



BOARD OF DIRECTORS

Becky Campo, President

Reyna Gomez, Vice-President

Ma Traore, Secretary

Sylvia Ramirez, Treasurer

[Zone 1 Vacant], Director

PO Box 187, Patterson, CA 95363

Phone (209) 892-8781 Fax (209) 892-3755

BOARD OF DIRECTORS' MEETING

Monday, April 27, 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, April 27, 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**
 - A. AB 2282 (Alanis) – Update and Next Steps – Kelli L’Heureux, Resilient Advocacy
 - B. NAMIWalks Results – Event Results & Highlights
8. **Consent Calendar** – Public Comment is taken prior to Board Action **ACTION**
 - A. *Approve Board of Directors Meeting Minutes – March 23, 2026
 - B. *Approve Finance Committee Meeting Minutes – February 18, 2026
 - C. *Approve Finance Reports and Warrants – February 2026
 - D. *Department Head Reports: CEO, Ambulance, Health Center, Human Resources
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. Review of Policy 3417 CEO Compensation Policy **DISCUSSION**
10. **Department Reports**
 - A. Campus Phase 1 Update Written
 - B. Calendar for Annual CEO Performance Review Written
 - C. Fy 2025-26 Strategic Plan 3rd Quarter Update Written
 - D. Board Members – Reports on Activities or Topic Requests for Future Meeting
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. 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: June 2026.

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13. Upcoming Regular Board and Standing Committee Meeting Dates

Board: Mon, May 11-7:00 PM,
City Hall

Board: Mon, May 18-6:00 PM,
City Hall

Finance: Tues, May 20-6:00 PM,
District Office

Board: Mon, June 8-7:00 PM,
City Hall

Board: Monday June 29-6:00 PM,
City Hall

Finance: Tues, June 23-6:00 PM,
District Office

Board: Mon, July 13-7:00 PM,
City Hall

Board: Mon, July 27-6:00 PM,
City Hall

14. Adjourn

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 at 6:07PM by President Becky Campo.**

2. **Pledge of Allegiance**

Directors Present:	President Becky Campo Vice President Reyna Gomez Treasurer Sylvia Ramirez Director Luis Avila
Directors Absent:	Secretary Ma Traore
Staff Present:	CEO Karin Freese, Ph.D. Ambulance Director Paul Willette Clinical Education Manager Jim Whitworth 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:	Tim Benefield, Gallo Macmaster, Larry Beuhner, two additional member of the public; Kelly L'Heureux – Resilient Advocacy

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 - None**

5. **Approval of Agenda**

Motion: To approve the agenda as presented.
M/S: Avila/Gomez
Ayes: Gomez, Ramirez, Campo, Avila
Nays: None
Abstain: None
Absent: Traore
Motion: Passed

6. **Public Comment – Items not on the Agenda - None**

7. **Presentations** – Public Comment taken following each presentation.

A. Donation from Larry & Joyce Beuhner to the Del Puerto Hospital Foundation

The Board recognized a \$200,000 donation from Larry and Joyce Beuhner to the Del Puerto Health Care Hospital Foundation. The contribution is associated with a prior real estate transaction and aligns with the Keystone C component. Gallo Macmaster joined the Board for a brief recognition and photo opportunity, and the Board expressed appreciation for the generous donation.

B. NAMIWalks Stanislaus: March Planning & Event Budget (event is April 25, 2026)

Staff reported on the upcoming National Alliance on Mental Illness Stanislaus Walk scheduled for April 25 at Patterson High School Community Stadium. The event aims to promote mental health awareness and community participation, with a goal of \$5,000 in sponsorships and \$10,000 in

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donations. Stanislaus County Behavioral Health & Recovery Services has committed \$1,000 in sponsorship support. Board members discussed the importance of mental health outreach and were invited to attend the event. No action was required.

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

Motion: To approve the consent calendar as presented.

M/S: Ramirez/Avila

Ayes: Gomez, Ramirez, Campo, Avila

Nays: None

Abstain: None

Absent: Traore

Motion: Passed

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* None

B. FY24-25 Net Income Allocation to Reserve Accounts

Staff reported on the annual fiscal year-end review of available cash and recommended balance sheet transfers to designated reserve funds. The proposed transfers total \$912,032, including \$366,000 to the Asset Replacement Fund, \$96,000 to the Operating Reserve, and \$450,032 to the Mitigation Fees Reserve.

Motion: To direct the CEO to make a Balance Sheet transfer totaling \$912,032; \$366,000 to th Asset Replacement Fund account; \$96,000 to Operating Reserve and \$450,032 to the Mitigation Fees account.

M/S: Gomez/Ramirez

Ayes: Gomez, Ramirez, Campo, Avila

Nays: None

Abstain: None

Absent: Traore

Motion: Passed - with a Roll Call

C. FY25-26 Budget Mid-Year Adjustments

The Board reviewed the mid-year budget adjustments, including increased ambulance staffing, new pediatrician hire, wage adjustments, unbudgeted expenses, and additional revenue from the Variable Rate Range Program. The net impact is a \$51,435 reduction to the overall budget. Staff provided department-level impacts and invited questions from the Board. No questions were raised.

Motion: To approve the revised FY25-26 budget as discussed.

M/S: Ramirez/Gomez

Ayes: Gomez, Ramirez, Campo, Avila

Nays: None

Abstain: None

Absent: Traore

Motion: Passed - with a Roll Call

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

D. Support for AB 2282 (Alanis) (2025–2026 Regular Session) To Authorize Emergency Stabilization Services In Patterson

Staff updated the Board on Assembly Bill 2282, introduced by Assemblymember Alanis, which would authorize freestanding emergency stabilization services in areas without nearby hospitals. The Board was asked to approve a resolution supporting AB 2282 to advance the District's goal of restoring emergency services to the west side of Stanislaus County.

Motion: To 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.

M/S: Ramirez/Avila

Ayes: Gomez, Ramirez, Avila

Nays: Campo

Abstain: None

Absent: Traore

Motion: Passed - with a Roll Call

E. Consideration of engaging a contract lobbyist for AB 2282 Emergency Stabilization Facility

The Board discussed engaging Resilient Advocacy for legislative advocacy related to AB 2282 (emergency stabilization services). The firm would help advocate at the State Capitol, educate legislators, coordinate community support, and guide the District through committee hearings.

The proposed contract is \$9,500 per month, initially for six months, with the option for month-to-month termination. Board members expressed support for advocacy but some requested a month-to-month engagement to evaluate progress before committing longer-term. The contract would enhance the District's ability to navigate Sacramento politics, ensure proper messaging, and increase the likelihood of AB 2282 passing.

Motion: To authorize the CEO to execute an agreement with Resilient Advocacy to provide legislative advocacy services in an amount not to exceed \$9,500 per month on a month-to-month basis.

M/S: Avila/Gomez

Ayes: Gomez, Ramirez, Avila

Nays: Campo

Abstain: None

Absent: Traore

Motion: Passed - with a Roll Call

F. Consideration of Policy 3110 Employee Appreciation and Recognition Program

The Board reviewed and considered adoption of Policy 3110, establishing a comprehensive Employee Appreciation and Recognition Program. Estimated annual fiscal impact: approximately \$2,000 for longevity awards; \$750 per quarter for other recognition awards. The program aims to boost morale, encourage initiative, and support employee retention. The Board reviewed and expressed support for adoption, noting the program's low cost relative to its anticipated positive impact.

Motion: To 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.

M/S: Gomez/Ramirez

Ayes: Gomez, Ramirez, Campo, Avila

Nays: None

Del Puerto Health Care District
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Monday, March 09, 2026 @ 6:00 PM

Abstain: None
Absent: Traore
Motion: Passed - with a Roll Call

G. Resignation of Board Member Luis Avila, Zone 1, and Appointment of Ad Hoc Committee to Review of Board Applications

The Board accepted the resignation of Luis Avila as **Zone 1 Director**, effective **March 30, 2026**. Board members expressed appreciation for his service and contributions. The Board declared the seat vacant as of that date and approved initiating the appointment process in accordance with **California Government Code Section 1780**. An **ad hoc committee** consisting of Becky and Sylvia, with Reyna as alternate, was appointed to review applications and recommend candidates.

The vacancy will be filled by Board appointment, with the position scheduled to appear on the **November 3, 2026 ballot** for the remainder of the term ending **December 2028**.

Motion: To accept the resignation of Zone 1 Director Luis Avila effective March 30, 2026; declare the Zone 1 Director seat vacant as of that date; appoint Campo and Ramirez and Gomez as alternate to 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.

M/S: Ramirez/Gomez

Ayes: Gomez, Ramirez, Campo, Avila

Nays: None

Abstain: None

Absent: Traore

Motion: Passed - with a Roll Call

H. Mural artwork on block wall at 9th and Las Palmas

The Board considered a proposal to install a mural on a block wall located at 9th and Las Palmas, a property previously cleared following demolition of a house. Staff explained that the mural could serve as a community-facing feature while development plans for the site continue.

Local artist Rafael Arroyo submitted two conceptual designs. Board members discussed the designs and expressed interest in refining the concept to better reflect the district and community while avoiding imagery that could create premature expectations about future hospital services.

The estimated cost for the mural is \$10,575 for both sides of the wall. The Board approved moving forward with the project and requested that the artist return with revised design concepts for further input.

Motion: To approve the mural project with Rafael Arroyo to make changes to what was presented.

M/S: Gomez/Ramirez

Ayes: Gomez, Ramirez, Campo, Avila

Nays: None

Abstain: None

Absent: Traore

Motion: Passed - with a Roll Call

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

10. Department Reports

- A. Board Members – Reports on Activities or Topic Requests for Future Meeting
A monthly report from Kelli L’Huereux will be added to the board agenda.

B. Construction Costs Brief

Staff provided an informational update on the healthcare campus construction cost estimates and the planning process. The Board also reviewed the perpetual calendar, which outlines recurring Board responsibilities and upcoming compliance items, including Form 700 filings and required trainings.

Staff explained that earlier planning-level estimates prepared by Wipfli were based on projected service demand, facility size, and provider needs. Updated estimates from the Cummings Group include additional details and factors not previously accounted for, such as infrastructure development, prevailing wage requirements, and construction cost escalation.

These updated estimates are expected to be higher than the original projections, reflecting improved accuracy and current construction market conditions. Staff will present a more detailed comparison of the estimates in a future meeting. No action was required

11. Closed Session Entered at 7:38PM.

- 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.

