VERDANT HEALTH COMMISSION PUBLIC HOSPITAL DISTRICT NO. 2 OF SNOHOMISH COUNTY, WASHINGTON BOARD OF COMMISSIONERS Regular Meeting A G E N D A May 24, 2017 Edmonds Senior Center 8:00 a.m. to 9:35 a.m.

	ACTION	TIME	<u>PAGE</u>
A. Call to Order		8:00	
B. Approval of the Minutes a) April 26, 2017 Board Meeting	Action	8:03	1-5
C. Executive Committee Report	Information	8:04	(and
D. Superintendent's Report	Information	8:05	(Caraca)
 E. Finance Committee Report a) Review financial statements & cash activity b) Authorization for payment of vouchers and payroll c) 2016 Financial Audit by Moss Adams 	Information Information Action Information	8:10 8:10 8:12 8:13	6-9 .10 11-41
 F. Program Committee Report & Recommendations a) Conflicts of Interest b) Program investment recommendations c) Verdant Community Wellness Center activities update d) Presentation from Edmonds Senior Center 	Action Information Information	8:25 8:26 8:40 8:45	 42-44 45-46
G. Marketing Report	Information	9:05	
H. Public Comments (please limit to three minutes per speake	er)	9:08	-
I. Commissioner Comments		9:15	_
 J. Executive Session a) Consider the legal risks of a proposed action of the distr 	— ict	9:20	
K. Open Session	_	9:35	
L. Adjournment		9:35	-

PUBLIC HOSPITAL DISTRICT NO. 2 OF SNOHOMISH COUNTY, WASHINGTON VERDANT HEALTH COMMISSION

BOARD OF COMMISSIONERS

Regular Meeting Edmonds Senior Center 220 Railroad Avenue, Edmonds WA May 24, 2017

Commissioners

Deana Knutsen, President

Present

J. Bruce Williams, M.D., Secretary

Fred Langer, Commissioner (8:05 a.m. arrival)

Bob Knowles, Commissioner

Commissioners Absent Karianna Wilson, Commissioner

Others Present

Robin Fenn, Superintendent

George Kosovich, Assistant Superintendent

Lisa King, Finance Director

Jennifer Piplic, Marketing Director

Sue Waldin, Community Wellness Program Manager

Sandra Huber, Outreach Specialist Karen Goto, Executive Assistant Members of the community

Guests

Mary Wright, Moss Adams

Lori Nomura, Foster Pepper PLLC (via telephone)

Call to Order

The Regular Meeting of the Board of Commissioners of Public Hospital District No. 2, Snohomish County, was called to order at 8:00 a.m. by President Knutsen.

Approval of Minutes

Motion was made, seconded and passed unanimously to approve the minutes of the regular meeting on

April 26, 2017.

Executive Committee

President Knutsen reported that the Executive Committee met on May 17, 2017 to review and approve the May 24, 2017 board meeting agenda, discuss meeting logistics at the Edmonds Senior Center,

and review the upcoming events at Verdant. No

action was taken.

Superintendent Report

Dr. Fenn reported on several items:

- 1. Thank you to the Edmonds Senior Center for hosting today's board meeting.
- 2. Staff updates from the month of April 2017 and upcoming events were recently sent to the board by Dr. Fenn.
- 3. Dr. Fenn has drafted her Superintendent goals and will discuss with President Knutsen at their meeting on May 26, 2017.
- 4. There were two recent newspaper articles on Verdant – one in The Herald on the State Audit results and another in the Edmonds Beacon with an error on the Edmonds Senior Center funding. Mr. Farrell Fleming of the Edmonds Senior Center contacted the newspaper about the error.
- 5. Verdant attended the Bike2Health ribbon cutting on May 17, 2017 in Lynnwood and the Step-Up Conference on racial equity held on April 28, 2017. Ms. Sandra Huber participated on a panel discussion at this conference.
- 6. Dr. Fenn & Mr. Kosovich are participating in the Medicaid Waiver project workgroups.
- 7. The board mini-retreat is set for Friday, June 9, 2017 at Verdant. A brief survey will be sent to all commissioners and staff in preparation for the retreat.

Finance Committee Report

The committee met on May 19, 2017. Ms. King reviewed the financial statements and cash activity for April 2017 (E:29:17).

Authorization for Payment of Vouchers & Payroll

Warrant Numbers 12213 through 12264 for April 2017 for payment in the amount of \$106,026.21 were presented for approval (E:30:17). *Motion was made, seconded and passed unanimously to approve.*

2016 Financial Audit by Moss Adams

Ms. Mary Wright of Moss Adams presented an unmodified opinion of the 2016 Financial Audit (E:31:17) and expressed her appreciation of Verdant's management with their assistance.

Program Committee Update

The Program Committee met on May 11, 2017 to review six new applications (E:32:17). Commissioner Knowles presented the results of the review to the board.

No conflicts of interest were reported by any of the commissioners present.

Applications Recommended for Funding From Obesity RFP:

City of Mountlake Terrace – "Kids Krew" Healthy Eating and Active Living (HEAL) program – a request for \$10,000 to educate children in an existing afterschool program about physical activity and nutrition.

Motion was made, seconded and passed unanimously to approve fully funding the request on a one-time basis for \$10,000.

Girls on the Run Snohomish County – Expanded South County & Scholarship Program – a request for a running program for girls in the Edmonds School District serving 150 girls and supporting 60 scholarships.

Motion was made, seconded and passed unanimously to approve fully funding the request at \$11,000 on a one-time basis.

Applications that Need Additional Follow-up:

From Obesity RFP:

Farmer Frog Meadowdale Pocket Farm – a request for \$25,000 in funding to build a small "pocket" farm in Meadowdale Park to be used for school field trips, growing and harvesting produce for backpack programs, how-to classes on growing and harvesting produce, etc. The Program Committee would like to see more specific health estimates for the number of people educated or provided with food.

From Regular Program Grants:

Edmonds School District Family Resource Advocate – a request for an average of \$253,400 per year for three years to place Family Resource Advocates at four elementary schools to expand the capacity of an existing program that is currently staffed part-time using school district Title 1 funds. The Committee would like to see expanded program outcomes and an explanation of how this program fits into larger family/student support plans.

Puentes – Community Care Network – a request for \$85,000 per year for three years to train and support 40

community care workers to support families with mental health resources. The Committee would like Puentes to rework the proposal at a reduced request size and to clarify the mental health services and supports that would be offered by the community care workers vs. Puentes counselors.

Applications Not Recommended for Funding:

Edmonds Community College – Veteran's Training Support Center – a request for an average of \$145,700 per year for three years to support a Veterans Training Support Center. The Committee is not recommending funding because it is a large request for a program that indirectly supports residents and is not a top Verdant priority.

Verdant
Community
Wellness Center
Activities Update

Ms. Waldin presented a written update on activities in the center for April and May 2017 (E:33:17). The monthly Hero's Café for Veterans has 100+ in attendance each month so far. Preventative services may be offered in the future at this gathering. President Knutsen expressed her appreciation to Ms. Waldin for the variety of programs and would like to attend the next Resource Connector's meeting.

Presentation from Edmonds Senior Center

Mr. Farrell Fleming, Executive Director of the Edmonds Senior Center, introduced his board members present and gave a brief history of the center.

Ms. Sue Shearer and Ms. Michelle Reitan presented results of the programs that Verdant has funded (E:34:17)

President Knutsen mentioned that on her ride-along with a Community Paramedic on May 23, 2017 she saw many isolated senior citizens in Edmonds and wonders if a collaboration between the Senior Center, Swedish Edmonds, and the Community Paramedic could be established to help these seniors.

Mr. Fleming encouraged the commissioners to continue to push the limit of health & wellness and stated that the Senior Center is happy to support Verdant with any future legislation changes.

Marketing Report

Ms. Piplic presented the Marketing report and mentioned several items:

- The recent survey in The Canopy and the results will be shared electronically with the commissioners.
- 2. Verdant's annual report is in production.
- Average of Verdant web page views increases from 150-250 per day to 400-500 per day when The Canopy is delivered to homes in the district.
- 4. The Screenagers event in April 2017 drew 42 service providers in the first session and 73 members from the public in the second session.
- 5. The next Verdant Partner Roundtable is on Friday, July 14, 2017, 2 to 4 p.m. at Verdant and all commissioners are welcome to attend.

Commissioner Comments

President Knutsen announced a change in the meeting agenda to place the Commissioner comments before the Public comments.

Commissioner Williams presented the Swedish Edmonds Neonatal Intensive Care Unit (NICU) admission statistics (E:35:17) to the commissioners. NICU admissions are down significantly, which is likely due to the Affordable Care Act.

President Knutsen thanked the Edmonds Senior Center for allowing us to hold our board meeting at their facility. She also stated that she did a ride-along with the Community Paramedic on May 23, 2017 and met with the City of Lynnwood Police Chief. President Knutsen encouraged the other commissioners to do the same. She also mentioned that after these meetings, she believes that there needs to be a network of providers established and better communication to the public of Verdant's programs.

Public Comments

Mr. Al Rutledge, a volunteer in Edmonds mentioned that Verdant turned down a request from the Cascade Bicycle Club two or three years ago and advised them to contact the Edmonds Kiwanis Club to help with funding the program for other grade levels. Dr. Victoria Panzer, the head of a network of fall prevention providers, mentioned that their application for Verdant funding was recently denied. She introduced several volunteer fall prevention facilitators, all retired RNs, to comment on the application denial and importance of fall prevention—Ms. Jackie

Braedich, Ms. Kay Koontz, Ms. Peggy Trayor, and written comments from Ms. Antoinette Hill.

President Knutsen explained the process for program evaluations for consideration of funding – requests first go to Mr. Kosovich, then the Program Committee, then the entire board.

Executive Session

President Knutsen recessed the regular meeting at 9:25 a.m. into Executive Session to consider the legal risks of a proposed action of the district. Lori Nomura, Foster Pepper PLLC, participated in the executive session by telephone. President Knutsen stated that the board would reconvene in 15 minutes and no action would be taken in Executive Session or Open Session.

Extensions of Executive Session

At 9:40 a.m. the board extended the Executive Session for 1.5 minutes.

At 9:55 a.m. the board extended the Executive Session a second time for an additional 10 minutes. At 10:05 a.m. the board extended the Executive Session a third time for an additional 5 minutes. At 10:10 a.m. the board extended the Executive Session a fourth time for an additional 5 minutes.

Open Session

The board reconvened into Open Session at 10:15 a.m.

Adjourn

There being no further business to discuss, the meeting was adjourned at 10:20 a.m.

