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One Agency's Path to Making a Difference

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## ONE AGENCY'S PATH TO **MAKING A DIFFERENCE**

A historical overview of Desert Healthcare District, from building and operating Desert Hospital in Palm Springs to becoming the Coachella Valley's largest and most influential incubator and funder of health and wellness initiatives.

# PREFACE



As public health professionals, we spend countless hours looking for ways to support research to guide our work, sustain health interventions, nurture partnerships, and correct our course as conditions evolve. A healthcare district offers an opportunity to do this — sustainably. However, we must broaden our vision of what a healthcare district is to effectively adapt and respond to the health needs of our community. *One Agency's Path*

*to Making a Difference* documents Desert Healthcare District's efforts to meet these evolving challenges over the past seven decades.

Desert Healthcare District was founded in 1948 with the intention of creating Desert Hospital, the first public hospital in Palm Springs. Much has changed since then. Post-war prosperity fueled the quadrupling of the District's population from 7,000 to over 30,000 in just 25 years. New townships were established within the District's service area. As healthcare demands increased, the District delivered. More hospital beds and new services were made available to the growing population. But new challenges lay ahead.

During this growth period, the conditions in which healthcare is delivered and our collective notion of health also changed. In 1945 the leading causes of death in the U.S were pneumonia or influenza, tuberculosis and gastrointestinal infections, all communicable diseases that required hospital-based healthcare. The use of antibiotics, vaccines, and diagnostic radiology was in its infancy. In the 21st century, these diseases are largely preventable thanks to the availability of clean water, sanitation, vaccines, and effective antibiotic treatments. Life expectancy has grown, modern diagnostic radiology and clinical laboratories are widely used, and non-communicable conditions like heart disease and cancer have become the leading causes of death. Healthcare is provided mostly ambulatorily — outside of a hospital building.

In the 1980s, the District's response to the AIDS epidemic, including its support for the Desert AIDS Project, opened its eyes to the potential role the District could play in a changing healthcare environment by providing financial support to other organizations that could effectively meet new healthcare demands.

Delivering healthcare as a nonprofit entity in an ever-changing regulatory environment proved to be daunting, however. By the late 1990s, the District was overwhelmed by debt and decided it was in the better interest of the community to lease Desert Hospital to a private operator. After leasing the hospital to Tenet Healthcare in 1997, the District began to realize its potential as a public healthcare foundation.

The District has since demonstrated this parallel pathway to fulfilling the healthcare needs of its residents in a new era of prevention, primary care, ambulatory delivery systems and expanded geography.

Coachella Valley voters overwhelmingly approved expanding the District in November 2018 to include the eastern half of the valley all the way to the Salton Sea. Overnight, the District's population more than doubled from 200,000 to 430,000. The expansion has added new responsibilities, more lives, different demands, but no new or additional funding, the lack of which remains one of the greatest challenges now facing the District.

To better understand the needs of the newly expanded District, a community health needs assessment was commissioned. The needs assessment implemented a new community-driven methodology to capture the voices of the residents the District serves. As the first group of community members was being interviewed, COVID-19, a once-in-a-lifetime pandemic, knocked on our doors. It had been less than a year since I had occupied the CEO position. We responded with urgency.

Working with and funding many collaborators, including Federally Qualified Health Centers as well as community- and faith-based organizations, we prioritized an equitable distribution of COVID-19 tests and vaccines. We augmented the supply of personal protective equipment (PPE) and other life-saving resources, including food, cash, and rental assistance. We were the first in the nation to prioritize

vaccinating farm laborers as essential workers, protecting those who are so often forgotten.

*One Agency's Path to Making a Difference* documents these and other Desert Healthcare District initiatives to meet the Coachella Valley's continually changing health needs. I am a firm believer that the last 70 years of addressing our regional healthcare needs had prepared us, collectively, to respond effectively to support our community during the COVID-19 pandemic.

The District will continue to innovate to identify collaborative solutions to address our evolving healthcare needs. Our latest initiatives include a new strategic plan, one of the first steps in adapting to new notions of health, one that not only recognizes healthcare as the prevention and treatment of disease, but one that defines health as a state of complete physical, mental and social wellbeing.

— Conrado Bárzaga, MD  
Desert Healthcare District and Foundation CEO

# ACKNOWLEDGMENTS

This book was made possible by the board of directors of Desert Healthcare District after a 2017 survey of Coachella Valley community members found that most local residents have “extremely limited awareness” of what the District does or what it has achieved in its quest to improve the health and wellness of people living within its service area over the past seven decades.

I am grateful to District board members Karen Borja, Leticia de Lara, Mark Matthews, Evett PerezGil, Carole Rogers, Arthur S. Shorr, Dr. Les Zendle and District CEO Conrado Bázquez for giving me the opportunity to research and write the first book documenting the District’s history. While I conducted extensive database research using *The Desert Sun*, *The Press-Enterprise*, the *Los Angeles Times* and other sources, I personally interviewed over 80 people to gather the information necessary to document the history of the District and its impact on people’s lives.

I am grateful to current and former District board members, CEOs and staff members who helped guide my research efforts, fill in informational gaps and explain the factors influencing District decisions that were either not previously reported or not fully explained in press reports.

I owe special thanks to former longtime District board members, including Dr. Glen Grayman, Kay Hazen, Richard Grundy, Dr. Sid Rubenstein, Mark Matthews and Ric Supple as well as former District CEOs Wayne Soucy and Kathy Greco for their assistance along with Chief Program Officer Donna Craig, Will Dean, the District and Foundation’s director of communications and marketing, Desert Hospital Archivist Barbara Eves, and her elder cousin, Vera Prieto.

Bruce Fessier, a desert historian who spent 40 years as a reporter, columnist and entertainment editor for *The Desert Sun*, was exceedingly helpful in providing insights and first-hand accounts of Frank Sinatra’s involvement in numerous fundraising efforts to support Desert Hospital improvements and expansions.

I am also grateful to the current and former leaders and staff members of many nonprofit organizations and institutions across the Coachella Valley for their help in explaining how District and Foundation grants make a difference in people’s lives.

Many recipients of assistance from local nonprofits also shared their experiences, which helped me understand the impact of District grants on their lives. I also wish to thank several government officials for their insights, including Congressman Dr. Raul Ruiz and his assistant, Hernan Quintas; State Assemblyman Eduardo Garcia; Riverside County Supervisor Manuel Perez; Palm Desert Mayor Kathleen Kelly; Erica Felci of the Coachella Valley Association of Governments (CVAG); as well as Aurora Tenorio Wilson, a former CVAG official and widow of Riverside County Supervisor Roy Wilson. Former Cathedral City Manager Don Bradley and former Palm Springs Fire Chief Bary Freet also provided helpful insights to guide my research.

While I have sourced my historical information and quotes from news reports, public documents and interviews as accurately as possible, any errors of fact or interpretation are my own.

— Jeff Crider

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# INTRODUCTION

When Riverside County declared a public health emergency on March 8, 2020 after a patient in Rancho Mirage and another county resident tested positive for COVID-19, Linda Barrack knew the expanding global pandemic would have devastating consequences in the Coachella Valley.

"My first thought was, 'How am I going to keep our people safe? How are we going to handle the massive influx of homeless people?'" said Barrack, the CEO of Martha's Village & Kitchen in Indio who has worked for various nonprofit organizations for 35 years.

But Barrack knew who to contact for help.

"One of the first calls I made was to Desert Healthcare District," she said. "I knew the staff at Desert Healthcare District would know our predicament and that they would be able to help."

Indeed, Desert Healthcare District is the only public agency in the Coachella Valley that is dedicated exclusively to identifying local healthcare deficiencies within its service area and to providing grant funding to nonprofit health and wellness organizations that are best equipped to address these needs.

As a result, the District's 10-member staff and its seven-member board of directors not only have detailed knowledge of local health and wellness issues, but they understand the unique challenges facing many of the nonprofit organizations that collectively comprise the Coachella Valley's health and wellness safety net. District staff members also frequently check in with grant recipients to see how things are going with

their health and wellness work. This ongoing communication enables District staff to not only have their hands on the pulse of the nonprofit organizations that receive District grants, but an awareness of emerging health and wellness issues across the Coachella Valley.

The District complements the information it receives from the recipients of its grant funding with periodic community health assessments and surveys conducted by outside consultants, researchers from the University of California, Riverside, Loma Linda University and other institutions.

The District regularly funds studies not only to assess the Coachella Valley's evolving health and wellness needs, but to pinpoint the specific needs of impoverished communities within its service area, with Cathedral City's Dream Homes subdivision and Palm Springs' Desert Highland Gateway Estates community being recent cases in point. The District, in fact, invests more money in locally-focused health and wellness research than any other public agency in the Coachella Valley.

It was the District that came up with the idea of creating Health Assessment and Research for Communities (HARC). The Palm Desert-based nonprofit gathers detailed local statistics on health and wellness that nonprofit organizations currently use to substantiate their grant requests not only from the District, but from other funding sources, both inside and outside the valley. As a result, the District's investments in



HARC have had a multiplier effect, enabling local nonprofits to secure millions of dollars in additional grant funding for health and wellness services in the Coachella Valley.

The District's many investments in research not only enable it to function like a health and wellness think tank, but one that also has the ability to develop collaborative approaches with other agencies to jointly fund a variety of initiatives to improve health and wellness across the valley.

But while the District is well known in the nonprofit community, few members of the public know anything about the District's life-saving investments in multi-year screening programs for breast cancer and HIV, its critical investments to expand the valley's healthcare infrastructure in underserved communities or its ongoing support for nonprofit organizations targeting hunger and homelessness. Even its successful efforts to expand the Coachella Valley's healthcare workforce are largely unknown by the public.

A 2017 survey of Coachella Valley community leaders and District partners by Pacific Health Consulting Group concluded that most local residents have "extremely limited awareness" of what the District does or what it has achieved. District board members concurred with the survey's findings, hence the need for this book, the first of its kind to document the District's most significant efforts to improve the health and wellness of people living within its service area over the past seven decades.

The District's history stretches all the way back to 1948, when its primary focus was to build and operate Desert

Hospital, which functioned as a public hospital until 1997, when the District leased the facility to Tenet Healthcare.

The District subsequently changed its name from Desert Hospital District to Desert Healthcare District and became a grant-giving agency that charted a new course, increasingly directed by independent research to improve the health and wellness of residents living within the District's service area.

In many ways, this is really two books in one.

Part One documents the emergence of Palm Springs as a health and wellness destination, the rising healthcare needs of the city's growing population, and the District's construction and operation of Desert Hospital until declining government and private healthcare insurance reimbursements and rising debt forced the District to lease the facility to Tenet Healthcare.

Part Two covers the District's history as a public agency that has increasingly operated as a health- and wellness-focused think tank, incubating new ideas and strategies to improve public health in collaboration with cities, academic institutions and nonprofit organizations, while providing nearly \$80 million in grants to local nonprofits that collectively comprise the valley's health and wellness safety net.

The Epilogue provides a historical overview of Desert Healthcare District's path to making a difference, the recent doubling of the District's service area to include the entire Coachella Valley, and the challenges the District faces as it works to improve the health and wellness of valley residents from Palm Springs and Desert Hot Springs to the northern shores of the Salton Sea.



**DESERT HEALTHCARE**  
DISTRICT & FOUNDATION

# DESERT ONE

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## The History of Desert Hospital District

The following chapters document the emergence of Palm Springs as a health and wellness destination and the rising healthcare needs of the city's growing population, which eventually led to the creation of Desert Hospital District in 1948 and to the construction of Desert Hospital, which opened in 1951.

The growth of Palm Springs as a celebrity retreat and winter and retirement home destination will also be discussed, along with the successive expansions of Desert Hospital that were needed to address the ever-increasing healthcare needs of people living inside the District's service area.

We'll examine the important fundraising roles of celebrities, who brought national media attention to the Coachella Valley while helping to pay for many hospital improvements and expansions. Desert Hospital's many healthcare "firsts" will also be discussed along with the increasing financial challenges that resulted from declining government and private insurance reimbursements, the rise of for-profit hospital chains, health maintenance organizations (HMOs) and other competitive pressures, which eventually prompted the District to lease the hospital to Tenet Healthcare in 1997.

## A Desert Cure

Decades before movie stars brought national attention to Palm Springs as a winter playground for the rich and famous, people came to the Coachella Valley simply to improve their health and that of their family members.

The Cahuilla Indians, of course, had long known about the curative powers of the local hot mineral springs, which they had used for bathing and healing for thousands of years.

Historical records indicate that the Cahuilla Indians originally called the Palm Springs area *Sec-he*, which means boiling water. Spanish explorers later used the term *Agua Caliente* or hot springs to describe the area. The name “Palm Springs” reflects the blending of a reference to the native *Washingtonia filifera* fan palms, which thrive in canyons and washes throughout the desert, and the original hot springs, which is located in downtown Palm Springs.<sup>1</sup>

John Guthrie McCallum was the first white man to make Palm Springs his permanent home. A famous San Francisco-based editor, attorney, politician and agent for the Bureau of Indian Affairs, McCallum arrived in Palm Springs in 1884 at the age of 57 after hearing about the remarkably therapeutic

qualities of the local hot springs from his friend, William Pablo, an interpreter and guide for the Agua Caliente Band of Cahuilla Indians.<sup>2</sup>

McCallum's son, Johnny, suffered from tuberculosis and he believed the healing waters of the hot springs would improve Johnny's health, along with the dry desert climate.

In 1885, McCallum began to acquire land in the Palm Springs area and settled his family there. A year later, he encouraged another friend, Dr. Welwood Murray, a Banning-based horticulturalist, to build a hotel for the area, which McCallum had named Palm Valley.

McCallum was the first white settler to develop the land that would later become the city of Palm Springs, capitalizing on its health benefits and recognizing its potential for agriculture, which he believed could be sustained by bringing in water from the neighboring Whitewater River. But to develop the area, McCallum needed a hotel where potential investors could stay.

Murray immediately latched onto the idea, seeing the potential to market the Palm Springs area not only to people seeking health benefits from its low desert climate and curative waters, but as a winter destination. In 1886, Murray



The Palm Springs Hotel.  
Courtesy of the Palm Springs Historical Society.

opened the Palm Springs Hotel and Hot Springs, a one-story ranch-style hotel that included a sanatorium for people recovering from respiratory illnesses.

But even though McCallum's son, Johnny, ultimately succumbed to tuberculosis in 1891 at the age of 26, by that time, growing awareness of the curative powers of the local hot springs and the healthy desert climate began to draw increasing numbers of tourists and people seeking to improve their health into the Palm Springs area.

Murray himself regularly purchased advertisements in the *Los Angeles Times*, marketing the Palm Springs Hotel and Hot Springs as having “the finest winter climate and mineral hot springs in the United States.”<sup>3</sup>

His guests included famed naturalist John Muir, who brought his youngest daughter, Helen, to Palm Springs in 1905 because she suffered from a severe respiratory condition, according to Renee Brown of the Palm Springs Historical Society, who documented Muir's visit in a July 14, 2016 article for *Palm Springs Life* magazine.

Palm Springs gained additional fame in a 1908 article in *Sunset* magazine titled “A Desert Cure,” which was written by a writer from Scotland who noted how spending extended periods of time in Palm Springs, drinking its natural spring

waters and soaking up the desert sun had greatly reduced his symptoms of Bright's disease, a chronic kidney infection that is frequently accompanied by high blood pressure and swelling of bodily tissues, especially in the arms and legs.

“Altogether on this occasion I had spent about seven continuous months at Palm Springs, and when at last the intense heat of June drove us ‘outside,’ as desert dwellers say, I was a wonderfully fit man,” he wrote, adding, “For the first time in two years, I was wearing my proper boots — the old size I had used prior to my illness. The edema was almost gone, and my flesh had resumed a healthy elasticity. I had no arterial tension, and the feeling of uremia was only intermittent. The morning nausea had quite vanished.”

**The *Sunset* writer described the desert environment as “a general curative agent for every class of disease” while improving one's state of mind. “There,” he wrote, “not merely are the fresh pure air and the continuous sunshine stimulating alike to invalid body and jaded mind, but there are mental effects that aid toward recuperation.”**

Readers of the 1908 *Sunset* article included another famous Palm Springs pioneer named Nellie Coffman, who visited the desert oasis after suffering from periodic respiratory



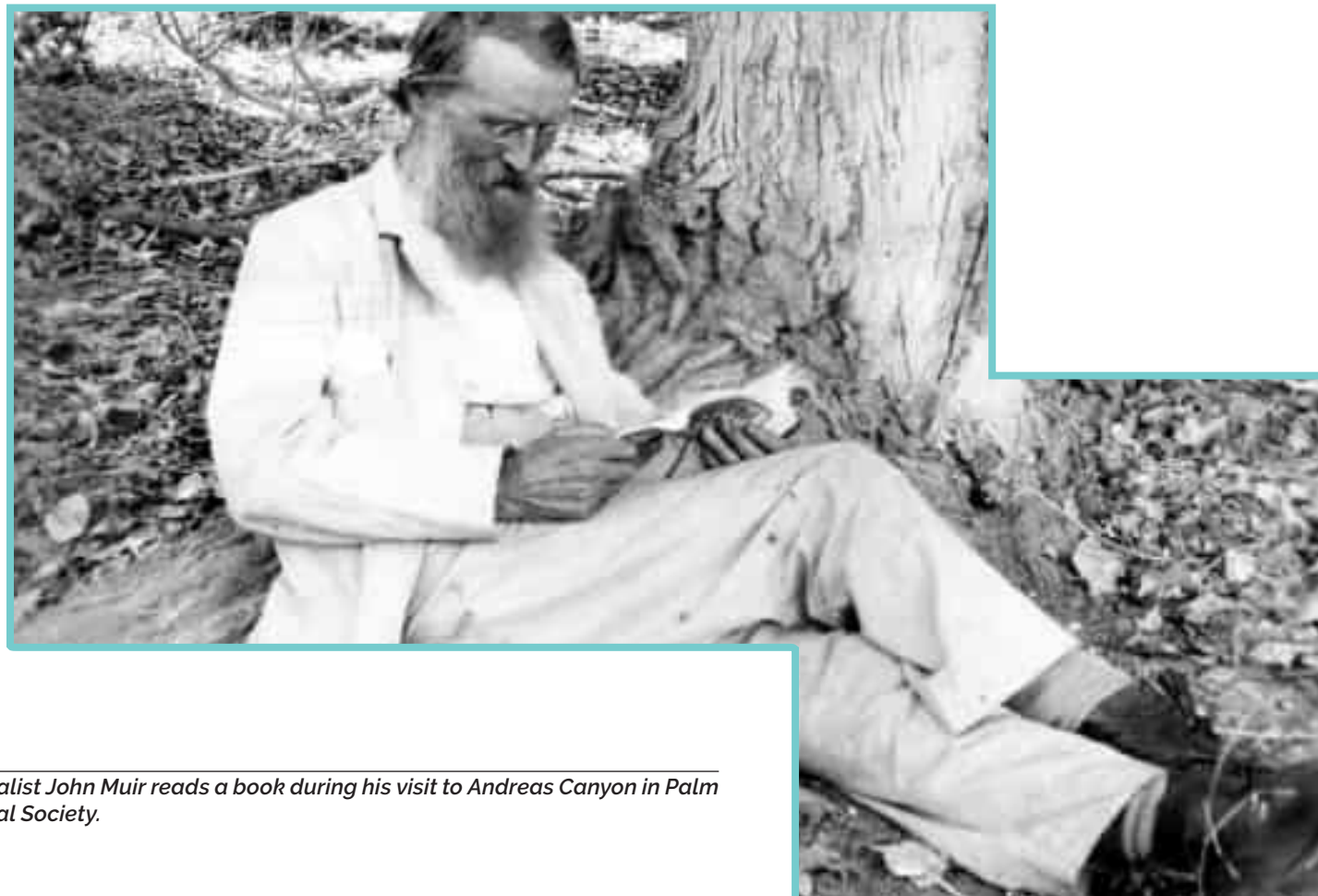
problems and a persistent cough. Lawrence Culver describes Coffman's first visit to Palm Springs in his 2010 book, *The Frontiers of Leisure*.

"In December of 1908, after another severe cold, Coffman decided to attempt a desert cure,"

Culver writes. "She and her eldest son, George, took a train to Garnet Station, several miles north of Palm Springs, and then traveled by wagon southward. Caught in a fierce sandstorm, both feared that they would be blown off course and perish in the desert sands. Eventually they found their way to the small settlement and took up accommodations in Murray's Palm Springs Hotel, which Nellie found wretched. The next day, however, the storm cleared, and Coffman was entranced by the sparkling air and desert vistas. Here was a place she might be finally rid of her health problems."

Coffman's husband, Dr. Harry Coffman, was a Santa Monica-based physician, and together they came up with the idea of opening their own boarding house and sanatorium in 1909, which later gained fame as The Desert Inn.

Lee Shippey describes Coffman's humble beginnings in a January 21, 1930 article for the *Los Angeles Times*: "**Twenty-one years ago Mrs. Coffman started a little sanatorium there, doing the cooking herself, and invited people who could not live in cities or damp climates to come and find health. She had only a few guests, but all were people of social or business prominence. And when their friends went there to visit them they, too, discovered the hidden beauties of Palm Springs and were fascinated by the strange lure of the desert.**"



**Photo Top:** John Guthrie McCallum. **Bottom:** Famed naturalist John Muir reads a book during his visit to Andreas Canyon in Palm Springs, circa 1905. Courtesy of the Palm Springs Historical Society.

Coffman's health did improve, and one of her guests was Prescott T. Stevens, a Hollywood investor who came to the desert because of his wife's respiratory problems. "Palm Springs and Mrs. Coffman's care made her well again and Stevens showed his appreciation by financing Mrs. Coffman's efforts to establish a real hotel," Shippey wrote.

Stevens' investments didn't stop there. He also financed one of Palm Springs' most famous luxury hotels, El Mirador Hotel, which opened its doors in 1928. El Mirador Hotel and its

adjacent grounds would eventually become the site of Desert Hospital, now known as Desert Regional Medical Center, and the future headquarters of Desert Healthcare District.



*Photo: Visitors gather under the Ramada at Palm Springs Hotel with Welwood Murray, second from left, circa 1892. Courtesy of the Palm Springs Historical Society.*

## El Mirador Hotel

More than 500 people attended the grand opening of El Mirador Hotel, which officially opened its doors January 1, 1928 after a New Year's Eve celebration.

California Senator Charles B. Hamilton, who established the Hamilton Hotel network in California and Arizona, called El Mirador “a magnificent desert hotel in a magnificent desert setting,” according to a January 2, 1928 report in the *Los Angeles Times*.

A *Times* reporter said grand opening guests were amazed at the architectural splendor of both the hotel and its gardens.

“On every side were heard exclamations of surprise on the novel and unique way in which the hotel had been carried out,” the *Times* wrote. “The attractive main lobby is a combination of the Indian and Spanish motif with pale green jade walls, driftwood beams in the ceiling, and carpeted with hand-tufted Spanish rugs. Arranged around the spacious rooms is hand carved period Spanish furniture. The handsome main dining room, which will accommodate three hundred guests, came in for its share of praise, especially on its turquoise blue panel ceiling.”

The *Times* noted that the 200-room hotel was built in a matter of weeks and included Palm Springs' first Olympic-size swimming pool as well as a desert garden that contained “virtually every species of desert plant known to horticulturalists.”

The exterior focal point of the hotel, however, was its 108-foot tower, which instantly became a Palm Springs landmark that also embodied the essence of the hotel's identity, El Mirador, which means watchtower in Spanish.

“At the top of this tower is hung an ancient bronze bell imported to this country from the Church of Our Lady of Amalfi, Italy,” the *Times* wrote, adding that the bell would be rung for the first time on the hotel's opening day.

But while El Mirador's first guests marveled at the architectural splendor of the hotel and of its surrounding grounds, the hotel's future fame — and that of Palm Springs itself — was launched by its enterprising publicists who photographed celebrities in shorts as they enjoyed the hotel grounds.

El Mirador's first publicist was Tony Burke, an Englishman who served in the British Army in North Africa during World War I. “He decided to ask young, attractive starlets to wear shorts and photograph them on El Mirador



Hotel's beautiful grounds," said Barbara Eves, a historian and archivist for Desert Regional Medical Center.

Eves said the new trend of women wearing shorts at El Mirador Hotel began around 1929. "The first shorts were slacks that were cut off mid-thigh, loose fitting and white in color," she said, adding, "The new attire photographs caused

considerable shock around the world, making the hotel an instantly famous and talked about location."

Unfortunately, the Great Depression began with the stock market crash of October 1929, only 22 months after El Mirador Hotel opened its doors. Prescott T. Stevens, the Hollywood investor, was eventually forced to sell the hotel to his creditors.



*Photo: A postcard of El Mirador Hotel in 1929. Courtesy of the Palm Springs Historical Society.*



In fact, El Mirador's guest list reads like a "Who's Who" of Hollywood, with Charlie Chaplin, W.C. Fields, Clark Gable, Gary Cooper and Marlene Dietrich being among the extensive list of El Mirador's guests. These celebrity visits were repeatedly chronicled in photographs taken by Frank Bogert, El Mirador Hotel's most famous publicist and the future mayor of Palm Springs, who shared his photos with newspapers across the country.



Hollywood celebrities continued to visit Palm Springs, however, with El Mirador Hotel being one of their prime destinations, despite the economic downturn.

Dr. Albert Einstein first visited the hotel in 1933 and became a repeat guest with his wife, Elsa. Tony Burke's photos of Einstein's visit gave El Mirador Hotel and Palm Springs worldwide attention.

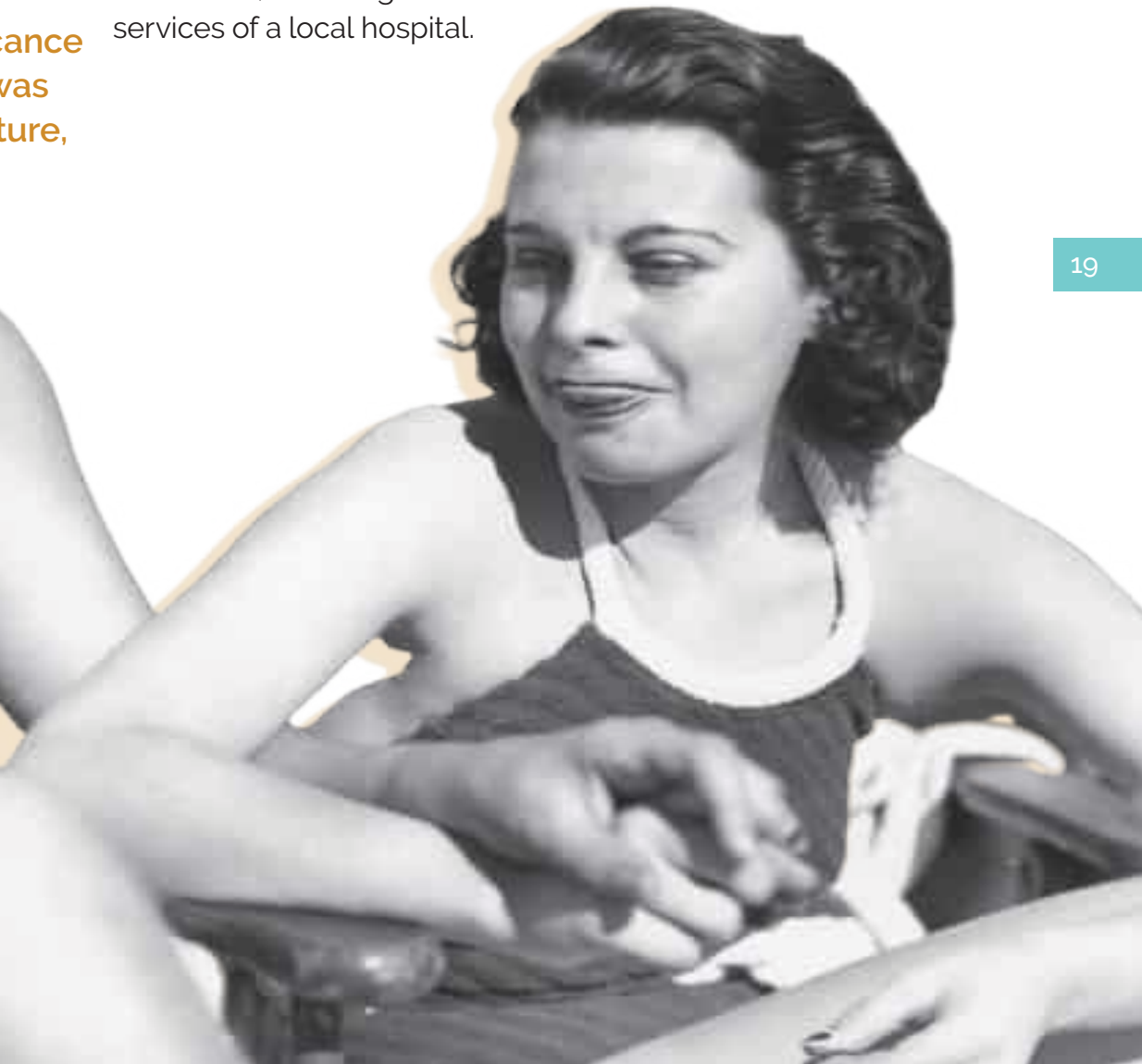


Ultimately, as historian Lawrence Culver notes in *The Frontiers of Leisure*, El Mirador Hotel's success at attracting celebrities would lead to the growth of Palm Springs itself.

**“The significance of El Mirador was not its architecture, but rather its**

**cliente,” Culver writes. “It was the first hotel in Palm Springs to cater expressly to Hollywood, becoming a favorite haunt of numerous celebrities. Many hotel guests later bought homes in the area around El Mirador, earning the nascent neighborhood the name ‘The Movie Colony.’ ”**

But as Palms Springs grew, so, too, did its need for healthcare, including the services of a local hospital.





*Photos: El Mirador Hotel was a favorite retreat for Hollywood's most famous celebrities including, clockwise from top, actor and comedian Groucho Marx, and Harry Cohn, president of Columbia Pictures, circa. 1931; Cary Grant, the British-American actor, and Townsend Netcher, husband of silent screen star Constance Talmadge and heir of the Boston Store, one of Chicago's largest department stores; and Olivia de Havilland, circa 1930, the British-American actress who would later have a starring role in "Gone with the Wind." Courtesy of the Palm Springs Historical Society.*



*Photos: El Mirador Hotel also drew some of the most famous people in business, publishing, science and the arts. The photos above, clockwise from the top, feature Dr. Albert Einstein and his wife, Elsa; and a group photo of famous guests, including, from left to right, silent film star Charles Farrell, Johnny Mack Brown, a college football player and silent film star, William Randolph Hearst, Jr., who by then had developed the largest chain of newspapers in the nation, actor Ralph Bellamy, and Townsend Netcher, husband of silent screen star Constance Talmadge. The photo on the left features Ansel Adams, whose iconic black and white photographs helped promote the national parks. Adams is visiting with Axel Linus, a Swedish painter who became famous for his Western landscapes. Courtesy of the Palm Springs Historical Society.*

## Early Healthcare in Palm Springs

Palm Springs' allure as a vacation destination and a place to naturally improve or reclaim one's health increased in the 1920s and 30s as new hotel accommodations were built.

The *Los Angeles Times* documented the dramatic growth in a November 29, 1925 report.

"Five years ago Palm Springs had a population during the winter months of perhaps 400 souls; now more than fifteen hundred persons spend the cold months there," the *Times* wrote, adding, "During (these) five years more than a million dollars a year has been spent on homes and the general improvements of the surroundings. A dusty, dirty desert road is now a spick and span highway of clean concrete. Trees and shrubs and the greenest lawns make up this oasis, which is made to blossom since life-giving water has been coaxed from the San Jacinto Mountains and brought to the low lands in greatest abundance."


The *Times* also highlighted the natural beauty of Palm Springs' neighboring Indian Canyons, with their majestic 500-year-old Washingtonia fan palms, as well as the 60-foot waterfall in Tahquitz Canyon. But as the numbers of tourists and winter residents increased, so, too, did the demand for healthcare services in Palm Springs.

Dr. Henry S. Reid is cited in *Desert Sun* reports from the 1920s, 30s and 40s as having built the first "hospital" in Palm Springs, although it was a private facility that was only open during the winter season.

Dr. Reid completed his post graduate studies at the University of Vienna, Austria and was an instructor in the University of Colorado's department of surgery in Denver before coming to Palm Springs. He initially established a medical practice at The Desert Inn in the fall of 1927, while El Mirador Hotel was under construction, according to a March 8, 1940 report in *The Desert Sun*.

"The following season, having caught the vision of what this resort someday was to become, Dr. Reid purchased about half an acre of land on North Palm Canyon Drive in the Palm Springs Estates, and work was started on Reid Hospital. The first wing of the present modern plant was completed in the season of 1928-29. So much confidence and faith did Dr. Reid have in the future of Palm Springs that he fearlessly shouldered the huge mortgage, but today that big debt has been entirely retired," *The Desert Sun* wrote.

Dr. Reid did more than take care of emergencies. While studying in Europe, Dr. Reid became interested in the practice of heliotherapy, the use of sunlight to treat skin



Reid Clinic and Hospital and the office of Dr. Harry Reid at 622 North Palm Canyon Drive in Palm Springs. Courtesy of the Palm Springs Historical Society.



conditions and other disorders, which he introduced at his initial healthcare facility in Palm Springs.

"The original development, completed in the spring of 1929, comprised offices, a surgery, solarium, hospital rooms and apartments for the Reids," *The Desert Sun* wrote, adding, "In those early days, it was known as Reid's Hospital and Solarium."

**As Palm Springs grew, so, too, did Reid Hospital, which by 1936 added a new wing that included "an x-ray room, laboratory, library and staff study room, another waiting room, more offices, additional treatment rooms, and an emergency receiving room with outside entrance," *The Desert Sun* wrote in its 1940 report, adding that the hospital had a staff of 12.**

**In those early years, however, Dr. Reid did not operate his healthcare facility on a year-round basis. He had another practice in Estes Park, Colorado, where he spent the summer months.**

But even when it was open, Reid Hospital could not keep up with Palm Springs' growth and its continually rising demand for emergency services and surgeries, leaving the city with unmet healthcare needs.

*Photo: Tower of El Mirador Hotel, Courtesy of the Palm Springs Historical Society.*



## The Military Takes Over

### The U.S. government converted El Mirador Hotel into an exclusive hospital for the U.S. Army during World War II.

By the time the U.S. entered World War II, Palm Springs was internationally known as a playground for Hollywood stars, many of whom vacationed at El Mirador Hotel.

The iconic Spanish revival-style hotel with its 108-foot tower also attracted the attention of the U.S. government, which took over the 200-room hotel in April 1942 and converted it into a 1,500-bed hospital for the duration of the War.

**"The best is none too good for the American soldier," a U.S. Army officer told the *Los Angeles Times* in an April 13, 1942 report.**

The U.S. Army renamed El Mirador Hotel, calling it Torney General Hospital in honor of Major General George H. Torney, a graduate of West Point and longtime military surgeon who served as Surgeon General of the U.S. Army from 1909 until his death in 1913.

The *Los Angeles Times* documented the dramatic transformation of the luxurious hotel into a military hospital in a November 21, 1943 report.

"When you get a pass," the *Times* wrote, "you must be cleared through the provost marshal's office, which is the old caddy house. You must present your credentials to a sentry at the driveway, for the grounds are now (enclosed) with a high wire fence. The lobby has long since been stripped of its bridge and bingo tables and deep arm chairs. In their place are rows of steel desks, where men in uniform are working. The fashionable shop at one end of the building is now the personnel office and instead of racks of clothes there are dozens of steel files. The arch to what was the dining room has been closed, and on a hard bench in front of it visitors wait for appointments. The mess halls are in the old dining rooms. The blue leather and pink damask chairs are still in use. So is the flowered El Mirador china, augmented with cups and saucers bearing the Army Medical Corps insigne. But the grounds remain unchanged. Lawns are being sprinkled and cut. The border beds are freshly planted with flower cuttings and give promise of color in another month. The pool is open all day for the use of patients. Men in maroon bathrobes and pajamas sit in deck chairs chatting with visitors."





Torney General Hospital was considered “one of the most luxurious hospitals in military service anywhere in the country during the conflict,” according to a December 23, 1949 *Desert Sun* report.

Several of its patients generated national headlines, including Colonel Clinton J. Herrold, a veteran of both World War I and World War II who was a member of General Douglas A. MacArthur’s staff.

“A veteran of two World Wars, Col. Herrold escaped enemy bullets in many major battles but eye trouble, which developed in New Guinea, forced him from the front lines. He came here to Torney General Hospital for treatment,” the *Los Angeles Times* wrote in a July 12, 1943 report.

Other prominent Torney Hospital patients included Captain Jack Treadwell, who received the nation’s highest award, the Congressional Medal of Honor, from President Harry S. Truman on the South Lawn of the White House nine weeks after beginning treatment for injuries at the Palm Springs facility.

Captain Treadwell received the award “in recognition of his capture of six German pill boxes and approximately 50 prisoners during an attack on the Seigfried Line near Wurzbach, Germany,” *The Desert Sun* wrote in an August 24, 1945 report.<sup>4</sup>

Barbara Eves, a historian and archivist for Desert Regional Medical Center, was born at Torney General Hospital in 1944 while her father, Fred Ayala, served at the U.S. Army base in Palm Springs. Ayala had previously worked as a dishwasher at El Mirador Hotel.

*Photo: Servicemen stand in front of the tower of El Mirador Hotel, which became Torney General Hospital c. 1942. Courtesy of the Palm Springs Historical Society.*

Eves' older cousin, Vera Prieto Wall, who was 87 at the time of this writing, remembers that Torney Hospital was not only used to treat U.S. servicemen, but wounded Italian and German prisoners of war who were captured overseas.

"I used to hear my dad talk about them," Prieto recalled. "The Italian prisoners were allowed to work in the yard of the hospital. I'm not sure if they were paid. They were also allowed to leave and walk around town. They wore a uniform and on one side of their arms they had an emblem that said they were prisoners. Some of the Italian American families in town would make dinner for them. But never the Germans. The Germans were always under lock and key."

But while Prieto may remember German POWs facing much tighter scrutiny, some of them did escape Torney General Hospital — at least briefly.

**The *Los Angeles Times* documented the presence of "Nazi" POWs in Palm Springs, including a 1946 incident when two "Nazis" escaped Torney General Hospital and took a tour of the bars along Palm Canyon Drive.**

"Escaped Nazis Tour Night Spots in Palm Springs" was the headline topping an April 15, 1946 *Los Angeles Times* report, which documented one such incident — nearly one year after the end of World War II. But German POWs were still being held at the hospital.

"Two German prisoners of war, who slipped out of the stockade at Torney General Hospital and spent last night on a tour of night spots here, were recaptured by military police early today after the midnight closing of the bars," the *Times*

wrote. "To cocktail bar acquaintances, the pair explained their heavy accent by saying they were natives of Sweden. They were about to enter the car of one of these acquaintances when the M.P.s caught up with them."

Many POWs captured during World War II were held at camps in Southern California, including one in Chino, which held approximately 10,000 German POWs, according to an October 12, 1944 report in *The Date Palm* newspaper in Indio.



