



## NOTICE OF SPECIAL MEETING OF THE BOARD OF DIRECTORS

### MENDOCINO COAST HEALTH CARE DISTRICT

Monday, September 9, 2024 - 3:00 PM

Redwoods Room, Adventist Health Mendocino Coast Hospital Campus,  
700 River Drive, Fort Bragg, CA.

Supporting documentation for this agenda is available at:

<https://www.MendocinoChCd.gov/>

Individuals who need this agenda in an alternative format or who need a disability-related modification or accommodation in order to participate in the meeting should contact the District at 707-937-3089 at least 72 hours prior to the meeting. The Board reserves the right to maintain meeting decorum, mute or remove a member of the public for inappropriate behavior which is disruptive. This Board Meeting is being held in person. Meeting attendees may also join virtually using the Zoom link below.

Join Zoom Meeting

<https://zoom.us/j/9210401893?pwd=SE9PY1JBNUZvSEVIYotYnM9iTdhzdzo9&omn=93494019922>

Meeting ID: 921 040 1893

Passcode: 634678

### CONDUCT OF BUSINESS

#### 1. OPEN SESSION

1a) Roll Call: Paul Garza Jr., Chair, Paul Katzeff, Vice Chair, Susan Savage, Secretary, Sara Spring, Treasurer, Jan McGourty, Member.

#### 2. PUBLIC COMMENT FOR ITEMS ON THE AGENDA

Members of the public are welcome to address the Board on items listed on the agenda, and within the jurisdiction of the Board. Time is limited to 3 minutes per speaker with a 20-minute total time limit for all public comments. No action or discussion shall be taken on any item presented except that the Board or staff may respond to statements made or questions asked, or may ask questions for clarification. All matters of an administrative nature will be referred to staff. All matters pertaining to the Board may be scheduled for discussion at a future meeting or referred to staff for clarification or a report, at the pleasure of the Board. If general public comment exceeds the 20 minute time limit, members of the public who have not had the opportunity to speak on items not on this agenda will have the opportunity to do so after the business on the agenda is concluded.



### 3. CONSENT CALENDAR

The Consent Calendar will be acted upon by the Board at one time without discussion. Any Board member may request that any item be removed from the Consent Calendar for individual consideration.

#### ITEMS RECOMMENDED FOR APPROVAL:

3a) Appointment of Mikael Blaisdell to the Standing Planning Committee.

### 4. REGULAR CALENDAR

4a) Receive and consider approval of Board response to a Mendocino County Grand Jury Report, dated June 12, 2024, entitled, "MENDOCINO COAST HEALTH CARE DISTRICT - Sick, but Returning to Health", Chair Garza.

Recommended Action: Approve the draft Board response to the Grand Jury report for submission to the Mendocino County Grand Jury, due September 12, 2024.

Attachments: *Response Transmittal for the Mendocino County Grand Jury Report, dated June 12, 2024, entitled, "MENDOCINO COAST HEALTH CARE DISTRICT - Sick, but Returning to Health"*.

4b) Receive and file the Capital Expenditure Report update, CFO Wayne Allen.

Recommended Action: None. This item is for information only

Attachments: *Capital Expenditure Report Update*

### 5. ADJOURNMENT

The next Regular Meeting of the Board will be held on September 26, 2024, at 6:00 pm, at the Redwoods Room, 700 River Drive, Adventist Health Mendocino Coast Hospital, Fort Bragg, Ca.

Dated: September 6, 2024

A handwritten signature in black ink that reads "Katharine D. Wylie".

Katharine D. Wylie, MS Ed.  
Agency Administrator  
Mendocino Coast Health Care District



Item 4a)

September 9, 2024

Mendocino County Grand Jury  
501 Low Gap Road  
Ukiah, CA 95482

Members of the Grand Jury:

The Mendocino Coast Health Care District has received the 2023-2024 Mendocino County Grand Jury's Report, titled "*MENDOCINO COAST HEALTH CARE DISTRICT Sick, but Returning to Health*"

The Board has considered the report with attention and regard for the work the Grand Jury has done on behalf of our community, and with gratitude for the time each of the esteemed members of the Grand Jury has spent thoughtfully considering the ways in which the District can improve.

The Grand Jury's report highlighted crucial issues affecting our community's healthcare. We take these findings seriously and are committed to transparency, integrity, and accountability. We've engaged expert consultants, initiated Board discussions, and are actively working with stakeholders to address the recommendations. Most of the recommendations have significant merit, and we plan to implement them as detailed in our response. We appreciate the Grand Jury's efforts to help us improve our healthcare operations on the Mendocino Coast.

Sincerely,

Paul Garza Jr., Chair  
MCHCD Board

encls



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**Grand Jury Report  
REQUESTED RESPONSE FORM**

**Grand Jury Report Title :** “MENDOCINO COAST HEALTH CARE DISTRICT  
Sick, but Returning to Health”

**Report Dated :** June 12, 2024

**Response Form Submitted By:** Paul Garza Jr., Chair, Mendocino Coast Health Care District Board

**I have reviewed the report and submit my responses to the FINDINGS portion of the report as follows:**

I (we) agree with the Findings numbered:

F1-F5, F7-F13, F15-F20.