ATTEST BY:

Accrual Basis

Public Hospital District #2, Snohomish County Balance Sheet As of April 30, 2017

DRAFT

	A	В	С	D
	Dec 31, 2016	Apr 30, 2017	\$ Change	Comments:
ASSETS				
Current Assets		2		
Cash Balance	5,457,824	2,007,309	(3,450,516)	
Other Current Assets	34,822,481	38,632,713	3,810,232	Includes Investments
Total Current Assets	40,280,305	40,640,021	359,716	
Total Long-term & Fixed Assets	46,463,198	45,731,604	(731,595)	Includes Depreciation
TOTAL ASSETS	86,743,503	86,371,625	(371,879)	
LIABILITIES & EQUITY				
Liabilities				
Current Liabilities	3,230,044	1,465,218	(1,764,826)	
Long-term Liabilities	3,087,949	3,067,272	(20,677)	2012 LTGO Bonds/BHCF
Total Liabilities	6,317,993	4,532,490	(1,785,502)	
Total Equity	80,425,511	81,839,135	1,413,624	Annual Net Income
TOTAL LIABILITIES & EQUITY	86,743,503	86,371,625	(371,879)	
	Current Assets Cash Balance Other Current Assets Total Current Assets Total Long-term & Fixed Assets TOTAL ASSETS LIABILITIES & EQUITY Liabilities Current Liabilities Long-term Liabilities Total Liabilities Total Equity	ASSETS Current Assets Cash Balance 5,457,824 Other Current Assets 34,822,481 Total Current Assets 40,280,305 Total Long-term & Fixed Assets 46,463,198 TOTAL ASSETS 86,743,503 LIABILITIES & EQUITY Liabilities Current Liabilities 3,230,044 Long-term Liabilities 3,087,949 Total Liabilities 6,317,993 Total Equity 80,425,511	Dec 31, 2016 Apr 30, 2017	Dec 31, 2016 Apr 30, 2017 \$ Change ASSETS Current Assets Cash Balance 5,457,824 2,007,309 (3,450,516) Other Current Assets 34,822,481 38,632,713 3,810,232 Total Current Assets 40,280,305 40,640,021 359,716 Total Long-term & Fixed Assets 46,463,198 45,731,604 (731,595) TOTAL ASSETS 86,743,503 86,371,625 (371,879) LIABILITIES & EQUITY Liabilities 3,230,044 1,465,218 (1,764,826) Long-term Liabilities 3,087,949 3,067,272 (20,677) Total Liabilities 6,317,993 4,532,490 (1,785,502) Total Equity 80,425,511 81,839,135 1,413,624

Profit & Loss April 2017

		Α	В	С	D	E	F
		Apr Actual	Apr Budget	Fav/(Unfav)	YTD Actual	YTD Budget	Fav/(Unfav)
1	INCOME				n		-
2	Ordinary Income	866,384	865,449	935	3,475,361	3,474,633	728
3	EXPENSES						
4	Operating Expenses	193,566	193,513	(53)	646,716	758,293	111,577
5	Depreciation Expense	180,575	180,797	222	738,777	737,402	(1,376)
6	Program Expenses	446,792	567,854	121,062	1,783,682	2,328,415	544,733
7	Total Expenses	820,932	942,164	121,231	3,169,176	3,824,110	654,935
8	OTHER INCOME/(EXPENSE)						
9	Total Other Income/(Expense)	303,989	228,229	75,760	1,107,438	912,915	194,523
10	NET INCOME	349,440	151,515	197,926	1,413,624	563,438	850,186

Monthly Highlights April 2017

Verdant received dividends payments of \$49,377 and an unrealized gain of \$66,616 on our investment portfolio in April and closed with an ending market value of \$37,959,788.

Annual program commitments total \$6,109,664 for 2017. \$1,781,582 remains available to spend in 2017, of which \$34,716 is earmarked as Superintendent Discretionary.

Income of \$117,535 and expenses of \$87,562 from the Kruger Clinic were incurred, netting to an additional operating income of \$29,973 in April.

Public Hospital District #2 Warrant Transaction

Purpose		FSA Administration	March 2017 Janitorial	Mar 2017 VHCC Support (4.5 hrs)	Gold Sponsorship - 2017 MLT 5k Fun Run	Internet/Telephone	WC 151 - Yoga 101 2/14-4/4/17	Landscaping maintenance	Apr 2017 Parking Lot Security	WC 158 - Instructor Reimbursement for Exercise Consultation	IT Support	March 2017 Public Records Request Software	3/22-4/21 Canon Copy Machine	Canopy Design and Photography	Step-up Equity Event - Superintendent Discretionary	Trademark watch	2016 Audit	2009 CPE revision (Susan Ruchin)	SH attend Latina Symposium 2017	WC 157 - Teen Cooking Class 4/4 & 4/6/17; supplies	WC 150 - Nutrition Programming/Multicultural programing	Advertising for Latino Health Fair	2015 SAO Audit	Elevator Maintenance 4/1-6/30/17	WC 144 - Instructor Reimb for Mediterranean for Life	Kruger Clinic Directional Sign	Canopy Newsletter Mailing	Garbage/Recycle	Consulting 3/21/17 - 2 hrs	Internet/Telephone	Refund for Cancelled Cooking Class	Refund for Cancelled Cooking Class	Refund for Cancelled Cooking Class	CAFE Event - Superientendent Discretionary	Supplies	1Q17 installment of health content for website	Instructor reimbursment	Q1 2017 Leasehold Excise tax return	Dance performance for Latino Health Fair	EE Life Insurance	Kruger Clinic Property Management	May 2017 Health Insurance	Deposit for Dec 2017 Board Retreat	Misc.	May 2017- Parking lot lease	Construct Basement wall in VCWC
Amount		17.25	1,150.00	315.33	300.00	281.02	480.00	633.15	284.00	400.00	1,083.19	1,144.25	36.23	1,024.80	5,000.00	315.00	1,500.00	5,940.00	300.00	1,095.88	3,510.66	340.00	837.90	811.58	410.39	1,644.81	12,988.80	253.40	200.00	523.93	15.00	15.00	15.00	5,000.00	122.95	3,150.00	275.00	22,217.02	150.00	1,372.10	4,298.40	4,375.80	200.00	2,940.58	2,500.00	12,703.10
Payee		AmeriFlex Business Solutions	Armstrong Services	Beth Rodriguez, LLC	Cedar Way PTO	Comcast	Connie Nelson, RN	Consolidated Landscape Maintenance, Inc.	Corporate Security LLC	Dameon Hahn	Dataworks	Discovia	Electronic Business Machines	Jason Becker Creative	Leadership Snohomish County	Lowe Graham Jones PLLC	Moss Adams - Audit	Moss Adams - Cost Report	NSC Parent Advisory Council	Seattle Food Nut	Sound Dietitians	Sound Publishing, Inc.	State Auditor's Office	ThyssenKrupp Elevator Company	Total Health	Tube Art Group	US Postal Service	Waste Management	Zapora Consulting, LLC	Comcast	Pam Dorn	Lindsey Legaspi	Pearl Spiger	Edmonds Senior Center	Staples	StayWell Company, LLC	Total Health	WA Department of Revenue	Alma E. Jauregui	Principal	Property Management NW	Regence Blueshield	Tulalip Resort Casino	Wells Fargo	Parsi Properties LLC	Ferris-Turney General Contractors
Transaction Date		04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/14/2017	04/19/2017	04/19/2017	04/19/2017	04/19/2017	04/19/2017	04/19/2017	04/19/2017	04/19/2017	04/26/2017	04/26/2017	04/26/2017	04/26/2017	04/26/2017	04/26/2017	04/26/2017	04/26/2017
Warrant Number	Warrant Activity:	12213	12214	12215	12216	12217	12218	12219	12220	12221	12222	12223	12224	12225	12226	12227	12228	12229	12230	12231	12232	12233	12234	12235	12236	12237	12238	12239	12240	12241	12242	12243	12244	12245	12246	12247	12248	12249	12250	12251	12252	12253	12254	12255	12256	12257

Purpose		IT Support	1Q17 Self Insurance Fund	4/22-5/21 Canon Copy Machine	Electricity	Legal Notice 4/23 Board Meeting	WC 157 - Teen Cooking Class 4/20; supplies	WC 155 - Instructor Reimbursment for Screenagers Viewing	CHECK SLOCK			ACH navroll transfer	Payroll taxes for 4/8/17 hay beriod ending	Pavroll 401(a)/457 Denosit	Fee for payroll processing	ACH payroll transfer	Payroll taxes for 4/22/17 pay period ending	Payroll 401(a)/457 Deposit	Fee for payroll processing	Merchant Services	Bank Fees	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment	Program Payment
Amount		525.00	90.666	36.43	854.03	39.20	540.30	300.00	780.87	106,026.21		18 099 31	7 637 14	2.721.27	128.37	18,038.50	7,605.79	2,716.31	103.98	85.20	184.17	20,519.58	4,166.67	2,666.67	21,708.33	23,333.33	2,000.00	6,144.08	5,000.00	18,572.50	1,855.50	4,396.33	77,273.84	9,166.67	11,517.17	5,000.00	3,750.00	345.00	5,500.00	20,000.00	3,250.00	14,166.67	7,500.00	25,361.11	4,000.00	64,086.67
Рауее		Dataworks	Department of Labor and Industries	Electronic Business Machines	Shonomish County PUD	Sound Publishing, Inc.	Seattle Food Nut	Steel Counseling PLLC		Total Warrants		Pavroll	Department of Treasury	Valic	Paychex	Payroll	Department of Treasury	Valic	Paychex	Wells Fargo Merchant Services	Wells Fargo	Boys & Girls Club of Snohomish County	CampFire	Cascade Bicycle Club Education Foundation	Center for Human Services	ChildStrive	City of Edmonds Parks & Recreation	City of Lynnwood	Cocoon House.	Compass Health	Domestic Violence Services Snohomish Co	Edmonds Community College Foundation	Edmonds School District No. 15	Edmonds Senior Center	Kindering	Korean Women's Association	Leukemia & Lymphoma Society WA/AK Chapter	Mary Porter, RDN	Medical Teams International	NW Parkinson's Foundation	PEPS	Prescription Drug Assistance Foundation	Project Access Northwest	Puget Sound Christian Clinic	Puget Sound Kidney Centers Foundation	Senior Services of Snohomish County
Transaction Date		04/26/2017	04/26/201/	04/26/201/	04/26/201/	04/26/201/	7102/02/40	04/26/201/	1707/27/20		ï.	4/14/2017	4/14/2017	4/14/2017	4/14/2017	4/28/2017	4/28/2017	4/28/2017	4/28/2017	4/12/2017	4/11/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/201/	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017	4/15/2017
Warrant Number	Warrant Activity:	12258	12259	12260	12261	12262	12203	12264			Wire/ACH Activity:																																			

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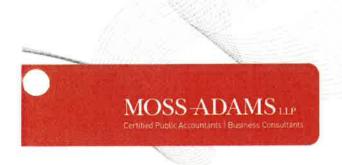
VERDANT HEALTH COMMISSION PUBLIC HOSPITAL DISTRICT #2 SNOHOMISH COUNTY, WASHINGTON

WARRANT APPROVAL

We, the undersigned Board of Commissioners of Public Hospital District #2 of Snohomish County, Washington, do hereby certify that the merchandise or services hereinafter specified have been received and that Warrant Numbers 12213 through 12264 have been issued for payment in the amount of \$106,026.21 These warrants are hereby approved.