12. Return to Open Session at 7:57 PM & Report of Any Action(s) Taken

13. Upcoming Regular Board and Standing Committee Meeting Dates

		Finance: Tue, Mar 24-5:30 PM, District Office
Board: Mon, Apr 13-7:00 PM, City Hall	Board: Mon, Apr 27-6:00 PM, City Hall	Finance: Tue, Apr 28-5:30 PM, District Office
Board: Mon, May 11-7:00 PM, City Hall	Board: Mon, May 25 -Canceled Due To Holiday	Finance: Tue, May 26-5:30 PM, District Office

14. Meeting adjourned at 7:58 PM.

Ma Traore, Board Secretary

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

Date Signed

DEL PUERTO HEALTH CARE DISTRICT
1700 Keystone Pacific Parkway, Suite B, Patterson, CA 95363
FINANCE MEETING
MINUTES February 18, 2026

1. Call to order/Attendance

The meeting was called to order by Sylvia Ramirez at 5:11 PM

Other Board Members Present: Ma Traore

Staff Members Present: Karin Freese, Ph.D., Administrative Director/CEO; Maria Reyes-Palad, Financial Accounting Manager; Suzie Benitez, Health Center Manager; Robert Trefault, Human Resources Manager; Danae Skinner, Administrative Staff Accountant and Paul Willette, Ambulance Director of Operations, arrived 6:26pm.

2. Public Participation – there were no comments.

3. Acceptance of Agenda

M/S/C Ma Traore/Sylvia Ramirez to accept the agenda as presented.

4. Finance Report Review

A. Review for Approval: January 21, 2026, Finance Meeting Minutes

M/S/C Ma Traore/Sylvia Ramirez to accept the minutes for January 21, 2026, as presented.

B. Review Financial Reports for January 2026

Maria Reyes-Palad reviewed the Financial Reports for January 2026 and answered all questions regarding the Financial Reports.

M/S/C Ma Traore/Sylvia Ramirez approved to recommend that the Board accept the January 2026 Financial Reports as presented.

C. Review for Recommendation: January 2026 Warrants

Maria Reyes-Palad reviewed the report and answered all questions regarding the Warrants.

M/S/C Ma Traore/Sylvia Ramirez approved to recommend that the Board accept the Warrants as presented.

5. Old Business – NONE

6. New Business

A. FY2025 Net Income Allocation to Reserves

Maria Reyes-Palad and Karin Freese reviewed the FY2025 Net Income Allocation to Reserves and answered all questions regarding the resolution to be presented to the Board.

M/S/C Ma Traore/Sylvia Ramirez approved to recommend that the Board adopt the resolution for FY2025 Net Income Allocation to Reserves as presented.

B. FY2026 Budget Mid-Year Revision Draft.

Karin Freese reviewed the FY2026 Budget Mid-Year Revision Draft and answered all questions regarding the recommendation. Robert Trefault reviewed the Employee Recognition Policy due to its impact on the Mid-Year Budget Revision.

M/S/C Ma Traore/Sylvia Ramirez approved to recommend that the Board accept the FY2026 Budget Mid-Year Revision as presented.

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

Ma Traore will review the Account Reconciliations for January 2026.

Sylvia Ramirez will review the Account Reconciliations for December 2025.

8. Meeting adjourned: 6:27 PM

DEL PUERTO HEALTH CARE DISTRICT
1700 Keystone Pacific Parkway, Suite B, Patterson, CA 95363
FINANCE MEETING
MINUTES February 18, 2026

Respectfully submitted,

Sylvia Ramirez, Treasurer

DRAFT

Del Puerto Health Care District
Balance Sheet
As of February 28, 2026

	Feb 28, 26	Jan 31, 26	% Change	Feb 28, 25	% Change	Notes
ASSETS						
Current Assets						
Total Checking/Savings	7,317,858	8,049,326	(9%)	6,512,687	12%	
Total Accounts Receivable	1,048,248	1,111,301	(6%)	1,302,739	(20%)	
Total Other Current Assets	311,304	171,648	81%	291,531	7%	
Total Current Assets	8,677,410	9,332,275	(7%)	8,106,957	7%	
Fixed Assets						
Total 151.000 · Capital assets	17,665,990	16,771,133	5%	5,367,292	229%	
Total Fixed Assets	17,665,990	16,771,133	5%	5,367,292	229%	
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	26,469,709	26,229,717	1%	13,682,360	93%	
LIABILITIES & EQUITY						
Liabilities						
Total Current Liabilities	1,127,449	931,116	21%	749,195	50%	
Total Long Term Liabilities	11,290,657	11,296,711	(0%)	1,549,770	629%	
Total Liabilities	12,418,106	12,227,827	2%	2,298,965	440%	
Equity						
350.000 · Unrestricted Assets	3,414,606	4,326,638	(21%)	2,313,589	48%	
Total 360.000 · Assigned Fund Balance	3,761,855	3,299,855	14%	3,366,082	12%	
Total 370.000 · Restricted Fund Balance	3,393,312	2,939,232	15%	2,845,107	19%	
390.000 · Net Fixed Assets (Capital)	2,492,762	2,492,762		2,492,762		
Net Income	989,071	943,406	5%	365,858	170%	<i>YTD overall result</i>
Total Equity	14,051,606	14,001,893	0%	11,383,398	23%	
TOTAL LIABILITIES & EQUITY	26,469,712	26,229,720	1%	13,682,363	93%	

	Feb 28, 26	Jan 31, 26
Month End Cash Balance	\$ 7,317,858	\$ 8,049,326
101.015 - TCB Keystone C 8641	(179,900)	(179,900)
103.100 - TCB USDA Debt Reserve 7237	(122,996)	(122,995)
370.010 - Mitigation Fees	(1,759,862)	(1,305,782)
360.030 - Asset Replacement Fund	(1,784,855)	(1,418,855)
AP & Payroll Liabilities	(946,154)	(563,243)
UNENCUMBERED CASH	\$ 2,524,091	\$ 4,458,551
Percent of Operating Reserve	128%	237%
# Days Available Cash for Operations	114.91	213.33
360.070 - Operating Reserve (90 days)	\$ 1,977,000	\$ 1,881,000
Daily Operating Reserve	\$ 21,967	\$ 20,900

Del Puerto Health Care District
YTD by Class
July 2025 through February 2026

	Total 01 Administration				Total 02 Patterson District Ambulance				Total 03 Del Puerto Health Center							
	Jul '25 - Feb 26	Budget	Annual Budget	% Annual Budget	Reference: (8/12month s= 66.67%)	Jul '25 - Feb 26	Budget	Annual Budget	% Annual Budget	Reference: (8/12month s= 66.67%)	Jul '25 - Feb 26	Budget	Annual Budget	% Annual Budget	Reference: (8/12month s= 66.67%)	
Ordinary Income/Expense																
Income																
401.000 · Gross Patient Service Revenue						6,863,279	8,039,377	12,059,066	56.91%							
403.000 · Adjustments						(4,819,547)	(4,680,324)	(6,741,486)	71.49%							
405.000 · Bad Debt						231,808	(345,693)	(518,540)	-44.70%							
407.000 · Other Income																
		431	647			13,374	8,454	12,681	105.46%							
Total Income		431	647			2,288,914	3,021,814	4,811,721	47.57%							
Gross Profit		431	647			2,288,914	3,021,814	4,811,721	47.57%							
Expense																
601.000 · Salaries & Wages	455,203	459,674	689,511	66.02%		1,353,650	1,363,905	1,997,858	67.76%		1,163,568	1,189,902	1,738,725	66.92%		
602.000 · Employee Benefits	113,067	115,066	172,598	65.51%		290,738	288,589	432,732	67.19%		300,847	362,497	530,544	56.71%		
603.000 · Professional Fees	228,775	210,614	268,016	85.36%		9,744	22,092	33,138	29.40%		332,848	334,948	559,441	59.50%		
604.000 · Purchased Services	9,550	10,575	15,863	60.20%		169,618	166,213	249,320	68.03%		311,218	344,391	516,332	60.27%		
605.000 · Supplies	5,154	3,429	5,143	100.22%		73,778	66,632	99,949	73.82%		76,030	76,953	115,430	65.87%		
606.000 · Utilities	4,516	5,488	8,232	54.86%		18,913	18,378	27,567	68.61%		26,937	32,679	49,018	54.95%		
607.000 · Rental and Lease	4,445	4,521	7,565	58.76%				0			1,728	1,826	2,738	63.10%		
608.000 · Insurance Coverages	34,791	33,547	50,092	69.45%		168,483	180,593	266,659	63.18%		99,834	98,736	147,411	67.72%		
609.000 · Maintenance & Repairs	2,119	4,361	6,542	32.39%		78,899	76,251	114,379	68.98%		23,784	29,449	44,174	53.84%		
610.000 · Depreciation and Amortization	7,528	6,341	9,512	79.14%		135,769	176,542	264,813	51.27%		63,431	60,167	90,250	70.28%		
611.000 · Other operating expenses	86,038	89,175	146,447	58.75%		354,350	418,998	581,262	60.96%		86,997	82,027	123,029	70.71%		
699.999 · Admin Cost Share Allocation	(894,115)	(753,409)	(1,296,750)	68.95%		447,058	376,705	648,375	68.95%		447,058	376,704	647,375	69.06%		
Total Expense	57,071	189,382	82,771	68.95%		3,100,999	3,154,898	4,716,053	65.75%		2,934,280	2,990,279	4,564,467	64.29%		
Net Ordinary Income	(57,071)	(188,951)	(82,124)	69.49%		(812,084)	(133,084)	95,668	-848.85%		(48,499)	66,268	20,353	-238.29%		
Other Income/Expense																
Other Income																
701.000 · District Tax Revenues						169,320	169,317	253,975	66.67%							
702.000 · Impact Mitigation Fees																
703.000 · Investment Income														(49,000)	0.00%	
704.000 · Interest Expense											(32,195)	(32,667)				
705.000 · Tenant Revenue																
710.000 · Misc Other Income	2,807	1,813	2,719	103.23%							4,441	2,633	3,950	112.44%		
Total Other Income	2,807	1,813	2,719	103.23%		169,320	169,317	253,975	66.67%		(27,754)	(30,033)	(45,050)	-9.86%		
Other Expense																
802.000 · Keystone District Expense																
804.000 · Non-Allocable District Expenses	97,089	50,000	50,000	194.18%												
810.000 · Misc Other Expense	500															
Total Other Expense	97,589	50,000	50,000	195%										(45,050)		
Net Other Income	(94,782)	(48,187)	(47,281)	200%		169,320	169,317	253,975	66.67%		(27,754)	(30,033)	(45,050)	-9.86%		
Net Income	(151,853)	(237,138)	(129,405)	-75.41%		(642,764)	36,233	349,643	-183.83%		(76,253)	36,235	(24,697)	308.76%		