I (we) disagree wholly or partially with the Findings numbered below, and have *attached* a statement specifying any portions of the Findings that are disputed with an explanation of the reasons therefore.

F6, F14.

**I have reviewed the report and submit my responses to the RECOMMENDATIONS portion of the report as follows:**

The following Recommendation(s) have been implemented, and **attached as requested** is a summary describing the implemented actions:

R1, R2, R6-R9, R13, R14.

The following Recommendation(s) have not yet been implemented, but will be implemented in the future; **attached as requested** is a time frame for implementation:

R3-R5, R10-R12, R15-R17.



GRAND JURY REPORT  
REQUESTED RESPONSE FORM  
PAGE TWO

*I have completed the above responses, and have attached as requested the following number of pages to this response form:*

Number of Pages attached: 10 pages

I understand that responses to Grand Jury Reports are public records. They will be posted on the Grand Jury website: [www.mendocinocounty.org/government/grand-jury](http://www.mendocinocounty.org/government/grand-jury). The clerk of the court is required to maintain a copy of the response.

*Please submit this signed response form and any attachments as follows:*

**First Step:** E-mail (word documents or scanned pdf file format) to:

- The Grand Jury Foreperson at: [grandjury@mendocinocounty.gov](mailto:grandjury@mendocinocounty.gov)
- The Presiding or Supervising Judge: [grandjury@mendocino.courts.ca.gov](mailto:grandjury@mendocino.courts.ca.gov)
- Please also send a courtesy copy to: The County's Executive Office:  
[ceo@mendocinocounty.gov](mailto:ceo@mendocinocounty.gov)

**Second Step:** Mail all originals to:

- Mendocino County Grand Jury  
P.O. Box 939  
Ukiah, CA 95482

Printed Name: Paul Garza Jr., MCHCD Board Chair

Signed: \_\_\_\_\_

Date: September 9, 2024



Pursuant to California Penal Code § 933 and 933.05, the Civil Grand Jury requests each entity or individual named below to respond to the enumerated Findings and Recommendations within specific statutory guidelines.

## FINDINGS

We disagree wholly or partially with Findings 6 and 14.

### Finding 6

All meeting Agendas and Meeting minutes of Regular Board meetings are available to the public on the district's website. Information for the 2020 and 2021 years are consolidated into large files that contain all information for that year. The district staff intends to separate these files by month, for ease of accessibility to the public.

### Finding 14

The MCHCD Board held a series of seven community engagement forums throughout the district this year, on March 26, Westport Fire Station; April 2 (English) and April 4 (Spanish), Fort Bragg Town Hall; April 10, Caspar Community Center; May 15, Mendocino; May 22, Comptche; and June 25, Elk. A summary of meeting feedback from those community listening sessions is attached to this report response. The Board also hosted a Community presentation on May 31, 2024, where community health data was presented and discussed. A second Community health presentation is scheduled for September 6, 2024, at Fort Bragg Town Hall.

## RECOMMENDATIONS

### Recommendation 1

The recommendation has been implemented. The ad hoc Policy/Bylaws committee has created a draft update of the Board Bylaws, currently under review by Board Counsel, and scheduled for approval at the September Regular Board meeting. Updated Board Bylaws will be posted at the District's website, <http://MendocinoChCd.gov/>.

### Recommendation 2

The recommendation has been implemented. The ad hoc Policy/Bylaws committee has added a training requirement for Board members. The draft update of the Board Bylaws, currently under review by Board Counsel, is scheduled for approval at the September Regular Board meeting.

### Recommendation 6

The recommendation has been implemented. A 'Did you know' social media campaign is underway with regular information posted to the public. The Agency Administrator and Board



chair are exploring ways that the board may reach out to the public for input, including convening additional listening sessions and regular board meetings throughout the district's boundaries. A copy of social media postings is attached to this response.

#### Recommendation 7

The recommendation has been implemented. The board has conducted seven community listening sessions (summary of feedback is attached), and plans to continue public outreach sessions and convene regular board meetings throughout the district, beginning in January 2025.

#### Recommendation 8

The recommendation has been implemented. Since professional Regional Government Services staff was contracted, Board Meeting Agendas and Board Meeting minutes have been published according to the requirements of the Ralph M. Brown Act.

#### Recommendation 9

The recommendation has been implemented. The Board has contracted with two professional consulting firms, Regional Government Services, (December, 2023), to provide professional Agency Administrative services, and Silverton Financial Management Services (February, 2024), to act as the Chief Financial Officer for the district. A longer-term staffing options study is in progress for Board consideration when planning the next Fiscal Year Budget.

#### Recommendation 13

The recommendation has been implemented. The Board chair has convened a 2030 Hospital working group composed of community members, with a responsibility to make recommendations for board consideration and action, concerning seismic upgrade of the hospital facility and possibilities for increased access to outpatient services.

#### Recommendation 14

The recommendation has been implemented. District consultants have provided updates to the District's website that provide more information and better site navigation to district information.

