North Sound ACH June Board Meeting

Friday, June 28th 10:00 - 3:00pm

Swinomish Casino & Lodge

12885 Casino Drive

Anacortes, WA 98221

Room: Event Center 34&5

Remote:

https://zoom.us/j/321572334

+1 669 900 6833

Meeting ID: 321 572 334

Board of Directors:

Commissioner Ken Dahlstedt

Conner Darlington

Anne Deacon

Cammy Hart - Anderson Shanon Hardie

Jennifer Johnson

Lona Johnson

Debbie Jones

Councilman Nickolaus Lewis

Cheryl Rasar Caitlin Safford

Marilyn Scott, Vice-Chairman of Upper Skagit Indian Tribe

Commissioner Janet St. Clair

Jim Steinruck Rachele Sullivan

■ North Sound ACH

BUILDING HEALTHIER COMMUNITIES

in Island, San Juan, Snohomish, Skagit & Whatcom Counties

Stillaguamish Seat (Open) Council Member Bill Watson

Charissa Westergard Kim Williams, Secretary

Staff Members:

Liz Baxter, MPH

Tiffany Edlin

Cami Powell

Nicole Willis, MPH, CHES

DRAFT Agenda

Time	Topic	Purpose	Lead
10:00	1.TOUR at Didgwalic Wellness Center PLEASE NOTE: 10 -11 we will be doing a clinic tour at the Didgwalic Wellness Center for Board Members (8212 S. March Point Road, Anacortes, WA 98221)		Kim
	Leaving the clinic, the Board meeting will be at: Swinomish Casino & Lodge 12885 Casino Drive Anacortes, WA 98221		
11:30	2. Open Meeting Tribal Welcome Land Acknowledgement Roll-Call Review Previous minutes Attachment A) April Minutes	Action: Approve April minutes	Kim
11:50	 3. Committee Reports Executive Committee (5 min) Finance Committee (15 min) Report from Committee Chair March and April Financials Governance Committee Report (10 min) Report from Committee Chair Tribal Alignment Committee (10min) 	UPDATES Accept: March & April Financials	Kim

■■North Sound ACH

	 Report from Committee Chair 		
	 Regional Voices Council (5 min) 		
	 Report from Committee Chair 		
	Attachment B) March & April Financials		
	Attachment C) Audited Financials		
	Attachment D) Governance and Board Calendar		
12:35	4. Public Comment		Kim
12:45	Lunch		
1:00	5. Chief Executive Officer report	Approve: CEO is in	Kim
	Board Goals	compliance	(Liz)
	 Executive Limitation Policy #5: CEO Succession Planning 		
	Attachment E) CEO Compliance Report		
1:25	6. Design-Thinking Presentation	Presentation	Kim
	HOMEWORK: https://www.youtube.com/watch?v=0V5BwTrQOCs&t=54		
2:25	7. Operations Updates	Updates	Kim
	Updates		
	HOMEWORK: JUNE Data Brief & attachments		
2:45	8. Public Comment		
2:55	9. Upcoming Meetings/Next Steps	Action: mark your	Kim
	Canoe Journey, Lummi (July 24-28)	calendars	
	 Board Office Hours with CEO, (July 26 9-10am) 		
	 ACH Partner Meeting, (August 7 & 8) 		
	 Swinomish Days (August 10,11) 		
	 Board Meeting (August 29 THURSDAY) 		
3:00 or sooner	10. Adjourn		Kim

April 26, 2019
Board of Directors Meeting
10:00am - 3:00pm
Upper Skagit Indian Tribe
Education & Multipurpose Building
25704 Coyote Drive
Sedro-Woolley, WA 98284
https://zoom.us/j/203085609
+1 669 900 6833
Meeting ID: 203 085 609



Board of Directors:

Conner Darlington

Robin Fenn, PhD, Chair

Cammy Hart - Anderson

Anne Deacon

Shanon Hardie

Jennifer Johnson

- Commissioner Ken Dahlstedt, at Debbie Jones
 10:45am
 - ☐ Councilman Nickolaus Lewis
 - John Miller
 - ☐ Cheryl Rasar
 - Caitlin Safford
 - Marilyn Scott, Vice-Chairman of Upper Skagit Indian Tribe

- ☐ Jim Steinruck
- Stillaguamish Seat (Open)
- Council Member Bill Watson
- Kim Williams, Secretary
- Sauk-Suiattle Seat (Open)

Staff Members:

- Liz Baxter, MPH
- Tiffany Edlin

- Cami Powell
- Nicole Willis, MPH, CHES

DRAFT Minutes

Topic

1. Welcome and Meeting Agenda

- Tribal Welcome provided by Marilyn Scott, Vice-Chairman of Upper Skagit Indian Tribe.
- Marilyn provided some history of the services provided on the reservation and where they have focused their investments the last 20 years. They have wrap around childcare, pre-school connected to the gymnasium that is adjacent to the cultural center, administrative building and a new after school education and multipurpose center that opened in October all closely located to each other. The previously only had one access point to the reservation, and now there are two access points. Worked with Skagit County to implement preventive measure to avoid flooding.
- Land Acknowledgement statement was read by Marilyn
- Roll-Call
- Reviewed the February Meeting Minutes
- Motion: to approve presented minutes as written, by Council Member Watson; second by Shanon. All in favor; no abstentions or oppositions. Approved.

2. Committee Reports

• Governance Committee Report

- Received an appointment letter from Nooksack Indian Tribe delegating Lona Johnson and John Miller as alternate to our Board of Directors early in March.
- o Kim reviewed the Board Member slate of nominees. Governance Committee brought forward 2 nominees: Charissa Westergard and Commissioner Janet St. Clair.
- **Motion:** to formally approve Charissa Westergard's board nominee on April 26th with a term ending December 2021, made by Council Member Watson; second by Shanon. All in favor; no abstentions or oppositions. **Approved.**
- o **Motion:** to formally approve Commissioner St. Clair's board nominee on April 26th with a term ending

- December 2021, made by Shanon; second by Council Member Watson. No oppositions or abstentions. **Approved.**
- Reviewed the presented officer slate. With Robin Fenn's resignation, we need to fill the Chair position. Governance Committee is putting forward a slate that puts forward Kim Williams to fill remainder of the Chair term ending in December 2019. This then left the Secretary position open. Per our Bylaws we cannot have the Chair and Secretary be the same people. Governance Committee recommends Caitlin Safford fill the remaining Secretary term ending in December 2019.
- Motion: nominate Kim Williams to succeed Robin Fenn as Board Chair, effective end of this Board meeting with a term ending December 31, 2019, made by Council Member Watson; second by Shanon. All in favor, no oppositions or abstentions. Approved.
- Motion: nominate Caitlin Safford to succeed Kim Williams as Board Secretary, effective end of April 26 Board meeting, with a term ending December 31, 2019, made by Shanon; second by Council Member Watson. All in favor, no oppositions or abstentions. Approved.

• Executive Committee

- o Robin reviewed the 5 motions that were presented electronically from the February Board meeting when we did not have quorum.
- o All 5 presented motions were approved.
- o Finalized Liz's 2018 annual review and evaluation was approved.

• Finance Committee

- o Council Member Watson opened discussion.
- o Feedback from the Board was that they appreciated the year-end review as a homework video.
- o Cami responded to questions from the video.
- General question regarding our investment plan regarding our large carry over balance. We have a 2019 budget, and a multi-year forecast on how we would spend moving forward while building reserves so we can be sustainable. The Community Resiliency fund will continue to earn interest until the Board sets a distribution strategy.
- o Would like a general review of our financials for new board members to get up to speed.
- Motion: to accept the Year-End Financials as presented, made by Shanon; second by Jennifer. All in favor, no abstentions or objections. Year-End Financials approved.
- o No presented questions regarding January and February monthly financials.
- Motion: to accept the January and February monthly financials, made by Jennifer; second by Shanon.
 No abstentions or oppositions. January and February financials accepted.
- o Wrapping up our 2018 audit done by Larson Gross.
- o One of the Board decisions when we became an independent entity from Whatcom Alliance for Health Advancement (WAHA), was a recommendation that we are audit ready. The amount of funds coming through this organization compelled us to be good steward of the funds.
- o Council Member Watson reminded the Board we are still looking for additional Finance Committee members which lost 2 of its members early this year. Reminder - Every board member must sit on at least one board committee. The Finance Committee may consist of non-board members if you have recommendations!
- o In March, Finance Committee updated the Fiscal Policies so that all officers, CEO and CFO can be authorized check signers. In process of reviewing and updating Fiscal Policies in more detail.
- Cami discussed the cross ACH meetings that continue to occur. All ACHs that do not operate through a fiscal sponsor gave permission for their auditors to connect.
- We are in the process of determining the most appropriate way to recognize and record our funds. Would like commonality between the ACHs. Will continue to update you all on this progress.
- o All ACHs operate a little differently.
- o IGT funds stand for intergovernmental transfer dollars; one way of several to leverage funds from

CMS.

Tribal Alignment Committee

- o Marilyn provided an update
- o Last meeting was held in March and was hosted at Swinomish
- o In process of hiring for the Tribal Liaison position. Held interviews but did not make an offer. Looking to potentially contract out to fill that role.
- o Continue to recruit for Stillaguamish and Sauk-Suiattle representative.
- Northwest Washington Indian Health Board (NWIHB) continues work to expand their Board to include all 8 Tribes in the region. Would like to utilize the NWIHB to receive the dollars that have been set aside for Tribes.
- o Would like a summit by the end of the year that includes the ACH, Tribes, HCA, and MCOs by end of vear.
- o Learn about cultural practices at the canoe landing, you may sign up to volunteer!
- o If you are interested, please join this committee.
- o Marilyn provided update on the reports at the Governor's Office of Indian Affairs that will be coming out.
- o Establishing a tribal social service advisory council

Community Leadership Council

- o Conner provided an update
- o New charter has changed name to Regional Voices Council.
- o Appreciation was shared for approving the updated charter.
- A brief update from lessons learned at the Othering and Belonging Conference that Conner went to on behalf of the ACH. He will share some resources with staff to circulate to the Board. Hope to have this Board adopt some of the principles.

3. Public Comment - none at this time

4. Operations

- Liz walked through in detail Executive Limitation #3: Design and Implementation
- Some of the metrics are not locked in one strategy but in multiple strategies.
- The board had brief questions.
- Would like to ensure our community partner are supplementing each other and not duplicating.
- **Motion:** Liz's report of the Executive Limitation #3 is in compliance, made by Kim; second by Shanon. No oppositions or abstentions. **Approved** that the CEO is in compliance for Executive Limitation #3.
- Liz walked through in detail Executive Limitation #4.
- Liz shared here concerns and challenges she has experienced with the FE Portal and working with PCG.
- Board comments echoed Liz's concerns. Concern shared that this is something the ACH should be focused on and not have the HCA lead the way. PCG is housing a major portion of our funds, and this ACH wants to ensure they are insured and protected, so it is our ACH's issue to push on. Will continue to encourage HCA to help with this ask and contract negotiation with PCG.
- **Motion:** Liz's presented report of the Executive Limitation #4 is in compliance, made by Shanon; second by Jennifer. All in favor, no oppositions or abstentions. **Approved** that the CEO is in compliance for Executive Limitation #4.
- Transitioned into operational updates.
- The 2019 budget approved up to 17 FTE, currently at 15 employees. We are looking at alternatives on how to fill the Tribal Liaison position. Greg Arnold is currently on loan from the BHO to support our work.
- Have had 65, 90 minute-2 hour calls between December and March and 49 in person meetings with our partners. Several of the partners required 3 4 in person meetings.
- Had 2 distributions from the opportunity fund in 2019.
- Had an opportunity to meet with Nichole Maher from the Group Health Foundation.

North Sound ACH

- Cammy Hart-Anderson provided an update from the Interlocal Leadership. HCA shared that the BHO met all requirements for July 1.
- Caitlin provided a legislative recap of the many moving parts on this session and how it may affect ACHs. It has been a very challenging legislative session.
- Board appreciated the data presentation, no questions at this time.

LUNCH

5. DHAT presentation from Swinomish

- Christina Peters, Project Director, Native Dental Therapy Initiative at Northwest Portland Area Indian Health Board, is presenting on the Dental Health Aid Therapy (DHAT) program. A Skagit Valley College and Swinomish Indian Tribe Collaboration.
- Christina provided a summary and history of Dental Therapy
- DHATs improve access to dental care needs and primarily focus on preventative measures, but very importantly, if a patient has existing decay, they can address those needs.
- A program that strengthens communities, access and improves health outcomes
- This program decreases emergency visits and increases preventative care.
- DHAT is a very cost-effective form of care. It costs 30 cents for every dollar or revenue they generate.
- Building an DHAT education program in collaboration with the Tribes and Skagit Valley College allows an
 opportunity to tailor the program to meet the needs of Native students in the Portland Area. The stewards
 of this initiative also believe that this program will be beneficial for any non-traditional student from any
 underrepresented community.

6. Public Comment - none at this time

7. Next Steps from January Retreat

- Mike reviewed future planning process from January and February Board meetings, including the Board Goals.
- Walked through the 3 scenarios that were discussed.
- Consensus of the Board is that our mission goes beyond the Medicaid Demonstration.
- Board participated in breakout discussions.
- Report outs focused on looking at upstream preventative measures, the importance of "all driving in the same direction," and work to continue fostering true collaboration and partnerships.
- Board consensus was to have staff draft up a straw proposal of a vision of our future state.

8. Upcoming Meetings/Next Steps

- Interlocal Leadership: May 10, 1 3pm
- Partner Equity Training: May 22
- Board of Directors 06/28, Swinomish
- Statewide Opioid Workgroup Webinar, May 7th
- Electronic Health Record Summit, May 8th, Spokane
- AIHC Conference, May 9th, Spokane (Native Project)
- Affiliated Tribes Northwest Indians, May 20th-23rd, Northern Quest Resort Spokane
- Tribal Designated Crisis Responders, June 3rd-6th, Yakima Conference Center
- Tribal Savvy Caregiver Training, June 18-20th Upper Skagit Highway 20
- NWIHC the annual conference May 17-18
- Marilyn shared the success they have had with increasing graduation rates in their community by focusing their efforts around serving children and their education.

