



**MARIN HEALTHCARE DISTRICT
BOARD OF DIRECTORS**

REGULAR MEETING

**February 10, 2026
MarinHealth Medical Center
Conference Center**

MINUTES

1. Call to Order and Roll Call

Chair Sparkman called the Regular Meeting to order at 5:29 pm.

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

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

2. General Public Comment

Lynn Warner, RN and Chief Nurse Representative; Christopher Perrando, Teamsters Local 856 Shop Steward; Ricardo Perez, Hospital Employee and Teamsters 856 Bargaining Team Member; April Gorham, RN; Susanna Farber, Teamsters Local 856 Representative; Steven Batson; Ruben Garcia, California Nurses Association Representative offered comment.

Speakers commented on ongoing labor negotiations between MarinHealth Medical Center and Teamsters Local 856 and between MarinHealth Medical Center and the California Nurses Association (CNA). Comments focused on healthcare cost increases, affordability of coverage, alternative plan options, and concerns regarding transparency in the bargaining process.

Speakers provided, for distribution to the Board, copies of the unions' respective strike notices and letters to the Board, presented in pill bottles.

3. Approve Agenda

Director Rienks moved to approve. Director Alfrey seconded.

Vote: all ayes.

4. Approve Minutes of the Regular Meeting of January 13, 2026

Director Rienks moved to approve. Director Alfrey seconded.

Vote: all ayes.

5. Appointment of District Board Committee Members 2026

A. Finance & Audit Committee

Chair Sparkman nominated Director Su to continue as Chair of the Finance & Audit Committee for 2026, with Director Alfrey as a member.

Ms. Farber provided public comment

Director Su and Director Alfrey have agreed and accepted the nomination. Director Alfrey moved to approve. Director Rienks seconded. **Vote: all ayes.**

B. Lease, Building, Education & Outreach Committee

Chair Sparkman nominated Director Rienks to continue as Chair of the Lease & Building Committee for 2026, with Ms. Ramirez to continue as a member.

Ms. Farber provided public comment

Director Rienks and Director Ramirez have agreed and accepted the nomination. Director Su moved to approve. Director Alfrey seconded. **Vote: all ayes.**

6. Approval of Q3 2025 MarinHealth Medical Center Report of Performance Metrics & Core Measures

Dr. Klein presented the report (Tab #2) and noted that all Tier 1 and Tier 2 metrics remain in compliance. He reported that the hospital was recently granted a three-year accreditation by The Joint Commission, effective October 25, 2025, following a successful survey.

Schedule 1: HCAHPS (Patient Satisfaction) – Dr. Chandrasena presented the Q3 HCAHPS executive summary. She reported continued high performance in “Likelihood to Recommend,” which remains above the 50th percentile nationally and frequently above the 70th percentile. Responsiveness scores improved during the quarter, and discharge information improved to just above the 50th percentile. Doctor communication remained near the 50th percentile.

Areas identified for continued improvement included nursing communication, hospital environment, communication about medications, care coordination, and maintaining a restful environment. Dr. Chandrasena explained that benchmarking comparisons are not patient mix-adjusted and are measured against all hospitals nationally rather than similar institutions, which may impact percentile rankings based on patient acuity, service mix, and demographics.

Director Rienks also requested that future reports include five quarters of comparative data to allow year-over-year seasonal comparisons.

Schedule 2: Finances – Dr. Klein reviewed the Q3 Finances.

Schedule 3: Clinical Quality Reporting Metrics – Dr. Chandrasena presented the Q3 clinical quality dashboard. She highlighted continued strong performance in all-cause mortality, improvements in length of stay and throughput, and positive trends in hip and pneumonia readmissions. She reported zero catheter-associated urinary tract infections (CAUTI) and zero falls with injury year-to-date 2025.

Areas identified for improvement include acute myocardial infarction mortality, heart failure mortality and readmissions, sepsis compliance, pressure injuries (slightly elevated compared to 2024), and post-operative kidney injury associated with increased cardiac surgery complexity.

Dr. Chandrasena reviewed Core Measure Dashboard, including CMS-reported metrics. Improvements were noted in stroke thrombolytic therapy, early elective deliveries, emergency department throughput,



outpatient stroke imaging timeliness, and hospital-acquired conditions.

Schedule 4: Community Benefit Summary – Report given

Schedule 5: Nursing Turnover – Statistics reviewed

Schedule 6: Ambulance Diversion – Reviewed

Ms. Farber provided public comment.