Attest: Commissioner Lisa M. King Commissioner Commissioner ommissioner Commissioner \$106,026.21 Warrants Processed: 4-1-17 - 4-30-17 908.12 4-1-17 - 4-30-17 Work Comp Claims Pd: 42,007.81 Kruger Clinic Processed: 4-1-17 - 4-30-17 Payroll: 3-26-17 - 4-8-17 18,099.31 4-9-17 - 4-22-17 18,038.50 36,137.81 Payroll Taxes 15,237.93 **Electronic Payments:** 232.35 Paychex Valic Retirement 5,437.58 AmeriFlex FSA 976.92 269.37 **Bank Fees** WA State Dept Revenue 780.94 482.79 Dept of L&I 435,145.62 **Program Expenditures** 458,563.50 **Grand Total** \$643,643.4<u>5</u>





COMMUNICATIONS WITH THOSE CHARGED WITH GOVERNANCE

To the Board of Commissioners Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission

We have audited the financial statements of Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission (the District) as of and for the year ended December 31, 2016, and have issued our report thereon dated May 22, 2017. Professional standards require that we provide you with the following information related to our audit.

OUR RESPONSIBILITY UNDER AUDITING STANDARDS GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA AND GOVERNMENT AUDITING STANDARDS

As stated in our engagement letter dated January 25, 2017, our responsibility, as described by professional standards, is to form and express an opinion about whether the financial statements prepared by management with your oversight are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles. Our audit of the financial statements does not relieve you or management of your responsibilities.

Our responsibility is to plan and perform the audit in accordance with auditing standards generally accepted in the United States of America and to design the audit to obtain reasonable, rather than absolute, assurance about whether the financial statements are free from material misstatement. An audit of financial statements includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control over financial reporting. Accordingly, we considered the District's internal control solely for the purposes of determining our audit procedures and not to provide assurance concerning such internal control.

We are also responsible for communicating significant matters related to the financial statement audit that, in our professional judgment, are relevant to your responsibilities in overseeing the financial reporting process. However, we are not required to design procedures for the purpose of identifying other matters to communicate to you.

PLANNED SCOPE AND TIMING OF THE AUDIT

We performed the audit according to the planned scope and timing previously communicated to you in the engagement letter dated January 25, 2017, and our planning meeting with you.



SIGNIFICANT AUDIT FINDINGS AND ISSUES

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by the District are described in Note 1 to the financial statements. No new accounting policies were adopted, with exception to the adoption of Governmental Accounting Standards Board No. 72, and there were no changes in the application of existing policies during the year. We noted no transactions entered into by the District during the year for which there is a lack of authoritative guidance or consensus. There are no significant transactions that have been recognized in the financial statements in a different period than when the transaction occurred.

Significant Accounting Estimates

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the financial statements were:

The useful lives of fixed assets have been estimated based on the intended use and are within the American Hospital Association or Medicare guidelines. We evaluated the key factors and assumptions used to develop the useful lives of fixed assets in determining that they are reasonable in relation to the financial statement taken as a whole.

The District accrues an estimated workers' compensation liability based on a detailed analysis of outstanding claims. We evaluated the key factors and assumptions used to develop the estimated workers' compensation liability in determining that it is reasonable.

Financial Statement Disclosures

The disclosures in the financial statements are consistent, clear, and understandable. Certain financial statement disclosures are particularly sensitive because of their significance to financial statement users. There are no disclosures in the financial statements that would be considered sensitive.

Significant Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Uncorrected Misstatements

Professional standards require us to accumulate all factual and judgmental misstatements identified during the audit, other than those that are trivial, and communicate them to the appropriate level of management. There were no uncorrected misstatements to be reported.

Disagreements with Management

For purposes of this letter, professional standards define a disagreement with management as a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

Management Representations

We have requested certain representations from management that are included in the management representation letter dated May 22, 2017.

Management Consultation with Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the District's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Other Significant Audit Findings or Issues

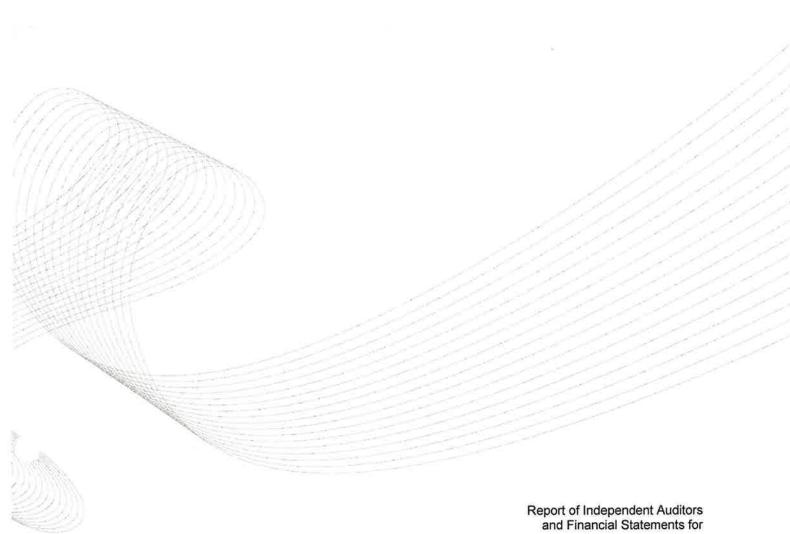
We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the District's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

This information is intended solely for the use of the Board of Commissioners and management of Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission and is not intended to be and should not be used by anyone other than these specified parties.

Everett, Washington

as Odens LLP

May 22, 2017



Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission

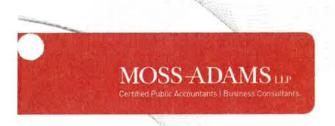
December 31, 2016 and 2015



Certified Public Accountants | Business Consultants

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REPORT OF INDEPENDENT AUDITORS

To the Board of Commissioners Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission

Report on the Financial Statements

We have audited the accompanying financial statements of Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission (the District), as of and for the years ended December 31, 2016 and 2015, and the related notes to the financial statements, which collectively comprise the District's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express opinions on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.



We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinions

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission as of December 31, 2016 and 2015, and the respective changes in financial position and, where applicable, cash flows thereof for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the accompanying management's discussion and analysis on pages 3 through 10 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in the appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated May 22, 2017, on our consideration of the District's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control over financial reporting and compliance.

Everett, Washington

May 22, 2017

The following discussion and analysis for Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission (the District) provides an overview of the District's financial activities for the years ended December 31, 2016 and 2015. Please read it in conjunction with the District's financial statements, which follow this analysis.

Using These Basic Financial Statements

The District's financial statements consist of three statements: a statement of net position; a statement of revenues, expenses, and changes in net position; and a statement of cash flows. These financial statements and related notes provide information about the financial activities of the District.

The Statement of Net Position and Statement of Revenues, Expenses, and Changes in Net Position

These two statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. All the current year's revenues and expenses are taken into account when the underlying transactions occur, regardless of when cash is received or paid. These statements report the District's net position and the changes therein. When assessing the overall health of the District, other nonfinancial factors also need to be considered, such as changes in programs offered, measures of the quality of service offered, and local economic factors.

The Statement of Cash Flows

This statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and capital and noncapital financing activities. It provides information about sources and uses of cash and the change in cash balances during the reporting periods.

The Transition of Operations, Effective September 1, 2010

Until September 1, 2010, Public Hospital District No. 2, Snohomish County, Washington, owned and operated Stevens Hospital. Through a lease and operating agreement, on September 1, 2010, Swedish Health Services (SHS), a nonprofit corporation, took over operation of the hospital and renamed it Swedish Edmonds. This transition significantly changed the role of the District. The District retained ownership of the hospital but no longer manages its operations and, instead, is a landlord to SHS. As of December 31, 2016, SHS had paid \$49.4 million in total lease payments to the District for the use of hospital real property and personal assets owned by the District.

The negotiated agreement terms for use of the hospital by SHS are for 30 years, with options to renew, wherein the District will receive monthly lease payments that increase 3.0% per year for the first 15 years, after which time the monthly payments will be steady for the remainder of the agreement. Additionally, SHS agreed to invest a minimum of \$90.0 million into hospital capital improvements over the course of the first 10 years, with no less than \$6.0 million per year in each of those 10 years.

The Transition of Operations, Effective September 1, 2010 (continued)

That commitment included the installation of the Epic electronic medical record system. Additional capital investment by SHS may be committed each year based on 25% of the defined profitability of the facility. In addition, SHS committed to a major expansion project of at least \$60 million, provided there was adequate return on investment, demand criteria were met, and the SHS board of trustees approved such a project. An expansion of the Emergency Department was completed in 2016 that met the major expansion project criteria above. The District and SHS formed a strategic collaboration committee to provide oversight for the lease and strategic planning activities for the facility.

The District will maintain investments sufficient to take back the operation of the hospital in the event of default by SHS or some other extraordinary event. This transition significantly impacted many of the statement of net position accounts for the year ending December 31, 2010, and along with the long-term agreement with SHS, significantly improves the short- and long-term financial viability of the District.

The Verdant Health Commission

As of September 1, 2010, the District began doing business as South Snohomish County Commission for Health (SSCCFH). The SSCCFH name was changed in 2011 to the Verdant Health Commission (Verdant) by a vote of the commissioners of the District. Verdant is governed by a board of five commissioners elected at large. The mission of Verdant is to improve the health and well-being of the community. This mission will be completed by contracting for services with local organizations, businesses, and government agencies, and the establishment of Verdant-operated initiatives. Long-term financial stability will be established by investing available revenues received from SHS and others, as well as ongoing tax levy revenues, into allowable government funds, thus building adequate reserves in the years to come.

Verdant began accepting funding proposals in June 2011 in four health priority areas: Education and Empowerment, Prevention, Access to Healthcare Services, and Policy and Advocacy. Funds are available for one-time uses like events and short-term needs in the community, as well as for ongoing health and wellness programs. Verdant paid out approximately \$6.4 million in community program investments during 2016. Each program is managed through a cooperative agreement with partners and is being monitored for performance and compliance by Verdant staff.

The Verdant Health Commission (continued)

Verdant completed a comprehensive needs assessment in 2013 to better understand the health and wellness issues impacting residents of South Snohomish County. The assessment included an analysis of quantitative health and socioeconomic data, input from front-line service providers, a survey of 400 residents, and 12 different focus groups. The results of the needs assessment were compiled into a formal written assessment and appendices that are available on Verdant's website. The needs assessment highlighted two key community issues for the District: adult dental care and behavioral health needs. In 2014, Verdant approved funding for programs and projects in these areas, including a new mobile dental clinic through Medical Teams International and a fixed-site dental clinic in Lynnwood through the Puget Sound Christian Clinic.

In 2016, Verdant partnered with the Snohomish Health District on an updated needs assessment. Although the assessment found that the general health status of South Snohomish County residents compares favorably to the rest of Snohomish County, and had improved since the 2013 assessment, there were several areas of concern:

- Youth symptoms of depression increased between 2012 and 2014
- Only 63 percent of older adults received a flu vaccination
- 25 percent of the population is obese
- 36 percent of the adult population is not physically active and 75 percent of youth are not meeting exercise guidelines
- 29 percent of residents do not have dental coverage and 27 percent of the population has not had a dental visit in the past year

Verdant continues to fund projects focused on long-term prevention, childhood obesity, access to healthcare, dental access, and improving behavioral health. Many of the programs Verdant supported in 2015 continue through multi-year cooperative agreements. Notable programs that were approved or renewed for funding in 2016 include the Nurse Family Partnership, which is an evidence-based program that supports new young mothers and babies, and a Community Resource Paramedic Program through the regional fire district that supports vulnerable individuals who frequently use the Emergency Medical Service (EMS) or are otherwise at high risk. Verdant-funded programs also serve at-risk youth, and include a new support program for youth and families through Cocoon House and a project in partnership with a local middle school to support families and teens that are dealing with trauma and adverse childhood experiences.

