
Business Session Draft Agenda
Wednesday, August 16, 2017

<u>Call to Order:</u>	3:30
<u>Approve Agenda:</u>	3:31
<u>Employee and Team of the Quarter</u>	3:32
<u>Patient Story:</u> Brandie Manuel, Chief Patient Care Officer	3:42
<u>Minutes:</u> Action Requested	3:50
• August 2 Regular Session Minutes (pg. 2-8)	
<u>Required Approvals:</u> Action Requested	3:52
• July Warrants and Adjustments (pg. 9-13)	
• Resolution 2017-35 Cancel Warrants (pg. 14)	
<u>Public Comment:</u>	3:55
<i>(Alternative methods of providing public comment on any item on the agenda or any other hospital issue is through a letter addressed to Commissioners at 834 Sheridan Street, Port Townsend, WA 98368 or email to Commissioners at commissioners@jgh.org)</i>	
<u>JeffCo Aquatic Coalition:</u>	4:05
• Jean Baldwin and Janis Fisler, JeffCo Aquatic Coalition Board Members	
<u>Get with the Guidelines, Stroke Gold Plus Quality Achievement Award:</u>	4:20
• Elizabeth Peterson, American Heart Association, Regional Director, Quality & Systems Improvement	
<u>Jefferson County Proposition 1: Creating the Home Opportunity Fund Presentation to the Jefferson County Public Hospital District No. 2 Board of Commissioners:</u> No Action Requested (pg. 15-16)	4:40
• Bruce Cowan	
• Public Comment	
<u>Financial Report:</u> Hilary Whittington, Chief Administrative Officer/CFO	5:00
• July	
• Charge Comparison Review	
<u>Administrator's Report:</u> Mike Glenn, CEO	5:20
• Behavioral Health Update	
• ACS Update	
<u>Chief Medical Officer Report:</u> Joe Mattern, MD, CMO	5:45
<u>Board Report:</u>	6:05
<u>Conclude:</u>	6:15
This Regular Session will be officially audio recorded. Times shown in agenda are estimates only.	

Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, August 2, 2017
Victor J. Dirksen Conference Room

Call to Order:

The meeting was called to order at 3:30 by Commissioner Buhler. Present were Commissioners Buhler, Dressler, De Leo, and Ready. Also present were Mike Glenn, Chief Executive Officer, Hilary Whittington, Chief Administrative Officer/Chief Financial Officer, Lisa Holt, Chief Ancillary and Specialty Services Officer, Caitlin Harrison, Chief Human Resources Officer, and Alyssa Rodrigues, Administrative Assistant. Commissioner Kolff was excused. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:

Commissioner DeLeo made a motion to approve the agenda. Commissioner Dressler seconded.

Commissioner Buhler requested an addition be made to add Administrative Report after OCH update and before Board Reports. Commissioner Buhler requested patient story be removed due to Brandie Manuel, Chief Patient Care Officer being excused.

Commissioner De Leo made a motion to add Administrative Report after OCH update and before Board Reports and removing Patient Story from the agenda due to Brandie Manuel, Chief Patient Care Officer, being excused. Commissioner Ready seconded.

Action: Motion passed unanimously.

Patient Story:

Brandie Manuel, Chief Patient Care Officer, was excused. No patient story.

Minutes:

- July 19 Regular Session minutes

Commissioner Ready made a motion to approve the July 19 Regular Session minutes. Commissioner De Leo seconded.

Action: Motion passed unanimously.

Required Approvals:

- Medical Staff Credentials/Appointments/Reappointments
- Medical Staff Policy

Discussion ensued.

Commissioner Dressler made a motion to approve Medical Staff Credentials/Appointments/Reappointments as presented. Commissioner Ready seconded.

Action: Motion passed unanimously

Commissioner De Leo requested to table the Medical Staff Autopsy Policy until reviewed by risk management. Commissioner Dressler seconded.

Action: Motion passed unanimously.

Discussion ensued.

Olympic Community of Health Update:

Elya Moore, PhD, Executive Director, Olympic Community of Health gave an update.

Discussion ensued.

Administrative Report:

Mike Glenn, CEO gave an Administrative Report.

Discussion ensued.

Board Reports:

Commissioner De Leo expressed his concern about an email correspondence between Commissioners that resulted in a serial meeting. He read the email aloud publicly to stay compliant with the Open Public Meetings Act.

Commissioner Buhler explained she asked MRSC about the email correspondence serial meeting and explained the response she received.

