

STRATEGIC PLANNING

April 26, 2023



Health Care District
PALM BEACH COUNTY



DEDICATED TO THE HEALTH OF OUR COMMUNITY

From the Desk of Darcy J. Davis, CEO

April 26, 2023

Board Members, Committee Members and Team Members:

This past year has been very challenging as we focus on the fallout in the labor market. Shortages in physician and nursing staff, as well as other key positions, have been exacerbated by the impact of COVID on the workforce. Many patient-facing providers have chosen to retire or change careers. In order to increase the focus on our most important resource, our employees, we have made a number of efforts to ensure that we are prioritizing our teams. We have created an internal committee to focus on position control and compensation and also implemented new pay practices such as retention bonuses, sign-on bonuses and relocation assistance. Additionally, we have undertaken a fair market value analysis of compensation for hard-to-fill positions and are in the midst of a complete benefits review. We have also made two key changes to the executive team.

This year we created a Chief Nursing Officer position. Key priorities of this executive are development of a clinical pipeline through school affiliations, career ladders, creation of a clinical float pool, shared governance and ensuring that all clinical providers are working at the top of their licenses. Our first-ever CNO, Gina All, has hit the ground running and is having a positive influence across the District. Gina has quickly mobilized, and in addition to building key relationships with other program leaders and community constituents, she will be leading the charge to implement a District-wide centralized scheduling tool. This will ensure that we are continuing to leverage our limited human resources across all programs at the District.

Our second key change within the executive leadership team is the hiring of a seasoned healthcare human resource officer. There are many unique complexities that come with operating healthcare entities, but ensuring that we remain compliant and competitive in the labor market is essential. Geoff Washburn comes with thirty-plus years of specialized healthcare experience. He will focus on District recruitment and retention strategies while ensuring that our compensation and benefits remain competitive in the industry.

Other foundational reinforcements include the creation of a Performance Excellence department that will deploy LEAN strategies across the District to ensure operational efficiencies. We have continuously worked to drive out unnecessary expense in all of our programs, however, as the low-hanging fruit disappears and the opportunities are more discreet, we believe it is necessary to more strategically map processes and throughput to find efficiencies. In addition to this specific departmental support, all District leaders have been challenged to complete Yellow Belt training over the next year for personal development and support in these efforts.

We have completed the second year of EPIC utilization (the electronic health record at Lakeside Medical Center and clinics). The system has become more stable and this year we transitioned support and development of the system to our EPIC Connect host, Memorial Health. As we continue on our journey to update our Information Systems into the current, health care arena, we also had a successful implementation and go-live of Oracle, our Enterprise Resource Management (ERM) system. This is a huge step forward in ensuring that we have meaningful data for reporting and decision-making.

While much of our focus has been reinforcement of our foundational elements, we have also been making essential progress on our strategic priorities. Our ground transportation unit went live this year and Apollo and Atlas are ramping up volumes and providing exceptional care to our patients. After several years of careful evaluation and community communications, Lakeside Medical Center ceased providing obstetrical services. However, the hospital has added an intensivist group to cover the ICU and we are just beginning to tap into the skills that this group will be able to provide to our hospital.

The primary care clinics, which mark 10 years of operation this year, expanded the Mangonia Park footprint by moving into larger space. The volumes and growth of this location reiterate the need to add more resources community-wide to address the mental health crisis. We continue to prioritize this effort and will be focusing on expanded capacity across all of our locations this year. As part of our approach to do so, we expect that construction will be completed and clinic moves will be undertaken in Delray and Lantana into larger, more accommodating space. We are working closely with county leaders to strategize next steps in this important response.

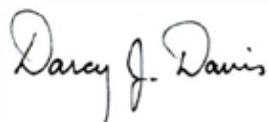
Our school health team has also been impacted by the challenging labor market, so we have invested in our data capabilities to create an acuity dashboard. We have responded to concerns about staffing some schools with CNAs versus RNs by better aligning our student needs with our resources through careful monitoring of school clinical needs. Additionally, this year, we have partnered with the School District to create a Community Partnership Schools model with our mobile units.

In the Trauma Agency, we are seeing rapid growth in total traumas. There appears to be a direct correlation with this and the significant increase in overall county population. Falls remain one of the top causes of trauma in our community, and consequently, we received a \$1 million grant to address fall prevention in our community. Our outreach efforts will be ramping up soon.

Also transformational has been the shift in our Governing Board. In a very short period, we will have turned over five of our seven Board members. While change can often be unsettling, we are excited to welcome fresh perspective and expertise to continue making the Health Care District better and better. We have much to be proud of and continue to positively impact the health of our community.

Thank you for your ongoing trust and support.

Sincerely,



Darcy J. Davis, CEO



Health Care District Strategic Planning Agenda

April 26, 2023 at 9 am

(Continental breakfast at 8:30 am)

Hilton Garden Inn West Palm Beach at the Outlets
1675 Palm Beach Lakes Blvd., West Palm Beach 33401

Welcome and Introductions

Darcy J. Davis, Health Care District CEO

Strategic Planning Introduction

Darcy J. Davis, Candice Abbott and Alicia Ottmann

Fiscal Responsibility Pillar

Financial Big Picture

Darcy J. Davis and Candice Abbott

People Pillar

Human Capital and Strategies

Geoff Washburn and Gina All

----- Break -----

Community Impact Pillar

Behavioral Health Plan

Belma Andrić

Community Health Centers' Strategies

Alicia Ottmann

Aeromedical Update

Darcy J. Davis

Branding Strategy

Belma Andrić

----- Lunch -----

Quality & Patient Safety Pillar

Innovative School Health Staffing Approach

Gina All

Trauma Agency Outlook

Andrea Steele

Closed Session

Quality & Patient Safety Pillar

Hospital Strategic Plan

Darcy J. Davis and Karen Harris

**Health Care District Board Meeting
to Immediately Follow**

Health Care District Board of Commissioners



Carlos Vidueira
Chair



Sean O'Bannon
Vice Chair



Tammy Jackson-Moore
Secretary



Tracy Caruso



Patrick Rooney, Jr.



Jyothi Gunta, MD, MPH
Director, FL Dept of Health
Palm Beach County



Vacant

Health Care District of Palm Beach County Board Member Bios



Carlos Vidueira, Chair, was appointed to the Health Care District of Palm Beach County Board by Florida Governor Ron DeSantis in December 2022. He is the Vice President of Huizenga Holdings, Inc., the family investment company founded by South Florida entrepreneur H. Wayne Huizenga where he was instrumental in the design, construction and operation of the Rybovich Superyacht Marina. He is also the President of the Superyacht Life Foundation and the Chairman of the board of directors of Northend RISE, the community-based organization committed to revitalizing the historic neighborhoods in the north end of West Palm Beach. He has a Bachelor of Science in Business Administration from the University of Southern California and a Master in Business Administration from the University of California,

Los Angeles.



Sean O'Bannon, Vice Chair, was initially appointed to the Health Care District of Palm Beach County Board by the Palm Beach County Board of County Commissioners in December 2016 and reappointed in November 2020. O'Bannon was a former division chief of operations for Palm Beach County Fire Rescue before retiring in 2012 after 35 years of service. His tenure with Palm Beach County Fire Rescue included a three-year stint as a chief flight medic for the Health Care District's Trauma Hawk helicopters. O'Bannon completed the fire science and paramedic programs at Palm Beach Community College and emergency medical services and advanced emergency medical services programs at the National Fire Academy in Emmitsburg, Maryland. He attended Harvard University's John F.

Kennedy School of Government Crisis Management.



Tammy Jackson-Moore, Secretary, was appointed to the Health Care District of Palm Beach County Board by the Palm Beach County Board of County Commissioners in October 2019 to represent the Glades' communities. She has both governmental and non-profit experience, having worked as a former public information officer and outreach specialist for the South Florida Water Management District as well as a deputy city manager in municipal government. Jackson-Moore is the co-founder of Guardians of the Glades, an advocacy organization that works on behalf of the Glades communities. She has garnered distinguished recognition including being named "Who's Who in Black South Florida" as well as serving as Chairperson of the Palm Beach County Commission on

Women. She also serves as the Secretary of the Lake Okeechobee Regional Economic (LORE) Alliance of Palm Beach County and the Palm Tran Service Board. Jackson-Moore holds a Bachelor of Science from Barry University in Miami, Florida.



Tracy Caruso was appointed to the Health Care District of Palm Beach County Board by Florida Governor Ron DeSantis in December 2022. She is the President and Owner of Delray Beach Executive Suites, an executive office suite business on Atlantic Avenue in Delray Beach, Florida. She is also Editor At Large for Florida Jolt. Caruso, a former mayoral candidate for Delray Beach, is currently Vice Chair of the Palm Beach County Housing and Finance Authority. She is a certified rape crisis counselor, a trained literacy advocate who has worked with adults to teach them how to read and write, and a mentor for high school girls to help them discover their career goals and guide them through the college admissions process. Caruso has a Bachelor of Arts in Psychology from New York University.

Health Care District of Palm Beach County Board Member Bios



Patrick Rooney, Jr. was appointed to the Health Care District of Palm Beach County Board by Florida Governor Ron DeSantis in December 2022. Rooney is currently the President of the Palm Beach County Kennel Club. He was previously a Representative in the Florida House (District 85) from 2010 to 2016. He serves as Director for the Autism Project of Palm Beach County and Director and co-chair for Rooney's Golf Foundation, Inc., raising money for local charities through various events. He is a founding board member and current board president for Potential Academy in Greenacres and a board member for The Children's Healthcare Charity, Inc. (The Honda Classic). Rooney served as a member of the South Florida Water Management District Board from 2007 to 2010. He has a Bachelor of Arts in Political

Science from Clemson University, a Juris Doctor from Villanova University School of Law and a Master of Business Administration (MBA) from Lehigh University.



Jyothi Gunta, MD, MPH, is a member of the Health Care District of Palm Beach County Board following her recent appointment as Director of the Florida Department of Health-Palm Beach County, replacing Alina Alonso, MD upon her retirement. Dr. Gunta is a board-certified physician in Preventive Medicine/Public Health and board certified in Occupational/Environmental Medicine with training and experience in family medicine, evidence based preventive care, occupational medicine, epidemiology, research, education and policy. She earned her Master's in Public Health from Nova Southeastern University. She is also a certified Medical Review Officer (MRO) and a certified Department of Transportation (DOT) medical examiner. She has several years of experience as a medical director in family practice, preventive health services, obesity medicine,

urgent care and occupational and environmental health. She has demonstrated leadership within multiple healthcare systems and outpatient practices including the Veterans Health Administration, and Centers for Disease Control and Prevention. She played an integral part in one of the most intensive projects of COVID-19 vaccine safety monitoring in U.S. history and contributed to the description of health and functional outcomes following vaccination. This data was published in the Lancet Child and Adolescent Health Journal. She received her Medical Doctor (MD) from Saint Petersburg State Medical Academy (I.I. Mechnikov) in St. Petersburg, Russia. She completed her internship in pediatrics residency at Tripler Army Medical Center in Honolulu, Hawaii before entering Preventive Medicine/Public Health residency program at the Florida Department of Health in Palm Beach County where she also served as the chief resident. She is fluent in three languages besides English. Her professional interests include obesity medicine, occupational medicine, health equity, education and policy. Outside of medicine, she enjoys tennis, international travel, learning new languages, and spending quality time with family and friends.

Health Care District of Palm Beach County Executive and Senior Leadership Teams

Health Care District Executive Team



Darcy J. Davis is the **Chief Executive Officer** of the Health Care District of Palm Beach County and its subsidiary operations. Davis joined the Health Care District in July 2011 and has served in several roles of increasing responsibility, including Chief Financial Officer/Chief Operating Officer, before her promotion to the top executive role in February 2016. Prior to joining the District, Davis served in executive level positions including senior vice president and chief financial officer across an array of health care entities from rural medical centers to a complex academic medical center over her 30 years in the health care industry. Davis serves on America's Essential Hospitals' Strategic Planning Committee, and the United Way of Palm Beach County's Hunger Relief Advisory Council. She is a member of the Board of Directors for the American Heart Association of Palm Beach County. In 2022, Davis was ranked 11th on the list of Florida's Top 100 Women-Led Businesses by The Commonwealth Institute of Florida and was a finalist for the Palm Beach North Chamber of Commerce's "Woman of the Year Award". Annually for the past seven years, the South Florida Business Journal has recognized Davis as a Power Leader in Healthcare. Davis earned her BBA in Accounting from Mercer University and her MSM in Healthcare Administration from Troy State University.



Candice Abbott is the **Vice President and Chief Financial Officer** for the Health Care District of Palm Beach County. In this role, she is responsible for the development and implementation of the financial strategies, operating and capital budgets, and system financial reporting and controls that support the District's overall mission, goals and objectives. She also oversees revenue cycle, payor and network management and performance excellence. She was integral in the implementation of Oracle, moving the District to an efficient, cloud-based system for budgeting, purchasing and vendor management. Abbott has more than 23 years of health care finance experience partnering with hospital, physician and community leaders. Abbott's prior leadership experience includes serving as the Regional Executive Director for Cleveland Clinic Florida Integrated Health Network and Assistant Vice President of Finance for Martin Health System. Abbott has a Master of Business Administration in Healthcare Management. She is certified in several Epic revenue cycle applications and is a registered health information technician (RHIT). She is the treasurer for Helping People Succeed, a member of Florida Atlantic University's Finance and Legislative committee, and a former board member and Director of Education for the Florida Chapter of Healthcare Financial Management Association (HFMA).



