



**DESERT HEALTHCARE DISTRICT  
SPECIAL MEETING OF THE BOARD MEETING  
Board of Directors  
January 22, 2019  
5:30 P.M.**

Jerry Stergios Building, 2<sup>nd</sup> Floor  
Arthur H. "Red" Motley Boardroom  
1140 N. Indian Canyon Drive, Palm Springs, California 92262  
***This meeting is handicapped-accessible***

<b>Page(s)</b>	<b>AGENDA</b>	<b>Item Type</b>
	<i>Any item on the agenda may result in Board Action</i>	
	<b>A. CALL TO ORDER – President Wortham, DrPH</b> Roll Call ____ Director De Lara ____ Director Borja ____ Director PerezGil ____ Director Rogers ____ Director Matthews ____ Vice-President/Secretary Zendle, MD ____ President Wortham, DrPH	
	<b>B. PLEDGE OF ALLEGIANCE</b>	
	<b>C. APPROVAL OF AGENDA</b>	<b>Action</b>
	<b>D. PUBLIC COMMENT</b> At this time, comments from the audience may be made on items <u>not</u> listed on the agenda that are of public interest and within the subject-matter jurisdiction of the District. <b>The Board has a policy of limiting speakers to no more than three minutes.</b> The Board cannot take action on items not listed on the agenda. Public input may be offered on agenda items when they come up for discussion and/or action.	
	<b>E. CONSENT AGENDA</b> All Consent Agenda item(s) listed below are considered to be routine by the Board of Directors and will be enacted by one motion. <u>There will be no separate discussion of items unless a Board member so requests, in which event the item(s) will be considered following approval of the Consent Agenda.</u>	<b>Action</b>
<b>4-9</b>	<b>1. BOARD MINUTES</b> a. Special Meeting Study Session of the Board of Directors Meeting – December 18, 2018	
<b>10-17</b>	b. Special Meeting of the Board of Directors – December 18, 2018	



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**F. NEW PROVIDERS, FACILITIES, PROGRAMS, AND SERVICES AD HOC COMMITTEE –**

Chair/Treasurer Mark Matthews and Vice-President Les Zendle

- |              |   |             |
|--------------|---|-------------|
| <b>18-31</b> | 1. Phase 1 Seismic Results Presentation – Kevin S. Moore, Senior Principal, Simpson, Gumpertz & Heger (SGH) | Information |
|--------------|---|-------------|

**G. NEW BUSINESS**

- |           |  |               |
|-----------|--|---------------|
|           | 1. Consideration to engage Premier, Inc. to update the Market Analysis of March 14, 2017                                 | Discussion    |
|           | 2. Consideration to engage Premier, Inc. to prepare Financial Scenarios for Hospital Planning                            | Discussion    |
| <b>32</b> | 3. Letter of Support for Community Housing Opportunities Corporation (CHOC) for a proposed affordable housing initiative | <b>Action</b> |

**H. RESOURCES AND PHILANTHROPY**

- |              |   |             |
|--------------|---|-------------|
| <b>33-39</b> | 1. Existing Grants Progress and Final Reports | Information |
|--------------|---|-------------|

**I. DESERT HEALTHCARE DISTRICT CEO REPORT**

– Chris Christensen, Interim CEO

- |               |   |               |
|---------------|---|---------------|
| <b>40-43</b>  | 1. Priorities-Milestones-Progress Measures Update   | Information   |
| <b>44-48</b>  | 2. Rezoning Process and Timeline  | <b>Action</b> |
| <b>49-100</b> | 3. Local Agency Formation Commission (LAFCO) Annexation to the Eastern Coachella Valley - Certificate of Completion | Information   |

**J. DESERT REGIONAL MEDICAL CENTER CEO REPORT**

– Michele Finney, CEO

Information

**K. DESERT REGIONAL MEDICAL CENTER GOVERNING BOARD OF DIRECTORS' REPORT –**

Vice-President Les Zendle, MD and Director Carole Rogers, RN

Information



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|--|---|--|---|
| <b>L.</b>                              | <b>1. FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE</b> – Chair/Director Mark Matthews and President Jennifer Wortham, DrPH          |  |   |
|  | 1. Minutes of the December 11, 2018 Meeting<br>2. No January Meeting of the F&A Committee   |  | Information                                 |
| <b>101-103</b>                         |   |  |   |
|  | <b>2. HOSPITAL GOVERNANCE AND OVERSIGHT COMMITTEE</b> – Chair/Director Carole Rogers, RN and Vice-President Les Zendle, MD                      |  |   |
|  | 1. Minutes of the December 20, 2018 Meeting<br>2. Hospital Inspection Schedule<br>3. Dale E. Barnhart – Facilities Inspection Service Agreement |  | Information<br>Information<br><b>Action</b> |
| <b>104-106<br/>107-109<br/>110-113</b> |   |  |   |
|  | <b>3. BOARD AND STAFF COMMUNICATIONS AD HOC COMMITTEE</b> – President Wortham, DrPH   |  |   |
|  | 1. Timeline to commence workshops, trainings, and developments with Rauch Communications consultants  |  | Information                                 |
| <b>114-116</b>                         |   |  |   |
|  | <b>M. OLD BUSINESS</b>  |  |   |
|  | 1. Training dates for AB 1234 Ethics and AB 1825 Sexual Harassment  |  | <b>Action</b>                               |
| <b>117</b>                             |   |  |   |
|  | 2. CV Link – 4 <sup>th</sup> Quarter Progress Report  |  | Information                                 |
| <b>118-120</b>                         |   |  |   |
|  | <b>N. LEGAL COMMENTS &amp; REPORT</b>   |  |   |
| <b>121-122</b>                         |   |  |   |
|  | <b>O. APPOINTMENT OF COMMITTEES</b>   |  | <b>Action</b>                               |
|  | <b>P. INFORMATIONAL ITEMS</b>   |  |   |
|  | <b>Q. DIRECTORS' COMMENTS, REPORTS, &amp; STAFF DIRECTION AND GUIDANCE</b>  |  |   |
|  | <b>R. ADJOURNMENT</b>   |  |   |

*If you have any disability which would require accommodation to enable you to participate in this meeting, please email Andrea S. Hayles, Special Assistant to the CEO and Board Relations Officer, at [ahayles@dhcd.org](mailto:ahayles@dhcd.org) or call (760) 323-6110 at least 24 hours prior to the meeting.*



# DESERT HEALTHCARE DISTRICT

## DESERT HEALTHCARE DISTRICT

### SPECIAL MEETING STUDY SESSION OF THE BOARD

#### MEETING MINUTES

December 18, 2018

Directors Present	District Staff Present	Absent
President Zendle, MD Vice-President/Secretary Carole Rogers, RN Treasurer Mark Matthews Director Jennifer Wortham, DrPH Director Evett PerezGil	Chris Christensen, Interim CEO, CFO Lisa Houston, COO Donna Craig, Senior Program Officer Alejandro Espinoza, Program Officer and Outreach Director Will Dean, Communications and Marketing Director Meghan Kane, Community Health Analyst Vanessa Smith, Health Educator Andrea S. Hayles, Clerk of the Board  <u>Legal Counsel</u> Jeff Scott	

AGENDA ITEMS	DISCUSSION	ACTION
<b>A. Call to Order</b>	President Zendle called the meeting to order at 4:30 p.m.	
<b>Roll Call</b>	The Clerk of the Board called the roll with all Directors present.	
<b>B. Pledge of Allegiance</b>	President Zendle asked Alejandro Espinoza, Program Officer and Outreach Director to lead the Pledge of Allegiance.	
<b>C. Administer Oath of Office – New Directors</b>	Jeff Scott, Legal Counsel, administered the oath of office to Carole Rogers, RN, and Evett PerezGil – newly elected board members for the four-year term ending in 2022.	
<b>D. Approval of Agenda</b>	President Zendle asked for a motion to approve the agenda.  Director Matthews motioned to change the agenda to commence with Item J followed by the closed session.	<b>#19-31 MOTION WAS MADE by Director Matthews and seconded by Vice-President Rogers to approve the agenda change commencing with Item J followed by closed session. Motion passed unanimously. AYES – 5 President Zendle, Vice-President Rogers, Director</b>



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		<b>Matthews, Director Wortham, and Director PerezGil</b> <b>NOES – 0</b> <b>ABSENT – 0</b> <b>ABSTAIN – 0</b>
<b>E. Public Comment</b>	There was no public comment.	
<b>F. Adjournment to Closed Session</b>		
<b>G. Convene to Closed Session of the Desert Healthcare District Board of Directors</b>	PURSUANT TO GOVERNMENT CODE SECTION Public Employee Appointment pursuant to Government Code 54957 Title: Chief Executive Officer	
<b>H. Reconvene to Open Session of the Desert Healthcare District Board of Directors</b>		
<b>I. Report After Closed Session</b>	The Board in closed session directed legal counsel to take appropriate action concerning the matters discussed in closed session.	
<b>J. Study Session – Homelessness Initiative</b>  <b>1. Coachella Valley Collaborative to End Homelessness Update</b>	<p>Lisa Houston, COO, provided an overview and presentation of the Coachella Valley Collaborative to End Homelessness collective detailing the Homeless Emergency Aid Program (HEAP) potential funding and outlined the next steps with consultant Barbara Poppe including the collective impact.</p> <p>As an appointed member of Coachella Valley Association of Governments (CVAG) Homelessness Committee, Vice-President Rogers does not agree that consultant Barbara Poppe's contract should be extended. Diversion is satisfactory for a small amount, but some people experiencing homelessness require</p>	



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	<p>substance abuse and social services assistance. Vice-President Rogers read a portion of the public comment (attached) from Palm Springs Councilmember Christy Holstege and Sabby Jonathan, Mayor Palm Desert, and Chair, Coachella Valley Association of Governments (CVAG) Homelessness Committee. Further, Vice-President Rogers explained that the strategic action plan should reflect the community and the needs of the community. CVAG, Palm Desert, and Palm Springs all agree that shelters should be available in the west. It is not appropriate to apply for HEAP funding and compete with other agencies; thus, the board should move forward with the three positions outlined in the Coachella Valley Collaborative to End Homelessness.</p> <p>Director Matthews explained his agreement with Vice-President Rogers and the necessity to ensure all board members agree; however, it is important to address the core problems and he suggests tabling the matter to a future board meeting.</p> <p>Director Wortham agrees Vice-President Rogers and explained her role as the CVAG representative on the homelessness committee detailing that her comments resonate, and she agrees with her recommendations.</p> <p>President Zendle explained that if the board extends the contract,</p>	
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<p><b>Public Comments</b></p>	<p>Barbara Poppe will clarify the next steps and enlist the support of the cities and other agencies in the valley that could be supported by the collective.</p> <p>Tom Cox, Program Director, Coachella Valley Rescue Mission (CVRM), explained that he and Darla Burkett, Executive Director, are thankful for the District's work and involvement. CVRM manages shelter, they have expanded a low barrier Housing First and Rapid Rehousing approach and CVRM is trying to implement the impediments in a different manner. Mr. Cox explained that CVRM is a homeless access shelter with supportive services, not only meals, and requests more involvement in the District's shelter components.</p> <p>Christian Jelmborg, President/Founder, Street Life Outreach, detailed the agencies services as well as connecting the homeless to social services with shelter as the biggest deficiency. Mr. Jelmborg explained the agencies role with investments in infrastructure such as tiny home villages, and his agency has established a plan, but a collective is necessary with the appropriate collaborators.</p> <p>Scott Wolf, Development Director, Coachella Valley Rescue Mission (CVRM), explained that it is necessary to address the causes of homelessness such as the social services before moving forward with a Housing First approach.</p>	
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	<p>President Zendle supports the recommendations that create the infrastructure through a consultant and then allow the collective to determine the best method of housing.</p> <p>Director Wortham explained that the District's focus is on health and mental health and she would like to accelerate the staff components.</p> <p>Vice-President Rogers motioned to direct staff to present a budget at the January meeting for the Foundation to hire three collective staff members to facilitate the formation of a collective impact council and to not extend the Barbara Poppe and Associates Service Agreement</p>	
<p><b>2. Barbara Poppe and Associates Service Agreement</b></p>	<p>Staff was directed not to extend Barbara Poppe and Associates Service Agreement.</p>	<p><b>#19-32 MOTION WAS MADE by Vice-President Rogers and seconded by Director Wortham to direct staff to present a budget at the January 2019 meeting for the Foundation to hire three collective staff members to facilitate the formation of a collective impact council and to not extend the Barbara Poppe and Associates Service Agreement. Motion passed 3-2. AYES – 3 Vice-President Rogers, Director Wortham, and Director PerezGil NOES – President Zendle, Director Matthews ABSENT – 0 ABSTAIN – 0</b></p>
<p><b>3. Homelessness Initiative Collective Fund – City Matches - \$700,000</b></p>	<p>Lisa Houston, COO, detailed the Homelessness Collective fund and consideration of each of the nine Coachella Valley cities to match up to \$100,000.</p>	<p><b>#19-34 MOTION WAS MADE by Vice President Rogers and seconded by President Zendle to approve the \$700,000 in matching funds to each of the nine Coachella Valley cities. Motion passed unanimously. AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham and Director PerezGil NOES – 0 ABSENT – 0 ABSTAIN – 0</b></p>





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K. Adjournment	President Zendle adjourned the meeting at 5:30 p.m.	Audio recording available on the website at <a href="http://dhcd.org/Agenda-Board-of-Directors">http://dhcd.org/Agenda-Board-of-Directors</a>
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ATTEST: \_\_\_\_\_  
Carole Rogers, Vice-President/Secretary  
Desert Healthcare District Board of Directors

*Minutes respectfully submitted by Andrea S. Hayles, Clerk of the Board*

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**MEETING MINUTES**  
**December 18, 2018**

<b>Directors Present</b>	<b>District Staff Present</b>	<b>Absent</b>
President Zendle, MD Vice-President/Secretary Carole Rogers, RN Treasurer Mark Matthews Director Evett PerezGil Director Jennifer Wortham, DrPH	Chris Christensen, Interim CEO, CFO Lisa Houston, COO Donna Craig, Senior Program Officer Alejandro Espinoza, Program Officer and Outreach Director Will Dean, Communications and Marketing Director Vanessa Smith, Health Educator Andrea S. Hayles, Clerk of the Board  <u>Legal Counsel</u> Jeff Scott	

<b>AGENDA ITEMS</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<b>A. Call to Order</b>	President Zendle called the meeting to order at 6:00 p.m.	
<b>Roll Call</b>	The Clerk of the Board called the roll with all Directors present.	
<b>B. Election of Officers</b>	<p>Jeff Scott, Legal Counsel, opened the nominations for the election of officers to the Board describing the bylaws, process, and procedures also explaining that a second motion is not necessary.</p> <p>Director Matthews explained that this is a unique year with new director appointments in January and inquired if the election of officers could be postponed. After discussion, the board determined it is in the best interest to establish the officers at the present meeting.</p> <p>Jeff Scott, Legal Counsel, opened the nominations for Board President.</p> <p>President Zendle nominated Director Matthews; Vice-President Rogers nominated Director</p>	<p><b>#19-34 MOTION WAS MADE by President Zendle to appoint Director Wortham as President. Motion passed unanimously. AYES – 5 President Zendle, Vice-President Rogers, Director</b></p>



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	<p>Wortham; Director Matthews nominated Director Wortham; Director Wortham nominated herself; and Director PerezGil nominated Director Wortham. President Zendle moved to appoint Director Wortham.</p> <p>Jeff Scott, Legal Counsel, opened the nominations for Board Vice-President/Secretary.</p> <p>Director Wortham nominated President Zendle; Vice-President Rogers motioned for President Zendle as Vice-President/Secretary.</p> <p>Jeff Scott, Legal Counsel, opened the nominations for Board Treasurer.</p> <p>President Zendle nominated Director Matthews; Vice-President Rogers nominated Director Matthews; and Director Wortham nominated Director Matthews.</p>	<p><b>Matthews, Director Wortham, and Director PerezGil</b> <b>NOES – 0</b> <b>ABSENT – 0</b> <b>ABSTAIN – 0</b></p> <p><b>#19-35 MOTION WAS MADE by Vice-President Rogers and seconded by Director Matthews to appoint President Zendle as Vice-President.</b> <b>Motion passed unanimously.</b> <b>AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham, and Director PerezGil</b> <b>NOES – 0</b> <b>ABSENT – 0</b> <b>ABSTAIN – 0</b></p> <p><b>#19-36 MOTION WAS MADE by President Zendle and seconded by Director Wortham to appoint Director Matthews as Treasurer.</b> <b>Motion passed unanimously.</b> <b>AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham, and Director PerezGil</b> <b>NOES – 0</b> <b>ABSENT – 0</b> <b>ABSTAIN – 0</b></p>
<p><b>C. Appointment of Committees and Governing Board Representatives</b></p>	<p>President Zendle explained that as the new president, Director Wortham would dialogue with individual board members for appointment selections. Director Matthews suggested the input of all seven board members once the two new members are appointed.</p>	



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	Vice-President Rogers suggested inviting community members to the standing committees and expanding the Hospital Governance and Oversight Committee to include community members.	
<b>D. Approval of Agenda</b>	President Zendle asked for a motion to approve the agenda.	<b>#19-37 MOTION WAS MADE by Director Matthews and seconded by Vice-President Rogers to approve the agenda. Motion passed unanimously. AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham, and Director PerezGil NOES – 0 ABSENT – 0 ABSTAIN – 0</b>
<b>E. Public Comment</b>	Director Matthews acknowledged in attendance former Palm Springs Mayor Ron Oden.	
<b>F. Consent Agenda</b> <b>F.1. Board Minutes</b> <b>a. Board of Directors Meeting – November 27, 2018</b> <b>F.2. Finance and Administration</b> <b>a. Approval of October and November 2018 Financial Statements – F&amp;A Approved December 11, 2018</b>	President Zendle asked for a motion to approve the consent agenda.	<b>#19-38 MOTION WAS MADE by Director Matthews and seconded by Vice-President Rogers to approve the Consent Agenda. Motion passed unanimously. AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham, and Director PerezGil NOES – 0 ABSENT – 0 ABSTAIN – 0</b>
<b>G. Resources and Philanthropy</b>  <b>1. Existing Grants Progress and Final Reports</b>	Donna Craig, Senior Program Officer, provided an update on the existing grants, progress reports, and final reports of various grantees.	
<b>H. Desert Healthcare District CEO Report</b>	Chris Christensen, Interim CEO, explained that the most recent updated information of the	



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<p><b>1. Priorities-Milestones-Progress Measure Update</b></p> <p><b>2. Consideration of Approval of Letter of Intent to Lease for Satellite Office in the Expanded Area</b></p>	<p>Priorities-Milestones-Progress Measure is included in the packet.</p> <p>President Zendle explained that it is time to engage the county to meet with the District. Staff should contact Supervisor Perez to involve the health department with the work of the District due to past strained relations.</p> <p>Chris Christensen, Interim CEO, explained the expansion of the District with staff proposing a one-year lease for a satellite office at the Regional Access Project (RAP) Foundation in the expanded boundaries for a community presence.</p>	<p><b>#19-39 MOTION WAS MADE by Vice-President Rogers and seconded by Director Wortham to approve the letter of intent to lease a satellite office in the expanded boundaries.</b>  <b>Motion passed 4-1.</b>  <b>AYES – 4 President Zendle, Vice-President Rogers, Director Wortham, and Director PerezGil</b>  <b>NOES – Director Matthews</b>  <b>ABSENT – 0</b>  <b>ABSTAIN – 0</b></p>
<p><b>I. Desert Regional Medical Center CEO Report</b></p> <p><b>1. Desert Regional Medical Center</b></p>	<p>Michele Finney, CEO, Desert Regional Medical Center, explained new credentials with the Commission on Accreditation of Rehabilitation Facilities. The re-roofing of the helipad was delayed due to weather components and all work is now complete. One remaining work-in-progress is on the loading dock that is due for completion by the end of the year. The hospital lobby is being refurbished; a new status system is in the works in the operating rooms, and a new psychiatrist has been hired to begin their role in 2019.</p> <p>Chris Christensen, Interim CEO, detailed the minor changes of the</p>	<p><b>#19-40 MOTION WAS MADE by President Zendle and seconded by</b></p>



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<p><b>Governing Board Rules and Regulations</b></p>	<p>Governing Board Rules and Regulations.</p> <p>In section e.3. – Maximum Consecutive Service, Director Matthews pointed out that there is an incorrect reference to the Desert Hospital Corporation Board of Directors. Jeff Scott, Legal Counsel, will review with Desert Regional Medical Center making the appropriate change.</p>	<p><b>Director Matthews to approve Desert Regional Medical Center Governing Board Rules and Regulations</b>  <b>Motion passed unanimously.</b>  <b>AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham, and Director PerezGil</b>  <b>NOES – 0</b>  <b>ABSENT – 0</b>  <b>ABSTAIN – 0</b></p>
<p><b>J. Desert Regional Medical Center Governing Board of Directors Report</b></p>	<p>President Zendle explained that the Executive Chairman of Tenet Healthcare announced the new Chief Operating Officer. The board reviewed opened and closed California Department of Public Health cases and the increase in patient scores. Medical staff appointments were reviewed, and it was recommended that all physicians obtain flu vaccinations. The new governing board members were announced, and the prior chair was selected as emeritus.</p>	
<p><b>K.1. Finance, Administration, Real Estate, and Legal Committee</b></p> <p><b>1. Minutes of October 9, 2018 Meeting</b></p> <p><b>2. No November Meeting of the F&amp;A Committee</b></p> <p><b>3. LPMP Lease Extension – Suite 1E 204 – Desert Oasis Healthcare</b></p>	<p>Director Matthews explained the Minutes of October 9, 2018 and provided an overview of the LPMP lease extension</p>	<p><b>#19-41 MOTION WAS MADE by Director Matthews and seconded by Director Wortham to approve the LPMP Lease Extension – Suite 1E 204 – Desert Oasis Healthcare. Motion passed unanimously.</b>  <b>AYES – 5 President Zendle, Vice-President Rogers, Director</b></p>







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<b>Consultants, Inc. Service Agreement</b>	agreement with a scope of work for review and consideration of approval.	<b>the proposal for Rauch Communications Consultants, Inc. Motion passed unanimously. AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham, and Director PerezGil</b> <b>NOES – 0</b> <b>ABSENT – 0</b> <b>ABSTAIN – 0</b>
<b>L. New Business</b> <b>1. Resolution to Increase the Desert Healthcare District Board Members from Five (5) to Seven (7)</b>	Jeff Scott, Legal Counsel, described the resolution for an increase in the District board members from five to seven including eligibility. Counsel Scott also explained that after the new board members serve the two- or four-year terms, as the law is currently written, the two members could not run for re-election for another 2 years. Assemblymember Garcia would have to rewrite the legislation. State counsel is currently reviewing the matter for the potential change.	<b>#19-44 MOTION WAS MADE by Director Matthews and seconded by Vice-President Rogers to approve the resolution to increase the Desert Healthcare District Board Members from Five (5) to Seven (7). Motion passed unanimously. AYES – 5 President Zendle, Vice-President Rogers, Director Matthews, Director Wortham, and Director PerezGil</b> <b>NOES – 0</b> <b>ABSENT – 0</b> <b>ABSTAIN – 0</b>
<b>2. Appointment of Directors Process for January 15, 2019 Board Meeting</b>	Jeff Scott, Legal Counsel, explained the appointment process – an open meeting with a fair interview process.	
<b>M. Old Business</b> <b>1. Communications and Marketing Update</b>	Will Dean, Communications and Marketing Director, explained the initial board approval of the Communications and Marketing Plan and staff is now implementing and moving forward with the strategies that include rebranding and restructuring the website.	
<b>2. Nutrition Education Obesity Prevention Branch (NEOPB)</b>	Vanessa Smith, Health Educator, described that the Nutrition Education Obesity Prevention Branch (NEOPB) program is entering its third year, the most	





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	recent changes to the program, and invited the board to Two Bunch Palms Elementary School in January for the upcoming Sensory Pathway – a different approach to physical activity for students with disabilities.	
<b>N. Legal Comments &amp; Reports</b>	None	
<b>O. Informational Items</b>	President Zendle explained that he attended the California Hospital Association's Annual Behavioral Health Symposium that primarily focused on the way hospitals are managing emergency rooms and discharges and some homelessness discussions. Vice-President Rogers requested that the public comments are entered into the minutes for Councilmember Holstege, City of Palm Springs, and Mayor Jonathan, City of Palm Desert which is attached.	
<b>P. Directors' Comments, Reports, &amp; Staff Direction and Guidance</b>		
<b>Q. Adjournment</b>	President Zendle adjourned the meeting at 7:04 p.m.	<b>Audio recording available on the website at</b> <a href="http://dhcd.org/Agenda-Board-of-Directors">http://dhcd.org/Agenda-Board-of-Directors</a>

ATTEST: \_\_\_\_\_

Carole Rogers, Vice-President/Secretary  
Desert Healthcare District Board of Directors

*Minutes respectfully submitted by Andrea S. Hayles, Clerk of the Board*



Date: January 22, 2019

To: Board of Directors

Subject: ASCE 41-17 Seismic Report (Final) – Mr. Kevin Moore, Senior Principle, Simpson, Gumpertz & Heger presenting

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**Staff Recommendation:** Information and Discussion

**Background:**

- **Phase 0 (Preliminary High-Level Assessment)–** Simpson Gumpertz & Heger (SGH) reviewed documents and the hospital facility to perform high-level evaluations of buildings and brought to the Board a presentation of high level estimates of potential construction and design fees at the September 252, 2018 Board of Director's meeting.
  - Phase 0 resulted in an estimate of \$84M-\$141M.
- **ASCE 41-17 Report (Final)** – Following the Phase 0 report, SGH developed Phase 1, actionable structural and non-structural retrofit strategies with rough order of magnitude costs, scheduling, etc.
  - The range of estimated cost -- \$119M - \$180M.
  - An Executive Summary is included in the packet for your review.
  - A detailed ASCE 41-17 report will be published to the website.

**Fiscal Impact:**

Estimated \$119 - \$180M, should full seismic retrofit be performed.



15 January 2019  
(Revised 16 January 2019)

Mr. Chris Christensen  
Chief Financial Officer  
Desert Healthcare District  
1140 N. Indian Canyon Drive  
Palm Springs, CA 92262

Project 187112 – Seismic Evaluation and Seismic Compliance Planning Study, Desert Regional Medical Center, Phase 1, Palm Springs, CA

Re: Executive Summary

Dear Mr. Christensen:

The Desert Healthcare District (DHD) commissioned Simpson Gumpertz & Heger Inc. (SGH) to evaluate the Desert Regional Medical Center (DRMC) to gain a more detailed understanding of potential design and construction work associated with attaining compliance with the Alquist Hospital Seismic Safety Act (AHSSA, aka SB 1953). This executive summary is provided for the letter report completed under Phase 1 of the referenced project.

## 1. INTRODUCTION

### 1.1 Background

The Alquist Hospital Seismic Safety Act (AHSSA aka SB1953) was established in 1995 in response to unexpected poor seismic performance of hospitals during the 1994 Northridge earthquake. The AHSSA requires that all General Acute Care (GAC) hospital buildings comply with certain building code regulations by 1 January 2030. This requirement is intended to provide higher confidence that a building will retain a high level of functional recovery following a major earthquake. The 1995 California Building Code, Title 24 (CBC), with a few specific modifications, was designated the target building code regulations for attaining acceptable performance. Specific Structural Performance Category (SPC) and Nonstructural Performance Category (NPC) definitions primarily establish a common vocabulary for stakeholders, design professionals, contractors and the California Office of Statewide Health Planning and Development (OSHPD).

The original AHSSA regulations require buildings rated SPC 2 or NPC 2 comply with SPC 5 and NPC 4 by 1 January 2030. Because of the compliance timelines associated with the AHSSA, SPC 1 buildings and NPC 1 buildings are currently not a concern at many medical centers in California, including the DRMC, which does not have any SPC 1 or NPC 1 buildings. SPC 2 through SPC 4 and NPC 2 through NPC 4 are performance categories applicable to the DRMC. The introduction of DRMC compliance with AHSSA and related standards is described in the Phase 0 report, so it is not repeated here.

The DRMC comprises twenty independent buildings with approximately 550,000 sq ft of occupiable space. Seventeen of the twenty buildings were designed and constructed under a permit let by the California State Office of Statewide Health Planning and Development (OSHPD), which typically minimizes the need for seismic retrofit construction. However, these “compliant” buildings require engineering consulting to confirm compliance with nonstructural seismic performance regulations. Phase 0 results describe the existing status of the DRMC, general compliance with the AHSSA today and the defined scope of work, schedule and fee for our work in Phase 1.

## **1.2 Objectives**

Based on Phase 0 findings, SGH’s Phase 1 objective is to develop actionable structural retrofit strategies for three Structural Performance Category (SPC) 2 buildings, including the development of a rough order of magnitude cost for the related construction. Additionally, our Phase 1 work describes the scope of engineering work and estimated professional fees associated with developing nonstructural evaluation reports and construction documents to attain Nonstructural Category (NPC) 4 compliance for twenty buildings at the DRMC. Phase 1 also includes a cost model appropriate for estimating potential construction costs to bring twenty buildings into compliance with NPC 4 requirements.

## **1.3 Scope of Work**

To complete the Phase 1 objectives, SGH performed the following scopes of work:

1. Per the AHSSA, a structural analysis using the *Seismic Evaluation and Retrofit of Existing Buildings*, ASCE 41-17, Damage Control performance level. SGH used the linear elastic analysis method with United States Geological Survey (USGS) based seismic design factors for:
  - Main Hospital & Additions (Building 1)
  - East Tower (Building 2)
  - North Wing (Building 4)
2. Work with Swinerton Builders (Swinerton) to develop a conceptual cost estimate for seismic retrofit concepts based on evaluation results described in Item 1.
3. Identify and describe scopes of work and estimated fee for developing nonstructural evaluation reports and construction documents for buildings that are rated NPC 2, but require only fire sprinkler bracing to achieve NPC 4 (based on Phase 0 results).
4. Identify and describe scopes of work and estimated fee for developing nonstructural evaluation reports and construction documents for buildings that are rated NPC 2 and were designed between 1973 and 1983, with construction documents that show details of equipment/systems bracing and anchorage (based on Phase 0 results).
5. Identify and describe scopes of work and estimated fee for developing nonstructural evaluation reports and construction documents for buildings that are rated NPC 2 and designed before 1973 (based on Phase 0 results).

6. Work with Swinerton to develop a representative cost model and strategy for executing archetypical construction activities associated with the identified scopes of work for each building as described in the construction document scopes of work.
7. Develop presentation materials for DHD.
8. Develop written documents describing scope of work and estimated fees for consulting, OSHPD review and potential construction cost, including phasing and sequencing for scope of work described in Items 1-6.

## **2. STRUCTURAL ANALYSIS/EVALUATION (SPC 4D)**

SGH completed ASCE 41-17, Tier 2 Structural Seismic Evaluations for three buildings:

- Main Hospital & Additions (Building 1)
- East Tower (Building 2)
- North Wing (Building 4)

The linear elastic analysis method, using USGS based seismic design factors, was used to evaluate building performance for the following targets:

- “Damage Control” at BSE-1E Hazard Level (20% in 50 years)
- “Collapse Prevention” at BSE-2E Hazard Level (5% in 50 years)

We found that each building has structural deficiencies that prevent them from meeting the required objectives. We developed conceptual retrofits for these deficiencies and Swinerton Builders developed cost estimates for construction the retrofits.

### **2.1 Material Testing for SPC 4D Projects**

The California Building Code (CBC) and OSHPD will require a certain level of material testing for any structural retrofit project. Our Phase 1 SPC 4D evaluations are based on rudimentary material properties anticipated for structures constructed around the dates indicated on the referenced construction drawings. The following materials are representative of the materials that will eventually need to be tested to determine appropriate design values for use when designing the final SPC 4D retrofits:

- Concrete
- Steel Reinforcing
- Structural Steel
- Metal Deck
- Masonry

- Mortar
- Grout
- Plywood
- Lumber

Without a specific material testing plan, Swinerton estimated a cost allowance for construction costs associated with anticipated material testing. The cost is based on recent experience with similar projects completed in other locations in California. The estimated direct cost for material testing required for all three buildings is \$1,108,886 and the estimated cost, including normal extra contractor general conditions, general requirements, insurance and fees, 10% contingency and 20% escalation is \$1,822,633. All cost estimates are provided for reference in Appendix A.

## 2.2 Cost Estimates for SPC 4D

In our full report, we present retrofit scope to meet SPC 4D. Swinerton developed cost estimates for the retrofit scope. A summary of costs for SPC 4D retrofit is shown in Table 1.

**Table 1: Summary of Cost Estimates for SPC 4D Retrofit**

<b>Building</b>	<b>Direct Construction Cost</b>	<b>DCC + Costs &amp; Fees</b>	<b>DCC + Cost &amp; Fees + 10% Contingency + 20% Escalation</b>
Main Hospital	\$30,564,082	\$38,058,338	\$50,237,006
East Tower	\$20,690,965	\$25,764,351	\$34,008,944
North Wing	\$4,189,253	\$5,216,450	\$6,885,714
<i>Subtotal</i>	<i>\$55,444,300</i>	<i>\$69,039,139</i>	<i>\$91,131,664</i>
Materials Testing	\$1,108,886	\$1,380,783	\$1,822,633
<b>Total</b>	<b>\$56,553,186</b>	<b>\$70,419,922</b>	<b>\$92,954,297</b>

The cost estimates include three values for building specific work and an allowance for material testing (assumed to be 2% of the project construction cost). The three estimates are:

1. Direct construction cost.
2. Direct construction cost plus general conditions, general requirements, insurance, fee.
3. Direct construction cost plus general conditions, general requirements, insurance, fee and 10% contingency and 20% escalation (based on starting construction after 2024).

The cost estimate contains certain exclusions that may be required to complete the project.

## 3. NONSTRUCTURAL EVALUATION (NPC 4)

The AHSSA requires buildings rated NPC 2 be evaluated and modified (if required) to comply with NPC 4 before 1 January 2030. The first requirement is submission of a full nonstructural engineering evaluation for NPC 2 buildings to OSHPD for review and approval by 1 January 2024.

The nonstructural evaluation must also consider elements required to achieve NPC 5; a designation that identifies infrastructure that allows general acute care operational capability for 72 hours if electrical power, sanitary and potable water systems are nonfunctional following an earthquake. By 1 January 2026, the DRMC must submit a complete set of construction documents to bring all NPC 2 buildings into compliance with NPC 5. A building permit for all nonstructural retrofit projects must be received by 1 January 2028, with the construction work completed by 1 January 2030.

A licensed structural engineer must develop a full nonstructural evaluation report for each building based on its age, specific building information and regulatory requirements. Based on an assumed scope of work for each building, SGH and Swinerton developed a cost model that describes an estimated cost for the construction associated with nonstructural compliance for NPC 4. NPC 4 is a conservative estimate of compliance and represents a reasonable estimate prior to completing a nonstructural evaluation report for each building. The nonstructural evaluation report may also explore the applicability of NPC 4D; a level of nonstructural seismic performance category that intends to reduce the extent of nonstructural retrofit, effective 1 July 2019.

### **3.1 NPC 4 Retrofit Construction Cost Model**

The existing buildings comprise approximately 550,000 sq ft of occupiable space. Using an estimate of square feet area for each building and department, we apply an estimate of cost for construction associated with typical retrofit work needed to bring the building into compliance with NPC 4. Because the DRMC does not have any recent nonstructural evaluation reports that include evaluation of required infrastructure to attain NPC 5 considering operational characteristics, we estimate a placeholder range of \$1M to \$2M for constructing NPC 5 infrastructure, which typically comprises valving, and tanks for wastewater, water and fuel.

Our cost model reflects the uncertainty associated with costs developed without detailed nonstructural evaluation reports. To account for this uncertainty, Swinerton developed a cost model that considers a 10% contingency. The cost model also presents costs associated with the contractor's mark up and escalation (calculated at 20%, assuming construction starts after 2024). Direct costs are identified as "Low" and costs including mark-up, contingency and escalation are identified as "High" in Table 2.

**Table 2: NPC 4 Retrofit Construction Cost Model**

Building Name	Estimate of Affected Area	Consulting Fee Estimate	NPC 4 Cost Estimate (Low)	NPC 4 \$/SF Estimate (Low)	NPC 4 Cost Estimate (High)	NPC 4 \$/SF Estimate (High)
Main Hospital & Additions	95,913	\$770,000	\$7,013,131	\$74	\$9,257,332	\$98
East Tower	40,418	\$180,000	\$1,599,608	\$40	\$2,111,483	\$52
Woman & Infants Hospital	88,486	\$160,000	\$2,284,060	\$26	\$3,014,959	\$34
North Wing	18,790	\$86,000	\$777,342	\$41	\$1,026,092	\$55
Central Plant	15,159	\$100,000	\$1,102,969	\$73	\$1,455,919	\$96
Shipping/Receiving	15,742	\$50,000	\$642,274	\$41	\$847,801	\$54
Surgery Wing	105,266	\$750,000	\$6,657,195	\$63	\$8,787,497	\$83
West Tower (Sinatra Tower)	110,614	\$850,000	\$11,480,166	\$104	\$15,153,819	\$137
Lobby	6,214	\$20,000	\$154,020	\$25	\$203,307	\$33
Admitting	9,141	\$40,000	\$360,952	\$39	\$476,457	\$52
Elevator Tower	16,254	\$90,000	\$805,270	\$50	\$1,062,956	\$65
Dinah Shore Waiting Area	2,006	\$35,000	\$202,770	\$101	\$267,657	\$133
Medical Records Building	507	\$10,000	\$24,961	\$49	\$32,948	\$65
Public Spaces	22,881	\$15,000	\$1,518,001	\$66	\$2,003,761	\$88
<b>Total Medical Center</b>	<b>547,391</b>	<b>\$3,156,000</b>	<b>\$34,622,719</b>	<b>\$63</b>	<b>\$45,701,988</b>	<b>\$84</b>

At this stage of our evaluation, we recommend considering costs in the range of \$38 to \$49 million for bringing all buildings at the DRMC into compliance with NPC 4, including professional fees and construction of NPC 5 infrastructure.

#### 4. CONCLUSIONS

The DRMC requires seismic retrofit of three buildings and nonstructural retrofit for twenty buildings. Table 3 shows an approximate range of costs for structural retrofit, nonstructural retrofit and total medical center costs retrofit project costs. These costs represent a reasonable estimate of construction and consulting fees as estimated by Swinerton and SGH, given experience with similar projects of scope and size, completed in the last several years. We recommend that DHD consider the high end of the range, when estimating necessary budgets for completing construction work associated with the AHSSA. Currently, we estimate an appropriate budget range to bring the DRMC into compliance with the AHSSA is between \$119 and \$180M, which includes estimates of soft costs associated with professional fees, inspection, etc.



**Table 3: Structural Retrofit, Nonstructural Retrofit and Total Medical Center Costs**

<b>Building Name</b>	<b>Estimate of Affected Area</b>	<b>SPC4D + NPC 4 Cost Estimate (Low)</b>	<b>SPC4D + NPC 4 \$/SF (Low)</b>	<b>SPC4D + NPC 4 + 10% Contingency + 20 % Escalation Cost Estimate (High)</b>	<b>SPC4D + NPC 4 + 10% Contingency + 20 % Escalation \$/SF (High)</b>
Main Hospital & Additions	95,913	\$38,345,273	\$400	\$60,261,778	\$628
East Tower	40,418	\$22,470,573	\$556	\$36,300,427	\$898
Woman & Infants Hospital	88,486	\$2,444,060	\$26	\$3,174,959	\$34
North Wing	18,790	\$5,052,595	\$269	\$7,997,806	\$426
Central Plant	15,159	\$1,202,969	\$73	\$1,555,919	\$96
Shipping/Receiving	15,742	\$692,274	\$41	\$897,801	\$54
Surgery Wing	105,266	\$7,407,195	\$63	\$9,537,497	\$83
West Tower (Sinatra Tower)	110,614	\$12,330,166	\$104	\$16,003,819	\$137
Lobby	6,214	\$174,020	\$25	\$223,307	\$33
Admitting	9,141	\$400,952	\$39	\$516,457	\$52
Elevator Tower	16,254	\$895,270	\$50	\$1,152,956	\$65
Dinah Shore Waiting Area	2,006	\$237,770	\$101	\$302,657	\$133
Medical Records Building	507	\$35,000	\$50	\$43,000	\$66
Public Spaces	22,881	\$1,533,001	\$66	\$2,018,761	\$88
Material Testing		\$1,108,886		\$1,822,633	
NPC 5		\$1,000,000		\$2,000,000	
<b>Subtotal</b>		<b>\$95,330,004</b>		<b>\$143,809,777</b>	
<b>Soft Costs<sup>1</sup> (25% Subtotal)</b>		<b>\$23,832,501</b>		<b>\$35,952,444</b>	
<b>Total Including Soft Costs</b>	<b>547,391</b>	<b>\$119,162,505</b>	<b>\$217.69</b>	<b>\$179,762,221</b>	<b>\$328.40</b>

Footnote 1: Soft costs include those costs excluded by Swinerton and other project costs typical for this type of work:

- 1) Permit fees, plan check fees, design fees
- 2) Owner's consultants
- 3) Builder's risk
- 4) Utility costs
- 5) Payment or performance bond premiums
- 6) Testing and inspection
- 7) Hazardous material identification, abatement and testing
- 8) Security related to construction
- 9) Engineering related to soil
- 10) Construction engineering support for temporary works
- 11) Owner equipment
- 12) Correction of existing code deficiencies

Sincerely yours,

A handwritten signature in blue ink, appearing to be 'K. Moore'.

Kevin S. Moore, S.E.  
Senior Principal  
CA License No. 4528

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Encls.

# **APPENDIX A**



## Desert Regional Medical Center

Palm Springs California

Conceptual SPC 4 ROM Estimate

December 21, 2018

SUMMARY			
SPC 4D Areas of Work	Direct Cost	Cost w/ Contractor GCs, GRs, Insurance & Fee	Cost w/ 10% Contingency & 20% Escalation
<b>Main Hospital Retrofit Scheme</b>	\$ 30,564,082	\$ 38,058,338	\$ 50,237,006
<b>Building 2 - East Tower Retrofit Scheme</b>	\$ 20,690,965	\$ 25,764,351	\$ 34,008,944
<b>Building 4 - North Wing Retrofit Scheme</b>	\$ 4,189,253	\$ 5,216,450	\$ 6,885,714
<b>SPC Totals</b>	\$ 55,444,300	\$ 69,039,140	\$ 91,131,664
<b>Comprehensive Data Collection MTCAP: OSHPD Materials Testing and Conditions Assessment for Projects</b>			
<b>MTCAP Allowance</b>	\$ 1,108,886	\$ 1,380,783	\$ 1,822,633
<b>Project Totals</b>	\$ 56,553,186	\$ 70,419,922	\$ 92,954,297
<b>Qualifications</b> Exclusions 1. Permit fees, plan check fees, design fees, Builders Risk. 2. All utility costs. 3. Payment or performance bond premiums. 4. Testing and Inspection costs. 5. Hazardous material identification, abatement or testing. 6. Security guard service. 7. Owner's consultants. 8. Utility costs. 9. Soil, structural, mechanical, engineering. 10. Owner equipment. 11. Correction of existing code deficiencies.			



