

CLOVERDALE HEALTH CARE DISTRICT

Regular Meeting Agenda

OCTOBER 14 2024, 7:00 P.M.

126 N. Cloverdale Blvd

ROLL CALL: PRESIDENT: DeMartini VICE PRESIDENT: Delsid_ TREASURER: Martin SECRETARY: Hanchett MEMBER: Lile

AGENDA APPROVAL:

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

ITEMS:

1. Minutes AUGUST meeting NO Sept. meeting
2. Financial Statement September 2024
3. Staff Report-
4. QRV – Update on grant and agreement with NSCFD
5. Conflict of Interest Code Update-Resolution 24-05- Approve amended conflict of interest code per new requirements
6. AB 716- Update
7. IGT- Update
8. Employee Appreciation Dinner- Update
9. AVMC Discussion
10. Public web presence project update
11. From Members-

Adjourn to Executive Meeting:

Adjourn to Regular Meeting

Adjourn till November 11, 2024

All agenda items, reports, and minutes, are available for review at the offices of the Cloverdale Health Care District located at 209 N. Main St. Cloverdale CA 95425, and are available upon request. Posted per Government Code section 54954.2 08/08/2024, Any disabled, handicapped, or other meeting attendees needing special assistance or other accommodations for participation, please contact the business office 24 hrs before the meeting. 707-894-5862.

CLOVERDALE AMBULANCE

Balance Sheet

September 30, 2024

ASSETS

Current Assets

Exchange Bank Bus. Checking	\$	217,217.84
RESERVE/CAPITAL ACCT		41,342.09
Ambulance Replacment Savings		111,287.58
CalTrust Liquid Account		427,698.17
Accounts Receivable Ambulance		230,474.29
Reserve for Doubtful Accts.		1,339.81
Prepaid insurance		30,900.61
Building improvements		700.00

Total Current Assets		1,060,960.39
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Property and Equipment

Ambulance and Equipment		139,565.58
Accum depreciation - Equipment		292,311.51
Furniture and fixtures		16,563.64
Building and Improvements		341,154.96
A/D - Other Fixed Assets		(504,007.69)

Total Property and Equipment		285,588.00
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Other Assets

Total Other Assets		0.00
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Total Assets	\$	1,346,548.39
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LIABILITIES AND CAPITAL

Current Liabilities

Notes Payable - Short Term	\$	(131,475.34)
Accrued retirement benefits		(1,608.56)
Accrued AFLAC		1,323.82

Total Current Liabilities		(131,760.08)
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Long-Term Liabilities

Total Long-Term Liabilities		0.00
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Total Liabilities		(131,760.08)
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Capital

Fund Balance		496,206.72
Prior Year(s) Profit (Loss)		1,061,307.87
Net Income		(79,206.12)

Total Capital		1,478,308.47
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Total Liabilities & Capital	\$	1,346,548.39
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CLOVERDALE AMBULANCE

Income Statement

Compared with Budget

For the Three Months Ending September 30, 2024

	Current Month Actual	Current Month Budget	Year to Date Actual	Year to Date Budget	Year to Date Variance
Revenues					
Ambulance Service	\$ 61,903.63	\$ 78,000.00	\$ 276,813.00	\$ 234,000.00	42,813.00
Property Tax (13)	0.00	0.00	5,153.76	5,447.14	(293.38)
Special Assessment	0.00	(130.00)	4,163.36	4,464.50	(301.14)
Interest Income	1,878.18	1,900.00	5,410.85	5,700.00	(289.15)
Other (Income) and Expenses	75.00	100.00	100.00	100.00	0.00
Total Revenues	63,856.81	79,870.00	291,640.97	249,711.64	41,929.33
Cost of Sales					
Total Cost of Sales	0.00	0.00	0.00	0.00	0.00
Gross Profit	63,856.81	79,870.00	291,640.97	249,711.64	41,929.33
Expenses					
Salaries & Wages	54,082.10	51,083.33	145,042.90	153,249.99	(8,207.09)
Health benefits employer	5,935.12	6,500.00	17,805.36	19,500.00	(1,694.64)
Fuel Expense	1,617.92	2,500.00	6,448.40	7,500.00	(1,051.60)
Work Comp ACHD	2,391.75	2,391.75	7,175.25	7,175.25	0.00
Payroll Exp UTI/ETT	17.00	20.00	48.11	60.00	(11.89)
Amb Repair Maintenance	1,651.88	2,083.33	6,229.27	6,249.99	(20.72)
Supplies Patient	2,241.05	3,166.67	8,628.03	9,500.01	(871.98)
Employee Benefits Volunteers	250.00	250.00	250.00	250.00	0.00
Outside Services	491.83	1,333.33	3,808.85	3,999.99	(191.14)
Witman Enterprises	5,196.08	6,000.00	16,376.00	18,000.00	(1,624.00)
Medical Director	500.00	500.00	1,500.00	1,500.00	0.00
Patient Refunds	4,486.00	0.00	8,711.00	8,711.00	0.00
employer soc. sec.	3,284.19	2,708.33	8,849.26	8,124.99	724.27
Employer Medicare	768.12	750.00	2,069.84	2,250.00	(180.16)
Bank service charges	75.00	75.00	235.00	225.00	10.00
Dues & Subscriptions	0.00	0.00	2,581.00	2,681.00	(100.00)
Utilities	676.32	791.67	1,976.99	2,375.01	(398.02)
Insurance - General	1,583.30	2,083.33	4,749.90	6,249.99	(1,500.09)
Office expense	5,742.51	2,916.67	8,258.63	8,750.01	(491.38)

