



North Sonoma County Healthcare District

**North Sonoma County HealthCare District
Regular Meeting of the Board of Directors**

CALL TO ORDER

- a. The Board of Directors of the North Sonoma County Healthcare District met in person at 1381 University Avenue, Conf. Room 1, 2nd Floor, Healdsburg, CA and via Zoom Teleconference. Chair, Hector Galvan called the meeting to order at 4:06 PM.
- b. Board Clerk, Juliana Dougan called the roll. The following Board members were present constituting a quorum:

Hector Galvan, Chair
Sue Campbell, Vice-Chair/Board Treasurer - Remote
David Anderson, MD – Director
Erin Gore, Member at Large – Director
Brian Callahan, Director

Also present: **Richard Pio Roda, Esq.**, District Counsel

Guests: **Dana Codron**, Sr. Dir. Community Health Investment, Providence
Michelle Oxford, CAO, Healdsburg Hospital, Providence
Ryan Berry, Executive Director of Construction, Providence

Chair Galvan asked if there were any conflicts in regard to the Agenda. There were none. Chair Galvan asked if there were any public comments. There were none.

REGULAR BUSINESS

1. Consent Calendar

- February 27, 2025 Regular Meeting Agenda
- January 30, 2025 Regular Meeting Minutes
- January 31, 2025 Financial Statements

Chair Galvan asked if there were any comments on the items on the Consent Calendar. There were none. Directors Campbell and Gore suggested that the Community Board and Community Benefit Committee Reports can be removed from the agenda as Ms. Michelle Oxford and Ms. Dana Codron will be presenting this evening. Mr. Richard Pio Roda’s presentation will be moved up on the agenda prior to the Strategic Planning discussion.

Chair Galvan called for a motion. Director Gore MOVED to approve the Consent Calendar. Director Campbell SECONDED the motion. The roll call vote was as follows:

Vote: Anderson: Y; Campbell: Y; Galvan: Y; Callahan: Y; Gore: Y. The motion was approved 5-0.

2. Discussion / Informational: Community Health Update, Healdsburg Hospital, Providence



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Ms. Dana Codron provided her annual report (July 1-June 30). Also, her presentation was structured as a refresher for new Board members. The presentation was made part of the Board packet.

Ms. Codron outlined the six facilities she supports as well as mobile units within those communities as well as regulatory reporting requirements. Additional oversight is provided by the Community Benefit Committee. Director Gore sits on that Committee as well as community experts and representatives from the hospital. Compliance with the Healdsburg Hospital Bylaws is also required.

CHNA (Community Health Needs Assessment) and CHIP (Community Health Improvement Plan) initiatives were discussed. These initiatives are addressed every three years and pull data from various sectors of the community. Community engagement is then practiced based on the assessed needs. The strategic plans for both CHNA and CHIP were approved at the end of 2023. These plans will be revisited at the beginning of 2026. The areas of focus are:

- Behavioral Health and SUD
- Access to Health Care and Dental Services
- Homelessness & Housing Insecurity
- Older Adults Health and Well-being (Sonoma is the 2nd oldest county in the bay area)

The Community Benefit Committee invested \$759,140 in FY24. The grant budget for Healdsburg Hospital is \$500K for CY24. Since the grant cycle is not based on fiscal year, the amount budgeted is closer to \$759K.

The 2023-2024 Fiscal Year financials, based on an approved IRS metrics shows a Medicare shortfall of \$4.8M.

A second mobile dental clinic will be operating soon and Ms. Codron will provide an update on those encounters during her next update.

Ms. Codron described the CARE network which is made up of registered nurses, social workers and clinical health workers that care for high-risk individuals. Approximately 90% of these encounters are performed in a clinic environment. In addition to the mobile clinics, there are also pop-up clinics where screenings can be done, and lastly, Providence offers 'street medicine' where clinicians visit unhoused individuals, encampments or housing units in need of care. These clinicians are all bilingual, and these visits are pre-arranged. All patient information is put into EPIC. There is no charge for these encounters. Most of these individuals are assigned to an FQHC, but feel more comfortable receiving care at a mobile clinic.

Ms. Codron next reviewed the new grantmaking cycle which begins in January with receiving applications, and funds distributed between July and December.

The Board thanked Ms. Codron for her presentation.



