

MARIN HEALTHCARE DISTRICT

100-B Drake's Landing Road, Suite 250, Greenbrae, CA 94904

www.marinhealthcare.org

Telephone: 415-464-2090

info@marinhealthcare.org

Fax: 415-464-2094

TUESDAY, SEPTEMBER 12, 2023

BOARD OF DIRECTORS

5:30 PM: REGULAR OPEN MEETING

Board of Directors:

Chair: Brian Su, MD (Division 3)
Vice Chair: Edward Alfrey, MD (Div. 5)
Secretary: Ann Sparkman, RN/BSN, JD (Div. 2)
Directors: Jennifer Rienks, PhD (Div. 4)
Samantha Ramirez, BSW (Div. 1)

Staff:

David Klein, MD, MBA, CEO
Eric Brettner, CFO
Colin Leary, General Counsel
Louis Weiner, Executive Assistant

Location for Board:

MarinHealth Medical Center, Inverness Room
250 Bon Air Road, Greenbrae CA

Public via Zoom video:

<https://mymarinhealth.zoom.us/join>

Meeting ID: 967 6302 6660

Passcode: 783310

Or via Zoom telephone: 1-669-900-9128

AGENDA

5:30 PM: REGULAR OPEN MEETING

	<u>Presenter</u>	<u>Tab #</u>
1. Call to Order and Roll Call	Su	
2. General Public Comments <i>Any member of the audience may make statements regarding any items NOT on the agenda. Statements are limited to a maximum of three (3) minutes. Please state and spell your name if you wish it to be recorded in the minutes.</i>	Su	
3. Approve Agenda (action)	Su	
4. Move to reconfirm findings under Assembly Bill 361 and extend Resolution MHD 2023-02 to continue virtual meetings of the Marin Healthcare District Board of Directors (action)	Su	#1
5. Approve Minutes of the Regular Meeting of August 8, 2023 (action)	Su	#2
6. Update: Public Health Priorities in Marin 2023-24	Matt Willis, MD	#3
7. Update: Access to Primary Care in Marin	Klein	
8. Healthcare Advocacy and Emerging Challenges and Trends	Klein	

The agenda for the meeting will be posted and distributed at least 72 hours prior to the meeting.
In compliance with the Americans with Disabilities Act, if you require accommodations to participate in a District meeting please contact the District office at 415-464-2090 (voice) or 415-464-2094 (fax) at least 48 hours prior to the meeting.
Meetings open to the public are recorded and the recordings are posted on the District web site.

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TUESDAY, SEPTEMBER 12, 2023

BOARD OF DIRECTORS

5:30 PM: REGULAR OPEN MEETING

9. Committee Reports

- | | | |
|--|----------------|----|
| A. MHD/MHMC Boards Joint Nominating Committee (<i>met Sept. 6</i>) | <i>Klein</i> | |
| B. Finance & Audit Committee (<i>next meets Oct. 24</i>) | <i>Alfrey</i> | |
| C. Lease & Building Committee (<i>met August 23</i>) | <i>Rienks</i> | |
| (i) MHD Re-branding RFP (action) | | |
| (a) Summary | | #4 |
| (b) The Visual Factory | | #5 |
| (c) CP Creative Studio | | #6 |
| (d) AreaBeats | | #7 |
| (ii) Community Health Seminar, "Skin Cancer" | | |
| (iii) MHD "We Care About Your Health" Fair, August 26 | <i>Ramirez</i> | #8 |

10. Reports

- | | |
|---------------------------------------|--------------|
| A. District CEO's Report | <i>Klein</i> |
| B. Hospital CEO's Report | <i>Klein</i> |
| C. Chair's and Board Members' Reports | <i>All</i> |

11. Agenda Suggestions for Future Meetings *All*

12. Adjournment of Regular Meeting *Su*

Next Regular Meeting: Tuesday, October 10, 2023 @ 5:30 p.m.

Tab 1



MARIN HEALTHCARE DISTRICT BOARD OF DIRECTORS
RESOLUTION NO. MHD 2023-02
RESOLUTION AUTHORIZING REMOTE TELECONFERENCE MEETINGS
PURSUANT TO AB 361

WHEREAS, all Marin Healthcare District (“District”) meetings are open and public, as required by the Ralph M. Brown Act (Cal. Gov. Code 54950 – 54963); and

WHEREAS, on March 4, 2020, Governor Newsom declared a State of Emergency to make additional resources available, formalize emergency actions already underway across multiple state agencies and departments, and help the State prepare for a broader spread of the novel coronavirus disease 2019 (“COVID-19”); and

WHEREAS, on March 17, 2020, in response to the COVID-19 pandemic, Governor Newsom issued Executive Order N-29-20 suspending certain provisions of the Ralph M. Brown Act in order to allow local legislative bodies to conduct meetings telephonically or by other means; and

WHEREAS, as a result of Executive Order N-29-20, District staff set up virtual meetings for all meetings of the District Board of Directors and its committees (collectively, “District Meetings”); and

WHEREAS, certain teleconferencing allowances were made under subsequently-enacted AB 361 (2021) and AB 2449 (2022) that replaced now-repealed Executive Order N-29-20; and

WHEREAS, AB 361 (2022) was signed on September 13, 2022 and is in effect through January 1, 2024, and among other things provides in Government Code 54953(e) that (i) a legislative body may use teleconferencing if it holds a meeting during a proclaimed state of emergency and state or local officials have imposed or recommended measures to promote social distancing, which the Board of Directors have done, and (ii) a legislative body may continue using the teleconferencing procedures of AB 361 provided that it makes renewed findings by majority vote every thirty (30) days that it has considered the circumstances of the state of emergency, and that either (a) the state of emergency continues to directly impact the ability of the members to meet safety in person, or (b) state or local officials continue to impose or recommend measures to promote social distancing; and

