BOARD OF DIRECTORS
Becky Campo, President
Reyna Gomez, Vice-President
Ma Traore, Secretary
Sylvia Ramirez, Treasurer
Luis Avila, Director
PO Box 187, Patterson, CA 95363
Phone (209) 892-8781 Fax (209) 892-3755

BOARD OF DIRECTORS' MEETING

Monday, March 09, 2026 @ 6:00 PM

City Hall, 1 Plaza Circle, City Council Chambers

PUBLIC COMMENT PERIOD: Matters under the jurisdiction of the Board and not on the posted agenda may be addressed by the general public at the beginning of the regular agenda. If you wish to speak on an item on the agenda, you are welcome to do so during consideration of the agenda item itself. If you wish to speak on a matter that does not appear on the agenda, you may do so during the Public Comment period; however, California law prohibits the Board from acting on any matter which is not on the posted agenda unless it is determined to be an emergency by the Board of Directors. Persons speaking during the Public Comment will be limited to five minutes. Depending on the number of persons wishing to speak, speaking time may be reduced to allow all public members to address the Board. Public comments must be addressed to the board through the President. Comments to individuals or staff are not permitted.

CONSENT CALENDAR: These matters include routine financial and administrative actions and are identified with an asterisk (*). All items on the consent calendar will be voted on as a single action at the beginning of the meeting under the section titled "Consent Calendar" without discussion. If you wish to discuss an item on the Consent Calendar, please notify the Clerk of the Board prior to the beginning of the meeting or you may speak about the item during Public Comment Period.

REGULAR CALENDAR: These items will be individually discussed and include all items not on the consent calendar, all public hearings, and correspondence.

CLOSED SESSION: Is the portion of the meeting conducted in private without the attendance of the public or press to discuss certain confidential matters specifically permitted by the Brown Act. The public will be provided an opportunity to comment on any matter to be considered in closed session prior to the Board adjourning into closed session.

ANY MEMBER OF THE AUDIENCE DESIRING TO ADDRESS THE BOARD ON A MATTER ON THE AGENDA: Please raise your hand or step to the podium at the time the Board President announces the item. In order that interested parties have an opportunity to speak, any person addressing the Board will be limited to a maximum of three minutes unless the President of the Board grants a longer period.

BOARD AGENDAS AND MINUTES: Board agendas and minutes are typically posted on the Internet on Friday afternoons preceding a Monday meeting at the following website: https://dphealth.specialdistrict.org/board-meetings.

Materials related to an item on this Agenda submitted to the Board after distribution of the agenda packet are available for public inspection in the District office at 875 E Street, Patterson, CA during normal business hours. Such documents are also available online, subject to staff's ability to post the documents before the meeting, at the following website https://dphealth.specialdistrict.org/board- meetings.

NOTICE REGARDING NON-ENGLISH SPEAKERS: Board of Director meetings are conducted in English and translation to other languages is not provided. Please arrange for an interpreter, if necessary.

REASONABLE ACCOMMODATIONS: In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the Clerk of the Board at (209) 892-8781. Notification 72 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to this meeting.

Cell phones must be silent or set in a mode to not disturb District business during the meeting.

Del Puerto Health Care District

BOARD OF DIRECTORS' MEETING

City Hall, 1 Plaza Circle, City Council Chambers

Monday, March 09, 2026 @ 6:00 PM

1. **Call to Order & Roll Call**
2. **Pledge of Allegiance**
3. **Reading the Vision, Mission, and Value Statements**

   Vision: "A locally cultivated, healthier community."

   Mission: "To provide, promote, and partner in quality healthcare for all."

   Values: "Compassion – Commitment – Excellence"
4. **Declarations of Conflict** *[Board members disclose any conflicts of interest with agenda items]*
5. **Approval of Agenda** **ACTION**

   *[*Directors may request moving any consent calendar item to the regular calendar or change the order of the agenda items.]*
6. **Public Comment – Items not on the Agenda**
7. **Presentations** – Public Comment taken following each presentation.
   A. Donation from Larry & Joyce Beuhner to the Del Puerto Hospital Foundation
   B. NAMIWalks Stanislaus: March Planning & Event Budget (event is April 25, 2026)
8. **Consent Calendar** – Public Comment is taken prior to Board Action **ACTION**
   A. *Approve Board of Directors Meeting Minutes – February 09, 2026
   B. *Approve Finance Committee Meeting Minutes – January 21, 2026
   C. *Approve Finance Reports and Warrants – January 2026
   D. *Accept February Written Department Reports – 1. Admin, 2. Ambulance, 3. Health Center, 4. HR
9. **Regular Calendar** – The Board President will open public comment for each item before discussion and/or action.
   A. **Any Consent Calendar items moved to the Regular Calendar* **ACTION**
   B. FY24-25 Net Income Allocation to Reserve Accounts **ACTION**
   C. FY25-26 Budget Mid-Year Adjustments **ACTION**
   D. Support for AB 2282 (Alanis) (2025–2026 Regular Session) To Authorize Emergency Stabilization Services In Patterson **ACTION**
   E. Consideration of engaging a contract lobbyist for AB 2282 Emergency stabilization services in Patterson **ACTION**
   F. Consideration of Policy 3110 Employee Appreciation and Recognition Program **ACTION**
   G. Resignation of Board Member Luis Avila, Zone 1, and Appointment of Ad Hoc Committee to Review of Board Applications **ACTION**
   H. Mural artwork on block wall at 9th and Las Palmas
10. **Department Reports**
    A. Board Members – Reports on Activities or Topic Requests for Future Meeting
    B. Construction Costs Brief
11. **Closed Session** *The Board may recess to closed session for matters permitted by law. Actions taken will be reported in open session. Public comment on closed session items, prior to recess, is limited to three minutes unless extended by the Board President.]*
    A. Conference with Legal Counsel – Existing Litigation § 54956.9(b)
    Building Industry Association of the Greater Valley v. Del Puerto Health Care District, Board of Directors of the Del Puerto Health Care District, Does 1-100 [CV-25-006753].

    B. Conference with Legal Counsel – Anticipation of Litigation § 54956.9(b)
    One potential case.

Del Puerto Health Care District
BOARD OF DIRECTORS' MEETING
City Hall, 1 Plaza Circle, City Council Chambers
Monday, March 09, 2026 @ 6:00 PM

C. Health & Safety Code 321069(c)(2) District Health Care Trade Secret (i.e., necessary to initiate a new district service or program or add a district health care facility and, if prematurely disclosed, create a substantial probability of depriving the district of a substantial economic benefit). Anticipated disclosure: March 2026.

12. Return to Open Session & Report of Any Action(s) Taken

13. **Upcoming Regular Board and Standing Committee Meeting Dates**

	Finance: Wed, Mar 25-5:30 PM, District Office	Board: Mon, Mar 23-6:00 PM, City Hall
Board: Mon, Apr 13-7:00 PM, City Hall	Finance: Wed, Apr 29-5:30 PM, District Office	Board: Mon, Apr 27-6:00 PM, City Hall
Board: Mon, May 11-7:00 PM, City Hall	Finance: Wed, May 27-5:30 PM, District Office	Board: ~~Mon, May 25~~ Canceled Due To Holiday

14. **Adjourn**

Del Puerto Health Care District

NAMIWalks Stanislaus – February 2026 Progress Update

Significant progress was made in February toward organizing the inaugural **NAMIWalks Stanislaus**, scheduled for **Saturday, April 25, 2026, at Patterson Community Stadium**.

Key accomplishments during February include:

Event Planning and Coordination

- Confirmed the event location and general program schedule for Walk Day, including registration, opening ceremonies, community speakers, and the walk itself.
- Continued coordination with NAMI Stanislaus leadership and the event planning team to align roles and responsibilities for the inaugural event.
- Began planning the event layout at Patterson Community Stadium, including walk route, vendor/resource fair area, stage location, and community activity areas.

Community Outreach and Promotion

- Distributed event flyers throughout Patterson and the surrounding community to begin raising awareness of the upcoming event.
- Issued the first press release announcing the NAMIWalks Stanislaus event and inviting community participation.
- Initiated outreach to local partners to recruit informational booths, vendors, and community organizations to participate in the resource fair portion of the event.

Sponsorship and Donations

- Began outreach to local businesses for event sponsorships and in-kind donations.
- Secured a commitment from the Patterson Starbucks location to donate coffee for the morning of the walk.
- Initiated discussions with additional local businesses regarding donated refreshments and event-day supplies.

Event Experience Planning

- Identified potential entertainment for Walk Day and began securing a local DJ for music and announcements.
- Began planning participant engagement activities including music, a community resource fair, and a family-friendly kid zone to encourage participation from families and youth.

Marketing and Participant Engagement

- Continued coordination with NAMI National regarding marketing tools, event website promotion, and participant outreach resources associated with the national NAMIWalks program.
- Began exploring promotional activities to encourage early registration and team formation.

The February work focused on establishing the foundational logistics and community awareness needed for a successful first-year event. Planning efforts will intensify in March as sponsorship outreach, volunteer recruitment, and participant registration continue to expand.

NAMI Walks

MENTAL HEALTH for all

NAMIWalk
Stanislaus

Event Date	**4/25/2026**
Event Goal	**$15,000**
Sponsorship Dollars	**$5,250**
Team & Walker Dollars	**$9,750**
Walk Budget	**$1,500**

Expense Category	Acutal Expense Amount	Average Price	Quantity Needed	Potential Budget Needed	Notes
Venue (all costs included)	$500.00	$500 - $1,000	1	750	
Police/EMT	$0.00	$30	2	$60	Not all venues will require police/EMT
Stage	$0.00	$250	1	$250	Some venues will provide a stage or land elevation to use in place of a stage
Tents	$0.00	$90 - $110	10	100	Some venues will provide tents. Prices will vary on size of tent.
Tables	$0.00	$10	10	$100	Some venues will provide tables
Chairs	$0.00	$2	20	$35	Some venues will provide chairs
Portable Restrooms	$0.00	$200	3	$600	Some venues will provide bathroom access
Portable Hand Washing Station	$0.00	$150	3		
Generator	$0.00	$90	1	$90	Some venues may have electric. If not, a generator can be rented. Home Depot generator rentals are reasonably priced.
Gas for Generator Return	$0.00	$20	1		Some rentals require filled gas when returning rental
DJ/Sound System/Entertainment	$500.00	$250	1	$250	DJ should provide sound system
Trash/Trash Disposal Service		$100 - $300	4-5 trash bins, plus trash bags	200	Most venues will provide trash removal for free
Drinks (Water, Gatorade, Juice, etc.)	$100.00	$20	3	$60	
Snacks (Bananas, Granola Bars, etc.)	$100.00	$15	3	$45	
Extra Walk Star Recognition		$100	N/A	$100	
Cultivation Events (Kickoff, Rallies, Committee Meetings and Team Captains Meetings)	$0.00	$500	N/A	$200	These expenses will vary by event.
Signage - Signs	$200.00	$15	10	$150	Reminder to get "H" stakes. You can order them from the national vendor.
Signage - Banners	$300.00	$90	1	$90	
Event Day Decorations (Balloons, Arch, etc.)	$200.00	$60 - $100	N/A	80	
Photographer and/or Videographer		$200	1	$200	
Printing Backs of T-shirts	$200.00	$0.99	200	$198.00	National vendor price
Paid Marketing Efforts		$150	1	$150	
Marketing Material Printing and Postage	$300.00	$20	1	$20	
Miscellaneous	$200.00	$100	1	$100	
Petty Cash		$100	1	$100	It is a good idea to have some petty cash on hand during your event.
Total Expenses	$2,600.00			$ 3,928.00	
Remaining Budget	-$1,100				

Fill in your 2026 Expenses - DPHCD	**$ 6,150.00**
** In-Kind Donations are encouraged!**	
Walk Manager	$6,000
Particicpation Ribbons	150

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9, 2026

8. Consent Calendar

Department: Chief Executive Office — CEO Concurrence: Yes

Consent Calendar: Yes — 4/5 Vote Required: No

SUBJECT: **Consent Calendar**

STAFF REPORT: The following items are presented for the consent calendar:

A. *Approve Board of Directors Meeting Minutes – February 09, 2026
B. *Approve Finance Committee Meeting Minutes – January 21, 2026
C. *Approve Finance Reports and Warrants – January 2026
D. *Accept Written Department Reports – 1. Admin, 2. Ambulance, 3. Health Center, 4. HR

RECOMMENDED BOARD ACTION:

ROLL CALL REQUIRED: NO

RECOMMENDED MOTION: *I move that the Board of Directors adopt the consent calendar with [Items A through [__].*

or

I move that the Board of Directors adopt the consent calendar with Items A through [__], [but excluding Item _____].

Motion Made By	*Motion*	*Second*	*Aye*	*No*	*Abstain*	*Absent*
Director Avila						
Director Gomez						
Director Traore						
Director Ramirez						
Director Campo						

I, the undersigned Clerk of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of an action by the Board at a meeting on the 9th day of March, 2025.

_____

Ma Traore, Secretary of the Board of Directors
Del Puerto Health Care District

BOARD OF DIRECTORS
Becky Campo, President
Luis Avila, Vice-President
Ma Traore, Secretary
Sylvia Ramirez, Treasurer
Reyna Gomez, Director
PO Box 187, Patterson, CA 95363
Phone (209) 892-8781 Fax (209) 892-3755

BOARD OF DIRECTORS' MEETING MINUTES
Monday, February 09, 2026 @ 7:00 PM

1. **Call to Order at 7:00 PM by Vice President Reyna Gomez.**
2. **Pledge of Allegiance**

Directors Present: Vice President Reyna Gomez
Treasurer Sylvia Ramirez
Secretary Ma Traore

Directors Absent: President Becky Campo
Director Luis Avila

Staff Present: CEO Karin Freese, Ph.D.
Ambulance Director Paul Willette
Human Resources Manager Robert Trefault
Health Center Manager Suzie Benitez
Financial Accounting Manager/Board Clerk Maria Reyes-Palad

District Legal Council: Dave Ritchie, Cole Huber, LLP

Members of the Public: No members of the public present.

3. **Reading of the Vision, Mission, and Value Statements**
   Vision: *"A locally cultivated, healthier community."*
   Mission: *"To provide, promote, and partner in quality healthcare for all."*
   Values: *"Compassion – Commitment – Excellence"*
4. **Declarations of Conflict** - None
5. **Approval of Agenda**

Motion: To approve the agenda with removing Item 8.C.
M/S: Ramirez/Traore
Ayes: Gomez, Ramirez, Traore
Nays: None
Abstain: None
Absent: Campo, Avila
Motion: Passed

6. **Public Comment –** No members of the public present.
7. **Presentations/Reports** – Public Comment taken following each presentation.
   A. NAMIWalks update
   The CEO reported that the District has received approval from National Alliance on Mental Illness (NAMI) to host the inaugural **NAMI Walks Stanislaus** event in partnership with NAMI Stanislaus.

   The walk will be held on **Saturday, April 25, from 9:00 a.m. to 12:00 p.m.** at the Patterson Community Stadium. The event theme is *"You Are Not Alone."* While fundraising will benefit NAMI Stanislaus, the primary focus this year is community awareness and participation.

Del Puerto Health Care District
BOARD OF DIRECTORS' MEETING
City Hall, 1 Plaza Circle, City Council Chambers
Monday, February 09, 2026 @ 7:00 PM

A multi-agency planning committee has been formed. The District will contract with Monique Whitworth as Walk Manager at $25 per hour, not to exceed $6,000. Sponsorships will be sought to offset costs. Board members expressed support for the event.

8. **Consent Calendar** – Public Comment is taken prior to Board Action

A. * Approve Board of Directors Meeting Minutes – January 26, 2026
B. *Accept Written Strategic Plan Monthly Update
~~C. *Removed~~
~~D.~~ *Adopt Policy #2001 ACH, EFT, Direct Deposit Security

Motion: To approve the consent calendar removing Item C as presented.
M/S: Traore/Ramirez
Ayes: Ramirez, Gomez, Traore
Nays: None
Abstain: None
Absent: Campo, Avila
Motion: Passed

9. **Regular Calendar**

A. * *Any Consent Calendar items moved to the Regular Calendar* None

B. **Adjustment to Ambulance Rate Schedule** – first since 2017

The CEO presented a proposed adjustment to the District's ambulance rate schedule, noting that rates have not been increased since 2017. Staff identified that annual CPI-based adjustments (San Francisco CPI) were available but had not been utilized.

Due to declining reimbursement from commercial payers and uncertainty surrounding supplemental revenue programs, including the Public Provider Ground Emergency Medical Transport (GEMT) Intergovernmental Transfer (IGT) and related funding programs, staff conducted a rate analysis. This included reviewing CPI trends and comparing rates with other Stanislaus County providers.