Geoffrey (Geoff) Washburn is the **Vice President and Chief Human Resources Officer** for the Health Care District of Palm Beach County. Washburn drives the District's efforts to deliver world-class HR function with a strong service orientation for staff. A career human resources professional, Washburn has more than 30 years of multi-faceted human resources experience in health care, including more than 20 years in senior leadership. Washburn most recently served as Chief Human Resources Officer for Palomar Health, California's largest public healthcare district by area, employing more than 5,000 professionals. Prior to Palomar, Washburn was Vice President, Human Resources at Los Robles Hospital and Medical Center and also held executive-level human resources roles at several hospital and health care systems in Florida and Michigan. Washburn holds a Bachelor of Arts in Human Resources Management from Spring Arbor University and a Senior Professional Human Resources (SPHR) Certification from the Society for Human Resource Management (SHRM).

Health Care District of Palm Beach County Executive and Senior Leadership Teams



Belma Andrić, MD, MPH is the **Vice President and Chief Medical Officer** for the Health Care District of Palm Beach County where she is responsible for quality and patient safety across the system. Dr. Andrić is also responsible for the overall medical, administrative and regulatory leadership of the C. L. Brumback Primary Care Clinics and Pharmacies, the District's Federally Qualified Health Centers. Under her leadership, the clinics have been honored by the Health Resources and Services Administration (HRSA) the last four years as a gold-level Health Center Quality Leader, ranking among the top 10% of health centers nationally for clinical quality. Dr. Andrić also oversees operations of the District's Trauma Agency and Aeromedical Program. She serves as Chair of the Trauma Quality Improvement Committee for Palm Beach County and is a member of the county's Sober Home Task Force and EMS Council. She was instrumental in the successful rollout of the county's first-of-its-kind Addiction Stabilization Unit, a specialized emergency facility designed to curb the opioid epidemic. She also oversaw the implementation and expansion of a successful Medication Assisted Treatment (MAT) Program for patients with substance use disorders that is now a model for the state of Florida. Previously, Dr. Andrić served as the Medical Director of the Lantana Health Center for the Palm Beach County Health Department. She holds a Doctor of Medicine degree from College of Medicine, University of Novi Sad in Serbia. She received her residency training in Preventive Medicine/Public Health from the Palm Beach County Health Department as well as residency training in surgery from Mount Sinai Medical Center in Miami Beach. Dr. Andrić is board certified in preventive medicine and earned a Master of Public Health from Florida International University.



Gina All, RN, MSN is the **Vice President and Chief Nursing Officer** for the Health Care District of Palm Beach County where she provides direct oversight of the School Health program that staffs more than 160 registered nurses and certified nursing assistants (CNAs) in the county's public schools. A registered nurse for more than 20 years, All has worked at the executive level for a decade in chief nursing and operations roles. Previously, she served as CNO and Interim Chief Operating Officer for ShorePoint Health, a 312-bed acute care hospital in Venice, Florida where she spearheaded the hospital's care and processes related to COVID-19, performed favorably to budget for 2020 despite the pandemic, implemented a full electronic medical record conversion and reduced staffing turnover. All earned her Master of Science in Nursing from Liberty University in Virginia and her Bachelor of Science in Nursing from University of North Carolina at Charlotte. She is a member of the American Organization for Nursing Leadership and a certified Lean Six Sigma Black Belt.



Bernabe A. Icaza, Esq serves as **General Counsel** for the Health Care District of Palm Beach County. He specializes in health law with more than 20 years of experience. Before joining the Health Care District, he was in private practice where he represented health systems, hospitals, academic medical centers and physician group practices in mergers, acquisitions, divestitures, joint ventures and complex business transactions. Prior to that, Icaza worked for UF Health Shands, Tenet Healthcare Corporation and Broward Health. Icaza is board certified in health law by The Florida Bar and is a former chair of The Florida Bar Health Law Certification Committee and a past chair of The Florida Bar Health Law Section. He graduated from Saint Louis University School of Law with a health law concentration where he also earned a Bachelor of Arts in Economics, Political Science and Spanish and a Master of Arts in Economics.



Karen Harris is the **Vice President of Field Operations** for the Health Care District of Palm Beach County where she oversees the District's 120-bed skilled nursing facility, the Edward J. Healey Rehabilitation and Nursing Center, its rural, acute-care teaching hospital, Lakeside Medical Center, and its ground transportation program, LifeTrans. Harris joined the Health Care District in June of 2015 as Administrator of the Healey Center. Harris has guided the Healey Center to achieve deficiency-free surveys from the Florida Agency for Health Care Administration (AHCA). During her tenure, the Healey Center has been recognized as a U.S. News & World Report "Best Nursing Home" for four consecutive years. Under her leadership in 2022, Lakeside Medical Center was ranked number one in the nation

as the most racially inclusive hospital by the Lown Institute, a non-partisan think tank that advocates for a just health care system. Harris also played an integral role in all aspects of the 2022 launch of LifeTrans, the District's interfacility ambulance program that is dedicated to reducing wait times and expanding access to medical care in Palm Beach County. Harris has more than 20 years of health care experience. Prior to joining the Health Care District, she served as Regional Director of Operations for HCR ManorCare, where she directed and monitored operations for seven skilled nursing facilities. Harris received a Bachelor of Science in Health Services Administration from Lynn University.



Heather Noughton Bokor is the **Vice President and Chief Compliance, Privacy, and Risk Officer** for the Health Care District of Palm Beach County. Bokor is responsible for the planning, oversight and coordination of activities to drive ethics and effective compliance with regulatory requirements and policies, as well as identifying, addressing, and mitigating all types of risk to the enterprise. She has 18 years of experience specializing in hospitals and health systems. Previously, Bokor served as the interim Vice President of Compliance and Privacy and Chief Compliance and Privacy Officer for the University of Florida Health System. At UF Health, she managed ethics and compliance programs across all entities and affiliates including hospitals, physician practices and UF's six health colleges. The South Florida native also served on the executive teams of Tenet Healthcare's Good Samaritan Medical Center and West Boca Medical Center as the hospitals' Compliance and Privacy Officer. Bokor graduated from the University of Florida with a Master of Science in Management with a concentration in Health Care Risk Management and a Bachelor of Science in Health Science. She is also certified in health care compliance by the Compliance Certification Board.



Daniel Scott is the **Vice President, Chief Information Officer** for the Health Care District of Palm Beach County where he oversees the Health Care District's IT, facilities and security departments. Scott has more than 30 years of information technology (IT) experience with half of that dedicated to IT health care. He most recently served as Chief Information Officer for Good Samaritan Hospital where he oversaw the Epic Community Connect program, implemented service management and IT security and provided overall leadership to multiple information system teams. Previously, Scott held several IT leadership roles at

Ascension Health. He holds a Bachelor of Science in Organizational Management and a Master of Science in Management, both from Oakland City University. He is currently completing a Doctorate of Education in Leadership and Learning with a specialization in Health Care Administration and Leadership.

Health Care District of Palm Beach County Executive and Senior Leadership Teams

Senior Leadership Team



Alicia Ottmann is the **Associate Vice President and Executive Director of Federally Qualified Health Center and Pharmacy Services** for the Health Care District of Palm Beach County. Ottmann has a decade of community health care experience as a practicing physician assistant as well as a leader of clinical operations and integrated care models. She most recently served as Director of Operations for Neighborhood Outreach Access to Health (NOAH) in Scottsdale, Arizona. There she oversaw eight community health centers and a virtual care team, with more than 170 total team members. Ottmann originally joined NOAH as a certified physician assistant in family medicine, treating patients at the community health centers. She

then transitioned to the role of Director of Advanced Practice, supporting the clinician workforce and clinical programs. Previously, she served as Director of Practice Transformation at Innovation Care Partners, providing transformational leadership in the development, implementation and oversight of their system's core population health management programs and practices. Ottmann holds a Bachelor of Science in Biology from The College of William and Mary and a Master of Medical Science in Physician Assistant Studies from Midwestern University.



Andrea Steele is the **Associate Vice President, Corporate Quality** for the Health Care District of Palm Beach County. In this role, she provides leadership, operational oversight of the Trauma System and implementation of quality assurance, patient safety, credentialing and performance improvement strategies. Steele has more than 15 years of diversified experience in program and research management. She most recently served as Director of Corporate Quality at the Health Care District before her promotion. Previously, Steele was a clinical research consultant for ExecuPharm in Cambridge, Massachusetts where she was responsible for ensuring accurate drug accountability and execution and adherence to protocols for the company. Steele

holds a Bachelor of Science in Psychology from Portland State University and a Master of Business Administration in Health Care Administration from the University of Portland in Portland, Oregon. She holds an ASQ Six Sigma Yellow Belt certification.



Roger Chen is the **Associate Vice President of Performance Excellence and Enterprise Resource Planning (ERP) Project Manager** for the Health Care District of Palm Beach County. Chen leads continuous process improvement and change management for the organization's finance and supply chains to enhance overall quality and efficiency. Chen has more than 25 years of corporate and health care Six Sigma and Lean leadership experience developing organizational systems and high-performing teams. Chen most recently presided over his own Lean training consultancy firm. Previously, he served as the Executive Director of Transformation

at a private cardiology group in Florida and at a statewide health system in the Midwest. Before that, Chen served as Vice President of Organization Transformation at Lee Memorial Health Systems and was the Corporate Director of Performance Excellence at Martin Memorial Health Systems. Chen graduated with a Bachelor of Science in Electronics from DeVry Institute of Technology and earned his International Master of Business Administration from Nova Southeastern University. He is board certified as a Fellow of the American College of Healthcare Executives.

Health Care District of Palm Beach County Executive and Senior Leadership Teams



Janet D. Moreland, ARNP, MSN, LHRM is the **Associate Vice President and Administrator for Lakeside Medical Center** where she oversees the daily operations of the Health Care District of Palm Beach County's 70-bed, acute-care teaching hospital in Belle Glade. She has more than 35 years of experience in hospital, home health, skilled nursing, community and public health primary care environments and has served as clinical faculty. Moreland has been with the District for almost 10 years and has held roles at Lakeside including Director of Quality and Patient Safety, Director of Nursing and Hospital Administrator before her promotion to AVP in September 2020. Before joining Lakeside Medical Center in August 2013, Moreland served with the Florida Department of Health for Palm Beach County for more than 25 years in a variety of roles and was most recently the Health Center Administrator for the C. L. Brumback Health Center in Belle Glade where she oversaw daily operations. Moreland received her Master of Science in Nursing Education and Master of Science in Nursing at Florida Atlantic University in Boca Raton, Florida and is licensed as a Health Care Risk Manager.



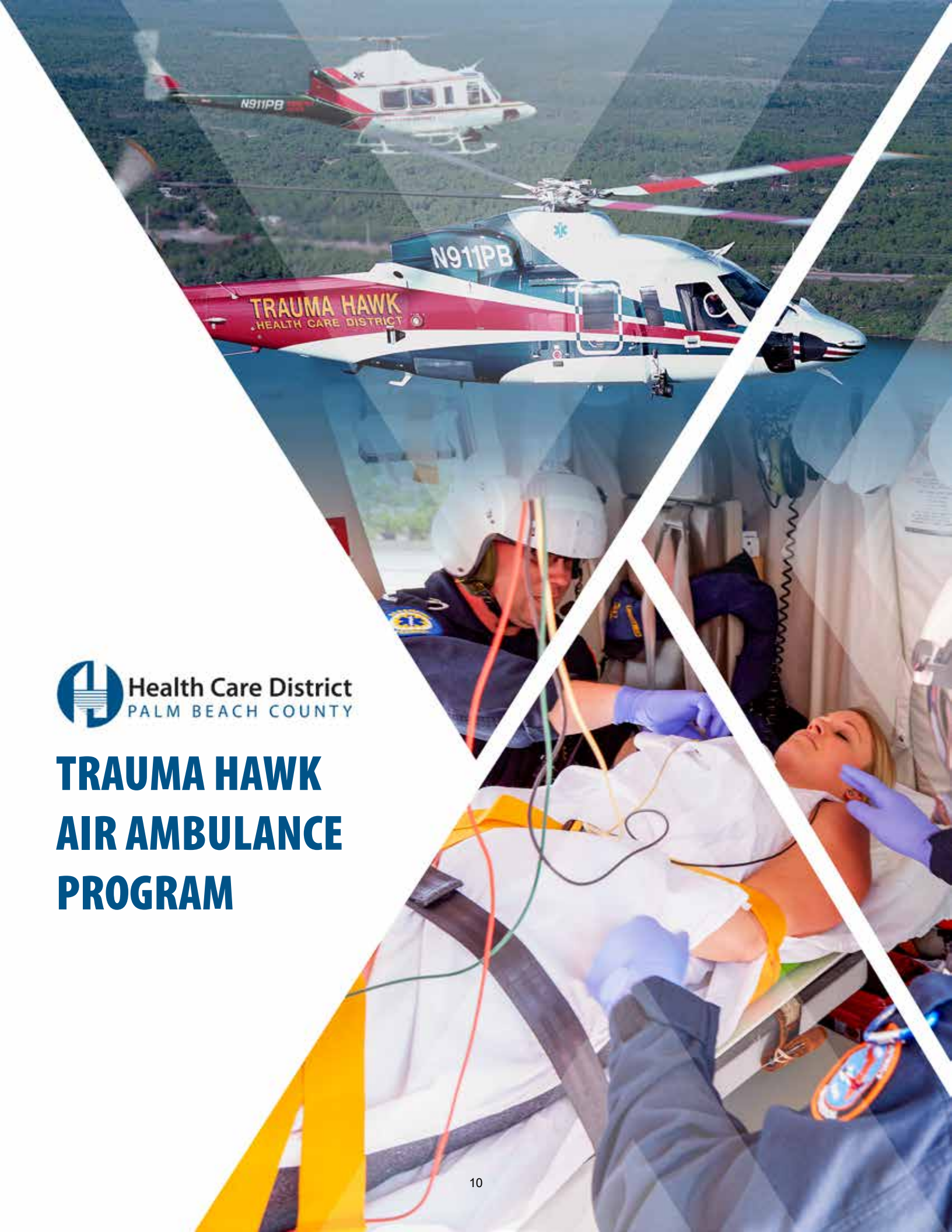
Shelly Ann Lau is the **Associate Vice President of the Edward J. Healey Rehabilitation and Nursing Center**, overseeing the 120-bed facility providing top-quality short-term and long-term rehabilitation and 24/7 skilled nursing care for eligible adult county residents. Prior to her promotion to Associate Vice President in September 2020, Lau had served as the Healey Center's Executive Director since joining the Health Care District of Palm Beach County in 2017. Previously, she held health care administrator roles at other local skilled nursing and rehabilitation centers. Lau has more than 16 years of experience in financial management, operations and employee and customer service for rehabilitation facilities. She received her Bachelor of Arts in Health Administration from Florida Atlantic University in Fort Lauderdale, Florida. She has professional memberships with the Licensed Nursing Home Administrator & Preceptor and Florida Healthcare Association (FHCA).