9. Board Chair Transition

- Gratitude was shared for the leadership Robin has given to the board for the past 4+ years.
- **10. Adjourn** at 2:58pm Invited to tour Upper Skagit's new Education & Multipurpose Building and surrounding facilities



BUDGET: CAP EX

24,667

JAN - APRIL YTD

37,698

North Sound ACH Operational Budget (Excluding Portal Revenue) April 30, 2019

NON-OPERATIONAL BUDGET:

Total Cap Ex

110,500 75,000 2,912,136 3,097,636 489,061 35,905 2,600	YTD Actual 67,986 3,538,048 3,606,034 334,754 31,878 2,482	YTD Variance (42,514) (75,000) 625,912 508,398	-38% -100% 21%	Approved Budget (Excl. Portal) 331,500 75,000 5,824,272 6,230,772	Published Forecast 151,164	Year-End Yariance (180,336) (75,000) - (255,336)	-119% -100%
110,500 75,000 2,912,136 3,097,636 489,061 35,905 2,600	67,986 - 3,538,048 3,606,034 334,754 31,878	(42,514) (75,000) 625,912 508,398	-38% -100% 21%	Portal) 331,500 75,000 5,824,272	151,164 - 5,824,272	(180,336) (75,000)	Year-End Variance % -119% -100% 0%
75,000 2,912,136 3,097,636 489,061 35,905 2,600	3,538,048 3,606,034 334,754 31,878	(75,000) 625,912 508,398	-100% 21% 16%	75,000 5,824,272	- 5,824,272	(75,000)	-100%
75,000 2,912,136 3,097,636 489,061 35,905 2,600	3,538,048 3,606,034 334,754 31,878	(75,000) 625,912 508,398	-100% 21% 16%	75,000 5,824,272	- 5,824,272	(75,000)	-100%
2,912,136 3,097,636 489,061 35,905 2,600	3,606,034 334,754 31,878	625,912 508,398 (154,307)	21%	5,824,272	5,824,272	-	
3,097,636 489,061 35,905 2,600	3,606,034 334,754 31,878	508,398	16%			(255,336)	0%
489,061 35,905 2,600	334,754 31,878	(154,307)		6,230,772	5,975,436	(255,336)	
35,905 2,600	31,878		-32%				
35,905 2,600	31,878		-32%				
35,905 2,600	31,878			1,467,183	1,150,000	(317,183)	-22%
2,600			-11%	107,716	107,716	(317,183)	0%
		(118)	-5%	7,800	7,800		0%
23,900	15,755	(8,145)	-34%	71,700	71,700		0%
165,836	135,353	(30,483)	-18%	497,508	497,508		0%
9,332	238	(9,094)	-97%	27,996	27,996		0%
14,000	9,000	(5,000)	-36%	42,000	42,000		0%
		,		· ·		19 700	33%
20,100				-			3370
5 200				15 600		(100,001,	0%
765,934	526,916	(239,019)	-31%	2,297,803	1,893,656	(297,483)	-13%
2 331 702	3 079 118	747 417		3 932 969	4 081 781	A2 1A7	
2,331,702	3,079,118	747,417		3,332,303	4,001,701	42,147	
2,331,702	3,079,118			3,932,969	4,081,781		0%
8,085,636	8,057,736			8,085,636	8,057,736		0%
10,417,338	11,136,854	719,517	0%	12,018,605	12,139,517	42,147	0%
ć	6 227 642	1					
	2,331,702 2,331,702 8,085,636	. (35,555) 5,200 7,043 765,934 526,916 2,331,702 3,079,118 2,331,702 3,079,118 8,085,636 8,057,736 10,417,338 11,136,854 \$ 6,327,643	. (35,555) (35,555) 5,200 7,043 1,843 765,934 526,916 (239,019) 2,331,702 3,079,118 747,417 2,331,702 3,079,118 8,085,636 8,057,736 10,417,338 11,136,854 719,517	- (35,555) (35,555) 100% 5,200 7,043 1,843 35% 765,934 526,916 (239,019) -31% 2,331,702 3,079,118 747,417 2,331,702 3,079,118 8,085,636 8,057,736 10,417,338 11,136,854 719,517 0%	- (35,555) (35,555) 100% - 5,200 7,043 1,843 35% 15,600 765,934 526,916 (239,019) -31% 2,297,803 2,331,702 3,079,118 747,417 3,932,969 2,331,702 3,079,118 3,932,969 8,085,636 8,057,736 8,085,636 10,417,338 11,136,854 719,517 0% 12,018,605 \$ 6,327,643 5,327,643 5,327,643 5,327,643 5,327,643	- (35,555) (35,555) 100% - (106,664) 5,200 7,043 1,843 35% 15,600 15,600 765,934 526,916 (239,019) -31% 2,297,803 1,893,656 2,331,702 3,079,118 747,417 3,932,969 4,081,781 2,331,702 3,079,118 3,932,969 4,081,781 8,085,636 8,057,736 8,085,636 8,057,736 10,417,338 11,136,854 719,517 0% 12,018,605 12,139,517 \$ 6,327,643 \$ 6,327,643 \$ 6,327,643 \$	- (35,555) (35,555) 100% - (106,664)

13,031

74,000 74,000 roll forward 2018 amount into capital budget

Page 1 of 7 NS ACH Dash Saturday, June 1, 2019

0%



REVENUE

Gov't Grants

(100%) variance noted (\$75K). This is due to all remaining SIM funding for the Grant year end 1/31/2019 being received in 2018.

Gov't Contracts

This is made up of a 10% Admin (\$1.6M), 10% Resilience (\$1.6M) and 2% Reserve (\$321K) draw downs from total funding received.

Other Income

42% Under budget due to break out of unrealized gains/losses in P&L as well as updating the investment strategy to only include Resilience, Reserve, and Admin drawn down funds.

EXPENSES

Employee

(32%) Under spent due to timing of hiring. 11 of 17 budgeted positions we staffed as of March. As of April 1st, 4 additional staff had accepted positions.

Facility Expenses

(11%) Under spent (\$4K) due to timing of repairs, maintenance as well as implementation date of new cleaning contract. No significant variance anticipated.

Supplies

(5%) Over spent \$118 due to timing of supply purchases. No significant variance noted or expected.

Travel

(34%) Under budget due to timing of travel and travel purchases (\$8K). No year end variance expected.

Professional Services

(18%) Underspent (\$30K) due to timing of project engagements throughout the year. No year end variance

Education and Training

(97%) Under budget, due to insignificant activity at this point in the year and planned timing of 2019 training purchases. No year end variance anticipated.

Opportunity Fund

(36%) Underspent (\$5K) due to timing of disbursements. No year end variance anticipated.

Other Exp

capitalized).

Unrealized Cap Gain/Loss

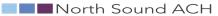
100% Over budget (item was not originally broken out in approved budget). Refer to note in other income.

Depreciation

35% Over budget or \$1.8K due to timing of fixes asset purchases. See note below.

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variances expected.



Income Statement for the period of 01/01/2019 to 04/30/2019

Account N	ur Account Name	Amount
<u>Income</u>		
Revenue		
4421	Gov't Contract	3,538,048
	Total Revenue	3,538,048
Other Inco	<u>me</u>	
4110	Other Income	1,086
4450	Interest Income	53,721
4460	Dividend Income	13,179
	Total Other Income	67,986
	Total Income	3,606,034
Expense	•	• •
	ative Expenses	
5000	Payroll Expenses	-
5010	Salaries	261,209
5015	Payroll Taxes	22,085
3013	Total 5000 - Payroll Expenses	283,294
5030	Employee Benefits	203,234
		12 207
5012	Accrued Vacation	13,387
5025	401K Contributions	7,654
5027	Employee Healthcare	30,419
	Total 5030 - Employee Benefits	51,460
5050	Facility	-
5055	Insurance	1,816
5060	Lease/Rent	16,677
5065	Utilities	11,357
5067	Facility Maintenance	878
5070	Telecommunications	1,150
	Total 5050 - Facility	31,878
5075	Supplies	2,482
5100	Travel	-
5105	Mileage	1,735
5110	Transportation	1,696
5115	Lodging	8,480
5117	Airfare	2,720
5120	Meals	1,014
5130	Other	110
3130	Total 5100 - Travel	15,755
5200	Professional Services	-
5210	Audit Services	6,315
5220	Legal Services	1,200
	Other Professional Services	· ·
5230	Financial Services	78,014
5260		49,824
F20F	Total 5200 - Professional Services	135,353
5305	Equip Rental/Lease	3,081
5310	Dues/Subscriptions	2,666
5311	Software as a Service	11,833
5315	Bank Fees	100
5320	Education/Training	238
5330	Meeting/Event Exp	8,180
5340	Printing/Copying	30
5350	Postage/Delivery	13
5380	Taxes/Licenses	64
5390	Opportunity Funds	9,000
	Total Administrative Expenses	555427.85
Other Expe	-	
6400	Depreciation	7,043
6500	Unrealized Gain/Loss on Investments	(35,555)
	Total Other Expenses	(28,512)
	Total Expense	526,916
	Net Income (Loss)	3,079,118
	rice income (Loss)	3,073,110



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Account Number	Account Name	Amount
<u>Assets</u>		
<u>Cash</u>		
1000	Peoples Checking	122,360
1010	Chase Savings	225,108
1015	Certificate of Deposit	30,098
	Total Cash	377,566
Current Assets		
1020	FE Portal	17,458,108
1110	Prepaid Expense	165,941
1115	Investment Interest Receivable	32,860
1150	Investments Operations	8,229,324
1154	Investments Resiliency	4,696,008
1158	Investment Reserve	932,768
	Total Current Assets	31,515,008
Fixed Assets		
1510	Equipment	10,928
1520	Furniture & Fixtures	58,409
1530	Computer Hardware & Software	29,221
1540	Lease Hold Improvements	14,472
1560	Accumulated Depreciation	(29,430)
	Total Fixed Assets	83,600
	Total Tixea Assets	
	Total Assets	
<u>Liabilities</u>		
Current Liabilities		31,976,174
Current Liabilities 2015	Total Assets Citi - Credit Card	31,976,174 4,136
Current Liabilities 2015 2100	Total Assets Citi - Credit Card Accounts Payable	4,136 107,289
Current Liabilities 2015 2100 2150	Citi - Credit Card Accounts Payable L&I Payable	4,136 107,289 1,555
Current Liabilities 2015 2100	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO	4,136 107,289 1,555 42,541
Current Liabilities 2015 2100 2150	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits	4,136 107,289 1,555 42,541 (279)
Current Liabilities 2015 2100 2150 2155 2200	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO	4,136 107,289 1,555 42,541 (279)
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities	4,136 107,289 1,555 42,541 (279) 155,241
Current Liabilities 2015 2100 2150 2155 2200	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities	4,136 107,289 1,555 42,541 (279) 155,241
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities	4,136 107,289 1,555 42,541 (279) 155,241 13,918
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities	4,136 107,289 1,555 42,541 (279) 155,241 13,918
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300 Equity	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities	4,136 107,289 1,555 42,541 (279) 155,241 13,918
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities	4,136 107,289 1,555 42,541 (279) 155,241 13,918 13,918 169,159
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300 Equity Unrestricted Net Assets	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities Total Liabilities	4,136 107,289 1,555 42,541 (279) 155,241 13,918 13,918 169,159
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300 Equity Unrestricted Net Assets Temporarily Restricted N	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities Total Liabilities	31,976,174 4,136 107,289 1,555 42,541 (279) 155,241 13,918 13,918 13,918 169,159
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300 Equity Unrestricted Net Assets Temporarily Restricted Nation 1988	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities Total Liabilities Total Unrestricted Net Assets Resiliency Fund	4,136 107,289 1,555 42,541 (279) 155,241 13,918 13,918 169,159
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300 Equity Unrestricted Net Assets Temporarily Restricted N	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities Total Liabilities Total Unrestricted Net Assets Resiliency Fund Reserve Fund	4,136 107,289 1,555 42,541 (279) 155,241 13,918 13,918 13,918 169,159 26,204,765 4,671,875 930,375
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300 Equity Unrestricted Net Assets Temporarily Restricted Nation 1988	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities Total Liabilities Total Unrestricted Net Assets Resiliency Fund Reserve Fund Total Temporarily Restricted Net Assets	4,136 107,289 1,555 42,541 (279) 155,241 13,918 13,918 169,159 26,204,765 4,671,875 930,375 5,602,250
Current Liabilities 2015 2100 2150 2155 2200 Long Term Liabilities 2300 Equity Unrestricted Net Assets Temporarily Restricted Nation 1988	Citi - Credit Card Accounts Payable L&I Payable Accrued PTO Employee Benefits Total Current Liabilities Deferred Rent Total Long Term Liabilities Total Liabilities Total Unrestricted Net Assets Resiliency Fund Reserve Fund	31,976,174 4,136 107,289 1,555 42,541 (279) 155,241 13,918 13,918 13,918 169,159 26,204,765 4,671,875 930,375 5,602,250 31,807,015

Page 4 of 7 NS ACH Balance Sheet 43,617

NS ACH INVESTMENT SUMMARY - Operations April 2019

North Sound ACH

CASH ACCOUNTS
BANK SWEEP
SCHWAB MONEY MARKET
TOTAL CASH ACCOUNTS

Schwab Investments				
COST	CURRENT MARKET VALUES 4/30/2019			
	13,367			
	812,689			
	826,056			

FIXED INCOME

2.65%22	6,912,643	6,416,578
SALLIE MAE BANK 2.65% 4/22	250,000	249,688
DISCOVER BANK GR 2.75% 7/20	225,000	225,618
WELLS FARGO BK N 2.55% 4/20	250,000	250,267
MORGAN STANLEY BA 2.6%2 4/20	250,000	250,331
GOLDMAN SACHS 2.55% 4/20	250,000	250,216
BANKUNITED, INC. 2.55% 1/20	145,000	145,147
MORGAN STANLEY 2.25% 10/19	250,000	249,900
US TREASUR NT 2.125%12/22	324,010	323,578
US TREASUR NT 1.75%09/22	320,071	319,719
US TREASUR NT 2.125%06/22	324,302	323,883
US TREASUR NT 1.5%01/22	318,738	318,602
US TREASUR NT 2% 10/21	412,944	422,477
US TREASUR NT 2.125% 06/21	415,840	423,805
US TREASUR NT 2.375% 04/21	419,225	425,797
US TREASUR NT 2% 01/21	416,479	422,809
US TREASUR NT 1.625% 10/20	414,523	420,750
US TREASUR NT 1.375% 12/19	591,283	596,156
US TREASUR NT 1.375% 9/19	246,954	248,867
US TREASUR NT .875% 6/19	541,625	548,969