Commissioner Buhler read her reply aloud in regards to the email correspondence since she was unable to do so over email due to the serial meeting.

Commissioner De Leo requested to have the email correspondence attached to minutes.

Discussion ensued.

Conclude:

Commissioner Dressler made a motion to conclude the meeting. Commissioner De Leo seconded the motion.

Action: Motion passed unanimously.

Meeting concluded at 4:54pm.

Approved by the Commission:

President of Commission: Jill Buhler _____

Secretary of Commission: Marie Dressler _____

From: Ready, Matthew
Sent: Saturday, July 22, 2017 6:53 PM
To: Deleo, Anthony
Cc: Kolff, Kees; COMMISSIONERS; Glenn, Mike; Whittington, Hilary
Subject: Re: Consultation with Karma and meeting evaluation

This is now a serial meeting. Stop.

Sent from my iPhone

> On Jul 22, 2017, at 6:48 PM, Deleo, Anthony <ADELEO@jeffersonhealthcare.org> wrote:

>

> Commissioner Kolff,

>

> We are bringing in a recognized expert in board relations and I feel strongly that we should not try to meddle in the way she does her work or manipulate the end product. Your attempts to pre-load the process, to set specific targets, in effect, give her marching orders, I feel, will reduce her effectiveness and result in a less than optimal end product. Should you have concerns, you need to bring them up during a meeting to allow all of us a chance to give our input on your concerns and work to resolve them rather than you working behind the scenes trying to make this process fit your parameters and meet your personal expectations.

>

> In the past 4 years, the District has spent more on consultants to help the board work more effectively and cohesively than we have done in the previous 40 years that I have served on the board. I have frequently heard you say that if you do not agree with the process, or the recommendations, even though they were approved by the board, that you would not abide by them.

>

> As for the timing of the consultation, you, yourself, have frequently referred to the steep learning curve that a new Commissioner faces after being elected so how can the new recruit be expected to have a firm grasp on the issues facing how the Board functions in the first month of their term.

>

> I strongly agree with Mike and Jill's assessment of the urgency in resolving the issues that hinder our efficiency and effectiveness as a Board. These problems not only affects the Board but, I feel, it also adversely impacts the District's administration, staff and operations. We need to get this fixed before the newly elected Commissioner joins the dysfunctional family that is our Board.

>

> Now, as to your continuing requests for more discussion on issues. I have not heard this expressed by other Commissioners. You say we need to reduce the amount of meeting time devoted to staff presentations. I strongly disagree with this position. This is the opportunity for the Board and staff to interact while still abiding by the P & P set out in the Board Book. The only other way we, as Commissioners, can keep up with what is going on here at JH is through individual contact with staff which violates the spirit, if not the letter, of our Board Book. If we do not continue to receive the in-depth briefings as we do now, than what do you propose that we discuss. We need to keep focused on what directly relates to the governance of our District, not what we, PERSONALLY, might want to change in Olympia or Washington DC.

>

> With regard to your devotion to quality and patient safety here at JH, I share your commitment, maybe even exceed it, but I am also aware that there need to maintain a balance between quality /

safety and our fiduciary responsibility with attention to the financial health of our District. If we do not, we may be the highest quality medical system to go broke or be assimilated by a larger system just to keep the doors open.

>

> In closing, Commissioner Kolff, I would strongly urge you to honor and abide by the recommendations, after being adopted by the Board, that will result from this consultation, and those previously adopted. I will be asking my fellow Commissioners to join me in assuring that ALL Commissioner work within the policies, procedures and guidelines officially adopted by the Board.

>

> Respectfully

> Anthony F. De Leo

> Commissioner

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> _____
> From: Kolff, Kees

> Sent: Friday, July 21, 2017 4:51 PM

> To: COMMISSIONERS; Glenn, Mike

> Subject: Consultation with Karma and meeting evaluation

>

> Dear fellow commissioners and Mike,

> I was truly impressed last Wednesday with what the staff is accomplishing. We clearly are offering excellent care and have systems in place to continue to improve. I also personally confirmed some of that quality and superbly personable service with my own recent laparoscopic surgery 3 weeks ago, from which I am recovering smoothly. All stages of my experience were positive, and since some of the employees had no idea that I was a commissioner, I suspect that other patients are getting the same TLC.