Jessica Cafarelli is the **Associate Vice President, Controller** of the Health Care District of Palm Beach County where she leads accounting, finance, treasury, payroll and supply chain teams. Cafarelli has more than 15 years of experience in accounting and finance serving nonprofit health care, real estate and private equity organizations. Before joining the District, Cafarelli worked as a finance manager for Cleveland Clinic Martin Health in Stuart, Florida. She focused on streamlining processes and developing improvements, which improved efficiency and reduced risk while creating structured, standard work plans. Cafarelli earned a Master of Accounting and a Bachelor of Science in Accounting from the University of Florida. She is also a Certified Public Accountant in the State of Florida. She is a member of the Florida Institute of Certified Public Accountants (FICPA) and the Healthcare Financial Management Association (HFMA). She received the Certified Healthcare Financial Professional (CHFP) designation from HFMA.

PROGRAM OVERVIEWS





TRAUMA HAWK AIR AMBULANCE PROGRAM

TRAUMA HAWK AIR AMBULANCE PROGRAM

The Health Care District of Palm Beach County's FAA-certified aeromedical program is a critical component of the county's emergency medical services (EMS) system. Our 24/7 program, which is commonly known as Trauma Hawk, provides rapid air transportation to critically ill or injured patients. The District operates this program with two aircraft, each staffed by District pilots trained in the highest industry standards as Airline Transport Pilots (ATP). Our pilots are also trained in flying with night vision goggles (NVG).

The District owns the hangar on the grounds of the Palm Beach International Airport and maintains the aircraft with a team of airframe and power plant (APP) certified mechanics and avionics technicians.

Medical services on the helicopters are provided by Palm Beach County Fire Rescue paramedics and flight nurses. Through a contractual agreement, the District pays for these medical services. The helicopters are highly-specialized and medically retrofitted for these lifesaving missions. The medical flight team members are specially trained to manage patients with complex medical conditions and injuries, primarily trauma, cardiac arrest, and stroke.

Due to the large size of Palm Beach County (2,300 square miles), Trauma Hawk air transport is essential for the rapid transfer of critically-injured patients to the county's Level I Trauma Centers and other highly-specialized area hospitals.

The District's aeromedical program is one of the original programs that was included in the referendum that voters approved in the creation of the Health Care District in 1988. On May 1, 1991, the District's Trauma Hawk carried out its first lifesaving mission. Originally, the program began with one Bell helicopter operating under the Public Aircraft rules and in 1994 received certification as an Air Carrier in accordance with the Federal Aviation Regulations (FAR) Part 135, which enhanced oversight and safety and enabled the District to bill for services. In 1999, the District purchased two Sikorsky S76C+ helicopters that are still in service today.

Since inception of this program, the District's partnership with Palm Beach County Fire Rescue has been instrumental in attaining the highest quality outcomes for traumatically injured and critically ill patients. The ongoing Aeromedical Quality Improvement Committee, formed in 2018 and chaired by the Health Care District's aeromedical leadership and Palm Beach County Fire Rescue's Medical Director, has resulted in numerous program improvements, including shorter flight stand-by times, more defined activation response, whole blood transfusion during air and ground transports, etc. Due to the current dedication of both the Health Care District and Palm Beach County Fire Rescue agencies to achieve the highest standards of aeromedical care, we can confidently say nowadays our helicopters not only transport patients to hospitals, but also bring the hospital to the patients.





C. L. BRUMBACK PRIMARY CARE CLINICS

C. L. BRUMBACK PRIMARY CARE CLINICS

The C. L. Brumback Primary Care Clinics are Federally Qualified Health Centers (FQHCs) that provide outpatient care at ten different locations across Palm Beach County. These community health centers provide comprehensive health care for all ages in a one-stop-shop manner and are often referred to as “the front door of the Health Care District of Palm Beach County.”

The Health Care District received its Health Resources and Services Administration (HRSA) Federally Qualified Health Center (FQHC) designation on December 31, 2012. The C. L. Brumback Primary Care Clinics began operating in June of 2013 at four locations. Since then, the District has expanded access to care through 10 sites and three mobile clinics.

In 2022, our FQHCs cared for more than 37,000 unique adult and pediatric primary care patients. This year marks the tenth anniversary of the FQHC’s providing a full spectrum of services to patients of all ages, including the homeless and migrant workers, regardless of their ability to pay, with or without insurance. The District’s FQHC’s are certified as a Patient Centered Medical Home by the National Committee for Quality Assurance (NCQA). The PCMH model is committed to providing safe, high-quality care through clinical decision-support tools, evidence-based care, shared decision-making, performance measurement, and population health management.

SERVICES PROVIDED – Adult and pediatric medical services including routine check-ups, age-appropriate screenings, mental health screenings, treatment for acute illnesses, management of chronic diseases, psychiatric services, mental health counseling and therapy, immunizations, referrals to specialty care, laboratory and diagnostic services and care coordination. Women’s health services include gynecology, pregnancy and post-pregnancy care, newborn care, and referrals for mammograms. Also offered: adult and pediatric dental services, pharmacy services, outpatient substance use disorder treatment, financial counseling, assistance with housing and transportation, health coverage enrollment, legal aid and other community resources.

The District’s integrated care model offers multiple services during the same visit, such as pairing primary care with mental health care, pediatrician and pediatric dentist, etc. Care is provided in a culturally-competent manner and language translation is offered in over 100 languages.

Although adult medical services are offered at all 10 locations, some other specialized services are available at designated sites. Dental care is offered at four locations, pediatric care is offered at three locations, one of the clinics specializes in mental health and addiction treatment, and pharmacies are located at five sites.



C. L. BRUMBACK PRIMARY CARE CLINICS

The FQHC's three custom-designed mobile clinics drive accessible high-quality health care to underserved Palm Beach County residents by removing cost and transportation barriers to primary health care. The mobile clinics allow the Health Care District to reach a larger population, including the homeless and agricultural workers, by meeting them where they are. The state-of-the-art mobile clinics are equipped like primary care offices, each with two examination rooms, an ADA-compliant wheelchair-accessible bathroom, hydraulic wheelchair lift, and a large exterior awning to provide shade.



ADDICTION TREATMENT

One of the community health centers specializes in treating substance use disorder and mental health. The health center is conveniently located in Mangonia Park on the campus of HCA JFK North Hospital, which operates Palm Beach County's innovative, public-private Addiction Stabilization Unit (ASU). The ASU is an addiction-specialized ER where medical professionals are ready 24/7 to provide acute comprehensive care for addiction. On average, 50% of patients discharged from the ASU are introduced by our recovery coaches to our nearby, evidence-based outpatient program in what we call a "warm handoff". Our care team provides financial counseling, assists with health coverage enrollment and connects them to community resources such as housing, food, transportation, legal services and more.

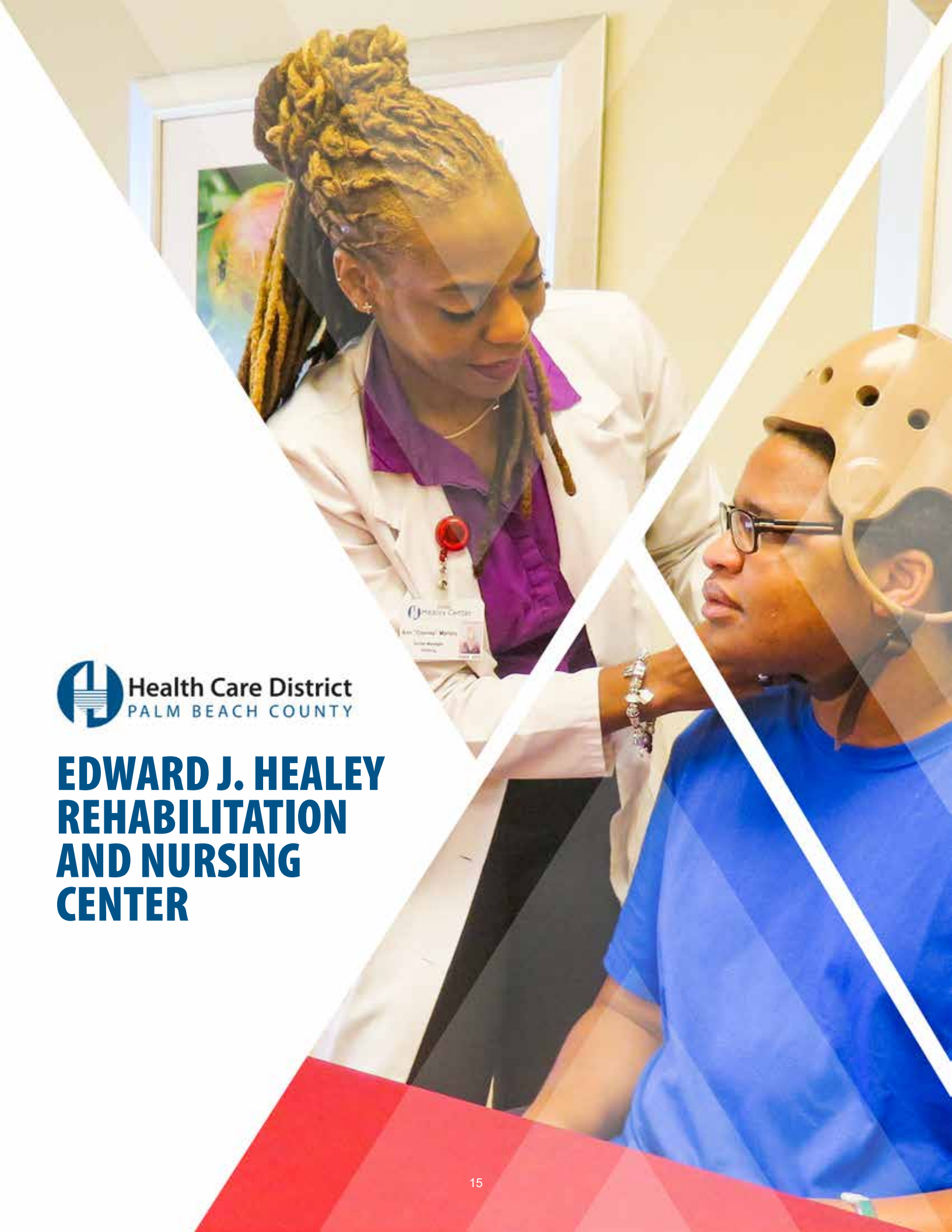
RECOGNITION

In 2022, the Health Care District's community health centers received state-wide recognition for its evidence-based model of addiction treatment with the Governor's commitment of state funds to replicate the District's program in 12 other counties. That same year, the health centers were awarded Gold status from HRSA as a Health Center Quality Leader for the 4th year in a row, which recognizes the top 10% of quality performers across the country. HRSA also recognized the District's health centers with "Access Enhancer", "Health Disparities Reducer", and "Advancing Health Information Technology for Quality" awards as well as the "Patient-Centered Medical Home" award. The same year, the District's community health centers received the American Heart Association's Check. Change. Control. Cholesterol™ Gold level award, the American Heart Association and the American Medical Association's Target: BP™ Gold level award and the American Heart Association and American Diabetes Association's Target: Type 2 Diabetes™ participation award in recognition of the District's commitment to reducing the risk of heart disease and stroke.



DISTRICT CARES SPECIALTY CARE VOUCHER PROGRAM

If one of our FQHC providers needs to refer a patient to see a specialist, the patient may be eligible for the District's specialty care voucher program, District Cares. Patients may be eligible if they reside in Palm Beach County and their income falls below 135 percent of the poverty level. Patients who qualify for this program receive medical benefits at no cost for specialty coverage, hospitalization and emergency care. The care is delivered through the District Cares' network of credentialed health care providers. Patients who qualify for Medicaid, Medicare or any other entitlement program are not eligible for District Cares. The program serves as the payer of last resort.