WHEREAS, the Board of Directors desires to make findings and determinations consistent with AB 361 for District Meetings to utilize the special procedures for teleconferencing provided therein due to imminent risks to the health and safety of attendees; and

WHEREAS, highly contagious Delta and Omicron COVID-19 variants are in circulation, causing increases in COVID-19 cases throughout the State and Marin County; and

WHEREAS, on February 28, 2023, Governor Newsom proclaimed that the State of Emergency declared on March 4, 2020 was no longer in effect; and

WHEREAS, state and local officials continue to impose or recommend measures to promote social distancing, including without limitation through COVID-19 Prevention Non-Emergency Regulations issued by the State of California’s Department of Industrial Relations (the “COVID-19 Prevention Regulations”) that took effect on February 4, 2023; and

Resolution MHD 2023-02

Page 2 of 2

WHEREAS, the CDC continues to recommend source control and physical distancing for everyone in a healthcare setting; and

WHEREAS, the District Board of Directors hereby finds that the continued presence of COVID-19 and the increase of cases due to new variants would present imminent risks to the health or safety of attendees, including the legislative bodies and staff, should District Meetings be held in person.

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of the Marin Healthcare District, that (i) the above recitals are true and correct, and incorporated into this Resolution, and (ii) the Board of Directors makes the following findings: (a) The Board of Directors has considered the circumstances of the State of Emergency, (b) the COVID-19 Prevention Regulations evidence imposition or recommendation of measures to promote social distancing by state and local officials, (c) the CDC continues to recommend source control and physical distancing for everyone in a healthcare setting, and (d) as a result of the presence of COVID-19 and the increase of cases due to the new variants, meeting in person would present imminent risks to the health or safety of attendees, the legislative bodies and staff; and

RESOLVED, FURTHER, that District Meetings may continue to meet remotely in compliance with AB 361 (2022), in order to better ensure the health and safety of the public; and

RESOLVED, FURTHER, that the District Board of Directors will revisit the need to conduct District Meetings remotely within thirty (30) days of the adoption of this resolution.

REVIEWED, APPROVED, AND ADOPTED at a Regular Board Meeting held on the 9th of May, 2023, by the following vote, to wit:

AYES:	Su, Alfrey, Sparkman, Rienks, Ramirez
NOES:	0
ABSENT:	0
ABSTAIN:	0

ATTEST:



Brian Su, MD
Chair of the Board



Ann Sparkman, RN/BSN, JD
Secretary of the Board

Tab 2



**MARIN HEALTHCARE DISTRICT
BOARD OF DIRECTORS**

REGULAR MEETING

**Tuesday, August 8, 2023 @ 5:30 pm
Via Zoom Teleconference**

MINUTES

1. Call to Order and Roll Call

Chair Su called the Regular Meeting to order at 5:32 pm.

Board members present: Chair Brian Su, MD; Vice Chair Edward Alfrey, MD; Secretary Ann Sparkman, RN/BSN, JD; Jennifer Rienks, PhD; Samantha Ramirez, BSW

Staff present: David Klein, MD, CEO; Eric Brettner, CFO, Colin Leary, General Counsel; Louis Weiner, EA

2. General Public Comment

April Gorham, RN, and Anya Kosakowska, RN each commented on employee morale, labor relations, patient safety, nurse staffing and workflow, and management practices.

3. Approve Agenda

Dr. Alfrey moved to approve the agenda. Ms. Ramirez seconded. **Vote: all ayes.**

4. Move to reconfirm findings under Assembly Bill 361 and extend Resolution MHD 2023-02 to continue virtual meetings of the Marin Healthcare District Board of Directors

Ms. Sparkman moved to approve. Ms. Rienks seconded. **Vote: all ayes.**

5. Approve Minutes of the Regular Meeting of July 11, 2023

Ms. Sparkman moved to approve the minutes as presented. Ms. Rienks seconded. **Vote: all ayes.**

6. Report: MHMC Behavioral Health Program

Ms. Rebecca Maxwell, LCSW, Director of Behavioral Health, presented the report (Tab #3) on the MarinHealth Behavioral Health service line of hospital-based programs and ambulatory programs.

The hospital-based programs comprise:

- Acute Inpatient Unit (only inpatient psych unit in Marin; 17 beds always full; average length of stay 10-11 days; 95th percentile excellent overall quality of care; majority payors are Medi-Cal and Medicare)
- Partial hospitalization and intensive outpatient program (individually tailored plans, length of stay 2-12 weeks)
- Inpatient and outpatient electroconvulsive treatment (ECT)



- Social services and psychiatric emergency services (25 LCSW on staff; 5150 facility; 24/7 access to emergency services)
- Psychiatric consultation-liaison service (medical and psychiatric care concurrently)
- Substance use navigator (grant funded consultant)

The ambulatory programs are provided at the MarinHealth psychiatry clinic in Novato:

- Since opening Sept. 1, 2021, about 5,800 patient encounters, over 650 total unique patients, 5 established therapy programs
- Two psychiatrists, including a child and adolescent provider, and three clinical social workers
- Adding another child and adolescent provider in September, and opening of adolescent intensive outpatient program in Q1 2024
- Upcoming is partnering support with specialty services and primary care
- Therapeutic spaces include save and therapeutic environment and soothing garden and patio

Dr. Su commented on the majority of behavioral health patients being on Medi-Cal, and the low reimbursement rates. Ms. Rienks noted the importance of addressing social determinants of health, that Medi-Cal patients are disproportionately represented. She commented on the need to expand mental health services for physicians; Ms. Maxwell noted that this is being included in the collaborative care model.

