

DRAFT

**LAKE SHORE HOSPITAL AUTHORITY
BOARD OF TRUSTEES**

Regular Meeting – October 14, 2024, 5:15 p.m.

This meeting was conducted as a public meeting and a virtual meeting.

Present: Stephen Douglas, Chair
Brandon Beil, Vice-Chair
Jerry Bullard, Trustee

Lory Chancy – Secretary/Treasurer
Don Kennedy, Trustee

Absent:

Also

Present: Dale Williams, Executive Director
Todd Kennon, Attorney
Richard Powell, Accountant
Shawn Holmgren
Susan Phillips
Philip Fowler
Melissa Olin

Sonja Markham, LSHA Staff
Karl Plenge, NOC
Barbara Foreman
Barbara Lemley
Sheree Allen
James Olin
Jamie Wachter, Reporter

5 participants participated in the LSHA Virtual Regular Board Meeting.

CALL TO ORDER

Chairman Douglas called the in person/virtual October 14, 2024, Regular Meeting to order at 5:15 P.M. Chairman Douglas called for additions/deletions to the agenda. Mr. Dale Williams requested one addition to the Agenda. He would like the Trustees to review the “Agreement to Release Reverter” with the Lake City Masonic Lodge including the two (2) exhibits. **Motion** by Mr. Brandon Beil to approve adoption of the agenda as amended. **Second** by Mrs. Lory Chancy. All in favor. **Motion carried.**

INDIVIDUAL APPEARANCES

Public Comments by Mrs. Barbara Foreman, Ms. Barbara Lemley, and Mr. Shawn Holmgren.

CONSENT AGENDA

Chairman Douglas called for a motion to approve the Consent Agenda. **Motion** by Mr. Brandon Beil to approve adoption of the Consent Agenda. **Second** by Mr. Jerry Bullard. All in favor. **Motion carried.**

NEW BUSINESS

Organizational Meeting – Election of Officers

Chairman Douglas opened the floor for nominations for Election of Chair. **Motion** by Mr. Brandon Beil to nominate Chairman Stephen Douglas for Chairman for another term. **Second** by Mr. Don Kennedy. Chairman Douglas asked if there were other nominations for Chairman. There were none. All in favor. **Motion carried.**

DRAFT

Page 2
LSHA - Regular Meeting Minutes
October 14, 2024

Chairman Douglas opened the floor for nominations for Election of Vice-Chair. **Motion** by Mr. Don Kennedy to nominate our current Vice-Chair, Mr. Brandon Beil, Vice-Chair for the 2024-2025 FY. **Second** by Mr. Jerry Bullard. All in favor. **Motion carried.**

Chairman Douglas opened the floor for nominations for Election of Secretary/Treasurer. **Motion** by Mr. Brandon Beil to nominate Mr. Don Kennedy for Secretary/Treasurer. **Second** by Mrs. Lory Chancy. Roll call vote – Mrs. Lory Chancy – yes, Mr. Don Kennedy – no, Mr. Jerry Bullard – yes, Mr. Brandon Beil – yes. **Motion carried 3 to 1.**

Approval of Lake Shore Hospital Authority Board of Trustees Meeting Schedule

Mr. Dale Williams informed the Board of the 2025 Meeting Schedule. LSHA meetings are the second Monday of each month and start at 5:15 pm. **Motion** by Mr. Don Kennedy to approve the 2024-2025 Meeting Schedule. **Second** by Mrs. Lory Chancy. Public Comment by Ms. Susan Phillips regarding the start time. Discussion. All in favor. **Motion Carried.**

Discussion and Action – Change November 11, 2024, LSHA Board meeting due to Veterans Day (a LSHA holiday)

Mr. Dale Williams informed the Trustees of the conflict. Discussion. **Motion** by Mr. Brandon Beil to amend the 2024 meeting calendar to have the regular November Board meeting on Wednesday, November 13, 2024, at 5:15 pm at the Authority office. **Second** by Mr. Don Kennedy. All in favor. **Motion Carried.**

Discussion and Possible Action – continuance of Zoom meetings

Public comments by Ms. Barbara Lemley, Mr. Stew Lilker (zoom), and Ms. Susan Phillips. Discussion by the Trustees regarding Zoom. **Motion** by Mr. Don Kennedy to continue the Zoom meetings without public comments. **Second** by Mr. Brandon Beil for discussion. Additional discussion. Roll call vote – Mrs. Lory Chancy – no, Mr. Don Kennedy – no, Mr. Jerry Bullard – no, Mr. Brandon Beil – no. **Motion failed.** Zoom meetings will continue.