Health Care District
PALM BEACH COUNTY

EDWARD J. HEALEY REHABILITATION AND NURSING CENTER

EDWARD J. HEALEY REHABILITATION AND NURSING CENTER

Since 1995, the Health Care District has operated and funded the county's only public rehabilitation and skilled nursing center. The Edward J. Healey Rehabilitation and Nursing Center, known as the Healey Center, serves residents who are 21 years and older who would otherwise have nowhere to go for residential treatment and rehabilitation. Eligibility for admission to the Healey Center is based on medical criteria. The Healey Center currently has a mix of residents with and without health insurance.

In 1994, the Board of County Commissioners approached the District to assume the management of the County Home since the District had more health-related expertise to cost-effectively operate the program. As a result, the District assumed operations of the County Home (later renamed the Edward J. Healey Rehabilitation and Nursing Center) in 1995 under the terms of a 40-year interlocal agreement with Palm Beach County.

OVERVIEW

The Healey Center is a modern, 120-bed facility in Riviera Beach that was newly-built when it opened in April 2013. The center replaced the former facility in West Palm Beach that had served the community since 1917. The Healey Center is an important part of the county's health care safety net as it provides access to long-term care, short-term care and skilled nursing for trauma patients and other Palm Beach County residents who are 21 years of age and older and are not served in other skilled nursing facilities.

A majority of the Health Center residents are under the age of 63. Many are patients who are recovering from debilitating illnesses, strokes, or traumatic injuries. The Healey Center also cares for residents with dementia and complex medical issues. The dedicated staff is committed to helping residents reach and maintain their optimum level of functional and social ability. Residents receive rehabilitative, social and quality-of-life activities, including entertainment within the facility and trips to events, restaurants, and other activities in the community. The Healey Center accepts private pay, Medicare, and Medicaid.



RECOGNITION

The Healey Center was recognized as a Best Nursing Home for Long-Term Care (2022-2023) for the fourth year in a row by U.S. News & World Report, earning an overall rating of five out of five.





Lakeside
Medical Center



Health Care District
PALM BEACH COUNTY

LAKESIDE MEDICAL CENTER

Lakeside Medical Center

The Health Care District operates and funds Lakeside Medical Center, the only public hospital in Palm Beach County. This teaching hospital opened in October 2009 as a replacement facility for Glades General Hospital, which was built in the 1940s. Lakeside Medical Center is the only acute-care hospital serving the large agricultural region of western Palm Beach County along the shore of Lake Okeechobee. In addition, Lakeside Medical Center operates one of the few Family Medicine Residency Programs in the U.S. that has a focus on practice in rural environments.

In 2003, Province Healthcare Company informed the Health Care District that they could no longer operate Glades General Hospital without a significant subsidy from the District. Recognizing that Section 6 of the Palm Beach County Health Care Act requires the District maintain "...a continued presence of at least one hospital in the Glades area" and to ensure that appropriate and quality health care services are available for the residents of the Glades, the District Board directed staff to move forward with the acquisition of the hospital.

This 70-bed, acute care facility is centrally located in Belle Glade to serve the agricultural communities around the southern shores of Lake Okeechobee. The Joint Commission-accredited hospital, which features all private rooms, provided care during 25,400 patient encounters last year.

Lakeside Medical Center provides inpatient and outpatient services and has a busy emergency room. Additionally, Lakeside started a family residency program in July 2011 to train 15 resident physicians. The hospital serves as the main clinical training site and partners with academic and community organizations, including Nova Southeastern University and the Florida Department of Health for Palm Beach County. In 2020, the residency program was accredited by the Accreditation Council for Graduate Medical Education (ACGME), a distinction that assures the program meets the quality standards of the specialty or subspecialty practices for which it prepares its graduates. This summer will mark the eleventh class of residents to graduate from the program.

In 2022, the Health Care District launched its new ground ambulance program, LifeTrans, that provides Health Care District patients with 24/7 emergency advanced life support (ALS) and basic life support (BLS) transport services, as well as secondary ALS transport services. One of the District's two ambulances is based at Lakeside Medical Center to support the safe and rapid transport of hospital patients needing a higher level of care.

RECOGNITION

Lakeside Medical Center was named the most racially inclusive hospital in the nation according to the 2022 Lown Institute Hospitals Index for Social Responsibility, a non-partisan think tank that advocates for a just healthcare system. Of the more than 2,800 hospitals assessed using the Lown Institute Hospitals Index for Social Responsibility, Lakeside Medical Center placed number one in the county for its equitable care in serving the agricultural communities in rural, western Palm Beach County. In 2023, the hospital's surgical department was nationally recognized by the Association of periOperative Registered Nurses (AORN) and designated as a Center of Excellence in Surgical Safety for Prevention of retained surgical items.





Health Care District
PALM BEACH COUNTY

SCHOOL HEALTH

SCHOOL HEALTH

The District's registered nurses and certified nursing assistants staff school health rooms in 167 public schools, caring for more than 160,000 students in pre-kindergarten through 12th grade. Today the District staffs a School Health team of more than 200 registered nurses and CNAs who provide nursing assessments, first aid, medication administration, chronic health condition management, Florida-mandated screenings (vision, hearing, BMI and scoliosis), no-cost COVID-19 screening and testing and influenza A/B (flu) testing with parent or guardian consent, referrals, and consultations with parents and providers.

For over 25 years, the Health Care District has been committed to promoting and improving the health and wellness for public school students through a School Health Program that achieves learning readiness, prevents and addresses physical, social and emotional health problems, and enhances the students' quality of life. The School Health Program is a partnership with the Florida Department of Health Palm Beach County and the School District of Palm Beach County.

School Health services are provided in accordance with a local School Health Services Plan (per s. 381.0056, F.S.) and administered via an interlocal agreement between the School District of Palm Beach County and the Health Care District. Section 6(30) of the Health Care Act authorizes the District to "plan, coordinate, manage, and take such other action as appropriate to implement the school health program as established by the District..."

RECOGNITION

In 2022, the School District of Palm Beach County's Wellness Committee recognized the Health Care District for the crucial role the School Nurses played in the coordinated COVID-19 response in Palm Beach County that helped ensure a safe school environment, avoid school closures during the pandemic and provide ongoing student COVID-19 and flu screenings and testing with parental/guardian consent.





 Health Care District
PALM BEACH COUNTY

TRAUMA AGENCY

TRAUMA AGENCY

For over 30 years, the Trauma Agency has functioned as a department of the Health Care District that provides leadership and administrative support to ensure the Palm Beach County trauma system's operational components function as a cohesive unit. The Trauma Agency also administers a system-wide quality management program to supplement the individual trauma center peer review process. This quality assurance and improvement process includes collecting registry data to review quality of care from the point of injury to final outcome, as well as monitoring local EMS providers, trauma centers, and acute care hospitals for compliance with state trauma statutes and the local trauma ordinance. Specifically, the Palm Beach County Trauma Agency administers and evaluates the compliance and quality of the following trauma system components: pre-hospital providers, Level I Trauma Centers (St. Mary's Medical Center and Delray Medical Center), pediatric trauma referral centers, rehabilitation centers, non-trauma center hospitals, and the trauma review process.



The Palm Beach County Trauma Ordinance (Chapter 13 Article V) authorizes the Trauma Agency to coordinate trauma care and provide regulatory authority when necessary. The Trauma Agency is also responsible for updating the Florida Department of Health Five-Year Plan (per s. 64J-2.007-009, F.S.).

At the local level, pertinent prehospital and inpatient trauma victim information is captured in the trauma registry maintained at each trauma center and the District via TraumaOne, a trauma registry software owned by the Health Care District. For each trauma admission, initial demographic data is entered into TraumaOne within three days, with registry information and required metrics updated throughout the admission until discharge. Within 30 days of each final patient disposition, TraumaOne registry information is expected to be completed at the trauma center level. This data then undergoes agency-level evaluation to identify prehospital clinical care issues for targeted intervention and education, such as under-triage and transport delays.

The Trauma Quality Improvement Committee (TQIC) convenes for the purpose of addressing hospital and pre-hospital provider quality-of-care issues concerning trauma, including the overall performance and coordination of the trauma care system. This committee supplements the individual Trauma Centers' performance improvement process to ensure the operational components of the Trauma System function as a cohesive unit. Both Trauma Centers and our community partners including EMS chiefs, the Medical Examiner's office, specialty physicians and others are active participants on this committee.

Today, the Health Care District's Trauma Agency is in the final steps of the application process for a Falls Prevention grant for which U.S. Congresswoman Lois Frankel recommended the District apply. A grant award in the amount of \$1.65M is expected in mid-June 2023. This funding will be used to provide ongoing Tai Chi classes to all ages as part of a comprehensive Fall Prevention awareness program, including an app that can be downloaded by all Palm Beach County community members.

Trauma patients may be eligible for the District's specialty care voucher program, District Cares. Patients must establish care with one of our FQHC providers and may be eligible if they reside in Palm Beach County and their income falls below 135 percent of the poverty level. Patients who qualify for this program receive

TRAUMA AGENCY

medical benefits at no cost for specialty coverage, hospitalization and emergency care. The care is delivered through the District Cares' network of credentialed health care providers. Patients who qualify for Medicaid, Medicare or any other entitlement program are not eligible for District Cares. The program serves as the payer of last resort.

RECOGNITION

MD Content recognized the Palm Beach County Trauma System as "Best in Class" in 2016.





Health Care District
PALM BEACH COUNTY

GROUND TRANSPORTATION

GROUND TRANSPORTATION

In 2022, the Health Care District launched its new interfacility ambulance program, LifeTrans, dedicated to reducing wait times and expanding access to medical care in Palm Beach County. This program operates around the clock for patients of the Health Care District who need interfacility transportation. It also transports patients who have suffered an acute episode related to substance use disorders from Palm Beach County hospitals to the 24/7 Addiction Stabilization Unit at HCA Florida JFK North Hospital in West Palm Beach or to other specialized treatment centers. The District directly employs the drivers, paramedics, maintenance and administrative staff.

To reduce wait times, the District recognized the need for safe and rapid ground ambulance transportation for our hospital patients at Lakeside Medical Center in Belle Glade who required treatment at a facility offering a higher level of care. The District worked closely with Palm Beach County's Emergency Management team to establish its own interfacility program for District patients. The District was issued a Certificate of Public Convenience and Necessity (COPCN) in 2021 to provide



ground transportation to Health Care District patients within the District's medical centers' network or to external facilities within Palm Beach County that provide a higher, more specialized level of care. Under the county's Emergency Medical Services (EMS) Ordinance, COPCN's are issued every six years for a six-year term. In the summer of 2022, the District launched the LifeTrans ambulance transportation program and held the official ribbon-cutting at Lakeside Medical Center in January 2023.

The District operates and funds the LifeTrans ground transportation program. The two ambulances, named Apollo and Atlas, provide basic and advanced life support medical transport services to pediatric and adult patients by ground ambulance 24 hours a day, 365 days a year. One of the ambulances is based at Lakeside Medical Center to support the safe and rapid transport of our hospital patients needing a higher level of care. The other is based at the Edward J. Healey Rehabilitation and Nursing Center. Between the two ambulances, the LifeTrans program averages between 120 and 150 transports each month.



SPONSORED PROGRAMS

SPONSORED PROGRAMS

For over 25 years, the Health Care District has funded qualified community organizations and state initiatives which provide services that strengthen Palm Beach County's health care safety net. These sponsored programs support public, not-for-profit and private partnerships with programs that have missions that are consistent with that of the District.

The District's sponsored programs initiative dates back to the early 1990s. Programs that initially received District support included the Comprehensive Aids Program (CAP), Health Career Day Program, PBCC Scholarship Programs and the Health and Human Services Planning Association. Today the District sponsors care through direct payment for services, planning grants and sustainability funding for community organizations that serve medically-needy, uninsured populations. The sponsored programs cover a wide range of services that include primary health care, dental services, case management services and specialty physician services.