The Verdant Health Commission (continued)

As part of its planning and needs assessment work, Verdant determined that there are challenges that keep South Snohomish County residents from being active. In 2013, the Commissioners of the District voted to add a new program funding opportunity referred to as the Building Healthy Communities Fund (BHCF). The purpose of the BHCF is to support projects in South Snohomish County that increase opportunities for residents to live active and healthy lives. The District is addressing these gaps by funding projects with key community partners, such as local governments, which sustain long-term community health improvements. In 2014, Verdant began funding two larger projects under the BHCF: a recreation project at the former Woodway High School, and a project called Bike2Health (formerly BikeLink) that will complete critical missing links in the community's bicycle network, with the goal of increasing ridership and decreasing collisions and injuries. The Woodway recreation project is being managed by the Edmonds School District and will be paid out over four years, whereas the City of Lynnwood is in the lead for the Bike2Health project, which will be funded by Verdant over three years. Both projects will collect and deliver program results over the next several years.

In January 2015, Verdant opened the Verdant Community Wellness Center (VCWC) in Lynnwood, which offers the residents of the District a resource for accessing health and wellness classes, programs, and information. The center serves as the Verdant headquarters and houses all staff. An estimated 11,000 people were served in the VCWC during the year with various education and support programs. Examples included healthy cooking classes, depression and anxiety support groups, assistance with health insurance enrollment, and prescription drug assistance. The center also includes a full-time 2-1-1 Community Resource Advocate who meets with residents one-on-one to connect them to community resources.

In 2016, Verdant continued funded and support for several projects and programs focused on drug and alcohol treatment, including a new drug and alcohol detox center in Lynnwood through Evergreen Recovery Centers (scheduled to open in 2017) and a program focused on serving teens with mental health and drug and alcohol challenges through Therapeutic Health Services. Additionally, Verdant provided funding for a new dental clinic in Lynnwood operated by Puget Sound Christian Clinic, which opened and began seeing patients in the fall of 2016.

Statement of Net Position

The District's net position is the difference between its assets and liabilities as reported in the statement of net position (in thousands).

	2016	2015	2014
Assets			
Current assets	\$ 40,280	\$ 37,552	\$ 35,459
Capital assets, net	31,144	33,280	35,776
Other noncurrent assets	15,320	13,617	11,702
Total assets	\$ 86,744	\$ 84,449	\$ 82,937
Liabilities			
Current liabilities	\$ 3,230	\$ 2,839	\$ 2,582
Long-term debt, net	2,988	3,890	4,757
Other long-term liabilities	100	725	100
Total liabilities	6,318	7,454	7,439_
Net position			
Net investment in capital assets	27,316	28,585	30,249
Restricted for debt service	48	47	54
Unrestricted	53,062	48,363	45,195
Total net position	80,426	76,995	75,498
Total liabilities and net position	\$ 86,744	\$ 84,449	\$ 82,937

Current Assets

Total current assets of \$40.3 million at year-end 2016 reflect an increase of \$2.7 million (7.3%), compared to the balance of \$37.6 million at the end of 2015. Cash and short-term investments increased by \$3.5 million (9.8%) in 2016, compared to an increase of \$2.4 million (7.1%) in 2015.

Capital Assets

The District's net capital assets decreased \$2.1 million (6.4%) in 2016, compared to a net decrease of \$2.5 million (7.0%) in 2015. A comprehensive hospital asset audit and subsequent surplus in 2015 contributed to this total.

Statement of Net Position (continued)

Other Noncurrent Assets

Other noncurrent assets consist of rent receivable totaling \$15.3 million at year-end 2016, an increase of \$1.7 million (12.5%), compared to an increase of \$1.9 million (16.4%) in 2015. The rent receivable results from straight-line recognition of the 30-year lease of the hospital to SHS.

Current Liabilities

Current liabilities increased \$.4 million (13.8%) from \$2.8 million in 2015 to \$3.2 million in 2016.

Long-Term Debt

As of December 31, 2016, the District had \$3.0 million in long-term debt, net of current portion, which is a \$0.9 million (23.2%) decrease from 2015. Principal payments during 2016 totaled \$0.8 million. In 2012, outstanding 1999 LTGO refunding bonds were paid in full by the issuance of \$6.6 million of 2012 LTGO refunding bonds. Principal payments during 2012, in excess of the 1999 LTGO refunding bond payments, totaled \$1.0 million.

Other Long-Term Liabilities

Other noncurrent liabilities decreased by \$0.6 million from \$0.7 million in 2015. This is made up of reserves for self-insured workers' compensation claims (\$0.1 million).

Operating Results and Changes in the District's Net Position

In 2016, the District's net position increased \$3.4 million (4.5%), compared to an increase of \$1.5 million (2.0%) in 2015.

	2016	2015	2014
Operating revenues			
Lease revenue	\$ 11,820	\$ 11,838	\$ 11,712
Other operating revenues	32	16_	9
Total operating revenues	11,852	11,854	11,721
Operating expenses			
Salaries and benefits	859	769	752
Program expenditures	6,424	8,021	4,690
Other	1,233	1,121	925
Depreciation	2,405	2,641	3,367
Total operating expenses	10,921	12,552	9,734
Operating income (loss)	931	(698)	1,987
Nonoperating revenues (expenses)			
Tax levies	2,221	2,167	2,113
Investment income (loss)	261	133	564
Interest expense and amortization	(68)	(91)	(106)
Gain (loss) on disposal of capital assets	(111)	(98)	19
Other revenues (expenses)	197	84	284_
Net nonoperating revenues	2,500	2,195	2,874
Increase in net position	3,431	1,497	4,861
Net position, beginning of year	76,995	75,498	70,637
Net position, end of year	\$ 80,426	\$ 76,995	\$ 75,498

Operating revenues in 2016 totaling \$11.9 million were attributed to lease payments and income from the Verdant Healthy Community Conference. Of that, \$8.4 million was attributable to the SHS lease for operation of the hospital. Additional lease revenues were received from other lease agreements, including Value Village, Healthcare Realty, and the Kruger Clinic.

Operating Results and Changes in the District's Net Position (continued)

Overall operating costs of \$10.9 million at year-end 2016 reflect a decrease of \$1.6 million (13.0%), compared to operating costs of \$12.6 million at the end of 2015. Salaries and benefits totaled \$0.9 million in 2016, an 11.6% increase over 2015. Program expenditures totaled \$6.4 million in 2016 compared to \$8.0 million in 2015. 2015 expense of \$1.3 million relating to the Woodway High School project was the biggest impact to the variance from 2015 to 2016.

Net nonoperating revenues in 2016 totaled \$2.5 million, compared to \$2.2 million in 2015, an increase of \$0.3 million (13.9%). Investment gains at year-end 2016 are \$0.3 million, an increase of \$0.1 million (96.0%) over a 2015 gain of \$0.1 million.

Contacting the District's Financial Management

This financial report is designed to provide our taxpayers, suppliers, and creditors with a general overview of the District's finances and to show the District's accountability for the money it receives. If you have any questions about this report or need additional financial information, contact the District's finance office at 4710 196th Street SW, Lynnwood, Washington 98036.

PUBLIC HOSPITAL DISTRICT NO. 2, SNOHOMISH COUNTY, WASHINGTON dba VERDANT HEALTH COMMISSION STATEMENTS OF NET POSITION

ASSETS

	Decem	ber 31,
	2016	2015
CURRENT ASSETS		
Cash and cash equivalents	\$ 5,457,824	\$ 2,928,195
Investments	34,729,116	33,671,131
Receivables	18,000	71,993
Estimated third-party payor settlements	(m)E	183,190
Prepaid expenses and other	27,616	650,078
Assets whose use is limited	47,748	46,957
Total current assets	40,280,304	37,551,544
CAPITAL ASSETS		
Nondepreciable capital assets	7,727,017	7,723,706
Depreciable capital assets, net of accumulated depreciation	23,416,706	25,555,804
Capital assets, net of accumulated depreciation	31,143,723	33,279,510
RENT RECEIVABLE	15,319,478	13,618,154
Total assets	\$ 86,743,505	\$ 84,449,208
LIABILITIES AND NET POSITION		
CURRENT LIABILITIES		
Current portion of long-term debt	\$ 840,000	\$ 805,000
Accounts and warrants payable	1,127,772	913,851
Prepaid lease income	864,607	760,110
Accrued interest	8,963	10,975
Accrued salaries and benefits	74,77 9	55,232
Estimated self-insured liabilities	313,923	294,194
Total current liabilities	3,230,044	2,839,362
LONG-TERM DEBT, net of current portion	2,987,949	3,889,978
OTHER LONG-TERM LIABILITIES	100,000	725,000
Total liabilities	6,317,993	7,454,340
NET POSITION		
Net investment in capital assets	27,315,774	28,584,532
Restricted for debt service	47,748	46,957
Unrestricted	53,061,990	48,363,379
Total net position	80,425,512	76,994,868
Total liabilities and net position	\$ 86,743,505	\$ 84,449,208

PUBLIC HOSPITAL DISTRICT NO. 2, SNOHOMISH COUNTY, WASHINGTON dba VERDANT HEALTH COMMISSION

STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION

	Years Ended	December 31,
	2016	2015
OPERATING REVENUES	.(· · · · · · · · · · · · · · · · · · ·
Lease revenue	\$ 11,819,559	\$ 11,837,651
Other operating revenue	31,559	16,030
Total operating revenues	11,851,118	11,853,681
OPERATING EXPENSES		
Salaries and wages	722,518	665,188
Employee benefits	136,017	103,814
Program expenditures	6,424,300	8,021,280
Professional services	383,943	319,644
Purchased services, utilities, and other	849,169	800,929
Depreciation	2,404,616	2,640,840
Total operating expenses	10,920,563	12,551,695
Operating income (loss)	930,555	(698,014)
NONOPERATING REVENUES (EXPENSES)		
Maintenance and operations tax levy	2,221,262	2,166,756
Investment income and unrealized gain (loss)	260,542	132,957
Other interest expense and amortization	(67,658)	(90,899)
Gain (loss) on disposal of capital assets, net	(111,343)	(98,232)
Other revenues	197,286	84,320
Net nonoperating revenues	2,500,089	2,194,902
Increase in net position	3,430,644	1,496,888
NET POSITION, beginning of year	76,994,868	75,497,980
NET POSITION, end of year	\$ 80,425,512	\$ 76,994,868