Discussion and Possible Action – Request to amend Section 8.01 (B) Leave Accounting of the Lake Shore Hospital Authority Personnel Policy Manual to provide a one-time payment to Employee, Sonja Markham, for 34.20 hours

Mr. Dale Williams is seeking an exception to the Personnel Policy to allow payment of 26.20 (actual) of earned work time in lieu of the annual leave converting to sick leave as per the Personnel Policy. Mr. Brandon Beil suggested any excess annual leave of 320 hours be paid out as of October 1st. Discussion. **Motion** by Mr. Brandon Beil to amend the Personnel policy, to state on October 1st any available annual leave in excess of 320 hours can be paid to an employee, or converted to sick leave as per the policy, this can be at the employees discretion. The Executive Director shall monitor the use of employee annual leave to ensure annual leave is used for the purpose intended unless leave requests must be denied to maintain the operations of the Authority. **Second** by Mr. Don Kennedy. All in favor. **Motion Carried.**

Page 3
LSHA - Regular Meeting Minutes
October 14, 2024

Unfinished Business

Dale Williams, Executive Director

Discussion and action – DSI (security service) Rate Change Notice

Mr. Williams reminded the Trustees of the status of the security company and the rate change notice. Mr. Williams recommended to the Trustees to accept the DSI rate change notice at this time. Public Comment by Ms. Susan Phillips. Discussion. **Motion** by Mr. Brandon Beil to sign the DSI agreement and continue services with them. **Second** by Mrs. Lory Chancy. All in favor. **Motion Carried.**

Discussion and Possible Approval – Efforts to Provide Medical Services and/or utilize Buildings on the Lake Shore Hospital Campus including the establishment of an Authority owned primary care clinic operated by a third party

Mr. Dale Williams reported to the Trustees that a Request for Proposals (RFP) had been prepared for an Authority owned primary care clinic. There will be mandatory pre-proposal meeting with interested parties to give a tour of the campus and answer additional questions. Public comments by Ms. Barbara Lemley. Discussion. Mr. Todd Kennon updated the Trustees on the request of the Third Judicial Courts and the two-story Women's Center. Mr. Williams also informed the Trustees of the City of Lake City's continued interest in properties located on the hospital campus.

Recess at 6:35 pm to change the recording tape. Chairman Douglas called the meeting back to order after changing the tape.

Discussion continues. **Motion** by Mr. Brandon Beil to proceed with the RFP. **Second** by Mrs. Lory Chancy. Roll call vote – Mrs. Lory Chancy – yes, Mr. Don Kennedy – yes, Mr. Jerry Bullard – yes, Mr. Brandon Beil – yes. All in favor. **Motion Carried.** Continued discussion regarding the City of Lake City, their interest in the campus and the status of the properties given to the City of Lake City. Mr. Beil requested Mr. Williams to reach out to Mr. Rosenthal, Lake City Manager to discuss these items.

Unfinished Business – Todd Kennon – LSHA attorney

Discussion and possible action – Disposition of real property owned by the Lake Shore Hospital Authority to third parties, including but not limited to the Lake Shore Hospital Building pursuant to the “Agreement for the Purchase and Sale of Real Property” from the Lake Shore Hospital Authority to Meridian Behavioral Healthcare.

Mr. Todd Kennon updated the Trustees on the red-line version of the updated Agreement for the Conveyance of Real Property.

Page 4

LSHA – Regular Meeting Minutes

October 14, 2024

Mr. Todd Kennon asked the Board for additional direction regarding the thirty-year reverter clause, the language regarding adult residential services, the language regarding out-patient services, and the continued operation and maintenance of the helipad. Public comments by Ms. Barbara Lemley, Mr. Shawn Holmgren, an unnamed/unknown female, and Mr. Stew Lilker (zoom). Discussion. **Motion** by Mr. Don Kennedy on the updated red-line Agreement, page 16 item IV, Duration., the duration of the Deed Restrictions, Use Requirements, and Reverter Clause set forth shall be thirty (30) years from the Closing date. **Second** by Mr. Brandon Beil. Roll call vote – Mrs. Lory Chancy – no, Mr. Don Kennedy – yes, Mr. Jerry Bullard – yes, Mr. Brandon Beil – yes. **Motion Carried 3 to 1.** Mr. Todd Kennon and Mr. Dale Williams will get with Meridian’s legal and continue to work on remaining issues. A Special Meeting is scheduled for Tuesday, October 29th at 5:15 pm. (*NOTE* After scheduling the Special Meeting, a conflict arose requiring the Special Meeting to be moved to October 30, 2024.)

