



NOTICE OF REGULAR MEETING OF THE BOARD OF DIRECTORS

MENDOCINO COAST HEALTH CARE DISTRICT

Thursday, February 27, 2025 - 5:00 PM

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

Supporting documentation for this agenda is available on the website 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. This Board Meeting is being held in person and virtually, in accordance with the Brown Act, using the Zoom link below:

<https://zoom.us/j/98146064736?pwd=oPeARFKTkb5LupVLkXTest4fAb4HGF.1>

Meeting ID: 981 4606 4736

Passcode: 541701

CONDUCT OF BUSINESS

1. CALL MEETING TO ORDER

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

2. PUBLIC COMMENT FOR ITEMS NOT ON THE AGENDA

Members of the public are welcome to address the Board on items not listed on the agenda, but within the jurisdiction of the Board. Time is limited to 5 minutes per speaker with a 20-minute total time limit for public comments. No action or discussion shall be taken on any item presented except that the Board 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, at the discretion of the Chair. Members of the public may send email to the board at: info@mendocinochcd.gov or leave a phone message at (707) 202-5228. The Board Chair may mute or remove anyone disrupting the meeting with inappropriate behavior. The meeting will conclude at 9:00pm. Any unfinished business will be carried over to a subsequent meeting.



3. CLOSED SESSION

3a) Gov. Code §54956.8: Conference with Real Property Negotiators, 700 River Drive, Fort Bragg, Ca.

District Negotiators: Wayne Allen, Chief Restructuring Officer, MCHCD.

Negotiating party: Eric Stevens, President, Northern California Network, Adventist Health.

Under negotiation: Terms of the Lease Agreement, dated July 1, 2020.

3b) Gov. Code §54956.8: Conference with Real Property Negotiators, 721 River Drive, Fort Bragg, Ca.

District Negotiators: Appointed District *ad hoc* Subcommittee and legal counsel.

Negotiating parties: GL Bruno, Agent, Mendocino Coast Medical Plaza, LLC.

Under negotiation: price and terms of payment.

3c) Gov. Code §54956.9(d)(4): Conference with Legal Counsel: Initiation of Litigation One (1) potential case.

Public Comment

3d) Report out from Closed Session.

OPEN SESSION - 6:00 pm.

4. REPORTS

4a) Receive and file February 2025 MCHCD Board Chair's Report - Paul Garza Jr.
Recommended Action: None. This item is for information only.

Attachments: *February 2025 MCHCD Board Chair's Report.*

4b) Receive and file Adventist Health Mendocino Coast Hospital Report - Jeff Mock, Operations Executive, Adventist Health Network.

Recommended Action: None. This item is for information only.

4c) Receive and file February 2025 Agency Administrator's Report - Katharine Wylie.
Recommended Action: None. This item is for information only.

Attachments: *February 2025 Agency Administrator's Report.*

Public Comment



5. NEW BUSINESS

5a) Receive and file Check Register Report - 1/31/25; Actual vs. Budget Report - 1/31/25; Treasury Bill Inventory Portfolio - 1/31/25; and Summary of Cash Balances - 1/31/25 - CFO Wayne Allen.

Recommended Action: Accept and file Check Register Report - 1/31/25; Actual vs. Budget Report - 1/31/25; Treasury Bill Inventory Portfolio - 1/31/25; and Summary of Cash Balances - 1/31/25.

Attachments: *Check Register Report - 1/31/25; Actual vs. Budget Report - 1/31/25; Treasury Bill Inventory Portfolio - 1/31/25; and Summary of Cash Balances - 1/31/25.*

Public Comment

5b) Receive and consider approval of Adventist Health Mendocino Coast Hospital Capital Expense Reconciliation Report dated 7/1/2020 through 1/31/2025, recognizing \$4,283,815 of additional CapEx purchases and a cash transfer of \$667,141 from the Operations Fund into the Improvements Fund - Peter Johnston Adventist Health Mendocino Coast Hospital Facilities Manager, CFO Allen, Agency Administrator Wylie

Recommended Action: approve Adventist Health Mendocino Coast Hospital Capital Expense Reconciliation Report, dated 7/1/2020 through 1/31/2025, recognizing \$4,283,815 of additional CapEx purchases and a cash transfer of \$667,141 from the Operations Fund into the Improvements Fund.

Attachments: *Adventist Health Mendocino Coast Hospital Capital Reconciliation Expense Report, dated 7/1/2020 through 1/31/2025.*

Public Comment

5c) Receive and consider adoption of the Board Mission Statement revision, dated 2/17/2025 - Agency Administrator Wylie.

Recommended Action: Adopt the Board Mission Statement revision, dated 2/17/2025.

Attachments: *Board Mission Statement revision, dated 2/17/2025.*

Public Comment

5d) Receive and consider adoption of the Board Bylaws amendment, dated 2/27/2025 - Agency Administrator Wylie.

Recommended Action: Adopt amended Board Bylaws dated 2/27/2025.

Attachments: *MCHCD Board Bylaws amendment, dated 2/27/2025.*

Public Comment



6. 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:

- 6a) Draft Minutes of the 1/23/2025 Regular meeting.
- 6b) Draft Minutes of the 2/17/2025 Special Board Workshop meeting.
- 6c) Savings Bank Resolution 2025-4 to obtain district bank statements.

Public Comment

7. COMMENTS FROM THE BOARD

8. ADJOURNMENT

The next Regular Meeting of the Board will be held on March 27, 2025, at 5:00 pm, at the Redwoods Room, 700 River Drive, Adventist Health Mendocino Coast Hospital, Fort Bragg, Ca.

Dated: February 24, 2025

Katharine D. Wylie

Katharine D. Wylie
MCHCD Agency Administrator

MENDOCINO COAST HEALTH CARE DISTRICT
775 RIVER DRIVE, FORT BRAGG 95437

MEMORANDUM

TO: MCHCD Board of Directors
FROM: Paul Garza, Jr.
DATE: February 27, 2025
SUBJECT: Monthly Report

MEDICARE/MEDI-CAID FUNDING

The future of our hospital may be at risk from potential cuts in federal spending. Our hospital receives, like nearly all rural hospitals throughout the US, a large amount of its reimbursement for services from Medicare/Medicaid. While pledges have been made that no reductions will occur to Medicare (the program for Seniors), no such pledges have been made regarding Medicaid (the program that serves low-income and disabled individuals). California's Medi-Cal program is funded 60% by federal funds. This may seem high but most States actually receive 80% of their reimbursement for services to low-income individuals from federal funds.

It is estimated that the termination of Medicaid could cost California \$100 Billion. California's Medi-Cal program and State resources would not be able to cover such a reduction. Our hospital receives roughly 78% of its reimbursement from Medicare, Medicaid and Medi-Cal. Therefore, any reduction in funding of Medicare/Medi-caid at the federal level is a serious threat to the future viability of the hospital. I urge all of our citizens of our community to learn more and voice your concerns to federal elected officials.

For more information about the impact of these potential reductions, please visit our website where we have non-partisan analysis from the American Hospital Association, the California Health Care Foundation and other sources. We will continue to track this very closely.

ADVENTIST HEALTH LEADERSHIP

Adventist Health has announced several leadership changes in our region. Most significantly, Mr. Jeff Mock, formerly the Chief Financial Officer for the region, has been appointed as the Chief Operations Officer for the region. While transitions can take time to work through, I would observe that communication between the District and Adventist Health has significantly improved since the change. We are hopeful this will continue and grow.

HOSPITAL FACILITY PLANNING

The Board of Directors are seeking the broadest public participation in our process to determine the best alternative for facility seismic retrofit, modernization and upgrade. As an important part of that, it was our intention to appoint several citizens to our Planning Committee to closely assist with this process. We have learned that anyone appointed to a Standing Committee by our Board is subject to the Ralph M. Brown Opening Meetings Act. This means they would be very limited in any communication with each other outside of meetings. On the agenda this evening is a proposed By-Laws change that will remove the appointment of public members to Board Committees; this is not intended to reduce public participation but rather to enable it.



To: MCHCD Board of Directors

From: Katharine Wylie, MS Ed.