In 2023, the following organizations receive funding from the District through sponsored programs:



BOARD & COMMITTEE MEMBER TERMS



Board of Commissioners

	Appointment Date	Reappointment Date	Term Limit Date
Carlos Vidueira, Chair	12/06/2022		09/30/2026
Sean O'Bannon, Vice Chair	12/06/2016	11/25/2020	09/30/2024
Tammy Jackson-Moore, Secretary	10/01/2019		09/30/2023
Tracy Caruso	12/06/2022		09/30/2026
Patrick Rooney, Jr.	12/06/2022		09/30/2026
Jyothi Gunta, MD, MPH	04/10/2023		N/A
Open (Elected Official)			

• 7 Members (3 Governor Appointees, 3 County Commission Appointees, Director of PBC Health Department)

Primary Care Clinics Board

	Appointment Date	Reappointment Date	Term Limit Date
Melissa Mastrangelo, Chair	09/25/2019		09/24/2023
R. Michael Smith, Vice Chair	01/30/2019	01/25/2023	01/29/2027
Joe Gibbons, Treasurer	05/19/2021		05/18/2025
Julia Bullard, Secretary	01/30/2019	01/25/2023	01/29/2027
Robert Glass	01/27/2021		01/26/2025
Tammy Jackson-Moore	10/01/2019		09/20/2023
William Johnson	09/30/2022		09/30/2026
Boris Seymore	01/29/2023		01/29/2027
Alcoyla St. Juste	01/29/2023		01/29/2027

- Minimum of 9 and Maximum of 13 Members (Majority Clinic Patients, 1 HCD Board Member, 1 Finance & Audit Committee Member, 1 Quality, Patient Safety & Compliance Committee Member)

Lakeside Health Advisory Board

	Appointment Date	Reappointment Date	Term Limit Date
Eddie Rhodes, Chair	07/24/2018	09/27/2022	09/30/2026
Inger Harvey, Vice Chair	01/29/2019		09/30/2023
Dr. LaTanya McNeal, Secretary	09/10/2019		09/30/2023
Carolyn Jones	05/28/2019		05/31/2023
Caroline Villanueva	10/01/2022		09/30/2026
Tammy Jackson-Moore	10/01/2019		N/A
Wesley Ledesma	10/01/2022		09/30/2026

- Minimum of 7 and Maximum of 11 Members (1 HCD Board Member)

Finance and Audit Committee

	Appointment Date	Reappointment Date	Term Limit Date
Sean O'Bannon	12/06/2016		09/30/2024
Patrick Rooney, Jr.	12/06/2022		09/30/2026
Carlos Vidueira	12/06/2022		09/30/2026
Sophia Eccleston	12/08/2020		12/30/2024
Richard Sartory	03/26/2019	01/26/2023	03/25/2027
Mark Marciano	03/26/2019	01/26/2023	03/25/2027
Joseph Gibbons	05/28/2019		05/31/2023
Heather Frederick	03/24/2022		03/31/2026

- Minimum of 5 and Maximum of 9 Members (2 HCD Board Members, 1 Clinic Board Member, 1 Glades Representative)

Quality, Patient Safety and Compliance Committee

	Appointment Date	Reappointment Date	Term Limit Date
Jyothi Gunta, MD, MPH	04/10/2023		N/A
Tracy Caruso	12/06/2022		09/30/2026
William Johnson	09/27/2022		09/30/2026
Dr. LaTanya McNeal	09/27/2022		09/30/2026
Robert Glass	09/27/2022		09/30/2026
Kimberly Schulz	05/28/2019		05/31/2023
Alina Alonso, MD	03/16/2023		03/15/2027
Luis Perezalonso, MD	06/06/2022		N/A

• Minimum of 5 and Maximum of 9 Members (2 HCD Board Members, 1 Clinics Board Member, 1 Glades Representative, 1 Community Member-at-Large, and LMC Chief of Staff)

GOOD HEALTH FOUNDATION

	Appointment Date	Reappointment Date	Term Limit Date
Patrick Rooney, Jr.	12/06/2022		N/A
Carlos Vidueira	12/06/2022		N/A
Sean O'Bannon	12/06/2016		N/A
Heather Frederick	03/24/2022		03/31/2026
Richard Sartory	03/26/2019	01/26/2023	03/31/2026
Mark Marciano	03/26/2019	01/26/2023	03/25/2027
Joseph Gibbons	05/28/2019		05/31/2023
Sophia Eccleston	12/08/2020		12/30/2024

• Minimum of 5 and Maximum of 9 Members (2 HCD Board Members, 1 Clinic Board Member, 1 Glades Representative)

Chapter 2003-326

An act relating to the Health Care District of Palm Beach County; codifying, amending, and reenacting special acts relating to the District; providing a popular name; providing boundaries; providing for a governing board, rules of the board, and membership; providing powers and duties of the board; providing for an ad valorem tax; providing for issuance of bonds; providing for an annual report; repealing chapters 87-450, 92-340, 93-382, 96-509, and 2000-489, Laws of Florida; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Pursuant to section 189.429, Florida Statutes, this act constitutes the codification of all special acts relating to the Health Care District of Palm Beach County. It is the intent of the Legislature in enacting this law to provide a single, comprehensive special act charter for the District, including all current legislative authority granted to the District by its several legislative enactments and any additional authority granted by this act.

Section 2. Chapters 87-450, 92-340, 93-382, 96-509, and 2000-489, Laws of Florida, are codified, reenacted, amended, and repealed as herein provided.

Section 3. The charter for the Palm Beach County Health Care Act is recreated and reenacted to read:

Section 1. Popular Name.— This act shall be known and may be referred to by the popular name the “Palm Beach County Health Care Act.”

Section 2. Intent.— The Legislature recognizes that it is in the public interest to provide a source of funding for indigent and medically needy residents of Palm Beach County (the “County”) and to maximize the health and well being of Palm Beach County residents by providing comprehensive planning, funding, and coordination of health care service delivery. Program elements should include, but not be limited to, preventive health services, community nursing services, ambulatory care, outpatient services, hospital services, trauma health services, and rehabilitative services, as feasible. All programs should be coordinated to maximize the delivery of quality health care. The most effective and efficient method to provide comprehensive health care services is through a countywide health care district.

Section 3. Name and Boundaries.-- The name of the independent special district shall be the Health Care District of Palm Beach County (“the District”). The District shall embrace and include all of the property of Palm Beach County.

Section 4. District Board; Membership; Rules of Procedure.–

(1) The District shall be governed by a District Board which shall be composed of seven members. The appointing authority shall consider the diverse geographic areas of Palm Beach County in selecting individuals to serve on the District Board, and at least one member, but not more than two, shall reside in the Glades area, that area of Palm Beach County lying west of the line between Range 39 East and Range 40 East. The membership of the District Board shall include three members appointed by the Governor, three members appointed by the Board of County Commissioners of Palm Beach County, and one member from the Palm Beach County Health Department as provided below:

(a) The Governor shall appoint three members to serve on the District Board.

(b) The Board of County Commissioners of Palm Beach County shall appoint three members to the District Board, other than themselves, one of whom must be an elected official at the time of appointment.

(c) The District Board member from the Palm Beach County Public Health Department shall be the director of the Palm Beach County Public Health Department.

(2) Any vacancies on the District Board for whatever cause shall be filled in the same manner as set forth in this act for an initial appointment.

(3) District Board members shall receive no compensation for their services; however, while acting for the District, they shall receive their actual expenses, including subsistence, lodging, travel, and other expenses in the amount actually incurred, as approved by the District Board.

(4) Each member of the District Board shall serve for a term of 4 years or until a successor is appointed.

(5) The term of office of a District Board member shall be construed to commence on October 1 of the year of appointment and to terminate September 30 of the year of the end of his or her term.

(6) No member of the District Board may serve more than two consecutive 4-year terms, with the exception of the director of the Palm Beach County Public Health Department.

(7) The members of the District Board shall elect among themselves a chair, vice-chair, and secretary. The chairman shall preside at all meetings of the District Board, except that the vice-chair may preside in his or her absence. The chair, vice-chair, and secretary shall each have an official vote in all matters considered by the District Board. The District Board is authorized to adopt bylaws providing for the orderly governance and operation of the District's affairs.

(8) The District Board shall meet regularly as determined by the bylaws of the District Board.

(9) Each District Board member shall give bond to the Governor for the faithful performance of his or her duties in the sum of \$5,000 with a surety company qualified to do business in the state, as surety, which bond shall be approved and kept by the Clerk of the Circuit Court of Palm Beach County, Florida. The premiums on said bonds shall be paid as part of the expenses of the District Board.

(10) Four District Board members shall constitute a quorum, and a vote of at least three District Board members shall be necessary to complete the transaction of any business of the District. The District Board members shall cause true and accurate minutes and records to be kept of all business transacted by them and shall keep full, true, and complete books of accounts and minutes, which minutes, records, and books of account shall at all reasonable times be open and subject to public inspection, and any person desiring to do so may make or procure a copy of said minutes, records, or books of account, or such portion thereof as such person may desire, at a reasonable cost determined by the District Board.

Section 5. Qualifications of District Board Members.-- A District Board member or the spouse of a District Board member may not, at the time of appointment or for 1 year prior to appointment or during the term of the District Board member:

(1) Have any financial interest, other than ownership of shares in a mutual fund, pension plan, or profit-sharing plan, in any entity which, either directly or indirectly, receives funds from the District.

(2) Be employed, retained by, or engaged in any activity with any entity which, either directly or indirectly, receives funds from the District, except for the director of the Palm Beach County Public Health Department.

(3) Serve on the board of directors or board of trustees of any entity, which either directly or indirectly, receives funds from the District.

Section 6. District Board Powers.— The District Board is vested with the authority and responsibility to provide for the comprehensive planning and delivery of adequate health care facilities, including, but not limited to, hospitals, and services for the citizens of the County, particularly medically needy citizens. For those purposes, the District Board shall have and may utilize the following powers:

(1) To plan, set policy guidelines for, fund, establish, construct, lease, operate, and maintain such health care facilities as shall be necessary for the use of the people of the County, including the continued presence of at least one hospital in the Glades area, subject to and limited by the future financial resources and constraints of the District; however, hospitals may not be constructed by the District, except that the District may construct a hospital in the Glades area. Said health care facilities shall be established, constructed, leased, owned, operated, and maintained for the preservation of the public health, for the public good, and for the use of the public of the County. The locations of such health care facilities shall be determined by said District Board.

(2) To provide services and facilities jointly with other public or private health care providers, with appropriate provision to reduce the costs of providing service for all users thereof.

(3) To provide health care services to residents of the County through the utilization of health care facilities not owned and operated by the District. The provision of said care is hereby found and declared to be a public purpose and necessary for the preservation of the public health and welfare of the residents of the County.

(4) To adopt an official seal and alter the same at pleasure.

(5) To maintain an office at such place or places as it may designate.

(6) To sue and be sued in its own name and to plead and be impleaded, but with all sovereign immunity and limitations provided by the State Constitution or general law.

(7) To acquire by purchase, lease, gift, or otherwise, or to obtain options for the acquisition of, any property, real or personal, improved or unimproved, as said District Board deems proper to carry out the purposes of this act. However, the District shall not have the power of eminent domain. To hold and dispose of all assets or property, real or personal, improved or unimproved, upon such terms and for such consideration, or for no consideration, as the District Board deems proper to carry out the purposes of this act.

(8) To plan and fund the construction, acquisition, ownership, leasing, repair, maintenance, extension, expansion, improvement, rehabilitation, renovation, furnishing, and equipping of health care facilities and to pay all or any part of the costs thereof from the proceeds of operating revenue, bonds, lease-purchase financing, or other obligations of indebtedness of the District or from any contribution, gift, or donation or other funds of the District for such purpose.

(9) To make and execute agreements of lease, contracts, deeds, mortgages, notes, and other instruments necessary or convenient in the exercise of its powers and functions under this act.

(10) To lease as lessor or lessee to or from any person, firm, corporation, association, or body, public or private, any facilities or property of any nature for the use of the District to carry out any of the purposes authorized by this act.

(11) To pledge or assign any money, rents, charges, fees, or other revenues and any proceeds derived from sales of property, insurance, or condemnation awards.

(12) To borrow money and issue bonds, certificates, warrants, notes, or other evidence of indebtedness as hereinafter provided; to levy such tax as may be authorized; and to charge, collect, and enforce fees and other user charges.

(13) To raise, by user charges or fees authorized by resolution of the board, amounts of money which are necessary for the conduct of the District's activities and services and to enforce their receipt and collection in the manner prescribed by resolution not inconsistent with law.

(14) To employ administrators, physicians, attorneys, accountants, financial experts, consulting engineers, architects, surveyors, and such other employees and agents as may be necessary in its judgment, and to fix their compensation.

(15) To acquire existing health care facilities and to reimburse any health care facility for the cost of such facilities in accordance with an agreement between the District and the health care facility.

(16) To acquire existing health care facilities and to refund, refinance, or satisfy outstanding obligations, mortgages, or advances issued, made, or given by said health care facility.

(17) To mortgage any health care facility and the site thereof.

(18) To cooperate with, or contract with, other governmental agencies or private individuals or entities as may be necessary, convenient, incidental, or proper in connection with any of the powers, duties, or purposes authorized by this act.

(19) To assess and impose upon lands in the District ad valorem taxes as provided by this act.

(20) To annually determine and approve a district budget and millage in accordance with chapter 200, Florida Statutes.

(21) To promulgate and adopt policies and rules for the operation of the District.

(22) In its absolute discretion, to establish or become a part of one or more qualified self-insurance trust funds for the purpose of protecting District assets and operations, as well as related health care entities and individuals comprising the health care delivery system established at the direction or under the authority of the District. The protection from liability losses includes, without limitation, professional medical malpractice, comprehensive general liability, directors and officers' liability, workers' compensation liability, medical and health services, life, property, and such other liability exposures as may be permitted by Florida law. These self-insurance trust funds may be established for the benefit of the officers, directors, employees, and approved agents of the District as well as such other legal entities or individuals as the District may determine, by board resolution, are carrying out the health care purposes and mandates of the District during the period those entities or individuals are acting within the scope of the authority and duties devolving upon them through an agreement with or direct mandate from the District.

(23) To provide for reimbursement to hospitals, physicians, or other health care providers or facilities.

(24) The District is hereby restricted from reimbursing any health care providers or facilities, including hospitals and physicians, for their bad debts arising from those patients who are not eligible for reimbursement under district guidelines. The District, however, shall continue to reimburse such health care providers for the medical care of medically needy patients, to the extent of the District's limited financial resources, taking into account funds available from other sources, including other governmental funding sources.

(25) To establish criteria for the provision of health care pursuant to this act.

(26) To be exempt from the payment of any fees, taxes, or increment revenue to community redevelopment agencies established pursuant to part III of chapter 163, Florida Statutes.

(27) Notwithstanding the prohibition against extra compensation set forth in section 215.425, Florida Statutes, to provide for an extra compensation program, including a lump-sum bonus payment program, to reward outstanding employees whose performances exceed standards, if the program provides that a bonus payment may not be included in an employee's regular base rate of pay and may not be carried forward in subsequent years.

