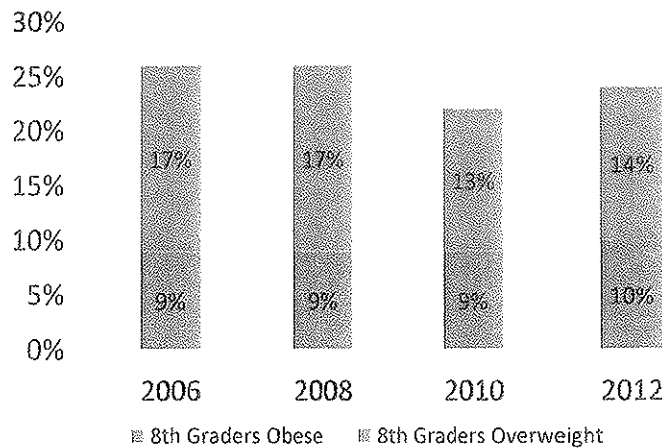
### Uninsured Estimates for Verdant Zip Codes



Notes: 2009-10 estimate from Verdant Needs Assessment using BRFSS data,  
2014 & 2015 estimate from WA Exchange estimates using Census and actual enrollment data



### Edmonds School District Healthy Youth Survey





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Campus ED Visits for Dental	2013	2014
Mill Creek ACC	881	1007
Swedish/Edmonds	758	826
Swedish First Hill	722	703



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### Recommendation on Community Indicators:

- Stay engaged with North Sound ACH, Snohomish County Health Leadership Coalition, Providence Institute for a Healthier Community, Snohomish Health District CHIP, others
- Continue to track and update community data
- Build out 3-5 year strategic plan with linkages to community indicators where appropriate



North Sound Accountable Community of Health  
Sustainability and RHNI Proposed Measures

	(SDH)Triple Aim/Access/Mental Health/Behavioral Health/Chemical	Metric	Island	San Juan	Stegit	Snohomish	Whatcom	Regional	Benchmark	Data Resource	Source or Legislative Support	VS-Comments?
1	Triple Aim	% of Adults who Smoke Tobacco								WA State Dept of Health	5732-1519 Cross System Performance Measures, Common Measure Set & ACH Measures Framework	Choose 1 of 6 for ACH
2	Triple Aim	Diabetes care: HbA1c Poor Control								Claims & Clinical Data	5732-1519 Cross System Performance Measures, Common Measure Set & ACH Measures Framework	Choose 1 of 6 for ACH
3	Triple Aim	ED visits - potentially avoidable							% Decrease in Rate	Alliance	5732-1519 Cross System Performance Measures, Common Measure Set & ACH Measures Framework	CASE Measure, Choose 1 of 2 for ACH
4	Triple Aim	Obesity - Adult Body Mass Index								Claims & Clinical Data	5732-1519 Cross System Performance Measures, Common Measure Set & ACH Measures Framework	Choose 1 of 6 for ACH, combine with other BMI measure?
5	Triple Aim	Readmissions - 30-day all cause							% Decrease in Rate	TBD	5732-1519 Cross System Performance Measures, Common Measure Set & ACH Measures Framework	Choose 1 of 2 for ACH
6	Access	Child and Adolescent Access to PCP								Alliance	5732-1519 Cross System Performance Measures & Common Measure Set	
7	Triple Aim	Diabetes care: Blood pressure control								Claims & Clinical Data	Common Measure Set & ACH Measures Framework	Choose 1 of 6 for ACH
8	Triple Aim	Obesity - Child Body Mass Index								Claims & Clinical Data	5732-1519 Cross System Performance Measures, Common Measure Set Common Measure Set	Combine with other BMI measure?
9	Triple Aim	PT Experiences: Communication re. medications and discharge instructions								WISHA/Hospital Data	Common Measure Set & ACH Measures Framework	Choose 1 of 3 for ACH
10	Triple Aim	PT Experiences: Provider Communication								Alliance - OTPT, WISHA/Hospital Compliance	Common Measure Set & ACH Measures Framework	Choose 1 of 3 for ACH
11	Triple Aim	Tobacco & Smoking Cessation; Medical Assistance with								WA State Dept of Health	Common Measures Set & ACH Measures Framework	Choose 1 of 6 for ACH
12	Triple Aim	Weight Assessment and Nutrition/Physical Activity Counseling/BMI Assessment - Adult								Claims & Clinical Data	Common Measures	Combine with other BMI measure?
13	Triple Aim	Weight Assessment and Nutrition/Physical Activity Counseling/BMI Assessment - Youth								Claims & Clinical Data	Common Measures & ACH Measures Framework	Choose 1 of 6 for ACH, combine with other BMI measure?