PUBLIC HOSPITAL DISTRICT NO. 2, SNOHOMISH COUNTY, WASHINGTON dba VERDANT HEALTH COMMISSION STATEMENTS OF CASH FLOWS

Increase (Decrease) in Cash and Cash Equivalents

	Years Ended	December 31,
	2016	2015
CASH FLOWS FROM (USED IN) OPERATING ACTIVITIES		
Cash received for leasing and other operations	\$ 10,254,291	\$ 9,964,252
Cash paid to employees	(838,988)	(767,078)
Cash paid on community programs	(7,049,300)	(6,771,280)
Cash paid to suppliers for goods and services	(139,817)	(1,209,060)
Net cash from operating activities	2,226,186	1,216,834
CASH FLOWS FROM NONCAPITAL FINANCING ACTIVITIES		
Cash received from maintenance and operations tax levy for		
noncapital purposes	2,220,471	2,174,491
Cash received from Swedish Health Services	148,547	59,244
Other	48,739	5,473
Net cash from noncapital financing activities	2,417,757	2,239,208
CASH FLOWS USED IN CAPITAL AND RELATED FINANCING ACTIVITIES		
Principal payments on long-term debt	(805,000)	(770,000)
Interest paid on long-term debt	(131,699)	(154,854)
Acquisition and construction of capital assets	(380,172)	(242,960)
Net cash used in capital and related financing activities	(1,316,871)	(1,167,814)
CASH FLOWS FROM INVESTING ACTIVITIES		
Net change in investments	(1,365,350)	(3,039,388)
Investment income	567,907	489,454
Net cash from investing activities	(797,443)	(2,549,934)
NET CHANGE IN CASH AND CASH EQUIVALENTS	2,529,629	(261,706)
CASH AND CASH EQUIVALENTS, beginning of year	2,928,195	3,189,901
CASH AND CASH EQUIVALENTS, end of year	\$ 5,457,824	\$ 2,928,195

PUBLIC HOSPITAL DISTRICT NO. 2, SNOHOMISH COUNTY, WASHINGTON dba VERDANT HEALTH COMMISSION STATEMENTS OF CASH FLOWS (continued)

Increase (Decrease) in Cash and Cash Equivalents

	Years Ended December 31,	
	2016	2015
RECONCILIATION OF OPERATING INCOME TO NET CASH FROM OPERATING ACTIVITIES	5	
Operating income (loss)	\$ 930,555	\$ (698,014)
Adjustments to reconcile operating income (loss) to net cash from operating activities		
Depreciation	2,404,616	2,640,840
Changes in operating assets and liabilities		
Receivables	(94,554)	130,997
Estimated third-party payor settlements	331,737	27,814
Prepaid expenses and other	622,462	313,401
Rent receivable	(1,701,324)	(1,915,511)
Accounts and warrants payable	213,921 609,238	
Prepaid lease income 104,49		26,082
Tenant improvements	E ⊕ 0	(101,460)
Accrued salaries and benefits	19,547	1,924
Self-insured liabilities	19,729	(443,477)
Other long-term liabilities	(625,000)	625,000
Net cash from operating activities	\$ 2,226,186	\$ 1,216,834

Note 1 - Organization and Summary of Accounting Policies

Organization - Until September 1, 2010, Public Hospital District No. 2 of Snohomish County, Washington (the District), a Washington municipal corporation, was owned and operated Stevens Hospital (the Hospital), located in Edmonds, Washington. The Hospital is an acute care community hospital with 156 set-up beds. On September 1, 2010, the District entered into an agreement (the Agreement) to lease and operate the Hospital with Swedish Health Services (SHS), a nonprofit corporation. The Agreement included transfer of control of Stevens Foundation (the Foundation), which was organized and formally incorporated as a 501(c)(3) tax-exempt organization. The District is now doing business as Verdant Health Commission.

The District is governed by a board of five elected commissioners. The mission of the District is to improve the health and well-being of the community. This mission will be completed by contracting for services with local organizations, businesses, and government agencies and the establishment of Verdant-operated initiatives. Long-term financial stability will be established by investing available revenues received from SHS, as well as ongoing tax levy revenues, into allowable government funds, thus building adequate reserves in the years to come.

The District began accepting funding proposals in June 2011 in four health priority areas: Education and Empowerment, Prevention, Access to Healthcare Services, and Policy and Advocacy. Funds are available for one-time uses like events and short-term needs in the community, as well as for ongoing health and wellness programs.

The terms of the Agreement specify an initial 30-year term, with two 10-year renewal options. Rental payments to be made by SHS will be \$600,000 per month, with annual escalation of 3% per year on each anniversary date for the first 15 years. The rent is on an absolute net basis, with SHS being responsible for all operating costs associated with the facility. The lease calls for certain approvals by the District that affect the operation of the facility for the following: change in license, major service line changes, union contract representation, and maintenance of an independent medical staff. Per the terms of the agreement, SHS committed to capital investments for the facility, some of which were dependent upon various factors like future profitability, return on investment and demand criteria, and SHS board approval. The District and SHS formed a strategic collaboration committee to provide oversight for the lease and strategic planning activities for the facility.

The County Treasurer acts as an agent to collect property taxes levied in the county for all taxing authorities. Taxes are levied annually on assessed values as established by the County Assessor. Tax collections are distributed monthly to the District by the County Treasurer. Property taxes are recorded as receivables and revenue when levied. Because state law allows for the sale of property for failure to pay taxes, no estimate of uncollectible taxes is made.

Note 1 - Organization and Summary of Accounting Policies (continued)

In September 1997, the voters of the District approved maintenance and operations (M&O) tax levy upon the taxable property within the District; the M&O tax provided approximately \$2,220,000 of funding in 2016 and \$2,160,000 of funding in 2015. The levy is ongoing in future years. The M&O tax levy funds are reported in the accompanying statements of revenues, expenses, and changes in net position as nonoperating revenues.

Basis of presentation - The financial statements reflect the operations of the District using enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus.

The District reports its financial information in a form that complies with the pronouncements of the Governmental Accounting Standards Board (GASB) and the Audit and Accounting Guide for Health Care Organizations of the American Institute of Certified Public Accountants.

Use of estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates. Key estimates include useful lives of capital assets, third-party cost report settlements, and self-insured liabilities.

Cash and cash equivalents - For purposes of the statements of cash flows, the District considers all highly liquid investments (excluding cash and short-term investments included in restricted assets) with a maturity of three months or less when purchased to be cash equivalents.

Investments - Investments that are not considered to be cash and cash equivalents or restricted assets are reported at fair value. Investment interest, dividends, and unrealized and realized gains and losses are included in nonoperating income when earned.

Restricted assets - As described further in Note 6, the District receives tax levy funds that are used solely for debt service associated with the general obligation bonds. Taxes and interest receivable and scheduled debt service payments temporarily invested prior to becoming due are recorded as restricted assets. All receipts and earnings generated on such investments are reported as nonoperating revenues and expenses.

Prepaid expenses and other - Related assets include future expenses that have been paid in advance. The District entered into agreements in 2014 with scheduled payments. For each agreement, the amount of District payments in excess of the costs incurred were recorded as project advances and included in prepaid expenses and other. As of December 31, 2016 and 2015, project advances were zero and \$625,000, respectively.

Note 1 - Organization and Summary of Accounting Policies (continued)

Capital assets - Capital assets are stated at cost. Improvements and replacement of capital assets are capitalized. The District's capitalization threshold is \$5,000 per item and a useful life of at least two years. Maintenance and repairs are expensed. The cost of capital assets sold or retired and the related accumulated depreciation are removed from the accounts, and any resulting gain or loss is recorded.

Depreciation is computed using the straight-line method over the estimated useful lives of the related assets. Assets under capital leases are amortized over the shorter of the lease term or useful life. Amortization attributable to assets acquired under capital leases is included with depreciation as shown in the statements of revenues, expenses, and changes in net position.

The following is a summary of asset lives used:

Buildings and building improvements	2 - 50 years
Equipment	2 - 50 years
Land improvements	2 - 25 years

Rent receivable - Rent receivable represents lease revenue on a straight-line basis in excess of lease payments received for applicable lease agreements in accordance with applicable accounting standards.

Self-insurance liabilities - The District accrues an estimate of losses and related expenses for its self-insured workers' compensation claims. The District maintains stop-loss insurance for workers' compensation claims in excess of specified amounts. This liability, which is approximately \$414,000 and \$394,000 as of December 31, 2016 and 2015, respectively, is recorded in the accompanying statements of net position within estimated self-insured liabilities and other long-term liabilities.

Estimated third-party payor settlements - Under a contractual agreement with Medicare, the Hospital is paid at an interim rate during the year for certain services and programs. The difference between interim payments and estimated final reimbursement for the cost report year results in a settlement receivable or payable, which may be adjusted in future periods as final settlements are determined. The Medicare program's administrative procedures preclude final determination of settlement amounts until after the annual cost reports have been audited or otherwise reviewed and settled by Medicare. The District's cost reports have been audited by the Medicare fiscal intermediary through August 31, 2010.

While operating Stevens Hospital, the District participated in the Medicaid Certified Public Expenditures (CPE) program for inpatient reimbursement, which provides for interim payments for certain services and programs. The difference between interim payments and estimated final reimbursement for the Washington State fiscal year results in a settlement receivable or payable, which may be adjusted in future periods as final settlements are determined.

Note 1 - Organization and Summary of Accounting Policies (continued)

Net position - Net position of the District is classified into three components. The net investment in capital assets component of net position consists of capital assets, net of accumulated depreciation, reduced by the outstanding balances of related debt that is attributable to the acquisition, construction, or improvement of those assets. The restricted component of net position represents noncapital assets that must be used for a specific purpose. The unrestricted component of net position is the remaining net amount of the assets and liabilities that are not included in the determination of net investment in capital assets or the restricted component of net position.

Statements of revenues, expenses, and changes in net assets - For purposes of presentation, transactions deemed by management to be ongoing, major, or central to the provision of District services are reported as operating revenues and expenses. All levy income, interest expense, investment income, and other peripheral or incidental transactions are reported as nonoperating revenues and expenses.

Income taxes - As a political subdivision of the state of Washington, the District is not subject to federal income tax, because its income is excluded from gross income for federal income tax purposes under Section 115 of the Internal Revenue Code.

New accounting pronouncements - In February 2015, the GASB issued Statement No. 72, *Fair Value Measurement and Application*. Statement No. 72 is intended to address accounting and financial reporting issues related to fair value measurements. The definition of fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. This statement provides guidance for determining a fair value measurement for financial reporting purposes. This statement also provides guidance for applying fair value to certain investments and disclosures related to all fair value measurements. This guidance is effective for the District in the year ended December 31, 2016. The District has adopted this standard in the December 31, 2016, financial statements.

Subsequent events - Subsequent events are events or transactions that occur after the statements of net position date but before financial statements are available to be issued. The District recognizes in the financial statements the effects of all subsequent events that provide additional evidence about conditions that existed at the date of the statements of net position, including the estimates inherent in the process of preparing the financial statements. The District's financial statements do not recognize subsequent events that provide evidence about conditions that did not exist at the date of the statements of net position but arose after the statements of net position date and before the financial statements are available to be issued.

The District has evaluated subsequent events through May 22, 2017, which is the date the financial statements are available to be issued.