Recommendations that have not yet been implemented, but will be implemented in the future, with a time frame for implementation:

#### Recommendation 3

The recommendation has not been implemented. The ad hoc Policy/Bylaws committee will consider additional policies re: IT and Security before the end of this calendar year. The board





has approved policies re: Conflict of Interest, Internal Controls, Investment of Funds, Credit Card Use, Records Retention, Purchasing, Accounts Receivable, and Code of Ethics. All board policies may be found in both English and Spanish at:

<https://www.mendocinohcd.gov/board-policies>

#### Recommendation 4

The recommendation has not been implemented. The board will consider updated mission and vision statements in a strategic planning session, after receiving public input, when the new board is seated after the November elections, and post any updates to the district's website.

#### Recommendation 5

The recommendation has not been implemented. The board has contracted with DZA Auditors for completion of the 2020-21, 2021-22, 2022-23, and 2023-24 Fiscal year audits. The CFO estimates the audits for Fiscal year 2020-21 to be completed by the end of this year, and the remaining fiscal year audits to be completed in the first 1/2 of the 2025 calendar year.

#### Recommendation 10

The recommendation has not been implemented. The Agency Administrator and Board chair are exploring ways that board members may encourage board members to receive continuing education on the responsibilities of the administration of the district through various trade organizations.

#### Recommendation 11

The recommendation has not been implemented. The Agency Administrator and Board chair are exploring ways that board members may receive continuing education on the responsibilities of the administration of the district through various trade organizations. A new Board orientation will be scheduled immediately after the elected directors are seated.

#### Recommendation 12

The recommendation has not been implemented. The Agency Administrator and the CFO are exploring ways that board members may receive continuing education on the responsibilities of the fiscal administration of the district. A public board budget workshop is planned for January 2025, possibly in conjunction with new Board member orientation.

#### Recommendation 15

The Board chair is gathering information to bring before the board, in consultation with Regional Government Services staff and the 2030 Hospital team, to establish a process for creation of a facilities plan. RGS staff will assist the board in establishing a process to negotiate any changes to the lease agreement



#### Recommendation 16

The recommendation has not been implemented. The Board chair is gathering information together with the 2030 Hospital team to bring before the board, for the creation of a 5-year strategic plan for the district in the first quarter of Calendar year 2025.

#### Recommendation 17

The recommendation has not been implemented. Regional Government Services staff are developing an onboarding process that outlines the expectations, roles and responsibilities of Board Members.

The District Board and staff wish to extend our appreciation and gratitude for the Grand Jury's attention to these important matters of this district.



## Summary of Information Received at MCHCD Community Meetings

The Mendocino Coast Health Care District (MCHCD) is focused on supporting thriving, health communities on the Coast by ensuring continuous, accessible, high quality, sustainable healthcare.

In Spring 2024, MCHCD Directors held a series of Community Meetings with the goal of connecting with Coast residents and hearing their priorities and needs for quality healthcare on the Coast.

Over 50 residents attended one of the seven Community Meetings held in Elk, Caspar, Comptche, Fort Bragg (2 meetings), Mendocino, and Westport. Primary concerns shared with the Board were around geriatric care and, from the Latino community at the Fort Bragg bi-Lingual meeting concerns were about family care.

The below common themes highlight the community's primary concerns regarding healthcare on the Mendocino Coast.

### Common Themes and Comments:

#### 1. Healthcare Accessibility and Specialist Care

- Overall concern about the availability of specialist care (e.g., cardiologists, neurologists, urologists).
- Emphasis on the need for accessible healthcare services and shorter wait times for appointments.

#### 2. Transportation Challenges

- Significant issues with transportation for medical appointments.
- Need for rideshare options, HandiVan services, and better ambulance services.

#### 3. Support for Medical Staff

- Need for more doctors, nurses, and trained personnel.
- Housing difficulties for medical professionals.
- Importance of retaining medical staff and reducing reliance on locum tenens (temporary) professionals.

#### 4. Financial Support and Resources

- Financial support needed for emergency services and medical facilities.
- Interest in bond measures and finding additional funds to support healthcare services.

#### 5. Community Engagement and Communication

- Importance of community involvement in healthcare planning.
- Need for better communication and information about healthcare services, particularly in Spanish.

#### 6. Holistic and Preventive Health Initiatives

- Interest in Blue Zones initiatives to promote healthy lifestyles.
- Emphasis on preventive care and holistic health approaches, including diet and exercise.

#### 7. Barriers to Good Health

- Transportation and access to food as major barriers.
- Lack of fresh vegetables in local stores, and difficulty accessing prescriptions and medical services.
- Importance of public awareness campaigns to educate about healthcare resources and safety.

The MCHCD Board appreciates those residents who attended the Community Meetings and looks forward to holding more in the near future.

## MCHCD Did You Know? Proposed Posts and Timing

1. New Staff – 3 times in August



Last month, Adventist Health Mendocino Coast, our partner in providing quality healthcare on the coast, welcomed Dr. Mauricio Heilbron, MD, Cathy Boyle, PCPNP-BC and Caroline Wells, PA-C, to our team!