North Sound Accountable Community of Health  
Sustainability and RHNI Proposed Measures

	(SDH)Triple Aim/Access/Mental Health/Behavioral Health/Chemical	Metric	Island	San Juan	Skagit	Snohomish	Whatcom	Regional	Benchmark	Data Resource	Source or Legislative Support	VS-Comments?
14	kH	% of Adults Reporting 14 or more Days of Poor Mental Health								BRESS	Common Measure Set	
15	Access	Alcohol/drug treatment penetration							% Increase in proportion of people w/ access	WHA (Medicaid) and NSMHA (RSN)	5732-1519 Cross System Performance Measures	
16	ALL	BH-PH Integration									ACH Measures Framework	Choose 1 of 3 for ACH
17	CD	Death rate due to prescription pain killers or opiates - annual								Health Dept Vital Statistics	5732-1519 Cross System Performance Measures	
18	Aging	Home- and Community-Based Long Term Services and Supports Use								Area Agencies on Aging	5732-1519 Cross System Performance Measures	
19	SDH	Homelessness 2013	-57%	23%	87%	-24%	-13%	-12%	% Decrease in Homelessness	Point in Time Count	5732-1519 Cross System Performance Measures	CASE Measure
20	SDH	Homelessness 2014	120%	38%	3%	32%	13%	24%	% Decrease in Homelessness	Point in Time Count	5732-1519 Cross System Performance Measures	CASE Measure
21	SDH	Incarceration Rate							% Decrease in Rate	Criminal Justice System, by community	5732-1519 Cross System Performance Measures	CASE Measure
22	SDH/MH	Jail inmates with serious mental illness receiving MH treatment while incarcerated								Health Department	5732-1519 Cross System Performance Measures	
23	Triple Aim	Medicaid (and hopefully Medicare FFS) spending per enrollee							% Decrease in Cost	Health Care Authority & Qualis	Common Measure Set	CASE Measure
24	Access/MH	Mental health treatment penetration							% Increase in proportion of people w/ access	WHA (Medicaid) and NSMHA (RSN)	5732-1519 Cross System Performance Measures	CASE Measure
25	Triple Aim	Primary Care/Prevention intervention as Part of Well/ill Child Care as offered by PCP								Smile Survey	Common Measures Set	
26	SDH/BH	Suicide rate - Adults								Health Dept Vital Statistics	5732-1519 Cross System Performance Measures	

North Sound Accountable Community of Health  
Sustainability and RHNI Proposed Measures

	(SDH)Triple Aim/Access/Mental Health/Behavioral Health/Chemical	Metric	Island	San Juan	Skagit	Snohomish	Whatcom	Regional	Benchmark	Data Resource	Source or Legislative Support	VS-Comments?
27	SDH/BEH	Suicide rate - Youth								Healthy Youth Survey	5732-1519 Cross System Performance Measures	
28	Triple Aim/Access	Unintended pregnancy								CDC (PRAMS)	Common Measure Set	
29	Triple Aim/Access	Well Child Visits								Alliance	Common Measure Set	
30	Triple Aim/Access	Proportion of pregnant women, young children, and adult Medicaid patients accessing dental services								WHA (Medicaid)	CHA Measure	
31	Aging/End of Life	Deaths that occur at home - proportion								Dartmouth Atlas		
32	SDH	Elementary age students on free or reduced school lunches							% Decrease in the number	Office of the Superintendent of Public Instruction		
33	Triple Aim	Proportion of patients eligible for the Health Home Program that are enrolled								Health Care Authority		
34	Aging/End of Life	Proportion of people with a complete and filed advance directive								Hospitals		
35	CD/Triple Aim	Treatment/Hospitalizations for opiates or prescription pain killers								Health Dept Vital Statistics		
36	Access	Uninsured Population										