TOTAL CASH & INVESTMENTS

6,912,643 7,242,634

Page 5 of 7 Investment Roll forward Saturday, June 1, 2019

NS ACH INVESTMENT SUMMARY - Resiliency April 2019

North Sound ACH

	Schwab Investments		
CASH ACCOUNTS	COST	CURRENT MARKET VALUES 4/30/2019	
BANK SWEEP		0	
SCHWAB MONEY MARKET		432	
TOTAL CASH ACCOUNTS		432	
FIXED INCOME			
U S T BILL DUE 2.51% 08/01/19 2.51%	1,820,210	1,831,790	
USTBILL DUE 0% 01/30/20 2.42%	1,609,917	1,610,979	
TOTAL FIXED INCOME	1,820,210	3,442,769	

TOTAL CASH & INVESTMENTS

1,820,210

3,443,201

Page 6 of 7 NS ACH Resiliency Rollforward Saturday, June 1, 2019

NS ACH INVESTMENT SUMMARY - Reserve April 2019



TOTAL CASH & INVESTMENTS

	Sch	iwab investments
CASH ACCOUNTS	соѕт	CURRENT MARKET VALUES 4/30/2019
BANK SWEEP		0
SCHWAB MONEY MARKET		371
TOTAL CASH ACCOUNTS		371
FIXED INCOME		
U S T BILL DUE 0% 01/30	681,719	681,719
TOTAL FIXED INCOME	681,719	681,719

Page 7 of 7 NS ACH Reserve Rollforward Saturday, June 1, 2019

682,090

681,719





North Sound ACH Operational Budget (Excluding Portal Revenue) March 31, 2019

March 31, 2019	JAN -	MARCH YEAR TO	O DATE		2019	BUDGET & FOR	ECAST	
	YTD Budget	YTD Actual	YTD Variance	YTD % of Variance	Approved Budget (Excl. Portal)	Year-End Forecast	Year-End Variance	Year-End Variance %
REVENUE								
Other Income	82,875	1,044	(81,831)	-99%	331,500	179,848	(151,652)	-849
Gov't Grant	75,000	-	(75,000)	0%	75,000	-	(75,000)	-1009
Gov't Contract	2,912,136	3,538,048	-	0%	5,824,272	5,824,272	-	09
Subtotal Revenue	3,070,011	3,539,092	(156,831)		6,230,772	6,004,120	(226,652)	
-								
EMPLOYEE Expenses	366,796	241,121	(125,675)	-34%	1,467,183	1,150,000	(317,183)	-22%
Facility Expenses	26,929	24,285	(2,644)		107,716	107,716	(317,103)	-227
Supplies	1,950	2,173	223	11%	7,800	7,800	-	09
Travel	17,925	10,538	(7,387)		71,700	71,700	-	09
Professional Services	124,377	88,336	(36,041)	-29%	497,508	497,508		09
Education & Training	6,999	159	(6,840)		27,996	27,996		09
Opportunity Fund	10,500	9,000	(1,500)		42,000	42,000	_	0%
Other Exp	15,075	15,171	96	1%	60,300	60,300		0%
Unrealized Gain/Loss	-	(30,718)		100%	-	(122,872)	(122,872)	0,
Depreciation	3,900	5,075	1,175	30%	15,600	15,600	(122,072)	09
Total Expenses	574,451	365,141	(209,310)	-36%	2,297,803	1,857,748	(440,055)	-19%
Net Income	2,495,560	3,173,951			3,932,969	4,146,372		
Carry forward in 2019	2,495,560	3,173,951			3,932,969	4,146,372		0%
Carry forward from 2018	8,085,636	8,057,736			8,085,636	8,057,736		0%
Carry forward to 2020	10,581,196	11,231,687	650,491	0%	12,018,605	12,204,108	-	0%
<u> </u>			7					
Total 2019 DEMO Spending to Date Total DEMO Funding Remaining		\$ 3,359,779 \$ 10,576,602]					
NON-OPERATIONAL BUDGET: CAP EX								
NON-OPERATIONAL BUDGET:	BUDGET: CAP EX	JAN - FEB YTD	Variance		2	019 BUDGET & FORE	CAST	
Total Cap Ex	18,500	23,226	4,726	26%	74,000	74,000	0	. 0%
•						,		

Page 1 of 6 NS ACH Dash Monday, May 6, 2019



REVENUE

Gov't Grants

(100%) variance noted (\$75K). This is due to all remaining SIM funding for the Grant year end 1/31/2019 being received in 2018.

Gov't Contracts

21% variance noted (\$626K). Funding of \$3.5M was transferred in March to for Admin, Resiliance and Reserve. This is made up of a 10% Admin (\$1.6M), 10% Resilience (\$1.6M) and 2% Reserve (\$321K) draw downs from total funding received.

Other Income

66% Under budget due to break out of unrealized gains/losses in P&L as well as updating the investment strategy to only include Resilience, Reserve, and Admin drawn down funds.

EXPENSES

Employee

(34%) Under spent due to timing hiring. 11 of 17 budgeted positions we staffed as of March. As of April 1st, 4 additional staff have accepted positions.

Facility Expenses

(10%) Under spent (\$2.7K) due to timing of new cleaning contract and repairs, maintenance to date. No significant variance anticipated.

Supplies

(11%) Over spent \$220 due to timing of supply purchases. No significant variance.

Trave

(41%) Under budget due to timing of travel and travel purchases (\$7.4K). No year end variance expected.

Professional Services

(29%) Underspent (\$36K) due to timing of project engagements throughout the year. No year end variance anticipated.

Education and Training

(98%) Under budget, due to insignificant activity at this point in the year and planned timing of 2019 travel purchases. No year end variance anticipated.

Opportunity Fund

(14%) Underspent due to timing of disbursements (\$1.5K). No year end variance anticipated.

Other Exp

1% Currently overspent (\$96). No current significant variance, no year end variance anticipated.

Unrealized Cap Gain/Loss

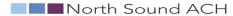
100% Over budget. Refer to note in other income.

Depreciation

30% Over budget or \$1.2K due to timing of fixes asset purchases. See note below.

Сар Ехр

26% Currently over budget \$4.7K due to timing in the year of Fixed Asset purchases. No significant variance anticipated.



Income Statement for the period of 01/01/2019 to 03/31/2019

Account No	ur Account Name	Amount
Income		
Revenue		
4421	Gov't Contract	3,538,048
	Total Revenue	3,538,048
Other Incom	<u>me</u>	
4110	Other Income	1,044
4450	Interest Income	19,066
4460	Dividend Income	8,013
	Total Other Income	28,123
	Total Income	3,566,171
<u>Expense</u>		
	tive Expenses	
5000	Payroll Expenses	-
5010	Salaries	184,227
5015	Payroll Taxes	16,299
	Total 5000 - Payroll Expenses	200,526
5030	Employee Benefits	
5012	Accrued Vacation	12,898
5025	401K Contributions	5,676
5027	Employee Healthcare	22,021
F0F0	Total 5030 - Employee Benefits	40,595
5050	Facility	1 262
5055	Insurance	1,362
5060	Lease/Rent	12,508
5065	Utilities	8,908 758
5067 5070	Facility Maintenance Telecommunications	758 750
3070	Total 5050 - Facility	24,285
5075	Supplies Supplies	2,173
5100	Travel	2,173
5105	Mileage	1,102
5110	Transportation	804
5115	Lodging	6,011
5117	Airfare	2,242
5120	Meals	380
	Total 5100 - Travel	10,538
5200	Professional Services	-
5210	Audit Services	6,315
5220	Legal Services	1,200
5230	Other Professional Services	43,839
5260	Financial Services	36,981
	Total 5200 - Professional Services	88,336
5305	Equip Rental/Lease	2,304
5310	Dues/Subscriptions	2,162
5311	Software as a Service	8,875
5315	Bank Fees	73
5320	Education/Training	159
5330	Meeting/Event Exp	1,713
5340	Printing/Copying	30
5350	Postage/Delivery	13
5390	Opportunity Funds	9,000
	Total Administrative Expenses	390,784
Other Expe		
6400	Depreciation	5,075
6500	Unrealized Gain/Loss on Investments	(30,718)
	Total Other Expenses	(25,643)
	Total Expense	365,141
	Net Income (Loss)	3,201,030



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Account Number	Account Name	Amount
Assets		
Cash		
1000	Peoples Checking	168,189
1010	Chase Savings	225,100
1015	Certificate of Deposit	30,098
	Total Cash	
Current Assets		,
1020	FE Portal	10,576,602
1110	Prepaid Expense	165,640
1115	Investment Interest Receivable	32,860
1150	Investments Operations	9,492,979
1154	Investments Resiliency	1,830,308
	Total Current Assets	
Fixed Assets		,,,,,,,,,
1510	Equipment	10,928
1520	Furniture & Fixtures	58,409
1530	Computer Hardware & Software	29,221
1560	Accumulated Depreciation	(25,134)
	Total Fixed Assets	
	Total Assets	
Liabilities		
Current Liabilities		
2000	CEO - Credit Card	(181)
2015	Citi - Credit Card	12,534
2100	Accounts Payable	117,135
2150	L&I Payable	827
2155	Accrued PTO	37,783
2200	Employee Benefits	(0)
	Total Current Liabilities	
Long Term Liabilities		,
2300	Deferred Rent	13,331
	Total Long Term Liabilities	13,331
	Total Liabilities	181,430
<u>Equity</u>		
Unrestricted Net Assets		
3000	General Fund	231,113
3118	Allocate Fund Balance	(490)
3119	Program Related Support	(230,665)
3120	Management & General	(164,471)
3122	DEMO (Portal)	10,859,575
3125	Design Funds	4,944,318
3126	DSRIP Admin Funds	2,664,076
3128	Manual Allocate Fund Balance	468
	Total Unrestricted Net Assets	18,303,926
Temporarily Restricted N	<u>Vet Assets</u>	
3123	Resiliency Fund	3,428,204
3124	Reserve Fund	681,641
	Total Temporarily Restricted Net Assets	4,109,845
	Total Equity	22,413,770
	Total Liabilities + Total Equity	22,595,200

Page 4 of 6 NS ACH Profit and Loss

NS ACH INVESTMENT SUMMARY Operations March 2019



CASH ACCOUNTS
BANK SWEEP
SCHWAB MONEY MARKET
TOTAL CASH ACCOUNTS

Schwab Investments		
CURRENT MARKET VALU COST 3/31/2019		
	4,319,075	

FIXED INCOME

TOTAL FIXED INCOME	6,662,643	6,713,526
DISCOVER BANK GR 2.75% 7/20	225.000	225,242
WELLS FARGO BK N 2.55% 4/20	250,000	249,878
MORGAN STANLEY BA 2.6%2 4/20	250,000	249,990
GOLDMAN SACHS 2.55% 4/20	250,000	249,864
BANKUNITED, INC. 2.55% 1/20	145,000	145,038
MORGAN STANLEY 2.25% 10/19	250,000	249,781
US TREASUR NT 2.125%12/22	324,010	323,832
US TREASUR NT 1.75%09/22	320,071	319,820
US TREASUR NT 2% 10/21	412,944	422,410
US TREASUR NT 2.125% 06/21	415,840	423,738
US TREASUR NT 2.375% 04/21	419,225	425,863
US TREASUR NT 2% 01/21	416,479	422,742
US TREASUR NT 1.625% 10/20	414,523	420,418
US TREASUR NT 1.375% 12/19	591,283	595,594
US TREASUR NT 1.375% 9/19	246,954	248,672
US TREASUR NT .875% 6/19	541,625	548,109
US TREASUR NT 1.5% 3/19	546,651	550,000

TOTAL CASH & INVESTMENTS

6,662,643 11,032,602

Page 5 of 6 NS ACH Investment Rollorward Monday, May 6, 2019

NS ACH INVESTMENT SUMMARY - Resiliency March 2019

■■North Sound ACH

	Coh	wah Investments
	301	wab Investments
		CURRENT MARKET VALUES
CASH ACCOUNTS	COST	3/31/2019
BANK SWEEP		3
SCHWAB MONEY MARKET		2,139
TOTAL CASH ACCOUNTS		2,142
FIXED INCOME		
U S T BILL DUE 2.51% 08/01/19	1,820,210	1,828,166
TOTAL FIXED INCOME	1,820,210	1,828,166
TOTAL CASH & INVESTMENTS	1,820,210	1,830,308

Page 6 of 6 NS ACH Investment Rollforward Monday, May 6, 2019

Balance Sheet as of 12/31/2017

Account Number	Account Name	Amount
Assets		
Cash		
1000	Peoples Checking	5,598,864
1015	Certificate of Deposit	30,000
	Total Cash	5,628,864
Current Assets		
1100	Accounts Receivable	27,872,344
1110	Prepaid Expense	16,525
	Total Current Assets	27,888,869
Fixed Assets		
1510	Equipment	7,000
1520	Furniture & Fixtures	27,612
1530	Computer Hardware & Software	19,983
1560	Accumulated Depreciation	(5,208)
	Total Fixed Assets	49,388
	Total Assets	33,567,120
<u>Liabilities</u>		
Current Liabilities		
2000	CEO - Credit Card	1,737
2100	Accounts Payable	20,134
2125	B&O Payable	116,400
2140	Payroll Tax Payable	(10,339)
2150	L&I Payable	901
2155	Accrued PTO	22,867
	Total Current Liabilities	151,701
Long Term Liabilities		
2300	Deferred Rent	6,108
	Total Long Term Liabilities	6,108
	Total Liabilities	157,809
<u>Equity</u>		
Unrestricted Net Assets		
	Total Unrestricted Net Assets	33,386,854
Temporarily Restricted N	<u>Vet Assets</u>	
3102	SIM Admin Governance	(2,473)
3103	SIM Health Measurement	13,605
3104	SIM System Transfer	11,325
	Total Temporarily Restricted Net Assets	22,458
	Total Equity	33,409,312
	Total Liabilities + Total Equity	33,567,120

