



1411 East 31 st Street  
Oakland, CA 94602

## Alameda Health System Board of Trustees Call for Board Members

**Alameda Health System (AHS)** is currently seeking interested community members to serve on the **Alameda Health System Board of Trustees**.

In order to best meet the health care needs of the residents of Alameda County, the California State Legislature approved in 1998 the establishment of an independent health authority– the Alameda County Medical Center – to provide county health services. In 2014, ACMC was renamed Alameda Health System (AHS) in light of its expansion to include San Leandro and Alameda Hospitals. The formation of the hospital authority was a key step towards delivering on our important role in the community as a safety net provider, an academic training center, and a leader in trauma and specialty services.

The Board of Trustees plays a vital role in advancing the excellence and innovation of our organization in order to lead the organization forward in carrying out its mission and vision. We are seeking dedicated individuals respected in the community, knowledgeable in their field, and interested in and willing to learn about hospital and healthcare-related matters. The Alameda Health System Trustees must have the necessary talent and skill set to consider the issues within the jurisdiction of the Board with a commitment to the organization and the community it serves. As a Trustee, your direction and guidance will benefit the community we serve.

We are particularly interested in and encourage applicants from Alameda County Board of Supervisors, District 1.

If you are interested in joining the Alameda Health System Board of Trustees and are able to meet the qualifications and expectations listed in the attached packet, we strongly encourage you to apply.

If you have any questions, please contact the Clerk of the Board at (510) 535-7515.

Sincerely,

Delvecchio Finley  
Chief Executive Officer  
Alameda Health System

## **Alameda Health System Board of Trustees APPLICATION INFORMATION**

The information below outlines the commitment and qualifications necessary to serve as a Member on the Alameda Health System Board of Trustees.

### **Board of Trustees Composition**

The Board of Trustees shall consist of nine (9) members.

- (1) Seven (7) of whom shall be appointed solely by majority vote of the Board of Supervisors.
- (2) One (1) of the 9 Trustees shall be a representative of the Medical Staff, provided the nominee is appointed by a majority vote of the Board of Supervisors.
- (3) One (1) of the 9 Trustees shall be a member of the Alameda Health District Board of Directors, provided the nominee is appointed by a majority vote of the Board of Supervisors.

### **Terms of Office**

- (1) A full term shall be for a period of three years from the date of the initial Annual Meeting.
- (2) The Board of Supervisors may appoint a number of Trustees to partial Terms of Office calculated from the date of the initial Annual Meeting.
- (3) A Term of Office that is permitted to expire shall create a vacancy absent a determination of the Board of Supervisors to the contrary.
- (4) Trustees may serve more than one term only if recommended by the Board of Trustees and subsequently re-appointed by the Board of Supervisors. No Trustee shall serve greater than three consecutive terms.

**Compensation:** Trustees may authorize the payment of not to exceed two hundred dollars (\$200) per regular or special board or committee meeting, not to exceed four meetings a month as compensation to each member of the Board of Trustees. Trustees shall be reimbursed for actual and reasonable expenses incurred in the performance of official business of AHS assigned by the Board of Trustees.

**Meetings:** Qualified applicants appointed to the Board of Trustees must commit to attend all regularly scheduled and special meetings of the Board of Trustees and Committees on which he or she is appointed. Full attendance is expected at all such meetings.

**General Qualifications:** The Board of Trustees should, to the extent feasible, reflect both the expertise necessary to maximize the quality and scope of care of AHS in a fiscally responsible manner and the diverse interests that AHS serves. Desirable skills include, but are not limited to, business management, public health, health care administration, personnel management and labor relations, medical services, managed care, consensus building, finance, fund raising, and cultural sensitivity.

### **Specific Qualifications**

Qualifications that are desirable in Trustees include the following:

- (1) A familiarity with the health care delivery systems;
- (2) A working knowledge of the existing health care funding sources;
- (3) An understanding of the multitude of issues relating to participating in managed care programs;
- (4) Experience with employee organizations;
- (5) A strong business management, legal, finance and/or program management background;
- (6) Experience with managing hospital services;
- (7) Experience with, or understanding of, the delivery health care services by non-profit entities;
- (8) An interest in or experience with the health care needs of AHS's patient populations;
- (9) Experience in advocating for safety net institutions including, but not limited to, the pursuit of public funding for the delivery of health care services;
- (10) Reside in Alameda County.