Date: 02/27/2025

Subject: Agency Administrator's Report

MARCH 2025 MEETINGS

March 10, 2025 - 1:00 pm	Planning Committee Mtg (tentative)
March 17, 2025 - 1:00 pm	Measure C Oversight Committee mtg
March 27, 2025 - 5:00 pm	Regular MCHCD Board Meeting

Local Ambulance Update:



The district added a new 2024 Merz ambulance for \$218,994, bringing the fleet to five. Two are on duty 24/7, with others activated as needed. Thank you to the tax-payers of this District!



This month, the district also sold two surplus ambulances at public auction (<http://govdeals.net/>):

- A 2007 Ford, sold for \$1,803, now serving a volunteer fire department in Brawley.
- A 2013 Sprinter, sold for \$6,850, headed to the Manteca area.

The total from these sales is \$8,653 and checks will be deposited to the District Tri-Counties bank account mid-March. I would like to extend a special thanks to Davey Beak, Adventist Health Mendocino Coast Hospital, for coordinating the sales and pickups.

Board Mission Statement Revision

The Board held a special workshop on February 17, 2025, to reconsider its mission statement. Before affiliating with Adventist Health, the District operated Mendocino Coast District Hospital and home healthcare services.

In 2020, a 30-year lease allowed Adventist Health Mendocino Coast (AHMC) to take over hospital operations. Now serving as a landlord rather than an operator, the Board has revised its mission statement and will review it for approval tonight. The draft MCHCD Board Mission statement is:

MCHCD provides a hospital and fosters leadership, advocacy and collaboration for our community health and well-being.

The Board discussed the District's vision and will review a draft vision statement for adoption in a future meeting. The draft MCHCD Board Vision statement is:

MCHCD facilitates exceptional, compassionate and accessible healthcare to our community through a hospital, and ensures access to both traditional and modern care, while fostering leadership, advocacy and collaboration to enhance Community Health and well-being.

GETTING THE LAST CHAPTER RIGHT

A COMMUNITY FORUM: ESSENTIAL INFORMATION TO CONTINUE TO LIVE OUR LIVES AT HOME

TOPICS WILL INCLUDE

- Legal & Estate Issues
- Access to Medical Care
- Getting Help at Home
- Home Health & Hospice
- The Legal Right to Death with Dignity
 - Home Safety
- Coping with Isolation & Loneliness
- Grief & Caregiver Support Groups
- Options for Funeral Plans

FREE TO ALL



Lunch Included

Donations Appreciated

APRIL 5, 2025

9 a.m. – 4 p.m.

Caspar Community Center

“BOOK” NOW!

www.friendsofhealthmendocino.org

[/upcoming-events](#)

For help with booking, or more information
call Ellen at 707-357-1738

www.friendsofhealthmendocino.org
EMAIL: foh@mcn.org



Friends of Health
on the Northern Mendocino Coast

Est. 1988, we are an all-volunteer, tax exempt non-profit 501(c)(3) State of CA #1634055

Community Outreach & Engagement

With the help of Madelyn Grigsby (Props & Measures) I looked into community engagement efforts across 17 Health Care Districts in California. About half of those districts have active community engagement initiatives, and just under half (about 8) have active social media accounts. The community engagement efforts we found fall into three main categories: Events, Classes and Sponsorships. It is important to note that most of these districts operate their community hospitals, making some of these events and classes easier to plan given existing resources at the District's disposal.

Director Finley will be asking the board to consider formation of an ad hoc committee with a goal of increasing community engagement by uniting community organizations, to understand their roles and needs, and identify service, funding, or staffing gaps in food, transportation, and health.

PRA Cost Report

Per Director request, research into a public records act request is ongoing, and I will issue a report soon.

Facilities Planning Process

Assuming approval of the Bylaws at tonight's meeting, the Planning Committee will restart meetings in March and resume work on seismic retrofit plans. The next meeting is tentatively set for March 10, 2025 - 1:00pm, Redwoods Room, AHMC Hospital.



Maternity Care in California

Below are my notes from a February 26, a CalMatters zoom meeting with Asm. Mia Bonta:

Maternity care in California faces a crisis, with a recent state report revealing that every five days, a person in the state dies from pregnancy-related complications. Since 2012, at least 56 labor and delivery wards have closed across both rural and urban areas, leaving 12 counties without any maternity services. These closures have disproportionately impacted low-income and Latino families, who are more likely to live in areas with limited access to maternity care. Additionally, Black women in California experience a maternal mortality rate three to four times higher than their counterparts, highlighting the racial disparities in healthcare.

Several factors contribute to the growing number of maternity care closures. One of the most significant issues is California's low Medi-Cal reimbursement rate for obstetric services, the lowest in the country. Medi-Cal pays for half of all births in the state, making funding a crucial factor in the survival of maternity wards. Declining birth rates also pose a challenge, as low volume can lead to safety concerns when providers do not perform enough deliveries to maintain expertise. Workforce shortages further exacerbate the problem, with eight counties already lacking a licensed OB-GYN and projections indicating a shortage of 1,100 obstetricians by 2030. Additionally, regulatory and financial challenges make it difficult for birth centers to operate, with only four licensed centers remaining in the state. The licensing process is notoriously complicated, often taking years to complete.

Racial and economic disparities further complicate maternity care access. Black and Latino communities are 20% more likely to lose their local maternity ward, and systemic racial bias in healthcare has led to worse birth outcomes for women of color. Research has shown that when patients receive care from providers who share their background and language, trust and health outcomes improve. However, the healthcare workforce remains largely homogenous, further deepening inequities. The overworked and underpaid nature of the healthcare system, especially in the post-COVID era, has also driven many professionals out of the field, worsening access to quality maternity care.

To address these issues, policymakers have introduced various legislative measures. In the past year, two bills aimed at slowing maternity ward closures were introduced, one of which was signed into law. These bills focused on requiring hospitals to provide advance notice before shutting down maternity services, allowing policymakers to intervene when possible. This year, additional efforts include clarifying emergency medical treatment laws for pregnant women, expanding access to over-the-counter birth control, and introducing AB 8055, which seeks to increase the number of birth centers by easing licensing barriers. Some policymakers also advocate for regional maternity care models, such as a "hub and spoke" system, to improve accessibility.



Workforce challenges remain a key concern, with efforts underway to improve conditions for healthcare workers. Recent legislation raised the minimum wage for healthcare employees to \$25 an hour, acknowledging the critical role they play in patient care. Investments in education and training programs are also being made to build a stronger pipeline for OB-GYNs, midwives, and doulas. However, the healthcare workforce still struggles with burnout, long hours, and the inability to afford living near their workplaces, further complicating retention and recruitment efforts.

Looking ahead, California must take urgent action to address maternity care access. Expanding funding for hospitals and birth centers, improving workforce diversity, and ensuring fair wages for healthcare professionals are essential steps toward building a more equitable system. Without these changes, more maternity wards will continue to close, putting pregnant individuals and their babies at risk. The future of maternity care depends on proactive policy measures and a commitment to addressing the systemic barriers that have led to the current crisis.

Threats to Medicare and Medicaid are on two tracks

House Republicans narrowly passed a budget resolution with major tax cuts and spending reductions, including \$2 trillion in federal cuts. It directs the House Energy and Commerce Committee to find \$880 billion in savings, potentially affecting Medicare and Medicaid. **The bill is not final**—both chambers must negotiate a final version. The next major hurdle is the Energy and Commerce Committee, followed by a House vote, where a few Republican defections could block it.

Medicare and Medicaid face two major threats:

1. Government Funding Deadline (March 14) – Potential cuts to hospital funding, telehealth, rural health care, and more.
2. 2026 Budget Plan – Possible reductions in Medicaid funding, wage adjustments for high-cost areas, changes to payment policies, and cuts to hospital support programs, which could severely impact California hospitals.