Income Statement for the period of 01/01/2017 to 12/31/2017

Account N	lur Account Name Amount	
Income		
Revenue		
4105	Individual Donations	7,758
4220	Corporate Grant	4,126
4221	Corporate Contract	3,250
4320	Foundation Grant	50,000
4420	Gov't Grant	311,804
4421	Gov't Contract	33,872,344
1122	Total Revenue	34,249,282
Other Inco		3 1,2 10,232
4110	Other Income	415
4450	Interest Income	886
1130	Total Other Income	1,301
	Total Income	34,250,583
Expense	Total medine	34,230,363
	ative Expenses	
5000	Payroll Expenses	_
5010	Salaries	374,392
		•
5015	Payroll Taxes	33,473
F020	Total 5000 - Payroll Expenses	407,865
5030	Employee Benefits	-
5012	Accrued Vacation	22,867
5025	401K Contributions	7,130
5027	Employee Healthcare	54,344
	Total 5030 - Employee Benefits	84,340
5050	Facility	-
5055	Insurance	3,956
5060	Lease/Rent	14,556
5061	Furnishings	1,570
5065	Utilities	2,345
5067	Facility Maintenance	975
5070	Telecommunications	3,031
	Total 5050 - Facility	26,434
5075	Supplies	15,223
5100	Travel	-
5105	Mileage	12,640
5110	Transportation	5,039
5115	Lodging	6,624
5120	Meals	1,522
	Total 5100 - Travel	25,825
5200	Professional Services	-
5220	Legal Services	1,220
5230	Other Professional Services	106,601
5260	Financial Services	30,667
	Total 5200 - Professional Services	138,487
5305	Equip Rental/Lease	855
5310	Dues/Subscriptions	5,740
5320	Education/Training	2,576
5330	Meeting/Event Exp	10,120
5340	Printing/Copying	109
5350	Postage/Delivery	132
5370	Repairs/Maintenance	1,098
5380	Taxes/Licenses	117,260
	Total Administrative Expenses	836,064
Other Expe	-	220,004
6400	Depreciation	5,208
3.00	Total Other Expenses	5,208
	Total Expense	841,272
	Net Income (Loss)	33,409,312
		33,333,312

Balance Sheet as of 12/31/2018

Account Number	Account Name	Amount
Assets		
Cash		
1000	Peoples Checking	592,766
1010	Chase Savings	225,079
1015	Certificate of Deposit	30,060
	Total Cash	847,904
Current Assets		,
1020	FE Portal	17,648,689
1110	Prepaid Expense	160,508
1115	Investment Interest Receivable	25,989
1150	Investments Operations	, -
1151	Investment Operations Bank Sweep	25,527
1152	Investment Operations Fixed Income	5,758,645
1153	Investment Operations Money Market	2,020,404
	Total 1150 - Investments Operations	7,804,576
	Total Current Assets	25,639,762
Fixed Assets		
1510	Equipment	10,076
1520	Furniture & Fixtures	39,490
1530	Computer Hardware & Software	25,765
1560	Accumulated Depreciation	(20,059)
	Total Fixed Assets	55,273
	Total Assets	26,542,939
<u>Liabilities</u>		
Current Liabilities		
2000	CEO - Credit Card	(155)
2015	Citi - Credit Card	9,393
2100	Accounts Payable	290,894
2125	B&O Payable	94,005
2150	L&I Payable	705
2155	Accrued PTO	24,885
2200	Employee Benefits	194
	Total Current Liabilities	419,920
Long Term Liabilities		
2300	Deferred Rent	12,451
	Total Long Term Liabilities	12,451
	Total Liabilities	432,372
Equity		
Unrestricted Net Assets		22.024.400
To accompanie Do state de A	Total Unrestricted Net Assets	23,924,180
Temporarily Restricted N		1 920 000
3123	Resiliency Fund	1,820,000
3124	Reserve Fund	360,000
3129	SIM Fund Balance	6,388
	Total Temporarily Restricted Net Assets	2,186,388
	Total Liabilities L Total Equity	26,110,568
	Total Liabilities + Total Equity	26,542,939

Income Statement for the period of 01/01/2018 to 12/31/2018

Account N	ur Account Name	Amount
Income		
<u>Revenue</u>		
4105	Individual Donations	20,000
4420	Gov't Grant	103,130
4421	Gov't Contract	16,520,549
	Total Revenue	16,643,679
Other Inco	m <u>e</u>	
4450	Interest Income	64,962
4460	Dividend Income	26,433
	Total Other Income	91,395
	Total Income	16,735,073
Expense		· ·
	ative Expenses	
5000	Payroll Expenses	-
5010	Salaries	640,026
5015	Payroll Taxes	57,828
	Total 5000 - Payroll Expenses	
5030	Employee Benefits	-
5012	Accrued Vacation	2,018
5025	401K Contributions	17,585
5027	Employee Healthcare	79,258
3027	Total 5030 - Employee Benefits	
5050	Facility	-
5055	Insurance	4,822
		,
5060	Lease/Rent	50,031
5061	Furnishings	826
5065	Utilities	11,021
5067	Facility Maintenance	5,370
5070	Telecommunications	4,300
	Total 5050 - Facility	
5075	Supplies	13,363
5100	Travel	-
5105	Mileage	7,113
5110	Transportation	4,417
5115	Lodging	20,709
5117	Airfare	11,333
5120	Meals	2,416
5130	Other	83
	Total 5100 - Travel	46,072
5200	Professional Services	-
5210	Audit Services	3,435
5220	Legal Services	375
5230	Other Professional Services	623,133
5250	Communication Services	4,500
5260	Financial Services	99,578
	Total 5200 - Professional Services	731,021
5305	Equip Rental/Lease	8,679
5310	Dues/Subscriptions	18,938
5311	Software as a Service	49,651
5315	Bank Fees	324
5320	Education/Training	8,487
5330	Meeting/Event Exp	18,358
5340	Printing/Copying	1,088
5350	Postage/Delivery	221
5370	Repairs/Maintenance	1,350
5380	Taxes/Licenses	(22,385)
5400	Pass Through Funding	22,298,425
5700	Total Administrative Expenses	
Other Even		24,040,674
Other Expe		14.054
6400	Depreciation	14,851
6500	Unrealized Gain/Loss on Investments	(28,092)
	Total Other Expenses	
	Total Expense	
	Net Income (Loss)	(7,298,360)

Draft North Sound ACH 2019 Governance Cmt & Board Calendar

MONTH	Governance Committee	Board
January	 Review board applications Prepare for Board Retreat Draft board education plan Revise 2019 calendar based on board feedback 	 Board Retreat Provide annual charge/guidance to each comp Finalize approve 2019 calendar Board cation: John Powell; Health Eg
February		 CEO report on Board Goals CEO report on Executive Limitation Policy #2: Treatment of Staff CEO report on Executive Limitation Policy #7: Compensation and Benefits Board Education: Live Well San Diego
March	 Review board applications Board leadership and board replacement recommend CEO's report on Execution Policy #3: Design and Implementation Review CEO report on Execute Limitation Financial Planning 	
April		 CEO report on Executive Limitation Policy #3: Design and Implementation CEO report on Executive Limitation Policy #4: Financial Planning and Budgeting End State Refinement
May	 Review L d applic ins Recomment ions on a for requirements of board ioms Review CEO's port on Board pals I aw CEO' port on Executive Link ion P #5: Emergency CEO solon Planning Review Lard survey on board education/training 	
June	 Identify upcoming board openings/vacancies Finalize 2019 board recruitment process Recommendations on board terms 	 CEO report on Board Goals CEO report on Executive Limitation Policy #5: Emergency CEO Succession Planning Provide feedback on board terms

	 Finalize board survey on board education/training Review progress from and provide feedback to Visioning Workgroup Review CEO's report on Board Goals Review CEO's report on Executive Limitation Policy #5: Emergency CEO Succession Planning 	Receive update on and provide feedback to Visioning Workgroup Complete board survey on board education/training
July	 Develop list of potential board candidates Review and post announcement for open board positions Review progress from and provide feedback to Visioning Workgroup 	
August	 Review CEO's report on Executive Limitation Policy #6: Treatment of Asset Protection Develop board performance evaluation survey Prioritize nomination criteria Screening of potential board candidates Finalize recommendations of Visioning Workgroup findings 	 CEO report on Executive Limitation Policy #6: Treatment of Asset Protection Review and edit board performance evaluation survey Finalize End State
September	 Release board performance evaluation survey Finalize recommended changes to bylaws Interviews with board applicants 	Complete board performance evaluation survey
October	 CEO report on Executive Limitation Policy #8: Communication and Support to the Board Review results from board performance evaluation survey Interviews with board applicants 	 CEO report on Executive Limitation Policy #8: Communication and Support to the Board Review results from board performance evaluation survey Review draft changes to bylaws
November	 Incorporate board feedback from board performance evaluation Finalize recommendations of board applicants and board officers 	

December	 Review CEO's report on Board Goals Finalize board evaluation results Draft 2020 board calendar 	 CEO report on Board Goals Vote on board candidates and new officers Vote on revisions/updates to bylaws 2020 budget
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Report to the North Sound ACH Board of Directors: CEO Monitoring Report on Board Goals (Policy 1.0) June 2019

Board Goals:

- 1. The creation or facilitation of policies, strategies and programs that improve health shall mean:
 - a. Planning and implementing integrated and sustainable programs and strategies that include:
 - i. Physical and behavioral health bi-directional integration
 - ii. Improved community care-coordination, including periods of transitional care and diversion from Emergency Department
 - iii. Opioid use intervention
 - iv. Transformative approaches in reproductive and maternal and child health, access to oral health services and chronic disease prevention and control

CEO interpretation: The North Sound ACH and partners will plan and implement strategies that include bi directional care, including transition to integrated managed care, addressing the opioid crisis, care coordination that addresses transitions between care and service settings and targets diversion options from emergency departments, and innovations in oral health, reproductive and maternal child health and chronic disease management. This is not interpreted to mean that these are distinct and separate project initiatives.

Actions since February 2019:

- Completed negotiations with all 2019 partner organizations.
- Distributed summary to Board of partners committed to each strategy.
- Team has compiled technical assistance requests from each partner and completed implementation of Partner Portal, which includes resources for all recommended evidence-based models.
- Partners completed first cycle of reporting on first phase of implementation.
- Launch of Tribal and Equity Learning Series in May 2019.

Supporting Data:

- Report provided to Board about partners (in April 2019 Board packet)
- Operations Report
- Newsletter Update on May 22 Launch of Tribal and Equity Learning Series

- 2. Implementing integrated programs and strategies for defined populations* with the following estimated earned annual revenues:
 - a. \$32.7 million by year-end 2018
 - b. \$16.4 million by year-end 2019
 - c. \$15.1 million by year-end 2020
 - d. \$6.8 million by year-end 2021
 - e. \$5.7 million by year-end 2022
 - f. \$3.7 million by year-end 2023

CEO interpretation: North Sound ACH and its partners will work to optimize potential earnings available through DSRIP and seek out additional opportunities to add revenue for sharing with North Sound partners.

Activity since February 2019:

- North Sound ACH Receipts: \$6,378,739 (2017); \$34,190,168 (2018);
 \$12,436,716 to date in 2019; anticipate second payment of IMC incentive and second payment for P4R in early fall to total about \$18,900,000 by year end.
- P4R payments to date included \$300,000 as VBP incentive
- Arcora Foundation to support staffing of Oral Health LIN (\$100,000)
- Whidbey Health reported receipt of \$500,000 grant to support strategies around opioids for Island county partners

Supporting Documents:

- Earnings and Distribution Reports from FE Portal
- Financial Statements (included in Board Packet)
- 3. Implementing integrated programs and strategies for defined populations* with the <u>following fund allocation strategies:</u>
 - a. Up to \$18.2 million in 2018 with the following requirements:
 - i. Approximately 80% goes toward assessment, initiative planning, implementation and regional infrastructure
 - ii. Core administrative infrastructure is kept at/below 10%
 - iii. 10% of earnings are put in a restricted Community Resiliency Fund
 - iv. 2% of earnings in a restricted Reserves/Contingency Fund.
 - b. Up to \$18.2 million in 2019 (guidance to be determined):
 - c. Up to \$17.7 million in 2020 (guidance to be determined):
 - d. Up to \$14.8 million in 2021 (guidance to be determined):
 - e. Up to \$19.1 million in 2022 (guidance to be determined):

f. Up to \$7.4 million in 2023 (guidance to be determined):

CEO interpretation: Expenditures approved and distributed by the North Sound ACH will not exceed the Board-approved budget limit and will stay in alignment with the overall allocation strategy approved by the Board.

Actions since February 2019:

• 2019 fund distribution will occur in June and Oct/Nov of 2019.

Supporting Data:

- Earnings and Distribution Reports from FE Portal
- Financial Statements (included in Board Packet)

4. Achieving the project metrics outlined by the Washington Health Care Authority.

CEO interpretation: North Sound ACH and its partners will work to meet or exceed the reporting and performance metrics that are set forth by the Washington Health Care Authority in the updated Toolkit and descriptions of revised metrics.

Actions since February 2019:

- All partners completed their first reporting period, so we have data on what is going well, where the challenges are and where TA will be most helpful.
- This will be included in the next Semi-annual Report to Health Care Authority due July 31, 2019.

Supporting Documents:

Operations Report

5. Ensuring that the integrated strategies are sustainable.

CEO interpretation: North Sound ACH and its partners will optimize implementation of evidence-based strategies and include Medicaid and commercial payers in discussions about return on investment considerations.

Actions Since February 2019:

- ACH executives, HCA and MCO representatives' discussions on sustainability strategies, convening June 11, 2019.
- ACH executives and project teams continue cross-ACH discussions to

- optimize implementation by partners that cross ACHs and patients/clients who cross ACHs.
- All nine ACH executives are jointly contracting with national experts on crafting sustainability options that cross ACH boundaries
- North Sound ACH contracting with consultant to craft sustainability options for North Sound Board consideration

Supporting Data:

- Meeting agendas and attendees
- 6. Diversifying funding streams that are not HCA-related to further the North Sound ACH mission.

CEO interpretation: North Sound ACH and its partners will begin to explore opportunities for other revenue sources beyond DSRIP to support activities of the North Sound ACH and its partners, including philanthropic, partner contributions, other earned revenue and future public funding opportunities.