Dr. Klein acknowledged that expanding space and staffing for adolescent therapy programs is proceeding, including a generous philanthropic gift.

Ms. Sparkman asked about the application of ECT procedures, and Ms. Maxwell noted that it's responsive not just for depression but for other conditions not effectively treated with medications.

Mr. Brettner explained the District's financial commitment to support the behavioral health programs. For the inpatient program, the District has been providing \$200,000 per year since 2016. For the outpatient clinic, the District is providing \$315,000 over 3 years (\$125K for 2022, \$90K for 2023, and \$100K for 2024).

Sustainability of the programs was discussed, and will require further discussion and consideration of the Board. Dr. Klein noted that sustaining support will be needed from the District as well as from other sources such as philanthropy, the County, etc. Ms. Rienks added that, even though inpatient behavioral health is not able to be self-sustaining, the District should also support other community programs as well, as was done in the past. She further added that support for behavioral health care is a major issue warranting high level advocacy.

The next item of discussion in this meeting will be the review and approval of the District's 2024 budget that will include these line items.

7. Review and Approve Marin Healthcare District FY 2024 Operating Budget as Recommended by the Finance & Audit Committee

Mr. Brettner presented (Tab #4) the District FY 2024 Operating Budget as reviewed and recommended by the Finance & Audit Committee on July 25, 2023.



Budget assumptions for income include 4.2% increase in rental income that may be slightly different in the final amount since the percentage increase is determined by the Federal 2023 CPI that won't be determined until year end. Lease interest revenue is subjected to a new GASB accounting rule, which impact is negligible. Investment earnings are based on the current yield of March 2023.

Budget assumptions for expenses include an estimated \$200K for the Board member election, an unknown that will be determined by the number of candidates and initiatives on the final ballot. As discussed earlier in this meeting, support for the Hospital's Behavioral Health program is \$200K, and for the Network's Clinical Behavioral Health program is \$100K. Advertising and Community Education were increased to cover the planned increased activity in the community health seminar/webinar events, reports, and website upgrade.

Net Operating Income before Depreciation and Bond-Related is budgeted to be \$36,005. Expected cash on hand at the end of 2024 is budgeted to be about \$4.5M

Dr. Klein and Mr. Brettner commented on the continued delays in the process of FEMA reimbursement to the District and the Hospital.

Dr. Su asked for a motion to approve the Marin Healthcare District 2024 Operating Budget. Dr. Alfrey moved to approve, and Ms. Sparkman seconded. **Vote by roll call: all ayes.**

8. Review and Approve District Corporate Investment Portfolio Policy as Recommended by the Finance & Audit Committee

Dr. Klein explained that the District's investments have been managed by the Hospital Board's Investment Committee, with holdings completely in fixed income. Recently, the MHD Finance & Audit Committee has requested that the District directly exercise fiduciary oversight and manage its own funds, and to allow for diversification that would include equity holdings. Working with the investment advisors Canterbury Consultants and the MHMC Investment Committee, the MHD Finance & Audit Committee has reviewed the revised Investment Policy and is recommending it to this Board for approval.

Mr. Brettner made several key points: Canterbury has been advisor for the past several years and MHMC will retain them, and the District will continue to use them, and may choose a different firm if desired. The Hospital will continue to pay the investment advisor's full fees that include the fees for services to the District. Allocation ranges of assets are indicated in Appendix B of the Policy: Equity (0%-30%), Fixed Income (0%-100%), Cash (0%-25%). Canterbury will attend the regular quarterly meetings of the Finance & Audit Committee.

Dr. Su asked for a motion to approve the revised Investment Portfolio Policy as presented. Dr. Alfrey so moved. Mr. Rienks seconded. **Vote by roll call: All ayes.**

9. Approve Q1 2023 Report of MHMC Performance Metrics and Core Services

Dr. Klein presented the report, noting that all Tier 1 and Tier 2 metrics are fully in compliance.

Schedule 1: HCAHPS – Ms. Seaver-Forsey noted accomplishments and areas for improvement. The data table showed metrics by month rather than by quarter (as in the past) better to highlight improvements, and she commented on those improvements and areas for



improvement. Dr. Klein commented on the measures and initiatives contributing to the improvements. Ms. Rienks addressed the format of the table, urging that data for sequential quarters continue to be presented for purpose of comparison, showing progress or lack of progress, rather than 3 individual months (one quarter) as presented here. Dr. Klein and Ms. Seaver-Forsey agreed to present as requested going forward.

Schedule 2: Finances – EBIDA continues strong, and all loan debt service coverages are met. Key service volumes are on track for significant increases.

Schedule 3: Clinical Quality Reporting Metrics – Dr. Klein prefaced the report by announcing that MHMC has just been awarded the CMS 5-Star Hospital Rating for the first time in our history, and that only 12% of hospitals in the nation have the CMS 5-Star Rating. The Rating is predicated on quality scores, including HCAHPS.

Ms. Seaver-Forsey presented the Quality Management Dashboard, commenting on data for mortality, readmission, length of stay, and for metrics on hospital acquired infections, sepsis and harm events, most of which are trending positively. Dr. Alfrey commented on length of stay increases and suggested there be improvements in case management and discharge processes.