(28) To plan, set policy for, and fund from its revenue sources the establishment and implementation of cooperative agreements with other government authorities and public and private entities within and outside of Palm Beach County which promote the efficiencies of local and regional trauma agencies, rural health networks, and cooperative health care delivery systems, provided that any such agreements with entities outside of Palm Beach County ensure that the costs associated with any trauma services are the responsibility of such entity.

(29) To establish, and appoint members to, such boards, committees, or advisory bodies as the District Board deems appropriate.

(30) To plan, coordinate, supervise, manage, and take such other action as appropriate to implement the school health programs as established by the District.

(31) To do all things necessary to carry out the purposes of this act.

All of the foregoing powers are hereby found and declared to be a public purpose and necessary for the preservation of the public health, for the public good, and for the welfare of the residents of the District.

Section 7. Indemnification of Members of the Board, Officers, Committee Members, Employees, and Others.--

(1) The District shall have power to indemnify any person who was or is a party, or is threatened to be made a party, to any threatened, pending, or completed action, suit, or proceeding, whether civil, criminal, administrative, or investigative (other than an action by, or in the right of, the District) by reason of the fact that he is or was an agent of the District, against expenses (including attorneys' fees), judgments, fines, and amounts paid in settlement actually and reasonably incurred by him or her in connection with such action, suit, or proceeding, including any appeal thereof, if he or she acted in good faith and in a manner he or she reasonably believed to be in, or not opposed to, the best interests of the District and, with respect to any criminal action or proceeding, had no reasonable cause to believe this conduct was unlawful. The District shall also have the power to indemnify any such person against any loss of wages or earnings suffered during his or her defense, provided that, in the opinion of the commissioners of the District, those losses were directly attributable to that defense. The termination of any action, suit, or proceeding by judgment, order, settlement, or conviction or upon a plea of nolo contendere or its equivalent shall not, of itself, create a presumption that the person did not act in good faith and in a manner which he or she reasonably believed to be in, or not opposed to, the best interests of the District or, with respect to any criminal action or proceeding, had reasonable cause to believe that his or her conduct was unlawful.

(2) No indemnification under this section shall be made in respect of any claim, issue, or matter as to which such person shall have been adjudged to be liable for negligence or misconduct in the performance of his or her duty to the District, unless, and only to the extent that, the court in which such action or suit was brought shall determine upon application that, despite the adjudication of liability but in view of all circumstances of the case, such person is fairly and reasonable entitled to indemnification for such expenses, which such court shall deem proper.

(3) If an individual has been determined by the District to be an agent entitled to compensation under these indemnity provisions and to the extent that such agent of the District has been successful on the merits or otherwise in defense of any action, suit, or proceeding referred to in the subsections above or in defense of any claim, issue, or matter therein, he or she shall be indemnified against expenses (including attorneys' fees) actually and reasonably incurred by him or her in connection therewith. Any such successful agent shall also be indemnified against any loss of wages or personal service earnings suffered during his or her defense, provided that, by the vote of the District Board acting through a quorum consisting of members who are not parties to such action, suit, or proceeding, it is determined that those losses were directly attributable to the time involved in that defense. If, however, a quorum of disinterested members cannot be convened, the decision shall be made by independent legal counsel, who may be the legal counsel for the District.

(4) Unless otherwise determined by a court pursuant to subsection (2), any indemnification under the above subsections shall be made by the District only as authorized in the specific case upon a determination of a quorum of District Board members who are not parties to such action, suit, or proceeding, or, if that is not possible, by independent legal counsel, who may be the legal counsel of the District, that indemnification of the agent of the District is proper in the circumstances because he or she has met the applicable standard of conduct set forth in the above subsections.

(5) Expenses including attorneys' fees and lost wages or earnings incurred in defending a civil or criminal action, suit, or proceeding may be paid by the District in advance of the final disposition of such action, suit, or proceeding upon a preliminary determination following one of the procedures set forth in the above subsections that the agent of the District met the applicable standard of conduct set forth in the above subsections and upon receipt of an undertaking by or on behalf of the agent of the District to repay such amount, unless it shall ultimately be determined that he or she is entitled to be indemnified by the District as authorized in this section.

(6) Indemnification as provided in this section shall continue as to a person who has ceased to be an agent of the District and shall inure to the benefit of the heirs, executors, and administrators of such a person.

(7) As used in this section, the term "agent of the District" means a District Board member, District officer, committee member appointed by the District, or District employee including persons employed by the District to provide executive, physician, nursing, dental, paramedical, technical, business, management, legal, and other supporting services for the District, together with such other approved agents of the District or subdistricts as well as such other legal entities or individuals as the District may determine, by board resolution, are carrying out the health care purposes and mandates of the District during the period those entities or individuals are acting within the scope of the authority and duties devolving upon them through an agreement with or direct mandate from the District or subdistricts, excluding medical malpractice claims asserted individually against such persons, but including a person serving at the direction of the District

Board. All such agents of the District, in order to be entitled to indemnification for the liability arising out of the act in question, shall have been acting within the scope of their employment on District related business.

(8) The District shall have power to purchase and maintain insurance on behalf of such agents of the District as the District Board may, from time to time, deem appropriate, against any liability asserted against the agent of the District and incurred by the agent of the District in any such capacity or arising out of his or her status as agent of the District, whether or not the District would have the power to indemnify him or her against such liability under the provisions of this section. This subsection, however, is not intended to be a waiver of sovereign immunity or a waiver of any other defense or immunity to such lawsuits.

Section 8. Taxes.--

(1) Ad Valorem Taxes.-- The District Board shall have the power to levy and assess an ad valorem tax on all the taxable property in the District for the purposes and needs of the District incurred in exercising the powers and for the purposes set forth herein, including, but not limited to, the power to fund the construction, operation, and maintenance of assessable improvements, to pay the principal of and interest on any bonds of the District, and to provide for any sinking or other funds established in connection with any such bonds. The ad valorem tax levied by the District Board for District purposes shall not exceed 2 mills. As an additional restriction on the levying of taxes by the District Board, said District Board shall not levy a tax that increases its annual millage levy more than one-quarter of a mill from the amount levied by the District in the previous year.

(2) Procedure.-- The levy by said District Board of the taxes authorized by any provision of this act shall be in accordance with the procedure set forth in the State Constitution and general law.

(3) Financial Statement. -- At least once each year, the District Board shall cause to be published once in a newspaper of general circulation in the County a copy of the District's annual audited financial statement summary which shows a complete summary of the financial condition of the District.

(4) Enforcement of Taxes. -- The collection and enforcement of all taxes levied by the District shall be at the same time and in like manner as county taxes, and the provisions of the Florida Statutes relating to liens for taxes and the enforcement thereof; the sale of lands for unpaid and delinquent taxes; the issuance, sale, and delivery of tax certificates for such unpaid and delinquent county taxes; the redemption thereof; the issuance to individuals of tax deeds based thereon; and all other procedures in connection therewith shall be applicable to the District to the same extent as if such statutory provisions were expressly set forth herein. All taxes shall be subject to the same discounts as county taxes.

(5) When Unpaid Tax is Delinquent; Penalty. -- All taxes provided for in this act shall become delinquent and bear penalties on the amount of such taxes in the same manner as county taxes.

(6) Tax Exemption. -- All bonds issued hereunder and interest paid thereon and all fees, charges, and other revenues derived by the District from the services provided by this act are exempt from all taxes by the state or by any political subdivision, agency, or instrumentality thereof to the extent allowed by general law.

Section 9. Short-term Borrowing; Bonds.--

(1) Issuance of Bond Anticipation Notes. -- In addition to the other powers provided for in this act, the District Board shall have the power to borrow money in anticipation of the sale of bonds and to issue bond anticipation notes in a principal sum not in excess of the authorized maximum amount of such bond issue. Such notes shall be in such denomination or denominations, bear interest at such rate as the District Board may determine in compliance with general law, mature at such time or times not later than 5 years from the date of issuance, and be in such form and executed in such manner as the District Board shall prescribe. Such notes may be sold at either public or private sale or, if such notes shall be renewal notes, may be exchanged for notes then outstanding on such terms as the District Board shall determine. Such notes shall be paid from the proceeds of such bonds when issued. The District Board may, in its discretion, in lieu of retiring the notes by means of bonds, retire them by means of current revenues or from any taxes or assessments levied for the payment of such bonds, but in such event a like amount of the bonds authorized shall not be issued.

(2) Short-term Borrowing. -- The District at any time may obtain loans, in such amount and on such terms and conditions as the District Board may approve, for the purpose of paying any of the expenses of the District or any costs incurred or that may be incurred in connection with any of the projects of the District, which loans shall bear such interest as the District Board may determine in compliance with general law, and may be payable from and secured by a pledge of such funds, revenues, taxes, and assessments as the District Board may determine. The District may issue negotiable notes, warrants, or other evidence of debt to be payable at such times, to bear such interest as the District Board may determine in compliance with general law, and to be sold or discounted at such price or prices not less than 95 percent of par value and on such terms as the District Board may deem advisable. The District Board shall have the right to provide for the payment thereof by pledging the whole or any part of the funds, revenues, taxes, and assessments of the District. The approval of electors residing in the County shall not be necessary except when required by the State Constitution.

(3) Authorization and Forms of Bonds. -- Any general obligation bonds or revenue bonds may be authorized by resolution or resolutions of the District Board which shall be adopted by a majority of all the members thereof then in office. Such resolution or resolutions may be adopted at the same meeting at which they are introduced and need not be published or posted. The District Board may, by resolution, authorize the issuance of bonds and fix the aggregate amount of bonds to be issued; the purpose or purposes for which the moneys derived therefrom shall be expended; the rate or rates of interest, in compliance with general law; the denomination of the bonds; whether or not the bonds are to be issued in one or more series; the date or dates of maturity, which shall not exceed 40 years from their respective dates of issuance; the medium of payment; the place or places within or without the state where payment shall be made; registration privileges; redemption terms and privileges, whether with or without premium; the manner of execution; the form of the bonds; the manner of execution of bonds; and any and all other terms, covenants, and conditions thereof and the establishment of revenue or other funds. Such authorizing resolution shall further provide that such bonds shall be executed in accordance with chapter 279, Florida Statutes, the Registered Public Obligations Act of Florida. The seal of the District may be affixed, lithographed, engraved, or otherwise reproduced in facsimile on such bonds. In case any officer whose signature shall appear on any bonds or coupons shall cease to be such officer before the delivery of such bonds, such signature or facsimile shall nevertheless be valid and sufficient for all purposes the same as if he or she had remained in office until such delivery.

(4) Issuance of Additional Bonds. -- The District Board may authorize the issuance of additional bonds, upon such terms and conditions as the District Board may provide in the resolution authorizing the issuance thereof, but only in compliance with the resolution or other proceedings authorizing the issuance of the original bonds.

(5) Refunding Bonds. -- The District shall have the power to issue bonds to provide for the retirement or refunding of any bonds or obligations of the District that at the time of such issuance are or subsequently thereto become due and payable, or that at the time of issuance have been called or are or will be subject to call for redemption within 10 years thereafter, or the surrender of which can be procured from the holders thereof at prices satisfactory to the District Board. Refunding bonds may be issued at any time when in the judgment of the District Board such issuance will be advantageous to the District. No approval of the qualified electors residing in the District shall be required for the issuance of refunding bonds except in cases in which such approval is required by the State Constitution. The District Board may by resolution confer upon the holders of such refunding bonds all rights, powers, and remedies to which the holders would be entitled if they continued to be the owners and had possession of the bonds for the refinancing of which such refunding bonds are issued, including, but not limited to, the preservation of the lien of such bonds on the revenues of any project or on pledged funds, without extinguishment, impairment, or diminution thereof. The provisions of this act pertaining to bonds of the District shall, unless the context otherwise requires, govern the issuance of refunding bonds, the form and other details thereof, the rights of the holders thereof, and the duties of the District Board with respect thereto.

(6) Revenue Bonds.--

(a) The District shall have the power to issue revenue bonds from time to time without limitation as to amount. Such revenue bonds may be secured by, or payable from, the gross or net pledge of the revenues to be derived from any health facility or combination of facilities; from the rates, fees, or other charges to be collected from the users of any health facility or facilities; from any revenue-producing undertaking or activity of the District; or from any other sources or pledged security. Such bonds shall not constitute an indebtedness of the District, and the approval of the qualified electors shall not be required unless such approval is required by the State Constitution.

(b) Any two or more hospitals or health facilities may be combined and consolidated into a single hospital or facility and may hereafter be operated and maintained as a single hospital or facility. The revenue bonds authorized herein may be issued to finance any one or more of such hospitals or facilities, regardless of whether or not such hospitals or facilities have been combined and consolidated into a single hospital or facility. If the District Board deems it advisable, the proceedings authorizing such revenue bonds may provide that the District may thereafter combine the projects then being financed or theretofore financed with other projects to be subsequently financed by the District and that revenue bonds to be thereafter issued by the District shall be on parity with the revenue bonds then being issued, all on such terms, conditions, and limitations as shall have been provided in the proceeding which authorized the original bonds.

(7) General Obligation Bonds.--

(a) The District shall have the power from time to time to issue general obligation bonds to finance or refinance capital projects or to refund outstanding bonds. Except for refunding bonds, no general obligation bonds shall be issued unless the bonds are issued to finance or refinance a capital project and the issuance has been approved at an election held in accordance with the requirements for such election as prescribed by the State Constitution. Such elections shall be called by District Board. The expenses of calling and holding an election shall be at the expense of the District, and the District shall reimburse the County for any expenses incurred in calling or holding such election.