Agreement to Release Reverter

Mr. Todd Kennon explained Mrs. Lory Chancy had issues with attesting to the “Agreement to Release Reverter” with the Lake City Masonic Lodge. Mr. Todd Kennon offered solutions to getting the Agreement executed. After discussion, the Trustees decided to change the Secretary/Treasurer attestation to Donald R. Kennedy (newly appointed).

STAFF REPORT

The staff report is in the Trustee packets.

BOARD MEMBER COMMENTS

Comments by Mrs. Lory Chancy.

Meeting adjourned.

Respectfully submitted,

Donald R. Kennedy, Secretary/Treasurer

Date of Approval

Harlan Shawn Holmgren
240 NE Laguna Drive
Lake City, FL 32055
Telephone (561) 389-1490
alligatorlc@outlook.com

October 14, 2024

Lake Shore Hospital Authority Board of Trustees
259 NE Franklin Street, Suite 102
Lake City, FL 32055

Hand Delivered

In re: Lawsuit and legal remedies regarding transfer of Shands Hospital to Meridian Behavioral Health.

Dear Trustees:

I am writing to inform you that I plan to exercise all legal remedies available to me, including but not limited to suing you corporately as a Board, and individually for destroying my quality of life, my real estate values and my right to quiet and peaceful enjoyment of the streets and parks near my home on Lake Desoto. You will recall that I have spoken about this at your meetings several times.

Beginning in 1955, when the Florida Legislature created the Lake Shore Hospital Authority (LSHA), the purpose of the LSHA was clearly to provide surgeries and medical therapies to local indigent populations through a **Hospital** and affiliated network of assets including medical office buildings, admin buildings etc. In 1972, the Legislature inserted a caveat that required one member of the Trustee Board to be a Physician who practiced **at the Hospital**. The intent of this legislation was not for the LSHA to just supervise a collection of medical office buildings and a Land Trust, though. The intent was clear since it included the word "Hospital" in the name. The LSHA was able to conduct other business as needed to *complement* the "Hospital Operations", but it was always clear what the purpose of LSHA was. Hospital.

If the LSHA decided to open a mental health hospital itself, and operate it strictly for the benefit of Columbia County residents, this would likely fall under the Legislative intent. Yet that is not what you have proposed to do. You will destroy real estate values in the center of Lake City, the County Seat, by giving the hospital to Meridian, while simultaneously negating the purpose for which you were created. Meridian is a "for profit" corporation registered in Gainesville, with plans to treat Baker-acted patients here, drawn from numerous Counties and Jurisdictions, in a lock-down mental facility. Many of these patients are dangerous to themselves and others, especially if they escape into the community near parks and playgrounds. Certainly not what the Legislature was intending to do for the poor people here.

Contrary to what one of your Trustees has publicly stated, many in the business community, and residents that have real estate interests near downtown, do NOT support the initiative to give Meridian the Hospital. They are **aghast** that you would do this when there is currently a resolution on the 2024 Election ballot to disband the LSHA; an initiative sponsored by the Columbia County Commissioners.

If you want to give the Hospital building away, you should give it to the County, or City it is located in, not give away assets that belong to the Taxpayers or State of Florida to a For Profit Company with plans that may negatively impact our entertainment district, downtown businesses and area residents. Giving the Hospital to Meridian is not good stewardship of taxpayer dollars, or legislative intent.

All the while, you still don't have a practicing physician on the Board. Surely, making such a monumental change to the LSHA balance sheet, when LSHA validity is being questioned by the very community they were set up to serve, could be considered malfeasance on your part. What would a practicing Physician say if you had one? I'm not sure how legal it is to convey the largest asset you own, a Hospital, without having a local Physician's advice, but it sure does pose a risk of changing the dynamics of real estate & investment in our Down-Town area. The problem is, if you go through with this transfer, whether it's legal or not, the residents of Lake City will have to live with the consequences of your decision forever. And again, what is your function going to be then, if you no longer operate a Hospital? Running a Real estate portfolio? With no Doctor involved? How is that legal?

In addition, what assurance will you provide that this transfer of Millions of dollars' worth of real estate for free will not benefit companies, firms and suppliers who are directly or indirectly involved with the LSHA administration, such as the engineering firm Dale Williams is otherwise employed by; North Florida Professional Services? There should be stipulations in the contract that Meridian will not do business with any of the firms or suppliers that each member of the LSHA Board and Administrative staff have ties to, for a period of 5 years or so; to assuage concerns from residents that paybacks may occur.

