



C. L. Brumback

**Primary Care Clinics**

Health Care District Palm Beach County

## **NOMINATING COMMITTEE**

**January 29, 2020**

**12:00 P.M.**

### **Meeting Location**

**1515 N. Flagler Drive, Suite 101**

**West Palm Beach, FL 33401**

*If a person decides to appeal any decision made by the board, with respect to any matter at such meeting or hearing, he will need a record of the proceedings, and that, for such purpose, he may need to ensure that a verbatim record of the proceedings made, which record includes the testimony and evidence upon which the appeal is to be based.*



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**MEMBERSHIP/NOMINATING MEETING  
AGENDA**

**January 29, 2020**

**1515 N. Flagler Drive**

**West Palm Beach, FL 33401**

**1. RECEIVE AND FILE:**

January 2020 Internet Posting of District Public Meeting.

<http://www.hcdpbc.org/index.aspx?recordid=2597&page=15>

**2. MOTION TO APPROVE:**

Nomination of Susan Foster to the Clinic Board

(Thomas Cleare) [Pages 1-4]

**DISTRICT CLINIC HOLDINGS, INC.**  
**MEMBERSHIP / NOMINATING COMMITTEE**  
**January 29, 2020**

**1. Description: Nomination of Susan Foster to the Clinic Board**

**2. Summary:**

This agenda item recommends the appointment of Susan Foster to the Clinic Board.

**3. Substantive Analysis:**

Susan Foster has submitted an application for consideration for appointment to the District Clinic Holdings, Inc. Board of Directors. Ms. Foster brings prior business experience and nurse training to the Board. Ms. Foster also brings experience serving on the Board of Directors for an organization in West Palm Beach where she assists with fundraising data management. Ms. Foster also has previous experience working with Migrant and Seasonal Farm Workers and Homeless populations.

You can find a copy of Ms. Foster's application can be found after the next page.

**4. Fiscal Analysis & Economic Impact Statement:**

	<b>Amount</b>	<b>Budget</b>
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

\_\_\_\_\_  
 Joel Snook  
 Chief Financial Officer

**5. Reviewed/Approved by Committee:**

N/A

\_\_\_\_\_  
 Committee Name

\_\_\_\_\_  
 Date Approved

**DISTRICT CLINIC HOLDINGS, INC.**  
**MEMBERSHIP / NOMINATING COMMITTEE**  
**January 29, 2020**

**6. Recommendation:**

Staff recommends the Membership/Nominating Committee forward their recommendation to approve the nomination of Susan Foster to the District Clinic Holdings, Inc. Board.

Approved for Legal sufficiency:

  
\_\_\_\_\_  
Valerie Shahriari  
VP & General Counsel

  
\_\_\_\_\_  
Thomas Cleare

AVP of Planning and Community Engagement



\_\_\_\_\_  
Dr. Belma Andric  
Chief Medical Officer, VP & Executive Director  
of Clinic Services

**Name :** Susan Foster  
**Address :** Hispanic  
**City / State :** White  
**Telephone :** Self Employment  
**Best Time to Call :**  
**Fax :** Personal/Business assistant services — 2011 to present  
**Email Address :** Real Estate Management and Booking Services —  
**Emergency Contact Person :** 2012-2016  
**Emergency Contact Telephone Number :** Market, lease and manage  
**Ethnicity :** Other Employment  
**Race :**  
**Employment :** Teacher — 2002-2005  
Peace Lutheran School - Ft. Lauderdale Florida.  
Title Insurance Agent — 1983-2000  
Vice President of Title Closing Operations

**Other Volunteer Commitments you currently have :** RN Program 1981-1983  
InfiniteSharing.Org  
Approximately 6-10 hours per month

**Past or current community Boards serving :** Board of Directors and Officer- Infinite Sharing.Org —  
2013 to present  
West Palm Beach, Florida. Responsibilities include,  
Data Management, Bookkeeping, Fundraising

**What special contributions would you make as a Board Member? :** Management, system design ideas, organization, patient advocacy, teaching (children & adults), special functions/activities

**Please check any area(s) of Expertise you bring to the Board :** Business / Corporate, Education, Insurance, Medical / Therapeutic

**Languages Spoken :** English

**Are you related to anyone currently employed by the C. L. Brumback Primary Care Clinics and if so, whom? :** No

**Do you work with or have knowledge of these populations? :** Migrant, Seasonal Farm Workers, Homeless

**User of C. L. Brumback Primary Care Clinics? :** No

**For Board Use Only**

**Nominee has had a personal meeting with either the Executive Director, Board President, or Nominating Committee Chair :**

**Date of Meeting :**

**Date Reviewed :**

**Nominee attended Board Meeting and Interviewed by Board :**

**Date Attended :**

**Action taken by Board :**

**Date :**



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