(b) The District may pledge its full faith and credit for the payment of the principal and interest on such general obligation bonds and for any reserve funds provided therefor and may unconditionally and irrevocably pledge itself to levy ad valorem taxes on all taxable property in the District, to the extent necessary for the payment thereof, without limitations as to rate or amount.

(c) If the District Board determines to issue general obligation bonds for more than one capital project, the approval of the issuance of the bonds for each and all such projects may be submitted to the electors on one and the same ballot. The failure of the electors to approve the issuance of bonds for any one or more capital projects shall not defeat the approval of bonds for any capital project which has been approved by the electors.

(8) Limitation on Issuance of Bonds.--

(a) Ad valorem funding shall not be used to support the issuance of bonds, unless the bond issue has been approved by referendum.

(b) Annual debt service (annual retirement of long-term debt plus all interest) as a percentage of total revenue from millage must be less than 10 percent of all District revenue.

(9) Additional Authority.-- The District shall have the authority to determine whether to issue taxable or tax-exempt bonds under this section and whether the bonds are to bear interest at a fixed rate or a variable rate or rates, and the District shall have the authority to determine the security for the bonds, including any credit enhancements.

Section 10. Lien on Behalf of the Health Care District of Palm Beach County when Other Parties are Liable.--

(1) The District shall be entitled to a lien, as determined by this section, for payments made by the District for health care services provided to ill or injured persons, upon any proceeds of judgments, settlements, or settlement agreements concerning the liability of tortfeasors or other third parties causing or contributing to said illness or injuries thus necessitating such health care services. For purposes of this section, any such ill or injured persons or their legal representatives may be referred to as "claimant."

(2) Upon suit being filed by the claimant against any tortfeasor or other third party, the claimant shall send the District, if the District made any payments on claimant's behalf, a copy of the complaint by certified or registered mail as notification of such suit. Within 60 days after receipt of the claimant's notification, the District may file in the suit a Notice of Payments Made for Health Care Services. Such notice must specify the amount the District paid, and it shall constitute a lien upon any recovery to the extent allowed by this section. If suit has not been filed, a claimant shall send the District notification by certified or registered mail of the claimant's intent to claim damages from the tortfeasor or other third party. Within 60 days after receipt of the claimant's notification, the District may send to the claimant by certified or registered mail a Notice of Payments Made for Health Care Services. Such notice must specify the amount the District paid, and it shall constitute a lien upon any recovery to the extent allowed by this section. If the District made any payments on claimant's behalf and becomes aware of a suit or claim for damages prior to being notified by the claimant in accordance with this subsection, it may file or send its Notice of Payments Made for Health Care Services at that time. Such notice must specify the amount paid by the District, and it shall constitute a lien upon any recovery to the extent allowed by this section. The notice of payments made may be amended by the District to reflect amounts paid by the District subsequent to the filing of said notice.

(3) The amount of the lien created by this section shall be the entire amount paid by the District pursuant to the Notice of Payments Made for Health Care Services, as amended, less the District's pro rata share of reasonable attorney's fees, costs, and expenses of litigation for the claimant's attorney; provided, however, the amount of the lien created by this section shall in no event be greater than two-thirds of the amount remaining from the proceeds of judgment, settlement, or settlement agreement after the deduction of attorney's fees and other reasonable costs and expenses of litigation.

(4) No release or satisfaction of any judgment, settlement, or settlement agreement shall be valid against such lien unless the District joins therein or executes a release of such lien.

(5) The District, when claiming a lien under this section, shall cooperate with the claimant by producing such information as is reasonably necessary to prove the amount paid by the District for health care services provided.

(6) The lien created by this act shall not preempt the lien rights of any hospital in Palm Beach County created by ordinance, special act, or general law. This act shall not affect any subrogation rights of the District.

Section 11. Reorganized District-owned hospitals.— The District has the authority to reorganize any hospital it owns in accordance with state law.

Section 12. Glades Rural Area Support Board.-- The District Board, in the exercise of its powers relative to the planning and delivery of adequate health care facilities and services for the citizens of Palm Beach County, particularly medically needy citizens, and as otherwise stated in section 6, may establish a Glades Rural Area Support Board (“Glades Support Board”) and may delegate certain authority to the Glades Support Board for the planning of support for the provision of health care in the Glades area, that area of Palm Beach County lying West of the line between Range 39 East and Range 40 East, all subject to the policies and procedures established by the District Board. Among the powers that the District Board may delegate to the Glades Support Board is some or all of the District Board’s authority to provide for tax support and reimbursement to hospitals, physicians, and/or such other health care providers or facilities for the medical care of medically needy patients. If so requested by the District Board, the Glades Support Board shall recommend to the District Board amounts of reimbursement appropriate for hospitals, physicians, and such other health care providers or facilities which provide health care to eligible medically needy patients in the Glades area. The District Board may amend, rescind, modify, or suspend any or all of the delegated powers of the Glades Support Board at any time or from time to time, in the discretion of the District Board.

Section 13. Report to the County Commissioners and Legislative Delegation.— The District Board shall annually submit a report, including its budget, to the Palm Beach County Commissioners and to the Palm Beach County Legislative Delegation.

Section 14. No Effect.— If any provision of this act or the application thereof to any person or circumstance is held invalid or unconstitutional by any court of competent jurisdiction, the invalidity or unconstitutionality shall not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to this end the provisions of this act are declared severable.

Section 15. Remedial Act.— This act shall be construed as a remedial act and shall be liberally construed to promote the purpose for which it is intended.

Section 4. Chapters 87-450, 92-340, 93-382, 96-509, and 2000-489, Laws of Florida, are repealed.

Section 5. This act shall take effect upon becoming a law.

Approved by the Governor July 16, 2003.

Filed in Office Secretary of State July 16, 2003.



Bylaws of The Health Care District of Palm Beach County

Version Dated: March 11, 2021

**BYLAWS
OF THE
HEALTH CARE DISTRICT
OF PALM BEACH COUNTY**

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BYLAWS OF THE HEALTH CARE DISTRICT PALM BEACH COUNTY

Section 1 – Statutory Authority, Purpose, Mission and Vision

- 1.1 **Statutory Authority.** These Amended and Restated Bylaws of the Health Care District of Palm Beach County (the “District”) have been adopted as the Bylaws of the District (the “Bylaws”) by the District’s governing board pursuant to the authority conferred upon the governing board by the Florida Legislature in 1987 (Chapter 87-450, Laws of Florida), as amended and codified by Chapters 88-460, 91-344, 92-340, 93-382, 96-509, 2000-489 and 2003-326 Laws of Florida (the “Health Care Act”).
- 1.2 **Health Care District of Palm Beach County.** The term “District,” as used in these Bylaws, means the Health Care District of Palm Beach County and all affiliated entities.
- 1.3 **Purpose.** The purpose of the District as set forth in the Health Care Act is to be a source of funding for indigent and medically needy residents of Palm Beach County and to maximize the health and well-being of Palm Beach County residents by providing comprehensive planning, funding and coordination of health care services.
- 1.3 **Mission.** The mission of the District is to be the health care safety net for Palm Beach County.
- 1.4 **Vision.** The vision of the District is to meet changes in health care to keep the District’s community healthy.

Section 2 – Governing Board and Board Members

- 2.1 **Governing Board.** The District’s Governing Board shall be known as the Board of the Health Care District of Palm Beach County (“Board”).
- 2.2 **Qualifications.** As set forth in the Health Care Act, a Board member or the spouse of a Board member may not, at the time of appointment or for 1 year prior to appointment or during the term of the District Board member:
 - a. Have any financial interest, other than ownership of shares in a mutual fund, pension plan, or profit-sharing plan, in any entity which, either directly or indirectly, receives funds from the District.
 - b. Be employed, retained by, or engaged in any activity with any entity which, either directly or indirectly, receives funds from the District, except for the director of the Palm Beach County Public Health Department.

- c. Serve on the board of directors or board of trustees of any entity, which either directly or indirectly, receives funds from the District.

2.3 **General Powers.** Consistent with the purpose set forth herein, the Board is vested with the authority to provide for the comprehensive planning, funding and coordination of health care services for the residents of Palm Beach County. For that purpose, the Board shall have and may utilize all enumerated general powers as set forth in the Health Care Act.

2.4 **Role.** The Board's general powers and responsibilities as set forth in the Health Care Act and herein shall be exercised as a whole body and not through the actions of any one member. The Board shall rely on the Chief Executive Officer to manage the District's daily operations and the Board shall not interfere with said management. For the purposes of information and inquiry, individual Board members may directly ask questions or request information from District officers.

2.5 **Responsibilities.** The governance and business of the District is conducted by the Board with due attention to the District's purpose, mission and vision. Responsibilities of the Board include, but are not necessarily limited to:

- a. Plan, set policy and oversee the provision of health care services, programs and facilities with and without other public and/or private health care providers for all residents and users in Palm Beach County;
- b. Oversee and approve agreements, leases, contracts, deeds, notes and other instruments for the acquisition, establishment, construction, operations and/or maintenance of such health care services, programs and facilities as shall be necessary for the health care needs of the residents and users in Palm Beach County;
- d. Accountable for monitoring and oversight of the quality of all health care services provide by the District;
- e. Oversee the compliance and ethics program and review matters related to compliance with federal and state laws and federal health care program requirements;
- d. Oversee the engagement of professional service providers and consultants as may be necessary in its judgment to assist the Board in accomplishing the District's mission;
- e. Annually determine and approve a District budget and millage in accordance with Florida law and the Health Care Act;
- f. Promulgate and adopt general policies for the operation of the District;
- g. Review and approve the mission and vision statement of the District;

- h. Approve and oversee the District's strategic plan and maintain strategic oversight of implementation;
- i. Serve on or act as the Board of Directors for any subsidiary or affiliated entity established by the District;
- j. Establish and support affiliate entities to assist the District in fulfilling its mission;
- k. Review the bylaws, charters or policies of any subsidiary entity subject to Board approval;
- l. Appoint and/or remove and credential medical staff members and grant, limit or deny specific clinical privileges upon recommendations from the appropriate committee;
- m. Retain fiduciary responsibility and authority for all aspects of operations of its subsidiary entities including approving the budgets for each;
- n. Address such other responsibilities as may be contemplated and/or determined by the Health Care Act, applicable law and/or the Board.

All of the foregoing responsibilities are hereby found and declared to be a public purpose and necessary for the preservation of the public health, for the public good, and for the welfare of the residents of Palm Beach County.

2.6 ***Fiduciary Duties.*** The Board shall exercise all of its powers and responsibilities as set forth in applicable law, the Health Care Act and these Bylaws with the following fiduciary duties:

- a. Care: which refers to the obligation of Board members to exercise proper diligence of care in their decision making process;
- b. Loyalty: which requires Board members to discharge their obligations unselfishly, in a manner designed to benefit only the organization and not the Board member personally; and
- c. Obedience: which requires that Board members be faithful to the underlying purpose, mission and goals of the District as set forth in the Health Care Act, these Bylaws and District policies.

2.7 ***Compensation; Reimbursement of Expenses.*** No Board member shall be entitled to receive from the District compensation for service on the Board or any committee of the Board. Members of the Board shall be entitled to receive from the District reimbursement for the actual expenses, including travel expenses, incurred by such member consistent with District policies and procedures.

Section 3 – Officers

- 3.1 **Officers.** The Board Officers shall consist of a Chair, Vice Chair, and Secretary. The Board Officers shall be elected at the annual meeting and shall hold office for a one (1) year term. Officers may not hold the same office for more than three (3) full terms. Vacancy in office shall be filled by special Board election as soon as reasonably possible. Any Board Officer can be recalled from office by a vote of four (4) members of the Board.
- 3.2 **Chair.** Recognizing the Chair’s responsibility to maintain the integrity of corporate governance, the Board Chair has primary responsibility to:
- a. Preside over and conduct all meetings of the Board;
 - b. Set a high standard of Board conduct by modeling rules of conduct as set forth in these Bylaws;
 - c. Serve as an ex-officio member of all committees of the Board;
 - d. Establish ad hoc committees, the term of which may not exceed the term of the Chair;
 - e. Propose mission based goals;
 - f. Build cohesion among and between the Board and Chief Executive Officer and to apportion responsibilities;
 - g. Encourage effective Board self-evaluation;
 - h. Facilitate the Chief Executive Officer’s performance evaluation and compensation process;
 - i. Represent and execute the will of the majority of the Board; and
 - j. Perform all of the duties usually pertaining to the office of Chair.
- 3.3 **Vice-Chair.** The Vice Chair shall assume the duties of the Chair in the absence of the Chair.
- 3.4 **Secretary.** The Secretary of the Board shall:
- a. Ensure that the minutes of the meeting are accurate;
 - b. Assume the duties of the Chair in the absence of the Chair and Vice Chair;
 - c. Certify, by signature, upon receipt and approval by the Board of meeting

minutes;

- d. Certify other official papers of the Board as required; and
- e. Perform all other duties usually pertaining to the office of Secretary.