## **VERDANT PLANNING DISCUSSION: STRATEGIC PRIORITIES**

- 1. General Prevention and Program Investment**
- 2. Dental**
- 3. Behavioral Health**
- 4. Verdant Community Wellness Center**
- 5. Outreach to Diverse Communities and Underserved**
- 6. Infrastructure Projects**

### **1. General Prevention and Program Investment**

**Purpose:** provide an open process to fund prevention work that connects to health and wellness priorities

**Possible Strategic Priorities over next 3-5 years:**

- Sustain and permanently integrate successful programs into community for high utilizers and other populations (ex. Community Paramedic, Senior Services Care Transitions Program).
- Demonstrate identifiable results around childhood obesity (annual funding of ~\$750,000 and large reach of programs).
- Improve access to healthcare for residents not well-served by existing insurance or healthcare systems.
- Sustain and expand most effective programs with outcomes tied to Verdant's priorities.

## 2. Dental

**Purpose:** increase capacity of dental services for 1/3 of adults in district that do not have dental insurance.

Current Dental Programs	\$ Amount	# served	Status
Community Health Center of Snohomish County	\$100,000 in year one, \$125,000 in year two	200 per year	Ongoing for one more year
Medical Teams International Mobile Dental Clinic + Vehicle Purchase	\$48,000 per year for three years + \$180,000 one-time vehicle purchase	720 per year	Ongoing, new vehicle now in service, operating grant up in 2015
Senior Services/ Center for Healthy Living Geriatric Dental Program (UW partnership)	\$30,000	105 per year	Ongoing
Puget Sound Christian Clinic Dental Expansion	\$150,000 one-time + \$200,000 per year for three years	1,800 in first year → 3,500 in year three	Pending permits and landlord financing. Open in early 2016?

### Possible Strategic Priorities over next 3-5 years:

- Verdant supported dental programs serve significant numbers of uninsured: 4,500 per year by 2018.
- Reduce area Emergency Department visits for dental needs.
- Spark system improvements in dental services including more seamless connections between medical and dental providers.

### **3. Behavioral Health**

**Purpose:** improve services for individuals needing behavioral health or substance abuse support with a focus on supporting residents before they are in crisis or need significant services. Improve support for youth and families of young children and prevent Adverse Childhood Experiences (ACEs).

#### **Example Prevention/Behavioral Health Programs**

- CHC of Snohomish County Behavioral Health Integration program (\$300k per year): provides screening and brief interventions for patients of low-income clinic.
- Therapeutic Health Services Youth Behavioral Health Integration Program (\$200k per year): integrated behavioral health and substance use prevention program in schools, in partnership with juvenile justice, including parent engagement.
- Center for Human Services Youth Counseling (\$162k per year): 2 FTE mental health counselors at high schools.
- Edmonds School District Student Support Advocates (\$310k per year): intervention specialists at each middle and high school in district.
- Childstrive Nurse Family Partnership (\$277k per year): nurse home visiting program for young first-time mothers.

#### **Possible Strategic Priorities over next 3-5 years:**

- Demonstrate results in behavioral health integration programs that are sustained beyond initial Verdant funding period.
- Demonstrate identifiable results around youth prevention measures like school discipline, substance use, and other community indicators.
- Create a model community of youth prevention and early intervention services through partnerships with schools, behavioral health, substance use prevention, juvenile justice, and other partners.
- Adverse Childhood Experiences (ACEs) prevention incorporated into South Snohomish County medical and human services provider systems.

#### **4. Verdant Community Wellness Center**

**Purpose:** provide a community space for expanded health and wellness programming. Bring community leaders and members together to focus attention on health and wellness improvements.

**Possible Strategic Priorities over next 3-5 years:**

- Verdant Community Wellness Center becomes a highly utilized hub for health and wellness prevention programs.
- Establish stronger connections between Verdant Community Wellness Center Programs with area medical providers and employers.
- Ensure programs reach a representative population across gender, age, socioeconomic and ethnic categories.

