

**PETALUMA HEALTH CARE DISTRICT BOARD OF DIRECTORS
MINUTES OF THE FEBRUARY 16, 2022 REGULAR MEETING**

Please note that copies of all pertinent materials considered by the Board in Open Session are included in the final Board Packet. Agenda items may be taken out of order and will be so indicated in the minutes.

1. CALL TO ORDER

The Board of Directors of the Petaluma Health Care District met via Zoom on Wednesday, February 16, 2022.

Director Nelson called the meeting to order at 6:00 pm. CEO Ramona Faith read the Petaluma Health Care District's Mission and Vision into the record.

Mission: The Mission of the Petaluma Health Care District is to improve the health and well-being of our community through leadership, advocacy, support, partnerships and education.

Vision: The Petaluma Health Care District envisions a healthy community and equitable access to health and wellness services for all.

a. ROLL CALL

California Governor Gavin Newsom issued Executive Order N-25-21 on September 20, 2021, relating to the convening of public meetings during the COVID-19 pandemic. Pursuant to the Governor's Executive Order, Board members will attend the meeting via Zoom.

The Board Clerk called the roll. The following Board members were present via Zoom, constituting a quorum:

Directors Ambrosi, Dufour, Hempel, Nelson

The following Board member was absent:

Director Tobias

Also present via Zoom:

Staff:

Ramona Faith, CEO

Tucker Pinochi, Board Clerk

Andrew Koblick, Controller

Guests:

Jonathan Spees, Consultant, Marine Street Consulting

Dana Codron, Regional Director of Community Health Investment at PSJH

Susan Riggie, Founder & Board Vice Chair, Living Unlimited

Katie Carney, Board President, Living Unlimited

Michael LoBue, Interim Executive Director, Living Unlimited

b. CALL FOR CONFLICT

Director Nelson called for conflicts. There were none.

2. CONSENT CALENDAR

- a. APPROVAL of the February 16, 2022 Petaluma Health Care District Board of Directors Meeting Agenda
- b. APPROVAL of the January 19, 2022 PHCD Board of Directors Meeting Minutes
- c. APPROVAL of December 31, 2021 Financial Statements

Director Ambrosi made a motion, seconded by Director Hempel, to approve the items on the Consent Calendar.

Vote: Ambrosi: Y Dufour: Y Hempel: Y Nelson: Y Tobias: abs. The motion was approved 4-0, with Director Tobias absent.

3. BOARD COMMENTS

Director Dufour presented chapters 17 and 18 of 52 Ways to Be a Better Board to the Directors. This meeting's selections addressed trust among Board members, and between Board members and District staff. There must be clear communication around expectations, and duties for all parties in order to foster openness and optimize performance.

Due to Director Tobias's absence, the Board did not address "Petaluma Valley Hospital Community Board Update" as listed on the agenda under this item.

4. RES. #1-22: AUTHORIZING TELECONFERENCE MEETINGS

- a. AB 361 Periodic Findings Requirement

Director Hempel made a motion, seconded by Director Dufour, to approve Res. #1-22.

Vote: Ambrosi: Y Dufour: Y Hempel: Y Nelson: Y Tobias: abs. The motion was approved 4-0, with Director Tobias absent.

5. PUBLIC COMMENTS

There were none.

6. PROVIDENCE ANNUAL COMMUNITY BENEFITS REPORT

Dana Codron, the Regional Director of Community Investment at Providence St. Joseph Health ("Providence"), entered the meeting at 6:30 pm. She has a background in Nursing and has worked for a long time at Queen of the Valley Hospital in Napa.

Dana began by outlining Providence's community health investment priorities, informed by the mandatory 2019 Community Health Needs Assessment for Northern California. These are mental health and substance abuse, health equity, homelessness and housing instability, and access to health services.

Ms. Codron shared several different service initiatives by Providence that, she claimed, both address the community needs represented by Providence's investment priority areas and meet Providence's obligations contained in the Petaluma Valley Hospital ("PVH") sale agreement. These included paid referrals to local care providers and COVID-19 prevention through vaccination and testing in homeless communities.

Director Ambrosi asked which of the referred services Providence covers for patients, and how long the patients can access the services. Ms. Codron replied that right now only the cost of emergency service was covered, and that due to the novelty of the contract with the private duty company, her team was still learning where there may be room to cover more of the service for patients in need.

Director Nelson asked about the forthcoming 2022 Community Health Needs Assessment, and whether Providence had begun planning for it. Ms. Codron replied that they had begun planning, but that after merging Providence and St. Joseph Health they needed to reconcile the fiscal calendars of each organization.

Director Nelson continued, asking if promoting a greater supply of providers was part of Providence CHI's purview. Ms. Codron cited Providence's engagement in support of medical internships in Humboldt County, where the shortage of providers is even more acute than in the North Bay Area.

Hempel, referring to the 2022 Community Health Needs Assessment, urged that the accounting discrepancy delaying the 2022 assessment be reconciled as soon as possible.

Director Hempel continued, reviewing the obligations agreed to by Providence as a condition of the sale of PVH. The agreement stipulates that Providence invest in Petaluma and South County community health, not Santa Rosa community health or Sonoma County community health at large. Director Hempel reports that some of the expenditures Ms. Codron presented are not directed to Petaluma or South County, noting that Caritas and others listed in Ms. Codron's materials provide services in Santa Rosa. While some members of the District's service area can travel to access these services, Director Hempel stated that investments in Santa Rosa could not be counted towards Providence's commitments outlined in the purchase agreement.

Mr. Spees joined the conversation to ask Ms. Codron whether the \$3.7 million labeled "Petaluma" on Ms. Codron's PowerPoint were in fact confined to the zip codes contained in the purchase agreement. Ms. Codron replied affirmatively. Mr. Spees continued, asking whether Providence had the information it needed to compare the results of their investment with past outcomes. Mr. Spees noted that this comparison is the data needed to verify compliance with the purchase agreement. Ms. Codron replied that the annual report for Petaluma for every year since the beginning of the District's relationship with Providence is posted online.

Ms. Faith noted that Ms. Codron was presenting as a part of a new process for accountability to the agreement, and that Ms. Codron was new to the conversation with the Board of

Directors. Returning to the annual report highlights, Ms. Faith asked what Sonoma Connect spent in South Sonoma County during the period covered by the latest annual report. Ms. Codron replied that she did not have that information available immediately but could share it with Ms. Faith later. Ms. Faith mentioned that the ¡Dále! school program is not in South Sonoma County, but only in Santa Rosa schools. Ms. Codron noted that most of her team's activities are county-wide, and the data from services it supports are not necessarily broken down beyond that level.

Director Hempel noted that the Community Investment Process implemented by Providence since it purchased PVH has had difficulties initially, but that it is apparent that leadership has coalesced and become more stable. Director Hempel cautioned against the implementation of new software to receive requests from community benefit organizations, citing the excess of databases already in use for an organization like hers (Petaluma People Services Center). Director Nelson noted that only direct investments in South Sonoma County meet the requirements stipulated by the PVH purchase agreement. Ms. Faith said that historically, annual reports outlining such investments listed Petaluma Valley and Santa Rosa Memorial Hospitals together, making individual direct investments in South Sonoma County harder to find.

Ms. Faith concluded, noting that historically community investments were reported out on a regional basis and it was difficult to truly understand what the total investment was in South Sonoma County. During hospital negotiations Providence staff could not commit to an answer when asked about Providence's to-date investments in South Sonoma County. Ms. Codron added that Ms. Faith was correct, and that such was the case due to reporting requirements that are separate from Providence's obligations to the District.

Ms. Faith mentioned that more information is needed to confirm the annual community investment made in South Sonoma County in 2021 and thanked Ms. Codron for her presentation.

Ms. Codron left the meeting at 7:01 pm.

7. LIVING UNLIMITED PRESENTATION

Mr. Spees introduced the team from Living Unlimited ("L.U."): President Katie Carney, Founder/VP Susan Riggle, and Interim Executive Director Michael LoBue. Mr. Spees shared some background information on the District's outreach to Living Unlimited, and roughly summarized the District's plan for participation in Living Unlimited's program.

Ms. Carney began L.U.'s presentation with a short description of its mission: to provide permanent housing for adults with intellectual or developmental disabilities, and in doing so provide a foundation for an enriching and rewarding life. Ms. Carney notes that as of now, L.U. has no paid staff besides Michael LoBue, interim Executive Director.

Ms. Riggle founded L.U. to address an enormous need: 245,000 Californians with intellectual or developmental disabilities living with a parent or a guardian, 56% of which are

over the age of 21. L.U. seeks to create solutions for when the parent can no longer provide their child a place to live.