The LSHA is not serving the greatest public interest anymore, since the Affordable Care Act now provides care to almost everyone. Now, before the Columbia County Citizens can try to convince the Legislature to disband the LSHA, it appears you are doing your best to injure the very community you were set up to serve. From what I can glean, the LSHA spends \$300,000 - \$400,000 on administrative costs to deliver less than \$100,000 worth of care to the indigent population here, and that's not counting the repair and maintenance costs on facilities. How can you justify spending hundreds of thousands of dollars on administrative cost to administer \$75,000 - \$100,000 worth of care? You should voluntarily vote to disband the LSHA and give the assets to the County, as a matter of conscience.

I implore you to make a better decision; one that will not make you the architect of decline in our community. Be advised, however, that I will pursue all legal remedies available to me, when and if I am injured by the actions of this Board, or can no longer enjoy the quiet peaceful use of my home and neighboring parks. I will likely be enjoined by others in a class action suit against you, if this happens.

Sincerely,



Harlan Shawn Holmgren

c.c. **Stephen Douglas** - Chair, **Lory Chancy** - Secretary/Treasurer, **Brandon Beil** - Vice-Chair, **Don Kennedy** - Trustee, **Jerry Bullard**, Trustee, **Dale Williams** - Executive Director, **Todd Kennon** - Attny

Sonja Markham

From: Brad Hough <brad@powellandjonescpa.com>
Sent: Thursday, October 10, 2024 11:45 AM
To: Sonja Markham
Cc: Karl Harmon; Caleb Perla; Stephanie Hough
Subject: Fee Proposal
Attachments: 2024 Lake Shore Hospital Authority Fee Proposal.pdf

Hi Sonja,

I hope that you are having a good week.

Per our previous conversation, based on our assessment of the hours required to complete the Lake Shore Hospital Authority Audit, we are proposing a price increase for future engagements. Please review the attached fee proposal with your Board and provide a response when you are able to do so.

Thank you,
Brad Hough, CPA
Partner
Powell and Jones CPA
brad@powellandjonescpa.com
404.723.5811





Powell and Jones CPA

1359 SW Main BLVD
Lake City, FL 32025
Phone: 386.755.4200
office@powellandjonescpa.com

October 10, 2024

FEE PROPOSAL - AUDIT & ASSURANCE SERVICES LAKE SHORE HOSPITAL AUTHORITY

We are submitting a fee proposal for audit services for Lake Shore Hospital Authority (the Organization) for the fiscal year end of September 30, 2024 and future years.

Basic Audit Services

The annual financial audit of the Organization in accordance with applicable auditing standards includes the following services:

- Annual audit of the Organization
- Delivery of audit at the Board of Trustees meeting.
- Routine telephone consultations to Organization's administrative and financial staff regarding accounting and auditing related matters.
- Preparation of the Organization's annual financial statements and related disclosures.
- Preparation of the Organization's Form 990, "Return of the Organization Exempt from Income Tax"

The fee for the above basic audit services is \$10,000. The fee proposal is based on anticipated cooperation from your personnel and the assumption that unexpected circumstances will not be encountered during the audit. If significant additional time is necessary, we will discuss it with you and arrive at a new fee before we incur the additional costs. Our invoices for these fees will be rendered shortly after the audit presentation.

RIGHT TO TERMINATE

The Organization has the right to terminate services at any time.

The Organization's only financial responsibility to us upon termination is to pay for all services completed to date and provide reasonable notice of termination.

FUTURE FEES

Future fees will be at the prior year fee plus an adjustment for any increases in the Consumer Price Index for Urban Consumers (CPI-U) unless otherwise agreed upon by both parties. The CPI-U

adjustment rate will be calculated based on the 12-month period ending September 30 of the year to be audited.

STATUTE OF LIMITATIONS

Notwithstanding the terms of this agreement each year's audit is a standalone engagement subject to the terms of its own engagement letter and its own statute of limitations.

We appreciate the opportunity to be of continued service to the Organization. If you have any questions, please let us know. If you agree with the terms of this proposal, please sign below.