Staff is proposing an approximate 30% increase to base rates. The CEO emphasized that the District does not typically receive full billed charges and that uninsured patients are charged no more than Medicare or Medi-Cal rates, consistent with existing charity care policies.

The proposed rate adjustment is pending approval by the Stanislaus County Board of Supervisors, anticipated later this month. Going forward, the District intends to implement annual CPI adjustments to avoid significant future increases.

Motion: To approve the proposed ambulance rate increases and authorize staff to implement the updated rate schedule.
M/S: Ramirez/Traore
Ayes: Ramirez, Gomez, Traore
Nays: None
Abstain: None
Absent: Campo, Avila
Motion: Passed

C. **Approve Copier Replace Purchase**

Del Puerto Health Care District
BOARD OF DIRECTORS' MEETING
City Hall, 1 Plaza Circle, City Council Chambers
Monday, February 09, 2026 @ 7:00 PM

The CEO presented a request to replace an outdated copier that has failed. Staff obtained government/bulk pricing through a local vendor and identified the Ricoh IM C4510 at a cost of approximately $7,450 plus tax.

Staff recommends a cash purchase rather than leasing to avoid interest and additional fees. Funds would be allocated from the Asset Replacement Fund, which currently maintains a balance of approximately $1 million.

A maintenance agreement will be added to ensure service coverage. The copier will include color capability with restricted access controls. Board approval of the capital expenditure was requested.

Motion: To approve the purchase of a Ricoh IM C4510 as presented from the Asset Replacement Fund.
M/S: Traore/Ramirez
Ayes: Ramirez, Gomez, Traore
Nays: None
Abstain: None
Absent: Campo, Avila
Motion: Passed – with a Roll Call

D. **Consider e-Consult Partnership with Stanford Health**
The CEO presented a proposed partnership with Stanford Health Care to implement its eConsult program, which allows District providers to obtain specialist input through secure provider-to-provider communication. Specialists respond within 24–72 hours, enabling patients to receive care locally and reducing the need for travel.

The implementation cost is $40,000, with an annual fee of approximately $6,400. The program would integrate with the District's EHR and be available to all patients. Approximately 85% of cases are resolved through eConsult without requiring in-person specialty referral.

Board members discussed potential alternatives, including programs through Health Plan of San Joaquin, and requested a comparison of options and further evaluation of costs and benefits before proceeding. Staff will return with additional information and potential negotiations.

E. **Establish Internal Ambulance Billing Services**
The CEO proposed transitioning ambulance billing in-house due to the closure of the District's current vendor, SEMSA Riggs. The District plans to hire experienced billing staff to support the transition and utilize Zoll Billing software, which integrates with the existing EMS system.

Bringing billing in-house is projected to reduce costs by approximately 10% and avoid potential payment delays associated with switching to another external vendor. Implementation is anticipated between May 1 and July 1.

Board approval was requested to establish the internal ambulance billing function under the Finance Department.

Del Puerto Health Care District
BOARD OF DIRECTORS' MEETING
City Hall, 1 Plaza Circle, City Council Chambers
Monday, February 09, 2026 @ 7:00 PM

Motion: To approve the establishment of an in-house ambulance billing department, including authorization for one (1) billing FTE.
M/S: Ramirez/Traore
Ayes: Ramirez, Gomez, Traore
Nays: None
Abstain: None
Absent: Campo, Avila
Motion: Passed – with a Roll Call

10. **Department Reports**
    A. **Board Members – Reports on Activities or Topic Requests for Future Meeting**
    The CEO presented the upcoming conference schedule for the remainder of the current fiscal year and the first six months of the next fiscal year. Past conferences were noted in black and white, with upcoming events highlighted.

    Board members were encouraged to consider attending training, as well as CSDA Legislative Days and other relevant conferences. Staff also identified industry-specific trainings, including ambulance billing education, to support operational needs.

    Board members were asked to review their availability and notify staff of conferences they are interested in attending. The District budgets for each Board member to attend at least one conference annually.

11. **Closed Session** *Entered at 7:49PM.*

    A. Conference with Legal Counsel – Existing Litigation § 54956.9(b)
    Building Industry Association of the Greater Valley v. Del Puerto Health Care District, Board of Directors of the Del Puerto Health Care District, Does 1-100 [CV-25-006753].

    B. Conference with Legal Counsel – Anticipation of Litigation § 54956.9(b)
    One potential case.

    C. Health & Safety Code 321069(c)(2) District Health Care Trade Secret (i.e., necessary to initiate a new district service or program or add a district health care facility and, if prematurely disclosed, create a substantial probability of depriving the district of a substantial economic benefit). Anticipated disclosure: March 2026.

    D. Conference with Real Property Negotiations § 54956.8
    Property: APN: 048-047-002-000
    Agency Negotiators: Randy Brekke, Karin Freese
    Negotiating Party: Lucero Rodriguez

12. **Return to Open Session at 8:49 PM. No reportable action; direction given to staff.**

Del Puerto Health Care District
BOARD OF DIRECTORS' MEETING
City Hall, 1 Plaza Circle, City Council Chambers
Monday, February 09, 2026 @ 7:00 PM

13. **Review of Upcoming Regular Board and Standing Committee Meeting Dates**

Board: Mon, Mar 9-7:00 PM, City Hall	Finance: Wed, Mar 18-8:30 AM, DPHC Conf Rm	Board: Mon, Mar 23-6:00 PM, City Hall
Board: Mon, Apr 13-7:00PM, City Hall	Finance: Wed, Apr 22-8:30 AM, DPHC Conf Rm City Hall	Board: Mon, Apr 27-6:00 PM, City Hall
Board: Mon, May 11-7:00 PM, City Hall	Finance: Wed, May 20-8:30 AM, District Office	Board: ~~Mon, May 25~~ Canceled Due To Holiday

14. **Meeting Adjourned 8:50 PM**

_____
Ma Traore, Board Secretary

_____
Date Signed

Del Puerto Health Care District

NAMIWalks Stanislaus 2026 — Event Plan

Theme: *You Are Not Alone*

Event Date: April 25, 2026 – 9:00 AM to 12:00 PM

Location: Patterson Community Stadium

Host Partners: NAMI Stanislaus & Del Puerto Health Care District

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FEBRUARY 2026 — FOUNDATION & COMPLIANCE

- Confirm Walk Manager training ~~and designation~~
- ~~Execute NAMIWalks License and First-Year Addendum requirements~~
- Complete National onboarding and establish monthly 1:1 cadence
- ~~Finalize event date, site, and core committee~~
- Launch NAMIWalks DonorDrive website
- Initiate early outreach to schools, City, and community partners

Board Value: Ensures national compliance, risk mitigation, and early momentum

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MARCH 2026 — COMMUNITY & PARTICIPATION

- Public launch of NAMIWalks Stanislaus
- Recruit teams with emphasis on:
  - Youth and families
  - Schools and student groups
  - Community organizations
- Begin local media outreach and social media promotion
- Confirm permits, insurance, route, and safety planning
- Conduct T-shirt planning meeting with NAMI National

Board Value: Builds visibility, youth engagement, and positive community presence

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APRIL 2026 — EXECUTION & VISIBILITY

- Finalize volunteers, sponsors, and walk-day logistics
- Distribute promotional materials and participant communications
- Secure media attendance and photo coverage
- Receive and prepare participant T-shirts and materials
- Conduct final National Walk Manager check-in

Board Value: Ensures a polished, well-run, family-friendly public event

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APRIL 25, 2026 — WALK DAY

- Community walk celebrating mental health awareness
- Kid-friendly activities and inclusive programming
- Public messaging centered on **"You Are Not Alone"**
- Photo, video, and story capture for post-event communications

Board Value: High-visibility demonstration of District leadership in mental health

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POST-EVENT (APRIL–MAY 2026) — CLOSE-OUT & CONTINUITY

- Enter all donations and complete final accounting
- Issue sponsor, volunteer, and participant thank-yous
- Conduct debrief and lessons-learned review
- Prepare summary report and recommendations for 2027

Board Value: Accountability, transparency, and foundation for an annual flagship event

Del Puerto Health Care District
Confs, Ed Ops, Industry Mtgs
Jan 1, 2025 - Dec 31, 2026

FY2025-26		Event	Date Start	Date End	Location	Board Attendees	Staff Attendees
Industry	*CAA*	*Convention*	*8/18/2025*	*8/22/2025*	*Monterey*		*PW, JW, KF*
Conf	**CSDA**	**Conference**	**8/25/2025**	**8/28/2025**	**Monterey**	**Sylvia, Luis**	**Karin**
Industry	*BETA*	*Annual Member Symposium*	*9/24/2025*	*9/24/2025*	*Palm Desert*		*JR/PW/JW/SB/JG/KF*
Conf	**ACHD**	**Conference**	**9/24/2025**	**9/16/2025**	**San Diego**	**Luis, Reyna, Ma**	**Karin, Suzie, Danae**
Ed	**SDLA**	**Leadership Academy**	**10/5/2025**	**10/8/2025**	**Redding**		
Industry	*NARHC*	*Institute*	*10/20/2025*	*10/22/2025*	*Reno, NV*		*JR/SB/JG/KF*
Ed	**CSDA**	**Board Secretary/Clerk Training**	**10/27/2025**	**10/29/2025**	**Santa Rosa**		**Maria**
Ed	**SDLA**	**Leadership Academy**	**11/16/2025**	**11/19/2025**	**Monterey**	**Sylvia (2nd)**	
Industry	CAA	CAA at the Capital/~~Stars of Life~~	3/3/2026	~~3/4/2026~~	Sacramento		
Legislative	**CSDA**	**Special District Legislative Days**	**4/7/2026**	**4/8/2026**	**Sacramento**		**Karin**
Industry	*AAA*	*Annual Conference/Revenue Cyle Mgmt*	*4/19/2026*	*4/22/2026*	*Las Vegas*		*Karin, Paul*
Ed Op	**SDLA**	**Special District Leadership Academy**	**5/11/2026**	**5/14/2026**	**San Diego**		
Industry	*EMSAAC*	*Conference*	*5/27/2026*	*5/28/2026*	*Universal City*		*Paul, Jim*
Ed Op	**CSDA**	**General Management Leadership Summit**	**6/28/2026**	**6/30/2026**	**Newport Beach**		**Karin**

FY 2026-27		Event	Date Start	Date End	Location	Board Attendees	Staff Attendees
Ed Op	**SDLA**	**Special District Leadership Academy**	**7/19/2026**	**7/22/2026**	**San Rafael**	**Ma (2nd), Reyna (1st)**	
Conf	**CSDA**	**Annual Conference**	**8/24/2026**	**8/27/2026**	**Palm Desert**		**Karin**
Ed Op	**SDLA**	**Special District Leadership Academy**	**9/13/2026**	**9/16/2026**	**San Luis Obispo**		
Industry	*CAA*	*Annual Convention*	*9/23/2026*	*9/24/2026*	*Anaheim*		*Paul, Jim*
Industry	*BETA*	*Annual Member Symposium*	*9/23/2026*	*9/24/2026*	*Palm Desert*		*TBD*
~~*Industry*~~	~~*NARHC*~~	~~*Institute*~~	~~*9/29/2026*~~	~~*10/1/2026*~~	~~*Louisville, KY*~~	~~*n/a*~~	~~*n/a*~~
Conf	**ACHD**	**Annual Conference**	**10/7/2026**	**10/9/2026**	**Monterey**	**Luis**	**Karin**
Ed Op	**CSDA**	**Board Secretary/Clerk Training**	**11/3/2026**	**11/5/2026**	**Santa Barbara**		

DEL PUERTO HEALTH CARE DISTRICT
875 E Street, Patterson, CA 95363
FINANCE MEETING
MINUTES January 21, 2026

1. Call to order/Attendance
The meeting was called to order by Becky Campo, via phone at 8:07 AM

Other Board Members Present: Sylvia Ramirez, on site.

Staff Members Present: Karin Freese, Ph.D., Administrative Director/CEO; Maria Reyes-Palad, Financial Accounting Manager; Paul Willette, Ambulance Director of Operations; and Danae Skinner, Administrative Staff Accountant.

2. Public Participation – there were no comments.

3. Acceptance of Agenda
M/S/C Sylvia Ramirez/Becky Campo to accept the agenda as presented.

4. Finance Report Review

A. Review for Approval: December 18, 2025, Finance Meeting Minutes
M/S/C Sylvia Ramirez/Becky Campo to accept the minutes for December 18, 2025, as presented.

B. Review Financial Reports for December 2025
Maria Reyes-Palad reviewed the Financial Reports for December 2025 and answered all questions regarding the Financial Reports.
M/S/C Sylvia Ramirez/Becky Campo approved to recommend that the Board accept the December 2025 Financial Reports as presented.

C. Review for Recommendation: December 2025 Warrants
Maria Reyes-Palad reviewed the report and answered all questions regarding the Warrants.
M/S/C Sylvia Ramirez/Becky Campo approved to recommend that the Board accept the Warrants as presented.

5. Old Business – NONE

6. New Business

A. Health Management Associates Service Contract
Maria Reyes-Palad and Karin Freese reviewed the Health Management Associates Service Contract and answered all questions regarding the contract to be presented to the Board.
Information Only – No Action Taken.

B. HC Copier Replacement
Danae Skinner reviewed the Copier Replacement Comparison report and answered all questions regarding the recommendation for the replacement copier.
Committee recommends getting service contract information for the copier.
Information Only – No Action Taken.

C. Claim Against District Policy
Karin Freese recapped the Claim Against District Policy.
Information Only – No Action Taken.

7. Accounting and Finance Manager Report

A. Asset Replacement Fund Update
Information Only – No Action Taken

B. Medical Park Update
Committee asked that a summary be presented to the Board.
Information Only – No Action Taken.

C. Set Schedule for Committee Review of Account Reconciliations
Sylvia Ramirez reviewed the Account Reconciliations for November 2025.

8. Meeting adjourned: 8:32 AM

Respectfully submitted,

DEL PUERTO HEALTH CARE DISTRICT
875 E Street, Patterson, CA 95363
FINANCE MEETING
MINUTES January 21, 2026

_____
Sylvia Ramirez, Treasurer

Del Puerto Health Care District
Balance Sheet
As of January 31, 2026

	Jan 31, 26	Dec 31, 25	% Change	Jan 31, 25	% Change	Notes
ASSETS						
Current Assets						
Total Checking/Savings	**8,049,326**	**5,595,616**	**44%**	**6,601,718**	**22%**	
Total Accounts Receivable	1,111,301	2,423,508	(54%)	1,142,448	(3%)	
Total Other Current Assets	171,846	1,321,470	(87%)	179,875	(4%)	
Total Current Assets	9,332,473	9,340,594	(0%)	7,924,041	18%	
Fixed Assets						
Total 151.000 · Capital assets	16,770,552	16,654,481	1%	5,368,313	212%	
Total Fixed Assets	**16,770,552**	**16,654,481**	**1%**	**5,368,313**	**212%**	
Other Assets						
150.000 · Lease Receivable - Non Current	126,309	126,309		208,111	(39%)	
Total Other Assets	126,309	126,309		208,111	(39%)	
TOTAL ASSETS	**26,229,334**	**26,121,384**	**0%**	**13,500,465**	**94%**	
LIABILITIES & EQUITY						
Liabilities						
Total Current Liabilities	930,936	991,501	(6%)	824,724	13%	
Total Long Term Liabilities	11,296,711	11,302,745	(0%)	1,555,594	626%	
Total Liabilities	**12,227,647**	**12,294,246**	**(1%)**	**2,380,318**	**414%**	
Equity						
350.000 · Unrestricted Assets	4,326,638	4,260,410	2%	4,046,772	7%	
Total 360.000 · Assigned Fund Balance	3,299,855	3,366,082	(2%)	2,631,082	25%	
Total 370.000 · Restricted Fund Balance	2,939,232	2,939,232		1,843,723	59%	
390.000 · Net Fixed Assets (Capital)	2,492,762	2,492,762		2,492,762		
Net Income	**943,203**	**768,654**	**23%**	**105,808**	**791%**	***YTD overall result***
Total Equity	14,001,690	13,827,140	1%	11,120,147	26%	
TOTAL LIABILITIES & EQUITY	**26,229,337**	**26,121,386**	**0%**	**13,500,465**	**94%**	