Chair Sparkman asked for a motion to approve the Report as presented. Director Alfrey moved to approve the Q3 2025 MarinHealth Medical Center Report of Performance Metrics and Core Services. Director Su seconded. **Vote: all ayes.**

7. 2026 Patient Experience Initiative

Dr. Chandrasena presented an overview of the 2026 Patient Experience Initiative. She reported that hospital leadership has elevated patient experience to a strategic priority across the hospital and network and is implementing a formal action plan with defined focus areas, performance improvement strategies, and accountability measures. The goal is to improve not only HCAHPS “top box” scores but the overall patient and family experience, guided by consistent application of evidence-based practices.

Key strategies include utilizing standardized percentile benchmarking data to measure performance against state and national peers; strengthening interdisciplinary collaboration; expanding education for leaders; and targeting improvement efforts. Evidence-based best practices, including those identified through Press Ganey, will inform prioritized interventions.

Dr. Chandrasena also outlined new accountability structures, including a monthly in-person Patient Experience meeting with formal reporting on performance gaps, improvement plans, and barriers. Reports will be documented and presented to the Executive Committee monthly. The first meeting is scheduled, and implementation is underway.

Dr. Klein emphasized that patient experience is a top organizational priority for 2026 and expressed confidence in the leadership and structured approach to achieving sustained improvement.

8. Receive Results of Petition Review from Marin County Registrar of Voters Regarding Citizen Parcel Tax Initiative Measure; Ballot Placement

Dr. Klein reported that District residents circulated a petition to qualify a parcel tax measure through the Citizens Initiative process. The signatures were submitted to the Marin County Registrar of Voters in January for verification. The District has now received formal notice that the Registrar completed the review process.

Dr. Klein explained that once a citizen initiative is qualified by the County, the Elections Code requires the Board to place the measure on a ballot. The Board is not deciding whether the initiative will be submitted to voters, it is deciding when the County-qualified initiative will appear on the ballot. The Board’s practical options are to place the measure on the November General Election ballot or to call a special election that consolidates with the statewide primary election scheduled for June 2.



Although this item was agendized in anticipation of receiving notice, this matter was not ready for Board action because notice was received shortly before the meeting and the District's elections counsel was still preparing the required resolutions.

Dr. Klein recommended that the Board adjourn this meeting to an adjourned regular meeting pursuant to Government Code Section 54955 and continue consideration of this item at 5:30 p.m. on February 24, 2026. At that time, the Board will review the materials and determine the appropriate election date.

Chair Sparkman indicated that the Board would consider the recommendation at the time of adjournment.

9. Healthcare Advocacy and Emerging Challenges and Trends

Dr. Klein reported that healthcare advocacy activity at the state and federal levels has intensified amid a rapidly evolving political landscape. At the state level he noted an unusually competitive California gubernatorial election cycle, with eleven declared candidates and no clear frontrunner. Four candidates are polling at approximately 13 percent, with the remaining candidates dividing the balance. Dr. Klein stated that the outcome of this election will have significant implications for healthcare policy and hospital related priorities.

Dr. Klein reported that the State faces a significant projected budget deficit and cautioned that healthcare funding is often considered when addressing state budget shortfalls. He added that redistricting and the upcoming congressional midterm elections may also influence policy decisions during the final two years of the current federal administration.

Dr. Klein reported that the recently enacted federal budget agreement, signed on February 3, extended key provisions including the Hospital at Home program and telehealth, and implemented a two-year elimination of Medicaid Disproportionate Share Hospital (DSH) cuts. He noted that the legislation provides multi-year funding for community health centers through fiscal year 2026 and includes enhanced oversight and transparency requirements for Pharmacy

Dr. Klein also reported that the legislation reduces Medicare Part D cost-sharing for low-income beneficiaries. He also noted the five-year reauthorization of the Dr. Lorna Breen Health Care Provider Protection Act, provisions supporting pediatric cancer drug research, and measures simplifying Medicaid enrollment for out-of-state providers.

Dr. Klein reported a significant exclusion in the federal legislation: the non-renewal of Affordable Care Act premium subsidies that expired in 2025. He stated that the absence of these subsidies may reduce coverage enrollment and negatively impact patient access to care and hospital operations.

Dr. Klein reported that the California Hospital Association (CHA) is working with the California Department of Public Health (CDPH) on licensure processes, plan review procedures, and new staffing regulations for acute psychiatric hospitals.