Del Puerto Health Care District
YTD by Class
July 2025 through February 2026

	Total 090 Other Non-Operating		Total 096 Keystone Bldg C		OVERALL			
	Jul '25 - Feb 26	Annual Budget	Jul '25 - Feb 26	Jul - Dec 25	Jul '25 - Feb 26	Budget	FY 25-26 OVERALL BUDGET	% Budget
Ordinary Income/Expense								
Income								
401.000 · Gross Patient Service Revenue					10,259,345	11,474,200	17,211,301	59.61%
403.000 · Adjustments					(5,328,333)	(5,070,757)	(7,327,135)	72.72%
405.000 · Bad Debt					213,976	(338,900)	(508,351)	-42.09%
407.000 · Other Income	3,195				32,902	14,248	21,373	153.94%
Total Income	3,195				5,177,890	6,078,792	9,397,188	55.10%
Gross Profit	3,195				5,177,890	6,078,792	9,397,188	55.10%
Expense								
601.000 · Salaries & Wages					2,972,421	3,013,481	4,426,094	67.16%
602.000 · Employee Benefits					704,652	766,152	1,135,874	62.04%
603.000 · Professional Fees					571,367	567,654	860,595	66.39%
604.000 · Purchased Services					490,386	521,179	781,515	62.75%
605.000 · Supplies					154,962	147,014	220,522	70.27%
606.000 · Utilities					50,366	56,545	84,817	59.38%
607.000 · Rental and Lease					6,173	6,347	10,304	59.91%
608.000 · Insurance Coverages					303,108	312,876	464,162	65.30%
609.000 · Maintenance & Repairs					104,802	110,061	165,095	63.48%
610.000 · Depreciation and Amortization			11,997	11,997	218,725	255,047	364,575	59.99%
611.000 · Other operating expenses	359				527,744	590,200	850,738	62.03%
699.999 · Admin Cost Share Allocation								
Total Expense	359		11,997	11,997	6,104,706	6,346,556	9,364,291	65.19%
Net Ordinary Income	2,836		(11,997)	(11,997)	(926,815)	(267,764)	32,897	-2817.32%
Other Income/Expense								
Other Income								
701.000 · District Tax Revenues	1,239,296	1,858,945			1,408,616	2,028,262	2,112,920	66.67%
702.000 · Impact Mitigation Fees	87,270				87,270		80,000	109.09%
703.000 · Investment Income	116,645	80,000			116,645	80,000	(49,000)	-238.05%
704.000 · Interest Expense					(32,195)	(32,667)		
705.000 · Tenant Revenue			46,044	46,044	46,044			
710.000 · Misc Other Income			387,642	387,642	394,890	392,088	6,669	5921.28%
Total Other Income	1,443,211	1,938,945	433,686	433,686	2,021,270	2,513,728	2,150,589	93.99%
Other Expense								
802.000 · Keystone District Expense			7,494	7,494	7,494			
804.000 · Non-Allocable District Expenses					97,089	50,000	50,000	194.18%
810.000 · Misc Other Expense	300				800			
Total Other Expense	300		7,494	7,494	105,383	57,494	50,000	210.77%
Net Other Income	1,442,911	1,938,945	426,192	426,192	1,915,887	2,456,234	2,100,589	91.21%
Net Income	1,445,746	1,938,945	414,195	414,195	989,071	2,188,470	2,133,486	46.36%

Del Puerto Health Care District
Warrants by Bank Account
February 2026

Type	Date	Num	Name	Credit	Credit
101.000 · Cash and cash equivalents					
101.010 · Tri Counties Bank					
101.011 · TCB-Operating Checking 1739					
Check	02/28/2026			55.00	
Bill Pmt -Check	02/23/2026	ACH BETA	Beta Healthcare - Workers Comp	9,299.00	
Bill Pmt -Check	02/23/2026	ACH BETA	Beta Healthcare Group	18,828.58	
Bill Pmt -Check	02/02/2026	ACH Dr. R	MD - Rodriguez, Jose	38,188.33	
Bill Pmt -Check	02/02/2026	EFT	Lecticon	120.00	
Bill Pmt -Check	02/02/2026	EFT	GreenWorks Janitorial Services	180.00	
Bill Pmt -Check	02/02/2026	EFT	GreenWorks Janitorial Services	4,110.00	
Bill Pmt -Check	02/02/2026	EFT	PG&E	626.19	
Bill Pmt -Check	02/02/2026	EFT	Stericycle	670.05	
Bill Pmt -Check	02/02/2026	EFT	Stericycle	201.02	
Bill Pmt -Check	02/02/2026	EFT	Verizon Wireless	911.07	
Bill Pmt -Check	02/09/2026	EFT	TID Turlock Irrigation District +06	1,140.62	
Bill Pmt -Check	02/05/2026	EFT	Umpqua Bank	7,047.46	
Bill Pmt -Check	02/17/2026	EFT	City Of Patterson-H2O, sewer, garba	392.43	
Bill Pmt -Check	02/17/2026	EFT	Frontier-3755	387.97	
Bill Pmt -Check	02/17/2026	EFT	Stericycle / Shred-it	124.61	
Bill Pmt -Check	02/17/2026	EFT	Stericycle / Shred-it	361.40	
Bill Pmt -Check	02/20/2026	EFT	ABW Medical, LLC	10,131.00	
Bill Pmt -Check	02/20/2026	EFT	Athena Health, Inc.	16,685.27	
Bill Pmt -Check	02/20/2026	EFT	Staples Advantage	388.91	
Bill Pmt -Check	02/02/2026	EFT	FP Mailing Solutions	300.00	
Bill Pmt -Check	02/17/2026	EFT	Comcast Business Voice Edge	536.37	
Bill Pmt -Check	02/09/2026	ACH 2-09	Airgas USA, LLC	539.61	
Bill Pmt -Check	02/09/2026	ACH 2-09	Data Path, Inc	6,859.47	
Bill Pmt -Check	02/09/2026	ACH 2-09	Pacific Records Management	426.44	
Bill Pmt -Check	02/09/2026	ACH 2-09	Stryker Sales Corporation	1,812.79	
Bill Pmt -Check	02/09/2026	ACH 2-09	WIPFLI LLP	6,095.00	
Bill Pmt -Check	02/09/2026	ACH HDR 2-4	HDR Architecture Inc	90,958.26	<i>CIP - Healthcare Campu</i>
Bill Pmt -Check	02/23/2026	ACH 2-23	Advanced Linen Service	891.84	
Check	02/13/2026	Wire 21326	Chicago Title	637,659.28	<i>CIP - 15711 Rodas Land</i>
Bill Pmt -Check	02/02/2026	33995	MD - Padam, Jully	10,000.00	
Bill Pmt -Check	02/09/2026	33996	Agile Occ Med / CA Occ Phy	938.00	
Bill Pmt -Check	02/09/2026	33997	AMR-American Medical Response	7,865.77	
Bill Pmt -Check	02/09/2026	33998	Bound Tree Medical LLC	490.29	
Bill Pmt -Check	02/09/2026	33999	Burke, Williams & Sorensen	4,101.45	
Bill Pmt -Check	02/09/2026	34000	J.B. Anderson Land Use Planning	15,943.80	<i>CIP - Healthcare Campu</i>
Bill Pmt -Check	02/09/2026	34001	Jays Tires	750.00	
Bill Pmt -Check	02/09/2026	34002	Language Line	79.58	
Bill Pmt -Check	02/09/2026	34003	Life-Assist	1,946.25	
Bill Pmt -Check	02/09/2026	34004	McKesson Medical Surgical Inc.	1,419.67	
Bill Pmt -Check	02/09/2026	34005	Monique Whitworth	600.00	
Bill Pmt -Check	02/09/2026	34006	NF Public Affairs	2,500.00	<i>CIP - Healthcare Campu</i>
Bill Pmt -Check	02/09/2026	34007	Patterson City Tow Service	350.00	
Bill Pmt -Check	02/09/2026	34008	Patterson Irrigator	30.00	
Bill Pmt -Check	02/09/2026	34009	Paul Oil Co., Inc.	2,988.69	