Ms. Carney outlined L.U.'s four step model: create community, locate viable living opportunities, financing and legal structure, and providing oversight. Living Unlimited matches potential residents according to compatibility, then locates properties which can meet the needs of the compatible group. Living Unlimited creates the LLC which will purchase the property, and participant families can either split a mortgage to pay the LLC to buy the property, or buy the property outright together through the LLC created by L.U. L.U. calculates what each resident can reasonably afford to pay according to their SSI/SSDI disbursements, leaving room for individual spending money. Living Unlimited also includes payroll for a dedicated community manager for each compatible community in their assessment of rental costs. These act as property managers for each site, ensuring proper maintenance for residents and monitoring operations.

Ms. Carney explained that Living Unlimited seeks to provide the necessities for each individual and shared with the Board the different models it employs according to the density of the community: integrated (rural), clustered (suburban), or multi-unit (urban).

Ms. Carney described the all-volunteer organization as primarily parent driven, due to their unique insight into their child's individual needs, navigating state services, and all the experiences unique to the circumstance of parenting a child with disabilities. That said, Ms. Carney shared L.U.'s five-year strategic plan outlining how the organization planned to expand its offerings for the disabled community. Her plan sets a goal to provide housing for 150+ intellectually and developmentally disabled adults, to hire a paid staff to boost operations, and to cover the \$3 million gap in the budget to pay for it all.

Mr. Spees reiterated that Living Unlimited's model was for parents to buy their child's share of the property by purchasing an equivalent share in the LLC created by Living Unlimited. Ms. Carney expanded upon Mr. Spees's point to compare their model with a group home setting: L.U.'s model, she said, provides a greater degree of independence than a group home because it allows residents to choose what they eat, how they spend their time, etc.

Mr. Spees continued, describing the new model that PHCD's participation would require. The District would purchase the property in lieu of the LLC, and would receive rental payments from residents calibrated according to their SSI/SSDI disbursements. This would differ from the current model by lowering the floor for participation: if the District purchases the property itself, families of disabled adults will have a lower affordability threshold for joining the program.

Directors Ambrosi, Nelson, and Hempel discussed each model with the L.U. team, and Director Nelson suggested that some of the benefits accrued through L.U.'s current model would be unavailable to the District if it chose to move forward to work with Living Unlimited. Mr. LoBue and Mesdames Riggall and Carney all noted that this was new territory for Living Unlimited, and that they were both willing and eager to work with the district to construct something that meets the needs of both sides.

Mr. Spees said that he would follow up with Susan to set up a meeting with her. He said they will develop a work plan and being to flesh out a concept.

Ms. Carney, Ms. Riggle, and Mr. LoBue left the meeting at 7:53 pm.

Director Dufour added that the organization seems rather lean, and that the District may be able to alleviate some of the burdens associated with L.U.'s work through its community connections. Director Hempel shared that SSU has a program to train professionals that work with this population. She said this created a potential opportunity for engagement with SSU to learn about their program. Director Hempel added that she sees the partnership with L.U. as an opportunity for PHCD to be an example for other Special Districts in California.

8. FINANCIAL SUSTAINABILITY

a. February 8, 2022 Finance Committee Meeting Minutes

Mr. Koblick reported that the Finance Committee met on February 8, 2022, with the minutes in the Board's packet for their review.

b. Socially Responsible Investing: Proposal to Add Language to Investment Policy

Ms. Faith reminded the Board that at last month's regular meeting they were presented with draft language for addition to the District's investment policy, with the expectation of taking a vote during the regular February meeting. Additions from the text presented at the January 19, 2022 meeting of the Board of Directors are noted in red.¹

"In the event all general objectives mandated by state law are met and created equal, investments in corporate securities and depository institutions will be evaluated for social, **ethical**, and environmental concerns. Investments are encouraged in entities that support equality of rights regardless of sex, race, age, disability, religion, or sexual orientation, as well as those **entities that promote healthful living for their employees and their community, that practice environmentally sound policies and follow fair labor practices**. Investments are prohibited in entities that receive a significant portion of their revenues from the manufacture or sale of tobacco **and nicotine** products, exploration of fossil fuels, firearms, or weapons not used in our national defense."

Director Ambrosi made a motion, seconded by Director Dufour, to approve the draft language as presented for addition to the District's Investment policy.

Vote: Ambrosi: Y Dufour: Y Hempel: Y Nelson: Y Tobias: abs. The motion was approved 4-0, with Director Tobias absent.

c. Finance Committee Charter

¹ Petaluma Healthcare District. (January 19, 2022). Board of Directors Meeting Minutes. <https://phcd.org/agendas.php>.

Mr. Koblick briefly presented the Finance and Business Development Committee Charter as reviewed by the committee. Ms. Faith relayed the committee's request for the Board of Directors to approve the charter, adding that other committee charters should be added to the agenda later for Board review. Ms. Faith also recommended that the Board re-consider what subcommittees are needed based on the Board's work and strategic plans.

Director Nelson asked for a motion to approve the draft Finance and Business Development Committee Charter as presented.

Director Dufour made a motion, seconded by Director Ambrosi, to approve the draft Finance and Business Development Committee Charter as presented to the Board of Directors.

Director Hempel interjected to request a change to the charter, to reflect that the Finance and Business Development Committee is accountable to the Foundation Board of Directors. Ms. Faith and Directors Dufour and Hempel discussed where in the language to make this change, based on the legal status of the Petaluma Health Foundation relative to the Petaluma Health Care District. Having clarified that such an addition was unnecessary, the Board proceeded to vote.

Vote: Ambrosi: Y Dufour: Y Hempel: Y Nelson: Y Tobias: abs. The motion was approved 4-0, with Director Tobias absent.

d. Business Development Update

Mr. Spees updated the Board on the latest developments regarding the lease of the hospice facility to Providence. Ms. Faith reported that the property requires maintenance work, and that under the current lease the work is Providence's responsibility. Mr. Spees reported that the ongoing negotiations amounted to a discussion over the eventual rental payments to the District from Providence.

Mr. Spees continued to address business development opportunities for the District, namely the undeveloped parcel at Lynch Creek. He has been contacted by developers who have suggested building a new commercial space there. This category of project does not fit with the District's strategic priorities, and in spite of the developers' claims they can work with the District, Mr. Spees was not optimistic that there will be a deal for such a space.

Mr. Spees reported that conversations with Providence to construct a new behavioral health facility on the Lynch Creek parcel are ongoing. He noted that in contrast with the opportunity for a commercial space, the behavioral health center would fit the District's service priorities and financial sustainability needs.

Mr. Spees also relayed his conversation with Naomi Fuchs, President of the Santa Rosa Community Health Clinic, regarding their development of the PACE program.. The District initially offered to develop this program together, but Ms. Fuchs declined and has since moved forward with the program. Subsequently, Ms. Fuchs shared with Mr. Spees that SRCHC had a \$14-15 million capital need, and requested that the District help to fill in that gap. Mr. Spees noted that such a donation would be in line with promoting the District's

service priorities, would provide a valuable service to residents, and could be structured as a loan to promote accountability to objectives. While the topic was not up for a vote at this meeting, Mr. Spees said he was not confident in this project's success and that he would not advise the District to move forward with funding at this time.

Finally, Mr. Spees addressed potential leasing opportunities in the District's service area, including with First Responder's Resiliency's (FRR) Wellness Center in Cotati. They offer a two-and-a-half-day program at Bishop's ranch for local first responders as of now and would like to offer services daily at this Wellness Center. According to our discussions, the model is for the District to be FRR's new landlord in Cotati, as they are currently leasing their existing space. The Board will need to discuss further to better understand the program and potential ROI.

9. PETALUMA HEALTH FOUNDATION BYLAWS AMENDMENT

a. Per Petaluma Health Foundation Bylaws: Article XI, Section C.

Director Nelson called for a motion to approve the amended Petaluma Health Foundation bylaws as required by Article XI, Section C thereof.

Director Hempel made a motion, seconded by Director Dufour, to approve the amended Petaluma Health Foundation bylaws as required by Article XI, Section C thereof.

Vote: Ambrosi: Y Dufour: Y Hempel: Y Nelson: Y Tobias: abs. The motion was approved 4-0, with Director Tobias absent.

10. ESTABLISHING ZONED ELECTIONS PER THE CA VOTING RIGHTS ACT

Ms. Faith reported that she brought this topic up at January's regular meeting of the District Board of Directors, because multiple special districts statewide have received letters regarding compliance with the zoned election requirement of the California Voting Rights Act. In the worst case, this notice is accompanied by a fine.