	Jan 31, 26	Dec 31, 25
Month End Cash Balance	$ 8,049,326	$ 5,595,616
101.015 - TCB Keystone C 8641	(179,900)	(181,037)
103.100 - TCB USDA Debt Reserve 7237	(122,995)	(122,994)
370.010 - Mitigation Fees	(1,620,653)	(1,620,653)
360.030 - Asset Replacement Fund	(1,418,855)	(1,485,082)
AP & Payroll Liabilities	(690,871)	(788,860)
UNENCUMBERED CASH	**$ 4,016,052**	**$ 1,396,990**
Percent of Operating Reserve	**214%**	**74%**
# Days Available Cash for Operations	**192.16**	**66.84**
360.070 - Operating Reserve (90 days)	$ 1,881,000	$ 1,881,000
Daily Operating Reserve	$ 20,900	$ 20,900

Del Puerto Health Care District

YTD by Class

July through January 2026

	Total 01 Administration				Total 02 Patterson District Ambulance				Total 03 Del Puerto Health Center			
				Reference: (7/12months = 58.33%)				Reference: (7/12months= 58.33%)				Reference: (7/12months= 58.33%)
	Jul '25 - Jan 26	**Budget**	**Annual Budget**	*% Annual Budget*	**Jul '25 - Jan 26**	**Budget**	**Annual Budget**	*% Annual Budget*	**Jul '25 - Jan 26**	**Budget**	**Annual Budget**	*% Annual Budget*
Ordinary Income/Expense												
Income												
401.000 · Gross Patient Service Revenue					6,175,159	7,034,455	12,059,066	*51.21%*	3,043,290	3,005,470	5,152,235	*59.07%*
403.000 · Adjustments					(4,291,652)	(4,008,534)	(7,367,486)	*58.25%*	(394,857)	(341,629)	(585,649)	*67.42%*
405.000 · Bad Debt					118,764	(302,482)	(518,540)	*-22.90%*	(8,832)	5,944	10,189	*-86.68%*
407.000 · Other Income		377	647		4,815	7,397	12,681	*37.97%*	15,688	4,693	8,045	*195.00%*
Total Income		377	647		2,007,086	2,730,837	4,185,721	*47.95%*	2,655,289	2,674,478	4,584,820	*57.91%*
Gross Profit		377	**647**		2,007,086	2,730,837	**4,185,721**	*47.95%*	2,655,289	2,674,478	**4,584,820**	*57.91%*
Expense												
601.000 · Salaries & Wages	404,922	393,061	673,819	*60.09%*	1,205,417	982,192	1,615,187	*74.63%*	1,040,658	1,073,146	1,839,676	*56.57%*
602.000 · Employee Benefits	99,385	99,983	171,398	*57.99%*	257,174	252,553	432,732	*59.43%*	267,363	323,162	553,203	*48.33%*
603.000 · Professional Fees	216,510	75,520	106,606	*203.09%*	8,285	19,331	33,138	*25.00%*	280,009	276,759	467,701	*59.87%*
604.000 · Purchased Services	8,214	9,253	15,862	*51.78%*	147,253	145,436	249,320	*59.06%*	276,879	301,405	516,332	*53.62%*
605.000 · Supplies	4,521	3,000	5,143	*87.91%*	65,999	58,303	99,949	*66.03%*	68,955	67,334	115,430	*59.74%*
606.000 · Utilities	4,030	4,802	8,232	*48.96%*	16,675	16,080	27,567	*60.49%*	23,188	28,594	49,018	*47.31%*
607.000 · Rental and Lease	3,850	1,127	1,933	*199.21%*			0		1,512	1,598	2,738	*55.22%*
608.000 · Insurance Coverages	30,665	29,411	50,092	*61.22%*	149,375	159,080	266,659	*56.02%*	87,930	86,564	147,411	*59.65%*
609.000 · Maintenance & Repairs	1,346	3,816	6,542	*20.57%*	70,157	66,719	114,379	*61.34%*	20,810	25,768	44,174	*47.11%*
610.000 · Depreciation and Amortization	6,831	5,549	9,512	*71.81%*	117,895	154,474	264,813	*44.52%*	55,385	52,646	90,250	*61.37%*
611.000 · Other operating expenses	78,608	78,032	133,748	*58.77%*	338,700	342,049	501,262	*67.57%*	78,693	71,777	123,029	*63.96%*
699.999 · Admin Cost Share Allocation	(807,349)	(659,233)	(1,130,113)	*71.44%*	403,674	329,617	565,057	*71.44%*	403,674	329,616	565,057	*71.44%*
Total Expense	51,533	44,321	**52,773**	*97.65%*	2,780,605	2,525,835	**4,170,063**	*66.68%*	2,605,056	2,638,369	**4,514,018**	*57.71%*
Net Ordinary Income	(51,533)	(43,944)	(52,126)	*98.86%*	(773,518)	205,002	15,658	*-4940.14%*	50,233	36,109	70,801	*70.95%*
Other Income/Expense												
Other Income												
701.000 · District Tax Revenues					148,155	148,152	253,975	*58.33%*				
702.000 · Impact Mitigation Fees												
703.000 · Investment Income											(49,000)	*0.00%*
704.000 · Interest Expense									(28,189)	(28,583)		
705.000 · Tenant Revenue												
710.000 · Misc Other Income	2,807	1,586	2,719						4,441	2,304	3,950	
Total Other Income	2,807	1,586	2,719		148,155	148,152	253,975	*0.00%*	(23,747)	(26,279)	(45,050)	*-9.86%*
Other Expense												
802.000 · Keystone District Expense												
804.000 · Non-Allocable District Expenses	97,089											
810.000 · Misc Other Expense	500											
Total Other Expense	97,589										(45,050)	
Net Other Income	(94,782)	1,586			148,155	148,152	253,975	*0.00%*	(23,747)	(26,279)	(45,050)	*0.00%*
Net Income	**(146,315)**	**(42,358)**	**(49,407)**	*-197.52%*	**(625,363)**	**353,154**	**269,633**	*0.00%*	**26,486**	**9,830**	**25,751**	*0.00%*

Del Puerto Health Care District

YTD by Class

July through January 2026

	Total 090 Other Non-Operating		Total 096 Keystone Bldg C				OVERALL	
	Jul '25 - Jan 26	Annual Budget	Jul '25 - Jan 26	Jul - Dec 25	Jul '25 - Jan 26	Budget	FY 25-26 OVERALL BUDGET	% Budget
Ordinary Income/Expense								
Income								
401.000 · Gross Patient Service Revenue					9,218,449	10,039,925	17,211,301	53.56%
403.000 · Adjustments					(4,686,509)	(4,350,163)	(8,647,135)	54.20%
405.000 · Bad Debt					109,932	(296,538)	(508,351)	-21.63%
407.000 · Other Income	3,195				23,698	12,467	715,373	3.31%
Total Income	3,195				4,665,570	5,405,692	8,771,188	53.19%
Gross Profit	3,195				4,665,570	5,405,692	**8,771,188**	53.19%
Expense								
601.000 · Salaries & Wages					2,650,997	2,448,399	4,128,682	64.21%
602.000 · Employee Benefits					623,922	675,698	1,157,333	53.91%
603.000 · Professional Fees					504,804	371,610	607,445	83.10%
604.000 · Purchased Services					432,346	456,094	781,515	55.32%
605.000 · Supplies					139,475	128,637	220,522	63.25%
606.000 · Utilities					43,893	49,476	84,817	51.75%
607.000 · Rental and Lease					5,362	2,725	4,671	114.79%
608.000 · Insurance Coverages					267,970	275,055	464,162	57.73%
609.000 · Maintenance & Repairs					92,313	96,303	165,095	55.92%
610.000 · Depreciation and Amortization			11,997	11,997	192,108	212,669	364,575	52.69%
611.000 · Other operating expenses					496,001	491,858	758,039	65.43%
699.999 · Admin Cost Share Allocation								
Total Expense			11,997	11,997	5,449,191	5,208,526	**8,736,855**	62.37%
Net Ordinary Income	3,195		(11,997)	(11,997)	(783,620)	197,167	34,333	-2282.39%
Other Income/Expense								
Other Income								
701.000 · District Tax Revenues	1,084,384	1,858,945			1,232,539	1,232,537	2,112,920	58.33%
702.000 · Impact Mitigation Fees	87,270				87,270			
703.000 · Investment Income	99,352	80,000			99,352	46,667	80,000	124.19%
704.000 · Interest Expense					(28,189)	(28,583)	(49,000)	57.53%
705.000 · Tenant Revenue			46,044	46,044	46,044		-	
710.000 · Misc Other Income			387,642	387,642	394,890	3,890	6,669	5921.47%
Total Other Income	1,271,006	1,938,945	433,686	433,686	1,831,907	1,254,510	2,150,588	85.18%
Other Expense								
802.000 · Keystone District Expense			7,494	7,494	7,494			
804.000 · Non-Allocable District Expenses					97,089			
810.000 · Misc Other Expense					500			
Total Other Expense			7,494	7,494	105,083			
Net Other Income	1,271,006	1,938,945	426,192	426,192	1,726,824	1,254,510	2,150,588	80.30%
Net Income	**1,274,201**	**1,938,945**	**414,195**	**414,195**	**943,204**	**1,451,677**	**2,184,922**	43.17%

Del Puerto Health Care District
Warrants by Bank Account
January 2026

Type	Date	Num	Name	Credit	Notes
101.000 · Cash and cash equivalents					
101.010 · Tri Counties Bank					
101.011 · TCB-Operating Checking 1739					
Check	01/31/2026			25.95	
Bill Pmt -Check	01/05/2026	ACH Dr. R	MD - Rodriguez, Jose	38,188.33	
Bill Pmt -Check	01/27/2026	ACH-BETA	Beta Healthcare - Workers Comp	9,299.00	
Bill Pmt -Check	01/27/2026	ACH-BETA	Beta Healthcare Group	18,828.58	
Bill Pmt -Check	01/13/2026	EFT	Stericycle	201.02	
Bill Pmt -Check	01/13/2026	EFT	Stericycle	670.82	
Bill Pmt -Check	01/13/2026	EFT	TID Turlock Irrigation District +06	1,108.48	
Bill Pmt -Check	01/13/2026	EFT	Verizon Wireless	910.98	
Bill Pmt -Check	01/05/2026	EFT	Umpqua Bank	11,421.49	
Bill Pmt -Check	01/20/2026	EFT	Athena Health, Inc.	19,328.12	
Bill Pmt -Check	01/20/2026	EFT	City Of Patterson-H2O, sewer, garbag	609.65	
Bill Pmt -Check	01/20/2026	EFT	Frontier-3755	387.87	
Bill Pmt -Check	01/20/2026	EFT	Stericycle / Shred-it	127.67	
Bill Pmt -Check	01/20/2026	EFT	Stericycle / Shred-it	370.12	
Bill Pmt -Check	01/27/2026	EFT	ABW Medical, LLC	10,131.00	
Bill Pmt -Check	01/27/2026	EFT	PG&E	227.00	
Bill Pmt -Check	01/13/2026	ACH-HDR1	HDR Architecture Inc	150,502.40	*CIP-Healthcare Campus*
Bill Pmt -Check	01/14/2026	ACH-HDR2	HDR Architecture Inc	75,000.00	*CIP-Healthcare Campus*
Bill Pmt -Check	01/13/2026	ACH 1-13	Data Path, Inc	6,846.97	
Bill Pmt -Check	01/13/2026	ACH 1-13	Staples Advantage	414.93	
Bill Pmt -Check	01/21/2026	ACH 1-21	Airgas USA, LLC	85.76	
Bill Pmt -Check	01/21/2026	ACH 1-21	Amazon	582.40	
Bill Pmt -Check	01/21/2026	ACH 1-21	Pacific Records Management	378.62	
Bill Pmt -Check	01/27/2026	ACH 1-27	Advanced Linen Service	857.39	
Bill Pmt -Check	01/27/2026	ACH 1-27	Amazon	248.85	
Bill Pmt -Check	01/27/2026	ACH 1-27	Staples Advantage	97.41	
Bill Pmt -Check	01/14/2026	ACH-AB170	DHCS (PP-GEMT, IGT)	97,805.75	*Qtr Bill*
Bill Pmt -Check	01/12/2026	33946	Bound Tree Medical LLC	1,970.90	
Bill Pmt -Check	01/12/2026	33947	DeHart Plumbling Heating & Air Inc	230.00	
Bill Pmt -Check	01/12/2026	33948	FP Mailing Solutions	61.33	
Bill Pmt -Check	01/12/2026	33949	Grant Thornton	19,610.00	
Bill Pmt -Check	01/12/2026	33950	GreenWorks Janitorial Services	4,290.00	
Bill Pmt -Check	01/12/2026	33951	J.B. Anderson Land Use Planning	5,879.50	
Bill Pmt -Check	01/12/2026	33952	Jorgensen & Co.	679.52	
Bill Pmt -Check	01/12/2026	33953	Life-Assist	746.84	
Bill Pmt -Check	01/12/2026	33954	McKesson Medical Surgical Inc.	386.27	
Bill Pmt -Check	01/12/2026	33955	MurphyAustin	7,395.00	*CIP-Healthcare Campus*
Bill Pmt -Check	01/12/2026	33956	NF Public Affairs	2,500.00	*CIP-Healthcare Campus*
Bill Pmt -Check	01/12/2026	33957	North Star	3,770.00	*CIP-Healthcare Campus*
Bill Pmt -Check	01/12/2026	33958	Paul Oil Co., Inc.	2,305.11	
Bill Pmt -Check	01/12/2026	33959	Physicians Service Bureau	393.96	
Bill Pmt -Check	01/12/2026	33960	Ray's Radio Shop	1,211.38	
Bill Pmt -Check	01/12/2026	33961	Rush Truck Center Ceres	6,683.39	
Bill Pmt -Check	01/12/2026	33962	Stanislaus County Department of Agri	911.00	
Bill Pmt -Check	01/12/2026	33963	Stanislaus County EMS Agency	362.00	
Bill Pmt -Check	01/12/2026	33964	Westside Landscape & Concrete	302.00	
Bill Pmt -Check	01/12/2026	33965	Yosemite Lock & Key	18.48	
Bill Pmt -Check	01/12/2026	33966	Zoll	1,360.03	
Bill Pmt -Check	01/20/2026	33967	Bound Tree Medical LLC	1,140.88	
Bill Pmt -Check	01/20/2026	33968	City Of Patterson-H2O, sewer, garbag	803.66	
Bill Pmt -Check	01/20/2026	33969	Crescent Supply	115.67	
Bill Pmt -Check	01/20/2026	33970	J.B. Anderson Land Use Planning	9,536.30	
Bill Pmt -Check	01/20/2026	33971	Life-Assist	2,443.55	
Bill Pmt -Check	01/20/2026	33972	Malm Fagundes LLP	904.00	
Bill Pmt -Check	01/20/2026	33973	McKesson Medical Surgical Inc.	1,553.30	