ACalifornia Hospital Association Report:

<https://calhospital.org/congress-must-protect-patient-care/>

American Hospital Association Report:

<https://www.aha.org/system/files/media/file/2025/01/AHA-2025-Advocacy-Agenda-20250114.pdf>



This Page Intentionally Left Blank



Mendocino Coast Health Care District			
Check Register- Month ended January 31, 2025			
Vendor	Date	Amount	Description
BETA Healthcare Group	1/2/2025	\$ 963.42	Monthly pymt- General Liab Insurance
CA Health Facilities Financing Authority	1/3/2025	\$ 13,802.02	Monthly pymt- HELP Loan
K. McKee & Co, Inc.	1/2/2025	\$ 750.00	Monthly pymt- Contract Fee
K. McKee & Co, Inc.	1/2/2025	\$ 200.00	Monthly pymt- Software Fee
MCN	1/9/2025	\$ 94.52	Monthly pymt- Internet
Mendo Litho	1/9/2025	\$ 184.47	Office Supplies
Mendo Litho	1/27/2025	\$ 92.76	Office Supplies
Mendocino Unified School District	1/30/2025	\$ 400.00	Recording Fees for Board Meetings
Paul Garza	1/30/2025	\$ 250.00	Board Attendance Fees
Paul Katzeff	1/30/2025	\$ 250.00	Board Attendance Fees
Professional Sales and Service	1/2/2025	\$ 218,993.96	Ambulance Purchase
Regional Government Services	1/28/2025	\$ 13,200.00	Monthly Admin Services
Regional Government Services	1/27/2025	\$ 732.16	Support Services
Regional Government Services	1/30/2025	\$ 694.21	Support Services
RWG Law	1/9/2025	\$ 2,420.00	Professional Legal Fees
RWG Law	1/9/2025	\$ 13,542.50	Professional Legal Fees
Silverton Management Company	1/9/2025	\$ 7,500.00	Monthly Contract pymt- CFO Fees
The Bank of New York Mellon	1/3/2025	\$ 37,115.14	Monthly pymt- Revenue Bonds
	TOTAL	\$ 311,185.16	

MENDOCINO COAST HEALTH CARE DISTRICT
 FISCAL YEAR ENDING JUNE 30, 2025
 ACTUAL VS. BUDGET STATEMENT

5a)

OPERATIONS CHECKING ACCOUNT	Month Ended January 31, 2025			Seven Months Ended January 31, 2025		
	Actual	Budget	(Over) Under	Actual	Budget	(Over) Under
1. INCOME						
(a) Measure C Tax Revenue	0	129,167	129,167	964,647	904,169	(60,478)
(b) Property Tax Revenue	0	87,500	87,500	729,717	612,500	(117,217)
(c) AH Lease Revenue	0	0	0	1,750,000	1,750,000	0
(d) Investment Income	10,631	55,179	44,548	347,867	386,253	38,386
(e) Other Income	0	0	0	52,687	0	(52,687)
2. TOTAL INCOME	\$10,631	\$271,846	\$261,215	\$3,844,917	\$3,652,922	(\$191,995)
3. EXPENSES- DISTRICT OPERATIONS						
(a) Purchased Services- RGS Administrative	13,200	6,600	(6,600)	66,000	85,800	19,800
(b) Purchased Services- RGS Support Resources	1,426	2,083	657	17,040	14,581	(2,459)
(c) Projects/Consultants	0	4,167	4,167	32,844	29,169	(3,675)
(d) Community Organization & Outreach	0	4,167	4,167	0	29,169	29,169
(e) Communications Director	0	2,917	2,917	0	20,419	20,419
(f) Purchased Services- Audit	0	7,125	7,125	9,538	49,875	40,338
(g) Purchased Services- Legal	15,963	3,000	(12,963)	36,297	21,000	(15,297)
(h) Board Elections Fee	0	2,667	2,667	0	18,669	18,669
(i) Purchased Services- Financial Oversight	7,500	1,500	(6,000)	39,000	19,500	(19,500)
(j) Purchased Services- Bookkeeping	950	1,330	380	6,656	9,310	2,654
(k) Bond Trustee Fee	0	256	256	2,575	1,792	(783)
(l) Board Meetings & Postings	400	600	200	2,400	4,200	1,125
(m) Board Benefits	500	3,000	2,500	13,469	21,000	7,531
(n) Board Education	0	2,083	2,083	0	14,581	14,581
(o) Insurance (D & O and General Liability)	963	963	0	31,275	31,275	0
(p) Office Expenses (Supplies, Postage)	277	550	273	4,801	3,850	(951)
(q) Communication Expenses (Phone, Internet)	95	390	295	4,181	2,730	(1,451)
TOTAL- District Operating Expenses	\$41,274	\$43,398	\$2,124	\$266,075	\$376,920	\$110,170
4. RESTRICTED PAYMENTS						
(A) Payments to Lease Improvements Fund	0	0	0	2,251,024	2,251,024	0
(B) Payments to BNY Revenue Bond Escrow	37,115	39,355	2,240	253,289	265,779	12,489
(C) Payments to HELP II Loan Amortization	13,802	13,802	0	96,614	96,614	0
(D) Payments to Measure C Fund	0	0	0	854,552	854,552	0
TOTAL- Restricted Payments	\$50,917	\$53,157	\$2,240	\$3,455,480	\$3,467,969	\$12,489
5. TOTAL PAYMENTS	\$92,191	\$96,555	\$4,364	\$3,721,554	\$3,844,889	\$122,660

Mendocino Coast Health Care District
 Restricted Capital Fund
 Recap of Treasury Bill Inventory Portfolio (Current Holdings)
 Monthly Investment Board Report as of 01-31-2025

DESCRIPTION	PAR VALUE	PURCHASE PRICE	FOOTNOTE (A)		PURCHASE DATE	MATURITY DATE	INVESTMENT RATE %
			INVESTMENT INCOME				
8 WEEKS							
PURCHASE 1	\$1,000,000.00	\$993,420.00	\$6,580.00		12/24/24	02/18/25	4.317%
PURCHASE 2	\$2,000,000.00	\$1,986,731.12	\$13,268.88		12/31/24	02/25/25	4.353%
13 WEEKS							
PURCHASE 1	\$3,500,000.00	\$3,461,072.23	\$38,927.77		12/05/24	03/06/25	4.511%
PURCHASE 2	\$2,113,000.00	\$2,090,593.68	\$22,406.32		01/30/25	05/01/25	4.299%
17 WEEKS							
PURCHASE 1	\$1,700,000.00	\$1,676,285.95	\$23,714.05		12/24/24	04/22/25	4.339%
26 WEEKS							
PURCHASE 1	\$1,160,600.00	\$1,135,545.87	\$25,054.13		09/26/24	03/27/25	4.425%
PURCHASE 2	\$2,064,700.00	\$2,019,763.52	\$44,936.48		12/05/24	06/05/25	4.462%
TOTALS	<u>\$13,538,300.00</u>	<u>\$13,363,412.37</u>	<u>\$174,887.63</u>				

FOOTNOTE (A)

MATURITY MONTH	INVESTMENT INCOME
Jun-24	\$43,050.01
Jul-24	\$50,038.81
Aug-24	\$54,533.22
Sep-24	\$13,052.27
Oct-24	\$24,080.00
Nov-24	\$57,500.64
Dec-24	\$89,091.91
Jan-25	\$6,977.87
Sub Total	<u>\$338,324.73</u>

Mendocino Coast Health Care District
 Recap of Treasury Bill Inventory Portfolio (Matured)
 as of 01-31-2025