Dr. Heilbron brings extensive experience and expertise in general, trauma, and vascular surgery, making him a valuable addition to our healthcare family. With over 26 years of dedicated service in the medical field, Dr. Heilbron specializes in both General and Vascular Surgery. We are honored to have Dr. Mauricio Heilbron with us, dedicated to delivering outstanding surgical care, personalized treatment plans, and compassionate attention to every patient.

Cathy Boyle is a board-certified pediatric nurse practitioner specializing in pediatric care and forensic nursing. We're honored to have Cathy on our team! Her expertise, extensive experience, and commitment to her patients, she will be an invaluable addition to our provider team at Adventist Health Mendocino Coast Medical Offices.

Caroline Wells holds a Masters of Medical Science in Physician Assistant from Emory University School of Medicine and a Master of Public Health in Community Health Education from the University of North Carolina at Greensboro. Caroline's dedication to her field is evident through her certifications and memberships, which include the Collaborative Institutional Training Initiative (CITI) and memberships in professional organizations such as the American Academy of Physician Assistants (AAPA), Georgia Association of Physician Assistants (GAPA), and American Public Health Association (APHA).

2. Instagram – 4 times throughout August

## DID YOU KNOW?

**MENDOCINO  
COAST HEALTH  
CARE DISTRICT  
IS ON  
INSTAGRAM!**



Follow us on Instagram at @MendocinoCoastHCD today!

3. Training Programs – 3 times throughout the month of August.

## DID YOU KNOW?

**ADVENTIST  
HEALTH OFFERS  
MEDICAL ASSISTANT  
TRAINING  
PROGRAMS**



Earlier this month Adventist Health Mendocino Coast, our partner in delivering quality healthcare on the coast, celebrated another graduating class from their COPE Medical Assistants training program! Are you interested in becoming a Medical Assistant and making a difference for our community? Learn more about our COPE Program today here: <https://ahlink.org/4cWkwuS>

4. Measure C – Once a week for the month of August

## DID YOU KNOW?

**MEASURE C  
DOLLARS BOUGHT  
OUR NEW  
AMBULANCE!**



The funds levied by 2018's Measure C parcel tax were used to purchase a new ambulance! This ambulance will help emergency services get to patients faster in emergencies, ensuring quicker response times and better care when you need it most. Our community's safety is MCHCD's priority, and this new addition is a huge step forward in serving our rural community.

5. Community Benefit – Once a week for the month of August

## DID YOU KNOW?

**THE SCALE  
OF ADVENTIST  
HEALTH'S  
COMMUNITY  
BENEFIT**



In 2022, Adventist Health, MCHCD's partner in providing healthcare on the coast, provided:

- \$67.5 million in charity care
- \$25.5 million in community health improvement
- \$28.8 million in education and research
- \$287.9 million in Medicaid
- \$442.2 million in Medicare
- \$206.4 million subsidized health services
- \$1.058 billion total

Learn more: [adventisthealth.org/mendocino-coast/about-us/community-benefit/](https://adventisthealth.org/mendocino-coast/about-us/community-benefit/)

- District – Every other week for the month of August

## DID YOU KNOW?

**MCHCD  
SPANS THE  
COAST FROM  
ROCKPORT  
TO ELK**



The Mendocino Coast Health Care District, formed in 1967, was created to support thriving healthy communities along the Coast. MCHCD owns and oversees the property and buildings of our hospital to ensure continuous, accessible, high-quality health care. Learn more about the district at [MendocinoCHCD.gov](http://MendocinoCHCD.gov)

- Hiring – Every other week for the month of August

## DID YOU KNOW?

**ADVENTIST  
HEALTH  
MENDOCINO  
COAST  
IS HIRING**



Learn more about the exciting career opportunities at Adventist Health Mendocino Coast!  
<https://ahlink.org/4c8SWtl>

- Monthly Meetings – Twice a month through the end of the year



## DID YOU KNOW?

**MCHCD  
HOLDS A  
PUBLIC BOARD  
MEETING  
EVERY MONTH**



Find information on our monthly meetings at [MendocinoCHCD.gov](http://MendocinoCHCD.gov) or follow us on Instagram at @MendocinoCoastHCD and on Facebook at @MendocinoCoastHealthCareDistrict

9. Benefit Sponsorships – Every other week for the month of August

## DID YOU KNOW?

**ADVENTIST  
HEALTH OFFERS  
COMMUNITY  
BENEFIT  
SPONSORSHIPS**



Adventist Health, MCHCD's partner in providing healthcare to the coast, provides sponsorships to support projects and programs that address mental health, substance use or domestic abuse. Learn more: [adventisthealth.org/mendocino-coast/about-us/community-benefit-sponsorship/](http://adventisthealth.org/mendocino-coast/about-us/community-benefit-sponsorship/)



Mendocino Coast Health Care District  
 Improvements Fund/Measure C Budget  
 Fiscal Years ending 06-30-2025 to 06-30-2029  
 Prepared: WCA 09-02-2024

**CapEx Purchases:**

See Footnote 1:

