CALENDAR FOR THE BOARD OF SUPERVISORS

# CONTRA COSTA COUNTY

AND FOR SPECIAL DISTRICTS, AGENCIES, AND AUTHORITIES GOVERNED BY THE BOARD

## BOARD CHAMBERS ROOM 107, ADMINISTRATION BUILDING, 651 PINE STREET MARTINEZ, CALIFORNIA 94553-1229

**KAREN MITCHOFF,** *CHAIR,* 4TH DISTRICT
**JOHN GIOIA,** *VICE CHAIR,* 1ST DISTRICT
**CANDACE ANDERSEN,** 2ND DISTRICT
**DIANE BURGIS,** 3RD DISTRICT
**FEDERAL D. GLOVER,** 5TH DISTRICT

**DAVID J. TWA,** CLERK OF THE BOARD AND COUNTY ADMINISTRATOR, (925) 335-1900

PERSONS WHO WISH TO ADDRESS THE BOARD DURING PUBLIC COMMENT OR WITH RESPECT TO AN ITEM THAT IS ON THE AGENDA, WILL BE LIMITED TO TWO (2) MINUTES.

The Board Chair may reduce the amount of time allotted per speaker at the beginning of each item or public comment period depending on the number of speakers and the business of the day. Your patience is appreciated.

A lunch break or closed session may be called at the discretion of the Board Chair.

Staff reports related to open session items on the agenda are also accessible on line at www.co.contra-costa.ca.us.

## AGENDA
## May 22, 2018

**9:00 A.M. Convene and announce adjournment to closed session in Room 101.**
**Closed Session**

A. CONFERENCE WITH LABOR NEGOTIATORS

1. Agency Negotiators: David Twa and Richard Bolanos.

Employee Organizations: Public Employees Union, Local 1; AFSCME Locals 512 and 2700; California Nurses Assn.; SEIU Locals 1021 and 2015; District Attorney Investigators' Assn.; Deputy Sheriffs Assn.; United Prof. Firefighters I.A.F.F., Local 1230; Physicians' & Dentists' Org. of Contra Costa; Western Council of Engineers; United Chief Officers Assn.; Contra Costa County Defenders Assn.; Contra Costa County Deputy District Attorneys' Assn.; Prof. & Tech. Engineers IFPTE, Local 21; and Teamsters Local 856.

2. Agency Negotiators: David Twa.

Unrepresented Employees: All unrepresented employees.

B. CONFERENCE WITH LEGAL COUNSEL--EXISTING LITIGATION (Gov. Code, § 54956.9(d)(1))

1. *In Re Appeal of California EMS Authority Decision to Rescind Approval of the Contra Costa EMSA's RFP-2015-CCC.*

**9:30 A.M. Call to order and opening ceremonies.**

Inspirational Thought- *"We are continually faced with a series of great opportunities brilliantly*

*disguised as insoluble problems."* ~ John Gardner

**CONSIDER CONSENT ITEMS** (Items listed as C.1 through C.137 on the following agenda) – Items are subject to removal from Consent Calendar by request of any Supervisor or on request for discussion by a member of the public. **Items removed from the Consent Calendar will be considered with the Discussion Items.**

**PRESENTATIONS (5 Minutes Each)**

**PR.1** PRESENTATION declaring May 15th to June 15th as Tourette Syndrome Awareness Month in Contra Costa County. (Supervisor Mitchoff)

**PR.2** PRESENTATION recognizing the week of May 20-26, 2018 as National Emergency Medical Services Week, with the theme of "EMS STRONG: Stronger Together" and May 23, 2018 as Emergency Medical Services for Children Day. (Pat Frost, Director of Emergency Medical Services)

**PR.3** PRESENTATION recognizing the relief efforts that supported the Concord community during the Galindo Fire in April of 2018. (Supervisor Mitchoff)

**PR.4** PRESENTATION recognizing May as CalFresh Awareness Month. (Wendy Therrian, Employment and Human Services Department)

**DISCUSSION ITEMS**

**D. 1** CONSIDER Consent Items previously removed.

**D. 2** PUBLIC COMMENT (2 Minutes/Speaker)

**D.3** CONSIDER accepting the 2017 Kindergarten Readiness Assessment and discuss First 5 activities to support young families in Contra Costa. (Sean Casey, First 5 Executive Director)

**D.4** HEARING to adopt Ordinance No. 2018-16 and Resolution No. 2018/182, to adjust transportation mitigation fees and update the project list for the Discovery Bay Area of Benefit, and to reestablish the boundaries of that area of benefit, and take related actions under the California Environmental Quality Act (CEQA), Discovery Bay area. (100% Discovery Bay Area of Benefits Funds) (Mary Halle, Public Works Department)

**D.5** HEARING to consider an appeal of a tree permit for the removal of eight code-protected trees on the property identified as 1593 Hillgrade Avenue in the Alamo area. County File #TP17-0033. (Gabriella Odell and Bruce Tarter, Sophia and Lomit Patel, Appellants) (Gil Gibson, Applicant and Owner) (Ruben Hernandez, Department of Conservation and Development).

**D.6** CONSIDER the report on soil conditions at the parking lot behind 651 Pine Street, Martinez. (Eric Angstadt, Chief Assistant County Administrator)

D. 7 CONSIDER reports of Board members.

**Closed Session**

**ADJOURN to the 2:00 p.m. Contra Costa County Administration Building Groundbreaking Ceremony Intersection of Pine Street and Escobar Street, Martinez**

## CONSENT ITEMS

### Road and Transportation

**C. 1** APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract amendment with Statewide Construction Sweeping, Inc., to change the contract completion time from one year to three years, for the period May 2, 2017 to May 2, 2020, with no change to the original payment limit of $200,000, for the 2017 On-Call Sweeping Services Contract for Various Road Maintenance Work, Countywide. (100% Local Road Funds)

**C. 2** APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract amendment with Pavement Coatings Co., to change the contract completion time from one year to three years for the period May 23, 2017 to May 23, 2020, with no change to the original payment limit of $200,000, for the 2017 On-Call Grinding Services Contract(s) for Various Road Maintenance Work, Countywide. (100% Local Road Funds)

**C. 3** APPROVE the Marsh Creek Road Traffic Safety Improvements Project and take related actions under the California Environmental Quality Act, and AUTHORIZE the Public Works Director, or designee, to advertise the Project, Clayton and Brentwood areas. (83% Highway Safety Improvement Program Funds and 17% East County Regional Area of Benefit Funds)

**C. 4** APPROVE the Contra Costa County Local Streets and Road Preservation Project and take related actions under the California Environmental Quality Act, and AUTHORIZE the Public Works Director, or designee, to advertise the Project, Byron and Richmond areas. (75% One Bay Area Grant – Local Streets and Roads Preservation and 25% Gas Tax Funds)

**C. 5** AWARD and AUTHORIZE the Public Works Director, or designee, to execute a construction contract in the amount of $515,910 with Hess Concrete Construction Co., Inc. for the Morgan Territory Road Bridges 4.30 and 4.40 Project, Clayton area. (100% Local Road Funds)

**C. 6** AWARD and AUTHORIZE the Public Works Director, or designee, to execute a construction contract in the amount of $292,883 with Sposeto Engineering, Inc. for the Phase II - Pomona Street Pedestrian Safety Improvement Project, Crockett area. (43% Transportation Development Act Grant Funds and 57% Local Road Funds)

**C. 7** APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract amendment with WSP USA, Inc., effective May 1, 2018, to increase the payment limit by $75,000 to a new payment limit of $375,000, for construction management services for the Byron Highway and Camino Diablo Intersection Improvements Project, Byron area. (23% Highway Safety Improvement Program Grant Funds, 17% Measure J Return to Source Funds, 12% East County Regional Area of Benefit Funds, and 48% Local Road Funds.)

**C. 8** APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract amendment with WSP USA, Inc., effective May 1, 2018, to extend the termination date from June 30, 2018 to December 30, 2018 and increase the payment limit by $230,000 to a new payment limit of $630,000, for construction management services for the Balfour Road Shoulder Widening Project, Brentwood area. (100% Discovery Bay Mitigation Funds)

**C. 9** AWARD and AUTHORIZE the Public Works Director, or designee, to execute a construction contract in the amount of $541,929 with Hess Concrete Construction Co., Inc. for the Rio Vista Elementary Pedestrian Connection Project, Bay Point area. (76% Active Transportation Program-Safe Routes to School Funds and 24% Local Road Funds)

**C. 10** APPROVE the Orwood Road Culvert Replacement Project and AUTHORIZE the Public Works Director, or designee, to advertise the project, Knightsen area. (100% Local Road Funds)

**Engineering Services**

**C. 11** ADOPT Resolution No. 2018/175 accepting completion of improvements for subdivision SD05-08971 for a project developed by Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, San Ramon (Dougherty Valley) area. (No fiscal impact)

**C. 12** ADOPT Resolution No. 2018/176 accepting completion of the warranty period for the Road Improvement Agreement, and release of cash deposit for faithful performance, for road acceptance RA06-01208 (cross reference subdivision SD04-08856), for a project developed by Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, San Ramon (Dougherty Valley) area. (No fiscal impact)

**C. 13** ADOPT Resolution No. 2018/180 approving the annual county miles in the Total Maintained Mileage for County Roads Report, as recommended by the Public Works Director, Countywide. (No fiscal impact)

**Special Districts & County Airports**

**C. 14** APPROVE and AUTHORIZE the Public Works Director, or designee, to allocate up to $55,400 from County Service Area R-7 funds for the "2018 Alamo Summer Concert Series" and "2018 Alamo Movie Under the Stars" events at Livorna Park, Alamo Area. (100% County Services Area R-7 Funds)

**C. 15** APPROVE and AUTHORIZE the Director of Airports, or designee, to execute a month-to-month hangar rental agreement with A & M Steel Construction Inc. for a T-hangar at Buchanan Field Airport effective May 5, 2018 in the monthly amount of $394.10 (100% Airport Enterprise Fund).

**Claims, Collections & Litigation**

**C. 16** DENY claims filed by CSAA, Lydia Cantu, Barbara Gardner, Erika Hunt, Jason Kung, Mercury Insurance for Brandon Wu, Yekaterina Ramirez, Safeco Insurance for Christie Pereira, Robert Taylor, Kam Vilaikham, and Atiba Willliams. DENY late claim filed by Yekaterina Ramirez. DENY Amended claim filed by CSAA for Kwok Wan Lau and Yekaterina Ramirez.

**Statutory Actions**

**C. 17** ACCEPT Board members meeting reports for April 2018.

**Honors & Proclamations**

**C. 18** ADOPT Resolution No. 2018/178 declaring May 15th to June 15th as Tourette Syndrome Awareness Month in Contra Costa County, as recommended by Supervisor Mitchoff.

**C. 19** ADOPT Resolution No. 2018/185 declaring June 2018, Lesbian, Gay, Bisexual, Transgender, Queer and Questioning (LGBTQ) Pride Month in Contra Costa County, as recommended by Supervisor Mitchoff.

**C. 20** ADOPT Resolution No. 2018/177 proclaiming May 20-26, 2018 as "National Public Works Week" in Contra Costa County, as recommended by the Public Works Director, Countywide. (No fiscal impact)

**C. 21** ADOPT Resolution No. 2018/186 recognizing the relief efforts that supported the Concord community during the Galindo Fire in April of 2018, as recommended by Supervisor Mitchoff.

**C. 22** ADOPT Resolution No. 2018/179 recognizing May 23, 2018 as Emergency Medical Services for Children Day, as recommended by the Health Services Director.

**C. 23** ADOPT Resolution No. 2018/181 recognizing May 20-26, 2018 as National Emergency Medical Services Week, with the theme of "EMS STRONG: Stronger Together", as recommended by the Health Services Director.

**C. 24** ADOPT Resolution No. 2018/187 recognizing the Honorable Barry P. Goode upon his retirement from the Contra Costa County Superior Court, as recommended by Supervisors Andersen and Gioia.

**C. 25** ADOPT Resolution No. 2018/196 honoring the life of Sgt. Herman Benjamin Rellar, as recommended by Supervisor Mitchoff.

**Appointments & Resignations**

**C. 26** APPOINT Joe Metro to the District V At Large seat on the Contra Costa County Mental Health Commission, as recommended by Supervisor Glover.

**C. 27** APPOINT Cynthia Chavez to the District 3-A seat on the Alcohol and Other Drugs Advisory Board, as recommended by Supervisor Burgis.

**C. 28** ACCEPT the resignation of Dr. Robert Leasure, DECLARE vacant the At Large #16 seat on the Advisory Council on Aging, and DIRECT the Clerk of the Board to post the vacancy, as recommended by the Employment and Human Services Director.

**C. 29** APPOINT Sienna Cowing to the District II-A seat on the Alcohol and Other Drugs Advisory Board of Contra Costa County, as recommended by Supervisor Andersen.

**C. 30** ACCEPT resignations of Derek Krause, Cynthia Belon, Ross Fay, and Jon Michaelson; DECLARE vacancies on the Emergency Medical Care Committee in Seat (B6) Contra Costa Fire Chiefs' Association Representative, Seat (B13) Contra Costa Health Services – Behavioral Health Representative, Seat (C2) Air Medical Transportation Provider, Seat (C5) Public Provider Field Paramedic; and DIRECT the Clerk of the Board to post these vacancies, as recommended by the Health Services Director.

**C. 31** ACCEPT the resignation of Anthony Rocca, DECLARE a vacancy in the Alternate 2 Seat on the Alamo Police Services Advisory Committee, and DIRECT the Clerk of the Board to post the vacancy, as recommended by Supervisor Andersen.

**C. 32** REAPPOINT Keegan Duncan to the Consumer Seat of Any Age - Seat 4 and Joe Juarez to the Consumer Under 60 - Seat 2 on the In-Home Supportive Services Public Authority Advisory Committee, as recommended by the Family and Human Services Committee.

**Intergovernmental Relations**

**C. 33** ADOPT a "Support" position on Assembly Bill 3138 (Muratsuchi), which would amend existing rules for imposing increased civil or administrative liability on a person or stationary source that violates the provisions of the California Accidental Release Prevention Program, as recommended by the Health Services Director.

**C. 34** ADOPT a position of "Support" on H.R. 5003 to amend the Internal Revenue Code of 1986 to reinstate advance refunding bonds, AUTHORIZE the Chair of the Board to send a letter to members of the House of Representatives representing Contra Costa County requesting co-sponsorship of the bill and AMEND the County's adopted federal legislative platform to make conforming changes, as recommended by the Legislation Committee.

**Personnel Actions**

**C. 35** ADOPT Position Adjustment Resolution No. 22256 to add one Clerk-Recorder Services Specialist (represented) position and cancel one Recordable Documents Technician (represented) position in the Clerk-Recorder Division of the Clerk-Recorder-Elections Department. (100% General Fund)

**C. 36** ADOPT Resolution No. 2018/132 to provide for salary reallocation of the Law Enforcement Training Instructor-Per Diem (unrepresented) job classification, as recommended by the County Administrator.

**C. 37** ADOPT Position Adjustment Resolution No. 22278 to add one Executive Secretary-Exempt (unrepresented) position and cancel one Clerk-Senior Level (represented) position in the Information Technology Department. (100% Department/Agency fees)

**C. 38** ADOPT Position Adjustment Resolution No. 22257 to add one Homeless Services Chief position (represented) in the Health Services Department. (100% General Fund)

**Leases**

**C. 39** APPROVE and AUTHORIZE the County Librarian, or designee, to execute the Ninth Amendment to the Memorandum of Understanding between the County of Contra Costa, the City of San Ramon and the Contra Costa Community College District for the operation of the Dougherty Station Library located at 17017 Bollinger Canyon Road, San Ramon for Fiscal Year 2018/2019, as recommended by the Public Works Director. (100% County Library Funds)

**Grants & Contracts**

**APPROVE and AUTHORIZE execution of agreements between the County and the following agencies for receipt of fund and/or services:**

**C. 40** APPROVE and AUTHORIZE the Agricultural Commissioner, or designee, to execute a contract containing modified indemnification language and accept reimbursement in an amount not to exceed $40,000 from East Bay Regional Park District (District) to provide noxious weed control services in District parks and associated land bank areas for the period January 1 through December 31, 2018. (No County match)

**C. 41** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to execute a contract with Bay Alarm Company, including modified indemnification language, to pay the County $26,000 the first year and $27,000 the second year for sponsorship funding designated to provide scholarships, classes, and recruitment for the Law Enforcement Training Center for the period July 1, 2018 through June 30, 2020, with the Sheriff's Charities, Inc., serving as the fiscal agent. (No County match)

**C. 42** ADOPT Resolution No. 2018/174 authorizing the Sheriff-Coroner, or designee, to apply for and accept the U.S. Department of Justice, Office of Justice Programs, DNA Program Backlog Reduction Grant in an initial amount of $238,151 to reduce the number of backlogged DNA tests in the Sheriff's Criminalistics Laboratory for the period January 1, 2019 through the end of the grant period. (100% Federal)

**C. 43** APPROVE and AUTHORIZE the Employment & Human Services Director, or designee, to execute a contract containing modified indemnification language with the California Department of Community Services and Development, to pay the County an amount not to exceed $166,495 for the U.S. Department of Energy Weatherization Assistance Program for low-income households for the period June 1, 2018 through May 31, 2019. (No County match)

**C. 44** APPROVE and AUTHORIZE the Health Services Director, or designee, to accept a grant award from the U.S. Department of Health and Human Services (Health Resources & Services Administration), to pay the County an amount not to exceed $55,563 to provide the Ryan White HIV/AIDS Program Part C in West Contra Costa County for the period May 1, 2018 through April 30, 2019. (No County match)

**C. 45** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $8,000 from Contra Costa Keller Canyon Mitigation Trust Fund to purchase educational products to be given to children and the elderly during public outreach events for the Keller Canyon Fund's primary target areas Bay Point and Pittsburg West of Harbor. (100% Keller Canyon Mitigation Funds)

**C. 46** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract containing modified indemnification language with John Muir Health to pay the County an amount not to exceed $50,000 for respite care services provided to homeless adults at the Philip Dorn Respite Center for the period January 1 through December 31, 2018. (No County match)

**C. 47** APPROVE and AUTHORIZE the Employment & Human Services Department Director, or designee, to accept additional funding in the amount of $12,250 for a new total of $260,250 from the Contra Costa County Office of Education for Quality Matters with no change in the term of July 1, 2017 through June 30, 2018. (No County match)

**C. 48** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $276,217 from the Contra Costa County Keller Mitigation Trust Fund to fund one Deputy Sheriff position for the Bay Point Resident Deputy program for the period of July 1, 2018 through June 30, 2019. (100% Keller Canyon Mitigation Funds)

**C. 49** APPROVE and AUTHORIZE the Sheriff, or designee, to apply for and accept a grant in an initial amount of $4,500 from Contra Costa County Keller Mitigation Trust Fund for the purchase of bicycle helmets, bicycle repair and an instructional class on safety and bicycle raffles (100% Keller Canyon Mitigation Funds)

**C. 50** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $5,000 for the Contra Costa Keller Mitigation Trust Fund to assist in expedited removal of litter dumps and graffiti. (100% Keller Canyon Mitigation Funds)

**C. 51** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $9,000 from Contra Costa Keller Canyon Mitigation Trust Fund to host a free community Christmas party and toy giveaway for the residents of Bay Point. (100% Keller Canyon Mitigation Funds)

**C. 52** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $8,000 from Contra Costa County Keller Canyon Mitigation Trust fund for gang intervention programs. (100% Keller Canyon Mitigation Funds)

**C. 53** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $276,217 from Contra Costa County Keller Canyon Mitigation Trust fund to fund one Deputy Sheriff position for the Bay Point School Resource Officer Program for the period of July 1, 2018 through June 30, 2019. (100% Keller Canyon Mitigation Funds)

**C. 54** ADOPT Resolution No. 2018/183 authorizing the Sheriff-Coroner, or designee, to apply for and accept a U.S. Department of Justice National Institute of Justice grant in an initial amount of $180,000 for the purchase of bullet proof vests from September 1, 2018 through August 31, 2020. (50% Federal, 50% County match)

**C. 55** APPROVE and AUTHORIZE the Employment & Human Services Department Director, or designee, to execute a contract containing modified indemnification language with Contra Costa County Office of Education for a Childcare Subsidy Pilot Project for the period March 1, 2018 through June 30, 2023. (Non-financial agreement)

**C. 56** APPROVE and AUTHORIZE the Health Services Director, or designee, to apply to the California Governor's Office of Emergency Services in an amount not to exceed $35,000 for the County's Hazardous Materials Emergency Planning Program for the period October 1, 2018 through September 30, 2019. (No County match)

**APPROVE and AUTHORIZE execution of agreement between the County and the following parties as noted for the purchase of equipment and/or services:**

**C. 57** APPROVE clarification of Board of Supervisors action of February 27, 2018 (C.56), to reflect that the correct name of the contracting party is Valley Power Systems North, Inc., rather than Valley Air Conditioning & Repair, as recommended by the Public Works Director, Countywide. (100% General Funds)

**C. 58** APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract with Contra Costa ARC, dba Commercial Support Services, in an amount not to exceed $450,000 to provide packet fulfillment services for Print and Mail Services, for the period June 1, 2018 through may 31, 2020, Countywide. (100% Department User Fees)

**C. 59** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Mt. Diablo Adult Education in an amount not to exceed $53,000 to provide services to California Work Opportunity and Responsibility to Kids (CalWORKs) Welfare-To-Work (WTW) Program participants with targeted vocational training for the period July 1, 2018 through June 30, 2019. (100% Federal)

**C. 60** APPROVE and AUTHORIZE the Conservation and Development Director, or designee, to execute a contract amendment with Craft Consulting Group to extend the term from June 30, 2018 through December 31, 2018 with no change to the existing payment limit of $125,514, to continue to provide services on the preparation of the Strategic Action Plan and related tasks for the Northern Waterfront Economic Development Initiative, as recommended by Northern Waterfront Economic Development Initiative Ad Hoc Committee.

**C. 61** APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract with Thyssenkrupp Elevator Corporation, including modified indemnification, in an amount not to exceed $1,300,000 for elevator maintenance, repair, and modernization services, for the period June 1, 2018 through May 31, 2021, Countywide. (100% General Funds)

**C. 62** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Employment and Human Services Department, a purchase order with Omnipro Systems, Inc. of San Francisco in an amount not to exceed $412,701 to procure 500 personal computers over the period May 15, 2018 through May 14, 2019. (48% Federal, 42% State, 10% County)

**C. 63** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with First Place for Youth, a non-profit agency, in an amount not to exceed $540,000 to continue to provide transitional housing assistance for emancipated youth for the period July 1, 2018 through June 30, 2019. (100% State)

**C. 64** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Monument Impact in an amount not to exceed $116,486 for job search and placement services to California Work Opportunity and Responsibility to Kids (CalWORKs) clients with limited English proficiency for the period July 1, 2018 through June 30, 2019. (85% Federal, 15% State)

**C. 65** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with the Asian Community Mental Health Board in an amount not to exceed $154,500 to provide interpretation, case management and advocacy services to mental health patients in West Contra Costa County for the period July 1, 2018 through June 30, 2019. (100% Mental Health Realignment)

**C. 66** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to execute a contract with John Meyers in an amount not to exceed $400,000 for helicopter pilot services for the period July 1, 2018 through June 30, 2020. (65% State, 34% CSA P-6 zone funds, 1% Agency user fees)

**C. 67** APPROVE and AUTHORIZE the County Probation Officer, or designee, to execute a contract with Behavioral Interventions Incorporated in the amount of $175,000 to provide electronic monitoring service and equipment for the period February 1, 2018 through January 31, 2019. (100% General Fund)

**C. 68** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract containing modified indemnification language with California State University Fresno Foundation, a Non-Profit Corporation, in an amount not to exceed $750,000, to provide Title IV-E training for the period July 1, 2018 through June 30, 2021. (75% Federal, 17.5% State, 7.5% County)

**C. 69** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Compass Group USA, Inc. (dba Bateman Community Living), in an amount not to exceed $2,868,382 to provide meal services for County's Senior Nutrition Program for the period July 1, 2018 through June 30, 2019, with a three-month automatic extension through September 30, 2019 in an amount not to exceed $717,096. (100% Title III C-1 and C-2 of the Federal Older Americans Act of 1965)

**C. 70** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an interagency agreement with Contra Costa County Office of Education in an amount not to exceed $108,045 to provide educational liaisons between Contra Costa schools and Children and Family Services (CFS) Bureau on behalf of children in foster care for the period of July 1, 2018 through June 30, 2019. (70% State, 30% County)

**C. 71** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Aspiranet, a non-profit corporation, in an amount not to exceed $1,041,623, to provide emergency shelter receiving center services for children taken into protective custody or transitioning through foster placements for the period July 1, 2018 through June 30, 2019. (70% State, 30% County)

**C. 72** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Laboratory Corporation of America in an amount not to exceed $325,000 to provide outside laboratory testing services for Contra Costa Regional Medical Center and Health Centers for the period May 1, 2018 through April 30, 2020. (100% Hospital Enterprise Fund I)

**C. 73** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with STAND! For Families Free of Violence, a non-profit corporation, in an amount not to exceed $182,281 to provide Child Welfare Redesign Differential Response Path 2 Case Management services for the period July 1, 2018 through June 30, 2019. (100% State)

**C. 74** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract amendment with David S. Gee, M.D., effective June 1, 2018, to increase the payment limit by $25,000 to a new payment limit of $193,000 to provide additional consultation and technical assistance to the Contra Costa Health Plan medical management team, for the period December 1, 2017 through November 30, 2018. (100% Contra Costa Health Plan Enterprise Fund III)

**C. 75** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with Uplift Family Services, effective June 1, 2018, to increase the payment limit by $36,057 to a new payment limit of $186,057 and to extend the term from June 30, 2018 to a new term ending December 31, 2018, to provide additional family visitation services to Contra Costa County families for the period July 1, 2017 through December 31, 2018. (100% Federal)

**C. 76** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with Counseling Options & Parent Education Support Center, Inc. (C.O.P.E.), a non-profit corporation, effective June 1, 2018, to increase the payment limit by $57,000 to a new payment limit of $156,000 and to extend the term end date from June 30, 2018 to December 31, 2018 for ongoing Promoting Safe and Stable Families Program Services for the period of July 1, 2017 through December 31, 2018. (100% Federal)

**C. 77** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment Contra Costa Interfaith Transitional Housing, Inc., a non-profit corporation, effective June 1, 2018, to increase the payment limit by $41,761 to a new payment limit of $128,153 and to extend the term end date from June 30, 2018 to December 31, 2018 for ongoing mental health case management, academic support, and life and parenting skills training for homeless and vulnerable families for the period of July 1, 2017 through December 31, 2018. (100% Federal)

**C. 78** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Robert Buckley, M.D., in an amount not to exceed $605,000 to provide orthopedic care at Contra Costa Regional Medical Center and Health Centers for the period July 1, 2018 through June 30, 2021. (100% Hospital Enterprise Fund I)

**C. 79** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with Social Service Staffing & Recruiting, Inc., effective May 1, 2018, to increase the payment limit by $160,000 to a new payment limit of $800,000 to provide additional qualified temporary social workers for clients of Children and Family Services programs for the period of July 1, 2017 through June 30, 2018. (10% County, 45% State, 45% Federal Administrative Overhead)

**C. 80** RATIFY the Purchasing Agent's execution of two purchase orders with Altec Industries, Inc., and APPROVE and AUTHORIZE the Purchasing Agent to execute amendments to those purchase orders, for an aggregate payment limit of $196,199.82 per purchase order, to purchase two bucket trucks, as recommended by the Public Works Director. (100% General Fund)

**C. 81** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with East Bay Nephrology Medical Group, Inc., in an amount not to exceed $240,000 to provide nephrology (kidney care) services at Contra Costa Regional Medical Center and Health Centers for the period July 1, 2018 through June 30, 2021. (100% Hospital Enterprise Fund I)

**C. 82** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Lao Family Community Development Inc., in an amount not to exceed $105,000 for job services and job placement to limited English proficient California Work Opportunity and Responsibility to Kids (CalWORKs) clients for the period July 1, 2018 through June 30, 2019. (85% Federal, 15% State)

**C. 83** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Contra Costa Senior Legal Services, in an amount not to exceed $109,505, to provide county-wide legal services to eligible clients 60 years of age or older for the period of July 1, 2018 through June 30, 2019. (100% Federal)

**C. 84** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Rodney J. Chan, DPM, in an amount not to exceed $540,000 to provide podiatry services at Contra Costa Regional Medical Center and Health Centers for the period June 1, 2018 through May 31, 2021. (100% Hospital Enterprise Fund I)

**C. 85** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Family Caregiver Alliance, a non-profit corporation of California, in an amount not to exceed $125,306 for Older Americans Act, Title III-E Family Caregiver Provider Program services to support older adults, their caregivers, and families for the period of July 1, 2018 through June 30, 2019. (100% Federal)

**C. 86** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Counseling Options & Parent Education, Inc., in an amount not to exceed $245,863 to parent education classes and practitioner trainings to prevent and treat behavioral and emotional problems in children and teenagers for the period July 1, 2018 through June 30, 2019, with a six-month automatic extension through December 31, 2019 in an amount not to exceed $122,932. (100% Mental Health Services Act)

**C. 87** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Public Health Foundation Enterprises, Inc. (dba Heluna Health), in an amount not to exceed $767,512 to provide consultation and technical assistance on community health promotion for the County's Public Health Division's Health Emergency Unit and Health Services Department's Emergency Medical Service Unit for the period July 1, 2018 through June 30, 2019. (100% Center for Disease Control funds)

**C. 88** APPROVE and AUTHORIZE the Chief Information Officer-Department of Information Technology, or designee, to execute a contract amendment with E-3 Systems, to extend the term from May 31, 2018 through May 31, 2019 and increase the payment limit by $1,000,000 to a new payment limit of $5,750,000 to continue to provide, on an as-needed basis, installation and maintenance of telecommunications cabling. (100% Department User fees)

**C. 89** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Anka Behavioral Health, Inc., in an amount not to exceed $219,120 to operate a Coordinated Assessment, Referral and Engagement Center, and Warming Center, and provide case management services for the Homeless Coordinated Entry System of Care for the period April 1, 2018 through September 30, 2018. (55% Mental Health Realignment, 45% Housing and Urban Development Coordinated Entry)

**C. 90** APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to execute a contract with the Contra Costa County Office of Education in an amount not to exceed $611,606 to continue providing educational services to inmates for the period of July 1, 2018 through June 30, 2019. (100% Inmate Welfare fund)

**C. 91** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Community Violence Solutions in an amount not to exceed $142,000 for the continued operation of the Children's Interview Center for the period July 1, 2018 through June 30, 2019. (14% General Fund, 86% Local Law Enforcement Agencies)

**C. 92** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Contra Costa Community College District - Diablo Valley College in an amount not to exceed $32,400 to provide training for caregivers of children exposed to drugs and/or alcohol for the period July 1, 2018 through June 30, 2019. (75% Federal, 17.5% State, 7.5% General Fund)

**C. 93** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Community Violence Solutions in an amount not to exceed $179,552 for crisis intervention and advocacy services to sexually exploited and commercially sexually exploited youth and families for the period July 1, 2018 through June 30, 2019. (42% General Fund, 29% State, 29% Federal)

**C. 94** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Community Violence Solutions in an amount not to exceed $182,039 to provide case management and home visiting services to high-risk families in West Contra Costa County for the period July 1, 2018 through June 30, 2019. (100% State)

**C. 95** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract amendment with American Hospice and Home Health Care Services, Inc., effective November 1, 2017, to modify the rates for home services for Contra Costa Health Plan members with no change in the payment limit of $200,000 or in the term of September 1, 2017 through August 31, 2019. (100% Contra Costa Health Plan Enterprise Fund II)

**C. 96** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Pittsburg Power Company in an amount not to exceed $200,000 for comprehensive Workforce Innovation and Opportunity Act services to eligible adults in East Contra Costa County for the period July 1, 2018 through June 30, 2019. (100% Federal)

**C. 97** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Contra Costa Community College District - West Campus in an amount not to exceed $30,400 to provide training for caregivers of children exposed to drugs and/or alcohol for the period July 1, 2018 through June 30, 2019. (75% Federal, 17.5% State, 7.5% General Fund)

**C. 98** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with A Step Forward Child Abuse Treatment and Training Programs, a Marriage, Family and Child Counseling Corporation, effective April 1, 2018, to increase the payment limit by $55,000 to a new payment limit of $195,000 to provide mental health services to non Medi-Cal eligible clients for the period August 1, 2016 through July 31, 2018. (70% State, 30% General Fund)

**C. 99** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with STAND! For Families Free of Violence in an amount not to exceed $227,470 to provide shelter services for domestic violence victims and their children for the period July 1, 2018 through June 30, 2019. (63% Marriage license fee revenue, 37% General Fund)

**C.100** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with Robert Half International, Inc., effective June 30, 2018, to increase the payment limit by $67,200 to a new payment limit of $2,586,225 to provide additional temporary information technology staff and extend the term through December 31, 2018. (48% State, 42% Federal, 10% County)

**C.101** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with FBC Community Outreach, Inc., in an amount not to exceed $258,129 to provide case management and home visiting services to high-risk families in East Contra Costa County for the period July 1, 2018 through June 20, 2019. (100% State)

**C.102** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Uplift Family Services, a non-profit corporation in an amount not to exceed $254,454 to provide case management and home visiting services to high-risk families in East and Central Contra Costa County for the period July 1, 2018 through June 20, 2019. (100% State)

**C.103** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Yellow Cab of Walnut Creek and Contra Costa, Inc., in an amount not to exceed $150,000 to provide non-emergency transportation services to Contra Costa Health Plan members for the period May 1, 2018 through April 30, 2020. (100% Contra Costa Health Plan Enterprise Fund II)

**C.104** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Community Housing Development Corporation of North Richmond in an amount not to exceed $16,920 to provide congregate meals for the Senior Nutrition Program for the period July 1, 2018 through June 30, 2019, with a three-month automatic extension through September 30, 2019, in an amount not to exceed $4,300. (100% Federal Title III C-1 of the Older Americans Act of 1965)

**C.105** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Health Services Director, a purchase order with Complete Imaging Systems, Inc., in an amount not to exceed $900,000 for fax machines, printers, supplies, parts, ink cartridges, and repairs of fax machines, printers and other machines for the Contra Costa Regional Medical Center and Health Centers for the period May 1, 2018 through April 30, 2020. (100% Hospital Enterprise Fund I)

**C.106** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with West Contra Costa Adult Education in an amount not to exceed $61,723 for a vocational and academic skills training program specially designed for Welfare-to-Work (WTW) participants of the California Work Opportunity and Responsibility to Kids (CalWORKs) Program for the period July 1, 2018 through June 30, 2019. (85% Federal, 15% State)

**C.107** APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Health Services Director, a purchase order amendment with Biomerieux, Inc., to increase the payment limit by $99,000 to a new payment limit of $198,000 for additional reagents and supplies needed for the Contra Costa Regional Medical Center Clinical Laboratory and Health Centers for the period January 1, 2017 through December 31, 2018. (100% Hospital Enterprise Fund I)

**C.108** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with Mauricio Kuri, M.D., in an amount not to exceed $1,767,000 to provide plastic surgery services at Contra Costa Regional Medical Center and Health Centers for the period July 1, 2018 through June 30, 2021. (100% Hospital Enterprise Fund I)

**C.109** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract containing modified indemnification language with Foley & Lardner, LLP, in an amount not to exceed $975,000 to provide legal services related to Medi-Cal audit appeals and other Contra Costa Health Plan appeals, report issues, and authorized litigation issues for the period July 1, 2018 through June 30, 2019. (100% Hospital Enterprise I Fund)

**C.110** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with the San Ramon Valley Unified School District in an amount not to exceed $225,072 to provide State Preschool services for the period July 1, 2018 through June 30, 2019. (100% State)

**C.111** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Contra Costa County Office of Education in an amount not to exceed $560,000 to provide Workforce Innovation and Opportunity Act (WIOA) year-round youth workforce development services in East and West County for the period July 1, 2018 through June 30, 2019. (100% Federal)

**C.112** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract containing modified indemnification language with CapsuleTech, Inc., in an amount not to exceed $86,891 for SmartLinx license, maintenance and support, which delivers monitoring, management, and analysis of real-time patient data at Contra Costa Regional Medical Center for the period March 6, 2018 through March 5, 2021. (100% Hospital Enterprise Fund I)

**C.113** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract amendment with Huron Consulting Services, LLC, effective February 1, 2018, to increase the payment limit by $25,674 to a new payment limit of $1,425,674 for additional consulting, technical support, training, and project management services for the Department's Information Systems Unit, for the period May 1, 2014 through June 30, 2018. (100% Hospital Enterprise Fund I)

**C.114** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a Cooperative Purchasing Agreement with Hewlett Packard Enterprise Company in an amount not to exceed $466,000 to provide computer server hardware, integrated software, and implementation services for the Employment and Human Services Department for the period May 1, 2018 through April 30, 2019. (42% Federal, 48% State, 10% County)

**C.115** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract containing modified indemnification language with Crestwood Behavioral Health, Inc., in an amount not to exceed $8,389,976 to provide subacute skilled nursing care services for severely and persistently mentally ill and neurobehavioral clients for the period July 1, 2018 through June 30, 2019. (92% Mental Health Realignment, 8% Mental Health Services Act)

**C.116** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract with West Contra Costa County Meals on Wheels in an amount not to exceed $65,289 to provide home-delivered meals for County's Senior Nutrition Program for the period July 1, 2018 through June 30, 2019, with a three-month automatic extension through September 30, 2019 in an amount not to exceed $15,334. (100% Title III-C 2 of the Older Americans Act of funds)

**C.117** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract amendment effective May 15, 2018 with Thomas B. Hargrave, M.D., to increase the payment limit by $85,000 to a new payment limit of $335,000 to provide additional hours of gastroenterology services at Contra Costa Regional Medical Center and Health Centers, with no change in the term of September 1, 2017 through August 31, 2018. (100% Hospital Enterprise Fund I)

**C.118** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract amendment with Stericycle, Inc., effective May 1, 2018, to increase the payment limit by $51,000 to a new payment limit of $1,051,000, to provide additional bio-hazardous services, for the period April 1, 2017 through March 31, 2020. (100% Hospital Enterprise Fund I)

**C.119** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract amendment with R.E.A.C.H. Project, effective May 1, 2018, to increase the payment limit by $59,995 to a new payment limit of $1,220,584 to provide additional drug abuse prevention and treatment services to youth and adults in East County, for the period July 1, 2017 through June 30, 2018. (14% Substance Abuse Prevention and Treatment Block Grants, 40% Drug Medi-Cal Realignment; 40% Federal Drug Medi-Cal, 6% Probation Department)

**C.120** APPROVE and AUTHORIZE the Health Services Director, or designee, to execute a contract containing modified indemnification language with Cardinal Health Pharmacy Services, LLC, in an amount not to exceed $1,370,000 to provide remote entry services of physician medication orders at Contra Costa Regional Medical Center and Health Centers for the period June 1, 2018 through

May 31, 2020. (100% Hospital Enterprise Fund I)

**Other Actions**

**C.121** AUTHORIZE the Board of Supervisors to sign a letter to the California State Superintendent of Public Instruction expressing the County's concerns with the Department of Education's process to update Title 5 (School Facilities Construction), as recommended by the Transportation, Water and Infrastructure Committee

**C.122** ACCEPT the Employment and Human Services Department Community Services Bureau 2018-2019 Planning Calendar for Head Start and Community Action programs, as approved by the Head Start Policy Council and recommended by the Employment and Human Services Director.

**C.123** ACCEPT and APPROVE the Head Start 2018 Self-Assessment and Corrective Action Plan, as recommended by the Employment and Human Services Director.

**C.124** ACCEPT the April 2018 update of the operations of the Employment and Human Services Department, Community Services Bureau, as recommended by the Employment and Human Services Director.

**C.125** DECLARE as surplus and AUTHORIZE the Purchasing Agent, or designee, to dispose of fully depreciated vehicles and equipment no longer needed for public use, as recommended by the Public Works Director, Countywide. (No fiscal impact)

**C.126** APPROVE and AUTHORIZE the County Clerk-Recorder, or designee, to execute a one-day use permit, including modified indemnification language, with the State of California Department of Parks and Recreation for the use of the Mt. Diablo Summit Observation Deck on May 25, 2018 to conduct civil wedding ceremonies. (No fiscal impact)

**C.127** APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract containing modified indemnification language with California State University, East Bay for the student work experience program and use of the Community Services Bureau Head Start Childcare facilities for the period January 1, 2018 through December 31, 2023. (Non-financial agreement)

**C.128** ACCEPT the Contra Costa County Public Law Library Board of Trustees 2017 Annual Report, as recommended by the County Administrator.

**C.129** APPROVE clarification of Board action of April 17, 2018 (Item C.32), which authorized the County Administrator to execute a Memorandum of Understanding and accept grant funding from California Lawyers for the Arts for the provision of the Arts in Correction-County Jail Demonstration Project, to reflect the correct term of May 1, 2018 through August 31, 2018. (No fiscal impact)

**C.130** ADOPT updated policies for the implementation of the Mortgage Credit Certificate program, as recommended by the Conservation and Development Director. (100% Special revenue)

**C.131** APPROVE changes to the Contra Costa Regional Medical Center's 2015 Medical Staff Bylaws and Rules and Regulations, as recommended by the Medical Executive Committee, the Joint Conference Committee and Health Services Director.

**C.132** APPROVE the list of providers recommended by Contra Costa Health Plan's Medical Director and the Health Services Director, as required by the State Departments of Health Care Services and Managed Health Care, and the Centers for Medicare and Medicaid Services.

**C.133** APPROVE and AUTHORIZE the County Administrator, or designee, to execute an order for the destruction of County collections and deposit records maintained by the Superior Court that are over five (5) years old and are no longer necessary or required for County or Court purposes. (No fiscal impact)

**C.134** CONTINUE the emergency action originally taken by the Board of Supervisors on November 16, 1999, and most recently approved by the Board on May 8, 2018, regarding the issue of homelessness in Contra Costa County, as recommended by the Health Services Director. (No fiscal impact)

**C.135** ADOPT Resolution No. 2018/190 approving the Side Letter between Contra Costa County and the California Nurses Association modifying the Preamble and Section 64 Duration of Agreement of the Memorandum of Understanding to extend the contract from May 31, 2018 through July 31, 2018, as recommended by the County Administrator.

**C.136** Acting as the Governing Board of Contra Costa County, the Contra Costa County Flood Control and Water Conservation District and the Contra Costa County Water Agency, APPROVE and AUTHORIZE the County Administrator, or designee, to execute a Compensation Agreement with the City of El Cerrito for the distribution of net unrestricted proceeds to be received by the City for the disposition of properties formerly owned by the El Cerrito Redevelopment Agency, as recommended by the County Administrator. (No immediate fiscal impact)

**C.137** AUTHORIZE the Auditor-Controller to make a one-time payment in the amount of $316 for mandated Infant Supplement payments to a non-minor dependent, Ward of the Court, as recommend by the County Probation Officer. (100% General Fund)

## GENERAL INFORMATION

The Board meets in all its capacities pursuant to Ordinance Code Section 24-2.402, including as the Housing Authority and the Successor Agency to the Redevelopment Agency. Persons who wish to address the Board should complete the form provided for that purpose and furnish a copy of any written statement to the Clerk.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the Clerk of the Board to a majority of the members of the Board of Supervisors less than 96 hours prior to that meeting are available for public inspection at 651 Pine Street, First Floor, Room 106, Martinez, CA 94553, during normal business hours.

All matters listed under CONSENT ITEMS are considered by the Board to be routine and will be enacted by one motion. There will be no separate discussion of these items unless requested by a member of the Board or a member of the public prior to the time the Board votes on the motion to adopt.

Persons who wish to speak on matters set for PUBLIC HEARINGS will be heard when the Chair calls for comments from those persons who are in support thereof or in opposition thereto. After persons have spoken, the hearing is closed and the matter is subject to discussion and action by the Board. Comments on matters listed on the agenda or otherwise within the purview of the Board of Supervisors can be submitted to the office of the Clerk of the Board via mail: Board of Supervisors, 651 Pine Street Room 106, Martinez, CA 94553; by fax: 925-335-1913.

The County will provide reasonable accommodations for persons with disabilities planning to attend Board meetings who contact the Clerk of the Board at least 24 hours before the meeting, at (925) 335-1900; TDD (925) 335-1915. An assistive listening device is available from the Clerk, Room 106.

Copies of recordings of all or portions of a Board meeting may be purchased from the Clerk of the Board. Please telephone the Office of the Clerk of the Board, (925) 335-1900, to make the necessary arrangements.

Forms are available to anyone desiring to submit an inspirational thought nomination for inclusion on the Board Agenda. Forms may be obtained at the Office of the County Administrator or Office of the Clerk of the Board, 651 Pine Street, Martinez, California.

Subscribe to receive to the weekly Board Agenda by calling the Office of the Clerk of the Board, (925) 335-1900 or using the County's on line subscription feature at the County’s Internet Web Page, where agendas and supporting information may also be viewed:

www.co.contra-costa.ca.us

## STANDING COMMITTEES

The **Airport Committee** (Supervisors Diane Burgis and Karen Mitchoff) meets quarterly on the second Wednesday of the month at 11:00 a.m. at the Director of Airports Office, 550 Sally Ride Drive, Concord.

The **Family and Human Services Committee** (Supervisors Candace Andersen and John Gioia) meets on the fourth Monday of the month at 10:30 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Finance Committee** (Supervisors Karen Mitchoff and John Gioia) meets on the fourth Monday of the month at 9:00 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Hiring Outreach Oversight Committee** (Supervisors Candace Andersen and Federal D. Glover) meets on the first Monday of every other month at 1:00 p.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Internal Operations Committee** (Supervisors Diane Burgis and Candace Andersen) meets on the second Monday of the month at 1:00 p.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Legislation Committee** (Supervisors Karen Mitchoff and Diane Burgis) meets on the second Monday of the month at 10:30 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Public Protection Committee** (Supervisors John Gioia and Federal D. Glover) meets on the first Monday of the month at 10:30 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

The **Transportation, Water & Infrastructure Committee** (Supervisors Karen Mitchoff and Candace Andersen) meets on the second Monday of the month at 9:00 a.m. in Room 101, County Administration Building, 651 Pine Street, Martinez.

| | | | |
|---|---|---|---|
| Airports Committee | June 13, 2018 | 11:00 a.m. | See above |
| Family & Human Services Committee | May 28, Canceled Special Meeting May 30, 2018 | 9:30 a.m. | See above |
| Finance Committee | May 28, 2018 Canceled Special Meeting June 5, 2018 | 1:00 p.m. | See above |
| Hiring Outreach Oversight Committee | June 4, 2018 | 1:00 p.m. | See above |

| | | | |
|---|---|---|---|
| Internal Operations Committee | June 11, 2018 | 1:00 p.m. | See above |
| Legislation Committee | June 11, 2018 | 10:30 a.m. | See above |
| Public Protection Committee | Special Meeting May 23, 2018 | 1:30 p.m. | See above |
| Transportation, Water & Infrastructure Committee | June 11, 2018 | 9:00 a.m. | See above |

**AGENDA DEADLINE: Thursday, 12 noon, 12 days before the Tuesday Board meetings.**

**Glossary of Acronyms, Abbreviations, and other Terms (in alphabetical order):**

Contra Costa County has a policy of making limited use of acronyms, abbreviations, and industry-specific language in its Board of Supervisors meetings and written materials. Following is a list of commonly used language that may appear in oral presentations and written materials associated with Board meetings:

**AB** Assembly Bill
**ABAG** Association of Bay Area Governments
**ACA** Assembly Constitutional Amendment
**ADA** Americans with Disabilities Act of 1990
**AFSCME** American Federation of State County and Municipal Employees
**AICP** American Institute of Certified Planners
**AIDS** Acquired Immunodeficiency Deficiency Syndrome
**ALUC** Airport Land Use Commission
**AOD** Alcohol and Other Drugs
**ARRA** American Recovery & Reinvestment Act of 2009
**BAAQMD** Bay Area Air Quality Management District
**BART** Bay Area Rapid Transit District
**BayRICS** Bay Area Regional Interoperable Communications System
**BCDC** Bay Conservation & Development Commission
**BGO** Better Government Ordinance
**BOS** Board of Supervisors
**CALTRANS** California Department of Transportation
**CalWIN** California Works Information Network
**CalWORKS** California Work Opportunity and Responsibility to Kids
**CAER** Community Awareness Emergency Response
**CAO** County Administrative Officer or Office
**CCE** Community Choice Energy
**CCCPFD** (ConFire) Contra Costa County Fire Protection District
**CCHP** Contra Costa Health Plan
**CCTA** Contra Costa Transportation Authority
**CCRMC** Contra Costa Regional Medical Center
**CCWD** Contra Costa Water District
**CDBG** Community Development Block Grant

**CFDA** Catalog of Federal Domestic Assistance
**CEQA** California Environmental Quality Act
**CIO** Chief Information Officer
**COLA** Cost of living adjustment
**ConFire** (CCCFPD) Contra Costa County Fire Protection District
**CPA** Certified Public Accountant
**CPI** Consumer Price Index
**CSA** County Service Area
**CSAC** California State Association of Counties
**CTC** California Transportation Commission
**dba** doing business as
**DSRIP** Delivery System Reform Incentive Program
**EBMUD** East Bay Municipal Utility District
**ECCFPD** East Contra Costa Fire Protection District
**EIR** Environmental Impact Report
**EIS** Environmental Impact Statement
**EMCC** Emergency Medical Care Committee
**EMS** Emergency Medical Services
**EPSDT** Early State Periodic Screening, Diagnosis and Treatment Program (Mental Health)
**et al.** et alii (and others)
**FAA** Federal Aviation Administration
**FEMA** Federal Emergency Management Agency
**F&HS** Family and Human Services Committee
**First 5** First Five Children and Families Commission (Proposition 10)
**FTE** Full Time Equivalent
**FY** Fiscal Year
**GHAD** Geologic Hazard Abatement District
**GIS** Geographic Information System
**HCD** (State Dept of) Housing & Community Development
**HHS** (State Dept of ) Health and Human Services
**HIPAA** Health Insurance Portability and Accountability Act
**HIV** Human Immunodeficiency Virus
**HOME** Federal block grant to State and local governments designed exclusively to create affordable housing for low-income households
**HOPWA** Housing Opportunities for Persons with AIDS Program
**HOV** High Occupancy Vehicle
**HR** Human Resources
**HUD** United States Department of Housing and Urban Development
**IHSS** In-Home Supportive Services
**Inc.** Incorporated
**IOC** Internal Operations Committee
**ISO** Industrial Safety Ordinance
**JPA** Joint (exercise of) Powers Authority or Agreement
**Lamorinda** Lafayette-Moraga-Orinda Area
**LAFCo** Local Agency Formation Commission
**LLC** Limited Liability Company
**LLP** Limited Liability Partnership
**Local 1** Public Employees Union Local 1

**LVN** Licensed Vocational Nurse
**MAC** Municipal Advisory Council
**MBE** Minority Business Enterprise
**M.D.** Medical Doctor
**M.F.T.** Marriage and Family Therapist
**MIS** Management Information System
**MOE** Maintenance of Effort
**MOU** Memorandum of Understanding
**MTC** Metropolitan Transportation Commission
**NACo** National Association of Counties
**NEPA** National Environmental Policy Act
**OB-GYN** Obstetrics and Gynecology
**O.D.** Doctor of Optometry
**OES-EOC** Office of Emergency Services-Emergency Operations Center
**OPEB** Other Post Employment Benefits
**OSHA** Occupational Safety and Health Administration
PACE Property Assessed Clean Energy
**PARS** Public Agencies Retirement Services
**PEPRA** Public Employees Pension Reform Act
**Psy.D.** Doctor of Psychology
**RDA** Redevelopment Agency
**RFI** Request For Information
**RFP** Request For Proposal
**RFQ** Request For Qualifications
**RN** Registered Nurse
**SB** Senate Bill
**SBE** Small Business Enterprise
**SEIU** Service Employees International Union
**SUASI** Super Urban Area Security Initiative
**SWAT** Southwest Area Transportation Committee
**TRANSPAC** Transportation Partnership & Cooperation (Central)
**TRANSPLAN** Transportation Planning Committee (East County)
**TRE** or **TTE** Trustee
**TWIC** Transportation, Water and Infrastructure Committee
**UASI** Urban Area Security Initiative
**VA** Department of Veterans Affairs
**vs**. versus (against)
**WAN** Wide Area Network
**WBE** Women Business Enterprise
**WCCTAC** West Contra Costa Transportation Advisory Committee

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: CalFresh Awareness Month

**RECOMMENDATION(S):**
PRESENTATION recognizing May as CalFresh Awareness Month.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
May 2018 is designated as CalFresh Awareness month. CalFresh known as the Supplemental Nutrition Assistance Program or SNAP at the federal level is our nation and county's most important anti-hunger program. CalFresh provides food to low-income households. On a monthly average, the Employment and Human Services Department (EHSD), who administers the program, serves 65,000 people most of which are in families with children. While the number of CalFresh cases have leveled, EHSD has experienced a rise in applications from the prior program year.

EHSD works in close collaboration with several community partners, known collectively as the CalFresh Partnership Group, to outreach to potential CalFresh recipients and to provide various approaches in streamlining and supporting expanded access to CalFresh benefits. Rubicon and Opportunity Junction

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Elaine Burres, 608-4960

**cc:**

BACKGROUND: (CONT'D)

in collaboration with EHSD and the Community College Foundation currently operate an Employment and Training (E&T) program designed for those CalFresh recipients who are interested and voluntarily enroll in various training and employment opportunities.

Currently, EHSD along with many community partners is planning for a requirement that would impose restrictions to CalFresh benefits for those adults considered able-bodied and do not have any dependent children. These individuals, known as Able-Bodied Adults without Dependents (ABAWD) would be required to maintain a specified number of work hours each month to continue to receive CalFresh benefits.

ATTACHMENTS

CalFresh Awareness Month

*Contra Costa County Employment & Human Services Department*

Contra Costa County Board of Supervisors Meeting

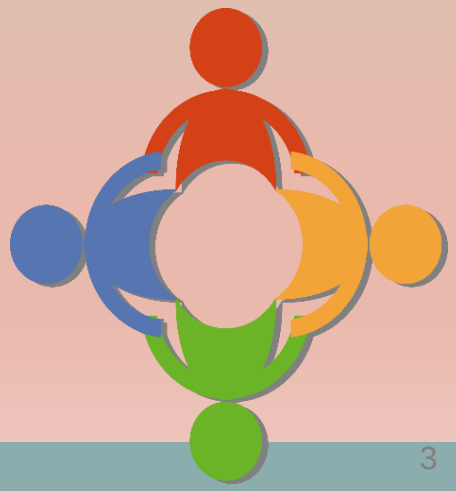
CalFresh Awareness Month – May 22, 2018

- **CalFresh Program – Introduction & Facts:**
  - Provides food for low-income families – one of the most important anti-poverty programs in the country.
  - Serves an average of 65,000 individuals a month of which 68% are children, seniors or disabled, with the majority of the remaining 32% of recipients falling into the category of working poor.
  - Average monthly benefit is $288.

## CalFresh Program – Introduction & Facts:

- CalFresh Allocations have dropped approximately $9,686,986 or 21.5% since PY 2014-2015.
- As a result, Administrative Funding for CalFresh has been significantly reduced, leading to a major reduction in staffing.
- Applications have risen by 7% over the last year. We receive an average of 2,815 applications a month.
- Staffing has also precipitously declined by 28% over the last couple of years.

- **CalFresh Partnership Group:**
  - Group includes:
    - Food Bank of Contra Costa and Solano - Larry Sly , Caitlin Sly, Carly Finkle, Steven Courtney, and Vakil Kuner
    - Ensuring Opportunity - Marianna Moore
    - Family Economic Security Partnership (FESP)/First 5 - Fran Biderman
    - Multi-Faith ACTION Coalition - Melody Weintraub
    - Community Services Bureau – Sophia Talbot



- **CalFresh Partnership Group:**
  - Collaborative efforts include Outreach Activities and Events as well as other efforts to expand access to eligible families.
    - Medi-Cal Mailing
    - Able Bodied Adults Without Dependents (ABAWD) Convening
    - Glen Price Group
- **Current CalFresh Issues and Concerns**
  - ABAWD
  - Reauthorization of SNAP under the new Farm Bill
  - Outreach Impacts

SNAP Supplemental Nutrition Assistance Program

**Thank you for your Board's time and attention.**

**QUESTIONS?**

Contra Costa County

To: Board of Supervisors

From: Diane Burgis, District III Supervisor

Date: May 22, 2018

Subject: 2017 Kindergarten Readiness Assessment

**RECOMMENDATION(S):**
Consider accepting the 2017 Kindergarten Readiness Assessment and discuss First 5 activities to support young families in Contra Costa.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
2018 marks the 20th anniversary of the passage of Proposition 10, the voter initiative that created First 5. California voters recognized then, as they do today, that the early years are critical. Brain science findings in those 20 years confirm that a successful lifetime is rooted in the first days, weeks and years of life. First 5 Contra Costa has established itself as a key leader in supporting children 0-5 and their families, particularly those in greatest need.

Public investment in early childhood is not only important for ensuring that children have the best start in life, it also yields returns in other public systems such as education, health and law enforcement, and leads to higher earnings and tax revenues.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Alicia Nuchols, 925-252-4500

**cc:**

BACKGROUND: (CONT'D)

>

First 5 Contra Costa has used its resources to create and enhance systems that support young children, including:

- **Quality Matters**, a system that improves the quality of child care programs. This Quality Rating and Improvement System provides professional development, coaching, and other supports to raise the quality of preschool and early learning providers.
- **Help Me Grow**, to ensure children receive early and regular developmental screening and, where necessary, the referral and intervention required to help children catch up developmentally.
- **The Family Support Initiative**, which provides parenting supports to families who need them most. Through home visiting and First 5 Centers, we provide in-home and center-based parent support, education, referral to services, and socialization to families with children 0-3
- **Community Regional Groups**, providing leadership training to parents and other community volunteers, continue to advocate for families in their communities.

The needs of our children are still great. First 5's recent countywide Kindergarten Readiness Assessment found that overall only 44% of children are fully ready for kindergarten when they enter the K-12 system, and nearly a quarter do not demonstrate proficiency in any of the measurements for readiness. Moreover, disparities are wide; over a third of children from households with incomes less than $50,000 are not ready, compared to just 11% of children from higher earning households. (The full findings from the Assessment will be rolled out at First 5's "Coffee and Kids" Breakfast, Thursday, May 24th).

After 20 years, First 5's revenue from tobacco tax sales continues to decline. By 2020, annual revenues will be close to half of what they were when First 5 began. To sustain the gains that have made over the next 20 years First 5 will be broadening its advocacy role and inviting the County and all its constituent jurisdictions to prioritize children, support families in all ways, and make the best possible investments of public funds to ensure all children grow to succeed in learning and life.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Ord. No. 2018-16 & Reso. No. 2018/182 to adjust Transp. Mit. fees, update project list & reestablish boundaries for Discovery Bay AOB.

**RECOMMENDATION(S):**

1.) OPEN the public hearing to consider adopting Ordinance No. 2018-16, to update the Discovery Bay Area of Benefit ("Discovery Bay AOB"); RECEIVE public comments; CONSIDER all objections and protests received by the Clerk of the Board of Supervisors; and CLOSE the public hearing.

2.) DETERMINE that the County did not receive protests from owners of more than one half of the area of the property within the proposed boundaries of the Discovery Bay AOB, and therefore a majority protest does not exist.

3.) ADOPT Ordinance No. 2018-16 to update the project list and adjust the transportation mitigation fees within the Discovery Bay AOB, and to reestablish the boundaries of the Discovery Bay AOB.

4.) ADOPT Resolution No. 2018/182, to adopt the Development Program Report and Nexus Study attached thereto.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Mary Halle, 925.313.2327

By: , Deputy

**cc:**

RECOMMENDATION(S): (CONT'D)

5.) DETERMINE that the adoption of Ordinance No. 2018-16 and Resolution No. 2018/182 and take related actions under the California Environmental Quality Act (CEQA), pursuant to Article 5, Section 15061(b)(3) of the CEQA Guidelines.

6.) DIRECT the Conservation and Development Director to file a Notice of Exemption with the County Clerk-Recorder; and AUTHORIZE the Public Works Director, or designee, to arrange for payment of a $25 fee to the Department of Conservation and Development for processing, and a $50 fee to the County Clerk for filing of the Notice of Exemption.

7.) DIRECT the Clerk of the Board of Supervisors to record certified copies of Ordinance No. 2018-16 and Resolution No. 2018/182 in the Official Records of the Contra Costa County Clerk-Recorder.

8.) DIRECT that, on January 1, 2019, and on each January 1 thereafter that the Ordinance No. 2018-16 remains in effect, the Public Works Director adjust the Discovery Bay AOB transportation mitigation fees for the effects of inflation or deflation, in accordance with Section 5(a)(3) of the ordinance.

9.) REDESIGNATE Trust Fund No. 1390 as the fund into which all Discovery Bay AOB transportation mitigation fee revenue will be deposited, DIRECT all Discovery Bay AOB transportation mitigation fee revenue to be deposited into that fund, and DIRECT the County Treasurer-Tax Collector to invest all monies in that fund, with interest to accrue and remain in the fund.

10.) DIRECT that all funds deposited in Trust Fund No. 1390 must be used solely to pay new development's proportional share of the actual or estimated costs of constructing the transportation improvements specified in the Development Program Report and Nexus Study attached hereto, and to reimburse the County for payment of any such costs with money advanced by the County from its general fund, or from other County revenues. Further DIRECT that all funds previously deposited in Trust Fund No. 1390 be used solely to pay new development's proportional share of the actual or estimated costs of constructing the Byron Highway Improvements at Byron Elementary School (currently named Excelsior Middle School) project.

11.) AUTHORIZE the Public Works Department to collect an additional administrative fee equal to two percent (2%) of the applicable Discovery Bay AOB Fee.

12.) DIRECT the Conservation and Development Director to monitor future amendments to the currently adopted General Plan and their impact on traffic within the Discovery Bay AOB and to report those amendments to the Public Works Director as necessary to facilitate updating of the Discovery Bay AOB Fee.

FISCAL IMPACT:

100% Discovery Bay Area of Benefit Funds.

Adoption of Ordinance No. 2018-16 will result in the collection of transportation mitigation fees from new development in amounts calculated to reflect new development's proportional share of the actual or estimated costs of transportation improvements that are necessary to mitigate transportation impacts within the Discovery Bay AOB, as specified in the Development Program Report and the Nexus Study.

BACKGROUND:

A. INTRODUCTION: One of the objectives of the County General Plan is to connect new development directly to the provision of community facilities necessary to serve that development. In other words, development cannot be allowed to occur unless a mechanism is in place to provide the funding for the infrastructure necessary to serve that development. Imposing transportation mitigation fees on new development is a means of raising revenue to construct road improvements to serve new developments. Requiring that all new development pay a transportation mitigation fee ensures that new development pays its proportional share of the transportation improvements that need to be constructed to alleviate traffic impacts attributable to that development.

B. HISTORY AND PURPOSE OF DISCOVERY BAY AOB: On September 18, 1979, the Board adopted Resolution No. 79/946, to establish the State Route 4 Area of Benefit – a development fee program to raise revenue for transportation improvements within the area that now includes Discovery Bay, pursuant to Government Code section 66484. In 1987, the Board adopted Ordinance No. 87-96 to (1) adjust the boundaries of the area of benefit, (2) rename the area of benefit the "Discovery Bay Area of Benefit" ("Discovery Bay AOB"), and (3) adjust transportation mitigation fees imposed on new development within the area of benefit. In 1992, the Board of Supervisors adopted Ordinance No. 92-80, to adjust transportation mitigation fees imposed on new development within the Discovery Bay AOB. Most recently, on July 22, 1997, the Board adopted Ordinance No. 97-27, to reestablish the Discovery Bay AOB, and to adjust transportation mitigation fees imposed on new development within the area of benefit. Transportation mitigation fees imposed on new development in the Discovery Bay AOB have not been adjusted by this Board since Ordinance No. 97-27 was adopted.

C. PROPOSED CHANGES TO FEE PROGRAM: In recent years, the development potential and traffic circulation needs have changed within the Discovery Bay AOB. These changes, along with population growth and new estimated potential growth, have prompted an update to the Discovery Bay AOB program, resulting in an amended project list, and some administrative modifications, as discussed below.

1. New Project List: County staff and consultants have identified transportation projects that are needed to serve development within the Discovery Bay AOB through 2040. These projects have been included on a new project list, attached as Exhibit C to the April 2018 Development Program Report ("2018 Development Program Report"). The new project list includes one carry-over project from the previous project list, which is to improve Byron Highway in the vicinity of Byron Elementary school.

The total estimated cost of the updated list of projects is $32,555,000, of which $6,390,565 is attributable to new development within the Discovery Bay AOB. Detailed estimates of the cost of each of the projects on the project list are included in the April 2018 Nexus Study, Discovery Bay Area of Benefit (the "Nexus Study"), attached as Exhibit D to the 2018 Development Program Report. The cost of the projects attributable to new development will be paid with revenue from transportation mitigation fees imposed on new development within the Discovery Bay AOB. The remaining cost of the projects, attributable to existing development, will be paid from other revenue sources, including but not limited to State or Federal Highway Safety Improvement grant funds, Local Measure J funds, gas tax revenue, and various other grant programs that may become available in the future.

2. Revised Fee Rates: Based on the analysis in the Nexus Study, transportation mitigation fees were calculated to charge new development for its proportional share of the cost of the projects on the project list in the 2018 Development Program Report. The maximum transportation mitigation fee rates supported by the Nexus Study are set forth in Table 1, below, along with the recommended rates to be adopted by Ordinance 2018-16. It was determined that the program update will implement fee increases that brings the AOB fees in Discovery Bay up to those imposed in surrounding jurisdictions, even though the Nexus Study justifies higher fees. The

proposed fee rates are less than the maximum allowable rates supported by the Nexus Study. However, the recommended fee rates are intended to be at levels that will allow economic growth to continue. On January 1, 2019, and on each January 1st thereafter, each of the fees in Table 1 will automatically increase or decrease by a percentage equal to the percentage change, if any, in the Engineering News-Record Construction Cost Index for the San Francisco Bay Area for the 12-month period ending September 30 of the prior year.

Table 1: Discovery Bay AOB Fee Rates

| Land Use Category | Maximum Fees Supported by Nexus Study | Fees to be Adopted |
|---|---|---|
| Single-Family | $42,831 / du | $9,244 / du |
| Multi-Family | $26,292 / du | $5,675 / du |
| Commercial/Retail | $60.78 / sf | $9.11 / sf |
| Office | $49.16 / sf | $7.37 / sf |
| Industrial | $39.00/ sf | $5.85 / sf |
| Other | $42,831 / due | $9,244 / due |

Note: du = dwelling unit; sf = square foot; due = dwelling unit equivalent

The total fees required to be paid by a new development project applicant will be calculated based on the number of dwelling units (residential), square feet (commercial, office, industrial), or dwelling-unit-equivalents (other) attributable to that development multiplied by the applicable fee rate in Table 1. The fee for the expansion of an existing development will be calculated by determining the number of dwelling units, square feet, or dwelling-unit-equivalents attributable only to the expansion.

The fees to be paid by each new development will be collected at the time a building permit is issued for the development, in accordance with Ordinance Code Chapter 913-4. Fee revenue will be deposited in the fund for the Discovery Bay AOB – Trust Fund No. 1390 – and used only for the transportation improvements identified in the 2018 Development Program Report.

3. Use of Existing Fee Revenues: There is currently an approximate balance of $240,760 in the account for the Discovery Bay AOB. Those funds were collected to fund projects on the previous project list. There are limitations on how development impact fee revenues may be spent. By law, the existing revenue balance cannot be spent on any of the new projects on the new project list. Because of these restrictions, the existing fund balance of $240,760 will be allocated to the Byron Highway Improvements at Byron Elementary School (currently named Excelsior Middle School) project, which is a carry-over project from the previous project list.

4. The Discovery Bay Community Service District has requested that updates to the AOB program implemented after 2018 consider merging the area referred to as Discovery Bay West into the Discovery Bay AOB boundary. No actions by the Board are currently required. This policy decision may be revisited by the Board at a later update to the Discovery Bay AOB program.

D. RESOLUTION NO. 2018/182: Pursuant to Government Code sections 66484 subdivision (a)(3), and 66484.7, subdivision (a)(3), a resolution must be adopted by the Board that incorporates a description of the boundaries of the area of benefit, the costs, whether actual or estimated, and the method of fee apportionment established at the hearing.

The 2018 Development Program Report sets forth the boundaries of the Discovery Bay AOB, the list of projects and their estimated costs, the method of fee apportionment, and nexus findings. Approval of Resolution No. 2018/182 is required to comply with the above legal requirements by adopting and incorporating the facts and findings contained in the 2018 Development Program Report, and the Nexus Study attached to the report.

E. ORDINANCE NO. 2018-16:
To adjust the Discovery Bay AOB fees to generate revenue to fund the transportation improvements described herein, the Board of Supervisors needs to adopt an ordinance that includes the "nexus" findings required by Government Code section 66001. The ordinance also must include the specific information required by Government Code sections 66484 and 66484.7. Ordinance No. 2018-16 includes the information and findings required by those statutes.

Adoption of Ordinance No. 2018-16 will repeal Ordinance No. 97-27 and impose new transportation mitigation fees on new development within the Discovery Bay AOB. The ordinance includes provisions for fee reductions for affordable and inclusionary housing, senior housing, and congregate care facilities. Revenue from the fees will fund the transportation projects necessary to serve transportation demands within the Discovery Bay AOB through 2040. Staff recommends that the Board adopt Ordinance No. 2018-16.

Notice of this hearing was given in accordance with Government Code sections 6061, 65091, 54986, 66484, and Ordinance Code Section 913-6.014.

F. ADMINISTRATIVE FEE: In addition to the transportation mitigation fee imposed on a new development project, the County will assess an administrative fee equal to 2% of that transportation mitigation fee. This additional fee will be used to cover staff time for fee collection, accounting, technical support to the community groups, traffic advisory committees and other administrative tasks.

G. CEQA FINDINGS: These actions are covered by the general rule that the California Environmental Quality Act (CEQA) applies only to activities that have the potential to cause a significant effect on the environment. It can be seen with certainty that there is no possibility that the activity in question may have a significant effect on the environment. The implementation and imposition of fees has no associated environmental impacts. Therefore, this activity is exempt from the requirements of CEQA pursuant to Section 15061(b)(3) of the CEQA Guidelines. The future implementation of the transportation improvement projects to be funded with transportation mitigation fee revenue, however, may have associated project-specific impacts, and such impacts will be evaluated under CEQA as each project is planned and implemented.

For the reasons specified above, Public Works Department staff recommends that the Board take each of the recommended actions listed in this board order, to adjust the transportation mitigation fees that are imposed on new development within the Discovery Bay AOB.

CONSEQUENCE OF NEGATIVE ACTION:
Failure to adopt Ordinance No. 2018-16 to adjust fees in the Discovery Bay Area of Benefit, reestablish the boundaries, and update the proposed project list of the area of benefit will result in new development not paying its proportional share of the transportation improvements needed to serve development within the AOB through 2040, and projects needed to satisfy transportation demands within the AOB could not be funded under the existing AOB program.

ATTACHMENTS

Resolution No. 2018/182
Nexus Study
CEQA
Final Ordinance 2018-16
DPR Discovery Bay AOB

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/182**

IN THE MATTER OF the adoption of Contra Costa County Ordinance No. 2018-16, adjusting the fees for the Discovery Bay Area of Benefit.

WHEREAS, the Board of Supervisors conducted a public hearing on May 22, 2018, to consider the adoption of Contra Costa County Ordinance No. 2018-16, to adjust transportation mitigation fees and update the project list for the Discovery Bay Area of Benefit; and

WHEREAS, the Board of Supervisors at said hearing reestablished the boundaries of the Discovery Bay Area of Benefit, the costs of the proposed improvements, and the method of fee apportionment, as set forth in the April 2018, Development Program Report for the Discovery Bay Area of Benefit ("Development Program Report"), attached hereto as Exhibit 1; and

WHEREAS, Government Code sections 66484 and 66484.7 require a resolution incorporating a description of the area of benefit boundaries, costs, and method of fee apportionment to be recorded by the governing body conducting the hearing; and

WHEREAS, the April 2018, "Nexus Study, Discovery Bay Area of Benefit" ("Nexus Study"), which is attached as Exhibit D to the Development Program Report, sets forth the nexus findings required by the Mitigation Fee Act (Gov. Code. § 66000 et seq.);

NOW THEREFORE, it is resolved that the Board of Supervisors hereby:

A. ADOPTS the Development Program Report attached hereto as Exhibit 1, including the Nexus Study attached as Exhibit D to the Development Program Report.

B. INCORPORATES herein by reference the following, which were established at the hearing described above:

1. The boundaries of the Discovery Bay Area of Benefit, as more particularly described in the legal description attached as Exhibit A to the Development Program Report, and as depicted in the map attached as Exhibit B to the Development Program Report.
2. The estimated costs of the intersection and pedestrian improvements to be funded with revenue from the Discovery Bay Area of Benefit fees, as more particularly set forth in Exhibit C to the Development Program Report; and
3. The method of apportionment of the Discovery Bay Area of Benefit fees, as more particularly described in the Development Program Report, and in the Nexus Study attached as Exhibit D to the Development Program Report.

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**Contact: Mary Halle, 925.313.2327**

**cc:**

# Nexus Study Discovery Bay Area of Benefit

Prepared By:

DKS

in association with Urban Economics

Prepared For:
Contra Costa County
Public Works Department

April 2018

# Nexus Study
# Discovery Bay Area of Benefit Program

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# Table of Contents

1. Introduction ..... 1
1.1 Background and Purpose ..... 1
1.2 Discovery Bay AOB ..... 1
2. Evaluation of Current AOB Program ..... 2
3. Determination of AOB Development Potential ..... 4
4. Transportation Needs Analysis ..... 5
4.1 Traffic Count Data ..... 6
4.3 Travel Demand Forecasting ..... 6
4.4 Roadway/Intersection Analysis ..... 6
4.5 Pedestrian and Bicycle Infrastructure Needs Analysis ..... 10
4.6 Selected Project List ..... 10
5. Improvement Cost Estimates ..... 11
6. Basis for Allocating Costs to New Development ..... 14
6.1 Improvements to Meet County LOS Standards ..... 14
6.2 Widening to Meet Roadway Pavement Width Standards ..... 14
6.3 Pedestrian and Bicycle Infrastructure Improvements ..... 15
6.4 Summary of Cost Allocation ..... 17
7. Method for Calculating Fees ..... 19
8. Nexus Analysis ..... 20
8.1 Purpose of fee ..... 21
8.2 Use of Fees ..... 21
8.3 Relationship between use of Fees and Type of Development ..... 21
8.4 Relationship between Need for Facility and Type of Development ..... 21
8.5 Relationship between Amount of Fees and the Cost of Facility Attributed to Development upon which Fee is Imposed ..... 22
8.6 Current AOB Fund Balance ..... 22

## Appendices

Appendix A - Cost Estimates for Selected Projects in Discovery Bay AOB

## List of Tables

Table 1: 1992 Project List for Discovery Bay AOB Program ..... 2
Table 2: Summary of Estimated Development 2010 to 2040 Growth ..... 5
Table 3: Intersection Level of Service Analysis ..... 7
Table 4: Roadway Segment Level of Service Analysis ..... 7
Table 5: Two Lane Rural/Lane Widths Contra Costa Public Works Department Standard Plans ..... 10
Table 6: Selected Discovery Bay AOB Project List ..... 12
Table 7: Cost Allocation Analysis for Discovery Bay AOB Project List - Level of Service Improvements ..... 16
Table 8: Cost Allocation Analysis for Discovery Bay AOB Project List – Pedestrian and Bicycle Infrastructure Improvements ..... 17
Table 9: Allocation of Project Costs to Discovery Bay AOB Program ..... 18
Table 10: Dwelling Unit Equivalent (DUE) Rates ..... 19
Table 11: Growth in DUE ..... 20
Table 12: Nexus Based Fee Rates ..... 20

## List of Figures

Figure 1: Discovery Bay AOB Boundary ..... 3
Figure 2: Existing Levels of Service in Discovery Bay AOB ..... 8
Figure 3: 2040 Levels of Service in Discovery Bay AOB ..... 9
Figure 4: Selected Projects for Discovery Bay AOB Program ..... 13

# 1. Introduction

## 1.1 Background and Purpose

The purpose of the Discovery Bay Area of Benefit (AOB) Program is to help fund improvements to the County's roadway, bicycle and pedestrian facilities needed to accommodate travel demand generated by new land development within the unincorporated portion of this AOB.

Contra Costa County has various methods for financing transportation improvements. One of the methods is the AOB Program. The AOB Program collects funds from new development in the unincorporated portion of the AOB to finance a portion of the transportation improvements associated with travel demand generated by that development. Fees are differentiated by type of development in relationship to their relative impacts on the transportation system. The intent of the AOB program is to provide an equitable means of ensuring that future development contributes its proportional share of the cost of transportation improvements, so that the County's General Plan Circulation policies and quality of life can be maintained.

One of the objectives of the County General Plan is to relate new development directly to the provision of community facilities necessary to serve that new development. Accordingly, there is a mechanism in place to provide the funding for the infrastructure necessary to serve that development. The Discovery Bay AOB Program is a fee mechanism providing funds to construct transportation improvements to serve new residential, commercial and industrial development within the AOB. Requiring that all new development pay a transportation improvement fee ensures that it participates fairly in the cost of improving the transportation system. This Program applies only to new development within the unincorporated portions of Discovery Bay.

Each new development project or expansion of an existing development will generate new travel demand for all travel modes. Where the existing transportation system is inadequate to meet future needs based on new development, improvements are required to meet the new demand. The purpose of this development program is to determine improvements that will ultimately be needed to serve estimated future development and to require the developers to pay a fee to fund its proportional share of the cost of these improvements. Because the fee is based on the relative impact of new development on the transportation system and the costs of the necessary improvements to mitigate this impact, the fee amount is roughly proportional to the development impact. This Nexus Study establishes this impact and mitigation relationship to new development and the basis for the fee amount.

## 1.2 Discovery Bay AOB

On September 18, 1979, the Board of Supervisors passed a resolution forming the State Route 4 Area of Benefit. At the time, there were many vacant parcels in the area with potential for residential development, and the existing transportation system was inadequate to handle the additional traffic generated from the projected development. In 1987, the area of benefit was renamed as the "Discovery Bay Area of Benefit". In 1987, 1992, and 1997 the Area of Benefit program was revised to reflect the changing needs of the area. Over the past 36 years, Area of Benefit fees have helped pay for improvements to Byron Highway.

The Discovery Bay area has, in recent years, experienced changes in the area's circulation needs and development potential. These changes have prompted another revision to the Area of Benefit program, resulting in a new project list and fee schedule.

The purpose of this Nexus Study is to provide the technical basis for a comprehensive update of the Discovery Bay AOB Program. The focus of the updated program is to support a multi-modal transportation system in the Discovery Bay AOB that serves the expected future demand based on changes in regional

and local land use projections, planned and approved development projects, and associated changes to capital improvements and updated cost estimates.

This report documents the analytical approach for determining the nexus between the fees, the local impact created by new development in the Discovery Bay AOB, and the transportation improvements to be funded with fee revenues to mitigate transportation impacts. A traffic and fair-share cost analysis was conducted to equitably distribute the costs of the necessary improvements to developments that cause the impacts, in accordance with the provisions of the Mitigation Fee Act.[1] The most up-to-date versions of the analytical tools and techniques available at the time this study commenced were used to ensure the highest level of consistency with current standards.

The Discovery Bay AOB boundary, which was established in 1985, is shown in **Figure 1.**

## 2. Evaluation of Current AOB Program

The current Discovery Bay AOB Program was last updated in 1992. The current Discovery Bay AOB Program project list, shown in **Table 1**, has three projects, which were estimated in 1992 to cost about $1.2 million, with about $427,000 to be funded by the AOB Program. The 2018 update of the Discovery Bay AOB Program included a new needs analysis to update this project list along with new project cost estimates, which are described in **Sections 3, 4 and 5** of this Nexus Study.

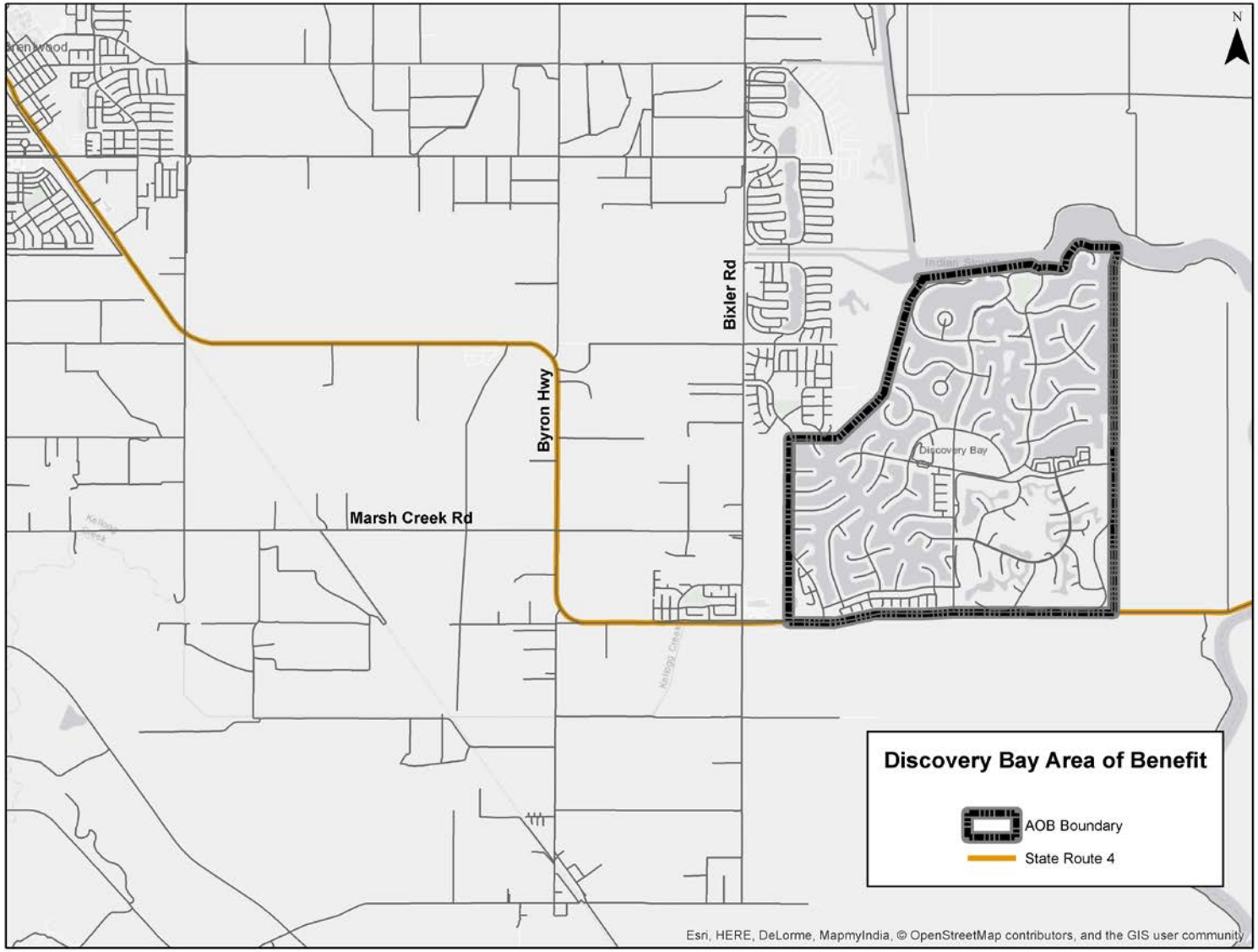
Table 1: 1992 Project List for Discovery Bay AOB Program

| Project/Roadway | Project Description | Estimated Project Cost (1992 Dollars) | Project Cost to be Funded by AOB (1992 Dollars) |
|---|---|---|---|
| 1 Byron Highway | Construction of improvements at Byron Elementary School | $217,000 | $72,350 |
| 2 Byron Highway, at SR-4 (Stage 1) | Construct signal and interim intersection improvements | $420,000 | $140,000 |
| 3 Byron Highway, at SR-4 (Stage 2) | Construction of ultimate intersection improvements | $634,000 | $214,000 |
| | **Total** | **$1,271,000** | **$426,790** |

Source: Development Program Report for Discovery Bay AOB, 1992

[1] California Government Code, Sections 66000 through 66026.

Figure 1: Discovery Bay AOB Boundary



The current AOB Program uses "peak hour factors" to allocate trips by land use types based on Institute of Transportation Engineers (ITE) trip generation rate estimates for the evening (PM) peak hour based on the amount of traffic coming in and out of development's entrances. This Nexus Study refines this approach to reflect current best practices for impact fee programs when estimating the impact of new development on the transportation system.

The use of simple trip generation rates tends to over-estimate the traffic impact of retail development on the overall roadway system. The average length of trips coming in and out of a new residential development is longer than trips coming in and out of a retail development. Furthermore, studies show that about 25 to 50 percent of the trips that will go in and out of a new retail development will already be traveling on roadways near that development, and thus are "pass-by" or "diverted" trips, not "new trips" to the surrounding roadway system. All of the trips going to and from a new residential unit are "new trips".

To integrate best practices for the current fees, the updated Discovery Bay AOB Program will instead use estimates of vehicle-miles of travel (VMT) added by new development. The VMT rates are calculated by multiplying the trip rate for a land use type by its average trip length and also use percentages to reflect "pass-by trips" versus "new trips." The calculation of fee rates based on this methodology is discussed in **Section 4** of this study.

## 3. Determination of AOB Development Potential

The transportation needs analysis and allocation of improvement costs for the Discovery Bay AOB is based on the countywide travel demand model developed by the Contra Costa Transportation Agency (CCTA) using a 2040 horizon year. The calculation of fees is based on the following general land use categories and associated measurement units that are used as a basis for the land use inputs in CCTA's travel demand model:

| Land Use Type | Units |
|---|---|
| Single-Family | Dwelling units (DU) |
| Multi-Family | Dwelling units (DU) |
| Commercial/Retail | Jobs |
| Office | Jobs |
| Industrial | Jobs |

CCTA's latest land use estimates of existing conditions and 2040 forecasts of new development by Traffic Analysis Zones (TAZs) in the AOB were summarized and reviewed with County Planning staff. Based on that review, adjustments were made and the resulting growth estimate for the AOB is summarized in **Table 2**. The table converts the estimates of jobs for nonresidential land uses used by the CCTA's model to estimates of building square feet used in the AOB fee program.

Table 2: Summary of Estimated Development 2010 to 2040 Growth

| Land Use Category | Units | Due per Unit | Units | | | DUEs | | |
|---|---|---|---|---|---|---|---|---|
| | | | 2010 | 2040 | Growth | 2010 | 2040 | Growth |
| Single-Family | DU | 1.00 | 2,960 | 3,010 | 50 | 2,960 | 3010 | 50 |
| Multi-family | DU | 0.61 | 14 | 94 | 80 | 9 | 58 | 49 |
| **Total** | **DU** | | **2,974** | **3,104** | **130** | **2,969** | **3,068** | **99** |
| Retail | Jobs | | 92 | 162 | 70 | | | |
| Office | Jobs | | 540 | 558 | 18 | | | |
| Industrial | Jobs | | 44 | 45 | 1 | | | |
| **Total** | **Jobs** | | **676** | **765** | **89** | | | |
| Retail | 1,000 sq. ft. | 0.00142 | 46 | 81 | 35 | 65 | 115 | 50 |
| Office | 1,000 sq. ft. | 0.00115 | 149 | 153 | 5 | 171 | 176 | 6 |
| Industrial | 1,000 sq. ft. | 0.00091 | 26.4 | 27 | 0.6 | 24 | 25 | 1 |
| **Total** | **1,000 sq. ft.** | | **221** | **261** | **41** | **260** | **316** | **56** |
| | | | | | **Total:** | **3,229** | **3,383** | **155** |
| | | | | | **Proportion of DUE Growth to the Total DUEs in 2040:** | 155/3383 = **0.0458** | | |

Source: DKS Associates, 2018

**Notes:**

| Land Use | Assumed Square Feet per Job |
|---|---|
| Retail | 500 |
| Office | 275 |
| Industrial | 600 |

## 4. Transportation Needs Analysis

Defining the transportation needs and project list for the Discovery Bay AOB involved the following steps:

1. Collecting traffic count data (intersections and roadway segments)
2. Identifying existing deficiencies, including level of service (LOS) and roadway standard deficiencies
3. Preparing travel demand forecasts of 2040 conditions
4. Conducting transportation system analysis to identify improvement needs
5. Identifying pedestrian and bicycle facilities/improvements
6. Preparing a draft AOB project list
7. Presenting analysis and findings at a neighborhood outreach meeting to obtain input on the draft project list
8. Finalizing project list

The key technical tasks used to determine the transportation improvements needed to accommodate new development within the AOB and select a project list are described in **Sections 4.1 through 4.6**.

### 4.1 Traffic Count Data

Traffic count data is required to determine existing deficiencies and to support the future year roadway/intersection needs analysis. Traffic counts were collected on weekdays in May 2013 on major roadway segments and intersections within the AOB (see **Tables 3 and 4**).

### 4.2 Existing Deficiencies

The technical methods and standards used to identify the impact of new development on roadways and intersections are described in **Section 4.4** below. The same methods and standards are used to identify existing deficiencies in the roadway network. When an existing deficiency is identified, it affects how the cost of an improvement is allocated to new development. New development can only fund its fair share of the total cost of an improvement not associated with correcting an existing deficiency (see **Section 6**).

### 4.3 Travel Demand Forecasting

The transportation needs analysis and allocation of improvement costs were based on CCTA's travel demand model using a 2040 horizon year and the development assumptions summarized in **Table 2**. Before its use, the output of the CCTA travel demand model for existing conditions was compared to existing traffic count data in the AOB area and some adjustments were made to the model within and near the AOB to improve its accuracy and detail.

### 4.4 Roadway/Intersection Analysis

This section describes the analysis used to determine the roadway improvements needed to accommodate new development within the AOB.

**Signal Warrants**

Traffic signal warrants are a series of standards that provide guidelines for determining if a traffic signal is appropriate. A planning-level signal warrant analysis based on traffic volumes was conducted to determine if the traffic signals would be warranted at study intersections under existing and future (2040) conditions. If one or more of the signal warrants are met, signalization of the intersection may be recommended.

**Level of Service**

The needs analysis for the Discovery Bay AOB Program used the level of service (LOS) standards in the County's General Plan, which has different standards for different areas, based on land use types. LOS is calculated separately for intersections and roadway segments. Intersection LOS analysis is based on average vehicle delay and analysis methods recommended by the Highway Capacity Manual (Transportation Research Board, 2010). Roadway segment LOS analysis compares traffic levels with roadway segment capacities determined by the number of travel lanes and the roadway type. The Discovery Bay area is designated in the Contra Costa General Plan for low and medium density residential with supporting services. For the purpose of identifying the LOS standard, the area is considered "Suburban," and the LOS standard is Low D (less than 45 seconds delay per vehicle for a signalized intersection, less than 30 seconds delay per vehicle for an unsignalized intersection and less than 85 seconds delay per vehicle for a roadway segment). The exception is SR-4, which is designated as a Route of Regional Significance in the East County Action Plan. The LOS standard for SR-4 is High D (less than 55 seconds delay per vehicle for a signalized intersection, less than 35 seconds delay per vehicle for an unsignalized intersection and less than 90 seconds delay per vehicle). The intersection and roadway segment LOS analysis is summarized in **Tables 3 and 4** as well as **Figures 2 and 3.**

Table 3: Intersection Level of Service Analysis

| | Intersection | Area Type[1] | Control Type | LOS Standard[1] | Delay Standard (seconds) | 2013 | | | | 2040 | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | AM | | PM | | AM | | PM | |
| | | | | | | Delay | LOS | Delay | LOS | Delay | LOS | Delay | LOS |
| 1 | SR 4 & Newport Dr [1,2] | Suburban | TWSC | Low D | ≤ 30 | 13.6 | B | 12.2 | B | **> 80** | **F** | **> 80** | **F** |
| 2 | Discovery Bay Blvd & SR 4 [2] | Suburban | Signal | High D | ≤ 55 | **64.4** | **E** | **66.8** | **E** | **> 80** | **F** | **> 80** | **F** |
| 3 | Discovery Bay Blvd & Clipper Dr [1] | Suburban | TWSC | Low D | ≤ 30 | **39.6** | **E** | 21.6 | C | **> 80** | **F** | **58.4** | **F** |
| 4 | Discovery Bay Blvd & Spinnaker Wy/Clubhouse Dr | Suburban | AWSC | Low D | ≤ 30 | 15.1 | C | 12.9 | B | **35.4** | **E** | **33.6** | **D** |
| 5 | Discovery Bay Blvd & Sand Point Rd/Willow Lake Rd | Suburban | AWSC | Low D | ≤ 30 | 18.3 | C | 11.7 | B | **49.2** | **E** | **33.8** | **D** |

[1] Minor stop-controlled LOS based on worst approach
[2]Intersections is part of a Route of Regional Significance
LOS highlighted in gray does not meet County's standard
Source: DKS Associates, 2018

Table 4: Roadway Segment Level of Service Analysis

| Roadway | Location | Area Type[2] | LOS Standard[2] | V/C Ratio Standard[2] | 2013 | | | | 2040 | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | AM Peak Hour | | PM Peak Hour | | AM Peak Hour | | PM Peak Hour | |
| | | | | | V/C | LOS Range | V/C | LOS Range | V/C | LOS Range | V/C | LOS Range |
| SR-4 [1] | Between Byron Hwy & Discovery Bay Blvd | Suburban | High D | ≤ 0.90 | 0.79 | A-C | 0.88 | High D | **1.49** | **F** | **1.53** | **F** |
| Discovery Bay Blvd | Between SR 4 & Clipper Dr | Suburban | Low D | ≤ 0.85 | 0.29 | A-C | 0.30 | A-C | 0.45 | A-C | 0.46 | A-C |
| | Between Clipper Dr & Clubhouse Dr | Suburban | Low D | ≤ 0.85 | 0.33 | A-C | 0.33 | A-C | 0.48 | A-C | 0.48 | A-C |
| | Between Sand Point Rd & Spinnaker Wy | Suburban | Low D | ≤ 0.85 | 0.28 | A-C | 0.27 | A-C | 0.40 | A-C | 0.39 | A-C |
| | North of Sand Point Rd | Suburban | Low D | ≤ 0.85 | 0.12 | A-C | 0.13 | A-C | 0.19 | A-C | 0.22 | A-C |

[1] SR-4 is a Route of Regional Significance and has a level of service standard of High D
[2]Contra Costa County General Plan, 2005
LOS highlighted in gray does not meet County's standard
Source: DKS Associates, 2018

Figure 2: Existing Levels of Service in Discovery Bay AOB

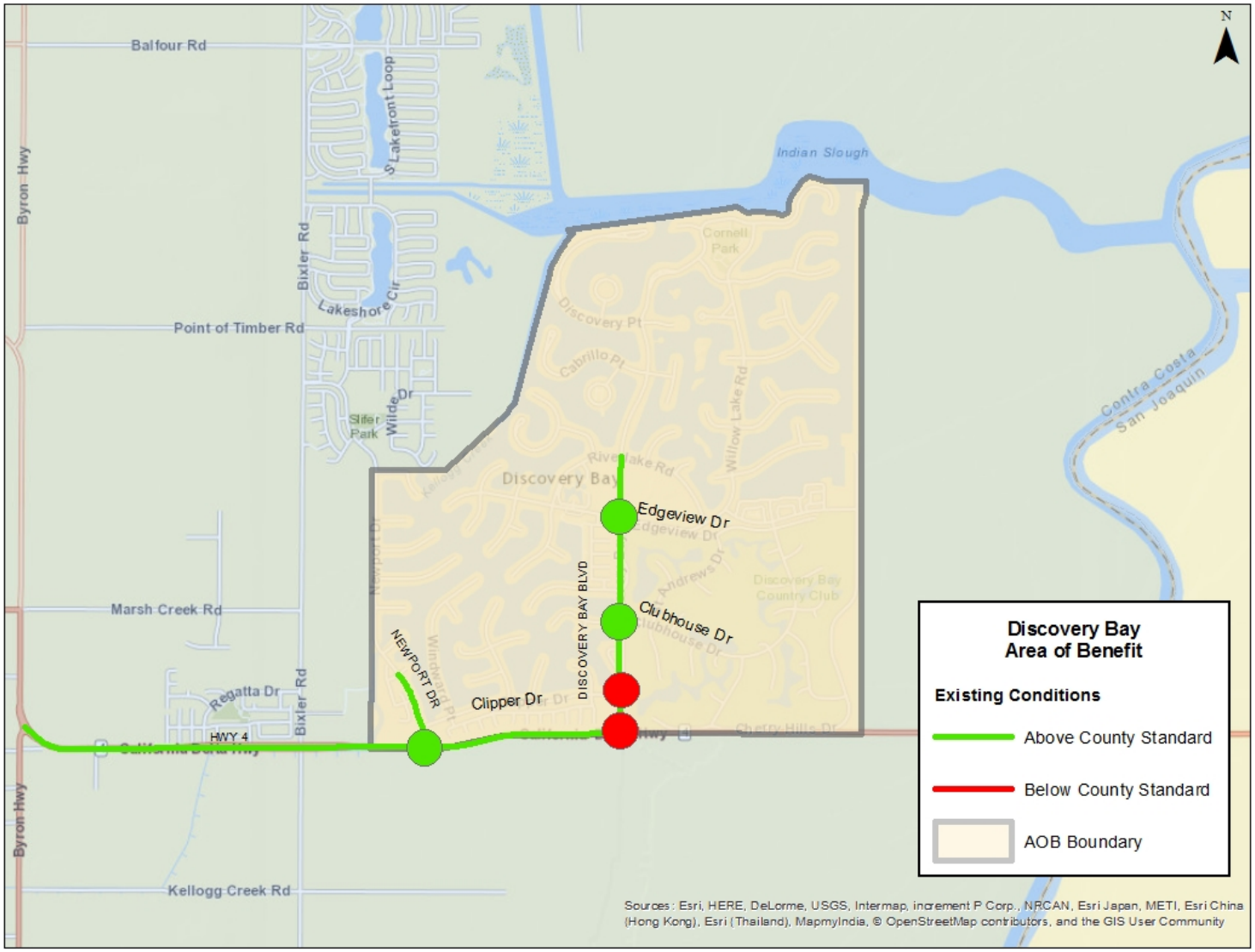


Figure 3: 2040 Levels of Service in Discovery Bay AOB

Roadway Pavement Width Standards

Many of the County's two-lane roads within the Discovery Bay AOB will not have LOS problems but volume increases on narrow roads within the AOB is a safety issue that should be addressed in the AOB Program. Providing adequate roadway width including adding shoulders to two-lane roadways would increase safety as traffic increases and shoulders would provide a bicycle lane/walkway. FHWA recommends that rural roadways that carry more than 2,000 average daily vehicles (ADT) should have 5 to 6-foot wide shoulders. Contra Costa County's standards for two-lane roadways, shown in **Table 5**, call for shoulders on roadways with more than 1,000 ADT.

Table 5: Two Lane Rural/Lane Widths Contra Costa Public Works Department Standard Plans

| Average Daily Traffic | Shoulder Backing (ft.) | Shoulder (ft.) | Lane (ft.) |
|---|---|---|---|
| < 250 | 0 | 1 | 11 |
| < 400 | 2 | 1 | 11 |
| < 1,000 | 2 | 4 | 12 |
| < 3,000 | 2 | 5 | 12 |
| < 6,000 | 2 | 6 | 12 |
| > 6,000 | 0 | 8 | 12 |
| Source: Contra Costa County Public Works Department Standard Plans, 2008 | | | |

### 4.5 Pedestrian and Bicycle Infrastructure Needs Analysis

New development also necessitates changes to roadway design that are not geared toward increases in vehicle capacity or improvements to vehicle safety. New development generates non-vehicular trips (pedestrian and bicycle) that will need to be accommodated by improving roadway shoulders to provide bicycle lanes and pedestrian walkways. On roadways that require improvements based on the roadway/intersection analysis described above, pedestrian and bicycle facilities would be implemented to the extent that they are represented in the County's current standard roadway designs.

Pedestrian and bicycle infrastructure improvements may also reduce vehicular congestion by shifting trips from autos to these alternative modes. The County's General Plan has goals to encourage the use of transit (Goal 5-I) and to reduce single-occupant auto commuting and encourage walking and bicycling (Goal 5-J). The General Plan also has policies to encourage all efforts to develop alternative transportation systems to reduce peak period traffic congestion (Policy 5-23) and to encourage the use of alternative forms of transportation, such as pedestrian, bicycle and transit modes in order to provide basic accessibility to those without access to a personal automobile and to help minimize automobile congestion and air pollution.

### 4.6 Selected Project List

A draft list of capital improvements to the transportation system in the AOB Programs was prepared. The project list is focused on the major transportation system in the County's General Plan (see Sections 5.6 and 5.8 of the General Plan, which describe the major roadway, transit, bikeway and pedestrian facilities). This list generally consists of the following types of projects:

1. Installing traffic signals at intersections that meet warrants for their installation
2. Adding turn lanes at intersections to meet LOS standards
3. Adding lanes on roadway segments to meet LOS standards
4. Upgrading roadways to be consistent with County design standards
5. Making improvements to improve safety for all modes of transportation
6. Providing appropriate pedestrian and bicyclist facility improvements

The draft project list was prepared to meet the needs defined above and then was presented to the Discovery Bay Community Service District Board of Directors who approved the list shown in **Table 6** and **Figure 4.**

## 5. Improvement Cost Estimates

Planning-level cost estimates were prepared based on conceptual designs for each project (**Table 6**). The estimates for roadway segment improvements are based on implementing the County's design standards (for roadway cross-sections) by facility type and number of lanes. The cost estimates reflect the known issues, such as creek crossings, relocation of major known utilities, etc. Typical roadway excavation quantities were used except in areas where significant excavation was identified, including cut and fill of embankments. The cost estimating does not reflect geotechnical or survey support information. Thus unknowns (such as rock excavation, removal of unsuitable material, relocation of unseen utilities, etc.) were assumed in a project contingency percentage.

The cost estimates include the following appropriate percentages that are key elements in the implementation of each project:

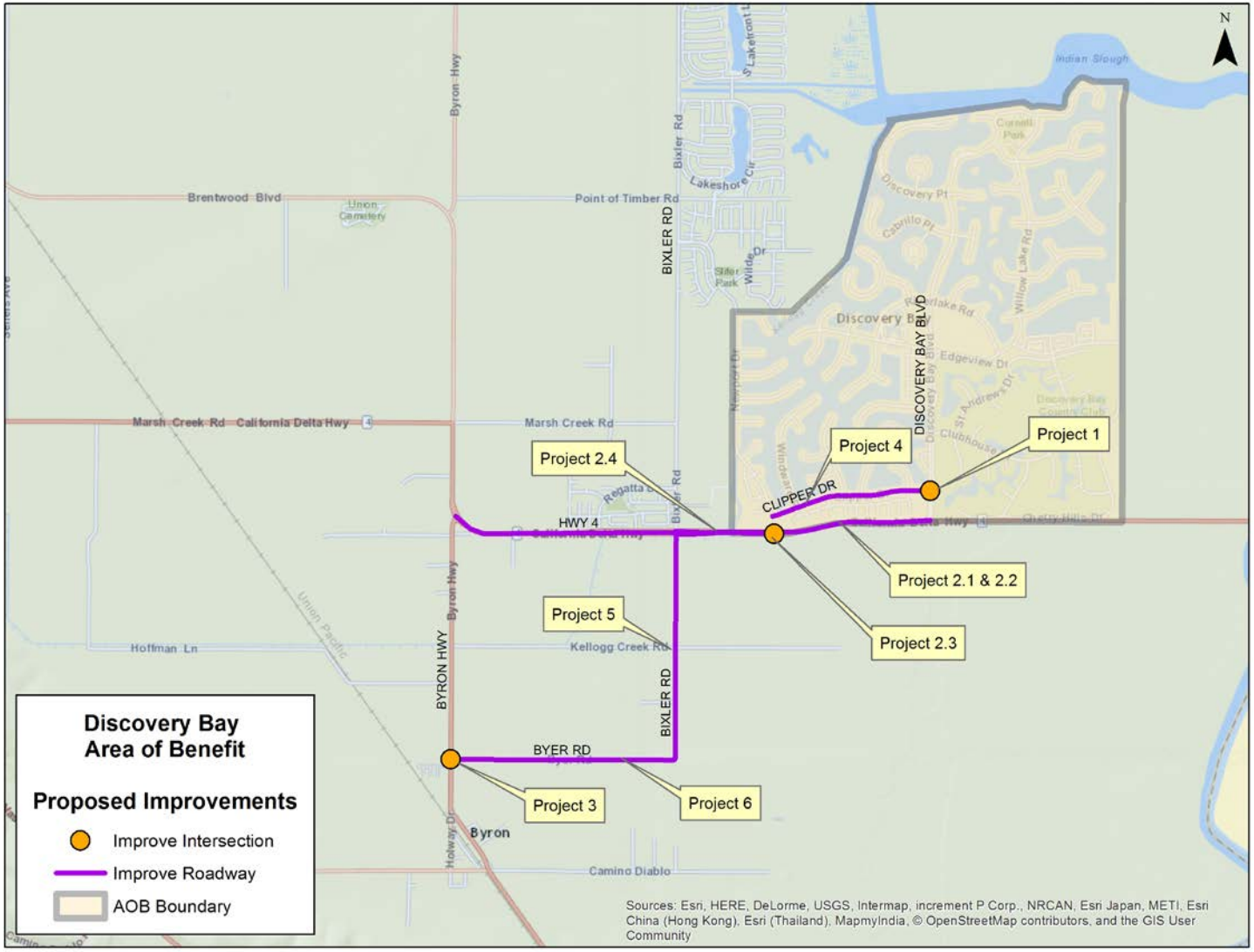
- Project contingencies,
- Survey, design and construction management,
- Environmental mitigation,
- Right-of-way acquisition

The cost estimates for each of the selected projects for funding by the Discovery Bay AOB, shown in **Table 6** are provided in **Appendix A**.

Table 6: Selected Discovery Bay AOB Project List

| Roadway | Project | Location | Recommended Project | Basis for Recommendation |
|---|---|---|---|---|
| Discovery Bay Boulevard | 1 | Intersection with Clipper Drive | Intersection improvement | Contra Costa County General Plan LOS Standards |
| SR-4 | 2.1 | Between Bixler Road and Discovery Bay Boulevard | Widening and provide pedestrian and bicycle improvements | Contra Costa County General Plan LOS Standards, Countywide Bicycle and Pedestrian Plan |
| | 2.2 | Between Bixler Road and Discovery Bay Boulevard | Rebuild bridge to accommodate four lanes | Contra Costa County General Plan LOS Standards |
| | 2.3 | Intersection with Newport Drive | Intersection improvement | Contra Costa County General Plan LOS Standards |
| | 2.4 | Between Byron Highway and Bixler Road | Widen roadway | Contra Costa County General Plan LOS Standards |
| Byron Highway | 3 | Intersection with Byer Road | School safety improvements | Safety Improvement |
| Clipper Drive | 4 | Between Newport Drive and Discovery Bay Boulevard | Add traffic calming measures | CSD Meeting Feedback |
| Bixler Road | 5 | Between SR-4 and Byer Road | Complete Street Improvements | CSD Meeting Feedback |
| Byer Road | 6 | Between Bixler Road and Byron Highway | Complete Street Improvements | CSD Meeting Feedback |
| Source: DKS Associates, 2018 | | | | |

Figure 4: Selected Projects for Discovery Bay AOB Program



# 6. Basis for Allocating Costs to New Development

This section describes the process used to allocate transportation improvement costs to new development in the AOB and the estimated transportation mitigation fees that result from this analysis.

The allocation of costs of roadway and intersection improvements in the AOB is based on answering the following questions:

- Is there an existing deficiency?
- Would the improvement project be required without new development?
- Who uses the roadway/intersection?

The allocation of costs is based on estimates of who will use the roadways or intersections that require improvements based on 2040 traffic forecasts. The allocation of improvement costs is based on the percentage of trips on the roadways and intersections from 1) existing development, 2) new development in the AOB and 3) new development outside the AOB (referred to as through traffic). An increase in through traffic represents an increase in trips that both start and end outside the AOB and pass through the AOB. **Table 7** summarizes the estimated percentages for the selected AOB project list. The methods used to allocate costs are described below.

## 6.1 Improvements to Meet County LOS Standards

Costs for improvements needed to address LOS impacts (either intersection or roadway LOS) are allocated to new development in the Discovery Bay AOB using one of three methods:

1. For a roadway segment or intersection that is currently operating at an acceptable LOS but would operate at an unacceptable LOS in 2040, the entire cost of improving that segment or intersection is allocated to new development if there is no increase in through traffic. This method did not apply to any improvements on the Discovery Bay project list.
2. If the current and future LOS conditions are the same as described under #1 but there is an increase in the amount of through traffic then new development within the AOB is not allocated the full cost of the improvement. Instead, new development within the AOB is allocated a percentage of costs based the number of new trips on a roadway segment or intersection that have either their origin or destination within the AOB divided by the total amount of trips from new development. The remaining percent of costs, reflecting new trips that have neither their origin nor destination in the AOB, are not allocated to development in the AOB. This method was used to allocate costs for improvements on SR-4.
3. For a roadway segment or intersection that currently does not meet the County's LOS standards (an existing deficiency), the percent cost share for new development in the AOB is equal to the number of new trips on a roadway segment that have either their origin or destination within the AOB divided by all trips on that roadway, both from existing and new development (including through traffic). This method was used to allocate costs for improvements on Discovery Bay Boulevard and Byron Highway.

## 6.2 Widening to Meet Roadway Pavement Width Standards

The allocation of costs to improve roadway to County cross-section standards is similar to the allocation of cost for improvements to address LOS impacts. For a roadway segment that is currently below the traffic volume thresholds shown in **Table 5** but would exceed those thresholds by 2040, the entire cost of improving that segment to the County standard will be allocated to new development. If that roadway has an increase in the amount of through traffic then new development within the AOB is allocated a percentage of costs based on the number of trips associated with new development within the AOB. This method did not apply to any improvements on the Discovery Bay project list.

For a roadway segment that currently has a traffic volume above the volume thresholds in **Table 5** and does not meet the County's applicable cross-section standards (an existing deficiency), the percent cost share for new development in the AOB is equal to the number of new trips on a roadway segment that have either their origin or destination within the AOB divided by all trips on that roadway, both from existing and new development. This method did not apply to any improvements on the Discovery Bay project list.

### 6.3 Pedestrian and Bicycle Infrastructure Improvements

Pedestrian and bicycle improvements in the Discovery Bay AOB are localized improvements serving trips that have their origin or destination within the AOB rather than through trips. Lack of pedestrian and bicycle facilities is an existing deficiency in the AOB; hence the improvements will benefit both existing and future residents. Since the improvements will serve the existing and future pedestrian and bicycle demand, the cost of those projects allocated to new development will equal the new development's proportional share of the total future development (existing plus new development) in the Discovery Bay AOB (measured in Dwelling Unit Equivalents). This method was used to allocate costs for improvements described in **Table 8**.

Table 7: Cost Allocation Analysis for Discovery Bay AOB Project List - Level of Service Improvements

| Roadway | Project | Location | Recommended Project | Existing Conditions | | 2040 Conditions | | Percent of 2040 Volume | | | | Percent of 2013 to 2040 Growth | | Percent Allocated to AOB |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | PM Peak Period Volume[3] | LOS | PM Peak Period Volume[3] | LOS[1] | Existing Local | Local Growth | Existing Through | Through Growth | Local | Through | |
| Discovery Bay Boulevard | 1 | Intersection with Clipper Drive[2] | Intersection improvement | 1,229 | E | 1,791 | F | 68.62 | 31.38 | 0.00 | 0.00 | 100.00 | 0.00 | 31.38 |
| SR-4 | 2.1 | Between Bixler Road and Discovery Bay Boulevard | Widening and providing pedestrian and bicycle improvements | 9,219 | D | 10,309 | F | 66.77 | 3.21 | 22.66 | 7.36 | 30.33 | 69.67 | 30.33 |
| | 2.2 | Between Bixler Road and Discovery Bay Boulevard | Rebuild bridge to accommodate four lanes | 9,219 | D | 10,309 | F | 66.77 | 3.21 | 22.66 | 7.36 | 30.33 | 69.67 | 30.33 |
| | 2.3 | Intersection with Newport Drive[2] | Intersection improvement | 1,686 | B | 3,075 | F | 41.00 | 15.00 | 14.00 | 30.00 | 33.33 | 66.67 | 33.33 |
| | 2.4 | Between Byron Highway and Bixler Road | Widen roadway | 10,177 | D | 11,832 | F | 66.77 | 3.21 | 22.66 | 7.36 | 30.33 | 69.67 | 30.33 |
| Byron Highway | 3 | Intersection with Byer Road | School safety improvements with SB left-turn pocket | 1,047 | A-C | 1,154 | A-C | 43.84 | 2.10 | 46.95 | 7.11 | 22.85 | 77.15 | 2.10 |

[1]LOS without improvement
[2]Based on AM peak hour volumes, sum of approach volumes
[3]4-hour peak period
Source: DKS Associates, 2018

Table 8: Cost Allocation Analysis for Discovery Bay AOB Project List – Pedestrian and Bicycle Infrastructure Improvements

| Roadway | Project | Location | Recommended Project | Percent Allocated to AOB* |
|---|---|---|---|---|
| Clipper Drive | 4 | Between Newport Drive and Discovery Bay Boulevard | Add traffic calming measures | 4.58 |
| Bixler Road | 5 | Between SR-4 and Byer Road | Complete Streets Improvements | 4.58 |
| Byer Road | 6 | Between Bixler Road and Byron Highway | Complete Streets Improvements | 4.58 |

*Percentage allocation to AOB is the proportion of DUE growth to the total DUEs in 2040 (see Table 2).
Source: DKS Associates, 2018

## 6.4 Summary of Cost Allocation

**Table 9** summarizes the allocation of the cost for each of the selected projects that will have funding from the Discovery Bay AOB Program.

The County has various methods for funding transportation improvements within the Discovery Bay AOB boundary. While the Discovery Bay AOB fee program is one method, additional funding will need to be obtained from Federal, State and local grants (such as ATP, SRTS, BTA, etc.) or other sources to fund the cost of the improvements not allocated to new development in the Discovery Bay AOB. On an on-going basis, the County will assess the unconstructed projects on the AOB project list and determine project priorities. As enough funding becomes available from all sources to implement “priority” projects, the County will implement those projects.

Table 9: Allocation of Project Costs to Discovery Bay AOB Program

| Roadway | Project | Location | Recommended Project | Estimated Total Cost | Percent Allocated to AOB | Cost Allocated to AOB |
|---|---|---|---|---|---|---|
| Discovery Bay Boulevard | 1 | Intersection with Clipper Drive | Intersection improvement | $1,910,000 | 31.38 | $599,341 |
| SR-4 | 2.1 | Between Bixler Road and Discovery Bay Boulevard[1] | Widening and providing pedestrian and bicycle improvements | $4,976,000 | 30.33 | $1,509,204 |
| | 2.2 | Between Bixler Road and Discovery Bay Boulevard | Rebuild bridge to accommodate four lanes | $8,201,000 | 30.33 | $2,487,336 |
| | 2.3 | Intersection with Newport Drive | Intersection improvement | $731,000 | 33.33 | $243,667 |
| | 2.4 | Between Byron Highway and Regatta Drive | Widen roadway | $4,096,000 | 30.33 | $1,242,303 |
| Byron Highway | 3 | Intersection with Byer Road | School safety improvements | $1,198,000 | 22.85 | $273,738 |
| Clipper Drive | 4 | Between Newport Drive and Discovery Bay Boulevard | Add traffic calming measures | $224,000 | 4.58 | $10,262 |
| Bixler Road | 5 | Between SR-4 and Byer Road[2] | Complete Street Improvements | $5,742,000 | 4.58 | $263,068 |
| Byer Road | 6 | Between Bixler Road and Byron Highway[2] | Complete Street Improvements | $5,477,000 | 4.58 | $250,927 |
| | | | **Total** | **$32,555,000** | **20.37** | **$6,879,847** |

Source: DKS Associates, 2018

## 7. Method for Calculating Fees

**Land Use Categories**

The calculation of fees for the AOB Program Updates will be based on the general land use categories that can be derived for all areas of the county from CCTA's travel demand model. These general categories are the following:

| Land Use Type | Units |
|---|---|
| Single-Family | Dwelling units (DU) |
| Multi-Family | Dwelling units (DU) |
| Commercial/Retail | 1,000 Sq. Ft. |
| Office | 1,000 Sq. Ft |
| Industrial | 1,000 Sq. Ft |

**Dwelling Unit Equivalents**

In the allocation of costs to various types of development, each development type will be assigned a "dwelling unit equivalent" or "DUE" rate. DUEs are numerical measures of how the trip-making characteristics of a land use compare to a typical single-family residential unit, which is assigned a DUE of 1. Land uses that have greater overall traffic impacts than a typical single-family residential unit are assigned values greater than 1, while land uses with lower overall traffic impacts than a typical single-family residential unit are assigned DUE values less than 1.

DUEs are developed by comparing both the trip generation and trip length characteristics of various land uses to those same rates for a typical single-family residential unit. Since roadway needs are primarily based on traffic flows and conditions during the PM peak hour on an average weekday, the DUEs reflect the relative trip generation for the peak hour. Also considered in the calculation of DUEs are "percent new" trips since some of the vehicles attracted to non-residential uses would have been on the roadway system regardless of the presence of the traffic generated by the new development. Average trip lengths for the remaining "primary" trips generated by a development are then utilized to better reflect overall impact of longer trips on the County's roadway system.

The DUE rates will thus be based on estimates of the average vehicle-miles of travel (VMT) generated during the PM peak hour for each general land use type. The DUE rates that will be used to estimate the Discovery Bay AOB fees are shown in **Table 10**.

Table 10: Dwelling Unit Equivalent (DUE) Rates

| Land Use Category | PM Peak Hour Trip Rate per Unit[1] | Unit | Trip Length (miles)[2] | Percent New trips[2] | VMT per Unit | DUE per Unit |
|---|---|---|---|---|---|---|
| Singe Family | 1.01 | Dwelling Unit | 5.0 | 100 | 5.050 | 1.00 |
| Multi-Family | 0.62 | | 5.0 | 100 | 3.100 | 0.61 |
| Retail | 4.10 | Square Feet | 2.3 | 76 | 7.167 | 0.00142 |
| Office | 1.40 | | 4.5 | 92 | 5.796 | 0.00115 |
| Industrial | 0.98 | | 5.1 | 92 | 4.598 | 0.00091 |

[1] ITE Trip Generation 7th Edition
[2] ITE Journal, May 1992
Source: DKS Associates, 2018

**Fee Calculation**

The cost per DUE (i.e. cost for a typical single-family dwelling unit) is calculated by dividing the total costs allocated to new development in the AOB (methods described above) by the total growth in DUEs in the AOB by 2040 (see **Table 11**). The cost for each land use type is then based on its DUE rate. The nexus-based fee rates are shown in **Table 12**.

Table 11: Growth in DUE

| Land Use Category | Unit | Growth in Units[1] | DUE per Unit | Growth in DUEs |
|---|---|---|---|---|
| Singe Family | Dwelling Unit | 50 | 1.00 | 50 |
| Multi-Family | | 80 | 0.61 | 49 |
| Retail | Square Feet | 35,000 | 0.00142 | 50 |
| Office | | 4,950 | 0.00115 | 6 |
| Industrial | | 600 | 0.00091 | 1 |
| | | | **Total** | 155 |

[1] See Table 2: "Summary of Estimated Development 2010 to 2040 Growth"

Source: DKS Associates, 2018

Table 12: Nexus Based Fee Rates

| | | |
|---|---|---|
| Cost of Improvements Allocated to AOB Growth | | $6,879,847 |
| AOB Account Balance (as of April 2018) | | $240,760 |
| Unfunded Allocated Costs | | $6,639,087 |
| Growth in Dwelling Unit Equivalents (DUE's) | | 155 |
| Cost per DUE | | $42,830.79 |
| **Land Use** | **Units** | **Fee per Unit[1]** |
| Single Family | Dwelling Unit | $42,831 |
| Multi-Family | Dwelling Unit | $26,292 |
| Retail | Square Foot | $60.78 |
| Office | Square Foot | $49.16 |
| Industrial | Square Foot | $39.00 |

[1]Fee per Unit = (Cost per DUE) x (DUE per Unit)
Source: DKS Associates, 2018

## 8. Nexus Analysis

A nexus analysis has been prepared on the Discovery Bay AOB Program in accordance with the procedural guidelines established in AB1600 which is codified in California Government Section 66000 *et seq*. These code sections set forth the procedural requirements for establishing and collecting development impact fees. These procedures require that "a reasonable relationship or nexus must exist between a governmental exaction and the purpose of the condition." Specifically, each local agency imposing a fee must:

- Identify the purpose of the fee;

- Identify how the fee is to be used;
- Determine how a reasonable relationship exists between the fee's use and the type of development project on which the fee is imposed;
- Determine how a reasonable relationship exists between the need for the public facility and the type of development project on which the fee is imposed; and,
- Demonstrate a reasonable relationship between the amount of the fee and the cost of public facility or portion of the public facility attributable to the development on which the fee is imposed.

### 8.1 Purpose of fee

The purpose of the Discovery Bay AOB Program is to fund improvements to the County's major roadway, bicycle and pedestrian facilities needed to accommodate travel demand generated by new land development in the unincorporated portion of Discovery Bay AOB over the next 27 years (through 2040).

The Discovery Bay AOB Program will help meet the County's General Plan policies including maintenance of adequate levels of service and safety for roadway facilities. New development in the unincorporated portions of the Discovery Bay AOB will increase the demand for all modes of travel (including walking, biking, transit, automobile and truck/goods movement) and thus the need for improvements to transportation facilities. The Discovery Bay AOB Program will help fund transportation facilities necessary to accommodate new residential and non-residential development in the unincorporated portions of the Discovery Bay AOB.

### 8.2 Use of Fees

The fees from new development in the Discovery Bay AOB Program will be used to fund additions and improvements to the transportation system needed to accommodate future travel demand resulting from residential and non-residential development within the Discovery Bay AOB. The Discovery Bay AOB Program will help fund improvements to roadways (include the widening or extensions of arterial and collector roadways, intersection improvements and provision of shoulders and complete streets), bikeways and walkways plus fee program administration costs. The transportation improvements wholly or partially funded by the program are described in more detail in **Section 4.**

### 8.3 Relationship between use of Fees and Type of Development

Fee revenues generated by the Discovery Bay AOB Program will be used to develop the transportation improvements described in **Section 4**. All of these improvements increase the capacity, improve the safety, or facilitate the use of alternative modes (transit, bicycle, pedestrian) on those segments of the transportation system affected by new development. The results of the transportation modeling analysis summarized in this report demonstrate that these improvements either mitigate impacts from and/or provide benefits to new development.

### 8.4 Relationship between Need for Facility and Type of Development

The projected residential and non-residential development described in **Section 3** will add to the incremental need for transportation facilities by increasing the amount of demand on the transportation system. The transportation analysis presented in **Section 4** demonstrates that improvements are required to minimize the negative impact on current levels of service caused by new development and/or accommodate the increased need for alternative transportation modes (transit, bicycle, pedestrian).

### 8.5 Relationship between Amount of Fees and the Cost of Facility Attributed to Development upon which Fee is Imposed

The basis for allocating improvement costs to development is described in **Section 6**. Construction of necessary transportation improvements will directly serve residential and non-residential development within the unincorporated portions of the AOB and will directly benefit development in those areas.

New development within the AOB is allocated a percentage of costs based the number of new trips on a roadway segment or intersection that have either their origin or destination within the AOB divided by the total amount of trips from new development. The remaining percent of costs, reflecting new trips that have neither their origin nor destination in the AOB (through trips), are not allocated to development in the AOB. For facilities that have an "existing deficiency", the cost of the improvement that is allocated to the Discovery Bay AOB Program is modified to account for that deficiency.

The fee that a developer pays for a new residential unit or commercial building varies by the type of development based on its impact on the transportation system. Each development type is assigned a "dwelling unit equivalent" or "DUE" rate based on its estimated vehicle-miles of travel (VMT) per unit of development.

DUE's are numerical measures of how the trip-making characteristics of a land use compare to a single-family residential unit. DUE's were developed by comparing both the trip generation and trip length characteristics of various land uses to those of the single-family residential units. Since roadway needs are primarily based on traffic flows and conditions during the peak hour on an average weekday, the DUE's reflect the relative trip generation for the peak hour. Also considered in the calculation of DUE's are "percent new" trips. The DUE rates were thus based on estimates of the average vehicle-miles of travel (VMT) generated during the peak hour for each general land use type.

### 8.6 Current AOB Fund Balance

As of April 2018, the Discovery Bay AOB had a fund balance of $240,760.10 (see **Table 12**). The allocation of the existing fund balance will be restricted to the Byron Highway project, a carry-over project from the previous project list.

# Appendix A

## Cost Estimates for Selected Projects in Discovery Bay AOB

**Discovery Bay Area of Benefit**
**Engineer's Estimate Summary**

| Project | Roadway | Location | Item Description | Total Cost |
|---|---|---|---|---|
| 1 | Discovery Bay Boulevard | Discovery Bay Boulevard and Clipper Drive | Project would install a 166' diameter double-lane roundabout to address existing and future projected LOS deficiencies. This intersection control modification is expected to impact 4 properties. | $1,910,000 |
| 2.1, 2.2, 2.4 | SR-4 | SR-4 from Bixler Road to Discovery Bay Boulevard | Project will widen SR-4 to provide four 12' travel lanes and 8' shoulders/bike lanes. These improvements are needed to maintain an acceptable level of service and are consistent with the Countywide Bicycle and Pedestrian Plan. This cost estimate assumes roadway widening along the entire segment, excluding the two bridges (which are costed separately as Project 2.2). | $17,273,000 |
| 2.3 | SR-4 | SR-4 and Newport Drive | Project would signalize the intersection of SR-4 and Newport Drive to address a future LOS deficiency. | $731,000 |
| 3 | Byron Highway | Byron Highway and Byer Road | Project would widen Byron Highway to provide a 200' left turn pocket at Byer Road. Currently southbound traffic uses the right shoulder to bypass stopped left-turning vehicles. This project will provide left turn storage and enhance safety near a school. | $1,198,000 |
| 4 | Clipper Drive | Clipper Drive from Discovery Bay Boulevard to Newport Drive | Project will construct 15' traffic circles at the intersections of Clipper Drive and Reef Court and Clipper Drive and Balboa Way. Additionally, the project will stripe bike lanes on both sides of the roadway. Between Discovery Bay Boulevard and Windward Point, the center two-way left turn lane (TWLTL) will be removed to provide the needed width. Between Windward Point and Newport Drive, one of the two westbound left turn lanes and the eastbound left turn lane will be removed to provide the needed width. | $224,000 |
| 5 | Bixler Road | Bixler Road from SR-4 to Byer Road | Project will widen Bixler Road from SR-4 to Byer Road to provide 12' travel lanes with 8' shoulders/bike lanes. These improvements are expected to enhance vehicle and bicycle safety. | $5,742,000 |
| 6 | Byer Road | Byer Road from Byron Highway to Bixler Road | Project will widen Byer Road from Byron Highway to Bixler Road to provide 12' travel lanes with 8' shoulders/bike lanes. These improvements are expected to enhance vehicle and bicycle safety. | $5,477,000 |
| | | | **TOTAL** | **$32,555,000** |

Source: DKS Associates, 2016

DKS Associates

# Planning Cost Estimate

1970 Broadway Ste 740, Oakland CA 94612

**Project Number** **1**

☐ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.
☐ Click here if this project is a surface treatment or overlay project.

Project Name: Discovery Bay Boulevard and Clipper Drive Intersection Improvements
Project Location: Discovery Bay Boulevard and Clipper Drive

Description: Project would install a 166' diameter double-lane roundabout to address existing and future projected LOS deficiencies. This intersection control modification is expected to impact 4 properties.

Project Length (ft): N/A

Date of Estimate: Feb. 19, 2015

Prepared by: T. Krakow

| Revision No. |
|---|
| Revision Date |
| Revised by |

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| 1 | Demolish existing curb | 720 | LF | $5.00 | $ 3,600 |
| 2 | Demolition of concrete sidewalk and median | 2,950 | SF | $5.00 | $ 14,750 |
| 3 | Demolition of existing asphalt | 23,842 | SF | $3.00 | $ 71,527 |
| 4 | Excavation | 422 | CY | $75.00 | $ 31,667 |
| 5 | Class 2 Aggregate Base | 422 | CY | $65.00 | $ 27,444 |
| 6 | Hot Mix Asphalt (Type A) | 317 | Ton | $125.00 | $ 39,605 |
| 7 | Curb & Gutter | 1,239 | LF | $35.00 | $ 43,354 |
| 8 | Striping | 1,302 | LF | $3.00 | $ 3,905 |
| 9 | Irrigation and Landscaping | 16,742 | SF | $10.00 | $ 167,415 |
| 10 | Pavers | 2,215 | SF | $25.00 | $ 55,371 |
| 11 | Relocate exising lighting fixtures | 2 | EA | $2,000.00 | $ 4,000 |
| 12 | Lighting fixtures | 6 | EA | $8,000.00 | $ 48,000 |
| 13 | Construction area Signs | 1 | LS | $1,500.00 | $ 1,500 |
| 14 | Removal of existing signs | 1 | LS | $500.00 | $ 500 |
| 15 | New signage | 1 | LS | $1,500.00 | $ 1,500 |
| 16 | Misc. drainage improvements | 1 | LS | $102,800.00 | $ 102,800 |
| 17 | Mobilization | 1 | LS | $ 61,700.00 | $ 61,700 |

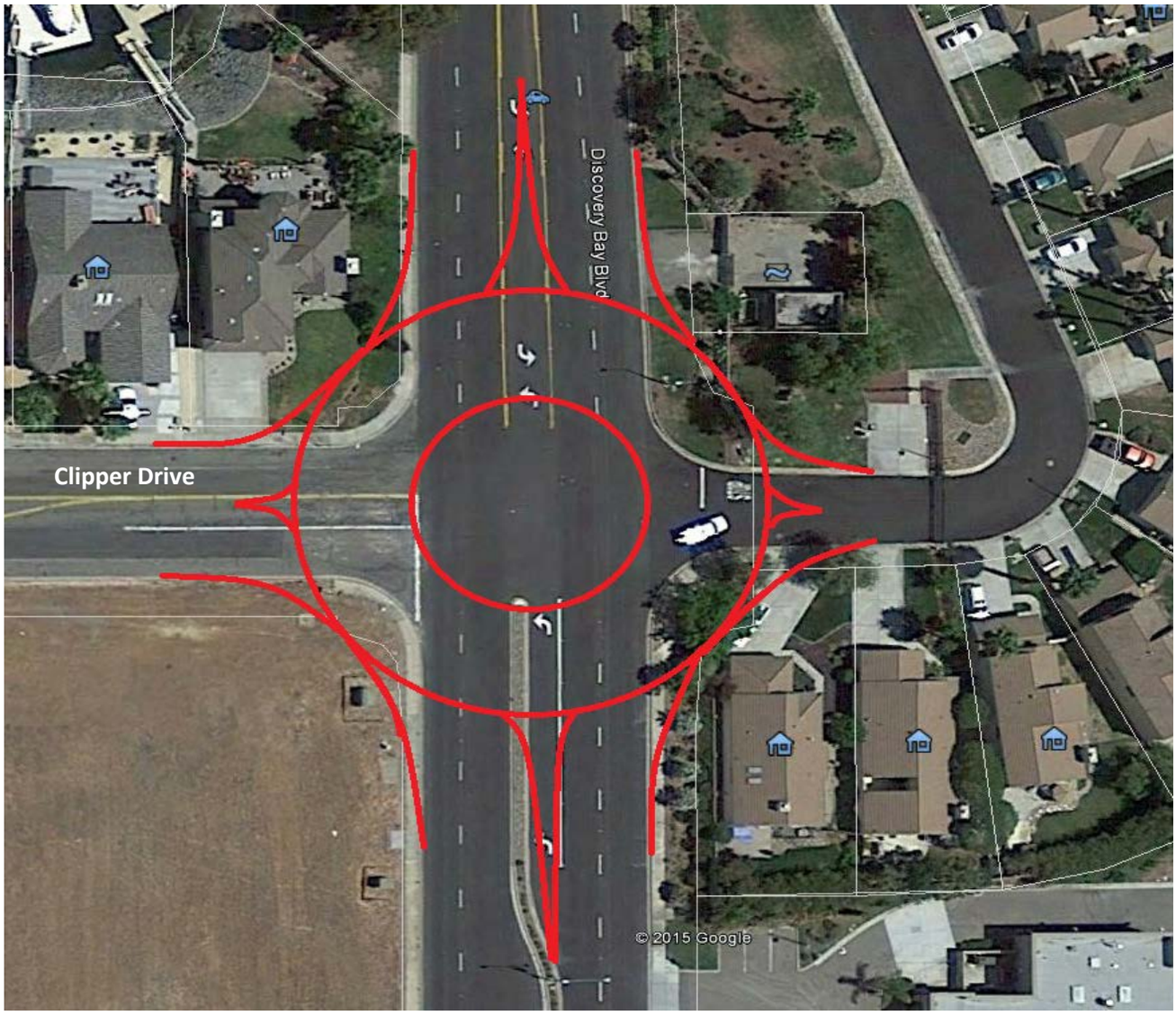
CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 617,000

**Project Number** **1**

| | | | | | |
|---|---|---|---|---|---|
| Planning Engineering (TE) | $ 93,000 | | Contract Items | $ | 678,700 |
| Preliminary Engineering (Design/Survey)* | $ 272,000 | | Other Costs (CON) | $ | 102,000 |
| Utility Coordination (Design) | $ 61,694 | | Contingency* | $ | 102,000 |
| Environmental (Environmental, Real Property) | $ 74,033 | | Subtotal (Contract Items) | $ | 882,700 |
| R/W Engineering (Survey) | $ 30,000 | | Subtotal (Plan) | $ | 93,000 |
| Real Property Labor | $ 50,000 | | Subtotal (PE) | $ | 407,726 |
| R/W Acquisition | $ 447,000 | | Subtotal (R/W) | $ | 527,000 |
| Construction Engineering * | $ 102,000 | | | | |
| Environmental Monitoring and Mitigation Fees | $ - | | | | |
| SUBTOTAL of OTHER COSTS (ALL) | $ 1,129,726 | | | | |
| | | | Grand Total | $ | 1,910,426 |
| | | | Current Year | | 2015 |
| | | | Escalation Year | | 2015 |
| | | | Escalation Rate | | 0.0% |
| | | ➢ | **TOTAL (in 2015 dollars)** | **$** | **1,910,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)
* Construction Engineering is 15% of contract items. ($20,000 min.)
* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 1: Discovery Bay Boulevard and Clipper Drive Intersection Improvements**



DKS Associates

# Planning Cost Estimate

1970 Broadway Ste 740, Oakland CA 94612

**Project Number** **2.1**

☑ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.
☑ Click here if this project is a surface treatment or overlay project.

Project Name: SR-4 Widening and Bicycle Improvements (Bixler to Discovery Bay)
Project Location: SR-4 from Bixler Road to Discovery Bay Boulevard

Description

Project will widen SR-4 to provide four 12' travel lanes and 8' shoulders/bike lanes. These improvements are needed to maintain an acceptable level of service and are consistent with the Countywide Bicycle and Pedestrian Plan. This cost estimate assumes roadway widening along the entire segment, excluding the two bridges (which are costed separately as Project 2.2).

Project Length (ft): 5420

Date of Estimate: Feb. 19, 2015

Prepared by: T. Krakow

| | |
|---|---|
| Revision No. | |
| Revision Date | |
| Revised by | |

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| **Bixler Road to Newport Drive** | | | | | |
| 1 | Clearing and Grubbing | 23652 | SF | $3.00 | $ 70,956 |
| 2 | Earthwork | 23652 | SF | $4.00 | $ 94,700 |
| 3 | Class 2 Aggregate Base | 1752 | CY | $65.00 | $ 113,900 |
| 4 | Hot Mix Asphalt (Type A) | 781 | Ton | $125.00 | $ 97,600 |
| 5 | Striping | 7876 | LF | $3.00 | $ 23,700 |
| 6 | Misc. Drainage Modifications | 1 | LS | $80,200.00 | $ 80,200 |
| | | | | Subtotal (LS): | $ 481,056 |
| **Newport Drive to Discovery Bay Boulevard** | | | | | |
| 7 | Clearing and Grubbing | 90240 | SF | $3.00 | $ 270,720 |
| 8 | Earthwork | 90240 | SF | $4.00 | $ 361,000 |
| 9 | Class 2 Aggregate Base | 6684 | CY | $65.00 | $ 434,500 |
| 10 | Hot Mix Asphalt (Type A) | 2978 | Ton | $125.00 | $ 372,300 |
| 11 | Striping | 13800 | LF | $3.00 | $ 41,400 |
| 12 | Misc. Drainage Modifications | 1 | LS | $296,000.00 | $ 296,000 |
| | | | | Subtotal (LS): | $ 1,775,920 |
| 13 | Construction Area Signs | 1 | LS | $1,000.00 | $ 1,000 |
| 14 | Temporary traffic control | 1 | LS | $112,800.00 | $ 112,800 |
| 15 | Prepare Water Pollution Control Plan | 1 | LS | $6,000.00 | $ 6,000 |
| 16 | Mobilization | 1 | LS | $ 237,700.00 | $ 237,700 |

CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 2,377,000

**Project Number** **2.1**

| | | | |
|---|---|---|---|
| Planning Engineering (TE) | $ 357,000 | Contract Items | $ 2,615,000 |
| Preliminary Engineering (Design/Survey)* | $ 654,000 | Other Costs (CON) | $ 393,000 |
| Utility Coordination (Design) | $ 225,698 | Contingency* | $ 393,000 |
| Environmental (Environmental, Real Property) | $ 338,546 | Subtotal (Contract Items) | $ 3,401,000 |
| R/W Engineering (Survey) | $ - | Subtotal (Plan) | $ 357,000 |
| Real Property Labor | $ - | Subtotal (PE) | $ 1,218,244 |
| R/W Acquisition | $ - | Subtotal (R/W) | $ - |
| Construction Engineering * | $ 393,000 | | |
| Environmental Monitoring and Mitigation Fees | $ - | | |
| SUBTOTAL of OTHER COSTS (ALL) | $ 1,968,244 | | |
| | | Grand Total | $ 4,976,244 |
| | | Current Year | 2015 |
| | | Escalation Year | 2015 |
| | | Escalation Rate | 0.0% |
| | | ➢ **TOTAL (in 2015 dollars)** | **$ 4,976,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)
* Construction Engineering is 15% of contract items. ($20,000 min.)
* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 2.1: SR-4 Widening and Bicycle Improvements (Bixler to Discovery Bay)**

DKS Associates

# Planning Cost Estimate

1970 Broadway Ste 740, Oakland CA 94612

**Project Number** **2.2**

☑ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.

☐ Click here if this project is a surface treatment or overlay project.

Project Name: SR-4 Bridge Widening and Bicycle Improvements

Project Location: SR-4 from Bixler Road to Discovery Bay Boulevard

Description

Project will widen the SR-4 bridges east and west of Newport Drive to provide four 12' travel lanes and 8' shoulders/bike lanes. These improvements are needed to maintain an acceptable level of service and are consistent with the Countywide Bicycle and Pedestrian Plan.

Project Length (ft): Varies

Date of Estimate: Feb. 19, 2015

Prepared by: T. Krakow

Revision No.
Revision Date
Revised by

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| **Bridge West of Newport Drive** | | | | | |
| 1 | Clearing and Grubbing | 6960 | LS | $3.00 | $ 20,880 |
| 2 | Earthwork | 6960 | SF | $6.00 | $ 41,800 |
| 3 | Class 2 Aggregate Base | 516 | CY | $65.00 | $ 33,600 |
| 4 | Hot Mix Asphalt (Type A) | 345 | Ton | $125.00 | $ 43,100 |
| 5 | Restripe roadway | 290 | LF | $8.00 | $ 2,400 |
| 6 | Widen bridge by 24' | 6960 | SF | $200.00 | $ 1,392,000 |
| 7 | Misc. Drainage Modifications | 1 | LS | $306,800.00 | $ 306,800 |
| | | | | Subtotal (LS): | $ 1,840,580 |
| **Bridge East of Newport Drive** | | | | | |
| 8 | Clearing and Grubbing | 6480 | SF | $3.00 | $ 19,440 |
| 9 | Earthwork | 6480 | SF | $6.00 | $ 38,900 |
| 10 | Class 2 Aggregate Base | 480 | CY | $65.00 | $ 31,200 |
| 11 | Hot Mix Asphalt (Type A) | 321 | Ton | $125.00 | $ 40,100 |
| 12 | Restripe roadway | 270 | LF | $8.00 | $ 2,200 |
| 13 | Widen bridge by 24' | 6480 | SF | $200.00 | $ 1,296,000 |
| 14 | Misc. Drainage Modifications | 1 | LS | $285,600.00 | $ 285,600 |
| | | | | Subtotal (LS): | $ 1,713,440 |
| 15 | Construction Area Signs | 1 | LS | $1,000.00 | $ 1,000 |
| 16 | Temporary traffic control | 1 | LS | $88,900.00 | $ 88,900 |
| 17 | Prepare Water Pollution Control Plan | 1 | LS | $6,000.00 | $ 6,000 |
| 18 | Mobilization | 1 | LS | $ 365,000.00 | $ 365,000 |

CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 3,650,000

**Project Number** **2.2**

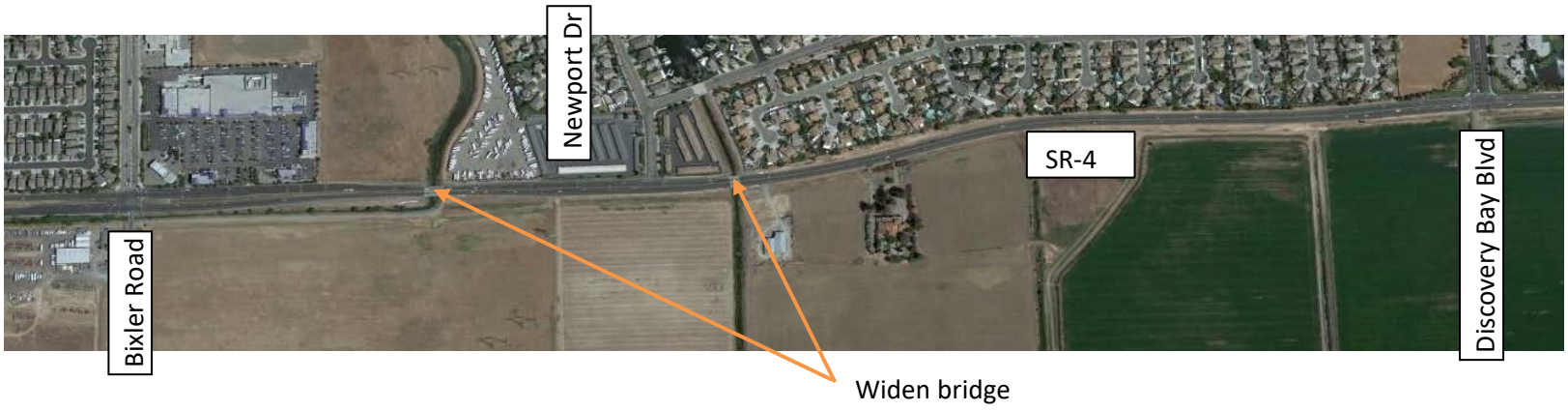
| | | | |
|---|---|---|---|
| Planning Engineering (TE) | $ 548,000 | Contract Items | $ 4,015,000 |
| Preliminary Engineering (Design/Survey)* | $ 1,366,000 | Other Costs (CON) | $ 603,000 |
| Utility Coordination (Design) | $ 355,402 | Contingency* | $ 603,000 |
| Environmental (Environmental, Real Property) | $ 710,804 | Subtotal (Contract Items) | $ 5,221,000 |
| R/W Engineering (Survey) | $ - | Subtotal (Plan) | $ 548,000 |
| Real Property Labor | $ - | Subtotal (PE) | $ 2,432,206 |
| R/W Acquisition | $ - | Subtotal (R/W) | $ - |
| Construction Engineering * | $ 603,000 | | |
| Environmental Monitoring and Mitigation Fees | $ - | | |
| SUBTOTAL of OTHER COSTS (ALL) | $ 3,583,206 | | |
| | | Grand Total | $ 8,201,206 |
| | | Current Year | 2015 |
| | | Escalation Year | 2015 |
| | | Escalation Rate | 0.0% |
| | | ➢ **TOTAL (in 2015 dollars)** | **$ 8,201,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)

* Construction Engineering is 15% of contract items. ($20,000 min.)

* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 2.2: SR-4 Widening and Bicycle Improvements (Bixler to Discovery Bay)**



DKS Associates

# Planning Cost Estimate

1970 Broadway Ste 740, Oakland CA 94612

**Project Number** **2.3**

☐ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.
☐ Click here if this project is a surface treatment or overlay project.

Project Name: SR-4/Newport Drive Signalization
Project Location: SR-4 and Newport Drive

Description: Project would signalize the intersection of SR-4 and Newport Drive to address a future LOS deficiency.

Project Length (ft): N/A

Date of Estimate: Feb. 19, 2015

Prepared by: T. Krakow

Revision No.
Revision Date
Revised by

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| 1 | Install traffic signal with safety lighting | 3 | EA | $ 100,000.00 | $ 300,000 |
| 2 | Removal of signs | 1 | LS | $ 500.00 | $ 500 |
| 3 | Removal of pavement legends | 1 | LS | $ 1,000.00 | $ 1,000 |
| 4 | Thermoplastic striping for crosswalks | 1 | LS | $ 2,000.00 | $ 2,000 |
| 5 | Install new ADA curb ramp | 2 | EA | $ 4,200.00 | $ 8,400 |
| 6 | Restripe intersection approach | 3 | EA | $ 2,500.00 | $ 7,500 |
| 7 | Temporary traffic control | 1 | LS | $ 5,000.00 | $ 5,000 |
| 8 | Prepare Water Pollution Control Plan | 1 | EA | $6,000.00 | $ 6,000 |
| 9 | Mobilization | 1 | LS | $ 33,000.00 | $ 33,000 |

CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 330,000

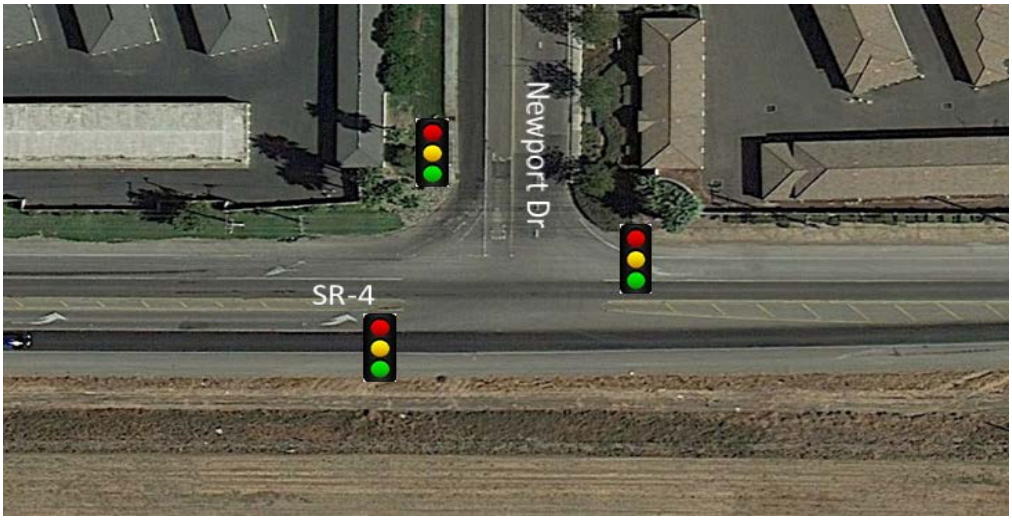
**Project Number** **2.3**

| | |
|---|---|
| Planning Engineering (TE) | $ 50,000 |
| Preliminary Engineering (Design/Survey)* | $ 124,000 |
| Utility Coordination (Design) | $ 33,040 |
| Environmental (Environmental, Real Property) | $ 33,040 |
| R/W Engineering (Survey) | |
| Real Property Labor | |
| R/W Acquisition | |
| Construction Engineering * | $ 73,000 |
| Environmental Monitoring and Mitigation Fees | $ - |
| SUBTOTAL of OTHER COSTS (ALL) | $ 313,080 |

| | |
|---|---|
| Contract Items | $ 363,000 |
| Other Costs (CON) | $ 73,000 |
| Contingency* | $ 55,000 |
| Subtotal (Contract Items) | $ 491,000 |
| Subtotal (Plan) | $ 50,000 |
| Subtotal (PE) | $ 190,080 |
| Subtotal (R/W) | $ - |
| Grand Total | $ 731,080 |
| Current Year | 2015 |
| Escalation Year | 2015 |
| Escalation Rate | 0.0% |
| ➢ **TOTAL (in 2015 dollars)** | **$ 731,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)
* Construction Engineering is 15% of contract items. ($20,000 min.)
* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 2.3: SR-4/Newport Drive Signalization**



**DKS Associates** | **Planning Cost Estimate**

1970 Broadway Ste 740, Oakland CA 94612 | **Project Number** **2.4**

☑ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.
☑ Click here if this project is a surface treatment or overlay project.

Project Name: SR-4 Widening and Bicycle Improvements (Byron to Regatta)
Project Location: SR-4 from Byron Highway to Regatta Drive

Description: Project will widen SR-4 to provide four 12' travel lanes and 8' shoulders/bike lanes. These improvements are needed to maintain an acceptable level of service and are consistent with the Countywide Bicycle and Pedestrian Plan.

Project Length (ft): 3370

Date of Estimate: Feb. 19, 2015

Prepared by: C. Shew

Revision No.
Revision Date
Revised by

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| 1 | Clearing and Grubbing | 1 | SF | $100,000.00 | $ 100,000 |
| 2 | Earthwork | 104000 | SF | $4.00 | $ 416,000 |
| 3 | Class 2 Aggregate Base | 7704 | CY | $65.00 | $ 500,800 |
| 4 | Hot Mix Asphalt (Type A) | 3432 | Ton | $125.00 | $ 429,000 |
| 5 | Striping | 10400 | LF | $3.00 | $ 31,200 |
| 6 | Misc. Drainage Modifications | 1 | LS | $295,400.00 | $ 295,400 |
| 7 | Construction Area Signs | 1 | LS | $1,000.00 | $ 1,000 |
| 8 | Temporary traffic control | 1 | LS | $88,600.00 | $ 88,600 |
| 9 | Prepare Water Pollution Control Plan | 1 | LS | $6,000.00 | $ 6,000 |
| 10 | Mobilization | 1 | LS | $ 186,800.00 | $ 186,800 |

CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 1,868,000

**Project Number** **2.4**

| | | | |
|---|---|---|---|
| Planning Engineering (TE) | $ 281,000 | Contract Items | $ 2,055,000 |
| Preliminary Engineering (Design/Survey)* | $ 699,000 | Other Costs (CON) | $ 309,000 |
| Utility Coordination (Design) | $ 177,240 | Contingency* | $ 309,000 |
| Environmental (Environmental, Real Property) | $ 265,860 | Subtotal (Contract Items) | $ 2,673,000 |
| R/W Engineering (Survey) | $ - | Subtotal (Plan) | $ 281,000 |
| Real Property Labor | $ - | Subtotal (PE) | $ 1,142,100 |
| R/W Acquisition | $ - | Subtotal (R/W) | $ - |
| Construction Engineering * | $ 309,000 | | |
| Environmental Monitoring and Mitigation Fees | $ - | | |
| SUBTOTAL of OTHER COSTS (ALL) | $ 1,732,100 | | |
| | | Grand Total | $ 4,096,100 |
| | | Current Year | 2015 |
| | | Escalation Year | 2015 |
| | | Escalation Rate | 0.0% |
| | | ➢ **TOTAL (in 2015 dollars)** | **$ 4,096,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)
* Construction Engineering is 15% of contract items. ($20,000 min.)
* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 2.4: SR-4 Widening and Bicycle Improvements (Byron to Regatta)**

# Transportation Engineering

## Planning Cost Estimate

Contra Costa County Public Works Department

☐ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.
☐ Click here if this project is a surface treatment or overlay project.

**Project Number** 3

**Project Name:** Byron Highway-Byer Road Improvements
**Alternative:** TWLTL on Byron Highway near Excelsior Middle School

**Project Location:** Byron Highway and Byer Road
**Assumptions:** R=5, TI,= 7, Design Speed=35 mph

**Project Length (ft):** 2000

**Date of Estimate:** Apr. 5, 2016

**Prepared by:** John Honey

Revision No.
Revision Date
Revised by

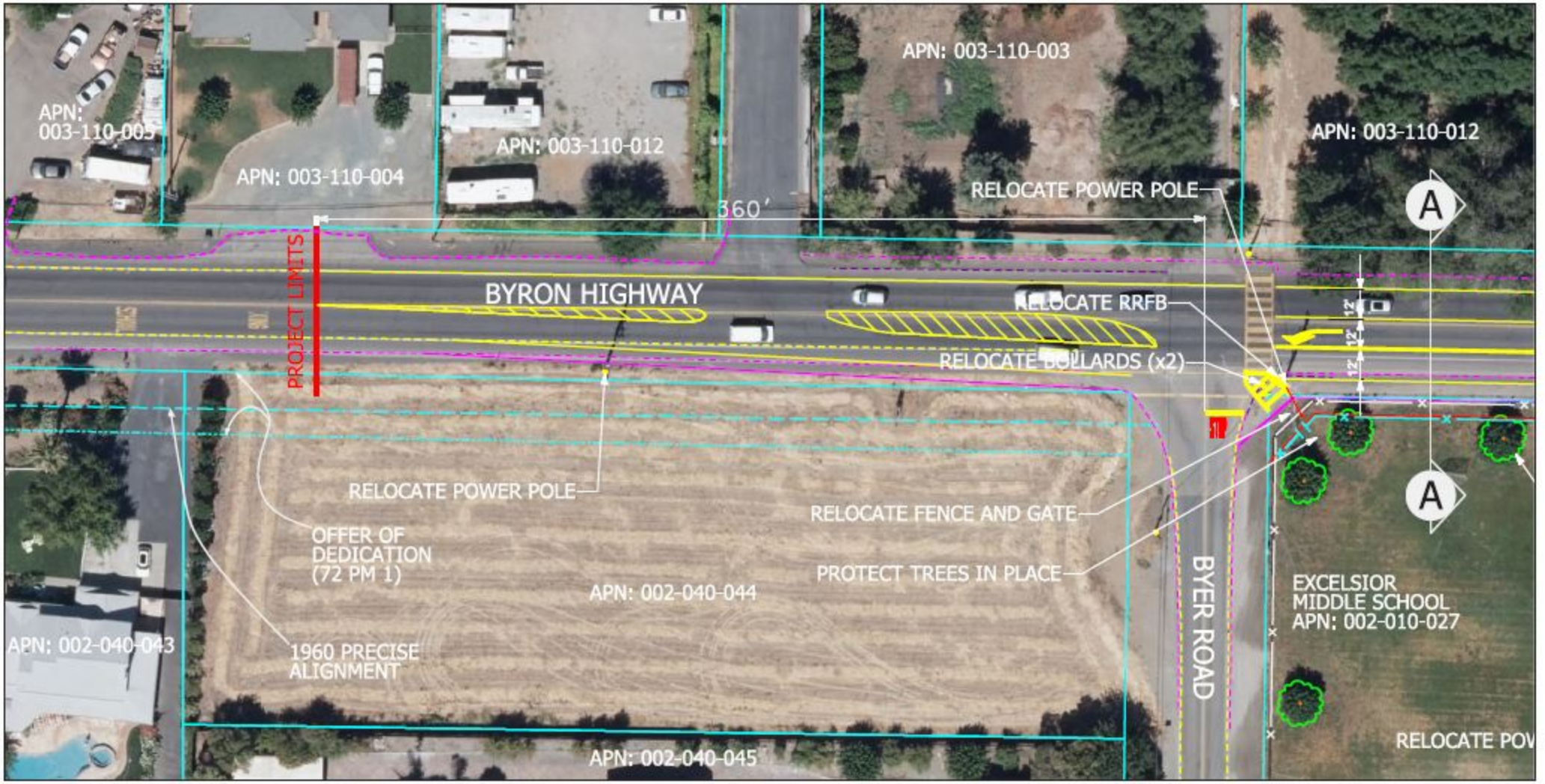
| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| 1 | Construction Area Signs | 6 | EA | $ 350.00 | $ 2,100 |
| 2 | Traffic Control System | 1 | LS | $ 20,000.00 | $ 20,000 |
| 3 | Prepare Water Pollution Control Plan | 1 | LS | $ 6,000.00 | $ 6,000 |
| 4 | Remove Thermoplastic Traffic Stripe | 8800 | SF | $ 2.00 | $ 17,600 |
| 5 | Clearing and Grubbing | 1 | LS | $ 15,000.00 | $ 15,000 |
| 6 | Saw Cut Pavement Edges | 2000 | LF | $ 2.00 | $ 4,000 |
| 7 | Roadway Excavation | 998 | CY | $ 45.00 | $ 44,910 |
| 8 | Class 2 Aggregate Base (depth=1.3) | 1486 | TON | $ 45.00 | $ 66,870 |
| 9 | Hot Mix Asphalt (Type A) (depth=.35) | 429 | TON | $ 110.00 | $ 47,190 |
| 10 | Roadside Sign - One Post | 2 | EA | $ 350.00 | $ 700 |
| 11 | Relocate Fence | 1170 | LF | $ 160.00 | $ 187,200 |
| 12 | K-Rails | 200 | LF | $ 10.00 | $ 2,000 |
| 13 | Relocate pedestrian flasher | 1 | EA | $ 3,000.00 | $ 3,000 |
| 14 | Relocate sign | 3 | EA | $ 300.00 | $ 900 |
| 15 | Relocate Bollards | 2 | EA | $ 400.00 | $ 800 |
| 16 | Thermoplastic Traffic Stripe - Det. 31, Channelizing Lane | 1348 | LF | $ 4.00 | $ 5,392 |
| 17 | Thermoplastic Traffic Stripe - Det. 28, Median | 285 | LF | $ 4.00 | $ 1,140 |
| 18 | Thermoplastic Traffic Stripe - Det. 27B, Right Edge Line | 1800 | LF | $ 2.00 | $ 3,600 |
| 19 | Thermoplastic Traffic Stripe - Det. 24, Left Edge Line | 165 | LF | $ 2.00 | $ 330 |
| 20 | Thermoplastic Traffic Stripe - Det. 21, No-Passing Zone | 290 | LF | $ 2.00 | $ 580 |
| 21 | Thermoplastic Traffic Stripe - Type III, L Arrow (42 SF EA) | 72 | SF | $ 2.00 | $ 144 |
| 22 | Thermoplastic Traffic Stripe - Type IV, L Arrow (15 SF EA) | 120 | SF | $ 2.00 | $ 240 |
| 23 | Mobilization | 1 | LS | $ 37,000.00 | $ 37,000 |
| 24 | Slurry Seal | 7628 | SY | $ 4.00 | $ 30,510 |
| 25 | | | | | |

OTHER COSTS BY PHASE:

| | | |
|---|---|---|
| PLAN | Planning Engineering (TE) | $ 50,000 |
| PE | Preliminary Engineering (Design/Survey)* | $ 150,000 |
| | Utility Coordination (Design) | $ 20,000 |
| | Environmental (Environmental, Real Property, CEQA, NEPA) | $ 150,000 |
| R/W | R/W Engineering (Survey) | $ 15,000 |
| | Real Property Labor | $ 30,000 |
| | R/W Acquisition | $ 86,280 |
| CON | Construction Engineering * | $ 75,000 |
| | Environmental Monitoring and Mitigation Fees | $ 50,000 |
| | SUBTOTAL of OTHER COSTS (ALL) | $ 626,280 |

| | |
|---|---|
| CONTRACT ITEMS | $ 497,000 |
| OTHER COSTS (CON) | $ 125,000 |
| CONTINGENCY* | $ 74,550 |
| SUBTOTAL (CON) | $ 696,550 |
| SUBTOTAL (PLAN) | $ 50,000 |
| SUBTOTAL (PE) | $ 320,000 |
| SUBTOTAL (R/W) | $ 131,280 |
| GRAND TOTAL | $ 1,197,830 |
| CURRENT YEAR | 2016 |
| ESCALATION YEAR | 2016 |
| ESCALATION RATE | 0.0% |
| ➢ **TOTAL (in 2016 dollars)** | **$ 1,198,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)
* Construction Engineering is 15% of contract items. ($20,000 min.)
* CONTINGENCY is 15% of contract items. ($10,000 min.)




## LEGEND

| EXISTING | DESCRIPTION | PROPOSED |
|---|---|---|
| | Right of Way | |
| | Striping | |
| | Edge of Pavement | |
| | Sidewalk | |
| | Fence | |

SCALE:
1:40 on 11x17

Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

PROPOSED PROJECT LAYOUT

BYRON HIGHWAY / BYER ROAD
SAFETY IMPROVEMENTS

FEDERAL ID NO.: | DRN: L. | CHK: W | DATE: JULY 2016 | SHEET 1 OF 5

APN: 003-110-003

APN: 003-110-012

APN: 003-110-011

BARRICADE EXIT

RELOCATE POWER POLE

A

RELOCATE RRFB

12'

12'

12'

BYRON HIGHWAY

RELOCATE BOLLARDS (x2)

A

RELOCATE FENCE AND GATE

PROTECT TREES IN PLACE

BYER ROAD

EXCELSIOR
MIDDLE SCHOOL
APN: 002-010-027

PROTECT TREES IN PLACE

RELOCATE FENCE

PROTECT TREES IN PLACE

RELOCATE POWER POLE

RELOCATE POWER POLE

EXCELSIOR MIDDLE SCHOOL
APN: 002-010-027

## LEGEND

| EXISTING | DESCRIPTION | PROPOSED |
|---|---|---|
| | Right of Way | |
| | Striping | |
| | Edge of Pavement | |
| | Sidewalk | |
| | Fence | |

SCALE:
1:40 on 11x17

Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

PROPOSED PROJECT LAYOUT

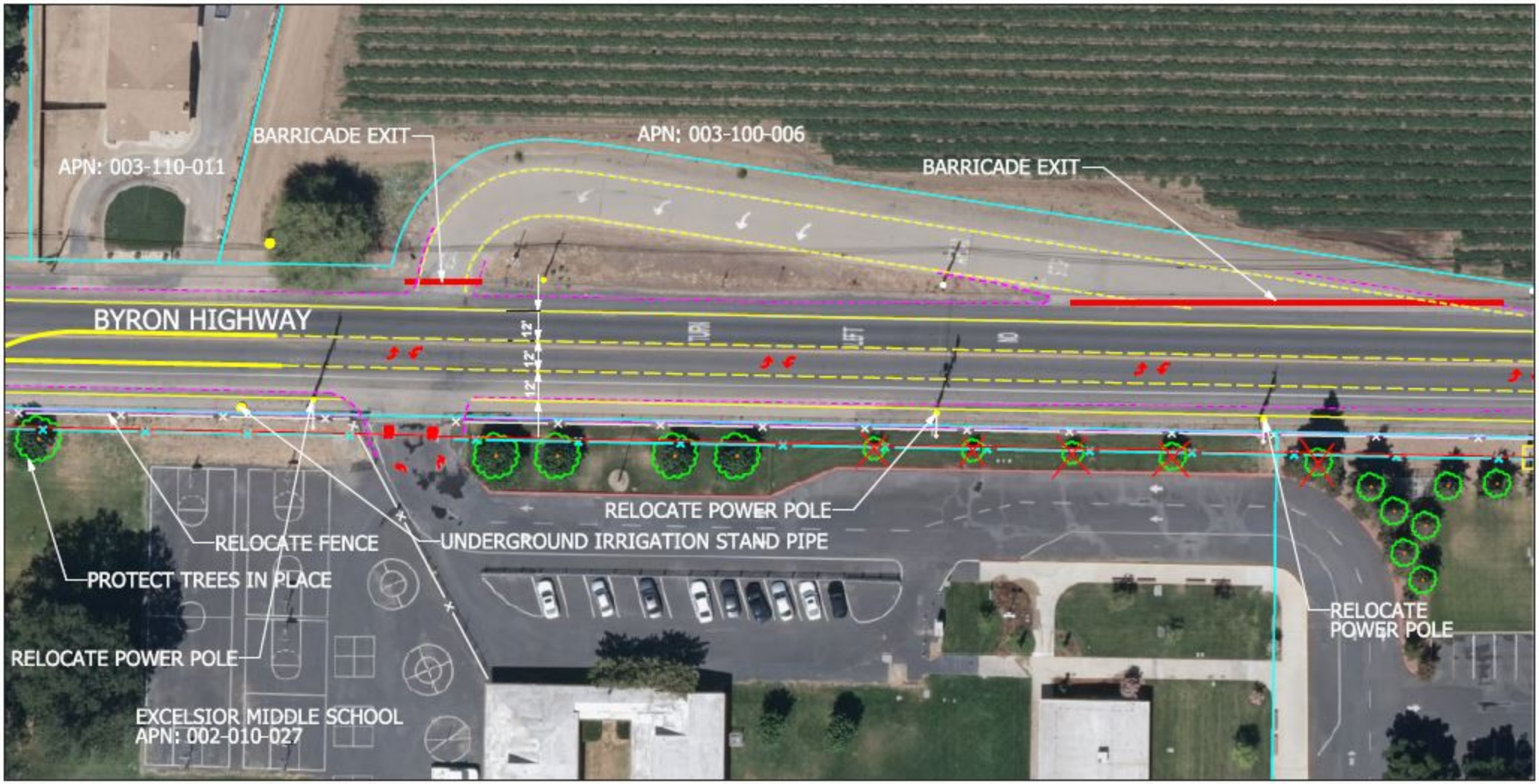
BYRON HIGHWAY / BYER ROAD
SAFETY IMPROVEMENTS

FEDERAL ID NO.:

DRN U. CHK AV

DATE: JULY 2016

SHEET 2 OF 5




## LEGEND

| EXISTING | DESCRIPTION | PROPOSED |
|---|---|---|
| | Right of Way | |
| | Striping | |
| | Edge of Pavement | |
| | Sidewalk | |
| | Fence | |

SCALE:
1:40 on 11x17

Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

# PROPOSED PROJECT LAYOUT

BYRON HIGHWAY / BYER ROAD
SAFETY IMPROVEMENTS

FEDERAL ID NO.: | DRN: IL | CHK: AV | DATE: JULY 2016 | SHEET 3 OF 5

## LEGEND

| EXISTING | DESCRIPTION | PROPOSED |
|---|---|---|
| | Right of Way | |
| | Striping | |
| | Edge of Pavement | |
| | Sidewalk | |
| | Fence | |

SCALE:
1:40 on 11x17

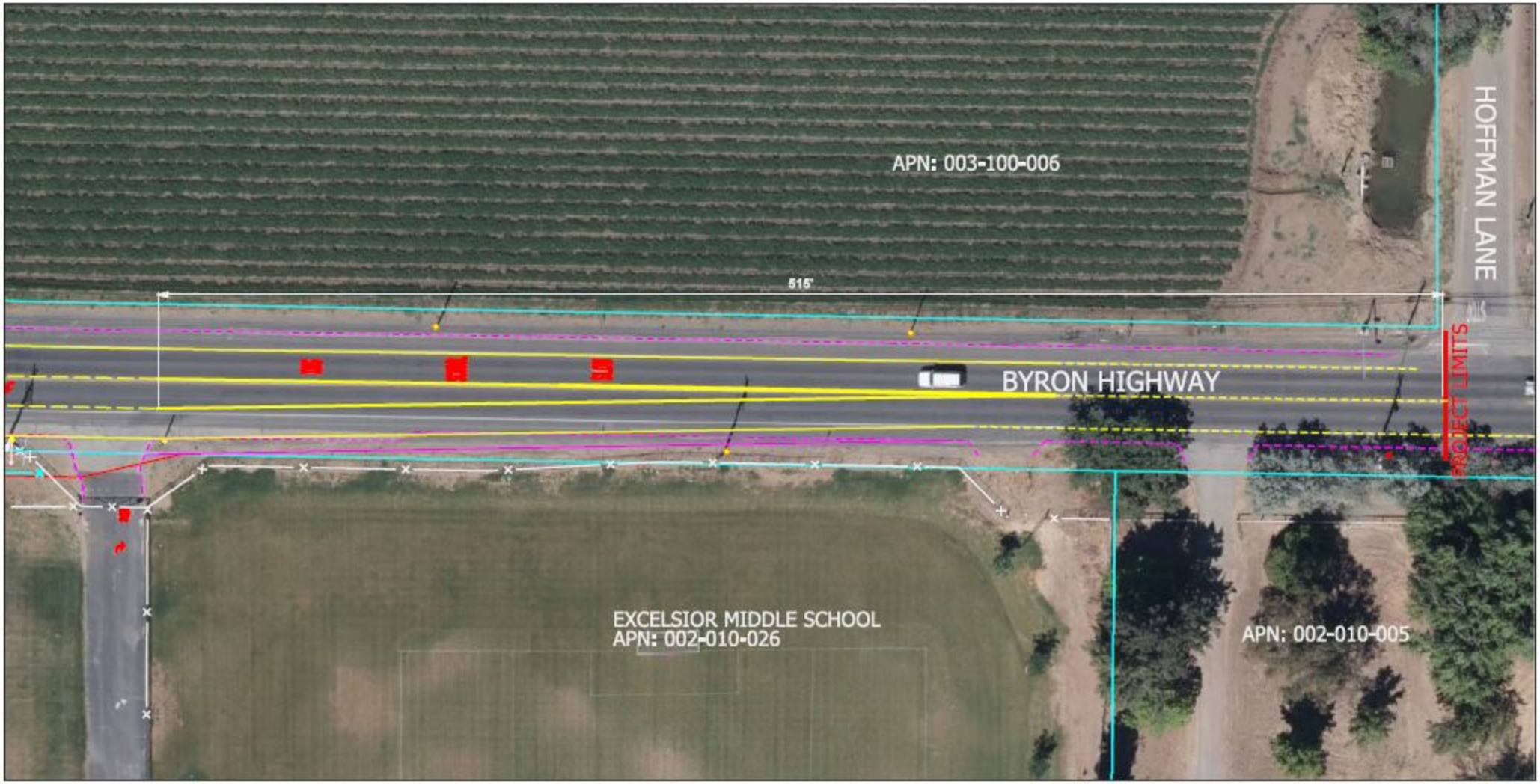
Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

# PROPOSED PROJECT LAYOUT

BYRON HIGHWAY / BYER ROAD
SAFETY IMPROVEMENTS

FEDERAL ID NO.: | DR: LL | CH: AV | DATE: JULY 2016 | SHEET 4 OF 5




## LEGEND

| EXISTING | DESCRIPTION | PROPOSED |
|---|---|---|
| | Right of Way | |
| | Striping | |
| | Edge of Pavement | |
| | Sidewalk | |
| | Fence | |

SCALE:
1:40 on 11x17

Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

PROPOSED PROJECT LAYOUT

BYRON HIGHWAY / BYER ROAD
SAFETY IMPROVEMENTS

FEDERAL ID NO.: | DRN: | DR AV | DATE: JULY 2016 | SHEET 5 OF 5

DKS Associates

# Planning Cost Estimate

1970 Broadway Ste 740, Oakland CA 94612

**Project Number** **4**

☑ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.
☐ Click here if this project is a surface treatment or overlay project.

Project Name: Clipper Drive Traffic Calming

Project Location: Clipper Drive from Discovery Bay Boulevard to Newport Drive

Description

Project will construct 15' traffic circles at the intersections of Clipper Drive and Reef Court and Clipper Drive and Balboa Way. Additionally, the project will stripe bike lanes on both sides of the roadway. Between Discovery Bay Boulevard and Windward Point, the center two-way left turn lane (TWLTL) will be removed to provide the needed width. Between Windward Point and Newport Drive, one of the two westbound left turn lanes and the eastbound left turn lane will be removed to provide the needed width.

Project Length (ft): Varies

Date of Estimate: Feb. 19, 2015

Prepared by: T. Krakow

| | |
|---|---|
| Revision No. | |
| Revision Date | |
| Revised by | |

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| **Clipper Drive and Reef Court Traffic Circle** | | | | | |
| 1 | Demolition of existing asphalt | 177 | SF | $3.00 | $ 530 |
| 2 | Curb & Gutter | 47 | LF | $35.00 | $ 1,649 |
| 3 | Striping | 47 | LF | $3.00 | $ 141 |
| 4 | Irrigation and Landscaping | 177 | SF | $15.00 | $ 2,651 |
| 5 | Construction area Signs | 1 | LS | $1,500.00 | $ 1,500 |
| 6 | New signage | 1 | LS | $2,000.00 | $ 2,000 |
| | | | | Subtotal (LS): | $ 8,472 |
| **Clipper Drive and Balboa Way Traffic Circle** | | | | | |
| 7 | Demolition of existing asphalt | 177 | SF | $3.00 | $ 530 |
| 8 | Curb & Gutter | 47 | LF | $35.00 | $ 1,649 |
| 9 | Striping | 47 | LF | $3.00 | $ 141 |
| 10 | Irrigation and Landscaping | 177 | SF | $15.00 | $ 2,651 |
| 11 | Construction area Signs | 1 | LS | $1,500.00 | $ 1,500 |
| 12 | New signage | 1 | LS | $2,000.00 | $ 2,000 |
| | | | | Subtotal (LS): | $ 8,472 |
| **Bike Lanes from Discovery Bay Boulevard to Newport Drive** | | | | | |
| 13 | Restripe roadway | 3740 | LF | $6.00 | $ 22,500 |
| | | | | Subtotal (LS): | $ 22,500 |
| 14 | Construction Area Signs | 1 | LS | $1,500.00 | $ 1,500 |
| 15 | Temporary traffic control | 1 | LS | $2,000.00 | $ 2,000 |
| 16 | Prepare Water Pollution Control Plan | 1 | LS | $6,000.00 | $ 6,000 |
| 17 | Mobilization | 1 | LS | $ 4,900.00 | $ 4,900 |

CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 49,000

**Project Number** **4**

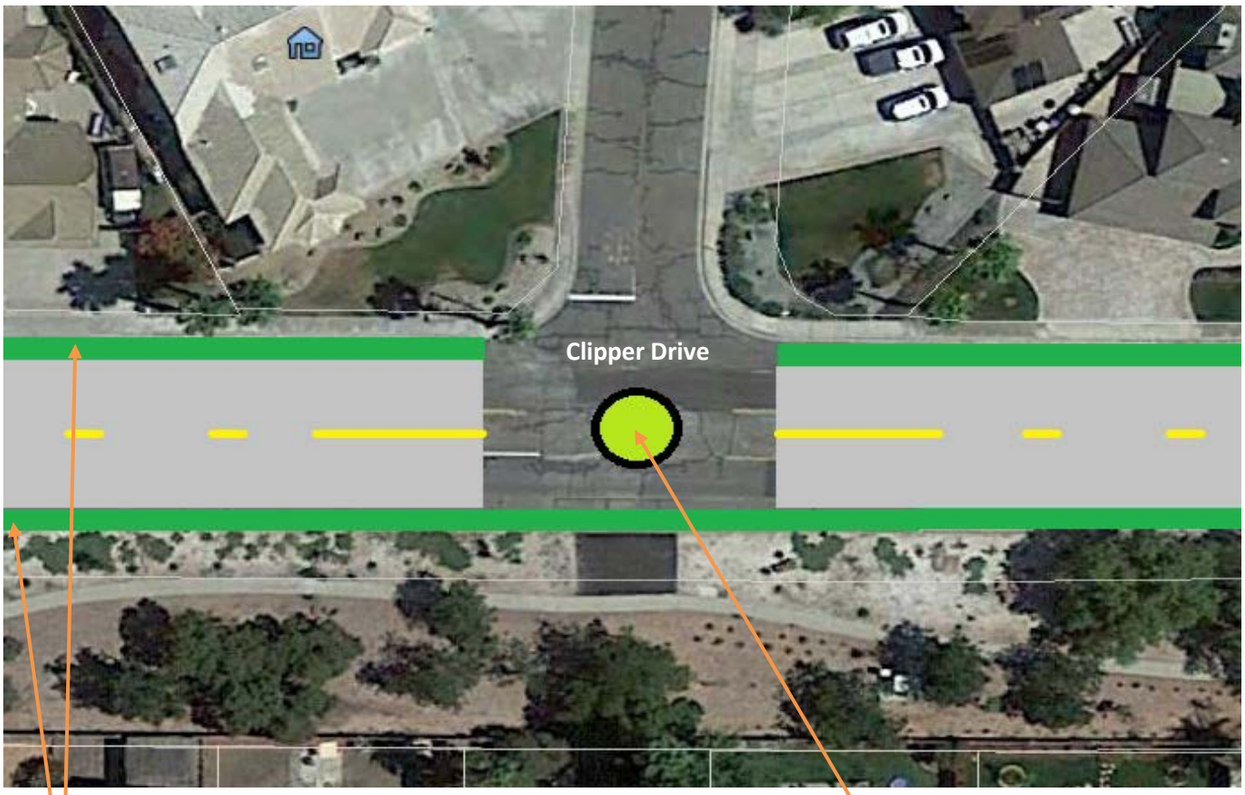
| | | | |
|---|---|---|---|
| Planning Engineering (TE) | $ 30,000 | Contract Items | $ 54,000 |
| Preliminary Engineering (Design/Survey)* | $ 50,000 | Other Costs (CON) | $ 20,000 |
| Utility Coordination (Design) | $ 30,000 | Contingency* | $ 10,000 |
| Environmental (Environmental, Real Property) | $ 30,000 | Subtotal (Contract Items) | $ 84,000 |
| R/W Engineering (Survey) | $ - | Subtotal (Plan) | $ 30,000 |
| Real Property Labor | $ - | Subtotal (PE) | $ 110,000 |
| R/W Acquisition | $ - | Subtotal (R/W) | $ - |
| Construction Engineering * | $ 20,000 | | |
| Environmental Monitoring and Mitigation Fees | $ - | | |
| SUBTOTAL of OTHER COSTS (ALL) | $ 160,000 | | |
| | | Grand Total | $ 224,000 |
| | | Current Year | 2015 |
| | | Escalation Year | 2015 |
| | | Escalation Rate | 0.0% |
| | | ➢ **TOTAL (in 2015 dollars)** | **$ 224,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)

* Construction Engineering is 15% of contract items. ($20,000 min.)

* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 4: Clipper Drive Traffic Calming**




Stripe New Bike Lanes
in existing curb-to-curb width

DKS Associates

# Planning Cost Estimate

1970 Broadway Ste 740, Oakland CA 94612

**Project Number** **5**

☐ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.

☐ Click here if this project is a surface treatment or overlay project.

Project Name: Bixler Road Widening and Bicycle Improvements

Project Location: Bixler Road from SR-4 to Byer Road

Description

Project will widen Bixler Road from SR-4 to Byer Road to provide 12' travel lanes with 8' shoulders/bike lanes. These improvements are expected to enhance vehicle and bicycle safety.

Project Length (ft): 5290

Date of Estimate: Feb. 19, 2015

Prepared by: T. Krakow

Revision No.
Revision Date
Revised by

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| 1 | Clearing and grubbing | 126960 | SF | $3.00 | $ 380,880 |
| 2 | Earthwork | 126960 | SF | $4.00 | $ 507,840 |
| 3 | Class 2 Aggregate Base | 9404 | CY | $65.00 | $ 611,289 |
| 4 | Hot Mix Asphalt (Type A) | 6285 | Ton | $125.00 | $ 785,565 |
| 5 | Restriping | 5290 | LF | $8.00 | $ 42,320 |
| 6 | Misc. Drainage Modifications | 1 | LS | $465,600.00 | $ 465,600 |
| 7 | Temporary traffic control | 1 | LS | $69,800.00 | $ 69,800 |
| 8 | Mobilization | 1 | LS | $ 286,300.00 | $ 286,300 |

CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 2,863,000

**Project Number** **5**

| | | | | |
|---|---|---|---|---|
| Planning Engineering (TE) | $ 430,000 | Contract Items | $ | 3,149,300 |
| Preliminary Engineering (Design/Survey)* | $ 788,000 | Other Costs (CON) | $ | 473,000 |
| Utility Coordination (Design) | $ 194,701 | Contingency* | $ | 473,000 |
| Environmental (Environmental, Real Property) | $ 233,642 | Subtotal (Contract Items) | $ | 4,095,300 |
| R/W Engineering (Survey) | $ - | Subtotal (Plan) | $ | 430,000 |
| Real Property Labor | $ - | Subtotal (PE) | $ | 1,216,343 |
| R/W Acquisition | $ - | Subtotal (R/W) | $ | - |
| Construction Engineering * | $ 473,000 | | | |
| Environmental Monitoring and Mitigation Fees | $ - | | | |
| SUBTOTAL of OTHER COSTS (ALL) | $ 2,119,343 | | | |
| | | Grand Total | $ | 5,741,643 |
| | | Current Year | | 2015 |
| | | Escalation Year | | 2015 |
| | | Escalation Rate | | 0.0% |
| | | ➢ **TOTAL (in 2015 dollars)** | **$** | **5,742,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)

* Construction Engineering is 15% of contract items. ($20,000 min.)

* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 5: Bixler Road Widening and Bicycle Improvements**

DKS Associates

# Planning Cost Estimate

1970 Broadway Ste 740, Oakland CA 94612

**Project Number** **6**

☐ Click here if the project schedule for this project is to be 50 days or more; also click here if this is a bridge project.
☐ Click here if this project is a surface treatment or overlay project.

Project Name: Byer Road Widening and Bicycle Improvements

Project Location: Byer Road from Byron Highway to Bixler Road

Description: Project will widen Byer Road from Byron Highway to Bixler Road to provide 12' travel lanes with 8' shoulders/bike lanes. These improvements are expected to enhance vehicle and bicycle safety.

Project Length (ft): 5260

Date of Estimate: Feb. 19, 2015

Prepared by: T. Krakow

Revision No.
Revision Date
Revised by

| No. | Description | Quantity | Units | Unit Cost | Total |
|---|---|---|---|---|---|
| 1 | Clearing and grubbing | 120980 | SF | $3.00 | $ 362,940 |
| 2 | Earthwork | 120980 | SF | $4.00 | $ 483,920 |
| 3 | Class 2 Aggregate Base | 8961 | CY | $65.00 | $ 582,496 |
| 4 | Hot Mix Asphalt (Type A) | 5989 | Ton | $125.00 | $ 748,564 |
| 5 | Restriping | 5260 | LF | $8.00 | $ 42,080 |
| 6 | Misc. Drainage Modifications | 1 | LS | $444,000.00 | $ 444,000 |
| 7 | Temporary traffic control | 1 | LS | $66,600.00 | $ 66,600 |
| 8 | Mobilization | 1 | LS | $ 273,100.00 | $ 273,100 |

CONTRACT ITEMS LESS MOBILIZATION (TO NEAREST 1,000) $ 2,731,000

**Project Number** **6**

| | | | |
|---|---|---|---|
| Planning Engineering (TE) | $ 410,000 | Contract Items | $ 3,004,100 |
| Preliminary Engineering (Design/Survey)* | $ 752,000 | Other Costs (CON) | $ 451,000 |
| Utility Coordination (Design) | $ 185,706 | Contingency* | $ 451,000 |
| Environmental (Environmental, Real Property) | $ 222,847 | Subtotal (Contract Items) | $ 3,906,100 |
| R/W Engineering (Survey) | $ - | Subtotal (Plan) | $ 410,000 |
| Real Property Labor | $ - | Subtotal (PE) | $ 1,160,553 |
| R/W Acquisition | $ - | Subtotal (R/W) | $ - |
| Construction Engineering * | $ 451,000 | | |
| Environmental Monitoring and Mitigation Fees | $ - | | |
| SUBTOTAL of OTHER COSTS (ALL) | $ 2,021,553 | | |
| | | Grand Total | $ 5,476,653 |
| | | Current Year | 2015 |
| | | Escalation Year | 2015 |
| | | Escalation Rate | 0.0% |
| | | ➢ **TOTAL (in 2015 dollars)** | **$ 5,477,000** |

* Preliminary Engineering is minimum 15% of contract items. (See Issues to Consider)
* Construction Engineering is 15% of contract items. ($20,000 min.)
* CONTINGENCY is 15% of contract items. ($10,000 min.)