Director Hempel noted that the City of Petaluma has begun their redistricting process, and that their goal is to have approved boundary lines by the end of April. She suggested that the District may be able to use those boundaries, in light of the relative concentration of District residents inside the City of Petaluma. Ms. Faith suggested that the matter could be taken up by an ad hoc committee. She said she will reach out to other Districts to see who they have contracted with to assist with the process of establishing zoned elections.

11. ADMINISTRATIVE REPORTS

a. CEO Report

Ms. Faith reported to the Board that staff has received nineteen responses to the RFP for the District's rebrand. Four of those are local. Ms. Faith said she will review the proposals and have a recommendation for approval for the Board by next meeting.

Ms. Faith also reported that planning for the Blue Zones kick off is underway. Staff is working to schedule weekly planning meetings and steering committee meetings, and Ms. Faith said she would like the Board to have input on the composition of the steering committee, with the note that names

should be submitted as soon as possible to ensure staff can notify potential members and begin scheduling. She added that the time commitment for the steering committee will consist of three meetings spread out over the initial site assessment period.

Directors discussed potential appointees. Suggestions included Mayor Barrett and members of the Petaluma City Council, leadership from Providence (provided they are focused on South Sonoma County), and a representative from Petaluma City Schools. Directors also suggested Petaluma Market, a representative from the Chamber of Commerce or local business, the Interfaith Council, and Petaluma Community Relations Council.

b. District News / Articles / Ads

Ms. Faith listed news items pertaining to District operations or Board activities. See attachments.²³⁴⁵

12. INFORMATIONAL ITEMS

a. Upcoming Events

- i. **Youth/Young Adult Heart Screening, Feb. 27, 2022 from 9:00 am – 2:30 pm.**
- ii. **CSDA Webinar: Board Member and District Liability Issues, March 14, 2022 from 1:00 pm – 2:00 pm.**

b. Next Meeting: March 16, 2022 at 6:00 pm – 8:00 pm.

c. General News

13. PLUS/DELTA

Ms. Faith requested feedback on the new format incorporating the Petaluma Health Foundation (“Foundation”) Board of Directors meeting, namely the length of each meeting and the frequency of Foundation Board of Directors meetings.

14. ADJOURN

The regular February meeting of the Petaluma Health Care District Board of Directors was adjourned by Director Nelson at 9:03 pm.

Contact tpinochi@phcd.org for more information.

Submitted by Gabriella Ambrosi, Board Secretary
Recorded by Tucker Pinochi, Board Clerk

² Community Foundation of Sonoma County. [“Portrait of Sonoma County 2021 Reveals Mixed Picture: Overall Up-tick in Well-Being and Deepening Inequities.”](#) January 26, 2022.

³ Studio PR on behalf of PHCD. “Health Care District Offers Free Youth/Young Adult Heart Screening for All Sonoma County at SRJC Petaluma.” February 7, 2022.

⁴ Ramona Faith. [“For Heart Month, PHCD is offering a Free February Heart Screening Event that Will Help Save Lives.”](#) Petaluma Argus-Courier. February 16, 2022.

⁵ Phil Barber. [“Fear, Uncertainty Follow Abrupt Closure of Healdsburg Skilled Nursing Facility.”](#) Press Democrat. February 8, 2022.

PETALUMA VALLEY
HOSPITAL
COMMUNITY HEALTH
INVESTMENT ANNUAL
REPORT



Petaluma Valley Hospital Community Health Investment Annual Report

Presented by:

Dana Codron, RN, MPH

Regional Director, Community Health Investment

NorCal 2019 CHNA 2020-2022 CHIP



Mental health &
substance use



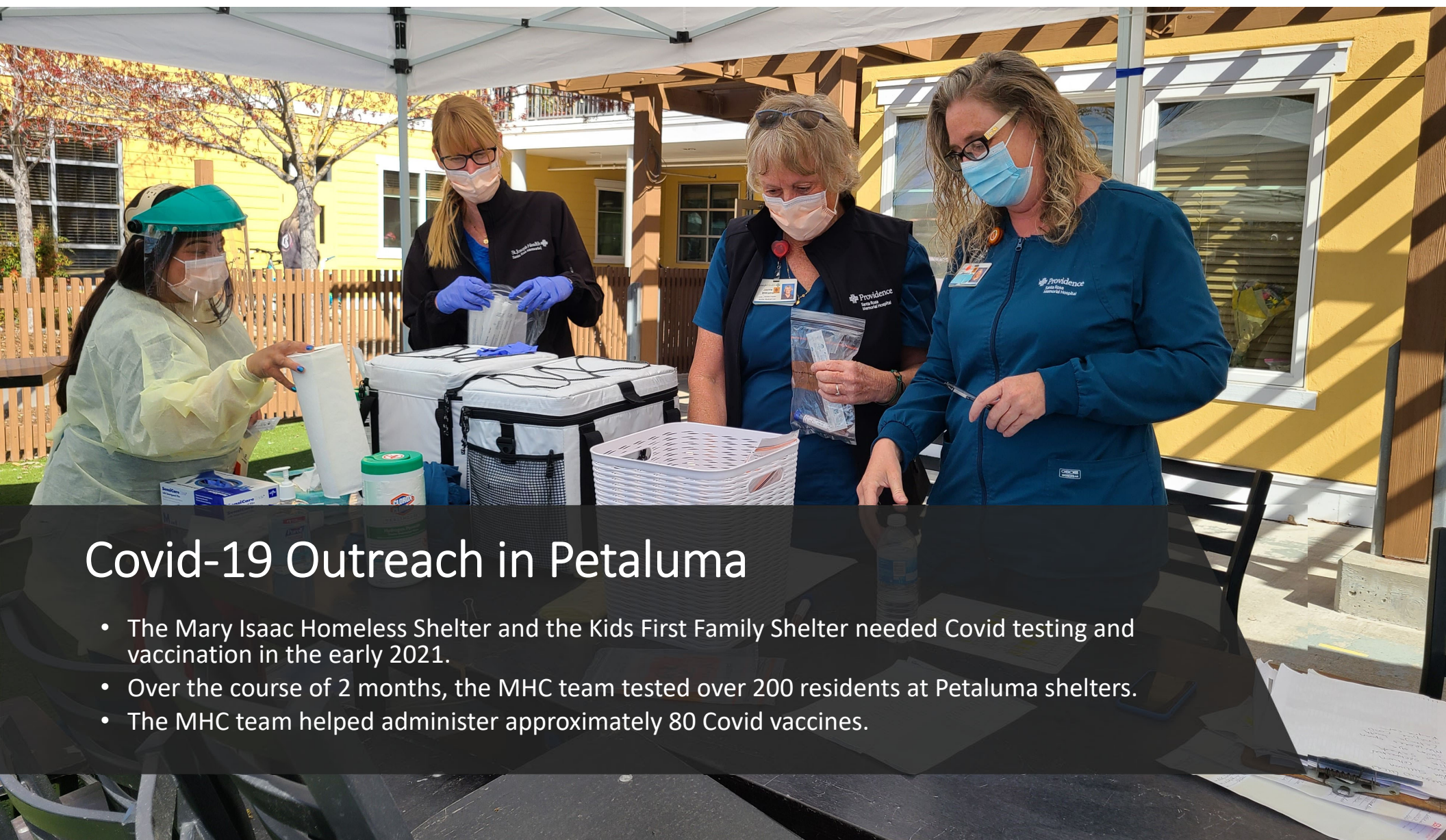
Homelessness and
housing instability



Health equity (racism,
discrimination, and
LGBTQ+)



Access to health
services



Covid-19 Outreach in Petaluma

- The Mary Isaac Homeless Shelter and the Kids First Family Shelter needed Covid testing and vaccination in the early 2021.
- Over the course of 2 months, the MHC team tested over 200 residents at Petaluma shelters.
- The MHC team helped administer approximately 80 Covid vaccines.

Petaluma Valley Hospital Program Highlights

CARE Network (CN)

The CARE Network program offers community-based care management for predominantly low-income and otherwise vulnerable populations. Upon discharge from the hospital or release from the Emergency Department, patients are served by teams of Social Workers and RNs. The program ensures patients and caregivers make a smooth and successful transition from hospital to home, including home visits; assistance with transportation to medical, legal and benefits appointments; diet and medication management; caregiving resources and support; referrals to additional needed resources/services; skilled nursing and senior placement; and coaching designed to teach self-advocacy skills in navigating the healthcare system. CARE Network staff act as an advocate and liaison between the patient and their providers. The team provided services through 3,210 encounters. AB0

Substance Use Navigator

A distinct service of the CARE Network program, the Substance Use Navigator (SUN) assist patients in the hospital with a substance use disorder to get connected with appropriate treatment programs. CN added a Substance Use Navigator position in Petaluma Valley Hospital in 2021.