## **Verdant Community Wellness Center Summary**

### **Upcoming Programs**

#### **General Community and Provider Events**

- Commission on Asia Pacific Islander Affairs – Statewide Community/Board Meeting (June 20)
- Verdant Resource Connector Quarterly Meeting (June 23)

#### **Nutrition and Healthy Behaviors**

- Raising Healthy Eaters in a Fast Food World (June 1)\*
- Korean Women's Association: hosting Korean and Vietnamese language workshops about Medicare, nutrition, cancer prevention and physical activity and fall prevention.  
Next event - Multicultural Everyday Nutrition II in Korean (June 4)\*
- Feet First Walking Ambassador Training (June 11)\*
- Senior Services: Living Well Workshop leader trainings (June 15 & 16)
- Parents as Role Models in Helping Kids Develop Healthy Eating Habits (June 15)\*
- Summertime Cooking Demos Featuring Local, Fresh Fruits and Vegetables (June 8 / July 13 / August 10 / Sept 14)\*
- American Heart Association 6 Week Cooking Series for Teens (July 10-Aug 14)
- Diabetes Prevention Workshop in Spanish – in partnership with National Institute for Coordinated Healthcare and Lutheran Community Services (June 27)\*
- Stop Diabetes Initiative – Continued Workshops\*
- Ongoing - Lifestyle Change Check-Ins (drop-in support 2x/month)\*
- Ongoing – Getting to Goal: Individual Weight Management Consulting with a Dietitian\*

#### **Behavioral Health & Substance Use Focus**

- Managing Difficult Emotions (starting July 23 for 8 weeks)\*
- Cocoon House Parenting Series (June 8, 15, 22)
- Building Family Strengths Parenting (starting July 22 for 8 weeks)\*
- For the Kids Sake – Snohomish County Monthly Seminars for Parents Going Through Divorce (starting July 8)

#### **Other Programs in Development**

- Developing Walking Groups – working with Feet First and the City of Lynnwood to launch a Summer Walking Ambassador Program
- Spanish Language Cooking Classes (AHA and others)
- Cooking Series with Swedish Edmonds new Chef/Dietitian (Monthly Classes in the Fall)
- Health Education Series in partnership with PacMed
- Nutrition Workshops:
  - Fact or Fiction about Trendy Diets
  - The 50 Something Diet - How to Age Well & Feel Great

**\* = Grant/Program Funded Partner**



## **5. Outreach to Diverse Communities and the Underserved**

**Purpose:** ensure wellness programs reach growing ethnically diverse population and reach communities with health and socioeconomic disparities.

### **Example Programs**

- Korean Women's Association: Everyday Prevention program in Korean, Vietnamese and Chinese
- Center for Healthy Living Multicultural Senior Center
- Lutheran Community Services Health Access for Underserved/Community Health Worker programs

### **Possible Strategic Priorities over next 3-5 years:**

- Verdant Community Wellness Center programs include education and prevention programs for targeted health issues and demographic groups (ex. Spanish language diabetes programs).
- Establish stronger connections between health and wellness programs and leaders in diverse communities, including outreach opportunities.