**Project 6: Byer Road Widening and Bicycle Improvements**

# DETERMINATION THAT AN ACTIVITY IS EXEMPT FROM THE CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)

ACTIVITY NO.: **WO4065, CP# 18-02**

ACTIVITY NAME: **2018 Discovery Bay Area of Benefits Update**

PREPARED BY: **Laura Cremin** DATE: **January 31, 2018**

**This activity is not subject to the California Environmental Quality Act (CEQA) pursuant to Article 5, Section 15061 (b) (3) of the CEQA Guidelines.**

It can be seen with certainty that there is no possibility that the activity may have a significant adverse effect on the environment.

**DESCRIPTION OF THE ACTIVITY:** The Countywide Area of Benefit (AOB) program is a fee mechanism to fund road improvement projects that mitigate traffic impacts generated by new residential, commercial, industrial, and other developments. Within each AOB, money is collected from developers and allocated to the mitigation projects. The purpose of this AOB Update is to make adjustments to the current AOB program and fee schedule to meet changing traffic mitigation demands and needs within the Discovery Bay AOB boundary area.

A nexus study is currently being prepared by a traffic consultant for Discovery Bay AOB, which will provide the technical basis for the update. The proposed project list will be based upon traffic analysis and coordination with community groups and home builders.

This CEQA documentation addresses the adjustments to the Discovery Bay Area of Benefit Update only. Each roadway project covered by 2017 Countywide AOB Update will be addressed by individual, project specific CEQA documents.

**LOCATION:** The project is located in Discovery Bay. (*Figures 1 – 2*)

REVIEWED BY: _____ DATE: 1-30-18

Avé Brown
Principal Environmental Analyst
Environmental Services
Contra Costa County Public Works Department

APPROVED BY: _____ DATE: 2-5-18

Department of Conservation and
Development Representative

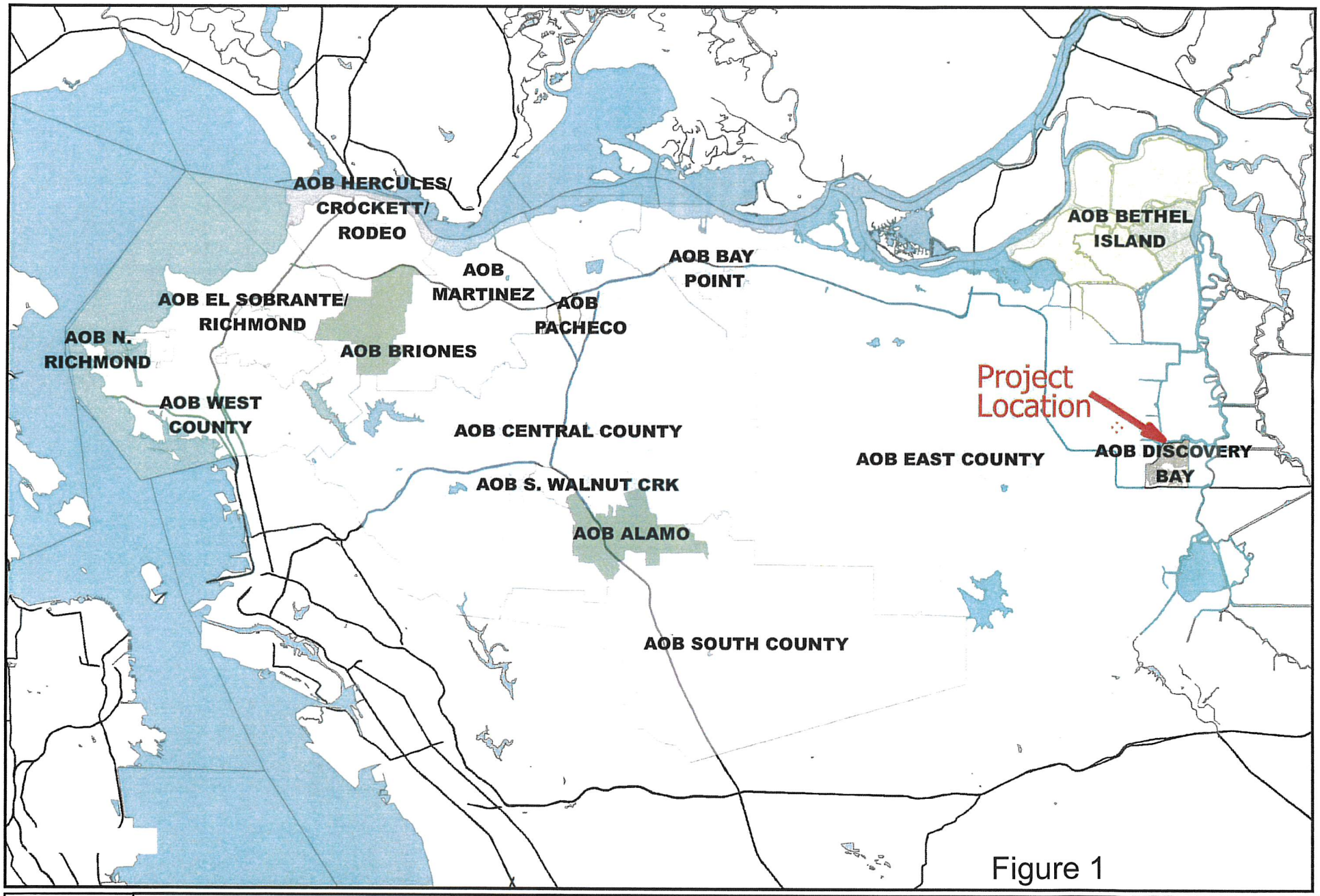



Figure 1

N

Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925-313-2333

PROJECT MAP

**CONTRA COSTA COUNTY**
**AREAS OF BENEFIT**

| FEDERAL ID NO: | DB: LL CB: ET | DATE: March 2016 | SHEET 1 OFXX |
|---|---|---|---|

Figure 2

Scale: 1 in = 2,555 ft

Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925-313-2333

OVERVIEW MAP

**Discovery Bay AOB Overview**

| FEDERAL ID NO: | DB: LL CB: | DATE: FEB 2015 | Page1 of 1 |
|---|---|---|---|

CALIFORNIA ENVIRONMENTAL QUALITY ACT

# Notice of Exemption

**To:** ☐ Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044

☒ County Clerk
County of: Contra Costa

**From:** Contra Costa County
Dept. of Conservation & Development
30 Muir Road
Martinez, CA 94553

Project Title: 2018 Discovery Bay Area of Benefit Update
Proj. No. WO4065, CP#18-02

Project Applicant: **Contra Costa County Public Works Department**

Project Location – **Specific**: This activity is located in Discovery Bay AOB boundary area

Project Location: Discovery Bay, CA

Project Location – County: **East Contra Costa**

**Description of Nature, Purpose and Beneficiaries of Project**: The Countywide Area of Benefit (AOB) program is a fee mechanism to fund road improvement projects that mitigate traffic impacts generated by new residential, commercial, industrial, and other developments. Within each AOB, money is collected from developers and allocated to the mitigation projects. The purpose of this AOB Update is to make adjustments to the current AOB program and fee schedule to meet changing traffic mitigation demands and needs within the Discovery Bay AOB boundary area.

A nexus study is currently being prepared by a traffic consultant for Discovery Bay AOB, which will provide the technical basis for the update. The proposed project list will be based upon traffic analysis and coordination with community groups and home builders.

This CEQA documentation addresses the adjustments to the Discovery Bay Area of Benefit Update only. Each roadway project covered by 2017 Countywide AOB Update will be addressed by individual, project specific CEQA documents.

Name of Public Agency Approving Project: **Contra Costa County**

Name of Person or Agency Carrying Out Project: **Contra Costa County Public Works Department**

**Exempt Status**:

☐ Ministerial Project (Sec. 21080(b) (1); 15268;
☐ Declared Emergency (Sec. 21080(b)(3); 15269(a));
☐ Emergency Project (Sec. 21080(b)(4); 15269(b)(c));
☐ Categorical Exemption: Class ( )
☐ Other Statutory Exemption, Code No.:_____
☒ General Rule of Applicability [Article 5, Section 15061 (b)(3)]

**Reasons why project is exempt:** This activity is no subject to the California Environmental Quality Act (CEQA), pursuant to Article 5 Section 15061 (b)(3) of the CEQA guidelines.

Lead Agency Contact Person: Laura Cremin - **Public Works Dept.** Area Code/Telephone/Extension: (925) 313-2015

If filed by applicant:

1. Attach certified document of exemption finding.
2. Has a Notice of Exemption been filed by the public agency approving the project? ☐ Yes ☐ No

Signature: _____ Date: _____ Title: _____

☐ Signed by Lead Agency ☐ Signed by Applicant

**AFFIDAVIT OF FILING AND POSTING**

I declare that on _____ I received and posted this notice as required by California Public Resources Code Section 21152(c). Said notice will remain posted for 30 days from the filing date.

_____ _____
Signature Title

**Applicant:**
Public Works Department
255 Glacier Drive
Martinez, CA 94553
**Attn: Laura Cremin**
**Environmental Services Division**
**Phone: (925) 313-2015**

**Department of Fish and Game Fees Due**
☐ EIR - $3,168.00
☐ Neg. Dec. - $2,280.75
☐ DeMinimis Findings - $0
☒ **County Clerk - $50**
☒ **Conservation & Development - $25**

**Total Due: $75.00**
Total Paid $ _____
Receipt #: _____

**ORDINANCE NO. 2018-16**

**(Uncodified)**

**(Discovery Bay Area of Benefit Fees)**

The Board of Supervisors of Contra Costa County ordains as follows:

**SECTION 1. Summary and Purpose.** This ordinance provides for the repeal of Contra Costa County Ordinance No. 97-27, the reestablishment of the Discovery Bay Area of Benefit, and the adoption of revised transportation mitigation fees for transportation improvements needed to mitigate transportation impacts of new development in the area of benefit through 2040.

**SECTION 2. Authority.** This ordinance is enacted pursuant to Government Code sections 66001, *et seq*., 66484, and 66484.7, and Division 913 of the Contra Costa County Ordinance Code, and other applicable laws and ordinances.

**SECTION 3. Recitals and Findings of Fact.**

(a) Under the Mitigation Fee Act, California Government Code section 66000, *et seq*., the County is authorized to charge a development-project applicant, as a condition of project approval, a fee that is proportional to the cost of public improvements necessary to serve the development project, or to alleviate impacts caused by the development project. Government Code sections 66484 and 66484.7 specifically authorize the County to impose those fees to defray the actual or estimated costs of new or reconstructed bridges over waterways, railways, freeways, major thoroughfares, and pedestrian, bicycle, transit, and traffic-calming facilities that serve new development within a specific area of benefit.

(b) The Discovery Bay Area of Benefit was last reestablished by the Board of Supervisors' July 22, 1997 adoption of Ordinance No. 97-27. Ordinance No. 97-27 adjusted fees imposed on each new development within the Discovery Bay Area of Benefit, to fund specified new bridges and thoroughfares, or expansions of existing bridges and thoroughfares, necessary to serve the development project or alleviate traffic impacts or demands caused by the project. Those fees funded many significant projects. Because of changes in development and traffic patterns in the area, the Public Works Department reevaluated the transportation improvements needed to serve new development in the Discovery Bay Area of Benefit through 2040.

(c) The County's April 2018 Development Program Report ("Report"), including the April 2018 "Nexus Study, Discovery Bay Area of Benefit" ("Nexus Study") attached as Exhibit D to the Report, have been prepared to determine the amount of the fees necessary to fund new development's share of the estimated costs of new or reconstructed bridges over waterways, railways, freeways, major thoroughfares, pedestrian, bicycle, transit, and traffic-calming facilities (the "Transportation Improvements") that are necessary to meet traffic demands generated by new development within the Discovery Bay Area of Benefit through 2040. The Transportation Improvements are more particularly described in the Report, the Nexus Study, and Sections 5.6 (Roadway and Transit Network Plans) and 5.8 (Pedestrian Facilities and

Bikeways) of Chapter 5 (Transportation and Circulation Element) of the County's 2005-2020 General Plan.

(d) The Report and Nexus Study propose a fair and equitable method for allocating a portion of the costs of the Transportations Improvements to new development within the Discovery Bay Area of Benefit. The cost of each of the Transportation Improvements in the Report and Nexus Study is reasonable. The total amount of revenue expected to be generated from fees charged and collected under this ordinance will not exceed the estimated cost of the Transportation Improvements attributable to new development within the Discovery Bay Area of Benefit. The County will rely on sources other than transportation mitigation fee revenue to pay Transportation Improvement costs not allocated to new development. The Transportation Improvements are necessary and desirable within the Discovery Bay Area of Benefit.

(e) Payment of the fees adopted by this ordinance shall not be required unless the major thoroughfares or planned bridge facilities are in addition to, or a reconstruction of, any existing major thoroughfares or planned bridge facilities serving the Discovery Bay Area of Benefit at the time that the boundaries of that area of benefit are established by this ordinance. Because all of the Transportation Improvements are in addition to, or a reconstruction or expansion of, existing thoroughfares and bridge facilities, the fees adopted by this ordinance may be imposed on new development projects within the Discovery Bay Area of Benefit.

(f) Pursuant to Government Code section 66001, the Board of Supervisors further finds:

(1) As determined in the Nexus Study, the purpose of the fees adopted and collected pursuant to this ordinance is to fund new development's share of the estimated costs of the Transportation Improvements identified in the Nexus Study.

(2) As determined in the Nexus Study, there is a reasonable relationship between the use of revenue generated by the fees and the type of new development projects on which those fees shall be imposed.

(3) As determined in the Nexus Study, there is a reasonable relationship between the need for the Transportation Improvements that shall be funded by fee revenue, and the types of new development within the Discovery Bay Area of Benefit on which those fees shall be imposed.

(4) As determined in the Nexus Study, there is a reasonable relationship between the amount of the fee imposed on each type of new development within the Discovery Bay Area of Benefit, and the cost of the Transportation Improvements to be funded by fee revenue.

(g) The Board of Supervisors further finds as follows:

(1) Pursuant to Government Code sections 54986, 65091, 66017, 66018, 66474.2, subdivision (b), 66484, and 66484.7, and Division 913 of the Contra Costa County Ordinance Code, notice of a public hearing on this ordinance was given and published,

and the public hearing was held. The Nexus Study and Report were made available to the public at least ten (10) days before the hearing.

(2) If, within the time when protests may be filed under the provisions of this ordinance, there is a written protest, filed with the Clerk of the Board of Supervisors, by owners of more than one-half of the area of the property within the Discovery Bay Area of Benefit, and sufficient protests are not withdrawn so as to reduce that area to less than one-half of the area of the property within the Discovery Bay Area of Benefit, these proceedings shall be abandoned and this ordinance shall not be adopted. However, the Board of Supervisors has considered all written protests, and all written and oral testimony offered at the hearing, and finds that no majority protest exists.

(3) At the public hearing on this ordinance, the boundaries of the Discovery Bay Area of Benefit, the estimated costs of the Transportation Improvements, and a fair method of allocation of those costs to new development projects within the Discovery Bay Area of Benefit were established.

**SECTION 4. Definitions.** For the purpose of this ordinance, the following terms have the following meanings:

(a) "Development project" or "new development project," means either of the following located within the Discovery Bay Area of Benefit:

(1) Any new construction, or any addition, extension, or enlargement of an existing structure or unit, which includes a dwelling unit for residential use or the floor area of commercial, office or industrial use, requiring a building permit from the County; or

(2) Any conversion or change in use of an existing structure requiring a building permit from the County that would result in a change in the land use type.

(b) "Square foot" means a square foot of gross floor area within the interior walls of a building or portions thereof.

(c) "Dwelling-unit-equivalent" means the same level of traffic impacts attributable to one dwelling unit, as determined in the Report and Nexus Study.

**SECTION 5. Fee Adoption and Collection.** Fees that apply to new development within the Discovery Bay Area of Benefit are hereby adopted, and shall be charged and collected, as specified in this section.

(a) Amount of the Fees.

(1) Discovery Bay Area of Benefit Fees. The following schedule of fees shall be effective on the effective date of this ordinance:

| Land Use Type | Fee | Per Unit |
|---|---|---|
| Single-Family Residential | $ 9,244.00 | per dwelling unit |
| Multi-Family Residential | $ 5,675.00 | per dwelling unit |
| Commercial/Retail | $ 9.11 | per square foot |
| Office | $ 7.37 | per square foot |
| Industrial | $ 5.85 | per square foot |
| Other | $ 9,244.00 | per dwelling unit equivalent |

(2) Adjustment of Fees Beginning January 1, 2019. On January 1, 2019, and on each January 1 thereafter, the amounts of the fees set forth in Section 5(a)(1), above, shall be increased or decreased by a percentage equal to the percentage change, if any, in the Engineering News-Record Construction Cost Index for the San Francisco Bay Area for the 12-month period ending September 30 of the prior year.

(b) Calculation of the Discovery Bay Area of Benefit Fee. Unless otherwise specified in this ordinance, each new development project shall pay a fee calculated as described in this Section 5(b).

(1) Calculation of the Discovery Bay Area of Benefit Fee for New Development that Expands, Extends, or Replaces an Existing Development. If any new development project will replace an existing development, or if any new development project will expand or extend an existing development, by increasing the number of dwelling units or square feet of floor area of, or the number of dwelling-unit-equivalents attributable to, the existing development, the fee imposed on the new development project shall be calculated as follows:

(A) For residential land uses: The applicable transportation mitigation fee in Section 5(a) of this ordinance is multiplied by the difference of: (i) either the number of dwelling units attributable to the new development that replaces an existing development, or the number of dwelling units attributable to the development after the expansion or extension of the existing development; minus (ii) the number of dwelling units attributable to the existing development. That calculation is expressed as follows:

[Applicable fee per-dwelling unit] x [(number of dwelling units after replacement or expansion/extension) – (number of dwelling units before replacement or expansion/extension)]

(B) For office, industrial, and commercial/retail land uses: The applicable fee in Section 5(a) of this ordinance is multiplied by the difference of: (i) either the number of square feet of the new development that will replace an existing development, or the number of square feet of the development after expansion or extension of the existing development; minus (ii) the number of square feet of the existing development. That calculation is expressed as follows:

[Applicable fee per square foot] x [(number of square feet after replacement or expansion/extension) – (number of square feet before replacement or expansion/extension)]

(C) For "other" land uses: The applicable fee in Section 5(a) of this ordinance is multiplied by the difference of: (i) either the number of dwelling-unit-equivalents attributable to the new development that will replace an existing development, or the number of dwelling-unit-equivalents attributable to the development after expansion or extension of the existing development; minus (ii) the number of dwelling-unit-equivalents attributable to the existing development. That calculation is expressed as follows:

[(Applicable fee per dwelling-unit-equivalent)] x [(number of dwelling-unit-equivalents after replacement or expansion/extension) – (number of dwelling-unit-equivalents before replacement or expansion/extension)]

The County will determine the number of dwelling unit equivalents that will be generated by the new development project based on: information generated by project-specific traffic studies prepared by a professional engineer; the standards set forth in the then-current edition of the Institute of Transportation Engineers Trip Generation Manual ("ITE Manual"); and other information provided by the new development project applicant that the County deems relevant.

(D) Notwithstanding any other provision of this ordinance, if the result of the calculation required by this Section 5(b)(1) is zero or a negative number, then no fee shall be imposed on the new development project.

(2) Calculation of the Discovery Bay Area of Benefit Fee for New Development that Does Not Expand, Extend, or Replace an Existing Development. For any new development project that does not expand, extend, or replace an existing development, the fee imposed on the new development project shall be calculated as follows:

(A) For residential land uses: The applicable fee in Section 5(a) of this ordinance is multiplied by the number of dwelling units attributable to the new development. That calculation is expressed as follows:

(Applicable fee per dwelling unit) x (number of dwelling units)

(B) For office, industrial, and commercial/retail land uses: The applicable fee in Section 5(a) of this ordinance is multiplied by the number of square feet of the new development. That calculation is expressed as follows:

(Applicable fee per square foot) x (number of square feet of floor area)

(C) For "other" land uses: The applicable fee in Section 5(a) of this ordinance is multiplied by the number of dwelling unit equivalents attributable to the new development. That calculation is expressed as follows:

(Applicable fee per dwelling-unit-equivalent) x (number of dwelling-unit-equivalents attributable to new development)

The County will determine the number of dwelling unit equivalents attributable to the new development project based on: information generated by project-specific traffic studies prepared by a professional engineer; the standards set forth in the then-current edition of the ITE Manual; and other information provided by the new development project applicant that the County deems relevant.

(c) Applicability and Establishment of Discovery Bay Area of Benefit Boundaries. The transportation mitigation fees specified in this ordinance shall apply to all new development within the Discovery Bay Area of Benefit, unless otherwise specified in this ordinance. The boundaries of the Discovery Bay Area of Benefit are more particularly described in the legal description, and are depicted on the map, attached hereto together as Exhibit A and incorporated herein by reference. The boundaries of the Discovery Bay Area of Benefit are hereby readopted and reestablished in accordance with Government Code sections 66484 and 66484.7.

(d) Time of Collection. The fee attributable to each new development project shall be paid before the County issues a building permit for the new development project. Payment of the fee shall be a condition of building permit issuance, as specified in Chapter 913-4 of the County Ordinance Code.

(e) Exemptions. No new development project is exempt from payment of a fee under this ordinance, unless, as of the date of the notice published pursuant to Government Code Section 66474.2, subdivision (b), either of the following apply:

(1) The new development project has perfected an exemption from the fee under the vesting tentative map law; or

(2) The new development project has entered into a development agreement with the County that expressly excludes assessment of additional fees on that project.

(f) Fee Reductions and Credits.

(1) A project applicant may request a reduction in fees from the County if it is determined that the project will generate a lower number of trips than data provided by the ITE Manual that was used as the basis for the Report. A requested fee reduction must be based on a traffic study that determines that the traffic impacts of the proposed development would generate fees that are less than the fees set forth in Section 5, above. The methodology for conducting the study shall be developed and approved by the County. The County shall determine the appropriate fee reduction based upon the proportionate reduction in traffic impacts demonstrated in the traffic study.

(2) A project applicant may receive a credit against fees for the dedication of land for right-of-way and/or construction of any portion of the Transportation Improvements to be funded with the fees collected pursuant to this ordinance, where the right-of-way or construction is beyond that which would otherwise be required for approval of the proposed development. The calculation of the amount of credit against fees for these dedications or improvements shall be based on a determination by the County that the credits are exclusive of the dedications, setbacks, improvements, and/or traffic mitigation measures that are required by ordinance or local standards. In addition, the credit shall be calculated based upon the actual cost of construction of improvements or, in the case of land dedication, on an independent appraisal approved by the County. All fee credits and reimbursements for dedications in lieu of payment of any transportation mitigation fee, or portion thereof, required to be paid by this ordinance shall be subject to an agreement executed in accordance with the Traffic Fee Credit and Reimbursement Policy, approved by the Board of Supervisors on June 5, 2007, which is made a part hereof and incorporated herein by reference.

(g) Fee Waivers.

(1) Upon written request of the project applicant, the Public Works Director may waive the fees collected under this ordinance for dwelling units that the Public Works Director determines, in a written finding, fit into one of the following categories: (1) rental units affordable to households earning less than 80% of the area median income; or (2) ownership units affordable to households earning less than 120% of the area median income.

(2) As a condition of such waiver, the project applicant shall enter into a regulatory agreement with the County, guaranteeing the use, occupancy, affordability, and term of affordability of such dwelling units. Rental units for which a waiver is granted under this section shall be restricted to that use for a minimum of 55 years. Ownership units for which a waiver is granted under this section shall be restricted to that use for a minimum of 30 years.

(h) Fee Waiver for Inclusionary Housing Units. In lieu of the fee waiver for affordable housing units as set forth in Section 5(g), development projects that are subject to Chapter 822-4 of the County Ordinance Code shall be eligible for a waiver of the fees collected under this ordinance as follows:

(1) Fees shall be waived for each rental unit to be developed and rented as an inclusionary unit under the terms and conditions of Section 822-4.410(a) of the County Ordinance Code.

(2) Fees shall be waived for each for-sale unit to be developed and sold as an inclusionary unit under the terms and conditions of Section 822-4.410(b) of the County Ordinance Code.

(3) If a fee is paid in lieu of constructing some or all inclusionary units in a development project, pursuant to Section 822-4.404 of the County Ordinance Code, the fees collected under this ordinance shall be waived for the number of inclusionary units for which the in-lieu fee is paid.

(i) Senior Housing and Congregate Care. Nothing in this ordinance shall be construed to abridge or modify the Board's discretion, upon proper application for a senior housing or congregate care facility, to adjust or to waive the fees required to be paid under this ordinance, pursuant to Government Code Section 65915.

(j) Deposit of Fee Revenue. Revenue from fees paid pursuant to this ordinance shall be deposited into a fund covering the Transportation Improvements identified in the Report and Nexus Study, and shall be separately accounted for. The funds shall not be commingled with other funds, except where the funds are temporarily invested pursuant to Government Code section 66006. Fee revenues deposited in the fund shall be expended solely for the purposes described in this ordinance. Any interest earned on deposits in the fund also shall be deposited in that fund and used for those purposes.

(k) Limitations. No fees collected pursuant to this ordinance may be used to reimburse the construction costs of bridge or thoroughfare facilities serving the Discovery Bay Area of Benefit on the effective date of this ordinance. However, fee revenues may be used to reimburse any general fund monies, or other County revenues, advanced to pay for any planned bridge or thoroughfare improvements.

**SECTION 6. Reporting and Accounting Requirements.**

(a) Annual Reporting. Within 180 days after the last day of each fiscal year, the Public Works Director, or designee, shall make available to the public a report regarding the fund established for receipt of deposits of the fees collected by the County pursuant to this ordinance. The report shall be reviewed by the Board of Supervisors at a regularly scheduled meeting that will be held, and notice of which will be provided, in accordance with Government Code Section 66006. The report shall contain the following information for the fiscal year:

(1) A brief description of the type of fee in the account or fund.

(2) The amount of the fees.

(3) The beginning and ending balance of the account or fund.

(4) The amount of the fees collected and the interest earned.

(5) An identification of each public improvement on which fees were expended and the amount of the expenditures on each improvement, including the total percentage of the cost of the public improvement that was funded with those fees.

(6) An identification of an approximate date by which the construction of the public improvement will commence if the Board determines that sufficient funds have been collected to complete financing on an incomplete public improvement, and the public improvement remains incomplete.

(7) A description of each interfund transfer or loan from the account or fund, including the public improvement on which the transferred or loaned fees will be expended, and, in the case of an interfund loan, the date on which the loan will be repaid, and the rate of interest that the account or fund will receive on the loan.

(8) The amount of refunds made pursuant to Government Code section 66001, subdivision (e), and any allocations pursuant to Government Code section 66001, subdivision (f).

(b) Periodic Review by the Board. In the fifth fiscal year following the first deposit into the fund established for receipt of deposits of the fees collected pursuant to this ordinance, and at least once every five years thereafter, the Board of Supervisors shall make all of the following findings with respect to that portion of the Discovery Bay Area of Benefit fund remaining unexpended, whether committed or uncommitted, pursuant to Government Code Section 66001:

(1) Identify the purpose to which the fees are to be put.

(2) Demonstrate a reasonable relationship between the fees and the purpose for which they are charged.

(3) Identify all sources and amounts of funding anticipated to complete financing of incomplete transportation improvements identified in the Report and Nexus Study.

(4) Designate the approximate dates on which the funding referred to in Section 6(b)(3), above, is expected to be deposited into the appropriate account or fund.

**SECTION 7. Repeal of Existing Fees.** Except as specified in this Section 7 and Section 9, below, Contra Costa County Ordinance No. 97-27 is hereby repealed and superseded by this ordinance, as of the effective date of this ordinance. However, this repeal shall not affect any fees that were imposed on any development project pursuant to Ordinance No. 97-27 prior to the effective date of this ordinance, which fees shall be paid and collected under the provisions of Ordinance No. 97-27.

**SECTION 8. Judicial Review.** Any judicial action or proceeding to attack, review, set aside, void, or annul the fees established by this ordinance shall be commenced within one hundred twenty (120) days after the effective date of this ordinance. Any action to attack any adjustment to the schedule of fees pursuant to Section 5(a)(2) of this ordinance shall be commenced within one hundred twenty (120) days after the effective date of that adjustment.

**SECTION 9. Severability.** Notwithstanding any other provision of this ordinance to the contrary, if a court of competent jurisdiction determines any fee set forth in Section 5 of this ordinance is invalid or unenforceable, the comparable fee adopted by Ordinance No. 97-27, shall be deemed not to have been repealed and shall remain in effect and subject to the remaining provisions of this ordinance.

Notwithstanding any other provision of this ordinance to the contrary, if a court of competent jurisdiction determines this ordinance is invalid or unenforceable, Ordinance No. 97-27 shall be deemed not to have been repealed and shall remain in full force and effect.

**SECTION 10. Effective Date.** This ordinance shall become effective 60 days after passage, and, within 15 days of passage, this ordinance shall be published once, with the names of the Supervisors voting for and against it, in the East Bay Times, a newspaper of general circulation published in this County. Pursuant to section 913-6.026 of the Contra Costa County Ordinance Code, the Clerk of the Board shall promptly file a certified copy of this ordinance with the County Recorder.

PASSED and ADOPTED on _____by the following vote:

AYES:
NOES:
ABSENT:
ABSTAIN:

_____
Board Chair

ATTEST:
DAVID J. TWA, Clerk of the Board
of Supervisors and County Administrator

By _____
Deputy

Attachments: Exhibit A (Map and Legal Description of Discovery Bay Area of Benefit Boundaries)

SMS
H:\Client Matters\Public Works\AOB Fees\Discovery Bay AOB\FINAL Discovery Bay AOB Fee Ordinance - 041818.doc

Exhibit A

# Area of Benefit Boundary Legal Description

A portion of Sections 23, 24, 25, 26, 35, and 36, Township 1 North, Range 3 East, Mount Diablo Meridian, in the county of Contra Costa, State of California, described as follows:

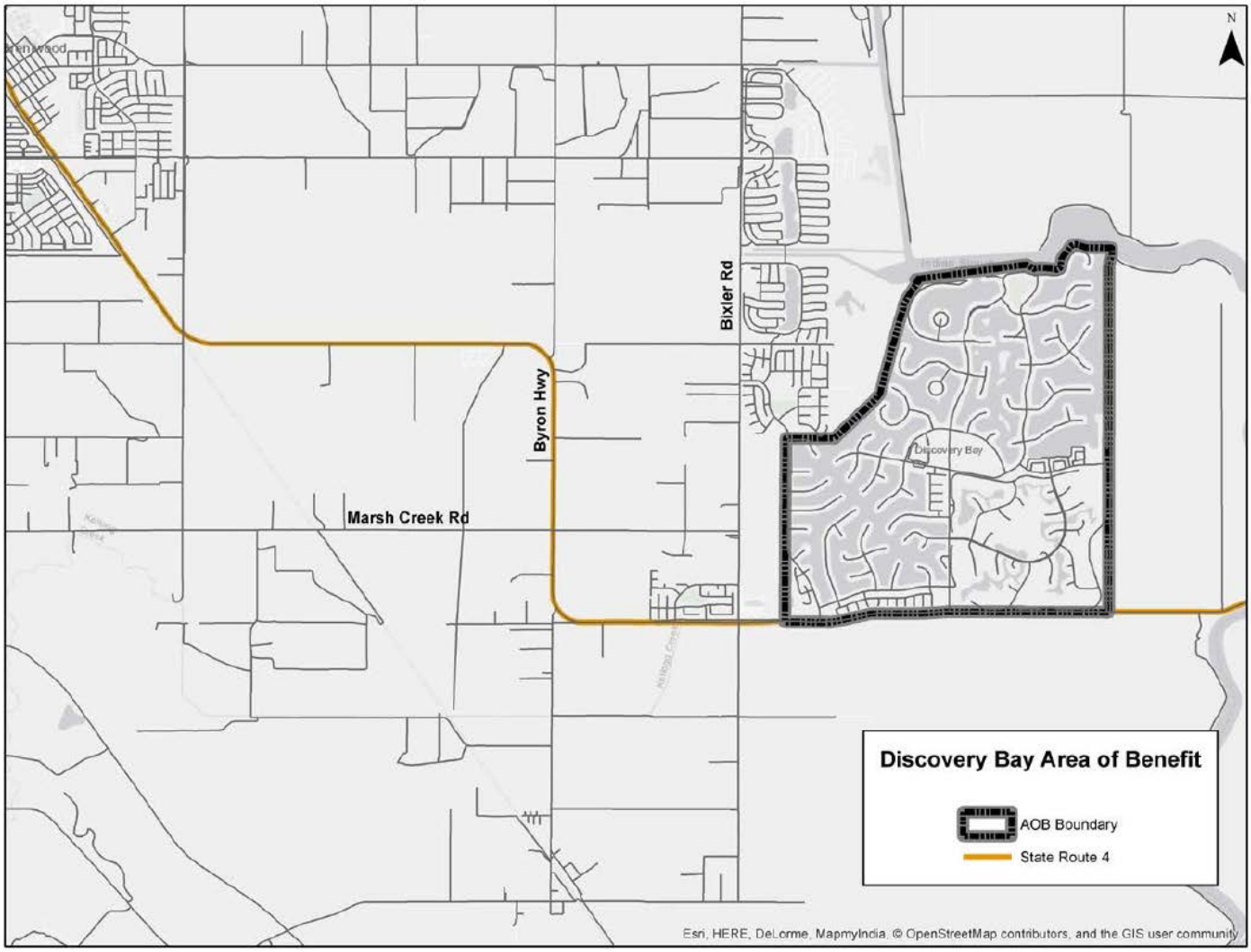
Beginning at the southeast corner of Lot "E" of Subdivision 7252 filed September 15,1989 in Book 337 of Maps at page 30; thence westerly along the northerly right of way line of State Highway 4, being also the south line of said Lot "E" and the south line of Lot "J" of Subdivision 7106 filed June 21,1989 in Book 334 of Maps at page 39, north 89°12'29" west 4600.00 feet more or less to the east line of Lot 184 of Subdivision 6561 filed July 22, 1985 in Book 291 of Maps at page 39; thence continuing along said northerly right of way line, thru said Lot 184, westerly 312.22 feet to the southeast corner of Parcel "A" of Subdivision 6760 filed June 23, 1988 in Book 323 of Maps at page 9; thence continuing along said right of way line, being also the southerly line of Parcels "A", "AA" and "B" of said Subdivision 6760, westerly 4352.86 feet to the southwest corner of said Parcel "B"; thence leaving said right of way line and along the westerly line of said Subdivision, thence north 00°56'27" east 2520.11 feet; thence north 00°59'24" east 628.84 feet to the northwest corner of said Subdivision; thence along the westerly line of Subdivision 6979 filed March 6, 1989 in Book 331 of Maps at page 20, north 00°59'24" east 1100.80 feet; thence along the westerly line of Subdivision 7140 filed April 8, 1996 in Book 385 of Maps at page 43, north 00°59'32" east 916.31 feet to the northwest corner of said Subdivision; thence along the north line of said Subdivision, north 89°08'08" east 1388.74 feet to the northeast corner of said Subdivision; thence north 47°37'44" east 1249.47 feet along the northwesterly line of Subdivision 6144 filed March 28, 1984 in Book 277 of Maps at page 42; thence north 47°37'44" east 265.13 feet along the northwesterly line of Subdivision 4687 filed May 24, 1978 in Book 211 of Maps at page 5; thence northeasterly along a tangent curve to the left having a radius of 660.00 feet through an angle of 14°02'20", an arc distance of 161.71 feet to a point on the southern boundary of Subdivision 4206 filed July 6, 1972 in Book 148 of Maps at page 1; thence along said boundary, north 42°37'00" west 12.66 feet; thence north 47°23'00" east 123.10 feet; thence north 16°18'57" east 436.29 feet to the southeast corner of Subdivision 4205 filed June 22, 1972 in Book 147 of Maps at page 27; thence along the westerly lines of said Subdivision 4205 the following six courses; thence north 16°18'57" east 52.94 feet; thence north 15°55'12" east 300.00 feet; thence north 15°43'32" east 600.21 feet; thence north 14°59'17" east 344.51 feet; thence north 17°33'17" east 300.09 feet; thence north 16°03'32" east 220.63 feet to an angle point in Lot 18 of Subdivision 5811 filed August 18, 1980 in Book 236 of Maps at page 4, thence along the westerly boundary of said Subdivision 5811 the following nine courses; north 16°03'32" east 139.38 feet; thence north 18°40'12"east 140.12 feet; thence north 08°17'27"east 106.18 feet; thence north 28°33'12" east 147.78 feet; thence north 30°02'22" east 130.07 feet; thence north 35°10'12" east 170.29 feet; thence north 33°30'07" east 312.11 feet; thence north 70°55'07" east 5.88 feet to the northeast corner of Lot 1 of said Subdivision, also being the northwest corner of Lot 70 of "Amended Map" Subdivision 4077 filed July 8, 1974 in Book 170 of Maps at page 36; thence along the northerly line of said Subdivision, north 70°55'07" east 65.07 feet; thence north 73°22'17" east 52.68 feet; thence north 82°50'17" east 225.73 feet; thence along the northern line of Subdivision 4224 filed December 19, 1973 in Book 165 of Maps at page 38 north 82°50'17" east 31.00 feet; thence north 83°04'37" east 507.95 feet; thence north 84°25'17" east 13.83 feet; thence along the northerly line of Subdivision 4077, north 84°25'17" east 314.46 feet; thence north 81°53'52" east 372.07 feet; thence along the northerly line of Amended Map Subdivision 3653 filed June 13, 1974 in Book 169 of Maps at page 42, north 81°53'52" east 46.99 feet; thence north 82°39'37" east 260.45 feet more or less to a point of curvature on the north line of Lot

16, Subdivision 4223 filed December 19, 1973 in Book 165 of Maps at page 31; thence along the northerly line of said Subdivision, north 83°04'37" east 1009.26 feet to the western line of Lot 80 in Subdivision 4076 filed December 9, 1970 in Book 134 of Maps at page 19; thence along said Lot 80, north 00°58'07" east 8.16 feet; thence north 82°22'27" east 60.45 feet to the northeast corner of said Lot being also the northwestern corner of Lot 15 Subdivision 4378 filed June 10, 1977 in Book 198 of Maps at page 8; thence along the northerly line of said Subdivision the following seven courses; thence north 82°22'27" east 120.00 feet; thence north 87°17'02" east 82.74 feet; thence south 58°54'13" east 168.88 feet; thence south 69°31'13 east 43.97 feet; thence north 82°38'57" east 172.35 feet; thence south 87°58'43" east 73.67 feet; thence south 83°56'58" east 83.15 feet; thence along the northerly line of Subdivision 5353 filed December 21, 1978 in Book 219 of Maps at page 44 the following twenty courses; thence south 83°56'58" east 163.59 feet; thence south 79°55'08" east 176.44 feet; thence north 77°14'02" east 62.13; thence north 57°14'12" east 49.86 feet; thence north 43°06'52" east 26.12 feet; thence north 21°46'37" east 32.03 feet; thence north 14°54'32" east 55.15 feet; north 02°38'12" east 76.77 feet; thence north 10°04'07" east 93.55 feet; thence north 27°32'47" east 87.19 feet; thence north 34°36'52 east 63.80 feet; thence north 45°23'17" east 71.36 feet; thence north 35°01'32" east 173.30 feet; thence north 44°21'42" east 78.12 feet; thence north 67°09'37" east 76.44 feet; thence south 81°13'28" east 71.20 feet; thence south 70°22'33" east 96.67 feet; thence south 71°02'13" east 80.05 feet; thence south 76°51'23" east 3.33 feet; thence south 89°02'35" east 779.76 feet; thence along the easterly line of said Subdivision the following three courses; thence south 00°57'32" west 216.15 feet; thence south 77°22'13" east 31.45 feet; thence south 13°53'01" west 327.93 feet; thence southerly along the easterly line of said Subdivision 5353, the easterly line of Subdivision 5586 filed November 7, 1979 in Book 233 of Maps at page 13, the easterly line of Subdivision 6026 filed April 2, 1981 in Book 250 of Maps at page 33, the easterly line of Subdivision 6145 filed June 17, 1982 in Book 264 of Maps at page 32, the easterly line of Marina Road recorded July 17, 1981 in series No. 81-88549, the easterly line of the parcel described in the grant deed recorded April 23, 1979 in Book 9320 Official Records page 418, the easterly line of the parcel described in the grant deed recorded June 20, 1972 in Book 6678 Official Records page 355, and the easterly line of said Subdivision 7252 (337 M 30), south 00°44'31" west 9792.35 feet to the point of beginning.

Exhibit

B

# Area of Benefit Boundary Plat Map



Contra Costa County
Public Works
Department

Brian M. Balbas, Director
Deputy Directors
Stephen Kowalewski, Chief
Mike Carlson
Carrie Ricci
Joe Yee

ADOPTED BY BOARD OF SUPERVISORS
ON _____

# Development Program Report for the Discovery Bay Area of Benefit

April, 2018

Prepared Pursuant to Section 913 of the County Ordinance Code

Prepared by and for:
Contra Costa County Public Works Department, Transportation Engineering Division and Department of Conservation and Development, Community Development Division

*"Accredited by the American Public Works Association"*
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# Table of Contents

**CHAPTER 1: INTRODUCTION AND PURPOSE** ..... 1
**CHAPTER 2: BACKGROUND** ..... 2
**CHAPTER 3: LOCATION AND BOUNDARY** ..... 3
**CHAPTER 4: GENERAL PLAN RELATIONSHIP** ..... 3
**CHAPTER 5: PROJECT LIST** ..... 4
**CHAPTER 6: DEVELOPMENT POTENTIAL** ..... 6
**CHAPTER 7: ESTIMATED COST OF ROAD IMPROVEMENTS** ..... 7
**CHAPTER 8: METHOD OF COST APPORTIONMENT** ..... 8
**CHAPTER 9: FEE RATES** ..... 10
CALCULATION OF FEES ..... 10
RECOMMENDED FEES ..... 11
**CHAPTER 10: PROGRAM FINANCE CONSIDERATIONS** ..... 12
OTHER FUNDING SOURCES ..... 12
REVIEW OF FEES ..... 12
COLLECTION OF FEES ..... 12
INTEREST ON FEES ..... 13
DEDICATION IN LIEU OF FEE ..... 13

# List of Tables

TABLE 1. DISCOVERY BAY AOB PROJECTS 5
TABLE 2. DEVELOPMENT POTENTIAL SUMMARY 6
TABLE 3. DWELLING UNIT EQUIVALENT (DUE) RATES 8
TABLE 4. GROWTH IN DUE'S 9
TABLE 5. FEE CALCULATIONS 10
TABLE 6. FEE SCHEDULE TO IMPLEMENT 11

# List of Exhibits

EXHIBIT A. AREA OF BENEFIT BOUNDARY LEGAL DESCRIPTION
EXHIBIT B. AREA OF BENEFIT BOUNDARY PLAT MAP
EXHIBIT C. ROAD IMPROVEMENT PLAN PROJECT LIST WITH ASSOCIATED COSTS
EXHIBIT D. NEXUS STUDY: DISCOVERY BAY AREA OF BENEFIT

# Chapter 1 Introduction and Purpose

The Discovery Bay Area of Benefit ("Discovery Bay AOB") was created as a means to collect funds to maintain and improve roadway, bicycle, and pedestrian facilities needed to accommodate travel demand generated by new land development within Discovery Bay. This Development Program Report ("DPR") contains information and data in support of assessing development projects within the Discovery Bay AOB as a means for development to pay its fair share towards future infrastructure. The DPR is required by Chapter 913-6 of the County Ordinance Code and is required by the Board of Supervisors' Policy on Bridge Crossing and Major Thoroughfare Fees (adopted July 17, 1979), which implements Division 913 of the County Ordinance Code and section 66484 of the State Subdivision Map Act.

One of the objectives of the County General Plan is to connect new development directly to the provision of community facilities necessary to serve that development. In other words, development cannot be allowed to occur unless a mechanism is in place to provide the funding for the infrastructure necessary to serve that development. The Discovery Bay AOB Fee is a means of raising revenue to construct road improvements to serve new developments. Requiring that all new development pay a road improvement fee will help ensure that they participate in the cost of improving the road system.

Each new development or expansion of an existing development will generate additional traffic. Where the existing road system is inadequate to meet future needs of new development, improvements are required to meet the new demand. The purpose of a development program is to determine improvements ultimately required by future development and to require developers to pay a fee to fund these improvements. Because the Discovery Bay AOB Fee is based on the relative impact on the road system and the costs of the necessary improvements to mitigate this impact, the fee amount is roughly proportional to the development impact. This report discusses the basis of that fee amount.

# Chapter 2 Background

On September 18, 1979, the Board of Supervisors passed a resolution forming the State Route 4 Area of Benefit. At the time, there were many vacant parcels in the area with potential for residential development, and the existing transportation system was inadequate to handle the additional traffic generated from the projected development. In 1987, an ordinance was adopted which renamed the area of benefit to the “Discovery Bay Area of Benefit.” In 1992, the Area of Benefit program was revised to reflect the changing needs of the area. Over the past 36 years, Area of Benefit fees have helped pay for improvements to Byron Highway. The program was last updated in 1997.

The Discovery Bay area has, in recent years, experienced changes in the area's circulation needs and development potential. The Nexus Study provides the technical basis for a comprehensive update of the Discovery Bay AOB Program. The focus of the updated program is to support an overall transportation system in the Discovery Bay AOB that serves the expected future demand based on changes in regional and local land use projections, planned and approved development projects, and associated changes to capital improvements and updated cost estimates.

The Nexus Study documents the analytical approach for determining the nexus between the fees, the local impact created by anticipated development in the Discovery Bay AOB, and the transportation improvements to be funded with fee revenues. A traffic and fair-share cost analysis was conducted to equitably distribute the cost of the necessary improvements to developments that cause the impacts, per the provisions of the Mitigation Fee Act. The most up-to-date analytical tools and techniques, available at the time this study commenced, were used to ensure the highest level of consistency with current standards.

# Chapter 3 Location and Boundary

The Discovery Bay AOB boundary location is described in Exhibit A and generally shown in Exhibit B. However, fees will only be collected within the unincorporated portions of the AOB and will only fund projects within the unincorporated portions of the AOB.

# Chapter 4 General Plan Relationship

One of the objectives of the County General Plan is to relate new development directly to the provision of community facilities necessary to serve that new development. Accordingly, development cannot be allowed to occur unless a mechanism is in place to provide the funding for the infrastructure necessary to serve that development. The Discovery Bay AOB Program is a fee mechanism providing funds to construct transportation improvements to serve new residential, commercial and industrial development. Requiring that all new development pay a transportation improvement fee will help ensure that it participates fairly in the cost of improving the transportation system. This Program applies only to new development within the unincorporated portions of the Discovery Bay AOB.

The Discovery Bay AOB is consistent with the features of the County General Plan and its amendments, and subscribes to the policies of the General Plan elements. The General Plan policies include, but are not limited to, improving the County roadway network to meet existing and future traffic demands. The Discovery Bay AOB Fee will assist in funding the necessary roadway improvements required for future growth as shown in the General Plan.

# Chapter 5 Project List

The project list for the Discovery Bay AOB is set forth in Table 1 below. This list contains six projects, with several related to pedestrian and bicycle safety improvements. The improvements not related to pedestrian and bicyclist safety are focused on capacity and safety improvements.

The improvements included on the Discovery Bay AOB project list have been identified through a Transportation Needs Analyses conducted by DKS Associates, in which existing and anticipated future deficiencies were identified, including traffic congestion, roadway deficiencies, and safety improvements based upon current conditions, as well as travel demand forecast for 2040 conditions.

The improvements proposed on the Discovery Bay AOB project list were refined through a cooperative effort between the Public Works Department and community stakeholders through the Discovery Bay Community Services District (CSD).

The proposed improvements will be reviewed periodically to assess the impacts of changing travel patterns, the rate of development, and the accuracy of the estimated project costs. The periodic review of the program will also allow staff to evaluate project priority and the need to increase fees should project costs increase or exceed the rate of inflation.

Table 1. Proposed Project List for Discovery Bay AOB Program

| Location | Description |
|---|---|
| Discovery Bay Boulevard at Clipper Drive | Intersection Improvements |
| Improvements Along SR-4 | 1. Widening and Bicycle Improvements Between Bixler Road and Discovery Bay Boulevard<br>2. Rebuild Bridge to Accommodate Four Lanes Between Bixler Road and Discovery Bay Boulevard<br>3. Intersection Improvements at Newport Drive<br>4. Widen Roadway Between Byron Highway and Regatta Drive |
| Byron Highway at Byer Road | Intersection Improvements |
| Clipper Drive | Traffic Calming Measures |
| Bixler Road , Between SR-4 and Byer Road | Bicycle Improvements |
| Byer Road, Between Bixler Road and Byron Highway | Bicycle Improvements |

# Chapter 6 Development Potential

The "Nexus Study: Discovery Bay Area of Benefit" ("Nexus Study"), dated April 2018, was prepared by DKS Associates in collaboration with Urban Economics for the Public Works Department and is attached as Exhibit D and incorporated herein by reference. The Nexus Study provides the technical basis for establishing the required nexus between the anticipated future development within the Discovery Bay AOB boundary and the need for certain facilities.

The projected growth in households, employment, and vehicle-miles traveled within the Discovery Bay AOB is discussed and shown in the Nexus Study.

A summary of the potential new residential dwelling units, office, industrial, and commercial/ retail developments (net growth from 2010 to 2040) for the unincorporated portion of AOB is shown in Table 2.

Table 2. Development Potential Summary

| Land Use Category | Units |
|---|---|
| | |
| Single-Family Residential | 50 dwelling units |
| Multi-Family Residential | 80 dwelling units |
| Office | 4,950 sq ft |
| Industrial | 600 sq ft |
| Commercial/Retail | 35,000 sq ft |

# Chapter 7 Estimated Cost of Road Improvements

The estimated cost of the road improvements planned for the Discovery Bay AOB is listed in Exhibit C. The Discovery Bay AOB will only finance the proportional share of the improvements necessitated by the impact on the road system from new development.

Detailed cost estimates for the projects included in the road improvement plan are provided in Appendix C of the Nexus Study.

The County will assess an administrative fee equal to 2% of the applicable fee. This additional fee will be used to cover staff time for fee collection, accounting, and technical support to the community groups and traffic advisory committees.

# Chapter 8 Method of Fee Apportionment

The total estimated cost of the projects included in the Discovery Bay AOB project list is $32,555,000. The cost to accommodate new development within the Discovery Bay AOB is $6,631,325. There is an existing balance of approximately $240,760.

An adjusted project cost to be covered by the Discovery Bay AOB fees was determined by subtracting the existing fund balance from the attributable project cost.

| $6,879,847 | - | $240,760 | = | $6,639,087 |
|---|---|---|---|---|
| (Attributable Project Cost) | | (Balance) | | (Adjusted Project Cost) |

This adjusted project cost represents the amount of revenue needed from the Discovery Bay AOB Fee to fund growth's share of the project cost as shown in Exhibit C.

The expected growth in the Discovery Bay AOB to the year 2040 is 50 single-family units, 80 multi-family units, 35,000 square feet of retail space, 4,950 square feet of office space, and 600 square feet of industrial space. To determine a fee rate per unit, first each development type is assigned a dwelling unit equivalent or "DUE" rate. DUEs compare the trip making characteristics of a land use in relation to a typical single-family residential unit, which is assigned a DUE of 1. Land uses with lower overall traffic impacts than a single family home are assigned values less than 1, and vice versa. The following Table shows the DUE rates for the various land use categories.

Table 3

**Dwelling Unit Equivalent (DUE) Rates**

| Land Use Category | PM Peak Hour Trip Rate per | Unit | Trip Length (miles)[2] | Percent New trips[2] | VMT per Unit | DUE per Unit |
|---|---|---|---|---|---|---|
| Singe Family | 1.01 | Dwelling Unit | 5.0 | 100 | 5.050 | 1.00 |
| Multi-Family | 0.62 | | 5.0 | 100 | 3.100 | 0.61 |
| Retail | 4.10 | 1,000 Square Feet | 2.3 | 76 | 7.167 | 1.42 |
| Office | 1.40 | | 4.5 | 92 | 5.796 | 1.15 |
| Industrial | 0.98 | | 5.1 | 92 | 4.598 | 0.91 |

[1] ITE Trip Generation 7th Edition
[2] ITE Journal, May 1992
Source: DKS Associates, 2018

Table 4

| Growth in DUEs | | | | |
|---|---|---|---|---|
| **Land Use Category** | **Unit** | **Growth in Units[1]** | **DUE per Unit** | **Growth in DUEs** |
| Singe Family | Dwelling Unit | 50 | 1.00 | 50 |
| Multi-Family | | 80 | 0.61 | 49 |
| Retail | 1,000 Square Feet | 35 | 1.42 | 50 |
| Office | | 4.95 | 1.15 | 6 |
| Industrial | | 0.6 | 0.91 | 1 |
| | | | **Total** | **155** |

[1] See Table 2: "Summary of Estimated Development 2010 to 2040 Growth"

Source: DKS Associates, 2018

The growth in DUEs for each land use and the total growth in DUEs is shown above in Table 4. Because the DUE rates are based on estimates of the average vehicle-miles of travel generated during the PM peak hours for each general land use type, the developments are charged fees in proportion to the amount of traffic impact they are projected to generate. In this way, the fees attributed to each new parcel will be proportional to the estimated benefits they receive through use of the new improvements.

Finally, the Cost per DUE is found by dividing the total Cost of Improvements Allocated to AOB Growth by the total Growth in Dwelling Unit Equivalents (DUE's):

$$\frac{\$6{,}639{,}087}{155} = \$42{,}830.79\ per\ DUE$$

Chapter 9

# Fee Rates

## Calculation of Fees

The fee calculation is set forth in detail in the Nexus Study.

To determine a maximum fee rate for each land use category, the Cost per DUE is multiplied by the DUE per unit. In the residential categories, this results in a fee per dwelling unit. In the non-residential categories, the fee is listed per square foot. These calculations are summarized in Table 5 below.

Table 5. Fee Calculations

| Nexus-Based Fee Rates for Discovery Bay AOB | | | |
|---|---|---|---|
| Cost of Improvements Allocated to AOB | | | $6,639,087 |
| Growth in Dwelling Unit Equivalents | | | 155 |
| Cost per DUE | | | $42,830.79 |
| **Land Use** | **Units** | **DUE per Unit** | **Maximum Fee per Unit[1]** |
| Single Family | Dwelling Unit | 1.00 | $42,831 |
| Multi-Family | Dwelling Unit | 0.61 | $26,292 |
| Retail | Square Foot | 0.00142 | $60.78 |
| Office | Square Foot | 0.00115 | $49.16 |
| Industrial | Square Foot | 0.00091 | $39.00 |
| Other | Dwelling Unit Equivalent | 1.00 | $42,831 |

[1] Maximum Fee per Unit = (Cost per DUE) x (DUE per Unit)

Source: DKS Associates, 2018

To determine the DUE for a development considered “Other,” the vehicle miles traveled (VMT) are first estimated using a combination of trip generation data, the default rate for trip length, and percent new trips.

## Recommended Fees

The potential maximum fee rates calculated in the Nexus Study and presented in Table 5 above are not the recommended fee rates, as this sizeable increase in fee rates could stagnate future growth. The recommended Fee Schedule will moderately increase the fees to be comparable to rates in surrounding jurisdictions, yet encourage continued economic growth. Thus, the proposed fee rate to implement, as identified in the shaded column in Table 6, is a reduction from the rates calculated from the Nexus Study.

Table 6. Fee Schedule to Implement

| Land Use Category | Calculated Nexus Fee Rate | Proposed Fee Rate to Implement |
|---|---|---|
| Single-Family | $42,831 / du | $9,244 / du |
| Multi-Family | $26,292/ du | $5,675 / du |
| Commercial/Retail | $60.78 / sf | $9.11 / sf |
| Office | $49.16/ sf | $7.37 / sf |
| Industrial | $39.00 / sf | $5.85 / sf |
| Other | $42,831 / due | $9,244 / due |

Note: du = dwelling unit; sf = square foot; due = dwelling unit equivalent

# Chapter 10 Program Finance Considerations

## Other Funding Sources

The improvements planned for the Discovery Bay AOB will be only partially funded by Discovery Bay AOB fee revenues. Other sources of funding, such as State or Federal aid, or local sources such as sales tax, gas tax, etc., will be pursued.

These other funding sources include, but are not limited to, Regional Measure J Funds, State Transportation Improvement Program (STIP) Funds, and Federal Program Funds.

The rate at which revenue is generated by the Discovery Bay AOB Fee depends on the rate of new development. This rate of revenue generation affects the timing of construction of the improvement projects because it is dependent upon the total amount of fees collected, less expenditures. Alternate sources of funding would permit construction of AOB projects sooner.

## Review of Fees

Project cost estimates will be reviewed periodically while the Discovery Bay AOB is in effect. On January 1 of each year thereafter, the amount of the fees will be increased or decreased based on the percentage change in the Engineering News Record Construction Cost Index for the San Francisco Bay Area for the 12-month period ending with the September 30$^{th}$ index of the previous calendar year, without further action of the Board of Supervisors.

## Collection of Fees

Fees will be collected when a building permit is issued, in accordance with Section 913-4.204 of Title 9 (Subdivisions) of the Contra Costa County Ordinance Code. Fees collected will be deposited into an interest bearing trust fund established pursuant to Section 913-8.002 of the Contra Costa County Ordinance Code.

## Interest on Fees

The interest accrued on the fees collected shall continue to accumulate in the trust account and shall be expended for construction of the improvements, or to reimburse the County for the cost of constructing the improvements, pursuant to Section 913-8.006 of the County Ordinance Code.

## Dedication in Lieu of Fee

A development may be required to construct, or dedicate right-of-way for a portion of the improvements as a condition of approval. In such an event, the developer may be eligible to receive credit for the fee or reimbursement. The eligible credit and/or reimbursement shall be determined in accordance with the County's "Traffic Fee Credit and Reimbursement Policy."

Exhibit A

# Area of Benefit Boundary Legal Description

A portion of Sections 23, 24, 25, 26, 35, and 36, Township 1 North, Range 3 East, Mount Diablo Meridian, in the county of Contra Costa, State of California, described as follows:

Beginning at the southeast corner of Lot "E" of Subdivision 7252 filed September 15,1989 in Book 337 of Maps at page 30; thence westerly along the northerly right of way line of State Highway 4, being also the south line of said Lot "E" and the south line of Lot "J" of Subdivision 7106 filed June 21,1989 in Book 334 of Maps at page 39, north 89°12'29" west 4600.00 feet more or less to the east line of Lot 184 of Subdivision 6561 filed July 22, 1985 in Book 291 of Maps at page 39; thence continuing along said northerly right of way line, thru said Lot 184, westerly 312.22 feet to the southeast corner of Parcel "A" of Subdivision 6760 filed June 23, 1988 in Book 323 of Maps at page 9; thence continuing along said right of way line, being also the southerly line of Parcels "A", "AA" and "B" of said Subdivision 6760, westerly 4352.86 feet to the southwest corner of said Parcel "B"; thence leaving said right of way line and along the westerly line of said Subdivision, thence north 00°56'27" east 2520.11 feet; thence north 00°59'24" east 628.84 feet to the northwest corner of said Subdivision; thence along the westerly line of Subdivision 6979 filed March 6, 1989 in Book 331 of Maps at page 20, north 00°59'24" east 1100.80 feet; thence along the westerly line of Subdivision 7140 filed April 8, 1996 in Book 385 of Maps at page 43, north 00°59'32" east 916.31 feet to the northwest corner of said Subdivision; thence along the north line of said Subdivision, north 89°08'08" east 1388.74 feet to the northeast corner of said Subdivision; thence north 47°37'44" east 1249.47 feet along the northwesterly line of Subdivision 6144 filed March 28, 1984 in Book 277 of Maps at page 42; thence north 47°37'44" east 265.13 feet along the northwesterly line of Subdivision 4687 filed May 24, 1978 in Book 211 of Maps at page 5; thence northeasterly along a tangent curve to the left having a radius of 660.00 feet through an angle of 14°02'20", an arc distance of 161.71 feet to a point on the southern boundary of Subdivision 4206 filed July 6, 1972 in Book 148 of Maps at page 1; thence along said boundary, north 42°37'00" west 12.66 feet; thence north 47°23'00" east 123.10 feet; thence north 16°18'57" east 436.29 feet to the southeast corner of Subdivision 4205 filed June 22, 1972 in Book 147 of Maps at page 27; thence along the westerly lines of said Subdivision 4205 the following six courses; thence north 16°18'57" east 52.94 feet; thence north 15°55'12" east 300.00 feet; thence north 15°43'32" east 600.21 feet; thence north 14°59'17" east 344.51 feet; thence north 17°33'17" east 300.09 feet; thence north 16°03'32" east 220.63 feet to an angle point in Lot 18 of Subdivision 5811 filed August 18, 1980 in Book 236 of Maps at page 4, thence along the westerly boundary of said Subdivision 5811 the following nine courses; north 16°03'32" east 139.38 feet; thence north 18°40'12"east 140.12 feet; thence north 08°17'27"east 106.18 feet; thence north 28°33'12" east 147.78 feet; thence north 30°02'22" east 130.07 feet; thence north 35°10'12" east 170.29 feet; thence north 33°30'07" east 312.11 feet; thence north 70°55'07" east 5.88 feet to the northeast corner of Lot 1 of said Subdivision, also being the northwest corner of Lot 70 of "Amended Map" Subdivision 4077 filed July 8, 1974 in Book 170 of Maps at page 36; thence along the northerly line of said Subdivision, north 70°55'07" east 65.07 feet; thence north 73°22'17" east 52.68 feet; thence north 82°50'17" east 225.73 feet; thence along the northern line of Subdivision 4224 filed December 19, 1973 in Book 165 of Maps at page 38 north 82°50'17" east 31.00 feet; thence north 83°04'37" east 507.95 feet; thence north 84°25'17" east 13.83 feet; thence along the northerly line of Subdivision 4077, north 84°25'17" east 314.46 feet; thence north 81°53'52" east 372.07 feet; thence along the northerly line of Amended Map Subdivision 3653 filed June 13, 1974 in Book 169 of Maps at page 42, north 81°53'52" east 46.99 feet; thence north 82°39'37" east 260.45 feet more or less to a point of curvature on the north line of Lot

16, Subdivision 4223 filed December 19, 1973 in Book 165 of Maps at page 31; thence along the northerly line of said Subdivision, north 83°04'37" east 1009.26 feet to the western line of Lot 80 in Subdivision 4076 filed December 9, 1970 in Book 134 of Maps at page 19; thence along said Lot 80, north 00°58'07" east 8.16 feet; thence north 82°22'27" east 60.45 feet to the northeast corner of said Lot being also the northwestern corner of Lot 15 Subdivision 4378 filed June 10, 1977 in Book 198 of Maps at page 8; thence along the northerly line of said Subdivision the following seven courses; thence north 82°22'27" east 120.00 feet; thence north 87°17'02" east 82.74 feet; thence south 58°54'13" east 168.88 feet; thence south 69°31'13 east 43.97 feet; thence north 82°38'57" east 172.35 feet; thence south 87°58'43" east 73.67 feet; thence south 83°56'58" east 83.15 feet; thence along the northerly line of Subdivision 5353 filed December 21, 1978 in Book 219 of Maps at page 44 the following twenty courses; thence south 83°56'58" east 163.59 feet; thence south 79°55'08" east 176.44 feet; thence north 77°14'02" east 62.13; thence north 57°14'12" east 49.86 feet; thence north 43°06'52" east 26.12 feet; thence north 21°46'37" east 32.03 feet; thence north 14°54'32" east 55.15 feet; north 02°38'12" east 76.77 feet; thence north 10°04'07" east 93.55 feet; thence north 27°32'47" east 87.19 feet; thence north 34°36'52 east 63.80 feet; thence north 45°23'17" east 71.36 feet; thence north 35°01'32" east 173.30 feet; thence north 44°21'42" east 78.12 feet; thence north 67°09'37" east 76.44 feet; thence south 81°13'28" east 71.20 feet; thence south 70°22'33" east 96.67 feet; thence south 71°02'13" east 80.05 feet; thence south 76°51'23" east 3.33 feet; thence south 89°02'35" east 779.76 feet; thence along the easterly line of said Subdivision the following three courses; thence south 00°57'32" west 216.15 feet; thence south 77°22'13" east 31.45 feet; thence south 13°53'01" west 327.93 feet; thence southerly along the easterly line of said Subdivision 5353, the easterly line of Subdivision 5586 filed November 7, 1979 in Book 233 of Maps at page 13, the easterly line of Subdivision 6026 filed April 2, 1981 in Book 250 of Maps at page 33, the easterly line of Subdivision 6145 filed June 17, 1982 in Book 264 of Maps at page 32, the easterly line of Marina Road recorded July 17, 1981 in series No. 81-88549, the easterly line of the parcel described in the grant deed recorded April 23, 1979 in Book 9320 Official Records page 418, the easterly line of the parcel described in the grant deed recorded June 20, 1972 in Book 6678 Official Records page 355, and the easterly line of said Subdivision 7252 (337 M 30), south 00°44'31" west 9792.35 feet to the point of beginning.

Exhibit

B

# Area of Benefit Boundary Plat Map

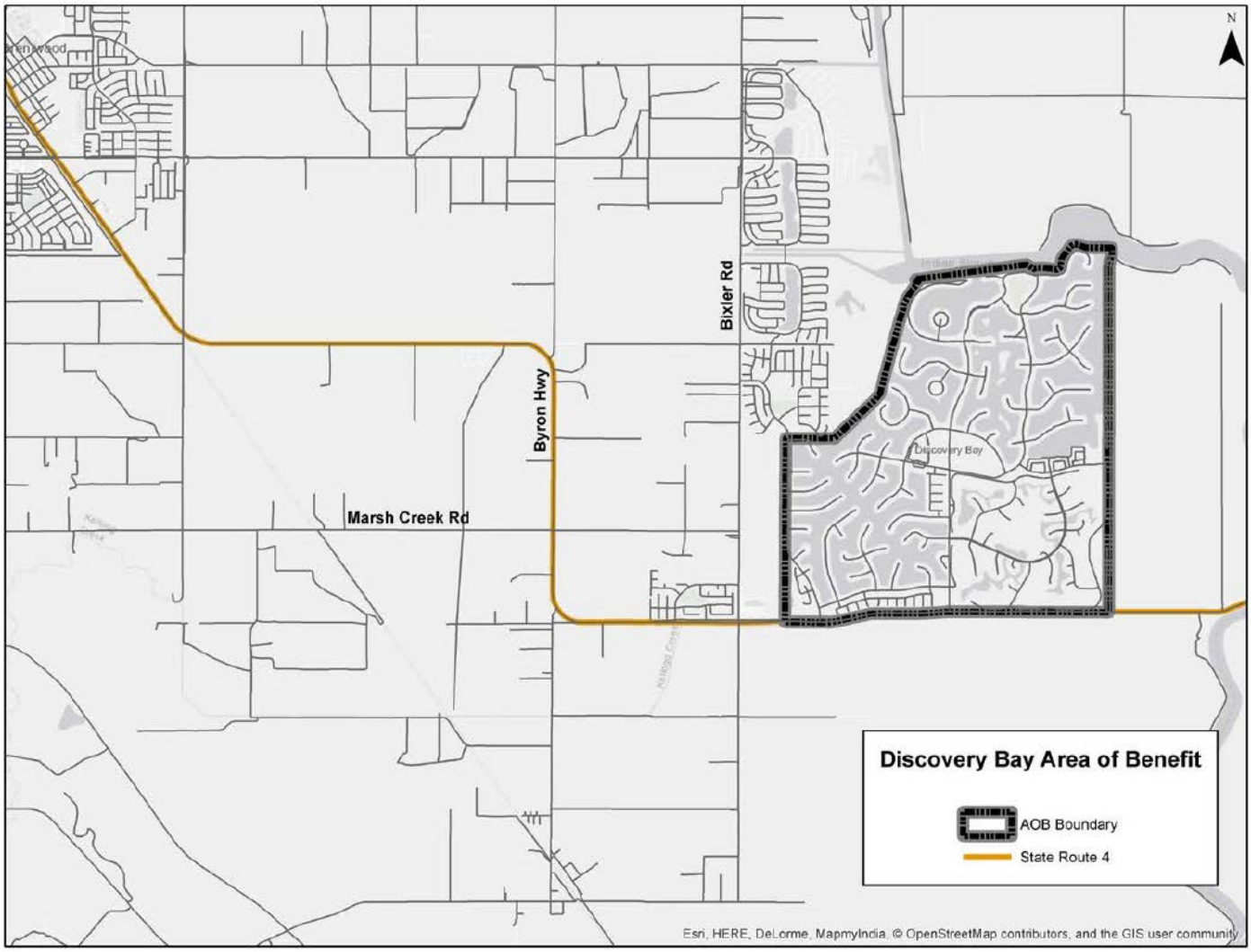

Exhibit C

# Road Improvement Plan – Project List with Associated Costs

| Allocation of Project Costs to Discovery Bay AOB Program | | |
|---|---|---|
| **Recommended Project** | **Estimated Total Cost** | **AOB Allocation** |
| Discovery Bay Boulevard at Clipper Drive Intersection Improvements | $1,910,000 | $599,341 |
| Improvements Along SR-4<br>1. Widening and Bicycle Improvements Between Bixler Road and Discovery Bay Boulevard<br>2. Rebuild Bridge to Accommodate Four Lanes Between Bixler Road and Discovery Bay Boulevard<br>3. Intersection Improvements at Newport Drive<br>4. Widen Roadway Between Byron Highway and Regatta Drive | 1. $4,976,000 | 1. $1,509,204 |
| | 2. $8,201,000 | 2. 2,487,336 |
| | 3. $731,000 | 3. $243,667 |
| | 4. $4,096,000 | 4. $1,242,303 |
| Byron Highway at Byer Road Intersection Improvements | $1,198,000 | $273,738 |
| Clipper Drive Traffic Calming Measures | $224,000 | $10,262 |
| Bixler Road Widening and Bicycle Improvements, Between SR-4 and Byer Road | $5,742,000 | $263,068 |
| Byer Road Widening and Bicycle Improvements, Between Bixler Road and Byron Highway | $5,477,000 | $250,927 |
| **Total** | **$32,555,000** | **$6,631,325** |
| **Source: DKS Associates, 2018** | | |

Exhibit
D

# Nexus Study
# Discovery Bay Area of Benefit

# Exhibit D
# Attached as separate document

Contra Costa County

To: Board of Supervisors

From: John Kopchik, Director, Conservation & Development Department

Date: May 22, 2018

Subject: Appeal of a Tree Permit for the Removal of Eight Code-Protected Trees in Alamo

**RECOMMENDATION(S):**

1. OPEN the public hearing, RECEIVE testimony, and CLOSE the public hearing.

2. DENY the appeal of Gabriela Odell and Bruce Tarter, Sophia and Lomit Patel.

3. UPHOLD the Zoning Administrator's decision to approve the removal of three existing code-protected trees and five previously removed code-protected trees.

4. APPROVE County File #TP17-0033, a Tree Permit Application for a request to allow the removal of three existing code-protected redwood trees ranging in size from 20" to 40" in diameter and five previously removed code-protected redwood trees ranging in size from 15 gallons to 24" in diameter.

5. APPROVE the attached findings in support of the project and APPROVE the conditions of approval for County File #TP17-0033.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Grant Farrington, 925-674-7797

**cc:**

RECOMMENDATION(S): (CONT'D)

6. DETERMINE that the tree permit application is categorically exempt from the California Environmental Quality Act (CEQA) under CEQA Guidelines section 15304, minor alterations to land.

7. DIRECT the Department of Conservation and Development to file a CEQA Notice of Exemption with the County Clerk.

FISCAL IMPACT:

The applicant has paid the necessary applicant deposit, and is obligated to pay supplemental fees to cover all additional costs associated with the application process.

BACKGROUND:

This is an appeal of the County Planning Commission's decision to approve a tree permit to allow the removal of a total of eight code-protected trees. Three of the trees are existing redwood trees ranging in size from 20" to 40" in diameter. The other five trees were removed without permits. Of the five removed without permits, one was a 24" redwood tree, and the four others were 15 gallon replacement trees required to be planted as a condition of approval for a previous tree permit (County File #TP14-0008). All of the five trees removed without permits were protected trees based on the previously approved tree permit. No development is proposed; however, the existing trees have been determined to be in poor health by the applicant's arborist as documented in the report that was submitted with the application. The Zoning Administrator's decision was not overturned by the Planning Commission following a 3-3 tie vote at a public hearing held on January 24, 2018.

The tree permit requesting the removal of three redwood trees due to declining health was submitted on July 25, 2017, and included an arborist report dated July 25, 2017 prepared by Tim Hendricks. After reviewing the submittal, staff determined that five additional trees were removed that had not been previously approved. All eight trees are protected because they were shown to be preserved on the site plan for County File #TP14-0008 as a condition of approval. The reason provided by the applicant for the removal of the five trees was the health of the trees. The applicant is paying a penalty fine/higher permit fee for five already removed trees. On September 21, 2017 a Notice of Tentative Approval of a Tree Permit was mailed to adjacent property owners. Within the 10-day appeal period, two separate appeals from Sophia and Lomit Patel, and Gabriela Odell and Bruce Tarter were filed with the Department of Conservation and Development.

A total of four arborist reports have been submitted, including two by the applicant and two by the appellant.

## Site Description

The subject property address is 1593 Hillgrade Avenue; it is approximately 23,000 square feet and irregular in shape and located at the intersection of Crest and Hillgrade Avenues in the Alamo area. The majority of the property is rectangular with a narrow strip of land approximately 330 feet in length extending to the southwest. A single-family residence with an attached garage and the subject trees are located on site. The subject trees are adjacent to the western side of the single-family residence. The site also has a moderate slope with additional trees located along the narrow southwestern extension. The site is accessed via an 8.5-foot wide access easement connected at the corners of Crest and Hillgrade Avenues.

## General Plan/ Zoning

The subject property is located within Single-Family Residential-Low Density (SL) and Open Space (OS) General Plan Land Use designations. The single-family residence and the subject trees are located

on the portion of the lot designated SL. This project proposes no additional development to the single-family residence already existing on the lot. The portion of the subject property which is in the OS Land Use designation does not have any existing or proposed structures and thus the project is consistent with both Land Use designations. The subject property is located with the Single-Family Residential (R-20) zoning district. The project does not propose any new development and thus is consistent with the R-20 zoning district.

## Planning Commission Hearing

On January 24, 2018, the County Planning Commission (CPC) held a public hearing on the appeal of the Zoning Administrator's (ZA) decision to approve the Tree Permit application. The hearing included staff's presentation and testimony from the applicants (Gil and Carla Gibson), appellants (Gabriella Odell and Bruce Tarter and Sophia Patel), and an arborist speaking at the request of the appellants (Torrey Young). The Gibsons presented the project emphasizing the poor health of the trees and how the location of the trees posed a hazard to themselves and their house. Mr. Tarter presented his concern that the trees are capable of recovery and redwood trees in particular warrant special protection within the County. Mrs. Patel also presented her concern that the trees are capable of recovery and that the applicants had prematurely removed trees and attempted to remove the existing trees without a permit. Mr. Young presented his concern that the trees are capable of recovery and that staff misrepresented his report determining the health of the existing trees. After receiving testimony from the public, the Planning Commission closed the hearing and voted 3-3 to uphold the Zoning Administrator's approval. As a result, the Zoning Administrator's decision to approve the project was upheld and therefore the appeal denied.

## APPEAL

On February 5, 2018, the Department of Conservation and Development received appeals of the County Planning Commission's decision from Gabriela Odell and Bruce Tarter, and Sophia and Lomit Patel. The appeals cited multiple points of opposition, which primarily focused on staff's decision to recommend approval for the project, the condition of the existing trees and the necessity of the trees for erosion and mudslide prevention. Staff has summarized and provided a response to each appeal point below:

## Patel Appeal points

**Summary of Appeal Point #1:** The appellants state that the County has a moral and legal obligation to protect State protected redwoods.

Staff Response: The applicant submitted a complete tree permit application including an arborist report from a certified arborist, Tim Hendricks dated July 25, 2017. Mr. Hendricks' report concluded, after conducting an on-site inspection, that the three existing trees have declined in health due to drought conditions and construction of the shared driveway. Mr. Hendricks' report noted that the main stems of the trees are in decline and defoliation is severe in the upper half of the trees. After reviewing the submittal, the Zoning Administrator approved the tree permit based on the arborist report indicating that the trees are in poor health and the issuance of a permit will not negatively affect the sustainability of the resource per Section 816-6.8010 of the Tree Protection Ordinance provided that eight replacement trees are planted as a required Condition of Approval (COA) #2(a). While redwood trees are native to portions of California and Contra Costa County, the trees are unlikely to have naturally occurred in Alamo.

**Summary of Appeal Point #2:** The existing trees are in fair condition and can be rehabilitated.

Staff Response: The Zoning Administrator approved the tree permit based on the arborist report submitted by the applicant and prepared by Mr. Hendricks which identified the existing trees as being in poor health. While the reports submitted by the appellants indicated the trees could recover, staff finds there is sufficient evidence of a hazard to warrant issuing the permit. See also Patel Appeal Point #1.

**Summary of Appeal Point #3:** The redwood trees provide protection from soil erosion and mudslides.

Staff Response: Mr. Hendricks's report did not identify erosion and drainage problems as consequences of removing the three trees. Subsequent reports did not identify erosion and drainage problems as consequences of removing the existing trees. The approved removal of the trees is based on the health of the trees consistent with the Tree Protection Ordinance. See Patel Appeal Point #1. COA #2(a) requires that two of the eight trees to be replanted must be located along the southwestern property line that is adjacent to the Patel lot. Once planted, all eight of the trees to be replanted are considered code-protected per Section 816-6.6004 of the County Ordinance. After consulting with County grading staff, they indicated that replacing the removed trees with compacted soil and applying sediment control measures such as straw blankets, mulch and hydro seeding are measures that can be implemented to minimize the risk of soil erosion.

**Summary of Appeal Point #4:** 1593 and 1597 have shared drainage, landscaping, driveway and the existing trees fall on the border of the Patel property line.

Staff Response: The subject trees are located on the applicant's lot and the property owner has a right to apply for a tree permit.

**Summary of Appeal Point #5:** Staff failed to consider and evaluate additional arborist reports submitted.

Staff Response: Staff reviewed and evaluated all four arborist reports submitted, all of which concluded that the trees have been impacted by drought and construction activities. The arborist reports submitted by the appellants recommended specific rehabilitation measures but staff did not find there was sufficient evidence that these measures would prevent a falling hazard. See Patel Appeal Point #1 and #2.

**Summary of Appeal Point #6:** Staff recommended approval based on the number of arborist reports submitted.

Staff Response: Staff reviewed the information and arguments in all four of the arborist reports and determined that there was sufficient evidence indicating hazardous conditions of the trees to warrant issuance of the permit.

**Summary of Appeal Point #7:** The tree permit violates the County's Tree Protection and Preservation Ordinance.

Staff Response: See Patel Appeal Point #1.

## Odell and Tarter Appeal Points

**Summary of Appeal Point #1:** The decision to allow the removal of the code-protected trees was based on a "numbers game."

Staff Response: The property owner submitted an application and arborist reports for a tree permit and staff conducted a site visit. The Zoning Administrator approved the tree permit based on the arborist reports indicating the trees are in poor health and the removal of the trees will not negatively affect the sustainability of the resource per Section 816-6.8010 of the Tree Protection Ordinance provided that eight replacement trees are planted as a required COA #2(a). While redwood trees are native to portions of California and Contra Costa County, the trees are unlikely to have naturally occurred in Alamo.

**Summary of Appeal Point #2:** None of the protective measures from the previous tree permit were enforced and trees were removed by the applicant without permits.

Staff Response: During a site visit, staff determined that five code-protected trees were previously removed from the subject property. The Zoning Administrator has included these trees as part of the application. Replanting and restitution for these trees have also been added to the COA's. The property owners are responsible for submitting a tree restitution plan (COA #2(a)), and a security bond to be held until verification of the health of the replanted trees has been submitted to the DCD (COA #2(b) and #2(d)). If the DCD determines the replacement trees have been damaged or dead, the security bond will be used to provide for replacement of the dead or damaged trees (COA #2(d)).

**Summary of Appeal Point #3:** Staff did not apply the Tree Protection Ordinance correctly.

Staff Response: See Patel Appeal Point #1.

**Summary of Appeal Point #4:** Staff did not pay any attention to the appellants' concerns about potential mud flow if the trees are removed.

Staff Response: See Patel Appeal Point #1 and #3. Condition of Approval (COA) #2(a) requires that four of the eight trees to be replanted must be located along the southeastern property line that is adjacent to the Odell and Tarter lot. Once planted, all eight of the trees to be replanted are now considered code-protected per Section 816-6.6004 of the County Ordinance.

**Summary of Appeal Point #5:** Staff relied upon flawed arborist reports to determine a recommendation.

Staff Response: The arborist reports submitted by the applicant and prepared by Tim Hendricks and Bob Peralta were based on site visits to determine the health of the trees. The reports addressed the conditions of the existing trees including the health of the canopies, branches and root zones. Mr. Hendricks' and Mr. Peralta's arborist reports concluded that the trees pose a safety hazard and recommended removal based on drought and construction factors which have caused root system decay and main stem decline. Mr. Peralta's report identifies the subject property as unsuited for redwood trees due to the climate differences compared to coastal California where redwood trees thrive. Neither report identified erosion drainage and soil erosion as a consequence of removing the existing trees.

**Summary of Appeal Point #6:** Staff failed to take into account points raised by a second arborist report submitted by the appellants.

Staff Response: Staff reviewed and evaluated all four arborist reports submitted, which concluded that

the trees have been impacted by drought and construction activities. The arborist reports submitted by the appellants recommended specific rehabilitation measures but staff did not find there was sufficient evidence that these measures would prevent a hazard. See Patel Appeal Point #1.

## Conclusion:

The project meets the criteria outlined in the Tree Protection and Preservation Ordinance. There is no proposed development and the project is in compliance of the R-20 zoning district as well as the policies of the SL and OS General Plan Land Use designations. Considering these facts, staff recommends that the Board of Supervisors deny the appeal by Gabriela Odell and Bruce Tarter and Sophia and Lomit Patel and sustain the Zoning Administrator's decision to approve the Tree Permit application.

CONSEQUENCE OF NEGATIVE ACTION:

If the Board of Supervisors grants the appeal, the Zoning Administrator's approval of a tree permit application to remove 3 existing code-protected trees and 5 previously removed code-protected trees at 1593 Hillgrade Avenue will be overturned. The property owners of 1593 Hillgrade Avenue will be unable to remove and replace the code-protected trees.

CHILDREN'S IMPACT STATEMENT:

This application is a request for approval of a tree permit to allow the removal of three existing code-protected trees and five previously removed code-protected trees. No element of the proposed project will impact children's programs within the County.

ATTACHMENTS

Appeal Letter to Board - Patel

Appeal Letter to Board - Odell and Tarter

Maps (Parcel Map, General Plan, Zoning and Aerial Photography)

Findings and Conditions

CPC Staff Report

Site Plan

Powerpoint Presentation

Sophia & Lomit Patel
1597 Hillgrade Avenue
Alamo, CA 94507

CONTRA COSTA
COUNTY

2018 FEB -5 P 12: 19

DEPARTMENT OF
CONSERVATION
AND DEVELOPMENT
TP17-0033

February 3, 2018

Community Development Division
Board of Supervisors
30 Muir Road
Martinez, CA 94553

Re: County File #TP17-0033 (Appeal from Planning Commission Decision dated January 24, 2017)

Dear Board of Supervisors:

This is an appeal from a Planning Commission decision made on January 24, 2017 denying an appeal brought by Sophia and Lomit Patel ("Appellants") at 1597 Hillgrade Avenue in Alamo, CA to overturn the approval of an application by the property owners Gil and Carla Gibson (applicants") at 1593 Hillgrade Avenue to remove three remaining large code protected Redwoods. The Planning Commission's deliberations ended in a three-to-three tie with staff's recommendations breaking the tie. The appeal is brought on the following grounds:

- We believe the Conservation and Development Department staff ("staff") recommendations did not apply or consider the requirements of the tree protection ordinance for state protected Redwoods. The applicants state that Redwoods are not native to Contra Costa County. However, according to the Save the Redwoods League, the Redwood and Giant Sequoia Forests extend well into Contra Costa and Napa Counties (see corresponding map of Protected Redwoods Lands and Historic Range of Redwoods). The Redwoods and Giant Sequoias are the tallest and largest trees on the planet. They represent the original face of nature, embodying a beauty millions of years in the making. These trees store more carbon from the atmosphere than any other forest ecosystem, and they support communities of life found nowhere else on Earth. But the redwood parks and private lands that California has protected over the last century still need help. The primeval forests today resemble islands of disconnected old-growth stands — pinched at the edges by development and construction. **The County has a moral and legal obligation to protect these large state protected Redwoods located at 1593 Hillgrade Avenue.**

- Furthermore, the observations and reports from highly qualified certified master arborists and horticulturists state the trees are in fair condition with lots of new growth and can be easily rehabilitated within a few months with the proper care and pruning.

- Based on arborist reports and soil reports, these Redwood trees provide protection from soil erosion and mudslides between our properties. In the last couple years, we have experienced flooding on our site as it is based in a canyon between two hillsides. **Removal of the Redwoods and the roots that are helping to retain soil and moisture will exacerbate flooding on our properties and result in property loss and significant drainage work.**

- Our lots of 1593 and 1597 are very much a shared site sharing drainage, landscaping, and a shared driveway. After 1593 Hillgrade was subdivided from our property in 2016, five state protected Redwoods have already been removed unlawfully without any repercussions to the owners. Now they are trying to remove the last and largest remaining three Redwoods. Both us and the O'Dell neighbors have offered on three separate occasions to split the costs to rehabilitate the remaining Redwoods, but the Gibsons have declined each time despite the

fact these state protected Redwoods can be regenerated. The majority of these Redwoods fall on the border of our property line, which were stated as healthy according to a 2014 arborist report and guaranteed to remain when we purchased our home April 2016 (just 8 months before the Gibsons filed a permit for the Redwoods removal) and were part of our contract contingency.

- Most importantly, we believe the staff failed to properly consider and evaluate the submitted expert reports between 2014 and 2017 in light of the County's Tree Protection and Preservation Ordinance. The staff admitted that the decision to approve the removal of the trees was based on the fact that the applicant had submitted two arborist reports while the appellants had submitted only one. One of the reports was undated, unsigned and without letterhead. The staff did not provide any evaluation of the relative quality of the reports, nor the qualifications of the arborists who wrote them. In fact, they mischaracterized the report prepared by the appellants' expert as being in agreement with those of the applicant. Nor was it observed that the applicant's arborists presented a conflict of interest due to previous working relationships.

- Because the decision to allow the removal of the code protected Redwoods was simply based on the number of arborist reports vs. quality of the reports and did not fully rely on the County's Tree Protection and Preservation Ordinance, **we are hereby submitting a second report by a Certified Master Arborist and horticulturist, Judy Thomas, who recently evaluated the trees.** While affirming that the trees in question are healthy and should be protected, she also emphasizes the function the trees provide in preventing soil erosion, controlling floods, and mud flow on the hillsides directly above all our homes.

- We are requesting the permit be denied due to the fact that it violates the County's Tree Protection and Preservation Ordinance and state guidelines for the protection of California Redwoods due to:
    1. Environmental impact on flood control and soil erosion of our homes/site;
    2. Owners of 1593 Hillgrade have already unlawfully removed 5 state protected Redwoods and attempted to remove the three remaining attested Redwoods on October 18, 2017 without permit;
    3. The three remaining state protected Redwoods can be rehabilitated according to independent, expert opinion; and
    4. Staff did not fully evaluate independent expert reports and opinions between 2014 and 2017

The unincorporated city of Alamo prides itself on the nature and beauty of its giant Redwood and Oak trees. The removal of these state protected Redwood trees goes against our community's beautification standards and expectations for nature, privacy, and flood control.

As three Commissioners noted at the Planning Commission hearing, there is simply no logic or reason presented by the applicants or the staff as to why the trees must be removed. Chairman Steele particularly noted that the trees are in a watershed where they will get plenty of water and will recover from construction damage. Commissioner Van Buskirk actually drove by and looked at the trees and did not "see them as anything that needed to be removed." Commissioner Clark noted staff had failed to provide any analysis of which arborists' reports had been more accurate. The Commissioners all mentioned their personal experience that Redwoods are able to survive almost anything. In fact, they strongly recommended appellants O'Dells and Patels appeal the case to the Board of Supervisors for further review.

As members of the Save the Redwoods League, the value these trees provide both in soil preservation and environment are irreplaceable in our or our children's lifetime. Redwood trees are protected because they are part of a complex community of living things interacting with their environment. Our community's ecosystem depends on Redwoods and they should be protected by the County and Department of Conservation and Development. This permit should be denied.

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2018 FEB -5 P 12: 19

DEPARTMENT OF
CONSERVATION
AND DEVELOPMENT

TP17-0033

# WHY PROTECT REDWOODS?

Photo by Jane Rix / Shutterstock

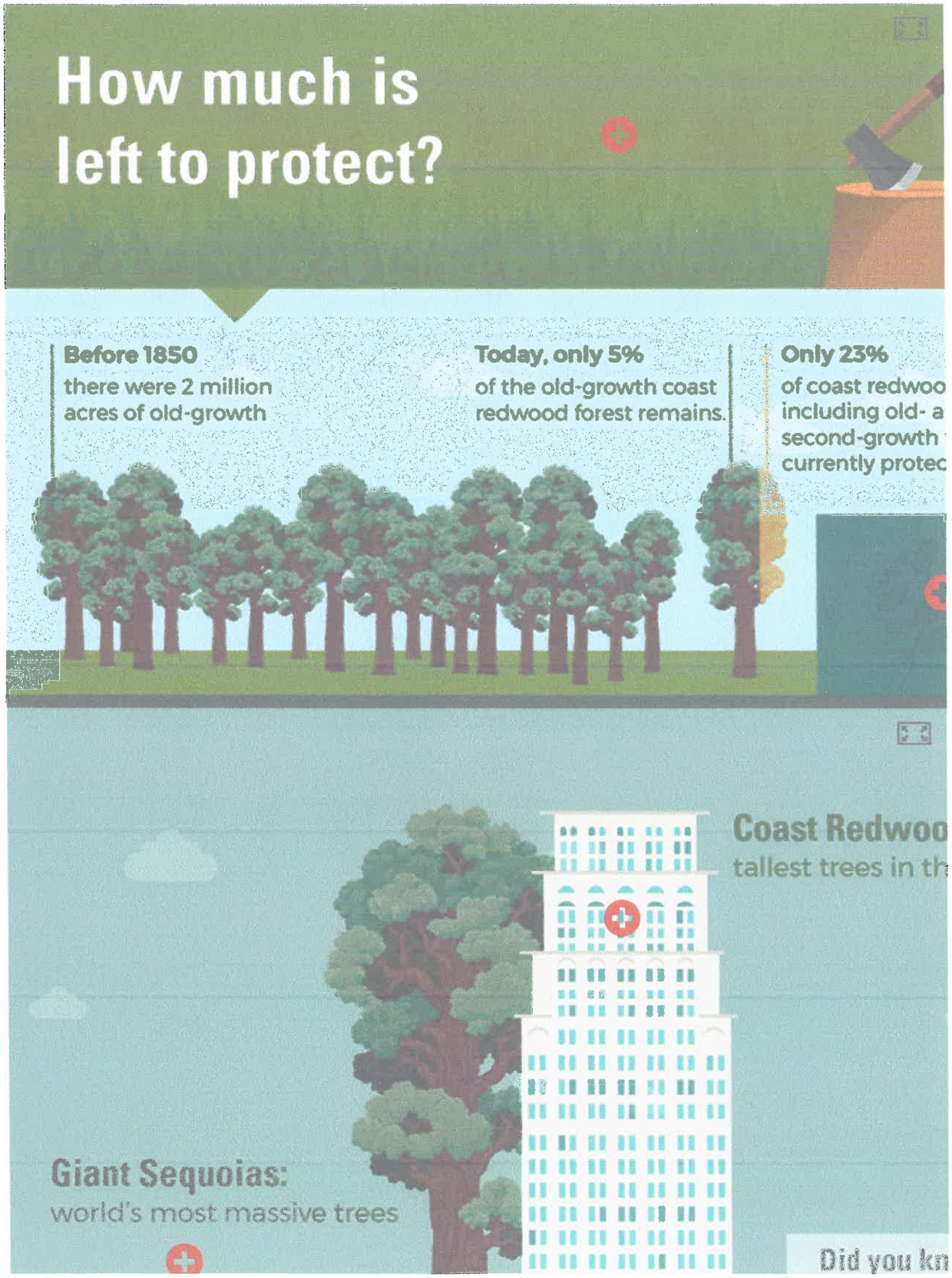
Home (https://www.savetheredwoods.org/) » About Redwoods (https://www.savetheredwoods.org/redwoods/) » Why Protect Redwoods?

The coast redwood (https://www.savetheredwoods.org/redwoods/coast-redwoods/) and giant sequoia (https://www.savetheredwoods.org/redwoods/giant-sequoias/) forests are home to the **tallest and largest trees on the planet**. They represent the original face of nature, embodying a beauty **millions of years** in the making. These forests **store more carbon** from the atmosphere than any other forest ecosystem, and they **support communities of life** found nowhere else on Earth.

**The redwood forests are the greatest forests on Earth.**

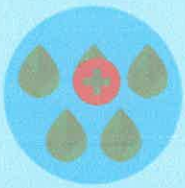
But the redwood parks and private lands we have protected over the last century **still need help**. The primeval forests today resemble islands of disconnected old-growth stands — pinched at the edges by clear-cuts, development and agriculture. They depend on streams choked by sediment, and they are cared for by parks organizations that are under-funded and under-resourced.

Explore the **interactive infographic** below to learn more about why we need to protect the redwood forest.



# Redwood trees: life support for people and wildlife

## A weapon against climate change



## A safe haven for endangered birds

Marbled murrelets

Northern spotted owl

## A home for imperiled wildlife

Black bears

## Healthy trees, healthy people

Spending time in nature has tangible benefits to personal health and well-being.

## Clean water for people and fish

Redwoods filter and shade our rivers and streams, helping to provide clean drinking water for people and clear, cool water that fish like salmon require.

Coho salmon

Press & News (https://www.savetheredwoods.org/about-us/newsroom/)
Leadership (https://www.savetheredwoods.org/about-us/governance/)
Partners (https://www.savetheredwoods.org/what-we-do/our-work/partner/)
Financials (https://www.savetheredwoods.org/about-us/financial-info/)

## PROGRAMS

Land Protection (https://www.savetheredwoods.org/what-we-do/our-work/protect/land-projects/)
Redwood Genome Project (https://www.savetheredwoods.org/project/redwood-genome-project/)
Redwoods Rising (https://www.savetheredwoods.org/project/redwoods-rising/)
Redwoods and Climate Change (https://www.savetheredwoods.org/what-we-do/our-work/study/understanding-climate-change/)
Redwood Education Program (https://www.savetheredwoods.org/what-we-do/our-work/connect/supporting-education/)
Science and Research Programs (https://www.savetheredwoods.org/what-we-do/our-work/study/)
Explore Redwoods (https://www.savetheredwoods.org/get-involved/visit/)

## GET INVOLVED

Support State Parks (https://www.savetheredwoods.org/what-we-do/our-work/connect/support-california-state-parks/)
Volunteer (/get-involved/take-action/volunteer)
Sign A Pledge (https://www.savetheredwoods.org/learning-center/act/redwoods-pledge/)
Send Ecards (https://www.savetheredwoods.org/get-involved/take-action/redwoods-ecards/)
View | Submit Redwood Art (https://www.savetheredwoods.org/get-involved/take-action/redwoods-art/)
Join Our Online Communities

(https://www.facebook.com/SaveTheRedwoodsLeague)
(http://twitter.com/savetheredwoods/)
(http://www.linkedin.com/company/save-the-redwoods-league)
(https://plus.google.com/+SavetheredwoodsOrg1918/posts)
(http://www.youtube.com/savetheredwoods)

(http://instagram.com/savetheredwoods/)
(http://www.pinterest.com/saveredwoods/)

## RESOURCES

Giant Thoughts Blog (https://www.savetheredwoods.org/category/blog/)
FAQs (https://www.savetheredwoods.org/about-us/faqs/)
Publications (https://www.savetheredwoods.org/about-us/publications/)
Redwoods Learning Center (https://www.savetheredwoods.org/learning-center/)
Live Redwoods Webcam (https://www.savetheredwoods.org/get-involved/visit/virtual-redwoods/)
Privacy Policy (https://www.savetheredwoods.org/privacy-policy/)

## CONTACT US

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Directions (/about-us/contact/)

Save the Redwoods League is a 501(C)(3) nonprofit organization.
Gifts are tax deductible to the fullest extent of the law. Our tax identification number is 94-0843915.

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CONTRA COSTA COUNTY
2018 FEB -5 P 12: 19
DEPARTMENT OF CONSERVATION AND DEVELOPMENT

Retired Full-time Faculty Member
Dept. of Landscape Horticulture
Merritt College
12500 Campus Drive
Oakland CA 94619
plantinfolady@me.com

T17-0033

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Sophia Patel
1597 Hillgrade Ave.
Alamo CA 94507
sophie.patel@gmail.com
1(415) 306-1776

2/2/18

Summary

On 1/29/18, I examined the redwood trees belonging to your neighbors that used to grow on your property at 1597 Hillgrade Ave., Alamo CA 94507, before the property was subdivided. The trees now grow at 1593 Hillgrade Ave. You asked me to form my own opinions about your situation, and to write this letter for you to present to the City of Alamo's Planning Commission and the City Counsel regarding their condition and whether or not they should be removed. You, Sophia and Lomit Patel, and your neighbors, Gabriela Odell and Bruce Tarter, at 1591 Hillgrade Ave., have appealed the decision of the Planning Commission, because you don't want these trees to be removed.

I have reviewed the reports from the other arborists, a soil report on water coming down the canyon, and the current conclusion of the Planning Commission. These items are listed and discussed below.

As described in detail below, it is my opinion and conclusion that the redwoods are regenerating themselves from both drought and construction damage, and have seen the new growth that is now visible from offshoots at the base of the trunks and from the *epicormic shoots*[1] growing throughout the lower canopies. With some pruning, possible cabling, and irrigation recommended by both Torrey Young and me, these trees will recover. Torrey Young and I are both Board Certified Master Arborists and are Tree Risk Assessment Qualified with the International Society of Arboriculture, and can speak to the issues not brought up by Tim Hendricks and Gil Gibson. And I recommend that the Planning Commission rescind their recommendation for removal of the trees and follow the Alamo Tree Protection Ordinance.

Introduction

Background and History

On 1/25/18, you called me regarding your concerns about your neighbor's redwood trees, located at 1593 Hillgrade Ave, Alamo CA, that they want to remove. You told me that you had been told that your neighbors had produced two arborist reports, and you had produced only one; and you asked me for a second opinion. We arranged for me to visit your home to see the situation. On 1/29/18 I made the site visit, and met your neighbor, Gabriela Odell, and you in front of your home, to view the trees and to discuss the situation.

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[1] Please refer to the Glossary of Terms as needed.

We did not enter the property at 1593 Hillgrade Ave., and I did not perform any advanced investigative work except to take images, but I reviewed the reports listed above, and am basing my opinions on my extensive knowledge of coast redwoods and how they grow and respond to their environment and construction impacts.

While performing my visual assessment of the trees, I observed considerable dieback of branches, but I also saw healthy trunks and lower branches that are re-sprouting new growth from both branches and trunks, and new offshoot second growth trees growing from the base of the larger trees – as is typical for coast redwoods. I also saw no evidence of insect damage or disease. My observations are consistent with those made by Torrey Young, in his report written to your neighbor Gabriela Odell - who wants the trees retained. Young's report indicates that the Google Earth images show the trees in better health in the past.

Assignment

On 1/29/18, during my site visit, you and your neighbor, Gabriela Odell, asked me to review some material that you sent me, and to form my own opinions of the situation regarding the redwoods, and whether or not they should be removed. You also asked me to prepare this letter detailing my conclusions regarding the other arborist reports and their opinions.

Limits of the Assignment

My report is based on my observations, my images of the trees taken on 1/29/18, and the information and images sent to you in the other reports listed. Some of my images are included in Appendix A, with comments on each image.

I have no personal interest in or bias with respect to the subject matter of this evaluation report or the parties involved. I have inspected the subject trees and, according to my knowledge and belief, all statements and information in this report are true and correct and are based on my education and experience.

Purpose and Use of the Report

The purpose of this report is to document my site visit, to identify the plants and the property in question, and to describe my observations and conclusions regarding your situation.

This report can be used by you, as you see fit.

Observations

First, I determined that the subject *trees*[2] on your neighbors' property are a group of *Sequoia sempervirens* (coast redwoods,) that are native to the Pacific coast of northern California. According to you, the three trees had once been part of your property before the lot was subdivided and the home at 1593 Hillgrade Ave. was built.

You told me that, in the past, there had been other redwoods on the property at 1593 Hillgrade Ave. that had been removed without permission by your neighbors, and that you are now concerned about losing the visual screen between you and the neighbors' new home with the redwoods that remain. You also told me about soil and drainage issues you've had in recent years, with water intruding into your home. And Gabriela Odell expressed concern about the water that would flood her property as well, if the trees are removed.

I saw the trees and the current *dieback*[3] issues with them, but also told you about how coast redwoods grow and recover from damage. I saw both the presence of new offshoot trees, or suckers, growing from the base of the

[2] Please refer to the Glossary of Terms as needed.

[3] Please refer to the Glossary of Terms as needed.

trunks; and I saw the presence of epicormic shoots, or new growth, coming from the branches and trunks throughout the canopies of the trees. These shoots emerge from latent lateral buds buried beneath the bark, and are the trees' backup system - in case the major branches die back or are lost.

Finally, I saw the area above your home, where water drains down the canyon, and onto your property and onto the properties below.

Analysis or Testing:

I took some images that illustrate my conclusions, and confirmed the descriptions of the trees and their issues from the Young report - as they are accurate. I also read all of the reports listed above, and noted the experience or lack of experience of the arborists who wrote those reports.

I then reviewed the following items at your request:

1. A report from Waraner Tree Experts to Steven McKee, entitled *Tree Assessment at 1597 (sic) Hillgrade Ave., Alamo CA 94507*, signed by Dustin Waraner and dated 1/27/14. Specifications for protecting the trees during construction are included.
2. A Soil Report from Engineered Soil Repairs, Inc. to Sophia Patel, 1597 Hillgrade Ave., Alamo CA 94507, dated 4/25/16, that describes the amount of water coming down the drainage and erosion problems on the site.
3. A letter/report from Tim Hendricks, untitled, unsigned, and undated, citing an inspection of 4/8/17, where he concludes that the trees are unlikely to survive due to the drought.
4. A letter from Brightview to Gil Gibson, regarding 1953 Hillgrade Ave, signed by Bob Peralta and dated 10/12/17.
5. A letter from Torrey Young of Dryad LLC to Gabriela Odell of 1591 Hillgrade Ave., Alamo CA 94507, regarding the evaluation of trees relative to a tree permit appeal. His conclusion is that the trees have been most likely damaged by the combination of construction damage and drought at 1591 Hillgrade Ave., but can recover with corrective pruning, some cabling, and time.
6. A Staff Report from the County Planning Commission, listing the appeal of the Gibson tree permit. The reason given for their removal is listed as being because the trees have been determined to be in poor health. The appeal has been filed by Sophia and Lomit Patel and Gabriela Odell and Bruce Tarter.

Discussion and Conclusions:

I have done extensive work with coast redwoods during my thirty years of teaching at Merritt College in the Landscape Horticulture and Environmental Sciences departments. I have taken students on field trips to see coast redwoods in many places, and taught courses on CA Native Plants, Redwood Ecology, Forest Ecology, and Forestry at Merritt College. And I've done naturalist work with the Sierra Club in the past to visit coast redwood groves. Since 1992 I've also had a great many consulting jobs dealing with coast redwoods and their issues. From this experience, I know that coast redwoods are native to the fog belt of CA from just above the Oregon border down to the Santa Lucia Mountains, where they are found in the bottoms of canyons where there is enough water. They die out up north with winter snow, but can grow successfully outside their native range all over California in temperate areas by simply giving them enough water.

Some other information about coast redwoods that may be of interest is that their roots can extend out two to three times their height, although they tend to be shallow in clay soils or where there is shallow bedrock. So they can hold steep and flooded soils well. Coast redwoods naturally provide mulch to the soil in the form of dead leaves and branches; and their trunks and branches contain systems of latent lateral buds just beneath the bark that can re-sprout whenever branches are lost. After the Oakland hills fire, I watched a large group of redwoods recover in the hills over a period of several years. They had lost every single branch - leaving only blackened trunks. Over several years, the lateral buds re-sprouted to form new branch systems on all of the trees. Similar images are also included in Torrey Young's report.

I have also seen thousands of healthy redwoods in the central valley and in inland areas where they are irrigated as needed. I have seen them recover from extensive construction damage, due to the formation of new root systems and suckers from buds in the lower trunks. They are famous for recovering from both fire and flood. In addition, because they have an indirect vascular connection between their roots and their branches, if some roots are lost, the others can still provide water to the branches that survive; and then new branches form – even if there has been dieback during the process. In addition, coast redwoods sucker, and produce offsets from the base. This can be observed in the large redwood groves at Henry Cowell Redwood State Park in Felton, where old trees and their offshoots form huge "family groups." These offshoots are also forming on the specimens seen here. If the old trees are cut down, the offsets will form new trees again on the existing roots. Redwoods are extremely hard to kill. If they are cut down, the offset trees at the base of the plants simply replace the parent trees as second growth redwoods, as happened all over California when the first growth redwoods were logged off. The second growth trees then grow from the base of the old stumps.

Since coast redwoods naturally have an *excurrent* growth form[4], sometimes with one or more central leaders, they should be always be pruned to have single central leaders, that are always in control. The side branches on each leader should be pruned to be subordinate to the leader. And, if there is more than one central leader on a tree, some cabling can reinforce the connection between them as needed in urban areas.

The Tim Hendrick's report states that testing of the main stems or the roots of the trees was not done; yet he recommends their removal, probably without the knowledge of how redwoods grow and regenerate, and with no mention of the healthy growth emerging from the branches and trunks, and the basal growth that is now occurring. He says nothing of the importance of the roots for flood control.

In the Brightview report to Gil Gibson, Bob Peralta expresses concern about the decay in the trees, and about possible tree failure. Yet he's not a Qualified Tree Risk Assessor, and seems unaware that it takes many years for redwoods to decay - even if they die back. He also seems unaware that, with crown reduction, pruning, cabling and irrigation, these trees can be restored. Both Torrey Young and I are Tree Risk Assessment Qualified with the International Society of Arboriculture. Gibson also fails to mention the importance of the roots for flood control.

The soil report discusses the amount of water that flows down the canyon to your home and the areas below. So there will be plenty of water available to these trees in the future, as they recover from the construction damage done to them. The report states that, where bedrock is near the surface of the soil, the water will flow there. And that's exactly where the redwood roots are growing. Roots grow where there is both water and oxygen; and the roots will regenerate.

In the *Species Classification And Group Assignment* book, written by the Western Chapter of the ISA, listed in the bibliography, coast redwoods are listed as Class 1 trees in coastal California and Class 2 trees in inland valley areas, due to their water requirements. However there are other trees protected by the City of Alamo that are far less valuable than this species. These trees are an important asset to the area, and cannot be quickly replaced – even with large boxed specimens that can take years to establish. In fact, the larger the boxed specimen is, the slower it will root and establish in the environment.

The report written by Waraner Tree Experts to Steven McKee, entitled *Tree Assessment at 1597 (sic) Hillgrade Ave., Alamo CA 94507*, signed by Dustin Waraner and dated 1/27/14, includes clear specifications for protecting the trees during construction, before the property was subdivided. The new homeowners at 1593 Hillgrade Ave. clearly ignored this advice, as can be seen in some of the images of construction damage below, where soil and roots were removed and a patio has been installed. In some of the images, cut roots are clearly visible; and they haven't been protected.

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[4] Please refer to the Glossary of Terms as needed.

Recommendations

I recommend that you ask the Planning Commission to re-read the reports submitted by all arborists, including mine, along with the recommendations made by Waraner Tree Experts in 2014, so that they can reconsider their recommendation. These redwoods are not dying, but have simply died back and lost some branches for now, mainly due to the construction damage. All they require is pruning and possibly some cabling, as recommended by Torrey Young in his report, along with continued irrigation. The trees will regenerate the lost growth if allowed to do so. The Commission should also examine the qualifications of the arborists who submitted their reports, and learn that, while Certified Arborists have knowledge of pruning and safety considerations, Board Certified Master Arborists have attained the highest certificate possible with the International Society of Arboriculture. Both Torrey Young and I are Board Certified Master Arborists.

When these trees are pruned, I recommend that the dead wood first be removed, retaining as much of the live wood and epicormic shoots as possible, and then they then be lightly reduced in height to retain their excurrent form. Torrey Young's report contains good information. A qualified certified arborist should perform the work; and tree companies can be found by area code on the International Society of Arboriculture's website.

I recommend that the Planning Commission look up information on the growth of coast redwoods, to learn just how resilient these plants can be.

I recommend that the Planning Commission follow the tree ordinance for the City of Alamo, and not make an exception to it for political reasons. If these trees are cut down, the new growth at the base of each trunk will simply produce new redwoods.

Please let me know if any of you have any additional questions. I can be reached at (510) 568-2960.

Glossary:

| | |
|---|---|
| decurrent | Referring to crowns that are made up of a system of co-dominant scaffold branches; lacking a central leader. Contrast with excurrent. |
| dieback | A reduction in the mass of a tree as twigs and branches die. Progressive death of twigs and small branches, generally from tip to base. |
| epicormic shoots | Shoots that arise from latent or adventitious buds that occur on stems and branches and on suckers produced from the base of trees. |
| excurrent | Crown form in which a strong central leader is present to the top of the tree. Contrast with decurrent. |
| tree | A woody perennial, usually having one dominant vertical trunk and a height greater than 5 m (15 ft). |

Bibliography:

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*Random House Webster's College Dictionary*. New York: Random House. 1999.

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Organizations and Forms:

American Society of Consulting Arborists, 5130 W. 101st Circle, Westminster, CO 80030, (303) 466-2722. ASCA members are skilled in tree and other plant identification, evaluation diagnosis and repair.

International Society of Arboriculture, P.O. Box GG, 6 Dunlap Ct., Savoy, IL 61874-9902, (217) 355-9411 Fax (217) 355-9516.

Arborists are tree specialists who use their education, knowledge, training and experience to examine trees, recommend measures to enhance the beauty and health of trees, and attempt to reduce the risk of living near trees. Clients may choose to accept or disregard the recommendations of the arborist, or to seek additional advice.

Arborists cannot detect every condition that could possibly lead to the structural failure of a tree. Trees are living organisms that fail in ways we do not fully understand. Conditions are often hidden within trees and below ground. Arborists cannot guarantee that a tree will be healthy or safe under all circumstances, or for a specified period of time. Likewise, remedial treatments, like any medicine, cannot be guaranteed.

Treatment, pruning and removal of trees may involve considerations beyond the scope of the arborist's services such as property boundaries, property ownership, site lines, disputes between neighbors, and other issues. Arborists cannot take such considerations into account unless complete and accurate information is disclosed to the arborist. An arborist should then be expected to reasonably rely upon the completeness and accuracy of the information you provide.

Trees can be managed, but they cannot be controlled. To live near trees is to accept some degree of risk. The only way to eliminate all risk associated with trees is to eliminate all trees.

I, Judy Thomas, certify that:

I have personally inspected the *Sequoia sempervirens* (redwood) specimens and the property referred to in this report and have stated my findings accurately.

I have no current or prospective interest in the vegetation or the property that is the subject of this report and have no personal interest or bias with respect to the parties involved.

The analysis, opinions and conclusions stated herein are my own and are based on current scientific procedures and facts.

My analysis, opinions and conclusions were developed and this report prepared according to commonly accepted arboricultural practices.

No one provided significant professional assistance to me.

My compensation is not contingent upon the reporting of a predetermined conclusion that favors the cause of the client or any other party nor upon the results of the assessment, the attainment of stipulated results, or the occurrence of any subsequent events.

I further certify that I am a member in good standing of the American Society of Consulting Arborists and the International Society of Arboriculture. I have been involved in the field of Arboriculture since 1977.

Respectfully submitted,

Judith Thomas

Judy (Judith) Thomas
Bay Area Plant Consultants
February 2, 2018

## Appendix A – Tree and Damage Images Taken

### Photo 1

This image, taken by me on 1/29/18 from the street shows the construction damage done to the roots of the redwood trees at 1593 Hillgrade Ave. The owners of this property clearly didn't follow the recommendations of the Waraner Tree Experts Report, written for the development of this property in 2014. Masses of cut roots are visible at the base of the slope, particularly toward the bottom right of the image. In spite of this damage, however, the trees will recover if the recommendations in the Torrey Young report and this one are followed.

## Photo 2

This image, taken by me on 1/29/18 from the street at 1593 Hillgrade Ave, shows all of the trees, most of the construction damage done to the roots of the redwood trees, the regeneration of new offsets at the base of the tree trunks, and the new growth on the lower branches of these trees. The large trees, or the first growth trunks, are putting on new growth from both the trunks and the branches. And even if the large trees are cut down, which I don't recommend, the new offset trees growing at the base of the trunk will replace whatever is lost as secondary growth.

## Photo 3

This image, taken by me on 1/29/18 from the street, shows some of the construction damage done to the roots of the redwood trees farthest from the street at 1593 Hillgrade Ave, along with some dead branches. However, the trunks of these trees appear healthy; and the new offset trees at the base of the plants clearly illustrate the recuperative capacity of coast redwoods. New growth is also visible on the lower branches of these trees. Even if the large trees were cut down, which I don't recommend, the new offset trees growing at the base of the trunk will replace whatever is lost.

## Photo 4

This image, taken by me on 1/29/18 from the street, shows the construction damage done to the roots of the redwood tree closest to the street at 1593 Hillgrade Ave. The trunk of the tree appears healthy; and the new offset trees at the base of the plant clearly illustrate the recuperative capacity of coast redwoods. New growth is also visible on the lower branches of this tree. This image also illustrates the vast network of redwood roots in the soil that are receiving water from the canyon above.

## Photo 5

This image, taken by me on 1/29/18 from the street at 1593 Hillgrade Ave, is a closeup of the base of the trunk of the redwood closest to the street, with many new offset trees growing at the base of the trunk. Both offsets and epicormic shoots from the branches and trunks will replace whatever growth has been lost.

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## SERVICES OFFERED

### PLANT CONSULTATIONS

- Identification of Trees, Shrubs, Groundcovers, Vines and Turf Types
- Landscape Design and Plant Selection for New Landscapes with Consideration for Drought, Fire, Freeze and Ease of Maintenance
- Modification of Existing Landscape Designs
- Replacement Plant Selection for Established Gardens
- Specifications for Planting, Pruning and Long Term Care
- Specifications for Establishment of New Turf Areas
- Pre- and Post-Construction Site Preservation Measures
- Casualty Loss Assessments for Landscapes Damaged by Fire, Flood, Drought or Negligence
- Value Appraisal of Landscape Plants
- Arbitration of Tree Disputes

### LANDSCAPE MANAGEMENT

- Landscape Appraisal, Evaluation and Inventory
- Tree Hazard Evaluation
- Tree and Landscape Problem Identification
- Recommendations for Long Term Care of Plants
- Assessment of Plant Health and Site Restrictions for Plant Growth
- Tree Preservation for Construction Sites
- Tree Care Supervision

## RESUMÉ

- Board Certified Master Arborist WE-0113B and Tree Risk Assessment Qualified with the International Society of Arboriculture; Registered Consulting Arborist #484 with The American Society of Consulting Arborists; Aesthetic Pruning Certificate from Merritt College, 1998; Certified Aesthetic Pruner with the Aesthetic Pruners Assoc., 2011.

- Retired 5/26/07 as a Full-time Landscape Horticulture Instructor, Merritt College, Oakland CA (1977-2007); taught courses in Arboriculture, Forestry, Plant Diseases, Turf Management, General Horticulture, Ecology, Plant Terminology and identification courses in Trees, Shrubs, CA Native Plants, Groundcovers & Vines and Herbaceous Plants. Past President of the Northern CA Turf & Landscape Council (NCTLC), and editor of their quarterly online newsletter. Serves on the N CA Advisory and Executive committees of the Mediterranean Garden Society.

- Member of the American Society of Consulting Arborists, the California Arborist's Association, Inc., the International Society of Arboriculture, the Aesthetic Pruners Association, the CA Horticultural Society, the CA Native Plant Society, and the Diablo Firesafe Council.

- Holds a Master's degree in Biology from San Jose State University and a Master's Degree in Education from Stanford University; has a Bachelor's degree in Biology from Stanford University. Received the 1985 Education Award from the Northern CA Turf and Landscape Council.

- Serves as a featured speaker for the East Bay Master Gardener Program, the International Society of Arboriculture, the NCTLC, the Diablo Firesafe Council, the Nevada Shade Tree Conference, the N CA Landscape Expo. and numerous garden clubs and civic groups. Has been an education chair for the I.S.A., an editor for the Ortho book *Gardening Techniques* and was a 1985 Horticultural Delegate to China. Her garden was photographed for two Sunset books and was one of those featured on the Park Day School tour in 1989. Her new garden has been described in the MGS Journal No. 57 in July 2009.

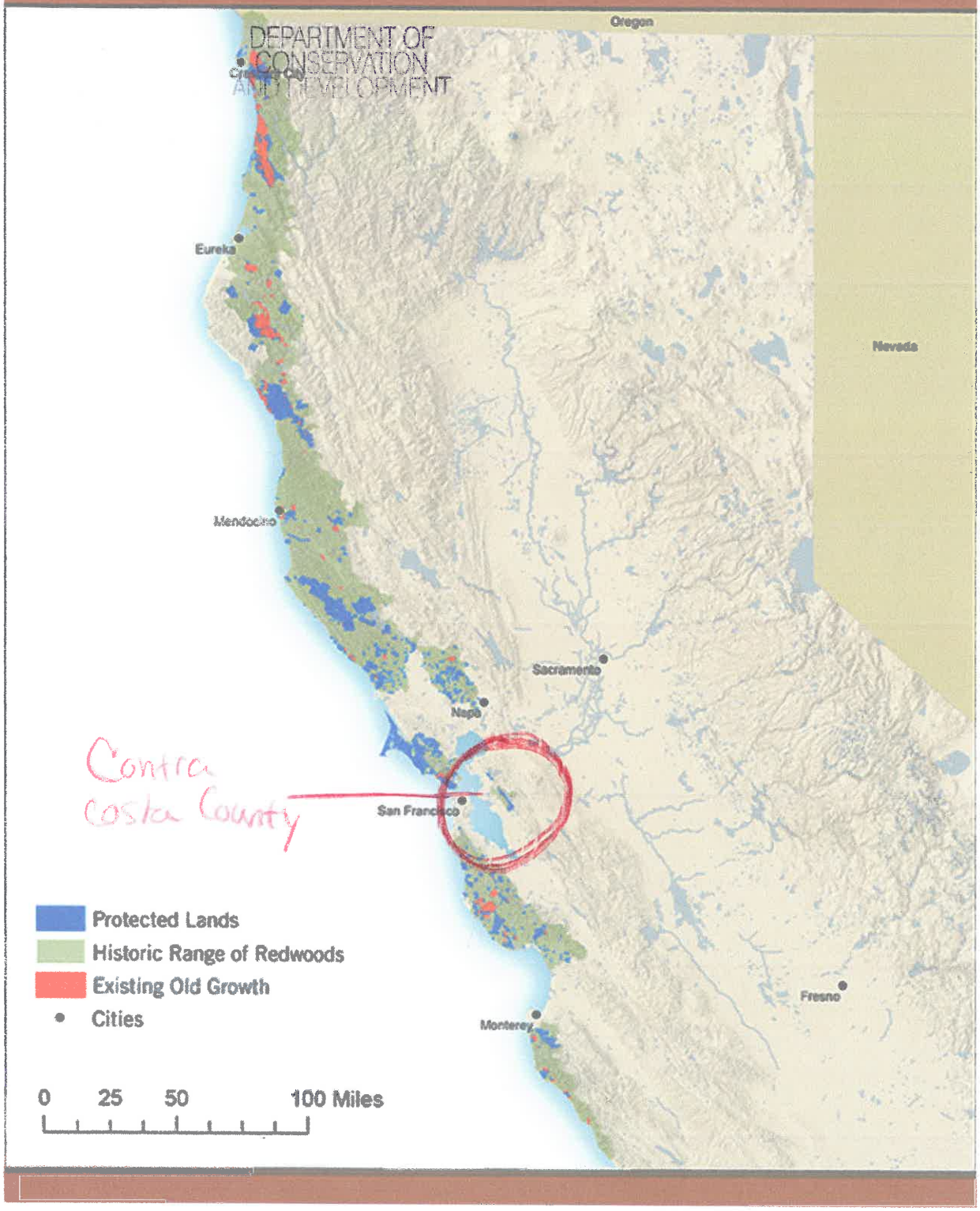
TP17-0033

CONTRA COSTA COUNTY

Save The Redwoods LEAGUE

2018 FEB -5 P 12: 19

# COAST REDWOODS



Gabriela Odell
C. Bruce Tarter
1591 Hillgrade Ave.
Alamo, CA 94507

February 5, 2017

Community Development Division
Application and Permit Center
30 Muir Road.
Martinez, CA 94553

CONTRA COSTA
2018 FEB -5 AM 11:27
APPLICATION & PERMIT CENTER

RE: County File TP17-0033
Appeal from Panning Commission Decision dated January 24, 2017

I. Introduction

This is an appeal from a Planning Commission decision rendered on January 24, 2017 denying an appeal brought by Bruce Tarter and Gabriela Odell ("Appellants") at 1591 Hillgrade Avenue in Alamo to overturn the approval of an application by the property owners Gil and Carla Gibson (applicants") at 1593 Hillgrade Avenue to remove three large code protected redwoods from their property. The Planning Commission's deliberations ended in a three-to-three tie, with the recommendations by the Conservation and Development Department staff breaking the tie. The appeal is brought on the following grounds:

1. The Conservation and Development Department staff ("staff") failed to properly consider and evaluate the expert reports in light of the County's Tree Protection and Preservation Ordinance. The staff admitted that the decision to approve the removal of the trees was simply based on the fact that the applicant had submitted two reports while the appellants had submitted one. One of the reports was undated, unsigned and without letterhead. The staff did not provide any evaluation of the relative quality of the reports, nor the qualifications of the arborists who wrote them. In fact, they mischaracterized the report prepared by the appellants' expert as being in agreement with those of the applicant. At the hearing this was strongly contradicted by the author of the report in oral testimony as well as by Commissioners who had read it. This simple-minded method of making decisions defies logic as well as staff's duties under the law.

The three commissioners who voted to uphold staff's recommendations did not apply or consider the requirements of the tree protection ordinance and simply followed the staff's recommendations despite overwhelming evidence from a highly qualified certified master consulting arborist that the trees were healthy and could be saved.

2. Because the decision to allow the removal of the code protected redwoods was simply based on a "numbers game," appellant hereby submits a second report by a Certified Master Arborist who separately evaluated the trees. While affirming that the trees in question are healthy and should be protected, she also emphasizes the function the trees currently provide to prevent soil erosion and mud flow on the hill directly above appellants' house.

As Commissioner Clark and Chairman Steele correctly stated at the hearing, there is simply no good reason presented by the applicants or the staff as to why the trees should be removed. Commissioner Clark noted staff had failed to provide any analysis of which arborists' reports had been more accurate. Chairman Steele noted correctly that the trees are in a watershed where they will get plenty of water and will recover from construction damage. Commissioner Van Buskirk actually drove by and looked at the trees and did not "see them as anything that needed to be removed." The Commissioners all noted their personal experience that redwoods are able to survive almost anything.

The three commissioners who voted in favor of the staff recommendations simply did so because of the staff's superficially considered recommendation, and their belief that "property rights" took precedence over the requirements of the tree protection and preservation ordinance.

## II. BACKGROUND

Appellants Tarter and Odell live adjacent to the applicants and moved into their home in late 2013. At that time the lot next to them was a single one-acre parcel with a small unoccupied house at the top. The lot was split into two irregular shapes and a building permit was granted for the construction of a 3500 square foot home on the small buildable portion of the lower lot next to appellants. There were eight code protected trees on the property at the time. The Department allowed several redwoods to be removed to permit the building of the home. An agreement was entered into between Tarter/Odell and the County that four redwoods would be replanted to provide screening from the large home being constructed. The building permit also required protective measures recommended by Waraner Tree in 2014. None of the protective measures was ever enforced and the four new trees were allowed to die and were removed by applicants without permission. The new home was completed around November 2016.

Two of the code protected redwoods in question currently sit at the fence line between appellant's and the applicant's property. The largest is 40 inches in diameter. The third sits on the common driveway shared by appellants Lomit and Sophie Patel and applicants.
The trees are probably at least 50 years old and provide screening from the neighbors on the hill above and have always been an attractive feature in the neighborhood. They also sit directly in the watershed coming down the steep hill above and protect appellants from mud flow during heavy rainstorms. In fact, during those storms, a rapid torrent of water flows directly from the canyon above the trees into appellant's property, to the point where flooding

sometimes occurs. If the trees were not there, that water would likely carry large amounts of mud with it onto appellant's property. (Two photographs are attached, one showing the area beneath the fence next to the 40 inch tree that is already being eroded, the other showing how the trees screen the Tarter/Odell property from the Patel house as well as other properties on the hill.)

III. The Tree Protection and Preservation Ordinance

The Coast Redwoods at question here are protected under County Ordinance 816-6.6004. They are considered "indigenous tree' under the ordinance. The ordinance requires a number of factors in approving or denying a tree permit removal. If the tree is to be removed because of health, the code requires:

> (A) The arborist report indicates that the tree is in poor health and cannot be saved.

The code also states the reasons for denial of a permit include a determination that:

> (B) It is reasonably likely that alteration or removal of the tree will cause problems with drainage, erosion control, land stability, windscreen, visual screening, and/or privacy and said problems cannot be mitigated as part of the proposed removal of the tree;
>
> (C) The tree to be removed is a member of a group of trees in which each tree is dependent upon the others for survival;
>
> (D) The value of the tree to the neighborhood in terms of visual effect, wind screening, privacy and neighboring vegetation is greater than the hardship to the owner;

IV. The Staff Report upon which three of the Commissioners relied in denying the appeal was flawed

The staff report did not even mention the factors required to be considered by the Tree Preservation and Protection Ordinance. It simply concluded the trees were "unhealthy" without any analysis of their survivability or the consequences of removing them. Nor did they pay any attention to appellants' letter expressing concerns about the consequences to the hillside and the potential mud flow if the trees were removed. The trees' roots provide an extensive system that keeps the bare dirt on applicants' property from flowing directly underneath the fence and into appellants' property.

The applicant submitted two arborists reports, one by a Tim Hendricks that was undated, unsigned and without letterhead. The other is dated October 12, 2017 by a Bob Peralta of BrightView Tree Care Services. Background research indicates that Gil Gibson, the neighbor applicant, is a landscape contractor who worked for 23 years for a company that is now BrightView. Tim Hendrick's LinkedIn page also shows that he works for BrightView. These facts lead one to the suspicion that these are by no means "independent" arborists but are likely cronies of the applicant.

These two reports are conclusory without any basis for their opinions, nor do they contain any information as to why the arborists are particularly qualified concerning redwoods. In contrast, Torrey Young of Dryad Tree, who testified at the hearing on behalf of the appellants is:

1. an ISA Board Certified Master Arborist. He is also Vice Chair of the committee that writes the BCMA qualifying exam questions and the committee that writes the national industry ANSI standards.

2. an American Society of Consulting Arborists, ISA Municipal Specialist and Certified Urban Forrester;

3. Tree Risk Assessment Qualified

3. Has been in the business for 45 years

4. Has twice served as a Consulting Arborist to Contra Costa County and has served as an expert witness more than 100 times.

5. Unlike Applicants' arborists, he does not cut trees for a living and only serves as an independent consultant.

6. He has had no affiliation with Brightview.

His report and testimony provided overwhelming support to the appellants' contention that the trees are recovering rapidly from the construction damage and are not in any danger of dying or being considered a danger. They are exhibiting new growth and no evidence of disease.

Furthermore, the staff falsely and erroneously asserted that Mr. Young's report "agreed" with the reports of the two applicant arborists. When asked to explain this by the Commission at the hearing, staff falsely asserted that the reports "overlapped" but had to admit that Mr. Young's conclusion was different.

Despite these flaws and the strength and quality of Mr. Young's qualifications and report, the staff and the three members of the commission simply rubber stamped the application based on their "2 to 1" logic and their personal bias that property rights are more important than compliance with the tree protection ordinance.

Those Commissioners who voted to deny the tree removal application stressed that their job is to apply the tree protection ordinance to preserve the trees. Besides Mr. Young's report and testimony, they relied on their own personal experience with the resiliency of redwood trees and their ability to survive for thousands of years through almost any kind of construction, climate, fire or flood damage.

V. Appellants second report, also written by an eminently qualified Certified Master Arborist, supports Appellant's first report

Judith Thomas is a former faculty member of the Department of Landscape Horticulture at Merritt College. Like Torrey Young, she is a Certified Master Arborist and is Tree Risk Assessment Qualified by the International Society of Arboriculture. She has extensive experience with redwoods and has taught and consulted about them for many years. Her report extensively explains why the trees in question are not in any danger of dying and are likely to recover their former lush appearance.

Besides the resiliency of the trees, the report also discusses the large amount of water drainage that flows down the hill to appellants' property causing flooding during storms. The trees provide an elaborate root system preventing the soil from loosening on the hillside and flowing into appellants' property.

The staff completely failed to take these facts in account. It is not clear that they ever personally performed an inspection. Furthermore, no one, including the one commissioner who did personally view the neighboring property, ever viewed appellants' property (which is located behind an iron gate) and thus could not have evaluated the screening function performed by the two trees on the appellants' fence line.

VI. Conclusion

Three of the voting commissioners, including the Chairman, correctly concluded that the staff and the applicant had provided no reliable evidence that the trees in question are in danger of dying. Commissioner Clark stated twice that "there is something going on here" that he could not understand as he saw no reason for the staff's recommendation. The trees do not interfere with any development of the property and sit harmlessly in a corner well away from the house. Commissioner Van Buskirk correctly stated that applicant's plan to replace the redwoods with fully grown oak trees did not make sense in light of the fact that he would be replacing established trees with an extensive root system with fully grown oaks that would take years to take root and would be at risk of failure. None of applicants' reasoning makes sense.

Allowing applicants to cut these beautiful trees would render the tree protection ordinance meaningless. The staff's simple-minded method of determining outcome by counting how many reports are submitted by each party without regard to their quality would, if taken to its extreme, enable any party to win by simply flooding the staff with multiple reports. This surely can't be the way decisions are made.

The permit should be denied.

Gabriela Odell

Bruce Tarter

Attachments (3)

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RECEIVED
CONTRA COSTA COUNTY
FEB 05 2018
Dept of Conservation & Development

TPM-0033

Retired Full-time Faculty Member
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Sophia Patel
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1(415) 306-1776

2/2/18

Summary

On 1/29/18, I examined the redwood trees belonging to your neighbors that used to grow on your property at 1597 Hillgrade Ave., Alamo CA 94507, before the property was subdivided. The trees now grow at 1593 Hillgrade Ave. You asked me to form my own opinions about your situation, and to write this letter for you to present to the City of Alamo's Planning Commission and the City Counsel regarding their condition and whether or not they should be removed. You, Sophia and Lomit Patel, and your neighbors, Gabriela Odell and Bruce Tarter, at 1591 Hillgrade Ave., have appealed the decision of the Planning Commission, because you don't want these trees to be removed.

I have reviewed the reports from the other arborists, a soil report on water coming down the canyon, and the current conclusion of the Planning Commission. These items are listed and discussed below.

As described in detail below, it is my opinion and conclusion that the redwoods are regenerating themselves from both drought and construction damage, and have seen the new growth that is now visible from offshoots at the base of the trunks and from the *epicormic shoots*[1] growing throughout the lower canopies. With some pruning, possible cabling, and irrigation recommended by both Torrey Young and me, these trees will recover. Torrey Young and I are both Board Certified Master Arborists and are Tree Risk Assessment Qualified with the International Society of Arboriculture, and can speak to the issues not brought up by Tim Hendricks and Gil Gibson. And I recommend that the Planning Commission rescind their recommendation for removal of the trees and follow the Alamo Tree Protection Ordinance.

Introduction

Background and History

On 1/25/18, you called me regarding your concerns about your neighbor's redwood trees, located at 1593 Hillgrade Ave, Alamo CA, that they want to remove. You told me that you had been told that your neighbors had produced two arborist reports, and you had produced only one; and you asked me for a second opinion. We arranged for me to visit your home to see the situation. On 1/29/18 I made the site visit, and met your neighbor, Gabriela Odell, and you in front of your home, to view the trees and to discuss the situation.

[1] Please refer to the Glossary of Terms as needed.

We did not enter the property at 1593 Hillgrade Ave., and I did not perform any advanced investigative work except to take images, but I reviewed the reports listed above, and am basing my opinions on my extensive knowledge of coast redwoods and how they grow and respond to their environment and construction impacts.

While performing my visual assessment of the trees, I observed considerable dieback of branches, but I also saw healthy trunks and lower branches that are re-sprouting new growth from both branches and trunks, and new offshoot second growth trees growing from the base of the larger trees – as is typical for coast redwoods. I also saw no evidence of insect damage or disease. My observations are consistent with those made by Torrey Young, in his report written to your neighbor Gabriela Odell - who wants the trees retained. Young's report indicates that the Google Earth images show the trees in better health in the past.

Assignment

On 1/29/18, during my site visit, you and your neighbor, Gabriela Odell, asked me to review some material that you sent me, and to form my own opinions of the situation regarding the redwoods, and whether or not they should be removed. You also asked me to prepare this letter detailing my conclusions regarding the other arborist reports and their opinions.

Limits of the Assignment

My report is based on my observations, my images of the trees taken on 1/29/18, and the information and images sent to you in the other reports listed. Some of my images are included in Appendix A, with comments on each image.

I have no personal interest in or bias with respect to the subject matter of this evaluation report or the parties involved. I have inspected the subject trees and, according to my knowledge and belief, all statements and information in this report are true and correct and are based on my education and experience.

Purpose and Use of the Report

The purpose of this report is to document my site visit, to identify the plants and the property in question, and to describe my observations and conclusions regarding your situation.

This report can be used by you, as you see fit.

Observations

First, I determined that the subject *trees*[2] on your neighbors' property are a group of *Sequoia sempervirens* (coast redwoods,) that are native to the Pacific coast of northern California. According to you, the three trees had once been part of your property before the lot was subdivided and the home at 1593 Hillgrade Ave. was built.

You told me that, in the past, there had been other redwoods on the property at 1593 Hillgrade Ave. that had been removed without permission by your neighbors, and that you are now concerned about losing the visual screen between you and the neighbors' new home with the redwoods that remain. You also told me about soil and drainage issues you've had in recent years, with water intruding into your home. And Gabriela Odell expressed concern about the water that would flood her property as well, if the trees are removed.

I saw the trees and the current *dieback*[3] issues with them, but also told you about how coast redwoods grow and recover from damage. I saw both the presence of new offshoot trees, or suckers, growing from the base of the

[2] Please refer to the Glossary of Terms as needed.

[3] Please refer to the Glossary of Terms as needed.

trunks; and I saw the presence of epicormic shoots, or new growth, coming from the branches and trunks throughout the canopies of the trees. These shoots emerge from latent lateral buds buried beneath the bark, and are the trees' backup system - in case the major branches die back or are lost.

Finally, I saw the area above your home, where water drains down the canyon, and onto your property and onto the properties below.

Analysis or Testing:

I took some images that illustrate my conclusions, and confirmed the descriptions of the trees and their issues from the Young report - as they are accurate. I also read all of the reports listed above, and noted the experience or lack of experience of the arborists who wrote those reports.

I then reviewed the following items at your request:

1. A report from Waraner Tree Experts to Steven McKee, entitled *Tree Assessment at 1597 (sic) Hillgrade Ave., Alamo CA 94507*, signed by Dustin Waraner and dated 1/27/14. Specifications for protecting the trees during construction are included.
2. A Soil Report from Engineered Soil Repairs, Inc. to Sophia Patel, 1597 Hillgrade Ave., Alamo CA 94507, dated 4/25/16, that describes the amount of water coming down the drainage and erosion problems on the site.
3. A letter/report from Tim Hendricks, untitled, unsigned, and undated, citing an inspection of 4/8/17, where he concludes that the trees are unlikely to survive due to the drought.
4. A letter from Brightview to Gil Gibson, regarding 1953 Hillgrade Ave, signed by Bob Peralta and dated 10/12/17.
5. A letter from Torrey Young of Dryad LLC to Gabriela Odell of 1591 Hillgrade Ave., Alamo CA 94507, regarding the evaluation of trees relative to a tree permit appeal. His conclusion is that the trees have been most likely damaged by the combination of construction damage and drought at 1591 Hillgrade Ave., but can recover with corrective pruning, some cabling, and time.
6. A Staff Report from the County Planning Commission, listing the appeal of the Gibson tree permit. The reason given for their removal is listed as being because the trees have been determined to be in poor health. The appeal has been filed by Sophia and Lomit Patel and Gabriela Odell and Bruce Tarter.

Discussion and Conclusions:

I have done extensive work with coast redwoods during my thirty years of teaching at Merritt College in the Landscape Horticulture and Environmental Sciences departments. I have taken students on field trips to see coast redwoods in many places, and taught courses on CA Native Plants, Redwood Ecology, Forest Ecology, and Forestry at Merritt College. And I've done naturalist work with the Sierra Club in the past to visit coast redwood groves. Since 1992 I've also had a great many consulting jobs dealing with coast redwoods and their issues. From this experience, I know that coast redwoods are native to the fog belt of CA from just above the Oregon border down to the Santa Lucia Mountains, where they are found in the bottoms of canyons where there is enough water. They die out up north with winter snow, but can grow successfully outside their native range all over California in temperate areas by simply giving them enough water.

Some other information about coast redwoods that may be of interest is that their roots can extend out two to three times their height, although they tend to be shallow in clay soils or where there is shallow bedrock. So they can hold steep and flooded soils well. Coast redwoods naturally provide mulch to the soil in the form of dead leaves and branches; and their trunks and branches contain systems of latent lateral buds just beneath the bark that can re-sprout whenever branches are lost. After the Oakland hills fire, I watched a large group of redwoods recover in the hills over a period of several years. They had lost every single branch - leaving only blackened trunks. Over several years, the lateral buds re-sprouted to form new branch systems on all of the trees. Similar images are also included in Torrey Young's report.

I have also seen thousands of healthy redwoods in the central valley and in inland areas where they are irrigated as needed. I have seen them recover from extensive construction damage, due to the formation of new root systems and suckers from buds in the lower trunks. They are famous for recovering from both fire and flood. In addition, because they have an indirect vascular connection between their roots and their branches, if some roots are lost, the others can still provide water to the branches that survive; and then new branches form – even if there has been dieback during the process. In addition, coast redwoods sucker, and produce offsets from the base. This can be observed in the large redwood groves at Henry Cowell Redwood State Park in Felton, where old trees and their offshoots form huge "family groups." These offshoots are also forming on the specimens seen here. If the old trees are cut down, the offsets will form new trees again on the existing roots. Redwoods are extremely hard to kill. If they are cut down, the offset trees at the base of the plants simply replace the parent trees as second growth redwoods, as happened all over California when the first growth redwoods were logged off. The second growth trees then grow from the base of the old stumps.

Since coast redwoods naturally have an *excurrent* growth form[4], sometimes with one or more central leaders, they should be always be pruned to have single central leaders, that are always in control. The side branches on each leader should be pruned to be subordinate to the leader. And, if there is more than one central leader on a tree, some cabling can reinforce the connection between them as needed in urban areas.

The Tim Hendrick's report states that testing of the main stems or the roots of the trees was not done; yet he recommends their removal, probably without the knowledge of how redwoods grow and regenerate, and with no mention of the healthy growth emerging from the branches and trunks, and the basal growth that is now occurring. He says nothing of the importance of the roots for flood control.

In the Brightview report to Gil Gibson, Bob Peralta expresses concern about the decay in the trees, and about possible tree failure. Yet he's not a Qualified Tree Risk Assessor, and seems unaware that it takes many years for redwoods to decay - even if they die back. He also seems unaware that, with crown reduction, pruning, cabling and irrigation, these trees can be restored. Both Torrey Young and I are Tree Risk Assessment Qualified with the International Society of Arboriculture. Gibson also fails to mention the importance of the roots for flood control.

The soil report discusses the amount of water that flows down the canyon to your home and the areas below. So there will be plenty of water available to these trees in the future, as they recover from the construction damage done to them. The report states that, where bedrock is near the surface of the soil, the water will flow there. And that's exactly where the redwood roots are growing. Roots grow where there is both water and oxygen; and the roots will regenerate.

In the *Species Classification And Group Assignment* book, written by the Western Chapter of the ISA, listed in the bibliography, coast redwoods are listed as Class 1 trees in coastal California and Class 2 trees in inland valley areas, due to their water requirements. However there are other trees protected by the City of Alamo that are far less valuable than this species. These trees are an important asset to the area, and cannot be quickly replaced – even with large boxed specimens that can take years to establish. In fact, the larger the boxed specimen is, the slower it will root and establish in the environment.

The report written by Waraner Tree Experts to Steven McKee, entitled *Tree Assessment at 1597 (sic) Hillgrade Ave., Alamo CA 94507*, signed by Dustin Waraner and dated 1/27/14, includes clear specifications for protecting the trees during construction, before the property was subdivided. The new homeowners at 1593 Hillgrade Ave. clearly ignored this advice, as can be seen in some of the images of construction damage below, where soil and roots were removed and a patio has been installed. In some of the images, cut roots are clearly visible; and they haven't been protected.

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[4] Please refer to the Glossary of Terms as needed.

Recommendations

I recommend that you ask the Planning Commission to re-read the reports submitted by all arborists, including mine, along with the recommendations made by Waraner Tree Experts in 2014, so that they can reconsider their recommendation. These redwoods are not dying, but have simply died back and lost some branches for now, mainly due to the construction damage. All they require is pruning and possibly some cabling, as recommended by Torrey Young in his report, along with continued irrigation. The trees will regenerate the lost growth if allowed to do so. The Commission should also examine the qualifications of the arborists who submitted their reports, and learn that, while Certified Arborists have knowledge of pruning and safety considerations, Board Certified Master Arborists have attained the highest certificate possible with the International Society of Arboriculture. Both Torrey Young and I are Board Certified Master Arborists.

When these trees are pruned, I recommend that the dead wood first be removed, retaining as much of the live wood and epicormic shoots as possible, and then they then be lightly reduced in height to retain their excurrent form. Torrey Young's report contains good information. A qualified certified arborist should perform the work; and tree companies can be found by area code on the International Society of Arboriculture's website.

I recommend that the Planning Commission look up information on the growth of coast redwoods, to learn just how resilient these plants can be.

I recommend that the Planning Commission follow the tree ordinance for the City of Alamo, and not make an exception to it for political reasons. If these trees are cut down, the new growth at the base of each trunk will simply produce new redwoods.

Please let me know if any of you have any additional questions. I can be reached at (510) 568-2960.

Glossary:

| | |
|---|---|
| decurrent | Referring to crowns that are made up of a system of co-dominant scaffold branches; lacking a central leader. Contrast with excurrent. |
| dieback | A reduction in the mass of a tree as twigs and branches die. Progressive death of twigs and small branches, generally from tip to base. |
| epicormic shoots | Shoots that arise from latent or adventitious buds that occur on stems and branches and on suckers produced from the base of trees. |
| excurrent | Crown form in which a strong central leader is present to the top of the tree. Contrast with decurrent. |
| tree | A woody perennial, usually having one dominant vertical trunk and a height greater than 5 m (15 ft). |

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Gilman, E. F. *Trees for Urban and Suburban Landscapes*. Albany, NY: Delmar Publishers. 1997. ISBN 0-8273-7053-9.

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*Random House Webster's College Dictionary*. New York: Random House. 1999.

The Western Chapter of the International Society of Arboriculture. 1992. *Species Classification and Group Assignment,* Chandler, AZ: The Western Chapter of the International Society of Arboriculture.

Organizations and Forms:

American Society of Consulting Arborists, 5130 W. 101st Circle, Westminster, CO 80030, (303) 466-2722. ASCA members are skilled in tree and other plant identification, evaluation diagnosis and repair.

International Society of Arboriculture, P.O. Box GG, 6 Dunlap Ct., Savoy, IL 61874-9902, (217) 355-9411 Fax (217) 355-9516.

Arborists are tree specialists who use their education, knowledge, training and experience to examine trees, recommend measures to enhance the beauty and health of trees, and attempt to reduce the risk of living near trees. Clients may choose to accept or disregard the recommendations of the arborist, or to seek additional advice.

Arborists cannot detect every condition that could possibly lead to the structural failure of a tree. Trees are living organisms that fail in ways we do not fully understand. Conditions are often hidden within trees and below ground. Arborists cannot guarantee that a tree will be healthy or safe under all circumstances, or for a specified period of time. Likewise, remedial treatments, like any medicine, cannot be guaranteed.

Treatment, pruning and removal of trees may involve considerations beyond the scope of the arborist's services such as property boundaries, property ownership, site lines, disputes between neighbors, and other issues. Arborists cannot take such considerations into account unless complete and accurate information is disclosed to the arborist. An arborist should then be expected to reasonably rely upon the completeness and accuracy of the information you provide.

Trees can be managed, but they cannot be controlled. To live near trees is to accept some degree of risk. The only way to eliminate all risk associated with trees is to eliminate all trees.

I, Judy Thomas, certify that:

I have personally inspected the *Sequoia sempervirens* (redwood) specimens and the property referred to in this report and have stated my findings accurately.

I have no current or prospective interest in the vegetation or the property that is the subject of this report and have no personal interest or bias with respect to the parties involved.

The analysis, opinions and conclusions stated herein are my own and are based on current scientific procedures and facts.

My analysis, opinions and conclusions were developed and this report prepared according to commonly accepted arboricultural practices.

No one provided significant professional assistance to me.

My compensation is not contingent upon the reporting of a predetermined conclusion that favors the cause of the client or any other party nor upon the results of the assessment, the attainment of stipulated results, or the occurrence of any subsequent events.

I further certify that I am a member in good standing of the American Society of Consulting Arborists and the International Society of Arboriculture. I have been involved in the field of Arboriculture since 1977.

Respectfully submitted,

Judith Thomas

Judy (Judith) Thomas
Bay Area Plant Consultants
February 2, 2018

## Appendix A – Tree and Damage Images Taken

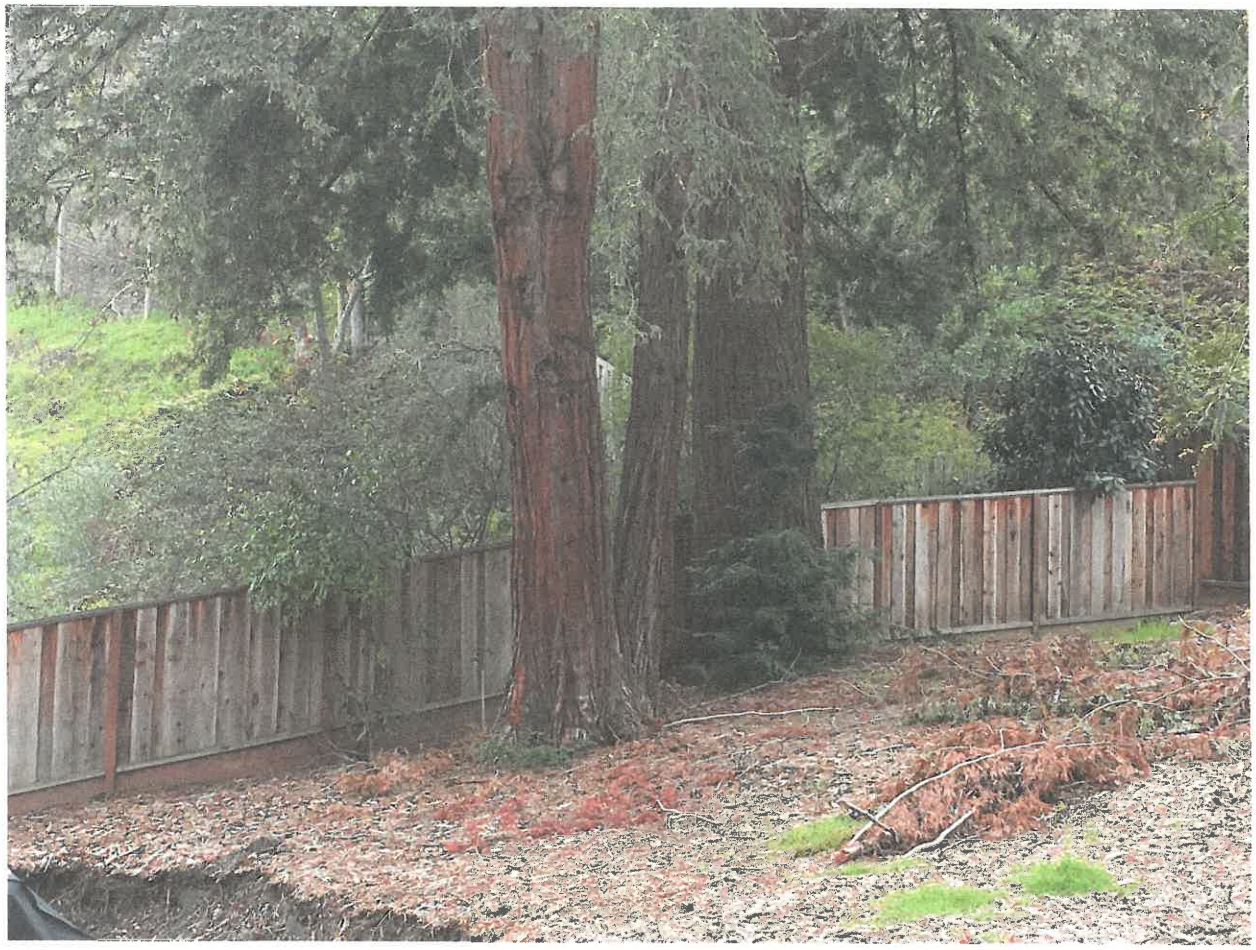
### Photo 1

This image, taken by me on 1/29/18 from the street shows the construction damage done to the roots of the redwood trees at 1593 Hillgrade Ave. The owners of this property clearly didn't follow the recommendations of the Waraner Tree Experts Report, written for the development of this property in 2014. Masses of cut roots are visible at the base of the slope, particularly toward the bottom right of the image. In spite of this damage, however, the trees will recover if the recommendations in the Torrey Young report and this one are followed.

## Photo 2

This image, taken by me on 1/29/18 from the street at 1593 Hillgrade Ave, shows all of the trees, most of the construction damage done to the roots of the redwood trees, the regeneration of new offsets at the base of the tree trunks, and the new growth on the lower branches of these trees. The large trees, or the first growth trunks, are putting on new growth from both the trunks and the branches. And even if the large trees are cut down, which I don't recommend, the new offset trees growing at the base of the trunk will replace whatever is lost as secondary growth.

**Photo 3**



This image, taken by me on 1/29/18 from the street, shows some of the construction damage done to the roots of the redwood trees farthest from the street at 1593 Hillgrade Ave, along with some dead branches. However, the trunks of these trees appear healthy; and the new offset trees at the base of the plants clearly illustrate the recuperative capacity of coast redwoods. New growth is also visible on the lower branches of these trees. Even if the large trees were cut down, which I don't recommend, the new offset trees growing at the base of the trunk will replace whatever is lost.

## Photo 4

This image, taken by me on 1/29/18 from the street, shows the construction damage done to the roots of the redwood tree closest to the street at 1593 Hillgrade Ave. The trunk of the tree appears healthy; and the new offset trees at the base of the plant clearly illustrate the recuperative capacity of coast redwoods. New growth is also visible on the lower branches of this tree. This image also illustrates the vast network of redwood roots in the soil that are receiving water from the canyon above.

## Photo 5

This image, taken by me on 1/29/18 from the street at 1593 Hillgrade Ave, is a closeup of the base of the trunk of the redwood closest to the street, with many new offset trees growing at the base of the trunk. Both offsets and epicormic shoots from the branches and trunks will replace whatever growth has been lost.

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## SERVICES OFFERED

### PLANT CONSULTATIONS

- Identification of Trees, Shrubs, Groundcovers, Vines and Turf Types
- Landscape Design and Plant Selection for New Landscapes with Consideration for Drought, Fire, Freeze and Ease of Maintenance
- Modification of Existing Landscape Designs
- Replacement Plant Selection for Established Gardens
- Specifications for Planting, Pruning and Long Term Care
- Specifications for Establishment of New Turf Areas
- Pre- and Post-Construction Site Preservation Measures
- Casualty Loss Assessments for Landscapes Damaged by Fire, Flood, Drought or Negligence
- Value Appraisal of Landscape Plants
- Arbitration of Tree Disputes

### LANDSCAPE MANAGEMENT

- Landscape Appraisal, Evaluation and Inventory
- Tree Hazard Evaluation
- Tree and Landscape Problem Identification
- Recommendations for Long Term Care of Plants
- Assessment of Plant Health and Site Restrictions for Plant Growth
- Tree Preservation for Construction Sites
- Tree Care Supervision

## RESUMÉ

- Board Certified Master Arborist WE-0113B and Tree Risk Assessment Qualified with the International Society of Arboriculture; Registered Consulting Arborist #484 with The American Society of Consulting Arborists; Aesthetic Pruning Certificate from Merritt College, 1998; Certified Aesthetic Pruner with the Aesthetic Pruners Assoc., 2011.

- Retired 5/26/07 as a Full-time Landscape Horticulture Instructor, Merritt College, Oakland CA (1977-2007); taught courses in Arboriculture, Forestry, Plant Diseases, Turf Management, General Horticulture, Ecology, Plant Terminology and identification courses in Trees, Shrubs, CA Native Plants, Groundcovers & Vines and Herbaceous Plants. Past President of the Northern CA Turf & Landscape Council (NCTLC), and editor of their quarterly online newsletter. Serves on the N CA Advisory and Executive committees of the Mediterranean Garden Society.

- Member of the American Society of Consulting Arborists, the California Arborist's Association, Inc., the International Society of Arboriculture, the Aesthetic Pruners Association, the CA Horticultural Society, the CA Native Plant Society, and the Diablo Firesafe Council.

- Holds a Master's degree in Biology from San Jose State University and a Master's Degree in Education from Stanford University; has a Bachelor's degree in Biology from Stanford University. Received the 1985 Education Award from the Northern CA Turf and Landscape Council.

- Serves as a featured speaker for the East Bay Master Gardener Program, the International Society of Arboriculture, the NCTLC, the Diablo Firesafe Council, the Nevada Shade Tree Conference, the N CA Landscape Expo. and numerous garden clubs and civic groups. Has been an education chair for the I.S.A., an editor for the Ortho book *Gardening Techniques* and was a 1985 Horticultural Delegate to China. Her garden was photographed for two Sunset books and was one of those featured on the Park Day School tour in 1989. Her new garden has been described in the MGS Journal No. 57 in July 2009.

# Dryad, LLC

17065-10168

original report submitted to Planning Commission

October 23, 2017

Garbriela Odell
1591 Hillgrade Ave.
Alamo CA 94507

RECEIVED
CONTRA COSTA COUNTY
FEB 05 2018
Dept of Conservation & Development

TP17-0033

RE.: Evaluation of trees relative to a tree permit appeal.
Contra Costa County file no.: TP17-0033.
Site: Gil Gibson, 1593 Hillgrade Ave., Alamo.

Ms. Odell;

I am writing in response to your request for a report of my recent inspection and evaluation[1] of three CA coast redwood trees (*Sequoia sempervirens*) proposed for removal.

The trees are located on the property adjacent (north) of yours, 1593 Hillgrade Ave. I met with you and inspected and photographed the trees on October 19, 2017. I performed and visual inspection, in your company and assisted by Katie Krebs, Certified Arborist[2]. Mr. Gil Gibson's son was also intermittently present and I also subsequently received a brief telephone call from Mr. Gibson.

I did not enter the property of 1593 Hillgrade Ave. and performed no advanced investigation processes. I also reviewed the site via historical images on Google earth®. I reviewed several arborist reports and other communications you provided. The reviewed documents included the following:

1. A letter-report from Brightview to Gil Gibson, subject: Consulting Arborist Report 50 1953 Hillgrade Ave.", signed by Bob Peralta and dated 10/12/2017.
2. Letter from Gabriela Odell to Mr. Farrington, Department of Conservation and Development, entitled "Appeal of tentative tree cutting permit, County File Number #TP17-0033", signed by Gabriela Odell and dated 10/02/2017.
3. Letter from Contra Costa County to Property Owner (Gil Gibson), entitled "Notice of Tentative Approval of a Tree Permit", signed by Ruben L. Hernandez and dated 09/21/2017.
4. Letter-report from Tim Hendricks, untitled, unsigned and undated (cites an inspection of 04/08/2017).
5. Letter from McKee Associates to Daniel Barrios, Planner, Contra Costa County, Subject: Landscape Plan, signed by Steven McKee, Project Architect and dated 08/29/2014.
6. Report from Waraner Tree Experts to Steven KcKee, entitled "Tree Assessment at 1597 (sic) Hillgrade Ave., Alamo CA 94507", signed by Dustin Waraner and dated 01/27/2014.

Although I reviewed these documents, they did not contain information substantial to the formation of my opinions regarding either the history of the trees or their current condition and my recommendations for the subject trees.

**SUMMARY:** I do not have a history of these trees as to the extent of impacts from adjacent construction and grading activities (i.e., slope, construction, driveway, etc.) and I was able to perform only a visual inspection from adjacent properties. However, current signs of decline were obvious and consistent with my observations of the historical condition of the trees and site via Google earth® aerial images. I did not observe any conditions that appeared to be from insect infestation or disease. Therefore, it seems likely the trees, appearing dense and vigorous in historical aerial images, were impacted by grading activities (root loss, compaction, etc.) exacerbated by having occurred during a period of extended drought.

Based upon research, observation and described assumptions as well as my professional knowledge and experience, it is my opinion that these three CA coast redwood trees will likely recover from their current condition and can thrive for many years in this location (refer to images on pages 9-10). Supportive efforts and periodic management would enhance recovery.

Dryad, LLC

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Castro Valley CA 94552

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E-MAIL: tyoung@dryadllc.com
WEB SITE: www.dryadllc.com

## OBSERVATIONS/RECOMMENDATIONS:

**Tree no. 1:**
**Observations:**
- Top dead for approximately 10-12 feet.
- 1 major limb dead at about 5-0% height (cause unknown).
- Dieback of branch tips throughout canopy[3].
- Canopy volume thin.
- Trunk taper[4] good.
- Architecture[5] good.
- Foliage of good color and limbs sprouting profusely throughout canopy.

**Recommendations:**
1. Remove the dead top to viable tissue (preserve as much viable wood as possible but cut to 360° of live cambium[6]).
2. Remove the large dead limb and any other deadwood as necessary to avoid risk (only).
3. After 2-3 year of growth, perform structural pruning[7] of the top sprouts, preferably preserving only one top.
4. Follow recommendations for all trees (following).

**Tree no. 2:**
**Observations:**
- 4 codominant[8] stems, 3 at just above grade and one at approximately 15-20 above grade (w/acute-angle attachment and included bark[9]).
- Canopy volume extremely thin.
- Recently pruned, green branches litters the are beneath the tree.
- Recent pruning cuts were apparent on all trunks.
- 1 trunk to the north had the majority of its limb removed and punctures from gaffs (climbing spikes)[10] were apparent for the entire height of the trunk.
- Poor Trunk taper of all 4 trunks.
- Foliage of good color and limbs sprouting profusely throughout canopy.

**Recommendations:**
1. Install a box cable system[11] between consecutive trunks; consider installation of through-bolts in the high bifurcation some years in the future.
   a. Avoid excessive cable tension.
   b. Anchor with drop-forged through bolts or machine-threaded through-bolts with amon nuts, appropriately sized.
   c. ¼" EHS (extra high strength) steel cable and all hardware must be intended for arboricultural use.
2. Follow recommendations for all trees (following).

**Tree no. 3:**
**Observations:**
- Canopy volume thin.
- Recently installed or rebuilt driveway within a few feet of the tree root flare; extent of root damage unknown.
- Trunk taper good.
- Architecture good.
- Codominant tops developing.
- Foliage of good color and limbs sprouting profusely throughout canopy.

**Recommendations:**
1. Remove smaller of the codominant tops while still small (long term management only).
2. Follow recommendations for all trees (following).

**RECOMMENDATIONS (ALL TREES):**

1. Mulch[12]: Cover exposed soil within at least the dripline areas of all three trees with an organic mulch (tree brush chips preferred) to a settled depth of no less than 3-4 inches. If retention is required, install jute netting on bare soil. Do not install landscape (weed-block) or geotextile fabric.
2. Irrigation: Irrigate as necessary, via slow-application (drip) irrigation, to near field capacity[13] to a depth of approximately 12-18". Repeat irrigation as needed to maintain soil moisture during extended periods of drought and/or heat.
3. Grading cut to northeast of trees 1 & 2: Cut encountered roots cleanly with hand pruners or power saw.
   a. Avoid tearing, dislodging of bark (or epidermis) or otherwise disturbing that portion of the root(s) to remain.
   b. Immediately back-fill with soil to cover, and moisten.
   c. If backfilling cannot be completed immediately, cover exposed roots with several layers of untreated burlap (or other similar absorbent material) or sand, mulch or soil and keep moist until permanent backfilling can be completed.
4. Pruning[14]: Avoid removal of any live foliage or other tissue (wood, roots) now or in the future; remove only dead branches that present risk should they fall.


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October 23, 2017
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Site: 1593 Hillgrade Ave., Alamo

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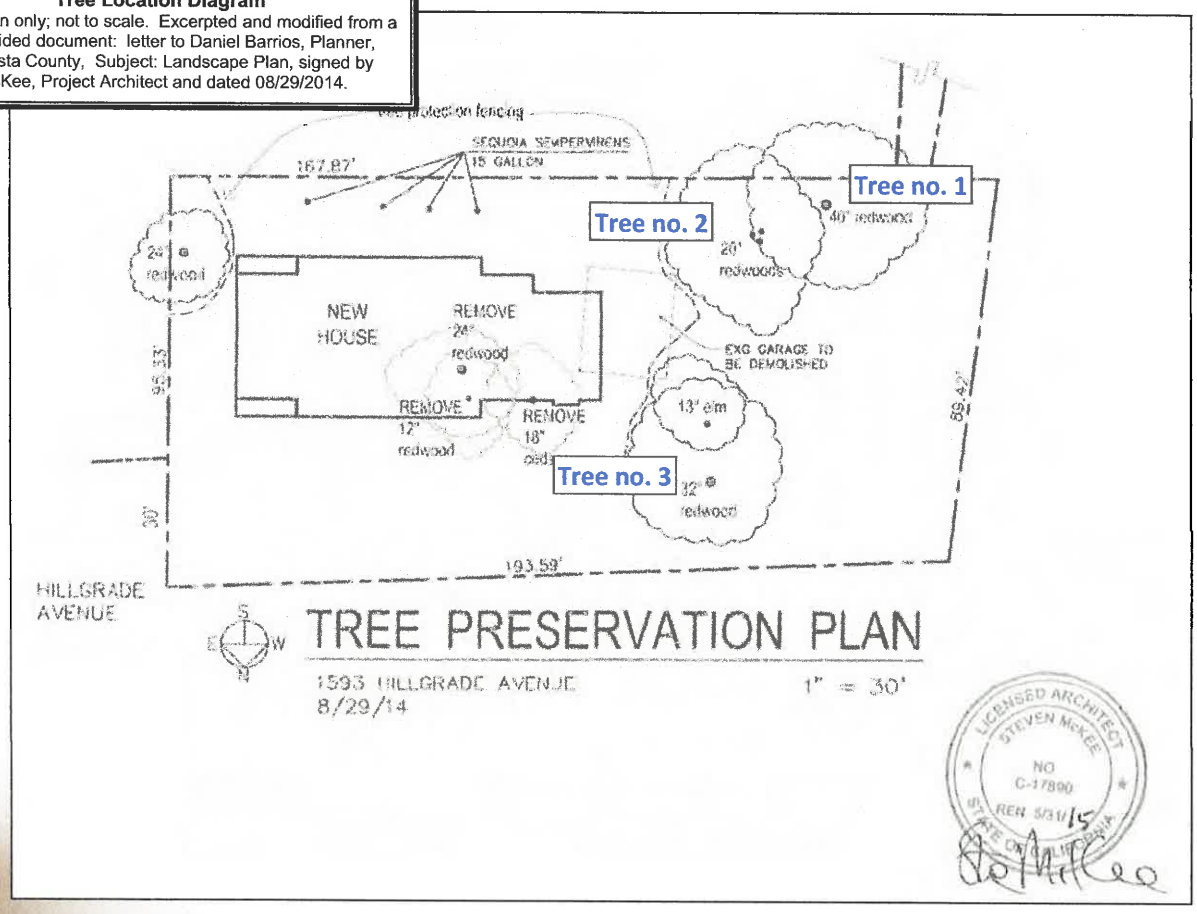
October 23, 2017
Torrey Young, Dryad, LLC
17065-10168 Odell, Gabriela
Site: 1593 Hillgrade Ave., Alamo

**Tree Location Diagram**
For location only; not to scale. Excerpted and modified from a client-provided document: letter to Daniel Barrios, Planner, Contra Costa County, Subject: Landscape Plan, signed by Steven McKee, Project Architect and dated 08/29/2014.



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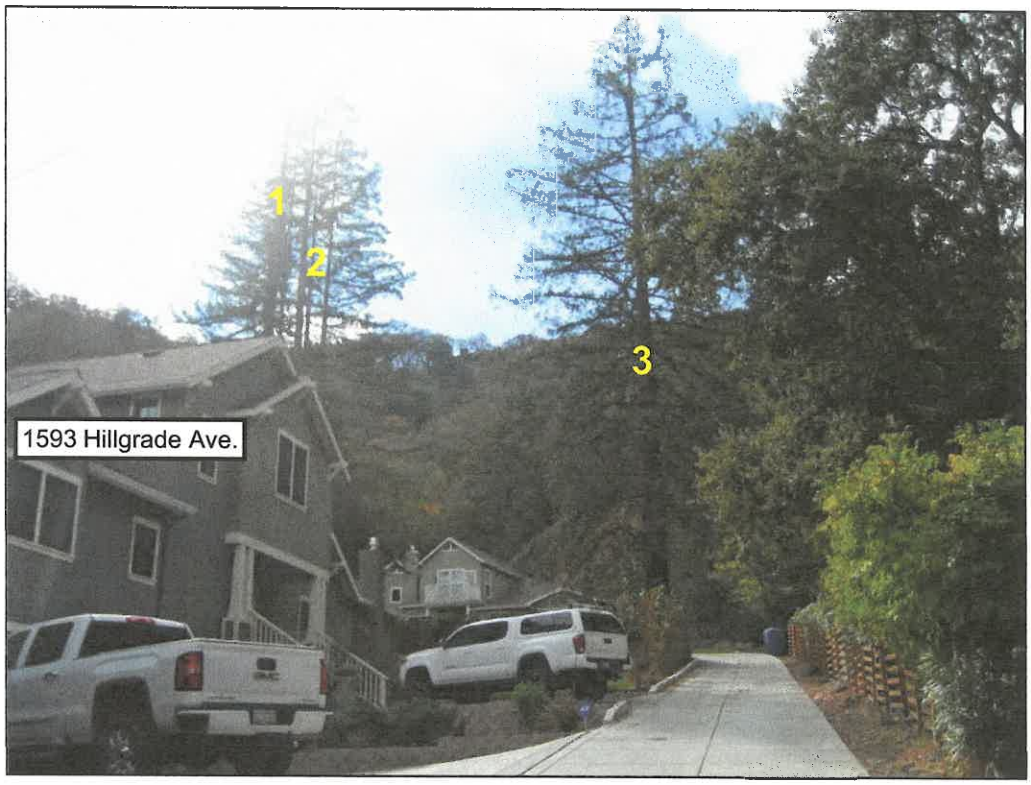


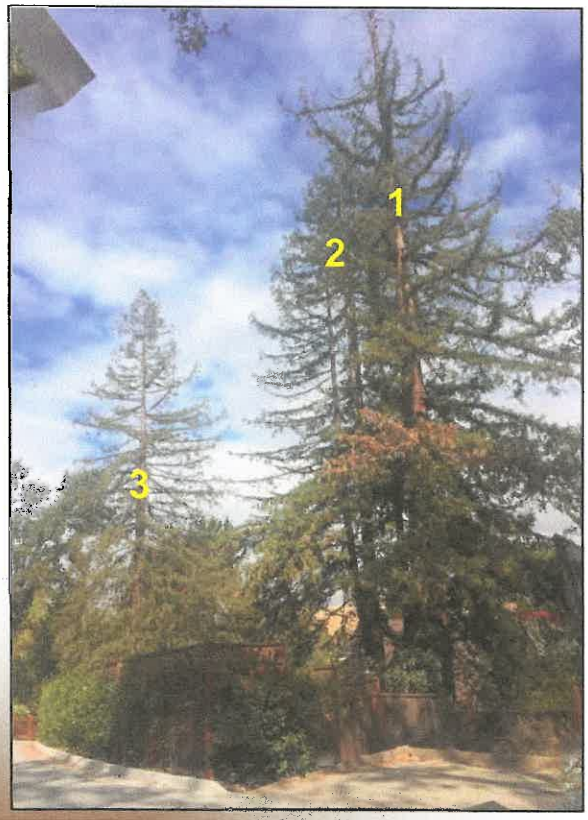


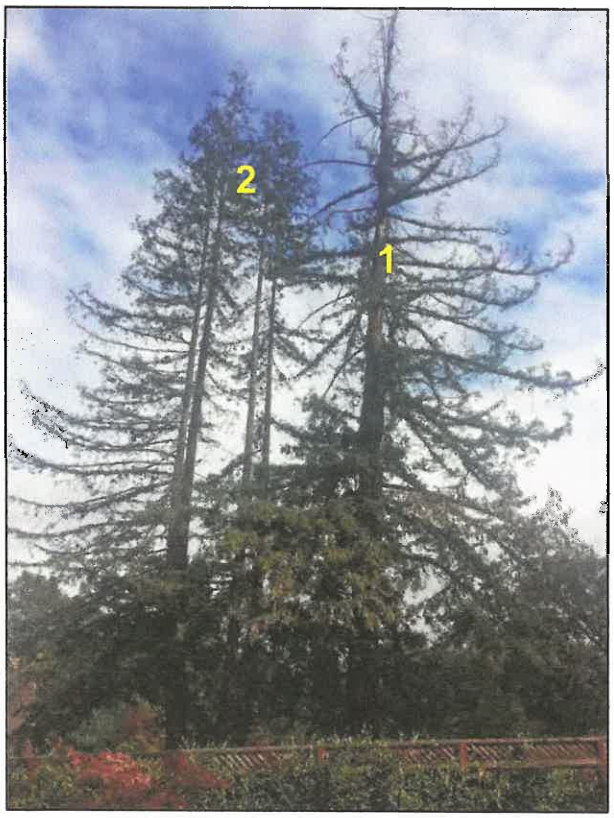




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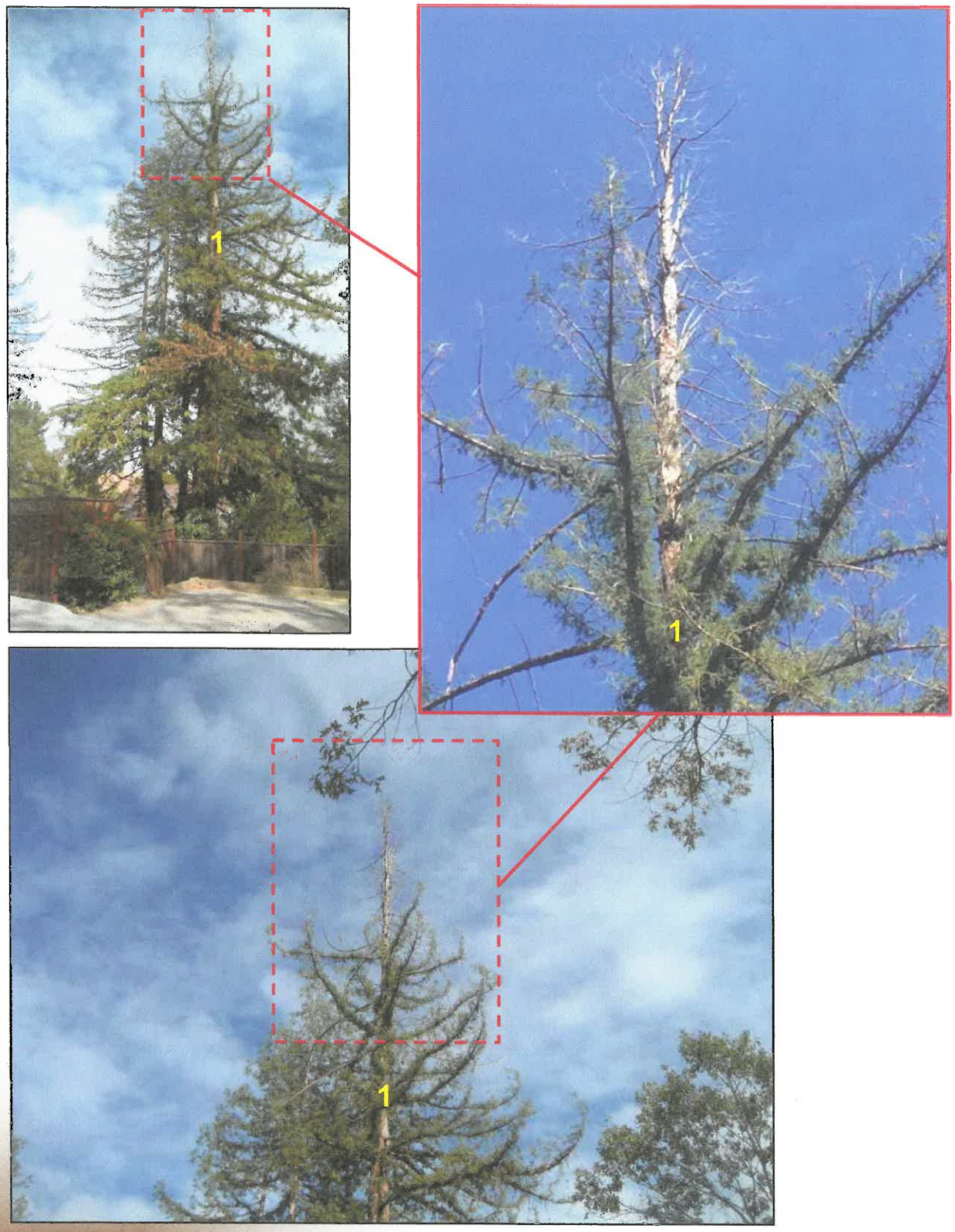


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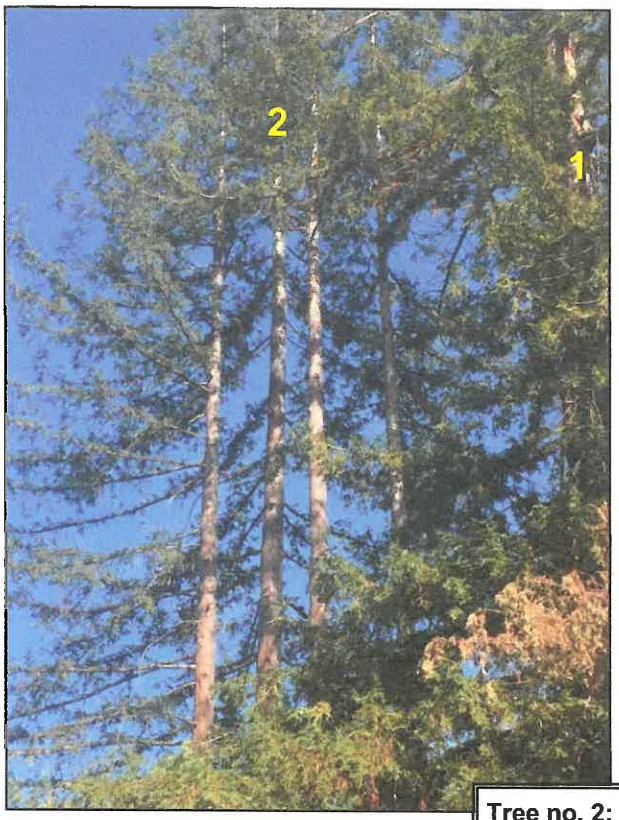
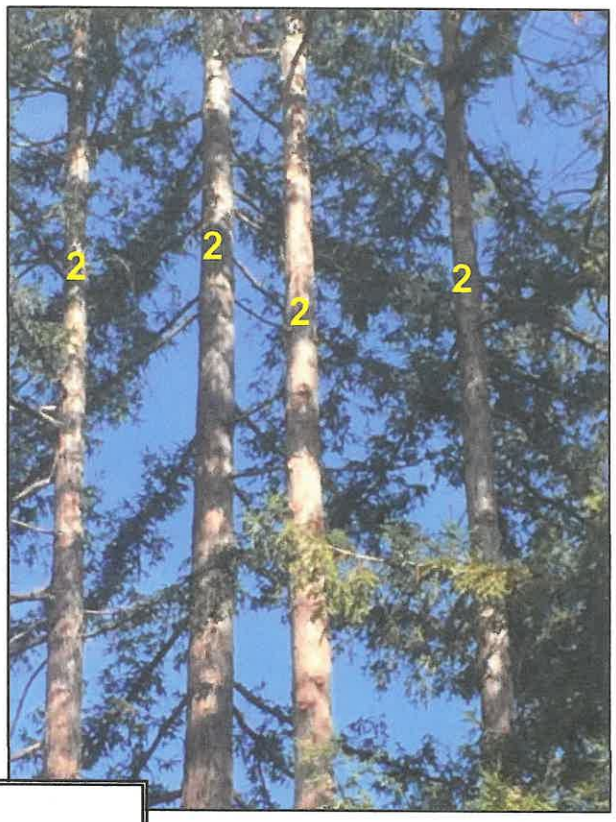
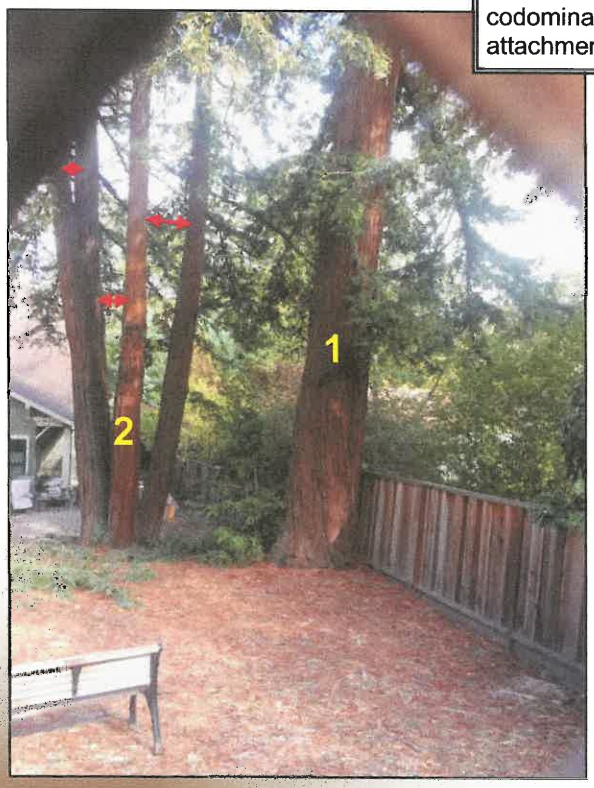
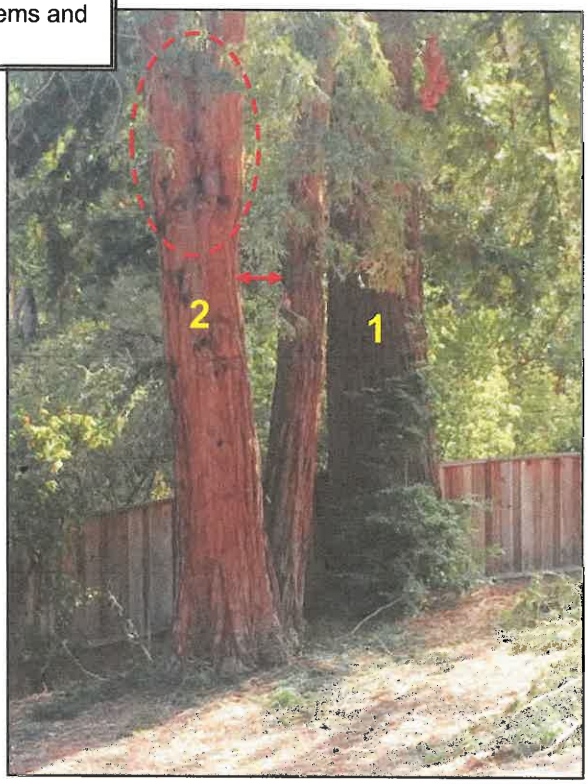



**Tree no. 2:**
codominant stems and attachments.

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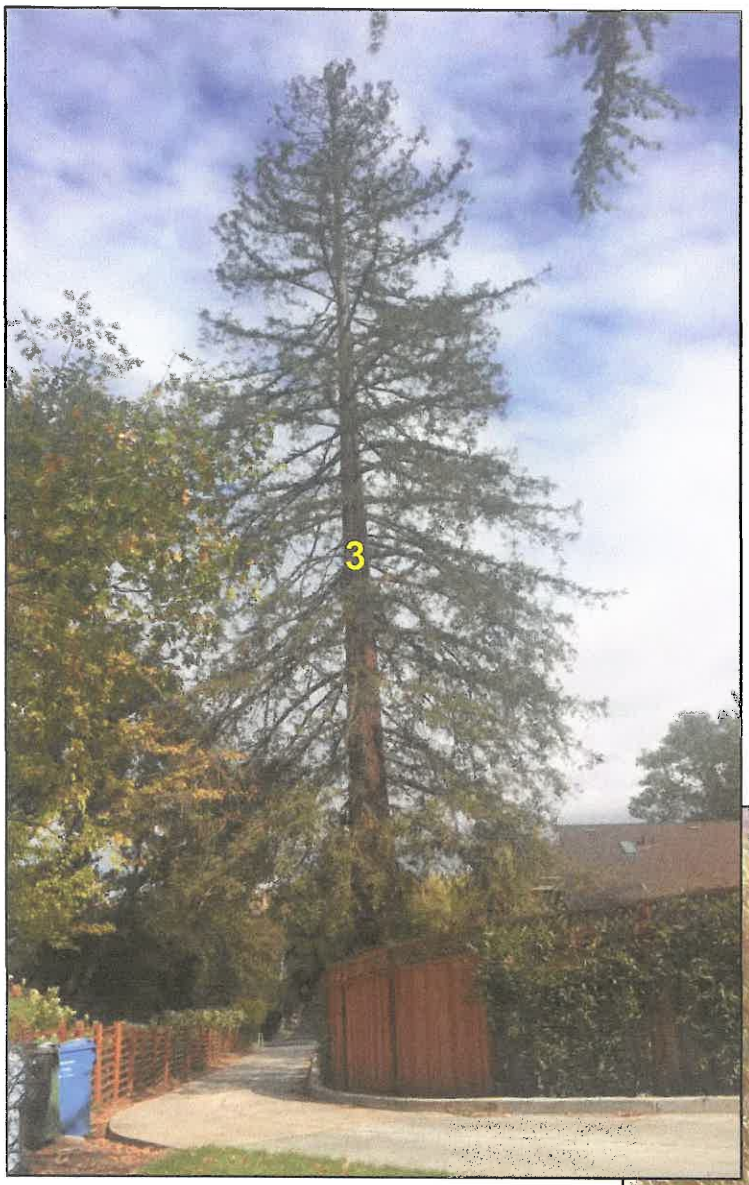

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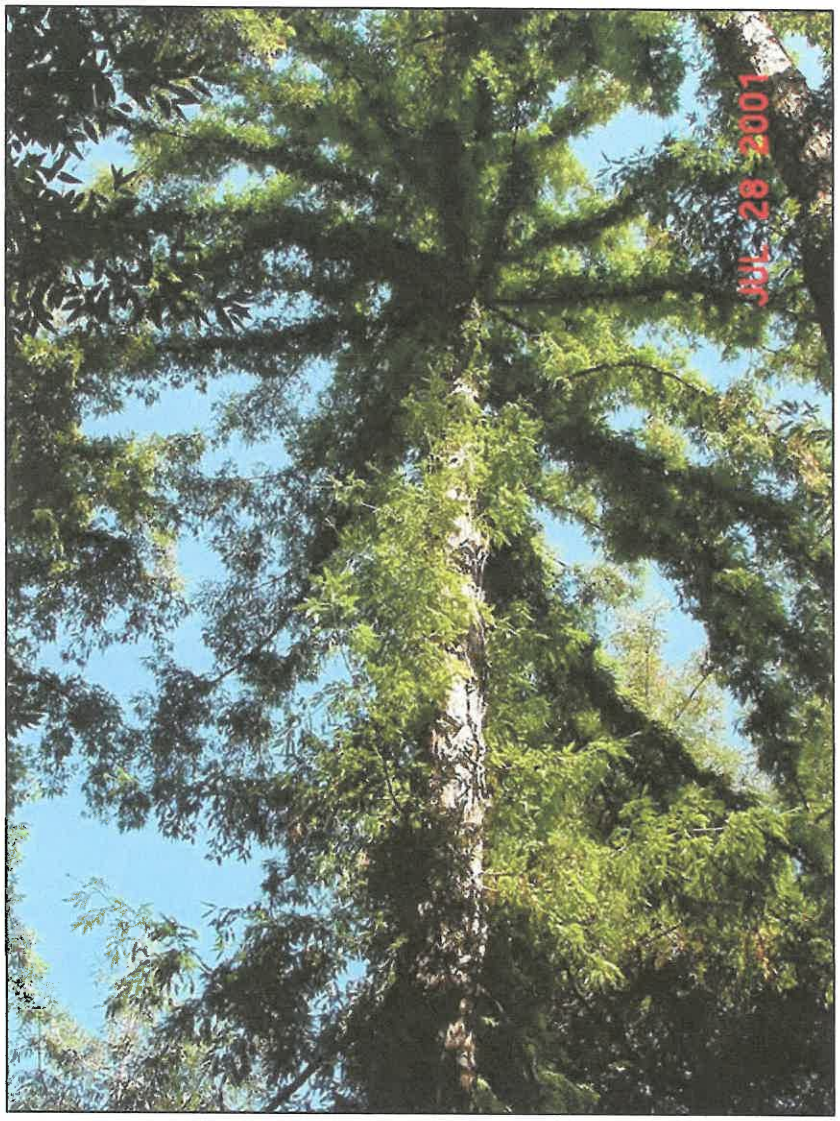


Off-site example of redwood regeneration after excessive pruning for view clearance. Note sprouting along trunk and individual limbs.