>

> Unfortunately however, this last meeting definitely did not meet my hopes for board effectiveness. The meeting was packed with presentations to which we had no prior access and without any specifically structured time for discussion. Being able to ask questions during a presentation is not a substitute for meaningful discussion. I would love to get Karma's take on how that meeting was scheduled and run. I think we all heard her talk about lead time for studying information, length of powerpoint presentations, and time specifically set aside for discussion that focused on how the info was relevant for board governance. That doesn't mean I don't appreciate the information or that it is not important for the board to get information, but we didn't have a chance to take the information to the next step of importance for us as a board.

>

> A week earlier I had requested of Jill and Mike that we place on the agenda additional discussion time to further consider the cost, scope and timing of Karma's consultation. Instead, it was part of Mike's administrative report near the end of a 3-hour meeting, and we had no opportunity to have a full discussion with all of the members of the questions I raised. I do know that Mike was busy with last minute negotiations with Karma and he did take the time to talk with me in the hall before the meeting.

>

> I had told Jill and Mike that I had some concerns about my earlier decision to support the contract with Karma. It had been presented at the very end of the previous meeting and in retrospect I thought a consultation in January, with the newly seated commissioner actively participating, would be more

effective in building our board team into the future. Last Wednesday I chose not to make a motion to rescind our previous decision for consultation since I ultimately felt that it would be better if I “went along to get along”, and that Karma had also been convinced by Mike and Jill that the consultation was urgent. That said, I still personally believe that Karma’s time would be much more effective if it were after the election in November. Having prospective board members observe our process can’t possibly hold a candle to having one of them participate in it, and the board dynamics in January will invariably change regardless of who wins the election. I am only partially reassured with the offer to have Karma available for f/u consultation.

>

> I have now had a chance to review carefully the presentation by Mike. I think we can gain much from the plan and I will cooperate fully. I would like to propose a few things:

> 1. That we specifically ask her to include a personal interview with the newly-elected commissioner after the election.

> 2. That in addition to “fiduciary responsibility” we specifically add “quality care responsibility”, which after all is our #1 job.

> 3. That we include a specific mention of “Vision and Focus” in the work plan, which is actually above and/or before the “strategic plan” that is mentioned. This in part stems from my conversation with Mike in which he thought there were two different visions held by different folks on the board, and that hampered the staff in focusing it’s efforts. I will not try to explain it further for fear of misrepresenting Mike’s concern. I see it a bit differently from my perspective, and look forward to our discussions.

>

> Once again, I fully support having Karma work with us, though I would time the consultation differently.

> Respectfully,

> Kees

>

> Kees Kolff, MD, MPH

> Hospital District Commissioner

> Jefferson County PHD #2

> kkolff@jgh.org

> 206-295-2275

>

> NOTE: All correspondence is subject to provisions of the Open Public Records Act

Commissioner Kolff:

SURPRISING

I find your email (attached) to be misleading, hypocritical and offensive for the following reasons:

1. You made the motion to go forward with the proposal I presented during the commission meeting on July 5: to cancel the scheduled July 17 Board self-evaluation meeting and instead enlist Karma Bass, of Via Healthcare Consulting to facilitate and plan for a retreat in August or September. Your motion was followed by in-depth discussion among the board and resulted in a unanimous positive decision.
2. On July 10th, you sent to Mr. Glenn, commissioner Ready and me an email asking to reconsider the vote. According to *Robert's Rules of Order Newly Revised*, which is the board's agreed-upon method of conducting meetings, once a vote has been taken, there are two methods that allow the board to reconsider:
 - a. A motion to reconsider, which can only be made during a limited time, usually on the same day the motion was taken.
 - i. This option was no longer available at the time you requested reconsideration of the vote.
 - b. A motion to rescind or amend something previously adopted, which has no time limit.
 - i. I described this option to you prior to the meeting on July 19.
3. On July 18th, you sent an email to Mr. Glenn and me stating that you would raise your questions about Ms. Karma's contract during the Board Reports segment of the meeting the next afternoon, and that you were "giving Jill and heads up" regarding your intention.
4. Mr. Glenn responded to your email, stating that to address your concerns, he planned to review the contract with Ms. Bass during his administrative report.
5. At the commission meeting on July 19, in preparation for your intention to have the board reconsider the motion, I presented to you prior to the meeting, the vehicle by which you could do so: namely the "motion to rescind or amend something previously adopted." We discussed whether it would be more appropriate for you to make that motion just following Mr. Glenn's Administrative report, or to wait until the Board Reports section. You chose to wait until the presentation had been made to decide on the timing.
6. Following the Administrative Report, there was robust discussion among board members regarding the contract with Ms. Bass. You contributed to those questions. At its conclusion, I intentionally hesitated long enough for you to pose the motion. You did not.
7. During the Board Reports segment, I again hesitated and made eye contact with you in anticipation of your motion to rescind or amend. None was forthcoming.
8. The meeting concluded at 6:18 p.m., 12 minutes earlier than scheduled, so we had plenty of time to discuss your concerns had you chosen to address them.