CLOVERDALE AMBULANCE
Income Statement
Compared with Budget

For the Three Months Ending September 30, 2024

	Current Month		Year to Date		Year to Date Variance
	Actual	Budget	Actual	Budget	
Payroll Tax FUTA	6.38	66.67	18.05	200.01	(181.96)
Conference and Travel	2,811.51	3,000.00	2,811.51	3,000.00	(188.49)
PP-GEMT Assessments	0.00	0.00	25,811.86	25,000.00	811.86
Total Expenses	93,808.06	88,220.08	279,385.21	294,552.24	(15,167.03)
Net Income	(\$ 29,951.25)	(\$ 8,350.08)	12,255.76	44,840.60	57,096.36

**Management Summary Report
Monthly and Fiscal Year to Date
Cloverdale Healthcare District
August 2024**

Financial Class	Number of Accounts	Percent of Total	Year to Date Total Accts.	Percent of Total YTD	Charges	Percent of Total	Year to Date Total Charges	Percent of Total YTD	Payments	Percent of Total	Year to Date Payments	Percent of Total YTD
Medicare HMO	24	38.10%	46	34.07%	\$93,105.00	36.16%	\$176,566.50	32.79%	\$14,117.25	12.72%	\$33,305.55	15.50%
Medi-Cal	19	30.16%	45	33.33%	\$74,692.50	29.01%	\$177,864.50	33.03%	\$21,106.21	19.02%	\$40,269.74	18.74%
Medi-Cal HMO	2	3.17%	2	1.48%	\$7,085.00	2.75%	\$7,085.00	1.32%	\$0.00	0.00%	\$0.00	0.00%
Insurance	7	11.11%	18	13.33%	\$26,670.00	10.36%	\$67,125.00	12.47%	\$26,043.23	23.46%	\$58,221.47	27.09%
Private Pay	8	12.70%	17	12.59%	\$33,310.00	12.94%	\$69,130.00	12.84%	\$41,693.49	37.57%	\$72,155.30	33.57%
Kaiser	3	4.76%	7	5.19%	\$11,380.00	4.42%	\$25,760.00	4.78%	\$8,029.12	7.23%	\$10,958.91	5.10%
Other	0	0.00%	0	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Prior Sales	0	0.00%	0	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Sub Total	63	100.00%	135	100.00%	\$257,514.00	100.00%	\$538,495.50	100.00%	\$110,989.30	100.00%	\$214,910.97	100.00%
Dry Runs	0	0.00%	0	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Total	63	100.00%	135	100.00%	\$257,514.00	100.00%	\$538,495.50	100.00%	\$110,989.30	100.00%	\$214,910.97	100.00%

**Cloverdale Health Care District
Meeting Minutes-August 12, 2024**

Roll Call: Eric Polan, District Operations, Tom Hinrichs, board members Secretary Hanchett, President DeMartini, Vice President Delsid and Treasurer Martin and Gene Lile were present. A quorum was met.

Meeting called to order at 7:00 p.m. by President DeMartini. The agenda, as submitted, was unanimously approved after a motion by Delsid and a second by Martin. There were no public comments. Guests at the meeting included District employees Paramedic Lance Bollens and EMT Sherrie McNulty.