**Photo:** Barbara Eves and Dora Prieto, life-long residents of Palm Springs. Courtesy of Barbara Eves.

## Calls for a Public Hospital Grow

### Palm Springs' growth fuels calls for construction of a public hospital that could serve the community on a year-round basis

Even as America continued to fight in World War II and use the former El Mirador Hotel as a U.S. Army hospital, Palm Springs continued to attract tourists from across the country, many of whom built homes in the city.

By the time Japan surrendered in August of 1945, a major building boom was underway in Palm Springs. "(The) end of hostilities in the Pacific set off a building boom in Palm Springs, which gave the village its first \$100,000 week in permits issued and sent the year's total to \$603,000, well over the highest peak attained here since incorporation" in 1938, *The Desert Sun* wrote in an August 24, 1945 report. "This fall is going to see the biggest building boom in the city's history," said Arthur F. Wright, Palm Springs' city building inspector.

In fact, major developments affecting Palm Springs' growing allure as a tourist destination were taking place even before the end of World War II.

In June of 1945, California Governor Earl Warren signed legislation paving the way for construction of the Palm Springs Aerial Tramway, "climaxing a five-year campaign" to bring Francis Crocker's idea into fruition, *The Desert Sun* wrote in a June 29, 1945 report. (The tram was completed and began operations in 1963.)

But Palm Springs' continuing growth during the World War II years also fueled calls for a public hospital, particularly since Torney General Hospital was designated for military as opposed to public use.

Efforts to build a local community hospital were set in motion in January 1944 by Madge Holderman, Riverside County's first public health nurse based in Palm Springs, following a presentation she made to the Palm Springs Lions' Club.<sup>5</sup>

**"Mrs. Holderman, who cited several instances where lack of hospital facilities for civilians had almost proved disastrous, pointed out that the nearest hospital available was 25 miles away at Indio and that the County Hospital was 55 miles in the other direction," the *Los Angeles Times* wrote in a January 12, 1944 report.**

Holderman, who came to Palm Springs from Chicago, was frequently cited in *Desert Sun* reports, which documented



Madge  
Holderman,  
Riverside  
County Nurse.  
Courtesy of the  
Palm Springs  
Historical  
Society.

her successful effort to secure Palm Springs' first ambulance, a converted sedan, in 1941, as well as the management of a county health center at 459 E. Amado Road, which provided health information and health screenings for children. Her January 1944 presentation to the Palm Springs Lions Club was the pivotal movement, however, that focused local residents on the task of creating a public hospital.

"This is more than just a Lions' program," Lions Club President Culver Nichols told *The Desert Sun* in a January 21, 1944 report. "It is a community wide affair and the Lions' part in it is to get it started."

The Lions Club moved quickly.

Within a few weeks, Charles Burkett, chairman of the Lions Club's hospital committee, announced that incorporation papers had been filed to establish the Palm Springs Community Hospital Association as a nonprofit corporation.<sup>6</sup>

"Everyone will have an opportunity to work toward obtaining our vitally needed hospital," Burkett said.

John W. Williams, a local Realtor and former Palm Springs city councilman, even donated a five-acre tract for the hospital, located on Sunrise Way south of Ramon Road, according to a June 2, 1944 *Desert Sun* report.

Fundraising efforts for the hospital were expected to commence in the fall of 1944, but the Palm Springs Community Hospital Association actually established its first hospital in Ward B of Torney General Hospital on March 4, 1946, just seven months after the Japanese surrender, which ended World War II. This information is contained in a March 7, 1947 *Desert Sun* report documenting the first anniversary of Palm Springs Community Hospital and the services it had provided.

"In the 12 months the hospital has been in operation, it has rendered mercy-giving services to 770 hospitalized patients exclusive of its Out Patient Service; 69 babies were born there, 326 major and minor operations were performed, 836 X-rays were taken and 1681 laboratory tests were made," *The Desert Sun* wrote, noting that the Ward B facility was temporary and that Palm Springs Community Hospital Association was continuing its work to raise funds to build its own hospital. The association initially paid the federal government \$1 a year to use Ward B of the Torney Hospital.

"There isn't enough money set aside for such construction at this time," an unnamed hospital association director told *The Desert Sun* in the report. "Perhaps in a year or two, when prices come down the hospital will be in a position to build. In the meantime, we dread to envision Palm Springs without an operating hospital in the city."



*Photo: California Governor Earl Warren signs the Mount San Jacinto Winter Park Authority Act in 1945 as Palms Springs' first Mayor, Philip Boyd, left, and Francis Crocker, known as the "Father of the Tram," second from left, look on. Courtesy of the Palm Springs Historical Society.*

## Rural Healthcare: A Statewide Problem

**The lack of hospitals in rural communities throughout California prompted the state legislature to pass a law allowing the creation of publicly funded hospital districts in 1945. Desert Hospital District was eventually formed in 1948.**

Palm Springs wasn't the only community suffering from a lack of adequate hospital facilities during the first half of the 20th century.

Rural communities across the country suffered from a lack of hospital facilities, particularly as wounded soldiers returned home after serving in World War II. In California, legislators passed the Local Hospital District Law in 1945, which authorized the creation of local taxing districts to build and operate hospitals in medically underserved areas.

Community members launched a ballot initiative to form Desert Hospital District in 1948 with the idea of taking over Palm Springs Community Hospital and eventually building a larger facility.

"Every father and mother appreciates that feeling of security that comes from having the hospital within a few minutes' drive from home," Kenneth Kirk, chairman of the Desert Hospital District sponsoring committee, told *The Desert Sun* in a December 10, 1948 interview, four days before voters cast their votes on the ballot proposition.

He added, "A dependable fully-equipped hospital has become an essential part of any community. Since its establishment in 1946, the Palm Springs Community Hospital has cared for more than 2,500 patients, many of them alive today because these facilities were close at hand. This district hospital plan has been accepted as the best means of insuring permanent hospital service here. It has been put into effect already in 43 other communities in California and has met the approval of the public in those sections."

Local voters agreed and approved the formation of Desert Hospital District by a margin of 11-1, with 1,163 votes in favor and 100 votes opposed, according to a December 15, 1948 report in the *Los Angeles Times*.

The District's boundaries encompassed communities across the western half of the Coachella Valley as far as Cook Street, including Palm Springs, Cathedral City, Rancho Mirage, Palm Desert, Thousand Palms and Desert Hot Springs.



*The Desert Hospital Board of Directors, circa 1968-72, included, from left to right, Barbara Courtright, widow of O. Earl Coffman, George Beebe, Jr., Dr. Charles Baldwin, president, Lou Taubman, secretary, and Kenneth Kirk, treasurer. Courtesy of the Palm Springs Historical Society.*

## Desert Hospital District's First Challenge: Money

Desert Hospital District faced a financial crisis as soon as the District was formed.

While voters authorized the formation of Desert Hospital District in the December 1948 election, which provided the legal means to tap 1 percent of property taxes to help fund the hospital, the District was not legally entitled to receive those funds until July 1, 1949.

"State laws provide that a new district, such as our Hospital District, goes on the tax rolls in the year following its formation," Desert Hospital District President Stanley Rosin explained in a January 14, 1949 *Desert Sun* report.

As a result, the District ended up having to request \$10,000 from the Palm Springs Community Chest, a nonprofit charitable organization, to cover its operating expenses during the first six months of 1949.

"And I would like to explain further that this deficit is not incurred through bad management or poor collections," Rosin said, adding, "Community hospitals such as ours must, by

terms of public laws, accept any emergency case brought to it. Persons injured in accidents or critically ill receive necessary care whether they are able to pay for the services or not. Often these persons cannot pay for their care and the hospital must absorb that expense."

Desert Hospital District wasn't solely focused on securing sufficient funds to cover its first six months' worth of operating expenses. In early 1949, the District launched a campaign to secure \$300,000 in bond funding in a special election on May 17, 1949 so that it could build and equip a freestanding hospital. Proponents noted that approval of the bond initiative by a two-thirds majority would also enable the District to apply for \$400,000 in federal and state matching funds for hospital construction.

Voters throughout Desert Hospital District favored the bond initiative by a margin of nearly 13-1 in what was considered to be "the greatest majority any hospital bond issue has been given in the state's history," *The Desert Sun* wrote in a May 20, 1949 report.

"The entire Desert Hospital district voted 1056 for and 84 against, while in Palm Springs proper, the vote was 746 for and 43 against, nearly 19-1 towards the construction of a new building for the hospital facilities," *The Desert Sun* wrote.



The District was ultimately able to raise over \$500,000 to build Desert Hospital as a free-standing, 38-bed hospital on land next to the former El Mirador Hotel in Palm Springs. The initial funding included \$300,000 in bonds plus another \$150,000 that had been raised by the Palm Springs Community Hospital Association, the nonprofit organization formed in 1944 that operated a temporary Community Hospital in Ward B of the former Torney General Hospital from 1946 until Desert Hospital officially opened its doors in September 1951.

In a guest column published in *The Desert Sun* on September 14, 1951, Desert Hospital District President Kenneth Kirk provided statistics documenting the medical and dental care provided by Palm Springs Community Hospital from 1946 to September 1951, when Desert Hospital opened its doors.

"Since the beginning of operations until the present," he said, "518 new United States citizens have been born in this hospital. We have treated as in-patients 3,245; as out-patients, 8,793, and given minor surgery to 2,072. We have taken over 6,900 X-rays. All this has been done with the use of only 40 beds, 21 doctors and dentists on the active staff, 14 doctors and dentists on the courtesy staff and two doctors on the consulting staff."

Less than four months after Desert Hospital opened its doors, District voters passed another ballot initiative, this time approving the disbanding of the Palm Springs Community Hospital Association, which was no longer needed.

"This nonprofit corporation, organized in 1944, has served the community well ever since that date in operating the local hospital, at first alone and then in conjunction with

Desert Hospital District, which is a tax supported public body organized in 1948 for the express purpose of providing hospital facilities to this area," *The Desert Sun* wrote in a January 10, 1952 report. "Following creation of the district, it has been intended that eventually it shall take over the entire responsibility and that (the) work of this corporation gradually would taper off."

That indeed happened and, after voters approved the dissolution of the Palm Springs Community Hospital Association, it turned over its remaining assets to Desert Hospital District, which assumed sole responsibility for operating the hospital.

## Time to Expand — Again

### Palm Springs' incessant growth fuels calls for repeated hospital expansions in the 1950s and 60s.

Movie stars and other celebrities continued to flock to Palm Springs and neighboring Coachella Valley communities in the 1940s and 50s.

President Eisenhower began a series of highly publicized visits in 1959, during which time he not only fueled interest in Palm Springs as a winter resort, but as the nation's golf destination.

**“While presidents visiting the Coachella Valley dated back to Herbert Hoover, it was Eisenhower who would help the area gain the reputation of a playground for presidents, both those in office and those who made the area their retirement home,” Larry Bohannon, a longtime *Desert Sun* reporter, writes in his 2015 book, *Palm Springs Golf: A History of Coachella Valley Legends & Fairways*.<sup>7</sup>**

John F. Kennedy, for his part, made frequent trips to the Racquet Club in Palm Springs in the 1950s while he was a senator and a return trip in 1962 as president.

The frequent and highly publicized visits by celebrities were accompanied by parallel efforts to develop Palm Springs itself into an attractive tourist and winter home destination.

A *Desert Sun* report from June 28, 1949 highlighted the planting of the first 300 palm trees along Palm Canyon Drive while newspaper headlines throughout the 1940s and 50s and early 60s promoted plans for the Palm Springs Aerial Tramway, which was completed in 1963.

The city's growth also continued in dramatic form.

**“Palm Springs' population, according to electric meter installations, increased four times its size between 1930 and 1940; three and a half times between 1940 and 1950; and a similar increase between 1950 and 1960 is expected,” *The Desert Sun* wrote in a September 14, 1951 report, noting that further expansion of Desert Hospital would be needed in the near future.**

Indeed, by the winter of 1955, Desert Hospital experienced so much overcrowding that some patients

were having to spend the night on beds set up in the hallways of the facility.

“Bedding ‘one to three’ patients in the corridors by January 1955 because of space shortages prompted discussion of the first hospital addition at the urging of then-administrator Robert Henwood,” *The Desert Sun* wrote in a November 27, 1973 report.



*Photo: Palm Springs Mayor Frank Bogert greets President John F. Kennedy at Palm Springs Airport in 1962. Courtesy of the Palm Springs Historical Society.*

Facing obvious overcrowding, voters approved a \$350,000 bond initiative by a 3-to-1 margin in the November 1955 election to expand Desert Hospital by 22 beds, while also adding a new physical therapy department and increased X-ray and laboratory facilities, according to a November 2, 1955 report in the *Los Angeles Times*.



Even with such improvements, however, Desert Hospital initially provided only obstetrics and basic surgery services, while major surgeries were referred to Riverside General Hospital.

“Basically, we were an emergency hospital with very little sophistication, but with quite good results,” Dr. Charles Baldwin told *The Desert Sun* in a 1973 historical report on the hospital.

But as Palm Springs continued to grow, the need for an even larger hospital was readily apparent to Desert Hospital District, which hired an architect to plan another major hospital expansion in January 1958, just two months after the expansion financed by the 1955 bond initiative was completed.



*Photo Left: Former President Dwight Eisenhower visits with President John F. Kennedy. Top Right: Palm Springs Airport awaiting arrival of President John F. Kennedy. Bottom Right: Royal Family of Monaco, Grace Kelly, Stephanie, Caroline, Princes Rainier and Albert at Palm Springs Tramway c.1963. Courtesy of the Palm Springs Historical Society.*

## Tough Lessons at the Ballot Box

**Despite the continued growth of Palm Springs and neighboring desert communities and the obvious need for a larger and better equipped hospital, not every bond initiative was successful.**

While Palm Springs' growth as a tourist destination and winter home retreat was initially fueled by the attention given to its many celebrity visitors, an even bigger building boom was about to take place.

**"The inflection point was 1960," said Bill Bone, founder and chairman of the Sunrise Company in Palm Desert, which developed numerous gated communities across the valley. "Two things happened: Interstate 10 and air conditioning."<sup>8</sup>**

The Coachella Valley had previously been somewhat isolated and difficult to reach from Los Angeles and Orange counties because there were not any freeways leading into the valley. But with the construction of Interstate 10, drive times were cut in half, which suddenly made Palm Springs an easy weekend destination, Bone said.

Air conditioning, which also began to be widely installed beginning in 1960, made it much more feasible for people to consider having a second home in the valley or living in the valley year round. These two developments fueled the growth of Palm Springs and its neighboring communities as an affordable retirement destination.

But as Palm Springs and its surrounding communities continued to grow, Desert Hospital struggled to keep up with the rising numbers of patients. Voters, however, were not always willing to pay for needed hospital improvements and expansions.

Dramatic population growth again resulted in patients being cared for in the hallways of Desert Hospital by the winter of 1959, according to *Desert Sun* reports. But despite the repeated overcrowding, and the need for a major hospital expansion, Desert Hospital District was unable to secure sufficient voter support for its 1960 bond initiatives, despite two attempts.

"Board agreement authorized a special bond election in January 1960 for \$1.92 million. Short of the necessary two-thirds with 60.3 percent of the vote, the board tried the measure again in the November national elections and failed again to get the required two-thirds," *The Desert Sun* wrote in a November 27, 1973 historical report that outlined the hospital's first two decades of growth.



*Desert Hospital  
as seen from North  
Via Miraleste.  
Courtesy of the  
the Palm Springs  
Historical  
Society.*

Desert Hospital District did secure voter approval in November 1963, however, when it proposed a smaller \$1.3 million bond initiative that was intended to finance a 35,000 square-foot addition to the hospital that would add another 35 beds.

"This time voters relented and gave their November blessing that led to the construction of 'C' wing and obstetrics, named for Thunderbird and Tamarisk country clubs, respectively, in honor of their \$200,000 pledged toward construction, which was completed in 1965," *The Desert Sun* wrote in its November 27, 1973 report.

However, by 1965, the hospital master plan that Desert Hospital District commissioned from Palm Springs architects Stewart and Roger Williams became outdated. The District then hired the Ross Garrett Organization to produce a second master plan, which envisioned a four-story, 50,000-square foot hospital tower with 108 beds as well as expanded and centralized facilities for cancer treatment, plus an eye clinic, all of which would be phase one of a major hospital expansion.

The Ross Garrett Organization projected that a 725-bed hospital would eventually be needed to provide care for a tourist population that the firm expected to rise to 300,000 by

1985. "Unfortunately for the hospital, the electorate was not impressed by Garrett's dire predictions and in February 1966, the \$2.6 million bond issue was overwhelmingly defeated," *The Desert Sun* wrote.

By this time, Desert Hospital District gave up on the idea of seeking voter approval every time it needed funds for another hospital expansion. Instead, the District partnered with the city of Palm Springs and created a nonprofit joint powers entity called the Desert Hospital Authority, which would have the power to issue lease-purchase revenue bonds for capital improvements without seeking voter approval.

The Desert Hospital Authority issued \$2.6 million in bonds to finance completion of the four-story addition to Desert Hospital in 1968, which brought the facility to 217 beds.



*Photo: El Mirador Tower as seen from Desert Hospital. Courtesy of the Palm Springs Historical Society.*

## Desert Celebrities Fund Major Hospital Improvements and Expansions

While Desert Hospital District frequently sought bond revenue to pay for hospital expansions, celebrities have also made millions of dollars in donations to expand and improve Desert Hospital with the latest medical equipment.

Many of the most famous people in entertainment, politics, sports and business participated in fundraising events for Desert Hospital, including Bob Hope, Frank Sinatra and Dinah Shore, whose celebrity golf tournaments and other fundraising events raised millions of dollars, while supplementing the many fundraising efforts of the Desert Hospital Women's Auxiliary.

Newspapers, radio stations and television networks across the country publicized these fundraising events, which brought increased notoriety to Palm Springs while generating national publicity and support for Desert Hospital itself.

In 1956 the Desert Hospital Auxiliary partnered with the American Cancer Society to organize the press premier of

Bob Hope's latest Paramount picture, "That Certain Feeling," at Palm Springs' famed Plaza Theater.

"The importance of such an event is two-fold," Palm Springs Chamber of Commerce President Earl Hough told *The Desert Sun* for a May 10, 1956 report. "First, it will mean national attention for Palm Springs when Bob Hope plugs the premiere on his NBC coast to coast TV show May 22. Paramount Newsreel will film the premiere activities for release around the world. Art Linkletter will send a camera crew for the same purpose and use of the film on his CBS coast to coast TV show. We will have forty members of the nation's top press on hand to cover the premiere. Second, the Desert Hospital and the American Cancer Society will share the receipts of the actual premier ..."

Celebrity golf tournaments, of course, have a long history of generating fundraising support for Desert Hospital along with priceless media exposure for Palm Springs and its neighboring Coachella Valley cities. It's a tradition that stretches all the way back to the 1950s.

On January 20, 1959, Bob Hope, Bing Crosby and Frank Sinatra played golf together at Thunderbird Country Club's Pro-Am Kickoff in Rancho Mirage, with proceeds from the event being donated to Desert Hospital.<sup>9</sup>





On March 3, 1962, Sinatra joined Hope and Dean Martin at a groundbreaking fundraising event for a 22-bed addition to Desert Hospital, which raised more than \$70,000 in cash and pledges for the expansion, according to a March 4, 1962 Associated Press report.

A week later, *The Desert Sun* commended the celebrities for their generosity. "Bob Hope, Frank Sinatra and Dean Martin combined efforts to provide entertainment (which) could make any night club owner's mouth water. It was a grouping which could not be afforded by the nation's largest, most plush night spots, yet it was all for free and for the hospital," *The Desert Sun* wrote in a March 7, 1962 editorial, adding, "These same three, with others, headlined a big \$80,000 dinner earlier in the year for the hospital fund, which was such a huge success. ... You can't buy that dedication or that time."

Sinatra, a longtime Coachella Valley resident, was one of Desert Hospital's most prominent benefactors, donating millions of dollars to Desert Hospital, both on his own and through numerous fundraising events he helped organize.

Barbara Eves, a hospital archivist and historian who worked as a radiology/nuclear medicine transcriptionist at the hospital from 1968 to 1973, said Sinatra was frequently seen at the hospital as he met with leaders of the Desert Hospital Women's Auxiliary and other officials. "Sinatra would meet with them and discuss what kinds of fundraising they could do," she said.

Sinatra's generosity included an \$805,000 donation that enabled Desert Hospital to build the 15,215-square foot Martin Anthony Sinatra Medical Education Center, which Sinatra named in memory of his father. The three-story center opened in January 1971 with a nationally publicized

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*Photo: Frank and Barbara Sinatra in front of the El Mirador Bell Tower at Desert Hospital. Courtesy of the Palm Springs Historical Society.*

dedication ceremony that included speeches by Governor Ronald Reagan and Vice President Spiro Agnew.

The Center was built so that it could be expanded. It included a 218-seat tiered auditorium as well as the latest audiovisual equipment and furnishings. *The Desert Sun* described the Center as “one of the most modern, comprehensive medical education facilities in the United States” in an October 28, 1971 report.

Given his high level of fundraising for Desert Hospital, Sinatra was often involved in its dedication events, including the January 28, 1980 dedication ceremony for the five-story, 159-bed Sinatra Patient Tower and the Ever J. Hammes Surgical Pavilion, which more than doubled the size of the hospital to 400,000 square feet. The project was designed by Ontario-based Harnish Morgan Causey, which is now known as HMC Architects, one of the largest architecture design firms on the West Coast.

Other major Desert Hospital benefactors include Dinah Shore, whose 15-year-old daughter, Missy, was

treated at the facility following an automobile accident in 1963. An avid tennis player who was famous in the recording, radio and television industries, Shore helped raise millions of dollars for Desert Hospital by lending her name to celebrity golf tournaments, starting with the Colgate Dinah Shore Winners Circle at Mission Hills Golf and Country Club in Rancho Mirage in 1972. The event, the proceeds of which were shared with United Way of the Desert, was subsequently sponsored by Nabisco and helped raise money for a new 2,000-square-foot waiting room at Desert Hospital that featured comfortable seating areas where families could gather in semi-privacy. The new room was dedicated in Shore’s honor in January 1989. “It’s my way of saying thank you,” Shore told the *Chicago*

**Photo:** *Guests of honor at the January 15, 1971 dedication of the Martin Anthony Sinatra Medical Education Center at Desert Hospital included, from left to right, Governor Ronald Reagan, Nancy Reagan, Vice President Spiro Agnew, hospital director Glen Bailey, Mrs. Martin Anthony Sinatra, and Frank Sinatra. Courtesy of the Palm Springs Historical Society.*





*Tribune* in an April 16, 1972 report. "They took such great care

of Missy (her daughter) when she was in a car accident eight years ago. I'm so lucky and so grateful for what the world has given me, and for the people who've stayed with me through the years. I believe in using whatever talent you have to give back a little for helping others, and for the things you believe in."

Shore also believed that she could use her celebrity golf tournaments to upgrade women's status on the golf course. Of course, golf tournaments weren't the only fundraising vehicles for Desert Hospital.

Celebrity fashion shows were also very popular and well attended fundraising events. Academy Award-winning dress designer Helen Rose was involved in many fashion shows that raised money for Desert Hospital from the 1960s to 1980. Rose was famous for designing the clothing of numerous Hollywood stars well as as the wedding dresses of celebrities around the world, including Grace Kelly for her 1956 marriage to Prince Rainier of Monaco.

Many fashion shows benefiting Desert Hospital were also organized and attended by Nelda Linsk, the glamorous fashion model who became a buyer for Linsk of Philadelphia and eventually married Joe Linsk, the company's founder, before relocating to Palm Springs.

Linsk helped organize fundraising fashion shows featuring clothing designs by Oscar de la Renta, Bob Mackie and Emilio Pucci, which were among the most glamorous events in the desert.

"We had a Bill Blass fashion show in Steve Chase's home," Linsk recalled, Chase himself being a celebrity both for his philanthropy and for his award-winning interior

designs, which were featured in *Architectural Digest* and other publications.

"These were always fun events and everybody loved it," Linsk said. "We just did the best we could do. We had a lot of support from the community."

While the great variety of fundraising events were well attended by some of America's most famous celebrities, they were also critically important because of the money they generated for Desert Hospital, said Carol Fragen, widow of the late Dr. Ronald Fragen, a Palm Springs surgeon.

"We wanted (Desert Hospital) to succeed. But if we wanted it to succeed, we had to raise money so that it would," Fragen said.

Desert Hospital has received donations over the years from many prominent Hollywood stars and businessmen as well as their family members and estates, including:

— Walter Annenberg, who was U.S. Ambassador to England from 1969 to 1974 following a successful media career that included launching *Seventeen* magazine in 1944, publishing *TV Guide* in 1953, operating several radio and TV stations, and serving as publisher of the *Philadelphia Inquirer* for many years. Annenberg donated more than half a million dollars to Desert Hospital, \$250,000 of which he committed in 1974 so that the hospital could create the Child Care Study Center, whose purpose was to study child abuse.

The center also offered films and educational programs dealing with child care.

— Walt Disney:  
Disney loved Palm Springs and owned two homes in Smoke Tree Ranch.

"The first one he sold to help finance the building of Disneyland, which opened in July 1955. Once Disneyland became successful, he built a second Smoke Tree Ranch home in 1957," *The Desert Sun* wrote in a November 22, 2013 report, adding, "The Smoke Tree Ranch insignia can be seen on neckties that Walt often wore on televised episodes of 'Disneyland' and 'Walt Disney's Wonderful World of Color.'" Lillian Disney Truyens, Disney's widow, made a \$300,000 gift to Desert Hospital in Disney's name. "The money will go to the hospital's nuclear medicine department and for a special procedures room in the radiology department," United Press International wrote in a January 4, 1975 report.

— Actor Kirk Douglas and his wife, Anne. They donated \$2 million to the Desert Hospital Foundation Board on February 25, 1987, which was used to purchase the hospital's first Magnetic Resonance Imaging (MRI) equipment, according to Barbara Eves, the hospital's archivist.





— Ever Hammes, son of the late John W. Hammes, who held the original patent for home garbage disposals issued in 1938. Hammes and his wife, Betsy, donated \$500,000 toward the expansion of Desert Hospital in December of 1973, then another \$200,000 as a challenge grant in April of 1974, according to an April 4, 1974 report in the *Desert Sentinel*, which noted plans for the hospital to expand from 217 to 408 beds.

— Frederick "Fritz" Loewe, the Austrian American composer of "My Fair Lady" and other famous Broadway scores, including "Camelot" and "Gigi." In 1963, Loewe donated 50 percent of the royalties from his music to Desert Hospital, which was estimated to exceed \$1 million during the copyright periods for each song. "I love Palm Springs. It is my favorite place in all the world, and I wanted to do something in return for all it has meant to me," Loewe told *The Desert Sun* in a December 30, 1963 report. "The hospital is beautiful now — but perhaps this will make it better." Desert Hospital eventually named the 18-bed Loewe Children's Pavilion in his honor in 1972.

— Joseph M. Shapiro, a Russian immigrant who founded the Simplicity Pattern Company, Inc., the world's largest manufacturer of sewing patterns. Shapiro and his wife, Ednah Root, donated the initial \$100,000 for what became the 12-bed Joseph M. Shapiro Eye Center, which provided specialized care for patients with eye problems. Additional funding was provided by the Joseph Shapiro Memorial Fund and other sources, according to a December 12, 1968 report in the *Desert Sentinel*, which noted that the Eye Center would ultimately cost \$550,000 to build.

— Herbert Everett Toor, a nationally known furniture manufacturer who founded Furniture Guild of California in 1934, which later became the Los Angeles Home Furnishings Mart. "In 1969, he was responsible for the creation of the urologic diagnostic and treatment suite at Desert Hospital. Three years later, his largess provided the hospital with the Herbert E.



*Left: Bing Crosby at the Sinatra Invitational at Canyon Country Club. Right: Walt Disney, (center), reviews plans for his home at Smoke Tree Ranch with his wife, Lillian, his architect, Carl W. Denny, (left), and his builder, Bill Foster, circa 1950s. Courtesy of the Palm Springs Historical Society.*



1993. Her husband, Ric Supple, served on the boards of the Desert Hospital District and Foundation for 17 years. The Supples owned and managed radio station KPSI. Ric Supple previously owned an insurance company in San Francisco that specialized in group hospital plans, according to an October 24, 1986 report in *The Desert Sun*.

The groundbreaking for the G.A. Richards ER/ Trauma Center took place in 1991, the same day Desert Hospital broke ground on its 87,000-square foot, two-story Women and Infant's Center.

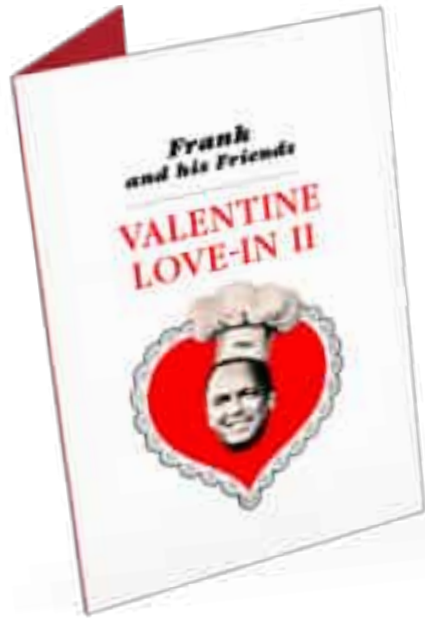
Toor Cardiac Center," *The Desert Sun* wrote in an October 10, 1988 report. The Toor Cardiac Center included "an eight-bed acute coronary care unit and 21 post-coronary care beds complemented by ancillary services and special diagnostic facilities," according to a January 6, 1972 report in the *Desert Sentinel*.

Desert Hospital also received donations from members of the Desert Hospital Foundation Board of Directors and their families.

These donors include Rozene Richards Supple, who donated \$1.4 million in honor of her late father, George Arthur Richards, to help Desert Hospital build its \$26.2 million G.A. Richards ER/Trauma Center, which opened in

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**Photo:** Ric Supple, who served on the boards of Desert Hospital District and Foundation, with his wife, Rozene Richards Supple, who donated \$1.4 million to help Desert Hospital build the G.A. Richards ER/Trauma Center. Courtesy of Desert Hospital District.



## Sinatra Leveraged His Stardom for Desert Hospital

Frank Sinatra's support for Desert Hospital wasn't simply a matter of writing big checks.

He was deeply involved in the details of planning star-studded fundraising events for Desert Hospital to ensure their success, and he did it for

decades, generating millions of dollars in donations along with national media attention for the hospital and for Palm Springs itself.

"People wanted access to Sinatra. When he called and said, 'I want you to be at this charity event,' they came. His gift to the world was involving all of his friends. That was what made this community really unique," said Bruce Fessier, a freelance journalist and desert historian who spent 40 years with *The Desert Sun* as a reporter, columnist and entertainment editor.

While Sinatra had raised money for Desert Hospital through golf tournaments since the late 1950s, some of his most lucrative fundraising events involved the three Valentine's Day-themed "**Love-In**" dinners he hosted in the 1980s, in which he used his talents not only to entertain his guests, but to supervise the cooking of traditional Italian dinners.

Fessier attended the Valentine's Day "**Love-In**" fundraising gala in 1986 that featured Julio Iglesias, the

Spanish-born vocalist who by that time had recorded more than 60 albums in seven languages.

"Julio was the biggest international star in the world at that time. He was there performing for Sinatra and he was only there because Sinatra asked him," Fessier said. Sinatra's 1986 "**Love-In**" also included Grammy award winning vocalist Dionne Warwick and actor and comedian Red Buttons.

Sinatra performed with Sammy Davis, Jr. and Dean Martin in a reprise of their "Rat Pack" days during the February 12, 1983 "**Love In**," which drew more than 900 notable attendees, each paying \$1,000 a plate. Attendees included former President Gerald Ford, Angie Dickenson, Gregory and Veronique Peck, Glenn and Cynthia Ford, Robert Wagner and Jill St. John, Kirk and Anne Douglas, James and Gloria Stewart, Gene and Jackie Autry, Felicia Lemmon and Jack Valenti, according to a February 14, 1983 *Desert Sun* report.

Sinatra's inaugural "**Love-In**" in 1980 featured Debby Boone, John Denver and impersonator Rich Little.

Fessier said his favorite fundraising event for Desert Hospital was the 1989 Frank Sinatra Celebrity Invitational golf tournament. The event included a dinner gala with Sinatra, Norm Crosby, Buddy Greco, Diahann Carroll and Vic Damone at the Radisson Resort, now known as Margaritaville Resort Palm Springs.

Winds were howling, however, and had played havoc with the golf tournament, potentially turning the event into a disaster. But Sinatra used his incredible talent to lift people's spirits in spite of the weather.

"Sinatra was so full of joy," Fessier recalled, adding that Sinatra lit up the crowd with his rendition of "Come Rain or



Come Shine," which he said made the fundraising event "one of the best galas I've ever been to in my life."

It wasn't just the quality of entertainment that Sinatra brought to Desert Hospital's fundraising events that stood out in Fessier's mind. It was the quality of his planning of the major events.

"He was involved in every detail of everything he did," Fessier said, adding that Sinatra spent time with the sound crew of the Radisson Grand Ballroom, testing microphones and speakers and making sure even people sitting in the back rows or at the most distant tables could enjoy high-quality sound.

This was, after all, Sinatra's first major event in the Radisson's Grand Ballroom and he wanted to make sure everything would work to his satisfaction.

"Sinatra was famous for somehow finding the time to meticulously oversee minute details," Fessier said, "right down to the planning the menu for his Desert Hospital benefits."

In those days, Sinatra was so busy with his career that people moved to his neighborhood around Tamarisk Country Club in Rancho Mirage "just to gain access to him," Fessier said. But even though Sinatra's career literally took him all over the world, he always made time for Desert Hospital, even co-

sponsoring health-related art contests for elementary school students in the early 1970s, whose winning paintings, drawings and other works of art were displayed at the medical center.<sup>10</sup>

Desert Hospital wasn't the only beneficiary of Sinatra's generosity. He also provided half of the startup funds for the Barbara Sinatra Children's Center for abused children.

"Frank Sinatra donated half of the seed money to get it going," Fessier said.



*Photo: Frank Sinatra, Dean Martin and Sammy Davis Jr. perform at Canyon Hotel for the Valentine's Day themed "Love-In" for Desert Hospital in 1983. Courtesy of the Palm Springs Historical Society.*

But Sinatra did not only use his wealth to support healthcare institutions. Whenever he was in the desert, Fessier said, he would scour *The Desert Sun* looking for reports on people who needed help, and he would find ways to help them anonymously.

"He considered this his community," Fessier said. "He wanted to be supportive of his community. He did it in big ways at the galas, and he did it in little ways, scouring the newspapers and seeing who he could help."

## Celebrity Patients



**Photo:** Desert Hospital's celebrity patients included Dinah Shore's daughter, Missy, who is pictured here with her mother, her father, Montgomery, and comedian Jack Benny. Courtesy of the Palm Springs Historical Society.

**Desert Hospital had its share of celebrity patients in the early days, including former New York Governor Thomas E. Dewey, who was declared the winner of the 1948 presidential election in a famous headline on the front page of the *Chicago Daily Tribune*.**

Harry S. Truman won an upset victory over Dewey and is pictured in a famous photo smiling broadly as he held up the erroneous *Chicago Daily Tribune* headline, "Dewey Beats Truman."

"The two-time GOP presidential candidate was visiting here Sunday when he was stricken with the flu and taken to Palm Springs Desert Hospital," United Press International (UPI) wrote in a December 23, 1958 report.

Other politicians treated at Desert Hospital include former Arkansas Governor Winthrop Rockefeller, a son of John D. Rockefeller, Jr. and Abby Aldrich Rockefeller who was elected in 1966 as the first Republican governor of Arkansas since Reconstruction.<sup>11</sup>

Famous celebrities who received treatment at Desert Hospital over the years include actor Peter Lawford, brother-in-law of President John F. Kennedy;<sup>12</sup> Academy Award winning actress Janet Gaynor;<sup>13</sup> comedian Red Skelton;<sup>14</sup> Elizabeth Taylor;<sup>15</sup> Lana Turner;<sup>16</sup> Barry Manilow;<sup>17</sup> Ron Bryant of the San Francisco Giants, who suffered a serious cut in a swimming pool accident,<sup>18</sup> and former Dodgers general manager Al Campanis, who was hospitalized after suffering "a pair of mild strokes."<sup>19</sup>

Sonny and Mary Bono's second child, Chianna Maria, was also born at Desert Hospital in February 1991.<sup>20</sup>

Not every celebrity wanted it to be known when they ended up in the hospital, however. Jackie Coogan filed a \$1 million suit against Desert Hospital in 1976 "charging that the hospital negligently released information about Coogan's health that hurt his reputation and chance to work with major studios," according to a July 1, 1976 UPI report.

Well-known Palm Springs pioneers were also treated at Desert Hospital at one time or another, including Pearl McManus, whose father, Judge John McCallum, founded Palm Springs just before the turn of the 20th century, according to a August 16, 1965 report in *The Desert Sun*.

Former El Mirador Hotel publicist and Palm Springs Mayor Frank Bogert also made headlines whenever he was treated at Desert Hospital, including in February 1983, when he had surgery to correct a bleeding peptic ulcer before meeting Queen Elizabeth II and her husband, Prince Philip, during their visit with Walter Annenberg, the former U.S. Ambassador to Great Britain.<sup>21</sup>

## **A Fire of Unknown Origin Destroys El Mirador Tower, but it is Quickly Rebuilt**



**A 1989 fire of unknown origin destroyed the iconic El Mirador Tower, which had been a Palm Springs landmark since the opening of El Mirador Hotel in 1928.**

Longtime Palm Springs residents Jerry and Thelma Stergios came to the rescue, however, donating half of the \$2 million needed to rebuild the 62-year-old landmark.

