

SELMA HEALTH CARE DISTRICT

MUNICIPAL SERVICE REVIEW AND SPHERE OF INFLUENCE UPDATE

**Report to the
Fresno Local Agency Formation Commission**

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SELMA HEALTH CARE DISTRICT
Hospital and Health Care Services

Contact Information

Manager: Linda Esquivel
Address: 2251 Country Club Lane
Selma, CA 93662
Phone: (559) 896-6565

Management Information

Governing Body: Board of Directors
Board Members: Stanley Y. Louie Appointed in Lieu of Election 2010-Expires 2014
Colleen Nelson Appointed 2008-Expires2012
Courtney J. Moore Appointed in Lieu of Election 2010-Expires 2014
Vacant Appointed in Lieu of Election 2010-Expires 2014
Fabian Uresti Appointed 2009-Expires 2012
Board Meetings: Quarterly Meetings
Staffing: One part-time administrative secretary

Service Information

Empowered Services: Hospital and Health Care Services
Services Provided: Funding and oversight for educational programs and health and safety related functions
Area Served: City of Selma and surrounding area
Population Served:
Acres Served: 33,979
Infrastructure: None

Fiscal Information

Budget: No Adopted Budget
Sources of Funding: Property Taxes
Rate Structure: Not Applicable

Administrative Policies

Master Plan: No **Policies/Procedures:** Yes **By-laws:** Yes
Boundary Updated: 1969 **SOI Updated:** 2007 **Other:** No

1. MUNICIPAL SERVICE REVIEW

Description of District

The Selma Health Care District was formed in 1969 and operates pursuant to Health and Safety Code, Sections 32000-32492.

The District includes the City of Selma, a portion of the City of Parlier, and primarily agricultural lands in all directions. The District boundaries and Sphere of Influence are not coterminous, as shown on the enclosed map.

The District is governed by a five-member Board of Directors elected at large. The Board of Directors administers the District. Members serve as citizen volunteers. Most District clerical expenses are donated. There is one part-time administrative secretary to assist the board.

District Services and Background

The District once owned and operated a public hospital in Selma that was sold to Adventist Health. The District continues to exist and reports that it has provided grants, funding and oversight of the following:

- 2008 \$320,000 to Selma Hospital for partial purchase of MRI.
- 2009 \$122,640 to purchase a handicapped bus to serve disabled children.
\$15,433 in funding for the Health Education Club at Selma High School.
- 2010 \$134,836 to purchase and ambulance.
- 2011 \$62,000 for a lactation educator at Selma Hospital
\$7,000 for exercise equipment for teens.
\$157,000 for a full-time health educator at Selma High School
- 2012 Pending project – Diabetic educator (Nurse) for Selma Unified
Pending grant – Continued funding for middle school pregnancy prevention.

2. MSR DETERMINATIONS

This portion of the report addresses the factors specified in the governing statute for Municipal Service Reviews.

Growth and Population Projections

District services do not directly affect the rate or location of population growth, other than perhaps through its teen pregnancy education programs.

Location and Characteristics of any Disadvantaged Unincorporated Communities

Disadvantaged communities receive services from the district and directly benefit from the equipment, programs and education services that are funded by the district.

Infrastructure Needs and Deficiencies

The District has no facilities or public service obligations since it no longer owns or operates a hospital or health care facility and the services it provides do not require facilities.

Financial Ability of Agencies to Provide Services

The District does not have an adopted budget. It provides health related services which are funded by property taxes (approximately \$100,000 annually), payments from the City of Selma that is buying a building that the District owned, and by private donations for specific purposes such as supporting the local ambulance services and providing local educational programs. It supplements services provided by the Selma hospital.

Status of, and Opportunities for, Shared Facilities

The District has no facilities and services it provides do not require District facilities

Governmental Structure and Operational Efficiencies

A five-member Board of Directors elected at large governs the District. The Board meets four times a year. Agendas are posted in the main lobby for the district no less than seventy-two hours prior to the meeting.

The District does not maintain a website. The District is a minimal agency reflecting its current lack of obligated services. It is managed by the members of the District governing board.

Dissolution of the District was a possibility, which perhaps could have been considered when the District disposed of the community hospital. However, inasmuch as the District has revised its By-Laws and serves the community in an extremely cost-efficient manner, this option has diminished..

Studying a consolidated or regional approach to provide local hospital and health services is beyond the scope of this Municipal Service Review but may be appropriate and timely for the affected agencies to consider.

3 . SPHERE OF INFLUENCE REVIEW AND UPDATE

Government Code Section 56076 defines Sphere of Influence as “A plan for the probable physical boundaries and service area of a local agency, as determined by the commission.”

Description of Current Sphere of Influence

The District’s Sphere of Influence encompasses approximately 41,062 acres.

Proposed Sphere Changes

The District proposes no changes in its Sphere of Influence or boundaries.

Sphere of Influence Recommendations and Determinations

It is recommended the Commission approve the following determinations and affirm the current Sphere of Influence.

1. Present and planned land uses in the area, including agriculture and open-space.

Land uses within the District are a mix of residential, commercial, industrial, public uses, agriculture and open space. Planned uses include similar designations.

2. Present and probable need for public facilities and services in the area.

The mixture of land uses within the District requires a broad array of public services and facilities. The probable need for services reflects land use plans of the City of Selma and the County.