	PAR VALUE	PURCHASE PRICE	INVESTMENT INCOME	PURCHASE DATE	MATURITY DATE	INVESTMENT RATE %
4 WEEKS						
PURCHASE 1	\$3,000,000.00	\$2,987,691.66	\$12,308.34	05/07/24	06/04/24	5.370%
PURCHASE 2	\$2,500,000.00	\$2,489,752.78	\$10,247.22	05/14/24	06/11/24	5.365%
PURCHASE 3	\$4,000,000.00	\$3,983,604.44	\$16,395.56	05/21/24	06/18/24	5.365%
PURCHASE 4	\$1,000,000.00	\$995,901.11	\$4,098.89	05/28/24	06/25/24	5.365%
PURCHASE 5	\$3,043,000.00	\$3,030,527.08	\$12,472.92	06/11/24	07/09/24	5.365%
PURCHASE 6	\$2,700,000.00	\$2,688,933.00	\$11,067.00	06/11/24	07/09/24	5.365%
PURCHASE 7	\$2,500,000.00	\$2,489,772.23	\$10,227.77	06/18/24	07/16/24	5.355%
PURCHASE 8	\$4,000,000.00	\$3,983,728.88	\$16,271.12	06/25/24	07/23/24	5.324%
PURCHASE 9	\$1,000,000.00	\$995,901.11	\$4,098.89	07/02/24	07/30/24	5.365%
PURCHASE 10	\$3,093,000.00	\$3,080,322.13	\$12,677.87	07/16/24	08/13/24	5.365%
PURCHASE 11	\$2,700,000.00	\$2,688,933.00	\$11,067.00	07/16/24	08/13/24	5.365%
PURCHASE 12	\$2,500,000.00	\$2,489,752.78	\$10,247.22	07/23/24	08/20/24	5.365%
PURCHASE 13	\$4,000,000.00	\$3,983,557.76	\$16,442.24	07/30/24	08/27/24	5.381%
PURCHASE 14	\$1,198,000.00	\$1,193,098.85	\$4,901.15	08/20/24	09/17/24	5.355%
PURCHASE 15	\$2,000,000.00	\$1,991,848.88	\$8,151.12	08/27/24	09/24/24	5.335%
PURCHASE 16	\$1,000,000.00	\$991,864.44	\$8,135.56	08/06/24	10/01/24	5.346%
PURCHASE 17	\$2,000,000.00	\$1,984,055.56	\$15,944.44	08/27/24	10/22/24	5.238%
PURCHASE 18	\$2,000,000.00	\$1,974,444.16	\$25,555.84	08/22/24	11/21/24	5.192%
PURCHASE 19	\$2,500,000.00	\$2,468,055.20	\$31,944.80	08/22/24	11/21/24	5.192%
PURCHASE 20	\$1,000,000.00	\$992,758.89	\$7,241.11	10/08/24	12/03/24	4.754%
PURCHASE 21	\$2,700,000.00	\$2,655,553.49	\$44,446.51	08/20/24	12/17/24	5.134%
PURCHASE 22	\$2,024,100.00	\$2,009,647.93	\$14,452.07	10/29/24	12/24/24	4.687%
PURCHASE 23	\$2,000,000.00	\$1,977,047.78	\$22,952.22	09/26/24	12/26/24	4.656%
PURCHASE 24	\$2,106,000.00	\$2,099,022.13	\$6,977.87	12/31/24	01/28/25	4.334%
TOTALS	\$56,564,100.00	\$56,225,775.27	\$338,324.73			



Welcome to Your Account Summary
Mendocino Coast Health Care District
Restricted Capital Fund

Your last login was 01-31-2025 8:33 a.m. ET

Buy and manage your U.S. Treasury securities online.

Your Current Securities Total: \$13,538,300.00

Primary Account Information

Current Holdings as of January 31, 2025

Security Type	Amount
MARKETABLE SECURITIES	\$13,538,300.00
SAVINGS BONDS	\$.00
Zero-Percent C of I	\$.00



5a)

Mendocino Coast Health Care District		
Summary of Cash Balances as of January 31, 2025		
Fiscal Year Ending June 30, 2025		
	1/31/2025	Restricted
<u>Improvements & Measure C Fund:</u>		
Deferred Revenue Account-possession held by Adventist Health (Footnote 1)		\$4,550,511
<u>Restricted Capital Fund:</u>		
Treasury Bills- U.S. Treasury	\$13,363,412	
<u>Operations Fund:</u>		
Tri Counties Bank (Operations Account)	\$518,478	
Tri Counties Bank (Measure C Tax Revenue Account)	\$966,951	
LAIF	\$625,516	
	TOTAL	
	<u>\$15,474,357</u>	<u>\$4,550,511</u>
Footnote 1: Restricted for AH CapEx purchases (Equipment, Building Repairs & Maintenance)		

Mendocino Coast Health Care District
Lease Improvements Fund
Report for: July 1, 2020 to January 31, 2025
Prepared by WCA

Received - Lease Payments	\$10,649,178
Received - Special Allocation Distribution	\$2,000,000
Total funds received	\$12,649,178
Less:	
Funds Spent on Approved Projects	(\$8,098,667)
Net Cash Available on 01-31-25	\$4,550,511

Total Projects - MCHCD/Measure C Approved Projects	\$9,032,504
Total Projects - To Be Approved on Exhibit A	\$4,283,815
Total Projects Underway	\$13,316,319
Over Spent Funds Received	(\$667,141)

MCHCD/Measure C Approvals as of 01-31-2025

Prepared by WCA

FYE ended 06-30-2021

(1) Project Expenses:

	<u>Approved</u>
Auto Transfer Switch	\$660,000
Medical Air Replacement	\$283,001
HVAC- Surgery & Central Sterile Supply	\$424,250
Fire Sprinkler	\$35,502
Roof Repair- Patient Support Building	\$375,997
3 D Mammography- Facility Remodel	\$163,788
Surgery- ESU Machine & Force Triad Ligature	\$29,898
Surgery- Medical Waste Device	\$41,903
Radio System- Emergency Management	\$30,365
Ambulance Replacement Unit	\$180,774
Total Project Expenses	<u>\$2,225,478</u>

FYE ended 06-30-2024

(2) Project Expenses

Auto Transfer Switch	\$186,802
Medical Air Replacement	\$959,688
HVAC- Surgery & Central Sterile Supply	\$18,567
Fire Sprinkler	\$8,110
Roof Repair- Main Building	\$57,040
Fire Roll-Down NFPA Code Replacement	\$135,000
Infection Control- Lobby Flooring	\$132,722
Oncology- Infection Control Updates	\$60,480
Infection Control- ER Waiting, Front Lobby, PT, Lab	\$275,998
Infection Control Flooring- RT, Cardio, PT Rooms	\$153,455
3 D Mammography- Facility Remodel	\$308
Ambulance Replacement Unit	\$11,202
Legionella Compliance Equipment Replacement	\$65,000
ED Hot Water Heater	\$20,516
Zoll Defibrillators (7)	\$170,540
Expenses- MCHCD Board Approved on 04-25-2024	<u>\$2,255,428</u>

(3) Project Expenses

Auto Transfer Switch	\$1,700,000
Vacuum Pump Replacement	\$500,000
Two OR Rooms and Surgical Area Flooring Repairs	\$58,810
Expenses- MCHCD Board Approved on 04-25-2024	<u>\$2,258,810</u>

MCHCD/Measure C Approvals as of 01-31-2025
Prepared by WCA

FYE ending 06-30-2025

(4) Project Expenses

AHMC Lab Equipment Replacement	\$517,360
Sterile Processing Dept. Renovation, (No Rental)	\$307,270
Fan Coil Replacement	\$440,000
Clinical Lab Equipment- Level 1	\$343,815
Door Replacement (12)	\$110,000
Nurse Call System	\$43,651
Med/Surg Pantry repairs	\$55,000
Electrical- Add outlets for Lab Refrigerators/Freezers	\$110,000
CCTV System & Door Access Security (cameras only)	\$59,892
Expenses- MCHCD Board Approved on 11-06-2024	<u>\$1,986,988</u>

(5) Project Expenses

Roof Leak- Central Supply	\$17,679
Kitchen- Dishwasher Water Heater	\$9,543
CT Scanner- HCAC Unit	\$7,169
Vacuum Pump	\$4,500
Electric Steam Generator	\$7,129
AJ Gray- Home Health Bathroom	\$737
Ambulance- 3 Gurney Repairs	\$1,964
New Ambulance- Vinyl Wrap	\$5,461
Kitchen- Walk In Refrigerator/Freezer	\$25,000
Patient Monitoring Equipment Upgrade	\$218,787
Doorway- MedSurg	\$7,830
Expenses- MCHCD Board Approved on 01-25-2025	<u>\$305,800</u>