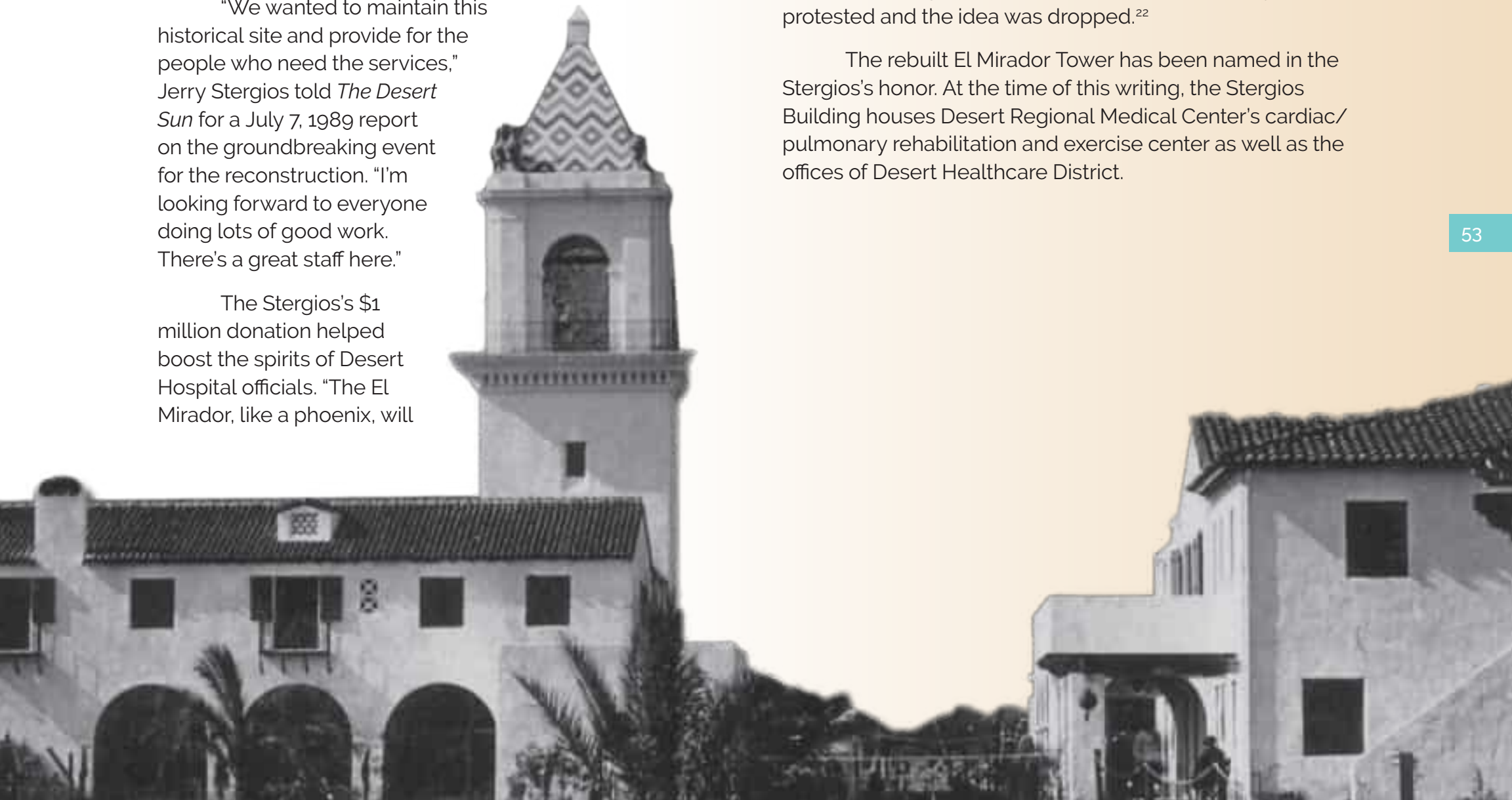
"We wanted to maintain this historical site and provide for the people who need the services," Jerry Stergios told *The Desert Sun* for a July 7, 1989 report on the groundbreaking event for the reconstruction. "I'm looking forward to everyone doing lots of good work. There's a great staff here."

The Stergios's \$1 million donation helped boost the spirits of Desert Hospital officials. "The El Mirador, like a phoenix, will

rise from the ashes," Desert Hospital CEO David Seeley told *The Desert Sun* in a July 27, 1989 interview.

The 11,000-square-foot structure was rebuilt using the original blueprints for the iconic Palm Springs landmark, which the Palm Springs City Council designated as a historical structure in 1984. At one point in the mid-1980s, the hospital proposed razing the El Mirador, but citizens and city officials protested and the idea was dropped.<sup>22</sup>

The rebuilt El Mirador Tower has been named in the Stergios's honor. At the time of this writing, the Stergios Building houses Desert Regional Medical Center's cardiac/pulmonary rehabilitation and exercise center as well as the offices of Desert Healthcare District.



## The Problem of Inadequate Insurance Reimbursements

**Insufficient insurance reimbursements and an increasingly competitive market with private healthcare providers forced many public hospitals into bankruptcy or to lease their operations to private companies. Desert Hospital retained its independence longer than many of its peers.**

Despite having growing numbers of patients, a constant stream of property tax revenue and millions of dollars from charitable events as well as donations from celebrities and CEOs who made the Coachella Valley their winter home, Desert Hospital found itself in financial trouble by the 1980s.

Desert Hospital had plenty of company in this regard.

Small public hospitals across America faced a deepening financial crisis in the 1970s, 80s and 90s. With the cost of healthcare compounding at 12 to 15 percent each year, the federal government eventually replaced traditional cost-based "fee for service" hospital reimbursements with a

system intended to limit payments to hospitals and physicians as a way of controlling escalating hospital costs. But with declining insurance reimbursements, public hospitals found it increasingly difficult to cover their costs and their financial problems began to mount.

This was a dramatically different financial scenario from the one hospital administrators initially envisioned when President Lyndon B. Johnson signed the Medicare and Medicaid programs into law in 1965. Medicare was intended to provide health insurance coverage to Social Security beneficiaries who were 65 and older and to the disabled, while Medicaid (known as Medi-Cal in California) was created as a joint federal-state program to provide healthcare access to indigent people and their families.

"When Medicare was first introduced, hospital administrators initially thought the program would be good because it was designed to cover operating costs plus 2 percent for replacement of capital equipment. That's how the system got started," said Arthur Shorr, a retired board-certified hospital administrator and Desert Healthcare District board member who is a nationally recognized expert on healthcare administration.

"Unfortunately," Shorr said, "the actuaries and politicians who designed the program grossly underestimated two key factors. They underestimated the increase in the demand for care and major advances in medical science and technology. Both of these unanticipated factors drove up hospital operating costs dramatically."

Hospital financial problems were further compounded by arbitrary government audits, which often took place several years after services were provided, said Shorr, who spent 12 years managing nonprofit, community-based tertiary care teaching hospitals across the country before starting his consulting practice.

"The government would conduct its Medicare audits two, three or four years after the fact," Shorr said, adding, "The auditors would arbitrarily decline to pay for items already expensed under one rationale or another. For example, they decided that telephones and televisions in patient rooms were a luxury and Medicare was not going to pay for it. Another more poignant example was Medicare's unwillingness

to pay for bad debt writeoffs allocated to it in the cost accounting system, arguing that Medicare did not have any bad debts. Therefore, it should not bear the expense of bad debts assigned to it on the basis of its percentage of the hospital's revenue. The problems with this logic are that the denials occurred two to four years after the fact and no other source of reimbursement was available to cover those costs. As a result, hospitals were not reimbursed for monies already spent. Anything the government could rationalize as non-reimbursable they did, all in an attempt to control the ever-expanding costs of the program."

As government auditors chipped away at hospital reimbursements, hospitals responded by increasing their charges, triggering a hyperinflation in hospital costs. The federal government responded in 1983 by unilaterally imposing a new reimbursement system called "Prospective Reimbursement." It was based on a payment scheme called "Diagnostic Related Groups" or DRGs in which specific dollar amounts of reimbursement were assigned for each patient procedure. The intent was to motivate hospitals to control or lower the costs of care.

"In the original cost-based reimbursement system, the more you charged, the more you earned," Shorr said. "In the DRG system, the incentives were just the opposite."

Many hospital officials say the new system had a devastating effect on hospital finances, particularly hospitals like Desert Hospital, whose patient demographics were disproportionately comprised of retirees who often required more complex care and extended hospital stays.



*Photo: Arthur S. Shorr, a retired board-certified hospital administrator and Desert Healthcare District board member. Courtesy of Desert Healthcare District.*

In an October 24, 1986 interview with *The Desert Sun*, Desert Hospital District Director Frederick "Ric" Supple warned that the federal government's reimbursement formula based on Diagnostic Related Groups was causing serious financial problems for Desert Hospital.

**"What the government pays for an illness is different from the costs the hospital incurs. We're seeing close to 30 percent of what we bill Medicare is not reimbursed," Supple said, adding, "If you project out the current situation, the hospital would run at a serious deficit by 1992."**

Insufficient Medicare reimbursements weren't the only problem facing hospital administrators. As Medicare auditors increasingly rejected hospital charges in the late 1960s and 70s, hospitals initially made up the losses by cost shifting. That is, allocating more costs to private insurance payors who were still reimbursing hospitals based upon charges, Shorr said.

The healthcare insurance industry responded by persuading President Richard Nixon to approve the Health Maintenance Organization Law in 1973, which provided the legal framework for the insurance industry to create Health Maintenance Organizations (HMOs), which were empowered to negotiate reimbursement rates based on Diagnostic Related Groups.

The result of this was a hyperinflation in healthcare costs for consumers while hospitals themselves increasingly struggled to survive. Many found themselves in situations that were financially unsustainable. In California alone, 12 hospital districts were forced into bankruptcy between 1996 and

2014, according to a January 12, 2015 report by the nonprofit California Policy Center in Tustin.

Public hospital districts did have an exit strategy, however: Selling or leasing a hospital to a hospital chain that had the ability to obtain economies of scale for purchasing supplies and negotiating with HMOs that individual public hospitals could not achieve on their own. Investor-owned hospital chains also realized that the more hospitals they acquired, the more they could use economies of scale to their advantage and the more profits they could produce.

**"Once investors realized the profits that could be made as a result of Medicare, hospital chains were formed, bought and merged with dizzying rapidity," Lawrence D. Weiss writes in his 1997 book, *Private Medicine and Public Health: Profit, Politics, and Prejudice in the American Health Care System*.**

The first hospital chains were formed in the 1960s but quickly grew during the decades that followed. "The period 1978 to 1985 was hotter than ever for the burgeoning hospital chains," Weiss writes, adding, "In 1978, there were 445 corporate-owned hospitals, but by 1984 the number had grown to 955, a 215 percent jump in just six years."

By 1991, hospital chains owned 1,382 hospitals across the United States. "If contract management by chains of non-chain hospitals were included, chains controlled about 30 percent of all U.S. hospitals, and about one of every seven physicians worked in a chain-owned hospital," Weiss said.



Interestingly, the first Coachella Valley hospital to be purchased by a hospital chain was Indio Community Hospital, which was privately owned by a group of doctors and an attorney.

Built in 1966 on land donated by Dr. Reynaldo Carreon, the 112-bed Indio Community Hospital was purchased in 1979 by National Medical Enterprises, Inc., a Los Angeles-based company that owned 60 acute-care hospitals and skilled nursing facilities.<sup>23</sup> The hospital was expanded and its name was subsequently changed to John F. Kennedy Memorial Hospital in 1984.

National Medical Enterprises continued to make so many acquisitions that it eventually became the second largest hospital chain in the country. The company changed its name to Tenet Healthcare Systems in 1995, just two years before signing a 30-year lease to operate Desert Hospital.

It would be nearly two decades after Tenet acquired Indio Community Hospital, however, before mounting debts and competitive pressures would ultimately force Desert Hospital District's board of directors to make a unanimous decision to lease the Palm Springs hospital to Tenet Healthcare.

In the meantime, Desert Hospital would continue to innovate and to provide specialized healthcare services that were not available at any other facility in the Coachella Valley. The District would also experience the most turbulent political period of its history.

## Turbulent Times

**The 1970s, 80s and 90s were a volatile period in Desert Hospital District's history, fueled by several controversial actions by its Board of Directors as they struggled to maintain the hospital's profitability.**

The problem of insufficient insurance reimbursements took place amid a series of political crises in the 1970s, 80s and 90s that involved everything from controversial hospital board actions to revelations that some of Desert Hospital's doctors were secretly redirecting patients to other healthcare facilities.

One crisis involved a "secret deal" between the boards of directors of Desert Hospital District and Eisenhower Medical Center, which was revealed in a Desert Hospital board meeting on June 24, 1975.

Desert Hospital was again experiencing overcrowding and had launched a \$24 million fundraising campaign so that the hospital could be expanded by an additional 191 beds.

What wasn't known until the June 24, 1975 meeting, however, was that the boards of directors of Desert Hospital and Eisenhower Medical Center had signed a "secret deal" on

December 4, 1973, in which Desert Hospital agreed to turn over 47 of its newly state-approved hospital beds to Eisenhower in exchange for Eisenhower's support for Desert Hospital's expansion. Eisenhower was also planning to expand, but worried that it would not receive state approval for expansion if Desert Hospital had also received such an approval.

In those days, California regulated the number of hospital beds in each region in an effort to minimize healthcare costs for consumers. So when the state learned of the "secret pact" involving Desert Hospital and Eisenhower Medical Center, it launched an investigation.

"What really concerns me," Health Quality Committee Chairman William Bauer told *The Desert Sun* in a June 27, 1975 report, "is this so-called 'secret agreement' between Desert Hospital and Eisenhower Medical Center. ... First Desert Hospital tells us that it is in desperate need of 191 beds. Then, after that request is granted, the hospital tells us it wants to share 47 beds with another facility. Finally, we learn that some secret agreement was made years ago to transfer these beds. We can't help wondering whether Desert Hospital ever intended to keep the 191 beds we allocated to it."

Despite these concerns, the seven-member state Health Quality Committee later voted unanimously to allow

both Desert Hospital and Eisenhower Medical Center to proceed with their respective expansion plans. Neither hospital was penalized for their actions.

James L. Ludlam, a Desert Hospital attorney, told the committee that the agreement between the hospitals was "nothing more 'than the first step' in fulfilling a Comprehensive Health Planning mandate for cooperation between the two hospitals," *The Desert Sun* wrote in a July 20, 1975 report following the hearing.

Ludlam said the decision to keep the agreement secret was "a judgment call" on the part of both hospital boards and that both hospital boards were acting in the public interest.

But the controversy over the secret pact and the resulting state investigation had lasting political consequences that included a recall effort targeting Desert Hospital Board President George Beebe, Jr., who was accused of mismanagement, according to an August 15, 1975 *Desert Sun* report. Beebe resigned his board position in February 1976.

Desert Hospital was engulfed in an even bigger political crisis beginning in 1983 when three of the hospital's five board members took steps to undermine Larry Minden, the hospital's executive director, before ultimately suspending him.

On April 5, 1983, the three-member board majority, which included President Andrew O. Fitzmorris, Dale Klemp and Dale Imus, hired an auditor to report to the hospital board — and not to Minden. Later, on October 3, the same three board members hired an Orange County-based public relations consultant with instructions to report directly to the hospital board and not to Minden.


Betsy Thompson, Desert Hospital's public relations director, had previously resigned on September 1 after learning that several board members were negotiating with a consultant to replace her.<sup>24</sup> Fitzmorris, Klemp and Imus later announced Minden's suspension during a public meeting on October 7, 1983, without giving reasons for their action.

Klemp and Imus subsequently told *The Desert Sun* that Minden was suspended in part because of "his refusal to change contracting practices in hiring medical personnel, not informing all board members about sensitive matters at the hospital" and accepting the position to become a United Way of the Desert campaign chairman without first checking with the board.<sup>25</sup>

*The Desert Sun* called these arguments "flimsy" in an October 10, 1983 editorial. Many District residents, for their part, were outraged, including Frank Sinatra, one of Desert Hospital's biggest benefactors, who said he was "concerned about the deplorable situation" at the hospital.<sup>26</sup>

A citizens committee called "Save Our Hospital" was launched with the goal of recalling Fitzsimmons, Klemp and Imus, who were also accused of holding meetings in violation of the Brown Act, California's open meetings law.<sup>27</sup> Notices of the recall effort were delivered to *The Desert Sun* on October 11 by Bobbee McLaughlin, president of the Desert Hospital Auxiliary.

But news reports involving the recall campaign did little to persuade Fitzsimmons, Klemp and Imus to change course. They proceeded to fire Minden on November 9.



*Frank Sinatra receives a crystal sculpture in recognition of his support for Desert Hospital from, left to right, Hospital Board Member Howard Wiefels, Executive Director Larry Minden and Palm Springs Mayor Lloyd Maryanov. Courtesy of the Palm Springs Historical Society.*

The Save Our Hospital campaign continued to gather momentum, however. Its fundraising efforts included a \$5,000 donation from Frank Sinatra. Fitzsimmons, Klemp and Imus were ousted by a 3-1 margin during the June 5, 1984 election. Minden was reinstated to his job on June 22 after Desert Hospital's newly elected board members were sworn in.

The controversies didn't stop there, however.

Two years later, the Desert Hospital Board of Directors again roiled District residents — this time by reorganizing the public hospital and transferring its operations to several private corporations.

During a campaign to drum up support for the reorganization, Minden, the hospital's executive director, told members of the Palm Desert-Rancho Mirage-Indian Wells Board of Realtors that taxation only accounted for about \$1 million of the hospital's \$70 million budget and that a reorganization was needed to help it compete with other hospitals in the valley.<sup>28</sup>

Unlike public hospitals and other public agencies, which are required to conduct open meetings, private corporations are allowed to conduct their meetings in private. So by transferring Desert Hospital's operations to several private corporations, the

District believed it could prevent its strategies, trade secrets, budgets, salaries and expansion plans from being leaked to other hospitals. Private corporations, unlike a public nonprofit hospital, could also engage in moneymaking activities, which Desert Hospital officials needed in part to offset losses from lackluster government insurance reimbursements.

"Our goal is to keep the hospital at the very best we can make it," said Howard Wiefels, a former Palm Springs mayor and former hospital board president who was named chairman of Desert Health Systems, a nonprofit corporation that supervised three subsidiary corporations that operate different hospital functions.<sup>29</sup>

Other corporations included Desert Hospital Corporation, which oversaw daily operations; Desert Enterprises, Inc., a for-profit corporation that developed business ventures, and Desert Hospital Health Services, which made decisions about outpatient and ambulatory services as well as joint ventures with physicians and managed care corporations.<sup>30</sup>

Desert Hospital District Directors Lois Schlecht, Duke Kosslyn and Ric Supple cast the votes in favor of the corporate reorganization of Desert Hospital on May 14, 1986, while Dr.

Jack Hargan and Bobbee McLaughlin cast the dissenting votes, saying they opposed the concept of public money funding private enterprise.

It didn't take long for public opposition to materialize. Within three weeks, in fact, 13 Palm Springs residents formed a committee called Citizens for Public Accountability.

"The organization was formed to block a proposal to turn control of the public, tax-supported Desert Hospital over to a non-profit corporation whose directors could make decisions in private," *The Desert Sun* wrote in a June 5, 1986 report.

The citizens committee retained public interest attorney James Wheaton to fight on its behalf. Wheaton, who was based in San Francisco, had filed a lawsuit opposing Marin Hospital District's efforts to implement a similar corporate restructuring of Marin General Hospital in Greenbrae, near San Rafael.

"Where public dollars go, public accountability must also go," Wheaton told *The Desert Sun*, adding that Desert Hospital District's plans to reorganize the Palm Springs hospital amounted to "taxation without representation."

Desert Hospital District moved ahead undeterred, however, and issued a press release announcing plans to lease the hospital to a new corporate entity, effective Tuesday, July 1, which *The Desert Sun* published on June 28, 1986.

*The Desert Sun* story also included comments from Wheaton, who said he planned to seek a court order on Monday, June 30, to stop the restructuring until opponents could gather enough signatures to put the issue before the voters.

Desert Hospital District directors then moved to preempt Wheaton's court order by signing documents over the weekend that made the restructuring and the Desert Hospital lease effective as of 12:01 a.m., Sunday, June 29.

Minden told reporters after a court hearing before Indio Superior Court Judge John Carroll that the hospital board's action "avoided a lawsuit and a needless expenditure of money," according to a July 2, 1986 *Desert Sun* report.

Wheaton was outraged.

"They did this specifically to avoid the court of law," he said, adding, "If that is what they do when they are a public district, imagine what will happen when it is private."

While it was now too late to stop the corporate restructuring of Desert Hospital, Wheaton changed tactics and filed a lawsuit on behalf of Citizens for Public Accountability demanding that its meetings be held in public.

Desert Hospital District won the first round in court, when Indio Superior Court Judge Frank Moore upheld the hospital's right to close its meetings. However, Wheaton appealed the decision to the 4th District Court of Appeals, which ruled on February 25, 1988 that Desert Hospital's meetings must be open to the public. Desert Hospital appealed the ruling to the California Supreme Court, which declined to hear the case, thereby letting the appeals court decision stand.

Desert Hospital complied with the court order, but eventually found ways to keep its "trade secrets" private. "We take advantage of the protection of the Brown Act,"

Desert Hospital President David Seeley told *The Desert Sun* in a July 25, 1989 report. "There are times that we need to close the meeting." The California Legislature also created new exemptions for public hospitals when it revised the Brown Act in 1994.<sup>31</sup>

But while the various corporations running Desert Hospital managed to generate enough income so that the hospital could continue to operate independently for another 11 years, they couldn't protect the hospital from the actions of corrupt actors within its own ranks.

On October 24, 1991, Desert Hospital filed a lawsuit seeking \$10 million in damages from Dr. Erwin Demiany, a former Desert Health Systems board member, and Dr. Mark Smith, the hospital's chief of medical staff, for conspiring to use their access to inside information about Desert Hospital's expansion plans to set up competing businesses, including an outpatient surgery center and a cancer center, according to an October 25, 1991 report in *The Desert Sun*.

Desert Hospital won a \$13.5 million judgment in the case, but reached an undisclosed settlement with Dr. Demiany and engaged in negotiations with Dr. Smith.<sup>32</sup>

## Innovations Continue

**Desert Hospital introduced the Coachella Valley's first Level II trauma center, the first neonatal intensive care unit, as well as the first full-service outpatient cancer treatment center, even as financial pressures continued to mount.**

Desert Hospital opened the Coachella Valley's first Level II trauma center in 1980.

Forty years later, it remains the valley's only Level II trauma center, providing a multidisciplinary team of doctors, surgeons and support staff who are available on a moment's notice to care for patients suffering from any type of trauma imaginable, from gunshot wounds to traffic accidents.

"We were the biggest hospital and we were able to provide all of the services that were required," said Heidi Anderson, a Registered Nurse and Trauma Program Manager who has worked at the hospital since 1987 and served as its trauma center manager for the past 18 years.

Anderson said there are only four trauma centers in all of Riverside County, the others being in Murrieta, Riverside and

Moreno Valley. The only distinction between a Level II and a Level I trauma center is that Level I facilities have a research and critical care residency program.

"We are a very busy Level II trauma center," Anderson said, adding that the hospital's service area encompasses the entire desert region from Banning eastward to Quartzsite, Arizona and southward to the Mexican border. "For rural areas, we're the easiest trauma center to get to," Anderson said, adding that nearly 700 patients were airlifted by helicopter to the hospital in 2019 alone.

While the majority of patients come from the Coachella Valley, the trauma center also handles numerous patients who suffer injuries while off-roading in the Glamis Sand Dunes area of Imperial County.

"Because you are required to have such a high level of care, you have to have a reputation of providing multi-specialty care at a moment's notice," Anderson said, adding, "It takes a lot of work and commitment. There is rigorous oversight to make sure we're maintaining that level of care. You have to be 'all in' if you want to be a trauma center. We have grown and expanded. We've never had an interruption in our trauma service."



Dr. Frank Ercoli, who died in 2020, is widely credited with building the hospital's trauma center into a top-notch facility. "He totally put the trauma center on its feet," said Dr. Doriana Cosgrove, an anesthesiologist who worked with Dr. Ercoli and served as the hospital's chief of anesthesiology for 14 years.

Dr. Ercoli also recruited Dr. Oscar Joaquin Paz-Altschul, a surgeon from San Miguel, El Salvador, who is also widely respected at the hospital, Dr. Cosgrove said. "Those two were an amazing pair," she said.

Desert Hospital significantly expanded its trauma center in the early 1990s with help from Rozene Richards Supple, who donated \$1.4 million to build the facility in honor of her late father, George Arthur Richards. The \$26.2 million G.A. Richards ER/Trauma Center opened in 1993. Supple's husband, Ric Supple, served on the boards of Desert Hospital District and Foundation for 17 years.

Other major funders of the trauma center included Lord Hanson of the Hanson-White Foundation, which contributed \$500,000 to build the facility, which includes the Hanson-White Foundation Intensive Care Unit named in honor of the British industrialists who co-founded Hanson PLC, an international industrial management company.<sup>33</sup>

"I remember when we moved into the new ER. It was really exciting," said Dr. Dan Cosgrove, a physician who worked in the trauma center from 1987 to 1998, adding that Dr. Ercoli showed a great deal of leadership in continuing to improve the facility.

### ***Desert Hospital Opens the Coachella Valley's First Neonatal Intensive Care Unit***

In 1990, Desert Hospital opened the Coachella Valley's first neonatal intensive care unit, which quickly became the medical facility of choice for premature and low birthweight babies across the valley.

Thirty years later, it's still the only neonatal intensive care unit in the Coachella Valley.

Dr. William Phaklides, a Desert Hospital neonatologist, estimated that 10 percent of the babies delivered at Desert Hospital in 1992 were low birthweight babies — under 5 pounds, 8 ounces — or very small babies weighing 3 pounds, 4 ounces or less, according to a September 7, 1992 report in *The Desert Sun*.

At that time, John F. Kennedy Memorial Hospital also sent severely premature infants to Desert Hospital or Loma Linda University Medical Center, depending on the physician



and on which hospital had space available as well as the preference of the expectant mother's physician.

In March of 1993, Desert Hospital opened a new two-story, 87,000-square foot building that combined radiology, emergency services, obstetrics and neonatal intensive care. The new facility doubled the number of emergency department beds and nearly tripled the number of neonatal intensive care unit beds from nine to 25.

"Every place you walk in here, you're going to see technology," said Michael E. Fontana, a consultant who oversaw planning for the \$28 million building, which was financed with bonds.<sup>34</sup>

## **Desert Hospital Partners with Salick Health Care to Open the Coachella Valley's First Full-Service Outpatient Cancer Clinic**

Desert Hospital was the first in the Coachella Valley to open a Comprehensive Cancer Center, providing the full range of cancer diagnosis and treatment services on an outpatient basis beginning in 1990.

"We just celebrated our 30th anniversary," said Teresa Whipple, executive director of the hospital's Comprehensive Cancer Center, which is located adjacent to the main entrance of the hospital.

Whipple said the initial concept of the Comprehensive Cancer Center was to offer every cancer-related service at one location, an idea that was initially developed by Dr. Bernard Salick after his daughter developed bone cancer.

It was in the process of obtaining treatment for his daughter that Dr. Salick identified the many logistical hurdles that often confronted cancer patients. "You had to go all over town to get care," Whipple said. "You went to one place to get the labs done, another place to get the imaging, and you'd go somewhere else to see your medical oncologist and somewhere else for radiation."

Dr. Salick developed a new healthcare business model in which everyone involved in cancer diagnosis and treatment would be based at one location at a hospital. He established his first comprehensive 24-hour outpatient diagnostic and treatment center at Cedars-Sinai Medical Center in Los Angeles in 1986. Dr. Salick went on to market his concept to hospitals across the country.

It was David Seeley, Desert Hospital's CEO from 1988 to 1995, who initially approached Salick Health Care about opening a Comprehensive Cancer Center at the hospital, Whipple said.

The Comprehensive Cancer Center was initially located at Desert Hospital's Sunrise Building at Vista Chino and Sunrise. A new 48,000-square foot Comprehensive Cancer Center facility was opened adjacent to the main entrance to the hospital in 1994. That same year, the Comprehensive Cancer Center became the first in the valley to offer a comprehensive breast center, with dedicated radiologists and oncologists that specialize in breast examination and breast cancer treatment.

In 1995, the Comprehensive Cancer Center introduced the Coachella Valley's first surgical oncology program, Whipple said.

“What the District has done for the valley by building Desert Hospital and building the Comprehensive Cancer Center for this small community is amazing,” Whipple said.

“Usually, you have to go to a big metropolitan city to get this state-of-the-art and academic-level cancer care.”

Whipple said the Comprehensive Cancer Center offers more than convenience. “The aim,” she said, “is to diagnose early and correctly so as to avoid complicated surgeries.”



# Dr. Frank Ercoli's Legacy: Hanson House, Which Provides Affordable Comfort – and Hugs – for Families of Hospital Patients

While Dr. Frank Ercoli spent 31 years as Desert Hospital's medical director of trauma and critical care services, from 1989 until his death in 2020, many remember the passion he had for Hanson House, the welcoming accommodations for families of critical care patients.

"Hanson House is a singular gem that should be a source of pride to all of the Coachella Valley," *The Desert Sun* wrote in a November 24, 2019 report.

It was Dr. Ercoli who came up with the idea of creating comfortable Spanish mission style accommodations for families of patients in the intensive care units of local hospitals, with services provided at low or no cost. He also took it upon himself to do fundraising for the project, both through his network of contacts and also through annual fundraising galas and

concerts, including the annual Palm Springs Smooth Jazz Festival, which he created. An accomplished musician, Ercoli even joined Tower of Power on stage during the 2012 festival, according to KESQ.

Located next door to Desert Hospital, Hanson House is a complex of private casitas with indoor and outdoor dining areas, which also includes a meditation/chapel room and a physician-family conference room. The first eight private casitas opened on Christmas Eve 2003.

The accommodations are named in honor of Lord James Hanson, a British industrialist and part-time Palm Springs resident who provided very generous seed funding to start a nonprofit fund for the facility. Another eight private rooms were added later with funding from the John R. and M. Margrite Davis Foundation. Ric and Rozene Supple have also been actively involved in development operations and promotion of Hanson House since its earliest phases.

Hanson House operates as a separate nonprofit organization that relies on donations, grants and fundraising events as well as help from volunteers from many hospital departments, including its intensive care unit, emergency department, the neonatal intensive care unit and the Comprehensive Cancer Center. While the accommodations are operated 24/7 by a volunteer staff, funding is needed to pay for insurance, landscaping and housekeeping. Desert Healthcare District has provided over \$90,000 in grant funding to Hanson House since 2003.

## Compassionate Care for Patients with AIDS

### Desert Hospital dedicated its entire third floor to provide compassionate care for patients with AIDS when very few doctors in the Coachella Valley would treat them.

When the deadly Acquired Immune Deficiency Syndrome (AIDS) epidemic swept the globe in the 1980s and early 1990s, doctors struggled to understand the disease and how to treat it.

“Scientists not only grappled with a new killer illness that was poorly understood, but the virus itself exhibited new characteristics almost as fast as researchers could identify them,” PublicHealth.org writes in its historical account of the global evolution of the AIDS epidemic.<sup>35</sup>

But by the time the medical community realized that the people most affected by AIDS at that time were young gay men and intravenous drug users, many doctors refused to treat them, partly because it was not yet fully understood how the disease was transmitted.

“Particularly in its earlier years, HIV (the virus that causes AIDS) was only understood to be viral, deadly, and highly contagious via unknown means,” PublicHealth.org writes, adding, “These variables led to considerable panic on the part of professionals and lay people alike. Fear fueled prejudice of populations perceived to be at the highest risk for HIV infection. Drug users and homosexuals bore the brunt of the discrimination.”

*The Desert Sun* published numerous reports as the AIDS epidemic spread across the Coachella Valley, including a May 19, 1990 article, which noted that many local doctors refused to treat AIDS patients “because of a lack of training, fear of the disease and partial payments from Medi-Cal, the state-run insurance for the poor.”

People with AIDS were welcomed by staff and volunteers at Desert Hospital, however, which was a key member of the Coachella Valley AIDS Consortium, a network of healthcare providers dedicated to treating patients with AIDS.

“People saw Desert Hospital as being very compassionate,” said Dr. Shubha Kerkar, an infectious disease specialist who started her career working on the third floor of Desert Hospital in 1990, which it had established as a “special care unit.”

The early years of the AIDS epidemic were emotionally challenging, not only for the patients, but for the doctors, nurses and volunteers who cared for them.

"These people were sick. They were weak. They were depressed, and they were young and they knew they were going to die," Dr. Kerkar said. "They were the same age as many of us. Every day, you opened *The Desert Sun* and you would see obituaries of 30- and 40-year-olds dying of AIDS. It was unreal."

While there was no treatment for AIDS in the early days, Dr. Kerkar said it was possible to treat the many infections that resulted from AIDS.

"You could treat the cancer. You could treat the pneumonia or meningitis or diarrhea. We could treat the opportunistic infections and they would get better," she said. "But then they would be susceptible to another infection."

While Desert Hospital assembled a team of dedicated physicians, pharmacists, nutritional specialists and consultants to care for patients with AIDS, the hospital also had a large team of volunteers who ran errands and provided emotional care and comfort for people with AIDS.

"The hospital gave us the floor and said, 'Do what you want with it,' " Guy Lawson, a volunteer coordinator for Desert Hospital's Special Care Unit, told *The Desert Sun* in a December 1, 1996 interview.

And they did.

Lawson and his volunteers decorated many of the rooms on the hospital's third floor with different themes,

including a Cape Cod Room with lighthouse wallpaper and a sailboat and a Cowboy Room with horseshoes for closet handles and a portrait of a singing cowboy. They also equipped the rooms with refrigerators, sofas and video players to make the rooms as comfortable as possible not only for the patients, but for visiting family and friends.

"They were there to boost the morale of the patients," Dr. Kerkar said of the volunteers. "They were given training and were knowledgeable and sensitive to the stigma of having AIDS and the things that were so painful. Some of the patients were thrown out of their jobs, thrown out of their families. They were destitute."

In *The Desert Sun* report from December 1, 1996, AIDS patients and their families said they were grateful to Desert Hospital and to its volunteers for the care they provided. "There's a camaraderie and a family feeling here that's as important as some of the medicines," said Ross Anderson, a 47-year-old patient.

Thirty-nine-year-old Joe Phipps told the newspaper he had been treated on three different occasions by the hospital. "This is hospice time, which I'm very much at peace with," Phipps said.

Phipps' parents and brother came to visit him on Thanksgiving along with family and friends from as far away as Canada. His father, Charles Phipps, said he was grateful for the care provided to his son by Desert Hospital and its volunteers.

"Of the places in the world for our son's condition, this is the place to be," he said.

While it wasn't until 1996 that doctors discovered a combination of medications that could effectively treat AIDS, Dr. Kerkar said many AIDS-related deaths were prevented in the early years by providing patients with Bactrim, a low-cost antibiotic that could protect patients from getting AIDS pneumonia.

"Eighty percent of hospitalized AIDS patients died of AIDS pneumonia, which could be prevented with Bactrim," she said. "So by taking one Bactrim tablet every day, 80 percent of the deaths could be prevented."

The challenge was finding and educating patients with AIDS about the merits of Bactrim before they contracted AIDS pneumonia. Not long after starting work at Desert Hospital, Dr. Kerkar learned about the Desert AIDS Project, which in 1990 had a small office on South Vella Road offering testing and case management services.

While Dr. Kerkar worked full-time at Desert Hospital, she also volunteered "two or three times a week" at the Desert AIDS Project, where she prescribed Bactrim to patients diagnosed with AIDS, the idea being to protect them from the deadly threat of AIDS pneumonia.

In those days, she said, a patient with AIDS pneumonia would wind up on a ventilator and face a high risk of death, much like today's patients with pneumonia induced by COVID-19. While many patients with AIDS succumbed to the disease, Dr. Kerkar, who moved her office to the Desert AIDS Project in 2018, said many of the AIDS patients she treated in the 1990s were still alive in 2020.



## Desert Hospital Becomes a Founding Member of the Coachella Valley AIDS Consortium

Desert Hospital was a founding member of the Coachella Valley AIDS Consortium (CVAC), a partnership of healthcare providers who were dedicated to helping people with AIDS.

“The CVAC was established in 1987, when less than 10 of the more than 350 doctors in the valley would see AIDS patients,” said Kay Hazen, who worked for Desert Hospital at the time.

The Consortium, which included Desert Hospital, Eisenhower Medical Center, Riverside County and the Desert AIDS Project, opened the first clinic for HIV/AIDS patients in the valley in 1988, Hazen said.







## Desert Hospital Chapel is Dedicated to Actress Loretta Young, who Frequently Visited Hospital Patients

While more than two dozen volunteers visited Desert Hospital's AIDS patients in the 1990s, actress Loretta Young also dedicated countless hours visiting the hospital's patients with AIDS and other terminal illnesses.

As a result, Desert Hospital Volunteer Coordinator Guy Lawson led a fundraising drive to build a new and larger interfaith chapel in Young's honor, which is next to the hospital's main lobby. The chapel was dedicated in April 2002, two years after Young's death.

"Loretta attended Mass in our chapel five days a week for as long as I can remember,"

Lawson told *The Desert Sun* in an April 4, 2002 report. "Many of the special-care floor patients, which include hospice, AIDS and acute-care patients, would come down and speak to her. She always insisted that the chapel door be left open. And Loretta often went upstairs to visit with them, too. Loretta had the biggest heart in the world, and when she came in here she left her stardom outside the door."

The original stained-glass window from the hospital's original chapel is in place above the altar. The chapel also features a statue of an angel resembling Young, which was produced by Paramount producer Gant Gaither, a close friend of Young.

The chapel was funded with nearly \$250,000 in donations from Desert Healthcare Foundation, Tiempo de los Niños, Hospice of the Desert Communities, the Desert Regional Medical Center Auxiliary and Young's friends.

## The Toughest Decision

### Desert Hospital District leases Desert Hospital to Tenet Healthcare in 1997, stabilizing the hospital's operations after a period of turmoil.

Desert Hospital District's board of directors tried to maintain the hospital's independence for as long as they could. But the District ultimately could not overcome the economic realities of declining government and private insurance reimbursements, combined with increasing competition from Eisenhower Medical Center in Rancho Mirage and other healthcare providers.

"They had a lot of talented people. But whatever they did, they weren't making any money," said Richard Grundy, who was elected to the Desert Hospital District board in 1993 after logging more than two decades of senior management experience in healthcare, including stints as chief financial officer and administrator for Huntington Intercommunity Hospital in Huntington Beach and regional financial executive for American Medicorp, a publicly traded company that owned and operated dozens of hospitals across the country.

Grundy knew that changing market conditions and inadequate insurance reimbursements were taking their toll on Desert Hospital, just like they did on so many other hospitals across the country.

"It's fair to say that Medicare was not entirely fair with the hospital community," he said. "When they started reimbursing hospitals using Diagnostic Related Groups, they'd pay a flat fee for an appendectomy whether you stayed (in the hospital) for two days or five."

Desert Hospital's financial situation was also unique compared to other hospitals across the country because an unusually high percentage of its patients were senior citizens, many of whom required more complicated surgeries along with extended hospital stays, said Kay Hazen, who worked from 1987 to 1992 as Desert Hospital's vice president of marketing and administration.

"The cash flow wasn't sufficient to service the debt," she said.

Between 1994 and 1996 alone, Desert Hospital lost nearly \$10 million, even after eliminating 200 of its 1,450 full- and part-time employees through layoffs.<sup>36</sup>

"The reality is that Desert, as a stand-alone institution, within the next five years, is a dinosaur," Tom Suitt, chairman

of the Desert Hospital Corporation board, told *The Desert Sun* in an August 28, 1996 interview in which he described the hospital's deteriorating financial position.

**“Thirty-eight percent of Desert's patients belong to health maintenance organizations, which possess enough bargaining power to force Desert — or any other healthcare entity — to drop its costs or risk losing those clients to rivals,” Suitt said, adding, “Unlike Eisenhower, with its base of affluent supporters or JFK, which is owned by Tenet HealthCare, the nation's second largest healthcare system, Desert lacks the assets and strategic resources to compete in the new market.”**

As a result, by the summer of 1996, the Desert Hospital District Board of Directors was actively exploring the possibility of seeking a major partner to run the hospital, with Columbia/HCA Healthcare Corp., Catholic Healthcare West, and Tenet Healthcare Corp. being the major contenders. The District even explored the possibility of a merger or alliance with Eisenhower Medical Center in Rancho Mirage, according to Dr. Sid Rubenstein, who served on the hospital board from 1992 to 2016.