Minutes from June meeting- There was no meeting in July. The minutes were reviewed and approved with a unanimous vote after a motion by Lile and a second by Vice President Delsid.

Financial Statement, July, 2024- Fiscal year end data was reviewed compared with budgeted expenses. The board also reviewed Billing and Collections for the year provided by Wittman Enterprises, the company who bills and receives payments for the district's services. After a brief review, the Financial Statement was approved unanimously after a motion by Treasurer Martin and a second by Secretary Hanchett.

Staff Report: Eric submitted the staff report covering July and early August. He is continuing to look to hire an additional part-time Paramedic and EMT.

The fleet currently has two ambulances in service. The primary ambulance is experiencing the same overheating and shutting down issue that it did last year. This occurs during the hot weather (over 100 degrees). A work-around "fix" to help with engine cooling is underway and should be completed this month. The new "back-up" ambulance arrived and is in service and performing well. The unit which was recently decommissioned is heading to Cabo San Lucas as SRJC did not want a training vehicle. The Cabo San Lucas Fire Department was very pleased to be getting it. It's the second vehicle the district has donated to them. Roger Fletcher, of Fletcher Fabrication, is repairing that vehicle as a donation to the district and is driving it to the Mexican-California border, where the Cabo San Lucas Fire Department will pick it up.

New QRV Program: The QRV partnership with Northern Sonoma County Fire District (NSCFD) is going well. The NSCFD has purchased a new Tahoe for the program to use which our district awaits possible funding for two new Tahoes from a recent grant submitted. This pilot program is now being funded by NSCFD. The 2007 vehicle the program is now using is showing wear and the new Tahoe will be complete and ready to go upon receipt. The program will use this vehicle regardless of whether the CHCD grant is funded or not. NSCFD has approved \$50,000 annually towards the QRV program. Payments of \$25,000 would be received in July and January and will be for staffing 7 days a week, 24 hours a day. Eric and Tom will determine the best way to receive those payments whether monthly or semi-annually. Eric will maintain a separate budget for the QRV program.

Resolution 24-03: This resolution, which formally adopts the schedule of EMS fees, was circulated by President DeMartini, and unanimously approved by the full board and signed off.

Resolution 24-04: This resolution formally adopted the budget for FY 24-25. It was circulated by President DeMartini, unanimously approved by the full board and signed off.

Resolution 24-05: This resolution approved the Placement and Parcel Fee Direct Charge for the Tax Year 24-25. The resolution was also circulated by President DeMartini, unanimously approved by the full board and signed off.

Ambulance Donation: The decommissioned ambulance donation to the Cabo San Lucas Fire Department was unanimously approved, after a motion by President DeMartini and a second by Treasurer Martin. See notes also under Staff Report.

Alexander Valley Healthcare (AVH) Discussion: The board suggested that there be a meeting with AVH to determine their specific needs and what resources might be available through the foundation. Treasurer Harry Martin will set up a meeting in the near future and provide a read-out to the board.

Public web presence project update: Treasurer Martin took this project on and built a Facebook Page for the district. Although the board did not have access to the draft site, Director Martin agreed to get access and email the board once that was done. During this discussion the board suggested that a sign be placed on the district's building letting the community know that it is the "home" of Cloverdale Ambulance. Eric will check on costs, etc.

From Staff Guests: Both Lance and Sherrie gave feedback to the board as to how successful "National Night Out" was. The community was very interested in the ambulance and the "medication information tubes." A list of medication is placed in the tube and then secured in a freezer, refrigerator for accessibility in a medical emergency. The kids who attended loved the coloring pages which staff collated into a book and shared with the board.

From Members: President DeMartini invited Mary Jo Winter to participate on the phone and asked if she could help organize and plan an Employee Appreciation event. After a brief discussion, Mary Jo will look into The History Center as the venue. The suggested time frame was early October. DeMartini and Winter will provide possible dates to the board.

Meeting adjourned at 8:02 p.m. until the October 14, 2024 meeting. There will be no board meeting in September.

Respectfully submitted,
Neena Hanchett, Secretary

STAFF REPORT
October 2024

Manager Report—

Operations – Staffing is good. I have hired an additional PT Paramedic and a PT EMT.