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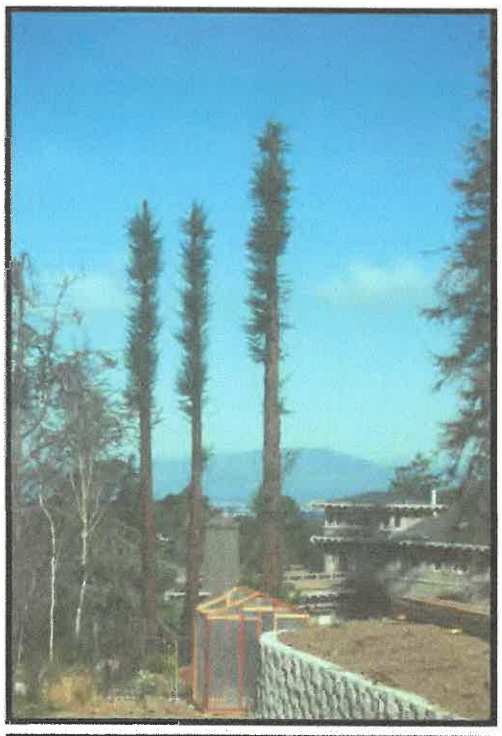

**Figure 1:** Redwoods after pruning of limbs and tops destroyed by fire in 1991. Photo taken August, 1992.

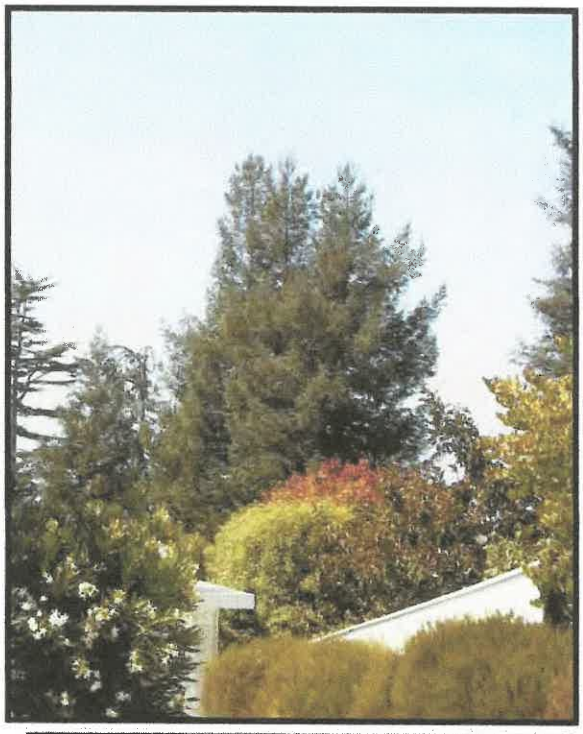

**Figure 2** **Same** redwoods after natural regeneration and restorative pruning. Photo taken September, 2001.

**Figure 3:** Same redwoods after natural regeneration and restorative pruning. Photo taken September, 2001.

Off-site example of redwood regeneration after the Oakland Firestorm of 1991. These redwoods were completely devoid of foliage and all limbs and tops were destroyed by fire. The trunks remained alive and were left to sprout naturally. Structural pruning selected permanent tops and limbs.
(Images provided by Joseph McNeil, Consulting Arborist).



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October 23, 2017
Torrey Young, Dryad, LLC
17065-10168 Odell, Gabriela
Site: 1593 Hillgrade Ave., Alamo

Please feel free to contact me for further discussion or services.

Respectfully, Torrey Young

Digitally signed by Torrey Young
DN: cn=Torrey Young, o=Dryad, LLC, ou, email=torrey@dryad.us, c=US
Date: 2017.10.23 19:15:30 -07'00'

Torrey Young
Registered Consulting Arborist®

ASCA Registered Consulting Arborist, no. 282
ISA Board Certified Master Arborist, no. WE-0131BM
CUFC Certified Urban Forester, no. 121
ISA Tree Risk Assessment Qualified
CA P.C. Qualified License, no. 104772
CA Contractors License no. 363372 (C-27 & D-49; inactive)

TORREY YOUNG
asca
AMERICAN SOCIETY of CONSULTING ARBORISTS
Registered Consulting Arborist #282

## ENDNOTES:

[1] Arborist Disclosure Statement: Arborists are tree specialists who use their education, knowledge training and experience to examine trees, recommend measures to enhance their health and beauty and to attempt to reduce the risk of living near trees. Clients may choose to accept or disregard the recommendations of the arborist or to seek additional advice. Trees and other plantlife are living, changing organisms affected by innumerable factors beyond our control. Trees fail in ways and because of conditions we do not fully understand. Arborists cannot detect or anticipate every condition or event that could possibly lead to the structural failure of a tree. Conditions are often hidden within the trees and below ground. Arborists cannot guarantee that a tree will be healthy or safe under all circumstances, for any specific period or when a tree or its parts may fail. Further, remedial treatments, as with any treatment or therapy, cannot be guaranteed. Treatment, pruning, bracing and removal of trees may involve considerations beyond the scope of the arborists skills and usual services such as the boundaries of properties, property ownership, site lines, neighbor disputes and agreements and other issues. Therefore, arborists cannot consider such issues unless complete and accurate information is disclosed in a timely fashion. Then, the arborist can be expected, reasonably, to rely upon the completeness and accuracy of the information provided. Trees can be managed but not controlled. To live near trees, regardless of their condition, is to accept some degree of risk. Tree removal is the only way to eliminate risk associated with trees.

[2] Katie J. Krebs, Consulting Arborist; ISA Certified Arborist #WE-8731A, ISA Tree Risk Assessment Qualified.

[3] Canopy: One of several accepted terms describing that area of a tree which includes limbs, branches, foliage, and to a lesser degree, upper stems (synonymous with `foliage crown').

[4] Taper: (of stems & limbs) the increase in diameter towards the base of stems (trunks) and limbs that is typical and desirable in woody plants. Degree of taper is influenced by a variety of factors including foliage, limb and branch distribution, species, location (sunlight), wind patterns, pruning, etc. Insufficient taper results in a concentration of stress from movement towards the base of the limb or stem, resulting in a greatly increased potential for breakage or uprooting. Pruning that removes interior lateral branches from limbs and/or lower limbs from trunks dramatically reduces taper development.

[5] Architecture: (as employed in this report) the arrangement of the (external) parts of a tree; primarily refers to the foliage crown including major (scaffold) limbs, lateral branches and trunks.

[6] Cambium: A very thin layer of living cells (a meristem) between the sapwood (xylem) and the bark (phloem and cork cambium) of woody plants that provides for growth through cell division.

[7] **Restoration pruning (crown restoration): A pruning standard referring to selective pruning cuts to improve the structure and appearance of trees that have been headed (i.e., topped, stubbed) or otherwise severely damaged or improperly pruned; several pruning events over a period of years may be required to achieve goals with minimal negative impact.**
ANSI A300 Part 1 - Pruning (2017): restoration: Pruning to redevelop structure, form, and appearance of topped or damaged woody plants.

---

[8] Codominant: Refers to branch, limbs or trunks of similar size and height or length competing for the same space and/or role within the tree's architecture; frequently originating at acute angles from each other, with bark remaining (included) between the components (in the crotch). Such attachments are inherently weak and worsen with time through the pressure of opposing growth and the increasing weight of wood and foliage, frequently resulting in the failure of one or both (all).

[9] Acute-angle attachments (crotches): Branch/limb, limb/trunk, or codominant trunks originating at acute angles from each other. Bark remains between such crotches, preventing the development of a branch-bark ridge (branch collar). The inherent weakness of such attachments increases with time, through the pressure of opposing growth and increasing weight of wood and foliage, frequently resulting in failure.

[10] Gaffs: (aka: spurs, spikes, hooks, climbers, irons, etc.) Sharp, pointed devices strapped to a climber's lower legs used to assist in climbing trees (ANSI A300 (Part 1)-2008, Section 4 Definitions, 4.10). "*Climbing spurs shall not be used when entering and climbing trees for the purpose of pruning or other tree maintenance, except in situations where other means are impractical, such as:*

- *Remote/rural utility rights-of-way;*
- *When branches are more than throw-line distance apart and there is no other means of climbing the tree;*
- *When the outer bark is thick enough to prevent damage to the inner bark or cambium; and,*
- *Emergency operations (see subclause 8.10).* "

American National Standards Institute, 2017. Standard Practices for Tree, Shrub and other Woody Plant Maintenance (Pruning), American National Standards Institute (ANSI A300 Part 1-2017), 8.2 Work Practices, 8.2 Work Practices, 8.2.2.2:

[11] Cabling & Bracing: The installation of hardware in and/or about trees for the purpose of providing supplemental support of weak, defective or otherwise suspect limbs and/or stems; supporting of newly planted trees; bracing cracks; propping trees or limbs, or otherwise providing support. The installation of cables, bolts and other hardware in trees is intended to reduce the potential for failure (breakage/uprooting). Such bracing does not permanently remedy structural weaknesses, and is not a guarantee against failure. The trees and hardware must be inspected periodically for hardware deterioration, adequacy and changes in the tree's and site condition.
Cabling & Bracing Standards: The most current revisions of *Best Management Practices, Tree Support Systems, Cabling, Bracing, Guying and Propping,* International Society of Arboriculture ; *Tree Care Operations Trees, Shrubs and Other Woody Plant Maintenance-Standard Practices (Supplemental Support Systems)*, American National Standards Institute [ANSI A300 (Part 3)].

[12] Mulch: Organic materials (e.g., brush chips, compost, processed wood chips, etc.) spread upon the soil for a variety of benefits: aesthetics, retains soil moisture, moderates soil temperatures, improves soil structure and increases fertility, protects against compaction, suppresses weeds, etc. Torrey Young, Dryad, LLC highly recommends fresh, brush chip mulch over processed materials. (Note: Elsewhere, the definition of *mulch* may include non-organic materials.).

[13] Field capacity: The maximum volume of moisture a soil can hold after drainage has occurred. An expression of the water-holding capacity and moisture status of soils.

[14] Pruning: Proper pruning is performed in a manner intended to achieve a specific goal while minimizing the negative effects on the plant (tree). Improper pruning is that which may not be coupled with a specific goal, may not employ techniques consistent with the identified goal, or may result in significant negative physiological and/or structural impacts on the plant.
Pruning standards: The most current revisions of the following standards, developed by a consensus of representatives from various industry professional organizations; American National Standards Institute,. *Standard Practices for Tree, Shrub and other Woody Plant Maintenance (Pruning)*, American National Standards Institute (ANSI A300 Part 1) and International Society of Arboriculture, 2008 . *Best Management Practices, Tree Pruning,* International Society of Arboriculture.


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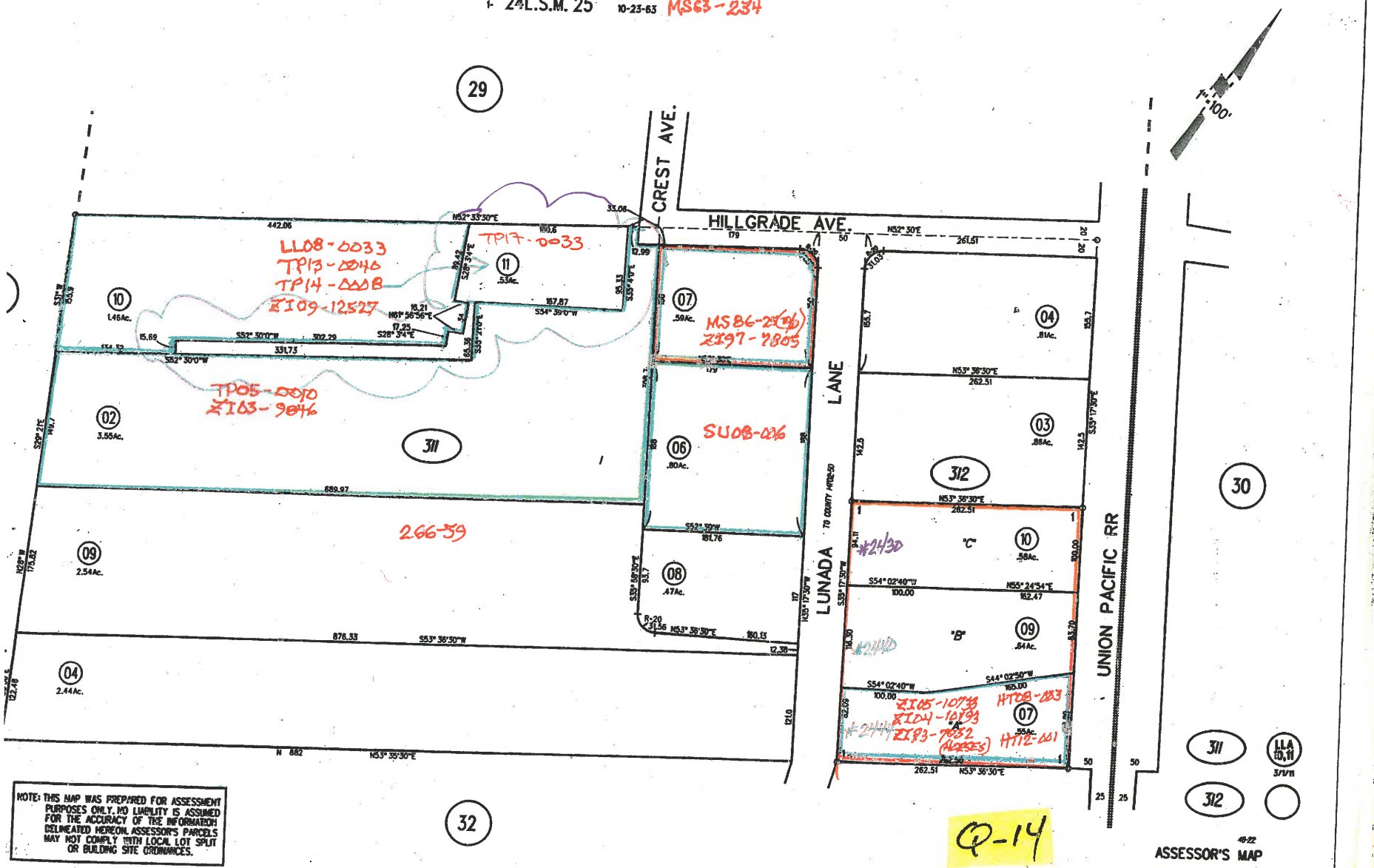
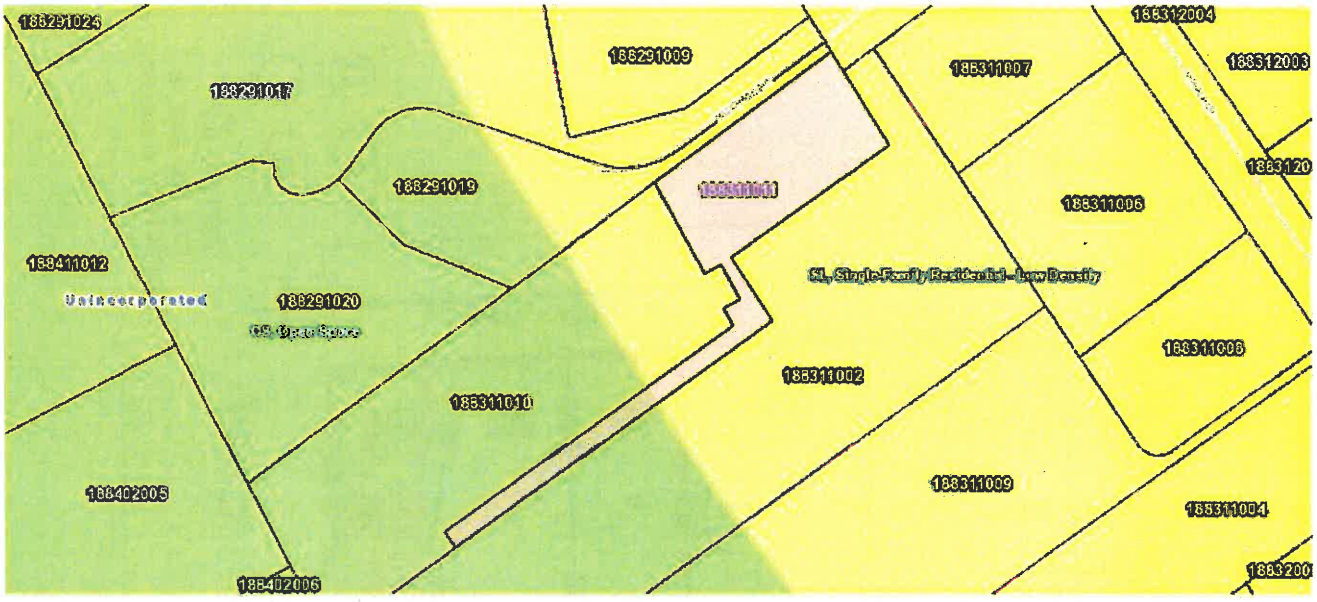



ASSESSOR'S MAP
BOOK 188 PAGE 31
CONTRA COSTA COUNTY, CALIF.

# General Plan: SFR Low-Density; Open Space

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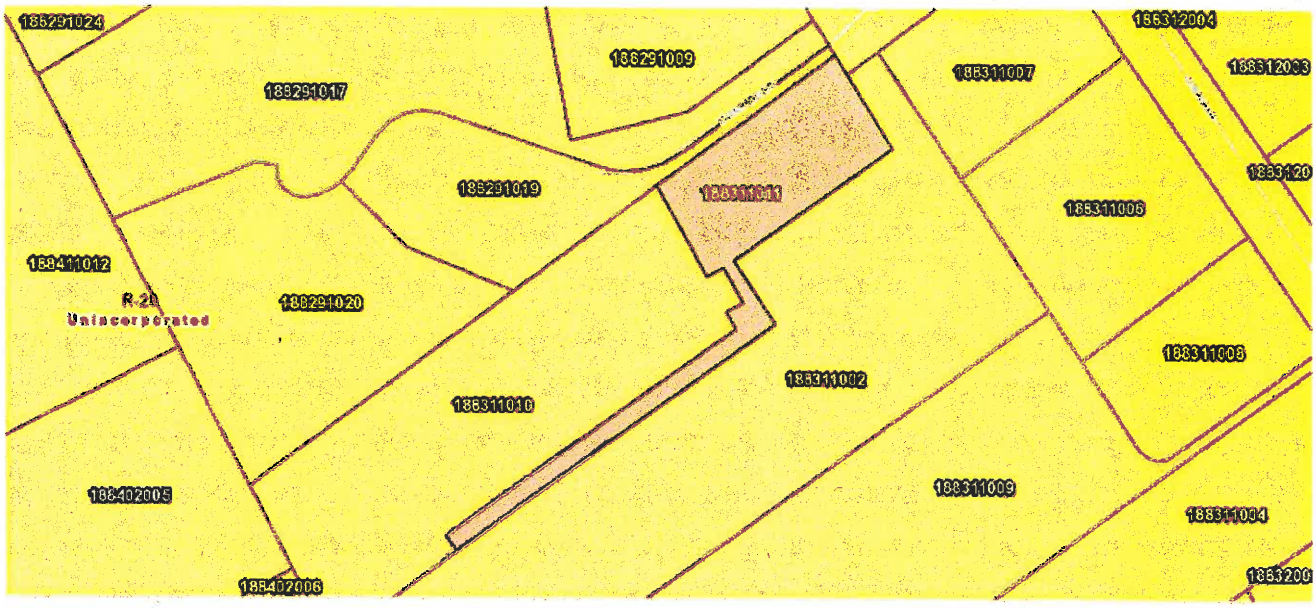
# Zoning: SFR (R-20)




50 ft

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# Aerial View

50 ft

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**FINDINGS AND CONDITIONS OF APPROVAL FOR COUNTY FILE #TP17-0033; GIL GIBSON (APPLICANT & OWNER);**

## I. FINDINGS

**Required Factors for Granting Permit**. The Zoning Administrator is satisfied that the following factors as provided by County Code Section 816-6.8010 for granting a tree permit have been satisfied:

- The arborist report indicates that the subject trees are in poor health and cannot be saved, and

- The issuance of a permit will not negatively affect the sustainability of the resource.

## II. CONDITIONS OF APPROVAL FOR COUNTY FILE #TP17-0033

1. General - The application for Tree Removal to remove three code protected redwood trees ranging in diameter size from 20" to 40" in addition to five previously removed code protected redwood and oak trees ranging in size from 15-gallon trees to 24" in diameter based on the following documents:

    - Application materials submitted to the Department of Conservation and Development, Community Development Division (CDD) on July 25, 2017;

    - Arborist report for the project prepared by Tim Hendricks, a certified arborist, received July 25, 2017; and

    - Arborist report for the project prepared for Bob Peralta, a certified arborist, received on October 12, 2017.

    This permit shall be valid for a period of **six months** and may be renewed for one additional period by the Director upon request by the applicant.

2. Required Restitution for Approved Tree Removal - The following measures are intended to provide restitution for the trees that have been approved for removal.

    A. Tree Restitution Planting/Irrigation Plan – ***Within 30-days of the effective date of this approval or prior to any tree removal***, whichever occurs first, the applicant shall submit a tree planting and irrigation plan prepared by a

licensed arborist or landscape architect for the review and approval of the Community Development Division (CDD). The plan shall provide for the planting of at least **eight trees**, **minimum 15-gallons** in size, species native to Contra Costa County and drought tolerant. The plan shall comply with the State's Model Water Efficient Landscape Ordinance or the County Ordinance, if one is adopted. The plan shall be accompanied by an estimate prepared by a licensed landscape architect or arborist of the materials and labor costs to complete the improvements on the plan.

The eight trees required for replanting shall consist of the following:

1) Four of the trees to be planted will placed within reasonable distance of the southeastern property line adjacent to parcel number 188-311-002.

2) Two of the trees to be replanted will be placed within a reasonable distance of the southwest property line adjacent to parcel number 188-311-010.

B. Required Security to Assure the Completion of Plan Improvements - ***Within 30-days of the effective date of this approval or prior to any tree removal, whichever occurs first,*** the applicant shall submit a security (e.g., bond, cash deposit) that is acceptable to the CDD. The bond shall include the amount of the approved cost estimate, ***plus*** a 20% inflation surcharge. Until evidence is submitted that the applicant has satisfactorily installed the required improvements, the County may hold the security for up to two years following the exercise of this permit.

C. Initial Fee Deposit for Processing a Security - The County ordinance requires that the applicant pay fees for all time and material costs of staff for processing a landscape improvement security (Code S-060B). At time of submittal of the security, the applicant shall pay an initial deposit of $100.

D. Duration of Security – ***No later than 30 days after the tree removal is complete***, the consulting arborist shall verify that the replacement trees and landscape plan have been properly implemented; and when verified, notify the CDD in writing. The security shall be retained by the County for a minimum of 12 months up to 24 months beyond the date of receipt of the written verification of the installation. A prerequisite of releasing the bond between 12 and 24 months shall be to have the applicant arrange for the consulting arborist to inspect the replacement trees and prepare a report on the trees' health. In the event that the CDD determines that the replanted

tree(s) have been damaged or have died, and determines that the applicant has not been diligent in providing a replacement, then the CDD may require that all or part of the security be used to provide for replacement of the dead or damaged tree(s).

**Arborist Expense**

3. Arborist Expense - The expenses associated with all required arborist services shall be borne by the developer and/or property owner.

**Fees**

4. This application is subject to an initial application deposit of $500.00, which as paid with the application submittal, plus time, and material costs in the application review expense exceeds 100% of the initial deposit. **Any additional costs due must be paid prior to issuance of a building permit, commencement of tree alteration work, or 60 days of the effective date of this permit whichever occurs first.** The fees include costs through permit issuance plus five working days for file preparation. The applicant or owner may obtain current costs by contacting the project planner. A bill will be mailed to ***the applicant*** shortly after permit issuance in the event that additional fees are due.

CONSTRUCTION PERIOD RESTRICTIONS AND REQUIREMENTS

5. The applicant shall comply with the following restrictions and requirements:

   A. Construction activities shall be limited to the hours of 8:00 A.M. to 5:00 P.M., Monday through Friday, and are prohibited on state and federal holidays on the calendar dates that these holidays are observed by the state or federal government as listed below:

New Year's Day (state and federal)
Birthday of Martin Luther King, Jr. (state and federal)
Washington's Birthday (federal)
Lincoln's Birthday (state)
President's Day (state and federal)
Cesar Chavez Day (state)
Memorial Day (state and federal)
Independence Day (state and federal)
Labor Day (state and federal)
Columbus Day (state and federal)
Veterans Day (state and federal)

Thanksgiving Day (state and federal)
Day after Thanksgiving (state)
Christmas Day (state and federal)

For information on the calendar dates that these holidays occur, please visit the following websites:

Federal Holidays:
http://www.opm.gov/Operating_Status_Schedules/fedhol/2018.asp

California Holidays:
http://www.edd.ca.gov/payroll_taxes/State_Holidays.htm

B. Transportation of large trucks and heavy equipment is subject to the same restrictions that are imposed on construction activities, except that the hours are limited to 9:00 AM to 4:00 PM.

C. A good faith effort shall be made to avoid interference with existing neighborhood traffic flows.

D. All internal combustion engines shall be fitted with mufflers that are in good condition and stationary noise-generating equipment such as air compressors shall be located as far away from existing residences as possible.

E. Construction equipment and materials shall be stored onsite.

F. The construction site shall be maintained in an orderly fashion. Litter and debris shall be contained in appropriate receptacles and shall be disposed of as necessary.

G. Any debris found outside the site shall immediately be collected and deposited in appropriate receptacle.

## ADVISORY NOTES

**ADVISORY NOTES ARE NOT CONDITIONS OF APPROVAL; THEY ARE PROVIDED TO ALERT THE APPLICANT TO ADDITIONAL ORDINANCES, STATUTES, AND LEGAL REQUIREMENTS OF THE COUNTY AND OTHER PUBLIC AGENCIES THAT MAY BE APPLICABLE TO THIS PROJECT.**

A. NOTICE OF OPPORTUNITY TO PROTEST FEES, ASSESSMENTS, DEDICATIONS, RESERVATIONS OR OTHER EXACTIONS PERTAINING TO THE APPROVAL OF THIS PERMIT.

Pursuant to California Government Code Section 66000, et seq., the applicant has the opportunity to protest fees, dedications, reservations or exactions required as part of this project approval. To be valid, a protest must be in writing pursuant to Government Code Section 66020 and must be delivered to the Community Development Division within a 90-day period that begins on the date that this project is approved. If the 90$^{th}$ day falls on a day that the Community Development Division is closed, then the protest must be submitted by the end of the next business day.

G:\Current Planning\curr-plan\Staff Reports\Tree Permits (TP)\TP17-0033\TP17-0033_COA.docx

# Department of Conservation and Development

## County Planning Commission

## Wednesday, January 24, 2018 – 7:00 P.M.

**STAFF REPORT** **Agenda Item #____**

| | |
|---|---|
| **Project Title:** | Gibson Tree Permit |
| **County File(s):** | #TP17-0033 |
| **Applicant/Owner:** | Gil Gibson / Same as Applicant |
| **Appellants:** | Gabriela Odell and Bruce Tarter, Sophia and Lomit Patel |
| **Zoning/General Plan:** | Single-Family Residential (R-20) /<br>Single-Family Residential-Low Density (SL), Open Space (OS) |
| **Site Address/Location:** | 1593 Hillgrade Avenue, Alamo / (APN: 188-311-011) |
| **California Environmental Quality Act (CEQA) Status:** | The project is exempt under CEQA Guidelines Section 15304, which identifies the minor alteration of land as being exempt from review. |
| **Project Planner:** | Grant Farrington, Planner I (925) 674-7797 |
| **Staff Recommendation:** | Deny the Appeal and Approve the Project (See Section II for Full Recommendation) |

## I. PROJECT SUMMARY

This is an appeal of the Zoning Administrator's decision to approve a tree permit to allow the removal of three existing code-protected redwood trees ranging in size from 20" to 40" in diameter and five previously removed code-protected oak and redwood trees ranging in size from 15-gallon to 24" in diameter. No development is proposed; however, the trees have been determined to be in poor health.

## II. RECOMMENDATION

Staff recommends that the County Planning Commission:

A. Deny the appeal by Gabriela Odell, Bruce Tarter, Sophia Patel and Lomit Patel; and

B. Approve County File #TP17-0033 based on the attached findings and subject to the attached conditions of approval.

## III. BACKGROUND

Previous owners of the subject property applied for a tree permit, County File #TP14-0008, to remove three code protected trees and work within the drip line of one additional tree in order to construct a new 3,552-square-foot single-family residence. The application was approved by the Zoning Administrator in 2014, with a tree restitution plan to replace the trees that were approved to be removed.

A tree permit application was submitted on July 25, 2017, requesting the removal of three redwood trees due to the decline in health. After reviewing the submittal, staff determined that five trees were removed that have not been previously approved. Four of the five trees removed were replacement trees required in the conditions of approval for County File #TP14-0008 and the fifth tree removed was not approved for removal in the 2014 tree permit application. Therefore, the five trees removed are now included in this current application.

On September 21, 2017, a Notice of Tentative Approval of a Tree Permit was mailed to adjacent property owners. Within the 10-day appeal period, two separate appeals from Sophia and Lomit Patel, and Gabriela Odell and Bruce Tarter were filed with the Department.

## IV. GENERAL INFORMATION

A. Environs – The subject property is located within a residential neighborhood in the area of Alamo. The subject property is surrounded by residential lots ranging in size from 0.39 acres to 3.5 acres in area, most of which have been developed with residential dwellings and related accessory structures. Interstate 680 is located approximately one quarter-mile north of the property, the Walnut Creek city limit is approximately one mile north of the property, and the Danville city limit is approximately three miles south of the site.

B. Site Area Description – The subject property is a 0.53-acre (23,086 square feet), irregular shaped parcel, located at the intersection of Crest and Hillgrade Avenues. The site has a moderate slope with a few mature trees located along the northwestern and southeastern property lines. In addition, there are trees located along the southwestern extension of the property, primarily in the open space designation. The site is accessed via an 8.5-foot wide access easement connected to the corners of Crest and Hillgrade Avenues. The existing residence is located in the middle of the property.

C. General Plan – The subject property is located within Single-Family Residential-Low Density (SL) and Open Space (OS) General Plan Land Use designations.

D. Zoning District – The subject property is located within a Single-Family Residential (R-20) zoning district.

E. California Environmental Quality Act (CEQA) - The proposed project is exempt under CEQA Guidelines Section 15304(a), which identifies minor alterations to land as being exempt from review.

F. Lot Creation: The subject property was originally created on July 26, 1911, as a part of the Goolds Addition, then reconfigured through a lot line adjustment. County File #LL08-0033 was approved for the property in 2008.

G. Prior County Files Related to the Property:

a. LL08-0033: An application was submitted for lot line adjustment and was approved in 2008.

b. TP14-0008: An application was submitted for a tree permit and was approved in 2014.

## V. PROJECT DESCRIPTION

The applicant proposes to remove three code-protected redwood trees, as well as seek approval for five previously removed code-protected trees. No development is proposed. No additional work within the drip line of trees will be required. The three trees to be removed are located in the southwestern area of the property. An arborist report submitted on July 25, 2017, identifies the trees as #1, 2, and 3. Tree #1 is a 32" Coast Redwood, tree #2 is a 40" Coast Redwood, and tree #3 is a dual

stem Coast Redwood with a 30" stem and a 26" stem. All three are recommended to be removed due to poor health. In addition to the removal of the three trees, five code-protected trees, consisting of oak and redwoods ranging in size from 15-gallon trees to 24" in diameter were previously removed. These five trees were located along the southeastern property line and were designated to remain per County File #TP14-0008. Four of the five trees were replacement trees as required in previous tree permit approval and the fifth tree was identified as a tree to remain.

## VI. APPEAL OF ZONING ADMINISTRATOR'S DECISION

On September 21, 2017, a "Notice of Tentative Approval" for the proposed tree permit was mailed to the adjacent property owners of the subject property. The letter advised of an appeal period extending through October 2, 2017. Two letters of appeal were received from Gabriella Odell and Bruce Tarter and Sophia and Lomit Patel on October 2, 2017. Below is a summary of the appeal points along with staff responses.

1) Appeal Letter from Gabriella Odell and Bruce Tarter of 1591 Hillgrade Ave, Alamo:

   a. *Appeal Point: Ms. Odell and Mr. Tarter have concerns about the trees to be removed in terms of visual effect, wind screening, privacy and that neighboring vegetation is greater than the hardship to the owner. The trees are located in an area of the property that provides screening for Ms. Odell and Mr. Tarter.*

      Staff Response: Staff has reviewed the arborist report submitted by the applicant on July 25, 2017 by Tim Hendricks, a certified arborist, indicating that the three subject trees which are still present on the property are in poor health and unlikely to recover. Based on the findings of the arborist report, staff recommended to the Zoning Administrator removal of the existing trees. Additionally, Condition of Approval (COA) #2(a) requires eight trees to be replanted.

   b. *Appeal Point: The applicant removed four trees that were planted by the previous owner in an agreement with the Ms. Odell and Mr. Tarter in exchange for the withdrawal of an appeal for County File #TP14-0008.*

Staff Response: The four trees that were initially required as restitution for County File #TP14-0008 and one additional tree identified to remain were removed and as such, have been included in this tree permit application. As required in COA #2, a tree restitution plan will be required from the applicant include the planting of eight trees, minimum 15 gallons in size, species native to Contra Costa County, drought tolerant and complies with the State's Model Water Efficient Landscape Ordinance.

c. *Appeal Point: Ms. Odell and Mr. Tarter have expressed concern that the removal of the trees will be completed so the applicant will use the area for a pool.*

Staff Response: There has been no proposed development for a pool submitted to the Department of Conservation and Development (DCD) at this time. As such, staff is making a recommendation based solely on the proposed project to remove the subject trees, as submitted by the applicant.

d. *Appeal Point: Ms. Odell and Mr. Tarter are concerned that the three existing trees could potentially cause soil erosion if removed.*

Staff Response: Condition of approval #2(a) for County File #TP17-0033 requires a tree restitution plan of eight trees, minimum 15 gallons in size, species native to Contra Costa County and drought tolerant to be replanted on the property. Four of the eight trees are required to be located along the southeastern property line that is adjacent to the Odell and Tarter property address of 1591 Hillgrade Avenue.

e. *Appeal Point: The 40-inch redwood provides wind and visual screening for the Odell and Tarter property.*

Staff Response: Condition of approval #2(a) for County File #TP17-0033 requires that four of the eight trees to be replanted must be located along the southeastern property line that is adjacent to the Odell and Tarter property address of 1591 Hillgrade Avenue.

2) Appeal Letter from Sophia and Lomit Patel of 1597 Hillgrade Avenue, Alamo:

a. *Appeal Point: The Patels are concerned about the wind and visual screening the Redwood trees on the subject lot provide for their own property. Removal of the trees would reduce their privacy.*

   Staff Response: Condition of approval #2(a) requires that two of the eight trees to be replanted must be located along the southwestern property line that is adjacent to the Patel lot. All eight of the trees to be replanted are now considered code-protected per Section 816-6.6004 of the County Ordinance.

b. *Appeal Point: The Patels believe that the existing trees are not in poor health and the applicant wishes to build a pool and/or a carport in the area of the existing trees to be removed.*

   Staff Response: As stated above in response to Ms. Odell and Mr. Tarter's appeal point C, there has been no proposed development submitted to the DCD at this time and staff is making a recommendation based on the information submitted. The arborist report submitted by Mr. Gibson on July 25, 2017 is from Tim Hendricks, a Certified Arborist. Mr. Gibson also submitted an additional arborist report on October 12, 2017 from Bob Peralta, a Certified Arborist. Ms. Odell also submitted an arborist report on October 30, 2017 from Torrey Young, a Certified Arborist. All three arborist reports identify the trees as being in poor health.

c. *Appeal Point: The Patels would like the existing Redwood trees to remain because of environmental concerns to the neighboring properties and their status as code-protected trees in the community.*

   Staff Response: According to the arborist report submitted by Mr. Gibson on October 12, 2017 by Bob Peralta, the existing trees to be removed are not native to the Alamo area. The conditions of approval specify that replacement trees must native to Contra Costa County and a planting and irrigation plan is to be submitted before removal of the existing trees (Condition #2 subsection A).

## VII. STAFF ANALYSIS AND DISCUSSION

The subject property is located in an area of the County with Single-Family Residential-Low Density (SL) and Open Space (OS) General Plan Land Use

designations. The subject property is zoned Single-Family Residential (R-20) zoning district. The project is to remove eight trees, of which five trees have already been removed. Based on the arborist report dated July 25, 2017, the existing three trees to be removed are in poor health due to the drought from previous winter seasons and are not likely to recover. Replanting of eight trees is required as a condition of approval for this application. The eight trees will be drought tolerant trees that are consistent with the native surroundings, and will maintain their aesthetic value to both the subject property and the surrounding area. The subject trees proposed for removal are located within the developed area of the property, specifically the SL land use designation. For the reasons above, granting the requested tree permit is appropriate for the subject property and surrounding neighborhood. Further, the tree removal does not conflict with the goals and policies for the SL and OS General Plan Land Use designation and the R-20 zoning district.

## VIII. CONCLUSION

As proposed, the applicant requests to remove three trees due to poor health in addition to five trees previously removed. Three certified arborist reports have been submitted to the DCD and determined that the trees are in poor health. The tree permit is consistent with the County General Plan and standards of the R-20 zoning district. No additional development is proposed on the subject property. Therefore, staff recommends that the County Planning Commission deny the appeal, and approve County File #TP17-0033 based on the attached findings and subject to the attached conditions of approval.

**FINDINGS AND CONDITIONS OF APPROVAL FOR COUNTY FILE #TP17-0033; GIL GIBSON (APPLICANT & OWNER);**

## I. FINDINGS

**Required Factors for Granting Permit**. The Zoning Administrator is satisfied that the following factors as provided by County Code Section 816-6.8010 for granting a tree permit have been satisfied:

- The arborist report indicates that the subject trees are in poor health and cannot be saved, and

- The Deputy Director, Community Development Division is satisfied that the issuance of a permit will not negatively affect the sustainability of the resource.

## II. CONDITIONS OF APPROVAL FOR COUNTY FILE #TP17-0033

1. General - The application for Tree Removal to remove three code protected redwood trees ranging in diameter size from 20" to 40" in addition to five previously removed code protected redwood and oak trees ranging in size from 15-gallon trees to 24" in diameter based on the following documents:

    - Application materials submitted to the Department of Conservation and Development, Community Development Division (CDD) on July 25, 2017;

    - Arborist report for the project prepared by Tim Hendricks, a certified arborist, received July 25, 2017; and

    - Arborist report for the project prepared for Bob Peralta, a certified arborist, received on October 12, 2017.

    This permit shall be valid for a period of **six months** and may be renewed for one additional period by the Director upon request by the applicant.

2. Required Restitution for Approved Tree Removal - The following measures are intended to provide restitution for the trees that have been approved for removal.

    A. Tree Restitution Planting/Irrigation Plan – ***Within 30-days of the effective date of this approval or prior to any tree removal***, whichever occurs first, the applicant shall submit a tree planting and irrigation plan prepared by a

licensed arborist or landscape architect for the review and approval of the Community Development Division (CDD). The plan shall provide for the planting of at least **eight trees**, **minimum 15-gallons** in size, species native to Contra Costa County and drought tolerant. The plan shall comply with the State's Model Water Efficient Landscape Ordinance or the County Ordinance, if one is adopted. The plan shall be accompanied by an estimate prepared by a licensed landscape architect or arborist of the materials and labor costs to complete the improvements on the plan.

The eight trees required for replanting shall consist of the following:

1) Four of the trees to be planted will placed within reasonable distance of the southeastern property line adjacent to parcel number 188-311-002.

2) Two of the trees to be replanted will be placed within a reasonable distance of the southwest property line adjacent to parcel number 188-311-010.

B. Required Security to Assure the Completion of Plan Improvements - ***Within 30-days of the effective date of this approval or prior to any tree removal, whichever occurs first,*** the applicant shall submit a security (e.g., bond, cash deposit) that is acceptable to the CDD. The bond shall include the amount of the approved cost estimate, ***plus*** a 20% inflation surcharge. Until evidence is submitted that the applicant has satisfactorily installed the required improvements, the County may hold the security for up to two years following the exercise of this permit.

C. Initial Fee Deposit for Processing a Security - The County ordinance requires that the applicant pay fees for all time and material costs of staff for processing a landscape improvement security (Code S-060B). At time of submittal of the security, the applicant shall pay an initial deposit of $100.

D. Duration of Security – ***No later than 30 days after the tree removal is complete***, the consulting arborist shall verify that the replacement trees and landscape plan have been properly implemented; and when verified, notify the CDD in writing. The security shall be retained by the County for a minimum of 12 months up to 24 months beyond the date of receipt of the written verification of the installation. A prerequisite of releasing the bond between 12 and 24 months shall be to have the applicant arrange for the consulting arborist to inspect the replacement trees and prepare a report on the trees' health. In the event that the CDD determines that the replanted

tree(s) have been damaged or have died, and determines that the applicant has not been diligent in providing a replacement, then the CDD may require that all or part of the security be used to provide for replacement of the dead or damaged tree(s).

**Arborist Expense**

3. Arborist Expense - The expenses associated with all required arborist services shall be borne by the developer and/or property owner.

**Fees**

4. This application is subject to an initial application deposit of $500.00, which as paid with the application submittal, plus time, and material costs in the application review expense exceeds 100% of the initial deposit. **Any additional costs due must be paid prior to issuance of a building permit, commencement of tree alteration work, or 60 days of the effective date of this permit whichever occurs first.** The fees include costs through permit issuance plus five working days for file preparation. The applicant or owner may obtain current costs by contacting the project planner. A bill will be mailed to ***the applicant*** shortly after permit issuance in the event that additional fees are due.

CONSTRUCTION PERIOD RESTRICTIONS AND REQUIREMENTS

5. The applicant shall comply with the following restrictions and requirements:

   A. Construction activities shall be limited to the hours of 8:00 A.M. to 5:00 P.M., Monday through Friday, and are prohibited on state and federal holidays on the calendar dates that these holidays are observed by the state or federal government as listed below:

New Year's Day (state and federal)
Birthday of Martin Luther King, Jr. (state and federal)
Washington's Birthday (federal)
Lincoln's Birthday (state)
President's Day (state and federal)
Cesar Chavez Day (state)
Memorial Day (state and federal)
Independence Day (state and federal)
Labor Day (state and federal)
Columbus Day (state and federal)
Veterans Day (state and federal)

Thanksgiving Day (state and federal)
Day after Thanksgiving (state)
Christmas Day (state and federal)

For information on the calendar dates that these holidays occur, please visit the following websites:

Federal Holidays:
http://www.opm.gov/Operating_Status_Schedules/fedhol/2018.asp

California Holidays:
http://www.edd.ca.gov/payroll_taxes/State_Holidays.htm

B. Transportation of large trucks and heavy equipment is subject to the same restrictions that are imposed on construction activities, except that the hours are limited to 9:00 AM to 4:00 PM.

C. A good faith effort shall be made to avoid interference with existing neighborhood traffic flows.

D. All internal combustion engines shall be fitted with mufflers that are in good condition and stationary noise-generating equipment such as air compressors shall be located as far away from existing residences as possible.

E. Construction equipment and materials shall be stored onsite.

F. The construction site shall be maintained in an orderly fashion. Litter and debris shall be contained in appropriate receptacles and shall be disposed of as necessary.

G. Any debris found outside the site shall immediately be collected and deposited in appropriate receptacle.

## ADVISORY NOTES

**ADVISORY NOTES ARE NOT CONDITIONS OF APPROVAL; THEY ARE PROVIDED TO ALERT THE APPLICANT TO ADDITIONAL ORDINANCES, STATUTES, AND LEGAL REQUIREMENTS OF THE COUNTY AND OTHER PUBLIC AGENCIES THAT MAY BE APPLICABLE TO THIS PROJECT.**

A. NOTICE OF OPPORTUNITY TO PROTEST FEES, ASSESSMENTS, DEDICATIONS, RESERVATIONS OR OTHER EXACTIONS PERTAINING TO THE APPROVAL OF THIS PERMIT.

Pursuant to California Government Code Section 66000, et seq., the applicant has the opportunity to protest fees, dedications, reservations or exactions required as part of this project approval. To be valid, a protest must be in writing pursuant to Government Code Section 66020 and must be delivered to the Community Development Division within a 90-day period that begins on the date that this project is approved. If the 90th day falls on a day that the Community Development Division is closed, then the protest must be submitted by the end of the next business day.

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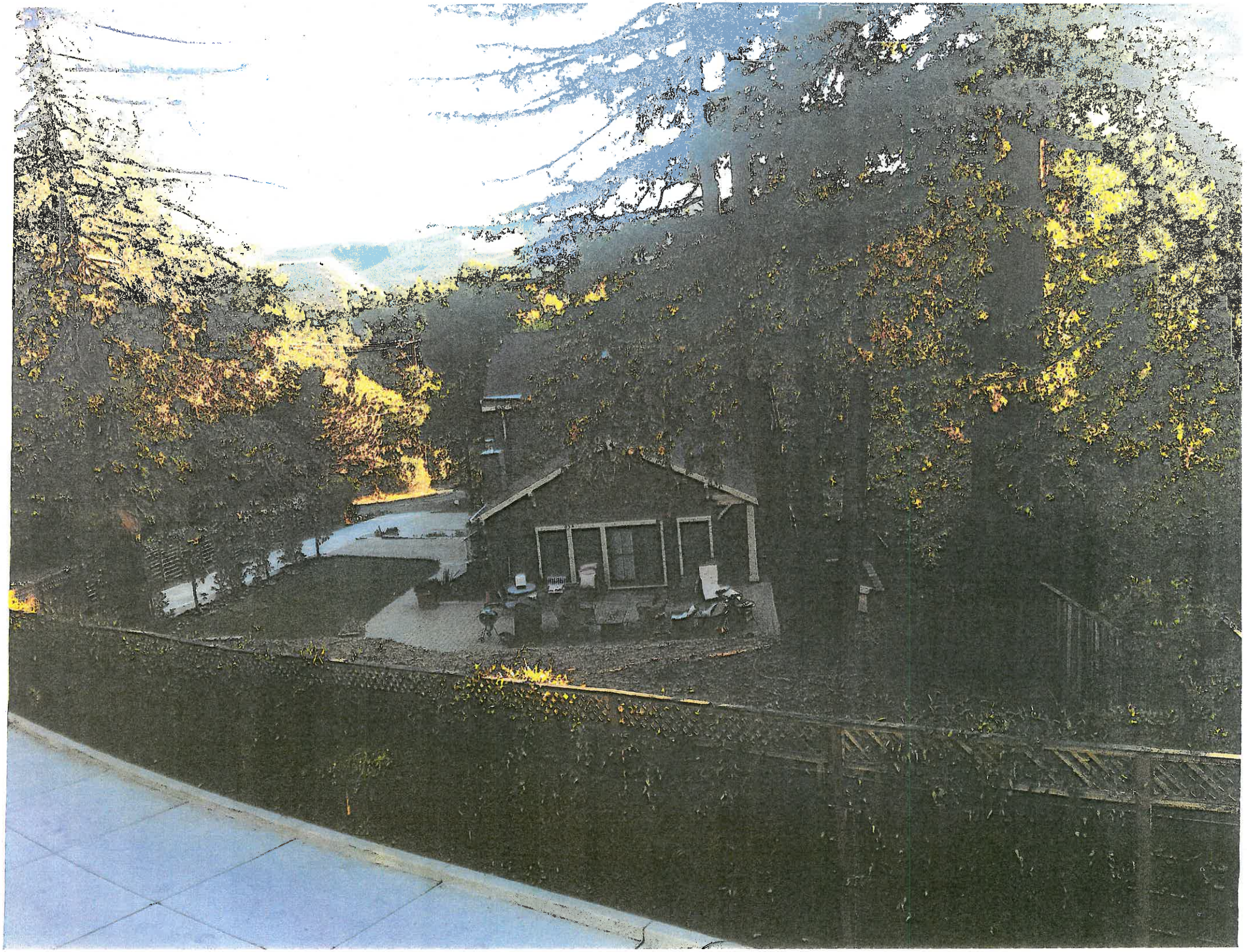

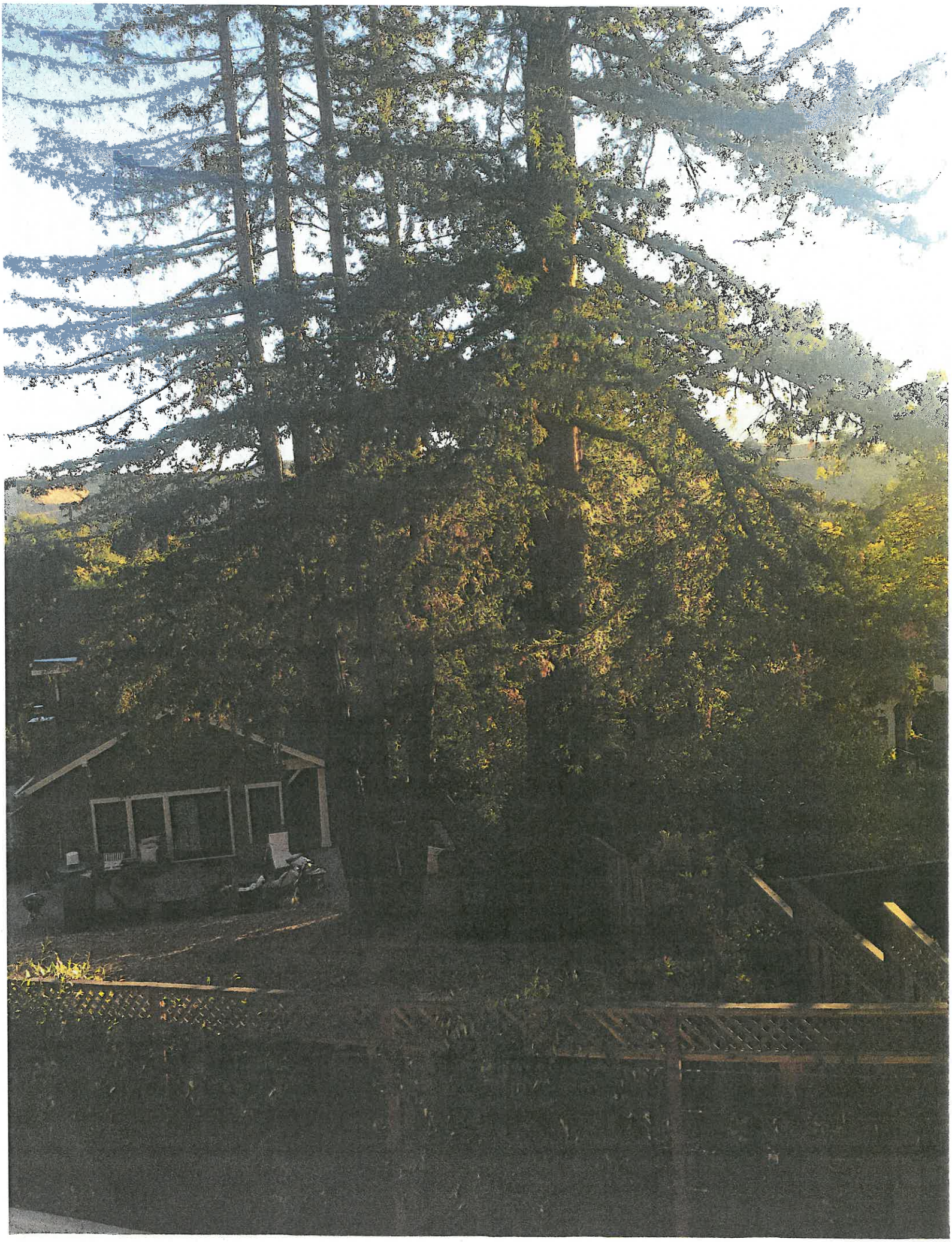

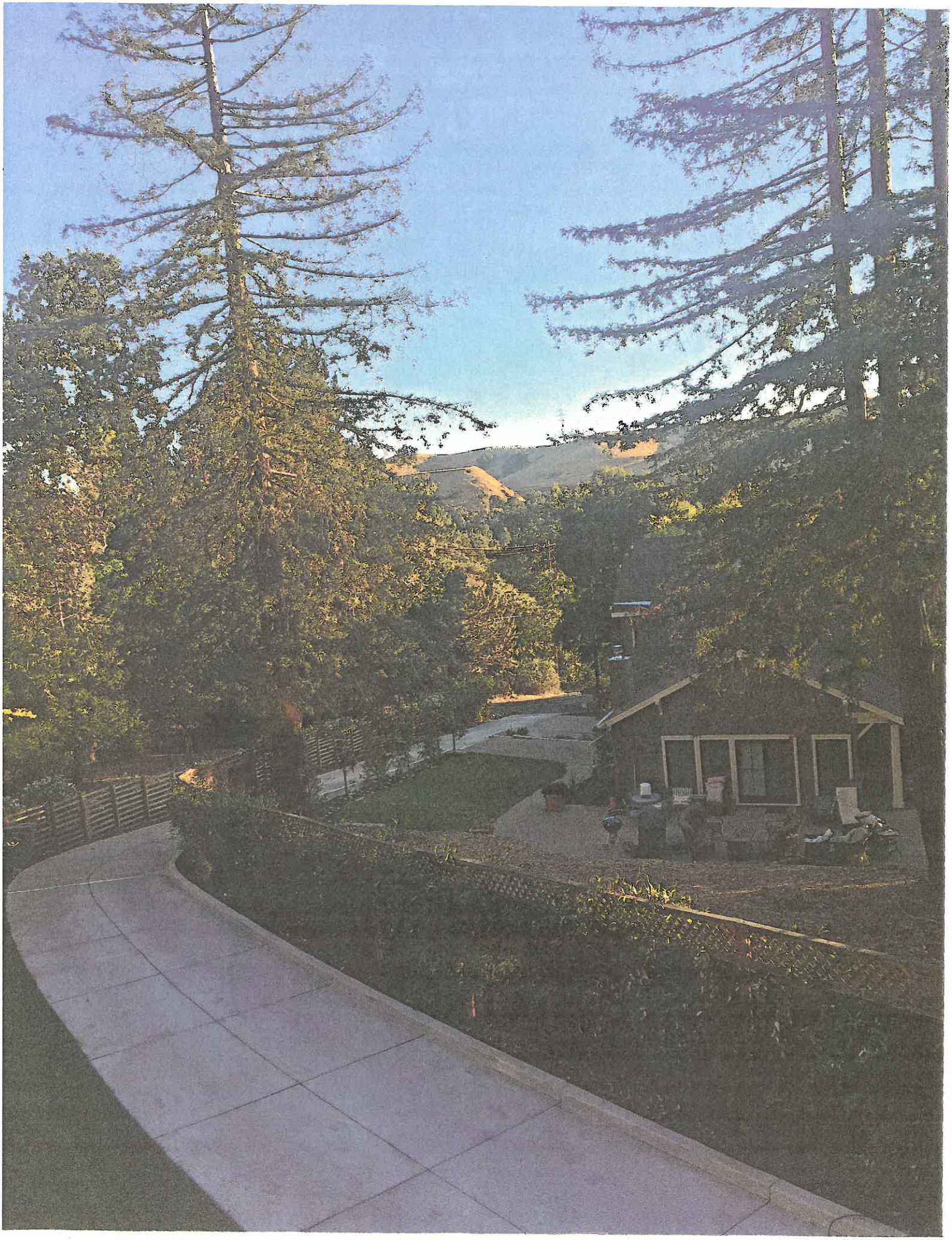

CONTRA COSTA
2017 OCT -2 AM 10:48
APPLICATION & PERMIT CENTER

Gabriela Odell
Bruce Tarter
1591 Hillgrade Ave.
Alamo, CA 94507

October 2, 2017

Department of Conservation and Development
30 Muir Rd.
Martinez, CA 94553
Attn: Grant Farrington

Re: Appeal of tentative tree cutting permit
County File Number #TP17-0033

Dear Mr. Farrington:

This is an appeal to the Notice of Tentative Approval of a Tree Permit. The tree cutting permit should be denied because it violates Article 816-6.8010 subsection (3) (D) which states that:

> The value of the tree to the neighborhood in terms of visual effect, wind screening, privacy and neighboring vegetation is greater than the hardship to the owner.

These are trees that were required to be spared when the previous owner submitted his building permit. These trees not only provide screening between us and our neighbors, and protection from heat and soil erosion, but provide a majestic presence which cannot be duplicated by any replacement trees. The only basis submitted by the owner of the property for cutting the trees is an opinion by a single tree cutting company that they are unhealthy. The owner happens to be a landscape developer who likely has simply hired one of his vendors to say what is convenient for his purposes. In fact, the owner blatantly removed the four trees that the county had required the builder to plant as part of a settlement between us and the builder in exchange for not appealing the prior tree removal permit.

I have reason to believe, based upon what one of the owners mentioned to me, is that they wish to use the areas inhabited by the trees to build a pool. The alleged distressed condition of the trees is simply a pretext.

As I noted in a previous letter, it does not appear that we will have the opportunity to obtain an independent second opinion as to the health of the trees that are being removed. We wish to obtain an opinion as to whether the trees cannot, in fact, be salvaged. It is ironic that a property which was subdivided and developed by gerrymandering the property lines to meet the half acre requirement, where many redwood trees were already removed to build an overly large house, now is being allowed to remove the last remaining trees which were probably distressed from the grading and development that shouldn't have been allowed in the first place.

We are also concerned by soil erosion that may be caused by the tree removal. Since we have lived here we have had significant mud flows from the property every winter. These mud flows will only get worse with the removal of these trees. One tree in particular, the 40-inch redwood, does not appear particularly unhealthy and provides significant screening for our property which will be difficult to duplicate within our lifetimes.

We therefore wish to appeal the determination and have an opportunity to obtain a second independent opinion. If the trees are determined to be unsalvageable, we wish to have input into any remediation plans to provide screening as well protection from mud flows.

Very truly yours,

Gabriela Odell

October 1, 2017

2017 OCT -2 AM 10: 48
APPLICATION & PERMIT CENTER

Grant Farrington
Department of Conservation and Development
Community Development Division
30 Muir Road
Martinez, CA 94553

Re: County File #TP17-0033

Dear Mr. Farrington:

I am writing in regard to your Notice of Tentative Approval of Tree Permit for Assessor Parcel # 188-311-011. We share a property line with the aforementioned lot and feel the request is misrepresented and false that all six remaining protected Redwood trees on the property are in poor health. We are requesting the permit be denied due to the fact that it violates Article 816-8010 subsection (3) (D), which states: "the value of the trees to the neighborhood in terms of visual effect, wind screening, privacy and neighboring vegetation is greater than the hardship of the owner."

More specifically,

1. These Redwood trees provide necessary screening and privacy between our properties (see corresponding photos). The majority of these Redwoods fall on the border of our property line, which were guaranteed to remain when we purchased our home April 2016 from the original developer. The value these trees provide both in privacy, screening, soil preservation and home value are irreplaceable in our or our children's lifetime.
2. Our neighborhood believes the Request for Approval of Tree Permit was submitted under false pretenses, so the parcel owner could build a pool and/or a carport for additional parking of vehicles. The arborist used is also a business associate of the parcel owner representing a conflict of interest. We are contesting the claim that these Redwoods are all in poor health and are prepared to submit an independent arborist report.
3. The unincorporated city of Alamo prides itself on the nature and beauty of its giant Redwood and Oak trees. The removal of these state protected Redwood trees goes against our community's beautification standards and expectations for nature and privacy.
4. Redwood trees are protected because they are part of a complex community of living things interacting with their environment. Our community's ecosystem depends on Redwoods and they should be protected by the Department of Conservation and Development.

We are looking forward to your assistance in helping to save these vital and precious Redwoods in our community and encourage you to conduct a thorough investigation.

Kind regards,

Sophia & Lomit Patel

# Dryad, LLC

RECEIVED
CONTRA COSTA COUNTY
OCT 30 2017
Dept of Conservation & Development

17065-10168

TP17-0033

October 23, 2017

Garbriela Odell
1591 Hillgrade Ave.
Alamo CA 94507

RE.: Evaluation of trees relative to a tree permit appeal.
Contra Costa County file no.: TP17-0033.
Site: Gil Gibson, 1593 Hillgrade Ave., Alamo.

Ms. Odell;

I am writing in response to your request for a report of my recent inspection and evaluation[1] of three CA coast redwood trees (*Sequoia sempervirens*) proposed for removal.

The trees are located on the property adjacent (north) of yours, 1593 Hillgrade Ave. I met with you and inspected and photographed the trees on October 19, 2017. I performed and visual inspection, in your company and assisted by Katie Krebs, Certified Arborist[2]. Mr. Gil Gibson's son was also intermittently present and I also subsequently received a brief telephone call from Mr. Gibson.

I did not enter the property of 1593 Hillgrade Ave. and performed no advanced investigation processes. I also reviewed the site via historical images on Google earth®. I reviewed several arborist reports and other communications you provided. The reviewed documents included the following:

1. A letter-report from Brightview to Gil Gibson, subject: Consulting Arborist Report 50 1953 Hillgrade Ave.", signed by Bob Peralta and dated 10/12/2017.
2. Letter from Gabriela Odell to Mr. Farrington, Department of Conservation and Development, entitled "Appeal of tentative tree cutting permit, County File Number #TP17-0033", signed by Gabriela Odell and dated 10/02/2017.
3. Letter from Contra Costa County to Property Owner (Gil Gibson), entitled "Notice of Tentative Approval of a Tree Permit", signed by Ruben L. Hernandez and dated 09/21/2017.
4. Letter-report from Tim Hendricks, untitled, unsigned and undated (cites an inspection of 04/08/2017).
5. Letter from McKee Associates to Daniel Barrios, Planner, Contra Costa County, Subject: Landscape Plan, signed by Steven McKee, Project Architect and dated 08/29/2014.
6. Report from Waraner Tree Experts to Steven KcKee, entitled "Tree Assessment at 1597 (sic) Hillgrade Ave., Alamo CA 94507", signed by Dustin Waraner and dated 01/27/2014.

Although I reviewed these documents, they did not contain information substantial to the formation of my opinions regarding either the history of the trees or their current condition and my recommendations for the subject trees.

**SUMMARY:** I do not have a history of these trees as to the extent of impacts from adjacent construction and grading activities (i.e., slope, construction, driveway, etc.) and I was able to perform only a visual inspection from adjacent properties. However, current signs of decline were obvious and consistent with my observations of the historical condition of the trees and site via Google earth® aerial images. I did not observe any conditions that appeared to be from insect infestation or disease. Therefore, it seems likely the trees, appearing dense and vigorous in historical aerial images, were impacted by grading activities (root loss, compaction, etc.) exacerbated by having occurred during a period of extended drought.

Based upon research, observation and described assumptions as well as my professional knowledge and experience, it is my opinion that these three CA coast redwood trees will likely recover from their current condition and can thrive for many years in this location (refer to images on pages 9-10). Supportive efforts and periodic management would enhance recovery.

Dryad, LLC

35570 Palomares Rd.
Castro Valley CA 94552

PHONE: (510) 538-6000
FAX: (510) 538-6001
E-MAIL: tyoung@dryadllc.com
WEB SITE: www.dryadllc.com

## OBSERVATIONS/RECOMMENDATIONS:

**Tree no. 1:**
**Observations:**
- Top dead for approximately 10-12 feet.
- 1 major limb dead at about 5-0% height (cause unknown).
- Dieback of branch tips throughout canopy[3].
- Canopy volume thin.
- Trunk taper[4] good.
- Architecture[5] good.
- Foliage of good color and limbs sprouting profusely throughout canopy.

**Recommendations:**
1. Remove the dead top to viable tissue (preserve as much viable wood as possible but cut to 360° of live cambium[6]).
2. Remove the large dead limb and any other deadwood as necessary to avoid risk (only).
3. After 2-3 year of growth, perform structural pruning[7] of the top sprouts, preferably preserving only one top.
4. Follow recommendations for all trees (following).

**Tree no. 2:**
**Observations:**
- 4 codominant[8] stems, 3 at just above grade and one at approximately 15-20 above grade (w/acute-angle attachment and included bark[9]).
- Canopy volume extremely thin.
- Recently pruned, green branches litters the are beneath the tree.
- Recent pruning cuts were apparent on all trunks.
- 1 trunk to the north had the majority of its limb removed and punctures from gaffs (climbing spikes)[10] were apparent for the entire height of the trunk.
- Poor Trunk taper of all 4 trunks.
- Foliage of good color and limbs sprouting profusely throughout canopy.

**Recommendations:**
1. Install a box cable system[11] between consecutive trunks; consider installation of through-bolts in the high bifurcation some years in the future.
   a. Avoid excessive cable tension.
   b. Anchor with drop-forged through bolts or machine-threaded through-bolts with amon nuts, appropriately sized.
   c. ¼" EHS (extra high strength) steel cable and all hardware must be intended for arboricultural use.
2. Follow recommendations for all trees (following).

**Tree no. 3:**
**Observations:**
- Canopy volume thin.
- Recently installed or rebuilt driveway within a few feet of the tree root flare; extent of root damage unknown.
- Trunk taper good.
- Architecture good.
- Codominant tops developing.
- Foliage of good color and limbs sprouting profusely throughout canopy.

**Recommendations:**
1. Remove smaller of the codominant tops while still small (long term management only).
2. Follow recommendations for all trees (following).


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**RECOMMENDATIONS (ALL TREES):**

1. Mulch[12]: Cover exposed soil within at least the dripline areas of all three trees with an organic mulch (tree brush chips preferred) to a settled depth of no less than 3-4 inches. If retention is required, install jute netting on bare soil. Do not install landscape (weed-block) or geotextile fabric.
2. Irrigation: Irrigate as necessary, via slow-application (drip) irrigation, to near field capacity[13] to a depth of approximately 12-18". Repeat irrigation as needed to maintain soil moisture during extended periods of drought and/or heat.
3. Grading cut to northeast of trees 1 & 2: Cut encountered roots cleanly with hand pruners or power saw.
   a. Avoid tearing, dislodging of bark (or epidermis) or otherwise disturbing that portion of the root(s) to remain.
   b. Immediately back-fill with soil to cover, and moisten.
   c. If backfilling cannot be completed immediately, cover exposed roots with several layers of untreated burlap (or other similar absorbent material) or sand, mulch or soil and keep moist until permanent backfilling can be completed.
4. Pruning[14]: Avoid removal of any live foliage or other tissue (wood, roots) now or in the future; remove only dead branches that present risk should they fall.

✦ ✦ ✦



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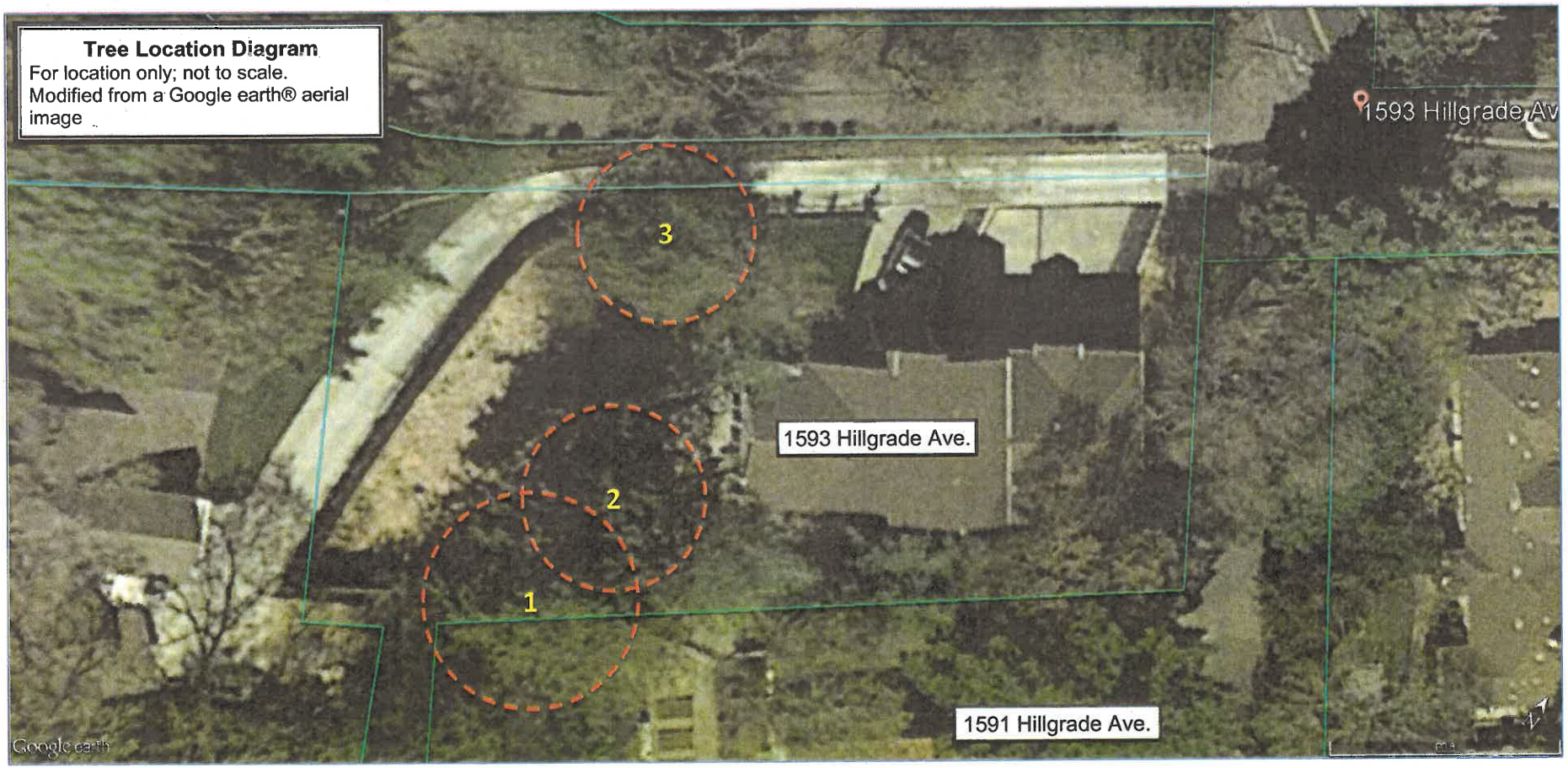
October 23, 2017
Torrey Young, Dryad, LLC
17065-10168 Odell, Gabriela
Site: 1593 Hillgrade Ave., Alamo

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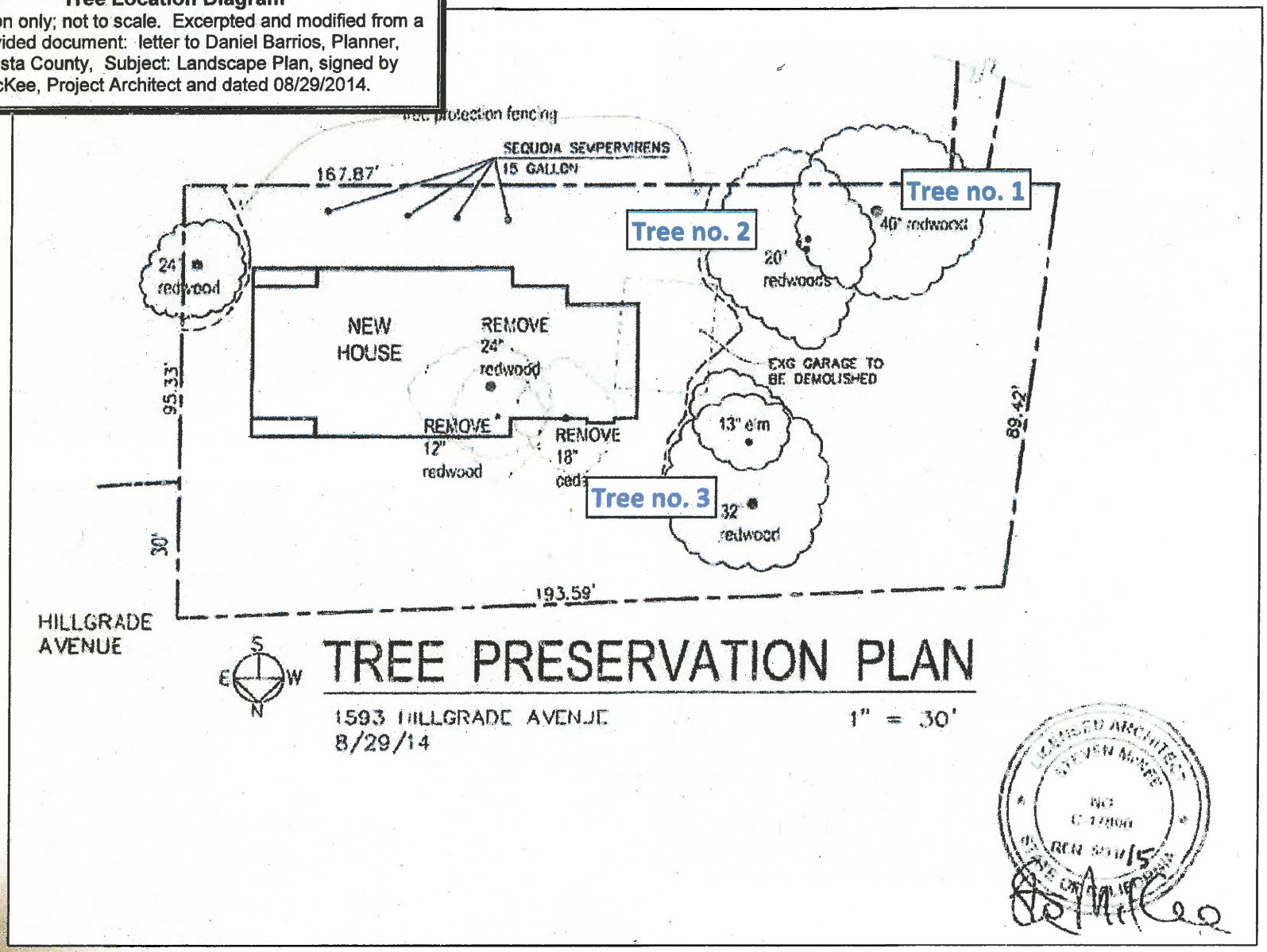
October 23, 2017
Torrey Young, Dryad, LLC
17065-10168 Odell, Gabriela
Site: 1593 Hillgrade Ave., Alamo

**Tree Location Diagram**
For location only; not to scale. Excerpted and modified from a client-provided document: letter to Daniel Barrios, Planner, Contra Costa County, Subject: Landscape Plan, signed by Steven McKee, Project Architect and dated 08/29/2014.





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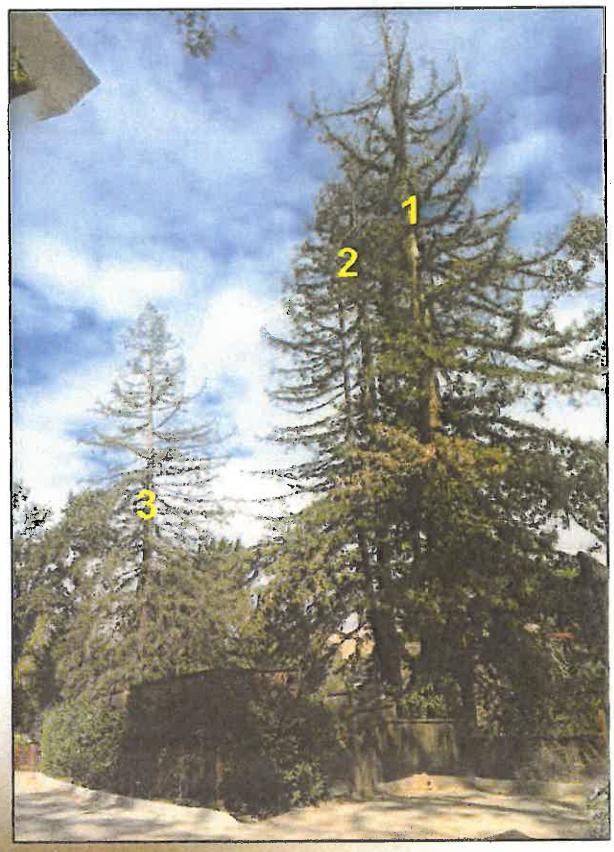

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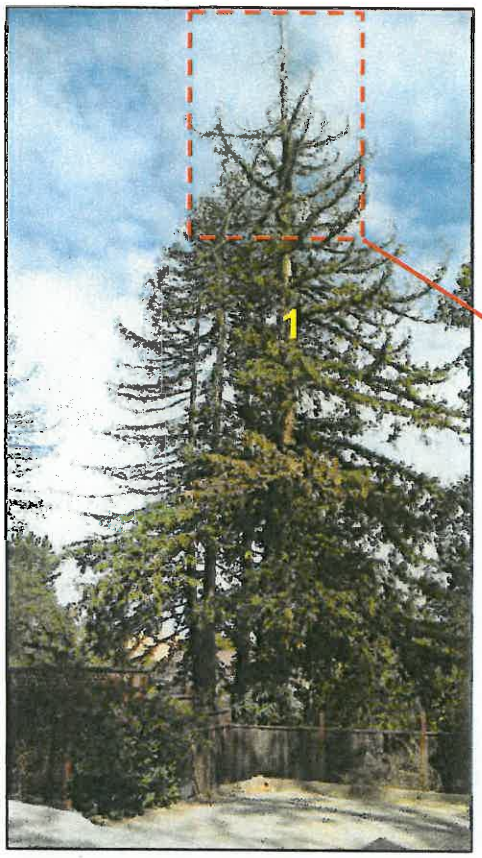


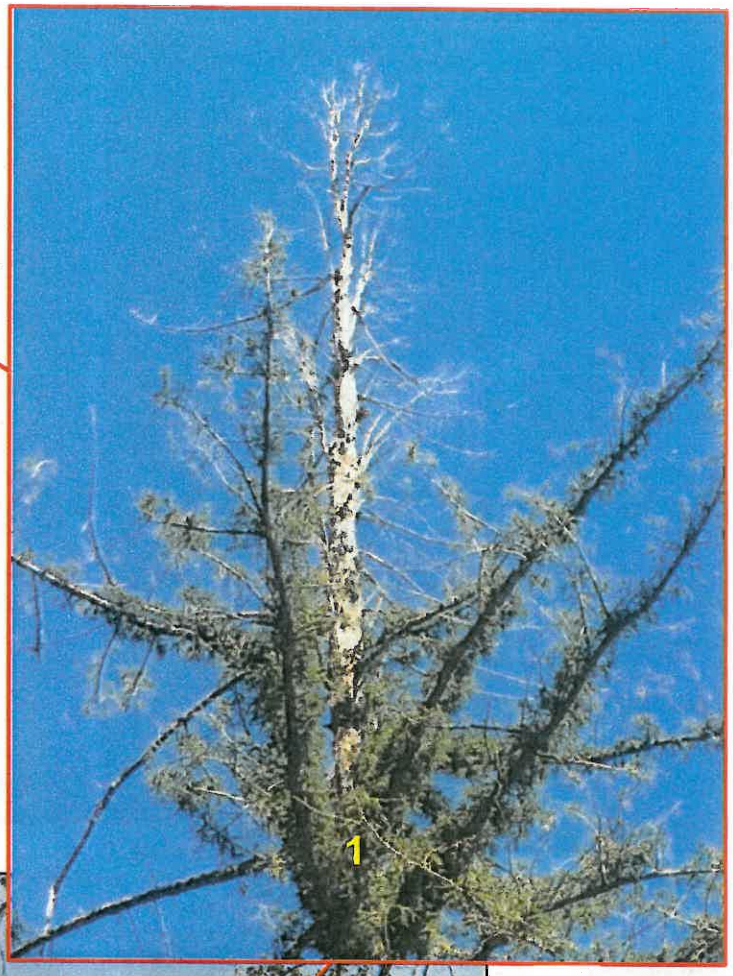


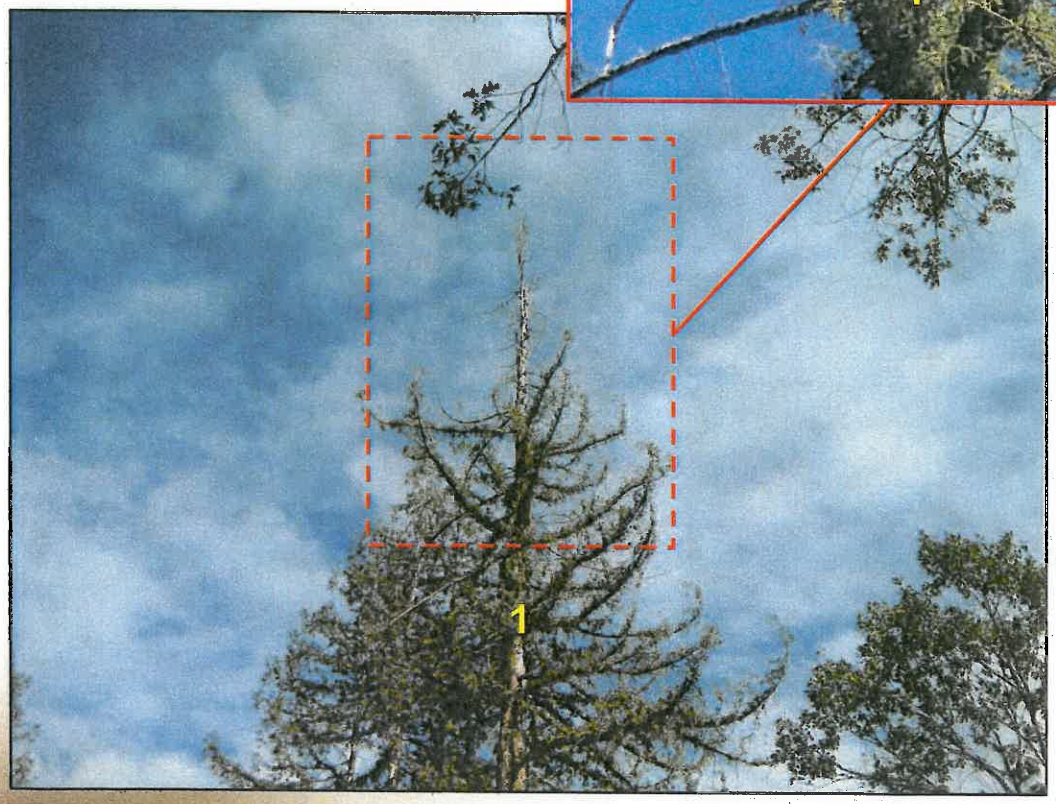




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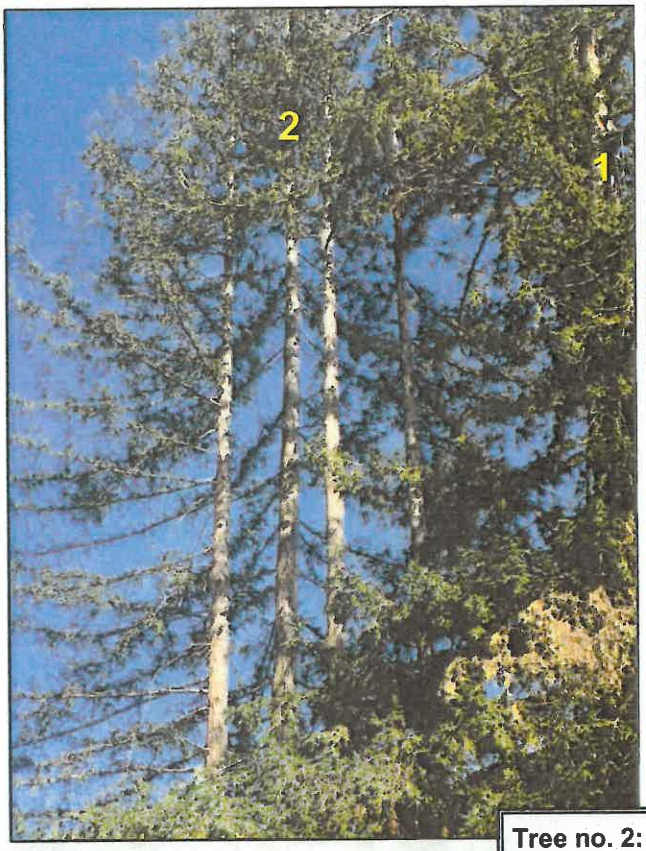
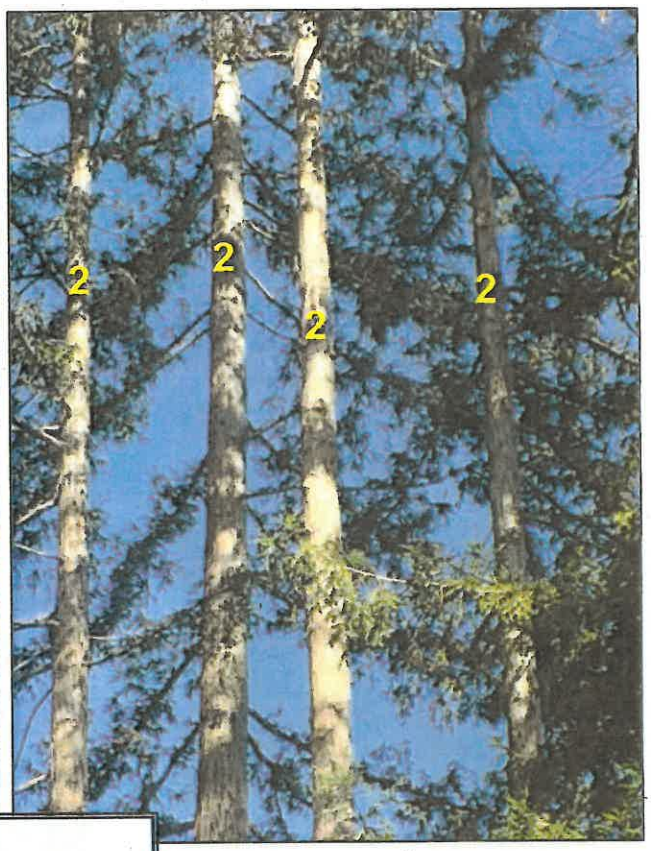
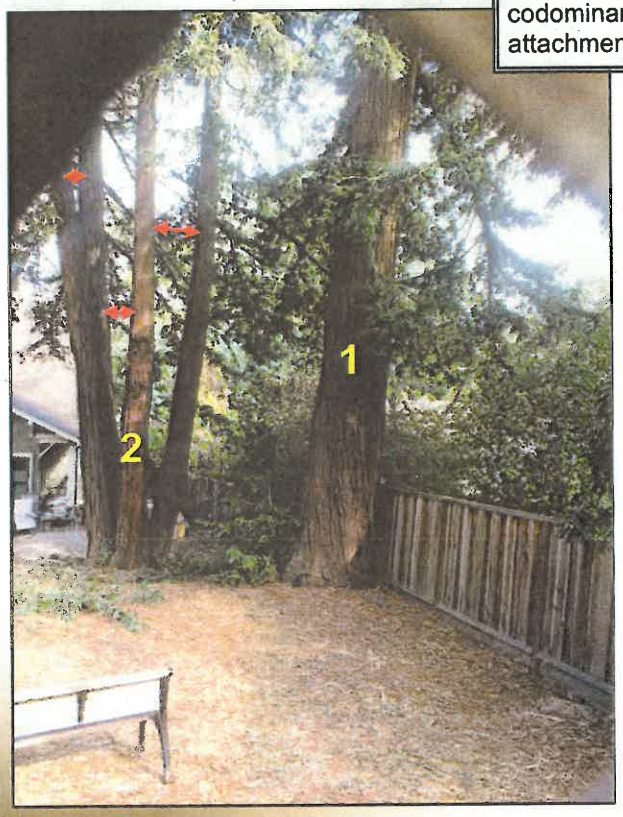
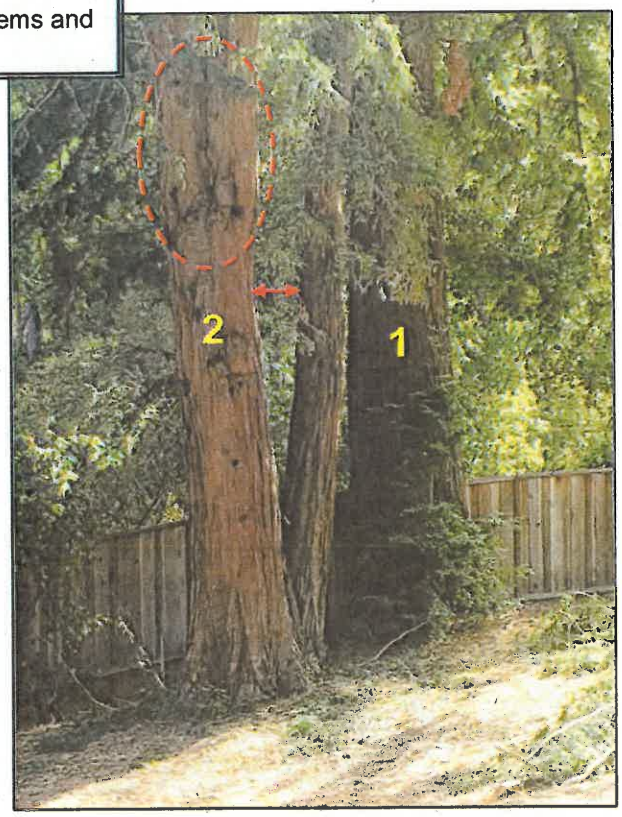



**Tree no. 2:**
codominant stems and attachments.



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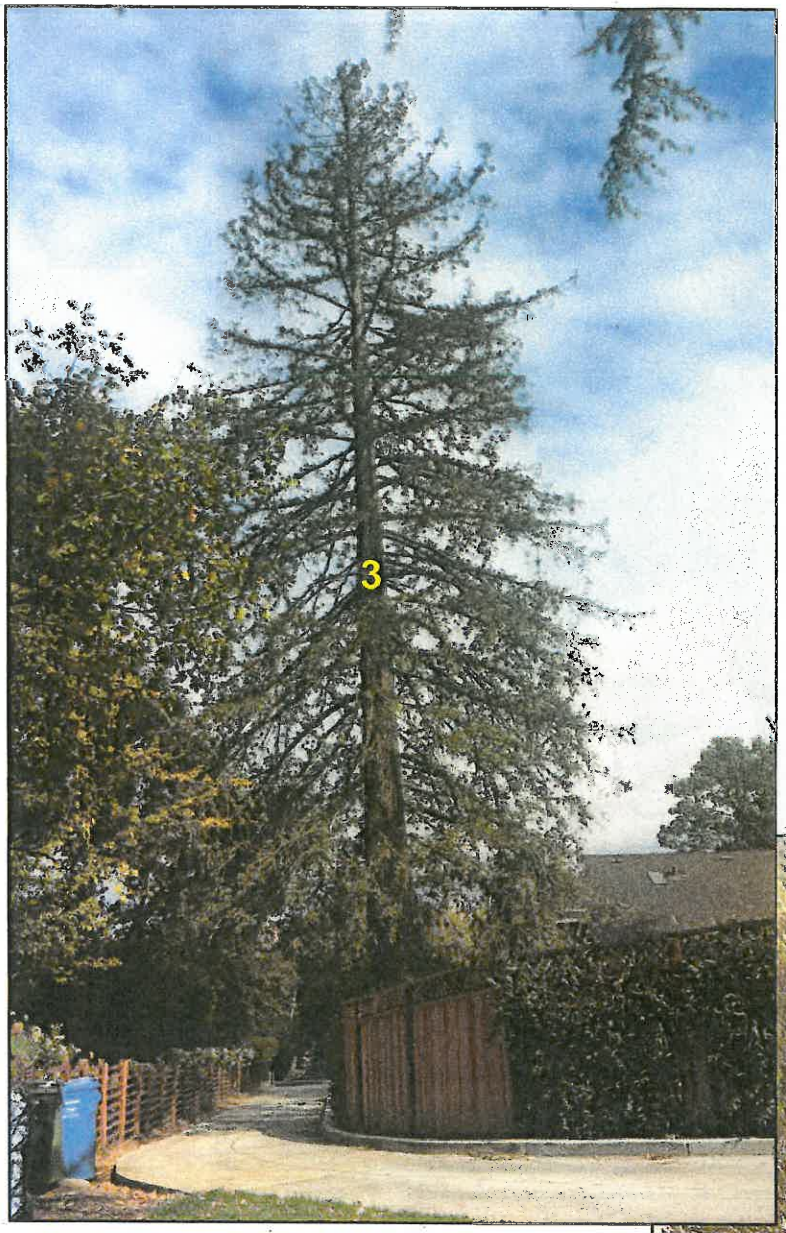

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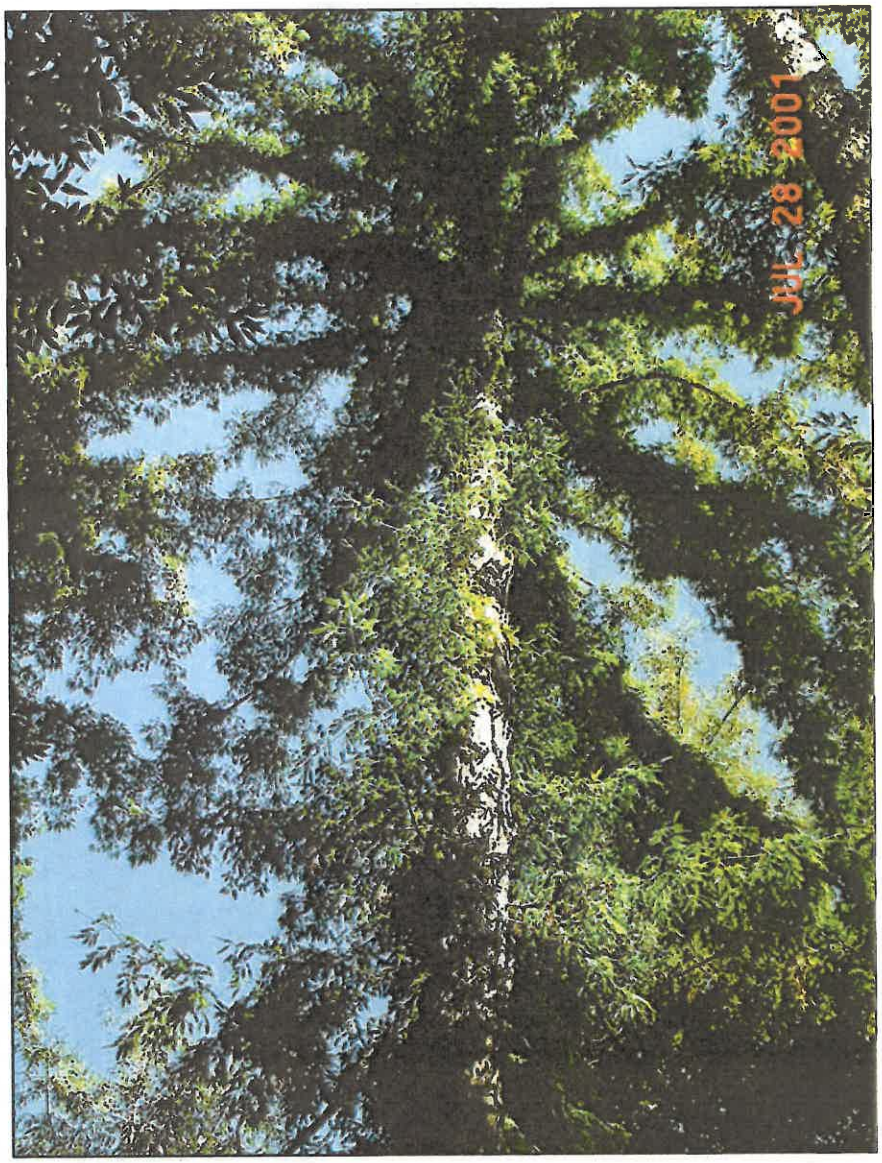


Off-site example of redwood regeneration after excessive pruning for view clearance. Note sprouting along trunk and individual limbs.

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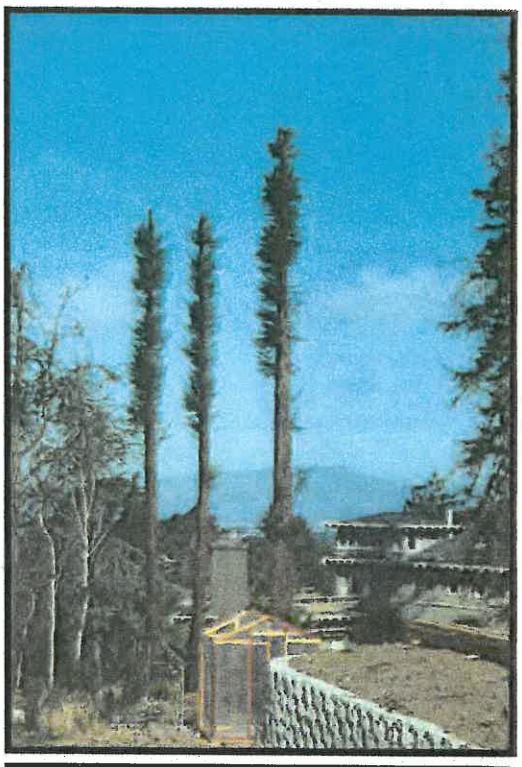

**Figure 1:** Redwoods after pruning of limbs and tops destroyed by fire in 1991. Photo taken August, 1992.

**Figure 2** **Same** redwoods after natural regeneration and restorative pruning . Photo taken September, 2001.

**Figure 3:** Same redwoods after natural regeneration and restorative pruning . Photo taken September, 2001.

Off-site example of redwood regeneration after the Oakland Firestorm of 1991. These redwoods were completely devoid of foliage and all limbs and tops were destroyed by fire. The trunks remained alive and were left to sprout naturally. Structural pruning selected permanent tops and limbs.
(Images provided by Joseph McNeil, Consulting Arborist).



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Please feel free to contact me for further discussion or services.

Respectfully, Torrey Young Digitally signed by Torrey Young DN: cn=Torrey Young, o=Dryad, LLC, ou, email=torrey@dryad.us, c=US Date: 2017.10.23 19:15:30 -07'00'

Torrey Young
Registered Consulting Arborist®

ASCA Registered Consulting Arborist, no. 282
ISA Board Certified Master Arborist, no. WE-0131BM
CUFC Certified Urban Forester, no. 121
ISA Tree Risk Assessment Qualified
CA P.C. Qualified License, no. 104772
CA Contractors License no. 363372 (C-27 & D-49; inactive)

TORREY YOUNG asca AMERICAN SOCIETY of CONSULTING ARBORISTS Registered Consulting Arborist #282

✦ ✦ ✦

## ENDNOTES:

[1] Arborist Disclosure Statement: Arborists are tree specialists who use their education, knowledge training and experience to examine trees, recommend measures to enhance their health and beauty and to attempt to reduce the risk of living near trees. Clients may choose to accept or disregard the recommendations of the arborist or to seek additional advice. Trees and other plantlife are living, changing organisms affected by innumerable factors beyond our control. Trees fail in ways and because of conditions we do not fully understand. Arborists cannot detect or anticipate every condition or event that could possibly lead to the structural failure of a tree. Conditions are often hidden within the trees and below ground. Arborists cannot guarantee that a tree will be healthy or safe under all circumstances, for any specific period or when a tree or its parts may fail. Further, remedial treatments, as with any treatment or therapy, cannot be guaranteed. Treatment, pruning, bracing and removal of trees may involve considerations beyond the scope of the arborists skills and usual services such as the boundaries of properties, property ownership, site lines, neighbor disputes and agreements and other issues. Therefore, arborists cannot consider such issues unless complete and accurate information is disclosed in a timely fashion. Then, the arborist can be expected, reasonably, to rely upon the completeness and accuracy of the information provided. Trees can be managed but not controlled. To live near trees, regardless of their condition, is to accept some degree of risk. Tree removal is the only way to eliminate risk associated with trees.

[2] Katie J. Krebs, Consulting Arborist; ISA Certified Arborist #WE-8731A, ISA Tree Risk Assessment Qualified.

[3] Canopy: One of several accepted terms describing that area of a tree which includes limbs, branches, foliage, and to a lesser degree, upper stems (synonymous with `foliage crown').

[4] Taper: (of stems & limbs) the increase in diameter towards the base of stems (trunks) and limbs that is typical and desirable in woody plants. Degree of taper is influenced by a variety of factors including foliage, limb and branch distribution, species, location (sunlight), wind patterns, pruning, etc. Insufficient taper results in a concentration of stress from movement towards the base of the limb or stem, resulting in a greatly increased potential for breakage or uprooting. Pruning that removes interior lateral branches from limbs and/or lower limbs from trunks dramatically reduces taper development.

[5] Architecture: (as employed in this report) the arrangement of the (external) parts of a tree; primarily refers to the foliage crown including major (scaffold) limbs, lateral branches and trunks.

[6] Cambium: A very thin layer of living cells (a meristem) between the sapwood (xylem) and the bark (phloem and cork cambium) of woody plants that provides for growth through cell division.

[7] Restoration pruning (crown restoration): A pruning standard referring to selective pruning cuts to improve the structure and appearance of trees that have been headed (i.e., topped, stubbed) or otherwise severely damaged or improperly pruned; several pruning events over a period of years may be required to achieve goals with minimal negative impact.
ANSI A300 Part 1 – Pruning (2017): restoration: Pruning to redevelop structure, form, and appearance of topped or damaged woody plants.

---

[8] Codominant: Refers to branch, limbs or trunks of similar size and height or length competing for the same space and/or role within the tree's architecture; frequently originating at acute angles from each other, with bark remaining (included) between the components (in the crotch). Such attachments are inherently weak and worsen with time through the pressure of opposing growth and the increasing weight of wood and foliage, frequently resulting in the failure of one or both (all).

[9] Acute-angle attachments (crotches): Branch/limb, limb/trunk, or codominant trunks originating at acute angles from each other. Bark remains between such crotches, preventing the development of a branch-bark ridge (branch collar). The inherent weakness of such attachments increases with time, through the pressure of opposing growth and increasing weight of wood and foliage, frequently resulting in failure.

[10] Gaffs: (aka: spurs, spikes, hooks, climbers, irons, etc.) Sharp, pointed devices strapped to a climber's lower legs used to assist in climbing trees (ANSI A300 (Part 1)-2008, Section 4 Definitions, 4.10). "*Climbing spurs shall not be used when entering and climbing trees for the purpose of pruning or other tree maintenance, except in situations where other means are impractical, such as:*

- *Remote/rural utility rights-of-way;*
- *When branches are more than throw-line distance apart and there is no other means of climbing the tree;*
- *When the outer bark is thick enough to prevent damage to the inner bark or cambium; and,*
- *Emergency operations (see subclause 8.10).* "

American National Standards Institute, 2017. Standard Practices for Tree, Shrub and other Woody Plant Maintenance (Pruning), American National Standards Institute (ANSI A300 Part 1-2017), 8.2 Work Practices, 8.2 Work Practices, 8.2.2.2:

[11] Cabling & Bracing: The installation of hardware in and/or about trees for the purpose of providing supplemental support of weak, defective or otherwise suspect limbs and/or stems; supporting of newly planted trees; bracing cracks; propping trees or limbs, or otherwise providing support. The installation of cables, bolts and other hardware in trees is intended to reduce the potential for failure (breakage/uprooting). Such bracing does not permanently remedy structural weaknesses, and is not a guarantee against failure. The trees and hardware must be inspected periodically for hardware deterioration, adequacy and changes in the tree's and site condition.
Cabling & Bracing Standards: The most current revisions of *Best Management Practices, Tree Support Systems, Cabling, Bracing, Guying and Propping,* International Society of Arboriculture ; *Tree Care Operations Trees, Shrubs and Other Woody Plant Maintenance-Standard Practices (Supplemental Support Systems)*, American National Standards Institute [ANSI A300 (Part 3)].

[12] Mulch: Organic materials (e.g., brush chips, compost, processed wood chips, etc.) spread upon the soil for a variety of benefits: aesthetics, retains soil moisture, moderates soil temperatures, improves soil structure and increases fertility, protects against compaction, suppresses weeds, etc. Torrey Young, Dryad, LLC highly recommends fresh, brush chip mulch over processed materials. (Note: Elsewhere, the definition of *mulch* may include non-organic materials.).

[13] Field capacity: The maximum volume of moisture a soil can hold after drainage has occurred. An expression of the water-holding capacity and moisture status of soils.

[14] Pruning: Proper pruning is performed in a manner intended to achieve a specific goal while minimizing the negative effects on the plant (tree). Improper pruning is that which may not be coupled with a specific goal, may not employ techniques consistent with the identified goal, or may result in significant negative physiological and/or structural impacts on the plant.
Pruning standards: The most current revisions of the following standards, developed by a consensus of representatives from various industry professional organizations; American National Standards Institute,. *Standard Practices for Tree, Shrub and other Woody Plant Maintenance (Pruning)*, American National Standards Institute (ANSI A300 Part 1) and International Society of Arboriculture, 2008 . *Best Management Practices, Tree Pruning,* International Society of Arboriculture.


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CONTRA COSTA COUNTY
OCT 12 2017
Dept of Conservation & Development

TPM - 0033

Bob Peralta
ISA Certified Arborist, WE-7150A
BrightView Tree Care Services
4677 Pacheco Blvd
Martinez, CA - 94553
925-525-3795 tel
925-957-8833 fax

BrightView
Tree Care Services

October 12, 2017

Gil Gibson
1593 Hillgrade Avenue
Alamo, CA 94507

Subject: Consulting Arborist Report for 1593 Hillgrade Avenue

Dear Gil,

Thank you for asking me to provide a Consulting Arborist Report for the (3) Redwood trees (Sequoia sempervirens) located at 1593 Hillgrade Avenue in Alamo, California. The purpose of my site visit and inspection of the redwood trees is to evaluate the health and safety of the (3) redwood trees. I inspected these trees on October 12, 2017.

Coastal redwoods are not Native to the Alamo area and these three trees were most likely were planted some time ago from nursery stock. Alamo has a micro climate where winters can be dry and cold with summers reaching temperatures above 80 degrees for several months with very little summer fog reaching this area. The opposite is needed to have long lasting redwoods where the weather is cool and wet with long periods of summer fog. Urban redwoods even with plenty of irrigated water and wet winters can decline in these conditions. In some cases where redwoods are growing in concentrated groves they can stay healthy for many years. In hillsides such as yours with little protection redwood trees struggle to stay healthy.

My inspection found that your trees are typical of what we are seeing all over the Bay Area. This past winter we did have an above normal amount of rainfall followed by a typical nine month cycle of no rain. Prior to that we were in severe drought where many Native trees growing in non-native areas struggled. As a result the tops of the trees and defoliation of needles causes redwoods to decline. Once the tops decline and the needles become sparse the trees dry out even quicker and we start to see rapid decline. I did not see any visible pests, the roots are in good shape.

The first tree I inspected is a triple leader from ground level (Attachment 1) and four leaders 20 feet up (Attachment 2). I recommend this tree be removed for safety and liability. There is no way to safely prune or remove a leader to make this tree safe. The second tree next to the fence (Attachment 3) is a large 40"Dbh., with severe decay in the canopy and several branches. The needles on this tree are also sparse throughout the canopy. The redwood tree will continue to decline and make it difficult to remove when dead. Removing the deadwood will not make the tree healthier. I recommend this tree be removed before it completely fails. The last tree is also in moderate decline with little to no new growth on the tips. This is a very sparse branch structure with poor needle growth. This tree recently had severe root damage from the new driveway and gutter right next to the root flare (Attachment 5). This is not the contributing factor to the decline but like the above factors also contributed to the decline. This tree is in decline and will eventually fail. I do recommend this tree be removed due to the location to your home and possible root excavation from the road.

Bob Peralta
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925-957-8833 fax

Please give me a call if you have any questions.

*Bob Peralta*

Bob Peralta
Certified Arborist WE-7150A
ASCA Consulting Arborist #505

Attachments: 5 pictures

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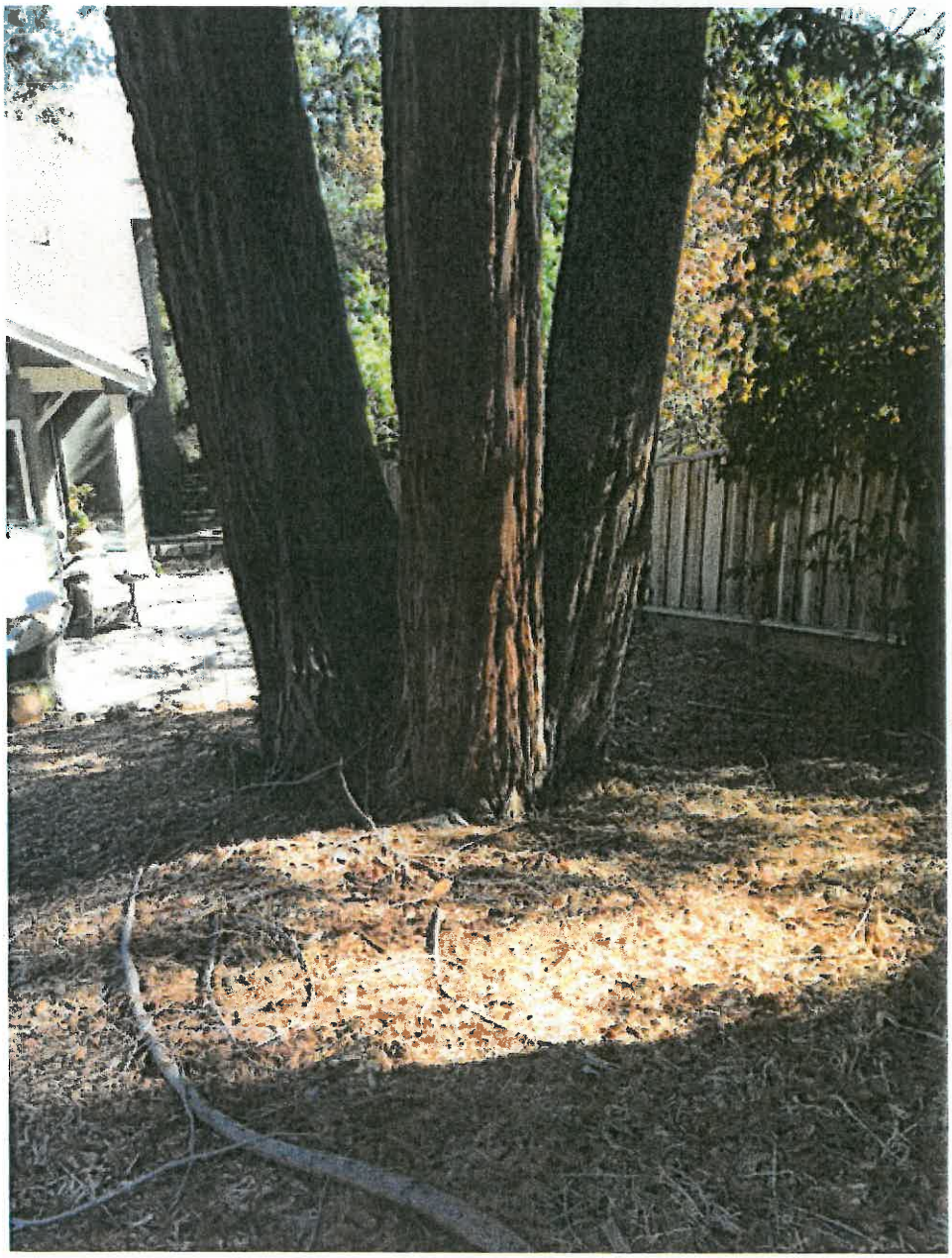

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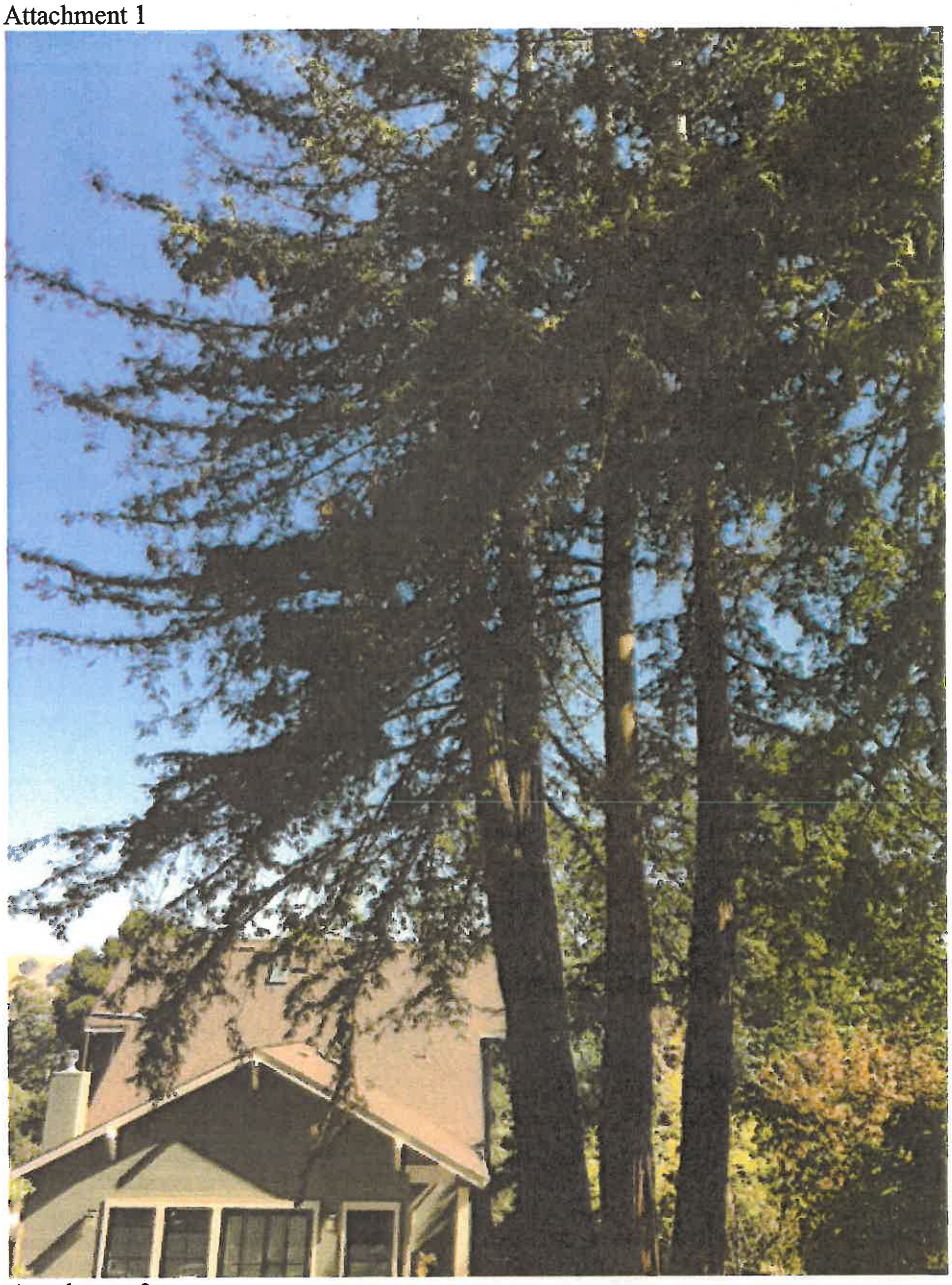
Attachment 1



Attachment 2

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Attachment 3

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Attachment 4

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Attachment 5

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JUL 25 2017
Dept of Conservation

TP17-0033

Gil Gibson

1593 Hillgrade Ave.

Alamo, CA. 94507

Mr. Gibson,

This report documents my inspection of the trees on the property located at 1593 Hillgrade Avenue, Alamo, CA. specifically, all of the Coast Redwoods (Sequoia sempervirens.) The following are my findings.

There are three Sequoia on the property. All on the west side of the structure, a single family home, in the side or rear yard, which is a fairly steep upslope from the structure. I will identify them as specimens # 1, # 2, and # 3. Inspection took place on April 8th, 2017.

1. Specimen # 1, is located to the north of the west side of the property, directly adjacent to the neighboring driveway. This is a single stem Coast Redwood (Sequoia sempervirens) approximately 32" DBH, (diameter at breast height) and approximately 60' to 65' in height. Overall condition is poor. The main stem is in decline, and is mostly defoliated. Defoliation is more severe, in the top one third of the tree. Root system appears to be sound over approximately sixty percent of the circumference of the tree. More than forty percent of the circumference of the root zone, is covered by the driveway to the neighboring property. The pavement at its closest, comes to within 24' of the root flare, and appears to have caused moderate deformation of the root crown. Forensic testing of the root system, or main stem were not performed. Recovery of this specimen, is not likely, and removal would be warranted.

2. Specimen # 2, is located to the far south of the west side of the property. This specimen is also a single stem Sequoia approximately 38" - 40" DBH, and approximately 70' to 75' in height. Overall condition is very poor. The main stem is in severe decline, and is mostly defoliated. Defoliation is more severe, in the top one half of the tree. There does not appear to be any living tissue in this section of the tree. Root system appears to be sound over most of the circumference of the tree. Forensic testing of the root system, or main stem were not performed. Recovery of this specimen, is very unlikely, and removal would be warranted.

3. Specimen # 3, is located between specimens # 1, and # 2, towards the middle of the west side of the property. This specimen is comprised of a single stem Sequoia, and a split-stem Sequoia, all

in the same grouping, and all from the same root mass. It is unknown if this condition resulted from the split sub-stem growing off of the main stem, or if the tree began as a multi-stem specimen. The single stem portion is approximately 28" - 30" DBH, and approximately 55' to 60' in height. Overall condition is moderate to poor. The main stem is in some decline, and is partially defoliated. Defoliation is more severe, in the upper portions of this stem. The other stem of this specimen, is approximately 24 – to 26" DBH, and is split into two stems. The division occurs at approximately fifteen feet above soil level. DBH of each sub-stems, and the point of division, is approximately 12". The split leader creates an extremely narrow crotch, and the attachment is poor. As with all of the Sequoias on this property, foliage, and overall stem condition is poor in this set of stems as well. Root system appears to be sound over most of the circumference of the tree. Forensic testing of the root system, or main stem were not performed. Recovery of this specimen, is not likely, and removal would be warranted.

In conclusion, all three examples of this species on the property, have been negitively affected by prolonged drought, and insufficient water to their root zones. The three specimens range from poor to very poor, and are not likely to recover.

Respectfully,

Tim Hendricks
I.S.A. Certified Arborist #WE-9247-A

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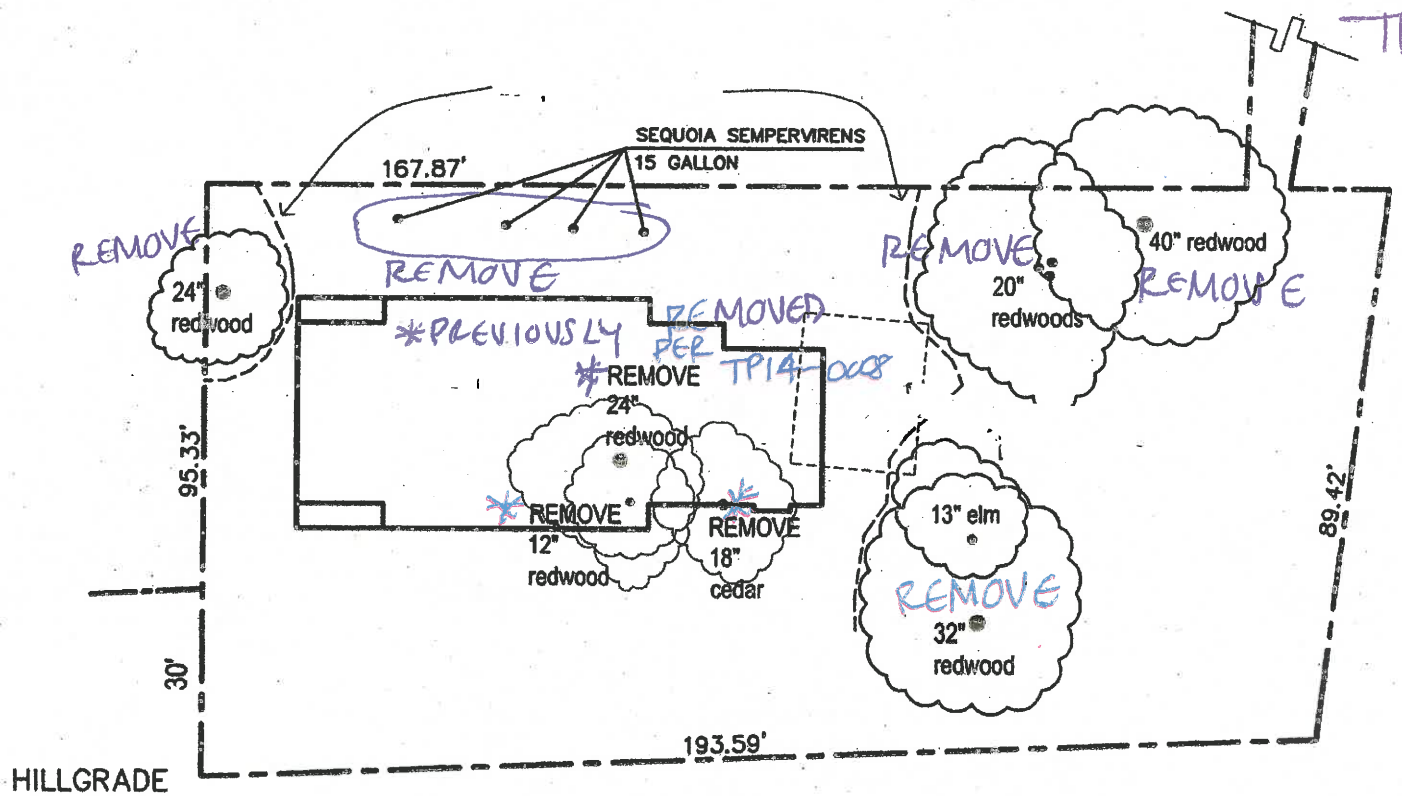
TP17-0033




# TREE PRESERVATION PLAN

1593 HILLGRADE AVENUE
8/29/14

1" = 30'

LICENSED ARCHITECT
STEVEN McKEE
NO. C-17880
REN. 5/31/15
STATE OF CALIFORNIA

# Gibson Tree Permit Appeal

## County File: #TP17-0033

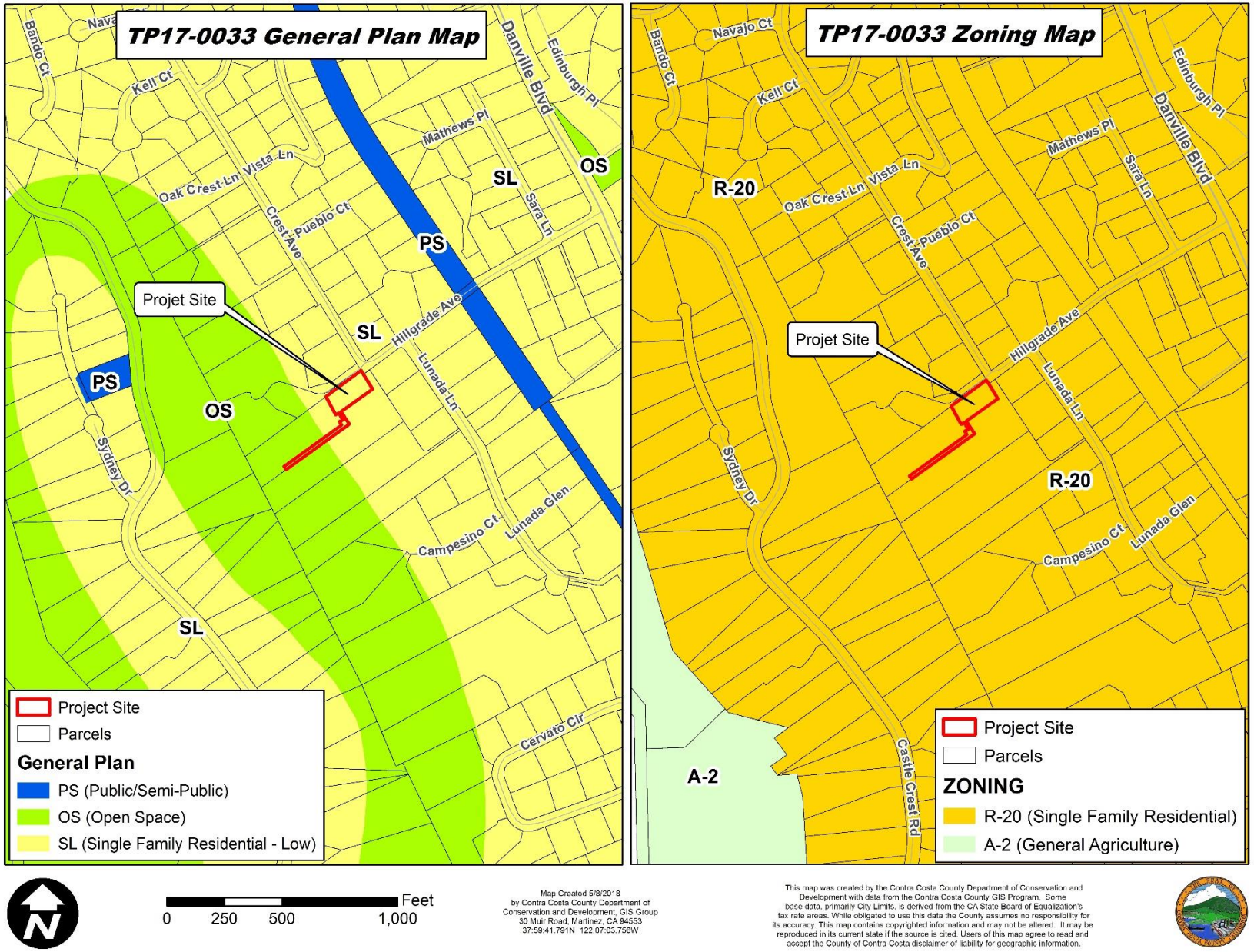
BOARD OF SUPERVISORS

MAY 22, 2018

# Vicinity Map

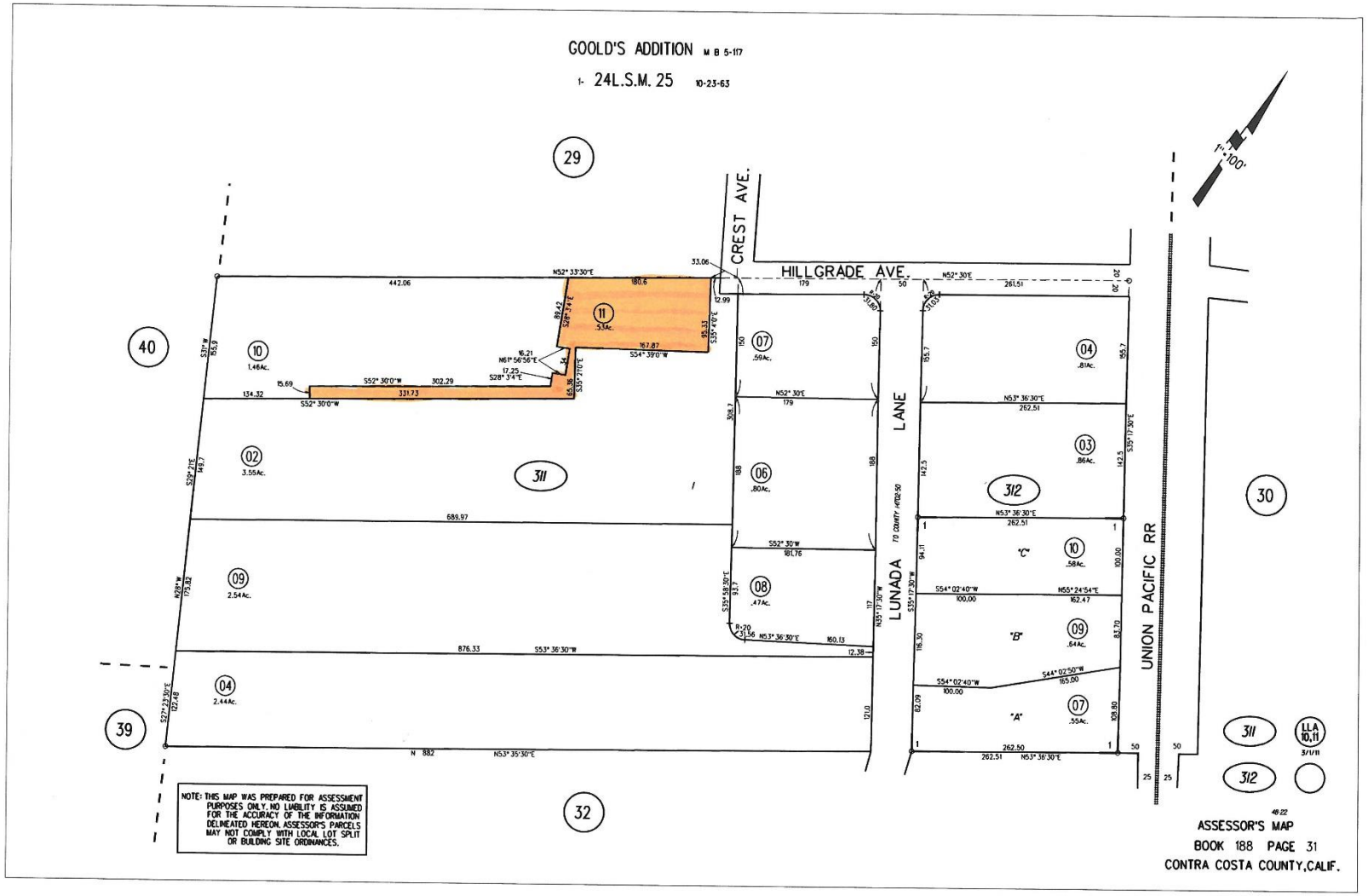
# Zoning and General Plan Maps





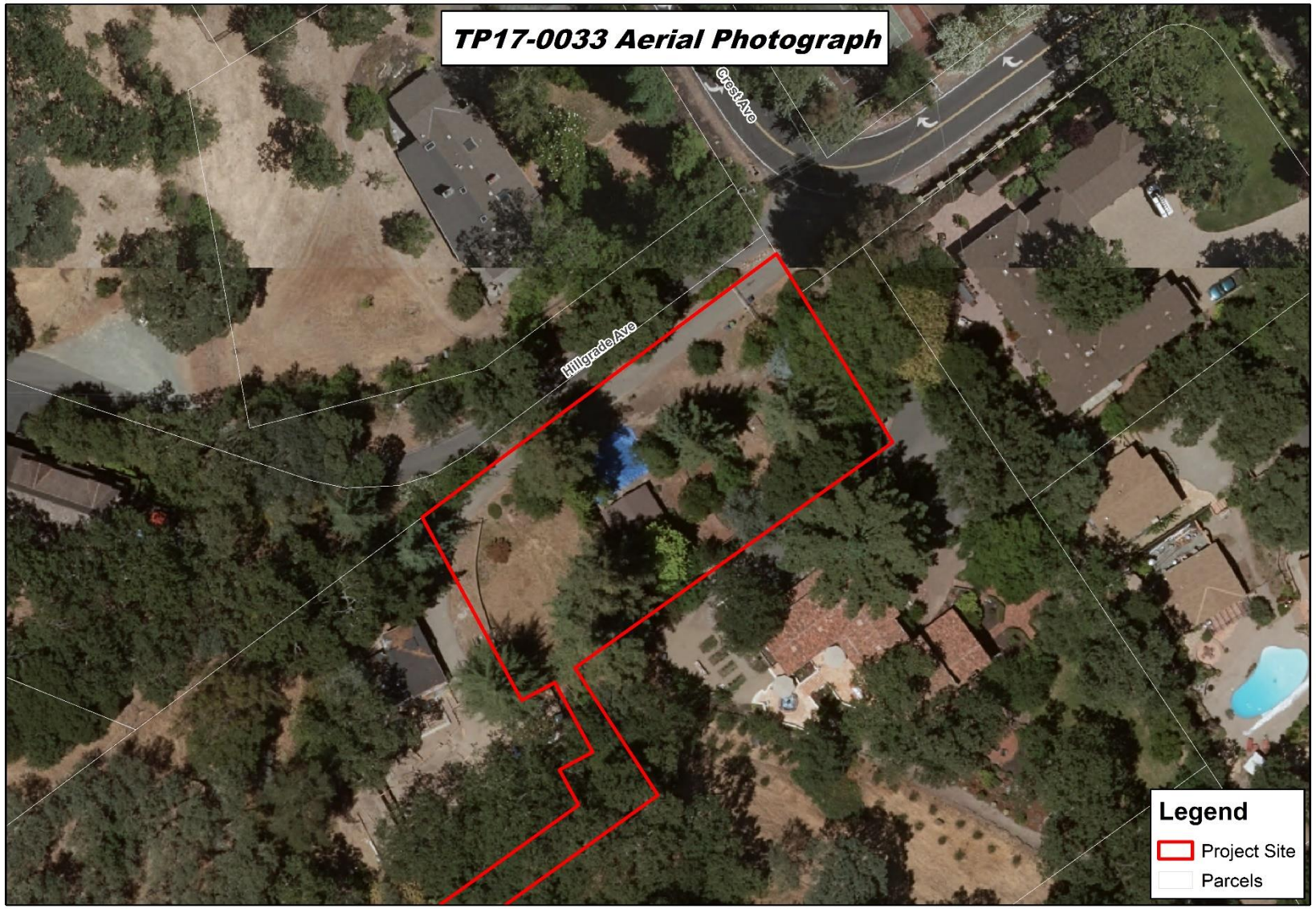
# Assessor's Parcel Page





# Aerial Photo






0 25 50 100 Feet

Aerial Photo taken 2014

Map Created 5/8/2018
by Contra Costa County Department of
Conservation and Development, GIS Group
30 Muir Road, Martinez, CA 94553
37:59:41.791N 122:07:03.756W

This map was created by the Contra Costa County Department of Conservation and Development with data from the Contra Costa County GIS Program. Some base data, primarily City Limits, is derived from the CA State Board of Equalization's tax rate areas. While obligated to use this data the County assumes no responsibility for its accuracy. This map contains copyrighted information and may not be altered. It may be reproduced in its current state if the source is cited. Users of this map agree to read and accept the County of Contra Costa disclaimer of liability for geographic information.

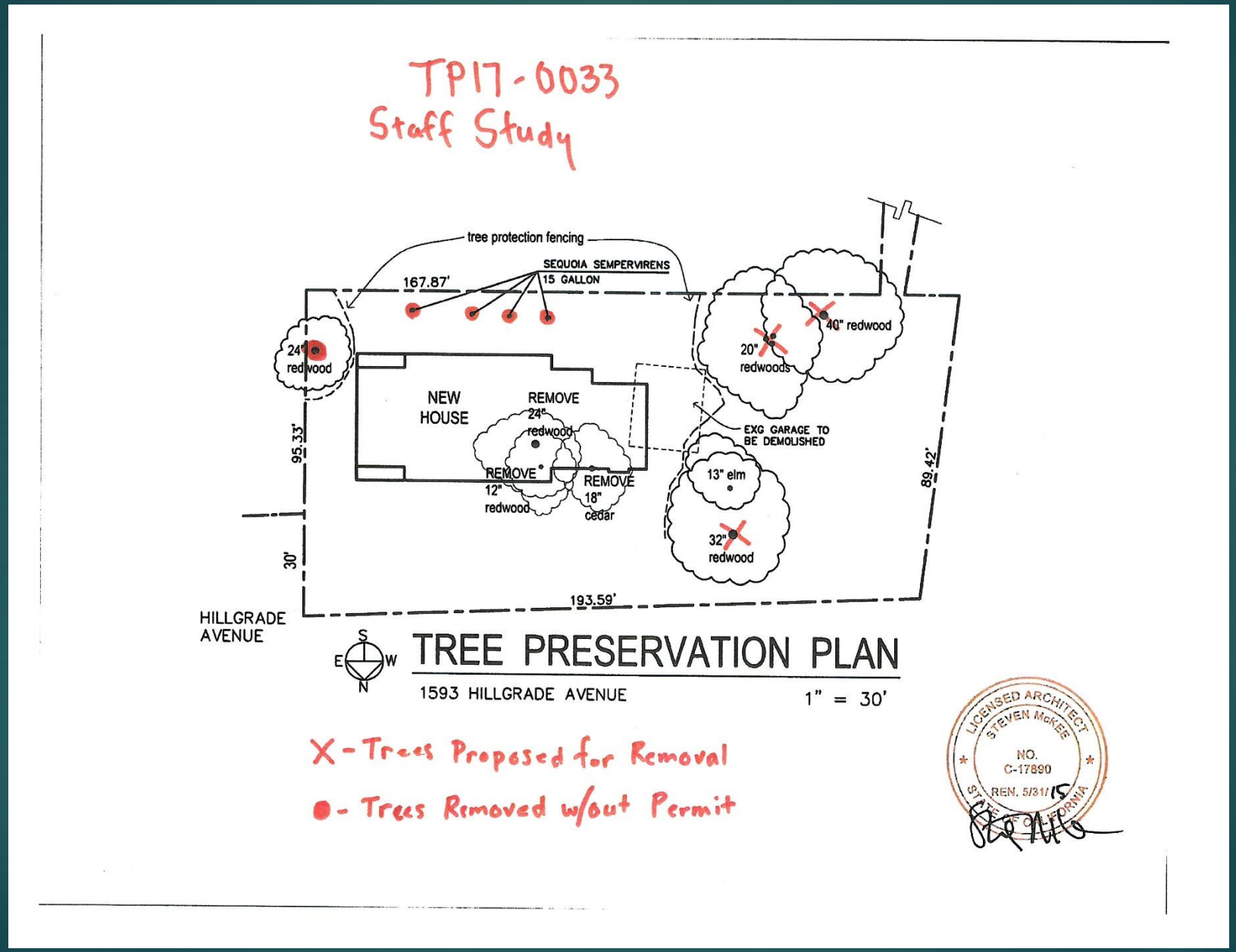
# Background



- A tree permit (#TP14-0008) to remove three code-protected trees and work within the dripline of five additional trees was approved by the Zoning Administrator on September 4, 2014.
- Three 15-gallon trees were required to be planted as restitution for removal of the three protected trees.
- The property owner planted four 15-gallon redwood trees along the southern property line as part of the required restitution and an agreement with a neighboring property owner to plant an additional tree which was included on the final development site plan.
- Per the Tree Protection Ordinance, all of the trees on the property, including the replacement trees, became protected trees.
- One 24-Inch redwood and all four of the 15-gallon redwood trees were removed without approval prior to submittal of the current application to remove three trees.

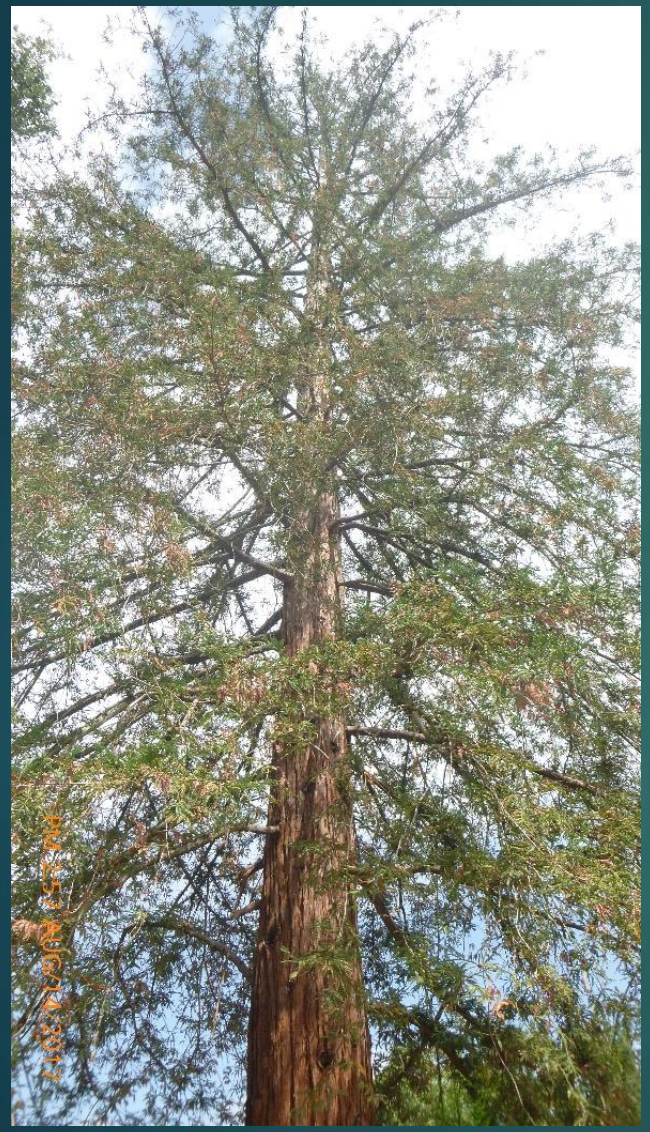
# Tree Removal Site Plan Currently Under Consideration





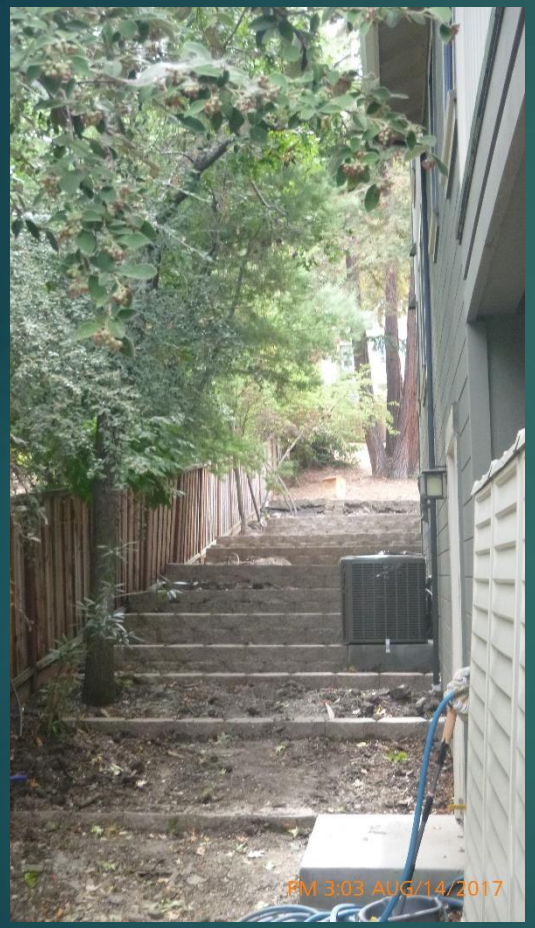
# Trees to be Removed

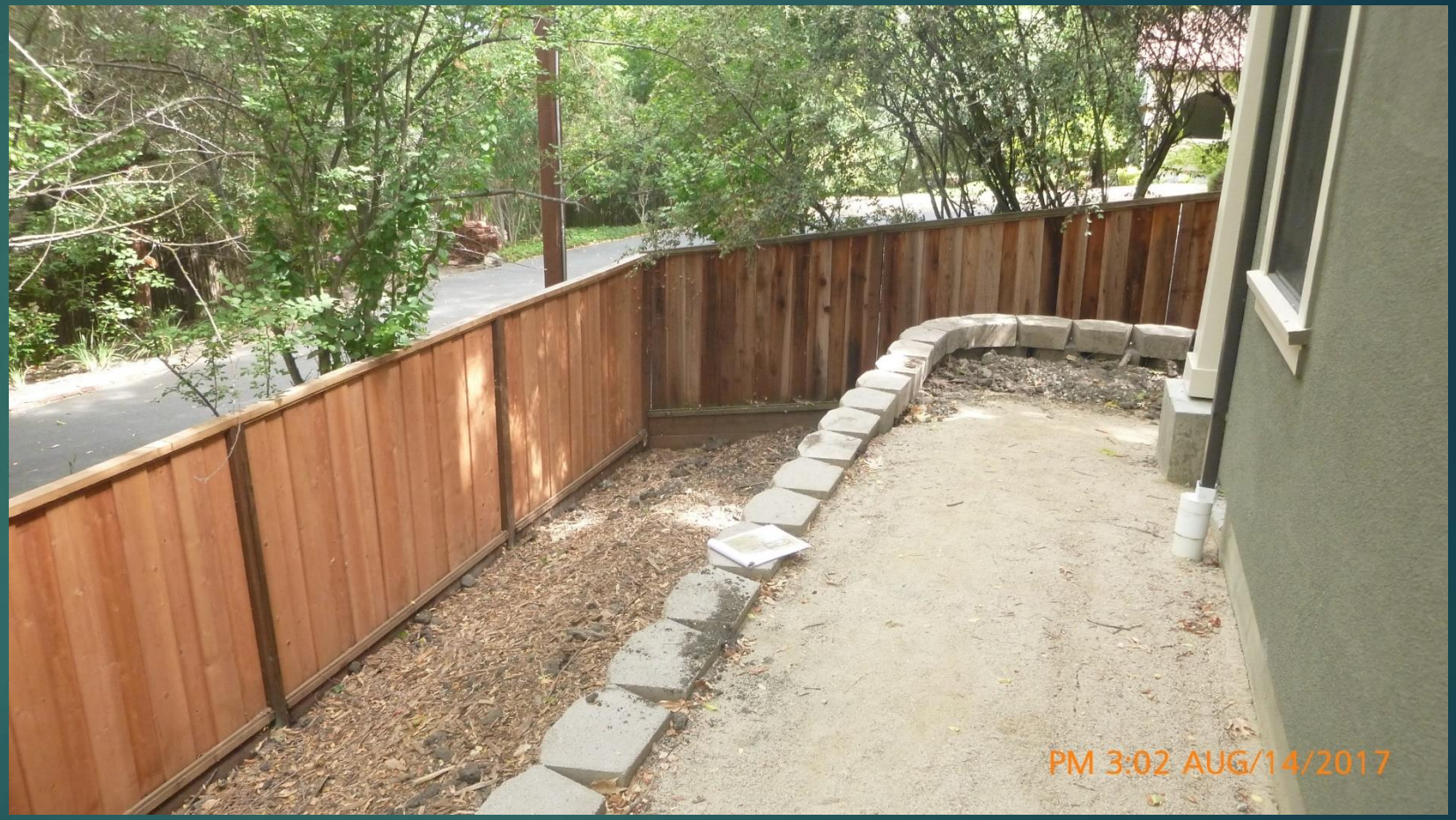




# Location of 5 Trees Removed w/out Approval





# Zoning Administrator's Decision



- Tree permit approved by the Zoning Administrator on September 21, 2017
- Appealed by Gabriel Odell and Bruce Tarter and Sophia and Lomit Patel on October 2, 2017

# County Planning Commission Decision



- Split vote (3-3) by the County Planning Commission on January 24, 2018
- This vote failed to approve the appeal and therefore upheld the Zoning Administrator's original approval of the project
- Appealed by Gabriela Odell and Bruce Tarter on February 5, 2018
- Appealed by Sophia and Lomit Patel on February 5, 2018

# Patel Appeal

- Staff did not apply the Tree Protection Ordinance correctly and did not fully evaluate all of the arborist reports submitted.
- The existing trees are in fair condition.
- The trees currently prevent soil erosion and mudslides.
- The trees fall on the border on the Patel's property line.
- Staff failed to evaluate all arborist reports submitted.
- Staff recommended approval based on the number of reports submitted.
- The tree permit violates the County's Tree Protection Ordinance.

# Odell and Tarter Appeal

- Staff didn't fully evaluate the arborist report submitted by the appellants.
- The existing trees provide protection against erosion and mudslides.
- No protective measures were enacted for trees permitted to be removed previously.
- Staff did not apply the Tree Protection Ordinance correctly.
- Staff relied on flawed information from previous arborist reports.
- Staff failed to evaluate points raised by a second arborist report submitted by the appellants.

# Staff Response to Appeal



- Staff followed the requirements of the Tree Protection Ordinance.
- Staff evaluated all reports submitted and made a recommendation based on the information.
- The applicant is required to replant eight trees on the property including four near the Odell and Tarter property line and two near the Patel property line.

# Questions?

Contra
Costa
County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: Report on soil conditions at the parking lot behind 651 Pine Street

**RECOMMENDATION(S):**
CONSIDER the report on soil conditions at the parking lot behind 651 Pine Street.

**FISCAL IMPACT:**
No fiscal impact.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Eric Angstadt
925.335.1009

**cc:**

BACKGROUND:

As part of the construction of the new parking lot behind 651 Pine Street samples of the soil uncovered once the old asphalt was removed were taken and analyzed. The samples were tested for a wide variety of both naturally occurring substances and potential contaminants. A total of 23 samples were taken from the parking lot area. No tested compounds exceeded the environmental screening levels for a commercial/industrial use. However a small number of samples showed levels of the naturally occurring metals lead and mercury to be above the screening level for residential use but still well below the screening level for a commercial/industrial use.

For lead the San Francisco Bay Regional Water Quality Control Board (SF RWQCB) set an environmental screening level (ESL) for shallow soil (less than 10 feet) direct exposure for residential use at 80 mg (milligrams)/kg (kilograms). For shallow soil commercial/industrial use direct exposure the ESL is 320 mg/kg. Both of these values come from the SF RWQCB Table S-1 in their February 2016 update. Five of the 23 samples (22%) had levels above 80 mg/kg but below 320 mg/kg, the values were 87.1, 94.9,122, 205 and 236 mg/kg. Even the highest reading of 236mg/kg is still more than 25% less than the commercial/industrial ESL.

For mercury the residential ESL is 13 mg/kg and the commercial/industrial ESL is 190 mg/kg. Four of the 23 samples (17%) were between these values, with the exact values being 22.1, 28.1, 34.8 and 40.1 mg/kg. The highest reading of 40.1 mg/kg is almost 80% below the commercial/industrial ESL.

## *Discussion:

The ESL levels set by the SF RWQCB are, in their own words, “intended to be conservative, but reasonable.” All the tested samples are below the conservative screening values for a commercial/industrial use and no further testing or action is required. Testing indicated that the samples with the higher lead and mercury readings came from the top two or three feet of soil. Samples of the deeper soil all had levels well below the residential ESL. This suggests that the soil used as fill when the parking lot was first constructed likely had those metals in it.

The industry standard action is to re-use materials on site if possible. In this case the parking lot use is ideal for re-use as this will not be a residential use. In addition, the site is designated in the City of Martinez General Plan and zoned for civic and governmental uses, not residential use. The soil in the areas with the higher readings will be covered with clean fill and then capped by the new parking lot asphalt surface greatly reducing any chance of direct contact. The contractor is aware of the results of the soil screening so the workers can take the appropriate measures to limit their exposure. The samples were also tested to determine that they are unlikely to percolate into the groundwater further reinforcing that capping in place is the most appropriate treatment.

CONSEQUENCE OF NEGATIVE ACTION:

Removal of the soil with levels above the residential ESL would cost at least $120,000 based on current estimates and significantly delay the parking lot construction.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Execution of CCO #1 for the 2017 On-Call Sweeping Services Contract for Various Road Maintenance Work, Countywide.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract amendment with Statewide Construction Sweeping, Inc., to change the contract completion time from one year to three years, for the period May 2, 2017 to May 2, 2020, with no change to the original payment limit of $200,000, for the 2017 On-Call Sweeping Services Contract for Various Road Maintenance Work, Countywide.

**FISCAL IMPACT:**
The cost is to be funded by 100% Local Road Funds.

**BACKGROUND:**
On May 2, 2017, the County awarded one on-call contract to the lowest responsible bidder, Statewide Construction Sweeping, Inc., to provide sweeping services consisting of sweepers and operators to support road maintenance repairs at different County locations, for a total allotted amount of $200,000, with a completion time of one year from the effective date of May 2, 2017, with the option of two one-year extensions. This contract change amendment is to extend the contract completion date to May 2, 2020.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Public Works Department may be unable to complete routine road maintenance work in a timely manner.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jerome Gonsalves, 925 313-7006

**cc:**

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Execution of CCO #1 for the 2017 On-Call Grinding Services Contract for Various Road Maintenance Work, Countywide.

---

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract amendment with Pavement Coatings Co., to change the contract completion time from one year to three years for the period May 23, 2017 to May 23, 2020, with no change to the original payment limit of $200,000, for the 2017 On-Call Grinding Services Contract(s) for Various Road Maintenance Work, Countywide.

**FISCAL IMPACT:**
The cost is to be funded by 100% Local Road Funds

**BACKGROUND:**
On May 23, 2017 the County awarded one on-call contract to the lowest responsible bidder, Pavement Coatings Co., to provide grinding (asphalt concrete cold-planing) services consisting of grinders and operators to support road maintenance repairs at different County locations, for a total allotted amount of $200,000, with a completion time of one year from the effective date of May 23, 2017, with the option of two one-year extensions. This contract amendment is to extend the contract completion date to May 23, 2020.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Public Works Department may be unable to complete routine road maintenance work in a timely manner.

---

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

---

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jerome Gonsalves, 925 313-7006

**cc:**

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: APPROVE the Marsh Creek Road Traffic Safety Improvements Project and take related actions under CEQA.

**RECOMMENDATION(S):**

APPROVE the Marsh Creek Road Traffic Safety Improvements Project (Project) and AUTHORIZE the Public Works Director, or designee, to advertise the Project, Clayton and Brentwood areas. [County Project No. 0662-6R4012/Federal Proj. No. HSIPL-5928 (130), DCD-CP#17-13] (Districts III, IV).

DETERMINE the Project is a California Environmental Quality Act (CEQA), Class 1(c) Categorical Exemption, pursuant to Article 19, Section 15301(c) of the CEQA Guidelines, and

DIRECT the Director of Department of Conservation and Development to file a Notice of Exemption with the County Clerk, and

AUTHORIZE the Public Works Director or designee to arrange for payment of a $25 fee to the Department of Conservation and Development for processing, and a $50 fee to the County Clerk for filing the Notice of Exemption.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Laura Cremin, (925) 313-2015

By: , Deputy

**cc:** Ave Brown, Environmental Services

FISCAL IMPACT:

Estimated Project cost: $1,600,000. 83% Highway Safety Improvement Program Funds, 17% East County Regional Area of Benefit Funds.

BACKGROUND:

The purpose of this Project is to provide systemic improvements to reduce the number of collisions and improve driver safety along Marsh Creek Road. The Project will install centerline rumble strips, and restripe the centerline throughout the entire Project length of 14 miles between the cities of Clayton and Brentwood. A streetlight and "intersection ahead" signs with flashing beacons will be installed at the intersection of Deer Valley Road and Marsh Creek Road. In addition, existing regulatory and warning signs will be replaced with higher fluorescent sheeting for improved reflectivity and visibility along the winding rural roadway.

CONSEQUENCE OF NEGATIVE ACTION:

Delay in approving the project may result in a delay of design, construction, and may jeopardize funding.

ATTACHMENTS

CEQA document

Contra Costa County

# PUBLIC WORKS DEPARTMENT INITIAL STUDY OF ENVIRONMENTAL SIGNIFICANCE

PROJECT NUMBER: **0662-6R4012**
CP# **17-13**

PROJECT NAME: **Marsh Creek Road Traffic Safety Improvements Project**

PREPARED BY: Laura Cremin LC DATE: April 10, 2018

APPROVED BY: Jean B. Moran DATE: 4/16/2018

## RECOMMENDATIONS:

☒ Categorical Exemption: 15301 [Class 1(c)] ☐ Negative Declaration

☐ Environmental Impact Report Required ☐ Conditional Negative Declaration

**The project will not have a significant effect on the environment. The recommendation is based on the following:** The project consists of maintenance of existing public facilities, involving negligible expansion of use beyond that previously existing, pursuant to section **15301(c)** of the CEQA guidelines.

**What changes to the project would mitigate the identified impacts**: N/A

| USGS Quad Sheet: Clayton, Antioch South, Tassajara, Byron Hot Springs, Brentwood | Base Map Sheet #: M-19, M-20, N-20, N-22, P-20, P-21, P-22, P-23, P-25, Q-23, Q-24, Q-25 | Parcel #: N/A |
|---|---|---|

## GENERAL CONSIDERATIONS:

1. **Location:** The project is located along approximately 14 miles of Marsh Creek Road between the cities of Clayton and Brentwood [Figures 1-2].

2. **Project Description:** The purpose of this Project is to improve driver safety along Marsh Creek Road. The Project consists of installing rumble strips and restriping at the centerline. The centerline rumble strips will provide an audible warning and vibratory response to keep drivers within their respective travel lanes. In order to install the centerline rumble strips, the project will grind a very shallow, narrow portion of the existing roadway. The grinding operations will not exceed the bottom of the existing roadway base section and therefore, native soil will not be disturbed. No pavement widening is proposed for this project. The Project will maintain the existing drainage pattern and appropriate Best Management Practices (BMPs) will be implemented.

   Street lighting and "intersection ahead" signs with flashing beacons will also be installed at the intersection of Deer Valley Road and Marsh Creek Road. These improvements will assist drivers to anticipate the intersection in day and night conditions in order to reduce the number of improper turning movements onto Deer Valley Road from Marsh Creek Road. The new street light will be mounted on a wooden pole, driven directly into the ground at a maximum depth of 10 feet, located approximately 5 feet from the fog line on the south side of the intersection along the eastbound lane of Marsh Creek Road. A new Pacific Gas & Electric (PG&E) meter may be needed. Approximately 4 joint utility poles along Deer Valley Road that will bring power via overhead lines to the new street light may need to be relocated. The embedded depth for the new pole locations will be approximately 10 feet. The flashing beacons on the "intersection ahead" signs will be solar-powered so no overhead power lines or trenched conduits are required. In addition, existing regulatory and warning signs will be replaced with higher fluorescent sheeting for improved reflectivity and visibility along the winding rural roadway. The embedded depth for the "intersection ahead" post foundation will be approximately 6.5'. Existing roadside signs may need to be removed in order to replace their posts and may be relocated to improve visibility.

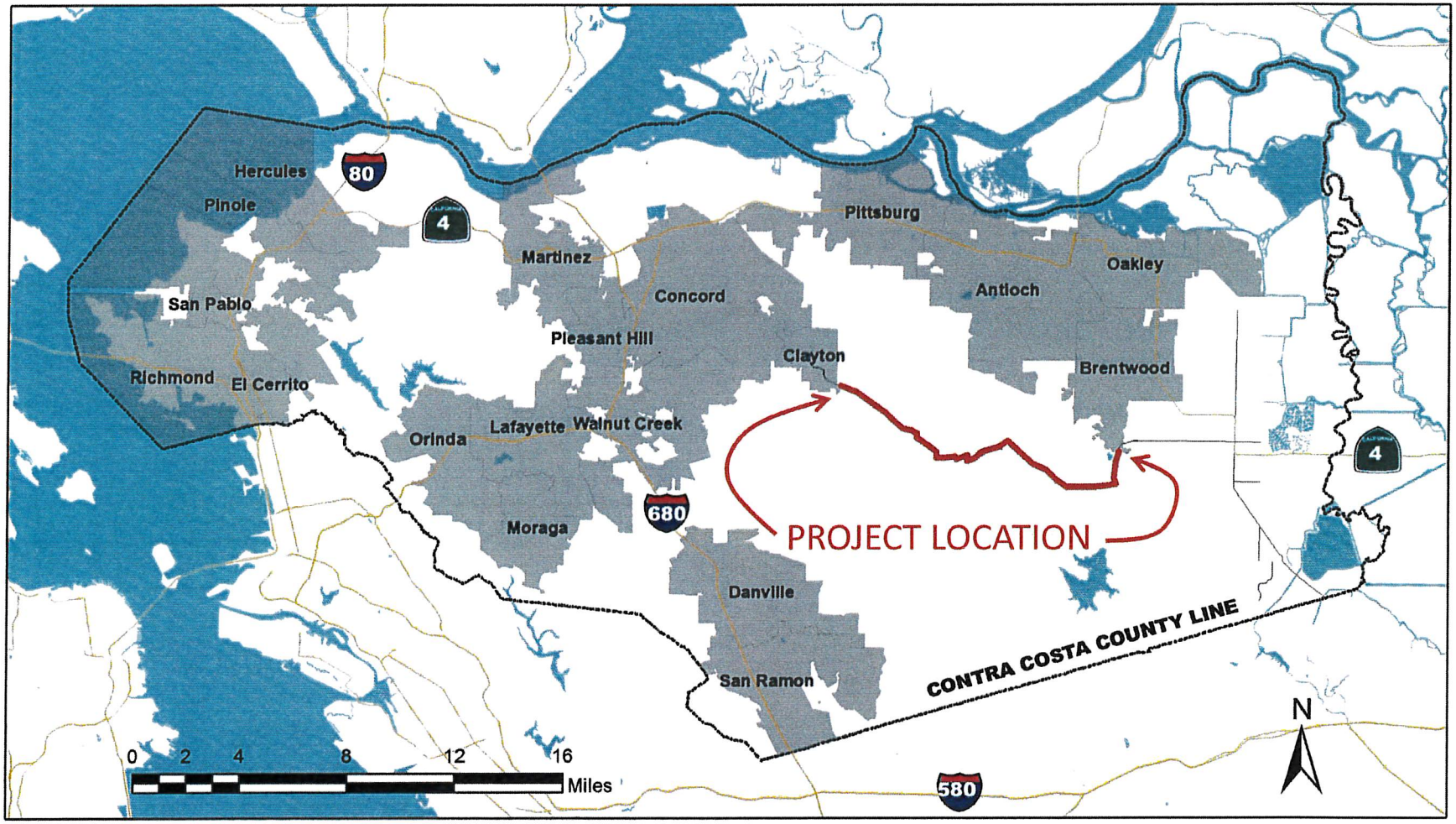
   Utility adjustments or relocation may be necessary in support of the project. The installation of the PG&E meter may require a concrete pad, pedestal, and additional site preparation.

   Although no permanent right-of-way is required, temporary construction easements may be necessary. Traffic impacts (lane closures and traffic control) will be localized to the grinding operations for rumble strips, painting operations for centerline restriping, and sign replacement operations. A lane closure will likely occur at the intersection of Deer Valley Road and Marsh Creek Road to install the flashers and street light. One lane will be open during construction activities. Emergency vehicles will have access at all times. Tree removal is not expected. Vegetation removal and grubbing will occur only where the signs will be installed at the intersection.

3. **Does it appear that any feature of the project will generate significant public concern?**
   ☐ Yes ☒ **No** ☐ maybe (Nature of concern):

4. **Will the project require approval or permits by other than a County agency?**
   ☐ Yes ☒ **No**

5. **Is the project within the Sphere of Influence of any city?** Clayton and Brentwood




Contra Costa County
Public Works
Department

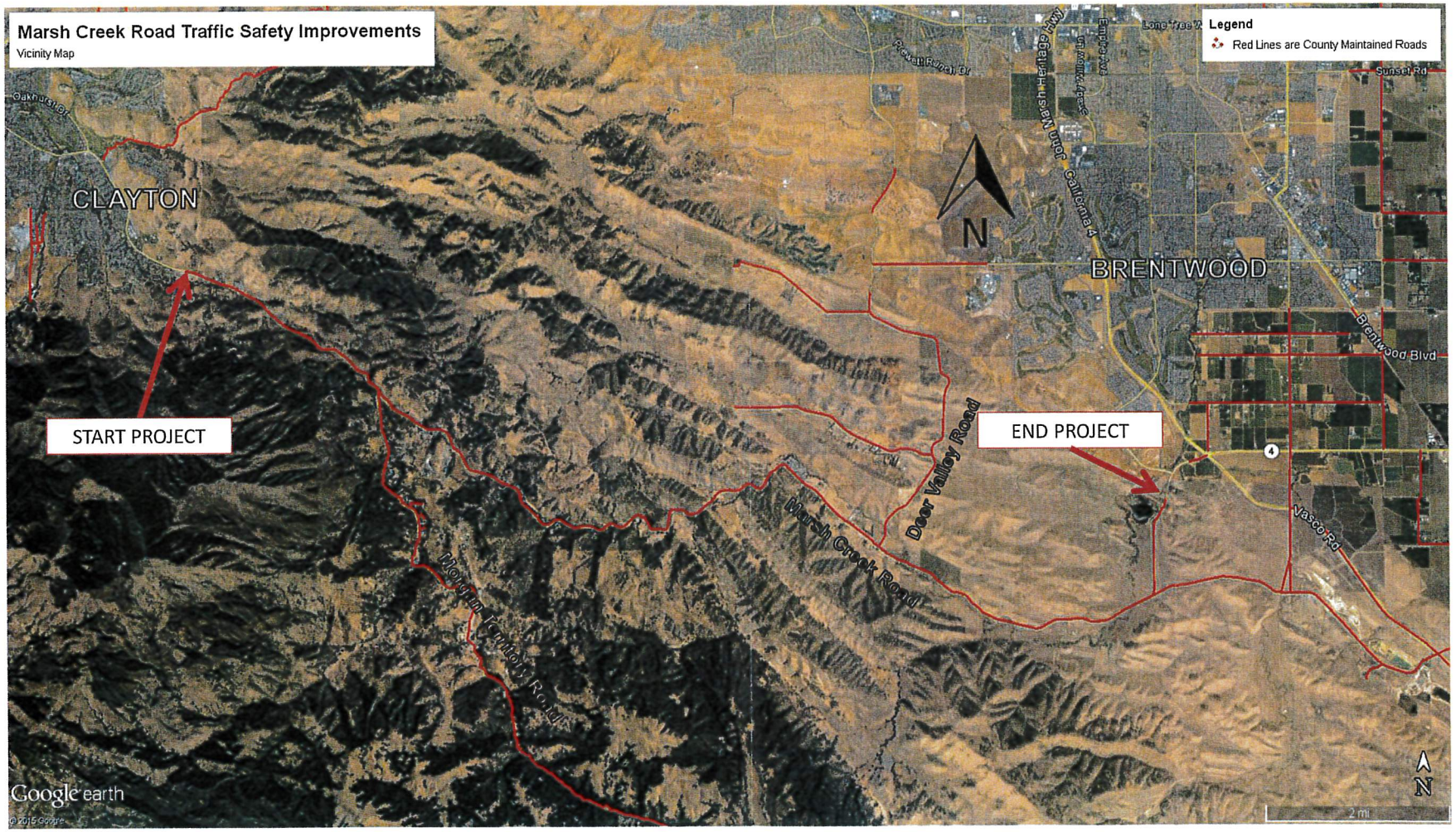
255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925-313-2333

LOCATION MAP

**MARSH CREEK ROAD**
**TRAFFIC SAFETY IMPROVEMENTS**

| FEDERAL ID NO: | DB: LL CB: | DATE: JULY 2015 | Page 1 of 1 |
|---|---|---|---|

Figure 1




Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

| VICINITY MAP | | | |
|---|---|---|---|
| MARSH CREEK ROAD<br>TRAFFIC SAFETY IMPROVEMENTS | | | |
| DB: LL | CB: AV | DATE: JAN2016 | Sht 1 of 1 |

Figure 2

CALIFORNIA ENVIRONMENTAL QUALITY ACT

# Notice of Exemption

**To:** ☐ Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044

☒ County Clerk
County of: Contra Costa

**From:** Contra Costa County
Dept. of Conservation & Development
30 Muir Road
Martinez, CA 94553

Project Title: **Marsh Creek Road Traffic Safety Improvements Project**
**Proj. No. 0662-6R4012 CP#17-13**

Project Applicant: **Contra Costa County Public Works Department**

Project Location – **Specific** 14 mile segment of Marsh Creek Road

Project Location: Between the cities of Clayton and Brentwood Project Location – County: **East Contra Costa**

**Description of Nature, Purpose and Beneficiaries of Project**: The purpose of this Project is to improve driver safety along Marsh Creek Road. The Project consists of installing rumble strips and restriping at the centerline. The centerline rumble strips will provide an audible warning and vibratory response to keep drivers within their respective travel lanes. In order to install the centerline rumble strips, the project will grind a very shallow, narrow portion of the existing roadway. The grinding operations will not exceed the bottom of the existing roadway base section and therefore, native soil will not be disturbed. No pavement widening is proposed for this project. The Project will maintain the existing drainage pattern and appropriate Best Management Practices (BMPs) will be implemented.

Street lighting and "intersection ahead" signs with flashing beacons will also be installed at the intersection of Deer Valley Road and Marsh Creek Road. These improvements will assist drivers to anticipate the intersection in day and night conditions in order to reduce the number of improper turning movements onto Deer Valley Road from Marsh Creek Road. The new street light will be mounted on a wooden pole, driven directly into the ground at a maximum depth of 10 feet, located approximately 5 feet from the fog line on the south side of the intersection along the eastbound lane of Marsh Creek Road. A new Pacific Gas & Electric (PG&E) meter may be needed. Approximately 4 joint utility poles along Deer Valley Road that will bring power via overhead lines to the new street light may need to be relocated. The embedded depth for the new pole locations will be approximately 10 feet. The flashing beacons on the "intersection ahead" signs will be solar-powered so no overhead power lines or trenched conduits are required. In addition, existing regulatory and warning signs will be replaced with higher fluorescent sheeting for improved reflectivity and visibility along the winding rural roadway. The embedded depth for the "intersection ahead" post foundation will be approximately 6.5'. Existing roadside signs may need to be removed in order to replace their posts and may be relocated to improve visibility.

Utility adjustments or relocation may be necessary in support of the project. The installation of the PG&E meter may require a concrete pad, pedestal, and additional site preparation.

Although no permanent right-of-way is required, temporary construction easements may be necessary. Traffic impacts (lane closures and traffic control) will be localized to the grinding operations for rumble strips, painting operations for centerline restriping, and sign replacement operations. A lane closure will likely occur at the intersection of Deer Valley Road and Marsh Creek Road to install the flashers and street light. One lane will be open during construction activities. Emergency vehicles will have access at all times. Tree removal is not expected. Vegetation removal and grubbing will occur only where the signs will be installed at the intersection.

Name of Public Agency Approving Project: **Contra Costa County**

Name of Person or Agency Carrying Out Project: **Contra Costa County Public Works Department**

**Exempt Status**:

☐ Ministerial Project (Sec. 21080(b) (1); 15268;
☐ Declared Emergency (Sec. 21080(b)(3); 15269(a));
☐ Emergency Project (Sec. 21080(b)(4); 15269(b)(c));
☒ Categorical Exemption: 15301 Class 1(c )
☐ Other Statutory Exemption, Code No.:_____
☐ General Rule of Applicability [Article 5, Section 15061 (b)(3)]

**Reasons why project is exempt:** The project consists of maintenance of existing public facilities, involving negligible expansion of use beyond that previously existing, pursuant to Section 15301(c) of the CEQA guidelines.

Lead Agency Contact Person: **Laura Cremin - Public Works Dept.** Area Code/Telephone/Extension: **(925) 313-2015**

If filed by applicant:

1. Attach certified document of exemption finding.
2. Has a Notice of Exemption been filed by the public agency approving the project? ☐ Yes ☐ No

Signature: _____ Date: _____ Title: _____

☐ Signed by Lead Agency ☐ Signed by Applicant

**AFFIDAVIT OF FILING AND POSTING**

I declare that on _____ I received and posted this notice as required by California Public Resources Code Section 21152(c). Said notice will remain posted for 30 days from the filing date.

_____ _____
Signature Title

**Applicant:**
Public Works Department
255 Glacier Drive
Martinez, CA 94553
**Attn: Laura Cremin**
**Environmental Services Division**
**Phone: (925) 313-2015**

**Department of Fish and Game Fees Due**
☐ EIR - $3,168.00
☐ Neg. Dec. - $2,280.75
☐ DeMinimis Findings - $0
☒ **County Clerk - $50**
☒ **Conservation & Development - $25**

**Total Due: $75.00**
Total Paid $ _____
Receipt #: _____

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: APPROVE the Contra Costa County Local Streets and Road Preservation Project and take related actions under CEQA.

**RECOMMENDATION(S):**

APPROVE the Contra Costa County Local Streets and Road Preservation Project (Project) and AUTHORIZE the Public Works Director, or designee, to advertise the Project, portions of Unincorporated El Portal Drive and San Pablo Dam Road (East County), and portions of Unincorporated Vasco Road (West County) areas. [County Project No. 0662-6R4138/Federal Proj. No. STPL 5928(148), DCD-CP#17-48] (Districts I, III).

DETERMINE the Project is a California Environmental Quality Act (CEQA), Class 1(c) Categorical Exemption, pursuant to Article 19, Section 15301 of the CEQA Guidelines, and

DIRECT the Director of Department of Conservation and Development to file a Notice of Exemption with the County Clerk, and

AUTHORIZE the Public Works Director or designee to arrange for payment of a $25 fee to the Department of Conservation and Development for processing, and a $50 fee to the County Clerk for filing the Notice of Exemption.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Laura Cremin, (925) 313-2015

By: , Deputy

**cc:** Ave Brown, Environmental Services

FISCAL IMPACT:

Estimated Project cost: $5,772,000. 75% One Bay Area Grant – Local Streets and Roads Preservation (OBAG-LSRP), 25% Gas Tax Funds.

BACKGROUND:

The purpose of this Project is to conduct pavement preservation on portions of El Portal Drive, San Pablo Dam Road, and Vasco Road. These roads represent approximately 10.8 miles of arterials in Contra Costa County. Preventative maintenance and pavement rehabilitation will prevent further deterioration of the roadway and improve the current pavement condition index (PCI). The project consists of grinding of existing pavement, base failure repairs, pavement failure repairs, pavement preparation, utility adjustments, drainage adjustments, replacement of pavement markings and pavement striping, and replacement of traffic signal loops.

CONSEQUENCE OF NEGATIVE ACTION:

Delay in approving the project may result in a delay of design, construction, and may jeopardize funding.

ATTACHMENTS

CEQA document

Contra Costa County

# PUBLIC WORKS DEPARTMENT INITIAL STUDY OF ENVIRONMENTAL SIGNIFICANCE

PROJECT NUMBER: **0662-6R4138**
CP# **17-48**

PROJECT NAME: **Contra Costa County Local Streets and Road Preservation**

PREPARED BY: Laura Cremin LC DATE: March 6, 2018

APPROVED BY: [signature] DATE: 3-14-18

## RECOMMENDATIONS:

☒ Categorical Exemption: 15301 [Class 1(c)] ☐ Negative Declaration

☐ Environmental Impact Report Required ☐ Conditional Negative Declaration

**The project will not have a significant effect on the environment. The recommendation is based on the following:** The project consists of the maintenance of existing facilities involving no expansion of use, pursuant to section 15301(c) of the CEQA guidelines.

**What changes to the project would mitigate the identified impacts**: N/A

| | | |
|---|---|---|
| **USGS Quad Sheet: Richmond, Byron Hot Springs** | **Base Map Sheet #: J-6, J-7, K-7; S-27, T-27, T-26, U-26, V-26, V-25** | **Parcel #: N/A** |

**GENERAL CONSIDERATIONS**:

1. **Location:** The Project is located at two sites in unincorporated Contra Costa County (Fig. 1).
   - **Site 1:** East Contra Costa County
     - **El Portal Drive** (Fig. 2), A 230' segment that is contiguous with San Pablo Dam Road.
     - **San Pablo Dam Road** (Fig. 3), Segment between El Portal Drive and the Richmond city limit near Tri Lane.
   - **Site 2:** West Contra Costa County
     - **Vasco Road** (Fig. 4), Segment between Frisk Creek Bridge and the Alameda County line.

2. **Project Description:** The purpose of this Project is to conduct pavement preservation on portions of El Portal Drive, San Pablo Dam Road, and Vasco Road. These roads represent approximately 10.8 miles of arterials in Contra Costa County. Preventative maintenance and pavement rehabilitation will prevent further deterioration of the roadway and improve the current pavement condition index (PCI).

   The project consists of grinding of existing pavement, base failure repairs, pavement failure repairs, pavement preparation, utility adjustments, drainage adjustments, replacement of pavement markings and pavement striping, and replacement of traffic signal loops.
   Work at each location will include:

   El Portal Drive and San Pablo Dam Road: Pavement rehabilitation on both roads will consist of 0.17" grind and overlay with hot mix asphalt. Two existing curb ramps will be updated to meet current ADA standards.
   The segment of El Portal Drive is maintained by Contra Costa County and consists of a two-lane road with left turn pockets. San Pablo Dam Road is an arterial that is mostly four-lanes through downtown El Sobrante and narrows down to two-lanes east of Castro Ranch Road. Average daily traffic (ADT) varies from 14,000 (east of Appian Way) to 26,000 vehicles in the downtown area.
   Vasco Road: Preventative maintenance consists of a microsurface treatment to the existing travel lanes and a fog seal on the shoulders. Vasco Road is a high-speed, two-lane arterial between East Contra Costa County and Alameda County. The ADT is 24,000 vehicles per day.

   No tree or vegetation removal will be necessary. The Project will maintain the existing drainage pattern and will not create new impervious areas. Appropriate Best Management Practices (BMPs) will be implemented to protect storm drain inlets.
   Utility adjustments or relocation may be necessary in support of the project. Temporary traffic control will be required during construction, but advance warning of the project construction schedule will be provided, and property access will be provided. Emergency vehicles will have access at all times. Real Property transactions may be necessary in support of this project for temporary construction easements for staging areas.

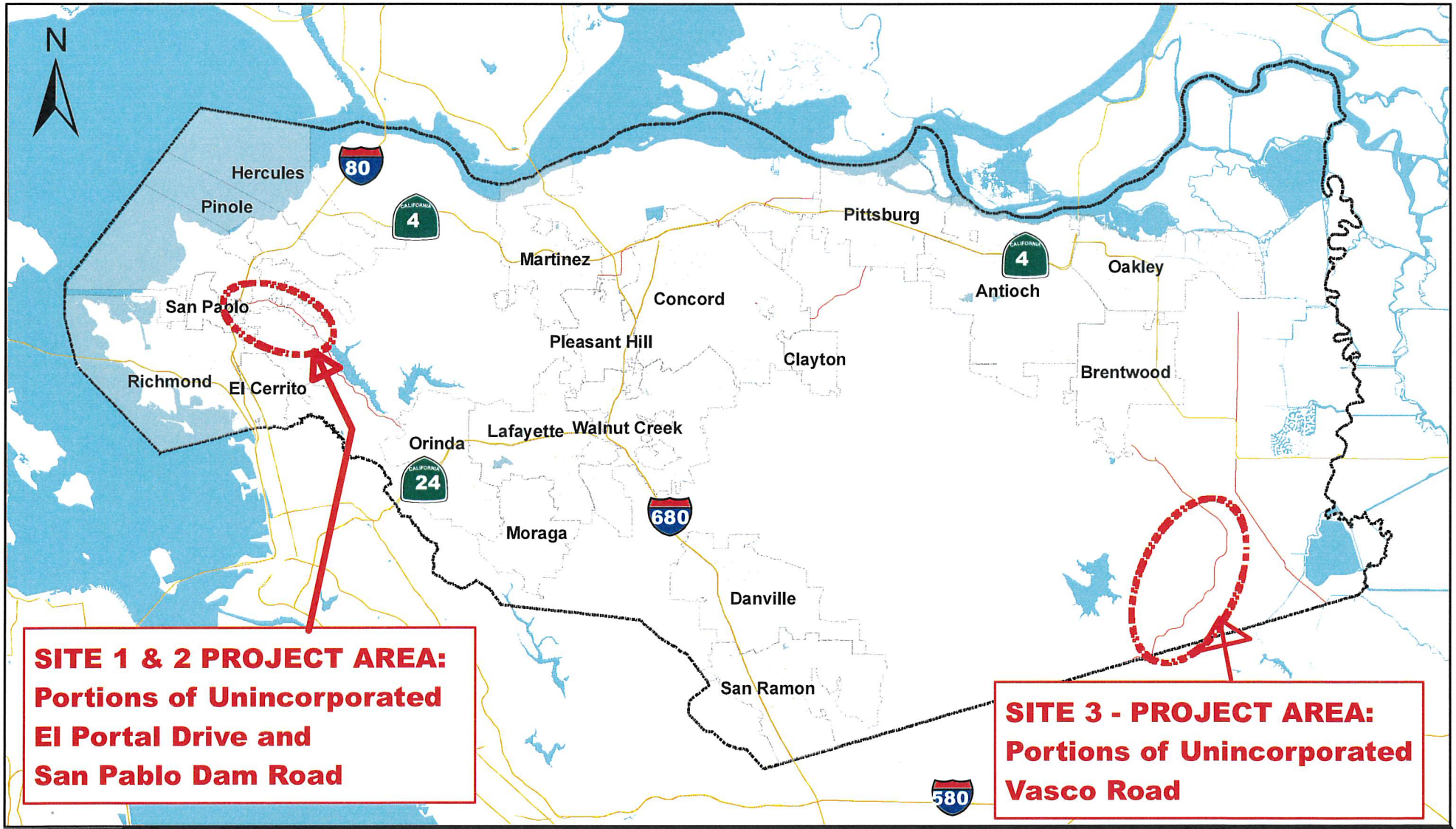
Although Vasco Road is within the East Contra Costa County Habitat Conservation Plan (HCP) Service Area, all work will occur within existing paved roadways classified by the HCP as "urban" Land Cover Type. This Land Cover Type is not subject to HCP conditions or fees. Any staging will be conducted on paved or gravel areas.