“(Eisenhower officials) even brought Dolores Hope with them as a PR thing,” Dr. Rubenstein recalled, adding that the board ultimately dropped the idea. “One of the reasons that Eisenhower was not chosen was because, in our opinion, they were going to turn Desert Hospital into a satellite of their operation,” Dr. Rubenstein said.

The District eventually settled on Tenet, which already had a presence in the valley, having owned and operated John F. Kennedy Memorial Hospital in Indio since 1979. The District hired Walnut Creek-based Ziegler Securities in December of 1996 to study the Tenet proposal and advise the District on whether to pursue it. Desert Hospital Corporation also hired Paine Webber to conduct a similar analysis.<sup>37</sup>

By that time, Desert Hospital officials as well as hospital staff had come to believe that partnering with a major company like Tenet was the best way to ensure continuity in the hospital's operations.

Not only would Tenet provide Desert Hospital with stronger negotiating leverage with insurance and managed care providers, but it could purchase medicines and supplies at much lower prices than an independent hospital, simply because of the economies of scale.

**“I don't think there's any small hospital in the country that can survive in this market,” Dr. Charles Supple told *The Desert Sun* in a January 30, 1997 interview, noting that he had worked at Desert Hospital for 30 years. “This is the only thing we could do to keep the quality of care up.”**

Some saw comfort with Tenet's financial strength, being the nation's second largest hospital chain with 34 hospitals in Southern California alone. Others worried about Tenet's past, when it was known as National Medical Enterprises. In 1994, the company pleaded guilty to federal charges for paying kickbacks to doctors and paid about \$375 million in fines and

penalties — at that time the largest health fraud settlement in U.S. history, according to a July 31, 1997 report in the *Los Angeles Times*. Tenet was also forced to sell its psychiatric hospital division, Psychiatric Institutes of America, as part of the settlement, the *Times* wrote, while noting that there was “no admission of wrongdoing by Tenet or the doctors in the settlement.”

*The Desert Sun* published a letter from Thomas E. Allen of La Quinta on August 9, 1997, in which he expressed his unease at having Tenet run Desert Hospital. In his letter, Allen referenced Tenet's 1994 fraud settlement as well as an ongoing Canadian civil suit involving the company.

While some Coachella Valley residents clearly had concerns about Tenet's past, Desert Hospital's board members also recognized that Tenet's problems involved its psychiatric division and not its acute care services, according to Grundy and Dr. Rubenstein, who both served on the Desert Hospital board along with Mark Matthews when the decision was made to lease the hospital to Tenet.

“We felt Tenet had the best thing to offer us. It was closest to our feeling of patient care,” Dr. Rubenstein said, adding, “They seemed like they were more patient focused.”

Desert Hospital District also recognized that Tenet could solve a lot of financial problems for the District and do so very quickly while providing additional benefits to the community. With this in mind, the District voted unanimously on March 4, 1997 to lease Desert Hospital to Tenet Healthcare Corporation.

“The deal calls for Tenet to pay off the hospital's roughly \$95 million debt and provide the district another \$15 million for

community healthcare programs,” *The Desert Sun* wrote in a March 5, 1997 report. “In exchange, the 127-unit hospital chain gets to run Desert Hospital for the next 30 years.”

The city of Palm Springs also benefitted from the lease agreement because turning control of Desert Hospital over to a for-profit healthcare chain would also mean Tenet would have to pay property taxes on the hospital buildings, which Desert Healthcare District did not have to pay. Tenet officially took over Desert Hospital on May 31, 1997.

## A Legacy of Healthcare Firsts in the Coachella Valley

### Current and former board members involved with the decision to lease Desert Hospital to Tenet Healthcare believe they made the right decision.

Current and former Desert Hospital District officials look back with pride on what the District achieved during the 49 years in which it built and operated the largest hospital in the Coachella Valley.

Desert Hospital's firsts included the first Level II trauma center in the Coachella Valley. Even at the time of this writing, 40 years after obtaining certification for its trauma center, it remains the only trauma center serving an 18,000-square-mile area from Banning eastward to Quartzsite, Arizona and southward to the Mexican border.

"Think of what we have in this little community. Don't take for granted that that (trauma center) would have happened on its own," said Kay Hazen, a former Desert Hospital vice president of marketing and administration who later served 18 years on the Desert Healthcare District board of directors.

The same could be said of the hospital's neonatal intensive care unit as well as the Comprehensive Cancer Center, both of which continue to serve patients from across the valley.

For its part, Tenet Healthcare quickly put Desert Hospital District's board at ease as it demonstrated its ability to profitably operate the 387-bed facility, which it renamed Desert Regional Medical Center.

"We saw a fairly quick transformation of the way the hospital was run from a financial standpoint," said Dr. Sid Rubenstein, who served on the Desert Hospital Board of Directors both during and after the lease had been signed with Tenet. "(The lease with Tenet) was worth every bit of effort we put into it," he said.

"Their acute care operating formula was really very good," said Richard Grundy, who also served with Dr. Rubenstein on the Desert Hospital District board during the transition years.

Mark Matthews, who was preparing to retire from the Desert Healthcare District board in 2020 — 23 years into Tenet's lease — said the arrangement has worked out even better than he anticipated.



*Mark Matthews  
retired in 2020 after  
serving on Desert  
Healthcare District  
board for 23 years.  
Courtesy of Desert  
Healthcare  
District.*

"Hospitals are tough to run," he said. "But Tenet has been the best operator. They are pros."

"The board made a good decision with Tenet," said Ric Supple, who served 17 years on the Desert Hospital District and Foundation boards, from 1984 to 2001. "We got rid of the debt and Tenet made it into one of their top hospitals in the country."

Tenet's lease is set to expire in 2027, at which point the company could renew the lease or, potentially, make an offer to purchase the hospital.

In July of 2019, Tenet offered to purchase the hospital for \$120 million along with a commitment to comply with 2030 seismic upgrades mandated by the state of California, which are estimated to cost between \$119 million and \$180 million. Tenet also committed to make future investments in healthcare services and capital projects over the next eight years.

"The District Board reviewed and received public input regarding the proposal at a public meeting and recommended that the proposal be resubmitted with more substantial financial consideration as well as specifics of the future configuration of Desert Regional and more specifics of the

investments of healthcare services and capital projects in the entire Coachella Valley," the District wrote in a 2020 report to the Local Agency Formation Commission (LAFCO).<sup>38</sup>

If Tenet made an offer to purchase the facility that was acceptable to Desert Healthcare District, it would have to be approved by voters throughout the entire District before the deal could be allowed to go forward.

# PART TWO

## A New Mission: The History of Desert Healthcare District

**Desert Hospital District renames itself Desert Healthcare District and reinvents itself as a public agency that provides grant funding to nonprofit organizations that offer critical health and wellness services.**

After Tenet Healthcare Corporation took over responsibility for the daily operations, management and budget for Desert Hospital, it renamed the facility Desert Regional Medical Center.

Desert Hospital District suddenly found itself out of a job, though it would continue to retain an oversight role with two seats on a separate five-seat hospital oversight board.

But the District quickly reinvented itself and developed a new mission. Instead of focusing its attention exclusively on the hospital, as it had done for the preceding half century, the District turned its attention – and its budget – to providing grants to support the many nonprofit organizations that collectively comprise the Coachella Valley’s health and wellness safety net. The District changed its name to Desert Healthcare District to reflect its new mission.<sup>39</sup>

The Desert Hospital Foundation, its nonprofit fundraising arm, changed its name and its mission, too.<sup>40</sup> Instead of organizing golf tournaments and other fundraising events to pay for new equipment or to support hospital expansion projects, such as the construction of a maternity ward or a trauma center, the Foundation renamed itself Desert Healthcare Foundation and began looking for health and wellness initiatives it could support with grant funds as well.

Jeffrey Close, executive vice president of the Desert Healthcare Foundation, described its new mission in a March 3, 1998 interview with *The Desert Sun*. “Our guiding policy now is: What can we do with the resources we have, where a modest amount of help will do the most good?”

Since 1998, Desert Healthcare District and Foundation have issued nearly \$80 million in grants to improve the health and wellness of residents living within the District’s borders.

Most of these grants have been provided to nonprofit organizations that collectively comprise the Coachella Valley’s health and wellness safety net. District and Foundation grants strengthen these nonprofit organizations and enable them to provide more services to more people than they would otherwise be able to provide.

To fully appreciate the impact of these grants, it’s important to understand how the District’s nonprofit grant recipients use their funding and how their efforts affect people’s lives. With this in mind, the first 12 chapters of this section highlight a dozen important ways that District and Foundation grants have made a positive difference in the health and wellness of Coachella Valley residents. Chapters 13 to 16 cover the District’s investments in healthcare education, the political push to expand the District’s service area to include the eastern Coachella Valley, the District’s collaborative efforts to address homelessness across the valley, as well as the District’s initial responses to the COVID-19 pandemic.

The Epilogue provides a historical overview of the efforts Desert Hospital District and Desert Healthcare District have made over the past seven decades to make a positive difference in health and wellness in the Coachella Valley.



## The First Grants

During their first two years of grant giving, from 1999 to 2000, Desert Healthcare District and Foundation issued grants to more than 30 nonprofit health and wellness organizations, using standards established by the National Charities Information Bureau to assess the quality and reliability of the organizations seeking grants.<sup>41</sup>

Initial grant recipients included some of the desert's best known nonprofit organizations, including the American Diabetes Association, the Arthritis Foundation, Catholic Charities, the Desert AIDS Project, FIND Food Bank, Jewish Family Service, and the Mizell Center.<sup>42</sup> The District has always been interested in funding nonprofit organizations that provide critical services as well as educational programs and workshops that promote healthy lifestyles. Early grant recipients also included public agencies, such as Desert Sheriff's Search and Rescue and the Palm Springs Fire Department, which were provided with grant funds to purchase defibrillators.

Deciding which grant applications to fund wasn't as easy as it might seem, however, simply because of the large numbers of nonprofit organizations in the Coachella Valley.

"There are more than 800 nonprofit organizations serving the desert communities," according to Steve Tolin, editor and publisher of *Desert Charities News*, the Cathedral City-based news magazine dedicated to philanthropic and charitable giving.

The District and its Foundation, its nonprofit fundraising arm, also learned over time that some worthwhile health and wellness programs were simply unsustainable without constant District or Foundation support, said Donna Craig, who has worked for Desert Healthcare District and Desert Healthcare Foundation since 2004, ultimately becoming chief program officer.

One very popular but ultimately unsustainable program was Desert Health Car, which initially provided four vehicles that were used to provide District residents with free transportation to any health-related appointment.

"Over 90% of the health and social service providers who responded to a 1995 study assessing local health needs

*Photo: Donna Craig, Desert Healthcare District's Chief Program Officer. Courtesy of Desert Healthcare District.*



identified transportation as a major obstacle to accessing healthcare services," Foundation Executive Vice President Jeffrey Close told *The Desert Sun* in a March 2, 1999 interview.

By 2004, Desert Health Car was logging 24,000 trips each year.<sup>43</sup> "The two biggest users were people going for cancer treatment or dialysis," Craig said.

The Desert Healthcare Foundation turned over management of Desert Health Car to John F. Kennedy Memorial Foundation in November 2005 and provided enough funding to keep the service running for another 18 months, but the JFK Foundation was unable to sustain it, according to a March 18, 2007 report in *The Desert Sun*.

## The Smile Factory



One of the first Desert Healthcare Foundation programs that proved to be sustainable long-term was the Smile Factory, a mobile dental clinic that visited public schools throughout the school year, providing free dental services to children between the ages of 4 and 12.

The Smile Factory mobile dental clinic initially traveled to a different Palm Springs Unified elementary school every three weeks, visiting schools in Palm Springs, Rancho Mirage, Thousand Palms and Desert Hot Springs.

"The children treated are mainly those who qualify for free or reduced-price school lunches or who would otherwise

not have the financial means to pay for similar services at a private dental establishment," *The Desert Sun* wrote in a July 7, 2006 report, adding that more than 2,500 children were being screened every three weeks, with 1,800 dental services provided to children each quarter.

*The Desert Sun* noted that Desert Healthcare District had agreed to donate another mobile dental clinic to the Smile Care Factory, which would serve the Desert Sands Unified School District.

While the Smile Factory was launched by the Desert Healthcare Foundation, Smile Factory eventually became an autonomous organization that received funding from other foundations and private donors.

By 2008, the Smile Factory was screening more than 24,000 Coachella Valley children each year and providing about 14,000 dental procedures, according to Dr. William Chase, a Palm Springs dentist who lauded Smile Factory's work in a February 14, 2008 guest column in *The Desert Sun*.

**"If the Coachella Valley did not have The Smile Factory," Dr. Chase wrote, "countless youngsters would wind up in the emergency room of our local hospitals every day seeking treatment for chronic oral infections and pain."**

The Smile Factory mobile dental clinic program was eventually taken over by Borrego Health in 2009, which subsequently expanded the program to include all three school districts in the Coachella Valley.

## Early Investments in Defibrillators

Desert Healthcare District provided grants to several fire departments in the late 1990s, which enabled them to purchase defibrillators, a device which can restore a normal heartbeat by sending an electric pulse or shock to the heart.

One of the first grantees to receive defibrillators was Bary Freet, who was Palm Springs' fire chief. "Defibrillators were pretty much a luxury at the time," Freet said. "So, over the years, I applied to the District for multiple grants for defibrillators. They went right on the engine company and they were used and they saved lives."

After retiring from the Palm Springs Fire Department, Freet became executive director of The Institute for Critical Care Medicine, which launched a program with goals of training one in 10 people in the Coachella Valley in Cardio Pulmonary Resuscitation and of installing 50 defibrillators in shopping malls, senior centers, libraries and other public places.

The District awarded The Institute for Critical Care Medicine \$565,000 in grant funding in 2005 and 2006 to implement the program over a two-year period, while the Institute sought additional funding from other organizations to continue the program for another year.

According to an executive report Freet submitted to the District, 9,000 Coachella Valley adults received CPR training over a 20-month period, while 31 defibrillators were deployed in partnership with various community organizations. "The community response has been outstanding and participants have embraced the training sessions and the importance of the program," Freet said in his report.

## Investments in Screenings for Breast Cancer and Type II Diabetes

One of the District's earliest goals was to support programs to ensure that at least 80 percent of District residents have access to breast cancer screenings. Both the District and the Foundation provided funding for free breast cancer screening programs in partnership with other organizations. These programs produced life-saving results for local women, including Lauriann Donnells, who told *The Desert Sun* in a March 26, 2002 report that the free mammogram saved her life.

"Donnells received early detection along with nearly 500 other women last year through the program, sponsored jointly by the Desert Healthcare Foundation, the Comprehensive Breast Center and Desert Healthcare District. Nineteen of the local women were diagnosed with breast cancer. Sixteen survived, and their doctors attribute it to free, early detection," *The Desert Sun* wrote.

By mid 2004, the District and Foundation had provided breast cancer screenings for 1,290 women, according to a June 13, 2004 *Desert Sun* report.

The District has continued to provide funding to nonprofit organizations to conduct free breast cancer screenings, including nearly \$1.2 million to the Desert Cancer Foundation since 2005.

The District has also provided funding for free screenings for Type II diabetes, including a \$725,000 grant for this purpose to Eisenhower Medical Center in 2004.

## A Sharper Focus on Data

**Desert Healthcare District's support for a valleywide health assessment led to the creation of Health Assessment and Research for Communities (HARC), the first independent organization to gather health and wellness statistics specific to the Coachella Valley.**

**Nonprofits have since used HARC data to secure millions of dollars in funding from numerous grant providers to pay for health and wellness initiatives across the valley.**

By 2004, both the Desert Healthcare District and Foundation began to create strategic plans, which they used to guide their grant-giving initiatives.

The idea was to give the District and Foundation a way to sharpen their focus on specific health and wellness needs within the District's service area, said Wayne Soucy, who served as CEO of the District from 2003 to 2007.<sup>44</sup> "Up until that point," he said, "the District was striving to do a lot of good work. But it was less strategic and (its decisions were) less

strategic and more individual reaction to how a specific nonprofit grant sounded on the face of it instead of looking at the needs. What kinds of things should we shoot for? What should our strategic direction be? Should we look at healthcare, poverty?"<sup>45</sup>

But as the District and Foundation staff stepped up their goal-setting and use of strategic plans, they also realized they needed better data to pinpoint specific healthcare needs within the District's service area.

The problem was that the only available statistics on health and wellness were for Riverside County overall. They were not specific to the Coachella Valley.

Soucy initially addressed the problem by obtaining District board approval to obtain a grant from the California Wellness Foundation to pay for a valleywide health needs assessment that would gather detailed statistics on health and wellness specific to the Coachella Valley. After obtaining the grant, Soucy then hired Eileen Packer as a project coordinator to oversee the development of the valleywide health needs assessment.

Soucy subsequently spotted a news article about an organization in Orange County that was gathering health statistics specific to Orange County every three years

and thought it would be worthwhile to establish a similar organization in the Coachella Valley. Soucy and Packer learned that the Orange County organization had set up a steering committee to help guide its research protocols and they opted to use the same strategy in the Coachella Valley.

"One of the first things we needed to do was to form a steering committee of representatives of local nonprofit organizations on the process of how to gather the data," Packer recalled, adding, "Everybody we invited came to the table because they knew the importance of having the data. We investigated the methods that were being used to do these kinds of assessments and presented it to the steering committee. We decided the best way to collect the data was a random, digit-dial telephone survey."

Soucy shared information about the Orange County organization with leaders of local nonprofit organizations on the steering committee, who agreed that there was a need to form an independent nonprofit organization to collect health and wellness statistics specific to the Coachella Valley and to continue producing community needs assessments every three years. This way, local nonprofits would have a way of measuring changes in the health and wellness of Coachella Valley residents on an ongoing basis, which was needed not only to measure the effectiveness of various health and wellness initiatives, but to identify changing health and wellness needs.

Soucy obtained support from the District's board of directors to help create a nonprofit organization that was initially called the Health Assessment and Resource Center (HARC). The Palm Desert-based nonprofit was incorporated

in September 2006, according to Packer, who subsequently became HARC's first executive director.

Soucy then obtained permission from the California Wellness Foundation to transfer grant funding for the community needs assessment to HARC and additional fundraising efforts were launched to enable HARC to become a freestanding nonprofit organization. The Regional Access Project Foundation also provided HARC with funding as well as free office space during its first two years to help the organization get off the ground.

"This is really going to fill a void," Soucy told *The Desert Sun* in a December 6, 2006 interview. "It's going to help us find where the gaps are, but it will also give us targets to hit in terms of improvements."

Soucy asked Dr. Glen Grayman from the District board if he would be willing to serve as HARC's founding board president. "I agreed, and continued in that role for the first nine years of HARC's existence," Dr. Grayman said.

HARC conducts health surveys that provide data on more than 150 health topics, which have continued to inform the District's priorities for grant funding ever since.

The first HARC survey was released in 2008, with subsequent surveys being conducted every three years. The survey statistics have highlighted very stark social, economic and healthcare realities facing the majority of people who live and work in the Coachella Valley, which sharply conflict with the valley's long-cultivated image as an affluent "playground of presidents" and the Hollywood elite.

Indeed, HARC statistics reveal extensive poverty in the valley and the extent to which socioeconomic factors such as household income, educational attainment and occupation have a direct impact on people's health.

But HARC's mission hasn't been solely to provide data for Desert Healthcare District, but to provide statistics that any nonprofit organization could freely use in their own grant applications to improve health and wellness across the Coachella Valley, Dr. Grayman said.

HARC's data has enabled nonprofit organizations to secure \$14.3 million in grant funding for critically needed programs and services from the 2010, 2013 and 2016 surveys alone, said Dr. Jenna LeComte-Hinley, CEO of HARC, whose name was recently changed to Health Assessment and Research for Communities. "Organizations who use HARC's data to support their requests for funding bring in millions of dollars (in grants) each survey cycle," she said.

"In terms of long-lasting effects, the District's funding of HARC and the ability of HARC to do their surveys has really helped a lot of nonprofits to be able to make their case for funding to larger foundations in Los Angeles and elsewhere that are not familiar with this area," said Jack Newby, executive

director of The Joslyn Center in Palm Desert, which provides a variety of health and wellness programs and services for seniors.

Packer, who served as HARC's first executive director until 2015, said local hospitals also use its data to recruit physicians to the Coachella Valley.

"HARC is a phenomenal regional resource," said Palm Desert Mayor Kathleen Kelly. "They do such a superb job of providing hard data so that nonprofits really understand the extent of need so that they can target their services. They do extremely high quality work."



HARC surveys are available online free of charge at <https://harcdata.org>.

**Photo Left:** HARC staff in 2018, from left to right, Theresa Sama, administrative manager; Jerry Quintana, research associate; Dr. Jenna LeComte-Hinley, executive director; Dr. Casey Leier, director of research and evaluation; and Chris Morin, research associate. **Middle:** Dr. Jenna LeComte-Hinley, HARC's executive director. **Right:** Eileen Packer, who served as executive director of HARC from its founding until 2015. Courtesy of HARC and Eileen Packer.

## Help For People Without Health Insurance

### Desert Healthcare District has provided nearly \$3.5 million in grants to nonprofit healthcare providers that serve people without medical and dental insurance.

Ever since it first took on the role of issuing grants to nonprofit health and wellness organizations, Desert Healthcare District has recognized the need to help fund organizations that provide free and low-cost healthcare to residents of all ages who do not have health insurance.

In fact, according to HARC's 2019 Coachella Valley Community Health Survey, 48,740 Coachella Valley residents ages 18 to 64 do not have health insurance. That's one fifth of the valley's adult population.

Additionally, HARC found that one in four Coachella Valley residents or 61,647 residents are living at or below the poverty line.

With these problems in mind, Desert Healthcare District has issued nearly \$3.5 million in grant funding to several

nonprofit healthcare providers over the past 11 years, including nearly \$2.9 million for Borrego Health and \$192,000 for Clínicas de Salud del Pueblo, Inc. Both organizations are Federally Qualified Health Centers that also receive state and federal funding, which enable them to provide healthcare services to both insured and uninsured patients with a sliding fee schedule based on the patient's ability to pay.

Borrego Health has locations in Cathedral City, Palm Springs, Desert Hot Springs, Coachella and Oasis, while Clínicas de Salud del Pueblo has locations in Coachella and Mecca.

The District has also provided Coachella Valley Volunteers in Medicine (CVVIM) with nearly \$400,000 in grant funding since 2012. CVVIM has an office in Indio but serves patients throughout the valley, offering free medical and dental care. CVVIM receives no government reimbursements of any kind and is fully funded through gifts, grants, donations and volunteer efforts.

### People Without Health Insurance Come From All Walks Of Life

Before he started volunteering with Coachella Valley Volunteers in Medicine (CVVIM), Dr. Les Zendle worked as

a physician for Kaiser Permanente for 31 years, including six years at its office in Palm Desert.

But shortly after retiring from Kaiser in December 2010 and beginning his volunteer work with CVVIM in January 2011, Dr. Zendle remembers having patients come to him who had previously been his patients at Kaiser.

**“When I started volunteering, we were really in the nadir of a recession. I was seeing a couple of my patients from Kaiser who had lost their jobs and lost their health insurance,” Dr. Zendle said.**

According to HARC's 2019 Community Health Survey, 20.6 percent of working Coachella Valley adults ages 18 to 64 are uninsured. That's nearly double California's statewide average of 10.7 percent of working adults being without insurance. The HARC survey also found that 13.1 percent of the valley's population, or 5,874 people, did not have health insurance due to a lost job or changed employer.

Dr. Zendle said he has treated many patients over the years who lack insurance coverage for one reason or another. But not having medical insurance puts them at great risk if they have medical conditions that require attention.



**While CVVIM does not provide emergency care, some of its volunteers have saved the lives of patients without insurance, including Dr. Charlie W. Shaeffer, who correctly diagnosed 37-year-old Hector Murrieta of Indio with Marfan's syndrome.**

**“Words do little justice to the help and the time they gave to me,” Murrieta said. “They practically saved my life. I am so thankful to them.”**



Murrieta, who is married with two teenage children, worked in construction, but started having rapid heart palpitations, nausea and trouble breathing.

Murrieta didn't have medical insurance, but CVVIM volunteers helped him sign up for Medi-Cal and he was able to have open heart surgery at Loma Linda University Medical Center.

**“They replaced several valves and closed a hole in my heart,” he said. “The insurance covered everything.”**

Murrieta said none of this would have happened had it not been for the quick action by Dr. Shaeffer and other volunteers at CVVIM, who realized that he was in danger and needed immediate attention.

**Photo Left: Dr. Les Zendle. Right: Hector Murrieta of Indio had open heart surgery at Loma Linda University Medical Center after being correctly diagnosed with Marfan's syndrome by Dr. Charlie W. Shaeffer of Coachella Valley Volunteers in Medicine. Courtesy of Coachella Valley Volunteers in Medicine and Hector Murrieta.**



"There is no way to pay people back for everything they have done for me," Murrieta said. "I am grateful to God for giving me more life. I feel like I have a chance to be a better person."

While Murrieta's case was extreme, most patients come to CVVIM for routine medical checkups and treatment, said Doug Morin, CVVIM's executive director, who added that the clinic typically treats about 1,000 patients each year.

In 2019, CVVIM provided 3,133 medical or dental consultations for 1,069 unique patients, 491 of whom were brand new patients that the clinic had never seen before. Many of CVVIM's patients are undocumented, but clinic volunteers do not ask about their patients' legal status.

**"We believe healthcare is a human right," Morin said. "That's why we don't ask. We see people who are not eligible for Medicare, Medi-Cal or Obamacare. People need healthcare, regardless. Individual health is a community health issue, regardless of your legal status. This whole (COVID-19) pandemic brings light to that."**

Morin added that CVVIM works hard to encourage its patients and their families to use them for regular checkups. "We really want them to think of us as their medical home," he said. "We are not an emergency department. We're for preventative care and treatment of things like diabetes and hypertension. We want our patients to come as often as they need to for their prescriptions or whatever it is. We tell them there is no charge. We're never going to charge you for the services we provide, even if we need X-rays or lab tests."

Morin said it's critical for people without insurance to understand the importance of proactively taking care of their health by making an appointment with CVVIM. "When people don't have insurance, they tend to get their primary care in the emergency room because they didn't take care of their diabetes or other ailments, which are treatable at a fraction of the cost as opposed to the emergency room, which ends up costing society huge amounts of money," he said.

In addition to offering medical and dental care, CVVIM has a diabetic life coach on staff who hosts a series of four half-day cooking classes four times a year.



**Photo Left:** Physicians volunteering with Coachella Valley Volunteers in Medicine include Dr. Richard Loftus, (left) and Dr. Osama Elbuluk, who are pictured here as they discuss x-ray results with a patient. **Right:** Members of Coachella Valley Volunteers in Medicine's Street Medicine Team include, (from left), Dr. Bill Blashko, Dr. Brian Wexler, Rosa Lucas, NP, and Dr. Joe Scherger. Courtesy of Coachella Valley Volunteers in Medicine.

"Seventy percent of our patients are Latino, and many of them are very hesitant to accept the education we provide about diabetes because mom, dad and their grandparents were diabetic and they lived to be however old. They don't see it as a problem," Morin said.

But CVVIM is trying to educate its patients about the dangers of diabetes as well as the benefits of a proper diet, which is why it offers the cooking classes.

"They don't connect blindness with diabetes or the wounds on grandma's leg that prevent her from walking," Morin said. "It's 'Grandma lost her eyesight' or 'Grandma can't walk too much any more.' We explain that if you are the father or the mother and you don't control your diabetes, if you lose your leg or your foot, that will have a serious impact on your family. You won't be able to cook. You will have to rely on your daughter to cook. If you are the male, you won't be able to work. You could lose your whole leg and be bedridden. Now your adult children are going to have to take care of you. We try to tell people, 'You need to make these changes. Little changes can have a big impact. There are some things you can do to prevent or reverse the progression of disease.' We cook healthy lunches for them. We invite them to bring more family members with them. We will have them try things like kale. They learn how to look at labels, look at the sugar content, look at the carbs, and taste the food we prepare and share it with other people. It doesn't matter whether it's Mexican food or traditional Midwestern food, we've got to learn to mix things up."

Sixty-four-year-old Marisol Rodriguez of Indio has been coming to CVVIM for the past five years for treatment of her diabetes. She has also attended some of the cooking classes, which she says are helpful.

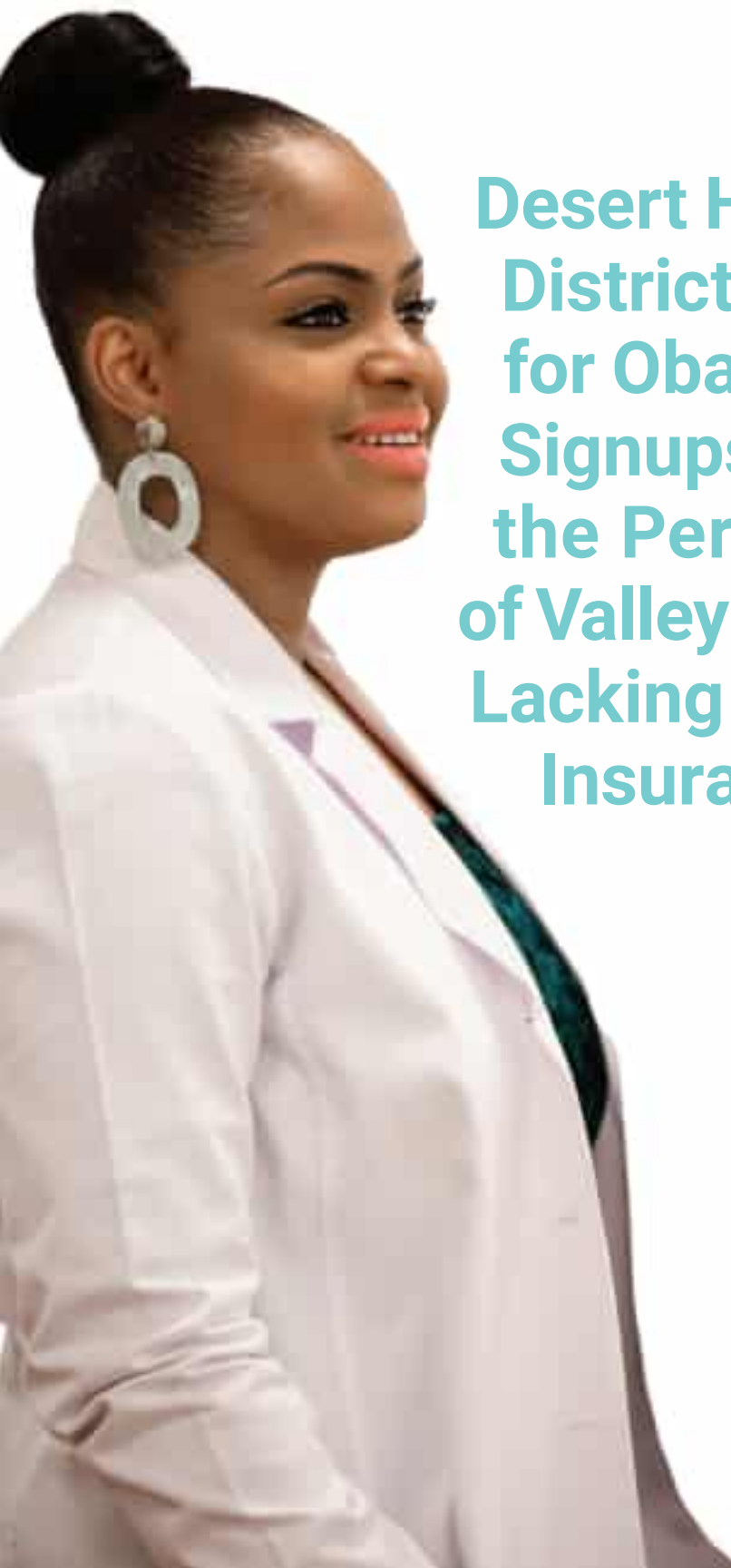
"I like the way they help me," she said in Spanish. "I come for checkups. They check my blood sugar and my blood pressure. They have a dietician, too. I have gone to their classes to learn how to eat better, lower my blood pressure and control my diabetes."

**CVVIM volunteers also provide free healthcare to the homeless. "We go out to the East Valley and find where the homeless people are and give them the medical care that they need," Morin said. "It's almost like battlefield medicine with the irrigation and draining of wounds."**

Morin said his volunteers have built up a good rapport with some of the valley's homeless people.

"We'll also give out socks in the wintertime or hats and sunscreen in the summertime," he said. "Our oldest homeless patient is a woman in her 70s. They trust us. They know that we are there for them. We have gotten some of them into drug and alcohol rehabilitation. We have also helped some get into shelters and housing. Both Martha's Village & Kitchen and Coachella Valley Rescue Mission have their own medical teams, but we refer patients to them, too.

**Recognizing that large numbers of Coachella Valley residents do not have health insurance, Desert Healthcare District and Foundation partnered with The California Endowment to sign up thousands of valley residents for health coverage under the 2010 Affordable Care Act (ACA), which was signed into law by President Barack Obama.**



## Desert Healthcare District Funding for Obamacare Signups Reduced the Percentage of Valley Residents Lacking Health Insurance

The District and Foundation invested more than \$650,000 for this initiative, which paid for “health navigator” positions across the valley to sign people up for Covered California, the state insurance program developed in response to the ACA, as well as Medi-Cal, the existing state program that pays for a variety of medical services for children and adults with low or limited income.

“The grant also paid for our staff to do enrollment assistance. We did outreach and community education, including weekends, to promote the Affordable Care Act,” said Dr. Glen Grayman, who served as a District board member at that time.

The District received just under \$535,000 in funding from The California Endowment, which was also used to pay for “health navigators” at five nonprofit organizations with locations throughout the Coachella Valley to sign people up for Covered California.

The participating nonprofits included Clinicas de Salud del Pueblo, Inc., Borrego Health, Catholic Charities, FIND Food Bank, Health to Hope Clinics and Planned Parenthood. Their collective outreach efforts complemented similar initiatives by Riverside County and local hospitals.

By 2015, the District and its partners had submitted more than 10,000 insurance applications on behalf of an estimated 22,000 Coachella Valley residents, according to the District's internal tracking report.

As a result, nonprofit healthcare providers reported significant declines in the numbers of Coachella Valley residents without health insurance between 2013 and 2015. For example:

- Borrego Health saw its percentage of uninsured patients fall from 21 percent to 8 percent.
- Clínicas de Salud del Pueblo saw its percentage of uninsured patients fall from 17 percent to 4 percent.
- Planned Parenthood of the Pacific Southwest saw its percentage of uninsured patients fall from 87 percent to 66 percent.

Desert Regional Medical Center also reported a significant decrease in the percentage of indigent hospital patients, which fell from 3.05 percent in 2010 to 0.33 percent in 2015, according to statistics compiled by the District.

Health Assessment and Research for Communities (HARC) also documented the impact of the ACA outreach effort in its 2016 report, which noted that the percentage of Coachella Valley residents without healthcare coverage fell from a high of 33.6 percent in 2013 to 13.9 percent in 2016.

Unfortunately, some of the gains in health insurance coverage for Coachella Valley residents that were achieved during the Obama administration were lost during the Trump administration. According to HARC's latest statistics, the percentage of Coachella Valley residents without health insurance rose to 20.6 percent by 2019.

"The signup efforts by (Desert Healthcare District) and its partners resulted in a lasting improvement or decline in the

number of uninsured Coachella Valley residents. We've lost out on some of the progress that was made with the first major ACA enrollment push, but we are still in a better situation than we were before these efforts," said Dr. Jenna LeComte-Hinely, HARC's CEO.

## Counseling for People in Crisis

**Desert Healthcare District has provided support for free and low-cost behavioral health and case management services for more than 20 years.**

One of the greatest unmet healthcare needs in the Coachella Valley involves behavioral healthcare, which involves everything from psychological counseling and case management services to drug and alcohol rehabilitation centers.

Desert Healthcare District has issued nearly \$3 million in grants to nonprofit clinics and rehabilitation centers over the past 20 years, nearly half of which it has provided to Jewish Family Service in Palm Springs.

“Jewish Family Service of the Desert primarily serves seniors living on fixed incomes, adults

earning low wages in service industry and agricultural jobs, and other individuals at risk of becoming homeless,” said Kraig Johnson, the organization’s executive director.

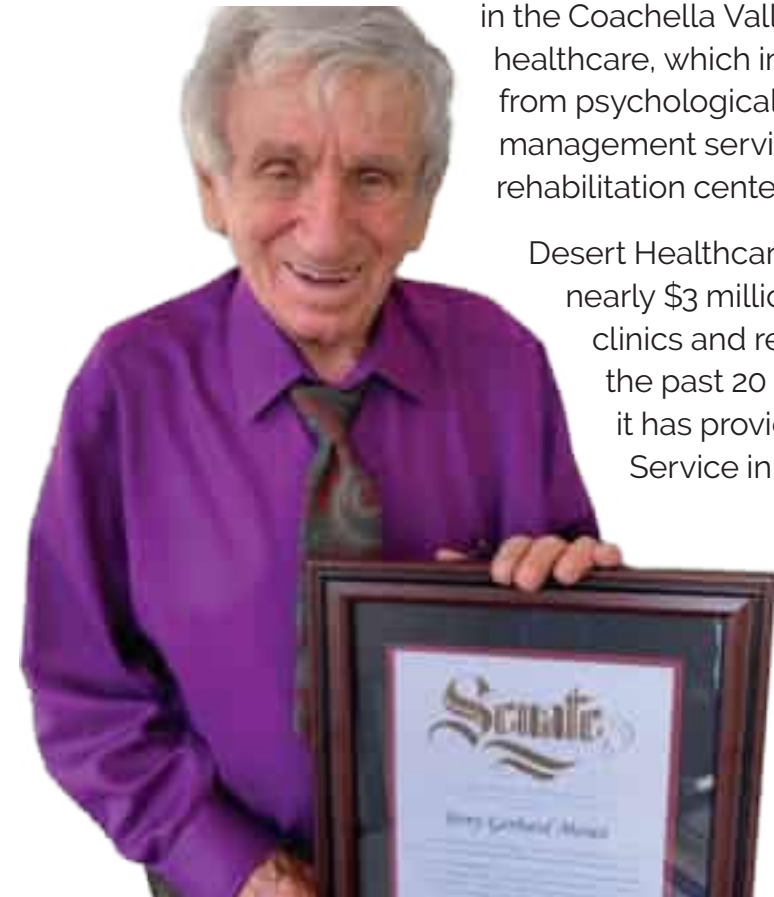
He said funding from Desert Healthcare District has allowed Jewish Family Service to provide services to those for whom support might not otherwise be available.

Established in 1982, Jewish Family Service provides over 10,000 face-to-face consultations, including case management services, each year. Prior to the COVID-19 pandemic, additional services included senior socialization programs, which took place 12 times a month at six different locations. Jewish Family Service also organized special social programs for Holocaust survivors, about 40 of whom still live in the desert.

Clients include Jerry Moses, who fled Nazi Germany for Shanghai, China with his mother, brother and sister. “We got out in 1941,” he said. “We were marked for death.”