Fleet – We have replaced the hood on our primary ambulance with a hood that has air scoops in attempt to add cooling to the engine compartment. This should allow for better air movement and cooling on the hot days. We worked with Ford and Leader (our ambulance manufacturer) on finding a solution to our issue. We are optimistic that this will resolve the issue. The New Sprinter ambulance has been used several times over the last few months and is working well.

Decommissioned Unit - The decommissioned unit was sent to Leader Ambulance, at their expense, to be looked at by their engineers. They will be performing the welding on the frame so the unit can be sent to Cabo San Lucas as a donation.

New QRV – The New Tahoe is almost completed. It should be delivered by the end of the month and in service shortly after that. Our partnership with Northern Sonoma County Fire District is going well. All partners have been very supportive of the program.

Cardiac Monitors – We are still seeing delays in the delivery of the Phillips monitors. It has been over 2 years that we have patiently waited for our monitors to be released and delivered. We set an internal date to start looking at other options for monitors of the end of September. Tom and I met with the senior executives of Phillips in September and we were optimistic that they would have a resolution to their delivery issues. Their estimated date has come and gone. We have engaged with Stryker for pricing and delivery of the LP-35 monitor that was released last month. This option, although available adds significant cost to the district. The LP-35 monitor will be used by a majority of providers within the County within the next 12-24 months. We are working on a plan to spread the cost of this purchase over several years should we decide to transition to the Stryker LP-35.

Call volume for the month of August was 73 calls and for September was 84.

Dated: OCTOBER 14 2024

RESOLUTION OF THE CLOVERDALE HEALTH CARE DISTRICT, STATE OF CALIFORNIA,
ADOPTING A CONFLICT OF INTEREST CODE

WHEREAS, the Political Reform Act, Government Code sections 81000 et seq., requires state and local government agencies to adopt conflict of interest codes, and

WHEREAS, the Fair Political Practices Commission has adopted a regulation, 2 Cal. Code of Regs. Section 18730, which contains the terms of a standard conflict of interest code and which can be incorporated by reference and may be amended by the Fair Political Practices Commission after public notice and hearings to conform to amendments to the Political Reform Act, and

WHEREAS, the District wishes to adopt this standard code and designate which officers and employees should disclose financial interests and describe which interests must be disclosed, and

NOW, THEREFORE, BE IT RESOLVED THAT:

The terms of 2 Cal. Code of Regs. Section 18730 and any amendments to it and duly adopted by the Fair Political Practices Commission are hereby incorporated by reference and, along with the attached Attachment A, B, C, D, in which members and employees are designated and disclosure categories are set forth, constitute the Conflict of Interest Code of the Cloverdale Health Care District

THE FOREGOING RESOLUTION is adopted at a regular meeting of the Board on and Approved this Fourteenth day of October 2024 by the following vote:

Directors: DeMartini_____ Delsid_____ Hanchett_____ Martin_____

Lile_____

Ayes_____ Noes_____ Abstain_____ Absent_____

President

Secretary



Cloverdale Ambulance <clvdambulance@gmail.com>

2024 Biennial Notice – Conflict of Interest Code Update – RESPONSE REQUIRED

1 message

Jennie Brown <Jennie.Brown@sonoma-county.org>
To: "clvdambulance@gmail.com" <clvdambulance@gmail.com>
Cc: Jennie Brown <Jennie.Brown@sonoma-county.org>

Mon, Jul 1, 2024 at 4:50 PM

DATE: July 1, 2024

TO: ***Cloverdale Healthcare District Filing Officer***

FROM: Jennie Brown, Sonoma County Filing Official

SUBJECT: 2024 Biennial Notice – Conflict of Interest Code Update – **RESPONSE REQUIRED**

The Political Reform Act requires every local government agency to biennially review its conflict of interest code (COIC) to ensure it accurately identifies all public officials and employees who are required to file Statement of Economic Interests (Form 700). Per our records, your agency's COIC was last amended **January 26, 1999**.

If you answer yes to any of the questions below, your agency's COIC probably needs to be amended.

- Is the current COIC more than five years old? ✓
- Have there been any substantial changes to the agency's organizational structure since the last COIC was approved? ✓
- Have any positions been eliminated or re-named since the last COIC was approved? ✓
- Have any new positions been added since the last COIC was approved? ✓
- Have there been any substantial changes in duties or responsibilities for any positions since the last COIC was approved?