Action since February 2019:

- Pursuing grant opportunity with Washington Center for Nursing
- Collaboration with Arcora Foundation

Supporting Data

• Operations Report

CEO Report Visuals: Goals

June 28, 2019 Board Meeting





Board Goals: 1) Programs and Strategies

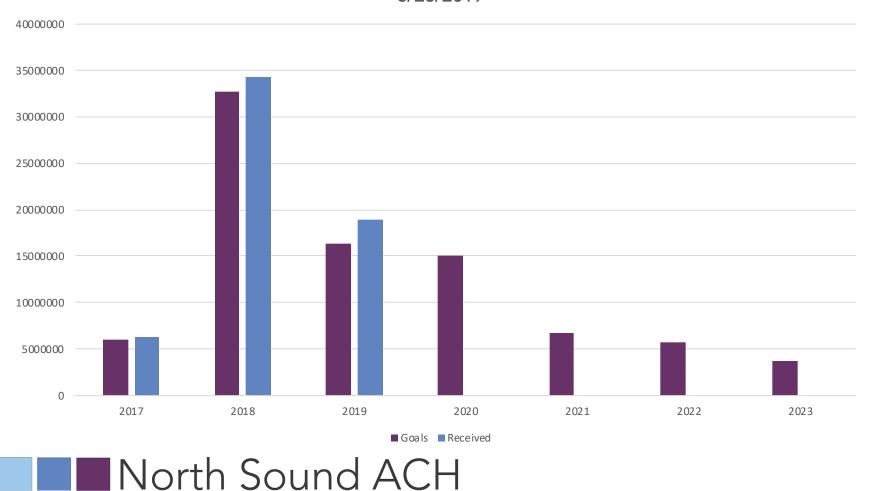
- Integrated and sustainable programs that include:
 - Physical and behavioral health bi-directional integration
 - Care coordination, including transitions and diversion
 - Interventions related to opioid overuse and overdose
 - Reproductive and maternal child health, oral health and chronic disease prevention and management



Board Goals: 2) Earnings

- **\$32.7M (2018)**
- \$16.4M (2019)
- **\$15.1M (2020)**
- \$6.8M (2021)
- \$5.7M (2022)
- **\$3.7M (2023)**

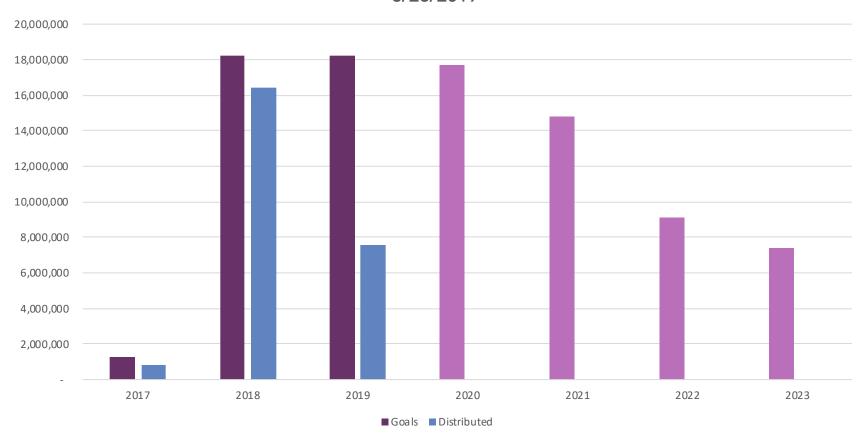
North Sound ACH Revenue: Goals to Actuals 6/28/2019



Board Goals: 3) Distribution Caps

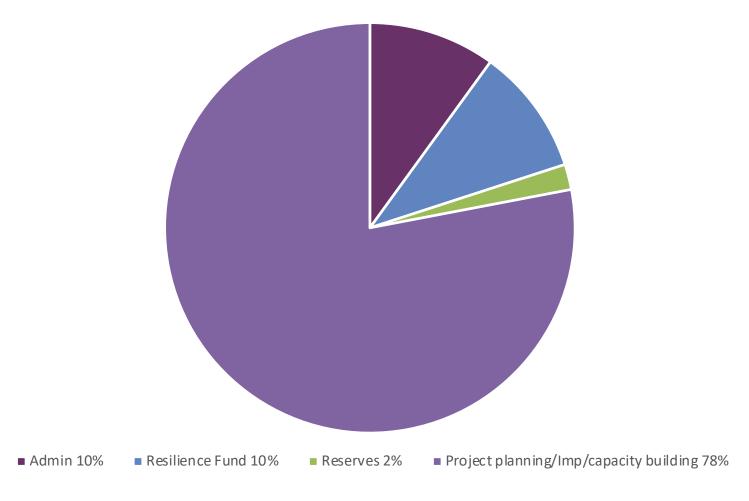
- **\$18.2M (2018)**
- \$18.2M (2019)
- \$17.7M (2020)
- \$14.8M (2021)
- \$9.1M (2022)
- \$7.4M (2023)

North Sound ACH Funds Distributed: Caps to Actual 6/28/2019



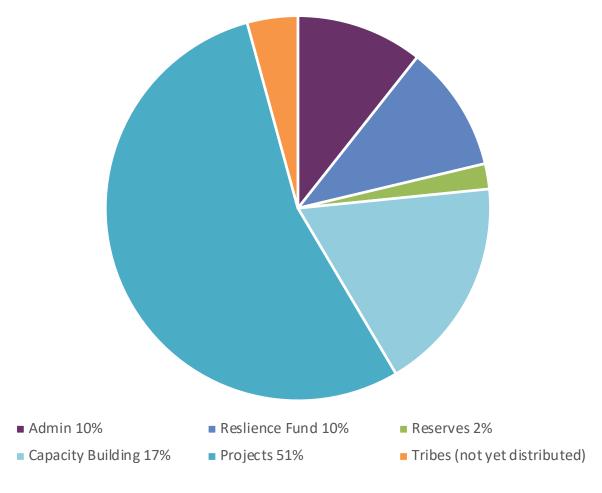


2018 Distribution Cap (\$18.2M)





2018 Distribution Actuals (\$17.03M to date)





Board Goals: 4) Project metrics

- Interpretation: Achieve project metrics outlined by the WA Health Care Authority
- Actual: To date have scored 100% on all deliverables.

Board Goals: 5) Sustainability

- Integrated strategies are sustainable
 - Launching three-way dialogue that includes ACH executives, MCOs and HCA leadership
 - Identifying sustainability strategies will require all perspectives aligning on key approaches
 - North Sound working with consultant to design regional sustainability options

Board Goals: 6) Diversify Funding

- Diversify finding streams that are not HCA-related to further the ACH mission
 - Interpretation this should include HCA and other public funds, not exclude those strategies
 - Grants to ACH and to partners; how to capture those
 - Leverage ACH fund distribution to draw other funds to region
 - Leverage our earnings to extend life of the infrastructure



Meetings related to cross-ACH activities and sustainability:

Recurring meetings:

Weekly: With ACHs, HCA and other state partners:

- Monday: transformation alignment calls (90 minutes)
- Wednesday: nine ACH executives and designated program leads huddle (60 minutes)
- Friday: North Sound call with HCA MTP Manager to discuss region-specific issues (30-60 minutes)

Bi-weekly

- Friday: Tribal Liaisons Call
- Tuesday: Data leads call

Monthly:

- ACH Executives in-person meeting, facilitated by Artemis Consulting team (Diana Bianco, Cathy Kaufmann, Bruce Goldberg)
- ACH Executives, MCO representatives, HCA policy leads, to be facilitated by Manatt Health. First meeting was June 11; schedule and agenda to be determined collectively.

Ad-hoc:

- April 29, 2019
- June 5, 2019

ACH Executives and HUB leadership from **six** ACHs implementing Care Coordination/Pathways HUBs, originally self-facilitated, facilitated by Artemis Consulting team as of June 2019:

(includes North Sound, North Central, Southwest ACH, CPAA, Better Health Together, and Pierce)

- February 26, 2019
- June 11, 2019

ACH Executives, data and program leads of **five** ACHS that contract with the Center for Evidence Based Policy at OHSU, facilitated by the Center:

(includes North Sound, Olympic, CPAA, Greater Columbia and North Central)

- May 2, 2019, HCA and PCG and finance leads from all ACHs to discuss refined expectations of FE and contract challenges
- May 14, 2019 Meet with Mich'l Needham, Michael Arnis and Chase Napier to discuss sustainability report to Legislature



Report to the North Sound ACH Board of Directors: CEO Monitoring Report on Executive Limitation Policy #5 Emergency CEO Succession June 2019

In order to protect the North Sound ACH and the Board from the disruption that could result from sudden loss of CEO services, the CEO shall not fail to designate a person capable of managing ACH operations during a transition period, complying with Board Goals and Executive Limitations policies, and familiar with Board and of CEO issues and processes to enable them to take over with reasonable proficiency as an interim successor.

The CEO shall not allow the ACH to operate without written procedures that instruct staff on when, how and for what reasons the emergency of CEO interim plan is enacted.

CEO Interpretation:

In order to assure that there is executive coverage in the event where the CEO is unexpectedly unavailable, a written plan will be in place and communicated with the staff and board that can quickly be put into play.

Actions since October 2018:

An emergency succession plan to cover necessary responsibilities if the CEO is unexpectedly absent and unavailable was put in place recognizing that the North Sound ACH has primary responsibilities to:

- The Board and its committees
- The staff
- Partnering providers
- The HCA and its contractors (i.e., independent assessor and financial executor)

Changes include:

 A leadership team was formed, with position descriptions and authority creating a middle layer of leadership. (see attached visual). The Leadership Team includes:

- Chief Operations Officer (COO)
- Manager, Office and Governance
- Clinical Director
- Equity Manager
- Community HUB Director
- The COO will take on the CEO responsibilities in the event of an unexpected absence where the CEO is unavailable.
- Nicole Willis accepted the COO position, and in an unexpected emergency will act as the Interim CEO. During an emergency succession all direct reports to the CEO will report to her, including HR Director, CFO and contractors.

We continue to prepare the leadership team to work efforts and key contacts, including creating some periodic redundancy in partner meetings in order to facilitate smooth transitions when needed.

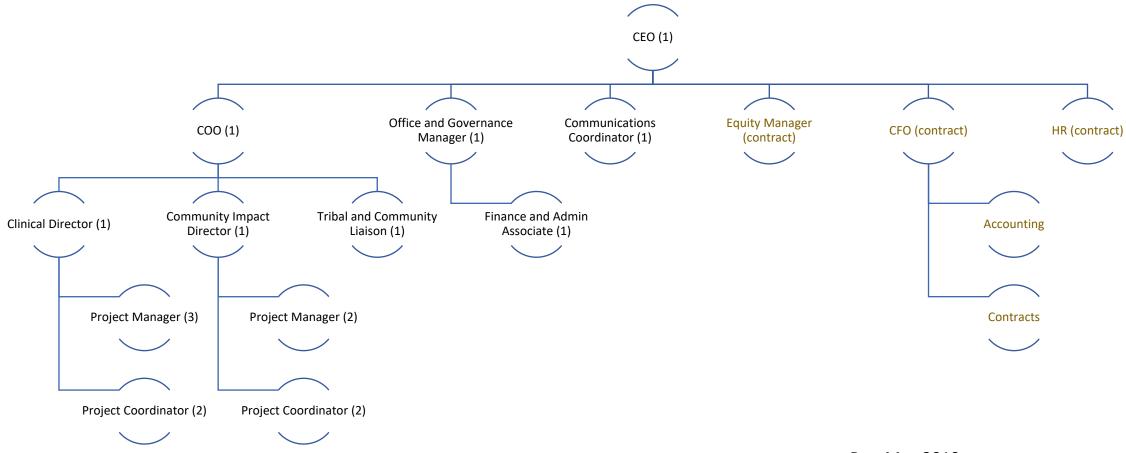
Updated signature authority makes it easy for individuals to step in and take care of needed approvals in case of emergency succession. (i.e., CFO is an approver in the FE Portal in order to facilitate approval of partner payments, and takes part in cross-ACH Finance discussions, including those with HCA.)

The Office and Governance Manager will notify the Board Chair within 24 hours of an event triggering initiation of the emergency succession plan.

Documentation:

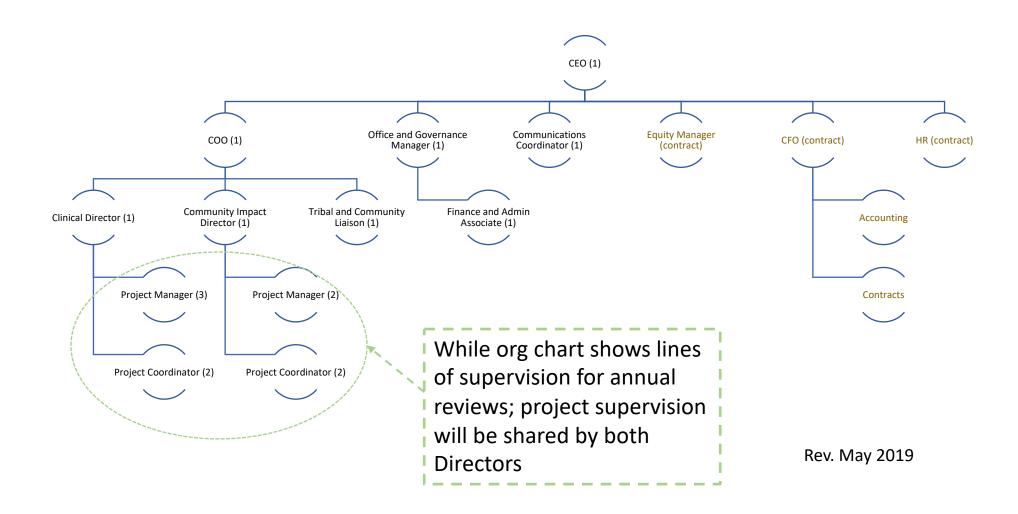
- Current organizational chart (revised May 2019); emergency succession organizational chart
- COO position description

2019 Organizational Chart

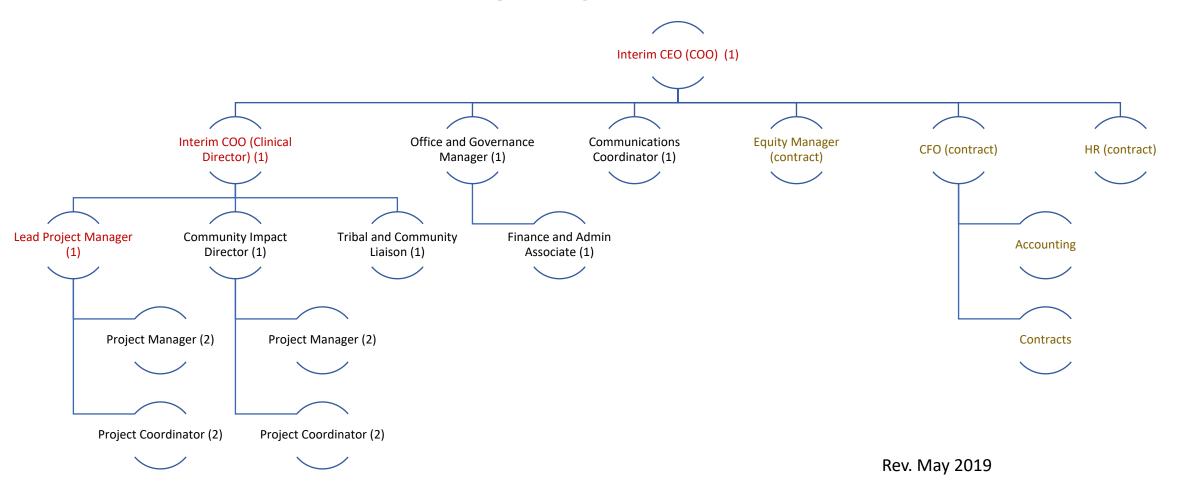


Rev. May 2019

2019 Organizational Chart



2019 Organizational Chart: Emergency Succession





Position Description

Title: Chief Operations Officer	
Reports To: Executive Director	Status: Exempt; Full-time
Supervises: Program Managers & Project Coordinator	Location: North Sound ACH Region (Island, San Juan, Snohomish, Skagit, Whatcom Counties)

Position Summary

The Operations Director is responsible for planning, directing and monitoring the daily operational/program activities of North Sound Accountable Community of Health (North Sound ACH), working under the direction of the Executive Director. This position will assist the Executive Director in providing internal planning leadership and direction, develops recommendations and implements strategic short- and long-range plans, programs, goals and objectives for assigned areas and oversees planning efforts for the entire agency. The Operations Director will oversee health improvement initiatives and strategies, and lead decision-making on program planning, stakeholder engagement, operational workgroups, program development, implementation, monitoring, and contracting. Provides direct supervision to assigned North Sound ACH team members.