General Plan Conformance may be necessary from the City of Richmond.

3. **Does it appear that any feature of the project will generate significant public concern?**
   ☐ Yes ☒ **No** ☐ maybe (Nature of concern):

4. **Will the project require approval or permits by other than a County agency?**
   ☐ Yes ☒ **No**

5. **Is the project within the Sphere of Influence of any city?** Yes, the City of Richmond




Contra Costa County
Public Works
Department

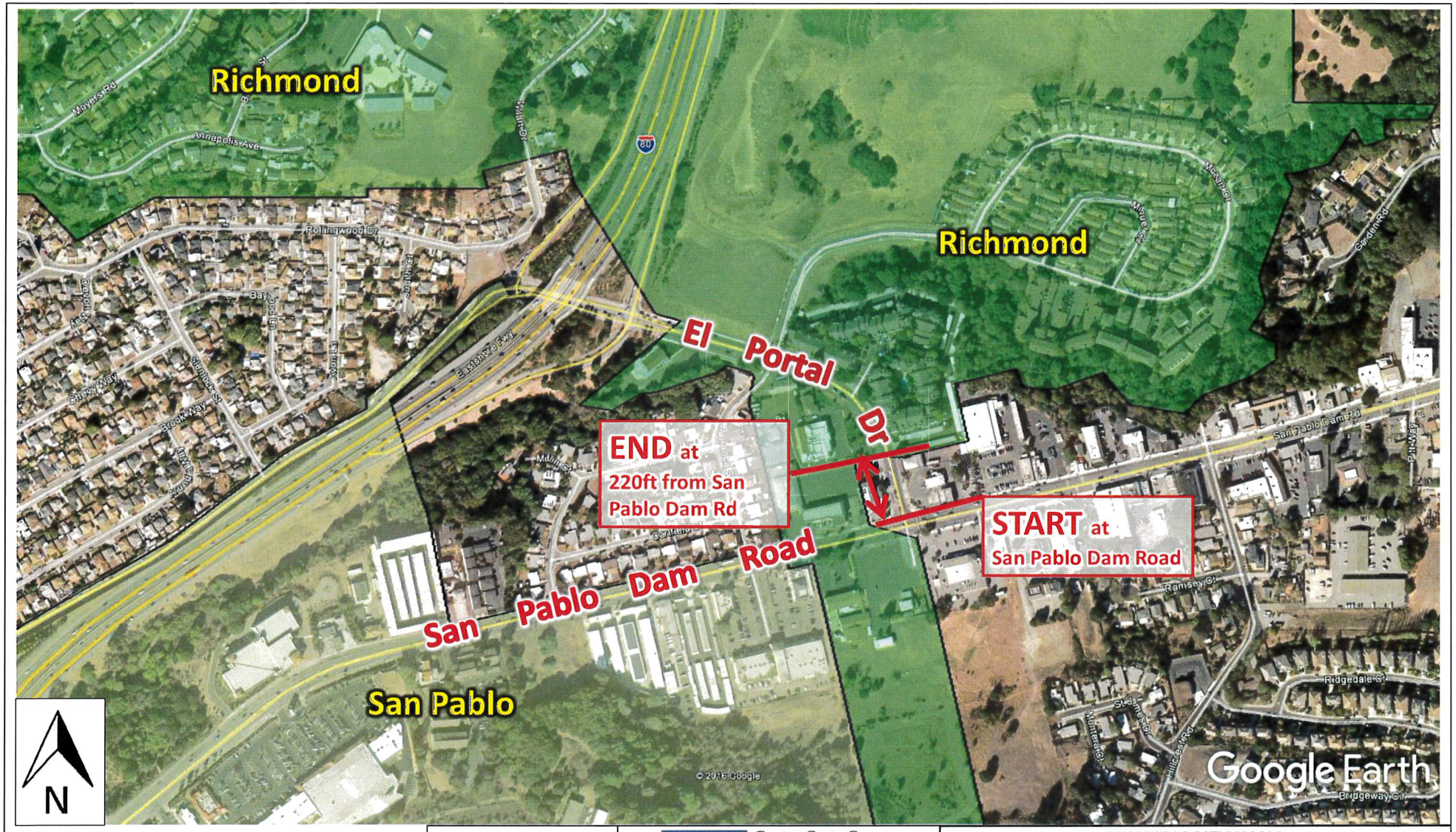
255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925-313-2333

VICINITY MAP OF CONTRA COSTA COUNTY

**Contra Costa County**
**Local Streets and Roads Preservation Project**

| FEDERAL ID NO: | DB: LL CB: | DATE: DEC 2016 | Page 1 of 1 |
|---|---|---|---|

Figure 1




Contra Costa County
Public Works
Department

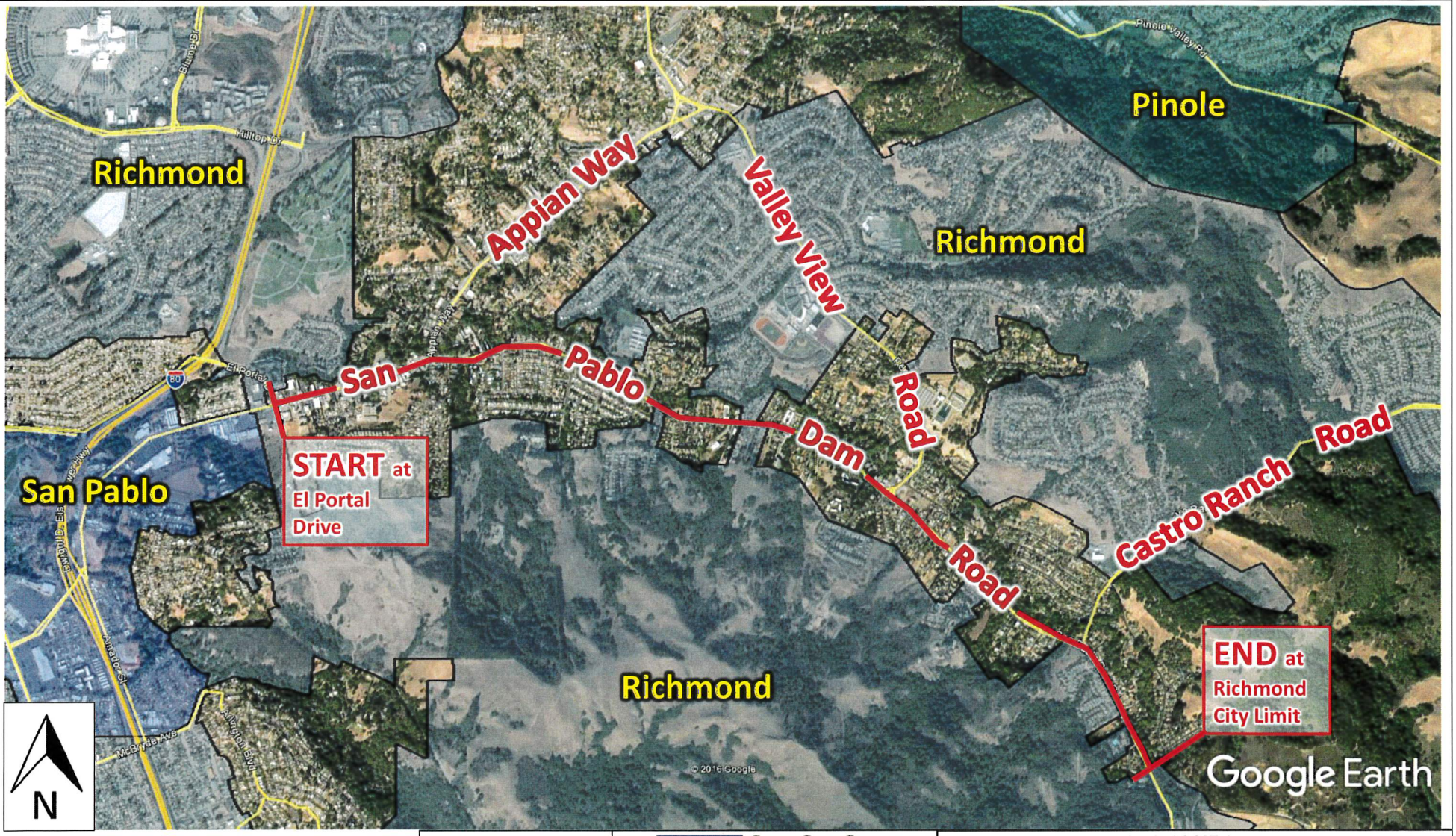
255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

**PROJECT LOCATION MAP**

**Contra Costa County Local Streets and Roads Preservation Project**

**El Portal Drive** Figure 2

| DB: LL | CB: | DATE: MAUYDEC 2016 | Sht 2 of 3 |
|---|---|---|---|

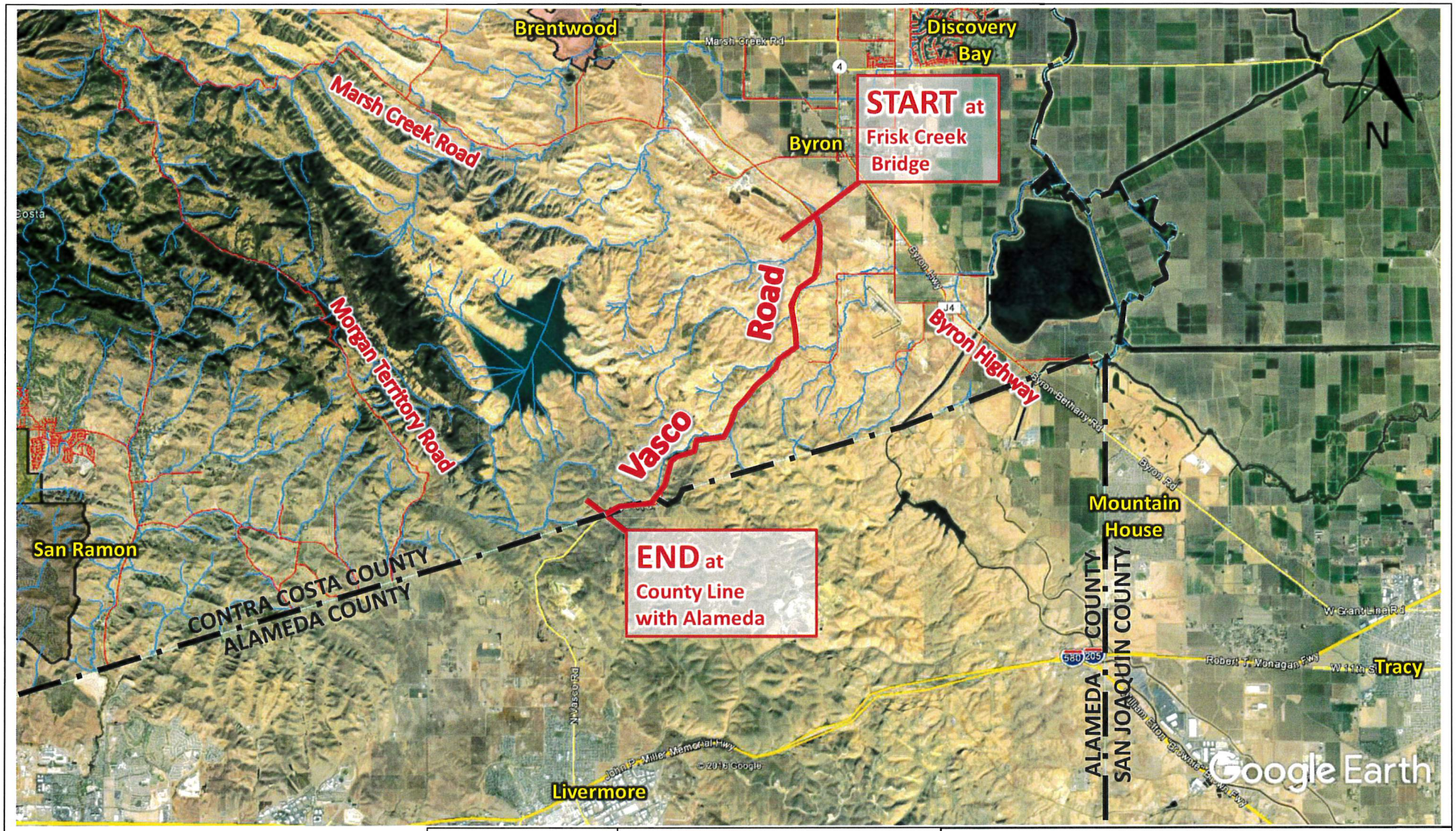



Contra Costa County
Public Works
Department
255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

**PROJECT LOCATION MAP**

**Contra Costa County Local Streets and Roads Preservation Project**
**San Pablo Dam Road** Figure 3

| DB: LL | CB: | DATE: MAY 2017 | Sht 1 of 3 |
|---|---|---|---|




Contra Costa County
Public Works
Department

255 GLACIER DRIVE MARTINEZ, CALIFORNIA 94553 PH: (925) 313-2000 FAX: (925) 313-2333

**PROJECT LOCATION MAP**

**Contra Costa County Local Streets and Roads Preservation Project**

**Vasco Road** Figure 4

| DB: LL | CB: | DATE: MAY 2017 | Sht 3 of 3 |
|---|---|---|---|

CALIFORNIA ENVIRONMENTAL QUALITY ACT

# Notice of Exemption

**To:** ☐ Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044

☒ County Clerk
County of: Contra Costa

**From:** Contra Costa County
Dept. of Conservation & Development
30 Muir Road
Martinez, CA 94553

Project Title: **Contra Costa County Local Streets and Road Preservation**
**Proj. No. 0662-6R4138 CP# 17-48**

Project Applicant: **Contra Costa County Public Works Department**
Project Location – **Specific**: El Sobrante, unincorporated south-east Contra Costa County
Project Location: Unincorporated Countywide areas Project Location – County: **Contra Costa County (County)**

**Description of Nature, Purpose and Beneficiaries of Project**: The purpose of this Project is to conduct pavement preservation on portions of El Portal Drive, San Pablo Dam Road, and Vasco Road (Figures 1 -4). These roads represent approximately 10.8 miles of arterials in Contra Costa County. Preventative maintenance and pavement rehabilitation will prevent further deterioration of the roadway and improve the current pavement condition index (PCI).

The project consists of grinding of existing pavement, base failure repairs, pavement failure repairs, pavement preparation, utility adjustments, drainage adjustments, replacement of pavement markings and pavement striping, and replacement of traffic signal loops.

Work at each location will include:

El Portal Drive and San Pablo Dam Road: Pavement rehabilitation on both roads will consist of 0.17" grind and overlay with hot mix asphalt. Two existing curb ramps will be updated to meet current ADA standards.
The segment of El Portal Drive is maintained by Contra Costa County and consists of a two-lane road with left turn pockets. San Pablo Dam Road is an arterial that is mostly four-lanes through downtown El Sobrante and narrows down to two-lanes east of Castro Ranch Road. Average daily traffic (ADT) varies from 14,000 (east of Appian Way) to 26,000 vehicles in the downtown area.
Vasco Road: Preventative maintenance consists of a microsurface treatment to the existing travel lanes and a fog seal on the shoulders. Vasco Road is a high-speed, two-lane arterial between East Contra Costa County and Alameda County. The ADT is 24,000 vehicles per day.

No tree or vegetation removal will be necessary. The Project will maintain the existing drainage pattern and will not create new impervious areas. Appropriate Best Management Practices (BMPs) will be implemented to protect storm drain inlets.
Utility adjustments or relocation may be necessary in support of the project. Temporary traffic control will be required during construction, but advance warning of the project construction schedule will be provided, and property access will be provided. Emergency vehicles will have access at all times. Real Property transactions may be necessary in support of this project for temporary construction easements for staging areas.

Although Vasco Road is within the East Contra Costa County Habitat Conservation Plan (HCP) Service Area, all work will occur within existing paved roadways classified by the HCP as "urban" Land Cover Type. This Land Cover Type is not subject to HCP conditions or fees. Any staging will be conducted on paved or gravel areas. General Plan Conformance may be necessary from the City of Richmond.

Name of Public Agency Approving Project: **Contra Costa County**
Name of Person or Agency Carrying Out Project: **Contra Costa County Public Works Department**

**Exempt Status**:

☐ Ministerial Project (Sec. 21080(b) (1); 15268;
☐ Declared Emergency (Sec. 21080(b)(3); 15269(a));
☐ Emergency Project (Sec. 21080(b)(4); 15269(b)(c));
☒ Categorical Exemption: 15301 Class 1(c)
☐ Other Statutory Exemption, Code No.:_____
☐ General Rule of Applicability [Article 5, Section 15061 (b)(3)]

**Reasons why project is exempt:** The project consists of the maintenance of existing facilities involving no expansion of use, pursuant to Section 15301(c) of the CEQA guidelines.

Lead Agency Contact Person: **Laura Cremin - Public Works Dept.** Area Code/Telephone/Extension: **(925) 313-2015**

If filed by applicant:

1. Attach certified document of exemption finding.
2. Has a Notice of Exemption been filed by the public agency approving the project? ☐ Yes ☐ No

Signature: _____ Date: _____ Title: _____

☐ Signed by Lead Agency ☐ Signed by Applicant

**AFFIDAVIT OF FILING AND POSTING**

I declare that on _____ I received and posted this notice as required by California Public Resources Code Section 21152(c). Said notice will remain posted for 30 days from the filing date.

_____ _____
Signature Title

**Applicant:**
Public Works Department
255 Glacier Drive
Martinez, CA 94553
**Attn: Laura Cremin**
**Environmental Services Division**
**Phone: 925-313-2015**

**Department of Fish and Game Fees Due**
☐ EIR - $3,168.00
☐ Neg. Dec. - $2,280.75
☐ DeMinimis Findings - $0
☒ **County Clerk - $50**
☒ **Conservation & Development - $25**

**Total Due: $75.00**
Total Paid $ _____
Receipt #: _____

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Form Revised: Dec. 20, 2017

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Construction Contract for the Morgan Territory Road Bridges 4.30 and 4.40 Project, Clayton area

**RECOMMENDATION(S):**

(1) APPROVE plans, specifications, and design for the Morgan Territory Road Bridges 4.30 and 4.40. (Project No.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Kevin Emigh, 925-313-2233

By: , Deputy

**cc:**

RECOMMENDATION(S): (CONT'D)
0662-6U4145) (District III)

(2) DETERMINE that Pacific Infrastructure Construction, LLC, the lowest monetary bidder, submitted a non-responsive bid by failing to comply with the requirements of the County's Outreach Program for this project, as provided in the project specifications; and REJECT the bid on that basis.

(3) DETERMINE that Hess Concrete Construction Co., Inc. ("Hess"), the second lowest monetary bidder, has complied with the requirements of the County's Outreach Program and has exceeded the Mandatory Subcontracting Minimum for this project, as provided in the project specifications; and FURTHER DETERMINE that Hess has submitted the lowest responsive and responsible bid for the project.

(4) AWARD the construction contract for the above project to Hess in the total amount ($515,910.00) and the unit prices submitted in the bid, and DIRECT that Hess shall present two good and sufficient surety bonds, as indicated below, and that the Public Works Director, or designee, shall prepare the contract.

(5) ORDER that, after the contractor has signed the contract and returned it, together with the bonds as noted below and any required certificates of insurance or other required documents, and the Public Works Director has reviewed and found them to be sufficient, the Public Works Director, or designee, is authorized to sign the contract for this Board.

(6) ORDER that, in accordance with the project specifications and/or upon signature of the contract by the Public Works Director, or designee, any bid bonds posted by the bidders are to be exonerated and any checks or cash submitted for security shall be returned.

(7) ORDER that, the Public Works Director, or designee, is authorized to sign any escrow agreements prepared for this project to permit the direct payment of retentions into escrow or the substitution of securities for moneys withheld by the County to ensure performance under the contract, pursuant to Public Contract Code Section 22300.

(8) DELEGATE, pursuant to Public Contract Code Section 4114, to the Public Works Director, or designee, the Board's functions under Public Contract Code Sections 4107 and 4110.

(9) DELEGATE, pursuant to Labor Code Section 6705, to the Public Works Director or to any registered civil or structural engineer employed by the County the authority to accept detailed plans showing the design of shoring, bracing, sloping, or other provisions to be made for worker protection during trench excavation covered by that section.

(10) DECLARE that, should the award of the contract to Hess be invalidated for any reason, the Board would not in any event have awarded the contract to any other bidder, but instead would have exercised its discretion to reject all of the bids received. Nothing in this Board Order shall prevent the Board from re-awarding the contract to another bidder in cases where the successful bidder establishes a mistake, refuses to sign the contract, or fails to furnish required bonds or insurance (see Public Contract Code Sections 5100-5107).

FISCAL IMPACT:
The construction contract and associated fees of this project will be funded by 100% Local Road Funds.

BACKGROUND:

The above project was previously approved by the Board of Supervisors, plans and specifications were filed with the Board, and bids were invited by the Public Works Director. On April 17, 2018, the Public Works Department received bids from the following contractors:

BIDDER, TOTAL AMOUNT, BOND AMOUNTS

Pacific Infrastructure Construction, LLC, $385,494.00

Hess Concrete Construction Co., Inc., $515,910.00; Payment: $515,910.00; Performance: $515,910.00

Valentine Corporation, $623,369.00

Granite Rock Company, $684,165.00

The Public Works Director has determined that the low bidder, Pacific Infrastructure Construction, LLC, submitted a non-responsive bid by failing to document an adequate good faith effort to comply with the requirements of the County's Outreach Program for this project, as provided in the project specifications, and the Public Works Director recommends rejection of the bid submitted by Pacific Infrastructure Construction, LLC.

The Public Works Director has determined that Hess Concrete Construction Co., Inc. ("Hess") documented an adequate good faith effort to comply with the requirements of the County's Outreach Program and exceeded the Mandatory Subcontracting Minimum for this project, and the Public Works Director recommends that the construction contract be awarded to Hess.

The Public Works Director recommends that the bid submitted by Hess is the lowest responsive and responsible bid, which is $107,459.00 less than the next lowest bid, and this Board concurs and so finds.

The Board of Supervisors previously determined that the project is exempt from the California Environmental Quality Act as a Class 1(c) Exemption, and a Notice of Exemption was filed with the County Clerk on May 27, 2016.

The general prevailing rates of wages, which shall be the minimum rates paid on this project, have been filed with the Clerk of the Board, and copies will be made available to any party upon request.

CONSEQUENCE OF NEGATIVE ACTION:

Construction of this project would be delayed, and the project might not be built.

CHILDREN'S IMPACT STATEMENT:

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Construction Contract for the Phase II - Pomona Street Pedestrian Safety Improvement Project, Crockett area

**RECOMMENDATION(S):**

(1) APPROVE plans, specifications, and design for the Phase II - Pomona Street Pedestrian Safety Improvement. (Project No. 0662-6R4090) (District V)

(2) DETERMINE that Gruendl Inc., the lowest monetary bidder, submitted a non-responsive bid by failing to meet the County's Mandatory Subcontracting Minimum for this project, as provided in the project specifications; and REJECT the bid on that basis.

(3) DETERMINE that Sposeto Engineering, Inc. ("Sposeto"), the second lowest monetary bidder, has complied with the requirements of the County's Outreach Program and has exceeded the Mandatory Subcontracting Minimum for this project, as provided in the project specifications; and FURTHER DETERMINE that Sposeto has submitted the lowest responsive and responsible bid for the project.

(4) AWARD the construction contract for the above project to Sposeto in the total amount ($292,883.50) and the unit prices submitted in the bid, and DIRECT that Sposeto shall present two good and sufficient surety bonds, as indicated below, and that the Public Works Director, or designee, shall prepare the contract.

(5) ORDER that, after the contractor has signed the contract and returned it,

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Kevin Emigh, 925-313-2233

By: , Deputy

**cc:**

RECOMMENDATION(S): (CONT'D)

together with the bonds as noted below and any required certificates of insurance or other required documents, and the Public Works Director has reviewed and found them to be sufficient, the Public Works Director, or designee, is authorized to sign the contract for this Board.

(6) ORDER that, in accordance with the project specifications and/or upon signature of the contract by the Public Works Director, or designee, any bid bonds posted by the bidders are to be exonerated and any checks or cash submitted for security shall be returned.

(7) ORDER that, the Public Works Director, or designee, is authorized to sign any escrow agreements prepared for this project to permit the direct payment of retentions into escrow or the substitution of securities for moneys withheld by the County to ensure performance under the contract, pursuant to Public Contract Code Section 22300.

(8) DELEGATE, pursuant to Public Contract Code Section 4114, to the Public Works Director, or designee, the Board's functions under Public Contract Code Sections 4107 and 4110.

(9) DELEGATE, pursuant to Labor Code Section 6705, to the Public Works Director or to any registered civil or structural engineer employed by the County the authority to accept detailed plans showing the design of shoring, bracing, sloping, or other provisions to be made for worker protection during trench excavation covered by that section.

(10) DECLARE that, should the award of the contract to Sposeto be invalidated for any reason, the Board would not in any event have awarded the contract to any other bidder, but instead would have exercised its discretion to reject all of the bids received. Nothing in this Board Order shall prevent the Board from re-awarding the contract to another bidder in cases where the successful bidder establishes a mistake, refuses to sign the contract, or fails to furnish required bonds or insurance (see Public Contract Code Sections 5100-5107).

FISCAL IMPACT:

The construction contract and associated fees of this project will be funded by 43% Transportation Development Act Grant Funds and 57% Local Road Funds.

BACKGROUND:

The above project was previously approved by the Board of Supervisors, plans and specifications were filed with the Board, and bids were invited by the Public Works Director. On May 1, 2018, the Public Works Department received bids from the following contractors:

BIDDER, TOTAL AMOUNT, BOND AMOUNTS

Gruendl Inc., dba Ray's Electric, $278,070.00

Sposeto Engineering, Inc., $292,883.50; Payment: $292,883.50; Performance: $292,883.50

FBD Vanguard Construction, Inc., $311,492.00

Hess Concrete Construction Co., Inc., $350,858.00

W.R. Forde Associates, Inc., $367,565.00

GradeTech Inc., $419,580.00

The Public Works Director has determined that the low bidder, Gruendl Inc., submitted a non-responsive bid by failing to meet the Mandatory Subcontracting Minimum to comply with the requirements for this project, as provided in the project specifications, and the Public Works Director recommends rejection of the bid submitted by Gruendl Inc.

The Public Works Director has determined that Sposeto Engineering, Inc. ("Sposeto") documented an adequate good faith effort to comply with the requirements of the County's Outreach Program and exceeded the Mandatory Subcontracting Minimum for this project, and the Public Works Director recommends that the construction contract be awarded to Sposeto.

The Public Works Director recommends that the bid submitted by Sposeto is the lowest responsive and responsible bid, which is $18,608.50 less than the next lowest bid, and this Board concurs and so finds.

The Board of Supervisors previously determined that the project is exempt from the California Environmental Quality Act as a Class 1(c) Exemption, and a Notice of Exemption was filed with the County Clerk on February 12, 2015.

The general prevailing rates of wages, which shall be the minimum rates paid on this project, have been filed with the Clerk of the Board, and copies will be made available to any party upon request.

CONSEQUENCE OF NEGATIVE ACTION:
Construction of this project would be delayed, and the project might not be built.

CHILDREN'S IMPACT STATEMENT:

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Contract Amendment with WSP USA, Inc., Byron area.

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Public Works Director, or designee, to execute Contract Amendment No. 1 to the Consulting Services Agreement (CSA) with WSP USA, Inc. effective May 1, 2018, to increase the payment limit by $75,000 to a new payment limit of $375,000, for construction management services for the Byron Highway and Camino Diablo Intersection Improvements Project (Project), for the period of May 9, 2017, through June 30, 2018, Byron area. (County Project No. 0662-6R4094/Federal Project No. HSIPL-5928(117)) (District III)

**FISCAL IMPACT:**

This project, including the CSA, is funded by 23% Highway Safety Improvement Program Grant Funds, 17% Measure J Return to Source Funds, 12% East County Regional Area of Benefit Funds, and 48% Local Road Funds.

**BACKGROUND:**

The project consists of roadway widening, intersection improvements, including sidewalk, curb ramps, and drainage improvements, traffic signal installation, and traffic signal and roadway improvements within Union Pacific Railroad right-of-way, at the intersection of Byron Highway and Camino Diablo in Byron, California.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Kevin Emigh, 925-313-2233

By: , Deputy

**cc:**

BACKGROUND: (CONT'D)

WSP USA Inc. was selected to provide construction management services for the project. Proposed Amendment No. 1 will amend the payment limits in order to provide additional construction management services that are needed to successfully complete the project.

CONSEQUENCE OF NEGATIVE ACTION:

The project completion would be delayed and federal funds would be in jeopardy.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Contract Amendment with WSP USA, Inc., Brentwood area.

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Public Works Director, or designee, to execute Contract Amendment No. 1 to the Consulting Services Agreement (CSA) with WSP USA, Inc. effective May 1, 2018, to change the termination date from June 30, 2018 to December 30, 2018 and increase the payment limit by $230,000 to a new payment limit of $630,000, for construction management services for the Balfour Road Shoulder Widening Project (Project), for the period of May 9, 2017, through December 30, 2018, Brentwood area. (Project No. 0662-6R4002) (District III)

**FISCAL IMPACT:**

This project, including the CSA, is funded by 100% Discovery Bay Mitigation Funds.

**BACKGROUND:**

The project consists of pavement widening and installing shoulder backing, including utility relocations, drainage systems, driveway conforms, relocating mailboxes, signing, thermoplastic striping and pavement markings in the Brentwood area, California. WSP USA, Inc. was selected to provide construction management services for the project.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Kevin Emigh, 925-313-2233

**cc:**

BACKGROUND: (CONT'D)

Proposed Amendment No. 1 will amend the termination date and payment limits in order to provide additional construction management services that are needed to successfully complete the project. The project experienced heavy delays due to utility conflicts which necessitate the second phase of the project to be constructed in the following construction season.

CONSEQUENCE OF NEGATIVE ACTION:

The project completion would be delayed.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Construction Contract for the Rio Vista Elementary Pedestrian Connection Project, Bay Point area.

**RECOMMENDATION(S):**

(1) APPROVE plans, specifications, and design for the Rio Vista Elementary Pedestrian Connection Project ("Project"), Bay Point area. (County Project No. 0662-6R4141, State Project No. ATPL 5928 (139)) (District V)

(2) DETERMINE that Hess Concrete Construction Co., Inc. ("Hess") the lowest monetary bidder, has complied with the requirements of the County's Outreach Program and has exceeded the Mandatory Subcontracting Minimum for this project, as provided in the project specifications; and FURTHER DETERMINE that Hess has submitted the lowest responsive and responsible bid for the project.

(3) AWARD the construction contract for the above project to Hess in the listed amount ($541,929.00) and the unit prices submitted in the bid, and DIRECT that Hess shall present two good and sufficient surety bonds, as indicated below, and that the Public Works Director, or designee, shall prepare the contract.

(4) ORDER that, after the contractor has signed the contract and returned it, together with the bonds as noted below and any required certificates of insurance or other required documents, and the Public Works Director has reviewed and found them to be sufficient, the Public Works Director, or designee, is authorized to sign the contract

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Kevin Emigh, 925-313-2233

By: , Deputy

**cc:**

RECOMMENDATION(S): (CONT'D)
for this Board.

(5) ORDER that, in accordance with the project specifications and/or upon signature of the contract by the Public Works Director, or designee, and bid bonds posted by the bidders are to be exonerated and any checks or cash submitted for security shall be returned.

(6) ORDER that, the Public Works Director, or designee, is authorized to sign any escrow agreements prepared for this project to permit the direct payment of retentions into escrow or the substitution of securities for moneys withheld by the County to ensure performance under the contract, pursuant to Public Contract Code Section 22300.

(7) DELEGATE, pursuant to Public Contract Code Section 4114, to the Public Works Director, or designee, the Board's functions under Public Contract Code Sections 4107 and 4110.

(8) DELEGATE, pursuant to Labor Code Section 6705, to the Public Works Director or to any registered civil or structural engineer employed by the County the authority to accept detailed plans showing the design of shoring, bracing, sloping, or other provisions to be made for worker protection during trench excavation covered by that section.

(9) DECLARE that, should the award of the contract to Hess be invalidated for any reason, the Board would not in any event have awarded the contract to any other bidder, but instead would have exercised its discretion to reject all of the bids received. Nothing in this Board Order shall prevent the Board from re-awarding the contract to another bidder in cases where the successful bidder establishes a mistake, refuses to sign the contract, or fails to furnish required bonds or insurance (see Public Contract Code Sections 5100-5107).

FISCAL IMPACT:
The Project will be funded by 76% Active Transportation Program-Safe Routes to School Funds and 24% Local Road Funds.

BACKGROUND:
The above project was previously approved by the Board of Supervisors, plans and specifications were filed with the Board, and bids were invited by the Public Works Director. On May 1, 2018, the Public Works Department received bids from the following contractors:

BIDDER, TOTAL AMOUNT, BOND AMOUNTS

Hess Concrete Construction Co., Inc., $541,929.18; Payment: $541,929.00; Performance: $541,929.00

Gruendl Inc., dba Ray's Electric, $545,688.00

Sposeto Engineering, Inc., $614,996.00

FBD Vanguard Construction, Inc., $702,046.60

The bidder listed first above, Hess, submitted the lowest responsive and responsible bid, which is $3,759.00 less than the next lowest bid.

The Public Works Director has reported that Hess documented an adequate good faith effort to comply with the requirements of the County's Outreach Program and exceeded the Mandatory Subcontracting Minimum, and the Public Works Director recommends that the construction contract be awarded to Hess.

The Public Works Director recommends that the bid submitted by Hess is the lowest responsive and responsible bid, and this Board concurs and so finds.

The Board of Supervisors previously determined that the project is exempt from the California Environmental Quality Act (CEQA) as a Class 1(c) Categorical Exemption, and a Notice of Exemption was filed with the County Clerk on October 7, 2015.

The general prevailing rates of wages, which shall be the minimum rates paid on this project, have been filed with the Clerk of the Board, and copies will be made available to any party upon request.

CONSEQUENCE OF NEGATIVE ACTION:

Construction of this project would be delayed, and the project might not be built.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: APPROVE & AUTHORIZE to advertise Orwood Road Culvert Replacement Project, Knightsen area

**RECOMMENDATION(S):**
APPROVE the Orwood Road Culvert Replacement Project and AUTHORIZE the Public Works Director, or designee, to advertise the project, Knightsen area. (Project No. 0672-6U2342) (District III)

**FISCAL IMPACT:**
The project will be funded by 100% Local Road Funds.

**BACKGROUND:**
The purpose of this project is to replace a collapsed culvert at Orwood Road and restore the roadway. This project is needed to prevent further distress and potential settlement to the roadway, and restore proper drainage. The 46'-long culvert is a 43"x27" (Span x rise) arch. Corrugated metal pipe connects two drain inlets located on the northern and southern sides of the roadway.

This project is covered by the California Department of Fish and Wildlife under a Routine Maintenance Agreement (RMA) under Section 1602 of the Fish and

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Kevin Emigh, 925-313-2233

By: , Deputy

**cc:**

BACKGROUND: (CONT'D)

Game Code. CEQA was previously approved for all actions under the RMA and a Notice of Exemption was posted on March 1, 2011. The activities covered under the RMA consist of routine maintenance activities that pose minimal threat to water quality, and beneficial uses of the creeks within the County when appropriate Best Management Practices (BMPs) are implemented. Project-specific BMPs that will be implemented include the installation of a temporary Type ESA/Silt fence around the Environmentally Sensitive Area located at the southern drainage inlet before start of work, as well as limiting construction activities to the previously developed roadway area.

CONSEQUENCE OF NEGATIVE ACTION:

Delay in authorizing advertisement will result in significant delay of construction up to a full year causing further deterioration to the roadway, which may ultimately result in an unusable condition of the roadway.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Accepting completion of improvements for subdivision SD05-08971, San Ramon (Dougherty Valley) area.

**RECOMMENDATION(S):**
ADOPT Resolution No. 2018/175 accepting completion of improvements for subdivision SD05-08971 for a project developed by Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, San Ramon (Dougherty Valley) area. (District II)

**FISCAL IMPACT:**
No fiscal impact

**BACKGROUND:**
The developer has completed the improvements per the Subdivision Agreement, and in accordance with the Title 9 of the County Ordinance Code.

**CONSEQUENCE OF NEGATIVE ACTION:**
The completion of improvements will not be accepted.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Jocelyn Larocque, 925.313.2315

By: , Deputy

**cc:** Jocelyn LaRocque- Engineering Services, Trixie Gothro - Design & Construction, Alex Lopez - Engineering Services, Chris Low - City of San Ramon, Renee Hutchins - Records, Mike Mann- Finance, Shapell Homes, a Division of Shapell Industries, Inc., The Continental Insurance Company

ATTACHMENTS

Resolution No.
2018/175

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/175**

IN THE MATTER OF: Accepting completion of improvements for subdivision SD05-08971 for a project developed by Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, San Ramon (Dougherty Valley) area. (District II)

WHEREAS, the Public Works Director has notified this Board that the improvements in subdivision SD05-08971 have been completed as provided in the Subdivision Agreement with Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, heretofore approved by this Board in conjunction with the filing of the Final Map.

WHEREAS, these improvements are approximately located near Goldenbay Avenue between Cinnamon Ridge Road and Bayberry View Lane.

NOW, THEREFORE, BE IT RESOLVED that the improvements have been COMPLETED as of May 22, 2018**,** thereby establishing the six month terminal period for the filing of liens in case of action under said Subdivision Agreement:

DATE OF AGREEMENT: September 17, 2013

NAME OF SURETY: The Continental Insurance Company

BE IT FURTHER RESOLVED the payment (labor and materials) surety for $519,000.00, Bond No. 929 574 175 issued by the above surety be RETAINED for the six month lien guarantee period until November 22, 2018, at which time the Board AUTHORIZES the release of said surety less the amount of any claims on file.

BE IT FURTHER RESOLVED that the private roads for the hereinafter described as “Driveway Reciprocal Access,” as shown and dedicated for private use on the Final Map of subdivision SD05-08971 filed September 23, 2013 in Book 517 of final maps at Page 43, Official Records of Contra Costa County, State of California, have been COMPLETED and are NOT ACCEPTED, at this time.

BE IT FURTHER RESOLVED that upon acceptance by the Board of Supervisors, the San Ramon City Council shall accept the improvements for maintenance and ownership in accordance with the Dougherty Valley Memorandum of Understanding.

BE IT FURTHER RESOLVED that there is no warranty period required, and the Public Works Director is AUTHORIZED to refund the $10,000.00 cash security for performance (Auditor's Deposit Permit No. DP 639254, dated August 29, 2013) plus interest in accordance with Government Code Section 53079, if appropriate, to Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation pursuant to the requirements of the Ordinance Code; and the Subdivision Agreement and surety bond, Bond No. 929 574 175, dated July 15, 2013 are EXONERATED.

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**Contact: Jocelyn Larocque, 925.313.2315**

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:** Jocelyn LaRocque- Engineering Services, Trixie Gothro - Design & Construction, Alex Lopez - Engineering Services, Chris Low - City of San Ramon, Renee Hutchins - Records, Mike Mann- Finance, Shapell Homes, a Division of Shapell Industries, Inc., The Continental Insurance Company

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Accepting completion of warranty period for road acceptance RA06-01208, San Ramon (Dougherty Valley) area.

**RECOMMENDATION(S):**

ADOPT Resolution No. 2018/176 accepting completion of the warranty period for the Road Improvement Agreement, and release of cash deposit for faithful performance, for road acceptance RA06-01208 (cross reference subdivision SD04-08856), for a project developed by Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, San Ramon (Dougherty Valley) area. (District II)

**FISCAL IMPACT:**

The funds to be released are developer fees that have been held on deposit.

**BACKGROUND:**

The public road improvements have met the guaranteed performance standards for the warranty period following completion and acceptance of the improvements.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jocelyn Larocque, 925.313.2315

**cc:** Jocelyn LaRocque- Engineering Services, Trixie Gothro - Design & Construction, Alex Lopez - Engineering Services, Chris Hallford -Mapping , Ruben Hernandez - DCD, Chris Low - City of San Ramon, Catherine Windham - Flood Control, Renee Hutchins - Records

CONSEQUENCE OF NEGATIVE ACTION:

The developer will not receive a refund of the cash deposit, the Road Improvement Agreement and performance/maintenance surety bond will not be exonerated, and the billing account will not be liquidated and closed.

ATTACHMENTS

Resolution No. 2018/176

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/176**

IN THE MATTER OF: Accepting completion of the warranty period for the Road Improvement Agreement, and release of cash deposit for faithful performance, for road acceptance RA06-01208 (cross reference subdivision SD04-08856), for a project developed by Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, as recommended by the Public Works Director, San Ramon (Dougherty Valley) area. (District II)

WHEREAS, on August 2, 2016, this Board resolved that the improvements in road acceptance RA06-01208 were completed as provided in the Road Improvement Agreement with Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation, and now on the recommendation of the Public Works Director;

The Board hereby FINDS that the improvements have satisfactorily met the guaranteed performance standards for the period following completion and acceptance.

NOW, THEREFORE, BE IT RESOLVED that the Public Works Director is AUTHORIZED to: REFUND the $112,900.00 cash deposit (Auditor's Deposit Permit No.DP468993, dated August 16, 2006) plus interest to Shapell Homes, a Division of Shapell Industries, Inc., a Delaware Corporation in accordance with Government Code Section 53079, if appropriate, Ordinance Code Section 94-4.406, and the Road Improvement Agreement.

BE IT FURTHER RESOLVED that upon completion of the warranty and maintenance period, the San Ramon City Council shall accept the civil improvements for maintenance in accordance with the Dougherty Valley Memorandum of Understanding.

BE IT FURTHER RESOLVED that the warranty period has been completed and the Road Improvement Agreement and surety bond, Bond No. 929390933, dated August 3, 2006, issued by National Fire Insurance Company of Hartford, are EXONERATED.

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**Contact: Jocelyn Larocque, 925.313.2315**

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:** Jocelyn LaRocque- Engineering Services, Trixie Gothro - Design & Construction, Alex Lopez - Engineering Services, Chris Hallford -Mapping , Ruben Hernandez - DCD, Chris Low - City of San Ramon, Catherine Windham - Flood Control, Renee Hutchins - Records

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Approve the Annual County Miles in the Total Maintained Mileage for County Roads Report, Countywide.

**RECOMMENDATION(S):**
ADOPT Resolution No. 2018/180 approving the annual county miles in the Total Maintained Mileage for County Roads Report, as recommended by the Public Works Director, Countywide.

**FISCAL IMPACT:**
No fiscal impact

**BACKGROUND:**
The California Department of Transportation (Caltrans) requires annual total mileage to determine the amount of money allocated to the County from the gasoline tax.

**CONSEQUENCE OF NEGATIVE ACTION:**
The report cannot be submitted to Caltrans without Board approval.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jim Stein (925) 313-2343

**cc:** Chris Lau - Maintenance, Liza Mangabay - Finance, Jerry Fahy - Transportation Engineering, Jim Stein - Surveys, Renee Hutchins - Records

ATTACHMENTS

Resolution No. 2018/180

Exhibit - Contra Costa County Road Mileage

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/180**

IN THE MATTER OF: Correcting the Total Maintained Mileage for County Roads Report. (All Districts)

WHEREAS, Section 2121 of the Streets and Highways Code provides that in May of each year, each county shall submit to the State Department of Transportation any additions or exclusions from its mileage of maintained county roads, specifying the terminuses and mileage of each route added or excluded; and

WHEREAS, the State Department of Transportation certified to the State Controller on May 1, 2017 that the total mileage of maintained county roads in Contra Costa County was 663.22,

WHEREAS, the Public Works Director now reports that the total mileage of maintained county roads as of January 1, 2018, is 661.62 miles.

NOW, THEREFORE, BE IT RESOLVED, that this Board finds and determines that the mileage of maintained County roads in Contra Costa County is 661.62 and that the mileage of each route added to or excluded from the County's maintained roads is as shown in Exhibit "A," such exhibit being made a part of this resolution.

**Contact: Jim Stein (925) 313-2343**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:** Chris Lau - Maintenance, Liza Mangabay - Finance, Jerry Fahy - Transportation Engineering, Jim Stein - Surveys, Renee Hutchins - Records

**"EXHIBIT A"**
**CONTRA COSTA COUNTY**
**ROAD MILEAGE (+ & -)**

ADDITIONS to ROAD MILEAGE

| Road No. | Road Name | Class | Mileage | CRS Page | Coord. |
|---|---|---|---|---|---|
| - | | - | - | - | - |

Road Mileage loss due to Annexation or Vacation

| Road No. | Road Name | Class | Mileage | CRS Page | Coord |
|---|---|---|---|---|---|
| 5261 | Kirker Pass RD. | 3 | -0.31 | 6K51 | 5G |

Corrections to Road Mileage

| Road No. | Road Name | Class | Mileage + or - | CRS Page | Coord. |
|---|---|---|---|---|---|
| 0461A | Name change from Third ST. to Fred Jackson Way | 5 | No mileage | 5K52 | 6D |
| 5525CN | *Massara ST. (not yet accepted) | 7 | -0.42 | 6L22 | 6C |
| 5525CM | *Charbray ST. (not yet accepted) | 7 | -0.50 | 6L22 | 6C |
| 5525CU | Turanian CT. (not yet accepted) | 7 | -0.09 | 6L22 | 6C |
| 5525CV | Robert Duchi WY (not yet accepted) | 7 | -0.14 | 6L22 | 6C |
| 5525CW | Connemara CT.(not yet accepted) | 7 | -0.13 | 6L22 | 6C |
| 5525CX | Percheron CT. (not yet accepted) | 7 | -0.03 | 6L22 | 6C |
| 2191A | Pomona St | 4 | +0.17 | 5K43 | 4H |
| 2295A | Vista Del Rio | 7 | +0.07 | 5K43 | 4H |
| 2295B | Kendall Ave | 7 | -0.11 | 5K43 | 4H |
| 2295C | Carquinez Way | 7 | -0.06 | 5K43 | 4G |
| 2295Q | Wanda St | 7 | -0.05 | 5K43 | 4H |

*Subtraction from existing county maintained road

**"EXHIBIT A"**
**CONTRA COSTA COUNTY**
**ROAD MILEAGE (+ & -)**

ADDITIONS to ROAD MILEAGE

| | |
|---|---|
| Maintained Mileage Reported on January 1, 2017 | **663.22** |
| Total Additions | **+0.00** |
| Total Subtractions | **-0.31** |
| Total Corrections | **-1.29** |
| Maintained Mileage as of January 1, 2018 | **661.62** |

G:\engsvc\RECORDS\Road Log\2018 Exhibit A for 2017 Road Log.docx
RH:js 5/8/18

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: APPROVE and AUTHORIZE the Public Works Director, or designee, allocate up to $55,400 for the summer events at Livorna Park, Alamo area.

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Public Works Director, or designee, to allocate up to $55,400 from County Service Area R-7 (CSA R-7) funds to present the Alamo "2018 Summer Concert Series" and Alamo "2018 Movie Under the Stars" events at Livorna Park, Alamo Area. (District II)

**FISCAL IMPACT:**

100% CSA R-7 funds.

**BACKGROUND:**

The Alamo Municipal Advisory Council (Alamo MAC) presents free summer concerts and movie nights at Livorna Park. A recreation sub-committee of the Alamo MAC chooses the movies and the bands each year. The "2018 Alamo Summer Concert Series" will take place June 22nd, 29th, and July 6th,

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Victoria Skerritt - 925-313-2272

By: , Deputy

**cc:** Jennifer Quallick- BOS, Rochelle Johnson - Special Districts, Victoria Skerritt, Special Districts

BACKGROUND: (CONT'D)

13th and 27th at 6:30PM, and the "2018 Alamo Movie Under the Stars" will take place on June 8th and August 10th at 8:45PM. CSA R-7 parks and recreation funds are used to present these popular community events. On May 2, 2017 the Alamo MAC recommend up to $55,400 be allocated to the summer concert series and movie nights at Livorna Park for the 2017-18 fiscal year.

Funds will cover services and supplies, including food and beverages, as well as Public Works staffing costs related to the events.

CONSEQUENCE OF NEGATIVE ACTION:

Without Board approval this event would not be possible.

ATTACHMENTS

Alamo MAC

CSA R-7A FY 2017-18

## Alamo Municipal Advisory Council

Anne Struthers, Chair
Susan Rock, Vice-Chair
David Barclay
Sanjiv Bhandari
Aron DeFerrari
Clark Johnson, Alternate
Steve Mick
Kate Salisbury, Youth Member
Jill Winspear

## Candace Andersen, Supervisor

**Contra Costa County, District 2**
**309 Diablo Road**
**Danville, CA 94526**
**925-957-8860**
**jen.quallick@bos.cccounty.us**


*The Alamo Municipal Advisory Council serves as an advisory body to the Contra Costa County Board of Supervisors and the County Planning Agency.*

**Record of Actions**
**Tuesday, May 2nd, 2017 6:00 p.m.**
**Alamo Women's Club - 1401 Danville Boulevard, Alamo**

*Time is allotted under Public Comment for persons who wish to speak for up to three minutes on any item NOT on the agenda. Persons who wish to speak on matters on the agenda will be heard for up to three minutes when the Chair calls for comments. After persons have spoken on an agendized item, the public comment period will be closed by the Chair and the matter is subject to discussion and/or action by the MAC. Persons wishing to speak must fill out a speaker card.*

### 1. CALL TO ORDER - PLEDGE OF ALLEGIANCE - ROLL CALL

The meeting was called to order at 6:00 p.m.

Alamo Municipal Advisory Council members present: Chair Anne Struthers, Susan Rock, David Barclay, Steve Mick, Aron DeFerrari, Sanjiv Bhandari, Jill Winspear, Clark Johnson and Kate Salisbury

### 2. STAFF/AGENCY REPORTS

A. District II Staff Update - The next Alamo Liaison meeting is scheduled for May 15th, 2017, beginning at 8:30 a.m. Location: Supervisor Andersen's Office 309 Diablo Road, Danville.

The Board of Supervisors at the 5/2 meeting opted to move forward with seeking a Joint Powers Agreement with Marin Clean Energy (MCE). This will most likely take place in 2018 with enrollment for customers taking place at that time.

Staff is possibly seeking new location for MAC meetings. Currently working with Alamo Women's Club on rental rate. Checking with San Ramon Valley Unified School District on available options as well.

B. San Ramon Valley Fire Protection District, Deputy Chief Derek Krause offered an update on Station 52 a bit later in the meeting. Projected new open date for fire house is first week of June 2017. District will be hosting a open house sometime in May. Invitations to MAC to be sent out by District Clerk.

### 3. PUBLIC COMMENT (3 minutes/speaker)

*Pursuant to the Brown Act, this time is provided for members of the public and community groups to address the committee on matters within the committee's jurisdiction and not on the agenda. An opportunity will be provided as part of each agenda item for public comment on the item. Time allowed for each individual is three minutes. The Chair will recognize only those speakers who have filled out and turned in a speaker card.*

### 4. PRESENTATIONS – Hemme Station Park

**Hemme Station Park Update was moved from 'Old Business' to 'Presentation' to accommodate Jeff Adams, PhD, PE from Engeo Inc. Report on the SUPPLEMENTAL CHARACTERIZATION REPORT **

Adele Ho, Project Manager for the park, first offered an introduction and history of the park site.

The studies that were conducted were; Kleinfelder in 2005, Engeo in 2014, Engeo in 2016, and a supplemental report by Engeo in 2017. The County did CEQA on the property with no comments offered during the 30-day public comment period.

Because of resident concerns over environmental sampling, additional soil sampling was completed, as well as Ground Penetrating Radar/Magnetometer testing to look for any underground anomalies (such as tanks).

The GPR/Mag testing was done on the eastern third of the property, as the western two thirds historically always had orchards on it. The testing found no anomalies indicating underground storage gasoline tanks existed onsite.

The soil samples were submitted for testing. Tests were run for petroleum hydrocarbons, volatile organic compounds, and metals. Based on the review of the analytical results, it is Engeo's opinion that there is no evidence of impact to the property due to the former gas station. There were two exceedances for lead in two surface samples that appear to be anomalous and likely attributed to aerially deposited lead from historic combustion of lead-containing gasoline by motor vehicles on Danville Blvd.

For the two samples that did have higher than expected levels of lead, it was recommended by Engeo that 12-inches of that soil be removed and replaced. This was unanimously supported by the MAC to ensure resident safety. It is of the consultant's opinion that the property does not pose a risk to future park users.

Public Comment:
Edwin Wolske
Kristen Threlkeld
Jennifer Joaquin
Sharon Burke
Cheryl Iacone
David Cardiff

## 5. NEW BUSINESS

A. Review and approve the 2017-18 Hap Magee Ranch Park Maintenance & Operating Budget and the 2017-18 Budget Proposals for CSA R-7, Zones 36, 45 and 54, presented by Victoria Skeritt, Special Districts.

Public Comment:
Sharon Burke

***Member Barclay moved to approve the R-7 2017-18 budget, with a second by Member DeFerarri. Ayes: DeFerarri, Barclay, Bhandari, Rock, Struthers, Mick, Winspear Nayes: None. Motion passes unanimously***

B. Development Plan application #DP17-3008. The applicant requests approval of a development plan review to install 4 new windows and 1 new door to an existing commercial building. Site address is 225 Alamo Plaza in Alamo.

Public Comment:
Mike Gibson, AIA
Joan Huber
Cindy Johnson, Donahue Schriber
Sandra Fink

***Member DeFerarri moved to 'Approve' the application with the following conditions of approval;***

***1) The owner of Alamo Plaza, Donahue Schriber, along with the applicant, Mr. Cassano, report back to the MAC every 6 months, after the first traffic study is presented to the MAC to report on the assessment and the possible continuing impact on parking presented by Alamo Salon Suites.***
***2) That the signage conforms to the Alamo Sign Program adopted by the ownership of Alamo Plaza and approved by Contra Costa County Department of Conservation and Development in having a back plate that is not taller than 42 inches in height.***

***Motion was seconded by Member Barclay.***

***Ayes: DeFerarri, Barclay, Bhandari***
***Nayes: Rock, Struthers, Mick, Winspear***

***Motion did not pass.***

C. Variance Permit application #VR17-1012. The applicant requests approval of a 19 foot, 2-inch side yard (where 20 feet is required) for the construction of a 787-square foot 2nd floor residential addition over the existing garage and bedroom. Property is located at 954 Forest Lane in Alamo.

Public Comment:
Mike Gibson, AIA

***Member DeFerarri moved to 'Approve' the application as it was presented with a second by Member Barclay.***
***Ayes: DeFerarri, Barclay, Bhandari, Rock, Struthers, Mick, Winspear Nayes: None. Motion passes unanimously***

D. Variance Permit application #VR17-1014. The applicant requests approval of variances to construct a 402-square foot garage with a 5-foot front yard (where 25 feet is the minimum) and a 5-foot side yard (where 15-feet is the minimum). Property is located at 2716 Miranda Avenue in Alamo.

Public Comment:
Mike Gibson, AIA

***Member Barclay recommended to 'Deny' the application as currently presented. However, if DCD could find a reason and/or a hardship could be found, and the variance supported due to the issue of having the proposed setback due to the creek that runs through the property, the MAC could support said variance.***

*Second by Member DeFerarri.*

*Ayes: Barclay, DeFerarri, Mick, Rock, Struthers, Bhandari, Winspear, Johnson*
*Nayes: None*

## 6. OLD BUSINESS

1. Hemme Station Park – Please see 'PRESENTATION' portion of the Agenda.

2. Downtown Alamo Roundabout – Public Works continues to process and prepare paperwork as best they can. Unfortunately, teams are dealing with other public works transportation emergencies in the county due to the winter storms and the washing away and sliding of roadways in some parts of the County. Because of this the formal design process has not yet started.

   The Maintenance team hopes to get a survey crew out onsite in May to begin surveying to prepare topography maps. Team would also like to review the tree-wells along Danville Blvd. and place decomposed granite in where needed.

   Additionally, the Downtown Subcommittee talked about educating the public on the need for the roundabout and how to go about doing that. The thought was to have small presentations at various public meetings; i.e. Rotary, Kiwanis, PTA's, HOA's, etc. Member Rock has offered to take the lead on this role.

   The committee would also like to have an informational table at the music and movie events in Livorna Park this summer. A Member of the MAC could staff to help address and answer questions. A hot sheet has been generated by public works and could be distributed as necessary.

## 7. CONSENT CALENDAR

**All matters listed under CONSENT CALENDAR are considered by the Alamo MAC to be routine and will be enacted by one motion. There will be no separate discussion of these items unless requested by a member of the Alamo MAC or a member of the public prior to the time the Alamo MAC votes on the motion to adopt.**

A. Approve April 4th, 2017 Record of Actions.

***Motion by Member Barclay to accept the ROA's as provided by staff. Second by Member Winspear. Motion passes unanimously.***

## 8. SUBCOMMITTEE REPORTS - *Updates provided when available*

Alamo AOB Subcommittee for Schools:
Alamo AOB Subcommittee for Downtown:
Alamo Police Services Advisory Committee:

***At P2 meeting, Deputy Topete reminded residents to lock up when leaving the house and not to leave belongings in cars, etc. CHP provided a report of tickets for the month and ALPR camera proposal continues to move forward.***

Land Use Planning Subcommittee:
Parks and Recreation subcommittee:
Hap Magee Dog Park Subcommittee: Member Johnson will serve as the representative for this subcommittee.

## 9. CORRESPONDENCE (the following items are listed for informational purposes only and may be considered for discussion at a future meeting).

A. None.

## 10. COMMENTS BY MEMBERS OF THE ALAMO MAC

## 11. FUTURE AGENDA ITEMS

## 12. ADJOURNMENT

A. Meeting adjourned at 9:03 P.M. to the Alamo MAC meeting on **June 6th** at 6:00 P.M. at the Alamo Women's Club located at 1401 Danville Boulevard, Alamo.

---

The Alamo Municipal Advisory Council will provide reasonable accommodations for persons with disabilities planning to attend the meeting who contact Supervisor Candace Andersen's office at least 72 hours before the meeting at 925-957-8860.

Materials distributed for the meeting are available for viewing at the District 2 Office at 309 Diablo Road, Danville, CA 94526. To receive a copy of the Alamo MAC agenda via mail or email, please submit your request in writing using a speaker card or by contacting Supervisor Andersen's office at 925-957-8860. Complete name and address must be submitted to be added to the list.

# Alamo Parks and Recreation, CSA R-7A
# 2017-18 Budget Proposal

| | | FY 15/16 | FY 16/17 | FY 16/17 | FY 17/18 |
|---|---|---|---|---|---|
| 7758 | County Service Area R-7A | Year End Totals | Budget | Estimated End of Year Totals | Proposed Budget |
| | Fund Balance | $3,509,224 | 3,466,358 | $3,466,358 | $1,987,085 |
| Ledger Code | REVENUE: | | | | |
| 9000, 9100, 9385, 9580 | Taxes | 1,025,383 | 1,000,000 | 1,078,000 | 1,080,000 |
| 9400 | Interest Earned | 14,722 | 12,000 | 11,102 | 12,000 |
| 9500-9595 | Measure WW Funds | 43,576 | 432,347 | 322,973 | 354,706 |
| 9600 | Alamo Sports Field Fees | 8,679 | 6,000 | 7,263 | 7,300 |
| | TOTAL REVENUE | 1,092,359 | 1,450,347 | 1,419,338 | 1,454,006 |
| | REVENUE PLUS FUND BALANCE | 4,601,583 | 4,916,705 | 4,885,697 | 3,441,091 |
| | EXPENSES: | | | | |
| | Services and Supplies | | | | |
| 2100 | Office Expense | 0 | 100 | 100 | 100 |
| 2120 | Utilities | 8,301 | 10,000 | 10,000 | 10,000 |
| 2281/2282 | Trash/Custodial | 14,658 | 16,000 | 17,700 | 33,000 |
| 2310 | Hap Magee Operations | 166,863 | 190,186 | 190,186 | 191,351 |
| 2310 | YMCA Services | 26,567 | 33,110 | 15,000 | 0 |
| 2310 | Other Contracted Services | 33,897 | 26,502 | 25,000 | 35,000 |
| Various | Recreation Supplies | 9,851 | 11,198 | 10,000 | 10,800 |
| SUBTOTAL | Services and Supplies Total | 260,136 | 287,096 | 267,886 | 280,251 |
| | Other Charges | | | | |
| 3611 | County Counsel; Assessment Admin. | 8,929 | 10,600 | 10,600 | 10,600 |
| 3619 | Prop Tax, Lease Management | 2,861 | 6,100 | 6,200 | 6,200 |
| 3620 | Grounds Maintenance | 340,644 | 254,500 | 246,000 | 288,000 |
| SUBTOTAL | Other Charges Total | 352,434 | 271,200 | 262,800 | 304,800 |
| | Fixed Assets (Capital Improvements) | | | | |
| 4766 | Hap Magee Park Imps | 6,933 | 82,500 | 82,500 | 266,250 |
| 4703 | Hemme Station Park Construction | 212,479 | 1,400,000 | 1,637,521 | 0 |
| 4702 | Livorna Park Bocce Ball Courts | 186,356 | 432,347 | 533,495 | 0 |
| SUBTOTAL | Fixed Assets (Capital Improvements) Total | 405,767 | 1,914,847 | 2,253,516 | 266,250 |
| | Public Works Staff (Administration) | | | | |
| 5011 | Public Works Staff (Administration) | 116,886 | 138,900 | 114,409 | 148,900 |
| | Public Works Staff (Administration) Total | 116,886 | 138,900 | 114,409 | 148,900 |
| | TOTAL EXPENSES | 1,135,224 | 2,612,043 | 2,898,611 | 1,000,201 |
| | Net | (42,865) | (1,161,696) | (1,479,273) | 453,805 |
| | | | | | |
| | Fund Balance (Park Development/Reserve) | $3,466,358 | $2,304,662 | $1,987,085 | $2,440,890 |

| ADDITIONAL PARK DEVELOPMENT FUNDS - ALAMO | | |
|---|---|---|
| Park Dedication Fees | $208,917 | |
| Measure WW (EBRPD Bond) | $817,931 | |
| Less amount reimbursed as of 6/30/16 | <$140,252> | |
| Measure WW Balance | $677,679 | 12/31/2018.) |

# Alamo Parks and Recreation, CSA R-7A

## Administration and Miscellaneous

| | FY16/17 Budget | FY16/17 End of Year Totals | FY16/17 Proposed Budget |
|---|---|---|---|
| Service and Supplies | $300 | 300 | 300 |
| Assessment Admin./County Counsel | 10,000 | 10,000 | 10,000 |
| YMCA Program | 33,110 | 15,000 | 0 |
| Public Works Staff (Administration) | 74,000 | 60,000 | 74,000 |
| Total | 117,410 | 85,300 | 84,300 |

# Alamo Parks and Recreation, CSA R-7A

## Parks

| Livorna Park | | | |
|---|---|---|---|
| | FY 16/17 | FY 16/17 | FY 17/18 |
| | Budget | Estimated End of Year Totals | Proposed Budget |
| Services and Supplies | $33,000 | 40,000 | 40,000 |
| Grounds Maintenance | 170,000 | 170,000 | 170,000 |
| Livorna Park Bocce Ball Courts | 432,347 | 533,495 | 0 |
| Public Works Staff (Administration) | 25,000 | 11,000 | 25,000 |
| Total | 660,347 | 754,495 | 235,000 |
| Alamo Elementary School | | | |
| Services and Supplies | 5,000 | 5,000 | 5,000 |
| Grounds Maintenance | 45,000 | 35,000 | 45,000 |
| Public Works Staff (Admin.) | 4,000 | 4,000 | 4,000 |
| Total | 54,000 | 44,000 | 54,000 |
| Andrew H. Young Park | | | |
| Services and Supplies | 3,000 | 3,000 | 3,000 |
| Grounds Maintenance | 35,000 | 20,000 | 25,000 |
| Public Works Staff (Admin.) | 2,000 | 2,000 | 2,000 |
| Total | 40,000 | 25,000 | 30,000 |
| Rancho Romero School | | | |
| Prop Tax/Insurance, Lease Managemen | 100 | 100 | 100 |
| Public Works Staff (Admin.) | 100 | 100 | 100 |
| Total | 200 | 200 | 200 |
| Hap Magee Ranch Park | | | |
| Hap Magee Operations (Supplies & Serv | 190,186 | 190,186 | 191,351 |
| County Counsel | 600 | 600 | 600 |
| Prop Tax, Lease Management | 6,000 | 6,100 | 6,100 |
| Capital Improvements | 82,500 | 82,500 | 266,250 |
| Public Works Staff (Admin.) | 1,000 | 1,000 | 1,000 |
| Total | 280,286 | 280,386 | 465,301 |
| Iron Horse Trail Corridor | | | |
| Grounds Maintenance | 3,000 | 3,000 | 3,000 |
| Public Works Staff (Admin.) | 1,000 | 500 | 1,000 |
| Total | 4,000 | 3,500 | 4,000 |
| Hemme Station Park | | | |
| Services and Supplies | 0 | 6,000 | 17,000 |
| Grounds Maintenance | 1,500 | 18,000 | 45,000 |
| Hemme Station Park | 1,400,000 | 1,637,521 | 0 |
| Public Works Staff (Admin.) | 0 | 5,000 | 10,000 |
| Total | 1,401,500 | 1,666,521 | 72,000 |

## Parks Summary

| | FY 16/17 | FY 16/17 | FY 17/18 |
|---|---|---|---|
| | BUDGET | Estimated End of Year Totals | Proposed Budget |
| Services and Supplies | 231,186 | 244,186 | 256,351 |
| Grounds Maintenance and other charge | 261,200 | 252,800 | 294,800 |
| Capital Improvements | 1,914,847 | 2,253,516 | 266,250 |
| Public Works Staff (Admin.) | 33,100 | 23,600 | 43,100 |
| Total | 2,440,333 | 2,774,102 | 860,501 |

# Alamo Parks and Recreation, CSA R-7A

## Events

| | FY16/17 Budget | FY16/17 Estimated End of Year Totals | FY17/18 Proposed Budget |
|---|---|---|---|
| **Movie Under the Stars** | | | |
| Services and Supplies | $4,000 | 4,100 | 4,100 |
| Public Works Staff (Administration) | 8,500 | 8,303 | 8,500 |
| Total | 12,500 | 12,403 | 12,600 |
| **Summer Concert Series** | | | |
| Services and Supplies | 17,000 | 17,800 | 18,000 |
| Public Works Staff (Administration) | 23,000 | 22,506 | 23,000 |
| Total | 40,000 | 40,306 | 41,000 |
| **Tree Lighting** | | | |
| Services and Supplies | 1,500 | 1,500 | 1,500 |
| Public Works Staff (Administration) | 300 | 0 | 300 |
| Total | 1,800 | 1,500 | 1,800 |

## Events Summary

| | FY16/17 BUDGET | FY16/17 Estimated End of Year Totals | FY17/18 Proposed Budget |
|---|---|---|---|
| Services and Supplies | 22,500 | 23,400 | 23,600 |
| Public Works Staff (Administration) | 31,800 | 30,809 | 31,800 |
| Total Event Summary | 54,300 | 54,209 | 55,400 |

Contra Costa County

To: Board of Supervisors

From: Keith Freitas, Airports Director

Date: May 22, 2018

Subject: APPROVE and AUTHORIZE the Director of Airports, or designee, to execute a hangar rental agreement with Buchanan Field Airport Hangar tenant

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Director of Airports, or designee, to execute a month-to-month hangar rental agreement with A & M Steel Construction Inc. for a T-hangar at Buchanan Field Airport effective May 5, 2018 in the monthly amount of $394.10, Pacheco area (District IV).

**FISCAL IMPACT:**

The Airport Enterprise Fund will realize $4,729.20 annually.

**BACKGROUND:**

On September 1, 1970, Buchanan Airport Hangar Company entered into a 30-year lease with Contra Costa County for the construction of seventy-five (75) hangars and eighteen (18) aircraft shelters/shade hangars at Buchanan Field Airport. In 1977 Buchanan Airport Hangar Company amended their lease to allow for the construction of another 30-year lease with Contra Costa County for the construction of seventeen (17) additional hangars. Buchanan Airport Hangar Company was

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Beth Lee, (925) 681-4200

**cc:**

BACKGROUND: (CONT'D)

responsible for the maintenance and property management of the property during the lease period.

On September 1, 2000, the ninety-three (93) t- and shade hangars at Buchanan Field reverted to the County ownership pursuant to the terms of the above lease.

On November 14, 2006, the Contra Costa County Board of Supervisors approved the form of the T-Hangar and Shade Hangar Rental Agreement for use with renting the County's t-hangars, shade hangars, medium hangars, and executive hangars at Buchanan Field Airport.

On February 16, 2007, the additional seventeen (17) hangars at Buchanan Field reverted back to the County pursuant to the above referenced lease. This row included six (6) large hangars which were not covered by the approved T-Hangar and Shade Hangar Rental Agreement.

On February 23, 2007, Contra Costa County Board of Supervisors approved the new Large Hangar Rental Agreement for use with the large East Ramp Hangars.

On January 16, 2009, Contra Costa County Board of Supervisors approved an amendment to the T-Hangar and Shade Hangar Rental Agreement and the Large Hangar Rental Agreement (combined "Hangar Rental Agreements") which removed the Aircraft Physical Damage Insurance requirement. The Hangar Rental Agreements are the current forms in use for rental of all the County hangars at Buchanan Field Airport.

CONSEQUENCE OF NEGATIVE ACTION:

A negative action will cause a loss of revenue to the Airport Enterprise Fund.

ATTACHMENTS

Hangar Rental Agmt - A/M Steel Construction, Inc.

## CONTRA COSTA COUNTY - BUCHANAN FIELD AIRPORT

## T-HANGAR AND SHADE HANGAR RENTAL AGREEMENT

1. **PARTIES: May 5, 2018** ("**Effective Date**"), the COUNTY OF CONTRA COSTA, a political subdivision of the State of California ("**Airport**"), **A & M Steel Construction, Inc.** ("**Renter**"), hereby mutually agree and promise as follows:

2. **RENTER AND AIRCRAFT INFORMATION:** Simultaneous with the execution of this T-Hangar and Shade Hangar Rental Agreement **("Rental Agreement")** by Renter, Renter shall complete the Renter and Aircraft Information Form. A completed copy of the Renter and Aircraft Information Form is attached hereto as Exhibit "A" and incorporated herein. Renter must also provide to Airport at that time, for inspection and copying, (1) the original current Aircraft Registration or, if the aircraft described in Exhibit A is under construction, the plans for and proof of ownership of such aircraft; and (2) the insurance information required by Section 16 below.

3. **PURPOSE:** The purpose of this Rental Agreement is to provide for the rental of a T-Hangar or Shade Hangar space at the Contra Costa County - Buchanan Field Airport for the storage of the aircraft described in the Renter and Aircraft Information Form (**"Renter's Aircraft"**).

4. **PREMISES:** For and in consideration of the rents and faithful performance by Renter of the terms and conditions set forth herein, Airport hereby rents to Renter and Renter hereby rents from Airport that T-Hangar or Shade Hangar shown as # **C-13** on the T-Hangar and Shade Hangar Site Plan, attached hereto as Exhibit B and incorporated herein. This T-Hangar or Shade Hangar is part of the T-Hangar and Shade Hangar Site **("T-Hangar Site")** and shall hereinafter be described as the **"T-Hangar."**

   Renter has inspected the T-Hangar and hereby accepts the T-Hangar in its present condition, as is, without any obligation on the part of Airport to make any alterations, improvements, or repairs in or about the T-Hangar.

5. **USE:** The T-Hangar shall be exclusively by Renter for the storage of Renter's Aircraft. In addition to the storage of Renter's Aircraft, Renter may use the T-Hangar for (1) the homebuilding, restoration and/or maintenance of Renter's Aircraft, provided that such homebuilding, restoration and/or maintenance is performed by Renter only and in conformance with all applicable statutes, ordinances, resolutions, regulations, orders, circulars (including but not limited to FAA Advisory Circular 20-27) and policies now in existence or adopted from time to time by the United States, the State of California, the County of Contra Costa and other government agencies with jurisdiction over Buchanan Field Airport; (2) the storage of and materials directly

related to the storage, construction of homebuilt planes homebuilding, restoration, and/or maintenance of Renter's Aircraft; (3) the storage of one boat, or one recreational vehicle, or one motorcycle, or one automobile, provided that Renter first provides to Airport proof of Renter's ownership and original registration of any stored boat or vehicle, for inspection and copying; and/or (4) the storage of comfort items (such as a couch, small refrigerator, etc.) that the Director of Airports, in his sole discretion, determines will not impede the use of the hangar for the storage of Renter's Aircraft, and are not prohibited by applicable building and fire codes. The T-Hangar shall not be used for any purpose not expressly set forth in this Section 5. Use.

The use of all or a portion of the T-Hangar for the storage of aircraft not owned or leased by Renter is prohibited. ("Aircraft not owned or leased by Renter" means any aircraft in which Renter does not have an ownership interest or which is not directly leased to Renter). Renter shall present proof of said ownership interest or lease to Airport upon request in addition to that information provided in Exhibit A.

If Renter's Aircraft is or becomes non-operational, it may be stored in the T-Hangar only if it is being homebuilt or restored by Renter. Prior to the commencement of any such homebuilding or restoration, Renter shall provide to Airport (1) a copy of the purchase agreement or (2) a valid federal registration number. If Renter's Aircraft is not registered as of the Effective Date, upon completion of construction, Renter shall register and apply for an airworthiness certificate for Renter's Aircraft in accordance with all applicable federal statutes and regulations and provide the original registration and certification to Airport, for inspection and copying, immediately upon receipt by Renter. On or before January 1 of each year, if the homebuilding or restoration has not been completed, Renter shall provide a written annual report to the Director of Airports that details the homebuilding or restoration activity performed, work still required to be completed and an estimate of time of completion.

6. **TERM**: This Rental Agreement shall be from month to month commencing **May 5, 2018**, and shall continue until terminated. This Rental Agreement may be terminated by any party upon thirty (30) days written notice to the other party.

7. **RENT:**

A. **Monthly Rent and Additional Rent**. Renter shall pay $ **394.10** in rent per month **("Monthly Rent")** due and payable in advance on the first day of each calendar month, beginning on the commencement date of this Rental Agreement. Unless directed to do otherwise by Airport, Renter shall pay rent only in cash or by personal check, certified check, or money order. If the term of this Rental Agreement begins on a day other than the first day of the month, the Monthly Rent stated above for the first month shall be prorated

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: Claims

**RECOMMENDATION(S):**
DENY claims filed by CSAA, Lydia Cantu, Barbara Gardner, Erika Hunt, Jason Kung, Mercury Insurance for Brandon Wu, Yekaterina Ramirez, Safeco Insurance for Christie Pereira, Robert Taylor, Kam Vilaikham, and Atiba Willliams. DENY late claim filed by Yekaterina Ramirez. DENY Amended claim filed by CSAA for Kwok Wan Lau and Yekaterina Ramirez.

**FISCAL IMPACT:**
No fiscal impact.

**BACKGROUND:**
CSAA: Property claim for damage to vehicle in the amount of $1348.70. Subrogation claim regarding a motor vehicle accident involving alleged County employee and claimant's insured in Martinez.
Lydia Cantu: Personal injury claim for trip and fall in the amount of $50,000. Plaintiff claims she tripped and fell on a stump in Antioch.
Barbara Gardner: Property claim for lost dentures in an undisclosed amount. Plaintiff alleges her dental work was damaged at CCRMC.
Erika Hunt: Personal injury claim for trip and fall in excess of $25,000. Plaintiff claims she tripped and fell over a broken sign post in Antioch.
Jason Kung: Personal

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Scott Selby
925.335.1400

By: , Deputy

**cc:**

BACKGROUND: (CONT'D)

injury claim for bacterial infection contracted at hospital in excess of $250,000. Plaintiff alleges medical negligence at CCRMC for an infection following knee surgery.

Mercury Insurance for Brandon Wu: Property claim for damage to vehicle in the amount of $3161.76. Subrogation claim involving claim that insured suffered damage to car from potholes in Byron.

Yekaterina Ramirez: Personal injury claim for emotional and mental distress in the amount of $160,000. This claim involves allegations that plaintiff's civil rights were violated during dependency or dissolution proceedings.

Safeco Insurance for Christie Pereira: Property claim for damage to vehicle in an undisclosed amount. Insured was rear ended by County employee in Alamo.

Robert Taylor: Personal injury claim for pain and suffering in unlimited liability. Plaintiff claims excessive force by Sheriff's deputies in Richmond.

Kam Vilaikham: Personal injury claim for trip and fall in an amount to exceed $25,000. Plaintiff alleges that she fell in an unmarked and open utility access hole.

Atiba Willliams: Personal claim for reimbursement of pay in the amount of $2492. Plaintiff alleges that the Department of Child Support Services failed to report to teaching credentialing agency that he was current on payments.

CSAA for Kwok Wan Lau: Property claim for damage to vehicle in the amount of $590.60. Subrogation claim alleging that insured was rear ended by County employee in Hercules.

Yekaterina Ramirez: Request that Board of Supervisors accept a late claim relating to claim discussed above.

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: ACCEPT Board members meeting reports for April 2018

**RECOMMENDATION(S):**
ACCEPT Board members meeting reports for April 2018.

**FISCAL IMPACT:**
No fiscal impact.

**BACKGROUND:**
Government Code section 53232.3(d) requires that members of legislative bodies report on meetings attended for which there has been expense reimbursement (mileage, meals, lodging ex cetera). The attached reports were submitted by the Board of Supervisors members in satisfaction of this requirement. District V has nothing to report.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Board of Supervisors will not be in compliance with Government Code 53232.3(d).

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Joellen Bergamini
925.335.1906

By: , Deputy

**cc:**

ATTACHMENTS

District I April 2018 Report

District III April 2018 Report

District IV April 2018 Report

District II April 2018 Report

**Supervisor John Gioia**

April – 2018 Monthly Meeting Statement

Government Code section 53232.3(d) requires that members of legislative bodies report on meetings attended for which there has been expense reimbursement (mileage, meals, lodging, etc.).

1. Meeting Date: April 11, 2018

   Meeting: SF Bay Restoration Authority

   Location: Santa Rosa City Hall, Santa Rosa, CA

Supervisor sought reimbursement from the County for meetings that he attended in his capacity as a County Supervisor during the month of April 2018.

**Supervisor Diane Burgis - April 2018 AB1234 Re**

(Government Code Section 53232.3(d) requires that members legislative
attended for which there has been expense reimbursement (mileage,

| Date | Meeting Name | Location |
|---|---|---|
| 2-Apr | Brentwood Rotary | Brentwood |
| 2-Apr | Meeting with Chief Probation Officer, Todd Billeci | Brentwood |
| 2-Apr | Constituent Meeting | Concord |
| 2-Apr | First 5 Commission Meeting | Concord |
| 3-Apr | Meeting with Brentwood Councilmember, Bailey Grewal | Brentwood |
| 3-Apr | Meeting with Bethel Island MAC Member, Belinda Bittner | Brentwood |
| 3-Apr | Meeting with Byron MAC Member, Tim Maggiore | Brentwood |
| 3-Apr | Meeting with Byron MAC Member, Linda Thuman | Brentwood |
| 3-Apr | Meeting with Byron MAC Member, Mike Nisen | Brentwood |
| 4-Apr | Meeting with Sanford Institute of Philanthropy | Martinez |
| 4-Apr | Meeting with Senaca Family of Agencies | Martinez |
| 4-Apr | Meeting with Environmental Health Director, Marilyn Underwood | Martinez |
| 4-Apr | Meeting with First 5 Executive Director, Sean Casey | Martinez |
| 4-Apr | Mental Health Commission Meeting | Pleasant Hill |
| 5-Apr | Illegal Dumping Forum | Antioch |
| 5-Apr | Meeting with Conservation and Development Director, John Kopchik | Antioch |
| 5-Apr | Constituent Meeting | Brentwood |
| 5-Apr | Meeting with Brentwood Councilmember, Karen Rarey | Brentwood |
| 6-Apr | Delta Counties Coalition Conference Call | Brentwood |
| 9-Apr | Meeting with One Contra Costa Coalition | Martinez |
| 9-Apr | Legislation Committee Meeting | Martinez |
| 9-Apr | Internal Operations Committee Meeting | Martinez |
| 9-Apr | First 5 California Summit | Glendale |
| 10-Apr | First 5 California Summit | Glendale |
| 10-Apr | Testify at Metropolitan Water District | Los Angeles |
| 11-Apr | First 5 California Summit | Glendale |
| 12-Apr | First 5 California Summit | Glendale |
| 12-Apr | East Contra Costa Regional Fee & Finance Authority | Antioch |
| 12-Apr | State Route 4 Bypass Authority | Antioch |
| 13-Apr | Delta Counties Coalition Conference Call | Brentwood |
| 14-Apr | Literacy Women's Luncheon | Pleasant Hill |
| 16-Apr | Meeting with County Staff | Brentwood |

| | | |
|---|---|---|
| 16-Apr | Site Visit at V. Sattui w/County Staff | St. Helena |
| 16-Apr | Meeting with Napa County Director of Planning, David Morrison | Napa |
| 16-Apr | Meeting with Napa County Supervisor, Diane Dillon | Napa |
| 17-Apr | Board of Supervisors Meeting | Martinez |
| 18-Apr | Constituent Meeting | Martinez |
| 18-Apr | Groundbreaking Ceremony for Los Medanos Community College new Brentwood Center | Brentwood |
| 18-Apr | Meeting with Ohmbudsman Services of Contra Costa & Solano | Brentwood |
| 19-Apr | UCSF Benioff Children's Hospital Oakland Ribbon Cutting | Oakland |
| 19-Apr | East Bay Leadership Council Journalists View Event | Concord |
| 21-Apr | Earth Day Event | Antioch |
| 23-Apr | Constituent Meeting | Brentwood |
| 23-Apr | Meeting with Brentwood Councilmember, Claudette Staton | Brentwood |
| 23-Apr | Public Service Announcement with Oakley Police Chief Thorsen and Officer Ditto | Brentwood |
| 23-Apr | Meeting with the Rainbow Community Center | Brentwood |
| 23-Apr | East Contra Costa County Habitat Conservancy Meeting | Pittsburg |
| 24-Apr | Board of Supervisors Meeting | Martinez |
| 24-Apr | Host Mega Chamber Mixer w/ Antioch, Brentwood, Oakley and Discovery Bay | Brentwood |
| 25-Apr | Engaging Immigrant Communities in Contra Costa County | Martinez |
| 25-Apr | Meeting with Antioch Mayor, Sean Wright and City Manager, Ron Bernal | Pittsburg |
| 25-Apr | Delta 6 Meeting | Pittsburg |
| 25-Apr | Meeting with Contra Costa Behaviorial Health Director, Dr. White | Brentwood |
| 25-Apr | Constituent Meeting | Brentwood |
| 25-Apr | Tri-Delta Transit Meeting | Antioch |
| 26-Apr | Meeting with County Public Works Director, Brian Balbas | Martinez |
| 26-Apr | Open Space Parks & EBRPD Liaison Committee Meeting | Martinez |
| 26-Apr | Meeting with County Staff | Martinez |
| 26-Apr | Office of Supervisor Federal Glover Open House | Pittsburg |
| 27-Apr | Delta Counties Coalition Conference Call | Brentwood |
| 28-Apr | DEA Drug Take Back Event | Oakley |
| 28-Apr | Congreso Familiar Event | Oakley |
| 30-Apr | Non-Profit Round Table Meeting | Antioch |
| 30-Apr | Constituent Meeting | Brentwood |
| 30-Apr | Meeting with Deputy Public Defender, K.C. Donovan | Brentwood |

* Reimbursement may come from an agency other than Contra Costa County

**eport**

bodies report on meetings
meals, lodging, etc).

| Purpose |
| --- |
| Community Outreach |
| Business Meeting |
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| Business Meeting |
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| Community Outreach |
| Business Meeting |
| Community Outreach |
| Community Outreach |
| Community Outreach |
| Business Meeting |
| Business Meeting |

**Supervisor Karen Mitchoff**
**April 2018**

| DATE | MEETING NAME | LOCATION | PURPOSE |
|---|---|---|---|
| 04/04/18 | BAAQMD Board Meeting | San Francisc | Decisions on agenda items |
| 04/04/18 | ABAG Regional Planning Committee | San Francisc | Decisions on agenda items |
| 04/09/18 | TWIC Meeting | Martinez | Decisions on agenda items |
| 04/10/18 | Board of Supervisors Meeting | Martinez | Decisions on agenda items |
| 04/10/18 | Discover and Drive Event | Richmond | Community Outreach |
| 04/13/18 | ABAG Administrative Committee | San Francisc | Decisions on agenda items |
| 04/17/18 | Board of Supervisors Meeting | Martinez | Decisions on agenda items |
| 04/18/18 | CCTA Authority Board Meeting | Walnut Creek | Decisions on agenda items |
| 04/19/18 | East Bay Leadership Council's Leadership in Journalism | Concord | Community Outreach |
| 04/24/18 | Board of Supervisors Meeting | Martinez | Decisions on agenda items |
| 04/25/18 | BAAQMD Budget and Finance Committee | San Francisco | Decisions on agenda items |
| 04/26/18 | BAAQMD Mobile Source Meeting | San Francisc | Decisions on agenda items |
| 04/26/18 | CCCSWA Meeting | Walnut Creek | Decisions on agenda items |
| 04/29/18 | CAPA Internship Orientation | Moraga | Community Outreach |

## Supervisor Candace Andersen – Monthly Meeting Report *April 2018*

| Date | Meeting | Location |
|---|---|---|
| 2 | Hiring Outreach | Martinez |
| 3 | Recycle Smart | Walnut Creek |
| 9 | TWIC | Martinez |
| 9 | Internal Ops | Martinez |
| 9 | TRAFFIX | Danville |
| 10 | Board of Supervisors | Martinez |
| 10 | Innovation Tri Valley | Pleasanton |
| 11 | CCCERA | Concord |
| 12 | East Bay EDA | Oakland |
| 13 | Lafayette Citizen of Year | Lafayette |
| 14 | Sentinels of Freedom | Danville |
| 16 | TVTC | Livermore |
| 16 | Board of Supervisors | Martinez |
| 18 | LAFCO | Martinez |
| 19 | CCCTA | Concord |
| 23 | Family & Human Services | Martinez |
| 23 | Traffix Operations | Danville |
| 24 | Board of Supervisors | Martinez |
| 26 | Solid Waste Authority | Walnut Creek |
| 28 | Moraga Citizen of the Year | Moraga |
| 29 | CAPA Intern Training | Moraga |
| 29 | Lafayette Veterans Memorial | Lafayette |

Contra Costa County

To: Board of Supervisors

From: Karen Mitchoff, District IV Supervisor

Date: May 22, 2018

Subject: Declaring May 15th to June 15th as Tourette Syndrome Awareness Month in Contra Costa County

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

---

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Colleen Isenberg, 925-521-7100

By: , Deputy

**cc:**

ATTACHMENTS

Resolution No.
2018/178

*The Board of Supervisors of*
*Contra Costa County, California*

**In the matter of:** **Resolution No. 2018/178**

**May 15th to June 15th Tourette Syndrome Awareness Month**

Whereas, Tourette Syndrome (TS) is a neurodevelopmental disorder characterized by a person being diagnosed before the age of 18 with at least two motor tics and one vocal tic; and

Whereas, many people with TS also suffer from a range of co-occurring conditions including ADHD, OCD, anxiety and learning disabilities. Many children with Tourette Syndrome struggle in our local school systems despite often being gifted due to a systemic lack of understanding of TS; and

Whereas, the Tourette Association of America (TAA) and its Northern California & Hawaii Chapter are working to make life better for all people affected by Tourette and Tic Disorders; and

Whereas, TAA's mission includes: raising public awareness and fostering social acceptance, working to advance understanding, treatment and care, and educating professionals to better serve the needs of children, adults and families challenged by Tourette Syndrome and Tic Disorders; and

Whereas, TAA also advocates for public policies and services that promote positive school, work and social environments for those with Tourette, providing help, hope and a supportive community across the nation, and empowering our community to deal with the complexities of this spectrum of disorders; and

Whereas, TAA Youth Ambassadors are trained in Washington, DC to be advocates for those with Tourette Syndrome and are active in the local community providing presentations to various groups including schools; and

Whereas, the Northern California & Hawaii Chapter of TAA is a volunteer-based group that has hosted support groups and meetings for children, adults and families with Tourette Syndrome for many years in Concord and has recently expanded their support group to include Sacramento, Santa Cruz and Fresno; and

Whereas, the Northern California & Hawaii Chapter volunteer board members are active advocates in the community often joining families of children with Tourette Syndrome at IEP and 504 meetings, manifestation determination hearings and expulsion meetings to advocate for children and youth with TS; and

Whereas, in order to raise awareness, the chapter hosts an annual Tourette Syndrome Family and Community Education Day, has conducted presentations at local colleges, provided information and support regarding Tourette Syndrome to school and medical personnel, and hosted a Facebook group to provide support to families.

Now, Therefore, Be It Resolved that the Board of Supervisors declares May 15th to June 15th 2018 as Tourette Syndrome Awareness Month in Contra Costa County.

_____

**KAREN MITCHOFF**

Chair, District IV Supervisor

_____

**JOHN GIOIA**

District I Supervisor

_____

**CANDACE ANDERSEN**

District II Supervisor

_____

**DIANE BURGIS**

District III Supervisor

_____

**FEDERAL D. GLOVER**

District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra Costa County

To: Board of Supervisors

From: Karen Mitchoff, District IV Supervisor

Date: May 22, 2018

Subject: Declaring June 2018, Lesbian, Gay, Bisexual, Transgender, Queer and Questioning (LGBTQ) Pride Month in Contra Costa County

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

---

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Colleen Isenberg, 925-521-7100

By: , Deputy

**cc:**

ATTACHMENTS

Resolution No.
2018/185

*The Board of Supervisors of*
*Contra Costa County, California*

**In the matter of:** **Resolution No. 2018/185**

**Declaring June 2018, Lesbian, Gay, Bisexual, Transgender, Queer and Questioning (LGBTQ) Pride Month in Contra Costa County.**

Whereas, the month of June was chosen for LGBTQ (lesbian, gay, bisexual, transgender and queer/questioning) Pride Month to commemorate the rise of the LGBTQ civil rights movement that grew out of spontaneous civil rights demonstrations by members of the LGBTQ community against unjust police raids that took place in New York City at the end of June 1969, known as the Stonewall Riots; and

Whereas, former President Obama designated the Stonewall Inn as a National Monument in 2016 because of the role it played in the struggle for "homophile rights" in the U.S., the Stonewall Riots inspires LGBTQ people, not only in the U.S., but throughout the world in the struggle for civil rights; and

Whereas, Contra Costa Health Services, Contra Costa Regional Medical Center and Behavioral Health Division through the work of the LGBT Pride Initiative received the prestigious national designation of Leader in Healthcare Equality for the past five years, and again in 2017 by the Human Rights Campaign, the largest LGBTQ advocacy organization in the United States; and

Whereas, Contra Costa Health Services identified the need for a specialty clinic to serve the transgender community and started the first Gender Clinic in October 2016, the only clinic for transgender care between Oakland and Sacramento; and

Whereas, research shows that 2-7% of all adults are lesbian, gay or bisexual and through The Family Acceptance Project at SFSU research shows that families, parents, caregivers and guardians can have a very dramatic impact on the well-being of their LGBTQ youth demonstrating family and community acceptance promotes health and protects LGBTQ young people against risk; and

Whereas, more same-sex families are identifying themselves to the US Census in 2010 placing Contra Costa County 15th in the state's 58 counties with the most same-sex couples per capita; and

Whereas, the Rainbow Community Center is the only organization in Contra Costa County that is solely focused on serving the LGBTQ community with priorities to build services for LGBTQ youth, seniors, people living with HIV/AIDS and to develop community building efforts that will diminish the sense of isolation and promote greater acceptance of all LGBTQ people; and

Whereas, Contra Costa County's LGBTQ service partners include the County's Pride Initiative, Rainbow Community Center, RYSE Center, Richmond Rainbow Pride, Center for Human Development, Gender Spectrum, El Cerrito High School James

Morehouse Project, Oakland/East Bay Gay Men's Chorus, Parents and Friends of Lesbians and Gays (PFLAG), Queer Alliances Contra Costa, Mt. Diablo Peace and Justice Center, and the Welcoming Churches coalition; and

Whereas, in Contra Costa County, LGBTQ community residents, employees, businesses, and organizations have made and continue to make, great and lasting contributions adding to the rich diversity of this County; and

Whereas, the Contra Costa County Board of Supervisors supports and promotes inclusion, non-discrimination, and equality among all County residents.

Now, Therefore, Be It Resolved that the Board of Supervisors of Contra Costa County declares the month of June 2018 as LGBTQ Pride Month in Contra Costa County and encourages a safe and accepting environment for all members of the community.

_____

**KAREN MITCHOFF**

Chair, District IV Supervisor

_____

**JOHN GIOIA**

District I Supervisor

_____

**CANDACE ANDERSEN**

District II Supervisor

_____

**DIANE BURGIS**

District III Supervisor

_____

**FEDERAL D. GLOVER**

District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: PROCLAIM the Week of May 20-26, 2018 as "National Public Works Week" in Contra Costa County

**RECOMMENDATION(S):**
ADOPT Resolution No. 2018/177 proclaiming the week of May 20-26, 2018 as "National Public Works Week" in Contra Costa County, as recommended by the Public Works Director, Countywide.

**FISCAL IMPACT:**
No fiscal impact.

**BACKGROUND:**
The Public Works Department would like to involve all citizens and civic organizations in Public Works Week by providing information about the Public Works Department and to share with them the challenges involved in providing public works services and to recognize the contributions that public works personnel make every day to our health, safety and comfort.

**CONSEQUENCE OF NEGATIVE ACTION:**
Contra Costa County will not be able to participate in the nationwide Public Works Week.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Carrie Ricci, (925) 313-2235

**cc:**

ATTACHMENTS

Resolution No.
2018/177

*The Board of Supervisors of*
*Contra Costa County, California*

**In the matter of:** **Resolution No. 2018/177**

**RECOGNIZING NATIONAL PUBLIC WORKS WEEK MAY 20-26, 2018**

WHEREAS public works services provided in our community are in integral part to our citizen's everyday lives; and

WHEREAS the support of an understanding and informed citizenry is vital to the efficient operations of public works systems and programs such as our fleet services, airports, creeks and channels, streets and highways, public buildings, urban development, print and mail; and

WHEREAS the health and safety, and comfort of this community greatly depend on these facilities and services; and

WHEREAS the quality and effectiveness of these facilities, as well as their planning, design, and construction, are vitally dependent upon the efforts and skill of public works officials.

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors of Contra Costa County does hereby recognize May 20-26, 2018 as NATIONAL PUBLIC WORKS WEEK in Contra Costa County, and call upon all citizens and civic organizations to acquaint themselves with the challenges involved in providing public works services and to recognize the contributions that public works personnel make every day to improve and maintain our health, safety, and comfort. PASSED by unanimous vote of the Board of Supervisors members present this 22nd day of May, 2018.

_____
**KAREN MITCHOFF**
Chair, District IV Supervisor

_____
**JOHN GIOIA**
District I Supervisor

_____
**CANDACE ANDERSEN**
District II Supervisor

_____
**DIANE BURGIS**
District III Supervisor

_____
**FEDERAL D. GLOVER**
District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra Costa County

To: Board of Supervisors

From: Karen Mitchoff, District IV Supervisor

Date: May 22, 2018

Subject: Recognizing the relief efforts that supported the Concord community during the Galindo Fire in April of 2018

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

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Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Colleen Isenberg, 925-521-7100

By: , Deputy

**cc:**

ATTACHMENTS

Resolution No.
2018/186

*The Board of Supervisors of*
*Contra Costa County, California*

**In the matter of:** **Resolution No. 2018/186**

**recognizing the relief efforts that supported the Concord community during the Galindo Fire at the Renaissance Two construction site for apartments that began on April 24, 2018.**

Whereas, in the early morning hours of April 24th, Contra Costa Fire Protection District (ConFire) responded to a blaze at approximately 1:00 am at the construction site of new apartments at Galindo Street near Concord Avenue in Concord, which was quickly declared a 3 alarm fire; and

Whereas, the fire was contained to the construction site and did not spread to other structures in the downtown area; and

Whereas, the Concord Police Department managed the evacuation of the neighboring apartments and ensured the neighboring 250 residents were evacuated and reached safety; and

Whereas, the Red Cross established a disaster relief shelter at First Presbyterian Church of Concord, 1965 Colfax Street and the church opened their facilities to the evacuees; and

Whereas, the following local Concord businesses donated food or resources to the evacuees and first responders: Pacific Services Credit Union, Apparel Clean Linen Company, Taqueria Los Gallos, Kinder's Meats, Deli & BBQ, Vinnie's Bar & Grill, The Veranda, Whole Foods 365, MOD Pizza, Super Duper Burger, and Umpqua Bank; and

Whereas, White Pony Express, a local non-profit organization that connects vendor donated food to those in need, donated lunches to the evacuees; and

Whereas, Contra Costa County Health Services managed health advisories regarding the air quality during the days that fire burned; and

Whereas, the Contra Costa Crisis Center shared information with the public during the crisis via 211 crisis hotline; and

Whereas, several departments within the City of Concord provided support during the crisis: Office of the City Manager, Community and Economic Development, Planning and Housing, Economic Development, Building, Engineering, Traffic Engineering and Transportation Planning and Public works; and

Whereas, these contributions ranged from response and status updates to the community, verifying building integrity of Renaissance One apartment building, setting up and managing road closures, assisting in temporary shelters, cleaning the streets of the debris, etc.

Now, Therefore, Be It Resolved that the Contra Costa County Board of Supervisors does hereby honor ConFire, the City of Concord, the Concord Police Department, Contra Costa County Health Services, Red Cross and the Contra Costa Crisis Center for doing an extraordinary job protecting the community. Now therefore be it further resolved that Board of Supervisors recognizes The Veranda, Whole Foods 365, MOD Pizza, Super Duper Burger, Umpqua Bank, First Presbyterian Church of Concord, Apparel Clean Linen Company, Taqueria Los Gallos, Kinder's Meats, Pacific Service Credit Union, Vinnie's Bar & Grill and White Pony Express for their extraordinary generosity and contributions to all those in need during the crisis.

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**KAREN MITCHOFF**
Chair, District IV Supervisor

_____

**JOHN GIOIA**
District I Supervisor

_____

**CANDACE ANDERSEN**
District II Supervisor

_____

**DIANE BURGIS**
District III Supervisor

_____

**FEDERAL D. GLOVER**
District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Recognizing May 23, 2018 as Emergency Medical Services (EMS) for Children Day

**RECOMMENDATION(S):**
ADOPT Resolution No. 2018/179 designating May 23, 2018 as Emergency Medical Services for Children Day.

**BACKGROUND:**
May 23, 2018 is Emergency Medical Services for Children Day. This resolution recognizes the value and accomplishments of our emergency care providers caring for the children in need using our EMS system.

**CHILDREN'S IMPACT STATEMENT:**
The important work of those providing Emergency Medical Services to the children of Contra Costa County would not be recognized.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Patricia Frost, 925-646-4690

By: , Deputy

**cc:** Rachel Morris, Tasha Scott, Marcy Wilhelm

ATTACHMENTS

Resolution No.
2018/179

*The Board of Supervisors of*
*Contra Costa County, California*

**In the matter of:** **Resolution No. 2018/179**

**Recognizing May 23, 2018 as EMERGENCY MEDICAL SERVICES FOR CHILDREN (EMSC) DAY**

WHEREAS, Emergency Medical Services for Children supports EMS, the community-based public service whose presence is vital to children in need; and
WHEREAS, the needs of children are different than the needs of adults in medical emergencies; and
WHEREAS, Emergency Medical Services for Children promotes the high-level emergency care given by EMS providers with pediatric emergency skills; and
WHEREAS, Emergency Medical Services for Children assists in the implementation of training for use of advanced technical equipment and services in preparation to save the life of a child; and
WHEREAS, EMS providers are prepared to respond to children who access the EMS system; and
WHEREAS, Emergency Medical Services for Children works with physicians, nurses, social workers, psychologists, emergency medical technicians, paramedics, firefighters, educators, administrators and others to identify and address the issues surrounding the provision of optimal pediatric care; and
WHEREAS, Emergency Medical Services for Children assists in the development of training programs and guidelines for emergency care providers so that children with special health care needs receive timely, appropriate care; and
WHEREAS, it is proper and timely to bring recognition to the value and accomplishments of such dedicated men and women by designating Emergency Medical Services for Children Day.

NOW, THEREFORE, BE IT RESOLVED THAT in recognition of this event, the Board of Supervisors hereby proclaims the date of May 23, 2018, as EMERGENCY MEDICAL SERVICES FOR CHILDREN (EMSC) DAY and encourages the community to observe this day with appropriate programs, ceremonies and activities.

**KAREN MITCHOFF**
Chair, District IV Supervisor

**JOHN GIOIA**
District I Supervisor

**CANDACE ANDERSEN**
District II Supervisor

**DIANE BURGIS**
District III Supervisor

**FEDERAL D. GLOVER**
District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Designating May 20 - 26, 2018 as National Emergency Medical Services (EMS) Week

**RECOMMENDATION(S):**
ADOPT Resolution No. 2018/181 designating May 20-26, 2018 as National Emergency Medical Services Week, with the theme of "EMS STRONG: Stronger Together".

**FISCAL IMPACT:**
May 20-26, 2018 is National Emergency Medical Services Week. This resolution honors local EMS responders (emergency medical technicians, paramedics, police, firefighters, emergency nurses, emergency physicians, emergency medical dispatchers, EMS educators, EMS administrators, and others) for the critical role they play in our EMS system.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Patricia Frost, 925-646-4690

**cc:** Rachel Morris, Tasha Scott, Marcy Wilhelm

ATTACHMENTS

Resolution No.
2018/181

*The Board of Supervisors of*
*Contra Costa County, California*

**In the matter of:** **Resolution No. 2018/181**

**Recognizing May 20 – 26, 2018 as Emergency Medical Services Week**

WHEREAS, emergency medical services (EMS) is a vital public service; and
WHEREAS, access to quality emergency care dramatically improves the survival and recovery rate of those who experience sudden illness or injury; and
WHEREAS, the members of emergency medical services teams are ready to provide compassionate, lifesaving care to those in need twenty-four (24) hours a day, seven (7) days a week; and
WHEREAS, the emergency medical services system consists of emergency medical dispatchers, law enforcement officers, emergency medical technicians, paramedics, firefighters, emergency nurses, emergency physicians, first responders, educators, and administrators; and
WHEREAS, the members of emergency medical services teams, whether career or volunteer, engage in thousands of hours of specialized training and continuing education to enhance their lifesaving skills; and
WHEREAS, EMS plays a critical role in public outreach and injury prevention, and is evolving in its role as an important member of the healthcare community; and
WHEREAS, the year 2018 marks the 41st anniversary of the implementation of a paramedic program enhanced EMS System within Contra Costa County; and
WHEREAS, Contra Costa EMS System is recognized in the state as a leader in exceptional EMS system performance improvement practices focused on improving patient care outcomes; and
WHEREAS, in the last 11 years the EMS System within Contra Costa County has sustained an exceptional Trauma System and implemented a High Risk Heart Attack (STEMI) System, Stroke System and a Cardiac Arrest System of Care; and
WHEREAS, it is appropriate to recognize the value and the accomplishments of emergency medical services providers by designating Emergency Medical Services Week;

NOW, THEREFORE, BE IT RESOLVED THAT Contra Costa County, in recognition of this event, does hereby proclaim the week of May 20 – 26 2018, as EMERGENCY MEDICAL SERVICES WEEK with the theme "EMS STRONG: Stronger Together", and encourage the community to observe this week with appropriate programs, ceremonies, and activities.

**KAREN MITCHOFF**
Chair, District IV Supervisor

**JOHN GIOIA**
District I Supervisor

**CANDACE ANDERSEN**
District II Supervisor

**DIANE BURGIS**
District III Supervisor

**FEDERAL D. GLOVER**
District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra Costa County

To: Board of Supervisors

From: Candace Andersen, District II Supervisor

Date: May 22, 2018

Subject: Resolution recognizing the Honorable Barry P. Goode upon his retirement from the Contra Costa County Superior Court

---

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

---

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

Contact: Lauri Byers, (925) 957-8860

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:**

ATTACHMENTS

Resolution No.
2018/187

*The Board of Supervisors of*
*Contra Costa County, California*

**In the matter of:** **Resolution No. 2018/187**

**recognizing the Honorable Barry P. Goode upon his retirement from the Contra Costa County Superior Court.**

**Whereas,** Barry Goode has been a judge of the Contra Costa County Superior Court since 2003; and

**Whereas,** Judge Goode served as the court's complex civil litigation judge since January 2010, with a two-year break, 2013-14, to serve as Presiding Judge, before that he was the court's Assistant Presiding Judge, and worked in criminal and family law assignments; and

**Whereas,** Judge Goode has been active in the statewide administration of the judicial branch, having been appointed by the Chief Justice to the Judicial Council's Trial Court Budget Advisory Committee, the Trial Court Presiding Judges Advisory Committee, the Access and Fairness Advisory Committee, the Elkins Family Law Task Force, the Family and Juvenile Law Advisory Committee, and the Blue Ribbon Panel of Experts on Arbitration Ethics. He has also taught at the B.E. Witkin Judicial College, the Cow County Institute and many other judicial continuing education programs. He was an adjunct professor at the University of San Francisco Law School and has lectured widely; and

**Whereas,** He currently serves on the Board of Directors of the California Supreme Court Historical Society and on the Board of Governors of the Association of Business Trial Lawyers of Northern California. He is a member of the American Law Institute; and

**Whereas,** After graduating from Harvard Law School, he began his legal career as a Special Assistant to United States Senator Adlai E. Stevenson. He then moved to California, and spent twenty-five years with McCutchen, Doyle, Brown and Enersen, specializing in complex litigation and environmental law. Before taking the bench he worked as Legal Affairs Secretary to Governor Gray Davis; and

**Whereas,** Judge Goode has published two law review articles, an essay in *California History,* numerous short pieces for various legal and historical publications, op-eds in the San Francisco Chronicle and the Sacramento Bee, and cowboy poetry.

**Now, Therefore, Be It Resolved** that the Board of Supervisors of Contra Costa County does hereby honor The Honorable Barry P. Goode for his dedication to the residents of Contra Costa County.

_____

**KAREN MITCHOFF**
Chair, District IV Supervisor

_____ _____

**JOHN GIOIA** **CANDACE ANDERSEN**
District I Supervisor District II Supervisor

_____

**DIANE BURGIS**

District III Supervisor

_____

**FEDERAL D. GLOVER**

District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra
Costa
County

To: Board of Supervisors

From: Karen Mitchoff, District IV Supervisor

Date: May 22, 2018

Subject: Resolutio honoring the Life of Sgt. Herman Benjamin Rellar

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

---

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Colleen Isenberg, 925-521-7100

By: , Deputy

**cc:**

ATTACHMENTS

Resolution No.
2018/196

The Board of Supervisors of
Contra Costa County, California

**In the matter of:** **Resolution No. 2018/196**

**Honoring the Life of Sgt. Herman Benjamin Rellar**

Whereas, from 1952-56 Herman served in the Navy, onboard the USS AV-19 Hancock, during the Korean War; and

Whereas, in 1956, Herman was sworn in as a Reserve Police Officer for the City of Pittsburg starting his career in law enforcement; and

Whereas, in 1959, he became a Deputy Sheriff for Contra Costa County and served in several different capacities until he retired as a Sergeant in 1986; and

Whereas, a day after retiring in 1986, he was sworn in as Deputy Reserve and served for another 25 years retiring in 2010; and

Whereas, his extensive career included founding the Contra Costa County Search and Rescue and Explorer Units; and

Whereas, during his career he always tried to make sure his demeanor, decisions and actions would reflect positively on his profession; and

Whereas, Herman loved walking a foot beat in downtown Danville where sharing a smile and stopping to speak with shop keepers and passersbys was his daily goal; and

Whereas, officers affectionately referred to Herman as a "Cops Cop"; and

Whereas, along with being a deputy Herman served as a Peace Officer Standards and Training (POST) subject matter expert and consultant; and

Whereas, from 1962 to 2016, he instructed "tens of thousand" of students at various police academies at various colleges, training centers, public and private venues throughout CA; and

Whereas, he also operated a polygraph business and firearms consulting and training business; and

Whereas, Herman was known as a happy, kind, giving and unpretentious man who always was thinking of the well-being of others; and

Whereas, he was a member of the Aahmes Shrine Motorcycle Patrol, a member of Freemason Lodge 429, B.P.O.E. 1474, Aahmes Shrine and DMS Good Sam club; and

Whereas, Herman is survived by his wife, Jody, daughter, Catherine Cook; brother, William Rellar and family; and grandchildren, Robert Whitmore (& spouse Amanda, Great-Grandchildren: William, Wyatt, Weston), Amanda Whitmore, and Michael

Cook; former spouse Beverly Rellar.

Now, Therefore, Be It Resolved that the Board of Supervisors honors Sgt. Herman Benjamin Rellar for his lifetime of service to our community and his commitment to protecting the public and improving safety.

_____

**KAREN MITCHOFF**

Chair, District IV Supervisor

_____

**JOHN GIOIA**

District I Supervisor

_____

**CANDACE ANDERSEN**

District II Supervisor

_____

**DIANE BURGIS**

District III Supervisor

_____

**FEDERAL D. GLOVER**

District V Supervisor

I hereby certify that this is a true and correct copy of an action taken
and entered on the minutes of the Board of Supervisors on the date
shown.

ATTESTED: May 22, 2018

David J. Twa,

By: _____, Deputy

Contra Costa County

To: Board of Supervisors

From: Federal D. Glover, District V Supervisor

Date: May 22, 2018

Subject: APPOINT Joe Metro to the Contra Costa County Mental Health Commission - At-Large Seat

**RECOMMENDATION(S):**
APPOINT the following individual to the District V at Large seat on the Contra Costa County Mental Health Commission with a term expiring June 30, 2019, as recommended by Supervisor Glover.

Joe Metro

**FISCAL IMPACT:**
None.

**BACKGROUND:**
The Contra Costa County Mental Health Commission was established by order of the Contra Costa County Board of Supervisors on June 22, 1993, pursuant to the Welfare & Institutions Code 5604, also known as the Bronzan-McCorquodale Act, Stats. 1992, c. 1374 (A.B. 14). The primary purpose of the Commission is to serve in an advisory capacity to the Board of Supervisors and to the Mental Health Division and its staff. Commissioners are appointed by members of the County Board of Supervisors from each of the five districts for a term of three years. Each district has a consumer of mental health services, family member and an at-large representative on the Commission, for a total of 15 members plus a representative from the Board of Supervisors.

**CONSEQUENCE OF NEGATIVE ACTION:**
The seat would remain vacant.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vincent Manuel, (925) 335-8200

**cc:**

Contra Costa County

To: Board of Supervisors

From: Diane Burgis, District III Supervisor

Date: May 22, 2018

Subject: Appointment to the Alcohol and Other Drugs Advisory Board

**RECOMMENDATION(S):**
APPOINT Cynthia Chavez to the District 3-A seat on the Alcohol and Other Drugs Advisory Board to a term expiring June 30, 2019, as recommended by Supervisor Diane Burgis.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
The mission of the Contra Costa County Alcohol and Other Drugs Advisory Board is to assess family and community needs regarding treatment and prevention of alcohol and drug abuse problems. They report their findings and recommendations to the Contra Costa Health Services Department, the Board of Supervisors and the communities they serve. The Alcohol and Other Drugs Advisory Board works in collaboration with the Alcohol and Other Drugs Services Division of Contra Costa Health Services. They provide input and recommendations as they pertain to alcohol and other drugs prevention, intervention, and treatment services.

The District 3-A seat was vacated by the Board of Supervisors on May 1, 2018. Applications were accepted and the recommendation to appoint the above individual was then determined.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Lea Castleberry, (925) 252-4500

**cc:**

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Advisory Council on Aging Resignation

**RECOMMENDATION(S):**
ACCEPT the resignation of Dr. Robert Leasure, DECLARE vacant the At-Large Seat #16 on the Advisory Council on Aging, and DIRECT the Clerk of the Board to post the vacancy as recommended by the Employment and Human Services Director.

**FISCAL IMPACT:**
Not applicable.

**BACKGROUND:**
Dr. Leasure was appointed to the At-Large Seat #16 on October 17, 2017. The seat expires on September 30, 2019.

The Advisory Council on Aging (ACOA) provides a county-wide planning, cooperation, and coordination forum for individuals and groups interested in improving and developing services and opportunities for older residents of the County. ACOA provides leadership and advocacy on behalf of older persons and serves as a channel of communication and information on aging.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Advisory Council on Aging may not be able to conduct routine business.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Elaine Burres, (925) 608-4960

By: , Deputy

**cc:**

Contra Costa County

To: Board of Supervisors

From: Candace Andersen, District II Supervisor

Date: May 22, 2018

Subject: APPOINTMENT TO THE ALCOHOL AND OTHER DRUGS ADVISORY BOARD OF CONTRA COSTA COUNTY

**RECOMMENDATION(S):**
APPOINT the following person to the District II-A seat of the Alcohol and Other Drugs Advisory Board of Contra Costa County for a term with an expiration date of June 30, 2019.

Sienna Cowing
Alamo, CA 94507

**FISCAL IMPACT:**
None.

**BACKGROUND:**
The mission of the Contra Costa County Alcohol and Other Drugs Advisory Board is to assess family and community needs regarding treatment and prevention of alcohol and drug abuse problems. They report their findings and recommendations to the Contra Costa Health Services Department, the Board of Supervisors, and the communities they serve. The Alcohol and Other Drugs Advisory Board works in collaboration with the Alcohol and Other Drugs Services Division of Contra Costa Health Services. They provide input and recommendations as they pertain to alcohol and other drugs prevention, intervention, and treatment services.

**CONSEQUENCE OF NEGATIVE ACTION:**
The seat will remain vacant.

☑ APPROVE ☐ OTHER

☐ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Jill Ray, 925-957-8860

By: , Deputy

**cc:** District 2 Supervisor, Maddy Book, AOD, Appointee

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Declare Emergency Medical Care Committee (EMCC) Vacant Seats

**RECOMMENDATION(S):**
ACCEPT resignations of Derek Krause, Cynthia Belon, Ross Fay, and Jon Michaelson; DECLARE vacancies in Seat (B6) Contra Costa Fire Chiefs' Association Representative, Seat (B13) Contra Costa Health Services – Behavioral Health Representative, Seat (C2) Air Medical Transportation Provider, Seat (C5) Public Provider Field Paramedic, on the Emergency Medical Care Committee; and DIRECT the Clerk of the Board to post these vacancies.

**FISCAL IMPACT:**
Not applicable.

**BACKGROUND:**
The following Emergency Medical Care Committee members have resigned: Derek Krause, holder of Seat (B6); Cynthia Belon, holder of Seat (B13); Ross Fay, holder of Seat (C2); and Jon Michaelson, holder of Seat (C5).

**CONSEQUENCE OF NEGATIVE ACTION:**
The seats will remain vacant.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Patricia Frost, 925-646-4690

By: , Deputy

**cc:** Tasha Scott, Marcy Wilhelm, Rachel Morris

Contra Costa County

To: Board of Supervisors

From: Candace Andersen, District II Supervisor

Date: May 22, 2018

Subject: RESIGNATION FROM THE ALAMO POLICE SERVICES ADVISORY COMMITTEE

**RECOMMENDATION(S):**
ACCEPT the resignation of Anthony Rocca, DECLARE a vacancy in the Alternate 2 seat on the Alamo Police Services Advisory Committee, and DIRECT the Clerk of the Board to post the vacancy, for the of the term with an expiration date of December 31, 2018, as recommended by Supervisor Candace Andersen.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
Established on November 18, 1969, by Board Resolution 69/765, the purpose of the County Service Area P-2B Citizens Advisory Committee is to advise the Board of Supervisors and the Sheriff's Department on the needs of the Alamo community for extended police services which shall include, but not be limited to, enforcement of the State Vehicle Code, crime prevention, and litter control.

On March 19, 2013, the Board of Supervisors approved a Board Order that retitled the County Service Area P-2B Citizens Advisory Committee to the "Alamo Police Services Advisory Committee".

- [x] APPROVE
- [ ] OTHER
- [ ] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Jill Ray, 925-957-8860

By: , Deputy

**cc:** District 2 Supervisor, Maddy Book, APSAC, Appointee

BACKGROUND: (CONT'D)

Alamo Police Services Advisory Committee is comprised of nine regular members and two alternates who each serve a two year term.

Mr. Rocca has moved from the area and is no longer eligible to serve on APSAC.

CONSEQUENCE OF NEGATIVE ACTION:

The seat will remain filled without the benefit of a member attending.

Contra Costa County

To: Board of Supervisors

From: FAMILY & HUMAN SERVICES COMMITTEE

Date: May 22, 2018

Subject: In-Home Supportive Services (IHSS) Public Authority Advisory Committee Appointments

**RECOMMENDATION(S):**
REAPPOINT Keegan Duncan to the Consumer Seat of Any Age - Seat 4 and Joe Juarez to the Consumer Under 60 - Seat 2 on the In-Home Supportive Services Public Authority Advisory Committee with terms expiring March 6, 2022.

**FISCAL IMPACT:**
There is no fiscal impact.

**BACKGROUND:**
On December 6, 2011 the Board of Supervisors adopted Resolution No. 2011/497 adopting policy governing appointments to boards, committees, and commissions that are advisory to the Board of Supervisors. Included in this resolution was a requirement that applications for at large/countywide seats be reviewed by the Board of Supervisors sub-committee.

The Board established the In-Home Supportive Services (IHSS) Public Authority Advisory Committee in March 1998. Terms of membership are four years. The Advisory Committee consists of 11 members: 4 Consumers aged 60 or older, 2 Consumers aged under 60, and one member from each Supervisorial District. Under Board policy, the F&HS would typically review only general membership or "At-Large" seats, and would not review appointments to

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Enid Mendoza, (925) 335-1039

**cc:**

BACKGROUND: (CONT'D)

supervisorial district seats. However, when the Advisory Committee was originally established, the Board of Supervisors directed that the F&HS review and coordinate supervisorial district appointments to ensure that none of the following categories has more than one representative: senior advocate, advocate for younger disabled, representative from the developmental disability community, IHSS individual provider, IHSS family provider, social worker, nurse, community-based organization, home health agency.

On April 23, 2018, the Family and Human Services Committee approved the recommendation of the IHSS Public Authority Committee to reappoint Keegan Duncan and Joe Juarez.

CONSEQUENCE OF NEGATIVE ACTION:

If this action is not approved, the seats will remain vacant and the committee will have challenges maintaining a full membership.

ATTACHMENTS

Reappointment Memo K.Duncan

K.Duncan Application

Reappointment Memo J.Juarez

J.Juarez Application

Contra Costa County
IHSS Public Authority
500 Ellinwood Way. • Suite 110 • Pleasant Hill, CA 94523

To: Family and Human Services Committee

From: Elizabeth Dondi, Executive Director

Date: April 13, 2018

Subject: IHSS Public Authority Advisory Committee Reappointment

**Current Status/Request**

Consumer Any Age Seat 4 is up for Reappointment

Keegan Duncan has held seat 4 for Consumers Any Age and is requesting reappointment. His current term expired on 3/6/2018 and if reappointed, his new term would end in 2021. Mr. Duncan has been an active member of the committee. Please see attached application and email of interest.

Mr. Keegan Duncan resides in Pleasant Hill City District IV. Other filled at large seats include:

1. Consumer Under 60 Seat 1 – residency in El Cerrito City District I
2. Consumer Under 60 Seat 2 – residency in Pittsburg City District V

**Outreach**

Advisory Committee consumer vacancies are posted on the Public Authority website and in the Public Authority lobby through the use of recruitment flyers. These flyers are also distributed at provider orientations and at consumer/provider trainings.

**Recommendation**

I hereby recommend that Mr. Duncan be reappointed to his seat on the Advisory Committee. He has done a good job of providing input at meetings and has a good attendance record. He is an advocate for seniors and for those with disabilities.

Thank you for your consideration in this matter. I look forward to hearing from you regarding the committee's recommendation. I can be reached at 3-6671 or via email at edondi@ehsd.cccounty.us.

Contra Costa County

| For Office Use Only |
|---|
| Date Received: |

| For Reviewers Use Only: | |
|---|---|
| Accepted | Rejected |

# BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

RECEIVED
MAR 05 2018
IHSS PUBLIC AUTHORITY

**MAIL OR DELIVER TO:**
Contra Costa County
CLERK OF THE BOARD
651 Pine Street, Rm. 106
Martinez, California 94553-1292
**PLEASE TYPE OR PRINT IN INK**
**(Each Position Requires a Separate Application)**

**BOARD, COMMITTEE OR COMMISSION NAME AND SEAT TITLE YOU ARE APPLYING FOR:**

IHSS Public Authority Advisory Committee
**PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION**

Consumer Any Age -Seat 4
**PRINT EXACT SEAT NAME (if applicable)**

1. **Name:** Duncan (Last Name) Keegan (First Name) Mathuin (Middle Name)

2. **Address:** (No.) (Street) (Apt.) (City) (State) (Zip Code)

3. **Phones:** (Home No.) (Work No.) (Cell No.)

4. **Email Address:**

5. **EDUCATION**: Check appropriate box if you possess one of the following:

High School Diploma ☐ G.E.D. Certificate ☐ California High School Proficiency Certificate ☐

Give Highest Grade or Educational Level Achieved: Some college

| Names of colleges / universities attended | Course of Study / Major | Degree Awarded | Units Completed | | Degree Type | Date Degree Awarded |
|---|---|---|---|---|---|---|
| | | | Semester | Quarter | | |
| A) Diablo Valley College | psychology | Yes No ☐ ☒ | | | | |
| B) | | Yes No ☐ ☐ | | | | |
| C) | | Yes No ☐ ☐ | | | | |
| D) Other schools / training completed: | Course Studied | Hours Completed | Certificate Awarded: Yes No ☐ ☐ | | | |

**THIS FORM IS A PUBLIC DOCUMENT**

6. **PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.**

| A) Dates (Month, Day, Year) | Title | Duties Performed |
|---|---|---|
| From: MAY 2014<br>To: ~~[illegible]~~ JAN 2018<br>Total: Yrs. 03 Mos. 08<br>Hrs. per week ____. Volunteer ☒ | FRONT DESK VOLUNTEER<br>GROUP FACILITATOR<br>**Employer's Name and Address**<br>RAINBOW COMMUNITY CENTER | |
| **B) Dates (Month, Day, Year)** | **Title** | **Duties Performed** |
| From:<br>To:<br>Total: Yrs. Mos.<br>Hrs. per week ____. Volunteer ☐ | **Employer's Name and Address** | |
| **C) Dates (Month, Day, Year)** | **Title** | **Duties Performed** |
| From:<br>To:<br>Total: Yrs. Mos.<br>Hrs. per week ____. Volunteer ☐ | **Employer's Name and Address** | |
| **D) Dates (Month, Day, Year)** | **Title** | **Duties Performed** |
| From:<br>To:<br>Total: Yrs. Mos.<br>Hrs. per week ____. Volunteer ☐ | **Employer's Name and Address** | |

**THIS FORM IS A PUBLIC DOCUMENT**

7. **How did you learn about this vacancy?**

☐ **CCC Homepage** ☐ **Walk-In** ☐ **Newspaper Advertisement** ☐ **District Supervisor** ☒ **Other** Renewing seat

8. **Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No** ☒ **Yes** ☐

**If Yes, please identify the nature of the relationship:**

9. **Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No** ☒ **Yes** ☐

**If Yes, please identify the nature of the relationship:**

**I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and understand that all information in this application is publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra Costa County.**

**Sign Name:** [redacted] **Date:** 03.04.2018

## Important Information

1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
2. Send the completed paper application to the Office of the Clerk of the Board at: **651 Pine Street, Room 106, Martinez, CA 94553**.
3. A résumé or other relevant information may be submitted with this application.
4. All members are required to take the following training: 1) The Brown Act, 2) The Better Government Ordinance, and 3) Ethics Training.
5. Members of boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.
6. Advisory body meetings may be held in various locations and some locations may not be accessible by public transportation.
7. Meeting dates and times are subject to change and may occur up to two days per month.
8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.

**THIS FORM IS A PUBLIC DOCUMENT**

THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA **and for Special Districts, Agencies and Authorities Governed by the Board Adopted Resolution no. 2011/55 on 2/08/2011 as follows:**

IN THE MATTER OF ADOPTING A POLICY MAKING FAMILY MEMBERS OF THE BOARD OF SUPERVISORS INELIGIBLE FOR APPOINTMENT TO BOARDS, COMMITTEES OR COMMISSIONS FOR WHICH THE BOARD OF SUPERVISORS IS THE APPOINTING AUTHORITY

WHEREAS the Board of Supervisors wishes to avoid the reality or appearance of improper influence or favoritism;
NOW, THEREFORE, BE IT RESOLVED THAT the following policy is hereby adopted:

I. SCOPE: This policy applies to appointments to any seats on boards, committees or commissions for which the Contra Costa County Board of Supervisors is the appointing authority.

II. POLICY: A person will not be eligible for appointment if he/she is related to a Board of Supervisors' Member in any of the following relationships:

1. Mother, father, son, and daughter;
2. Brother, sister, grandmother, grandfather, grandson, and granddaughter;
3. Great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, and great-granddaughter;
4. First cousin;
5. Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
6. Sister-in-law (brother's spouse or spouse's sister), brother-in-law (sister's spouse or spouse's brother), spouse's grandmother, spouse's grandfather, spouse's granddaughter, and spouse's grandson;
7. Registered domestic partner, pursuant to California Family Code section 297.
8. The relatives, as defined in 5 and 6 above, for a registered domestic partner.
9. Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.

Contra Costa County
IHSS Public Authority
500 Ellinwood Way. • Suite 110 • Pleasant Hill, CA 94523

To: Family and Human Services Committee

From: Elizabeth Dondi, Executive Director

Date: February 26, 2018

Subject: IHSS Public Authority Advisory Committee Reappointment

**Current Status/Request**

Consumer Seat Under 60 – Seat 2 is up for Reappointment

Joe Juarez, Jr. has held seat 2 for Consumers under 60 and is requesting reappointment. His current term expires on 3/6/2018 and if reappointed, his new term would end in March 2021. Mr. Juarez has been an active member of the committee. Please see attached application and email of interest.

Mr. Juarez resides in Pittsburg City District V. Other filled at large seats include:

1. Consumer Under 60 Seat 1 – residency in El Cerrito City District I
2. Consumer Any Age Seat 4 – residency in Pleasant Hill City District IV

**Outreach**

Advisory Committee consumer vacancies are posted on the Public Authority website and in the Public Authority lobby through the use of recruitment flyers. These flyers are also distributed at provider orientations and at consumer/provider trainings.

**Recommendation**

I hereby recommend that Mr. Juarez be reappointed to his seat on the Advisory Committee. He has done an outstanding job of providing input at meetings and has an excellent attendance. He is an advocate for seniors and for those with disabilities. He has provided sound guidance and suggestions on IHSS program policies and procedures.

Thank you for your consideration in this matter. I look forward to hearing from you regarding the committee's recommendation. I can be reached at 3-6675 or via email at edondi@ehsd.cccounty.us.

Contra Costa County

| For Office Use Only |
|---|
| Date Received: |

| For Reviewers Use Only: | |
|---|---|
| Accepted | Rejected |

# BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

**MAIL OR DELIVER TO:**
Contra Costa County
CLERK OF THE BOARD
651 Pine Street, Rm. 106
Martinez, California 94553-1292
**PLEASE TYPE OR PRINT IN INK**
**(Each Position Requires a Separate Application)**

**BOARD, COMMITTEE OR COMMISSION NAME AND SEAT TITLE YOU ARE APPLYING FOR:**

IHSS Public Authority Advisory Committee
**PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION**

Consumer Under 60 –Seat 2
**PRINT EXACT SEAT NAME (if applicable)**

1. **Name:** JUARE, JR (Last Name) JOE (First Name) R (Middle Name)

2. **Address:** (No.) (Street) (Apt.) (City) (State) (Zip Code)

3. **Phones:** (Home No.) (Work No.) (Cell No.)

4. **Email Address:**

5. **EDUCATION**: Check appropriate box if you possess one of the following:

High School Diploma ☒ G.E.D. Certificate ☐ California High School Proficiency Certificate ☐

Give Highest Grade or Educational Level Achieved MASTERS DEGREE

| Names of colleges / universities attended | Course of Study / Major | Degree Awarded | Units Completed | | Degree Type | Date Degree Awarded |
|---|---|---|---|---|---|---|
| | | | Semester | Quarter | | |
| A) JOHN F. KENNEDY UNIVERSITY | COUNSELING PSYCHOL | Yes No ☒☐ | | 95 | MA | JUNE 1999 |
| B) UNIVERSITY CA BERKELEY | PSYCHOLOGY | Yes No ☒☐ | 120 | | BA | JUNE 1995 |
| C) | | Yes No ☐☐ | | | | |
| D) Other schools / training completed: | Course Studied | Hours Completed | | | Certificate Awarded: Yes No ☐☐ | |

**THIS FORM IS A PUBLIC DOCUMENT**

6. **PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.**

| A) Dates (Month, Day, Year) | Title | Duties Performed |
|---|---|---|
| From: 03/06/14 To: PRESENT<br>Total: Yrs. 3 Mos. 11<br>Hrs. per week ____. Volunteer ☒ | Consumer Under 60 -IHSS ADVISORY<br>**Employer's Name and Address**<br>iHSS PUBLIC AUTHORITY<br>500 Ellinwood Way, Ste. 110<br>Pleasant Hill, CA 94523 | Active IHSS Advisory Committee member attending monthly meetings. Additionally, serving on the Advocacy, Health Safety & Education, Nominating and Rapid Response subcommittees respectively, providing valuable input into various aspects of the IHSS program in Contra Costa County. |
| **B) Dates (Month, Day, Year)** | **Title** | **Duties Performed** |
| From: To:<br>Total: Yrs. Mos.<br>Hrs. per week ____. Volunteer ☐ | **Employer's Name and Address** | |
| **C) Dates (Month, Day, Year)** | **Title** | **Duties Performed** |
| From: To:<br>Total: Yrs. Mos.<br>Hrs. per week ____. Volunteer ☐ | **Employer's Name and Address** | |
| **D) Dates (Month, Day, Year)** | **Title** | **Duties Performed** |
| From: To:<br>Total: Yrs. Mos.<br>Hrs. per week ____. Volunteer ☐ | **Employer's Name and Address** | |

**THIS FORM IS A PUBLIC DOCUMENT**

7. **How did you learn about this vacancy?**

☒ **CCC Homepage** ☐ **Walk-In** ☐ **Newspaper Advertisement** ☐ **District Supervisor** ☐ **Other** _____

8. **Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No** ☒ **Yes** ☐

   **If Yes, please identify the nature of the relationship:** _____

9. **Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No** ☒ **Yes** ☐

   **If Yes, please identify the nature of the relationship:** _____

**I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and understand that all information in this application is publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra Costa County.**

**Sign Name:** _____ **Date:** 02-14-18

## Important Information

1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
2. Send the completed paper application to the Office of the Clerk of the Board at: **651 Pine Street, Room 106, Martinez, CA 94553**.
3. A résumé or other relevant information may be submitted with this application.
4. All members are required to take the following training: 1) The Brown Act, 2) The Better Government Ordinance, and 3) Ethics Training.
5. Members of boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.
6. Advisory body meetings may be held in various locations and some locations may not be accessible by public transportation.
7. Meeting dates and times are subject to change and may occur up to two days per month.
8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.

**THIS FORM IS A PUBLIC DOCUMENT**

THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA **and for Special Districts, Agencies and Authorities Governed by the Board Adopted Resolution no. 2011/55 on 2/08/2011 as follows:**

IN THE MATTER OF ADOPTING A POLICY MAKING FAMILY MEMBERS OF THE BOARD OF SUPERVISORS INELIGIBLE FOR APPOINTMENT TO BOARDS, COMMITTEES OR COMMISSIONS FOR WHICH THE BOARD OF SUPERVISORS IS THE APPOINTING AUTHORITY

WHEREAS the Board of Supervisors wishes to avoid the reality or appearance of improper influence or favoritism;

NOW, THEREFORE, BE IT RESOLVED THAT the following policy is hereby adopted:

I. SCOPE: This policy applies to appointments to any seats on boards, committees or commissions for which the Contra Costa County Board of Supervisors is the appointing authority.

II. POLICY: A person will not be eligible for appointment if he/she is related to a Board of Supervisors' Member in any of the following relationships:

1. Mother, father, son, and daughter;
2. Brother, sister, grandmother, grandfather, grandson, and granddaughter;
3. Great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, and great-granddaughter;
4. First cousin;
5. Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
6. Sister-in-law (brother's spouse or spouse's sister), brother-in-law (sister's spouse or spouse's brother), spouse's grandmother, spouse's grandfather, spouse's granddaughter, and spouse's grandson;
7. Registered domestic partner, pursuant to California Family Code section 297.
8. The relatives, as defined in 5 and 6 above, for a registered domestic partner.
9. Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Support Position on AB 3138 (Muratsuchi) – Modify the California Accidental Release Prevention Program Penalty Language

**RECOMMENDATION(S):**

ADOPT a "Support" position on Assembly Bill 3138 (Muratsuchi). Existing law for the California Accidental Release Prevention (CalARP) Program imposes civil or administrative liability on a person or stationary source that violates these provisions in an amount of not more than $2,000 for each day in which the violation occurs, and in an amount of not more than $25,000 for each day in which the violation occurs if the person or stationary source knowingly violates these provisions after reasonable notice of the violation. This bill would impose civil or administrative liability on a person or stationary source that violates those provisions in an amount of not more than $25,000 for each day in which the violation occurs, regardless of whether the violation was committed knowingly or after reasonable notice.

**FISCAL IMPACT:**

No impact.

**BACKGROUND:**

Contra Costa County is the Certified Unified Program Agency (CUPA) for all of Contra Costa County and the requirements of the CUPA are administered by the Health Services Hazardous Materials Program. The CUPA programs include six hazardous material programs, including the California Accidental Release Prevention (CalARP) Program. The businesses that are subject to the CalARP Program handle the more toxic or flammable chemicals. The purpose of the program is to prevent a catastrophic incident that could

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Randy Sawyer, 925-335-3210

**cc:** Tasha Scott, Marcy Wilhelm, Randy Sawyer

BACKGROUND: (CONT'D)

impact the community. Some of the facilities that are subject to the CalARP Program are the petroleum refineries, chemical facilities, and facilities that use ammonia refrigeration.

The purpose of this bill is to align the penalties for violating the requirements of the CalARP Program such that the penalties act as a deterrent. The existing ability to have a penalty up to $25,000 is only available after reasonable notice has been given to the facility. So if a facility has a catastrophic incident that has a major impact on the surrounding community and the incident was caused or partially caused by a violation of the CalARP Program, the most that the facility could be penalized at this time is $2,000 for that violation, since it is rare that the facility will be given a reasonable notice for that specific violation. AB 3138 will give the ability for applying a penalty for a catastrophic incident up to $25,000.

ATTACHMENTS

Letter of Support

**The Board of Supervisors**

County Administration Building
651 Pine Street, Room 107
Martinez, California 94553-1293

**John M. Gioia,** 1st District
**Candace Andersen,**2nd District
**Diane Burgis,** 3rd District
**Karen Mitchoff,** 4th District
**Federal D. Glover,** 5th District

Contra Costa County

**David J. Twa**
Clerk of the Board
and
County Administrator
(925) 335-1900

May 22, 2018

The Honorable Al Muratsuchi
State Assembly
Capitol Office, Room 2179
P.O. Box 942849
Sacramento, CA 94249-0066

**SUBJECT: AB 3138 ESTM COMMITTEE**
**POSITION: SUPPORT**

Dear Assemblymember Muratsuchi:

Contra Costa County *supports* the passage of AB 3138. Chapter 6.95, Article 2 of Division 20 of the Health and Safety Code, the California Accidental Release Prevention (CalARP) Program requires businesses that handle the most toxic and flammable hazardous materials to prepare a Risk Management Plan (RMP). The RMP has four program levels where the lowest program level applies to businesses that do not present an offsite impact to the community and the highest program level applies to petroleum refineries. The RMP is required to state how that business is complying with their prevention elements that are required by regulations and the businesses are required to follow their RMP.

Currently, Health and Safety Code, Section 25540(a) sets a maximum penalty of $2,000 per violation per day and Section 25540(b) sets a maximum penalty of $25,000 per day when a business knowingly violates the provisions in Article 2. The penalties set by Section 25540(a) are too low to provide a deterrent to the CalARP Program requirements and especially the regulations that apply to businesses that handle the most hazardous chemicals. Section 25540(b) requirement "knowingly" is many times after the fact of a major release that impacts the community.

AB 3138 will increase the penalties up to $25,000 per day per violation. The actual penalty is determined by meeting the requirements of California Code of Regulations, Title 27, Section 15200 that specifies that graduated based penalties are to be established based on the severity of the violation and Health and Safety Code Chapter 6.11 Section 25404.1.1(b) for penalties amounts take into consideration a number of factors such as nature, circumstances, extent and gravity of the violation.

Contra Costa County Health Services Hazardous Materials Program is the Certified Unified Program Agency for all of Contra Costa County. As the CUPA, the Hazardous Materials Programs regulate businesses that are subject to the CalARP Program, Hazardous Waste Control Law, the Underground Storage of Hazardous Substances, the Aboveground Petroleum Storage Act and the Hazardous Materials Business Plan programs.

**The Board of Supervisors**

County Administration Building
651 Pine Street, Room 107
Martinez, California 94553-1293

**John M. Gioia,** 1st District
**Candace Andersen,**2nd District
**Diane Burgis,** 3rd District
**Karen Mitchoff,** 4th District
**Federal D. Glover,** 5th District

Contra
Costa
County

**David J. Twa**
Clerk of the Board
and
County Administrator
(925) 335-1900

Please contact Randy Sawyer, Chief Environmental Health and Hazardous Materials Officer for Contra Costa County at (925) 335-3210 or randy.sawyer@hsd.cccounty.us if you or your staff have any questions regarding our position.

Sincerely,

Karen Mitchoff,
Chair, Contra Costa County Board of Supervisors

cc: Randy Sawyer

Contra Costa County

To: Board of Supervisors

From: LEGISLATION COMMITTEE

Date: May 22, 2018

Subject: "Support" for H.R. 5003, a Bill to Restore Advance Refundings of Tax-Exempt Bonds

**RECOMMENDATION(S):**

1. ADOPT a position of "Support" on H.R. 5003 to amend the Internal Revenue Code of 1986 to reinstate advance refunding bonds;

2. AUTHORIZE the Chair of the Board to send a letter to members of the House of Representatives representing Contra Costa County requesting co-sponsorship of the bill; and

3. DIRECT staff to amend the County's adopted federal legislative platform to make conforming changes.

**FISCAL IMPACT:**

No immediate fiscal impact.

**BACKGROUND:**

The Board of Supervisors' Federal Legislative Platform currently includes several items concerning tax-exempt municipal bonds. Most notably, the Board has taken a position supporting generally the preservation of municipal bonds. Recently, the Tax Cuts and Jobs Act of 2017 (the "Tax Bill") discontinued authorization for state and local governments to issue "advance refunding" bonds, which previously allowed jurisdictions to refinance current debt at reduced interest rates. This was, in part, due to the belief that such authorization essentially allowed for "double dipping" by state and local entities. This was bolstered by reports from the Joint Committee on Taxation (the "JCT") that advance refundings were

☑ APPROVE ☐ OTHER

☐ RECOMMENDATION OF CNTY ADMINISTRATOR ☑ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☑ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Timothy Ewell, (925)335-1036

**cc:**

projected to be a tax expenditure to the federal government of $17.3 billion over the ten-year period 2018-2027. In Contra Costa County, advance and current refunding bonds have been used to refund existing bonds resulting in significant cost savings locally. As noted in the chart below, over the past 15 years, the County has realized $23.3 million in net present value (NPV) savings amounting to approximately $2.1 million per year. This would not have been possible, in part, but for advance refunding bonds.

On February 13, 2018, members of the bi-partisan House Municipal Finance Caucus, Co-Chaired by Representatives Hultgren and Ruppersberger introduced H.R. 5003 (

BACKGROUND: (CONT'D)

Attachment A) with the goal of reinstating advance refunding bonds. Currently, the bill has bipartisan support of ten (10) co-sponsors and has been referral to the House Ways and Means Committee.

Subsequently, on Monday, May 7, 2018, several national organizations representing public-sector entities that issue tax-exempt debt to finance infrastructure projects, including the National Association of Counties (NACo), the National League of Cities and the U.S. Conference of Mayors, joined in a letter (**Attachment B**) to members of Congress offering support for H.R. 5003. The letter outlines the importance of advance refunding bonds as a tool in the municipal bond market and calls on members of Congress to sign on as co-sponsors to the bill.

On Monday, May 14, 2018, the Legislation Committee approved recommendation of a "Support" position on H.R. 5003. Today's action would adopt a "Support" position, authorize the Chair to send letters to each of the four House members representing Contra Costa County requesting each to cosponsor H.R. 5003 and amend the County's Federal Platform to support the reinstatement of advance refunding bonds.

CONSEQUENCE OF NEGATIVE ACTION:

The Board will not have an official position on H.R. 5003.

CHILDREN'S IMPACT STATEMENT:

No impact.

ATTACHMENTS

Attachment A: HR 5003

Attachment B: Support Letter

Letter to Representative DeSaulnier

Letter to Representative McNerney

Letter to Representative Thompson

Letter to Representative Swalwell

AUTHENTICATED
U.S. GOVERNMENT
INFORMATION
GPO

I

115TH CONGRESS
2D SESSION

# H. R. 5003

To amend the Internal Revenue Code of 1986 to reinstate advance refunding bonds.

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IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 13, 2018

Mr. HULTGREN (for himself, Mr. RUPPERSBERGER, Mr. MESSER, Mr. ROYCE of California, Mr. KILDEE, and Mr. CAPUANO) introduced the following bill; which was referred to the Committee on Ways and Means

---

# A BILL

To amend the Internal Revenue Code of 1986 to reinstate advance refunding bonds.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. TREATMENT OF ADVANCE REFUNDING BONDS.**

(a) IN GENERAL.—Section 149(d) of the Internal Revenue Code of 1986 is amended—

(1) in paragraph (1), by striking ''to advance refund another bond'' and inserting ''as part of an issue described in paragraph (2), (3), or (4)'';

(2) by redesignating paragraphs (2) and (3) as paragraphs (6) and (7), respectively; and

(3) by inserting after paragraph (1) the following new paragraphs:

"(2) CERTAIN PRIVATE ACTIVITY BONDS.—An issue is described in this paragraph if any bond (issued as part of such issue) is issued to advance refund a private activity bond (other than a qualified 501(c)(3) bond).

"(3) OTHER BONDS.—

"(A) IN GENERAL.—An issue is described in this paragraph if any bond (issued as part of such issue), hereinafter in this paragraph referred to as the 'refunding bond', is issued to advance refund a bond unless—

"(i) the refunding bond is only—

"(I) the 1st advance refunding of the original bond if the original bond is issued after 1985, or

"(II) the 1st or 2nd advance refunding of the original bond if the original bond was issued before 1986,

"(ii) in the case of refunded bonds issued before 1986, the refunded bond is redeemed not later than the earliest date on which such bond may be redeemed at par or at a premium of 3 percent or less,

"(iii) in the case of refunded bonds issued after 1985, the refunded bond is redeemed not later than the earliest date on which such bond may be redeemed,

"(iv) the initial temporary period under section 148(c) ends—

"(I) with respect to the proceeds of the refunding bond not later than 30 days after the date of issue of such bond, and

"(II) with respect to the proceeds of the refunded bond on the date of issue of the refunding bond, and

"(v) in the case of refunded bonds to which section 148(e) did not apply, on and after the date of issue of the refunding bond, the amount of proceeds of the refunded bond invested in higher yielding investments (as defined in section 148(b)) which are nonpurpose investments (as defined in section 148(f)(6)(A)) does not exceed—

"(I) the amount so invested as part of a reasonably required reserve

or replacement fund or during an allowable temporary period, and

"(II) the amount which is equal to the lesser of 5 percent of the proceeds of the issue of which the refunded bond is a part or $100,000 (to the extent such amount is allocable to the refunded bond).

"(B) SPECIAL RULES FOR REDEMPTIONS.—

"(i) ISSUER MUST REDEEM ONLY IF DEBT SERVICE SAVINGS.—Clause (ii) and (iii) of subparagraph (A) shall apply only if the issuer may realize present value debt service savings (determined without regard to administrative expenses) in connection with the issue of which the refunding bond is a part.

"(ii) REDEMPTIONS NOT REQUIRED BEFORE 90TH DAY.—For purposes of clauses (ii) and (iii) of subparagraph (A), the earliest date referred to in such clauses shall not be earlier than the 90th day after the date of issuance of the refunding bond.

"(4) ABUSIVE TRANSACTIONS PROHIBITED.—An issue is described in this paragraph if any bond (issued as part of such issue) is issued to advance refund another bond and a device is employed in connection with the issuance of such issue to obtain a material financial advantage (based on arbitrage) apart from savings attributable to lower interest rates.

"(5) SPECIAL RULES FOR PURPOSES OF PARAGRAPH (3).—For purposes of paragraph (3), bonds issued before the date of the enactment of this subsection shall be taken into account under subparagraph (A)(i) thereof except—

"(A) a refunding which occurred before 1986 shall be treated as an advance refunding only if the refunding bond was issued more than 180 days before the redemption of the refunded bond, and

"(B) a bond issued before 1986, shall be treated as advance refunded no more than once before March 15, 1986.".

(b) CONFORMING AMENDMENT.—Section 148(f)(4)(C) of such Code is amended by redesignating clauses (xiv) through (xvi) as clauses (xv) through (xvii)

and by inserting after clause (xiii) the following new clause:

"(xiv) DETERMINATION OF INITIAL TEMPORARY PERIOD.—For purposes of this subparagraph, the end of the initial temporary period shall be determined without regard to section 149(d)(3)(A)(iv).".

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to advance refunding bonds issued after the date of the enactment of this Act.

○

**Government Finance Officers Association**
**National Governors Association**
**National Association of State Treasurers**
**Council of State Governments**
**National Conference of State Legislatures**
**The United States Conference of Mayors**
**National Association of Counties**
**National League of Cities**
**International City/County Management Association**
**Airports Council International – North America**
**National Association of Towns and Townships**
**National Association of State Auditors, Comptrollers and Treasurers**
**American Association of Port Authorities**
**American Hospital Association**
**American Planning Association**
**American Public Power Association**
**American Public Works Association**
**American Society of Civil Engineers**
**American Water Works Association**
**Association of Public and Land-grant Universities**
**Association of Metropolitan Water Agencies**
**WateReuse Association**
**National Association of Clean Water Agencies**
**Council of Infrastructure Financing Authorities**
**International Public Management Association for Human Resources**
**Large Public Power Council**
**National Association of Municipal Advisors**
**National Association of Bond Lawyers**
**National Association of College and University Business Officers**
**National Association of Health and Educational Facilities Finance Authorities**
**National Association of Regional Councils**
**National Community Development Association**
**National Association of Local Housing Finance Agencies**

May 7, 2018

**VIA Electronic Mail**

RE: Request Co-sponsorship of HR 5003 to Amend the Internal Revenue Code of 1986 to Restore Advance Refunding

Dear Member of Congress:

The national organizations listed above represent hundreds of thousands of public-sector entities that issue debt to finance and build the infrastructure that contributes to strong economies at the state and local levels across the country. Our collective memberships support the need for legislation that would reinstate authority to advance refund municipal bonds. We also ask that you join as a co-sponsor of H.R. 5003, a

bipartisan bill to restore this federal tax code provision that for decades saved local taxpayers billions in interest expense.

Under previous law, governmental bonds and 501(c)(3) bonds issued by state and local governments were permitted a single advance refunding. This allowed public issuers to take advantage of reductions in interest rates to realize billions of dollars in savings, which ultimately benefits taxpayers. In fact, the Government Finance Officers Association (GFOA) best practices recommended an advance refunding should produce a minimum savings threshold on a present value basis of 3-5 percent. In the last 5 years, 2013-2017, the advance refunding of municipal securities saved taxpayers at least $12 billion, a benefit to all of our shared constituencies. It is the practice of state and local governments to measure savings on a present value basis but it is worth noting that the actual savings resulting from these advance refundings is far in excess of $12 billion in present value savings.

Since tax-exempt advance refundings were prohibited, municipal bond market activity has declined significantly, creating less supply for the very strong demand that exists for municipal securities from retail and institutional investors. In Q1 2017 volume was $92 billion compared to Q1 2018 just $65 billion, a decrease in 30%. The bond market underpins the strength of state and municipal governments to provide necessary infrastructure across the United States.

Thank you for considering this important legislation. We look forward to working with you and supporting the effort to help the public issuer community on this vital issue.

Sincerely,

Government Finance Officers Association, Emily Swenson Brock, 202-393-8467
Airports Council International – North America, Annie Russo, 202-293-4544
American Association of Port Authorities, Susan Monteverde, 703-684-5700
American Hospital Association, Mike Rock, 202-638-1100
American Planning Association, Jason Jordan, 202-349-1005
American Public Power Association, John Godfrey, 202-467-2929
American Public Works Association, Andrea Eales, 202-218-6730
American Society of Civil Engineers, Brian Pallasch, 202-789-7852
American Water Works Association, Tommy Holmes, 202-326-3128
Association of Metropolitan Water Agencies, Diane VanDe Hei, 202-331-2820
Association of Public and Land-grant Universities, Craig Lindwarm, 202-478-6032
Council of Infrastructure Financing Authorities, Rick Farrell, 202-547-1866
Council of State Governments, Andy Karellas, 202-624-5460
International City/County Management Association, Elizabeth Kellar, 202-962-5328
International Public Management Association for Human Resources, Neil Reichenberg, 703-549-7100
Large Public Power Council, Noreen Roche-Carter, 916-732-6509
National Assoc. of Health and Educational Facilities Finance Authorities, Chuck Samuels, 202-434-7311
National Association of Bond Lawyers, Jessica Giroux, 202-503-3303
National Association of Clean Water Agencies, Kristina Surfus, 202-833-4655
National Association of College and University Business Officers, Elizabeth Clark, 202-861-2553
National Association of Counties, Jack Peterson, 202-661-8805
National Association of Local Housing Finance Agencies, Heather Voorman, 202-367-2405
National Association of Municipal Advisors, Susan Gaffney, 703-395-4896
National Association of Regional Councils, Leslie Wollack, 202-618-6363
National Association of State Auditors, Comptrollers and Treasurers, Cornelia Chebinou, 202-624-5451
National Association of State Treasurers, Shaun Snyder, 202-744-6663

National Association of Towns and Townships, Jennifer Imo, 202-454-3947
National Community Development Association, Vicki Watson 202-656-9552
National Conference of State Legislatures, Max Behlke, 202-624-3586
National Governors Association, Caroline Sevier, 202-624-5376
National League of Cities, Brian Egan, 202-626-3107
The United States Conference of Mayors, Larry Jones, 202-861-6709
WateReuse Association, Amber Kim, 571-445-5504

May 22, 2018

The Honorable Mark DeSaulnier
U.S. House of Representatives
115 Cannon House Office Building
Washington, DC 20515

**RE: Support H.R. 5003 to reinstate tax-exempt advance refunding**

Dear Representative DeSaulnier:

I am writing on behalf of Contra Costa County to urge your support and cosponsorship for bipartisan legislation that seeks to reinstate tax-exempt advance refunding. Introduced by Reps. Randy Hultgren and Dutch Ruppersberger, H.R. 5003 would restore the ability of state and local governments to take advantage of low interest rates and advance refund outstanding bonds, which ultimately benefits taxpayers. Advance refundings made up nearly 20 percent of the market activity in 2017, with issuers saving 5 to 7 percent of par, on average. For Contra Costa County, the ability to advance refund resulted in millions of dollars in annual debt service savings, which in turn has been used to provide services to our residents and reinvest in our facilities. As you know, the County recently issued $100 million in bonds to replace our obsolete County Administration and Emergency Operations Center buildings in Martinez, CA.

Before the recent changes in tax reform, governmental bonds were already limited to only one advance refunding prior to the call date. Removing this important financial management tool restricts the ability of state and local governments to save billions on interest costs, savings which could free up borrowing capacity for new investment in infrastructure and other public services.

Thank you for your consideration of this important request. I look forward to working with you to restore this irreplaceable financing resource.

Sincerely,

KAREN MITCHOFF
Chair, Board of Supervisors
Contra Costa County

May 22, 2018

The Honorable Jerry McNerney
U.S. House of Representatives
2265 Rayburn House Office Building
Washington, DC 20515

**RE: Support H.R. 5003 to reinstate tax-exempt advance refunding**

Dear Representative McNerney:

I am writing on behalf of Contra Costa County to urge your support and cosponsorship for bipartisan legislation that seeks to reinstate tax-exempt advance refunding. Introduced by Reps. Randy Hultgren and Dutch Ruppersberger, H.R. 5003 would restore the ability of state and local governments to take advantage of low interest rates and advance refund outstanding bonds, which ultimately benefits taxpayers. Advance refundings made up nearly 20 percent of the market activity in 2017, with issuers saving 5 to 7 percent of par, on average. For Contra Costa County, the ability to advance refund resulted in millions of dollars in annual debt service savings, which in turn has been used to provide services to our residents and reinvest in our facilities. As you know, the County recently issued $100 million in bonds to replace our obsolete County Administration and Emergency Operations Center buildings in Martinez, CA.

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Thank you for your consideration of this important request. I look forward to working with you to restore this irreplaceable financing resource.

Sincerely,

KAREN MITCHOFF
Chair, Board of Supervisors
Contra Costa County

May 22, 2018

The Honorable Mike Thompson
U.S. House of Representatives
231 Cannon Office Building
Washington, DC 20515

**RE: Support H.R. 5003 to reinstate tax-exempt advance refunding**

Dear Representative Thompson:

I am writing on behalf of Contra Costa County to urge your support and cosponsorship for bipartisan legislation that seeks to reinstate tax-exempt advance refunding. Introduced by Reps. Randy Hultgren and Dutch Ruppersberger, H.R. 5003 would restore the ability of state and local governments to take advantage of low interest rates and advance refund outstanding bonds, which ultimately benefits taxpayers. Advance refundings made up nearly 20 percent of the market activity in 2017, with issuers saving 5 to 7 percent of par, on average. For Contra Costa County, the ability to advance refund resulted in millions of dollars in annual debt service savings, which in turn has been used to provide services to our residents and reinvest in our facilities. As you know, the County recently issued $100 million in bonds to replace our obsolete County Administration and Emergency Operations Center buildings in Martinez, CA.

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Thank you for your consideration of this important request. I look forward to working with you to restore this irreplaceable financing resource.

Sincerely,

KAREN MITCHOFF
Chair, Board of Supervisors
Contra Costa County

May 22, 2018

The Honorable Eric Swalwell
U.S. House of Representatives
129 Cannon Office Building
Washington, DC 20515

**RE: Support H.R. 5003 to reinstate tax-exempt advance refunding**

Dear Representative Swalwell:

I am writing on behalf of Contra Costa County to urge your support and cosponsorship for bipartisan legislation that seeks to reinstate tax-exempt advance refunding. Introduced by Reps. Randy Hultgren and Dutch Ruppersberger, H.R. 5003 would restore the ability of state and local governments to take advantage of low interest rates and advance refund outstanding bonds, which ultimately benefits taxpayers. Advance refundings made up nearly 20 percent of the market activity in 2017, with issuers saving 5 to 7 percent of par, on average. For Contra Costa County, the ability to advance refund resulted in millions of dollars in annual debt service savings, which in turn has been used to provide services to our residents and reinvest in our facilities. As you know, the County recently issued $100 million in bonds to replace our obsolete County Administration and Emergency Operations Center buildings in Martinez, CA.

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Thank you for your consideration of this important request. I look forward to working with you to restore this irreplaceable financing resource.

Sincerely,

KAREN MITCHOFF
Chair, Board of Supervisors
Contra Costa County

Contra Costa County

To: Board of Supervisors

From: Joseph E. Canciamilla, Clerk-Recorder

Date: May 22, 2018

Subject: Add one Clerk-Recorder Services Specialist, Cancel one Recordable Document Technician

**RECOMMENDATION(S):**
ADOPT Position Adjustment Resolution No. 22256 to add one Clerk-Recorder Services Specialist (EATA) (represented) position at salary plan and grade 3R5 1269 ($4,188- $5,091) and cancel one Recordable Documents Technician (J9WF) (represented) vacant position No. 5840 at salary plan and grade 3R5 1252 ($4,118- $5,006) in the Clerk-Recorder Division of the Clerk-Recorder-Elections Department.

**FISCAL IMPACT:**
There will be an increase in salaries and benefits of $1,600, which is included in the current and future budgets. 100% General Fund.

**BACKGROUND:**
Recordable Documents Technician is an obsolete classification that is being phased out of the department.

**CONSEQUENCE OF NEGATIVE ACTION:**
If this action is not approved, a position will continue to be classified with an obsolete classification, and the department will not be able to hire the correct classification needed to perform the work necessary.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Barbara Dunmore
925-335-7919

**cc:** Debi Cooper

ATTACHMENTS

P300 22256 - Add C-R Svcs Spec, Cxl Recordable Doc
Tech

# POSITION ADJUSTMENT REQUEST

NO. 22256
DATE 3/16/2018

Department Clerk-Recorder-Elections

Department No./
Budget Unit No. 0355 Org No. 0355 Agency No. 24

Action Requested: Cancel vacant Recordable Document Technician (J9WF) position #5840. Add one Clerk-Recorder Services Specialist (EATA) position.

Proposed Effective Date: 5/1/2018

Classification Questionnaire attached: Yes ☐ No ☒ / Cost is within Department's budget: Yes ☒ No ☐

Total One-Time Costs (non-salary) associated with request: $0.00

Estimated total cost adjustment (salary / benefits / one time):

| | | | |
|---|---|---|---|
| Total annual cost | $1,631.64 | Net County Cost | $1,631.64 |
| Total this FY | $271.94 | N.C.C. this FY | $271.94 |

SOURCE OF FUNDING TO OFFSET ADJUSTMENT Covered in existing budget

Department must initiate necessary adjustment and submit to CAO.
Use additional sheet for further explanations or comments.

Joe Canciamilla
(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

BR for JE — Deputy County Administrator — 3/19/2018 Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS DATE 3/30/2018
Add one Clerk-Recorder Services Specialist (EATA) (represented) position and cancel one Recordable Document Technician (J9WF) (represented) vacant position No. 5840 .

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: ☒ Day following Board Action.
☐ _____(Date)

Tanya Williams
(for) Director of Human Resources — 3/30/2018 Date

COUNTY ADMINISTRATOR RECOMMENDATION: DATE 5/9/2018
☒ Approve Recommendation of Director of Human Resources
☐ Disapprove Recommendation of Director of Human Resources
☐ Other: _____

/s/ Julie DiMaggio Enea
(for) County Administrator

BOARD OF SUPERVISORS ACTION:
Adjustment is APPROVED ☐ DISAPPROVED ☐

David J. Twa, Clerk of the Board of Supervisors and County Administrator

DATE _____ BY _____

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION
Adjust class(es) / position(s) as follows:

P300 (M347) Rev 3/15/01

# REQUEST FOR PROJECT POSITIONS

Department _____ Date 5/9/2018 No. _____

1. Project Positions Requested:

2. Explain Specific Duties of Position(s)

3. Name / Purpose of Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS Funds)

4. Duration of the Project: Start Date _____ End Date _____
   Is funding for a specified period of time (i.e. 2 years) or on a year-to-year basis? Please explain.

5. Project Annual Cost

   a. Salary & Benefits Costs: _____
   b. Support Costs: _____
      (services, supplies, equipment, etc.)
   c. Less revenue or expenditure: _____
   d. Net cost to General or other fund: _____

6. Briefly explain the consequences of not filling the project position(s) in terms of:
   a. potential future costs
   b. legal implications
   c. financial implications
   d. political implications
   e. organizational implications

7. Briefly describe the alternative approaches to delivering the services which you have considered. Indicate why these alternatives were not chosen.

8. Departments requesting new project positions must submit an updated cost benefit analysis of each project position at the halfway point of the project duration. This report is to be submitted to the Human Resources Department, which will forward the report to the Board of Supervisors. Indicate the date that your cost / benefit analysis will be submitted

9. How will the project position(s) be filled?
   - ☐ a. Competitive examination(s)
   - ☐ b. Existing employment list(s) Which one(s)? _____
   - ☐ c. Direct appointment of:
     - ☐ 1. Merit System employee who will be placed on leave from current job
     - ☐ 2. Non-County employee

   Provide a justification if filling position(s) by C1 or C2

USE ADDITIONAL PAPER IF NECESSARY

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: Resolution No. 2018/132 Salary Reallocation for Law Enforcement Training Instructor-Per Diem Classification

**RECOMMENDATION(S):**
ADOPT Resolution No. 2014/228, to reallocate the classification of Law Enforcement Training Instructor-Per Diem from twelve step salary level F85-1757 ($6,528.67-$11,166.23) to seven step salary level F85-1757 ($8,332.42 -$11,166.23), and place employees at the appropriate steps.

**FISCAL IMPACT:**
Upon approval, the cost of this action will be fund by the Law Enforcement Training Academy Enterprise Fund.

**BACKGROUND:**
The Sheriff-Coroner uses Law Enforcement Training Instructor-Per Diem employees to teach at various academies. Because of the limited number of hours worked each year by these employees, it can take multiple years to move through the steps of the classification. The Sheriff-Coroner requested that the classification be reallocated from a twelve step salary range to a seven step salary range, and that employees are placed at the appropriate new steps. The County Administrator is recommending that the reallocation be approved.

**CONSEQUENCE OF NEGATIVE ACTION:**
The County could be detrimentally impacted by the potential loss of highly trained personnel.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Lisa Driscoll, County Finance Director (925) 335-1023

**cc:** Dianne Dinsmore, Human Resources Director

ATTACHMENTS

Resolution No.
2018/132

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/132**

**In The Matter Of**: Adopting Resolution 2018/132 to reallocate the classification of Law Enforcement Training Instructor-Per Diem (64WB)

WHEREAS employees in the classification of Law Enforcement Training Instructor-Per Diem (64WB) work only during the Law Enforcement Training Center Basic Academy; and

WHEREAS existing policy requires that these per diem employees work 1040 straight-time hours before their salaries can be reallocated; and

WHEREAS it can take these employees many years to complete 1040 straight-time hours; and

WHEREAS the Sheriff-Coroner has requested that existing employees' salaries be reallocated in order to retain these highly experienced and valuable per diem employees.

The Contra Costa County Board of Supervisors in its capacity as governing Board of the County of Contra Costa and all districts of which it is ex-officio governing Board **RESOLVES** that:

Resolution No. 2014/228, be ADOPTED effective June 1, 2018, to:

1. Reallocate the classification of Law Enforcement Training Instructor-Per Diem from twelve step salary level F85-1757 ($6,528.67-$11,166.23) to seven step salary level F85-1757 ($8,332.42 -$11,166.23);
2. Place the following employees at the new Step 1:
    1. 30513; 34918; 37253; 40463; 46378; 51258; 66005; 71604; 71605; 71676; 71796; 72132; 72323; 76033; 76487; 76726; 77221; 77480; 80377; 80868; 81502; 81605; and 82758.
    2. The aforementioned employees will be eligible for review for within-range step adjustment after completion of 1040 straight-time hours, worked after June 1, 2018.
3. Place the following employees at the new Step 1: 40918; 42021; 45935; 49582; 71547; and 86603.
4. Place the following employees at the new Step 2: 45932; and 68356.
5. Place the following employees at the new Step 6: 65674; and 66307.
6. Place the following employees at the new Step 7: 16427; and 66739.

**Contact: Lisa Driscoll, County Finance Director (925) 335-1023**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:** Dianne Dinsmore, Human Resources Director

Contra Costa County

To: Board of Supervisors

From: Marc Shorr, Chief Information Officer

Date: May 22, 2018

Subject: Add Executive Secretary-Exempt, Cancel Clerk-Senior Level position in Department of Information Technology

**RECOMMENDATION(S):**
ADOPT Position Adjustment Resolution No. 22278 to add one (1) Executive Secretary-Exempt (J3T5) (unrepresented) position at salary plan and grade B85 1445 ($4,988-$5,499) and cancel one (1) vacant Clerk-Senior Level (JWXC) (represented) position #10255 at salary plan and grade 3RX 1033 ($3,307-$4,223) in the Information Technology Department.

**FISCAL IMPACT:**
This transaction will result in approximately $8,436 additional cost to the Department this fiscal year and $55,700 annually. The Department of Information Technology charges for all services and additional cost will be recovered through service fees charged to user departments that include revenue generated from non-general fund departments and other public agencies.

**BACKGROUND:**
The Department of Information Technology currently does not have an administrative position to assist the Chief Information Officer (CIO), the soon to be hired Assistant CIO, and the three Deputy CIO's. This position was eliminated due to budget cuts several years ago. Adding this position will alleviate the CIO and other high level staff from performing normal day-to-day administrative tasks, such as coordinating

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Marc Shorr, CIO
925-608-4071

**cc:**

BACKGROUND: (CONT'D)

meetings and communications back and forth with other County Departments. This new Executive Secretary-Exempt position will be key in assisting the CIO and other Senior staff, thus allowing them to focus on the department's strategic objectives. The reason the Department is requesting an exempt position is that they will be exposed not only to confidential information, but also detailed technical information that includes security content.

CONSEQUENCE OF NEGATIVE ACTION:

If this action is not approved, the CIO, Assistant CIO and three (3) Deputy CIO's will be unable to spend the majority of their time and energy concentrating on the restructuring and building of technology efficiencies throughout the County, which will impact their ability to fulfill the directives given by the County Administrator's office.

ATTACHMENTS

P300 22278 Add Exec Scty Cxl Clerk-Sr Lvl in DoIT

# POSITION ADJUSTMENT REQUEST

NO. 22278
DATE 4/26/2018

Department Department of Information Technology  Department No./ Budget Unit No. 0147 Org No. 1050 Agency No. A03

Action Requested: ADD one (1) Executive Secretary - Exempt (J3T5) position ($4,988 - $6,063) and cancel one (1) vacant Clerk-Senior Level (JWXC) position #10255 ($3,307 - $4,223).

Proposed Effective Date: 5/1/2018

Classification Questionnaire attached: Yes ☐ No ☒ / Cost is within Department's budget: Yes ☒ No ☐

Total One-Time Costs (non-salary) associated with request: $0.00

Estimated total cost adjustment (salary / benefits / one time):

| | | | |
|---|---|---|---|
| Total annual cost | $122,078.00 | Net County Cost | $0.00 |
| Total this FY | $8,436.00 | N.C.C. this FY | $0.00 |

SOURCE OF FUNDING TO OFFSET ADJUSTMENT Administration Unit approved budget

Department must initiate necessary adjustment and submit to CAO.
Use additional sheet for further explanations or comments.

Marc Shorr
(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

/s/ Julie DiMaggio Enea — 5/3/2018
Deputy County Administrator — Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS DATE 5/8/2018

Add one (1) Executive Secretary-Exempt (J3T5) (unrepresented) position at salary plan and grade B85 1445 ($4,988-$5499) and cancel one (1) vacant Clerk-Senior Level (JWXC) (represented) position #10255 at salary plan and grade 3RX 1033 ($3,307-$4,223).

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: ☒ Day following Board Action.
☐ _____(Date)

Marta Goc — 5/8/2018
(for) Director of Human Resources — Date

COUNTY ADMINISTRATOR RECOMMENDATION: DATE 5/17/18

☒ Approve Recommendation of Director of Human Resources
☐ Disapprove Recommendation of Director of Human Resources
☐ Other: _____

/s/ Julie DiMaggio Enea
(for) County Administrator

BOARD OF SUPERVISORS ACTION:
Adjustment is APPROVED ☐ DISAPPROVED ☐

David J. Twa, Clerk of the Board of Supervisors and County Administrator

DATE _____ BY _____

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION
Adjust class(es) / position(s) as follows:

# REQUEST FOR PROJECT POSITIONS

Department _____ Date 5/17/2018 No. _____

1. Project Positions Requested:

2. Explain Specific Duties of Position(s)

3. Name / Purpose of Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS Funds)

4. Duration of the Project: Start Date _____ End Date _____
   Is funding for a specified period of time (i.e. 2 years) or on a year-to-year basis? Please explain.

5. Project Annual Cost

   a. Salary & Benefits Costs: _____

   b. Support Costs: _____
   (services, supplies, equipment, etc.)

   c. Less revenue or expenditure: _____

   d. Net cost to General or other fund: _____

6. Briefly explain the consequences of not filling the project position(s) in terms of:
   a. potential future costs
   b. legal implications
   c. financial implications
   d. political implications
   e. organizational implications

7. Briefly describe the alternative approaches to delivering the services which you have considered. Indicate why these alternatives were not chosen.

8. Departments requesting new project positions must submit an updated cost benefit analysis of each project position at the halfway point of the project duration. This report is to be submitted to the Human Resources Department, which will forward the report to the Board of Supervisors. Indicate the date that your cost / benefit analysis will be submitted

9. How will the project position(s) be filled?
   - ☐ a. Competitive examination(s)
   - ☐ b. Existing employment list(s) Which one(s)? _____
   - ☐ c. Direct appointment of:
     - ☐ 1. Merit System employee who will be placed on leave from current job
     - ☐ 2. Non-County employee

   Provide a justification if filling position(s) by C1 or C2

USE ADDITIONAL PAPER IF NECESSARY

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services

Date: May 22, 2018

Subject: Add one Homeless Services Chief in the Health Services Department

**RECOMMENDATION(S):**
ADOPT Position Adjustment Resolution No. 22257 to add one permanent full-time Homeless Services Chief position (VDHA) (represented) at salary plan and grade ZB5-1861 ($7,527 - $9,149) in the Health Services Department.

**FISCAL IMPACT:**
Upon approval, there is an annual cost of approximately $176,332, which includes estimated pension costs of $38,977. The cost will be funded 100% within the Department's budgeted General Fund allocation.

**BACKGROUND:**
The Health Service Department's Health, Housing and Homeless Division partners with various government and community agencies to strategize solutions to address not only homelessness, but the community's health and social needs as well. The Division is requesting to add a second Homeless Services Chief position to oversee and support: the internal County programs that the division operates; the remaining design and management of the Coordinated Entry System; and the expanded service integration and training needs that have arose with the Whole Person Care pilot program.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Melissa Carofanello, 925-957-5248

**cc:**

BACKGROUND: (CONT'D)

There is currently a Homeless Services Chief dedicated to program management, but an additional Homeless Services Chief is necessary to have a dedicated chief to coordinate all the efforts of both internal and external resources. There is currently no position that has the appropriate qualifications to assume these responsibilities. The Department has determined that the new Homeless Services Chief position would best meet its needs.

CONSEQUENCE OF NEGATIVE ACTION:

If this action is not approved, the Health Housing and Homeless Division will not be able to efficiently plan, coordinate and manage the growth and development of operations for this new division.

ATTACHMENTS

0 P300 #22257 - Add Homeless Services Chief in HSD

# 5/16/18POSITION ADJUSTMENT REQUEST

NO. 22257
DATE 2/26/2018

Department HEALTH SERVICES

Department No./
Budget Unit No. 0463 Org No. 5731 Agency No. A18

Action Requested: Add one Homeless Services Chief (VDHA) position at salary plan and grade ZB5-1861 ($7,527.37 - $9,149.57) in the Health Services Department. (Represented)

Proposed Effective Date: 3/28/2018

Classification Questionnaire attached: Yes ☐ No ☒ / Cost is within Department's budget: Yes ☒ No ☐

Total One-Time Costs (non-salary) associated with request: $0.00

Estimated total cost adjustment (salary / benefits / one time):

| | | | |
|---|---|---|---|
| Total annual cost | $176,332.41 | Net County Cost | $0.00 |
| Total this FY | $58,777.47 | N.C.C. this FY | $0.00 |

SOURCE OF FUNDING TO OFFSET ADJUSTMENT 100% within the Dept.'s budgeted General Fund allocation

Department must initiate necessary adjustment and submit to CAO.
Use additional sheet for further explanations or comments.

Melissa Carofanello
(for) Department Head

REVIEWED BY CAO AND RELEASED TO HUMAN RESOURCES DEPARTMENT

Susan Smith — 3/19/2018
Deputy County Administrator — Date

HUMAN RESOURCES DEPARTMENT RECOMMENDATIONS DATE _____
Exempt from Human Resources review under delegated authority.

Amend Resolution 71/17 establishing positions and resolutions allocating classes to the Basic / Exempt salary schedule.

Effective: ☐ Day following Board Action.
☐ _____(Date)

(for) Director of Human Resources — Date

COUNTY ADMINISTRATOR RECOMMENDATION: DATE 5/16/18

☐ Approve Recommendation of Director of Human Resources
☐ Disapprove Recommendation of Director of Human Resources
☒ Other: Approve as recommended by the Department.

/s/ Julie DiMaggio Enea
(for) County Administrator

BOARD OF SUPERVISORS ACTION:
Adjustment is APPROVED ☐ DISAPPROVED ☐

David J. Twa, Clerk of the Board of Supervisors and County Administrator

DATE _____ BY _____

APPROVAL OF THIS ADJUSTMENT CONSTITUTES A PERSONNEL / SALARY RESOLUTION AMENDMENT

POSITION ADJUSTMENT ACTION TO BE COMPLETED BY HUMAN RESOURCES DEPARTMENT FOLLOWING BOARD ACTION
Adjust class(es) / position(s) as follows:

P300 (M347) Rev 3/15/01

# REQUEST FOR PROJECT POSITIONS

Department _____ Date 5/16/2018 No. _____

1. Project Positions Requested:

2. Explain Specific Duties of Position(s)

3. Name / Purpose of Project and Funding Source (do not use acronyms i.e. SB40 Project or SDSS Funds)

4. Duration of the Project: Start Date _____ End Date _____
   Is funding for a specified period of time (i.e. 2 years) or on a year-to-year basis? Please explain.

5. Project Annual Cost

   a. Salary & Benefits Costs: _____

   b. Support Costs: _____
   (services, supplies, equipment, etc.)

   c. Less revenue or expenditure: _____

   d. Net cost to General or other fund: _____

6. Briefly explain the consequences of not filling the project position(s) in terms of:
   a. potential future costs
   b. legal implications
   c. financial implications
   d. political implications
   e. organizational implications

7. Briefly describe the alternative approaches to delivering the services which you have considered. Indicate why these alternatives were not chosen.

8. Departments requesting new project positions must submit an updated cost benefit analysis of each project position at the halfway point of the project duration. This report is to be submitted to the Human Resources Department, which will forward the report to the Board of Supervisors. Indicate the date that your cost / benefit analysis will be submitted

9. How will the project position(s) be filled?
   - ☐ a. Competitive examination(s)
   - ☐ b. Existing employment list(s) Which one(s)? _____
   - ☐ c. Direct appointment of:
     - ☐ 1. Merit System employee who will be placed on leave from current job
     - ☐ 2. Non-County employee

   Provide a justification if filling position(s) by C1 or C2

USE ADDITIONAL PAPER IF NECESSARY

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: APPROVE the Ninth Amendment to the MOU between Contra Costa County, City of San Ramon and Contra Costa Community College District, San Ramon area.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the County Librarian, or designee, to execute the Ninth Amendment to the Memorandum of Understanding (MOU) between the County of Contra Costa (County), the City of San Ramon (City) and the Contra Costa Community College District (College) for the operation of the Dougherty Station Library located at 17017 Bollinger Canyon Road, San Ramon for Fiscal Year 2018/2019.

**FISCAL IMPACT:**
100% County Library Funds.

**BACKGROUND:**
The County, City and College are parties to an MOU dated June 26, 2007, which allows the County to provide library services at the Dougherty Station Library located at 17017 Bollinger Canyon Road in San Ramon. The MOU provides that the County is then reimbursed for its costs in providing those services. The MOU was first amended in 2009 for Fiscal Years 2009/10 and 2010/11; in 2011 for Fiscal Year 2011/12; in 2013 for Fiscal Year 2012/13 and 2013/14; in 2014 for Fiscal Year 2014/15; in 2016 for Fiscal Year 2015/16;

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Stacey Sinclair, (925) 313-2130

**cc:**

BACKGROUND: (CONT'D)

in 2017 for Fiscal Year 2016/17; and in 2017 for Fiscal Year 2017/18 to provide for the County's reimbursement. The Ninth Amendment now needs to be approved by the Board of Supervisor's so that the County can be reimbursed for the library services provided in Fiscal Year 2018/19.

CONSEQUENCE OF NEGATIVE ACTION:

Failure to approve the Amendment to the MOU may reduce library services at the Dougherty Station Library, and the County will not be reimbursed for services provided in Fiscal Year 2018/19.

ATTACHMENTS

MOU

Ninth Amendment to the Memorandum of Understanding
Between the County of Contra Costa, the City of San Ramon and
the Contra Costa Community College District

This ninth amendment ("Ninth Amendment") is dated as of July 1, 2018, and is between the County of Contra Costa, a political subdivision of the State of California (the "County"), the City of San Ramon, (the "City"), and the Contra Costa Community College District (the "College District").

Recitals

A. The County, the City, and the College District are parties to a Memorandum of Understanding dated June 26, 2007, (the "MOU"). The MOU relates to the operation and maintenance of the Dougherty Station Library located at 17017 Bollinger Canyon Road, San Ramon.

B. The MOU was amended (i) July 1, 2009, to reflect the schedule of costs and hours of operation for Fiscal Year 2009/10 and 2010/11, (ii) as of June 21, 2011, to reflect the schedule of costs and hours of operation for Fiscal Year 2011/12, (iii) June 11, 2013, to reflect the schedule of costs and hours of operation for Fiscal Year 2012/13 and 2013/14, (iv) July 1, 2014 to reflect the schedule of costs and hours of operation for Fiscal Year 2014/15, (v) July 1, 2016 to reflect the schedule of costs and hours of operation for Fiscal Year 2016/17, and (vi) July 1, 2017, to reflect the schedule of costs and hours of operation for Fiscal Year 2017/18. The parties now desire to further amend the MOU to reflect the schedule of costs and hours of operation for Fiscal Year 2018/19.

The parties therefore mutually agree as follows:

Agreement

1. The MOU is hereby amended to include the terms set forth in Attachment A-9, which is attached to this Ninth Amendment.

2. All other terms of the MOU remain unchanged.

[Remainder of Page Intentionally Left Blank]

The parties are signing this Ninth Amendment as of the date set forth in the introductory paragraph.

**COUNTY**

COUNTY OF CONTRA COSTA, a political subdivision of the State of California

By _____
Melinda S. Cervantes, County Librarian

**RECOMMENDED FOR APPROVAL:**

By _____
Brian M. Balbas
Public Works Director

By _____
Karen Laws
Principal Real Property Agent

**APPROVED AS TO FORM:**

SHARON L. ANDERSON
County Counsel

By _____
Kathleen M. Andrus
Deputy County Counsel

**CITY OF SAN RAMON**

CITY OF SAN RAMON, a municipal corporation

By _____
Bill Clarkson, Mayor

By _____
Joseph Gorton, Interim City Manager

The Foregoing Agreement Has Been Reviewed and Approval is Recommended

By _____
Eric Figueroa Date
Interim Director, Parks & Community Services

**APPROVED AS TO FORM**

By _____
Robert Saxe Date
Interim City Attorney

**ATTEST:**

By _____
Renee Beck Date
City Clerk

City Council Resolution # _____

**COLLEGE DISTRICT**

CONTRA COSTA COMMUNITY COLLEGE DISTRICT, a community college district duly organized and existing under and by virtue of the laws of the state of California

By _____
David Wetmore Date
Director of Purchasing

# HOURS OF OPERATION AND SCHEDULE OF COSTS

## A. INTRODUCTION

The City of San Ramon (the "City"), Contra Costa County (the "County"), and the Contra Costa Community College District (the "College District"), are the responsible parties in the administration, funding, and continuing development of the Dougherty Station Library (the "Library") located at 17017 Bollinger Canyon Road in San Ramon, California.

## B. HOURS OF OPERATION

The Library's base level for hours of operation is thirty-five (35) hours per week. In order to better meet the needs of College students and faculty, as well as the general public, the parties agree to increase the Library Service Hours above the base level to fifty (50) hours per week beginning July 1, 2018, and continuing through June 30, 2019, as follows:

| Days | Hours of Operation | Number of Hours |
|---|---|---|
| Monday | 10:00 a.m. – 8:00 p.m. | 10 |
| Tuesday | 12:00 p.m. – 8:00 p.m. | 8 |
| Wednesday | 12:00 p.m. – 8:00 p.m. | 8 |
| Thursday | 10:00 a.m. – 8:00 p.m. | 10 |
| Friday | 10:00 a.m. – 5:00 p.m. | 7 |
| Saturday | 10:00 a.m. – 5:00 p.m. | 7 |
| Sunday | Closed | |
| TOTAL HOURS | | 50 |

## C. SCHEDULE OF COSTS FOR HOURS OF OPERATION

C. 1. The County shall pay for personnel costs to operate the Library for 35 hours of Library service, estimated to be $538,722 for FY 2018/19.

C. 2. The College shall pay for a portion of the personnel costs, including one half-time Library Specialist, to increase hours of operation for the Library from thirty-five (35) hours to fifty (50) hours, at a cost not to exceed $100,000.

C. 3. The City shall pay for a portion of the personnel costs to increase hours of operation for the Library from thirty-five (35) hours per week to fifty (50) hours per week, at a cost not to exceed $14,246.

C. 4. If the College brings funding beyond the $100,000 stated in C.2 through a mid-year budget augmentation, the City's contribution shall be reduced by the same amount not to exceed the City's total FY 2018/19 commitment.

D. SCHEDULE OF COSTS FOR LIBRARY MATERIALS

D. 1. The County shall provide annual funding for materials at the Dougherty Station Library, with a single amount determined using a formula that considers the total population of San Ramon and combined circulation of both the San Ramon and Dougherty Station libraries as a percentage of Contra Costa County Library's service area population and total circulation. The Senior Community Library Manager will then allocate this funding.

D. 2. The College shall spend a minimum of Fifteen Thousand Dollars ($15,000) for materials in FY 2018/19. The College will spend these funds, in consultation with the San Ramon Senior Community Library Manager, for materials including, but not limited to:

- Payment for annual subscriptions to serials and standing orders specifically selected by the College in support of the curriculum.
- Payment to College vendors for books purchased in support of College curriculum.
- Payment for online databases, e-books and other electronic resources available only to College students and faculty.

Contra Costa County

To: Board of Supervisors

From: Matt Slattengren

Date: May 22, 2018

Subject: EBRPD Noxious Weed Service Agreement 2018

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Agricultural Commissioner, or designee, to execute a contract containing modified indemnification language and accept reimbursement in an amount not to exceed $40,000 from East Bay Regional Park District (District) to provide noxious weed control services in District parks and associated land bank areas within Contra Costa County for the period January 1, 2018 through December 31, 2018.

**FISCAL IMPACT:**
This agreement will reimburse the Agriculture Department an amount not to exceed $40,000 for noxious weed control services in East Bay Regional District parks. There is no county match of funds, nor grant money involved. The amount was anticipated and included in the FY 17/18 budget.