Slide 4

AB0 [@Jacowski, David] Can you please pull data for PVH CARE Network patient's served? I asked Amy and she told me to reach out to you.

Acosta, Becca, 2022-02-10T01:08:51.753

JD0 0 3,210 Encounters for PVH

Jacowski, David, 2022-02-10T17:43:40.782

Petaluma Valley Hospital Annual Report

FY21 Highlights

- **Committee on the Shelterless (COTS):** Providence financially supports an embedded mental health social worker in COTS' Mary Isaak Center homeless shelter to train and educate shelter staff on dealing with clients experiencing mental health issues, to run groups for clients to surface and discuss their mental health issues, and to connect clients to mental health and social support services. FY21 = \$24,346
- **COTS Recuperative Beds:** Recuperative beds for unhoused discharged patients as an alternative to lengthy hospital stays or shelter placement. 6 beds at Committee on the Shelterless (COTS) Mary Isaak Center shelter site in Petaluma operated by COTS and funded in part by Providence in partnership with Kaiser Permanente. Providence has contributed \$2 million to COTS . FY21 = \$35,410
- **COTS Permanent Supportive Housing (PSH):** Providence CHI financially supports a social worker/case manager at COTS to provide the social supports to residents in the 11 PSH units that are embedded in COTS' Mary Isaak Center. FY21 = \$100,000
- **Petaluma Health Care District - Cardiac Screenings & Walk Day.** FY21 = \$4,000
- **Petaluma Sober Circle:** Serial inebriate program featuring street outreach and alternative direct placement in recovery programs as an alternative to jail or emergency department. Providence CHI is a major funder with Kaiser and Partnership HealthPlan of California. Sober Circle is a collaborative project with Petaluma Health Care District, Petaluma Police Department, Sonoma County Behavioral Health, Center Point DAAC treatment center, Petaluma Health Center, and COTS. CY21 = \$40,000
- **St. Vincent de Paul Commons Permanent Supportive Housing:** Providence CHI contributed \$750,000 over the past two-plus years to this project to convert an aging motel into a 54-unit permanent supportive housing project that will house up to 75 people who are experiencing homelessness. This project is scheduled to open in 2022.
- **Caritas Village:** Providence CHI contributed \$2,000,000 over the past two-plus years to this Catholic Charities project. Caritas Village will include a housing-focused service center, emergency family shelter, a medical clinic operated by SRCH, and, in subsequent phases, 128 units of permanent affordable housing. Caritas Village is scheduled to open in 2022.
- **Sonoma Connect | Sonoma Unidos:** Providence is the lead agency for this initiative and brought community partners together to apply for CA state ACES grant funding. Sonoma Connect | Sonoma Unidos is an open coalition of partners and community members working together to create a comprehensive equity-focused and trauma-informed network that allows people to connect to resources they need to thrive. Sonoma Connect | Sonoma Unidos uses a collective impact framework to bring together resource providers, service providers, and community members to prevent, address and heal ACEs and other social determinants of health (SDOH) through leveraging, alignment and agreement on common goals.

Slide 5

AB0 [@Jacowski, David] Do you have a \$ for this contribution?
Acosta, Becca, 2022-02-10T00:58:14.781

JD0 0 \$40,000
Jacowski, David, 2022-02-10T17:42:30.764

Petaluma Valley Hospital Annual Report

FY21 Highlights

- **¡DALE!:** ¡DALE! is a youth-led program that includes training, practice, and mentorship to address equity issues within local schools and communities. Co-created with Sonoma County youth, ¡DALE! aims to support the development of high school students who aspire to become leaders and organizers within their school and community. CY 21 = \$72,620
- **Healthy for Life & School District Wellness Policy & Practice Development:** Providence CHI staff work with local schools and school districts to design and fund programs to improve the physical and mental health and well-being of students, teachers, and staff. These include the following:
 - School-based and community wellness program: physical, nutrition, resiliency, and mental health education and training for students, staff and community.
 - Education, training and technical assistance for schools and school districts to develop and implement wellness, health, resiliency, equity, Trauma-Informed Care (TIC), Adverse Childhood Experiences (ACEs), and restorative justice awareness, policies and practices.

Slide 6

JD0

Dale! = \$72,620 paid to On the Margins for Dale! invoices in CY21. Invoices were paid in second half of year so outside of Fiscal Year.

Jacowski, David, 2022-02-10T19:10:30.570

Services Provided by Facility in Petaluma FY21

July 1, 2020 – June 30, 2021

IRS Form 990 Schedule H Categories	Community Benefit Program Categories	Net Benefit
Medical Care for Vulnerable Populations	Financial Assistance at cost	1,800,159
	Unpaid cost of Medicaid	847,993
	Unpaid other govt. programs	37,735
Other Benefits for Vulnerable Populations	Community Health Improvement Services	312,126
	Subsidized Health Services	402,688
	Cash and In-Kind Contributions	163,756
	Community Building	-
	Community Benefit Operations	-
	Total Benefits for Vulnerable Populations	3,568,457
Other Benefits for the Broader Community Populations	Community Health Improvement Services	74,936
	Subsidized Health Services	-
	Cash and In-Kind Contributions	-
	Community Building	-
	Community Benefit Operations	49,062
Health Profession Education, Training and Research	Health Professions Education and Research	-
	Total Benefits for the Broader Community	123,998
	Total Community Benefit	3,692,455
Medical Care Services for the Broader Community	Total Medicare shortfall	10,282,013

Total Community Benefits
5,770 Encounters
Total Net Investment = \$3,692,455

Thank You!

LIVING UNLIMITED
PRESENTATION:
THE ROAD HOME



The Road Home

Create safe and long-term housing for those with developmental disabilities, partnering with families to provide a foundation for an enriching and rewarding life in a diverse and inclusive environment

What is Living Unlimited?

- ▶ Living Unlimited (LU) is a nonprofit organization founded in 2015

Created to provide adults with intellectual and/or developmental disabilities with a safe & secure home for **the rest of their lives**.

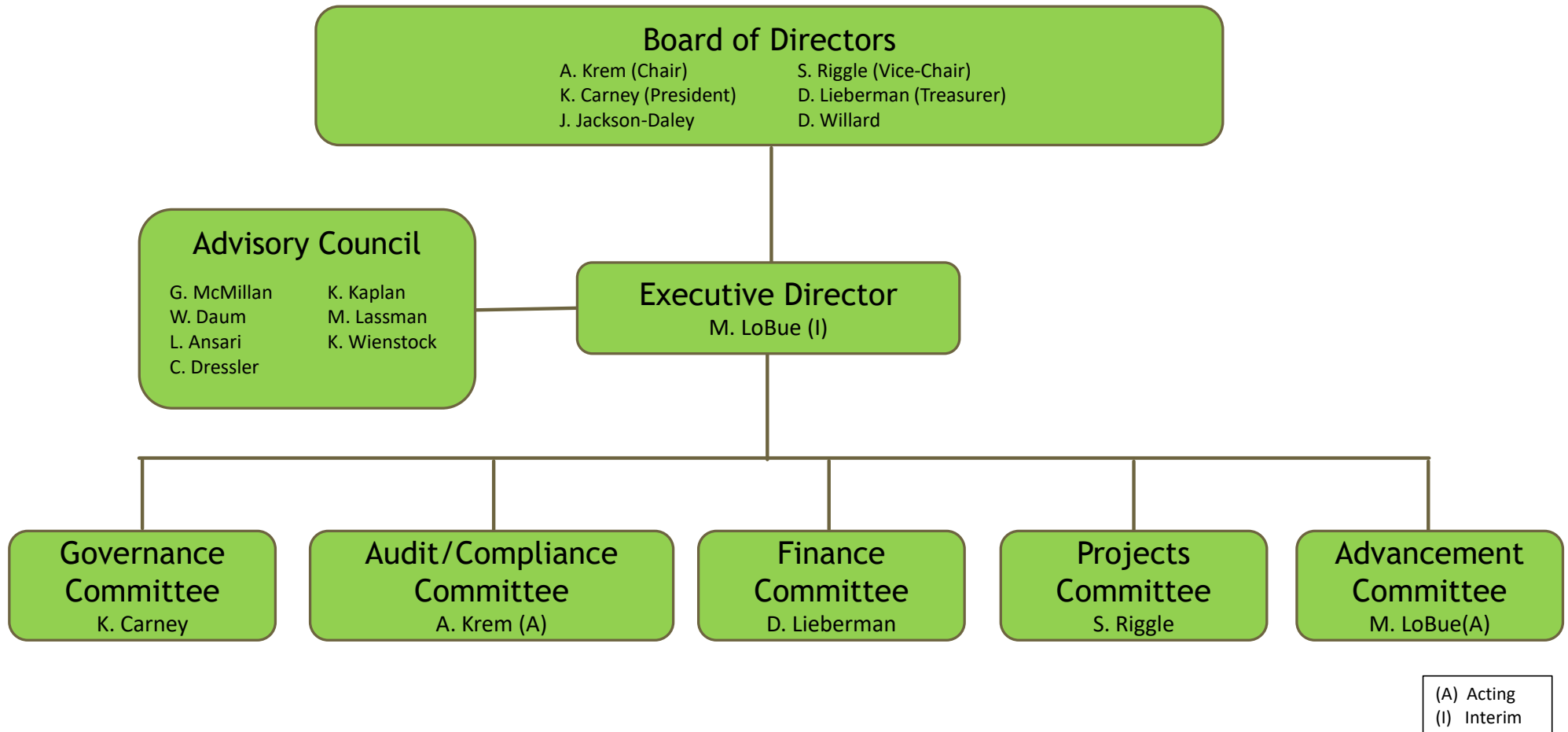
- ❖ Ideally not just a house, but a place that every developmentally disabled adult is proud to call **HOME**
- ❖ A place where they can be themselves, safe, accepted and appreciated for who they are.