The Core Measures Dashboard represent the complete number of metrics that were submitted to CMS for the 5-Star Rating.

Schedule 4: Community Benefit Summary – For Q1 2023 total cash and in-kind donations are nearly \$8M, and total community benefit and unpaid cost of Medicare are nearly \$44M.

Schedule 5: Nursing Turnover, Vacancies, Net Changes – Turnover, rate has shown considerable improvement, while vacancy rate and net change show some improvement.

Schedule 6: Ambulance Diversion – There were 4 occurrences in February, and none in each of January and March. Dr. Klein commended Dr. Alfrey and the Emergency team.

Dr. Su asked for public comment. Anya Kosakowska, RN, commented on nurse staffing and leadership.

Dr. Su asked for a motion to approve the Q1 2023 Report. Ms. Rienks so moved. Dr. Alfrey seconded. **Vote: All ayes.**

10. Magnet Recognition Program

At the previous Board meeting Dr. Klein explained that efforts at pursuing Nursing Magnet status were paused due to the pandemic and other factors, but that key concepts have been retained and the goal of attainment continues.

Ms. Seaver-Forsey reported (Tab # 7) an overview of the Magnet Designation Program, the benefits of Magnet status, and the business case for Magnet designation. There are about 600 Magnet hospitals internationally, about 10% of all hospitals in the nation, and several in the Bay Area. Designation is voluntary, not regulatory, and must be renewed every 4 years.

Benefits include generally higher quality and patient safety, patient outcomes, and cost advantages. Magnet designation is a core strategy to address nursing turnover, and has a global impact over the entire organization.

Dr. Klein expressed confidence that MHMC has the abilities, strengths and desires, and the infrastructure, to achieve Magnet status. Ms. Rienks added that this has been a stated goal ever since 2010 when the hospital became independent of Sutter.



Ms. Rienks and Ms. Sparkman strongly expressed support for pursuing Magnet status. Dr. Alfrey and Ms. Ramirez expressed concern that hospital culture, including patient satisfaction scores, need improving before the hospital is in a position to apply for Magnet designation. Ms. Seaver-Forsey responded that the process of preparing the application in itself can help improve those indicators during the lengthy process.

Dr. Su asked about cost. Dr. Klein noted that a major cost is added staff during the application process.

Dr. Su asked for public comment. Anya Kosakowska, RN, commented on nursing leadership.

11. Healthcare Advocacy and Emerging Challenges and Trends

Dr. Klein serves on several boards at the state and local level, including California Hospital Association and the Hospital Council of Northern & Central California, and participates in and addresses meetings and symposia. He will report regularly to this Board.

There is a new regulatory department of HCAI, the Office of Healthcare Affordability (OHCA), which focuses on slowing spending growth, promoting high value, and assessing market consolidation. Healthcare Affordability Board will set spending targets for providers and approve key benchmarks. Healthcare Affordability Advisory Committee comprises various clinical and industry experts to advise on factors contributing to cost growth and identify ways to save costs to consumers and providers. Focus is on evaluating market failures of consolidations, mergers and acquisitions, partnerships, divestitures, etc. Ultimately, all such action would require review and approval of this special council, with an effort to prevent increasing the cost of care. Timeline goal for instituting this process is 2026. This has caught the attention and support of statewide advocacy groups.

12. Committee Reports

A. Finance & Audit Committee

Dr. Alfrey reported that the committee met on July 25, reviewed the 2024 District Operating Budget and recommended it for approval by this Board, and that approval was given earlier in tonight's meeting.

The committee also reviewed the District Investment Portfolio Policy and recommended it for approval by this Board, and that approval was given earlier in tonight's meeting.

B. Lease & Building Committee

Ms. Rienks reported that the committee met on July 19. They reviewed the 7 RFPs that were submitted for the District logo rebranding. At their next meeting on July 23 the committee will choose 3, and then will present them to the full Board at the September 8 meeting.

The next Community Health Seminar will be on "Skin Cancer" on September 19 at 5:30 pm in the hospital's Conference Center, an in-person only event that will be recorded and posted. After the presentation will be private screenings for members of the public who wish an initial observation and who may be given a suggestion to seek medical advice.



The committee discussed the following seminar to be “Healthy Eating for the Holidays”. Ms. Ramirez suggested giving an interactive healthcare career day. The Board generally supported both suggestions.

13. Reports

A. District CEO's Report

Dr. Klein reported that there is much outpatient activity in imaging throughout the enterprise, mostly in x-ray and MRI.

Final construction work by McCarthy under warranty should be done in October, for sub drainage and exterior leak issues.

The master facility plan looks to the growth over the next 10 years. This will be the focus of the MHMC Board Retreat in October, and then brought to the District Board at their next annual retreat.

Healthy food vending options are being installed in the Creekside Café for access 24/7.

The hybrid OR construction will be complete in October.

Pharmacy compounding room construction is beginning with the goal of completion in let 2024.

The cardiology rooms in the Cedar Pavilion are undergoing cosmetic refresh.

Crisis de-escalation training is ongoing, with most hospital staff completing it. Next focus is on the outpatient clinics with training options for both in-person and video.

Dr. Klein, Dr. Alfrey and Ms. Ramirez recently attended the AHA Leadership Summit in Seattle and each participated in excellent meetings and sessions and heard outstanding speakers.

B. Hospital CEO's Report

Dr. Klein reported that he and the finance team are working hard to finalize the hospital's 2024 budget. Primary challenges are reimbursement rates with Medicare and other payors, and controlling expenses.