**BACKGROUND:**
The Agriculture Department (Department) shall supply appropriate products to spray noxious weeds, as identified, with the use of backpack sprayers, all-terrain vehicles and/or boom truck sprayers to those East Bay Regional Park District (District) parks within the jurisdiction and operation of the Department. The noxious weed control services are limited to those locations where noxious weeds have been located, identified and pose a public, economic, environmental or recreational nuisance. It is the responsibility

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: 646-5250

By: , Deputy

**cc:**

BACKGROUND: (CONT'D)

of the Department to use products approved by District's Integrated Pest Management (IPM) department and ensure that their use is in compliance with all Federal and State laws and regulations governing pesticides. The performance of noxious weed control services will be within normal business hours. This agreement has a modified indemnification clause and is retroactive to January 1, 2018. Services will be provided at District parks and associated land bank areas for the period January 1, 2018 through December 31, 2018.

CONSEQUENCE OF NEGATIVE ACTION:

If not approved, the Department would have a loss of revenue and noxious weeds could spread within Contra Costa County.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: Sponsorship Funding

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to execute a contract with Bay Alarm Company, including modified indemnification language, to pay the County $26,000 the first year and $27,000 the second year for sponsorship funding designated to provide scholarships, classes, and recruitment for the Law Enforcement Training Center for the period July 1, 2018 through June 30, 2020, with the Sheriff's Charities, Inc., serving as the fiscal agent.

**FISCAL IMPACT:**
$53,000 in revenue over two years; Budgeted.

**BACKGROUND:**
Bay Alarm provides scholarship funding in an effort to promote the education and training of local law enforcement recruits and officers. Additionally, Bay Alarm provides funding for advertisement along with event and media support for the recruitment of law enforcement officers. Board approval is requested due to changes in the County's standard form contract indemnification language. The indemnification clause holds the County responsible for all legal costs incurred in the defense of a claim should the County choose to hire counsel separate from the indemnifying party.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☑ APPROVED AS RECOMMENDED ☐ OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Sandra Brown, 925-335-1553

By: , Deputy

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Failure to approve this contract will negatively impact law enforcement efforts in the County. Bay Alarm sponsorship assist in advertising for recruits, promotes awareness of the local availability of courses and services, allows for the continued curriculum that would otherwise be eliminated, and provides scholarships to qualified candidates.

CHILDREN'S IMPACT STATEMENT:

No impact.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018 DNA Capacity Enhancement and Backlog Reduction Grant

**RECOMMENDATION(S):**
ADOPT Resolution No.,2018/174 authorizing the Sheriff-Coroner, or designee, to apply for and accept the U.S. Department of Justice, Office of Justice Programs, DNA Program Backlog Reduction Grant in an initial amount of $238,151 to reduce the number of backlogged DNA tests in the Sheriff's Criminalistics Laboratory for the period January 1, 2019 through the end of the grant period.

**FISCAL IMPACT:**
No County costs. Initial revenue: $238,151, 100% Federal revenue, no County match required.

**BACKGROUND:**
The Office of the Sheriff, Forensic Services Division, has received DNA Backlog Reduction Program funds for many years. As a result, the Sheriff's Office has operated an ISO 17025 Accredited Crime Laboratory able to provide County-wide Forensic DNA testing services. Grant funds have been used in the past to purchase scientific equipment allowing for high throughput DNA extraction, quantification and detection. In addition, funding supported DNA analysts who process DNA samples collected at crime scenes to aid in criminal investigations and prosecutions. The 2018 DNA Backlog Reduction Program Grant will be used to support DNA analysts, acquire advanced technology, and provide state-of the art forensic DNA testing to law enforcement agencies in the Contra Costa County.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

A decision not to pursue grant funding will increase the DNA case backlog, increase the turnaround time for DNA sample processing, and contribute to delays in criminal prosecutions.

CHILDREN'S IMPACT STATEMENT:

No impact.

ATTACHMENTS

Resolution No. 2018/174

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/174**

IN THE MATTER OF: Applying for and Accepting the 2018 U.S. Department of Justice, Office of Justice Program, DNA Program Backlog Reduction Grant.

WHEREAS,the County of Contra Costa is seeking funds available through the U.S. Department of Justice;

NOW, THEREFORE, BE IT RESOLVED, that the Board of Supervisors: Authorizes the Sheriff-Coroner, Undersheriff or the Sheriff's Chief of Management Services, to execute for and on behalf of the County of Contra Costa, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining Federal financial assistance provided by the U.S. Department of Justice.

**Contact: Sandra Brown 925-335-1553**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:**

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: 2018-19 Department of Energy / Weatherization Assistance Program Contract

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment & Human Services Director, or designee, to execute a contract containing modified indemnification language with the California Department of Community Services and Development, to pay County an amount not to exceed $166,495 for the U.S. Department of Energy Weatherization Assistance Program for low-income households for the period June 1, 2018 through May 31, 2019.

**FISCAL IMPACT:**
This grant is funded 100% from federal funds from the U.S. Department of Health and Human Services passed though the California Department of Community Services and Development Department. The CFDA No. is # 84.042. There is no net County cost. The Contra Costa County contract number for this grant is 39-800-20.

**BACKGROUND:**
The County routinely receives funds from the California Department of Community Services and Development to manage a Department of Energy Weatherization Assistance program. Contra Costa County has received funding from the State Department of Community Services and Development for 23 years wherein the county provides energy bill assistance payments and weatherization services to county residents who are income-eligible to receive said services. The funding source is federal funding from

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**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Cassandra Youngblood, (925) 681-6334

**cc:** Nelly Ige, Sam Mendoza

BACKGROUND: (CONT'D)

the Department of Energy passed through by the California Department of Community Services and Development. The county receives the money via the Employment & Human Services Department (EHSD); EHSD, in turn, partners with the County's Department of Conservation and Development to provide direct services to clients through energy saving home improvements. The energy saving measures may provide homes with hot water heaters, furnaces, refrigerators, microwaves, doors, windows, florescent light bulbs, weather stripping, ceiling fans, and attic insulation. Homes receive a blower door test (a diagnostic tool to locate and correct air infiltration), and homes with gas appliances receive a combustion appliance safety test that checks for carbon monoxide gas leakage. Homes with gas appliances are provided with carbon monoxide alarms. The program uses income-based eligibility as per the federal poverty guidelines for that program year. Once eligibility is determined, clients with no hot water, no heat, or are in danger of having their power shut off are served as emergencies. Services are then based on clients with the lowest income, highest energy burden, and those with one household member who is considered in the vulnerable population.

This board order is to accept funding for the 2018-19 program year.

CONSEQUENCE OF NEGATIVE ACTION:

If not approved, the Department will not receive funding to operate the weatherization assistance program in Contra Costa County.

CHILDREN'S IMPACT STATEMENT:

The Employment & Human Services Department, Community Services Bureau energy program supports one Contra Costa County community outcome - Outcome #4: "Families that are Safe, Stable and Nurturing." This outcome is supported by the provision of home energy assistance to keep households warm in winter and to increase household energy efficiency.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Grant Award #28-637-25 with the U. S. Department of Health and Human Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to accept a Grant Award #28-637-25 (CFDA 93.918, H76HA00618) with the U.S. Department of Health and Human Services (Health Resources & Services Administration), to pay the County an amount not to exceed $55,563, for the Ryan White, Part C, HIV Early Intervention Services Program, for the period from May 1, 2018 through April 30, 2019.

**FISCAL IMPACT:**
Acceptance of the Grant Award will result in payment to the County up to $55,563 in funding from the U.S. Department of Health and Human Services (Health Resources & Services Administration). No County match required.

**BACKGROUND:**
West Contra Costa County has been hard hit by the AIDS epidemic with 25% of those living with AIDS residing in the City of Richmond. Unfortunately, a large percentage of those living with HIV/AIDS are of low-income having to rely on Basic Health Care (BHC) for their medical care, or forced to pay for their medical care, because they do not qualify for BHC services. The County's AIDS Program works closely

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Dan Peddycord, 925-313-6712

**cc:** Tasha Scott, Marcy Wilhelm

BACKGROUND: (CONT'D)

with other staff in Public Health as well as physicians and medical social workers at Contra Costa Regional Medical Center and Health Centers, community-based partners, and private providers throughout the County to reduce the transmission of HIV, improve access to health care, and to enhance quality of life for those with HIV.

Approval of Grant Award #28-637-25 will allow the County's AIDS Program to continue to receive funding to provide outpatient medical services to low-income HIV positive recipients in West Contra Costa County through April 30, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this grant is not approved, the County will not receive funds to assist the low-income HIV positive recipients in West Contra Costa County with outpatient medical services.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018-2019 Keller Canyon Mitigation Trust Fund

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $8,000 from Contra Costa Keller Canyon Mitigation Trust Fund to purchase educational products to be given to children and the elderly during public outreach events for the Keller Canyon Fund's primary target areas Bay Point and Pittsburg West of Harbor.

**FISCAL IMPACT:**
Initial amount of $8,000, 100% Keller Canyon Mitigation Funding. No County match.

**BACKGROUND:**
The Communications Center is sending representatives into the community to educate them on the use of 9-1-1. There is a need to purchase products to create impactful events. The public education program 9-1-1 for Kids sells products (English and Spanish) endorsed and supported by: The Association of Public Safety Communications Official International (APCO); The E-911 Institute; The National Emergency Number Association and The National Association of Nine-one-one Administrators. This organization has lesson plans for children, teens and seniors that are fun and facilitate

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

BACKGROUND: (CONT'D)

the learning process." 9-1-1 for Kids® By applying for and being awarded a portion of the Keller Canyon Grant we would be able to purchase a Red E. Fox costume, lesson plans, 9-1-1 stickers, book marks, coloring books and other fun items to educate children. The additional benefit of spending time educating the children in the community is the positive interaction that gives Sheriff's Dispatchers the opportunity to give back in a safe, fun and compassionate way. This will create a connection is in line with the Community Policing that the Office of the Sheriff strives to achieve.

CONSEQUENCE OF NEGATIVE ACTION:

Community members would not have the benefit of lesson plans and products specifically designed to educate them about 9-1-1 in English and Spanish.

CHILDREN'S IMPACT STATEMENT:

By educating children at an early age on how to use 9-1-1 correctly, youngsters can act quickly and confidently to obtain the necessary public safety or medical assistance they need to save lives and property, as well as teaching their siblings, family members, friends and neighbors.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Grant Agreement #29-549-4 from John Muir Health

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Grant Agreement #29-549-4 from John Muir Health, to pay the County an amount not to exceed $50,000 for respite care services provided to homeless adults at the Philip Dorn Respite Center for the period January 1, 2018 through December 31, 2018.

**FISCAL IMPACT:**
Approval of this agreement will allow the County to receive an amount not to exceed $50,000. No County match required.

**BACKGROUND:**
The Philip Dorn Respite Center, as a Community Benefit Program, located in Concord, is a respite care program for homeless adults who are discharging from local hospitals and require medical stabilization services. Respite care refers to recuperative services for those homeless persons who may not meet medical criteria for hospitalization, but who are too sick or medically vulnerable to reside in an emergency shelter and cannot be returned to the streets. The goal of the program is to get all homeless persons off the street and help them to achieve their highest level of self-sufficiency.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lavonna Martin, 925-608-6701

By: , Deputy

**cc:** L Walker , M Wilhelm

BACKGROUND: (CONT'D)

Approval of Grant Agreement #29-549-4 will allow the County to continue to receive support for the Philip Dorn Respite Center through December 31, 2018. This agreement includes agreeing to indemnify John Muir Health for any claims arising out of the County's performance under the agreement.

CONSEQUENCE OF NEGATIVE ACTION:

If this agreement is not approved, the County will not be able to receive funding for services provided at the Philip Dorn Respite Center.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: 2017-18 Quality Matters Grant Amendment

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment & Human Services Department Director, or designee, to accept additional funding in the amount of $12,250 for a new total of $260,250 from Contra Costa County Office of Education for Quality Matters with no change to term July 1, 2017 through June 30, 2018.

**FISCAL IMPACT:**
This funding is from the Contra Costa County Office of Education and does not require a County match.

**BACKGROUND:**
The Department's Community Services Bureau (CSB) submitted a grant application to Contra Costa County Office of Education to receive funding to implement a Quality Matters program through stipends for the Balboa, Bayo Vista, Brookside, Crescent Park, George Miller-Concord, George Miller III - Richmond, Las Deltas, Lavonia Allen, Los Arboles, Los Nogales, Riverview childcare centers. Stipends will also be granted to childcare partners, Little Angels Country School and First Baptist Head Start - Fairgrounds. Stipends will be used to fund professional growth training for staff responsible for program implementation.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: CSB (925) 681-4266

**cc:** Ressie Dayco, Amy Wells

BACKGROUND: (CONT'D)

The stipends are awarded to child care centers to improve the quality services through enhanced professional development for staff and updated, improved site materials. The stipends will be given out on a per classroom basis. The site supervisors, under the direction of Community Services Bureau Assistant Directors, will determine what specific site materials, such as play equipment or educational toys, will be purchased. Professional development stipends will be distributed to selected classrooms, not to individuals, to fund site-based training for classroom staff.

Selection of site award is determined by which sites have NAEYC (National Association of Education of Young Children) and/or PMD (Preschool Makes a Difference) designations. The CSB Director will make final decisions regarding stipend allocations. Allocation will be based on site designation, size of center population, and professional learning needs as determined through assessment. The board approved the receipt of funds on August 1, 2017 (c.46). This board order is to accept additional funding from this grantor which will benefit the following additional Children's Centers: Ambrose, Contra Costa College, Marsh Creek and Verde.

CONSEQUENCE OF NEGATIVE ACTION:

If not approved, the department will not receive funding to implement Quality Rating System components.

CHILDREN'S IMPACT STATEMENT:

The Community Services Bureau of the Employment & Human Services Department's Early Head Start program supports three of Contra Costa County's community outcomes - Outcome 1: "Children Ready for and Succeeding in School," Outcome 3: "Families that are Economically Self-sufficient," and, Outcome 4: "Families that are Safe, Stable, and Nurturing." These outcomes are achieved by offering comprehensive services, including high quality early childhood education, nutrition, and health services to low-income children throughout Contra Costa County.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018-2019 Keller Canyon Mitigation Trust Fund - Bay Point Resident Deputy

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $276,217 from the Contra Costa County Keller Mitigation Trust Fund to fund one Deputy Sheriff position for the Bay Point Resident Deputy program for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
$276,217, 100% Keller Canyon Mitigation Fund. No County match.

**BACKGROUND:**
The Bay Point Resident Deputy Program provides focused Community Policing to the residents of Bay Point with an emphasis on crime prevention, enforcement, active participation in the National Crime Free Housing Program, acts as a liaison to local businesses and works with the School Resource Officer to implement and participate in youth crime prevention programs. Due to the level of continual and increasing criminal activity in the Bay Point community, the regular beat deputies are often unable to address many of the quality of life issues affecting residents. The Resident Deputy Program allows the program deputies to concentrate on the prevention of criminal activity,

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☑ APPROVED AS RECOMMENDED ☐ OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

BACKGROUND: (CONT'D)

build personalized/ one-on-one relationships with businesses and residents alike, allows time to familiarize themselves with specific criminal elements, identify and strengthen vulnerable points of the community and improve the overall atmosphere of the neighborhoods by adding a consistent enforcement.

CONSEQUENCE OF NEGATIVE ACTION:

The Office of the Sheriff would not be able to fund a full time Bay Point Resident Deputy.

CHILDREN'S IMPACT STATEMENT:

The Bay Point Resident Deputy works with the School Resources Officer to implement and participate in youth crime prevention programs.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018-2019 Keller Canyon Mitigation Trust Fund - Bay Point Bicycle Safety Rodeo

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff, or designee, to apply for and accept a grant in an initial amount of $4,500 from Contra Costa County Keller Mitigation Trust Fund. The funds will be used to provide bicycle helmets, bicycle repair, an instructional class on safety and bicycle raffles.

**FISCAL IMPACT:**
$4,500, 100% Keller Canyon Mitigation Funds. No matching County Funds.

**BACKGROUND:**
The Contra Costa County Office of the Sheriff, in partnership with the Street Smarts Program, Bike Mobile (mobile bike repair program) and County Health Services, will host a free bicycle safety rodeo to teach local youths about bicycle, pedestrian and railroad crossing safety. There is a sit down class of instruction on the above safety items. A practical application course has been set up for the youths to exercise and practice what they have learned. All participates will receive a free bike helmet. The Bike Mobile will repair, at no cost, bicycles brought to the event by local youths that are in need of repairs. Due to the financial economics of local families,

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☑ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

BACKGROUND: (CONT'D)

many of the local youths do not own a bicycle. With the funding from the Keller Canyon Mitigation Fund, bicycles will be purchased and raffled free at the event. This event will also encourage the local youth to involve themselves in physical activity by riding their bicycles.

CONSEQUENCE OF NEGATIVE ACTION:

The Office of the Sheriff would not be able to help host the Bay Point Bicycle Rodeo.

CHILDREN'S IMPACT STATEMENT:

This event will encourage the local youth to involve themselves in physical activity by riding their bicycles.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018-2019 Keller Canyon Mitigation Trust Fund - Bay Point Blight Program

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $5,000 for the Contra Costa Keller Mitigation Trust Fund to assist in expedited removal of litter dumps and the removal of graffiti.

**FISCAL IMPACT:**
$5,000. 100% Keller Canyon Mitigation Fund. No County match.

**BACKGROUND:**
There are numerous litter dumps and abandoned shopping cars full of trash strewn amongst the streets of Bay Point. At times the expedited removal of these dumps is required and can't wait for the regular route pick up to remove. More trash, household appliances and furniture get added to the dump the longer it waits to be picked up. This program will allow to immediate address the issue.

**CONSEQUENCE OF NEGATIVE ACTION:**
The current problem of not being able to quickly address the issue will continue.

**CHILDREN'S IMPACT STATEMENT:**
This program will allow for cleaner safer streets for children.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Sandra Brown
925-335-1553

By: , Deputy

**cc:**

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018-2019 Keller Canyon Mitigation Trust Fund - Bay Point Christmas Dinner & Toy Giveaway

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $9,000 from Contra Costa Keller Canyon Mitigation Trust Fund to host a free community Christmas party and toy giveaway for the residents of Bay Point.

**FISCAL IMPACT:**
$9,000, 100% Keller Canyon Mitigation Funding. No County match.

**BACKGROUND:**
The Contra Costa County Office of the Sheriff will host a free community Christmas Party and Toy Giveaway for the residents of Bay Point. Last years event provided meals for 775 people. The meal consisted of turkey, stuffing, mashed potatoes, corn, and dessert. During the meal, local performers provided entertainment. Over 1,400 toys were given to the children of Bay Point. Our goal is to continue to develop positive relationships between the residents of Bay Point and the Office of the Sheriff by demonstrating our good will and sincerity at the event. The verifiable changes come from the increased witness participation in the community; developing trust is a key to our success.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

The Office of the Sheriff would not be able to host the annual Christmas party and toy giveaway.

CHILDREN'S IMPACT STATEMENT:

Many families in Bay Point have very limited incomes. The Sheriff's Christmas Party provides a meal and gifts to children who would otherwise not receive a traditional Christmas dinner or gifts during the holiday season.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018-2019 Keller Canyon Mitigation Trust Fund - Bay Point Gang Prevention

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $8,000 from Contra Costa County Keller Canyon Mitigation Trust fund for gang intervention programs.

**FISCAL IMPACT:**
$8,000, 100% Keller Canyon Mitigation Funds. No County match.

**BACKGROUND:**
Early prevention programs that target youth at risk of gang involvement helps reduce the number of youth who join gangs. Intervention programs and strategies provide sanctions and services for younger youth who are at risk of joining gangs. This program will involve movie nights at the local schools, an after school sports program, fishing trips in the Delta as well as trips to A's game and other activities that arise during the year.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Office of the Sheriff would not be able to identify and reach at risk youths before they join a gang or associate with gang members.

**CHILDREN'S IMPACT STATEMENT:**
By creating early prevention programs this will make a safer environment for the children of Bay Point.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018-2019 Keller Canyon Mitigation Trust Fund - Bay Point School Resource Officer

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to apply for and accept a grant in an initial amount of $276,217 from Contra Costa County Keller Canyon Mitigation Trust fund to fund one Deputy Sheriff position for the Bay Point School Resource Officer Program for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
$276,217, 100% Keller Canyon Mitigation Funds. No County match.

**BACKGROUND:**
The Bay Point School Resource Officer Program is to emphasize the prevention and enforcement of criminal matters and to participate in the youth intervention programs. In addition to the general goals the School Resource Officer also assists the Resident Deputies with organizing and planning the yearly Christmas and Holiday Heroes programs and the annual Bike Rodeo and bicycle give-away. The outcomes and impacts of this project will result in reducing the number of incidents within the local schools, increasing public trust, and reducing the seriousness of incidents and/or the amount of harm, as reflected in routinely collected law enforcement data/information related

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

BACKGROUND: (CONT'D)

to problems (e.g. crime data, arrests, incident reports, calls for service). Since this is an on-going project, the School Resource Officer is flexible in approaching and dealing with the issues affecting the schools, their students and the community. In the off season while school is out of session, the School Resource Officer focuses on the Crime Free Multi-Housing Program to ensure the children have a safe/crime free home environment.

CONSEQUENCE OF NEGATIVE ACTION:

The Office of the Sheriff would not be able to fund a full time Bay Point School Resource Officer.

CHILDREN'S IMPACT STATEMENT:

The Bay Point School Resource Officer helps to establish a safe school environment and promote positive development of the Bay Point youth.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: 2018 Bulletproof Vest Partnership Grant

**RECOMMENDATION(S):**
ADOPT Resolution No. 2018/183 authorizing the Sheriff-Coroner, or designee, to apply for and accept a U.S. Department of Justice National Institute of Justice grant in an initial amount of $180,000 for the purchase of bullet proof vests from September 1, 2018 through August 31, 2020.

**FISCAL IMPACT:**
50% County cost: $90,000.00, budgeted. 50% Federal; $90,000.00. The Bulletproof Vest Partnership Program grant through the National Institute of Justice requires local jurisdictions to pay 50% of the cost of bulletproof vest replacement.

**BACKGROUND:**
The U.S. Department of Justice, National Institute of Justice announced the 2018 Bulletproof Vest Partnership grant program to assist in the purchase of life-saving bulletproof vests approved by the National Institute of Justice. Bulletproof vests are replaced on a five-year cycle. The vests to be purchased with these grant funds will be used to replace vests that have exceeded their life cycle. The Sheriff's Office is by far the largest purchaser of safety vests among the County agencies. If this grant is awarded, the grant will provide support for the purchase of bulletproof vests for law enforcement personnel in the Sheriff's Office as well as the Department of Probation which is a sub-grantee on the grant application.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Bulletproof vests will be purchased exclusively with appropriated funds if this application is not accepted.

CHILDREN'S IMPACT STATEMENT:

No impact.

ATTACHMENTS

Resolution No. 2018/183

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/183**

**IN THE MATTER OF**: Applying for and Accepting the 2018 U.S. Department of Justice National Institute of Justice grant.

**WHEREAS**, the County of Contra Costa is seeking funds available through the U.S. Department of Justice.

**NOW, THEREFORE, BE IT RESOLVED** that the Board of Supervisors: Authorizes the Sheriff-Coroner, Undersheriff or the Sheriff's Chief of Management Services, to execute for and on behalf of the County of Contra Costa, a public entity established under the laws of the State of California, an actions necessary for the purpose of obtaining Federal financial assistance provided by the U.S. Department of Justice.

**Contact: Sandra Brown 925-335-1553**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:**

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contra Costa County Office of Education Childcare Subsidy Pilot Project

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment & Human Services Department Director, or designee, to execute an agreement, including an indemnification clause from Contra Costa County Office of Education for a Childcare Subsidy Pilot Project during the term March 1, 2018 through June 30, 2023.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
Contra Costa County, through the Employment & Human Services Department, has been invited to participate in a pilot study of childcare subsidies. The pilot is operated by the Contra Costa County Office of Education (COE). The department will share childcare enrollment information with COE to evaluate the methods by which daily childcare enrollment is calculated to draw down funds from the California Department of Education. At this point, the agreement is non-financial but may lead to future childcare expense subsidies as the study continues.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Cassandra Youngblood, (925) 681-6389

**cc:** Amy Wells, Nelly Ige

BACKGROUND: (CONT'D)

This project is the result of Assembly Bill 435 (AB 435) put in place to address two fundamental concerns around childcare. One, families with incomes narrowly meeting the high cost of housing in the County are considered as having too high of an income to qualify for childcare subsidies. Two, the state reimbursement rates to providers are so low that providers are unable to cover their costs.

CONSEQUENCE OF NEGATIVE ACTION:

If not approved, the department will not participate in the project which would preclude future potential subsidies.

CHILDREN'S IMPACT STATEMENT:

The Community Services Bureau of the Employment & Human Services Department's Early Head Start program supports three of Contra Costa County's community outcomes - Outcome 1: "Children Ready for and Succeeding in School," Outcome 3: "Families that are Economically Self-sufficient," and, Outcome 4: "Families that are Safe, Stable, and Nurturing." These outcomes are achieved by offering comprehensive services, including high quality early childhood education, nutrition, and health services to low-income children throughout Contra Costa County.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Application #28-898-1 with the California Office of Emergency Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to submit funding application #28-898-1 to the California Office of Emergency Services, in an amount payable to County that will not exceed $35,000, for the Hazardous Materials Emergency Planning (HMEP) Program, for the period October 1, 2018 through September 30, 2019.

**FISCAL IMPACT:**
Approval of this agreement will result in an amount not to exceed $35,000 of funding from the California Office of Emergency Services for the HMEP Program through September 30, 2019. No County funds are required.

**BACKGROUND:**
The goals of the HMEP Program is to identifying risks from hazardous materials releases due to possible disruption of transportation due to sea level rise/flooding as predicted by the Adapting to Rising Tides Program. Identifying these issues will help the County to better address and plan for hazardous materials releases in order to protect and promote health, safety, and wellbeing of Contra Costa residents.

After the completion of the Adapting to Rising Tides Program, it is clear that the County must take action to identify risks that exist within the shoreline, specifically in regards to hazardous materials. This study is

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Randy Sawyer, 925-335-3210

By: , Deputy

**cc:** Tasha Scott, Marcy Wilhelm

BACKGROUND: (CONT'D)

needed to foster a greater understanding on how major hazardous materials transportation, such as our rail system, can be impacted by sea level rise/flooding and how that can increase our risk for hazardous materials incidents that can affect the health and safety of our community. Understanding how transportation disruptions can impact the County-wide system will benefit hazardous materials emergency response planning and overall shoreline planning as the actions from the Adapting to Rising Tides project work are implemented.

Approval of this Application #28-898-1 will allow County to apply for funding for the HMEP Program, through July 31, 2018.

CONSEQUENCE OF NEGATIVE ACTION:

If this agreement is not approved, County will not be able to better identify the risks from hazardous materials releases to Contra Costa County residents.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Approve Clarification of Board action of February 27, 2017, item C.56 with Valley Air Conditioning & Repair

**RECOMMENDATION(S):**
APPROVE clarification of Board of Supervisors action of February 27, 2018 (C.56), to reflect that the correct name of the contracting party is Valley Power Systems North, Inc., rather than Valley Air Conditioning & Repair, as recommended by the Public Works Director, Countywide.

**FISCAL IMPACT:**
This cost is to be funded through Facilities Services maintenance budget. (100% General Funds)

**BACKGROUND:**
On February 27, 2018, the Board of Supervisors approved a contract with Valley Air Conditioning & Repair.

The purpose of this board order is to correct an error in the contractor's name which should have been Valley Power Systems North, Inc.

**CONSEQUENCE OF NEGATIVE ACTION:**
If this action is not approved, generator maintenance and repair services will not be executed by this contractor.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Stan Burton, 925-313-7078

By: , Deputy

**cc:**

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: APPROVE a contract with Contra Costa ARC to provide packet fulfillment services.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Public Works director, or designee, to execute a contract with Contra Costa ARC, dba Commercial Support Services, in an amount not to exceed $450,000 to provide packet fulfillment services for Print and Mail Services, for the period June 1, 2018 through May 31, 2020, Countywide.

**FISCAL IMPACT:**
This contract is funded 100% by Department user fees.

**BACKGROUND:**
California Welfare and Institute Code section 19404 ("Section 19404") gives the County the authority to purchase services from non-profit corporations who operate community rehabilitation programs and meet the criteria of Section 19404 without advertising or calling for bids, provided that the services meet the specifications and needs of the County and are purchased at a fair market price, as determined by the County.

Contra Costa ARC (CCARC) is a California 501(c)(3) non-profit corporation, doing business as Community Support Services. CCARC meets the requirements of Section 19404 in

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Dale Morseman, 925-646-5520

By: , Deputy

**cc:**

BACKGROUND: (CONT'D)

that: (1) the work to be performed under the contract will primarily (at least 75% of it) be performed by a labor force comprised of persons with disabilities; (2) CCARC makes elections under the federal Insurance Contributions Act to provide social security and unemployment benefits to its employees; (3) maintains Articles of Incorporation requiring that at least two directors on its Board of Directors are persons with disabilities; and (4) provides disabled employees substantially equal benefits that are provided to the CCARC's organized employees.

CCARC has a client in training/contractor relationship with its workers and provides sick time and vacation. CCARC dos no commit unfair labor practices and abides by the provisions of the Federal Fair Labor Standards Act, the Walsh-Healy Public Contract Act, the Wagner O'Day Act, and the regulations of the State Division of Industrial Welfare.

For several years the Print and Mail Services Division has contracted with CCARC to fill the low-skill need of assembling informational packets (i.e. packet fulfillment services) for use by the Employment and Human Services Department (EHSD) as well as other County departments. Due to their involvement with and support of Covered California, the volume of work generated by EHSD has remained high. The number of crew members required to meet the need varies from seven to ten crew members with two supervisors.

Approval of the Contract will enable CCARC to continue to provide packet fulfillment services through May 2020.

CONSEQUENCE OF NEGATIVE ACTION:

If this Contract is not approved, sublet packet fulfillment services will not be performed and the volume of work will exceed the capabilities of the existing workforce.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Interagency Agreement with Mt. Diablo Adult Education

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an interagency agreement with Mt. Diablo Adult Education in an amount not to exceed $53,000 to provide services to California Work Opportunity and Responsibility to Kids (CalWORKs) Welfare-To-Work (WTW) Program participants with targeted vocational training inclusive of vocational basic education and workforce skills for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The interagency agreement is funded with 100% CalWORKs Single Allocation revenue (85% Federal, 15% State). Federal CFDA #93.558.

**BACKGROUND:**
The Finding Opportunities Careers for Ultimate Self-sufficiency (FOCUS) Program offers Welfare-to-Work (WTW) participants the opportunity to participate in vocational training and/or job skills workshops at the Mt. Diablo Adult Education school. FOCUS is intended to provide clients with additional assessment, support, and training/educational services which will further delineate their educational and professional path as well as educational/career advancement ultimately leading to job placement or continued educational attainment. The FOCUS Program is intended to offer WTW participants

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

an opportunity to increase their awareness of how their views and experiences shape their perception about work, money, and the circumstances of their lives. Understanding their role enables participants to decrease the barriers and increase the motivation to set goals and accomplish them.

CONSEQUENCE OF NEGATIVE ACTION:

Without approval, the FOCUS program participants will have fewer opportunities to be engaged in vocational training and/or job skills services geared toward job placement and/or continued educational attainment, resulting in continued reliance on public benefits.

Contra Costa County

To: Board of Supervisors

From: John Kopchik, Director, Conservation & Development Department

Date: May 22, 2018

Subject: Contract extension with Craft Consulting Group for Northern Waterfront Strategic Action Plan

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Director of Conservation and Development, or designee, to execute a contract amendment with Craft Consulting Group (Craft), to extend the term of contract #46012 from June 30, 2018 through December 31, 2018 with no change to the existing payment limit of $125,514. This will allow Craft to continue to provide services on the preparation of the Strategic Action Plan and related tasks for the Northern Waterfront Economic Development Initiative.

**FISCAL IMPACT:**

There is no fiscal impact because there is no increase in fees proposed.

**BACKGROUND:**

The Department of Conservation and Development (DCD) has an existing contract with Craft to create a Strategic Action Plan for the Northern Waterfront Economic Development Initiative (NWEDI). The service plan for this contract is primarily concerned with the Action Plan, and is intended to be consistent with the framework provided by the staff report of the April 11, 2017 meeting of the Board of Supervisors' Ad Hoc Committee for NWEDI. At the time the contract with Craft was approved last year, the timeline for the work was the best estimate available and the contract was set to expire on June 30, 2018. However, since then due to the high volume of public input and meetings, the need for thorough outreach to partner

- [x] APPROVE
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- [x] RECOMMENDATION OF BOARD COMMITTEE

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Amalia Cunningham, 925-674-7869

**cc:**

BACKGROUND: (CONT'D)

cities on what will become a joint document, and staff transition, it is clear the original contract term does not allow sufficient time for the work to be performed.

Extending Craft's contract to December 31, 2018 allows enough time for the consultant to finish writing, presenting, and editing the Strategic Action Plan following a renewal of the public process with the NWEDI city partners and other interested parties over coming months. The remaining work is anticipated to fit within the existing contract budget and has been approved by County Counsel. At this point, the timeline has the Strategic Action Plan ready to be presented for the Board's consideration this fall.

This item was reviewed by the Northern Waterfront Ad Hoc Committee on May 3, 2018, and the Committee recommended approval to the full Board.

CONSEQUENCE OF NEGATIVE ACTION:

Without an approved contract extension, Craft will not be able to continue to provide the services beyond June 30, 2018.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: APPROVE a contract with Thyssenkrupp Elevator Corporation

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Public Works Director, or designee, to execute a contract with Thyssenkrupp Elevator Corporation, containing modified indemnification language, in an amount not to exceed $1,300,000 for elevator maintenance, repair and modernization services, for the period June 1, 2018 through May 31, 2021, Countywide. (100% General Funds)

**FISCAL IMPACT:**
This cost is to be funded through Facilities Services maintenance budget. (100% General Funds)

**BACKGROUND:**
Facilities Services maintains all County facility elevators. Facilities uses the original factory manufacturer for repair, service and parts for these units. Forty eight of the elevators now in service at County facilities are under the Thyssenkrupp Elevator Corporation group. Over the past three years Thyssenkrupp has provided maintenance service and repair on these elevators at a total cost of $857,000. Prices are expected to raise 5% for maintenance this year, and

☑ APPROVE ☐ OTHER

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Stan Burton
925-313-7077

By: , Deputy

**cc:**

BACKGROUND: (CONT'D)

several costly repair issues have presented themselves in some of the aging elevators. Facilities is requesting a contract for $1,300,000 for estimated maintenance, repair, and modernization of these units. Government Code Section 25358 authorizes the County to contract for maintenance and upkeep of County facilities. Facilities Services is requesting a contract be put in place for three years for elevator maintenance and repair service.

Under the contract, the County will be obligated to defend and indemnify the Contractor from claims and losses for death or injury to persons arising directly or indirectly from the operation or condition of the elevator equipment that are caused by the negligence or willful misconduct of County. County will not be required to indemnify Contractor for the proportion of liability a court determines is attributable to the negligence or willful misconduct of the Contractor

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, elevator maintenance, repair, and modernization services will be discontinued.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Authorize Purchasing Agent to Issue Purchase Order

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Employment and Human Services Department (EHSD) Information Technology Unit, a purchase order with Omnipro Systems, Inc. of San Francisco in an amount not to exceed $412,701 to procure 500 personal computers over the period May 15, 2018 through May 14, 2019.

**FISCAL IMPACT:**
This contract will increase expenditures by up to $412,701 (FY2017/18-$82,540; FY2018/19-$330,161), and will be paid out of Administrative Overhead (48% Federal, 42% State, 10% County).

**BACKGROUND:**
The Employment and Human Services Department (EHSD), Information Technology (IT) unit, will be replacing some user personal computers (PC) with "Tiny" PCs as it meets space, cost, and technical requirements. EHSD has made notable space considerations in efforts to maximize the number of staff in the department's facilities. By using "Tiny" PCs, the department can house the PCs on the back of monitors, eliminating the need to take up desk space. This also enables EHSD to make cubicles smaller while providing the necessary tools for staff to

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: V. Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

perform their job assignments.

In accordance with Administrative Bulletin No. 611.0, County Departments are required to get Board approval for single item purchases greater than $100,000.

CONSEQUENCE OF NEGATIVE ACTION:

The Employment and Human Services Department will not have enough computers for staff and public use labs.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with First Place for Youth, Transitional Housing Assistance for Emancipated Youth

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with First Place for Youth in an amount not to exceed $540,000 to continue to provide transitional housing assistance for emancipated youth for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 100% State Transitional Housing Program Plus and is included in the FY 2018/19 department budget.

**BACKGROUND:**
First Place for Youth provides Transitional Housing Program (THP) - Plus support services to emancipated foster youth up to age 24 who have been referred by the Independent Living Skills Program (ILSP) staff. AB427 enabled the State to announce the availability of THP-Plus funds to counties who were interested in providing transitional housing services to emancipating foster youth. The County elected to participate in the program.

**CONSEQUENCE OF NEGATIVE ACTION:**
Housing and support services for youth transitioning from foster care to independent living will be hindered.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: V. Kaplan, (925) 608-4963

**cc:**

CHILDREN'S IMPACT STATEMENT:

This contract supports all of the community outcomes established in the Children's Report Card: (1) Children Ready for and Succeeding in School; (2) Children and Youth Healthy and Preparing for Productive Adulthood; (3) Families that are Economically Self Sufficient; (4) Families that are Safe, Stable and Nurturing; and (5) Communities that are Safe and Provide a High Quality of Life for Children and Families. This is accomplished through providing safe housing and support to assist youth while transitioning from foster care to independent living.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Monument Impact, Job Services for Limited English Proficient CalWORKs Clients

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Monument Impact in an amount not to exceed $116,486 for job search and placement services to California Work Opportunity and Responsibility to Kids (CalWORKs) clients with limited English proficiency for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are from the California Work Opportunity and Responsibility to Kids (CalWORKs) Single Allocation (85% Federal, 15% State). [CFDA #93.558]

**BACKGROUND:**
California Work Opportunity and Responsibility to Kids (CalWORKs) Welfare-to-Work (WTW) recipients face multiple barriers to employment. As a result, recipients may participate in a variety of activities leading to employment. The Contractor provides job readiness, job search and placement, and English as a second language (ESL) classes in the local adult schools, community colleges, or other appropriate educational institutions.

**CONSEQUENCE OF NEGATIVE ACTION:**
Valuable job training services to limited English speaking CalWORKs clients would terminate.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: V. Kaplan, (925) 608-4963

**cc:**

CHILDREN'S IMPACT STATEMENT:

This contract supports two of the five community outcomes established in the Children's Outcome Report - Outcome 3: Families that are Economically Self Sufficient and Outcome 4: Families that are Safe, Stable and Nurturing, by providing job training to encourage family self-sufficiency.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #24-312-38 with Asian Community Mental Health Board

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #24–312–38 with Asian Community Mental Health Board, a non-profit corporation, in an amount not to exceed $154,500 to provide interpretation, case management and advocacy services for Southeast Asian refugees in West Contra Costa County for the period from July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
This contract is funded 100% by Mental Health Realignment funds. (No rate increase)

**BACKGROUND:**
According to the National Standards for Culturally Appropriate Services in Health Care, health care organizations are required to provide language assistance services, at no cost, to each patient with limited English proficiency, as well as to patients who use sign language to communicate. The provision of language assistance services is also required by State law and regulations.

On June 20, 2017, the Board of Supervisors approved Contract #24–312–37 with Asian Community Mental Health Board, for the provision of translation services to Southeast Asian refugees in West Contra Costa County, for the period from July 1, 2017 through June 30, 2018.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Mathew White, M.D., 925-370-5891

**cc:** L Walker , M Wilhelm

BACKGROUND: (CONT'D)

Approval of Contract #24–312–38 will allow the contractor to continue providing interpretation, case management and advocacy services through June 30, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, Southeast Asian refugees in West Contra Costa County will not receive translation, case management and advocacy services.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: Contract with John Meyers for helicopter pilot services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to execute a contract with John Meyers in an amount not to exceed $400,000 for helicopter pilot services for the period July 1, 2018 through June 30, 2020.

**FISCAL IMPACT:**
$400,000.00. Budgeted. No General Fund impact. These expenditures are covered by a combination of agency user fees, annual SLESF (Supplemental Law Enforcement Services Fund) allocation, P-6 Central Administrative Base (Zone) revenue, and indirectly offset by State of California Department of Boating and Waterways grant funding.

**BACKGROUND:**
Under this contract, John Meyers will provide pilot services for the Sheriff's helicopters. The helicopter program is an integral element of effective law enforcement operations, providing enhanced patrol, surveillance, and search and rescue capabilities. Continuation of the helicopter program hinges on the services provided under this contract.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown
925-335-1553

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Failure to approve this contract would ground the helicopter and deprive the citizens of Contra Costa County of a vital law enforcement tool. This would limit the Office of the Sheriff to adequately respond to law enforcement emergencies in any terrain, throughout the County.

CHILDREN'S IMPACT STATEMENT:

No impact.

Contra Costa County

To: Board of Supervisors

From: Todd Billeci, County Probation Officer

Date: May 22, 2018

Subject: Contract with Behavioral Interventions (B.I.) Incorporated

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the County Probation Officer, or designee, to execute a contract with Behavioral Interventions Incorporated in the amount of $175,000 to provide electronic monitoring service and equipment for the period February 1, 2018 through January 31, 2019.

**FISCAL IMPACT:**
Funding for electronic monitoring services is included in the Probation Department's annual budget. 100% General Fund.

**BACKGROUND:**
U.S. Communities is the leading national cooperative purchasing program for State and Local Public Agencies. Behavioral Interventions Incorporated (Contract #201314300) is the preferred vendor through US Communities for electronic ankle monitoring services. Utilizing such a government contract guarantees Probation fair pricing and exceptional service. The Probation Department has contracted with Behavioral Interventions Incorporated in the past and the department has been pleased with the service provided.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Probation Department will not have an active contract with a vendor for the electronic monitoring of certain probationers.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Danielle Fokkema, 925-313-4195

**cc:**

CHILDREN'S IMPACT STATEMENT:

Not applicable.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with California State University Fresno Foundation

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with California State University Fresno Foundation, a Non-Profit Corporation, in an amount not to exceed $750,000 ($250,000 annually for three years), including modified indemnification language, to provide Title IV-E training for the period July 1, 2018 through June 30, 2021.

**FISCAL IMPACT:**
The interagency agreement is funded with $562,500 (75%) Federal IV-E funds; $131,250 (17.5%) State funds; and $56,250 (7.5%) County funds. [CFDA #93.658]

**BACKGROUND:**
Foster Care Title IV-E provides funds to assist with the cost of foster care maintenance for eligible children; administrative costs to manage the program; and training for public agency staff, foster parents, and certain private agency staff. The Employment and Human Services Department is contracting with the California State University Fresno Foundation, a Non-Profit Corporation, to provide staff training. This program

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: V. Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

will enhance professional skills and knowledge; increase cultural awareness and responsiveness of staff; increase staff's knowledge on the application of new laws and regulations in child welfare.

This project supports Contra Costa County and Children and Family Services (CFS) program mandates and initiatives and meets the needs required to implement these services.

CONSEQUENCE OF NEGATIVE ACTION:

The County will not be in compliance with Child Welfare program mandates and initiatives.

CHILDREN'S IMPACT STATEMENT:

This contract supports all five of the community outcomes established in the Children's Report Card: 1) "Children Ready for and Succeeding in School"; 2) "Children and Youth Healthy and Preparing for Productive Adulthood"; 3) "Families that are Economically Self Sufficient"; 4) "Families that are Safe, Stable and Nurturing"; and 5) "Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing training to CFS staff to support these outcomes.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #22-219-61 with Compass Group USA, Inc. (dba Bateman Community Living)

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #22-219-61 with Compass Group USA, Inc. (dba Bateman Community Living), a corporation, in an amount not to exceed $2,868,382, to provide meal services for County's Senior Nutrition Program for the period from July 1, 2018 through June 30, 2019, with a three-month automatic extension through September 30, 2019, in an amount not to exceed $717,096.

**FISCAL IMPACT:**
This contract is 100% federally funded, under Title III C-1 and Title III C-2 of the Federal Older Americans Act of 1965. No County funds are required. (Rate increase)

**BACKGROUND:**
This contractor was selected to provide meals for the Senior Nutrition Program through a competitive bid process conducted by the County's General Services Department (Purchasing).

This contract meets the social needs of the County's population. Contractor will provide prepackaged, frozen meals, on 249 County-designated serving days, for elderly, disabled, and AIDS/HIV diagnosed citizens of Contra Costa County.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Daniel Peddycord, 925-313-6712

**cc:** D Morgan, M Wilhelm

BACKGROUND: (CONT'D)

On June 20, 2017, the Board of Supervisors approved Contract #22–219–60 with Compass Group USA, Inc. (dba Bateman Community Living), for the period from July 1, 2017 through June 30, 2018, with a three-month automatic extension through September 30, 2018, for the provision of meal services for County's Senior Nutrition Program.

Approval of Contract #22-219-61 replaces the automatic extension under the prior contact and will allow the contractor to continue providing meal services through June 30, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, the elderly, disabled, and AIDS/HIV diagnosed citizens of Contra Costa County participating in the Senior Nutrition Program may not receive the appropriate meals or nutrition.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Interagency Agreement with Contra Costa County Office of Education

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an interagency agreement with Contra Costa County Office of Education in an amount not to exceed $108,045 to provide educational liaisons between Contra Costa schools and Children and Family Services (CFS) Bureau on behalf of children in foster care for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this agreement are 70% 2011 Realignment and 30% County General Funds.

**BACKGROUND:**
Education Liaisons at Contra Costa County Office of Education works collaboratively with local school districts, child welfare agencies, foster care agencies, probation, post-secondary institutions, caregivers, and community organizations with the goal of improving the educational gap for foster youth. Using a unique partnership, Education Liaisons work closely with Children and Family Services (CFS) social workers to help support the educational needs of children by ensuring proper educational placement, school enrollment,

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: V. Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

and checkout from school as well as assisting with the transfer of grades, credits, and records when there is a school change as mandated by California Education Code § 48853.5(b)-(d), (e)(8)(C).

CONSEQUENCE OF NEGATIVE ACTION:

Without educational liaisons, foster children and youth will experience increased barriers in accessing the same academic resources, services, and extracurricular and enrichment activities that are available to all students.

CHILDREN'S IMPACT STATEMENT:

This contract supports four of the five community outcomes established in the Children's Report Card: 1) "Children Ready for and Succeeding in School"; 2) "Children and Youth Healthy and Preparing for Productive Adulthood"; 3) "Families that are Safe, Stable and Nurturing"; and 4) "Communities that are Safe and Provide a High Quality of Life for Children and Families" by supporting the educational rights of children and youth in foster care.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Aspiranet for Services at Receiving Centers

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Aspiranet, a non-profit corporation, in an amount not to exceed $1,041,623, to provide emergency shelter receiving center services for children taken into protective custody or transitioning through foster placements for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 70% State 2011 Realignment and 30% County General Funds.

**BACKGROUND:**
The Receiving Centers serve as the hub of the Employment and Human Services Department (EHSD) emergency shelter system. They provide temporary care to children who have been taken into protective custody and children and youth who are transitioning into foster placements. The Receiving Centers offer a homelike setting and are designed to promote stability in placement, focus on the needs of the individual child, minimize move, and support permanency at the early stages of EHSD intervention.

**CONSEQUENCE OF NEGATIVE ACTION:**
Emergency shelter will not be available to temporarily care for children taken into protective custody.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: V. Kaplan, (925) 608-4963

**cc:**

CHILDREN'S IMPACT STATEMENT:

This contract supports all of the community outcomes established in the Children's Report Card: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3) "Families that are Economically Self Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families," by providing a homelike environment for children entering the Child Welfare System.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #76-556-1 with Laboratory Corporation of America

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #76-556-1 with Laboratory Corporation of America, a corporation, in an amount not to exceed $325,000, to provide outside laboratory testing services for Contra Costa Regional Medical (CCRMC) and Health Centers for the period from May 1, 2018 through April 30, 2020.

**FISCAL IMPACT:**
This contract is funded 100% by Hospital Enterprise Fund I. (Rates have decreased.)

**BACKGROUND:**
On November 14, 2017, the Board of Supervisors approved Contract #76-556 to provide outside laboratory testing services, including HER2FISH test for breast cancer treatment, and flow cytometry test for leukemia treatment for the period from May 1, 2017 through April 30, 2018.

Approval of Contract #76-556-1 will allow the contractor to continue to provide outside laboratory testing services through April 30, 2020.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jaspreet Benepal, 925-370-5741

**cc:** L Walker , M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, patients requiring outside laboratory testing services will not have access to contractor's services.

CHILDREN'S IMPACT STATEMENT:

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with STAND! For Families Free of Violence for Differential Response Program Case Management Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with STAND! For Families Free of Violence, a non-profit corporation, in an amount not to exceed $182,281 to provide Child Welfare Redesign Differential Response Path 2 Case Management services for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 100% State (Child Welfare Services Outcome Improvement Project-Realignment Funds).

**BACKGROUND:**
This Contractor was selected as a result of the competitive bid process to continue implementation of the Differential Response Path 2 Case Management Program which provides early intervention in the lives of families who have had a report of abuse or neglect. The Differential Response Program works with community-based and/or faith-based organizations to provide case management and home visiting services to high risk families to address the issues that brought the family to the attention of Children and Family Services (CFS). Selected contractors provide services to impact the family's ability to safely care for their children and avoid the further need for interaction with and further investigation by CFS.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: V. Kaplan, (925) 608-4963

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Employment and Human Services will be unable to provide valuable services.

CHILDREN'S IMPACT STATEMENT:

This contract supports all of the community outcomes established in the Children's Report Card: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3) "Families that are Economically Self Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families," by providing community-based services to families to deter continued Children and Family Services intervention.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract Amendment #77-005-3 with David S. Gee, M.D.

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**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract Amendment Agreement #77-005-3 with David S. Gee, M.D., an individual, effective June 1, 2018, to amend Contract #77-005-2 to increase the payment limit by $25,000, from $168,000 to a new payment limit of $193,000, with no change in the term of December 1, 2017 through November 30, 2018.

**FISCAL IMPACT:**
This amendment is funded 100% by CCHP Enterprise Fund III. (Rate increase)

**BACKGROUND:**
On November 14, 2017, the Board of Supervisors approved Contract #77-005-2 with David S. Gee, M.D., for the provision of consultation and technical assistance to the Contra Costa Health Plan (CCHP) medical management team, for the period from December 1, 2017 through November 30, 2018.

Approval of Contract Amendment Agreement #77-005-3 will allow the contractor to continue to provide additional consultation and technical assistance to the CCHP medical management team through November 30, 2018.

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

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Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Patricia Tanquary, (925) 313-6004

**cc:** A Floyd, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved, certain health care services for its members under the terms of their Individual and Group Health Plan membership contracts with the County will not be provided.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Amend Contract with Uplift Family Services for Supervised Family Visitation Center Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with Uplift Family Services, effective June 1, 2018, to increase the payment limit by $36,057 to a new payment limit of $186,057 and to extend the term from June 30, 2018 to a new term ending December 31, 2018, for providing family visitation services to Contra Costa County for the period July 1, 2017 through December 31, 2018.

**FISCAL IMPACT:**
This contract amendment will increase expenditures by $36,057 to be funded 100% by Federal Promoting Safe and Stable Families Program funds. [CFDA#: 93.556]

**BACKGROUND:**
The Community Based Family Visitation program provides supervised visitation to parents and their children in a community setting, with parent friendly hours of operation. The Visitation Centers' primary activities include: 1) providing a family-friendly environment for supervised visitation; 2) observing parent-child interaction during supervised visits; 3) providing interactive parenting education and family support; 4) modeling and coaching appropriate parent-child interaction; 5) documenting services

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth
8-4961

**cc:**

BACKGROUND: (CONT'D)

provided; and 6) consulting with assigned Children and Family Services (CFS) staff.

The Visitation Centers, as part of the Progressive Step-Down Model in the CFS Visitation Policy, offer an opportunity for parents to demonstrate their capacity to safely engage with their children. When parents demonstrate that they understand how to keep their children safe, they transition into unsupervised visits and ultimately, children return home. A key component in the Community Based Family Visitation model is that parents and children have more frequent visitation and for longer periods of time. Visits are supervised by Visitation Monitors who provide ongoing mentoring and coaching for the parent.

CONSEQUENCE OF NEGATIVE ACTION:

Vital family visitation services would not be provided and court orders may not be met.

CHILDREN'S IMPACT STATEMENT:

This contract supports all of the community outcomes established in the Children's Report Card: (1) Children Ready for and Succeeding in School; (2) Children and Youth Healthy and Preparing for Productive Adulthood; (3) Families that are Economically Self Sufficient; (4) Families that are Safe, Stable and Nurturing; and (5) Communities that are Safe and Provide a High Quality of Life for Children and Families, by providing services to prevent child abuse and thus maintain the family.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Amend Contract with Counseling Options & Parent Education Support Center, Inc. (C.O.P.E.) for Promoting Safe and Stable Families

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an amendment and extension to the Contract with Counseling Options & Parent Education Support Center, Inc. (C.O.P.E.), a non-profit corporation, effective June 1, 2018, to increase the payment limit by $57,000 to a new payment limit of $156,000 and to extend the term from June 30, 2018 to a new term ending December 31, 2018 to provide ongoing Promoting Safe and Stable Families Program Services for the period of July 1, 2017 through December 31, 2018.

**FISCAL IMPACT:**

This amendment contract will increase expenditures by $57,000 to a new total of $156,000 funded 100% by Federal Promoting Safe and Stable Families funds. (CFDA # 93.556)

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth
8-4961

**cc:**

BACKGROUND:

This Contractor was selected through the competitive bid process, Request For Proposals (RFP) 1135 by Employment and Human Services, Children and Family Services Bureau (CFS). RFP 1135 requested community-based and/or faith-based organizations to provide Promoting Safe and Stable Families (PSSF) services in Contra Costa County. The purpose of PSSF services is to prevent the unnecessary separation of children from their families, improve the quality of care and services to children and their families, and to ensure permanency for children by reuniting them with their parents, by adoption, or by another permanent living arrangement.

This amendment and extension will ensure Contractor continues to provide parenting classes while a Request For Proposal can be processed by the County. Classes include Positive Parenting (Triple P) Sessions, Triple P Family Transitions Support Sessions for Triple P alumni, and Supporting Father's Involvement groups.

CONSEQUENCE OF NEGATIVE ACTION:

County CFS clients will not have access to no-cost parenting classes.

CHILDREN'S IMPACT STATEMENT:

This contract supports all five community outcomes: 1) "Children Ready for and Succeeding in School"; 2)"Children and Youth Healthy and Preparing for Productive Adulthood"; 3)"Families that are Economically Self-Sufficient"; 4)"Families that are Safe, Stable and Nurturing"; and 5) "Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing resources and referrals to support self-sufficiency.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Amend Contract with Contra Costa Interfaith Transitional Housing, Inc. for Promoting Safe and Stable Families Services

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an amendment and extension to the Contract with Contra Costa Interfaith Transitional Housing, Inc., a non-profit corporation, effective June 1, 2018, to increase the payment limit by $41,761 to a new payment limit of $128,153 and to extend the term from June 30, 2018 to a new term ending December 31, 2018 to provide ongoing mental health case management, academic support, and life and parenting skills training for homeless and vulnerable families for the period of July 1, 2017 through December 31, 2018.

**FISCAL IMPACT:**

This amendment contract will increase expenditures by $41,761 to a new total of $128,153 funded 100% by Federal Promoting Safe and Stable Families Program funds (CFDA#: 93.556).

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth
8-4961

**cc:**

BACKGROUND:

Contra Costa Interfaith Transitional Housing, Inc. is one of several agencies selected as a result of competitive bidding process for Promoting Safe and Stable Families (PSSF) funding. The primary goals of the PSSF Program are to prevent the unnecessary separation of children from their families, improve the quality of care and services to children and their families, and ensure permanency for children by reuniting them with their parents, by adoption, or by another permanent arrangement. PSSF funding is used to support services to strengthen parental relationships and may be used to remove barriers which impede the process of adoption when children cannot be safely reunited with their families and to address the unique issues adoptive families and children may face.

This extension ensures Contra Costa Interfaith Transitional Housing, Inc. provides the following ongoing services while a Request For Proposal (RFP) can be processed: mental health case management, academic support, and life and parenting skills training for homeless and vulnerable families.

CONSEQUENCE OF NEGATIVE ACTION:

County homeless and vulnerable families will not have access to no-cost mental health case management, academic support, and life and parenting skills training.

CHILDREN'S IMPACT STATEMENT:

The services provided under this contract support all five of Contra Costa County's community outcomes: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3)"Families that are Economically Self-Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5)"Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing services to assist homeless and vulnerable families.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #26-774-3 with Robert Buckley, M.D.

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**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #26-774-3 with Robert Buckley, M.D. an individual, in an amount not to exceed $605,000, to provide orthopedic services at Contra Costa Regional Medical Center (CCRMC) and Health Centers for the period July 1, 2018 through June 30, 2021.

**FISCAL IMPACT:**
This contract is funded 100% by Hospital Enterprise Fund I. (Rate increase)

**BACKGROUND:**
On July 7, 2015, the Board of Supervisors approved Contract #26-774-1 (as amended by Amendment Agreement #26-774-2) with Robert Buckley, M.D., to provide orthopedic services including clinic coverage, administrative services and training at CCRMC and Health Centers for the period July 1, 2015 through June 30, 2018.

Approval of Contract #26-774-3 will allow the contractor to continue to provide orthopedic services at CCRMC and Health Centers through June 30, 2021.

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

---

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Samir Shah, M.D., 925-370-5525

**cc:** K Cyr, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, patients requiring orthopedic care at CCRMC and Health Centers will not have access to contractor's services.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Amend Contract with Social Service Staffing & Recruiting, Inc. For Temporary Social Workers

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an amendment to the contract with Social Service Staffing & Recruiting, Inc., effective May 1, 2018, to increase the payment limit by $160,000 to a new payment limit of $800,000 to assist with the projected department need for qualified temporary social workers for clients of Children and Family Services programs for the period of July 1, 2017 through June 30, 2018.

**FISCAL IMPACT:**

This amendment contract will increase expenditures by $160,000 to a new total of $800,000 funded as Administrative Overhead with 10% County funds, 45% State funds, and 45% Federal funds (Administrative Overhead).

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth
8-4961

**cc:**

BACKGROUND:

Children and Family Services Bureau (CFS) has experienced difficulties in recruiting and retaining qualified social workers. Currently there are 32 vacancies and resulting in a higher than optimal caseload. Recruitment efforts through Human Resources have produced candidates but not adequate numbers to fill all vacancies. Even when new Social Workers are recruited, they require extensive training to be ready to assume a caseload. Social Service Staffing & Recruiting, Inc. ensures a ready source of temporary fully qualified social workers to immediately address this situation to ensure child safety. Additionally, Social Workers obtained through this contractor may be available to be candidates for permanent County positions in shorter time since these applicants would already be trained and familiar with CFS programs, clients, and procedures.

CONSEQUENCE OF NEGATIVE ACTION:

Clients in Children and Family Services Programs may not be served efficiently by qualified social workers when Contra Costa County does not have enough immediate qualified social workers.

CHILDREN'S IMPACT STATEMENT:

The services provided under this contract support all five of Contra Costa County's community outcomes: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3 )"Families that are Economically Self-Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families" by ensuring children and families in Children and Family Services programs are working with qualified staff on a consistent basis.

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Purchase Orders with Altec Industries, Inc. for Maintenance Equipment, Countywide.

**RECOMMENDATION(S):**

RATIFY the Purchasing Agent's execution of purchase orders (Nos. 007215 & 007216) with Altec Industries, Inc., in the amount of $191,895.80 each, and APPROVE and AUTHORIZE the Purchasing Agent to execute amendments to those purchase orders, for an aggregate payment limit of $196,199.82 per purchase order, to purchase two bucket trucks, as recommended by the Public Works Director.

**FISCAL IMPACT:**

This cost is to be funded through Facilities Maintenance – Traffic Signals (100% General Fund).

**BACKGROUND:**

Initially categorized as an ISF Vehicle purchase, two purchase orders (P.O. 007215 and 007216) in the amount of $191,895.80 each were approved by the Purchasing Agent on February 22, 2017. Not until the order was amended for additional costs, was it noted that the original Purchase Orders were for Non-ISF Vehicles and that the purchase needed to be approved by the Board of Supervisors.

Fleet Management

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Carlos Velasquez
925-313-7072

**cc:** Robert Campbell, County Auditor-Controller

BACKGROUND: (CONT'D)

is responsible for vehicle maintenance and replacement. As vehicles reach the end of their life cycle they are replaced by a new more efficient vehicle. It is important the two Ariel traffic trucks be replaced in a timely manner to lessen maintenance and repair cost as well as vehicle repair downtime. Altec has been awarded National Joint Purchasing Alliance contract #031014-ALT for the purchase of Ariel lifts by government agencies. Altec in Dixon, CA is the local dealer and equipment manufacturer. Fleet Management also uses Altec for Ariel platform parts and service needs. Fleet Management requests the approval of these purchase orders and related amendments.

CONSEQUENCE OF NEGATIVE ACTION:

If this action is not approved, current Altec Ariel units will encumber unnecessary repair costs and will not be purchased at government pricing as the deadline to purchase additional units is approaching and the purchase of new units will be postponed at an increased cost to Fleet.

ATTACHMENTS

X:\Fleet

# Purchase Order

Contra Costa County
Public Works
PURCHASING SERVICES
255 GLACIER DR.
Martinez, CA 94553

| VENDOR | |
|---|---|
| | Alt ID #:08709<br>ALTEC, INC.<br>33 INVERNESS CENTER PARKWAY<br>BIRMINGHAM , AL 35214 |

| | |
|---|---|
| PO Date: 02/22/2017<br>Buyer: Richardson, Jay<br>Phone: 925-313-2154<br>FOB: F.O.B., Destination<br>Terms: Net 30 | Purchase Order Number<br>P **007216**<br>ALL PACKING SLIPS, INVOICES, AND CORRESPONDENCE MUST REFERENCE THIS PO NUMBER. SUBMIT AN INVOICE TO THE "INVOICE TO" DEPT FOR PAYMENT. |

| SHIP TO | |
|---|---|
| | Fleet Services<br>Public Works Department<br>2467 Waterbird Way<br>Martinez, CA 94553 |

| INVOICE | |
|---|---|
| | Fleet Services<br>Public Works Department<br>2467 Waterbird Way<br>Martinez, CA 94553 |

| Department | Requisition Number | Bid Number | Delivery Date |
|---|---|---|---|
| PW - Public Works | PW-PW120-17-09834 | | |

| Item # | Item Description | Quantity | Unit | Unit Price | Total |
|---|---|---|---|---|---|
| 1 | 2017 Ford F550 AT41M Articulating Telescopic Aerial w/ Material Handling. | 1.00 | EA | $177,040.00 | $177,040.00 |
| 2 | Delivery. | 1.00 | EA | $250.00 | $250.00 |
| 3 | Per the Speciifications of Quote #346585-3 by Rhawnie Kraak of Altec dated 12/28/2016 attached.<br><br>NJPA Contract # 031014-ALT.<br><br>Non-ISF Replacement Facilites Unit 6863 / Approved by Fleet Manager. | 0.00 | | $0.00 | $0.00 |
| | Dept. Contact: Contact Carlos Velasquez at (925)313-7074 | | | SUBTOTAL: | $ 177,290.00 |
| | | | | DISCOUNT: | $0.00 |
| | | | | TAX: | $14,605.80 |
| | | | | **TOTAL:** | **$191,895.80** |

| | | | | | |
|---|---|---|---|---|---|
| | | | | | |

This Purchase Order authorizes the delivery of the above products and services subject to Contra Costa County?s standard Terms and Conditions. The County assumes the seller accepts the order and will make delivery as specified herein, unless notified to the contrary within 10 calendar days. Standard Terms and Conditions may be viewed at www.cccounty.us.

| EN ORGN SUBO TAS OPT ACT/WAP | Percent | Amount |
|---|---|---|
| 01-4075-4953-M30- -994075 | 100% | $191,895.80 |

Purchaser Manager / Buyer

# Purchase Order

Contra Costa County
Public Works
PURCHASING SERVICES
255 GLACIER DR.
Martinez, CA 94553

**VENDOR**

Alt ID #:08709
ALTEC, INC.
33 INVERNESS CENTER PARKWAY
BIRMINGHAM , AL 35214

PO Date: 02/22/2017
Buyer: Tetteh, Victor
Phone: 925-313-2153
FOB: F.O.B., Destination
Terms: Net 30

Purchase Order Number
**P 007215**

ALL PACKING SLIPS, INVOICES, AND CORRESPONDENCE MUST REFERENCE THIS PO NUMBER. SUBMIT AN INVOICE TO THE "INVOICE TO" DEPT FOR PAYMENT.

**SHIP TO**

Fleet Services
Public Works Department
2467 Waterbird Way
Martinez, CA 94553

**INVOICE**

Fleet Services
Public Works Department
2467 Waterbird Way
Martinez, CA 94553

| Department | Requisition Number | Bid Number | Delivery Date |
|---|---|---|---|
| PW - Public Works | PW-PW120-17-09830 | | |

| Item # | Item Description | Quantity | Unit | Unit Price | Total |
|---|---|---|---|---|---|
| 1 | 2017 Ford F550 AT41M Articulating Telescopic Aerial w/ Material Handling. | 1.00 | EA | $177,040.00 | $177,040.00 |
| 2 | Delivery. | 1.00 | EA | $250.00 | $250.00 |
| 3 | Per the Speciifications of Quote #346585-3 by Rhawnie Kraak of Altec dated 12/28/2016 attached.<br><br>NJPA Contract # 031014-ALT.<br><br>Non-ISF Replacement Facilites Unit 6822 / Approved by Fleet Manager. | 0.00 | | $0.00 | $0.00 |
| 4 | CHANGE ORDER #1<br><br>TO CORRECT THE ACCOUNT CODE. FOR INTERNAL PURPOSE ONLY.<br><br>ALL OTHER TERMS AND CONDITIONS TO REMAIN THE SAME.<br><br>REQUISITION#09830. | 1.00 | EA | $191,895.80 | $191,895.80 |
| | Dept. Contact: Contact Carlos Velasquez at (925)313-7074 | | | SUBTOTAL: | $ 369,185.80 |
| | | | | DISCOUNT: | $0.00 |
| | | | | TAX: | $14,605.80 |
| | | | | **TOTAL:** | **$383,791.60** |

| | | | | | |
|---|---|---|---|---|---|
| | DEPARTMENT | | | | |

This Purchase Order authorizes the delivery of the above products and services subject to Contra Costa County?s standard Terms and Conditions. The County assumes the seller accepts the order and will make delivery as specified herein, unless notified to the contrary within 10 calendar days. Standard Terms and Conditions may be viewed at www.cccounty.us.

| EN ORGN SUBO TAS OPT ACT/WAP | Percent | Amount |
|---|---|---|
| 01-4075-4953-M30- - | 100% | $383,791.60 |

Purchaser Manager / Buyer

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #26-817-37 with East Bay Nephrology Medical Group, Inc.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #26-817-37 with East Bay Nephrology Group, Inc., a corporation, in an amount not to exceed $240,000, to provide nephrology services at Contra Costa Regional Medical Center (CCRMC) and Health Centers, for the period July 1, 2018 through June 30, 2021.

**FISCAL IMPACT:**
This contract is funded 100% by Hospital Enterprise Fund I. (No rate increase)

**BACKGROUND:**
On July 5, 2015, the Board of Supervisors approved Contract #26-817-36 with East Bay Nephrology Medical Group, Inc., to provide nephrology services including consulting, training, on-call coverage and medical procedures at CCRMC and Health Centers, for the period from July 1, 2015 through June 30, 2018.

Approval of Contract #26-817-37 will allow the contractor to continue providing nephrology services for CCRMC and Health Centers through June 30, 2021.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Samir Shah, M.D., 925-370-5525

**cc:** K Cyr, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, patients requiring nephrology services at CCRMC and Health Centers will not have access to contractor's services.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Lao Family Community Development Inc.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Lao Family Community Development Inc., a non-profit corporation, in an amount not to exceed $105,000 for job services and job placement to limited English proficient California Work Opportunity and Responsibility to Kids (CalWORKs) clients for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are with California Work Opportunity and Responsibility to Kids (CalWORKs) Single Allocation (85% Federal, 15% State). CFDA #93.558

**BACKGROUND:**
Lao Family Community Development Inc. provides pre- and post-employment services and translation and interpretation services in Vietnamese and various Laotian dialects to limited English proficient refugees that are CalWORKs participants residing in West Contra Costa County. Services include assisted job search, job placement, employment dispute resolution for job retention, and other job related information.

**CONSEQUENCE OF NEGATIVE ACTION:**
Valuable job training services to limited English speaking CalWORKs clients would terminate.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

CHILDREN'S IMPACT STATEMENT:

This contract supports three of the five community outcomes established in the Children's Outcome Report, (3) "Families that are Economically Self Sufficient" (4) "Families that are Safe, Stable and Nurturing" and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing job training to encourage family self-sufficiency.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Contra Costa Senior Legal Services for Legal Services to Eligible Seniors

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Contra Costa Senior Legal Services, in an amount not to exceed $109,505, to provide countywide legal services to eligible clients, 60 years of age or older, for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth
8-4961

**cc:**

FISCAL IMPACT: (CONT'D)

This contract will increase department expenditures by $109,505 to be funded 100% by Federal Older Americans Act, Title III-B and Title VII-B revenue. (CFDA# 93.044, 93.041)

BACKGROUND:

Contra Costa Senior Legal Services was selected through the competitive bid process, Request For Proposals (RFP) 1154. Contra Costa Legal Services provides county-wide legal services (e.g. phone call, letters and document review, negotiations), representation at administrative proceedings and representation in court hearings to eligible clients 60 years of age and older, with emphasis on those individuals of greatest social need, greatest economic need, minority persons, and particularly minority persons with the greatest economic needs.

CONSEQUENCE OF NEGATIVE ACTION:

County-wide legal services and representation to clients 60 years of age or older will not be available at no cost.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #26-883-26 with Rodney J. Chan, DPM

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #26-883-26 with Rodney J. Chan, DPM, an individual, in an amount not to exceed $540,000, to provide podiatry services at Contra Costa Regional Medical Center (CCRMC) and Health Centers for the period June 1, 2018 through May 31, 2021.

**FISCAL IMPACT:**
This contract is funded 100% by Hospital Enterprise Fund I. (No rate increase)

**BACKGROUND:**
On June 6, 2015, the Board of Supervisors approved Contract #26-883-25 with Rodney J. Chan, DPM, to provide podiatry services including consultation, clinic coverage, training and medical/surgical procedures at CCRMC and Health Centers for the period June 1, 2015 through May 31, 2018.

Approval of Contract #26-883-26 will allow the contractor to continue to provide podiatry services through May 31, 2021.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Samir Shah, M.D., 925-370-5525

**cc:** K Cyr, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, patients requiring podiatry services at CCRMC and Health Centers will not have access to contractor's services.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Family Caregiver Alliance for Family Caregiver Provider Program Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Family Caregiver Alliance, a non-profit corporation of California, in an amount not to exceed $125,306 for Older Americans Act, Title III-E Family Caregiver Provider Program services to support older adults, their caregivers, and families for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
This contract will increase department expenditures by $125,306 to be funded 100% with Federal Older Americans Act, Title III-E revenue. (CFDA# 93.052)

**BACKGROUND:**
Family Caregiver Alliance (FCA) provides support services to older adults, their caregivers, and families through a Multi-Faceted Respite and Education Program with a broad array of comprehensive services to caregivers of persons 60 years of age and older who have functional impairments. FCA must adhere to the Area Agency on Aging special conditions' definitions for the meaning of program services and terms. FCA provides services in the three service areas of Contra

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth
8-4961

**cc:**

BACKGROUND: (CONT'D)

Costa County (County): East, West, and Central. Services include: Public Information on Caregiving; Community Education on Caregiving; Caregiver Outreach; Caregiver Information and Assistance; Caregiver Assessment; Caregiver Counseling; Caregiver Training; Caregiver Case Management; Respite In-Home Person Care; and Caregiver Legal Resource Information.

CONSEQUENCE OF NEGATIVE ACTION:

Training, home modification, and assisted living services in support of Contra Costa County's older adults, their caregivers, and their families will not be available.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Novation Contract # 74-523-2 with Counseling Options & Parent Education, Inc. (C.O.P.E.)

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Novation Contract #74-523-2 with Counseling Options & Parent Education, Inc. (C.O.P.E.), a non-profit corporation, in an amount not to exceed $245,863, to provide Triple-P parent education classes and practitioner trainings for the period from July 1, 2018 through June 30, 2019, with a six-month automatic extension through December 31, 2019, in an amount not to exceed $122,932.

**FISCAL IMPACT:**
This contract is funded 100% Mental Health Service Act. (3% Cost of Living Adjustment)

**BACKGROUND:**
This contract meets the social needs of County's population by providing Triple P parent education programming to at-risk families in order to help parents develop better coping skills and improve family communication. Contractor shall also provide trainings and certification services to maintain a qualified pool of practitioners within Contra Costa County.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Matthew White, M.D., 925-957-5201

**cc:** L Walker , M Wilhelm

BACKGROUND: (CONT'D)

On July 11, 2017, the Board of Supervisors approved Contract #74-523-1 with Counseling Options & Parent Education, Inc. (C.O.P.E.), for the provision of Triple-P parent education classes and practitioner trainings, for the period from July 1, 2017 through June 30, 2018, which included a six-month automatic extension through December 31, 2018.

Approval of Novation Contract #74-523-2 replaces the automatic extension under the prior contract and allows the contractor to continue providing services through June 30, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, at-risk families will have reduced access to parent education programming and qualified Triple-P practitioners, resulting in reduced levels of service to the community.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #22–806–28 with Public Health Foundation Enterprises, Inc., dba Heluna Health

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #22–806–28 with Public Health Foundation Enterprises, Inc. (dba Heluna Health), a corporation, in an amount not to exceed $767,512, to provide consulting and technical assistance on community health promotion for Public Health's Health Emergency Unit and Health Services' Emergency Medical Service Unit, for the period from July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
This contract is funded 100% by Center for Disease Control funds. (No rate increase)

**BACKGROUND:**
This contract meets the social needs of County's population by providing organization services for the Public Health's Health Emergency Unit and Health Services' Emergency Medical Service Unit. Services provided by this contract also include leadership and public health advocacy training.

On May 9, 2017 the Board of Supervisors approved Contract #22–806–27 with Public Health Foundation Enterprises, Inc., for the period from July 1, 2017 through June 30, 2018, for the provision of consulting and technical assistance on community health promotion.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Dan Peddycord, 925-313-6712

**cc:** D Morgan, M WILHELM

BACKGROUND: (CONT'D)

Approval of Contract #22–806–28 will allow the contractor to continue providing services through June 30, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, County residents who depend on services from Public Health's Emergency Unit and Health Services' Emergency Medical Service Unit may not receive the services they need.

Contra Costa County

To: Board of Supervisors

From: Marc Shorr, Chief Information Officer

Date: May 22, 2018

Subject: E3 Systems Professional Services Contract Amendment/Extension

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Chief Information Officer, or designee, to execute a contract amendment with E-3 Systems, to extend the term expiration from May 31, 2018 to May 31, 2019 and increase the payment limit by $1,000,000 to a new payment limit of $5,750,000 to continue to provide, on an as-needed basis, installation and maintenance of telecommunications cabling.

**FISCAL IMPACT:**
$1,000,000 increase. The costs incurred by the Department of Information Technology for services rendered by this contractor are reimbursed by departments or agencies receiving the services.

**BACKGROUND:**
This contractor provides installation and maintenance of telecommunications cabling on an as-needed basis. These services are outside the scope of the normal duties of the Department of Information Technology requiring the retention of a specialized services contractor. E-3 Systems was selected in DoIT's 2012 RFP bid #1208-003. The contractor then won a cabling services contract with Alameda County; Contract #901370, Procurement contract #12732 with a term expiration date of December 2018, with the option to extend for an additional two years. The proposed contract extension will piggyback on Alameda County's RFP in order to delay the need for and cost of a new competitive bid solicitation.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Wayne Tilley (925) 356-1802

By: , Deputy

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

If the request is not approved, Information Technology may be unable to maintain the countywide telecommunications network should an issue emerge requiring maintenance or installation of telecommunication cabling.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #25-076-3 with Anka Behavioral Health, Inc.

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**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #25-076-3 with Anka Behavioral Health, Inc., a non-profit corporation, in an amount not to exceed $219,120 to operate a Coordinated Assessment, Referral and Engagement (CARE) Center and Warming Center, and provide case management services for the Homeless Coordinated Entry System of Care, for the period from April 1, 2018 through September 30, 2018.

**FISCAL IMPACT:**
This contract is funded by 55% Mental Health Realignment and 45% Housing and Urban Development Coordinated Entry.

**BACKGROUND:**
This contract meets the social needs of County's population by providing support services to Contra Costa County families that are homeless, including case management, day shelter services, transportation needs, mental health assessment and crisis intervention.
On January 9, 2018, the Board of Supervisors approved Contract #25-076-2 with Anka Behavioral Health, Inc. to operate two CARE centers and provide outreach services for the Homeless Coordinated Entry System of Care from January 1, 2018 through March 31, 2018.

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

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Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Matthew White, M.D., 925-957-5201

**cc:** L Walker , M Wilhelm

BACKGROUND: (CONT'D)

Approval of Contract #25-076-3, will allow the contractor to continue to provide support services to Contra Costa County families who are homeless through September 30, 2018.

Due to an extended review of the contract terms and the services to be provided, the Health Services Department is requesting a retroactive contract start date of April 1, 2018.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, families who are homeless will not have access to contractor's services.

Contra Costa County

To: Board of Supervisors

From: David O. Livingston, Sheriff-Coroner

Date: May 22, 2018

Subject: Interagency Agreement with the CCC Office of Education for Inmate Education Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Sheriff-Coroner, or designee, to execute a contract with the Contra Costa County Office of Education in an amount not to exceed $611,606 to continue providing educational services to inmates for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
$611,606.00, 100% Inmate Welfare Fund Budgeted. No net County cost.

**BACKGROUND:**
The County has contracted with the Contra Costa County Office of Education since 1985 to provide educational services at the adult detention facilities. These services provide inmates with educational and vocational training including: basic literacy, GED (General Education) preparation, substance abuse prevention, computer skills, flood control, landscaping, and woodworking. By providing these services, inmates are provided with the opportunity to gain education and skills to prepare for re-entry into the community.

**CONSEQUENCE OF NEGATIVE ACTION:**
Educational services for inmates within the County's three detention facilities will discontinue.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Sandra Brown, (925) 335-1553

**cc:**

CHILDREN'S IMPACT STATEMENT:

No impact.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Community Violence Solutions Contract for the Operation of the Children's Interview Center

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Community Violence Solutions, a non-profit corporation, in an amount not to exceed $142,000, for the continued operation of the Children's Interview Center, for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 14% from the General Fund ($20,000) and 86% ($122,000) from Local Law Enforcement Agencies.

**BACKGROUND:**
Community Violence Solutions in collaboration with the Employment and Human Services Department (EHSD), the Sheriff's Department, and local Law Enforcement Agencies (LEA) operates the multidisciplinary Children's Interview Center (CIC). CIC provides forensic interviews and/or forensic exams to child victims of sexual abuse. It provides skilled interviews in a child-friendly setting to decrease the child's trauma by minimizing the number of interviews, and it has implemented standardized evidence collection processes that increased the number of cases prosecuted.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Without the site and services provided in this contract, forensic interviews and exams for child victims may need to take place multiple times, and in multiple locations, increasing the trauma to the child.

CHILDREN'S IMPACT STATEMENT:

This contract supports three of the five community outcomes established in the Children's Report Card: (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (4) "Families that are Safe, Stable and Nurturing"; and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families."

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Contra Costa Community College District – Diablo Valley College (DVC) Campus for Resource Family Pre-Approval Training

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an interagency agreement with Contra Costa Community College District - Diablo Valley College (DVC) Campus in an amount not to exceed $32,400 to provide Heritage training for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The interagency agreement is funded with 75% Federal ($24,300), 17.5% State ($5,670), and 7.5% General Fund ($2,430) funding. (CFDA #93.658)

**BACKGROUND:**
In response to the increasing magnitude of problems related to perinatal exposure to alcohol and other drugs, an interagency collaboration was formed that involved the California Departments of Alcohol and Drug Programs, Health Services, and Social, Services. This collaboration was named Options for Recovery (OFR), now known as the "Heritage" project. The mission was to promote the recovery of pregnant, postpartum, and parenting chemically dependent women and the enhancement of the health of their children by providing comprehensive and coordinated alcohol and other drug treatment, case management, and specialized recruitment and training of foster parents and relative caregivers.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

The Heritage Project in Contra Costa County is a program designed to train caregivers of the needs of babies and children who are born exposed to drugs and/or alcohol, which may also be HIV exposed, are court dependents and are under six years of age. Heritage training for foster caregivers requires 36 hours of classroom training in the areas of Childhood HIV and AIDS, Comforting the Drug Exposed Infant and Special Medical Needs and the Effects of Drugs and Alcohol on Infants.

CONSEQUENCE OF NEGATIVE ACTION:

If the Heritage training is not delivered to foster caregivers, there will be less available specially trained families who will be able to care for babies and children who are born exposed to drugs and/or alcohol, who may also be HIV exposed.

CHILDREN'S IMPACT STATEMENT:

This contract supports all five of the community outcomes established in the Children's Report Card: 1) "Children Ready for and Succeeding in School"; 2) "Children and Youth Healthy and Preparing for Productive Adulthood"; 3) "Families that are Economically Self Sufficient"; 4) "Families that are Safe, Stable and Nurturing"; and 5) "Communities that are Safe and Provide a High Quality of Life for Children and Families" by preparing caregivers to better meet the specialized needs of vulnerable children in the foster care system and allows transition to family reunification.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Community Violence Solutions for Crisis Intervention and Advocacy Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Community Violence Solutions, a non-profit corporation, in an amount not to exceed $179,552 for crisis intervention and advocacy services to sexually exploited and commercially sexually exploited youth and families for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 42% County General Fund ($73,881), 29% State Commercially Sexually Exploited Children Fund ($52,836), and 29% Federal Commercially Sexually Exploited Children Fund ($52,835).

**BACKGROUND:**
The Employment and Human Services Department contracts with Community Violence Solutions (CVS) to provide crisis intervention and advocacy services to victims of sexual assault, rape, human trafficking, domestic violence, and stalking in Contra Costa County as part of Contra Costa County's Alliance to End Abuse. Services include: providing a Sexual Assault Rape Team, staffing the Rape Crisis Line 24/7, providing comprehensive, coordinated services to commercially sexually exploited youth and families,

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

providing leadership to the Anti-Human Trafficking Coalition, providing outreach, education, training, and systems change advocacy. Additionally, CVS provides a designated Case Manager and Survivor Outreach Worker to increase identification, outreach, and services to victims of commercial sexual exploitation and at-risk youth in Contra Costa County.

CONSEQUENCE OF NEGATIVE ACTION:

Fewer Contra Costa County victims of sexual and commercial sexual exploitation and at-risk youth will be identified and/or receive intervention and/or advocacy services.

CHILDREN'S IMPACT STATEMENT:

This contract supports all of the community outcomes established in the Children's Report Card: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3) "Families that are Economically Self Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families," by providing crisis intervention and advocacy services to victims of sexual and commercial sexual exploitation and at-risk youth.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Community Violence Solutions for Differential Response Program Case Management Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Community Violence Solutions, a non-profit corporation, in an amount not to exceed $182,039 to provide Child Welfare Redesign Differential Response Path 2 Case Management services in West Contra Costa County for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 100% State Child Welfare Services Outcome Improvement Project-Realignment Funds.

**BACKGROUND:**
This contractor was selected as a result of the competitive bid process to continue implementation of the Differential Response Path 2 Case Management Program which provides early intervention in the lives of families who have had a report of abuse or neglect. The Differential Response Program works with community-based and/or faith-based organizations to provide case management and home visiting services to high risk families to address the issues that brought the family to the attention of Children and Family Services (CFS). Selected contractors provide services to impact the family's ability to safely care for their children and avoid the further need for interaction with and further investigation by CFS.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Employment and Human Services will be unable to provide valuable services.

CHILDREN'S IMPACT STATEMENT:

This contract supports all of the community outcomes established in the Children's Report Card: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3) "Families that are Economically Self Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families," by providing community-based services to families to deter continued Children and Family Services intervention.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Amendment #77-103-1 with American Hospice and Home Health Care Services, Inc.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract Amendment Agreement #77-103-1 with American Hospice and Home Health Care Services, Inc., a corporation, effective November 1, 2017, to amend Contract #77-103 to modify the rates to continue to provide home health and hospice services to Contra Costa Health Plan (CCHP) members, with no change in the original payment limit of $200,000 and no change in the original term of September 1, 2017 through August 31, 2019.

**FISCAL IMPACT:**
This amendment is funded 100% by CCHP Enterprise Fund II. (Rate increase)

**BACKGROUND:**
On September 12, 2017, the Board of Supervisors approved Contract #77-103 with American Hospice and Home Health Care Services, Inc., for the provision of hospice and home healthcare services for CCHP members, for the period from September 1, 2017 through August 31, 2019.

Approval of Contract Amendment Agreement #77-103-1 will allow the contractor to continue to provide home health and hospice services through August 31, 2019.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Patricia Tanquary, (925) 313-6004

**cc:** A Floyd, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved, certain health care services for its members under the terms of their Individual and Group Health Plan membership contracts with the County will not be provided.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Pittsburg Power Company

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, on behalf of the Workforce Development Board, to execute a contract with Pittsburg Power Company, a public entity, in an amount not to exceed $200,000 for the provision of comprehensive Workforce Innovation and Opportunity Act (WIOA) services to eligible adults in East Contra Costa County for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 100% from the Federal Workforce Innovation and Opportunity Act.

**BACKGROUND:**
This board order will authorize the Employment and Human Services Department, on behalf of the Workforce Development Board, to contract with the Pittsburg Power Company for the provision of comprehensive Workforce Innovation and Opportunity Act services to eligible adults in East Contra Costa County (defined as the region from Bay Point to the eastern boundary of the County) as competitively bid in Request for Proposal #1160.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Adult participants will not receive case management, employment referrals, and job placement services.

CHILDREN'S IMPACT STATEMENT:

This contract supports all of the community outcomes established in the Children's Report Card: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3) "Families that are Economically Self Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5) "Communities that are Safe and Provide a High Quality of Life for Children and Families," by assisting individuals with training and employment services to encourage self-sufficiency.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Contra Costa Community College District - West Campus for Resource Family Pre-Approval Training

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an interagency agreement with Contra Costa Community College District - West Campus in an amount not to exceed $30,400 to provide Heritage training for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The interagency agreement is funded with 75% Federal ($22,800), 17.5% State ($5,320), and 7.5% General Fund ($2,280) funding. (CFDA #93.658)

**BACKGROUND:**
In response to the increasing magnitude of problems related to perinatal exposure to alcohol and other drugs, an interagency collaboration was formed that involved the California Departments of Alcohol and Drug Programs, Health Services, and Social, Services. This collaboration was named Options for Recovery (OFR), now known as the "Heritage" project. The mission was to promote the recovery of pregnant, postpartum, and parenting chemically dependent women and the enhancement of the health of their children by providing comprehensive and coordinated alcohol and other drug treatment, case management, and specialized recruitment and training of foster parents

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

and relative caregivers.

The Heritage Project in Contra Costa County is a program designed to train caregivers of the needs of babies and children who are born exposed to drugs and/or alcohol, which may also be HIV exposed, are court dependents and are under six years of age. Heritage training for foster caregivers requires 36 hours of classroom training in the areas of Childhood HIV and AIDS, Comforting the Drug Exposed Infant and Special Medical Needs and the Effects of Drugs and Alcohol on Infants.

CONSEQUENCE OF NEGATIVE ACTION:

If the Heritage training is not delivered to foster caregivers, there will be less available specially trained families who will be able to care for babies and children who are born exposed to drugs and/or alcohol, who may also be HIV exposed.

CHILDREN'S IMPACT STATEMENT:

This contract supports all five of the community outcomes established in the Children's Report Card: 1) "Children Ready for and Succeeding in School"; 2) "Children and Youth Healthy and Preparing for Productive Adulthood"; 3) "Families that are Economically Self Sufficient"; 4) "Families that are Safe, Stable and Nurturing"; and 5) "Communities that are Safe and Provide a High Quality of Life for Children and Families" by preparing caregivers to better meet the specialized needs of vulnerable children in the foster care system and allows transition to family reunification.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Amend Contract with A Step Forward Child Abuse Treatment and Training Program, a Marriage, Family & Child Counseling Corp. for Mental Health Services

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with A Step Forward Child Abuse Treatment and Training Programs, a Marriage, Family and Child Counseling Corporation, a non-profit corporation, effective April 1, 2018, to increase the payment limit by $55,000 to a new payment limit of $195,000 to provide mental health services to non Medi-Cal eligible clients for the period of August 1, 2016 through July 31, 2018.

**FISCAL IMPACT:**

This amendment contract will increase expenditures by $55,000 to a new total of $195,000 that will be funded 30% through County General Fund and 70% through State 2011 Realignment revenues.

**BACKGROUND:**

A Step Forward Child Abuse Treatment and Training Programs, a Marriage, Family and Child Counseling Corporation (Contractor) provides mental health services for non Medi-Cal eligible clients of Employment and Human Services Department (EHSD) as well as services determined appropriate and authorized by the EHSD Department's Children and Family Services Bureau (CFS) for Medi-Cal eligible clients who are not covered by Medi-Cal (i.e. report writing). The contract includes compliance with certification requirements and will maintain and be in compliance with Contractor's Mental Health Services contract.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth, (925) 608-4931

**cc:**

BACKGROUND: (CONT'D)

This amendment is due to increased service provisions as a result of the new State initiative, Continuum of Care Reform (AB 403) and the reduced number of contracted mental health service providers available to CFS. Consequently, the number of client referrals to this Contractor has significantly increased. CFS continues to work to increase the number of qualified mental health service providers; however, CFS does not have sufficient providers at this time.

CONSEQUENCE OF NEGATIVE ACTION:

If the amendment is not approved, EHSD's ability to provide mental health services to many non MediCal clients will be hindered.

CHILDREN'S IMPACT STATEMENT:

The services provided under this contract support four of the five Contra Costa County community outcomes: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (4) "Families that are Safe, Stable and Nurturing"; and (5)"Communities that are Safe and Provide a High Quality of Life for Children and Families" by mental health services to non Medi-Cal clients.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with STAND! For Families Free of Violence for Shelter Services to Victims of Domestic Violence

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with STAND! For Families Free of Violence, a non-profit corporation of California, in an amount not to exceed $227,470 to provide shelter services for domestic violence victims and their children for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
This contract will increase department expenditures by $227,470 that will be funded 63% with marriage license fee revenue and 37% with County General Fund.

**BACKGROUND:**
This contract addresses the social needs of the County's population by providing a crisis call center number and an emergency shelter facility 24 hours a day, 7 days a week, providing at least 6,580 shelter bed days to a minimum of 122 women and children in domestic violence crisis situations. Contractor provides support and assistance in response to referrals from a law enforcement agency or hospital emergency room, in addition they provide danger assessment, safety planning, and domestic violence education and information. Contractor is a domestic violence shelter-based agency providing services to domestic violence victims and their children in compliance with the requirements of the California Welfare and Institutions Code section 18294.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth (925) 608-4961

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Employment and Human Services Department will be unable to provide valuable emergency shelter, support, counseling, and educational services to the County's victims of domestic violence and their children.

CHILDREN'S IMPACT STATEMENT:

This contract supports two of the five of Contra Costa County's community outcomes: (4) "Families that are Safe, Stable and Nurturing"; and (5)"Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing a safe environment where children of families with domestic violence issues can receive appropriate support and follow-up services.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Robert Half International, Inc. Contract Amendment

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract amendment with Robert Half International, Inc., effective June 30, 2018, to increase the payment limit by $67,200 to a new payment limit of $2,586,225 to provide additional temporary information technology services and extend the term from June 30, 2018 to a new term ending December 31, 2018.

**FISCAL IMPACT:**
The funds allocated for this contract are 48% State ($1,241,388), 42% Federal ($1,086,215) and 10% County ($258,622) in administrative overhead.

**BACKGROUND:**
The Employment and Human Services Department (EHSD) needs information technology (IT) professional staff on a temporary basis to meet staffing needs while EHSD is actively recruiting to secure permanent IT professionals. This amendment will address support for the County Administrator's Office (CAO), as a permanent replacement was hired, but the new hire needs to be trained on the existing efforts provided by Robert Half, International, Inc.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

The Employment and Human Services Department would not be able to meet and/or sustain information technology service needs.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with FBC Community Outreach, Inc. for Differential Response Program Case Management Services

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with FBC Community Outreach, Inc., in an amount not to exceed $258,129 to provide Child Welfare Redesign Differential Response Path 2 Case Management services in East Contra Costa County for the period of July 1, 2018 through June 20, 2019.

**FISCAL IMPACT:**

This contract will increase expenditures by $258,129 and will be funded 100% by State Child Welfare Services Outcome Improvement Project-Realignment funds.

**BACKGROUND:**

This contractor was selected as a result of the competitive bid process to continue implementation of the Differential Response Path 2 Case Management Program, which provides early intervention in the lives of families who have had a report of abuse or neglect. The Differential Response Program works with community-based and/or faith-based organizations to provide case management and home visiting services to high-risk families to address the issues that brought the family to the attention of Children and Family Services (CFS). Selected contractors provide services to impact the family's ability to safely care for their children and avoid the further need for interaction with and further investigation by CFS.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth, (925) 608-4961

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Employment and Human Services will be unable to provide valuable case management services.

CHILDREN'S IMPACT STATEMENT:

The services provided under this contract support all five of Contra Costa County's community outcomes: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3)"Families that are Economically Self-Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5)"Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing community-based services to families to deter continued Children and Family Services intervention.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Uplift Family Services for Differential Response Program Case Management Services

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Uplift Family Services, a non-profit corporation in an amount not to exceed $254,454 to provide Child Welfare Redesign Differential Response Path 2 Case Management services in East and Central Contra Costa County for the period of July 1, 2018 through June 20, 2019.

**FISCAL IMPACT:**
This contract will increase expenditures by $254,454 and will be funded 100% by State Child Welfare Services Outcome Improvement Project-Realignment funds.

**BACKGROUND:**
This contractor was selected as a result of the competitive bid process to continue implementation of the Differential Response Path 2 Case Management Program which provides early intervention in the lives of families who have had a report of abuse or neglect. The Differential Response Program works with community-based and/or faith-based organizations to provide case management and home visiting services to high-risk families to address the issues that brought the family to the attention of Children and Family Services (CFS). Selected contractors provide services to impact the family's ability to safely care for their children and avoid the further need for interaction with and further investigation by CFS.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth, (925) 608-4961

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

Employment and Human Services will be unable to provide valuable services.

CHILDREN'S IMPACT STATEMENT:

The services provided under this contract support all five of Contra Costa County's community outcomes: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3)"Families that are Economically Self-Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5)"Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing community-based services to families to deter continued Children and Family Services intervention.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #27-823-3 with Yellow Cab of Walnut Creek and Contra Costa Inc.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County Contract #27-823-3 with Yellow Cab of Walnut Creek and Contra Costa, Inc., a corporation, in an amount not to exceed $150,000, to provide non-emergency transportation services to Contra Costa Health Plan (CCHP) members, for the period from May 1, 2018 through April 30, 2020.

**FISCAL IMPACT:**
This contract is funded 100% by CCHP Enterprise Fund II. (No rate increase)

**BACKGROUND:**
On April 5, 2016, the Board of Supervisors approved Contract #27-823-1 (as amended by Contract Amendment Agreement #27-823-2) with Yellow Cab of Walnut Creek and Contra Costa, Inc. for the provision of non-emergency transportation services to CCHP members, for the period from May 1, 2016 through April 30, 2018.

Approval of Contract #27-823-3 will allow the contractor to continue to provide non-emergency transportation services for CCHP members through April 30, 2020.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Patricia Tanquary, (925) 313-6004

**cc:** A Floyd, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, certain specialty health care services for its members under the terms of their Individual and Group Health Plan membership contracts with the County will not be provided.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #22-251-32 with Community Housing Development Corporation of North Richmond

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Novation Contract #22–251-32 with Community Housing Development Corporation of North Richmond, a non-profit corporation, in an amount not to exceed $16,920, to provide congregate meals for the Senior Nutrition Program, for the period from July 1, 2018 through June 30, 2019, with a three-month automatic extension through September 30, 2019, in an amount not to exceed $4,300.

**FISCAL IMPACT:**
This contract is funded 100% by federal funds under Title III C-1 of the Older Americans Act of 1965 through an interdepartmental agreement with the Contra Costa Employment and Human Services Department. (No rate increase)

**BACKGROUND:**
This contract meets the social needs of County's population in providing congregate meals to an average of 20 senior citizens, five (5) days per week, to ensure they receive at least 1/3 of their daily nutritional requirements. On July 18, 2017, the Board of Supervisors approved Novation Contract #22-251-30 with Neighborhood House of North Richmond, (Reassignment #22-251-31 to Community Housing Development Corporation of North Richmond) for the period from July 1, 2017 through June 30, 2018, which included a three-month automatic extension through September 30, 2018, for the provision

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Dan Peddycord, (925) 313-6712

**cc:** D MORGAN

BACKGROUND: (CONT'D)

of congregate meal services for the Senior Nutrition Program. Approval of Novation Contract #22-251-32 replaces the automatic extension under the prior contract and allows the contractor to continue providing services through June 30, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, congregate meal service for the senior nutrition program will not be provided.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Purchase Order with Complete Imaging Systems, Inc.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Health Services Director, a purchase order with Complete Imaging Systems, Inc., in an amount not to exceed $900,000 for the purchase of fax machines, printers, supplies, parts, ink cartridges, and repairs of fax machines, printers and other machines for the Contra Costa Regional Medical Center (CCRMC) and Health Centers, for the period May 1, 2018 through April 30, 2020.

**FISCAL IMPACT:**
100% funded by Hospital Enterprise Fund I.

**BACKGROUND:**
Complete Imaging Systems, Inc., has provided excellent pricing and outstanding service for all of the Health Services Department for many years. Fax machines and printers are essential to carry out the work of the Health Services Department and it is therefore critical to keep the equipment in a functioning state at all times.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jaspreet Benepal, 925-370-5101

**cc:** Tasha Scott, Marcy Wilhelm, Patty Derose

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Interagency Agreement with West Contra Costa Adult Education

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an interagency agreement with West Contra Costa Adult Education in an amount not to exceed $61,723 in the provision of a vocational and academic skills training program specially designed for Welfare-to-Work (WTW) participants of the California Work Opportunity and Responsibility to Kids (CalWORKs) Program for the period of July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
The interagency agreement is funded with 100% CalWORKs Single Allocation revenue (85% Federal, 15% State). Federal CFDA #93.558.

**BACKGROUND:**
The Finding Opportunities Careers for Ultimate Self-sufficiency (FOCUS) Program offers Welfare-to-Work (WTW) participants the opportunity to participate in vocational training and/or job skills workshops at the West Contra Costa Adult Education school. FOCUS is intended to provide clients with additional assessment, support, and training/educational services which will further delineate their educational and professional path as well as educational/career advancement ultimately leading to job placement or continued educational attainment.

- [x] APPROVE
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- [ ] OTHER
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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

The FOCUS Program is intended to offer WTW participants an opportunity to increase their awareness of how their views and experiences shape their perception about work, money, and the circumstances of their lives. Understanding their role enables participants to decrease the barriers and increase the motivation to set goals and accomplish them.

CONSEQUENCE OF NEGATIVE ACTION:

Without approval, the FOCUS program participants will have fewer opportunities to be engaged in vocational training and/or job skills services geared toward job placement and/or continued educational attainment, resulting in continued reliance on public benefits.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Purchase Order with Biomerieux, Inc.

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**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Purchasing Agent to execute, on behalf of the Health Services Director, an amendment to Purchase Order #F34660 with Biomerieux, Inc., to increase the payment limit by $99,000 to a new payment limit of $198,000, for reagents and supplies needed for the Vitek 2 for the Contra Costa Regional Medical Center (CCRMC) Clinical Laboratory and Health Centers, with no change in the original term of January 1, 2017 to December 31, 2018.

**FISCAL IMPACT:**
100% funded by the Hospital Enterprise Fund I.

**BACKGROUND:**
Biomerieux, Inc. supplies the reagents needed for the identification and sensitivities of pathogenic organisms from cultures of body fluids and blood to be tested on the Vitek 2, a microbial identification system. It is necessary to add funds due to increased utilization of the supplies provided by Biomerieux, Inc. under this purchase order.

**CONSEQUENCE OF NEGATIVE ACTION:**
If this purchase order amendment is not approved, the CCRMC Clinical Laboratory cannot perform the needed tests required by the medical staff in order to proceed with patient treatments.

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- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Jaspreet Benepal, 925-370-5101

By: , Deputy

**cc:** Tasha Scott, Marcy Wilhelm, Rodney Gottschall

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #26-748-6 with Mauricio Kuri, M.D.

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**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #26-748-6 with Mauricio Kuri, M.D., PC, a corporation, in an amount not to exceed $1,767,000 to provide plastic surgery services at Contra Costa Regional Medical Center (CCRMC) and Health Centers, for the period July 1, 2018 through June 30, 2021.

**FISCAL IMPACT:**
This contract is funded 100% by Hospital Enterprise Fund I. (No rate increase)

**BACKGROUND:**
On July 25, 2015, the Board of Supervisors approved Contract #26-748-4 (as amended by Contract Amendment Agreement #26-748-5) with Mauricio Kuri, M.D., to provide plastic surgery services including clinic coverage, consulting, training and medical and/or surgical procedures at CCRMC and Health Centers, for the period July 15, 2015 through June 30, 2018.

Approval of Contract #26-748-6 will allow the contractor to continue to provide plastic surgery services including clinic coverage, consulting, training and medical and/or surgical procedures at CCRMC and Health Centers, through June 30, 2021.

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- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Samir Shah, M.D., 925-370-5525

**cc:** K Cyr, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, patients requiring plastic surgery care at CCRMC and Health Centers will not have access to contractor's services.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #23-074-40 with Foley & Lardner, LLP

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #23-074-40 with Foley & Lardner, LLP, in an amount not to exceed $975,000, to provide legal services related to Medi-Cal audit appeals and other Contra Costa Health Plan appeals, report issues, and authorized litigation issues, for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
This contract is funded 100% by Hospital Enterprise I Fund. (No rate increase)

**BACKGROUND:**
Since 1985, this contractor, which specializes in health care law, has been providing legal services in the form of consultation, research, opinion, advice and representation for the Health Services Director with regard to Medi-Cal audit appeals and other Contra Costa Health Plan appeals, report issues, and authorized litigation issues.

On June 6, 2017, the Board of Supervisors approved Contract #23-074-39 with Foley & Lardner, LLP, for the period from July 1, 2017 through June 30, 2018 for the provision of temporary legal services with regard to Medi-Cal audit appeals and other authorized litigation issues.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Patrick Godley, 925-957-5140

**cc:** Tasha Scott, Marcy Wilhelm

BACKGROUND: (CONT'D)

Approval of Contract #23-074-40 will allow the contractor to continue to provide specialized legal services, as requested by the Health Services Director, through June 30, 2019. This contract includes includes mutual indemnification.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, the County will not be able to receive specialized services with regard to Medi-Cal audit appeals and other departmental health plan appeals, report issues, and authorized litigation issues.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: 2018-19 San Ramon Valley Unified School District Childcare Services Agreement

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute an inter-agency agreement with San Ramon Valley Unified School District in an amount not to exceed $225,072 to provide State Preschool services for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
This contract is 100% funded by state funding from the California Department of Education. No County match is required.

**BACKGROUND:**
Contra Costa County receives funds from the California Department of Education to administer State Preschool services to program eligible children and families in Contra Costa County. The Employment and Human Services Department, in turn, contracts with a number of community-based organizations to provide a wider distribution of services. This agreement with San Ramon Valley Unified School District is to fund 48 program slots for program eligible children who receive school district services.

**CONSEQUENCE OF NEGATIVE ACTION:**
If not approved, the County will not be able to fund childcare slots for it's community-based agency partner.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: CSB, (925) 681-6389

**cc:** Nasim Eghlima, Christina Reich, Ressie Dayco

CHILDREN'S IMPACT STATEMENT:

The Employment and Human Services Department Community Services Bureau supports three of Contra Costa County's community outcomes - Outcome 1: Children Ready for and Succeeding in School, Outcome 3: Families that are Economically Self-sufficient, and Outcome 4: Families that are Safe, Stable, and Nurturing. These outcomes are achieved by offering comprehensive services, including high quality early childhood education, nutrition, and health services to low-income children throughout Contra Costa County.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Contra Costa County Office of Education for Workforce Development Services for Youth

**RECOMMENDATION(S):**

APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a contract with Contra Costa County Office of Education in an amount not to exceed $560,000 to provide Workforce Innovation and Opportunity Act (WIOA) year-round youth workforce development services in East and West County for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**

This interagency agreement will increase department expenditures by $560,000 to be funded 100% with Federal Workforce Innovation and Opportunity Act revenue.

**BACKGROUND:**

This contract was awarded through Request for Proposal (RFP) 1150 for the provision of comprehensive Workforce Innovation and Opportunity Act (WIOA) youth development services to eligible youth ages 16-24 in Contra Costa County. Funding for this contract will come from WIOA formula youth funds.

WIOA defines the nation's job training system and provides guidance for local workforce investment systems designed to increase the employment, retention, and earnings of participants, and to increase occupational skill attainment by participants. The goals of these efforts are to improve the quality

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Gina Chenoweth, 8-4961

**cc:**

BACKGROUND: (CONT'D)

of the workforce, reduce welfare dependency, and enhance the productivity and competitiveness of the nation's workforce. Contractor will provide a systematic approach that offers eligible in-school and out-of-school youth a broad range of coordinated services.

This includes assistance in academic and occupational learning; development of leadership skills; and preparation for further education, additional training, and eventual employment. Programs will provide guidance for youth that is balanced with appropriate consideration of each youth's involvement in his or her training and educational plan.

CONSEQUENCE OF NEGATIVE ACTION:

Without this contract, in-school and out-of-school youth in Contra Costa County will not receive assistance in overcoming barriers to employment, job readiness, educational programs, and career building.

CHILDREN'S IMPACT STATEMENT:

The services provided under this contract support all five of Contra Costa County's community outcomes: (1) "Children Ready for and Succeeding in School"; (2) "Children and Youth Healthy and Preparing for Productive Adulthood"; (3)"Families that are Economically Self-Sufficient"; (4) "Families that are Safe, Stable and Nurturing"; and (5)"Communities that are Safe and Provide a High Quality of Life for Children and Families" by providing training and employment opportunities for in-school and out-of-school youth.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Software and Services Agreement #23-637 with CapsuleTech, Inc.

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**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Software and Services Agreement #23-637 with CapsuleTech, Inc., in an amount not to exceed $86,891 for the renewal of SmartLinx (formerly DataCaptor) License, Maintenance and Support for the period of March 6, 2018 through March 5, 2021.

**FISCAL IMPACT:**
100% funding is included in the Hospital Enterprise Fund I Budget.

**BACKGROUND:**
Health Services Department uses the SmartLinx (formerly known as DataCaptor) application for Medical Device Information Systems Support for clinical staff. The product facilitates interfacing between medical devices and medical software by collecting data, translating data into a common protocol, processes if necessary, merges data into a single flow, and distributes to medical software. SmartLinx delivers monitoring, management, and analysis of real-time patient data to the EPIC System.

Software and Services Agreement #23-637 contains a mutual indemnification provision regarding third party claims, which requires the County to indemnify and defend CapsuleTech, Inc. for claims arising out of the unauthorized use of the products.

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

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Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Patrick Wilson, 925-335-8700

By: , Deputy

**cc:** Tasha Scott, Marcy Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

Failure to renew this application would not enable clinicians to recognize the signs of a patient's physiological deterioration and take prompt action before the onset of adverse events; as well as providing interface of medical devices and information flow to distribute patient data between EPIC.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Amendment #23-566-3 with Huron Consulting Services, LLC

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract Amendment Agreement #23-566-3 with Huron Consulting Services, LLC, effective February 1, 2018, to amend Contract #23-566 (as amended by #23-566-1 and #23-566-2), to increase the payment limit by $25,674, from $1,400,000 to a new payment limit of $1,425,674 for the term May 1, 2014 through June 30, 2018.

**FISCAL IMPACT:**
This amendment is funded 100% by Hospital Enterprise Fund I. (No rate increase)

**BACKGROUND:**
On July 8, 2014, the Board of Supervisors approved Contract #23-566 (as amended by Amendment / Extension Agreement #23-566-1 and #23-566-2), with Huron Consulting Services, LLC for the provision of consulting, technical support, training, and project management for the Department's Information Systems Unit for the period from May 1, 2014 through June 30, 2018.

Approval of Amendment #23-566-3 will allow the contractor to provide additional services to the Health Services Director through June 30, 2018.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Patrick Wilson, 925-335-8777

**cc:** L Walker, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this extension is not approved, the County will not be able to receive expanded services from this contractor.

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Contract with Hewlett Packard Enterprise Company

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a Cooperative Purchasing Agreement with Hewlett Packard Enterprise Company, a Delaware Corporation, in an amount not to exceed $466,000 to provide updated computer server hardware, integrated software, and implementation services for the Employment and Human Services Department's (EHSD) servers for the period May 1, 2018 through April 30, 2019.

**FISCAL IMPACT:**
The funds allocated for this contract are 48% State ($223,680), 42% Federal ($195,720) and 10% County ($46,600) in administrative overhead.

**BACKGROUND:**
On April 18, 2017, the Board authorized the Employment and Human Services Department (EHSD) to issue request for proposals to acquire updated computer server infrastructure and software. In September 2017, EHSD selected Hewlett Packard Enterprise (HPE) Company in response to Request for Proposal #1156 to provide an integrated software solution in the management of its servers. HPE understands that EHSD's business success depends on all users having fast and

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Vickie Kaplan, (925) 608-4963

**cc:**

BACKGROUND: (CONT'D)

reliable access to the department's critical computing resources. EHSD wants to lower costs, improve performance, have disaster recovery in a simple to use solution with a single interface. HPE with SimpliVity technology can build and support a robust, adaptive enterprise that will enable EHSD to achieve its strategic objectives.

Through the National Association of State Procurement Officials (NASPO) ValuePoint Cooperative Purchasing Organization, the County will utilize an existing Hewlett Packard contract with the State of Minnesota, which the State of California uses for purchase of hardware, software, and services from Hewlett Packard. Use of the NASPO cooperative purchasing method will expedite the contracting process and provide EHSD with discounted prices.

CONSEQUENCE OF NEGATIVE ACTION:

Employment and Human Services Department will be unable to take advantage of industry best practices and improve the efficient use of information resources.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #24–933–37 with Crestwood Behavioral Health, Inc.

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**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract #24–933–37 with Crestwood Behavioral Health, Inc., a corporation, in an amount not to exceed $8,389,976, to provide subacute skilled nursing care services for the period July 1, 2018 through June 30, 2019.

**FISCAL IMPACT:**
This contract is funded by 92% Mental Health Realignment and 8% Mental Health Services Act. (Rate increase)

**BACKGROUND:**
This contract meets the social needs of County's population in that it provides subacute skilled nursing care services for County's Severely and Persistently Mentally Ill (SPMI) and neurobehavioral clients.

On July 11, 2017, the Board of Supervisors approved Contract #24-933-35 (as amended by Amendment Agreement #24-933-36) with Crestwood Behavioral Health, Inc., for the period from July 1, 2017 through June 30, 2018 for the provision of subacute skilled nursing care for SPMI and neurobehavioral clients.

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☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

---

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Matthew White, M.D., 925-957-5201

**cc:** L Walker , M Wilhelm

BACKGROUND: (CONT'D)

Approval of Contract #24-933-37 will allow the contractor to continue to provide services through June 30, 2019. This contract includes mutual indemnification to hold harmless both parties for any claims arising out of the performance of this contract.

CONSEQUENCE OF NEGATIVE ACTION:

The Behavioral Health Services Division/Mental Health places clients at contractor's facilities licensed for various levels of care. If the contract is not approved, a significant number of mentally ill young adults and adults may be displaced to the community without the mental health services they require.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Novation Contract #72-039-7 with West Contra Costa County Meals on Wheels

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Novation Contract #72-039-7 with West Contra Costa County Meals on Wheels, a non-profit corporation, in an amount not to exceed $65,289, to provide home-delivered meals for the Senior Nutrition Program for the period from July 1, 2018 through June 30, 2019, with a three-month automatic extension through September 30, 2019, in an amount not to exceed $15,334.

**FISCAL IMPACT:**
This contract is funded 100% by Title III-C 2 of the Older Americans Act of funds. (No rate increase)

**BACKGROUND:**
This contract meets the social needs of County's population by providing home-delivered meals on 250 serving days, to an average of 500 to 550 senior citizens and County residents living with HIV/AIDS, to ensure they receive at least one third of their daily nutritional requirements.

On May 24, 2017, the Board of Supervisors approved Contract #72-039-6 with West Contra Costa County Meals on Wheels for the provision of home-delivered meals for the Senior Nutrition Program, for the period July 1, 2017 through June 30, 2018, which included a three month automation extension period through September 30, 2018.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Dan Peddycord, 925-313-6712

**cc:** D Morgan, M Wilhelm

BACKGROUND: (CONT'D)

Approval of this Novation Contract #72-039-7 replaces the automatic extension under the prior contract allowing the contractor to continue to provide home-delivered meals for the Senior Nutrition Program through June 30, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, West County's homebound senior citizens and HIV/AIDS patients will not receive meals which provide at least one third of their daily nutrition.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Amendment #26-911-27 with Thomas B. Hargrave, M.D.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract Amendment Agreement #26-911-27 with Thomas B. Hargrave, M.D., an individual, effective May 15, 2018, to amend Contract #26-911-26, to increase the payment limit by $85,000, from $250,000 to a new payment limit of $335,000, with no change in the original term of September 1, 2017 through August 31, 2018.

**FISCAL IMPACT:**
This amendment is funded 100% by Hospital Enterprise Fund I. (No rate increase)

**BACKGROUND:**
On August 21, 2017, the Board of Supervisors approved Contract #26-911-26 with Thomas B. Hargrave, M.D., to provide gastroenterology services including consultation, training, on-call coverage services and medical procedures at Contra Costa Regional Medical Center (CCRMC) and Health Centers for the period September 1, 2017 through August 31, 2018.

Approval of Contract Amendment Agreement #26-911-27 will allow the contractor to provide additional hours of gastroenterology services at CCRMC and Health Centers through August 31, 2018.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Samir Shah, M.D., 925-370-5741

**cc:** K Cyr, M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved, patients at CCRMC and Health Centers requiring gastroenterology services will not have access to the contractor's services.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Amendment #26-437-11 with Stericycle, Inc.

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract Amendment Agreement #26-437-11 with Stericycle, Inc., a corporation, effective May 1, 2018, to amend Contract #26-437-10, to increase the payment limit by $51,000, from $1,000,000 to a new payment limit of $1,051,000 with no change in the original term of April 1, 2017 through March 31, 2020.

**FISCAL IMPACT:**
This amendment is funded 100% by Hospital Enterprise Fund I. (No rate increase)

**BACKGROUND:**
On June 6, 2017, the Board of Supervisors approved Contract #26-437-10 with Stericycle, Inc., to provide bio-hazardous waste management removal services for Contra Costa Regional Medical Center and Health Center locations, for the period from April 1, 2017 through March 31, 2020.

Approval of Contract Amendment Agreement #26-437-11 will allow the contractor to provide additional bio-hazardous services through March 31, 2020.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: JASPREET BENEPAL, 925-370-5741

**cc:** E Suisala , M Wilhelm

CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved, contractor will not be paid for additional bio-hazardous services.

Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Amendment #24-243-61 with R.E.A.C.H. Project

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County, Contract Amendment Agreement #24-243-61 with R.E.A.C.H. Project, a non-profit corporation, effective May 1, 2018, to amend Contract #24-243-59 (as amended by Amendment Agreement #24-243-60) to increase the payment limit by $59,995, from $1,160,589 to a new payment limit of $1,220,584, to provide additional drug abuse prevention and treatment services to youth and adults in East County, with no change in the original term of July 1, 2017 through June 30, 2018.

**FISCAL IMPACT:**
This contract is funded 14% by Substance Abuse Prevention and Treatment (SAPT) Block Grants, 40% by Drug Medi-Cal Realignment, 40% by Federal Drug Medi-Cal, and 6% by Probation Department. (No rate increase)

**BACKGROUND:**
On July 18, 2017, the Board of Supervisors approved Contract #24-243-59 (as amended by Amendment Agreement #24-243-60) with R.E.A.C.H. Project, for the period from July 1, 2017 through June 30, 2018, to provide drug abuse prevention and treatment services at contractor's facilities throughout East County.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

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Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Matthew White, M.D., 925-370-5891

**cc:** E Suisala , M Wilhelm

BACKGROUND: (CONT'D)

Approval of Contract Amendment Agreement #24-243-61 will allow the contractor to provide additional drug abuse prevention and treatment services to include both Drug Medi-Cal and SAPT Block Grant funded programs, through June 30, 2018.

CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved, individuals will not receive additional alcohol and drug prevention and treatment services they need to maintain sobriety and reduce risk factors.

CHILDREN'S IMPACT STATEMENT:

This prevention and treatment program supports the following Board of Supervisors' community outcomes: "Children Ready For and Succeeding in School"; "Families that are Safe, Stable, and Nurturing"; and "Communities that are Safe and Provide a High Quality of Life for Children and Families". Expected program outcomes include addicted youth being provided an opportunity to prevent or recover from the effects of alcohol or other drug use, become self-sufficient, and return to their families as productive individuals.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Contract #26-492-19 with Cardinal Health Pharmacy Services, LLC

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County Contract #26-492-19 with Cardinal Health Pharmacy Services, LLC, a limited liability company, in an amount not to exceed $1,370,000 to provide remote order entry of physician medication orders for Contra Costa Regional Medical Center (CCRMC) and Health Centers, for the period June 1, 2018 through May 31, 2020.

**FISCAL IMPACT:**
This contract is funded 100% by Hospital Enterprise Fund I. (No rate increase)

**BACKGROUND:**
On July 19, 2016, the Board of Supervisors approved Contract #26-492-18 with Cardinal Health Pharmacy Services, LLC, to provide remote entry of physician medication orders from the CCRMC including reviewing and entering all medication orders into the Customer's Pharmacy Information System, resolving all incomplete or questionable orders submitted by the County Pharmacist, providing clinical support to hospital staff and conducting daily briefings with the Director of Pharmacy, for the period from June 1, 2016 through May 31, 2018.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: JASPREET BENEPAL, 925-370-5741

**cc:** E Suisala, M Wilhelm

BACKGROUND: (CONT'D)

Approval of Contract #26-492-19 will allow the contractor to continue to provide remote entry of physician medication orders through May 31, 2020. This contract includes mutual indemnification.

CONSEQUENCE OF NEGATIVE ACTION:

If this contract is not approved, patients requiring after-hours medication orders at CCRMC will not have access to the contractor's services.

Contra Costa County

To: Board of Supervisors

From: TRANSPORTATION, WATER & INFRASTRUCTURE COMMITTEE

Date: May 22, 2018

Subject: AUTHORIZE Board of Supervisors to sign a letter to the Superintendent of Public Instruction re: Title 5 Update (Haz. Materials/School Siting-Safety)

**RECOMMENDATION(S):**

AUTHORIZE the Board of Supervisors to sign a letter to the California State Superintendent of Public Instruction expressing the County's concerns with the Department of Education's process to update Title 5 (School Facilities Construction), as recommended by the Transportation, Water and Infrastructure Committee.

**FISCAL IMPACT:**

None.

**BACKGROUND:**

The topic of school siting and safety has come before the Board of Supervisors on numerous, prior occasions. Concerns have included: 1) the purchase of school sites and development of schools in inappropriate areas, 2) local school district violations of statutory requirements relative to the notification of local land use agencies regarding property acquisition, and 3) the conflict between school siting practices and state and local policies relative to safe routes to school, greenhouse gas reduction, growth management and more generally, coherent land development.

☐ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☑ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☑ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

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ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: John Cunningham (925) 674-7833

**cc:** Michael Kent

BACKGROUND: (CONT'D)

The State is currently conducting a formal process to revise Title 5 guidance. The letter is in response to that process. The Transportation, Water, and Infrastructure Committee discussed the update process at their March 2018 meeting. Members of the Hazardous Materials Commission and transportation planning staff were included in the discussion. While the concepts to be included in the letter were discussed at the March meeting, the Committee did not review the letter attached to this report.

The language in this letter is more direct than the County's previous, numerous communications on this topic. Staff has become aware of significant resistance to any changes to the Title 5 polices relative to school siting. That resistance, combined with this now formalized process to update Title 5, prompts staff to recommend more direct language in order to try and more clearly communicate what the County has long identified as critical issues. Key concerns include school siting practices relative to hazardous materials, multi-modal transportation, safety, and general land use planning tenets.

CHILDREN'S IMPACT STATEMENT:

Current school siting practices result in negative outcomes under, "*Outcome 2: Youth Are Healthy and Preparing for Adulthood*" and "*Outcome 4: Families and Communities Are Safe*" in Costa County County's Children's Report Card. The letter seeks to make improvements in school siting practices by way of reformed Title 5 policies.

ATTACHMENTS

Draft Letter to CDE

**The Board of Supervisors**

County Administration Building
651 Pine Street, Room 106
Martinez, California 94553-1293

**John Gioia**, 1st District
**Candace Andersen**, 2nd District
**Diane Burgis**, 3rd District
**Karen Mitchoff**, 4th District
**Federal D. Glover**, 5th District

**Contra Costa County**

**David Twa**
Clerk of the Board
and
County Administrator
(925) 335-1900

May 22, 2018

Tom Torlakson
State Superintendent of Public Instruction
California Department of Education
1430 N Street
Sacramento, CA 95814

DRAFT Re: Children's Safety – School Siting, Construction, Safety Policies - Title 5 Update DRAFT

Dear Superintendent Torlakson,

We are writing on the subject of school and children's safety relative to the current Title 5 update process being undertaken by the California Department of Education (CDE). Specifically, we are concerned with school siting practices relative to 1) industrial sites and related conveyance infrastructure and, 2) land use and transportation related issues.

Before discussing the specifics of our comments, the Board of Supervisors urges California Department of Education (CDE) to include a more robust web presence for the update process. There is currently limited information available on the CDE website. More comprehensive information will foster a more productive public process.

Specific comments are below, and attached to this letter are inline revisions to Title 5:

1. With the imposition of any new regulations, CDE should make every effort to ease the administrative and financial burden on local school districts. This could be done by adopting templates for use by local districts or by providing technical assistance to school districts. For example, the multi-modal circulation plan proposed further below could be prepared by the Department of Transportation.
2. CDE should develop guidelines for assessing and mitigating the risks of siting new schools near industrial facilities and rail lines due to potential explosions and fires from the use, storage, manufacture and transportation of hazardous materials, similar to the guidelines they have established for assessing and mitigating the risks from the transportation of hazardous materials through pipelines.

3. CDE should amend the regulations pertaining to the rebuilding of schools on the site of existing schools to require that the current risks from accidental explosions and fire of hazardous materials used, stored, manufactured or transported at industrial facilities, in pipelines and by rail are assessed and mitigated.
4. There are existing policies in Title 5 that, if actively enforced, would result in some improvement in school site selection. That said, for any Title 5 revisions to have a perceptible positive impact on school siting practices, they will need to be compulsory. In our numerous meetings and conversations with CDE staff and state legislators, we found there is discomfort with compulsory provisions. However, the County has direct experience with non-compulsory provisions having little or no effect on school siting decisions. We have witnessed this leading to acquisition of sites that would be extremely difficult for children to safely access on their own, that are not supported by adequate transportation infrastructure, have limited or no transit service, and would be sprawl and greenhouse gas inducing. The State should include compulsory measures to ensure reasonable school siting decisions and consider the necessary legislation to grant the requisite authority to enforce compulsory policies.
5. Multi-modal Circulation Plan: Please see Exhibit 1: School Siting – Student Safety/Multimodal Circulation Plan: Given the evolution of federal, state, and local policies regarding safe routes to schools, greenhouse gas reduction, and generally universal respect for the safety of children, we expect that implementation of this policy would have minimal resistance. One issue that should be stressed is, due to socioeconomic conditions, there will **always** be some students that have no choice but to travel to/from school under their own power by active modes. Considering that, the attached proposed policy should be considered reasonable and implemented as compulsory.
6. As California implements greenhouse gas (GHG) reduction legislation, the current model for school site selection is increasingly in conflict with model policies. Land development is increasingly prioritizing infill, which typically results in less GHG production, and reduced transportation infrastructure costs. However, infill development is often more expensive and procedurally more complex. The State may need to examine the underlying school construction finance model and fund an incentive program to allow infill sites to be economically viable for local school districts. In addition, a streamlining process to ease the development of infill sites may be beneficial and even necessary.
7. As standard practice with other State Departments during policy updates, please publish all comments on this process. The public debate would be aided by a full-airing of comments received.
8. Statutes for Local Agency Formation Commissions (LAFCOs) provide a role for Commissions in school site development and could be expanded. At a minimum, a) school districts should be required to consult with LAFCO when a new school site is being proposed, and b) LAFCO should discourage the extension of municipal services to school sites located in agricultural and open space areas pursuant to LAFCO law. More prescriptive restrictions related to the extension of municipal services should be strongly considered in areas with a voter adopted Urban Limit Line or Urban Growth Boundary.
9. At a minimum, compliance (without preemption authority) with voter adopted Urban Limit Lines and Urban Growth Boundaries should be compulsory.

DRAFT

10. The State should explore implementing policies developed by the Collaborative for High Performing schools. Again, any changes will likely have to be compulsory in order to be effective.
11. The State should explore opportunities to incorporate school siting practices in to the Sustainable Communities/Priority Development Area type programs. There are few land development projects that have as large or enduring effect on the character and safety of a community as a school site, and local land use planning goals and policies should be considered and respected in these decisions.
12. While outside the purview of CDE, the following should be included in a more comprehensive and strategic school safety and siting program. We urge CDE to bring these concepts to the Strategic Growth Council for their consideration:
    a. Implement a "Vulnerable Road User Protection" (VRU) statute: VRU laws establish the concept "whoever can do the most damage has an obligation to be the most careful". Connecticut, Delaware, Florida, Hawaii, Maine, Oregon, Utah, Vermont, and Washington all have such laws, etc.
    b. Pass an "Enhanced Penalty School Zone" statute: This could consist of a double/triple fine zone, moving violation for cell phone use, etc.
    c. Redefinition of the school zone distances in state law: This redefinition would reflect *actual* access patterns rather than the current arbitrary distances defined in the statutes. As one member of the Caltrans Committee on Traffic Control Devices described it, there was no engineering or analysis when the original prescriptive distances in the statutes were established. Included in the reform of school zone policies should be the associated, "When Children Are Present" signage policies and underlying statutes. Current policies are widely acknowledged to be fundamentally flawed.
    d. Implement and fund or incentivize the bicycle and pedestrian safety curriculum developed by the Strategic Growth Council and the State Health in All Policies Task Force. The program would have dual benefit of decreased injuries/deaths and increased walking/biking.
13. As stated in our numerous, prior communications, current school siting practices do not allow the County to fulfill its constitutional obligations relative to the protection of public health, safety, and welfare. As such, those obligations fall to the State and/or local school districts. Only substantive reform of school siting policies and practices will allow effective engagement by the local land use authority.

Thank you for your consideration of these comments; we look forward to your response. If you have any questions regarding this letter, please feel free to contact me or Michael Kent, Health Services Hazardous Materials Ombudsman [Michael.Kent@hsd.cccounty.us, (925) 313-6587] or the County's Planning Director, John Kopchik [John.Kopchik@dcd.cccounty.us, (925) 674-7833, or John Cunningham, Principal Planner [John.Cunningham@dcd.cccounty.us, (925)674-7833].

Sincerely,

DRAFT

Karen Mitchoff, Chair
Contra Costa County Board of Supervisors

cc: Members: Contra Costa Hazardous Materials Commission
California Building Industry Association
Edmund G. Brown Jr., Governor – State of California
**Members**: Contra Costa County Legislative Delegation
Ken Alex, Director – Office of Planning and Research
Randall Winston, Executive Director – Strategic Growth Council
Jeff Vincent, Deputy Director – Center for Cities and Schools

Attachments

- Exhibit 1: School Siting – Student Safety/Multimodal Circulation Plan
- Exhibit 2: CCC Title 5 Comments

DRAFT

# School Siting – Student Safety

## Multimodal Circulation Plan

- The school board may only approve the *purchase* of a school site if the board also:
  - Approves a *preliminary* multimodal circulation and safety plan (addressing site access and school attendance boundaries) signed and stamped by a licensed traffic engineer.
- The school board may only approve a final school design if the Board:
  - Approves a *final* multimodal (bus, automobile, pedestrian, bicycle) circulation and safety plan (addressing site access and school attendance boundaries) signed and stamped by a licensed traffic engineer.
  - The final plan shall include a capital improvement program (CIP) defining projects necessary to accommodate student travel within the attendance boundary.
  - Certifies that all CIP projects will be in place prior to the school opening for instruction.

**Exhibit 2: CCC Title 5 Comments**: Contra Costa County Comments on Title 5 Revision Process. Revisions are in redline/strikeout format. Annotations/comments on the revisions are in [brackets and in typewriter font].

Title 5. Education
Division 1. California Department of Education
Chapter 13. School Facilities and Equipment
Subchapter 1. School Housing
Article 1. General Standards

**§ 14001. Minimum Standards.**

Educational facilities planned by school districts shall be:

(a) Evolved from a statement of educational program requirements which reflects the school district's educational goals and objectives.

(b) Master-planned to provide for maximum site enrollment..

(c) Located on a site which meets California Department of Education standards as specified in Section 14010.

(d) Designed for the environmental comfort and work efficiency of the occupants.

(e) Designed to require a practical minimum of maintenance.

(f) Designed to meet federal, state, and local statutory requirements for structure, fire, and public safety.

(g) Designed and engineered with flexibility to accommodate future needs.

(h) Located and designed to support reductions of greenhouse gasses and vehicle miles traveled consistent with state goals.

(i) Include access infrastructure, at the time of school opening, consistent with the 2008- Complete Streets Act. [Reflects authority established with the "safety" references in EDC § 17251 (c) and (f)].

Note: Authority cited: Sections 17251(b) and 33031, Education Code. Reference: Sections 17017.5 and 17251(b), Education Code.

HISTORY

1. Amendment filed 9-23-77; effective thirtieth day thereafter (Register 77, No. 39).

2. Amendment of text and adoption of Note filed 11-12-93; operative 12-13-93 (Register 93, No. 46).

3. Amendment of Note filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14001, 5 CA ADC § 14001

Title 5. Education
Division 1. California Department of Education
Chapter 13. School Facilities and Equipment
Subchapter 1. School Housing
Article 2. School Sites

**§ 14010. Standards for School Site Selection.**

All districts shall select a school site that provides safety and that supports learning. The following standards shall apply to site selection and be addressed in a written report provided to the governing board, the district advisory committee, and the local land use agency [requirements are consistent with EDC § PART 10.5. SCHOOL FACILITIES: Schoolsites: 17211]:

(a) The net usable acreage and enrollment for a new school site shall be consistent with the numbers of acres and enrollment established in the 2000 Edition, "School Site Analysis and Development" published by the California Department of Education and incorporated into this section by reference, in toto, unless sufficient land is not available or circumstances exist due to any of the following:

(1) Urban or suburban development results in insufficient available land even after considering the option of eminent domain.

(2) Sufficient acreage is available but it would not be economically feasible to mitigate geological or environmental hazards or other site complications which pose a threat to the health and/or safety of students and staff.

(3) Sufficient acreage is available but not within the attendance area of the unhoused students or there is an extreme density of population within a given attendance area requiring a school to serve more students on a single site. Choosing an alternate site would result in extensive long-term bussing of students that would cause extreme financial hardship to the district to transport students to the proposed school site.

(4) Geographic barriers, traffic congestion, ~~-~~inadequate transportation infrastructure for student cyclists, pedestrians, and/or other wheeled/active transportation, high vehicle speeds, or other constraints throughout the attendance boundary ~~would~~ cause extreme school access issues for the school district and the community at large. ~~financial hardship for the district to transport students to the proposed school site~~. [Regarding the struck out text, excepting special needs students, school districts are not obligated to provide transportation. Regardless, the listed issues **DO** create a hardship for parents, students, and local jurisdictions who, when school districts site schools in remote areas, are left to somehow get students safety to/from school sites which are often infrastructure islands surrounded by rural landscape.]

(b) If a school site is less than the recommended acreage required in subsection (a) of this section, the district shall demonstrate how the students will be provided an adequate educational program including physical education as described in the district's adopted course of study.

(c) The property line of the site even if it is a joint use agreement as described in subsection (o) of this section shall be at least the following distance from the edge of respective power line easements:

(1) 100 feet for 50-133 kV line.

(2) 150 feet for 220-230 kV line.

(3) 350 feet for 500-550 kV line.

(d) If the proposed site is within 1,500 feet of a railroad track easement, a safety study shall be done by a competent professional trained in assessing cargo manifests, frequency, speed, and schedule of railroad traffic, grade, curves, type and condition of track need for sound or safety barriers, need for pedestrian and vehicle safeguards at railroad crossings, presence of high pressure gas lines near the tracks that could rupture in the event of a derailment,

preparation of an evacuation plan. In addition to the analysis, possible and reasonable mitigation measures must be identified. [Roadways and automobiles are a more substantial threat to student safety than railroads. Implementation of the County's *"Multimodal Circulation Plan"* proposal will help to ensure an appropriate review of roadway safety, on par with the railroad language]

(e) The site shall not be adjacent to a road or freeway that any site-related traffic and sound level studies have determined will have safety problems or sound levels which adversely affect the educational program.

(f) Pursuant to Education Code sections 17212 and 17212.5, the site shall not contain an active earthquake fault or fault trace.

(g) Pursuant to Education Code sections 17212 and 17212.5, the site is not within an area of flood or dam flood inundation unless the cost of mitigating the flood or inundation impact is reasonable.

(h) The site shall not be located near an above-ground water or fuel storage tank or within 1500 feet of the easement of an above ground or underground pipeline that can pose a safety hazard as determined by a risk analysis study, conducted by a competent professional, which may include certification from a local public utility commission.

(i) The site is not subject to moderate to high liquefaction or landslides.

(j) The shape of the site shall have a proportionate length to width ratio to accommodate the building layout, parking and playfields that can be safely supervised and does not exceed the allowed passing time to classes for the district.

(k) The site shall be easily accessible from arterial roads and shall allow minimum peripheral visibility from the planned driveways in accordance with the Sight Distance Standards established in the "Highway Design Manual," Table 201.1, published by the Department of Transportation, July 1, 1990 edition, and incorporated into this section by reference, in toto.

(l) The site shall not be on major arterial streets with a heavy traffic pattern as determined by site-related traffic studies including those that require student crossings unless mitigation of traffic hazards and a plan for the safe arrival and departure of students appropriate to the grade level has been provided by city, county or other public agency in accordance with the "School Area Pedestrian Safety" manual published by the California Department of Transportation, 1987 edition, incorporated into this section by reference, in toto. [Considering the wealth of new, relevant statutes and policies that state and local governments have developed over the past 10 years this language should be rewritten. Contemporary references (as opposed to the *1987 School Area Pedestrian Safety* document)should be included, at a minimum: the 2008 Complete Streets Act, Health In All Policies, AB32/SB375 concepts, Caltrans Smart Mobility Framework, the various guidance documents available from the National Association of City Transportation Officials (now sanctioned by Caltrans and the FHWA) and the numerous revisions to the Highway Design Manual. Adoption of the County's "Multimodal Circulation Plan proposal would help in updating this section. Some detailed comments:

- High vehicle speeds are equally if not more problematic than "heavy traffic patterns". CDE should consult with the CDPH for input on what are considered safe speeds in areas where vehicles are sharing the roadway with underage/student cyclists and pedestrians. The latest research recommends no more than 20 MPH.
- Identifying only the location of the school site is negligent. The entire attendance boundary needs to be identified and studied.
- The "mitigations for traffic hazards" need to be in place prior to the school opening.

(m) Existing or proposed zoning of the surrounding properties shall be compatible with schools in that it would not pose a potential health or safety risk to students or staff in accordance with Education Code Section 17213 and Government Code Section 65402, the multimodal circulation and safety plan, and other available studies of traffic surrounding the site.

(n) The site shall be located within the proposed attendance area to accommodate and encourage student ~~walking and~~ active transportation avoid extensive bussing unless bussing is used to promote ethnic diversity. Accommodation shall be documented in the multimodal circulation and safety plan and in place prior to the school opening for instruction. [The comment is reflective of the County's, "Multimodal Circulation Plan"]

(o) The site shall be selected to promote joint use of parks, libraries, museums and other public services, the acreage of which may be included as part of the recommended acreage as stated in subsection (a) of this section.

(p) The site shall be conveniently located for public services including but not limited to fire protection, police protection, public transit and trash disposal whenever feasible.

(q) The district shall consider environmental factors of light, wind, noise, aesthetics, and air pollution in its site selection process.

(r) Easements on or adjacent to the site shall not restrict access or building placement.

(s) The cost and complications of the following shall be considered in the site selection process and should not result in undue delays or unreasonable costs consistent with State Allocation Board standards:

(1) Distance of utilities to the site, availability and affordability of bringing utilities to the site.

(2) Site preparation including grading, drainage, demolition, hazardous cleanup, including cleanup of indigenous material such as serpentine rock, and off-site development of streets, curbs, gutters and lights.

(3) Eminent domain, relocation costs, severance damage, title clearance and legal fees.

(4) Long-term high landscaping or maintenance costs.

(5) Existence of any wildlife habitat that is on a protected or endangered species list maintained by any state or federal agency, existence of any wetlands, natural waterways, or areas that may support migratory species, or evidence of any environmentally sensitive vegetation.

(t) If the proposed site is on or within 2,000 feet of a significant disposal of hazardous waste, the school district shall contact the Department of Toxic Substances Control for a determination of whether the property should be considered a Hazardous Waste Property or Border Zone Property.

(u) At the request of the governing board of a school district, the State Superintendent of Public Instruction may grant exemptions to any of the standards in this section if the district can demonstrate that mitigation of specific circumstances overrides a standard without compromising a safe and supportive school environment.

Note: Authority cited: Sections 17251(b) and 33031, Education Code. Reference: Sections 17212, 17212.5, 17213, 17251(b) and 17251(f), Education Code.

HISTORY

1. Renumbering of former section 14010 to section 14011 and new section filed 11-12-93; operative 12-13-93 (Register 93, No. 46). For prior history, see Register 77, No. 39.

2. Amendment of section and Note filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

Title 5. Education
Division 1. California Department of Education
Chapter 13. School Facilities and Equipment
Subchapter 1. School Housing
Article 2. School Sites

**§ 14011. Procedures for Site Acquisition - State-Funded School Districts.**

A state-funded school district is defined as a school district having a project funded under Chapter 12.5 (commencing with Section 17070.10) of the Education Code. A state-funded school district, before acquiring title to real property for school use, shall obtain written approval from the California Department of Education using the following procedures:

(a) Request a preliminary conference with a consultant from the School Facilities Planning Division and in consultation review and evaluate sites under final consideration.

(b) Contact the School Facilities Planning Division of the California Department of Education to obtain a "School Facilities Planning Division Field Site Review," form SFPD 4.0, published by the California Department of Education, as last amended in December 1999 and incorporated into this section by reference, in toto, which lists the site options in order of merit according to the site selection standards delineated in Section 14010.

(c) Prepare a statement of policies as delineated on the "School Facilities Planning Division School Site Report," form SFPD 4.02, as last amended in December 1999 and incorporated into this section by reference, in toto, covering the range and organization of grades to be served, the transportation of pupils, and the ultimate maximum pupil enrollment to be housed on the site. Prepare a statement showing how the site is appropriate in size as justified by the school district's Facilities Master Plan, including acreage increases above the California Department of Education recommendation made to compensate for off-site mitigation. A school district may choose, in place of a master plan, a developer fee justification document or a five-year plan if it addresses enrollment projections, needed schools, and site sizes.

(d) Prepare maps showing present and proposed school sites, significant roads or highways, unsanitary or hazardous installations, such as airports or industries and the indicated boundary of the pupil attendance area to be served as delineated on form SFPD 4.02.

(e) Meet with appropriate local government, recreation, and park authorities to consider possible joint use of the grounds and buildings and to coordinate the design to benefit the intended users as required by Education Code Section 35275.

(f) Give written notice to the local planning agency having jurisdiction to review the proposed school site or addition to an existing school site and request a written report from the local planning agency of the investigations and recommendations for each proposed site with respect to conformity with the adopted general plan as required by Public Resources Code Section 21151.2 and Government Code Section 65402 and provide documentation to the California Department of Education (CDE) demonstrating the notice and report request to the local planning agency. CDE shall not provide any administrative, or financial support to the school district without fulfillment of this requirement. [This requirement is in response to our experience with school districts not being aware of or disregarding the referenced sections of the code. Please see the County's 8-24-16 letter to the Liberty Union High School District (LUHSD) attached to our Title 5 Comment letter. The letter to LUHSD is also available here: http://www.cccounty.us/no-notice]

(g) Comply with Education Code Sections 17212 and 17212.5, with particular emphasis upon an engineering investigation made of the site to preclude locating the school on terrain that may be potentially hazardous:

(1) The geological and soils engineering study shall address all of the following:

(A) Nature of the site including a discussion of liquefaction, subsidence or expansive soils, slope, stability, dam or flood inundation and street flooding.

(B) Whether the site is located within a special study zone as defined in Education Code Section 17212.

(C) Potential for earthquake or other geological hazard damage.

(D) Whether the site is situated on or near a pressure ridge, geological fault or fault trace that may rupture during the life of the school building and the student risk factor.

(E) Economic feasibility of the construction effort to make the school building safe for occupancy.

(2) Other studies shall include the following:

(A) Population trends

(B) Transportation

(C) Water supply

(D) Waste disposal facilities

(E) Utilities

(F) Traffic hazards

(G) Surface drainage conditions

(H) Other factors affecting initial and operating costs.

(h) Prepare an environmental impact report, or negative declaration in compliance with the Environmental Quality Act, Public Resources Code, Division 13, (commencing with Section 21000 with particular attention to Section 21151.8). As required by Education Code Section 17213, the written findings of the environmental impact report or negative declaration must include a statement verifying that the site to be acquired for school purposes is not currently or formerly a hazardous, acutely hazardous substance release, or solid waste disposal site or, if so, that the wastes have been removed. Also, the written findings must state that the site does not contain pipelines which carry hazardous wastes or substances other than a natural gas supply line to that school or neighborhood. If hazardous air emissions are identified, the written findings must state that the health risks do not and will not constitute an actual or potential danger of public health of students or staff. If corrective measures of chronic or accidental hazardous air emissions are required under an existing order by another jurisdiction, the governing board shall make a finding that the emissions have been mitigated prior to occupancy of the school.

(i) Consult with, or demonstrate that the lead agency, if other than the district preparing the environmental impact report or negative declaration, has consulted with the appropriate city/county agency and with any air pollution control district or air quality management district having jurisdiction, concerning any facilities having hazardous or acutely hazardous air emissions within one-fourth of a mile of the proposed school site as required by Education Code Section 17213.

(j) For purposes of Environmental Site Assessment, school districts shall comply with Education Code sections 17210.1, 17213.1, and 17213.2.

(k) Follow the recommendations of the State Superintendent of Public Instruction report based upon the Department of Transportation, Division of Aeronautics, findings, if the proposed site is within two miles of the center line of an airport runway or proposed runway as required by Education Code Section 17215.

(l ) Follow the standards for school site selection in Section 14010 of this article.

(m) Conduct a public hearing by the governing board of the school district as required in Education Code Section 17211 to evaluate the property using the standards described in Section 14010 of this article. The school district's facility advisory committee may provide an evaluation of the proposed site to the governing board.

(n) Submit the request for exemption from a standard in Section 14010 of this article, with a description of the mitigation that overrides the standard, to the California Department of Education.

(o) Certify there are no available alternative school district-owned sites for the project deemed usable for school purposes by the California Department of Education or certify that the school district intends to sell an available alternative school district-owned site and use the proceeds from the sale for the purchase of the new school site.

Note: Authority cited: Sections 17251(b) and 33031, Education Code. Reference: Sections 17070.50, 17072.12, 17210.1, 17211, 17212, 17213 and 17251(b), Education Code.

HISTORY

1. Renumbering and amendment of section 14010 to section 14011 and adoption of Note filed 11-12-93; operative 12-13-93 (Register 93, No. 46).

2. Amendment of section heading, section and Note filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14011, 5 CA ADC § 14011

**§ 14012. Procedures for Site Acquisition - Locally-Funded School Districts.**

A locally-funded school district is defined as a school district with a project not applying for funding from any state program administered by the State Allocation Board as defined in Chapter 12.0 (commencing with Section 17000) or Chapter 12.5 (commencing with Section 17070.10) of the Education Code. A locally-funded school district, before acquiring title to real property for school use, shall:

(a) Evaluate the property using the standards established in Section 14010 and items (e) through (l ) in Section 14011;

(b) Comply with terms of the complaint investigation described in Section 14012(d); and

(c) May request advice from the California Department of Education as described in Education Code Section 17211(a).

(d) Prepare documentation of and retain for purposes of a complaint investigation the exemption from the standard in Section 14010 of this article with a description of the mitigation that overrides the standard. Locally-funded school districts may request from the California Department of Education a review of the adequacy of the mitigation measure.

(e) Comply with Education Code section 17268 regarding potential safety or health risks to students and staff.

Note: Authority cited: Sections 17251(b) and 33031, Education Code. Reference: Sections 17251(a) and (b) and 17268, Education Code.

HISTORY

1. New section filed 11-12-93; operative 12-13-93 (Register 93, No. 46).

2. Repealer of former section 14012 and renumbering of former section 14013 to new section 14012, including amendment of section heading, section and Note, filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14012, 5 CA ADC § 14012

**§ 14013. Procedures for Site Acquisition - Locally-Funded Districts. [Renumbered]**

Note: Authority cited: Section 39001(b), Education Code. Reference: Sections 17700 et. seq., 39101(a), and 39101(b), Education Code.

HISTORY

1. New section filed 11-12-93; operative 12-13-93 (Register 93, No. 46).

2. Renumbering of former section 14013 to section 14012 filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14013, 5 CA ADC § 14013

Title 5. Education
Division 1. California Department of Education
Chapter 13. School Facilities and Equipment
Subchapter 1. School Housing
Article 4. Standards, Planning and Approval of School Facilities

**§ 14030. Standards for Development of Plans for the Design and Construction of School Facilities.**

The following standards for new schools are for the use of all school districts for the purposes of educational appropriateness and promotion of school safety:

(a) Educational Specifications.

Prior to submitting preliminary plans for the design and construction of school facilities, and as a condition of final plan approval by CDE, school board-approved educational specifications for school design shall be prepared and submitted to the California Department of Education based on the school district's goals, objectives, policies and community input that determine the educational program and define the following:

(1) Enrollment of the school and the grade level configuration.

(2) Emphasis in curriculum content or teaching methodology that influences school design.

(3) Type, number, size, function, special characteristics of each space, and spatial relationships of the instructional area that are consistent with the educational program.

(4) Community functions that may affect the school design. [Substantial detail and examples should be added to remove ambiguity]

(b) Site Layout.

Parent drop off, bus loading areas, ~~and~~ parking, and non-motorized access shall be separated or otherwise designed to allow students to enter and exit the school grounds safely [re: the following struck out language: if safe access cannot be provided the site is inappropriate] ~~unless these features are unavailable due to limited acreage in urban areas or restrictive locations, specifically~~[Comments are consistent with authority established in the "safety" references in EDC § 17251 (c) and (f)].
:

(1) Buses do not pass through parking areas to enter or exit school site unless a barrier is provided that prevents vehicles from backing directly into the bus loading area.

(2) Parent drop off area ~~is~~ shall be located to disincentivize auto access ~~adjacent to school entrance~~, diffuse peak loads, incentivize active mode access. and separate from bus area and staff parking.

(3) Vehicle traffic pattern does not interfere with ~~foot~~ active mode traffic patterns. Foot traffic does not have to pass through entrance driveways to enter school. Crosswalks are clearly marked to define desired foot path to school entrance.

(4) Parking stalls are not located so vehicles must back into bus or loading areas used by parents. Island fencing or curbs are used to separate parking areas from loading/unloading areas.

(5) To provide equal access to insure the purposes of the least restrictive environment, bus drop off for ~~handicapped~~ students with disabilities is in the same location as for regular education students.

(6) To ensure safe, efficient access a multimodal circulation plan for the school's entire attendance boundary shall be developed. [consistent with authority established in the "safety" references in EDC § 17251 (c) and (f)]

(7) Bicyclist and pedestrian access to school sites shall be encouraged through prioritized access and bicycle parking.

(c) Playground and Field Areas.

Adequate physical education teaching stations shall be available to accommodate course requirements for the planned enrollment, specifically:

(1) A variety of physical education teaching stations are available to provide a comprehensive physical education program in accordance with the district's adopted course of study (including hardcourt, field area and indoor spaces).

(2) The physical education teaching stations are adequate for the planned student enrollment to complete the minimum instruction and course work defined in Education Code Sections 51210(g), 51220(d) and 51225.3(a)(1)(F).

(3) Supervision of playfields is not obstructed by buildings or objects that impair observation.

(4) Joint use for educational purposes with other public agencies is explored. Joint use layout with parks is not duplicative and fulfills both agencies' needs.

(d) Delivery and Utility Areas.

Delivery and service areas shall be located to provide vehicular access that does not jeopardize the safety of students and staff:

(1) Delivery/utility vehicles have direct access from the street to the delivery area without crossing over playground or field areas or interfering with bus or parent loading unless a fence or other barrier protects students from large vehicle traffic on playgrounds.

(2) Trash pickup is fenced or otherwise isolated and away from foot traffic areas.

(e) Future Expansion.

Site layouts shall have capability for expansion without substantial alterations to existing structures or playgrounds:

(1) Site layout designates area(s) for future permanent or temporary additions that are compatible with the existing site plans for playground layout and supervision.

(2) Utilities to the expansion area are included in the plans and have the capacity to accommodate anticipated growth.

(3) Exits, corridors, stairs, and elevators are located to accommodate capacity of additions, particularly in such buildings added as the multi-purpose/cafeteria, administration, gymnasium/or auditorium.

(f) Placement of Buildings.

Building placement shall consider compatibility of the various functions on campus and provide optimum patterns of foot traffic flow around and within buildings. Site layout of buildings, parking, driveways, and physical education areas shall be adequate to meet the instructional, security and service needs of the educational program:

(1) Building placement is compatible with other functions on campus; e.g., band room is not next to library.

(2) Physical relationship of classrooms, auxiliary, and support areas allows unobstructed movement of staff and students around the campus.

(3) Building placement has favorable orientation to wind, sun, rain, and natural light.

(4) Restrooms are conveniently located, require minimum supervision, and, to the extent possible, are easily accessible from playground and classrooms.

(5) Parking spaces are sufficient for staff, visitors, and students (where applicable).

(6) The campus is secured by fencing and electronic devices such as code entries, electronic monitoring or motion sensors when needed.

(g) Classrooms.

Classrooms at new school sites shall have adequate space to perform the curriculum functions for the planned enrollment as described in the school district's facility master plan, specifically:

(1) Classroom size standards:

(A) General classrooms, grades one through twelve are not less than 960 square feet. Classrooms proposed of less than 960 square feet require written justification to be submitted to and approved by the State Superintendent of Public Instruction. Adjacent instructional space shall be included in the calculation of square feet for purposes of approving classroom design.

(B) Proposed classrooms of less than 960 square feet have written justification consistent with the educational program and curriculum indicating that the district's education program can be delivered in the proposed size classrooms.

(2) Total classroom space meets or exceeds the capacity planned for the school using the district's classroom loading standards in accordance with State Allocation Board policy.

(3) Consideration is given to some classrooms which are easily alterable in size and shape at a reasonable cost.

(4) Conduit/cabling and outlets are available for technology in each classroom to provide network and stand alone equipment related to the planned and future potential educational functions.

(h) Specialized Classrooms and Areas.

Specialized classrooms shall be designed to reflect the function planned for that portion of the educational program. If any of the following classrooms are needed, these standards apply:

(1) Small-Group Areas.

(A) Small-group instruction areas are not included in the computation of classroom size unless the area is an integral part of the classroom and can be visibly supervised by a teacher from the classroom.

(B) Small-group instruction areas are designed to allow for collaborative learning opportunities where appropriate to support the regular education program and are located in the vicinity of classrooms.

(2) Kindergarten Classrooms.

(A) Kindergarten classroom size for permanent structures is not less than 1350 square feet, including restrooms, storage, teacher preparation, wet and dry areas.

(B) Kindergarten classrooms are designed to allow supervision of play yards (unless prevented by site shape or size) and all areas of the classroom.

(C) Play yard design provides a variety of activities for development of large motor skills.

(D) Classrooms are located close to parent drop-off and bus loading areas.

(E) Storage, casework, and learning stations are functionally designed for use in free play and structured activities; e.g., shelves are deep and open for frequent use of manipulative materials.

(F) Windows, marking boards, sinks, drinking fountains, and furniture are appropriate heights for kindergarten-age students.

(G) Restrooms are self-contained within the classroom or within the kindergarten complex.

(3) Special Education Classrooms and Areas.

(A) A new school designates at least 240 square feet for the resource specialist program and provides additional space in accordance with the allocations in Education Code Section 17747(a)as larger enrollments are being planned.

(B) A new school designates at least 200 square feet for the speech and language program which is close to classrooms when an individualized instruction program is necessary.

(C) A new school designates office area for the psychologist/counseling program which provides for confidentiality and may be shared with other support service programs.

(D) Special day classrooms are at least the same size as regular education classrooms at that site and are properly equipped for the students who will occupy the space, for their age and type of disabling condition.

(E) The square footage allowance in Education Code Section 17747(a) for special day class programs is used for the design of classroom space and other space on the campus to support the special education program. The support space includes but is not limited to speech specialist area, psychologist, counseling offices and conference area.

(F) Special day classrooms are distributed throughout the campus with age appropriate regular education classrooms.

(G) A cluster of two special day classrooms may be considered if support or auxiliary services (e.g., bathrooming, feeding, physical or occupational therapy) are needed to serve the students throughout the school day.

(H) A conference area is available to conduct annual individualized education program meetings for each special education student.

(I) Medical therapy units, if planned for the site, are close to visitor parking areas and accessible after school hours.

(i) Laboratories shall be designed in accordance with the planned curriculum.

(1) Science laboratory:

(A) Size is at least 1300 square feet including storage and teacher preparation area.

(B) Science laboratory design is consistent with the requirements for proper hazardous materials management specified in both the “Science Facilities Design for California Public Schools,” published by the California Department of Education, 1993, and the “Science Safety Handbook for California Public Schools,” published by the California State Department of Education, 1999.

(C) Accommodations are made for necessary safety equipment and storage of supplies; e.g., fire extinguisher, first aid kit, master disconnect valve for gas.

(D) Secured storage areas are provided for volatile, flammable, and corrosive chemicals and cleaning agents.

(E) Properly designated areas are provided with appropriate ventilation for hazardous materials that emit noxious fumes, including a high volume purge system in the event of accidental release of toxic substances which may become airborne.

(F) Exhaust fume hoods, eye washes, deluge showers are provided.

(G) Floor and ceiling ventilation is provided in areas where chemicals are stored.

(H) Room is provided for movement of students around fixed-learning stations.

(I) There is the capability for technology which complements the curriculum.

(J) Classrooms are flexibly designed to insure full student access to laboratory stations and lecture areas.

(2) Consumer Home Economics laboratory:

(A) There is room for movement of students around fixed learning stations.

(B) Cooking equipment reflects current home food preparation practices and/or commercial food preparation simulation.

(C) There is the capability for technology which complements portions of the curriculum, such as fashion design, consumer economics, and nutritional analysis of foods.

(D) There is space for industrial or home sewing equipment consistent with the planned curriculum.

(E) There is storage for student projects and supplies.

(F) Space for work tables is provided for such activities as cutting fabric or completing interior design projects.

(G) Lecture area is provided.

(H) At least 1300 square feet is allocated for each laboratory.

(I) If part of the planned program, space for a child care area or for a laboratory to teach child growth and development is provided.

(3) Industrial and Technology/Education Laboratory:

(A) Room is provided for movement of students around fixed learning stations.

(B) Flexible stations with sufficient outlets and power source for industrial type equipment is provided.

(C) Space is provided for various simulations of job-related experiences and laboratory work stations.

(D) There is capability to utilize technology which complements the curriculum, such as computer-aided graphics, electronics and specialized tools.

(E) There is lecture area within each laboratory or near the laboratory area where appropriate.

(F) There are accommodations for necessary health and safety equipment, such as fire extinguisher and first aid kit.

(G) Secured storage areas for volatile, flammable and corrosive chemicals and cleaning agents are provided where appropriate.

(H) There are properly designated areas with appropriate ventilation for the use of hazardous material that emit noxious fumes or excessive dust particles.

(I) Proper storage and removal access for hazardous waste materials is provided in each laboratory using such materials.

(4) Computer Instructional Support Area:

(A) If a standard classroom is being designated as a computer laboratory, size is at least 960 square feet.

(B) Room is provided for movement of students around learning stations.

(C) Sufficient outlets, power sources, and network links for the amount of equipment are provided.

(D) Proper ventilation is provided.

(E) Room provides for security of equipment.

(F) Lighting minimizes screen glare and eye strain.

(j) Gymnasium, Shower/Locker shall be designed to accommodate multiple use activities in accordance with the planned enrollment:

(1) The gymnasium is secured from other parts of the campus for evening and weekend events or for public use purposes.

(2) The shower/locker area is of sufficient size to allow students enrolled in the physical education program to shower and dress each period.

(3) Toilets are available for the public in facilities intended for shared community use other than in shower/locker areas.

(4) Office space is provided for physical education teachers.

(5) Space is available for specialized age-appropriate physical education activities such as weight lifting, exercise equipment usage, aerobics.

(k) Auxiliary Areas.

(1) Multipurpose/cafeteria area (indoor or outdoor) shall be adequately sized and flexibly designed to protect students from the elements and to allow all students adequate eating time during each lunch period and to accommodate such uses as physical education activities, assemblies, and extracurricular activities:

(A) Tables and benches or seats are designed to maximize space and allow flexibility in the use of the space.

(B) The location is easily accessible for student and community use, but is close to street for delivery truck access.

(C) Stage/platform may have a dividing wall to be used for instructional purposes but is not intended as a classroom.

(D) Area for the cafeteria line is designed for the flow of traffic for each lunch period.

(E) Design of kitchen reflects its planned function; e.g., whether for food preparation or warming only.

(F) Space is available for refrigeration and preparation of foods to accommodate maximum number of students planned for the school.

(G) Office, changing, and restroom area for food preparation staff is available and shall comply with local department of health requirements.

(H) Ceiling height allows for clearance of light fixtures for physical education activities.

(2) Administrative Office.

The administrative office shall have sufficient square footage to accommodate the number of staff for the maximum enrollment planned for the school consistent with the master plan for the school district and shall be designed to efficiently conduct the administrative functions, specifically:

(A) Students have direct confidential access to pupil personnel area.

(B) Counter tops are accessible for an age-appropriate population both at a standing and wheelchair level.

(C) Clerical staff have a clear view of nurse's office.

(D) The nurse's office has a bathroom separate from staff bathroom(s) in administration area.

(E) Space for private conference and waiting area is available.

(F) Capability for such computer networking functions as attendance accounting and communicating to each classroom is considered.

(G) A faculty workroom is available for a staff size proportionate to the student population.

(3) Library/Media Center and Technology.

Library space shall be proportional to the maximum planned school enrollment. The size shall be no less than 960 square feet. However, to allow adaptation for changing technology and communication systems, the following is recommended:

-two square feet per unit of a.d.a. (average daily attendance) for elementary;

-three square feet per unit of a.d.a. for middle or junior high (grades 6-8);

-four square feet per unit of a.d.a. for high school. In addition:

(A) Provide security for technology and media equipment.

(B) Space and capability for computer terminals is considered for student use, research and report writing.

(C) Visual supervision from circulation desk is available to study areas, stack space, and student work centers.

(D) Design for open and closed-circuit television, dedicated phone line, electrical outlets for stand-alone computers, and conduit connecting all instructional areas is considered.

(l ) Lighting.

Light design shall generate an illumination level that provides comfortable and adequate visual conditions in each educational space, specifically:

(1) Ceilings and walls are white or light colored for high reflectance unless function of space dictates otherwise.

(2) Lights do not produce glare or block the line of sight.

(3) Window treatment allows entrance of daylight but does not cause excessive glare or heat gain.

(4) Fixtures provide an even light distribution throughout the learning area.

(5) Light design follows the California Electrical Code found in Part 3 of Title 24 of the California Code of Regulations.

(m) Acoustical.

Hearing conditions shall complement the educational function by good sound control in school buildings, specifically:

(1) The sound-conditioning in a given space is acoustically comfortable to permit instructional activities to take place in this classroom.

(2) Sound is transmitted without interfering with adjoining instructional spaces; e.g., room partitions are acoustically designed to minimize noise.

(3) The ventilation system does not transmit an inordinate sound level to the instructional program.

(n) Plumbing.

Restroom stalls shall be sufficient to accommodate the maximum planned enrollment and shall be located on campus to allow for supervision.

(1) Refer to Part 5, Title 24, of the California Code of Regulations.

(2) Outdoor restrooms having direct outside access are located in areas that are visible from playground and are easily supervised.

(o) Year-Round Education.

If a school is being planned for multitrack year-round operation, additional space shall be provided for associated needs:

(1) Additional space is available for storage of records for staff for all tracks. Additional storage space for the supplies and projects of off-track students is considered.

(2) Storage and planning space is available for off-track teachers or teachers not assigned to a classroom.

(p) American Disabilities Act.

Schools shall comply with standards established by the American Disabilities Act (Public Law 101-336, Title II).

(q) Child Care Programs.

Schools shall comply with the requirements set forth in Education Code Section 39113.5 regarding plans and specifications for new schools being designed to provide appropriate space to accommodate before-school and after-school child care programs.

(r) Exemptions.

At the request of the governing board of a school district, the State Superintendent of Public Instruction may grant exemptions to any of the standards in this section if the district can demonstrate that the educational appropriateness and safety of a school design would not be compromised by an alternative to that standard.

Note: Authority cited: Sections 17251(c) and 33031, Education Code. Reference: Sections 17047(a), 17251(c), 17310, 51210(g), 51220(d) and 51225.3, Education Code.

HISTORY

1. Amendment of section and NOTE filed 9-23-77; effective thirtieth day thereafter (Register 77, No. 39).

2. Amendment of article heading, repealer and adoption of section heading and text, and amendment of Note filed 11-12-93; operative 12-13-93 (Register 93, No. 46).

3. Amendment of subsections (a), (b)-(b)(1), (g)(1)(A), (i)(1)(B), (n)-(n)(1) and (p)-(r), new subsection (i)(4)-(i)(4)(F), and amendment of Note filed 10-30-2000; operative 10-30-2000 pursuant toGovernment Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14030, 5 CA ADC § 14030

**§ 14031. Plan Approval Procedures for State-Funded School Districts.**

(a) Each state-funded school district shall submit preliminary plans following the standards in Section 14030 including site utilization, elevations and floor plan drawings that describe the spaces and give the square footage and educational specifications to the California Department of Education for approval. Prior to preparation of final plans, the school district shall obtain approval of the preliminary plans from the California Department of Education.

(b) Each state-funded school district shall submit final plans including grading, site utilization, elevation, floor, lighting, and mechanical working drawings and any alterations to the educational specifications to the California Department of Education for approval.

(c) Each state-funded school district shall submit the request for exemption from a standard in Section 14030 of this article, with a description of how the educational appropriateness and safety of a school design would not be compromised by deviation from the standard, to the California Department of Education.

(e) Each state-funded school district shall submit a multi-modal circulation and safety plan spanning the entire attendance boundary approved by a traffic engineer representing the Department of Transportation.

Note: Authority cited: Sections 17251(c) and 33031, Education Code. Reference: Sections 17017.5(c) and 17251(c), Education Code.

HISTORY

1. Amendment filed 9-23-77; effective thirtieth day thereafter (Register 77, No. 39).

2. Repealer and adoption of section heading and text, and adoption of Note filed 11-2-93; operative 12-13-93 (Register 93, No. 46).

3. Amendment of section heading, section and Note filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14031, 5 CA ADC § 14031

**§ 14032. Plan Approval for State-Funded School Districts.**

The California Department of Education shall notify the district, the district's architect and the Department of General Services that the preliminary and final plans comply with the standards set forth in Section 14030. Approvals for either preliminary or final plans are in effect for a maximum of two years from the date of signed approval. School districts may request an extension of preliminary or final plan approvals if the time line exceeds one year.

Note: Authority cited: Sections 17251(c) and 33031, Education Code. Reference: Sections 17024, 17070.50 and 17251(c), Education Code.

HISTORY

1. Amendment filed 9-23-77; effective thirtieth day thereafter (Register 77, No. 39).

2. Amendment of section heading and text, and adoption of Note filed 11-12-93; operative 12-13-93 (Register 93, No. 46).

3. Amendment of section heading, section and Note filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14032, 5 CA ADC § 14032

**§ 14033. Applicability of Plan Standards to Locally-Funded School Districts.**

(a) Locally-funded districts shall use the plan standards set forth in Section 14030.

(b) Locally-funded districts may request assistance from the California Department of Education to review plans and specifications for any new school construction or rehabilitation project.

(c) Locally-funded districts need not submit preliminary and final plans to the California Department of Education.

(d) Locally-funded districts shall prepare documentation of and retain for purposes of a complaint investigation the exemption from the standard in Section 14030 of this article, with a description of how the educational appropriateness and safety of a school design would not be compromised by deviation from the standard. Locally-funded districts may request from the California Department of Education a review of the adequacy of the mitigation measure.

(e) Locally-funded districts shall continue to comply fully with the requirements of Article 3 (commencing with Section 17280) and Article 6 (commencing with Section 17365) of Chapter 2, Part 23 of the Education Code (The Field Act) and submit all plans and specifications to the Department of General Services, Office of the State Architect for review and approval prior to executing a contract for the construction or alteration of a public school building or expending any public funds for such a project.

Note: Authority cited: Sections 17251(c) and (d) and 33031, Education Code. Reference: Sections 17251(d), 17280 and 17365, Education Code.

HISTORY

1. Renumbering of former section 10433 to section 14035 and new section filed 11-12-93; operative 12-13-93 (Register 93, No. 46).

2. Repealer of former section 14033 and renumbering of former section 14034 to new section 14033, including amendment of section heading, section and Note, filed 10-30-2000; operative 10-30-2000 pursuant to Government Code section 11343.4(d) (Register 2000, No. 44).

5 CCR § 14033, 5 CA ADC § 14033

Appendix A
Site Selection Process

When a school district is planning to acquire a site for a school, it must take various factors into consideration. The School Facilities Planning Division has developed three work sheets to assist the district in assessing potential sites and making preliminary selections. The work sheets, which are included in this appendix, outline a set of 12 primary criteria governing school site selection and consists of three components: Site Selection Criteria, Site Selection Evaluation, and a Comparative Evaluation of Candidate Sites. These components allow for a comprehensive examination of sites to determine strengths and weaknesses (Site Selection Criteria); a ranking of each site (Site Selection Evaluation); and finally, a comparison of sites by the rating factors and total scoring (Comparative Evaluation of Candidate Sites). The criteria are consistent with the California *Education Code*, *California Code of Regulations*, *Title 5*, California *Public Resources Code*, and the California Department of Education policies and guidelines.

Although these standards are not the sole criteria to be considered by a school district's site selection committee, the committee may find them useful in evaluating various sites, identifying at least three acceptable sites from which a final choice can be made, and, eventually, explaining the site selection process to interested entities.

Each primary element listed on the Site Selection Criteria work sheet contains secondary measures that provide the committee the opportunity to apply a specific set of guidelines to each potential site and aid in the analysis of a site. The secondary criteria may also be used by the committee to understand better the types of data needed in identifications, selection, and final acquisition of a school site. After considering both primary and secondary standards on the work sheet, the committee should rank the sites in order of acceptability by completing the second and third work sheets.

June 1998

# California Department of Education
# Site Selection Criteria

*Part 1*

| | | |
|---|---|---|
| **Site Identification** | | **Grade Level** |
| **Location** | **Gross Acres** | **Estimated Value** |

| **Safety** *(These factors must be avoided.)* | **OK** | **Potential Problem** |
|---|---|---|
| Adjacent to or near roadways with a high speed or volume [Speed is a greater threat to student safety than volume. School sites are inherently subject to substantial volumes of traffic. It is the speed of that traffic that must be addressed. (as reflected in the establishment of school zones in the statutes) of traffic with no separated, non-motorized facilities. | | |
| Within 1,500 feet of railroad tracks | | |
| Within two miles of an airport runway | | |
| Close to high-voltage power lines | | |
| Close to high-pressure lines, for example natural gas, gasoline sewer or water lines | | |
| Contaminants/toxics in the soil or groundwater, such as from landfills, dumps, chemical plants, refineries, fuel tanks, nuclear plants, or agricultural use of pesticides or fertilizer, etc.* | | |
| Close to high decibel noise sources | | |
| Close to open-pit mining | | |
| On or near a fault zone or active fault | | |

| | | |
|---|---|---|
| **Location** | | |
| ~~Safe walking areas~~ Adequate infrastructure, consistent with state and local complete streets policies, ensuring non-motorized access throughout the school attendance boundary. | | |
| ~~Centrally located to avoid extensive transporting and~~ Closely integrated with the transportation network of the attendance boundary of the school to minimize and increase the safety of student travel ~~distance~~ | | |
| Compatible with current and probable future zoning regulations including Urban Limit Lines/Urban Growth Boundaries. | | |
| Close to, and integrated with libraries, parks, museums, and other community services | | |
| -Favorable orientation to wind and natural light | | |
| **Environment** | | |
| Located so as to make active transportation/school access attractive and possible. | | |
| Free from sources of noise that may impede the instructional process | | |
| Free from air, water and soil pollution | | |
| Free from smoke, dust, odors, and pesticide spray | | |
| Provides aesthetic view from and of the site | | |
| Compatible with the educational program | | |
| **Soils** | | |
| Proximity to faults or fault traces Stable subsurface and bearing capacity Danger of slides or liquefaction Percolation for septic system and drainage Adequate water table level | | |
| Existing land fill is reasonably well compacted | | |
| ***Note:*** *A geological hazard report must be conducted to determine soil and seismic conditions.* | | |

| **Topography** | **OK** | **Potential Problem** |
|---|---|---|
| Feasibility of mitigating steep grades | | |
| Rock ledges or outcroppings | | |
| Surface and subsurface drainage | | |
| Level area for playfields | | |
| **Size and Shape** | | |
| Net acreage consistent with standards of California Department of Education as noted in "School Site Analysis and Development" | | |
| Length-to-width ratio does not exceed 2:1 | | |
| Sufficient open play area and open space | | |
| Potential for expansion for future needs | | |
| Area for adequate and separate bus loading and parking | | |
| Safe, adequate, bicycle parking proximate/convenient to classrooms. | | |
| **Accessibility** | | |
| Obstacles such as crossings on major streets and intersections, narrow or winding streets, heavy traffic patterns | | |
| Access and dispersal roads | | |
| Natural obstacles such as grades or gullies | | |
| Freeway access for bus transportation | | |
| Routing patterns for ~~foot~~ non-motorized | | |
| traffic | | |
| Remote areas (with no sidewalks) where students walk to and from school | | |
| Easily reachable by emergency response vehicles | | |
| Non-motorized infrastructure throughout the attendance boundary consistent with state and local Complete Streets policies. | | |
| **Public Services** | | |
| Fire and police protection, including firelines | | |
| Available public transportation | | |
| Trash and garbage disposal | | |
| **Utilities** | | |
| Availability of water, electricity, gas, sewer | | |
| Feasibility of bringing utilities to site at reasonable cost | | |
| Restrictions on right of way | | |
| **Cost** | | |
| Full-cost accounting identifies capital, operating/maintenance costs for outside agencies. | | |
| Reasonable costs for purchase of property, severance damages, relocation of residents and businesses, and legal fees | | |
| Reasonable costs for site preparation including, but not limited to, drainage, parking, driveways, removal of existing buildings, and grading | | |

| **Availability** | **OK** | **Potential** |
|---|---|---|
| On the market for sale | | |
| Title clearance | | |
| Condemnation of buildings and relocation of residents | | |
| **Public Acceptance** | | |
| Public acceptance of the proposed site | | |
| Receptivity of city or county planning | | |
| commission Zoned for prime | | |
| agriculture or industrial use Negative | | |
| environmental impact report | | |
| Coordination and consistency of proposed school with future community plans | | |
| **Comments:** | | |

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services

Date: May 22, 2018

Subject: 2018-19 Employment & Human Services Community Services Bureau Planning Calendar

**RECOMMENDATION(S):**
ACCEPT Employment & Human Services Department Community Services Bureau 2018-2019 Planning Calendar, as approved by the Head Start Policy Council and recommended by the Employment and Human Services Director.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
Head Start Performance Standard 1302.101 Management System mandates that the Head Start grantee develop a plan for program operations and that this plan be reviewed and approved by the Head Start governing body. The Board of Supervisors is Contra Costa County Head Start's governing body.

This board order accepts the 2018-19 planning calendar for the Community Services Bureau, covering milestones for various Head Start and Community Action programs for the year. The planning calendar will be approved by the Head Start Policy Council on May 16, 2018.

**CONSEQUENCE OF NEGATIVE ACTION:**
If not accepted, Department will not be in compliance with Head Start regulations.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: CSB (925) 681-6389

**cc:** Nasim Eghlima, Christina Reich

CHILDREN'S IMPACT STATEMENT:

The Employment and Human Services Department Community Services Bureau supports three of Contra Costa County's community outcomes - Outcome 1: Children Ready for and Succeeding in School, Outcome 3: Families that are Economically Self-Sufficient, and Outcome 4: Families that are Safe, Stable, and Nurturing. These outcomes are achieved by offering comprehensive services, including high quality early childhood education, nutrition, and health services to low-income children throughout Contra Costa County.