Signature 

Name: Brad Hough, CPA

Title: Partner

Powell and Jones CPA

Signature _____

Name: _____

Title: _____

Lake Shore Hospital Authority

LAKE SHORE HOSPITAL AUTHORITY
BUILDINGS ADMINISTRATION FUND
BUDGET AMENDMENT 2024-5
FISCAL YEAR 2023-2024

	APPROVED BUDGET	AMENDMENT	AS AMENDED
Auto Exp	\$ 1,250	\$ -	1,250
Computer/Internet	2,500	-	2,500
Dues/Subscriptions			
Insurance	74,000	-	74,000
Lawn Main	35,010	-	35,010
Office Exp	2,300		2,300
Total payroll	110,100	-	110,100
Pest control	8,100	-	8,100
Postage		-	-
Professional Fees	1,530	-	1,530
Repair/Equipment	25,300	12,000	37,300
Security	158,700	-	158,700
Utility - Electric	144,500	-	144,500
Fire Alarm	2,100	200	2,300
Utility - Garbage Disposal	-	-	-
Utility - Phone	8,500	-	8,500
Utility - Water/Sewage	77,000	(5,000)	72,000
	\$ 650,890	\$ 7,200	\$ 658,090

FUNDED BY:

Beginning Cash	\$ 200,000	\$ -	200,000
Transfer from General Fund	450,890	7,200	458,090
	\$ 650,890	\$ 7,200	\$ 658,090

LSHA Healthcare Services Fund

Proposed Budget

October 2023 - September 2024

	Adopted Oct 23-Sept 24	Final Amendment	Final Oct 23- Sept 24
Ordinary Income/Expense			
Income			
Ad Valorem Tax - Current	\$ -	-	
Ad Valorem Tax - Delinquent	-	-	
Interest Income	240,000		240,000
Miscellaneous Income	-		-
Total Income	<u>240,000</u>	-	<u>240,000</u>
Gross Profit	<u>240,000</u>	-	<u>240,000</u>
Expense			
Tax Collector Fees	-		
Property Appraiser Fees	-		
Other Expenses	-		
Indigent Care	-		
Physician Reimbursement	-		
Indigent Care - Other	400,000	(375,000)	25,000
Urgent Care Clinic Subsidy	-		
Total Indigent Care	<u>400,000</u>	<u>(375,000)</u>	<u>25,000</u>
Total Expense	<u>400,000</u>	<u>(375,000)</u>	<u>25,000</u>
Net Ordinary Income	(160,000)	375,000	215,000
Transfer to Operating Fund	-	(686,389)	(686,389)
Net Income	(160,000)	(311,389)	(471,389)
Beginning Fund Balance	9,900,000	-	9,900,000
	<u>\$ 9,740,000</u>	<u>(311,389)</u>	<u>9,428,611</u>

LSHA Operating Fund
BUDGET AMENDMENT- OCT. 2023 - SEPT 2024

	Adopted Oct 23-Sept 24	Final Amendment	Final 2023-2024
Income			
Interest Income	\$ 300,000		300,000
Miscellaneous Revenue			
Other Income	5,000		5,000
Rental Income	-		-
Total Income	305,000	-	305,000
Gross Profit	305,000	-	305,000
Expense			
Accounting Services	26,000	(8,000)	18,000
Advertising	3,500	500	4,000
Bank Fees	500		500
Communications Expense	7,000		7,000
Dues & Subscriptions	3,000	800	3,800
Employee Expense	750		750
Insurance			
Property	8,000		8,000
Workers' Compensation	2,500		2,500
Directors & Officers Liability	50,000	(5,000)	45,000
General Liability	25,000		25,000
Total Insurance	85,500		
Janitorial Expense	3,600	1,000	4,600
Lawn Maintenance	6,000	1,000	7,000
Legal Services	35,000	12,000	47,000
Licenses	3,000	(2,500)	500
Miscellaneous Expense	3,000		3,000
Office Expense			
Computer/Network related	18,000	10,000	28,000
Miscellaneous Supplies	3,000		3,000
Office Supplies	5,000	(2,000)	3,000
Website Maintenance	3,000		3,000
Office Expense - Other	3,000	500	3,500
Total Office Expense	38,000		
Postage	500		500
Professional Services	1,000	127,000	128,000
Repair & Maintenance			
Building	2,500		2,500
Equipment	5,000	3,000	8,000
Repair & Maintenance - Other	2,500		2,500
Total Repair & Maintenance	11,500		
Utilities			
Electric	7,000		7,000
Garbage Disposal	500		500
Water, Sewer, Gas	4,000	1,000	5,000
Total Utilities	11,500		
66000 - Payroll Expenses			
Payroll Taxes	12,000		12,000
Retirement Contributions	20,250		20,250
Wages	150,000	-	150,000
66000 - Payroll Expenses - Other	500		500
Total 66000 - Payroll Expenses	182,750		
66900 - Reconciliation Discrepancies			
69800 - Uncategorized Expenses			
Property taxes	-		
Total Expense	414,600	139,300	553,900
Net Income			
Interfund Transfer Out	(109,600)	(120,000)	(720,000)
Interfund Transfer from Hospital Services	(600,000)	686,389	686,389
Beginning Fund Balance	9,000,000	-	9,000,000
Ending Fund Balance	\$ 8,290,400	\$ 427,089	\$ 8,717,889