3. Present capacity of public facilities and adequacy of public service that the agency provides or is authorized to provide.

The District has no health care facilities and provides optimal public services within the constraints of district assets and finances.

4. Existence of any social or economic communities of interest in the area if the Commission determines that they are relevant to the agency.

Territory within the District represents a community of interest for District services.

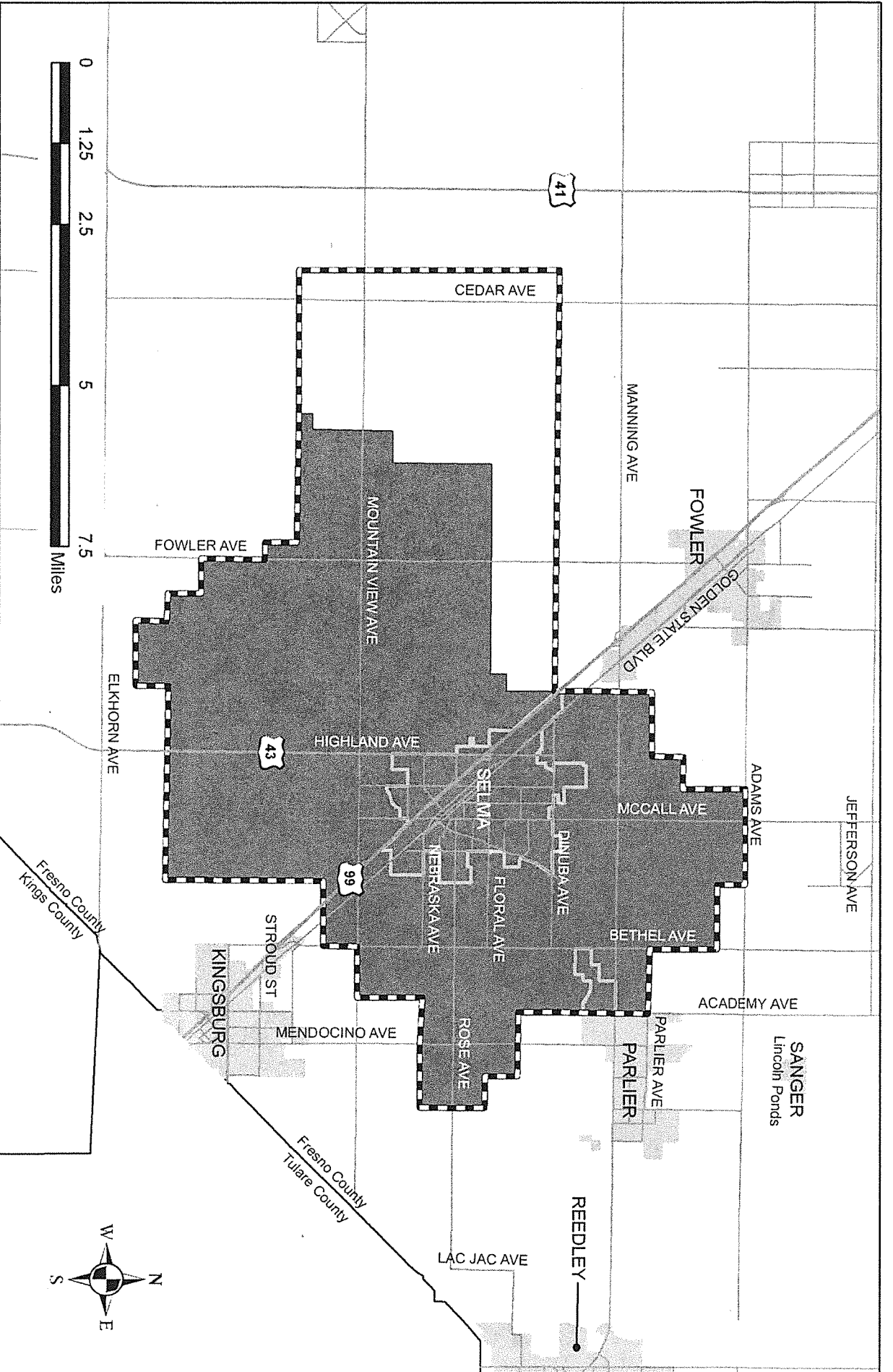
4. ACKNOWLEDGEMENTS & REFERENCES

This draft Municipal Service Review was prepared by Fresno LAFCo staff using information provided by the Selma Health Care District. Responsibility for any errors or omissions rests with those who provided information for the report.




5. RECOMMENDATIONS

In consideration of information gathered and evaluated during the Municipal Service Review, it is recommended the Commission:

1. Accept public testimony regarding the proposed Municipal Service Review.
2. Approve the recommended Municipal Service Review determinations, together with any changes deemed appropriate.
3. Approve the recommended Sphere of Influence determinations and affirm the current Sphere of Influence.



Legend

-  District SOI
-  District Area
-  City Areas

**Fresno Local Agency Formation Commission
Selma Health Care District**

District Formed: 1969
 SOI Adopted: 05/19/1976
 SOI Updated: 10/10/2007

Map Date: November 2007
 District Area: 33,979 Acres
 Sphere Area: 41,062 Acres