DETAIL BY LEVEL SUMMARY			
SPC 4D Areas of Work	Direct Cost	Cost w/ Contractor GCs, GRs, Insurance & Fee	Cost w/ 10% Contingency & 20% Escalation
<b>Main Hospital Retrofit Scheme</b>	\$ 30,564,082	\$ 38,058,338	\$ 50,237,006
Wing A Strengthening Plan	\$ 2,687,830	\$ 3,346,881	\$ 4,417,883
Wing B Strengthening Plan	\$ 615,566	\$ 766,502	\$ 1,011,782
Wing C Strengthening Plan	\$ 4,189,534	\$ 5,216,800	\$ 6,886,176
Wing D & E Strengthening Plan	\$ 6,030,562	\$ 7,509,244	\$ 9,912,203
Wing F Strengthening Plan	\$ 2,039,062	\$ 2,539,037	\$ 3,351,528
Wing G Strengthening Plan	\$ 692,512	\$ 862,314	\$ 1,138,255
Wing H Strengthening Plan	\$ 14,309,016	\$ 17,817,560	\$ 23,519,179
	Direct Cost	Cost w/ Contractor Costs	Cost w/ Escalation & Contin.
<b>Building 2 - East Tower Retrofit Scheme</b>	\$ 20,690,965	\$ 25,764,351	\$ 34,008,944
Basement	\$ 3,767,181	\$ 4,690,887	\$ 6,191,970
1st Floor	\$ 6,079,013	\$ 7,569,576	\$ 9,991,841
2nd Floor	\$ 6,711,761	\$ 8,357,472	\$ 11,031,863
3rd Floor	\$ 1,257,740	\$ 1,566,135	\$ 2,067,299
4th Floor	\$ 1,326,704	\$ 1,652,009	\$ 2,180,652
Roof	\$ 1,548,567	\$ 1,928,272	\$ 2,545,319
	Direct Cost	Cost w/ Contractor Costs	Cost w/ Escalation & Contin.
<b>Building 4 - North Wing Retrofit Scheme</b>	\$ 4,189,253	\$ 5,216,450	\$ 6,885,714
Exterior Wall	\$ 2,449,050	\$ 3,049,553	\$ 4,025,409
Main Level	\$ 63,165	\$ 78,653	\$ 103,821
Roof	\$ 1,677,038	\$ 2,088,245	\$ 2,756,484
<b>Project SPC 4D Totals</b>	\$ 55,444,300	\$ 69,039,140	\$ 91,131,664
<b>MTCAP - Assume 2% of Overall Cost</b>	\$ 1,108,886	\$ 1,380,783	\$ 1,822,633
Exclusions 1. Permit fees, plan check fees, design fees, Builders Risk. 2. All utility costs. 3. Payment or performance bond premiums. 4. Testing and Inspection costs. 5. Hazardous material identification, abatement or testing. 6. Security guard service. 7. Owner's consultants. 8. Utility costs. 9. Soil, structural, mechanical, engineering. 10. Owner equipment. 11. Correction of existing code deficiencies.			



Desert Regional Medical Center  
Palm Springs California  
Conceptual NPC 4 ROM Estimate  
January 11, 2019

CONFIDENTIAL SWINERTON DOCUMENT

DEPT	AREA (SQ. FT.)	Unit	Unit Cost w/ Contractor Costs					\$/w/ Contractor Mark-up	\$/SF	\$/w/Contingency	\$/SF	\$/w/Escalation	\$/SF
			Equipment Bracing	Utility Bracing	Fire Sprinkler Bracing	Ceiling Bracing	Wall Bracing						
<b>Building 1 - Main Hospital &amp; Additions</b>	<b>95,913 SF</b>	<b>74 \$/SF</b>						<b>\$ 7,013,131</b>	<b>74 \$/SF</b>	<b>\$ 7,714,444</b>	<b>82 \$/SF</b>	<b>\$ 9,257,332</b>	<b>98 \$/SF</b>
OUTPATIENT MATERNAL FETAL	5,173	\$ 43.18	\$ 5.78	\$ 6.80	\$ 27.20	\$ 3.40	\$ -	\$ 223,370	\$ 43	\$ 245,707	\$ 47	\$ 294,849	\$ 57
CARDIO PULMO	3,772	\$ 105.01	\$ 13.14	\$ 36.18	\$ 28.56	\$ 27.13	\$ -	\$ 396,081	\$ 105	\$ 435,689	\$ 116	\$ 522,827	\$ 139
DR. LOUNGE	1,133	\$ 42.16	\$ 5.44	\$ 10.88	\$ 18.36	\$ 7.48	\$ -	\$ 47,767	\$ 42	\$ 52,544	\$ 46	\$ 63,053	\$ 56
ACUTE REHAB	7,038	\$ 53.24	\$ 5.64	\$ 12.92	\$ 27.20	\$ 7.48	\$ -	\$ 374,731	\$ 53	\$ 412,204	\$ 59	\$ 494,645	\$ 70
BUSINESS SERVICES	4,380	\$ 77.68	\$ 7.62	\$ 23.80	\$ 25.70	\$ 20.56	\$ -	\$ 340,252	\$ 78	\$ 374,278	\$ 85	\$ 449,133	\$ 103
PHY THERAPY	4,936	\$ 105.96	\$ 7.90	\$ 34.27	\$ 38.08	\$ 25.70	\$ -	\$ 523,007	\$ 106	\$ 575,307	\$ 117	\$ 690,369	\$ 140
THERAPY	4,631	\$ 105.96	\$ 7.90	\$ 34.27	\$ 38.08	\$ 25.70	\$ -	\$ 490,690	\$ 106	\$ 539,759	\$ 117	\$ 647,710	\$ 140
POST PARTUM - BLDG 1	8,673	\$ 86.69	\$ 7.81	\$ 33.32	\$ 38.08	\$ 7.48	\$ -	\$ 751,831	\$ 87	\$ 827,014	\$ 95	\$ 992,417	\$ 114
MED SURGE - BLDG 1	4,705	\$ 105.96	\$ 7.90	\$ 34.27	\$ 38.08	\$ 25.70	\$ -	\$ 498,531	\$ 106	\$ 548,384	\$ 117	\$ 658,060	\$ 140
PEDIATRICS	4,180	\$ 105.96	\$ 7.90	\$ 34.27	\$ 38.08	\$ 25.70	\$ -	\$ 442,903	\$ 106	\$ 487,193	\$ 117	\$ 584,632	\$ 140
GI - ENDO	1,669	\$ 76.16	\$ 6.12	\$ 24.48	\$ 27.20	\$ 18.36	\$ -	\$ 127,111	\$ 76	\$ 139,822	\$ 84	\$ 167,787	\$ 101
BUSINESS SERVICES - MED RECORDS	7,430	\$ 65.96	\$ 6.53	\$ 20.40	\$ 22.03	\$ 17.00	\$ -	\$ 490,083	\$ 66	\$ 539,091	\$ 73	\$ 646,909	\$ 87
FACILITIES - ENG	3,565	\$ 61.58	\$ 6.53	\$ 18.70	\$ 20.20	\$ 16.16	\$ -	\$ 219,536	\$ 62	\$ 241,489	\$ 68	\$ 289,787	\$ 81
ADMINISTRATION	11,665	\$ 53.04	\$ 2.99	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 618,712	\$ 53	\$ 680,583	\$ 58	\$ 816,699	\$ 70
NON-PATIENT CARE	9,400	\$ 54.81	\$ 4.76	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 515,195	\$ 55	\$ 566,715	\$ 60	\$ 680,058	\$ 72
MECH/ELEC	3,422	\$ 40.80	\$ 24.48	\$ 16.32	\$ -	\$ -	\$ -	\$ 139,618	\$ 41	\$ 153,579	\$ 45	\$ 184,295	\$ 54
PUBLIC CORRIDOR	10,141	\$ 80.24	\$ -	\$ 25.16	\$ 27.20	\$ 7.48	\$ 20.40	\$ 813,714	\$ 80	\$ 895,085	\$ 88	\$ 1,074,102	\$ 106
<b>Building 2 - East Tower</b>	<b>40,418 SF</b>	<b>40 \$/SF</b>						<b>\$ 1,599,608</b>	<b>40 \$/SF</b>	<b>\$ 1,759,569</b>	<b>44 \$/SF</b>	<b>\$ 2,111,483</b>	<b>52 \$/SF</b>
LAB	5,975	\$ 50.02	\$ 13.30	\$ 29.92	\$ -	\$ 6.80	\$ -	\$ 298,871	\$ 50	\$ 328,758	\$ 55	\$ 394,509	\$ 66
ORTHO	9,733	\$ 33.32	\$ 5.44	\$ 17.00	\$ -	\$ 3.40	\$ 7.48	\$ 324,304	\$ 33	\$ 356,734	\$ 37	\$ 428,081	\$ 44
MED SURGE - BLDG 2 - FLR 3	10,170	\$ 33.52	\$ 5.64	\$ 24.48	\$ -	\$ 3.40	\$ -	\$ 340,939	\$ 34	\$ 375,033	\$ 37	\$ 450,040	\$ 44
SNF - BLDG 2	10,170	\$ 55.96	\$ 5.64	\$ 24.48	\$ -	\$ 18.36	\$ 7.48	\$ 569,154	\$ 56	\$ 626,069	\$ 62	\$ 751,283	\$ 74
STAIRCASES	3,360	\$ 7.48	\$ -	\$ 7.48	\$ -	\$ -	\$ -	\$ 25,133	\$ 7	\$ 27,646	\$ 8	\$ 33,175	\$ 10
MECH PENTHOUSE	1,010	\$ 40.80	\$ 20.40	\$ 20.40	\$ -	\$ -	\$ -	\$ 41,208	\$ 41	\$ 45,329	\$ 45	\$ 54,395	\$ 54
<b>Building 3 - Woman &amp; Infants Hospital</b>	<b>88,486 SF</b>	<b>26 \$/SF</b>						<b>\$ 2,284,060</b>	<b>26 \$/SF</b>	<b>\$ 2,512,466</b>	<b>28 \$/SF</b>	<b>\$ 3,014,959</b>	<b>34 \$/SF</b>
IDRP	18,051	\$ 32.64	\$ -	\$ -	\$ 32.64	\$ -	\$ -	\$ 589,185	\$ 33	\$ 648,103	\$ 36	\$ 777,724	\$ 43
NICU	8,148	\$ 32.64	\$ -	\$ -	\$ 32.64	\$ -	\$ -	\$ 265,951	\$ 33	\$ 292,546	\$ 36	\$ 351,055	\$ 43
POST PARTUM - BLDG 3	3,421	\$ 32.64	\$ -	\$ -	\$ 32.64	\$ -	\$ -	\$ 111,661	\$ 33	\$ 122,828	\$ 36	\$ 147,393	\$ 43
EMERGENCY DEPT.	12,801	\$ 29.79	\$ -	\$ -	\$ 29.79	\$ -	\$ -	\$ 381,352	\$ 30	\$ 419,487	\$ 33	\$ 503,385	\$ 39
RADIOLOGY	25,328	\$ 20.40	\$ -	\$ -	\$ 20.40	\$ -	\$ -	\$ 516,691	\$ 20	\$ 568,360	\$ 22	\$ 682,032	\$ 27
PUBLIC SPACE	1,120	\$ 28.56	\$ -	\$ -	\$ 28.56	\$ -	\$ -	\$ 31,987	\$ 29	\$ 35,186	\$ 31	\$ 42,223	\$ 38
HELIPAD	10,126	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
MECH PENTHOUSE - BLDG 3	9,491	\$ 40.80	\$ 20.40	\$ 20.40	\$ -	\$ -	\$ -	\$ 387,233	\$ 41	\$ 425,956	\$ 45	\$ 511,147	\$ 54
<b>Building 4 - North Wing</b>	<b>18,790 SF</b>	<b>41 \$/SF</b>						<b>\$ 777,342</b>	<b>41 \$/SF</b>	<b>\$ 855,077</b>	<b>46 \$/SF</b>	<b>\$ 1,026,092</b>	<b>55 \$/SF</b>
ADMINISTRATION OFFICES (Basement)	9,395	\$ 40.80	\$ 5.44	\$ 12.92	\$ 20.40	\$ 2.04	\$ -	\$ 383,316	\$ 41	\$ 421,648	\$ 45	\$ 505,977	\$ 54
NON-PATIENT CARE (First Floor)	9,395	\$ 41.94	\$ 5.44	\$ 12.92	\$ 19.04	\$ 2.04	\$ 2.50	\$ 394,026	\$ 42	\$ 433,429	\$ 46	\$ 520,115	\$ 55
<b>Building 5 - Central Plant</b>	<b>15,159 SF</b>	<b>73 \$/SF</b>						<b>\$ 1,102,969</b>	<b>73 \$/SF</b>	<b>\$ 1,213,266</b>	<b>80 \$/SF</b>	<b>\$ 1,455,919</b>	<b>96 \$/SF</b>
CENTRAL PLANT	15,159	\$ 72.76	\$ 20.40	\$ 27.20	\$ 24.48	\$ 0.68	\$ -	\$ 1,102,969	\$ 73	\$ 1,213,266	\$ 80	\$ 1,455,919	\$ 96
<b>Building 6 - Shipping/Receiving</b>	<b>15,742 SF</b>	<b>41 \$/SF</b>						<b>\$ 642,274</b>	<b>41 \$/SF</b>	<b>\$ 706,501</b>	<b>45 \$/SF</b>	<b>\$ 847,801</b>	<b>54 \$/SF</b>
EXTERIOR LOADING DOCK	15,742	\$ 40.80	\$ 5.44	\$ 17.00	\$ 18.36	\$ -	\$ -	\$ 642,274		\$ 706,501		\$ 847,801	



Desert Regional Medical Center  
Palm Springs California  
Conceptual NPC 4 ROM Estimate  
January 11, 2019

CONFIDENTIAL SWINERTON DOCUMENT

DEPT	AREA (SQ. FT.)	Unit	Unit Cost w/ Contractor Costs					\$/w/ Contractor Mark-up	\$/SF	\$/w/Contingency	\$/SF	\$/w/Escalation	\$/SF
			Equipment Bracing	Utility Bracing	Fire Sprinkler Bracing	Ceiling Bracing	Wall Bracing						
<b>Building 7 - Surgery Wing</b>	<b>105,266 SF</b>	<b>63 \$/SF</b>						<b>\$ 6,657,195</b>	<b>63 \$/SF</b>	<b>\$ 7,322,914</b>	<b>70 \$/SF</b>	<b>\$ 8,787,497</b>	<b>83 \$/SF</b>
KITCHEN	9,606	\$ 55.49	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 533,018	\$ 55	\$ 586,320	\$ 61	\$ 703,583	\$ 73
SPD	4,569	\$ 62.97	\$ 8.84	\$ 20.40	\$ 19.04	\$ 14.69	\$ -	\$ 287,701	\$ 63	\$ 316,471	\$ 69	\$ 379,765	\$ 83
CENTRAL SUPPLY	3,044	\$ 55.49	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 168,905	\$ 55	\$ 185,796	\$ 61	\$ 222,955	\$ 73
SHIPPING/REC	2,314	\$ 55.49	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 128,399	\$ 55	\$ 141,239	\$ 61	\$ 169,487	\$ 73
PHARMACY	4,331	\$ 80.44	\$ 24.34	\$ 20.40	\$ 20.40	\$ 15.30	\$ -	\$ 348,387	\$ 80	\$ 383,225	\$ 88	\$ 459,870	\$ 106
I/T	2,994	\$ 55.49	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 166,131	\$ 55	\$ 182,744	\$ 61	\$ 219,293	\$ 73
ADMIN SERVICES	2,971	\$ 55.49	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 164,855	\$ 55	\$ 181,340	\$ 61	\$ 217,608	\$ 73
ADMINISTRATIVE OFFICES	9,331	\$ 55.49	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 517,759	\$ 55	\$ 569,534	\$ 61	\$ 683,441	\$ 73
CAFETERIA	6,810	\$ 55.49	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ -	\$ 377,873	\$ 55	\$ 415,661	\$ 61	\$ 498,793	\$ 73
OUTPATIENT SERVICES	1,067	\$ 80.44	\$ 24.34	\$ 20.40	\$ 20.40	\$ 15.30	\$ -	\$ 85,830	\$ 80	\$ 94,413	\$ 88	\$ 113,295	\$ 106
SURGICAL/OR	23,624	\$ 101.59	\$ 11.56	\$ 35.90	\$ 27.20	\$ 26.93	\$ 112	\$ 2,399,920	\$ 102	\$ 2,639,912	\$ 112	\$ 3,167,894	\$ 134
CATH LAB	6,344	\$ 75.00	\$ 9.38	\$ 25.84	\$ 20.40	\$ 19.38	\$ -	\$ 475,825	\$ 75	\$ 523,408	\$ 83	\$ 628,089	\$ 99
MECH PENTHOUSE	13,061	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
PUBLIC CORRIDOR	15,200	\$ 65.96	\$ -	\$ 25.16	\$ 27.20	\$ 6.12	\$ 7.48	\$ 1,002,592	\$ 66	\$ 1,102,851	\$ 73	\$ 1,323,421	\$ 87
<b>Building 8 - West Tower (Sinatra Tower)</b>	<b>110,614 SF</b>	<b>104 \$/SF</b>						<b>\$ 11,480,166</b>	<b>104 \$/SF</b>	<b>\$ 12,628,182</b>	<b>114 \$/SF</b>	<b>\$ 15,153,819</b>	<b>137 \$/SF</b>
MECH/ELEC	7,780	\$ 79.95	\$ 22.72	\$ 24.48	\$ 16.32	\$ 2.72	\$ 13.71	\$ 621,983	\$ 80	\$ 684,181	\$ 88	\$ 821,017	\$ 106
ICU	18,934	\$ 129.71	\$ 16.63	\$ 37.40	\$ 32.30	\$ 22.44	\$ 20.94	\$ 2,455,915	\$ 130	\$ 2,701,506	\$ 143	\$ 3,241,808	\$ 171
MED SURGE - BLDG 8 - FLR 2	18,934	\$ 107.15	\$ 7.06	\$ 30.60	\$ 34.00	\$ 18.36	\$ 17.14	\$ 2,028,797	\$ 107	\$ 2,231,677	\$ 118	\$ 2,678,012	\$ 141
MED SURGE - BLDG 8 - FLR 3	18,934	\$ 107.15	\$ 7.06	\$ 30.60	\$ 34.00	\$ 18.36	\$ 17.14	\$ 2,028,797	\$ 107	\$ 2,231,677	\$ 118	\$ 2,678,012	\$ 141
MED SURGE - BLDG 8 - FLR 4	18,934	\$ 107.15	\$ 7.06	\$ 30.60	\$ 34.00	\$ 18.36	\$ 17.14	\$ 2,028,797	\$ 107	\$ 2,231,677	\$ 118	\$ 2,678,012	\$ 141
MED SURGE - BLDG 8 - FLR 5	18,934	\$ 105.74	\$ 5.64	\$ 30.60	\$ 34.00	\$ 18.36	\$ 17.14	\$ 2,002,081	\$ 106	\$ 2,202,289	\$ 116	\$ 2,642,747	\$ 140
PENTHOUSE	1,135	\$ 23.80	\$ 3.40	\$ 20.40	\$ -	\$ -	\$ -	\$ 27,013	\$ 24	\$ 29,714	\$ 26	\$ 35,657	\$ 31
MECH PENTHOUSE - BLDG 8	7,029	\$ 40.80	\$ 20.40	\$ 20.40	\$ -	\$ -	\$ -	\$ 286,783	\$ 41	\$ 315,462	\$ 45	\$ 378,554	\$ 54
<b>Building 9 - Lobby</b>	<b>6,214 SF</b>	<b>25 \$/SF</b>						<b>\$ 154,020</b>	<b>25 \$/SF</b>	<b>\$ 169,422</b>	<b>27 \$/SF</b>	<b>\$ 203,307</b>	<b>33 \$/SF</b>
MAIN ENTRANCE/LOBBY	6,214	\$ 24.79	\$ -	\$ -	\$ 24.79	\$ -	\$ -	\$ 154,020	\$ 25	\$ 169,422	\$ 27	\$ 203,307	\$ 33
<b>Building 10 - Admitting</b>	<b>9,141 SF</b>	<b>39 \$/SF</b>						<b>\$ 360,952</b>	<b>39 \$/SF</b>	<b>\$ 397,047</b>	<b>43 \$/SF</b>	<b>\$ 476,457</b>	<b>52 \$/SF</b>
LOBBY/REGISTRATION	6,306	\$ 22.95	\$ -	\$ -	\$ 22.95	\$ -	\$ -	\$ 144,723	\$ 23	\$ 159,195	\$ 25	\$ 191,034	\$ 30
MORGUE	965	\$ 80.44	\$ 24.34	\$ 20.40	\$ 20.40	\$ 15.30	\$ -	\$ 77,625	\$ 80	\$ 85,387	\$ 88	\$ 102,465	\$ 106
MORGUE - OFFICE SPACE	1,870	\$ 74.12	\$ 16.32	\$ 20.40	\$ 20.40	\$ 17.00	\$ -	\$ 138,604	\$ 74	\$ 152,465	\$ 82	\$ 182,958	\$ 98
<b>Building 11 - Elevator Tower</b>	<b>16,254 SF</b>	<b>50 \$/SF</b>						<b>\$ 805,270</b>	<b>50 \$/SF</b>	<b>\$ 885,797</b>	<b>54 \$/SF</b>	<b>\$ 1,062,956</b>	<b>65 \$/SF</b>
ELEVATOR CORRIDOR SPACE	13,932	\$ 51.00	\$ -	\$ 20.40	\$ 28.56	\$ 2.04	\$ -	\$ 710,532	\$ 51	\$ 781,585	\$ 56	\$ 937,902	\$ 67
MECH PENTHOUSE	2,322	\$ 40.80	\$ 20.40	\$ 20.40	\$ -	\$ -	\$ -	\$ 94,738	\$ 41	\$ 104,211	\$ 45	\$ 125,054	\$ 54
<b>Building 12 - Dinah Shore Waiting Area</b>	<b>2,006 SF</b>	<b>101 \$/SF</b>						<b>\$ 202,770</b>	<b>101 \$/SF</b>	<b>\$ 223,048</b>	<b>111 \$/SF</b>	<b>\$ 267,657</b>	<b>133 \$/SF</b>
WAITING ROOM	2,006	\$ 101.08	\$ 8.16	\$ 25.50	\$ 27.54	\$ 22.03	\$ 17.85	\$ 202,770	\$ 101	\$ 223,048	\$ 111	\$ 267,657	\$ 133
<b>Building 13 - Medical Records</b>	<b>507 SF</b>	<b>49 \$/SF</b>						<b>\$ 24,961</b>	<b>49 \$/SF</b>	<b>\$ 27,457</b>	<b>54 \$/SF</b>	<b>\$ 32,948</b>	<b>65 \$/SF</b>
MEDICAL RECORDS ROOM	507	\$ 49.23	\$ 5.44	\$ 5.44	\$ 16.32	\$ 22.03	\$ -	\$ 24,961	\$ 49	\$ 27,457	\$ 54	\$ 32,948	\$ 65
<b>Public Spaces</b>	<b>22,881 SF</b>	<b>66 \$/SF</b>						<b>\$ 1,518,001</b>	<b>66 \$/SF</b>	<b>\$ 1,669,801</b>	<b>73 \$/SF</b>	<b>\$ 2,003,761</b>	<b>88 \$/SF</b>
PUBLIC SPACE	3,863	\$ 61.20	\$ -	\$ 25.16	\$ 27.20	\$ 8.84	\$ -	\$ 236,416	\$ 61	\$ 260,057	\$ 67	\$ 312,069	\$ 81
FACILITIES - ENG	19,018	\$ 67.39	\$ 5.44	\$ 17.00	\$ 18.36	\$ 14.69	\$ 11.90	\$ 1,281,585	\$ 67	\$ 1,409,743	\$ 74	\$ 1,691,692	\$ 89
<b>Total</b>	<b>547,391 SF</b>							<b>\$ 34,622,717</b>	<b>\$ 63</b>	<b>\$ 38,084,989</b>	<b>\$ 70</b>	<b>\$ 45,701,987</b>	<b>\$ 84</b>



January 17, 2019

Sydney Weisman  
Public Relations Council  
Palm Springs, CA

Re: Community Housing Opportunities Corporation

Dear Ms. Weisman,

Desert Healthcare District fully supports the development of low and affordable housing in the Coachella Valley.

Data has shown that there is a significant shortfall/or access to low and affordable housing in the Coachella Valley. A significant percentage of our population is faced with rental burden. This lack of housing affects the health and wellness of our residents. It also plays a key role in the challenges we face with breaking the cycle of homelessness as Housing First is the proven method.

Sincerely,

D. Chris Christensen, CPA  
Interim Chief Executive Officer



## RESOURCES AND PHILANTHROPY

**Information only – status update of new and existing grants since last Board report of December 18, 2018**

Final Grant Reports:		
Grantee	Staff Notes	5 things to be done differently
<b>Well in the Desert #934</b> – <i>New Vans for Client Transportation, Pickups, Deliveries and More</i>	<b>Grant term: 8/1/17 – 9/30/18</b> <b>Original Approved Amount: \$ 84,798</b> Achieved the intent of the grant: Purchase two vans; coverage of extended warranties; gas purchase for one year; insurance coverage for one year.	<b>1.</b> “I [Arlene Rosenthal] would probably ask for gas and insurance for two years.”
<b>One Future Coachella Valley #968</b> – <i>Health Career Connection Summer Intern for DHCD</i>	<b>Grant term: 6/1/18 – 10/31/18</b> <b>Original Approved Amount: \$7,314</b> Achieved the deliverables as stated in the grant application. Desert Healthcare District interviewed intern candidates and selected Kayla Bentley to fill the DHCD HCC intern position. Kayla completed the project deliverables specified for her DHCD project. Specifically, she researched and produced a spreadsheet detailing all of the behavioral health resources available across the three K-12 districts. She also helped update a spreadsheet of Coachella Valley-based behavioral health providers and the specific jobs they employ. She supported the high school faculty team developing the Mindfully Resilient curriculum resource and participated in	This project went very well.

	all of the Health Career Connection leadership workshops.	
<b>Progress Reports</b>		
<b>Applicant</b>	<b>Staff Notes</b>	<b>Status</b>
<b>The LGBT Community Center of the Desert #866</b> <i>Low-Cost Mental Health Counseling Clinic</i>	<p><b>Grant term: 7/1/15 - 10/31/18</b>  <b>Original Approved Amount: \$140,000</b>  Seventh four-month progress report, covering the time period from July 1, 2018 through October 31, 2018.</p> <p>The program is on track. At this point [we] have successfully completed all grant goals and will begin the HARC three-year evaluation in the next month.</p>	<p><b>Progress this period:</b></p> <ul style="list-style-type: none"> <li>Using DHCD funds as a fundraising challenge, The Center was able to secure a consistent income stream with the Ocotillo Club, with donor members committing to a monthly pledge over a year period. In addition, the county PEI grant program, CBT for Late Life Depression, was renewed, which is a substantial revenue stream for the clinic. Also, the organization provider certification was completed with RCDMH and the clinic is now a "specialty clinic" able to serve and get reimbursed for Medi-Cal clients.</li> <li>Total individual clients seen from July 1, 2018-October 31, 2018 were 411, with 60 new clients seen during that time period. We delivered a total of 886 individual therapy sessions. In addition, our bereavement therapy group provided 48 client contacts (#clients X #sessions) and our LTS Group (HIV+&amp;Aging) provided 56</li> </ul>

		<p>client contacts (#clients X #sessions) during this time period. The intern training met for two hours weekly from July 1 - October 31, 2018 for a total of 36 hours (18 Wednesdays x 2), documented with sign-in sheets.</p>
<p><b>Coachella Valley Rescue Mission #954:</b>  <i>Emergency Food, Shelter with Wrap - Around Services for West Coachella Valley Homeless</i></p>	<p><b>Grant term: 12/1/17 – 11/30/18</b>  <b>Original Approved Amount: \$100,000</b>            Second six-month progress report, covering the time period from 6/1/18 – 11/30/18.</p> <p>The program is on track.</p>	<p><b>Progress this period:</b>            The average number of clients sheltered is over 200 each evening. During the reporting period of 6/1/18-11/30/18, CVRM provided emergency shelter to 1,253 individuals including 280 people from the original District cities prior to expansion. All services are provided free of charge. Additionally, the following was provided to the District homeless not sheltering with us:</p> <ul style="list-style-type: none"> <li>a. Over 100 showers daily</li> <li>b. An average of 75 sets of clothing daily</li> <li>c. 25-75 case management interactions daily.</li> </ul>
<p><b>SafeHouse of the Desert #927:</b> <i>What's Up Mobile App</i></p>	<p><b>Grant term: 1/1/17 – 12/31/19</b>  <b>Original Approved Amount: \$679,357 (over 3 years)</b>            Fourth progress report, covering the time period from 7/1/18 – 12/31/18.</p> <p>The program is on track: “We are continuing to infiltrate the schools through class presentations, lunch booths and participation in school events such as</p>	<p><b>Progress this period:</b>  <b>OUTREACH:</b>            During July- September, we reached 2,192 youth through community and school presentations. During October-December, we reached 1,354 youth. An additional 2,350 youth were reached through marketing materials in the schools and community – adding to a grand total of 5,896 youth reached in this reporting period.</p>

	seasonal/educational fairs, registration days and back to school nights.”	<p>In an attempt to reach youth indirectly, we also outreached to parents and other adults in the district boundaries. During this reporting period those outreached included 1,120 through school and community presence and 15,426 through social media campaigns.</p> <p>TEXTERS: In 2018, our stated goal was to receive messages from 400 texters. In this reporting period we received messages from 447 texters; however, 389 of these texters remained anonymous in regard to location. Thirteen of the texters who revealed their location were in the Desert Healthcare District boundaries (three in Cathedral City, two in Desert Hot Springs, one in Palm Desert, one in Thousand Palms and six in Palm Springs). In total, 13,658 messages were exchanged between texter and therapist and 49 % of texters received referrals.</p>
<b>Jewish Family Service of the Desert #891</b> <i>Mental Health Outpatient Treatment Services for Low-Income Coachella Valley Residents</i>	<b>Grant term: 1/1/16 – 12/31/18</b> <b>Original Approved Amount: Up to \$570,000 (over 3 years)</b> Sixth progress report, covering the time period from 7/1/18 – 12/31/18.  The program is on track.	<b>Progress this period:</b> From 7/1/18 to 12/31/18, 763 individuals received mental health counseling services. This represents 49% of the target number for the full year. A total of 1,653 individuals received mental health counseling services for the entire program year (99% of the anticipated number, 1,674).

		During the six-month reporting period, 516 seniors received case management services (far beyond the goal of 130 for the year), with 21 of these seniors also receiving mental health counseling. All 763 clients (100%) who received mental health counseling received a clinical mental health assessment and treatment plan, including the establishment of at least one treatment goal, and 495 (65%) participated in three or more counseling sessions. Geriatric Depression Scale assessments were administered to 154 unduplicated seniors during the reporting period.
<b>Applications</b>		
<b>Applicant</b>	<b>Staff Notes</b>	<b>Status</b>
<b>DIGICOM</b> – requesting \$150,000 over two years for student film project focusing on behavioral health – Community Focus Area: Access to Primary and Behavioral Health Care – Proactive Category –	<b>Update:</b> Staff met with DIGICOM on Friday, November 16, to review and discuss concepts – if the students’ videos are prescriptive, it doesn’t work if the goal is to have the students learn how to express themselves. DIGICOM will continue to work with PSUSD students to bring awareness and delve into ideas (not prescriptive) of precariously housed homeless students, mental resiliency or any other peer-to-peer opportunities. Staff will then circle back with DIGICOM staff to work on the next steps to finalize a project description for funding.	<i>Pending and/or On Hold and/or Further Discussion Needed</i>

UCR SCHOOL OF MEDICINE \$536,157 (approximate) mobile medical unit through expansion of the Residents Street Medicine Program –	UCR is very much interested in developing the mobile unit concept as a strategy in collaboration with other community partners and service providers. <b>Update:</b> Staff is in process of finding available dates and times to meet with DRMC and UCR with discussion around the tele-psych and psychiatric residency programs. Staff is also pursuing collaborative partnership opportunities with the <b>Health to Hope Mobile Clinics</b> program.	DHCD staff, UCR SOM (Drs. Kim and Dr. Maguire) and DRMC convening on January 31, 2019 to further discuss.
<b>Letters of Inquiry</b>		
<b>Agency</b>	<b>Staff Notes</b>	<b>Status</b>
<b>Ronald McDonald House Inland Empire</b>	Requesting \$200,000 to support programs and services specific to Coachella Valley families (approximately 20%) that are referred by JFK Hospital, DRMC and Eisenhower Health for intensive and specialized medical treatments at the Children’s Hospital.	Site visit scheduled for January 23 <sup>rd</sup> .
<b>Coachella Valley Volunteers in Medicine</b>	Requesting \$120,000 to continue service to District residents through provision of 890 individual medical and dental appointments and other contracts for disease education, case management and community referral.	Under review – included in an application staff will suggest additional information on how the removal of the individual mandate on ACA and the “public charge” proposal would impact CVVIM.
<b>Health to Hope Clinics</b>	Requesting \$288,000 over a three-year period so that the organization’s mobile medical units can serve more of the homeless individuals within the District’s	Staff is currently researching the collaborative opportunities with UCR SOM Street Medicine project and Path of Life Ministries Behavioral Health mobile

	current service area and/or throughout eastern Coachella Valley (the passage of Measure BB).	unit concept. <i>After January 31<sup>st</sup> meeting with reps from UCR SOM and DRMC, we will be able to respond to the LOI.</i>
<b>CancerPartners (formerly known as Gilda's Club)</b>	Requesting \$130,000 for expansion of a pilot program now at Desert Sands Unified School District - Youth Grief & Loss Support Program. In conversations with PSUSD Mental Health and Student Support Services staff, it was suggested that the CancerPartners program could fill the gap left by Mourning Star's closing a few years ago.	Staff recommended CancerPartners contact representatives at Palm Springs Unified School District to present their program with the goal of attaining an MOU to develop the specifics on the potential number of students that could be served by this program. CancerPartners is still in the process of coordination.



December 18, 2018

CEO Report - Priorities - Milestones - Progress Measures

#1 Milestone: Successful Implementation of Strategic Plan

Staff is currently focused on the following work in support of the strategic plan and Board priorities:

1. Homelessness Initiative
2. Behavioral Health Initiative – research for consultant and work force development
3. Accreditation requirements – In progress. Estimated completion April 2019. \*\*Dependent on consultant meetings and review of policies
4. Implementation of Communications and Marketing Plan – Staff is on task to move forward on Branding and Website redesign followed by all other components of the plan.
5. CVHIP – staff to present MOU draft to the Board for approval

#2 Milestone: Up-to-Date Policy Manual and Timely Review

Staff will make recommendations on policies to be considered as a priority as it relates to accreditation requirements. – these policies will be prioritized and presented to the Board between the months of February, March and April. Upon full completion and approval, staff will move forward with request for formal Accreditation approval.

Priority: Operations

#3 Milestone: Successful implementation of public relations program highlighting the work of the District and Foundation

Staff will move forward on the Branding effort with consultant and upgrade of website presence.

Priority: Operations

#4 Milestone: Successful implementation of Office restructuring with support for both new and continuing employees

COO continues to work through the process of policy review and the implementation of a proposed timeline to obtain trainings for both staff and the Board of Directors to achieve the “Certified Healthcare District” from The Association of California Healthcare Districts (ACHD) and “District of Distinction” from Special District Leadership Foundation (SDLF) a division of California Special District Association (CSDA) – timeline was presented at the November Board meeting. Staff is moving forward to identify



consultants to perform required training and will work with Board to identify a mutually acceptable day and time.

Staff is working to finalize the satellite office and purchase required furnishings, all within proposed and approved budget.

"Priority: Operations

#5 Milestone: Expanded utilization of cvHIP by both residents and professionals throughout the Coachella Valley"

Staff has met with IEHP and is presenting draft MOU for the Board's consideration.

"Priority: Operations

#6 Milestone: Complete Association of California Healthcare Districts Certification"

A timeline for Accreditation was presented at the November 27<sup>th</sup> Board of Directors meeting.

"Priority: Strategy and Programs

#7 Milestone: Implementation of Hospital Governance and Oversight Policy with increased focus on quality issues"

Under the District's Lease Compliance Policy, a Hospital Governance and Oversight (HGOC) standing committee was created in January 2017. Monthly meetings have included current updates from Michele Finney, CEO of DRMC, regarding status of any issues, improvements, and developments within the hospital. Additionally, hospital rating scores, such as Leapfrog, CMS and Hospital Compare, have been presented to the Committee and communicated with the Board, including action plans for improving subpar scoring. The Committee will develop a hospital inspection plan to perform quarterly inspections of the hospital facilities. The Committee continues to bring transparency to hospital governance and oversight issues.

"Priority: Strategy and Programs

#8 Milestone: Continued focus on Homelessness Initiative with CVAG and Coachella Valley local governments (cities and county), as well as appropriate recognition of DHCD/F efforts"

A full report completed by Barbara Poppe and Associates and developed by staff and several community stakeholders was presented to the Board at the November 27, 2018 Desert Healthcare Foundation Board meeting. Barbara Poppe provided a presentation of the outcomes and recommendations

Staff participated and supported CVAG in the HEAP grant proposal and through this process convened several meetings with service providers to help ensure alignment and coordination of requests was represented in all CV grant proposals.

CVAG requested Barbara Poppe and Associates to present to the Homeless Committee and general population "The Path Forward: recommendations to advance an end to homelessness in the Coachella Valley" Strategic Action Plan.

Staff, as requested, will present two-year budget for the first recommendation – 3 initial Collective staff.

"Priority: Strategy and Programs

#9 Milestone: Development of a strategy to address behavioral health issues in the Coachella Valley with primary and expedited focus on inpatient psychiatric resources"

Workforce development: After several months of staff's participation in the Behavioral Health OneFuture "ATeam" meetings, a draft plan for engaging future workforce and attracting Behavioral Health professionals in the immediate term has been created. Staff continues to work with OneFuture to bring forward a grant proposal to the February Board meeting.

Meeting with UCR School of Medicine has been set for January 31, 2019, to further discuss the mobile medical unit and psychiatric services.

Staff continues to research potential Behavioral Health consultants as per report included in January 22, Board Package.

Staff continues to meet with County staff to further understand both existing and new services being offered in the Coachella Valley

"Priority: Strategy and Programs

#10 Milestone: Develop a strategy to address acute hospital bed resources throughout the CV with specific decisions about how to address seismic of existing facilities and other facilities issues at DRMC"

Board and Staff have been working with our consultant, Kaufman Hall, to develop guidance to the Board for decisions regarding the hospital facility, in light of the underlying seismic retrofit 2030 compliance issue. A current seismic ASCE 41 assessment to provide detailed assessment of estimated costs and process to meet the compliance issue is complete. Phase 0 (high level assessment) is complete and was presented at the September 25, 2018 Board of Directors meeting. The ASCE 41 – Phase 1 report – is being presented at the January 22, 2019 Board meeting.

"Priority: Strategy and Programs

#11 Milestone: Develop, with Board, contingency plans for remainder of lease without an extension to Tenet Health"

Through the work and development underway with Kaufman Hall, the District will be developing a contingency plan, following the Seismic Assessment and further analysis. Estimated completion of the Contingency Plan is May 2019.

"Priority: Strategy and Programs

#12 Milestone: Providers, Facilities, Programs, and Services plans for 2018 considering changing federal actions. Establish sustainable funding for Providers, Facilities, Programs, and Services. "

The New Providers, Facilities, Programs, and Services Committee and Staff, along with guidance from Kaufman Hall, will be developing a plan (Apr-Jun 2019) for how to proceed with the hospital with regard to seismic retrofit and to define a transaction with the hospital operator (i.e. new hospital lease) by May 2027.

"Priority: Expansion

#13 Milestone: Establish a sustainable funding mechanism to include in expansion vote with LAFCO application"

Program team work continues to identify potential funding for two Key Initiatives – Homelessness and Behavioral Health. Through this process, staff is mapping potential funding sources to support efforts and programs that serve the Coachella Valley as a whole.

As mentioned above, staff supported CVAG in the HEAP request for 2.5 million as these funds represented programs that would benefit the full district.

Concurrently, Staff is focused on Salton Sea Bond and the allocation of 10 million to Health, Prop 63 funds. Staff is participating in Salton Sea authority meetings and furthering our relationship with Desert Parks and Recreational District. Staff will include updated report in the Foundation Board Package referencing the early win of the accepted Farm Bill that reflects on the direct benefits to the Salton Sea and potential funding.

"Priority: Expansion

#14 Milestone: Secure successful LAFCO vote"

Complete. Measure BB passed at the November 6, 2018 election with an overwhelming 80.60% of approximately 55,000 voters voting in favor of the Measure. The successful passage was as a result of the diligent and timeless effort of the District's Board & Staff, Government Officials, and community members.

"Priority: Expansion

#15 Milestone: Preparation for and successful vote to expand DHCD/F in November 2018"

Complete.

"Priority: Expansion

#16 Milestone: Plan for expansion of DHCD/F Board if ballot initiative passes, as well as begin preparations for "district" elections."

With successful passage of Measure BB, 2 new Directors from the expanded area were appointed at the January 15, 2019 Board meeting. Future planning for rezoning the District into 7 zones, along with efforts to develop funding to support the expansion.

**DESERT HEALTHCARE DISTRICT  
TIMELINE AND PROCESS TO INCREASE ZONES FROM 5 TO 7  
(Health & Safety Code Section 32499.3)**

The following describes two procedures for transitioning the Desert Healthcare District ("District") into 7 voting districts or ("Zones") in accordance with AB 2414 (Health & Safety Code, § 32499 et seq.). The recommended option allows for public outreach, 2 public hearings for public input and discussion, and meets and exceeds all the legal requirements. The alternative option is a longer process and provides for additional public hearings.