Diligent work in the Network continues on patient access, particularly in primary care.

Construction has begun on the 15,000 square foot multi-specialty clinic in Petaluma.

Plans are on hold for the Ambulatory Services Building, as master facility planning raises further issues and questions.

The helipad issue is gathering increasing support in the community and beyond.

Initial Diversity, Equity and Inclusion (DEI) summary report has been received, with core areas measured were organizational structure, knowledge, shared understanding, and outreach/partnership. We scored neutral or fair in all the areas, with the most opportunity being in organizational structure. Next stage is aligning leadership expectations.

Our cyber security technology is now including forming policies and strategies to address Artificial Intelligence. An Innovation Council will evaluate emerging technologies and AI.

The recent CAP lab survey passed.

Many new nursing grads have been hired this year and they are all doing great.

We are a “B” rating in the Leapfrog scores, with continued focus on attaining “A”.



C. Chair's and Board Members' Reports

Dr. Alfrey reported that at the AHA Summit he attended, he further understood how well MHMC is doing financially. He reported that the community health fair event that he and Ms. Ramirez and Ms. Kinney's team are putting together will be at the Boro Community Center in San Rafael on August 26, with stations on diabetes, hypertension, and healthy eating. He reported that e-bike accidents and serious injuries are greatly increasing.

Ms. Rienks reported on research and reports regarding Black Californians experiencing discrimination in health care.

Both Ms. Sparkman and Ms. Rienks commented on the difficulty of finding primary care in Marin. Dr. Su would like that discussed at the next Board meeting, and will ask Dr. Matt Willis to address the Board.

14. Agenda Suggestions for Future Meetings

Access to primary care in Marin.

Continued report on advocacy.

Patient demographics in Marin.

15. Adjournment of Regular Meeting

Dr. Su adjourned the meeting at 8:02 pm.

Tab 3



SUPPORT



TRUST



UNITY



EXCELLENCE

Marin County Public Health: 2023-2024 Priorities

Matt Willis, MD, MPH

Public Health Officer

September 12, 2023

What Role Do We Play?



“Helping someone else through difficulty is where civilization starts.” -Margaret Mead

Marin County Public Health Priorities: 2023-2024

Pandemic recovery

Overdose prevention

Public health impacts of climate change

Outbreak prevention and control

Reducing gaps in life expectancy

Marin County Public Health: Strategic Focus 2023-2024

Public health communications

Data and outcomes

Partnerships

Focus on equity

Innovation



Requests for disability accommodations may be made by phoning **(415) 473-7159** (Voice), CA Relay 711 or by e-mail at **NTyler@marincounty.org**.

Public Health Agency

VS

Public Health System

Public Health Dashboards

MARIN HEALTH & HUMAN SERVICES Resources Events RFPs Services How Do I? Select Language

Marin County Public Health Dashboards

Home » Marin County Public Health Dashboards

We create public health dashboards so Marin residents can explore data on important health outcomes and factors. We will continue to add dashboards as new public health priorities emerge.

Reportable Communicable Diseases



Find counts and rates of reportable communicable diseases overall and by demographic subgroup from 2013-2022.

COVID-19



See our data on COVID-19 transmission, outcomes, and vaccination coverage.

Life Expectancy



Explore life expectancy in your neighborhood and what Marin HHS is doing to advance equity for all residents.

OD Free Marin



Find data related to drug overdoses and OD Free Marin performance metrics.

COVID-19 Community Assessment



Learn more about what Marin residents in different neighborhoods told us about the COVID-19 pandemic response.

Hepatitis C



Learn about the burden of hepatitis C in Marin and progress toward our Coalition's goals.

Influenza/RSV



See data related to influenza and respiratory syncytial virus (RSV) in Marin residents.



SUPPORT



TRUST



UNITY



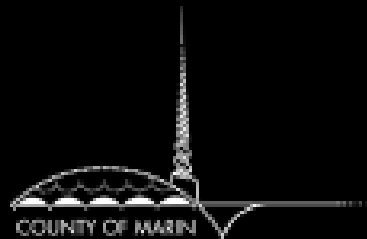
EXCELLENCE

Thank You

Marin Health & Human Services

20 North San Pedro Rd San Rafael CA 94903

marinhhs.org



Tab 4

Companies responding to RFP request	Located in Marin?	Budget	Previous clients	Initial Thoughts
Learfield Creative	No	15 - 20K	LOTS of sport teams, athletic wear	Very masculine and sports oriented
Eric Axelson	No, but lived in Marin as a kid	6.5K	Target, Geek+, Bibles for America, a church, Goodwin Organics	
Watson Creative	Might have an office in Sausalito. Did have a story in beginning of proposal connecting to Marin	36K to 82K	Many, including Kaiser, Disney, Bank of Marin, Oregon Coast Hospital, Autism society	Large company with international presence. Has done work for non profits and for profits
thevisualfactory	Yes - San Rafael	\$2250-\$3750	Center for Domestic Peace, Marin Home Care Assoc., New Leaf Therapy Group, NewGen Surgical	Nice designs and graphics/illustrations, variety in designs
CP Creative Studio	Yes - San Rafael	\$2,500	Bay Area Neurofeedback - Carl Shames, Michelle Perro, Stablized Chiropractic	A couple of typos in proposal. Small number of clients, and those have small businesses
AreaBeats LLC	Yes - San Rafael	\$12,156	Cisco Jabber Beyond On,	Did some sample logos for us
John McNeil		\$15K	MHMC, Google, Apple, Intel	https://www.mymarinhealth.org/

Tab 5



RFP – Marin Healthcare District Logo Proposal

Professional History & Contact Information

- Contact person – Camilla Saufley
- Title – Design Lead and Creative Director
- Company name and address – The Visual Factory, 1005 A street suite 314, San Rafael, CA 94901
- Company website – www.thevisualfactory.com
- Direct telephone/mobile phone – 415.335.2428

Bio:

Camilla Saufley, the owner and creative lead at The Visual Factory has over 20 years of design and marketing experience, in both corporate and freelance capacities. See more below in project staffing section.