Dr. Klein also reported that more than 60 healthcare-related ballot initiatives have been introduced for 2026, addressing areas such as artificial intelligence, allied health professions, confidential information, drug prescribing, mental health, and professional licensing. He stated that these measures are under review and that a more information will be provided at future meetings, with focus on issues impacting Marin and North Bay patients.



Ms. Farber provided public comment.

10. Committee Reports

A. Finance & Audit Committee

Finance & Audit did not meet. No report given.

B. Lease, Building, Education and Outreach Committee

Director Rienks reported that the Lease, Building, Education & Outreach Committee met on January 20, 2026 and had a productive discussion regarding upcoming community education and outreach initiatives. She noted that Dr. Molly Kohler will be stepping away from the Committee. Director Rienks expressed appreciation for Dr. Kohler's service.

The Committee discussed seminar planning for the coming year and reported increased interest from community partners seeking collaboration. The Food Bank has offered to distribute District materials during food deliveries, and the Committee is exploring appropriate content and partnership opportunities. Vivalon has also expressed interest in partnering on a senior-focused event related to fall prevention and health screening. In addition, a donor has offered financial support for an all-day seminar focused on women's cancers, and the Committee intends to move forward with planning that event.

Director Rienks reported Careers in Medicine Day is scheduled for March 5, 2026 and noted strong interest for the program. The Committee is exploring the feasibility of hosting the event twice annually to expand access.

The Committee also requested that a representative from Behavioral Health present to the Board on the ASPIRE program and provide an update on current mental health initiatives.

Additional outreach activities under consideration or confirmed for participation include senior fairs throughout Marin County, the Marin City Women's Health Fair, partnerships with local libraries for health education events, an infant CPR event, and Heart and Human Health Day in Marin City.

Director Rienks reported the committee discussed potential seminar topics for the year, including dementia, perimenopause and menopause, metabolic health, diabetes, weight management medications, hormone therapy, and bone health, with consideration given to combining several of these topics into a comprehensive metabolic and women's health seminar.

Director Ramirez expressed gratitude for the significant staff effort required to support community events and thanked the team for their continued engagement.

C. Primary Care Task Force

Director Rienks reported that the Primary Care Task Force is moving forward with the interview process. Interviews have been scheduled, beginning with the Director of Primary Care Access, with several meetings set for late February. She noted that the Task Force will conduct an initial round of interviews and then evaluate the questions and information gathered, refining its approach as needed. Director Rienks stated that the group is taking an iterative approach to better understand primary care access and looks forward to reporting back as the work progresses.

11. Reports

A. Hospital CEO's Report:

Dr. Klein reported that 2025 was a year focused on building capacity, improving quality, and expanding access across the hospital and medical network. He noted significant growth in cardiovascular services, imaging, inpatient care, emergency department volumes, and ambulatory services. He also reported strong regulatory performance, including successful accreditation surveys for The Joint Commission, trauma, stroke, laboratory (CAP), diabetes services, and a recent pharmacy survey in early 2026 with no findings.

Dr. Klein reported substantial progress in access to care. The organization recruited 11 new primary care providers in 2025, with six additional offers extended. As a result, the primary care waitlist was reduced from approximately 3,600 patients to zero within seven months. Patients are now able to obtain new primary care appointments within one to two weeks. Recruitment efforts also included cardiology, cardiac surgery, OB/GYN, pediatrics, neurology, orthopedics, and other specialties to support service line growth.

He also reported implementation of enterprise-wide referral and scheduling infrastructure, including, standardized booking processes, MyChart integration, and web-based self-scheduling, with primary care self-scheduling expected to launch shortly. Dr. Klein also reported the call center capacity increased while call abandonment rates decreased. Improvements were also reported in ease-of-scheduling scores.

Dr. Klein reported continued advancement of the organization's reputation management program, including real-time patient feedback collected at the point of care. As a result, Medical Center ratings improved from 3.1 to 4.2 stars, the medical network from 1.37 to 4.2 stars, and imaging from 1.34 to 4.8 stars. The organization received an increase in new Google reviews, representing significant growth in verified patient feedback.

Dr. Klein reported the average daily census remains elevated, emergency department visits have increased and ED admissions also have increased. Cardiac bed capacity increased by 25 beds.

Dr. Klein reported exceptional quality and safety outcomes, including zero catheter-associated bloodstream infections, zero catheter-associated urinary tract infections, and zero MRSA infections in medical-surgical units for the year. The organization reported no falls with injury in 2025, a fall rate improvement to 2.2, near 100% hand hygiene compliance in the NICU, a reduction in the ED "left without being seen" rate to 0.9%, and a 20% improvement in median time to bed.