Del Puerto Health Care District
Warrants by Bank Account
February 2026

Type	Date	Num	Name	Credit	Credit
Bill Pmt -Check	02/09/2026	34010	Physicians Service Bureau	365.55	
Bill Pmt -Check	02/09/2026	34011	Rush Truck Center Ceres	814.81	
Bill Pmt -Check	02/09/2026	34012	West Side Storage Baldwin	216.00	
Bill Pmt -Check	02/09/2026	34013	Westside Landscape & Concrete	302.00	
Bill Pmt -Check	02/09/2026	34014	Workbench True Value Hdwe.	27.00	
Bill Pmt -Check	02/09/2026	34015	Patterson Rotary	200.00	
Check	02/17/2026	34016	Grant Mercantile Agency	149.97	
Bill Pmt -Check	02/17/2026	34017	Agile Occ Med / CA Occ Phy	375.00	
Bill Pmt -Check	02/17/2026	34018	AMR-American Medical Response	8,425.39	
Bill Pmt -Check	02/17/2026	34019	Bound Tree Medical LLC	897.17	
Bill Pmt -Check	02/17/2026	34020	City Of Patterson-H2O, sewer, garba	805.45	
Bill Pmt -Check	02/17/2026	34021	City Signs	697.64	
Bill Pmt -Check	02/17/2026	34022	Life-Assist	1,692.13	
Bill Pmt -Check	02/17/2026	34023	National Association of EMS Educatc	95.00	
Bill Pmt -Check	02/17/2026	34024	North Star	5,460.00	<i>CIP - Healthcare Campu</i>
Bill Pmt -Check	02/17/2026	34025	Solutions Group	2,383.14	
Bill Pmt -Check	02/17/2026	34026	Thompson Chevrolet Buick GMC Inc.	174.52	
Bill Pmt -Check	02/17/2026	34027	Zoll	853.96	
Bill Pmt -Check	02/23/2026	34028	Agile Occ Med / CA Occ Phy	349.00	
Bill Pmt -Check	02/23/2026	34029	Bound Tree Medical LLC	381.06	
Bill Pmt -Check	02/23/2026	34030	Burke, Williams & Sorensen	7,568.45	
Bill Pmt -Check	02/23/2026	34031	Crescent Supply	176.31	
Bill Pmt -Check	02/23/2026	34032	Everon / ADT / Protection One	354.45	
Bill Pmt -Check	02/23/2026	34033	Life-Assist	1,559.49	
Bill Pmt -Check	02/23/2026	34034	Malm Fagundes LLP	299.00	
Bill Pmt -Check	02/23/2026	34035	McKesson Medical Surgical Inc.	1,249.61	
Bill Pmt -Check	02/23/2026	34036	MO-CAL Office Solutions	8,266.25	<i>Asset - HC copier</i>
Bill Pmt -Check	02/23/2026	34037	Rush Truck Center Ceres	301.56	
Bill Pmt -Check	02/23/2026	34038	West Side Storage Baldwin	216.00	
Total 101.011 · TCB-Operating Checking 1739				950,587.38	
101.012 · TCB-Payroll Account 2999					
Liability Check	02/11/2026		Payroll Direct Deposit	104,069.91	
Liability Check	02/25/2026		Payroll Direct Deposit	104,208.11	
Liability Check	02/12/2026	EFT	Corebridge / AIG / VALIC	12,051.47	
Liability Check	02/12/2026	EFT	CALPERS	2,007.89	
Liability Check	02/26/2026	EFT	AFLAC	1,539.20	
Liability Check	02/26/2026	EFT	Corebridge / AIG / VALIC	13,346.36	
Liability Check	02/26/2026	EFT	CA Choice	52,286.92	
Liability Check	02/26/2026	EFT	CALPERS	2,529.96	
Liability Check	02/12/2026	E-pay	Internal Revenue Service	36,260.63	
Liability Check	02/12/2026	E-pay	EDD State of California	7,637.39	
Liability Check	02/26/2026	E-pay	EDD State of California	3,182.81	
Liability Check	02/26/2026	E-pay	Internal Revenue Service	35,494.07	
Liability Check	02/26/2026	E-pay	EDD State of California	7,381.51	
Paycheck	02/12/2026	26097	Employee Payroll	852.85	
Liability Check	02/12/2026	26098	Stanislaus County Sheriff - Garn 37	100.00	
Liability Check	02/12/2026	26099	United Steelworkers	521.10	
Paycheck	02/26/2026	26100	Employee Payroll	283.06	
Liability Check	02/26/2026	26101	United Steelworkers	502.59	

Del Puerto Health Care District
Warrants by Bank Account
February 2026

Type	Date	Num	Name	Credit	Credit
Liability Check	02/26/2026	26102	Stanislaus County Sheriff - Garn 37	100.00	
Liability Check	02/26/2026	26103	LegalShield	476.70	
Total 101.012 · TCB-Payroll Account 2999				<u>384,832.53</u>	
Total 101.010 · Tri Counties Bank				<u>1,335,419.91</u>	
Total 101.000 · Cash and cash equivalents				<u>1,335,419.91</u>	
103.000 · Restricted Funds					
103.100 · TCB-USDA Debt Reserve 7237					
Check	02/15/2026	EFT	USDA Rural Development Loan-EFT	10,060.00	
Total 103.100 · TCB-USDA Debt Reserve 7237				<u>10,060.00</u>	
Total 103.000 · Restricted Funds				<u>10,060.00</u>	
TOTAL				<u><u>1,345,479.91</u></u>	
Less; Irregular Items					
				CIP-Healthcare Campus	752,521.34
				Other Irregular Items	8,266.25
				<u>760,787.59</u>	
NET WARRANTS ISSUED - FEBRUARY 2026				<u><u>584,692.32</u></u>	

Del Puerto Health Care District
CEO Monthly Report
Reporting Period: March 1, 2026 – April 17, 2026

Financial Position Summary – February 28, 2026

As of February 28, 2026, the District reported total assets of \$26.47 million and total equity of \$14.05 million, with year-to-date net income of \$989,071, compared with \$365,858 at the same time last year. Total liabilities were \$12.42 million, including \$1.13 million in current liabilities and \$11.29 million in long-term liabilities.

The District held \$7.32 million in cash and savings at month end, down from \$8.05 million in January, largely reflecting February cash activity. After accounting for restricted and assigned amounts, accounts payable and payroll liabilities, and other committed balances, unencumbered cash totaled \$2.52 million. This equaled approximately 128% of the District's 90-day operating reserve target and provided about 114.9 days cash available for operations, which remains above the Board's 90-day reserve benchmark of \$1.98 million.

From an operating standpoint, District-wide performance remains mixed by service line but favorable overall on a consolidated basis. Through the first eight months of FY 2025–26, total operating income was \$5.18 million, or 55.1% of annual budget, while total operating expense was \$6.10 million, or 65.2% of budget, producing an operating loss of \$926,815 before non-operating revenues. However, strong non-operating support, including \$1.24 million in district tax revenues, \$387,642 in impact mitigation fees, and other non-operating activity, brought total year-to-date net income to \$989,071, which is 46.4% of the annual budgeted net income.

By program, Patterson District Ambulance reported a year-to-date net loss of \$642,764, reflecting continued pressure on reimbursement and operating costs, while the Del Puerto Health Center reported a year-to-date net loss of \$76,253. Administration reported a year-to-date net loss of \$151,853. At the same time, district-wide salary and wage expense totaled \$2.97 million, and employee benefits totaled \$704,652, showing that labor remains the District's single largest cost driver.

The balance sheet also reflects the District's continued investment in long-term capital planning. Capital assets totaled \$17.67 million, up 229% over February 2025, reflecting substantial ongoing investment in facilities, land, and other capitalized project costs. In February alone, the District issued \$1.35 million in warrants, of which \$760,787.59 was identified as irregular items, including \$752,521.34 for healthcare campus CIP, resulting in net February warrants of \$584,692.32 after excluding those irregular items.

Overall, the District's financial position at February 28 remains stable, with adequate liquidity, reserve coverage above policy level, and positive year-to-date consolidated results. The primary financial challenges continue to be operating losses in core service lines, especially ambulance operations, and the need to carefully balance ongoing operating demands with significant strategic capital investment in the future healthcare campus. Overall, the District's financial position at February 28 remains stable, with adequate liquidity, reserve coverage above policy level, and positive year-to-date consolidated results. The primary financial challenges continue to be operating losses in core service lines, especially ambulance operations, and the need to carefully balance ongoing operating demands with significant strategic capital investment in the future healthcare campus.

Executive Activity Summary

From March 1 through April 17, the District made meaningful progress in moving Phase 1 of the healthcare campus toward procurement, maintaining compliance momentum for the BHCIP-funded project, supporting governance continuity through public vacancy communications, advancing workforce planning, and continuing visible community partnership work related to behavioral health awareness. Key accomplishments included advancing community planning tasks for NAMI Walk Stanislaus 2026.

Del Puerto Health Care District
CEO Monthly Report
Reporting Period: March 1, 2026 – April 17, 2026

1. Capital Program Execution: Phase 1 Campus and Procurement Readiness

A major area of focus during this reporting period was continued advancement of **Phase 1 of the Healthcare and Mixed-Use Campus**, including procurement readiness and schedule discipline. An updated **Phase 1 Timeline** was published and briefed, providing clearer alignment between implementation milestones and master plan assumptions. The District updated the **RFQ Release target to May 31, 2026**, and that timeline was also communicated externally in a manner that preserved procurement integrity. In addition, a formal **RFQ Working Session** was conducted with legal and finance partners as part of procurement development. On April 15, 2026 the district submitted the Master Plan to the City of Patterson for review.

The updated schedule identified the following key milestones for Phase 1 implementation: **Master Plan Submission – April 15, 2026; RFQ Release – May 31, 2026; RFQ Award – August 13, 2026; Construction Start – February 2027; Substantial Completion – June 2028**. This gives the Board a clearer line of sight into project sequencing and reinforces that the District is transitioning from planning into procurement and execution readiness.

Measurable accomplishments in this area:

- **1 updated Phase 1 timeline issued and briefed.**
- **RFQ release date confirmed for April 30, 2026.**
- **1 formal procurement working session completed.**
- **5 major project milestones established** through substantial completion.

2. Grant Compliance and Funding Readiness: BHCIP

The District also continued active work to support **BHCIP grant compliance and readiness**. During this period, staff advanced work related to the **Program Funding Agreement**, including distribution of the agreement and communication of its certification expectations. This helped keep the project moving through internal review and ensured that grant requirements remained visible to the staff responsible for implementation.

In addition, the District maintained recurring **BHCIP Internal Check-ins**, providing regular operational cadence for coordination, status review, and follow-up. Internal email workflows also continued around movement of the Program Funding Agreement draft. Together, these activities show that BHCIP administration remains an active management function rather than a passive compliance item.

Measurable accomplishments in this area:

- **Program Funding Agreement advanced** through internal distribution and review.
- **Recurring BHCIP internal check-ins maintained.**
- **Internal workflow on funding agreement draft continued** during the reporting period.

3. Governance, Public Transparency, and Board Continuity

The District supported governance continuity and public transparency through management of the **Zone 1 Board seat vacancy process**. Public communications were executed, including ad placement and website updates, and staff requested broader distribution of the vacancy announcement to Zone 1 residents. In addition, public notice adjustments were managed when the vacancy deadline changed.

These activities helped ensure that the Board vacancy process remained visible, documented, and accessible to the public. Board agenda and meeting materials during this period also reflect continued attention to governance structure and orderly public process.

Measurable accomplishments in this area:

Del Puerto Health Care District
CEO Monthly Report
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- **Vacancy ads placed and website updated** for the Zone 1 Board seat.
- **Public notice revisions managed** for the vacancy deadline.
- **Governance support maintained** through Board agenda and public meeting processes.

4. Workforce Systems and Operational Enablement

The District continued work on internal organizational capacity during this period. Board materials reflected consideration of **Policy 3110, Employee Appreciation and Recognition Program**, including discussion of estimated fiscal impacts and intended morale and retention benefits. At the same time, HR workflow progressed on updated job descriptions for operational roles, including the **Assistant Health Center Manager** position and redesign of the **Biller** role.