Section 4 - Meetings

- 4.1 **Meetings.** The Meetings of the Board shall be the Annual, Regular and Special meetings. The Board may also conduct joint meetings with its subsidiary and affiliated boards and entities and standing committees. All meetings or portions thereof shall be open to the public unless otherwise provided for by law.
- 4.2 **Annual Meeting.** The Regular Board meeting in September of each year shall constitute the annual meeting of the Board. Officers of the Board shall be elected and the newly elected Officers shall take office at the next Regular meeting. The Chief Executive Officer may cancel and/or reschedule the Annual meeting, upon proper notice to Board members and the public, if it is determined that a quorum will not be present or for other reasons in consultation with the Chair.
- 4.3 **Regular Meetings.** Regular meetings of the Board shall be conducted quarterly. Public notice of each meeting and the date, time and location of same shall be made as required by law. The Chief Executive Officer may cancel and/or reschedule a Regular meeting, upon proper notice to Board members and the public, if it is determined that a quorum will not be present or for other reasons in consultation with the Chair.
- 4.4 **Special Meetings.** The Board may convene Special Meetings. Such Special Meetings shall include but not be limited to:
 - a. **Emergency Meetings.** If a bona fide emergency situation exists, an Emergency meeting of the Board may be called by the Chair, Vice Chair or Chief Executive Officer. An Emergency meeting shall be noticed as time reasonably permits under the situation. All actions taken at an Emergency meeting shall be ratified by the Board at the next Regular meeting. The annual budget and millage shall not be approved at an Emergency meeting.
 - b. **Attorney-Client Meetings.** The Board may conduct closed Attorney-Client meetings pursuant to section 286.011, Florida Statutes, which includes, but is not limited to, to discuss pending litigation when the District and/or one or more of its subsidiary entities is presently a party before a court or administrative agency. The Attorney-Client meeting must be requested in a public meeting of the Board, publicly noticed and conducted consistent with the requirements of section 286.011, Florida Statutes. The Attorney-Client meeting may be combined with other meetings of the Board or held separately. No official business shall be transacted at the Attorney-Client meetings.

- c. **Workshop Meetings.** The Chair, Vice Chair or Chief Executive Officer may call for a Workshop meeting. Public notice of each Workshop meeting shall be given as required by law. No official business shall be transacted at the Workshop meetings.
 - d. **Risk Management Meetings.** At the request of the Chair, Vice Chair or Chief Executive Officer, the Board may conduct closed Risk Management meetings as authorized by law to evaluate claims or offers to compromise claims made against the District and/or one or more of its subsidiary entities. Public notice of each Risk Management meeting shall be given as required by law. No official Board business shall be transacted at the Risk Management meetings.
 - e. **Other Special Meetings.** The Chair, Vice Chair or Chief Executive Officer may call such other Special meetings authorized by and in a manner consistent with law.
- 4.5 **Attendance.** Regular attendance shall be expected for all Board members. If a member misses more than twenty-five percent (25%) of the Regular Board meetings during a twelve (12) month period, the Chair shall advise the appropriate appointing authority.
- 4.6 **Quorum and Procedure.** The presence of a majority of the appointed members of the Board shall be necessary at any meeting to constitute a quorum or to transact business. A quorum is not required for any Special meeting where official business is not to be transacted.
- The Board shall promulgate rules of order for the conduct of all Board meetings. All procedural matters not addressed in said rules of order, or by these Bylaws, shall be governed by the latest edition of “Roberts Rules of Order.”
- 4.7 **Voting.** Actions of the Board require a simple majority of the members present at a given meeting. Each Board member shall have one vote. Except as provided herein for attendance and voting by telephonic or electronic communication, members must be present to vote at a meeting and members may not vote by secret ballot or by proxy or designee. Unless otherwise required by law, matters requiring an affirmative vote of at least four (4) Board members include:
- a. Revisions and/or modification to these Bylaws;
 - b. Engagement or termination of the Chief Executive Officer; and,
 - c. Issuance of General Obligation and/or Revenue Bonds.
- 4.8 **Meeting Minutes.** Minutes of each meeting shall be accurately taken, preserved, and provided to members timely at a regular meeting.
- 4.9 **Agenda and Order of Business for Meetings.** There shall be an agenda for every meeting of the Board. However, the Board is not prohibited from discussing and/or taking action

on an item or matter not specified in the agenda. If an item is added to the agenda after public comment has occurred, public comment should be allowed for the added item if the Board is to take official action on the item and public comment has not previously occurred on the item.

4.10 ***Attendance and Voting by Telephonic or Electronic Communication.*** If a quorum of the Board is physically present at a Board meeting and at the time of a Board vote, other members of the Board may participate and vote by telephonic or electronic communication provided that such members are:

- a. Physically outside the boarders of Palm Beach County; or
- b. Unable to attend the meeting due to illness of the Board member; or
- c. Unable to attend the meeting due to some unforeseen circumstance beyond the Board member's control.

If a quorum is not required for any Special meeting where official business is not to be transacted, a Board member may participate by telephonic or electronic communication without a quorum being physically present at the Special meeting.

The District shall ensure that any telephonic or electronic communication utilized to permit board members to participate and/or vote in a Board meeting is properly amplified or displayed so that all attending the meeting can hear and/or see the board member's comments and/or vote and so that the board member can hear and/or see all other board members' comments and/or votes and the comments of other participants in the meeting.

No Board member may participate by telephonic or electronic communication in the statutorily required public hearings for the adoption of the annual budget or the setting of the annual millage rate.

Notwithstanding the above, if an Executive Order, Florida Statute, or Attorney General opinion permits the ability to meet remotely due to a public emergency, the above requirements shall not be applicable.

Section 5 - Conflicts of Interest

5.1 ***General.*** Board members shall not enter into contracts or agreements that would be or give the appearance of being a conflict of interest.

5.2 ***Conflict of Interest.*** Members of the Board are subject to Florida law pertaining to avoidance of conflicts of interest in holding public office, including but not limited to, Part III of Chapter 112, Florida Statutes, the Code of Ethics for Public Officers and Employees, as well as any and all other applicable standards as set forth by applicable regulatory and accreditation agencies.

- 5.3 ***Prohibited Financial Interests.*** No Board member, administrator, employee or representative of the District, nor any person, organization or agency shall, directly or indirectly, be paid or receive any commission, bonus, kickback, rebate or gratuity or engage in any fee-splitting arrangement in any form whatsoever for the referral of any patient to the District.

Section 6 - Chief Executive Officer

- 6.1 ***Chief Executive Officer.*** The Board shall select, appoint and employ a competent Chief Executive Officer. The authority and duties of the Chief Executive Officer shall be:
- a. Achieving those goals and objectives, and implementing policies and programs established by the Board;
 - b. Ensuring that a comprehensive plan for the efficient delivery of health care services in Palm Beach County is developed and implemented;
 - c. Establish a corporate office in Palm Beach County, Florida, and take such measures as are necessary to establish and assure the efficient operation of such facilities;
 - d. Prepare and submit an annual budget and proposed millage;
 - e. Select, appoint, employ, discipline and discharge all employees authorized by the budget; provided that, the foregoing shall not restrain those employees who owe a fiduciary duty to the Board;
 - f. Supervise all business activities of the District and serve as the Chief Executive Officer or executive director of any District subsidiary entity as set forth in the entity's bylaws;
 - g. Attend meetings of the Board and its committees;
 - h. Make purchases and resolve legal claims as set forth by policy; and
 - i. Perform any and all other duties that may be necessary to serve the best interests of the District.

Section 7 – Committees

- 7.1 ***Committees.*** The Board and/or Chair may designate standing or ad hoc committees necessary to promote oversight of District operations. Except as stated herein, District committees shall be advisory only and shall have no power or authority to act on behalf of the Board or of the District.
- 7.2 ***Standing Committees.*** Standing committees shall have the power to act only as stated in these Bylaws, the committee's Board approved charter or bylaws or as conferred by the

Board. The standing committees of the Board are:

- a. ***Finance and Audit.*** The Finance and Audit committee is responsible for reviewing the short, intermediate, and long range financial plans of the District, which includes reviewing the District's financial statements, the proposed annual budget, amendments to the annual budget, investments, grant compliance, insurance, building construction contracts and leases, revenue cycle oversight, physician compensation and benefits (FMV reports) and employee compensation and benefits. The Finance and Audit committee also reviews competitive purchasing solicitations which are anticipated to exceed \$100,000 in anticipated cost to the District. The Finance and Audit committee is also responsible for the oversight of the internal audit function and the external financial audit.
- b. ***Quality, Patient Safety and Compliance.*** The Quality, Patient Safety and Compliance committee shall assist the Board with accountability for monitoring and oversight of the quality, patient safety, compliance and privacy program, corporate ethics and risk management activities of the District and its affiliated entities and promote an organizational "Culture of Quality". This includes assisting in the oversight of provider credentialing and peer review.

7.3 ***Ad Hoc Committees.*** The Board or Chair may designate ad hoc committees as necessary to assist with short term decisions facing the organization. The ad hoc committees may include, but are not limited to:

- a. ***Governance and Board Development Committee.*** The Governance and Board Development committee may review and recommend revisions to the Bylaws as appropriate, and to recommend the enactment of policies responsive to decisions made by the Board which have a significant and on-going impact on the operations of the District.
- b. ***Chief Executive Evaluation and Compensation.*** The Chief Executive Officer Evaluation and Compensation committee may be responsible for performing an annual performance evaluation of the Chief Executive Officer and recommending to the Board a base pay, incentives and benefits package for the Chief Executive Officer.
- c. ***Nominating Committee.*** The Nominating Committee may be responsible for identifying qualified individuals to serve on subsidiary boards and committees.

7.4 ***General Composition.*** A minimum of two (2) Board members shall be appointed to each standing committee of the Board, one of which will chair the committee. The remainder of the standing committee shall have at least five (5) but no more than nine (9) members. The District Board shall appoint standing committee members to a four (4) year term, commencing on the date of appointment, with standing committee membership limited to two (2) full terms unless otherwise recommended by the standing committee and approved by the Board. The compositions of each standing committee shall be regularly reviewed to

ensure that each member meets the requirements set forth by the Board for that respective committee. Membership on ad hoc committees shall be established by the Board or the Chair.

- 7.5 **Attendance.** Regular attendance shall be expected for all committee members. If a member misses more than twenty-five percent (25%) of the regular committee meetings during a twelve (12) month period, the committee shall advise the Board which may remove the committee member and appoint a new member.
- 7.6 **Standing Committee Charters.** Each standing committee shall create a written charter detailing the standing committee's responsibilities as summarized in these bylaws and addressing all matters related to the administration of the standing committee. Each standing committee shall have the authority to amend its charter from time to time with each approved charter being provided to the Board for informational purposes.

Section 8 – Subsidiary Boards

- 8.1 **Subsidiary Boards.** The Board may create subsidiary boards to assist the District in fulfilling its mission. The Board shall appoint board members to the subsidiary boards as set forth in each subsidiary board's bylaws. Except as approved by the Board, District subsidiary boards shall be advisory only and shall have no power or authority to act on behalf of the Board or of the District.
- 8.2 **General Composition and Attendance.** The general composition and attendance requirements for the District's subsidiary boards shall be set forth in the subsidiary board's bylaws or charters.
- 8.3 **Existing Subsidiary Boards.** The existing subsidiary board is Lakeside Health Advisory. Lakeside Health Advisory Board shall review and monitor the District's delivery of health care services in the Glades community; serve as health care advocates for the Glades community; and, make recommendations regarding the services provided at Lakeside Medical Center and recommendations for health care initiatives in the Glades community.

Section 9 – Subsidiary and Affiliated Entities

- 9.1 **Subsidiary and Affiliated Entities.** The Board may create subsidiary and affiliated entities to assist the District in fulfilling its mission. The Board shall appoint board members to the subsidiary and affiliated entities as set forth in each entity's bylaws.
- 9.2 **General Composition and Attendance.** The general composition and attendance requirements for the District's subsidiary and affiliated entities shall be set forth in the entities' bylaws.
- 9.3 **Existing Subsidiary and Affiliated Entities.** The existing subsidiary and affiliated entities are:

- a. **District Clinic Holdings.** District Clinic Holdings, Inc., is an affiliate entity of the District. District Clinic Holdings is responsible for the governance, management and oversight of the C.L. Brumback Primary & Dental Care clinics including, without limitation, credentialing of all clinic providers. The District Clinic Holdings’ board is vested with all power and authority as directed by federal and state regulations with regards to its responsibilities.

- b. **Good Health Foundation.** The Good Health Foundation, Inc., is a subsidiary entity of the District. The Good Health Foundation is responsible for the governance, management and oversight of donations to support the District’s mission. The Good Health Foundation’s board is vested with all power and authority consistent with general law with regards to its responsibilities.

Section 10 - Miscellaneous

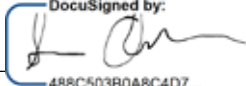
- 10.1 **Amendments.** These Bylaws may be amended, repealed, or changed at any Regular or Special meeting of the Board by the affirmative vote of four (4) members of the Board, provided that notice containing the general effect and intent of the proposed amendments has been given to all members of the Board at least ten (10) days prior to such meeting, which notice may be waived by vote to approve an amendment, repeal or change to these Bylaws.

- 10.2 **Subject to Law and Health Care Act.** All powers, authority and responsibilities provided for in these Bylaws, whether or not explicitly so qualified, are qualified by the provisions of the Health Care Act and applicable laws.

- 10.3 **Construction.** These Bylaws shall be construed to conform with, and when necessary, shall be amended to conform to the provisions of the Health Care Act.

CERTIFICATE

This is to certify that I am the Secretary of the Board of the Health Care District of Palm Beach County and the foregoing Amended and Restated Bylaws were duly adopted by said District Board at a meeting held on the 9th day of June, 2020.

By:  _____

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SEAL OF DISTRICT
Secretary



Health Care District

PALM BEACH COUNTY