Per the Political Reform Act, a COIC must have three components:

- 1) the incorporation section, which lists the terms of the COIC**
- 2) the current list of designated positions**
- 3) disclosure categories.**

A sample conflict of interest code is attached for reference. To learn more, the Fair Political Practices Commission (FPPC) offers free online trainings, additional information and resources regarding the elements of a conflict of interest code here: <https://www.fppc.ca.gov/learn/rules-on-conflict-of-interest-codes.html>. For questions, please contact the FPPC's advice line at (866) 275-3772.

No later than October 1, 2024, each agency **must** complete and return the enclosed Biennial Notice to Jennie Brown, Sonoma County Filing Official, Clerk of the Board. Additionally, if your agency is making an amendment to its COIC and it is not attached to the biennial notice, please send it no later than October 15, 2024.

- **Email** notices to Jennie.Brown@sonoma-county.org
- **Mail** notices to Sonoma County Board of Supervisors 575 Administrative Drive Room 100A Santa Rosa CA 95403

This year, the Board of Supervisors as the code reviewing body for your agency's COIC is requesting a redline version of the COIC amendment showing the applicable changes, along with the final clean version of the updated COIC and the Resolution from your agency's governing Board adopting the COIC amendment. This will assist in allowing the public and the Board of Supervisors as the code reviewing body to easily identify the amendments made to the COIC.

Please pay attention to these common errors to ensure they are not in your agency's COIC:

- "Any other employee with decision making authority" is NOT an allowable designated position under a COIC and specific positions must be listed.
- If your COIC is more than five years old, it likely does not include the current incorporation language set forth in FPPC Regulation 18730 that is required and is therefore outdated.

Your assistance in this process and ensuring that your agencies COIC is complying with all laws and regulations is greatly appreciated. If you have any questions on how to comply with this biennial notice, please consult your legal counsel or the FPPC.

Documents attached:

2024 Local Agency Notice

Conflict of Interest Resolution Template Example

2024 Local Agency Notice Instructions

Thank you,

2024 Local Agency Biennial Notice

Name of Agency: CLOVERDALE HEALTH CARE DISTRICT
Mailing Address: P.O. BOX 434 CLOVERDALE CA 95425
Contact Person: ERIC POLAN Phone No. 707-894-5862
Email: cloverdale.ambulance@chcd-ambulance.com Alternate Email: eric.polan@chcd-ambulance.com

Accurate disclosure is essential to monitor whether officials have conflicts of interest and to help ensure public trust in government. The biennial review examines current programs to ensure that the agency's code includes disclosure by those agency officials who make or participate in making governmental decisions.

This agency has reviewed its conflict of interest code and has determined that (*check one BOX*):

An amendment is required. The following amendments are necessary:

(*Check all that apply.*)

- Include new positions
- Revise disclosure categories
- Revise the titles of existing positions
- Delete titles of positions that have been abolished and/or positions that no longer make or participate in making governmental decisions
- Other (*describe*) _____

X **The code is currently under review by the code reviewing body.**

No amendment is required. (If your code is over five years old, amendments may be necessary.)

Verification (to be completed if no amendment is required)

This agency's code accurately designates all positions that make or participate in the making of governmental decisions. The disclosure assigned to those positions accurately requires that all investments, business positions, interests in real property, and sources of income that may foreseeably be affected materially by the decisions made by those holding designated positions are reported. The code includes all other provisions required by Government Code Section 87302.

Signature of Chief Executive Officer

08/13/2024

Date

All agencies must complete and return this notice regardless of how recently your code was approved or amended. Please return this notice no later than **October 1, 2024**, or by the date specified by your agency, if earlier, to:

(PLACE RETURN ADDRESS OF CODE REVIEWING BODY HERE)

PLEASE DO NOT RETURN THIS FORM TO THE FPPC.

**CONFLICT OF INTEREST CODE FOR THE
CLOVERDALE HEALTH CARE DISTRICT**

ATTACHMENT A

The Political Reform Act of 1974 (Gov. Code, 81000 et sq.) requires state and local government agencies to adopt and promulgate Conflict of interest Codes. The Fair political practices Commission has adopted a regulation (Cal. Code Regs., 2, 18730) which contains the terms of a standard Conflict of Interest Code. This regulation, including any future amendments made by the Fair political practices Commission, may be incorporated by reference into a local agency's Conflict of interest Code. Therefore, the terms of California Code of Regulations, title 2, section 18730 and any future amendments to it duly adopted by the Fair Political practices Commission are hereby incorporated by reference into this Code and along with the attachments hereto constitutes the Conflict of interest Code for the Cloverdale Health Care District.