This work is important because it supports staff retention, role clarity, and operational stability at the same time the District is managing major external initiatives. It also shows continued attention to the internal systems needed to sustain growth and improve service delivery.

Measurable accomplishments in this area:

- **Policy 3110 advanced for Board consideration.**
- **At least 2 operational job descriptions updated or under redesign.**

5. Community Leadership and Partnership Development

The District also continued visible community leadership through planning for **NAMI Walk Stanislaus 2026**. Meeting records from this period show coordinated planning around outreach, signage, sponsor coordination, procurement of “You Are Not Alone” themed swag items, and civic engagement steps to place the event on City Council and County Supervisor agendas.

This work reflects the District’s broader role as a community convener, particularly in behavioral health awareness and public partnership building. It also demonstrates that community engagement during this period involved specific assigned tasks and practical implementation steps.

Measurable accomplishments in this area:

- **NAMI Walk planning tasks actively coordinated** during the reporting period.
- **CEO-assigned outreach and event planning tasks identified and advanced.**
- **Civic engagement steps established** for local public-agenda visibility.

6. Clinic Relocation Readiness and Healthcare Provider Shortage Area Restoration

During this reporting period, I participated in an **HCAI seminar focused on restoring the area’s Healthcare Provider Shortage Area status** as part of the District’s longer-term strategy to facilitate relocation of the clinic to the healthcare campus. This was an important step in clarifying the pathway for aligning the District’s clinic relocation goals with workforce and access-related designation requirements.

The seminar provided operational insight into the process, requirements, and documentation needed to pursue restoration of shortage-area status. This work is directly relevant to the District’s campus strategy because restoration of that designation may help support future clinic eligibility, access planning, provider recruitment, and the regulatory pathway associated with relocating services to the new campus.

This effort reflects continued executive attention to removing barriers that could affect timely development of the District’s long-term care model. In addition to advancing the physical planning of the campus, the District is also working on the underlying designation and access conditions necessary to support successful relocation and long-term service expansion.

Del Puerto Health Care District
CEO Monthly Report
Reporting Period: March 1, 2026 – April 17, 2026

Measurable accomplishments in this area:

- **Participated in 1 HCAI seminar** focused on shortage-area restoration.
- **Advanced District understanding of the requirements and process** for restoring Healthcare Provider Shortage Area status.
- **Linked clinic relocation planning with workforce and access designation strategy** needed to support the move to the campus.

Closing

This reporting period reflects steady progress on the District's operational and strategic priorities. The organization continued to move Phase 1 of the healthcare campus toward procurement, maintained grant compliance activity for the BHCIP-funded project, supported Board continuity through public vacancy communications, advanced workforce systems, and strengthened community partnership activity. These efforts demonstrate continued progress in both organizational readiness and project implementation.

Board Legislative Update

LegiScan Monitor Report

April 17, 2026

State	Bill #	Summary	Pending	Sponsors	Status
CA	AB1883	Workplace surveillance tools.	In Assembly Privacy and Consumer Protection Committee	Bryan, I.	2026-04-14 / Introduced Re-referred to Com. on P. & C.P.
CA	AB2036	Medi-Cal: federally qualified health centers and rural health clinics.	In Assembly Health Committee	Patel, D.	2026-04-13 / Introduced In committee: Set, first hearing. Hearing canceled at the request of author. <i>[Hearing: Apr 23 in State Capitol, Room 127]</i>
CA	AB2041	Emergency medical services.	In Assembly Emergency Management Committee	Carrillo, J.	2026-04-16 / Introduced From committee chair, with author's amendments: Amend, and re-refer to Com. on E.M. Read second time and amended. <i>[Hearing: Apr 22 @ 9:30 am in State Capitol, Room 127]</i>
CA	AB2110	Local financing: workforce housing: tax increment financing district.	In Assembly Housing and Community Development Committee	Johnson, N.	2026-04-16 / Introduced From committee chair, with author's amendments: Amend, and re-refer to Com. on H. & C.D. Read second time and amended. <i>[Hearing: Apr 22 @ 9:30 am in State Capitol, Room 127]</i>
CA	AB2208	Medi-Cal: cost sharing, retroactivity, and accessibility.	In Assembly Appropriations Committee	Stefani, C. ; Aguiar-Curry, C. ; Boerner Horvath, T. ; Bonta, M. ; Caloza, J. ; Sharp-Collins, L.	2026-04-08 / Introduced From committee: Do pass and re-refer to Com. on APPR. (Ayes 12. Noes 3.) (April 7). Re-referred to Com. on APPR. <i>[Hearing: Apr 21 @ 1:30 pm in 1021 O Street, Room 1100]</i>
CA	AB2282	Health facilities: emergency medical services.	In Assembly Health Committee	Alanis, J.	2026-04-14 / Introduced Re-referred to Com. on HEALTH. <i>[Hearing: Apr 21 @ 9:00 am in 1021 O Street, Room 1100]</i>
CA	AB2311	Health care districts: employment.	In Assembly Business and Professions Committee	Schiavo, P. ; Becker, J. ; Ortega, L. ; Pellerin, G.	2026-03-25 / Introduced From committee: Do pass and re-refer to Com. on B. & P. (Ayes 14. Noes 0.) (March 24). Re-referred to Com. on B. & P.
CA	ACR161	Special Districts Week.	N/A	Addis, D. ; Aguiar-Curry, C. ; Ahrens, P. ; Alanis, J. ; Alvarez, D. ; Arambula, J. ; Bains, J. ; Berman, M. ; Rubio, B. ; Boerner Horvath, T. ; Bonta, M. ; Bryan, I. ; Calderon, L. ; Carrillo, J. ; Castillo, L. ; Connolly, D. ; Davies, L. ; Dixon, D. ; Elhawary, S. ; Ellis, S. ; Flora, H. ; Fong, M. ; Garcia, R. ; Gipson, M. ; Hadwick, H. ; Haney, M. ; Hart, G. ; Hoover, J. ; Irwin, J. ; Jackson, C. ; Gonzalez, J. ;	2026-04-15 / Engrossed From committee: Ordered to third reading.

				Johnson, N. ; Kalra, A. ; Krell, M. ; Lowenthal, J. ; Macedo, A. ; Gonzalez, M. ; McKinnor, T. ; Rodriguez, M. ; Nguyen, S. ; Ortega, L. ; Pacheco, B. ; Papan, D. ; Patel, D. ; Patterson, J. ; Pellerin, G. ; Petrie-Norris, C. ; Ramos, J. ; Ransom, R. ; Rivas, R. ; Rogers, C. ; Sanchez, K. ; Schiavo, P. ; Sharp-Collins, L. ; Solache, J. ; Soria, E. ; Stefani, C. ; Ta, T. ; Tangipa, D. ; Valencia, A. ; Wallis, G. ; Ward, C. ; Wicks, B. ; Wilson, L. ; Zbur, R.	
CA	SB994	Local government: nondisclosure agreements.	In Senate Local Government Committee	Cabaldon, C.	<p>[Hearing: Apr 22 @ 9:00 am in State Capitol, Room 113]</p> <p>2026-04-09 / Introduced Set for hearing April 22.</p>
CA	SB1036	Mitigation Fee Act.	N/A	Grayson, T.	<p>2026-04-16 / Introduced Read second time and amended. Ordered to third reading.</p>
CA	SB1126	School districts, county offices of education, and local agencies: financial postings.	In Senate Education Committee	Choi, S. ; Alvarado-Gil, M. ; Strickland, T.	<p>[Hearing: Apr 22 @ 9:00 am in 1021 O Street, Room 2100]</p> <p>2026-04-16 / Introduced Set for hearing April 22.</p>
CA	SB1164	Elections.	In Senate Elections and Constitutional Amendments Committee	Cervantes, S.	<p>[Hearing: Apr 21 @ 9:30 am in 1021 O Street, Room 2100]</p> <p>2026-04-14 / Introduced From committee with author's amendments. Read second time and amended. Re-referred to Com. on E. & C.A.</p>
CA	SB1171	State funds: grant programs: loan programs: eligibility.	In Senate Local Government Committee	Caballero, A.	<p>[Hearing: Apr 22 @ 9:00 am in State Capitol, Room 113]</p> <p>2026-04-15 / Introduced Read second time and amended. Re-referred to Com. on L. GOV.</p>
CA	SB1205	Public contracts: retention: architecture or engineering services.	In Senate Local Government Committee	Valladares, S.	<p>[Hearing: Apr 22 @ 9:00 am in State Capitol, Room 113]</p> <p>2026-04-14 / Introduced From committee: Do pass and re-refer to Com. on L. GOV. with recommendation: To consent calendar. (Ayes 15. Noes 0.) (April 14). Re-referred to Com. on L. GOV.</p>
CA	SB1244	Public Agency Benefits Intermediary Compensation Disclosure Act.	In Senate Judiciary Committee	Allen, B.	<p>[Hearing: Apr 21 @ 9:30 am in 1021 O Street, Room 2100]</p> <p>2026-04-09 / Introduced Set for hearing April 21.</p>
CA	SB1427	Public safety omnibus.	In Senate Public Safety Committee	Public Safety	<p>[Hearing: Apr 21 @ 8:30 am in 1021 O Street, Room 2200]</p>

					2026-04-15 / Introduced
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From committee with author's amendments. Read second time and amended. Re-referred to Com. on PUB. S.

Del Puerto Health Care District

Verification of Changes to Direct Deposit and ACH Payment Information

Page 1 of 5

Standard Operating Procedure

Effective Date: January 1, 2026

Department: Finance / Accounts Payable / Payroll

Approved By: Karin Freese, CEO

Review Date: 2029

Policy Owner: Finance Department

Applies To: All employees and authorized staff involved in payroll, accounts payable, vendor management, and accounting system administration

1. Purpose

The purpose of this Standard Operating Procedure is to establish a secure, consistent process for verifying and processing any request to change direct deposit (DD) or ACH payment information. This procedure is intended to reduce the risk of fraud, unauthorized account changes, misdirected payments, and financial loss.

2. Scope

This procedure applies to:

- Employee direct deposit changes
- Vendor ACH payment changes
- Any other request to modify banking or deposit account information used for outgoing payments

3. Policy Statement

All requests to create, change, or update direct deposit or ACH payment information must be treated as high-risk financial transactions and verified in accordance with this procedure before any change is entered into the accounting system. No exceptions shall be made based solely on email, familiarity with the requester, urgency, title, or prior payment history.