GRAND TOTAL **\$9,032,504**

MENDOCINO COAST HEALTH CARE DISTRICT
 STATEMENT OF CASH RECEIPTS and DISBURSEMENTS
 JANUARY 31, 2025

Improvements Fund & Measure C Parcel Tax Revenue Account
 Prepared by WCA

	Fiscal Year Ended					
	6/30/2021	6/30/2022	6/30/2023	6/30/2024	6/30/2025	TOTAL
1. MCHCD Supplemental Funds (Footnote 1)						
(a) Net Cash Tax Receipts	\$1,582,110	\$1,571,165	\$1,571,413	\$1,570,563	\$0	\$6,295,251
(b) MCHCD Supplemental Funds	\$417,890	\$488,835	\$550,387	\$614,891	\$2,251,024	\$4,323,027
Sub-Total	\$2,000,000	\$2,060,000	\$2,121,800	\$2,185,454	\$2,251,024	\$10,618,278
(c) MCHCD Overpayment on 07-01-2022			\$30,900			\$30,900
(d) MCHCD Special Allocation	\$939,389		\$1,060,611			\$2,000,000
Total Improvements Funds/Measure C Tax Revenue	\$2,939,389	\$2,060,000	\$3,213,311	\$2,185,454	\$2,251,024	\$12,649,178
2. LESS: MCHCD Board Approvals	\$2,225,478	\$0	\$0	\$4,514,238	\$2,292,788	\$9,032,504
2. Improvements Fund Approval Balance as of 01-31-2025						\$3,616,674



Footnote 1:

Net Cash Tax Receipts for Fiscal Year ending 06/30/2025 total \$965,310 as of January 31, 2025 (consists of \$110,095 deposit for August 2024 receipts and \$854,552 for December 2024 receipts and Interest Income of \$663). Awaiting the March 2025 receipts. The \$965,310 has been deposited into a MCHCD Measure C banking account with Tri Counties Bank.



Priority 2025	Finance #	Project No.	Capital Description	MCHCD Board Approved	Completed YES/NO		Actual Cost - Q4 2024 and Q1 2025	Requested Approval Amount	Project planned Duration / Completion Date
TJC IC PS	4.26	2025-31	ED - Med Room - Flooring	Needs Approval	Yes	Replace Old Flooring - Med Room Refresh	\$ 4,223	\$ 4,223	Completed - 2023
PS	1.02	2025-18	ED HVAC (South and Center 3 Units) & ED Lobby	Needs Approval	No	(3) EOL and Failed HVAC Unit Replacement - supplies the Emergency Department Heating and Cooling	\$ 221,995	\$ 1,250,000	Complete - Q4 2025
TJC PS	4.16	2025-16	Refrigerator Replacement - Pharmacy	Needs Approval	No	June July for Clean Room	\$ 22,264	\$ 65,000	Complete - Q3 2025
IC	4.21	2025-17	Flooring - PSB Area	Needs Approval	No	Needs Doctor's Lounge, Conference rooms (3) - Non Scheduled, HR Area, Registration Area, Billing & Business Serv. Area, Counseling	\$ 65,545	\$ 65,545	Complete - Q3 2025
TJC IC	4.22	2025-19	Patient Care Areas - Flooring	Needs Approval	No	Replace damaged and uncleanable flooring in Patient Care areas - Infection Control / TJC issue	\$ 143,435	\$ 143,435	Complete - Q3 2025
TJC PS Required	4.28	2025-14	Generator Repairs (4)	Needs Approval	Yes	Annual Service and Repairs to our Emergency Power System, Rental of generator to provide back-up power to the facility during the work. PM Fee has been added due to the in-house labor required to accomplish the work	\$ 96,330	\$ 105,963	Completed - 2024
TJC HCAI PS	4.29	2025-20	Seismic Compliance/Upgrades - AH Support - HCAI Fees	Needs Approval	No	HCAI - SPC Requirements for 2030	\$ 277	\$ 5,000	Complete - 2030
PS	4.3	2025-22	Network Infrastructure Improvement - Investigation	Needs Approval	No	Updating the network infrastructure to support the speeds required for a modern Electronic Medical Records System	\$ 1,120	\$ 2,500	Complete - Q2 2025
TJC PS IC	4.31	2025-21	Building Repairs 202407 - 202412	Needs Approval	Yes	Ongoing Repairs and Maintenance to the Buildings & Facility Equipment	\$ 25,208	\$ 25,208	Completed - 2024
PS	4.32	2025-15	Gurney Replacement - (6) Stryker ED Gurneys	Needs Approval	No	Replace End of Life Equipment	\$ 93,719	\$ 98,888	Complete - Q2 2025
TJC High	4.48	2025-13	FLS (Fire Life Safety) System Repairs	Needs Approval	No	Replace rusted and leaking sprinkler drops. Replace EOL (End of Life) components to the Fire Alarm Systems. Connect the DI with the Main Hospital for Staff and Patient Safety.	\$ 20,216	\$ 50,000	Complete - Q1 2025
Balance Improvement Fund - 2024	N/A	2025-24	Building Repairs - From 2020 thru 202412	Needs Approval	Yes	Ongoing Repairs and Maintenance to the Buildings & Facility Equipment - MCHCD Board has Back-up Invoices for reference	\$ 1,838,314	\$ 1,838,314	Completed - 2024
TJC PS IC	4.19	2025-25	Regulatory/Deferred - Generator Maintenance	Needs Approval	Yes	Make repairs to ensure Emergency Power System to meet TJC Standards	\$ 55,466	\$ 55,466	Completed - 2021
TJC PS IC	4.2	2025-26	Regulatory/Deferred Maintenance Investigation	Needs Approval	Yes	TJC, CDPH, NFPA, OSHPD - MCHCD Board has Back-up Invoices for reference	\$ 274,165	\$ 274,165	Completed - 2021
TJC PS IC	4.23	2025-27	Furniture (Registration, ER Waiting, Front Lobby, PT, Lab, ICU)	Needs Approval	Yes	Worn and non-compliant furniture in Patient Care areas	\$ 111,090	\$ 111,090	Completed - 2021
PS	4.25	2025-28	Platelet Agitator	Needs Approval	Yes	Failed Clinical Lab Equipment replacement	\$ 10,051	\$ 10,051	Completed - 2021
TJC PS	4.26	2025-29	Ice Makers & Café	Needs Approval	Yes	Replace - End of Life and Infection Control Issues	\$ 116,275	\$ 123,477	Completed - 2024
PS TJC HCAI	4.25	2025-30	Sterile processing feasibility study	Needs Approval	Yes	Sterile Processing Assessment and Conceptual Design for Compliance and Renovation	\$ 10,051	\$ 55,490	Completed - 2021

\$ 4,283,815 Total Requested

Mendocino Coast Health Care District - Exhibit B										
AH / MCHCD - Improvement Fund Projects - Approved										
Reconciliation - Improvement Funds as of 01/31/2025										
 										