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3. Discussion / Informational: Healdsburg Hospital Quarterly Operations and Capital Investment Report and Seismic Retrofit Analysis

Ms. Michelle Oxford introduced Mr. Ryan Berry, Executive Director of Design and Construction, Providence, to discuss the Seismic Retrofit plan and associated cost for Healdsburg Hospital. SB 1953 mandates seismic compliance by January 1, 2030. Two components: SPC which is the skeletal structure of the building and NPC which is the utilities and equipment components of the building which primarily focuses on bracing equipment down in case of a major seismic event.

NPC has different intervals of when tasks need to be completed, the next occurring on March 1, 2026. Regarding SPC, the main hospital is out of compliance with a rating of 2. The preferred rating for SPC is 5 and NPC is 4-5. Regarding NCP, all the buildings need retrofit. In addition to bracing all the equipment, water storage tanks need to be put in place with a water supply of 72 hours as well as gas to keep the generator operational.

The estimated budget to retrofit the Hospital is between \$8-10M. Dr. Jed Weissberg asked if the Hospital would remain operational during remediation. Mr. Berry assured the remediation would be performed in stages to assure the Hospital remained fully operational. Healdsburg Hospital poses the lowest risk of all the facilities that Providence is retrofitting. Budget planning is underway to support hiring a general contractor, etc.

Ms. Oxford presented the Quarterly Operations and Capital Investment Report. The Hospital is performing relatively well. It continues to be financially impacted with Kaiser not reimbursing for care provided. Expenditures have continued to be controlled, and expenses are down across the board.

Volumes are stable. There has been a slight increase in length of stay mainly due to the flu season. Productivity has a goal of 100%. The Hospital is currently measuring at almost 107%. Inpatient, outpatient and the surgical units are all performing well. The emergency department is rating the highest of all Northern California Providence facilities.

Ms. Oxford reviewed the current administrative activities that she is involved in, including upcoming completion of emergency department traffic control – to be completed in three months. She has several community awareness engagements lined up over the next few months. Meetings are being held between Ms. Oxford and the Alliance Medical Center as well as the Petaluma Health Center to understand what services are not being made available. Providence entered into a contract with Radia Imaging to assist with the backlog of radiology readings. There is still a need to staff-up in orthopedics, gastroenterology, cancer, and cardiology as well as primary care.

4. Legal Report

Mr. Pio Roda recently presented at a symposium at Berkeley Law to cover two policy changes to the Department of Justice memorandum related to local law enforcement regarding immigration enforcement.



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The Board is a public agency, with Healdsburg Hospital being a federally funded hospital. These changes directly affect the Hospital as well as elected officials supporting the Hospital. Mr. Pio Roda encourages Ms. Oxford to review this presentation.

Key takeaway issues include:

- ICE coming into the communities to enforce immigration commands.
- In 2017 Healdsburg declared itself similar to a sanctuary city under the California Values Act.
- Key DOJ mandate is allowing US Attorney's Offices to investigate state and local actors' noncompliance for potential prosecution.
- If any elected official which includes the NSCHD Board interferes with ICE activities occurring at the Hospital, those officials can be restrained and federally prosecuted.
- It is against California law for hospitals to share any patient immigration status to law enforcement.
- Law enforcement guarding a patient is under similar restrictions regarding providing immigration status, personal information, etc., to ICE officials without a judicial warrant. There is no mandated cooperation, with a few exceptions, among others:
 - Serious or violent felonies;
 - Human trafficking, child abuse and gang-related offenses
 - Terrorism investigation.
- Mr. Pio Roda would like to understand more pertaining to the amount of federal grants that the Hospital receives. When information is asked of Hospital staff, legal counsel suggests not cooperating.
 - Shut down computers when requests for personal information are received; staff is not required to re-boot computers or provide passwords. Federal warrants, signed by a judge, are required to access systems.
 - Do not stop or hinder other law enforcement actions.
 - ICE detention warrants are not criminal warrants.
- There is legislation in place in the 9th Circuit supporting the rights of state and local agencies to reject federal efforts in this regard. Additionally, \$25M has been set aside to defend the state against these federal enforcement actions.
- During the first Trump administration, 123 lawsuits have been filed to defend the State.