Moses, who was 86 at the time of this writing, was only seven years old when he and his mother and siblings escaped to China. They were among some 20,000 Jews who were offered political asylum by the Chinese during World War II.<sup>46</sup>

*Photo: Jerry Moses of Cathedral City is a Holocaust survivor. He said he is grateful for the services he has received from Jewish Family Service. Courtesy of Jerry Moses.*



"We barely got out, crossing through all of Russia to Siberia to Shanghai," he said. "I will never cease being grateful to the Chinese people in the area of Shanghai. They let us live among them when most of the world wanted to see me dead or didn't care if I was alive."

Moses lived in China for several years before traveling around the world. He lived in Chile for nearly two decades before settling in Los Angeles, where he became successful in the garment industry. Then came another series of crises. "I got divorced. I lost my business. I lost my house in Beverly Hills," he said.

Moses eventually relocated to Palm Springs, where he contacted Jewish Family Service for help getting himself re-established. "I came to this area completely broke," he said. "I suffer from anxiety attacks, panic attacks and getting sick with COPD (Chronic Obstructive Pulmonary Disease). But Jewish Family Service helped me tremendously. I am still in touch with them."

**Moses, in fact, still has nightmares from the trauma he suffered as a little boy in Nazi Germany when it was too dangerous to even go outside for fear that he would be killed. Now living in Cathedral City, he said he is grateful to be able to call his therapist at Jewish Family Service when he needs someone to talk to.**

Other Jewish Family Service clients include Jasmine Landeros, a 26-year-old divorced mother of three from Desert Hot Springs who credits her therapist from Jewish Family Service for helping her get through the toughest period of her life.

**"I was in a domestic violence relationship and didn't realize it," she said. "I grew up without my parents. At first, I thought it would be best for me to stay in the relationship. Then one day I decided to leave. It has been one of the best choices I ever made in my life."**

Landeros said her therapist not only helped her process the anger she felt inside, but helped her believe in herself. "Thanks to (my therapist), I graduated from college. I finished school with honors, and I started working at a clinic office," she said.





Jewish Family Service is one of several behavioral health providers that Desert Healthcare District supports with grant funding. Since 1999, the District has issued over \$1.5 million in grants to the Palm Springs-based organization, which provides a variety of social services, such as mental health counseling; case management, including assistance with applications

for benefits; as well as emergency financial assistance with food, shelter and medications.

During the COVID-19 pandemic, Jewish Family Service redesigned its functions so that staff could observe shelter-in-place orders and work remotely while ensuring that their clients could still receive services.

“We have taken drastic steps to convert our behavioral health services to ‘telecare,’ and case managers can still help residents connect to benefits, including unemployment, while also offering emergency financial assistance to those who are unable to pay for basic necessities and are at-risk of homelessness,” Johnson said.

Jewish Family Service’s community outreach program, which previously offered live programming to help reduce senior isolation, has been converted, providing weekly “well-check” phone calls to clients, food deliveries, and connections to case management for additional support and/or mental health in order to arrange counseling sessions with a therapist, Johnson said.







## Other Treatment Centers Receiving Desert Healthcare District Support

Desert Healthcare District has often supported nonprofit organizations that provide behavioral health services to Coachella Valley residents. For example, the District has provided nearly \$600,000 to Family Services of the Desert in Desert Hot Springs since 1999 as well as \$433,000 in grants to The Ranch Recovery Center in the same city. The District also provided a \$236,000 grant to San Geronio Memorial Hospital Behavioral Health Center in 2015, which enabled it to expand its services to Palm Springs. Additionally, the District has provided \$75,000 in grant funding to the Barbara Sinatra Children's Center for counseling of teenage victims of abuse.

## Services for Victims of Domestic Violence

### The District rescued Shelter From The Storm in 2009 after Governor Arnold Schwarzenegger eliminated funding for every battered women's shelter in California.

According to the California Women's Health Survey, about 40 percent of California women experience physical intimate partner violence at some point in their lifetimes.

Of those experiencing intimate partner violence, 75 percent of victims have children under the age of 18 living at home.

In the Coachella Valley, more than 1,200 women and children receive emergency shelter, food and counseling services each year from Shelter From The Storm, the only battered women's shelter for all of eastern Riverside County.

But in July of 2009, California Governor Arnold Schwarzenegger used a line-item veto to eliminate all of the state's funding to support battered women's shelters. Schwarzenegger's actions sent shock waves through the Coachella Valley, and prompted Desert Healthcare District

to intervene by providing Shelter From The Storm with a \$250,000 grant.

"The thought of these women and children having nowhere to go in their time of need was more than we could handle," District President Dr. Glen Grayman told *The Desert Sun* in a November 25, 2009 interview.

Lynn Moriarty, the shelter's executive director at that time, who retired in 2012, told the newspaper the grant would allow Shelter From The Storm to continue its operations for the remainder of the fiscal year. "This grant — it's not an exaggeration to say it's going to save some lives," she said.

Indeed, domestic violence often escalates into murder.

**"Domestic violence is a silent killer, as abusers wear their victims down until the slightest provocation turns abuse into homicide," *The Desert Sun* wrote in a March 6, 2016 report, adding, "More than half of the women murdered in the desert over the past five years were killed by the men they love."**

Domestic violence is especially frightening for undocumented women who fear if they dare to contact police, they could be deported.

"I literally felt like I was in prison," said a young Latina who we'll call "Elena" to protect her identity.<sup>47</sup>

Elena initially thought she was living in paradise. Leaving behind Mexico's poverty, she found her way into California and married a man who seemed like a perfect fit.

"He didn't smoke. He didn't drink. He didn't do drugs," she said in Spanish. And for the first six months of their marriage, he was a perfect gentleman. Then the nightmare began.

"It seemed like he changed overnight," she said. "He became very abusive — physically, psychologically and verbally abusive."

For the next year and a half, Elena found herself and her baby boy trapped in the kind of abusive relationship that strikes nearly one out of three women in the U.S. in their lifetimes, according to the National Coalition Against Domestic Violence.

Only in Elena's case it was worse. Being undocumented, Elena feared that if she told authorities about the abuse she was suffering that she and her son would be deported.

So, she kept quiet and endured her husband's physical, psychological and emotional abuse for about a year and a half. A friend later suggested she start using her cell phone to take photographs of her bruises to show police.

She did. Then one day, after enduring another beating, Elena went to a police station near her home and gave them a report.

"I still had bruises on me when I filed the report," she said. And when the police found Elena's husband, they arrested him and put him in jail — for all of about six hours before he was released on bail.

But in that short period of time, Elena's life began to change.

"The police put me in touch with Shelter From The Storm and relocated my son and me," she said.

Lt. Misty Reynolds, who was Coachella's assistant chief of police when Elena shared her story, said she feels heartbroken by the stories she hears of women like Elena who are being abused in their homes and don't call police for fear they will be deported. "Undocumented women who are suffering from abuse in the home need to know they can call us because we can help," she said.

Elena also learned something else she didn't know before: Immigration laws give undocumented victims of intimate partner domestic violence the right to apply for residency.



*Photo: Angelina Coe, executive director of Shelter From The Storm. Courtesy of Angelina Coe.*

"This is a message every undocumented woman needs to hear," said Angelina Coe, the current executive director of Shelter From The Storm.

"If you have photographs and statements of witnesses who can prove you suffered abuse, you can apply for legal residency. Undocumented victims of domestic violence need to know that the law is on their side."

Unfortunately, Coe said, thousands of undocumented women in Riverside County and across the United States are needlessly suffering from abusive relationships because they don't know the law.

"All they need to do is call our crisis line at (760) 328-7233 and we can give them information that can help them end the nightmare," Coe said.

Shelter From The Storm not only relocates abused women into its undisclosed and confidential shelter program, but it provides them with counseling, including group sessions, as well as assistance finding and applying for benefits, seeking employment and applying for residency and/or citizenship.

After Shelter From The Storm relocated Elena and her son to a safe house and told her that both she and her son could apply for legal residency, Elena said she felt her nightmare could finally come to an end.

Coe said there are thousands of women like Elena in the Coachella Valley, particularly in the eastern Coachella Valley. Shelter From The Storm can help them, although at the time of this writing the Trump administration had made it more difficult for undocumented victims of domestic violence to obtain legal residency.

"This administration has made it scarier and more restrictive for undocumented women to come forward that are fleeing and experiencing domestic violence, especially with the delay at the beginning of 2020 with the reauthorization of the (Violence Against Women Act) and proposed funding cuts for services," Coe said. "Abusive partners were using threats of calling ICE and sending them to detention centers to continue to have power and control over their victims.

**"Assistance is still available for undocumented women to apply for residency and assistance due to domestic violence. The process is a long one and there are requirements they need to meet to be eligible to apply. Deportation and other forms of detention and family separation may still be imposed and are a true possibility. However, there are programs and services available to help through organizations such as Catholic Charities, Safe/Family Justice Centers, and Inland County Legal Services.** Undocumented women would need to contact them for eligibility requirements and funding availability. One thing is certain, they need to get more information and educate themselves as to their rights as victims of domestic violence and even victims of crime and trafficking, depending on certain circumstances and criteria."

Coe said it's also important for women to know that abusive behavior is learned. So, if they want to stop the cycle of abuse in their families, they have to take action.

She added that it's also not always men that start the cycle of abuse in a family. Elena's husband learned abusive behavior from his mother — a fact Elena did not learn until several months after she married him.

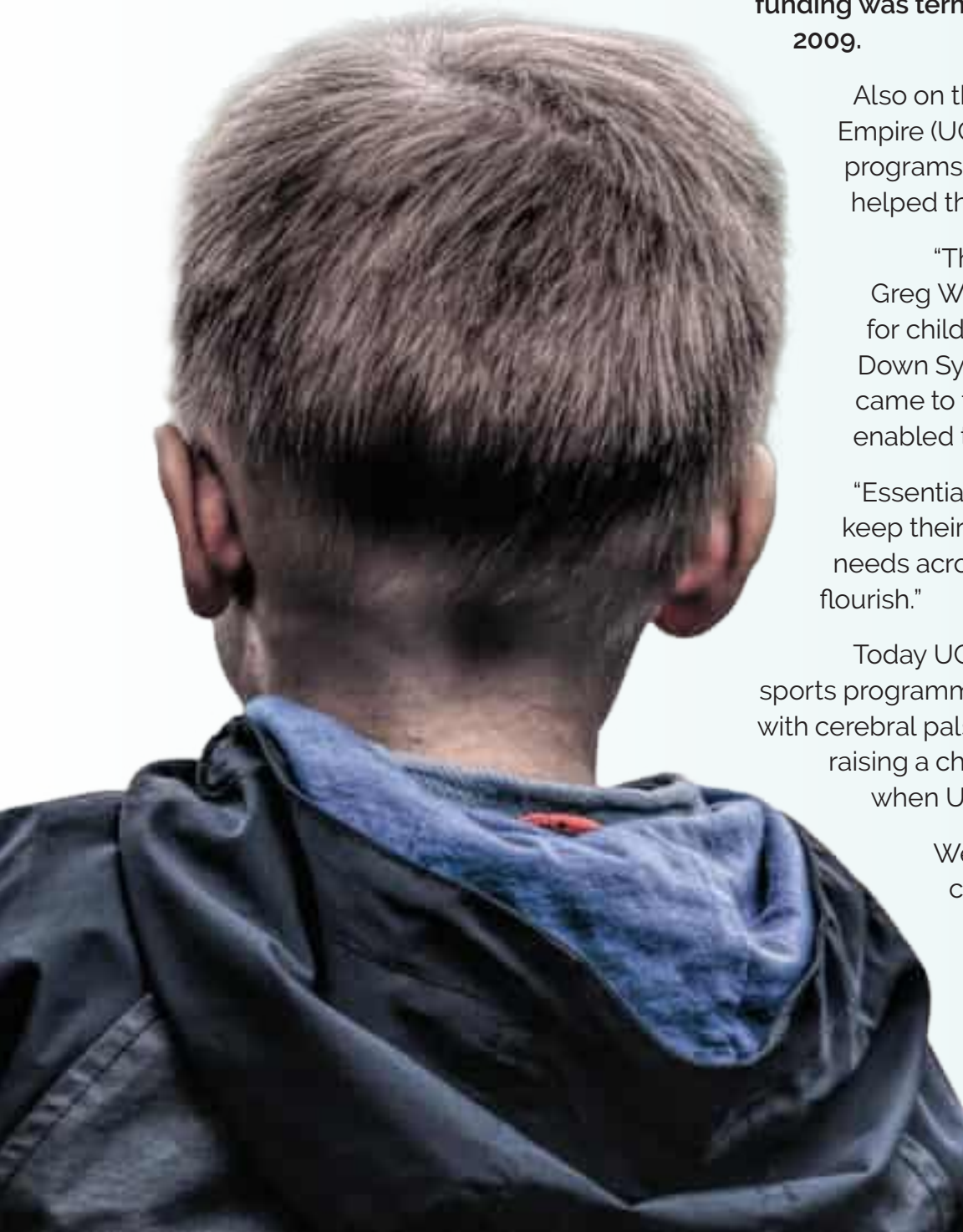
Elena agreed to share her story because she wants to help free other undocumented women from the physical, psychological, and verbal abuse they are suffering from abusive husbands in the United States. She also commended Shelter From The Storm for providing her with therapy as well as shelter and support to get back on her feet and create a new life for herself and her son.

“My son was the one who really inspired me to end the nightmare,” she said. “I didn’t want my son to grow up like that.”

Desert Healthcare District provided more than \$750,000 in grants to Shelter From The Storm between 2001 and 2014, with the biggest grants being for \$250,000 in 2009 and \$185,000 in 2012. Some of its earliest grants were issued for specific purposes, including \$50,000 in 2001 to hire a part-time psychiatrist; \$75,000 in 2003 for staff funding; and \$125,000 in 2004 to have Shelter From The Storm provide a domestic violence education and intervention program for College of the Desert’s nursing program. The District also issued a \$56,000 grant in 2010 to enable Shelter From The Storm to provide outreach and advocacy services in Desert Hot Springs, which suffered from a high rate of domestic violence. The District provided additional grants to help cover the cost of food for women and children housed in the shelter’s safe house.



**The District has Provided Critical Support to Parents of Children with Developmental Disabilities**



**Shelter From The Storm wasn't the only Coachella Valley nonprofit whose state funding was terminated by Governor Arnold Schwarzenegger's budget cuts in 2009.**

Also on the chopping block was United Cerebral Palsy of the Inland Empire (UCPIE) in Rancho Mirage, whose services include after-school programs across the valley for more than 80 children with disabilities that helped them with social and independence skills.

"The state felt that socialization programs were not needed," said Greg Wetmore, president and CEO of UCPIE, which provides services for children with all disabilities, including autism, cerebral palsy, epilepsy, Down Syndrome and other special needs. But Desert Healthcare District came to the rescue, Wetmore said, and provided grant funding that enabled the Rancho Mirage-based nonprofit to continue its programming.

"Essentially, Desert Healthcare District gave UCPIE the ability to not only keep their after-school program now serving over 92 children with special needs across the Coachella Valley, but also the leg up we needed to flourish."

Today UCPIE provides in-home respite care to over 316 families, adaptive sports programming for children of all abilities, adaptive bikes that help children with cerebral palsy improve their mobility, facilitated counseling for parents raising a child with disabilities, and a resource referral program that steps in when UCPIE does not provide the service a family needs.

Wetmore said many families across the Coachella Valley have children with special needs. "One family has three children, ages 24, 22 and 16, all in wheelchairs," he said. "We are here to help."

The District has provided about \$500,000 in grant funding to UCPIE since 2006.

## Programs for Seniors

### **Desert Healthcare District has been a longtime supporter of educational and Meals on Wheels programs as well as therapy for people who have suffered from strokes.**

Desert Healthcare District has provided more than \$3 million in funding to nonprofit organizations that have provided senior citizens with everything from flu shots to educational programs to Meals on Wheels programs and therapy to help them recover from strokes.

The Neuro Vitality Center and the Mizell Center in Palm Springs and The Joslyn Center in Palm Desert have been the primary recipients of District grants to provide services to senior citizens, whose lives have been significantly enhanced as a result of their respective programs. The following sections provide a closer look at how these organizations are enhancing the lives of senior citizens.

### **The Neuro Vitality Center provides therapy and activities for people who have suffered from strokes long after their insurance stops paying for such care**

Tariq K. Panni suffered a stroke in 2014 at the age of 64 and was treated at Desert Regional Medical Center.

Then he discovered an unpleasant reality about his medical insurance — It only covered six months of post-stroke rehabilitation therapy. After that, the Palm Desert resident would have to pay for any additional therapy he received on his own.

“The medical community believes that if you extend therapy past six months that you really aren't going to get that much more improvement,” said Beverly Greer, CEO of the Neuro Vitality Center in Palm Springs, which provides post-stroke rehabilitation therapy.

But Greer, who has been running the Neuro Vitality Center since 2005, disagrees, noting that stroke victims who continue to have therapy after six months continue to make improvements.

Desert Healthcare District was intrigued with Greer's approach and challenged her to produce data that would substantiate her assertions.

“They said, ‘This is great. But can you show us that you really are having any effect on these people?’ ” Greer recalled. “I worked with Kay Hazen and Dr. Glen Grayman and we



invented what we called an organizational research project. We tried to collect data to show the impact on this community. I set up a number of criteria: the number of falls, the number of visits to the emergency room, independence, the ability to ride buses. **We came up with some pretty good numbers indicating that while our people were not showing huge improvement medically, they were lessening their dependence on the healthcare system and improving their quality of life. From that point, the District has continued to support us pretty dramatically.**

Indeed, the District has consistently provided anywhere from 10 to 20 percent of the Neuro Vitality Center's annual budget — nearly \$2 million in funding between 1999 and 2020 — with the balance coming from other sources, such as the Berger Foundation, Greer said.

The Neuro Vitality Center used to provide its therapy services for free. But it started charging a nominal fee of \$30 per month in 2017 to help offset its costs.

"We're not very fancy here," Greer explained, noting that the center has a staff of 10 and as many as 20 volunteers.

"Nobody's making any money here. Everybody is working from the heart. We have staff members who have been here for 30 years."

Center services include group and individual counseling, occupational therapy, physical therapy and speech therapy as well as transportation, meals and daytime activities for adults.

Panni, for his part, who was 70 at the time of this writing, said the continuing therapy he has received from the Neuro Vitality Center has made a significant improvement on his quality of life.

"My stroke affected the left side of my brain and the right side of my body," he said. "I move with a cane or without it. My right hand has strength, but not enough to be useful. I try to be as cautious as possible. I use a cane outside the house.

I take small steps to ensure my stability. The stroke affected my ability to walk and to use my hands. My left arm is now the good arm. Mentally, my wife was a little concerned when I slurred something once. My neurologist set up an evaluation. But I have been lucky. The stroke has not affected my speech, like other clients."

Greer, who authored the 2011 book, *Long Term Rehabilitation for Stroke and TBI*, said the amount of damage



**Photo:** Seniors enjoy the "Brain Boot Camp" at The Joslyn Center. Courtesy of The Joslyn Center.



caused by a stroke depends on the size of the clot and the duration of the blood restriction. The more severe and debilitating the stroke, she said, the more difficult it is for people to recover, simply because of the isolation they often experience as a result of their condition.

Aside from the lack of insurance support for long-term therapy, Americans tend to isolate or neglect people who suffer from debilitating conditions, Greer said.

**“We have a cruel way of dealing with people who are severely ill in this country. It really is a tragic thing. But we treat every person with dignity no matter how badly damaged they are,” she said, noting that the Neuro Vitality Center has expanded its services to include adult day care as well as treatment for people suffering from Parkinsons and multiple sclerosis (MS).**

**“The Center is using its years of experience to expand treatment to people with any neurological disorders and other chronic illnesses,” Greer said. “Starting two years ago, (our) doors opened much wider**

**to help those in need and to expand medical and social services to make sure no one is left behind.”**

At the time of this writing, the Neuro Vitality Center was treating about 300 patients each year.

Greer, for her part, believes the therapy is worthwhile.

“It gives them hope and it gives them life,” she said.

Panni agrees.

“They have employees and volunteers who have an interest in helping people,” he said. “They provide help that is intelligently set up. They have activities that help people who suffer from the aftermath of strokes.”

In addition to providing physical therapy, Panni said, the Neuro Vitality Center provides a healthy and positive setting for people who have suffered from strokes and other conditions affecting the nervous system.

“It provides a social setting for clients to be in the company of others who are suffering similarly,” he said, noting

that people who suffer from strokes benefit from the friendships and emotional support they receive from other stroke sufferers.

"I keep working on making small, incremental gains in mobility and other things that have been affected by my stroke. But what I find at the stroke center is they give me hope," Panni said.

## **District support for the Mizell Center started with Meals on Wheels and continued with a highly successful fall prevention program**

Ardis Danon of Palm Springs was 80 years old when she fell in her backyard, hitting her head on concrete.

"I had a concussion," she said. "I didn't feel incapacitated. But it rattled my confidence and it took me a good two years to feel well again."

One thing that helped Danon in her recovery were the fall prevention classes she took at the Mizell Center in Palm Springs. "It was a terrific course," Danon said. "It was very stimulating. I am so glad I took it."

The course, called "A Matter of Balance," covered everything from simple exercises seniors can do to improve their balance to recommendations on how to make their homes safer and how to get up off the floor if they fall.

**"I found the exercises they provided to be so important," Danon said. "I think people my age don't move around enough. We become too complacent because we ache and we hurt. But the more you keep your body moving, the healthier you are."**

The class even provided advice on basic things, like not running to answer the phone when the phone rings. "In this day and age," Danon said, "you have caller ID and you can always call them back."

Danon also found it stimulating to hear discussions with other older participants in the class who have greater difficulties moving. "It gives you a heads up on what's coming," she said.

Other class participants included 97-year-old Dorothy Irwin and her 74-year-old daughter, Marie, of Palm Springs, who took the class together. "They taught us exercises to help us strengthen our balance, from our feet to our neck," Marie Irwin said. "They gave us information that gives us more confidence as we get older."

Danon and the Irwins are among the more than 1,500 Coachella Valley seniors who have taken fall prevention classes from 2014 through early 2020 through the Mizell Center. The classes were made possible with a \$400,000 grant from Desert Healthcare District.

Harriet Baron, Mizell's director of development, said the Matter of Balance classes have provided critical health and wellness support for many of the valley's senior citizens.

**"Falling is a huge issue in the senior community," she said. "Falling can rob people of their freedom and their independence. If you fall and break your hip, you may go into a nursing facility."**

Even for seniors who survive their falls without serious injuries, it can undermine their confidence in themselves. "You can become so frightened for yourself that you lose confidence in your own abilities," Baron said. "So people then don't go out, and then that leads to isolation, which can be unhealthy in itself."

Baron commended Desert Healthcare District for investing in the Matter of Balance classes, which give seniors mental confidence, knowledge as well as the physical skills they need to navigate their environment safely.

The District was also an early grant provider for Mizell's "Meals on Wheels" program, which uses Mizell staff drivers to deliver meals to seniors across the valley who have difficulty cooking meals for themselves. The meals are prepared and cooked onsite at the Mizell Center's kitchen by Mizell Center staff.

Most of Mizell's Meals on Wheels clients are people who live alone and, for a variety of reasons, maybe ill health associated with age, have a difficult time provisioning their homes and an equally difficult time preparing their meals.

"The District was a very big supporter of the Meals on Wheels program through 2012," Baron said, adding that it set the stage for Mizell to eventually win a contract from the Riverside County Office on Aging to continue the Meals on Wheels program on its own.

"The District made it possible for Mizell to serve more than 30,000 meals a year to nearly 290 unduplicated clients. It also put us in a position to expand our nutrition program and

absolutely set the stage for the work we do today," Baron said. Through its latest contract with Riverside County, Mizell served 200,535 meals to nearly 1,000 unduplicated clients in fiscal year 2018-2019.

The District also made significant investments in flu shots for seniors in its earliest grant-giving days, including a \$50,000 grant for Mizell to administer flu shots in 2000 and another \$50,000 grant for the same purpose in 2001.

## District Helps Fund Award-Winning Joslyn Center Program

Desert Healthcare District provided The Joslyn Center in Palm Desert with a \$112,000 grant in 2018 that helped support a series of classes and a counseling program that have since won national recognition from the National Council on Aging.

These include an Aging Mastery Program, which covers 10 different topics, including the basics of aging mastery, healthy eating and hydration, exercise, fall prevention, sleep, medication management, financial fitness, and community engagement.

A "Healthy Relationships" class includes discussion of the benefits of being socially active, the risks of isolation, and strategies for strengthening friendships and family connections. The curriculum also includes a class on advance planning for healthcare, financial and housing/care decisions.

District funding also supported a "Brain Boot Camp." Developed by the UCLA Longevity Center, the program provides education and addresses anxiety about brain health in an interactive group setting that reduces the stigma of seeking

traditional mental health interventions. The two-session course also provides information on the relationship between nutrition, exercise and brain health.

District funding also supported The Joslyn Center's provision of problem-solving therapy, a Substance Abuse and Mental Health Services (SAMHSA)-supported, evidence-based cognitive behavioral intervention to improve an individual's ability to cope with stressful life experiences. The therapy has been shown to be an effective intervention for seniors suffering from anxiety and depression.

Through The Joslyn Center's various programs, seniors learn about the issues that affect their overall health and acquire new skills on how to cope with the challenges of growing older. Participants in the Aging Mastery course report improved well-being and a positive impact on their relationships with others.

The Joslyn Center's holistic approach to prevention/early intervention behavioral and mental health programs for seniors and older adults is delivered under the supervision of licensed clinical social workers and licensed associate/interns, one of whom is Spanish speaking.

The classes were provided through The Joslyn Wellness Center, which was presented the 2019 Program of Excellence Award in the health and wellness category of the National Institute of Senior Centers' Program of Excellence. The Institute is a division of the National Council on Aging. The District has provided over \$175,000 in grant funding to The Joslyn Center since 2001 for both educational and Meals on Wheels programs.

## **District Provides Funding for the Alzheimer's Association and the Arthritis Foundation**

Desert Healthcare District has provided the Alzheimer's Association with nearly \$100,000 in grant funding since 2005.

The grants have primarily been used to help the association and its partners expand their Spanish Outreach Network to serve the Coachella Valley's Latino community.

The District has also provided more than \$275,000 in grant funding to the Arthritis Foundation since 2003, primarily for its self-help courses, which help people suffering from arthritis. Classes have also been provided that teach participants how to take a proactive approach to arthritis with exercise and proper nutrition, how to communicate effectively with your physician, and how to manage arthritis-related pain, fatigue and stress.

## Support for the Desert AIDS Project

### Desert Healthcare District has provided the Desert AIDS Project with nearly \$2 million in grants since 1999.

Desert Healthcare District issued its first grant to the Desert AIDS Project in 1999, but by that time the District already had more than a decade of experience providing treatment and compassionate care for patients with AIDS.

In addition to helping launch the Coachella Valley AIDS Consortium, a network of healthcare providers focused on treating patients with the Human Immunodeficiency Virus (HIV), which causes AIDS, the District operated a Special Care Ward for patients with AIDS on the third floor of Desert Hospital.

Since 1999, however, the District has provided the Desert AIDS Project with nearly \$2 million in grants as well as three parcels of land on the corner of Sunrise and Vista Chino, which the Desert AIDS Project used to build the 81-unit Vista Sunrise apartment complex for low-income patients with HIV. The apartments, which opened in 2007 on land

immediately behind the Desert AIDS Project office, were built as a collaborative effort with Riverside County and the city of Palm Springs.

The District's financial support includes a \$151,000 grant to computerize patient records in 2011 and a \$500,000 grant in 2014 to support the massive Get Tested Coachella Valley outreach program.

In 2015, the District provided the Desert AIDS Project with an \$800,000 grant to help support its construction of THE DOCK, a walk-in, no-appointment-necessary clinic that provides testing for HIV and other Sexually Transmitted Infections (STIs) along with referrals for treatment.

**“Desert Healthcare District’s partnership with the Desert AIDS Project is critical to ending the HIV epidemic and addressing the region’s social determinants of health. Their support for our infrastructure, programming and outreach efforts saves lives,” said David Brinkman, CEO of the Desert AIDS Project.**

The District was one of more than 50 organizations that provided funding for the Desert AIDS Project’s Get Tested Coachella Valley program, which tested 80,000 people and provided HIV treatment that effectively reduces the risk of HIV transmission in the valley, Brinkman said.

Get Tested Coachella Valley, known as Házte la Prueba Valle de Coachella in Spanish, involved testing, treatment and education. Studies have shown that once people who have HIV are in treatment, the risk of transmission declines by 96 percent.

The campaign involved not only testing at the Desert AIDS Project office in Palm Springs, but, more importantly, testing at private medical practices, hospitals and Federally Qualified Health Centers across the Coachella Valley.

"The purpose of the campaign was to test as many people as possible," said Jose de la Cruz, the Desert AIDS Project's community health testing and outreach coordinator.

The campaign also involved testing at special events, such as the Mecca Health Fair, as well as direct community outreach. "We would go to cooling centers or to food banks because that's where we knew people would be," said April Cruz, Desert AIDS Project's community health testing and outreach manager.

Dr. Shubha Kerkar, the Desert AIDS Project's director of infectious diseases, said testing has been critical in stopping the spread of AIDS in the Coachella Valley.

"The disease is usually transmitted by people who don't know they have it," she said, adding that it can take as long as

11 years before the initial symptoms of HIV begin to appear. As a result, she said, people who have been unknowingly infected with HIV can transmit it to their sexual partners, putting them at tremendous risk.

"Palm Springs and the Coachella Valley in general have an incidence of people living with HIV that is somewhere between two and three times that of anywhere else in the U.S.," she said.



But by testing as many people as possible, the disease can be stopped in its tracks because treatments are now available that can suppress the virus so that people who have it can no longer infect other people. "Finding out that you have HIV or not is very important," Dr. Kerkar said, adding that treatment can be provided before patients develop symptoms.

Nearly 600 Coachella Valley residents tested positive for HIV during the Get Tested Coachella Valley campaign, and the majority of them were linked to providers for follow up treatment, Dr. Kerkar said.

The Desert AIDS Project continues to offer testing for HIV and other Sexually Transmitted Infections along with referrals for treatment at THE DOCK, its walk-in clinic built with District funding.

# The Incidence of AIDS in the Coachella Valley







**The greater Palm Springs area has historically had one of the highest concentrations of people living with HIV in the country. According to a 2018 study by Riverside University Health System:**

- The prevalence of people living with HIV in Palm Springs is 7,300 per 100,000, which is nearly 20 times higher than California overall, which has 340.3 per 100,000.
- Two thirds of all people living with HIV in Riverside County reside in the eastern part of the county, meaning the Coachella Valley and other desert regions.
  - Eastern Riverside County is home to an older group of people living with HIV: 42.5 percent of all people living with HIV in the eastern part of the county are 60 and older, compared to 17 percent for the rest of the county.
- The median age of all persons living with HIV in eastern Riverside County is 58, compared to 49 for the rest of the county.
- From 2009 through 2018, there have been 1,021 new HIV cases diagnosed in eastern Riverside County, an average of 102.1 new cases each year.
- Most new HIV diagnoses in eastern Riverside County are among white, non-Hispanic men. Males account for 94.9 percent of new cases, while females represent 5.1 percent. White, non-Hispanic men account for 60.7 percent of new cases, while Hispanic men account for 31 percent. African American men account for 3.9 percent of new cases, while people of other ethnicities represent 4.4 percent.

## Help for Families with Disabled Children

**Desert Healthcare District has been a key supporter of Pegasus Therapeutic Riding, which provides equine-assisted therapy to children and adults with developmental disabilities.**

Desert Healthcare District has provided nearly \$700,000 in grants to Pegasus Therapeutic Riding, a Palm Desert-based nonprofit organization that provides equine-assisted therapy to children and adults with developmental disabilities.

**“They are our angels,” Pegasus Program Director Chase Berke said of the District, which provides about a third of its annual funding. “We couldn’t do this without them.”**

Pegasus relies solely on grants and donations to support its work. “Our horses are donated to us. Our funds are limited. Every penny that we get literally goes to the care of the child, and the care of the horse,” Berke said.

The District has provided grant funding to Pegasus since 2000. To fully appreciate the value of equine-assisted therapy provided to families with disabled children, consider its impact on Nolan Simpson, who was born with cerebral palsy. At age 23, he cannot talk, speak, walk or sit.

“In the beginning, when he was two, he couldn’t even sit up in a shopping cart,” said Nolan’s mom, Molly Simpson of La Quinta. “He would literally fall to the side. I used to stuff pillows next to him to prop him up.”

But after she started taking Nolan to have equine-assisted therapy, in which a guided horseback ride is part of the therapeutic process, she noticed a big difference. “After his first three sessions, he sat up on his own in the cart. Just from riding, it strengthened his core,” Simpson said.

Nolan sometimes experiences anxiety, which is followed by seizures. But Simpson says equine therapy helps with that, too.

“I thought maybe the horses would help him with his anxiety,” she said. “I took him and it was as if he didn’t have any anxiety at all. My protocol now is to take him for equine therapy whenever I see signs of anxiety.”

Best of all, equine therapy is the one thing that can bring a smile to Nolan's face. "It brings him joy and calmness and relaxing and an overall feeling of happiness," Simpson said. "It's physical, but it's also mental for him. He doesn't stop smiling and laughing. I'm just happy that he has that moment. There's not much I can do at home to bring him that feeling. As parents, we want to bring joy to our children. It's not something you would ever want to take away."

This is precisely why Desert Healthcare District has provided nearly \$700,000 in grant support to Pegasus since it first started issuing grants to nonprofit health and wellness organizations.

Equine-assisted therapy has its roots in antiquity and was initially developed in Europe. In the 1960s, equine-assisted therapy was the term used to define its application to physical and mental health issues.

"When we started in 1982, there weren't many people using equine therapy for special needs and disabilities," Berke said. "It's now proven that it makes a big difference. It helps improve the quality of life for our clients."

Berke said it's important for people to realize that equine therapy is not designed to provide entertainment, but to help the client improve physical and mental wellbeing through a series of range of motion exercises and other interactions with a horse.



"We don't give pony rides," she said. "We literally are about equine-assisted therapy from the connection with the horse and the volunteers. It builds the clients' trust and their confidence. We work the upper part of the body and the lower part of the body. We get children who are blind, who are deaf, who are confined to a wheelchair and so much more.

We have a lot of delayed speech clients. I've had parents cry because (after equine therapy) they hear their children speak for the first time."

Equine therapy also helps children who are not trusting of other people or who are tactile sensitive, not wanting to be touched.

"We set them up for success," Berke said. "We have them shooting basketball hoops on the horse to help them with their hand-eye coordination. We love to challenge our clients. I'll have them singing when they are on the horse.

They're getting conventional therapy in a non-conventional way, and they are having a blast at the same time."

Pegasus receives its client referrals from hospitals and doctors in private practice and special education classes from all three school districts across the valley.

"The kids that come to Pegasus are mainly from low-income families," Berke said. "They couldn't afford anything like this. We pay for buses to pick them up from school, bring them

to Pegasus and then transport them back to school."

Students from Xavier Preparatory High School, which is located next to Pegasus, also volunteer to help with the clients on Saturdays. Some of the children who initially come to Pegasus as clients progress to the point where they can volunteer to help others as they grow older. "Children on the low spectrum, by the time they are teens, volunteer to help others. They give back," Berke said.

Parents typically come to watch their children ride on Saturdays and many of them invariably bond with other parents who are facing similar challenges with their disabled children. "It's valuable for parents to come and sit and talk with other parents and to learn from each other," Berke said.

Of course, the parents also enjoy seeing their children smile.

"You can just tell by their facial expressions how happy they are when they are on the horse," said Rosario Maloney of Palm Springs.

Pegasus provides equine-assisted therapy for about 200 clients a year, the majority of whom are in elementary and middle school. But Pegasus also provides equine therapy for disabled adults who come from two other nonprofit organizations, Angel View and Desert Arc, and also works with stroke and multiple sclerosis clients.

"Wednesdays are the days that most of our adults come," Berke said.





*Photos: Children with disabilities thrive with the equine-assisted therapy provided by Pegasus Therapeutic Riding in Palm Desert. Courtesy of Pegasus Therapeutic Riding.*



**District  
Support  
for  
People  
with  
Disabilities**

Desert Healthcare District has collectively provided nearly \$3.2 million in grant support for a variety of charities that support children and adults with developmental disabilities, including nearly \$900,000 for Act for MS; \$750,000 for Angel View; more than \$320,000 for Desert Arc; nearly \$700,000 for Pegasus; and \$500,000 for United Cerebral Palsy of the Inland Empire.

## Efforts to Promote Healthy Lifestyles

### Desert Healthcare District Support for CV Link.

Desert Healthcare District has committed to invest \$10 million in CV Link, a multi-modal pathway that spans the Coachella Valley to provide a safe and healthy way to walk and bike from Palm Springs to Coachella.

“Health advocates see the link as an opportunity to counter inactivity and obesity by offering a scenic and auto-free place to bike, run, jog, and inline skate,” *Desert Health News* wrote in its bimonthly report for January/February 2012, adding that the project will provide significant health benefits to Coachella Valley residents.

“Public health research links physical activity to public health, and according to a landmark report published by the Surgeon General in 1996, physical inactivity is the number one public health problem we face,” *Desert Health News* wrote, adding, “Trails provide the ideal link between physical activity and improved

national health. A trail in the neighborhood makes it easier for people to incorporate exercise into their daily routines, whether for recreation or non-motorized transportation.”

Desert Healthcare District was one of the earliest supporters of CV Link. Early on, the District and the Coachella Valley Association of Governments (CVAG) saw immense public health benefits related to CV Link, as it would be a new, widely accessible venue for physical activity whether for fitness, leisure or active transportation.

Studies show that people who live near multi-modal pathways get more exercise and are more likely to meet the U.S. Centers for Disease Control and Prevention's goals for physical activity. Physical activity is also associated with many health benefits, such as weight control, prevention of many chronic diseases and improved mental health. In addition, disabled and elderly individuals may achieve more physical activity by having a safer alternative to walking and bicycling on busy roadways.

By getting people out of their cars, CV Link will also help improve the air quality by decreasing vehicle miles traveled (and thus vehicle emissions). Paving parts of the Whitewater River stormwater channel also will reduce airborne dust and



particulate matter. These are beneficial to helping reduce the amount of air pollution in the Coachella Valley, which contributes to heart attacks, asthma, bronchitis, hospital admissions, lost workdays, and climate change.

*Desert Health News* also cited a study by economist Dr. John Husing, who said the public health benefits of CV Link could produce a \$152.2 million reduction in healthcare costs by 2035.

“As far as I know, no other special healthcare district in the state has made this type of commitment,” Tom Kirk, CVAG’s executive director, told *Desert Health News*, adding, “This Health Care District has demonstrated that they are interested in making an investment in developing a permanent piece of public health infrastructure.”

While some desert residents have criticized CV Link, others say it is critically needed because of the dangers cyclists face on the valley’s roadways. Jim Rothblatt, a 77-year-old retired high school counselor, U.S. Army veteran and cycling enthusiast from Palm Springs, said the desert’s roadways are so dangerous he started a blog called *DesertRoadKill* (<https://desertroadkill.blogspot.com>) where he documents his cycling experiences.