Total Capital Expenditures per AH 07-01-2020 to 08-15-2024	\$7,146,549	
Total Actual		\$7,146,549
AH Budget FYE 06-30-2025	\$4,435,286	
AH Budget FYE 06-30-2026	\$4,435,286	
AH Budget FYE 06-30-2027	\$4,435,286	
AH Budget FYE 06-30-2028	\$4,435,286	
AH Budget FYE 06-30-2029	\$4,435,284	
Total Budget		\$22,176,428
Total CapEx Purchases		<u>\$29,322,977</u>

**Funding Sources:**

	<u>Total</u>	<u>Measure C</u>	<u>MCHCD</u>
Opening Balance 07-01-2020	\$1,322,934	\$1,322,934	\$0
MCHCD/Measure C Deposits 07-01-2020 to 06-30-2024	\$10,398,154	\$6,295,251	\$4,102,903
Sub-Total	<u>\$11,721,088</u>	<u>\$7,618,185</u>	<u>\$4,102,903</u>

**Add:**

MCHCD/Measure C Budget FYE 06-30-2025	\$3,520,378	\$1,550,000	\$1,970,378
MCHCD/Measure C Budget FYE 06-30-2026	\$3,520,378	\$1,550,000	\$1,970,378
MCHCD/Measure C Budget FYE 06-30-2027	\$3,520,378	\$1,550,000	\$1,970,378
MCHCD/Measure C Budget FYE 06-30-2028	\$3,520,378	\$1,550,000	\$1,970,378
MCHCD/Measure C Budget FYE 06-30-2029	\$3,520,377	\$1,550,000	\$1,970,377
Sub-Total	<u>\$17,601,889</u>	<u>\$7,750,000</u>	<u>\$9,851,889</u>

Total CapEx Funds	<u>\$29,322,977</u>	<u>\$15,368,185</u>	<u>\$13,954,792</u>
Distribution %		52%	48%

Footnote 1: Per Judy Leach email dated 08-15-2024, "Attached is the list we shared with you during the call pertaining to capital projects completed and building projects in progress along with building repairs totaling \$7,146,549. Payment has been made by AH for each of these items." **Both lists are attached.** Furthermore, I have been advised by Ms. Leach that **another request list will be sent by September 6, 2024.**

Mendocino Coast Health Care District  
Statement of Annual Projected Cash Flow- 5 Years  
FYE 06-30-2025 thru FYE 06-30-2029  
Revised: June 27, 2024 (Board Approved)

9/2/2024  
Yellow Bold  
Revised

**Sources of Cash:**

	FYE 06-30-25	FYE 06-30-26	FYE 06-30-27	FYE 06-30-28	FYE 06-30-29	TOTAL	
Measure C- expires June 30, 2030 (1)	\$1,550,000	\$1,550,000	\$1,550,000	\$1,550,000	\$1,550,000	\$7,750,000	
District Tax Receipts	\$1,050,000	\$1,050,000	\$1,050,000	\$1,050,000	\$1,050,000	\$5,250,000	
AH Lease Payment (+2% annual CPI begins FYE 06-30-2027)	\$1,750,000	\$2,950,000	\$3,009,000	\$3,069,180	\$3,130,564	\$13,908,744	
Total Sources	\$4,350,000	\$5,550,000	\$5,609,000	\$5,669,180	\$5,730,564	\$26,908,744	\$26,908,744

**Uses of Cash:**

CapEx/Deferred Maintenance & Replacement Expenditures - Lease Improvements Fund (+2% annual CPI) and Measure C Parcel Tax Revenue Account	\$2,251,024	\$2,296,044	\$2,341,965	\$2,388,805	\$2,436,581	\$11,714,419	\$17,601,889
Revenue Bonds- Refinanced 2016 (2)	\$462,550	\$564,750	\$561,500	\$562,250	\$561,750	\$2,712,800	\$2,712,800
HELP II Loan (3)	\$165,624	\$165,624	\$165,624	\$165,624	\$12,250	\$674,746	\$674,746
Total Uses	\$2,879,198	\$3,026,418	\$3,069,089	\$3,116,679	\$3,010,581	\$15,101,965	\$20,989,435
Cash Available for Distribution	\$1,470,802	\$2,523,582	\$2,539,911	\$2,552,501	\$2,719,983	\$11,806,778	\$5,919,309

**Less Distributions:**

Restricted Capital Fund	\$870,802	\$2,173,582	\$2,189,911	\$2,202,501	\$2,369,983	\$9,806,778	\$3,919,309
District Operations Budget	\$600,000	\$350,000	\$350,000	\$350,000	\$350,000	\$2,000,000	\$2,000,000
Total Distributions	\$1,470,802	\$2,523,582	\$2,539,911	\$2,552,501	\$2,719,983	\$11,806,778	\$5,919,309

<b>Restricted Capital Fund</b>							
	Beginning Balance July 1, xxxx	\$13,243,000	\$14,775,952	\$17,577,511	\$20,426,579	\$23,139,745	
ADD: Current Year Distribution		\$870,802	\$2,173,582	\$2,189,911	\$2,202,501	\$2,369,983	\$9,806,778
Investment Income (5.00%,4.25%,3.75%,2.50%,2.50%)		\$662,150	\$627,978	\$659,157	\$510,664	\$578,494	\$3,038,443
LESS: Expenditures		\$0	\$0	\$0	\$0	\$0	\$0
	Ending Balance June 30, xxxx	\$14,775,952	\$17,577,511	\$20,426,579	\$23,139,745	\$26,088,221	\$19,875,752

(1) Sunset provision of 12 years and must be used for voter mandated purposes. Expires year ending June 30, 2030.