LU was created to address an enormous need.

- ❖ Over 245,000 I/DD Californians living at home with their parents or a guardian, 57% of which are over the age of 21¹
- ❖ Where will these individuals live when their parents are no longer able to provide a home due to their own limitations or death?

¹ CA Department of Developmental Services Quarterly Consumer Characteristics Index Report for December 2020.

Who is Living Unlimited?



How Living Unlimited Provides Housing

- ▶ LU addresses the huge challenge parents have...
“Where will my special child live once I can no longer care for them?”

The LU Operational Model:

Step 1 - Creating Community

- ✓ LU brings families together to explore preferences, determine compatibility, support decision to build a future with and for their special loved ones.

Step 2 - Locating Viable Living Opportunities

- ✓ After compatible families have connected, LU helps find reasonable and appropriate properties.

Step 3 - Financing and Legal Structure

- ✓ LU creates the limited liability company (LLC), provides the operating agreement and governance structure for management of each project.

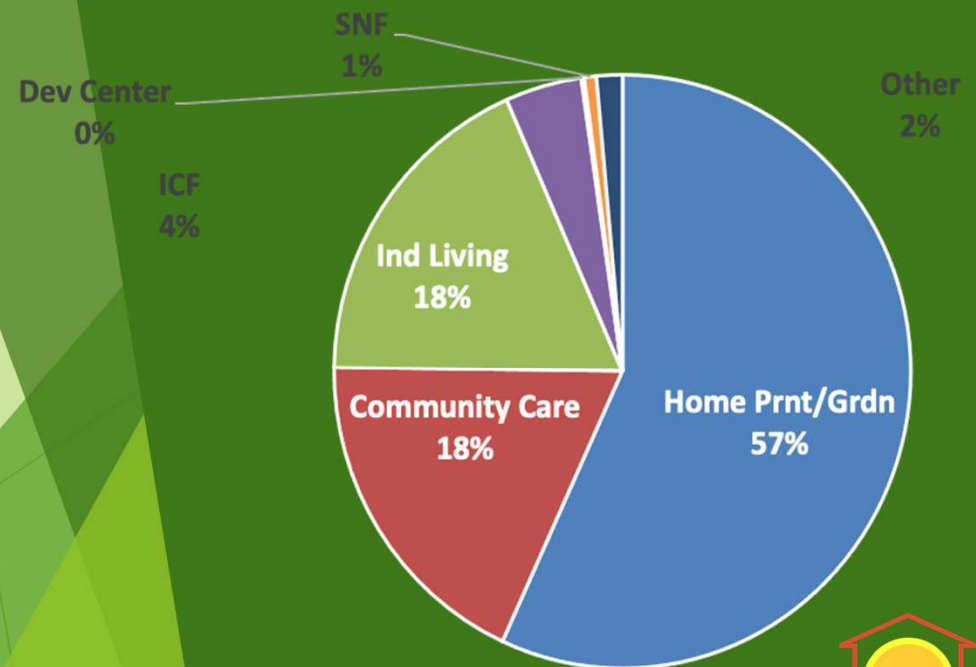
Step 4 - Providing Oversight

- ✓ LU provides management of LU formed communities and performs an oversight role to assure quality of development.

The Challenge...

1. Safe, Secure Home for life
(LU's mission)
2. Support and Care as necessary
(Independent agencies provide)
3. Activities (Parents help
establish and LU may monitor
and advise)

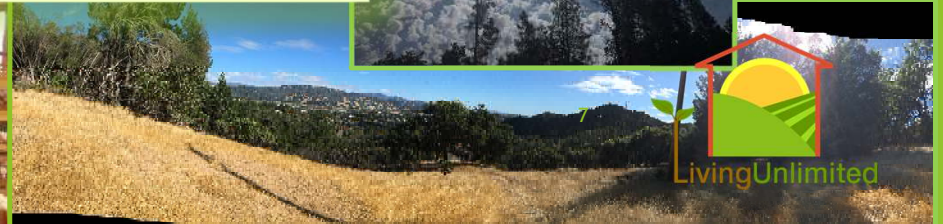
CA I/DD over Age 21 by Residence Type



The LU Concept:

- ▶ Families buy equity in a property as a member in a limited liability company (LLC).
This equity can be re-sold per LLC rules.
- ▶ The property is purchased by LLC.
 - ▶ Living Unlimited creates and manages the LLC.
- ▶ The LLC rents rooms to Residents with Rent levels set for SSI/SSDI affordability.
 - ▶ Residents are LLC Member's adult I/DD children, IHSS workers and others.
- ▶ Rents pay operational expenses
 - ▶ In fully purchased properties, rent covers taxes, insurance, property maintenance and a Community Manager.
 - ▶ In properties with a mortgage, rents covers taxes, insurance and property maintenance. A Community Manager may require an additional fee.
- ▶ Care - Parents select independent support services companies to provide the needed support for Residents; care, day programs, job training, etc.
- ▶ Community Manager - maintains property, the eyes and ears of the parents and may provide opportunities for enrichment activities.

LU Plan: Ensure the Basics



Living Unlimited Projects

Three Community Models:

Housing Models/Settings

1. *Integrated* - all on one piece of land
 - rural
2. *Clustered* - an anchor property with single family homes in close proximity
 - suburban
3. *Multi-unit* - apartments
 - urban

Resident Profiles

1. Special needs and staff
2. Special needs, staff & affordable housing for neuro-typical roommates



Clearwater Ranch *LU's first Integrated Housing model* Cloverdale, Sonoma County

- ▶ 84 acres, adjacent to 300+ acres of open space, and large Del Webb (55+) senior community.
- ▶ Accommodations for up to 24 special needs residents, 10 House Assistants and additional rental units
- ▶ One mile from downtown Cloverdale
- ▶ Affordable within SSI payment amounts
- ▶ 5 openings left, starting at \$450K
- ▶ See <https://www.CRanch.net/>

www.living-unlimited.org



Mustang Court Commons (MCC) *LU's first Clustered Housing model* Petaluma, Sonoma County

- ▶ 5.5 acres, adjacent to Corona Creek Neighborhood, Leghorn Park and Santa Rosa Junior College Petaluma Campus.
- ▶ Large 4000+ sq ft home.
- ▶ Working on adding accessory dwelling units (ADUs).
- ▶ Currently interviewing contractors for revamping main house and investigating ADU builders.
- ▶ Landscape and farm layout designs underway.
- ▶ First occupants scheduled for July 2023.
- ▶ A total of 8 special residents will live on site.
- ▶ Within walking distance of many homes suitable for residents.
- ▶ See <https://mustangcourtcommons.com/>.
- ▶ And <https://mustangcourtcommons.com/the-farm/>.



Homes Near MCC

- ▶ Additional Single-family homes in the neighborhood become part of the community
 - ▶ Mustang Court Explorer 1 (MX1)



Near Term LU Communities

Alameda

- Families identified and engaged, base community in place.
- Looking for property.
- LLC groundwork initiated.