9. Yet, on July 21, you sent an email to the commissioners and Mr. Glenn criticizing the meeting and, in particular, the contract with Ms. Bass. I find this extremely hypocritical and manipulative, as you made the original motion to approve the contract; you had ample opportunity to fully exhaust every question you posed; you chose not to make the motion to rescind, as in your email of the 18th you stated "I went along to get along," yet you sent a vitriolic email to the board that was obviously designed to do the opposite; you accused Mr. Glenn and I of convincing Karma that the consultation was urgent when, actually, it is urgent, replacing the board evaluation meeting originally scheduled for July 17, which you motioned to cancel; and you attempted to dictate how the workshop should be designed. Further, you did this through an email that precluded commissioner response to your caustic comments, lest more than one commissioner reply, which would constitute an illegal serial meeting.

Commissioner Kolff, the board has spoken with one voice and unless the board chooses to reconsider its vote by the means described earlier in this email, this matter is closed and Mr. Glenn and I will proceed as the board directed.

Any further discussion of this issue on my part will take place in an open public meeting.

Jill Buhler, Chairperson

Jefferson Healthcare Board of Commissioners

**JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368**

**TO: BOARD OF COMMISSIONERS
FROM: HILARY WHITTINGTON, CFO
RE: JULY 2017 WARRANT SUMMARY**

The following items need to be approved at the next commission meeting:

General Fund Warrants & ACH Transfers	\$7,597,442.34	(Provided under separate cover)
Bad Debt / Charity	\$646,881.82	(Attached)
Canceled Warrants	\$130.38	(Attached)

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: HILARY WHITTINGTON, CFO
RE: JULY 2017 GENERAL FUND WARRANTS & ACH
FUND TRANSFERS

Submitted for your approval are the following warrants:

GENERAL FUND:

237741 - 238569	\$4,394,074.62
ACH TRANSFERS	<u>\$3,203,367.72</u>
	<u>\$7,597,442.34</u>
YEAR-TO-DATE:	<u><u>\$55,409,107.09</u></u>

Warrants are available for review if requested.

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: HILARY WHITTINGTON, CFO
RE: JUNE 2017 BAD DEBT, ADMINISTRATIVE, AND CHARITY CARE WRITE OFFS

Submitted for your approval are the following:

	JULY	JULY YTD	JULY YTD BUDGET
Bad Debts:	\$482,614.06	\$1,947,868.65	\$1,811,711.21
Charity Care:	\$119,319.63	\$603,626.38	\$763,907.99
Other Administrative Adjustments:	\$44,948.13	\$261,338.41	\$137,600.42
TOTAL FOR MONTH:	\$646,881.82	\$2,812,833.44	\$2,713,219.62

JEFFERSON HEALTHCARE
834 SHERIDAN AVENUE
PORT TOWNSEND, WA 98368

TO: BOARD OF COMMISSIONERS
FROM: HILARY WHITTINGTON, CFO
RE: JULY 2017 WARRANT CANCELLATIONS

State law requires you to pass a resolution canceling any warrants which are not presented to the Treasurer for payment within one year of issue.

DATE	WARRANT	AMOUNT
7/7/2016	228165	\$ 1.00
7/14/2016	228553	\$ 13.08
7/19/2016	228849	\$ 20.00
7/28/2016	229115	\$ 96.30