(2) Paid Off - June 2029

(3) Paid Off - August 2028

<b>Capital Spend</b>	2020	2021	2022	2023	2024	Grand Total
1.1 ED - Med Room - Flooring			4,223			4,223
3.1 Radio System		30,364				30,364
3.2 Ambulance			191,976			191,976
4.2 Regulatory/Deferred Maintenance Investigation	155,649	94,381	24,135			274,165
4.5 Med Air Replacement	10,885	119,825	108,544	941,207	12,201	1,192,661
4.6 Fire Sprinkler Pipe Issues	19,810	5,800	18,001			43,612
4.7 PSB - Roof & HVAC Replacement		2,128	314,341	58,800		375,269
4.8 3D Mammography - Installation only		1,064	163,032			164,096
4.9 Roof - Main Hospital Repairs			57,040			57,040
4.11 AHMC Lobby Flooring			132,722			132,722
4.12 Oncology Flooring			60,480	4,420		64,900
4.14 ER Waiting, Front Lobby, PT & Lab		258,498				258,498
4.15 PSB - Flooring				153,455		153,455
4.17 Hot Water Heater		1,925	18,591	2,428		22,944
4.18 Zoll Defibrillators (7)	170,540			0		170,540
4.19 Regulatory/Deferred - Generator Maintenance			55,466			55,466
4.23 Furniture (Registration, ER Waiting, Front Lobby, PT, Lab, ICU)		111,090				111,090
4.25 Platelet Agitator			10,051			10,051
5.1 Surgery - (2) ESU Machine (2 Force Triad Ligasure)		29,898				29,898
5.2 Surgery - Waste Device		41,903				41,903
5.4 CSS/OR HVAC	75,530	350,894	17,387			443,812
5.5 Sterile processing feasibility study		44,850	10,640			55,490
<b>Closed Assets</b>	<b>432,414</b>	<b>1,092,620</b>	<b>1,186,630</b>	<b>1,160,310</b>	<b>12,201</b>	<b>3,884,174</b>

<b>Capital In Progress</b>	2020	2021	2022	2023	2024	Grand Total
1.2 ED HVAC (South and Center 3 Units) & ED Lobby			370	2,904	83,298	86,572
4.4 Auto Transfer Switch	215,153	232,665	157,111	230,947	84,242	920,118
4.1 Fire Roll-Down Door Upgrades (4)			23,660	13,667	60,907	98,234
4.16 Pharmacy Fridge Replacement Project					22,017	22,017
4.21 PSB Areas - Flooring						-
4.22 Patient Care Areas - Flooring				16,000	49,545	65,545
4.24 Vacuum Pump Replacement					450	450
4.26 Ice Makers			26,391	13,995	17,783	58,170
4.27 AHMC Lab Equipment Replacement			26,322	5,576	127,157	159,056
5.3 OR & Surgical Area Flooring						-
5.6 Sterile Processing Dept. Renovation, (No Rental)				5,808	8,092	13,900
	<b>215,153</b>	<b>232,665</b>	<b>233,854</b>	<b>288,897</b>	<b>453,491</b>	<b>1,424,061</b>
4.1 Building Repairs (Impacted - I/S)	117,872	178,632	853,870	467,223	220,716	1,838,314
<b>Total Capital Spend</b>	<b>765,438</b>	<b>1,503,917</b>	<b>2,274,355</b>	<b>1,916,430</b>	<b>686,409</b>	<b>7,146,549</b>