There is a February 5, 2025, DOJ memorandum that refers to nonprofits that receive federal funds and support unhoused and undocumented citizens. Mr. Pio Roda will provide that to Ms. Dougan for distribution to the Directors. The memorandum suggests that the DOJ may be investigating organizations that receive those funds, and may cut-off those funds if it is found that support is being provided to undocumented individuals/families.

Director Campbell, as the Community Board representative, will reach out to Ms. Oxford to determine what role the Hospital is taking on in this regard. Ms. Dougan will isolate Mr. Pio Roda's presentation



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and provide it to Ms. Campbell to support her conversation with Ms. Oxford. Alliance Medical Center also has a seat on the Community Board and would benefit from this information.

Mr. Pio Roda also shared that DOGE/ICE imposters are entering places of business to enforce unwarranted actions against undocumented citizens. There is an instructional document from the California Attorney General that Mr. Pio Roda will also share which outlines steps to take if approached by ICE agents.

Director Galvan and the Board thanked Mr. Pio Roda for his presentation.

5. Discussion / Informational: Finance Update

Director Callahan reported that the budget was approved last month and was published. The budget is currently on-track.

The grant monies were transferred to the Healthcare Foundation this week.

6. Discussion / Informational: Grant Committee Update

Director Callahan reiterated that the grant monies were forwarded to the Healthcare Foundation for the CalAIM Coalition. Sutter Health is also potentially contributing \$200K to add to the funds.

The Grant Committee published a final report on the progress made with the Healdsburg Multi-Cultural Center which was made a part of the Board packet.

Ms. Ramirez suggested that the Board may be able to assist in reaching out to the Healdsburg City Council for support in their efforts.

The next Grant Committee meeting is canceled.

Director Gore asked the Board if they supported her suggestion that the Healdsburg Board play more of a role in the Grant Committee and Community Board in the decision making. The Board agreed. Director Gore suggested that we place this matter on the March agenda. Director Campbell also suggested that Director Gore work with Ms. Susan Lentz regarding these efforts. Director Callahan also agreed to join Ms. Gore during these discussions.

7. Discussion / Informational: Hospital Matters

- **Community Board Meetings**

Director Campbell had nothing additional to report.

- **Quality Committee**

Director Campbell had nothing additional to report.

- **Community Benefit Committee**



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Director Gore reported that there was a legal presentation of the impact of Medicaid for the Hospitals with regard to the Trump Administration's DOGE activities. Any impact on Medicaid could affect the support from the Benefit Committee to the Hospitals. Director Gore suggested that the Board invite a representative from Providence to describe the impact and how the Hospitals are planning.

8. Discussion / Possible Action: Regarding District Housekeeping

• Future Agenda Items

- Ordinance to reflect the District office move in March
- Revisit Strategic Planning at April meeting
- Strategy of how to have a stronger role in the Community Board meetings
- Invite Providence to discuss impact of Medicaid as a result of Administration DOGE activities.
- Botanical Bus presentation in May

9. Share other meetings attended by Board Members

Director Anderson reported that on February 28, the Harm Reduction Task Force will be handing out Narcan to the homeless communities that visit St. John's and St. Paul's parishes at no cost.

There is an upcoming event honoring Dr. Ed Neal who will be turning 94. He was instrumental in establishing Healdsburg Hospital.

10. Consideration of Materials Disseminated by Board Members.

There was none.

11. Discussion / Informational / Action: Strategic Planning for 2025

Director Gore discussed the proposed activity based on the materials distributed in the Board packet as pre-read as well as the discussion and brainstorming session that occurred in October 2023, where the current strategic initiatives were formulated. Director Gore shared a word cloud that was generated from the Healdsburg, Windsor and Cloverdale listening sessions. There are a lot more factors to consider with recent focus on immigration, aging, racism, etc.

The majority of the Board was unable to review all of the pre-read, as well as two directors needing to leave the meeting at 6:00 pm. It was decided to postpone the Strategic Planning exercise until the April Board meeting.

Director Gore offered to summarize the pre-read materials to make it easier for the Board to focus on current issues/opportunities. Director Campbell will assist in this document as she is familiar with all of the reports. The Board agreed that brainstorming the issues was effective last time. Director Gore will try to have the summary and potentially additional materials available for the March Board packet to provide as pre-read for the April Board meeting.

12. Chair Galvan adjourned the meeting at 6:02 PM.