**RECOMMENDED OPTION:**

**January 15,  
2019**

**2 NEW DIRECTORS ARE APPOINTED TO THE BOARD FROM THE  
NEWLY ANNEXED AREA**

The Board appointed 2 new Directors to serve on the District Board from the newly annexed area. The District now has 7 Directors. (Health & Safety Code, § 32499.2(c)).

**January 22,  
2019**

**BOARD DISCUSSION AND DIRECTION CONCERNING OPTIONS**

The Board, with staff input, reviews the options for transitioning into 7 zones and provides direction to staff as to which Resolution the Board would like to consider at the February 26, Board meeting which sets the public hearings and meetings.

**February 26,  
2019**

**CONSIDERATION OF RESOLUTION SETTING PUBLIC HEARING  
SCHEDULE**

In accordance with Health & Safety Code section 32499.2(c) the Board would consider a Resolution setting the time and place for two hearings on the establishment of the 7 new voting districts at which members of the public can present their views on the proposed new Zones. The Board can receive input from the public but, in accordance with the statute, the final location of the boundaries is the Board's decision.

**March 26, 2019**

**PUBLIC OUTREACH AND FIRST PUBLIC HEARING TO REVIEW THE  
PROPOSED NEW BOUNDARIES**

During February through March 2019, the staff would conduct outreach to the public, including to non-English-speaking communities, explaining the transition to 7 zones and encouraging public participation. Drafts maps will be published and made available to the public. At the March 26, 2019, public hearing, NDC would present the proposed draft maps for discussion and input from the public would be considered. NDC would take the information and input from the meeting and update the maps in advance of the second public hearing.

April 23, 2019

**SECOND PUBLIC HEARING TO REVIEW THE PROPOSED NEW  
BOUNDARY MAPS AND POSSIBLE CONSIDERATION OF A  
RESOLUTION ADOPTING THE NEW ZONES**

Public outreach would continue, and the updated boundary map or maps would be presented by NDC at a second public hearing. The public would have the opportunity to present their views regarding the proposed map or maps. If the Board was satisfied with a proposed map, the Board could consider a Resolution adopting the new voting Zones or the Board could direct staff to bring back the Resolution for consideration at the **May 28, 2019**, Board meeting. The estimated costs for this option would be approximately **\$26,500**.

**A service agreement for National Demographics Corporation is included in the packet for consideration of approval.**

---

Alternatively, at the January 22, 2019, meeting the Board could provide direction to staff to bring back a Resolution implementing a longer process with additional meetings and public hearings including pre-map and post-map public hearings.

**ALTERNATIVE OPTION:**

**Between  
March 2019  
and  
May 2019**

**PUBLIC OUTREACH AND PUBLIC HEARINGS PRIOR TO DRAWING  
PROPOSED BOUNDARY MAPS**

From March 2019 through the end of the month of May 2019 (pre-map period), the staff would conduct outreach to the public, including to non-English-speaking communities, explaining the transition to 7 zones and to encouraging public participation. The Board would schedule 2-3 public hearing to be held during this period prior to drawing the maps.

**From June  
through August  
2019**

**SUMMER BREAK WHILE THE NEW MAPS ARE DRAWN**

**Between  
September and  
October 2019**

**PUBLIC HEARINGS POST PREPARATION OF BOUNDARY MAPS**

From September 2019 through the end of October 2019, after the maps are drawn (post-map period), the draft maps will be published and made available to the public. The Board would schedule 2-3 public hearings during the post-map period, at which the public would be invited to provide input regarding the draft maps.

**October 2019**

**CONSIDERATION OF FINAL RESOLUTION TRANSITIONING TO 7  
ZONES**

At the October 22, 2019, Regular Board meeting, the Board would hold the

final public hearing and would vote to adopt the final map of the new 7 zones. The estimated costs for the Alternative Option would be approximately **\$45,000** or more depending upon how many meeting NDC representatives attend.



## Proposed Scope of Work

To provide the flexibility to meet the needs of the client if it decides to move to by-district elections, NDC offers a full menu of districting options:

### Basic Districting Project Elements

Includes all of the services listed below:

Basic Elements cost .....\$22,500

- Project Setup and coordination:
  - Development of redistricting database including Census and California Statewide Database data;
  - Incorporation of any Geographic Information System (GIS) data that the District wishes to include and provides (often including clinic and hospital locations; service area divisions; school attendance areas; important local landmarks; or local neighborhood boundaries);
  - Initial discussion with key staff and/or Board members about demographics, communities of interest, schedule and criteria;
  - Any phone- or web-conference calls to discussion the project's progress or answer any Board, staff or media questions that may arise;
- Plan Development:
  - Creating of 2 to 4 initial draft maps for Board and public consideration;
  - Analysis and preparation for Board consideration of all whole or partial plans submitted by the public;
  - Conversion of all maps and reports to web-friendly versions for online posting;
  - Online posting of all maps to an interactive website for detailed Board and public review;
  - Any requested additional maps and/or map revisions requested;
- Plan Presentation:
  - Presentations at Board meetings and/or public forums by phone- or web-conference (or in person for the “in person presentation” fee listed under “optional elements” below);
- Work with the County Registrar of Voters to implement the final adopted plan.

### Optional Districting Project Elements

Selected at the client’s discretion:

- In-person presentation at Board meetings, facilitation of public forum(s), and/or any other requested meetings (price per meeting);.....\$2,000



## National Demographics Corporation

- Preparation and processing of paper, PDF and Excel-based "public participation kits" (paper kits that allow the public to draw and submit their own plans).....\$4,500
- Creation, hosting, and updating of an NDC--managed project information website (if the client does not wish to manage a project website as part of its existing website). .....\$3,500
- Hosting, managing and processing submitted plans for an online interactive system that allows public to draw and submit proposed districting plans through a standard web browser.....\$14,500
- Spanish translation of project-related materials.....\$125 per page

Stated prices include all travel, printing (except public participation kits and any large-plot maps), and other anticipated expenses.

Timeline: The detailed timeline will be worked out in consultation with the District. The project can be done in anywhere from a few weeks to ten months, depending on how much public engagement is desired and how fast the District wishes to complete the work.

### **Other Potential Project-Related Expenses:**

The only anticipated additional districting expenses would be any site or staff costs for conducting the community forums; and the cost of printing or copying paper copies of the "Public Participation Kit." In NDC's experience, most public participants will download and print the Kits in their own homes or offices.





December 21, 2018

State Board of Equalization  
Tax Area Services Section  
450 N Street, MIC:59  
Post Office Box 942879  
Sacramento, California 94279-0059

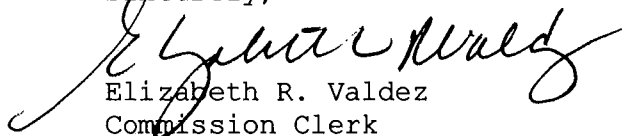
**SUBJECT: LAFCO 2017-02-4-Annexation to the Desert Healthcare District  
(Eastern Coachella Valley)**

Pursuant to California law, you will find enclosed the following documents relating to the above-referenced action:

1. Statement of Boundary Change.
2. Certificate of Completion.
3. LAFCO Resolution No. 07-18.
4. Map and boundary description.

Please file the above documents and acknowledge receipt at your earliest convenience.

Sincerely,



Elizabeth R. Valdez  
Commission Clerk

cc: Registrar of Voters, Rebecca Spencer - email  
Registrar of Voters, Art Tinoco - email  
RCIT - Damian Laning - email  
RCIT - GIS, Vinnie Nguyen - email  
RCIT - GIS, Stella Spadafora - email  
TLMA, County Survey, Richard Lantis - email  
TLMA, County Survey, Paul Hillmer - email  
Assessor's Office, Peter Aldana - email  
Executive Office, Scott Bruckner - email  
Auditor-Controller's Office, Paul Angulo - email  
Environmental Health, Steve Van Stockum, Director - email  
Clerk of the Board, Kecia Harper-Ihem - email  
GeoSpective Technologies, Elizabeth Dover - email  
Desert Healthcare District, Chris Christensen, Interim CEO - email  
Desert Healthcare District, Kay Hazen - email  
Desert Healthcare District, Mark Matthews -email

**STATEMENT OF BOUNDARY CHANGE**STATE OF CALIFORNIA  
BOARD OF EQUALIZATION

Please mail to: California State Board of Equalization, Tax Area Services Section,  
450 N Street, MIC:59, P.O. Box 942879, Sacramento, CA 94279-0059.  
www.boe.ca.gov

BOE File No.: \_\_\_\_\_

COUNTY Riverside	COUNTY NUMBER 33	ACREAGE 1,760 sq. miles	FEE \$3,500.00	RES./ORD. NUMBER
CONDUCTING AUTHORITY Riverside Local Agency Formation Commission				LAFCO. RES. 07-18
SHORT FORM DESIGNATION LAFCO 2017-02-4-Annexation to the Desert Healthcare District (Eastern Coachella Valley)				EFFECTIVE DATE January 5, 2019

**1. TYPE OF ACTION**

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> City - Annexation (02)      | <input type="checkbox"/> District - Formation (09)                           | <input type="checkbox"/> District - Name Change (11)                  | <input type="checkbox"/> School District - Unification (18)      |
| <input type="checkbox"/> City - Detachment (14)      | <input checked="" type="checkbox"/> District - Annexation (01)               | <input type="checkbox"/> Reorganization (12)                          | <input type="checkbox"/> School District - Thompson Unified (19) |
| <input type="checkbox"/> City - Incorporation (04)   | <input type="checkbox"/> District - Detachment (07)                          | <input type="checkbox"/> School District - Transfer of Territory (13) |  |
| <input type="checkbox"/> Consolidation of TRA's (06) | <input type="checkbox"/> District - Consolidation (05)                       | <input type="checkbox"/> School District - Merger (17)                |  |
| <input type="checkbox"/> County Boundary Change (16) | <input type="checkbox"/> District - Dissolution/Removal from Board Roll (08) |   |  |

**2. PRINCIPAL CITY/DISTRICT(S) AFFECTED BY ACTION [ENTER DISTRICT NAME(S)]**

Desert Healthcare District (Annexation)

**3. AFFECTED TERRITORY**

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Inhabited | <input checked="" type="checkbox"/> Developed | <input type="checkbox"/> Will be taxed for existing bonded indebtedness or contractual obligations as set forth by the terms and conditions as stated in the resolution. |
| <input type="checkbox"/> Uninhabited          | <input type="checkbox"/> Undeveloped          |  |
| Number of Areas: <u>1</u>                     |   | <input checked="" type="checkbox"/> Will not be taxed for existing bonded indebtedness or contractual obligations.   |

**4. ELECTION**

- ☒ An election authorizing this action was held on 11/06/2018 (mm/dd/yyyy).
- ☐ This action is exempt from election.

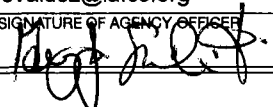
**5. ENCLOSED ARE THE FOLLOWING ITEMS REQUIRED AT THE TIME OF FILING**

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fees                                    | <input checked="" type="checkbox"/> Resolution of conducting authority                          | <input checked="" type="checkbox"/> Written geographic description  |
| <input checked="" type="checkbox"/> Certificate of Completion (LAFCo. Only) | <input type="checkbox"/> County auditor's letter of TRA assignment (consolidated counties only) | <input checked="" type="checkbox"/> Map(s) and supporting documents |

**6. CITY BOUNDARY CHANGES ONLY**

- ☐ Map of limiting addresses
- ☐ Alphabetical list of all streets within the affected area to include beginning and ending street numbers
- Estimated Population: \_\_\_\_\_ Total assessed value of all property in subject territory: \_\_\_\_\_

**REQUIRED: According to section 54902 of the Government Code, copies of these documents must be filed with the county auditor and county assessor.**

The California State Board of Equalization will acknowledge receipt of filing to:		<b>BOE USE ONLY</b>	
NAME George J. Spiliotis		CHK #:	
TITLE Executive Officer			
AGENCY Riverside Local Agency Formation Commission			
ADDRESS (street, city, state, zip code) 6216 Brockton Ave., Suite 111-B, Riverside, CA 92506			
TELEPHONE NUMBER (include area code) 951-369-0631	FAX NUMBER (include area code)	AMT:	
EMAIL ADDRESS evaldez@lafco.org		INT:	
SIGNATURE OF AGENCY OFFICER 	DATE December 21, 2018	<input type="checkbox"/> DIGITAL CONTENT:	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



Riverside LAFCO  
6216 Brockton Avenue, Suite 111-B  
Riverside, CA 92506  
STOP #1030

2018-0496818

12/21/2018 02:43 PM Fee: \$ 0.00

Page 1 of 50

Recorded in Official Records  
County of Riverside  
Peter Aldana  
Assessor-County Clerk-Recorder



## CERTIFICATE OF COMPLETION

Pursuant to the Cortese-Knox-Hertzberg Local Government Reorganization Act of 2000, Section 57200 et seq. this Certificate is hereby issued by the Executive Officer of the Riverside Local Agency Formation Commission.

1. Short-form designation, as designated by LAFCO, is LAFCO 2017-02-4-Annexation to the Desert Healthcare District (Eastern Coachella Valley).

2. The name of the city/district involved in this Annexation and the kind or type of change ordered is as follows:

City/District

Type of Change of Organization

Desert Healthcare District

Annexation

3. The above-listed city/districts are located within the following county: Riverside.

4. A description of the boundaries of the above-cited annexation are shown on the attached map and boundary description, marked Exhibit "A" and by reference incorporated herein.

5. The territory is inhabited.

6. This annexation has been approved subject to the terms and conditions outlined on the attached resolution.

7. Resolution No. 07-18 ordering this annexation subject to the confirmation of the voters was adopted on April 26, 2018. A copy of the resolution is attached hereto and by reference incorporated herein.

8. This annexation has been approved subject to the terms and conditions as outlined in the attached Resolution No. 07-18.

9. A majority of voters confirmed the order at an election conducted on November 6, 2018.

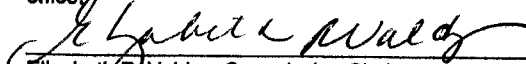
10. The effective date of this annexation will be 30 days following the certification of election results, which is January 5, 2019.

I hereby certify that as Executive Officer for the Riverside Local Agency Formation Commission, the above-listed agency has completed the reorganization pursuant to the Cortese-Knox-Hertzberg Local Government Reorganization Act of 2000.

  
GEORGE J. SPILIOTIS  
Executive Officer

Date: December 21, 2018

The foregoing instrument is certified, under penalty of perjury, to be a true copy of the original on file in this office.

  
Elizabeth B. Valdez, Commission Clerk  
Riverside Local Agency Formation Commission  
Executed on December 21, 2018 at  
Riverside, California

1 RIVERSIDE LOCAL AGENCY FORMATION COMMISSION

2 RESOLUTION NO. 07-18

3 APPROVING THE ANNEXATION TO THE DESERT HEALTHCARE DISTRICT  
4 (EASTERN COACHELLA VALLEY)

5 LAFCO 2017-02-4  
6

7 BE IT RESOLVED AND DETERMINED by the Riverside Local Agency  
8 Formation Commission in regular session assembled on April 26, 2018  
9 that LAFCO 2017-02-4-Annexation to the Desert Healthcare District  
10 (Eastern Coachella Valley), consisting of approximately 1,760  
11 square miles, generally located between the San Bernardino County  
12 and San Diego and Imperial County lines and from Cook Street in  
13 Palm Desert on the west to the community of Chiriaco Summit on the  
14 east, including the Cities of Palm Desert, Indian Wells, La Quinta,  
15 Indio and Coachella and the communities of Bermuda Dunes, Mecca,  
16 Thermal, Oasis, North Shore and Vista Santa Rosa and other  
17 unincorporated County areas, as more particularly described in  
18 Exhibit "A", attached hereto and made a part hereof, is approved.

19 BE IT FURTHER RESOLVED, DETERMINED AND FOUND THAT:

20 1. Commission proceedings were commenced by resolution of  
21 application by the Desert Healthcare District.

22 2. The annexation is proposed to provide opportunities for  
23 access to healthcare services by the Desert Healthcare District.

24 3. The distinctive short form designation of the proposed  
25 annexation is LAFCO 2017-02-4-Annexation to the Desert Healthcare  
26 District (Eastern Coachella Valley).

27 4. Find that the Desert Healthcare District, as lead agency  
28 under the California Environmental Quality Act (CEQA), has found

1 the annexation to be statutorily exempt from CEQA pursuant to Public  
2 Resources Code Section 21080(b)(1) and CEQA Guidelines Section  
3 15268, as the filing of the proposal was required by statute and,  
4 therefore, it is a ministerial action; Likewise, the approval of  
5 the annexation by the Commission without modification was also  
6 required by statute in Assembly Bill 2414 codified in Health &  
7 Safety Code sections 32499 through 32499.4, therefore, Commission  
8 approval is also a ministerial action exempt from CEQA.

9       5. The boundaries of the territory as set forth in Exhibit  
10 "A", attached hereto and incorporated herein by this reference have  
11 been approved.

12       6. The proposed annexation is consistent with the sphere of  
13 influence of the Desert Healthcare District, as amended, and the  
14 spheres of influence of all other applicable local agencies.

15       7. The territory to be annexed is legally inhabited.

16       8. The affected area will not be subject to existing general  
17 bonded indebtedness of the Desert Healthcare District related to  
18 this annexation.

19       9. The regular county assessment roll will be utilized.

20       10. The annexation is approved subject to the following terms  
21 and conditions:

22           a. The Desert Healthcare District shall defend,  
23 indemnify, and hold harmless the Riverside Local Agency Formation  
24 Commission ("LAFCO"), its agents, officers, and employees from any  
25 claim, action, or proceeding against LAFCO, its agents, officers,  
26 and employees to attack, set aside void, or annul any approval of  
27 LAFCO concerning this proposal.

28       11. The annexation is ordered subject to the confirmation by

1 the voters residing within the territory ordered to be annexed.

2 12. Direct the Riverside County Board of Supervisors to  
3 direct County election officials to conduct the election on the  
4 annexation at the next countywide election.

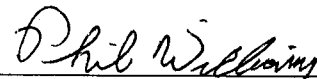
5 13. Establish the effective date of the annexation as 30 days  
6 following the certification of election results.

7 14. The Executive Officer is directed to prepare and execute  
8 a Certificate of Completion upon receipt of fees required by  
9 Government Code Section 54902.5 (made payable to the State Board of  
10 Equalization) and confirmation by the voters.

11 15. The Executive Officer is directed to transmit a certified  
12 copy of this resolution to each subject agency.

13 //

14 //



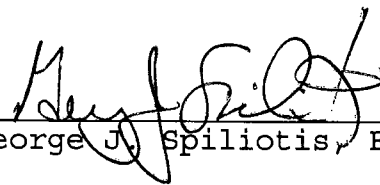
Phil Williams, Chair

15  
16 //

17 I certify the above resolution was passed and adopted by the  
18 Riverside Local Agency Formation Commission on April 26, 2018.

19 //

20 //



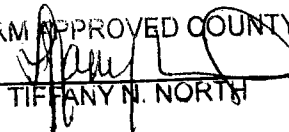
George J. Spiliotis, Executive Officer

21  
22 //

23 //

24 //

25 //

FORM APPROVED COUNTY COUNSEL  
BY:  5/15/18  
TIFFANY N. NORTH DATE

26 //

27 //

28 //

**EXHIBIT "A"**  
**LAFCO 2017-01-4**

**SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT  
HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)  
LAFCO 2017-02-4  
ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA  
VALLEY)**

IN THE COUNTY OF RIVERSIDE, STATE OF CALIFORNIA, DESCRIBED AS  
FOLLOWS:

SECTIONS 1 THROUGH 36, INCLUSIVE, T 2 S, R 7 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 2 S, R 8 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 2 S, R 9 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 2 S, R 10 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 2 S, R 11 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 2 S, R 12 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 3 S, R 7 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 3 S, R 8 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 3 S, R 9 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 3 S, R 10 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 3 S, R 11 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 3 S, R 12 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 4 S, R 7 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 4 S, R 8 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 4 S, R 9 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 4 S, R 10 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 4 S, R 11 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 4 S, R 12 E, S.B.M.;  
SECTIONS 1 THROUGH 3, INCLUSIVE, T 5 S, R 6 E, S.B.M.;  
SECTION 10 THROUGH 12, INCLUSIVE, T 5 S, R 6 E, S.B.M.;  
SECTION 13 THROUGH 15, INCLUSIVE, T 5 S, R 6 E, S.B.M.;  
SECTION 22 THROUGH 24, INCLUSIVE, T 5 S, R 6 E, S.B.M.;  
SECTION 25 THROUGH 27, INCLUSIVE, T 5 S, R 6 E, S.B.M.;  
SOUTHEAST QUARTER OF SECTION 28, T 5 S, R 6 E, S.B.M.;  
WEST HALF OF SECTION 30, T 5 S, R 6 E, S.B.M.;  
SECTION 31 THROUGH 36, INCLUSIVE, T 5 S, R 6 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 5 S, R 7 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 5 S, R 8 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 5 S, R 9 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 5 S, R 10 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 5 S, R 11 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 5 S, R 12 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 6 E, S.B.M.;




SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 7 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 8 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 9 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 10 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 11 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 12 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 6 S, R 13 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 6 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 7 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 8 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 9 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 10 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 11 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 12 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 7 S, R 13 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 6 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 7 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 8 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 9 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 10 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 11 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 12 E, S.B.M.;  
SECTIONS 1 THROUGH 36, INCLUSIVE, T 8 S, R 13 E, S.B.M.;

**CONTAINING 1,126,000 ACRES, MORE OR LESS.**

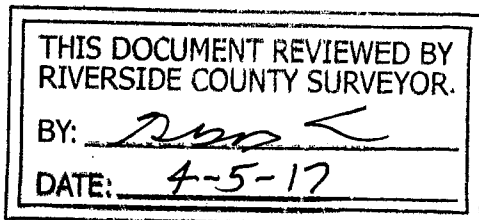
AS DEPICTED IN **EXHIBIT "A"** MAP ATTACHED HERETO AND BY THIS  
REFERENCE MADE A PART HEREOF.

PREPARED BY OR UNDER THE DIRECTION OF:

  
CHARLES R. HARRIS P.L.S. 4989  
EXP. 12/31/2017



DATED: 3/23/2017



APPROVED BY THE  
LOCAL AGENCY FORMATION COMMISSION

Angela Cline 4/26/18

PAGE 2 OF 2



# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

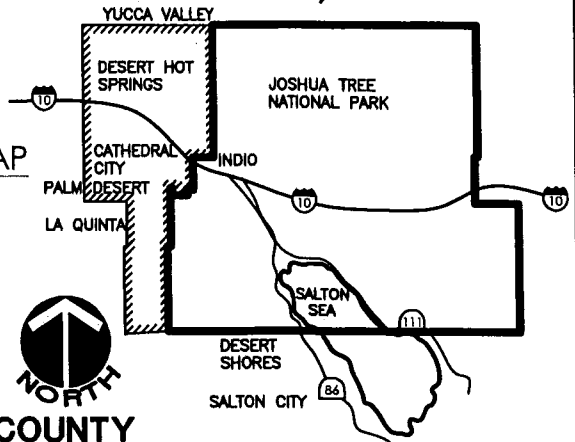
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PAGES 5-8	(T3S-T5S) R12E PARCELS
PAGES 9-11	(T6S-T8S) R13E PARCELS
PAGES 12-15	T8S (R12E-R7E) PARCELS
PAGES 16-18	(T8S-T6S) R6E PARCELS
PAGES 19-36	T5S R6E PARCELS
PAGES 35-38	T4S R7E PARCELS
PAGE 39	T3S R7E PARCELS

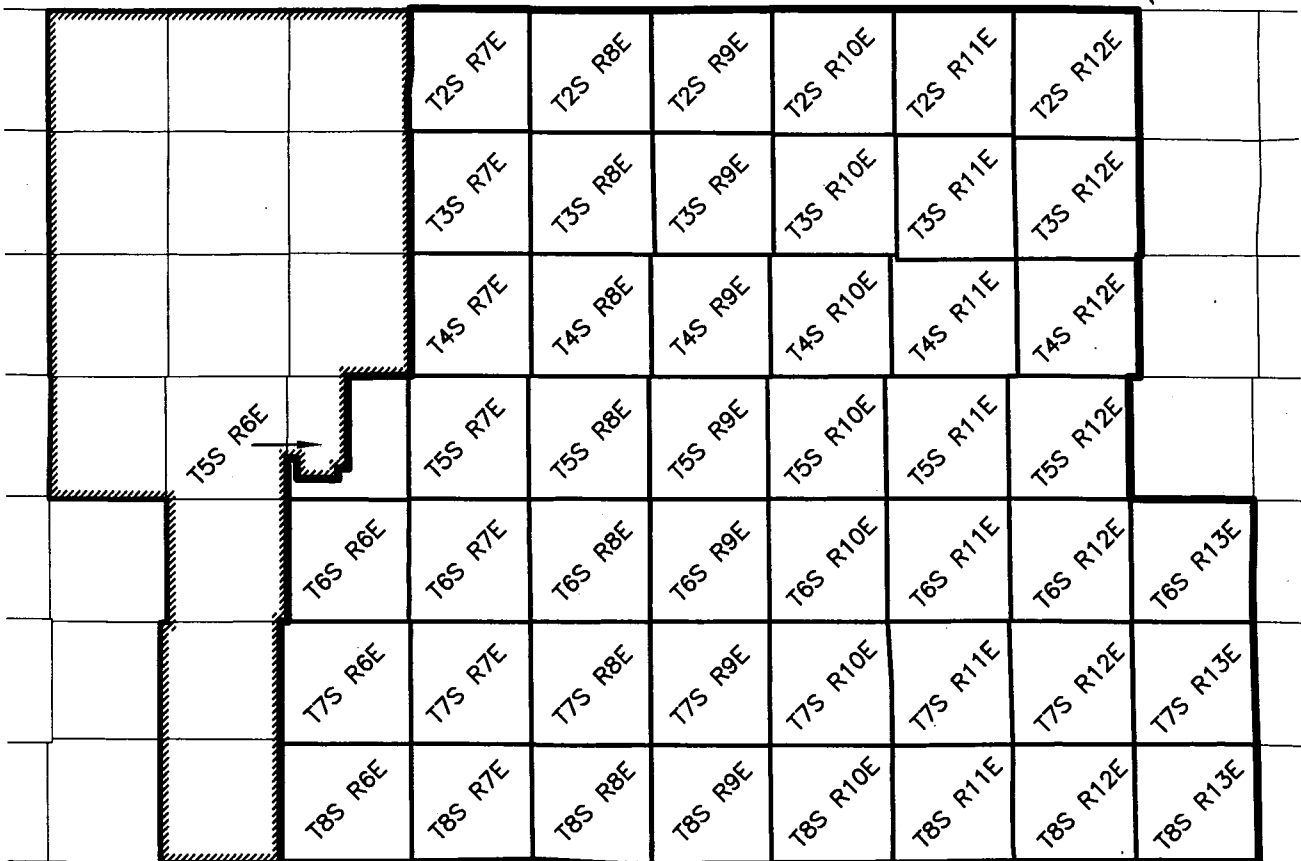
## INDEX MAP

## VICINITY MAP

N.T.S.



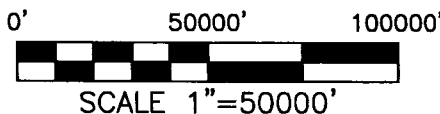
## SAN BERNARDINO COUNTY



## SAN DIEGO COUNTY | IMPERIAL COUNTY



DATED: 3/23/2017



## LEGEND

- ANNEXATION BOUNDARY
- EXISTING BNDRY LIMITS
- TOWNSHIP BOUNDARY
- SECTION BOUNDARY



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J.N. 2354 3/23/2017 SHEET 1 OF 39

# EXHIBIT "A"

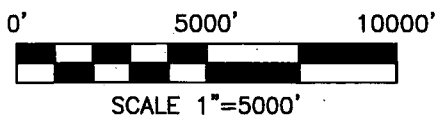
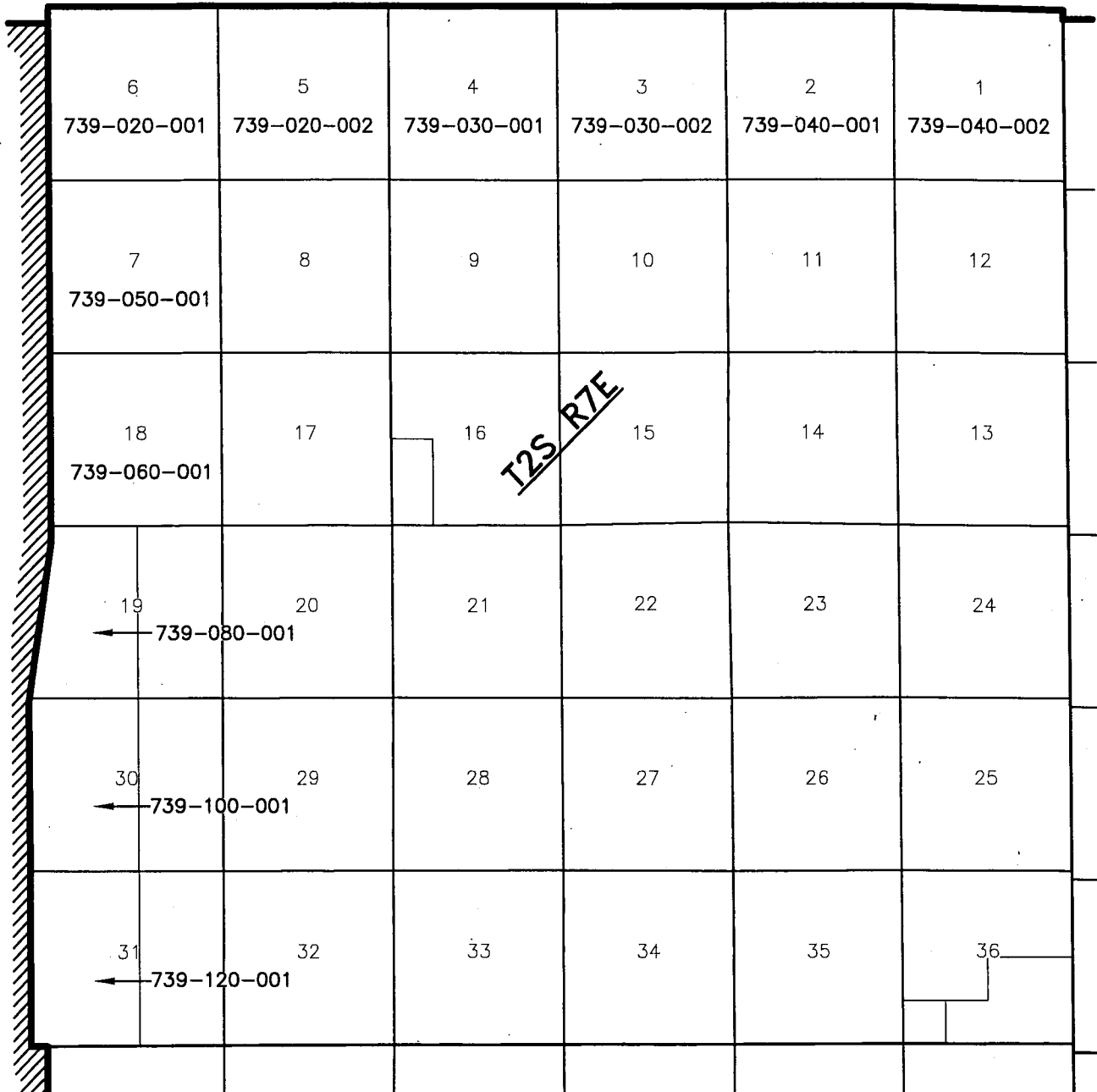
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

## SAN BERNARDINO COUNTY



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# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

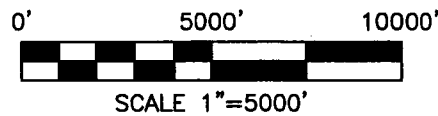
SEE DETAIL 1  
BELOW

SAN BERNARDINO COUNTY

739-200-010

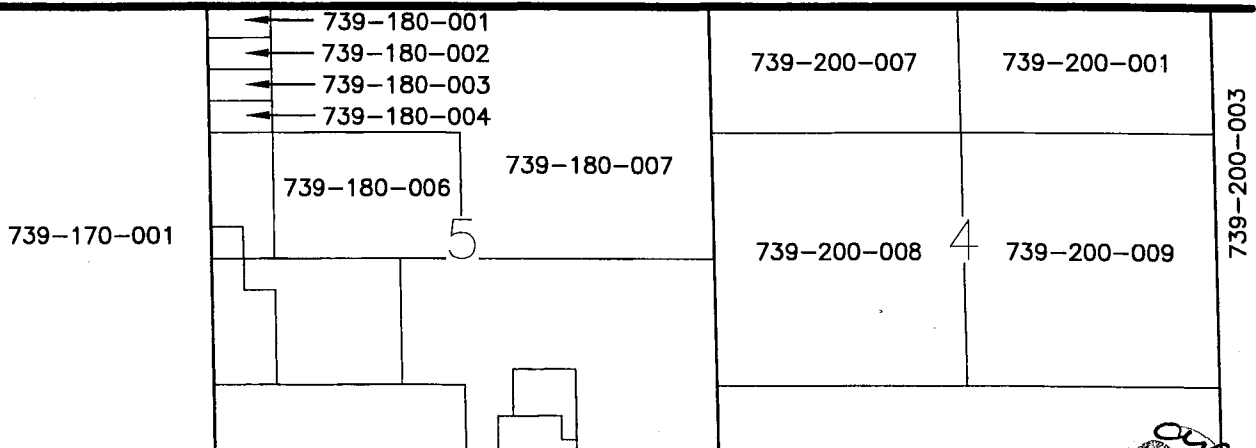
SEE SHEET 2

SEE SHEET 4



SEE ABOVE

SAN BERNARDINO COUNTY



THIS DOCUMENT REVIEWED BY  
RIVERSIDE COUNTY SURVEYOR.

BY: *[Signature]*

DATE: 4-5-17

DETAIL 1  
1"=2000'



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 3 OF 39

# EXHIBIT "A"

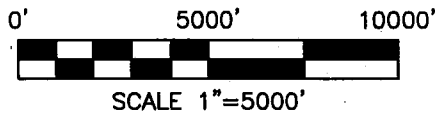
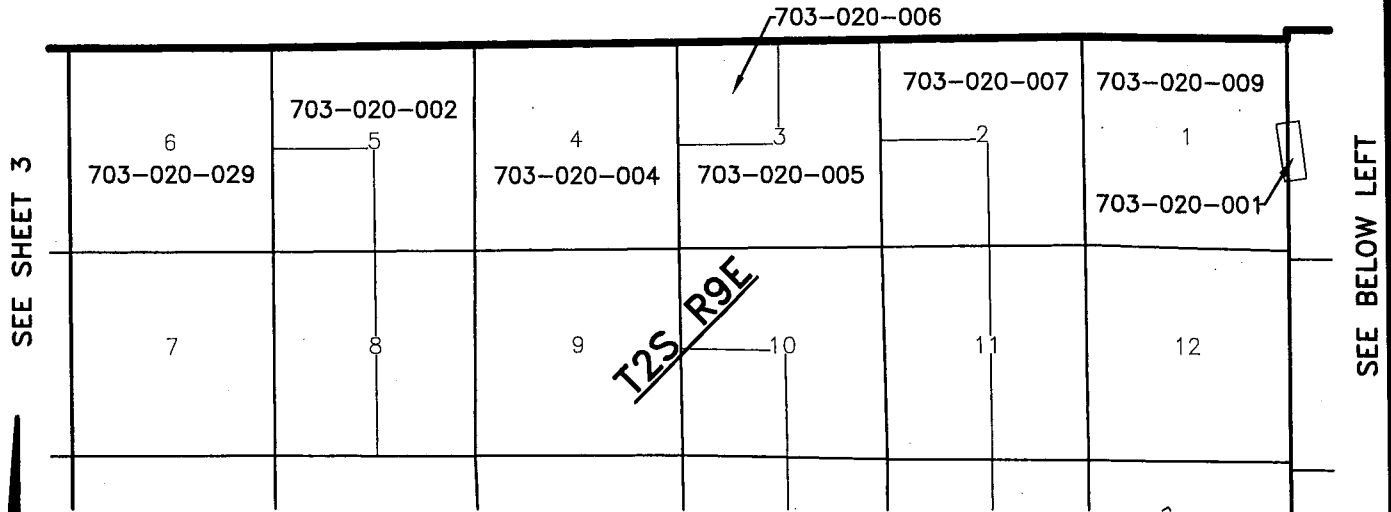
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

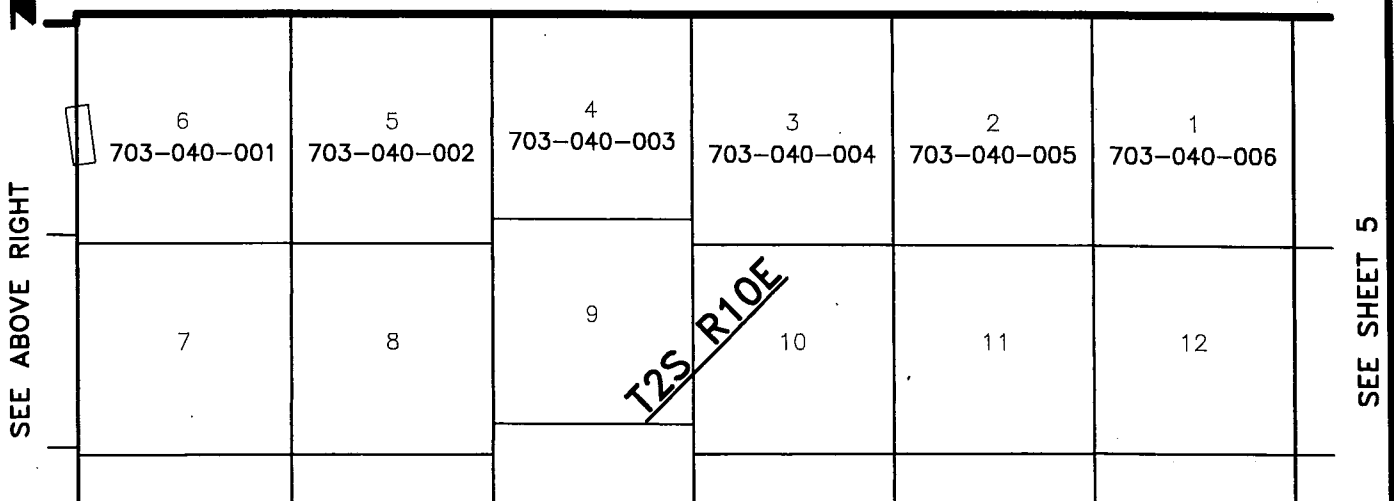
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

## SAN BERNARDINO COUNTY



## SAN BERNARDINO COUNTY



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PLANNING ■ CIVIL ENGINEERING

LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 4 OF 39

# EXHIBIT "A"

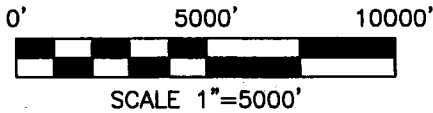
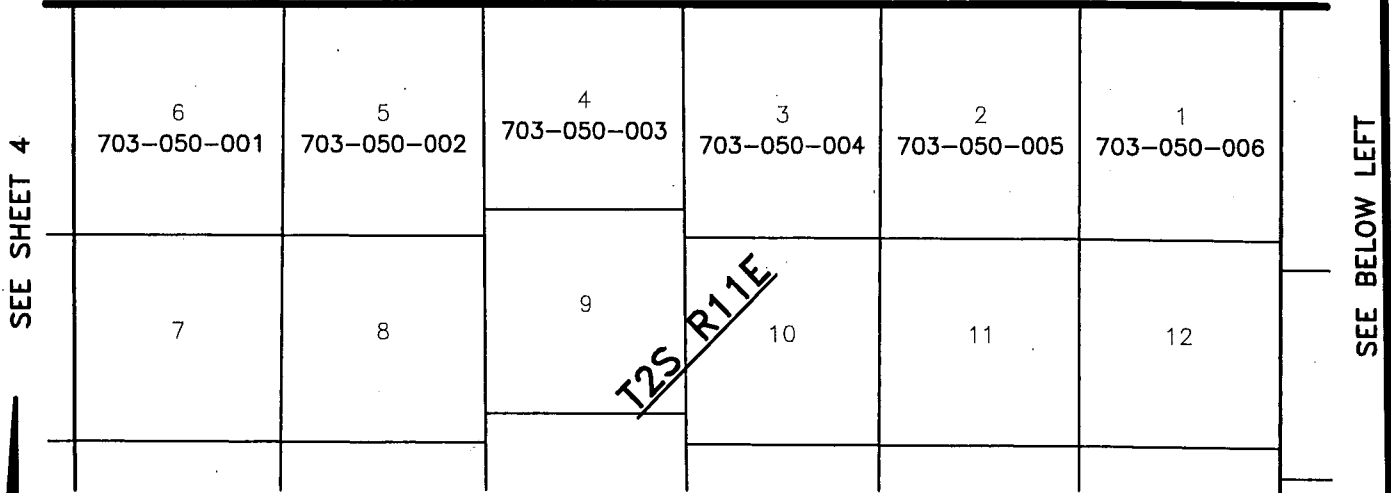
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SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

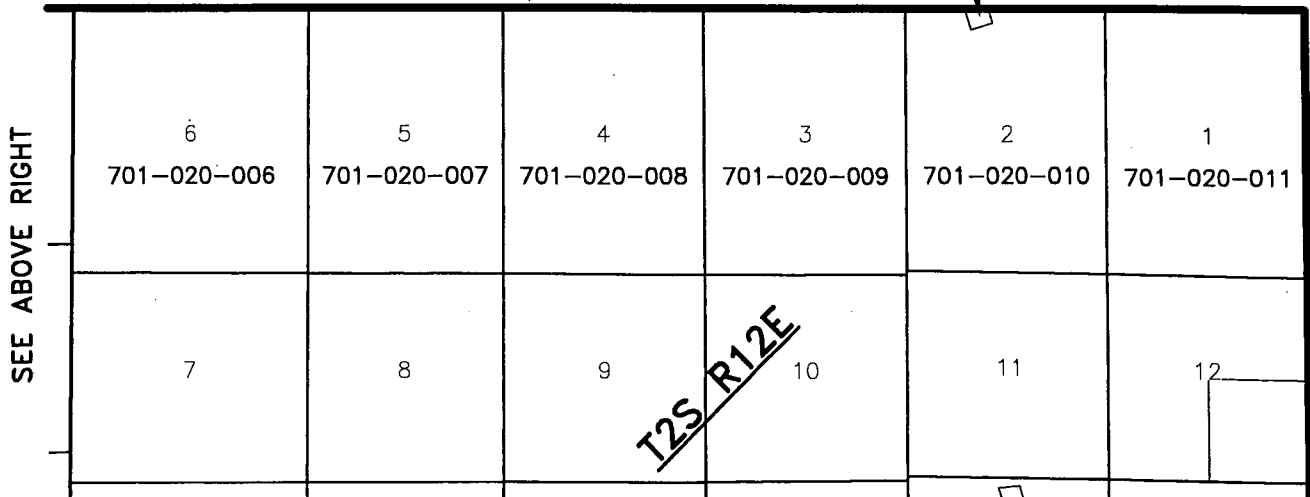
ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