Essential Job Functions

- Determines individual staff needs and assigns, supervises and evaluates work consistent with assigned job description. Supervision includes selection, development, coaching, regular communication, and timely performance reviews.
- Provides technical consultation to all staff in support of internal project management and quality improvement processes. Initiates, leads, recommends, and implements quality improvement projects.
- Monitors and evaluates North Sound ACH projects for effectiveness and update as needed.
- Fosters the principles of a learning organization with North Sound ACH team members and plans professional development opportunities as needed.
- Creates, reviews and approves summaries and/or reports which provide information, status updates and program justification for North Sound ACH programs and initiatives.
 Provides regular status reports to internal and external audiences. Flags issues that need attention from the ED, colleagues, ACH leadership, or the ACH partners.
- Prepares straw proposals, briefing documents, speaking points, presentations, reports,

- applications, budgets and/or other documents associated with moving projects forward.
- Plans, directs and formulates policies, sets strategies and provides the overall directions of agency's data analytic activities.
- Applies informatics knowledge, theories, concepts, methods and tools to ensure
 effective use of information and information technology and support decision making
 and problem solving.
- Understands, interprets and effectively explains data from a variety of sources on population health needs and resources and on the performance of the health care system.
- Monitors contractual agreements for health improvement programs and initiatives and ensures reporting requirements are met.
- Writes or helps write funding proposals and progress reports to funding sources.
- Assists the ED in managing subcontracts when external expertise is required, within budget, ensuring that the contractor performs as agreed.
- Assists the Executive Director in developing and managing the North Sound ACH budget, ensuring budget compliance, monitoring, tracking; and ensures that all work stays within budgetary constraints.
- Acts in place of the Executive Director (ED) when requested, or when the ED is unavailable.
- Supports the ED in acting as spokesperson and public presence for the North Sound ACH and its community initiatives.
- Assists the ED in serving as liaison with the Washington State Health Care Authority, other ACHs in other regions, and other agencies involved in the Healthier Washington work.
- Performs other duties as assigned by the Executive Director.

Qualifications and Skills:

Knowledge & Experience

- Master's degree from an accredited college or university in business, health education, public health or health administration, or a related field.
- Four-six years of experience in in facilitating cross-sector planning in the health, human services, and/or community development fields and managing groups with multiple perspectives and interests.
- Demonstrated facilitation, negotiation, consensus-building, and problem-solving skills;
- Solid decision making, problem solving approaches, and ability to support routine to complex analysis.
- Knowledge of current health reform agendas and integration strategies in the social determinants of health services, delivery systems around health and social supports.
- Demonstrated track record working with diverse stakeholders in politically complex environments to incubate new coalitions or alliances.

- Effective public speaking and presentation skills. Advanced written and oral communication skills; ability to present complicated issues in an accessible manner to diverse audiences.
- Policy development and interpretation skills.
- Demonstrated experience working with diverse public and private sector stakeholders to manage multiple, competing interests to reach shared goals.

Other Qualifications

- Proficient in Microsoft Office Suite (Word, Excel, and Power Point), Adobe Acrobat, and Social Media web platforms. Google Apps, including Docs, Spreadsheets and Google Drive; and other online collaboration tools.
- Leadership: Lead by example, maintain professionalism, and leverage communication strategies to promote effective organization change and culture development.
- Teamwork: Work effectively and respectfully with team members, stakeholders, and other external partners.
- Commitment to Equity: Leadership and training on improving equity and reducing health disparities.
- Time and Deliverable Management: Manage and prioritize multiple projects, tasks and execute deliverables on time, within scope and budget.
- Dependability: Demonstrate responsive and responsible behavior in fast-paced and start-up environment.
- Ethics and Integrity: Earn the trust, respect, and confidence of co-workers and stakeholders through honest, forthright, and professional interactions; respect and maintain confidentiality.
- Communication: Effectively convey ideas clearly both orally and in writing, using both professional and Plain Language principles. Excellent presentation skills.

Special Requirements

- A valid driver's license and proof of insurance are required. Successful candidate will have ready access to and ability to operate a motor vehicle.
- Final candidates are subject to a background check.

Working Conditions & Physical Requirements

Work is primarily performed in a professional office setting. Travel among the five-county service area is required, including evening and weekend hours to travel or attend meetings. Position requires hand manipulative skills working with electronic equipment and systems. May occasionally lift and carry items weighing up to 25 pounds. Must be able to hear verbal conversations over the phone and in-person with background noise. Vision acuity to perform read and complete documents.

The statements contained herein reflect general details as necessary to describe the principal functions

of this job, the level of knowledge and skill typically required and the scope of responsibility, but should not be considered an all-inclusive listing of work requirements. Individuals may perform other duties as assigned including work in other functional areas to cover absences or relief, to equalize peak work periods or otherwise to balance the workload. Furthermore, they do not establish a contract for employment and are subject to change at the discretion of the employer.

The North Sound ACH is an Equal Opportunity Employer

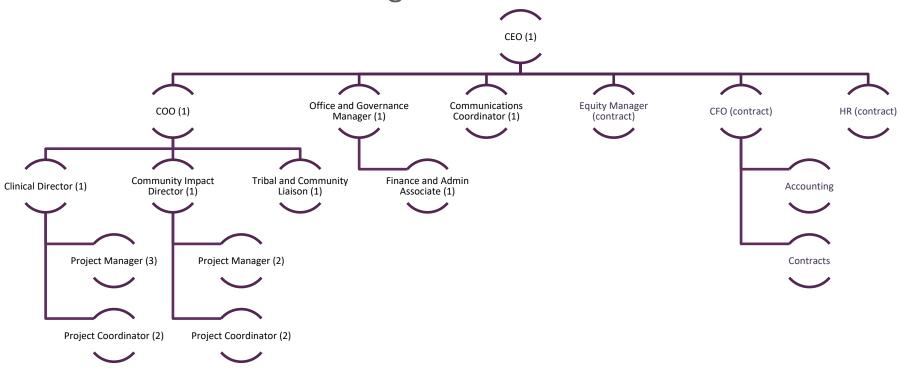
CEO Report Visuals: CEO Succession

June 28, 2019 Board Meeting

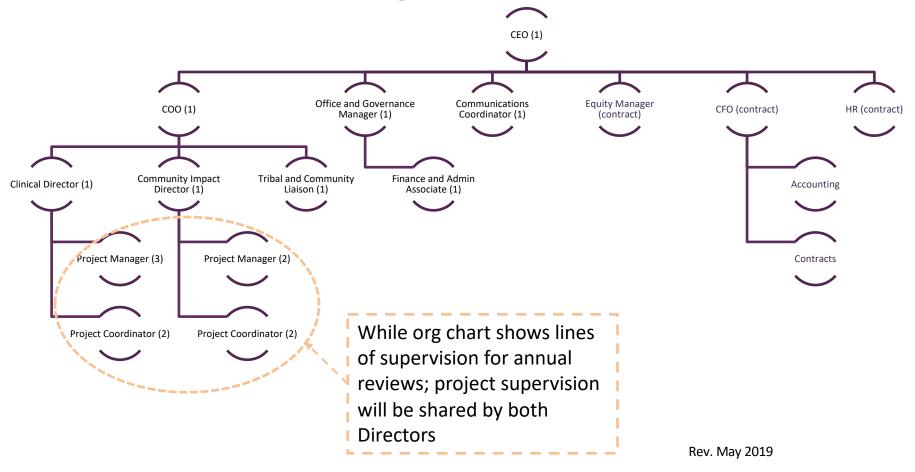




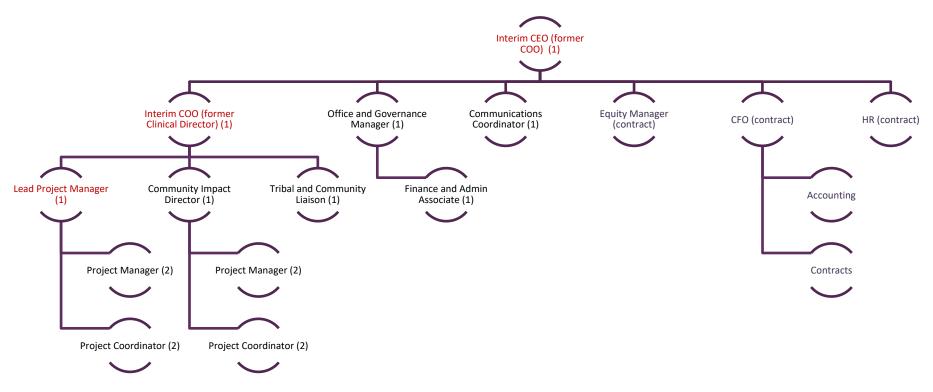
2019 Organizational Chart



2019 Organizational Chart



2019 Organizational Chart: Emergency Succession



North Sound Accountable Community of Health Dashboard Report, Financial Executor Portal: 1/1/2018 To 12/31/2018

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Funds Earned by ACH	Amount
Project Area Earnings	\$38,119,335
Behavioral Health Integration Incentives	\$4,332,435
Value-Based Payment (VBP) Incentives	
IHCP-Specific Projects	
Bonus Pool/High Performance Pool	\$1,941,123
Total Funds Earned	\$44,392,893
Funds Distributed by ACH	Amount
Administration	\$1,813,169
Community Health Fund	\$1,800,000
Health Systems and Community Capacity Building	\$2,987,878
Integration Incentives	\$553,320
Project Management	\$282,882
Provider Engagement, Participation and Implementation	\$8,636,100
Provider Performance and Quality Incentives	
Reserve / Contingency Fund	\$360,000
Shared Domain 1 Incentives	\$10,310,855
Total	\$26,744,204
Total Funds Available for Distribution (AKA left in FE Portal)	\$17,648,688.69
% of Total Funds Distributed	
Administration	6.78%
Community Health Fund	6.73%
Health Systems and Community Capacity Building	11.17%
Integration Incentives	2.07%
Project Management	1.06%
Provider Engagement, Participation and Implementation	32.29%
Provider Performance and Quality Incentives	
Reserve / Contingency Fund	1.35%
Shared Domain 1 Incentives	38.55%
Total	100.00%

North Sound Accountable Community of Health Dashboard Report, Financial Executor Portal: 1/1/2018 To 6/21/2019

Generated by Elizabeth Baxter on: 6/21/2019 7:26:43 PM (UTC)

Funds Earned by ACH	Amount
Project Area Earnings	\$54,640,023
Behavioral Health Integration Incentives	\$4,332,435
Value-Based Payment (VBP) Incentives	\$300,000
IHCP-Specific Projects	
Bonus Pool/High Performance Pool	\$1,941,123
Total Funds Earned	\$61,213,581
Funds Distributed by ACH	Amount
Administration	\$4,677,634
Community Health Fund	\$4,651,875
Health Systems and Community Capacity Building	\$6,320,241
Integration Incentives	\$553,320
Project Management	\$318,417
Provider Engagement, Participation and Implementation	\$8,868,800
Provider Performance and Quality Incentives	
Reserve / Contingency Fund	\$930,375
Shared Domain 1 Incentives	\$13,050,838
Total	\$39,371,500
Total Funds Available for Distribution (AKA left in FE Portal)	\$21,842,081
% of Total Funds Distributed	
Administration	11.88%
Community Health Fund	11.82%
Health Systems and Community Capacity Building	16.05%
Integration Incentives	1.41%
Project Management	0.81%
Provider Engagement, Participation and Implementation	22.53%
Provider Performance and Quality Incentives	
Reserve / Contingency Fund	2.36%
Shared Domain 1 Incentives	33.15%
Total	100%

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Past Issues

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May 2019 News & Updates

The end of May already? Seriously?!

The partners of the North Sound ACH came together on May 22 to launch the Tribal and Equity Learning Series, something we asked our partners to commit to, as well as our team and Board of Directors.

When we submitted our plan to the Health Care Authority last fall, we embedded advancing equity and the concept of targeted universalism into our cross-cutting implementation strategies. We don't believe that we can achieve our transformation targets without getting better at how we see and treat each other, creating communities where all feel a sense that we belong.

Dale Jones of the Tulalip Tribes generously welcomed us to the land before beginning our meeting. The morning sessions included an introduction in tribal history and protocol, led by Darrell Hillaire, Penny Carol Hillaire, Julia Ortiz, and TJ Hillaire. It was a perfect way to ground the learning journey we have begun!

We then had a thought provoking session led by john a. powell, who joined us

as part of work North Sound has engaged with Seed Collaborative. Starting with a little bit of how our brains work in relation to bias, john wove in the concepts of targeted universalism, moving us toward belonging instead of 'othering.'

We are so fortunate to have Children of the Setting Sun and Seed Collaborative working with us as we advance equity in the North Sound region. We're working to summarize notes from the day and will post them the first week of June, along with pictures and videos.

We are so grateful to the work happening across the region and to you - the people leading that work. Thank you.

- Liz

Thanks to everyone who joined us in kicking off our Tribal & Equity Learning Series! We are grateful to have the opportunity to engage and learn with you.