## PRIORITY: PROGRAM EXP & OBTAIN \$40M IN CASH RESERVES BY 2020

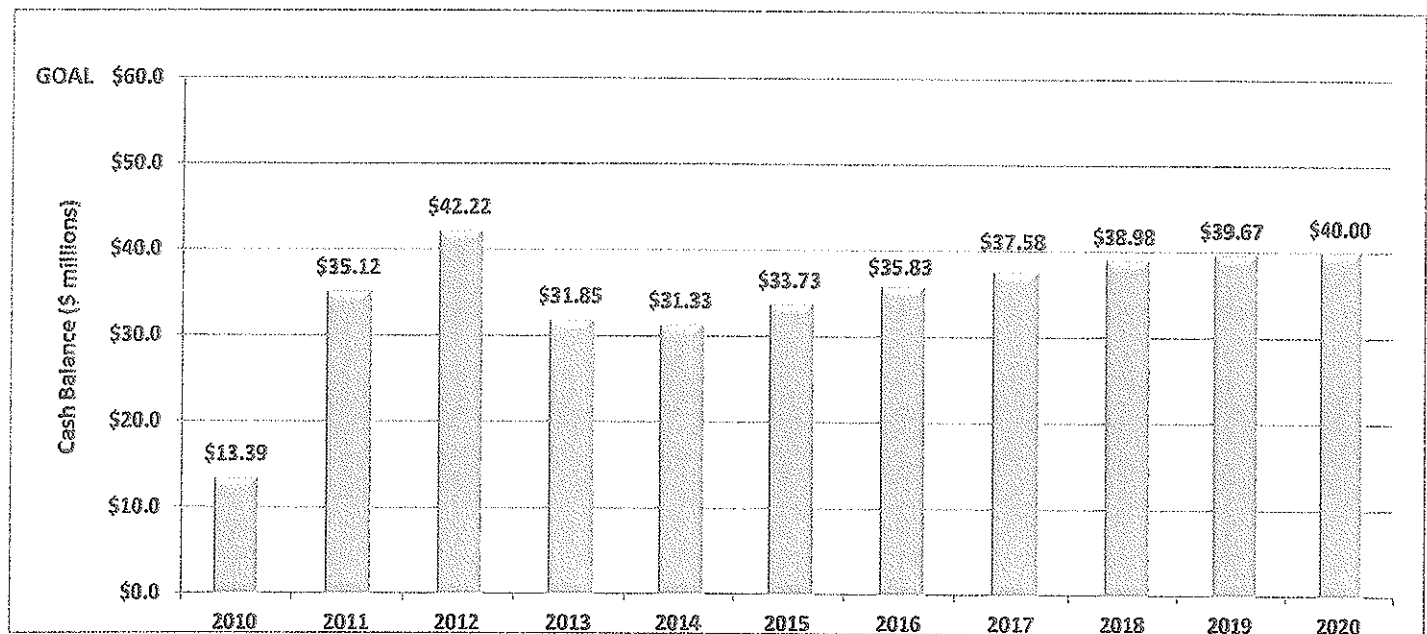
	\$ Millions	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
<b>Revenue</b>												
1	Lease Income	\$2.50	\$7.59	\$7.82	\$8.07	\$9.51	\$9.84	\$10.09	\$10.41	\$10.71	\$10.69	\$11.02
2	Investment Earnings	\$0.22	\$1.07	\$1.68	\$1.03	\$0.41	\$0.46	\$0.47	\$0.48	\$0.49	\$0.50	\$0.51
3	Levy	\$1.40	\$3.20	\$2.04	\$2.06	\$2.11	\$2.16	\$2.18	\$2.21	\$2.23	\$2.25	\$2.27
4	Total Revenue	\$4.12	\$11.85	\$11.53	\$11.17	\$12.03	\$12.46	\$12.75	\$13.09	\$13.42	\$13.43	\$13.80
<b>Expenses</b>												
	Regular Verdant Operating Expenses	\$0.76	\$1.30	\$1.19	\$1.34	\$1.36	\$1.44	\$1.48	\$1.53	\$1.57	\$1.62	\$1.67
	Kruger Clinic Expenses					\$0.43	\$0.43	\$0.44	\$0.46	\$0.47	\$0.49	\$0.50
5	Operating Expenses	\$0.76	\$1.30	\$1.19	\$1.34	\$1.79	\$1.87	\$1.93	\$1.98	\$2.04	\$2.10	\$2.17
6	Program Expenses	\$0.00	\$0.30	\$1.87	\$3.12	\$5.63	\$7.10	\$7.72	\$8.34	\$8.96	\$9.58	\$10.20
7	Total Expenses	\$0.76	\$1.59	\$3.06	\$4.47	\$7.41	\$8.97	\$9.64	\$10.32	\$11.00	\$11.68	\$12.36
8	Hospital Legacy	\$13.04	\$13.63	\$0.01	-\$0.44	-\$1.14	-\$0.15	-\$0.10	-\$0.08	-\$0.05	-\$0.05	-\$0.05
9	Bond Payments	-\$3.02	-\$2.16	-\$1.38	-\$0.72	-\$0.75	-\$0.77	-\$0.81	-\$0.84	-\$0.88	-\$0.92	-\$0.96
10	Capital Outlay	\$0.00	\$0.00	\$0.00	-\$15.91	-\$3.25	-\$0.17	-\$0.10	-\$0.10	-\$0.10	-\$0.10	-\$0.10
11	Net Cash Flow	\$13.39	\$21.73	\$7.10	-\$10.36	-\$0.52	\$2.40	\$2.10	\$1.75	\$1.40	\$0.69	\$0.33
12	Beginning Cash Balance	\$0.00	\$13.39	\$35.12	\$42.22	\$31.85	\$31.33	\$33.73	\$35.83	\$37.58	\$38.98	\$39.67
13	Net Cash Flow	\$13.39	\$21.73	\$7.10	-\$10.36	-\$0.52	\$2.40	\$2.10	\$1.75	\$1.40	\$0.69	\$0.33
14	Ending Cash Balance	\$13.39	\$35.12	\$42.22	\$31.85	\$31.33	\$33.73	\$35.83	\$37.58	\$38.98	\$39.67	\$40.00
15	Days Cash on Hand	20.1	52.7	63.3	47.8	47.0	50.6	53.7	56.4	58.5	59.5	60.0