Sacramento

- Project Team Leader identified.
- Offer submitted as a backup on desired property.
- Meeting by Zoom to engage potential families.

San Francisco & San Jose

- Significant interest from families looking for housing for their adult disabled child.
- LU to support family engagement and community development.

Living Unlimited Outlook

- ▶ LU is an all volunteer organization
 - ▶ Primarily parent driven
 - ▶ Knowledge of individual needs
 - ▶ Navigation of California State Supplied Services (DSS and DOR)
 - ▶ Invaluable Lessons Learned
- ▶ LU 5 Year Strategic Plan
 - ▶ Housing for 150+ I/DD adults
 - ▶ Requires paid staff for implementation
 - ▶ Current Operating Budget Shortfall
 - ▶ \$3M estimate for 4 PT staff
 - ▶ Management, Accounting, Marketing and Intake Processing

Enabling I/DD Adults to Live
a Productive and Enriched Life





Contact Us:

Susan
Riggle

- 510-334-7420
- Susan@living-unlimited.org



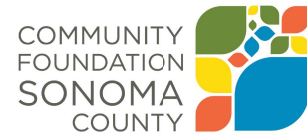
Katie
Carney

- 408-857-8492
- Katie@living-unlimited.org

www.living-unlimited.org



FINANCIAL SUSTAINABILITY



PRESS RELEASE

FOR IMMEDIATE RELEASE

Jan. 26, 2022

Portrait of Sonoma County 2021 reveals mixed picture: overall uptick in well-being and deepening inequities

SANTA ROSA, CA — A major new report released today, *A Portrait of Sonoma County 2021 Update*, delivers a mixed picture of health and well-being in the county. Taken as a whole, people in Sonoma County live longer, earn more money, stay in school and earn college degrees at higher rates than in other counties across California and the United States. Yet the report also reveals widely varying conditions of health and well-being for many people and neighborhoods in Sonoma County.

The [*Portrait of Sonoma County 2021 Update*](#) is a follow-up report to the groundbreaking 2014 *Portrait of Sonoma County*, which shifted our community's understanding of what determines well-being in Sonoma County and how conditions vary between neighborhoods. Both reports are based on the Human Development Index (HDI) of the United Nations, the global standard for measuring the well-being of large population groups. The index compiles data on access to knowledge (education), standard of living (income), and life expectancy (health), then compares these data across race, ethnicity, gender and geography, providing a detailed picture of where and for whom preventable disparities persist in the county.

"These findings have major implications and will help inform the way that local government and community-based organizations respond to the systemic problems that face our community. By understanding how our community is changing — and who is being left behind — this report will help us make targeted investments to improve the health and well-being of everyone in our community," said James Gore, chair of the Sonoma County Board of Supervisors.



While many neighborhoods in Sonoma County have seen improvements in HDI scores since 2014, the new report also reveals growing disparities across gender, racial groups, ethnic groups and individual communities.

Key findings in the updated report:

- Black, Indigenous, People of Color (BIPOC), and immigrant and undocumented community members persistently scored lower than other populations.
- The Black community experienced the largest decline in HDI scores since 2014, while scores for Latinos have increased.
- Latino, Native American, and Native Hawaiian and Other Pacific Island residents of Sonoma County have the lowest median personal earnings among the major racial and ethnic groups, about \$29,000, \$29,000, and \$26,000, respectively.
- 69.3 percent of Black youth are enrolled in school compared to 77.1 percent of Latino youth and 87.8 percent of Asian youth.
- The percentage of students with an Individualized Education Program (IEP) — a plan that lays out the special education instruction, support and services a student with an identified disability needs to thrive in school — has increased in the Sonoma Valley Unified School District.
- While the gap between neighborhoods with highest and lowest life expectancy has narrowed since the 2014 report, people living in the highest-scoring neighborhood, East Bennett Valley, still live 8.7 years longer than those in lowest-scoring Roseland neighborhoods.

“We have come to a new understanding about opportunity and well-being in Sonoma County,” said Oscar Chavez, assistant director of the Sonoma County Human Services Department. “In light of the losses that many

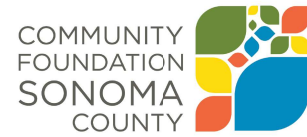


among us have felt during the wildfires and the COVID-19 pandemic, this report makes it painfully clear that certain racial groups and neighborhoods in our county continue to be much more vulnerable to suffering and experience loss of opportunity. It is imperative that we identify the conditions that lead to such varied experiences and work together to address these disparities.”

The *Portrait of Sonoma 2021 Update* is a multi-sector initiative of local governments, nonprofits, philanthropy and the business community coming together to gain deeper understanding of the inequities and uneven access to opportunity for people and neighborhoods. In addition to supporting development of an updated report to gauge trends in Sonoma County relative to the 2014 report, the initiative will shift in the coming months to working with community groups to co-create an action plan in response.

“It’s vitally important that we center the community in decisions that follow this report,” said Karin Demarest, vice president for community impact at Community Foundation Sonoma County. “The Portrait Update is just the beginning of this conversation. Building an inclusive Agenda for Action with broad community input is where true change will emerge.”

The *Portrait of Sonoma County 2021 Update* report was produced by Measure of America, an initiative of the Social Science Research Council, in partnership with Community Foundation Sonoma County, the Peter E. Haas Jr. Family Fund, Sonoma County Office of Equity, Upstream Investments, and Sonoma County Departments of Human and Health Services. Additional funding support was provided by Career Technical Education Foundation, First 5 Sonoma County, Healthcare Foundation Northern Sonoma County, John Jordan Foundation, Kaiser Permanente, Petaluma Health Care District, Sonoma County Grape Growers Foundation, Sonoma County Office of Education, Providence St. Joseph Health, Sutter Health, and United Way of the Wine Country.



The Portrait of Sonoma County 2021 Launch Event will be held tonight, Jan. 26, at 6 p.m. via Zoom. The presentation will be in Spanish and English with closed captioning available. Register here for the event:

https://marincf.zoom.us/webinar/register/WN_IQIB32UITGefPQ1I_SkS0Q.

Join or watch on Facebook live:

<https://www.facebook.com/SONOMACOUNTYHUMANSERVICES/>

The *Portrait of Sonoma County 2021 Update* report is a supplement to [A Portrait of California 2021-2022: Human Development & Housing Justice](#), published in November 2021. The updated Sonoma County report draws on U.S. Census data as well as other national, state and local public data from 2015-2020.

The full, downloadable *Portrait of Sonoma County 2021 Update* report is now available online at

<http://upstreaminvestments.org/Impact/Portrait-of-Sonoma-County/>, along with data tables, interactive maps and more information. Ongoing updates and opportunities for the public to participate in creating the Agenda for Action are also available through these social media channels:

[@sonomacountyhumanservices](#) and [@cfsonomacounty](#).

###

MEDIA CONTACTS:

Lori Houston

Sonoma County Department of Health Services

PortraitSoCo@sonoma-county.org

(707) 569-6029

Caitlin Childs

Community Foundation Sonoma County

cchilds@sonomacf.org

(707) 217-7397 cell

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Contact:

Rebecca Ellecamp / Melinda Hepp
Studio PR
707-971-0242 / 415-717-4624
rebecca@studiopr.com / melinda@studiopr.com

Health Care District Offers Free Youth/Young Adult Heart Screening for All Sonoma County at SRJC Petaluma

Feb. 27 Event Designed to Detect Potentially Fatal Heart Defects

PETALUMA, Calif., Feb 7, 2022 — The [Petaluma Health Care District](#), in partnership with the [Via Heart Project](#) and Santa Rosa Junior College (SRJC), is presenting a free youth heart screening event designed to detect undiagnosed heart defects that can lead to sudden cardiac arrest and death. It takes place Sunday, Feb. 27, 2022, at SRJC's Petaluma campus and is open to all Sonoma County residents ages 12-25.

"It's estimated that nearly 1 in 300 children suffer from an undiagnosed heart defect that could lead to sudden cardiac arrest," said Ramona Faith, CEO of PHCD. Sudden cardiac arrest is different from a heart attack, which is caused by a blockage in the heart muscle's blood supply. With sudden cardiac arrest, a previously undetected defect shuts down the heart's electrical system and creates a dangerous abnormal rhythm. This triggers collapse, loss of consciousness and cessation of breathing. Unless appropriate medical help is immediately at hand, sudden cardiac arrest generally proves fatal.