## SAN BERNARDINO COUNTY



701-020-001

## SAN BERNARDINO COUNTY



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LAND SURVEYING

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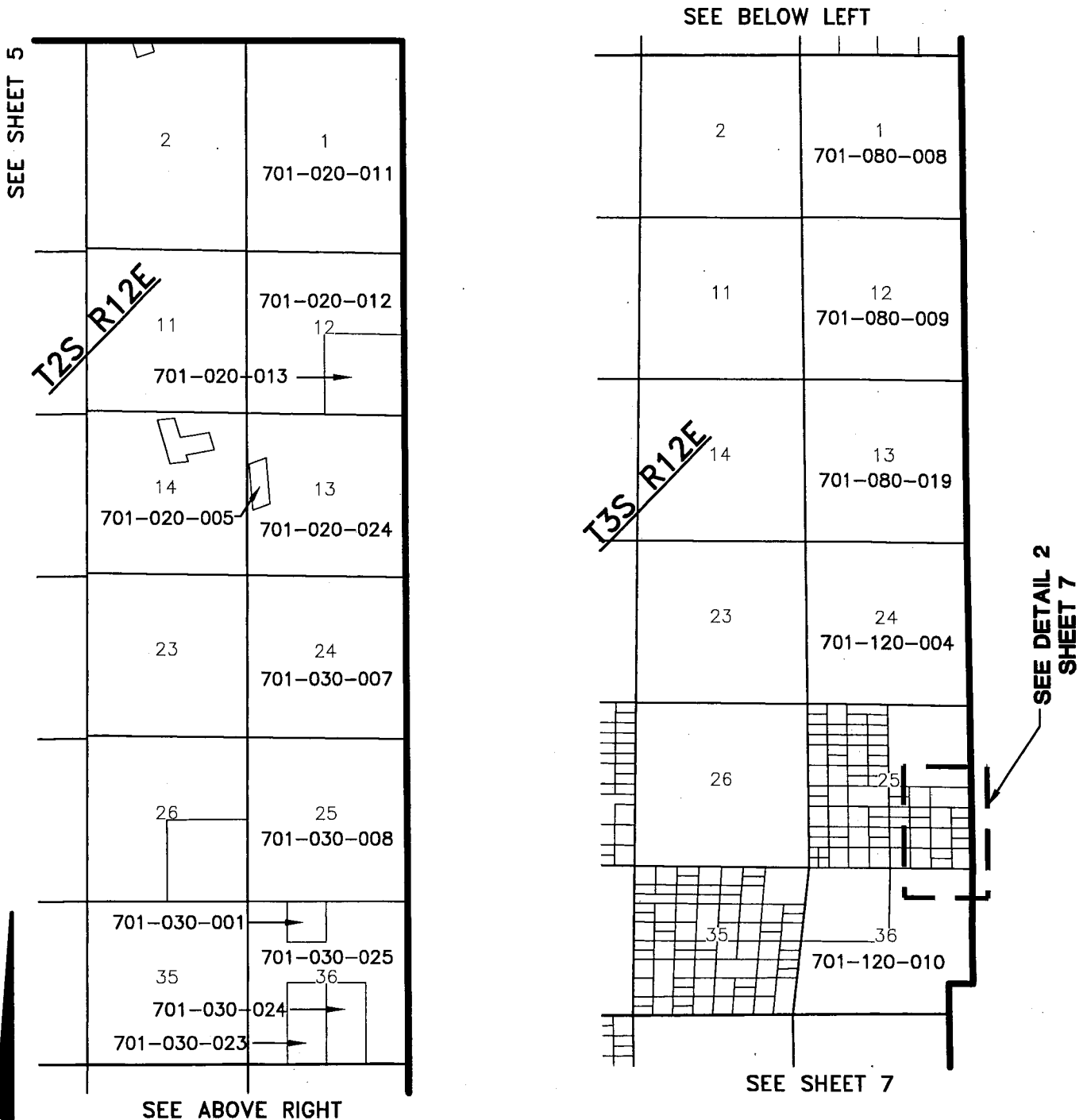
# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)



0' 5000' 10000'



SCALE 1"=5000'



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# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

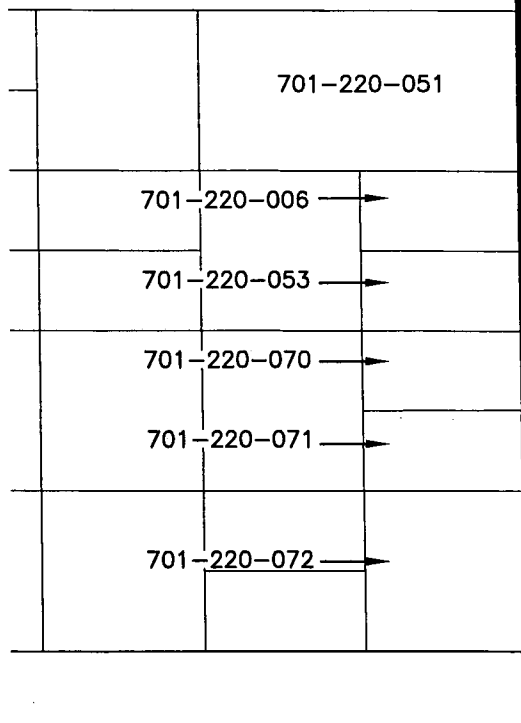
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ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

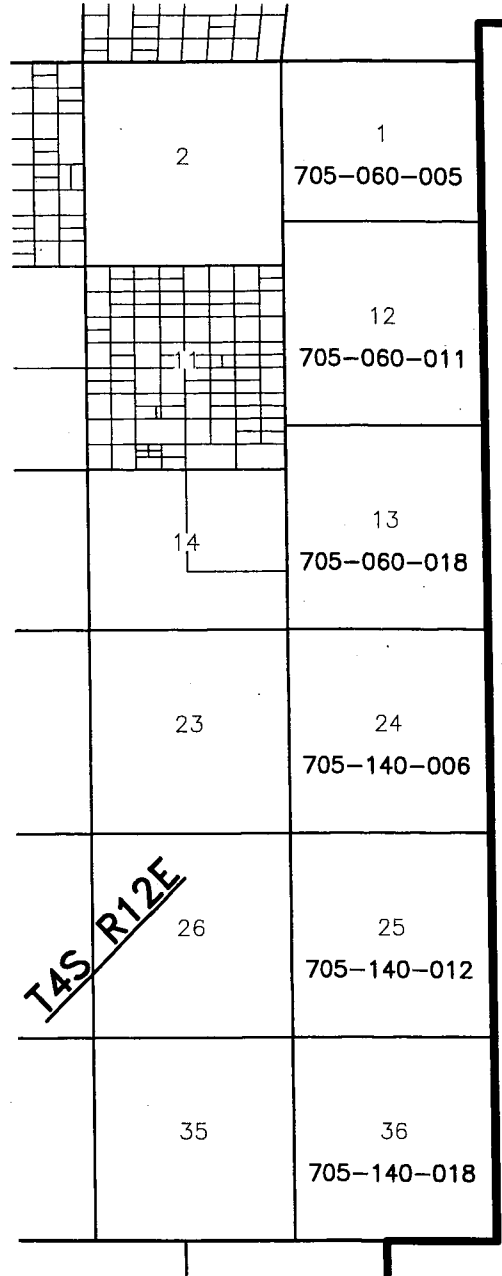
SEE SHEET 6

SEE SHEET 6

701-210-050



DETAIL 2  
1"=800'



SEE SHEET 8



0' 5000' 10000'



SCALE 1"=5000'



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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 7 OF 39

# EXHIBIT "A"

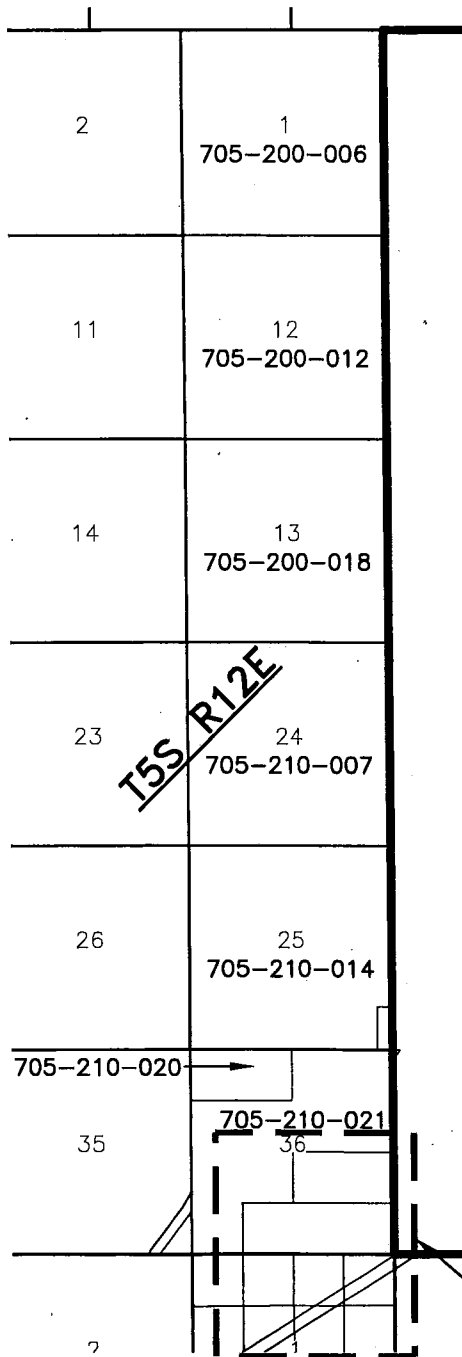
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SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

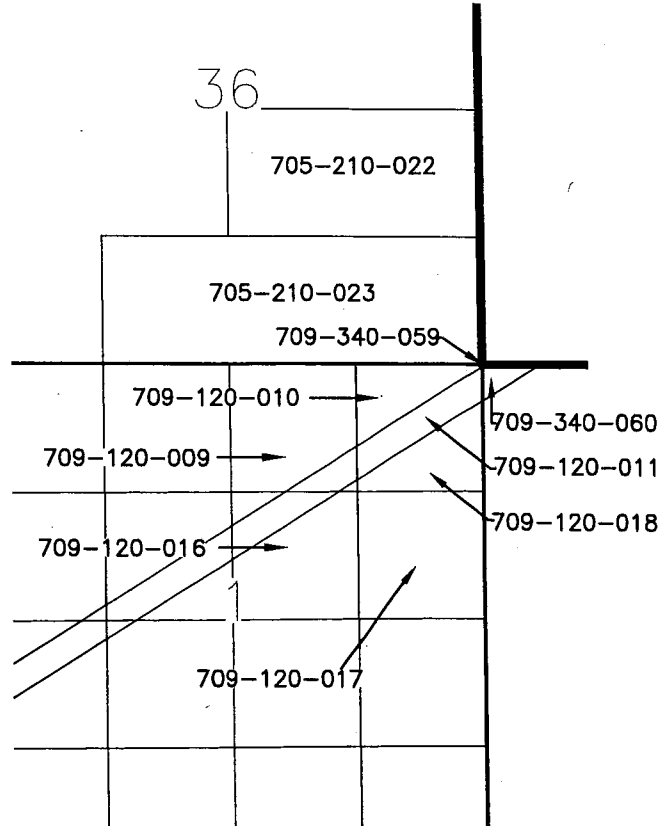
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE SHEET 7



SEE BELOW LEFT



**DETAIL 3**  
1"=2000'

SEE DETAIL 3  
UPPER RIGHT

SEE SHEET 9

0' 5000' 10000'

SCALE 1"=5000'



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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 8 OF 39



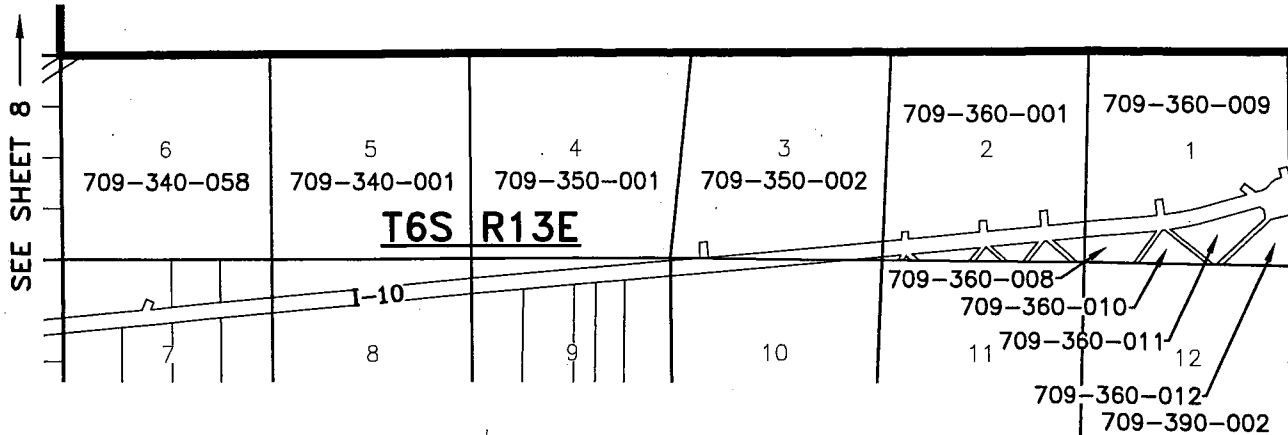
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LAFCO 2017-01-4

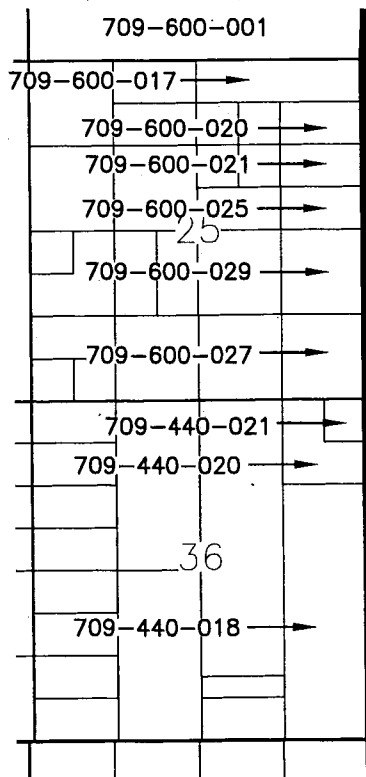
SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

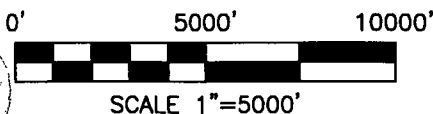
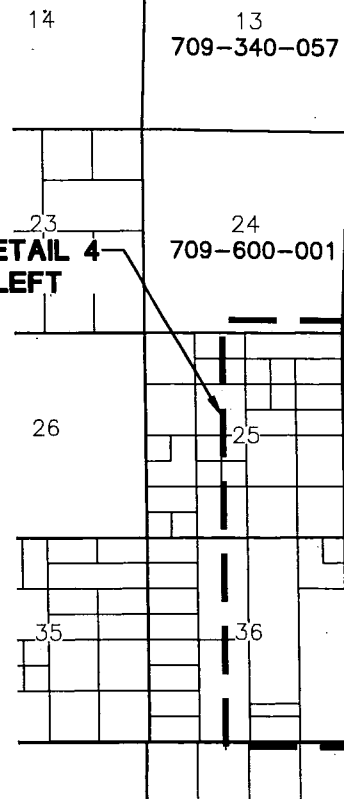


SEE BELOW RIGHT



**DETAIL 4**  
1"=3000'

SEE DETAIL 4  
AT LEFT



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 9 OF 39

# EXHIBIT "A"

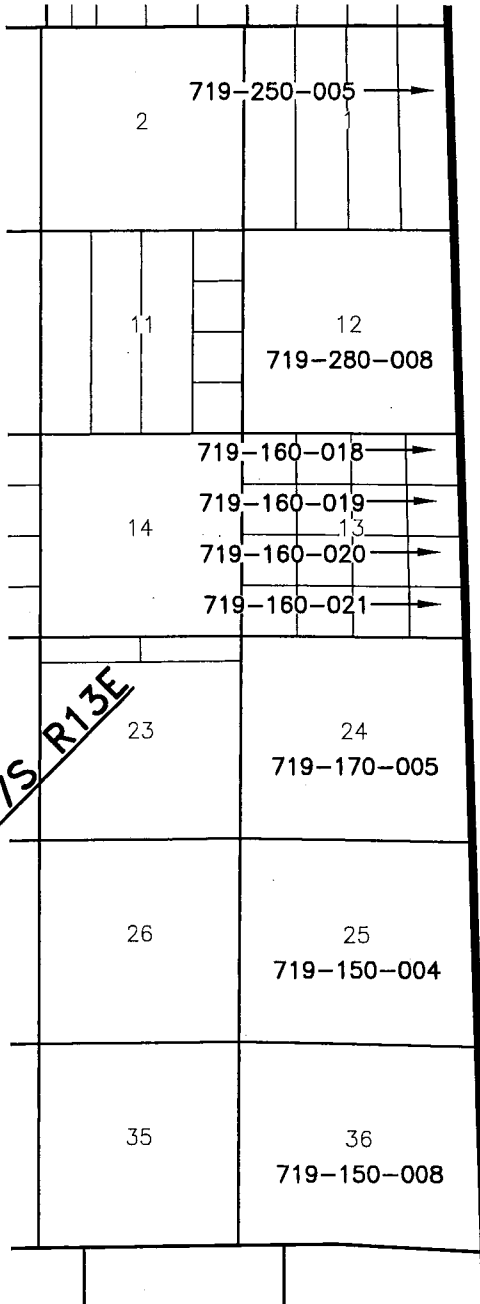
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

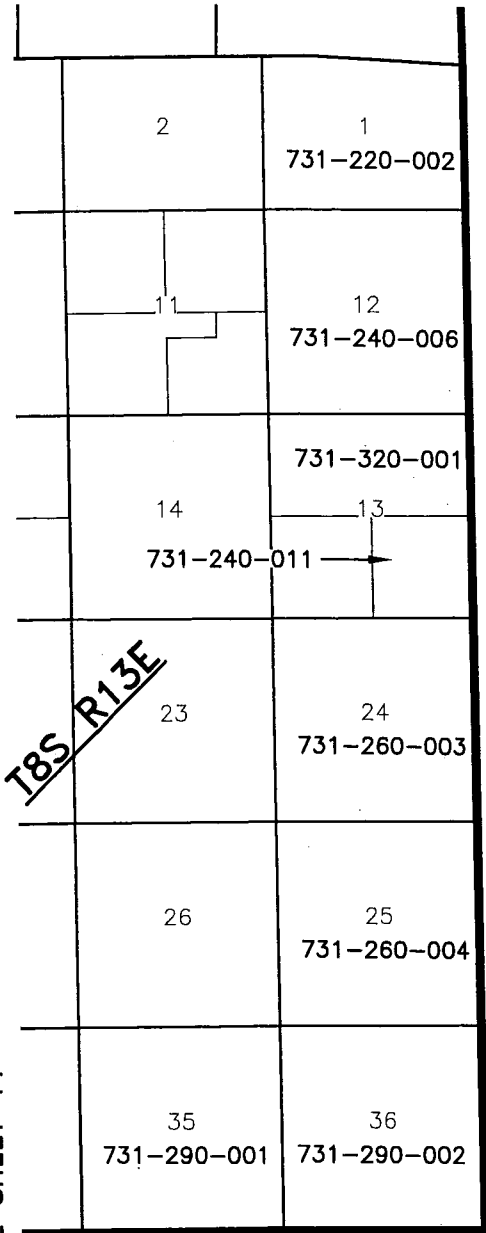
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE SHEET 9



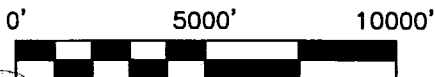
SEE BELOW LEFT



SEE SHEET 11

86TH AVE

SEE ABOVE RIGHT



SCALE 1"=5000'



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 10 OF 39

# EXHIBIT "A"

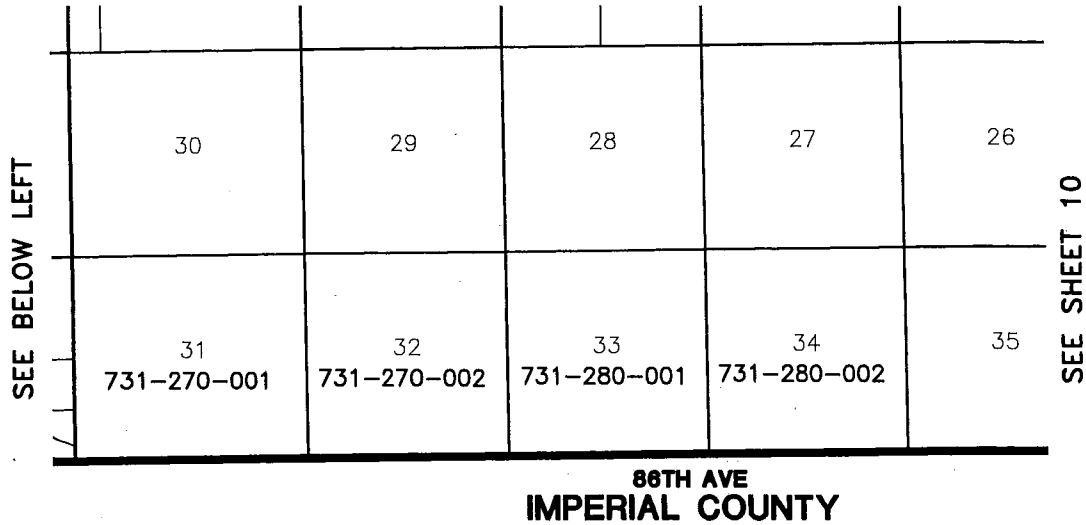
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SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

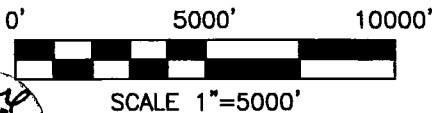
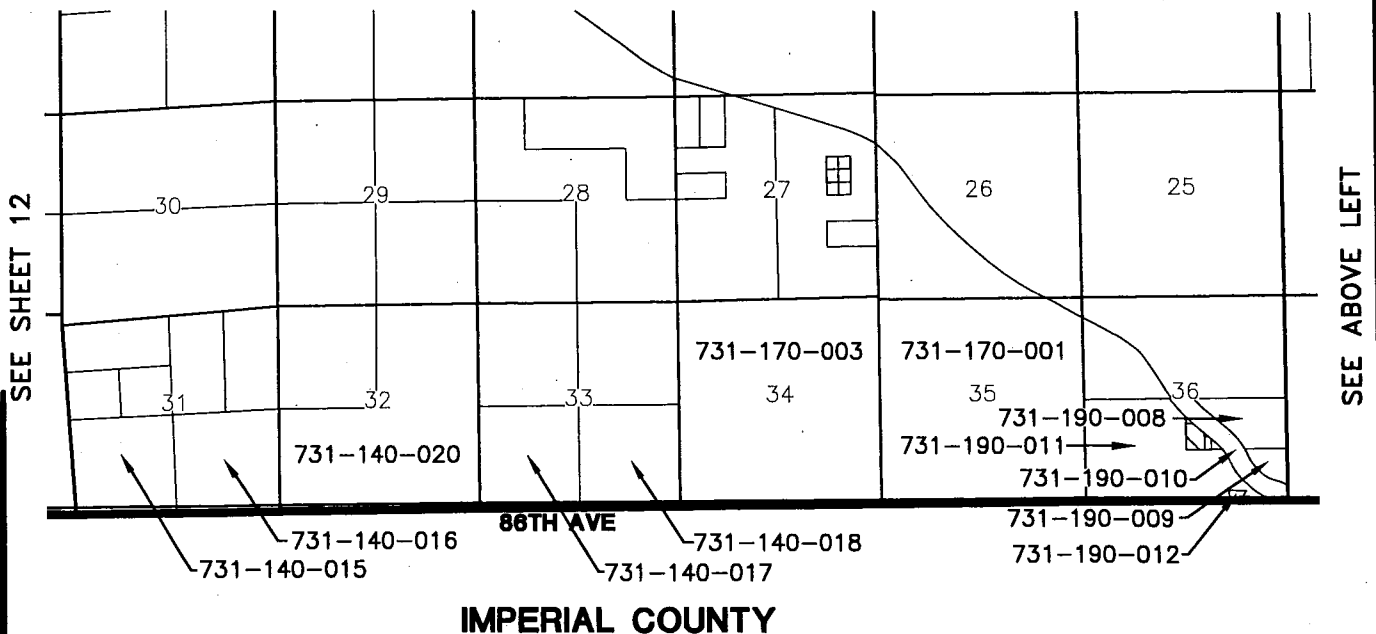
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

## T8S R13E



## T8S R12E



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**LAND SURVEYING**

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# EXHIBIT "A"

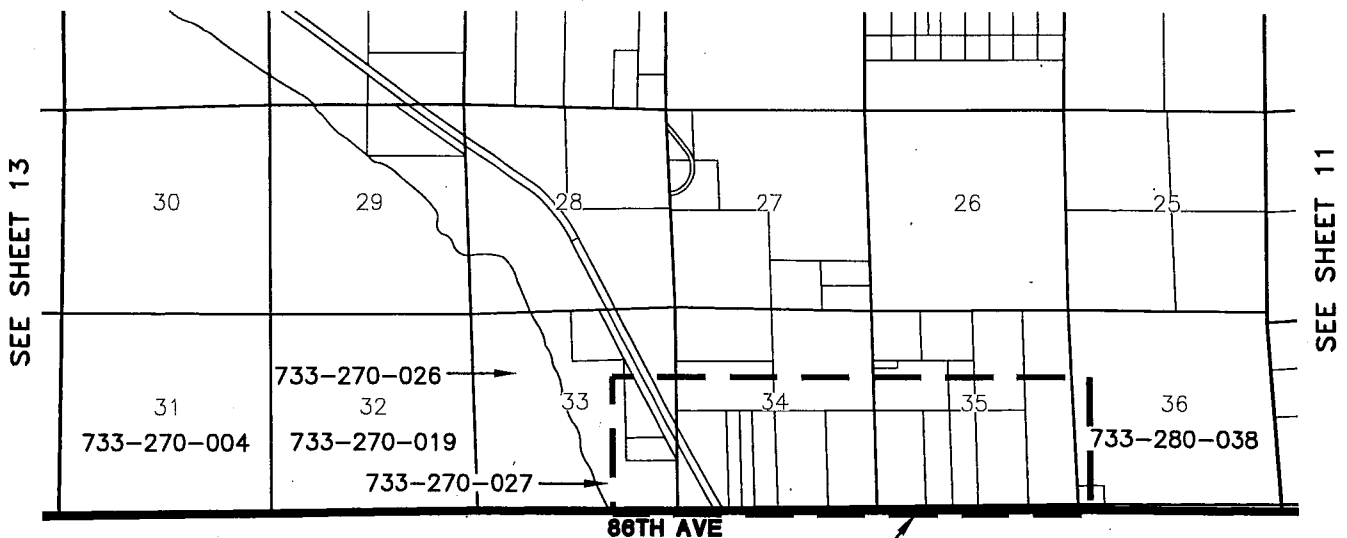
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

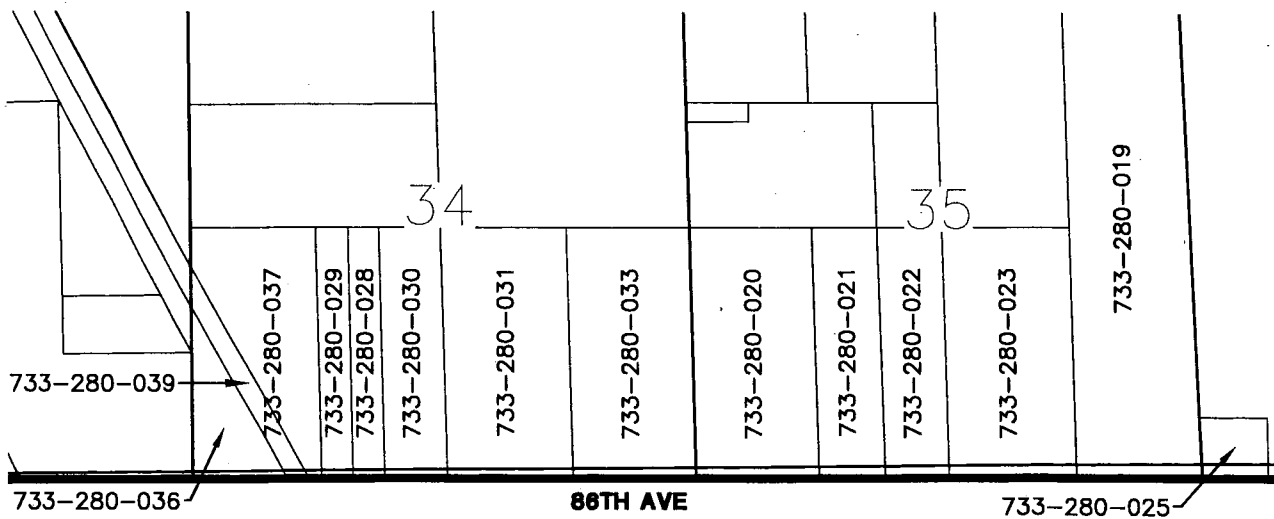
T8S R11E



0' 5000' 10000'  
SCALE 1"=5000'

SEE DETAIL 5  
BELOW  
IMPERIAL COUNTY

SEE ABOVE



IMPERIAL COUNTY

DETAIL 5  
1"=2000'



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 12 OF 39

# EXHIBIT "A"

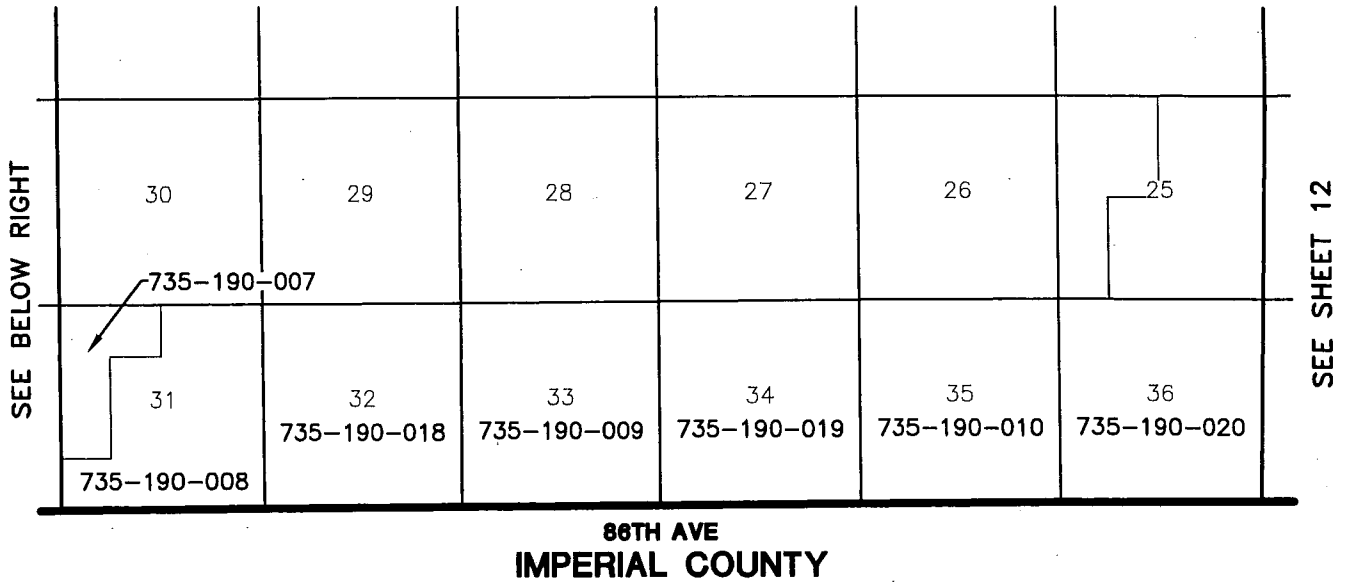
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SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

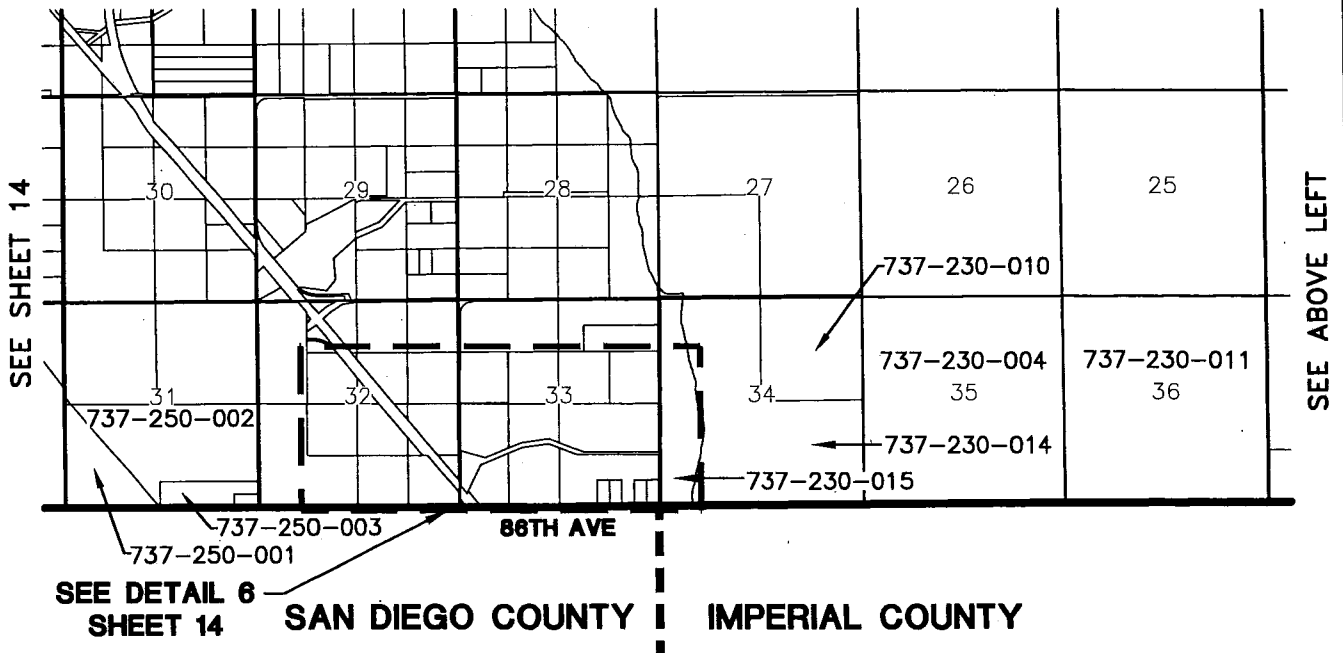
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

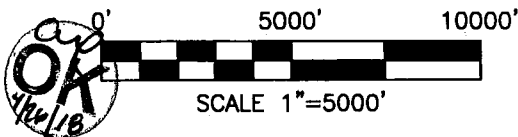
## T8S R10E



## T8S R9E



SEE DETAIL 6  
SHEET 14



MSA CONSULTING, INC.  
PLANNING • CIVIL ENGINEERING

LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 13 OF 39

# EXHIBIT "A"

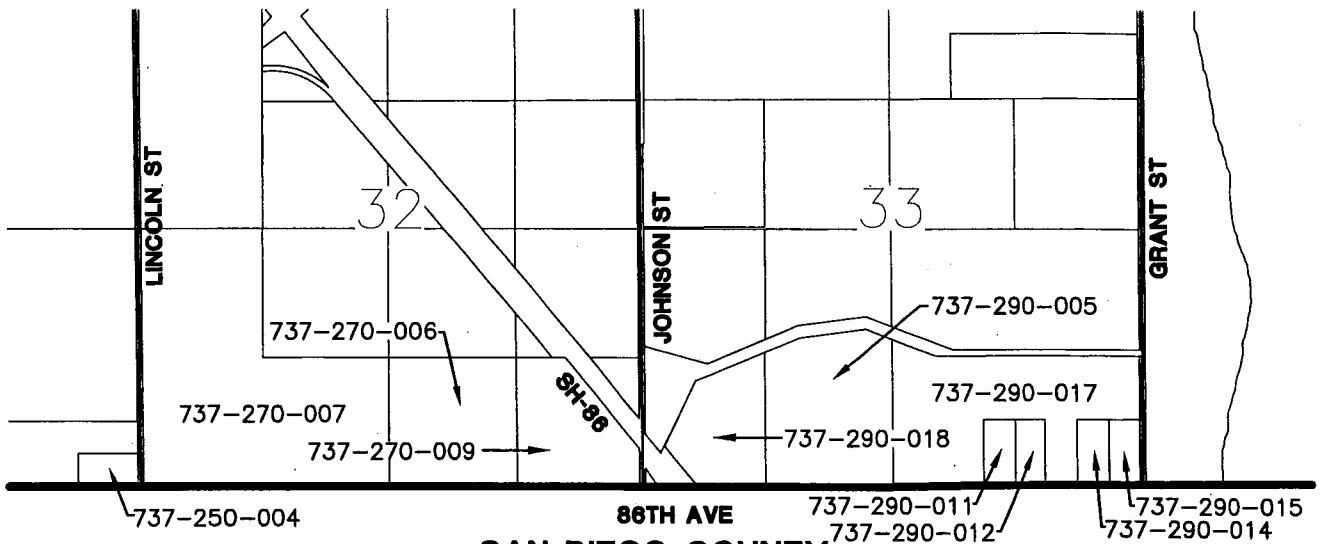
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

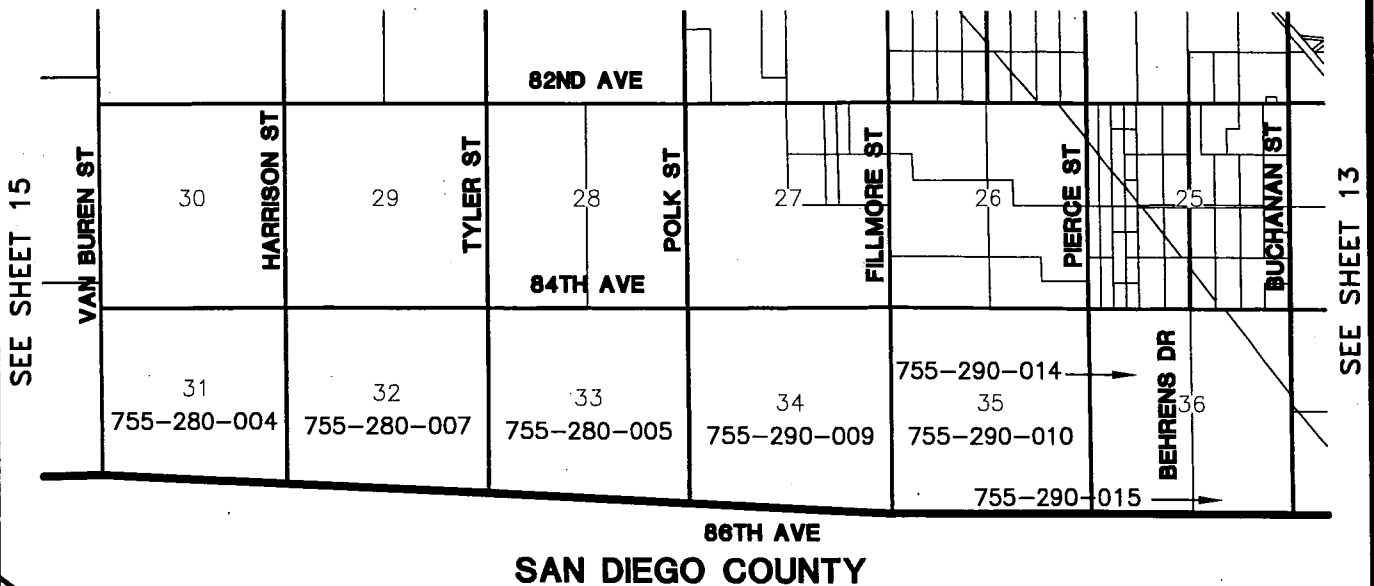
ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE SHEET 13



DETAIL 6  
1"=2000'

T8S R8E



SEE SHEET 15

SEE SHEET 13



0' 5000' 10000'

SCALE 1"=5000'



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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 14 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

## T8S R7E

SEE BELOW RIGHT	30				28	27	26	25	SEE SHEET 14
	31 755-050-015	32 755-050-024			33 755-050-016	34 755-050-025	35 755-050-017	36 755-050-026	

86TH AVE  
SAN DIEGO COUNTY

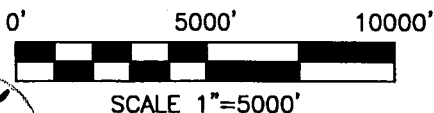
## T8S R6E

SEE SHEET 16

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31 755-030-008	32 755-030-021	33 755-030-009	34 755-030-022	35 755-030-010	36 755-030-023	