CHAPTER 8

LEAVE ACCOUNTING

8.01 ANNUAL LEAVE.

A. Eligibility and Accrual Rate. Each full time employee is eligible for annual leave, with full pay, computed on the basis of continuous service. Annual leave is based on weekly basis as follows:

Less than One (1) year service	1.5 hours per weekly pay period
One (1) up to Five (5) years service	2.6 hours per weekly pay period
Five (5) up to ten (10) years service	3.1 hours per weekly pay period
Over ten (10) years service	4 hours per weekly pay period

B. Maximum Accumulation. The Authority grants annual leave as a reward for the purpose of rest and relaxation as an investment in the employee. Authority policy encourages employees to take their annual leave during the year following the period in which they became eligible for it. Employees may not accumulate more than 320 hours annual leave. Annual leave in excess of 320 hours at the beginning of the fiscal year (October 1st) can be paid to an employee, or converted to sick leave as per the policy, this can be at the employees discretion. The Executive Director shall monitor the use of employee annual leave to ensure annual leave is used for the purpose intended unless leave requests must be denied to maintain the operations of the Authority. Upon separation, compensation is made to the employee for any earned but unused leave to their credit as of the effective date of termination. All earned pay and annual leave of employees who die while in the service of the Authority is paid to the spouse or estate of the employee.

C. Requesting Annual Leave. Request for annual leave shall be made a minimum of seven (7) calendar days in advance of planned use. In emergency cases, the Authority Manager may waive this requirement. When a request for annual leave is denied, the employee shall be notified in writing stating the reason for denial.

D. If a paid holiday occurs during annual leave, the day will be treated as a holiday.

E. Annual leave will be used in no less than one (1) hour increments.

8.02 SICK LEAVE.

A. Eligibility and Accrual Rate. All regular full-time employees are eligible for sick leave at the rate of eight (8) hours per month. There is no threshold to the number of hours an employee may accumulate. Employees may use sick leave benefits for an absence due to their own illness or injury or, that of an immediate family member as defined in Section 8.04. Sick leave shall be used in hourly increments with the minimum being one (1) hour.

OLD

CHAPTER 8

LEAVE ACCOUNTING

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B. **Maximum Accumulation.** The Authority grants annual leave as a reward for the purpose of rest and relaxation as an investment in the employee. Authority policy encourages employees to take their annual leave during the year following the period in which they became eligible for it. Employees may not accumulate more than 320 hours annual leave. Annual leave in excess of 320 hours at the beginning of the fiscal year (October 1st) will be converted to sick leave. Payment of annual leave is not authorized at anytime other than upon an employee's separation from Authority. Upon separation, compensation is made to the employee for any earned but unused leave to their credit as of the effective date of termination. All earned pay and annual leave of employees who die while in the service of the Authority is paid to the spouse or estate of the employee.

C. **Requesting Annual Leave.** Request for annual leave shall be made a minimum of seven (7) calendar days in advance of planned use. In emergency cases, the Authority Manager may waive this requirement. When a request for annual leave is denied, the employee shall be notified in writing stating the reason for denial.

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B. **Medical Certification.** After three (3) consecutive days of absence, the employee shall submit to the Authority a medical certification from the attending physician before any additional use of sick leave credits will be authorized for the employee. If the employee

**LAKE SHORE HOSPITAL AUTHORITY (LSHA)
Request for Proposals**

**Community Health Needs Assessment (CHNA)
November 2024**

LSHA is seeking a consultant to perform a Community Health Needs Assessment (CHNA) survey and report for the LSHA Service area.

I. LSHA Background

Lake Shore Hospital Authority (LSHA) is a special purpose, independent special district of the State of Florida. The Authority was established on July 10, 1963, by a special act of Florida Legislature, Chapter 63-1247 of the *Laws of Florida*. Accordingly, it is controlled by the Florida Constitution and various *Florida Statutes* as well as its enacting legislation and Authority policies. Is it governed by a seven member board who are appointed by the Governor.