Rothblatt has been advocating construction of a valley-wide bike path for decades to keep cyclists safe. To prove his point, he has compiled a list of 34 bicyclists who have been killed after being struck by motorists on Coachella Valley roadways between December 15, 2003 and April 14, 2020, complete with the names, dates and cities of each fatality. It’s not hard to find cyclists who say they have nearly been killed on Coachella Valley roadways.



*Photos: Recumbent cyclists prepare to ride CV Link. Courtesy of Coachella Valley Association of Governments.*

One of them is Jerry Alcorn, a partially paralyzed 38-year-old father of four from Palm Springs who said he has been hit twice by motorists during the past two years while riding his recumbent bicycle, which is equipped with two, 6-foot tall neon flags.

Alcorn said he rides frequently to improve his health after suffering from a construction accident near Desert Center six years ago. At that time, Alcorn was an overweight construction worker setting up solar panels when a piece of heavy equipment fell over and crushed him, leaving him paralyzed from his thighs to his feet.

"I'm a walking paraplegic," he said. "When I walk, I almost look like I'm drunk. I sway. I have special leg braces."

But Alcorn has found the road to better health by bicycling — actually paracycling — using a three-wheeled, recumbent bicycle that's powered by his hands instead of his feet.

Over the past six years, hand cycling has enabled Alcorn to lose weight and get in shape. He cycles every week using his recumbent bike, which sits just 2.5 inches off the ground.

Trouble is, it's dangerous to cycle on Coachella Valley roadways, he said. One of the drivers who hit him was a hit-and-run motorist, who left Alcorn turned over on his side in the middle of Gene Austry Trail and Dinah Shore Drive. Alcorn was strapped into his hand bike and couldn't free himself to get out of the street.

Another driver, a man with Stage IV cancer, stopped to help move him out of the street. "He told me, 'It could be

worse,'" Alcorn recalled as his rescuer told him about his terminal cancer diagnosis.

Alcorn's rescuer is now deceased, but he's as determined as ever to encourage cities across the valley to provide the necessary funding so that CV Link can be completed.

"This goes beyond physical activity," he said. "It's safety."

While CV Link was initially envisioned as a 50-mile bike path with future possible extensions to Desert Hot Springs and the Salton Sea, the project has since been scaled back to 40 miles. The valley's two wealthiest cities — Indian Wells and Rancho Mirage — have opted not to participate in the project. At the time of this writing, 3.5 miles of CV Link had been built, and CVAG was planning nearly 20 additional miles to be under construction during the second half of 2020. The remaining project segments were expected to be built in the next few years.

## Ready, Set, Swim!

### District Program Teaches More Than 3,500 Coachella Valley Children How to Swim

One of the most popular health and wellness programs launched by Desert Healthcare District is Ready, Set, Swim!

Created and funded in partnership with Palm Springs Unified School District, the program provides eight days of after-school instruction in swimming, fitness and healthy eating. The children receive two hours of instruction each day, with one hour focused on swimming skills and physical activity, and the other focused on nutrition education.

As of June 2020, 3,515 third grade children from Palm Springs, Desert Hot Springs and Cathedral City had received instruction through the program, which not only teaches each child how to swim, but how to eat a healthy diet, both of which are life-long skills that improve health and wellness.

The program includes 50 minutes of swim instruction led by Desert Recreation District and 50 minutes of nutritional education led by the Boys and Girls Club and the Riverside County Department of Public Health.

The U.S. Department of Agriculture recognized the Ready, Set Swim Program as one of four California Supplemental Nutrition Assistance Education success stories in 2017 and publicized the program on its website.<sup>48</sup>

Former Desert Healthcare District CEO Kathy Greco said the program was born out of discussions she had with former Palm Springs Mayor Steve Pougnet and other city officials over how to help improve health and wellness among children.

Greco, for her part, was particularly interested in teaching children how to swim after hearing news reports about two young girls who had died of drowning in Morongo Valley.

"That stayed with me," she said, adding, "If you don't learn to swim by the time you are in third grade, you likely won't learn how to swim. Drowning is the second leading cause

of accidental childhood death. The risks are particularly high for low-income families who may not be able to afford swim lessons.

## ***District Funds a 5-Acre Wellness Park in Palm Springs***

Desert Healthcare District partnered with the city of Palm Springs and Desert Water Agency to build a 5-acre, wellness park in 2005 on undeveloped land owned by the District.

The park features a one-quarter-mile walking and jogging loop, ADA-compliant exercise equipment, as well as healing and fragrance gardens with native desert and other water-efficient plants.

The park is utilized daily by employees from Desert Regional Medical Center and surrounding medical offices, hospital patients and their families as well as neighborhood residents and community members.

## **The District's Partnership with Healthcorps and The Alliance for a Healthier Generation**

Desert Healthcare District provides millions of dollars' worth of grants to FIND Food Bank so that it can provide fresh fruits and vegetables for the 100,000 or more Coachella Valley residents who grapple with food insecurity each month.



Desert Healthcare District and Foundation have also funded a variety of initiatives to promote healthy eating as a way of combatting both diabetes and obesity.

The biggest involved two grants in 2012 totaling nearly \$1.3 million for HealthCorps and The Alliance for a Healthier Generation, which provided two national health education programs.

The District and Foundation's support for these healthy eating programs followed a major study they commissioned by Health Assessment and Resources for Communities (HARC), which found that 49 percent of local children ages 2 to 17 were overweight or obese — exceeding the national average.

When she was vice president of Desert Healthcare District, Kay Hazen traced the history of the initiative in a January 2013 speech to attendees of the second annual Clinton Health Matters Conference at the La Quinta Resort.

"Our Healthcare District and Foundation started working in the Palm Springs Unified School District more than four years ago on this problem following a major study we commissioned on childhood obesity," Hazen said. "In our community, nearly one of every three public school students in grades 5, 7, and 9 were overweight or

obese. In some schools, more than half of all students were overweight. In grade 9, the data showed an increase in 9th graders of more than 60 percent over the previous 10 years. For Latino and low-income children, who represent over three



quarters of our valley's public school students, the challenges are even more extreme.

**Photo:** Cielo Vista Elementary School's 'Ready, Set, Swim!' program "graduates" show off their accomplishment medals with, from left, rear, Boys and Girls Club of Palm Springs President Terry Tatum, Palm Springs Unified Superintendent of Schools Dr. Christine Anderson, Palm Springs Mayor Steve Pougnet, Desert Healthcare Foundation President Kay Hazen, and Desert Healthcare Foundation Chief Executive Officer Kathy Greco. Courtesy of Palm Springs Unified School District.

“The realization that we were raising generation XL and that our kids were on their way to becoming the first in American history to live shorter lives than our parents spurred us into action,” Hazen said, adding, “Schools are powerful places to shape the health and well-being of students, staff and families, yet many don’t have the financial or technical resources to build healthier learning environments. We began working with our local schools to fund nutrition education and breakfast programs and (looked) at strategies to increase access to healthy food, make the school environment healthier, and engage the broader community.

“We started a three-year project in four Palm Springs elementary schools, one a charter school, sponsoring nutrition education, healthy menu changes, adding physical activity and program equipment and after-school activities, parental education and counseling and more.

“We asked ourselves, what if we broadened our reach from one school district and four schools to cover the entire Coachella Valley? At last year’s conference, we were introduced to the Alliance for a Healthier Generation — a partnership between the William J. Clinton Foundation and the American Heart Association. The goal of the Alliance is to reduce the prevalence of childhood obesity by 2015, and to empower kids nationwide to make healthy lifestyle choices. We began working with the Alliance to broaden our footprint and expand our reach to help young people to be healthier throughout the desert. We pledged to bring the Alliance program into every school in the Coachella Valley, every school district, all 92 schools and 71,000 students. And we did,” Hazen said.

In addition to funding healthy eating education programs in schools, the District has provided grant funding for organizations such as Coachella Valley Volunteers in Medicine, which conducts free healthy cooking classes aimed at reducing the incidence of obesity and diabetes in the local community. The District’s efforts to combat obesity and diabetes date back to 2001 with a \$25,000 grant to the Foundation for Diabetes Education.

## Feeding the Hungry

### Desert Healthcare District supports nonprofits that combat food insecurity, which is increasing across the Coachella Valley.

For nearly a century, Palm Springs and its neighboring resort communities have effectively marketed themselves as a playground of presidents and Hollywood stars.

It's an image that is constantly reinforced by the large number of celebrity golf and tennis tournaments and other special events that take place each year, such as the Coachella and Stagecoach music festivals. But there is a much lesser known flip side to 21st century life in the Coachella Valley that is also very true, according to statistics provided by the California Department of Education:

— Of the 68,289 children enrolled in the three public school districts serving the Coachella Valley — Palm Springs Unified, Coachella Valley Unified and Desert Sands Unified — 55,560 kids qualified for the Free and Reduced Price School Meals program during the 2019-20 school year.<sup>49</sup>

— 81.4 percent of all public school children in the Coachella Valley qualify for Free and Reduced Price School Meals. A family of four needs to earn less than \$47,638 annually to qualify.<sup>50</sup>

To make matters worse, these are just the statistics on children and their families. They do not include statistics for working adults, low income seniors, and the homeless. According to HARC statistics for 2019:

— Financial pressures forced 10.4 percent of local adults to cut the size of their meals.

— 3.8 percent of Coachella Valley adults had to go a whole day without eating.

**The fact that many Coachella Valley residents do not earn enough money to adequately feed themselves each month is precisely why Desert Healthcare District has provided more than \$6.2 million in grants to FIND Food Bank and other organizations combating hunger across the valley over the past 20 years.**

FIND Food Bank, the desert's regional food bank based in Indio, is by far the largest organization fighting food insecurity in the valley, receiving nearly \$5.4 million in District

grants between 2000 and 2020, including a \$1.7 million grant in 2009 to help build a larger warehouse facility.

Before the COVID-19 pandemic began in early 2020, FIND was providing food to an average of 90,000 Coachella Valley residents each month, according to Debbie Espinosa, FIND Food Bank's president and CEO.

"That's a huge number for the size of our valley," Espinosa said, adding that FIND is not even reaching everyone who experiences food insecurity. Many people are too embarrassed to tell anyone they need food assistance, while others are not sure how to access food support.

"We don't have people who look emaciated. But there are many people across the valley, including working people, children and senior citizens, who struggle with hunger each day," Espinosa said.

They could be the single parent who is a manager at the local store, the waiter or waitress serving your lunch or dinner, the elderly couple you see in the church or synagogue every weekend, or the children you see walking home from school.

"Hunger is one of the most hidden things out there," Espinosa said. "Many times, people don't realize they are standing right next to someone who has food insecurity because they are embarrassed about not being able to feed themselves or their families. So they don't talk about it."

The problem of food insecurity isn't confined to the poorest areas of the valley, either. "We have distributions in Indian Wells, Palm Springs and La Quinta," Espinosa said,

adding that seniors on fixed income account for almost 17 percent of FIND's total food recipients annually, some of whom come from the more affluent areas of the valley.

Espinosa added that the problem of food insecurity in the Coachella Valley is getting significantly worse, not better, for

a variety of reasons.

While part of the problem is due to the preponderance of largely seasonal jobs in the agriculture, tourism and related service industries, another factor is the high cost of housing and lack of affordable housing across the valley.



**Photo:** Debbie Espinosa, president and CEO of FIND Food Bank. Courtesy of FIND Food Bank.



**“The cost of housing continues to rise in the valley, and the supply of affordable housing continues to shrink,” Espinosa said. “People literally starve themselves in order to pay the rent. People choose to be hungry so as not to be homeless. But you can only postpone so many meals. They’re teetering right on the line.”**

Food insecurity affects people of all ages across the Coachella Valley. “One of our biggest agency food distribution locations is St. Margaret’s Episcopal Church in Palm Desert,” Espinosa said,

FIND Food Bank recipients who agreed to be interviewed for this book with the condition that their last names not be used include a retired 67-year-old Indio woman named “Maria” who lives with her brother and relies on Social Security as her only source of income.

“You have no idea how much this food helps me,” she said. “It helps me a great deal.”

Maria, who previously worked as a waitress and as a receptionist, said she doesn’t know what she would do if she couldn’t access food from FIND each month.

Espinosa said the number of Coachella Valley residents who depend on FIND more than doubled in 2020 as a result of job losses and stay-at-home orders resulting from the COVID-19 pandemic.

Some of FIND’s most recent food recipients include a woman named “Elahine,” who has lived and worked in Thermal for 16 years, harvesting table grapes and doing janitorial work at the valley’s music festivals and other special events.

But when businesses across the valley were ordered closed in March of 2020 as a result of the pandemic, Elahine was left without her usual festival work. By mid-June, she hadn’t yet found work with the table grape harvest, either, which normally begins in May.

**Photo Left:** A FIND Food Bank volunteer prepares food for distribution. **Right:** Kathy Greco was CEO of Desert Healthcare District when it launched its healthy foods initiative to supply fresh fruits and vegetables to local food banks. Courtesy of Desert Healthcare District.



Without her normal sources of income, Elahine said she had no choice but to turn to FIND Food Bank to feed herself, her husband and their four children, who range in age from 8 to 16.

Thirty-five-year-old Nathalie, a single mother with four children living in Desert Hot Springs, found herself in a similar situation. Nathalie normally works cleaning people's homes. But after the pandemic began, her normal workload evaporated.

"A lot of people are not allowing anyone into their homes," she said, leaving her with no choice but to gather food from FIND Food Bank.

Nathalie added that whenever she gathers food from FIND, she shares some of it with her neighbors who are too embarrassed to go to the food bank on their own.

FIND, which is the largest hunger relief and food rescue organization in the Coachella Valley, is doing everything it can to provide food to those who need it, Espinosa said.

"First, we look at U.S. Census data to determine the zip codes that have more than 50 percent of people falling below the poverty line," she said.

FIND then does further research to determine where the greatest concentrations of poverty exist within each zip code. Sometimes, Espinosa said, FIND's representatives physically walk the streets of certain neighborhoods and talk to people to determine if a food bank's services are needed.

FIND then partners with churches and other community organizations that can serve as their food distribution points.

FIND works out an arrangement to supply them with food as part of FIND's food pantry network. In cases where no local food distribution partner is available, FIND sends its own free Community Mobile Markets into these areas.

"Altogether," Espinosa said, "we have 126 food distribution points through our food pantry and partner organization network, plus 41 mobile markets we're running right off the backs of our trucks because there are no or not enough community organizations in certain areas to distribute the food."

In some cases, FIND even makes door-to-door food deliveries.

FIND also sets up "Kids Farmers Market" distribution points in public schools that have a high percentage of children who qualify for free lunches. Since their parents may have work schedules that preclude them from accessing a food pantry or mobile market site, FIND delivers food to schools so that the kids can pick up the produce and take it home after school. Kids receive food during the last period of the day to make it easier for children to gather the food they need for themselves and their families.

FIND also makes a concerted effort to ensure that it is distributing all of its food on an equitable basis.

"We work really hard to make sure that food gets distributed to all of our service area," Espinosa said. "It's a human right to be able to eat, especially in a developed country like the United States."





## Desert Healthcare District focuses on supplying local food banks with fresh fruits and vegetables as part of its healthy food initiative

While Desert Healthcare District has been issuing grants to help food organizations combat food insecurity for the past two decades, its biggest investments are targeted at supplying nonprofit food distributors with fresh fruits and vegetables.

The District launched its healthy food initiative, called “Project Produce,” in 2013 with a \$629,471 grant to FIND Food Bank and a \$211,676 grant to Hidden Harvest.

“What the team did is, we said, ‘Let’s look at the resources we have in the valley and let’s maximize what those resources can do for the health of our residents,’” District CEO Kathy Greco told *The Desert Sun* in a January 31, 2013 report.

Hidden Harvest CEO Christy Porter said the initiative is especially important for low-income families and seniors living on fixed incomes because fresh fruits and vegetables are often too expensive for them to purchase. Hidden Harvest itself opened up senior markets after a 2009 study by the University of California, Los Angeles (UCLA) indicated that 50 percent of Riverside County’s senior citizens were struggling with access to healthy foods.

FIND Food Bank recipients who agreed to be interviewed for this book on the condition that their last names not be used said they are grateful to have access to fresh fruits and vegetables.

“They have fruits and vegetables and they’re fresh. They’re not expired. They’re really good,” said “Nathalie,” a 35-year-old single mother with four children who lives in Desert Hot Springs.

Nathalie added that FIND Food Bank is a critical resource. “We need the food bank,” she said. “We need that in our community. It really helps people.”

Debbie Espinosa, FIND Food Bank's CEO, said the grants from Desert Healthcare District are also important because they enable FIND to purchase excess produce from the San Joaquin Valley and other farming areas as far north as Oregon and Washington.

"FIND distributes more than 5 million pounds of produce annually. It takes our valley and other areas to source enough excess produce to be able to feed everybody that needs free food," she said, adding, "FIND Food Bank and Desert Healthcare District's partnership and shared vision of ending hunger in the Coachella Valley through a solid regional food banking system over the past decade have been instrumental. Desert Healthcare District's investment into building our regional food bank facility in Indio and their continued funding of our fresh produce and CalFresh programs for the western portion of the geographic region we serve have allowed us to leverage that relationship and find additional funders to support the eastern portions of our service area. Because of this, it ensures that healthy fresh produce and outreach services can be equitably distributed to all areas of our communities in need through our network of over 120 agency food pantries and Community Mobile Markets."

## Housing the Homeless

### Desert Healthcare District provides \$1.1 million in grant funding for homeless shelters in Indio and outreach services in other cities.

Providing emergency housing for the homeless has been a key focus of Desert Healthcare District, which has issued nearly \$1.1 million in grant funding to the Coachella Valley Rescue Mission, Martha's Village & Kitchen and Roy's Desert Resource Center.

**“They have really wrapped their arms around the homeless population,” Darla Burkett, executive director of the Coachella Valley Rescue Mission, said of the District, which has issued nearly \$400,000 in grants to the Indio-based nonprofit since 2009.**

Burkett said she and her staff take great pride in helping people put their lives back together again. “We don't dismiss them until they are all fixed up,” she said. “Not everybody succeeds. But most do.”

## Coachella Valley Rescue Mission Success Stories

Twenty-five years ago, Derek Harrison Hurd was living the life of his dreams. He had landed several acting gigs, and won rave reviews from the *Los Angeles Times* for his performances in several plays. He also enjoyed financial success as comptroller of the famed Old Globe Theatre at Balboa Park in San Diego, which he helped rebuild after devastating fires in 1978 and 1984. He worked at the Globe Theatre for 17 years.

“I was wealthy at one point,” he said. “I was rich, powerful. I had three cars. I was one of those people you needed to know in San Diego.”

But over a two-year period, Hurd's life came unraveled. His brother committed suicide. His father died of cancer, followed by his mother. Meanwhile, several of his closest friends in the acting community died of AIDS.

“For two years,” he said, “I cracked like an egg.”

Hurd was never one to drink.

“I had never had a drink or touched alcohol,” he said.



But losing his parents, his brother and his closest friends in rapid succession pushed him over the edge to the point where alcohol and drugs were the only things that soothed his pain.

Hurd eventually wound up homeless. He felt like his life was so broken that he was beyond repair. "You're never homeless until you've given up on yourself," he said.

Then one day, Hurd arrived in the Coachella Valley where he learned of the Coachella Valley Rescue Mission.

"I remember when I opened the door," Hurd said. "I immediately saw a sign on the wall that said, 'Welcome Home.' I remember thinking to myself, 'You mean I could really come inside where it's cool and not have to sleep on the street?'"

What impressed Hurd the most about Coachella Valley Rescue Mission was the fact that its staff had faith in him and

were willing to give him a chance even after he had given up on himself.

"The thing that got me was these people cared," he said, adding that with their counseling and support he has been able to turn his life around.

Sixty-four-year-old Cherry Parrish is another recent Coachella Valley Rescue Mission success story. She had suffered from alcoholism since her teen years.

"I was suicidal," she said. "I had no more will to live."

Her father encouraged her to go to the shelter for help. "I stayed there for about a year," she said. "I went to one of their sober living facilities. I have since been in my own apartment in Cathedral City for the past three years. And best of all, Parrish said, she had succeeded in keeping herself sober for one year as of the time of this writing.

**Photo Left:** Derek Hurd (in hat) smiles as he moves into his new home in Ripley. Celebrating with Hurd are Darla Burkett, executive director of the Coachella Valley Rescue Mission, (left), and mission staff. **Center and Right:** The Coachella Valley Rescue Mission serves the homeless over 30,000 meals each month. Courtesy of Coachella Valley Rescue Mission.

"This is the longest time I've ever had being sober," she said, adding that she has been volunteering to make face masks to protect people from COVID-19.

Burkett said she and her staff rescue people of all ages.

"We get foster kids right out of foster care at 18," she said. "Not everybody goes to college and follows that white picket fence dream."

**Burkett and her staff see growing numbers of families with children, women and children fleeing domestic violence as well as homeless senior citizens. "We've had seniors that are eating cat food because they can't afford food and rent," she said.**

The shelter also takes in people suffering from drug and alcohol abuse. "We are not a licensed rehabilitation center," Burkett said. "But our dream is to eventually have a rehab center on site. We work with other agencies to detox people."

Other homeless people seeking shelter include people with dementia and people whose families have abandoned them. "We get the people that nobody wants to deal with," Burkett said.

Of course, many people also end up homeless simply because they can no longer afford to make ends meet. For many families, a job layoff, combined with the high cost of

housing, can be enough to push them over the edge.

**According to Coachella Valley Rescue Mission statistics, 37 percent of Coachella Valley residents are "hovering on the edge of homelessness," while 65 percent of the people who live in the eastern Coachella Valley are living in poverty. Moreover, on any given night, more than 1,000 people are homeless in the Coachella Valley.**



Coachella Valley Rescue Mission provides shelter for 150 or more people each night who are recovering from homelessness, poverty and other challenges through its long-term rehabilitation programs. The shelter also provides food — 30,000 meals a month.

In 2019, Coachella Valley Rescue Mission provided services for 5,447 unduplicated people for 30 to 240 days and served 265,201 meals. The shelter also distributed 121,672 food boxes and provided public showers, clothes and toiletries to 9,292 people not sheltering with them.

**Hurd said he has seen shelter staff work miracles in people's lives. "I actually saw people's character grow, as if it had died and came back again," he said, adding, "This is a place where you can reclaim your life if you want to."**

Hurd, for his part, said he has done just that.

He's living independently in affordable housing in Ripley, near Blythe. He's involved in several writing projects. He's engaged in life again.

Hurd said people who are not homeless need to keep in mind that one never knows when things will happen that will turn their lives upside down. He certainly never expected to experience the trauma that happened in his own life. Hurd said he met other people at Coachella Valley Rescue Mission who never thought they would ever be homeless, either. But this is why the organization is so important as a safety net service for people across the Coachella Valley, he said.

## District Support for Martha's Village & Kitchen Goes Beyond Helping the Homeless

Desert Healthcare District has provided more than \$400,000 in grants since 2017 to Martha's Village & Kitchen in Indio, which offers many community services in addition to helping the homeless.

**"I'm not being a bleeding heart, but they have earned my admiration and praise for what they have done," Linda Barrack, Martha's president and CEO, said of the District.**

On hot summer days, Martha's operates a cooling center, which provides a safe place for the homeless and other community members to escape the heat.

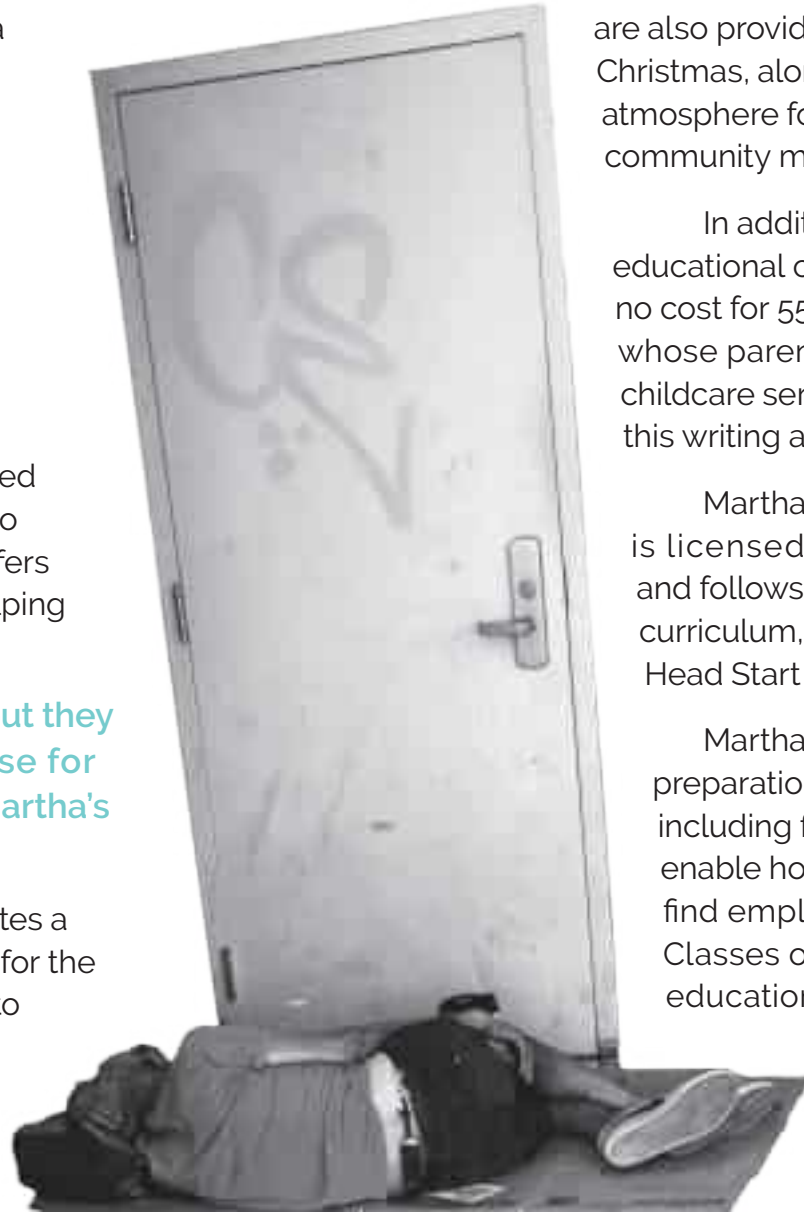
"Martha's Cooling Center is so important because many people do not have air-conditioning or cannot afford to run their air-conditioner at home all day," Barrack said, adding, "For those without homes, the situation can quickly become dire."

Martha's also serves close to a quarter of a million free meals each year to more than 6,000 impoverished children and adults. Traditional holiday meals are also provided at Thanksgiving and Christmas, along with a festive community atmosphere for Village residents and community members.

In addition, Martha's provides educational childcare services at little or no cost for 55 infants and preschoolers whose parents cannot afford licensed childcare services, which at the time of this writing average \$1,200 a month.

Martha's Child Development Center is licensed by the state of California and follows an evidence-based creative curriculum, which is widely used by the Head Start Program.

Martha's also offers job training, preparation and placement services, including food service training that can enable homeless or jobless people to find employment in restaurants. Classes offered include adult education, computer skills, GED preparation, couponing,





English as a Second Language (ESL), and job-seeking skills. Motivational and self-help classes involve conflict resolution, community living, healthy relationships and a “challenge to change” course, which includes exercises and presentations on subjects related to enhancing self-esteem, increasing motivation and setting realistic goals.

**Barrack said 75 percent of Martha's clients who complete their job training and preparation program at its offices in Indio, Palm Springs and Desert Hot Springs secure employment.**

The District provided a \$40,000 grant in 2019 for Martha's recuperative care program, in which Martha's provides follow-up care for homeless people who have been discharged by area hospitals. Martha's has partnered with Borrego Health and has a health center on the Village's Indio campus.

Martha's also offers emergency food, shelter and case management services for homeless individuals and families due to the loss of a job, the loss of a home, domestic violence and other situations. Martha's has the capacity to house 120 homeless men, women and children each night.



Private rooms are available so that families can stay together. The last thing a homeless family needs, Barrack said, is to have family members separated into different rooms by sex because this only compounds the stresses that families are already experiencing by being homeless in the first place.

Martha's has seen an increase in the number of homeless families in recent years, including Alexandra Morales and Frankie Garcia, who relocated to the Coachella Valley with their five children after facing legal problems in Fresno.



The couple had just begun to make a fresh start when Frankie was pulled over and arrested for his past convictions. With no income, Alexandra ended up homeless with her five children and didn't know where to turn. She found her

way to Martha's on October 17, 2017, met with a case manager and worked to get her life back on track. She was able to find employment with Spectrum, and after Frankie got out of jail, he took the job preparation classes offered by Martha's and was able to find employment as well. By the time they checked out of Martha's on June 22, 2018, the couple had saved enough money to move into a place their family could call home.

*Photos: Martha's Village & Kitchen provides many community services in addition to housing the homeless. Services include food distributions for the hungry, (above left), and educational childcare services, (right). Courtesy of Martha's Village & Kitchen.*

"I learned and got all of the resources I needed in my time of need," Alexandra said.

Another family that recently sought help from Martha's was Jade and Sam Campbell and their daughter, Lizzy. The Campbells had fallen on hard times and wanted to escape homelessness to protect their daughter. At the time of this writing, Martha's case manager and employment specialist had helped Jade obtain a job at a local Walmart and the Campbells were making plans to move into permanent housing and to purchase a new car.

**"We're the heavy lifters," Barrack said of Martha's, reflecting on the many difficult emergency situations the shelter encounters. "But Martha's is fortunate to have community members like Desert Healthcare District that support us."**

## **A District-Funded Nurse's Station was a Critical Asset for Roy's Desert Resource Center**

Roy's Desert Resource Center in North Palm Springs made headlines when it opened in late 2009, with funding from Riverside County and financial commitments from cities across the Coachella Valley.

The Riverside County Board of Supervisors named the shelter in honor of the late Supervisor Roy Wilson, who actively supported efforts to build the shelter as well as other initiatives to help the homeless.

Desert Healthcare District also won praise for providing Roy's with a \$184,000 grant for the buildout of the nurse's

station and public health nurse staffing for the 100-bed facility during its first couple of years.

**"Desert Healthcare District really played a very important role in providing us funds to have a public health nurse come in and work with families," said Aurora Tenorio Wilson, Wilson's widow, who worked as a community liaison for the Coachella Valley Association of Governments (CVAG), which administered the shelter.**

"Having that medical component there was really, really important to us because the homeless shelter provided services not only to individuals, but families. We had families coming with children and adults without medical or dental care."

Riverside County was eventually forced to close Roy's Desert Resource Center in 2017 due to inadequate funding from cities that had committed to support the shelter, a topic that will be discussed in Chapter 15.

## Bringing Healthcare to Underserved Communities

Over the past 20 years, Desert Healthcare District has made significant investments to identify local healthcare needs and expand healthcare infrastructure in the most underserved communities within its service area. Following are several examples:

### Desert Hot Springs

While there have always been unmet health and wellness needs within Desert Healthcare District's service area, no community has had greater unmet healthcare needs in the western Coachella Valley than Desert Hot Springs.

This was especially true in the 1990s and early 2000s. Desert Hot Springs Mayor Yvonne Parks summed up the city's healthcare challenges in a July 25, 2011 guest column in *The Desert Sun*.

**“We have only one doctor per 9,000 residents. This is three times worse than the World Health Organization's definition of Third World health care access,” Parks wrote. “And unlike in other parts of the**

**valley, Desert Hot Springs residents are geographically isolated, both by distance and by Interstate 10, making access to physicians and wellness programs in other desert cities difficult. Our childhood obesity, venereal disease transmission and teen pregnancy rates are the highest in the valley. Because 20 percent of our residents live below the poverty line and 20 percent are unemployed, many lack the resources and education to take control of their own health.”**

Desert Healthcare District recognized the urgency of providing healthcare services in Desert Hot Springs from its earliest days as a grant-giving agency. In fact, one of the District's first initiatives in Desert Hot Springs was a \$153,740 grant to the local Boys & Girls Club in 2003, which enabled it to bring in a mobile healthcare clinic operated by Santa Rosa del Valle in the eastern Coachella Valley.

“The mobile clinic showed up twice weekly for a year, serving more than 1,000 youth and adults with preventable healthcare screenings and medical services,” Desert Hot Springs Councilman Adam Sanchez wrote in an August 10, 2012 guest column in *The Desert Sun*.

While the mobile clinic provided temporary assistance, the District continued to explore innovative ways to bring healthcare services to Desert Hot Springs, one of which was to begin a series of discussions with Borrego Health to explore its interest in expanding its community healthcare services to the isolated and impoverished western Coachella Valley community.

As a Federally Qualified Health Center (FQHC), Borrego Health receives state and federal funding, which enables it to provide healthcare services to both insured and uninsured patients with a sliding fee schedule based on the patient's ability to pay.

Borrego Health had previously worked with the District in connection with the Smile Factory mobile dental clinic program, which it took over in the spring of 2009. "Certainly, over time and through multiple interactions and grants, the District and its board of directors felt that Borrego was large enough and credible enough to take on certain healthcare roles in Desert Hot Springs," said Dr. Glen Grayman, who served on the District's board at that time.

In April of 2010, the District announced its intention to provide Borrego Health with a \$160,000 grant to cover the startup costs for a 3,400-square-foot clinic at 1250 Palm Drive with "four to five" doctors.

"It will provide a much-needed boost to a city that has only one full-time physician for about 30,000 residents in the area, far below the industry standard of one physician per 3,000 residents," *The Desert Sun* wrote in a May 15, 2010 report.

Indeed, at that time, the only full-time internist in Desert Hot Springs was Dr. Joseph Struzzo, a 78-year-old physician who complained that insurance paperwork was eating up a third of his time.<sup>51</sup>

Borrego Health opened its Palm Drive clinic in September of 2010. But that was just the beginning. The District also worked with the city and committed \$5.2 million in grant funds toward the construction of the \$19.2 million, 32,000-square-foot Desert Hot Springs Health & Wellness Center on the corner of Pierson Boulevard and Cholla Drive, which opened January 11, 2013.<sup>52</sup>

The District and the city of Desert Hot Springs then invited Borrego Health to operate the facility, which includes an aquatic center, a gym and cardio fitness area, an 1,800-square-foot dental center as well as a teen clinic and health education rooms, all of which were meant to address various health and wellness needs highlighted by HARC.<sup>53</sup>

Borrego Health then used its smaller clinic in Desert Hot Springs to provide specialty HIV/AIDS and Hepatitis C services.

Dr. Grayman, who was president of Desert Healthcare District's board of directors at the time, told *The Desert Sun* the facility would be a "game-changer for the city of Desert Hot Springs and the surrounding community" in a January 12, 2013 report.

Other funding sources for the Health & Wellness Center included a \$2.2 million grant from the California Department of Parks and Recreation as well as contributions from the city, Riverside County and private donations.<sup>54</sup> The District also

provided grant funding to help other agencies provide additional health-related services to Desert Hot Springs residents.

Agencies approved for District grants include Family Services of the Desert, Inc., which received multiple grants as far back as 1999, including a \$225,000 grant in 2011 to expand its provision of psychological counseling services, anger management classes and parenting classes in Desert Hot Springs.

"We're providing services to 200 families a month," Family Services Executive Director John Brown told *The Desert Sun* in a September 29, 2011 report. "To have a storefront community organization providing family support means there's a safety net for the community."

The District has also issued numerous grants to Food Now, Inc. and other organizations to provide food and meals to low-income children in Desert Hot Springs.

## **Desert Highland Gateway Estates in Palm Springs**

In 2013 Desert Healthcare District issued a \$118,000 grant to Loma Linda University to pay for a health needs assessment of the Desert Highland Gateway Estates in northern Palm Springs in collaboration with El Sol Neighborhood Educational Center.

The District had previously issued grant funding to nonprofit organizations that provided food as well as drug awareness and prevention programs for the predominantly African American community of 480 single family homes.

But the needs assessment was conducted in response to worsening conditions in the community, which were brought to the District's attention by two other organizations it supported with grant funding, including Hidden Harvest, a nonprofit produce recovery organization, and Well in the Desert, which provided meals to homeless people.

**"Hidden Harvest was doing food insecurity deliveries. They told us the number of people with diabetes and obesity was mind-boggling," said Kathy Greco, who was the District's CEO at the time, adding, "Many people have no idea of these pockets in our communities that are desperately struggling socioeconomically."**

Loma Linda recruited five African American community members to be trained as Community Health Workers to help gather survey data for a community health needs assessment.

The survey revealed that chronic health problems affected two out of three Desert Highland Gateway Estates residents, including hypertension, high cholesterol and obesity; that prescriptions were too expensive for half of the 307 adults surveyed; that roughly one in three residents could not afford dental care; and that the emergency room was the primary place of care for 38 percent of residents.<sup>55</sup>

Based on these findings, a strategic plan was subsequently developed and accepted by the Desert Highland Gateway Community Health and Wellness Committee, which secured a grant from Desert Healthcare District to hire two part-time community health workers and one project coordinator/community health worker.

Media attention surrounding the District's collaborative efforts with Loma Linda and El Sol Neighborhood Center raised Desert Highland Gateway Estates' profile so much that local officials brought former First Daughter Chelsea Clinton to visit the neighborhood for the Clinton Foundation's "Day of Action" event on January 25, 2015.

More than 300 volunteers joined Clinton in planting a small orchard of apple, grapefruit, fig and cherry trees to provide the community with an eventual source of fresh produce.

In 2020, the District approved grant funding to address the healthcare needs of black communities in the Coachella Valley, including Desert Highland Gateway Estates. At the time of this writing, the District was seeking proposals from organizations that could use \$400,000 in grants to develop long-term strategies to improve black community access to healthcare services. The District was also working with One Future Coachella Valley to develop and administer a \$100,000 scholarship program for black students interested in careers in healthcare in an effort to expand racial diversity in the local healthcare workforce.