SEE ABOVE LEFT

SAN DIEGO COUNTY



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 15 OF 39

# EXHIBIT 'A'

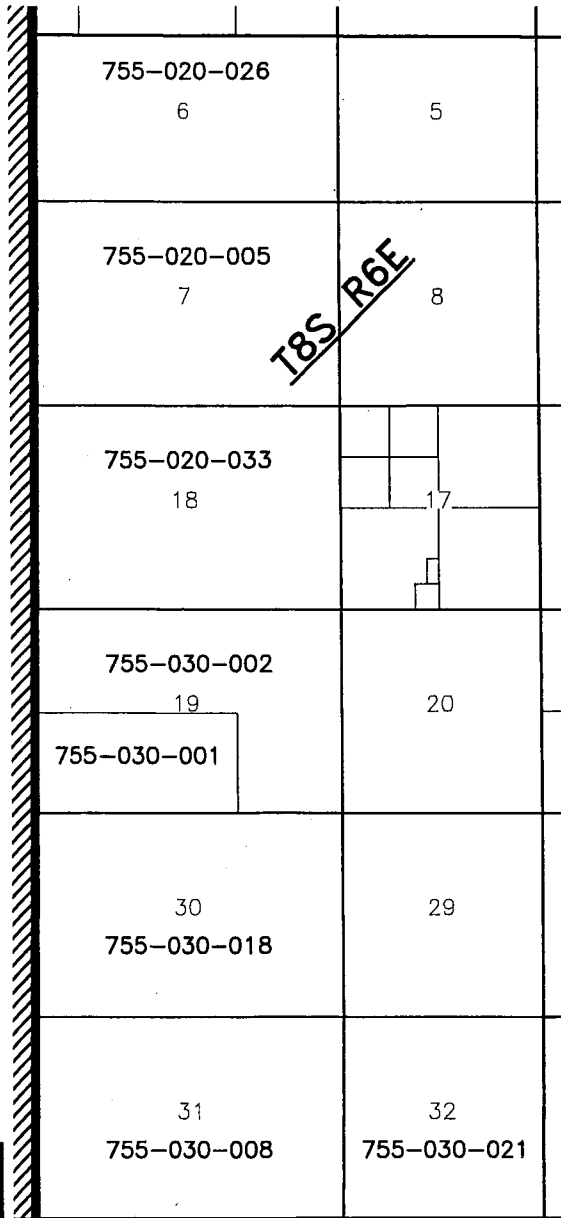
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

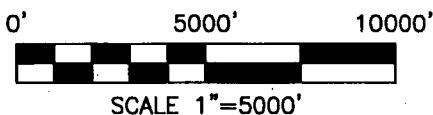
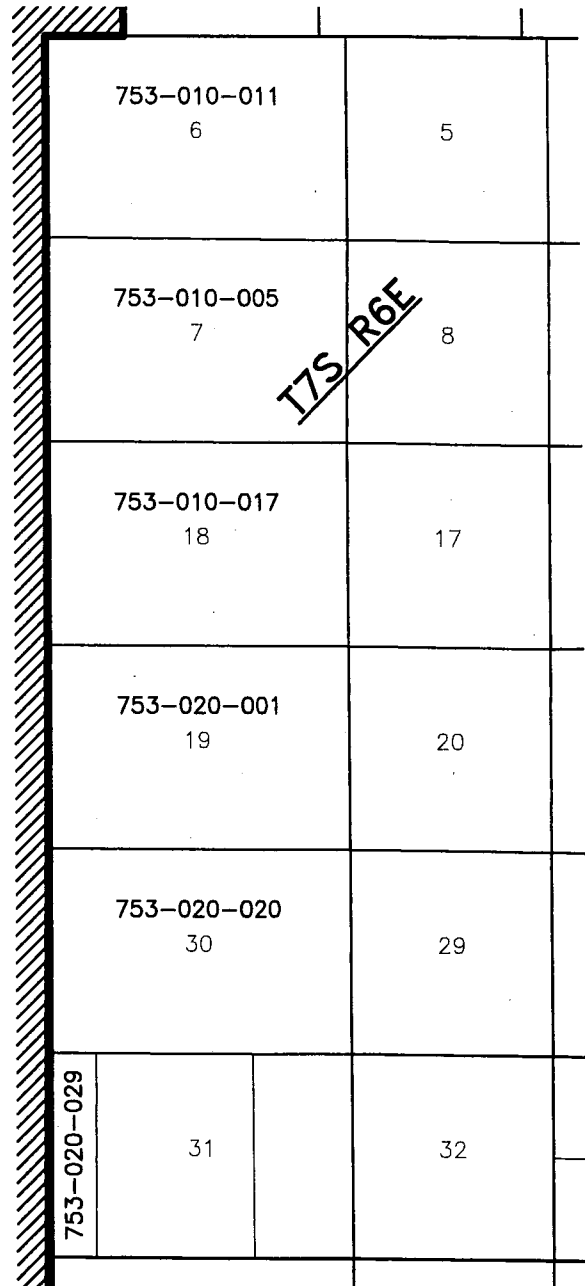
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE BELOW RIGHT



SEE SHEET 17



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J.N. 2354 3/23/2017 SHEET 16 OF 39



# EXHIBIT "A"

LAFCO 2017-01-4

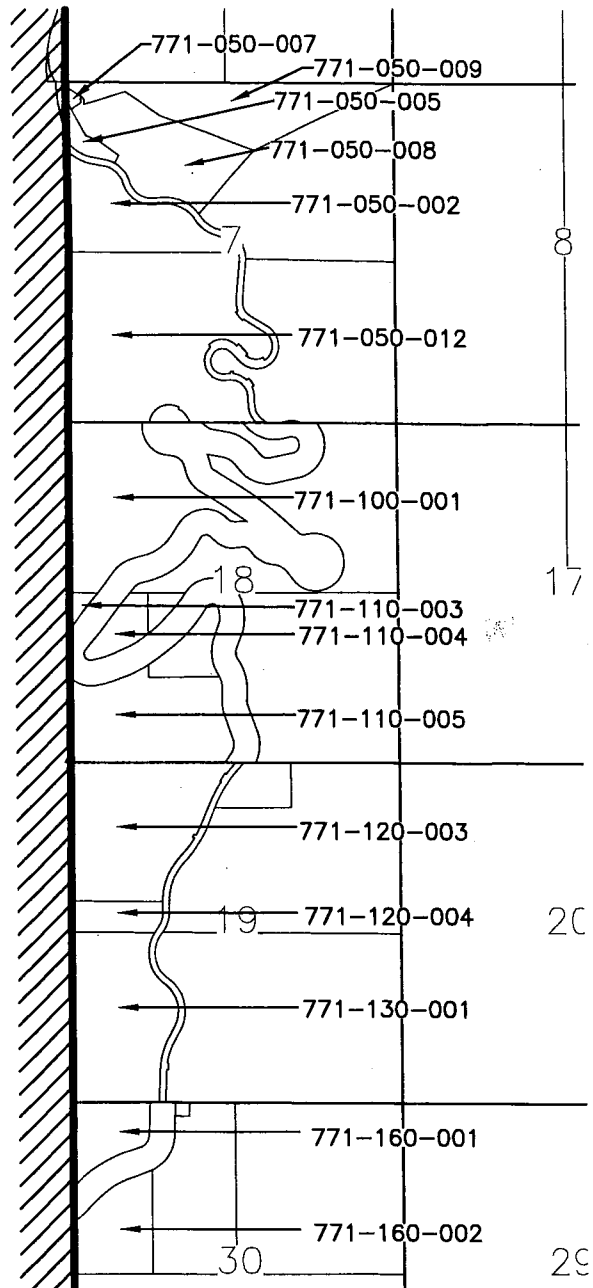
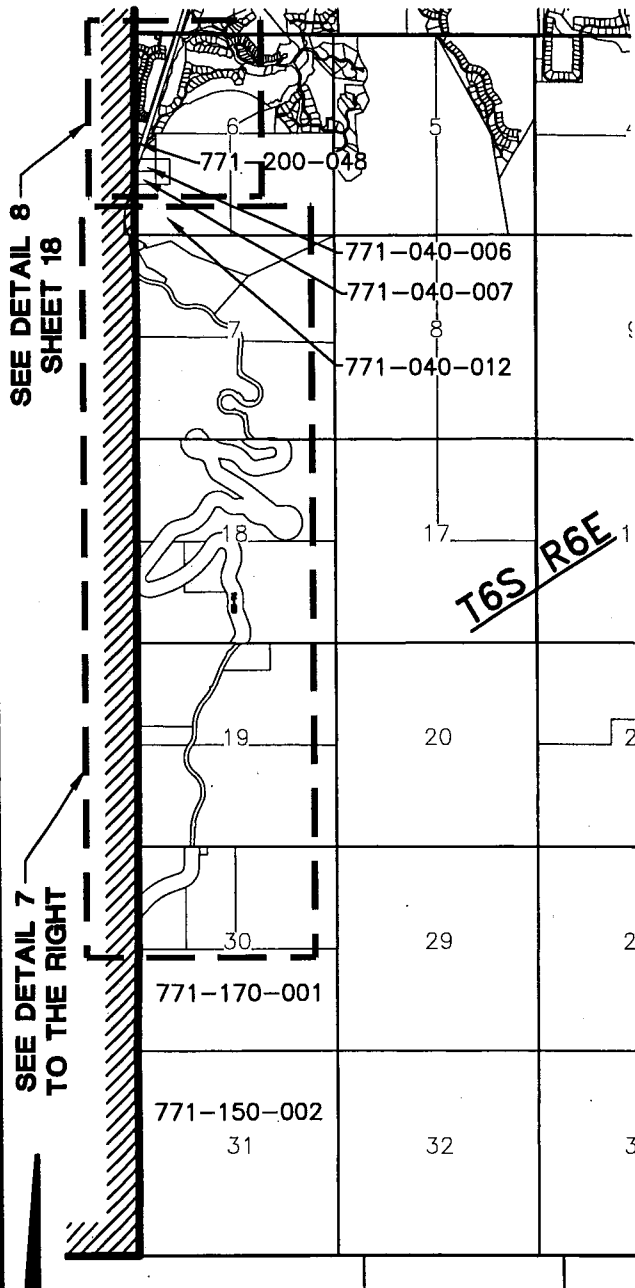
SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

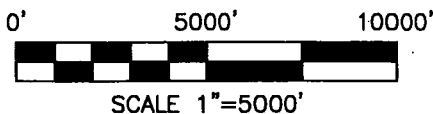
SEE SHEET 19

SEE LEFT



SEE SHEET 16

DETAIL 7  
1"=3000'



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PLANNING ■ CIVIL ENGINEERING

LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 17 OF 39

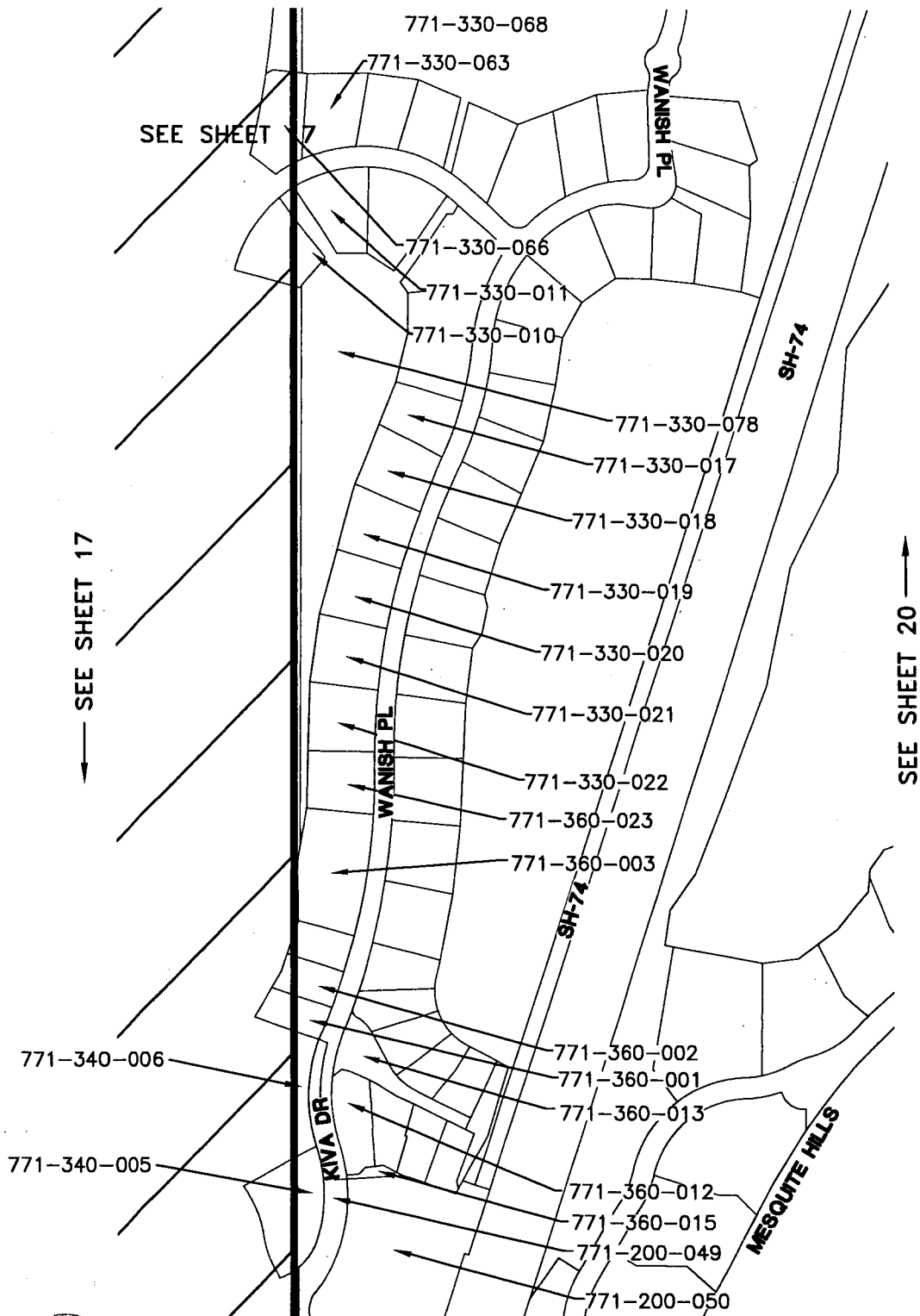
# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)



DETAIL 8  
1"=300'



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 18 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

**SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)**

LAFCO 2017-02-4

## ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

T5S R6E

**SEE DETAIL 38**  
**SHEET 34**

**SEE DETAIL 36  
SHEET 33**

**SEE DETAIL 37-  
SHEET 34**

**SEE DETAIL 34  
SHEET 32**

**SEE DETAIL 35  
SHEET 33**

**SEE DETAIL 32-  
SHEET 31**

**SEE DETAIL 31**  
**SHEET 31**

**SEE DETAIL 30  
SHEET 30**

**SEE DETAIL 29  
SHEET 30**

**SEE DETAIL 27-  
SHEET 29**

**SEE DETAIL 28**  
**SHEET 29**

**SEE DETAIL 26  
SHEET 28**

**SEE DETAIL 24  
SHEET 27**

**SEE DETAIL 22  
SHEET 26**

**SEE DETAIL 20**  
**SHEET 25**

SEE SHEET 17

**-SEE DETAIL 11  
SHEET 21**

**SEE DETAIL 12  
SHEET 21**

**SEE DETAIL 14  
5 SHEET 22**

SEE DETAIL 16  
17 SHEET 23

SEE  
SI

SEE  
SI

**SEE**  
**S**

**SEE DETAIL 21-  
SHEET 26**

33

**SEE DETAIL 13**  
**SHEET 22**

**SEE DETAIL 9  
SHEET 20**

**SEE DETAIL 10  
SHEET 20**

**SEE DETAIL 19  
SHEET 25**

**SEE DETAIL 18  
SHEET 24**

0' 5000' 10000'

SCALE 1"=5000'



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**PLANNING ■ CIVIL ENGINEERING**

## LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 19 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

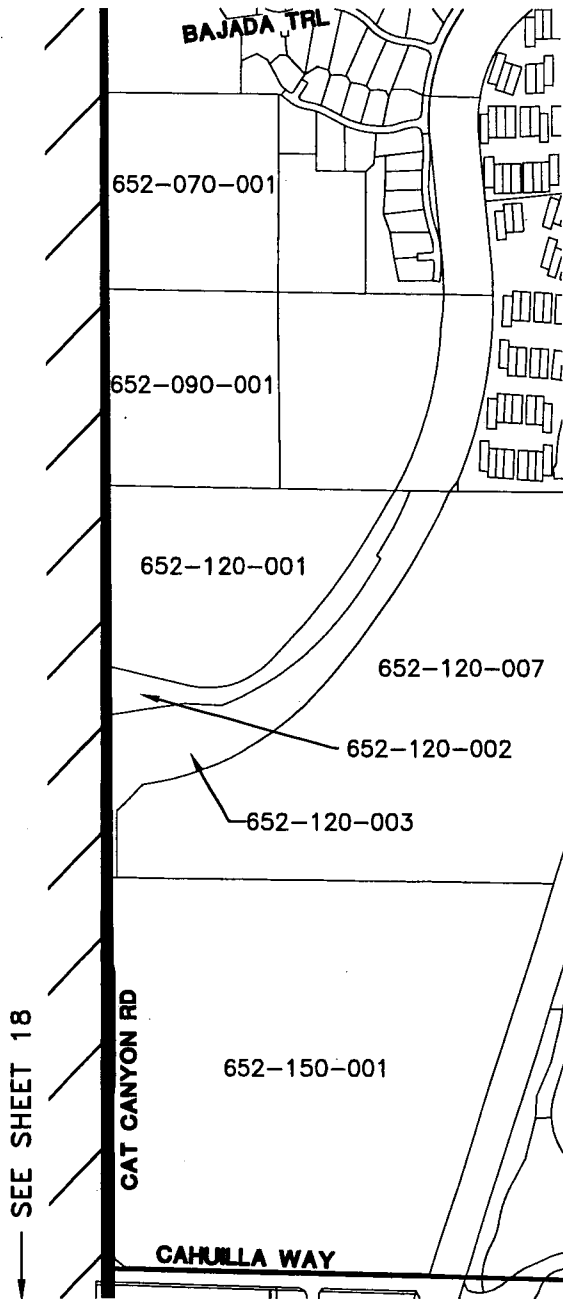
SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

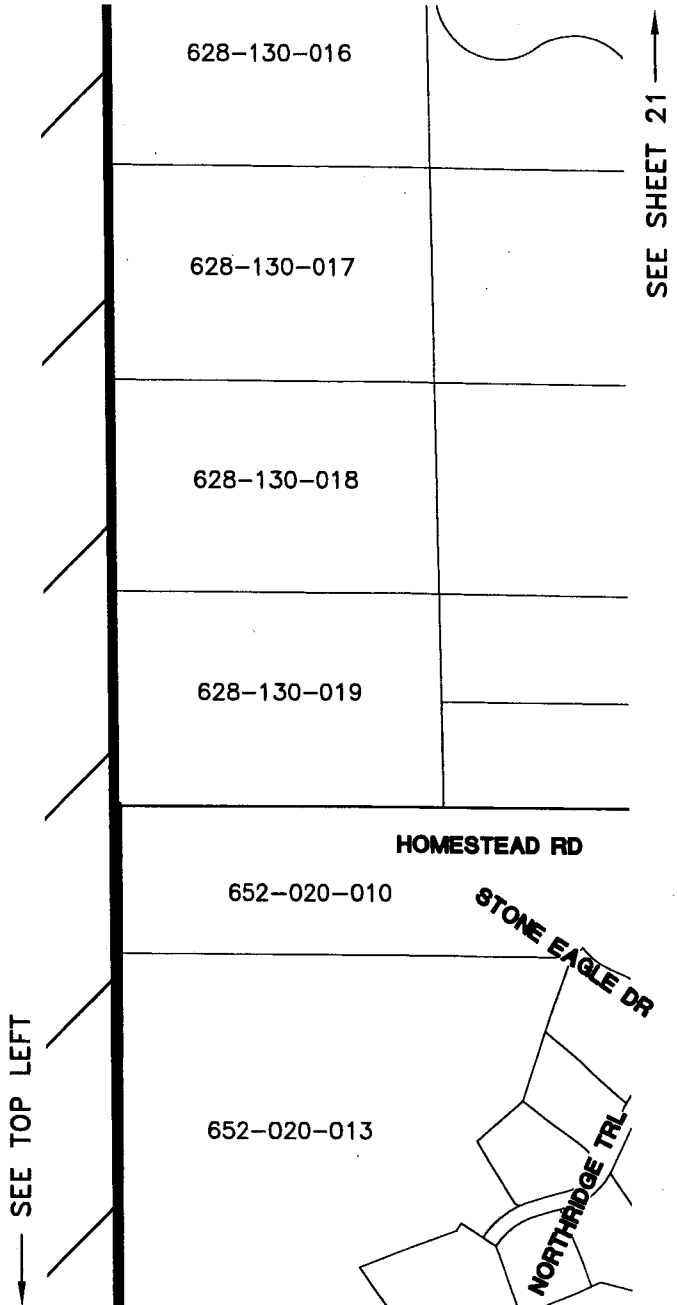
ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19

SEE BELOW RIGHT



DETAIL 9  
1"=650'



DETAIL 10  
1"=300'

SEE SHEET 21

SEE TOP LEFT

SEE SHEET 18



**MSA CONSULTING, INC.**  
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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 20 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

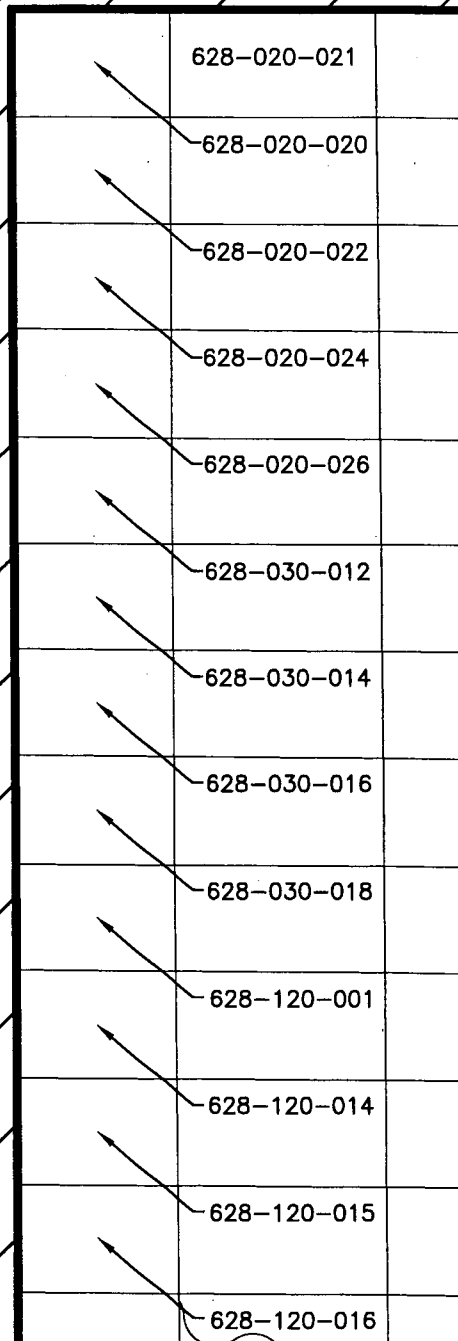
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

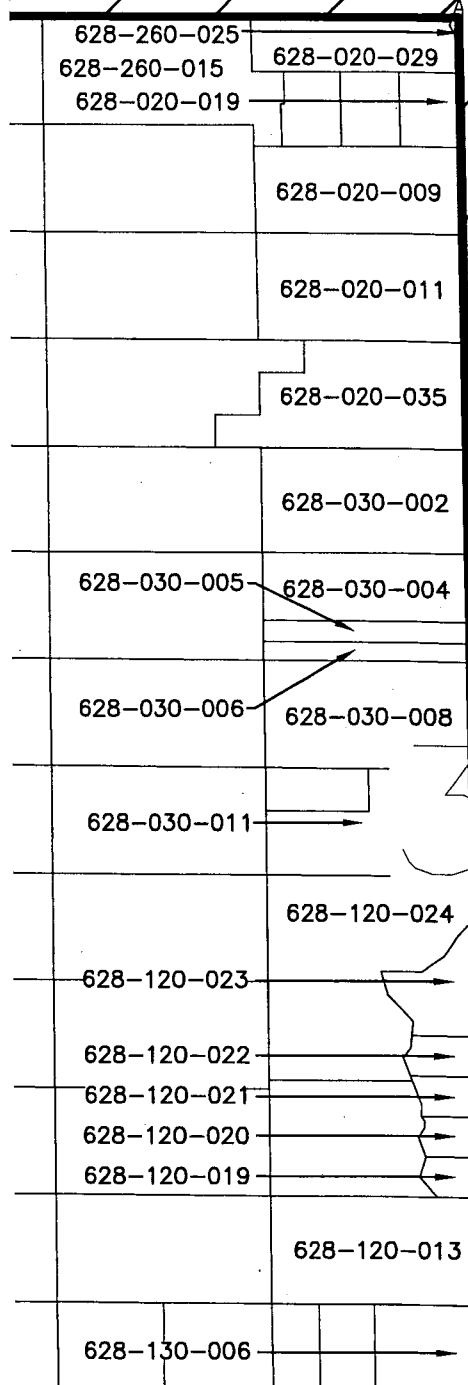
SEE INDEX T5S R6E SHEET 19

SEE TOP RIGHT

SEE TOP LEFT



DETAIL 11  
1"=600'



DETAIL 12  
1"=600'

SEE SHEET 20

SEE SHEET 22



**MSA CONSULTING, INC.**  
PLANNING • CIVIL ENGINEERING

**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 21 OF 39

# EXHIBIT "A"

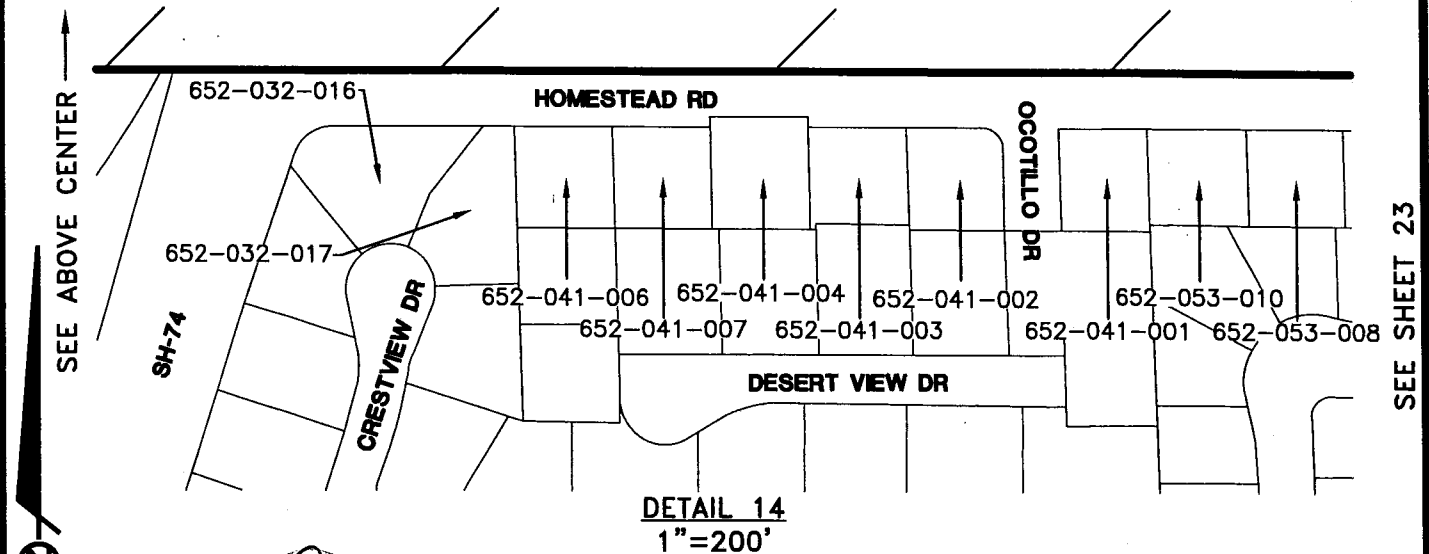
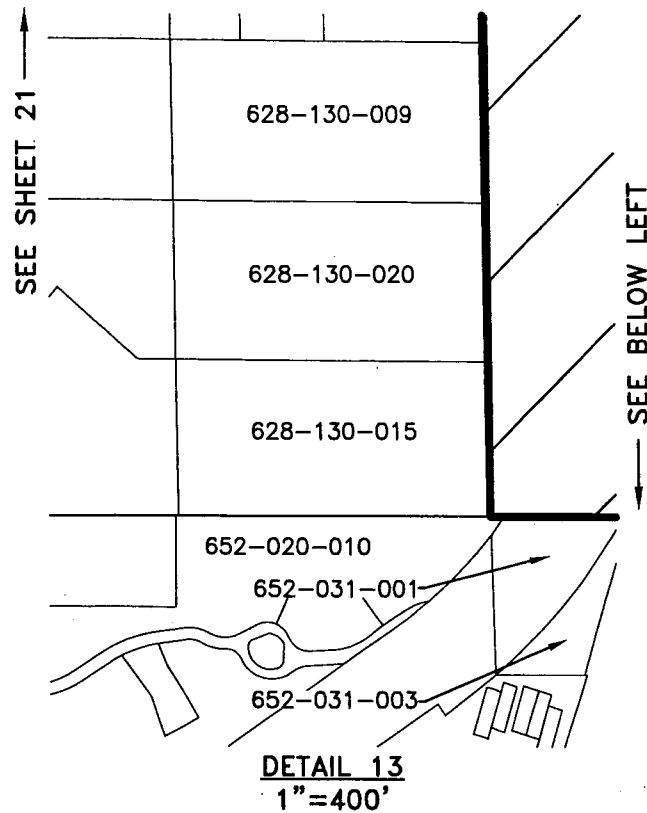
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19



MSA CONSULTING, INC.  
PLANNING ■ CIVIL ENGINEERING

LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 22 OF 39

# EXHIBIT "A"

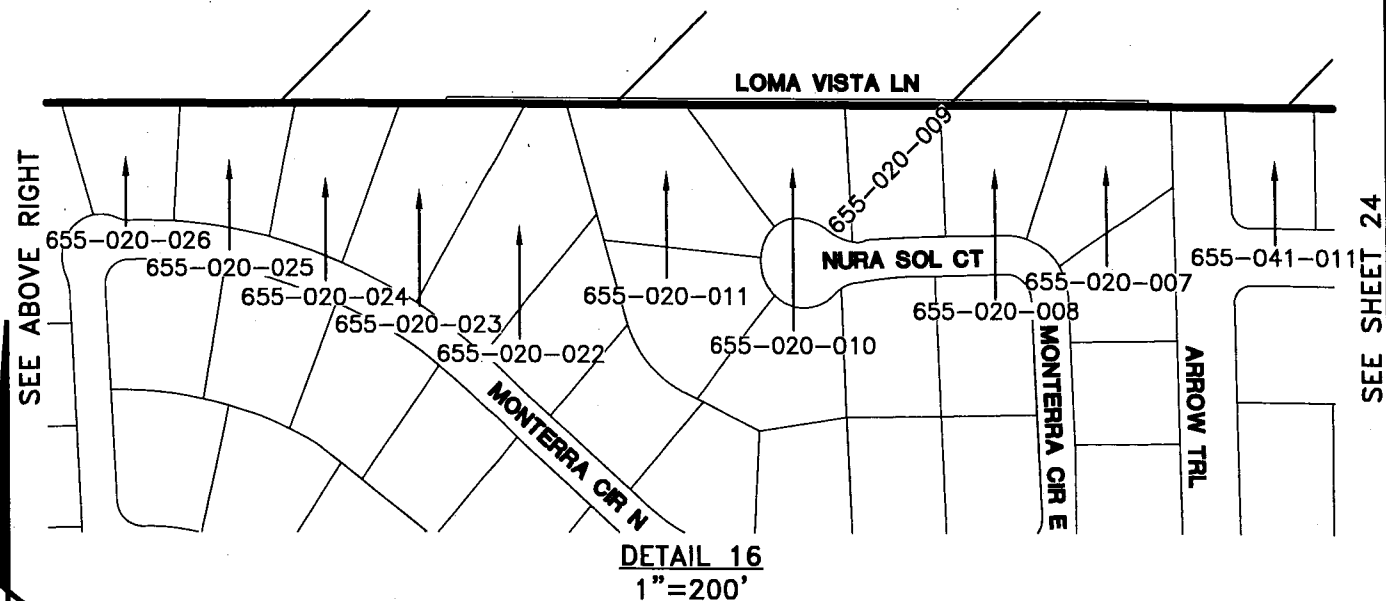
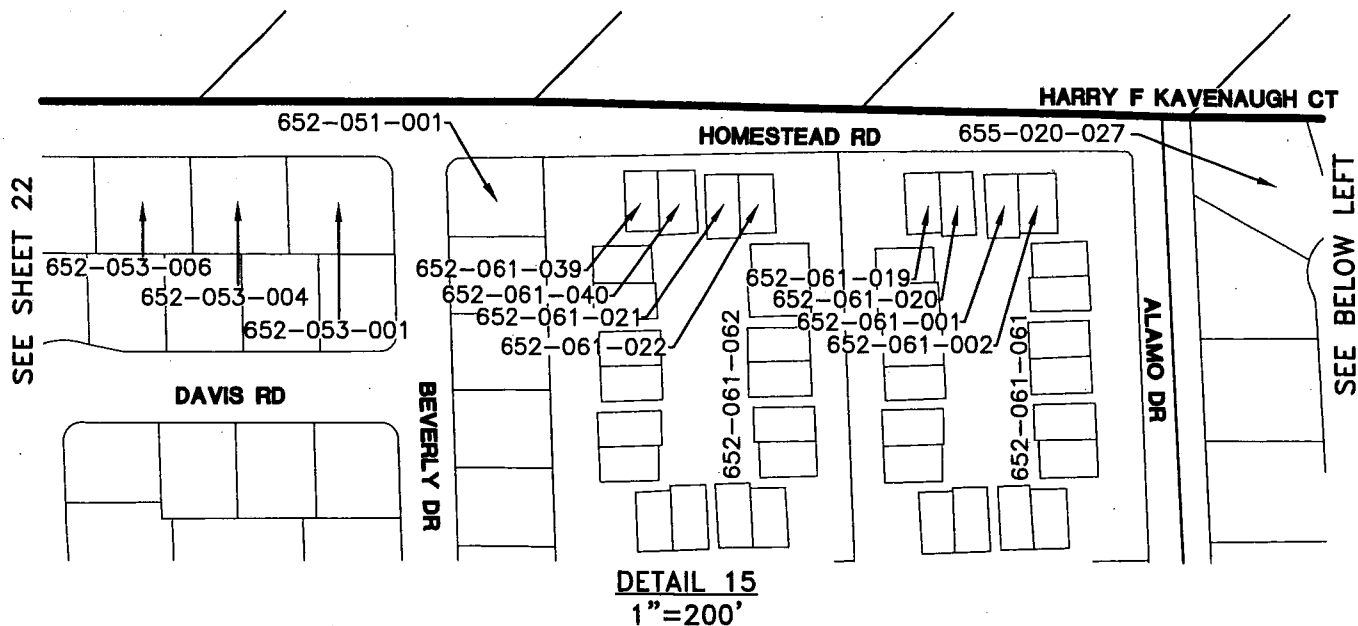
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19



MSA CONSULTING, INC.  
PLANNING ■ CIVIL ENGINEERING

LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 23 OF 39

# EXHIBIT "A"

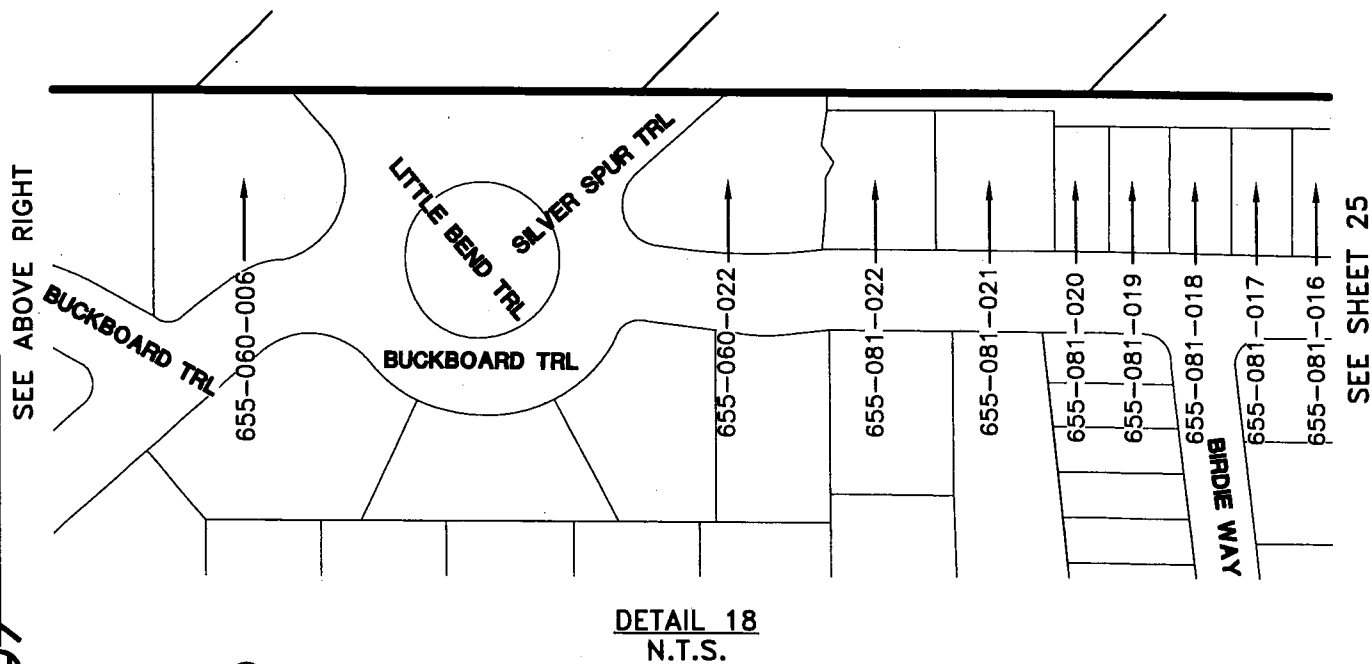
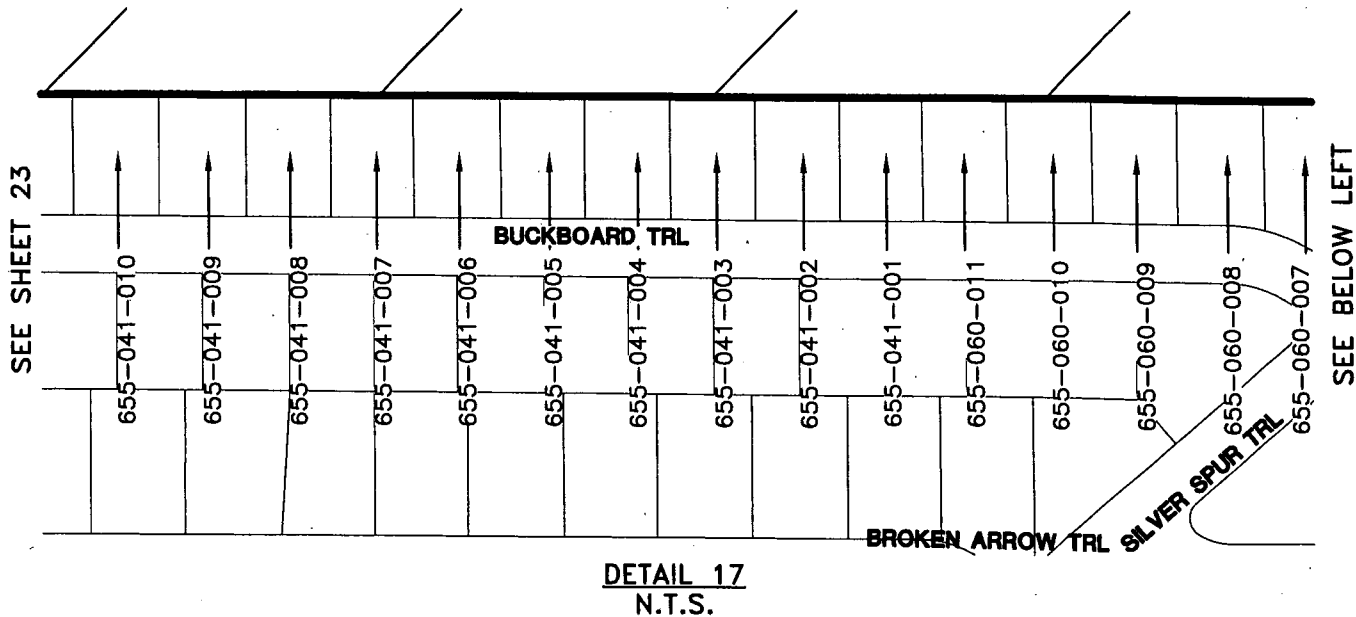
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19



MSA CONSULTING, INC.  
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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 24 OF 39



# EXHIBIT "A"

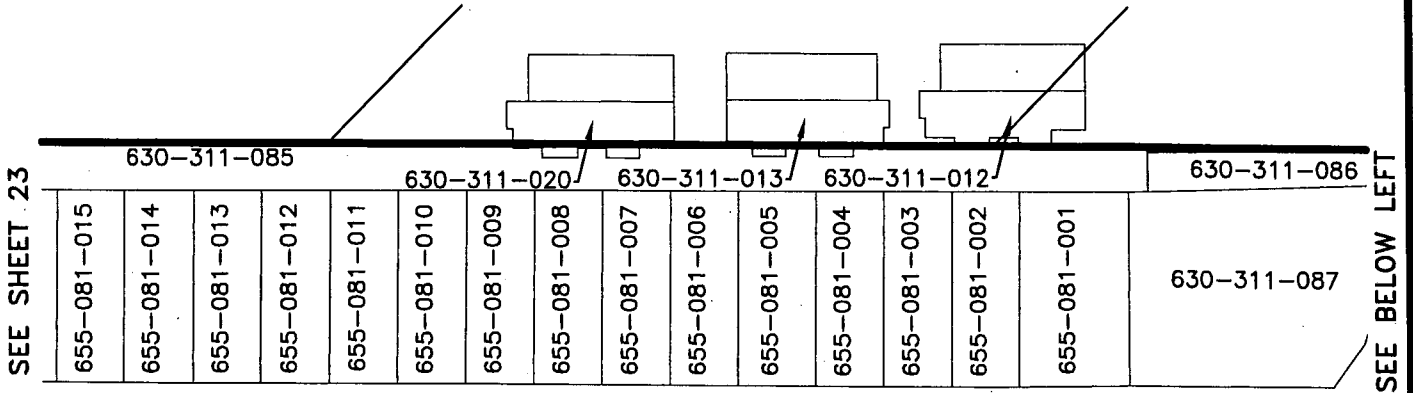
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

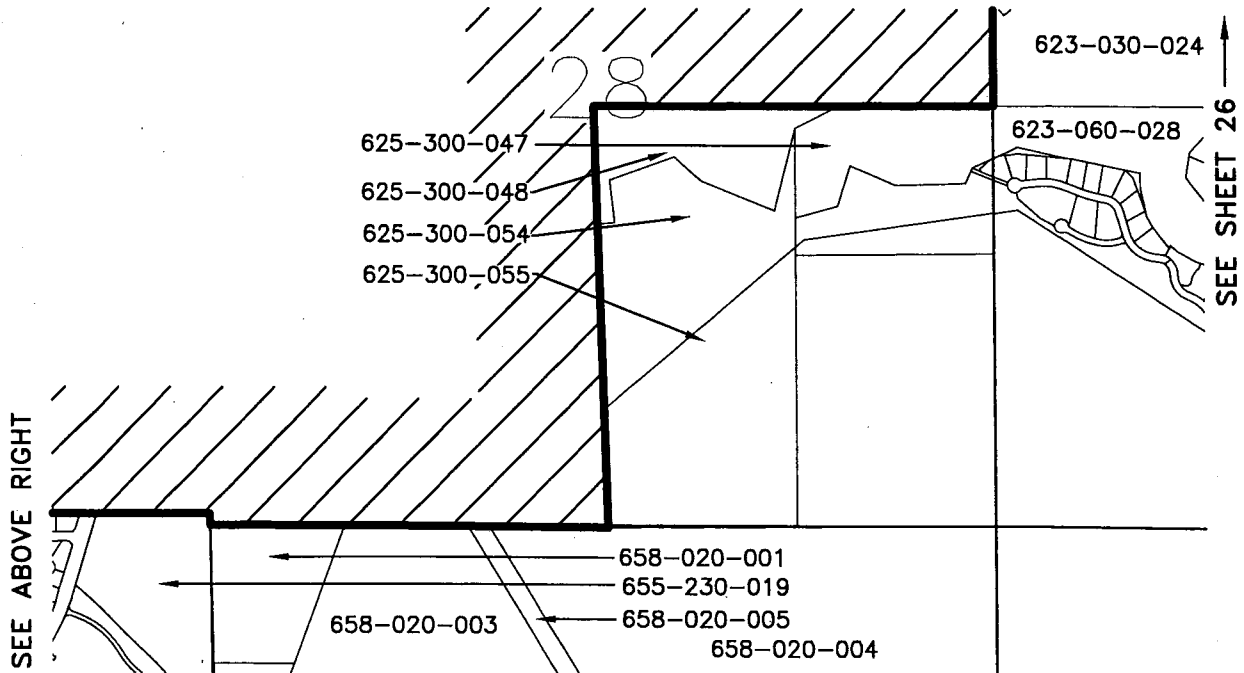
ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19



BUCKBOARD TRL

DETAIL 19  
N.T.S.