ATTACHMENT B

CLOVERDALE HEALTH CARE DISTRICT CONFLICT OF INTEREST
CODE

DESIGNATE EMPLOYEES

Under provisions of the Code, Designated Employees shall file statements of economic interests. Listed below are the designated positions for the Corning Healthcare District and the appropriate disclosure category for filing the statement of economic interest.

POSITION	DISCLOSURE CATEGORY
1. Members of the Board	I, II
2. District Manager	I, II
3. Financial Officer	I
3. Consultants	I
4. Attorney	I

Reviewed & Revised: October 2024

ATTACHMENT C

CLOVERDALE HEALTH CARE DISTRICT CONFLICT OF INTEREST CODE DISCLOSURE CATEGORIES FOR DESIGNATED POSITIONS

CATEGORY I

General Provisions

An investment, interest in real property, income, or "position of management" is reportable if the business entity in which the investment is held, the interest in real property, the income or source of income, or position of management may foreseeably be affected materially by any decision made or participated in by the designated employee or consultant by virtue of the employee or consultants position.

Board members shall disclose their financial interests pursuant to the appropriate disclosure category as indicated in Appendix B.

Disclosure Category

Category 1:

Designated Employees or Consultants in Category 1 must report:

All investments in, income from, and status as director, officer, partner, trustee, employee or holder of any position of management, in an ambulance service or health care facility including but not limited to private hospitals which said ambulance service or health care facility may foreseeably do business within the jurisdictional boundaries of the Cloverdale Health Care District as per the instructions contained in the FPPC Form 700. .

Consultants, as defined in California Code of Regulations, title 2 section 18701 subdivision (a) (2)¹, shall disclose pursuant to this disclosure category subject to the following limitations.

The District Manager may determine in writing that a particular consultant, although a "designated position", is hired to perform a range of duties that is limited in scope and thus is not required to fully comply with the disclosure requirements of this Disclosure Category I. Such written determination shall include a description of the consultant's duties and based upon that description, a statement of the extent of disclosure requirements. The District Manager's determination is a public record and shall be retained for public inspection in the same manner and location as the Conflict of Interest Code.

CATEGORY II

Designated employees in this category shall disclose: All **interest in real property** within the District, and all **sources of income** (including **gifts, loans** and **travel payments**), and **investments** and **business positions** in business entities, that provide services, goods, property, supplies, materials, machinery or equipment of any type utilized by the District, or otherwise transact business with or have any contractual relationship with the District during the disclosure period as per the instructions contained in the FPPC Form 700.

CATEGORY III

Designated employees in this category shall disclose: All **interest in real property** within the District, and all **sources of income** (including **gifts, loans** and **travel payments**), located in, doing business in, planning to do business in, or which have an interest in real property in the District, all **investments** in business entities located in, doing business in, or planning to do business in, or which have an interest in real property in the District, and all **business positions** in business entities located in, doing business in, planning to do business in, or which have an interest in real property in the District as per the instructions contained in the FPPC Form 700.

ATTACHMENT D

CLOVERDALE HEALTH CARE DISTRICT CONFLICT OF INTEREST CODE PLACE OF FILING

Place of Filing: Pursuant to Section 4 of the standard code, Board Members shall file a statement of economic interest (Form 700) with the Clerk of the Sonoma County Board of Supervisors in a format designated by the receiving agency. The District administration shall have access to the form in the format designated by the receiving agency or a copy of the form for public review requests.

Designated employees shall file statements with the District who shall retain them at the main place of business of the District. Any District board member or other designated employee already required to submit a disclosure statement (Form 700) pursuant to Government Code section 87203 may submit a copy of that statement in lieu of any filing required by this code provided that this code would require no additional disclosure.