# Racism Contributes to our Public Health Crisis

**Desert Healthcare  
District and Foundation CEO  
Dr. Conrado Bárzaga issued  
a statement on June 3,  
2020 noting that racism  
contributes to our public  
health crisis, not only  
in the Coachella  
Valley, but across the  
nation.**

In a statement  
issued to District  
and Foundation  
grantees, partners  
and friends, Dr.  
Bárzaga wrote:

*As communities  
across the country take  
to the street and risk their  
lives to demand justice, the  
Desert Healthcare District and  
Foundation stands in solidarity  
with protesters and against racism,  
oppression and inequality in all of its forms,*

*because we believe that inequities have consequences, both  
visible and invisible.*

*The deaths of black Americans in the hands of law  
enforcement and the racial targeting of innocent bystanders are  
all visible tragedies. These incidents are not individual or isolated.  
These occurrences illustrate the historic, persistent, and  
sometimes hidden systemic barriers to equity and opportunity  
faced by black Americans and other people of color.*

*Some may say that our focus is healthcare. It is in this  
context that we recognize that the killing of black Americans  
in this country is, and for too long has been, a public health  
crisis. It is a crisis rooted in the toxic traditions of systemic racism  
and white supremacy. George Floyd, Breonna Taylor, Ahmaud  
Arbery, and many more have died at the hands of the police and  
vigilantes —they should all be alive today.*

*For this, we condemn racism, bigotry, and white  
supremacy. No one should have to fear for their lives because of  
the color of their skin, ethnic origin or identity. No parent should  
have to worry for their child's safety and well-being when they  
venture outside of their home.*

*No community should disproportionately bear the burden  
of social, economic and health challenges, and yet studies show  
that the overall health of people of color ranks lower than the  
overall health of whites. People of color are affected by higher  
incidences of hypertension, diabetes, various cancers, and  
COVID-19, with stress frequently listed among the contributing  
factors. There are few experiences more stressful than  
institutional discrimination and policing inequities.*

*This is a moment that demands empathy, listening, and  
deep reflection. The Desert Healthcare District and Foundation  
are dedicated to achieving optimal health at all stages of life for  
all District residents. We cannot accomplish this mission without  
paying close attention to diversity, equity and inclusion in our  
work and within our organization's culture.*

*To make progress, we have to shift the conditions that hold a problem in place. And doing this means building a healthcare system that focuses on equity and inclusion, a healthcare system that focuses on the needs of all our residents, including, and especially, the needs of our communities of color.*

*We are committed to listening carefully to our many partners – especially those individuals and organizations with trusted relationships in communities of color - regarding the barriers that hold inequities in place and opportunities for the District to strengthen community assets and advance shared strategies. Our work together has never been more important. We can and must do more to stand up, speak out, and stand with those who share our commitment to a just, equitable and safe Coachella Valley.*

*Conrado E. Bárzaga, MD*  
Chief Executive Officer



## Cathedral City

### The District funds an expansion of Borrego Health's Centro Médico Clinic in Cathedral City as well as a needs assessment for the Dream Homes Neighborhood

In 2013, as it was issuing millions of dollars in grant funds for construction of a health and wellness center in Desert Hot Springs that Borrego Health would occupy, Desert Healthcare District provided \$678,000 in funding for the remodeling and expansion of Borrego Health's Centro Médico clinic in Cathedral City — another underserved area.

Four years later, in August of 2017, the District targeted another underserved area of Cathedral City: The Dream Homes Neighborhood, which borders Palm Springs.

Desert Healthcare District again joined forces with the Loma Linda University Health Institute for Community Partners and El Sol Neighborhood Education Center to discuss development of a health assessment for residents of Cathedral City's Dream Homes Neighborhood.

The collaborative effort, in a replication of the successful model implemented at Desert Highland Gateway Estates, took place at the invitation of city of Cathedral City staff, and had the overall goal of using a community-based and community-led approach to determine the health of residents in their community. Five community health workers were recruited from the Dream Homes area to survey local residents for the study, which was produced in 2018. It's findings from survey

respondents were alarming and included the following statistics:

- 54.4 percent engaged in moderate exercise two times or less per week.
- 73.1 percent reported they had a full serving of fruits and vegetables less than two times per day.
- One in three residents never graduated from high school; one in three have a high school diploma; and only one in three have attended college or have a college degree.
- 53 percent of residents said they were spending half or more of their paychecks on rent, which is characterized as a "severe rent burden" by the U.S. Department of Housing and Urban Development.
- 57 percent of residents were not able to put any money into any type of savings.
- 25 percent said they had difficulty affording basic essentials each month, including food, clothing, housing or other costs.

One of the community health workers who gathered data for the survey, Evett PerezGil, has since become a powerful advocate for her neighbors in the Dream Homes community, winning a seat on the Desert Healthcare District Board of Directors in November of 2018.

## Expanding the Coachella Valley's Healthcare Workforce

Desert Healthcare District has invested millions of dollars in education and economic development initiatives to diversify the Coachella Valley economy away from its historic dependence on low-paying tourism and agriculture jobs and to prepare local students for higher paying healthcare careers they can pursue across the valley.

The Coachella Valley is arguably one of the most sought after vacation destinations in the country, with a \$5.5 billion tourism-based economy. The local tourism economy is nourished by more than 18,000 hotel rooms, 124 golf courses, and some of the best known music and sports events in the country.

The eastern Coachella Valley is also home to some of the most productive farmland in California, producing \$623.8 million worth of fruits and vegetables in 2018, according to statistics compiled by the Riverside County Agriculture Commissioner's Office.

But the Coachella Valley economy is also overdependent on tourism and agriculture, both of which produce mostly low-paying, seasonal jobs.

Indeed, one fourth of the valley's residents live in poverty, according to HARC statistics. Of those who leave the valley to attend college, relatively few come back, largely because the local economy is not very well diversified and offers few well-paying jobs. This contributes to the valley's "brain drain," which often forces employers to look outside the valley to fill their higher paying positions, including jobs in healthcare.<sup>56</sup>

"For many years, our area has been a major importer of health care jobs — 80 percent of the hard-to-fill positions taken by workers from outside the valley," Desert Healthcare District Vice President Kay Hazen wrote in a June 29, 2009 guest column in *The Desert Sun*.

But even importing doctors, surgeons and other highly skilled healthcare professionals into the valley can be challenging if they have a spouse who cannot find suitable employment locally because of the limited diversification of the Coachella Valley's economy.

With these challenges in mind, Desert Healthcare District has not only provided funding for healthcare education scholarships for Coachella Valley students, but channeled millions of dollars in grant funding to dramatically expand local educational opportunities in the healthcare profession.

While Desert Healthcare District has been providing scholarship funding for students interested in healthcare professions since 2004, the District invested more than \$4.3 million to help College of the Desert and California State University, San Bernardino to expand their healthcare education programs in the valley.

The District invested another \$5 million to help the University of California, Riverside (UCR) launch a residency program for family doctors at Desert Regional Medical Center.

The District also provided more than \$870,000 in grant funds to the Arrowhead Neuroscience Foundation to establish a fellowship program at Desert Regional Medical Center to train two physicians in neuro critical care and neuro interventional procedures. The fellowship program was established by Dr. Javed Siddiqi, who was also the founding medical director of the hospital's Institute of Clinical Orthopedics and Neurosciences, which is now headed by Dr. Todd Swenning.

Dr. Siddiqi said four fellows had completed the program as of June of 2020, two of whom are continuing to pursue their careers in Palm Springs — Dr. Vladimir Cortez and Dr. Emilio Tayag.

"We are now limited to one fellow due to the shortage of financial support after the Desert Healthcare District funding ended. However, the program continues to this day, with Dr. Michael Schiraldi being the current fellow who is fully funded by Arrowhead Neuroscience Foundation," Dr. Siddiqi said, adding that Dr. Schiraldi was expected to graduate in July of 2020. He said the foundation continues to seek funding for future fellows.

Dr. Siddiqi said the fellowship program has enabled Desert Regional Medical Center to become the first hospital in Riverside County to achieve the designation of a comprehensive stroke center, making it an even more important healthcare resource for the valley's senior citizen population.

These investments are in addition to the \$3.6 million in grant funding that the District has provided to the Coachella Valley Economic Partnership (CVEP) and to OneFuture Coachella Valley, which was spun off from CVEP in 2017, to diversify the local economy by recruiting additional healthcare businesses and by developing a variety of programs to encourage local students to pursue careers in healthcare.

The District's educational funding efforts initially targeted the local shortage of nurses during the early 2000s, but quickly grew to address the shortage of local doctors and other healthcare professionals.

## **Grants to Expand College of the Desert's Nursing Program**

The District provided nearly \$500,000 in funding to address the nursing shortage in 2003 and 2004. This included nearly \$200,000 for College of the Desert (COD) in Palm Desert to expand its nursing program to include weekday evening and weekend courses along with the necessary supplies, including hospital beds and student medical kits.<sup>57</sup>

**"The COD nursing program is one of the most critical capacity building resources we have within the valley," District President Mark Matthews told *The Desert Sun* in a March 2, 2004 interview.**

**“This funding will be repaid many times over as we reap the benefits from a larger, better equipped and trained nursing corps.”**

The District also issued a \$500,000 grant to College of the Desert in 2007 to endow COD's Director of Nursing position.

## **Grants to Expand California State University, San Bernardino's Nursing and Bachelor of Science in Nursing Programs in Palm Desert**

The District has been providing grants to California State University, San Bernardino, for many years, starting with \$143,313 in 2004 to expand the nursing program at its Palm Desert campus.

“Over the next three years, 90 new nurses will be added to the workforce and 30 existing nurses will advance from (Registered Nurse) to (a Bachelor of Science in Nursing) degree through this and other funding,” *The Desert Sun* wrote in a June 13, 2004 report on District funding initiatives, which also

included scholarships to encourage local students to attend nursing training programs.

The District subsequently provided \$3 million to Cal State San Bernardino in 2005 and 2006 to help build its health sciences building in Palm Desert and \$280,000 in 2011 to support its Registered Nurse to Bachelor of Science in Nursing program.

“Twelve to 18 new nurses graduate from the (Palm Desert Campus), pre-licensure (Bachelor of Science in Nursing) program each year,” said Mike Singer, a spokesman for Cal State's Palm Desert Campus. “Starting in the 20-21 academic year, we plan to admit a second pre-licensure nursing class in the spring term as well as the fall term. That would double the number of nurses graduating each year from the (Palm Desert Campus).”

Singer added that the university plans to start a Doctor of Nursing Practice program in the future, which will prepare Advanced Practice Nurse Practitioners.



*Photos Left: Bob Kambe, (left), of Avid Physical Therapy, with clinics in Cathedral City and Indio, provides internships for high school students and hires students as technicians while they are attending college. Courtesy of One Future, Coachella Valley. Center: Resident physicians from Desert Regional Medical Center's Emergency Medicine Residency Program in 2020 include, (from left to right), William Lee, D.O., Calvin Au, D.O., Vera Vanderkraan, D.O., Quentin Nelson, D.O., Joel Stillings, D.O. and Program Director for DRMC's Emergency Medicine Residency, Nnaemeka Diribe, D.O., Laleh Ghaffarian D.O., Jessie Davis, D.O. and Kim Kolibas, D.O. Right: Graduates of DRMC's Emergency Medicine Residency program include (from left to right) Calvin Au, D.O., Jessie Davis, D.O., Laleh Ghaffarian, D.O., Kim Kolibas, D.O. and Quentin Nelson, D.O. Courtesy of Bob Kambe and Dr. Jessie Davis.*

## Grants to Launch UCR's Medical Residency Program at Desert Regional Medical Center

In 2011, the District approved a \$5 million, five-year grant for the University of California, Riverside (UCR) to launch a three-year medical residency program to train students at both Desert Regional Medical Center and at the UCR Health Family Medicine Center, which is located next door to the hospital. The residency program was seen as an effective way to expand the number of doctors working in the valley, while helping to entice more local students into the healthcare profession.

"The whole point is residency program studies have shown residents will tend to stay where they trained at or they will return to where they came from or grew up," Gemma Kim, UCR's director for the family medicine residency program, told *The Desert Sun* in a February 7, 2014 interview. "We're hoping to tackle both of those issues by enticing students that are in the region to go into the medical field and once they are training in medicine to come back and finish their training here so they'll remain in the area."

Unfortunately, after losing \$15 million due to state budget cuts in 2011, UCR's School of Medicine was not able to obtain its accreditation from the Accreditation Council for Graduate Medical Education until late January 2014. However, once it obtained its accreditation, UCR immediately recruited residents for its family medicine residency program in Palm Springs. Twenty-five students participated in the UCR Family Medicine Residency program through mid-2020, eight of whom were set to graduate in June of 2020.

Linda Evans, a chief strategy officer for Tenet Healthcare, said Desert Regional Medical Center chose not to renew its contract with UCR and will instead expand its own residency program. "There's better control and management when it's your own (residency) program," Evans said, adding, "We have 119 total residents moving through our system at Desert Regional."

Evans said UCR School of Medicine students on the first or second year of their residency program at Desert Regional Medical Center were to be transferred to St. Bernardine Medical Center in San Bernardino on July 1, 2020. "The doctors, staff and residents are all moving to the new location with continuation of the previous training that was occurring at Desert Regional Medical Center," said Iqbal Pittalwala, a senior public information officer for UCR's School of Medicine.

However, UCR's School of Medicine is launching other educational programs in the Coachella Valley, including an addiction medicine residency training program in collaboration with Eisenhower Medical Center and the Hazelden Betty Ford Foundation.

"The UCR (School of Medicine) continues to collaborate with many organizations throughout the Coachella Valley, including longstanding partnerships with the Desert Aids Project, HARC, and a broad array of community stakeholders," Pittalwala said. "Projects include community-engaged research programs through the UCR Center for Health Disparities Research that address health disparities, childhood asthma and the Salton Sea, childhood obesity and HIV and aging."

UCR Health is also exploring additional clinic sites for its physicians to expand clinic care services in the Coachella Valley, Pittalwala said. Other recent projects under development with Desert Healthcare District include a collaborative initiative with Riverside County to increase access to COVID-19 testing and contract tracing in the Coachella Valley, he said.

### **District support for the Coachella Valley Economic Partnership's Career Pathways and Pathways to Success Program, which is now known as OneFuture Coachella Valley**

In addition to supporting the growth of local college and university education and residency programs, Desert Healthcare District has invested more than \$3.6 million to support the Coachella Valley Economic Partnership (CVEP) and OneFuture Coachella Valley in its efforts to diversify the economy with healthcare jobs while expanding the pipeline of local students interested in healthcare careers.

CVEP was established in 1994 as a collaborative effort between local government agencies and private businesses. The District initially provided CVEP with a \$10,000 grant in 2005 for its Career Pathways Initiative,

specifically for a healthcare career exploration program that enabled 250 ninth graders in the Palm Springs Unified School District to participate in educational field trips to Desert Regional Medical Center and Eisenhower Medical Center.

**District Director Kay Hazen was a founding partner of CVEP, which wrote grants and received awards from the Ford Motor Company Fund and The James Irvine Foundation, and created the Career Pathways Initiative, a collaborative effort partnering business and education in the development of career pathways for low-income youth. The initiative was the first broad-based, integrated, economic development and education initiative in the Coachella Valley.**

It provided greater access to higher paying jobs, coupled with increased internship and mentorship programs to provide additional incentives for students to stay in school and continue on to college studies that are linked to expanded local jobs and careers.



“The whole goal is to get kids excited at a very early age so that school becomes more relevant to them,” Kim McNulty, program manager for the Career Pathways Initiative, told *The Desert Sun* in a December 18, 2005 interview.

The District significantly increased its investments with CVEP in 2007 with a \$237,000 grant to develop a Healthcare Industry Council whose mission was to bring together hospitals, healthcare professionals, industry representatives and educators to accelerate the development of local high school health academies. The Council was also charged with coordinating healthcare internships, job shadowing and mentoring programs.

The District announced plans to invest another \$311,000 in CVEP’s Career Pathways Program on October 24, 2009. On the same day, CVEP unveiled the Coachella Valley Economic Blueprint, a 106-page document that outlined ways to diversify the valley’s economy by promoting the expansion of businesses focused on healthcare and life sciences, clean energy and technology as well as creative arts and design along with the associated educational infrastructure. The District also invested in CVEP’s Pathways to Success scholarship program to provide financial support to local students pursuing degrees in health-related careers.

**“We need to build a college-going culture,” said Sheila Thornton, president and CEO of OneFuture Coachella Valley, which now manages CVEP’s former Career Pathways and Pathways to Success Initiatives. The program is designed to not only increase high school graduation rates, but**

**college preparedness, particularly for careers in healthcare and other high-tech professions.<sup>58</sup>**

The District has made sizable investments in education, including grants totaling nearly \$1.5 million between 2017 and 2019 to CVEP and OneFuture Coachella Valley to prepare local students for careers in mental health.

Several healthcare providers have also provided internship opportunities for local high school students, including Bob Kambe of Avid Physical Therapy, which provides physical therapy for patients who are recovering from everything from serious accidents to strokes.

Kambe, who has clinics in Cathedral City and Indio, said he has provided internship opportunities for high school students in Palm Springs, Cathedral City, Palm Desert, La Quinta and Coachella. He also hires students to work as technicians or aides while they are attending college.

Thornton of OneFuture Coachella Valley said these collaborative efforts to encourage students to go to college and pursue careers in healthcare are paying off.

“Through OneFuture, 192 local juniors and seniors in college health science majors have completed full-time, 40 hours per week, paid summer internships (for 10 weeks) since 2010. These students are now nurses, therapists, medical school students and nonprofit professionals,” Thornton said.

The pipeline of local students with an interest in healthcare is also increasing. "There are spots for 1,500 students in high school health career academies in the Coachella Valley," Thornton said, adding that seven high schools now have health career academies.

Of the 2,582 students who have received scholarships from OneFuture Coachella Valley, roughly 40 percent of them have been in healthcare. "This is largely due to the continued partnership of Desert Healthcare District and the local healthcare industry's willingness to support these health career pathways efforts," Thornton said.

## District Efforts to Promote the Expansion of the Healthcare Industry in the Coachella Valley

Desert Healthcare District has invested grant funds to promote the development of new healthcare businesses in the Coachella Valley.

The District provided the Coachella Valley Economic Partnership (CVEP) with a \$500,000 grant in 2014 to help it establish a Health and Medical Innovation Center as part of its 3.5-acre Accelerator Campus for new businesses, which was set up in several old buildings off Alejo Road near Palm Springs Airport. Nearly \$1.8 million in additional startup funding for the Accelerator Campus came from a \$785,000 federal grant and \$1 million in sales tax revenue generated through Measure J,<sup>59</sup> which was to be provided over a three-year period.<sup>60</sup>

Joe Wallace, CVEP's CEO, said 10 healthcare company startups have been incubated during the past six years. "We have one very promising one that is testing a patented device to reduce infections during surgery. The name of the company is Double Lock Systems and the founder is a nurse-anesthetist at the Desert Care Network. The others are either in proof of concept or seeking funds," he said.

Wallace said the iHub has lost a few promising healthcare business startups because the Coachella Valley does not yet have local venture capital companies who can help take these firms to the next level. "There is still no venture capital in the Coachella Valley," Wallace said. "Our companies have raised over \$30 million and less than \$1 million (of that) was raised locally," he said.

Additionally, Wallace said, while local officials recognize the need to diversify the economy, promotional efforts across the valley are still heavily weighted by investments in tourism. He noted that CVEP's latest annual budget was \$1.3 million, while the Greater Palm Springs Convention and Visitors Bureau had a budget of \$19 million, nearly 20 times CVEP's budget.

"Local government investments have created an over-dependence on tourism, first, by feeding it massive amounts of money and, second, by only funding diversification efforts by a token amount," Wallace said, adding that two cities in the valley — La Quinta and Coachella — provide no funding at all for CVEP.

He said cities across the valley need to have skin in the game if they are serious about diversifying the local economy, whether to provide more jobs in healthcare or other industries.



Moreover, he said, such investments are critically needed to protect the local economy and local residents from the problems that result from over-dependence on one or two industries.

“It took 75 years and regional marketing to create the robust tourism economy that the Coachella Valley depends on for sustenance. To see the same kind of results in diversification into well-paying businesses will take a similar level of investment and it will take time,” he said, adding, “Rome was not built in a day and neither was Silicon Valley. It took investments in education, critical infrastructure and regional thinking followed up by appropriate and sustained investments to make that happen.”



# District Grants to the Dr. Carreon Foundation are Making a Difference

**While Desert Healthcare District has directed millions of dollars in grants to institutions of higher learning across the Coachella Valley, the District has also issued \$15,000 in matching grants to the Dr. Carreon Foundation, which provides scholarships to Latino students.**

Originally from San Antonio, Texas, Dr. Reynaldo Carreon, Jr. was an ophthalmologist who dedicated his life to helping others. He lived in Indio for 52 years and joined four other physicians in co-founding Indio Community Hospital in 1966. It was later renamed John F. Kennedy Memorial Hospital in 1984.

Dr. Carreon established a scholarship fund in 1990 to help aspiring Mexican American college students from the Coachella and Palo Verde Valleys.

"We have about 350 to 500 applications for scholarships each year and about 40 percent of the applicants say they are interested in the field of healthcare," said Ricardo Loretta, who serves as executive director of the Dr. Carreon Foundation in addition to serving on the advisory board for the Palm Desert Campus of California State University, San Bernardino.

Recent Dr. Carreon Foundation scholarship recipients include 23-year-old Guadalupe Arreola of Thermal, who

graduated from the University of California, Los Angeles (UCLA) in 2020 with a Bachelor of Science degree in biology, while minoring in chicano and chicana studies.

Arreola, who was born in Patzcuaro, Michoacan, Mexico and brought by her parents to Thermal at the age of two, said she is interested in the healthcare profession and was spending her gap year handling patient registrations in the emergency department at Eisenhower Medical Center in Rancho Mirage while she plans the next steps for her education.

"I am looking into becoming a Physician's Assistant," she said, adding that she plans to return to the Coachella Valley to develop her healthcare career after she completes her education.

Other Dr. Carreon Foundation scholarship recipients include Celina Avalos, who graduated from UCLA in 2019 with a degree in political science. Avalos was born in Guanajuato, Mexico and came to Mecca with her family at the age of four.

After graduating from UCLA, Avalos found a job in Washington, D.C. working for the National Association for the Advancement of Colored People's Legal Defense Fund. "My goal is to come back to the community and give back," she said.

Arreola and Avalos are intimately familiar with the hardships faced by farmworker families in the eastern Coachella Valley and they are passionate about using their education to help people in their communities.

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*Photo Left: Guadalupe Arreola of Thermal received a grant from the Dr. Carreon Foundation. She graduated from the University of California, Los Angeles (UCLA). Courtesy of Guadalupe Arreola.*



Avalo has already taken steps to make an impact. She recently set up a nonprofit group affiliated with the Dr. Carreon Foundation called ECV for Change, whose focus is to pair up high school students with college students and recent college graduates who can mentor them. More information is available at <https://www.carreonfoundation.org>.

# Tenet Healthcare Launches its Own Residency Program

**While Tenet Healthcare recently made a decision not to renew its contract with the University of California, Riverside to provide residency training for students enrolled in UCR's School of Medicine, Tenet is dramatically expanding its own residency program at Desert Regional Medical Center.**

"We have 119 total residents moving through our system at Desert Regional," said Linda Evans, Tenet's chief strategy officer. That means a growing number of locally trained doctors, many of whom are likely to stay in the Coachella Valley as they continue to develop their careers.

One of Tenet's residents is Dr. Jessie Davis, who earned her Doctor of Osteopathic Medicine degree at Pacific Northwest University in Yakima, Washington before coming to Desert Regional, where she participated in Tenet's three-year residency program in emergency medicine, completing her residency in June of 2020. Dr. Davis spoke highly of Tenet's residency program.

"The faculty and staff at (Desert Regional Medical Center) who have guided our training in emergency medicine have taught us how to be efficient, compassionate, competent leaders in our field. I have learned an incredible amount in the last three years, and this training has allowed me to feel confident practicing anywhere," she said.

But while she could go anywhere, Dr. Davis said she plans to stay and work at a hospital in the Coachella Valley.

"The decision to stay has been influenced by both personal and professional goals," she said, adding, "The desert has many draws for young healthcare professionals. From a vocational standpoint, there are several great hospitals in the area, with numerous surrounding clinics. Location-wise, this is a beautiful area with access to a range of outdoor adventures. Depending on the time of year, one can have access to skiing, snowboarding, rock climbing, hiking, backpacking and surfing, among other activities, all within a two-hour radius. In addition, the desert is home to a tight-knit community that hosts a wide variety of social activities, including film and music festivals, outdoor markets, and conventions, just to name a few. Once it is safe to resume these events (after the COVID-19 pandemic), I know the community will be even stronger than it was before. In the meantime, I am also planning to join the California Medical Assistance Team in response to the COVID-19 pandemic."

## The District's New Service Area: The Eastern Coachella Valley

While Desert Healthcare District was formed to serve the western half of the Coachella Valley west of Cook Street in Palm Desert, the District has always taken particular interest in funding grants that address the health and wellness needs of the most impoverished communities within its service area.

Examples of the District's many initiatives to improve healthcare services in underserved communities can be found in Desert Hot Springs, in Cathedral City, including its Dream Homes community, and in the Desert Highland Gateway Estates community in Palm Springs.

However, District officials have long felt that something also needed to be done to address the glaring health and wellness needs of the eastern Coachella Valley.

A June 22, 1963 report in *The Desert Sun* documented an effort by a group seeking to establish a healthcare district for the eastern Coachella Valley, but the effort never got very far off the ground, according to the report, which noted that "similar efforts have been previously rejected."

Of course, the challenge inherent in expanding Desert Healthcare District's service area to include the eastern Coachella Valley involved money.

Desert Healthcare District was set up in 1948 with funding from 1 percent of property tax revenue collected within its service area. Arguments have taken place between District board members over whether it's right to use a portion of property tax money collected in the western Coachella Valley to address health and wellness needs in the East Valley. In fact, one former District board member, Michael Solomon, went so far as to file suit against the District in 2015, alleging that its CEO and certain board members were improperly using District grants to fund programs that benefited East Valley residents. The case was later dismissed.

### The socioeconomic realities of the eastern Coachella Valley

The Flying Doctors is a humanitarian group of doctors and dentists that travels all over Mexico to provide the poor with medical and dental care they might not otherwise receive.

Twice a year, The Flying Doctors also organize medical missions to serve communities in the U.S. with exceptionally large numbers of impoverished people without access to

sufficient medical or dental care. One of these humanitarian missions takes place in Twentynine Palms. The other takes place in the farming community of Thermal, in the eastern Coachella Valley.

In 2019, nearly 600 men, women and children showed up at The Flying Doctors' annual medical mission at Desert Mirage High School in Thermal, which takes place in collaboration with Coachella Valley Volunteers in Medicine and Rancho Mirage-based IMAHelps.

The living conditions of many migrant farmworkers are deplorable, according to Borrego Health's 2020 Needs Assessment for the eastern Coachella Valley.

**Borrego Health estimates that nearly a third of the farmworkers in the eastern Coachella Valley suffer from abysmal living conditions, with 30 percent living "in situations not meant for human habitation, such as outdoors or other locations not meant for**



"The poverty is very similar to what we see in Mexico," said Luz Moreno, president of the So Cal Chapter of The Flying Doctors, which is known in Spanish as *Los Médicos Voladores*. "We see people who are either uninsured or non-insured."

These workers are the same people who enabled Coachella Valley growers to harvest \$623.8 million dollars' worth of table grapes, dates and other crops in 2018, according to statistics compiled by the Riverside County Agriculture Commissioner's Office.

**sleeping, (including) cars/truck(s)/vans/trailers on streets or in parking lots (as well as) trailers or RVs on private property or in converted garages. Many report not having access to water, restrooms and stove(s) to prepare food," Borrego Health states in its Community Needs Assessment for 2020.**

Such living conditions compound the health risks farmworkers face in doing their work.

**Photos:** Volunteer dentists, dental assistants and hygienists from Rancho Mirage-based IMAHelps provide care for patients at The Flying Doctors' annual medical humanitarian mission in Thermal in 2019. Courtesy of IMAHelps.

"It is known that the working and living conditions of farm workers expose them disproportionately to respiratory, musculoskeletal, pesticide-related and infectious diseases," Borrego Health writes, adding, "Farm workers are also at risk for chronic conditions that include high blood pressure, diabetes, asthma, heart disease and high cholesterol."

## Many Eastern Coachella Valley Communities Lack Basic Health and Wellness Services

One key reason for building Eisenhower Medical Center was to provide elderly residents of Rancho Mirage and Palm Desert with a hospital that could serve them if they suffered a heart attack or stroke that required immediate medical attention.

Florence Swanson of Rancho Mirage began her advocacy for a hospital to be built in Rancho Mirage in 1961 after her husband, W. Clarke Swanson, the former president of Swanson Foods — the company that introduced TV dinners — died of a stroke while golfing with former President Dwight D. Eisenhower at Thunderbird Country Club.

"Clarke's wife, Florence, was convinced that if there had been a hospital nearby, her husband's life might have been saved," *The Desert Sun* wrote in a March 22, 2015 report, adding, "She became one of the first advocates of building a centrally located hospital in the valley. She rallied friends Dolores Hope, Peter Kiewit, Walter Annenberg and Paul Jenkins, among others, to raise funds for a hospital."

The fundraising campaign was successful and Eisenhower Medical Center opened in 1971.

Yet half a century later, residents of the impoverished, far-flung communities of the eastern Coachella Valley still do not have access to emergency medical facilities within even 45 minutes of their homes, the continuing absence of which is costing people's lives.

Desert Healthcare District Board Member Karen Borja has heard heartbreaking stories of East Valley residents who have lost loved ones simply because they could not get to a hospital or other emergency medical facility in time. One case involved a North Shore man who was suffering from a heart attack.

**"His daughter told me through tears how she realized that even if she called 911, it would take an ambulance 40 minutes to arrive in North Shore, and another 40 to 50 minutes before her father would arrive at the hospital in Indio. So, she decided to drive her father to the hospital herself," Borja said. "He didn't make it. He died en route to the hospital."**

In addition to suffering from extreme poverty, residents of the most remote eastern Coachella Valley communities lack essential healthcare infrastructure, such as facilities that provide emergency services and specialized care. At the time of this writing, portions of some East Valley communities do not even have bus service.



## The Call to Expand the District's Service Area to the Eastern Coachella Valley

Some Desert Healthcare District officials argued that funding sources should be identified and secured before expanding the District to include the East Valley. But while these debates took place internally, public calls to expand the District's service area gathered momentum as a result of the efforts of a young physician from Coachella named Raul Ruiz.

Dr. Ruiz was exactly the type of East Valley resident the District sought to clone with its Career Pathways and scholarship funding — someone who exemplified the idea that it was possible for students who study hard to rise up from the poverty of the East Valley, become a doctor, and come back to serve their community.

Ruiz was born in Zacatecas, Mexico and came to Coachella with his parents at the age of two. Like many East Valley residents, he lived in a trailer. But he eventually rose through academia. After graduating from Coachella Valley High School, he earned a Bachelor of Science degree in Physiological Sciences/Pre-Med from the University of California, Los Angeles (UCLA) before going to Harvard University, where he earned a Master of Arts in Public Policy from the John F. Kennedy School of Government as well as a Master of Science in Public Health from the School of Public Health in



addition to his Doctor of Medicine (MD) degree. Dr. Ruiz was the first Hispanic to earn three graduate degrees from Harvard University.

When he returned to the Coachella Valley in 2007, Dr. Ruiz became an emergency room doctor at Eisenhower Medical Center. Not long after that, Dr. Ruiz said he was invited to give inspirational speeches at high schools across the valley to motivate students to go to college. He encouraged them to cultivate mentors to guide them in their career pursuits and made himself accessible to the students, seven of whom initially met with him at a Starbuck's to start mapping out their careers.

"We started talking about the pathway to become a doctor, the servant's heart of a doctor, why I like it, what to expect when they go to college," he said. "Some students would say, 'I want to be a doctor just like you,' and come home and serve the community.' Then I offered to allow them to shadow me in the emergency department."

While Dr. Ruiz continued his work at Eisenhower Medical Center, *The Desert Sun* gathered statistics and other information for a series of reports in December of 2009 that documented extreme disparities in healthcare and healthcare access between the eastern and western areas of the valley and likened conditions in the East Valley to those of "Third World countries."

The newspaper noted that in Palm Springs there was one doctor for every 193 people, which was substantially higher than the World Health Organization's recommendation of one doctor per thousand people. In Mecca, Oasis and Thermal, however, there was only one doctor for every 3,000 people, *The Desert Sun* noted in its December 13, 2009 report.

Reporter Nicole C. Brambila was shocked at the condition of patients being treated at The Flying Doctors' annual humanitarian medical mission in Thermal, which took place just one month before her reports were published. "One man's tooth was so rotten the infection reached his ear," she wrote. "Another registered a blood sugar level of 500, more than 300 points above normal."

More than 1,200 farmworkers and their families lined up seeking treatment from the volunteers. "Just the sheer number of people waiting so long is a statement of the enormous need," Dr. Ruiz told Brambila for her report.

A month later, Dr. Ruiz organized a Coachella Valley Healthcare Summit on January 12, 2010 in partnership with Chauncey Veatch, a widely recognized educator from Coachella Valley High School and recipient of the National Teacher of the Year Award for 2002-2003 who also served on *The Desert Sun's* editorial board. They invited more than two dozen community leaders to attend the event, including representatives from state and local foundations as well as medical and educational organizations. Desert Healthcare District was among the more than 50 community organizations that supported the event, which community leaders used as a first step in mapping out a strategy to address the East Valley's healthcare needs.





Dr. Ruiz subsequently recruited 25 local high school and college students to join him and several other doctors in developing a needs assessment, called the *Coachella Valley Healthcare Access Report*, which documented unmet healthcare needs across the entire Coachella Valley. The December 2010 report served as the statistical foundation for the Coachella Valley Healthcare Initiative, which outlined a variety of strategies, including the idea of creating a healthcare district to serve the eastern Coachella Valley.

By this time, the University of California, Riverside (UCR) had recruited Dr. Ruiz to become senior associate dean of its nascent medical school. "UCR recruited me to develop pipelines (of Coachella Valley students)," Dr. Ruiz said, noting that he had proven it was possible for an immigrant child of poverty in the eastern Coachella Valley to become a doctor and return to serve his community.

But it wasn't until Dr. Ruiz became a congressman in 2012, defeating Rep. Mary Bono, that he acquired the political influence he needed to take his support for improved healthcare services in the eastern Coachella Valley to the highest levels. Working with community leaders, it was ultimately decided that it would be more efficient to expand Desert Healthcare District's boundaries to include the eastern Coachella Valley rather than creating a new district to serve the area.

Assemblyman Eduardo Garcia, who grew up in Coachella and was elected to the Assembly in 2014, crafted legislation to allow the expansion of the District's boundaries with the consent of eastern Coachella Valley's

voters. Meanwhile, Riverside County Supervisor Manuel Perez, who also grew up in Coachella, worked to secure support for the District's expansion from the Riverside County Board of Supervisors. When the election took place in November 2018, Measure BB, the initiative to expand the District's boundaries, was approved with the support of nearly 80 percent of the voters.

Assemblyman Garcia said the expansion of the District is already providing health and wellness benefits for people who live in the eastern Coachella Valley.

"We have already witnessed the direct impact of this in action," Garcia said. "During the 2019 fall Thermal fires, Desert Healthcare District was one of the first to mobilize medical personnel and regional partners to provide medical service. This included setting up at a local school site to treat smoke-impacted students and families living in proximity to the blaze. The expanded Desert Healthcare District was also perfectly positioned to rally a valley-wide COVID-19 pandemic response by quickly facilitating funds and resources to see our community through these unprecedented times. These funds were designated based on a developed infrastructure of collaborative community partnerships."

While Dr. Ruiz said a reallocation of existing property tax revenue in the eastern Coachella Valley will be needed to provide funding for Desert Healthcare District's expanded service area, he also noted that the District itself is now positioned to seek grants, just like the many nonprofit agencies it has funded for the past two decades.

"Now (the District and its nonprofit partners) can apply for large (National Institutes of Health) grants, foundational

grants, and the Healthcare District can become the fiscally responsible agent to help coordinate that," Dr. Ruiz said.

Garcia agreed that with the expansion of the District to include the eastern Coachella Valley, a structure is now in place to secure more funding to improve health and wellness needs in East Valley communities.

"We now have a mechanism to consider immediate and long-term medical investments as well as to put in place desperately needed prevention, mitigation, and response resources when and where they are needed the most," Garcia said, adding, "I fervently believe our community's access to resources should never be restricted based on zip code. The Desert Healthcare District expansion was necessary to bring healthcare services closer to where they are needed."

**For her part, Luz Moreno of The Flying Doctors said the measure of true success will be achieved when her volunteers no longer need to perform humanitarian medical missions in Thermal each year. "My goal," she said, "is to see nobody in line."**



*Photo: Luz Moreno, president of the So Cal Chapter of The Flying Doctors. Courtesy of Luz Moreno.*

## Tackling Homelessness as a Collaborative Effort

**The problem not only involves the 500 to 1,000 or more Coachella Valley adults who are unsheltered every night, but the 3,000 school children who have no stable housing and are at risk of experiencing domestic violence.**

Homelessness is a big issue in the Coachella Valley.

While the numbers of unsheltered homeless people fluctuate from year to year, the valley typically has 500 to 1,000 or more unsheltered adults at any given time, according to published reports.

Homeless people are all over this valley. At the time of this writing, they could be seen frequenting bus stops along Indian Avenue in Palm Springs, congregating behind stores and businesses along Highway 111 in Cathedral City, and living in encampments under the tamarisk trees near Avenue 48 in Coachella. Some even live out in the open desert in shacks and abandoned cars.

While Desert Healthcare District has provided grant support for homeless shelters since the early 2000s, the District launched its biggest effort targeting homelessness in 2017 in collaboration with the Coachella Valley Association of Governments (CVAG) and cities across the valley.

The collaborative effort was precipitated by a decision by Riverside County to close a 90-bed emergency shelter in Palm Springs called Roy's Desert Resource Center and convert it into a long-term behavioral healthcare facility.

A big reason Roy's was forced to close, however, was because several cities across the valley failed to provide the support for the facility that they had originally promised.

"First, four desert cities backed out on their promises to give \$103,000 to Roy's annually. Indian Wells, Desert Hot Springs and Coachella pulled out of Roy's in 2012 and 2013, and La Quinta never paid into Roy's once it opened," *The Desert Sun* wrote in a May 29, 2016 report.

But while the county said it needed to use Roy's for long-term care of psychiatric patients, the loss of Roy's as an emergency homeless shelter in June of 2017 meant that the entire Coachella Valley would suddenly be left with only two emergency homeless shelters in the eastern end of the valley

— the Coachella Valley Rescue Mission and Martha's Village & Kitchen, both of which are in Indio bordering Coachella.

In an effort to address the loss of Roy's as an emergency homeless shelter, CVAG's Executive Committee approved the creation of the West Valley Housing Navigation Program on June 26, 2017 and contracted with Riverside-based Path of Life Ministries to oversee programs that focus on rapid rehousing opportunities, emergency rental assistance as well as crisis stabilization and other supportive services.

Path of Life Ministries uses what's called a "housing first" model to address homelessness. "It's the idea that if we can get people into housing, you can then focus on the other issues in their lives that may be leading to homelessness, whether it's mental health, substance abuse or other issues," said Erica Felci, CVAG's manager of government projects.

A day after CVAG's Executive Committee established the West Valley Housing Navigation Program, Desert Healthcare District's Board of Directors voted 5-0 to give up to \$2 million to the program. In addition, the District promised to match grants of \$103,000 by cities that supported the fund.

**"The collective fund is a way to try and bring together as many funders as possible for the same goal," District CEO Herb Schultz told *The Desert Sun* in a June 30, 2017 interview. "We know the problem is growing. We want to be a significant part of solutions to help address the crisis."**

As part of its collaborative efforts, the District also issued a \$225,000 grant to Palm Springs in 2019 to help the city pay



for its Homelessness Crisis Team and "wrap-around services." Services include providing homeless people with assistance signing up for Social Security and other benefit programs and referring them to agencies and nonprofits that can help them, said Jay Virata, Palm Springs' community and economic development director.

Felci of CVAG said the District's support for a collective program to address the problem of homelessness in the Coachella Valley has been essential.