DETAIL 20  
N.T.S.



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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 25 OF 39

# EXHIBIT "A"

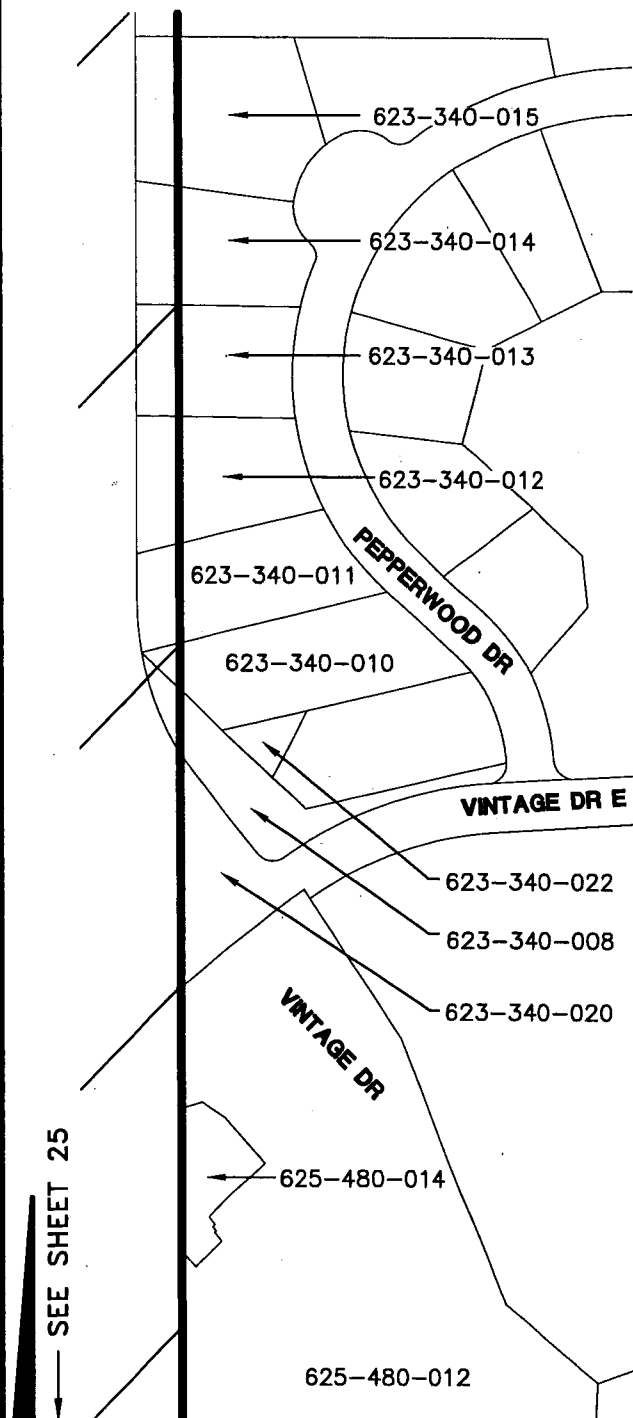
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

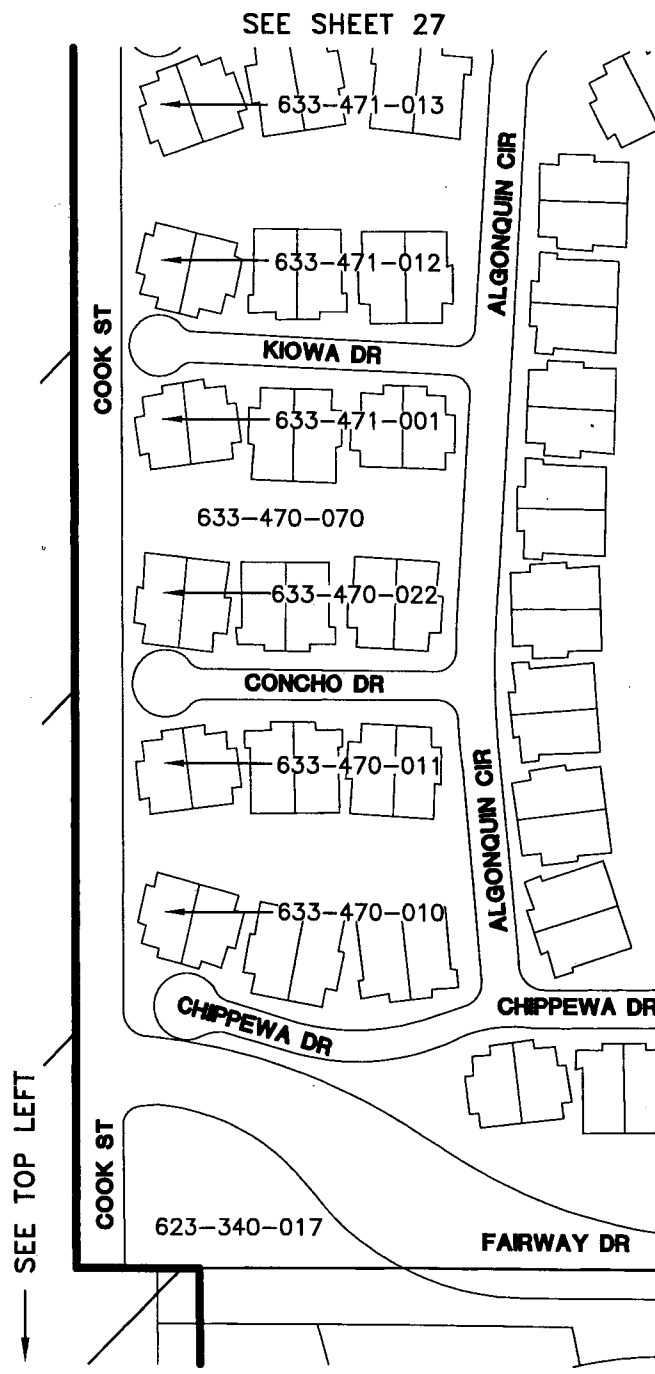
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE BELOW RIGHT SEE INDEX T5S R6E SHEET 19



DETAIL 21  
1"=200'



DETAIL 22  
1"=200'



MSA CONSULTING, INC.  
PLANNING ■ CIVIL ENGINEERING

LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 26 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

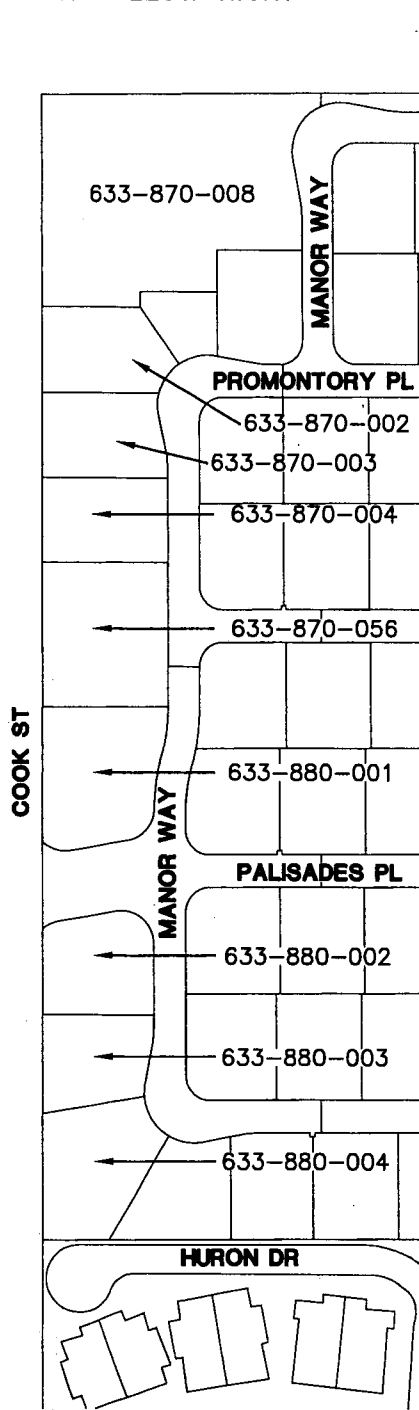
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

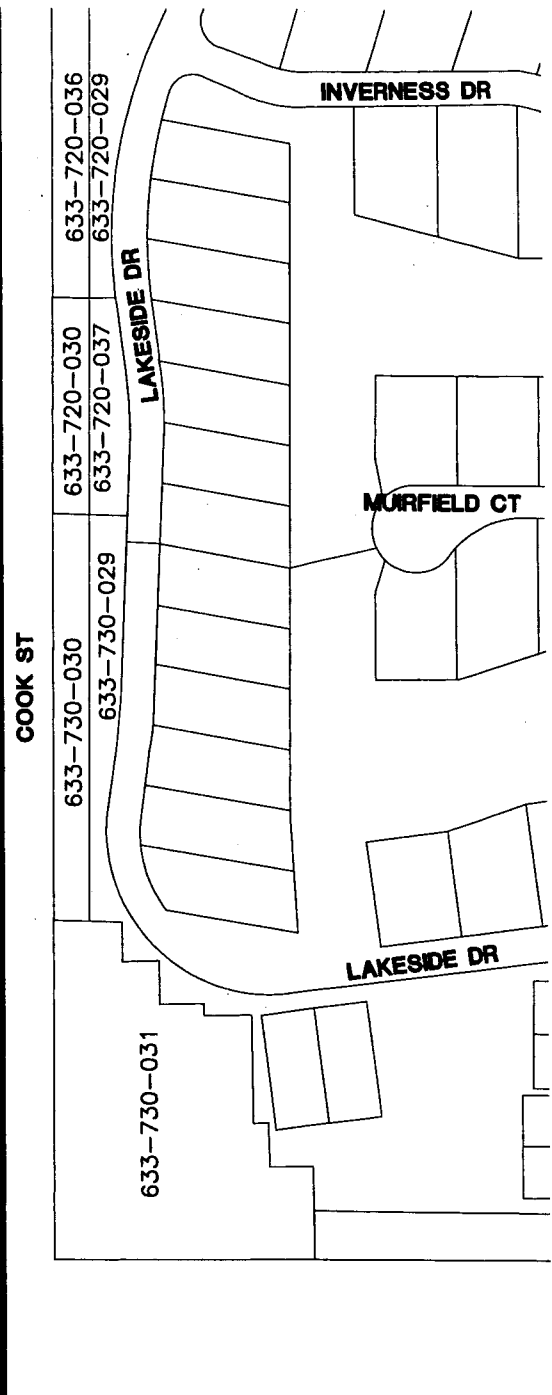
SEE INDEX T5S R6E SHEET 19

SEE BELOW RIGHT

SEE SHEET 28



DETAIL 23  
1"=200'



DETAIL 24  
1"=200'



**MSA CONSULTING, INC.**  
**PLANNING ■ CIVIL ENGINEERING**

**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 27 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

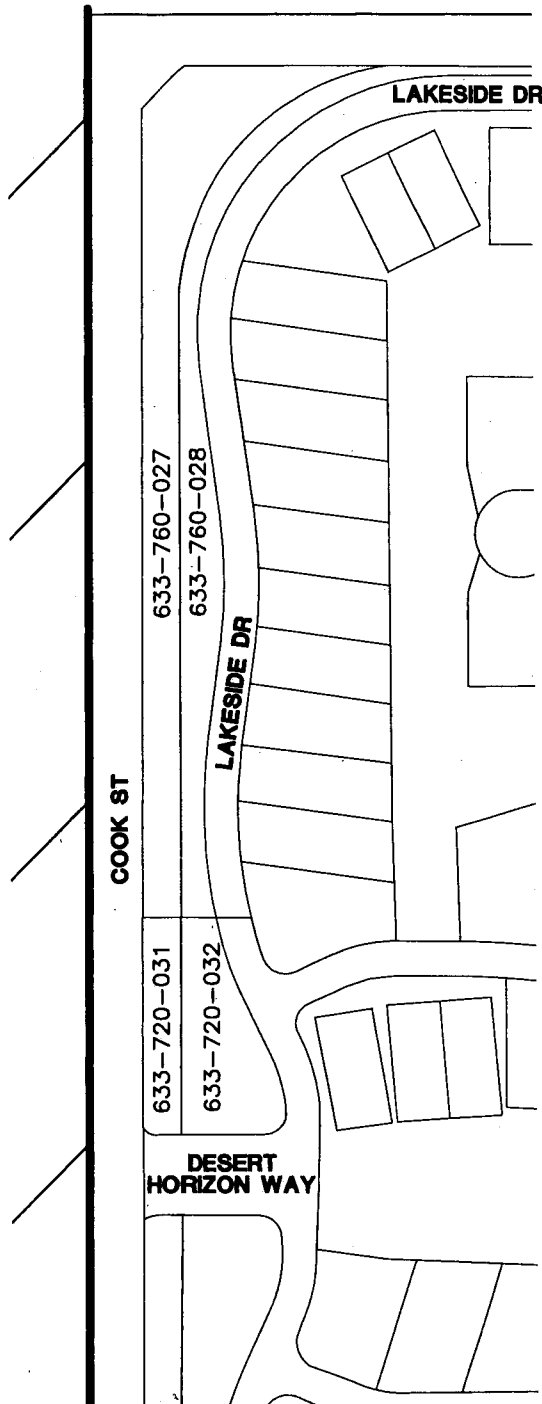
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

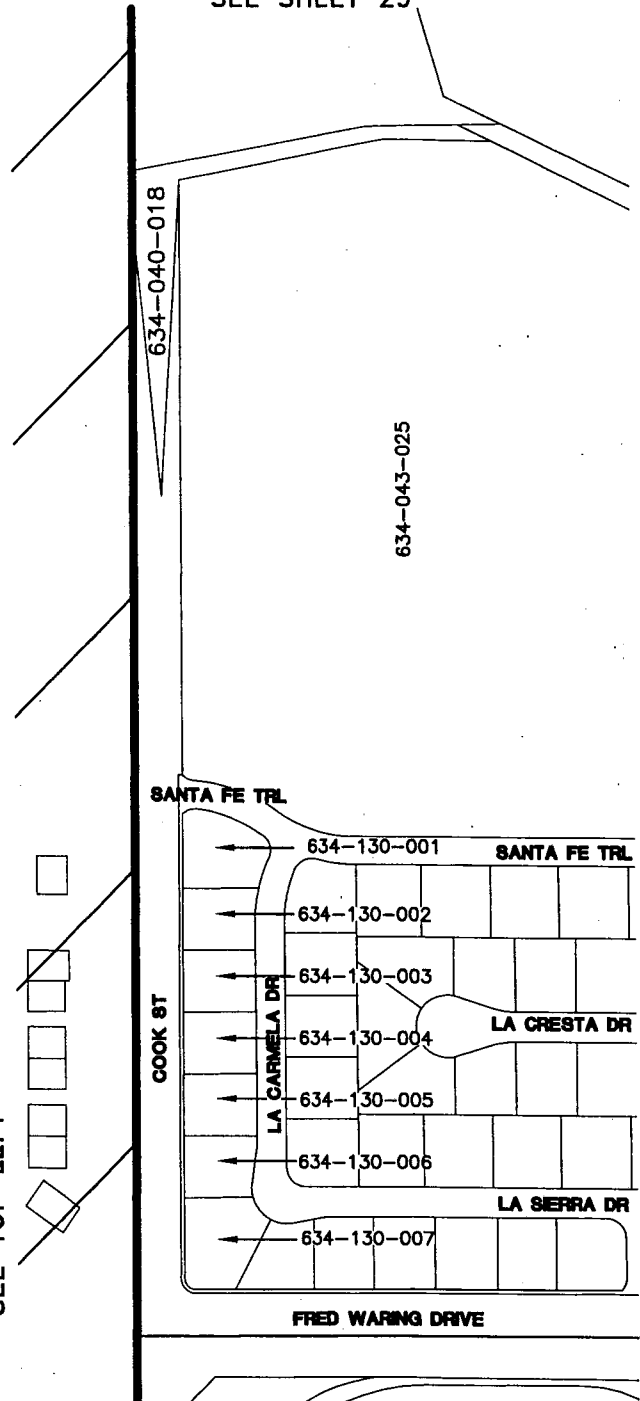
SEE INDEX T5S R6E SHEET 19

SEE BELOW RIGHT

SEE SHEET 29



**DETAIL 25**  
1"=200'



**DETAIL 26**  
1"=250'



**MSA CONSULTING, INC.**  
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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 28 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

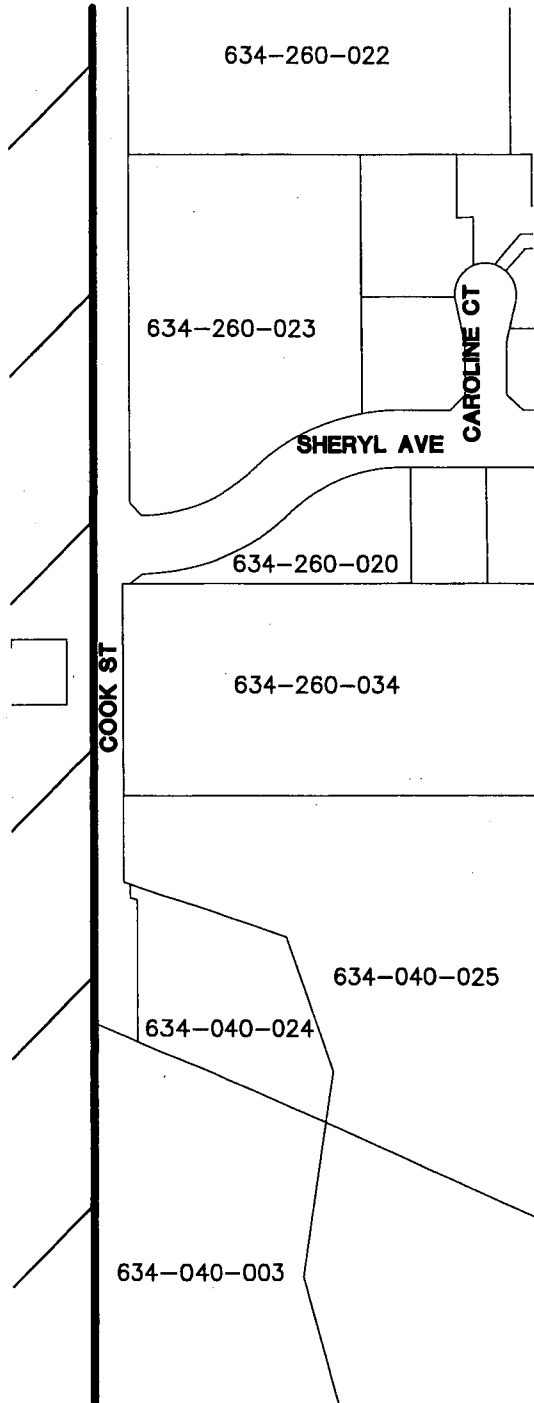
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

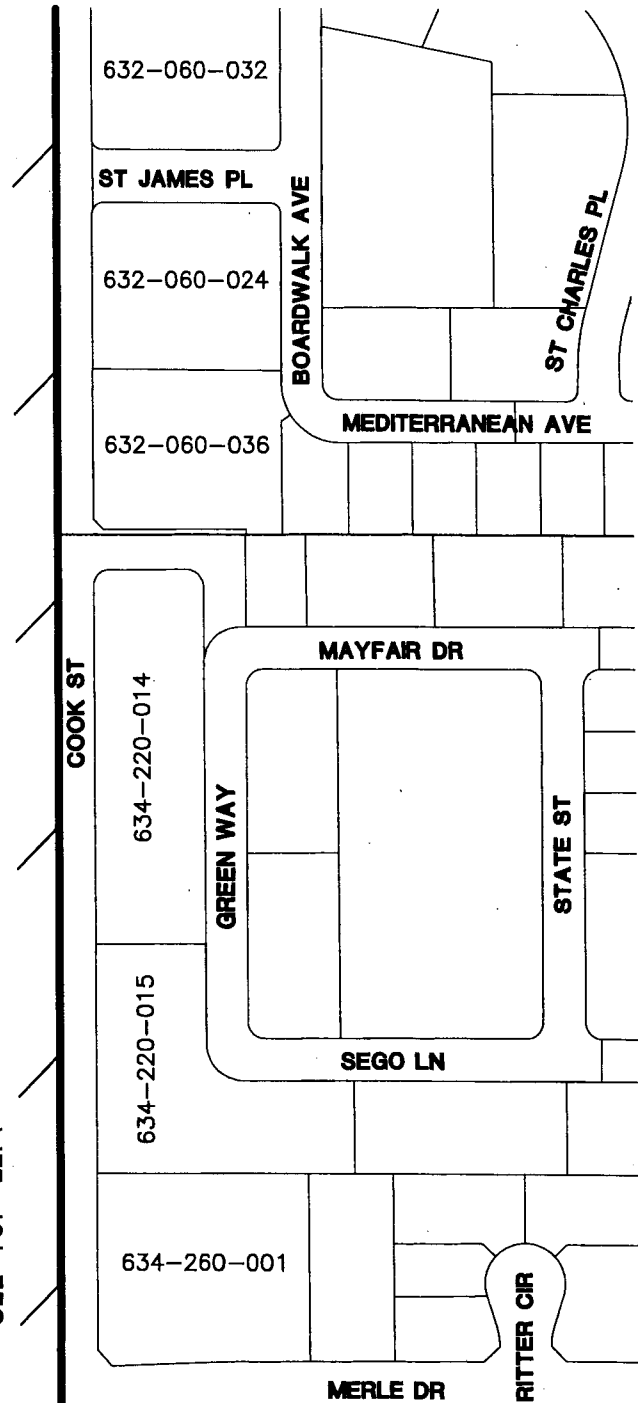
SEE INDEX T5S R6E SHEET 19

SEE BELOW RIGHT

SEE SHEET 30



DETAIL 27  
1"=300'



DETAIL 28  
1"=300'



**MSA CONSULTING, INC.**  
**PLANNING ■ CIVIL ENGINEERING**

**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 29 OF 39

# EXHIBIT "A"

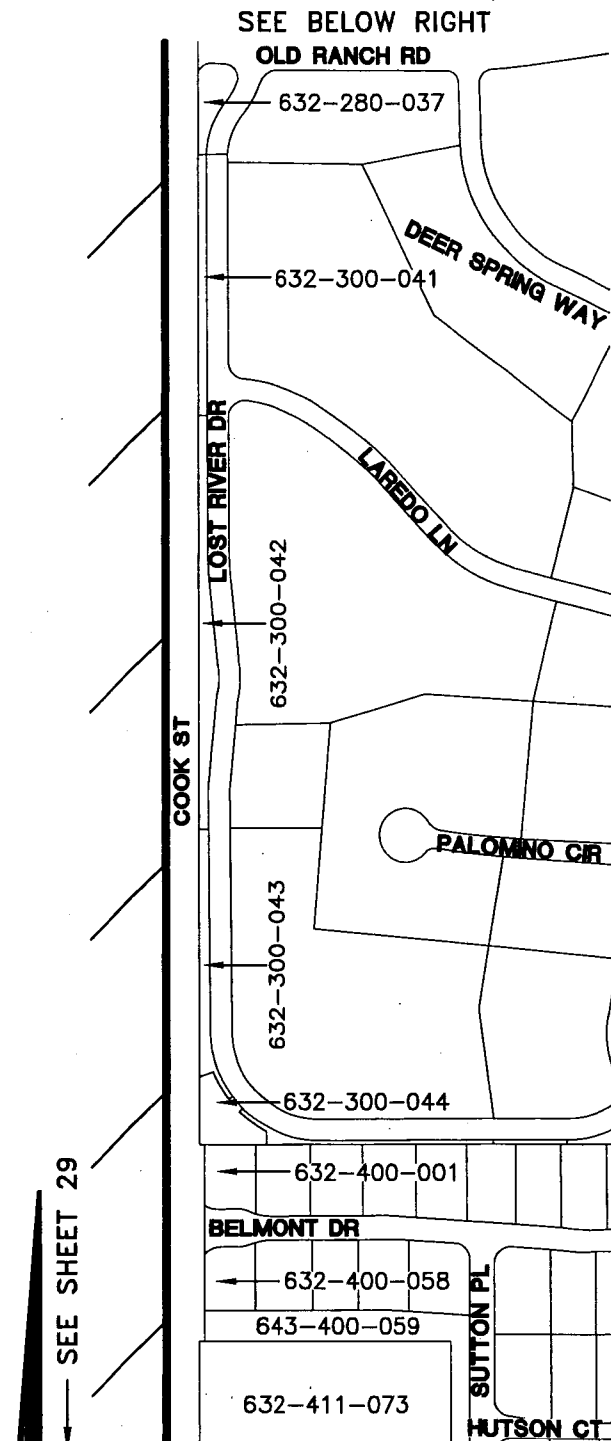
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

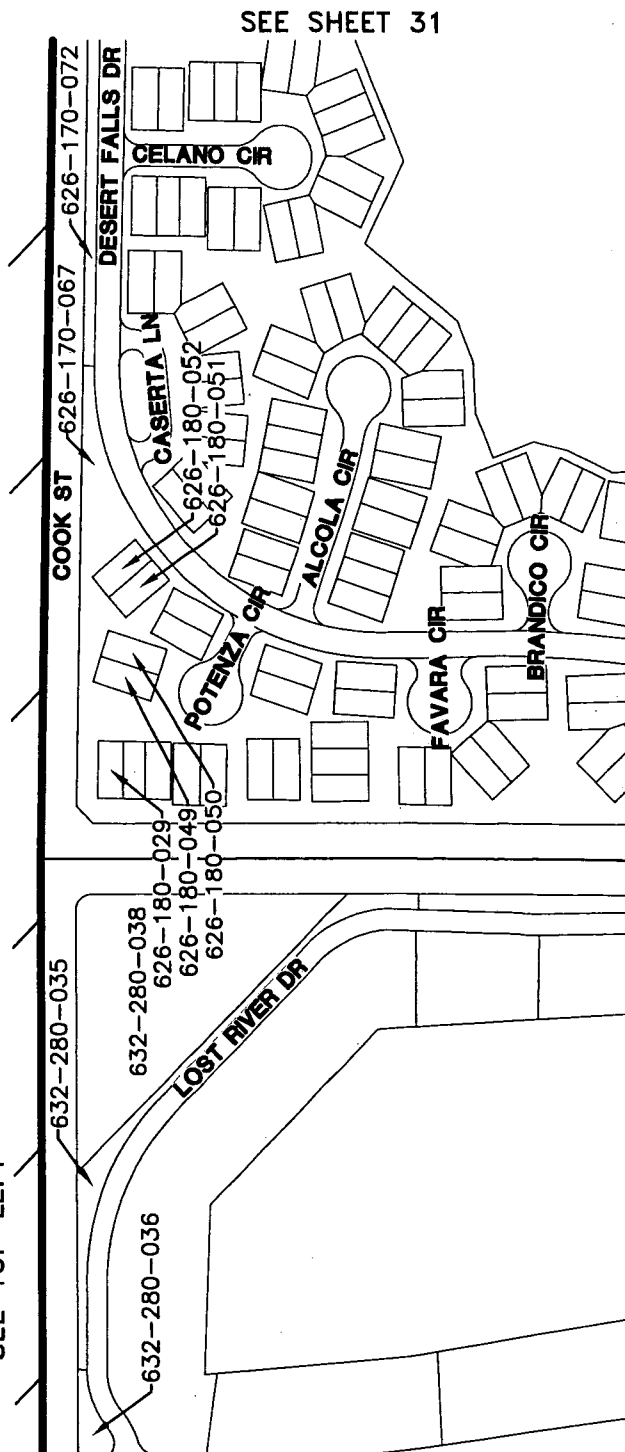
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

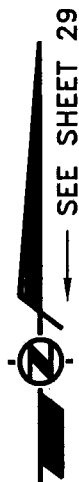
SEE INDEX T5S R6E SHEET 19



DETAIL 29  
1"=300'



DETAIL 30  
1"=300'



MSA CONSULTING, INC.  
PLANNING ■ CIVIL ENGINEERING

LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 30 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

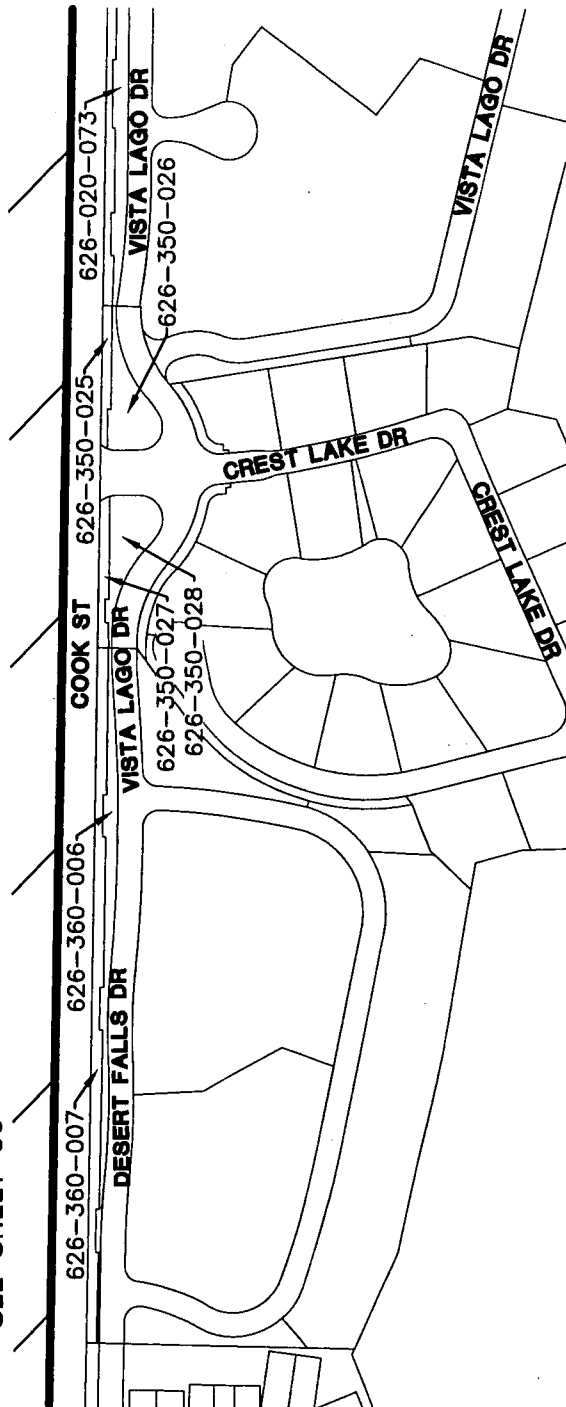
SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

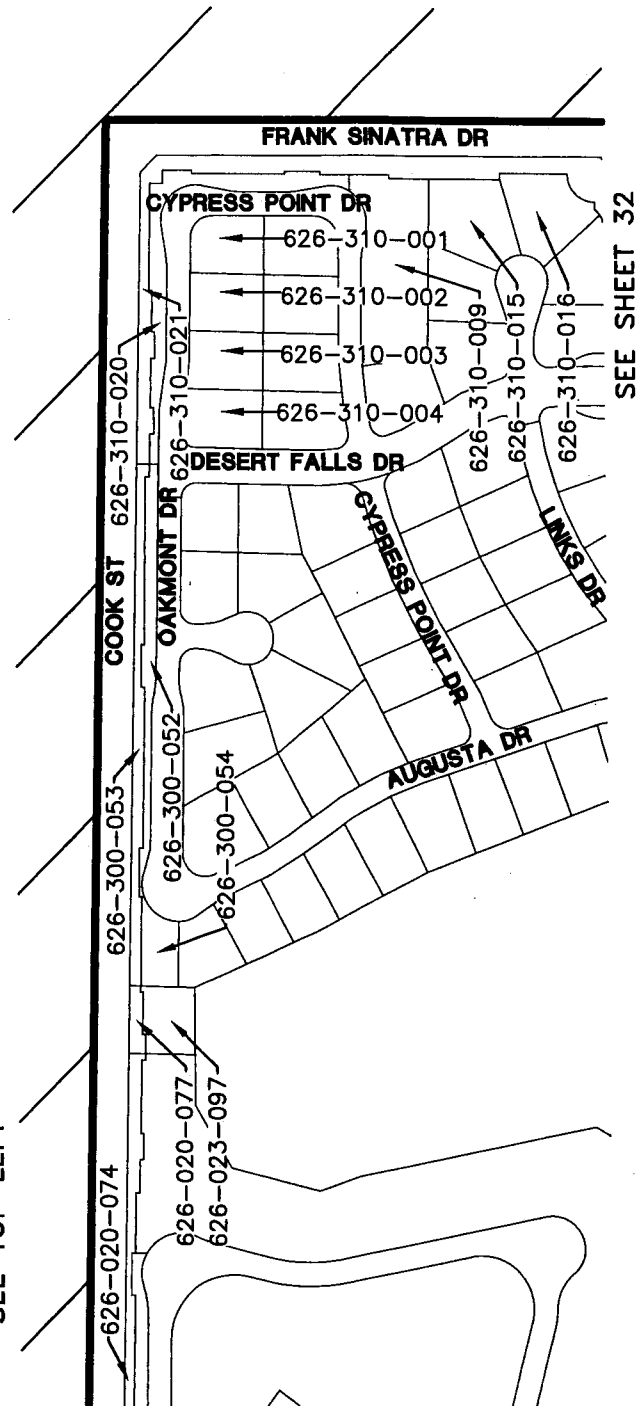
ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19

SEE BELOW RIGHT



**DETAIL 31**  
1"=300'



**DETAIL 32**  
1"=300'



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 31 OF 39

# EXHIBIT "A"

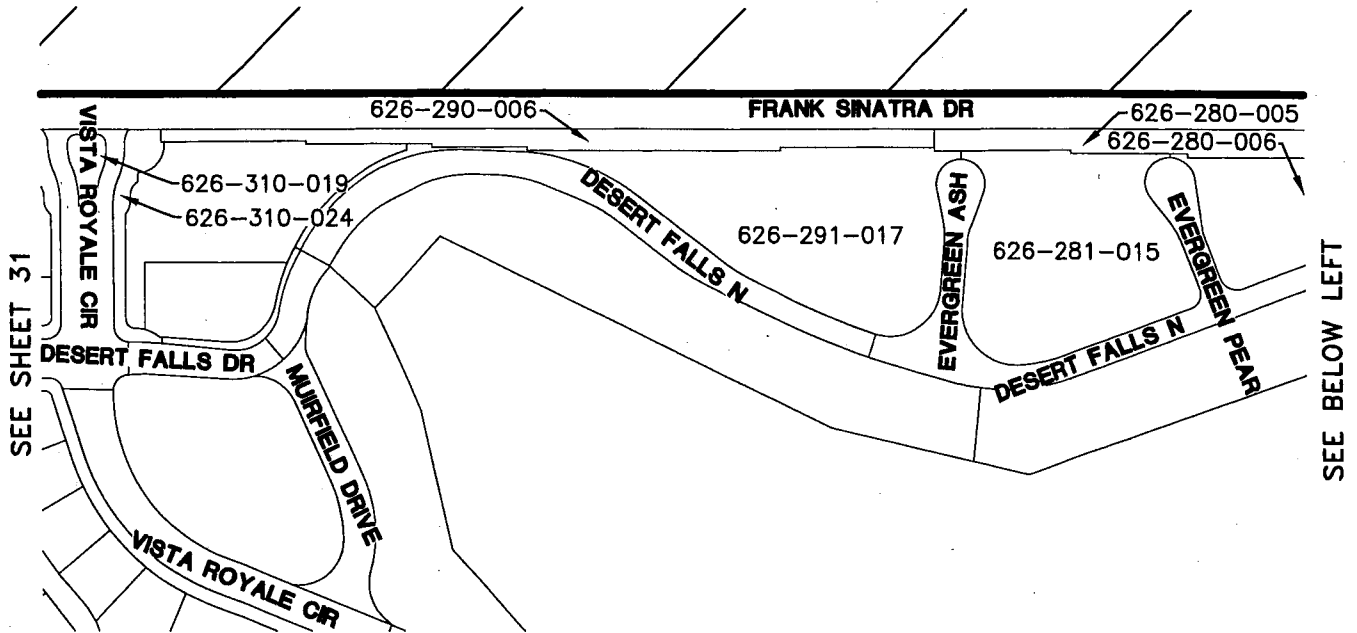
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

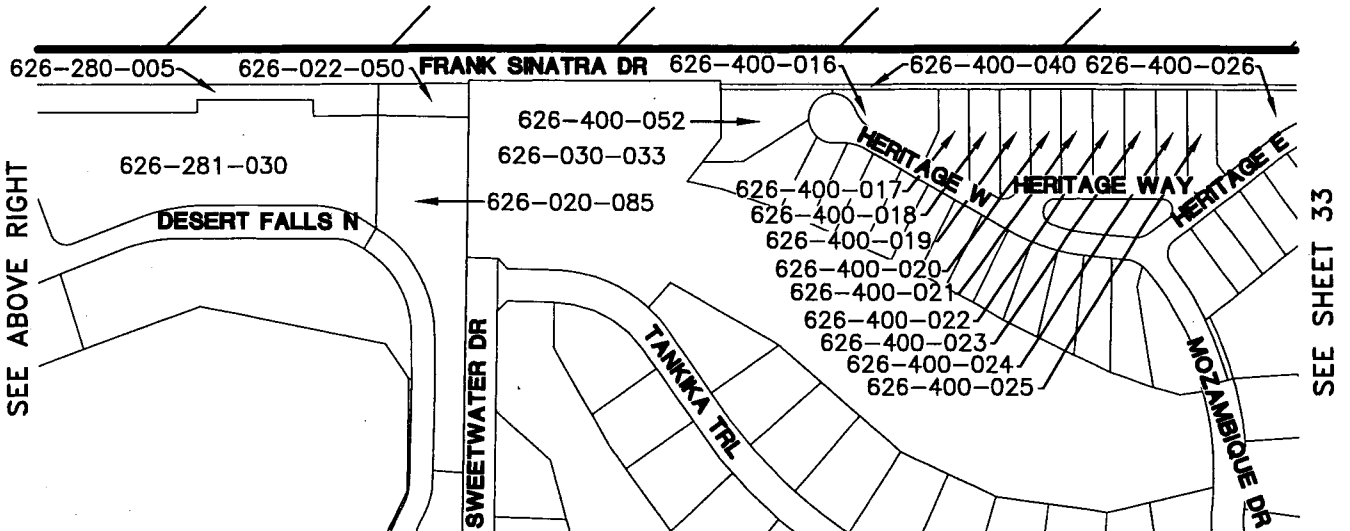
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19



DETAIL 33  
1"=300'



DETAIL 34  
1"=300'



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# EXHIBIT "A"