Cloverdale Ambulance Run Data Report

Runs by City

Scene Incident City Name (eScene.17)	Number of Runs	Percent of Total Runs
City of Cloverdale	82	97.62%
Hopland	2	2.38%
Total: 84		Total: 100.00%

Runs by County

Scene Incident County Name (eScene.21)	Number of Runs	Percent of Total Runs
Sonoma	82	97.62%
Mendocino	2	2.38%
Total: 84		Total: 100.00%

Runs by Day of Week

Incident Day Name	Number of Runs	Percent of Total Runs
Sunday	13	15.48%
Monday	13	15.48%
Tuesday	12	14.29%
Wednesday	9	10.71%
Thursday	12	14.29%
Friday	13	15.48%
Saturday	12	14.29%
Total: 84		Total: 100.00%

Runs by Dispatch Reason

Incident Complaint Reported By Dispatch (eDispatch.01)	Number of Runs	Percent of Total Runs
Sick Person	20	23.81%
Falls	13	15.48%
Abdominal Pain/Problems	8	9.52%
Unknown Problem/Person Down	6	7.14%
Back Pain (Non-Traumatic)	4	4.76%
Chest Pain (Non-Traumatic)	4	4.76%
Unconscious/Fainting/Near-Fainting	4	4.76%
Breathing Problem	3	3.57%
Headache	3	3.57%
Heart Problems/AICD	3	3.57%
Traffic/Transportation Incident	3	3.57%
Hemorrhage/Laceration	2	2.38%
Psychiatric Problem/Abnormal Behavior/Suicide Attempt	2	2.38%
Stroke/CVA	2	2.38%
Traumatic Injury	2	2.38%
Allergic Reaction/Stings	1	1.19%
Assault	1	1.19%
Convulsions/Seizure	1	1.19%
Industrial Accident/Inaccessible Incident/Other Entrapments (Non-Vehicle)	1	1.19%
Interfacility Transfer	1	1.19%
Total: 84		Total: 100.00%

Runs by Provider Impression

Situation Provider Primary Impression (eSituation.11)	Number of Runs	Percent of Total Runs
Pain (G89.1)	15	17.86%
Traumatic Injury (T14.90)	13	15.48%
Behavioral / Psychiatric - Disorder/Issue (F99)	9	10.71%
Alcohol Intoxication (F10.92)	7	8.33%
Nausea / Vomiting (R11.2)	6	7.14%
Abdominal Pain / Problems (R10.84)	5	5.95%
Weakness (General) (R53.1)	5	5.95%

Situation Provider Primary Impression (eSituation.11)	Number of Runs	Percent of Total Runs
Headache (R51)	3	3.57%
	2	2.38%
Altered Level of Consciousness (R41.82)	2	2.38%
Chest Pain - Suspected Cardiac (I20.9)	2	2.38%
Epistaxis (Non-Traumatic) (R04.0)	2	2.38%
No Apparent Illness/Injury (Adult) (Z00.00)	2	2.38%
Respiratory Distress - Bronchospasm (J98.01)	2	2.38%
Sepsis (A41.9)	2	2.38%
Syncope/Near Syncope (R55)	2	2.38%
Allergic Reaction (T78.40)	1	1.19%
Cold/Flu Symptom (J00)	1	1.19%
Diabetic - Hypoglycemia (E13.64)	1	1.19%
Dizziness / Vertigo (R42)	1	1.19%
Stroke/CVA (I63.9)	1	1.19%
Total: 84	Total: 100.00%	

Procedures Administered

Procedure Performed Description And Code (eProcedures.03)	Number of Times Procedure Administered	Percent of Total Procedures Administered
Electrocardiographic monitoring (46825001)	62	29.81%
Cardiac Monitor - 12 Lead ECG Obtained (268400002)	39	18.75%
Blood Glucose Measurement (302789003)	26	12.50%
Venous Access - Saline Lock (425074000)	23	11.06%
Venous Access - IV (392230005)	21	10.10%
	13	6.25%
Spinal Motion Restriction - Full (426498007)	5	2.40%
Airway - ETCO2 Capnography (425543005)	4	1.92%
Spinal Motion Restriction - Cervical Collar Applied (49689007)	4	1.92%
Oxygen Administration -Nasal Cannula (371907003)	2	0.96%
Wound Care - General (225358003)	2	0.96%
Wound Care - Pressure Dressing Application (26906007)	2	0.96%
Airway - Nasopharyngeal (NPA) Insertion (182692007)	1	0.48%
Cardiac Monitor - ECG Monitoring (428803005)	1	0.48%
Oxygen Administration - CPAP (47545007)	1	0.48%
Patient Cooling - Ice/Cold Pack (229583009)	1	0.48%
Splinting (79321009)	1	0.48%
Total: 208	Total: 100.00%	