ATTACHMENTS

Planning Calendar

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **BOARD OF SUPERVISORS** | | | | | | | | | | | |
| **Communication** | Camilla | | | | Schedule & Conduct Annual BOS Meetings | | | | | Attend BOS Meeting for PD/PY Layoffs | WOTYC BOS Proclamation |
| | | | | | FHS Committee Presentation | | | | | | Invite Board Members to Centers for Week of the Young Child |
| **Reports** | Monique | Monthly Report to BOS/CAO | | | | | | | | | |
| **BUSINESS SYSTEMS** | | | | | | | | | | | |
| **E-Rate** | Sung | | E-Rate BEAR (Billed Entity Applicant Reimbursement) /472 | | | E-Rate RFI | E-Rate Form 470 | E-Rate Form 471 | | USAC PIA Review | E-Rate/USAC PIA Review |
| | | | Invoicing USAC/Service Provider for Reimbursement | | | RFI for Next Year's Technology Needs | RFI for Tele-Communication/Internet/Internal Connection | | Action: BOS Approval for Incoming Funds | Review Prior Years E-Rate Form 471 Grant Application | E-Rate Form 486 |
| | | | | | | | | USAC Conference | | | |
| **CLOUDS** | Sung | | | CLOUDS User Group Meeting | CLOUDS Staff Training | CLOUDS User Conference | | | Review Contract by County Counsel<br><br>CLOUDS User Group Meeting | | CLOUDS Staff Training |
| **Facilities/Center Health and Safety** | Sung | Quarterly Deep Cleaning EHS & Kitchen | Annual Deep Cleaning HS | Certification for Playground Safety Inspector (Expires Every 4 Years) | Quarterly Deep Cleaning EHS & Kitchen | | | Quarterly Deep Cleaning EHS & Kitchen | | | Quarterly Deep Cleaning EHS & Kitchen |
| | | Health & Safety Officer Committee Meeting | | | Health & Safety Officer Committee Meeting | | | Health & Safety Officer Committee Meeting | | | Health & Safety Officer Committee Meeting |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | Emergency Preparedness Training and Great Shake Out Statewide Earthquake Drill | | | | | | |
| **COMMUNICATION** | | | | | | | | | | | |
| **Families** | Katharine | | | Community Work Days | | | | | | Community Work Days | |
| | | | | | Quarterly Family Newsletter | | | Quarterly Family Newsletter | | Family Handbook Updates (Every 2 years, 2017-2019) | |
| | | Monthly Early Closure Letters | Back to School Nights | | | | | | | Part-Day Closure Letters to Families | Year-end celebrations |
| | | Monthly Parent Meetings | | PD/PY Calendar Given to Families | | | PD/PY 1 Week Winter Break | | | PD/PY 1 Week Spring Break (Alligned with Local School Districts) | |
| | Pam | Provide Family Handbooks to Families | | Pedestrian Safety Training Required | | | | Begin Kindergarten Transitions/ Training | | | Child Abuse/DV Prevention Training Required |
| **Staff** | Camilla | | | Vacation Request due for 4th Quarter | | | Vacation Request Due for 1st Quarter | | | Vacation Request Due for 2nd Quarter | |
| | | Update external calendar meetings | Quarterly Staff Newsletter | SAM Quarterly Report | | Quarterly Staff Newsletter | SAM Quarterly Report | | Quarterly Staff Newsletter | SAM Quarterly Report | |
| | Katharine | Monthly Cluster meetings | Bi-monthly All-Cluster meetings | | Bi-monthly All-Cluster meetings | | Bi-monthly All-Cluster meetings | | Bi-monthly All-Cluster meetings | | Bi-monthly All-Cluster meetings |
| **Regional Office (RO)** | Katharine | Monthly Calls with the RO | | School Readiness (SR) Visit for RO | | | | | | | School Readiness (SR) visit for RO |
| | | | | Child Outcomes Year-End Report to RO via CAO report | | | | | | Child Outcomes Year-End Report to RO via CAO report | |
| **COMMUNITY ASSESSMENT** | | | | | | | | | | | |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Community Assessment 2017-2021 Major Update Every 5 years** | Nelly | Prepare Community Assessment Updates Narrative for Continuation Grant | | Submit Executive Summary with HS/EHS Continuation Grant | | | | Researching Community Assessment Updates | | | Finalize Community Assessment |
| **COMMUNITY ENGAGEMENT** | | | | | | | | | | | |
| **Give Kids a Smile Day** | Pam | | | | | | Give Kids a Smile Day (GKSD) - Planning Meetings with Contra Costa Dental Society, Children's Oral Health Program | Give Kids a Smile Day Preparation and Implementation of GKSD Plan Every Day in Month of January | Give Kids a Smile Day Event- February 1, 2019 (1st Friday of the Month of February) | Give Kids a Smile Day Post Meeting | |
| **Healthy and Active Lifestyle** | Isabel | | | | National Food Day - October 24th | | | | "Pride in Food Service Week" -- First week in February | National Nutrition Month | Annual California Dietetic Association Meeting & Exhibition |
| **Family Engagement** | Pam | Monthly Parent Meetings / Trainings | | | Fall Harvest Festivals | | | | Collect WOTYC Plans for Centers | | WOTYC Celebrations |
| | | | | Back to School Night | | | | | | Open House | |
| | | | | | | EHS PFCE Prep/Planning Home Family Activities to support SR PFCE Goals | | EHS PFCE Home Family Activities to support SR PFCE Goals | EHS PFCE Home Family Activities to support SR PFCE Goals | EHS PFCE Home Family Activities to support SR PFCE Goals | EHS PFCE Home Family Activities to support SR PFCE Goals |
| | | | | | | HS PFCE Prep/Planning Home Family Activities to support SR PFCE Goals | | HS PFCE Home Family Activities to support SR PFCE Goals | HS PFCE Home Family Activities to support SR PFCE Goals | HS PFCE Home Family Activities to support SR PFCE Goals | HS PFCE Home Family Activities to support SR PFCE Goals |
| | Debi & Sophia | | | | Health & Nutrition Services Advisory Committee Meeting | | | | | | Health & Nutrition Services Advisory Committee Meeting |
| | Ron | | | | Prep/planning Take Home Activities | | EHS: Take home family activities | EHS: Take home family activities | EHS: Take home family activities | EHS: Take home family activities | EHS: Take home family activities |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Amy | | | | Prep/planning Take Home Activities | | HS: Take home family activities | HS: Take home family activities | HS: Take home family activities | HS: Take home family activities | HS: Take home family activities |
| | Pam | | | Make Parenting A Pleasure Curriculum (Month Sept-June) | | | | | | | |
| | | | Family Financial Fitness Workshops | | | | | Family Financial Fitness Workshops | | | |
| | | | ESL Classes at GMC | | | | | | | ESL Classes at GMC | |
| | | Itsy Bitsy Read and Parent Power Reading Workshops (year round) | | | | | | | | | Collect Year-End Celebration Plans for the Center |
| | | | Male Involvement Quarterly Event | | | Male Involvement Quarterly Event | | | Male Involvement Quarterly Event | | |
| **COMMUNITY SERVICES BLOCK GRANT** | | | | | | | | | | | |
| **CSD Meetings and Trainings** | Christina | | 2018 CAP Annual Convention-Denver, Colorado | | | | | | | | |
| | | | Quarterly CAC Meeting | | | Quarterly CAC Meeting | | | Quarterly CAC Meeting | | |
| **EOC Meetings/Events** | Christina | Monthly: EOC Business Meeting | | Annual Orientation of New EOC Members Brown Act/Ethics Training Certificate Due to the Clerk of BOS | | | | | | EOC Staff Present 2019 Legislative Platform Adopted by BOS to EOC | Subcommittee Begin Preparation for the May Community Action Month EOC Outreach Event |
| | | | | Election of EOC Executive Committee Officers | | | Present the 2018 Board of Supervisors Annual Report to EOC | | | Collect Form 700 from Members and Staff | Strategic Plan Retreat<br>Form 700 due to Clerk of BOS |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Subcontractors** | Christina | EOC Members Begin 2018 Subcontractor Onsite Monitoring | | | EOC RFI Process for 2019 CSBG Contracts | EOC Subcommitte to Review CSBG Proposals for 2019 Subcontractor Contracts | 2019 Awawrded Subcontractors and CSBG Budget presented to the EOC | | | Annual CSBG Roundtable | |
| **Reporting/Audits** | Christina | 20th: Bi-Monthly Expenditure Due to CSD (May & June) | | 20th: Bi-Monthly Expenditure Due to CSD (Jul & Aug) | Year-End Budget Modification Developed w/Fiscal Subcommittee to CSD | 20th: Bi-Monthly Expenditure Due to CSD (Sept & Oct) | | 20th: Bi-Monthly Expenditure Due to CSD (Nov & Dec 2018) | 20th: Annual Programmatic Reports due: CSD 801 NPI, CSD 295-CCR Due | 20th: Bi-Monthly Expenditure Due to CSD (Jan &Feb 2019) | |
| | | | Organizational Standards reviewed by CSD | | CSBG Annual site Visit/Audit by CSD | 15th: Last day to Submit Budget Modification to CSD (If necessary) | Action: Submit 2018 EOC Annual Report to the BOS | | 1st: CSBG Information System (IS) Report due to CSD (Jan-Dec 2018) | | |
| **CONTRACTS** | | | | | | | | | | | |
| **EESD Contracts** | Nelly | | | | Management Bulletin for CDE Refunding Application | | Application Due for CDE Refunding Application For Next Fiscal Year | | | | Draft Self-Evalua |
| | | | | | | | | Prepare, Distribute and Collect Parent Survey for Alternative Payment Programs | | Compile AP Parent Surveys | |
| | Janissa | Begin Screenings and DRDP Assessments | | | | Complete ECERS/ITERS by 11/30 | Complete DRDP Summary of Findings by 12/30 | Prepare, Distribute and Conduct DRDP Parent Survey for Center Based Programs | | Compile DRDP Parent Surveys by Contract | Complete Agency Summary of Findings |
| **LIHEAP/DOE** | Sung | | Begin LIHEAP Contract with CSD for PY 2018 | End of PY LIHEAP Contract | | | | | | | |
| | | | Begin on DOE Contract with CSD for PY 2017 | End of PY DOE Contract | | | | | | | |
| **CSBG** | Christina | | | | Begin Request for Information (RFI) for CSBG Contract w/ CSD for PY 2019 | RFI Information session for potential subcontractors | Begin executing 2019 CSBG contracts | | | | |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Partnerships** | Nasim | CACFP Contract | Begin Contract Renewals for Contracts Due in November | | Begin Contract Renewals for Contracts Due in December and January | Action: BOS Approval of All Contracts | | | | Begin Contract Renewals for Contracts Due in July (Pending Slots) | |
| **ELIGIBILITY, RECRUITMENT, SELECTION, ENROLLMENT, AND ATTENDANCE (ERSEA)** | | | | | | | | | | | |
| **Eligibility/ Enrollment** | Sarah | Monthly Enrollment Report Due to HSES by the 7th & Purge Protocol Completed by the 5th | | Weekly 30-day Full Enrollment Checks and Reports | | | | | New Federal Income Guidelines Issued | | |
| | | CS Desk Guide and Forms review (Every 2 years - 2017) | | PD/PY Classes Begin | | | | | | | |
| **Recruitment** | Sarah | | | | | | | Review/ Revise Recruitment Materials | Begin Major Recruitment Drive | | Continue Recr |
| | | Monthly - Purge Waitlist | | | | | | | | Submit Request for Flyers to be Mailed with Public Benefit Quarterly Reports | |
| **Selection** | Sarah | | | | | Hold Selection Criteria Meeting with Staff, Parents, and Program Services Subcommittee | | Action: PC Approves Selection Criteria and Recruitment Plan | Action: BOS Approves Selection Criteria and Recruitment Plan | Establish Procedure and Timelines for Rollover | |
| **Attandance & Planning** | Sarah | Monthly Attandance Report for BOS/PC | | | | | | | | Slot Planning for Next PY | |
| **FISCAL** | | | | | | | | | | | |
| **Reports** | Eric | CDE 4th Quarterly Report Due | Operating Information in the Comprehensive Annual Financial | Budget Input in HSES Due to ACF for Next PY | CDE 1st Quarterly Report Due | Audit Report Due to State (CDE) by November 15th | County Single Audit begins | CDE 2nd Quarterly Report Due | Baseline Budget (BFM) and Budget Narrative Due | Countuy Performance Report Due | CDE 3rd Quarterly Report Due |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Fiscal Reports to PC & BOS | County Year-End Close-Out Continues: Submission of Journals, Accruals, and Deferrals to Auditor's Office | Complete Risk Assessment for Each Subrecipient | Child Development Audit Begins | Single Audit Certification of Subrecipients | Cut-off for Encumbrance of HS/EHS 2017 Funds | Personnel Cost Forcasting (PCF) Report due | | Site Review of Delegate Agency Due | Final financial Status Report SF-425 Due to ACF |
| | | Stage 2 & CAPP Reports Due to CDE (20th of each month) | CSBG Report Due to CSD (bi-monthly due on the 20th) | | CSBG Report Due to CSD (bi-monthly due on the 20th) | | CSBG Report Due to CSD (bi-monthly due on the 20th) | Mid-year Projections Due to CAO | CSBG Report Due to CSD (bi-monthly due on the 20th) | CSBG IS Form Due 3/1 | CSBG Report Due to CSD (bi-monthly due on the 20th) |
| | | County Year-End Close-Out Begins: Cut Off for Encumbrances Adjustment Deposit Permit | | | | | | Annual Financial Status Report SF-425 Due to ACF | | | |
| | | Semi-Annual Financial Status Report SF-425 Due to ACF | | | | | | Head Start & Early Head Start Fiscal Year Begins | | | |
| **Budgets** | Eric | State/County Fiscal Year Begins July 1st | | Schedule of Expenditures of Federal Awards Due to Auditor Controller's Office | | | Indirect Cost Rate Proposal Due to US Dept. of Health & Human Services | Current Year's Budget Adjustments Due to Auditor Controller's Office | | | Subrecipient & Contractor Determination Checklist |
| | | CACFP CMIPS Submitted | Finalize 2018 Operational and T & TA Budget for HS/EHS; 2018 Budget for PC Discussion and Approval | | | | Mid-year Appropriation Adjustments | | Mandatory & Discretionary List to CAO | | |
| **GRANTS** | | | | | | | | | | | |
| **HS/EHS Grants (09CH9115)** | Nasim | Conduct Grant Writing Process with Assigned Team Members (Including: Goals & Objectives) | | Action: Request PC Approval for Submission of Full HS & EHS Grants, Budgets and Goals & Objectives. Action: Upload Grants Through HSES | Present Grant Cycle Process Overview to PC at Orientation | | | | | | Develop Grant Timeline in Conjunction with PC/BOS Meeting Dates for Approval Requests |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **HS/EHS Grants (09CH9115) (cont'd)** | | Program G/O Updates Semi-Annual Report Disseminated to Staff, Department Director, PC, and BOS | | | | | | Program G/O Updates Semi-Annual Report Disseminated to Staff, Department Director, PC, and BOS | | | |
| **HS/EHS Grants (09CH9115) (cont'd)** | Haydee | SF-425 Semi-annual report due to ACF | | Action: Upload Budget by object total and justification thru HSES | | | | SF-425 Annual Report due to ACF | | | SF-425 Final Report due to ACF |
| **EHS-CCP Grant #1 (09HP0012)** | Haydee | SF-425 Annual report due to ACF | | | SF-425 Final Report due to ACF | | | Receive Funding Guidance Letter<br><br>SF-425 Semi-annual report due to ACF | | Get PC/BOS Approvals | Due April 1<br><br>Action: Upload Budget by object total and justification thru HSES |
| **EHS-CCP Grant #2 (09HP000111)** | Haydee | SF-425 Final Report due to ACF | | Receive funding guidance letter | SF-425 Semi-annual report due to ACF | Get PC/BOS approval | Due Dec. 1<br><br>Action: Upload Budget by object total and justification thru HSES | | | | SF-425 Annual report due to ACF |
| **HUMAN RESOURCES** | | | | | | | | | | | |
| **Tracking** | Reni | Monthly Personnel Tracking reports | | General HIPAA Awareness Training (upon hire and bi-annual for applicable staff) | | | | | | | |
| | | Permit expiration notices to staff | | | | | Permit expiration notices to staff | | Permit expiration notices to staff | | |
| **Monitoring** | Reni | Ongoing Personnel File Monitoring including partners | | | | | | | | | |
| | | Performance Review notices | | Performance Review notices | | Performance Review notices | Positions Control Review | Performance Review notices | | Performance Review notices | |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Monitor transcripts TAT | | | | Monitor transcripts TAT | | | | | |
| **PD/PY** | Reni | Return-To-Work Letter to Laid off PD/PY staff (August 1st) | PD/PY Employees return | | | | | | | Action: Board Order to Layoff PD/PY Staff | Action: PD/PY layoff approval by PC |
| | | | | | | | | | | | Notice of Proposed Action for Layoff |
| | | | | | | | | | | | Notice of Action for Layoff |
| **Reporting** | Reni | Program Information Report | | LIC 500 to Licensing | | | LIC 500 to Licensing | Risk Management Loss Control Report - Share w/Senior Mgmt. | OSHA Reports posting at all sites | LIC 500 to Licensing | Remove OSHA Reports posting from sites |
| **Required Training** | Reni | Ongoing Sexual Harassment Awareness Training (line staff every 3 years and supervisor every 2 years) | National Voter Registration Act Training (Annually July/Aug.) | CSB Policies and Procedures Review by all staff | Chronological Supervision & Progressive Discipline Training | Preventive Health & Safety (EMSA) (At time of hire once or twice per year) | | CSB Protocol for Hourly Head Count and Transition training for staff | Civil Rights Training (Every 2 years Jan./Feb.) | | Child Abuse & Domestic Violence Awareness Training-At time of hire |
| | | Ongoing new employee orientation | Licensing Orientation (At time of hire for SS) | First Aid CPR (Every 2 years ongoing) | Integrated Pest Management Training (Annually Sept./Oct.) | Mandated Reporter (At time of hire)-EHSD | | CSB Standards of Conduct | | | |
| **Labor** | Reni | Local 1 presentation at NEO (monthly) | | CSB/Local One Informational meeting | | | | | | Meet & Confer Layoff PD/PY Staff<br>Warning Letter to Layoff PD/PY staff | |
| **Recruitment** | Reni | Ongoing recruitment at One-Stops and Community Fairs | | | Career Intro Career Fair | | | | | Recruitment CSU East Bay job fair | Recruitment CCC & Mills College and DVC job fair |
| | | | | | | | | | | | |
| **LEGISLATION** | | | | | | | | | | | |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Legislation** | Nasim | Quarterly Report at Senior Management Meeting | | | Quarterly Report at Senior Management Meeting | | | Quarterly Report at Senior Management Meeting | | Report on Federal Budget | Quarterly Report at Senior Management Meeting |
| **LOW INCOME HOME ENERGY ASSISTANCE PROGRAM/DEPARTMENT OF ENERGY** | | | | | | | | | | | |
| **Monitoring/Review** | Nelly | Monthly Quality Control Review with DCD (3rd Thursday) | | CSD Console Bi-Annual On-Site Monitoring Visit | | | | | | CSD Console Bi-Annual On-Site Monitoring Visit | |
| | | Monthly Quality Control Review of Utility Assistance | | | | | | | | | |
| **Meetings/Conferences** | Nelly | Monthly Utility Assistance Meeting | | Quarterly Local Service Provider Meeting | | | Quarterly Local Service Provider Meeting | | | Quarterly Local Service Provider Meeting | |
| **Meetings/Conferences (cont'd)** | | Monthly LIHEAP/DOE Meeting with DCD | | | | | | | | | |
| **Reports** | Sam/Sung | 15th: EARS Monthly Report | | | | | | | | | |
| **ON-GOING MONITORING** | | | | | | | | | | | |
| **Monitoring** | Nelly | | 1st Period Monitoring Begins: Center, Education, N&E, and CS | | CLASS Monitoring | | | 2nd Period Monitoring Begins: Center, Education, N&E, and CS | | CLASS Monitoring | |
| | | | | Semi-Annual Child Safety Checklist | | | | | | Semi-Annual Child Safety Checklist | |
| **Reports** | Nelly | | Present 2nd Period Semi-Annual Report to PC Ongoing Monitoring Subcommittee, PC, CAO, ACF, Senior Managers, Site Supervisors, CS Managers, Partners, and Staff | Root Cause Analysis | | | | | Present 1st Period Semi-Annual Report to PC On-going Monitoring Subcommittee, PC, CAO, ACF, Senior Managers, Site Supervisors, CS Managers, Partners, and Staff | Root Cause Analysis | |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |
| **PARTNERSHIPS - CHILD CARE** | | | | | | | | | | | |
| **Communication** | Magda | | | Quarterly Grantee and Delegate Meeting | Annual Partner Director Meeting | Community Based Partnerships MOU Status Check | Quarterly Grantee and Delegate Meeting | | | Quarterly Grantee and Delegate Meeting | |
| | | Bi-monthly CSB and Partner Education Cluster Meeting | | Pedestrian Safety Training Required<br><br>Bi-monthly CSB and Partner Education Cluster Meeting | | Bi-monthly CSB and Partner Education Cluster Meeting | | Begin Kindergarten Transitions/ Trainings<br><br>Bi-monthly CSB and Partner Education Cluster Meeting | | Bi-monthly CSB and Partner Education Cluster Meeting | Child Abuse/DV Prevention Training Required |
| **PLANNING** | | | | | | | | | | | |
| **Strategic Planning** | Camilla | Revisit 2016-2018 Strategic Initiatives | | Finalize Strategic Plan, Changes Including Timeline, Outcomes, and Measurements | | | | Strategic Plan Updates to Staff and PC | | | Report Progress on CSB Strategic Plan |
| **Planning Calendar** | Nasim | | | | | | Request Planning Calendar Updates from Senior Management leads (As Assigned/Up-Date assignments) | Leads Review and Update Sections | | Send to SAM for Review by the 15th | Present Planning Calendar to PC Program Services Subcommittee |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Policies & Procedures** Bi-annually (2017-18) | Nasim | Distribute Hard Copies to Centers/ Administrative Offices. Post on the Intranet. Conduct Annual Staff Training on Service Plans and P&P's | | | | | | | Distribute Assignments to Senior Managers/CS Managers Review Team | Senior Managers/ Managers Send Updates to the Analyst | Analyst Gets SAM Approval |
| **POLICY COUNCIL** | | | | | | | | | | | |
| **PC Meetings and Trainings** | Pam | | Recognition of Outgoing PC Members | PC Orientation (off-site) on Saturday September (TBD) and Election of New PC Executive Committee | | PC/BOS Joint Training ( First Wenesday of November) | Ethics/Brown Act Video Training Due | | | | |
| | | Monthly PC Meeting (except July and December) | | | | Make-Up PC Orientation | Monthly PC Meeting (except July and December) | Facilitative Leadership Training | | | |
| | | Monthly Subcommittee Meetings (except July and December) | | | Begin Recruitment for Subcommittee | Finalize Subcommittees | | Monthly Subcommittee Meetings (except July and December) | | | |
| **RECORD KEEPING & REPORTING** | | | | | | | | | | | |
| **Annual Report** | Nasim | Disseminate/Distribute Annual Report to Public and Staff | | | | | | | | Begin Annual Report Process and Gather Content from Sr. Mgrs. and CSMs | Finalize Annual Report /Annual Report Final Approval from SAM |
| **Program Information Report** | Sarah | Quarterly Meeting CSB & FBHS | Upload PIR by August 31st | Submit to BOS in CAO Report; Present at SAM, Sr. Mgmt. & Cluster Mgmts.. | Quarterly Meeting CSB & FBHS | Present to PC | | Quarterly Meeting CSB & FBHS | | | Quarterly Meeting CSB & FBHS |
| **Equipment and Files** | Carlos | Annual County Equipment Inventory Report Confirmation | | Program Year prior to Last Program Year Drop Files to Warehouse for Storage | | | | | | | |
| | | Prior Program Year Archived Files Stored at Sites for One Year | | | | | | | | | |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **SCHOOL READINESS (SR)** | | | | | | | | | | | |
| **Reports** | Janissa | | | Present Final Update of SR Goals from Previous Year to PC Program Svs subcomm., PC, BOS, Sr Mgmt., staff<br><br>Final DRDP Outcomes Report to PC Program Svs subcomm., PC, BOS, Sr Mgmt., & staff | | Present Baseline SR goals to PC Prog Svs Subcommittee, PC, BOS, SR.Mgmt. & staff<br><br>First DRDP Outcomes Report for Current Program Year to PC Prog Svs subcomm., PC, BOS, & Sr Mgmt. | | | | | Present Mid-Year SR Updates to PC prog Svs Subcomm., PC, BOS, Sr Mgmt., and staff<br><br>2nd DRDP Outcomes Report to PC prog Svs Subcomm., PC, BOS & Sr Mgmt. |
| **Transitions: Into, Throughout & Out of Program** | Janissa | In-Service for FD/FY Teachers Education P&Ps | In-Service for PD/PY Teachers | | | | | Kinder-Readiness Activities: Parent Meetings, RMTK | Kinder-Readiness Registration Information to Parents and Visits to Kinder Classes | | Prepare Kindergarten Transition Packets |
| | Isabel & Ron | | | | PITC Training for EHS staff | | PITC Training for EHS staff | | PITC Training for EHS staff | | PITC Training for EHS staff |
| **SELF ASSESSMENT** | | | | | | | | | | | |
| **Self Assessment Activities** | Nasim | | | | Recruit PC Self-Assessment Sub-Committee | Begin Self-Assessment Process Planning | | Identify Sites and Classrooms for Self-Assessment and Instruments | Conduct Self-Assessment (CSB/FBHS) | Action: Submit Final Report and Obtain Approval of Corrective Action Plans as Necessary (ACF/PC/BOS/CSB Director) | |
| **Self Assessment Activities (cont'd)** | | | | | | Present Process to PC and Broaden Subcommittee Membership | | Develop Self-Assessment Schedule and Send Out Notification | | | |

# 2018-19 CSB Planning Calendar

| ACTIVITY | SPONSOR | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | JANUARY | FEBRUARY | MARCH | APRIL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | Form Self-Assessment Teams for Review at CSB and Delegate Agency Sites | | | |
| | | | | | | | | Train Community Volunteers/PC Subcommittee Members | | | |
| **CALWORKS STAGE 2/ALTERNATIVE PAYMENT PROGRAM** | | | | | | | | | | | |
| **Families** | Nelly | | | | | | | | | | Review and Update St Hand |
| **Monitoring/Reports** | Nelly | Quarterly File Monitoring Due | Fiscal Audit | | Quarterly File Monitoring Due | | | Quarterly File Monitoring Due | | | Quarterly File Monitoring Due |
| **Meetings/Conferences** | Nelly | Monthly CSAM & Unit Meetings | | | CAPPA Annual Conference | | | | | | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | |
| Community Action Month BOS Proclamation | |
| | |
| | |
| | |
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| | |
| | |
| | CLOUDS Renewal<br><br>CLOUDS User Group Meeting |
| | |
| | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | |
| | |
| Quarterly Family Newsletter | |
| | |
| | |
| | |
| | Vacation Request due for 3rd Quarter |
| Quarterly Staff Newsletter | SAM Quarterly Report |
| | Bi-monthly All-Cluster meetings |
| 24 Class Waiver Letter Renewal | |
| | Child Outcomes Year-End Report to RO via CAO report |

2018-19 Planning Calendar for Community Services Bureau
Approved by Policy Council -
Approved by Board of Supervisor -

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | **Action:** Present Community Assessment Executive Summary Report for PC, BOS, and Staff |
| | |
| | |
| | National Fruit and Veggie Day (June 17th is Eat All Your Veggies Day) |
| | |
| | |
| EHS PFCE Home Family Activities to support SR PFCE Goals | |
| HS PFCE Home Family Activities to support SR PFCE Goals | |
| | |
| EHS: Take home family activities | EHS: Take home family activities |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| HS: Take home family activities | HS: Take home family activities |
| | |
| Year-End Celebrations | |
| | |
| | |
| Male Involvement Quarterly Event | |
| | |
| | |
| Quarterly CAC Meeting | |
| Community Action Month: EOC Outreach Event | |
| | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | |
| 20th: Bi-Monthly Expenditure Due to CSD (Mar & Apr) | |
| 31st: 2018 CSBG Close Out Report Due to CSD | |
| | |
| tion Action Plan | Submit Self-Evaluation to CDE on June 1st. |
| | |
| Review Parent Survey Results & Share with Senior Mgmt. BOS, and PC. Submit Report to Analyst. | |
| | |
| | |
| | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | |
| | |
| PD/PY Classes End | |
| Eligibility & Enrollment Clinics | |
| uitment Drive | |
| | |
| | Purge Over-Income Waiver List |
| Slots Map Finalized for Next PY and Distribute | |
| | |
| Report the Results of Prior Year Single Audit to PC | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | |
| | CSBG Report Due to CSD (bi-monthly due on the 20th) |
| | |
| | |
| | State/County Fiscal Year Ends June 30th |
| | Year-end Appropriation Adjustments |
| | |
| Present to PC: Review of Continuation Grant Cycle and PC Involvement | Share Grantee Timeline Tasks with Delegate |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | Announce Continuation Grant to PC, Including Year-End Monitoring Results (CSB Director's Report) |
| | |
| | |
| | |
| | |
| | |
| | |
| Performance Review notices | Personnel Budget review. |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| Monitor transcripts TAT | |
| Order of Layoff PD/PY Staff | |
| Summer closure & PD/PY Staff Layoff | |
| | |
| | LIC 500 to Licensing |
| Confidentiality Training (Annually Apr./May) | Illness and Injury Prevention plan Review |
| | 15 Hours of Professional Development (Ongoing) |
| Annual Bid | CSB/Local One Informational meeting |
| Recruitment Solano Community College job fair | Career Intro Career Fair (May) |
| Career Intro Career Fair | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| Report to Sr. Management on May's Legislative Revision | |
| | |
| | CSD Annual On-Site Monitoring Visit |
| | |
| | Quarterly Local Service Provider Meeting |
| | Energy Annual Convention |
| | |
| | |
| | End Monitoring |
| | |
| Review/Update Content of Monitoring Tools and Handbooks | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | Review Slot Map Plans and Update for New Period Schedule for Center Monitoring and Sample Size Calculation for Files and Classrooms |
| | |
| | Quarterly Grantee and Delegate Meeting |
| Bi-monthly CSB and Partner Education Cluster Meeting | Fees/9400 Trainings for State Partners |
| | |
| | |
| **Action:** Request PC approval of Planning Calendar<br>**Action:** BOS Approval | Present Updates to Staff |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| Enlist PC Sub-Committee for Review/Input to Service Plans and P&P's and Analyst to Finalize and Gets Final SAM Approval | **Action:** Submit to PC and BOS for Approval /Order Copies of Approved P&P's for Centers/Administration and Post on CSB Intranet |
| | |
| PC/EOC Orientation Planning Begins | PC/BOS Joint Training Planning Begins |
| | |
| | |
| | |
| Annual Report Final Approval from SAM | Present/Distribute Annual Report to PC and BOS/CAO |
| | |
| Release Files Past Destruction Date to County for Shredding | |
| | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
|---|---|
| | |
| | |
| Distribution of SR Packets (Transition to Kindergarten) | |
| | PITC Training for EHS staff |
| | |
| | Link any Self-Assessment Findings to G&O's for Continuation Grant and T & TA Plan |
| | |

# 2018-19 CSB Planning Calendar

| MAY | JUNE |
| --- | --- |
| | |
| | |
| | |
| tage 2/CAPP Program book | Distribute Stage 2/CAPP Program Handbook |
| | |
| | |

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: 2018 Head Start Self-Assessment Report and Corrective Action Plan

**RECOMMENDATION(S):**
ACCEPT and APPROVE the Head Start 2018 Self-Assessment Report and Corrective Action Plan, as recommended by the Employment and Human Services Director.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
The Head Start Act of 2007 (Section 641A (g)(1)(2)(B)) requires the Board of Supervisors to approve the Head Start Grantee corrective action plan in response to the annual self-assessment completed by the department. During the period of February 26, 2018 through March 2, 2018, the Community Services Bureau of the Employment & Human Services Department, completed the required self-assessment wherein internal processes were examined and evaluated for efficacy. The Head Start Performance Standards (CFR 1302.102(b)(2)(i-iii)) require that the Board of Supervisors approve the program's corrective action plan once all of the corrections have been certified by program staff. Certification verification was completed on May 2, 2018.

**CONSEQUENCE OF NEGATIVE ACTION:**
If not approved, the Department will not be able to submit required documents to the Office of Head Start.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: C. Nguyen, (925) 681-6304

**cc:** Nasim Eghlima

CHILDREN'S IMPACT STATEMENT:

The Employment & Human Services Department's Community Services Bureau supports three of Contra Costa County's community outcomes - Outcome 1: Children Ready for and Succeeding in School, Outcome 3: Families that are Economically Self-sufficient, and, Outcome 4: Families that are Safe, Stable, and Nurturing. These outcomes are achieved by offering comprehensive services, including high quality early childhood education, nutrition, and health services to low-income children throughout Contra Costa County.

ATTACHMENTS

Assessment and Corrective Action Report

# Community Services Bureau 2018 Self-Assessment Report

## 26 February – 2 March, 2018

### *Overview of Methods*

The purpose of the annual self-assessment is to determine the effectiveness of CSB's efforts in meeting program goals and objectives and in implementing Federal regulations. CSB's self-assessment was conducted during the week of February 26th by a team of 45 members, which included grantee and delegate staff, board members, community partners and parents.

The components of the self-assessment reviewed consisted of eight components:

1. Classroom Assessment Scoring System (CLASS™)
2. Focus Area 1- Program Design and Management
3. Focus Area 1-Quality Education and Child Development Program Services
4. Focus Area 1-Quality Family and Community Engagement Program Services
5. Focus Area 1-Quality Health Services
6. Focus Area 1-Effective Fiscal Infrastructure
7. Focus Area 1-Effective ERSEA Strategies
8. Health & Safety Checklist – one for Center Based and one for Family Child Care

### *Components, Instruments, & Measures*

The six self-assessment program components were reviewed utilizing seven instruments:

| Components | Instruments | Measures |
|---|---|---|
| 1. **CLASS™** | • The Classroom Assessment Scoring System (CLASS™)<br>• | • 13 Classroom Reviews |
| **2. Program Design and Management** | • FY 2018 Office of Head Start Focus Area 1 Monitoring Protocol | • Grantee & Partner Interviews |
| **3. Quality Education and Child Development Program Services** | • FY 2018 Office of Head Start Focus Area 1 Monitoring Protocol | • Grantee & Partner Interviews |
| **4. Quality Family and Community Engagement Program Services** | • FY 2018 Office of Head Start Focus Area 1 Monitoring Protocol | • Grantee & Partner Interviews |
| **5. Quality Health Services** | • FY 2018 Office of Head Start Focus Area 1 Monitoring Protocol | • Grantee & Partner Interviews |
| **6. Effective Fiscal Infrastructure** | • FY 2018 Office of Head Start Focus Area 1 Monitoring Protocol | • Grantee and Delegate Fiscal Interviews |
| **7. Effective ERSEA** | • FY 2018 Office of Head Start Focus | • Grantee and Delegate Fiscal |

| Strategies | Area 1 Monitoring Protocol | Interviews |
|---|---|---|
| 8. **Health & Safety** | • A locally designed center monitoring tool based on Office of Head Start health and safety guidelines | • 10 Classroom Reviews<br>• 6 Family Child Care (FCC) Reviews |

## Key Findings

**Areas of Strength:**

| Components | Areas of Strength |
|---|---|
| **CLASS™** | Strong CLASS™ scores that are above the Federal Minimum Threshold of 4, 3, 2 for the three domains (see page 3). |
| **Program Design and Management** | Low child to teacher ratios, exceeding the HSPS requirements, are present in the program. |
| **Quality Education and Child Development Program Services** | A crosswalk was developed for teachers to be able to identify the curriculum objectives in relationship to children's school readiness goals resulting in enhanced individualization. |
| **Quality Family and Community Engagement Program Services** | The delegate agency has monthly "Let's Talk" support groups for the parents at each center. |
| **Quality Health Services** | A Policy Council representative participating in this self-assessment reported, "It takes a village." She explained that everybody at every level of the organization is responsible for monitoring to make sure the facilities are safe for children. |
| **Effective Fiscal Infrastructure** | The County financial system has strong internal controls and conducts extensive internal and external audits. |
| **Effective ERSEA Strategies** | Formalized agreements such those with Nurse Family Partnership, Children and Family Services (CPS), the Regional Center of the East Bay, and the Special Education Local Planning Area all result in referrals from the neediest of the needy children in our community. |
| **Health & Safety** | Beautiful new materials and equipment were evident at all sites. |

**Areas Require Strengthening:**

| Areas Requiring Strengthening | Person Responsible | Date to be Completed | Corrective Action |
|---|---|---|---|
| **Health & Safety Monitoring:** At the Family Child Care Homes, providers need to be trained to properly store toothbrushes being used by children. | Debi Marsee, Health Content Expert and Magda Bedros, Assistant Director | 4/30/18 | • Training to be conducted for each family child care provider.<br>• Materials needed for safe storage will be provided to each family child care provider. |
| **Health & Safety Monitoring:** Supervisor Burgis recommended that all parents be trained in disaster preparedness for their homes. | Jay Rivera, Facilities Content Expert and Ana Araujo, Parent, Family, and Community Engagement Content Expert | 4/30/18 and ongoing | • Disseminate parent appropriate materials pertaining to disaster preparedness.<br>• Host community experts at parents meetings such as CERT trainers. |

**Areas Requiring Corrective Action:**

| **Areas Requiring Corrective Action** | Person Responsible | Date to be Completed | Corrective Action Plan |
|---|---|---|---|
| **FCC – Health & Safety Monitoring: Tooth brushing in conjunction with a meal is not being implemented at 3 of the 6 FCC homes visited.** | Debi Marsee, Health Content Expert and Magda Bedros, Assistant Director | 4/30/18 | • Provide oral hygiene training to FCC Providers.<br>• Monitor homes to ensure tooth brushing is occurring; create a photo collage of each FCC home during tooth brushing time. |
| **FCC – Health & Safety Monitoring: Required postings not evident in the Family Child Care Provider Homes.** | Debi Marsee, Health Content Expert and Magda Bedros, Assistant Director | 4/30/18 | • Provide a smaller version of all required postings similar to one CSB developed for each FCC home. |

****All items that are listed in the corrective action plan have been corrected by the responsible program staff**

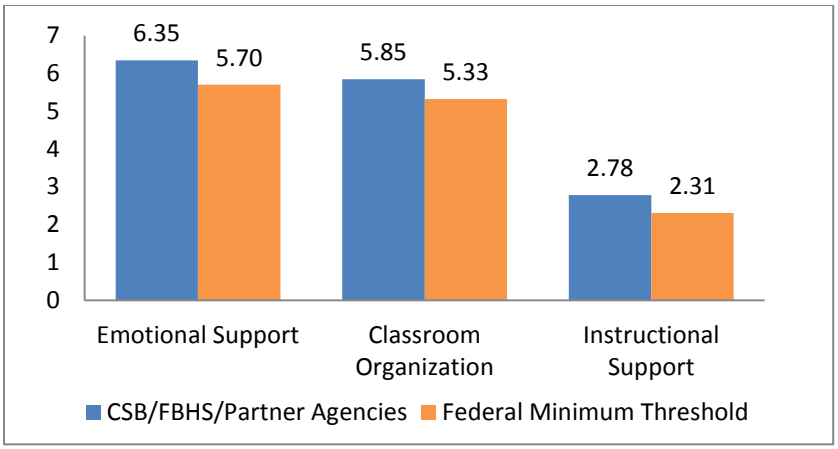
**CLASS Results:**

**CLASS**™ is an observational monitoring tool that assesses classroom quality and primarily focuses on the interaction between the teacher and the students and what teachers do to boost children's learning. The CLASS™ tool has 10 dimensions of teacher-child interactions rated on a 7-point scale. The 10 CLASS™ dimensions are organized into three domains:

1. **Emotional Support assesses the degree to which teachers establish and promote a positive** climate in their classroom through their everyday interactions.
2. **Classroom Organization** assesses classroom routines and procedures related to the organization and management of children's behavior, time, and attention in the classroom.
3. **Instruction Support** assesses the ways in which teachers implement the curriculum to effectively promote cognitive and language development.

The Office of Head Start (OHS) has established the minimum threshold on the three CLASS™ domains to be 5.70 for the domain of Emotional Support, 5.33 for the domain of Classroom Organization, and 2.31 for the domain of Instructional Support. Thirteen of CSB's directly operated, partner, and the delegate agency classrooms were assessed using the CLASS™ instrument. **Figure 1** below indicates that the program exceeded the established minimum set by OHS for the three domains.

**Figure 1: CLASS Results from Thirteen Classrooms**


7
6
5
4
3
2
1
0
6.35
5.70
5.85
5.33
2.78
2.31
Emotional Support
Classroom Organization
Instructional Support
CSB/FBHS/Partner Agencies
Federal Minimum Threshold

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: Operations Update of the Employment and Human Services Department, Community Services Bureau

**RECOMMENDATION(S):**
ACCEPT the April 2018 update of the operations of the Employment and Human Services Department, Community Services Bureau, as recommended by the Employment and Human Services Department Director.

**FISCAL IMPACT:**
None

**BACKGROUND:**
The Employment and Human Services Department submits a monthly report to the Contra Costa Board of Supervisors (BOS) to ensure ongoing communication and updates to the County Administrator and BOS regarding any and all issues pertaining to the Head Start Program and Community Services Bureau.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Elaine Burres, 608-4960

**cc:**

ATTACHMENTS

CSB Apr 2018 CAO Report

CSB Apr 2018 HS Fiscal

CSB Apr 2018 EHS Fiscal

CSB Apr 2018 CACFP Report

CSB Apr 2018 HS CC Partnership Fiscal #1

CSB Apr 2018 HS CC Partnership Fiscal #2

CSB Apr 2018 Menu

CSB Apr 2018 LIHEAP

CSB Apr 2018 Credit Card

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU

To: David Twa, Contra Costa County Administrator
From: Kathy Gallagher, EHSD Director
Subject: Community Services Monthly Report
Date: April 2018

1470 Civic Court,
Suite 200
Concord, CA
94520

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www.cccounty.us/ehsd

Respect | Responsiveness | Relationship

## News /Accomplishments

- CSB Director and several managers, site supervisors and teaching staff attended the California Head Start Association's (CHSA) Annual conference the week of April 9, 2018. Participants received updates from CHSA's Director and had the opportunity to attend several education workshops and exhibit halls, which provided developmentally appropriate practices, taught critical new skills, broadened one's awareness and disseminated valuable resources that related to children ages zero to five.
- This year's Week of the Young Child festivities were celebrated the week of April 16th by community leaders, CSB managers and Head Start/Early Head Start staff and families. Participants had the opportunity to engage in crazy hair day, pajama day, cultural awareness day, read books to the children, and get their faces painted.
- Through an innovative partnership with Diablo Valley College (DVC), the Community Services Bureau held an orientation on April 16, 2018 for prospective applicants interested in joining the new Linked cohort to support ESL students. This opportunity is designed for trainees who are interested in earning an Associate Teacher's permit and beyond.
- In celebration of National Teacher Appreciation Day, Katharine Mason, CSB Division Manager, and four Assistant Directors are preparing to visit every classroom on May 1st and 2nd to present the teaching staff with various certificates highlighting the quality work provided throughout our program.
- Ongoing dental treatment continues to be offered to children enrolled in the Head Start program. On April 20, 2018, the Contra Costa County Dental Van visited Contra Costa College's Early Head Start center to provide dental exams, fluoride varnish, cleanings and treatment to 19 children.
- CSB Director and two staff attended National Head Start Association's (NHSA) annual conference in Anaheim April 24-27. CSB's Director was invited by NHSA to facilitate the second round of Communities of Practice for Directors. Over 60 directors nation-wide attended the session to discuss pertinent issues impacting programs.
- On April 7th, 35 CSB teaching staff attended the 24th Annual Early Learning Conference at Diablo Valley College (DVC). Participants heard from renowned early childhood advocators about statewide initiatives, public policy trends and workforce pathways for teachers. Additionally, participants received college credit or professional growth hours towards their child development permit.
- The teaching staff early closures days in April focused on interactive science activities. Head Start and Early Head Start teaching staff had the opportunity to explore, create, and share ideas about sample materials and tools that children use in the

classroom. Teachers facilitate the children's learning about science concepts and implement new ideas to enhance the classroom environment.

- On Tuesday May 1st, the Board of Supervisors will join CSB and the Economic Opportunity Council in celebration Community Action Month. Opportunity Junction will be sharing how Community Service Block Grant funds are critical to their success and a client will give a testimonial.
- On Saturday May 5th, the Economic Opportunity Council will be participating in a Strategic Planning Retreat to develop a plan over for the next 3 years, inclusive of a mission statement.
- On May 10th, members of the Economic Opportunity council and staff will be headed to Sacramento to participate in Community Action Day.

**I. Status Updates:**

**a. Caseloads, workload (all programs)**

- Head Start enrollment: 99%
- Early Head Start enrollment: 98.72%
- Early Head Start Child Care Partnership enrollment: 100%
- Early Head Start Child Care Partnership #2 enrollment: 62% (100% to capacity at CSB centers/ adjusted for open rooms and available staffing)
- Head Start Average Daily Attendance: 83.53%
- Early Head Start Average Daily Attendance: 86.4%
- Early Head Start Child Care Partnership Attendance: 86.4%
- Stage 2: 400 families and 640 children
- CAPP: 145 families and 246 children
  - In total: 545 families and 886 children
  - Incoming transfers from Stage 1: 34 families and 52 children
- LIHEAP: 318 households have been assisted
- Weatherization: 16 units

**b. Staffing:**

- CSB continues to actively recruit to fill vacant positions across various classifications. During the month of April, the Bureau hired an Accounting Technician and conducted interviews for temporary Child Nutrition Worker II and Child Nutrition Food Services Transporter. Additional interviews are in process to fill a vacant Comprehensive Services Assistant Manager position and teaching positions. Targeted recruitments will be opened to fill two (2) vacant Comprehensive Services Managers, one (1) Child Nutrition Worker II, and Child Nutrition Food Services Transporter.
- CSB continues to struggle with hiring infant/toddler teaching staff due to a staffing shortage.

c. **Union Issues:**

- CSB has scheduled a Meet and Confer (M & C) session with PEU, Local 1 to reach an agreement on the upcoming 2018-2019 FY program changes and the impact it may have on staff. A meeting is also being scheduled to discuss and agree on mandatory training for all teaching staff.
- The Bureau is working with Labor Relation to schedule a M &C with Local 1 for negotiating Wages for CSB employees represented by the Union effective July 1, 2018.

**II. Emerging Issues and Hot Topics**:

- CSB continues to search for alternate space to replace the Brookside Children's Center which will close services to children and families June 30, 2018. Public Works continues to partner in the search.

cc: Policy Council Chair

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**2018 HEAD START PROGRAM**
March 2018 Expenditures

| 1<br>DESCRIPTION | 2<br>YTD Actual | 3<br>Total Budget | 4<br>Remaining Budget | 5<br>% YTD |
|---|---|---|---|---|
| **a. PERSONNEL** | $ 1,037,349 | $ 3,954,677 | $ 2,917,328 | 26% |
| **b. FRINGE BENEFITS** | 641,298 | 2,519,058 | 1,877,760 | 25% |
| **c. TRAVEL** | - | - | - | 0% |
| **d. EQUIPMENT** | - | - | - | 0% |
| **e. SUPPLIES** | 26,132 | 143,000 | 116,868 | 18% |
| **f. CONTRACTUAL** | 80,845 | 7,066,378 | 6,985,533 | 1% |
| **g. CONSTRUCTION** | - | - | - | 0% |
| **h. OTHER** | 250,051 | 1,500,246 | 1,250,195 | 17% |
| **I. TOTAL DIRECT CHARGES** | **$ 2,035,675** | **$ 15,183,359** | **$ 13,147,684** | **13%** |
| **j. INDIRECT COSTS** | 238,700 | 945,168 | 706,468 | 25% |
| **k. TOTAL-ALL BUDGET CATEGORIES** | **$ 2,274,375** | **$ 16,128,527** | **$ 13,854,152** | **14%** |
| ***In-Kind (Non-Federal Share)*** | ***$ 568,594*** | ***$ 4,032,132*** | ***$ 3,463,538*** | ***14%*** |

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**2018 HEAD START PROGRAM**
March 2018 Expenditures

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---|---|---|---|---|---|---|---|
| | **Actual Jan-18** | **Actual Feb-18** | **Actual Mar-18** | **Total YTD Actual** | **Total Budget** | **Remaining Budget** | **% YTD** |
| **a. Salaries & Wages (Object Class 6a)** | | | | | | | |
| Permanent 1011 | 291,198 | 314,382 | 318,178 | 923,758 | 3,403,950 | 2,480,192 | 27% |
| Temporary 1013 | 41,391 | 32,719 | 39,481 | 113,591 | 550,727 | 437,136 | 21% |
| **a. PERSONNEL (Object class 6a)** | **332,589** | **347,101** | **357,659** | **1,037,349** | **3,954,677** | **2,917,328** | **26%** |
| **b. FRINGE (Object Class 6b)** | **195,243** | **220,490** | **225,564** | **641,298** | **2,519,058** | **1,877,760** | **641,298** |
| **e. SUPPLIES (Object Class 6e)** | | | | | | | |
| 1. Office Supplies | - | 1,036 | 18,336 | 19,372 | 32,000 | 12,628 | 61% |
| 2. Child and Family Services Supplies (Includesclassroom Sup | 116 | 900 | 1,625 | 2,641 | 50,000 | 47,359 | 5% |
| 4. Other Supplies | | | | | | | |
| Computer Supplies, Software Upgrades, Computer Replace | - | 29 | - | 29 | 45,000 | 44,971 | 0% |
| Health/Safety Supplies | - | - | 3,355 | 3,355 | 5,000 | 1,645 | 67% |
| Mental helath/Diasabilities Supplies | - | - | - | - | 1,000 | 1,000 | 0% |
| Miscellaneous Supplies | 35 | 572 | 129 | 736 | 8,000 | 7,264 | 9% |
| Household Supplies | - | - | - | - | 2,000 | 2,000 | 0% |
| **TOTAL SUPPLIES (6e)** | **151** | **2,537** | **23,445** | **26,132** | **143,000** | **116,868** | **18%** |
| **f. CONTRACTUAL (Object Class 6f)** | | | | | | | |
| 1. Adm Svcs (e.g., Legal, Accounting, Temporary Contracts) | - | 2,605 | 3,399 | 6,004 | 58,000 | 51,996 | 10% |
| Estimated Medical Revenue from Medi-Cal (Org 1432 - cred | - | - | - | - | (500,000) | (500,000) | 0% |
| Health Consultant | 2,240 | 4,480 | 4,480 | 11,200 | 45,700 | 34,500 | 25% |
| 5. Training & Technical Assistance - PA11 | | | | | | | |
| Interaction | - | - | - | - | 11,000 | 11,000 | 0% |
| Diane Godard ($50,000/2) | - | - | 1,600 | 1,600 | 10,000 | 8,400 | 16% |
| Josephine Lee ($35,000/2) | - | - | 450 | 450 | 14,300 | 13,850 | 3% |
| Susan Cooke ($60,000/2) | - | - | - | - | 10,400 | 10,400 | |
| 7. Delegate Agency Costs | | | | | | | |
| First Baptist Church Head Start PA22 | - | - | - | - | 2,101,965 | 2,101,965 | 0% |
| First Baptist Church Head Start PA20 | - | - | - | - | 8,000 | 8,000 | 0% |
| 8. Other Contracts | | | | | | | |
| FB-Fairgrounds Partnership (Wrap) | - | - | 11,910 | 11,910 | 74,213 | 62,303 | 16% |
| FB-Fairgrounds Partnership | - | - | 28,800 | 28,800 | 183,600 | 154,800 | 16% |
| FB-E. Leland/Mercy Housing Partnership | - | - | - | - | - | - | |
| Martinez ECC (18 HS slots x $225/mo x 12/mo) | - | 9,000 | 9,000 | 18,000 | 108,000 | 90,000 | 17% |
| YMCA Richmond CDC, Lucas Ave.(48 slots x 12 x $350) $2 | - | - | - | - | 201,600 | 201,600 | 0% |
| YMCA 8th CDC, Lucas Ave.(48 slots x 12 x $350) $201,600 | - | - | - | - | 201,600 | 201,600 | 0% |
| YMCA Giant Rd. CDC (16 slots x 12 x $350) $67,200 | - | - | - | - | 67,200 | 67,200 | 0% |
| YMCA Rodeo CDC(24 slots x 12 x $350) $100,800 | - | - | - | - | 100,800 | 100,800 | 0% |
| Child Outcome Planning and Administration (COPA/Nulinx) | - | - | 964 | 964 | 20,000 | 19,036 | 5% |
| Enhancement/wrap-around HS slots with State CD Program | - | - | 1,918 | 1,918 | 4,350,000 | 4,348,082 | 0% |
| **f. CONTRACTUAL (Object Class 6f)** | **2,240** | **16,085** | **62,521** | **80,845** | **7,066,378** | **6,985,533** | **1%** |
| **h. OTHER (Object Class 6h)** | | | | | | | |
| 2. Bldg Occupancy Costs/Rents & Leases | 645 | 24,004 | 26,518 | 51,167 | 366,000 | 314,833 | 14% |
| (Rents & Leases/Other Income) | - | - | - | - | - | - | |
| 4. Utilities, Telephone | 6,434 | 26,694 | 22,766 | 55,894 | 295,000 | 239,106 | 19% |
| 5. Building and Child Liability Insurance | - | - | 2,707 | 2,707 | 3,000 | 294 | 90% |
| 6. Bldg. Maintenance/Repair and Other Occupancy | - | 3,786 | 3,365 | 7,151 | 100,000 | 92,849 | 7% |
| 8. Local Travel (55.5 cents per mile effective 1/1/2012) | 648 | 1,182 | 4,667 | 6,497 | 50,000 | 43,503 | 13% |
| 9. Nutrition Services | | | | - | - | - | |
| Child Nutrition Costs | - | 22,377 | 16,927 | 39,303 | 310,000 | 270,697 | 13% |
| (CCFP & USDA Reimbursements) | - | - | - | - | (230,000) | (230,000) | 0% |
| 13. Parent Services | | | | - | - | - | |
| Parent Conference Registration - PA11 | - | - | 784 | 784 | 9,000 | 8,216 | 9% |
| Parent Resources (Parenting Books, Videos, etc.) - PA11 | - | 1,780 | - | 1,780 | 1,000 | (780) | 178% |
| PC Orientation, Trainings, Materials & Translation - PA11 | 99 | 1,218 | - | 1,318 | 7,700 | 6,382 | 17% |
| Policy Council Activities | 16 | 5 | - | 21 | 4,000 | 3,979 | 1% |
| Male Involvement Activities | - | - | - | - | 2,500 | 2,500 | 0% |
| Parent Activities (Sites, PC, BOS luncheon) & Appreciation | 2,825 | - | - | 2,825 | 5,500 | 2,675 | 51% |
| Child Care/Mileage Reimbursement | - | - | 732 | 732 | 5,100 | 4,368 | 14% |
| 14. Accounting & Legal Services | | | | - | - | - | |
| Auditor Controllers | - | - | - | - | 2,000 | 2,000 | 0% |
| Data Processing/Other Services & Supplies | 1,024 | 406 | 1,440 | 2,870 | 15,000 | 12,130 | 19% |
| 15. Publications/Advertising/Printing | | | | - | - | - | |
| Outreach/Printing | - | - | - | - | 100 | 100 | 0% |
| Recruitment Advertising (Newspaper, Brochures) | - | - | - | - | 8,500 | 8,500 | 0% |
| 16. Training or Staff Development | | | | - | - | - | |
| Agency Memberships (WIPFLI, Meeting Fees, NHSA, NAE | - | 156 | 130 | 286 | 22,098 | 21,812 | 1% |
| Staff Trainings/Dev. Conf. Registrations/Memberships - PA | - | 279 | 6,124 | 6,403 | 48,000 | 41,597 | 13% |
| Family, Community and Parent Involvement | - | - | - | - | 95,000 | 95,000 | 0% |
| 17. Other | | | | | | | |
| Site Security Guards | - | 94 | 3,030 | 3,123 | 35,000 | 31,877 | 9% |
| Dental/Medical Services | - | - | - | - | 1,000 | 1,000 | 0% |
| Vehicle Operating/Maintenance & Repair | 4,195 | 4,746 | 4,789 | 13,730 | 70,000 | 56,270 | 20% |
| Equipment Maintenance Repair & Rental | - | 1,147 | 36,836 | 37,983 | 82,000 | 44,017 | 46% |
| Dept. of Health and Human Services-data Base (CORD) | 912 | 912 | - | 1,825 | 6,000 | 4,176 | 30% |
| Other Operating Expenses (Facs Admin/Other admin) | 726 | 7,957 | 4,968 | 13,652 | 186,748 | 173,096 | 7% |
| Other Departmental Expenses | - | - | - | - | - | - | |
| **h. OTHER (6h)** | **17,524** | **96,744** | **135,783** | **250,051** | **1,500,246** | **1,250,195** | **17%** |
| **I. TOTAL DIRECT CHARGES (6a-6h)** | **547,747** | **682,957** | **804,971** | **2,035,675** | **15,183,359** | **13,147,684** | **13%** |
| **j. INDIRECT COSTS** | **-** | **110,886** | **127,814** | **238,700** | **945,168** | **706,468** | **25%** |
| **k. TOTALS (ALL BUDGET CATEGORIES)** | **547,747** | **793,843** | **932,785** | **2,274,375** | **16,128,527** | **13,854,152** | **14%** |
| ***Non-Federal Share (In-kind)*** | ***136,937*** | ***198,461*** | ***233,196*** | ***568,594*** | ***4,032,132*** | ***3,463,538*** | ***14%*** |

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**2018 EARLY HEAD START PROGRAM**
March 2018 Expenditures

| 1<br>DESCRIPTION | 2<br>YTD Actual | 3<br>Total<br>Budget | 4<br>Remaining<br>Budget | 5<br>%<br>YTD |
|---|---|---|---|---|
| **a. PERSONNEL** | $ 93,830 | $ 601,077 | $ 507,247 | 16% |
| **b. FRINGE BENEFITS** | 57,054 | 384,355 | 327,301 | 15% |
| **c. TRAVEL** | - | - | - | 0% |
| **d. EQUIPMENT** | - | - | - | 0% |
| **e. SUPPLIES** | 788 | 16,800 | 16,012 | 5% |
| **f. CONTRACTUAL** | 535,293 | 2,292,672 | 1,757,379 | 23% |
| **g. CONSTRUCTION** | - | - | - | 0% |
| **h. OTHER** | 5,672 | 99,983 | 94,311 | 6% |
| **I. TOTAL DIRECT CHARGES** | $ 692,636 | $ 3,394,887 | $ 2,702,251 | 20% |
| **j. INDIRECT COSTS** | 21,462 | 143,657 | 122,195 | 15% |
| **k. TOTAL-ALL BUDGET CATEGORIES** | **$ 714,098** | **$ 3,538,544** | **$ 2,824,446** | **20%** |
| ***In-Kind (Non-Federal Share)*** | *$ 178,525* | *$ 884,636* | *$ 706,111* | *20%* |

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**2018 EARLY HEAD START PROGRAM**
March 2018 Expenditures

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---|---|---|---|---|---|---|---|
| | **Actual Jan-18** | **Actual Feb-18** | **Actual Mar-18** | **Total YTD Actual** | **Total Budget** | **Remaining Budget** | **% YTD** |
| **Expenditures** | | | | | | | |
| **a. Salaries & Wages (Object Class 6a)** | | | | | | | |
| Permanent 1011 | 25,341 | 31,511 | 29,955 | 86,807 | 519,798 | 432,991 | 17% |
| Temporary 1013 | 2,359 | 2,203 | 2,461 | 7,022 | 81,279 | 74,257 | 9% |
| **a. PERSONNEL (Object class 6a)** | **27,700** | **33,714** | **32,416** | **93,830** | **601,077** | **507,247** | **16%** |
| **b. FRINGE (Object Class 6b)** | **15,514** | **21,502** | **20,039** | **57,054** | **384,355** | **327,301** | **15%** |
| **e. SUPPLIES (Object Class 6e)** | | | | | | | |
| 1. Office Supplies | - | 77 | 18 | 95 | 1,000 | 905 | 9% |
| 2. Child and Family Serv. Supplies/classroom Su | - | - | - | - | 11,000 | 11,000 | 0% |
| 4. Other Supplies | - | - | - | - | | - | |
| Computer Supplies, Software Upgrades, Con | - | - | - | - | 2,000 | 2,000 | 0% |
| Health/Safety Supplies | - | - | 693 | 693 | 1,000 | 307 | 69% |
| Miscellaneous Supplies | - | - | - | - | 1,800 | 1,800 | 0% |
| Household Supplies | - | - | - | - | - | - | |
| **e. SUPPLIES (Object Class 6e)** | **-** | **77** | **711** | **788** | **16,800** | **16,012** | **5%** |
| **f. CONTRACTUAL (Object Class 6f)** | | | | | | | |
| 1. Adm Svcs ( Legal, Accounting, Temporary Co | - | - | - | - | 1,000 | 1,000 | 0% |
| 2. Health/Disabilities Services | - | - | - | - | | - | |
| Health Consultant | - | 1,920 | 1,920 | 3,840 | 19,500 | 15,660 | 20% |
| 5. Training & Technical Assistance - PA11 | | | | - | | | |
| Interaction | - | - | - | - | 5,500 | 5,500 | 0% |
| Diane Godard | - | - | - | - | 7,500 | 7,500 | 0% |
| Josephine Lee ($35,000/2) | - | - | - | - | 5,000 | 5,000 | 0% |
| Susan Cooke ($60,000/2) | - | - | - | - | 6,500 | 6,500 | |
| 8. Other Contracts | | | | | | | |
| FB-Fairgrounds Partnership | - | - | 12,000 | 12,000 | 84,000 | 72,000 | 14% |
| FB-E. Leland/Mercy Housing Partnership | - | - | 15,000 | 15,000 | 180,000 | 165,000 | 8% |
| Apiranet | - | 40,500 | 40,500 | 81,000 | 388,800 | 307,800 | 21% |
| Crossroads | - | - | - | - | 110,000 | 110,000 | 0% |
| Martinez ECC | - | 8,000 | 8,000 | 16,000 | 96,000 | 80,000 | 17% |
| Child Outcome Planning & Admini. (COPA/N | - | - | 199 | 199 | 3,000 | 2,801 | 7% |
| Enhancement/wrap-around HS slots with Sta | - | - | 407,254 | 407,254 | 1,385,872 | 978,618 | 29% |
| **f. CONTRACTUAL (Object Class 6f)** | **-** | **50,420** | **484,873** | **535,293** | **2,292,672** | **1,757,379** | **23%** |
| **h. OTHER (Object Class 6h)** | | | | | | | |
| 2. Bldg Occupancy Costs/Rents & Leases | - | 155 | (12) | 143 | 1,800 | 1,657 | 8% |
| (Rents & Leases/Other Income) | - | - | - | - | - | - | |
| 4. Utilities, Telephone | - | 390 | 562 | 952 | 3,600 | 2,648 | 26% |
| 5. Building and Child Liability Insurance | - | - | - | - | - | - | |
| 6. Bldg. Maintenance/Repair and Other Occupa | - | - | 129 | 129 | 9,200 | 9,071 | 1% |
| 8. Local Travel (55.5 cents per mile) | - | 272 | 342 | 614 | 6,500 | 5,886 | 9% |
| 9. Nutrition Services | | - | - | - | - | - | |
| Child Nutrition Costs | - | - | - | - | 1,100 | 1,100 | 0% |
| (CCFP & USDA Reimbursements) | - | - | - | - | (800) | (800) | |
| 13. Parent Services | | | | | | | |
| Parent Conference Registration - PA11 | - | - | - | - | 4,000 | 4,000 | 0% |
| Parent Resources (Parenting Books, Videos | - | 305 | - | 305 | - | (305) | |
| PC Orientation, Trainings, Materials & Trans | - | 58 | - | 58 | 4,000 | 3,942 | 1% |
| Policy Council Activities | - | - | - | - | 1,000 | 1,000 | 0% |
| Parent Activities (Sites, PC, BOS luncheon) | - | - | - | - | 500 | 500 | 0% |
| Child Care/Mileage Reimbursement | - | - | 91 | 91 | 2,500 | 2,409 | 4% |
| 14. Accounting & Legal Services | | | | | | | |
| Data Processing/Other Services & Supplies | - | 296 | 298 | 593 | 3,200 | 2,607 | 19% |
| 15. Publications/Advertising/Printing | | | | | | | |
| Recruitment Advertising (Newspaper, Brochu | - | - | - | - | 100 | 100 | |
| 16. Training or Staff Development | | | | | | | |
| Agency Memberships (WIPFLI, Meeting Fee | - | - | 60 | 60 | 20,200 | 20,140 | 0% |
| Staff Trainings/Dev. Conf. Registrations/Me | - | - | 563 | 563 | 30,244 | 29,681 | 2% |
| 17. Other | | | | | | | |
| Vehicle Operating/Maintenance & Repair | - | 758 | 952 | 1,710 | 8,000 | 6,290 | 21% |
| Equipment Maintenance Repair & Rental | - | 2 | - | 2 | 1,000 | 998 | 0% |
| Other Operating Expenses (Facs Admin/Othe | - | 204 | 248 | 453 | 3,839 | 3,386 | 12% |
| Other Departmental Expenses | - | - | - | - | - | - | |
| **h. OTHER (6h)** | **-** | **2,439** | **3,233** | **5,672** | **99,983** | **94,311** | **6%** |
| **I. TOTAL DIRECT CHARGES (6a-6h)** | **43,214** | **108,151** | **541,272** | **692,636** | **3,394,887** | **2,702,251** | **20%** |
| **j. INDIRECT COSTS** | **-** | **8,537** | **12,925** | **21,462** | **143,657** | **122,195** | **15%** |
| **k. TOTALS - ALL BUDGET CATEGORIES** | **43,214** | **116,688** | **554,197** | **714,098** | **3,538,544** | **2,824,446** | **20%** |
| ***Non-Federal Match (In-Kind)*** | ***10,803*** | ***29,172*** | ***138,549*** | ***178,525*** | ***884,636*** | ***706,111*** | ***20%*** |

EMPLOYMENT & HUMAN SERVICES DEPARTMENT

COMMUNITY SERVICES BUREAU
CHILD NUTRITION FOOD SERVICES
CHILD and ADULT CARE FOOD PROGRAM MEALS SERVED
FY 2017-2018

| Month covered | 2018<br>February |
|---|---|
| Approved sites operated this month | 15 |
| Number of days meals served this month | 19 |
| Average daily participation | 725 |
| **Child Care Center Meals Served:** | |
| Breakfast | 11,079 |
| Lunch | 13,766 |
| Supplements | 10,002 |
| Total Number of Meals Served | 34,847 |

fldr/fn:2018 CAO Monthly Reports

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**EARLY HEAD START- CC PARTNERSHIP #1**
March 2018 Expenditures

| 1<br>DESCRIPTION | 2<br>YTD Actual | 3<br>Total Budget | 4<br>Remaining Budget | 5<br>% YTD |
|---|---|---|---|---|
| **a. PERSONNEL** | $ 216,950 | $ 299,555 | $ 82,605 | 72% |
| **b. FRINGE BENEFITS** | 131,651 | 216,733 | 85,082 | 61% |
| **c. TRAVEL** | - | - | - | 0% |
| **d. EQUIPMENT** | - | - | - | 0% |
| **e. SUPPLIES** | 6,821 | 57,850 | 51,029 | 12% |
| **f. CONTRACTUAL** | 225,550 | 470,120 | 244,570 | 48% |
| **g. CONSTRUCTION** | | | - | 0% |
| **h. OTHER** | 52,239 | 70,363 | 18,124 | 74% |
| **I. TOTAL DIRECT CHARGES** | $ 633,211 | $ 1,114,621 | $ 481,410 | 57% |
| **j. INDIRECT COSTS** | 61,861 | 62,557 | 696 | 99% |
| **k. TOTAL-ALL BUDGET CATEGORIES** | **$ 695,073** | **$ 1,177,178** | **$ 482,105** | **59%** |
| ***In-Kind (Non-Federal Share)*** | ***$ 252,514*** | ***$ 272,845*** | ***$ 20,330*** | ***93%*** |

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**EARLY HEAD START- CC PARTNERSHIP #1**
March 2018 Expenditures

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---|---|---|---|---|---|---|---|
| | **Jul-17 thru Sep-17** | **Oct-17 thru Dec-17** | **Jan-18 thru Mar-18** | **Total YTD Actual** | **Total Budget** | **Remaining Budget** | **% YTD** |
| **Expenditures** | | | | | | | |
| **a. Salaries & Wages (Object Class 6a)** | | | | | | | |
| Permanent 1011 | 86,175 | 56,267 | 72,236 | 214,678 | 299,555 | 84,877 | 72% |
| Temporary 1013 | - | - | 2,272 | 2,272 | - | (2,272) | |
| **a. PERSONNEL (Object class 6a)** | **86,175** | **56,267** | **74,508** | **216,950** | **299,555** | **82,605** | **72%** |
| **b. FRINGE BENEFITS (Object Class 6b)** | | | | | | | |
| Fringe Benefits | 52,846 | 35,449 | 43,356 | 131,651 | 216,733 | 85,082 | 61% |
| **b. FRINGE (Object Class 6b)** | **52,846** | **35,449** | **43,356** | **131,651** | **216,733** | **85,082** | **61%** |
| **e. SUPPLIES (Object Class 6e)** | | | | | | | |
| 1. Office Supplies | 61 | 1,172 | 564 | 1,797 | 1,000 | (797) | 180% |
| 2. Child and Family Serv. Supplies/classroom Supplies | 40 | 522 | 314 | 876 | 54,250 | 53,374 | 2% |
| 4. Other Supplies | - | - | - | | | | |
| Computer Supplies, Software Upgrades, Comp Replacemnt | 1,089 | 1,279 | 19 | 2,386 | 1,200 | (1,186) | 199% |
| Miscellaneous Supplies | - | 25 | - | 25 | 100 | 75 | 25% |
| Household Supplies | 936 | 793 | 8 | 1,737 | 1,300 | (437) | 134% |
| **e. SUPPLIES (Object Class 6e)** | **2,125** | **3,791** | **905** | **6,821** | **57,850** | **51,029** | **12%** |
| **f. CONTRACTUAL (Object Class 6f)** | | | | | | | |
| 1. Adm Svcs (e.g., Legal, Accounting, Temporary Contracts) | - | - | - | - | 12,000 | 12,000 | 0% |
| 5. Training & Technical Assistance - PA11 | - | - | - | - | - | - | |
| Boot Camp/PITC/IT Trainings | - | - | - | - | 13,200 | 13,200 | 0% |
| 8. Other Contracts | - | 117,416 | 34,412 | 151,827 | 312,000 | 160,173 | 49% |
| Contra Costa Child Care Council | - | - | - | - | 20,000 | 20,000 | 0% |
| First Baptist (20 slots x $450) | - | - | - | - | 3,000 | 3,000 | 0% |
| Child Outcome Planning and Administration (COPA/Nulinx) | 53,000 | (3,000) | 23,500 | 73,500 | 109,920 | 36,420 | 67% |
| Enhancement/wrap-around HS slots with State CD Prog. | - | 132 | 90 | 222 | - | (222) | |
| **f. CONTRACTUAL (Object Class 6f)** | **53,000** | **114,548** | **58,002** | **225,550** | **470,120** | **244,570** | **48%** |
| **h. OTHER (Object Class 6h)** | | | | | | | |
| 2. Bldg Occupancy Costs/Rents & Leases | 4,760 | 3,595 | 3,073 | 11,429 | 3,800 | (7,629) | 301% |
| (Rents & Leases/Other Income) | - | - | - | - | - | - | |
| 4. Utilities, Telephone | 3,210 | 5,109 | 5,108 | 13,428 | 6,000 | (7,428) | 224% |
| 5. Building and Child Liability Insurance | - | - | - | - | - | - | |
| 6. Bldg. Maintenance/Repair and Other Occupancy | 1,145 | 35 | 49 | 1,230 | 1,400 | 170 | 88% |
| 8. Local Travel (54 cents per mile) | 702 | 889 | 62 | 1,652 | 4,200 | 2,548 | 39% |
| 13. Parent Services | - | - | - | - | - | - | 0% |
| 14. Accounting & Legal Services | - | - | - | | | | |
| Data Processing/Other Services & Supplies | 269 | 403 | 269 | 941 | 1,000 | 59 | 94% |
| 15. Publications/Advertising/Printing | - | - | - | - | - | - | |
| Outreach/Printing | - | - | - | - | 400 | 400 | |
| 16. Training or Staff Development | | | - | | | | |
| Agency Memberships (WIPFLI, Meeting Fees, NHSA, NAE | - | - | - | - | - | - | |
| Staff Trainings/Dev. Conf. Registrations/Memberships - PA | 14,746 | 2,895 | 12 | 17,653 | 25,907 | 8,254 | 68% |
| 17. Other | | | - | | | | |
| Vehicle Operating/Maintenance & Repair | 688 | 224 | 63 | 975 | 2,000 | 1,025 | 49% |
| Equipment Maintenance Repair & Rental | 2,468 | 428 | 441 | 3,337 | 4,000 | 663 | 83% |
| Health and Safety Improvements | - | - | 19 | 19 | 19,550 | 19,531 | 0% |
| Dept. of Health and Human Services-data Base (CORD) | - | - | 182 | 182 | - | (182) | |
| Other Operating Expenses (Facs Admin/Other admin) | 590 | 492 | 311 | 1,393 | 2,106 | 713 | 66% |
| **h. OTHER (6h)** | **28,578** | **14,071** | **9,590** | **52,239** | **70,363** | **18,124** | **74%** |
| **I. TOTAL DIRECT CHARGES (6a-6h)** | **222,725** | **224,125** | **186,361** | **633,211** | **1,114,621** | **481,410** | **57%** |
| **j. INDIRECT COSTS** | **14,702** | **23,601** | **23,558** | **61,861** | **62,557** | **696** | **99%** |
| **k. TOTALS - ALL BUDGET CATEGORIES** | **237,427** | **247,727** | **209,919** | **695,073** | **1,177,178** | **482,105** | **59%** |
| ***Non-federal Match In-Kind*** | ***31,710*** | ***105,349*** | ***115,455*** | ***252,514*** | ***272,845*** | ***20,330*** | ***93%*** |

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**EARLY HEAD START- CC PARTNERSHIP #2**
March 2018 Expenditures

| 1<br>DESCRIPTION | 2<br>YTD Actual | 3<br>Total Budget | 4<br>Remaining Budget | 5<br>% YTD |
|---|---|---|---|---|
| **a. PERSONNEL** | $ 238,419 | $ 1,227,715 | $ 989,296 | 19% |
| **b. FRINGE BENEFITS** | 148,939 | 893,334 | 744,395 | 17% |
| **c. TRAVEL** | - | - | - | 0% |
| **d. EQUIPMENT** | 388 | 225,000 | 224,612 | 0% |
| **e. SUPPLIES** | 108,743 | 419,400 | 310,657 | 26% |
| **f. CONTRACTUAL** | 301,734 | 2,479,300 | 2,177,566 | 12% |
| **g. CONSTRUCTION** | - | - | - | 0% |
| **h. OTHER** | 200,076 | 844,441 | 644,365 | 24% |
| **I. TOTAL DIRECT CHARGES** | $ 998,299 | $ 6,089,190 | $ 5,090,891 | 16% |
| **j. INDIRECT COSTS** | 70,920 | 271,072 | 200,152 | 26% |
| **k. TOTAL-ALL BUDGET CATEGORIES** | **$ 1,069,219** | **$ 6,360,262** | **$ 5,291,043** | **17%** |
| ***In-Kind (Non-Federal Share)*** | ***$ 264,630*** | ***$ 1,590,065*** | ***$ 1,325,435*** | ***17%*** |

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU
**EARLY HEAD START- CC PARTNERSHIP #2**
March 2018 Expenditures

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---|---|---|---|---|---|---|---|
| | **Actual Jan-18** | **Actual Feb-18** | **Actual Mar-18** | **Total YTD Actual** | **Total Budget** | **Remaining Budget** | **% YTD** |
| **Expenditures** | | | | | | | |
| **a. Salaries & Wages (Object Class 6a)** | | | | | | | |
| Permanent 1011 | 24,296 | 29,434 | 32,071 | 223,949 | 1,081,279 | 857,330 | 21% |
| Temporary 1013 | 2,461 | 6,722 | 5,287 | 14,470 | 146,436 | 131,966 | 10% |
| **a. PERSONNEL (Object class 6a)** | **26,757** | **36,155** | **37,358** | **238,419** | **1,227,715** | **989,296** | **19%** |
| **b. FRINGE BENEFITS (Object Class 6b)** | | | | | | | |
| Fringe Benefits | 16,442 | 19,923 | 21,443 | 148,939 | 893,334 | 744,395 | 17% |
| **b. FRINGE (Object Class 6b)** | **16,442** | **19,923** | **21,443** | **148,939** | **893,334** | **744,395** | **17%** |
| **d. EQUIPMENT (Object Class 6d)** | | | | | | | |
| 1. Office Equipment/Computer Equipment | - | - | - | 388 | 125,000 | 124,612 | 0% |
| 2. Vehicle Purchase | - | - | - | - | 100,000 | 100,000 | 0% |
| **d. EQUIPMENT (Object Class 6d)** | **-** | **-** | **-** | **388** | **225,000** | **224,612** | **0%** |
| **e. SUPPLIES (Object Class 6e)** | | | | | | | |
| 1. Office Supplies | - | 65 | 6 | 2,054 | 6,500 | 4,446 | 32% |
| 2. Child and Family Serv. Supplies/classroom Supplies | - | - | - | 3,926 | 69,000 | 65,074 | 6% |
| Start-Up Child and Family Serv. Supplies/classroom Supplies | 2,800 | 11,316 | (1,699) | 94,976 | 216,000 | 121,024 | 44% |
| 3. Other Supplies | | | | | | | |
| Computer Supplies, Software Upgrades, Comp Replacemnt | 33 | - | - | 4,407 | 18,000 | 13,593 | 24% |
| Health/Safety Supplies | - | - | 619 | 619 | 6,000 | 5,381 | 10% |
| Start-Up Health/Safety Supplies | - | 2,447 | - | 2,447 | 102,000 | 99,553 | 2% |
| Miscellaneous Supplies | 113 | - | 88 | 252 | 1,000 | 748 | 25% |
| Household Supplies | 14 | - | - | 63 | 900 | 837 | 7% |
| **e. SUPPLIES (Object Class 6e)** | **2,960** | **13,829** | **(985)** | **108,743** | **419,400** | **310,657** | **26%** |
| **f. CONTRACTUAL (Object Class 6f)** | | | | | | | |
| 1. Adm Svcs (e.g., Legal, Accounting, Temporary Contracts) | - | - | - | - | 36,000 | 36,000 | 0% |
| 2. Health/Disabilities Services | | | | | | | |
| Health Consultant | - | - | - | - | 25,500 | 25,500 | 0% |
| 3. Training & Technical Assistance - PA11 | | | | | | | |
| Interaction | - | - | - | - | 14,000 | 14,000 | 0% |
| Diane Godard | - | - | - | - | 4,000 | 4,000 | 0% |
| Josephine Lee | 3,060 | 1,650 | 2,250 | 14,970 | 38,000 | 23,030 | 39% |
| Susan Cooke | - | - | - | - | 8,000 | 8,000 | 0% |
| UCSF Benioff | - | - | - | 9,375 | 25,600 | 16,225 | 37% |
| 4. Other Contracts | | | | | | | |
| First Baptist/East Leland | - | - | 1,000 | 1,000 | 6,000 | 5,000 | 17% |
| Crossroads | - | - | - | - | 144,000 | 144,000 | 0% |
| Martinez ECC | 4,000 | - | - | 4,000 | 117,000 | 113,000 | 3% |
| YMCA Richmond CDC, Lucas Ave. | - | 7,000 | - | 7,000 | 48,000 | 41,000 | 15% |
| YMCA 8th CDC, Lucas Ave. | - | 5,500 | - | 5,500 | 66,000 | 60,500 | 8% |
| YMCA Rodeo CDC | - | 3,000 | - | 3,000 | 18,000 | 15,000 | 17% |
| KinderCare Mahogany | - | 12,500 | 8,000 | 20,500 | 96,000 | 75,500 | 21% |
| Baby Yale Brentwood | - | 21,000 | - | 21,000 | 108,000 | 87,000 | 19% |
| Baby Yale Antioch | - | - | - | - | 39,000 | 39,000 | 0% |
| Loss of Subsidy | - | - | - | - | 194,000 | 194,000 | 0% |
| Child Outcome Planning and Administration (COPA/Nulinx) | - | 52 | 178 | 1,176 | 6,000 | 4,824 | 20% |
| Enhancement EHS slots with State Child Dev. Program | 39,705 | - | 68,978 | 214,213 | 1,486,200 | 1,271,987 | 14% |
| **f. CONTRACTUAL (Object Class 6f)** | **46,765** | **50,702** | **80,406** | **301,734** | **2,479,300** | **2,177,566** | **12%** |
| **h. OTHER (Object Class 6h)** | | | | | | | |
| 1. Bldg Occupancy Costs/Rents & Leases | 15 | 180 | 163 | 589 | 60,000 | 59,411 | 1% |
| 2. Utilities, Telephone | 16 | 279 | 434 | 1,067 | 10,000 | 8,933 | 11% |
| 3. Building & Child Liability Insurance | - | - | - | - | 1,000 | 1,000 | 0% |
| 4. Bldg. Maintenance/Repair and Other Occupancy | - | - | 4 | 103 | 66,300 | 66,197 | 0% |
| Start-Up Bldg. Maintenance/Repair and Other Occupancy | 87,664 | 6,216 | - | 171,733 | 377,000 | 205,267 | 46% |
| 5. Local Travel (54 cents per mile) | 283 | 339 | 398 | 1,468 | 10,800 | 9,332 | 14% |
| 6. Nutrition Services | | | | | | | |
| Child Nutrition Costs | - | - | - | - | 18,000 | 18,000 | 0% |
| CCFP and USDA Reimbursements | - | - | - | - | (13,000) | (13,000) | 0% |
| 7. Parent Services | | | | - | | | |
| Parent Conference Registration - PA11 | - | - | - | - | 2,000 | 2,000 | 0% |
| Parent Resources (Parenting Books, Videos, etc.) | - | - | - | - | 4,500 | 4,500 | 0% |
| PC Orientation, Trainings, Materials & Translation - PA11 | - | - | - | - | 8,000 | 8,000 | 0% |
| Policy Council Meetings | - | - | - | - | 4,000 | 4,000 | 0% |
| Parent Activities (Sites, PC, BOS luncheon) & Appreciation | - | - | - | - | 3,700 | 3,700 | 0% |
| Child Care/Mileage Reimbursement | - | - | - | - | 2,600 | 2,600 | 0% |

CONTRA COSTA COUNTY
COMMUNITY SERVICES BUREAU

**EARLY HEAD START- CC PARTNERSHIP #2**

March 2018 Expenditures

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---|---|---|---|---|---|---|---|
| | **Actual Jan-18** | **Actual Feb-18** | **Actual Mar-18** | **Total YTD Actual** | **Total Budget** | **Remaining Budget** | **% YTD** |
| 8. Accounting & Legal Services | | | | - | | | |
| Audit/Legal (County Council) | - | - | - | - | 1,000 | 1,000 | 0% |
| Auditor Controllers | - | - | - | - | 500 | 500 | 0% |
| Data Processing/Other Services & Supplies | 235 | 264 | 266 | 1,829 | 3,500 | 1,671 | 52% |
| 9. Publications/Advertising/Printing | | | | - | | | |
| Outreach/Printing | - | - | - | 426 | 1,500 | 1,074 | 28% |
| Recruitment Advertising (Newspaper, Brochures) | - | - | - | 243 | 1,500 | 1,257 | 16% |
| 10. Training or Staff Development | | | | | | | |
| Agency Memberships (WIPFLI, Meeting Fees, NHSA, NAEYC | - | - | - | - | 24,608 | 24,608 | 0% |
| Family, Community and Parent Engagement | - | - | - | - | 16,000 | 16,000 | 0% |
| Staff Trainings/Dev. Conf. Registrations/Memberships - PA11 | 1,156 | 4,678 | 54 | 20,162 | 85,854 | 65,692 | 23% |
| 11. Other | | | | | | | |
| Site Security Guards | - | - | - | - | 5,000 | 5,000 | 0% |
| Dental/medical Services | - | - | - | - | 500 | 500 | 0% |
| Vehicle Operating/Maintenance & Repair | - | - | - | - | 12,800 | 12,800 | 0% |
| Equipment Maintenance Repair & Rental | - | 23 | - | 824 | 10,000 | 9,176 | 8% |
| Dept. of Health and Human Services-211 data base | - | - | - | - | 3,000 | 3,000 | 0% |
| Other Operating Expenses (Facs Admin/Other admin) | 85 | 190 | 270 | 1,631 | 123,779 | 122,148 | 1% |
| **h. OTHER (6h)** | **89,455** | **12,169** | **1,589** | **200,076** | **844,441** | **644,365** | **24%** |
| **I. TOTAL DIRECT CHARGES (6a-6h)** | **182,380** | **132,777** | **139,811** | **998,299** | **6,089,190** | **5,090,891** | **16%** |
| **j. INDIRECT COSTS** | **4,196** | **7,944** | **14,045** | **70,920** | **271,072** | **200,152** | **26%** |
| **k. TOTALS - ALL BUDGET CATEGORIES** | **186,576** | **140,722** | **153,856** | **1,069,219** | **6,360,262** | **5,291,043** | **17%** |
| ***Non-federal Match In-Kind*** | ***111,946*** | ***2,447*** | ***619*** | ***264,630*** | ***1,590,065*** | ***1,325,435*** | ***17%*** |

# April 2018 – COMMUNITY SERVICES BUREAU PRESCHOOL MENU

| MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|---|---|---|---|---|
| 2<br>**BREAKFAST**<br>½ c. FRESH APPLE<br>⅓ c. KIX CEREAL<br>**LUNCH**<br>⅜ c. ***Cuban Black Bean***<br>¼ c. BABY CARROTS (no dressing)<br>¼ c. FRESH KIWI<br>6 ea. WHOLE CORN TORTILLA CHIPS<br>**PM SNACK**<br>1 pkg. GOLDFISH CRACKERS<br>½ c. 1% LOW-FAT MILK | 3<br>**BREAKFAST**<br>½ c. FRESH TANGERINE<br>⅓ c. CORN CHEX CEREAL<br>**LUNCH**<br>⅔ c.* ***Ground Turkey & Spanish Rice***<br>(ground turkey, tomatoes, green pepper, onion)<br>¼ c. FRESH PEAR<br>**PM SNACK**<br>¼ c. LOW-FAT YOGURT<br>½ c. PINEAPPLE TIBITS | 4<br>**BREAKFAST**<br>½ c. MANGO CHUNKS<br>½ ea. WHOLE WHEAT BAGEL/CREAM CHEESE<br>**LUNCH**<br>¾ c.* ***Beef Vegetable Stew***<br>(beef cubes, sliced carrots, green peas, potatoes)<br>¼ c. FRESH ORANGE<br>½ ea. WHOLE WHEAT ROLL<br>**PM SNACK**<br>½ c. SALSA<br>6 ea. WHOLE CORN TORTILLA CHIPS | 5<br>**BREAKFAST**<br>1 ea. FRESH BANANA<br>¼ c. COOKED CINNAMON OATMEAL & RAISINS<br>**LUNCH**<br>⅜ c. ***Pinto Beans***<br>¼ c. RAINBOW COLESLAW<br>¼ c. FRESH APPLE<br>1 sq. WHOLE WHEAT MEXICALI CORNBREAD<br>**PM SNACK**<br>1 tbsp. SUNBUTTER<br>2 pkgs. RITZ CRACKERS | 6<br>**BREAKFAST**<br>½ c. FRESH ORANGE<br>⅓ c. RICE CHEX CEREAL<br>**LUNCH**<br>1 ½ ozs. ***Tuna Salad***<br>(tuna, eggs, mayo, relish, celery, onions)<br>¼ c. SPRING SALAD MIX/ITALIAN DRESSING<br>¼ c. FRESH STRAWBERRIES<br>1 sl. WHOLE WHEAT BREAD<br>**PM SNACK**<br>⅓ c. LETS GO FISHING TRAIL MIX<br>(corn chex, pretzels, fish & cheese crackers)<br>½ c. 1% LOW-FAT MILK |
| 9<br>**BREAKFAST**<br>½ c. FRESH PEAR<br>⅓ c. BRAN CEREAL<br>**LUNCH**<br>½ c. * ***Chickpeas & Tomatoes***<br>(garbanzo beans, tomatoes, ginger)<br>1 tbsp. SHREDDED CHEESE<br>¼ c. LEAFY SALAD GREENS & SHREDDED CARROTS<br>¼ c. FRESH TANGERINE<br>2 pkgs. WHOLE GRAIN CRACKERS<br>**PM SNACK**<br>6 ea. WHEAT THIN CRACKERS<br>1 ea. CHEDDAR CHEESE STICK | 10<br>**BREAKFAST**<br>½ c. FRESH ORANGE<br>⅓ c. RICE CHEX CEREAL<br>**LUNCH**<br>1 ½ ozs. ***Sloppy Joe Mix*** (ground turkey)<br>¼ c. BROCCOLI SLAW<br>¼ c. FRESH APPLE SLICES<br>½ ea. WHOLE WHEAT HAMBURGER BUN<br>**PM SNACK**<br>1 pkg. ANIMAL CRACKERS<br>½ c. 1% LOW-FAT MILK | 11<br>**BREAKFAST**<br>1 ea. FRESH BANANA<br>⅓ c. KIX CEREAL<br>**LUNCH**<br>½ c. ***Red Pozole Soup***<br>(diced chicken, tomato paste, hominy)<br>¼ c. SHREDDED CABBAGE & CILANTRO<br>¼ c. MANGO CHUNKS<br>6 ea. WHOLE CORN TORTILLA CHIPS<br>**PM SNACK**<br>1 ea. SOFT PRETZEL STICK<br>½ c. CUCUMBER & CARROT STICKS/RANCH DRESSING | 12<br>**BREAKFAST**<br>½ c. FRESH ORANGE<br>½ sl. WHOLE WHEAT CINNAMON BREAD<br>**LUNCH**<br>⅜ c. ***Blackeye Peas***<br>¼ c. COLESLAW<br>¼ c. FRESH PEAR<br>1 sq. WHOLE WHEAT CORNBREAD SQUARE<br>**PM SNACK**<br>½ c. PINEAPPLE TIDBITS<br>⅛ c. COTTAGE CHEESE | 13<br>**BREAKFAST**<br>1 ea. FRESH BANANA<br>⅓ c. CHEERIOS<br>**LUNCH**<br>½ c. ***Chicken Salad***<br>¼ c. TOSS SALAD/ITALIAN DRESSING<br>¼ c. FRESH STRAWBERRIES<br>½ ea. WHOLE WHEAT PITA BREAD<br>**PM SNACK**<br>½ c. FRESH APPLE<br>1 tbsp. SUNBUTTER |
| 16 Week<br>**BREAKFAST**<br>½ c. FRESH ORANGE<br>⅓ c. CORN CHEX CEREAL<br>**LUNCH**<br>¾ c. ***Mac & Cheese***<br>¼ C. SPINACH SALAD/RASPBERRY DRESSING<br>¼ c. FRESH APPLE<br>**PM SNACK**<br>1 pkg. GRAHAM CRACKERS<br>½ c. 1% LOW-FAT MILK | 17 Of<br>**BREAKFAST**<br>½ c. FRESH KIWI<br>⅓ c. BRAN CEREAL<br>**LUNCH**<br>**TACO TUESDAY**<br>1 oz. ***Ground Turkey*** ½ oz. ***Cheese***<br>¼ c. LETTUCE & TOMATOES<br>¼ c. FRESH STRAWBERRIES<br>2 ea. WHOLE CORN MINI TORTILLAS<br>**PM SNACK**<br>⅓ c. FRIENDS TRAIL MIX<br>(kix, cheerios, corn chex, raisins, pretzels, & dried apricots)<br>½ c. 1% LOW-FAT MILK | 18 The<br>**BREAKFAST**<br>1 ea. FRESH BANANA<br>⅓ c. CORNFLAKES<br>**LUNCH**<br>½ c. * ***Turkey Spaghetti***<br>(ground turkey, tomato paste, onions with whole wheat spaghetti)<br>¼ c. FRESH APPLE<br>**PM SNACK**<br>½ c. FRESH BROCCOLI & CAULIFLOWER/RANCH DIP<br>6 ea. WHEAT THIN CRACKERS | 19 Young<br>**BREAKFAST**<br>½ c. FRESH ORANGE<br>½ ea. ENGLISH MUFFIN/CREAM CHEESE<br>**LUNCH**<br>1 ea.* ***Mexican Pizza***<br>(refried beans, tomato paste, chunky salsa)<br>½ oz. SHREDDED MOZZARELLA CHEESE<br>¼ c. FRESH PEAR<br>1 ea. WHOLE WHEAT TORTILLA<br>**PM SNACK – NUTRITION EXPERIENCE**<br>FRUITY SUNBUTTER PITAS<br>1 tbsp. SUNBUTTER<br>¼ c. FRESH BANANA & ¼ c. FRESH APPLE | 20 Child<br>**BREAKFAST**<br>1 ea. FRESH BANANA<br>⅓ c. RICE CHEX CEREAL<br>**LUNCH**<br>1 oz. ***Turkey Breast***<br>½ oz. ***Cheddar Cheese***<br>MAYO & MUSTARD DRESSING<br>¼ c. GREEN LEAF LETTUCE & TOMATO SLICE<br>¼ c. FRESH STRAWBERRIES<br>½ EA. WHOLE WHEAT BUN<br>**PM SNACK**<br>⅛ c. COTTAGE CHEESE<br>½ c. MANGO CHUNKS |
| 23<br>**BREAKFAST**<br>½ c. FRESH ORANGE<br>⅓ c. RICE CHEX CEREAL<br>**LUNCH**<br>½ c. ***Vegetarian Baked Beans***<br>½ ea. TOASTED CHEESE SANDWICH<br>¼ c. SPRING SALAD MIX/ITALIAN DRESSING<br>¼ c. FRESH APPLE<br>**PM SNACK**<br>1 tbsp. SUNBUTTER<br>2 pkgs. RITZ CRACKERS | 24<br>**BREAKFAST**<br>½ c. FRESH KIWI<br>⅓ c. BRAN CEREAL<br>**LUNCH**<br>1 ½ ozs. ***Filipino Adobo***<br>(beef stew meat, soy sauce, vinegar)<br>¼ c. FRESH BROCCOLI FLORETS/RANCH DRESSING<br>¼ c. FRESH TANGERINE<br>¼ c. BROWN RICE<br>**PM SNACK**<br>½ c. FRUIT SALSA<br>(mandarin oranges, pineapple chunks, onions, & green bell peppers)<br>6 ea. WHOLE CORN TORTILLA CHIPS | 25<br>**BREAKFAST**<br>½ C. PINEAPPLE TIDBITS<br>½ ea. WHOLE WHEAT BAGEL/CREAM CHEESE<br>**LUNCH**<br>1 serv. ***Chicken Chilaquiles with Whole Grain Corn Tortilla Chips***<br>¼ c. GREEN SALAD/ITALIAN DRESSING<br>¼ c. FRESH PEAR<br>**PM SNACK**<br>1 ea. FRESH BANANA<br>1 tbsp. SUNBUTTER | 26<br>**BREAKFAST**<br>½ c. MANGO CHUNKS<br>⅓ c. CORN CHEX CEREAL<br>**LUNCH**<br>⅓ c. ***Egg Salad***<br>¼ c. BABY CARROTS (no dressing)<br>¼ c. FRESH STRAWBERRIES<br>1 sl. WHOLE WHEAT BREAD<br>**PM SNACK**<br>½ c. JICAMA & CUCUMBER STICKS<br>VEGETABLE DRESSING<br>6 ea. WHEAT THIN CRACKERS | 27<br>**BREAKFAST**<br>1 ea. FRESH BANANA<br>⅓ c. CHEERIOS<br>**LUNCH**<br>¾ c.* ***Greek Chicken Salad***<br>(diced chicken, cucumbers, tomatoes & olives) WITH FETA CHEESE DRESSING<br>¼ c. FRESH APPLE<br>½ ea. WHOLE WHEAT PITA BREAD<br>**PM SNACK**<br>1 sl. RAISIN BREAD<br>1 tbsp. SUNBUTTER |
| 30<br>**BREAKFAST**<br>½ c. FRESH APPLE<br>⅓ c. CORNFLAKES<br>**LUNCH**<br>⅜ c. ***Baja Bean Taco***<br>(kidney beans, pinto beans & salsa)<br>⅛ c. SHREDDED LETTUCE<br>¼ c. FRESH KIWI<br>1 ea. WHOLE CORN TORTILLA<br>**PM SNACK**<br>½ c. DICED PEACHES<br>1 ea. MOZZARELLA CHEESE STICK | | **ALL BREAKFAST & LUNCH SERVED WITH 1% LOW-FAT MILK**<br>*Indicates vegetable included in main dish<br>**WATER IS OFFERED THROUGHOUT THE DAY** | Week Of The Young Child<br>April 16th – 20th<br> | |

**CAO Monthly Report**
**CSBG and Weatherization Programs**
**Year-to-Date Expenditures**
**As of March 31, 2018**

**1. 2017 LIHEAP WX**
Contract # 17B-3005
Term: Oct. 1, 2016 - December 31, 2018
Amount: WX $ 963,937

| | | |
|---|---|---|
| Total Contract | $ | 963,937 |
| Expenditures | | (901,227) |
| Balance | $ | 62,710 |
| Expended | | 93% |

**2. 2017 LIHEAP ECIP/EHA 16**
Contract # 17B-3005
Term: Oct. 1, 2016 - December 31, 2018
Amount: EHA 16 $ 1,034,329

| | | |
|---|---|---|
| Total Contract | $ | 1,034,329 |
| Expenditures | | (984,536) |
| Balance | $ | 49,793 |
| Expended | | 95% |

**4. 2018 COMMUNITY SERVICES BLOCK GRANT (CSBG)**
Contract # 18F-5007
Term: Jan. 1, 2018 - December 31, 2018
Amount: $ 838,958

| | | |
|---|---|---|
| Total Contract | $ | 838,958 |
| Expenditures | | (90,984) |
| Balance | $ | 747,974 |
| Expended | | 11% |

**fldr/fn:CAO Monthly Reports/WX YTD Exp-CAO Mo Rprt 3-2018**

# COMMUNITY SERVICES BUREAU

## SUMMARY CREDIT CARD EXPENDITURE

**Agency: Community Services Bureau**

**Month: March 2018**

**Credit Card: Visa/U.S. Bank**

| Authorized Users | |
|---|---|
| C. Rand, Bureau Dir | xxxx8798 |
| K. Mason, Div Mgr | xxxx2364 |
| C. Reich, Div Mgr | xxxx4959 |
| S. Kim, Sr. Bus. Systems Analyst | xxxx1907 |
| C. Johnson, AD | xxxx0220 |
| J. Rowley, AD | xxxx2391 |
| P. Arrington, AD | xxxx3838 |
| I. Renggenathen, AD | xxxx0494 |
| R. Radeva, PSA III | xxxx1899 |
| Corporate Acct. Number | xxxx5045 |

| Acct. code | Stat. Date | Card Account # | Amount | Program | Purpose/Description |
|---|---|---|---|---|---|
| 2100 | 03/22/18 | xxxx1907 | 308.33 | EHS-Child Care Partnership | Office Exp |
| 2100 | 03/22/18 | xxxx1907 | 29.55 | HS Basic Grant | Office Exp |
| 2100 | 03/22/18 | xxxx1907 | 317.86 | Indirect Admin Costs | Office Exp |
| 2100 | 03/22/18 | xxxx8798 | (33.17) | HS Basic Grant | Office Exp |
| 2100 | 03/22/18 | xxxx8798 | 121.91 | HS Basic Grant | Office Exp |
| | | | **744.48** | | |
| | | | | | |
| 2102 | 03/22/18 | xxxx4959 | 81.46 | HS Basic Grant | Books, Periodicals |
| 2102 | 03/22/18 | xxxx4959 | 4,286.52 | EHS Basis Grant | Books, Periodicals |
| 2102 | 03/22/18 | xxxx4959 | 256.43 | EHS-Child Care Partnership #2 | Books, Periodicals |
| 2102 | 03/22/18 | xxxx2364 | 421.80 | HS Basic Grant | Books, Periodicals |
| | | | **5,046.21** | | |
| | | | | | |
| 2131 | 03/22/18 | xxxx0494 | 1,037.00 | Bayo Vista Site Costs | Minor Furniture/Equipment |
| 2131 | 03/22/18 | xxxx0494 | 110.98 | Las Deltas Site Costs | Minor Furniture/Equipment |
| | | | **1,147.98** | | |
| | | | | | |
| 2303 | 03/22/18 | xxxx1907 | 523.45 | CSD Liheap PGE Assistance | Other Travel Employees |
| 2303 | 03/22/18 | xxxx2364 | (399.04) | HS Basic Grant | Other Travel Employees |
| | | | **124.41** | | |
| | | | | | |
| 2467 | 03/22/18 | xxxx4959 | 30.00 | HS Basic Grant | Training & Registration |
| 2467 | 03/22/18 | xxxx4959 | 18.00 | EHS-Child Care Partnership #2 | Training & Registration |
| 2467 | 03/22/18 | xxxx4959 | 12.00 | EHS-Child Care Partnership | Training & Registration |
| 2467 | 03/22/18 | xxxx4959 | 35.00 | EHS Basis Grant | Training & Registration |
| 2467 | 03/22/18 | xxxx1907 | 50.00 | Child Care Svs Program | Training & Registration |
| 2467 | 03/22/18 | xxxx1907 | 50.00 | HS Basic Grant | Training & Registration |
| 2467 | 03/22/18 | xxxx8798 | 2,100.00 | HS Basic Grant | Training & Registration |
| 2467 | 03/22/18 | xxxx3838 | 100.00 | HS Admin Charges | Training & Registration |
| 2467 | 03/22/18 | xxxx1899 | 1,395.00 | HS Basic Grant | Training & Registration |
| 2467 | 03/22/18 | xxxx1899 | 1,390.00 | EHS T & TA | Training & Registration |
| 2467 | 03/22/18 | xxxx1899 | (25.00) | GM III CS | Training & Registration |
| 2467 | 03/22/18 | xxxx1899 | (15.00) | HS Basic Grant | Training & Registration |
| 2467 | 03/22/18 | xxxx2391 | 640.00 | HS Basic Grant | Training & Registration |
| | | | **5,780.00** | | |
| | | | | | |
| 2477 | 03/22/18 | xxxx8798 | 620.76 | EHS-Child Care Partnership #2 | Educational Supplies |
| 2477 | 03/22/18 | xxxx3838 | 2,285.00 | HS Parent Services | Educational Supplies |
| 2477 | 03/22/18 | xxxx3838 | 217.28 | HS Basic Grant | Educational Supplies |
| 2477 | 03/22/18 | xxxx2391 | 134.10 | HS Basic Grant | Educational Supplies |
| | | | **3,257.14** | | |
| | | | | | |
| 2479 | 03/22/18 | xxxx1899 | 615.00 | Indirect Admin Costs | Other Special Dpmtal Exp |
| | | | **615.00** | | |
| | | | | | |
| 2490 | 03/22/18 | xxxx2364 | 254.97 | HS Basic Grant | Misc Services/Supplies |
| 2490 | 03/22/18 | xxxx0494 | 83.01 | Brookside Site Costs | Misc Services/Supplies |
| 2490 | 03/22/18 | xxxx0494 | 67.43 | Verde Site Costs | Misc Services/Supplies |
| 2490 | 03/22/18 | xxxx0220 | 550.00 | Los Arboles Site Costs | Misc Services/Supplies |
| 2490 | 03/22/18 | xxxx0220 | 365.85 | HS Basic Grant | Misc Services/Supplies |
| | | | **1,321.26** | | |
| | | | | | |
| | | **Total** | **18,036.48** | | |

Contra Costa County

To: Board of Supervisors

From: Brian M. Balbas, Public Works Director/Chief Engineer

Date: May 22, 2018

Subject: Disposal of Surplus Property

**RECOMMENDATION(S):**
DECLARE as surplus and AUTHORIZE the Purchasing Agent, or designee, to dispose of fully depreciated vehicles and equipment no longer needed for public use, as recommended by the Public Works Director, Countywide.

**FISCAL IMPACT:**
No fiscal impact.

**BACKGROUND:**
Section 1108-2.212 of the County Ordinance Code authorizes the Purchasing Agent to dispose of any personal property belonging to Contra Costa County and found by the Board of Supervisors not to be required for public use. The property for disposal is either obsolete, worn out, beyond economical repair, or damaged beyond repair.

**CONSEQUENCE OF NEGATIVE ACTION:**
Public Works would not be able to dispose of surplus vehicles and equipment.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

Contact: Nida Rivera, (925) 313-2124

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:**

ATTACHMENTS

Surplus Vehicles & Equipment

ATTACHMENT TO BOARD ORDER **MAY 22, 2018**

| Department | Description/Unit/Make/Model | Serial No. | Condition<br>A. Obsolete B. Worn Out<br>C. Beyond economical repair<br>D. Damaged beyond repair |
|---|---|---|---|
| PUBLIC WORKS | 1998 FORD LT-9500 DUMP TRUCK #6856 (116346 MILES) | 1FDYW96K6WVA16757 | C. BEYOND ECONOMICAL REPAIR |
| SHERIFF | 2013 FORD INTERCEPTOR #2336 (116731 MILES) | 1FAHP2MT4DG201966 | B. WORN OUT |
| SHERIFF | 2009 FORD EXPLORER #3703 (101694 MILES) | 1FMEU73E49UA05312 | C. BEYOND ECONOMICAL REPAIR |
| SHERIFF | 2010 FORD CROWN VIC. #2028 (96365 MILES) | 2FABP7BV5AX115434 | C. BEYOND ECONOMICAL REPAIR |
| SHERIFF | 2011 FORD CROWN VIC. #2051 (91067 MILES) | 2FABP7BV2BX152362 | C. BEYOND ECONOMICAL REPAIR |
| PROBATION | 2004 CHEVY CAVALIER #0919 (41354 MILES) | 1G1JC52F747257446 | B. WORN OUT |
| PUBLIC WORKS | 1996 FORD E-250 CARGO VAN #4454 (122471 MILES) | 1FTFE24H7THB67761 | B. WORN OUT |
| SHERIFF | 1987 UTILITY TOILET #8500 () | 1M9K17101EA069116 | C. BEYOND ECONOMICAL REPAIR |
| PUBLIC WORKS | 2002 FORD TAURUS #0305 (99754 MILES) | 1FAFP52U22A114023 | B. WORN OUT |
| AGRICULTURE | 2002 FORD RANGER #5040 (103986 MILES) | 1FTYR10E02PA63992 | B. WORN OUT |
| PUBLIC WORKS | 2013 DODGE RAM C/V #4318 (112274 MILES) | 2C4JRGAG5DR658746 | B. WORN OUT |
| FIRE PROTECTION DISTRICT | 1984 INTERNATIONAL S-1800 FIRE TRUCK #102 (20228 MILES) | 1HTLFHYL5EHA19814 | B. WORN OUT |
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Contra
Costa
County

To: Board of Supervisors

From: Joseph E. Canciamilla, Clerk-Recorder

Date: May 22, 2018

Subject: Approve Permit for Use of Mt. Diablo Summit Observation Deck for Civil Wedding Ceremonies on May 25, 2018

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the County Clerk-Recorder, or designee, to execute a one-day use permit, including modified indemnification language, with the State of California Department of Parks and Recreation for the use of the Mt. Diablo Summit Observation Deck to conduct civil wedding ceremonies.

**FISCAL IMPACT:**
None

**BACKGROUND:**
The County Clerk-Recorder will be conducting civil wedding ceremonies at the Mt. Diablo Summit Observation Deck on May 25, 2018. Use of the observation deck requires a Special Event Use Permit in which the County agrees to indemnify and hold the grantor harmless for any claims arising out the County's performance under this agreement.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Clerk-Recorder Division will be unable to conduct ceremonies at the Mt. Diablo Summit Observation Deck.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact:
925-335-7919

By: , Deputy

**cc:**

Contra Costa County

To: Board of Supervisors

From: Kathy Gallagher, Employment & Human Services Director

Date: May 22, 2018

Subject: California State University Service Learning Program / Work Experience

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the Employment and Human Services Director, or designee, to execute a non-financial agreement containing modified indemnification language with California State University, East Bay for the student work experience program and use of the Community Services Bureau Head Start Childcare facilities for the period January 1, 2018 through December 31, 2023.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
California State University, East Bay (CSUEB) students will access Employment and Human Services, Community Services Bureau (CSB) Head Start facilities for work experience placement. CSUEB participants will be placed in CSB offices and/or childcare facilities to gain work experience in office skills and childcare. CSUEB will coordinate and consult with the CSB director, or designee, regarding all use of the facilities by the staff and program participants. CSUEB will provide oversight, monitoring, instruction and academic credits for the program participants.

The non-financial agreement includes an indemnification against any claim arising solely out of the performance of this agreement.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Cassandra Youngblood, (925) 681-6389

**cc:** Nasim Eghlima, Camilla Rand

CONSEQUENCE OF NEGATIVE ACTION:

California State University, East Bay student work experience participants could not use the Community Services Bureau Head Start Childcare program and facilities for continued work experience training.

CHILDREN'S IMPACT STATEMENT:

The Community Services Bureau of the Employment & Human Services Department supports three of Contra Costa County's community outcomes - Outcome 1: "Children Ready for and Succeeding in School," Outcome 3: "Families that are Economically Self-sufficient," and, Outcome 4: "Families that are Safe, Stable, and Nurturing." These outcomes are achieved by offering comprehensive services, including high quality early childhood education, nutrition, and health services to low-income children throughout Contra Costa County.

ATTACHMENTS

CSUEB MOU

# CALIFORNIA STATE UNIVERSITY, EAST BAY
## CLINICAL GROUP AND PRECEPTOR NURSING EXPERIENCE AND HEAD START CHILD CARE FACILITIES USE AGREEMENT

**THIS AGREEMENT,** made and entered into this 1st day of January, 2018, pursuant to Education Code 89036, by and between the Trustees of the California State University, hereinafter called the **"TRUSTEES,"** on behalf of California State University. East Bay, hereinafter called the **"UNIVERSITY,"** and Contra Costa County Employment and Human Services Department on behalf of Community Services Bureau/Head Start, hereinafter called the **"FACILITY."**

**WITNESSETH**

**WHEREAS,** the **TRUSTEES** have approved a Nursing Program for the **UNIVERSITY** and such program requires Preceptor Nursing experience and the use of Community Health education; and

**WHEREAS,** the State of California - Board of Registered Nursing (BRN) accredited the **UNIVERSITY** as a School of Nursing under the Nursing Practice Act; and

**WHEREAS,** it is to the mutual benefit of the parties hereto that students of the **UNIVERSITY** Nursing program use the Head Start Child Care facilities of the **FACILITY** for their Head Start Child Care Group and/or Preceptor Nursing experience.

**NOW, THEREFORE,** in consideration of the covenants, conditions, and stipulations, hereinafter expressed and in consideration of the mutual benefits to be derived therefore, the parties hereto agree as follows:

**I. FACILITY SHALL:**

A. Permit each student who is deemed clinically qualified and designated by the **UNIVERSITY** pursuant to Paragraph IIA. below to receive Head Start Child Care and/or Preceptor Nursing experience at the **FACILITY** in the hereinafter listed types of nursing, and shall furnish, and permit such students and **UNIVERSITY** Nursing instructors free access to, appropriate facilities that have been determined to be consistent with **UNIVERSITY'S** written objectives for such experience at the Community Health Education.

B. Furnish appropriate Head Start Child Care facilities, on a rotational basis, in such a manner that there will be no conflict in the use thereof between the **UNIVERSITY** students and students from other education institutions, if any.

C. Site is not supervised by State of California – Board of Registered Nursing (BRN).

D. Arrange for **UNIVERSITY** faculty and student orientations to include (but not limited to): facility physical plant, policies, procedures, resources, and regulations.

E. Assure that **FACILITY** staff will provide adequate supervision in cooperation with **UNIVERSITY** Clinical Coordinator.

F. **FACILITY** and **UNIVERSITY** personnel will designate lines of communication and establish a plan for continuing communication at the beginning of each year.

G. Have the right, after consultation with the **UNIVERSITY** to accept/refuse/terminate placement of a student based on prerequisite preparation or performance.

I. The student shall bear all expenses as required should any student become sick or injured by conditions arising out of or in the course of said student's experience at the **FACILITY.**

J. Retain responsibility for Head Start Facility.

K. Notify the **UNIVERSITY'S** Clinical Group and/or Preceptor Nursing instructors, in advance, of any change in the **FACILITY'S** Manager appointments.

**II. TRUSTEES, THROUGH THE UNIVERSITY, SHALL:**

A. Designate the students who are enrolled in the Nursing Program of the **UNIVERSITY** to be assigned at the **FACILITY** in such numbers as are mutually agreed to by both parties and schedule the learning experience of the students in conformity with the calendar of the **UNIVERSITY** academic year.

B. Establish a rotation plan for the Clinical **Group** and/or Preceptor Nursing by mutual agreement between the **FACILITY'S** Director and the **UNIVERSITY'S** coordinator in the Department of Nursing or their duly authorized representatives.

C. Monitor and coordinate with **FACILITY** all instruction, supervision and control of assigned students to be provided at **FACILITY.**

D. Keep all attendance and academic records of student's participating in said program.

E. Certify to **FACILITY** at the time each student first reports to the **FACILITY** to participate in said program that said student will be in compliance with the facilities' Health Screening policy for students.

F. Be responsible for direct supervision of students in the Clinical Group Nursing Experience including, professional activities and conduct while in the **FACILITY.** Be responsible for the coordination of instruction, supervision and evaluation of students in the Preceptor Nursing Experience.

G. Require every student to conform to all applicable **FACILITY** policies, procedures, and regulations, and all requirements and restrictions specified jointly by representatives of the **UNIVERSITY** and **FACILITY** and participate in **FACILITY** orientation.

H. Require **UNIVERSITY'S** Nursing instructors to notify **FACILITY'S** Director in advance, of student nursing schedules, student Clinical Group and/or Preceptor assignments and changes in clinical assignments.

I In consultation and coordination with the **FACILITY'S** Community Health Education Manager (s) plan for the Clinical Group and/or Preceptor Nursing experience to be provided to students under this agreement.

J In consultation and coordination with the **FACILITY'S** Director of Nursing arrange for periodic conferences between appropriate representatives of the **UNIVERSITY** and **FACILITY** to review and evaluate resources available in relation to CSU's Nursing program's written learning objectives and in the event either resources or objectives change. Student Placements will commence only when resources and objectives are compatible.

K. Provide and be responsible for the care and control of the **UNIVERSITY'S** educational supplies, materials and equipment used for instruction during said program.

L. Furnish to the **FACILITY,** or have each student furnish to **FACILITY** upon request, copies of the State-approved fingerprinting background check clearance and the Certificates of Clearance documentation that each student's immunizations and blood-borne pathogens training are in accordance with the **FACILITY'S** health policies. CSUEB Nursing students will provide evidence of a current TB clearance and immunity to pertussis,

measles and influenza.

M. Agree that no person, patient, client, staff or student shall, regardless of religion, race, color, national origin, ancestry, ethnic group identification, sex, actual or perceived sexual orientation and/or gender identity, physical handicap, mental disability, medical condition, marital status, age (over 40) be excluded from participation in, be denied the benefits of, or be subjected to discrimination under this agreement.

O. Additionally, it is agreed that if a student with an approved disability accommodation is placed both CSUEB and Facility share the responsibility to meet the legal requirement to provide reasonable accommodations at the workplace under the American with Disabilities Act.

P. Mandatory Instruction and Reporting: Before a student is assigned to the **FACILITY** for placement in a student teaching assignment the **UNIVERSITY** shall instruct such Student on the applicable state and federal laws regarding unlawful discrimination (California Education Code sections 200-283 and Title IX, Section 504, Title VI) and mandated reporting of child abuse (Penal Code sections 11164-11174.35).

**III STUDENTS SHALL:**

A. Wear a name pin at all times, and the name pin or other visual item such as a distinctive uniform or school patch, will identify the caregiver as a student.

B. Maintain confidentiality of patient information.

## IV INSURANCE

**UNIVERSITY** shall require that students and CSU staff provide and maintain professional liability coverage in the amount of $1,000,000 per claim with a total of $3,000,000 in aggregate, with insurance carriers approved by **FACILITY**, in accordance with **FACILITIE**'s bylaws, rules, and regulations.

**FACILITY** shall require that instructors provide and maintain professional liability coverage in the amount of $1,000,000 per claim with a total of $3,000,000 in aggregate, with insurance carriers approved by **UNIVERSITY**, in accordance with **UNIVERSITY**'s bylaws, rules, and regulations.

**V.** The **State of California** has elected to be self-insured for its general liability, vehicle liability, worker's compensation and property exposures through an annual appropriation from the General Fund. As a STATE agency, the California State **UNIVERSITY**, Office of the Chancellor, the TRUSTEES, and its system of campuses are included in this self-insured program. Under this form of insurance, the STATE and its employees are insured for any tort liability that may develop through carrying out office activities, including STATE office operation on non-state owned property in an amount no less than $1,000,000 per person, and no less than $2,000,000 aggregate per occurrence, and that vehicle insurance (where applicable) is in effect with a minimum coverage of $1,000,000 per occurrence.

The **FACILITY** shall procure and maintain General Liability Insurance, comprehensive or commercial form with $1,000,000 minimum limit for each Occurrence and minimum limit of $2,000,000 General Aggregate, as mutually agreed upon for this placement.

The **STATE of CALIFORNIA** has entered into a Master Agreement with the State Compensation Insurance Fund to administer Workers' Compensation Benefits for all State employees, as required by the Labor Code.

The **STATE OF CALIFORNIA** shall provide notice to students that neither **STATE** nor **FACILITY** will provide Worker's Compensation coverage in the event of injury or condition sustained in relationship to activities contemplated by this agreement.

## VI. INDEMNIFICATION

Each entity agrees to indemnify, defend and save harmless the other, its officers, agents and employees from any and all claims and losses accruing or resulting to any other person, firm or corporation furnishing

or supplying work, service, materials or supplies in connection with the performance of this Contract, and from any and all claims and losses accruing or resulting to any person, firm or corporation which may be injured or damaged in the performance of this Contract.

VII. It is understood and agreed that **FACILITY** shall have the right to require all students who are designated for participation in clinical education hereunder to agree in writing to release **FACILITY** and all of its representatives from liability for any and all acts performed in good faith and without malice in connection with such clinical education.

VIII. It is understood and agreed that **FACILITY** shall have the right to require all students who are designated for participation in clinical education hereunder to authorize and consent in writing to the release of information by **FACILITY** and its representatives to **UNIVERSITY** concerning student's competence, ethics, character and performance in the program as long as such releases of Information is made in good faith and without malice and to agree in writing to release **FACILITY** and all of its representatives from liability for so doing.

**IX.** **UNIVERSITY** agrees that it shall not use the name of the **FACILITY** in any advertising campaign or in the solicitation of prospective students without the prior written approval of the **FACILITY** thereto.

**FACILITY** agrees that it shall not use the name of the **UNIVERSITY** in any advertising campaign or in the solicitation of prospective students without the prior written approval of the **UNIVERSITY** thereto.

**X.** **UNIVERSITY** shall not assign, sell, or otherwise transfer this agreement or any interest herein without prior written consent of **FACILITY** thereto; provided, however, such consent shall not be unreasonably withheld. This agreement shall be binding upon and inure to the benefit of the parties and their respective successors and assigns.

**FACILITY** shall not assign, sell, or otherwise transfer this agreement or any interest herein without prior written consent of **UNIVERSITY** thereto; provided, however, such consent shall not be unreasonably withheld. This agreement shall be binding upon and inure to the benefit of the parties and their respective successors and assigns.

## XI. CONFIDENTIALITY.

Student agrees to the provisions of the Health Insurance Portability and Accountability Act (HIPAA), including but not limited to:

a.) No student shall have access to or have the right to receive any client records, except when necessary in the regular course of the clinical experience. The discussion, transmission, or narration in any form by students of any individually identifiable client information, medical or otherwise, obtained in the course of the Program is forbidden except as a necessary part of the practical experience.

b.) Neither **UNIVERSITY** nor its employees or agents shall be granted access to individually identifiable information unless the client has first given consent using a form approved by **FACILITY** that complies with applicable state and federal law, including the Health Insurance Portability and Accountability Act ("HIPAA") and its implementing regulations.

c.) **FACILITY** shall reasonably assist **UNIVERSITY** in obtaining client consent in appropriate circumstances. In the absence of consent, students shall use de-identified information only in any discussions about the clinical experience with **UNIVERSITY**, its employees, or agents.

## XII. TERM OF AGREEMENT

This Agreement shall become effective on the 1st day of January 2018 and shall continue until December 31, 2023 provided however, it may be terminated by either party after giving the other party six months' advance written notice of its intention to so terminate; provided further, however, that any such termination by the **FACILITY** shall not be effective, at the election of the **UNIVERSITY**, as to any student who at the date of mailing of said notice by the

**FACILITY**, was participating in said program until such student has completed the program for the then current academic year. Exhibit A is made part of the Agreement.

It is further understood that **FACILITY** retains professional and administrative responsibility for services rendered.

Any written notice given under this Paragraph V shall be sent by registered mail to the following persons, as the case may be:

Notice to the **FACILITY**: to:

Contra Costa County Employement & Human Services Dept.
Community Services Bureau/HeadStart
Attn: Camilla Rand, Director
1203 West 10th Street.,Building - D
Antioch CA 94509
925-427-5583 Office/925-305-3615 Cell
dmarsee@edsd .cccounty .us

Notice to the **UNIVERSITY**:

Mail three copies to:

California State University, East Bay
Chris Lam Vazquez, Contract Administrator
Procurement Office – SA 2750
25800 Carlos Bee Blvd. | Hayward, CA 94542-3021
510-885-7606|Email:Chris.lam-vazquez@csueastbay.edu

IN WITNESS WHEREOF, this agreement has been executed by and on behalf of the parties hereto, the day and year first above written.

Contra Cost County
Employment and Human Services Dept.
Community Services Bureau/Head Start

By: _____

Name: _____

Title: _____

Date: _____

CALIFORNIA STATE UNIVERSITY EAST BAY

By: _____

Name: Chris Lam Vazquez

Title: Contract Administrator

Date: _____

FORM APPROVED
Sharon L. Anderson, County Counsel
By Deputy _____

# EXHIBIT A

PROGRAM
DIRECTORS

The Program Director(s) for each Program are listed below. With respect to each Program, prior to any Student, Faculty member, or Clinical Instructor participating in Clinical Training under this Agreement, the SCHOOL and the UNIVERSITY shall provide with other with copy of each Program Director's contact information

**III.** *UNIVERSITY: California State University, East Bay – Nursing Program*

A. PROGRAM DIRECTOR

| | |
|---|---|
| Name: | Adrienne Carlson, RN MS |
| Phone: | (925) 602-6768 |
| Alt. Phone: | 510-919-7021 |
| Email: | adrienne.carlson@csueastbay.edu |
| Mailing Address: | California State University East Bay Department of Nursing & Health Science 25800 Carlos Bee Blvd \| Hayward, CA 94542 |

b. CSUEB – Authorized Signature Information

| | |
|---|---|
| Name & Title: | Chris Lam Vazquez |
| Phone: | 510-885-7606 |
| Email: | Chris.lam-vazquez@csueastbay.edu |
| Mailing Address: | California State University East Bay Procurement Office - Rm: SA 2755 \| 25800 Carlos Bee Blvd \| Hayward, CA 94542 |

2: *Facility: Contra Costa County Employment & Human Services Dept.*

a. *PROGRAM DIRECTOR*

| | |
|---|---|
| Name: | Debi Marsee |
| Title: | Comprehensive Service Manger |
| Telephone: | (925) 427-5583 cell (925) 305-3615 |
| Email: | dmarsee@edsd.cccounty.us |
| Mailing Address: | 1203 West10th Street, Building –D, Antioch Ca. 94509 |

*a. Authorized Signee*

| | |
|---|---|
| Name: | Camilla Rand |
| Title: | *Director of Contra Costa County, Employment & Human Services Dept, Community Services Bureau/Head Start* |
| Telephone: | (925) 681-6301 |
| Email: | crand@ehsd.cccounty.us |
| Mailing Address: | |

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: Contra Costa County Public Law Library Board of Trustees 2017 Annual Report

**RECOMMENDATION(S):**
ACCEPT the Contra Costa County Public Law Library Board of Trustees 2017 Annual Report.

**FISCAL IMPACT:**
No fiscal impact

**BACKGROUND:**
Per Resolution No. 2011/497, each Advisory Body shall submit annually to the Board of Supervisors a report on its activities, accomplishments, membership attendance, required training/certification and proposed work plan or objectives for the following year.

**CONSEQUENCE OF NEGATIVE ACTION:**
If the report is not accepted, the Board will not have an official record of the Public Law Library Board of Trustees activities in the past year.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jami Napier, (925) 335-1908

**cc:**

ATTACHMENTS

2017 Public Law Library Annual Report

RECEIVED
MAY 0 3 2018
CLERK BOARD OF SUPERVISORS
CONTRA COSTA CO.

# CONTRA COSTA COUNTY PUBLIC LAW LIBRARY ADVISORY BODY 2017 ANNUAL REPORT TO CONTRA COSTA COUNTY BOARD OF SUPERVISORS

**ADVISORY BODY:** Contra Costa County Public Law Library Board of Trustees

**MEETING TIME:** 12:15 p.m. on the last Thursday of each month is the normal meeting time. In the case of a meeting date conflicting with a holiday, the meeting is scheduled one week earlier in the month.

**LOCATION:** Contra Costa County Public Law Library
1020 Ward Street, Floor 1
Martinez, CA 94553

**PRESIDENT DURING REPORTING PERIOD:** Hon. Susanne Fenstermacher

**STAFF PERSON:** Carey Rowan, Library Director

**REPORTING PERIOD:** January 1- December 31, 2017

## I. ACTIVITIES / ACCOMPLISHMENTS:

Administration:

- ✓ The Board of Trustees met publicly during each month of the year with the exception of February, March and December. Meetings for these three months were cancelled due to lack of quorum. A total of 9 meetings were held.

Service:

- ✓ The public law library served the people of Contra Costa County out of 3 locations, until September, at which time lack of funding forced the closure of the east county branch, housed in the Pittsburg Courthouse. This closure forces the people of east county to travel to Martinez in order to use a public law library. This may be difficult for seniors, disabled persons and the economically disadvantaged. The law library currently offers services from its main branch in Martinez and the west county branch in Richmond. Law library staff interacted with more than 45,000 users seeking services, either by telephone, email, fax, or in person.
- ✓ The law library hosted 72 programs during the year. These events included workshops covering Guardianship, Conservatorship and Small Claims, in addition to monthly Lawyer in the Library clinics.

Staffing:

- ✓ Staffing consists of 3 full-time staff members.
- ✓ Extra help (hourly) workers are used to supplement the full-time staff, especially in times of staff absence.

Outreach:

- ✓ Staffing shortages brought about by severe budget reductions necessitated decreasing the library's outreach activities again this year. The library did participate in the annual Richmond Senior Health and Information Fair last spring. A more robust outreach program can be developed if funding for the law library improves.

| TRUSTEE | II. ATTENDANCE/REPRESENTATION | | | III. TRAINING/CERTIFICATION |
|---|---|---|---|---|
| | Monthly Board Meeting Attendance | | | County-Mandated Training for Trustees |
| | Cancelled | Attended | Absent | Completed |
| Nolan Armstrong, Esq. | 3 | 4 | 5 | Yes |
| Tom Cain, Esq.* | 3 | 8 | 1 | Yes |
| Hon. Lewis Davis | 3 | 6 | 3 | Yes |
| Hon. Susanne Fenstermacher | 3 | 8 | 1 | Yes |
| Hon. Anita Santos | 3 | 7 | 2 | Yes |
| Hon. Penny Scanlon | 3 | 7 | 2 | Yes |
| Hon. Charles "Steve" Treat* | 3 | 1 | 2 | Yes |
| Vacancy | 3 | 0 | 9 | Yes |
| *No longer on the Board of Trustees. | | | | |

## IV. PROPOSED WORK PLAN / OBJECTIVES FOR 2018

A. The library's goals as specified in the 2009-2012 Strategic Plan, are still in effect:

- Provide free access to legal information throughout the county and work with the courts, government, public libraries, educational institutions and the community to expand services to all users groups.
- Provide a relevant, integrated, balanced collection of material in a variety of formats designed to meet the needs of all user groups, and provide trained staff to assist users in accessing the using the material.
- Ensure adequate infrastructure within the library, including providing and maintaining reliable, up-to-date technology to meet the diverse needs of library staff and library users.
- Develop and provide specific collections, programs and services designed to meet the needs of self-represented litigants.
- Strengthen community awareness of the role and value of the law library.
- Work with public libraries throughout the county to make certain that all libraries are equipped to provide basic legal reference and research assistance to users.
- Work to ensure long-term funding for the county law library system.

B. The following areas have been identified for concentrated effort during 2018:

- Public service to the bar, the bench and the community will remain the law library's top priority.
- The law library will strive to increase visibility and awareness among the people of Contra Costa County.
- Collection development and collection analysis will be ongoing throughout the year.
- Our plan is to have a Lawyer in the Library clinic twice monthly, with one session scheduled for Martinez and another session scheduled for Richmond each month. This program depends on being able to get attorneys to volunteer for slots at the clinics.
- The law library-sponsored Conservatorship training will feature two tracks again this year: One track geared towards the needs of young adults and another track focusing on the needs of seniors. We will work closely with the probate court in this area.
- Collaborative efforts with other law library professionals to address California law libraries' declining revenues will be a critical focus during the year. Like other county law libraries in California, the Contra Costa County Public Law Library needs a solution to decreased funding resulting from sharp revenue declines in order to continue its long tradition of service to the people of Contra Costa County.

C. The law library will strive to meet the challenges of 2018.

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: Clarification of April 17, 2018 Board Order Item C. 32 with California Lawyers for the Arts

**RECOMMENDATION(S):**
APPROVE clarification of Board action of April 17, 2018 (Item C.32), which authorized the County Administrator to execute a Memorandum of Understanding and accept grant funding from California Lawyers for the Arts for the provision of the Arts in Correction-County Jails Demonstration Project, to reflect the correct term of May 1, 2018 through August 31, 2018, with no change to the grant funding amount of up to $3,370.

**FISCAL IMPACT:**
There is no fiscal impact with this clarification action.

**BACKGROUND:**
On April 17, 2018, the Board of Supervisors approved the execution of a Memorandum of Understanding and acceptance of grant funding from the California Lawyers for the Arts in an amount not to exceed $3,370 for the provision of the Arts in Correction-County Jails Demonstration Project for the period from May 1, 2018 through July 31, 2018. The project provides high quality teaching artists in the Marsh Creek Detention Facility to teach drawing classes to inmates. The purpose of this board order is to correct an administrative error and have the term read as May 1, 2018 through August 31, 2018.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Enid Mendoza, (925) 335-1039

**cc:**

CONSEQUENCE OF NEGATIVE ACTION:

If this clarification is not approved, the project will have to end prematurely and not all interested inmates may be able to participate due to the reduced number of classes.

Contra Costa County

To: Board of Supervisors

From: John Kopchik, Director, Conservation & Development Department

Date: May 22, 2018

Subject: Mortgage Credit Certificate Program Policies

**RECOMMENDATION(S):**
ADOPT updated policies for the implementation of the Mortgage Credit Certificate program.

**FISCAL IMPACT:**
No impact to the General Fund. Department of Conservation and Development staff costs to manage the program are covered through participating lender and Mortgage Credit Certificate recipient fees.

**BACKGROUND:**
Contra Costa County Department of Conservation and Development began administration of the Mortgage Credit Certificate (MCC) program in 1991. MCCs provide financial assistance to first-time homebuyers by providing an income tax credit equal to 20 percent of annual mortgage interest. The program is available throughout the County. The County applies annually to the California Debt Limit Allocation Committee (CDLAC) for an allocation of single-family mortgage revenue bonds and then converts the allocation into MCCs.

County staff established program policies and procedures in 1991. On December 15, 2016, CDLAC adopted new issuance and post-insurance compliance procedures for both multi-family and single-family mortgage revenue bonds.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Kara Douglas, 674-7880

**cc:**

BACKGROUND: (CONT'D)

The attached MCC guidelines include a new compliance section to conform to the CDLAC requirements. The compliance section does not change any of the current staff practices, but simply adds the procedures to the program policies.

CONSEQUENCE OF NEGATIVE ACTION:

If the Board of Supervisors does not adopt MCC policies, the County will not be in compliance with current requirements from CDLAC requirements and will no longer be eligible to participate in the MCC program.

ATTACHMENTS

Mortgage Credit Certificates Program Policies

# County of Contra Costa

# Mortgage Credit Certificate Program Policies

(Adopted by the Board of Supervisors on ____)

## Summary

The Mortgage Credit Certificate (MCC) Program, authorized by Congress in the Tax Reform Act of 1984, is an alternative to mortgage revenue bond-backed financing and provides financial assistance to "first time homebuyers"[1] for the purchase of new or existing single-family housing. In 1985, the State adopted legislation authorizing local bond issuing agencies to make MCCs available in California. Contra Costa County ("County") applies annually to the California Debt Limit Allocation Committee (CDLAC) for an allocation of mortgage revenue bond-issuing authority for single-family housing and converts that allocation into a Countywide MCC program.

The MCC operates as an Internal Revenue Service (IRS) tax credit. The MCC tax credit (20 percent of annual mortgage interest paid) reduces the federal income taxes of qualified Borrowers purchasing qualified homes, thus having the effect of subsidizing their mortgage payments. The MCC will reduce the amount of federal income taxes otherwise due to the federal government from the Borrower. Therefore, the benefit to the homeowner cannot exceed the amount of federal taxes owed for the year, after other credits and deductions have been taken into account. However, the tax credit can be carried forward three tax years or until used, whichever comes first. This allocation may be used in all cities in Contra Costa County, as well as the unincorporated County. In cooperation with all of the cities in the County, the County Department of Conservation and Development administers the program.

## Definitions

The following definitions apply to the administration and operation of the County's MCC Program:

**Acquisition Cost** has the meaning given that term under Internal Revenue Code 143 (k)(3) and the regulations thereunder.

**Affidavit** means an affidavit filed in connection with the program made under oath and subject to penalties of perjury.

**Applicant** means any person who applies for an MCC under the Program.

**Close of Escrow** means the date the loan is recorded at the County Recorder's Office.

**CDLAC Resolution** means the Resolution attesting to the transfer of private activity bond allocation adopted by CDLAC

**County** means Contra Costa County Conservation and Development Department.

**Date of Issue** means the date on which the escrow closing occurs (i.e., the deed is recorded).

**Eligible Dwelling** means new or previously-owned single-family, owner occupied houses, townhouses, condominiums, mobile homes, and manufactured housing. (See definition of Manufactured Housing - Mobile Homes, below). The property must be located in Contra Costa County. Ineligible dwellings include: unattached mobile homes and trailers, unimproved land, investment or rental property and vacation homes. No more than 15 percent of an eligible dwelling (i.e., based on useable square footage) can be used for purposes other than a principal residence (i.e., office, rental, etc).

**Existing Home** means a dwelling unit that has been previously occupied prior to loan commitment.

**Income** as defined in Appendix A to the Program Manuel for the Contra Costa County MCC Program.

**Issue Date** means the date of close of escrow (record date).

[1] A "first-time homebuyer" may not have owned a home in the previous three years.

**Issuer** means the Contra Costa County Department of Conservation and Development Department.

**Lender (Participating Lender)** means a financial institution which is licensed to do business in the State of California, has met all of the requirements established by the County to participate as a Lender in the MCC Program, and has entered into an acceptable MCC Participation Agreement with the County. A Participating Lender can be either be a funding lender, correspondent or mortgage broker. However, only a funding Lender can submit the closing MCC documents.

**Loan** means an extension of credit provided to an Eligible Borrower to finance the purchase of an Eligible Dwelling. The Mortgage Credit Certificate applies to such loan.

**MCC Program** means the Mortgage Credit Certificate Program established by the Contra Costa County Department of Conservation and Development and administered by the County pursuant to the rules and regulations included in a MCC Program Manual promulgated by the County.

**Mortgage Credit Certificate Rate** means that rate specified by the County in the Mortgage Credit Certificate. The rate established by the County for the MCC Program is 20 percent.

**Mortgage Credit Certificate of "MCC"** means a tax credit designed to reduce the federal income tax of a qualified buyer purchasing a qualified home in order that he/she will have more disposable income to apply toward his/her mortgage payments. The MCC is issued by the County pursuant to Section 25 of the Internal Revenue Code of 1986, as amended, and applicable to state and local requirements.

**New Home** means a dwelling unit that is proposed to be constructed, currently under construction, or existing but not previously occupied.

**Ownership** means any of the following interests in residential real property or in a mobile home classified as personal property:

- fee simple interest
- joint tenancy
- tenancy in common
- interest of a tenant-shareholder in a cooperative
- life estate
- interest held in trust for the Applicant that would constitute a present ownership interest if held by the Applicant.

Ownership does not include a remainder interest, a lease with or without an option to purchase or any interest acquired on the execution of the purchase contract.

**Principal Residence** for purposes of prior homeownership, "principal residence" means (1) a single-family house, (2) condominium or townhouse unit, (3) stock held by a tenant-stockholder in a cooperative housing corporation [as those terms are defined in the Internal Revenue Code Section 216 (b)(1) and (2)]; (4) occupancy of a unit in a multi-family building owned by the applicant; and (5) and manufactured home (including a mobile home) as defined under federal law which is of a type customarily used at a fixed location.

**Related Person** means a "related person," as that term is defined under Internal Revenue Code and applicable regulations.

**Single-Family and Owner-Occupied Residences** for purposes of determining eligibility of a home to be purchased under this program, the term "single-family" residence means a housing unit intended and used for occupancy by one household, (i.e., and multi-family buildings are not eligible to be purchased under this program.)

**Target Area** means Census Tracts in which 70 percent or more of the households have an income which is 80 percent or less of the statewide median family income. At the present time, target areas in Contra Costa County

include portions of Pittsburg, Bay Point, Martinez and San Pablo. Maps are available through the County's Conservation and Development Department. Target areas are not subject to the prior home ownership restriction. Maximum purchase prices can be 110 percent of average area purchase price and household income can be 120 percent of median household income for one and two person households and 140 percent of median for households of three or more persons.

## Compliance

The County operates the program in a manner consistent with the CDLAC resolution for each MCC allocation. This includes reporting requirements described below as well as participation goals such as the percentage of MCCs issued either in a Qualified Census Tract or to households earning up to 80 percent of the area median income.

Within 24 hours of converting the allocation to MCCs, the County will notify CDLAC of the conversion in the manner described in the applicable CDLAC resolution. Within 15 days of issuance of the first MCC from a new allocation, the County will submit a Report of Action Taken to CDLAC. The County will include a copy of its MCC election notice to the IRS, which is sent to the IRS concurrently with the report to CDLAC.

By March 1 of each year, the County submits its Annual Applicant Public Benefit and Ongoing Compliance Self-Certification report to CDLAC.

In addition, the County completes the IRS Form 8329 for all participating lenders and submits quarterly reports to the IRS using IRS form 8330.

## Program Operation

The County pre-approves lenders for participation in the MCC Program. A list of participating lenders may be found at http://www.co.contra-costa.ca.us/4768/Mortgage-Credit-Certificate-Program. Homebuyers apply for a Mortgage Credit Certificate with a participating Lender/Broker at the same time he/she makes a formal application for a mortgage loan. The lender submits the application package to the County.

The County assesses a non-refundable fee in applying for an MCC. Lenders work with borrowers on a first-come, first served basis. There is no allocation of Mortgage Credit Certificates by Lender. After an application is filed, the Lender will arrange with the County to reserve an allocation for an MCC-assisted mortgage loan. This reservation (MCC Commitment) will hold the MCC while the application is being processed by the Lender and the County.

## Eligibility

An MCC can only be used for new (never previously occupied) or existing (resale) single-family homes including single family detached homes, condominiums, half-plexes, duplexes, townhouses or manufactured houses (including some mobile homes) in Contra Costa County. Triplexes and four-plexes do not qualify as eligible structures.

An MCC can be used with conventional, fixed-rate or adjustable rate loans; FHA and VA loans; and privately insured loans. MCC's are not available with (tax-exempt) bond backed loans such as programs backed by the California Housing Finance Agency (CalHFA) that carry a below-market fixed interest rate.

A first time homeowner may use the tax credit provided by the MCC as long as he/she lives in home as his/her principal residence and maintains the original mortgage.

### Purchase price and income limitations

MCCs are available to first-time homebuyers within all cities in Contra Costa County, as well as in the unincorporated County. The purchase price and income limitations for MCC Program participants are set pursuant to Internal Revenue Code Sections 143(f) and by the US Department of Housing and Urban Development respectively. The current limits for Contra Costa County may be viewed at http://www.co.contra-costa.ca.us/4768/Mortgage-Credit-Certificate-Program. The

County will not underwrite the loans. Rather, all underwriting and execution of required state and federal certifications or affidavits will be performed under agency agreement by Lenders participating in the program. The County will review executed certifications and affidavits from the Lender in order to determine qualification and eligibility. Lenders process the underlying mortgages using standard procedures, with adjustments to those procedures as needed in order to satisfy MCC requirements.

## BORROWER, PURCHASE PRICE AND MORTGAGE UNDERWRITING REQUIREMENTS.

### A. OVERVIEW

For loans involving MCCs, the conventional underwriting standards are modified to reflect recognition of the MCC-derived mortgage interest credit in determining housing expense and indebtedness ratios. The secondary mortgage market and the mortgage insurance industry have established underwriting policy acceptable for their requirements for MCC-linked loans. These are available as policy statements from the mortgage lending industry.

The Borrower income, purchase price, and loan underwriting requirements discussed set forth herein are incorporated in the MCC program documents that are available for viewing at http://www.co.contra-costa.ca.us/4768/Mortgage-Credit-Certificate-Program. All applicants and program participants are required to complete and sign the appropriate MCC Program documents and attest to their validity. The Lender will be required to submit certifications on which it will state that to the best of its knowledge, no material misstatements, whether negligently or willfully made, are set forth in the program documents. The Lender must notify the County immediately if they become aware of misstatements. The County will take all lawful action to correct or modify the problem.

The Lender also should be aware and inform the Borrower that criminal penalties are provided by federal and California law if a person makes a false statement or misrepresentation so as to obtain participation in this Program.

### B. BORROWER ELIGIBILITY REQUIREMENTS.

Similar to any conventional mortgage loan program, the Borrower must meet the credit and underwriting criteria established by the participating Lender providing the mortgage loan. Based on applicable federal and state regulations, in order to qualify for an MCC, a Borrower must also meet the following requirements.

1. The Borrower may not have held an ownership interest in his/her principal residence within the past three years. The Borrower applying for an MCC cannot have had a present ownership interest in a principal residence at any time during the preceding three years ending on the date the mortgage is executed (date that the deed is recorded). This requirement does not apply to acquisitions of units in Target Areas. This requirement qualifies the Borrower as a "first-time homebuyer" under the federal regulations.

   <u>Special Exception for Housing In Target Areas</u>

   The "first-time homebuyer" requirement does not apply if the home is located in a designated "Target Area."

2. The MCC applicant must occupy the acquired residential housing as a "Principal Residence." The Borrower must use the housing being purchased with the MCC-linked mortgage as a principle residence. The Lender must obtain from the Borrower, using the program affidavits, a statement of the Borrower's intent to use the residence as his/her principal residence with a reasonable time (60 days) after the MCC is issued. This affidavit further states that the MCC holder will notify the Lender and issuer of the MCC if the residence ceases to be his/her principal residence.

   No more than 15 percent of the residence being purchased may be used for purposes other than the "principal residence" of the Borrower (e.g., office, rental, daycare operation, etc.).

3. In order to qualify for the MCC Program, the purchasers' must meet applicable income limits. Program limits are available for viewing at http://www.co.contra-costa.ca.us/4768/Mortgage-Credit-Certificate-Program.

4. The MCC may be automatically revoked if the applicant fails to comply with program requirements. An MCC may be revoked under certain circumstances

1. Strict penalties may be imposed on any applicant making a material misstatement, misrepresentation or fraudulent act on documents submitted to obtain an MCC.

Any person making a negligent material misstatement or misrepresentation in any affidavit or certification made in connection with the application for the issuance of an MCC shall be subject to all applicable fines and penalties.

C. PURCHASE PRICE REQUIREMENTS

The Borrower must comply with program purchase price limits in order to qualify. The limits vary between new (never previously occupied) housing units, existing (resale) housing units, and homes in designated target areas. See program limits available for viewing at http://www.co.contra-costa.ca.us/4768/Mortgage-Credit-Certificate-Program

D. MORTGAGE REQUIREMENTS

1. New Mortgage Requirements. A Mortgage Credit Certificate cannot be issued in conjunction with the acquisition or replacement of an existing mortgage or land contract.

2. Prohibited Mortgages.

a. First mortgages only. If a Borrower takes out a first and second mortgage, the MCC tax credit applies only to the first mortgage.

b. A Mortgage Credit Certificate shall not be used in direct or indirect connection with a qualified mortgage bond or a qualified veteran's mortgage bond.

3. No Interest Paid to Related Persons. No interest on the mortgage (or certified indebtedness) amount may be paid to a person who is a "related person", as that term is defined under the Internal Revenue Code and applicable regulations. The Lender must obtain from the Borrower, using the program affidavits, a statement to the effect that no related person has or is expected to have, and interest as a creditor in the certified indebtedness amount.

**MCC COMMITMENTS**

**A.** RESUBMISSION OF MORTGAGE CREDIT CERTIFICATE APPLICATIONS RETURNED OR REJECTED.

If an MCC application as represented by the submitted MCC Program documents and exhibits has been returned or denied by the County, any resubmission, if appropriate, must include all information which the County has determined necessary for reconsideration. An MCC application that is being submitted a second time will be reviewed in depth, and a final disposition made.

**B.** COMMITMENT FOR MORTGAGE CREDIT CERTIFICATE

1. Issuance

The County will review each MCC submission package for acceptability and completeness. Acceptable loan packages will be kept on file at the County, and an MCC Commitment will be issued to the Lender

with an expiration period of one hundred twenty (120) days after the Lender has verified income with signed Application Affidavit.

2. Extensions

With regard to any MCC Commitment which is currently outstanding and which will not close prior to the expiration date, an extension may be requested prior to the expiration date, provided that income status is re-verified.

3. Cancellations

The Lender will immediately notify the County in writing of commitments to be canceled by submitting written notification and returning the original MCC commitment. A reason for the cancellation should be included.

## C. CHANGES PRIOR TO CLOSING

1. Changes in the Applicant's financial or marital status after issuance of commitment and prior to closing.

   a. Changes in current income. The eligibility of the applicant for a loan is based upon the applicant's (and co-mortgagor's) current income (provided the loan closes 120 days after income verification by the Lender), and the MCC Program will issue its Commitment based on facts as they are determined as of the date the Commitment is issued. Subject to the foregoing, changes in the applicant's financial status occurring after the MCC Commitment whether or not foreseen or predictable at the time of the issuance of the Commitment, and changes in the working status of a spouse will not affect the validity of an MCC Commitment.

   b. Changes in marital status. If the applicant experiences a change in marital status after issuance of the Commitment and prior to loan closing, a new spouse must satisfy the prior homeownership requirements contained in the Application Affidavit, and the Lender must notify the MCC Program.

2. Changes in Homeownership Status, Acquisition Cost and Amount of Mortgage Loan after Issuance of Commitment and Prior to Closing.

   a. If the Borrower(s) acquires a present ownership interest in a principal residence prior to loan closing, the commitment shall be revoked if the residence is located in a non-target area; or

   b. If the total acquisition cost of the residence purchased in connection with the MCC increases so as to exceed the acquisition cost limitations set forth herein, the Commitment shall be revoked; or,

   c. If the amount of the loan increases, thereby causing an increase in the credit amount, the Commitment will be revoked if that increase in credit amount serves to increase the aggregate credit amount of all MCCs issued by the County above the aggregate credit limit imposed by law.

3. Other Changes in Circumstances after Issuance of MCC Commitment and Prior to Closing

   The MCC Commitment is issued in reliance upon the Closing Affidavit (Borrower), Seller's Affidavit and the Lender's Closing Certificate that the requirements necessary for issuance of a qualified MCC has been met. The Lender must immediately notify the County in writing of any change in the circumstances upon which the Commitment was issued occur so that the MCC to be issued will not meet the requirements of a qualified MCC, the Commitment will be revoked.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Proposed Changes to the 2015 Medical Staff Bylaws and Rules and Regulations

**RECOMMENDATION(S):**
APPROVE changes to the Contra Costa Regional Medical Center's 2015 Medical Staff Bylaws and Rules and Regulations, as recommended by the Medical Executive Committee, the Joint Conference Committee and Health Services Director.

**FISCAL IMPACT:**
Not applicable.

**BACKGROUND:**
The attached changes to the 2015 Medical Staff Bylaws and Rules and Regulations will bring compliance and consistency with current regulations and practices in relation to electronic medical records and hospital committee work.

**CONSEQUENCE OF NEGATIVE ACTION:**
The Contra Costa Regional Medical Center Medical Staff will have to use Medical Staff Bylaws and Rules and Regulations that are outdated.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Jaspreet Benepal, 925-370-5101

**cc:** Tasha Scott, Marcy Wilhelm, Sue Pfister

ATTACHMENTS

Proposed changes

Bylaws without track changes

Bylaws with track changes

**PROPOSED 2018 CHANGES TO THE 2015 MEDICAL STAFF BYLAWS and RULES AND REGULATIONS**

1. Update the composition and terms of several Medical Staff Committees to align with current practices and committee memberships and governance. These include the following committees with changes:
    a. PSPIC (added BH med staff representative; added voting membership to Patient Safety Officer and Patient representative and cleaned up composition language) (9.3.17)
    b. Perinatal Morbidity & Mortality Committee (added Anesthesia as core department on committee) (9.3.19.B)
    c. MEAO (inactive committee - delete from bylaws) (9.3.13)
    d. Critical Care Committee –delete from bylaws (replaced by creation of Critical Care Department and should have been removed per 2014 approved bylaws changes)(9.3.7)

2. Add "Licensed Acupuncturists, LAc." as a category of Allied Health Practitioner eligible for affiliate MS membership. (4.2.1.E & 4.4.5)

3. Change “Hospitalist Medicine” department to: “Department of Hospital Medicine”. (8.1.1.3)

4. Change the Internal Medicine department to: “Department of Internal & Specialty Medicine”. (8.1.1.2)

5. Combine the Department of Family Medicine and the Ambulatory Division of the Department of Internal Medicine into: “Department of Family and Adult Medicine (DFAM)” with the following geographic divisions (8.1.1.1):

    a. West County Division (WCHC & NRHC)
    b. Martinez Division (MHC & MWC)
    c. Concord Division Head (CHC1 & CHC2, WPWC)
    d. East County Division (PHC & Baypoint)
    e. Far East County Division (AHC & BHC)

6. Apply several minor modifications and corrections to language throughout various sections to reduce redundancy, confusion and possibility for misinterpretation, including:

    a. 2.2.1. second paragraph: Except for Honorary and Resident membership..... Add "Administrative" to this line
    b. 3.1.2.2.3. delete "current professional competence"
    c. 4.4.2. delete "Certified Nurse Midwives" and only say "Midwives," followed by "A midwife shall have.....," instead of "CNM."
    d. 5.2. under misstatements and omissions, add:.....applications/ re-applications..... and add: "stopping the processing of the application due to a misstatement or omission does not entitle applicant to procedural hearing or appellate review rights."
    e. 5.5.5.5. add: .....in a satisfactory manner, i.e. provide the requested information by the date specified, is deemed a voluntary.....

f. 5.5.5.12.A.2. delete entire paragraph (redundant and easily misinterpreted).
g. 6.6. Add: “Initial Focused Professional....
h. 6.6.C. delete "The MEC may allow Department Heads to remove.....".
i. 6.6.3. add: "The Credentialing Committee or the Medical Executive Committee may extend....."
j. 7.4.1-7.4.3: Clarification of how vacancies in MSP, past, present and elected, are to be addressed.
k. 12.3.1; 12.3.8; 12.3.9: Change “Request for Hearing” and subsequent communication(s) responsibilities regarding that hearing to go to Medical Staff President instead of to the Administrator

7. Apply several minor modifications and corrections to rules and regulations including:
   a) Unify time requirements around inpatient and outpatient documentation
   b) Removal of inconsistent language around time frames for delinquency and suspension
   c) It no longer says that the "delinquent" warning letter is signed by the medical staff president. MSP unable to sign letter electronically that is sent by HIM via ccLink.don't have the bandwidth to sign every letter. HIM sends this letter electronically, via ccLink.
   d) It indicates that the medical staff office will also contact the "delinquent" provider. Additionally, states that the provider has the responsibility (if they want timely notification of delinquent records) to keep the office updated on their contact information
   e) The Medical Board says it must be notified if someone is suspended for 30 days (cumulative) in a 12-month period. Our bylaws used to say in a "calendar year", which is not the same thing. So I corrected that and added "cumulative".

CONTRA COSTA
HEALTH SERVICES

# Contra Costa Regional Medical Center

# & Health Centers

# Medical Staff Bylaws

# Rules & Regulations

# 2018

# Contents


**DEFINITIONS ..... 1**

**ARTICLE 1 ..... 3**

**NAME AND PURPOSES .....3**

**ARTICLE 2 ..... 3**

**MEMBERSHIP .....3**

2.1 Nature of Membership.....3
2.2 Eligibility and Qualifications for Membership.....3
2.4 Waiver of Qualifications.....5
2.5 Membership Requirements .....5
2.6 Effect of Other Affiliations.....5
2.7 Nondiscrimination.....5
2.8 General Responsibilities of Medical Staff Membership.....5
2.9 Harassment and Discrimination Prohibited.....6

**ARTICLE 3 ..... 8**

**CATEGORIES OF THE MEDICAL STAFF .....8**

3.1 Categories.....8

**ARTICLE 4 ..... 15**

**ALLIED HEALTH PRACTITIONERS .....15**

4.1 Definitions .....15
4.2 Categories of AHPs Eligible to Apply for AHP Clinical Privileges or Services .....16
Authorizations and Rules regarding them .....16
4.3 Eligibility and General Qualifications.....16
4.4 Specific Qualifications .....17
4.5 Waiver of Qualifications. .....17
4.6 Prerogatives .....18
4.7 Responsibilities.....18
4.8 Procedure for Granting Initial and Renewal Services Authorizations.....18
4.9 Termination, Suspension, or Restriction of Service Authorizations .....18

**ARTICLE 5 ..... 19**

**PROCEDURES FOR APPOINTMENT AND REAPPOINTMENT .....19**

5.1 General.....19
5.2 Applicant's Burden.....19
5.3 Applicant for Initial Appointment and Reappointment for Medical Staff Membership.....19
5.4 Basis for Appointment and Reappointment to the Medical Staff.....20
5.5 Application Procedure.....20
5.6 Reappointment and Requests for Modifications of Staff Status or Privileges .....28
5.7 Leave of Absence from the Medical Staff .....29
5.8 Waiting Period after Adverse Action .....29
5.9 Confidentiality and Impartiality.....30

**ARTICLE 6 ..... 30**

**PRIVILEGES.....30**

6.1 Exercise of Privileges .....30
6.2 Delineation of Privileges in General.....31
6.3 Non-licensed Resident Physicians.....31
6.4 Temporary Privileges .....32
6.5 Emergency Privileges.....33
6.6 Focused Professional Practice Evaluation (FPPE) .....34
6.7 Disaster Privileges .....35

**ARTICLE 7 ..... 37**

**GENERAL MEDICAL STAFF OFFICERS .....37**

7.1 Identification.....37
7.2 Qualifications .....37
7.3 Attainment of Office.....37
7.4 Vacancies.....38

7.5 Resignation and Removal from Office....39
7.6 Duties of General Staff Officers.....39

**ARTICLE 8 .....40**

**DEPARTMENT AND DIVISIONS .....40**
8.1 Organization of Departments .....40
8.2 Assignment to Departments .....41
8.3 Functions of Departments .....41
8.4 Department Heads.....42
8.5 Election of Department Heads.....43
8.6 Functions of Divisions.....45
8.7 Division Heads.....45
8.8 Election of Division Heads .....46

**ARTICLE 9 .....48**

**COMMITTEES.....48**
9.1 General Provisions .....48
9.2 Medical Executive Committee .....49
9.3 Committees .....50

**ARTICLE 10 .....64**

**MEETINGS .....64**
10.1 Medical Staff Meetings .....64
10.2 Clinical Department and Committee Meetings.....64
10.3 Quorum.....64
10.4 Manner of Action .....65
10.5 Notice of Meetings.....65
10.6 Minutes .....65
10.7 Agenda .....65
10.8 Attendance Requirements.....66
10.9 Conduct of Meetings .....66

**ARTICLE 11 .....66**

**CORRECTIVE ACTION .....66**
11.1 Corrective Action.....66
11.2 Summary Restriction of Suspension .....68
11.3 Grounds for Automatic Suspensions and/or Restrictions.....69

**ARTICLE 12 .....72**

**HEARING AND APPELLATE REVIEWS .....72**
12.1 Grounds for Hearing.....72
12.2 Exhaustion of Remedies.....72
12.3 Requests for Hearing.....72
12.4 Hearing Procedure.....74
12.5 Appeals.....77
12.6 Exceptions to Hearing Rights .....79

**ARTICLE 13 .....80**

**CONFIDENTIALITY .....80**
13.1 General.....80
13.2 Breach of Confidentiality.....80
13.3 Protection .....80
13.4 Access by Persons or Agencies Outside the Jurisdiction of the Hospital.....81
13.5 Access by Persons within the Jurisdiction of the Hospital .....82

**ARTICLE 14 .....84**

**GENERAL PROVISIONS .....84**
14.1 Rules and Regulations .....84
14.2 Dues or Assessments .....84
14.3 Construction of Terms and Headings .....84
14.4 Authority to Act .....84
14.5 Division of Fees.....84
14.6 Special Notices.....84
14.7 Requirements for Elections of Medical Staff President, Department Heads, Division Heads and for Bylaws Amendments .....85
14.8 Disclosure of Interest. .....85
14.9 Authorization, Immunity, and Releases.86
14.10 Standards for History and Physical Examination. .....86

**ARTICLE 15 .....87**

**ADOPTION AND AMENDMENT OF BYLAWS AND RULES .....87**
15.1 Annual Review. .....87
15.2 Procedure. .....87

15.3 Medical Staff Action. .....87
15.4 Approval.....87
15.5 Exclusivity. .....88

**RULES AND REGULATIONS.....89**

**1. General Rules .....89**
A. Admissions.....89
B. Continuous Responsibility for Patients ..89
1. Inpatient.....89
2. Outpatient .....89
C. Medical Records.....89
1. General Provisions .....89
2. Completion of Records.....90
a. Inpatient Records .....90
3. Delinquency.....92
4. Disciplinary Proceedings .....93
5. Outpatient Records.. **Error! Bookmark not defined.**
6. Outpatient notes should contain the following elements: . **Error! Bookmark not defined.**
D. Medical Orders .....93
1. Inpatient.....93
2. Outpatient .....94
E. CPR.....94
F. Disaster Assignments: Refer to Hospital Disaster Plan .....94
G. Consultation Policy .....94
H. Operating Room Policies.....95
1. Consents: .....95
2. Prompt attendance of surgeon and attendants:.....95
I. Supervision of House Staff.....95
J. On-Call Response Time.....96
K. Processing and Delivery of Ordered Blood Products.....96
L. Collection and Expenditures of Medical Staff Funds .....97
1. Application Fees .....97
2. Medical Staff Dues .....97
3. Reappointment Late Processing Fees.....97
4. Expenditure of Funds.....98
M. Medical Staff Evaluation and Development .....98
N. Other Policy Manuals .....99

# Definitions

The following definitions apply to these Medical Staff Bylaws:

1. Administrator means the Chief Executive Officer of Contra Costa Regional Medical Center and Health Centers and her/his designee.
2. Chief Resident means the resident physician chosen by the residents to represent them.
3. Allied Health Practitioners (AHP) are those non-Medical Staff member practitioners described in Article 4 below.
4. Clinical Privileges or Privileges means permission, granted by this Medical Staff to members of the Medical Staff, to provide specific diagnostic, therapeutic, medical, dental, podiatric, surgical, psychiatric or psychology services.
5. AHP Clinical Privileges or Service Authorizations means permission granted by the Governing Body, upon the recommendation of the Interdisciplinary Practice Committee and the Medical Staff, to provide diagnostic and therapeutic services within the scope of the AHP's training and expertise.
6. County means County of Contra Costa, California.
7. Department or Clinical Department means a clinical structure of the Medical Staff as further identified in these Bylaws.
8. Department Head means the practitioner elected or appointed, pursuant to these Bylaws to be responsible for the function of a Clinical Department.
9. Medical Director of Contra Costa Regional Medical Center, also referred to simply as the Medical Director, means the physician appointed by the Administrator to oversee clinical activities of the hospital.
10. Chief Medical Officer of the Health Services Department means the physician appointed by the Director of the Health Services Department to oversee the clinical activities of the Health Services Department.
11. Ex-officio means service as a member of a body by virtue of an office or positions held and, unless expressly provided, without voting rights.
12. Governing Body means the County Board of Supervisors.
13. Hospital or Medical Center means the Contra Costa Regional Medical Center and Health Centers.
14. Health Centers means the outpatient clinical facilities operated by the County where the Members of this Medical Staff provide patient care.
15. Medical Staff Year means the twelve (12)-month period commencing on the first of July of each year and ending on the thirtieth ($30^{th}$) of June of the following year.
16. Member or Medical Staff Member means any Practitioner or Resident who has been appointed to the Medical Staff pursuant to these Bylaws.
17. Member in Good Standing means a Member of the Medical Staff who is not under a suspension.
18. Physician means an individual with a M.D. or D.O. degree who is currently licensed to practice medicine in the State of California.

19. Practitioner means a physician, dentist, clinical psychologist, or podiatrist who is currently licensed by the State of California to provide patient care services.
20. Residency Director means the physician who directs the postgraduate Family Medicine training program based at the Hospital.
21. Resident means a physician in training who is participating in a residency of fellowship approved by the American Council of Graduate Medical Education.
22. Rules or Rules and Regulations mean the Medical Staff Rules and Regulations that are contained under separate cover and are adopted to the Bylaws.

# ARTICLE 1

## NAME AND PURPOSES

1.1 The name of this organization is the Medical Staff of the Contra Costa Regional Medical Center and Health Centers.

1.2 The Medical Staff purposes are:

*1)* To assure that all patients treated by any of its members receive the best possible care.

*2)* To provide for professional performance that is consistent with the mission and goals of the Hospital.

*3)* To maintain Rules for the Medical Staff to carry out its responsibilities for the professional work performed in the Hospital.

*4)* To provide a means for the Medical Staff, Governing Body and Hospital Administration to discuss issues of mutual concern.

*5)* To provide for accountability of the Medical Staff to the Governing Body.

# ARTICLE 2

## MEMBERSHIP

### 2.1 Nature of Membership

Appointment to the Medical Staff shall confer only such Privileges and Prerogatives as have been granted by the Governing Body in accordance with these Bylaws. Only Members of the Medical Staff may care for patients in our Hospital and Health Centers.

### 2.2 Eligibility and Qualifications for Membership

2.2.1 General Qualifications

Membership on the Medical Staff and Privileges shall be extended only to Practitioners who are professionally and ethically competent and continuously meet the qualifications, standards, and requirements set forth in these Bylaws, Rules and Regulation, and Medical Staff Policies.

Except for Honorary, Resident and Administrative membership, only physicians, dentists, podiatrists and clinical psychologists who;

*A.* Document current, valid, unrestricted licensure; adequate experience, education and training; professional and ethical competence; good judgment; adequate physical and mental health status; and current eligibility to participate in Medicare, Medicaid or other federally-sponsored health care program; and who

*B.* Abide by the ethics of their profession; work cooperatively with others; maintain confidentiality as required by law; and will participate in and discharge their responsibilities as required by the medical staff shall be deemed to possess the basic qualifications and eligibility for membership on the Medical Staff.

2.2.2 Specific Qualifications:

To be eligible and qualified for Medical Staff Membership and Privileges, the Practitioner must, meet the basic standards outlined in 'Eligibility and General Qualifications,' and these Specific Qualifications;

No record of criminal conviction of Medicare, Medicaid, or insurance fraud and abuse, payment of civil money penalties for same, or exclusion from such programs. No record of denial, revocation, relinquishment or termination of appointment or clinical privileges at any hospital for reasons related to professional competence or conduct.

Physicians seeking membership privileges or reappointment must have satisfactorily completed an approved postgraduate residency training program. An approved postgraduate residency training program is a program approved by the Accreditation Council for Graduate Medical Education (ACGME).

Resident Physicians. An applicant for Resident Physician membership on the Medical Staff must have a valid M.D. or D.O. degree or equivalent degree. The applicant must have been accepted for training by a residency program affiliated with the Hospital and must be a member in good standing of the residency. Resident physicians do not need to have a full license to practice medicine independently; however, if they do not have such an unrestricted license, a Licensed Physician Member of the Medical Staff must supervise any patient care in which the resident is involved.

Controlled Substance Prescriber. Practitioner members on the Medical Staff must have a current, valid, unrestricted Federal DEA number/registration if prescribing controlled substances.

Dentists. An applicant for dental membership on the Medical Staff must have a DDS or equivalent degree. The Practitioner must have a current, valid, unrestricted license to practice dentistry issued by California Board of Dental Examiners.

Podiatrists. An application for Podiatric Membership in the Medical Staff must have a D.P.M. or equivalent degree. The Practitioner must have a current, valid, unrestricted license to practice podiatry issued by the California Board of Podiatric Medicine

Clinical Psychologists. An applicant for Clinical Psychologist Membership on the Medical Staff must have a doctorate degree in psychology. The Practitioner must have a current, valid, unrestricted license to practice clinical psychology issued by the California Board of Psychology.

.

## 2.4 Waiver of Qualifications

The Credentials Committee may recommend that certain eligibility criteria be waived by the Medical Executive Committee (MEC.) The Practitioner must demonstrate that he or she has the equivalent qualifications or that exceptional circumstances exist which warrant granting the waiver. The Practitioner has no right to have his or her waiver request considered or granted and denial of a waiver confers no right to a hearing or appellate review.

## 2.5 Membership Requirements

An applicant for Membership appointment or reappointment on the Medical Staff must document his or her adequate experience, education, and training in the requested Privileges. The applicant must demonstrate current professional competence and good judgment in the use of such Privileges. The applicant must demonstrate his or her ability to exercise such Privileges for quality patient care at a level recognized as appropriate to a similar professional within the community. The MEC must determine that the applicant adheres to the lawful ethics of his or her profession; is able to work cooperatively with others in the Hospital so as not to adversely affect patient care or Hospital operations; and is willing and able to participate in and properly discharge Medical Staff responsibilities as describes in these Bylaws, the Rule and Regulations and applicable Medical Staff Policy.

## 2.6 Effect of Other Affiliations

No Practitioner is entitled to Medical Staff Membership merely because he or she holds a certain degree, is licensed to practice medicine in this or in any other state, is a member of any professional organization, is certified by any clinical board, or because he or she had, or presently has, Medical Staff Membership or Privileges at another health care facility.

## 2.7 Nondiscrimination

Medical Staff Membership or particular Privileges shall not be denied on the basis of age, gender, sexual orientation, race, religion, color, national origin, physical or mental impairment, marital status or disability that does not pose a threat to the quality of patient care or substantially impair the ability to fulfill required staff obligations.

## 2.8 General Responsibilities of Medical Staff Membership

Each Medical Staff Member exercising Privileges in the Hospital and Health Centers shall continuously meet all of the following responsibilities:

2.8.1 Provide his or her patients with care meeting the professional standards of the Medical Staff of this Hospital.

2.8.2 Abide by the Medical Staff Bylaws and the Rules and all other lawful standards, policies, and rules of the Medical Staff and the Hospital.

2.8.3 Abide by all applicable laws and regulations of governmental agencies and comply with applicable standards of the TJC.

2.8.4 Discharge such Medical Staff, department, division, committee, and service functions for which he or she is responsible by appointment, election, or otherwise.

2.8.5 Prepare and complete in a timely manner the Medical and the required records for all patients to whom the Practitioner in any way provides services to the Hospital.

2.8.6 Abide by the ethical principles of his or her profession.

2.8.7 Work cooperatively with other Medical Staff Members, nurses, administrators, and other members of the health care team so as not to adversely affect patient care.

2.8.8 Participate in educational programs approved by the Medical Staff and designed to improve the quality of patient care.

2.8.9 Refuse to engage in any improper inducements for patient care referrals.

2.8.10 Make appropriate arrangements for coverage for his or her patients when an absence is anticipated.

2.8.11 Complete continuing education programs that are required by the Medical Staff.

2.8.12 Participate in emergency service coverage and consultation (on-call) panels as may be required by the Medical Staff.

2.8.13 Accept responsibility for participating in Medical Staff FPPE in accordance with the Bylaws.

2.8.14 Pay Medical Staff dues and assessments within sixty (60) days of invoice receipt.

2.8.15 Participate in the resident training program as requested by the Residency Director.

2.8.16 Promptly notify the Medical Staff Office of any professional liability action the member is involved in as soon as the member becomes aware of his or her involvement.

2.8.17 Participate in quality assurance programs as determined by the Medical Staff.

2.8.18 Discharge such other duties and obligations as may be lawfully established from time to time by the Medical Staff, the Medical Executive Committee, the Member's Department, or the Administrator.

## 2.9 Harassment and Discrimination Prohibited

2.9.1 Statement of Policy

The Medical Staff is committed to providing a workplace free of sexual harassment or discrimination as well as unlawful harassment or discrimination based upon age, ancestry, color, marital status, medical condition, mental disability, physical disability, national origin, race, religion, gender, or sexual orientation. The Medical Staff does not tolerate

harassment or discrimination by Medical Staff Members of resident physicians, support staff, County employees, patients, or other Medical Staff Members.

2.9.2 Harassment Defined

*A.* Harassment is unwelcome verbal, visual, or physical conduct that creates an intimidation, offensive or hostile working environment or that interferes with work performance. Such conduct constitutes harassment when:

1) Submission to the conduct is made either an implicit or explicit condition of employment;
2) Submission to or rejection of the conduct is used as the basis for an employment decision; or
3) The harassment unreasonably interferes with work performance or creates an intimidating, hostile or offensive work environment.

2.9.3 Harassing conduct can take many forms and includes, but is not limited to, slurs, jokes, statements, gestures, pictures, or cartoons regarding a person's age, ancestry, color, marital status, medical condition, mental disability, physical disability, national origin, race religion, gender or sexual orientation. Sexually harassing conduct in particular includes all of these prohibited actions as well as requests for sexual favors, conversations containing sexual comments, and unwelcome sexual advances.

2.9.4 Investigation and Corrective Action

*A.* Every complaint of harassment, unlawful discrimination or retaliation made to the Medical Staff will be investigated thoroughly and promptly. The Medical Staff will attempt to protect the privacy of individuals involved in the investigation when appropriate. The Medical Staff will not tolerate retaliation against anyone who reports harassing conduct. Other entities, such as the County and legal authorities, may also separately investigate such complaints. When appropriate, the Medical Staff shall share investigatory information with such authorities.

*B.* If the Medical Staff determines that harassment occurred, the Medical Staff will take corrective action up to and including termination of Medical Staff Privileges or Membership. Corrective actions taken by the Medical Staff related to such harassing conduct are not grounds for a hearing unless those actions affect a Member's Privileges or Membership status on the Medical Staff. When appropriate, corrective action may include reporting the harassment to appropriate legal, administrative, and governing authorities.

ARTICLE 3

# CATEGORIES OF THE MEDICAL STAFF

## 3.1 Categories

The Medical Staff Members are divided into the following categories of membership; active, temporary, courtesy, provisional, honorary, administrative and resident. Each Medical Staff Member shall be assigned to a Medical Staff category based upon the respective qualifications set forth in theses Bylaws. Members of each Medical Staff category shall have the respective prerogatives and responsibilities as set forth in these Bylaws. Action may be initiated to change the Medical Staff category to terminate the membership of any Member who fails to meet the qualifications or fulfill the responsibilities as described in the Bylaws. Changes in Medical Staff category shall not be grounds for hearing unless it affects the Member's Clinical Privileges.

3.1.1 The Honorary Medical Staff

The honorary Medical Staff consists of practitioners who are not active in the Hospital or who are honored by emeritus positions. These may be practitioners who have retired from active hospital practice or who are of outstanding reputation, not necessarily residing in the community. Honorary staff members are not eligible to admit, care for or consult on patients, to vote, to hold office, or to serve on standing Medical Staff.

3.1.2 The Administrative Medical Staff

*A.* Qualifications

1) Administrative category membership shall be held by any physician, who is not otherwise eligible for another staff category and who solely performs ongoing medical administrative activities.
2) Document their (1) current licensure, (2) adequate experience, education and training, (3) good judgment, and (4) current physical and mental health status, so as to demonstrate to the satisfaction of the Medical Staff they are professionally and ethically competent to exercise their duties;

*B.* Prerogatives

The Administration Staff shall be entitled to attend meetings of the Medical Staff and various departments and education programs, but shall have no right to vote at such meetings. Administrative Staff members shall not be eligible to hold office in the Medical Staff Organization, admit patients, or exercise clinical privileges.

3.1.3 The Active Medical Staff

*A.* Qualifications

The active staff consists of physicians, dentists, podiatrists, and licensed psychologists, each of whom;

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Has an office and residence that, in the opinion of the Medical Executive Committee, is located closely enough to the Hospital to provide appropriate continuity of quality care;
3) Regularly admits patients to the Hospital, is regularly involved in the care of patients at the Hospital, or regularly uses the Hospital and/or Health Centers in the care of patients;
4) Has satisfactorily completed his/her term in the provisional staff category.

*B.* Prerogatives

Each member of the active staff is entitled to:

1) Admit patients and/or exercise Clinical Privileges as are granted to him/her;
2) Attend and vote on all matters presented at general and special meetings of the Medical Staff, his/her department, and or committees to which he/she is a member;
3) Attend any staff or Hospital education programs;
4) Hold staff and/or departmental offices and service on committees to which he/she has been appointed.

*C.* Responsibilities

Each member of the active Medical Staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws;
2) Providing for the continuous care and supervision of each patient in the Hospital and Health Centers for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested; and
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member in accordance with the Bylaws.

*D.* Demotion of Active Staff Member.

After one year in which a Member of the active staff fails to regularly care for patients in the Hospital or Health Centers or be regularly involved in Medical Staff functions as determined by the Medical Staff, that Member may be demoted to a lower staff category.

3.1.4 Courtesy Staff

*A.* Qualifications

The courtesy staff consists of practitioners, each of whom:

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Has an office and residence that, in the opinion of the Medical Executive Committee, is located closely enough to the Hospital to provide appropriate continuity of quality care;

3) Admits patients to the Hospital on an irregular basis, is occasionally involved in the care of Hospital patients, or occasionally uses the Hospital and/or Health Centers in the care of patients;
4) Is a member of the active staff of another licensed hospital unless the Medical Executive Committee, in writing, for good cause shown, waives this requirement. Dentists holding only General Dentistry, Endodontia, Periodontia, or Orthodontia privileges are exempt from this requirement.
5) Has satisfactorily completed his/her term in the provisional staff category.

*B.* Responsibilities

Each member of the courtesy staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws;
2) Providing for the continuous care and supervision of each patient in the Hospital for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested; and
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member in accordance with the Bylaws.

*C.* Limitation

Courtesy staff members shall not be eligible to hold office in this Medical Staff organization nor shall they be eligible to vote on matters presented at general and special meetings of the Medical Staff, departmental meetings, division meetings, or committee meetings except as specifically provided in the Bylaws.

3.1.5 Provisional Staff

*A.* Qualifications.

The provisional staff consists of practitioners, each of whom:

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Immediately prior to his/her application and appointment was not a member (or was no longer a member) in good standing of this Medical Staff;
3) Has an office and residence that, in the opinion of the Medical Executive Committee, is located closely enough to the Hospital to provide appropriate continuity of quality care.

*B.* Prerogatives.

Each member of the provisional staff is entitles to;

1) Admit patients and exercise such Clinical Privileges as are granted pursuant to the Bylaws;
2) Attend meetings of the staff and the department of which he/she is a member and any staff or hospital education programs;
3) Be appointed to any committee except the Medical Executive Committee. The provisional staff members shall not have the right to vote unless the Medical Staff President confers that right at the time of the committee appointment.

*C.* Responsibilities

Each member of the provisional Medical Staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws;
2) Providing for the continuous care and supervision of each patient in the hospital for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested;
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member in accordance with the Bylaws.

*D.* Limitation

Provisional staff members are not eligible to vote on matters presented at general and special meetings of the Medical Staff, department meetings, division meetings, or committee meetings except as specifically provided in the Bylaws.

*E.* Monitoring of Provisional Staff Member

Each provisional staff members shall undergo a period of monitoring. The monitoring shall be to evaluate the members' (1) proficiency in the exercise of Clinical Privileges initially granted and (2) overall eligibility for continued staff membership and advancement within staff categories. Monitoring of provisional staff members shall follow whatever frequency and format each department deems appropriate in order to adequately evaluate the provisional staff member including, but not limited to, concurrent or retrospective chart review, mandatory consultation, and/or direct observation. The results of the monitoring shall be communicated by the department chairperson to the Credentials Committee.

*F.* Term of Provisional Staff Status

A Member shall remain on the provisional staff for a period of six months unless the Medical Executive Committee or the Credentials Committee extends that status for an additional period of up to six months upon a determination of good cause, which determinations shall not be subject to review. In special circumstances wherein the Member has had minimal activity at the Hospital and Health Centers, and current information is inadequate to allow a determination to conclude the provisional staff status, the Medical Executive Committee may extend the provisional staff status for an additional period of up to twelve (12) months, which determination shall not be subject to review. In no event shall the total provisional staff status of a member exceed twenty-four (24) months. At the conclusion of provisional staff status, further staff status is determined as stated below.

*G.* Action at Conclusion of Provisional Staff Status

1) If the Provisional Staff Member has satisfactorily demonstrated his or her ability to exercise the Clinical Privileges initially granted and otherwise appears qualified for continued Medical Staff membership, the Member shall be eligible for placement in the active or Courtesy Staff, as appropriate, upon recommendation of the Medical Executive Committee (MEC.) The Administrator and the Governing Body shall act upon this MEC recommendation. Should any disagreement occur between the MEC, the Administrator, and the Governing Body, resolution shall occur in compliance with the Bylaws.
2) In all cases, the appropriate department shall advise the Credentials Committee, which shall make its report to the Medical Executive Committee, which, in turn, shall make its recommendation to the Professional Affairs Committee regarding a modification or termination of Clinical Privileges, or termination of Medical Staff membership.

3.1.6 Resident/Fellow Staff

*A.* Qualifications for Residents/Fellow

The resident/fellow staff consists of Members, each of whom;

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Exercise Clinical Privileges under appropriate supervision and direction of the Program Director, and the head of the department in which he/she is exercising Privileges;
3) Attend meetings of the Medical Staff and, if invited, the departments to which he/she is currently assigned;
4) Be appointed to any committee except the Medical Executive Committee. The Resident/Fellow staff member shall not have the right to vote unless that right is

conferred by the Medical Staff President at the time of the committee appointment;

5) If licensed, apply for provisional status on the Medical Staff without relinquishing his or her resident status with regard to these Bylaws.

*B.* Responsibilities

Each member of the Resident/Fellow staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws and Rules;
2) Contributing to the organization and administrative affairs of the Medical Staff by participating on staff, in the departments, and on committees as reasonably requested, and by participating in fulfilling such other staff functions as are reasonably requested.

*C.* Limitation

Resident/Fellow staff members shall not be eligible to hold office in this Medical Staff organization nor shall they be eligible to vote on matters presented at general and special meetings of the Medical Staff, departmental meetings, division meetings, or committee meetings except as specifically provided in the Bylaws.

3.1.7 Temporary Staff

*A.* Qualifications

Temporary staff consists of Members, each of whom:

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Has been granted temporary privileges and is not currently on the active, courtesy, provisional, or resident staff.

*B.* Prerogatives

Each Member of the temporary staff in entitled to:

1) Admit patients and exercise Clinical Privileges as are granted to him/her;
2) Attend meetings of the staff in the department of which he/she is a Member and any staff and hospital educational programs.

*C.* Responsibilities

Each Member of the temporary staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set for in the Bylaws;

2) Providing for the continuous care and supervision of each patient in the Hospital for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested; and
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member.

*D.* Limitations

Temporary staff members are not eligible to hold office in this Medical Staff organization nor are they eligible to vote on matters presented at general and special meetings of the Medical Staff, departments, divisions, or committees. In the event that a practitioner's temporary clinical privileges are terminated, said practitioner's temporary staff status is also deemed terminated and the practitioner is thereafter entitled to the procedural rights afforded by the Bylaws.

3.1.8 Limitation of Prerogatives

The prerogatives set forth under each membership category are general in nature and may be subject to limitation by special conditions attached to a particular membership by other sections of these Bylaws and by the Rules.

3.1.9 Modification of Membership

On its own, upon recommendation of the Credentials Committee, or pursuant to a request by a member, the Medical Executive Committee may recommend a change in the Medical Staff category of a member consistent with the requirements of the Bylaws.

# ARTICLE 4

# ALLIED HEALTH PRACTITIONERS

## 4.1 Definitions

4.1.1 Allied Health Practitioner (AHP) means a health care professional, other than a physician, dentist, podiatrist or clinical psychologist, who holds a license, as required by California law, to provide certain professional services.

4.1.2 AHP Clinical Privileges or Service Authorization means the permission granted by the Governing Body, upon the recommendation of the Interdisciplinary Practice Committee and the Medical Staff, to provide diagnostic and therapeutic services with the scope of the AHP's training and expertise.

## 4.2 Categories of AHPs Eligible to Apply for AHP Clinical Privileges or Services Authorizations and Rules

4.2.1 The categories of AHPs, based upon occupation or profession that shall be eligible to apply for AHP Clinical Privileges shall be designated by the Governing Board, upon recommendation of the MEC. Currently, the AHPs include the following categories;

*A.* Nurse Practitioners who are registered nurses with additional training, expertise, certification and licensing that is recognized and authorized by the State of California to provide specific diagnostic and therapeutic services.

*B.* Optometrists who are licensed by the State of California to provide specific optometric services.

*C.* Midwives (Certified Nurse Midwives, Licensed Midwives, Certified Professional Midwives) who are health care providers with additional training, expertise, and certification that is recognized and authorized by the State of California, under the supervision of a licensed physician or surgeon, to attend cases of normal childbirth and to provide prenatal, intrapartum and postpartum care.

*D.* Physician Assistants who are healthcare professionals with specialized medical training from a program associated with a medical school and who are licensed by the California Physician Assistant Board to provide patient education, evaluation, and health care services under the supervision of a licensed physician.

*E.* Acupuncturists who are health care providers with training, expertise and knowledge in the practice of acupuncture who are licensed and regulated by the State of California under the Acupuncture Board.

## 4.3 Eligibility and General Qualifications

An AHP is eligible for a Service Authorization in this hospital if he or she;

1) Holds a current, valid, unrestricted license, certificate, or other legal credential in a category of AHP which the Governing Body has identified as eligible to apply for Service Authorization pursuant to the Bylaws; and
2) Documents his or her experience, background, training, current competence, judgment, and ability with sufficient adequacy to demonstrate that any patient treated by the practitioner will receive care at the generally recognized professional level of quality established by the Medical Staff; and
3) Is determined, on the basis of documented references to:
   *A.* Adhere strictly to the lawful ethics of his or her profession;
   *B.* Work cooperatively with others in the hospital setting so as not to adversely affect patient care;
   *C.* Be willing to commit to and regularly assist the Medical Staff in fulfilling its obligations related to patient care; and

1) Agrees to comply with all Medical Staff and Department and Division Bylaws, Rules and Regulations and protocols to the extent applicable to the AHP;
2) Documents his or her current eligibility to participate in Medicare, Medicaid or other federally-sponsored health care program.

### 4.4 Specific Qualifications

In addition to meeting the basic standards as outlined in "Eligibility and General Qualifications," an AHP shall have the following specific qualifications to be eligible and qualified for AHP Clinical Privileges or Service Authorization in this hospital;

No record of conviction of Medicare, Medicaid, or insurance fraud and abuse, payment of civil money penalties for same, or exclusion from such programs.

No record of denial, revocation, relinquishment or termination of appointment or clinical privileges at any hospital for reasons related to professional competence or conduct.

1) Nurse Practitioners: A Nurse Practitioner shall have a current, valid, unrestricted license and furnishing number which authorizes ordering of drugs or devices if applicable to the Nurse Practitioner's practice
2) Midwives: A Midwife shall have a current, valid, unrestricted license and furnishing number which authorizes ordering of drugs or devices if applicable to the Midwife's practice.
3) Physician Assistants: A Physician's Assistant shall have a current, valid, unrestricted license and furnishing number which authorizes the Physician's Assistant to provide drug and medication orders, if applicable to the Physician's Assistant's practice.
4) Optometrists: An optometrist shall have a current, valid, unrestricted license and furnishing number which authorizes ordering of drugs or devices if applicable to the Optometrist's practice.
5) Acupuncturists: An Acupuncturist shall have a current, valid, unrestricted license authorizing the practitioner to provide acupuncture treatment and care within the State of California.

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### 4.5 Waiver of Qualifications.

When exceptional circumstances exist certain eligibility criteria may be waived by the MEC upon recommendation by the Interdisciplinary Practice Committee or its designee the Credentials Committee. The AHP requesting the waiver bears the burden of demonstrating exceptional

circumstances and/or that his or her qualifications are equivalent to or exceed the criterion/criteria in question.

### 4.6 Prerogatives

The prerogatives, which may be extended to an AHP, include:

1) Provision of specified patient care services consistent with the Service Authorization granted to the AHP and within the scope and licensure or certification of that AHP;
2) Service on Medical Staff and Hospital committees except as otherwise provided in the Bylaws. An AHP may not serve as chair of a Medical Staff committee;
3) Attendance at meetings of the department to which he or she is assigned. An AHP may not vote at department/division meetings.

### 4.7 Responsibilities

Each AHP shall:

1) Meet those responsibilities required by the Medical Staff Rules and Regulations.
2) Retain appropriate responsibility within his or her area of professional competence for the care of each patient in the hospital for whom he or she is providing services.
3) Participate, when requested, in patient care and audit and other quality review evaluation and monitoring activities required of AHPs and other functions as may be required by the Medical Staff from time to time.

### 4.8 Procedure for Granting Initial and Renewal Services Authorizations

1) An AHP who practices under Standardized Procedures must apply and qualify for a Service Authorization. An AHP must reapply for a renewed Service Authorization every two years.
2) AHP application for initial granting and renewal of service authorization shall be submitted to the Interdisciplinary Practice Committee (IPC), which may delegate the processing of such applications to the Credentials Committee. Credentialing and Privileging is processed in a parallel manner to that provided for the Medical Staff by the Bylaws. At the discretion of the Credential Committee an initial application of reappointment may be sent to the IPC for review.
3) The Credential Committee shall, as delegated by the IPC, make recommendations to the MEC and the Governing Body regarding the granting of individual Service Authorizations to AHP applicants.
4) Upon approval by the MEC and the Governing Body, an applicant AHP shall be granted Service Authorization and assigned to the clinical department appropriate to his or her occupation and training. The AHP is subject to the relevant rules and regulations of that department.

### 4.9 Termination, Suspension, or Restriction of Service Authorizations

1) The termination, suspension or restriction of Service Authorization shall be done as if the Service Authorization was a clinical privilege rendered to a Member of the Medical Staff. The AHP shall have the same procedural rights as a Medical Staff Member would have with the termination, suspension or restriction of privileges.

# ARTICLE 5

## PROCEDURES FOR APPOINTMENT AND REAAPOINTMENT

### 5.1 General

The Medical Staff shall consider each application for appointment, reappointment, and privileges, and each request for modification of Medical Staff category using the procedures and the standards set forth in the Bylaws. The Medical Staff shall evaluate each applicant before recommending action by the Governing Body. The Governing Body is ultimately responsible for granting Medical Staff membership and Clinical Privileges. Temporary Privileges may be granted to a practitioner, pursuant to these Bylaws and the Rules, prior to final action by the Governing Body. By applying to the Medical Staff for appointment or reappointment, the applicant agrees that, whether or not he or she is appointed or granted Privileges, he or she will comply with the responsibilities of Medical Staff Membership and with the Medical Staff Bylaws and Rules as they exist and as they may be modified from time to time.

### 5.2 Applicant's Burden

An applicant for appointment, reappointment, advancement, transfer, and/or Privileges shall have the burden of producing accurate and adequate information for a thorough evaluation of the applicant's qualifications and suitability for the requested status and Privileges, resolving any reasonable doubts about these matters and satisfying requests for information. To the extent consistent with law, this burden may include submission to a medical or psychological examination, at the applicant's expense, if deemed appropriate by the Medical Executive Committee (MEC.) The applicant may select the examining physician from an outside panel of three physicians chosen by the MEC.

Misstatements and Omissions: Any misstatement in, or omission from, the application is grounds to suspend the application process. The applicant will be informed in writing of the nature of the misstatement or omission and permitted to provide a written response. The Chair of the Credentials Committee and/or the Medical Staff President will review the response and determine whether the application should be processed further. The decision to suspend or cease processing an application due to a misstatement or omission does not entitle the applicant to a procedural hearing or appellate review rights.

### 5.3 Applicant for Initial Appointment and Reappointment for Medical Staff Membership

Applicants for appointment or reappointment must complete, sign and date the prescribed application form provided by the Medical Staff. The application shall request detailed information about the applicant and shall document the applicant's agreement to abide by the Medical Staff Bylaws, Rules, and other terms. The applicant must provide all of the requested information, the agreements, and all supporting documentation to the Medical Staff office. An application which is incomplete will not be accepted for review. The applicant must pay the required fee, if any, at the time the application is submitted or it will not be accepted for review.

## 5.4 Basis for Appointment and Reappointment to the Medical Staff

Recommendations for appointment and reappointment to the Medical Staff and for granting and renewal of Privileges shall be based upon:

1) The applicant's or Member's professional performance at this Hospital and in other settings;
2) Whether the applicant or Member meets the qualifications and is able to carry our all of the responsibilities specified in these Bylaws and the Rules; and
3) The Hospital's patient care needs and ability to provide adequate support services and facilities for the applicant or Member.

A) Term of Appointment, Extensions, and Failure to File Reappointment Application

Except as otherwise provided in these Bylaws, initial appointments to the Medical Staff shall be until the applicants' second birthday after the initial provisional appointment. Reappointments shall be for a maximum period of two years. The Credentials Committee may recommend the granting of reappointments for less than two years.

Failure to file a complete and timely application for reappointment shall result in the automatic termination of the Members' membership Privileges and prerogatives at the end of that term.

## 5.5 Application Procedure.

5.5.1 Application for Medical Staff membership must be submitted directly to the Credentials Committee by the applicant in writing and on such form as approved by the MEC. Prior to the application being submitted, the applicant will be provided access to a copy of the Medical Staff Bylaws, the Rules and Regulations of the Staff and its Departments and Divisions, and summaries of the policies and resolutions relating to clinical practice in the Hospital and Health Centers. An applicant who does not meet the basic qualifications or requirements as outlined in these Bylaws, related rules or policies, is not eligible or qualified to apply for Medical Staff membership and the application shall not be accepted for review. If, during any stage of the application process, it is discovered that the applicant does not meet the basic qualifications or requirements as outlined in these Bylaws, related rules or policies, review of the application shall be discontinued.

An applicant who does not meet the basic qualifications or requirements is not entitled to procedural hearing and appellate review rights.