Assumptions	
Operating Expense Growth Rate	3%
Earnings on Investment Portfolio	2%

Assumes 3% increase on Kruger Clinic for NW Derm (2016-2020)

Assumes Value Village does not renew after 2018

Assumes \$100k per year reserve from 2016 to 2020 for capital improvements



TOTAL PROGRAM SPENDING 2015 - 2020

\$51.89

## **Summary of Infrastructure and Facility Requests**

### **Current Summary of Projects and Payments**

<b>Existing Building Healthy Communities Fund Activity</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
City of MLT Therapy Pool	\$75,000			
City of Brier Walking Program	\$90,345			
City of Edmonds Fitness Center	\$39,513			
Edmonds School District, City of Edmonds Woodway Recreation Project	\$625,000	\$625,000	\$625,000	\$625,000
Cities of Edmonds, Lynnwood, MLT BikeLink	\$470,000	\$706,000	\$724,000	
<b>Total</b>	<b>\$1,299,858</b>	<b>\$1,331,000</b>	<b>\$1,349,000</b>	<b>\$625,000</b>

### **Recent Requests or Requests Under Development**

- **Town of Woodway - Deer Creek Park:** \$128k request to build a walking path
- **Edmonds School District Track at Alderwood Middle:** \$714k request to construct an all-weather track
- **Edmonds Senior Center:** \$2 million for new \$10 million 25,000 sq ft Senior & Community Center
- **Swedish Women's and Children's Center:** \$1 million for a new facility focused on women's health
- **Meadowdale Fields project (new):** \$1 million in total paid over two years for turf fields at Meadowdale Park
- **Evergreen Manor South County Detox Center (new):** \$485k for new detox and treatment facility
- **Verdant-led Indoor Recreation Project:** (\$tbd) investigate options for possible indoor recreation facility