Del Puerto Health Care District
Warrants by Bank Account
January 2026

Type	Date	Num	Name	Credit	Notes
Bill Pmt -Check	01/20/2026	33974	Monique Whitworth	600.00	
Bill Pmt -Check	01/20/2026	33975	Patterson City Tow Service	250.00	
Bill Pmt -Check	01/20/2026	33976	Workbench True Value Hdwe.	105.77	
Check	01/27/2026	33977	REFUND - Ambulance:REFUND - Cor	693.75	
Check	01/27/2026	33978	REFUND - Ambulance:REFUND - Agu	20.00	
Check	01/27/2026	33979	REFUND - Ambulance:REFUND - Byr	150.00	
Check	01/27/2026	33980	REFUND - Ambulance:REFUND - Pla	50.00	
Check	01/27/2026	33981	REFUND - Ambulance:REFUND - Sou	75.00	*Refund PT overpaid account*
Check	01/27/2026	33982	REFUND - Ambulance:REFUND - Trin	473.54	
Check	01/27/2026	33983	REFUND - Ambulance:REFUND - Sut	1,840.00	
Check	01/27/2026	33984	REFUND - Ambulance:REFUND - Nor	652.41	
Check	01/27/2026	33985	REFUND - Ambulance:REFUND - Nor	455.76	
Bill Pmt -Check	01/27/2026	33986	Cole Huber (Cota Cole)	6,706.40	
Bill Pmt -Check	01/27/2026	33987	Language Line	316.21	
Bill Pmt -Check	01/27/2026	33988	Liquid Spring	501.74	
Bill Pmt -Check	01/27/2026	33989	McKesson Medical Surgical Inc.	196.65	
Bill Pmt -Check	01/27/2026	33990	Paul Oil Co., Inc.	3,139.97	
Bill Pmt -Check	01/27/2026	33991	Solutions Group	1,336.25	
Bill Pmt -Check	01/27/2026	33992	Terminix	894.40	
Bill Pmt -Check	01/29/2026	33994	Sacramento State	93,030.04	*2025 Community Health Needs Assessment*
Total 101.011 · TCB-Operating Checking 1739				633,708.52	
101.012 · TCB-Payroll Account 2999					
Liability Check	01/14/2026		Payroll Direct Deposit	123,258.31	
Liability Check	01/28/2026		Payroll Direct Deposit	116,033.41	
Liability Check	01/15/2026	EFT	Corebridge / AIG / VALIC	12,470.66	
Liability Check	01/15/2026	EFT	CALPERS	2,007.89	
Liability Check	01/29/2026	EFT	Corebridge / AIG / VALIC	9,899.39	
Liability Check	01/29/2026	EFT	CALPERS	2,007.89	
Liability Check	01/29/2026	EFT	CA Choice	46,373.88	
Liability Check	01/29/2026	EFT	Principal Life Insurance Co	8,141.58	
Liability Check	01/15/2026	E-pay	EDD State of California	3,167.59	
Liability Check	01/15/2026	E-pay	EDD State of California	9,620.92	
Liability Check	01/15/2026	E-pay	Internal Revenue Service	45,028.37	
Liability Check	01/29/2026	E-pay	EDD State of California	8,821.09	
Liability Check	01/29/2026	E-pay	Internal Revenue Service	41,230.91	
Liability Check	01/15/2026	26088	Stanislaus County Sheriff - Garn 37	100.00	
Liability Check	01/15/2026	26089	Stanislaus County Sheriff	667.23	
Liability Check	01/15/2026	26090	United Steelworkers	562.59	
Liability Check	01/15/2026	26091	Franchise Tax Board	350.16	
Paycheck	01/29/2026	26092	Employee Payroll	841.22	
Liability Check	01/29/2026	26093	Stanislaus County Sheriff - Garn 37	100.00	
Liability Check	01/29/2026	26094	United Steelworkers	520.12	
Liability Check	01/29/2026	26095	AFLAC	1,215.44	
Liability Check	01/29/2026	26096	LegalShield	534.55	
Total 101.012 · TCB-Payroll Account 2999				432,953.20	
101.015 · TCB - Keystone C 8641					
Bill Pmt -Check	01/20/2026	10463	Brekke Real Estate Inc	1,500.00	*Keystone Sale Contract revie*
Total 101.015 · TCB - Keystone C 8641				1,500.00	
Total 101.010 · Tri Counties Bank				1,068,161.72	
Total 101.000 · Cash and cash equivalents				1,068,161.72	
103.000 · Restricted Funds					
103.100 · TCB-USDA Debt Reserve 7237					
Check	01/15/2026	EFT	USDA Rural Development Loan-EFT	10,060.00	
Total 103.100 · TCB-USDA Debt Reserve 7237				10,060.00	
Total 103.000 · Restricted Funds				10,060.00	

Del Puerto Health Care District
Warrants by Bank Account
January 2026

Type	Date	Num	Name	Credit	Notes
TOTAL				**1,078,221.72**	
		Less; Irregular Items			
			CIP-Healthcare Campus	239,167.40	
			Other Irregular Items	196,946.25	
				436,113.65	
		NET WARRANTS ISSUED - JANUARY 2026		**642,108.07**	

Del Puerto Health Care District

CEO Report – Dr. Karin Freese
January–February 2026

Executive Overview
The first two months of 2026 marked a period of significant progress for Del Puerto Health Care District, characterized by advancement on multiple fronts: healthcare campus planning, emergency medical services readiness, governance and compliance, financial sustainability, and strategic partnerships. This period focused on translating long-term vision into executable actions while maintaining operational stability and fiscal discipline.

Financial Update – Period Ending January 31, 2026
The District remains in a strong and stable financial position, reporting a gross balance sheet total of $26.23 million, which provides sufficient resources to support ongoing operations and long-term planning. Year-to-date net revenue of $943,204 is aligned with budget expectations, reflecting effective expenditure control and steady operating revenues. This positive performance supports service continuity, manages timing differences in revenue receipts, and enables continued work on the Healthcare and Mixed-Use Campus. Management continues to closely monitor financial trends to ensure alignment with board-approved policies. At this time, no financial action is required from the Board, and overall financial health remains solid.

Healthcare Campus & Facilities Development
During January and February, substantial effort was dedicated to advancing the District's 38.5-acre Healthcare and Mixed-Use Campus. Work included continued coordination with planning consultants, engineers, and legal counsel to prepare the Master Plan submission to the City of Patterson; engagement with City Planning and Community Development staff; refinement of site planning assumptions; and integration of healthcare, senior living, behavioral health, and medical office components into a cohesive long-term framework. These efforts support the creation of a healthcare anchor for the west side of Stanislaus County.

Emergency Medical Services (Patterson District Ambulance)
The District strengthened EMS operations through preparation of regulatory narratives, evaluation of staffing and fatigue-compliant deployment models, affirmation of participation in Stanislaus County Office of Emergency Services disaster planning, and continued focus on sustainable 24/7 operations.

Clinical Services & Health Center Operations
Health Center priorities included maintaining operational continuity, evaluating provider credentialing and onboarding timelines, and aligning current clinic operations with future campus expansion and potential FQHC pathways.

Governance, Compliance & Board Development
Governance effectiveness remained a priority through development of board education frameworks, alignment with Brown Act requirements, and refinement of CEO evaluation timing to better align performance goals with fiscal-year outcomes.

Financial Stewardship & Sustainability
Financial efforts focused on evaluating capital funding gaps, integrating land-use and development impact fee strategies, preparing board-ready financial narratives, and maintaining fiscal discipline amid broader economic pressures.

Community Engagement & Strategic Partnerships
Community engagement included collaboration with organizations such as NAMI Stanislaus, planning support for NAMIWalks Stanislaus, and clear communication regarding healthcare campus progress and community benefits.

Organizational Leadership & Administration
Leadership efforts emphasized cross-department coordination, accountability, and strategic prioritization to balance daily operations with long-term transformational initiatives.

Looking Ahead
Spring 2026 priorities include formal submission of the Healthcare Campus Master Plan, advancement of EMS regulatory approvals, continued governance education, refinement of capital financing strategies, and sustained community engagement.

Ambulance Report
January 2026

Patterson had 275 responses in January resulting in 201 transports. PDA had 255 responses in our response area, and 20 mutual aid responses. PDA responded to the Westside District 14 times which resulted in 9 transports and 6 responses in AMR response area with 6 transports. We regularly post for Westside when they are status 0, which as you might imagine occurs more frequently when they are only able to staff one ambulance.

The 255 responses in the Patterson District Ambulance response area resulted in 186 transports. PDA units responded to 255 of 263 (96.96%) EMS calls in our district and transported 186 of 193 (96.37%) of all patients transported from our district. AMR responded into our district twice resulting in 2 transports. Westside had 5 responses in our response area resulting in 4 transports. Most notably, Oak Valley District Ambulance responded into our district from Oakdale on a particularly busy day in the county.

We had 3 paramedics leave PDA around the first of the year so we were busy interviewing and hiring replacement staff. Two of three new full-time paramedics were already working part-time for us so the onboarding was relatively easy. We are hiring new part-time paramedics to regain our necessary staffing.

On January 7th, Jim attended a Trauma Audit Committee (TAC) meeting where a Patterson trauma case was presented and discussed. These are great learning opportunities for our staff.

Jim also attended an EMS educators meeting where the last batch of revised field treatment protocols were reviewed and comments returned to LEMSA staff.

On January 13th, Karin and I attended another Stanislaus County OES workshop to update the County's multi-hazard mitigation plan.

On January 30th, PDA staff attended a first responder show and tell at Sacred Heart School.





Board Report – January 2026
Health Center Achievements and Updates

During the month of January 2026, the Health Center continued to demonstrate strong progress in clinical quality, workforce development, and community collaboration. Below is a summary of key accomplishments and initiatives:

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1. Monthly Health Plan Meeting – HEDIS Alignment and Community Engagement

We conducted our monthly health plan meeting, focusing on our 2026 HEDIS goals and strengthening collaborative efforts to ensure the Health Center meets and exceeds performance benchmarks. Discussions centered on how our health plan partners can support quality improvement initiatives and patient outreach efforts throughout the year.

In addition, we submitted formal requests for support during upcoming community events. These requests include assistance with providing health education resources and funding toward school supplies for families in our community during Back to School Block Party. These partnerships reinforce our commitment to preventive care, education, and addressing social determinants of health.

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2. Monthly Staff and Provider Meeting – Team Goals and MA Rotation Initiative

Our monthly staff and provider meeting emphasized unified team goals and operational efficiency. A major initiative launched in January was the implementation of a Medical Assistant (MA) rotation across our three clinical pods.

The purpose of this rotation is to:

- Interchange clinical skills and knowledge among staff
- Foster adaptability and teamwork
- Provide exposure to different provider workflows
- Reduce burnout through variation in daily assignments

To date, staff have been rotating weekly. The outcome has been very positive, with encouraging feedback from providers and staff alike. Team members have reported reduced stress levels and appreciation for the change in environment and collaborative learning opportunities. This initiative is already strengthening cross-functional support and overall team morale.

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3. Nurse Practitioner Student Rotation – Daniela Toste

Nurse Practitioner student **Daniela Toste from Duke University** has been performing exceptionally well during her pediatric rotation at the Health Center. She has integrated smoothly into the clinical team, demonstrating strong clinical skills and professionalism. Her presence supports our pediatric services while contributing to workforce development and academic partnerships.

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4. Pediatrician Onboarding – Dr. Padam

Dr. Padam, Pediatrician, has been joining our team once per week as part of her contract while completing the credentialing process.

Her schedule includes:

- **First half of the day:** Working with management to support and expedite the credentialing process.
- **Second half of the day:** Collaborating with Dr. Rodriguez and advanced practice providers, seeing patients and becoming familiar with our EMR system and clinic workflows.

This phased onboarding approach is allowing for a smooth transition and preparation for full integration into patient care services once credentialing is complete.

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5. Continued Collaboration with La Familia Mental Health Van

We continue our partnership with the La Familia Mental Health Van, which provides mental health services to patients in West Stanislaus County. Services are delivered either directly in their mobile van or within our conference room space.

Importantly, this collaboration complements — and does not replace — services provided by Jessica, LCSW. Instead, it expands access and capacity for patients requiring mental health support, further strengthening our behavioral health network and community reach.

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6. Staffing Updates

- Successfully filled one Patient Services Representative position, strengthening our front office operations and patient flow.
- Confirmed the start of a student Medical Assistant internship, scheduled to begin on February 24th. This reflects our continued commitment to workforce development and building future healthcare professionals within our community.

Summary

January 2026 reflects meaningful progress in quality improvement alignment, staff development, provider onboarding, behavioral health collaboration, and workforce expansion. The Health Center remains focused on achieving HEDIS goals, strengthening partnerships, and fostering a supportive team environment to ensure high-quality care for our patients and community.

Respectfully submitted,
Suzie Benitez

Health Center Report January 2026/ Suzie Benitez

Encounter January 2026

Primary Care Vacation/Sick/CME time off

Provider	Encounters
Rodriguez	418
Barragan	443
Mercado	360
Primary Total	**1,221**

Mental Health Encounters

Herrera	72
HC Total Encounters	**1,293** **10% less from January 2025-Minus one provider**

Urgent Care Clinic Encounters (Tuesday and Thursday)

Date	Time	Encounters
January 2025	5:00pm-8:00pm	96
February 2025	5:00pm-8:00pm	126
March 2025	5:00pm-8:00pm	108
April 2025	5:00pm-8:00pm	75
May 2025	5:00pm-8:00pm	94
June 2025	5:00pm-8:00pm	73
July 2025	5:00pm-8:00pm	64
August 2025	5:00pm-8:00pm	69
September 2025	5:00pm-8:00pm	69
October 2025	5:00pm-8:00pm	54
November 2025	5:00pm-8:00pm	69
December 2025	5:00pm-8:00pm	83
January 2026	5:00pm-8:00pm	122

- Monthly Health Plan Meeting with Health Net and Health Plan of San Joaquin (HEDIS MEASURES SUPPORT).
- Monthly staff and provider meeting.
- Hosted La Familia Mental Health Van on 01/14th, 01/16th, and 01/21st.
- Interview 9 candidates for two PSR positions.

Human Resources Status Report February 2026

By Robert Trefault, Human Resources Manager

The Del Puerto Health Care District's Human Resources Department continues to focus on district growth and employee engagement.

We continue to work on credentialing Dr. Jully Padam so she can begin her Pediatric work at our clinic. She has been getting to know staff, and they are getting to know her, things are shaping up well. We are delaying our search for a mid-level provider until we have a better idea of the impact of Dr Padam's practice on patient numbers for other providers. While we do believe there will be an impact, we do not believe it will be large enough to impact on our need for additional provider but would rather wait to ensure fiscal responsibility.

At the Health Center, Human Resources reviewed over 60 applications and conducted interviews for the Patient Services Representative positions. We are pleased to share that we are currently completing the new hire process and will be at 90% strength at the Health Center. We will also be hosting a Medical Assistant Intern who is a local individual who has taken a second career. We continue to host a Nurse Practitioner Intern with Dr Rodriguez as her proctor.

We have managed to assist the Ambulance Division in maintaining its ability to staff ambulances by recruiting and processing three part-time paramedics for the team. Upon completion of a few requirements, they will be joining the team early next month. We are confident that these individuals will bring valuable experience and will be a great fit for our district.

Additionally, Human Resources continues to work diligently on reviewing, updating, and implementing current policies to ensure all staff are informed and following established procedures. The Leadership Development Program, designed to support professional growth and advancement opportunities for staff, begins this month with nine Health Center staff as our inaugural class. They are all excited and eager for the next step in their careers.

BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT

Board Meeting

Agenda Item # TBD - FY2025 Net IncomeTransfers to Reserve Fund Accounts Page 1 of 2

DEPT: CHIEF EXECUTIVE OFFICE **BOARD AGENDA:** #

CONSENT CALENDAR: NO **AGENDA DATE:** February 23, 2026

CEO CONCURRENCE: YES **4/5 VOTE REQUIRED:** YES

SUBJECT: **FY2025 Net Income Allocation to Mitigation, Operating and Asset Replacement Fund Reserves**

RECOMMENDATION: The CEO recommends allocation of FY2025 Net Income of $2,075,000 to the following designated reserves:

- $366,000 to the Asset Replacement Fund
- $ 96,000 to the Operating Reserve
- $450,032 To the Mitigation Fees Reserve
- **$912,032 Total Transfer to Reserves**

CONSIDERATIONS: **Restricted reserve** balances are reviewed annually upon receipt of the Annual Audit Report. The audited financial statements provide the basis for confirming or adjusting reserve allocations to ensure alignment with the District's financial position.

Depreciation is a non-cash operating expense that reflects the systematic allocation of capital asset costs over their useful lives. Because these assets will ultimately require replacement, maintaining an adequately funded Asset Replacement Reserve supports long-term financial sustainability and capital planning.

The **Asset Replacement Fund** is designated for the replacement and acquisition of equipment, buildings, and other capital assets. Capital expenditures are separate from the operating budget and are funded through this reserve.

The **Operating Reserve** is intended to maintain sufficient liquid funds to cover a targeted number of months of operating expenses. Strengthening this reserve enhances the District's ability to manage cash flow fluctuations, respond to unforeseen circumstances, and maintain operational continuity.

Mitigation Fees (also known as Impact or Developer Fees) are collected from developers to offset the cost of facilities and equipment necessary to serve newly developed residential and commercial properties. These funds are restricted and must be used for their designated purpose.

Important Note:

The transfer of funds from *Equity: Unrestricted* to designated reserve accounts, including the Asset Replacement Fund, does **not** authorize expenditure. All capital purchases and expenditures from reserve funds require separate Board approval, including approval of specific items and amounts.

BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT

Board Meeting

Agenda Item # TBD - FY2025 Net IncomeTransfers to Reserve Fund Accounts Page 2 of 2

POLICY:	In accordance with Board policy, the CEO is responsible for evaluating the fiscal year-end financial position of the District and recommending appropriate transfers to designated and restricted reserve accounts to ensure long-term financial stability and responsible stewardship of public funds.
FISCAL IMPACT:	A Balance Sheet Transfer from Unrestricted to Reserves Accounts
DISTRICT PRIORITY:	Fiscal responsibility, transparency, and planning
STAFFING IMPACT:	None
CONTACT PERSON:	Karin Freese and Maria Reyes
ATTACHMENT(S):	Equity Balance - January 31, 2026 and Operating Reserve Increase Calculation

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RECOMMENDED BOARD ACTION:

ROLL CALL REQUIRED: YES / NO

RECOMMENDED MOTION: *I move the Board of Director directs the CEO to make a Balance Sheet transfer totaling $912,032: $366,000 to the Asset Replacement Fund account; $96,000 to Operating Reserve account and $450,032 to the Mitigation Fees account.*

Motion Made By	***Motion***		***Second***	***Aye***	***No***	***Abstain***	***Absent***
Director Avila							
Director Gomez							
Director Traore							
Director Ramirez							
Director Campo							

I, the undersigned Clerk of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of a resolution duly adopted by the Board at a meeting thereof on the ___ day of _____, 2026, by the following vote of the members thereof:

_____

Maria Reyes-Palad, Clerk of the Board

Del Puerto Health Care District

TRANSFERS TO RESERVE ACCOUNTS

EQUITY BALANCE	January 31, 2026	Increase	Increase	Adjusted Balance
350.000 · Unrestricted Assets	4,326,638		(912,032)	3,414,606
360.000 · Assigned Fund Balance				0
360.030 · Asset Replacement Fund	1,418,854	366,000		1,784,854
360.070 · Operating Cash Reserve	1,881,000	96,000		1,977,000
Total 360.000 · Assigned Fund Balance	3,299,854			3,299,854
370.000 · Restricted Fund Balance				0
370.010 · Mitigation Fees	1,218,512	450,032		1,668,544
370.050 · Restricted for Debt Service	120,720			120,720
370.070 · Building Project Reserve	1,600,000			1,600,000
Total 370.000 · Restricted Fund Balance	2,939,232			2,939,232
390.000 · Net Fixed Assets (Capital)	2,492,762			2,492,762
Net Income	943,203			943,203
Total Equity	**14,001,689**	**912,032**	**(912,032)**	**14,001,689**

AUDITED PROFIT & LOSS	Jul '24 - Jun 25
Ordinary Income/Expense	
Income	
401.000 · Gross Patient Service Revenue	15,175,645
403.000 · Adjustments	(5,996,768)
405.000 · Bad Debt	(1,002,280)
407.000 · Other Income	24,962
Total Income	8,201,558
Gross Profit	8,201,558
Expense	
601.000 · Salaries & Wages	4,570,462
602.000 · Employee Benefits	1,151,854
603.000 · Professional Fees	601,324
604.000 · Purchased Services	750,614
605.000 · Supplies	190,345
606.000 · Utilities	82,436
607.000 · Rental and Lease	5,343
608.000 · Insurance Coverages	432,426
609.000 · Maintenance & Repairs	178,407
610.000 · Depreciation and Amortization	***365,525***
611.000 · Other operating expenses	728,467
699.999 · Admin Cost Share Allocation	
Total Expense	9,057,203
Net Ordinary Income	(855,645)
Other Income/Expense	
Other Income	
701.000 · District Tax Revenues	2,206,112
702.000 · Impact Mitigation Fees	***450,032***
703.000 · Investment Income	227,060
704.000 · Interest Expense	(27,243)
705.000 · Tenant Revenue	113,386
706.000 · Impairment Loss - CIP	(7,687)
710.000 · Misc Other Income	6,155
Total Other Income	2,967,815
Other Expense	
802.000 · Keystone District Expense	27,518
810.000 · Misc Other Expense	9,633
Total Other Expense	37,151
Net Other Income	2,930,664
Net Income	**2,075,019**

CALCULATION OF OPERATING RESERVE ADJUSTMENT

Months	Total Warrants Issued
Jan-26	642,108
Dec-25	702,301
Nov-25	668,197
Oct-25	694,356
Sep-25	667,844
Aug-25	615,606
Jul-25	647,017
Jun-25	631,794
May-25	664,704
Apr-25	670,679
Mar-25	649,701
Feb-25	651,581
Jan-25	663,179
AVERAGE	**659,159**
Ave x 3 Months	1,977,476
Current Operating Reserve	1,881,000
Difference	**96,476**
Rate Increase	**5%**

BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT

Board Meeting – March 9, 2026

9C. Adopt FY 2025-26 Mid-Year Budget Revision

Department: Chief Executive Office

CEO Concurrence: Yes

Consent Calendar: Yes

4/5 Vote Required: No

SUBJECT: **FY2025-26 Mid-Year Budget Revision**

STAFF REPORT: The district has projected a net income of $2,184,922 for the fiscal year 2025-2026.

Staff conducted a mid-year budget review to align the budget with actual performance. As a result, adjustments were made to reflect new and unbudgeted items, including a $626,000 increase in anticipated CY2025 VRRP revenue and a $677,435 increase in certain expenses, resulting in a net negative adjustment of $51,435.

Consequently, the revised net income for the budget is now **$2,133,486**.

FISCAL IMPACT: Overall Net Income Change

STAFFING IMPACT: None

CONTACT PERSON: Karin Freese/Maria Reyes-Palad

ATTACHMENT(S): FY25-26 Budget Mid-Year Adjustment Summary

RECOMMENDED BOARD ACTION:

ROLL CALL REQUIRED: YES

RECOMMENDED MOTION: *I move that the Board of Directors approve the revised FY25-26 budget as discussed.*

Motion Made By	***Motion***	***Second***	***Aye***	***No***	***Abstain***	***Absent***
Director Campo						
Director Avila						
Director Traore						
Director Ramirez						
Director Gomez						

I, the undersigned Clerk of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of a resolution duly adopted by the Board at a meeting thereof on the 9th day of March, 2026, by the above vote of the members thereof:

_____

Ma Traore, Secretary of the Board of Directors
Del Puerto Health Care District

Del Puerto Health Care District
FY 2025-26 Mid-Year Budget Adjustment

	Items	Explanation	Net	ADM	AMB	HC
Revenue	VRRP net income	CY 2025 VRRP	$626,000		$626,000	
			$626,000	$0	$626,000	$0
Expenses	CEO Salary	compensation adjustment	$15,692	$15,692		
	CEO Payroll Taxes	compensation adjustment	$1,200	$1,200		
	Increased staffing for ambulance	to cover two districts	$382,671		$382,671	
	Patient Service Representatives	Healthcare Minimum wage	$8,700			$8,700
	Advance Practice Clinician departure	Half of Annual Base budgeted	($109,651)			($109,651)
	Advance Practice Clinician departure	Half Yr Benefits	($22,660)			($22,660)
	Physician Added	Compensation	$91,740			$91,740
	Legal - Litigation	7200 ave per month x 6 months	$43,200	$43,200		
	AP Logic	Microsoft 365 Implementation	$5,600	$5,600		
	Grant Thornton	CEO Salary Survey	$19,610	$19,610		
	Sacramento State	Jan 2025 Community Health Needs Survey	$93,000	$93,000		
	Employee Anniversary Recognition		$12,700	$12,700		
	Alliant Deductible	Bank Fraud	$50,000	$50,000		
	GEMT IGT Contributions	Additional 20% charged to cover entities not contributing to IGT	$80,000		$80,000	
	City Hall Rental for Board meetings	for 2nd monthly meeting and increase in budgeted cost	$5,633	$5,633		
			$677,435	$246,635	$462,671	($31,871)
		NET ADJUSTMENT TO BUDGET	**($51,435)**	**($246,635)**	**$163,329**	**$31,871**

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9, 2026

9D. Legislative Support – Assembly Bill 2282 (2025-26)

Department: Chief Executive Office
Consent Calendar: No

CEO Concurrence: Yes
4/5 Vote Required: No

SUBJECT: **Support for AB 2282 (Alanis) — Special Permit for Emergency Stabilization Services in Patterson**

STAFF REPORT: Assembly Bill 2282, introduced on February 19, 2026, would add Section 1251.7 to the California Health and Safety Code to allow a general acute care hospital to provide emergency stabilization services at a location in Patterson that is neither inside nor contiguous to an existing hospital. This provision is similar to existing law for Paradise but tailored specifically for Patterson and the service area of the Del Puerto Health Care District.

The bill includes legislative findings and declarations recognizing:

- The District's role in serving Patterson and surrounding rural communities with essential health services.
- Limited local access to emergency and stabilization services due to geographic and transportation barriers.
- The need for timely emergency stabilization care during planning and construction of the District's long-term healthcare campus, which will include an acute care hospital.

AB 2282 would:

- Require the Department of Public Health to issue a special permit enabling a hospital to offer emergency stabilization services at a designated Patterson site with a written transfer agreement.
- Define location and operational standards, including 24/7 services, staffing requirements, and compliance with relevant Health & Safety Code and Title 22 regulations.
- Ensure that services are appropriately staffed and equipped to stabilize patients before transfer to a full emergency department when necessary.
- Include an expiration provision tied to completion of Patterson's new hospital build or up to ten years, ensuring interim access during the development phase.

Rationale for District Support

Patterson and west-side Stanislaus County residents face significant delays in reaching full emergency departments, with average travel distances and times that can adversely affect clinical outcomes. AB 2282 would:

- Provide locally accessible emergency stabilization care before the hospital opens, bridging critical gaps in emergency access.
- Reduce response and transport times for life-threatening events for Medicare, Medi-Cal, uninsured, and underinsured residents.
- Align with the District's strategic mission to enhance emergency care capacity and community health infrastructure.

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9, 2026

STRATEGIC ALIGNMENT: Healthcare Access, Equity, and Timely Care; Strategic Plan Alignment: Phased Healthcare Campus Development; Community Health Needs Alignment

FISCAL IMPACT: There is no direct appropriation in the bill; fiscal impacts would depend on local partnerships, hospital investment, and permit requirements. A special permit application fee and regulatory compliance costs are prescribed under existing Health & Safety Code frameworks.

STAFFING IMPACT: Legislative Efforts, Public Relations

CONTACT PERSON: Karin Freese, CEO

ATTACHMENT(S): Text of AB 2282 (Introduced)
Board Resolution 2026-03

RECOMMENDED ACTION

ROLL CALL REQUIRED: YES / NO

RECOMMENDED MOTION: *I move that the Board of Directors of Del Puerto Health Care District adopt Resolution 2026-03 Supporting Assembly Bill 2282 (2025–2026 Regular Session) to Authorize Emergency Stabilization Services in Patterson in Advance of the Construction of a General Acute Care Hospital*

Motion Made By	*Motion*	*Second*	*Aye*	*No*	*Abstain*	*Absent*
Director Avila						
Director Campo						
Director Gomez						
Director Ramirez						
Director Traore						

I, the undersigned Secretary of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of an action duly adopted by the Board at a meeting thereof on the 9th day of March, 2026, by the above vote of the members:

_____

Ma Traore, Board Secretary

CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

ASSEMBLY BILL No. 2282

Introduced by Assembly Member Alanis

February 19, 2026

An act to add Section 1251.7 to the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 2282, as introduced, Alanis. Health facilities: emergency medical services.

Existing law requires the State Department of Public Health to license and regulate various health facilities, including general acute care hospitals. Existing law requires the department to issue a special permit, in addition to a license, to a health facility to offer one or more special services, such as an emergency center, if specified requirements are met, including that the department finds that the standards of care and services are adequate and appropriate.

Existing law requires the department to issue a special permit to allow a general acute care hospital to offer emergency stabilization services at a location that is neither inside nor contiguous to the applicant hospital if the hospital provides satisfactory evidence to the department that, among other things, the hospital has a written transfer agreement with the hospital closest to the location where emergency stabilization services will be provided and satisfactory evidence to the department that this location meets certain requirements, including that the location is in the town of Paradise within the County of Butte and serves the same area previously served by Feather River Hospital.

This bill would require the department to issue a special permit, as specified, similar to the one issued above to allow a general acute care

hospital to offer emergency stabilization services at a location that is neither inside nor contiguous to the applicant hospital if the hospital provides satisfactory evidence to the department that, among other things, the hospital has a written transfer agreement with the hospital closest to the location where emergency stabilization services will be provided and satisfactory evidence to the department that this location meets certain requirements, including that the location is in the City of Patterson in the County of Stanislaus and serves the same general population as is served by Del Puerto Health Care District.

This bill would make legislative findings and declarations as to the necessity of a special statute for the City of Patterson in the County of Stanislaus.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Section 1251.7 is added to the Health and Safety Code, to read:

1251.7. (a) The Legislature finds and declares all of the following:

(1) Del Puerto Health Care District serves the residents of the City of Patterson and surrounding west side communities in the County of Stanislaus, providing essential health care services, including primary care, urgent care, ambulance services, and other outpatient and community-based services.

(2) Residents of Patterson and neighboring communities are largely rural and may have limited access to transportation and to health care resources located outside the district's service area, making local access to timely emergency and stabilization services particularly important.

(3) The community served by Del Puerto Health Care District includes a significant number of individuals with coverage under the federal Medicare Program and the Medi-Cal program, as well as uninsured and underinsured residents, for whom delays in access to appropriate levels of care can result in worsened health outcomes.

(4) Del Puerto Health Care District is planning and developing a health care campus in the City of Patterson that will include an ambulance and administration center, primary and behavioral

health services, and, in later phases, higher acuity services such as skilled nursing and an acute care hospital, in order to meet current and future community health needs.

(5) During the period in which the district is planning, developing, and constructing new facilities and expanded services, it is necessary to ensure that residents of the City of Patterson and surrounding communities have access to emergency stabilization services close to home, including services that can appropriately receive and stabilize patients prior to transport to a general acute care hospital when clinically indicated.

(6) Therefore, it is the intent of the Legislature in enacting this section to permit a general acute care hospital, as defined in subdivision (a) of Section 1250, in collaboration with Del Puerto Health Care District, to provide emergency stabilization services at a location that is neither inside nor contiguous to the applicant hospital, in order to ensure that residents of the City of Patterson and the surrounding communities have access to emergency stabilization services during the development and implementation of the district's long-term health care campus plans.

(7) It is further the intent of the Legislature that any such location provide the highest quality of emergency stabilization services feasible and be staffed by physicians who are board certified in emergency medicine or have equivalent training and experience in emergency care.

(8) It is not the intent of the Legislature to establish a model for a freestanding emergency department, which is currently, and remains, prohibited by state law.

(b) The department shall issue a special permit, as defined in Section 1251.5, to allow a general acute care hospital, as defined in subdivision (a) of Section 1250, to offer emergency stabilization services at a location that is neither inside nor contiguous to the applicant hospital, including serving as an emergency medical services receiving site if authorized to do so by the medical director of the local emergency medical services agency pursuant to Section 1798.101, if the hospital provides satisfactory evidence to the department that the hospital has a written transfer agreement with the hospital closest to the location where emergency stabilization services will be provided pursuant to this section, and any other hospital necessary to ensure the safe and effective transfer of patients needing services outside the capacity of the closest

hospital, and if the applicant hospital submits and has received approval for an application pursuant to subdivision (c) and meets all of the following requirements:

(1) The location is within the City of Patterson in the County of Stanislaus and is intended to serve the same general population as is served by Del Puerto Health Care District.

(2) The location meets the regulatory requirements applicable to emergency departments, as described in subdivisions (a), (b), (d), (e), (f), (g), (h), (i), (k), (*l*), and (n) of, and paragraph (6) of subdivision (m) of, Section 70413 of, subdivision (a) of Section 70415 of, and Sections 70417, 70419, 70651, 70655, 70657, and 70841 of, Title 22 of the California Code of Regulations.

(3) The location meets the nurse-to-patient staffing requirements of a basic emergency department, as specified in the regulations adopted pursuant to Section 1276.4.

(4) The location complies with the hospital's existing collective bargaining agreements.

(5) The location is open 24 hours a day, 7 days a week.

(6) The location provides medical, pharmacy, nursing, clinical laboratory, and radiological services onsite in compliance with Article 3 (commencing with Section 70201) of Chapter 1 of Division 5 of Title 22 of the California Code of Regulations.

(7) The location provides nutritional services to patients. The location may comply with this paragraph by providing those services directly or by contracting with an outside entity.

(8) The location complies with the federal Emergency Medical Treatment and Active Labor Act (Section 1395dd of Title 42 of the United States Code) and with Section 1317 of this code.

(9) The location has informed the local emergency medical services agency about the types of medical conditions and injuries that the facility cannot treat and for which the patient needs to be transported directly to a general acute care hospital emergency department.

(10) Notwithstanding subdivision (i) of Section 70651 of Title 22 of the California Code of Regulations, the wording of exterior signs states "EMERGENCY STABILIZATION SERVICES, PHYSICIAN ON DUTY."

(11) The location stabilizes for transport or release a patient within 24 hours of registration. The location reports to the

department any failure to stabilize a patient for transfer or release of the patient within 24 hours.

(12) Upon registration, the location provides a patient with a written notice that the patient should consult with their health care coverage carrier about which services may be covered and for which copayments and charges the patient may be responsible.

(13) The location posts information identifying the three nearest hospitals ranked by estimated driving time from the nearest to the farthest away.