Note 2 - Cash, Cash Equivalents, Investments, and Deposits

The District categorizes its fair value measurements within the fair value hierarchy established by generally accepted accounting principles. The hierarchy is based on the valuation inputs used to measure the fair value of the asset. Level 1 inputs are quoted prices in active markets for identical assets, Level 2 inputs are significant other observable inputs, and Level 3 inputs are significant unobservable inputs. The composition of investments, reported at fair value by investment type at December 31, 2016 and 2015, and excluding unrestricted cash, and other assets limited as to use balances of \$5,505,572 and \$2,975,152, respectively, is as follows:

Year Ended	Investment Type	Quoted Prices in Active Markets for Identical Assets (Level 1)	Percentage of
December 31, 2016	Governmental mutual fund	\$ 34,729,116	100%
December 31, 2015	Governmental mutual fund	\$ 33,671,131	100%

The District makes investments in accordance with Washington State law. Eligible investments include obligations secured by the U.S. Treasury, other obligations of the United States or its agencies, certificates of deposit with approved institutions, eligible bankers' acceptances, and repurchase agreements (up to 30 days).

Because the District is a political subdivision of the state, deposits and investments are categorized to give an indication of the risk assumed at year-end. Category 1 includes deposits and investments that are insured, registered, or held in the District's name. Category 2 includes uninsured and unregistered investments that are held by a broker's or dealer's trust department or agent in the District's name. Category 3 includes uninsured and unregistered deposits and investments for which the securities are held by the broker or dealer, or its trust department or agent, but not in the District's name. At December 31, 2016 and 2015, all deposits and investments of the District are categorized as Category 1.

Credit risk - Credit risk is the risk that an issuer or other counterparty to an investment will not fulfill its obligations. The District's investment policy limits the types of securities to those authorized by statute; therefore, credit risk is very limited.

Deposits - All of the District's deposits are either insured or collateralized. The District's insured deposits are covered by the Federal Deposit Insurance Corporation. Collateral protection is provided by the Washington Public Deposit Protection Commission.

Custodial credit risk - Custodial credit risk is the risk that, in the event of a failure of the counterparty, the District will not be able to recover the value of the investment or collateral securities that are in the possession of an outside party. The District is not exposed to custodial credit risk.

Concentration of credit risk - Concentration of credit risk is the risk of loss attributed to the magnitude of the District's investment in a single issuer. The District is not exposed to concentration of credit risk because all deposits and investments are insured or collateralized.

Note 2 - Cash, Cash Equivalents, Investments, and Deposits (continued)

Interest rate risk - Interest rate risk is the risk that changes in interest rates of debt instruments will adversely affect the fair value of an investment. The District is not exposed to interest rate risk because all deposits and investments are extremely liquid.

Note 3 - Capital Assets

Capital asset additions, retirements, and balances for the years ended December 31, 2016 and 2015, were as follows:

NONDEPRECIABLE CAPITAL ASSETS	Beginning Balance January 1, 2016	Additions	Retirements	Account Transfers	Ending Balance December 31, 2016
Land Construction in progress	\$ 7,723,706	\$ - 3,311	\$ -	\$:=: :=:	\$ 7,723,706 3,311
	7,723,706	3,311	<u>-</u>		7,727,017
DEPRECIABLE CAPITAL ASSETS Land improvements Buildings and building	2,409,334	Ĩ	ij.	(9)	2,409,334
improvements Equipment	52,829,088 42,093,560	364,497 12,364	(3,464) (604,045)	:E	53,190,121 41,501,879
LESS ACCUMULATED DEPRECIATION Land improvements Buildings and building	2,149,360	101,541	*		2,250,901
improvements Equipment	31,536,357 38,090,461	1,578,967 724,108	(3,022) (493,144)		33,112,302 38,321,425
DEPRECIABLE CAPITAL ASSETS, net	25,555,804	(2,027,755)	(111,343)	- 30	23,416,706
CAPITAL ASSETS, net	\$ 33.279.510	\$ (2.024.444)	\$ (111.343)	<u>s .</u>	\$ 31.143.723
NONDEPRECIABLE CAPITAL ASSETS	Beginning Balance January 1, 2015	Additions	Retirements	Account Transfers	Ending Balance December 31, 2015
NONDEPRECIABLE CAPITAL ASSETS Land Construction in progress		Additions \$ - 144,379	Retirements \$ - (3,250)	0.0000000000000000000000000000000000000	
Land	January 1, 2015 \$ 7,723,706	\$ -	\$ -	Transfers -	December 31, 2015
Land Construction in progress DEPRECIABLE CAPITAL ASSETS Land improvements	January 1, 2015 \$ 7,723,706 3,753,908	\$ - 144,379	\$ - (3,250)	\$ - (3,895,037)	\$ 7,723,706
Land Construction in progress DEPRECIABLE CAPITAL ASSETS	January 1, 2015 \$ 7,723,706 3,753,908 11,477,614	\$ - 144,379 144,379	\$ - (3,250)	\$ - (3,895,037) (3,895,037)	\$ 7,723,706 - 7,723,706
Land Construction in progress DEPRECIABLE CAPITAL ASSETS Land improvements Buildings and building improvements	\$ 7,723,706 3,753,908 11,477,614 2,285,382 49,716,133	\$ 144,379 144,379 86,688	\$ (3,250) (3,250)	\$ - (3,895,037) (3,895,037) 37,264 3,112,955	\$ 7,723,706
Land Construction in progress DEPRECIABLE CAPITAL ASSETS Land improvements Buildings and building improvements Equipment LESS ACCUMULATED DEPRECIATION Land improvements Buildings and building improvements	\$ 7,723,706 \$ 7,723,706 3,753,908 11,477,614 2,285,382 49,716,133 46,360,038 2,057,189 29,934,084	\$ 144,379 144,379 86,688 11,893 92,171 1,602,273	\$ (3,250) (3,250)	\$ - (3,895,037) (3,895,037) 37,264 3,112,955	\$ 7,723,706
Land Construction in progress DEPRECIABLE CAPITAL ASSETS Land improvements Buildings and building improvements Equipment LESS ACCUMULATED DEPRECIATION Land improvements Buildings and building	\$ 7,723,706 3,753,908 11,477,614 2,285,382 49,716,133 46,360,038 2,057,189	\$ 144,379 144,379 86,688 11,893	\$ (3,250) (3,250) (5,023,189)	\$ - (3,895,037) (3,895,037) 37,264 3,112,955	\$ 7,723,706

Note 4 - Lessor Agreements

As referenced in Note 1, the District entered into a lease and operating agreement (the Agreement) with SHS that was dated and effective September 1, 2010. The terms of the Agreement specify an initial 30-year term, with two 10-year renewal options. Rental payments to be made by SHS will be \$600,000 per month, with annual escalation of 3% per year on each anniversary date for the first 15 years. The rental payments will freeze at the rate set during year 15 for the duration of the Agreement. The revenue related to this lease is recorded on a straight-line basis by the District in accordance with applicable accounting standards.

The District also has other lease agreements to lease space to various tenants. In accordance with applicable accounting standards, the revenue from some of these lease agreements is recognized on a straight-line basis and some are recognized in an amount equal to their required lease payments.

Rental payments to be received under these agreements are as follows:

		Straight-Line	Reco	gnition		s Recognized		
		Lease of	0	ther Leases		on Required e Payments		Total
	-	Hospital		ther Leases	Leas	e rayments	_	Total
2017	\$	8,683,000	\$	533,000	\$	346,000	\$	9,562,000
2018		8,944,000		549,000		360,000		9,853,000
2019		9,212,000		568,000		30,000		9,810,000
2020		9,488,000		598,000		30,000		10,116,000
2021		9,773,000		504,000		5,000		10,282,000
2022 - 2026		53,330,000		1,123,000		.=		54,453,000
2027 - 2031		56,087,000		940		X *		56,087,000
2032 - 2036		56,087,000		₩.		3 -2 0		56,087,000
2037 - 2040		41,130,000		<u> </u>		<u> </u>		41,130,000
	\$_	252,734,000	\$	3,875,000		771,000	\$	257,380,000

Note 5 - Long-Term Debt

The balances of the District's long-term debt at December 31 are set forth below:

	_	2016		2015
LTGO Refunding Bonds, 2012, 2.00% to 3.00%, principal due serially on December 1 in amounts from \$840,000 in 2017 to \$955,000 in 2020, including unamortized premium of \$242,949 in 2016 and \$304,978 in 2015.	\$	3,827,949	\$	4,694,978
III 2010 and 4501,770 III 2015.		0,02.,01.	_	-,
Less current portion		(840,000)	-	(805,000)
Long-term debt and obligations under capital leases, net of current portion	_\$_	2,987,949	\$_	3,889,978

Note 5 - Long-Term Debt (continued)

Long-term debt and other long-term liability activity summary for 2016 and 2015 is as follows:

	January 1, 2016	Additions	Reductions	December 31, 2016	Amounts Due Within One Year
LONG-TERM DEBT 2012 LTGO Bond	\$ 4,694,978	\$ -	\$ (867,029)	\$ 3,827,949	\$ (840,000)
OTHER LONG-TERM LIABILITIES	725,000		(625,000)	100,000	
	\$ 5,419,978	<u> </u>	\$ (1.492.029)	\$ 3.927.949	\$ (840.000)
LONG-TERM DEBT	January 1, 2015	Additions	Reductions	December 31, 2015	Amounts Due Within One Year
LONG-TERM DEBT 2012 LTGO Bond	•	Additions -	Reductions \$ (832,030)	•	Due Within
	2015			2015	Due Within One Year

Scheduled principal and interest repayments on long-term debt are as follows as of December 31, 2016:

		Long-Te	rm De	bt
	F	rincipal		Interest
2017	\$	840,000	\$	107,550
2018		875,000		82,350
2019		915,000		56,100
2020		955,000		28,650
		3,585,000		274,650
Amounts representing net unamortized premium		242,949		
	_\$	3,827,949		

In November 2012, the District issued the Limited Tax General Obligation Refunding Bonds, 2012 (2012 LTGO Refunding Bonds) for a par value of \$6,625,000, with a premium of \$496,236. The District has designated its M&O tax levy, approved by the voters of the District in September 1997, to the payment of principal and interest on the 2012 LTGO Refunding Bonds. The proceeds from the bonds were used to refund the remaining balance of the 1999 Series LTGO Bonds, which totaled approximately \$7,000,000. The refunding decreased the District's aggregate debt service payments by \$358,000 over the next eight years and resulted in an economic gain (difference between the present values of the old and new debt service payments) of \$440,000.

Note 6 - Property Taxes

The County Treasurer acts as an agent to collect property taxes levied in the county for all taxing authorities. Taxes are levied annually on January 1 on property values listed as of the prior May 31. Assessed values are established by the County Assessor at 100% of fair market value. A revaluation of all property is required every four years.

Taxes are due in two equal installments on April 30 and October 31. Collections are distributed monthly to the District by the County Treasurer. The District is permitted by law to levy up to \$0.75 per \$1,000 of assessed valuation for general District purposes. Washington State Constitution and Washington State Law, RCW 84.55.010, limit the rate. The District may also levy taxes at a lower rate. Further amounts of tax need to be authorized by the vote of the people.

For 2016 and 2015, the District's regular tax levy was \$0.091 and \$0.097 per \$1,000 on a total assessed valuation of \$24,348,183,650 and \$22,193,494,490, for a total regular levy of \$2,218,910 and \$2,162,700, respectively.

Property taxes are recorded as receivables when levied. Because state law allows for sale of property for failure to pay taxes, no estimate of uncollectible taxes is made.