**Program Payout Schedule  
as of June 2015**

A		B	C
		2015	Budget 2016
<b>7100 . Grants</b>			
<b>Committed</b>			
	Domestic Violence Services Teen Prevention	\$ 20,859	\$ 22,266
	Providence Hospice & Home Care Foundation	\$ 64,583	\$ -
	YWCA Children's Domestic Violence	\$ 8,333	\$ -
	Medical Teams International Mobile Dental Program	\$ 28,000	\$ -
	Perscription Drug Assistance Program	\$ 50,000	\$ 20,833
	YWCA Mental Health Counseling	\$ 20,833	\$ -
	EdCC Student Health & Wellness Program	\$ 95,790	\$ 29,847
	Center for Human Services Counseling	\$ 162,284	\$ -
	Cascade Bicycling Club Advanced Basics	\$ 32,000	\$ -
	American Diabetes Association Stop Diabetes	\$ 50,000	\$ -
	Senior Services Center for Healthy Living	\$ 560,240	\$ 560,240
	Wonderland Development Center	\$ 135,000	\$ 90,000
	PSCC Mental Health Counseling Program	\$ 21,667	\$ 16,668
	Community Paramedic	\$ 144,426	\$ -
	Smithwright	\$ 65,000	\$ 54,167
	Edmonds School District No. 15 Student Support Advocate	\$ 310,586	\$ 310,586
	PSCC Mobile Medical Clinic	\$ 90,000	\$ -
	ChildStrive Nurse Family Partnership	\$ 277,359	\$ -
	Edmonds Community College Veteran's Support	\$ 52,756	\$ 52,756
	City of Lynnwood Fire Departement Mobile Integrated Care	\$ 108,259	\$ 45,108
	CHC of Snohomish County Dental Program	\$ 139,715	\$ 62,500
	Edmonds School District Move 60!	\$ 498,690	\$ 518,637
	Puget Sound Kidney Center	\$ 68,333	\$ 45,833
	Seattle Visiting Nurses Flu Shots Renewal	\$ 16,275	\$ -
	Kinderling Early Intervention	\$ 90,000	\$ 67,500
	Boys & Girls Club Healthy Habits Renewal	\$ 154,000	\$ 102,667
	American Red Cross CPR Training	\$ 10,000	\$ 7,500
	Edmonds Senior Center Enhanced Wellness	\$ 110,000	\$ 110,000
	Washington CAN! Insurance Enrollment	\$ 78,571	\$ -
	3rd Grade Swim Lessons Renewal	\$ 50,000	\$ 50,000
	Snohomish County Music Project	\$ 29,000	\$ 26,583
	Cornerstone Medical Services	\$ 60,000	\$ 60,000
	PEPS	\$ 35,850	\$ 35,850
	Campfire	\$ 50,000	\$ -
	Alzheimer's Association	\$ 86,510	\$ 86,510
	City of Lynnwood Move 60: Teens!	\$ 73,729	\$ 73,729
	CHC Behavioral Health Integration	\$ 275,000	\$ 300,000
	Therapeutic Health Services Youth Behavioral	\$ 100,000	\$ 200,000
	PSCC Dental Clinic	\$ 216,667	\$ 200,000
	Snohmish County Health Leadership Coalition	\$ 52,000	\$ 50,000
	LCSNW Health Access for Underserved	\$ 54,863	\$ 94,051
	Senior Services of Snohomish County Care Coordination	\$ 146,250	\$ 135,000
	<b>Total Committed</b>	<b>\$ 4,693,430</b>	<b>\$ 3,428,831</b>
	<b>Not Committed (Available to Spend)</b>	<b>\$ 422,120</b>	<b>\$ -</b>
	<b>Total Grants</b>	<b>\$ 5,115,550</b>	<b>\$ 3,428,831</b>

**Program Payout Schedule  
as of June 2015**

<b>7300 . Internal Programs</b>			
	<b>Committed</b>		
	<b>Total Committed</b>	\$ 129,939	\$ -
	<b>Not Committed (Available to Spend)</b>	\$ 160,061	\$ -
	<b>Total Internal Programs</b>	\$ 290,000	
<b>7200 . Discretionary</b>			
	<b>Committed</b>		
	LCS - Latino Health and Community Fair	\$ 1,000	
	Edmonds 4th of July 5k	\$ 2,500	
	Edmonds Health & Fitness Expo	\$ 2,000	
	Clothes for Kids Breakfast	\$ 500	
	Serve our Sisters Health Fair	\$ 2,800	
	Edmonds Senior Center Health Fair	\$ 1,000	
	Snoh Co Health Leadership Coalition	\$ 1,303	
	<b>Total Committed</b>	\$ 11,103	\$ -
	<b>Not Committed (Available to Spend)</b>	\$ 277,347	\$ -
	<b>Total Discretionary Programs</b>	\$ 288,450	\$ -
<b>7500 . Building Healthy Communities Fund</b>			
	<b>Committed</b>		
	Woodway Recreation Campus Renovation	\$ 625,000	\$ 625,000
	Bike Link	\$ 706,000	\$ 724,000
	<b>Total Committed</b>	\$ 1,331,000	\$ 1,349,000
	<b>Not Committed (Available to Spend)</b>	\$ -	\$ -
	<b>Total BHCF Programs</b>	\$ 1,331,000	\$ 1,349,000
<b>7400 . One time Events</b>			
	<b>Committed</b>		
	MLT Senior Center AED	\$ 2,500	
	Turning Point -Back to School Health Fair	\$ 12,000	
	EdCC Celebration of Food	\$ 5,000	
	City of Lynnwood - Fire Camp	\$ 6,000	\$ -
	Dance for Parkinsons	\$ 20,000	\$ -
	<b>Total Committed</b>	\$ 45,500	\$ -
	<b>Not Committed (Available to Spend)</b>	\$ 29,500	\$ -
	<b>Total One Time Events Programs</b>	\$ 75,000	\$ -
<b>TOTAL</b>		<b>\$ 7,100,000</b>	<b>\$ 4,777,831</b>