TOTAL:	<u>\$ 130.38</u>
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	July 2017 Actual	July 2017 Budget	Variance Favorable/ (Unfavorable)	%	July 2017 YTD	July 2017 Budget YTD	Variance Favorable/ (Unfavorable)	%	July 2016 YTD
Gross Revenue									
Inpatient Revenue	3,793,944	3,440,801	353,143	10%	27,240,752	23,530,633	3,710,119	16%	19,370,974
Outpatient Revenue	13,516,046	14,416,995	(900,949)	-6%	93,081,595	98,593,616	(5,512,021)	-6%	79,910,784
Total Gross Revenue	17,309,990	17,857,796	(547,806)	-3%	120,322,347	122,124,249	(1,801,902)	-1%	99,281,758
Revenue Adjustments									
Cost Adjustment Medicaid	1,614,182	2,191,686	577,504	26%	11,539,334	14,988,299	3,448,965	23%	11,684,521
Cost Adjustment Medicare	5,957,982	5,885,349	(72,633)	-1%	42,761,464	40,248,182	(2,513,282)	-6%	32,230,903
Charity Care	119,320	111,704	(7,616)	-7%	603,626	763,908	160,282	21%	589,548
Contractual Allowances Other	1,220,009	1,251,241	31,232	2%	8,958,924	8,556,871	(402,054)	-5%	6,838,297
Administrative Adjustments	44,948	20,121	(24,827)	-123%	261,338	137,600	(123,738)	-90%	116,393
Adjust Bad Debt	482,614	264,920	(217,694)	-82%	1,947,869	1,811,711	(136,157)	-8%	1,616,424
Total Revenue Adjustments	9,439,055	9,725,020	285,966	3%	66,072,555	66,506,571	434,016	1%	53,076,087
Net Patient Service Revenue	7,870,935	8,132,776	(261,841)	-3%	54,249,792	55,617,678	(1,367,886)	-2%	46,205,672
Other Revenue									
340B Revenue	306,365	260,239	46,126	18%	1,960,870	1,779,696	181,175	10%	1,860,499
Meaningful Use Ehr Incentive	136,000	3,397	132,603	3903%	136,784	23,233	113,551	489%	21,250
Other Operating Revenue	243,245	112,961	130,284	115%	952,260	772,510	179,750	23%	585,560
Total Operating Revenues	8,556,546	8,509,373	47,172	1%	57,299,707	58,193,117	(893,410)	-2%	48,672,981
Operating Expenses									
Salaries And Wages	4,022,818	4,211,112	188,294	4%	27,973,242	28,798,564	825,322	3%	23,525,393
Employee Benefits	1,055,179	1,040,237	(14,942)	-1%	7,126,842	7,113,873	(12,968)	0%	5,715,103
Professional Fees	445,796	290,474	(155,322)	-53%	2,905,531	1,986,468	(919,063)	-46%	2,189,227
Purchased Services	523,723	539,994	16,271	3%	3,561,726	3,692,859	131,133	4%	3,296,334
Supplies	1,286,206	1,212,418	(73,788)	-6%	8,720,150	8,291,372	(428,778)	-5%	6,901,596
Insurance	46,290	57,753	11,463	20%	338,221	394,959	56,738	14%	384,974
Leases And Rentals	100,914	147,734	46,820	32%	789,860	1,010,310	220,451	22%	813,161
Depreciation And Amortization	355,115	312,906	(42,209)	-13%	2,462,636	2,139,872	(322,764)	-15%	2,287,359
Repairs And Maintenance	55,591	77,228	21,638	28%	327,244	528,141	200,897	38%	369,719
Utilities	68,770	78,128	9,358	12%	561,278	534,292	(26,986)	-5%	449,917
Licenses And Taxes	36,976	46,565	9,589	21%	360,924	318,444	(42,481)	-13%	365,764
Other	92,249	174,830	82,581	47%	895,301	1,195,612	300,312	25%	997,799
Total Operating Expenses	8,089,628	8,189,379	99,751	1%	56,022,956	56,004,767	(18,189)	0%	47,296,347
Operating Income (Loss)	466,918	319,995	146,924	46%	1,276,751	2,188,350	(911,599)	-42%	1,376,634
Non Operating Revenues (Expenses)									
Taxation For Maint Operations	15,333	17,156	(1,824)	-11%	115,660	117,326	(1,666)	-1%	101,149
Taxation For Debt Service	20,280	19,003	1,277	7%	128,758	129,959	(1,201)	-1%	148,003
Investment Income	(8,514)	6,582	(15,096)	-229%	96,422	45,014	51,408	114%	56,419
Interest Expense	(96,233)	(85,615)	(10,618)	-12%	(352,712)	(585,499)	232,787	40%	(317,317)
Bond Issuance Costs	-	(12,740)	12,740	100%	-	(87,123)	87,123	100%	-
Gain or (Loss) on Disposed Asset	(8,316)	-	(8,316)	0%	2,634	0	2,634	0%	46,749
Contributions	12,980	11,890	1,089	9%	328,252	81,315	246,937	304%	15,931
Total Non Operating Revenues (Expenses)	(64,472)	(43,723)	(20,749)	-47%	319,013	(299,009)	618,022	207%	50,935
Change in Net Position (Loss)	402,447	276,272	126,175	46%	1,595,764	1,889,341	(293,577)	-16%	1,427,569