**“These are incredibly complex problems,” she said. “There’s not a one-size-fits-all solution, particularly for homelessness. Having the District as a partner in this has been invaluable, and it has incentivized communities that historically had not previously participated in homeless issues.”**

In an effort to bolster the valley’s success in addressing the problem of homelessness, the District hired Barbara Poppe, one of the nation’s top experts on homelessness and results-driven public-private partnerships, to study the valley’s homeless problem and develop a roadmap that local agencies could follow to address it.

Poppe, who has made several visits to the Coachella Valley for research and consulting work with local officials, said the valley has some of the most blatant contrasts between rich and poor she has ever seen in her consulting work across the United States.

“In the Coachella Valley, you do have extremely high levels of income inequality,” she said. “You have some really affluent communities and neighborhoods and a place for people of affluence to come visit along with a very high (percentage) of second homes or third homes or fourth homes. At the same time, you have extreme abject poverty, whether it’s migrant farming communities or indigenous people there.”

Poppe also noted that the valley’s two biggest economic sectors — tourism and agriculture — generally provide low-paying, seasonal jobs. “You have people that lose their income altogether (each year),” she said. “That season when you don’t have tourists is three to four to five months.

It’s a pretty long time to be without income.”

The low wages and seasonal nature of the valley’s tourism and agriculture jobs are further compounded by the high price of housing and lack of affordable housing. “It’s really a troubling cycle,” she said.

Poppe’s report provides detailed guidance to public agencies, nonprofit organizations and other potential stakeholders on how they can partner with one another to develop and maintain an ongoing collaborative effort to eradicate homelessness in the Coachella Valley. From a strategic standpoint, her recommendations highlight the importance of:

- **Creating a shared agenda, a clear plan of action and clear, measurable goals.**
- **Providing open and continuous communication involving all players to build trust, assure mutual objectives and to support shared work.**
- **Increasing funding from public, philanthropic and private sources.**
- **Promoting community awareness and education about the problem of and solutions to homelessness in the Coachella Valley.**

Poppe also highlights numerous “best practices” that have proven effective at reducing homelessness in other communities across the country. These recommendations include:

- **Creating a real-time, up-to-date list of all people experiencing homelessness that can be sorted or**

**filtered by category and shared across agencies.**

“Creating this shareable master list, and continually updating it, ensures that all providers and partners are on the same page and have a (clearly) identified group of people who need housing,” she wrote, adding, “A By-Name list also facilitates community decisions on how to identify the needs of each person, target those who may be eligible for various programs and prioritize people who are most in need of housing and services.”

- **Implementing a “Rapid Rehousing” approach on a valley-wide basis:** This is a strategy aimed at providing homeless people and families with emergency housing as soon as possible. While some Coachella Valley agencies are using this approach, it was not being utilized on a valley-wide basis at the time of Poppe’s report. The “Rapid Rehousing” model “has been successful in helping families and veterans exit homeless shelters to live in housing units in the private rental market faster than they would on their own and at lower cost.”
- **Developing an inventory of traditional and non-traditional affordable housing:** This inventory list should also include a list of owners who can be contacted to determine their interest in upgrading and keeping their properties affordable to low-income renters with histories of homelessness.
- **Engaging and recruiting landlords to provide affordable housing for homeless individuals and families.**

- **Creating a landlord mitigation fund to provide financial protection for landlords who are willing to reduce screening criteria to rent to someone with limited income and a poor rental history.** “If there are excessive damages to the unit, lost rent, or legal fees beyond the security deposit, property owners can be reimbursed for damages up to a specific amount,” Poppe wrote. “This can be particularly helpful in areas with extremely low vacancy rates. It can serve as both a damage fund and short-term vacancy reimbursement, so the unit is not lost to the larger market.”

Linda Barrack, CEO of Martha’s Village & Kitchen in Indio, said it is imperative that a plan be formulated with sustainable funding to re-establish a homeless shelter in the western Coachella Valley. “Forty five percent of our homeless population comes from the West Valley,” Barrack said.

### **3,000 Homeless Coachella Valley School Children**

Poppe’s report also documents the growing problem of homeless schoolchildren across the valley, particularly in Palm Springs and Desert Hot Springs.

“The rate of homelessness in the three school districts that serve the Coachella Valley is unacceptably high: more than 3,000 children were counted as homeless across the three CV school districts with rates of homelessness (of) nearly 10% in the Palm Springs Unified School District,” Poppe wrote, adding, “A review



**of the four-year trends appears to show an increase in homelessness among school children."**

Poppe said the homelessness among families can place children at risk of domestic violence.

"There is a high correlation between domestic violence and homelessness among families with children," she wrote. "While local data was not available to determine the extent to which this is occurring in Riverside County and the Coachella Valley, domestic violence is likely prevalent in this region and negatively impacting children."

To address this problem, Poppe recommends that the collaborative effort to end homelessness in the Coachella Valley include an early-childhood and school-based collaborative for prevention of homelessness.

"The collaborative should work to stabilize families with children who are imminently at risk of literal homelessness and living in precariously housed situations," she said. "These include families who are severely cost-burdened, living in over-crowded or substandard conditions, doubled up with families or friends, or living in hotels/motels. Children who have experienced domestic violence and/or child welfare involvement should be prioritized."

Poppe said the collaborative should identify, link, and coordinate services and programs to stabilize the most vulnerable children and families and prioritize the schools with the highest rates of homelessness. She noted that Theodore Roosevelt Elementary School in Desert Sands Unified School District had a 12 percent rate of homelessness during the 2017-2018 school year, while Two Bunch Palms Elementary School and Landau Elementary School in Palm Springs Unified School District documented homeless rates of 21 percent and 25 percent, respectively.

Felci of CVAG said Poppe's report has been a critical resource. "We have used it as a blueprint for how we are going to move forward," she said. "It is the guiding document in the desert for dealing with homelessness."



*Photo: A bundled up homeless woman sips a hot drink near Palm Canyon Drive in Palm Springs on Thanksgiving morning, 2020. Courtesy of Jeff Crider.*

Desert Healthcare District is a member of CVAG's Homelessness Committee, which organized a subcommittee to form a homelessness collaborative dedicated to the Coachella Valley. This effort has been widely supported by a full spectrum of stakeholders, including public, private, and nonprofit entities. The collaborative was envisioned as a way to unite services and administer funding based on shared data-driven goals. At the time of this writing, CVAG was in the process of working with Riverside County to work through the logistics of forming a regional collaborative, including data-sharing options and leveraging of existing resources.

Meanwhile, in early 2020, Desert Healthcare District issued a \$100,000 grant to Lift to Rise, a Palm Desert-based nonprofit organization that is working to promote the development of more affordable housing across the Coachella Valley.

In January of 2020, Lift to Rise announced plans to promote development of 2,000 affordable housing units during the next two years, although it was anticipated that construction would take longer than that. About 77 percent of the units are expected to be multi-family rental units, with 13 percent being new mobile homes and 7 percent being rehabilitated mobile homes. Only about 1 percent would be



**Photo:** An aerial view of a large homeless encampment in Coachella. Courtesy of Jimmy Dorantes.

single-family homes. Most of the units would be built in Palm Desert, Indio, Mecca and Thermal.

"The organization doesn't fund development projects, but provides research and financing at the start of projects, such as planning or pre-development dollars, to help affordable housing projects look viable to other investors," Lift to Rise Director Heather Vaikona told *The Desert Sun* in a January 17, 2020 report.

While 2,000 affordable units is a significant number, more than 10,000 affordable housing units are needed in the Coachella Valley to meet current demand, according to research conducted by Lift to Rise.

"Between 2010 and 2018, just 38 affordable (units) were built per year," *The Desert Sun* said.

The newspaper also cited research by Lift to Rise indicating that over 50 percent of Coachella Valley households were rent-burdened, meaning they have to forgo food, childcare or utilities to pay rent.

"This data confirms what residents have been telling us for years," Vaikona said. "That the issue is housing stability. Rent is too high, and wages are too low. Residents just can't afford to get by."



*Photos: A homeless woman in the homeless encampment in Coachella. Courtesy of Jimmy Dorantes.*

## The COVID-19 Pandemic

**The District initially provided nearly \$1.3 million in support for COVID-19 test stations across the valley as well as assistance to nonprofit agencies that provide everything from food and shelter to economic assistance.**

At the time of this writing, the United States was experiencing the first waves of the COVID-19 pandemic, the deadliest virus to sweep the globe since the so called "Spanish influenza" of 1918.

On March 24, 2020, the Desert Healthcare District and Foundation Board of Directors allocated nearly \$1.3 million in grants to ramp up COVID-19 testing efforts across the Coachella Valley and to provide emergency funding to several nonprofit organizations that provide a variety of safety net services to valley residents.

Initial District funding to combat COVID-19 was allocated as follows:

- **\$550,000 for a "healthcare safety net infrastructure"**

to prevent hospital emergency rooms from being overwhelmed by people seeking care to ensure that Federally Qualified Health Centers are responsive to patients' needs. The Regional Access Project (RAP) Foundation provided \$50,000 in matching funds for a total of \$600,000.

- **\$401,380 for FIND Food Bank, the valley's regional food bank, which established seven rapid-response mobile units and planned to operate six more mobile units across the valley.**
- **\$100,000 for an economic protection plan to provide financial assistance to low-income families, with additional matching funds from other organizations, including \$50,000 from the RAP Foundation; \$50,000 from Lift to Rise; \$25,000 from United Way of the Desert; and \$15,000 from Inland Empire Community Foundation. Recipients would receive a one-time allocation of \$200 per household to help with rent, utilities, food and other essentials, with Lift to Rise serving as the administrator of the program. The collective contributions were used as seed money to leverage additional dollars from private donors and foundations.**
- **\$100,000 for core operation support to nonprofit organizations serving populations most vulnerable to and at risk of COVID-19, such as seniors, the**

homeless, residents with special needs and others with chronic or long-term illnesses. The RAP Foundation provided a \$100,000 matching grant for a total allocation of \$200,000. This funding will provide grants up to \$10,000 for basic needs, such as clothing, food, water and other items for at least 20 organizations. This fund will contribute to the health and well-being of vulnerable members of our community, including seniors, medically compromised people, and communities with limited access to essential services.

- \$50,000 for an educational campaign to counter misinformation and to raise awareness among the public about COVID-19 prevention and care.
- \$75,000 to support organizations serving the homeless and migrant worker communities. Three organizations were selected to be eligible for \$25,000 each: Coachella Valley Rescue Mission, Martha's Village & Kitchen and the Galilee Center. The fund provided core operation support, such as staffing, food, clothing and other supplies needed in housing the homeless and migrant workers.

Since the initial allocation, the District board has awarded additional grants and financial support, bringing the total funds in response to COVID-19 to nearly \$3 million by late fall 2020.

At the time of this writing, both current and former District officials said the COVID-19 pandemic underscores why it made sense to expand the District's service area to include the eastern Coachella Valley.



Wayne Soucy, who came to the Coachella Valley from previous job assignments in Canada and served as the District CEO from 2003 to 2007, said he always saw the valley as a single geographic unit.

**“As somebody from the outside looking in,” he said, “we are the perfect sort of microsystem, surrounded by the mountains. In this valley, if somebody gets sick in Palm Springs, they may catch it in Coachella, and vice versa. It was very bothersome to me that the District wasn’t able to cover the whole valley for so many years. But I’m incredibly thrilled that it’s finally happened.”**

Dr. Raul Ruiz, who has represented the Coachella Valley in Congress since 2012, said the value of expanding the District’s service area to include the eastern Coachella Valley has been amply demonstrated through the support it has already been able to provide to East Valley communities through expanded COVID-19 testing, economic assistance and other support the District provides to nonprofits providing a variety of health and human services.

**“For me, philosophically, it’s important that we see ourselves as one valley with responsibility for each other,” he said.**

## One Agency's Path to Making a Difference

From a historical standpoint, Desert Healthcare District has an enduring, seven-decade legacy of consistently striving to improve the health and wellness of District residents.

Operating as Desert Hospital District for its first half century, the District fulfilled its mandate to build and operate a public hospital to serve Palm Springs and surrounding communities.

Desert Hospital was the first in the valley to have a Level II trauma center, the first to offer a neonatal intensive care unit, and the first to establish a comprehensive cancer treatment center.

The District and its auxiliary also succeeded in recruiting many of the desert's most famous celebrities to support fundraising events that brought national media attention to Palm Springs and to the hospital itself.

In fact, the history of Desert Hospital is deeply interwoven with the Coachella Valley's history as a playground of presidents and Hollywood stars. The hospital itself was built

right next door to the El Mirador Hotel, the movie star hangout that helped Palm Springs to become internationally known in the first place.

But, as we have seen, Desert Hospital District's path to making a difference wasn't easy. Economic and political changes took place decades after the hospital was built that had consequences no one could have foreseen.

Insufficient Medicare, Medi-Cal and HMO insurance reimbursements and an increasingly competitive market with private healthcare providers and hospital chains eventually created financial stresses and rising debt loads that forced many public hospitals in California and across the country into bankruptcy or to lease their operations to private companies. Desert Hospital retained its independence longer than many of its peers. But, by 1997, the District's board of directors realized they, too, had no choice but to change course and lease Desert Hospital to Tenet Healthcare, which not only paid off the hospital's debt, but was able to profitably operate the hospital in an extraordinarily competitive healthcare market.

At the time of this writing, 23 years after leasing Desert Hospital to Tenet, District board members agree they made the right decision. But while leasing Desert Hospital to Tenet may have initially been bittersweet, the decision enabled the District

to adopt a new identity as Desert Healthcare District and a new mission as a grant-giving agency.

Since the late 1990s, the District has increasingly used independent research and statistics to guide its grant-giving decisions as well as its collaborative efforts with other agencies. The net result of these efforts has been to transform Desert Healthcare District into the Coachella Valley's largest and most influential incubator and funder of health and wellness initiatives.

The District co-founded Health Assessment and Research for Communities (HARC), the first independent organization to gather health and wellness statistics specific to the Coachella Valley.

It's HARC's triennial surveys that consistently reveal the very stark socioeconomic realities of life in the Coachella Valley, which serve as sobering counterpoints to the branding of the area as a "playground of presidents" and Hollywood stars.

It's the reality that for every mansion or gated community in the valley, there are thousands of senior citizens and families who cannot adequately feed or house themselves, let alone pay for health insurance.

It's the reality that the same farmworkers who enable growers to harvest over \$620 million in Coachella Valley crops each year are so impoverished that they get their medical and dental care once a year during a one-day medical humanitarian mission organized by The Flying Doctors, a nonprofit group that provides free healthcare to people who live in the poorest communities in Mexico.

"When you look at the District and you scratch the surface and go a little deeper, you see that our District is not only about celebrities and an eternal summer," said District CEO Dr. Conrado Bárzaga. "We have so many challenges when it comes to health equity. One fifth of our population is uninsured even after the Affordable Care Act, and that deepens the divides between the haves and have-nots."

But the District has learned over the years that it can multiply the positive effects of its grants by making strategic investments and by partnering with other agencies and nonprofit organizations to address the valley's greatest health and wellness needs.

HARC's triennial surveys, for example, not only guide the District's grant-giving efforts, but they enable other health and wellness focused nonprofits to obtain millions of dollars in grants from other organizations for the benefit of Coachella Valley residents.

The District's frequent investments in community health assessments and other independent research also enable it to direct its grants to nonprofit health and wellness organizations to help them increase their provision of life-enhancing and life-saving services for the most vulnerable citizens in the District's service area.

**While relatively few people are aware of the District's work, we've seen how its many grants have not only paid for food for the hungry and therapy for people in crisis, but proactive, valley-wide testing for breast cancer, AIDS and COVID-19 as well as life-**



## changing and life-saving medical intervention and treatment for men, women and children.

We've seen how District grants for the therapists and case managers at Jewish Family Service benefit people like Jerry Moses, the 86-year-old Holocaust survivor in Cathedral City who still has nightmares from his childhood in Nazi Germany or Jasmine Landeros, the 26-year-old, single mother of three, who left an abusive marriage and was able to rebuild her life and career in Desert Hot Springs.

We've learned how District support for Coachella Valley Volunteers in Medicine has helped people like Hector Murrieta of Indio, who was quickly diagnosed with Marfan's syndrome and referred to Loma Linda University Medical Center, saving his life.

We've witnessed how District support for the Neuro Vitality Center in Palm Springs enables stroke victims like 64-year-old Tariq K. Panni to continue receiving therapy that improves his confidence and quality of life long after insurance coverage for such treatment has ceased.

We've heard directly from grateful parents how District grants for Pegasus Therapeutic Riding always bring smiles to the faces of disabled children and adults, like 23-year-old Nolan Simpson of La Quinta, who suffers from cerebral palsy.

We've also seen how the District has come to the rescue of nonprofit organizations that suddenly find themselves in financial distress, like Shelter From The Storm and United Cerebral Palsy of the Inland Empire, which lost all of their state funding in 2009.

Meanwhile, we've been able to appreciate the benefits of District support for homeless shelters like Coachella Valley Rescue Mission and Martha's Village & Kitchen in Indio, which provide life-saving and life-changing support to people who never thought they would ever be homeless in the first place.

We've seen how the District hired Barbara Poppe, one of the nation's top experts in homelessness, to develop a detailed roadmap to help local agencies address one of America's most vexing socioeconomic problems as a collaborative effort.

In many ways, the District acts like a think tank because it has the ability to commission researchers to study the valley's greatest health and wellness problems and identify solutions. The District also has the ability to implement the public health solutions that are identified through its research, not only by using its own funds, but by partnering with leaders of other organizations and soliciting matching funds to address these problems in a collective way, with the homeless collaborative being the most recent example.

We've seen how the District also uses its resources to bring healthcare infrastructure to communities with the greatest healthcare needs, such as Desert Hot Springs, which had only one doctor per 9,000 residents until the District got involved, initially providing Borrego Health with grant funding to help it open its first clinic in the city. The District later invested \$5.2 million in grant funding to help Desert Hot Springs develop a 32,000-square-foot health and wellness center.

We saw how the District provided nearly \$700,000 in grant funding that enabled Borrego Health to double the size of its Centro Médico Clinic, which serves an area of Cathedral City with some of the greatest unmet healthcare needs.

The District also makes strategic investments to help nonprofit organizations expand their infrastructure and improve their services. District grants issued to FIND Food Bank have not only enabled it to expand its warehousing facilities in Indio, but to purchase healthy fresh fruits and vegetables, the cost of which is out of reach of many valley residents.

We've also seen how the District has strategically invested millions of dollars in education and economic development initiatives to expand the Coachella Valley's healthcare workforce, which helps lessen local residents' dependence on low-paying tourism and agriculture jobs that leave people unable to pay for their health and wellness needs. These strategic investments in education complement the District's investments in healthcare infrastructure by expanding the local healthcare workforce, while helping Coachella Valley communities lessen the historic "brain drain" of local students who leave the valley for college and never come back.

**"Many of our youth are fighting to leave the valley, not to stay in the valley," Dr. B rzsaga said. "If we create a more robust healthcare infrastructure, that will create a stronger economy, and a stronger incentive for them to stay."**

Desert Healthcare District received the annual District of the Year Award in 2014 from the Association of California Healthcare Districts in recognition of its many investments in healthcare education and healthcare infrastructure, which have achieved measurable results.

The District's many achievements in health and wellness have also caught the attention of political leaders who have long advocated for an expansion of the District's service area to include the eastern Coachella Valley. East Valley voters approved the expansion of the District to include their area in the 2018 election even though a funding mechanism had not yet been established to pay for nonprofit health and wellness initiatives in the East Valley.

But District officials are confident they will be able to develop additional funding sources and strategies to address the health and wellness needs of the entire Coachella Valley.

"There is a geographical divide between the West and the East, and that division goes along with our racial diversity," Dr. B rzsaga said. "You see the concentration of Latinos and immigrants in the eastern Coachella Valley. When you look at the healthcare infrastructure, you see the same thing. In the West, you find the fancy hospitals and plastic surgeons. In the eastern Coachella Valley, it's hard to even find a family doctor, let alone MRIs and CT-scans. It's like you have the first world USA in the western half of the Coachella Valley, and you have a Third World Latin American country in the East."

Having been trained as a doctor in Cuba and having worked with ministries of health in Argentina and Bolivia, and later nonprofit public health organizations in the United States, Dr. B rzsaga is well equipped to address these inequities.

"Looking at it from a professional standpoint," he said, "I think I am not only prepared professionally, but I have the sensitivity to see through these things and I have it in my heart to change these conditions."

Future grant-making decisions, he added, will be based on input from community-driven needs assessments, much like those the District funded for the Desert Highland Gateway Estates in Palm Springs and the Dream Homes community in Cathedral City.

He added that decisions about how the District uses its resources in research and in grant giving that target specific health, wellness and educational objectives ultimately come down to treating people equally throughout the District's newly expanded service area.

"I think the District is a significant asset," Dr. Bázquez said. "I think those communities that

have healthcare districts are in a much better place because we have a profound level of understanding of what is needed.

**The resources we have are solely dedicated to addressing the needs of the community. Without the District, it would be left to market forces to create healthcare infrastructure. But you can see how market forces left the communities in the eastern**



## Coachella Valley without infrastructure. The role of the District now is to ensure equality."

Many people think the expansion of the District's service area is long overdue, including former District CEOs, such as Wayne Soucy, who served from 2003 to 2007, as well as elected officials and District board members from the eastern Coachella Valley, including Leticia de Lara and Karen Borja,

who were born and raised in the eastern Coachella Valley and have experienced its poverty first-hand.



**"We're talking about the people that are the real economic engine of the Coachella Valley," Dr. Bázquez said. "The people**

**that plant and harvest crops and serve the food on our tables. The people that are maintaining the landscaping and keeping our sheets clean. They deserve a much brighter future," he said.**

The recent effort to expand Desert Healthcare District's service area has also been paralleled by the appointment or election of new representatives on the District's board of

directors and the retirement of directors who have served on the board for decades.

Recent board retirees include Kay Hazen, who served on the District board for 18 years, from 2001 to 2018, and Mark Matthews, who announced his retirement in 2020 after 23 years of service on the board.

The newest board members at the time of this writing include Dr. Les Zendle, a retired physician from Kaiser Permanente who was elected to the board in 2016; Carole Rogers, a retired Registered Nurse who joined the board in 2014; Evett PerezGil, a community health worker from the Dream Homes community in Cathedral City and the first Latina elected to the board, starting her first term in 2018; Karen Borja of Indio, a communications director for Planned Parenthood of the Pacific, who started her first term in January of 2019; Leticia De Lara, CEO of the Regional Access Project Foundation, who also started her first term in January of 2019; and Arthur S. Shorr, president and founder of Arthur S. Shorr Associates, Inc., a nationally known healthcare consulting firm, who joined the board in April of 2019.

Aurora Tenorio Wilson, who was married to the late Riverside County Supervisor Roy Wilson and worked as director of community resources for the Coachella Valley Association of Governments (CVAG), said the presence of three Latina community members on the District's board is significant.

"Having diversity on the board plays an important role. It's really a value having different types of people with different types of backgrounds on the board," Wilson said, noting that

PerezGil, Borja and De Lara all have first-hand experience living and working in their respective communities as well as first-hand knowledge of the healthcare challenges that their constituents face.

PerezGil has worked as a community healthcare worker in Cathedral City's Dream Homes community, while Borja has worked extensively with impoverished people who live and work in the tiny communities and encampments of the eastern Coachella Valley. Her community work includes organizing the 2019 Coachella Valley Women's March and serving on the board of directors of Health Assessment and Research for Communities (HARC) in Palm Desert.

De Lara, for her part, grew up as a migrant farmworker, often attending four different schools each year. Her family lived in a trailer park without air-conditioning in the eastern Coachella Valley. But De Lara pursued her education, eventually rose to become chief of staff for Supervisor Wilson and district director for his successor, Supervisor John J. Benoit, before becoming CEO of the Regional Access Project Foundation.

The three Latinas complement other District board members who bring decades of experience in healthcare, hospital and healthcare district management as well as first-hand experience with nonprofit humanitarian organizations.

Dr. Zendle, who specializes in both internal medicine and geriatrics, volunteers with Indio-based Coachella Valley Volunteers in Medicine, which provides free and low-cost healthcare services to people who do not have health insurance.

Rogers, the Registered Nurse, has 45 years of nursing and healthcare management experience and was previously director and board chair of the Eden Township Healthcare District in Castro Valley, near Oakland. She has also volunteered on humanitarian projects with Rotary in Zimbabwe and Ghana.

An expert in healthcare administration, Shorr has over 40 years of healthcare consulting experience for hospitals across the country. He has also taught healthcare administration as an adjunct professor at Wayne State University in Detroit, the University of Southern California (USC) in Los Angeles, and George Washington University in Washington, D.C.

Of course, the District's increasingly diverse board of directors is also complemented by the District CEO, Dr. Bárzaga, who is uniquely equipped to strategically address the health and wellness needs of the entire Coachella Valley as the District continues on its path to make a difference.

City and government officials say they are confident the District will make a positive difference as it expands its strategic thinking, grant-giving and collaborative efforts across the Coachella Valley.

**“The District is one key way in which we recognize that we are all connected and that we’re all one community,” said Palm Desert Mayor Kathleen Kelly, adding, “The community is only as healthy as its weakest link. Health problems, transportation problems, public safety problems — none of those things respect city boundaries. The Coachella Valley is a single unit. I think we have to be committed to helping each other for the collective good.”**

## District and Foundation Grants

The Desert Healthcare District's grant program supports collaborative processes and invests in the services and programs of local nonprofits, health service providers, and public agencies that align with and advance the District's mission and vision. By addressing and building on key community health issues, the Desert Healthcare District hopes to connect and foster deeper collaboration between local agencies to better understand and mitigate the impact of social determinants of health in our community.

We respond to grant requests initiated by eligible organizations through our online application process. We occasionally use a Request for Proposal (RFP) process to target grants for programs and projects that best support the District's goals.

The Desert Healthcare District's Board-approved and established grant awards process is a two-stage process that begins with a Letter of Interest (LOI). Once the LOI has been submitted, staff, under the law (AB-2019), can provide technical assistance to the grantee.

## What types of grants are available?

**Mini Grants:** A mini-grant provides up to \$5,000 per one request in a fiscal year. A mini-grant is an opportunity to build the capacity of smaller health initiatives for organizations that may not have the capacity for larger programs or projects.

**Grants:** A grant provides an organization more than \$5,000 of support per request. Grants are intended for larger programs and initiatives, whose focus is to address one of the District's five strategic areas and improve District residents' health and wellness.

From January 1, 1999 to January 1, 2021, the District has awarded \$79,409,468 in total grants.

# BOARD MEMBERS



**Leticia De Lara, MPA**  
President

(January 2019–November 2024) Leticia De Lara brings extensive leadership experience and a deep understanding of how government works to the Board. She currently serves as the Chief Executive Officer of the Regional Access Project Foundation. Prior to joining RAP in 2014, she spent five years as the district director for Fourth District Riverside County Supervisor John J. Benoit. That followed almost 11 years as the chief of staff for Benoit's predecessor, Supervisor Roy Wilson. A lifelong Coachella Valley resident who's made public service a priority, Leticia has served as vice-chairwoman of the Continuum of Care Board of Governance, and board director with Clinicas de Salud del Pueblo, Lift to Rise and Riverside County First 5 Commission.



**Karen Borja**  
Vice-President & Secretary

(January 2019–November 2022) With more than 10 years of experience in nonprofit management and grassroots organizing, Karen Borja of Indio joined the Desert Healthcare District and Foundation Board in January 2019. She is a self-described "translator" between community needs and government who is adept at directing projects and managing staff, volunteers and board members. Borja's community leadership efforts range from organizer of the 2019 Coachella Valley's Women's March and co-manager of an election campaign, to board member with the Health Assessment and Research for Communities and member of the Women United of the Desert. She's currently employed as the Riverside County Community Affairs Director with Planned Parenthood of the Pacific Southwest.



**Arthur Shorr**  
Treasurer

(April 2019-November 2024) Arthur S. Shorr is president and founder of Arthur S. Shorr & Associates, Inc., Consultants to Health Care Providers; it's a management consulting firm specializing in providing operational consulting, business, and strategic planning services to healthcare providers. Mr. Shorr holds a Master of Business Administration degree in healthcare administration from the George Washington University, and a Bachelor of Science degree in accounting and economics from Brooklyn College, City University of New York. He is board-certified in healthcare administration, and a fellow of the American College of Healthcare Executives. Mr. Shorr has been active professionally in the healthcare field for over 40 years on a full-time basis.



**Carole Rogers, RN, MPH**  
Director

(2018- November 2022) A licensed registered nurse with over 45 years of healthcare experience, Carole Rogers previously served as a director and board chairwoman with the Eden Township Healthcare District (Castro Valley, CA). Her employment history includes the position of director of health financing systems for Seton Medical Center in Pacifica, and as executive director at Mercy Health Plan - Mercy Medical Center in San Diego, Contra Costa Health Providers in Walnut Creek, Diablo Valley IPA/PPO in Concord, and Contra Costa Health Plan in Martinez. She has applied her medical training and volunteer spirit in many capacities, including for Hurricane Katrina victims and as a Rotary team member on projects in Zimbabwe and Ghana.



**Les Zendle, MD**  
Director

(2016- November 2024) Dr. Zendle is a physician specializing in internal medicine and geriatrics. In 2010, he retired from Kaiser Permanente and joined Coachella Valley Volunteers in Medicine (CVVIM), a no-charge clinic in Indio offering primary medical and dental services to low-income residents without health insurance. At CVVIM, he served as a volunteer physician, board member and medical director. He changed his status from medical director to volunteer in January 2018, to focus his attention on the Desert Healthcare District and Foundation.





**Evett PerezGil**

Director

(2018- November 2022) A proud 40-year resident of Cathedral City, Evett PerezGil was employed as a community health worker for more than a year in the city's Dream Homes neighborhood. The experience provided her with the tools to uplift, inspire and advocate for residents. Through the Dream Homes Initiative, she also honed her philanthropy skills. In addition, PerezGil has been a long-term volunteer at the Boys and Girls Club of Cathedral City, supporting the indoor soccer league and other programs for participating youths. Helping and serving the undeserved are principles she strives to live by. Evett was often in attendance during the Desert Healthcare District's efforts to educate the public on expansion in 2018. She's committed to encouraging and supporting health and wellness issues that affect the diverse communities the District serves.



**Carmina Zavala, MA**

Director

(November 2020-November 2024) Elected from Zone 3 of the Desert Healthcare District — which includes parts of Cathedral City, Indian Wells, La Quinta, Palm Desert, Palm Springs and Rancho Mirage — Carmina Zavala brings invaluable experience as a mental health professional to the Board of Directors. She has worked with clinics across the Coachella Valley that serve residents of various ages with psychological distress and other challenges. She currently works with the chronically mentally ill at a Palm Springs outpatient clinic. And she is pursuing a doctoral degree in applied clinical psychology through The Chicago School of Professional Psychology. Zavala looks forward to channeling her efforts toward designing and implementing strategies to improve health services.

## Part One

<sup>1</sup> The early history of Palm Springs is documented on the website of the Agua Caliente Band of Cahuilla Indians at [www.aguacaliente.org](http://www.aguacaliente.org)

<sup>2</sup> Presley, Sally, *Facts and Legends: The Village of Palm Springs*, (1996), p.9.

<sup>3</sup> This verbiage is included in a Nov. 1, 1894 advertisement in the *Los Angeles Times*, one of many such advertisements promoting Palm Springs Hotel and Hot Springs.

<sup>4</sup> A German "pill box" is a reinforced concrete bunker used to house soldiers armed with machine guns, mortars and artillery. Pill boxes, which were widely used by the Germans in both world wars, often had two-foot thick concrete walls that were reinforced with steel rebar and cast iron armor.

<sup>5</sup> *The Desert Sun* documents Holderman's presentations in reports from January 21, 1944, "Report Much Progress in Hospital Plan"; February 2, 1945, "On This Side of the Sun"; and February 7, 1974, "Pioneer of Hospital Contemplates Past, Present."

<sup>6</sup> See "Palm Springs Seeks Hospital," *January 12, 1944, Los Angeles Times*, and "Hospital Association is Formed," *The Desert Sun*, March 10, 1944.

<sup>7</sup> Bohannon, Larry, *Palm Springs Golf: A History of Coachella Valley Legends & Fairways*, 2015), p. 77.

<sup>8</sup> Crider, Jeff, *The Story of the Coachella Valley: Making Every Drop Count Since 1918*, (2018), p. 49.

<sup>9</sup> "Around Town with Hildy Crawford," *The Desert Sun*, January 20, 1959.

<sup>10</sup> "Frank Sinatra Art Contest at Hospital to Encourage Youth," *Desert Sentinel*, May 4, 1972.

<sup>11</sup> Associated Press report, February 19, 1973.

<sup>12</sup> "Lawford Recovering," Associated Press report published in *The Decatur Daily Review* (Decatur, Illinois), March 6, 1961.

<sup>13</sup> "Sinatra Cancels Show," Associated Press report published in the *Herald and Review* (Decatur, Illinois), August 30, 1984.

<sup>14</sup> "Red Skelton Suffers Bronchitis," Associated Press report published in *The Decatur Daily Review* (Decatur, Illinois), January 7, 1970.

<sup>15</sup> "Elizabeth Taylor Released From Hospital," *Arizona Daily Star* (Tucson, Arizona), June 9, 1970.

<sup>16</sup> "Lana Turner in Hospital," *The Desert Sun*, July 6, 1965.

<sup>17</sup> "Barry Manilow Goes Home After Hospital Stay," Associated Press report published in *The Times-Mail* (Bedford, Indiana), February 4, 2004.

<sup>18</sup> "Bryant Hurt," United Press International report published in *The Hanford Sentinel* (Hanford, California), March 19, 1974.

<sup>19</sup> "Campanis OK After Strokes," *San Bernardino County Sun*, March 25, 1995.

<sup>20</sup> "Sonny A Dad Again," *Santa Cruz Sentinel*, February 5, 1991.

<sup>21</sup> "Bogert Release," *The Desert Sun*, February 23, 1983.

<sup>22</sup> "Restoration of El Mirador Eyed," *The Desert Sun*, March 11, 1987.

<sup>23</sup> "Chain Buys Hospital in Indio," *The Desert Sun*, June 12, 1979.

<sup>24</sup> "Job On The Line? Minden Vows Public Fight," *The Desert Sun*, October 6, 1983.

<sup>25</sup> "Imus, Klemp List Charges Against Minden," *The Desert Sun*, October 10, 1983.

<sup>26</sup> "Notice of Recall Readied; Donors Share Concern," *The Desert Sun*, October 12, 1983.

<sup>27</sup> "State's Brown Act Cited by Recall Group; Desert Hospital Board Majority in Alleged Violation," *The Desert Sun*, October 10, 1983.

<sup>28</sup> "Hospital Need for Secrecy Stressed," *The Desert Sun*, March 7, 1986.

<sup>29</sup> "Desert Hospital Going Private," *The Desert Sun*, June 28, 1986.

<sup>30</sup> For more background on Desert Hospital's corporate structure, see "Citizens Group to Spell Out Hospital Meeting Guidelines," *The Desert Sun*, June 4, 1988 and "Private Life Aids Hospital," *The Desert Sun*, July 25, 1989.

<sup>31</sup> "Privatization Would End Open Meetings," *The Desert Sun*, January 23, 1997.

<sup>32</sup> "Desert Hospital: Seeking a Safe Port," *The Desert Sun*, July 14, 1996

<sup>33</sup> "Grant of \$500,000 Given to Support Hospital's Regional Trauma Center," *Palm Desert Post*, December 26, 1996.

<sup>34</sup> "Blending High-Tech and Care," *The Desert Sun*, February 25, 1993.

<sup>35</sup> See: <https://www.publichealth.org/public-awareness/hiv-aids/origin-story/>.

<sup>36</sup> "Desert Hospital: Seeking a Safe Port," *The Desert Sun*, July 14, 1996.

<sup>37</sup> "Hospital Study Looks Justified," Editorial, *The Desert Sun*, December 21, 1996.

## Part Two

<sup>39</sup> The District's name change was facilitated by 1994 legislation sponsored by the Association of California Hospital Districts, SB 1169, which made it possible for hospital districts to change their names to "healthcare districts" to better reflect their efforts to provide services outside of acute hospital settings.

<sup>40</sup> The Desert Hospital Foundation was established in 1967 as a separate nonprofit organization that could engage in both fundraising and grant-giving activities.

<sup>41</sup> "Health-Care District Awards Funds," *The Desert Sun*, September 18, 1998.

<sup>42</sup> See the Appendix for more information about available District and Foundation grants.

<sup>43</sup> "Desert Healthcare District: Refining Its Mission to Improve Communities," *The Desert Sun*, June 13, 2004.

<sup>44</sup> District CEO Wayne Soucy also reorganized the District's staff to more effectively conduct the work of the organization and strengthened the review process for funding grant applications as well as the accountability expectations based on metrics and measurable objectives.

<sup>45</sup> Soucy said the District was essentially on the path to developing "results-based accountability," a concept that was embraced by the nonprofit sector after 2011. See Kania, John and Mark Kramer, "Collective Impact," *Stanford Social Innovation Review*, Winter 2011, pp. 36-41, for more discussion on this topic.

<sup>46</sup> See <https://www.thedailybeast.com/how-shanghai-saved-20000-jews-from-the-nazis>.

<sup>47</sup> The author had an opportunity to interview "Elena" at Shelter From The Storm's office in 2013.

<sup>48</sup> The USDA posted Ready, Set Swim as a success story on August 11, 2017, at <https://snaped.fns.usda.gov/success-stories/ready-set-swim>.

<sup>49</sup> <https://www.cde.ca.gov/ds/sd/sd/flfessp.asp>.

<sup>50</sup> <https://www.cde.ca.gov/ls/nu/rs/scales1920.asp>.

<sup>51</sup> "Doctor Overwhelmed by Desert Hot Springs Need," *The Desert Sun*, April 28, 2010.

<sup>52</sup> "New Wellness Center is a Dream Come True," *The Desert Sun*, January 12, 2013.

<sup>53</sup> Borrego Health's 2020 Community Needs Assessment, p. 21.

<sup>54</sup> "New Wellness Center is a Dream Come True," *The Desert Sun*, January 12, 2013.

<sup>55</sup> "Desert Healthcare District Distributes \$885,000 in Grants," *The Desert Sun*, January 24, 2015.

<sup>56</sup> "Palm Desert CSUSB Acquires Land," *The Desert Sun*, February 3, 2015.

<sup>57</sup> "Grants Help COD Boost Nursing Program," *The Desert Sun*, March 2, 2004.

<sup>58</sup> OneFuture Coachella Valley used to be CVEP's Workforce Excellence division. OneFuture, Coachella Valley was spun off as an independent organization in 2017. To maintain its focus on the connection between education and economic development for the region, OneFuture and CVEP share a common board member and assess areas of intersection and partnership annually.

<sup>59</sup> Measure J is a one percent sales tax initiative to maintain community services and revitalize downtown Palm Springs. It was approved by Palm Springs voters and took effect April 1, 2012.

<sup>60</sup> *The Desert Sun*, May 29, 2014.



**DESERT HEALTHCARE**  
DISTRICT & FOUNDATION

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