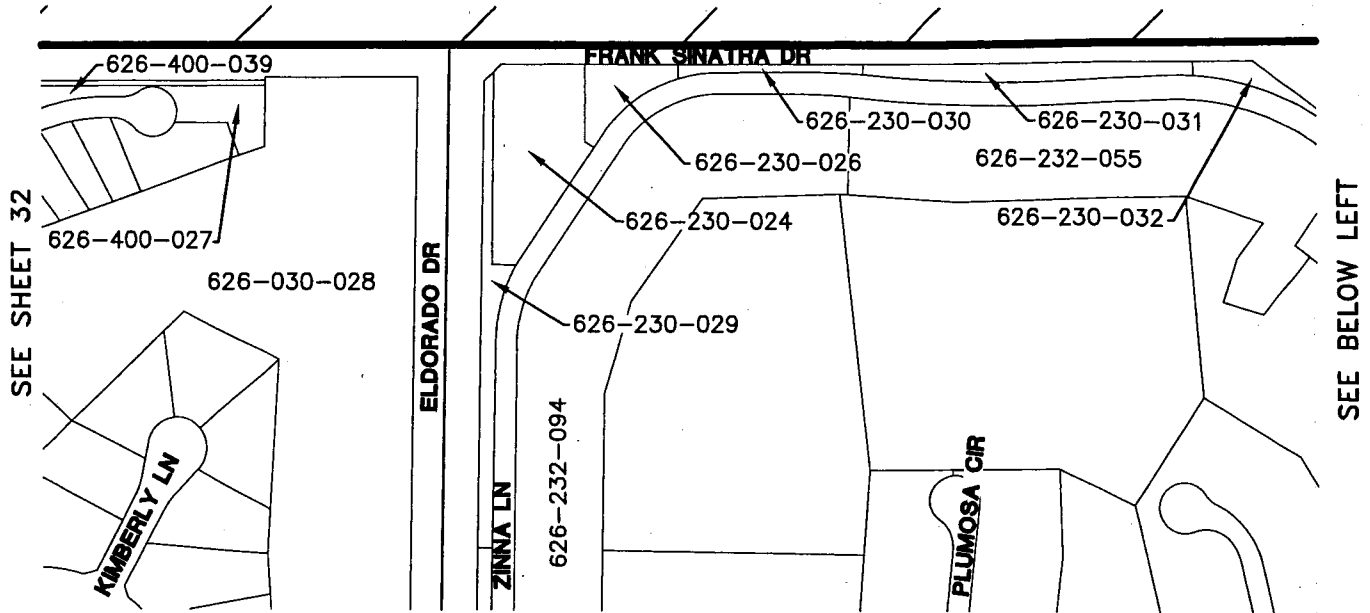
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

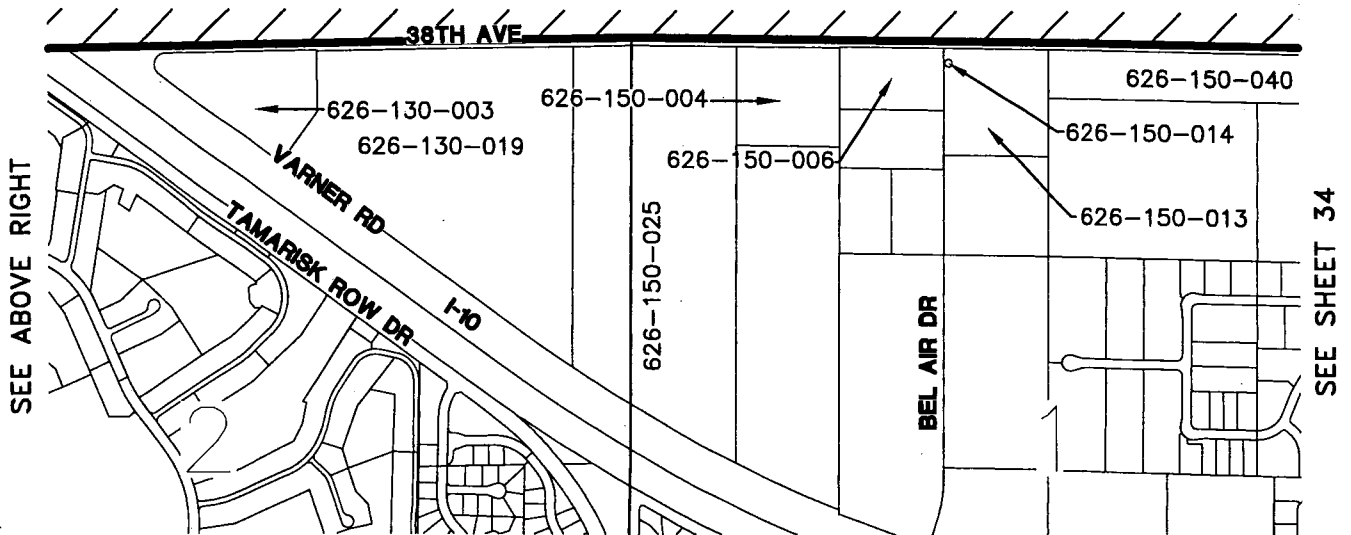
ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE INDEX T5S R6E SHEET 19



DETAIL 35

1"=300'



DETAIL 36

1"=1200'



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 33 OF 39

# EXHIBIT 'A'

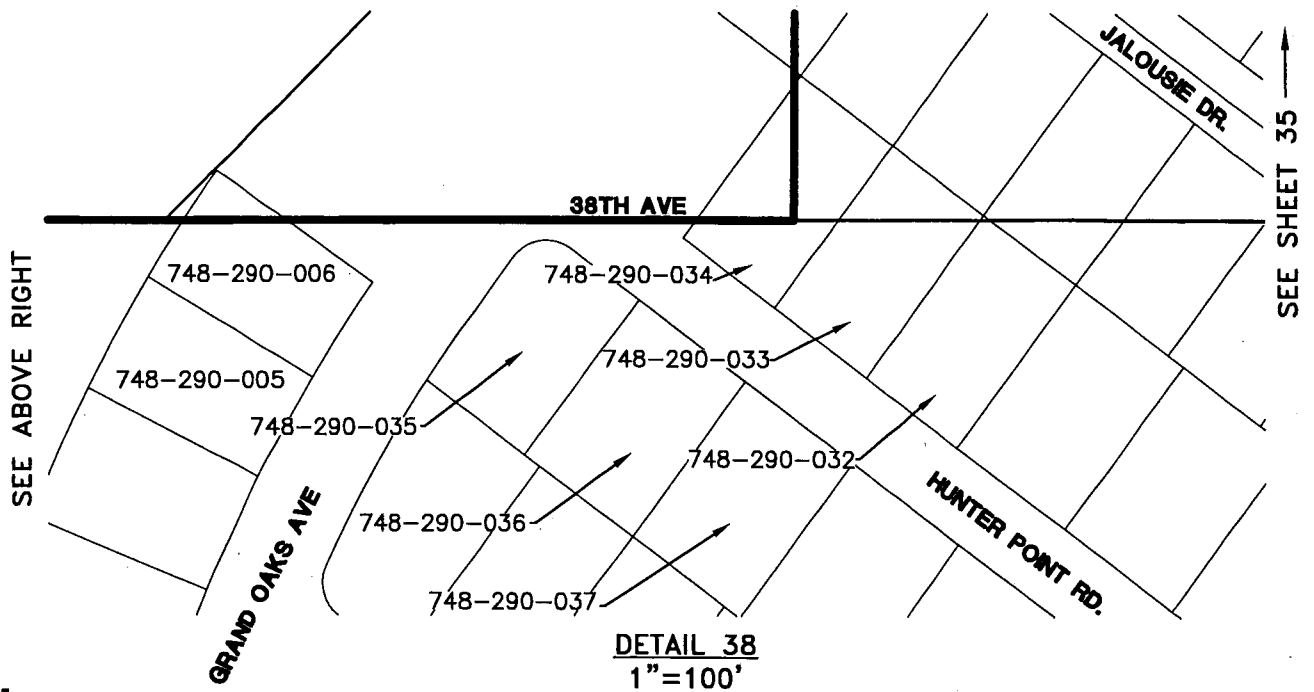
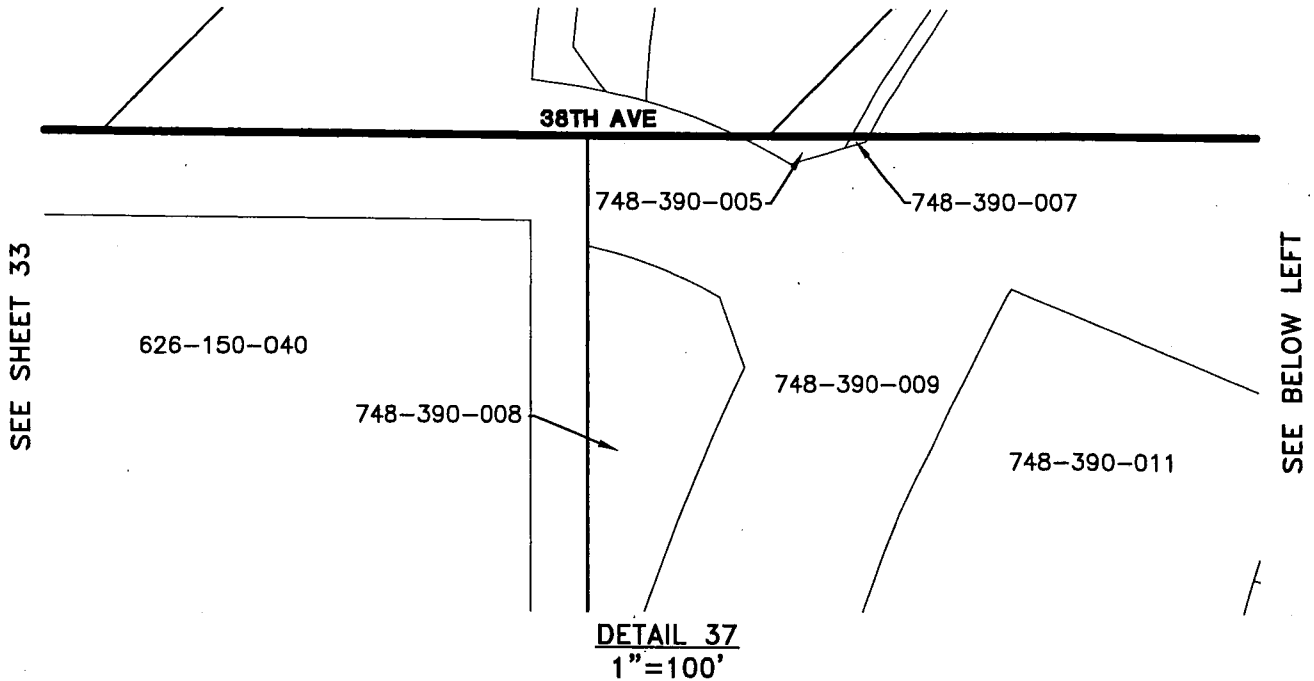
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

T5S R7E



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 34 OF 39

# EXHIBIT "A"

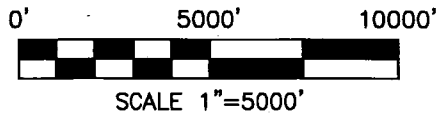
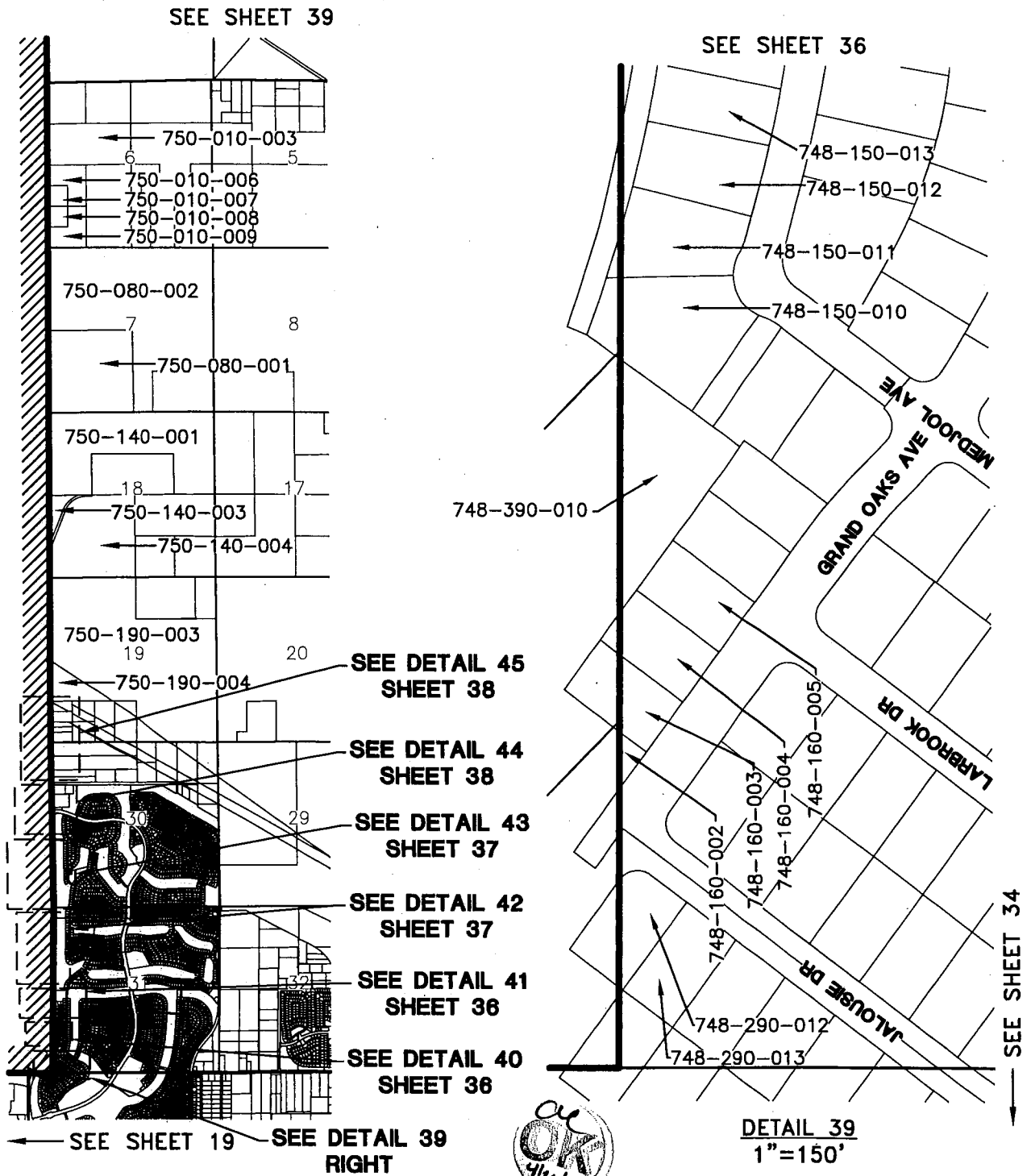
LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

T4S R7E



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 35 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

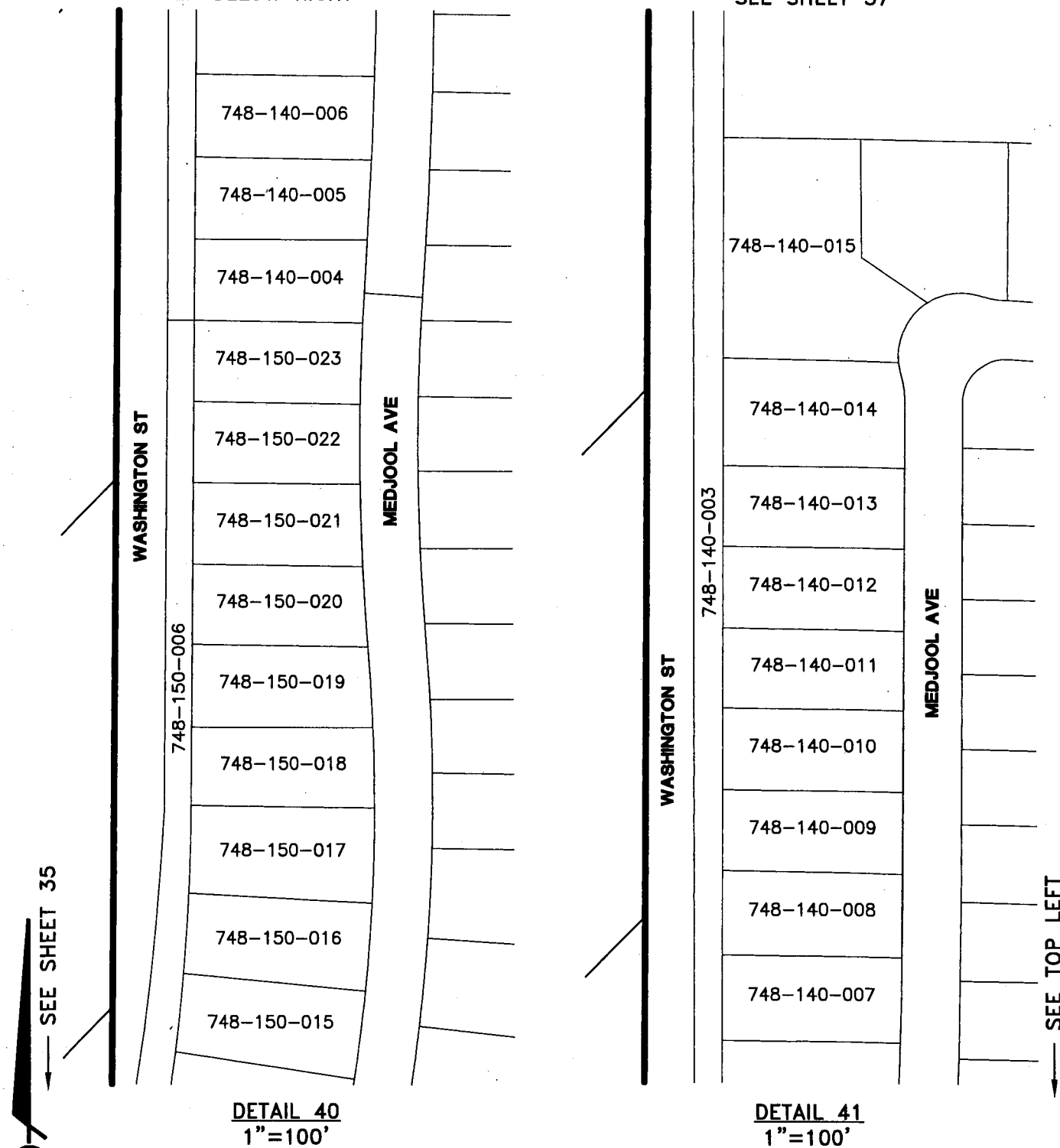
SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

SEE BELOW RIGHT SEE INDEX T4S R7E SHEET 35

SEE SHEET 37



DETAIL 40  
1"=100'

DETAIL 41  
1"=100'



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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 36 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

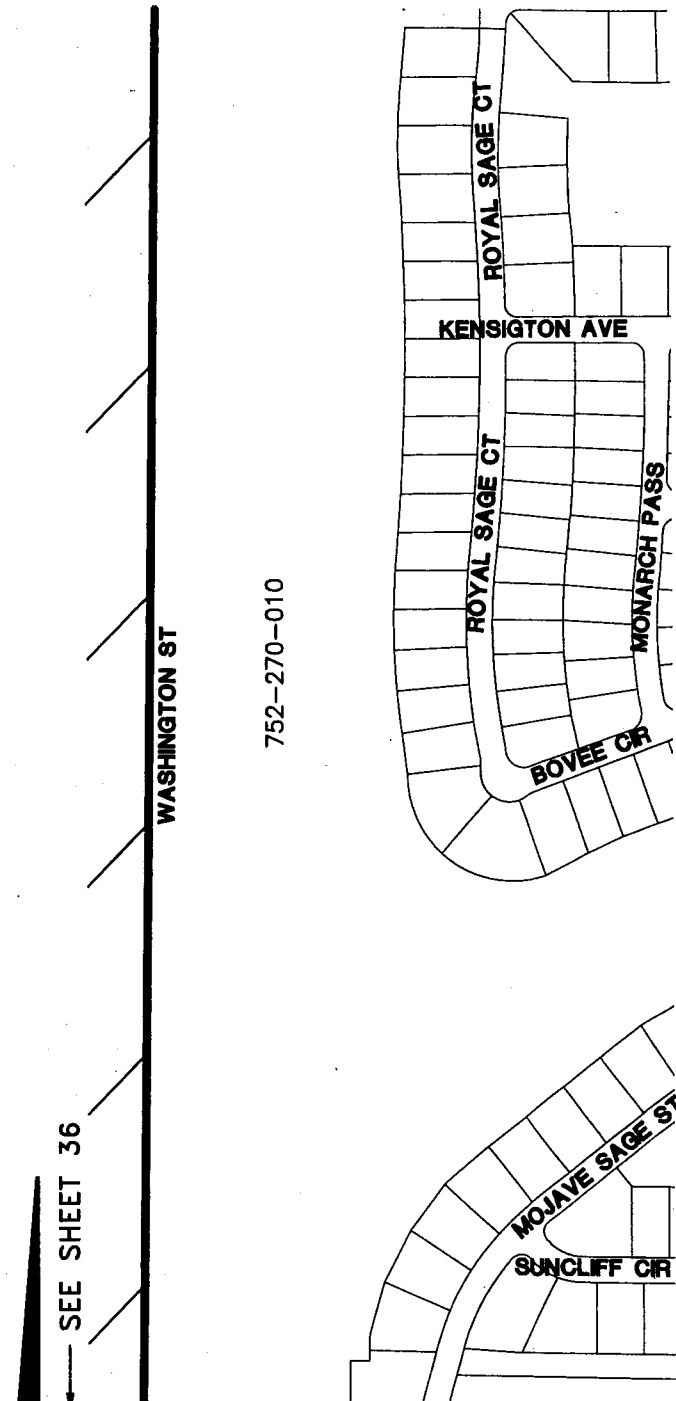
LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

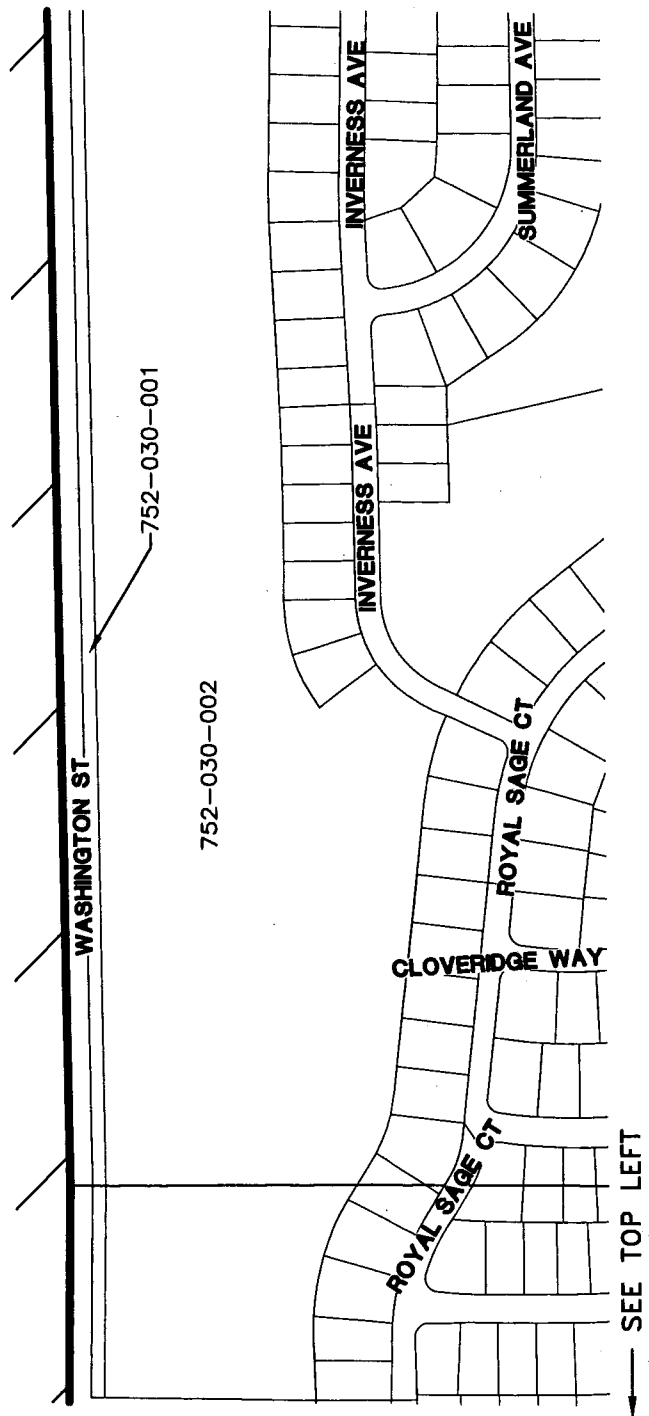
SEE BELOW RIGHT

SEE INDEX T4S R7E SHEET 35

SEE SHEET 38



DETAIL 42  
1"=300'



DETAIL 43  
1"=300'



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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 37 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

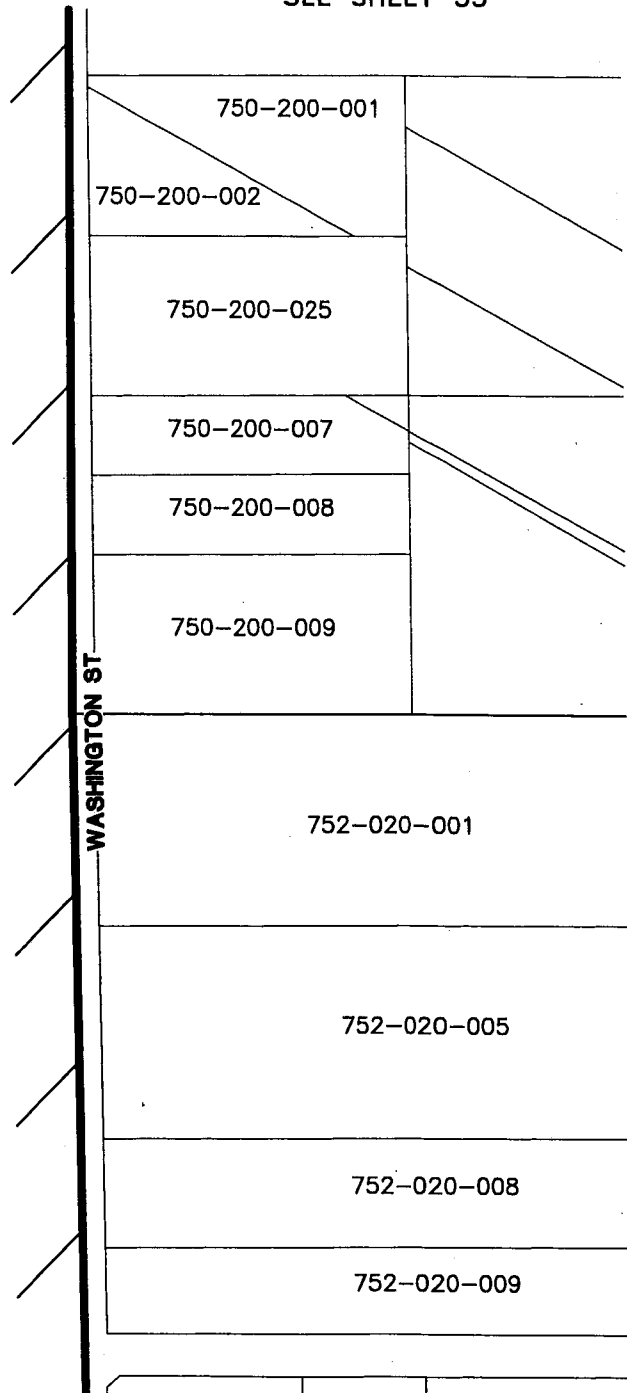
SEE INDEX T4S R7E SHEET 35

SEE BELOW RIGHT

SEE SHEET 35



DETAIL 44  
1"=300'



DETAIL 45  
1"=400'



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**LAND SURVEYING**

J.N. 2354 3/23/2017 SHEET 38 OF 39

# EXHIBIT "A"

LAFCO 2017-01-4

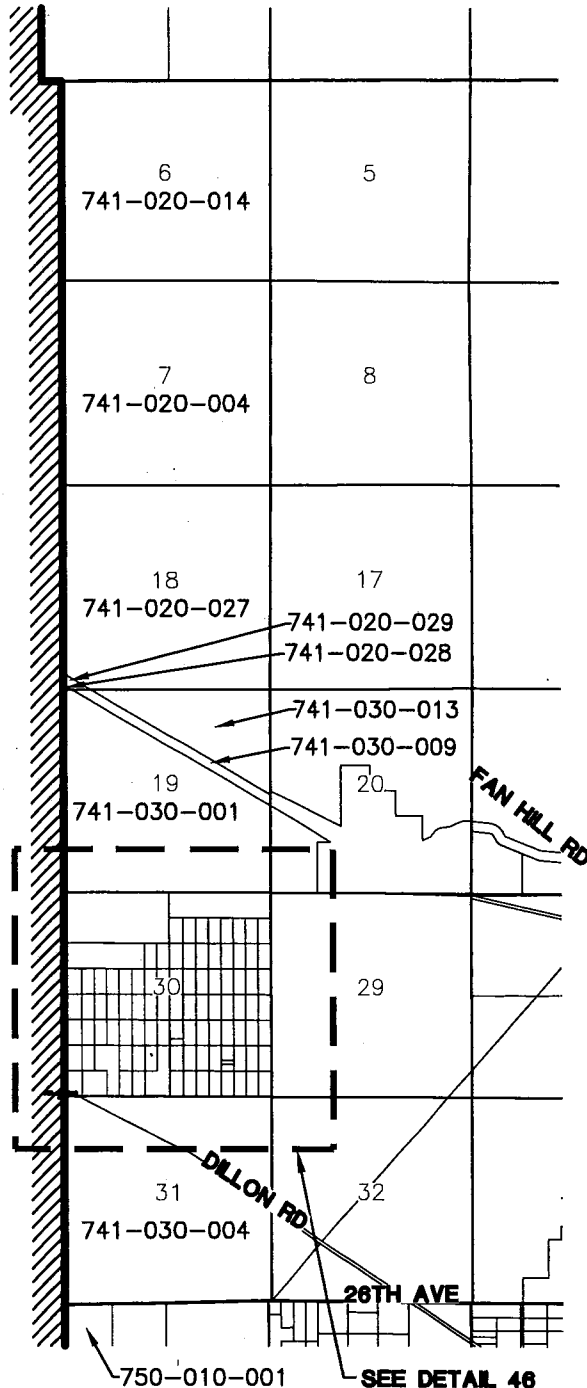
SPHERE OF INFLUENCE AMENDMENT (ADDITION) TO THE DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

LAFCO 2017-02-4

ANNEXATION TO DESERT HEALTHCARE DISTRICT (EASTERN COACHELLA VALLEY)

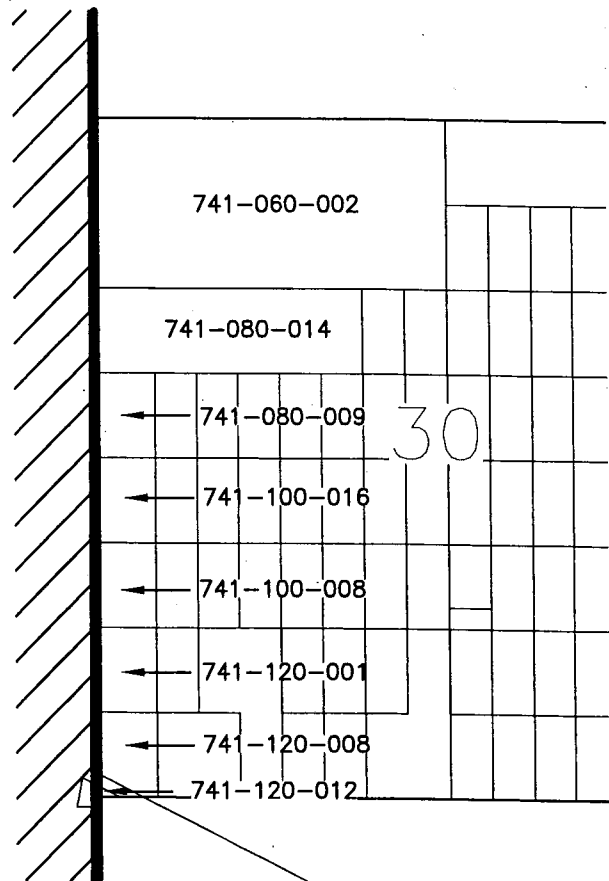
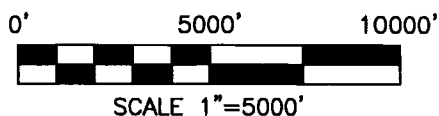
T3S R7E

SEE SHEET 2



SEE DETAIL 46  
AT RIGHT

SEE SHEET 35



DETAIL 46  
1"=1500'



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LAND SURVEYING

J.N. 2354 3/23/2017 SHEET 39 OF 39

**REBECCA SPENCER**  
Registrar of Voters



**ART TINOCO**  
Assistant Registrar of Voters

**REGISTRAR OF VOTERS  
COUNTY OF RIVERSIDE**

**CERTIFICATE OF REGISTRAR OF VOTERS  
TO THE RESULTS OF THE CANVASS OF ELECTION RETURNS**

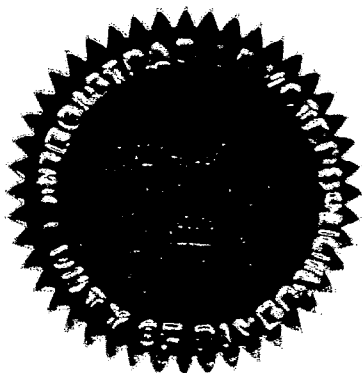
State of California     )  
                                  ) ss.  
County of Riverside    )

I, **REBECCA SPENCER**, Registrar of Voters of said County, do hereby certify that, in pursuance of the provisions of Sections 15301, 15372, and 15374 of the California Elections Code, I did canvass the returns of the votes cast on November 6, 2018, as part of the Consolidated General Election in the

**DESERT HEALTHCARE DISTRICT**

and I further certify that the statement of votes cast, to which this certificate is attached, shows the whole number of votes for each candidate for elective office and for and against each measure at said election, in said District, and in each precinct therein, and that the totals as shown for said election are full, true, and correct.

Dated this 6<sup>th</sup> day of December 2018.



**REBECCA SPENCER**  
Registrar of Voters

\_\_\_\_\_  
Leticia Flores  
Elections Coordinator



RIVERSIDE COUNTY Statement of Vote  
CONSOLIDATED GENERAL ELECTION

NO PARTY PREFERENCE MEASURE BB - DESERT HEALTHCARE DISTRICT ANNEXATION														
140183	Registration	Ballots Cast	Turnout (%)	YES	NO									
42813 THOUSAND PALMS	1	0	0.00	0	0									
42813 - Vote by Mail Reporting	1	1	100.00			*****	Insufficient Turnout to Protect Voter Privacy							*****
42851 BERMUDA DUNES	1156	261	22.58	158	70									
42851 - Vote by Mail Reporting	1156	459	39.71	320	92									
42861 BERMUDA DUNES	952	207	21.74	151	39									
42861 - Vote by Mail Reporting	952	422	44.33	298	95									
42866 BERMUDA DUNES	301	62	20.60	42	13									
42866 - Vote by Mail Reporting	301	156	51.83	111	30									
42870 BERMUDA DUNES	1663	309	18.58	180	83									
42870 - Vote by Mail Reporting	1663	955	57.43	653	195									
42900 DEL WEBB	2709	296	10.93	180	73									
42900 - Vote by Mail Reporting	2709	2126	78.48	1433	399									
42904 DEL WEBB	2694	348	12.92	206	63									
42904 - Vote by Mail Reporting	2694	2003	74.35	1313	410									
42907 DEL WEBB	0	0	0.00	0	0									
42907 - Vote by Mail Reporting	0	0	0.00	0	0									
42974 UC RSRCH AREA	1	0	0.00	0	0									
42974 - Vote by Mail Reporting	1	0	0.00	0	0									
44019 PALM DESERT	2454	448	18.26	249	125									
44019 - Vote by Mail Reporting	2454	1427	58.15	942	312									
44021 PALM DESERT	3066	455	14.84	262	112									
44021 - Vote by Mail Reporting	3066	1895	61.81	1226	414									
44026 PALM DESERT	3099	624	20.14	389	143									
44026 - Vote by Mail Reporting	3099	1623	52.37	1128	303									
44046 PALM DESERT	1695	284	16.76	171	70									
44046 - Vote by Mail Reporting	1695	1109	65.43	728	251									
44900 LA QUINTA SOUTH	0	0	0.00	0	0									
44900 - Vote by Mail Reporting	0	0	0.00	0	0									
45004 INDIAN WELLS	2426	407	16.78	232	110									
45004 - Vote by Mail Reporting	2426	1635	67.39	1024	431									
45907 INDIO HILLS NO.	347	55	15.85	43	7									
45907 - Vote by Mail Reporting	347	156	44.96	124	25									
45908 INDIO HILLS SO.	7	0	0.00	0	0									
45908 - Vote by Mail Reporting	7	3	42.86			*****	Insufficient Turnout to Protect Voter Privacy							*****
45910 INDIO HILLS NO.	2	0	0.00	0	0									
45910 - Vote by Mail Reporting	2	0	0.00	0	0									
45922 INDIO HILLS SO.	0	0	0.00	0	0									
45922 - Vote by Mail Reporting	0	0	0.00	0	0									
45925 INDIO HILLS SO.	0	0	0.00	0	0									
45925 - Vote by Mail Reporting	0	0	0.00	0	0									
45990 INDIAN LANDS	0	0	0.00	0	0									
45990 - Vote by Mail Reporting	0	0	0.00	0	0									
45991 INDIAN LANDS	131	8	6.11			*****	Insufficient Turnout to Protect Voter Privacy							*****
45991 - Vote by Mail Reporting	131	59	45.04	52	3									
45992 INDIAN LANDS	0	0	0.00	0	0									
45992 - Vote by Mail Reporting	0	0	0.00	0	0									
46002 LA QUINTA	842	122	14.49	78	28									
46002 - Vote by Mail Reporting	842	490	58.19	334	108									
46007 LA QUINTA	2917	547	18.75	320	133									
46007 - Vote by Mail Reporting	2917	1481	50.77	987	337									
46009 LA QUINTA	2163	390	18.03	250	81									
46009 - Vote by Mail Reporting	2163	1149	53.12	801	218									
46012 LA QUINTA	3417	534	15.63	329	111									
46012 - Vote by Mail Reporting	3417	2057	60.20	1336	441									
46018 LA QUINTA	2999	538	17.94	351	84									
46018 - Vote by Mail Reporting	2999	1519	50.65	1091	227									
46026 LA QUINTA	2691	510	18.95	355	87									
46026 - Vote by Mail Reporting	2691	1174	43.63	915	153									
46027 LA QUINTA	2248	466	20.73	337	85									
46027 - Vote by Mail Reporting	2248	1106	49.20	816	183									
46039 LA QUINTA	2060	354	17.18	201	77									

RIVERSIDE COUNTY Statement of Vote  
CONSOLIDATED GENERAL ELECTION

140183	NO PARTY PREFERENCE MEASURE BB - DESERT HEALTHCARE DISTRICT ANNEXATION													
	Registration	Ballots Cast	Turnout (%)		YES	NO								
46039 - Vote by Mail Reporting	2060	1336	64.85		804	331								
46044 LA QUINTA	0	0	0.00		0	0								
46044 - Vote by Mail Reporting	0	0	0.00		0	0								
46047 LA QUINTA	1389	159	11.45		81	45								
46047 - Vote by Mail Reporting	1389	1077	77.54		738	206								
46800 AUGUSTINE RES	0	0	0.00		0	0								
46800 - Vote by Mail Reporting	0	0	0.00		0	0								
46610 MECCA HILLS	0	0	0.00		0	0								
46610 - Vote by Mail Reporting	0	0	0.00		0	0								
46612 MECCA HILLS	0	0	0.00		0	0								
46612 - Vote by Mail Reporting	0	0	0.00		0	0								
46653 VALERIE	114	3	2.63											
46653 - Vote by Mail Reporting	114	58	50.88		51	4								
46661 VALERIE	10	0	0.00		0	0								
46661 - Vote by Mail Reporting	10	8	80.00											
46688 OASIS	259	9	3.47											
46688 - Vote by Mail Reporting	259	92	35.52		80	4								
46693 OASIS	26	5	19.23											
46693 - Vote by Mail Reporting	26	4	15.38											
46704 THERMAL	1009	165	16.35		122	25								
46704 - Vote by Mail Reporting	1009	376	37.26		304	48								
46711 THERMAL	484	86	17.77		66	7								
46711 - Vote by Mail Reporting	484	135	27.89		115	8								
46712 THERMAL	243	10	4.12											
46712 - Vote by Mail Reporting	243	98	40.33		72	8								
46715 THERMAL	4	0	0.00		0	0								
46715 - Vote by Mail Reporting	4	4	100.00											
46758 MECCA	9	1	11.11											
46758 - Vote by Mail Reporting	9	4	44.44											
46761 MECCA	1824	234	12.83		195	10								
46761 - Vote by Mail Reporting	1824	512	28.07		459	20								
46762 MECCA	49	0	0.00		0	0								
46762 - Vote by Mail Reporting	49	19	38.78		14	4								
46800 FLOWING WELLS	32	3	9.38											
46800 - Vote by Mail Reporting	32	16	50.00		12	4								
46813 SALTON SEA	3	0	0.00		0	0								
46813 - Vote by Mail Reporting	3	3	100.00											
46823 NORTH SHORE	716	64	8.94		55	2								
46823 - Vote by Mail Reporting	716	187	26.12		154	15								
46828 NORTH SHORE	0	0	0.00		0	0								
46828 - Vote by Mail Reporting	0	0	0.00		0	0								
46902 CHIRIACO SUMMIT	14	0	0.00		0	0								
46902 - Vote by Mail Reporting	14	12	85.71		8	4								
46903 CHIRIACO SUMMIT	0	0	0.00		0	0								
46903 - Vote by Mail Reporting	0	0	0.00		0	0								
47100 INDIO /1	1	0	0.00		0	0								
47100 - Vote by Mail Reporting	1	1	100.00											
47104 INDIO /1	0	0	0.00		0	0								
47104 - Vote by Mail Reporting	0	0	0.00		0	0								
47108 INDIO /1	3247	485	14.94		312	102								
47108 - Vote by Mail Reporting	3247	1865	57.44		1271	358								
47109 INDIO /1	3641	504	13.84		324	109								
47109 - Vote by Mail Reporting	3641	2098	57.62		1512	371								
47112 INDIO /1	0	0	0.00		0	0								
47112 - Vote by Mail Reporting	0	0	0.00		0	0								
47114 INDIO /1	1950	320	16.41		205	59								
47114 - Vote by Mail Reporting	1950	1260	64.62		884	232								
47115 INDIO /1	553	105	18.99		82	13								
47115 - Vote by Mail Reporting	553	217	39.24		175	30								
47118 INDIO /1	0	0	0.00		0	0								
47118 - Vote by Mail Reporting	0	0	0.00		0	0								