4. Authorized Personnel

Only the following individuals are authorized to enter changes to deposit account information in QuickBooks:

- Finance Manager
- Chief Executive Officer (CEO)

No other employee may enter, edit, or activate DD or ACH payment account changes in the accounting software.

5. Required Controls

The following controls are mandatory:

1. Written Request with Handwritten Signature

All changes to payment accounts must be submitted in writing on the organization's approved request form and must include a handwritten signature from the account holder or authorized payee representative.

2. Verbal Verification by a Second Person

All requests to change DD or ACH information must be verified verbally with the account holder by a second person. The person conducting the verbal verification must not be the same person who received the request or entered the change in QuickBooks.

3. Restricted System Access

Only the Finance Manager or CEO may enter changes to deposit account information in QuickBooks.

6. Definitions

Account Holder: The employee, vendor, or authorized representative whose bank account information is being added or changed.

Second Person Verification: A verbal confirmation conducted by an authorized staff member other than the person who received the request or the person entering the information.

Handwritten Signature: A handwritten signature on a paper form. Typed names or emailed approvals alone do not satisfy this requirement unless separately authorized by formal policy revision.

7. Procedure

Step 1: Receipt of Request

1. The requester must complete the approved DD/ACH Change Request Form.
2. The form must be submitted with:
 - Handwritten signature of the account holder or authorized representative
 - Supporting documentation as applicable, such as a voided check, bank letter, or direct deposit form
3. Requests received only by email, text message, or verbal instruction shall not be processed unless followed by the required written form with handwritten signature.

Step 2: Initial Review

1. The receiving staff member shall date-stamp the request upon receipt.
2. The receiving staff member shall review the form for completeness, including:
 - Full name of payee/account holder
 - Contact information
 - Financial institution name
 - Routing number
 - Account number
 - Type of account
 - Handwritten signature
 - Supporting documentation, if required
3. Incomplete requests shall be returned and not processed.

Step 3: Independent Verbal Verification

1. A second person must verbally verify the request directly with the account holder before any change is entered.
2. The verbal verification must be made using a trusted phone number already on file or obtained from an independent, reliable source.
The phone number provided only on the change request must not be relied upon by itself for verification.
3. During the verbal verification, the second person shall confirm:
 - The identity of the account holder or authorized representative
 - That the request is legitimate

- The specific bank account change being requested
4. The second person shall document:
 - Date and time of call
 - Name of person spoken to
 - Phone number used
 - Summary of confirmation
 - Name and signature/initials of verifier
 5. If the account holder cannot be reached, the request shall remain pending and no change shall be entered.

Step 4: Fraud Red Flag Review

Before processing the request, staff shall assess for warning signs, including but not limited to:

- Request marked “urgent” or pressuring immediate action
- Change submitted shortly before payroll or payment run
- Email-only request
- Change accompanied by unusual tone, grammar, or sender address
- Request to bypass standard procedure
- Change involving a new bank unrelated to prior activity
- Inconsistency between submitted documents and known records

Any suspected fraud or irregularity shall be escalated immediately to the Finance Manager and CEO. No change shall be processed until concerns are resolved.

Step 5: Entry into QuickBooks

1. Only the Finance Manager or CEO may enter the approved change into QuickBooks.
2. The person entering the change shall confirm that:
 - The signed request form is complete
 - Verbal verification was completed and documented
 - Any required supporting documentation is attached
3. The entry shall be completed as close as practical to the effective date, but not without full verification.

Step 6: Post-Entry Review

1. After the change is entered, a second review shall be completed by the other authorized individual when feasible.
2. The reviewer shall confirm that the information entered in QuickBooks matches the approved documentation.
3. Evidence of review shall be documented by initials and date on the request packet or control log.

Step 7: Confirmation Notice

1. After the change is processed, a confirmation notice should be provided to the account holder using contact information already on file.
2. The confirmation should state that the banking information on file has been changed and provide a contact person immediately if the change was not authorized.
3. Sensitive bank details should not be fully displayed in the confirmation.

8. Timing Controls / Cutoff

1. Banking changes should not be processed on the same day they are received unless all verification steps are completed and urgency is justified.

2. Whenever possible, account changes should be subject to a reasonable cutoff before the next payroll or payment run.
3. Changes received after cutoff shall be applied to the following payment cycle unless specifically approved by the Finance Manager or CEO.

9. Documentation and Record Retention

The following records must be retained in accordance with the organization's record retention policy:

- Signed DD/ACH Change Request Form
- Supporting bank documentation
- Verbal verification record
- Date of QuickBooks entry
- Name of person entering the change
- Evidence of secondary review, if completed
- Any related correspondence

All records shall be stored securely with restricted access because they contain sensitive financial information.

10. Segregation of Duties

To the greatest extent practicable:

- The person receiving the request should not be the same person conducting verbal verification.
- The person conducting verbal verification should not be the same person entering the information in QuickBooks.
- The person entering the information should not be the only person reviewing the final change.

Where staffing limitations make full segregation impossible, compensating review by the CEO or Finance Manager shall be documented.

11. Prohibited Practices

The following are prohibited:

- Processing a change based solely on email
- Accepting verbal-only change requests
- Using callback numbers provided only in a suspicious email or request
- Skipping second-person verbal verification
- Sharing QuickBooks login credentials
- Allowing unauthorized staff to enter bank account changes
- Making exceptions due to urgency without documented approval and full verification

12. Exceptions

Any exception to this procedure must be approved in writing by both the Finance Manager and CEO, with the reason for the exception documented. Exceptions should be rare and shall never waive the requirement for identity verification.

13. Responsibilities

Requesting Party: Must submit a complete written request with handwritten signature and required supporting documentation.

Receiving Staff: Must review submissions for completeness and route them for verification.

Second Verifier: Must verbally confirm the request with the account holder and document the verification.

Finance Manager / CEO: Are the only individuals authorized to enter banking changes into QuickBooks and are responsible for ensuring compliance with this SOP.

14. Best Practices Incorporated into This SOP

In addition to the required items above, this SOP incorporates the following best practices:

- Use of a standard change request form
- Callback verification using trusted contact information already on file
- Documentation of every step in the verification process
- Restricted system access for bank changes
- Review for fraud indicators before entry
- Post-change confirmation notice
- Segregation of duties wherever possible
- Secure retention of banking change records
- No reliance on urgency or email alone as proof of legitimacy

15. Non-Compliance

Failure to follow this procedure may result in disciplinary action, revocation of access, retraining, or other corrective action as appropriate. Any violation or suspected violation must be reported immediately to the CEO.



Ambulance Report March 2026

Patterson had 277 responses in March resulting in 205 transports. PDA had 247 responses in our response area, and 18 mutual aid responses. PDA responded to the Westside District 15 times which resulted in 12 transports. PDA had 14 responses in AMR response area with 12 transports. Call volume definitely increased in March, with 80 more responses and 60 more transports. There was one mutual aid response into Alameda County.

The 247 total responses in the Patterson District Ambulance response area resulted in 181 transports. PDA units responded to 247 of 265 (93.21%) EMS calls in our district and transported 181 of 193 (93.78%) of all patients transported from our district. AMR responded into our district 6 times resulting in 5 transports. Westside had 12 responses in our response area resulting in 7 transports.

I attended Chief Frye's swearing in ceremony as the new Fire Chief for the West Stanislaus County Fire District on March 9, 2026.

On Monday, March 2, 2026, PDA crews participated in the Read Across America event at the plaza circle.

On March 13, 2026, I participated in a career day event at Las Palmas Elementary School.

On March 13, 2026 there was an incident where students at Apricot Valley Elementary School were exposed to an unknown chemical, later determined to be a herbicide weed killer. Jim and I were both available and responded to this incident and had key roles in managing the event and patient evaluation with transportation to an emergency room when requested by parents.

Later in the month, Jim and I were able to get a same day invite from the school district to attend an incident debrief of the Apricot Valley incident being coordinated by Patterson Fire.

Board Report February – March 2026

Overview

During the months of February and March 2026, our organization continued to focus on expanding patient services, strengthening community partnerships, enhancing staffing, and improving quality outcomes aligned with health plan initiatives.

Community Outreach & Partnerships

We partnered with La Familia Mental Health to host their Mobile Mental Health Van on-site four (4) times in February and six (6) times in March. This collaboration increased access to behavioral health services for our patient population and supported early intervention efforts.

In addition, Jessica Herrera, LCSW, has taken the lead in organizing a health center team to participate in the upcoming NAMI Walk in April, further demonstrating our commitment to mental health awareness and community engagement. She is also scheduled to provide another bilingual mental health awareness presentation with the Patterson Garden Club, continuing our outreach to underserved and Spanish-speaking communities.

Staffing & Workforce Development

We welcomed two new Patient Services Representatives, Daisy Flores and Rachel Carrillo, who will support front office operations and patient access.

We also had the opportunity to host a Medical Assistant student, Michelle, and Nurse Practitioner student Daniela Toste, contributing to workforce development and clinical training.

Additionally, we scheduled our quarterly CPR training to ensure all staff remain current with certification requirements and maintain readiness in emergency response.

Provider Enrollment & Credentialing

In February, we initiated the Medi-Cal credentialing process for Dr. Padam. This step supports the expansion of our provider network and enhances access to care for our Medi-Cal patient population, especially our pediatrics.

Quality Improvement & Health Plan Collaboration

Leadership attended monthly meetings with Health Net and Health Plan of San Joaquin (HPSJ) to review and target HEDIS quality measures. These efforts are focused on improving preventive care, chronic disease management, and overall patient outcomes.

In March, we participated in a focused meeting with Health Plan of San Joaquin to address strategies for supporting patients in maintaining their Medi-Cal coverage. Emphasis was placed on improving follow-up processes for application renewals and reducing coverage gaps that impact continuity of care.

Conclusion

Overall, February and March were productive months marked by strengthened community

partnerships, staff growth, ongoing quality improvement efforts, and proactive planning for upcoming initiatives. These efforts continue to align with our mission to provide accessible, high-quality, and patient-centered care.

We look forward to building on this progress in the coming months.