(14) The location posts a sign, at or near any public entrance of the location, stating that patients requiring surgery, trauma care, or an inpatient bed will be transported to the nearest hospital.

(15) The location meets the physical plant requirements and has received clearance from the Department of Health Care Access and Information as appropriate for the setting and services being provided at the location.

(16) The applicant hospital has submitted and received approval on an application that meets the requirements of subdivision (c).

(c) (1) The application shall be submitted pursuant to Section 1265 and shall include all of the following:

(A) A plan of operation that shall, at a minimum, address the location's plan for patient care, infection control, waste disposal, and linen services.

(B) The policy and procedure that the location will implement for the emergency transportation of patients that cannot be served by the facility. The policy and procedure shall comply with the standards of practice and shall include all of the following:

(i) How the patient will be transported to the nearest general acute care hospital emergency department.

(ii) The timeframe for transfer to the nearest general acute care hospital with an emergency department.

(iii) How the location will ensure patient safety during the transfer.

(C) A written transfer agreement with the nearest hospital with an emergency department.

(D) A community outreach and education plan to ensure the community is informed of the types of services that the facility is capable of providing. The plan shall include instructions identifying the care that the facility is capable of providing and indicating the types of injuries or conditions for which a patient should be

transported directly to the nearest general acute care hospital emergency department.

(E) A triage algorithm that the location developed and will implement in collaboration with the local emergency medical services agency to determine appropriate patients for transport to the location.

(2) The special permit application fee shall be fifteen thousand dollars ($15,000).

(3) Notwithstanding Section 1267, a special permit issued pursuant to this section shall expire 2 years from the date of its issuance, and may be renewed every 2 years, for a combined period not to exceed 10 years from the initial date of issuance.

(4) If, prior to expiration of the special permit, the district has submitted complete construction documents to the Department of Health Care Access and Information for review of a general acute care hospital to be located within the district, the department shall extend the special permit until the issuance of a certificate of occupancy for that hospital.

(5) The department may deny a request for approval or renewal of a special permit if the location fails to meet the requirements of this chapter pursuant to Section 1269. The department may suspend or revoke a special permit pursuant to Article 5 (commencing with Section 1294).

(d) A hospital issued a special permit pursuant to this section shall report all of the following:

(1) For purposes of the Annual Report of Hospitals required by regulations adopted pursuant to Section 1250.8, report bed and service utilization data separately by each facility issued a single consolidated license pursuant to this section.

(2) Hospital reporting requirements specified in Section 1279.1 regarding adverse events and the reporting requirements specified in Section 70737 of Title 22 of the California Code of Regulations.

(3) By March 1 of each year, a detailed report on the types of services, number of patients served, and any adverse patient outcomes during the prior calendar year.

(e) Notwithstanding any other law, the department may, without taking regulatory action pursuant to Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, implement, interpret, or make specific this section by means of an All Facilities Letter or similar instruction.

(f) This section shall remain in effect only until a hospital build is completed within a five-mile radius of the emergency stabilization location or within 10 years from the initial issuance of the special permit unless, prior to the expiration of that 10-year period, the district has submitted complete construction documents to the Department of Health Care Access and Information for review of a general acute care hospital or has commenced vertical construction of that hospital, in which case this section shall remain operative until issuance of a certificate of occupancy for that hospital.

SEC. 2. The Legislature finds and declares that a special statute is necessary and that a general statute cannot be made applicable within the meaning of Section 16 of Article IV of the California Constitution because of all of the following:

(a) Residents, workers, and visitors in the City of Patterson face comparable—and in many cases more burdensome—access conditions to emergency medical services when compared to other designated areas.

(b) Average travel distances in the City of Patterson to the nearest full-service acute care hospital or trauma center are approximately 21 miles, with average drive times of 36 minutes or more.

(c) These access delays are driven by persistent geographic isolation, limited roadway options, agricultural and freight traffic, rail crossings, State Highway 33 congestion, and weather-related disruptions, including fog and flooding.

(d) The access challenges in the City of Patterson reflect structural constraints and ongoing gaps in timely emergency medical services in a rural, medically underserved community, rather than temporary emergencies such as wildfires.

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Del Puerto Health Care District

RESOLUTION NO. 2026-03

A RESOLUTION OF THE BOARD OF DIRECTORS OF THE DEL PUERTO HEALTH CARE DISTRICT SUPPORTING ASSEMBLY BILL 2282 (2025–2026 REGULAR SESSION) TO AUTHORIZE EMERGENCY STABILIZATION SERVICES IN PATTERSON IN ADVANCE OF THE CONSTRUCTION OF A GENERAL ACUTE CARE HOSPITAL

WHEREAS, the Del Puerto Health Care District ("District") is a California special district organized and existing pursuant to Section 32000 *et seq* of the California Health and Safety Code, charged with ensuring access to essential healthcare services for residents of Patterson and the west side of Stanislaus County; and

WHEREAS, residents within the District currently experience extended emergency medical transport times to the nearest hospital emergency departments, creating delays in access to timely stabilization for life-threatening conditions; and

WHEREAS, the District has adopted a long-term, phased healthcare campus development strategy that includes construction of a general acute care hospital, recognizing that hospital planning, financing, permitting, and construction require multiple years to complete; and

WHEREAS, Assembly Bill 2282 (Alanis) (2025–2026 Regular Session) proposes to authorize the California Department of Public Health to issue a special permit allowing emergency stabilization services to be provided at a location in Patterson that is not located within, or contiguous to, a licensed general acute care hospital, subject to defined operational requirements, oversight, and transfer agreements; and

WHEREAS, AB 2282 is expressly designed as a limited, interim authorization to address urgent access gaps while preserving the State's hospital licensing framework and requiring transition to full hospital-based emergency services upon completion of hospital development milestones; and

WHEREAS, the Board of Directors finds that emergency stabilization services authorized under AB 2282 would improve patient outcomes, enhance emergency medical services efficiency, and advance health equity for a rural and underserved community without circumventing regulatory accountability; and

WHEREAS, the Board of Directors further finds that AB 2282 aligns with the District's mission to provide, promote, and partner in quality healthcare for all, supports fiscally responsible phased development, and reflects sound governance, stewardship, and planning principles;

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Del Puerto Health Care District hereby expresses its formal support for Assembly Bill 2282 (Alanis) (2025–2026 Regular Session) as introduced, recognizing it as a responsible, time-limited mechanism to deliver emergency stabilization services in Patterson in advance of construction and licensure of a full-service acute care hospital; and

BE IT FURTHER RESOLVED, that the Board authorizes and directs the Chief Executive Officer, or designee, to communicate the District's support for AB 2282 to the bill's author, legislative committees, state agencies, and other appropriate stakeholders, and to engage in advocacy and coordination activities consistent with this Resolution; and

BE IT FURTHER RESOLVED, that the Board directs District staff to monitor the bill's progress, report material developments to the Board, and prepare for implementation planning should the legislation be enacted; and

Del Puerto Health Care District

BE IT FURTHER RESOLVED, that this Resolution shall take effect immediately upon adoption.

PASSED AND ADOPTED by the Board of Directors of the Del Puerto Health Care District at a duly noticed meeting held on February 23, 2026, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

_____
Becky Campo, President, Board of Directors
Del Puerto Health Care District

ATTEST:

_____
Ma Traore, Secretary to the Board
Del Puerto Health Care District

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9, 2026

9F. Government Relations Services in support of AB 2282

Department: Chief Executive Office
Consent Calendar: No

CEO Concurrence: Yes
4/5 Vote Required: No

SUBJECT: **Consideration of Government Relations Services Agreement with Resilient Advocacy**

STAFF REPORT:

Upon request, Resilient Advocacy has submitted a proposal to provide government relations and legislative advocacy services for Del Puerto Health Care District in Sacramento. The firm specializes in California public policy engagement and has extensive relationships with state legislators, agencies, and stakeholders involved in healthcare policy.

The firm would represent the District's interests in advancing **AB 2282**, legislation intended to improve healthcare access for residents on the west side of Stanislaus County through innovative rural emergency care solutions.

Resilient Advocacy would work in partnership with District leadership to communicate the District's policy objectives to state policymakers, build support among legislators and stakeholders, and help guide the bill through the legislative process during the 2026 session.

Scope of Services - Under the proposal, Resilient Advocacy would:

- Serve as the District's legislative advocacy presence in Sacramento
- Educate legislators, staff, and state agencies regarding the District's sponsored legislation
- Arrange meetings with policymakers and stakeholders
- Assist with legislative language and amendments as needed
- Provide testimony in legislative committees when appropriate
- Provide regular updates on legislative developments and advocacy efforts

The firm would focus primarily on advancing **AB 2282** through the legislative process and supporting the District's broader policy priorities related to expanding healthcare access.

STRATEGIC ALIGNMENT:

This engagement supports the District's strategic priorities by:

- Advancing state legislation designed to improve emergency care access for the west side of Stanislaus County
- Strengthening the District's presence and voice in Sacramento policymaking
- Supporting the development of the District's broader healthcare campus and regional care delivery strategy
- Building long-term relationships with policymakers involved in healthcare access issues

FISCAL IMPACT:

Service	Cost
Monthly Retainer	$9,500
Initial Term	6 months
Total Initial Engagement	$57,000

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9, 2026

Following the initial six-month term, the agreement would continue **month-to-month with 30-day notice for termination.**

STAFFING IMPACT: Advancing legislation through the California Legislature requires continuous engagement in Sacramento with legislators, committee staff, and state agencies throughout the legislative session. While the Board and District leadership provide the policy direction, subject-matter expertise, and community perspective needed to explain the importance of the legislation, the legislative process involves frequent meetings, rapid responses to amendments, and ongoing coordination that requires a consistent presence in Sacramento. For a locally focused public agency, maintaining that level of daily engagement from Patterson is not practical. A contract government relations firm provides the on-the-ground presence, relationships, and procedural expertise needed to represent the District's priorities, while Board members and staff remain actively engaged by participating in key meetings, providing testimony, and appearing in Sacramento when their direct voice and community perspective are most impactful.

CONTACT PERSON: Karin Freese, CEO
Sarah Bridge, ACHD Vice President, Advocacy & Strategy

ATTACHMENT(S): Resilient Advocacy Proposal

RECOMMENDED ACTION: Staff recommends that the Board of Directors enter into a professional services agreement with Resilient Advocacy to provide legislative advocacy and government relations services in Sacramento in support of Del Puerto Health Care District's sponsored legislation, AB 2282 (Alanis).

ROLL CALL REQUIRED: YES

RECOMMENDED MOTION: *I move that the Board of Directors authorize the Chief Executive Officer to execute an agreement with Resilient Advocacy for legislative advocacy services in an amount not to exceed $9,500 per month for an initial six-month term.*

Motion Made By	***Motion***	***Second***	***Aye***	***No***	***Abstain***	***Absent***
Director Avila						
Director Campo						
Director Gomez						
Director Ramirez						
Director Traore						

I, the undersigned Secretary of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of an action duly adopted by the Board at a meeting thereof on the XX day of XXXXX, 2026, by the above vote of the members:

_____

Ma Traore, Board Secretary

Karin Freese

Subject: FW: Info related to ACHD lobbying for a single district.

From: Cathy Martin <cathy.martin@achd.org>
Sent: Friday, March 6, 2026 12:22 PM
To: Karin Freese <karin.freese@dphealth.org>
Cc: Sarah Bridge <sarah.bridge@achd.org>
Subject: Info related to ACHD lobbying for a single district.

Hi Karin,

As far as ACHD representing Del Puerto's sponsored bill, while there is a benefit to having ACHD as a supplement to a lobbyist hired directly by the district because it allows us to play a technical role and allows us to offer additional lobbying muscle and support, having ACHD as Del Puerto's lobbyist specifically on your bill isn't possible for a variety of reasons.

California lobbying laws, governed by the Political Reform Act and enforced by the Fair Political Practices Commission (FPPC), impose restrictions on lobbyists to prevent conflicts of interest and undue influence. A lobbyist representing a healthcare district association (like the ACHD, which advocates for multiple districts) cannot simultaneously represent a single district on a bill specific to that district due to rules on multiple representation and potential conflicts.

Conflict of Interest Rules
Lobbyists must disclose all clients and avoid representing conflicting interests on the same matter. Representing an association (with potentially divergent member priorities) and a single district on a district-specific bill could create divided loyalties, as the association might oppose or amend provisions favoring only that one district.

Registration Requirements
Under Government Code § 84602 et seq., lobbyists file reports listing clients and bills lobbied. Dual roles require clear separation; switching hats on the same bill risks violating disclosure thresholds (e.g., 30+ hours/year lobbying) or appearing as undisclosed "arranging" of influence.

Practical Precedent
Associations like ACHD lobby broadly on health bills (e.g., AB 869) while individual districts handle unique issues. Overlap invites FPPC scrutiny for improper influence, as seen in city lobbying cases where specific-district bills prompt separate advocates.

Hope this explanation helps,
Cathy

ACHD
ASSOCIATION OF CALIFORNIA HEALTHCARE DISTRICTS

Cathy Martin
Chief Executive Officer

Phone: 916-266-5277
Mobile: 916-296-2607
1127 11th Street, Suite 905
Sacramento, CA 95814
www.achd.org

Resilient.

March 3, 2026

Karin Freese
Chief Executive Officer
Del Puerto Health Care District
PO Box 187
Patterson, CA 95363

Dear Karin,

On behalf of Resilient Advocacy, we are pleased to submit the following proposal for Del Puerto Health Care District's engagement in the state of California. We are confident that your policy goals and our firm's strengths will be a great fit and will result in a positive outcome for the region.

Resilient provides full-service government relations and advocacy in Sacramento. Our clients are public and private corporations, industry trade associations, and not-for-profit organizations in California. We will work diligently to ensure that Del Puerto Health Care District's policy goals are top of mind for policymakers that influence policy related to preserving and increasing access to health care in California. There are many members of the Legislature who are actively seeking a voice like Del Puerto's on issues related to access to quality health care.

Using a strategic advocacy plan developed in partnership with you, we will directly communicate your perspectives with the diverse population of California policymakers, and aggressively pursue successful advocacy outcomes.

We would greatly value the opportunity to work directly with you to extend your presence in the Capitol community. We are excited to be included in your Board's proposal process and are confident that we have the qualifications and expertise necessary to deliver the results you seek. Please do not hesitate to contact us if you have questions regarding any aspect of this proposal.

Sincerely,

Kelli L'Heureux
Lobbyist
Resilient Advocacy

RJ Cervantes
Founder
Resilient Advocacy

Firm Background

Kelli L'Heureux joined the Resilient Advocacy team in April 2024, bringing with her extensive health care legislative relationships that complement and further the firm's client goals. Her work for previous clients has been from various perspectives in the health care space - from providers, health plans, and not-for-profits over the last 10 years. Kelli's most recent experience includes Health Net of California, the California subsidiary of Centene Corporation. The health plan-centered perspective gained as part of a larger coalition with often competing and varied company opinions served as an opportunity for Kelli to fine tune her ability to maneuver and manage internal company expectations. Her experience at the California Medical Association allowed her to learn how to balance often disparate priorities and learn how to engage with the various factions of membership at the right moment. Throughout her career, Kelli has safeguarded investments in healthcare from budget cuts, demonstrating the expertise required to navigate and influence the often obscure California budget process.

RJ Cervantes founded Resilient Advocacy in 2023 and has over 15 years of California government affairs experience. Many of the clients that RJ worked with over the years are still clients of Resilient to this day. Prior to becoming a contract lobbyist, RJ ran legislative affairs for the California Trucking Association, a trade association with hundreds of individual member trucking companies and suppliers. Prior to his time with the Trucking Association, RJ worked in Oregon with the former House Democratic Leader and Chair of the Multnomah County Board of Commissioners. In all, RJ has over 20 years of legislative advocacy experience in California and Oregon. Through coalition building and grassroots activities, RJ has established a substantial network of state legislators, Members of Congress, agency and administrative officials, and non-governmental organizations around the West Coast.

Firm Philosophy

Resilient is proud to be a boots-on-the-ground style firm, where we actively engage the Legislature, the Administration, and State Agencies and are committed to providing all of our clients with complete availability, 24/7. We are not a note-taker style firm that's reacting to policy developments. We take pride in finding seats at the table for our clients' policy needs.

We greatly value working with organizations like Del Puerto Health Care District who take a proactive approach to serving patients in their community. California's Legislature is getting younger and more diverse, and the way advocates engage with them has to evolve. Keeping this dynamic in mind will serve Del Puerto well and ensure a successful policy outcome for the region in the context of the larger overall access to health care discussion being shaped in California.