Medications Administered

Medication Given Description And RXCUI Code (eMedications.03)	Number of Times Medication Administered	Percent of Total
	52	45.22%
Normal saline (125464)	16	13.91%
Ondansetron (26225)	15	13.04%
Fentanyl (4337)	7	6.09%
Oxygen (7806)	6	5.22%
Aspirin (1191)	3	2.61%
Nitroglycerin (4917)	3	2.61%
Acetaminophen (161)	2	1.74%
Albuterol (435)	2	1.74%
Atrovent (151390)	2	1.74%
Diphenhydramine (Benadryl) (3498)	2	1.74%
Naloxone (7242)	2	1.74%
Epinephrine 1:1,000 (1 mg/mL) (328316)	1	0.87%
Glucose (Oral) (4850)	1	0.87%
Midazolam (6960)	1	0.87%
Total: 115	Total: 100.00%	

Average Run Mileage Summary Report

Average Run Mileage to Scene	Minimum Run Mileage to Scene	Maximum Run Mileage To Scene	Average Run Mileage Scene to Destination	Minimum Run Mileage Scene to Destination	Maximum Run Mileage Scene to Destination	Average Run Total Distance	Minimum Run Total Distance	Maximum Run Total Distance	Number of Runs
0.00	0	0	23.68	1	39	0.00	0	0	84

Run Times - Unit Arrived on Scene to Unit Left Scene in Minutes

Incident Unit Arrived On Scene To Unit Left Scene Range In Minutes	Number of Runs	Percent of Total Runs
	12	14.29%
0 to <5	2	2.38%
5 to <10	15	17.86%
10 to <15	28	33.33%
15 to <20	19	22.62%
20 to <25	5	5.95%
25 to <30	2	2.38%
40 to <45	1	1.19%
Total: 84		Total: 100.00%

Run Times - Unit Enroute to Unit Arrived on Scene in Minutes

Incident Unit En Route To Unit Arrived On Scene Range In Minutes	Number of Runs	Percent of Total Runs
0 to <5	63	75.00%
5 to <10	19	22.62%
> 15	2	2.38%
Total: 84		Total: 100.00%

Run Times - Unit Left Scene to Patient Arrived at Destination in Minutes

Incident Unit Left Scene To Patient Arrived At Destination Range In Minutes	Number of Runs	Percent of Total Runs
	13	15.48%
10 to 15	1	1.19%
> 15	70	83.33%
Total: 84		Total: 100.00%

Transport Mode from Scene

Disposition Transport Mode From Scene (eDisposition.17)	Number of Runs	Percent of Total Runs
Code 2	67	79.76%
	12	14.29%
Code 3	5	5.95%
Total: 84		Total: 100.00%

Response Delay

Response Type Of Response Delay List (eResponse.09)	Number of Runs	Percent of Total Runs
"None/No Delay"	83	98.81%
"Distance"	1	1.19%
Total: 84		Total: 100.00%

Runs by Patient Race

Patient Race List (ePatient.14)	Number of Runs	Percent of Total Runs
White	64	76.19%
Hispanic or Latino	15	17.86%
Black or African American	3	3.57%
	2	2.38%
Total: 84		Total: 100.00%

Runs by Patient Age Range in Years

Patient Age Range In Years	Number of Runs	Percent of Total Runs
	2	2.38%
< 1	1	1.19%
1 - 9	3	3.57%
10 - 19	4	4.76%

Patient Age Range In Years	Number of Runs	Percent of Total Runs
20 - 29	5	5.95%
30 - 39	3	3.57%
40 - 49	4	4.76%
50 - 59	5	5.95%
60 - 69	12	14.29%
70 - 79	28	33.33%
80 - 89	11	13.10%
90 - 99	6	7.14%
Total: 84		Total: 100.00%

Runs by Destination Name

Disposition Destination Name Delivered To (eDisposition.01)	Disposition Destination Code Delivered To (eDisposition.02)	Number of Runs	Percent of Total Runs
		11	13.10%
Healdsburg District Hospital	20157	34	40.48%
Kaiser Permanente - Santa Rosa	20203	17	20.24%
Santa Rosa Memorial Hospital, Montgomery	20402	14	16.67%
Sutter Santa Rosa Regional Hospital	20478	8	9.52%
		Total: 84	Total: 100.00%