Note 7 - Retirement Plan

The District sponsors a 401(a) plan and a 457 plan that are available to all benefit-eligible employees working over 20 hours per week. Employees are eligible to contribute at their hire date. Employees contribute to the 457 plan at their discretion. Employee contributions were approximately \$38,000 and \$34,200 during the years ended December 31, 2016 and 2015, respectively. The District contributes to the 401(a) plan at 3% of employee wages with an additional matching contribution of up to 3% of the amount contributed by the employee to the 457 plan. The District's policy is to fully fund the contributions. The District contributed approximately \$39,000 and \$36,000 during the years ended December 31, 2016 and 2015, respectively.

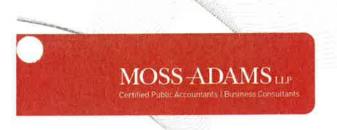
Note 8 - Commitments and Contingencies

Litigation and compliance with laws and regulations - The District is involved in litigation arising in the course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on the District's future financial position or results from operations.

Note 8 - Commitments and Contingencies (continued)

The hospital industry is subject to numerous laws and regulations of federal, state, and local governments. These laws and regulations include, but are not necessarily limited to, matters such as licensure, accreditation, government hospital program participation requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Government agencies are actively conducting investigations concerning possible violations of fraud and abuse statutes and regulations by hospital providers. Violations of these laws and regulations could result in expulsion from government hospital programs, together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed. Management believes that the District is in compliance with the fraud and abuse regulations, as well as other applicable government laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as regulatory actions unknown or unasserted at this time.

Program commitments - The District has a commitment to fund Senior Services of Snohomish County's program future expenditures in the amount of approximately \$47,000 per month through August 2018. The District has also committed to fund a Building Healthy Communities Fund program, with a remaining commitment of \$625,000 as of December 31, 2016, included in accounts and warrants payable in the statement of net position. The \$625,000 was funded in January 2017.



REPORT OF INDEPENDENT AUDITORS ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Commissioners Public Hospital District No. 2, Snohomish County, Washington dba Verdant Health Commission

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the statements of net position as of December 31, 2016, and the related statements of revenues, expenses, and changes in net position and cash flows for the year then ended, and the related notes to the financial statements, which collectively comprise the District's basic financial statements, and have issued our report thereon dated May 22, 2017.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the District's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control. Accordingly, we do not express an opinion on the effectiveness of the District's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.



Compliance and Other Matters

As part of obtaining reasonable assurance about whether the District's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Everett, Washington

May 22, 2017

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May 2017 Program Oversight Committee Summary

- Karianna Wilson joined Program Committee discussion this month
- Six New Applications for Review:
 - Three Applications for Funding from Childhood Obesity RFP. The Program Committee is recommending that the RFP remain open through November 2017 for new applications.
 - o Three New Regular Program Grant Requests
- Edmonds Senior Center Presentation

Program Funding Requests

Applications Recommended for Funding

1. City of Mountlake Terrace – "Kids Krew" Healthy Eating and Active Living (HEAL) Program: a \$10,000 request to educate children in an existing afterschool program about physical activity and nutrition. The program would serve 175 children at Madrona, Terrace Park, and Mountlake Terrace Elementary as well as pre-k children ages 3-5. The program would add a nutrition and physical activity component to the childcare program, would track pre/post knowledge of children participating, and ask families to report behavior change in exercise and nutrition.

The committee is recommending fully funding the request on a one-time basis for \$10,000.

2. Girls on the Run Snohomish County – Expanded South County & Scholarship Program: a request for a running program serving girls in the Edmonds School District. The expanded program would serve 150 girls with Verdant funds supporting 60 scholarships. The program runs over 10 weeks and girls (3rd-8th grade) then complete a 5k. The program measures increased self-confidence, physical activity/sedentary behavior, and program participation including completion of a culminating 5k.

The program committee is recommending fully funding the request at \$11,000 on a one-time basis

Applications that Need Additional Follow-Up

3. Farmer Frog – Meadowdale Pocket Farm: a request for \$25,000 in funding to build a small "pocket" farm in Meadowdale Park. The space would be leased from the City of Lynnwood and would be used for school field trips, growing and harvesting produce for backpack programs, how-to-classes on growing and harvesting produce, etc. The proposal referenced three outcomes: crop count, harvest count, and volunteer hours.

The program committee was interested in the concept of a community garden to produce healthy food for food banks/backpack programs and for nutrition education. However, committee members would like to see more specific health estimates for the number of people educated or provided with food.

4. Edmonds School District Family Resource Advocate: a request for an average of \$253,400 per year for three years to place Family Resource Advocates at 4 elementary schools. Funding would be used to expand the capacity of an existing program that is currently staffed part-time using school district Title 1 funds. The focus of the program would be to meet immediate basic needs like food and housing, advocate for health services, assist with transition to middle school and do home visits with families in crisis.

The program committee was interested in the concept of supporting children and youth at the elementary level but would like to see:

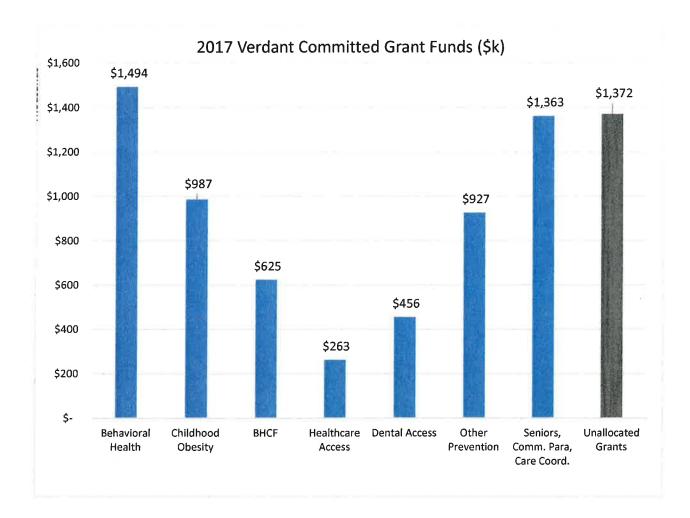
- Expanded program outcomes. The goals outlined in the proposal were modest given the funding level: 120 families served per year with 25 families connected to counseling, 40 to basic needs, and 10 families to healthcare access
- An explanation of how this program fits into larger family/student support plans. Verdant supports
 Student Support Advocates in middle and high schools and this project would support 4 elementary
 schools. Is there a larger expansion or sustainability plan for this program?
- 5. Puentes Community Care Network: a request for \$85,000 per year to train and support 40 Community Care Workers (aka community health workers) to support families with mental health resources. The project is focused on reaching immigrants to overcome fear and stress, and to help connect them with needed mental health resources. The applicant makes the case that immigration status is an important social determinant of health and would seek to support families dealing with consequences of immigration policies.

The program committee was interested in the concept of supporting the mental health needs of community residents, but had questions about the capacity of Puentes to deliver the program in Snohomish County given that it is a small non-profit based in King County. The committee would like Puentes to rework the proposal at a reduced request size and to clarify the mental health services and supports that would be offered by the Community Care Workers vs. Puente's counselors.

Applications Not Recommended for Funding

6. Edmonds Community College - Veteran's Training Support Center: a request for an average of \$145,700 per year for three years to support a Veterans Training Support Center (VTSC), which is a prevention program teaching service providers how to bridge the cultural gap to prevent suicide, mental illness and/or substance abuse. The project would seek to expand services to Snohomish County, build collaboration amongst service providers, and train South Snohomish County providers to better understand and serve veterans. The program would include 8 core workshops; 16 customized trainings, and connect with 130 licensed and 110 non-licensed providers.

The program committee is not recommending the program for funding because it is a large request for a program that indirectly supports residents and is not a top Verdant priority.



Verdant Community Wellness Center Summary May 2017

Completed Programs

1.	Ge	neral Community and Provider Events	Attendance
	1.	PEPS: Baby Peppers Weekly Support Group (April 6 – June 22)*	6-8
	2.	Aging Mastery Program (4/24-5/22)	22
	3.	Monthly Hero's Café for Veterans (4/25)	100+
	4.	Engaging Community Voice Workshop (5/1)*	38
	5.	SHIBA Monthly Training with OIC (5/2)	25
	6.	Basic Food Education Forum (5/3)	40
	7.	Korean Women's Association: Everyday Prevention Program (5/4)*	45
	8.	Pulmonary Hypertension Support Group (5/5)	6
	9.	ARC Mothers of Children with Disabilities Monthly Support Network (5/6)	26
	10.	Foster Parent Core Training Series (5/ 6, 10)	24
	11.	Evergreen Home Health (5/10, 16)	25
	12.	Latino Education & Training Institute Culminating Event (5/13)	35
	13.	Natural Leaders Training (5/15)	20
	14.	It Takes Two to Talk Parent Education Program (5/19-6/23)	16
	15.	Understanding Medicare Monthly Workshops (5/19)	18
	16.	Sea Mar Weekly Health Insurance & Basic Food Enrollment	varies
	17.	Ongoing – Community Support for Prescription Assistance (weekly)*	varies

2.	Nut	rition and Healthy Behaviors	Attendance
	1.	Learn & Work Out Home Fitness Series (April 29-June 7)*	22
	2.	Surviving & Thriving with Chronic Kidney Disease (5/3-6/7)*	16
	3.	Kids in the Kitchen: Sensational Snacking (5/6)*	47
	4.	Cooking Demo: The Flavors of Spain (5/9)	23
	5.	SC Health Leadership Coalition Nutrition Accelerator Workshop (5/10)	36
	6.	Getting to Goal Weight Reduction Program (5/18)	34
	7.	Spanish Language Weekly Women's Health Series (5/2-30)*	18
	8.	Lifestyle Change Check-Ins (drop – in 1 st and 3 rd Tuesdays)*	Varies
	9.	Getting to Goal Program (Weight Management/Activity Consultations)*	8-12 Clients

3.	Ве	havioral Health & Substance Use	Attendance
	1.	YWCA Women's Art Therapy Group (3/7 – 5/2)*	8-10
	2.	YWCA Intro to Mindfulness (4/11 – 5/30)*	10-14
	3.	Brain Health and Wellness Classes (4/24, 27; 5/4, 8, 11, 15, 22)*	Varies
	4.	YWCA Managing Difficult Emotions (4/26 – 6/14)*	6-8
	5.	National Alliance on Mental Illness "Connections" Group (4/27; 5/10, 25)	3-8
	6.	THS Parent Coaching Group (5/2 – 5/23)*	Varies
	7.	Snohomish Co. Caregiver & Kinship Caregiver Support Groups (5/4, 16, 18)	4-12
	8.	Foster Parent Training on the Drug Impacted Child (5/9)	14
	9.	Powerful Tools for Caregivers Workshop Series (5/17 – 6/21)	18
	10.	Adult Children of Alcoholics Weekly Support Group (weekly)	10-20
	11.	Veterans Drop-In Support (weekly - City of Lynnwood & monthly - County)	varies
4.	Otl	ner Programs	Attendance
	1.	Play and Learn Group, Wonderland Development Center (weekly)*	30+