Dr. Klein reported continued advancement in clinical informatics and innovation, including deployment of AI ambient listening/scribe technology to more than 110 providers. Early feedback indicates improved efficiency, reduced documentation burden, and enhanced provider work-life balance. Additional IT enhancements included upgrading approximately 1,200 workstations, strengthening cybersecurity through enterprise data loss prevention and identity protections, and implementing disciplined IT project governance.

He reported ongoing infrastructure and facilities readiness initiatives, including pharmacy compounding upgrades, fire alarm modernization, generator replacement, elevator modernization,



and progress on the Bloom Energy project. Planning for 2030 seismic compliance continues, and documentation has been submitted under AB 869 seeking a three-year extension for district hospitals.

Dr. Klein noted successful stabilization of the Workday HR system following its implementation, providing employees with real-time access to pay information, benefits, and self-service tools, and improving overall HR efficiency.

In response to Director Ramirez's question regarding support for immigrant employees and their families, Dr. Klein stated that MarinHealth provides care to all patients without regard to immigration status and does not inquire about such status. He affirmed the hospital's commitment to a safe and welcoming environment for patients and staff. He noted that external enforcement personnel may not access patients or employees without a judicial warrant and that established legal protocols are followed to protect privacy and rights. Dr. Klein added that the organization offers support resources, including the Employee Assistance (EAP), and continues to communicate clearly with staff to reinforce its commitment to confidentiality, safety, and equitable care.

Dr. Klein concluded that 2025 was a productive year with strong operational, clinical, and strategic progress, and that 2026 is off to a busy and positive start.

Ms. Farber provided public comment.

B. Chair's and Board Members' Reports:

Director Rienks noted that in prior strike situations, temporary traveler staff were brought in for a three-day period to maintain operations.

Dr. Alfrey reported that the Department of Transportation Safe Streets for All grant application advanced to the scoring stage but did not receive a high score. He noted this was not unexpected, as the prior application was largely focused on automobile and traffic-related elements. The District has been invited to reapply during the final year of available funding. Dr. Alfrey will meet with the agency to strengthen the application for resubmission. Materials submitted in connection with the grant will be circulated to the Board for review.

Dr. Alfrey also reported on Trauma Services will focus on reducing ground-level falls and evaluating potential correlations between new diagnoses, medication changes upon hospital discharge, and increased fall risk.

He stated that the American College of Surgeons has expanded expectations for trauma centers to emphasize community safety and public injury prevention initiatives. In alignment with these standards, Trauma Services will also analyze areas with higher incidences of auto-pedestrian accidents, including zones near schools, sharp intersections, and shopping centers. Dr. Alfrey indicated that collaboration with the County will be necessary to obtain more comprehensive data, as not all incidents result in presentation to the trauma center.

Chair Sparkman reported on the recent meeting of the Marin Commission on Aging. She shared that on March 8, 2026 Dr. Santori will present a talk entitled "The Future of Public Health" from 3:00



p.m. to 5:00 p.m. at Westminster Church in Tiburon. She noted the presentation may be of interest to Board members and the community.

Chair Sparkman also reported that fall prevention was a dedicated agenda item at the Commission meeting. She advised that the County has made \$100K available for a two-year grant program to support smaller nonprofit agencies that may lack resources to develop educational materials, such as presentations and related content. The funding may be allocated among multiple agencies.

Ms. Farber provided public comment.

12. Agenda Suggestions for Future Meetings

Director Rienks suggested Rebecca Maxwell from Behavioral Health to speak on the ASPIRE program.

13. Adjournment of Regular Meeting

Chair Sparkman proposed that, pursuant to California Government Code Section 54955, the Board would adjourn the Regular Meeting to an Adjourned Regular Meeting to be held at the same location on February 24, 2026 at 5:30 p.m.

Director Su indicated that he had a scheduling conflict with the proposed time of 5:30 p.m. and asked whether the time could be adjusted. Following brief discussion, the Board agreed to move the meeting time to 6:30 p.m. on February 24, 2026.

A motion was made by Dr. Su and seconded by Dr. Alfrey to adjourn the Regular Meeting to an Adjourned Regular Meeting on February 24 at 6:30 p.m., at the same location. Vote: all ayes.

Chair Sparkman adjourned the Regular Meeting at 7:12 p.m.