Sub	AH / MCDH Project #	Capital Description	Approved - Grand Total	AH Actual spending As 01/31/2025	Diff. between approved MCHCD vs AH spent	Estimated remaining amount to complete CIP	Total Capital Cost	Estimated Closure date	Capital in Progress YES/NO	Notes
Completed Projects										
3.01		Radio System- Emergency Management	30,365	30,364	-		30,364	Closed	No	
3.02		Ambulance Replacement Unit	191,976	191,976	-		191,976	Closed	No	
3.03	2025-08 & 2025-09	Ambulance Service - (3) Gurney Repairs & Vinyl Wrap	7,425	7,425	-		7,425	Closed	No	
4.05		Medical Air Replacement	1,242,689	1,192,661	(50,028)		1,192,661	Closed	No	
4.06		Fire Sprinkler	43,612	43,612	0		43,612	Closed	No	
4.07		Roof Repair- Patient Support Building	375,997	375,269	(728)		375,269	Closed	No	
4.08		3 D Mammography- Facility Remodel	164,096	164,096	0		164,096	Closed	No	
4.09		Roof Repair- Main Building	57,040	57,040	-		57,040	Closed	No	
4.10		Fire Roll-Down NFPA Code Replacement	135,000	178,616	43,616		178,616	Closed	No	
4.11		Infection Control - Lobby Flooring	132,722	132,722	-		132,722	Closed	No	
4.12		Oncology-Infection Control Updates	60,480	64,900	4,420		64,900	Closed	No	
4.14		Infection Control - ER Waiting, Front lobby, PT, Lab	275,998	258,498	(17,500)		258,498	Closed	No	
4.15		Infection Control - Flooring - RT Cardio, PT Rooms	153,455	153,455	-		153,455	Closed	No	
4.17		ED Hot Water Heater	20,516	22,944	2,428		22,944	Closed	No	
4.18		Zoll Defibrillators (7)	170,540	170,540	(0)		170,540	Closed	No	
4.39	2025-02 & 2025-03	Kitchen - Dishwasher Booster Water Heater & Garbage Disposal	9,543	18,218	8,675		18,218	Closed	No	Invoices in transit. Bank of America, Fort Bragg plumbing. Add 10% over the cost
4.40	2025-04	CT Scanner - HVAC Unit	7,169	7,169	-		7,169	Closed	No	
4.41	2025-05	Update - Vacuum Pump - Repair Log Timer - Phase 2	4,500	7,734	3,234	(3,234)	4,500	Closed	No	
4.42	2025-06	Electric Steam Generator - Elements & Blowdown	7,129	7,129	0		7,129	Closed	No	
4.43	2025-07	AJ Gray - Home Health - Bathroom - Sewer	737	737	-		737	Closed	No	
5.01		Surgery- ESU Machine & Force Triad Ligature	29,898	29,898	(1)		29,898	Closed	No	
5.02		Surgery- Medical Waste Device	41,903	41,903	(1)		41,903	Closed	No	
5.04		HVAC- Surgery & Central Sterile Supply	442,817	443,812	995		443,812	Closed	Yes	
Capital Projects In-progress										
1.03		Auto Transfer Switch - ED	1,700,000	-	(1,700,000)	1,700,000	1,700,000	12/31/2025	Yes	Pending estimated cost depending on the State requirements.
4.04		AutoTransfer Switch - Main	846,802	920,118	73,316		920,118	12/31/2025	Yes	Pending estimated cost depending on the State requirements. Working on Vacuum Pump replacement
4.13		Legionella Compliance Equipment Replacement	65,000	-	(65,000)	50,000	50,000		Yes	Is this for the new agreement with GARRETT CALLAHAN \$10,624 Annually, Kitty Sandelin is working on it - Purchase service. 2 bills for the coast, Water Treatment \$832*24 Mos
4.24		Vacuum Pump Replacement	500,000	1,570	(498,430)	498,430	500,000	2026 Qtr 1	Yes	Pending estimated cost depending on the State requirements.
4.27	2024-11, 2024-14 & AHMC Lab Equipment Replacement		971,175	341,282	(629,893)	176,078	517,360	2025 Qtr 2	Yes	
4.33	2024-13	Fan Coil Replacement	440,000	-	(440,000)	440,000	440,000	2026 Qtr 2	Yes	
4.34	2024-15	Door Replacement (12)	110,000	33,430	(76,570)	76,570	110,000	2025 Qtr 1	No	
4.35	2024-16	Nurse Call System	43,651	50,842	7,191	(7,191)	43,651	2025 Qtr 1	Yes	Add the 10% from the cost, West com, phase 1 is completed. PO 730006774. We need approval for the 2nd phase cost
4.36	2024-17	Med/Surg Pantry repairs	55,000	-	(55,000)	55,000	55,000	2025 Qtr 1	Yes	Started but no invoices yet
4.38	2024-19	CCTV System & Door Access Security (cameras only)	59,892	73,839	13,947	-	73,839	2025 Qtr 1	Yes	ED & Main Hospital
4.44	2025-01	Roof Leak - Central Supply Area of the OR Suite - Phase 1	17,679	17,679	-	-	17,679	2025 Qtr 1	Yes	
4.45	2025-10	Kitchen - Walk-In Freezer / Refrigerator	25,000	-	(25,000)	25,000	25,000	2025 Qtr 1		Started no invoices yet
4.46	2025-11	Nihon Kohden - Patient Care Monitoring System	218,787	-	(218,787)	218,787	218,787	2025 Qtr 1	No	
4.47	2025-12	Doorway / Threshold - Uneven flooring repairs in MedSurg	7,830	-	(7,830)	7,830	7,830	2025 Qtr 1	No	Started no invoices yet
5.03		Two OR Rooms and Surgical Area Flooring Repairs	58,810	-	(58,810)	58,810	58,810	2025 Qtr 1	Yes	
5.06	2024-12	Sterile Processing Dept. Renovation, (No Rental)	307,270	47,441	(259,829)	259,829	307,270	2026 Qtr 3	Yes	Design only, construction cost pending
Total Approved Project Expenses			\$9,032,504	\$5,086,919	-\$3,945,583	\$3,555,908	\$8,642,827			



Draft

District Mission Statement
(Rev 2.27.25)

MCHCD provides a hospital and fosters leadership, advocacy and collaboration for our community health and well-being.



TO: BOARD OF DIRECTORS **BOD Meeting: 2/27/2025**
FROM: Katharine Wylie, Agency Administrator **Item: 5d)**
SUBJECT: BYLAWS AMENDMENT - STANDING COMMITTEES

RECOMMENDATION

Amend the Board Bylaws to limit Standing Committee membership to two board members and update Planning Committee jurisdiction.

BACKGROUND

The Board Bylaws currently call for “up to six” members of the community to be committee members of the Board’s Standing Planning and Finance committees. For the past year, the District has struggled to properly convene calendared committee meetings due to non-aligned member schedules. Achieving a quorum is required for the committee to conduct its business. Further, community members participating in such committees are bound to the requirements of the *Ralph M. Brown Act*, (Brown Act). Violations of the Brown Act could risk both penalties to the District and hamper the ability of key community stakeholders to exchange relevant information.

ANALYSIS

While the intent of the original Bylaws provision was to ensure open and public participation in planning and finance matters, participation of community members and receipt of community input may be better achieved through well-planned Board meetings, community engagement workshops, and ad hoc advisory groups. As a landlord rather than a health services operator, the current work of the District focuses on confidential real estate negotiations as well as appropriately navigating a partnership with a health operator with proprietary business transactions. Much of the associated work in this area is properly designated by the Brown Act as subject to confidential closed sessions of the Board, rather than open sessions of a standing committee. In addition, the District has no staff and therefore no responsibility for human resources policies, compensation or benefits actions. Should a staffing project be authorized by the Board at some future time, the general project planning and oversight language that exists is adequate to engage this committee if needed.

Given the District’s current mission, it is advisable to amend the bylaws to limit Standing Committee membership to two board members, and to remove defunct activity from the Planning Committee. These changes would support timely and productive public meetings, with appropriate community input on agenda items. As the District embraces its new mission, this adjustment to align the Bylaws with current roles and goals will focus and facilitate the work of the standing committees.

FISCAL IMPACT

None anticipated at this time.

majority vote to serve on the committee. Every Standing committee shall keep action minutes of each of its meetings, and every committee shall report to the Board periodically concerning its activities.

The Board may, by majority vote, appoint a temporary Committee Member to serve during the absence of a regular committee member.

Any member of a committee may be removed at any time by the Chair, subject to the consent of the Board.

Section 2. Standing Committees.

Planning

A Standing Committee on Planning, composed of two Board members, ~~and up to Six community members~~, will be chaired by the Vice Chair and shall meet at least quarterly and report to the Board thereafter. The purpose of the Planning Committee includes but is not limited to

- Developing a plan and performing oversight for projects authorized by the Board;
- Developing a plan and performing oversight for ongoing facilities maintenance and a five-year facilities improvement plan;
- ~~Recommending and overseeing Human Resource policies, compensation and benefits; and;~~
- ~~Recommending community members as appropriate for Board appointment to the Planning Committee.~~

Finance

A Standing Finance Committee composed of two board members ~~and up to Six community members~~, will be chaired by the Treasurer, and shall meet at least quarterly and report to the Board thereafter. The purpose of the Finance Committee includes but is not limited to:

- Ensuring an annual independent audit is performed;
- Providing a budget recommendation to the Board in May of each year for adoption in June;
- Recommending and overseeing fiscal policies and investments, and accounting and budgeting practices;
- Reviewing Board financial statements and reports; and
- ~~Reviewing Measure C Committee recommendations;~~

Section 3. Ad Hoc Committees.