Verdant Community Wellness Center Summary May 2017

Upcoming Programs

A. General Community and Provider Events

- 1. PEPS: Baby Peppers Weekly Support Group (April 6 June 22)*
- 2. Aging Mastery Program (April 24-May 22)
- 3. Foster Parent Core Training Series (May 6, 10; June 10, 17)
- 4. Monthly Hero's Café for Veterans (May 30, June 27)
- 5. Little Wonders Parent Support for Premature Infants (May 30 August 8)*
- 6. Korean Women's Association: Everyday Prevention Program (June 1)*
- 7. ARC Mothers of Children with Disabilities Monthly Support Network (June 3)
- 8. SHIBA Monthly Training with OIC (June 6)
- 9. SCAEYC Board Meeting (June 7)
- 10. Alzheimer's Association Staff Retreat (June 7)
- 11. WA Serves Veterans Training (June 8)
- 12. Childcare Provider STARS Training: Red Flags in Child Development (June 10)*
- 13. South County Walks Walk Leader Info Session (June 12)
- 14. Evergreen Home Health (June 14, 20)
- 15. Understanding Medicare Monthly Workshops (June 16)
- 16. Early Achievers Childcare Provider Training (June 24)

B. Nutrition and Healthy Behaviors

- 1. Spanish Language Weekly Women's Health Series (May 2-30)*
- 2. Surviving & Thriving with Chronic Kidney Disease (May 3 June 7)*
- 3. Farmers Market Cooking Demo: Spring into Local Eating (May 22)*
- 4. Cooking Demo: Meal in a Bowl (June 1)*
- 5. Feeding your Gut Microbiome Pre & Probiotics (June 8)*
- 6. Childcare Provider STARS Training: A Healthy Dose of Delicious (June 10)*
- 7. Cooking Demo: Summer Salads (June 13)*
- 8. Using Apps & Devices to Track Your Steps, Nutrition & Weight Loss (June 19)*
- 9. Sit, Sleep and Move to Improve Your Mild Back Pain (June 20, 22, 27, 29)*
- 10. Cooking Demo: Delicious Smoothies for Adults (June 22)*
- 11. Farmers Market Cooking Demo: (June 26)*
- 12. Road Back to Life Kidney Support Group (June 27)

C. Behavioral Health & Substance Use Focus

- 1. YWCA Intro to Mindfulness (April 11 May 30)*
- 2. YWCA Managing Difficult Emotions (April 26 June 14)*
- 3. THS Parent Coaching Group (May 2 23)*
- 4. Powerful Tools for Caregivers Workshop Series (May 17 June 21)
- 5. Brain Health and Wellness Classes (May 22, 25: June 1, 5, 10, 15, 19, 22, 26, 29)*
- 6. National Alliance on Mental Illness "Connections" Support Group (May 25; June 8, 22)
- 7. Snohomish County Caregiver Support Group (June 1, 15, 20)
- 8. Adult Children of Alcoholics Weekly Support Group (weekly)
- 9. Veterans Drop-In Support (weekly City of Lynnwood & monthly County)

* = Grant/Program Funded Partner

EnhanceWellness - Dec. 2011 - Present

- 307 people have completed the program
- 79% have maintained or improved in the given area they have choose to address
- There have been over 3500 client hour contacts

PEARLS - 2014 - Present

- Caseload of 42
- 28 have completed program
- There have been over 330 client hour contacts
- 56% achieved remission, 61% achieved response
- UW Health Promotion Research Center provides training, technical support and bi-monthly clinical supervision

UW Health Promotion Research Center

UWHPRC has reached out to ESC to participate in a pilot project to offer PEARLS counseling to caretakers of people diagnosed with Alzheimer's. Alzheimer's Association is also a project partner.

DSHS Washington Connection's Community Partner

Snomentia

Partnership between several non-profits, community members and businesses to develop programing for people with ESML. We will begin offering programs throughout South Snomomish County this summer. First project will be a collaboration with Cascadia Art Museum.

Resource and Referral

Approximately 650 hours annually helping people in person or by telephone contact with resources.... generally in-home care, assisted living facilities or basic needs such as food and/or housing. The nurse answers multiple questions regarding medical concerns and performs blood pressure checks.

PEARLS

Program to Encourage
Active, Rewarding Lives for Seniors

Feel better and Enjoy Life more.





In the past two weeks,

Have you had little interest or pleasure in doing things?

Have you been feeling down, sad or hopeless?

If you answered yes to one of the above questions, then PEARLS may be a program for you!

Help from a PEARLS Counselor

PEARLS is an evidence—based depression management program for mild to moderate depression.

The program combines problem solving treatment, social and physical activity and pleasant activity scheduling to manage symptoms of depression.

All this is done one—on—one with a trained PEARLS counselor.

You are not alone. We are here to help.

Depression affects up to 20% of older adults
Depression affects your health and quality of life
Depression is NOT a normal part of aging

TO SCHEDULE AN APPOINTMENT, CONTACT A PEARLS COUNSELOR:



MICHELLE REITAN, SOCIAL WORKER 425-954-2523

EDMONDS
SENIOR CENTER
220 Railroad Ave
PO Box 717
Edmonds, WA 98020

ENHANCEWELLNESS

Would you like to improve your overall wellbeing, either physical or emotional?

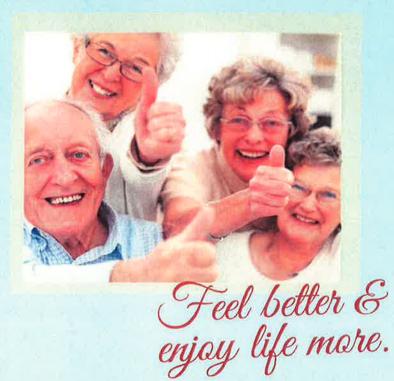
Is your current health or another life situation keeping you from being physically active or socially engaged?

Have you been diagnosed with a chronic condition?

If you answered yes to one of the above questions, then Enhance Wellness may be the answer for you!

FREE 6 MONTH CUSTOMIZED PROGRAM

Enhance wellness is a free, award winning, health management program designed to use you as the expert on changes you choose to make in your life. While working with a registered nurse or social worker, you will learn strategies for making positive choices to improve your physical wellbeing.





WE ARE HERE FOR YOU.

LET US HELP YOU

SET & ACHIEVE YOUR

HEALTH CARE GOALS.

TO MAKE AN APPOINTMENT PLEASE CONTACT



SUE SHEARER, RN 425/774-5555 EXT. 113



MICHELLE REITAN, SOCIAL WORKER 425/954-2523

EDMONDS SENIOR CENTER
220 Railroad Ave
PO Box 717
Edmonds, WA 98020

Health and Wellness

Fitness/Health

- **Enhance Fitness**
- Soft exercise Gentle Yoga
- Tai Chi
- Parkinson's fitness
- Summer walking program

Healthy Living Workshops

- Living Well Series
- Chronic Pain
- Chronic Conditions
- Diabetes
- **Annual Healthy Living Fair**
- Advance Directives 2x/yr
- Medicare Prescription Plans
- Senior Resources-housing
- Variety of others....

Health and Personal Care

- Blood Pressure Checks
- Eyeglass Care
- Foot Care
- Hearing Screening
- Table Massage
- **Enhance Wellness**
- PEARLS (depression)
- Bastyr Clinic services
- Community Acupuncture
- Haircuts

Counseling and Support

- Support groups for Parkinson's; Chronic Pain; Diabetes; Early Stage Memory Loss
- Lean on Me—grief support
- Statewide Health Insurance Benefits Advisors

Medical Equipment Loans

Recreation/Social

Dancing

- Clogging
- Ballroom Dance Sampler
- Friday Fling Dances
- Learn to Line Dance

Dining/Groups/Social

- Dining Out Group
- ice Cream Tuesdays
- Monthly Birthday Social

Games including:

- Bridge—multiple groups
- Cribbage Club
- Gotzze
- MahJongg
- Ping Pong
- Pinochle
- Poker
- Pool
- Scrabble

during the lunch hour Musical Entertainment – M – F

Wii Bowling

Friday Afternoon at the Movies

Special Events:

Holiday dinners/parties

Hikes: 2x/month

Trips and Tours: wide variety of

casinos, and attractions. 3-4/month trips to area performances, events,

Education/Information

EDMONDS SENIOR CENTER PROGRAM OVERVIEW

Health and Wellness Workshops

(see column 1)

Bible Study

Behavior and History

- Modern World History
- **Current Events**

Computers and Learning

- Computer Fundamentals
- How to Download Music, etc
- Smart Phone Use
- Internet 101
- Tablet 101
- Computers/Genealogy

Defensive Driving

Languages

- German
- Spanish I, II
- Swedish
- Japanese

Current film series:

History of American Architecture in 11 Films

Employment

Employment Office 2x/week

Finance

- Financial Services-free 30 min
- AARP Tax Prep

Legal

- Legal Advisor 1x/mo/ 2 hours
- Notary Service

Author Talks

Library Books/movies available

Info on Community Transit, DART

The Arts/Crafts

Once/week art classes such as:

China painting, driftwood sculpture, drawing, mosaic, portrait drawing, watercolor

Music

- Senior Swingers Orchestra
- Sound Singers
- Ukulele

Writing Groups

- Monthly Writers Workshop
- Writers Round Table

Nutrition

- Community Breakfast 1x/mo
- Daily Lunch Program
- Info on IGA online ordering
- Info on Meals on Wheels
- Bank 1/wk Transportation provided to the Food

Volunteer Opportunities

- **Board of Directors**
- Committees
- Special events
- Thrift Store
- Phone bank
- Food service/coffee bar
- Receptionists
- Bingo callers
- Help with bulk mailings Grass Roots Committing

From JBrace Milliams 5.24.2017

2017	2017 Monthly Deliveries	liveries		2016 Monthly Deliveries	iveries	2015	2015 Monthly Deliveries	liveries	20	014 Mo	2014 Monthly Del
Month	Deliveries	Deliveries SCN Admit	Month	Deliveries	SCN Admit	Month	Deliveries	SCN Admit	Month		Deliveries
Jan	66	3	Jan	7.5	4	Jan	83	2	Jan	_	90
Feb	117	2	Feb	104	6	Feb	86	o	Feb		75
Mar	86		Mar	108	6	Mar	105	7	Mar		96
Apr	115	7	Apr	113	5	Apr	87	10	Apr		100
Мау			May	108	11	Мау	105	4	Мау		100
Jun			Jun	100	6	Jun	101	4	Jun		79
Juľ			luC	103	12	Jul	66	9	Jul	_	106
Aug			Aug	104	6	Aug	107	6	Aug	6	103
Sep			Sep	102	8	Sep	113	11	Sep		115
Oct			Oct	120	6	Oct	88	8	DOCT		100
Nov			Nov	100	9	Nov	66	15	Nov	>	100
Dec			Dec	66	12	Dec	91	7	Dec	u u	84
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SCN Admit	Month	Deliveries	SCN Admit
13	Jan	103	10
14	Feb	78	2
10	Mar	84	14
11	Apr	87	7
6	Мау	86	30
13	Jun	104	15
10	Jut	108	23
11	Aug	107	19
14	Sep	97	16
7	Oct	105	20
2	Nov	84	18
9	Dec	109	15
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