RIVERSIDE COUNTY Statement of Vote  
CONSOLIDATED GENERAL ELECTION

NO PARTY PREFERENCE MEASURE BB - DESERT HEALTHCARE DISTRICT ANNEXATION														
140183	Registration	Ballots Cast	Turnout (%)		YES	NO								
47202 - INDIO /2	3033	598	19.72		429	103								
47202 - Vote by Mail Reporting	3033	1370	45.17		1044	214								
47206 - INDIO /2	2337	361	15.45		278	44								
47206 - Vote by Mail Reporting	2337	786	33.63		680	70								
47207 - INDIO /2	1643	258	15.70		174	51								
47207 - Vote by Mail Reporting	1643	682	41.51		534	84								
47211 - INDIO /2	0	0	0.00		0	0								
47211 - Vote by Mail Reporting	0	0	0.00		0	0								
47300 - INDIO /3	1740	255	14.66		201	25								
47300 - Vote by Mail Reporting	1740	582	33.45		493	60								
47302 - INDIO /3	2269	296	13.05		230	29								
47302 - Vote by Mail Reporting	2269	749	33.01		640	58								
47309 - INDIO /3	7	0	0.00		0	0								
47309 - Vote by Mail Reporting	7	5	71.43											
47312 - INDIO /3	1299	189	14.55		136	26								
47312 - Vote by Mail Reporting	1299	708	54.50		529	109								
47316 - INDIO /3	0	0	0.00		0	0								
47316 - Vote by Mail Reporting	0	0	0.00		0	0								
47401 - INDIO /4	732	120	16.39		94	17								
47401 - Vote by Mail Reporting	732	275	37.57		227	29								
47403 - INDIO /4	2108	368	17.46		256	60								
47403 - Vote by Mail Reporting	2108	861	40.84		694	118								
47406 - INDIO /4	1561	235	15.05		186	27								
47406 - Vote by Mail Reporting	1561	513	32.86		428	47								
47409 - INDIO /4	1585	249	15.71		193	23								
47409 - Vote by Mail Reporting	1585	521	32.87		437	50								
47411 - INDIO /4	6	0	0.00		0	0								
47411 - Vote by Mail Reporting	6	4	66.67											
47415 - INDIO /4	117	4	3.42											
47415 - Vote by Mail Reporting	117	40	34.19		32	1								
47503 - INDIO /5	469	83	17.70		57	13								
47503 - Vote by Mail Reporting	469	178	37.95		148	19								
47504 - INDIO /5	2074	301	14.51		228	42								
47504 - Vote by Mail Reporting	2074	746	35.97		599	86								
47509 - INDIO /5	2821	445	15.77		298	91								
47509 - Vote by Mail Reporting	2821	1545	54.77		1120	262								
47512 - INDIO /5	1581	227	14.36		150	48								
47512 - Vote by Mail Reporting	1581	929	58.76		681	161								
47514 - INDIO /5	12	1	8.33											
47514 - Vote by Mail Reporting	12	5	41.67											
48000 - COACHELLA	65	13	20.00		10	2								
48000 - Vote by Mail Reporting	65	33	50.77		24	7								
48005 - COACHELLA	0	0	0.00		0	0								
48005 - Vote by Mail Reporting	0	0	0.00		0	0								
48010 - COACHELLA	2435	305	12.53		234	34								
48010 - Vote by Mail Reporting	2435	768	31.54		657	50								
48012 - COACHELLA	2761	337	12.21		273	22								
48012 - Vote by Mail Reporting	2761	911	33.00		735	76								
48025 - COACHELLA	2918	402	13.78		304	36								
48025 - Vote by Mail Reporting	2918	833	28.55		737	51								
48029 - COACHELLA	2383	296	12.42		238	18								
48029 - Vote by Mail Reporting	2383	691	29.00		612	35								
48032 - COACHELLA	2062	296	14.35		226	15								
48032 - Vote by Mail Reporting	2062	641	31.09		551	38								
48036 - COACHELLA	3	0	0.00		0	0								
48036 - Vote by Mail Reporting	3	3	100.00											
48041 - COACHELLA	0	0	0.00		0	0								
48041 - Vote by Mail Reporting	0	0	0.00		0	0								
48853 - JOSHUA TREE NP	0	0	0.00		0	0								
48853 - Vote by Mail Reporting	0	0	0.00		0	0								
49900 - SANTA ROSA MTS	0	0	0.00		0	0								

RIVERSIDE COUNTY Statement of Vote  
CONSOLIDATED GENERAL ELECTION

140183	NO PARTY PREFERENCE MEASURE BB - DESERT HEALTHCARE DISTRICT ANNEXATION															
	Registration	Ballots Cast	Turnout (%)		YES	NO										
49900 - Vote by Mail Reporting	0	0	0.00		0	0										
49901 SANTA ROSA MTS	0	0	0.00		0	0										
49901 - Vote by Mail Reporting	0	0	0.00		0	0										
49903 SANTA ROSA MTS	0	0	0.00		0	0										
49903 - Vote by Mail Reporting	0	0	0.00		0	0										
49911 SANTA ROSA MTS	0	0	0.00		0	0										
49911 - Vote by Mail Reporting	0	0	0.00		0	0										
Precinct Totals	95639	15017	15.70		10160	2696										
Vote by Mail Reporting Totals	95639	46766	48.90		33903	7907										
Grand Totals	95639	61783	64.60	*	44063	10603	*									
Riverside County	95639	61783	64.60		44063	10603										
36th Congressional District	95639	61783	64.60		44063	10603										
28th Senatorial District	95639	61783	64.60		44063	10603										
42nd Assembly District	33466	24916	74.45		16475	5206										
56th Assembly District	62132	36846	59.30		27573	5391										
71st Assembly District	41	21	51.22		15	6										
St Bd of Equalization 4th Dist	95639	61783	64.60		44063	10603										
4 Supervisorial District	95639	61783	64.60		44063	10603										
City of Coachella	12627	5529	43.79		4604	384										
City of Indio	34786	21344	61.36		15960	3241										
City of Indian Wells	2426	2042	84.17		1256	541										
City of La Quinta	20726	15009	72.42		10124	2935										
City of Palm Desert	10314	7865	76.26		5095	1730										
Unincorporated Area	14760	9994	67.71		7024	1772										



DESERT HEALTHCARE DISTRICT

DESERT HEALTHCARE DISTRICT

FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE

MEETING MINUTES

December 11, 2018

**Directors Present**

Chair/Treasurer Mark Matthews  
Director Jennifer Wortham, DrPH

**District Staff Present**

Chris Christensen, Interim CEO and CFO  
Lisa Houston, COO  
Stephen Huyck, Accounting Manager  
Andrea S. Hayles, Clerk to the Board

**Absent**

Arthur Shorr,  
Community  
Member

**AGENDA ITEMS**

**DISCUSSION**

**ACTION**

<b>I. Call to Order</b>	Chair Matthews called the meeting to order at 3:00 p.m.	
<b>II. Approval of Agenda</b>	Chair Matthews asked for a motion to approve the Agenda.	<b>It was moved and seconded (Director Wortham, Chair Matthews) to approve the agenda. Motion passed unanimously.</b>
<b>III. Public Comment</b>	None	
<b>IV. Approval of Minutes</b>	Chair Matthews asked for a motion to approve the minutes of October 9, 2018.	<b>It was moved and seconded (Director Wortham, Chair Matthews) to approve the minutes. Motion passed unanimously.</b>
<b>V. CEO Report</b>	Chris Christensen, Interim CEO, reminded the chair and committee members of the December 18, 2018, Special Meeting of the Board 4:30 p.m. start time.	



# DESERT HEALTHCARE DISTRICT

## DESERT HEALTHCARE DISTRICT

### FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE

#### MEETING MINUTES

December 11, 2018

<b>VI. Chief Financial Officer's Report</b> <b>1. LPMP Leasing Update</b>	<b>VI.1.</b> Chris Christensen, Interim CEO, detailed the 95% occupancy rate at Las Palmas Medical Plaza (LPMP). The District will begin marketing two vacant units and a 1,000 sq. ft. unit available in February 2019.	
<b>VII. Financial Reports</b> <b>1. District and LPMP Financial Statements</b> <b>2. Accounts Receivable Aging Summary</b> <b>3. District – Deposits</b> <b>4. District – Property Tax Receipts</b> <b>5. LPMP Deposits</b> <b>6. District – Check Register</b> <b>7. Credit Card – Detail of Expenditures</b> <b>8. LPMP – Check Register</b> <b>9. Retirement Protection Plan Update</b> <b>10. Grant Payment Schedule</b>	<b>VII.1.-10.</b> The Financial Reports were reviewed and discussed with Chris Christensen, Interim CEO.	<b>It was moved and seconded (Director Wortham, Chair Matthews) to approve the October and November 2018 District Financial Reports - Items 1-10 and to forward to the Board for approval. Motion passed unanimously.</b>
<b>Public Comment</b>	No public comment.	
<b>VIII. Other Matters</b> <b>1. LPMP Lease Extension – Suite 1E 204 – Desert Oasis Healthcare</b>  <b>2. LPMP Management Contract Renewal – INPRO EMS Construction</b>	Chris Christensen, Interim CEO, provided details of the LPMP 1-year lease extension for Desert Oasis Healthcare with \$1.80 per sq. ft. for rent and \$6 per sq. ft. for Tenant Improvement allowance.  Chris Christensen, Interim CEO, explained the LPMP property management contract renewal for INPRO EMS Construction – complimenting their work and recommending approval for another year.	<b>It was moved and seconded (Director Wortham, Chair Matthews) to approve the LPMP Lease Extension – Suite 1E 204 – Desert Oasis Healthcare. Motion passed unanimously.</b>  <b>It was moved and seconded (Director Wortham, Chair Matthews) to approve the LPMP Lease Management Contract Renewal – INPRO EMS Construction. Motion passed unanimously.</b>
<b>IV. Adjournment</b>	Chair Matthews adjourned the meeting at 3:09 p.m.	<b>Audio recording available on the website at <a href="http://dhcd.org/Finance-and-Administration">http://dhcd.org/Finance-and-Administration</a></b>



DESERT HEALTHCARE DISTRICT

DESERT HEALTHCARE DISTRICT

FINANCE, ADMINISTRATION, REAL ESTATE AND LEGAL COMMITTEE

MEETING MINUTES

December 11, 2018

ATTEST: \_\_\_\_\_

Mark Matthews, Chair Finance & Administration Committee/Treasurer  
Desert Healthcare District Board of Directors

*Minutes respectfully submitted by Andrea S. Hayles, Clerk of the Board*

DRAFT



**HOSPITAL GOVERNANCE AND OVERSIGHT COMMITTEE MEETING**  
**MEETING MINUTES**  
**December 20, 2018**

<b>Directors Present</b>	<b>District Staff Present</b>	<b>Absent</b>
Chair, Carole Rogers, RN Vice-President, Les Zendle, MD	Chris Christensen, Interim CEO, CFO Andrea S. Hayles, Clerk of the Board	

<b>AGENDA ITEMS</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<b>I. Call to Order</b>	The meeting was called to order at 9:30 a.m. by Vice-President Zendle. Chair Rogers joined the meeting at 9:50 a.m.	
<b>II. Introductions</b>	Chair Rogers invited all in attendance to introduce themselves.	
<b>III. Approval of Agenda</b>	Chair Rogers asked for a motion to approve the agenda.	<b>Moved and seconded by Vice-President Zendle and Chair Rogers to approve the agenda as amended. Motion passed unanimously.</b>
<b>IV. Public Comment</b>	<p>Ezra Kaufman, District Resident, explained that the committee meetings lack a positive agenda that emanates from the District, detailing the prior canceled meetings, and that it does not characterize lease compliance. The lessee's October presentation to the committee was not available to the public for discussion and scrutiny explaining the basis for the committee.</p> <p>Vice-President Zendle agreed that any presentation should be included in a link to the District website, and the entire board will discuss the matter.</p> <p>Michele Finney, CEO, Desert Regional Medical Center, requested withdrawing the Leapfrog presentation from the agenda until the board has determined the expectations,</p>	





**DESERT HEALTHCARE DISTRICT**  
**HOSPITAL GOVERNANCE AND OVERSIGHT COMMITTEE MEETING**  
**MEETING MINUTES**  
**December 20, 2018**

	requests, proceeding forward, and a resolve.  Vice-President Zendle explained that general counsel will address the matter and excluded Desert Regional Medical Center's presentation.	
<b>V. Approval of Meeting Minutes</b>	Chair Rogers asked for approval of the October 18, 2018 Meeting Minutes.	<b>Moved and seconded by Vice-President Zendle and Chair Rogers to approve the agenda. Motion passed unanimously.</b>
<b>VI. Old Business</b>		
<b>1. Revised Desert Regional Medical Center 2017-2018 Annual Report</b>	Chris Christensen, Interim, CEO, explained the error in misnumbering of the sequence, describing the applicable revisions.	
<b>2. Hospital Safety and Compliance Inspections Schedule</b>	Chris Christensen, Interim, CEO, detailed the quarterly hospital safety and compliance inspections schedule for 2019 consisting of the committee members, facility inspector, and appropriate Desert Regional Medical Center staff.	
<b>3. Dale E. Barnhart – Facilities Inspector Service Agreement</b>	Chris Christensen, Interim CEO, explained the facilities inspector service agreement for Dale E. Barnhart to engage and work with the committee and hospital for the hospital safety and compliance inspections.	<b>Moved and seconded by Vice-President Zendle and Chair Rogers to approve Dale E. Barnhart, Facilities Inspector Service Agreement. Motion passed unanimously.</b>
<b>VII. New Business</b>		
<b>1. Leapfrog Hospital Safety Grade Upgrade – Christine Langenwalter, MSN, RNC, CENP, Chief Quality Officer, Desert Regional Medical Center</b>	The presentation was withdrawn for legal input and board discussion.	
<b>Public Comment</b>		



DESERT HEALTHCARE DISTRICT

HOSPITAL GOVERNANCE AND OVERSIGHT COMMITTEE MEETING

MEETING MINUTES

December 20, 2018

VIII. Adjournment	Chair Rogers adjourned the meeting at 9:54 a.m.	Audio recording available on the website at <a href="http://dhcd.org/Hospital-Governance-Oversight-Committee">http://dhcd.org/Hospital-Governance-Oversight-Committee</a>
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ATTEST: \_\_\_\_\_

Carole Rogers, Chair/Director  
Hospital Governance and Oversight and Committee

*Minutes respectfully submitted by Andrea S. Hayles, Clerk of the Board*

DRAFT



Date: January 22, 2019

To: Board of Directors

Subject: Hospital Safety and Compliance Inspections Schedule and Dale E. Barnhart – Facilities Inspector Service Agreement

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**Staff Recommendation:** Consideration to approve the Service Agreement for Dale E. Barnhart, Facilities Inspector.

**Background:**

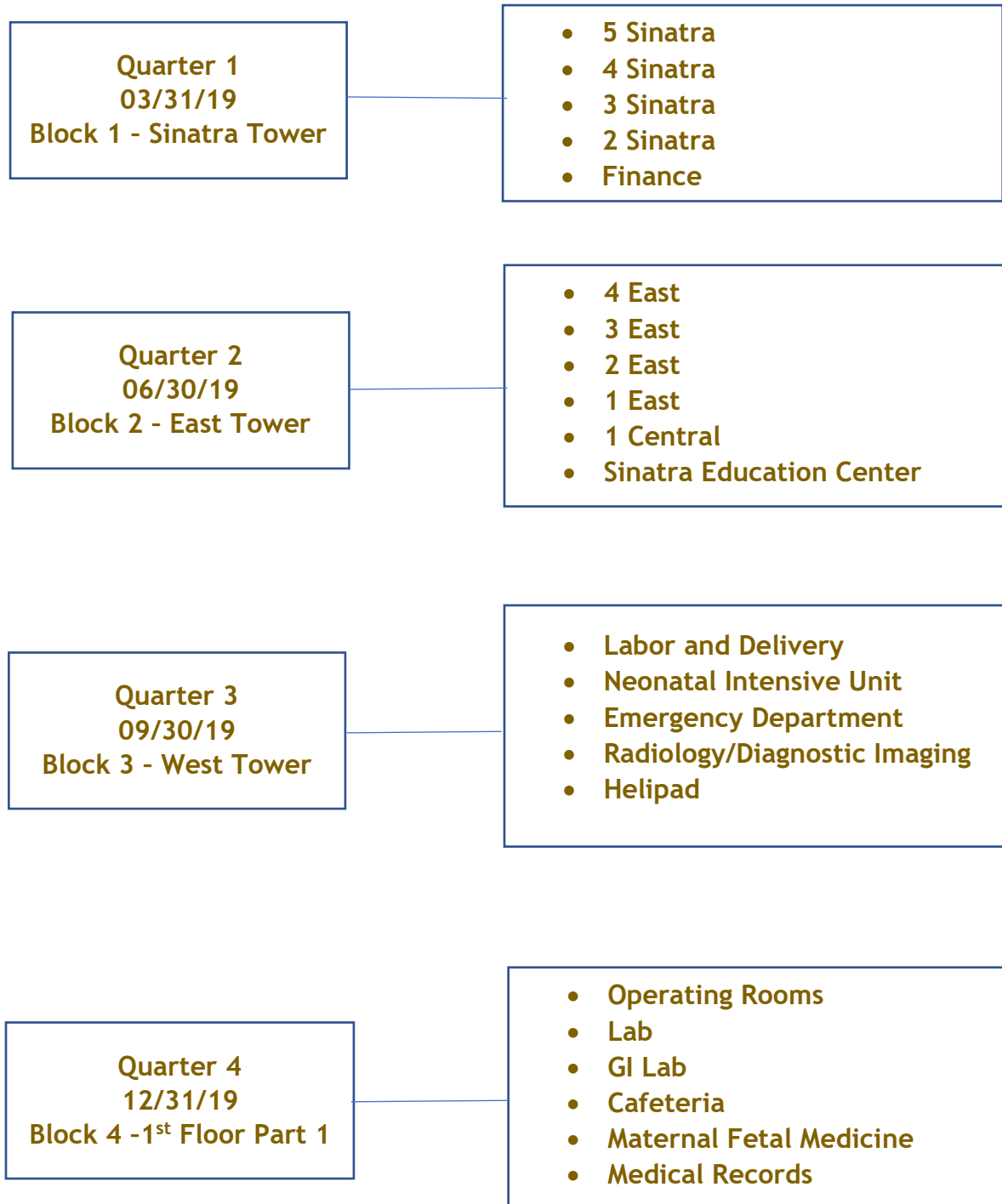
- At the October 18, 2018 Hospital Governance and Oversight Committee (HGOC) meeting, Staff was directed to establish an inspection schedule similar to the schedule of Grossmont Healthcare District and to engage the services of an engineer to conduct quarterly inspections of the DRMC facilities.
- Staff worked with DRMC COO, Michael Ditoro, to establish the Hospital Safety and Compliance Inspection Schedule included in the packet.
- Staff contacted Dale Barnhart, the retired Administrative Director of Facilities Management at DRMC, to facilitate hospital inspection services with DRMC and DHCD Board/Staff.
- Mr. Barnhart's billing rate is \$100/hour.
- The HGOC recommended forwarding to the Board for full approval.
- Staff recommends approval of the Dale E. Barnhart – Facilities Inspector Service Agreement included in the packet.

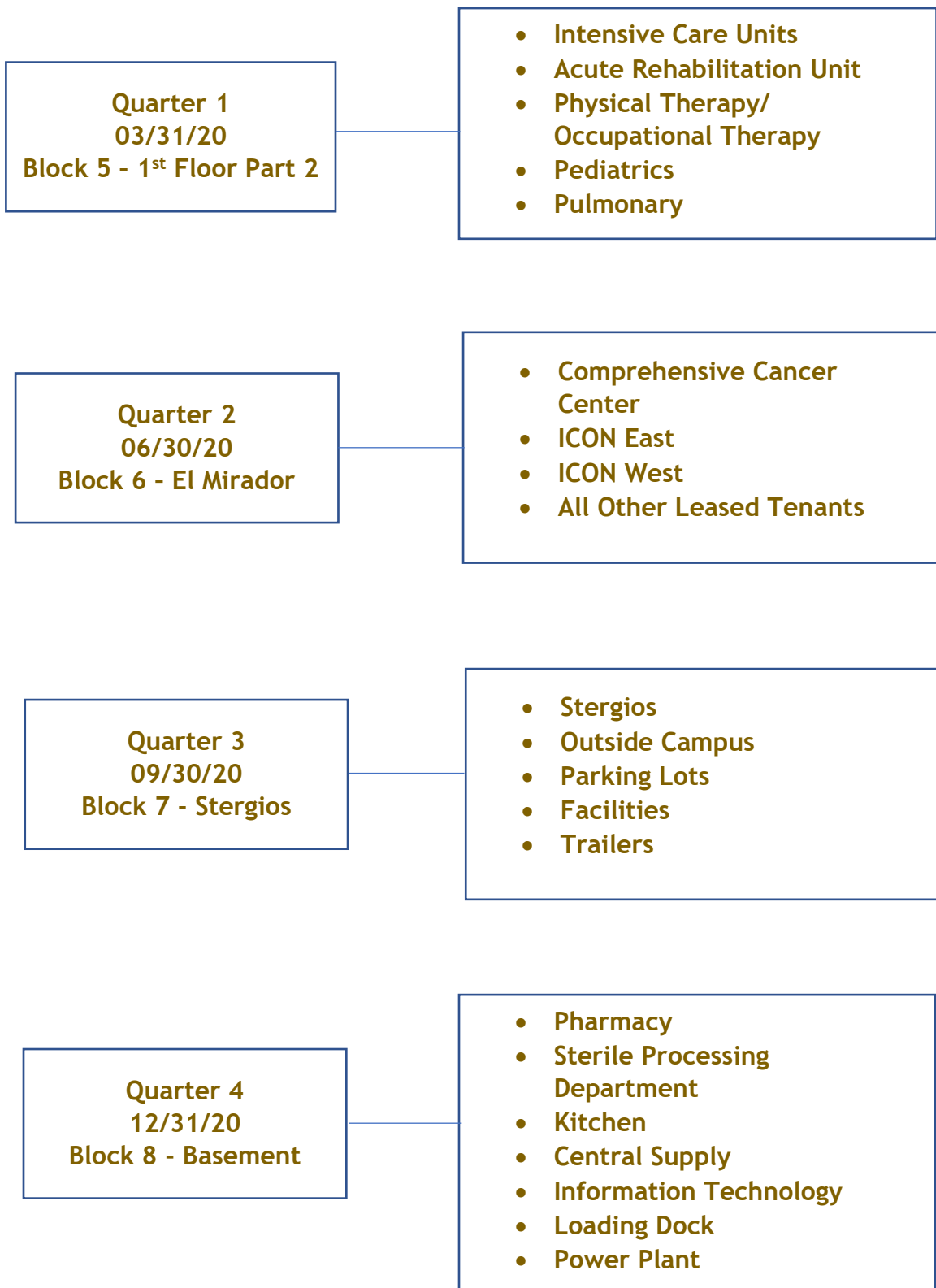
**Fiscal Impact:**

\$100/hr – Estimated 8 hours per quarter – Estimated \$3,200 per year.

Desert Healthcare District  
Desert Regional Medical Center Quarterly Inspection Schedule  
2018-2019

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## **CONSULTING SERVICES AGREEMENT**

This Professional Services Agreement (“Agreement”) is entered into by and between Desert Healthcare District (“District”), a public agency organized and operating pursuant to California Health and Safety Code section 32000 et seq., and Dale E. Barnhart (“Consultant”) as follows:

### **R-E-C-I-T-A-L-S**

1. District would like to retain the professional services of Consultant to conduct ongoing quarterly inspections of Desert Regional Medical Center with District Hospital Governance and Oversight Committee Chair, Co-Chair and applicable hospital personnel as detailed in the 2-year quarterly inspection schedule and provide comprehensive findings/outcomes reports of the quarterly inspections.

2. Consultant has more than 20 years in hospital facility management and inspections and is qualified and possesses the knowledge, skill, expertise, necessary to provide the professional services (“Services”) as outlined in recital 1.

### **C-O-V-E-N-A-N-T-S**

#### **1. CONSULTANT’S SERVICES.**

1.1 Services. Consultant shall provide all labor, materials, equipment, and incidentals necessary to fully and adequately provide the with the professional services described above. All Services shall be performed by Consultant to the reasonable satisfaction of the District.

1.2 Compliance with Laws. In performing the Services, Consultant shall, at all times comply with all applicable laws, rules, regulations, codes, ordinances, and orders of every kind whatsoever issued, adopted, or enacted by any federal, state, or local governmental body having jurisdiction over the Services.

1.3 Performance Standard. Consultant shall perform the Services with efficiency and diligence and shall execute the Services in accordance with the standards of Consultant’s profession, generally described as that degree of skill and care ordinarily exercised by professionals providing similar services as Consultant practicing in California.

1.4 District and Foundation’s Representative. For purposes of this Agreement, the District’s Representative shall be District’s Interim Chief Executive Officer Chris Christensen, located at 1140 North Indian Canyon Drive, Palm Springs, CA 92262. All amendments to this Agreement shall be approved by the District Board.

## **2. FEES AND PAYMENTS.**

2.1 Compensation for Services. For the full and satisfactory performance of the Services, District shall compensate Consultant an amount of \$100 per hour, plus customary expenses.

2.2 Invoices. Consultant shall deliver monthly invoices to the District no later than the 10th day of each month for Services.

2.3 Payment. The District shall remit payment for all amounts due to Consultant within thirty (30) days after receipt of invoices; provided, however, in the event District disputes any portion of Consultant's invoice, it shall timely pay any undisputed amounts invoiced and notify Consultant within thirty (30) days of its receipt of the invoice of the specifics of any disputed amounts. The parties shall expeditiously resolve the subject of any disputed amounts by way of negotiation or, if necessary, mediation. Any such dispute shall not relieve Consultant of its obligation to continue diligently performing the Services.

## **3. TERM & TERMINATION.**

3.1 Term. The term of this Agreement shall run from the date this Agreement is fully executed until December 31, 2020, subject to Section 1.3 above or the District's right to terminate sooner for convenience. Service agreement may be extended with written agreement of both District and Consultant.

3.2 Termination for Convenience. District may, at any time in the exercise of its sole discretion, terminate this Agreement in whole or in part, with or without cause, by providing thirty (30) days notice to Consultant of its intention to terminate the Agreement for convenience. Consultant may, at any time in the exercise of its sole discretion, terminate this Agreement in whole or in part, with or without cause, by providing thirty (30) days notice to District of its intention to terminate the Agreement for convenience. So long as Consultant is not in default under this Agreement at the time of such termination, District shall pay Consultant for all Services incurred up to and including the date of termination.

## **4. INDEPENDENT CONTRACTOR.**

District has retained Consultant to provide, and Consultant shall perform, the Services as an independent contractor maintaining exclusive direction and control over its employees; and, no personnel utilized by Consultant to perform the Services are employees of the District.

## **5. OWNERSHIP OF DOCUMENTS.**

All deliverables and other documents generated by Consultant in the performance of the Services, including all work papers, work-in-progress, designs, documents, data, ledgers, journals and reports prepared by Consultant as a part of Consultant's Services shall belong to and be subject to the sole ownership and use of the District. The provisions of this Paragraph 5 shall survive any termination of this Agreement.

## **6. INDEMNIFICATION.**

Consultant agrees to indemnify and hold the District, its governing body, officers, employees, representatives, agents, successors and assigns (collectively the District Indemnities), harmless from and against any and all losses, liabilities, claims, causes of action or costs and expenses of whatever nature or kind, incurred or suffered by the District or the District Indemnities including indemnity claims arising by reason of any personal injury of any person or property loss, loss of use, or damage, to the extent the same arise out of or in connection with the negligent act(s) or omission(s), recklessness, or willful misconduct of Consultant, its officers, employees, subcontractors, or representatives, relating to the performance of the services outlined in this Agreement.

## **7. NOTICE.**

All notices to be given under this Agreement shall be in writing and shall be deemed effective upon receipt when personally served or two days after mailing by certified, return receipt requested, to the following addresses:

To: District  
Desert Healthcare District  
Attention: Chris Christensen, Interim Chief Executive Officer  
1140 N. Indian Canyon Drive  
Palm Springs, California 92262

To: Consultant  
Dale E. Barnhart  
78586 Gorham Lane  
Palm Desert, CA 92211

## **8. MISCELLANEOUS PROVISIONS.**

8.1 Venue. Venue shall lie only in the federal or state courts nearest to the City of Palm Springs, in the County of Riverside, State of California.

8.2 Modification. This Agreement may not be altered in whole or in part except by a modification, in writing, executed by all the parties to this Agreement.



8.3 Entire Agreement. This Agreement, together with all Schedules attached, contains all representations and the entire understanding between the parties with respect to the subject matter of this Agreement. Any prior correspondence, memoranda, or agreements, whether or not such correspondence, memoranda, or agreements are in conflict with this Agreement, are intended to be replaced in total by this Agreement and its schedules.

8.4 Assignment. Consultant shall not be entitled to assign all or any portion of its rights or obligations contained in this Agreement without obtaining the prior written consent of the District. Nothing in this Agreement shall obligate the District to give such consent. Any purported assignment without the District's consent shall be void.

8.5 Binding Effect. This Agreement shall inure to the benefit of and be binding upon the parties and their respective purchasers, successors, heirs, and assigns.

8.6 Unenforceable Provisions. The terms, conditions, and covenants of this Agreement shall be construed whenever possible as consistent with all applicable laws and regulations. To the extent that any provision of this Agreement, as so interpreted, is held to violate any applicable law or regulation, the remaining provisions shall nevertheless be carried into full force and effect and remain enforceable.

This Agreement is entered into in the County of Riverside, State of California.

"District":

Desert Healthcare District

"Consultant":

Dale E. Barnhart

By: \_\_\_\_\_  
Jennifer Wortham, DrPH, President

By: \_\_\_\_\_  
Dale E. Barnhart

Date: \_\_\_\_\_

Date: \_\_\_\_\_



Date: January 22, 2019

To: Board of Directors

Subject: Rauch Communications Consultants, Inc. – Timeline to Commence Workshops, Trainings, and Developments

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**Staff Recommendation:** Begin scheduling interviews per the Consultants recommendations included in the packet

**Discussion:**

- The Board approved at the December 18, 2019 Board meeting the Service Agreement for Rauch Communications Consultants, Inc.
- Included in the packet is a recommendation by the Consultant to begin scheduling interviews with Directors and key staff the second half of February.
- Staff recommends scheduling Rauch Communications Consultants, Inc. per his recommendations.

**Fiscal Impact:**

\$8,820, plus expenses (previously approved)

**Dynamic Public Outreach, Smart Strategic Planning***For local governments, special districts, and the engineering, environmental and law firms that support them.*

**DATE:** January 16, 2019 **NO OF PAGES:** 2  
**TO:** Chris Christensen, Interim CEO Desert Health Care District  
**FROM:** Martin Rauch  
**RE:** Schedule

Below are suggestions about timing for the planned facilitated planning process.

**Considerations.** There are a couple of considerations raised by the District in terms of timing:

New Board Members. In our experience a facilitated planning process provides an excellent opportunity for new Board members to be introduced to a wide range of issues facing them as directors that would otherwise take months. Since many of the issues proposed to be covered in this process are Board-related, it makes sense to deal with them soon.

CEO Recruitment Timing. Our understanding is that the District will initiate recruitment of a permanent CEO in the coming months. If so, we suggest moving forward on the first steps (interviews, workshop and report) and postponing the final expected steps in this process: finalize long-term goals, objectives, priorities and work plan so the new, permanent CEO can participate. If the recruitment is going to be delayed substantially, it might make sense to go ahead and complete both the initial steps and then go on to take the second step and complete the goals, objectives and priorities for the coming year or more and have the interim CEO develop a work plan to implement those priorities.

Other Considerations. It is our recommendation that it would be beneficial for the initial planning process to be conducted soon because it would be likely to achieve most or all of the following:

- Identify ways for the Board to work more effectively together and to develop initial goals and priorities.
- assist the Interim CEO by providing some initial policy direction and better understanding of Board priorities.
- Clarify Board and Manager roles and relationships.
- Having the board clarify how it will work effectively together and initiate a process for developing goals and priorities will make the District more attractive to many potential CEOs because it increases clarity and a sense of board effectiveness and stability.

**Timing.** If the District decides to move forward soon, we could begin the process in about a month, with interviews being conducted in the second half of February and the workshop in the first half of March or so, finalizing the process in April or so. If the Board chooses to delay – we will coordinate on an appropriate time to begin in the future.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mat Rauch', with a stylized, cursive script.

Martin Rauch  
President



Date: January 22, 2019

To: Board of Directors

Subject: Training dates for AB 1234 Ethics and AB 1825 Sexual Harassment

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**Staff Recommendation:** Consideration to move forward with full District and Board staff training performed by Best Best and Krieger Attorneys at Law (BBK).

**Background:**

- District Policy BOD -14 – Ethics training and education training relating to workplace harassment – requires all Board members and staff to receive training.
- AB 1661 – September 2016 bill summary. This bill requires local agency officials to receive two hours of sexual harassment prevention training and education within the first six months of taking office or commencing employment, and every two years thereafter. The requirements of the bill apply only if a local agency provides any type of compensation, salary, or stipend to its local agency officials. Pursuant to the definitions provided in the bill, its requirements would apply to any member of a legislative body and any elected official of cities and counties (including charter cities and charter counties), and special districts.
- Training of all Board and staff will meet one of the requirements for accreditation from CASD.
- Staff research local firms who can perform all required training on-site.
- Based on history, it is the staff's consensus to recommend working with BBK – Joseph Ortiz and Shane Haviva.

**Potential Dates Available:**

February 19 and 20, 2019  
March 4 and 6, 2019

**Fiscal Impact:**

Contract services not to exceed \$3,000



Date: January 10, 2019

DHCD Progress Report #2018-4 for reporting period: October 1, 2018 to December 31, 2018

Grantee: Coachella Valley Association of Governments (CVAG)

Project Title: CV Link Project

Project Manager/ Contact: Martin Magaña, Director of Transportation ([mmagana@cvag.org](mailto:mmagana@cvag.org))

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1. Provide a brief summary of the organization and the objectives of the project.

The Coachella Valley Association of Governments (CVAG) is a regional Joint Powers Authority that serves the nine cities, the County of Riverside, and three Indian Tribes within the Coachella Valley. CVAG's jurisdiction stretches across eastern Riverside County, and its membership includes the City of Blythe on the California-Arizona border. Blythe is not part of this project.

CV Link is an alternative transportation corridor that runs generally along the levee of the Whitewater River that will ultimately stretch from the northwest corner of the CVAG area (Desert Hot Springs) to the southeast corner (the Salton Sea). The core project that is going through design, engineering and environmental will stretch from the City of Palm Springs to the City of Coachella. The project approved under the Final Environmental Impact Report is approximately 40 miles but, does not extend through the Cities of Rancho Mirage or Indian Wells. It will provide significant environmental, health, and economic benefits to generations of current and future residents and visitors. CV Link will connect users to employment centers, shopping centers, schools, and recreational opportunities. Dual paths are planned to accommodate bicycles, low-speed electric vehicles and pedestrians. This alternative transportation corridor will enable healthier lifestyles, spur economic innovation, and make the Coachella Valley a more sustainable and appealing place to live, work and play.

2. Summarize work completed during reporting period.

Construction is one-hundred percent complete on the 2.3 mile stretch of CV Link between Vista Chino in Palm Springs and Ramon Road in Cathedral City. All furnishings (shade structures, benches, trash cans, water fountains and landscaping) have been installed.



CVAG is working with Cathedral City staff to close out the project. In the last quarterly report, it was mentioned that the manufacturer was late in meeting the delivery schedule for construction of fencing around a well site adjacent to the CV Link path near Ramon Road in Cathedral City. This has now been completed.

Also, in the last quarterly report, it was mentioned that the City of Palm Springs was going to rebid the Tahquitz Creek Levee Reconstruction Project to change the path from its original design of asphalt to meet CV Link standards. CVAG agreed to pay for the difference in cost between the original design and the CV Link design. The City rebid the project and the City Council awarded a construction contract to Spiess Construction in May 2018. The City held a pre-construction meeting in June 2018 and anticipated starting construction starting by the end of July 2018. However, due to construction scheduling conflicts and operations related to Tahquitz Creek Golf Course, construction started in late August 2018. The path in this area is approximately 95% complete and is anticipated to be completed by early 2019.

CVAG continues to work with the County of Riverside Economic Development Agency (EDA) on right-of-way services. EDA continues to obtain appraisals and has sent out multiple offer packages to property owners to acquire Right-of-Way. In October 2018 CVAG received approval from Coachella Valley Water District (CVWD) on the License Agreement for CV Link. In addition, in November 2018, CVAG also received approval from Riverside County Flood Control & Water Conservation (RCFC&WCD) on the License Agreement for CV Link. This allows CV Link to be constructed on their properties, which a majority of it is on the levees of the flood channels. Final design continues in the cities of Palm Desert and Palm Springs. Due to some revisions requested from the jurisdictions, 100% plans are anticipated to be completed by early 2019.

In late 2018, CVAG worked with U.S. Fish and Wildlife Service (USFWS) to complete the process for the Casey's June Beetle Habitat Conservation Plan related to a favorable Biological Opinion.

3. What challenges and opportunities have you encountered in accomplishing this portion of your Scope of Work?

The acquisition of Right-of-Way continues to be challenging due to multiple property owners (private, public and tribal). As mentioned above, CVAG received approval of the license agreements from Coachella Valley Water District (CVWD) Riverside County Flood Control & Water Conservation (RCFC&WCD) in October 2018 and November 201, respectively. This is a major milestone in that it provides a significant amount of Right-of-Way for construction of CV Link. CVAG continue to work with EDA to complete appraisals and send offer packages out. It is still anticipated that significant Right-of-Way will be acquired by early 2019.



4. Is your project on schedule?

In the last quarter, it was reported that there was a delay in the schedule due to Caltrans' process in approving the NEPA document. Now that the NEPA document has been approved, CVAG is completing final design and construction and specifications documents of CV Link for construction bidding.

Right-of-way activities continue, as scheduled, as additional appraisals are prepared. Offer packages will continue to be sent out to property owners to acquire the Right-of-Way for CV Link construction.

5. Provide an update on the financial report for the project.

CVAG has received funding from various sources related to CV Link [Strategic Growth Council (SGC), Riverside County Parks Department (RivCoParks), Active Transportation Program (ATP), SB1, South Coast Air Quality Management District (SCAQMD), Congestion Management Air Quality (CMAQ), Desert Healthcare District (DHCD), State Transportation Improvement Program (STIP), State Bicycle Transportation Account (BTA), CVAG]. To date, approximately \$100 million in funding for CV Link has been received. Expenditures to date for specific funds include the following:

Fund Type	Amount Approved	Amount Expended	Balance
ATP/PAED	\$7,000,000	\$7,000,000	\$0
CMAQ/PAED	\$900,000	\$900,000	\$0
CMAQ/PS&E	\$1,100,000	\$137,000	\$963,000
ATP Right-of-Way	\$2,828,000	\$211,000	\$2,617,000
SCAQMD	\$16,400,000	\$2,750,988.23	\$13,649,012

6. Work planned for next reporting period.

In the next reporting period, CVAG anticipates that the 4,100 lineal foot segment of CV Link in the City of Palm Springs along the top of the Tahquitz Creek Levee between Demuth Park and Gene Autry Trail will be completed.

CVAG is finalizing the punch list of outstanding items on the 2.3-mile CV Link segment in the cities of Cathedral City and Palm Springs. This was anticipated to be completed by late 2018 but due some delays on behalf of the contractor it will now be completed in early 2019.

CVAG will continue to send out offer packages and acquire additional Right-of-Way for CV Link and work with the design consultant to complete final design, construction documents and specifications for bidding in 2019.



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*Of Counsel*  
JAMES R. DODSON

DATE: January 16, 2019

TO: Board of Directors,  
Desert Healthcare District  
Chris Christensen, Interim CEO

FROM: Jeffrey Scott, General Counsel

RE: **Legislative Report – Governor Newsom Releases \$209 Billion Budget**

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On January 10, 2019, newly sworn in Governor Newsom released his budget for the 2019-2020 fiscal year. He outlined the \$209 billion spending plan which was an increase in spending by 6% over last year. The budget reflects confidence in a strong economy, but Governor Newsom did adopt some of the same talking points from Governor Brown on expressing caution about an impending downturn which Newsom mentioned could result in as much as a \$70 billion decline in state revenue over a three-year period. Even with his note of caution, he still has proposed an ambitious and aggressive budget in the healthcare area.

Going back to when Newsom was a candidate for Governor, he was quoted as being supportive of moving to a single payer healthcare system. Over time, after facing criticism from various groups over this support, he tempered his comments to acknowledge the challenges with both healthcare stakeholders and the current federal administration. In Governor Newsom's first actions as Governor earlier this month, he sent a letter to President Trump requesting the federal government be more supportive of his desire to pursue a single payer health system. Looking at the letter from a political perspective, one could see Governor Newsom showing his desire to explore a single payer system but acknowledging the need for federal support. The details of his budget for healthcare also signal his recognition that a quick path to a single payer system is not realistic.

The healthcare details of Newsom's budget proposal include:

- Expanding coverage for undocumented aliens in California from those up to the age of 19 to up to 26.
- Have California put in place an individual mandate to have health insurance. Like the mandate through the ACA that is currently not being enforced, non-compliance will result in a penalty.
- Funds raised through the penalty will be used to increase subsidies for those between 250% and 400% of the federal poverty line and expand subsidies to those from 400% to 600% of the federal poverty line.
- Create a single payer system for prescription drugs in the Medi-Cal program. This system will transition all pharmacy services for Medi-Cal managed care to a fee-for-service benefit. This is intended to increase drug rebate savings and help secure better prices. This proposal is estimated to result in savings of hundreds of millions of dollars in savings by 2021.
- There were a number of new programs to increase funding related to mental health care and homelessness.
  - \$50 million for training for workforce programs to increase mental health providers. The Governor mentioned expecting universities, clinics, and philanthropic organizations to also contribute to this effort as a shared investment. No details were provided.
  - \$25 million to better detect and intervene when young people have had or are at high risk of experiencing psychosis.
  - \$100 million for whole person care pilot programs whose focus is on coordinating health, behavioral health, and social services with an emphasis on providing additional supportive housing for people with mental illness.
  - Following the passing of the No Place Like Home initiative which approved a \$2 billion bond program to provide supportive housing for people experiencing mental illness, the Administration will accelerate bond awards, combined with additional tax credits and other state investments to increase the production of affordable housing.
- Increase Prop 56 Tobacco Tax monies to be used to increase provider reimbursements in Medi-Cal. In years past the additional funds have been used to increase codes for primary and psychiatry care. It is not known if other codes will be expanded.

Besides the budget, the legislative year has started, and bills are slowly being introduced. The deadline for introducing bills is February 22<sup>nd</sup>.