Ad hoc committees, including not more than two directors, may be established by the Chair for defined tasks of a limited duration. The Chair shall notify the Board that an *ad hoc* committee has been established, and the purpose thereof. An *ad hoc* committee shall only perform those duties assigned by the Chair, and upon their completion be discharged. The Chair shall determine the members of the committee. The Chair shall be notified in advance



This Page Intentionally Left Blank

majority vote to serve on the committee. Every Standing committee shall keep action minutes of each of its meetings, and every committee shall report to the Board periodically concerning its activities.

The Board may, by majority vote, appoint a temporary Committee Member to serve during the absence of a regular committee member.

Any member of a committee may be removed at any time by the Chair, subject to the consent of the Board.

Section 2. Standing Committees.

Planning

A Standing Committee on Planning, composed of two Board members, ~~and up to Six community members~~, will be chaired by the Vice Chair and shall meet at least quarterly and report to the Board thereafter. The purpose of the Planning Committee includes but is not limited to

- Developing a plan and performing oversight for projects authorized by the Board;
- Developing a plan and performing oversight for ongoing facilities maintenance and a five-year facilities improvement plan;
- ~~Recommending and overseeing Human Resource policies, compensation and benefits; and;~~
- ~~Recommending community members as appropriate for Board appointment to the Planning Committee.~~

Finance

A Standing Finance Committee composed of two board members ~~and up to Six community members~~, will be chaired by the Treasurer, and shall meet at least quarterly and report to the Board thereafter. The purpose of the Finance Committee includes but is not limited to:

- Ensuring an annual independent audit is performed;
- Providing a budget recommendation to the Board in May of each year for adoption in June;
- Recommending and overseeing fiscal policies and investments, and accounting and budgeting practices;
- Reviewing Board financial statements and reports; and
- ~~Reviewing Measure C Committee recommendations;~~

Section 3. Ad Hoc Committees.

Ad hoc committees, including not more than two directors, may be established by the Chair for defined tasks of a limited duration. The Chair shall notify the Board that an *ad hoc* committee has been established, and the purpose thereof. An *ad hoc* committee shall only perform those duties assigned by the Chair, and upon their completion be discharged. The Chair shall determine the members of the committee. The Chair shall be notified in advance



This Page Intentionally Left Blank



REGULAR MEETING OF THE BOARD OF DIRECTORS
MENDOCINO COAST HEALTH CARE DISTRICT
MINUTES

Thursday, January 23, 2024, at 5:00 PM
Redwoods Room, Adventist Health Mendocino Coast Hospital Campus
700 River Drive, Fort Bragg, CA.

CONDUCT OF BUSINESS

1. CALL THE MEETING TO ORDER

Chair Garza called the meeting to order at 5:00 p.m.

This meeting was held in-person and by teleconference in accordance with the Brown Act.

Directors Present:	Chair Paul Garza, Jr.	Vice Chair Paul Katzeff
	Secretary Susan Savage	Jan McGourty
	Lynn Finley	

A quorum of the Board was present.

Management Team:	Agency Administrator Katharine Wylie
	Chief Financial Officer Wayne Allen
	Clerk of the Board Norma I. Alley, MMC

2. PUBLIC COMMENT FOR ITEMS NOT ON THE AGENDA

Chair Garza called for public comment.

Bruce Broderick spoke to senior housing issues.

George Reinhardt spoke to housing issues and support for hospital services.

Seeing no further comment, Chair Garza closed public comment.

3. REPORTS

3a) Receive and file MCHCD Chair's Report

Chair Garza reported on his written report and provided updates on general matters of interest to the District.

3b) Receive and file Adventist Health Mendocino Coast Hospital Report

No report was provided.

3c) Receive and file Redwood Coast Seniors Report

Redwood Coast Senior Center Executive Director Jill Rexrode presented on general Senior Center matters pertaining to the District and fielded inquiry from the Board.

3d) Receive and file Mendocino Props and Measures Report

Props and Measures Senior Consultant Robin Garrity provided a summary of her written report.

3c) Receive and file Agency Administrator’s Report

Administrator Wylie provided updates on general matters of the District and fielded inquiry from the Board.

Chair Garza called for public comment. Seeing no one come forward, he closed public comment.

4. NEW BUSINESS

4a) Discussion and possible action including Election of Chair, Vice-Chair, Secretary and Treasurer of the Mendocino Coast Health Care District Board for the 2025 Calendar Year.

Chair Garza introduced the agenda item and described the procedure for the election.

Election of Chair

Chair Garza ceded the election to Secretary Savage to conduct the election of Chair.

Secretary Savage called for nominations.

Director Katzeff nominated Director Garza.

Seeing no further nominations, the vote was called.

Roll Call Vote:

Garza:	Garza
Finley:	Garza
Katzeff:	Garza
McGourty:	Garza
Savage:	Garza

Director Garza was elected as Chair, receiving majority vote.

Election of Vice Chair

Chair Garza called for nominations for Vice Chair.

Director Finley nominated Director McGourty.

Director Katzeff nominated himself.

Seeing no further nominations, the vote was called.

Roll Call Vote:

Garza:	Katzeff
Finley:	McGourty
Katzeff:	Katzeff
McGourty:	McGourty
Savage:	McGourty

Director McGourty was elected as Vice Chair, receiving majority vote.

Election of Secretary

Chair Garza called for nominations for Secretary.

Director Finley nominated Director Savage.

Seeing no further nominations, the vote was called.

Roll Call Vote:

Garza:	Savage
Finley:	Savage
Katzeff:	Savage
McGourty:	Savage
Savage:	Savage

Director Savage was elected as Secretary, receiving majority vote.

Election of Treasurer

Chair Garza called for nominations for Treasurer.

Secretary Savage nominated Director Finley.

Seeing no further nominations, the vote was called.

Roll Call Vote:

Garza: Finley
Finley: Finley
Katzeff: Finley
McGourty: Finley
Savage: Finley

Director Finley was elected as Treasurer, receiving majority vote.

Chair Garza called for public comment.

Gabriel Maroney spoke to the need to call for public comment prior to the elections.

Malcolm Macdonald spoke to the need to call for public comment prior to the elections.

Seeing no further comment, Chair Garza closed public comment.

4b) Discussion and possible action to adopt the Draft 2025 Regular Board Meeting and Draft 2025 Standing Finance, Planning and Measure C Oversight Committee Meetings master calendar.

Agency Administrator Wylie presented the staff report and fielded inquiry from the Board.

Discussion amongst the Board ensued regarding moving the Board Meetings around the District or holding community meetings around the District.

Chair Garza appointed an Ad Hoc Committee of Vice Chair McGourty and Secretary Savage to review the Board Meeting schedule and report back in February with a recommendation.

Chair Garza called for public comment.

A Citizen asked what the size of the service area was. Chair Garza answered that the service area spans from Westport in Elkhorn all the way to Comptche with a population of around 20,000 people.

Seeing no further comment, Chair Garza closed public comment.

Motion: Treasurer Finley made a motion to approve the Committee Meeting Calendar, with exception of holidays, and postpone the Board Meeting Calendar for review by the Ad Hoc Committee. Motion was seconded by Secretary Savage. The motion was approved by a 5 Yes/0 No vote.

4c) Discussion and possible action including appointment of Standing Committee members pursuant to Bylaws; Adoption of Resolution Regarding Board Standing Committees for 2025.

Chair Garza noted Treasurer Finley serves per the Bylaws and called for volunteers to serve on the Finance Committee. Secretary Savage volunteered to serve.

Chair Garza noted Vice Chair McGourty serves per the Bylaws and called for volunteers to serve on the Planning Committee. Chair Garza and Director Katzeff volunteered to serve.

Chair Garza noted he also wanted to continue the Blue Zone Ad Hoc Committee, which was currently seated by Director Katzeff.

Chair Garza called for public comment.

Gabriel Maroney requested clarification regarding the appointment process for the Planning Committee citizen seats. Agency Administrator Wylie explained the process and noted the consideration of appointment would be at the Planning Committee Meeting.

Seeing no further comments, Chair Garza closed public comment.