Health Center Report February 2026/ Suzie Benitez

Encounter February 2026		
<i>Primary Care Vacation/Sick/CME time off</i>		
Provider	Encounters	
Rodriguez	400	
Barragan	388	
Mercado	446	
Primary Total	1,234	
<i>Mental Health Encounters</i>		
Herrera	81	
HC Total Encounters	1,315 17 % less from February 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
February 2026	5:00pm-8:00pm	96
<ul style="list-style-type: none"> • 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 02/06th, 02/13th, 02/18th, 02/25th. • Started Dr. Padam's Credentialing with Medi-Cal. 		

Health Center Report March 2026/ Suzie Benitez

Encounter March 2026		
<i>Primary Care Vacation/Sick/CME time off</i>		
Provider	Encounters	
Rodriguez	470	
Barragan	352	
Mercado	496	
Primary Total	1,318	
<i>Mental Health Encounters</i>		
Herrera	70	
HC Total Encounters	1,388	17 % less from March 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
February 2026	5:00pm-8:00pm	96
March 2026	5:00pm-8:00pm	168
<ul style="list-style-type: none"> • 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 03/2nd, 3/6th, 3/11th, 3/13th, 3/18th, 3/25th. 		

Human Resources Status Report April 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 make steady progress on the credentialing of Dr. Jully Padam. During this time, she has been building strong working relationships with staff, and overall integration into the team is progressing well.

While we had initially decided to delay recruiting a mid-level provider until we could better assess Dr. Padam's impact on patient volume, an unexpected opportunity allowed us to revisit that decision. A Physician Assistant who had previously been referred to us reconnected with Human Resources, and following further consideration, we extended an offer. Ms. Carina Gonzalez joined the team on April 6 and is currently working alongside Dr. Rodriguez while her credentialing is in process.

The Health Center is pleased to report that we are currently operating at 92% staffing capacity and anticipate reaching full staffing in the near future. In addition, we will be hosting two interns from Patterson High School who are interested in pursuing careers in the medical field. These students are participating through a program focused on career readiness and post-graduation pathways.

We have also continued to support the Ambulance Division by assisting with recruitment and onboarding efforts, helping them maintain adequate staffing levels. The team has done an excellent job integrating new hires and is currently mentoring several paramedic interns from the county. We are proud to be among the few organizations in Stanislaus County that provide mentorship opportunities to support the development of new first responders.

Additionally, Human Resources remains actively engaged in reviewing, updating, and implementing policies to ensure staff are well-informed and aligned with established procedures. The inaugural Leadership Development Program concluded this month, with nine Health Center staff successfully completing the program. Participants have expressed strong enthusiasm for applying what they have learned and advancing in their professional development.

Del Puerto Health Care District

Project Update Memo Healthcare Campus Phase 1: Schedule and Financial Update

To: Board of Directors

From: Chief Executive Officer

Date: April 24, 2026

Re: Status Update on Procurement Schedule and Financial Challenges for Phase 1

Schedule Update

The District continues to advance Phase 1 of the Healthcare Campus, focused on the Del Puerto Ambulance and Administration Center (DPAC) and the Combined Clinic. These two facilities remain the first priority buildings in the campus phasing strategy and continue to align with the District's broader public communications that identify groundbreaking in 2026 and operational readiness in 2028 for the initial phase.

The project is now moving from master planning and bridging documentation into procurement planning. The next major activities are: completion of the procurement package, implementation of the Progressive Design-Build selection process, identification of firms, RFQ review, and team selection, along with continued work on entitlements, approvals, and high-level cash flow forecasting.

This means the next several months are critical. The District is shifting from conceptual planning into the contractor procurement stage, where schedule discipline will be essential to maintain momentum while ensuring the project remains aligned with available funding and approval milestones.

Financial Impact

The most significant update is the increase in projected project cost. The updated Cumming estimate reflects a more complete and realistic picture of the cost to deliver Phase 1 and the overall campus. The estimate assumes healthcare buildings will be delivered through Progressive Design-Build, includes prevailing wage, includes parcel-specific sitework for both DPAC and the Combined Clinic, and applies 35 percent soft costs.

Under the current estimate, the total estimated costs for the two Phase 1 facilities and their directly associated sitework are approximately:

- DPAC: \$21.6 million
- Sitework around DPAC: \$7.6 million
- Combined Clinic: \$41.8 million - \$24.3 million grant funds = \$17.5 million
- Sitework around Combined Clinic: \$7.0 million

Together, these Phase 1 components total approximately **\$53.8 million net of grant proceeds**.

This increase is not simply the result of a more refined estimate. Inflation, construction market volatility, and broader world events have all contributed to rising project costs during the time the District has worked through the required and often time-consuming planning, entitlement, funding, and approval processes. These are factors largely outside of the District's control. As a result, the cost escalation should be understood in the context of external economic pressures and the realities of delivering a complex public project through required regulatory and funding processes, not as a result of District mismanagement. At the same time, the newer estimate also includes more complete assumptions than

Del Puerto Health Care District

earlier planning-level analyses, including greenfield site development, building-specific sitework, delivery method assumptions, and soft costs that were not fully reflected in the earliest campus budgeting work. The District now has a much clearer understanding of the true capital needs of Phase 1 and the campus as a whole.

Risks

The primary risk to the project at this stage is the tension between schedule advancement and financing readiness.

If the District advances procurement too quickly without a fully aligned funding strategy, there is risk of re-scoping, delays, or inefficiencies during design and preconstruction. If the District moves too slowly, the project remains exposed to additional construction escalation and compressed delivery timelines.

There is also an important compliance risk related to behavioral health funding. The Bond BHCIP program requires all program funds to be obligated and expended by **June 30, 2030**, and failure to satisfy performance milestones can constitute a breach of the funding agreement.

Accordingly, the District must continue to move with urgency, but with careful attention to scope control, financial planning, and milestone management.

Recommended Next Steps

Staff recommends the following actions over the next 6 to 12 months:

1. Finalize the procurement schedule for the Progressive Design-Build process for DPAC and the Combined Clinic.
2. Continue aligning procurement timing with funding availability and Board-approved capital planning assumptions.
3. Refine the high-level cash flow forecast for Phase 1 to support financing and sequencing decisions.
4. Provide the Board with a clear sources-and-uses discussion tied to the updated project estimates.
5. Continue entitlement, approval, and coordination work so that procurement, permitting, and financing remain synchronized.
6. Communicate clearly that the increase in costs reflects a more complete project estimate, not a change in the District's strategic direction.
7. Staff will also present the Board with a recommended phasing sequence for DPAC and the Combined Clinic, informed by financing availability and grant compliance timelines.

Conclusion

Phase 1 of the Healthcare Campus is continuing to move forward, but the District is now operating with a more realistic understanding of the true cost of delivery. The immediate challenge is to keep procurement and approvals moving while ensuring the project remains financially achievable. DPAC and the Combined Clinic remain the correct first-phase priorities, but successful implementation will require close coordination between schedule, scope, and capital planning. Staff is also evaluating phasing options to ensure that available financing, grant obligations, and District commitments remain aligned as the project advances.

DEL PUERTO HEALTH CARE DISTRICT

Board of Directors Meeting – April 27, 2026

Annual CEO Developmental Review and Performance Evaluation

Page 1 of 1

Department: Chief Executive Office
Consent Calendar: No

CEO Concurrence: Yes
4/5 Vote Required: No

SUBJECT:	Annual CEO Developmental Review and Performance Evaluation
STAFF REPORT:	<p>Policy 3017 establishes the District's annual process and timeline for the CEO Developmental Review and Performance Evaluation. The policy provides for evaluation preparation activities beginning in May, including employee and direct report feedback, appointment of an Ad Hoc CEO Review Committee at the June Board meeting, submission of the CEO self-evaluation and annual report by July 15, distribution of evaluation materials by Human Resources, completion of board evaluation surveys by August 10, formal review in Closed Session at the August Board meeting, and final wrap-up actions in September.</p> <p>The purpose of this agenda item is for the Board to review the draft CEO Compensation Policy 3417. This review supports orderly discussion of the policy, promotes transparency regarding the CEO compensation, and allows the Board to confirm their alignment with the policy and its components.</p>
	STRATEGIC ALIGNMENT: Governance Excellence; Board Policy Compliance; Executive Leadership Accountability
FISCAL IMPACT:	None directly associated with review of the annual calendar. Any compensation or contract actions related to the CEO evaluation process would be presented separately in accordance with Policy 3017.
STAFFING IMPACT:	Administrative support from Human Resources and District General Counsel.
CONTACT PERSON:	Robert Trefault
ATTACHMENT(S):	Policy #3017 Policy #3417

RECOMMENDED ACTION:	None – Information Only
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ANNUAL CEO DEVELOPMENTAL REVIEW AND PERFORMANCE EVALUATION	EFFECTIVE DATE
	MAY 18, 2020
REVIEWED:	UPDATED: 4/29/2024

Purpose: To establish the criteria and process by which the annual performance evaluation of the Chief Executive Officer (CEO) shall be conducted and considered by the Board of Directors

Policy: It is the policy of the DPHCD Board of Directors to conduct an annual performance evaluation of the CEO. Maintaining confidentiality during the annual performance evaluation process is crucial for the CEO, the Board of Directors, and the District.

Performance Criteria for CEO Evaluation

1. Leadership Quality and Effectiveness:
 - Assessment of leadership performance in Board and strategic responsibilities, administration, personnel management, financial oversight, asset management, community engagement, and public relations within Del Puerto Health Care District.
2. Achievement of Annual Goals:
 - Evaluation of the CEO's success in meeting annual goals and objectives set by the Board of Directors and the CEO.
3. Progress Toward Strategic Plan:
 - Review of the District's advancement toward fulfilling its strategic plan under the guidance of the CEO.
4. Employee Management:
 - Assessment of the CEO's effectiveness in managing, recruiting, and retaining District employees and volunteers.
5. Communication and Collaboration with the Board:
 - Review the CEO's effort to foster effective communication, collaboration, transparency, and alignment while leveraging the board's advisory role to drive accountability and achieve the agency's mission and goals.
6. Relationships with Government Agencies:
 - Assessment of the quality and effectiveness of the CEO's relationships with other government agencies pertinent to Del Puerto Health Care District's operations.