Memorandum of Understanding

Bellingham Technical College, Arcora Foundation & North Sound ACH

Purpose

The purpose of this Memorandum of Understanding (MOU) is to define the agreed upon roles and commitments of each organizations for furthering the goals and strategies of the North Sound Local Impact Network (LIN). This document is not intended to be legally binding or a commitment of funding between partners.

Background

Bellingham Technical College (BTC), Arcora Foundation, and North Sound Accountable Community of Health (NSACH) have a shared goal of improving health in our region, with a focus on oral health. This includes the ensuring oral health access for Medicaid-insured individuals and a well-trained dental workforce. They have agreed to work collaboratively toward this goal through the North Sound LIN. The framework of the LIN is organized around a comprehensive set of anchor strategies working to reduce health disparities.

BTC Commitment

BTC will serve as a partner for the anchor strategy focused on oral health access.

Role:

- 1) Develop and implement a sustainable dental insurance billing program for BTC's Dental Programs, with an emphasis on billing for Medicaid-insured individuals
- 2) Participate as an active partner in the LIN.
- 3) Provide oral health services for patients in the North Sound LIN region, including acting as a referral partner for DentistLink.org.
- 4) As part of building the overall LIN strategy, provide access to adult Medicaid patients, and any other priority populations.

Arcora Foundation Commitment

Arcora Foundation serves as co-lead of the LIN with NSACH and is currently a major funder of the North Sound LIN.

Role:

- 1. Provide \$7,500 in one-time grant funding for the BTC Dental Programs.
- 2. Provide training and technical assistance on using DentistLink.org.

North Sound ACH Commitment

NSACH serves as the backbone organization for the North Sound LIN.

Role:

- 1. Provide \$7,500 in funding for the BTC Dental Programs.
- 2. Provide additional staff expertise as needed to support specific anchor strategies.

Duration

This MOU is at-will and may be modified by mutual consent of authorized officials from all parties. This MOU shall become effective upon signature by the authorized officials from all parties and will remain in effect until modified or terminated by any one of the partners by mutual consent. In the absence of mutual agreement by the authorized officials from all parties, this MOU shall end on December 31, 2020.

Arcora Foundation Docusigned by: Lind Lunnox By 4E45C3BB2BAF465	6/14/2019
Director Title	Date
North Stiffed ACH Ly Baxter By 19BD1D3116C6437	6/14/2019
Title	Date
Bellingham Technical College	
By leuter	6/14/19
Title Foundation Dinecton	Date

TEAMS for Healthier Living





Kathy Moisio, PhD, RN Nursing Education Consultant Nursing Care Quality Assurance Commission



Key Question:

How will our society meet the current and future health needs of our population?

The Need for Innovation

- "For several decades, the needs of the American public have been shifting from predominantly acute, episodic care to care for chronic conditions"
- "Chronic conditions are now the leading cause of illness, disability, and death; they affect almost half of the U.S. population and account for the majority of health care expenditures."

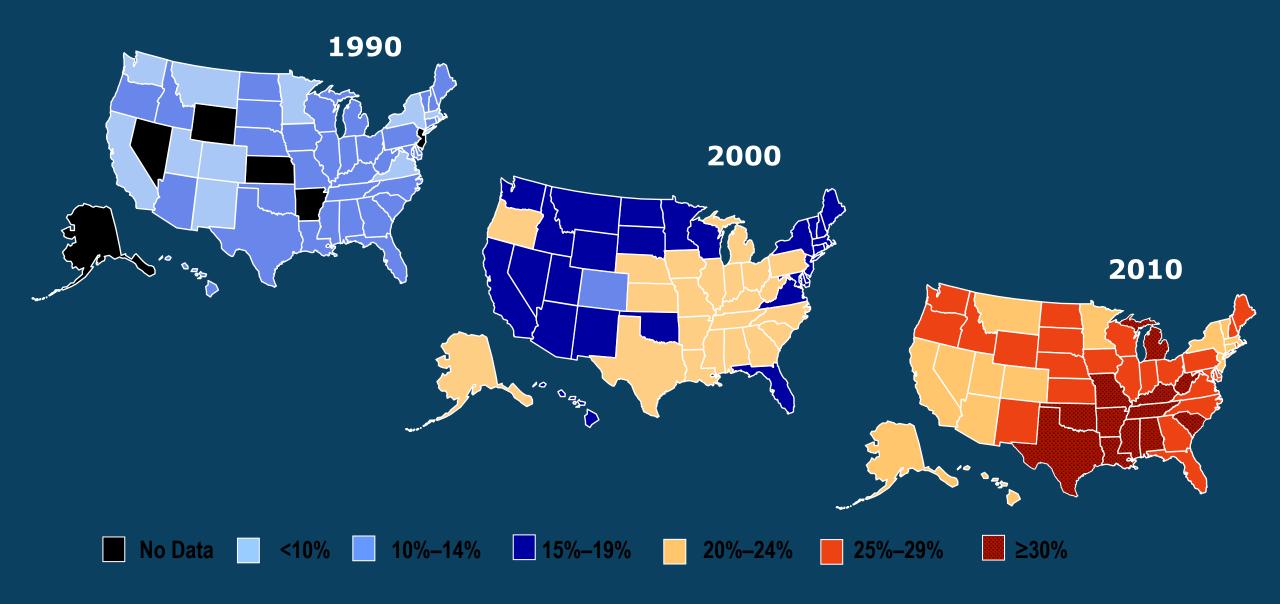
The Need for Innovation



"As of 2012, about half of all adults—117 million people—had one or more chronic health conditions. One of four adults had two or more chronic health conditions."

"Eighty-six percent of all health care spending in 2010 was for people with one or more chronic medical conditions."

Obesity Trends Among U.S. Adults



The Need for Innovation

Diabetes

▶ 29.1 million people in the United States have diabetes; this represents 9.3% of the population



▶ 21 million people have been diagnosed with diabetes; another 8.1 million—or 27.8%--are undiagnosed

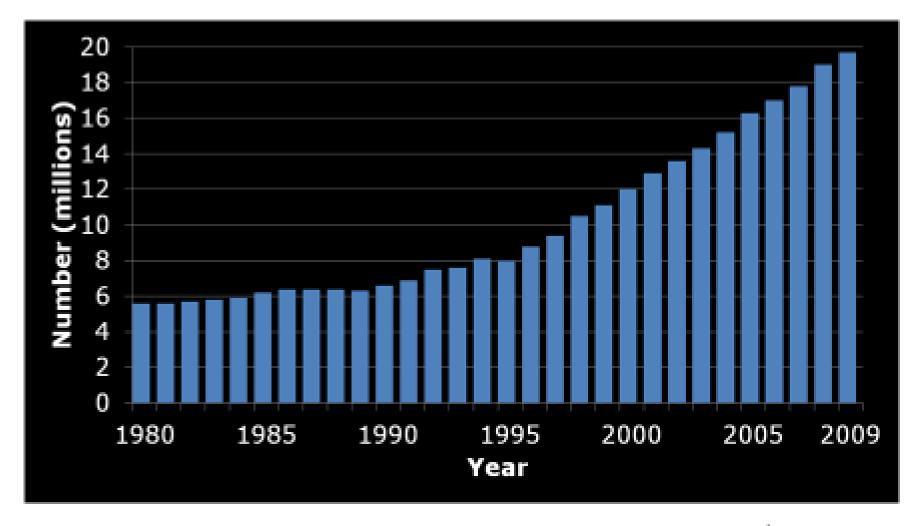
The Need for Innovation

Diabetes

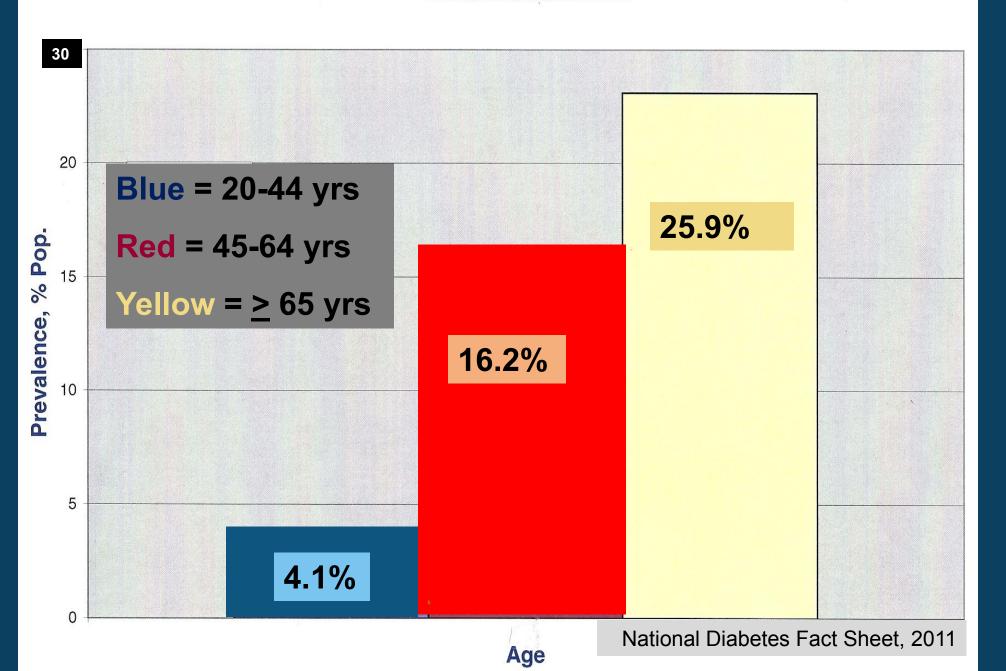
- > 79 million people 20+ years old have pre-diabetes
- Diabetes is the 7th leading cause of death in the U.S.
- Overall, the risk for death among people with diabetes is ~2 times that of people without diabetes of similar age



Number of Americans with Diagnosed Diabetes, 1980-2009



Age and Diabetes



The Need for Innovation

Four MODIFIABLE health risk behaviors are responsible for much of the illness, suffering, and early death related to chronic diseases:

- ✓ Lack of physical activity
- ✓ Poor nutrition
- ✓ Tobacco use
- Excessive alcohol consumption



The Need for Innovation

"The current care systems cannot do the job.

Trying harder will not work.

Changing systems of care will."





Institute of Medicine, Committee on Quality Health Care in America (2001). Crossing the quality chasm: A new health system for the 21st century. Washington, D.C.: National Academy Press.

The Need for Innovation

Better yet ---







Or even -

Another reality not yet imagined

The Need for Innovation

"If I had asked people what they wanted, they would have said faster horses."



--Henry Ford

Key Question:

How will our society meet the current and future health needs of our population?

INNOVATION

The TEAMS Formula for Health Innovation

EDUCATION + COLLABORATION

TRANSFORMATION

Nursing Education



- > There is a serious and growing shortage of nursing faculty and clinical sites
- Qualified nursing program applicants are turned away
- Non-competitive faculty pay and high faculty workloads are impacting retention and recruitment
- Current and future nursing workforce shortages are a real
- Competencies to meet population health needs are evolving
- The WCN recommends <u>coupling the redesign of nursing education</u> with clinical site needs to build competencies for the 21st century

⁻⁻https://iom.nationalacademies.org/~/media/Files/Report%20Files/2010/The-Future-of-Nursing/Future%20of%20Nursing%202010%20Report%20Brief.pdf

⁻⁻Master Plan for Nursing Education Five-Year Progress Report 2008-2013, April 2014, Washington Center for Nursing

⁻⁻http://www.aacn.nche.edu/aacn-publications/issue-bulletin/using-strategic-partnerships

⁻⁻March, 31, 2008, Washington Center for Nursing, Master Plan Executive Summary

Nursing Education – IOM Recommendations

- > Nurses should practice to the **full extent** of their education
- > Act as <u>full partners</u> with physicians and all health professionals in <u>redesigning health care</u> in the United States
- Participate in the needed development and evaluation <u>community-based residency</u> <u>programs</u>



--https://iom.nationalacademies.org/~/media/Files/Report%20Files/2010/The-Future-of-Nursing/Future%20of%20Nursing%202010%20Report%20Brief.pdf

--http://www.aacn.nche.edu/aacn-publications/issue-bulletin/using-strategic-partnerships

--Master Plan for Nursing Education Five-Year Progress Report 2008-2013, April 2014, Washington Center for Nursing

--March, 31, 2008, Washington Center for Nursing, Master Plan Executive Summary

WCN Master Plan

For Nursing Education in Washington State

"Sponsor <u>academic-practice work</u> to advance preparation of nurses for a <u>redefined healthcare system</u> where the focus is <u>evolving away from acute care</u> to community health, ambulatory care, public health, care coordination, and healthcare leadership"

The WCN, AACN, and IOM all agree: <u>creativity, innovation, and</u> <u>coordination</u> are the order of the day

On Creativity and Innovation . . .