Motion: Secretary Savage made a motion to appoint Treasurer Finley and Secretary Savage to the Finance Committee, Vice Chair McGourty and Chair Garza to the Planning Committee, and Directors Katzeff and Garza to the Blue Zone Ad Hoc Committee. Motion was seconded by Vice Chair McGourty. The motion was approved by a 4 Yes/1 No (Katzeff) vote.

4d) Receive and file Check Register Report - 12/31/24; Actual vs. Budget Report - 12/31/24; Treasury Bill Inventory Portfolio - 12/31/24; and Summary of Cash Balances - 12/31/24

Chief Financial Officer Allen summarized his written report.

Chair Garza called for public comment.

Malcolm Macdonald commented on his public records act requests he submitted.

Seeing no further comments, Chair Garza closed public comments.

Director Katzeff requested Mr. Macdonald's records request be on the next meeting agenda for review by the Board. The Board agreed and Chair Garza requested it be placed on the February meeting's Agenda.

Motion: Secretary Savage made a motion to accept, receive, and file the financial reports. Motion was seconded by Treasurer Finley. The motion was approved by a 5 Yes/0 No vote.

4e) Receive and consider approval of the Adventist Health Mendocino Coast Hospital Capital Expenditures List, dated 1/17/2025, and refer to the Measure C Oversight Committee

Adventist Health Mendocino Coast Hospital North Coast Area Chief Financial Officer Jeff Mock summarized the written report and requested approval of the Capital Expenditure List. Mr. Johnston fielded inquiry from the Board.

Chair Garza called for public comment. Seeing no one come forward, he closed public comment.

Motion: Treasurer Finley made a motion to accept the Capital Expenditure List, as submitted, totaling \$305,799.66. Motion was seconded by Secretary Savage. The motion was approved by a 4 Yes/ 0 No/ 1 Abstain (Katzeff) vote.

4f) Receive and consider approval of the Health Management Associates Contract for assistance with the Voluntary Rate Range Program (VRRP)

Health Management Associates Managing Principal Steve Soto summarized the written report and proposal and fielded inquiry from the Board.

Chair Garza called for public comment.

Malcolm Macdonald provided general comments to the agenda item.

Seeing no further comments, Chair Garza closed public comment.

Adventist Health Mendocino Coast Hospital North Coast Area Chief Financial Officer Jeff Mock noted the Hospital is supportive of the proposal.

Chief Financial Officer Allen noted he looked into the State Health Plan and received push back due to being told the District does not provide direct patient care, but felt there was a good case to continue to pursue as there is indirect patient care and recommended approval of the contract.

Motion: Vice Chair McGourty made a motion to accept the proposal, with the contract amount not to exceed \$30,000. Motion was seconded by Treasurer Finley. The motion was approved by a 5 Yes/ 0 No vote.

5. CONSENT CALENDAR

5a) Draft Minutes of the 12/ 12/ 2024 Regular Meeting; Draft Minutes of the 1/ 2/ 25 Special Board Workshop Meeting

5b) Board Resolution 2025-1, Tri-Counties Bank Signature Authority, addition of 2025 Board President, Secretary and Treasurer

5c) Board Resolution 2025-2, LAIF (Local Agency Investment Fund) Signature Authority, addition of 2025 Board President, Secretary and Treasurer

Chair Garza called for public comment. Seeing no one come forward, he closed public comment.

Motion: Secretary Savage made a motion to approve Consent Calendar items. Motion was seconded by Treasurer Finley. The motion was approved by a 5 Yes/ 0 No vote.

6. COMMENTS FROM THE BOARD

There were no comments from the Board.

7. CLOSED SESSION

7a) Gov. Code §54956.8: Conference with Real Property Negotiators, 700 River Drive, Fort Bragg. Ca.
District Negotiators: Wayne Allen, Chief Restructuring Officer, MCHCD.
Negotiating party: Eric Stevens, President, Northern California Network, Adventist Health.
Under negotiation: Terms of the Lease Agreement, dated July 1, 2020.

7b) Gov. Code §54956.8: Conference with Real Property Negotiators, 721 River Drive, Fort Bragg. Ca.
District Negotiators: Appointed District ad hoc Subcommittee and legal counsel
Negotiating parties: GL Bruno, Agent, Mendocino Coast Medical Plaza, LLC.
Under negotiation: price and terms of payment of possible purchase.

Chair Garza announced the Closed Session items topics.

Chair Garza called for public comment. Seeing no one come forward, he closed public comment.

Chair Garza called a recess at 7:10 p.m. The Regular Meeting reconvened at 7:14 p.m.

Chair Garza led the Board into Closed Session at 7:14 p.m. The Closed Session adjourned and the Regular Meeting reconvened at 7:35 p.m.

7c) Report out from Closed Session

Chair Garza reported there was no discussion on Item 7a and the Board was going to notify Adventist Health that the Board needed six months to consider if the Board can identify a non-profit entity who would be willing to partner or takeover Hospice Thrift Store operations.

8. ADJOURNMENT

Seeing no further business, Chair Garza adjourned the meeting at 7:38 p.m.

Respectfully Submitted,

Norma I. Alley, MMC, Clerk of the Board



This Page Intentionally Left Blank



SPECIAL MEETING OF THE BOARD OF DIRECTORS
MENDOCINO COAST HEALTH CARE DISTRICT
MINUTES

Monday, February 17, 2025, at 1:00 PM
Mendocino Coast Healthcare Foundation office
130 North Main Street, Fort Bragg, CA.

CONDUCT OF BUSINESS

1. CALL THE MEETING TO ORDER

Chair Garza called the meeting to order at 1:04 p.m.

This meeting was held in-person in accordance with the Brown Act.

Director's Present:	Chair Paul Garza, Jr.	Vice Chair Jan McGourty
	Secretary Susan Savage	Paul Katzeff
	Treasurer Lynn Finley	

A quorum of the Board was present.

Management Team:	Agency Administrator Katharine Wylie
	Chief Financial Officer Wayne Allen (via telephone)
	RGS Strategic Services Consultant Chris Sliz
	RGS Consultant Tom Schwedhelm

Chair Garza introduced RGS Consultants Chris Sliz and Tom Schwedhelm, and invited them to conduct a Board Mission and Vision Workshop.

2. PUBLIC COMMENT FOR ITEMS ON THE AGENDA

2a) George Rinehardt, Gabriel Maroney commented on the Board Mission and Vision.

3. BOARD WORKSHOP

3a) Session 1

RGS Consultants Sliz and Schwedhelm facilitated a discussion on a common understanding of the district's parameters for the board's mission statement.

3b) Public Comment

Sarah Ginskey, Gabriel Maroney, George Rinehardt and Terry Ramos provided general comments regarding the Board's mission and vision statements.

3c) Session 2

The session focused on revising the district’s mission statement, post-affiliation with Adventist Health Mendocino Coast Hospital. By a vote of 5:0 the board adopted a revised mission statement:

“MCHCD provides a hospital and fosters leadership, advocacy and collaboration for our community health and well-being”.

3d) Public Comment

Terry Ramos, Gabriel Maroney and Sarah Ginsky commented on the proposed board mission statement.

4. ADJOURNMENT

4a) The workshop concluded and the meeting was adjourned at 3:52 p.m.

Respectfully Submitted,



Katharine D. Wylie, Agency Administrator



MENDOCINO COAST HEALTH CARE DISTRICT

RESOLUTION 2025-4
February 27, 2025

The Mendocino Coast Health Care District (hereinafter "District") maintained various bank accounts with Savings Bank of Mendocino County until the first quarter of 2024 , and,

Due to the District’s contracting with Wayne Allen, Silverton Management LLC, to serve as the district’s Chief Financial Officer, and Katharine Wylie, Regional Government Services, to serve as the district’s Agency Administrator;

NOW, THEREFORE, IT IS RESOLVED that the District’s Chief Financial Officer and Agency Administrator have authority to access any and all former district bank account statements and information with Savings Bank of Mendocino County:

The Board of Directors of the Mendocino Coast Health Care District at a regularly scheduled meeting of the Board, passed this Resolution on February 27, 2025, by the following vote:

AYES:
NOES:

Signed,

_____, Chair of the Board of Directors
Paul Garza Jr.

Attest,

_____, Secretary of the Board of Directors
Susan Savage