Relationships

Resilient's policy and political insight, and extensive working relationships with key legislative leaders, state agencies, and staff ensure our strong position on issues of importance to Del Puerto Health Care District. It is important to our firm to build long-term, sustainable relationships with policymakers, cementing Resilient as a trusted voice in Sacramento.

Resilient maintains substantial relationships throughout the world of California politics including with the Newsom Administration, the Lieutenant Governor, the Legislature, and State Agencies. Resilient's relationships that are directly linked with the work of Del Puerto Health Care District include but are not limited to:

- *Senator Akilah Weber, MD*, Chair of Senate Health Committee
- *Senator Caroline Menjivar,* Senate Budget Subcommittee #3 on Health & Human Services
- *Assemblymember Mia Bonta,* Chair of the Assembly Health Committee
- *Assemblymember Dawn Addis,* Chair of Assembly Budget Subcommittee #1 on Health and Human Services
- *Richard Figueroa (Fig),* Deputy Cabinet secretary for Governor Newsom, on Health & Human Services

In addition to our relationships with relevant policymakers and staff, we have excellent relationships with stakeholder groups that have a direct connection to Del Puerto's policy interests.

Strategy

In assisting Del Puerto Health Care District get AB 2282 (Alanis) across the finish line this legislative session, these key actions and strategies should be deployed:

- **Public Affairs**: Create a consistent awareness locally in Stanislaus county and in Sacramento lifting up all the hard work completed to date to make the mixed-use health care campus a reality.

- **Boots on the Ground**: A hyper-local bill like AB 2282 requires a lot of education about the need for the policy, showcasing there is a precedent already, and how other communities could use a similar process to expand access in their communities. This necessitates many touches continually throughout the process here in Sacramento with lawmakers and key staff to ensure the policy does not get hung up along the way.

- **Policy Forums**: Elevating the work of Del Puerto to expand access in their community is critical in various policy arenas where preserving health care is being

discussed in the face of headwinds related to HR 1 and budget pressures. The Legislature is hyper-focused on ensuring people stay covered and supporting facilities so they stay open. Del Puerto's mixed use project should be elevated at every opportunity during budget subcommittees, oversight and informational hearings as innovative and a way to creatively bring health care services to their community.

Key Deadlines

March 22	AB 2282 (Alanis) eligible to be heard in Assembly Health Committee
April 24	Deadline for bills with fiscal tag to be heard and sent to Assembly Appropriations Committee
May 15	Deadline for bills with fiscal tag to be sent to the Assembly floor
May 29	Last day for the Assembly to pass bills to the Senate
July 2	Deadline for bills with fiscal tag to be sent to the Senate Appropriations Committee
August 14	Deadline for bills with fiscal tag to be sent to the Senate floor
August 31	Last day to pass bills off the floor to the Governor's desk
Sept 30	Last day for Governor to sign or veto bills passed by the Legislature

Services Provided

In assisting Del Puerto Health Care District with engagement with the Administration, Legislature, and relevant departments and agencies, Resilient would expect to provide the following services:

- In direct consultation and under the direction of Del Puerto, serve as the organization's legislative advocacy presence in Sacramento on their sponsored bill, AB 2282 (Alanis).
- Educate elected officials, staff, applicable agency, and interested stakeholders on the priorities of Del Puerto as it relates to their sponsored bill, AB 2282 (Alanis).
- Arrange meetings for Del Puerto with elected officials, staff members, state agency staff, and other stakeholders as may be advisable.
- Preparation of legislation and amendments to legislation that may be necessary.
- Testimony on relevant legislation before the Legislature's policy committees, if necessary.

- Provide appropriate updates for Del Puerto via weekly communications, or as needed.

- Attend meetings on Del Puerto's behalf when directed.

Fee Proposal and Conclusion

In consideration for the proposed services to be provided by Resilient Advocacy we are proposing a fee of $9,500 per month, for six months, and then on a month to month basis, with 30 day notice. We are happy to further discuss an appropriate fee based on scope of work and we are confident that we can draft a final retainer agreement that meets your needs.

Thank you for the opportunity to submit a proposal for your targeted policy work in California. Resilient is confident that we can provide Del Puerto Health Care District with the extra punch to get your sponsored bill across the finish line. Should you have any further questions regarding our firm, please don't hesitate to contact us.

2025 - 2026 Resilient Advocacy Clients

Alignment Health

American Cleaning Institute

American Forest & Paper Association

California Association of Nurse Anesthesiologists

California Chamber of Commerce

California Kidney Care Alliance

California Waste Haulers Council

Caylym

Crypto Council for Innovation

Electronic Transactions Association

Eli Lilly

Ferrero

Hazel Health

Housing Contractors of California

Inland Empire Health Foundation

Paycom

Printing Industries of California

Progyny

PHI Air Medical

Redwood Holdings

Sleeper

Starbucks

SteerSafe Coalition

Sysco

Textile Rental Services Association

Turo

Teach Coalition

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9,2026

9F. Employee Appreciation and Recognition Program – Policy No. 3110

Department: Chief Executive Office
Consent Calendar: No

CEO Concurrence: Yes
4/5 Vote Required: No

SUBJECT: **Employee Appreciation and Recognition Program**

STAFF REPORT: This item requests Board approval of Policy No. 3110, which formalizes Del Puerto Health Care District's Employee Appreciation and Recognition Program. The policy provides a consistent, equitable, and transparent framework to recognize individual and team contributions that support the District's mission, values, and strategic objectives. The program includes peer-to-peer recognition, on-the-spot awards, quarterly and annual recognition, innovation awards, leadership recognition, and longevity milestones. Adoption of this policy strengthens organizational culture, supports employee engagement and retention, and ensures appropriate Board oversight of recognition categories and award limits.

As DPHCD continues to grow in scope, staffing, and operational complexity, the District has identified the need for a formalized approach to employee recognition. Historically, recognition efforts have occurred informally and inconsistently across departments. Policy No. 3110 establishes standardized criteria, processes, and award categories administered by Human Resources, with defined roles for management, the CEO, and the Board. The policy also clarifies fiscal controls, reporting requirements, and alignment with performance management practices.

STRATEGIC ALIGNMENT: This policy directly supports the District's strategic goals related to workforce stability, organizational excellence, and a positive workplace culture. Recognizing performance, innovation, and long-term service reinforces accountability, engagement, and alignment with DPHCD's mission and values.

FISCAL IMPACT: Award values and recognition expenditures are capped and subject to Board-approved budget limits as part of the annual budgeting process. Human Resources will manage the awards budget in coordination with Finance. Certain awards, including innovation-based awards tied to cost savings, require specific Board approval. No unbudgeted fiscal impact is anticipated with adoption of this policy.

STAFFING IMPACT: Improvement of Employee Morale

CONTACT PERSON: Robert Trefault, HR Manager

ATTACHMENT(S): Policy No. 3110 – Employee Appreciation and Recognition Program

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RECOMMENDED ACTION:

ROLL CALL REQUIRED: YES

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9,2026

9E. Employee Appreciation and Recognition Program – Policy No. 3110 **Page 2 of 2**

RECOMMENDED MOTION: *I move that the Board of Directors adopt Policy No. 3110, Employee Appreciation and Recognition Program, establishing a structured, District-wide framework for recognizing employee performance, service milestones, innovation, and leadership, as presented.*

Motion Made By	***Motion***	***Second***	***Aye***	***No***	***Abstain***	***Absent***
Director Avila						
Director Campo						
Director Gomez						
Director Ramirez						
Director Traore						

I, the undersigned Secretary of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of an action duly adopted by the Board at a meeting thereof on the 9th day of March, 2026, by the above vote of the members:

_____

Ma Traore, Board Secretary

EMPLOYEE APPRECIATION AND RECOGNITION PROGRAM	EFFECTIVE DATE
	TBD

REVIEW DATE:	REVISION DATE:
POLICY SOURCE: Best Practices	

Purpose: To promote a positive and engaged workplace culture by formally acknowledging and appreciating employees whose performance, conduct, and contributions support DPHCD's mission, values, and strategic objectives. This policy is intended to reinforce desired behaviors, encourage excellence and accountability, and recognize both individual and team achievements that enhance service quality, collaboration, and organizational effectiveness.

Policy: This policy applies to all DPHCD employees who have successfully completed their probationary period. New employees who have not completed their probationary period may receive recognition for extremely exceptional circumstances on a case-by-case basis. DPHCD values its staff and is committed to fostering a culture of appreciation, respect, and recognition. DPHCD maintains a structured Employee Appreciation and Recognition Program designed to:

- Encourage excellence in job performance
- Reinforce the DPHCD's mission, vision, and values
- Recognize outstanding individual and team achievements
- Celebrate employee service milestones.

To ensure fairness and equality all awards and recognition recommendations the following applies:

- All must include **specific examples** or behaviors.
- Self-nominations are not permitted.
- Most awards are **non-competitive** and may be granted to multiple recipients.
- Awards and recognition do not replace performance management or merit pay.

Components: This program consists of seven components:

1. **Peer-to-Peer Awards** allow employees to acknowledge and nominate other coworkers for an award.
    a. Criteria and Forms in Operations Procedures A.
    b. $25 max per award,
    c. Employees may receive more than once per year.
2. **On-the-Spot Awards** are immediate forms of recognition given to employees by a manager as contributions occur.
    a. Criteria and Forms in Operations Procedures A.
    b. $25 or $50 Gift Cards,
    c. Employees may receive more than once per year.
3. **Employee of the Quarter** is an award given to one individual in each department per quarter who meets the criteria, is nominated, and is selected by a panel of managers.
    a. Criteria and Forms in Operations Procedures A.
    b. $100 gift of choice from a corporate award catalog
    c. Employees may receive only once per year

4. **Employee of the Year** is an award given to one employee per year who meets the criteria, is nominated, and selected by a panel of managers.
    a. Criteria and Forms in Operations Procedures B.
    b. $250 gift of choice from a corporate award catalog
5. **Leader of the Year** is an award given to one leader, either by formal position or assigned duty who meets the criteria, is nominated, and selected by a panel of managers.
    a. Criteria and Forms in Operations Procedures C.
    b. $500 gift of choice from a corporate award catalog
6. **Innovation/Suggestion Award** is an award given to an employee who provides a suggestion or introduces a method to save the District money, time, resources, or markedly improve processes as agreed to by a panel of managers.
    a. Criteria and Forms in Operations Procedures D.
    b. TBD based on savings, may not exceed 10% of savings.
    c. Award amount subject to Board approval.
7. **Longevity Recognition Awards** acknowledge dedication, loyalty, and sustained contributions over time, reinforcing appreciation for long-term commitment and institutional knowledge.

    Years of Service Recognition

    - 1–4 Years Annual recognition pin
    - 5 Years Certificate of Appreciation and $250 corporate catalog gift
    - 10 Years Personalized award and $500 corporate catalog gift
    - 15 Years Personalized award and $750 corporate catalog gift
    - 20 Years Personalized award and $1,000 corporate catalog gift
    - 25+ Years Custom recognition and $1,250 corporate catalog gift

Procedures

- Program Administration
    - Human Resources shall manage and administer the Awards and Recognition Program and develop standardized forms for each award component.
    - Human Resources is responsible for communicating award timelines, criteria, and submission requirements.
- Nomination Requirements
    - All award recommendations must be submitted to Human Resources by the established due date or prior to the next scheduled awards ceremony.
    - Each nomination must include, at a minimum:
        - Who performed the action or contributed to the event.
        - What occurred, including a clear description of the event or action.
        - When the event occurred (or approximate timeframe).
        - Why is the action or event worthy of recognition; and
        - How the action or event exceeded regular job duties or performance expectations.
    - There is no limit to the number of employees who may be nominated; however, certain awards may be limited to a single recipient per award period.

- Submission and Deadlines
    - Human Resources will notify Departments when award cycles are open and closed.
    - All nominations must be submitted to Human Resources prior to the due date established for each award (as determined by HR and management).
    - Late or incomplete nominations may be deferred to a future award cycle.
- Review and Selection Process
    - Except for Peer-to-Peer and On-The-Spot awards, all award nominations shall be reviewed by an awards panel consisting of:
        - The appropriate Department Manager.
        - Human Resources Manager or their appropriate designee; and
        - Chief Executive Officer or their appropriate designee
    - In all cases, winners shall be selected by the Awards Panel, with at least two (2) panel members including the nominee's manager and the Human Resources Manager or their designees.
    - Selection decisions are based on alignment with award criteria, documented impact, and consistency with District values.
- Award Presentation
    - Department-level awards may be presented at department or staff meetings.
    - District-wide or higher-level awards may be presented at a regularly scheduled Board Meeting or other formal District event.
    - Human Resources will coordinate award presentations and notify recipients and supervisors in advance.
- Budget Oversight and Reporting
    - The Board of Directors shall approve the fiscal year awards budget as part of the annual budgeting process.
    - Human Resources shall manage the annual awards budget in coordination with the Finance and Accounting Manager.
    - The awards budget shall be allotted to the Departments commensurate to their staffing levels and coordinate with Human Resources if additional funds are required.
    - A quarterly report summarizing awards nominated and awarded shall be provided to the Board.
- Program Modifications
    - Administration reserves the right to modify procedures, award timing, or presentation format to meet operational needs.
    - All awards are subject to availability of funds and compliance with District policy.

Responsibilities:

The Board of Directors retains authority over:

- Approval of this policy and its amendments

- Establishment of award categories and maximum award values
- Oversight through periodic reporting

The Chief Executive Officer is responsible for implementation and administration of this policy.

Review & Updates:

Policy 3110 shall be reviewed by Administration no less than once every three (3) years and submitted to the Board of Directors for affirmation, revision, or repeal as appropriate.

BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT

Board Meeting – March 9, 2026

9G. Board Seat Vacancy9G. Board Seat Vacancy and Subsequent Appointment Page 1 of 2

Department:	Chief Executive Office	CEO Concurrence:	Yes
Consent Calendar:	No	4/5 Vote Required:	No

SUBJECT: Impending Board Seat Vacancy and Subsequent Appointment

STAFF REPORT:

On March 27, 2026, the Zone 1 Director seat will become vacant due to the resignation of Director Luis Avila. In accordance with California Government Code Section 1780 and District Bylaws, the Board has 60 days from the effective date of the vacancy to either appoint a qualified replacement or call a special election.

Staff recommends that the Board proceed with filling the vacancy by appointment.

Under Government Code Section 1780(h)(3), because the vacancy occurs in the first half of the term and more than 130 days prior to the November 2026 General District Election, the appointed Director will serve until a successor is elected at the November 3, 2026 election and qualified. The elected Director will then serve the remainder of the term ending December 2028.

Consistent with past District practice, the recommended process includes:

- **Accepting the resignation**
- **Appointing an Ad Hoc Committee to review applications**
- Notifying the Stanislaus County Board of Supervisors
- Posting a Public Notice of Vacancy and Intent to Fill by Appointment for a minimum of 15 days
- Publishing the Public Notice in the local newspaper, district website, and
- Accepting letters of interest and resumes from qualified Zone 1 residents
- Interviewing finalists in open session
- Making the appointment at a duly noticed Board meeting

The District has successfully followed this structured and transparent process in prior vacancies to ensure governance continuity and compliance with state law.

DISTRICT PRIORITY: Local Governance Continuity; Compliance With State Law

POLICY ISSUE: Process to fill Board seats mid-term

BOARD OF DIRECTORS OF DEL PUERTO HEALTH CARE DISTRICT

Board Meeting – March 9, 2026

9G. Board Seat Vacancy9G. Board Seat Vacancy and Subsequent Appointment Page 2 of 2

FISCAL IMPACT:	None
STAFFING IMPACT:	Minimal administrative time associated with public noticing and coordination.
CONTACT PERSON:	Karin Freese, CEO
ATTACHMENT(S):	Public Notice of Vacancy and Intent to Fill by Appointment Board Vacancy Candidate Search Process Applications (if received prior to meeting)

BOARD ACTION AS FOLLOWS:

ROLL CALL REQUIRED: No

MOTION: *I move that the Board of Directors accept the resignation of Zone 1 Director Luis Avila, effective March 27, 2026; declare the Zone 1 Director seat vacant as of that date; appoint _____ and _____ to the ad hoc committee to review applications, and direct staff to initiate the process to fill the vacancy by appointment in accordance with California Government Code Section 1780 and District Bylaws, with the seat to be placed on the November 3, 2026 ballot for the remainder of the term ending December 2028.*

BOARD MEETING ACTION SUMMARY

Roll Call Vote	***Motion***	***Second***	***Aye***	***No***	***Abstain***	***Absent***
Director Avila						
Director Campo						
Director Gomez						
Director Ramirez						
Director Traore						

I, the undersigned Clerk of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of a resolution duly adopted by the Board at a meeting thereof on the 9th day of March, 2026, by the above vote of the members thereof:

_____

Ma Traore, Secretary of the Board of Directors
Del Puerto Health Care District

From: Luis Avila
To: Karin Freese
Subject: Board Resignation
Date: Monday, February 23, 2026 9:26:30 PM

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Karin,

I hope this message finds you well. I'm writing to inform you of my decision to resign from my position on the Del Puerto Healthcare District Board of Directors. This decision comes as a result of my acceptance of a new career opportunity, which unfortunately demands a substantial amount of my time and focus.