5.5.2 Application Content

Every applicant, except Resident staff applicants, must furnish a complete application providing all supporting documentation and an accurate and complete response to each query including but not limited to the following:

1) The applicant's undergraduate, medical school, and postgraduate training, including the name of each institution, degrees granted program completed, and dates attended;

2) All currently valid medical, dental, podiatric and other professional licensures or certifications, and Drug Enforcement Administration registration (with exceptions determined by Credentials Committee action when the applicant will not be prescribing medication) and any other controlled substances registration, with the date and number of each;
3) Specialty or sub-specialty board certifications and/or recertification;
4) Health impairments (including alcohol and drug dependencies), hospitalizations, and institutionalizations, if any, which may affect the applicant's ability in terms of skill, attitude and judgment to perform professional and Medical Staff duties;
5) Applicant's statement that his or her health status is such that he or she has the ability to perform the privileges requested;
6) Applicant's statement that he or she will consent to and cooperate with any required physical or mental health evaluations and provide the results from the evaluations to enable a full assessment of the applicant's fitness, as described in Section 5.2, 'Applicant's Burden';
7) Evidence of applicant's current Professional Liability Insurance coverage, or if not currently insured, evidence of past Professional Liability Coverage;
8) Whether there are any pending or completed actions involving denial, revocation, suspension, reduction, limitation, probation, non-renewal or voluntary relinquishment (by resignation or expiration) of the applicant's license or certificate to practice any profession in any state or country; Drug Enforcement Administration or other controlled substances registration; membership of fellowship in local, state or national professional organizations; or faculty membership at any medical or other professional school;
9) The location of offices, names and addresses of other practitioners with whom the applicant is associated and inclusive dates of such association; names and locations of any other hospital, clinic or health care institution where the applicant provides or provided clinical services with the inclusive dates of each affiliation, status held, and general scope of clinical privileges, for the last five years;
10) Requests for department assignment(s), staff category after conclusion of provisional status, and specific Clinical Privileges;
11) Whether the applicant has ever been charged with or convicted of a crime, other than minor traffic violations, or whether a criminal action is now pending;
12) Whether there are any pending or completed actions involving denial, revocation, suspension, reduction, limitation, probation, non-renewal or voluntary relinquishment (by resignation or expiration) of Medical Staff membership, or privileges at another hospital, clinic or health care facility of institution;
13) References as required below;
14) An acknowledgement that the applicant has read the Medical Staff Bylaws of the Contra Costa Regional Medical Center and Health Centers, that he/she understands said Bylaws, and that he/she agrees to be bound by the terms thereof, as they may be amended from time to time, if he/she is granted membership or Clinical Privileges, and to be bound by the terms thereof, without regard to whether or not he/she is granted

membership and/or clinical privileges in all matters relating to consideration of this application;

15) Any and all continuing medical education classes attended by applicant in the last twenty-four (24) months;
16) Whether the applicant has had any notification of, or involvement in, a professional liability action, the applicant's complete malpractice claims history, including all information regarding lawsuits, or settlements made, concluded and pending;
17) Whether the applicant has been excluded from federal health care program in the past, or is subject to a pending or current exclusion from a federal health care program;
18) The applicant's consent to the release and inspection of all records and documents as may be necessary for a thorough evaluation of the applicant's professional qualifications, background and health status;
19) The applicant's consent to provide release and a release from liability for all individuals requesting and all individuals providing information related to the applicant's professional qualifications, background, or health, or evaluating and making judgments regarding the applicant's professionalism qualifications, background, or health;
20) A valid photo identification issued by a state federal agency;

Applicants to the Resident Staff must furnish the information and/or documentation listed in (1), (2), (5), (6), (8), (11), (12), (14), (18), (19) and (20) above, and may do so by submitting their residency application form, updated as necessary to include these required items, in lieu of submitting the standard application form described herein.

Furthermore, each applicant will be assessed an application fee as determined by policies set forth by the Medical Executive Committee. The application will not be processed without receipt of this fee.

5.5.3 References

The applicant must include the names of at least three (3) professionals currently licensed and practicing in the same discipline as the applicant, not currently or about to become corporate or business partners with the applicant in professional practice or personally related to him, who have personal knowledge of the applicant's current clinical ability, competence, ethical character, health status and ability to work cooperatively with others and who will provide specific written comments on these matters, and letters of recommendation for staff membership.

The named individuals must have acquired the requisite knowledge through recent observation of the applicant's professional performance over a reasonable period of time and at least one must have had organizational responsibility for supervision of his/her performance (e.g., Department Chairperson, Service Chief, Training Program Director). The applicant is responsible for submitting three (3) letters of recommendation from the named professional references to the Credentials Committee Chairperson.

At the discretion of the Credentials Committee, the requirement of receipt of all three letters of reference may be reduced to two (2).

5.5.4 Effect of Application

The applicant must sign the application and in so doing:

1) Attests to the correctness and completeness of all information furnished and acknowledges that any significant misstatement in or omission from the application constitutes grounds for denial of appointment or revocation of Medical Staff membership;
2) Signifies his/her willingness to appear for interviews in connection with his/her application;
3) Agrees to abide by the terms of the Bylaws, Rules, and policies and procedures manuals of the Medical Staff if granted membership and/or Clinical Privileges, and to abide by the terms thereof in all matters relating to consideration of the application without regard to whether membership and/or privileges are granted;
4) Agrees to maintain an ethical practice and to provide continuous care to his or her patients;
5) Agrees to keep Medical Staff representatives up to date on any change made or proposed in the status of his/her professional license to practice, DEA or other controlled substances registration, malpractice insurance coverage, and membership or clinical privileges at other institutions;
6) Authorizes and consents to Medical Staff representative consulting with prior associates or others who may have information bearing on professional or ethical qualifications and competence and consents to Medical Staff representatives inspecting all records

and documents that may be material to evaluation of said qualifications and competence;

7) Releases from any liability all those who, in good faith and without malice, review, act upon or provide information regarding the applicant's competence, professional ethics, utilization practice patterns, character, health status, and other qualifications for staff appointment and clinical privileges.

5.5.5 Processing the Application

1) Verification of Information

After the application is submitted to the Credentials Committee Coordinator, the Credentials Committee Coordinator shall seek to verify the references, licensure status, and other qualification evidence submitted in support of the application, and to obtain the supporting information relevant to the application. The Coordinator shall verify in writing and from the primary source whenever feasible. The Credentials Committee Coordinator shall also query the National Practitioner Databank, and shall promptly notify the applicant of any problems in obtaining any of the information required. Upon such notification, it shall be the applicant's obligation to obtain the required information.

Verification shall include sending a copy of the list of Clinical Privileges requested by the applicant to at least his/her most recent affiliations and a request for specific information regarding his/her competence in exercising those privileges.

When the application is complete as defined in subsection (b), the Credentials Committee Coordinator transmits the application and all supporting materials to the Head of each Department in which the applicant seeks Privileges.

2) Definition of Completed Application

A completed application shall consist of all pertinent material including receipt in the Medical Staff office of all correspondence from references and other medical staffs as required.

3) Incomplete Applications

Incomplete applications will not be accepted for review. In addition to applications which are incomplete as described by Section 5.3, 'Application for Initial Appointment and Reappointment for Medical Staff Membership', applications may be deemed incomplete as follows.

If the MEC, the Medical Staff office, or Credentials Committee, Administrator or Governing Body review the application requests additional information, documentation, or clarification from the applicant, and/or an interview with the applicant, the applicant

will be promptly notified and the application process will be suspended, and the application shall be deemed incomplete, until the requested information, documentation, or clarification has been provided and/or the requested interview has been conducted. No application shall be considered complete until it has been reviewed by the Department Head or designee for each department for which the applicant seeks privileges, the Credentials Committee or designee and the Medical Executive Committee, and all have determined that no further documentation or information is required to permit consideration of the application.

The Medical Staff shall promptly inform the applicant of the specific request(s) made, the time period within which the applicant must satisfy the request and the effect on the application process if the request is not satisfied within that time period.

4) Department Evaluations

The Head of each Department in which the applicant seeks privileges reviews the application and its supporting documentation and forwards to the Credentials Committee a written report as required evaluating the evidence of the applicant's training, experience and demonstrated ability and stating how the applicant's skills are expected to contribute to the activities of the Department.

The Department Head or his/her designee shall conduct an interview with the applicant. If a Department Head requires further information, he/she may defer transmitting his/her report, but overall the combined deferral time generally should not exceed thirty (30) days. In case of a deferral, the Department Head must notify the Chairperson of the Credentials Committee in writing of the deferral and the grounds. If the applicant is to provide additional information or a specific release/authorization to allow Medical Staff's representative to obtain information, the notice to him/her must so state, must be a special notice, and must include a request for the specific data/explanation or release/authorization required and the time frame for response. Failure, without good cause, to respond in a satisfactory manner by that date is deemed a voluntary withdrawal of the application.

5) Credentials Committee Evaluation

The Chairperson of the Credentials Committee or a designated committee member may conduct an interview with the applicant. Following the interview, the Credentials Committee reviews the application, the supporting documentation, the reports from the Department Heads, and any other relevant information available to it. The Credentials Committee then transmits to the Medical Executive Committee (MEC) its written report and recommendations as required. If the Credentials Committee requires further information, it may defer transmitting its report, but generally for not more than thirty (30) days. If the applicant is to provide the additional information or specific release/authorization to allow Medical Staff representatives to obtain information, the

notice to him/her must so state, must be a special notice, and must include a request for the specific data/explanation or release/authorization required and the time frame for response. Failure to respond in a satisfactory manner, i.e. provide the requested information by the date specified is deemed a voluntary withdrawal of the application.

The Credential Committee's written report, as required, is transmitted with all supporting documentation to the MEC.

6) The MEC, at its next regular meeting after receiving the Credentials Committee recommendation, reviews the application, the supporting documentation, the reports and recommendations from the Department Heads and Credentials Committee, and any other relevant information available to it. The MEC is responsible for determining staff status. The MEC defers action on the application, or prepares a written report with recommendations as required.
7) Effect of Medical Executive Committee Action
   *A.* Deferral. Action by the MEC to defer the application for further consideration must, except for good cause, be followed up within forty-five (45) days with its report and recommendations. The Medical Staff President promptly sends the applicant a special notice of an action to defer, including a request for the specific data/explanation or release/authorization, if any, required from the applicant and the time frame for response. Failure, without good cause, to respond in a satisfactory manner by that date is deemed voluntary withdrawal of the application.
   *B.* Favorable Recommendation. When the MEC's recommendation is favorable to the applicant in all respects, the Medical Staff President promptly forwards it, together with all supporting documentation, to the Administrator. All supporting documentation means the application form and its accompanying information, the reports and recommendations of the Division and Department Heads, Credentials Committee and MEC, and dissenting views.
   *C.* Adverse Recommendation. When the MEC's recommendation is adverse to the applicant, the Medical Staff President promptly forwards it, together with all supporting documentation, to the Administrator, and the Administrator immediately informs the applicant by special notice, and the applicant is entitled to the procedural rights provided in the Bylaws.
8) Administrator Action
   *A.* On MEC recommendation the Administrator may adopt or reject, in whole or in part, a favorable recommendation or refer the recommendation back to the MEC for further consideration stating the reasons for such referral and setting a time limit within which a subsequent recommendation must be made to the Administrator.
   *B.* If the Administrator's action is favorable to the applicant, this action is forwarded to the Governing Body for final approval. If the Administrator's action, after complying with the applicable requirements, is adverse to the applicant in any respect, the

Administrator promptly informs the applicant by special notice, and the applicant is then entitled to the procedural rights provided in the Bylaws.

*C.* If the Governing Body, upon receiving a report from the Administrator for favorable action, disagrees with the Administrator, it must comply with the requirements below concerning Conflict Resolution. If, after such compliance, the decision is adverse to the applicant in any respect, the Administrator shall promptly inform the applicant by mailing a special notice to the applicant. The applicant is then entitled to the procedural rights provided in the Bylaws and the applicant shall be so informed by the special notice.

9) Content of Reports and Bases for Recommendations and Actions. The report of each individual or group, including the Administrator, required to act on an application must include recommendations as to approval or denial of, and any special limitations on, staff appointment, category of staff membership and prerogatives, Department affiliation(s) and scope of Clinical Privileges.

10) Conflict Resolution. Whenever the Administrator or Governing Body disagrees with the recommendation of the MEC, the matter will be submitted for review and recommendation to a joint conference composed of two members each from the Medical Staff and the Governing Body, appointed by the President of the Medical Staff and the Chairperson of the Governing Body, respectively, before the Governing Body makes its decision.

11) Notice of Final Decision

*A.* The Administrator shall mail notice of the Governing Body's final decision to the applicant, with copies to the Medical Staff President and the applicable Department Head(s).

*B.* A decision and notice to appoint included:

1) The Staff category to which the applicant is appointed;
2) The Department(s) to which he/she is assigned;
3) The Clinical Privileges he/she may exercise; and
4) Any special conditions attached to the appointment.

12) Time Periods for Processing

Individual/Group

*A.* Applicant. One hundred and twenty(120) days.

1) If the fully completed application is not received by the Medical Staff Office as defined, within One hundred and twenty(120) days, the application will be returned and reapplication will not be allowed for a period of ninety (90) days and any temporary privileges granted are immediately terminated.

*B.* Credentials Committee Coordinator. Thirty (30) days.

*C.* Department Heads. Thirty (30) days after receiving material from Credentials Committee Coordinator.

*D.* Credentials Committee. Thirty (30) days after receiving reports from the Credentials Committee Coordinator and Department Head.

*E.* Medical Executive Committee. At the next regular meeting after receiving report from the Credentials Committee.

*F.* Administrator. Fifteen (15) days after receiving report from the Medical Executive Committee.

*G.* Governing Board. At the next regular meeting after receiving report from the Administrator.

*H.* The time periods set forth are guidelines, not directives, and do not create any rights in any application to have his or her application processed within a specific time frame.

In the event that an applicant is not offered or does not accept an offer for employment (permanent, temporary or contract) at CCRMC and Health Centers, the application will be deemed withdrawn.

5.5.6 Staff Category upon Appointment

Except for applicants to the Resident Staff, all appointments to the Staff shall be to the Provisional Staff. After successful completion of the provisional term, as defined, the Medical Executive Committee, after recommendation from the Credentials Committee, shall assign the appropriate staff category.

## 5.6 Reappointment and Requests for Modifications of Staff Status or Privileges

Applications for reappointment are due one hundred and fifty (150) days prior to the expiration of a Member's term. Applications that are not complete at ninety (90) days prior to the expiration of a term are not processed and the membership automatically expires at the end of the term. Applications completed between one hundred and fifty (150) and ninety (90) days from the end of a term are charged a late fee as noted in the Rules.

At least one hundred and eighty (180) days prior to the expiration date of the current staff appointment (except for temporary appointments), a reappointment form developed by the Medical Executive Committee shall be mailed or delivered to the Member. The completed application form and Medical Staff dues are due one hundred and fifty (150) days prior to the expiration date. The department Chair will be notified if the member is delinquent. Each Medical Staff Member shall submit to the Credentials Committee the completed application form for renewal of appointment to the staff and for renewal or modification of clinical privileges. The reapplication form shall include all information necessary to update and evaluate the qualifications of the applicant including, but not limited to, the matters set forth in these Bylaws as well as other relevant matters.

The results of performance monitoring, evaluation, and identified opportunities to improve care and service are printed and included in the reappointment file. Ongoing Professional Practice

Evaluation (OPPE) data are collected and provided as evidence of the practitioner's current competence. A reappointment may be deferred if more information is needed.

Upon receipt of the application, the information shall be processed as set forth commencing at Section 5.4. In addition, the Department Head will review the applicants' QA profile if there is one.

A Medical Staff Member who seeks a modification of Clinical Privileges may submit such a request at any time upon a form developed by the Medical Executive Committee, except that such application may not be filed within one year of the time similar request has been denied.

5.6.1 Effect of Application

The effect of an application for reappointment or modification of staff status or privileges is the same as that set forth in Section 5.5.

5.6.2 Standards and Procedures for Review

When a staff Member submits an application for reappointment, or when the Member submits an application for modification of staff status or Clinical Privileges, the Member shall be subject to an in-depth review generally following the procedures set forth in Section 5.5.

## 5.7 Leave of Absence from the Medical Staff

A Member may request a leave of absence not to exceed two (2) years. No leave is effective unless and until approved by the Medical Executive Committee. At the end of the leave the Member must apply for reinstatement. The Member must provide information regarding his or her relevant activities during the leave of absence if the MEC so requests. During the period of leave, the Member shall not exercise Privileges at the Hospital, and membership rights and responsibilities shall be inactive. The obligation to pay dues, if any, shall continue during the leave unless waived by the Medical Executive Committee.

5.7.1 Reinstatement after a Leave

Failure, without good cause, to request reinstatement of Membership at least thirty (30) days prior to the end of an approved leave shall be deemed voluntary resignation from the Medical Staff. The MEC shall make recommendations concerning reinstatement of the Member's Membership and Privileges to the Governing Body for final action.

## 5.8 Waiting Period after Adverse Action

An applicant, Member, or prior Member is not eligible for Membership in the Medical Staff and/or granting of Privileges for twenty-four (24) months after an adverse action regarding his or her Membership or Privileges.

5.8.1 An Adverse Action occurs when any of the following occur:

*A.* A final adverse decision regarding appointment or privileges is made by the Governing Body, or an applicant withdraws his or her application or request for Privileges following an adverse recommendation by the Medical Executive Committee to the Governing Body.

*B.* A final adverse decision resulting in termination of a Member's membership or Privileges is made by the Governing Body, or if the Member resigns Membership or relinquishes Privileges while an investigation and resolution is pending concerning her/his membership and/or relevant Privileges.,

*C.* A final adverse decision resulting in termination or restriction of Privileges or denial of a request for additional Privileges is made by the Governing Body

5.8.2 The Medical Staff may, as part of an adverse action, waive the twenty-four (24) month ineligibility period or limit it in some way including but not limited to require proctoring or supervision.

5.8.3 An action is considered final on the date the application was withdrawn, a Member's resignation became effective, or upon completion of all hearings and appellate reviews described in the Bylaws pertinent to the action. After an ineligibility period, the individual may reapply for Membership or re-request Privileges. The application will be treated as an initial application or request, except that the individual must document to the satisfaction of the Medical Staff that the basis for the adverse action no longer exists and that sufficient measures have been taken to assure that it will not occur again. With regard to the subject of the adverse action, the Medical Staff may impose more stringent conditions and requirements for evaluation, documentation, and monitoring than it might in an application de novo or it may deny the request outright.

### 5.9 Confidentiality and Impartiality

To maintain confidentiality and to assure the unbiased performance of appointment and reappointment functions, participants in the credentialing process shall limit their discussion of the matters involved to the formal avenues provided in the Bylaws for processing applications and for appointment and reappointment.

# ARTICLE 6

## PRIVILEGES

### 6.1 Exercise of Privileges

Except as otherwise provided in these Bylaws, every Member providing direct clinical services at this Hospital shall be entitled to exercise only those Privileges specifically granted to him or her. Clinical privileges may be granted, continued, modified, or terminated by the Governing Body only upon the recommendation of the Medical Staff as outlined in these Bylaws.

## 6.2 Delineation of Privileges in General

6.2.1 Requests

*A.* Each applicant for appointment and reappointment to the Medical Staff must contain a request for the specific Privileges desired by the applicant. A request for modification of Privileges must be supported by documentation of training and/or experience supportive of the request. A Member may make requests for modifications of Privileges at any time.

*B.* Each department is responsible for developing written criteria for granting Privileges. These criteria take effect only after approval by the Medical Executive Committee (MEC.)

6.2.2 Basis for Privilege Determinations

Requests for Privileges shall be evaluated upon the basis of the Member's education, training, experience, demonstrated professional competence and judgment, clinical performances, and the documented results of patient care. Privilege determinations shall also be based upon pertinent information concerning clinic performance obtained from other sources, especially other institutions and health care setting where an individual exercises Privileges.

6.2.3 Privileges for Department Heads

Privileges for Department Heads will be acted upon by the Medical Staff President. If a Department Head is also the Medical Staff President, privileges will be acted upon by the Past President. In no event will a Department Head approve his/her own privileges.

6.2.4 Admissions

Dentists, oral surgeons, podiatrists and clinical psychologist Members are non-Physician members. They may admit patients only if a Physician Member assumes responsibility for the care of the Patient's medical problems during the hospitalization. These non-physician members may participate in the patient's care to the extent allowed by the responsible Physician Member and the Medical Staff Bylaws and Rules.

6.2.5 Medical Appraisal

A Physician Practitioner shall provide ongoing medical evaluation of all patients receiving some care from a non-physician Member. The Physician shall also provide appropriate supervision and control of the patient care provided by the non-physician Member.

## 6.3 Non-licensed Resident Physicians

By virtue of their enrollment in an accredited training program, non-licensed Residents hold Privileges to admit patients and provide services as assigned under the supervision of the various

Department Chairpersons and the Residency Director. A Physician Member who has Privileges for the patient care being rendered must supervise non-licensed Residents.

## 6.4 Temporary Privileges

### 6.4.1 Circumstances

The Administrator (or his/her designee), with the written concurrence of the Medical Staff President and the Chairperson of the Department where the Privileges will be exercised, may grant temporary Privileges to a practitioner subject to the following conditions:

*A.* Pendency of Application:

After receipt of a completed application for appointment or reappointment (see Section 5.4, including a request for specific Privileges for an initial period of sixty (60) days while the application is being processed. If the processing of the completed application by the Medical Staff requires more than sixty (60) days, the temporary Privilege may be extended for up to an additional sixty (60) days at the discretion of the Medical Staff President or his/her designee. Temporary Privileges shall automatically terminate at the end of a maximum of one hundred and twenty (120) days, unless earlier terminated in accordance with the Bylaws.

*B.* Important Patient Care, Treatment and Service Need.

After receipt of an application for appointment or reappointment, including a request for specific Privileges, an applicant may be granted temporary privileges for the purposes of important patient care, treatment or service need, for an initial period of sixty (60) days while the application is being processed. The Medical Staff must be able to verify the applicant's current licensure and competence, or temporary Privileges are denied. The National Provider Data Bank will be queried. If the processing of the application by the Medical staff requires more than sixty (60) days, the temporary Privileges may be extended for up to an additional one hundred and twenty (120) days at the discretion of the Medical Staff President or his/her designee. Temporary Privileges shall automatically terminate at the end of a maximum of one hundred and eighty (180) days, unless earlier terminated in accordance with the Medical Staff Bylaws.

### 6.4.2 Conditions

Temporary Privileges may be granted only after the practitioner has submitted a written application for appointment and a request for temporary Privileges and the information available reasonably supports a favorable determination regarding the requesting practitioner's licensure, qualifications, ability, and judgment to exercise the Privileges requested, and only after the practitioner has satisfied the requirement regarding professional liability insurance. The chairperson of the department to which the

practitioner is assigned shall be responsible for supervising the performance of the practitioner granted temporary Privileges, or for designating a department member who shall assume this responsibility. That Chairperson may impose special requirements of consultation and reporting. Before temporary Privileges are granted, the practitioner must acknowledge in writing that he/she has received a copy of the Bylaws and Rules and that he/she agrees to be bound by the terms thereof in all matters relating to his/her temporary Privileges.

6.4.3 Termination

The Administrator or the President of the Medical Staff may terminate any or all of a practitioner's temporary Privileges:

*A.* Upon discovery of any information or the occurrence of any event of a nature which raises question about a practitioner's professional qualifications or ability to exercise any or all of the temporary Privileges granted by the Administrator or President of the Medical Staff;

*B.* If the life or well-being of a patient is endangered in the opinion of the grantor of the temporary Privilege;

*C.* In addition, any person entitled under these Bylaws to impose summary suspensions may terminate temporary Privileges if the well-being of a patient is endangered or thought to be endangered by the person termination the temporary Privilege. Any such termination shall be reviewed at the next scheduled meeting of the Medical Executive Committee. In the event of any such termination, the Department will assign the practitioner's patients then in the Hospital to another practitioner(s) or Division Head responsible for supervision. The wishes of the patient will be considered, where feasible, in choosing a substitute practitioner.

6.4.4 Rights of the Practitioner

A practitioner shall not be entitled to the procedural rights afforded by these Bylaws merely because his/her request for temporary Privileges is denied. However, if all or any portion of his/her temporary Privileges are terminated or suspended, the practitioner shall be entitled to those procedural rights.

## 6.5 Emergency Privileges

In the event of an emergency, any Member of the Medical Staff is permitted to do everything reasonably possible to save the life of a patient or to save a patient from serious harm. The Member shall promptly enlist assistance from and yield patient care to a qualified Member as soon as one becomes available.

## 6.6 Focused Professional Practice Evaluation (FPPE)

*A.* General Requirements

All initial appointments to the Medical Staff and all Members granted new Privileges shall be subject to Focused Professional Practice Evaluation (FPPE). Information used for evaluation may be obtained through, but is not limited to the following:

1) Concurrent or targeted medical record review.
2) Direct observation.
3) Monitoring/proctoring of diagnostic, procedural, and/or treatment techniques.
4) Discussion with other practitioners involved in the care of specific patients.
5) Interviews with the physician involved in the patient's care.
6) Sentinel event data.
7) Any applicable peer review data.
8) Review of data from other institutions with applicant/member's permission.

B. Each appointee or recipient of new Clinical Privileges shall be assigned to a department (or departments) where performance on an appropriate number of cases as established by the Medical Executive Committee shall be observed by the chair of the department or the chair's designee, to determine suitability to continue to exercise the Clinical Privileges granted in that department.

C. The Member shall remain subject to FPPE until the Credentials Committee has been furnished with a report signed by the chair of the department(s) to which the member is assigned describing the types and numbers of cases observed and the evaluation of the applicant's performance, a statement that the applicant appears to meet all of the qualifications for unsupervised practice in that department.

D. FPPE may be implemented whenever the Medical Executive Committee or its designee determines that additional information is needed to assess a Member's performance.

E. FPPE is not an adverse action or a disciplinary measure. It is a means of gathering information regarding a Members' skills. Therefore, the requirements of proctoring does not itself give rise to the hearing rights triggered by an adverse action.

F. During FPPE, the Member must demonstrate the requisite competence required to exercise the Clinical Privileges.

6.6.1 Completion of FPPE

FPPE shall be deemed successfully completed when the Credentials Committee has received sufficient information about the applicant's competency.

6.6.2 Requirements to Provide FPPE

Members of the Medical Staff shall serve in a manner consistent with FPPE requirements. Refusal to serve in this capacity, without good cause, as determined by the Medical Executive Committee, is grounds for corrective action.

6.6.3 Failure to Complete FPPE

A Member who fails to complete the required initial FPPE within one year shall be deemed to have voluntarily withdrawn his or her request for those Privileges. The Credentials Committee or the Medical Executive Committee may extend the time for completion of FPPE in appropriate cases. If a Member completes the necessary FPPE but fails to perform competently he or she may have the relevant Privileges revoked or involuntarily modified in order to assure quality patient care. Failure to successfully complete proctoring may, in certain situations, be adequate grounds for revocation, suspension, or other involuntary modification of membership and/or privileges. Such actions regarding Privileges and Membership qualify as adverse actions entitling the practitioner to appropriate procedural hearings.

## 6.7 Disaster Privileges

In the event of a disaster of sufficient magnitude to require use of resources beyond those available to the Hospital and Medical Staff, privileges may be granted to volunteers on an emergent basis to handle immediate patient care needs.

6.7.1 Declaration of Disaster

The Hospital disaster plan must be implemented prior to consideration of grating disaster Privileges.

6.7.2 Individuals Responsible for Granting Disaster Privileges

The Medical Staff President or his/her designee, or the Administrator or his/her designee(s) are responsible for granting disaster Privileges. Under the disaster plan, and in the absence of the above persons or designees, the incident commander, or his/her designee(s), is the individual responsible for granting disaster Privileges until the above person or designees are present to carry out the function of granting Disaster Privileges.

*A.* Responsibilities of Individuals Granting Disaster Privileges.

Disaster Privileges may be granted on a case-by-case basis, and the responsible individual, at his or her discretion, is not required to grant Privileges to any individual.

6.7.3 Identification Requirements for Disaster Privileges

Disaster Privileges may be granted upon the presentation of a valid photo identification issued by a state or federal agency, and at least one of the following items;

*A.* A current hospital ID card that clearly identifies professional designation.

*B.* A current license to practice and a valid photo ID issued by a state or primary source verification of the license.

*C.* Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT) or MRC, ESAR-VHP, or other recognized state or federal organization or group.

*D.* Identification indicating that the individual has been granted authority to render patient care, treatment, and services in disaster circumstances (such authority having been granted by a federal, state, or municipal entity.)

*E.* Verification of identity and qualifications by current Hospital or Medical Staff Member(s) with personal knowledge of the practitioner's identity and qualifications.

6.7.4 Disaster Identification

Practitioners granted disaster Privileges shall be identifiable to other staff by the wearing of a Disaster Identification Badge.

6.7.5 Management of Persons Granted Disaster Privileges

Persons granted disaster Privileges will be assigned duties either by the grating authorities as defined in Section 6.6.2, 'Individuals Responsible for Granting Disaster Privileges,' or assigned to a specific department, by the Department Chair or his/her designee. In the absence of these persons, the incident commander may assign duties or delegate this responsibility to person(s), identified in the disaster plan, who are responsible for designation of duties.

The Medical Staff oversees the professional practice of volunteer licensed independent practitioners by direct observation and clinical record review.

Disaster Privileges are automatically terminated when the disaster plan is deactivated. Disaster Privileges may be revoked at any time or for any reason by the Medical Staff President, Administrator, Department Chair, or their designee(s).

The Hospital must make a decision (based on information obtained regarding the professional practice of the volunteer) within seventy-two (72) hours related to the continuation of disaster Privileges initially granted.

6.7.6 Verification Process

Verification:

Primary source verification of licensure begins as soon as the immediate situation is under control and is usually completed within seventy-two (72) hours from the time the volunteer practitioner presents to the organization. In extraordinary circumstances, when primary

source verification cannot be completed in seventy-two (72) hours, there must be documentation of the following:

- Why the Primary source verification could not be performed;
- Evidence of demonstrated ability to continue to provide adequate care, treatment and services.

Primary source verification must still be done as soon as possible.

# ARTICLE 7

## GENERAL MEDICAL STAFF OFFICERS

### 7.1 Identification

The general officers of the Medical Staff are the President, the President-Elect, and the Past President.

### 7.2 Qualifications

Each general officer must:

7.2.1 Be a member of the Active Staff at the time of nomination and election and remain a Member in good standing during his/her term of office;

7.2.2 Be licensed as a physician and surgeon.

7.2.3 Willingly and faithfully discharge the duties of the office; and

7.2.4 Exercise the authority of the office held, working with the other general and Department officers of the Medical Staff.

### 7.3 Attainment of Office

7.3.1 The election for the office of President-Elect shall take place in January of odd-numbered years. The person who receives the majority of the votes cast is the President-Elect and shall immediately assume the office. On July 1 of that same year, the President-elect shall assume the office of the President.

7.3.2 Term of Office

The President shall serve a two-year term, and may serve a maximum of four consecutive terms. If nonconsecutive, the number of terms a President may serve is not subject to limit. At the conclusion of the President's term(s) of office, the President shall assume the office of Past-President.

7.3.3 Should the incumbent President be reelected, the office of President-Elect shall remain vacant until the next January election for President.

7.3.4 Nomination

The MEC shall nominate qualified candidates for the office of President-Elect. Each nominee must be an M.D. or a D.O. Nominations may also be made from the floor at the October quarterly meeting by a Member of the Active Staff in good standing. Any such floor nomination must be seconded by a Member of the Active Staff in good standing and accompanied by evidence of the nominee's willingness to be nominated.

7.3.5 Election

The President-Elect is chosen from among the nominated candidates by election as defined in these Bylaws. Candidates for Medical Staff President-Elect may submit a written statement not to exceed two pages to the Medical Staff Office no later than close of business on December 3rd. On or before December 7th, the Medical Staff Office shall mail to all active Members of the Medical Staff a list of the candidates for Medical Staff President-Elect, accompanied by the candidates' statements, if any. Approximately thirty (30) days, but no less than twenty-five (25) days, before the January meeting of the Medical Executive Committee, the Medical Staff Office shall mail ballots to all active Members of the Medical Staff.

7.3.6 In order for a ballot to be counted, it must be returned to the Medical Staff Office no later than close of business on the 11th day before the January meeting of the Medical Executive Committee. The Medical Staff President and at least one other member of the MEC shall count the ballots, unless the Medical Staff President is a candidate. In that event, the MEC shall designate a second member of the MEC to count ballots. As soon thereafter as possible, the MEC shall notify all candidates of the election results. Thereafter, but at least seven (7) calendar days before the January meeting of the MEC, the MEC shall post, or otherwise disclose the election results to the Medical Staff.

## 7.4 Vacancies

7.4.1 If the office of the President becomes vacant after an election but before the end of the current President's term, the President-Elect will assume office to fill that vacancy and will serve the remainder of the current President's term and his/her own full term as President. If the office of the President becomes vacant while the election is underway, the Past President will serve as Acting President until the results of that election are determined. Once those results are determined, the President-Elect will assume office and will serve the remainder of the current President's term and his/her own full term as President. At any other times, if the office of the President becomes vacant, the Past President will serve as Acting President pending the outcome of a special election for the office of President to be conducted as expeditiously as possible and generally in the same manner as provided in this Article. The MEC may determine, however, not to call a special election if a regular election for the office is to be held within ninety (90) days. The winner of a special election will serve only the remainder of the current President's term.

7.4.2 In the event of a vacancy in the office of Past President, the MEC shall appoint a Member of the MEC to serve out the remainder of the vacated term.

## 7.5 Resignation and Removal from Office

7.5.1 Resignation

Any general Medical Staff officer may resign at any time by giving written notice to the Medical Executive Committee. Such resignation, which may or may not be made contingent upon formal acceptance, takes effect on the date specified in the resignation or, if no date is specified, on the date of receipt.

7.5.2 Removal

*A.* Authority and Mechanism:
   1) Removal of a general staff officer may be effected by two-thirds majority vote by secret ballot of the members of the Active Staff in good standing.

*B.* Grounds:
   1) Permissible grounds for removal of a general staff officer include, without limitation;

*C.* Failure to perform the duties of the position held in a timely and appropriate manner;

*D.* Failure to continuously meet the qualifications for the position;

*E.* Physical or mental infirmity that renders the office incapable of fulfilling the duties of his/her office.

## 7.6 Duties of General Staff Officers

7.6.1 Medical Staff President

The Medical Staff President shall serve as the Chief Office of the Medical Staff. The duties of the Medical Staff President shall include, but are not limited to:

*A.* Enforcing the Bylaws and Rules, implementing sanctions where indicated, and enforcing procedural safeguards where corrective action has been requested or initiated;

*B.* Calling, presiding at, and being responsible for the agenda of all meetings of the Medical Staff;

*C.* Serving as the chair of the Medical Executive Committee;

*D.* Serving as an ex-officio member of all other Medical Staff Committees;

*E.* Interacting with the Administrator and the Governing Body in all matters concerning the Hospital;

*F.* Appointing, in consultation with the Medical Executive Committee, committee members for all standing and special medical Staff, liaison, and multi-disciplinary committees, except where otherwise provided by these Bylaws and, except where otherwise indicated, designating the chairpersons of these committees;

*G.* Representing the views and policies of the Medical Staff to the Governing Body and to the Administrator;

*H.* Being a spokesperson for the Medical Staff in external professional and public relations;

*I.* Performing such other duties as may be required by the Bylaws, the Medical Staff, or by the Medical Executive Committee;

*J.* Serving as an ex-officio member on liaison committees with the Governing Body and Administration and with outside licensing and accreditation agencies.

7.6.2 President-Elect

The President-Elect shall assume all duties and authority of the Medical Staff President in the absence of the Medical Staff President. The President-Elect shall also be a member of the Medical Executive Committee and an ex-officio member of the Joint Conference Committee. The President-Elect shall perform such other duties as the Medical Staff President may assign or delegate to the President-Elect.

7.6.3 Past President

The Past President shall have the same duties and responsibilities as the President-Elect in the absence of the President-Elect.

# ARTICLE 8

## DEPARTMENT AND DIVISIONS

### 8.1 Organization of Departments

Each Department shall be organized as an integral unit of the Medical Staff and shall have a chair. The authority, duties, method of selection and responsibilities of these Department officers is set forth below. Each Department may appoint such standing or ad-hoc committees as it deems appropriate to perform its required functions. A Department may be further divided, as appropriate, into divisions. The division shall be directly responsible to the Department within which it functions. Each division shall have a division chief, appointed by the department head or elected by the division members, entrusted with the authority, duties and responsibilities specified in Section 8.7. When appropriate, the Medical Executive Committee may recommend to the Medical Staff the creation, elimination, modification, or combination of Departments or divisions.

8.1.1 Current Clinical Departments and Divisions:

The current Clinical Departments and Divisions are:

1. Family and Adult Medicine
    - i. West County
    - ii. Martinez
    - iii. Concord
    - iv. East
    - v. Far East

2. Internal and Specialty Medicine
3. Hospital Medicine
4. Emergency Medicine
5. Psychiatry/Psychology
6. Pediatrics
7. Obstetrics and Gynecology
8. Surgery
9. Anesthesia
10. Critical Care Medicine
11. Dental
12. Diagnostic Imaging
13. Pathology

*(a)*

## 8.2 Assignment to Departments

Each Member shall be assigned membership in at least one Department, but may also be granted membership and/or Privileges in other Departments.

## 8.3 Functions of Departments

The functions of each Department shall include:

1) Conducting patient care reviews for the purpose of analyzing and evaluating the quality and appropriateness of care and treatment provided to patients within the Department. The Department shall routinely collect information about important aspects of patient care provided in the Department, periodically asses this information, and develop objective criteria for use in evaluating patient care. Patient care reviews shall include all clinical work performed under the jurisdiction of the Department;
2) Recommending to the Medical Executive Committee guidelines for the granting of Clinical Privileges and the performance of specified services within the Department;
3) Evaluating and making appropriate recommendations regarding the qualification of applicants seeking appointment or reappointment and Clinical Privileges within that Department;
4) Conducting, participating and making recommendations regarding continuing education programs pertinent to departmental clinical practice;
5) Reviewing and evaluating departmental adherence to: (1) Medical Staff policies and procedures; and (2) sound principles of clinical practice;
6) Coordinating patient care provided by the Department's Members with nursing and ancillary patient care services;
7) Submitting written reports to the Medical Executive Committee concerning: (1) the Department's review and evaluation activities, actions taken thereon and the results of such action; and (2) recommendations for maintaining and improving the quality of care provided in the Department and Hospital;

8) Meeting regularly for the purpose of considering patient care review findings and the results of the Department's review and evaluation activities, as well as reports on other Department and staff functions;
9) Establishing such committees or other mechanisms as are necessary and desirable to perform properly the functions assigned to it, including proctoring protocols;
10) Taking appropriate action when important problems in patient care and clinical performance or opportunities to improve care are identified;
11) Accounting to the Medical Executive Committee for all professional and Medical Staff administrative activities within the Department;
12) Appointing such committees as may be necessary or appropriate to conduct Department functions;
13) Formulating recommendations for departmental rules and regulation reasonably necessary for the proper discharge of its responsibilities subject to the approval by the Medical Executive Committee and the Medical Staff;

When the department or any of its committees meet to carry out the duties described above, the meeting body shall constitute a peer review body, which is subject to the standards and entitled to the protections and immunities afforded by federal and state law for peer review bodies and/or committees. Each department and/or its committees, if any, must meet regularly to carry out its/their duties.

## 8.4 Department Heads

Each Department shall have a Department Head who shall be a Member of the active provisional Medical Staff and shall be certified by an appropriate specialty board, or affirmatively establish, through the Privilege delineation process, that the person possesses comparable competence in at least one of the clinical areas covered by the Department.

Each Department Head shall have the following authority, duties and responsibilities:

1) Act as presiding Officer (Chairperson) at departmental meetings;
2) Report to the Medical Executive Committee and the Medical Staff President regarding all professional and administrative activities within the Department;
3) Generally monitor the quality of patient care and professional performance rendered by Members with Clinical Privileges in the Department through a planned and systematic process; oversee the effective conduct of the patient care, evaluation, and monitoring functions delegated to the department by the Medical Executive Committee;
4) Prepare and transmit to the appropriate authorities, as required by these Bylaws, recommendations concerning appointment, reappointment, delineation of Clinical Privileges, and corrective action with respect to practitioners holding membership of exercising privileges or services in the Department;
5) Annually review, and amend as necessary, Department policies and procedures;

6) Participate in managing the Department through cooperation and coordination with nursing and other patient care services and with Administration on all matters affecting patient care, including personnel, equipment, facilities, services, and budget;
7) Endeavor to enforce the Bylaws, Rules and policies and regulations with the Department;
8) Appoint an acting Department Head (Vice-Chairperson) during any absence;
9) Assure all Department functions are performed;
10) Perform such other duties commensurate with the office as may from time to time be reasonably requested by the Medical Staff President or the Medical Executive Committee;
11) Plan and conduct, as requested by and in cooperation with the Residency Director, a program of instruction, supervision, and evaluation of Residents'
12) Assess and recommend to the relevant hospital authority off-site sources for needed patient care services not provided by the department or organization;
13) Recommend a sufficient number of qualified and competent persons to provide care, treatment and services;
14) Determine the qualifications and competence of Department or service personnel who are not licensed independent practitioners and who provide patient care, treatment and service;
15) Continually asses and improve the quality of care, treatment and services;
16) Maintain quality control programs, as appropriate;
17) Oversee the orientation and continuing education of all persons in the Department or service;
18) Recommend space and other resources needed by the Department or service;
19) Recommend to the Medical Staff the criteria for Clinical Privileges that are relevant to the care provided in the Department;
20) Integrate the Department or service into the primary functions of the organization and coordinate and integrate interdepartmental and intradepartmental services;
21) Develop and implement policies and procedures that guide and support the provision of care, treatment and services.

## 8.5 Election of Department Heads

8.5.1 In April of each election year, the active Medical Staff of the applicable Department shall elect a Department Head.

8.5.2 The following Departments shall elect a Department Head in odd-numbered years: Family and Adult Medicine,, Anesthesia, Pediatrics, Internal and Specialty Medicine, Hospital Medicine, Pathology and Dentistry.

The following Departments shall elect a Department Head in even-numbered years: Emergency Medicine, Surgery, Psychiatry/Psychology, Diagnostic Imaging, Obstetrics & Gynecology and Critical Care.

8.5.3 The Medical Staff President shall request nominations for Department Head at the January Quarterly Medical Staff meeting and at the applicable Department meeting.

Nominations may be submitted by any department member within the nominating department regardless of status (e.g. active; courtesy, etc.). Nominations may be made only to the current Department Head or to the Medical Staff President.

The last day to nominate a candidate for Department Head is March first. Candidates may submit a written statement not to exceed two pages to the Medical Staff office no later than close of business on March 3rd. The Medical Staff Office shall mail a list of candidates to all active Members of the Medical Staff in the affected Department no later than March 7th. The candidates' statements, if any, shall accompany the list.

8.5.4 Approximately thirty (30) days, but no less than twenty-five (25) days, before the April meeting of the Medical Executive Committee, the Medical Staff office shall mail ballots to all the active Medical Staff Members within the affected Department.

In order for a ballot to be counted, it must be returned to the Medical Staff Office no later than close of business on the 11th day before the April meeting of the Medical Executive Committee. The Medical Staff President and at least one other member of the Medical Executive Committee shall count the ballots, unless the Medical Staff President is a candidate. In that event, the Medical Executive Committee shall designate a second member of the Medical Executive Committee to count ballots. As soon thereafter as possible, the Medical Executive Committee shall notify all candidates of the election results. Thereafter, but at least seven (7) calendar days before the April meeting of the medical Executive Committee, the Medical Executive Committee shall post, or otherwise disclose to the Medical Staff, the election results.

8.5.5 The Medical Executive Committee shall review the newly elected Department Heads for approval at its April meeting. The elected Department Head is thereafter subject to the approval of the Chief Medical Office. In the event that the elected Department Head is not approved by either the Medical Executive Committee or the Chief Medical Officer, a new election shall be conducted as soon as possible. If the Chief Medical Office r does not approve a Department Head, she/he will discuss the reasons for disapproval at the next Medical Executive Committee meeting.

8.5.6 The Medical Staff President can appoint an acting Department Head, subject to MEC approval, to carry out the duties of Department Head until an election is possible.

8.5.7 Term of Office

The term of office of Department Heads is two Medical Staff years. Each assumes office on the first day of the Medical Staff year, except that a Department Head appointed to fill a vacancy assumes office immediately upon appointment. Each Department Head serves until the end of his or her term until a successor is elected, unless he/she resigns sooner or is removed from office. A Department Head is eligible to succeed himself/herself.

8.5.8 Removal

After election and ratification, removal of a Department Head from office may occur for cause by two-thirds vote of the Medical Executive Committee or a two-thirds vote of the Department Members on active staff.

## 8.6 Functions of Divisions

Subject to approval of the Medical Executive Committee, each division shall perform the functions assigned to it by the Department Chairperson. Such functions may include, without limitation, retrospective patient care reviews, evaluation of patient care practices, credentials review and privileges delineation, and continuing education programs. The division shall transmit regular reports to the Department Head on the conduct of its assigned functions.

Each Division head shall:

1) Act as presiding officer at division meetings;
2) Assist in the development and implementation, in cooperation with the Department Head, of programs to carry out the quality review and evaluation and monitoring functions assigned to the division;
3) Continually review the patient care and the professional performance of Division members, and report to the Department Head patterns or situations affecting patient care within the Division;
4) As requested by and in cooperation with the Department Head, conduct investigations and submit reports and recommendations to the Department Head regarding the Clinical Privileges to be exercised within his/her division by members of or applicants to the Medical Staff;
5) Manage the Division through cooperation and coordination with nursing and other patient care services and with Administration on all matters affecting patient care, including personnel, equipment, facilities, services, and budget;
6) Assure all Division functions are performed;
7) Perform such other duties commensurate with the office as may from time to time be reasonably requested by the Department Head, the Medical Staff President, or the Medical Executive Committee.

## 8.7 Division Heads

Each division shall have a Division Head who shall be a Member of the active or provisional Staff and a Member of the division which he/she heads, and shall be certified by an appropriate specialty board, or affirmatively establish through the privilege delineation process that he/she possesses comparable competence in at least one of the clinical areas covered by the division.

Each Division Head shall:

1) Act as providing officer at division meetings;

2) Assist in the development and implementation, in cooperation with the Department Head, of programs to carry out the quality review and monitoring functions assigned to the division;
3) Continually review the patient care and the professional performance of Division members, and report to the Department Head patterns or situations affecting patient care within the Division;
4) As requested by and in cooperation with the Department Head, conduct investigations and submit reports and recommendations to the Department Head regarding the Clinical Privileges to be exercised within his/her division by Members of or applicants to the Medical Staff;
5) Manage the Division through cooperation and coordination with nursing and other patient care services and with Administration on all matters affecting patient care, including personnel, equipment, facilities, services, and budget;
6) Assure all Division functions are performed;
7) Perform such other duties commensurate with the office as may from time to time be reasonably requested by the Department Head, the Medical Staff President, or the Medical Executive Committee.

## 8.8 Election of Division Heads

8.8.1 In April of each election year, the active Medical Staff of the applicable division shall elect a Division Head as set forth.

8.8.2 Family and Adult Medicine West County and Family and Adult Medicine Far East County shall elect Division heads in even-numbered years; Family and Adult Medicine Martinez, Family and Adult Medicine Concord and Family and Adult Medicine East County shall elect Division Heads in odd-number years.

8.8.3 The Medical Staff President shall request nominations for Division Heads at the January Quarterly Medical Staff meeting and at the applicable division meeting. Nominations may be made only to the current Department Head or to the Medical Staff President.

The last day to nominate a candidate for Division Head is March 1st. Candidates may submit a written statement not to exceed two pages to the Medical Staff Office no later than close of business on March 3rd. The Medical Staff Office shall mail ballots to all the active Medical Staff Members within the affected division no later than March 7th. The candidates' statements shall accompany the list, if any.

8.8.4 Approximately thirty (30) days, but no less than twenty-five (25) days, before April meeting of the Medical Executive Committee, the Medical Staff Office shall mail ballots to all the active Medical Staff Members within the affected division.

In order for a ballot to be counted, it must be returned to the Medical Staff Office no later than the close of business on the 11th day before the April meeting of the Medical Executive Committee. The Medical Staff President and at least one other member of the Medical Executive Committee shall count the ballots, unless the Medical Staff President is a

candidate. In that event, the Medical Executive Committee shall designate a second member of the Medical Executive Committee to count ballots. As soon thereafter as possible, the Medical Executive Committee shall notify all candidates of the election results. Thereafter, but at least seven calendar days before the April meeting of the Medical Executive Committee, the Medical Executive Committee shall post, or otherwise disclose to the Medical Staff, the election results.

8.8.5 The newly elected Division Heads shall be reviewed for approval by the appropriate Department Head prior to the April meeting of the Medical Executive Committee and by the Medical Executive Committee at its April meeting. The elected Division Head is thereafter subject to approval of the Chief Medical Officer. In the event that the elected Division Head is not approved by the Department Head, the Medical Executive Committee or the Chief Medical officer, a new election shall be conducted as soon as possible. If the Department Head or the Chief Medical Officer does not approve a Division head, she/he will discuss the reasons for disapproval at the next Medical Executive Committee meeting.

8.8.6 Division members shall fill vacancies due to any reason for the unexpired term by election as soon as possible. The Department Head can appoint an acting Division head, subject to MEC approval, to carry out the duties of Division Head until this election is possible.

8.8.7 Term of Office

The term of office of Division heads is two Medical Staff years. Each assumes office on the first day of the Medical Staff year, except that a Division head elected to fill a vacancy assumes office immediately upon election. Each Division head serves until the end of his/her term and until a successor is elected, unless he/she sooner resigns or is removed from office. A Division Head is eligible to succeed himself/herself.

8.8.8 Removal

After selection and ratification, a Division head may be removed for cause by the Department Head, a two-thirds vote of the Division Members on active Staff, or by a two-thirds vote of the MEC.

# ARTICLE 9

## COMMITTEES

### 9.1 General Provisions

9.1.1 Designation

*A.* The Medical Executive Committee and the other committees described in these Bylaws shall be standing committees of the Medical Staff unless otherwise indicated.

*B.* The Chairperson of the Medical Executive Committee, a standing committee, or a Department may create subcommittees, or Ad-Hoc committees, in order to carry out specified tasks. These specified tasks must be within the scope of authority of the committee whose chairperson created the committee. Such committees terminate once the specified task is completed and are not standing committees.

9.1.2 Appointment of Members to Committees

*A.* The Medical Staff President, with the approval of the MEC, shall appoint chairpersons and members of standing committees unless otherwise specified in the Bylaws. Committee members are appointed for a term of one Medical Staff year unless otherwise specified by the Bylaws, and shall serve either until the end of this period, until the member's successor is appointed, or until the member resigns or is removed from the committee.

*B.* Only Medical Staff in good standing may be voting members of any Medical Staff Committee. Other individuals may be appointed to committee positions as either Ex-officio or non-medical Staff members.

*C.* For committees that are not standing committees, the person creating the committee shall appoint Chairpersons and Members.

9.1.3 Removal of Committees

Unless otherwise specified in the Bylaws, committee members may be removed by the appointing authority without cause.

9.1.4 Vacancies

Vacancies on any committees shall be filled in the same manner as an original appointment is made.

9.1.5 Conduct of Meeting of Committees

Committee meetings shall be conducted and documented in the manner specified in these Bylaws.

9.1.6 Attendance of Non-Members

Members in good standing of the Medical Staff who are not committee members my attend committee meetings only with the permission of the Chair of the committee.

9.1.7 Accountability

All committees of the Medical Staff are accountable to the Medical Executive Committee.

## 9.2 Medical Executive Committee

9.2.1 Composition

The Medical Executive Committee (MEC) consists of the following Members of the Medical Staff as voting members:

1) President of the Medical Staff;
2) President-Elect;
3) Past President;
4) Clinical Department Heads;
5) Division heads;
6) The Chairpersons of the following committees shall be voting members of the MEC:
   *A.* Administrative Affairs
   *B.* Ambulatory Policy
   *C.* Credentials
   *D.* Patient Safety and Performance Improvement
   *E.* Patient Care Policy and Evaluation
7) Chief administrators are official members of MEC with regular reporting duties without voting rights. These include the Director of Health Services, the Chief Financial Officer, the Chief Executive Officer of Hospital and Clinics, the Chief Medical Officer, the Chief Nursing Officer, the Chief Operations Officer for CCRMC/HC, the Ambulatory Care Medical Director, the Hospital Medical Director, Medical Director of Patient Safety and Perfomance Improvement, the Chief Medical Informatics Officer, the Residency Program Director and the Medical Director of Contra Costa Health Plan. The Chairperson of the MEC may invite other individuals to participate in the MEC meetings as non-voting guests.

9.2.2 Duties

The Medical Executive Committee shall:

*A.* Perform and/or delegate performance of all Medical Staff functions in a manner consistent with the Bylaws and the Rules;
*B.* Coordinate and implement the Activities of the committees and the Departments;
*C.* Make recommendations regarding Medical Staff membership and privileges;
*D.* Initiate and pursue disciplinary or corrective actions when indicated;

*E.* Supervise the Medical Staff's compliance with the Medical Staff Bylaws, Rules and policies;

*F.* Supervise the Medical Staff's compliance with County laws, rules, policies and procedures;

*G.* Supervise the Medical Staff's compliance with state and federal laws and regulations;

*H.* Supervise the Medical Staff's compliance with TJC and other applicable accreditation and certification rules;

*I.* Regularly report to the Governing Body regarding the status of Medical Staff issues;

*J.* Meet monthly to conduct Medical Staff business;

*K.* Represent and act on behalf of the Medical Staff in the intervals between Medical Staff meetings, subject only to such specific limitations as may be imposed by those Bylaws.

## 9.3 Committees

In order to remain in good standing on a committee, a member must attend at least 50 percent of the meetings.

### 9.3.1 Administrative Affairs Committee

*A.* Purpose and Meetings

The Administrative Affairs Committee (AAC) fulfills staff responsibilities relating to review and revision of Medical Staff Bylaws and related manuals and forms and assumes the responsibilities for investigating and providing recommendations on such other administrative policy-making and planning matters and activities of concern to the Staff as are referred by the MEC. The AAC oversees the Institutional Review Committee (IRC) which reviews, approves or denies, monitors and evaluates research projects, protocols, and clinical investigations to be conducted within the Medical Services, in compliance with the regulations of the Food and Drug Administration and observing all requirements of any other applicable regulatory authorities for any given study. The AAC may overrule a positive recommendation of the IRC, but the AAC may not approve a study or the use of an investigational agent if disapproved/denied by the IRC. The AAC meets as needed, and reports to the MEC. When appropriate, it shares its monitoring and evaluation findings from research projects with the Patient Safety and Performance Improvement Committee and vice versa.

*B.* Composition

The Administrative Affairs Committee includes;

1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC approval;
2) At least 4-6 additional Staff Members;
3) Administrator, with vote; and
4) Their members with special expertise as necessary on an ad-hoc basis, without vote.

9.3.2 Ambulatory Policy Committee

*A.* Purpose and Meetings

The Ambulatory Policy Committee (APC) sets Medical Staff policy in the health centers and acts as a liaison with Nursing and Administration for coordination of policies and procedures under joint Medical Staff-Administration or Medical Staff-Nursing purview.

APC develops policies to resolve issues that affect more than one Medical Staff Department and focuses on policies and projects that relate to quality of care, the efficiency of the health centers and patients that relate to quality care, the regulatory compliance. APC coordinates its activities with PSPIC and receives quality assurance reports suggestive of or requiring changes in policies and procedures from individual Medical Staff Departments and from the Ambulatory Subcommittee of PSPIC.

I. Composition

The Ambulatory Policy Committee includes:

1) A Physician Chairperson; appointed by the Medical Staff President, subject to MEC approval
2) One Staff Member from each Region;
3) The Department Head of Family Medicine or his/her designee;
4) Representative of the Departments of Obstetrics & Gynecology, Surgery, Pediatrics and Medicine, with vote;
5) Other members with special expertise as needed on an ad-hoc basis without cote;
6) Director of Health Information Management as needed on an ad-hoc basis without vote
7) A representative of the Allied Health Professionals, without vote;;
8) Ambulatory Care Medical Director without vote;
9) Chief Nursing Officer without vote.

9.3.3 Bioethics Committee

*A.* Purpose and Meetings

The Bioethics Committee provides a multi-disciplinary forum for the development of guidelines for consideration of cases and issues having bioethical implications; development and implementation of procedures for the review of such cases; development and/or review of institutional policies regarding care and treatment in cases or issues having bioethical implications; consultation with concerned parties to facilitate and education of the hospital staff regarding bioethical matters. The committee will meet regularly (at least six (6) times yearly) and will also provide a mechanism for other meetings as necessary to perform the case consultation functions. The committee chair will report to the Medical Executive Committee.

*B.* Composition

The Bioethics Committee includes;

1) A physician chairperson appointed by the Medical Staff President subject to Medical Executive Committee approval;
2) Multi-disciplinary representation selected to represent the various clinical services of the medical and nursing staff, ancillary support services (such as social workers, chaplains, etc.) and lay members. At least a third of the committee membership will be physicians;
3) A member representing hospital administration; and
4) The committee may invite other professional or community lay members to be utilized when discussing issues involving their particular clinical, ethnic, religious or other background.

9.3.4 Cancer Committee

*A.* Purpose and Meetings

The Cancer Committee is a multi-disciplinary committee that organizes, conducts and evaluates hospital-wide oncology services and the cancer registry. The committee assures that full oncology services including surgery, chemotherapy, radiation therapy, as well as rehabilitation and hospice care are available to all patients. The committee will develop and monitor annual goals and objectives for clinical care, community outreach, quality improvement and programmatic endeavors related to cancer care. The committee is responsible for establishing and monitoring the Cancer Conference format, frequency and multi-disciplinary attendance. The committee will ascertain if there is a need for specific educational programs both professional and public based on survival and comparison data. The committee will also supervise the Cancer Registry for quality control of case-funding, abstracting, staging, reporting and follow-up. The committee will conduct a minimum of two patient care evaluation studies annually, one to include survival data. The committee will meet at least quarterly or more often as needed and communicate as necessary with the Patient Safety and Performance Improvement Committee. The committee will designate one coordinator for each of the four areas of Cancer Committee activity: Cancer Conference, quality control of the cancer registry, quality improvement and community outreach.

*B.* Composition

The Cancer Committee includes:

1) A Physician chairperson appointed by the Medical Staff President, subject to Medical Executive Committee approval;

2) At least five (5) additional Medical Staff Members including representation from Surgery, Pathology, Hematology/Oncology, Family Practice, and Diagnostic Imaging;
3) Cancer Liaison Physician;
4) Representation for Administration, Social Services, Nursing, and the American Cancer Society all with vote; and

The Cancer Registrar, who will act as staff to the Cancer Committee, with vote.9.3.5 Continuing Medical Education Committee

*A.* Purpose and Meetings

The Continuing Medical Education Committee (CMEC) directs the development of CME programs for the Staff responsive to quality assurance findings and to developments pertinent at the Hospital and apprises the Staff of outside education opportunities. It coordinates the educational activities of the Departments and of the Staff and Hospital Department. The CMEC also analyzes the status and needs of, and make recommendations regarding, the medical library services. It meets at least quarterly and more frequently if needed and reports on its activities to the MEC.

*B.* Composition

The CMEC included:

1) A Chairperson appointed by the Medical Staff President, subject to MEC approval;
2) At least two additional Staff Members; and
3) Medical Librarian, without vote.

9.3.6 Credentials Committee

*A.* Purpose and Meetings

The Credentials Committee coordinates the staff credentials function by receiving and analyzing applications and recommendations for appointment, provisional period conclusion or extension, reappointment, clinical privileges, and changes therein, and recommending action therein, and by integrating quality assurance and utilization review and monitoring, membership, and other relevant information into the individual credentials files. It also assists in designing and participates in implementing the credentialing procedures for Allied Health Practitioners. It meets monthly or as necessary and reports to the MEC regarding the credentialing of Staff Members.

*B.* Composition

The Credentials Committee includes:

1) A physician chairperson, appointed by the Medical Staff President, subject to MEC approval; and

2) At least 4-6 additional Staff Members, selected to be representative of the Departments and major clinical specialties.

9.3.7 Informatics Advisory Committee

*A.* Purpose and Meetings

The Informatics Advisory Committee provides governance in informatics and Information Technology (IT)-related clinical systems. It prioritizes issues, reports and optimization and acts as a liaison between medical staff departments and IT/clinical informatics.

I. Composition

1) Chief Medical Informatics Officer (CMI) who serves as Chair
2) Director of Nursing Informatics
3) Director of Medical Outpatient Informatics
4) Director of Medical Inpatient Informatics
5) A representative of each department.

9.3.8 Institutional Review Committee

*A.* Purpose and Meetings

The Institutional Review Committee shall review and have authority to: approve, require modification in (to secure approval), or disapprove all research activities within the Hospital and Health Centers; approve, require modification in, or disapprove the use of investigation drugs or devices in individuals (i.e. "Compassionate use" cases); receive prompt notification of the emergency use of investigational drugs or devices and approve, require modification in or, disapprove their continued use; continue, require modifications in or terminate any ongoing studies at intervals of not greater than twelve (12) months; immediately terminate or suspend any research not conducted in accordance with the IRC's requirements or that has been associated with unexpected serious harm to subjects; ensure all compliance with federal informed consent regulations regarding investigational use of drugs and devices; and assure the protection of the rights and welfare of all human subjects. The Institutional Review Committee shall meet semi-annually or more often as necessary to fulfill its obligations. If the Institutional Review Committee disapproves of any activity within its purview, that decision is final. The Institutional Review Committee chairperson reports to the Administrative Affairs Committee.

*B.* Composition

The Institutional Review Committee includes:

1) A Chairperson appointed by the Chairperson of the Administrative Affairs Committee, subject to Medical Executive Committee approval;
2) At least one member of each gender;

3) At least one member from outside the medical profession;
4) At least one non-scientist;
5) At least one member not affiliated with the Hospital and Health Centers; and
6) A total of at least five (5) members, including representative ethnic and cultural backgrounds, of the community.

9.3.9 Inter-Disciplinary Practice Committee

*A.* Purpose and Meetings

The Inter-Disciplinary Practice Committee (IPC) shall perform functions consistent with the requirements of law and regulations (Title 22 of the California Code of Regulations,Section 70706). Method for the approval of standardized procedures in accordance with sections 2725 of the Business and Professions Code in which affirmative approval of the administrator or designee and a majority of the physicians and a majority of registered nurse members would be required. The IPC shall routinely report to the MEC; and, in addition, shall submit an annual report to the MEC. The IPC shall meet at least annually, or more often as necessary.

*B.* Composition

The IPC shall consist of:

1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC approval;
2) A Director of Nursing, or Designee: such as the clinical services director of Public Health who has oversight over NP/AHP function;
3) An Administrator, or designee: such as the Ambulatory Care Medical Director;
4) Chair of the Credentials Committee;
5) Nurse Practitioner Division Head
6) Two (2) additional allied health professionals, appointed by the IPC Chairperson, in consultation with the NP Division Head
7) A medical staff representative from the clinical psychology department.
8) Additional Allied Health Professionals who are performing or will perform functions requiring standardized procedures will be appointed by the IPC Chair on a temporary basis when issues pertaining to their functions are discussed.
9) Additional physician members of the medical staff physicians and/or registered nurses may be appointed by the physician chair person or the director of nursing, respectively, to maintain equal numbers of each on the committee in accordance with Title 22 of the California Code of Regulations, Section 70706.

9.3.10 Joint Conference Committee

*A.* Purpose and Meetings

The Joint Conference Committee constitutes a forum between the Medical Staff, the Administration and the Governing Body. Two members of the Medical Executive Committee who serve at the will of the Medical Executive Committee represent the Medical Staff. These members shall act as directed by the MEC in their capacity as members of the Joint Conference Committee.

The Governing Body and the Administration shall have representation pursuant to authority separate from these Bylaws.

9.3.11 Medical Staff Assistance Committee

*A.* Purpose and Meetings

In order to improve the quality of care and promote the well-being of the Medical Staff, the Medical Staff Assistance Committee (MSAC) receives reports related to health concerns, well-being, or impairment of Medical Staff Members, and other Licensed Independent Practitioners (LIPs) and, as it deems appropriate, investigates such reports. With respect to matters involving individual Medical Staff Members and other LIPs, the committee may, on a voluntary basis, provide such advice, counseling, or referrals as may seem appropriate. Such activities shall be confidential; however, in the event information received by the committee clearly demonstrates that the health or known impairment of a Medical Staff Member or LIP poses an unreasonable risk of harm to patients, that information may be referred for corrective action.

The process that the MSAC uses to accomplish these goals includes:

1) Education of the Medical Staff and other organization staff about illness and impairment recognition issues specific to the Medical Staff Member or licensed independent practitioners;
2) Self-referral by a physician or Licensed Independent Practitioner (LIP) and referral by other organization staff;
3) Referral of the Physician, or the affected LIP to the appropriate professional internal or external resources for diagnosis and treatment of the condition or concern;
4) Maintenance of the confidentiality of the Physician, or LIP seeking referral or referred for assistance except as limited by law, ethical obligation, or when the safety of a patient is threatened;
5) Evaluation of the credibility of a complaint, allegation, or concern;
6) Monitoring of the Physician, or affected LIP and the safety of patients until the rehabilitation or any disciplinary process is complete;

7) Reporting to the Medical Staff leadership instances in which a Physician or LIP is providing unsafe treatment; and
8) Initiating appropriate action when a Physician or LIP fails to complete the required rehabilitation program.

The committee shall also consider general matters related to the health and well-being of the Medical Staff, and, with the approval of the Medical Executive Committee, develop educational programs or related activities. The Medical Staff Assistance Committee shall meet as often as necessary, but at least quarterly. It shall maintain only such record of its proceedings as it deems advisable, but shall report on its activities on a routine basis to the Medical Executive Committee.

*B.* Composition

The Medical Staff Assistance Committee includes;

1) A Physician Chairperson, appointed by the Medical Staff President, subject to Medical Executive Committee approval;
2) At least two (2) additional practitioners; and
3) A Member of the Resident staff.

Except for the resident, who shall serve on the committee for one (1) year, each member shall serve for a term of three (3) years, and the term shall be staggered as deemed appropriate by the Medical Executive Committee to achieve continuity. In so far as possible, members of this committee shall not serve as active participants on other peer review or quality assurance committees while serving on this committee.

The Chairperson may appoint additional individuals who are not members of the Medical Staff, including non-physicians, when such appointment may materially increase the effectiveness of the work of the committee. These individuals shall serve for a term that shall be determined by the Chairperson.

9.3.12 Informatics Clinical Communication Committee (ICCC)

*A.* Purpose and Meetings

The Informatics Clinical Communication Committee addresses clinical workflows in an effort to enhance patient safety and maximize efficient care. The InBasket is the hub of communication and information flow in the electronic health record. The committee brings together provider, nursing, ancillary and technical representative to design, build, and troubleshoot processes to allow providers, nurses, and ancillary staff to care for patients safely and efficiently.

The committee will meet at least monthly and more frequently as needed.

*B.* Composition

1) A Chairperson appointed jointly by the Chief Medical Informatics Officer and the Medical Staff President

2) Family and Adult Medicine Department Representative
3) Pediatrics Department Representative
4) Internal and Specialty Medicine Representative
5) At least one (1) representative from Nursing Administration
6) At least one (1) representative from Nursing Informatics
7) A representative from the Public Health Division
8) A representative from the Information Technology Department
9) A representative from the Residency Program

In addition, the committee will seek representation from departments whose workflows appear on the meeting agenda, including the various ancillary services departments.

This ICCC Chair or his/her designee shall report to the Medical Executive Committee on an annual basis. The ICCC will make recommendations to IAC and operations leadership as appropriate.

9.3.13 Patient Care Policy and Evaluation Committee

*A.* Purpose and Meetings

The Patient Care Policy and Evaluation (PCP&E) Committee monitors, assesses and recommends improvements to the MEC for:

1) The clinical and medical records policies and rules of the Medical Staff and of its inpatient clinical units and diagnostic and therapeutic support services (including OR/PAR, ER, CCU's, etc.);
2) Medical-related aspects of infection control policies;
3) Pharmacy and therapeutics policies and practices; and
4) Blood and blood products usage policies and practices.

It also acts as liaison with Nursing and Administration for review and coordination of policies, procedures, rules or regulations under joint Medical Staff-Administration or Medical Staff-Nursing purview and coordinates its activities with those of the Ambulatory Policy Committee. The PCP&EC receives quality assurance findings suggestive of or requiring changes. It serves as a forum for identifying and discussing problems in the delivery of patient care services and in the observance of patients' rights. The PCP&EC meets monthly and reports to the MEC.

*B.* Composition

The Patient Care Policy and Evaluation Committee includes:

1) A Physician Chairperson appointed by the Medical Staff President, subject to MEC approval;
2) At least 6-8 staff members selected to be representative of major clinical areas;
3) A representative of Nursing Service;
4) Director of Pharmacy ad-hoc for Pharmacy and Therapeutic function;
5) A representative from Pathology Department ad-hoc for blood and blood product review function;
6) Manager of Infection Control and Prevention Committee of the Hospital;
7) A representative of Administration responsible for policy committee support without vote;
8) A Nursing Supervisor/Coordinators for specialty units invited on an ad-hoc basis without vote;
9) A representative of other clinical services and professional, technical, administrative support staff participate as consultants in relevant areas of expertise ad-hoc without vote; and
10) Director of Health Information management quarterly and as needed without vote.

9.3.14 Patient Safety and Performance Improvement Committee

*A.* Purpose and Meetings

The Patient Safety and Performance Improvement Committee (PSPIC) has the authority and responsibility for implementing and directing the Quality Management Program for the Hospital. It is responsible for setting the quality management standards, determining criteria by which care will be measured, setting priorities for which aspects of care will be monitored, and analyzing the quality of care studies, indicators, utilization reports, grievances, survey data, and risk management information. A systematic, multi-disciplinary improvement process is followed. It develops an annual plan for performance improvement activities (Quality Management Plan).

*B.* Composition

The Patient Safety and Performance Improvement Committee includes the following Members:

1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC Approval.
3) The Medical Staff President;
4) The CCRMC Chief Executive Officer;
5) The Director of Pharmacy;
6) The Chief Medical Officer;
7) The Chief Nursing Officer;
8) The Ambulatory Care Medical Director;
9) The Chief Operating Officer;
10) The Chief Quality officer;
12) The past Medical Staff President;
13) The Chair of the Patient Care Policy and Evaluation Committee; and
14) Two (2) Medical Staff Physician representatives, appointed by the Medical Staff President, subject to MEC approval;
15) Patient Safety Officer;
16) Director of Safety and Performance Improvement;
17) Medical Director of Quality and Safety;
18) Hospital Medical Director;
19) Specialty Medical Director;
20) Hospital Regulatory Compliance Officer;
21) Quality Manager Program Coordinator;
22) One (1) Medical Staff Member representative from the Behavioral Health Division, appointed by the Medical Staff President, subject to MEC approval.

9.3.15 Peer Review Oversight Committee

*A.* Purpose and Meetings

The Peer Review Oversight Committee will oversee the peer review that is carried out by the departments. It will supervise the processes, help address systems issues and review cases that involve more than one department.

*B.* Composition

1) The Medical Staff President shall serve as Chair of the Committee;
2) Each department will have at least one (1) representative. Large departments will have two (2) representatives one from inpatient and the other from outpatient. Large departments are: Family and Adult Medicine, Internal and Specialty Medicine, Surgery, and Psychiatry/Psychology.

9.3.16 Perinatal Morbidity and Mortality (PM&M) Committee.

*A.* Function

The Perinatal Morbidity and Mortality Committee (PM&M Committee) is an inter-disciplinary committee which monitors perinatal outcomes. It is intended to complement the quality assurance activities of the Departments of Pediatrics and Obstetrics and Gynecology by focusing on those cases whose management involves both obstetrical and pediatric issues. The PM&M Committee reports to the Departments of OB/GYN and Pediatrics.

*B.* Composition.

The Perinatal Morbidity and Mortality Committee consist of:

1) All Members in good standing of the Departments of OB/GYN, Pediatrics and Anesthesia. The individual departments established attendance obligations;
2) Nurse Program manager for the Perinatal Unit, Clinical Nurse Specialists for maternity and nursery and the RN Case Coordinator are members, all with voting privileges; and
3) Regularly invited members, all without vote, including:
   (a) Consultant Perinatologist;
   (b) Consultant Neonatologist;
   (c) Any Member of the Department of Ambulatory Medicine having obstetrical privilege;
   (d) Any Member of the Resident Staff presently assigned to the Pediatrics or OB/GYN services or with a particular interest in a case being discussed; and
   (e) Any member of the nursing staff with a particular interest in a case being discussed. The Nurse Program Manager or his/her designee will maintain a file of confidentiality agreements signed by a non-physician attendees.

9.3.17 Professional Affairs Committee

*A.* Purpose of Meetings

The Professional Affairs Committee consists of the two members of the Governing Body who sit on the Joint Conference Committee. The members of the Professional Affairs Committee shall invite representatives from the Medical Staff and Administration, as appropriate, to its meetings.

*B.* Composition

The Professional Affairs Committee consists of the two (2) members of the Governing Body who sit on the Joint Conference Committee. The members of the Professional Affairs Committee shall invite representative from the Medical Staff and Administration, as appropriate to its meetings.

9.3.18 Utilization Management Committee

*A.* Purpose and Meetings

The Utilization Management Committee develops and oversees implementation and operation of the utilization management plan relating to inpatient, ambulatory and clinical support services, makes utilization decisions as required under the plan, analyzes utilization profiles and evaluates the effectiveness of the UR program. Physician members of the committee act as the physician advisors required by the UR plan. The URC meets at least quarterly and reports to the Performance Improvement Committee.

*B.* Composition

The Utilization Management Committee includes:

1) A Chairperson appointed by the Chairperson of the PSPIC, subject to MEC approval;
2) At least 6-8 additional Medical Staff members, selected to provide broad representation from the Medical Staff;
3) At least one (1) representative from Administration, without vote;
4) Director of Social Services, without vote;
5) Representative from Nursing, without vote;
6) Representative from Finance, without vote;
7) Representative from Quality Assurance Department, without vote; and
8) Director of Health Information Management, without vote.

# ARTICLE 10

## MEETINGS

### 10.1 Medical Staff Meetings

10.1.1 Regular Meetings

General Staff meetings will be held quarterly. The Medical Executive Committee may authorize additional regular general Staff meetings by resolution. The resolution authorizing any such additional meeting shall require notice specifying the place, date, and time for the meeting, and that the meeting can transact any business as may come before it.

10.1.2 Special Meetings

A special meeting of the Medical Staff may be held by the Medical Executive Staff President. A special meeting must be held by the President at the written request of the Governing Body, the Chief Medical Officer, the Administrator, the Medical Executive Committee, or 25% of the active staff in good standing.

### 10.2 Clinical Department and Committee Meetings

10.2.1 Regular Meetings

Clinical Departments, Division, and Committees may establish by resolution the time for regular meetings. No additional notice is required.

10.2.2 Special Meetings

A special meeting of any Department, Division, or Committee may be held by the Head or Chairperson thereof. A special meeting must be held by the Head or Chairperson at the written request of the Administrator, the Medical Executive Committee, the Medical Staff President, the Chief Medical Officer, or 25% of the group's current members in good standing.

10.2.3 Executive (Closed) Session

Any Committee, Department or Division may call itself into executive session at any time during a regular or special meeting. All ex-officio members shall leave during the executive session unless requested to remain by the Chairperson. Accurate and complete minutes must be made and kept of any executive session.

### 10.3 Quorum

10.3.1 Medical Staff Meetings

The presence of one-third (1/3) of the active Medical Staff at a General or Special Medical Staff meeting shall constitute a quorum for all appropriate actions except the removal of a

Medical Staff Officer. For a meeting considering the removal of a Medical Staff Officer, the quorum shall be one-half (1/2) of the active Medical Staff. Ex-officio members do not count for quorum purposes.

10.3.2 Department and Committee Meetings

For committees, a quorum shall consist of 25% of the members of a committee by no fewer than two (2) members. For Department and division meetings, a quorum shall consist of 25% of the members. Ex-officio members do not count for quorum purposes.

### 10.4 Manner of Action

Except as otherwise specified, the action of a majority of the members present and voting at a meeting at which a quorum is present shall be the action of the group. A meeting at which a quorum is initially present may continue to transact business notwithstanding the withdrawal of members, if any action taken is approved by a least a majority of the required quorum for such meeting, or such greater number as may be specifically required by these Bylaws.

### 10.5 Notice of Meetings

Written notice of any regular general medical Staff meeting, or any regular committee or Department meeting, not held pursuant to resolution, will be delivered personally or via mail to each person entitled to attend at not less the five (5) days or more than fifteen (15) days before the date of such meeting. Notice of any special meeting of the Medical Staff, a Department, or a committee will be given orally or in writing at least seventy-two (72) hours prior to the meeting. Personal attendance at a meeting constitutes a waiver of notice of such meeting, except when a person attends a meeting for the express purpose of objecting, at the beginning of the meeting, to the transaction of any business because of lack of notice. No business shall be transacted at any special meeting except that listed in the meeting notice.

### 10.6 Minutes

Except as otherwise specified herein, minutes of all meetings will be prepared and retained. They shall include, at a minimum, the date and time of the meeting, a record of the attendance or members and the vote taken on all matters. A copy of the minutes shall be signed by the presiding officer of the meeting and forwarded to the medical Executive Committee.

### 10.7 Agenda

The Medical Staff president and Medical Executive Committee shall determine the order of business at a meeting of the Medical Staff. The agenda shall include, insofar as feasible:

1) Reading and acceptance of the minutes of the last regular meeting and of all special meetings held since the last regular meeting;
2) Administrative reports from the Medical Staff president, Departments, Committees, and the Administrator;
3) Election of officers when required by these Bylaws;

4) Reports by responsible Officers, Committees and Department on the overall results of patient care audits and other quality review, evaluation, and monitoring activities of the Staff and on the fulfillment of other required Staff functions;
5) Old business; and
6) New business.

### 10.8 Attendance Requirements

10.8.1 Medical Staff Meetings

The Medical Executive Committee may adopt attendance requirements for the Medical Staff and Department meetings.

10.8.2 Special Attendance

At the discretion of the Chairpersons or presiding Officer, when a Member's practice or conduct is scheduled for discussion at a regular Department, Division or Committee meeting, the Member may be requested to attend. If a suspected deviation from standard clinical practice is involved, the notice shall be given at least seven (7) days prior to the meeting and shall include time and place of the meeting and a general indication of the issue involved. Failure of a Member to appear at any meeting, with respect to which he/she was given such notice, unless excused by the Medical Executive Committee upon a showing of good cause, is grounds for corrective action.

### 10.9 Conduct of Meetings

Unless otherwise specified, meetings shall be conducted according to Robert's Rules of Order; however, technical or non-substantive departures from such rules shall not invalidate action taken at such a meeting.

## ARTICLE 11

## CORRECTIVE ACTION

### 11.1 Corrective Action

11.1.1 Initiation

Any person may provide information to the Medical Executive Committee about the conduct, performance, or competence of its Members. When reliable information indicate a Member may have exhibited acts, demeanor, or conduct reasonably likely to be (a) detrimental to patient safety, (b) unethical or illegal, (c) contrary to the Medical Staff Bylaws and/or rules and regulations, or (d) below applicable professional standards, a request for an investigative and/or corrective action against such Member may be initiated. The President of the Medical Staff, a Department Chair, the Chair of any standing Committee, or the Governing Body may initiate such a request. All requests for corrective action and/or formal investigation shall be in writing, shall be made to the

Medical Executive Committee, and shall be supported by reference to the specific activities or conduct which constitutes the grounds for the request. If the Medical Executive Committee initiates the request, it shall make an appropriate written record of the reasons for the request.

11.1.2 Formal Investigation

If the Medical Executive Committee concludes a formal investigation is warranted, it may conduct the investigation itself, or assign the task to an appropriate medical Staff Officer, Department, or standing or ad-hoc committee of the Medical Staff. If the investigation is delegated, the designee shall proceed with the investigation in a prompt manner and shall provide a written report of the investigation to the Medical Executive Committee as soon as practical. The report may include recommendation for appropriate corrective action. The Member shall be given an opportunity to provide information in a manner and upon such terms as the investigating body deems appropriate. The individual or body investigating the matter may, but is not obligated to, conduct interviews with persons involved; however, such investigation shall not constitute a hearing, nor shall the procedural rules with respect to hearings or appeals apply. Despite the status of any investigation, at all times the Medical Executive Committee shall retain authority and discretion to take whatever action may be warranted by the circumstances, including the imposition of summary suspension, termination of the investigative process, or other action. Any reports that are made to the Medical Executive Committee must be shared promptly with the Member under investigation.

The MEC may also require a medical or psychological exam. The examining physician shall be chosen in the manner described in Section 5.2, however, the Member is not required to pay for the exam.

11.1.3 Medical Executive Committee Action

As soon as practical after the conclusion of the formal investigation (or without a formal investigation if deemed unwarranted), the Medical Executive Committee shall take action that may include, without limitation:

*A.* Determining no corrective action is warranted and, if the Executive Committee determines there was no credible evidence for the complaint in the first instance, removing any adverse information from the Member's file;
*B.* Deferring action for a reasonable time where circumstances warrant;
*C.* Issuing letters of admonition, censure, reprimand, or warning. Nothing herein shall preclude Department Heads from issuing written or oral warnings or counseling. In the event the MEC issues such letters, the affected Member may make a written response which shall be placed in the Member's file;
*D.* Recommending the imposition of terms of probation or special limitation upon continued Medical Staff membership or exercise or clinical privileges including,

without limitation, requirements for co-admissions, mandatory consultation, or monitoring;

*E.* Recommending reduction, modification, suspension or revocation of clinical privileges;

*F.* Recommending reductions of membership status or limitation of any prerogatives directly related to the Member's delivery of patient care;

*G.* Recommending suspension, revocation or probation of Medical Staff membership;

*H.* Taking other actions that are appropriate under the circumstances.

11.1.4 Subsequent Action

*A.* If corrective action as set forth above is recommended by the Medical Executive Committee, the MEC shall notify the Administrator, the Governing Body, and the affected member of the Medical Staff of the recommended action.

*B.* The recommendations of the Medical Executive Committee shall be final, unless the affected member or the Governing Body requests a hearing to challenge the recommendations.

## 11.2 Summary Restriction of Suspension

11.2.1 Criteria for Initiation

Whenever a Member's conduct appears to require that immediate action be taken to protect the life or well-being of patient(s) or to reduce a substantial and imminent likelihood of significant impairment of the life, health, or safety of any patient, prospective patient, or other person, the Governing body, the Administrator, the Medical Staff President, the Medical Executive Committee, or the head of the Department in which the Member holds privileges may summarily restrict or suspend the Medical Staff membership or Clinical Privileges of such member. Unless otherwise stated, the summary restriction or suspension shall become effective immediately, and the person or body responsible shall promptly give written notice to the Member as described below, the Governing Body, the Medical Executive Committee, and the Administrator. The summary restriction or suspension may be limited in duration and shall remain in effect for the period stated or until resolved as set forth herein. Unless otherwise indicated by the terms of the summary restriction or suspension, the Member's patients shall be promptly assigned to another member(s) by the Department Chair or by the Medical Staff President, considering, where feasible, the wishes of the patient in the choice of a substitute Member.

11.2.2 Written Notice of Summary Suspension

Within one working day of imposition of a summary suspension, the affected Medical Staff Member shall be provided with written notice of such suspension. This initial written notice shall include a statement of facts demonstrating that the suspension was necessary because failure to suspend or restrict the practitioner's privileges summarily could

reasonably result in an imminent danger to the health of an individual. The statements of facts provided in this initial notice shall also include a summary of one or more particular incidents giving rise to the assessment of imminent danger. This initial notice shall not substitute for, but is in addition to, the notice required by theses Bylaws for further action of the MEC regarding issues related to such a summary suspension.

11.2.3 Medical Executive Committee Action

As soon as practicable after a summary restriction or suspension has been imposed, but no more than ten (10) calendar days thereafter, a meeting of the Medical Executive Committee shall be convened to review and consider the summary suspension or restriction. The Member may attend the meeting and make a statement concerning the issues under investigation on such terms and conditions as the Medical Executive Committee may impose. In no event shall any meeting of the Medical Executive Committee, with or without the Member in attendance, constitute a hearing, nor shall any procedural rules apply. A Member's failure, without good cause, to attend a meeting of the Medical Executive Committee after a written request to attend was mailed to the Member by the Medical Executive Committee, shall constitute a waiver of the Member's right to appear and be heard. The request of the Medical Executive Committee for the Member to attend the meeting shall be made in writing, mailed to Member's last known address by first class mail of the United States Postal Service at least five (5) calendar days before the meeting, and shall inform the Member that his or her failure to attend said meeting shall constitute a waiver of his or her rights to appear and be heard. The Medical Executive Committee may postpone or reschedule the meeting on the written request of the Member. The Medical Executive Committee may modify, continue, vacate, or terminate the summary restriction or suspension. The Medical Executive Committee shall mail the Member written notice of its decision that shall be effective upon deposit in the United States Mail.

11.2.4 Procedural Rights

Unless the Medical Executive Committee terminated or vacates the summary restriction or suspension, the Member is entitled to the procedural rights afforded by these Bylaws.

## 11.3 Grounds for Automatic Suspensions and/or Restrictions

In certain instances, the Member's Privileges or membership may be suspended or limited as a result of certain occurrences that disqualify the member from membership or the exercise of certain Privileges. These grounds for automatic suspension do not require any action of the MEC or the Governing Body prior to the suspension and/or restriction. If a Member requests a hearing to challenge these automatic suspensions and/or restrictions, the scope of such a hearing is limited. The only question before the Judicial Review Committee in these situations is whether the grounds for automatic suspension have occurred.

11.3.2 Licensure

*A.* Revocation and Suspension

Whenever a Member's license or other legal credential authorizing practice in the state is revoked or suspended by the applicable licensing or certifying authority, Medical Staff membership and Clinical Privileges shall be automatically revoked as of the date such action becomes effective.

*B.* Restriction

Whenever a Member's license or other legal credential authorizing practice in this state is limited or restricted by the applicable licensing or certifying authority, any Clinical Privileges which the Member has been granted at the Hospital which are within the scope of said limitation or restriction are automatically limited or restricted in a similar manner, as of the date such action becomes effective and throughout its term.

*C.* Probation

Whenever a Member is placed on probation by the applicable licensing or certifying authority, his or her membership status and Clinical Privileges are automatically subject to the same terms and conditions of the probation as of the date such action becomes effective and throughout its term.

*D.* Suspension of Membership when a License is Not Renewed

Expiration:

Whenever a Member's license or other credential authorizing practice in the state expires, Medical Staff Membership and Clinical Privileges shall automatically suspended. If the member renews his or her license and is effective retroactive, the suspension will be vacated. If it is not renewed within six (6) months, Medical Staff Membership and Privileges shall be automatically revoked.

11.3.3 Controlled Substances

Whenever a Member's DEA certificate is revoked, limited or suspended, the Member automatically and correspondingly be divested of the right to prescribe medications covered by the certificate, as of the date such action becomes effective and throughout its term.

*A.* Probation

Whenever a Member's DEA certificate is subject to probation, the Member's right to prescribe such medications shall automatically become subject to the same terms of the probation, as of the date such action becomes effective and throughout its term.

11.3.4 Failure to Satisfy Appearance Requirement

Failure of a Member, without good cause, to appear at a Special Appearance is cause for automatic suspension of membership and restriction of Privileges.

11.3.5 Medical Records

Members of the Medical Staff are required to complete medical records within such reasonable time as may be prescribed by the Medical Executive Committee. Failure to comply with the Medical Executive Committee policies regarding completion of medical records is criteria for suspension or other corrective action. If a Member is automatically suspended for incomplete records, his/her membership is automatically reinstated once the medical records are completed. A prolonged period of automatic suspension or a repeated pattern of automatic suspensions for incomplete medical records may be grounds for further corrective action by the Medical Staff and may result in adverse reports to governmental and licensing authorities.

11.3.6 Professional Liability Insurance

Failure to maintain professional liability insurance shall result in the immediate suspension of the Member's Clinical Privileges. Written notice of the suspension shall be mailed to the member at his or her last known address. Said notice shall also state that the member has ninety (90) days to provide proof of professional liability insurance, that the suspension will continue until proof of insurance is provided, and that failure to provide proof of insurance within ninety (90) days shall result in termination of Medical Staff membership. If proof of professional liability insurance is not provided to the Medical Executive Committee within ninety (90) days, the Medical Executive Committee shall mail written notice of termination of Medical Staff membership to the Member at his or her last known address, including the information that he or she is entitled to the procedural rights set forth in these Bylaws.

# ARTICLE 12

## HEARING AND APPELLATE REVIEWS

### 12.1 Grounds for Hearing

Except as otherwise specified in these Bylaws, any one or more of the following actions or recommended actions shall be deemed actual or potential adverse action and constitute grounds for a hearing:

12.1.1 Denial of Medical Staff Membership;

12.1.2 Denial of requested advancement in Staff Membership category;

12.1.3 Denial of Medical Staff reappointment;

12.1.4 Demotion to lower Medical Staff category;

12.1.5 Suspension of Staff Membership;

12.1.6 Revocation of Medical Staff Membership;

12.1.7 Denial of any requested Clinical Privilege(s) except temporary Privileges;

12.1.8 Involuntary reduction of current Clinical Privileges, including temporary Privileges;

12.1.9 Suspension of any Clinical Privileges, including temporary Privileges;

12.1.10 Termination of any or all Clinical Privileges, including temporary Privileges;

12.1.11 Involuntary imposition of significant consultation or monitoring requirements, excluding monitoring incidental to provisional status;

12.1.12 Any other restriction(s) on Medical Staff membership or Clinical Privileges which is reportable pursuant to Section 805 of the Business and Professions Code.

### 12.2 Exhaustion of Remedies

If adverse action described above is taken or recommended, the applicant of Member must exhaust the remedies afforded by these Bylaws before resorting to legal action.

### 12.3 Requests for Hearing

12.3.1 Notice of Action or Proposed Action.

In the event of a proposed or actual action against a Member of the Medical Staff or an applicant, the Medical Staff President shall give the Member or applicant:

12.3.2 Prompt notice of the recommendation or action, including a brief description of the reasons for the recommendation or action;

12.3.3 Notice of the right to request a hearing;

12.3.4 Notice that failure to request a hearing within the prescribed time period and in the proper manner constitutes a waiver of rights to a hearing and to an appellate review on the matter that is the subject of the notice;

12.3.5 Notice regarding whether the proposed action, if adopted, is reportable pursuant to Business & Professions Code Section 805 and following;

12.3.6 A summary of the rights the Member or applicant will have at the hearing.

12.3.7 Requesting a Hearing

The affected Member or applicant must request a hearing within thirty (30) calendar days after the date of the notice of action or proposed action. The request for hearing shall be in writing and address to the Medical Staff President. Failure to make a timely request and in the manner described may result in the denial of a hearing at the discretion of the Medical Executive Committee.

12.3.8 Time and Place for Hearing

Upon receipt of a request for hearing, the Medical Staff President shall schedule a hearing and provide notice to the Member or applicant of the time, place and date of the hearing. The hearing shall commence not less than thirty (30) days or more than ninety (90) days from the date of the Notice of Hearing. When the Member is under summary suspension, the hearing shall commence not more that forty-five (45) days from the date of the Notice of the Hearing is mailed or otherwise delivered to the Member under summary suspension. The Member may waive these time limits if he/she wishes.

12.3.9 Notice of Charges

In the Notice of Hearing, the Medical Staff President shall state the reason(s) for the adverse action taken or recommended, including the acts or omissions with which the Member or applicant is charged and a list of the charges in question, where applicable. In addition, the Medical Staff President shall furnish a list of witnesses the Medical Executive Committee expects will testify on its behalf at the hearing. This list may be amended at a later time should new names emerge.

12.3.10 Judicial Review Committee

When a hearing is requested, the Medical Executive Committee shall appoint a Judicial Review Committee which shall be composed of not less than five (5) Members of the Medical Staff who have not actively participated in the consideration of the matter leading up to the recommendation or action and who are not in direct economic competition with the member charged. The Medical Executive Committee shall designate

one of the five as Chair. Knowledge of the matter involved shall not preclude a Member of the Medical Staff from serving as a member of the Judicial Review Committee. In the event that it is not feasible to appoint a Judicial Review Committee from the Medical Staff, the Medical Executive Committee may appoint practitioners who are not Members of the Medical Stall. The Judicial Review Committee shall include at least one member with the same healing arts licensures as the affected Member. All other members shall have M.D. or D.O. degrees.

12.3.11 Failure to Appear or Proceed

Failure, without good cause, of the Member or applicant to personally attend and proceed at such a hearing shall constitute voluntary acceptance of the recommendations or action at issue.

12.3.12 Postponements and Extensions

Once a hearing is requested, postponements and extension of time beyond the times permitted in these Bylaws may be permitted by the Medical Staff President, the Judicial Review Committee, or its Chairperson on a showing of good cause.

## 12.4 Hearing Procedure

12.4.1 Pre-hearing Procedure

*A.* The Medical Executive Committee or its designee may request, in writing, a list of names and addresses of all persons the Member or applicant anticipates calling to testify at the hearing on the Member's or applicant's behalf. The Member or applicant shall furnish the witness list within seven (7) days of the date of the request. Upon written request, the Medical Executive Committee or its designee shall provide the Member or applicant with copies of all documents upon which the adverse action is based. Upon written request, the Member or applicant shall provide the Medical Executive Committee or its designee with copies of all documents the Member applicant expects to present at his/her hearing.

*B.* It is the duty of the Member or applicant and the Medical Executive Committee or its designee to exercise reasonable diligence in notifying the Chairperson of the Judicial Review Committee of any pending or anticipated procedural disputes as far in advance of the scheduled hearing as possible, in order that decision concerning such matters may be made in advance of the hearing. Objections to any pre-hearing decision may be again made at the hearing.

12.4.2 Representation

The hearings provided for in these Bylaws are for the purpose of intra-professional resolution of matters bearing on professional conduct, professional competency, and/or character. The Member or applicant shall be entitled to representation by legal counsel in

any phase of the hearing and shall receive notice of the right to obtain representation by an attorney at law. In the absence of legal counsel, the Member or applicant shall be entitled to be accompanied by and represented at the hearing by a practitioner licensed to practice in the State of California who is not also an attorney at law. If the Member or applicant is not represented by an attorney, the Medical Executive Committee shall appoint a representative who is not an attorney to represent its position, present the supporting witnesses and material, examine witnesses, and respond to appropriate questions. The Medical Executive Committee shall only be represented by an attorney at law if the Member or applicant is also represented by an attorney.

12.4.3 The Hearing Officer

The Medical Executive Committee shall appoint a Hearing Officer (who may also be the Chair of the Judicial Review Committee) to preside at the hearing. The Hearing Officer will not act as a prosecuting officer or as an advocate. The Hearing Officer shall endeavor to ensure that all participants in the hearing have a reasonable opportunity to be heard and to present relevant oral and documentary evidence in an efficient and expeditious manner, and that proper decorum is maintained. The Hearing Officer shall determine the order of or procedure for presenting evidence and argument during the hearing and shall have the authority and discretion to make all rulings on questions that pertain to matters of law, procedure and/or the admissibility of evidence. If the Hearing Officer determines that any participant is not proceeding in an efficient and expeditious manner, the Hearing Officer may take actions as seems warranted by the circumstances.

12.4.4 Hearing Record

A record of the hearing shall be made that is of sufficient accuracy to permit review by any appellate group that may later be called upon to review the matter. The Judicial Review Committee may determine to make the record by use of (a) a court reporter or (b) by a tape recording and minutes of the proceedings. The Member or applicant may request, in writing, a copy of the hearing record. The copy will be provided to the Member or applicant upon payment of the cost of preparing and copying the record.

12.4.5 Rights of the Parties

Both parties at the hearing may call and examine witnesses for relevant testimony, introduce relevant documents, cross-examine and/or impeach witnesses who have testified on any matter relevant to the issues, and otherwise rebut evidence, as long as theses rights are exercised in an efficient and expeditious manner. The Member or applicant may be called by the Medical Executive Committee or its designee and examined as if under cross-examination. The Member or applicant may, at the beginning of the hearing, challenge the membership of the Judicial Review Committee because of alleged conflict of interest on the part of any committee member. Should such a challenge occur, the Medical Staff President may choose to remove and replace the challenged member

(requiring a postponement if necessary) or proceed without removal. If the Medical Staff President chooses to proceed without removal, any challenge by the Member or applicant shall be made succinctly in writing and shall be make part of the hearing record.

12.4.6 Miscellaneous Rules

Judicial rules of evidence and procedure relating to the conduct of the hearing, examination of witnesses, and presentation of evidence, do not apply to a hearing conducted under this Article. Any relevant evidence, including Quality Assurance profiles, credentials files, and hearsay shall be admitted if it is the sort of evidence on which responsible persons are accustomed to rely in the conduct of serious affairs, regardless of the admissibility of such evidence in a court of law. However, no finding of fact may be based solely on hearsay. The Judicial Review Committee may interrogate the witnesses and/or call additional witnesses if it deems such action appropriate. At its discretion, the Judicial Review Committee may request or permit both sides to file written arguments. A Medical Staff Member does not have the right to view or use peer review information of other practitioners as part of the fair hearing process.

12.4.7 Burden of Proof

When a hearing related to denial of initial appointment, denial of requested Department or division membership, denial or restriction of Clinical Privileges, mandatory consultation or supervision requirements as it pertains to an initial application for membership or Privileges, or denial of a request to advance from courtesy to active Staff, or termination due to inactivity, the practitioner has the burden of proving that the adverse action or recommendation lacks a substantial factual basis or that the action is arbitrary, unreasonable, or capricious. Otherwise, the Medical Executive Committee has the burden of proving that the adverse action is warranted and has a substantial factual basis.

12.4.8 Adjournment and Conclusion

After the presentation of the oral and written evidence, oral closing arguments, or written closing arguments, if requested by the Judicial Review Committee, the hearing shall be closed.

12.4.9 Basis for Decision

The decision of the Judicial Review Committee shall be based on the evidence introduced at the hearing, including all logical and reasonable inferences from the evidence and the testimony, and shall be within the constraints of these Bylaws. The decision of the Judicial Review Committee shall be final, subject to the Appeal provision of these Bylaws.

12.4.10 Presence of Judicial Review Committee members and Vote

A majority of the Judicial Review Committee must be present throughout the hearing and deliberations. If the committee member is absent from any part of the proceedings, he/she may not participate in the deliberations or the decision.

12.4.11 Decision of the Judicial Review Committee

*A.* The Judicial Review Committee shall make findings of fact.

*B.* The Judicial Review Committee may make one of the following decisions based upon the findings of fact:

1) The action of the Medical Executive Committee is sustained;
2) The action of the Medical Executive Committee is overturned; or
3) The action of the Medical Executive Committee is modified. (The modification may be less or more adverse to the Member or applicant than the action of the Medical Executive Committee.)

*C.* The Judicial Review Committee shall make its decision by simple majority vote. The numerated results of the vote are not reported in the final report of the Judicial Review Committee.

*D.* Within thirty (30) workdays after adjournment of the hearing, the Judicial Review Committee shall render a decision, which shall be in writing. If the Member is currently under suspension, however, the time for the decision and report shall be fifteen (15) workdays. The original report and decision shall be forwarded to the Medical Staff President, the Professional Affairs Committee and the Member or applicant at his or her last known address. The report shall contain the findings of fact, a statement of the reasons in support of the decision, and the decision. The decision of the Judicial Review Committee shall be final, subject to such rights or appeal as set forth in these Bylaws.

## 12.5 Appeals

12.5.1 Time for Appeal

Within ten (10) calendar days of the date that the report/decision of the Judicial Review Committee is mailed to the Member of applicant, either the Member or applicant or the Medical Executive Committee may request an appellate review of the decision. The written request for such review shall be delivered to the Medical Staff President and mailed or delivered to the other party to the hearing. If a request for appellate review is not made within the specified time period, the decision of the Judicial Review Committee shall be final.

12.5.2 Grounds for Appeal

A written request for an appeal shall include an identification of the grounds for appeal and a clear and concise statement of the fact in support of the appeal. The grounds for

appeal from the hearing shall be: (a) substantial non-compliance with the procedures required by these Bylaws or applicable law which has created demonstrable prejudice; (b) the decision was not supported by substantial evidence based upon the hearing record or such additional information as may be permitted.

12.5.3 Time, Place and Notice

If an appellate review is to be conducted, the appeal board shall, within thirty (30) days after receipt of notice of appeal, schedule a review date and cause each side to be given notice of the time, place and date of the appellate review. The date of appellate review shall not be less than thirty (30) nor more than sixty (60) days from the date of such notice, provided, however, that when a request for appellate review concerns a Member who is under suspension which is then in effect, the appellate review shall be held as soon as the arrangements may reasonably be made, not to exceed fifteen (15) days from the date of the notice. The time for appellate review may be extended by the appeal board for good cause.

12.5.4 Appeal Board

The Governing Body, or an authorized committee of the Governing Body, shall sit as the Appeal Board. Knowledge of the matter involved shall not preclude any person from serving as a member of the Appeal Board, so long as that person did not take part in a prior hearing on the same matter. The Appeal Board may select an attorney to assist it in the proceeding, but that attorney shall not be entitled to vote with respect to the appeal.

12.5.5 Appeal Procedure

The proceeding by the Appeal Board shall be in the nature of an appellate hearing based upon the record of the hearing before the Judicial Review Committee, provided that the Appeal Board may accept additional oral or written evidence, subject to a foundational showing that such evidence could not have been made available to the Judicial Review Committee in the exercise of reasonable diligence and subject to the same rights of cross-examination or confrontation provided at the Judicial Review Hearing; or the Appeal Board may remand the matter to the judicial Review Committee for the taking of further evidence and for decision. Each party shall have the right to be represented by legal counsel in connection with the appeal, to present a written statement in support of his or her position on appeal and, in its sole discretion, the Appeal Board shall present its written recommendations as to whether the Governing Body should affirm, modify, or reverse the Judicial Review Committee decision, or remand the matter to the Judicial Review Committee for further review and decision.

12.5.6 Decision

*A.* Except as otherwise provided herein, within thirty (30) days after the conclusion of the appellate review proceeding, the Governing Body shall render a decision in writing and shall forward copies thereof to each side involved in the hearing.

*B.* The Governing Body may affirm, modify, or reverse the decision of the Judicial Review Committee or remand the matter to the Judicial Review Committee for reconsideration. If the matter is remanded to the Judicial Review Committee for further review and recommendation, said committee shall promptly conduct its review and make its recommendations to the Governing Body. This further review and the time required to report back shall not exceed thirty (30) days in duration except as the parties may otherwise agree or for good cause as jointly determined by the Chairpersons of the Governing Body and the Judicial Review Committee.

*C.* In the event the decision of the Governing Body is unfavorable to the applicant or Member, that action shall become final. In the event the decision is favorable, that action also shall become final unless the Medical Executive Committee elects within fifteen (15) days to submit the matter to an ad-hoc committee. This ad-hoc committee shall be composed of two (2) members of the Governing Body (appointed by the Chair of the Governing Body) and two (2) Members of the Medical Staff (as appointed by the Medical Staff President) and shall have access to the records from the hearing and appeal. The decision of this committee shall be in writing within thirty (30) days of receipt of the matter unless extended for good cause. The decision of this committee shall specify the reasons for the action taken and shall be forwarded to the Governing Body who shall reconsider its action, and then render a final decision.

12.5.7 Right to One Hearing

No Member or applicant shall be entitled to more than one evidentiary hearing and one appellate review on any matter that has been the subject of adverse action or recommendation.

## 12.6 Exceptions to Hearing Rights

12.6.1 Automatic Suspension or Limitations of Practice Privileges.

In the circumstances set forth in these Bylaws causing Automatic Suspension, the issues which may be considered at a hearing, if requested, shall not include evidence designed to show that the determination by the licensing or credentialing authority was unwarranted, but only (1) whether the revocation, suspension, restriction, or probation occurred, (2) the terms of any restrictions, or probation, and (3) whether the Member may continue to practice in the Hospital with the Limitations imposed by the licensing or credentialing authority.

12.6.2 Expunction of Disciplinary Action.

Upon petition, the Medical Executive Committee, in its sole discretion, may expunge previous disciplinary action upon a showing of good cause or rehabilitation.

# ARTICLE 13

## CONFIDENTIALITY

### 13.1 General

Discussion, deliberation, records and proceedings of all meetings of all Medical Staff committees having the responsibility of evaluation and improvement of quality care rendered in this Hospital, including, but not limited to meetings of the Medical Staff meeting as a committee of the whole, meeting of Departments and Division, meeting of Committees, and meetings of special and ad-hoc committees and including information regarding any Member or applicant to the Medical Staff, shall be confidential to the fullest extent permitted by law.

"Records" includes, but is not limited to, the credentials and quality assurance profiles of individual practitioners and the records of all Medical Staff credentialing, peer review, and quality review activities.

Records will be disclosed only in the furtherance of credentialing, peer review, and quality review activities, and only as specifically permitted under the condition described in this Article, or otherwise required by law.

Records that are disclosed to the Governing Body of the Hospital or its authorized representatives, in order for the Governing Body to discharge its lawful obligations and responsibilities, shall be maintained as confidential.

### 13.2 Breach of Confidentiality

Inasmuch as effective peer review and consideration of the qualifications of Medical Staff Members and applicants to perform specific procedures must be based on free and candid discussions, any breach of confidentiality provision of these Bylaws, except in conjunction with other Hospital, professional society, or licensing authority duties, is unauthorized conduct for any Medical Staff member and is grounds for corrective action.

### 13.3 Protection

All Medical Staff records shall be maintained in the Medical Staff Office and in the Quality Assurance Department. Such records shall be maintained in locking cabinets under the custody of the Chairpersons of the Credentials Committee and the Patient Safety and Performance Improvement Committee or their designees. The profile cabinets will be locked except during such times as these Chairpersons or their designees are able to monitor access to the records.

## 13.4 Access by persons or Agencies Outside the Jurisdiction of the Hospital

13.4.1 Credentialing or Peer Review at Other Hospitals

The Medical Staff president, the Credentials Committee Chairperson or the designee of either, may release information contained in a credentials profile in response to a request from another hospital or its Medical Staff. That request must include information that the practitioner is a member of the requesting hospital's Medical Staff, exercise privileges at the requesting hospital, or is an applicant for Medical Staff membership or privileges at that hospital, and must include a release for such records signed by the concerned practitioner.

13.4.2 Requests by Hospital Surveyor/Investigators

Hospital surveyor/investigators are entitled to inspect records (excluding quality assurance profiles, which shall not be made available to any persons or agencies outside the jurisdiction of the Hospital) covered by this Article on the hospital premises in the presence of the Medical Staff President (or designee), provided that:

*A.* No originals or copies may be removed from the premises;

*B.* Access is only with concurrence of the Administrator (or designee) and the Medical Staff President (or designee); and

*C.* The surveyor demonstrates the following to Hospital and Medical Staff representatives;

1) That the surveyor has specific statutory or regulatory authority to review the requested materials;
2) That the materials sought are directly relevant to the matter being investigated;
3) That the materials sought are the most direct and least intrusive means to carry out the pending investigation or survey, bearing in mind that credentials profiles regarding individual practitioners are confidential materials;
4) That sufficient specificity is provided to allow for the production of individual documents without undue burden to the Hospital or Medical Staff; and
5) That in the case of a request for documents with physician identifiers, the need for such identifiers is documented.
6) Additionally, at the discretion of the Medical Staff President and the Administrator, the surveyor may be asked to sign a statement acknowledging notification of the provisions of confidentiality. If he/she declines to sign, it will be noted at the bottom of the prepared statement that the surveyor, identified by name, has declined to sign but has been provided a copy of confidentiality provisions.

13.4.3 Subpoenas

All subpoenas of Medical Staff records shall be referred to the Administrator, who shall have the option of consulting legal counsel for the purpose of formulation a response.

The Administrator shall notify the Medical Staff President when a subpoena for Medical Staff records is received.

13.4.4 Requests from Licensing Boards

Current law allows the California Medical Board, the Board of Osteopathic Examiners, and the Board of Dental Examiners to review certain materials pertaining to Medical Staff hearings concerning corrective action recommendations or decisions. Given the current requirements of law, copies of the following records of a Medical Staff disciplinary hearing shall be made available to the appropriate licensing board upon the specific request of such board:

*A.* The Notice of Charges presented to the practitioner before the beginning of a Medical Staff hearing;
*B.* Any document, medical record, or other exhibit received in evidence at the hearing; and/or,
*C.* Any written opinion, finding, or conclusions of the Medical Staff hearing committee that were made available to the concerned practitioner.

In the event that the concerned practitioner did not request a hearing as per these Bylaws, the Notice of Action or Proposed Action shall be made available

The Medical Staff President, or designee, must review and approve the disclosure before it is made. Any request for documents other than those cited above shall be disclosed only in accordance with this Article.

13.4.5 Other Requests

All other requests for information contained in the Medical Staff records shall be forwarded to the Medical Staff President and the Administrator for an appropriate response.

## 13.5 Access by Persons within the Jurisdiction of the Hospital

13.5.1 Quality Assurance Profiles

*A.* Any practitioner may review his/her Quality Assurance profiles and/or work folder without cause and without approval by giving timely notice in writing to the designee of the Medical Executive Committee. An observer shall be present when the practitioner is reviewing his/her profile. When a Member has reviewed his/her profile as provided under this section, he/she may request a correction or deletion of information in his/her Quality Assurance profile by written request to the Medical Executive Committee. Such a request shall include a statement of the basis for the action requested. The request will be considered and acted upon in accordance with the Bylaws.

*B.* Except as noted above, no Member of the Medical Staff, other than those specified in the Bylaws, may be provided with access to a practitioner's Quality Assurance profile and/or work folder. No member of the Hospital Administration or the Governing Body may be provided with access to practitioner's Quality Assurance profile or work folder, except as required by the administrative hearing process in these Bylaws. The individual practitioner under review will be notified in writing whenever this request occurs.

*C.* Quality Assurance profiles may be submitted as evidence during a fair hearing conducted pursuant to these Bylaws.

13.5.2 Credential Files

A Medical Staff Member shall be granted access to his/her own credentials files, subject to the following provisions;

*A.* The request shall give timely notice to the Medical Staff President or his/her designee;

*B.* The Member may review, and receive a copy of, only those documents provided by or personally address to the Member. A summary of all other information, including peer review committee findings, letters of reference, monitoring reports, complaints, etc., shall be provided to the Member in a timely manner, in writing, by the Medical Staff President or designee. Such summary shall disclose the substance, but not the source, of the information summarized;

*C.* The review by the Member shall take place in the Medical Staff Office, during normal working hours, in the presence of the Medical Staff President or designee.

13.5.3 When a Member has reviewed his/her file, he/she may address to the Medical Staff President a written request for correction or deletion of information in his/her credentials files. Such request shall include a statement of the basis for the action requested. The Medical Staff President shall review such a request within a reasonable time and shall recommend to the Medical Executive Committee after such review whether to make the correction or deletion requested. The Medical Executive Committee, when so informed, shall either grant or deny the request by a majority vote. The Member shall be notified promptly, in writing, of the decision of the Medical Executive Committee. In any case, a Member shall have the right to add to his/her own credentials profile a statement responding to any information contained in the file.

13.5.4 The Medical Staff President, Department Chairpersons, committee chairpersons, the Chief Medical Officer, and the Administrator shall have access to credentials files to the extent necessary to perform their official duties. Medical Staff committee members shall have access only to the records of committees on which they serve.

13.5.5 No members of the Hospital Administrator or the Governing Body will be given access to a practitioner's credentials file; however, the Governing Body or its designee, consistent

with its ultimate responsibility to oversee quality or care, may wish to have an individual practitioner's credentials profile evaluated for specific reasons of concern. The individual practitioner under review must be immediately notified in writing whenever this request occurs.

# ARTICLE 14

## GENERAL PROVISIONS

### 14.1 Rules and Regulations

The Medical Staff must annually review the Rules. The procedure for adopting, amending, and repealing the Rules is set forth in Article 15 of the Bylaws. Once a rule or regulations is adopted or amended by the Governing Body, it is effective and governs applicants and Members of the Medical Staff. If there is a conflict between the Bylaws and the Rules, the Bylaws prevail. The process set forth in Article 15 of the Bylaws is the sole method for the initiation, adoption, amendment, and repeal of medical Staff Rules.

### 14.2 Dues or Assessments

The Medical Executive Committee shall annually recommend the amount of annual dues or assessments, if any, for each category of Medical Staff membership, subject to the approval of the Medical Staff, and to determine the manner of expenditure of such funds.

### 14.3 Construction of Terms and Headings

The captions or headings in these Bylaws are for convenience only and are not intended to limit of define the scope of or affect any of the substantive provisions of these Bylaws. These Bylaws apply with equal force to both genders wherever either term is used.

### 14.4 Authority to Act

Any Member or Members who act in the name of this Medical Staff without proper authority shall be subject to such disciplinary action, as the Medical Executive Committee may deem appropriate.

### 14.5 Division of Fees

Any division of fees by Members of the Medical Staff is forbidden and any such division of fees shall be cause for exclusion or expulsion from the Medical Staff.

### 14.6 Special Notices

Except as otherwise provided in these Bylaws, all notices, demands and requests required or permitted to be mailed shall be in writing addressed to the last known address provided by the Member, sealed, with postage fully paid, and deposited in the United States Postal Service. In the alternative, any notice, demand, or request that is required or permitted to be mailed may be hand-delivered. If the official records of the Medical Staff and the Hospital contain different addresses, the notice, request or demand shall be mailed to both addresses.

## 14.7 Requirements for Elections of Medical Staff President, Department Heads, Division heads and for Bylaws Amendments

14.7.1 Elections by Secret Ballot:

All elections shall be by secret ballot.

14.7.2 Eligibility to Vote:

Only active Members of the Medical Staff in Good Standing may vote in elections governed by these Bylaws. An active Member of the Medical Staff is one who has been approved for active status by the Governing Body at least seven (7) days before the day ballots are mailed.

14.7.3 Mailing Address:

It is the responsibility of each Member of the Medical Staff to provide the Medical Staff Office with his/her current mailing address. Ballots will be mailed to the last address provided by the Medical Staff Member.

14.7.4 Runoff Elections:

A candidate shall be elected by a majority of the votes cast. If no candidate receives a majority vote on the first ballot, a runoff election shall be conducted as soon as is practical between the two candidates who received the highest pluralities. If the runoff election results in a tie, the election shall be repeated. If there is still a tie, the Medical Staff president will cast the deciding vote. If the election is for the Medical Staff President, the Medical Executive Committee will decide.

14.7.5 Voting within Committees and Departments:

At the discretion of the Department Chair, ballots may be by voice, by hand, or by secret ballot. However, at the request of any voting Member within that committee or Department, that vote shall be by secret ballot. Voting Members are determined in accordance with these Bylaws.

## 14.8 Disclosure of Interest.

All nominees for election or appointment to Medical Staff offices, Department Chairs, or the Medical Executive Committee shall, at least twenty (20) days prior to the date of election or appointment, disclose in writing to the Medical Executive Committee those personal, professional, and financial affiliations and relationships of which they are reasonably aware that could foreseeably result in a conflict of interest with their activities or responsibilities on behalf of the Medical Staff.

## 14.9 Authorization, Immunity, and Releases.

14.9.1 Authorization and Conditions.

By applying for or exercising clinical privileges within this hospital, an applicant;

*A.* Authorizes representatives of the hospital and the Medical Staff to solicit, provide, and act upon information bearing upon, or reasonably believed to bear upon, the applicant's professional ability and qualifications;

*B.* Authorized persons and organizations to provide information concerning such practitioner to the Medical Staff;

*C.* Agrees to be bound by the provisions of this Article and to waive all legal claims against any representative of the Medical Staff or the hospital who acts in accordance with the provisions of these Bylaws; and

*D.* Acknowledges that the provisions of these Bylaws are express conditions to an application for Medical Staff membership, the continuation of such membership, and to the exercise of clinical privileges at this hospital.

14.9.2 Releases.

Each applicant or Member shall, upon request of the Medical Staff or hospital, execute general and specific releases as necessary to carry out the provision of these Bylaws.

## 14.10 Standards for History and Physical Examination.

14.10.1 The complete history and physical examination (H&P), as required for the patient's medical record, shall be completed within twenty-four (24) hours after admission of the patient, and, in case a patient is admitted for surgery, shall be completed prior to the time surgery is done. When the history and physical examination is dictated, a holding note must be recorded in the medical record at the time of examination. A history and physical may be performed up to thirty (30) days in advance provided a durable and legible copy is inserted into the inpatient medical record no later than twenty (24) hours after admission and is updated as appropriate.

14.10.2 Special Standards for Elective Surgery.

The following procedure is to be followed when scheduling a patient for either elective outpatient surgery or elective surgery to be done on the day of admission (for general or regional anesthesia.)

14.10.3 The scheduling surgeon must schedule the patient for a pre-op H&P to be done within thirty (30) days prior to surgery. The surgeon must clearly enter in the medical record:

*A.* The procedure being scheduled and type of anesthesia;

*B.* The surgical indications;

*C.* Whether the patient is to be admitted following the surgery.

10.10.4 It is the responsibility of the surgeon scheduling the procedure to obtain informed consent from the patient at the time it is scheduled, having explained the risks and benefits to the patient.

10.10.5 The pre-op H&P and all ordered tests will be reviewed by the anesthesiologist prior to surgery. The provider performing the H&P and/or the primary care provider may be consulted in evaluation of abnormal results prior to cancellation of surgery.

# ARTICLE 15

## ADOPTION AND AMENDMENT OF BYLAWS AND RULES

**15.1 Annual Review.**

These Bylaws and the Rules shall be reviewed annually by the Medical Executive Committee.

**15.2 Procedure.**

Upon the request of the Medical Staff President, the Medical Executive Committee, the Administrative Affairs Committee, or upon timely written petition signed by at least 10% of the Members of the Medical Staff in Good Standing who are entitled to vote, consideration shall be given to the adoption, amendment or repeal of these Bylaws or Rules.

**15.3 Medical Staff Action.**

These Bylaws and Rules may be adopted, amended, or repealed by:

15.3.1 The affirmative vote of a majority of the active Staff Members in Good Standing present at a regular or special Staff Meeting at which a quorum attends, provided that the proposed documents or amendments are made available to Staff Members entitled to vote thereon no less than two (2) weeks before balloting with or at the time of notice of the meeting; or

15.3.2 The affirmative vote of a majority of ballots returned by Members in Good Standing, provided that a copy of the proposed documents or amendments are made available to each Staff member entitled to vote thereon no less than two (2) weeks before balloting, and provided that no less than two (2) weeks' time interval exists between the date the ballot was mailed to active Members and the due date of the ballot.

All elections to adopt amend or repeal the Bylaws or Rules and Regulations shall be conducted in accordance with these Bylaws.

**15.4 Approval.**

By laws and Rules changes adopted by the Medical Staff shall not become effective until approved by the Governing Body. Neither the Medical Staff nor the Governing Body may unilaterally amend the Bylaws or Rules.

**15.5 Exclusivity.**

The mechanism described herein shall be the sole method for the initiation, adoption, amendment, and/or repeal of the Bylaws or Rules.

# Rules and Regulations

These Rules and Regulations are adopted pursuant to Article 15 of the Medical Staff Bylaws. These Rules use the same Definitions as the ones described in the Bylaws. The Rules specifically include those policies and procedures that are referenced herein.

## 1. General Rules

### A. Admissions

1. All admissions of patients are subject to rules delineated in the Medical Staff Bylaws, specific department policies and hospital policies.

### B. Continuous Responsibility for Patients

#### *1. Inpatient*

a. The attending physician is responsible for the complete and continuing care of his/her patients. He/she is required to keep appropriate personnel informed as to where he/she can be reached in case of emergency and shall designate at least one physician to render emergency or other necessary patient care if he/she is not available. Each patient shall be reassessed daily.

#### *2. Outpatient*

a. Primary Care Providers are responsible for their panel of patients as described in the Ambulatory Care Policies.

### C. Medical Records

#### *1. General Provisions*

a. Abbreviations

i. An "Unacceptable Abbreviations List" is posted throughout the hospital and clinics. Copies may be obtained from Medical Records.

b. Records Belonging to Health Services Department

i. Refer to Hospital Policy 705 – Removal, Retention and Destruction of Protected Health Information. All medical records and other records relating to the admission, care and discharge of a patient are the property of the Contra Costa County Health Services Department and may be removed from the Health Services Department's jurisdiction and safekeeping only in accordance with a subpoena, court order or other statute. In case of readmission of any patient, all previous records shall be available to the attending physician.

c. Electronic Signature

i. Approved electronic signature of medical records is acceptable for chart completion.

## 2. *Completion of Records*

### a. Inpatient Records

i. Responsibilities of the Members of Medical Staff and General Provisions

b. Content of Staff Entry

i. The attending physician shall be responsible for preparing a complete medical record for each patient as described in Hospital Policy 706 – Medical Record Content. This record shall include at least the following minimum information.

ii. Patients shall be discharged only upon the order of the attending physician or another physician acting as his/her representative. At the time the patient is discharged, the attending physician shall complete the medical record, indicate the reason for admission, state the final diagnosis, record treatment and/or procedures performed, describe the condition of the patient on discharge, including specific comparison with condition on admission and any specific instructions given the patient and/or family (e.g., diet, medication, physical activity and follow-up care.) When pre-printed instructions are given to the patient, the record should so indicate and a sample of the instruction sheet in use at the time must be kept on file in the Medical Records Department. All medical record entries must be signed and dated.

iii. When a patient has been hospitalized a discharge summary is required.

iv. All surgery performed shall be fully described by the operating surgeon in the patient's medical record. Such description shall include a detailed account of the technique used, identification of tissues and foreign material removed, if any, and a description of the findings. Such description shall be done immediately after surgery is concluded. A brief interim operative note shall be placed in the medical record immediately after surgery is concluded if the complete note is not immediately visible in the electronic health record.

v. At the discretion of the attending physician, tissues and foreign materials removed in surgery shall be submitted, together with adequate clinical information, to the pathologist on duty. The Pathology Department may establish appropriate guidelines.

vi. In addition to the operating surgeon's report, the record of every operation involving use of an anesthetic other than local shall include a proper anesthetic record and a post-anesthetic follow-up report.

vii. Standards for History and Physical Examination. The complete history and physical examination (H&P), as required for the patient's medical record, shall be completed within twenty-four (24) hours after admission of the patient, and, in case a patient is admitted for surgery, shall be completed prior to the time surgery is done. When the history and physical examination is done a holding note must be recorded in the medical record at the time of examination. History and physical may be performed up to thirty (30) days in advance provided a durable and legible copy is inserted into the inpatient medical record no later than twenty-four (24) hours after admission of the patient, and, in case a patient is admitted for surgery, shall be completed prior to the time surgery is done. When the history and physical examination is done a holding note must be recorded in the medical record at the time of examination,. A history and physical may be performed up to thirty (30) days in advance provided a durable and legible copy is inserted into the inpatient medical record no later than twenty-four (24) hours after admission and is updated as appropriate. At a minimum the H&P will include the following sections: HPI, Problem List, Allergies, Medications, Physical Exam, and Assessment/Plan.

viii. Special Standards for Elective Surgery. The following procedure is to be followed when scheduling a patient for either elective outpatient surgery or e lective surgery to be done on the day of admission (for general or regional anesthesia.)

1. The scheduling surgeon must schedule the patient for a pre-op H&P to be done within thirty (30) days prior to the surgery. The surgeon must clearly enter in the medical record:

    a. The procedure being scheduled and type of anesthesia;

    b. The surgical indications;

    c. Whether the patient is to be admitted following the surgery.

2. It is the responsibility of the surgeon scheduling the procedure to obtain informed consent from the patient at the time it is scheduled, having explained the risks and benefits to the patient.

3. A History and Physical shall be done on all pre-op patients.

4. Pre-op lab work should be scheduled within two weeks prior to surgery.

5. The pre-op H&P and all ordered tests will be reviewed by the anesthesiologist prior to surgery. The provider performing the H&P and/or the primary care provider may be consulted in evaluating abnormal results prior to cancellation of surgery.

### 3. *Delinquency*

a. All charts must be completed within the time limits specified below. A "complete medical record" is defined as one that meets all criteria as set forth.

**i). Inpatient and Surgery**

| Document | Time Due |
|---|---|
| Discharge Summary..... | Thirteen (13) days post discharge |
| Inpatient History/Physical..... | Twenty-four (24) hours post admission |
| Interval History/Physical..... | Less than twenty-four (24) hours prior to surgery |
| Operative Report..... | Immediately after surgery |
| Pre-anesthesia evaluation..... | Must be completed prior to being placed under anesthesia unless extreme emergency |
| Post-Anesthesia note..... | 6 hours after conclusion of anethesia |
| Verbal orders..... | Authenticated by twenty-four (24) hours for IV Fluid or IV drug orders; all others within 48 hours |
| Other inpatient documentation as required by law, including; | At hospital discharge |
| a) Diagnostic and therapeutic orders;<br>b) Clinical observations and results of therapy;<br>c) Reports of procedures, tests, and their results;<br>d) Conclusions at the termination of care.<br>e) All inpatient dictations. | Must be signed within thirteen (13) days and are delinquent after the fourteenth (14th) day. |

### *ii. Outpatient Records*

a. Providers are encouraged to chart as soon as possible after visit. At a minimum, the diagnosis and treatment plan shall be charted at the time of the visit. The provider note must be complete within twenty-four (24) hours.

b. Outpatient notes should contain the following elements:

   i. Patient identification.
   ii. Date of visit.
   iii. Relevant history or pertinent update of the illness or injury.
   iv. Physical findings, if applicable.
   v. Results of tests and other studies, if applicable.
   vi. Diagnostic assessment.
   vii. Treatment plan, including prescriptions.
   viii. Results of treatment rendered during the visit, if applicable.

ix. Patient teaching, including instructions given to the patient and/or family and follow-up care.

### *4. Disciplinary Proceedings*

a. Process

i. An incomplete chart is considered delinquent fourteen (14) days after the due date as specified at 1.C.3.a. Automatic initiation of disciplinary proceedings for the responsible practitioner will occur as soon as a chart becomes delinquent.

ii. A letter will be sent to the practitioner responsible for the delinquent records from Health Information Management. The Medical Staff Office will also contact the practitioner, using the contact information provided to the office by the practitioner. Practitioners are responsible for making sure their contact information is up to date.

iii. The letter shall state:

*A.* The list of delinquent records;
*B.* That failure to complete delinquencies within seven (7) days will result in suspension of all Medical Staff Privileges and Staff Membership by the Medical Staff President until the stated delinquent charts are completed.

iv. If delinquent records referred to in the letter are not completed with seven (7) days, the Medical Staff President shall immediately suspend all Medical Staff Privileges and Membership until the delinquent charts are properly completed. The Medical Staff President will notify the appropriate Department Heads, the Executive Director of the Hospital, Chief Medical Officer and the Residency Director as appropriate .

b. Further Sanctions

i. Any practitioner suspended for a cumulative total of thirty (30) days or more during any 12-month period will be reported to the Medical Board of California by the Medical Staff President.

## D. Medical Orders

### *1. Inpatient*

a. All orders must be reconciled when a patient is transferred into or out of the Critical Care units (ICU and IMCU.)

i. Orders can be dictated or telephoned to a health professional listed below and later signed by the attending physician, or, in case of treatment required in the absence of the attending physician, by the physician then responsible for the patient's care/ Verbal orders shall be accepted and entered by a licensed nurse, occupational

therapist, physical therapist, licensed respiratory therapist or speech therapist, registered pharmacist or registered dietician only and such action will be limited to urgent circumstances.

ii. Verbal orders are not valid for orders to limit or remove lifesaving procedures.

iii. There are no routine or standing orders regarding patient care or ordering of diagnostic tests.

***2. Outpatient***

a. Outpatient orders should be entered in the medical records. Any verbal orders must be co-signed by the M.D. or FNP within twenty-four (24) hours.

**E. CPR**

1. Although a "Basic CPR" certificate is not required for Medical Staff membership, it is strongly encouraged for all those physicians in patient care. Individual Departments may require it for membership.

**F. Disaster Assignments: Refer to Hospital Disaster Plan**

1. Contra Costa Regional Health Center & Health Centers maintains a disaster plan based upon the Hospital Emergency Incident Command System (HEICS) which delineates the administrative structure for disaster responses. Each individual Department also has in place disaster and evacuation plans.

2. Employed members of the Medical Staff are designated automatically as disaster workers in the event of a disaster. Other members of the Medical Staff are eligible to participate in disaster work, as is volunteer staff under the guidelines of disaster credentialing as delineated in the Medical Staff Bylaws.

**G. Consultation Policy**

1. All providers are expected to seek consultation and advice whenever they encounter a situation in the course of caring for a patient in whom they are not confident of their own ability or knowledge. They should also seek consultation when it become evident that the patient is not comfortable with the diagnosis or management of his or her problem. Consultation may be obtained from Members of the Staff who are privileged to care for the problem for which the advice is sought, and his or her report shall be included in the medical record. The consultation report should be placed in the medical report.

2. Except where consultation is precluded by emergency circumstances, the attending physician shall consult with another qualified physician in all of the following cases:

   a. All major surgical cases in which the patient is not a good risk.

   b. In all cases in which the diagnosis is obscure or in which there is doubt as to the best therapeutic measures to be utilized.

## H. Operating Room Policies

### *1. Consents:*

a. Except in cases of emergency, no surgery shall be performed except pursuant to written informed consent from the patient or his/her legal representative, and all other persons, if any, from whom consent is required.

   i. History and physical examination;
   ii. Pre-operative diagnosis;
   iii. All necessary Laboratory and X-ray work;
   iv. Pre-anesthetic evaluation in all cases receiving a general anesthetic;

b. If, in any surgical cases, the foregoing requirements are not met prior to the time scheduled for surgery, the operation shall be canceled by the Operating Room Supervisor or designee and rescheduled unless the attending physician documents that such delay would be detrimental to the patient.

### *2. Prompt attendance of surgeon and attendants:*

Surgeons and attendants must be in the operating room and ready to commence surgery at the time scheduled.

## I. Supervision of House Staff

1. House staff shall have appropriate supervision present at all times regardless of patient complexity or house staff proficiency capabilities. This supervision shall be accessible and available particularly when house staff capability is exceeded.

2. Inpatient Supervision

   a. House staff shall identify a Medical Staff member as the attending or record on the admission orders of all patients admitted to the hospital. All critically ill patients admitted by the house staff shall be discussed with an attending physician. Teaching rounds shall be held daily. Junior house staff shall receive close attending supervision, proficiency monitoring and patient care responsibilities whenever possible. After hours supervision shall be provided by either in-house Medical Staff coverage or Department-dependent call mechanisms.

   b. All "No CPR" orders entered by house staff shall document concurrent discussion with Medical Staff.

   c. Medical Staff co-signatories are needed for all resident physicians for the following medical records and documents:

      i. Inpatient History and Physical
      ii. Pre-anesthesia Evaluation
      iii. Consultative Reports
      iv. Procedure Notes and Operative Reports

3. Outpatient Supervision
   a. More detailed and specific house staff supervision rules and policies are located in the specific Department rules and regulations manual of Contra Costa Regional Medical Center. A copy of these policies is also located in the residency office.

      i. Prescriptions

         *A.* All unlicensed residents must have all prescriptions co-signed.

      ii. Family Medicine Clinics

         *A.* All family medicine residents must have a Department of Family Medicine member with appropriate privileges assigned to supervise and precept them. This preceptor must be immediately available and have adequate time for teaching.

         *B.* All medical record entries by medical students must be co-signed by a provider with privileges.

      iii. Specialty Clinics

         *A.* A staff physician will directly supervise all residents working in a specialty clinic. First-year residents are expected to discuss all patients with their supervising physician before the patient leaves. Second- and third-year residents should discuss most cases with their supervising physician. The supervising physician should be identified on the consultation.

         *B.* All medical record entries by medical students must be co-signed by provider with privileges.

## J. On-Call Response Time

1. Departments shall determine and monitor appropriate on-call procedures for their specific services.

## K. Processing and Delivery of Ordered Blood Products

1. Blood products ordered by any physician shall be provided by the Blood Bank/Transfusion Service without delay. If questionable indications for transfusion are felt to be present, the pathologist, while processing of this order proceeds without delay, will attempt to discuss this issue with the ordering physician. If, after discussion, the pathologist still believes the request to be questionable, he/she will report this case to the appropriate Department or committee for review.

2. The physician who has primary responsibility for the patient has the final say in decision making, although we encourage a team approach utilizing dialogue between the clinician and the transfusion service.

## L. Collection and Expenditures of Medical Staff Funds

### 1. Application Fees

a. Each application may be assessed an application non-refundable processing fee. This fee shall be Three Hundred Dollars ($300) and shall also be considered as payment of any dues, for which the applicant shall be liable during the period of the initial appointment, should the applicant be appointed to the staff. The fee for applications for Courtesy, Honorary, Temporary, Administrative, Allied Health Professional, and Telemedicine Staff shall be One Hundred and Fifty Dollars ($150)

b. In the event that the applicant is not accepted, no portion of this applications fee shall be refunded. In special circumstances as defined by the Credentials Committee and the Medical Executive Committee, this application fee may be waived.

### 2. Medical Staff Dues

a. The Medical Executive Committee shall have the power to determine the amount of biennial reappointment dues. The following dues are currently in effect:

i. Active Staff:

Two Hundred Dollars ($200) for each two-year reappointment

ii. Courtesy, Honorary, Temporary, Administrative, Allied Health Professional, and Telemedicine Staff:

One Hundred Dollars ($100) for each two-year reappointment

### 3. Reappointment Late Processing Fees

a. Pursuant to the Bylaws and the Rules, the Medical Staff is authorized to collect late processing fees. An application for reappointment is late when less than one hundred fifty (150) calendar days remain until the end of Members' term. In addition to the regular reappointment fee, the following late processing fees are assessed:

i. At one hundred fifty (150) days from the end of a term – Fifty dollars ($50) – (may be waived in extenuating circumstances, such as vacation);

ii. At one hundred twenty (120) days from the end of the term – Fifty dollars ($50) more for a total penalty of one hundred dollars ($100) – (may not be waived);

iii. At ninety (90) days from the end of the term – Fifty dollars ($50) more for a total penalty of one hundred fifty dollars ($150),

iv. At ninety (90) days, all fees must be paid in full and application must be complete or reappointment application is not processed and the membership is deemed to have expired automatically at the end of the term. If the member submits a new application for membership in the medical staff within six (6) months of the expiration of the appointment, he/she must pay the one hundred fifty dollar ($150) penalty in addition to the application fee.

4. **Expenditure of Funds**
   a. The Medical Executive Committee shall determine the method of disbursement of Medical Staff funds. The Medical Executive Committee may appoint a Medical Staff Funds Advisory Committee to advise the Medical Executive Committee regarding such expenditures.

   b. If an Advisory Committee is appointed, it shall study the various possible uses for the funds and recommend specific expenditures, including specific dollar amounts, to the Medical Executive Committee on an annual basis or more often as appropriate.

   c. The Medical Executive Committee shall retain ultimate control of these funds. The Medical Executive Committee may deposit these funds in any accounts it deems suitable.

      i. Any account shall have the following co-signers:

         *A.* The Medical Staff President
         *B.* The Medical Staff President-Elect
         *C.* The Immediate Past President of the Medical Staff
         *D.* The Chair of the Administrative Affairs Committee
         *E.* Two Medical Staff Coordinators as designated by the Medical Executive Committee

      ii. Any two (2) of these co-signers may distribute Medical Staff funds provided at least one co-signer is a Member of the Medical Staff. Any disbursement of funds greater than three hundred dollars (>$300) must be approved in advance by the Medical Executive Committee. Any disbursement of funds of three hundred dollars or less (<=$300) may be authorized by any two (2) of the cosigners listed above. Any such disbursement of funds without the advance approval of the Medical Executive Committee must be reported to the Medical Executive Committee by the Medical Staff President at the next regularly scheduled Medical Executive Committee meeting.

**M. Medical Staff Evaluation and Development**

1. Each Member of the active Medical Staff shall be reviewed no less often than every eleven (11) months by his/her Department Head on a form approved by the Medical Executive Committee. The purpose of this evaluation shall be to facilitate verbal and documented communications between the Department Head and the Staff Member in an attempt to acknowledge the Staff Member's areas of excellence and to identify those areas which can be improved.

2. The Medical Staff President shall evaluate the Department Heads in the same manner after consultation with the Members of his/her department. If the Department Head is also the Medical Staff President, an individual designated by the Credentials Committee shall evaluate him or her.

3. Upon completion, the evaluator and the Medical Staff Member shall meet face to face and each receives a copy of the evaluation, with additional copy to be placed in the individual's

credentials file. The copy in the credential's file shall be used by the Credentials Committee during the reappointment process. The Staff Member may request modification of this.

4. This evaluation shall be sent to the credentials file and the information in the credentials files shall be used for Medical Staff purposes only.

## N. Other Policy Manuals

1. From time to time, policies are legally created and adopted by the Governing Body, the Administration, Nursing, and particular administrative departments. To the extent that these policies are not in conflict with the Medical Staff Bylaws, the Rules, or Medical Staff Policies, the Medical staff shall abide by the extraneous policy. If these extraneous policies are in conflict with the Bylaws, the Rules, or Medical Staff Policies, the Medical Executive Committee shall review the conflicting policies and recommend appropriate changes. When the extraneous policies have a negative impact upon the quality of patient care, the Medical Executive Committee shall also review the policy and make appropriate recommendation to assure quality care. In all cases, the Medical Staff must abide by the requirements of the Bylaws and the Rules.

CONTRA COSTA
HEALTH SERVICES

# Contra Costa Regional Medical Center
# & Health Centers

## Medical Staff Bylaws

## Rules & Regulations

## 2018~~2015~~

# Contents


**DEFINITIONS ..... 1**

**ARTICLE 1 ..... 3**

**NAME AND PURPOSES ..... 3**

**ARTICLE 2 ..... 3**

**MEMBERSHIP ..... 3**

2.1 Nature of Membership ..... 3
2.2 Eligibility and Qualifications for Membership ..... 3
2.4 Waiver of Qualifications ..... 5
2.5 Membership Requirements ..... 5
2.6 Effect of Other Affiliations ..... 5
2.7 Nondiscrimination ..... 5
2.8 General Responsibilities of Medical Staff Membership ..... 5
2.9 Harassment and Discrimination Prohibited ..... 6

**ARTICLE 3 ..... 8**

**CATEGORIES OF THE MEDICAL STAFF ..... 8**

3.1 Categories ..... 8

**ARTICLE 4 ..... 15**

**ALLIED HEALTH PRACTITIONERS ..... 15**

4.1 Definitions ..... 15
4.2 Categories of AHPs Eligible to Apply for AHP Clinical Privileges or Services ..... 16
Authorizations and Rules regarding them ..... 16
4.3 Eligibility and General Qualifications ..... 16
4.4 Specific Qualifications ..... 17
4.5 Waiver of Qualifications. ..... 17
4.6 Prerogatives ..... 18
4.7 Responsibilities ..... 18
4.8 Procedure for Granting Initial and Renewal Services Authorizations ..... 18
4.9 Termination, Suspension, or Restriction of Service Authorizations ..... 18

**ARTICLE 5 ..... 19**

**PROCEDURES FOR APPOINTMENT AND ~~REAAPOINTMENT~~REAPPOINTMENT ..... 19**

5.1 General ..... 19
5.2 Applicant's Burden ..... 19
5.3 Applicant for Initial Appointment and Reappointment for Medical Staff Membership ..... 19
5.4 Basis for Appointment and Reappointment to the Medical Staff ..... 20
5.5 Application Procedure ..... 20
5.6 Reappointment and Requests for Modifications of Staff Status or Privileges ..... 28
5.7 Leave of Absence from the Medical Staff ..... 29
5.8 Waiting Period after Adverse Action ..... 29
5.9 Confidentiality and Impartiality ..... 30

**ARTICLE 6 ..... 30**

**PRIVILEGES ..... 30**

6.1 Exercise of Privileges ..... 30
6.2 Delineation of Privileges in General ..... 31
6.3 Non-licensed Resident Physicians ..... 31
6.4 Temporary Privileges ..... 32
6.5 Emergency Privileges ..... 33
6.6 ~~Initial~~ Focused Professional Practice Evaluation (FPPE) ..... 34
6.7 Disaster Privileges ..... 35

**ARTICLE 7 ..... 37**

**GENERAL MEDICAL STAFF OFFICERS ..... 37**

7.1 Identification ..... 37
7.2 Qualifications ..... 37
7.3 Attainment of Office ..... 37
7.4 Vacancies ..... 38

7.5 Resignation and Removal from ~~office~~Office .....39
7.6 Duties of General Staff Officers.....39

**ARTICLE 8 ..... 40**

**DEPARTMENT AND DIVISIONS.....40**
8.1 Organization of Departments .....40
8.2 Assignment to Departments .....42
8.3 Functions of Departments.....42
8.4 Department Heads .....43
8.5 Election of Department Heads .....44
8.6 Functions of Divisions .....46
8.7 Division Heads .....46
8.8 Election of Division ~~heads~~Heads .....47

**ARTICLE 9 ..... 49**

**COMMITTEES.....49**
9.1 General Provisions .....49
9.2 Medical Executive Committee .....50
9.3 Committees .....51

**ARTICLE 10 ..... 68**

**MEETINGS.....68**
10.1 Medical Staff Meetings .....68
10.2 Clinical Department and Committee Meetings .....68
10.3 Quorum .....68
10.4 Manner of Action .....69
10.5 Notice of Meetings.....69
10.6 Minutes .....69
10.7 Agenda .....69
10.8 Attendance Requirements .....70
10.9 Conduct of Meetings.....70

**ARTICLE 11 ..... 70**

**CORRECTIVE ACTION .....70**
11.1 Corrective Action.....70
11.2 Summary Restriction of Suspension.....72
11.3 Grounds for Automatic Suspensions and/or Restrictions .....73

**ARTICLE 12 .....76**

**HEARING AND APPELLATE REVIEWS..... 76**
12.1 Grounds for Hearing.....76
12.2 Exhaustion of Remedies.....76
12.3 Requests for Hearing.....76
12.4 Hearing Procedure .....78
12.5 Appeals.....81
12.6 Exceptions to Hearing Rights.....83

**ARTICLE 13 .....84**

**CONFIDENTIALITY..... 84**
13.1 General.....84
13.2 Breach of Confidentiality.....84
13.3 Protection.....84
13.4 Access by ~~persons~~ Persons or Agencies Outside the Jurisdiction of the Hospital 85
13.5 Access by Persons within the Jurisdiction of the Hospital .....86

**ARTICLE 14 .....88**

**GENERAL PROVISIONS..... 88**
14.1 Rules and Regulations .....88
14.2 Dues or Assessments.....88
14.3 Construction of Terms and Headings .....88
14.4 Authority to Act.....88
14.5 Division of Fees .....88
14.6 Special Notices .....88
14.7 Requirements for Elections of Medical Staff President, Department Heads, Division ~~heads~~ Heads and for Bylaws Amendments .....89
14.8 Disclosure of Interest. .....89
14.9 Authorization, Immunity, and Releases. 90
14.10 Standards for History and Physical Examination. .....90

**ARTICLE 15 .....91**

**ADOPTION AND AMENDMENT OF BYLAWS AND RULES..... 91**
15.1 Annual Review.....91
15.2 Procedure.....91

15.3 Medical Staff Action. .....91
15.4 Approval. .....91
15.5 Exclusivity. .....92

**RULES AND REGULATIONS ..... 93**

**1. General Rules .....93**
A. Admissions .....93
B. Continuous Responsibility for Patients ..93
1. Inpatient.....93
2. Outpatient.....93
C. Medical Records.....93
1. General Provisions .....93
2. Completion of Records.....94
a. Inpatient Records.....94
3. Delinquency .....96
4. Disciplinary Proceedings .....97
5. Outpatient Records .....98
6. Outpatient notes should contain the following elements: .....98
D. Medical Orders.....98
1. Inpatient.....98
2. Outpatient.....98
E. CPR .....99
F. Disaster Assignments: Refer to Hospital Disaster Plan .....99
G. Consultation Policy.....99
H. Operating Room Policies .....99
1. Consents:.....99
2. Prompt attendance of surgeon and attendants: .....100
I. Supervision of House Staff .....100
J. On-Call Response Time .....101
K. Processing and Delivery of Ordered Blood Products.....101
L. Collection and Expenditures of Medical Staff Funds .....101
1. Application Fees .....101
2. Medical Staff Dues .....102
3. Reappointment Late Processing Fees ..102
4. Expenditure of Funds .....103
M. Medical Staff Evaluation and Development .....103
N. Other Policy Manuals .....104

# Definitions

The following definitions apply to these Medical Staff Bylaws:

1. Administrator means the Chief Executive Officer of Contra Costa Regional Medical Center and Health Centers and her/his designee.
2. Chief Resident means the resident physician chosen by the residents to represent them.
3. Allied Health Practitioners (AHP) are those non-Medical Staff member practitioners described in Article 4 below.
4. Clinical Privileges or Privileges means permission, granted by this Medical Staff to members of the Medical Staff, to provide specific diagnostic, therapeutic, medical, dental, podiatric, surgical, psychiatric or psychology services.
5. AHP Clinical Privileges or Service Authorizations means permission granted by the Governing Body, upon the recommendation of the Interdisciplinary Practice Committee and the Medical Staff, to provide diagnostic and therapeutic services within the scope of the AHP's training and expertise.
6. County means County of Contra Costa, California.
7. Department or Clinical Department means a clinical structure of the Medical Staff as further identified in these Bylaws.
8. Department Head means the practitioner elected or appointed, pursuant to these Bylaws to be responsible for the function of a Clinical Department.
9. Medical Director of Contra Costa Regional Medical Center, also referred to simply as the Medical Director, means the physician appointed by the Administrator to oversee clinical activities of the hospital.
10. Chief Medical Officer of the Health Services Department means the physician appointed by the Director of the Health Services Department to oversee the clinical activities of the Health Services Department.
11. Ex-officio means service as a member of a body by virtue of an office or positions held and, unless expressly provided, without voting rights.
12. Governing Body means the County Board of Supervisors.
13. Hospital or Medical Center means the Contra Costa Regional Medical Center and Health Centers.
14. Health Centers means the outpatient clinical facilities operated by the County where the Members of this Medical Staff provide patient care.
15. Medical Staff Year means the twelve (12)-month period commencing on the first of July of each year and ending on the thirtieth ($30^{th}$) of June of the following year.
16. Member or Medical Staff Member means any Practitioner or Resident who has been appointed to the Medical Staff pursuant to these Bylaws.
17. Member in Good Standing means a Member of the Medical Staff who is not under a suspension.
18. Physician means an individual with a M.D. or D.O. degree who is currently licensed to practice medicine in the State of California.

19. Practitioner means a physician, dentist, clinical psychologist, or podiatrist who is currently licensed by the State of California to provide patient care services.
20. Residency Director means the physician who directs the postgraduate Family Medicine training program based at the Hospital.
21. Resident means a physician in training who is participating in a residency of fellowship approved by the American Council of Graduate Medical Education.
22. Rules or Rules and Regulations mean the Medical Staff Rules and Regulations that are contained under separate cover and are adopted to the Bylaws.

# ARTICLE 1

## NAME AND PURPOSES

1.1 The name of this organization is the Medical Staff of the Contra Costa Regional Medical Center and Health Centers.

1.2 The Medical Staff purposes are:

*1)* To assure that all patients treated by any of its members receive the best possible care.

*2)* To provide for professional performance that is consistent with the mission and goals of the Hospital.

*3)* To maintain Rules for the Medical Staff to carry out its responsibilities for the professional work performed in the Hospital.

*4)* To provide a means for the Medical Staff, Governing Body and Hospital Administration to discuss issues of mutual concern.

*5)* To provide for accountability of the Medical Staff to the Governing Body.

# ARTICLE 2

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## MEMBERSHIP

### 2.1 Nature of Membership

Appointment to the Medical Staff shall confer only such Privileges and Prerogatives as have been granted by the Governing Body in accordance with these Bylaws. Only Members of the Medical Staff may care for patients in our Hospital and Health Centers.

### 2.2 Eligibility and Qualifications for Membership

2.2.1 General Qualifications

Membership on the Medical Staff and Privileges shall be extended only to Practitioners who are professionally and ethically competent and continuously meet the qualifications, standards, and requirements set forth in these Bylaws, Rules and Regulation, and Medical Staff Policies.

Except for Honorary, ~~and~~ Resident and Administrative membership, only physicians, dentists, podiatrists and clinical psychologists who;

*A.* Document current, valid, unrestricted licensure; adequate experience, education and training; professional and ethical competence; good judgment; adequate physical and mental health status; and current eligibility to participate in Medicare, Medicaid or other federally-sponsored health care program; and who

*B.* Abide by the ethics of their profession; work cooperatively with others; maintain confidentiality as required by law; and will participate in and discharge their responsibilities as required by the medical staff shall be deemed to possess the basic qualifications and eligibility for membership on the Medical Staff.

2.2.2 Specific Qualifications:

To be eligible and qualified for Medical Staff Membership and Privileges, the Practitioner must, meet the basic standards outlined in 'Eligibility and General Qualifications,' and these Specific Qualifications;

No record of criminal conviction of Medicare, Medicaid, or insurance fraud and abuse, payment of civil money penalties for same, or exclusion from such programs.

No record of denial, revocation, relinquishment or termination of appointment or clinical privileges at any hospital for reasons related to professional competence or conduct.

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Physicians seeking ~~initial~~ membership ~~and p,~~ privileges or reappointment ~~or reappointment~~ must have satisfactorily completed an approved postgraduate residency training program. An approved postgraduate residency training program is a program approved by the Accreditation Council for Graduate Medical Education (ACGME). ~~Physicians must be BE/BC in the specialty area in which they completed their postgraduate training program.~~

Commented [cb2]: consistent with previous sentence

Resident Physicians. An applicant for Resident Physician membership on the Medical Staff must have a valid M.D. or D.O. degree or equivalent degree. The applicant must have been accepted for training by a residency program affiliated with the Hospital and must be a member in good standing of the residency. Resident physicians do not need to have a full license to practice medicine independently; however, if they do not have such an unrestricted license, a Licensed Physician Member of the Medical Staff must supervise any patient care in which the resident is involved.

Controlled Substance Prescriber. Practitioner members on the Medical Staff must have a current, valid, unrestricted Federal DEA number/registration if prescribing controlled substances.

Dentists. An applicant for dental membership on the Medical Staff must have a DDS or equivalent degree. The Practitioner must have a current, valid, unrestricted license to practice dentistry issued by California Board of Dental Examiners.

Podiatrists. An application for Podiatric Membership in the Medical Staff must have a D.P.M. or equivalent degree. The Practitioner must have a current, valid, unrestricted license to practice podiatry issued by the California Board of Podiatric Medicine

Clinical Psychologists. An applicant for Clinical Psychologist Membership on the Medical Staff must have a doctorate degree in psychology. The Practitioner must have a current, valid, unrestricted license to practice clinical psychology issued by the California Board of Psychology.

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### 2.4 Waiver of Qualifications

The Credentials Committee may recommend that certain eligibility criteria be waived by the Medical Executive Committee (MEC.) The Practitioner must demonstrate that he or she has the equivalent qualifications or that exceptional circumstances exist which warrant granting the waiver. The Practitioner has no right to have his or her waiver request considered or granted and denial of a waiver confers no right to a hearing or appellate review.

### 2.5 Membership Requirements

An applicant for Membership appointment or reappointment on the Medical Staff must document his or her adequate experience, education, and training in the requested Privileges. The applicant must demonstrate current professional competence and good judgment in the use of such Privileges. The applicant must demonstrate his or her ability to exercise such Privileges for quality patient care at a level recognized as appropriate to a similar professional within the community. The MEC must determine that the applicant adheres to the lawful ethics of his or her profession; is able to work cooperatively with others in the Hospital so as not to adversely affect patient care or Hospital operations; and is willing and able to participate in and properly discharge Medical Staff responsibilities as describes in these Bylaws, the Rule and Regulations and applicable Medical Staff Policy.

### 2.6 Effect of Other Affiliations

No Practitioner is entitled to Medical Staff Membership merely because he or she holds a certain degree, is licensed to practice medicine in this or in any other state, is a member of any professional organization, is certified by any clinical board, or because he or she had, or presently has, Medical Staff Membership or Privileges at another health care facility.

### 2.7 Nondiscrimination

Medical Staff Membership or particular Privileges shall not be denied on the basis of age, gender, sexual orientation, race, religion, color, national origin, physical or mental impairment, marital status or disability that does not pose a threat to the quality of patient care or substantially impair the ability to fulfill required staff obligations.

### 2.8 General Responsibilities of Medical Staff Membership

Each Medical Staff Member exercising Privileges in the Hospital and Health Centers shall continuously meet all of the following responsibilities:

2.8.1 Provide his or her patients with care meeting the professional standards of the Medical Staff of this Hospital.

2.8.2 Abide by the Medical Staff Bylaws and the Rules and all other lawful standards, policies, and rules of the Medical Staff and the Hospital.

2.8.3 Abide by all applicable laws and regulations of governmental agencies and comply with applicable standards of the TJC.

2.8.4 Discharge such Medical Staff, department, division, committee, and service functions for which he or she is responsible by appointment, election, or otherwise.

2.8.5 Prepare and complete in a timely manner the Medical and the required records for all patients to whom the Practitioner in any way provides services to the Hospital.

2.8.6 Abide by the ethical principles of his or her profession.

2.8.7 Work cooperatively with other Medical Staff Members, nurses, administrators, and other members of the health care team so as not to adversely affect patient care.

2.8.8 Participate in educational programs approved by the Medical Staff and designed to improve the quality of patient care.

2.8.9 Refuse to engage in any improper inducements for patient care referrals.

2.8.10 Make appropriate arrangements for coverage for his or her patients when an absence is anticipated.

2.8.11 Complete continuing education programs that are required by the Medical Staff.

2.8.12 Participate in emergency service coverage and consultation (on-call) panels as may be required by the Medical Staff.

2.8.13 Accept responsibility for participating in Medical Staff FPPE in accordance with the Bylaws.

2.8.14 Pay Medical Staff dues and assessments within sixty (60) days of invoice receipt.

2.8.15 Participate in the resident training program as requested by the Residency Director.

2.8.16 Promptly notify the Medical Staff Office of any professional liability action the member is involved in as soon as the member becomes aware of his or her involvement.

2.8.17 Participate in quality assurance programs as determined by the Medical Staff.

2.8.18 Discharge such other duties and obligations as may be lawfully established from time to time by the Medical Staff, the Medical Executive Committee, the Member's Department, or the Administrator.

## 2.9 Harassment and Discrimination Prohibited

2.9.1 Statement of Policy

The Medical Staff is committed to providing a workplace free of sexual harassment or discrimination as well as unlawful harassment or discrimination based upon age, ancestry, color, marital status, medical condition, mental disability, physical disability, national origin, race, religion, gender, or sexual orientation. The Medical Staff does not tolerate

harassment or discrimination by Medical Staff Members of resident physicians, support staff, County employees, patients, or other Medical Staff Members.

2.9.2 Harassment Defined

*A.* Harassment is unwelcome verbal, visual, or physical conduct that creates an intimidation, offensive or hostile working environment or that interferes with work performance. Such conduct constitutes harassment when:

1) Submission to the conduct is made either an implicit or explicit condition of employment;
2) Submission to or rejection of the conduct is used as the basis for an employment decision; or
3) The harassment unreasonably interferes with work performance or creates an intimidating, hostile or offensive work environment.

2.9.3 Harassing conduct can take many forms and includes, but is not limited to, slurs, jokes, statements, gestures, pictures, or cartoons regarding a person's age, ancestry, color, marital status, medical condition, mental disability, physical disability, national origin, race religion, gender or sexual orientation. Sexually harassing conduct in particular includes~~d~~ all of these prohibited actions as well as requests for sexual favors, ~~conversion~~ conversations containing sexual comments, and unwelcome sexual advances.

2.9.4 ~~Investigating~~ Investigation and Corrective Action

*A.* Every complaint of harassment, unlawful discrimination or retaliation made to the Medical Staff will be investigated thoroughly and promptly. The Medical Staff will attempt to protect the privacy of individuals involved in the investigation when appropriate. The Medical Staff will not tolerate retaliation against anyone who reports harassing conduct. Other entities, such as the County and legal authorities, may also separately investigate such complaints. When appropriate, the Medical Staff shall share investigatory information with such authorities.

*B.* If the Medical Staff determines that harassment occurred, the Medical Staff will take corrective action up to and including termination of Medical Staff Privileges or Membership. Corrective actions taken by the Medical Staff related to such harassing conduct are not grounds for a hearing unless those actions affect a Member's Privileges or Membership status on the Medical Staff. When appropriate, corrective action may include reporting the harassment to appropriate legal, administrative, and governing authorities.

**Commented [cb3]:** suggested word choice

**Commented [cb4]:** suggested, if accurate

ARTICLE 3

## CATEGORIES OF THE MEDICAL STAFF

### 3.1 Categories

The Medical Staff Members are divided into the following categories of membership; active, temporary, courtesy, provisional, honorary, administrative and resident. Each Medical Staff Member shall be assigned to a Medical Staff category based upon the respective qualifications set forth in theses Bylaws. Members of each Medical Staff category shall have the respective prerogatives and responsibilities as set forth in these Bylaws. Action may be initiated to change the Medical Staff category to terminate the membership of any Member who fails to meet the qualifications or fulfill the responsibilities as described in the Bylaws. Changes in Medical Staff category shall not be grounds for hearing unless it affects the Member's Clinical Privileges.

3.1.1 The Honorary Medical Staff

The honorary Medical Staff consists of practitioners who are not active in the Hospital or who are honored by emeritus positions. These may be practitioners who have retired from active hospital practice or who are of outstanding reputation, not necessarily residing in the community. Honorary staff members are not eligible to admit, care for or consult on patients, to vote, to hold office, or to serve on standing Medical Staff.

3.1.2 The Administrative Medical Staff

*A.* Qualifications

1) Administrative category membership shall be held by any physician, who is not otherwise eligible for another staff category and who solely performs ongoing medical administrative activities.
2) Document their (1) current licensure, (2) adequate experience, education and training, (3) good judgment, and (4) current physical and mental health status, so as to demonstrate to the satisfaction of the Medical Staff they are professionally and ethically competent to exercise their duties;

*B.* Prerogatives

The Administration Staff shall be entitled to attend meetings of the Medical Staff and various departments and education programs, but shall have no right to vote at such meetings. Administrative Staff members shall not be eligible to hold office in the Medical Staff Organization, admit patients, or exercise clinical privileges.

3.1.3 The Active Medical Staff

*A.* Qualifications

The active staff consists of physicians, dentists, podiatrists, and licensed psychologists, each of whom;

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Has an office and residence that, in the opinion of the Medical Executive Committee, is located closely enough to the Hospital to provide appropriate continuity of quality care;
3) Regularly admits patients to the Hospital, is regularly involved in the care of patients at the Hospital, or regularly uses the Hospital and/or Health Centers in the care of patients;
4) Has satisfactorily completed his/her term in the provisional staff category.

*B.* Prerogatives

Each member of the active staff is entitled to:

1) Admit patients and/or exercise Clinical Privileges as are granted to him/her;
2) Attend and vote on all matters presented at general and special meetings of the Medical Staff, his/her department, and or committees to which he/she is a member;
3) Attend any staff or Hospital education programs;
4) Hold staff and/or departmental offices and service on committees to which he/she has been appointed.

*C.* Responsibilities

Each member of the active Medical Staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws;
2) Providing for the continuous care and supervision of each patient in the Hospital and Health Centers for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested; and
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member in accordance with the Bylaws.

*D.* Demotion of Active Staff Member.

After one year in which a Member of ~~this~~ the active staff fails to regularly care for patients in ~~this~~ the ~~hospital~~ Hospital or Health Centers or be regularly involved in Medical Staff functions as determined by the Medical Staff, that Member~~s~~ may be demoted to a lower staff category.

**Commented [cb5]:** Capitalized the word Hospital because it is defined at page one. Changed Members to Member for consistency.

3.1.4 Courtesy Staff

*A.* Qualifications

The courtesy staff consists of practitioners, each of whom:

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Has an office and residence that, in the opinion of the Medical Executive Committee, is located closely enough to the Hospital to provide appropriate continuity of quality care;

3) Admits patients to the Hospital on an irregular basis, is occasionally involved in the care of Hospital patients, or occasionally uses the Hospital and/or Health Centers in the care of patients;
4) Is a member of the active staff of another licensed hospital unless the Medical Executive Committee, in writing, for good cause shown, waives this requirement. Dentists holding only General Dentistry, Endodontia, Periodontia, or Orthodontia privileges are exempt from this requirement.
5) Has satisfactorily completed his/her term in the provisional staff category.

*B.* Responsibilities

Each member of the courtesy staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws;
2) Providing for the continuous care and supervision of each patient in the Hospital for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested; and
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member in accordance with the Bylaws.

*C.* Limitation

Courtesy staff members shall not be eligible to hold office in this Medical Staff organization nor shall they be eligible to vote on matters presented at general and special meetings of the Medical Staff, departmental meetings, division meetings, or committee meetings except as specifically provided in the Bylaws.

3.1.5 Provisional Staff

*A.* Qualifications.

The provisional staff consists of practitioners, each of whom:

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Immediately prior to his/her application and appointment was not a member (or was no longer a member) in good standing of this Medical Staff;
3) Has an office and residence that, in the opinion of the Medical Executive Committee, is located closely enough to the Hospital to provide appropriate continuity of quality care.

*B.* Prerogatives.

Each member of the provisional staff is entitles to;

1) Admit patients and exercise such Clinical Privileges as are granted pursuant to the Bylaws;
2) Attend meetings of the staff and the department of which he/she is a member and any staff or hospital education programs;
3) Be appointed to any committee except the Medical Executive Committee. The provisional staff members shall not have the right to vote unless the Medical Staff President confers that right at the time of the committee appointment.

*C.* Responsibilities

Each member of the provisional Medical Staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws;
2) Providing for the continuous care and supervision of each patient in the hospital for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested;
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member in accordance with the Bylaws.

*D.* Limitation

Provisional staff members are not eligible to vote on matters presented at general and special meetings of the Medical Staff, department meetings, division meetings, or committee meetings except as specifically provided in the Bylaws.

*E.* Monitoring of Provisional Staff Member

Each provisional staff members shall undergo a period of monitoring. The monitoring shall be to evaluate the members' (1) proficiency in the exercise of Clinical Privileges initially granted and (2) overall eligibility for continued staff membership and advancement within staff categories. Monitoring of provisional staff members shall follow whatever frequency and format each department deems appropriate in order to adequately evaluate the provisional staff member including, but not limited to, concurrent or retrospective chart review, mandatory consultation, and/or direct observation. The results of the monitoring shall be communicated by the department chairperson to the Credentials Committee.

*F.* Term of Provisional Staff Status

A Member shall remain on the provisional staff for a period of six months unless the Medical Executive Committee or the Credentials Committee extends that status for an additional period of up to six months upon a determination of good cause, which determinations shall not be subject to review. In special circumstances wherein the Member has had minimal activity at the Hospital and Health Centers, and current information is inadequate to allow a determination to conclude the provisional staff status, the Medical Executive Committee may extend the provisional staff status for an additional period of up to twelve (12) months, which determination shall not be subject to review. In no event shall the total provisional staff status of a member exceed twenty-four (24) months. At the conclusion of provisional staff status, further staff status is determined as stated below.

*G.* Action at Conclusion of Provisional Staff Status

1) If the Provisional Staff Member has satisfactorily demonstrated his or her ability to exercise the Clinical Privileges initially granted and otherwise appears qualified for continued Medical Staff membership, the Member shall be eligible for placement in the active or Courtesy Staff, as appropriate, upon recommendation of the Medical Executive Committee (MEC.) The Administrator and the Governing Body shall act upon this MEC recommendation. Should any disagreement occur between the MEC, the Administrator, and the Governing Body, resolution shall occur in compliance with the Bylaws.
2) In all cases, the appropriate department shall advise the Credentials Committee, which shall make its report to the Medical Executive Committee, which, in turn, shall make its recommendation to the Professional Affairs Committee regarding a modification or termination of Clinical Privileges, or termination of Medical Staff membership.

3.1.6 Resident/Fellow Staff

*A.* Qualifications for Residents/Fellow

The resident/fellow staff consists of Members, each of whom;

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Exercise Clinical Privileges under appropriate supervision and direction of the Program Director, and the head of the department in which he/she is exercising Privileges;
3) Attend meetings of the Medical Staff and, if invited, the departments to which he/she is currently assigned;
4) Be appointed to any committee except the Medical Executive Committee. The Resident/Fellow staff member shall not have the right to vote unless that right is

conferred by the Medical Staff President at the time of the committee appointment;

5) If licensed, apply for provisional status on the Medical Staff without relinquishing his or her resident status with regard to these Bylaws.

*B.* Responsibilities

Each member of the Resident/Fellow staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set forth in the Bylaws and Rules;
2) Contributing to the organization and administrative affairs of the Medical Staff by participating on staff, in the departments, and on committees as reasonably requested, and by participating in fulfilling such other staff functions as are reasonably requested.

*C.* Limitation

Resident/Fellow staff members shall not be eligible to hold office in this Medical Staff organization nor shall they be eligible to vote on matters presented at general and special meetings of the Medical Staff, departmental meetings, division meetings, or committee meetings except as specifically provided in the Bylaws.

3.1.7 Temporary Staff

*A.* Qualifications

Temporary staff consists of Members, each of whom:

1) Meets the qualifications for Medical Staff membership set forth in the Bylaws;
2) Has been granted temporary privileges and is not currently on the active, courtesy, provisional, or resident staff.

*B.* Prerogatives

Each Member of the temporary staff in entitled to:

1) Admit patients and exercise Clinical Privileges as are granted to him/her;
2) Attend meetings of the staff in the department of which he/she is a Member and any staff and hospital educational programs.

*C.* Responsibilities

Each Member of the temporary staff is responsible for the following:

1) Carrying out the basic responsibilities of Medical Staff membership set for in the Bylaws;

2) Providing for the continuous care and supervision of each patient in the Hospital for whom he/she is providing services, including arranging for care and supervision in his/her absence and outside of his/her area of professional competence;
3) Providing consultation, supervision, and monitoring of patients, when requested; and
4) Attending meetings of the Medical Staff, his/her department, and committees of which he/she is a member.

*D.* Limitations

Temporary staff members are not eligible to hold office in this Medical Staff organization nor are they eligible to vote on matters presented at general and special meetings of the Medical Staff, departments, divisions, or committees. In the event that a practitioner's temporary clinical privileges are terminated, said practitioner's temporary staff status is also deemed terminated and the practitioner is thereafter entitled to the procedural rights afforded by the Bylaws.

3.1.8 Limitation of Prerogatives

The prerogatives set forth under each membership category are general in nature and may be subject to limitation by special conditions attached to a particular membership by other sections of these Bylaws and by the Rules.

3.1.9 Modification of Membership

On its own, upon recommendation of the Credentials Committee, or pursuant to a request by a member, the Medical Executive Committee may recommend a change in the Medical Staff category of a member consistent with the requirements of the Bylaws.

# ARTICLE 4

# ALLIED HEALTH PRACTITIONERS

## 4.1 Definitions

4.1.1 Allied Health Practitioner (AHP) means a health care professional, other than a physician, dentist, podiatrist or clinical psychologist, who holds a license, as required by California law, to provide certain professional services.

4.1.2 AHP Clinical Privileges or Service Authorization means the permission granted by the Governing Body, upon the recommendation of the Interdisciplinary Practice Committee and the Medical Staff, to provide diagnostic and therapeutic services with the scope of the AHP's training and expertise.

## 4.2 Categories of AHPs Eligible to Apply for AHP Clinical Privileges or Services

**Authorizations and Rules ~~regarding~~ ~~Regarding~~ ~~them~~**

4.2.1 The categories of AHPs, based upon occupation or profession that shall be eligible to apply for AHP Clinical Privileges shall be designated by the Governing Board, upon recommendation of the MEC. Currently, the AHPs include the following categories;

*A.* Nurse Practitioners who are registered nurses with additional training, expertise, certification and licensing that is recognized and authorized by the State of California to provide specific diagnostic and therapeutic services.

*B.* Optometrists who are licensed by the State of California to provide specific optometric services.

*C.* Midwives (Certified Nurse Midwives, Licensed Midwives, Certified Professional Midwives) who are health care providers with additional training, expertise, and certification that is recognized and authorized by the State of California, under the supervision of a licensed physician or surgeon, to attend cases of normal childbirth and to provide prenatal, intrapartum and postpartum care.

*D.* Physician Assistants who are healthcare professionals with specialized medical training from a program associated with a medical school and who are licensed by the California Physician Assistant Board to provide patient education, evaluation, and health care services under the supervision of a licensed physician.

~~*D.*~~*E.* Acupuncturists who are health care providers with training, expertise and knowledge in the practice of acupuncture who are licensed and regulated by the State of California under the Acupuncture Board.

**Commented [cb6]:** Consider revising to "Regarding AHPs" if that's accurate.

**Commented [cb7]:** Adding "who" is consistent with A, B and D

**Commented [cb8]:** Adding "who" is consistent with A, B and D

## 4.3 Eligibility and General Qualifications

An AHP is eligible for a Service Authorization in this hospital if he or she;

1) Holds a current, valid, unrestricted license, certificate, or other legal credential in a category of AHP which the Governing Body has identified as eligible to apply for Service Authorization pursuant to the Bylaws; and
2) Documents his or her experience, background, training, current competence, judgment, and ability with sufficient adequacy to demonstrate that any patient treated by the practitioner will receive care at the generally recognized professional level of quality established by the Medical Staff; and
3) Is determined, on the basis of documented references to:
   *A.* Adhere strictly to the lawful ethics of his or her profession;
   *B.* Work cooperatively with others in the hospital setting so as not to adversely affect patient care;
   *C.* Be willing to commit to and regularly assist the Medical Staff in fulfilling its obligations related to patient care; and

1) Agrees to comply with all Medical Staff and Department and Division Bylaws, Rules and Regulations and protocols to the extent applicable to the AHP;
2) Documents his or her current eligibility to participate in Medicare, Medicaid or other federally-sponsored health care program.

### 4.4 Specific Qualifications

In addition to meeting the basic standards as outlined in "Eligibility and General Qualifications," an AHP shall have the following specific qualifications to be eligible and qualified for AHP Clinical Privileges or Service Authorization in this hospital;

No record of conviction of Medicare, Medicaid, or insurance fraud and abuse, payment of civil money penalties for same, or exclusion from such programs.

No record of denial, revocation, relinquishment or termination of appointment or clinical privileges at any hospital for reasons related to professional competence or conduct.

1) Nurse Practitioners: A Nurse Practitioner shall have a current, valid, unrestricted license and furnishing number which authorizes ordering of drugs or devices if applicable to the Nurse Practitioner's practice
2) Midwives: A Midwife shall have a current, valid, unrestricted license and furnishing number which authorizes ordering of drugs or devices if applicable to the Midwife's practice.
3) Physician Assistants: A ~~PA~~ Physician's Assistant shall have a current, valid, unrestricted license and furnishing number which authorizes the Physician's Assistant~~PA~~ to provide drug and medication orders, if applicable to the Physician's Assistant's~~PA's~~ practice.
4) Optometrists: An optometrist shall have a current, valid, unrestricted license and furnishing number which authorizes ordering of drugs or devices if applicable to the Optometrist's practice.

~~4)~~5) Acupuncturists: An Acupuncturist shall have a current, valid, unrestricted license authorizing the practitioner to provide acupuncture treatment and care within the State of California.

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**Commented [cb9]:** Revision consistent with 1, 2, 4 and 5.

**Commented [cb10]:** Same as above

**Commented [cb11]:** Same as above

### 4.5 Waiver of Qualifications.

When exceptional circumstances exist certain eligibility criteria may be waived by the MEC upon recommendation by the Interdisciplinary Practice Committee or its designee the Credentials Committee. The AHP requesting the waiver bears the burden of demonstrating exceptional

circumstances and/or that his or her qualifications are equivalent to or exceed the criterion/criteria in question.

### 4.6 Prerogatives

The prerogatives, which may be extended to an AHP, include:

1) Provision of specified patient care services consistent with the Service Authorization granted to the AHP and within the scope and licensure or certification of that AHP;
2) Service on Medical Staff and Hospital committees except as otherwise provided in the Bylaws. An AHP may not serve as chair of a Medical Staff committee;
3) Attendance at meetings of the department to which he or she is assigned. An AHP may not vote at department/division meetings.

### 4.7 Responsibilities

Each AHP shall:

1) Meet those responsibilities required by the Medical Staff Rules and Regulations.
2) Retain appropriate responsibility within his or her area of professional competence for the care of each patient in the hospital for whom he or she is providing services.
3) Participate, when requested, in patient care and audit and other quality review evaluation and monitoring activities required of AHPs and other functions as may be required by the Medical Staff from time to time.

### 4.8 Procedure for Granting Initial and Renewal Services Authorizations

1) An AHP who practices under Standardized Procedures must apply and qualify for a Service Authorization. An AHP must reapply for a renewed Service Authorization every two years.
2) AHP application for initial granting and renewal of service authorization shall be submitted to the Interdisciplinary Practice Committee (IPC), which may delegate the processing of such applications to the Credentials Committee. Credentialing and Privileging is processed in a parallel manner to that provided for the Medical Staff by the Bylaws. At the discretion of the Credential Committee an initial application of reappointment may be sent to the IPC for review.
3) The Credential Committee shall, as delegated by the IPC, make recommendations to the MEC and the Governing Body regarding the granting of individual Service Authorizations to AHP applicants.
4) Upon approval by the MEC and the Governing Body, an applicant AHP shall be granted Service Authorization and assigned to the clinical department appropriate to his or her occupation and training. The AHP is subject to the relevant rules and regulations of that department.

### 4.9 Termination, Suspension, or Restriction of Service Authorizations

1) The termination, suspension or restriction of Service Authorization shall be done as if the Service Authorization was a clinical privilege rendered to a Member of the Medical Staff. The AHP shall have the same procedural rights as a Medical Staff Member would have with the termination, suspension or restriction of privileges.

ARTICLE 5

## PROCEDURES FOR APPOINTMENT AND REAAPOINTMENT

### 5.1 General

The Medical Staff shall consider each application for appointment, reappointment, and privileges, and each request for modification of Medical Staff category using the procedures and the standards set forth in the Bylaws. The Medical Staff shall evaluate each applicant before recommending action by the Governing Body. The Governing Body is ultimately responsible for granting Medical Staff membership and Clinical Privileges. Temporary Privileges may be granted to a practitioner, pursuant to these Bylaws and the Rules, prior to final action by the Governing Body. By applying to the Medical Staff for appointment or reappointment, the applicant agrees that, whether or not he or she is appointed or granted Privileges, he or she will comply with the responsibilities of Medical Staff Membership and with the Medical Staff Bylaws and Rules as they exist and as they may be modified from time to time.

### 5.2 Applicant's Burden

An applicant for appointment, reappointment, advancement, transfer, and/or Privileges shall have the burden of producing accurate and adequate information for a thorough evaluation of the applicant's qualifications and suitability for the requested status and Privileges, resolving any reasonable doubts about these matters and satisfying requests for information. To the extent consistent with law, this burden may include submission to a medical or psychological examination, at the applicant's expense, if deemed appropriate by the Medical Executive Committee (MEC.) The applicant may select the examining physician from an outside panel of three physicians chosen by the MEC.

Misstatements and Omissions: Any misstatement in, or omission from, the application~~/reapplication~~ is grounds to ~~stop~~ suspend ~~processing the~~ the application~~/reapplication~~ process. ~~Stopping the processing of the application due to misstatement(s) or omission(s) does not entitle the applicant to procedural hearing or appellate review rights.~~ The applicant will be informed in writing of the nature of the misstatement ~~of~~ or omission and permitted to provide a written response. The Chair of the ~~Credentialing~~ Credentials Committee and/or the Medical Staff President will review the response and determine whether the application should be processed further. ~~Stopping the~~The decision to suspend or cease processing ~~of the~~an application~~/reapplication~~ due to a misstatement or omission does not entitle the applicant to a procedural hearing or appellate review rights.

**Commented [cb12]:** Should this be "application" rather than "application/reapplication?" I think of it as an application, whether it is the initial application or an application for reappointment, advancement etc.

**Commented [cb13]:** Redundant (see last sentence of paragraph)

**Commented [cb14]:** This committee is referred to as "the Credentials Committee" throughout the rest of the document.

**Commented [cb15]:** Note: This paragraph is referenced at 6.d of the Summary of Proposed 2017 Changes. The revisions aren't tracked, but it looks as if the changes have been made.

### 5.3 Applicant for Initial Appointment and Reappointment for Medical Staff Membership

Applicants for appointment or reappointment must complete, sign and date the prescribed application form provided by the Medical Staff. The application shall request detailed information about the applicant and shall document the applicant's agreement to abide by the Medical Staff Bylaws, Rules, and other terms. The applicant must provide all of the requested information, the

agreements, and all supporting documentation to the Medical Staff office. An application which is incomplete will not be accepted for review. The applicant must pay the required fee, if any, at the time the application is submitted or it will not be accepted for review.

### 5.4 Basis for Appointment and Reappointment to the Medical Staff

Recommendations for appointment and reappointment to the Medical Staff and for granting and renewal of Privileges shall be based upon:

1) The applicant's or Member's professional performance at this Hospital and in other settings;
2) Whether the applicant or Member meets the qualifications and is able to carry our all of the responsibilities specified in these Bylaws and the Rules; and
3) The Hospital's patient care needs and ability to provide adequate support services and facilities for the applicant or Member.

A) Term of Appointment, Extensions, and Failure to File Reappointment Application

Except as otherwise provided in these Bylaws, initial appointments to the Medical Staff shall be until the applicants' second birthday after the initial provisional appointment. Reappointments shall be for a maximum period of two years. The ~~Credentialing~~ Credentials Committee may recommend the granting of reappointments for less than two years.

Failure to file a complete and timely application for reappointment shall result in the automatic termination of the Members' membership Privileges and prerogatives at the end of that term.

### 5.5 Application Procedure.

5.5.1 Application for Medical Staff membership must be submitted directly to the Credentials Committee by the applicant in writing and on such form as approved by the MEC. Prior to the application being submitted, the applicant will be provided access to a copy of the Medical Staff Bylaws, the Rules and Regulations of the Staff and its Departments and Divisions, and summaries of the policies and resolutions relating to clinical practice in the Hospital and Health Centers. An applicant who does not meet the basic qualifications or requirements as outlined in these Bylaws, related rules or policies, is not eligible or qualified to apply for Medical Staff membership and the application shall not be accepted for review. If, during any stage of the application process, it is discovered that the applicant does not meet the basic qualifications or requirements as outlined in these Bylaws, related rules or policies, review of the application shall be discontinued.

An applicant who does not meet the basic qualifications or requirements ~~in~~ is not entitled to procedural hearing and appellate review rights.

5.5.2 Application Content

Every applicant, except Resident staff applicants, must furnish a complete application providing all supporting documentation and an accurate and complete response to each query including but not limited to the following:

1) The applicant's undergraduate, medical school, and postgraduate training, including the name of each institution, degrees granted program completed, and dates attended;
2) All currently valid medical, dental, podiatric and other professional licensures or certifications, and Drug Enforcement Administration registration (with exceptions determined by Credentials Committee action when the applicant will not be prescribing medication) and any other controlled substances registration, with the date and number of each;
3) Specialty or sub-specialty board certifications and/or recertification;
4) Health impairments (including alcohol and drug dependencies), hospitalizations, and institutionalizations, if any, which may affect the applicant's ability in terms of skill, attitude and judgment to perform professional and Medical Staff duties;
5) Applicant's statement that his or her health status is such that he or she has the ability to perform the privileges requested;
6) Applicant's statement that he or she will consent to and cooperate with any required physical or mental health evaluations and provide the results from the evaluations to enable a full assessment of the applicant's fitness, as described in Section 5.2, 'Applicant's Burden';
7) Evidence of applicant's current Professional Liability Insurance coverage, or if not currently insured, evidence of past Professional Liability Coverage;
8) Whether there are any pending or completed actions involving denial, revocation, suspension, reduction, limitation, probation, non-renewal or voluntary relinquishment (by resignation or expiration) of the applicant's license or certificate to practice any profession in any state or country; Drug Enforcement Administration or other controlled substances registration; membership of fellowship in local, state or national professional organizations; or faculty membership at any medical or other professional school;
9) The location of offices, names and addresses of other practitioners with whom the applicant is associated and inclusive dates of such association; names and locations of any other hospital, clinic or health care institution where the applicant provides or provided clinical services with the inclusive dates of each affiliation, status held, and general scope of clinical privileges, for the last five years;
10) Requests for department assignment(s), staff category after conclusion of provisional status, and specific Clinical Privileges;
11) Whether the applicant has ever been charged with or convicted of a crime, other than minor traffic violations, or whether a criminal action is now pending;
12) Whether there are any pending or completed actions involving denial, revocation, suspension, reduction, limitation, probation, non-renewal or voluntary relinquishment (by resignation or expiration) of Medical Staff membership, or privileges at another hospital, clinic or health care facility of institution;

13) References as required below;
14) An acknowledgement that the applicant has read the Medical Staff Bylaws of the Contra Costa Regional Medical Center and Health Centers, that he/she understands said Bylaws, and that he/she agrees to be bound by the terms thereof, as they may be amended from time to time, if he/she is granted membership or Clinical Privileges, and to be bound by the terms thereof, without regard to whether or not he/she is granted membership and/or clinical privileges in all matters relating to consideration of this application;
15) Any and all continuing medical education classes attended by applicant in the last twenty-four (24) months;
16) Whether the applicant has had any notification of, or involvement in, a professional liability action, the applicant's complete malpractice claims history, including all information regarding lawsuits, or settlements made, concluded and pending;
17) Whether the applicant has been excluded from federal health care program in the past, or is subject to a pending or current exclusion from a federal health care program;
18) The applicant's consent to the release and inspection of all records and documents as may be necessary for a thorough evaluation of the applicant's professional qualifications, background and health status;
19) The applicant's consent to provide release and a release from liability for all individuals requesting and all individuals providing information related to the applicant's professional qualifications, background, or health, or evaluating and making judgments regarding the applicant's professionalism qualifications, background, or health;
20) A valid photo identification issued by a state federal agency;

Applicants to the Resident Staff must furnish the information and/or documentation listed in (1), (2), (5), (6), (8), (11), (12), (14), (18), (19) and (20) above, and may do so by submitting their residency application form, updated as necessary to include these required items, in lieu of submitting the standard application form described herein.

Furthermore, each applicant will be assessed an application fee as determined by policies set forth by the Medical Executive Committee. The application will not be processed without receipt of this fee.

5.5.3 References

The applicant must include the names of at least three (3) professionals currently licensed and practicing in the same discipline as the applicant, not currently or about to become corporate or business partners with the applicant in professional practice or personally related to him, who have personal knowledge of the applicant's current clinical ability, competence, ethical character, health status and ability to work cooperatively with others and who will provide specific written comments on these matters, and letters of recommendation for staff membership.

The named individuals must have acquired the requisite knowledge through recent observation of the applicant's professional performance over a reasonable period of time and at least one must have had organizational responsibility for supervision of his/her performance (e.g., Department Chairperson, Service Chief, Training Program Director). The applicant is responsible for submitting three (3) letters of recommendation from the named professional references to the Credentials Committee Chairperson.

At the discretion of the Credentials Committee, the requirement of receipt of all three letters of reference may be reduced to two (2).

5.5.4 Effect of Application

The applicant must sign the application and in so doing:

1) Attests to the correctness and completeness of all information furnished and acknowledges that any significant misstatement in or omission from the application constitutes grounds for denial of appointment or revocation of Medical Staff membership;
2) Signifies his/her willingness to appear for interviews in connection with his/her application;
3) Agrees to abide by the terms of the Bylaws, Rules, and policies and procedures manuals of the Medical Staff if granted membership and/or Clinical Privileges, and to abide by the terms thereof in all matters relating to consideration of the application without regard to whether membership and/or privileges are granted;
4) Agrees to maintain an ethical practice and to provide continuous care to his or her patients;
5) Agrees to keep Medical Staff representatives up to date on any change made or proposed in the status of his/her professional license to practice, DEA or other controlled substances registration, malpractice insurance coverage, and membership or clinical privileges at other institutions;
6) Authorizes and consents to Medical Staff representative consulting with prior associates or others who may have information bearing on professional or ethical qualifications and competence and consents to Medical Staff representatives inspecting all records

and documents that may be material to evaluation of said qualifications and competence;

7) Releases from any liability all those who, in good faith and without malice, review, act upon or provide information regarding the applicant's competence, professional ethics, utilization practice patterns, character, health status, and other qualifications for staff appointment and clinical privileges.