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

RESOLUTION 2017-35

A RESOLUTION CANCELING SAID WARRANTS IN
THE AMOUNT OF \$130.38

WHEREAS warrants of any municipal corporation not presented within one year of their issue, or, that have been voided or replaced, shall be canceled by the passage of a resolution of the governing body.

NOW, THEREFORE BE IT RESOLVED THAT:

In order to comply with RCW 36.22.100, warrants indicated below in the total amount of \$130.38 be canceled.

Date of Issue	Warrant #	Amount
07/07/2016	228165	1.00
07/14/2016	228553	13.08
07/19/2016	228849	20.00
07/28/2016	229115	96.30
Total		130.38

APPROVED THIS 16th day of August, 2017.

JEFFERSON COUNTY PUBLIC HOSPITAL DISTRICT NO. 2

APPROVED BY THE COMMISSION:

Commission Chair – Jill Buhler: _____

Commission Secretary – Marie Dressler: _____

Attest:

Commissioner – Anthony De Leo: _____

Commissioner – Kees Kolff: _____

Commissioner – Matt Ready: _____

RESOLUTION 2017-36

Jefferson County Public Hospital District No. 2

A Resolution Regarding the Creation of the Jefferson County Home Opportunity Fund

WHEREAS, the people of east Jefferson County, a rural county, are served by Jefferson County Public Hospital District No. 2 (Jefferson Healthcare) a municipal corporation and taxing district governed by elected Hospital District Commissioners; and

WHEREAS, homelessness and housing insecurity are important factors in community health, due to the physical and emotional stresses they create for both children and adults; and

WHEREAS, stable, safe, and adequate housing is essential to the health of the citizens of Jefferson county; and

WHEREAS, cost-burdened, low-income families have severe challenges in eating healthy meals, participating in recreational activities, and paying for healthcare expenses; and

WHEREAS, over 100 school-age children in east Jefferson County are either completely unsheltered or are doubled-up, living in others' housing; and

WHEREAS, one in eight Jefferson County households have extremely low incomes (<30% of the Area Median Income) and more than three in five of those households are also extremely cost-burdened, paying more than 50% of their income on housing costs; and

WHEREAS, the for-rent vacancy rate is currently at or approaching 0%, meaning that low-income individuals have little choice and are often limited to substandard, unhealthy living spaces; and

WHEREAS, market forces inhibit for-profit developers from building modest, affordable housing; and

WHEREAS, the generous donations, volunteer hours, and available loans and grants used by our capable local organizations have been inadequate to fully address the county's affordable housing needs; and

WHEREAS, these local organizations and others could accomplish much more with additional revenue, and could secure more grant funding if they had more local grant and loan support; and

WHEREAS, the use of public revenue raised through an affordable housing levy have brought good results for the cities of Bellingham and Seattle, and will bring good results in Vancouver, where a similar measure passed; and

WHEREAS, a thoughtfully-developed affordable housing levy proposal has been developed with the participation of several housing and social service agencies, including Jefferson Healthcare; and

WHEREAS, the Jefferson County Board of County Commissioners have declared an emergency in the availability of affordable housing, and placed this measure known as *Jefferson County Proposition 1, creating the Home Opportunity Fund*, on the November 7, 2017 ballot, and

WHEREAS, this measure, if approved by the voters, would create a Jefferson County Housing Opportunity Fund to provide a variety of organizations with funding to develop and/or preserve affordable housing throughout Jefferson County and that housing will remain affordable to low- and very low-income households for forty years or more;

NOW, THEREFORE BE IT RESOLVED that the Board of Commissioners of Jefferson County Public Hospital District No. 2 does hereby express its support for passage of this measure.

Approved this __ day of _____, 2017

Jefferson County Public Hospital District No. 2

Approved by the Commission:

Commission Chair – Jill Buhler: _____

Commission Secretary – Marie Dressler _____

Attest:

Commissioner – Anthony De Leo _____

Commissioner – Kees Kolff _____

Commissioner – Matt Ready _____