"With an undiagnosed heart defect, we estimate that hundreds of Sonoma County children are playing and competing in sports with a potentially life-threatening heart abnormality — a serious gamble we want to eliminate," said Faith. "Throughout the county, in the last five years alone, we've seen a startling number of cardiac emergencies in those 25 and under. We're making this effort to minimize the likelihood of such occurrences."

SRJC head swim coach Jill McCormick remembers the day when an athlete experienced such a cardiac emergency.

"Just a few years ago, one of my student athletes suffered a cardiac arrest during our team practice. Thankfully we were prepared to administer CPR and First Aid and he has made a miraculous and full recovery, but it was definitely an emergency situation. As a coach, a kinesiology educator, a mom, and a former athlete myself, I can say that early detection and prevention is the best way to keep ourselves safe, healthy, and fit, and youth and young adult heart screening can certainly be key to avoiding and preventing future life threatening situations."

In an effort to reduce youth injuries and fatalities due to undetected heart abnormalities, PHCD, in alignment with its HeartSafe Community mission, presents the Feb. 27 event to provide young people and their families information about their heart health and offer equitable access to advanced testing regardless of insurance status.

The free event is open to all Sonoma County residents ages 12-25. Participants will be guided through 60-to-90-minute screenings, in which a team of trained medical volunteers will conduct a health history questionnaire review, an EKG test and – only if deemed necessary based on EKG results – an echocardiogram. The process is entirely non-invasive — conducted without needles or x-rays — and will respect each individual's confidentiality, privacy and modesty. Screening results will provide much greater depth of information than that of a routine physical and will ensure that participants are guided to the appropriate follow-up steps, if indicated.

EVENT PARTICIPATION

Participants must register in advance [through the Via Heart Project website](#). Screenings will take place from 9:00AM-2:30PM at the Petaluma SRJC campus at 680 Sonoma Mountain Parkway. For the safety of volunteer medical staff, all participants must be fully vaccinated with their primary series of COVID-19 vaccines. COVID-19 safety protocol, in line with current state and local mandates, will be in place to ensure participant safety.

This event is being made possible through the generous financial support of Ron Rubin Winery, County of Sonoma, Medtronic, Arrow Benefits Group, Exchange Bank, Providence, Western Health Advantage, Santa Rosa Junior College Petaluma Trust, and the gracious technical support of volunteer medical staff members organized by Via Heart Project. For more event information, access the PHCD event landing page, [here](#).

About Petaluma Health Care District

PHCD is dedicated to improving the health and well-being of the southern Sonoma County community through leadership, advocacy, support, partnerships and education. Its vision is to foster a healthier community and equitable access to comprehensive health and wellness services. PHCD, a public agency managed by the community for the community, has served southern Sonoma County's health and wellness needs for 75 years. [HeartSafe Community \(HSC\)](#) is an initiative led by PHCD to strengthen the community's response to cardiac emergency through CPR/AED Training, strategic AED installation, maintenance and registration, and heart health education. The HSC program is managed by Healthquest CPR, an authorized training center of the American Heart Association. For more information, please visit www.phcd.org.

About Santa Rosa Junior College

SRJC was established in 1918 and has since provided quality education to more than 1.7 million students. SRJC is known for academic excellence, superb faculty and staff, comprehensive student services and beautiful facilities. This treasured community

institution enrolls approximately 37,000 students annually. SRJC is dedicated to removing barriers to students' success and making higher education accessible to all.

#

For Heart Month, PCHD is Offering a Free February Heart Screening Event That Will Help Save Lives

In April 2017, Tiffany Pimentel signed her then 13-year-old son, Jason, up for a heart screening event in Hilmar, CA with [Via Heart Project](#). They almost didn't go because originally, he—an avid athlete—had a baseball tournament that took priority. But the stars aligned (or rather the clouds opened) and the tournament was cancelled because of rain, allowing them to keep his heart screening appointment.

“Mother nature worked in our favor,” says Pimentel. Because at that event, the initial [EKG](#)—which monitors electrical signals in the heart and can determine abnormalities—found that her son has [Wolff-Parkinson-White Syndrome](#). This means that there's an extra nerve in Jason's heart that causes an abnormal heartbeat. This initial diagnosis led them to a variety of follow-up appointments where he could be provided appropriate care.

In earlier screenings, the diagnosis was considered mild risk for sudden death. But after receiving a second opinion after his annual follow-up appointment, the Pimentels began to feel uneasy that Jason's condition could potentially affect his life in the future, particularly as an athlete, despite his being asymptomatic up to that point. During an elective surgery to correct the abnormality, surgeons discovered that Jason's risk level for sudden death was higher than originally thought.

Going to that health screening in 2017 likely saved Jason's life. “Who knows if we would've been a statistic had we not gone through with it,” says Tiffany Pimentel.

And that statistic is frightening. [Sudden Cardiac Arrest \(SCA\)](#) is the top killer of student athletes in the United States and a leading cause of death on school campuses. In a majority of cases, it's a ticking time bomb that no one knows about: it's estimated that one in 300 young people have an undiagnosed heart defect.

These conditions often go undiagnosed because an annual health physical does not include these advanced screenings. This means that within a student body of 1,200 students, there could be four students with an undiagnosed heart condition. That's why health advocates like the Petaluma Health Care District are stepping up to make sure kids in our community don't end up in this statistic. We are partnering with [Via Heart Project](#) for a free screening event on Sunday, February 27th (9am-2:30pm at the Santa Rosa Junior College Petaluma Campus) to provide young people ages 12-25 equitable access to important knowledge about their cardiac health.

This heart screening program is a part of our overall strategy around our [HeartSafe Community Initiative](#) and an important event for Heart Month—a time to bring additional awareness to heart disease and research. We launched the HeartSafe Community program in 2013 because, with [one in four deaths caused by heart disease](#), there is acute urgency to develop community preparedness when it comes to heart health. This preparedness relies on the lay people who

are knowledgeable about signs, symptoms, and interventions to help save someone's life in the middle of a cardiac emergency.

Our program goal is to increase the number of prepared community residents by partnering with schools, businesses, organizations and community members throughout Sonoma and Marin counties to offer [CPR, AED, and first aid](#) training and increase the availability of AEDs throughout our community. When utilized in tandem, CPR and an AED can increase the survival rate during a cardiac emergency by 70%. Through all of this work, we have already saved lives.

Students who have taken our classes in our schools have responded to their parents' cardiac events at home. And now we're also working to focus on the next layer of this important HeartSafe initiative by providing our students crucial access to information about their own cardiac health. We want our community to know that our young people are not free of potential cardiac risks just because they are young. Like Jason Pimentel, Jr., this is a pathway to uncover hidden issues and arm Sonoma County families with information on what can be done to avoid preventable illness and death.

To ensure you and your child have that knowledge, join us on **February 27th at the Santa Rosa Junior College, Petaluma Campus** (680 Sonoma Mtn. Parkway, Petaluma, CA 94954) for this **FREE Youth and Young Adult Heart Screening Event** with Via Heart Project. **Advance registration is required and is available county-wide—**[you can register for an appointment slot here](#) (b/w 9:00am-2:30pm). Learn more about the details and [what to expect here](#). We're able to offer this screening thanks to generous donations from our lead sponsor, Ron Reuben Winery, as well as County of Sonoma, Medtronic, Arrow Benefits Group, Exchange Bank, Providence, Western Health Advantage and Santa Rosa Junior College Petaluma Trust.

We look forward to seeing you there so that we can work together to save more lives as a HeartSafe Community.

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Fear, uncertainty follow abrupt closure of Healdsburg skilled nursing facility



SLIDE 1 OF 4

Barry Bunte, right, greets his 94-year-old mother, Beverly Bunte, as she arrives at the Apple Valley Post-Acute Rehab and skilled nursing facility in Sebastopol on Tuesday, Feb. 8, 2022. Barry Bunte had to relocate his mother from Healdsburg Senior Living, where she had lived for five years, with little notice from business owner Pacifica. (Christopher Chung/ The Press Democrat)

PHIL BARBER

THE PRESS DEMOCRAT
 February 8, 2022, 5:54PM



Karen Tovani has done about everything she can think of to find a new home for her life partner, Peter Bantowsky.

Bantowsky has been living at Healdsburg Senior Living Community for a little over two years.

But federal investigators have accused the facility's owner, Pacifica Senior Living, of infractions like chilly room temperatures, issues with cleanliness, broken equipment, rough handling by at least one employee — and other problems more systemic.

Pacifica cites factors outside of its control, but that's of little concern to Tovani. Just three days ahead of the impending closure, she saw her options narrowing.