Serving on the board has been an incredibly rewarding experience, and I have greatly appreciated the opportunity to work alongside such a dedicated team. I am proud of what we have accomplished together, and I have no doubt that the board will continue to achieve great things for our community.

I want to extend my heartfelt thanks for the support and collaboration I have received during my tenure. Please let me know what steps I need to take to ensure a smooth transition. I am more than willing to assist in any way possible during this process.

I wish the Del Puerto Healthcare District continued success in all its future endeavors.

My board resignation effective date is March 27th, 2026.

Warm regards,

Luis Avila, MBA

The Board of Directors of the Del Puerto Health Care District

SUBJECT: Ad Hoc Committee for Board of Director's Vacancy Appointee Search - **UPDATED March 9, 2026**

STAFF RECOMMENDATION:

1. Direct staff to publicize Board vacancy.
2. Board President appoint an Ad-hoc Committee
3. Ad-hoc Committee to receive and review letters of interest.
4. Ad hoc Committee to present top two candidates at Board Meeting on March 30, 2026.

REQUIREMENTS and PROCESS:

Publicize, review and recommend nominees for appointment to vacant Board of Directors seat. Per District Bylaws and CA State Law the nominee shall be seated until the next election (November 2026) at which time a Director will be voted into office to fill the vacated term which ends in December 2028.

Our Board of Directors' Bylaws and CA State Law provide how vacancies are to be filled. Following is the recommended timeline:

CALENDAR FOR NOTICE AND APPOINTMENT

March 10, 2026	Notify Stanislaus County Board of Supervisors; Post Public Notice of Board Vacancy & Intent to Fill by Appointment (15 Days). Post Public Notice on District website
March 10, 2026	Submit Public Notice for publication in Patterson Irrigator: March 12 & 19, 2026
March 25, 2026	Close acceptance period March 25, 2026
March 26-27, 2026	Ad-hoc Committee reviews letters of interest and selects two proposed candidates to be invited to the next Board meeting
March 30, 2026	Proposed candidates presented and interviewed by the full Board, appoint best candidate, administer Oath of Office, new Director assumes seat immediately

REMAINING TERM OF SEAT VACANT AS OF March 27, 2026:

Per CA Government Code 1780 (h) (3*): "If the vacancy occurs in the first half of a term of office and at least 130 days prior to the next general district election, the person appointed to fill the vacancy shall hold the office until the next general district election that is scheduled 130 or more days after the date the district board is notified of the vacancy, and thereafter until the person who is elected at that election to fill the vacancy has been qualified. The person elected to fill the vacancy shall hold office for the unexpired balance of the term of office."*

- Next general District Election November 4, 2026
- 130 days prior to election June 27, 2026
- The Board Appointee to the current vacant seat, whose term ends December 2028, shall hold office until the person elected on November 4, 2026 to fill the vacancy has been qualified.

PUBLIC NOTICE OF BOARD VACANCY
DEL PUERTO HEALTH CARE DISTRICT

INTENT TO FILL BY APPOINTMENT

March 9, 2026

NOTICE IS HEREBY GIVEN that a vacancy has been created on the Board of Directors of the Del Puerto Health Care District for Election Zone 1 by the resignation of Director Luis Avila effective March 27, 2026. Pursuant to Government Code Section 1780, the Board of Directors has 60 days to fill the vacancy.

NOTICE IS HEREBY GIVEN that the Board of Directors of the Del Puerto Health Care District is accepting letters of interest from District residents interested in appointment by the Board to fill such vacancy. The seat will be up for election in December 2026 for the term ending December 2028.

THIS NOTICE IS TO BE POSTED, by direction of the Board of Directors, in three conspicuous locations in the District at least 15 days before the appointment is made as well as published in the local newspaper.

Letters of interest along with a resume should be received by March 30, 2026.

Please mail to: Zone 1 Director Seat Vacancy
Del Puerto Health Care District
P.O. Box 187
Patterson, CA 95363

Or email to: CEO@dphealth.org

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9, 2026

9H. Community Mural for Healthcare Campus Promotion **Page 1 of 2**

Department: Chief Executive Office
Consent Calendar: No

CEO Concurrence: Yes
4/5 Vote Required: No

SUBJECT: **Community Mural for Del Puerto Health Care District – Healthcare Campus Promotion**

STAFF REPORT: At the Corner of 9th and Las Palmas a cinder block wall from the original construction of the demolished hose was retain for potential use as signage for the future campus

A local graphic artist, Rafael Arroyo, was requested to submit a proposal to create a public mural highlighting the District's commitment to expanding healthcare access for the Patterson community and the broader west side of Stanislaus County.

The mural concept visually represents the District's promise of **day-to-night healthcare availability**, illustrating community wellness during the day and emergency and hospital care during the evening. The imagery is designed to emphasize that compassionate healthcare services are available **around the clock and close to home**.

The mural would feature messaging related to the **New Patterson Healthcare Campus** and the District's mission of expanding healthcare access in the community by incorporating imagery representing the future healthcare campus and community health themes. (This is simply a first concept and can be adjusted.)

Project Scope - The proposal includes:

- Design and painting of a mural approximately **25 feet by 7.5 feet (187.5 square feet)**
- Exterior-grade paint and mural protection varnish
- Artist labor and materials for installation

STRATEGIC ALIGNMENT: This project supports the District's strategic goals by:

• Increasing community awareness of the **new Patterson Healthcare Campus**
• Promoting the District's role in expanding healthcare access
• Creating a visible community landmark that reflects the District's mission
• Supporting local artists and community engagement

FISCAL IMPACT:

Item	**Cost**
Artist Labor (187.5 sq ft @ $25/sq ft)	$4,687.50
Materials and Supplies	$600.00
Total per mural	**$5,287.50**
Total for two sides	**$10,575.00**

The proposal includes murals on **two sides of the structure**, resulting in a total estimated project cost of **$10,575**.

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – March 9, 2026

Funding would come from the District's **community outreach and marketing budget**.

STAFFING IMPACT: Staff requests that the Board of Directors consider entering into an agreement with **Rafael Arroyo** for the design and installation of a community mural promoting the new Patterson Healthcare Campus.

CONTACT PERSON: Karin Freese, CEO

ATTACHMENT(S): Rafael Arroyo Proposal

BOARD OPTIONS:

- Request modifications to the mural design or scale prior to approval.
- Approve the mural project and authorize the CEO to execute an agreement with Rafael Arroyo in an amount not to exceed $10,575.
- Approve a single mural rain an amount not to exceed $5,287.50
- Decline the proposal and pursue alternative signage or promotional options.

ROLL CALL REQUIRED: YES

RECOMMENDED MOTION: *I move that the Board of Directors… (TBD)*

Motion Made By	*Motion*	*Second*	*Aye*	*No*	*Abstain*	*Absent*
Director Avila						
Director Campo						
Director Gomez						
Director Ramirez						
Director Traore						

I, the undersigned Secretary of the Board of Directors of the Del Puerto Healthcare District, hereby certify that the foregoing is a full, true and correct copy of an action duly adopted by the Board at a meeting thereof on the 9th day of March, 2026, by the above vote of the members:

_____

Ma Traore, Board Secretary





Del Puerto Health Care District

Expanding healthcare for our community Mural

02/10/2026

Rafael Arroyo
531 Millwood Dr.
Patterson, CA 95363
(209)678-1772

Overview

The Del Puerto Health Care District mural is a vibrant visual tribute to the district's commitment to expanding healthcare access and strengthening community well-being. The design features day to night, symbolizing that compassionate, quality care is available around the clock. Bright daytime imagery reflects growth, vitality, and community wellness, while the evening landscape conveys reassurance, comfort, and continued support after dark. Together, these elements highlight Del Puerto Health Care District's promise to be there for residents day and night ensuring accessible care close to home for all.

Cost

1. Rate

Rate per square foot	$25.00	25x7.5=187.5 Square feet	$4,687.50

2. Cost of Material

Aerosol paint, aerosol caps, exterior latex paint, paint rollers, brushes, drop cloth, and painters tape, Mural protection varnish	$600.00
Total for 1 mural	$5,287.50
Total for 2 sides	$10,575.00

Del Pureto Health Care District
Perpetual Governance Calendar

Month	Governance & Strategy	Financial & CEO Oversight	Compliance & Elections
January	Annual Meeting & Election of Officers Reaffirm Authority & Limits (4000) Brown Act Refresher Strategic Plan Update	Mid-Fiscal Year Budget Update	Harassment Training (Odd Years)
February	Quarterly In-House Governance Training		Ethics Training (Odd Years) Conflict of Interest Review (Even Years)
March	Annual Governance Policy Review (4000 Series) Oversight Framework Review (Rotating 4-Year Cycle)		
April	Annual Board Retreat Strategic Plan Update Governance vs Management Review	CEO proposes draft goals for upcoming FY (aligned with strategic plan + budget draft)	Form 700 Due Annually
May	Adopt Legislative Advocacy Priorities Quarterly In-House Governance Training	First Draft Budget Review Board discusses and refines goals	
June		Board formally adopts CEO goals for next fiscal year Name CEO Eval Ad Hoc Committee Adopt Next FY Budget Performance year ready to begin July 1	
July		CEO Fiscal Year End Presentation	Election Notices (Even Years)
August	Quarterly In-House Governance Training	Closed Session CEO Evaluation & Compensation Recommendation	
September	Board Self-Assessment Survey	CEO Contract & Compensation Action	
October	Board Self-Assessment Discussion Adopt Governance Improvement Plan Media Policy Reaffirmation Strategic Plan update		
November	Quarterly In-House Governance Training		Elections (Even Years)
December	Installation of Directors New Director Orientation Review Governance Quick Reference		

Year	March Oversight Framework Focus	Board Role (Governance Level)	Not Board Role (Management)
2026	Financial Oversight Framework	Reserves, audit findings, internal control structure, purchasing authority limits	Accounting procedures, vendor selection, payroll operations
2027	Workforce Governance Framework	CEO authority structure, wage philosophy, organizational structure, risk trends	Individual HR cases, discipline, job descriptions
2028	Clinical & Public Safety Oversight Framework	Quality reporting dashboard, compliance reporting, medical director structure	Clinical protocols, call reviews, operational procedures
2029	Technology & Enterprise Risk Governance	Cybersecurity oversight, HIPAA compliance structure, disaster recovery framework	IT configurations, security settings, software implementation

Del Puerto Health Care District

UNDERSTANDING THE EVOLUTION OF THE HEALTHCARE CAMPUS COST ESTIMATES

Presented March 9, 2026

Purpose of This Brief

Over the past several years, the District has advanced the planning of the Patterson Healthcare Campus. As the project has matured, the cost estimates have evolved from an early **strategic planning estimate** to a more detailed **construction-level projection**.

This brief explains the difference between:

1. **The Wipfli 2024 Facility Sizing and Cost Analysis**
2. **The Cumming Group 2026 Construction Estimate**

Both estimates are valid and useful. They simply answer **different questions at different stages of planning.**

Understanding the difference helps clarify why the projected costs appear higher as the project moves toward construction.

---

1. The Wipfli Estimate: Strategic Planning

The Wipfli study was commissioned to answer a fundamental planning question:

What healthcare facilities will the District need over the next 20 years, and what might they cost to build?

The analysis established:

• projected facility sizes
• approximate construction costs
• long-term capital planning assumptions

Importantly, Wipfli **did include allowances for project-related costs**, not just the building itself.

The report applied a **45% project cost factor** to construction costs to estimate:

• architecture and engineering
• permitting and inspections
• equipment and furnishings
• consulting services and project administration

This approach is typical for **planning-level studies**, where detailed design information is not yet available.

However, the Wipfli estimate intentionally **did not include several categories of cost**, including:

• land acquisition
• major site preparation
• campus infrastructure
• construction escalation
• hazardous materials or unforeseen site conditions

As a result, the Wipfli estimate provided a **conceptual capital planning framework**, which was later used to support the District's Development Impact Fee Nexus Study.

Del Puerto Health Care District

UNDERSTANDING THE EVOLUTION OF THE HEALTHCARE CAMPUS COST ESTIMATES

Presented March 9, 2026

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2. Why the Cumming Estimate is Different

As the project advanced toward construction, the District needed a more detailed and realistic estimate.

The Cumming Group estimate incorporates:

- detailed building program information
- healthcare-specific construction assumptions
- campus infrastructure requirements
- prevailing wage public construction
- contractor overhead and contingency
- escalation to the anticipated construction timeline

It also reflects the **anticipated construction midpoint around 2027**, meaning costs are escalated beyond the 2024 planning estimate.

In short:

Wipfli estimated the facilities conceptually.
Cumming estimates what it will take to build them.

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3. Planning Estimate vs. Construction Estimate



The difference between the two estimates can be summarized as follows:

Del Puerto Health Care District

UNDERSTANDING THE EVOLUTION OF THE HEALTHCARE CAMPUS COST ESTIMATES

Presented March 9, 2026

Characteristic	Wipfli Estimate	Cumming Estimate
Purpose	Strategic planning	Construction budgeting
Design detail	Conceptual	Schematic / program-based
Soft costs	Included (45% allowance)	Modeled in detail
Infrastructure	Limited	Fully included
Escalation	Not included	Included
Cost basis	2023–2024 dollars	Escalated to construction year

Both estimates are appropriate for their purpose; they simply reflect **different levels of project maturity**.

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4. The Role of Greenfield Site Development

One of the largest differences between the two estimates is **site development**.

The campus will be constructed on **undeveloped land**, which requires significant infrastructure before buildings can be constructed.

Examples include:

- roadways and emergency vehicle circulation
- stormwater retention and drainage
- parking areas
- utility extensions
- grading and building pad preparation

These costs were largely outside the scope of the Wipfli planning estimate but are included in the Cumming estimate.

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5. Construction Cost Escalation

Construction costs nationwide have risen significantly since 2020 due to:

- labor shortages
- supply chain volatility
- material price increases
- regulatory complexity for healthcare buildings

The Cumming estimate includes **approximately 5% annual compounded escalation** to account for the expected construction start date.

Planning estimates typically exclude escalation because the timing of construction is not yet defined.

Del Puerto Health Care District

UNDERSTANDING THE EVOLUTION OF THE HEALTHCARE CAMPUS COST ESTIMATES

Presented March 9, 2026

6. Phase 1: DPAC and Combined Clinic

Phase 1 of the campus focuses on two critical healthcare facilities:

Del Puerto Ambulance and Administrative Center (DPAC)
Combined Clinic (Primary Care and Behavioral Health)

These buildings address two of the most urgent healthcare needs on the west side of Stanislaus County.

The Phase 1 estimate includes:

- building construction
- healthcare mechanical systems
- emergency vehicle circulation
- parking and site development
- construction contingencies
- escalation to construction start

Because this estimate includes the **full cost of delivering the project**, the Phase 1 total appears larger than the earlier conceptual planning estimate.

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7. What Has Not Changed

Despite the evolution of the cost estimates, the core project vision remains the same.

The District continues to pursue the same long-term healthcare goals:

- improved emergency response capacity
- expanded primary care access
- behavioral health services
- long-term hospital and senior care planning

The newer estimate simply provides a **more accurate roadmap for delivering these facilities.**

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8. Key Takeaways for the Board

1. The **Wipfli study was a planning-level estimate**, but it did include allowances for soft costs.
2. The **Cumming estimate adds greater detail**, particularly for infrastructure and construction delivery.
3. The increase reflects **improved accuracy and updated construction assumptions**, not a change in project scope.
4. Construction escalation since 2024 also contributes to the difference.
5. The District is following a **normal planning progression used for major public healthcare projects.**

Final Perspective

Del Puerto Health Care District

UNDERSTANDING THE EVOLUTION OF THE HEALTHCARE CAMPUS COST ESTIMATES

Presented March 9, 2026

The Patterson Healthcare Campus represents a generational investment in healthcare access for the west side of Stanislaus County.

As the project moves from **strategic planning into implementation**, the District's estimates naturally become more detailed and precise.

This progression—from conceptual planning to refined construction budgeting—is a normal and responsible part of developing large public infrastructure projects.