## AHMC / MCHCD - Facility Project - Planning 2024-29

Project Start Date Scheduled	Duration / Completion	HCAI Permit Required	Reoccurring Annual Cost	Area / Dept.	Project Description	Detailed Justification	Estimate Project Cost	AH Project Management & Staff Support of Project (AH Labor Cost 10%)	Total Project Estimate Cost
2023	2023	No		Main	TV Replacement - 25	Replace failing TV's in MedSurg & ICU	\$12,500	\$1,250	\$13,750
2024	2024	No		BioMed	18 Umano Hospital Beds	Bed Replacement, Patient Safety	\$180,000	\$18,000	\$198,000
2024	2024	No		BioMed	Alaris Infusion Pumps	Patient Safety, EMR, Pharmacy, Patient Continuity	\$242,214	\$24,221	\$266,435
2024	2024	Yes		Main	Fan coil replacement repair TJC finding airflow	TJC Finding for Airflow	\$750,000	\$75,000	\$825,000
2024	2024	TBD		Utility	Vacuum Pump - Retrofit	Vacuum Pumps are past end of life. Electrical issues. Original est. \$500k	\$500,000	\$50,000	\$550,000
2024	2024	Yes		OR	Ultrasonic Cleaner - CSS	Equipment Failure - Required for functional OR	\$27,500	\$2,750	\$30,250
2024	2024	No		OR	GI Lab, OR's, and OR Hallway Area Flooring	Infection Control / Compliance	\$80,375	\$8,038	\$88,413
						End of Life (EOL) - 2024 Storm Failure to Transfer during outage. No Power in ED / Lab in January 2024			
2024	2025	Yes		Utility	ED / Lab - ATS (Automatic Transfer Switch)		\$750,000	\$75,000	\$825,000
2024	2025	Yes		BioMed	Nurse Call System - add to Private ED Hallway Exam Room	Compliance, Patient Safety	\$5,000	\$500	\$5,500
2024	2025	Yes		Lab	Clinical Lab Equipment - Level 1 (Critical Instruments)	Replace End of Life, High Maintenance cost Equipment	\$668,423	\$66,842	\$735,265
2024	2029	No	Yes	Facility	Electrical IR Panel Survey - Annual	Compliance Testing - Annual 18k per year	\$90,000	\$9,000	\$99,000
2024	2024	No		PSB	Redwoods - Conference Room	R & R Carpet	\$8,770	\$877	\$9,647
2024	2024	No		Facility	Exit Sign Replacement - Life Safety	Replace failing incandescent exit signage with Non-Battery LED	\$12,000	\$1,200	\$13,200
2024	2025	No		Facility	Window Repairs / Replacement - Main Hospital	Degraded well past usable life of frames	\$250,000	\$25,000	\$275,000
2024	2025	No		Plant	Plumbing Leaks - Central Plant	Copper Piping Leaks at multiple locations	\$175,000	\$17,500	\$192,500
2024	2025	No		Main	Plumbing Leaks - Main Hospital	Copper Piping Leaks at multiple locations	\$75,000	\$7,500	\$82,500
2024	2025	Yes		Lab	Electrical - Add outlets for Lab Refrigerators / Freezers	Multiple pieces of Clinical Refrigeration Equipment single circuit breakers	\$100,000	\$10,000	\$110,000
2024	2025	No		Utility	IT Server Room - HVAC (AJ Gray)	Split HVAC system is not reliable, NO supplemental cooling	\$25,000	\$2,500	\$27,500
2024	2025	No		Main	MedSurg - Bathrooms 25	Infection Control / Compliance	\$15,900	\$1,590	\$17,490
2024	2025	No		PSB	Oncology - Exam Rooms & Bathrooms	Infection Control / Compliance	\$19,500	\$1,950	\$21,450
2024	2025	No		Main	MedSurg Staff / Nurses Breakroom Lockers	Install additional Lockers and refresh the Staff	\$5,500	\$550	\$6,050
						Ongoing Door replacements as identified during inspections, Staff entrance, Old OB as examples			
2024	2025	No		Facility	Door Replacement - Failed Exterior / Interior Damaged		\$100,000	\$10,000	\$110,000
2024	2025	No		PSB	PSB - Restroom Flooring	Infection Control - Cracked Flooring	\$25,000	\$2,500	\$27,500
2024	2025	No		Facility	Painting Exterior - Old OB, DI, MedSurg	Lifecycle - Exterior patching and Paint	\$48,000	\$4,800	\$52,800
2024	2025	Yes		Main	Walk-in Shower Med Surg	Patient & Nurse Safety	\$50,000	\$5,000	\$55,000
						Integrate bed alarms and nurse call for patient safety and fall prevention, existing panels will be upgraded			
2024	2025	No		BioMed	Nurse Call System - Updates to Integrate Beds "Alarms"		\$25,000	\$2,500	\$27,500
2024	2025	Yes		Main	MedSurg - Pantry - Repairs	Repair / replace casework and FFE to create a compliant space for food service	\$50,000	\$5,000	\$55,000
2024	2025	Yes		Facility	Exhaust Fans - Roof	Repair / replace existing rooftop exhaust fans at EOL	\$150,000	\$15,000	\$165,000
2024	2029	Yes		Facility	CCTV System & Door Access "Security"	Safety & Security of staff & patient	\$729,417	\$72,942	\$802,359
2024	2025	Yes		Main	Therapy Tub - Removal	Tub is not used or compliant	\$4,500	\$450	\$4,950
2024	2026	Yes		Pharmacy	HVAC - Pharmacy	End of Life 2025	\$50,000	\$5,000	\$55,000
						One Fluoroscopy room or CT which can also provide x-ray examination required in Main Hospital required by Title 22			
2024	2029	Yes		Main	Radiology Compliance Issues		\$25,000	\$2,500	\$27,500
2024	2029	Yes	Yes	Facility	Generator PM's - Annual	Emergency Power Compliance & Safety \$74.1k per year	\$370,500	\$37,050	\$407,550
2025	2025	No		Facility	Fire Damper Testing - 5 Year	Compliance Testing	\$18,500	\$1,850	\$20,350
2025	2025	No		DI	MRI Lighting Upgrade	Existing Incandescent lamps are no longer available, Upgrade to Direct Current LED	\$15,000	\$1,500	\$16,500
2025	2025	TBD		Facility	Roof replacement Portions of Main Building and ED	Ongoing leak repairs of old roof	\$300,000	\$30,000	\$330,000
2025	2025	TBD		Main	Rain Gutter - Replacement - Main Hospital	Leaking gutters aren't diverting the water as required. Impact of safety and roof	\$50,000	\$5,000	\$55,000
2025	2025	No		OR	DI Hallway - Flooring	Infection Control / Compliance - Sheet is cracking down the center of the hallway	\$60,000	\$6,000	\$66,000
2025	2025	Yes		Facility	Electrical - add charging locations for Medical Equipment	Power Taps (Strips) are not a substitute for permanent power.	\$75,000	\$7,500	\$82,500
2025	2025	No		DI	MRI Zone 3 wall and access control	Secure access to MRI Zone 3 & 4 as required for Compliance	\$25,000	\$2,500	\$27,500
2025	2025	No		Main	Doctors Lounge - Flooring & Refresh	Medical Staff - Infection Control / Compliance	\$10,000	\$1,000	\$11,000
2025	2025	No		AJ Gray	Ambulance Quarters - Flooring	Remove Carpet & Install Plank Flooring	\$18,500	\$1,850	\$20,350
2025	2025	No		BioMed	Nihon Kodan - OPS / ED / OR	Patient Safety & Continuity of Care, EMR Intergration	\$223,290	\$22,329	\$245,619
2025	2026	Yes		Facility	IT Infrastructure / Paging System Equipment	EMR update will require this to be completed	\$1,975,000	\$197,500	\$2,172,500
2025	2026	Yes		Main	Electrical - E-Power / Emergency Lighting - MedSurg	No permanent	\$450,000	\$45,000	\$495,000
2025	2026	No		Kitchen	Kitchen - Tile Flooring - Seal or replace	Infection Control / CDPH / TJC Standards	\$40,000	\$4,000	\$44,000
2025	2029	Yes		Facility	Electrical - Main Breaker / Distribution - Update	Existing service is over 50 years old, reliability, code compliance issue	\$2,500,000	\$250,000	\$2,750,000
2025	2025	Yes		Facility	Fire Alarm System - Retrofit to DI / Main	DI panel is showing signs of failure. Hard reboot required for trouble issues	\$45,500	\$4,550	\$50,050
2025	2025	No		PSB	Automatic Door - Oncology / Physical Therapy	ADA Compliance, Patient Experience	\$20,000	\$2,000	\$22,000
						Outdated signage does not reflect the current configuration of entrances & Departments, Does Not comply with ADA standards			
2025	2025	No		Facility	Wayfinding Signage - Update - Interior / Exterior		\$120,000	\$12,000	\$132,000
2025	2025	No		Grounds	Courtyard - Sidewalks and tiles	Sidewalks and tiles are pushed up from roots and trees, Trip / Fall Hazards	\$37,500	\$3,750	\$41,250
2025	2026	No		Grounds	Helipad - Painting - Compliance	Safety of Aircraft & Public	\$10,000	\$1,000	\$11,000
2025	2026	Yes		Grounds	Helipad - Lighting - Compliance	Safety of Aircraft & Public	\$150,000	\$15,000	\$165,000