5.5.5 Processing the Application

1) Verification of Information

After the application is submitted to the Credentials Committee Coordinator, the Credentials Committee Coordinator shall seek to verify the references, licensure status, and other qualification evidence submitted in support of the application, and to obtain the supporting information relevant to the application. The Coordinator shall verify in writing and from the primary source whenever feasible. The Credentials Committee Coordinator shall also query the National Practitioner Databank, and shall promptly notify the applicant of any problems in obtaining any of the information required. Upon such notification, it shall be the applicant's obligation to obtain the required information.

Verification shall include sending a copy of the list of Clinical Privileges requested by the applicant to at least his/her most recent affiliations and a request for specific information regarding his/her competence in exercising those privileges.

When the application is complete as defined in subsection (b), the Credentials Committee Coordinator transmits the application and all supporting materials to the Head of each Department in which the applicant seeks Privileges.

2) Definition of Completed Application

A completed application shall consist of all pertinent material including receipt in the Medical Staff office of all correspondence from references and other medical staffs as required.

3) Incomplete Applications

Incomplete applications will not be accepted for review. In addition to applications which are incomplete as described by Section 5.3, 'Application for Initial Appointment and Reappointment for Medical Staff Membership', applications may be deemed incomplete as follows.

If the MEC, the Medical Staff office, or Credentials Committee, Administrator or Governing Body review the application requests additional information, documentation, or clarification from the applicant, and/or an interview with the applicant, the applicant

will be promptly notified and the application process will be suspended, and the application shall be deemed incomplete, until the requested information, documentation, or clarification has been provided and/or the requested interview has been conducted. No application shall be considered complete until it has been reviewed by the Department Head or designee for each department for which the applicant seeks privileges, the Credentials Committee or designee and the Medical Executive Committee, and all have determined that no further documentation or information is required to permit consideration of the application.

The Medical Staff shall promptly inform the applicant of the specific request(s) made, the time period within which the applicant must satisfy the request and the effect on the application process if the request is not satisfied within that time period.

4) Department Evaluations

The Head of each Department in which the applicant seeks privileges reviews the application and its supporting documentation and forwards to the Credentials Committee a written report as required evaluating the evidence of the applicant's training, experience and demonstrated ability and stating how the applicant's skills are expected to contribute to the activities of the Department.

The Department Head or his/her designee shall conduct an interview with the applicant. If a Department Head requires further information, he/she may defer transmitting his/her report, but overall the combined deferral time generally should not exceed thirty (30) days. In case of a deferral, the Department Head must notify the Chairperson of the Credentials Committee in writing of the deferral and the grounds. If the applicant is to provide additional information or a specific release/authorization to allow Medical Staff's representative to obtain information, the notice to him/her must so state, must be a special notice, and must include a request for the specific data/explanation or release/authorization required and the time frame for response. Failure, without good cause, to respond in a satisfactory manner by that date is deemed a voluntary withdrawal of the application.

5) Credentials Committee Evaluation

The Chairperson of the Credentials Committee or a designated committee member may conduct an interview with the applicant. Following the interview, the Credentials Committee reviews the application, the supporting documentation, the reports from the Department Heads, and any other relevant information available to it. The Credentials Committee then transmits to the Medical Executive Committee (MEC) its written report and recommendations as required. If the Credentials Committee requires further information, it may defer transmitting its report, but generally for not more than thirty (30) days. If the applicant is to provide the additional information or specific release/authorization to allow Medical Staff representatives to obtain information, the

notice to him/her must so state, must be a special notice, and must include a request for the specific data/explanation or release/authorization required and the time frame for response. Failure~~, without good cause,~~ to respond in a satisfactory manner, i.e. provide the requested information -by the date specified is deemed a voluntary withdrawal of the application.

**Commented [cb16]:** Not sure whether it was inadvertent, but the new language inserted here was in the Summary of Proposed 2017 Changes, but wasn't added.

The Credential Committee's written report, as required, is transmitted with all supporting documentation to the MEC.

6) The MEC, at its next regular meeting after receiving the Credentials Committee recommendation, reviews the application, the supporting documentation, the reports and recommendations from the Department Heads and Credentials Committee, and any other relevant information available to it. The MEC is responsible for determining staff status. The MEC defers action on the application, or prepares a written report with recommendations as required.
7) Effect of Medical Executive Committee Action
   *A.* Deferral. Action by the MEC to defer the application for further consideration must, except for good cause, be followed up within forty-five (45) days with its report and recommendations. The Medical Staff President promptly sends the applicant a special notice of an action to defer, including a request for the specific data/explanation or release/authorization, if any, required from the applicant and the time frame for response. Failure, without good cause, to respond in a satisfactory manner by that date is deemed voluntary withdrawal of the application.
   *B.* Favorable Recommendation. When the MEC's recommendation is favorable to the applicant in all respects, the Medical Staff President promptly forwards it, together with all supporting documentation, to the Administrator. All supporting documentation means the application form and its accompanying information, the reports and recommendations of the Division and Department Heads, Credentials Committee and MEC, and dissenting views.
   *C.* Adverse Recommendation. When the MEC's recommendation is adverse to the applicant, the Medical Staff President promptly forwards it, together with all supporting documentation, to the Administrator, and the Administrator immediately informs the applicant by special notice, and the applicant is entitled to the procedural rights provided in the Bylaws.
8) Administrator Action
   *A.* On MEC recommendation the Administrator may adopt or reject, in whole or in part, a favorable recommendation or refer the recommendation back to the MEC for further consideration stating the reasons for such referral and setting a time limit within which a subsequent recommendation must be made to the Administrator.
   *B.* If the Administrator's action is favorable to the applicant, this action is forwarded to the Governing Body for final approval. If the Administrator's action, after complying

with the applicable requirements, is adverse to the applicant in any respect, the Administrator promptly informs the applicant by special notice, and the applicant is then entitled to the procedural rights provided in the Bylaws.

*C.* If the Governing Body, upon receiving a report from the Administrator for favorable action, disagrees with the Administrator, it must comply with the requirements below concerning Conflict Resolution. If, after such compliance, the decision is adverse to the applicant in any respect, the Administrator shall promptly inform the applicant by mailing a special notice to the applicant. The applicant is then entitled to the procedural rights provided in the Bylaws and the applicant shall be so informed by the special notice.

9) Content of Reports and Bases for Recommendations and Actions. The report of each individual or group, including the Administrator, required to act on an application must include recommendations as to approval or denial of, and any special limitations on, staff appointment, category of staff membership and prerogatives, Department affiliation(s) and scope of Clinical Privileges.

10) Conflict Resolution. Whenever the Administrator or Governing Body disagrees with the recommendation of the MEC, the matter will be submitted for review and recommendation to a joint conference composed of two members each from the Medical Staff and the Governing Body, appointed by the President of the Medical Staff and the Chairperson of the Governing Body, respectively, before the Governing Body makes its decision.

11) Notice of Final Decision

*A.* The Administrator shall mail notice of the Governing Body's final decision to the applicant, with copies to the Medical Staff President and the applicable Department Head(s).

*B.* A decision and notice to appoint included:

1) The Staff category to which the applicant is appointed;
2) The Department(s) to which he/she is assigned;
3) The Clinical Privileges he/she may exercise; and
4) Any special conditions attached to the appointment.

12) Time Periods for Processing

Individual/Group

*A.* Applicant. One hundred and twenty(120) days.

1) If the fully completed application is not received by the Medical Staff Office as defined, within One hundred and twenty(120) days, the application will be returned and reapplication will not be allowed for a period of ninety (90) days and any temporary privileges granted are immediately terminated.

*B.* Credentials Committee Coordinator. Thirty (30) days.

*C.* Department Heads. Thirty (30) days after receiving material from Credentials Committee Coordinator.

*D.* Credentials Committee. Thirty (30) days after receiving reports from the Credentials Committee Coordinator and Department Head.

*E.* Medical Executive Committee. At the next regular meeting after receiving report from the Credentials Committee.

*F.* Administrator. Fifteen (15) days after receiving report from the Medical Executive Committee.

*G.* Governing Board. At the next regular meeting after receiving report from the Administrator.

*H.* The time periods set forth are guidelines, not directives, and do not create any rights in any application to have his or her application processed within a specific time frame~~the time periods provided~~.

In the event that an applicant is not offered or does not accept an offer for employment (permanent, temporary or contract) at CCRMC and Health Centers, the application will be deemed withdrawn.

5.5.6 Staff Category upon Appointment

Except for applicants to the Resident Staff, all appointments to the Staff shall be to the Provisional Staff. After successful completion of the provisional term, as defined, the Medical Executive Committee, after recommendation from the Credentials Committee, shall assign the appropriate staff category.

## 5.6 Reappointment and Requests for Modifications of Staff Status or Privileges

Applications for reappointment are due one hundred and fifty (150) days prior to the expiration of a Member's term. Applications that are not complete at ninety (90) days prior to the expiration of a term are not processed and the membership automatically expires at the end of the term. Applications completed between one hundred and fifty (150) and ninety (90) days from the end of a term are charged a late fee as noted in the Rules.

At least one hundred and eighty (180) days prior to the expiration date of the current staff appointment (except for temporary appointments), a reappointment form developed by the Medical Executive Committee shall be mailed or delivered to the Member. The completed application form and Medical Staff dues are due one hundred and fifty (150) days prior to the expiration date. The department Chair will be notified if the member is delinquent. Each Medical Staff Member shall submit to the Credentials Committee the completed application form for renewal of appointment to the staff and for renewal or modification of clinical privileges. The reapplication form shall include all information necessary to update and evaluate the qualifications of the applicant including, but not limited to, the matters set forth in these Bylaws as well as other relevant matters.

The results of performance monitoring, evaluation, and identified opportunities to improve care and service are printed and included in the reappointment file. Ongoing Professional Practice Evaluation (OPPE) data are collected and provided as evidence of the practitioner's current competence. A reappointment may be deferred if more information is needed.

Upon receipt of the application, the information shall be processed as set forth commencing at Section 5.4. In addition, the Department Head will review the applicants' QA profile if there is one.

A Medical Staff Member who seeks a modification of Clinical Privileges may submit such a request at any time upon a form developed by the Medical Executive Committee, except that such application may not be filed within one year of the time similar request has been denied.

5.6.1 Effect of Application

The effect of an application for reappointment or modification of staff status or privileges is the same as that set forth in Section 5.5.

5.6.2 Standards and Procedures for Review

When a staff Member submits an application for reappointment, or when the Member submits an application for modification of staff status or Clinical Privileges, the Member shall be subject to an in-depth review generally following the procedures set forth in Section 5.5.

## 5.7 Leave of Absence from the Medical Staff

A Member may request a leave of absence not to exceed two (2) years. No leave is effective unless and until approved by the Medical Executive Committee. At the end of the leave the Member must apply for reinstatement. The Member must provide information regarding his or her relevant activities during the leave of absence if the MEC so requests. During the period of leave, the Member shall not exercise Privileges at the Hospital, and membership rights and responsibilities shall be inactive. The obligation to pay dues, if any, shall continue during the leave unless waived by the Medical Executive Committee.

5.7.1 Reinstatement after a Leave

Failure, without good cause, to request reinstatement of Membership at least thirty (30) days prior to the end of an approved leave shall be deemed voluntary resignation from the Medical Staff. The MEC shall make recommendations concerning reinstatement of the Member's Membership and Privileges to the Governing Body for final action.

## 5.8 Waiting Period after Adverse Action

An applicant, Member, or prior Member is not eligible for Membership in the Medical Staff and/or granting of Privileges for twenty-four (24) months after an adverse action regarding his or her Membership or Privileges.

5.8.1 An Adverse Action occurs when any of the following occur:

*A.* A final adverse decision regarding appointment or privileges is made by the Governing Body, or an applicant withdraws his or her application or request for Privileges following an adverse recommendation by the Medical Executive Committee to the Governing Body.

*B.* A final adverse decision resulting in termination of a Member's membership or Privileges is made by the Governing Body, or if the Member resigns Membership or relinquishes Privileges while an investigation and resolution is pending concerning her/his membership and/or relevant Privileges.,

*C.* A final adverse decision resulting in termination or restriction of Privileges or denial of a request for additional Privileges is made by the Governing Body

5.8.2 The Medical Staff may, as part of an adverse action, waive the twenty-four (24) month ineligibility period or limit it in some way including but not limited to require proctoring or supervision.

5.8.3 An action is considered final on the date the application was withdrawn, a Member's resignation became effective, or upon completion of all hearings and appellate reviews described in the Bylaws pertinent to the action. After an ineligibility period, the individual may reapply for Membership or re-request Privileges. The application will be treated as an initial application or request, except that the individual must document to the satisfaction of the Medical Staff that the basis for the adverse action no longer exists and that sufficient measures have been taken to assure that it will not occur again. With regard to the subject of the adverse action, the Medical Staff may impose more stringent conditions and requirements for evaluation, documentation, and monitoring than it might in an application de novo or it may deny the request outright.

### 5.9 Confidentiality and Impartiality

To maintain confidentiality and to assure the unbiased performance of appointment and reappointment functions, participants in the credentialing process shall limit their discussion of the matters involved to the formal avenues provided in the Bylaws for processing applications and for appointment and reappointment.

## ARTICLE 6

## PRIVILEGES

### 6.1 Exercise of Privileges

Except as otherwise provided in these Bylaws, every Member providing direct clinical services at this Hospital shall be entitled to exercise only those Privileges specifically granted to him or her. Clinical privileges may be granted, continued, modified, or terminated by the Governing Body only upon the recommendation of the Medical Staff as outlined in these Bylaws.

## 6.2 Delineation of Privileges in General

6.2.1 Requests

*A.* Each applicant for appointment and reappointment to the Medical Staff must contain a request for the specific Privileges desired by the applicant. A request for modification of Privileges must be supported by documentation of training and/or experience supportive of the request. A Member may make requests for modifications of Privileges at any time.

*B.* Each department is responsible for developing written criteria for granting Privileges. These criteria take effect only after approval by the Medical Executive Committee (MEC.)

6.2.2 Basis for Privilege Determinations

Requests for Privileges shall be evaluated upon the basis of the Member's education, training, experience, demonstrated professional competence and judgment, clinical performances, and the documented results of patient care. Privilege determinations shall also be based upon pertinent information concerning clinic performance obtained from other sources, especially other institutions and health care setting where an individual exercises Privileges.

6.2.3 Privileges for Department Heads

Privileges for Department Heads will be acted upon by the Medical Staff President. If a Department Head is also the Medical Staff President, privileges will be acted upon by the Past President. In no event will a Department Head approve his/her own privileges.

6.2.4 Admissions

Dentists, oral surgeons, podiatrists and clinical psychologist Members are non-Physician members. They may admit patients only if a Physician Member assumes responsibility for the care of the Patient's medical problems during the hospitalization. These non-physician members may participate in the patient's care to the extent allowed by the responsible Physician Member and the Medical Staff Bylaws and Rules.

6.2.5 Medical Appraisal

A Physician Practitioner shall provide ongoing medical evaluation of all patients receiving some care from a non-physician Member. The Physician shall also provide appropriate supervision and control of the patient care provided by the non-physician Member.

## 6.3 Non-licensed Resident Physicians

By virtue of their enrollment in an accredited training program, non-licensed Residents hold Privileges to admit patients and provide services as assigned under the supervision of the various

Department Chairpersons and the Residency Director. A Physician Member who has Privileges for the patient care being rendered must supervise non-licensed Residents.

## 6.4 Temporary Privileges

6.4.1 Circumstances

The Administrator (or his/her designee), with the written concurrence of the Medical Staff President and the Chairperson of the Department where the Privileges will be exercised, may grant temporary Privileges to a practitioner subject to the following conditions:

*A.* Pendency of Application:

After receipt of a completed application for appointment or reappointment (see Section 5.4, including a request for specific Privileges for an initial period of sixty (60) days while the application is being processed. If the processing of the completed application by the Medical Staff requires more than sixty (60) days, the temporary Privilege may be extended for up to an additional sixty (60) days at the discretion of the Medical Staff President or his/her designee. Temporary Privileges shall automatically terminate at the end of a maximum of one hundred and twenty (120) days, unless earlier terminated in accordance with the Bylaws.

*B.* Important Patient Care, Treatment and Service Need.

After receipt of an application for appointment or reappointment, including a request for specific Privileges, an applicant may be granted temporary privileges for the purposes of important patient care, treatment or service need, for an initial period of sixty (60) days while the application is being processed. The Medical Staff must be able to verify the applicant's current licensure and competence, or temporary Privileges are denied. The National Provider Data Bank will be queried. If the processing of the application by the Medical staff requires more than sixty (60) days, the temporary Privileges may be extended for up to an additional one hundred and twenty (120)days at the discretion of the Medical Staff President or his/her designee. Temporary Privileges shall automatically terminate at the end of a maximum of one hundred and eighty (180)days, unless earlier terminated in accordance with the Medical Staff Bylaws.

6.4.2 Conditions

Temporary Privileges may be granted only after the practitioner has submitted a written application for appointment and a request for temporary Privileges and the information available reasonably supports a favorable determination regarding the requesting practitioner's licensure, qualifications, ability, and judgment to exercise the Privileges requested, and only after the practitioner has satisfied the requirement regarding professional liability insurance. The chairperson of the department to which the

practitioner is assigned shall be responsible for supervising the performance of the practitioner granted temporary Privileges, or for designating a department member who shall assume this responsibility. That Chairperson may impose special requirements of consultation and reporting. Before temporary Privileges are granted, the practitioner must acknowledge in writing that he/she has received a copy of the Bylaws and Rules and that he/she agrees to be bound by the terms thereof in all matters relating to his/her temporary Privileges.

6.4.3 Termination

The Administrator or the President of the Medical Staff may terminate any or all of a practitioner's temporary Privileges:

*A.* Upon discovery of any information or the occurrence of any event of a nature which raises question about a practitioner's professional qualifications or ability to exercise any or all of the temporary Privileges granted by the Administrator or President of the Medical Staff;

*B.* If the life or well-being of a patient is endangered in the opinion of the grantor of the temporary Privilege;

*C.* In addition, any person entitled under these Bylaws to impose summary suspensions may terminate temporary Privileges if the well-being of a patient is endangered or thought to be endangered by the person termination the temporary Privilege. Any such termination shall be reviewed at the next scheduled meeting of the Medical Executive Committee. In the event of any such termination, the Department will assign the practitioner's patients then in the Hospital to another practitioner(s) or Division Head responsible for supervision. The wishes of the patient will be considered, where feasible, in choosing a substitute practitioner.

6.4.4 Rights of the Practitioner

A practitioner shall not be entitled to the procedural rights afforded by these Bylaws merely because his/her request for temporary Privileges is denied. However, if all or any portion of his/her temporary Privileges are terminated or suspended, the practitioner shall be entitled to those procedural rights.

## 6.5 Emergency Privileges

In the event of an emergency, any Member of the Medical Staff is permitted to do everything reasonably possible to save the life of a patient or to save a patient from serious harm. The Member shall promptly enlist assistance from and yield patient care to a qualified Member as soon as one becomes available.

## 6.6 ~~Initial~~ Focused Professional Practice Evaluation (FPPE)

Commented [cb17]: "Initial" was added. Table of Contents needs to be revised accordingly.

*A.* General Requirements

All initial appointments to the Medical Staff and all Members granted new Privileges shall be subject to Focused Professional Practice Evaluation (FPPE). Information used for evaluation may be obtained through, but is not limited to the following:

1) Concurrent or targeted medical record review.
2) Direct observation.
3) Monitoring/proctoring of diagnostic, procedural, and/or treatment techniques.
4) Discussion with other practitioners involved in the care of specific patients.
5) Interviews with the physician involved in the patient's care.
6) Sentinel event data.
7) Any applicable peer review data.
8) Review of data from other institutions with applicant/member's permission.

B. Each appointee or recipient of new Clinical Privileges shall be assigned to a department (or departments) where performance on an appropriate number of cases as established by the Medical Executive Committee shall be observed by the chair of the department or the chair's designee, to determine suitability to continue to exercise the Clinical Privileges granted in that department.

C. The Member shall remain subject to FPPE until the Credentials Committee has been furnished with a report signed by the chair of the department(s) to which the member is assigned describing the types and numbers of cases observed and the evaluation of the applicant's performance, a statement that the applicant appears to meet all of the qualifications for unsupervised practice in that department.

D. FPPE may be implemented whenever the Medical Executive Committee or its designee determines that additional information is needed to assess a Member's performance.

E. FPPE is not an adverse action or a disciplinary measure. It is a means of gathering information regarding a Members' skills. Therefore, the requirements of proctoring does not itself give rise to the hearing rights triggered by an adverse action.

F. During FPPE, the Member must demonstrate the requisite competence required to exercise the Clinical Privileges.

### 6.6.1 Completion of FPPE

FPPE shall be deemed successfully completed when the Credentials Committee has received sufficient information about the applicant's competency.

6.6.2 Requirements to Provide FPPE

Members of the Medical Staff shall serve in a manner consistent with FPPE requirements. Refusal to serve in this capacity, without good cause, as determined by the Medical Executive Committee, is grounds for corrective action.

6.6.3 Failure to Complete FPPE

A Member who fails to complete the required initial FPPE within one year shall be deemed to have voluntarily withdrawn his or her request for those Privileges. The Credentials Committee or the Medical Executive Committee may extend the time for completion of FPPE in appropriate cases. If a Member completes the necessary FPPE but fails to perform competently he or she may have the relevant Privileges revoked or involuntarily modified in order to assure quality patient care. Failure to successfully complete proctoring may, in certain situations, be adequate grounds for revocation, suspension, or other involuntary modification of membership and/or privileges. Such actions regarding Privileges and Membership qualify as adverse actions entitling the practitioner to appropriate procedural hearings.

## 6.7 Disaster Privileges

In the event of a disaster of sufficient magnitude to require use of resources beyond those available to the Hospital and Medical Staff, privileges may be granted to volunteers on an emergent basis to handle immediate patient care needs.

6.7.1 Declaration of Disaster

The Hospital disaster plan must be implemented prior to consideration of grating disaster Privileges.

6.7.2 Individuals Responsible for Granting Disaster Privileges

The Medical Staff President or his/her designee, or the Administrator or his/her designee(s) are responsible for granting disaster Privileges. Under the disaster plan, and in the absence of the above persons or designees, the incident commander, or his/her designee(s), is the individual responsible for granting disaster Privileges until the above person or designees are present to carry out the function of granting Disaster Privileges.

*A.* Responsibilities of Individuals Granting Disaster Privileges.

Disaster Privileges may be granted on a case-by-case basis, and the responsible individual, at his or her discretion, is not required to grant Privileges to any individual.

6.7.3 Identification Requirements for Disaster Privileges

Disaster Privileges may be granted upon the presentation of a valid photo identification issued by a state or federal agency, and at least one of the following items;

*A.* A current hospital ID card that clearly identifies professional designation.
*B.* A current license to practice and a valid photo ID issued by a state or primary source verification of the license.
*C.* Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT) or MRC, ESAR-VHP, or other recognized state or federal organization or group.
*D.* Identification indicating that the individual has been granted authority to render patient care, treatment, and services in disaster circumstances (such authority having been granted by a federal, state, or municipal entity.)
*E.* Verification of identity and qualifications by current Hospital or Medical Staff Member(s) with personal knowledge of the practitioner's identity and qualifications.

6.7.4 Disaster Identification

Practitioners granted disaster Privileges shall be identifiable to other staff by the wearing of a Disaster Identification Badge.

6.7.5 Management of Persons Granted Disaster Privileges

Persons granted disaster Privileges will be assigned duties either by the grating authorities as defined in Section 6.6.2, 'Individuals Responsible for Granting Disaster Privileges,' or assigned to a specific department, by the Department Chair or his/her designee. In the absence of these persons, the incident commander may assign duties or delegate this responsibility to person(s), identified in the disaster plan, who are responsible for designation of duties.

The Medical Staff oversees the professional practice of volunteer licensed independent practitioners by direct observation and clinical record review.

Disaster Privileges are automatically terminated when the disaster plan is deactivated. Disaster Privileges may be revoked at any time or for any reason by the Medical Staff President, Administrator, Department Chair, or their designee(s).

The Hospital must make a decision (based on information obtained regarding the professional practice of the volunteer) within seventy-two (72) hours related to the continuation of disaster Privileges initially granted.

6.7.6 Verification Process

Verification:

Primary source verification of licensure begins as soon as the immediate situation is under control and is usually completed within seventy-two (72) hours from the time the volunteer practitioner presents to the organization. In extraordinary circumstances, when primary

source verification cannot be completed in seventy-two (72) hours, there must be documentation of the following:

- Why the Primary source verification could not be performed;
- Evidence of demonstrated ability to continue to provide adequate care, treatment and services.

Primary source verification must still be done as soon as possible.

# ARTICLE 7

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## GENERAL MEDICAL STAFF OFFICERS

### 7.1 Identification

The general officers of the Medical Staff are the President, the President-Elect, and the Past President.

### 7.2 Qualifications

Each general officer must:

7.2.1 Be a member of the Active Staff at the time of nomination and election and remain a Member in good standing during his/her term of office;

7.2.2 Be licensed as a physician and surgeon.

7.2.3 Willingly and faithfully discharge the duties of the office; and

7.2.4 Exercise the authority of the office held, working with the other general and Department officers of the Medical Staff.

### 7.3 Attainment of Office

7.3.1 The election for the office of President-Elect shall take place in January of odd-numbered years. The person who receives the majority of the votes cast is the President-Elect and shall immediately assume the office. On July 1 of that same year, the President-elect shall assume the office of the President.

7.3.2 Term of Office

The President shall serve a two-year term, and may serve a maximum of four consecutive terms. If nonconsecutive, the number of terms a President may serve is not subject to limit. At the conclusion of the President's term(s) of office, the President shall assume the office of Past-President.

7.3.3 Should the incumbent President be reelected, the office of President-Elect shall remain vacant until the next January election for President.

7.3.4 Nomination

The MEC shall nominate qualified candidates for the office of President-Elect. Each nominee must be an M.D. or a D.O. Nominations may also be made from the floor at the October quarterly meeting by a Member of the Active Staff in good standing. Any such floor nomination must be seconded by a Member of the Active Staff in good standing and accompanied by evidence of the nominee's willingness to be nominated.

7.3.5 Election

The President-Elect is chosen from among the nominated candidates by election as defined in these Bylaws. Candidates for Medical Staff President-Elect may submit a written statement not to exceed two pages to the Medical Staff Office no later than close of business on December 3rd. On or before December 7th, the Medical Staff Office shall mail to all active Members of the Medical Staff a list of the candidates for Medical Staff President-Elect, accompanied by the candidates' statements, if any. Approximately thirty (30) days, but no less than twenty-five (25) days, before the January meeting of the Medical Executive Committee, the Medical Staff Office shall mail ballots to all active Members of the Medical Staff.

7.3.6 In order for a ballot to be counted, it must be returned to the Medical Staff Office no later than close of business on the 11th day before the January meeting of the Medical Executive Committee. The Medical Staff President and at least one other member of the MEC shall count the ballots, unless the Medical Staff President is a candidate. In that event, the MEC shall designate a second member of the MEC to count ballots. As soon thereafter as possible, the MEC shall notify all candidates of the election results. Thereafter, but at least seven (7) calendar days before the January meeting of the MEC, the MEC shall post, or otherwise disclose the election results to the Medical Staff.

## 7.4 Vacancies

~~7.4 Vacancies~~

7.4.1. ~~Since the election for the office of President-Elect takes place in January of odd-numbered years, i~~If the office of the President becomes vacant after ~~that~~an election but before the end of the current President's term, the President-Elect will assume office to fill that vacancy and will serve the remainder of the current President's term and his/her own full term as President. If the office of the President becomes vacant while the election is underway, the Past President will serve as Acting President until the results of that election are determined. Once those results are determined, the President-Elect will assume office and will serve the remainder of the current President's term and his/her own full term as President. At any other times, if the office of the President becomes vacant, the Past President will serve as Acting President pending the outcome of a special election for the office of President to be conducted as expeditiously as possible and generally in the same manner as provided in this Article. The MEC may determine, however, not to call a special election if a regular election for the office is to be held within ninety (90) days. The winner of a special election will serve only the remainder of the current President's term.

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~~7.4.1 A vacancy in the office of President is filled by succession of the President-Elect who serves the remainder of the unexpired term and his/her own full term as President. If the office of President-Elect is vacant, the Past President serves as the Acting President pending the outcome of a special election for the office of President to be conducted as expeditiously as possible and generally in the same manner as provided in this Article. The MEC may determine, however, not to call a special election if a regular election for the office is to be held within ninety (90) days.~~

7.4.2 In the event of a vacancy in the office of Past President, the MEC shall appoint a Member of the MEC to serve out the remainder of the vacated term.

~~7.4.3 Vacancy in the office of President-Elect shall be filled by the appointment of an acting officer by the Medical Executive Committee. The acting officer serves pending the outcome of a special election to be conducted as expeditiously as possible and generally in the same manner as provided in this Article.~~

## 7.5 Resignation and Removal from ~~office~~Office

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7.5.1 Resignation

Any general Medical Staff officer may resign at any time by giving written notice to the Medical Executive Committee. Such resignation, which may or may not be made contingent upon formal acceptance, takes effect on the date specified in the resignation or, if no date is specified, on the date of receipt.

7.5.2 Removal

*A.* Authority and Mechanism:
1) Removal of a general staff officer may be effected by two-thirds majority vote by secret ballot of the members of the Active Staff in good standing.

*B.* Grounds:
1) Permissible grounds for removal of a general staff officer include, without limitation;

*C.* Failure to perform the duties of the position held in a timely and appropriate manner;

*D.* Failure to continuously meet the qualifications for the position;

*E.* Physical or mental infirmity that renders the office incapable of fulfilling the duties of his/her office.

## 7.6 Duties of General Staff Officers

7.6.1 Medical Staff President

The Medical Staff President shall serve as the Chief Office of the Medical Staff. The duties of the Medical Staff President shall include, but are not limited to:

*A.* Enforcing the Bylaws and Rules, implementing sanctions where indicated, and enforcing procedural safeguards where corrective action has been requested or initiated;

*B.* Calling, presiding at, and being responsible for the agenda of all meetings of the Medical Staff;

*C.* Serving as the chair of the Medical Executive Committee;

*D.* Serving as an ex-officio member of all other Medical Staff Committees;

*E.* Interacting with the Administrator and the Governing Body in all matters concerning the Hospital;

*F.* Appointing, in consultation with the Medical Executive Committee, committee members for all standing and special medical Staff, liaison, and multi-disciplinary committees, except where otherwise provided by these Bylaws and, except where otherwise indicated, designating the chairpersons of these committees;

*G.* Representing the views and policies of the Medical Staff to the Governing Body and to the Administrator;

*H.* Being a spokesperson for the Medical Staff in external professional and public relations;

*I.* Performing such other duties as may be required by the Bylaws, the Medical Staff, or by the Medical Executive Committee;

*J.* Serving as an ex-officio member on liaison committees with the Governing Body and Administration and with outside licensing and accreditation agencies.

7.6.2 President-Elect

The President-Elect shall assume all duties and authority of the Medical Staff President in the absence of the Medical Staff President. The President-Elect shall also be a member of the Medical Executive Committee and an ex-officio member of the Joint Conference Committee. The President-Elect shall perform such other duties as the Medical Staff President may assign or delegate to the President-Elect.

7.6.3 Past President

The Past President shall have the same duties and responsibilities as the President-Elect in the absence of the President-Elect.

# ARTICLE 8

## DEPARTMENT AND DIVISIONS

### 8.1 Organization of Departments

Each Department shall be organized as an integral unit of the Medical Staff and shall have a chair. The authority, duties, method of selection and responsibilities of these~~s~~ Department officers is set forth below. Each Department may appoint such standing or ad-hoc committees as it deems appropriate to perform its required functions. A Department may be further divided, as appropriate, into divisions. The division ~~which~~ shall be directly responsible to the Department

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within which it~~they~~ functions.~~,~~ E~~and e~~ach division~~of which~~ shall have a division~~-~~ chief, appointed by the department head or elected by the division members, ~~selected and~~ entrusted with the authority, duties and responsibilities specified in Section 8.7. When appropriate, the Medical Executive Committee may recommend to the Medical Staff the creation, elimination, modification, or combination of Departments or divisions.

8.1.1 Current Clinical Departments and Divisions:

The current Clinical Departments and Divisions are:

1. Family and Adult Medicine
   i. West County
   ii. Martinez
   iii. Concord
   iv. East
   v. Far East
2. Internal and Specialty Medicine
3. Hospital Medicine
4. Emergency Medicine
5. Psychiatry/Psychology
6. Pediatrics
7. Obstetrics and Gynecology
8. Surgery
9. Anesthesia
10. Critical Care Medicine
11. Dental
12. Diagnostic Imaging
13. Pathology

~~(a) Department of Family Medicine~~

~~0. Divisions~~

~~( ) Antioch-Brentwood~~

~~( ) Pittsburg-Bay Point~~

~~( ) Concord~~

~~( ) Martinez~~

~~( ) West County~~

~~(i) Anesthesia~~

~~(j) Emergency Medicine~~

~~(k) Surgery~~

~~(l) Pediatrics~~

~~(m) Psychiatry/Psychology~~

~~(o) Internal Medicine~~

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~~( )  Division - Ambulatory~~

~~*(t)* Obstetrics & Gynecology~~
~~*(u)* Hospitalist Medicine~~
~~*(v)* Intensive Care Unit~~
~~*(w)* Diagnostic Imaging~~
~~*(x)* Pathology~~
~~*(y)*~~*(a)* ~~Dental~~

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### 8.2 Assignment to Departments

Each Member shall be assigned membership in at least one Department, but may also be granted membership and/or Privileges in other Departments.

### 8.3 Functions of Departments

The functions of each Department shall include:

1) Conducting patient care reviews for the purpose of analyzing and evaluating the quality and appropriateness of care and treatment provided to patients within the Department. The Department shall routinely collect information about important aspects of patient care provided in the Department, periodically asses this information, and develop objective criteria for use in evaluating patient care. Patient care reviews shall include all clinical work performed under the jurisdiction of the Department;
2) Recommending to the Medical Executive Committee guidelines for the granting of Clinical Privileges and the performance of specified services within the Department;
3) Evaluating and making appropriate recommendations regarding the qualification of applicants seeking appointment or reappointment and Clinical Privileges within that Department;
4) Conducting, participating and making recommendations regarding continuing education programs pertinent to departmental clinical practice;
5) Reviewing and evaluating departmental adherence to: (1) Medical Staff policies and procedures; and (2) sound principles of clinical practice;
6) Coordinating patient care provided by the Department's Members with nursing and ancillary patient care services;
7) Submitting written reports to the Medical Executive Committee concerning: (1) the Department's review and evaluation activities, actions taken thereon and the results of such action; and (2) recommendations for maintaining and improving the quality of care provided in the Department and Hospital;
8) Meeting regularly for the purpose of considering patient care review findings and the results of the Department's review and evaluation activities, as well as reports on other Department and staff functions;
9) Establishing such committees or other mechanisms as are necessary and desirable to perform properly the functions assigned to it, including proctoring protocols;

10) Taking appropriate action when important problems in patient care and clinical performance or opportunities to improve care are identified;
11) Accounting to the Medical Executive Committee for all professional and Medical Staff administrative activities within the Department;
12) Appointing such committees as may be necessary or appropriate to conduct Department functions;
13) Formulating recommendations for departmental rules and regulation reasonably necessary for the proper discharge of its responsibilities subject to the approval by the Medical Executive Committee and the Medical Staff;

When the department or any of its committees meet to carry out the duties described above, the meeting body shall constitute a peer review body, which is subject to the standards and entitled to the protections and immunities afforded by federal and state law for peer review bodies and/or committees. Each department and/or its committees, if any, must meet regularly to carry out its/their duties.

### 8.4 Department Heads

Each Department shall have a Department Head who shall be a Member of the active provisional Medical Staff and shall be certified by an appropriate specialty board, or affirmatively establish, through the Privilege delineation process, that the person possesses comparable competence in at least one of the clinical areas covered by the Department.

Each Department Head shall have the following authority, duties and responsibilities:

1) Act as presiding Officer (Chairperson) at departmental meetings;
2) Report to the Medical Executive Committee and the Medical Staff President regarding all professional and administrative activities within the Department;
3) Generally monitor the quality of patient care and professional performance rendered by Members with Clinical Privileges in the Department through a planned and systematic process; oversee the effective conduct of the patient care, evaluation, and monitoring functions delegated to the department by the Medical Executive Committee;
4) Prepare and transmit to the appropriate authorities, as required by these Bylaws, recommendations concerning appointment, reappointment, delineation of Clinical Privileges, and corrective action with respect to practitioners holding membership of exercising privileges or services in the Department;
5) Annually review, and amend as necessary, Department policies and procedures;
6) Participate in managing the Department through cooperation and coordination with nursing and other patient care services and with Administration on all matters affecting patient care, including personnel, equipment, facilities, services, and budget;
7) Endeavor to enforce the Bylaws, Rules and policies and regulations with the Department;
8) Appoint an acting Department Head (Vice-Chairperson) during any absence;
9) Assure all Department functions are performed;

10) Perform such other duties commensurate with the office as may from time to time be reasonably requested by the Medical Staff President or the Medical Executive Committee;
11) Plan and conduct, as requested by and in cooperation with the Residency Director, a program of instruction, supervision, and evaluation of Residents'
12) Assess and recommend to the relevant hospital authority off-site sources for needed patient care services not provided by the department or organization;
13) Recommend a sufficient number of qualified and competent persons to provide care, treatment and services;
14) Determine the qualifications and competence of Department or service personnel who are not licensed independent practitioners and who provide patient care, treatment and service;
15) Continually asses and improve the quality of care, treatment and services;
16) Maintain quality control programs, as appropriate;
17) Oversee the orientation and continuing education of all persons in the Department or service;
18) Recommend space and other resources needed by the Department or service;
19) Recommend to the Medical Staff the criteria for Clinical Privileges that are relevant to the care provided in the Department;
20) Integrate the Department or service into the primary functions of the organization and coordinate and integrate interdepartmental and intradepartmental services;
21) Develop and implement policies and procedures that guide and support the provision of care, treatment and services.

## 8.5 Election of Department Heads

8.5.1 In April of each election year, the active Medical Staff of the applicable Department shall elect a Department Head.

8.5.2 The following Departments shall elect a Department Head in odd-numbered years: Family and Adult Medicine,~~Family Medicine~~, Anesthesia, Pediatrics, Internal and Specialty Medicine, Hospital Medicine, Pathology and Dentistry.

The following Departments shall elect a Department Head in even-numbered years: Emergency Medicine, Surgery, Psychiatry/Psychology, Diagnostic Imaging, Obstetrics & Gynecology and Critical~~Intensive~~ Care.

8.5.3 The Medical Staff President shall request nominations for Department Head at the January Quarterly Medical Staff meeting and at the applicable Department meeting. Nominations may be submitted by any department member within the nominating department regardless of status (e.g. active; courtesy, etc.). Nominations may be made only to the current Department Head or to the Medical Staff President.

The last day to nominate a candidate for Department Head is March first. Candidates may submit a written statement not to exceed two pages to the Medical Staff office no later

than close of business on March 3rd. The Medical Staff Office shall mail a list of candidates to all active Members of the Medical Staff in the affected Department no later than March 7th. The candidates' statements, if any, shall accompany the list.

8.5.4 Approximately thirty (30) days, but no less than twenty-five (25) days, before the April meeting of the Medical Executive Committee, the Medical Staff office shall mail ballots to all the active Medical Staff Members within the affected Department.

In order for a ballot to be counted, it must be returned to the Medical Staff Office no later than close of business on the 11th day before the April meeting of the Medical Executive Committee. The Medical Staff President and at least one other member of the Medical Executive Committee shall count the ballots, unless the Medical Staff President is a candidate. In that event, the Medical Executive Committee shall designate a second member of the Medical Executive Committee to count ballots. As soon thereafter as possible, the Medical Executive Committee shall notify all candidates of the election results. Thereafter, but at least seven (7) calendar days before the April meeting of the medical Executive Committee, the Medical Executive Committee shall post, or otherwise disclose to the Medical Staff, the election results.

8.5.5 The Medical Executive Committee shall review the newly elected Department Heads for approval at its April meeting. The elected Department Head is thereafter subject to the approval of the Chief Medical Office. In the event that the elected Department Head is not approved by either the Medical Executive Committee or the Chief Medical Officer, a new election shall be conducted as soon as possible. If the Chief Medical Officer does not approve a Department Head, she/he will discuss the reasons for disapproval at the next Medical Executive Committee meeting.

8.5.6 The Medical Staff President can appoint an acting Department Head, subject to MEC approval, to carry out the duties of Department Head until an election is possible.

8.5.7 Term of Office

The term of office of Department Heads is two Medical Staff years. Each assumes office on the first day of the Medical Staff year, except that a Department Head appointed to fill a vacancy assumes office immediately upon appointment. Each Department Head serves until the end of his or her term until a successor is elected, unless he/she resigns sooner or is removed from office. A Department Head is eligible to succeed himself/herself.

8.5.8 Removal

After election and ratification, removal of a Department Head from office may occur for cause by two-thirds vote of the Medical Executive Committee or a two-thirds vote of the Department Members on active staff.

## 8.6 Functions of Divisions

Subject to approval of the Medical Executive Committee, each division shall perform the functions assigned to it by the Department Chairperson. Such functions may include, without limitation, retrospective patient care reviews, evaluation of patient care practices, credentials review and privileges delineation, and continuing education programs. The division shall transmit regular reports to the Department Head on the conduct of its assigned functions.

Each Division head shall:

1) Act as presiding officer at division meetings;
2) Assist in the development and implementation, in cooperation with the Department Head, of programs to carry out the quality review and evaluation and monitoring functions assigned to the division;
3) Continually review the patient care and the professional performance of Division members, and report to the Department Head patterns or situations affecting patient care within the Division;
4) As requested by and in cooperation with the Department Head, conduct investigations and submit reports and recommendations to the Department Head regarding the Clinical Privileges to be exercised within his/her division by members of or applicants to the Medical Staff;
5) Manage the Division through cooperation and coordination with nursing and other patient care services and with Administration on all matters affecting patient care, including personnel, equipment, facilities, services, and budget;
6) Assure all Division functions are performed;
7) Perform such other duties commensurate with the office as may from time to time be reasonably requested by the Department Head, the Medical Staff President, or the Medical Executive Committee.

## 8.7 Division Heads

Each division shall have a Division Head who shall be a Member of the active or provisional Staff and a Member of the division which he/she heads, and shall be certified by an appropriate specialty board, or affirmatively establish through the privilege delineation process that he/she possesses comparable competence in at least one of the clinical areas covered by the division.

Each Division Head shall:

1) Act as providing officer at division meetings;
2) Assist in the development and implementation, in cooperation with the Department Head, of programs to carry out the quality review and monitoring functions assigned to the division;
3) Continually review the patient care and the professional performance of Division members, and report to the Department Head patterns or situations affecting patient care within the Division;

4) As requested by and in cooperation with the Department Head, conduct investigations and submit reports and recommendations to the Department Head regarding the Clinical Privileges to be exercised within his/her division by Members of or applicants to the Medical Staff;
5) Manage the Division through cooperation and coordination with nursing and other patient care services and with Administration on all matters affecting patient care, including personnel, equipment, facilities, services, and budget;
6) Assure all Division functions are performed;
7) Perform such other duties commensurate with the office as may from time to time be reasonably requested by the Department Head, the Medical Staff President, or the Medical Executive Committee.

**8.8 Election of Division ~~heads~~Heads**

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8.8.1 In April of each election year, the active Medical Staff of the applicable division shall elect a Division Head as set forth.

8.8.2 Family and Adult Medicine West County and Family and Adult Medicine ~~Antioch-Brentwood~~ Far East County~~and Outpatient Internal Medicine Divisions~~ shall elect Division heads in even-numbered years; Family and Adult Medicine Martinez, Family and Adult Medicine Concord and Family and Adult Medicine ~~Pittsburg-Bay Point~~ East County shall elect Division Heads in odd-number years.

8.8.3 The Medical Staff President shall request nominations for Division Heads at the January Quarterly Medical Staff meeting and at the applicable division meeting. Nominations may be made only to the current Department Head or to the Medical Staff President.

The last day to nominate a candidate for Division Head is March 1st. Candidates may submit a written statement not to exceed two pages to the Medical Staff Office no later than close of business on March 3rd. The Medical Staff Office shall mail ballots to all the active Medical Staff Members within the affected division no later than March 7th. The candidates' statements shall accompany the list, if any.

8.8.4 Approximately thirty (30) days, but no less than twenty-five (25) days, before April meeting of the Medical Executive Committee, the Medical Staff Office shall mail ballots to all the active Medical Staff Members within the affected division.

In order for a ballot to be counted, it must be returned to the Medical Staff Office no later than the close of business on the 11th day before the April meeting of the Medical Executive Committee. The Medical Staff President and at least one other member of the Medical Executive Committee shall count the ballots, unless the Medical Staff President is a candidate. In that event, the Medical Executive Committee shall designate a second member of the Medical Executive Committee to count ballots. As soon thereafter as possible, the Medical Executive Committee shall notify all candidates of the election results. Thereafter, but at least seven calendar days before the April meeting of the Medical

Executive Committee, the Medical Executive Committee shall post, or otherwise disclose to the Medical Staff, the election results.

8.8.5 The newly elected Division Heads shall be reviewed for approval by the appropriate Department Head prior to the April meeting of the Medical Executive Committee and by the Medical Executive Committee at its April meeting. The elected Division Head is thereafter subject to approval of the Chief Medical Officer. In the event that the elected Division Head is not approved by the Department Head, the Medical Executive Committee or the Chief Medical officer, a new election shall be conducted as soon as possible. If the Department Head or the Chief Medical Officer does not approve a Division head, she/he will discuss the reasons for disapproval at the next Medical Executive Committee meeting.

8.8.6 Division members shall fill vacancies due to any reason for the unexpired term by election as soon as possible. The Department Head can appoint an acting Division head, subject to MEC approval, to carry out the duties of Division Head until this election is possible.

8.8.7 Term of Office

The term of office of Division heads is two Medical Staff years. Each assumes office on the first day of the Medical Staff year, except that a Division head elected to fill a vacancy assumes office immediately upon election. Each Division head serves until the end of his/her term and until a successor is elected, unless he/she sooner resigns or is removed from office. A Division Head is eligible to succeed himself/herself.

8.8.8 Removal

After selection and ratification, a Division head may be removed for cause by the Department Head, a two-thirds vote of the Division Members on active Staff, or by a two-thirds vote of the MEC.

# ARTICLE 9

## COMMITTEES

### 9.1 General Provisions

9.1.1 Designation

*A.* The Medical Executive Committee and the other committees described in these Bylaws shall be standing committees of the Medical Staff unless otherwise indicated.

*B.* The Chairperson of the Medical Executive Committee, a standing committee, or a Department may create subcommittees, or Ad-Hoc committees, in order to carry out specified tasks. These specified tasks must be within the scope of authority of the committee whose chairperson created the committee. Such committees terminate once the specified task is completed and are not standing committees.

9.1.2 Appointment of Members to Committees

*A.* The Medical Staff President, with the approval of the MEC, shall appoint chairpersons and members of standing committees unless otherwise specified in the Bylaws. Committee members are appointed for a term of one Medical Staff year unless otherwise specified by the Bylaws, and shall serve either until the end of this period, until the member's successor is appointed, or until the member resigns or is removed from the committee.

*B.* Only Medical Staff in good standing may be voting members of any Medical Staff Committee. Other individuals may be appointed to committee positions as either Ex-officio or non-medical Staff members.

*C.* For committees that are not standing committees, the person creating the committee shall appoint Chairpersons and Members.

9.1.3 Removal of Committees

Unless otherwise specified in the Bylaws, committee members may be removed by the appointing authority without cause.

9.1.4 Vacancies

Vacancies on any committees shall be filled in the same manner as an original appointment is made.

9.1.5 Conduct of Meeting of Committees

Committee meetings shall be conducted and documented in the manner specified in these Bylaws.

9.1.6 Attendance of Non-Members

Members in good standing of the Medical Staff who are not committee members my attend committee meetings only with the permission of the Chair of the committee.

9.1.7 Accountability

All committees of the Medical Staff are accountable to the Medical Executive Committee.

## 9.2 Medical Executive Committee

9.2.1 Composition

The Medical Executive Committee (MEC) consists of the following Members of the Medical Staff as voting members:

1) President of the Medical Staff;
2) President-Elect;
3) Past President;
4) Clinical Department Heads;
5) Division heads;
6) The Chairpersons of the following committees shall be voting members of the MEC:
   *A.* Administrative Affairs
   *B.* Ambulatory Policy
   *C.* Credentials
   *D.* Patient Safety and Performance Improvement
   *E.* Patient Care Policy and Evaluation
7) Chief administrators are official members of MEC with regular reporting duties without voting rights. These include the Director of Health Services, the Chief Financial Officer, the Chief Executive Officer of Hospital and Clinics, the Chief Medical Officer, the Chief Nursing Officer, the Chief Operations Officer for CCRMC/HC, the Ambulatory Care Medical Director, the Hospital~~ist~~ Medical Director, Medical Director of Patient Safety and Perfomance Improvement, the Chief Medical Informatics Officer, the Residency Program Director and the Medical Director of Contra Costa Health Plan ~~the health plan~~. The Chairperson of the MEC may invite other individuals to participate in the MEC meetings as non-voting guests.

9.2.2 Duties

The Medical Executive Committee shall:

*A.* Perform and/or delegate performance of all Medical Staff functions in a manner consistent with the Bylaws and the Rules;
*B.* Coordinate and implement the Activities of the committees and the Departments;
*C.* Make recommendations regarding Medical Staff membership and privileges;
*D.* Initiate and pursue disciplinary or corrective actions when indicated;

*E.* Supervise the Medical Staff's compliance with the Medical Staff Bylaws, Rules and policies;

*F.* Supervise the Medical Staff's compliance with County laws, rules, policies and procedures;

*G.* Supervise the Medical Staff's compliance with state and federal laws and regulations;

*H.* Supervise the Medical Staff's compliance with TJC and other applicable accreditation and certification rules;

*I.* Regularly report to the Governing Body regarding the status of Medical Staff issues;

*J.* Meet monthly to conduct Medical Staff business;

*K.* Represent and act on behalf of the Medical Staff in the intervals between Medical Staff meetings, subject only to such specific limitations as may be imposed by those Bylaws.

## 9.3 Committees

In order to remain in good standing on a committee, a member must attend at least 50 percent of the meetings.

### 9.3.1 Administrative Affairs Committee

*A.* Purpose and Meetings

The Administrative Affairs Committee (AAC) fulfills staff responsibilities relating to review and revision of Medical Staff Bylaws and related manuals and forms and assumes the responsibilities for investigating and providing recommendations on such other administrative policy-making and planning matters and activities of concern to the Staff as are referred by the MEC. The AAC oversees the Institutional Review Committee (IRC) which reviews, approves or denies, monitors and evaluates research projects, protocols, and clinical investigations to be conducted within the Medical Services, in compliance with the regulations of the Food and Drug Administration and observing all requirements of any other applicable regulatory authorities for any given study. The AAC may overrule a positive recommendation of the IRC, but the AAC may not approve a study or the use of an investigational agent if disapproved/denied by the IRC. The AAC meets as needed, and reports to the MEC. When appropriate, it shares its monitoring and evaluation findings from research projects with the Patient Safety and Performance Improvement Committee and vice versa.

*B.* Composition

The Administrative Affairs Committee includes;

1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC approval;
2) At least 4-6 additional Staff Members;
3) Administrator, with vote; and
4) Their members with special expertise as necessary on an ad-hoc basis, without vote.

9.3.2 Ambulatory Policy Committee

*A.* Purpose and Meetings

The Ambulatory Policy Committee (APC) sets Medical Staff policy in the health centers and acts as a liaison with Nursing and Administration for coordination of policies and procedures under joint Medical Staff-Administration or Medical Staff-Nursing purview.

APC develops policies to resolve issues that affect more than one Medical Staff Department and focuses on policies and projects that relate to quality of care, the efficiency of the health centers and patients that relate to quality care, the regulatory compliance. APC coordinates its activities with PSPIC and receives quality assurance reports suggestive of or requiring changes in policies and procedures from individual Medical Staff Departments and from the Ambulatory Subcommittee of PSPIC.

~~A.~~ I. Composition

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The Ambulatory Policy Committee includes:

1) A Physician Chairperson; appointed by the Medical Staff President, subject to MEC approval
2) One Staff Member from each Region;
3) The Department Head of Family Medicine or his/her designee;
4) Representative of the Departments of Obstetrics & Gynecology, Surgery, Pediatrics and Medicine, with vote;
5) Other members with special expertise as needed on an ad-hoc basis without cote;
6) Director of Health Information Management as needed on an ad-hoc basis without vote
7) A representative of the Allied Health Professionals, without vote;;
8) Ambulatory Care Medical Director without vote;
9) Chief Nursing Officer without vote.

9.3.3 Bioethics Committee

*A.* Purpose and Meetings

The Bioethics Committee provides a multi-disciplinary forum for the development of guidelines for consideration of cases and issues having bioethical implications; development and implementation of procedures for the review of such cases; development and/or review of institutional policies regarding care and treatment in cases or issues having bioethical implications; consultation with concerned parties to facilitate and education of the hospital staff regarding bioethical matters. The committee will meet regularly (at least six (6) times yearly) and will also provide a mechanism for other meetings as necessary to perform the case consultation functions. The committee chair will report to the Medical Executive Committee.

*B.* Composition

The Bioethics Committee includes;

1) A physician chairperson appointed by the Medical Staff President subject to Medical Executive Committee approval;
2) Multi-disciplinary representation selected to represent the various clinical services of the medical and nursing staff, ancillary support services (such as social workers, chaplains, etc.) and lay members. At least a third of the committee membership will be physicians;
3) A member representing hospital administration; and
4) The committee may invite other professional or community lay members to be utilized when discussing issues involving their particular clinical, ethnic, religious or other background.

9.3.4 Cancer Committee

*A.* Purpose and Meetings

The Cancer Committee is a multi-disciplinary committee that organizes, conducts and evaluates hospital-wide oncology services and the cancer registry. The committee assures that full oncology services including surgery, chemotherapy, radiation therapy, as well as rehabilitation and hospice care are available to all patients. The committee will develop and monitor annual goals and objectives for clinical care, community outreach, quality improvement and programmatic endeavors related to cancer care. The committee is responsible for establishing and monitoring the Cancer Conference format, frequency and multi-disciplinary attendance. The committee will ascertain if there is a need for specific educational programs both professional and public based on survival and comparison data. The committee will also supervise the Cancer Registry for quality control of case-funding, abstracting, staging, reporting and follow-up. The committee will conduct a minimum of two patient care evaluation studies annually, one to include survival data. The committee will meet at least quarterly or more often as needed and communicate as necessary with the Patient Safety and Performance Improvement Committee. The committee will designate one coordinator for each of the four areas of Cancer Committee activity: Cancer Conference, quality control of the cancer registry, quality improvement and community outreach.

*B.* Composition

The Cancer Committee includes:

1) A Physician chairperson appointed by the Medical Staff President, subject to Medical Executive Committee approval;

2) At least five (5) additional Medical Staff Members including representation from Surgery, Pathology, Hematology/Oncology, Family Practice, and Diagnostic Imaging;
3) Cancer Liaison Physician;
4) Representation for Administration, Social Services, Nursing, and the American Cancer Society all with vote; and
~~5)~~ The Cancer Registrar, who will act as staff to the Cancer Committee, with vote.

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9.3.5 Continuing Medical Education Committee

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*A.* Purpose and Meetings

The Continuing Medical Education Committee (CMEC) directs the development of CME programs for the Staff responsive to quality assurance findings and to developments pertinent at the Hospital and apprises the Staff of outside education opportunities. It coordinates the educational activities of the Departments and of the Staff and Hospital Department. The CMEC also analyzes the status and needs of, and make recommendations regarding, the medical library services. It meets at least quarterly and more frequently if needed and reports on its activities to the MEC.

*B.* Composition

The CMEC included:

1) A Chairperson appointed by the Medical Staff President, subject to MEC approval;
2) At least two additional Staff Members; and
3) Medical Librarian, without vote.

9.3.6 Credentials Committee

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*A.* Purpose and Meetings

The Credentials Committee coordinates the staff credentials function by receiving and analyzing applications and recommendations for appointment, provisional period conclusion or extension, reappointment, clinical privileges, and changes therein, and recommending action therein, and by integrating quality assurance and utilization review and monitoring, membership, and other relevant information into the individual credentials files. It also assists in designing and participates in implementing the credentialing procedures for Allied Health Practitioners. It meets monthly or as necessary and reports to the MEC regarding the credentialing of Staff Members.

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*B.* Composition

The Credentials Committee includes:

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1) A physician chairperson, appointed by the Medical Staff President, subject to MEC approval; and
2) At least 4-6 additional Staff Members, selected to be representative of the Departments and major clinical specialties.

~~9.3.7 Critical Care Committee~~

~~*A.* Purpose and Meetings~~

~~The Critical Care Committee (CCC) is a multi-disciplinary committee that oversees the quality, safety, and appropriateness of patient care services provided within the Critical Care Unit (CCU) and Intermediate Medical Care Unit (IMCU). The CCC, in consultation with the Patient Care Policy and Evaluation Committee, shall develop written policies and procedures which shall guide the provision of patient care including, but not limited to: criteria for patient admission to and discharge from the CCU and IMCU (including priority determination); guidelines for providing specialized patient care to patients who require such care but who, for pre-determined reason (e.g., contagious disease) or for unforeseen reasons (e.g., when patient load exceeds optimal operational capacity) cannot be cared for within the CCU and IMCU; guidelines for transferring and referring patients who require services not provided by the CCU; guidelines for circumstances under which consultations is required; the role of Resident Staff in these units; and guidelines for appropriate orientation, in-service training, and continuing medical and nursing education. As appropriate and as necessary, the CCC shares information with the Patient Safety and Performance Improvement Committee and its subordinate committees. The CCC shall meet at least quarterly and reports to the Patient Care Policy and Evaluation Committee. The Chairperson (or his/her designee) shall serve as the Director of the CCU and IMCU.~~

~~*B.* Composition~~

~~The CCC includes:~~

~~1) At least one Member each from the Departments of Anesthesia, Medicine, and Surgery.~~
~~2) The Nursing Supervisor of the Critical Care Unit;~~
~~3) The Residency Director or his/her designee;~~
~~4) The Director of Cardiopulmonary Services, or his/her designee; and~~
~~5) A Member of the Resident Staff.~~
~~1)~~

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9.3.~~7~~9 Informatics Advisory Committee

*A.* Purpose and Meetings

The Informatics Advisory Committee provides governance in informatics and Information Technology (IT)-related clinical systems. It prioritizes issues, reports and optimization and acts as a liaison between medical staff departments and IT/clinical informatics.

~~*A.*~~ I. Composition

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1) Chief Medical Informatics Officer (CMI) who serves as Chair
2) Director of Nursing Informatics
3) Director of Medical Outpatient Informatics
4) Director of Medical Inpatient Informatics
5) A representative of each department.

9.3.8~~10~~ Institutional Review Committee

*A.* Purpose and Meetings

The Institutional Review Committee shall review and have authority to: approve, require modification in (to secure approval), or disapprove all research activities within the Hospital and Health Centers; approve, require modification in, or disapprove the use of investigation drugs or devices in individuals (i.e. "Compassionate use" cases); receive prompt notification of the emergency use of investigational drugs or devices and approve, require modification in or, disapprove their continued use; continue, require modifications in or terminate any ongoing studies at intervals of not greater than twelve (12) months; immediately terminate or suspend any research not conducted in accordance with the IRC's requirements or that has been associated with unexpected serious harm to subjects; ensure all compliance with federal informed consent regulations regarding investigational use of drugs and devices; and assure the protection of the rights and welfare of all human subjects. The Institutional Review Committee shall meet semi-annually or more often as necessary to fulfill its obligations. If the Institutional Review Committee disapproves of any activity within its purview, that decision is final. The Institutional Review Committee chairperson reports to the Administrative Affairs Committee.

*B.* Composition

The Institutional Review Committee includes:

1) A Chairperson appointed by the Chairperson of the Administrative Affairs Committee, subject to Medical Executive Committee approval;
2) At least one member of each gender;
3) At least one member from outside the medical profession;
4) At least one non-scientist;
5) At least one member not affiliated with the Hospital and Health Centers; and
6) A total of at least five (5) members, including representative ethnic and cultural backgrounds, of the community.

9.3.9~~11~~ Inter-Disciplinary Practice Committee

*A.* Purpose and Meetings

The Inter-Disciplinary Practice Committee (IPC) shall perform functions consistent with the requirements of law and regulations (Title 22 of the California Code of Regulations,Section 70706). Method for the approval of standardized procedures in accordance with sections 2725 of the Business and Professions Code in which affirmative approval of the administrator or designee and a majority of the physicians and a majority of registered nurse members would be required. The IPC shall routinely report to the MEC; and, in addition, shall submit an annual report to the MEC. The IPC shall meet at least annually, or more often as necessary.

*B.* Composition

The IPC shall consist of:

1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC approval;
2) A Director of Nursing, or Designee: such as the clinical services director of Public Health who has oversight over NP/AHP function;
3) An Administrator, or designee: such as the Ambulatory Care Medical Director;
4) Chair of the Credentials Committee;
5) Nurse Practitioner Division Head
6) Two (2) additional allied health professionals, appointed by the IPC Chairperson, in consultation with the NP Division Head
7) A medical staff representative from the clinical psychology department.
8) Additional Allied Health Professionals who are performing or will perform functions requiring standardized procedures will be appointed by the IPC Chair on a temporary basis when issues pertaining to their functions are discussed.
9) Additional physician members of the medical staff physicians and/or registered nurses may be appointed by the physician chair person or the director of nursing, respectively, to maintain equal numbers of each on the committee in accordance with Title 22 of the California Code of Regulations, Section 70706.

9.3.10~~2~~ Joint Conference Committee

*A.* Purpose and Meetings

The Joint Conference Committee constitutes a forum between the Medical Staff, the Administration and the Governing Body. Two members of the Medical Executive Committee who serve at the will of the Medical Executive Committee represent the Medical Staff. These members shall act as directed by the MEC in their capacity as members of the Joint Conference Committee.

The Governing Body and the Administration shall have representation pursuant to authority separate from these Bylaws.

~~9.3.13 Medical Errors and Adverse Outcome Committee~~

~~*A.* Purpose and Meetings~~

~~The Medical Error and Adverse Outcome Committee (MEAO) provides a multi-disciplinary forum to develop and coordinate resources for education, case consultation, and quality improvement with respect to possible medical error and/or unanticipated adverse outcome. Its functions include:~~

~~1) Education: The committee develops and implements a system-wide educational program addressing topics relevant to medical error.~~
~~2) Case consultation: The committee develops and provides consultative resource services to assist with clinical management of cases involving clear of possible medical error, unanticipated adverse outcome, or "near-miss". Such services include assistance with patient/family communications, facilitation of prompt medical case reviews, and initiation of debriefing and support services for staff.~~
~~3) Quality improvement: The committee works with other structures of the Medical Staff and Administration to apply the lessons learned from case reviews toward system-wide improvements.~~

~~An important part of the work of the MEAO Committee, through its functions of education, case management, and quality improvement, is to de-sanitize error and to nurture a culture in which clinicians are supported in their professional responsibilities to acknowledge, constructively discuss, and prevent medical error.~~

~~The committee meets regularly (at least six (6) times yearly) and reports to the Medical Executive Committee.~~

~~*B.* Composition~~

~~The MEAO Committee includes:~~

~~1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC approval;~~
~~2) At least two (2)additional Staff Physicians;~~
~~3) At least two (2) Nurses;~~
~~4) One (1) Resident Physician~~
~~5) One (1) representative from Administration;~~
~~6) One community lay representative;~~
~~7) The Leader of the Staff Debriefing and Support Team; and~~
~~8) Other Members with special expertise as determined by the Chairperson.~~

9.3.114 Medical Staff Assistance Committee

*A.* Purpose and Meetings

In order to improve the quality of care and promote the well-being of the Medical Staff, the Medical Staff Assistance Committee (MSAC) receives reports related to health concerns, well-being, or impairment of Medical Staff Members, and other Licensed Independent Practitioners (LIPs) and, as it deems appropriate, investigates such reports. With respect to matters involving individual Medical Staff Members and other LIPs, the committee may, on a voluntary basis, provide such advice, counseling, or referrals as may seem appropriate. Such activities shall be confidential; however, in the event information received by the committee clearly demonstrates that the health or known impairment of a Medical Staff Member or LIP poses an unreasonable risk of harm to patients, that information may be referred for corrective action.

The process that the MSAC uses to accomplish these goals includes:

1) Education of the Medical Staff and other organization staff about illness and impairment recognition issues specific to the Medical Staff Member or licensed independent practitioners;
2) Self-referral by a physician or Licensed Independent Practitioner (LIP) and referral by other organization staff;
3) Referral of the Physician, or the affected LIP to the appropriate professional internal or external resources for diagnosis and treatment of the condition or concern;
4) Maintenance of the confidentiality of the Physician, or LIP seeking referral or referred for assistance except as limited by law, ethical obligation, or when the safety of a patient is threatened;
5) Evaluation of the credibility of a complaint, allegation, or concern;
6) Monitoring of the Physician, or affected LIP and the safety of patients until the rehabilitation or any disciplinary process is complete;
7) Reporting to the Medical Staff leadership instances in which a Physician or LIP is providing unsafe treatment; and
8) Initiating appropriate action when a Physician or LIP fails to complete the required rehabilitation program.

The committee shall also consider general matters related to the health and well-being of the Medical Staff, and, with the approval of the Medical Executive Committee, develop educational programs or related activities. The Medical Staff Assistance Committee shall meet as often as necessary, but at least quarterly. It shall maintain only such record of its proceedings as it deems advisable, but shall report on its activities on a routine basis to the Medical Executive Committee.

*B.* Composition

The Medical Staff Assistance Committee includes;

1) A Physician Chairperson, appointed by the Medical Staff President, subject to Medical Executive Committee approval;
2) At least two (2) additional practitioners; and
3) A Member of the Resident staff.

Except for the resident, who shall serve on the committee for one (1 ) year, each member shall serve for a term of three (3) years, and the term shall be staggered as deemed appropriate by the Medical Executive Committee to achieve continuity. In so far as possible, members of this committee shall not serve as active participants on other peer review or quality assurance committees while serving on this committee.

The Chairperson may appoint additional individuals who are not members of the Medical Staff, including non-physicians, when such appointment may materially increase the effectiveness of the work of the committee. These individuals shall serve for a term that shall be determined by the Chairperson.

9.3.12~~5~~ Informatics Clinical Communication Committee (ICCC)

*A.* Purpose and Meetings

The Informatics Clinical Communication Committee addresses clinical workflows in an effort to enhance patient safety and maximize efficient care. The InBasket is the hub of communication and information flow in the electronic health record. The committee brings together provider, nursing, ancillary and technical representative to design, build, and troubleshoot processes to allow providers, nurses, and ancillary staff to care for patients safely and efficiently.

The committee will meet at least monthly and more frequently as needed.

*B.* Composition

1) A Chairperson appointed jointly by the Chief Medical Informatics Officer and the Medical Staff President

~~2) DFM representative~~

~~3)~~2)Family and Adult Medicine Department Representative
~~4)~~3)Pediatrics Department Representative
~~5)~~4)Internal and Specialty Medicine Representative
~~6)~~5)At least one (1) representative from Nursing Administration
~~7)~~6)At least one (1) representative from Nursing Informatics
~~8)~~7)A representative from the Public Health Division
~~9)~~8)A representative from the Information Technology Department
~~10)~~9) A representative from the ~~Residency~~Residency Program

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In addition, the committee will seek representation from departments whose workflows appear on the meeting agenda, including the various ancillary services departments.

This ICCC Chair or his/her designee shall report to the Medical Executive Committee on an annual basis. The ICCC will make recommendations to IAC and operations leadership as appropriate.

9.3.13~~6~~ Patient Care Policy and Evaluation Committee

*A.* Purpose and Meetings

The Patient Care Policy and Evaluation ~~Committee~~ (PCP&E~~C~~) Committee monitors, assesses and recommends improvements to the MEC for:

1) The clinical and medical records policies and rules of the Medical Staff and of its inpatient clinical units and diagnostic and therapeutic support services (including OR/PAR, ER, CCU's, etc.);
2) Medical-related aspects of infection control policies;
3) Pharmacy and therapeutics policies and practices; and
4) Blood and blood products usage policies and practices.

It also acts as liaison with Nursing and Administration for review and coordination of policies, procedures, rules or regulations under joint Medical Staff-Administration or Medical Staff-Nursing purview and coordinates its activities with those of the Ambulatory Policy Committee. The PCP&EC receives quality assurance findings suggestive of or requiring changes. It serves as a forum for identifying and discussing problems in the delivery of patient care services and in the observance of patients' rights. The PCP&EC meets monthly and reports to the MEC.

*B.* Composition

The Patient Care Policy and Evaluation Committee includes:

1) A Physician Chairperson appointed by the Medical Staff President, subject to MEC approval;
2) At least 6-8 staff members selected to be representative of major clinical areas;
3) A representative of Nursing Service;
4) Director of Pharmacy ad-hoc for Pharmacy and Therapeutic function;
5) A representative from Pathology Department ad-hoc for blood and blood product review function;
6) Manager of Infection Control and Prevention Committee of the Hospital;
7) A representative of Administration responsible for policy committee support without vote;
8) A Nursing Supervisor/Coordinators for specialty units invited on an ad-hoc basis without vote;
9) A representative of other clinical services and professional, technical, administrative support staff participate as consultants in relevant areas of expertise ad-hoc without vote; and
10) Director of Health Information management quarterly and as needed without vote.

~~9.3.17 Patient Safety and Performance Improvement Committee~~

9.3.147 Patient Safety and Performance Improvement Committee

*A.* Purpose and Meetings

The Patient Safety and Performance Improvement Committee (PSPIC) has the authority and responsibility for implementing and directing the Quality Management Program for the Hospital. It is responsible for setting the quality management standards, determining criteria by which care will be measured, setting priorities for which aspects of care will be monitored, and analyzing the quality of care studies, indicators, utilization reports, grievances, survey data, and risk management information. A systematic, multi-disciplinary improvement process is followed. It develops an annual plan for performance improvement activities (Quality Management Plan).

*B.* Composition

The Patient Safety and Performance Improvement Committee includes the following Members:

1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC Approval.
3) The Medical Staff President;
4) The CCRMC Chief Executive Officer;
5) The Director of Pharmacy;
6) The Chief Medical Officer;
7) The Chief Nursing Officer;
8) The Ambulatory Care Medical Director;
9) The Chief Operating Officer;
10) The Chief Quality officer;
12) The past Medical Staff President;
13) The Chair of the Patient Care Policy and Evaluation Committee; and
14) Two (2) Medical Staff Physician representatives, appointed by the Medical Staff President, subject to MEC approval;
15) Patient Safety Officer;
16) Director of Safety and Performance Improvement;
17) Medical Director of Quality and Safety;
18) Hospital Medical Director;
19) Specialty Medical Director;
20) Hospital Regulatory Compliance Officer;
21) Quality Manager Program Coordinator;
22) One (1) Medical Staff Member representative from the Behavioral Health Division, appointed by the Medical Staff President, subject to MEC approval.

~~*A.* Purpose and Meetings~~

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~~The Patient Safety and Performance Improvement Committee (PSPIC) has the authority and responsibility for implementing and directing the Quality Management Program for the Hospital. It is responsible for setting the quality management standards, determining criteria by which care will be measured, setting priorities for which aspects of care will be monitored, and analyzing the quality of care studies, indicators, utilization reports, grievances, survey data and risk management information. A systematic, multi-disciplinary improvement process is followed. It develops an annual plan for performance improvement activities (Quality Management Plan).~~

~~*B.* Composition~~

~~The Patient Safety and Performance Improvement Committee include the following members:~~

~~1) A Physician Chairperson, appointed by the Medical Staff President, subject to MEC approval. The Physician Chair will serve for approximately three (3) years (in addition to one (1) year as Chair Elect), with the term ending one (1) year after the approximately triennial Joint Commission Survey;~~
~~2) A Physician Chair-Elect appointed by the Medical Staff President, subject to MEC approval, will be appointed after the triennial "unannounced: Joint Commission survey. He/she will take over as Chair one (1) year after the survey;~~
~~3) The Medical Staff President;~~
~~4) The CCRMC Chief Executive Officer;~~
~~5) The Director of Systems Redesign/Chief Medical Officer;~~
~~6) The Chief Nursing Officer;~~
~~7) The Ambulatory Care Medical Director;~~
~~8) The Chief Operating Officer;~~
~~9) The Chief Quality officer;~~
~~10) The Facilities manager;~~
~~11) The past Medical Staff President;~~
~~12) The Chair of the Patient Care Policy and Evaluation Committee; and~~
~~13) Two (2) Medical Staff Physician representatives, appointed by the Medical Staff President, subject to MEC approval.~~
~~14) Director of Pharmacy~~

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9.3.158 Peer Review Oversight Committee

*A.* Purpose and Meetings

The Peer Review Oversight Committee will oversee the peer review that is carried out by the departments. It will supervise the processes, help address systems issues and review cases that involve more than one department.

*B.* Composition

1) The Medical Staff President shall serve as Chair of the Committee;
2) Each department will have at least one (1) representative. Large departments will have two (2) representatives one from inpatient and the other from outpatient. Large departments are: Family and Adult Medicine, Internal and Specialty Medicine~~Family Medicine, Internal Medicine~~, Surgery, and Psychiatry/Psychology.

9.3.169 Perinatal Morbidity and Mortality (PM&M) Committee.

*A.* Function

The Perinatal Morbidity and Mortality Committee (PM&~~C~~M Committee) is an inter-disciplinary committee which monitors perinatal outcomes. It is intended to complement the quality assurance activities of the Departments of Pediatrics and Obstetrics and Gynecology by focusing on those cases whose management involves both obstetrical and pediatric issues. The PM&M Committee reports to the Departments of OB/GYN and Pediatrics.

*B.* Composition.

The Perinatal Morbidity and Mortality Committee consist of:

1) All Members in good standing of the Departments of OB/GYN, ~~and~~ Pediatrics and Anesthesia. The individual departments established attendance obligations;
2) Nurse Program manager for the Perinatal Unit, Clinical Nurse Specialists for maternity and nursery and the RN Case Coordinator are members, all with voting privileges; and
3) Regularly invited members, all without vote, including:
   (a) Consultant Perinatologist;
   (b) Consultant Neonatologist;
   (c) Any Member of the Department of Ambulatory Medicine having obstetrical privilege;
   (d) Any Member of the Resident Staff presently assigned to the Pediatrics or OB/GYN services or with a particular interest in a case being discussed; and
   (e) Any member of the nursing staff with a particular interest in a case being discussed. The Nurse Program Manager or his/her designee will maintain a file of confidentiality agreements signed by a non-physician attendees.

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9.3.17~~20~~ Professional Affairs Committee

*A.* Purpose of Meetings

The Professional Affairs Committee consists of the two members of the Governing Body who sit on the Joint Conference Committee. The members of the Professional Affairs Committee shall invite representatives from the Medical Staff and Administration, as appropriate, to its meetings.

*B.* Composition

The Professional Affairs Committee consists of the two (2) members of the Governing Body who sit on the Joint Conference Committee. The members of the Professional Affairs Committee shall invite representative from the Medical Staff and Administration, as appropriate to its meetings.

9.3.18~~21~~ Utilization Management Committee

*A.* Purpose and Meetings

The Utilization Management Committee develops and oversees implementation and operation of the utilization management plan relating to inpatient, ambulatory and clinical support services, makes utilization decisions as required under the plan, analyzes utilization profiles and evaluates the effectiveness of the UR program. Physician members of the committee act as the physician advisors required by the UR plan. The URC meets at least quarterly and reports to the Performance Improvement Committee.

*B.* Composition

The Utilization Management Committee includes:

1) A Chairperson appointed by the Chairperson of the PSPIC, subject to MEC approval;
2) At least 6-8 additional Medical Staff members, selected to provide broad representation from the Medical Staff;
3) At least one (1) representative from Administration, without vote;
4) Director of Social Services, without vote;
5) Representative from Nursing, without vote;
6) Representative from Finance, without vote;
7) Representative from Quality Assurance Department, without vote; and
8) Director of Health Information Management, without vote.

# ARTICLE 10

## MEETINGS

### 10.1 Medical Staff Meetings

10.1.1 Regular Meetings

General Staff meetings will be held quarterly. The Medical Executive Committee may authorize additional regular general Staff meetings by resolution. The resolution authorizing any such additional meeting shall require notice specifying the place, date, and time for the meeting, and that the meeting can transact any business as may come before it.

10.1.2 Special Meetings

A special meeting of the Medical Staff may be held by the Medical Executive Staff President. A special meeting must be held by the President at the written request of the Governing Body, the Chief Medical Officer, the Administrator, the Medical Executive Committee, or 25% of the active staff in good standing.

### 10.2 Clinical Department and Committee Meetings

10.2.1 Regular Meetings

Clinical Departments, Division, and Committees may establish by resolution the time for regular meetings. No additional notice is required.

10.2.2 Special Meetings

A special meeting of any Department, Division, or Committee may be held by the Head or Chairperson thereof. A special meeting must be held by the Head or Chairperson at the written request of the Administrator, the Medical Executive Committee, the Medical Staff President, the Chief Medical Officer, or 25% of the group's current members in good standing.

10.2.3 Executive (Closed) Session

Any Committee, Department or Division may call itself into executive session at any time during a regular or special meeting. All ex-officio members shall leave during the executive session unless requested to remain by the Chairperson. Accurate and complete minutes must be made and kept of any executive session.

### 10.3 Quorum

10.3.1 Medical Staff Meetings

The presence of one-third (1/3) of the active Medical Staff at a General or Special Medical Staff meeting shall constitute a quorum for all appropriate actions except the removal of a

Medical Staff Officer. For a meeting considering the removal of a Medical Staff Officer, the quorum shall be one-half (1/2) of the active Medical Staff. Ex-officio members do not count for quorum purposes.

10.3.2 Department and Committee Meetings

For committees, a quorum shall consist of 25% of the members of a committee by no fewer than two (2) members. For Department and division meetings, a quorum shall consist of 25% of the members. Ex-officio members do not count for quorum purposes.

**10.4 Manner of Action**

Except as otherwise specified, the action of a majority of the members present and voting at a meeting at which a quorum is present shall be the action of the group. A meeting at which a quorum is initially present may continue to transact business notwithstanding the withdrawal of members, if any action taken is approved by a least a majority of the required quorum for such meeting, or such greater number as may be specifically required by these Bylaws.

**10.5 Notice of Meetings**

Written notice of any regular general medical Staff meeting, or any regular committee or Department meeting, not held pursuant to resolution, will be delivered personally or via mail to each person entitled to attend at not less the five (5) days or more than fifteen (15) days before the date of such meeting. Notice of any special meeting of the Medical Staff, a Department, or a committee will be given orally or in writing at least seventy-two (72) hours prior to the meeting. Personal attendance at a meeting constitutes a waiver of notice of such meeting, except when a person attends a meeting for the express purpose of objecting, at the beginning of the meeting, to the transaction of any business because of lack of notice. No business shall be transacted at any special meeting except that listed in the meeting notice.

**10.6 Minutes**

Except as otherwise specified herein, minutes of all meetings will be prepared and retained. They shall include, at a minimum, the date and time of the meeting, a record of the attendance or members and the vote taken on all matters. A copy of the minutes shall be signed by the presiding officer of the meeting and forwarded to the medical Executive Committee.

**10.7 Agenda**

The Medical Staff president and Medical Executive Committee shall determine the order of business at a meeting of the Medical Staff. The agenda shall include, insofar as feasible:

1) Reading and acceptance of the minutes of the last regular meeting and of all special meetings held since the last regular meeting;
2) Administrative reports from the Medical Staff president, Departments, Committees, and the Administrator;
3) Election of officers when required by these Bylaws;

4) Reports by responsible Officers, Committees and Department on the overall results of patient care audits and other quality review, evaluation, and monitoring activities of the Staff and on the fulfillment of other required Staff functions;
5) Old business; and
6) New business.

### 10.8 Attendance Requirements

10.8.1 Medical Staff Meetings

The Medical Executive Committee may adopt attendance requirements for the Medical Staff and Department meetings.

10.8.2 Special Attendance

At the discretion of the Chairpersons or presiding Officer, when a Member's practice or conduct is scheduled for discussion at a regular Department, Division or Committee meeting, the Member may be requested to attend. If a suspected deviation from standard clinical practice is involved, the notice shall be given at least seven (7) days prior to the meeting and shall include time and place of the meeting and a general indication of the issue involved. Failure of a Member to appear at any meeting, with respect to which he/she was given such notice, unless excused by the Medical Executive Committee upon a showing of good cause, is grounds for corrective action.

### 10.9 Conduct of Meetings

Unless otherwise specified, meetings shall be conducted according to Robert's Rules of Order; however, technical or non-substantive departures from such rules shall not invalidate action taken at such a meeting.

## ARTICLE 11

## CORRECTIVE ACTION

### 11.1 Corrective Action

11.1.1 Initiation

Any person may provide information to the Medical Executive Committee about the conduct, performance, or competence of its Members. When reliable information indicate a Member may have exhibited acts, demeanor, or conduct reasonably likely to be (a) detrimental to patient safety, (b) unethical or illegal, (c) contrary to the Medical Staff Bylaws and/or rules and regulations, or (d) below applicable professional standards, a request for an investigative and/or corrective action against such Member may be initiated. The President of the Medical Staff, a Department Chair, the Chair of any standing Committee, or the Governing Body may initiate such a request. All requests for corrective action and/or formal investigation shall be in writing, shall be made to the

Medical Executive Committee, and shall be supported by reference to the specific activities or conduct which constitutes the grounds for the request. If the Medical Executive Committee initiates the request, it shall make an appropriate written record of the reasons for the request.

11.1.2 Formal Investigation

If the Medical Executive Committee concludes a formal investigation is warranted, it may conduct the investigation itself, or assign the task to an appropriate medical Staff Officer, Department, or standing or ad-hoc committee of the Medical Staff. If the investigation is delegated, the designee shall proceed with the investigation in a prompt manner and shall provide a written report of the investigation to the Medical Executive Committee as soon as practical. The report may include recommendation for appropriate corrective action. The Member shall be given an opportunity to provide information in a manner and upon such terms as the investigating body deems appropriate. The individual or body investigating the matter may, but is not obligated to, conduct interviews with persons involved; however, such investigation shall not constitute a hearing, nor shall the procedural rules with respect to hearings or appeals apply. Despite the status of any investigation, at all times the Medical Executive Committee shall retain authority and discretion to take whatever action may be warranted by the circumstances, including the imposition of summary suspension, termination of the investigative process, or other action. Any reports that are made to the Medical Executive Committee must be shared promptly with the Member under investigation.

The MEC may also require a medical or psychological exam. The examining physician shall be chosen in the manner described in Section 5.2, however, the Member is not required to pay for the exam.

11.1.3 Medical Executive Committee Action

As soon as practical after the conclusion of the formal investigation (or without a formal investigation if deemed unwarranted), the Medical Executive Committee shall take action that may include, without limitation:

*A.* Determining no corrective action is warranted and, if the Executive Committee determines there was no credible evidence for the complaint in the first instance, removing any adverse information from the Member's file;
*B.* Deferring action for a reasonable time where circumstances warrant;
*C.* Issuing letters of admonition, censure, reprimand, or warning. Nothing herein shall preclude Department Heads from issuing written or oral warnings or counseling. In the event the MEC issues such letters, the affected Member may make a written response which shall be placed in the Member's file;
*D.* Recommending the imposition of terms of probation or special limitation upon continued Medical Staff membership or exercise or clinical privileges including,

without limitation, requirements for co-admissions, mandatory consultation, or monitoring;

*E.* Recommending reduction, modification, suspension or revocation of clinical privileges;

*F.* Recommending reductions of membership status or limitation of any prerogatives directly related to the Member's delivery of patient care;

*G.* Recommending suspension, revocation or probation of Medical Staff membership;

*H.* Taking other actions that are appropriate under the circumstances.

11.1.4 Subsequent Action

*A.* If corrective action as set forth above is recommended by the Medical Executive Committee, the MEC shall notify the Administrator, the Governing Body, and the affected member of the Medical Staff of the recommended action.

*B.* The recommendations of the Medical Executive Committee shall be final, unless the affected member or the Governing Body requests a hearing to challenge the recommendations.

## 11.2 Summary Restriction of Suspension

11.2.1 Criteria for Initiation

Whenever a Member's conduct appears to require that immediate action be taken to protect the life or well-being of patient(s) or to reduce a substantial and imminent likelihood of significant impairment of the life, health, or safety of any patient, prospective patient, or other person, the Governing body, the Administrator, the Medical Staff President, the Medical Executive Committee, or the head of the Department in which the Member holds privileges may summarily restrict or suspend the Medical Staff membership or Clinical Privileges of such member. Unless otherwise stated, the summary restriction or suspension shall become effective immediately, and the person or body responsible shall promptly give written notice to the Member as described below, the Governing Body, the Medical Executive Committee, and the Administrator. The summary restriction or suspension may be limited in duration and shall remain in effect for the period stated or until resolved as set forth herein. Unless otherwise indicated by the terms of the summary restriction or suspension, the Member's patients shall be promptly assigned to another member(s) by the Department Chair or by the Medical Staff President, considering, where feasible, the wishes of the patient in the choice of a substitute Member.

11.2.2 Written Notice of Summary Suspension

Within one working day of imposition of a summary suspension, the affected Medical Staff Member shall be provided with written notice of such suspension. This initial written notice shall include a statement of facts demonstrating that the suspension was necessary because failure to suspend or restrict the practitioner's privileges summarily could

reasonably result in an imminent danger to the health of an individual. The statements of facts provided in this initial notice shall also include a summary of one or more particular incidents giving rise to the assessment of imminent danger. This initial notice shall not substitute for, but is in addition to, the notice required by theses Bylaws for further action of the MEC regarding issues related to such a summary suspension.

11.2.3 Medical Executive Committee Action

As soon as practicable after a summary restriction or suspension has been imposed, but no more than ten (10) calendar days thereafter, a meeting of the Medical Executive Committee shall be convened to review and consider the summary suspension or restriction. The Member may attend the meeting and make a statement concerning the issues under investigation on such terms and conditions as the Medical Executive Committee may impose. In no event shall any meeting of the Medical Executive Committee, with or without the Member in attendance, constitute a hearing, nor shall any procedural rules apply. A Member's failure, without good cause, to attend a meeting of the Medical Executive Committee after a written request to attend was mailed to the Member by the Medical Executive Committee, shall constitute a waiver of the Member's right to appear and be heard. The request of the Medical Executive Committee for the Member to attend the meeting shall be made in writing, mailed to Member's last known address by first class mail of the United States Postal Service at least five (5) calendar days before the meeting, and shall inform the Member that his or her failure to attend said meeting shall constitute a waiver of his or her rights to appear and be heard. The Medical Executive Committee may postpone or reschedule the meeting on the written request of the Member. The Medical Executive Committee may modify, continue, vacate, or terminate the summary restriction or suspension. The Medical Executive Committee shall mail the Member written notice of its decision that shall be effective upon deposit in the United States Mail.

11.2.4 Procedural Rights

Unless the Medical Executive Committee terminated or vacates the summary restriction or suspension, the Member is entitled to the procedural rights afforded by these Bylaws.

### 11.3 Grounds for Automatic Suspensions and/or Restrictions

In certain instances, the Member's Privileges or membership may be suspended or limited as a result of certain occurrences that disqualify the member from membership or the exercise of certain Privileges. These grounds for automatic suspension do not require any action of the MEC or the Governing Body prior to the suspension and/or restriction. If a Member requests a hearing to challenge these automatic suspensions and/or restrictions, the scope of such a hearing is limited. The only question before the Judicial Review Committee in these situations is whether the grounds for automatic suspension have occurred.

11.3.2 Licensure

*A.* Revocation and Suspension

Whenever a Member's license or other legal credential authorizing practice in the state is revoked or suspended by the applicable licensing or certifying authority, Medical Staff membership and Clinical Privileges shall be automatically revoked as of the date such action becomes effective.

*B.* Restriction

Whenever a Member's license or other legal credential authorizing practice in this state is limited or restricted by the applicable licensing or certifying authority, any Clinical Privileges which the Member has been granted at the Hospital which are within the scope of said limitation or restriction are automatically limited or restricted in a similar manner, as of the date such action becomes effective and throughout its term.

*C.* Probation

Whenever a Member is placed on probation by the applicable licensing or certifying authority, his or her membership status and Clinical Privileges are automatically subject to the same terms and conditions of the probation as of the date such action becomes effective and throughout its term.

*D.* Suspension of Membership when a License is Not Renewed

Expiration:

Whenever a Member's license or other credential authorizing practice in the state expires, Medical Staff Membership and Clinical Privileges shall automatically suspended. If the member renews his or her license and is effective retroactive, the suspension will be vacated. If it is not renewed within six (6) months, Medical Staff Membership and Privileges shall be automatically revoked.

11.3.3 Controlled Substances

Whenever a Member's DEA certificate is revoked, limited or suspended, the Member automatically and correspondingly be divested of the right to prescribe medications covered by the certificate, as of the date such action becomes effective and throughout its term.

*A.* Probation

Whenever a Member's DEA certificate is subject to probation, the Member's right to prescribe such medications shall automatically become subject to the same terms of the probation, as of the date such action becomes effective and throughout its term.

11.3.4 Failure to Satisfy Appearance Requirement

Failure of a Member, without good cause, to appear at a Special Appearance is cause for automatic suspension of membership and restriction of Privileges.

11.3.5 Medical Records

Members of the Medical Staff are required to complete medical records within such reasonable time as may be prescribed by the Medical Executive Committee. Failure to comply with the Medical Executive Committee policies regarding completion of medical records is criteria for suspension or other corrective action. If a Member is automatically suspended for incomplete records, his/her membership is automatically reinstated once the medical records are completed. A prolonged period of automatic suspension or a repeated pattern of automatic suspensions for incomplete medical records may be grounds for further corrective action by the Medical Staff and may result in adverse reports to governmental and licensing authorities.

11.3.6 Professional Liability Insurance

Failure to maintain professional liability insurance shall result in the immediate suspension of the Member's Clinical Privileges. Written notice of the suspension shall be mailed to the member at his or her last known address. Said notice shall also state that the member has ninety (90) days to provide proof of professional liability insurance, that the suspension will continue until proof of insurance is provided, and that failure to provide proof of insurance within ninety (90) days shall result in termination of Medical Staff membership. If proof of professional liability insurance is not provided to the Medical Executive Committee within ninety (90) days, the Medical Executive Committee shall mail written notice of termination of Medical Staff membership to the Member at his or her last known address, including the information that he or she is entitled to the procedural rights set forth in these Bylaws.

# ARTICLE 12

## HEARING AND APPELLATE REVIEWS

### 12.1 Grounds for Hearing

Except as otherwise specified in these Bylaws, any one or more of the following actions or recommended actions shall be deemed actual or potential adverse action and constitute grounds for a hearing:

12.1.1 Denial of Medical Staff Membership;

12.1.2 Denial of requested advancement in Staff Membership category;

12.1.3 Denial of Medical Staff reappointment;

12.1.4 Demotion to lower Medical Staff category;

12.1.5 Suspension of Staff Membership;

12.1.6 Revocation of Medical Staff Membership;

12.1.7 Denial of any requested Clinical Privilege(s) except temporary Privileges;

12.1.8 Involuntary reduction of current Clinical Privileges, including temporary Privileges;

12.1.9 Suspension of any Clinical Privileges, including temporary Privileges;

12.1.10 Termination of any or all Clinical Privileges, including temporary Privileges;

12.1.11 Involuntary imposition of significant consultation or monitoring requirements, excluding monitoring incidental to provisional status;

12.1.12 Any other restriction(s) on Medical Staff membership or Clinical Privileges which is reportable pursuant to Section 805 of the Business and Professions Code.

**Commented [cb31]:** Should these be listed as A, B, C … rather than as separate section numbers?

### 12.2 Exhaustion of Remedies

If adverse action described above is taken or recommended, the applicant of Member must exhaust the remedies afforded by these Bylaws before resorting to legal action.

### 12.3 Requests for Hearing

12.3.1 Notice of Action or Proposed Action.

In the event of a proposed or actual action against a Member of the Medical Staff or an applicant, the Medical Staff President~~Administrator~~ shall give the Member or applicant:

12.3.2 Prompt notice of the recommendation or action, including a brief description of the reasons for the recommendation or action;

**Commented [cb32]:** Same as comment 31

12.3.3 Notice of the right to request a hearing;

12.3.4 Notice that failure to request a hearing within the prescribed time period and in the proper manner constitutes a waiver of rights to a hearing and to an appellate review on the matter that is the subject of the notice;

12.3.5 Notice regarding whether the proposed action, if adopted, is reportable pursuant to Business & Professions Code Section 805 and following;

12.3.6 A summary of the rights the Member or applicant will have at the hearing.

12.3.7 Requesting a Hearing

The affected Member or applicant must request a hearing within thirty (30) calendar days after the date of the notice of action or proposed action. The request for hearing shall be in writing and address to the ~~Administrator~~Medical Staff President. Failure to make a timely request and in the manner described may result in the denial of a hearing at the discretion of the Medical Executive Committee.

12.3.8 Time and Place for Hearing

Upon receipt of a request for hearing, the Medical Staff President~~Administrator~~ shall schedule a hearing and provide notice to the Member or applicant of the time, place and date of the hearing. The hearing shall commence not less than thirty (30) days or more than ninety (90) days from the date of the Notice of Hearing. When the Member is under summary suspension, the hearing shall commence not more that forty-five (45) days from the date of the Notice of the Hearing is mailed or otherwise delivered to the Member under summary suspension. The Member may waive these time limits if he/she wishes.

12.3.9 Notice of Charges

In the Notice of Hearing, the Medical Staff President~~Administrator~~ shall state the reason(s) for the adverse action taken or recommended, including the acts or omissions with which the Member or applicant is charged and a list of the charges in question, where applicable. In addition, the Medical Staff President~~Administrator~~ shall furnish a list of witnesses the Medical Executive Committee expects will testify on its behalf at the hearing. This list may be amended at a later time should new names emerge.

12.3.10 Judicial Review Committee

When a hearing is requested, the Medical Executive Committee shall appoint a Judicial Review Committee which shall be composed of not less than five (5) Members of the Medical Staff who have not actively participated in the consideration of the matter leading up to the recommendation or action and who are not in direct economic competition with the member charged. The Medical Executive Committee shall designate

**Commented [cb33]:** Same as comment 31

**Commented [cb34]:** Same as comment 31

**Commented [cb35]:** Same as comment 31

**Commented [cb36]:** Same as comment 31

**Commented [cb37]:** Section numbering may need to be revised – See comment 31

one of the five as Chair. Knowledge of the matter involved shall not preclude a Member of the Medical Staff from serving as a member of the Judicial Review Committee. In the event that it is not feasible to appoint a Judicial Review Committee from the Medical Staff, the Medical Executive Committee may appoint practitioners who are not Members of the Medical Stall. The Judicial Review Committee shall include at least one member with the same healing arts licensures as the affected Member. All other members shall have M.D. or D.O. degrees.

12.3.11 Failure to Appear or Proceed

Failure, without good cause, of the Member or applicant to personally attend and proceed at such a hearing shall constitute voluntary acceptance of the recommendations or action at issue.

12.3.12 Postponements and Extensions

Once a hearing is requested, postponements and extension of time beyond the times permitted in these Bylaws may be permitted by the ~~Administrator~~Medical Staff President, the Judicial Review Committee, or its Chairperson on a showing of good cause.

## 12.4 Hearing Procedure

12.4.1 Pre-hearing Procedure

*A.* The Medical Executive Committee or its designee may request, in writing, a list of names and addresses of all persons the Member or applicant anticipates calling to testify at the hearing on the Member's or applicant's behalf. The Member or applicant shall furnish the witness list within seven (7) days of the date of the request. Upon written request, the Medical Executive Committee or its designee shall provide the Member or applicant with copies of all documents upon which the adverse action is based. Upon written request, the Member or applicant shall provide the Medical Executive Committee or its designee with copies of all documents the Member applicant expects to present at his/her hearing.

*B.* It is the duty of the Member or applicant and the Medical Executive Committee or its designee to exercise reasonable diligence in notifying the Chairperson of the Judicial Review Committee of any pending or anticipated procedural disputes as far in advance of the scheduled hearing as possible, in order that decision concerning such matters may be made in advance of the hearing. Objections to any pre-hearing decision may be again made at the hearing.

12.4.2 Representation

The hearings provided for in these Bylaws are for the purpose of intra-professional resolution of matters bearing on professional conduct, professional competency, and/or character. The Member or applicant shall be entitled to representation by legal counsel in

any phase of the hearing and shall receive notice of the right to obtain representation by an attorney at law. In the absence of legal counsel, the Member or applicant shall be entitled to be accompanied by and represented at the hearing by a practitioner licensed to practice in the State of California who is not also an attorney at law. If the Member or applicant is not represented by an attorney, the Medical Executive Committee shall appoint a representative who is not an attorney to represent its position, present the supporting witnesses and material, examine witnesses, and respond to appropriate questions. The Medical Executive Committee shall only be represented by an attorney at law if the Member or applicant is also represented by an attorney.

12.4.3 The Hearing Officer

The Medical Executive Committee shall appoint a Hearing Officer (who may also be the Chair of the Judicial Review Committee) to preside at the hearing. The Hearing Officer will not act as a prosecuting officer or as an advocate. The Hearing Officer shall endeavor to ensure that all participants in the hearing have a reasonable opportunity to be heard and to present relevant oral and documentary evidence in an efficient and expeditious manner, and that proper decorum is maintained. The Hearing Officer shall determine the order of or procedure for presenting evidence and argument during the hearing and shall have the authority and discretion to make all rulings on questions that pertain to matters of law, procedure and/or the admissibility of evidence. If the Hearing Officer determines that any participant is not proceeding in an efficient and expeditious manner, the Hearing Officer may take actions as seems warranted by the circumstances.

12.4.4 Hearing Record

A record of the hearing shall be made that is of sufficient accuracy to permit review by any appellate group that may later be called upon to review the matter. The Judicial Review Committee may determine to make the record by use of (a) a court reporter or (b) by a tape recording and minutes of the proceedings. The Member or applicant may request, in writing, a copy of the hearing record. The copy will be provided to the Member or applicant upon payment of the cost of preparing and copying the record.

12.4.5 Rights of the Parties

Both parties at the hearing may call and examine witnesses for relevant testimony, introduce relevant documents, cross-examine and/or impeach witnesses who have testified on any matter relevant to the issues, and otherwise rebut evidence, as long as theses rights are exercised in an efficient and expeditious manner. The Member or applicant may be called by the Medical Executive Committee or its designee and examined as if under cross-examination. The Member or applicant may, at the beginning of the hearing, challenge the membership of the Judicial Review Committee because of alleged conflict of interest on the part of any committee member. Should such a challenge occur, the Medical Staff President may choose to remove and replace the challenged member

(requiring a postponement if necessary) or proceed without removal. If the Medical Staff President chooses to proceed without removal, any challenge by the Member or applicant shall be made succinctly in writing and shall be make part of the hearing record.

12.4.6 Miscellaneous Rules

Judicial rules of evidence and procedure relating to the conduct of the hearing, examination of witnesses, and presentation of evidence, do not apply to a hearing conducted under this Article. Any relevant evidence, including Quality Assurance profiles, credentials files, and hearsay shall be admitted if it is the sort of evidence on which responsible persons are accustomed to rely in the conduct of serious affairs, regardless of the admissibility of such evidence in a court of law. However, no finding of fact may be based solely on hearsay. The Judicial Review Committee may interrogate the witnesses and/or call additional witnesses if it deems such action appropriate. At its discretion, the Judicial Review Committee may request or permit both sides to file written arguments. A Medical Staff Member does not have the right to view or use peer review information of other practitioners as part of the fair hearing process.

12.4.7 Burden of Proof

When a hearing related to denial of initial appointment, denial of requested Department or division membership, denial or restriction of Clinical Privileges, mandatory consultation or supervision requirements as it pertains to an initial application for membership or Privileges, or denial of a request to advance from courtesy to active Staff, or termination due to inactivity, the practitioner has the burden of proving that the adverse action or recommendation lacks a substantial factual basis or that the action is arbitrary, unreasonable, or capricious. Otherwise, the Medical Executive Committee has the burden of proving that the adverse action is warranted and has a substantial factual basis.

12.4.8 Adjournment and Conclusion

After the presentation of the oral and written evidence, oral closing arguments, or written closing arguments, if requested by the Judicial Review Committee, the hearing shall be closed.

12.4.9 Basis for Decision

The decision of the Judicial Review Committee shall be based on the evidence introduced at the hearing, including all logical and reasonable inferences from the evidence and the testimony, and shall be within the constraints of these Bylaws. The decision of the Judicial Review Committee shall be final, subject to the Appeal provision of these Bylaws.

12.4.10 Presence of Judicial Review Committee members and Vote

A majority of the Judicial Review Committee must be present throughout the hearing and deliberations. If the committee member is absent from any part of the proceedings, he/she may not participate in the deliberations or the decision.

12.4.11 Decision of the Judicial Review Committee

*A.* The Judicial Review Committee shall make findings of fact.

*B.* The Judicial Review Committee may make one of the following decisions based upon the findings of fact:

1) The action of the Medical Executive Committee is sustained;
2) The action of the Medical Executive Committee is overturned; or
3) The action of the Medical Executive Committee is modified. (The modification may be less or more adverse to the Member or applicant than the action of the Medical Executive Committee.)

*C.* The Judicial Review Committee shall make its decision by simple majority vote. The numerated results of the vote are not reported in the final report of the Judicial Review Committee.

*D.* Within thirty (30) workdays after adjournment of the hearing, the Judicial Review Committee shall render a decision, which shall be in writing. If the Member is currently under suspension, however, the time for the decision and report shall be fifteen (15) workdays. The original report and decision shall be forwarded to the ~~Administrator~~Medical Staff President, the Professional Affairs Committee and the Member or applicant at his or her last known address. The report shall contain the findings of fact, a statement of the reasons in support of the decision, and the decision. The decision of the Judicial Review Committee shall be final, subject to such rights or appeal as set forth in these Bylaws.

## 12.5 Appeals

12.5.1 Time for Appeal

Within ten (10) calendar days of the date that the report/decision of the Judicial Review Committee is mailed to the Member of applicant, either the Member or applicant or the Medical Executive Committee may request an appellate review of the decision. The written request for such review shall be delivered to the ~~Administrator~~ Medical Staff President and mailed or delivered to the other party to the hearing. If a request for appellate review is not made within the specified time period, the decision of the Judicial Review Committee shall be final.

12.5.2 Grounds for Appeal

A written request for an appeal shall include an identification of the grounds for appeal and a clear and concise statement of the fact in support of the appeal. The grounds for

appeal from the hearing shall be: (a) substantial non-compliance with the procedures required by these Bylaws or applicable law which has created demonstrable prejudice; (b) the decision was not supported by substantial evidence based upon the hearing record or such additional information as may be permitted.

12.5.3 Time, Place and Notice

If an appellate review is to be conducted, the appeal board shall, within thirty (30) days after receipt of notice of appeal, schedule a review date and cause each side to be given notice of the time, place and date of the appellate review. The date of appellate review shall not be less than thirty (30) nor more than sixty (60) days from the date of such notice, provided, however, that when a request for appellate review concerns a Member who is under suspension which is then in effect, the appellate review shall be held as soon as the arrangements may reasonably be made, not to exceed fifteen (15) days from the date of the notice. The time for appellate review may be extended by the appeal board for good cause.

12.5.4 Appeal Board

The Governing Body, or an authorized committee of the Governing Body, shall sit as the Appeal Board. Knowledge of the matter involved shall not preclude any person from serving as a member of the Appeal Board, so long as that person did not take part in a prior hearing on the same matter. The Appeal Board may select an attorney to assist it in the proceeding, but that attorney shall not be entitled to vote with respect to the appeal.

12.5.5 Appeal Procedure

The proceeding by the Appeal Board shall be in the nature of an appellate hearing based upon the record of the hearing before the Judicial Review Committee, provided that the Appeal Board may accept additional oral or written evidence, subject to a foundational showing that such evidence could not have been made available to the Judicial Review Committee in the exercise of reasonable diligence and subject to the same rights of cross-examination or confrontation provided at the Judicial Review Hearing; or the Appeal Board may remand the matter to the judicial Review Committee for the taking of further evidence and for decision. Each party shall have the right to be represented by legal counsel in connection with the appeal, to present a written statement in support of his or her position on appeal and, in its sole discretion, the Appeal Board shall present its written recommendations as to whether the Governing Body should affirm, modify, or reverse the Judicial Review Committee decision, or remand the matter to the Judicial Review Committee for further review and decision.

12.5.6 Decision

*A.* Except as otherwise provided herein, within thirty (30) days after the conclusion of the appellate review proceeding, the Governing Body shall render a decision in writing and shall forward copies thereof to each side involved in the hearing.

*B.* The Governing Body may affirm, modify, or reverse the decision of the Judicial Review Committee or remand the matter to the Judicial Review Committee for reconsideration. If the matter is remanded to the Judicial Review Committee for further review and recommendation, said committee shall promptly conduct its review and make its recommendations to the Governing Body. This further review and the time required to report back shall not exceed thirty (30) days in duration except as the parties may otherwise agree or for good cause as jointly determined by the Chairpersons of the Governing Body and the Judicial Review Committee.

*C.* In the event the decision of the Governing Body is unfavorable to the applicant or Member, that action shall become final. In the event the decision is favorable, that action also shall become final unless the Medical Executive Committee elects within fifteen (15) days to submit the matter to an ad-hoc committee. This ad-hoc committee shall be composed of two (2) members of the Governing Body (appointed by the Chair of the Governing Body) and two (2) Members of the Medical Staff (as appointed by the Medical Staff President) and shall have access to the records from the hearing and appeal. The decision of this committee shall be in writing within thirty (30) days of receipt of the matter unless extended for good cause. The decision of this committee shall specify the reasons for the action taken and shall be forwarded to the Governing Body who shall reconsider its action, and then render a final decision.

12.5.7 Right to One Hearing

No Member or applicant shall be entitled to more than one evidentiary hearing and one appellate review on any matter that has been the subject of adverse action or recommendation.

## 12.6 Exceptions to Hearing Rights

12.6.1 Automatic Suspension or Limitations of Practice Privileges.

In the circumstances set forth in these Bylaws causing Automatic Suspension, the issues which may be considered at a hearing, if requested, shall not include evidence designed to show that the determination by the licensing or credentialing authority was unwarranted, but only (1) whether the revocation, suspension, restriction, or probation occurred, (2) the terms of any restrictions, or probation, and (3) whether the Member may continue to practice in the Hospital with the Limitations imposed by the licensing or credentialing authority.

12.6.2 Expunction of Disciplinary Action.

Upon petition, the Medical Executive Committee, in its sole discretion, may expunge previous disciplinary action upon a showing of good cause or rehabilitation.

# ARTICLE 13

## CONFIDENTIALITY

### 13.1 General

Discussion, deliberation, records and proceedings of all meetings of all Medical Staff committees having the responsibility of evaluation and improvement of quality care rendered in this Hospital, including, but not limited to meetings of the Medical Staff meeting as a committee of the whole, meeting of Departments and Division, meeting of Committees, and meetings of special and ad-hoc committees and including information regarding any Member or applicant to the Medical Staff, shall be confidential to the fullest extent permitted by law.

"Records" includes, but is not limited to, the credentials and quality assurance profiles of individual practitioners and the records of all Medical Staff credentialing, peer review, and quality review activities.

Records will be disclosed only in the furtherance of credentialing, peer review, and quality review activities, and only as specifically permitted under the condition described in this Article, or otherwise required by law.

Records that are disclosed to the Governing Body of the Hospital or its authorized representatives, in order for the Governing Body to discharge its lawful obligations and responsibilities, shall be maintained as confidential.

### 13.2 Breach of Confidentiality

Inasmuch as effective peer review and consideration of the qualifications of Medical Staff Members and applicants to perform specific procedures must be based on free and candid discussions, any breach of confidentiality provision of these Bylaws, except in conjunction with other Hospital, professional society, or licensing authority duties, is unauthorized conduct for any Medical Staff member and is grounds for corrective action.

### 13.3 Protection

All Medical Staff records shall be maintained in the Medical Staff Office and in the Quality Assurance Department. Such records shall be maintained in locking cabinets under the custody of the Chairpersons of the Credentials Committee and the Patient Safety and Performance Improvement Committee or their designees. The profile cabinets will be locked except during such times as these Chairpersons or their designees are able to monitor access to the records.

## 13.4 Access by persons or Agencies Outside the Jurisdiction of the Hospital

13.4.1 Credentialing or Peer Review at Other Hospitals

The Medical Staff president, the Credentials Committee Chairperson or the designee of either, may release information contained in a credentials profile in response to a request from another hospital or its Medical Staff. That request must include information that the practitioner is a member of the requesting hospital's Medical Staff, exercise privileges at the requesting hospital, or is an applicant for Medical Staff membership or privileges at that hospital, and must include a release for such records signed by the concerned practitioner.

13.4.2 Requests by Hospital Surveyor/Investigators

Hospital surveyor/investigators are entitled to inspect records (excluding quality assurance profiles, which shall not be made available to any persons or agencies outside the jurisdiction of the Hospital) covered by this Article on the hospital premises in the presence of the Medical Staff President (or designee), provided that:

*A.* No originals or copies may be removed from the premises;

*B.* Access is only with concurrence of the Administrator (or designee) and the Medical Staff President (or designee); and

*C.* The surveyor demonstrates the following to Hospital and Medical Staff representatives;

1) That the surveyor has specific statutory or regulatory authority to review the requested materials;
2) That the materials sought are directly relevant to the matter being investigated;
3) That the materials sought are the most direct and least intrusive means to carry out the pending investigation or survey, bearing in mind that credentials profiles regarding individual practitioners are confidential materials;
4) That sufficient specificity is provided to allow for the production of individual documents without undue burden to the Hospital or Medical Staff; and
5) That in the case of a request for documents with physician identifiers, the need for such identifiers is documented.
6) Additionally, at the discretion of the Medical Staff President and the Administrator, the surveyor may be asked to sign a statement acknowledging notification of the provisions of confidentiality. If he/she declines to sign, it will be noted at the bottom of the prepared statement that the surveyor, identified by name, has declined to sign but has been provided a copy of confidentiality provisions.

13.4.3 Subpoenas

All subpoenas of Medical Staff records shall be referred to the Administrator, who shall have the option of consulting legal counsel for the purpose of formulation a response.

The Administrator shall notify the Medical Staff President when a subpoena for Medical Staff records is received.

13.4.4 Requests from Licensing Boards

Current law allows the California Medical Board, the Board of Osteopathic Examiners, and the Board of Dental Examiners to review certain materials pertaining to Medical Staff hearings concerning corrective action recommendations or decisions. Given the current requirements of law, copies of the following records of a Medical Staff disciplinary hearing shall be made available to the appropriate licensing board upon the specific request of such board:

*A.* The Notice of Charges presented to the practitioner before the beginning of a Medical Staff hearing;
*B.* Any document, medical record, or other exhibit received in evidence at the hearing; and/or,
*C.* Any written opinion, finding, or conclusions of the Medical Staff hearing committee that were made available to the concerned practitioner.

In the event that the concerned practitioner did not request a hearing as per these Bylaws, the Notice of Action or Proposed Action shall be made available

The Medical Staff President, or designee, must review and approve the disclosure before it is made. Any request for documents other than those cited above shall be disclosed only in accordance with this Article.

13.4.5 Other Requests

All other requests for information contained in the Medical Staff records shall be forwarded to the Medical Staff President and the Administrator for an appropriate response.

## 13.5 Access by Persons within the Jurisdiction of the Hospital

13.5.1 Quality Assurance Profiles

*A.* Any practitioner may review his/her Quality Assurance profiles and/or work folder without cause and without approval by giving timely notice in writing to the designee of the Medical Executive Committee. An observer shall be present when the practitioner is reviewing his/her profile. When a Member has reviewed his/her profile as provided under this section, he/she may request a correction or deletion of information in his/her Quality Assurance profile by written request to the Medical Executive Committee. Such a request shall include a statement of the basis for the action requested. The request will be considered and acted upon in accordance with the Bylaws.

*B.* Except as noted above, no Member of the Medical Staff, other than those specified in the Bylaws, may be provided with access to a practitioner's Quality Assurance profile and/or work folder. No member of the Hospital Administration or the Governing Body may be provided with access to practitioner's Quality Assurance profile or work folder, except as required by the administrative hearing process in these Bylaws. The individual practitioner under review will be notified in writing whenever this request occurs.

*C.* Quality Assurance profiles may be submitted as evidence during a fair hearing conducted pursuant to these Bylaws.

13.5.2 Credential Files

A Medical Staff Member shall be granted access to his/her own credentials files, subject to the following provisions;

*A.* The request shall give timely notice to the Medical Staff President or his/her designee;

*B.* The Member may review, and receive a copy of, only those documents provided by or personally address to the Member. A summary of all other information, including peer review committee findings, letters of reference, monitoring reports, complaints, etc., shall be provided to the Member in a timely manner, in writing, by the Medical Staff President or designee. Such summary shall disclose the substance, but not the source, of the information summarized;

*C.* The review by the Member shall take place in the Medical Staff Office, during normal working hours, in the presence of the Medical Staff President or designee.

13.5.3 When a Member has reviewed his/her file, he/she may address to the Medical Staff President a written request for correction or deletion of information in his/her credentials files. Such request shall include a statement of the basis for the action requested. The Medical Staff President shall review such a request within a reasonable time and shall recommend to the Medical Executive Committee after such review whether to make the correction or deletion requested. The Medical Executive Committee, when so informed, shall either grant or deny the request by a majority vote. The Member shall be notified promptly, in writing, of the decision of the Medical Executive Committee. In any case, a Member shall have the right to add to his/her own credentials profile a statement responding to any information contained in the file.

13.5.4 The Medical Staff President, Department Chairpersons, committee chairpersons, the Chief Medical Officer, and the Administrator shall have access to credentials files to the extent necessary to perform their official duties. Medical Staff committee members shall have access only to the records of committees on which they serve.

13.5.5 No members of the Hospital Administrator or the Governing Body will be given access to a practitioner's credentials file; however, the Governing Body or its designee, consistent

with its ultimate responsibility to oversee quality or care, may wish to have an individual practitioner's credentials profile evaluated for specific reasons of concern. The individual practitioner under review must be immediately notified in writing whenever this request occurs.

# ARTICLE 14

## GENERAL PROVISIONS

### 14.1 Rules and Regulations

The Medical Staff must annually review the Rules. The procedure for adopting, amending, and repealing the Rules is set forth in Article 15 of the Bylaws. Once a rule or regulations is adopted or amended by the Governing Body, it is effective and governs applicants and Members of the Medical Staff. If there is a conflict between the Bylaws and the Rules, the Bylaws prevail. The process set forth in Article 15 of the Bylaws is the sole method for the initiation, adoption, amendment, and repeal of medical Staff Rules.

### 14.2 Dues or Assessments

The Medical Executive Committee shall annually recommend the amount of annual dues or assessments, if any, for each category of Medical Staff membership, subject to the approval of the Medical Staff, and to determine the manner of expenditure of such funds.

### 14.3 Construction of Terms and Headings

The captions or headings in these Bylaws are for convenience only and are not intended to limit of define the scope of or affect any of the substantive provisions of these Bylaws. These Bylaws apply with equal force to both genders wherever either term is used.

### 14.4 Authority to Act

Any Member or Members who act in the name of this Medical Staff without proper authority shall be subject to such disciplinary action, as the Medical Executive Committee may deem appropriate.

### 14.5 Division of Fees

Any division of fees by Members of the Medical Staff is forbidden and any such division of fees shall be cause for exclusion or expulsion from the Medical Staff.

### 14.6 Special Notices

Except as otherwise provided in these Bylaws, all notices, demands and requests required or permitted to be mailed shall be in writing addressed to the last known address provided by the Member, sealed, with postage fully paid, and deposited in the United States Postal Service. In the alternative, any notice, demand, or request that is required or permitted to be mailed may be hand-delivered. If the official records of the Medical Staff and the Hospital contain different addresses, the notice, request or demand shall be mailed to both addresses.

## 14.7 Requirements for Elections of Medical Staff President, Department Heads, Division heads and for Bylaws Amendments

14.7.1 Elections by Secret Ballot:

All elections shall be by secret ballot.

14.7.2 Eligibility to Vote:

Only active Members of the Medical Staff in Good Standing may vote in elections governed by these Bylaws. An active Member of the Medical Staff is one who has been approved for active status by the Governing Body at least seven (7) days before the day ballots are mailed.

14.7.3 Mailing Address:

It is the responsibility of each Member of the Medical Staff to provide the Medical Staff Office with his/her current mailing address. Ballots will be mailed to the last address provided by the Medical Staff Member.

14.7.4 Runoff Elections:

A candidate shall be elected by a majority of the votes cast. If no candidate receives a majority vote on the first ballot, a runoff election shall be conducted as soon as is practical between the two candidates who received the highest pluralities. If the runoff election results in a tie, the election shall be repeated. If there is still a tie, the Medical Staff president will cast the deciding vote. If the election is for the Medical Staff President, the Medical Executive Committee will decide.

14.7.5 Voting within Committees and Departments:

At the discretion of the Department Chair, ballots may be by voice, by hand, or by secret ballot. However, at the request of any voting Member within that committee or Department, that vote shall be by secret ballot. Voting Members are determined in accordance with these Bylaws.

## 14.8 Disclosure of Interest.

All nominees for election or appointment to Medical Staff offices, Department Chairs, or the Medical Executive Committee shall, at least twenty (20) days prior to the date of election or appointment, disclose in writing to the Medical Executive Committee those personal, professional, and financial affiliations and relationships of which they are reasonably aware that could foreseeably result in a conflict of interest with their activities or responsibilities on behalf of the Medical Staff.

## 14.9 Authorization, Immunity, and Releases.

14.9.1 Authorization and Conditions.

By applying for or exercising clinical privileges within this hospital, an applicant;

*A.* Authorizes representatives of the hospital and the Medical Staff to solicit, provide, and act upon information bearing upon, or reasonably believed to bear upon, the applicant's professional ability and qualifications;

*B.* Authorized persons and organizations to provide information concerning such practitioner to the Medical Staff;

*C.* Agrees to be bound by the provisions of this Article and to waive all legal claims against any representative of the Medical Staff or the hospital who acts in accordance with the provisions of these Bylaws; and

*D.* Acknowledges that the provisions of these Bylaws are express conditions to an application for Medical Staff membership, the continuation of such membership, and to the exercise of clinical privileges at this hospital.

14.9.2 Releases.

Each applicant or Member shall, upon request of the Medical Staff or hospital, execute general and specific releases as necessary to carry out the provision of these Bylaws.

## 14.10 Standards for History and Physical Examination.

14.10.1 The complete history and physical examination (H&P), as required for the patient's medical record, shall be completed within twenty-four (24) hours after admission of the patient, and, in case a patient is admitted for surgery, shall be completed prior to the time surgery is done. When the history and physical examination is dictated, a holding note must be recorded in the medical record at the time of examination. A history and physical may be performed up to thirty (30) days in advance provided a durable and legible copy is inserted into the inpatient medical record no later than twenty (24) hours after admission and is updated as appropriate.

14.10.2 Special Standards for Elective Surgery.

The following procedure is to be followed when scheduling a patient for either elective outpatient surgery or elective surgery to be done on the day of admission (for general or regional anesthesia.)

14.10.3 The scheduling surgeon must schedule the patient for a pre-op H&P to be done within thirty (30) days prior to surgery. The surgeon must clearly enter in the medical record:

*A.* The procedure being scheduled and type of anesthesia;

*B.* The surgical indications;

*C.* Whether the patient is to be admitted following the surgery.

10.10.4 It is the responsibility of the surgeon scheduling the procedure to obtain informed consent from the patient at the time it is scheduled, having explained the risks and benefits to the patient.

10.10.5 The pre-op H&P and all ordered tests will be reviewed by the anesthesiologist prior to surgery. The provider performing the H&P and/or the primary care provider may be consulted in evaluation of abnormal results prior to cancellation of surgery.

# ARTICLE 15

## ADOPTION AND AMENDMENT OF BYLAWS AND RULES

**15.1 Annual Review.**
These Bylaws and the Rules shall be reviewed annually by the Medical Executive Committee.

**15.2 Procedure.**
Upon the request of the Medical Staff President, the Medical Executive Committee, the Administrative Affairs Committee, or upon timely written petition signed by at least 10% of the Members of the Medical Staff in Good Standing who are entitled to vote, consideration shall be given to the adoption, amendment or repeal of these Bylaws or Rules.

**15.3 Medical Staff Action.**
These Bylaws and Rules may be adopted, amended, or repealed by:

15.3.1 The affirmative vote of a majority of the active Staff Members in Good Standing present at a regular or special Staff Meeting at which a quorum attends, provided that the proposed documents or amendments are made available to Staff Members entitled to vote thereon no less than two (2) weeks before balloting with or at the time of notice of the meeting; or

15.3.2 The affirmative vote of a majority of ballots returned by Members in Good Standing, provided that a copy of the proposed documents or amendments are made available to each Staff member entitled to vote thereon no less than two (2) weeks before balloting, and provided that no less than two (2) weeks' time interval exists between the date the ballot was mailed to active Members and the due date of the ballot.

All elections to adopt amend or repeal the Bylaws or Rules and Regulations shall be conducted in accordance with these Bylaws.

**15.4 Approval.**
By laws and Rules changes adopted by the Medical Staff shall not become effective until approved by the Governing Body. Neither the Medical Staff nor the Governing Body may unilaterally amend the Bylaws or Rules.

**15.5 Exclusivity.**

The mechanism described herein shall be the sole method for the initiation, adoption, amendment, and/or repeal of the Bylaws or Rules.

# Rules and Regulations

These Rules and Regulations are adopted pursuant to Article 15 of the Medical Staff Bylaws. These Rules use the same Definitions as the ones described in the Bylaws. The Rules specifically include those policies and procedures that are referenced herein.

## 1. General Rules

### A. Admissions

1. All admissions of patients are subject to rules delineated in the Medical Staff Bylaws, specific department policies and hospital policies.

### B. Continuous Responsibility for Patients

#### *1. Inpatient*

a. The attending physician is responsible for the complete and continuing care of his/her patients. He/she is required to keep appropriate personnel informed as to where he/she can be reached in case of emergency and shall designate at least one physician to render emergency or other necessary patient care if he/she is not available. Each patient shall be reassessed daily.

#### *2. Outpatient*

a. Primary Care Providers are responsible for their panel of patients as described in the Ambulatory Care Policies.

### C. Medical Records

#### *1. General Provisions*

a. Abbreviations

i. An "Unacceptable Abbreviations List" is posted throughout the hospital and clinics. Copies may be obtained from Medical Records.

b. Records Belonging to Health Services Department

i. Refer to Hospital Policy 705 – Removal, Retention and Destruction of Protected Health Information. All medical records and other records relating to the admission, care and discharge of a patient are the property of the Contra Costa County Health Services Department and may be removed from the Health Services Department's jurisdiction and safekeeping only in accordance with a subpoena, court order or other statute. In case of readmission of any patient, all previous records shall be available to the attending physician.

c. Electronic Signature

i. Approved electronic signature of medical records is acceptable for chart completion.

## 2. *Completion of Records*

### a. Inpatient Records

i. Responsibilities of the Members of Medical Staff and General Provisions

b. Content of Staff Entry

i. The attending physician shall be responsible for preparing a complete medical record for each patient as described in Hospital Policy 706 – Medical Record Content. This record shall include at least the following minimum information.

ii. Patients shall be discharged only upon the order of the attending physician or another physician acting as his/her representative. At the time the patient is discharged, the attending physician shall complete the medical record, indicate the reason for admission, state the final diagnosis, record treatment and/or procedures performed, describe the condition of the patient on discharge, including specific comparison with condition on admission and any specific instructions given the patient and/or family (e.g., diet, medication, physical activity and follow-up care.) When pre-printed instructions are given to the patient, the record should so indicate and a sample of the instruction sheet in use at the time must be kept on file in the Medical Records Department. All medical record entries must be signed and dated.

iii. When a patient has been hospitalized a discharge summary is required.

iv. All surgery performed shall be fully described by the operating surgeon in the patient's medical record. Such description shall include a detailed account of the technique used, identification of tissues and foreign material removed, if any, and a description of the findings. Such description shall be done immediately after surgery is concluded. A brief interim operative note shall be placed in the medical record immediately after surgery is concluded if the complete note is not immediately visible in the electronic health record.

v. At the discretion of the attending physician, tissues and foreign materials removed in surgery shall be submitted, together with adequate clinical information, to the pathologist on duty. The Pathology Department may establish appropriate guidelines.

vi. In addition to the operating surgeon's report, the record of every operation involving use of an anesthetic other than local shall include a proper anesthetic record and a post-anesthetic follow-up report.

vii. Standards for History and Physical Examination. The complete history and physical examination (H&P), as required for the patient's medical record, shall be completed within twenty-four (24) hours after admission of the patient, and, in case a patient is admitted for surgery, shall be completed prior to the time surgery is done. When the history and physical examination is done a holding note must be recorded in the medical record at the time of examination. History and physical may be performed up to thirty (30) days in advance provided a durable and legible copy is inserted into the inpatient medical record no later than twenty-four (24) hours after admission of the patient, and, in case a patient is admitted for surgery, shall be completed prior to the time surgery is done. When the history and physical examination is done a holding note must be recorded in the medical record at the time of examination,. A history and physical may be performed up to thirty (30) days in advance provided a durable and legible copy is inserted into the inpatient medical record no later than twenty-four (24) hours after admission and is updated as appropriate. At a minimum the H&P will include the following sections: HPI, Problem List, Allergies, Medications, Physical Exam, and Assessment/Plan.

viii. Special Standards for Elective Surgery. The following procedure is to be followed when scheduling a patient for either elective outpatient surgery or elective surgery to be done on the day of admission (for general or regional anesthesia.)

1. The scheduling surgeon must schedule the patient for a pre-op H&P to be done within thirty (30) days prior to the surgery. The surgeon must clearly enter in the medical record:

    a. The procedure being scheduled and type of anesthesia;

    b. The surgical indications;

    c. Whether the patient is to be admitted following the surgery.

2. It is the responsibility of the surgeon scheduling the procedure to obtain informed consent from the patient at the time it is scheduled, having explained the risks and benefits to the patient.

3. A History and Physical shall be done on all pre-op patients.

4. Pre-op lab work should be scheduled within two weeks prior to surgery.

5. The pre-op H&P and all ordered tests will be reviewed by the anesthesiologist prior to surgery. The provider performing the H&P and/or the primary care provider may be consulted in evaluating abnormal results prior to cancellation of surgery.

### 3. *Delinquency*

a. All charts must be completed ~~by the 13th day post discharge and will be delinquent on the 14th day post discharge if not complete~~within the time limits specified below. A "complete medical record" is defined as one that meets all criteria as set forth.

**i). Inpatient and Surgery**

| Document | Time ~~Delinquent~~Due |
|---|---|
| Discharge Summary…… | Thirteen (13) days post discharge |
| Inpatient History/Physical…… | Twenty-four (24) hours post admission |
| Interval History/Physical…… | Less than twenty-four (24) hours prior to surgery |
| Operative Report…… | Immediately after surgery |
| Pre-anesthesia evaluation ~~(timed note)~~…… | Must be completed prior to being placed under anesthesia unless extreme emergency |
| Post~~/PAR~~ Anesthesia ~~(timed note)~~ note…… | 6 hours after conclusion of anethesia ~~6 hours after conclusion of anesthesia~~ |
| ~~"Early" PAR note……~~ ~~"Complete" recovery note……~~ | ~~Forty-eight (48) hours after conclusion of anesthesia~~ |
| Verbal orders…… | Authenticated by twenty-four (24) hours for IV Fluid or IV drug orders; all others within 48 hours |
| Other inpatient documentation as required by law, including; | At hospital discharge |
| a) Diagnostic and therapeutic orders;<br>b) Clinical observations and results of therapy;<br>c) Reports of procedures, tests, and their results;<br>d) Conclusions at the termination of care.<br>e) All inpatient dictations. | Must be signed within thirteen (13) days and are delinquent after the fourteenth (14th) day. |

### *ii~~5~~. Outpatient Records*

a. Providers are encouraged to chart as soon as possible after visit. At a minimum, the diagnosis and treatment plan shall be charted at the time of the visit. The provider note must be complete within twenty-four (24) hours.

~~b. If their only delinquent records are unsigned outpatient records members will not be suspended until after fourteen (14) days.~~

b. ~~6.~~ Outpatient notes should contain the following elements:

i. Patient identification.

ii. Date of visit.

iii. Relevant history or pertinent update of the illness or injury.

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iv. Physical findings, if applicable.
v. Results of tests and other studies, if applicable.
vi. Diagnostic assessment.
vii. Treatment plan, including prescriptions.
viii. Results of treatment rendered during the visit, if applicable.
ix. Patient teaching, including instructions given to the patient and/or family and follow-up care.

x. The primary care provider should acknowledge all consultations in the medical record.

### *4. Disciplinary Proceedings*

a. Process

i. An incomplete chart is considered "delinquent" fourteen (14) days after it is incomplete the due date as specified at 1.C.3.a. Automatic initiation of disciplinary proceedings for the responsible practitioner will occur as soon as a chart becomes delinquent.

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ii. A letter will be sent to the practitioner responsible for the delinquent records, signed by the Medical Staff President. from Health Information Management. The Medical Staff Office will also contact the practitioner, using the contact information provided to the office by the practitioner. Practitioners are responsible for making sure their contact information is up to date.

iii. The letter shall state:

*A.* The list of delinquent records;
*B.* That failure to complete delinquencies within seven (7) days will result in suspension of all Medical Staff Privileges and Staff Membership by the Medical Staff President until the stated delinquent charts are completed.

iv. If delinquent records referred to in the letter are not completed with seven (7) days, the Medical Staff President shall immediately suspend all Medical Staff Privileges and Membership until the delinquent charts are properly completed. The Medical Staff President will notify the appropriate Department Heads, the Executive Director of the Hospital, Chief Medical Officer and the Residency Director as appropriate.

b. Further Sanctions

i. Any practitioner suspended for a cumulative total of thirty (30) days or more during any calendar 12-month periodyear may will be reported to the Medical Board of California by the Medical Staff President.

~~***5. Outpatient Records***~~

~~c. Providers are encouraged to chart as soon as possible after visit. At a minimum, the diagnosis and treatment plan shall be charted at the time of the visit. The provider note must be complete within twenty-four (24) hours.~~

~~d. If their only delinquent records are unsigned outpatient records members will not be suspended until after fourteen (14) days.~~

~~***6. Outpatient notes should contain the following elements:***~~

~~xi. Patient identification.~~

~~xii. Date of visit.~~

~~xiii. Relevant history or pertinent update of the illness or injury.~~

~~xiv. Physical findings, if applicable.~~

~~xv. Results of tests and other studies, if applicable.~~

~~xvi. Diagnostic assessment.~~

~~xvii. Treatment plan, including prescriptions.~~

~~xviii. Results of treatment rendered during the visit, if applicable.~~

~~xix. Patient teaching, including instructions given to the patient and/or family and follow-up care.~~

~~xx. The primary care provider should acknowledge all consultations in the medical record.~~

## D. Medical Orders

### *1. Inpatient*

a. All orders must be reconciled when a patient is transferred into or out of the Critical Care units (ICU and IMCU.)

   i. Orders can be dictated or telephoned to a health professional listed below and later signed by the attending physician, or, in case of treatment required in the absence of the attending physician, by the physician then responsible for the patient's care/ Verbal orders shall be accepted and entered by a licensed nurse, occupational therapist, physical therapist, licensed respiratory therapist or speech therapist, registered pharmacist or registered dietician only and such action will be limited to urgent circumstances.

   ii. Verbal orders are not valid for orders to limit or remove lifesaving procedures.

   iii. There are no routine or standing orders regarding patient care or ordering of diagnostic tests.

### *2. Outpatient*

a. Outpatient orders should be entered in the medical records. Any verbal orders must be co-signed by the M.D. or FNP within twenty-four (24) hours.

**E. CPR**

1. Although a "Basic CPR" certificate is not required for Medical Staff membership, it is strongly encouraged for all those physicians in patient care. Individual Departments may require it for membership.

**F. Disaster Assignments: Refer to Hospital Disaster Plan**

1. Contra Costa Regional Health Center & Health Centers maintains a disaster plan based upon the Hospital Emergency Incident Command System (HEICS) which delineates the administrative structure for disaster responses. Each individual Department also has in place disaster and evacuation plans.

2. Employed members of the Medical Staff are designated automatically as disaster workers in the event of a disaster. Other members of the Medical Staff are eligible to participate in disaster work, as is volunteer staff under the guidelines of disaster credentialing as delineated in the Medical Staff Bylaws.

**G. Consultation Policy**

1. All providers are expected to seek consultation and advice whenever they encounter a situation in the course of caring for a patient in whom they are not confident of their own ability or knowledge. They should also seek consultation when it become evident that the patient is not comfortable with the diagnosis or management of his or her problem. Consultation may be obtained from Members of the Staff who are privileged to care for the problem for which the advice is sought, and his or her report shall be included in the medical record. The consultation report should be placed in the medical report.

2. Except where consultation is precluded by emergency circumstances, the attending physician shall consult with another qualified physician in all of the following cases:

    a. All major surgical cases in which the patient is not a good risk.

    b. In all cases in which the diagnosis is obscure or in which there is doubt as to the best therapeutic measures to be utilized.

**H. Operating Room Policies**

***1. Consents:***

a. Except in cases of emergency, no surgery shall be performed except pursuant to written informed consent from the patient or his/her legal representative, and all other persons, if any, from whom consent is required.

    i. History and physical examination;
    ii. Pre-operative diagnosis;
    iii. All necessary Laboratory and X-ray work;
    iv. Pre-anesthetic evaluation in all cases receiving a general anesthetic;

b. If, in any surgical cases, the foregoing requirements are not met prior to the time scheduled for surgery, the operation shall be canceled by the Operating Room Supervisor or designee and rescheduled unless the attending physician documents that such delay would be detrimental to the patient.

2. ***Prompt attendance of surgeon and attendants:***
Surgeons and attendants must be in the operating room and ready to commence surgery at the time scheduled.

## I. Supervision of House Staff

1. House staff shall have appropriate supervision present at all times regardless of patient complexity or house staff proficiency capabilities. This supervision shall be accessible and available particularly when house staff capability is exceeded.

2. Inpatient Supervision

   a. House staff shall identify a Medical Staff member as the attending or record on the admission orders of all patients admitted to the hospital. All critically ill patients admitted by the house staff shall be discussed with an attending physician. Teaching rounds shall be held daily. Junior house staff shall receive close attending supervision, proficiency monitoring and patient care responsibilities whenever possible. After hours supervision shall be provided by either in-house Medical Staff coverage or Department-dependent call mechanisms.

   b. All "No CPR" orders entered by house staff shall document concurrent discussion with Medical Staff.

   c. Medical Staff co-signatories are needed for all resident physicians for the following medical records and documents:

      i. Inpatient History and Physical
      ii. Pre-anesthesia Evaluation
      iii. Consultative Reports
      iv. Procedure Notes and Operative Reports

3. Outpatient Supervision
   a. More detailed and specific house staff supervision rules and policies are located in the specific Department rules and regulations manual of Contra Costa Regional Medical Center. A copy of these policies is also located in the residency office.

      i. Prescriptions

         *A.* All unlicensed residents must have all prescriptions co-signed.

      ii. Family Medicine Clinics

*A.* All family medicine residents must have a Department of Family Medicine member with appropriate privileges assigned to supervise and precept them. This preceptor must be immediately available and have adequate time for teaching.

*B.* All medical record entries by medical students must be co-signed by a provider with privileges.

iii. Specialty Clinics

*A.* A staff physician will directly supervise all residents working in a specialty clinic. First-year residents are expected to discuss all patients with their supervising physician before the patient leaves. Second- and third-year residents should discuss most cases with their supervising physician. The supervising physician should be identified on the consultation.

*B.* All medical record entries by medical students must be co-signed by provider with privileges.

**J. On-Call Response Time**

1. Departments shall determine and monitor appropriate on-call procedures for their specific services.

**K. Processing and Delivery of Ordered Blood Products**

1. Blood products ordered by any physician shall be provided by the Blood Bank/Transfusion Service without delay. If questionable indications for transfusion are felt to be present, the pathologist, while processing of this order proceeds without delay, will attempt to discuss this issue with the ordering physician. If, after discussion, the pathologist still believes the request to be questionable, he/she will report this case to the appropriate Department or committee for review.

2. The physician who has primary responsibility for the patient has the final say in decision making, although we encourage a team approach utilizing dialogue between the clinician and the transfusion service.

**L. Collection and Expenditures of Medical Staff Funds**

**1. Application Fees**

a. Each application may be assessed an application non-refundable processing fee. This fee shall be Three Hundred Dollars ($300) and shall also be considered as payment of any dues, for which the applicant shall be liable during the period of the initial appointment, should the applicant be appointed to the staff. The fee for applications for Courtesy, Honorary, Temporary, Administrative, Allied Health Professional, and Telemedicine Staff shall be One Hundred and Fifty Dollars ($150)

b. In the event that the applicant is not accepted, no portion of this applications fee shall be refunded. In special circumstances as defined by the Credentials Committee and the Medical Executive Committee, this application fee may be waived.

2. **Medical Staff Dues**
   a. The Medical Executive Committee shall have the power to determine the amount of biennial reappointment dues. The following dues are currently in effect:

      i. Active Staff:

         Two Hundred Dollars ($200) for each two-year reappointment

      ii. Courtesy, Honorary, Temporary, Administrative, Allied Health Professional, and Telemedicine Staff:

         One Hundred Dollars ($100) for each two-year reappointment

3. **Reappointment Late Processing Fees**
   a. Pursuant to the Bylaws and the Rules, the Medical Staff is authorized to collect late processing fees. An application for reappointment is late when less than one hundred fifty (150) calendar days remain until the end of Members' term. In addition to the regular reappointment fee, the following late processing fees are assessed:

      i. At one hundred fifty (150) days from the end of a term – Fifty dollars ($50) – (may be waived in extenuating circumstances, such as vacation);

      ii. At one hundred twenty (120) days from the end of the term – Fifty dollars ($50) more for a total penalty of one hundred dollars ($100) – (may not be waived);

      iii. At ninety (90) days from the end of the term – Fifty dollars ($50) more for a total penalty of one hundred fifty dollars ($150),

      iv. At ninety (90) days, all fees must be paid in full and application must be complete or reappointment application is not processed and the membership is deemed to have expired automatically at the end of the term. If the member submits a new application for membership in the medical staff within six (6) months of the expiration of the appointment, he/she must pay the one hundred fifty dollar ($150) penalty in addition to the application fee.

4. **Expenditure of Funds**
   a. The Medical Executive Committee shall determine the method of disbursement of Medical Staff funds. The Medical Executive Committee may appoint a Medical Staff Funds Advisory Committee to advise the Medical Executive Committee regarding such expenditures.

   b. If an Advisory Committee is appointed, it shall study the various possible uses for the funds and recommend specific expenditures, including specific dollar amounts, to the Medical Executive Committee on an annual basis or more often as appropriate.

   c. The Medical Executive Committee shall retain ultimate control of these funds. The Medical Executive Committee may deposit these funds in any accounts it deems suitable.

      i. Any account shall have the following co-signers:

         *A.* The Medical Staff President
         *B.* The Medical Staff President-Elect
         *C.* The Immediate Past President of the Medical Staff
         *D.* The Chair of the Administrative Affairs Committee
         *E.* Two Medical Staff Coordinators as designated by the Medical Executive Committee

      ii. Any two (2) of these co-signers may distribute Medical Staff funds provided at least one co-signer is a Member of the Medical Staff. Any disbursement of funds greater than three hundred dollars (>$300) must be approved in advance by the Medical Executive Committee. Any disbursement of funds of three hundred dollars or less (<=$300) may be authorized by any two (2) of the cosigners listed above. Any such disbursement of funds without the advance approval of the Medical Executive Committee must be reported to the Medical Executive Committee by the Medical Staff President at the next regularly scheduled Medical Executive Committee meeting.

**M. Medical Staff Evaluation and Development**

1. Each Member of the active Medical Staff shall be reviewed no less often than every eleven (11) months by his/her Department Head on a form approved by the Medical Executive Committee. The purpose of this evaluation shall be to facilitate verbal and documented communications between the Department Head and the Staff Member in an attempt to acknowledge the Staff Member's areas of excellence and to identify those areas which can be improved.

2. The Medical Staff President shall evaluate the Department Heads in the same manner after consultation with the Members of his/her department. If the Department Head is also the Medical Staff President, an individual designated by the Credentials Committee shall evaluate him or her.

3. Upon completion, the evaluator and the Medical Staff Member shall meet face to face and each receives a copy of the evaluation, with additional copy to be placed in the individual's

credentials file. The copy in the credential's file shall be used by the Credentials Committee during the reappointment process. The Staff Member may request modification of this.

4. This evaluation shall be sent to the credentials file and the information in the credentials files shall be used for Medical Staff purposes only.

**N. Other Policy Manuals**

1. From time to time, policies are legally created and adopted by the Governing Body, the Administration, Nursing, and particular administrative departments. To the extent that these policies are not in conflict with the Medical Staff Bylaws, the Rules, or Medical Staff Policies, the Medical staff shall abide by the extraneous policy. If these extraneous policies are in conflict with the Bylaws, the Rules, or Medical Staff Policies, the Medical Executive Committee shall review the conflicting policies and recommend appropriate changes. When the extraneous policies have a negative impact upon the quality of patient care, the Medical Executive Committee shall also review the policy and make appropriate recommendation to assure quality care. In all cases, the Medical Staff must abide by the requirements of the Bylaws and the Rules.

Contra
Costa
County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 22, 2018

Subject: Approve New and Recredentialing Providers in Contra Costa Health Plan's Community Provider Network

**RECOMMENDATION(S):**
APPROVE the list of providers recommended by Contra Costa Health Plan's Medical Director on April 25, 2018, and by the Health Services Director, as required by the State Departments of Health Care Services and Managed Health Care, and the Centers for Medicare and Medicaid Services.

**FISCAL IMPACT:**
Not applicable.

**BACKGROUND:**
The National Committee on Quality Assurance (NCQA) requires that evidence of Board of Supervisors' approval must be contained within each CCHP provider's credentials file. Approval of this list of providers as recommended by the CCHP Medical Director will enable the Contra Costa Health Plan to comply with this requirement.

**CONSEQUENCE OF NEGATIVE ACTION:**
If this action is not approved, Contra Costa Health Plan's Providers would not be appropriately credentialed and in compliance with the NCQA.

- [x] APPROVE
- [ ] OTHER
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Patricia Tanquary, 925-313-6004

By: , Deputy

**cc:** Tasha Scott, Marcy Wilhelm, Heather Wong

ATTACHMENTS

Attachment

# Contra Costa Health Plan
## Provider Approved by Medical Director
## April 25, 2018

| CREDENTIALING PROVIDERS APRIL 2018 | |
|---|---|
| **Name** | **Specialty** |
| Ahmad, Hina, MD | Dermatology |
| Allen, Melissa, NP | Primary Care<br>Internal Medicine |
| Baier, Kelly, PsyD, BCBA-D | Qualified Autism Provider |
| Begossi, Giovanni, MD | Surgery – General<br><br>Surgery – Oncology |
| Bingula, Brigit, NP | Primary Care<br>Pediatrics |
| Birenbaum, Emily, MD | OB/GYN |
| Brachman, Debbie, NP | Primary Care<br>Family Medicine |
| Burlington, Kelsey, DPT | Physical Therapy |
| Camarena, Evangelina, LCSW | Mental Health Services |
| Caras, Michelle, DPT | Physical Therapy |
| Chichizola, Mariella, RBT | Qualified Autism Paraprofessional |
| Cranford, Lima, NP | Mid-Level<br>Allergy & Immunology |
| DeJesus, Anne, MFT | Mental Health Services |
| Glugatch, Lindsay, BCBA | Qualified Autism Provider |
| Hanks, Abigail, BCBA | Qualified Autism Provider |
| Horoupian, Rupert, MD | Surgery – General |
| Kamdar, Toral, MD | Allergy & Immunology |
| Loo, Patricia, PA | Mid-Level Dermatology |
| Martinez, Christie, NP | Mid-Level<br>Allergy & Immunology |
| Martinez, Marisol, PA | Mid-Level<br>Orthopaedic Surgery Assistant |
| Patel, Hemangini, PA | Mid-Level Dermatology |
| Saylors, Staci, BCBA | Qualified Autism Provider |
| Spence, Andrea, BCBA | Qualified Autism Provider |
| Upadhyay, Ajay, MD | Surgery – General |
| Waderich, Kristin, DPT | Physical Therapy |
| Ward, Kelly, RBT | Qualified Autism Paraprofessional |
| Yu, Jenny, DPM | Podiatry |

## CREDENTIALING ORGANIZATIONAL PROVIDERS APRIL 2018

| Provider Name | Provide the Following Services | Location |
|---|---|---|
| InTouch Home Care, Inc. | Home Health | Santa Clara |
| Pathways Home Health and Hospice | Hospice | Oakland, South San Francisco and Sunnyvale |
| Sutter Visiting Nurse Association and Hospice dba: Sutter Care at Home | Hospice | Alameda |

## RECREDENTIALING PROVIDERS APRIL 2018

| Name | Specialty |
|---|---|
| Anand, Shilpi, MD | Allergy & Immunology |
| Baker, Michael, MD | Surgery – Genera |
| Block, Donald, MD | Nephrology |
| Calafi, Leo, MD | Surgery – Orthopaedic |
| Chao, Kuang-Hwa, K. MD | Radiation Oncology |
| Choi, Wen-Yin, DPM | Podiatry |
| Dacanay, Leonardo, MD | Ophthalmology |
| DeMartini, David, MD | Ophthalmology |
| Dixit, Rajiv, MD | Rheumatology |
| Graves, Gretchen, MD | Primary Care Pediatrician |
| Ho, Viet, MD | Surgery – Oculoplastic<br>Ophthalmology |
| Hopkins, Brian, MD | Urology |
| Kang, Tyler, MD | Medical Oncology |
| Klinger, Barry, DC | Chiropractic Medicine |
| Kogan, Mark, MD | Gastroenterology |
| McGlashan, Kate, CNM | Midwife |
| Mozaffarieh, Nazak, OD | Optometry |
| Odabaei, Golaun, MD | Nephrology |
| Ricker, Denise, MD | Nephrology |
| Shelton, Steven, PhD | Mental Health Services |
| Taylor, Sean, BCBA | Qualified Autism Provider |
| Winter, Katherine, MD | Primary Care<br>Family Medicine |

| RECREDENTIALING PROVIDERS APRIL 2018 | |
|---|---|
| **Name** | **Specialty** |
| Wong, Bryan, MD | Nephrology |
| Young, Steven, R., B.C.O. | Ocularist |

| RECREDENTIALING ORGANIZATIONAL PROVIDERS APRIL 2018 | | |
|---|---|---|
| **Provider Name** | **Provide the Following Services** | **Location** |
| DaVita - Palomar Dialysis, LLC<br>dba: Livermore Dialysis | Dialysis | Livermore |
| DaVita - Renal Treatment Centers - California, inc.<br>dba: Concord Dialysis Center | Dialysis | Concord |
| DaVita - Renal Treatment Centers - California, inc.<br>dba: Vacaville Dialysis Center | Dialysis | Vacaville |
| DaVita - Shayano Dialysis, LLC<br>dba: San Leandro Dialysis | Dialysis | San Leandro |
| DaVita - Total Renal Care, inc.<br>dba: Delta View Dialysis | Dialysis | Pittsburg |
| Sutter Visiting Nurse Association and Hospice<br>dba: Sutter Care at Home | Home Health | Concord |
| Sutter Visiting Nurse Association and Hospice<br>dba: Sutter Care at Home | Home Health | San Leandro |
| Sutter Visiting Nurse Association and Hospice<br>dba: Sutter Care at Home | Hospice | Concord |

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: AUTHORIZATION FOR DESTRUCTION OF RECORDS

**RECOMMENDATION(S):**
APPROVE and AUTHORIZE the County Administrator, or designee, to execute an order for the destruction of County collections and deposit records maintained by the Superior Court that are over five (5) years old and are no longer necessary or required for County or Court purposes, pursuant to Government Code Section 26202 and Trial Court Financial Policies and Procedures Manual.

**FISCAL IMPACT:**
No fiscal impact.

**BACKGROUND:**
Under the terms of a Memorandum of Understanding between the County and the Superior Court, the Court administers, on behalf of the County, a collection program for court-ordered debt. In order to efficiently manage the volume of records continuously generated and received, the Court must dispose of unnecessary records and documents. According to the Trial Court Financial Policies and Procedures Manual, FIN 12.01, 6.1.5, the Court is required to retain receipts for fines, fees, penalties collected and other collection receipts for the current year plus four additional years (or from the close date of the State Controller's Office (SCO) audit, whichever is longer. The Court has identified 25 boxes of collection and deposit records from FY 2011/12 meeting this criterion.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Julie DiMaggio Enea
(925) 335-1077

**cc:**

BACKGROUND: (CONT'D)

Government Code section 26202 provides that any record more than two (2) years old may be destroyed without being photographed, microfilmed or otherwise reproduced if:

1. It is not required by state statute or county charter to be prepared or received; or

2. It is prepared or received pursuant to state statute or county charter, but it is not expressly required by law to be filed or preserved, and the board determines by four-fifths (4/5) vote that the retention of such document is no longer necessary or required for county purposes.

Approval is requested to destroy the specified 25 boxes of records identified by the Court (see attached list). Passage of this order requires a four-fifths (4/5) vote of the Board of Supervisors.

CONSEQUENCE OF NEGATIVE ACTION:

Negative action would decrease the Court's ability to efficiently manage the volume of records continuously generated and received by the Collections Compliance Unit.

ATTACHMENTS

CCU Destruction of Obsolete Records Authorization FY 2011/12

**Superior Court of California**
**County of Contra Costa**

# AUTHORIZATION FOR DESTRUCTION OF RECORDS

Pursuant to the *Trial Court Financial Policies and Procedures Manual*, FIN 12.01, 6.1.5, it is hereby authorized to professionally destroy the records identified in the following attached listing titled "Financial Services Division FY 2011-2012 CCU Records for Destruction".

In accordance with the Court's internal review process, the Court Manager overseeing records destruction has reviewed the attached listing and determined that these records are ready for destruction.

Stephen H. Nash
Court Executive Officer

4.24.18
Date

Julie Enea
Senior Deputy County Administrator

Date

Financial Services Division
FY 2011-2012 CCU Records for Destruction

| Num | Type of Document | Time Period Covered | Box Label Number | Fiscal Year | Notes |
|---|---|---|---|---|---|
| 1 | CCU TELLER'S REPORTS | MARCH 2012 | 101 | FY 11-12 | Stored in cages |
| 2 | CCU - AMORS 00 REPORT VS CUBS TRAFFIC DEC 2011 TO FEB 2012. | 12/01/2011-02/01/2012 | 102 | FY 11-12 | |
| 3 | JUL TO DEC 2011, AMORS 00 REPORTS VS CUBS TRAFFIC SEP TO NOV 2011. | 07/01/2011-12/01/2011; 09/01/2011-11/01/2011 | 103 | FY 11-12 | |
| 4 | CCU TELLER'S REPORTS | Oct-11 | 171 | FY 11-12 | Stored in general storage area |
| 5 | CCU TELLER'S REPORTS | JUNE 2012 | 172 | FY 11-12 | |
| 6 | CCU TELLER'S REPORTS | MAY 2012 | 173 | FY 11-12 | |
| 7 | CCU TELLER'S REPORTS | APRIL 2012 | 174 | FY 11-12 | |
| 8 | CCU TELLER'S REPORTS | Sep-11 | 175 | FY 11-12 | |
| 9 | CCU NEW ACCOUNTS | 7/1/2012-02/28/12 | 176 | FY 11-12 | |
| 10 | CCU TRAFFICING BALANCING REPORTS | MAY - JUNE | 177 | FY 11-12 | |
| 11 | CCU RESTITUTION P - Z | 2011-JUNE 2012 | 178 | FY 11-12 | |
| 12 | CCU TELLER'S REPORTS | Aug-11 | 179 | FY 11-12 | |
| 13 | CCU TRAFFICING BALANCING REPORTS | AUGUST 2011 | 180 | FY 11-12 | |
| 14 | CCU NEW ACCOUNTS | 03/01/12-05/31/12 | 181 | FY 11-12 | |
| 15 | CCU TRAFFICING BALANCING REPORTS | MARCH - APRIL | 182 | FY 11-12 | |
| 16 | CCU RESTITUTION A -O | 2011-JUNE 2012 | 183 | FY 11-12 | |
| 17 | CCU CRIMINAL CASES LOAD FOR COURT | 1/01/2011-06/30/2012 | 184 | FY 11-12 | |
| 18 | CCU TELLER'S REPORTS | Jul-11 | 185 | FY 11-12 | |
| 19 | CCU OVRPMT & VR | | 186 | FY 11-12 | |
| 20 | CCU TELLER'S REPORTS | Jan-12 | 187 | FY 11-12 | |
| 21 | CCU TELLER'S REPORTS | 11-Nov | 188 | FY 11-12 | |
| 22 | CCU TELLER'S REPORTS | Dec-11 | 189 | FY 11-12 | |
| 23 | CCU TELLER'S REPORTS | Feb-12 | 190 | FY 11-12 | |
| 24 | CCU COUNTY CLAIMS/AOC REPORT/ROR/TERMED AGREEMENTS FOR CCU/EXHIBIT MONEY TO COUNTY | 2011-JUNE 2012 | 191 | FY 11-12 | |
| 25 | CCU MONTH END REPORTS | 12/01/12-06/01/12 | 192 | FY 11-12 | |

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: CONTINUE EXTENSION OF EMERGENCY DECLARATION REGARDING HOMELESSNESS

**RECOMMENDATION(S):**
CONTINUE the emergency action originally taken by the Board of Supervisors on November 16, 1999 regarding the issue of homelessness in Contra Costa County.

**FISCAL IMPACT:**
None.

**BACKGROUND:**
On November 16, 1999, the Board of Supervisors declared a local emergency, pursuant to the provisions of Government Code Section 8630 on homelessness in Contra Costa County.

Government Code Section 8630 requires that, for a body that meets weekly, the need to continue the emergency declaration be reviewed at least every 14 days until the local emergency is terminated. In no event is the review to take place more than 21 days after the previous review. On May 8, 2018, the Board of Supervisors reviewed and approved the emergency declaration.

With the continuing high number of homeless individuals and insufficient funding available to assist in sheltering all homeless individuals and families, it is appropriate for the Board to continue the declaration of a local emergency regarding homelessness.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [x] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

Contact: Enid Mendoza, (925) 335-1039

**cc:**

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: Resolution No. 2018/190 - California Nurses Association Side Letter Extending Duration of Agreement

**RECOMMENDATION(S):**
ADOPT Resolution No. 2018/122 approving the Side Letter between Contra Costa County and the California Nurses Association (CNA) modifying the Preamble and Section 64 Duration of Agreement of the Memorandum of Understanding to extend the contract from May 31, 2018 through July 31, 2018.

**FISCAL IMPACT:**
No fiscal impact.

**BACKGROUND:**
This Side Letter extends the current memorandum of understanding from May 31, 2018 through July 31, 2018, to allow both parties to work together to negotiate an agreement. Both the Preamble and Section 64 - Duration of Agreement are modified. The effect of this Side Letter is that all other terms and conditions of the MOU, specifically including Section 60 and 62, are extended accordingly for the new term of the MOU between the County and CNA (August 1, 2014 – July 31, 2018).

**CONSEQUENCE OF NEGATIVE ACTION:**
Members will continue working under an expired contract.

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Lisa Driscoll, County Finance Director (925) 335-1023

By: , Deputy

**cc:** Dianne Dinsmore, Human Resources Director, Robert Campbell, County Auditor-Controller

ATTACHMENTS

Resolution No. 2018/190

CNA Side Letter dated 5/15/18

# THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA

**and for Special Districts, Agencies and Authorities Governed by the Board**

**Adopted this Resolution on 05/22/2018 by the following vote:**

**AYE:**

**NO:**

**ABSENT:**

**ABSTAIN:**

**RECUSE:**

**Resolution No. 2018/190**

**In the Matter of:** The Side Letter Agreement between the County of Contra Costa and the California Nurses Association, extending the Duration of Agreement

The Contra Costa County Board of Supervisors acting solely in its capacity as the governing board of the County of Contra Costa **RESOLVES** THAT:

Effective May 15, 2018, the attached Side Letter of Agreement dated May 15, 2018, between the County of Contra Costa and the California Nurses Association, be **ADOPTED**.

**Contact: Lisa Driscoll, County Finance Director (925) 335-1023**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

**ATTESTED: May 22, 2018**

David J. Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

**cc:** Dianne Dinsmore, Human Resources Director, Robert Campbell, County Auditor-Controller

**SIDE LETTER AGREEMENT**
**Duration of Agreement**

This Side Letter is by and between the County of Contra Costa ("County") and the California Nurses Association ("CNA") and is effective May 15, 2018, subject to approval by the Board of Supervisors.

This Side Letter modifies the Preamble and Section 64 – Duration of Agreement of the Memorandum of Understanding (MOU) (August 1, 2014 – March 31, 2018) between the County and CNA by extending the current MOU from January 31, 2018 to July 31, 2018.

The effect of this Side Letter is that all other terms and conditions of the MOU, specifically including Section 60 and 62, are extended accordingly for the new term of the MOU between the County and CNA (August 1, 2014 – July 31, 2018).

Date: 5/15/2018

| **Contra Costa County:** *(Signature / Printed Name)* | **California Nurses Association:** *(Signature / Printed Name)* |
|---|---|
| / Kelly Tuffo | / Rosalind Walker |
| Shanna Edwards / Shanna Edwards | / Emma Gerald |
| Dorette McCollum / Dorette McCollum | / Kati Johnson |
| Nancy Hendra / Nancy Hendra | / Kathleen Sullivan |
| / | Kathleen Avila |
| / | Charlotte I. Adams |
| | Jennifer Tucker |
| | ANNE STEWART |

Contra Costa County

To: Board of Supervisors

From: David Twa, County Administrator

Date: May 22, 2018

Subject: COMPENSATION AGREEMENT FOR FUTURE DEVELOPMENT PROPERTIES - CITY OF EL CERRITO

**RECOMMENDATION(S):**

1. APPROVE and AUTHORIZE the County Administrator, or designee, to execute a Compensation Agreement with the City of El Cerrito for the distribution of net unrestricted proceeds to be received by the City from the disposition of properties formerly owned by the El Cerrito Redevelopment Agency.

2. Acting as the Governing Board of the Contra Costa County Flood Control and Water Conservation District, APPROVE and AUTHORIZE the County Administrator, or designee, to execute a Compensation Agreement with the City of El Cerrito for the distribution of net unrestricted proceeds to be received by the City from the disposition of properties formerly owned by the El Cerrito Redevelopment Agency.

3. Acting as the Governing Board of the Contra Costa County Water Agency, APPROVE and AUTHORIZE the County Administrator, or designee, to execute a Compensation Agreement with the City of El Cerrito for the distribution of net unrestricted proceeds to be received by the City from the disposition of properties formerly owned by the El Cerrito Redevelopment Agency.

☑ APPROVE ☐ OTHER

☑ RECOMMENDATION OF CNTY ADMINISTRATOR ☐ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** ☑ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Timothy Ewell, (925)335-1036

By: , Deputy

**cc:**

FISCAL IMPACT:

No fiscal impact related to this action. This Agreement contemplates potential sales of future development properties, owned by the former El Cerrito Redevelopment Agency, by the City of El Cerrito and how proceeds shall be distributed by the City to County entities. These future sales would result in one-time funding to County entities based on the terms of sale between the City and Developers; however, the Agreement guarantees a minimum valuation of properties at the fair market value as of the 2011 property tax lien date.

BACKGROUND:

As part of the 2011 Budget Act, and in order to protect funding for core public services at the local level, the Legislature approved the dissolution of the state's 400 plus Redevelopment Agencies (RDAs). After a period of litigation, RDAs were officially dissolved as of February 1, 2012. As a result of the elimination of the RDAs, property tax revenues are now being used to pay required payments on existing bonds, other obligations, and pass-through payments to local governments. The remaining property tax revenues that exceed the enforceable obligations are now being allocated to cities, counties, special districts, and school and community college districts, thereby providing critical resources to preserve core public services.

To help facilitate the wind-down process at the local level, successor agencies were established to manage redevelopment projects currently underway, make payments on enforceable obligations, and dispose of redevelopment assets and properties. Each Successor Agency has an Oversight Board that supervises its work. The Oversight Board is comprised of representatives of the local agencies that serve the redevelopment project area: the city, county, special districts, and K-14 educational agencies. Oversight Board members have a fiduciary responsibility to holders of enforceable obligations, as well as to the local agencies that would benefit from property tax distributions from the former redevelopment project area.

## FINDING OF COMPLETION

Pursuant to Health and Safety Code (HSC) Section 34179.7, the California Department of Finance (DOF) was authorized to issue a finding of completion to a Successor Agency, once the following conditions had been met and verified by December 31, 2015:

- The Successor Agency had paid the full amount as determined during the Due Diligence Reviews and the County Auditor-Controller has reported those payments to DOF, and
- The Successor Agency had paid the full amount as determined during the July True-Up process, or
- The Successor Agency had paid the full amount upon a final judicial determination of the amounts due and confirmation that those amounts have been paid by the County Auditor-Controller, or
- The Successor Agency had entered into a written installment payment plan with DOF for the payments owed from above.

Upon receiving the finding of completion, a Successor Agency is allowed to do the following:

- Place loan agreements between the former redevelopment agency and sponsoring entity on the Recognized Obligation Payment Schedule (ROPS), as an enforceable obligation, provided the oversight board makes a finding that the loan was for

legitimate redevelopment purposes per HSC Section 34191.4 (b) (1) Loan repayments will be governed by criteria in HSC section 34191.4 9 (a) (2).

- Utilize proceeds derived from bonds issued prior to Jan. 1, 2011 in a manner consistent with the original bond covenants per HSC Section 34191.4 (c)
- However, if on a payment plan, and a Successor Agency fails to fully make one or more payments agreed to in the written installment plan, the benefits above may be revoked.

## LONG RANGE PROPERTY MANAGEMENT PLAN

Pursuant to Health and Safety Code section 34191.5, within six months after receiving a Finding of Completion from DOF, a Successor Agency is required to submit for approval to it's Oversight Board and DOF a Long-Range Property Management Plan (LRPMP) that addresses the disposition and use of the real properties of the former redevelopment agency. If DOF had not approved a plan by January 1, 2016, then the Successor Agency was to have disposed of their property pursuant to 34177 (e).

## COMPENSATION AGREEMENTS

Some LRPMPs prepared by successor agencies include a provision providing that certain real property of the former redevelopment agency would be retained and used for future development purposes pursuant to HSC 34179.5(c)(5)(C). As part of that, LRPMPs submitted by successor agencies have contemplated the use of “compensation agreements” between an individual successor agency and affected taxing entities (ATEs), the terms of which are not subject to approval by DOF, pursuant to HSC 34180(f)(1).

Specifically, HSC 34180(f)(1) states that:

> *"If a city, county, or city and county wishes to retain any properties or other assets for future redevelopment activities, funded from its own funds and under its own auspices, it must reach a compensation agreement with the other taxing entities to provide payments to them in proportion to their shares of the base property tax, as determined pursuant to Section 34188, for the value of the property retained."*

On March 28, 2017 the Board of Supervisors referred the issue of establishing a policy for the review of compensation agreements submitted by cities related to redevelopment dissolution to the Finance Committee for evaluation. The Finance Committee met on April 24, 2017 to discuss the issue and has forwarded a policy recommendation to the full Board of review and approval. Subsequently, the Board approved the attached policy framework and direct the County Administrator to commence negotiating with cities that request compensation agreements with the County on May 2, 2017.

## CITY OF EL CERRITO

Following the Board's approval of the compensation agreement policy terms, the County began negotiating terms and conditions of a compensation agreement with the City of El Cerrito for four (4) future development properties that were formerly owned by the El Cerrito Redevelopment Agency. Today's action recommends that the Board approve a compensation agreement with the City, including two minor deviations from the Board's previously approved policy framework:

1. Rather than defer payment of the "gross market value" of properties, the County would agree to

deferral of "net unrestricted proceeds", as defined in the agreement, to account for the City's customary costs of selling the properties. This includes transactional costs such as real estate brokerage fees, legal fees, etc.

2. Rather than requiring payment of the highest "gross market value" over the five-year period, the City would be responsible for remitting the "net unrestricted proceeds" based on the market value of the properties at the time of sale during the five year period.

3. Rather than requiring a new Grant Deed to be recorded against each future development property limiting the use of the property solely to those uses outlined in the City's Long Range Property Management Plan (LRPMP), as approved by the California Department of Finance, the parties will record a "Notice of Compensation Agreement Related to Real Property" identifying the major terms of the compensation agreement to protect the County's interest in future disposition proceeds from each property.

4. Finally, the compensation agreement calls for the remittance of payment to the County for any properties not part of a Developer Disposition Agreement (DDA) after 60 months (five years), following the effective date of the agreement, in an amount equal to the fair market value as of the 2011 property tax lien date. The payment is to be remitted no later than 66 months (5.5 years) following the effective date of the compensation agreement to allow the City sufficient time to identify eligible funds to remit payment to the County.

Each of the exceptions above has been made to balance the financial and policy interests of both the County and the City. Ultimately, the compensation agreement allows the City to move forward in marketing the properties to future developments consistent with the City's General Plan and guarantees the County's financial interest in the properties as provided for in the redevelopment dissolution statutes.

CONSEQUENCE OF NEGATIVE ACTION:

The County, including certain entities governed by the Board of Supervisors, will not have entered into a formal compensation agreement with the City for compensation of future development properties retained by the City following dissolution of the El Cerrito Redevelopment Agency.

ATTACHMENTS

Policy for Evaluating Compensation Agreements Proposed pursuant to HSC 34180 et. seq.

**BOARD OF SUPERVISORS**

**POLICY FOR EVALUATING COMPENSATION AGREEMENTS PROPOSED PURSUANT TO HEALTH AND SAFETY CODE § 34180 *et seq.***

*"The County, including all affected taxing entities governed by the Board of Supervisors, will agree to defer payment of the current gross market value of real property transferred from a redevelopment successor agency to a city at the time of the transfer, pursuant to Health and Safety Code (HSC) 34180(f)(1), until such time that the city enters into sale agreement with a developer or other private party, through a negotiated compensation agreement, under the following conditions:*

1. *The deferral of a payment of gross market value will not exceed five years beginning on the date that the compensation agreement is executed by the County and the City.*

2. *The gross market value paid to the County will be the highest fair market value of the real property, beginning on the date that the compensation agreement is executed until the property is sold. For purposes of determining which year had the highest fair market value, the parties will agree to use the fair market value on the date that the compensation agreement is executed and July 1st of each subsequent year.*

3. *The County and City will agree to record the executed compensation agreement against all properties identified in the compensation agreement.*

4. *The City will record an updated Grant Deed against all properties identified in the compensation agreement, subject to final review and approval of the County, which will not be unreasonably withheld, restricting the property's use to representations made in the Successor Agency's Long Range Property Management Plan approved by the California Department of Finance.*

5. *Should the parties not reach agreement on a compensation agreement, then the City shall compensate the County pursuant to HSC § 34180(f)(2).*

Contra Costa County

To: Board of Supervisors

From: Todd Billeci, County Probation Officer

Date: May 22, 2018

Subject: Non-Minor Dependent Infant Supplement Payment

**RECOMMENDATION(S):**
AUTHORIZE a one-time payment of $316 for Infant Supplement to a prior 602 WIC Non-Minor Dependent, C.R, as recommend by the County Probation Officer.

**FISCAL IMPACT:**
The $316 one-time payment will be paid from the General Fund.

**BACKGROUND:**
During October 2016 through June 2017, C.R. was a 602 WIC Ward of the Court and a Non-Minor Dependent eligible to receive a $900 per month Infant Supplement. The Probation Department deemed her ineligible for the supplement October 2016 through April 2017, due to her failure to submit her application and the appropriate documentation. C.R. submitted the application and documents to receive the supplement in May 2017. C.R. received a one-time Infant Supplement payment in the amount of $1800 for the months of May and June 2017. C.R. appealed Probation's decision with the Appeals Unit at EHSD. As a result an Appellate decision was made, and Probation was ordered to issue payment of the Infant Supplement for a prorated portion of October 2016 through June 2017, taking into consideration any CalWORKs payments C.R. received. During this period of time C.R. had received CalWORKs payments. The CalWORKs payments offset the amount of the Infant

- [x] APPROVE
- [x] RECOMMENDATION OF CNTY ADMINISTRATOR
- [ ] OTHER
- [ ] RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **05/22/2018** [ ] APPROVED AS RECOMMENDED [ ] OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: May 22, 2018

David J. Twa, County Administrator and Clerk of the Board of Supervisors

Contact: Jeff Waters-925-313-4154

By: , Deputy

**cc:**

BACKGROUND: (CONT'D)

Supplement C.R. was eligible to receive. Taking into consideration the proration of the months of October 2016 and June 2017, the previous one-time Infant Supplement payment and the CalWORKs payments an outstanding balance of $316 is due to C.R..

CONSEQUENCE OF NEGATIVE ACTION:

Failure to take the recommended action would result in the Probation Department and County being in noncompliance with the Appellate decision, potentially exposing both to further financial liability.

ATTACHMENTS

Group Home Rates 2017

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
**DEPARTMENT OF SOCIAL SERVICES**
744 P Street • Sacramento, CA 95814 • *www.cdss.ca.gov*

CDSS
WILL LIGHTBOURNE
DIRECTOR

EDMUND G. BROWN JR.
GOVERNOR

REASON FOR THIS TRANSMITTAL

[X] State Law Change
[ ] Federal Law or Regulation Change
[ ] Court Order
[ ] Clarification Requested by One or More Counties
[ ] Initiated by CDSS

July 13, 2017

ALL COUNTY LETTER (ACL) NO. 17-75

TO: ALL COUNTY WELFARE DIRECTORS
ALL CHIEF PROBATION OFFICERS
ALL LOCAL MENTAL HEALTH DIRECTORS
ALL COUNTY ADOPTION AGENCIES
ALL ADOPTION DISTRICT OFFICES
ALL GROUP HOME PROVIDERS
ALL FOSTER FAMILY AGENCIES
ALL TITLE IV-E AGREEMENT TRIBES

SUBJECT: AID TO FAMILIES WITH DEPENDENT CHILDREN-FOSTER CARE (AFDC-FC) CALIFORNIA NECESSITIES INDEX (CNI) INCREASES AND OTHER RATE INCREASES

REFERENCE: SENATE BILL (SB) 1013, CHAPTER 35, STATUTES OF 2012; ASSEMBLY BILL (AB) 403, CHAPTER 773, STATUTES OF 2015; AB 1997, CHAPTER 612, STATUTES OF 2016; WELFARE AND INSTITUTIONS CODE (WIC) SECTIONS 11364, 11387, 11453, 11460, 11461 ,11461(d)(2)(A), 11462, 11463, 11464, 18254, 18358.30; ACL NO. 11-63; ACL NO. 11-63E; ACL NO. 11-54, ACL NO. 12-43; ACL NO. 13-62; ACL NO. 13-62E; ACL NO. 14-44; ACL NO. 14-104; ACL NO. 15-58; ACL NO. 15-58E; ACL NO. 16-03; ACL NO. 16-57; ACL NO. 16-79; ACL NO. 16-79E; ACL NO. 17-11

The purpose of this ACL is to provide the adjusted schedules of rates that reflect the CNI increase of 3.84 percent for Fiscal Year (FY) 2017-18. The CNI increase is applicable to out-of-home placements and the AFDC-FC program. In accordance with AB 403, the California Department of Social Services (CDSS) issued ACL NO. 16-79 for Phase I and ACL NO. 17-11 for Phase II of the new Home Based Family Care (HBFC) and Short-Term Residential Therapeutic Program (STRTP) rates structure developed in consultation with county welfare departments and stakeholders.

Phase I rates became effective January 1, 2017 and are eligible for a CNI increase effective July 1, 2017 for the Basic Level Rate of $889 given to all eligible placements. **Additionally, Phase II Level of Care (LOC) 2-4 rates that go into effect December 1, 2017, will implement with CNI increase of 3.84 percent effective July 1, 2017.** All other placements not affected by the new HBFC and STRTP rate structure will continue to receive the CNI increases as in previous years.

**Non-Federal and Federal Kinship Guardianship Assistant Programs (Kin-GAPs) and State AFDC-FC Non-Related Legal Guardians (NRLGs) (Including Probate)**

Effective July 1, 2017, the 3.84 percent CNI increase applies to Kin-GAP cases in which dependency was dismissed and NRLG cases (including probate) whose guardianship was established prior to May 1, 2011 and is reflected in Table A.

**Table A**

| Age | Birth-4 | 5-8 | 9-11 | 12-14 | 15-21 |
|---|---|---|---|---|---|
| Rate 7/1/17-6/30/18 | $537 | $584 | $625 | $689 | $756 |

Effective July 1, 2017, a 1.92 percent CNI increase applies only to the 12-14 age column of the Orange County grandfathered FFH basic rate and is reflected in Table A-1 below.

**Table A-1**

| Age | Birth-4 | 5-8 | 9-11 | 12-14 | 15-21 |
|---|---|---|---|---|---|
| Rate 7/1/17-6/30/18 | $537 | $584 | $625 | *$724 | $756 |

*WIC section 11461(d)(2)(A) provides that for grandfathered rates greater than the schedule of basic rates, only "one-half of the percentage [CNI] adjustments" shall be applied.

Effective July 1, 2017, a 3.84 percent CNI increase applies to Kin-GAP cases in which dependency was dismissed and NRLG cases (including probate) in which guardianship was established by the juvenile court on or after May 1, 2011 through December 31, 2016 and is reflected in Table B.

**Table B**

| Age | Birth-4 | 5-8 | 9-11 | 12-14 | 15-21 |
|---|---|---|---|---|---|
| Rate 7/1/17-6/30/18 | $734 | $794 | $836 | $875 | $917 |

Effective July 1, 2017, a 3.84 percent CNI increase applies to Kin-GAP cases in which dependency was dismissed and NRLG cases in which guardianship was established by the juvenile court on or after January 1, 2017 and is reflected in Table C.

In addition, the rates in Table C are applicable to: Resource Families (RFs), Foster Family Homes (FFHs), Relatives including Approved Relative Caregivers (ARCs), Non-Related Extended Family Members (NREFMs) and the Adoption Assistance Program (AAP).

**Table C:**

| *Basic Level Rate | LOC 2 | LOC 3 | LOC 4 |
|---|---|---|---|
| $923 | $1,027 | $1,131 | $1,235 |

Please note, pursuant to ACL NO. 17-11, *NRLG Probate* cases where guardianship was established on or after January 1, 2017 are only eligible for the Basic Level Rate with the corresponding CNI increase.

**Adoption Assistance Payment (AAP)**

For information regarding AAP and the CNI increases, please refer to ACL 17-69 effective July 1, 2017.

**Non-Minor Dependents (NMDs) Residing in a Supervised Independent Living Placement (SILP)**

Effective July 1, 2017, the 3.84 percent CNI increase applies to the *Basic Level Rate only (see Table C) for all NMDs residing in a SILP. The Specialized Care Increment (SCI) cannot be paid to NMDs residing in a SILP. Parenting NMDs can receive the infant supplement when residing in a SILP.

**Dual Agency Rates**

Effective July 1, 2017, the 3.84 percent CNI increase applies to the Dual Agency rate and is reflected in Table D.

**Table D**

| Age | FY 2017-18 |
|---|---|
| *Birth up to 3 years | $1,081 |
| 3 years and older | $2,417 |

*Under three years of age, if eligible, per WIC section 11464.

**Foster Family Agencies (FFAs)**

Effective July 1, 2017, the 3.84 percent CNI increase is only applied to the age-based rate portion (as identified in ACL NO. 16-57) that is retained by the RF. For all existing and new FFA placements made prior to January 1, 2017 through November 30, 2017, will continue to receive the rates that are reflected in Table E, unless there is a triggering event as described in ACL NO. 17-11.

**Table E**

| **FFA Rate Components – Phase I** | | | | | |
|---|---|---|---|---|---|
| Age | 0-4 | 5-8 | 9-11 | 12-14 | 15-21 |
| **FFA Certified Family Minimum Rate** | **$923** | **$983** | **$1,025** | **$1,064** | **$1,106** |
| Social Worker | $340 | $340 | $340 | $340 | $340 |
| Services and Supports | $156 | $156 | $156 | $156 | $156 |
| RFA | $48 | $48 | $48 | $48 | $48 |
| Administration | $672 | $672 | $672 | $672 | $672 |
| **Total** | **$2,139** | **$2,199** | **$2,241** | **$2,280** | **$2,322** |

Effective July 1, 2017, the 3.84 percent CNI increase applies to the FFA RF Rate portion only during Phase II for all FFA placements made after December 1, 2017.

**Table F:**

| FFA Rate Components – Phase II December 1, 2017 | | | | |
|---|---|---|---|---|
| | Basic Level Rate | LOC 2 | LOC 3 | LOC 4 |
| **RF** | **$923** | **$1,027** | **$1,131** | **$1,235** |
| Social Work | $340 | $340 | $340 | $340 |
| Social Services & Support | $156 | $200 | $244 | $323 |
| RFA | $48 | $48 | $48 | $48 |
| Administration | $672 | $672 | $672 | $672 |
| **Total** | **$2,139** | **$2,287** | **$2,435** | **$2,618** |

**Intensive Treatment Foster Care/Multidimensional Treatment Foster Care (ITFC/MTFC)**

Effective July 1, 2017, the 3.84 percent CNI increase applies to the minimum reimbursement only, which results in overall increase to the standard rate as reflected in Table G.

**Table G**

| Service and Rate Level | In-Home Support Counselor Hours per Month | Standard Rate | Minimum Reimbursement to Certified Home |
|---|---|---|---|
| Level I | 81-114 Hours | $5,892 | $2,410 |
| Level II | 47-80 Hours | $5,109 | $2,410 |
| Level III | Less than 47 Hours | $4,345 | $2,410 |

**Intensive Services Foster Care (ISFC)**

Effective July 1, 2017, the 3.84 percent CNI increase applies to the ISFC RF rate portion only, which results in an overall increase to the total rate as reflected in Table H.

**Table H:**

| FFA or County ISFC Rate | |
|---|---|
| **ISFC RF** | **$2,410** |
| Administrative Costs | $3,482 |
| Social Services & Support | $200 |
| **Total** | **$6,092** |

**Group Homes (GHs)**

Effective July 1, 2017, the 3.84 percent CNI increase applies to each GH Rate Classification Level (RCL) and is reflected in Table I.

**Table I**

| RCL | Point Ranges | Standard Rate |
|---|---|---|
| 1 | Under 60 | $2,551 |
| 2 | 60-89 | $3,187 |
| 3 | 90-119 | $3,822 |
| 4 | 120-149 | $4,455 |
| 5 | 150-179 | $5,087 |
| 6 | 180-209 | $5,725 |
| 7 | 210-239 | $6,359 |
| 8 | 240-269 | $6,997 |
| 9 | 270-299 | $7,629 |
| 10 | 300-329 | $8,266 |
| 11 | 330-359 | $8,898 |
| 12 | 360-389 | $9,535 |
| 13 | 390-419 | $10,177 |
| 14 | 420 & Up | $10,810 |

## Short-Term Residential Therapeutic Program (STRTP)

Effective July 1, 2017, the 3.84 percent CNI increase applies to the STRTP rate and is reflected in Table J:

**Table J**

| STRTP Rate | |
|---|---|
| Rate | $12,498 |

## Wraparound

Wraparound is a practice of partnering with families, relative caregivers, or resource families to provide intensive services to children and families with complex needs using a team-based approach. A Child and Family Team develop and follow a service plan that is comprehensive, family-centered, strengths-based and needs-driven. This is consistent with the goals of the Continuum of Care Reform (CCR).

In order to fund Wraparound, CDSS historically permitted the redirection of the non-federal portion (which is now realigned to counties) of the RCL GH rate. This portion is used for Wraparound services minus any concurrent placement costs. Counties are reminded that any actual cost savings generated as a result of adhering to fidelity of the model are to be reinvested into other child welfare services and/or may be used to expand wraparound to cover the costs for other child welfare or probation populations including federally eligible children. Cost savings are not defined as funds that are put into the wraparound trust fund prior to the delivery of services. Cost savings are generated as a result of having a child or youth use less funding for services and supports in out-of-home care in obtaining permanency quickly.

A change to the wraparound rate is subject to the enactment of AB 404. Upon enactment, the proposed rate would be retroactive to January 1, 2017, which will include a 3.84 percent CNI increase. Counties will be allowed to adjust their claims to reflect the new rate. Until AB 404 is passed, counties have the discretion to pay above the current statutory Wraparound rate listed in ACL NO. 16-79 using county only funds up to the amount authorized in AB 404. Effective July 1, 2017, until the enactment of AB 404, the 3.84 percent CNI increase is applied to the Wraparound rate reflected in Table K.

**Table K**

| Wraparound Rate | $8,902 |
|---|---|
| Non-Federal Child | $8,902 |
| Federally Eligible Child | $4,451 |

## Out-of-State GHs

The rate paid for California GH placements made out-of-state is the rate established by the rate-setting authority of the other state. However, the county cannot pay any rate amount exceeding the current fiscal year STRTP rate.

## Specialized Care Increment (SCI)

A county may choose to apply a CNI to the SCI. Consistent with the realignment of funding, there will be no state share-of-cost for any increase made to the SCI. Counties are reminded that if the SCI plan is subsequently updated, then it must be sent to CDSS for review and posting to the Department's website link for access and public viewing. See link: http://www.cdss.ca.gov/inforesources/Foster-Care/Specialized-Care.

## Infant Supplement

Effective July 1, 2017, children who are living with a teen parent in a Whole Family Foster Home (WFFH) shall be eligible for the Infant Supplement provided in an FFH, FFA and RFA home as reflected in Table L. This standardizes the infant supplement rate for all non-dependent children placed with their dependent parent.

## Table L

| Infant Supplement | | | | | | |
|---|---|---|---|---|---|---|
| Placement Type | GH | FFH/FFA/RFA | THP+FC Single Site Housing | THP+FC Remote Site Housing | THP+FC Host Family Model | SILP |
| Rate | $1,379 | $900 | $900 | $900 | $900 | $900 |

## Transitional Housing Placement Plus Foster Care (THP+FC)

Effective July 1, 2017, the 3.84 percent CNI increase applies to the THP+FC rates and is reflected in Table M.

## Table M

| THP+FC Placement Type | Rate |
|---|---|
| Single Site Housing | $3,209 |
| Remote Site Housing | $3,209 |
| Host Family Model | $2,553 |

## Unaccompanied Refugee Minors (URMs)

This section is specific only to the URM program and the providers that serve this population and will not require any changes to the automation systems used to make FC payments. The URM program is required to mirror the FC system and provide services and supports as if the children and youth were in FC. The FFAs that serve URMs will continue to receive the age-based rate and the RFs will be eligible for the CNI increases in Table E through Phase I. However, for Phase II, the FFAs will use Table F and follow new HBFC FFAs rate structure. Please see ACL NO. 16-03 for further information regarding the URM program.

## Inquiries

If you have any questions regarding the rates information in this ACL, please contact your Rates Consultant or the Foster Care Rates Bureau at (916) 651-9152.

## Assistance Claiming Instructions and Payment Questions

For information on claiming instructions, questions may be sent via email to fiscal.systems@dss.ca.gov. For information on payments, questions may be sent via email to assistance.claims@dss.ca.gov.

Sincerely,

***Original Document Signed By:***

GREGORY E. ROSE
Deputy Director
Children and Family Services Division

c: CWDA