"I'm actually feeling sick to my stomach," said Tovani, 75. "I have two jobs. I'm supposed to be at one of them Friday morning. But I'm thinking I may have to cancel. I may have to lie in front of a bus."

On Dec. 29, family members who had loved ones living in the 38-bed skilled nursing unit at the facility were told they had until Jan. 15 to find new accommodations. Most of them were able to do so. But five people, including Bantowsky, remain in the skilled nursing wing of the home. The state says they will be moved Friday. No one knows where, though officials have mentioned sites as far away as Sacramento and Oakland.

"To me, this is a question of the state failing its most vulnerable constituents, the ones they should be taking most care of," said Bantowsky's daughter, Jeanne Peregrine. "How can we call ourselves civilized when we treat our elderly this way? We can't."

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'It's just gotten out of hand': Would unlimited hunting help to control invasive pig population?



Sebastopol racing prodigy's win at adventure event fills gap in resume



"I think it's been completely botched," said Tony Chicotel, a lawyer for the nonprofit California Advocates for Nursing Home Reform. "I just feel terrible for the residents. The feds decertified (Healdsburg Senior Living). It seems pretty irresponsible to not take some sort of ownership in what's happening."

Circumstances weren't always so dire at the long-term care home near Highway 101 in Healdsburg, which offered skilled nursing, assisted living and memory care.

"It was a gem in our community," said Marie Butler.

Butler's husband, Richard Pellegrini, entered the memory care unit in 2012, and was transferred to the skilled nursing section a few years later. They enjoyed the amenities. The home sponsored quilt shows, casino nights and holiday boutiques.

"I have nothing to say about the prior owners or administrators, at all," Butler said. "They were always available."

New ownership

According to Butler and others, it began to unravel under the management of Pacifica Senior Living, which bought the property four years ago. Pacifica is one of the largest elder care providers in the country, with 88 “communities,” including 46 in California.

Most of the Healdsburg senior staff stayed after the transition, and morale remained high. But the environment started to deteriorate rapidly about a year ago, several people told The Press Democrat.

Healdsburg Senior Living's shortcomings are documented in 33 allegations substantiated by the state Community Care Licensing Division in 2021.

Even more damning is a 180-page report issued by the federal Centers for Medicare & Medicaid Services (CMS) on Jan. 5. Chicotel, who has worked for the senior advocacy nonprofit for 15 years, called it “an investigative report like I’ve never read before.”

CMS noted two instances of what it calls “immediate jeopardy” to residents found by investigators during visits on Nov. 18-19. One instance involved a male resident whom staff failed to deter from a pattern of inappropriate sexual behavior that, investigators said, could have left female residents unsafe.

The second instance was under the heading of Administration, or leadership.

"I've seen reports where day-to-day conditions were worse," Chicotel said. "I've seen the worst there is. But I've never seen such a complete leadership vacuum, almost to the point where no one was in charge. There's no way the day-to-day quality could not have been affected by the vacuum in leadership."

According to family members, Pacifica started purging employees about a year ago.

"It was like a domino effect," Butler said. "Staff either quit, or were pressured to leave or were fired. Until there was basically no one in charge."

Perhaps most disturbing, the facility began operating without a consistent director of nursing, a situation that Crista Barnett Nelson, executive director of Senior Advocacy Services for Sonoma County, likened to “not having a pilot for your airplane.”

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Victory House at E... | Santa Rosa, CA

FRI 11 **Napa Lighted Art Festival**
Downtown Napa | Napa, CA

FRI 11 **Art Exhibit: That's Amore**
Upstairs Art Galle... | Healdsburg, CA

FRI **Flight Path: Art by Sharon Eisley | ...**
11 Sebastopol Gallery | Sebastopol, CA

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The US States Americans Are Fleeing (And The Places... [🔗](#)

By Money Pop

Nursing directors started to come and go quickly, with gaps between stints, Butler said. And with the disruption in oversight came a general decline in medical care. Many skilled nursing residents had no up-to-date care plans. Barnett Nelson said several went months without seeing a doctor.

Pacifica Senior Living acknowledges it had staffing issues in Healdsburg, but says much of the difficulty was beyond its control.

“Due to the tremendous burden and stress of running a health care facility during a pandemic, we lost our long time Executive Director and several other tenured department heads,” the company said in a statement. “The leadership team that had been so successful for so many years simply could not find and hire enough qualified staff in the local market to operate the building.”

Pacifica says it employed temporary staff, ran job fairs and hired consultants to plug the holes in its workforce, to no avail.

Finally, on Dec. 13, CMS fined Pacifica more than \$325,000 and said it would no longer pay for skilled nursing care at Healdsburg Senior Living with Medicare/Medicaid funds, effectively closing the unit. The state brought in Sycamore Healthcare to manage the unit through the end stage.

This type of action is a rarity, insiders say.

Closures are rare

There are generally fewer than five nursing home closures each year in California, Chicotel noted, and the majority of those are voluntarily exits from unprofitable sites. Federal decertification, he said, is even more rare.

Barnett Nelson said this is only the second instance she has seen in 10 years of elder advocacy in Sonoma County. The first was four years ago, when CMS terminated an agreement with Fircrest Convalescent Hospital in Sebastopol.

It incenses her, and others, to know that Pacifica is thriving, despite its mishandling of the Healdsburg facility. In fact, the company has plans to open a new elder care facility in Santa Rosa, off Airway Drive.

“They seem to put building infrastructure (new Memory Care facilities) and renovating the premises over resident care,” said an email from Burton Barnes, who has been in assisted living at Healdsburg Senior Living with his wife, Patricia, for nearly a decade. “They really look to the bottom line first.”

Leslie Quintanar, regional director of operations for Pacifica, said Santa Rosa’s larger population will make it easier to hire workers.

“Most of our staff can’t afford to live in Healdsburg,” Quintanar said. “Santa Rosa is a little more accessible. Also, this was complicated by the fact that this was skilled nursing. Santa Rosa will be just assisted living and memory care. And that’s in our wheelhouse.”

When relatives of Healdsburg Senior Living residents found out the government was getting involved, they believed the California Department of Public Health would restore conditions to pre-Pacifica levels.

But on Dec. 29, they learned through a flyer posted in the lobby that they had 17 days to find alternate arrangements. They would get no help from the state in doing so. And most have had trouble finding new homes, even as the initial deadline passed.

That, Barnett Nelson said, is because most of the skilled nursing residents at Healdsburg Senior Living were Medi-Cal patients, and facilities don’t receive as much money from Medi-Cal as they do from residents who pay independently or are funded by Medicare. So managers tell authorities their beds are full.

“We’re down to five people left at the site. We have 16 facilities (that take skilled nursing patients on Medi-Cal) in Sonoma County,” Barnett Nelson said. “You’re telling me we can’t find five beds in this county?”

Soaring anxiety

With no clear destination for their relatives, the Healdsburg Senior Living families have seen their anxiety soar over the past month.

Sycamore first offered Barry Bunte space in Lake County or Oakland for his mother, Beverly, who is 94.

RELATED STORIES

Medi-Cal recipient, 101, evicted from Santa Rosa assisted living facility for being unable to pay

"We see my Mom at least 4 days a week," Bunte wrote in an email last Friday. "If they move her there, we won't be able to make that happen. This would increase the isolation of our loved ones and I know this would kill my Mom, eventually."

Bunte said he has located a bed for Beverly, at Apple Valley Post-Acute Rehab in Sebastopol. As of Tuesday, Tovani still hadn't found one for Bantowsky.

"They mentioned East Oakland at one point," she said. "I'm 75. I don't drive at night. I'd probably kill someone driving home. I can't be going to Sacramento or Oakland or Vacaville. I'd never see him again."

Remembering real people

She and other worried relatives want everyone to remember these seniors are real people, with life histories, loves and accomplishments.

Klaus-Peter Bantowsky, for example, was born in Hamburg, Germany, in 1938. His family was anti-Nazi, Tovani said, but the Allied bomb that fell on his house in 1943 didn't know that. Homeless, his parents hustled the kids into a truck bedded with straw, for a long, uncertain drive to southern Germany. Where will we sleep? Bantowsky remembered asking his mother.

It became a trigger point, Tovani said. Anytime Bantowsky had to change rooms at Healdsburg Senior Living, he'd become agitated.

"The crazy thing is, on Friday it's going to be, 'Where is he gonna sleep?'" Tovani said. "He's 83 years old, and now he's asking the same question he asked when he was 4."

You can reach Phil Barber at 707-521-5263 or phil.barber@pressdemocrat.com. On Twitter @Skinny_Post.

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