2026	2029	TBD	Facility	Parking Lot & Walkways - Main Hospital / ED - Safety	Trip / Slip / Fall Risk	\$2,500,000	\$250,000	\$2,750,000
2026	2027	No	Kitchen	Kitchen - Walkin Refrigerator / Freezer	Door Seals and defrost issues	\$60,000	\$6,000	\$66,000
2026	2029	Yes	Kitchen	HVAC - Kitchen	Poor ventilation - No heating or cooling in the Kitchen	\$1,665,000	\$166,500	\$1,831,500
2026	2029	No	DI	MRI Scanner - Replace	End of Life (EOL), Excessive downtime, Patient Care issue	\$2,000,000	\$200,000	\$2,200,000
2026	2029	No	DI	CT Scanner - Replace	End of Life (EOL), Excessive downtime, Patient Care issue	\$2,000,000	\$200,000	\$2,200,000
2026	2029	TBD	Grounds	Staff Walkway & Pave trash compactor / truck area	Safety of Staff	\$49,500	\$4,950	\$54,450
2027	2028	Yes	Facility	Suspended (Drop) Ceiling - Compliance Issues	T-Bar bent / damaged, in large areas ceiling tiles have been painted and/or damaged, Paint isn't fire rated, NO opening larger than 1/8" permitted.	\$80,500	\$8,050	\$88,550
2028	2028	Yes	Kitchen	Dishwasher Replacement	Repair cost exceeds threshold for replacment	\$42,000	\$4,200	\$46,200
<b>Totals</b>						<b>\$20,160,389</b>	<b>\$2,016,039</b>	<b>\$22,176,428</b>