## Verdant Program Financial Forecasting

## 1 Scenario 1: 100% renewal

2		2015
3	Existing multi-year commitments	\$4,693,430
5	New Grants (plug)	\$146,442
6	Expected Renewals (100%)	\$275,678
7	One-time events	\$75,000
8	Building Healthy Communities Fund	\$1,331,000
9	Community Programs Internal	\$290,000
10	Superintendent Discretionary	\$288,450
11	<b>Total</b>	<b>\$7,100,000</b>

Note: includes \$50k/year for swim lessons, and \$150k start up for PSCC Lynnwood Dental clinic, w/ongoing payments beginning in Sept.

## 13 Scenario B: 80% renewal

14		2015
15	Existing multi-year commitments	\$4,693,430
17	New Grants (plug)	\$201,578
18	Expected Renewals (80%)	\$220,542
19	One-time events	\$75,000
20	Building Healthy Communities Fund	\$1,331,000
21	Community Programs Internal	\$290,000
22	Superintendent Discretionary	\$288,450
23	<b>Total</b>	<b>\$7,100,000</b>

## 24 Programs up for Renewal in 2015

25	Organization Name	Program Name	Funding Ends	2015 \$ amount at current funding level
26	Project Access Northwest	Project Access Northwest	Nov-14	\$80,000
28	Providence Hospice & Home Care Foundation	Hospice Outreach and Education	Jun-15	\$90,417
29	YWCA of Seattle, King, and Snohomish County	Children's Domestic Violence Program	May-15	\$16,667
30	Medical Teams International	Mobile Dental Program	Jul-15	\$20,000
31	YWCA of Seattle, King, and Snohomish County	Mental Health Counseling Program	Nov-15	\$4,167
34	Within Reach	Insurance Enrollment	Jun-15	\$33,000
35	Washington CAN	Insurance Outreach	Nov-15	\$31,428
36			<b>Total</b>	<b>\$275,678</b>

## 2015 Revenue Projection Summary

	2015 Projections	2015 Budget	Variance Fav/(Unfav)	Notes
<b>Operating Revenues</b>				
1 5791 · Rental Income S/E	8,184,696	8,184,696	-	
2 5791 · Rental Income KC	1,280,060	1,230,973	49,087	CAM/Leasehold Excise Tax/PSG
3 5791 · Rental Income VV	293,144	293,144	-	
4 5792 · Pavilion Ground Lease Income	53,817	46,707	7,110	CPI Increase
5 5793 · Other Operating Income	-	3,000	(3,000)	No room rental income
6 Total Operating Revenues	9,811,717	9,758,521	53,196	
<b>Non Operating Revenue (Expense)</b>				
7 8030 · 2003 GO Tax Levy	27	-	27	
8 5020 · M&O Tax Levy	2,161,680	2,185,157	(23,477)	Did not take Banked Capacity
9 5781 · Investment Income	459,493	360,000	99,493	Averaging higher investment inc.
10 5500 · Other Income (Expense)	-	-	-	
11 Total Non Operating Revenue (Expense)	2,621,201	2,545,157	76,043	
12 Total Revenue	\$ 12,432,917	\$ 12,303,678	\$ 129,239	



Public Hospital District No. 2, Snohomish County /  
Verdant Health Commission  
*Building the Foundation for a Healthier Community*

## Value Village site future



Verdant Health Commission Update  
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