Personnel

Project Staffing

Camilla Saufley, the design lead on the project has over 20 years of experience in corporate marketing and design and as a business owner and creative director. She has created strong brands for non-profits and for profit businesses in a multitude of markets including medical (both device and organizations), technology and many local small businesses throughout the Bay Area. She is a graduate of the SF Art Institute and has many continuing education credits from SF State and the Adobe Expert Design program to name a few.

Process, Timeline and Estimate hours

Our process starts with discovery through mood boards and a creative brief for the client to explore the meaning and mission behind their brand and messaging. Through this we can better understand how to best design and market to the intended target audience, providing meaningful engagement with the brand.

Projected timeline would be approximately 4 weeks from proposal approval and project award.

Week One: meet with client and begin discovery process by providing creative brief and building mood boards for approval.

Week two: review mood boards and begin logo design

Week three: review designs (4-5 initial concepts)

Week four: finalize logos and provide approved artwork in a variety of formats.

Final deliverables would be logo and brand guidelines document for use across all marketing materials.

Estimated hours of work: 38-50 hours @ \$75 hr. \$2250-3750 total

Itemized Pricing

Proposals must include an estimated cost for all work related to the tasks and deliverables outlined in the “Scope of Work”. A total estimate for deliverables is required. The proposal should clearly outline how time and cost overruns would be handled, including how the designer or agency alerts the board and discusses unanticipated changes or delays.

- Initial discovery process, writing of creative brief, meetings, phone calls and creation of mood boards – 12-14 hours \$900-1050
- First round of design comps based on creative brief and initial process – 20 hrs \$1500
- Second round of design edits based on client feedback – 5-10 hrs \$375– 750

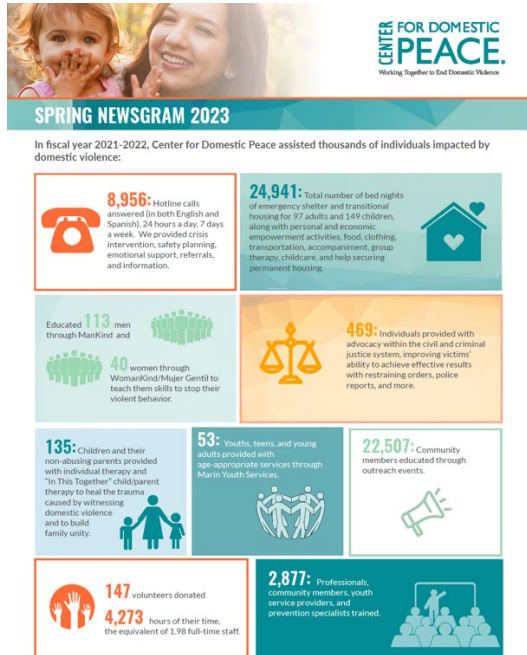
TOTAL COST **\$2775 - \$3300**

If we reach 70% of budget and more is required, The Visual Factory will notify the client and discuss what additional costs would be required for completion. These changes to the initial timeline and budget will be approved by the client before we continue. We do everything in our power to be sure that estimates match our invoices and take great pride in providing this level of comfort and security to our clients.

As stated in your outline, all expenses for the respondent’s preparation and participation in the RFP process, including, but not limited to, interviews, document preparation, communications, presentations, and demonstrations are entirely the responsibility of the respondent and will not be billable to MHD.

The chosen logo design shall become the property of MHD and shall have the right to copyright, service mark, and/or trademark the final design created on behalf of MHD.

References and Work Samples



- Center for Domestic Peace
- Non-profit
- Marla Hedlund
- Development and Community Relations Officer
- Mhedlund@c4dp.org
- Annual infographic/newsgram to report on project outreach and growth. Working with existing palette, create an infographic on brand. Creation of all icons.



- Marin Home Care Association

- Public
- Dr Doris Bersing
- Program Director
- drbersing@dorisbersing.com
- Request to design logo for Dr Bersing's home health care association. There was no previous logo so we began with discussing brand and target audience and after two rounds of revisions, came to this logo.



- A New Leaf Therapy Group
- For Profit and non-profit
- Tracey Herman Broome, MTF
- Owner and Clinical Supervisor
- tracey@newleaftherapist.com
- As Tracey's business expanded, she needed a rebrand to reflect a therapy group rather than a solo practice. Taking the existing logo and brand elements that I had created for her individual practice, we morphed them into a group logo. I also assisted in the new name creation, obtaining the URL for the new brand and website design.



- NewGen Surgical
- For Profit
- Ally Nguyen

- Director of Marketing
- anguyen@newgensurgical.com
- NewGen Surgical is a maker of plant-based medical and surgical supplies designed to remove plastic waste from many products used in the OR. We designed the logo to reflect on the concept of circularity in economy and production which uses an upcycled agricultural waste product which is repurposed into a hardened plant-based, compostable material. This was the initial logo versus a logo redesign.

We thank you for the opportunity to provide this proposal and look forward to hearing back from you once you have reviewed and made your selection.