Procedure:

Evaluation Preparation – May through August

1. May
 - The HR Manager facilitates an annual confidential survey of the District's employees to provide feedback to the management staff and board.
2. June
 - The HR Manager will facilitate an annual, confidential survey of the CEO's direct reports, provide feedback to the CEO, and supplement the Board's evaluation.
 - The results will be presented to the CEO as soon as they are compiled.
3. June Board Meeting

ANNUAL CEO DEVELOPMENTAL REVIEW AND PERFORMANCE EVALUATION	EFFECTIVE DATE
	MAY 18, 2020
REVIEWED:	UPDATED: 4/29/2024

- The board President will appoint themselves and one additional board member to oversee the CEO evaluation process.
 - These members will form the "Ad Hoc CEO Review Committee" (Committee), with one designated as the Chair.
 - The Human Resources Manager will offer staff support to this Committee.
4. July 15th
- The CEO will provide a self-evaluation narrative and
 - An annual report detailing progress on
 - district achievements,
 - strategic plan implementation,
 - patient services,
 - patient and employee satisfaction,
 - financial performance,
 - governmental relations, and
 - community engagement.
5. July 16th or next business day
- The Human Resources Manager will furnish the Committee with the CEO Review Information packet, comprising:
 - the CEO self-evaluation and annual report,
 - the review of the CEO from their direct reports
 - the CEO evaluation policy,
 - the CEO compensation policy
 - the current CEO job description,
 - instructions and timeline for the board CEO evaluation survey,
 - the CEO's contract with amendments, and
 - the most recent CEO salary survey.
6. July Board meeting
- The CEO will present their fiscal year-end report to the Board of Directors and distribute copies.
 - The HR manager will guide the Board on completing the CEO evaluation survey between this meeting and August 10th.
7. August 10th
- Board members will complete the CEO evaluation survey by August 10th.
 - If additional information is needed, board members should contact the Committee Chair, who will forward requests to Human Resources for distribution to all board members.
 - Board members should avoid contacting anyone other than the Committee Chair for supplementary information.
 - The Committee will compile all evaluation materials for the Board's consideration at the August Board meeting.

ANNUAL CEO DEVELOPMENTAL REVIEW AND PERFORMANCE EVALUATION	EFFECTIVE DATE
	MAY 18, 2020
REVIEWED:	UPDATED: 4/29/2024

The Evaluation – August Board Meeting

1. The CEO's annual performance review will take place each year during the August meeting of the Board of Directors.
 - The Board will convene in Closed Session with Legal Counsel, following the guidelines of the Brown Act, which permits personnel evaluations to be conducted in closed sessions.
 - The evaluation survey results will be shared with the CEO in a sealed envelope as the Board enters Closed Session.
 - The committee will present the board with the evaluation survey results during the Closed Session without the CEO.
2. When the Board's evaluation discussion is concluded, the CEO will be invited to discuss the survey results further and review findings with the Board, during which:
 - The Board President will lead a discussion concerning the CEO's performance.
 - The Board will assess the CEO's performance as Excellent, Satisfactory, or Unsatisfactory.
3. After the performance assessment, the Board and CEO will continue discussions in a Closed Session regarding adjustments or changes to the CEO's compensation, contract, and benefits package.
 - If the Board determines that the CEO's overall performance ranges from satisfactory to excellent, the CEO will receive a salary increase within the designated range set by the Board. However, in cases of financial strain, salary increases may be adjusted or withheld as deemed necessary by the Board.
 - Other legally permissible benefits may also be extended, and the CEO's contract may be renewed to reflect the Board's intention to retain them.
 - Should the Board find the CEO's overall performance unsatisfactory, the CEO must submit a written plan for performance improvement to the President and Board within 15 days for approval.
4. The Board President will adjourn the Closed Session to the Open Session.
5. During the open session, the board will address any modifications to the CEO's compensation, contract, or benefit package as a regular action item on the agenda.

Evaluation Wrap-up – September

1. The Ad Hoc CEO Review Committee will provide the CEO with a written synopsis of the verbal feedback from the board meeting.
2. Both the Board President and the Chair of the Ad Hoc CEO Review Committee will finalize and sign the Employee Action Form to enact any alterations to the CEO's compensation package.
3. The CEO will oversee the documentation process for any amendments or adjustments to the CEO's Employment Contract, as approved by the board.
4. The contract will be finalized and signed by the Board President.

CHIEF EXECUTIVE OFFICER COMPENSATION POLICY	REVISION DATE
	TBD

ORIGINAL EFFECTIVE DATE: MAY 2026
POLICY SOURCE: Past Policy, Best Practices, Board Evaluation

Purpose: The Chief Executive Officer of Del Puerto Health Care District (the “District”) is the principal executive of District, and is responsible for the leadership, administration, strategic direction, and public accountability of the District. The purpose of this policy is to establish a fair , transparent, market-based, and performance-informed process for setting and adjusting CEO compensation.

Policy: It is the policy of the Board of Directors to provide CEO compensation that is competitive, reasonable, and sufficient to recruit, retain, and reward highly qualified executive leadership. CEO compensation shall be based on comparable market data, the scope and complexity of the position, performance, retention considerations, and the financial condition of the District. Compensation shall not be limited by automatic default to any single market percentile.

CEO compensation may include:

- Base salary within an adopted salary range
- Cost-of-living adjustment consideration
- Performance-based salary adjustment
- Board-approved incentive compensation
- Standard benefits and other lawful compensation elements approved by the Board

The Board shall exercise its compensation authority in a structured, evidence-based, and transparent manner consistent with District policy and applicable law.

Definitions:

Comparable Market Data: Compensation information from organizations sufficiently similar in executive scope, service complexity, public accountability, labor market conditions, and organizational responsibility to provide a reliable benchmark for the CEO role.

Cost-of-Living Adjustment (COLA): A Board-approved adjustment intended to account for inflation and preserve purchasing power, separate from a market adjustment or performance-based salary adjustment.

Incentive Compensation: Additional at-risk compensation, approved in advance by the Board, contingent upon verified achievement of Board-approved goals during a defined performance period.

Procedure:

A. Salary Range

At a minimum of every three years, the Board shall adopt a salary study and establish a salary range for the CEO. The Board may conduct a study earlier if warranted by market movement, inflation, substantial changes in the scope or complexity of the CEO position, recruitment or retention concerns, or other relevant factors.

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The CEO salary range shall be based primarily on comparable market data from organizations that reasonably reflect the unique scope, complexity, and public responsibilities of Del Puerto Health Care District. In determining comparability, the Board shall give substantial weight to organizations with characteristics similar to DPHCD, including:

1. provision of healthcare services and programs that reflect DPHCD's current operations and future service responsibilities;
2. executive leadership over a broad range of responsibilities, including operations, finance, strategic planning, and community accountability;
3. public-sector governance, transparency, and Board reporting requirements;
4. similar operational complexity, staffing, financial oversight, capital planning, or strategic development demands; and
5. relevant geographic, labor market, and community conditions.

The Board shall primarily use publicly available special district chief executive compensation data, including the Government Compensation in California website <https://publicpay.ca.gov/Reports/SpecialDistricts/SpecialDistricts.aspx>, to guide its review.

The Board may consider private-sector, nonprofit, or healthcare compensation data as secondary references, but shall not rely primarily on organizations whose size, mission, or structure would understate the value of a healthcare district CEO role.

The Board retains sole responsibility for compensation decisions and should use internal staff support and public data whenever practical, reserving outside compensation advisors for situations where the added value clearly justifies the cost.

B. Annual Compensation Review

The Board shall review the CEO's compensation annually in conjunction with the annual CEO performance evaluation process. The annual review may include consideration of:

1. current salary in relation to the adopted salary range;
2. results of the CEO's annual evaluation;
3. achievement of Board-approved goals;
4. progress on strategic priorities;
5. movement in the executive labor market;
6. retention considerations;
7. internal equity considerations; and
8. the financial condition of the District.

Annual review does not require annual adjustment but does require deliberate consideration and documentation of whether CEO compensation remains appropriate and competitive.

C. COLA and Performance Salary Adjustments

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1. **COLA.** As part of the annual budgeting process, the Board may provide an annual COLA to the CEO using the same general methodology applied to eligible non-represented employees, including CPI or other Board-approved inflation measures. The COLA is separate from a market adjustment or performance-based salary adjustment.
2. **Performance.** Following the annual performance evaluation, the Board may approve an additional salary adjustment for the CEO within the adopted salary range. Any adjustment shall be based on documented consideration of performance, range position, retention, increased duties, organizational complexity, District financial conditions, and other relevant factors identified by the Board.
3. **Unsatisfactory Performance.** If the CEO's performance is unsatisfactory, the Board may withhold COLA and performance all salary adjustments and require a written performance improvement plan consistent with applicable District policy and CEO contract terms.

D. Incentive Compensation

The Board may adopt an incentive compensation plan tied to the CEO's annual goals. Incentive compensation is intended to supplement, not replace, a competitive base salary. Any incentive plan shall:

1. be approved with the adoption of Board-approved goals or milestones;
2. state the incentive amount for each goal as a fixed amount or percentage of base salary;
3. describe how achievement will be measured, verified, and scored; and
4. require Board approval of any payout in open session.

Total incentive compensation shall not exceed ten percent of base salary and is not automatic.

E. Benefits and Other Compensation

Unless otherwise approved by the Board and permitted by law, the CEO shall participate in the same standard benefit structure applicable to similarly situated non-represented management employees, including health, dental, vision, life insurance, retirement, and leave benefits.

Any approved compensation elements beyond base salary shall be clearly identified in the CEO's employment agreement or related Board action.

F. Compensation Ad Hoc Committee

The Board President shall appoint a two-member Ad Hoc Compensation Committee to assist the Board with CEO compensation review. The Committee may be the same committee appointed to support the CEO evaluation process.

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For compensation purposes, the Committee is advisory only and shall not have authority to determine compensation, negotiate binding terms, or act on behalf of the full Board. The Committee's responsibilities include reviewing salary study data, compensation structure, contract compensation provisions, any proposed incentive framework, and helping ensure that the basis for Board action is properly documented.

The Human Resources Manager shall provide administrative support to the Ad Hoc Compensation Committee and to the Board's CEO compensation review process.

G. Transparency and Documentation

The Board shall document in the meeting minutes the basis for CEO compensation decisions, including:

1. the compensation and benefits approved and the effective date;
2. the Board members present and the vote taken;
3. the comparability data relied upon and how it was obtained; and
4. any abstentions or conflict-of-interest actions taken by Board members.

Any final action regarding changes to CEO compensation, contract, or benefits shall occur in open session in accordance with applicable law.

H. Review of Policy

This policy shall be reviewed at least every three years, and sooner if needed to reflect changes in District operations, executive labor market conditions, compensation law, or Board governance practices.