The goal of our CHNA is to gain a better understanding of the most pressing needs impacting our community including health gaps, assets, disparities and trends.

II. Goals and Objectives

The overall goal for the LSHA community health needs assessment is to provide detailed insight into the health status of the community we serve, including health assets, gaps, disparities and trends. This will allow LSHA to respond with the optimal mix of health and preventive services. Specific objectives of this needs assessment are to:

- a. Provide final reports with detailed data.
- b. Utilize previous data from all sources to compare with new data.
- c. Understand the health status of the LSHA service area using available public and proprietary data sources. This should include identification of health disparities among populations.
- d. Identify and understand the scope and severity of the social determinants of health of the LSHA service area.
- e. Obtain a “snapshot” of residents in the neighboring counties that comprise the hospitals’ secondary and tertiary service areas.
- f. Evaluate the accessibility of health and preventive services.
- g. Identify target populations in the service area who have unfulfilled health and preventive service needs and identify services that these groups would optimally utilize.

III. Scope of Work

The LSHA serves Columbia County, Florida. Columbia County has a population of 73,063 (2023). Approximately 18% of the total population lives in 2 municipalities. The City of Lake City, Florida (12,602) and the Town of Fort White (648).

IV. Project Deliverables

The selected consultant must ensure, at a minimum, completion of the following deliverables as part of their contract and scope of work:

- i. Provide a final individual report with detailed data.
- ii. Provide one executive report at the network level, which shares a “snapshot” of the network’s service area and identifies common themes in the data.

V. Methodology/Strategic Overview

a. Strategies:

- i. Integrate a community-based, participatory approach involving key stakeholders representative of multiple sectors in the community and citizens in all the steps leading to the community health needs assessment, dissemination and implementation.
- ii. Use of Geographic Information Systems (GIS) methodologies are encouraged to map specific health variables; look for clustering with concentration of risks; examine patterns of health care utilization and/or access to care; and as a resource to facilitate data acquisition for multi-level modeling and contextual analysis.
- iii. Oversample population subgroups experiencing worse health outcomes and limited access to preventive services in an effort to address health equity.

b. Methodology:

- i. **Primary Research:** Describe the data sets, survey design and methods, and sampling techniques used to assess or survey community health status information through primary research, including how you would ensure minority populations are appropriately represented.
 - Consideration in conducting 4-6 focus groups for hard-to-reach populations.
- ii. **Secondary Research:** Describe in detail the approach and specific methods, your firm would use to collect, interpret and analyze secondary data that allows for trending and comparison to benchmark at the county, state, and national levels. Include information on racial/ethnic breakdowns of data whenever available.

VI. Proposal Submission Requirements

Interested consultants are invited to submit a proposal to LSHA. Proposals must be no longer than 10 pages (not including attachments) and must provide the following information:

a. Bidder Qualifications:

- i. In order to be selected for this assignment, the Bidder must demonstrate that it can meet the required scope of work and project deliverables.
- ii. Proposer must hold proficient knowledge in the Community Health Needs Assessment requirements.
- iii. Proposer must experience conducting Community Health Needs Assessment or similar projects and provide at least three references.

Bidder will identify Project Team and qualifications of the individuals serving LSHA.

- b. Work Plan and Deliverables:** Describe your proposed process and methodologies to complete the CHNA reports, including collection, interpretation, and analysis of primary and secondary data and identification and prioritization of community health needs.
- c. Timeline:** Propose a deadline and a detailed timetable for meeting this deadline.
- d. Budget Proposal:** Provide an understandable and clearly delineated fee structure.
- e. Expected LSHA Deliverables:** Describe the support, information, and any other resources you will need from LSHA in order to fulfill your contract.

Proposal Submission Instructions

Completed proposals must be submitted by _____.

Please email the completed document in PDF format as an attachment to sonja@lakeshoreha.org
Include the name of the applicant/organization in the subject line.