**Background Information:** All Trustees must agree to provide historical information regarding their employment and affiliations with health care institutions as well as certain personal data in conjunction with licensing and certification by the California Department of Public Health, Department of Social Services and Centers for Medicaid and Medicare Services or other state/federal agencies.

**Conflict of Interest:** Each member of the Board of Trustees shall be required to execute a "statement of economic interests" in a manner consistent with the Political Reform Act and the Hospital Authority's conflict of interest code.

### **Disqualified Persons**

- (1) Persons who are providers of medical care, or are employed by a provider of medical care, who are or, in the view of the Board of Supervisors, may be in competition with AHS.
- (2) With the exception of the representative of the Medical Staff and the Chief Executive Officer, persons employed by or who are contractors/vendors of AHS or who are employed by a contractor/vendor of AHS.

Except where prohibited by law, any disqualification may be waived by majority vote of the Board of Supervisors.

## **Alameda Health System Board of Trustees APPLICATION**

*Please fill out all information on this form. Print clearly. Use blue ink only.  
If you have any questions, please call the Clerk of the Board at (510) 535-7515.*

### **GENERAL INFORMATION**

Last Name	First Name	Middle Initial	
Home Address	City	State	Zip Code
Home Phone	Cell Phone		
Email Address (required)			
Employer	Title	Work Phone	
Employer Address	City	State	Zip Code

### **BOARD OF TRUSTEES QUALIFICATION CATEGORIES**

I meet the following Board of Trustees specific qualification categories (mark all that apply):

- A familiarity with the health care delivery systems
- A working knowledge of the existing health care funding sources
- An understanding of the multitude of issues relating to participating in managed care programs
- Experience with employee organizations
- A strong business management, legal, finance and/or program management background
- Experience with managing hospital services
- Experience with, or understanding of, the delivery health care services by non-profit entities
- An interest in or experience with the health care needs of AHS's patient populations
- Experience in advocating for safety net institutions including, but not limited to, the pursuit of public funding for the delivery of health care services

**AFFILIATIONS (PLEASE INCLUDE ADDITIONAL PAGES AS NECESSARY)**

- **Are you a provider of medical care or are you employed by a provider of medical care?**
  - If yes, please state the name of the organization providing medical care?
  - What is your role/position with this organization?
  
- **Are you currently a contractor or vendor of Alameda Health System?**  
If yes, please identify the nature or purpose of your contract/agreement with Alameda Health System and the term of your contract/agreement?
  
- **Have you been a contractor or vendor of Alameda Health System within the past 5 years?**  
If yes, please identify the nature or purpose of your contract/agreement with Alameda Health System and the term of your contract/agreement?
  
- **Do you currently receive any type of compensation or item of value from Alameda Health System?**  
If yes, please identify the source of the compensation/item of value and the period for which you are entitled to receive.
  
- **Do you serve as a Trustee, Board member, director, officer, or member of a governing board of any other organization?**  
If yes, please identify the organization, the position you hold and the effective dates of the position.

**APPLICANT RESPONSIBILITIES**

I understand that by submitting this application I certify that:

- (1) I am a resident of Alameda County and at least 18 years old;
- (2) I am agreeing to participate as a Member of the Alameda Health System Board of Trustees;
- (3) I have signed and submitted this Application with the understanding that I will be required to provide personal and employment information to various federal and state agencies, including, but not limited to the California Department of Public Health, the California Department of Social Services, and the Centers for Medicaid and Medicare Services;
- (4) I agree to comply with the laws of the state of California regarding ethical obligations and conflicts of interest.

By checking this box, I certify that all statements made on this application are true and I agree and understand that any misstatements or omissions of material facts may at any time cause forfeiture on my part of all rights of appointment with the Alameda Health System Board of Trustees.

Date:

Signature:

**Mail/deliver your completed application (application form and current resume/curriculum vitae) to:**

**Alameda Health System  
ATTN: Clerk of the Board  
1411 E. 31<sup>st</sup> St  
Oakland, CA 94602**