Sir Ken Robinson

https://www.youtube.com/watch?v=63NTB7oObtw (view at least 2:36-5:32)

The Role of Collaboration

In the TEAMS Transformation Formula

- MacColl Institute for Healthcare Innovation's publication--<u>It Takes a Region</u>: Creating a Framework to Improve Chronic Disease Care (2006)
- Evidence from the Robert Wood Johnson Foundation's <u>"Partners in Nursing"</u> grant (2008-2011)



- > Learning from the Pierce County "Together We Care" collaborative
- Learning and evidence from CMS' "Community Care Transitions Program" award to the Pierce County Responsive Care Coordination Program (2012-2014)
- > Stanford University's evidence-based Collective Impact Model

A Vision for Nursing Education



- ▶ <u>Self-establish a leadership role</u> in preventing and managing chronic illness and building a culture of health in the community
- Develop an innovative program to operationalize the role while transforming education curriculum
- Cultivate partnerships that support implementation of the program and create a win-win-win outcome
- Work on systematic program evaluation and CQI within deepening partnerships to achieve of an interdependent, iterative relationship between education and health care practice, policy, and funding
- Achieve long-term Collective Impact and widespread "Centers for Healthier Living"

But as Sir Ken Robinson said . . .

to go from imagining to creating, we actually had to DO something . . .

and it had to have **VALUE**

Pierce County



Together

- Individuals
- Family Caregivers
- Health Professionals

Eating better

- More fresh fruits and vegetables
- Less fat, sugar, and salt
- Fewer prepared and fast foods

Actively living

- More walking and/or moving
- Less television, computer, and game time
- More time outdoors, hobbying, and socializing

Monitoring health

- Regular visits to your care practitioner
- Know your blood pressure, blood sugar, cholesterol, and triglyceride levels
- Act on changes in your weight

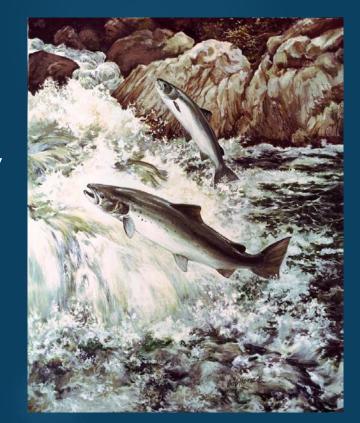
Self-managing risk

- Learn about your risks/conditions
- Take active steps to minimize impact
- Follow medication, treatment, and immunization recommendations

for Healthier Living

TEAMS for Healthier Living

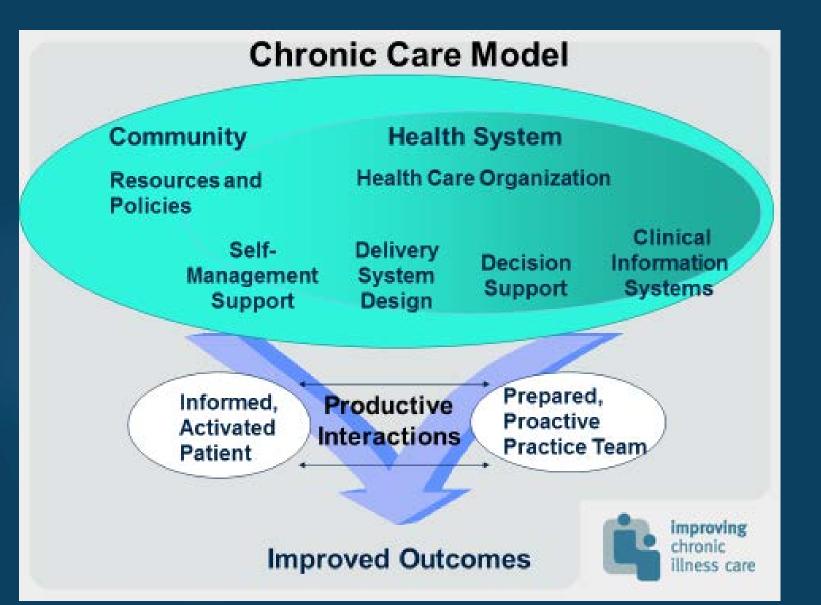
- An engaging, motivating way for all members of a community to make small, manageable steps toward healthier living
- The TEAMS framework integrates evidencebased biopsychosocial approaches in a unique, holistic manner to elicit and positively reinforce lifestyle behaviors that mitigate the impact of chronic illness in at-risk individuals across the lifespan



TEAMS for Healthier Living

- ▶ Applies Swanson's **Theory of Informed Caring** (1993) to a Community
- ▶ **Goal**: Assist a community and its members to attain, maintain or regain the optimal level of living or well-being
- Provides an intentional <u>process</u> for caring (with impact on communities):
- Maintaining Belief (that the community can attain a higher level of well-being)
- Knowing (the community's risks, needs, interests, people, responses)
- Being With (being present with/as part of the community for a shared journey)
- Doing For (actions to support optimal well-being until the community is able)
- Enabling (Facilitating the journey toward optimal well-being)

Overarching Program Framework



Ed Wagner, MD, MPH

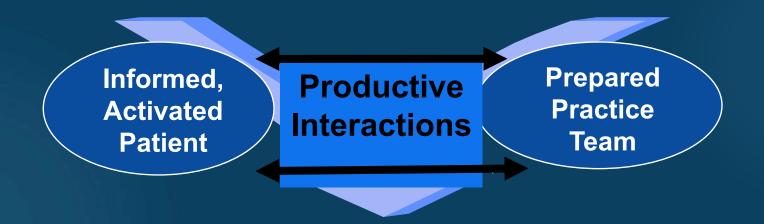
Improving Chronic Illness
Care

A national program of the Robert Wood Johnson Foundation

(http://www.improvingchroniccare.org/)

The Chronic Care Model's Premise

"...Good outcomes...result from productive interactions."



Productive Interactions: "... the work of evidence-based chronic disease care gets done in a systematic way, and patient needs are met."

Informed, Activated Patients

Informed, Activated Patient

Productive Interactions

Prepared Practice Team

Informed: ". . . The patient has sufficient information to become a wise decision-maker related to their illness."

Activated: "They have goals and a plan to improve their health, and the motivation, information, skills, and confidence necessary to manage their illness well."



A Prepared, Proactive Practice Team

Informed, Activated Interactions

Prepared Practice Team

"A practice team that is organized, trained, and equipped to conduct productive interactions."



"Practice team and interactions with patients are organized to help patients reach clinical targets and self-management goals."



Diabetes Prevention Program (2002):

- "... Millions of high-risk <u>people can delay or avoid developing</u> type 2 diabetes by losing weight through regular physical activity and a diet low in fat and calories."
- "Participants in the lifestyle intervention group-those receiving intensive individual counseling and motivational support on effective diet, exercise, and behavior modification--reduced their risk of developing diabetes by 58 percent."



Diabetes Prevention Program:

- "Lifestyle changes worked particularly well for participants aged 60 and older, reducing their risk by 71 percent."
- Weight loss was the main predictor of reduced risk for developing diabetes in the lifestyle intervention group. Conclusion was that diabetes risk reduction efforts should focus on weight loss facilitated by increased exercise.

<u>Information-Motivation-Behavioral Skills Model</u>

> Validated in chronic illness interventions



- Partnering with communities in an "elicitation" process to identify and address priorities organically
- Going beyond standard teaching and cognitive informationgiving to engage participants' affective and psychomotor learning domains to achieve lifestyle behavior change.

- ► The Chronic Disease Self-Management Program (CDSMP) (http://patienteducation.stanford.edu/programs/cdsmp.html)
- Stay Active and Independent for Life (SAIL) Program (http://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/OlderAdultFalls/StayActiveandIndependent forLifeSAIL)
- ► The Care Transitions Intervention® (CTI) (http://www.caretransitions.org/)
- Motivational Interviewing (MI) (http://www.motivationalinterviewing.org/)



Based Model	Principles Integrated	
CDSMP	Weekly 1:1 Action Planning; Time for Healing progressive relaxation; Livin Chronic Conditions concepts (strategies to address common problems such fatigues and include a progressive and include a prog	

Evidona

ing Well With ch as pain, tatigue, and isolation; appropriate use of medications; communicating effectively with health professionals; and **nutrition**). SAIL The **Entire Program** for Seniors—which includes **physical activity** to improve strength,

balance, and endurance and to prevent/reduce falls; education; participant self-assessment; participant baseline and progress fitness assessments; and program evaluation. **CTI**®

Implementation of the Four Pillars concepts as needed: Medication self-management,

referral/follow-up with health provider(s); establishment and use of a personal health record; and understanding of green, yellow, and red colored flags in self-management. MI In coaching and Action Planning, expressing empathy through reflective listening; developing discrepancy between clients' goals or values and their current behavior; avoiding argument and direct confrontation; adjusting to client resistance rather than opposing it directly; supporting self-efficacy and optimism.

Mt. View Community Center



- **Location:** Edgewood, WA in East Pierce County
- Serves: Families and people of all ages, including specialized programs for kids, seniors, and adults needing employment
- Operates: In conjunction with an attached FISH food bank operation and MVCC's free community meal program
- Population: 125-130 individuals of all ages for the food bank and community meal on Thursday afternoon/evenings; 30 seniors on Tuesday and Thursdays for the Senior Cafe

TEAMS for Healthier Living

<u>T</u> is for "<u>Together</u>"



- "Together" addresses all of us—working as individuals, families, and an entire community—toward healthier living
- Program activities provide individual and group intervention modalities and incorporate positive peer support
- ► A culture of respect for each person's unique starting point, needs, and goals underlines the program
- Implementing <u>health professionals become part of the community</u> as active and visible program participants

TEAMS for healthier living



In a 14 week semester, the first 3 weeks include:

- Orientation to the site and the program
- Talking with participants of the community center about their needs and interests
- Planning a 10-week program based on participant input
- Conducting sign up of interested participants, which includes obtaining baseline information regarding their status and goals

TEAMS for Healthier Living

To Join or Not to Join



Participants can "join" the program for <u>a structured 10-week</u> <u>program cycle</u>

► All are welcome and encouraged to participate freely with various aspects of the program even if they opt not to "join" the program for structured support

Together

Participants are greeted, hear about the day's opportunities, and check in about Action Plan progress over previous week; each participant's name goes in raffle box for checking in each week



<u>T</u> ogether	Participants are greeted, hear about the day's opportunities, and check in about Action Plan progress over previous week; each participant's name goes in raffle box for checking in each week
	Participants are offered healthy eating samples, recipes, and nutritional education—with a focus on low cost items and those available in the food bank; activities are interactive when possible (fix your own, choose your smoothie ingredients, etc.)



	progress over previous week; each participant's name goes in raffle box for checking in each week
	progress over previous week; each participant's name goes in raffle box for checking in each
T ogether	Participants are greeted, hear about the day's opportunities, and check in about Action Plan

Eating
Better
Participants are offered healthy eating samples, recipes, and nutritional education—with a focus on low cost items and those available in the food bank; activities are interactive when possible (fix your own, choose your smoothie ingredients, etc.).

Physically, mentally, and/or socially engaging activities are offered each week (exercise [SAIL program weekly for seniors] and other activities such as art, table gardening, progressive relaxation, table games, line dancing, group Jeopardy, stretching/balance exercises, etc.).



Actively

Living

T ogether	Participants are greeted, hear about the day's opportunities, and check in about Action Plan
	progress over previous week; each participant's name goes in raffle box for checking in each
	week

Participants are offered healthy eating samples, recipes, and nutritional education—with a **E**ating focus on low cost items and those available in the food bank; activities are interactive when Better possible (fix your own, choose your smoothie ingredients, etc.).

Actively Physically, mentally, and/or socially engaging activities are offered each week (exercise [SAIL] program weekly for seniors] and other activities such as art, table gardening, progressive Living relaxation, table games, line dancing, group Jeopardy, stretching/balance exercises, etc.).

Monitoring Blood pressure and weight monitoring are available weekly along with support in monitoring other factors (blood sugars, nutritional intake, exercise patterns, etc.). Health education and resource referral are provided as needed (to free clinics or free/reduced cost prescription sources).



Health

	Lacii Week Boiling inte 110giaini.
T ogether	Participants are greeted, hear about the day's opportunities,

week

Eating

Better

Actively

Monitoring

Living

Health

Self-

Risk

managing

and check in about Action Plan

progress over previous week; each participant's name goes in raffle box for checking in each

prescription sources).

program's end to see their progress.

possible (fix your own, choose your smoothie ingredients, etc.).

Participants are offered healthy eating samples, recipes, and nutritional education—with a

focus on low cost items and those available in the food bank; activities are interactive when

Physically, mentally, and/or socially engaging activities are offered each week (exercise [SAIL]

program weekly for seniors] and other activities such as art, table gardening, progressive

relaxation, table games, line dancing, group Jeopardy, stretching/balance exercises, etc.).

monitoring other factors (blood sugars, nutritional intake, exercise patterns, etc.). Health

Participants use the American Heart Association "Life Check" risk assessment to identify

specific goals for healthier living and weekly Action Planning. Health education and

resource referrals are targeted in accordance. Participants re-take Life Check at the

education and resource referral are provided as needed (to free clinics or free/reduced cost

Blood pressure and weight monitoring are available weekly along with support in

TEAMS for Healthier Living

The Program Structure Includes:

Pre- and post-progress evaluation



- > Intermittent raffle drawings for small, encouraging prizes
- > A **certificate** of completion
- > A carnival-like "TEAMS Finale Celebration" at the end

TEAMS for Healthier Living



Funding To-Date:

- The food and supplies for activities are funded through private donations and grants to MVCC for the program
 - ✓ Cost of 10-week program (including small raffles): ~\$700
 - Cost of 14-week program (including value of donations and donated prizes for sign-up/final raffles): ~\$1,000
 - ✓ <u>Does not include</u> cost of some basic start-up equipment that I provided (laptop computer, BP monitoring equipment, etc.)



Participation:

- √ 32 active participants
- √ 8 or 25% participated all 10 weeks or 100% of the time
- √ 13 or 41% participated 8 weeks or 80% of the time

Biggest Winner Weight Loss Effort:

- √ 18 participants lost an average of 6.23 lbs. in 10 weeks
- ✓ The "Biggest Winner" lost 20.6 lbs.
- ✓ 9 or 50% lost \geq 5 lbs. or \geq ½ lb. per week
- \checkmark 6 or 33.3% lost ≥ 10 lbs. or ≥1 lb. per week



> American Heart Association "Life Check" Scores:

- ✓ 20 participants completed the "Life Check" at the beginning and end of TEAMS
- ✓ On a 10-point scale evaluating overall health, participant scores increased and average of 0.96 points per person



- ✓ 22 participants self-rated their TEAMS progress on a 5-point scale (1 = Poor and 5 = Excellent)
- √ 18 or 81.8% rated their progress as Good or Excellent



<u>T</u> EAMS Area	Description of Effort/Progress	Result (N=22)
<u>E</u> ating Better	I am eating foods that are better for me	17 (77.3%)
<u>A</u> ctively Living	I am a more active person	17 (77.3%)
<u>M</u> onitoring Health	I have been checking my blood pressure, weight or other health factors (blood sugar, cholesterol, etc.)	17 (77.3%)
S elf-Managing Risk	I got connected with a doctor, nurse practitioner, or clinic	8 (36.4%)
	I went to see my doctor or nurse practitioner and plan to see him/her regularly	11 (50%)
	I am working to decrease or manage my stress	17 (77.3%)
	I have cut down on my smoking and/or drinking	7 (31.8%)





- "Simply the best"
- "Thanks so much. We love TEAMS."
- "It has made me more self-aware!"
- "I've enjoyed being involved <u>again</u> this past year!"

TEAMS Possibilities & Ultimate Vision

- ▶ A **seedling start** to a much wider innovation potential
- An effective <u>launching pad</u> for many more cross-organizational <u>collaborations</u> and <u>synergies</u>
- Sustained success in developing a culture of health and "Centers for Healthier Communities" across Washington
- ► Collective Impact Achieved



"Regional coalitions of multiple stakeholder groups are at the leading edge of health care quality improvement (QI) efforts around the United States. In the absence of a national strategy to organize care and promote innovation, these activities offer the best hope for change."

Thank You