Sonja Markham
Administrative Assistant
Lake Shore Hospital Authority
259 NE Franklin Street, Suite 102
Lake City, Florida 32055
386-344-6033

Insured: Lake Shore Hospital Authority

Insurer: Landmark American Insurance Company

Coverage: Not-For-Profit Entity Directors and Officers Liability and Employment Practices Liability

Limit of Liability: \$1,000,000 Per Claim
\$1,000,000 Annual Aggregate

Sublimit-Defense of Non-Monetary Damages: \$250,000 Per Claim / \$750,000 Aggregate / \$100,000 SIR

Policy Term: 12/14/2024 – 12/14/2025

Conditions: Exclusions: Amended Bodily Injury and Property Damage; Bankruptcy-Insolvency; Biometric Privacy Claims; Malpractice; Network Security and Privacy Information; Prior Acts – Inception; Regulatory; Sexual Abuse and Sexual Misconduct
 \$100,000 Retention D&O and EPLI Each Claim
 25% Minimum Earned Premium
 No Flat Cancellation
 Prior and/or Pending Litigation Date: 12/14/2021
CLAIMS MADE BASIS
 This Quote Expires: **12/14/2024**
 Required to bind coverage:
Completed, signed and dated surplus lines disclosure
Completed, signed and dated fraud statement
 Other terms, conditions and exclusions as described in policy

Premium: \$45,000.00 Premium
\$45,000.00 Total Premium

Payment Terms: Will invoice – Due within 10 days of invoice date
(If full premium payment is not received by the due date indicated on the invoice, the policy is subject to cancellation for non-payment of premium by the insurer.)

The Landmark American Insurance Company is an approved, non-licensed insurer in the State of Florida. It is not subject to the Guaranty Fund. The A.M. Best rating is A++ XIV.

Surplus Lines Disclosure and Acknowledgement

At my direction, Florida League of Cities, Inc. name of insurance agency has placed my coverage in the surplus lines market.

As required by Florida Statute 626.916, I have agreed to this placement. I understand that coverage may be available in the admitted market and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Lake Shore Hospital Authority

Named Insured

By: *Dale Williams*
Signature of Named Insured

10/24/24
Date

DALE WILLIAMS - EXECUTIVE DIRECTOR
Printed Name and Title of Person Signing

Landmark American Insurance Company

Name of Excess and Surplus Lines Carrier

Directors and Officers Liability

Type of Insurance

12/14/2024

Effective Date of Coverage

FLORIDA LAW REQUIRES US TO NOTIFY YOU OF THE FOLLOWING:

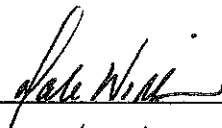
FLORIDA FRAUD STATEMENT

Section 817.234(1)(b),F.S.

Named Insured: Lake Shore Hospital Authority

Effective Date: 12/14/2024

Any person who knowingly and with the intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Signature 

Date 10/24/24

November 4, 2024

TO: LSHA Trustees

FR: Dale Williams

RE: Lake Shore Hospital Campus Utilization

This will serve as a follow-up to my September 23, 2024, Special Meeting presentation. After the meeting on the 23rd, I received a call from Don Rosenthal, City Manager, and the attached email. The City Manager advised the city still had an interest in the remaining LSH campus. As the previous action taken by the Trustees "closed" the process for expressing interest in the LSH campus, I have not amended the available options below to include the city. Please advise if you wish to do so.

Our current Lake Shore Hospital Campus plan/options is as follows:

Lake Shore Hospital -

- 1.) Meridian Behavioral Healthcare*

Women's Center -

- 1.) 3rd Judicial Courts

Physical Therapy Building -

- 1.) Mayo Pharmacy
- 2.) Primary Care Clinic (Owned by LSHA. Operated by a private 3rd party). **

Records Storage Building -

- 1.) Columbia County Clerk of Courts (lease has been executed, inventory has been removed, building is available for occupancy).

Storage Building (NE Corner of Campus)-

- 1.) Columbia EMS (lease is currently in negotiation).

LSHA Administrative Building -

- 1.) No specific proposal received.

NOTES

* The City of Lake City has advised they consider the current Lake Shore Hospital to be in a nonconforming status as per city land development regulations.

****Palms Medical Group was the lone proposer to operate a primary medical care facility for the LSHA. A full operating proposal is due on or before November 25, 2024.**

1.) Single service proposals (i.e. phlebotomy) were not included as the space they require is limited.

Staff Report
November 13, 2024 Regular Meeting

NEW	0
RENEW	2
INELIGIBLE (INCOME OR OTHER)	0
TOTAL CLIENTS SEEN IN OFFICE IN OCTOBER	2
ACTIVE MEMBERS	18
PUBLIC VISITS	11
PRIMARY CARE VISITS – 2 LOCATIONS	
September, 2024	10
YTD (Fiscal year October – Sept)	106
PHARMACY USAGE	
September 2024	
PATIENTS SERVED	3
RX'S FILLED	11