All the best,
Camilla Saufley
The Visual Factory

Tab 6



PROFESSIONAL HISTORY & CONTACT INFORMATION

Contact person: Christopher Panny
Title: Graphic Designer
Company name and address: Cp Creative Studio, 51 Clayton Street
San Rafael 94901
Company website: <https://CpCreativeStudio.com>
Direct telephone/mobile phone: 415 635 6842

Include a brief description of the relevant experience of key staff, designers, and management personnel: 12 years of experience as a designer for print and web formats. I have worked with a variety of clients in the wellness and healthcare industries. These include Isagenix, TRX Training, GMO Science, Balanced Body and Spirit Rock Meditation.

PROJECT STAFFING

Qualifications

I have trained with Adobe Certified Experts which gave him an edge over other designers in that I knows the interfaces very well for the Big 3 (Illustrator, Photoshop & InDesign). This advantage allows me to use multiple workflow strategies which saves production time. I enjoy working in a collaborative environment and take direction well from my clients. My work has been validated in the numerous testimonials posted on my Google Maps company profile – (CpCreativeStudio.com), dating back to 2017.

Engagement Strategy

We schedule an initial consultation with all parties involved in the project. The goal is to provide clarity on the client's expectations and e:

- Understanding the client's vision and message.
- Collaborate on ideas.
- Client conveys the types of electronic and print formats for final version will be adapted to.
- Create a timeline for providing an initial draft and subsequent revisions.

The project is estimated to require 50 hours from start to finish.



Itemized Pricing

Description	Time	Cost
Four initial logo samples incl. typeface, symbol and research	35 hours	\$1750
Revisions	4 hours	\$200
Adaptation of final to print formats (stationary, envelopes, business cards, labels)	6 hours	\$300
Adaptation for final to digital formats (website, apps)	5 hours	\$250
Consultations		
	50 hours	\$2,500

A 50% deposit is required before starting the project.

Upon completion of the project, the balanced is due within 30 days.

If additional edits or revisions are requested after the project is completed, my fee is \$100 / hr. I am negotiable on this, depending upon the complexity of the edits.



References:

Bay Area Neurofeedback

Neurofeedback services

Carl Shames

Ph.D. (Doctor of Psychology)

510 847-3844

carl.shames@gmail.com

Project description: In 2017 Dr. Shames had a four-color palette at the onset of the project that was intended for his company website. I took the initiative to research his competitors as a first step to distinguish his brand. He wanted something that had a holistic feel that wasn't sterile. I submitted a typeface (font) treatment with the company name set to 12 different font samples to see if one or more suited his tastes. With the name being long, he felt a thin font weight would look better than a bold or regular. When we discussed a symbol to compliment the logotype, I pitched the idea of drawing a cross shape. I came up with an intertwining ribbon shaped like a cross. It supports the theme of neurofeedback "rewiring" the brain in a safe manner for his clients.

Dr. Michelle Perro

Pediatric services

Michelle Perro

MD, DHom

415 609 3541

mdperro@gmail.com

Project description: my client hired me to design a logo for her online medical practice. She had a visual element already in mind, but needed help in crafting a definitive logotype with additional visual elements. I submitted several typeface treatments with a blend or regular and bold weighted fonts. The contrast of these made the company name more readable. Plus, many in her network call her by her first name, which had the bold weight applied to it.

For the additional elements, I like to use a creative process called "mind mapping". I take a blank sheet of paper and put the company name in the middle. Then I write down words or phrases that complement the current brand and client's vision. These phrases help me to think outside the box and see the company brand in a manner that I otherwise might not have considered. It's how I came with adding children's hands to the overall design.

When I did mind mapping, the order of ideas were as follows:

Michelle Perro, MD — pediatrician — children — hands.



creative STUDIO

Stablized Chiropractic

Chiropractic services

Drew Stabile

DC

415 472 2232

info@stablizedchiropractic.com

Project description: Dr. Stabile requested a logotype with supportive visual elements that complimented his commitment to wellbeing. He had a simple 2-color palette in mind. I submitted some typeface ideas with bold weight to support a feeling of sturdiness and reliability. Then I took to my mind mapping technique and listed several phrases of what a healthy spine meant to me. It was through these word associations that I came with up incorporating four vertebrae in a column or pillar next to the company name. It enhanced the idea that a properly adjusted spine is strong and healthy.

Tab 7

● Building Brands is What We Do



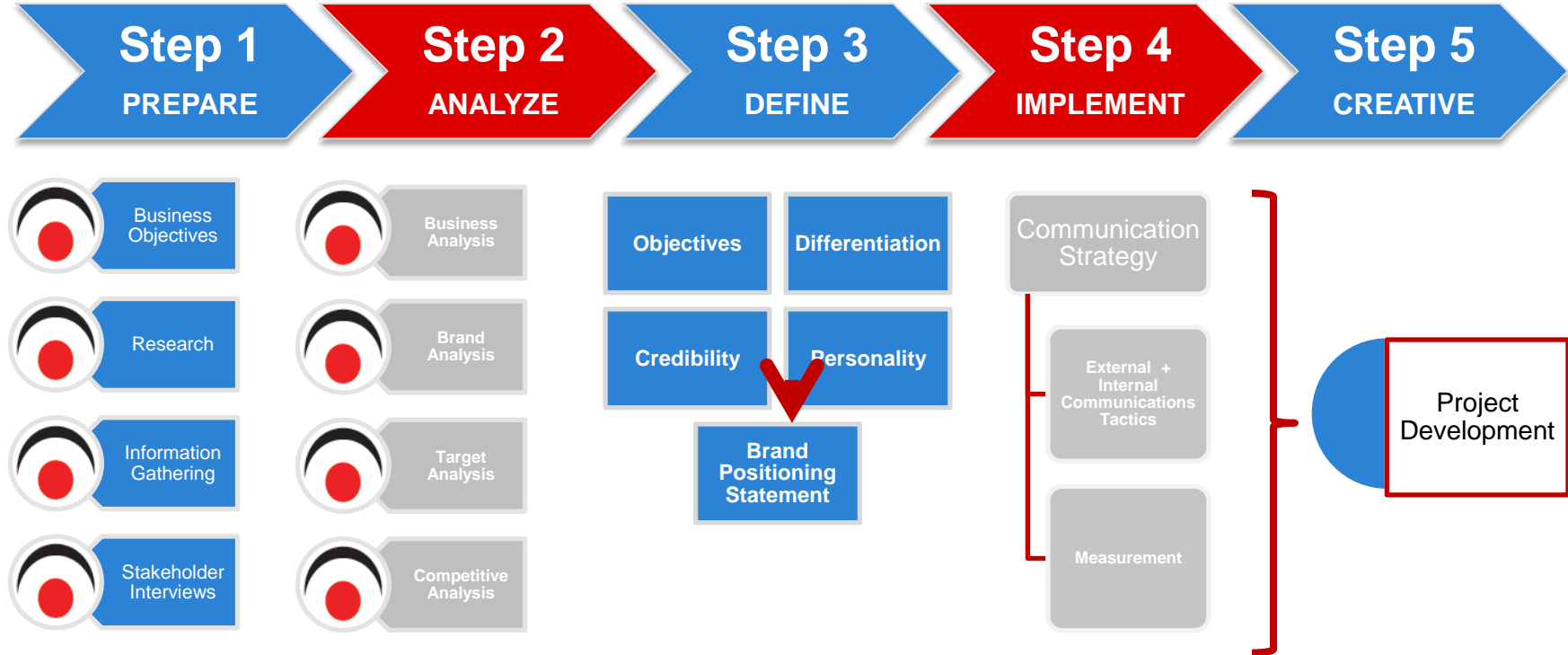


Our Core Services



Our Process

Milestones to Achieve



Complementary Brand Goals

Let's join the MHD brand family in "look and feel"

MHD **"looks"** like this...



And **"wants"** to be more like this...



● What is The Brand Language?

MHD has been serving the health needs of its community since 1946.





Original look redefined

Ideation: Reinventing the old look with Marin Health® palette and font

Please note: Font and color palette was not available during preliminary comp design.



Creating unity symbolism

Foundation of thinking: Bringing two parts together in unity

Please note: Font and color palette was not available during preliminary comp design.



marinhealthcaredistrict

Creating expanse & integration

Ideation: Bringing it all together

Please note: Font and color palette was not available during preliminary comp design.



marinhealthcaredistrict

Creating beautiful unity & modernity

Ideation: bringing it all together in 3D

Please note: Font and color palette was not available during preliminary comp design.



marinhealthcaredistrict®

Project Timeline

Timeline: Slated for 16 weeks.

Buffer: Additional two weeks added for Board meeting or other delays.

Timeline	Week 1	Week 5	Week 7	Week 10	Week 14	Week 15	Week 16	Week 17
	10-Jul	7 Aug	21-Aug	11-Sept	2-Oct	9-Oct		
Commencement Date of Work	7/14							
Round 1 of Logo Options		8/7						
MHD Board to Review Round 1		8/8						
Feedback to Designer Round 1		8/9-8/11						
Round 2 of Logo Options Due			8/25					
MHD Board to Review Round 2				9/12				
Feedback to Designer Round 2				9/13-15				
Final Logo Due w/ Logo Guidelines					10/6			
MHD Board to Review Final Logo and Guidelines						10/10	Buffer	Buffer

Budget Allocation

Media Budget (0%): \$0
Creative Development (80%): \$10,130

Program Management (20%): \$2,026
Total Budget: \$12,156

Budget	Week 1	Week 5	Week 7	Week 10	Week 14	Week 15	Week 16	Week 17
	10-Jul	7 Aug	21-Aug	11-Sept	2-Oct	9-Oct		
Discovery Session	\$380.00							
Round 1 of Logo Options (3 versions)		\$1,500.00						
MHD Board to Review Round 1		\$0.00						
Feedback to Designer Round 1		\$0.00						
Round 2 of Logo Options Due (3 ver)			\$1,500.00					
MHD Board to Review Round 2				\$0.00				
Feedback to Designer Round 2				\$0.00				
Final Logo Due (10 versions/ 10 formats – up to 20 logos)					\$4,000.00			
Logo Guidelines (approx 30 pages)					\$2,250.00			
MHD Board to Review Final Logo and Guidelines - Edits						\$500.00	Buffer	Buffer

Tab 8

A graphic for a Community Health Fair. It features a large computer monitor with a dark blue frame. The screen displays the event title and date. Surrounding the monitor are various medical and health-related icons: a clipboard with a checklist in the top left, a first aid kit in the bottom left, a pair of lungs in the top right, and a stethoscope on the right side. Three gears are positioned along the top edge of the monitor's frame. The background is a light teal color with a large, soft teal shape behind the monitor.

Community Health Fair

Canal Neighborhood

Saturday August 26, 10-2pm

Huge thank you to all
that contributed to
this event and
volunteered their
time!

















Looking Forward to our next Community Event

